

**Staff Wellbeing Within the Context of Higher Education:  
A Mixed Method Study**

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## **Abstract**

The effects of stress and burnout on performance and staff retention in the education sector has been a focal point of the research in recent years. However, less is known about staff perceptions of wellbeing and their lived experiences in the context of higher education. This study adopted an exploratory mixed methods research design to gain insight into how staff perceive their wellbeing, to understand the factors that have diminished or enhanced their wellbeing at work, and to examine the effectiveness of current university interventions.

To explore staff perceptions of wellbeing and to gain an in-depth understanding of their lived experiences, 21 semi-structured interviews (Study 1) were conducted, revealing that staff wellbeing is promoted through personal development opportunities, support from colleagues, the ability to make a difference to the lives of others, and by the nature of their professions. Yet staff wellbeing is undermined by the organisational policies and processes that prioritise student wellbeing and the lack of management commitment and interventions available to support them. Staff offered insights into what can be done to promote their wellbeing including a review of Black, Asian, and Minority Ethnic (BAME) experiences of wellbeing, opportunities to engage in wellbeing discussions, and the development of a wellbeing charter and index.

The second research study was performed to further investigate the association between anticipated future wellbeing and current wellbeing experiences in Higher Education, organisational culture, the dimensions of wellbeing, and available services to support staff wellbeing and responsibility for wellbeing, as identified in Study 1. Data was collected from an online survey (Study 2) of 299 staff working in higher education. The results from the survey indicated several factors affecting staff future wellbeing, including

current wellbeing, university commitment and communication about staff wellbeing. Future wellbeing and current wellbeing were strongly and positively correlated. A linear multiple regression model identified three key factors explained anticipated future wellbeing: their current wellbeing, work demand and stress and the availability of support from colleagues and managers. This study also presents a new measure to assess staff wellbeing in higher education, shown to have high construct validity and internal consistency.

The final study aimed to identify and examine current staff wellbeing policies in higher education to classify the key approaches taken to supporting wellbeing and highlight areas requiring further exploration. A total of 135 UK universities responded to a Freedom of Information Request (FOI) (Study 3). Results suggest that wellbeing services are provided, including counselling and occupational therapy services. However, the records regarding the use of these services are incomplete, with universities indicating they do not hold the information requested. Similarly, while university staff wellbeing policies indicated an absence of a working definition of wellbeing in several cases, they did incorporate definitions related to the physical, social, and mental health of staff. Among those reviewed, 35 universities indicated they had a specific policy on staff wellbeing and the majority of these did not specify who had contributed to their development or give a review date for the policy.

Together, the outcomes of these three studies provide a comprehensive understanding of staff wellbeing in Higher Education, although limitations do exist. For example, the study included staff in pre and post 1992 universities only and it is recognised that private universities were excluded. Further research can extend this study by including private and international universities to build on current knowledge in this under-reported area.

**Keywords:**

Staff wellbeing; Higher Education; Context; Services; Management; Scoping review

## **Declaration**

This research is based on my own work and has not previously been offered for any other degree. All the studies (where necessary) have received independent ethical approval letters from Nottingham Trent University.

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In the words of Martin Luther King Jr.

“If you can’t fly then run, if you can’t run then walk, if you can’t walk then crawl, but whatever you do, you have to keep moving forward.”

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## Chapter 1. Introduction

Our university sector is a great British success story.  
**(Department for Education, 2022, p. 3).**

### 1.1 Overview

There is much to be proud about the UK University sector. Higher Education in the UK is recognised as having world class institutions of innovation and research, with four universities being ranked in the top 10 of Global Higher Education institutions (Times Higher Education (THE)). UK universities have steadily attracted students from across the world (16.3% in 2019-20, University UK) and year on year the number of students studying at universities has increased, with the total student figure standing at 2,413,155 in 2019-2020. Universities continue to support knowledge and skills acquisition for the individual, contributes to the employability needs of industry, local employers, and the UK economy. However, it is recognised that universities are complex institutions supported by staff, involved in research, teaching, administrative and professional support roles, including IT, library facilities, campus maintenance, student finance and support. Furthermore, the total operating expenditure to support the university sector in the UK was 36 million in 2019-20(across 138 UK Universities, Higher Education Statistics Agency (HESA)finance records).

Despite the significant roles these staff have on the universities' core business the focus still has largely been on understanding and responding to student wellbeing. In 2015, University UK and Mental Wellbeing in Higher Education(mwbhe) published, "Student mental wellbeing in Higher Education: Good Practice guide." The publication highlighted the importance of supporting the emotional and psychological wellbeing of students. Yet, the report also emphasised that the concerns of staff and students are inter-connected and

mutually dependent. Therefore, staff wellbeing is not only important from the viewpoint of staff but for the wellbeing of students in Higher Education. In this mixed method study staff perceptions of wellbeing and the university management of staff wellbeing will be explored. This chapter provides the reader with the rationale for the research, presents the problem statement of this study and explains the scope and structure of the thesis.

## **1.2 Study Context and Rationale**

The wellbeing of teachers in the United Kingdom (UK) has been identified as a priority area of inquiry, due to the reported high levels of stress and the increasing numbers of teachers choosing to leave the profession (House of Commons, 2004; Roffey, 2012). Similarly, empirical data has shown equally reduced levels of teacher wellbeing around the world, with staff reporting high levels of burnout and stress internationally (Le Cornu, 2013; Lester et al, 2020). At the same time, research has identified that, in the Higher Education sector, staff are also experiencing work stress and burnout (Bell et al,2012) and researchers have sought to explain the factors in the university context that are associated with stress and burnout (Kinman and Jones, 2008). The negative effects on staff wellbeing are well known, with authors highlighting deteriorating staff health, emotional exhaustion, hypertension, job stressors and work-life merge (Dreyer et al 2010; Teixeira et al, 2021; Fetherston et al, 2021). Within a university context, factors that influence both negative and positive wellbeing include high levels of job demands, negative coping strategies, compared to positive personality and exhibiting positive coping approaches contributing to positive wellbeing at work (Williams et al, 2017). In addition to the individual differences and personality characteristics identified in the study above there is a need to understand the organisational processes and interventions that exist to support staff wellbeing in Higher Education, and how these might influence staff wellbeing (O'Brien and Guiney's, 2018).



Recent statistics suggest the numbers of staff employed in Higher Education is increasing (Higher Education Statistics Agency, 2021), with 439,955 staff working in higher education in 2018/19 compared to 429,560 in 2017/18. In contrast, a UK report by the University and College Union (UCU, 2022) indicates that 60% of staff working in Higher Education plan to leave the profession in five years. This has significant implications for staff resources within Higher Education. It is, therefore, essential that attention is given to the factors staff perceive are important to their wellbeing, given the current trends of staff leaving the profession. With increasing numbers of staff leaving the teaching profession due to stress and workload demands, understanding staff perceptions of wellbeing is essential to help inform what is required to support staff wellbeing. However, there is currently a dearth of research available about the lived experiences of staff working in higher education and their perceptions of wellbeing.

Several considerations are specifically worth unpacking in the context of this under-researched area. Firstly, the changing landscape of Higher Education has seen increased work pressures and stress levels among staff working in higher education (Bell et al 2012). The reasons for these changes are well known, with researchers highlighting cuts in funding, increasing student numbers, organisational changes often driven by increasing local, national, and international competition; all of which has the potential to cause pressurised work contexts, burnout and strain for the staff working within higher education (Chapman and Ludlow, 2010; Watts and Robertson, 2011). Given the above set of circumstances there continues to be a need for research into the role of perceived job stress, work-life balance and work-life conflict for staff currently working in higher education. Secondly, within the school context, three broad facets of teacher wellbeing have been identified: feeling valued and cared for, feeling overloaded and job stimulation and enjoyment (Briner and Dewberry, 2007). Similarly, in the University context Straaten et al, (2016) identified the importance of opportunities for advancement, manageable

workloads and being valued by the organisation. Clearly there is need to better understand the factors that can improve staff wellbeing in higher education.

Whilst the research on the predictors that promote or diminish wellbeing are limited in the context of higher education the studies on teacher wellbeing have highlighted that student academic outcome and emotional wellbeing were influenced by the quality of relationships between teachers and students ( Murray-Harvey, 2010; Tonder & Williams, 2009). Therefore suggesting that relational quality and social capital is a factor in wellbeing throughout schools and of relevance for other learning environments, such as higher education ( Kinman & Jones, 2003).

Finally, staff wellbeing is clearly a key concern given that the absence or impairment of psychological wellbeing can impact on teacher performance ( Pilay, Goddard & Wilss, 2005). Therefore, to understand how staff perceive their wellbeing and the factors that seemingly have diminished or enhanced their wellbeing in the university context, is imperative, if we are to enhance staff productivity and performance.

Shinn and Toohey (2003) suggest a richer understanding of wellbeing is gained by integrating the contexts in which people live and work into our investigation of wellbeing experiences. This implies that wellbeing does not occur in a neutral free environment and that further exploration of the university context and its impact on wellbeing is necessary. As Shinn and Toohey (2003) indicate, greater attention should be given to the role of context, and suggest:

*“Psychologists should pay more attention to the community contexts of human behaviour. Conditions in neighbourhood’s and community settings are associated with residents’ mental and physical health, opportunities, satisfactions, and commitments.....” (p. 428).*

### **1.3 Research question**

Through understanding the context and lived experiences of staff, the aims of this research are to understand how staff perceive their wellbeing in Higher Education and investigate how universities manage staff wellbeing. In doing so, this study seeks to answer the following research question: *What is staff wellbeing in higher education and how can it be managed?*

To answer the questions posed above, the study seeks to:

1. Understand what wellbeing is.
2. Consider the ‘meanings’ given to wellbeing from a staff perspective.
3. Identify how universities have responded and managed staff wellbeing.
4. Evaluate how the university context in the UK can impact staff wellbeing.
5. Reflect on the consequences of the above and propose a model of staff wellbeing within Higher Education.
6. Make recommendations for how organisational responses and interventions can seek to support/improve academic wellbeing in the future.

This thesis will utilise three methods of data collection (semi- structured interviews, survey, and a freedom of information request) to inform the study and achieve the above aims and objectives.

### **1.4 Structure of the Thesis**

The thesis consists of seven main chapters, as follows:

Chapter 1; presents the research problem and explains the scope and structure of the thesis.

Chapter 2; is separated into two parts. The reader is introduced to the concept of wellbeing and the theoretical and conceptual frameworks associated with it in Chapter 2; whilst the extant literature on staff wellbeing in Higher Education is discussed in Chapter 2a.

Having reviewed the literature, I propose a definition of wellbeing in higher education and then present a conceptual framework relevant to staff wellbeing in higher education. The chapter concludes with the justification for this research.

Chapter 3; outlines the methodological (ontological and epistemology) approach that informs this study. This chapter explains the choice of a sequential mixed methods approach, and details the research aims, questions and hypotheses.

Chapter 4; outlines the approach and rationale of the initial study, a semi-structured interview, and describes the resulting hypotheses that will lead on to the second part of the study(survey).

Chapter 5; details the rationale for and design of the survey (the second study), the process taken for disseminating it, and the analysis of the data. The results of the survey, as relating to the hypotheses, are then explained.

Chapter 6; describes the freedom of information method used in the final study and the resulting findings. Chapters 4, 5 and 6 each conclude with a summary and discussion of the specific findings for each chapter.

Chapter 7; provides a synthesis of the results from Chapters 4, 5 and 6, and reflects on the research question. The findings are reviewed considering the staff wellbeing framework outlined in Chapter 2a. The implications of the research for practice are then established, as well as limitations and suggestions for future research.

## **1.5 Summary of the chapter**

This chapter has highlighted the importance of understanding the perception of staff wellbeing in Higher Education: an underexplored but essential research area. The structure of the thesis is explained to enable the reader to understand the direction and approach taken to this study. In the next chapter, the reader will be introduced to the literature on wellbeing. This will include a discussion of the conceptualisation of the term wellbeing and an exploration of the lived experiences of staff working in universities and the factors that have influenced staff wellbeing in higher education.

## Chapter 2. Wellbeing: A review of conceptual and theoretical frameworks

*“a complex, multi-faceted construct that has continued to elude researchers’ attempt to define and measure” (Pollard and Lee, 2003, p.60).*

### 2.1 Introduction

In the previous chapter, an introduction to the current state of Higher Education has shown that staff working in universities are reporting high levels of stress and burnout, impacted by the reduction in funding available to the sector as a whole; increasing student numbers and organisational changes resulting in undesirable workload demands. Therefore, to gain insight into staff wellbeing in higher education this chapter will discuss the concept of wellbeing and related constructs of health and stress. Wellbeing will be examined through objective and subjective approaches in the literature, including the PERMA model, Fredrickson’s (broaden and build) theory, Warr’s models (affective wellbeing at work and Vitamin model), NEFs model of wellbeing, Structured framework for defining wellbeing, Job Demands Resources (JD-R) and Workplace Climate for Self-Determination. The above conceptual and theoretical frameworks will be considered in terms of their merits and potential limitations for the study of staff wellbeing in Higher Education.

### 2.2 Definitions of wellbeing: Current challenges

There are two dominant approaches to wellbeing that can be observed in the literature: hedonistic and eudaimonic. **Hedonism** posits that an individual’s wellbeing consists of happiness, pleasure, a sense of optimism, joy, and other positive emotions and attitudes that result in satisfaction. The **eudaimonic** approach builds on the hedonistic understanding of wellbeing by adding several other components, such as personality

growth, personal goals, having a sense of purpose, and achievement, which all contribute to enriching human potential (Ryan & Deci, 2001). Both approaches are based on the individual's internal generation of meaning about what contributes to their wellbeing. The above approaches have been subject to criticism due to concerns about 'positive bias' and 'social desirability' when interpreting wellbeing research (Eckersley, 2001, 2005; Ryan & Deci, 2001). Positive bias refers to an individual's propensity to overemphasize the occurrence of positive emotions about events happening in their life, whilst social desirability occurs when a respondent provides a reply that they think is acceptable to the researcher, rather than reflecting the reality of their experiences. While recognising the potential limitations of the individual's subjective perception of their own wellbeing, this chapter proposes that wellbeing encompasses a wide range of experiences that is subjective, multifaceted, inter-connected and related to the community and society in which people live and work. This approach is grounded in Prilleltensky's (2018) definition of wellbeing as a,

*“ .. positive state of affair in individuals, relationships, organisations, communities, and the natural environment, brought about the simultaneous and balanced satisfaction of material and psychological needs; and by the manifestation of material and psychological justice in these five ecological domains.”* (Prilleltensky, 2008, pp.359-360).

Consequently, wellbeing includes mental, social, physical, and economic factors. Moreover, a person's wellbeing can also be determined by their relationships, community, and by organisations.

A growing body of research has focused on wellbeing in recent decades (Dodge et al., 2012; Pollard & Lee, 2003a; Seligman & Seligman, 2006). However, despite this attention, research into wellbeing has been criticised for the lack of clarity about how wellbeing should be defined, with some scholars pointing to the scarcity of theoretical

development,(de Chavez et al., 2005; Pollard & Lee, 2003a; Ryff & Keyes, 1995; Wassell et al., 2015) and being focused on the dimensions/ factors that are related to wellbeing, resulting in overly broad definitions of wellbeing (Dodge et al., 2012; Forgeard et al., 2011). Furthermore, it has been suggested that the lack of clarity in defining wellbeing has been complicated by researchers (e.g., in the medical and psychological fields) that have tended to dominate the breadth of definitions that encompass wellbeing to conflate it with other already defined constructs, two of which will be discussed in this section, broadly these are related to health(physical and mental health) and stress.

### **2.3 Health and Wellbeing**

According to the World Health Organisation (WHO) (1999) health has been defined as,

*“a state of complete physical, mental and social well-being, not merely the absence of disease or infirmity and its commitment to meet threats to health and promote universal wellbeing.”*

From this definition, wellbeing is contextualised within health, including physical and mental health. Additionally, within this definition there are subjective measures(own assessment) and objective ( quantifiable) measures ( such as the absence of disease). This definition of health has been criticised by some scholars as a utopian vision of health and they suggest that it is unrealistic to expect people to have a complete state of physical, mental, and social wellbeing (Leonordi, 2018). Instead, Daniels (2016), proposes the single major threat to health is that of diseases, primarily chronic conditions, such as high blood pressure and obesity, and suggests sedentary lifestyles, a lack of physical activity, and risk-taking behaviours such as recreational drugs have been contributory factors . As indicated above, wellbeing is contextualised within health and appears to primarily be based on objective definitions.



Schulte (2015) extends the definition of health from prevention and reducing disease to instead one of promoting wellbeing, at the physical, mental, and social levels. This definition of health, although a broad one suggests there are three dimensions, linked to the physical, mental health and social wellbeing. For example, according to Steptoe, Deaton, and Stone (2015), as people get older and more prone to health problems, wellbeing tends to decline. Older people are especially sensitive to the effects of social isolation (GHC, 2018), resulting in decreased levels of wellbeing. Thus, indicating that the physical and social aspects of health are potentially related to their wellbeing. However, promoting wellbeing amongst the elderly can help protect them against the effects of aging, and improve overall happiness.

As indicated earlier, wellbeing has been seen as an aspect of health. However, some researchers have suggested health is a factor influencing wellbeing. It is proposed that wellbeing is influenced by various factors including mental health (Huppert & So, 2013). One of the main risk factors for poor wellbeing is mental health. However, the conflating of factors is especially evident when discussing wellbeing in terms of health. For example, it is important to understand that mental illness increases the risk of poor wellbeing. Mental health difficulties, such as depression, anxiety, obsessive-compulsive disorder, and post-traumatic stress disorder, are associated with low levels of well-being, as well as other potentially relevant factors, such as poor job prospects, unemployment, and lower levels of life satisfaction compared to the typical population (CIPD, 2020; Watkins et al., 2009). This problem is exacerbated by poor access to mental health treatment and by the stigmatisation of mental illnesses. Therefore, suggesting the availability of effective interventions to support the mental health and wellbeing of the population is required to improve health and wellbeing experiences.

The conflation of wellbeing with mental health (positive and negative effects) has made it difficult to define wellbeing in the literature. This seemingly suggests that wellbeing differs from health, as it is seen to sit outside of the medical model of health and is an experience and evaluation of an individual's subjective wellbeing. Whilst subjective wellbeing is one way of considering this construct, it is apparent wellbeing has been conceptualised as part of health (physical and mental). However, the research also suggests that people can also report satisfactory levels of wellbeing whilst at the same time experience high levels of discrimination, oppression, morbidity, exclusion, and marginalisation (Marmot, 2020- Health Equity in England).

#### **2.4 Stress and Wellbeing**

Stress has been of interest to researchers in a variety of fields. A review of the literature suggests that stress has generally fallen into three broad field of interest: physiological (responses in body functions and tissues), psychological (cognitive factors leading to threat evaluation) (Lazarus and Folkman, 1984), and social perspectives (linked to disruptions of a social unit or system) (Chay,1990). Similarly, to health, conceptual definitions of stress have been muddled by a lack of clarity over its meaning, and phrases such as "Anxiety" have been adopted. As a result, it has been proposed that stress be perceived as a means of categorising a wide variety of experiences that include events that might cause psychological or bodily reactions inside the individual and the subsequent interplay between stressors and stress reactions. The term stressor refers to a stressful occurrence or condition that occurs in the environment or within the individual. A stress reaction or stress response is the body's reaction to a stressor that usually causes discomfort ( physical, cognitive, and emotional). Given that stress may have harmful implications, there has been a lot of interest in ways to improve stress and wellbeing in the workplace. In the area of teacher wellbeing and stress, it has been proposed that stress

has been conceptualised as a negative dimension of wellbeing, but researchers have also suggested that positive indicators of teacher wellbeing such as efficacy (Renshaw et al., 2015) and connectedness to the social environment in schools should also be considered (von der Embse & Mankin, 2021). Furthermore, research suggests that teacher stress levels increased between October and June (due to student tests and high work demands related to marking assessments), while efficacy and connectedness decreased (von der Embse & Mankin, 2021) during the same period.

## **2.5 Broad approaches and frameworks related to wellbeing**

Having provided an overview of the challenges of defining wellbeing, the objective and subjective measures to wellbeing is considered to gain insight into wellbeing, followed by the approaches and conceptual frameworks. The objective and subjective measures to wellbeing are outlined briefly below. Objective approaches to wellbeing are predominantly informed by indicators that capture aspects of education, the community, and the economy rather than individual aspects (Western & Tomaszewski, 2016). In the UK, there have been encouraging steps towards the integration of subjective and objective measures of wellbeing, incorporating alternative indicators, including ‘happiness’ and ‘anxiety’ (Office of National Statistics, 2012; Stratton, 2010). The result has been the development of a survey which captures the evaluative, hedonic, and functional elements of wellbeing. According to this approach, each context (workplace, personal life, and community) has unique cultural and structural characteristics that have the potential to impact wellbeing negatively or positively.

Moreover, more traditional measures of psychological wellbeing have focused on the absence of positive affect (mood) and the presence of negative affect (Haworth & Hart, 2012). There has been a tendency for the research instruments to focus on identifying abnormal neurotic disorders, instead of focusing on positive wellbeing. However, there

has been a shift towards measures that focus on positive indications of health, resulting in the development of the 'Quality of Life' (QOL) research measure. This relies on a broad definition of quality of life, including social, psychological, interpersonal, emotional, spiritual, and environmental factors. Similarly, the introduction of the Quality of Well-Being Scale (Q WSB) has according to Haworth and Hart (2012) focused on what is favourable rather than what is unfavourable to the individual. These newer measures acknowledge the interconnected nature of wellbeing, based on the individual's circumstances and the context they live in, along with the positive nature of wellbeing. As a result, these new measures have been used to inform decisions about resource allocations and have enhanced understanding of the wellbeing experiences of certain sectors of the community, relating to their health status. They have also been used to evaluate specific healthcare programs. According to Haworth and Hart (2012), future wellbeing research needs to consider the reciprocal interactions between individuals and organizations, while observing how cultural and environmental factors can affect, alter, or even enhance our wellbeing experience.

However, for the purpose of this chapter attention will be given to subjective measures of wellbeing that are outlined below. Subjective approaches to wellbeing capture people's subjective measures of their life. This section of the chapter will focus on 7 wellbeing theories frameworks that seek to gain subjective measures and understanding of wellbeing: the PERMA model, Fredrickson's (broaden and build) theory, Warr's models (affective wellbeing at work and Vitamin model), NEFs model of wellbeing, Structured framework for defining wellbeing, Job Demands Resources (JD-R) and Workplace Climate for Self- Determination.

### ***2.5.1 PERMA Model***

PERMA wellbeing is achieved through five measurable elements: positive emotion, engagement, relationship, meaning and accomplishment (Mendes et al, 2022). PERMA outlines a multi-faceted approach to wellbeing and outlines how to live a fulfilling life. Hedonistic emotions like joy, pleasure, and comfort are examples of positive emotions. Engagement in an activity involves being interested, involved, and engrossed in it. Relationships are composed of sentiments of belonging to the community and society, as well as of being taken care of and loved. Meaning involves using one's skills to achieve goals that are meaningful rather than for self-promotion. Accomplishment entails both a sense of success on the inside and acknowledgement from others. The PERMA profiler, a condensed assessment of PERMA, was created by Butler and Kern (2014) although it is proposed that further empirical data is needed (Kern et al., 2015). This model extends beyond the health domains and gives importance to the relational and social domains. Furthermore, it emphasises the importance of an individual's sense of accomplishment, which can be influenced by subjective (internal) and external recognition. The aspect of accomplishment may be an important consideration in the study of staff wellbeing in Higher Education.

### ***2.5.2 Fredrickson's Model***

Like the earlier model that is based on positive emotions of wellbeing the Fredrickson's theory (broaden and build) approach suggests that positive emotions including joy, contentment and love broaden an individual momentary thought and actions that can contribute to an individual's wellbeing (Fredrickson, 2004). This theory contends that the development of resources—physical, intellectual, and social is facilitated by feelings that are positive. Positive emotions encourage flexible and innovative thinking, which

supports in promoting work engagement, improving self-efficacy, and overcoming adversity. A contented person may believe that he or she has a successful career, better relationships, a happy family, and so forth. The usefulness of this approach is that efforts by organisations to promote positive emotions through the acknowledgements of staff achievements and their contributions can help broaden the capacity of individuals to think and respond differently. Furthermore, the role of positive emotions in wellbeing at work is an important factor for the exploration of staff wellbeing in higher education and to understand if this is a protective factor in their wellbeing experiences.

### ***2.5.3 NEFs Model***

Building on the importance of developing self and society the NEF's (New Economic Foundation) 2004 report, 'A Well-being Manifesto for a Flourishing Society', outlined a model of well-being that consists of two dimensions: the personal and social context. The personal context consists of two areas:- peoples satisfaction with life and people's personal development. **People's satisfaction with life**, is focused on life satisfaction, pleasure, and enjoyment and **people's personal development**, includes fulfilling potential, having purpose in life, a sense of curiosity, and flow ('a state of absorption where hours pass like minutes'). The second dimension of social context is concerned with belonging to communities, holding positive attitudes towards others, being able to contribute to society, and engagement in prosocial behaviour to support and enhance society to develop positively. This model provides a helpful framework to describe wellbeing experiences and to identify areas of wellbeing that are of higher importance to individuals. The benefits of this model are that it seeks to extend our knowledge of wellbeing beyond the individual level and portrays wellbeing as an experience connected with society. This model describes the facets of wellbeing but does not define wellbeing.

#### ***2.5.4 Structured Framework of Wellbeing***

Building on the connections of society to wellbeing McNaught (2011) proposed a definitional framework of wellbeing, in which different domains such as the individual, society, community, and family are interconnected. The framework outlined below acknowledges the complexity of wellbeing and its link to socio-economic factors and the environmental context, which can influence and shape wellbeing experiences. This framework identifies four domains of wellbeing: individual, family, community, and societal. According to McNaught (2011), individual wellbeing represents a central aspect of the framework, as this is concerned with the person's subjective view of wellbeing (including positive and negative evaluations). For example, this might relate to work-life satisfaction and the affective emotions generated from this, such as sadness or happiness. Due to the multi-dimensional nature of the model, it is recognised that the individual's wellbeing can also be impacted by other factors such as their career, financial well-being, and the wider structural conditions. The domain of family wellbeing is determined by factors such as the quality of interpersonal and intergenerational relationships and the availability of resources to support the family, as well as having feelings of satisfaction - positive and negative - about life and work. According to this domain, the family is a system that is influenced and informed by a hierarchy of subsystems consisting of family members and other significant individuals. Whilst the community domain moves beyond individual subjective wellbeing and recognises the influence of poverty, economic activity, health, and other socio-economic factors in influencing an individual's sense of wellbeing. According to McNaught (2011), although there is no universal definition of community wellbeing, the relationship between family and community is central. For example, individuals and families might possess high levels of wellbeing and social capital when they live in areas of low deprivation, whilst enjoying positive interactions with their neighbours and friendship networks. Finally, societal wellbeing is concerned

with how individuals can gain a collective sense of purpose and achievement and how they are able to participate in society. This domain has highlighted the significance of social and structural inequalities for people's sense of wellbeing (Wilkinson & Pickett, 2010). A benefit of this model is that it views wellbeing as a dynamic construct and recognises each domain as interconnected. Furthermore, the individual is seen as actively changing and shaping their story. The model is applicable whether they use subjective or objective definitions of wellbeing.

## **2.6 Organisational models of wellbeing: An overview**

### ***2.6.1 Job Demands Resources theory***

Job demands–resources theory (JD-R) proposes a framework to link the work context (job demands and job resources) with individual outcomes (Bakker & Demerouti, 2007). The JD-R suggests that working conditions which are specific to every occupation can be classified as Job resources and Job demands. According to JD-R, **job resources**, consists of, control over work, and the available support within the workplace to motivate and help individuals to fulfil their role and cultivate their personal development. It is acknowledged that job resources such as, salary/pay scale, job security, and opportunities for career advancement can impact employees' behaviour and motivation (Carver & Scheier, 2001). Turning to the second area outlined in the JD-R model, **job demands**, this comprises of work or emotional demands that can negatively impact on an individual's wellbeing. High job demands has the potential to exhaust the resources available within the individual, because it requires increased efforts that can over time contribute to psychological distress and burnout.

The distinctions between the two domains are considered important to regulate work context. For example, the presence of job resources can enhance engagement, and



conversely, the deficiency of job resources can create cynical attitudes to work (Lewig et al., 2007). Research into this hypothesised interaction effect has focused on 'psychological strains' as outcomes - that is, the effects of attitudes (e.g. satisfaction), and behavioural intentions (e.g. absenteeism ( Whysall et al., 2018) on health . While research shows that the levels and interactions of demands and resources often influence wellbeing), conclusions about the multiplicative model remain unresolved. Future research into organisational processes would benefit from examining the relationship between job demands, job resources, and personal resources (Demerouti & Bakker, 2011).

The JD-R model has been used in recent research to promote understanding of the relationship between staff wellbeing and the academic work environment. According to Mudrak et al. (2018), when applying the JD-R framework to the academic environment, job resources can include organisational support, growth and career advancement opportunities, autonomy, role clarity, and performance feedback. Job demands have tended to include work-home conflict and job insecurity (Bakker et al., 2005; Boyd et al., 2011; Barkhuizen et al., 2014).

### ***2.6.2 Workplace Climate Demand for Self-Determination***

Karanika-Murray and Michaelides (2015) suggests an alternative theory of organisational wellbeing to understand the fulfilment of these basic needs outlined within JD-R -and the advancement of wellbeing. Workplace Climate for Self-Determination (Karanika-Murray & Michaelides, 2015) articulates how organisational contexts can help to facilitate the fulfilment of three fundamental psychological needs: competence, autonomy, and relatedness. Workplace Climate for Self-Determination can be considered in two distinct ways: as the individual's perceptions of their work environment, and the shared perceptions of individuals within a work context. According to Karanika-Murray and

Michaelides (2015), the theory identifies three types of dimensions: **Autonomy-Supportive Dimensions**, which are concerned with the work environment that promotes independent decision-making and choice, enables individuals to perform and schedule their work, and allows for role flexibility and adaptability. Inherent within the work environment is a culture and set of norms which promote initiative, participation, and flexibility. **Competence-Supportive Dimensions** involve ameliorating the issue of high demands and low control, and providing feedback, appreciation, support, and guidance. **Relatedness-Supportive Dimensions** are characterised by trust, a sense of community, and the provision of support among colleagues (Nugent & Abolafia, 2006). The benefit of this model is that it offers a framework for understanding the complex organisational processes and contexts that staff operate within. The model has an underlying emphasis on self-determination, competence, and relatedness in contrast to previous approaches to staff wellbeing, which have been characterised in deficit terms – namely how stress is impacting their performance, job satisfaction, the levels of burnout experienced, and reduced retention rates. Furthermore, the model provides insight into how the characteristics of the workplace are connected to motivation. Workplace Climate for Self-Determination (Karanika- Murray and Michaelides, 2015) seeks to fill a gap in the literature by linking the individual and organisational levels.

Until now, there has been limited research, guided by theoretical frameworks, into the roles that organisational contexts and processes play in staff wellbeing. The organisational frameworks considered in this chapter - **Job Demands-Resources model** (Bakker & Demerouti, 2007) and **Workplace Climate for Self-Determination** (Karanika- Murray & Michaelides, 2015) - have the potential to offer insight into staff wellbeing. The JD-R Model offers a guiding framework for articulating the ways that job attributes, often characterised as 'resources' and 'demands', might be associated with a range of personal, social, and organisational outcomes (Bakker & Demerouti, 2007;

Schaufeli & Bakker, 2004). On the other hand, the Workplace Climate for Self-Determination (Karanika-Murray & Michaelides, 2015) takes a holistic approach by jointly considering the roles that individual perceptions and shared perceptions have in determining staff wellbeing at work. I am proposing that, alongside these two areas, a further layer which considers organizational perspectives on wellbeing can be considered. This will be referred to as 'wellbeing process' within the organization. This will enable a more explicit focus on the measures by the organization to improve and support wellbeing. In addition to the Relatedness-Supportive dimensions, I propose a new focal area for wellbeing ratings, one that aids in protecting the individual from the negative impacts of the wellbeing process. I have created a model which depicts these two areas - **wellbeing appraisals** and **wellbeing process** - to explain the elements required to support wellbeing in higher education and will be outlined and discussed in further details in the next chapter on staff wellbeing.

The approaches and frameworks related to wellbeing have been summarised in table 1 below to show the key dimensions of wellbeing and the potential relevance for the study of staff wellbeing in higher education.

**Table 1. Comparing theoretical and conceptual frameworks of wellbeing**

Framework/Theory	Dimensions/characteristics of wellbeing	Relevance to this study
PERMA model	5 Dimensions related to positive emotions, relationships, meaning and accomplishments	Focus on positive emotions The dimension of accomplishment on wellbeing at work
Fredrickson's model (broaden and build theory)	Focus on positive emotions- love, joy, contentment, and contributions to wellbeing- capacity to broaden outlook and encourage flexible and innovative thinking to overcome adversity	Role of positive emotions at work and the extent to which it is a protective factor at work
NEFs model	Two dimensions- social and personal. The personal dimension is concerned with belonging and holding positive attitudes	Extends understanding of wellbeing beyond the individual level/experience, emphasising wellbeing connected to society
Structured Framework	Builds on the NEFs model and includes the individuals experience, family, community, and society.	To consider the influence of family on wellbeing at work.
Job- Demands Resources (JD-R)	Identifies two processes- job demand and job resources.	Role of job resources at work and the benefits for engaging staff at work.
Workplace Climate for self-determination	Three dimensions – competence, autonomy, and relatedness	Focus on individuals' perceptions and shared perceptions of others and its impact on wellbeing.

Each of the models in Table 1 have their merits, including positive emotions , recognising how work intersects with the family, society, and community. However, the climate for self-determination focus on the individual and shared perception of others has its value for understanding wellbeing in the work context, given its focus on the individuals and shared perceptions of others. Furthermore, with an underlying emphasis on self-determination, competence, and relatedness the model provides a helpful framework for gaining insight about how staff may attain these psychological needs at work and

contribute to their wellbeing, A review of the literature related to occupational wellbeing will be considered below.

## **2.7 Wellbeing at Work**

While definitions of wellbeing used in the literature include aspects related to physical, mental, and social health, occupational wellbeing or well-being in the workplace has also been considered. This section will consider the importance of wellbeing for work, provide a definition of occupational wellbeing, outline related factors that may influence wellbeing (positively or negatively) at work and briefly summarise three well known approaches to well-being(Warr's models -affective wellbeing at work and Vitamin model and the happy productive worker hypothesis)

### ***2.7.1 Occupational wellbeing***

The wellbeing at work report, identified staff mental health as a key priority for employers and cited heavy workloads and ineffective management styles as contributory factors for short term and long-term absence at work (CIPD, 2020). Therefore, the impetus to attain effective wellbeing at work is necessary. An understanding of the factors that affect the experiences while being at work can also help in developing well-being interventions (Laine & Rinne, 2015).

A discursive definition of workplace wellbeing is provided, informed by previous research and approaches to occupational health, and proposes three dimensions of wellbeing: influencing factors at work, subjective wellbeing, and outcome variables (Laine & Rinne, 2015). Affecting factors are related the factors that affect the experiences of wellbeing at work. Subjective factors refer to people's subjective views and affective evaluation of their work experiences. The outcome dimension refers to the effect of work

on health, performance, motivation and work competence and ability (Laine & Rinne, 2015). They also identified from their literature review factors ( positive and negative) which can influence the experience of staff at work and these are briefly summarised below.

### ***2.7.2 Factors positively influencing wellbeing at work***

From the literature the quality of human relations and social factors at work were seen to positively influence wellbeing at work (McGrath, 2012; Welbourne et al., 2015). It is proposed from the current literature that management leadership style and personnel policy have both positively and negatively influence wellbeing at work (Skakon et al., 2010), suggesting that managers with a positive approach to promoting staff wellbeing positively impacted staff experiences at work. Individual differences and personality factors have been identified as both positively and negatively impacting on wellbeing experiences (Le et al., 2011). Furthermore, employee engagement (engaged workers are enthusiastic, energetic about their work and are fully immersed) experience positive wellbeing. ) was identified as a positive influence on work wellbeing. According to Field and Buitendach (2011), employee engagement is the antithesis of burnout. This might suggest that intervention to support staff wellbeing should focus on what is felt important by staff to keep them engaged and fully immersed in their role.

Similarly, Field and Buitendach, (2011) highlight the role of organisational commitment, which is the willingness of the employer to make greater efforts on the half of their staff leading to staff expressing a wish to remain in the organisation and subsequently having a sense of obligation to stay. Consequently, the extent to which the organisation seeks to promote wellbeing in the organisation can positively contribute to heightened level of employee commitment. Conversely, the absence of organisational commitment has the

potential to adversely impact levels of staff wellbeing. Finally, work related factors such as job satisfaction are seen to both positive and negative factors that support wellbeing. Job satisfaction is related to how people feel about their job and is related to factors such as working conditions( (Skalli et al., 2007).

### ***2.7.3 Factors negatively influencing/related to wellbeing***

Similarly, Laine and Rinne's (2015) study identified several negative factors influencing staff wellbeing at work. Health factors were related to healthy life choices at work. This included the presence of healthy working environment and the prevention of accidents at work (Cotton & Hart, 2003, Kruger & Spector, 2011). Therefore, it implies that intervention could be introduced to improve and change wellbeing experiences in this area.

Another negative factor, identified within the literature is related to work-family role and conflict which represents the potential conflict between these two domains due to excessive work demands. However, through the introduction of flexible working arrangements this could minimize the impact and therefore improve staff wellbeing. The study on staff wellbeing will explore organisational interventions to support staff wellbeing and seek to gain insight into the factors that are promoting or diminishing their wellbeing at work.

Additionally, Quality of work life is identified as another factor that can impact wellbeing experiences. According to Ajala (2013), Quality of work life is a broad construct that consists of job satisfaction, capacity development, work, and non-work life balance (WLB), emotional supervisory support (ESS) and organisational support and was used to measure wellbeing at work. They found that all dimensions were significant to staff wellbeing, notably job satisfaction making the greatest contribution.

There has also been more recent attention given to wellbeing with respect to changes in the work contexts, perceived threats, and the risk of being laid off work and coping with uncertainties at work (Hu & Schaufeli, 2011; Kossek et al., 2012) .

Finally, it is also proposed that well-being at work is also influenced by work stress, the content of work, work strains and competence (Demerouti et al., 2010; Rodríguez-Muñoz & Sanz-Vergel, 2013; Seligman & Csikszentmihalyi, 2014). When reviewing some of this research it appears that stress is seen as a component of wellbeing. There has been increasing interest in staff responses to stress situations and the coping strategies adopted. Melin et al, (2014) identified three coping strategy profiles: **compensatory** (regularly skipping lunch, bringing work home, and working during holidays and weekends); **restrictive** (prioritising and setting targets); and **self-supporting** (only takes on work if the time is available and will seek support). The results indicated that, when under pressure, staff regularly use the compensatory coping strategy, increasing their risk of suffering ill-health and a lower work-life balance. The study suggests that further research is required into how to create work environments that support academics in adopting coping strategies that do not endanger their health, infringe their work-life balance, or diminish their wellbeing at work. This will be an important aspect to explore the responses and interventions available to staff who may be experiencing stress in higher education.

#### ***2.7.4 Approaches to understanding wellbeing at work***

Alongside the literature on the factors impacting wellbeing experiences there are three approaches that can also help to give understanding into wellbeing at work and these are outlined briefly below: Warr's Vitamin model; Warr's approach to looking at affective wellbeing at work; and the Happy productive worker hypothesis.



Warr's (1987) model of affective wellbeing at work is based on two dominant models of affects. - job related and non-job-related mental health. This approach gives insight into the inter-connected nature of job-related domains and non-job-related domains and how these can negatively impact on mental health and wellbeing experiences. Therefore, my study emphasises the importance of interventions that address both domains.

More recently, Warr (2007) provided a 12 job features (vitamins) of wellbeing at work. The vitamin model describes the relationship of job features and forms of happiness such as job satisfaction. The vitamins are, control, skill, goals, variety, clarity, people, money physical security significance, supervision, career, fairness (Meyerding, 2015). This might imply when staff talk about what is important to their wellbeing at work that some of these factors will also be evident. The vitamin analogy is important because it gives a foundation for comprehending employee wellbeing. According to this approach having too many vitamins( such as high variety at work may result in cognitive resource overload.

Finally, the Happy productive worker hypothesis proposes that happy workers perform better and experience positive wellbeing (Garcia- Buades et al, 2020). However, research has been unable to confirm the association between happiness and their performance (Hosie and Stevenson, 2009). A further limitation regarding this approach is that it has been assumed there is a positive linear relationship, although other patterns of relationships may exist especially those that established negative relationships. The relevance of positive and happy workers for staff performance will also be considered in terms of the positive aspects of their role and the factors that promote positive wellbeing.

### ***2.7.5 Improving wellbeing at work: Processes and Approaches***

From the literature above there are several approaches that can be considered to help staff attain better levels of well-being. Firstly, research has also shown that learning is essential to well-being (Urbina-Garcia, 2020). The study found learning interventions were broadly introduced to develop personnel resources, professional capabilities, leadership skills and to improve organisational processes. Moreover, they argue that workplace design, learning, and training processes must incorporate wellbeing.

The leadership and management styles within organisations have the potential to improve wellbeing (Hu & Schaufeli, 2011). Therefore, the study will seek to gain insight from staff about the support given to improve their wellbeing, including that of their managers and leaders to identify any gaps in training in this area. Additionally, the work processes that are related to fostering positive human and social relationships to encourage wellbeing at work. For instance, the communication in the organisation about staff wellbeing will be examined.

## **2.8 Summary of the Chapter**

There are challenges in defining wellbeing and has been associated with constructs such as health and stress. A review of the conceptual and theoretical frameworks of wellbeing were considered to identify their benefits and potential limitations. This chapter also outlined the factors (positive and negative) that can influence wellbeing. These will be examined further in the next chapter on staff wellbeing in higher education.

## Chapter 2a. Staff Wellbeing in Higher Education: A Scoping Review

*In recent years, researchers, educators, policy makers and politicians have been directly concerned with well-being, which has been viewed variously as happiness, satisfaction, enjoyment, contentment, engagement, fulfilment and flourishing, or a combination of these, and other, hedonic and eudaimonic factors.*

(Haworth and Graham, 2012, p. 1).

### 2.1 Overview

The purpose of this chapter is to establish what is known about staff wellbeing in Higher Education and to investigate university staff wellbeing management. This chapter will evaluate the existing literature to assess the present status of staff wellbeing in Higher Education to identify the factors that have decreased or increased staff wellbeing, as well as to investigate university staff wellbeing management. Furthermore, this scoping review will highlight there is currently a dearth of research into staff wellbeing in Higher Education. Before detailing the systematic review approach used in this study, the backdrop of Higher Education in the United Kingdom is discussed. Thereafter, the literature found will then be examined using the following five questions, about staff wellbeing in Higher Education: 1) How is staff well-being described? And does the literature seem to have a common understanding of what constitutes wellbeing? 2) What factors—both positive and negative—contribute to staff wellbeing? 3) What are the literature's key staff wellbeing indicators? And how effectively can they be categorised? 4) How is staff well-being measured, and how successful are the current tools? 5) How is staff well-being managed in Higher Education? 6) How have wellbeing frameworks and models been used in the literature?

The questions mentioned above will serve as the foundation for the literature review's structure and will include information on the search method employed to find the papers.

In response to what is known and the gaps in the existing literature, I propose the focus of my research on staff wellbeing in Higher Education.

### ***2.1.1 Higher Education context***

In 2018/19 there were 165 UK based universities according to the Higher Education Statistics Agency (HESA). The total university workforce (academic and non-academic) during 2018/19 stood at 439,955, which is slightly higher than the figure for 2017/18 of 429,560 (HESA, 2021). When reviewing the workforce by ethnicity type, the figures show it continues to be a predominately white workforce. For example, white academic staff totalled 165,765 (2018/19), a stark contrast to other ethnic groups - for example, the total black academic workforce totalled just 4,140.

Over the last two decades, there have been several external factors impacting the context of universities. Many universities have faced severe economic conditions due to public sector funding changes (Feigenbaum & Iqani, 2013; OECD, 2004). Neoliberal ideology (often promoting free-market competition, minimal state intervention, and more efficient allocation of funds) has shaped education policy (Kinman, 2014; Kinman & Jones, 2008a). Notably, student tuition fees were introduced in 1998 and increased in 2006 and 2012. However, teaching grants have been reduced and maintenance grants have been removed. This has led to most universities receiving 96% of their financial support through loans (Belfield et al., 2017). This phenomenon is not unique to the UK and research suggests that, internationally, a parallel downward trend in both resources and staff morale is present in the education workplace (Bell, Rajendran & Theiler, 2012).

While the UK government has implemented policy measures to reduce public funds, at the same time, measures have been introduced to increase student numbers, as detailed in the Leitch Review (2006), an independent review of skills commissioned by the government at the time to support economic growth and productivity. A key recommendation in this review was that the number of adults educated to degree level should increase from less than 3 in 10 to 4 in 10 by 2020. This commitment led to increasing student numbers in higher education. Available data from HESA on universities' student intakes have observed increases in the student population from 1,690,335 (2017/18) to 1,734,775 (2018/19).

The evidence also suggests that more and more students are presenting at university with complex needs. For example, more students are now accessing counselling services (Prince, 2015). Whilst the mental health and wellbeing of students have been of interest to policy makers, health providers and educators should also consider the interconnected nature of staff and student wellbeing. As the UUK (2014) report that aimed to improve student mental health and wellbeing remarks, the "student focus remains, but we also highlight the importance of promoting and supporting the mental wellbeing of staff" (2014, p. 5).

## **2.2 Literature on experiences of staff wellbeing in Higher Education**

### ***2.2.1 Search strategy***

This literature review summarises English language peer-reviewed journal articles regarding staff wellbeing in higher education published between 1 January 2000 and 1 June 2022. I focused on papers that investigated staff wellbeing and the current factors impacting staff wellbeing and health. I additionally accessed a range of other relevant literature on staff wellbeing, consisting of books, doctoral theses, and national and local

guidance papers, to gain a broader understanding of wellbeing and to explore emerging trends and issues and these were included in the previous chapters for context. They were not included in the final analysis.

A total of seven English electronic databases (PsychoINFO, Medline, Scopus/Web of Science, Academic Search Complete, ERIC, and British Education Index) were accessed as part of the literature review. The retrieval process is summarised below:

1. **PsychoINFO** database: the search term ‘wellbeing in higher education and universities’ was inputted, resulting in the following terms, including ‘wellbeing’, ‘humans’, ‘females’, ‘males’, ‘adults’, ‘middle-aged’, ‘quality of life’ and ‘adolescence’. I combined the phrases ‘well-being’, ‘mental health’ and ‘quality of life’, using AND and OR, A total of 884 related research papers were found. This figure was further reduced to 520 by including ‘NOT student’. Having read the abstracts and titles, 16 articles were identified.
2. **Web of Science:** the search term ‘staff wellbeing in higher education’ generated 96 results. I decided to refine the search further by using the term ‘University staff wellbeing and health’, reducing the initial figure to 66. Further papers were extracted based on the titles and abstracts, resulting in 10 papers.
3. **Academic Search Complete:** the following term ‘wellbeing in higher education’ produced a total of 25 results. Having viewed the titles, papers not linked to staff wellbeing were excluded, resulting in a total of 6 remaining.
4. **ERIC database:** the following term ‘Staff in Higher Education’ produced a total of 3 articles.

5. **British Education Index:** the following term ‘Staff Working in Higher Education’ produced a total of 24 articles. On closer examination, only 5 were relevant to my topic. Some of these papers were duplicates and thus removed from the final total.

The initial search, using the search terms ‘staff wellbeing’ and ‘health and wellbeing’ in the databases, outlined in section 2.2, produced 613 papers in total. I also utilised Google Scholar to obtain additional articles. Titles and abstracts were reviewed to identify papers that were relevant to the terms ‘staff wellbeing’, ‘higher education’, and ‘universities. This identified 133,000 articles of relevance, but after reading the abstract and titles this figure was further reduced. In total 17 papers were included in the scoping review.

### ***2.2.2 Inclusion/exclusion criteria***

The search criteria of ‘peer-reviewed journal articles’, ‘full text documents’, ‘masters’ and ‘Doctoral thesis’ were included to find works published between January 2000-January 2021. In addition, the review focused on journal articles. English language. After removing duplicates and excluding papers that did not meet all the criteria (i.e., 1) staff wellbeing, 2) universities, and 3) higher education), only 17 papers remained.

### ***2.2.3 Data analysis techniques***

This section outlines the process taken to organising and analysing the data from the articles. The analysis provides an overview of the emerging themes and ideas related to the specific questions outlined in 2.1. Additionally, a content analysis of the papers was undertaken to review the amount of times information was discussed or definitions of staff wellbeing provided.

#### ***2.2.4 Questions used to investigate the data***

A review of the extant research of wellbeing will contribute to knowledge of what is meant by wellbeing, how it is managed and assess the present status of staff wellbeing in Higher Education. The following questions will be used to investigate the data:

- How is staff wellbeing described? And does the literature seem to have a common understanding of what constitutes wellbeing?
- What factors—both positive and negative—contribute to staff wellbeing?
- What are the literature’s key staff wellbeing indicators? And how effectively can they be categorised
- How is staff wellbeing measured? and how successful are the current tools?
- How is employee well-being managed in higher education?
- What types of wellbeing frameworks have been considered in the field of wellbeing in HE?

#### ***2.2.5 An overview of the papers***

A total of 17 papers were included in the analysis. One was a conceptual paper, four were qualitative (case study, semi-structured interviews; and Workshops); 11 were quantitative (using survey and scales, along with fasting blood samples) and one was a multi-method study. Most of the studies were undertaken in the UK and a total of five articles were international, including Pakistan, Australia, Nigeria, New Zealand, and South Africa. The articles were published between 2006-2021 and the sample size for the semi-structured interviews was between 16-24. The survey samples were between 120-884. All the articles noted the influence of stress on staff wellbeing and no definition of wellbeing was provided within the papers, except for one. With the exception of one paper, all were based on a sample of academic staff only. The other paper focused on support staff only.



To date there is no paper that provides an analysis of staff wellbeing including support/professional staff and academics.

### **2.3 How is wellbeing described? And does the literature seem to have a common understanding of what constitutes wellbeing?**

Across the 17 articles various approaches are taken to describing, articulating, and evaluating wellbeing. The descriptions and definitions of wellbeing were broad with a lack of clarification about the definition of wellbeing being used ( except in one paper). There were some ideas that were common in terms of description and based on my evaluation six themes or categories were identified. The articles could have elements of two or more across the themes. This study classified the findings as follows:

**2.3.1 Individual Resources (IR):** includes behaviours that optimise the capacity of the individual to function and may help to minimise the impact of negative working conditions. For example, emotional intelligence (Akanni,2020), the authors noted that emotional intelligence and person-job fit had a positive relationship with wellbeing. Similarly, self-determination and self-motivation have the potential to contribute to a state of flourishing and staff wellbeing at work (Strevens and Wilson, 2018), and positive emotions. Conversely, negative emotions (e.g., anxiety, fear, shame, disgust, anger) interacts with the environment in HE and can harmfully impact staff health and wellbeing overtime. (Woods, 2010).

**2.3.2 Positive Functioning (PF):** is aimed at the actions and strategies individuals can take to strengthen wellbeing and bring improvements. They consist of happiness, building positive relations with others (Straaten et al., 2011) and identifying a purpose in life (Akram et al., 2019). Newton et al. ( 2015) found that staff and students identified that having a positive sense of self was important to wellbeing but recognised the role that

organisations have in contributing to wellbeing as the respondents emphasised the importance of being comfortable, respected, valued, and empowered. Furthermore, in the following subsection, wellbeing is described from the viewpoint of organisational considerations.

**2.3.3 Organisational experiences and support (OES):** considers the essential facets of organisational support that can protect the wellbeing of staff by focusing on the quality of the supervisor relationship (Williams, 2017), and addressing issues of bullying and racism at work (Mahoney and Weiner, 2020). For instance, Mahoney and Weiner (2020) examined the wellbeing experiences of BAME (Black, Asian, Minority and Ethnic) staff working in UK universities. The research used a qualitative research design and, based on the responses from eight BAME and six White staff, observed that BAME staff were more likely to experience microaggressions, perceived to be incapable at their job and subjected to unfair work practices. For example, in their study Black staff talked about a reluctance to make further complaints. The study highlights the importance of understanding the impact of racism on the wellbeing of staff.

Additionally, Evans (2017), investigated the impact of organisational mergers and changes on the emotions and attitudes of staff. The research used a qualitative research design to interview 32 staff across two universities in France. The study emphasised that the HE sector has been characterised by change (University mergers, departmental closures) and how these changes can negatively impact staff wellbeing not only in the short term but up to 10 years after an institutional merger.

**2.3.4 Deficit effects (DE):** this category is based on aspects that contribute negatively to wellbeing, and research that focuses on an absence of wellbeing. These consider the impact of long working hours, work demands (Kinman and Jones, 2006), a reduction in

work life balance (Bell et al, 2012) and the presence of job stress (Sang et al, 2013) that may influence the psychological well-being of staff. Furthermore, the outcome of deficit effects within the workplace is reported to increase the likelihood of depression, anxiety, and overall psychological distress among staff and in some cases poorer levels of wellbeing were experienced by younger staff (Kinman and Jones, 2006; Teixeira, 2021).

**2.3.5 Health Status (HS):** well-being is often defined in terms of health and such research considers the factors that either promote or limit the health status off staff at work. For instance, the existing health and physiological status ( e.g., blood sample tests) of staff are considered (Dryer et al., 2010) and the positive effects of physical health and activity on psychological well-being (Sang, et al., 2012) and how stress and anxiety can adversely impact the health of staff (Bell et al, 2012).

**2.3.6 Workplace Perceptions (WP):** considers staff perceptions about their fit within the workplace setting, by focusing on factors related to perceived job- role fit (Akanni, 2021) and understanding off their role for increased wellbeing. A critical aspect of occupational well-being is the perception of academics' workplaces (Mudrack et al, 2018). The study summarised the importance of the Job Demand Resources model and found that job demands, and work conflict are significant factors contributing to stress at work. Furthermore, the authors concluded that stress was increased if the staff perceived there to be work-family conflict issues. Therefore, universities would benefit from employing strategies to reduce work-family conflict.

A review of the available literature suggests that there is an absence of an explicit and cohesive definition of staff well-being. Furthermore, each of the categories above, when taken together, emphasise the importance of a holistic definition. Moreover, when

considering the concept of staff wellbeing, understanding of environmental, physical, relational, cognitive, and psychological factors are all necessary.

#### **2.4 What factors (both positive and negative) contribute to staff wellbeing?**

Through undertaking a review of the literature this resulted in the identification of five factors that contribute to well-being: organisational, relational, psychological, cognitive, and economic. The economic domain includes issues related to job security and quality of job remuneration available, while the psychological domain comprised of happiness, anxiety, work-life conflict, mental health, and emotions. The cognitive domain includes, perceptions of job role fit, role ambiguity/ understanding, individual views about being hard working and dedicated. The organisational domain comprises of the commitment from the organisation to support staff, the working environment that included behaviours, and practises that diminishes well-being, such as long working hours, work demands and experiences of bullying and racism. The relational domain focuses on supervision relationships, commitment from staff and colleagues and the positive effects of family and friends on well-being.

On closer examination, negative/deficit factors have been expanded on, including anxiety, somatic symptoms, depression.(Bell et al., 2012; Dreyer et al., 2010) In contrast, examples of positive factors include positive relationships, happiness, coping approaches and factors such as emotions (Woods, 2015). These can be subject to change and fluctuation and therefore exist on a continuum. Table 2 details the negative and positive factors that were identified across each of the domains.

**Table 2. Factors both positive and negative that contributed to staff wellbeing**

Positive Factors	Domain	Negative Factors	Domains
Perceived job-fit	C	Work life- conflict	O
Positive relationships	R	Somatic symptoms	P
Job security	E	Turnover retention	O
Good remunerations and rewards	E	Long working hours	O
Social support	R	Role ambiguity/understanding	C
Hard working/dedicated staff	C	Job classification	C
Family and friends associated with wellbeing	R	Bullying and racism	C
Commitment from staff and the organisation	R	Post-merger dissatisfaction	O
Happiness	P	Commitment from the organisations	O
Positive Coping	P	Perceived job-fit	O
		Negative coping strategies	C

*Key: Economic(E); Cognitive(C); Organisational(O);Relational(R); Psychological(P).*

## **2.5 What is the literature’s key staff wellbeing indicators? And how effectively can they be categorised?**

From the literature, several indicators were used to understand well-being experiences. Based on the domains outlined in the earlier section, the psychological and cognitive domains appear to have a higher number of indicators currently studied. Moreover, within the psychological domains, the indicators were primarily negative/deficit indicators.

In contrast, the economic and relational domains focused on more positive functioning and indicators of wellbeing. The research to date, except for Williams et al. (2017) and Straaten et al. (2016), has largely focused on deficit /negative indicators to investigate staff wellbeing.

There is a need for a more nuanced discussion about staff wellbeing that includes strengths and the positive experiences that may align with staff wellbeing (Woods, 2010). Stress, anxiety, and depression indicators represent one dimension related to the broader concept of well-being and there is a need for a broader range of indicators to inform our understanding of staff wellbeing in Higher Education.

According to the findings, there are contradictory definitions of well-being, and the measures utilised examined components of well-being (e.g., anxiety and depression) rather than the construct of wellbeing as a whole. The studies focused on finding weaknesses rather than positive attributes that define and contribute to well-being. As a result, interventions may concentrate on employee deficiencies, thereby limiting possibilities to uncover and improve staff strengths. It is recognised that non-journal publishing were considered as part of the earlier chapter discussions to provide context to the changes impacting Higher Education.

## **2.6 How is staff wellbeing being measured?**

From the literature, both objective and subjective measures of wellbeing were used to evaluate staff well-being. For instance, well-being was measured using objective measures related to the health status of staff (e.g., blood samples, biochemical markers) (Dryer et al, 2011). However, most measures used were subjective, including single scale and multi-dimensional approaches related to psychological well-being, with a focus on workplace fatigue, anxiety, general mental health. Additionally, a few qualitative studies (Evans., 2017; Straaten et al., 2016) used semi structured interviews, focus groups and even a case study method to understand from staff what optimised their wellbeing at work. However, in most cases, the presumed indicators of well-being were related to the absence of anxiety, depression, and stress. This potentially limits our overall understanding of a complex and multifaceted concept and may detract from other

important indicators of well-being. Hence, a multidimensional approach to measuring well-being, from the perspective of university employees is critical to measuring well-being accurately.

The measures reviewed were categorical and a range of instruments were used to investigate wellbeing. These include the Psychological Wellbeing Index which consists of 22 items and focusses on physical health, anxiety, and depression . Furthermore, some studies examined negative behaviours focusing on variables such as current health status and hypertension (Dreyer, 2010). A few studies used a balance between positive and negative indicators to measure wellbeing (Williams, 2017). It is apparent from the review that the instruments used were not designed to measure well-being as a construct in Higher Education specifically. Therefore, the development of a multi-domain measure to investigate the construct of staff wellbeing is necessary.

## **2.7 How is employee well-being managed in higher education?**

The research identified approaches that could be taken to manage staff wellbeing in Higher Education. The findings from the literature will be summarised below to highlight the potential interventions required to enhance staff wellbeing by institutions.

Dryer et al (2010) used data from health screening questionnaires and blood fasting samples to try to assess the current health status of staff based at a New Zealand University. The research observed four common physical and mental health conditions amongst the staff, these included job stress, stress symptoms, emotional exhaustion, and hypertension. Of these reported conditions, job stress was the most prevalent condition and notably only 21% of the sample were observed with none of the above conditions. A potential limitation of the research is that only 16 of the participants were male and the reliance on questionnaires means the study does not fully allow for an exploration of staff

perceptions of their health status and the relevant causes. However, the research effectively summarises that the university work environment may negatively impact on the overall health and cardiovascular status of staff. The researchers emphasise the importance of the working environment on staff health. Dryer et al (2010) suggest that institutions should prioritise interventions focused on reducing job stress and improving the mental health of staff to minimize the above risk factors.

Similarly, Williams et al (2017) reviewed the online wellbeing survey responses from 120 staff based at a University in the UK to understand staff wellbeing. The research used an experimental design and applied the Demands-Resources Individual Effects (DRIVE) model. The findings suggest that staff who experienced high levels of job demands, and had negative coping,( stress ), exhibited higher levels of stress and anxiety. In contrast, staff that had a positive personality and displayed positive coping responses ( such as emotional stability, conscientiousness ) were more likely to experience positive wellbeing at work. This report is important for my study as it suggests that equal attention should be given to positive factors (satisfaction, happiness) related to staff wellbeing at work. The addition of qualitative methods would allow for an exploration of staff views on the positive aspects contributing to their wellbeing. The findings can inform senior managers and HR with responsibility for supporting the wellbeing of staff.

Previous studies have given attention to the responsibility of universities in promoting a health work environment. For example, Newton et al (2106) examined the operationalisation of the healthy university framework, which has been previously shared with all universities in the UK to incorporate health and sustainability measures into its strategic plans and processes A qualitative case study design was used to obtain feedback on the factors that supported universities to adopt the healthy university framework. The findings suggest that there is a lack of clarity about the concept of wellbeing from leaders



and decision makers. This study indicates the significance of organisational responsibility and commitment to supporting staff wellbeing. Therefore, there is merit in reviewing existing policies to support staff wellbeing and examine who has lead responsibility for promoting staff wellbeing and will form part of my own study.

Several studies have focused on the negative experiences of stress and burnout on staff. For example, Bell et al (2012) reviewed the influence of perceived job stress, work life balance/conflict on employee wellbeing. The study adopted a quantitative research design and used the data from four scales related to work-life balance, work-life conflict, job-stress, and a wellbeing scale from 139 academics to observe any variations in the wellbeing of the staff. The strongest factor impacting staff wellbeing was job threat stress and it also had a strong effect on work-life balance. Therefore, strategies that seek to address job threat stress have the potential to improve the wellbeing of staff and reduce stress amongst staff. The study emphasises the importance of interventions to reduce stress and to promote the wellbeing of staff. A potential limitation of the study is the questionnaire data which limits the potential to explore the views from staff about the support required to reduce stress. Furthermore, the study is based on the responses from academic staff only and thus may benefit from including and comparing experiences with professional and administrative staff.

Finally, Featherston et al (2021) aimed to explore the factors related to work life merge and to understand the wellbeing of academics across UK and Australian universities. The authors used data from online surveys. The study found staff regularly worked on average 16-18 hours above their normal working week, undertook moderate exercise activity per week (150 mins). Wellbeing was seen to be negatively impacted by the perceived effects of work-life merge (Perspectives into how personal, interpersonal, and organizational outcomes are affected by work and non-work domains within an individual's life).

The main limitation of this study is that it did not allow for the exploration of staff perceptions of their wellbeing and the causes and only included responses from academics .

Qualitative research methods have been used to identify how staff members working in higher education think universities could improve employee wellbeing. Van Straaten, Du Plessis and Van Tonder (2006), guided by a social constructionist epistemology, conducted workshop interviews to find out what staff members in higher education thought could be done to ensure and maximise their wellbeing. Overall, the researchers found that the staff believed the institution could: ensure job security; offer rewards and benefits to employees; acknowledge employees' hard work; ensure equality between different types of staff; make workloads manageable; create a supportive and friendly working environment for employees; and make every attempt to address employee concerns about wellbeing.

Universities have attempted to implement interventions to improve the wellbeing of staff (Newton et al., 2016). One such approach is the Whole University Approach, which seeks to create healthy university settings by empowering students and staff to take responsibility for their own wellbeing. To achieve this, the approach suggests that many different groups - including national and local institutions such as the government, schools, parents, and employers - need to form a coalition. The Whole University Approach theorises that wellbeing can be fostered by taking the following steps: promoting staff and student health by encouraging healthy behaviours (such as exercise and healthy eating) and discouraging unhealthy ones (such as drinking or smoking); creating a supportive community for staff and students that focuses on support networks; improving mental health; supporting academic achievement and retention; having clear and effective leadership; fostering a culture of inclusivity that opposes marginalisation,

bullying and harassment; and creating a healthy environment where the staff and students are safe and subjected to a reasonable workload that does not negatively impact their mental health.

Another such approach is the Health Promoting Universities framework,(Newton et al., 2016) which sets the following guidelines for creating a 'Healthy University': promoting sustainable policies; supporting health and social development; improving healthcare; creating a healthy working environment; creating a healthy physical environment for staff; developing community links; and fuelling policies to promote health and academic interest. According to a systematic review by Reis et al. (2018), many universities throughout the world have attempted to implement the Health Promoting Universities framework to create a 'Healthy University'. However, these efforts have been slow and difficult as many universities have found themselves unable to reconcile the framework with their institutional structure or their country's specific culture. As the authors acknowledged: "In the few published studies that explicitly describe the implementation of the Health Promoting University approach, only adaptations of superficial cultural aspects were identified" (Reis et al., 2018, p. 10). The researchers also found that success at implementing this framework was greatest when staff members were empowered and encouraged to be active in the process. Thus, strategies to promote wellbeing must not only be specific to the university's institutional structure and the surrounding culture but must also empower the staff to take part.

## **2.8 What types of wellbeing frameworks have been considered in the field of wellbeing in HE?**

From the studies included in this review, five used a health and wellbeing framework, these included: Job Demand Resource Theory (JD-R) ( explained in the earlier chapter); Positive Emotions, Engagement, Relationships( see earlier chapter for 2a); Meaningful

life and Accomplishments (PERMA) (Seligman, 2011)( see earlier chapter 2a); Demand-Resource Individual Effects (DRIVE) this model is includes individual differences, personality measures and subjective wellbeing, as well as positive affect and happiness as separate elements , ASSET (An Organisation Stress Screening Tool) Model (Sang, 2012), included an occupational stress mode and constructs such as commitment and job satisfaction were measured.

## **2.9 Research gaps and potential for this research**

From the review of the literature, defining wellbeing is challenging, and a clear definition of wellbeing as it pertains to higher education is seemingly missing. There is a shortage of studies that explore the views on wellbeing for staff working in higher education, to understand their experiences and the meanings they give to wellbeing. Through semi-structured interviews, insight may be given into the ways staff articulate and conceptualise their wellbeing.

Furthermore, the available literature on staff wellbeing initially seemingly refers to all staff but, on closer examination, it mainly includes academic staff and researchers. There have been limited references in the literature to professional staff more broadly (except in Van Straaten et al., 2016), postdoctoral fellows', and visiting lecturers' experiences of wellbeing. Therefore, this study will give voice to all staff working in universities to understand their experiences of wellbeing. However, it is also understood that, by treating staff as a homogeneous group in terms of their wellbeing experiences at work, this might fail to address the complexities of their individual experiences. Therefore, I will draw both on commonalities from their wellbeing experiences and identify differences in staff's experiences of wellbeing. This will be done, for example, by investigating issues such as whether some groups of staff experience worse levels of wellbeing than others.

From the literature, there is seemingly an absence of research on specific interventions used to support staff wellbeing in higher education. The literature would suggest that there is a gap in our understanding, both in terms of the nature and type of interventions provided to address wellbeing. Therefore, undertaking semi-structured interviews with staff to understand the kinds of interventions available in universities and staff experiences of them, and an evaluation of existing policies on staff wellbeing.

The literature also suggests there is value in taking such an approach in terms of understanding the experiences and meanings given to wellbeing by staff, and in quantifying the nature and type of interventions provided by universities to support staff wellbeing. The present study seeks to help fill this gap by undertaking the first mixed study that is not discipline specific.

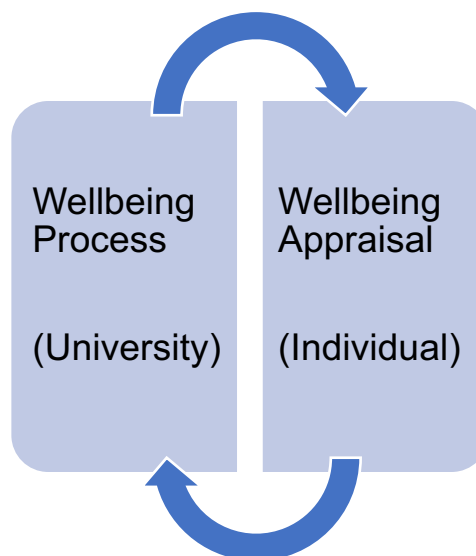
The context of higher education has meant that staff have reported a high level of psychological distress and difficulties with increasing work demands (Kinman & Jones 2008; Williams et al., 2017). The literature review undertaken, seemingly suggest there is a scarcity of studies concerned with positive outcomes (self-determination, positive affect, work satisfaction) (Williams et al., 2017). This study will provide a counter-narrative to the extant literature on wellbeing, which has primarily focused on stress, by also focusing on positive outcomes and positive wellbeing.

There appears to also be an absence of mixed-methods research into staff wellbeing in higher education (See Table 2.2 below: Summary of Literature). Furthermore, with so few studies identified, this suggests that staff wellbeing in higher education is a novel area of research. The testing of new wellbeing models would expand on understanding of staff wellbeing experiences. Moreover, a specific wellbeing model has been rarely adopted in staff wellbeing in higher education studies, hence this addresses a current gap

in the literature. The development of the conceptual framework will be subject of empirical investigation to understand the dimensions and patterns of staff wellbeing experienced in higher education.

## 2.10 Staff Wellbeing in Higher Education Framework

The Wellbeing in Higher Education (HE) framework is a guide for discussions and decisions and identifies the essential facets of staff wellbeing within the university context. Staff wellbeing is located at the individual and organisational levels. This framework shows the contributions each dimension makes towards the outcome of positive staff wellbeing. The organisational and individual needs are connected and dynamic.



**Figure 1. Staff Wellbeing in Higher Education Framework**

It is suggested that the **wellbeing processes**, located at an organisational level, can impact staff wellbeing through their ideas and actions regarding wellbeing. These consist of: the articulation (verbal/written) of wellbeing, the nature and types of wellbeing interventions, how wellbeing is communicated, the engagement and co-production opportunities

available to staff regarding their wellbeing, the presence of a wellbeing culture, the existence and application of equality, inclusion and diversity practices, learning and development strategies that incorporate wellbeing, wellbeing evaluations that are routinely undertaken and connected to other processes such as workload management, etc. The presence or absence of these can either promote wellbeing or lead to the disenfranchisement of staff and produce cynical views about work and the university wellbeing process. The presence of equality, diversity, and inclusivity measures serve to act as a thread that pulls together the organisational processes and practices of any organisation.

The **wellbeing appraisal** dimension can help to shield the individual from the negative effects of the organisational processes and the related psychological impacts. It is proposed that the wellbeing appraisal dimension includes views about staff's wellbeing, self-determination, their active engagement with the wellbeing process, their emotions, coping strategies, the extent to which they feel trusted, their access to support (informal/formal), the sense of community, and pro-social behaviours. These various elements help to achieve and protect staff wellbeing in higher education. Staff are not seen as passive recipients but instead as agents that are able to devise strategies to promote and protect their wellbeing when facing wellbeing processes and their related psychological impacts in the university context. Both wellbeing dimensions and their associated elements is listed below in Table 3.

**Table 3. Wellbeing Dimensions in the staff wellbeing in Higher Education Framework**

Wellbeing Appraisal (Individual)	Wellbeing Process (University)
Views about wellbeing	Articulation of wellbeing
Self-Determination	Wellbeing Interventions
Emotions	Wellbeing communication
Trust	Engagement and co-production
Engagement	Wellbeing culture
Coping strategies	Equality, Inclusion and Diversity (Unconscious biases)
Support (Informal/Formal)	Learning & Development
Sense of community/Belonging	Evaluations
Pro-social behaviours	Workload allocation processes

Wellbeing in higher education is seen as a collective responsibility shared by the individual and the institution. Arriving at a definition of wellbeing is far from easy as there are different ways to conceptualise it, as discussed earlier in this chapter. However, based on the literature outlined above, the following definition of staff wellbeing in higher education is proposed:

*“Staff wellbeing in higher education is a broad and dynamic construct that is influenced by university wellbeing processes and staff appraisals of their own wellbeing, as well as equality, inclusivity, and diversity-related issues and behaviours that together create fulfilment, a sense of community at work, and wellbeing.”*

## 2.11 Summary of the Chapter

This chapter provided a scoping review of what is known about Staff wellbeing in Higher Education and to investigate staff management. A summary of the findings indicated that stress is a factor influencing staff wellbeing. Furthermore, according to the findings, there are contradictory definitions of well-being, and the measures utilised examined components of well-being (e.g., anxiety and depression) rather than the construct of well-



being as a whole. The studies focused on finding weaknesses rather than positive attributes that define and contribute to well-being. As a result, interventions may concentrate on employee deficiencies, thereby limiting possibilities to uncover and improve staff strengths. Furthermore, more attention is required on the specific work context, to consider how culture, organisational processes, procedures, and inter-personal relationships influence staff experiences of wellbeing. This thesis describes the experiences of staff working in higher education, explaining their viewpoints, attitudes, and emotions about their working lives in higher education, to gain insight into the role of context on staff wellbeing.

## **Chapter 3. Methodology**

### **3.1 Overview**

In the previous chapter it was shown that staff wellbeing is minimally studied within the academic literature. Moreover, studies that have been conducted do not focus on understanding their experiences and perception of wellbeing but tends to show the effects of stress and burnout due to changes within the higher education sector.

Furthermore, the concept of wellbeing is broad, with multiple constructs and theories about wellbeing used in other contexts. With this in mind, the chapter will discuss and justify the approach used for this research. This chapter begins with an introduction to research paradigms, then turns to the methodological underpinnings (ontology and epistemology) that influenced my approach to this study. The rationale for a mixed methods sequential exploratory methodology is explained, alongside the research questions, methods, and procedures used for data collection, analysis, and interpretation. The justification for the research is presented, as is the research plan, describing the approaches taken to answer the research questions. Section 3.8.3 summarises the approach taken to evaluate my mixed methods research, before concluding the chapter.

A detailed methodology for each phase of the study is presented in chapters, 4, 5 and 6.

### **3.2 Research Paradigms**

Research paradigms are perspectives about the world and the nature of knowledge that the researcher uses to guide the research process, and meaning and interpretation given to research data (Kaushik & Walsh, 2019; Willig & Rogers, 2017). Each paradigm provides insight into five broad features of the researchers worldview: axiology (which refers to the beliefs about the role of morals and values in research ), ontology (a set of

assumptions about the nature of reality), epistemology (concerned with assumptions about how we gain knowledge, how we know the world, and the relationship between the known and researcher), methodology (is a shared understanding of how to gain knowledge and the language of research so that research can be conducted more effectively) and quality criteria (standards for assessing the rigour of qualitative and quantitative research) (Denzin & Lincoln, 2011; Kaushik & Walsh, 2019). Here, I will briefly outline two well-known paradigms: Post-positivism and Interpretivism to explore these elements in more depth. However, it is recognised that, within this research continuum, other paradigms exist, including Positivism, Post-Structuralism, Participatory and Critical and Social Construction (this does not represent an exclusive list). Pragmatist beliefs and values have informed my approach to this study and an overview of its relevance is also considered.

At the core of post-positivism is the focus on balancing interpretivists and positivist approaches to understand social issues. It draws on the tenets of classic positivism or scientific empiricism, where their role is seen as separate from the social world, or the event that is being observed. This viewpoint posits that, through the application of methods and procedures, it is possible to explain what is being observed. The findings from this type of research can be replicated and reproduced elsewhere due to the experimental research design which is focused on measuring effects.

Henderson (2011) articulates the post-positivist position as follows:

*Post-positivism does not negate these assumptions; rather, it suggests that the social sciences are often fragmented, that knowledge is not neutral (and really never has been), and that all knowledge is socially constructed (p. 342).*

Therefore, post-positivist paradigms recognise the influence of individual perspectives on understanding social phenomenon (Kaushik & Walsh, 2019) and accepts the fact absolute truth is not attainable. Furthermore, post -positivists paradigms value the contribution of a variety of research methods to help test variables (drawn from hypothesis) to establish their effects on the phenomena.

In contrast, Interpretivism is concerned with generating meanings and insights into the situation. For the interpretivist, objective truth is unattainable in the study of people. The researcher's role is to be purposively connected with, and become close to, the setting and people observed. Doing this supports the researcher's role to create meaning based on people's experiences. The researcher who aligns with an interpretivist paradigm is not driven by the pursuit of validity, but instead by obtaining findings that are trustworthy and representative of those observed. Therefore, it is fundamental for such researchers to provide processes that allow for the interviewees/observed accounts to be confirmed as representative (e.g., read by another person in the research team or shared with the observed).

There are merits in both paradigms due to their appreciation of the individual's perspective on the research topic. A summary of the main differences between the two paradigms is summarised in Table 4 (Based on a table adapted from Allemang et al., 2022). In the next section pragmatism will be considered.

**Table 4. Summarising the main differences between Post-positivism and Interpretivism**

	Post positivism	Interpretivism
<b>Ontology</b>	It is impossible to fully comprehend reality, according to critical realism.	The concept of relativism refers to the co-construction of realities in specific and local contexts
<b>Epistemology</b>	Adapted dualist/objectivist approach.	Co-created research findings based on transactional/subjective interactions.
<b>Axiology</b>	Reason, universal	Contextual and value-laden
<b>Methodology</b>	Modified experimental: falsification of hypothesis	Hermeneutical/dialectical
<b>Quality Criteria</b>	Internal/external validity, reliability, objectivity	Trustworthiness, credibility, dependability, confirmability

*Source: Table adapted from (Allemang et al., 2022).*

### **3.3 Researcher’s philosophical standpoint**

The previous sections have shown that post-positivism and Interpretivism have merit. However, in the study I outline my philosophical approach to research drawing primarily from the pragmatist research paradigms.

#### ***3.3.1 Pragmatism: ontological assumptions***

Pragmatism values action-oriented solutions to social problems. Considering the social problem from the perspective of the individual experiencing it, is an important feature of this paradigm. Furthermore, it emphasizes the importance of culture, language, institutions, and subjective perceptions to identify the problem and to solve it. Researchers have suggested that knowledge is constructed and is grounded in people’s experiences (Johnson & Onwuegbuzie, 2004). A pragmatic approach accepts a plurality

of approaches (Kaushik & Walsh, 2019) and argues that researchers should employ the most effective methodology and theory for a particular problem.

As defined by Blaikie (1993, pp. 6-7),

*“ontology refers to the claims and assumptions that a particular approach to social enquiry makes about the nature of social reality – claims about what exists, what it looks like, what units make it up and how these units interact with each other”.*

The researcher’s ontological viewpoint is grounded in pragmatism. For example, pragmatism contends that reality is renegotiated and understood based on its utility in certain settings and contexts. As a result, pragmatism is linked to abductive thinking that alternates between induction and deduction (Kaushik & Walsh, 2019). In adopting this stance, the researcher participates actively in the generation of facts and theories (Ansell, 2015; Goldkuhl, 2012). By taking this approach, research grounded in pragmatism implies that the researcher ultimately makes the choice and determines which topic is essential and what technique is most suitable, and that these choices will be impacted by the researcher's socio-political location, personal history, and beliefs (Morgan, 2007, 2013).

The study made a connection between a pragmatic paradigm approach and constructivist ideas (Clarke & Visser, 2019). Constructionism suggests that reality is socially constructed, created according to how individuals interpret the situations they find themselves in. In this respect, social constructionists believe that the way people interpret their own social world will be influenced by their experiences, history, context, and culture (Willig & Rogers, 2017). Blaikie (2000:116) expresses this approach as follows,

*“Social reality [from this approach] is regarded as the product of processes by which social actors together negotiate the meanings for actions and situations; it is a complex of socially constructed mutual knowledge – meanings, cultural*

*symbols and social institutions. These meanings and interpretations both facilitate and structure social relationships. Social reality is the symbolic world of meanings and interpretations. It is not some 'thing' that may be interpreted in different ways; it is those interpretations."*

Therefore, social construction uses interpretative methods to understand the meanings given by individuals to situations and their experiences.

### **3.3.2 Pragmatism: epistemological assumptions**

Epistemology is concerned with the nature of knowledge. The question of what knowledge is and how it can be acquired has been the subject of a great deal of debate through the centuries (Walliman, 2006). Epistemology - sometimes referred to as worldview - is concerned with how one sees and makes sense of the world. Creswell (2009:11) explains a worldview as 'a basic set of beliefs that guide action'. The researcher's philosophical basis of knowledge will be explored to provide the reader with a rationale for the research methods and procedures applied.

As outlined in section 3.2 and Table 4 above, post-positivism and interpretivism represent two influential worldviews that have been the (epistemological) bases for much social research (Creswell, 2009:6). From the post-positivists' perspective, inquiry into the social world makes claims of knowledge based on objectivity and deductive reasoning within the research process.

In contrast, interpretivism articulates that the reality observed is not objective but instead socially constructed. Therefore, the researcher considered that a key driver for gaining understanding of the phenomena of interest is to appreciate the subjective meanings that staff in higher education give to their social context and their interactions. Interpretivism emphasises the importance of the meanings that individuals give to their situation, and therefore qualitative data is crucial to interpretivist research in assisting the researcher's

understanding of a specific situation (Kaplan & Maxwell, 1994). However, interpretivism has been subject to criticism due to a lack of validity, reliability, and generalisability (Henderson, 2011).

The epistemological approach adopted in this study is located within a transactional realism perspective (Allemang et al., 2022; Biesta, 2014). According to transactional realism, the mind and the world are always in connection with one other, and so knowledge is formed based on interactions between individuals and their environments. The transactional realist believes that there are multiple realities that are all meaningful and requires the researcher to represent the findings based on the participants' descriptions (Tindal, 1994). This approach posits that the participants' meanings are partially accessible through analysis, and that the research and interpretation process is co-constructed and embedded within a cultural and historical context. However, from this perspective, the environment is dynamic and not fixed.

The process of interpretation can be challenging due to factors related to the participants' own understandings, and the subjectivity of researcher's interpretations, the effect of cultural meanings, and the dominant perspectives held by scientific groups about what is deemed as valid (Pidgeon & Henwood, 1977). Rather than a dichotomous approach, it is suggested that the investigator can adopt a range of viewpoints (Teddlé & Tashakkon, 2009). The application of this epistemological approach outlined above when applied to the study is summarised below in Table 5. Essentially, this approach seeks to explore and understand the feelings and attitudes of staff about their wellbeing in Higher Education. Furthermore, through the staff accounts the influence of the context and the processes within universities will be explored to understand wellbeing experiences.



**Table 4. Researchers worldview applied to the study**

Epistemological principles	Application to the present research
Individuals interact with their environment constantly leading to the construction of knowledge and meanings of their experiences (influenced by historical and cultural norms).	Staff share meanings about their wellbeing within the context of higher education. The researcher will gain insight into the contextual, cultural, and historical factors that influence their perceptions of wellbeing.
The social situation and context are complex and dynamic, therefore the meanings are diverse and multiple.	The study aims to understand the relationships between staff wellbeing and the context of higher education. A mixed methods approach will give in-depth insight into their experiences and allow for a range of methods to be used.
Understanding the interaction between individuals and the contexts people live and work in.	The study will review the processes and systems to support staff wellbeing within the context of higher education to understand their effect.
Theories are generated or inductively developed.	The researcher will draw on the views of staff and the generation of facts to construct a theory positioned within the context of higher education.

### 3.4 Research Ethics and Values

To promote the value of trustworthiness (Honesty and Openness), researchers conducting studies must give attention to ethical considerations, particularly when their area of investigation involves people and where the topic of inquiry is related to personal and sensitive issue – understanding staff perceptions of wellbeing would be considered under this category. Therefore, before undertaking the semi-structured interview and survey, ethical approval was sought, and feedback received from Nottingham Trent University helped to refine the process for the participant giving online consent. Ethical approval was received on 6<sup>th</sup> July 2015( semi-structured interview), prior to commencing data collection (see Appendix A: Ethics approval form) and further approval for the survey in September 2018. Prior to undertaking the semi-structured interviews, participants were informed of the research aim and an overview of the study was provided. Each participant signed a consent form before engaging in any data collection. Following that, they had

the chance to obtain a hard copy of the documents (Participant information and interview guide) during the interview. Prior to, during, and after the data collection process, participants had the opportunity to ask the researcher any questions and were reminded they could withdraw their data from the study by 30th July 2016. Participants were also advised that their data would be anonymised and kept safe in a password protected computer.

### **3.5 Core values: openness and transparency, employee rights, social justice, and humanistic principles**

It is recognised that the research design used will include a set of values about ontology, epistemology, methodology and axiology (see sections 3.2-3.3). However, research should also promote values of openness and transparency and humanistic principles that uphold care for the participants, and supports employee rights and social justice, each of which will be considered briefly below.

#### ***3.5.1 Openness and Transparency***

Openness and Transparency is related to the actions of the researcher to make explicit the process used in conducting the study and the generatability of the findings. For instance, this requires the researcher experiences and background to be shared to highlight how this can impact the researchers perspective (Wong, 2017). Furthermore, an audit of the notes and themes that emerged from the analysis of the transcripts are available on request and a sample is presented in the appendix of this thesis.

To promote the care of participants in the research, ethics approval was obtained to uphold the safety of the participants and to ensure data was securely stored and password protected (Wong, 2017). Each participant was provided with an ID to encourage their anonymity. All participants were respected and valued for their unique contributions

(Hanley et al., 2020) and understanding that they provide to the topic of staff wellbeing in higher education. Additionally, I was keen to ensure that the sample was representative in terms of the interviewees' and survey respondents' demographic factors, such as gender, race, sexual orientation, disability, staff role, and designation, and that appropriate sampling techniques were considered in each phase. It is acknowledged that could result in gaps in the sampling and will be revisited in chapters 4 and 5.

### ***3.5.2 Employee rights***

The Health and Safety at Work Act 2015 emphasises the importance of welfare provisions to support staff at work and the provision of a safe working environment. Employees have a legal right to expect safety at work and the employer has duty of care to provide a safe work environment. Increasingly, UK companies have recognised the importance of wellbeing at work and introduced workplace wellbeing strategies influenced by the need to improve employee engagement, productivity or to retain staff (Paton, 2017). Whilst this research may shed light on issues regarding employee rights it is also crucial to ensure that the researcher does not infringe any of these rights. This has been ensured by undertaking interviews at a time and venue convenient and comfortable for the interviewee. However, given current work demands within universities this could potentially limit the availability of staff to contribute to the study and could lead to gaps in the sampling.

### ***3.5.3 Social justice***

From a personal and a professional standpoint (as a qualified social worker) I have an interest in social justice. The importance of social justice and its connection to self-determination and the fair allocation of resources is evident within the literature in social work and the care professions (Kagan et al., 2019 Crethar & Winterowd, 2012).

According to Crethar and Winterowd (2012), principles of social justice require a focus on, equity, access to services and resources, participation and power, knowledge and information. Furthermore, as a researcher this study on staff wellbeing has the potential to further the overall aims of social justice. Equally important is the realisation that research has a history of being exploitative and extractive of often marginalised and distressed groups. Therefore, being aware of the potential of this power imbalance is important as a researcher. In response to the above, it is envisaged that any presenting issues will need commitment from the employer ( University) if workplace wellbeing is to be realised.

### **3.6 Researcher reflexivity and positionality**

Demonstrating an awareness of the researcher's own positioning in relation to an issue or problem is critical for methodologically sound research. As Shostack (2006) reminds us, data cannot be compared to "something like a found object on the beach, a piece of driftwood" (p.68). Data analysis will be influenced by the researcher's own experiences, values, and positionality (Cousins, 2009). In response to the above challenges, the researcher adopted a reflexive attitude during data collection, analysis, and interpretation. This required the researcher to continually reflect on the values, attitudes, and behaviours that may impact the interpretations of the results.

The researcher is aware of the potential influences of also working within the context of higher education and affected by the high workload pressures, observing changes occurring in the education sector related to increasing student numbers. I was of the opinion that, by also working in the same setting of the staff working in Higher Education, I would engender greater openness due our similar lived experiences. I was equally conscious that their emotions, attitudes, and feelings would resonate with my own and so

purposefully engaged in reflexive practices throughout the research and discussed the findings with the supervisory team to minimise any potential for influence.

### **3.7 Methodology**

In the previous section, I outlined my philosophical approach. As explained in chapter 1, the methodological approach employed in this thesis is a mixed methods research approach, using both quantitative and qualitative methods. I will now discuss the rationale for using mixed methods research utilising three key methods, semi-structured interviews, a survey and a freedom of information request.

#### ***3.7.1 The methodology of this thesis***

The researcher adopted a mixed methods approach to understand staff wellbeing within the context of higher education. A mixed methods approach is an approach to inquiry that combines qualitative and quantitative forms of research (Creswell, 2009). Mixed methods approaches have gained popularity within psychology and are considered to provide in-depth understandings of the sociological, biological, cognitive, and interpersonal factors impacting the individual's behaviour and attitude (Powell, Mihalas, Onwuegbuzie, Suldo & Daley, 2008). Furthermore, utilising qualitative and quantitative methods can help the researcher to gain a detailed, holistic and authentic account of the topic or issue Kratochwill and Stoiber (2000). For the researcher, the rationale to employ a mixed methods approach was determined by the extent to which using the combined strategies could answer the research questions effectively (Howitt & Cramer, 2011). In other words, both quantitative and qualitative methodologies can provide insight into a situation and should be combined if a more accurate understanding of the subject area can be attained by doing so.

Researchers have identified several reasons why a mixed methods research methodology may be used in a study. According to Greene et al. (1989) it offers opportunity for triangulation. Because more than one method has been employed, the researcher can be confident about their results, leading to improved inferences (Jogulu & Pansiri, 2011). It has been suggested that a mixed methods research approach can improve our understanding of, and insight into, a social phenomenon. This enhanced insight is achieved because the approach has four main priorities: elaboration, corroboration, developing, and initiating (Rossman & Wilson, 1994).

In this study, my focus was on development and initiation through the use of a sequential mixed methods design. The first method, a semi-structured interview (Qualitative), helped to inform the development of the second phase of the study (survey). Initiation helped me to focus on identifying new perspectives and assisted me in the discovery of any paradoxes within the data collection. As Jogulu and Pansiri (2011, p. 688) suggest, “... findings created through differing data collection and analysis techniques appear to lead to greater depth and breadth in overall results from which researchers can make more accurate inferences with increased credibility.”

### ***3.7.2 My research questions and the research methods***

The research aimed to understand how staff perceive their wellbeing in higher education and investigate how universities manage staff wellbeing. This thesis intends to answer the following research question: What is Wellbeing in Higher Education and how can it be managed? In answering the main question, the study sought to:

1. Understand what wellbeing is.
2. Consider the ‘meanings’ given to wellbeing from a staff perspective.

3. Identify how universities have responded and managed staff wellbeing.
4. Evaluate how the university context in the UK can impact academic wellbeing.
5. Reflect on the consequences of the above, and propose a model of staff wellbeing within Higher Education.
6. Make recommendations for how organisational responses and interventions can seek to support/improve academic wellbeing in the future.

While the protocol will be more explicitly addressed when describing the research plan (see 3.10), three questions are outlined below:

**RQ1: What is staff wellbeing in higher education?**

The intention here is to clarify the meanings attributed to wellbeing by staff and identify the characteristics of wellbeing in the context of higher education through purposeful questions about staff wellbeing and their experiences in higher education.. The findings from the semi-structured interview assisted in the development of a wellbeing survey for staff wellbeing in higher education. The survey included specific questions about the factors that can support their wellbeing and what were the essential components of wellbeing in higher education.

**RQ2: What factors impact staff wellbeing in higher education?**

The researcher intended to establish the association between future staff wellbeing, staff experiences, organisational culture, characteristics of wellbeing, staff wellbeing policies, services to support staff, and responsibility in the HE context. An investigation into the factors that predict the future wellbeing of staff in higher education was completed.

Through the application of a survey, these variables were included, and staff were asked to rank their agreement to the statement.

The quantitative phase of this thesis included a survey with staff working in higher education. The quantitative phase intended to test the relationship between factors relating to support within the universities and how they affect staff well-being.

### **RQ3: How can staff wellbeing be managed in higher education?**

The researcher considered the factors that can assist in the management of staff wellbeing in higher education. RQ3 explored how higher education interventions either promote or hinder the levels of wellbeing experienced by staff. This required the researcher to understand the current interventions adopted by universities to support wellbeing and to examine the perceived benefits and outcomes of the interventions on staff wellbeing. The data was gathered from publicly available records held in each university. These records related to the availability of a specific staff wellbeing policy and the types of interventions and support available to staff in higher education.

I intended to analyse the specific research questions outlined above by using both a qualitative and quantitative approach. My intention was to ensure that the collection and analysis of the data were connected. According to Bryman (2007), qualitative and quantitative methods need to “talk to each other, much like a conversation or debate, and the idea is then to construct a negotiated account of what they mean together” (Bryman, 2007, p. 21)

The proceeding chapters will provide an in-depth and detailed discussion about the various quantitative and qualitative studies used in this research. These will be addressed in chapters 4, 5 and 6. Chapter 4 explores the qualitative study (Phase 1 - semi-structured



interview), Chapter 5 outlines the quantitative study (Phase 2 - survey), and Chapter 6 discusses the freedom of information request and the specific methods and procedures used for collecting and analysing the data. The next section will discuss the research design.

### **3.8 Research Design**

Research design is defined as “procedures for collecting, analysing, interpreting, and reporting data in research studies” (Creswell & Clark, 2007, p. 58). There are three types of mixed methods designs according to Taskakkori and Teddle (1998): Equivalent status (sequential or parallel), dominant/less dominant designs (sequential/parallel), and Multilevel approaches. According to Creswell and Clark (2007), there are four major types of mixed methods designs: triangulation design, embedded design, explanatory design, and exploratory design. Three fundamental questions were considered when designing my mixed methods approach: (1) What priority and weight will be given to the qualitative and quantitative study? (2) How would I sequence my data collection and analysis? (3) When would the quantitative and qualitative phases be connected, and the results be integrated (Creswell & Clark, 2007)?

#### ***3.8.1 Research timings and research design***

A key issue for researchers utilising a mixed methods approach is timing (sequence). This requires the researcher to decide whether the various studies will be undertaken concurrently (at the same time) or sequentially (one following another). In this research, it was decided that the mixed methods research would be sequential (Tashakkori & Teddlie, 1998; Creswell & Plano Clark, 2007). The first phase of the semi-structured qualitative interview was collected and analysed, and the second phase of a survey (quantitative design) built on the results of the first phase. The final phase of a Freedom

of Information request (qualitative) was informed by the findings of the second and first stage.

The primary focus of this research was to explore staff meanings and perceptions of their wellbeing. Furthermore, the existing research is limited and there has been a focus on negative wellbeing factors(stress). The semi-structured interview can help to give further insight into this issue. The themes that emerge from the interviews were compared to existing literature and used within the subsequent phases for evaluation. Therefore, a sequential design was more appropriate as it allowed me to build on the qualitative phase. The purpose of adopting this approach was to consider how the qualitative data results and analysis informed the data collection of the quantitative phase. A second qualitative study(Freedom of Information) contributed to the analysis and overall findings.

To summarise, the research aimed to understand and interpret staff wellbeing in higher education to generate a theory about this topic. Taking an interpretative stance, I emphasised the importance of the interviewees shaping their own realities, in order to gain new insight and knowledge of staff wellbeing in higher education. By adopting a mixed methods approach, I intended to expand knowledge of staff wellbeing in higher education first and foremost, and then generalise and triangulate such findings. Furthermore, it is acknowledged that although a HE framework for wellbeing was proposed in chapter 2a based on the literature, that the themes generated from the semi-structured interview are primarily inductive.

### ***3.8.2 The weighting and mixing decision of the study***

The priority given to quantitative and qualitative methods in answering the research questions is referred to as the **weighting** of mixed methods research designs. When utilising sequential designs, the researcher is faced with two options. Either they decide

to give equal weighting to quantitative and qualitative methods, or alternatively, place a greater emphasis on one of these methods. The researcher's rationale for this decision will be impacted by their research question and purpose, their worldview relating to research, along with any specific issues relating to time availability and other practical issues.

Adopting a sequential qualitative mixed design meant that priority was given to the qualitative phase. When undertaking mixed methods research, two essential questions need to be addressed by the researcher. Firstly, when does a researcher actually mix the methods? And how does mixing occur? (Creswell, 2009:207). The mixing may occur during the data collection, data analysis, or the interpretation stage - a decision has to be made as to whether this occurs in all stages or just some stages. The present research adopted a connected approach. This means the mixing of the quantitative and qualitative methods is connected between the data analysis of the first phase of research and data collection of the second phase of research (Creswell, 2009:208).

To strengthen the aspect of mixing within the methodology, I decided that it was important to show how the results were integrated. For example, Mertens (2011) states that it is necessary "to explain clearly how the results were integrated and the contribution to improve understanding that was achieved based on that integration" (Mertens, 2011:5). The approach taken within this thesis was to explain the results from each of the studies separately and then combine the results to answer the research questions. For this study, the researcher explored staff views about their wellbeing within the qualitative phase, and the findings were further explored in the survey, which let me consider additional factors that could be discovered through the final study of a Freedom of Information request.

### *3.8.3 Analytical Justification of Mixed Methods Methodology*

It is acknowledged that there are limitations of the mixed methods methodology. The mixed methods approach has been subject to criticisms due to the perceived distinctions between positivist and interpretivist worldviews being applied to the same study, with some researchers suggesting that both paradigms cannot be mixed (Smith, 1983). Over time, a pragmatic approach has been articulated, suggesting that the researcher can be both objective and subjective in their epistemological orientation (Onwuegbuzie, 2002). Scholars have also commented that mixed methods research can be demanding and challenging compared to a single study research design, due to such factors as the length of time it can take, the potential expense, and researcher competency and experience (Johnson & Onwuegbuzie, 2004).

Despite these challenges, the mixed methods strategy allowed me to gain an understanding of staff wellbeing from divergent viewpoints. The qualitative study enabled me to explore the views and meanings staff give to wellbeing based on their experiences of working in higher education. I was also able to explore the types of support and interventions (counselling services, occupational health, wellbeing events, etc.) available to support their wellbeing. This enabled me to explore the views of staff wellbeing beyond the expressions of 'stress' and 'ill health', and to gain an understanding of the role of positive outcomes (life satisfaction, positive affect, and happiness) from staff accounts of working in higher education. Through the use of a quantitative study, I was able to focus on the factors considered important to the respondents and gain insight into the variables that influence staff wellbeing. Based on the findings from the quantitative study, this project was able to explore variables relating to experiences of working in HE, the culture of HE, characteristics of HE wellbeing, services and

interventions to support wellbeing, views about who should be or is held responsible for staff wellbeing, and staff's reflection about their future wellbeing in HE.

The sequential mixed methods design gave me flexibility in addressing the research questions and objectives; the qualitative data afforded me with an opportunity to hear the in-depth accounts from staff about their wellbeing and to gain insight into other contextual information from the unique perspective of staff working in higher education. The quantitative data measured current and future wellbeing and the variables that have the greatest influence on staff wellbeing. The qualitative element was explored and analysed first, followed by the quantitative phase.

Further details of the sampling and details of data collection within the methodology are provided in Chapters 4, 5, and 6 for each phase of the study. Data from each phase was connected and the analysis of one data set informing the other study.

#### ***3.8.4 Methodological triangulation***

Methodological triangulation is the process of using different types of methodology to study the same phenomenon (Bryman, 2006; Olsen, 2004). There have been various approaches taken to triangulation. Triangulation is beneficial in terms of confirming findings, boosting validity, and improving comprehension of the phenomenon (Bekhet & Zauszniewski, 2012).

Methodological triangulation can be seen to broadly fall within two categories: Across Methods (combines quantitative and qualitative data) and Within Methods (uses two or more data collection procedures, quantitative or qualitative but not both) (Bekhet & Zauszniewski, 2012). For this study, an across method approach was adopted. The study commenced with a qualitative method (semi-structured interview) to gain an

understanding of the meanings given to wellbeing and to inform the design of a survey (Phase 2). The researcher included an additional qualitative phase (Freedom of Information requests) to help expand on both the interview and survey findings. Findings from each phase have been included in the interpretation phase (See Figure 2).

Undertaking methodological triangulation may result in the following outcomes in the findings: convergence (the results converge and may increase validity through verification); complementary (the findings highlight different aspects of the phenomena) and divergent findings (identifies improved and new explanations for the phenomena under investigation) (Heale & Forbes, 2013). Given the focus of my research it is anticipated that all three will be evident.

### **3.9 Research plan**

Key to sequential mixed methods is the purpose and timing of data collection and analysis of each phase in this research. Phase 1 (semi-structured interviews) intends to ask purposeful questions concerning staff views, feeling and behaviours toward their wellbeing. Phase 2 (survey) based on the themes from phase 1 explored the factors that influenced negatively and positively) their wellbeing in universities. Finally, phase 3 intended to explore university policies and services available to support staff wellbeing. Following data collection, the researcher undertook the combined interrogation and interpretation of the data. The researcher's plan for analysis relating to each phase of study is outlined below (See Table 5).

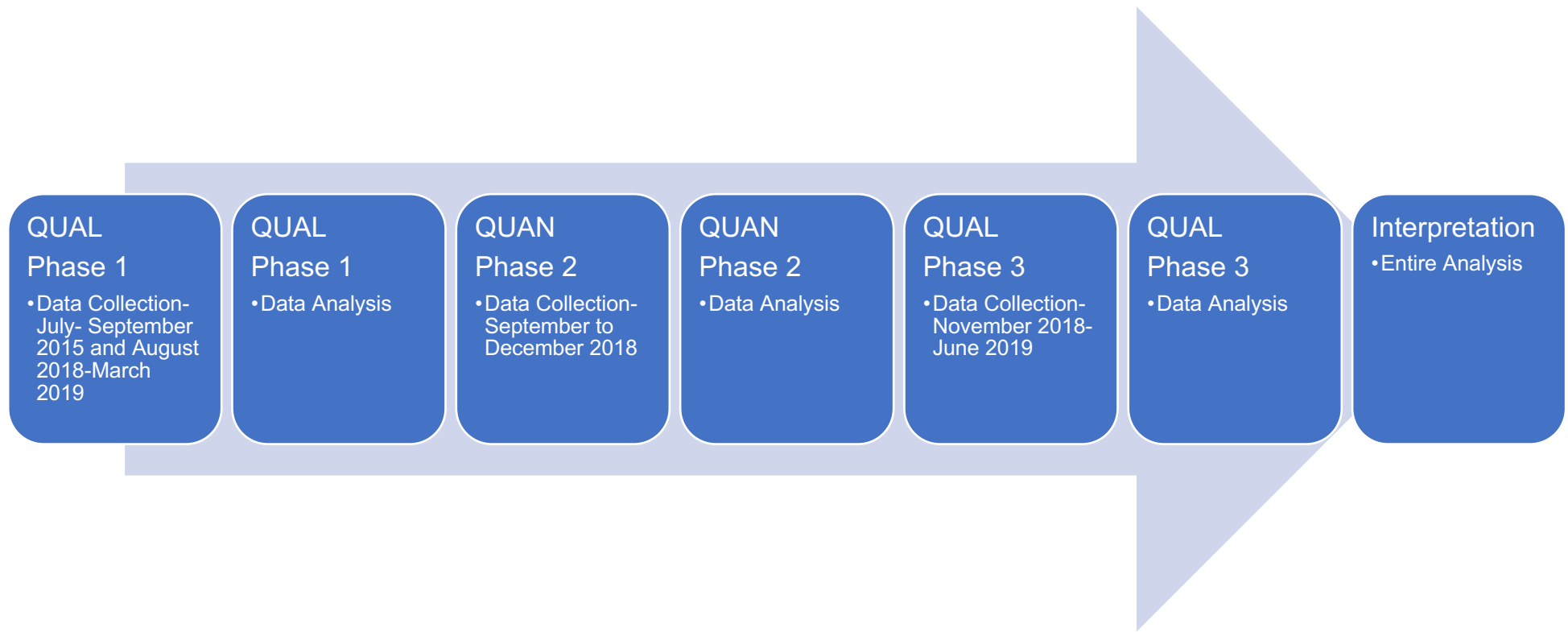
**Table 5. Research Analysis Plan (Phase 1,2 and 3)**

Study/Phase	Purpose	Data collection and analysis	Outputs
<p><b>Phase 1: Qualitative semi-structured interviews with various staff in higher education.</b></p>	<p>To understand staff wellbeing – unpacking their feelings, experiences, and attitudes towards wellbeing in HEIs.</p>	<p>Sample of 21 HEI staff members of varying positions. Transcribe semi-structured interviews. Thematic framework coding, categories and themes identified.</p>	<p>Key issues that influence staff wellbeing in higher education from the perspective of staff. Views and issues about current support provisions. Recommendations to help HEIs.</p>
<p><b>Phase 2: Surveys of staff in HEIs.</b></p>	<p>To examine the generalisability of relevant/testable outcomes from Phase 1, specifically related to predicting future wellbeing. To assess wellbeing in relation to various demographics and job roles.</p>	<p>Survey sent to HEI staff in the UK (Final N = 299). Open-ended questions analysed using Qualitative Data Analysis. Closed questions/items analysed descriptively and inferentially. Factor Analysis/Correlations/ANOVA/Multiple Regression (Items averaged dependent on validity and reliability tests).</p>	<p>Contributes to knowledge of wellbeing in the HEI context. Factors that predict future wellbeing, including job roles and demographic attributes. Recommendations from the outputs of the research for universities on staff wellbeing.</p>
<p><b>Phase 3: Qualitative research – FOIs (Freedom of Information) requests to all HEIs.</b></p>	<p>To identify the characteristics of staff wellbeing policies. To identify the relevant systems, services and processes that exist to support staff wellbeing.</p>	<p>Document Analysis (of University Staff Wellbeing Policies). Analyse responses to FOI questions. (N = 135 University FOI requests).</p>	<p>Contribute to knowledge about the management of wellbeing Highlight relevant issues influencing staff wellbeing policies and processes.</p>

### ***3.9.1 Mixed Methods Sequential Exploratory Diagram***

To explain my approach to this mixed methods research, a visual representation is presented below (See Figure,2) of the studies undertaken, including a semi-structured interview, survey and freedom of information request to describe the priority, implementation, integration and theoretical perspectives of the study (as suggested by Creswell, 2003):





**Figure 2. Mixed Methods Sequential Exploratory Design(b)**

*Source: Adopted from Creswell et al. (2003)*

### 3.9.2 Evaluation of mixed methods research

Due to the combination of quantitative and qualitative methods, it has been argued that an evaluation criterion should be applied that justifies the mixed methods design and demonstrates the integration of data and findings from each study. For example, O’Cathain, Murphy, and Nicholl (2008) outline 6 quality criteria for mixed methods studies in health research and provides guidance on how to assess the quality of mixed methods study. These criteria are sometimes referred to as ‘Good Reporting of A Mixed Method Study’ (GRAMMS)(See Table 7)

**Table 6. Good Reporting of a Mixed Method Study (GRAMMS)**

Describe the justification for using a mixed method approach to answer the research question.
Describe the design in terms of the purpose, priority, and sequence of methods.
Describe each method in terms of the sampling, data collection and analysis.
Describe where integration has occurred and who has participated in it.
Describe any limitations of one method associated with the present to the other method.
Describe any insight gained from mixing or integrating methods.

The evaluation criteria referred to as GRAMMS was applied to this study to determine the quality of the research. Each empirical study has included a methods chapter that outlined the sampling, data collection and analysis. Additionally, how each study is linked was considered and the quality criteria will be considered in the discussion section to establish the extent to which these intentions have been realised in my own study. Furthermore, a justification for using a mixed methods has been previously outlined in 3.8 of this chapter.

### **3.10 Summary of the Chapter**

This chapter explained a paradigm rooted in pragmatism that also includes a social construction ontology. A semi-structured interview, survey and freedom of information methods is employed to collect and analyse data. A sequential mixed method approach informs this study. In this chapter the justification for these methods have been outlined. However, further details regarding data collection, sampling and analysis are yet to be provided since each phase requires consideration from the phase before it. Therefore, these details will form part of each of the subsequent chapters. In the following chapters, the method, sampling, and findings from phase 1(semi-structured interviews) will be described and outlined.

## **Chapter 4. Semi Structured Interviews (Phase 1)**

### **4.1 Overview**

The previous chapters documented the limitations of the literature concerning staff wellbeing in higher education (See Chapters 2 & 3). The existing research is primarily quantitative in nature and is principally focused on the sources of stress for staff, as well as the impact of various changes in higher education (Williams et al, 2017). There has been an emphasis on the nature and extent of stress amongst academics, with less attention given to the experiences of other higher education staff (e.g., professional staff) (Van Straaten et al, 2016).

Utilising a qualitative method as the first part of this research, the present research sought to begin by developing an understanding of how staff articulate and perceive their wellbeing, to gain insight into the features of wellbeing in higher education. This chapter will explain the approach taken to identifying interviewees, determining the interview questions and sample size, and collecting and analysing data. The chapter will also outline the thematic analytical framework utilised for analysing the findings from the semi-structured interviews. In the next chapter, the emerging themes, supported by extracts from the interviewee's accounts will be discussed in detail to gain an understanding of how staff members working in higher education perceive their wellbeing.

### **4.2 Method**

Current literature identifies several procedures for qualitative data research (Bryman, 2004). The first phase in the research used semi-structured interviews to generate understanding about the phenomenon of staff wellbeing within the university context. According to Seidman (1978:76), semi-structured interviews allow the interviewer to

“reconstruct their experiences and explore their meaning”. This approach allowed me to explore the meanings given to staff wellbeing within the context of higher education. Williams (2000) suggests qualitative research can produce a form of generalisation, called “moderatum generalisations”, where aspects of the focus of enquiry (a group, or a situation) “can be seen to be instances of a broader set of recognisable features” (Williams 2000:215). This means that it is possible to make generalisations by drawing comparisons with findings from other scholars undertaking investigations relating to a similar group. Therefore, the findings from the research on staff wellbeing in higher education have been compared to the findings from research about teacher wellbeing in schools (See Chapter 2).

The researcher determined that semi-structured interviews would also assist in undertaking cross-case compatibility (Bryman, 2004). Cross-case compatibility is the ability to undertake a detailed analysis of the group to discern the presence of similarities and differences in its members' experiences. Ritchie and Lewis (2003) make clear recommendations about how qualitative research should be undertaken utilising a structured framework for analysis to provide detail case and group analysis. They suggest that utilising a framework for data analysis will ensure that data is subject to a transparent audit trail, thereby enhancing the reliability and trustworthiness of the findings (Ritchie & Lewis, 2003).

#### ***4.2.1 Recruiting participants***

Interviewees who work in higher education were targeted for participation in the study to gain insight into their experiences of wellbeing. According to Rubin and Rubin (2005:64): “interviewees should be experienced and knowledgeable in the area you are interviewing about.” In response to the literature (see Chapter 2), I was careful to ensure that the staff

recruited to the study worked in different roles within higher education, including both academic and professional roles, to gain an in-depth understanding of wellbeing. On reviewing the literature, there was evidence of a bias towards interviewing academics at the expense of other higher education staff (Walsh et al., 2003; Kinman, 2001). There was also a gap in the knowledge about staff's own experiences of wellbeing in all job roles in higher education.

I utilised my existing networks at the Higher Education Academy (now Advanced HE) to identify interviewees for the study. It is important to clarify that the interviewees were not close friends. I was fortunate to have had contact with many staff working in higher education as part of my role with the Higher Education Academy (now called Advance HE) which gave me access to a large pool from which to draw the participants. The above approach to the recruitment of interviewees contributed to the diversity in the sample, as participants were drawn from both academic and professional roles. Diversity was also achieved through selecting multiple geographical locations across the UK, including both pre and post 1992 universities to establish if wellbeing experiences of wellbeing differs (See Table 7): Demographics of Interviewees). A combination of convenience and snowballing sampling was utilised. Convenience sampling, a non-probability sampling method means that a sample is found from people that can be easily contacted and are willing to contribute to the study (Scholtz., 2021). It is acknowledged that there are limitations, including qualitative data validity (Robinson,2014) and may not fully represent the population to be studied (Staetsky, 2019). Snowballing, is generally combined with convenience sampling and depends on a referral, e.g. where the interviewees make suggestions about other potential participants/contacts who had not previously been known or accessible to the researcher or is based on the researchers contacts, thereby is dependent on a selection bias( Parker & Geddes,2019) Despite, the limitations outlined above, they were suitable for the study as it has the potential to allow

the researcher to have access to previously unheard voices or those who have traditionally been hard to reach (Woodley & Lockard, 2016). There were no additional processes introduced for exclusion in the sample. All participants who were willing to participate were included.

#### ***4.2.2 Participants demographics***

I initially undertook 13 semi-structured interviews with staff working in higher education between July and September 2015. It was observed that there were gaps in the sample population relating to ethnicity and younger staff (< than 40 years) working in higher education. This study then purposefully identified black and minority staff and younger employees to contribute to the study. Between August 2018 and March 2019, a second phase of interviews, totalling 8 interviews, was completed. In total, 21 semi-structured interviews were completed with staff in higher education. It is acknowledged that despite the researchers' efforts to increase the numbers of young and BAME staff this was not realised as most of those in the sample were over 40. Demographic information was collected in terms of age, gender, job role and status, location, and length of time working at their university.

Interviews were undertaken in a location chosen by the participants, such as their office or at a local coffee shop. The majority of interviews were conducted face-to-face except for four phone calls and a Skype call. Prior to the interview, participants were sent an information pack by email, including a consent form (also sent via email), and advised of their right to withdraw from the interviews. No interviewees exercised their right to withdraw their data from the raw data file.

A semi-structured interview schedule was developed to understand the experiences of staff wellbeing in the context of higher education. The goal was to understand staff

perception of wellbeing in higher education and understand their views, feelings, and attitudes about wellbeing. The schedule included questions around three broad areas: (a) experiences of staff wellbeing in higher education (b) organisations' efforts to support wellbeing (c) possible further steps to support wellbeing. The interviewer designed a list of questions relating to the broad areas outlined above (See Appendix A-Interview Schedule). A sample interview schedule was designed to gain feedback and, following comments from my supervisory team and other staff working in the sector, amendments were made to the initial schedule. This included an additional question to explore staff views about what more could be done to improve their wellbeing. The final interview schedule provided a structure for the interviewer.

The participants were based in the UK. All the interviews lasted between 40-60 minutes and were audio recorded. The interviewer used prompts to gain further clarification from the interviewee, and to give the participants an opportunity to share their views about staff wellbeing. For example, a staff member talked about an aging population in universities. I asked for further clarification about this point and the impact on staff wellbeing

Where it felt appropriate, additional prompt questions were asked to help me gain further insight into the issue discussed. A flexible approach was taken to the questions asked. One example of this relates to the question about staff experiences of using university interventions/support for their wellbeing. For staff members with no previous experience of using the university support services, I skipped this question and moved to the next one on the interview schedule.



The interviews were transcribed in full to safeguard the authenticity of the participants' views. To guarantee confidentiality, all participants used a pseudonym, and any identifiers were excluded from the analysis.

**Table 7. Table of Demographics**

Job Role	Start date	Contract Type	Male	Female	Age	Ethnicity	University status	Phase	Pseudonym
Course Leader	2001	P		x	51	White European	post	1	Gillian
Senior Lecturer/Programme Leader	2011	P	x		45	White British	post	1	Nathan
HE Development Manager	2013	P	x		50	White British	post	1	Simon
Professor/ Head of Social Policy	2013	P	x		62	White British	pre	1	Brian
Programme Director P/T	2011	P		x	56	White British	pre	1	Oprah
Head of Student Research and Equality)	2009	P		x	54	White British	post	1	Judith
Head of Post Graduate Development	2015	P		x	54	White British	pre	1	Lydia
Professor of HE Pedagogy	2015	P		x	60	Australian Chinese	post	1	Margaret
Research Support Librarian	1993	P		x	53	White British	post	1	Mary
Adult Nurse Lecturer	2002	P		x	51	Welsh	pre	1	Faith
Manager of Student Accommodation	1985	P		x	49	White British	pre	1	Zoe
Faculty Inclusion and Student Engagement Lead	1987	P		x	58	White British	post	1	Sarah
Academic Project Lead	2017	P		x	55	White British	post	2	Melanie

Job Role	Start date	Contract Type	Male	Female	Age	Ethnicity	University status	Phase	Pseudonym
Deputy Head/Subject Lead	2014	P		x	62	Asian	post	2	Maxine
Visiting Lecturer/Lecturer	2015	P		x	52	Black British	post	2	Naomi
Communications Lead	2014	P		x	26	White British	post	2	Martha
Associate Lecturer	2017	P	x		31	White Irish	pre	2	Bill
Senior Lecturer	2014	P		x	56	Black British	post	2	Ruth
Senior Lecturer	2011	P	x		53	Jewish	pre	2	Matthew
Senior Lecturer	2012	P		x	43	Black Other	post	2	Sharon
Academic Lead	2011	P		x	41	Black British	post	2	Cassandra

*Key*

FT= Full Time  
PT= Part Time  
P= Permanent  
Post= post 1992  
Pre= Pre 1992

### ***4.2.3 Ethical approval***

Ethical approval for this study was granted by Nottingham Trent University on (6<sup>th</sup> July 2015-No2105/09). All participants consented to taking part in the study (See Appendix D- Consent Form and Participants Information). At the start of the interview, they were advised of confidentiality of their data, of their right to withdraw from the study and ID were used to preserve the anonymity of the participants. All data was stored securely on a password protected computer.

### **4.3 Researcher reflexivity and analysis**

Literature has shown that scholars can influence their qualitative research findings due to their own biases and experiences, and through communication with the participant (See Chapter 3). To minimise the effects of these factors it is suggested that the researcher should utilise a reflexive approach to data analysis. Smith's (2008: 250) definition of reflexivity is "the term used for explicit consideration of specific ways in which it is likely that the study was influenced by the researcher". This may simply mean openly describing features of the study that may have influenced the data interpretations (such as the investigator's background and interest). It is important to recognise and identify any preconceptions or assumptions, so that a more transparent and authentic perspective of the participants' experiences can emerge, therefore contributing to improved rigour and credibility of the findings.

I worked in higher education at the time of the study. I had observed staff around me express concerns about their own wellbeing. Equally, I had begun to question if it was feasible to continue working in higher education given the mounting work pressures. To address the issue of researcher bias (e.g., confirmatory bias), it is important to acknowledge that it is impossible to avoid influencing the findings, but strategies such

as immersing myself into the accounts of the participants to ensure that their views and experiences remained central to the study, recognising that qualitative findings are co-constructed by the interviewee and researcher( see Chapter 3 methodology) and discussing any issues with my Director of studies may help to minimise the degree of researcher bias(Roulston & Shelton, 2015)

#### *4.3.1 Analytical process*

The interviews were analysed using a thematic analytical framework. Thematic analysis involves searching the data to identify common patterns about the phenomena, in order to gain insight into the research topic. Braun and Clarke (2006:81) comments that thematic analysis is an interpretive process characterised by the desire to “understand the experiences, meaning and reality of the participants”. This approach to data analysis enables the investigator to enter the world of the participant. The analysis was undertaken using the Framework Approach (FA) (Ritchie & Lewis, 2003), which is primarily an inductive approach since I wanted to explore and identify themes from the data not the other way around. FA, like other thematic analysis approaches, is concerned with identifying common and significant themes during the early stages of data analysis. An important feature of this approach is that it encourages a focus on the interviewees and offers a visual structure to analyse emerging trends. The Framework Approach (Ritchie & Lewis, 2003) and thematic networks (Attride-Stirling, 2001) suggest that a primary concern of data analysis should be to demonstrate transparency and clarity about the links between the different stages of analysis (Pope et al., 2000).

The Framework Approach identifies three stages of data interrogation:

#### ***4.3.1.1 Data management (developing codes and categories)***

In this stage, which is inductive, I did not use an existing framework, and instead identified and highlighted key phrases from the transcribed interview. Comments were recorded within the margins of the transcripts to identify and summarise what the respondents were reporting. This study was careful to summarise the key phrases in the words of the respondents (inductive descriptive coding) to ensure that the themes identified remained an authentic record of the original transcripts (Ritchie & Lewis, 2003). The process of reviewing the transcripts was iterative and led to the researcher generating ideas that informed the development of a coding matrix.

#### ***4.3.1.2 Identifying and testing a thematic framework (developing a coding index to organise the data set)***

The analysis moved to the development of a coding matrix based on the 21 interviewees' experiences of staff wellbeing across a selection of pre 1992 and post 1992 institutions. The inductive descriptive coding was reviewed by three experienced academics to safeguard the integrity and trustworthiness of the study. Changes were tracked by maintaining an Excel spreadsheet and recording changes to the matrix. Each code initially formed a potential category, but as the codes increased in number, a decision was made to group together some of the codes into broader categories. Similar categories were initially brought together to form initial themes. Using the categories and initial themes, a coding index was developed to assist with the organisation of the data set. The coding index was subject to regular revision as new insights emerged from the data.

#### ***4.3.1.3 Developing descriptive and explanatory accounts (synthesising coded data and refining final themes).***

The final stage of the FA approach required me to condense and synthesise a range of diversely coded data by adjusting the initial themes and categories (Smith & Firth, 2011). Critical thinking is regarded as an integral part of the qualitative research process as the investigator is required to code the descriptive accounts. To further develop the participants' descriptions, links were made between categories and themes (Ritchie & Lewis, 2003). Upholding the authenticity of the participants' descriptions is a fundamental principle of the Framework Approach and central when developing abstract concepts. Once this study was fully acquainted with the interviewees' accounts, it was possible to make links between the initial categories and develop the final categories/themes. An example of the links between the categories and codes is presented in appendix L, themes emerging in relation to a specific question. This assisted me to then develop the final conceptual frameworks that described the staff accounts of wellbeing in higher education. At all times I was moving back and forward between the stages and data to ensure the accounts were not misrepresented. As Smith and Firth (2011:8) comment: “this iterative process resonates with the central tenet of the framework approach that the interconnected stages are not linear, but a scaffold that guides the analysis” (Ritchie & Lewis, 2003).

The Framework Approach allowed this study to interpret the participants' experiences in a transparent way, which subsequently led to the development of the final themes. The final themes are outlined in Appendix E (Framework Analysis Themes and Sub Themes), which represents the staff's views and their experiences of wellbeing in UK universities.

A key consideration for all researchers is to determine when data saturation has been achieved. Data saturation is usually assumed to have occurred if there are no new themes and no new data is emerging, and provides rich, detailed and nuanced insights into the topic of research (Fusch & Ness, 2015; Dibley, 2011). At the point interviewing 13 interviewees, no new themes were emerging. However, mindful of the need to interview and hear the voices of people not normally considered (Bernard, 2012), it was decided that BAME staff who represent a small population of staff working in universities (see Chapter 1) should be included, to enhance data saturation. Furthermore, it is acknowledged that data saturation (See Chapter 3), will be enhanced by data triangulation (utilising multiple methods to collect data) as it allows the researcher to understand an issue/phenomenon through different varied perspectives/lens. Chapter 4(a) will discuss the themes, supported by the interviewees' quotes, to expand understanding of staff wellbeing in the context of higher education.

#### **4.4 Summary of the Chapter**

The chapter has provided an overview of the rationale and process taken for identifying participants and acknowledges the potential challenges of using convenience and snowballing sampling. Furthermore, the analytical process of Framework analysis has been defined and explained, to give insight into the process taken for data analysis as primarily inductive for this study. Furthermore, the researcher's role, as someone with lived experiences of working in Higher Education was explored, acknowledging the potential of researcher bias and to put in place with the Director of Studies strategies to minimise the impact of confirmatory bias.



## Chapter 4a. Findings: Semi -Structured Interviews

### 4.1 Overview

Chapter 4, in introducing the qualitative methods employed in this study, explained how participants were recruited, their demographics, pertinent ethical issues related to the research, how the interviews were conducted and analysed, how the framework to analyse the data was chosen, and how the descriptive accounts were developed. This chapter will analyse the findings of this research in detail to identify emerging themes in higher education staff's accounts of their wellbeing.

This chapter is centred on the accounts of 21 staff, working in higher education, located at different universities across the UK. Their names have been changed to preserve their confidentiality. The sample was diverse in respect of ethnicity, age, gender, and job roles. The existing body of literature about staff working in higher education has focused on the nature of stress, the sources of stress, and on how the issue of stress should be addressed (See Chapter 2a). In contrast, these accounts provide insight into staff's perceptions of wellbeing in higher education, with an emphasis on their emotions, attitudes, and views concerning their experiences of wellbeing. Analysing these accounts helped me explore my specific research question: what is wellbeing in higher education and how can it be managed?

A total of seven themes emerged from the coding and application of the thematic framework (see Appendix F). The superordinate themes are: **Fragility** (the factors that have challenged their wellbeing and the extent to which wellbeing can be repaired or improved); **Dimensions of wellbeing** (the salient features of staff wellbeing); **Duality** (the oscillating and changing nature of wellbeing); **Support systems** (the support strategies organised by and for staff); **Care and Concern (Organisational)** (the

university's actions to address staff wellbeing); **Outsider from within** (feelings of not belonging or being valued) and **Creativity and Growth** (the opportunities to grow and flourish, along with suggestion to promote the future of staff wellbeing).

Each of the themes will be considered, and relevant extracts from the transcribed interviews will be used to illustrate these themes in the commentary below. To illustrate the prevalence of the themes throughout the following terms were utilised: Majority/Many( 17-21 participants); Most/Well over half( 13-17 participants); several( 5-13 participants); Some( 1-5 participants). This chapter then concludes with a summary of the main findings which will be considered in more depth as part of the discussion section.

## **4.2 Fragility of wellbeing**

There was consensus regarding the ease with which staff wellbeing can be damaged and broken. Brian, a professor, explained how susceptible wellbeing could be to damage:

*“I suppose, for example a head of department could damage wellbeing purely by not consulting people about an important or significant issue which affects them and if you don't do that the trust is lost very quickly and once trust is lost morale goes down and you're not in a position where wellbeing is in plentiful supply. I think it is very easy indeed to damage wellbeing and quite hard to create it.” (Brian)*

According to Brian, there have been several external factors that can be seen to have adversely impacted on staff wellbeing, such as the introduction of policies that increased student numbers, and measures that promoted marketisation. Consequently, many institutions are now embedded to a business which has now become the dominant feature of most universities. Several of the staff felt it was difficult to envision how staff wellbeing would not be damaged by this new working environment. Zoe, an

accommodations manager, talked about the difficulties staff faced adjusting to these measures:

*“I think at the moment there is a huge shift in large organisations like mine who are becoming more and more commercial and I think there are people who have probably been there a long time that haven’t got that background and they probably need to be nurtured a bit more, supported in understanding what that means because I think the effect of it is in recognizing that there these are people who want the best for the business but they need to understand fully where it’s going hence you then get the pressures [...] and this has an impact on their wellbeing.”(zoe)*

Doubts arose as to whether the fragility of their wellbeing could be improved without considering the culture of universities that was seen to be shaped and influenced by management. This sentiment was shared by Matthew, a senior lecturer, but he also believed that many institutions have embraced a culture that is based on supporting student needs over the intellectual purpose of education, which was depressing and concerning to observe in recent years.

The university environment was described as one of fighting battles each day. Martha questioned the extent to which the work environment could be improved, instead suggesting there was a sense of futility in trying to challenge the environment as it would inevitably impact one’s wellbeing, ultimately suggesting that the work demands would need to be accepted. Cassandra commented:

*“I don’t know if it’s because ultimately everyone still has to complete their work, it has to be completed to the time and still have to be, the idea of concept of reasonable adjustment is a really good example. You can even say it’s not reasonable.” (Cassandra)*

Thus, the staff interviewed in higher education often perceived their wellbeing as fragile, largely due to the existing business cultures of universities being antithetical to staff wellbeing. They also commented that their wellbeing had been negatively impacted by

structural changes to higher education institutions and could not see a way for their wellbeing to improve without overhauling the negative cultures of universities.

### **4.3 Dimensions of Wellbeing**

Dimensions of wellbeing seeks to outline the facets of wellbeing perceived most important to contributing to or hindering their wellbeing in higher education. It felt fitting to begin by sharing the interviewees' accounts of their commitment to, pride in, and love for (teaching and their profession. For many, their love for teaching was a source of strength, and they altogether believed that their roles made an invaluable contribution to and difference in the lives of others. As Simon, who had worked at his university since 2013, as a senior manager remarked that knowing you can make a difference to how students proceed with their lives provides an "awful lot of satisfaction" which contributes to feelings of wellbeing" A similar viewpoint, recognising the contributions made to higher education and the country, was shared by Maxine:

*"I think we do need to have some recognition of the importance of Higher Education and what we do in Higher Education for the country." (Maxine)*

This understanding was therefore a major source of their positive wellbeing, giving meaning to their experiences amidst changes and processes that did not always seem reasonable or sensible within the context of higher education. Lydia, employed at a pre-1992 university since 2009, commented that her own experiences and opportunities as a first-generation student had positively impacted on her wellbeing. The ability of their jobs to influence their wellbeing positively was echoed by many others. Faith, who worked as a senior lecturer, for over 5 years remarked that teaching and creating new professionals was a source of pride for her as her students were becoming registered nurses, thus contributing to her sense of wellbeing at work.

Whilst in agreement with Oprah and Margaret, Sarah, who had worked in higher education for several years and was nearing retirement, raised some concerns about the long-term impact of retirement on her wellbeing:

*“I’m part of something. What does worry me is about retirement, it’s not that far off now and who I am then, what is my identity then.” (Sarah)*

The above quote reinforced Sarah’s commitment to the profession of teaching and the idea that her wellbeing, identity, and sense of worth were intertwined with her job, and, unsurprisingly, led her to question who she would be after leaving her role in higher education.

Their accounts support the literature which suggests that work in higher education is a major source of wellbeing. However, the fact that positive wellbeing was connected to making a difference to others and the future workforce has not been fully articulated or appreciated.

Despite this, in their accounts, another commonality in their accounts was the shared view that staff wellbeing has largely been ignored or is not given enough priority by universities. There were regular comparisons between the level of attention given to student wellbeing versus their wellbeing, and this point was reinforced by Margaret, who has been working at her current institution as a professor since 2015, remarked that the wellbeing of managers was often assumed and that universities did not “systematically concern” itself with the wellbeing of staff” The extent to which staff wellbeing is driven by improving the health and performance of staff was brought into question, suggesting that those with the strongest voice - the fee payers - would inevitably be prioritised. This would seemingly suggest that staff wellbeing has not been at the top of the university’s

priority list for some years, given that the current student fee system is likely to continue the current state of play is likely to persist.

Having clarified the staff members' views regarding the lack of attention given to staff wellbeing, I asked the question 'What does staff wellbeing in higher education mean?'. As the evidence from the literature indicates that there is a lack of consensus about what constitutes wellbeing, I expected the responses to this question to mirror this uncertainty. This was not the case. In terms of what staff meant by wellbeing positions were largely consistent. A majority viewpoint expressed by the interviewees was about the importance of balance and equilibrium - a work environment that is balanced in terms of having reasonable limitations for what is expected of staff. Similarly, it included acceptable workloads, workload models, supported by managers who can approve the resources required and provide the necessary training for them to do the job to the best of their abilities. For example, Gillian, course leader, stated:

*"I think staff wellbeing in High Education is about people feeling as though they are operating within their reasonable sort of limitations so they're not feeling overloaded and overworked and feeling as though things are manageable."*  
(Gillian)

Staff accounts focused on the processes and practices that shape and influence their wellbeing, suggesting that their wellbeing is linked to the work environment and requires a balanced workload that supports staff wellbeing. Many of the accounts spoke of universities experiencing changes, such as restructuring, resulting in uncertainty and challenges to the equilibrium required for positive wellbeing.

It appears that staff wellbeing in the university context was also linked to the attribute of security related to the financial benefits of working within higher education and safety and at work. Mary, a librarian, echoed this viewpoint but built upon the idea of security,

suggesting, another important aspect of security is trust, being trusted by managers and feeling as though you can trust your colleagues within the workplace.

Consensus also emerged regarding the role of trust in staff wellbeing – that is, the need for staff to feel that others (managers/colleagues) have confidence in their ability to undertake their jobs. This included being given flexibility and autonomy in terms of how, when, and where they performed their jobs. As Mary later remarked, being trusted leads to “higher morale” in the workforce.

Staff wellbeing was also linked to the idea of time. That is, the availability of time, the pressures placed on their time, and the idea of time being usurped from their precious families, significant others, and hobbies. Sarah gave an example of diminished wellbeing due to unrealistic expectations being placed on her time, as she regularly worked 40/45-hour weeks, and on occasions more to complete marking and in extreme cases taking annual leave to write reports. Similarly, Sharon remarked that her university had become quite used to encroaching on people’s time at home and had managed to do so for years without challenge. These accounts appear to emphasise unrealistic expectations being placed on staff’s time, and that the university sector is predicated on the assumption that deadlines should be met at any cost, even if it means staff work in their own time. The need for staff’s time to be valued and respected represents an important aspect of staff wellbeing in higher education.

A sentiment reported by most of the interviewees was that their wellbeing was grounded in the principles of fairness and equality – the equitable treatment of and respect for everyone, and the application of fairness by managers’ and colleagues’ behaviour towards each other, having a strong potential to impact staff wellbeing. These findings are not at odds with the literature about the fair treatment of staff and emphasise the importance of

understanding how fairness and equality are applied in the work context and how the application of these principles requires a multi-level approach from the top down, involving both staff and the university sector.

In contrast to the earlier accounts about wellbeing, Oprah suggested that, rather than locating wellbeing at the level of the individual, attention should be paid to the collective wellbeing of teams and colleagues.

The above disclosures about the important features of staff wellbeing might suggest they are at opposing ends with the organisation's vision of staff wellbeing. Tony remarked that the concept of wellbeing from the university's perspective often depicts staff members that can confidently balance all demands and work requests, without it "hindering their job.". This seems to imply that the vision of staff wellbeing presented by universities is unrealistic. Not only this, but it has been ethically questioned whether higher education should aspire towards or embrace a model of wellbeing in which staff are constantly performing and meeting targets regardless of the amount of work they are expected to do, and without reasonable boundaries and limitations in place.

Staff shared a variety of facets that contributed to their wellbeing ranging from the love of teaching and the profession, contributing to others and the higher education sector, the role of trust, safety, the importance of being valued, fairness and equity and flexibility and autonomy work.

#### **4.4 Duality of wellbeing**

This theme explores the changing nature of staff wellbeing over the years. Staff wellbeing is characterised and captured by the term 'duality'. In most of the cases wellbeing was not considered to be either or, at opposing ends of the wellbeing spectrum but instead was



characterised by periods of both increase and decrease, positivity and negativity in their wellbeing, and both co-existing at the same time.

When asked if their wellbeing had changed positively or negatively since working at a university, 11 out of the 21 staff members believed that their wellbeing had improved. Several examples were shared as to how this had manifested. For example, some staff felt that their wellbeing had increased because of the availability of career progression options. Brian said he was motivated to work hard because opportunities existed for advancement and there were clear progression arrangements in place.

For others, this was not the case, with several reasons given for this, such as the specific culture, leadership, and the philosophy of the organisation. Melanie observed that the approach taken by the organisation to ensure that work was done meant that it felt as though discussions about wellbeing were closer to lip service than reality as there was little consideration of the effects of the increased workload on staff. Similarly, when asked if her wellbeing had changed, Lydia reported that, from a scale of 1-10, it was 5. This was largely due to the fact that she had been made redundant and how this was handled by her previous university but was trying to recover from its impact at her new university, where she now worked as a visiting lecturer. She said the impact of this change had affected her confidence and, thus, her wellbeing,

Participants indicated that the negative change to their wellbeing had manifested itself through visible alterations to their moods, mental state, and physical health. Tying his wellbeing to his limited chances to exercise and socialise, Matthew remarked that:

*“I’ve definitely not been exercising as much. I’m probably socializing less with friends, but I don’t want to completely throw that at the door of education because I feel I’ve also got to the point where I don’t want to be out every Saturday night.” (Matthew)*

The impact of not being able to keep up with personal fitness on wellbeing was also echoed by Bill, who remarked that his wellbeing had changed:

*“You can’t get out and you’re tired when you go home mentally which means you don’t want to walk, you don’t want to exercise because you are mentally exhausted, or you’re logged back onto the computer once you’ve cooked your evening meal. Your workload balance isn’t right.” (Bill)*

Several participants talked about the effect of working life - which was having an impact on their ability to function at home - on their wellbeing. Casandra, a senior lecturer, stated that her wellbeing was affected: *“When I started in academia, I didn’t have two children to look after at home, I’ve had two children and the pressure, the e-mails, it just goes on and it eats into their time as well.”*

The impact on health was stark. Perhaps worryingly, some spoke about how the working environment was affecting their ability to prioritise their health, often forcing them to cancel and put off doctor and hospital appointments to meet work pressures. Gillian recounted that, after a bout of illness, she had put off arranging to see her GP, and talked about the resulting consequences. Gillian said:

*“I was off work for – well I say I was off work; I had a sick note which meant I could be absent from work but still do some work. This was – 2011 – three years ago and I lost my voice for a long period and the year before I had pneumonia.”(Gillian)*

Whilst the fact that half of the staff group (11) reported improved wellbeing since joining university might give us cause to be optimistic about the state of staff wellbeing in higher education, this should be cautious optimism as the remaining staff that were interviewed reported that their wellbeing has been changing negatively, impacting on their fitness routines, mental health, and their home life. However, as the above accounts indicate, the presence of and opportunities to develop strength, resilience, personal professional

growth, and development served as barriers to prevent their wellbeing from being diminished. Thus, whilst the nature of staff wellbeing in higher education might seem bleak, the accounts above suggested that there are ways to safeguard wellbeing in the workplace for higher education staff.

#### **4.5 Support Systems**

From the experiences shared, it appeared that the availability of practical and emotional support from other colleagues or teammates was a source of strength, hope, and offered a sense of community. All of these served to enhance their wellbeing.

For instance, Naomi, visiting lecturer talked about her experience of being made redundant from her previous university and since working at her new university, as a visiting lecturer she had felt very supported by her colleagues, part of a family of academics, all in the same situation together and the feeling of being “in the same boat.

However, these relationships and support systems may not be within the institutions control in a direct way. Matthew commented that the best support systems were organic and not forced. In his own words:

*“Usually when it’s one of these staff celebrations or staff tea party or staff whatever I do avoid them because I feel if I’m going to socialize and spend my time doing it I’m going to do it outside of work and the times I’ve really enjoyed hanging out with people from work are times when we’ve just organized it ourselves. I would attend things like that if they just seemed less forced, if it wasn’t, these big staff events which are celebrating how great everything is, how great everyone is just seems a bit fake.”(Matthew)*

The support gained from working as a team, appear to positively enhance staff wellbeing and it appears that staff also have an important role in shaping and contributing to the team they want. The accounts suggest that the strength of supportive systems is in having

authentic, organic relationship with others at work which cannot be artificially produced by senior management interventions.

#### **4.6 Organisational Care and Support**

The majority viewpoint was that universities had processes in place to support staff to do their jobs, and many mentioned a range of available interventions such as occupational health, their organisation arranging wellbeing weeks, staff development programmes, subsidised gyms, and more innovative approaches such as guided walks and a rooftop garden to foster a climate of staff wellbeing. Yet, when asked if they would use the provisions provided by their university, the response was surprising, as most participants said they did not wish to use the services available to them.

Participants stated that their reluctance to use their universities' support systems was due to a variety of reasons. Some participants attributed their non-use of the services to only being accessed in extreme circumstances and related to an event or situation in their home or work life that caused overwhelming upheavals. For instance, Bill stated that the reasons for using these services would have to be "pretty cataclysmic".

Likewise, several participants were determined not to use the services provided by their university because of their desire to achieve work-life distance, which represented a conscious decision to keep work-life and home-life separate. Both Nathan and Matthew expressively communicated that the things related to work should be kept within that context, they felt the less the organisation did for their wellbeing the better and wanted to be left alone to find help outside of work if required. This standpoint was expressed by Matthew, who said: *"I don't think the organizations should do much, the less they do the better, I want them just to leave me alone and let me be."* (Matthew)

Another reason given for the non-use of services is related to the quality of the services provided. This issue was raised by several interviewees, with comments being made about the quality of the counselling service. For instance, Lydia stated that in her institution she only received 6 counselling sessions which she did not feel was enough to resolve potentially serious issues and had decided for her own health and wellbeing to pay privately, so although the service existed, “it’s not really going to solve the issue” for many staff working in higher education.

Relatedly, Ruth was prepared to give the available support a chance but recognised some challenges in the availability and efficacy of resources to deliver this service. Ruth reported: *“I went to one of these places [occupational health] that you are supposed to [...] and told them I was being over-worked and they gave me suggestions, then sent my boss an e-mail but nothing came of it and the reason why, I think, is not because they don’t care but they are overworked too.”*

From the account above, even when staff are using the services, they find them and the staff working within them are overwhelmed, and overall, the support experienced felt basic and ineffective, due to the lack of follow up provided.

Participants were asked who they felt was responsible for staff wellbeing. The majority believed that the responsibility for wellbeing rested heavily on managers. For some, managers were a source of support and in contrast, many others believed that their managers did not prioritise their wellbeing, leading many to question if there is *“any specific guidance in terms of the training senior managers get”* about staff wellbeing.

On the other hand, the role of HR was viewed as marginal; it was regarded as inflexible. Whilst recognising its role in the recruitment of staff, some participants felt that it did not

fully appreciate the impact of those vacancies on staff when they were carrying long-term vacancies due to staff absence. Maxine said:

*“But I think the key is Human Resources acting daily to get a better understanding of academic needs and also what they don’t really understand is, they tend to work with the unions and they are rescued from the understanding of staff needs generally and within that staff wellbeing.”*

Managers are seen to have a role in supporting the wellbeing of staff and the guidance and support offered to them is of variable quality. It appears from their accounts that universities provide services to support their wellbeing, this might suggest there is some reluctance amongst staff about utilising the services and issues related to number of counselling sessions offered appears to deter engagement.

#### **4.7 Outsider from within**

The experiences of some staff at work contributed to their lower sense of wellbeing. Feelings of despair, and concerns about their work environments, resulted in diminished motivation and morale. Some participants reported not only experiencing changed wellbeing, but also feelings of rejection, of not being accepted, and of isolation within their university. The accounts of black, minority, and ethnic staff members described a working context of invisibility. Cassandra, a senior lecturer, described not being recognised as a member of staff and how this reduced her sense of belonging in the institution:

*“So when I first started lecturing I got stopped by security a couple of times because they didn’t think I should be going into a lecture theatre when the lecturer wasn’t there so there was always the assumption that I was a student [...] it took some members of staff probably a couple of years to even start saying hello to me in the corridor [...] I think that there is a lack of recognition that people with disabilities or people from ethnic minority backgrounds have a belonging here as a member of staff.” (Cassandra)*

There was a strong sense of frustration expressed by four (the majority) of the Black, Asian and Minority Ethnic staff at the higher education sector and leaders for not doing enough to diversify the workforce, and it was seen as privileging certain types of academics. In contrast, black academics stated that in their own institution they were, less visible, and unheard. Consequently, this has meant many, according to Maxine, “...*have never really done well within our higher education sector.*”

Alongside feelings of not belonging staff talked about looking different to others around them or feeling pressured to fit in within the wider institution. In one case, Oprah, having moved to a new job in another country, recounted being pressured to reject her past self (culture and identity) to fit in and be ‘part of the Northern Irish scene’ and culture of the University.

Feelings of rejection and isolation were also felt by elderly staff members in academia. In their accounts, several staff members referred to themselves as the ageing staff population. This experience led many to question their sense of belonging to an organisation that was changing, becoming more stressful. In the case of Harriet, she felt that the impact of getting older, in Higher Education influenced her ‘ability to actually physically to be as resilient’.

As in the experiences of BAME staff, feelings of being an outsider were expressed, by some staff that were over 50s, of not feeling they belong in their institution, and that this subsequently affected their wellbeing. In the case of Jessica, she talked about attending a focus group organised by her institution because they were worried about staff in their 50s and their wellbeing.

Staff have shared experiences of their reduced sense of belonging, related to attitudes, behaviours and actions towards staff that have left an indelible and lasting impact on

staff wellbeing. In the later section of the chapter, we hear from staff about what institutions can do to improve and enhance their sense of belonging and commitment to their institution.

#### **4.8 Creativity, Growth, and suggestions for improvement**

For many, their role was a source of great fulfilment and satisfaction. They talked about an environment that offered opportunities compared to other sectors. For example, Monique talked about how she had enjoyed the experience of undertaking her Master's degree programme.

The opportunities for growth and development were symbolised as a gift for some staff members. For instance, Sarah commented on the opportunities teaching had given to be creative, in how she shared her knowledge with students in the classroom and felt this was valued by her institution, leading her to have an improved sense of commitment to Higher Education as whole, and thereby less inclined and 'worried about trying to create some alternative lifestyle or whatever.'

Related to opportunities to use their creativity and knowledge, staff talked about how their creativity and development had been fostered in their institution, for instance, in Ruth's case, this included 'doing projects that you are interested in and participating in research' and the availability of training courses.

Well over half of those interviewed recognised the importance of the development opportunities through the courses made available to them, but all commented that there were challenges in attending the courses or events due to the increasing workloads. For instance, Gillian, indicated that workload pressures would inevitably supersede staff interests and their developmental needs, implying that aspirations were not realised or



that staff were 'not able to service those' need, suggesting that the lack of flexibility in the work environment was negatively hindering and impacting on the developmental goals and aspirations of staff.

A consequence of unmet developmental needs and increasing demands has been a loss of morale, leading to increased turnover of staff across Higher Education. For instance, Matthew commented on a recurrent cycle of staff deciding to leave his institution and the impact on their morale due to 'seeing your friends leave'

From the staff accounts there are areas that could improve their wellbeing in Higher Education, and these are the broad categories that emerged that will be considered separately below: **self-care, conversations about wellbeing and metrics, outsider experiences and life-style choices**. Turning to self-care, this related to staff strategies that they had introduced to improve their own wellbeing, ranging from friendships formed at work and creating a collegiate environment at work to taking deliberate action to protect their wellbeing. For Cassandra, limiting the amount of work that can be completed just before and during her holidays and , learning to accept' , ' if I am not here nothing will get done, so I put in my balances. To further support staff self-care, it was suggested by Bill, who is currently a manager at his university , that providing staff with the tools to become more resilient in Higher Education and to be able to respond to the changes impacting the sector should be a priority, suggesting that organisations with a focus on their people and their wellbeing can overcome the changes facing HE. Lifestyle choices related to the provision of nutritious and healthy food options on campus, to promote physical health and thereby the wellbeing of staff, access to gym facilities on campus or nearby provided at reduced cost or free to staff was also mentioned .

The theme of conversations and metrics of wellbeing included requests for more regular check-in sessions organised by managers for staff to discuss their wellbeing needs, the completion of a wellbeing index( to gauge and rate wellbeing levels), at regular points, that would be a focus for discussion with their line manager. The data and metrics from the wellbeing index, should be given equal priority to the metrics related to national Student Surveys (NSS) and the REF, instead of “ suddenly everything else flies out of the window.’ To prevent this from happening, two staff explicitly talked about universities devising and adopting a staff wellbeing charter, that promotes a clear sense and value of its people , supported by the resources they need to take choices and be in control and ‘work collectively” for their wellbeing and a common good.’ Finally, ‘Outsider from within’ there are issues related to institutions looking at the processes, actions and behaviours that result in staff experiencing being on the outside and leaders are seen as critical in supporting BAME staff to be empowered and valued for their contributions but should recognise that black staff are working in oppressive structures. Sarah, shared her experiences of delivering anti-oppressive practices with a colleague to staff and having run a few sessions had recalled thinking, ‘we are actually working in quite subtly oppressive ways for staff who are working in quite oppressive structures.’, therefore, any initiatives to address the experiences of BAME staff should reflect on the dichotomy of expecting people to be honest and open in an organisation that isn’t.” Despite these challenges, it is important that institutions devise solutions with the people most affected and consequently should be prepared to feel uncomfortable ‘because without discomfort you don’t get innovation(Jayne).”For Sarah, Higher Education must avoid becoming, a safe, very riskless, and individualised organisation that promotes the status quo and perhaps more worryingly where everyone looks the same and where BAME staff experience working in higher education continues to be an “uncomfortable space” to be in.

As a black academic working in Higher Education, the experiences related to the outsider within were difficult to hear, as they resonated with my own experiences of working in higher education, while at the same time, the similarity of our experiences made me more determined to complete my research about staff wellbeing in higher education and it is my expressed hope that our shared experiences encourage institutions to ask staff about what can be done to make working in Higher Education a less ‘uncomfortable space’ to exist, grow and more importantly remain.

On a concluding note, the education sector is considered to be the best place to work from the interviewee accounts, but it is not without periods of struggle, battles, and challenges. Within this environment existed opportunities for growth and a sense of community created and shaped by staff.

#### **4.9 Summary of the Chapter**

In this chapter, the accounts from staff illuminated the salient features of wellbeing from the perspectives of staff members in higher education. It appears that across the staff groups there were similarities in their viewpoints, regardless of job role. However, there was a noticeable difference in the accounts from BAME staff where the majority aligned their experiences to the theme of outsider from within. However, overall, it appears that staff have enjoyed positive wellbeing gained from the opportunities available to them, personal development opportunities, support from colleagues, and the ability to make a difference to others and teach the future generation of working professionals. Equally, staff wellbeing is continuously threatened and deprioritised by the organisation’s policies and processes which do not concern themselves with staff wellbeing and ostensibly privilege students over staff members, resulting in a fragile wellbeing that can ebb and flow. Thus, as this chapter has repeatedly illustrated, staff wellbeing is fundamentally

characterised by duality, with staff continuously experiencing both the positive and negative aspects of working in higher education.

To help address the fragility of staff wellbeing there are some areas that require immediate attention. Firstly, the accounts from the staff have reinforced the importance of including them in the design and development of interventions to support their wellbeing. As outlined above, a range of innovative ideas relating to the wellbeing index(tool to measure staff wellbeing), designed by staff presents an opportunity to engage in wellbeing discussions in a creative and collaborative way. Secondly, the theme, “Outsider from within” has again confirmed the need to review the experiences of BAME staff in higher education( Mahony & Weiner, 2020).

Turning to the Staff Wellbeing in Higher Education Framework proposed in chapter 2, the accounts from the staff give support to the presence of two wellbeing dimensions (wellbeing process and wellbeing appraisal). Staff views about their wellbeing experience is important in helping to shape wellbeing support services. Furthermore, the importance of engaging staff in the development of interventions is essential, if staff take up of the services on offer is to improve. There are some worrying trends in the staff accounts, relating to work demands that have negatively impacted on their home life, their ability to undertake physical exercise, and on occasions their ability to prioritise their health (Fetherston et al., 2020; Dryer et al, 2010).

## Chapter 5. Staff Wellbeing Survey (Phase 2)

### 5.1 Overview

This study investigated the relationships between staff wellbeing, experiences in the HE context, organisational culture, the characteristics of wellbeing, wellbeing policies, services to support staff wellbeing, responsibility for wellbeing, and the future of staff wellbeing in higher education. The factors considered have principally been developed from the literature review (Chapter 2) and qualitative interviews (Chapter 4). The hypotheses of this study and the approach used to determine the sample size, participants, data quality, responses to missing data, and finally data analysis will be discussed. The findings of this study are further summarised at the end of the chapter.

### 5.2 Hypotheses of the study

The hypotheses of this study, are explained and reference to the semi-structured themes/literature that each of the expectation stems from is outlined below as follows:

Question: What factors influence staff wellbeing in higher education?

- **H1** Current and Future wellbeing experiences of men and women will differ in Higher Education.

It is expected that there will be a difference in the wellbeing experiences of men and women in Higher Education. This hypothesis is derived from the interview themes of Fragility of wellbeing and the Duality of wellbeing (See Chapter 4).

- **H2** Current staff wellbeing experiences are positively related to future staff wellbeing.

It is expected that negative views of staff in relation to their current wellbeing, workload demand and stress, and their opportunities for development will take a toll on their anticipated future wellbeing. This hypothesis is derived from the interview themes of Dimensions(Characteristics) of wellbeing and Duality of wellbeing ( See Chapter 4).

- **H3** Anticipated future staff wellbeing is positively related to university commitment and communication about staff wellbeing in the organisation.

It is expected that if staff experience/perceive positive management commitment to their wellbeing and that university communication about their wellbeing is positive, this will positively increase their experiences of wellbeing and increase anticipated future staff wellbeing. This hypothesis is deriving from the interview theme of Organisational Care and Support and Fragility (See Chapter 4).

- **H4** The existence of a wellbeing culture in the university is positively related to future wellbeing.

A culture of staff wellbeing is the degree to which the organisation promotes staff wellbeing. This includes behaviours like an interest and commitment to staff wellbeing and relates to a shared vision about the strategic direction for staff wellbeing. It is expected that the lack of wellbeing culture will reduce future staff wellbeing. This hypothesis is derived from the interview theme of Fragility (See Chapter 4)

- **H5** Positive staff experiences of the interventions to support their wellbeing are positively related to future wellbeing, and vice versa.

It is expected that where staff have used university services to support their wellbeing, they will report improved staff wellbeing levels. This hypothesis is derived from the interview theme of Care and Concern (See Chapter 4).

- **H6** Current staff wellbeing is negatively related to workload demand and stress.

It is expected that high work demands, and stress will show a negative effect on current staff wellbeing. This hypothesis is derived from the semi-structured interview theme of Duality( See Chapter 4).

- **H7** University responsibility for staff wellbeing is positively related to current wellbeing.

University responsibility is used in the widest sense to denote the extent to which the university takes an active role in listening to staff and responding to concerns about their wellbeing at work. This hypothesis is derived from the semi-structured theme of Care and Concern (See Chapter 4).

- **H8** Staff experiences of wellbeing policies are positively related to their future wellbeing.

Wellbeing policies outline university responses to support staff wellbeing. We expect a lack of awareness and involvement in staff wellbeing policies to worsen anticipated future staff wellbeing. This hypothesis is derived from the semi-structured interview themes of Care and Concern & Fragility (See Chapter 4).

- **H9** Creativity and opportunities for learning is positively related to future wellbeing.

It appears intuitive to suggest that staff who experience high levels of creativity at work and opportunities for learning and development will exhibit higher levels of current wellbeing. This hypothesis is derived from the semi-structured interview theme of Creativity and Growth & Dimension of Wellbeing(See Chapter 4).

- **H10** Belonging, feeling valued, security and trust are positively related to current and future wellbeing.

It is expected that feeling valued, having a sense of belonging, security and trust will increase current wellbeing levels. This hypothesis is derived from the Semi-structured interview theme of Dimensions of Wellbeing and Support Systems (See Chapter 4).

- **H11** Job roles is negatively related to anticipated future wellbeing

It is expected that senior lecturer/lecturer roles will show a negative effect on anticipated future wellbeing. This hypothesis is derived from the literature on staff wellbeing (see Chapter 2b) and accounts from the semi-structured interviews.

## **5.3 Methodology**

### ***5.3.1 Participants***

A link to the survey was disseminated to delegates who attended a Staff Wellbeing in Higher Education conference, organised at London Metropolitan University in 2018. The delegates had previously given permission to be contacted about a survey and agreed to contribute to a follow-up conference on staff wellbeing. Respondents worked in UK universities and held a variety of roles, such as professional support staff, senior



lecturer/lecturers, manager, professor, or researcher. The link was also circulated to staff currently working within the researcher's University (at the time of the survey) and was circulated via social media platforms such as Twitter to encourage staff working in higher education to contribute to the survey. Following interest from the Higher Education Policy Institute (HEPI) in the Staff Wellbeing Conference held in 2018, information about the survey was featured on their website to promote wider dissemination of the survey (further details can be found at <https://www.hepi.ac.uk/2018/06/15/staff-wellbeing-universities/>).

### ***5.3.2 Sample Size***

This study utilised population sampling to determine the sample size. The population (i.e., the total number of staff working in HEIs in the UK). According to HESA, the total staff population was 439,955 in 2018/19. Based on the above staff level, it was calculated that my sample size is 384, and the calculated margin of error is 8.27%. When using this approach to determine sample size, the confidence interval was identified as 95%, which suggested 95% accuracy in estimating the total population of the sample. The margin of error was higher than is expected. However, a total of 442 (completed/partial) survey responses were received, which is high. It is acknowledged that from the 442 surveys, the results from 299 respondents were included in the analysis due to the survey not been completed in full.

### ***5.3.3 Data collection***

Online surveys can be disseminated to a broader geographical reach (Bryman & Bell, 2007). The ease with which the survey can be sent to respondents is beneficial to the researcher (Sheehan & McMillian, 1999, Kent & Lee, 1999) and offers equal convenience for the respondent, as taking part in online surveys is significantly easier than having to

return a postal survey (Mullarkey, 2004). Before finalising the survey, advice and feedback was obtained from the researcher's PhD supervisory team and incorporated into the final survey. The online survey was designed with the Qualtrics XM software, which can assist with the collection of data. Online survey data was collected from October to December 2018, and the data collection was suspended on 17 December 2018.

A convenience sampling method was undertaken to recruit staff that had previously attended the staff wellbeing conference and were known to existing networks (e.g., Higher Education Academy (now Advanced HE), as outlined above.

#### ***5.3.4 Instrument design***

As mentioned above, the survey was informed by the phase 1 study (semi-structured interviews, chapter 4) and the literature review (chapter 2). The survey consisted of eight parts. The survey began by asking the participants about their demographic information (such as gender, age, and ethnicity, a total of 10 questions). The second part of the survey focused on the experiences of staff working in universities (this included issues such as workload, opportunities for development, trust, and relationships with colleagues and line managers), consisting of 27 items. The third part was concerned with university culture (strategic direction and responses from the University and Senior Managers/Managers) and included 12 items. The fourth part consisted of 18 items concerning the characteristics (these are: a sense of being valued, respect, job security, and making a difference to the profession) of wellbeing. The fifth part was concerned with university policies on staff wellbeing (awareness of the policy and staff involvement in the development of the policy) and consisted of nine items. The sixth part focused on services to support staff (including the availability of services, mentoring, and take-up of services available to promote wellbeing), and consisted of 12 items. The seventh part included seven items

and focused on who should be responsible (staff or managers) for staff wellbeing. The final part was about future wellbeing and consisted of three items.

**Table 8. Outline of survey items related to each part in the survey**

Part	Content	Items	Example item
2	Experiences in HE context	27	I am not worried about my current wellbeing at work
3	Culture of University	12	There is a culture of supporting staff wellbeing
4	Characteristics of Wellbeing	18	Feeling valued at work by managers
5	Staff Wellbeing Policies	9	I am aware of the university policy on staff wellbeing
6	Services to support staff	12	The services provided are effective
7	Responsibility	7	I feel managers do not understand their responsibility to support my wellbeing
8	Future wellbeing	3	I am optimistic about the future of staff wellbeing in universities

The survey after the demographics section consisted of 88 items in total. Respondents were presented with a range of statements and asked to rate their agreement or disagreement with each statement on a five-point Likert-scale. The scale included the ratings: strongly agree , agree , neither; disagree , and strongly disagree . In this survey, recoding of the raw data into a coding scheme of 1 for strongly disagree to strongly agree as 5 was completed.

A correlation was performed to detect and validate which survey items are inverted (have a negative form) when compared to the other items. Where negative items were identified and agreed with by the researcher, these were transformed/ reversed, and a new label provided (e.g., T14-18R).

The respondents were also provided with the opportunity to give their feedback on two open-ended questions within the survey. Question 22 was about what staff perceived to be important regarding the future of their wellbeing. Question 17 asked the respondent to consider what is important for staff wellbeing at work. Content analysis is used to determine the presence of certain words, themes or concepts and is useful for looking at the proportions of similar sentiments (Sabharwal et al., 2018). There are two types of content analysis, including relational and conceptual. The content analysis employed was conceptual, this requires the researcher to identify concepts /constructs for examination. The constructs chosen were informed by the literature review Chapter 2(a) and (b). A coding scheme was used to analyse the data ( See appendix O and P) and inferences made about the key messages contained within the texts.

#### **5.4 Validity and Reliability**

Since the measures were independently created from the interviews, validity, and reliability of the items within each part of the survey will be evaluated. For validity, a factor analysis will determine the relationships and number of dimensions present in each part. For reliability, a Cronbach's alpha test will confirm the internal consistency of the items for each dimension.

SPSS was used (version 26, IBM) to undertake statistical analysis. Initially, this study undertook tests to ensure that the assumption of normality of data was not violated (normality and homoscedasticity tests) intended to use linear and multiple regression analysis, statistical techniques used to understand the contribution of independent variables (ID) when predicting the Dependent Variable (DV: Future Wellbeing) (Tabachnick & Fidell, 2013). Similarly, correlations will need to be considered in the interpretation to establish relationships among the variables.

As some of the data was not normally distributed, parametric tests such as T-tests and an ANOVA were not used to investigate wellbeing experiences between groups. The following non-parametric test was used instead: Mann-Whitney U tests for comparisons and Spearman Correlations to determine the strength of association between the themes/constructs and the various dimensions. However, my decision to perform a multiple regression on the data has been informed by the research of Li et al( 2012) about assumptions of normality for linear regression analysis. His paper suggests that whilst normality is usually verified by looking at the dependent variable, from a statistical standpoint it is more accurate to verify that the errors of a linear regression model are normally distributed, to determine if the assumption of normality is met.

For the open-ended questions, a content analysis was undertaken of the responses to both questions and will be considered later in the findings section.

#### ***5.4.1 Assumptions for statistical testing***

To determine the relationships between variables and to understand the correlation between variables, a linear and multiple regression analysis was considered to identify the predictors of future wellbeing. The regression model attempts to identify the best line of fit available from the data collected by exploring the value of each regression coefficient(s) that reduces the overall error of the model. The assumptions for regressions are that:

1. The level of homoscedasticity indicates that the variance of the residuals is constant.
2. The values of the residuals (or the amount of the error in the model) are normally distributed (normality).

3. The presence of influential cases (significant outliers) can result in the overall data becoming less representative.
4. The correct number of participants should be met. According to Tabachnick and Fidell (2007), to determine sample size,  $N > 50 + 8M$ . M signifies the total number of explanatory variables considered within a multiple regression.

To do so, relevant tests were carried out for the multiple regression and are reported on in section 5.6 (Multiple Regression).

### **5.5 Ethical Issues**

Ethical approval for an online survey was granted by Nottingham Trent University in September 2018. Consent was gained from respondents by requesting that they click on the continue button if they consented to the terms. All respondents were asked to create a unique identifier and input it into the survey to keep their demographic details and responses anonymous. The respondent was advised that, if they did not wish to participate in the survey, they could leave the study by closing the window in their browser and told that their data would not be stored. Informed consent was gained from all respondents, as they were required to give consent before undertaking the survey. All respondents were advised of their right to withdraw from the study at any point. The data was stored on my hard drive and was password-protected and encrypted.

## **5.6 Processing and initial data considerations**

### ***5.6.1 Missing data***

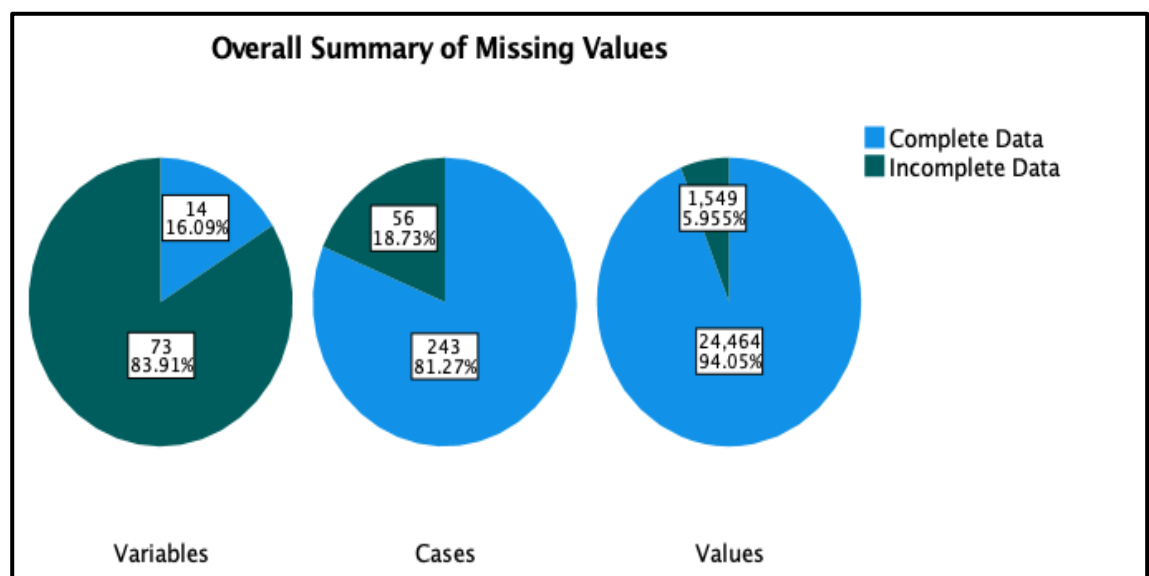
The data was cleansed by deleting responses where only the Unique ID was provided and no descriptive statistics, and if the case had given no responses to items within at least one variable these cases were deleted.

Researchers are required to identify and address potential areas of data reliability issues (Onwuegbuzie, 2000). In this study, the biggest quality issue came from missing data. Social Science research can be susceptible to missing data (Horton & Kienman, 2007; Greene, 2008: 61-62), and so patterns of missing data and reasons for this occurrence should be explored. Missing data falls broadly into three categories: 'Data Unavailable', 'The Data Missing is Not at Random', and 'The Data is Missing at Random'. 'Data Unavailable', which is normally called 'Missing Completely at Random' (MCAR), is data that is unavailable and incomplete, and generally occurs because the respondent has not provided the data. Most importantly, the pattern observed in the missing data is random. 'The Data Missing is Not at Random', otherwise known as 'Missing Not at Random' (NMAR), occurs when the data is systematically related to the phenomenon being considered and requires further exploration. Finally, 'Missing at Random' suggests that the missing data is predictable based on other variables in the data set.

Guidance on how much missing data can be tolerated is unclear. Tabachnick and Fidell (2014, p. 97) have reported that 'unfortunately, there are yet no firm guidelines for how much missing data can be tolerated for a sample of a given size'. The methods to deal with missing data are varied, one such example being complete deletion, often referred to as Listwise deletion. In this case, analysis is only undertaken on a fully complete data set (Allison, 2002). When applying Listwise deletion, it is necessary to determine if data

is missing completely at random (MCAR) to ensure that the estimates for listwise deletion are unbiased (Horton & Kleinman, 2007). An alternative approach to Listwise deletion is to consider pair-wise deletion, which maximises the data available for analysis and can only be applied if the data is missing completely at random. Another approach for addressing missing data is using unconditional means imputation, which is a method of replacing the missing values with the overall estimated mean of a variable. This has the obvious advantage of not having to guess the value of the missing data. A consequence of this method is that it can change the magnitude of the correlation between the imputed variable and the other variables. Before dealing with missing data, it is important to understand the nature of the missing as this has a direct impact on the statistical techniques that can be used to deal with the missing data and in the analysis of the data.

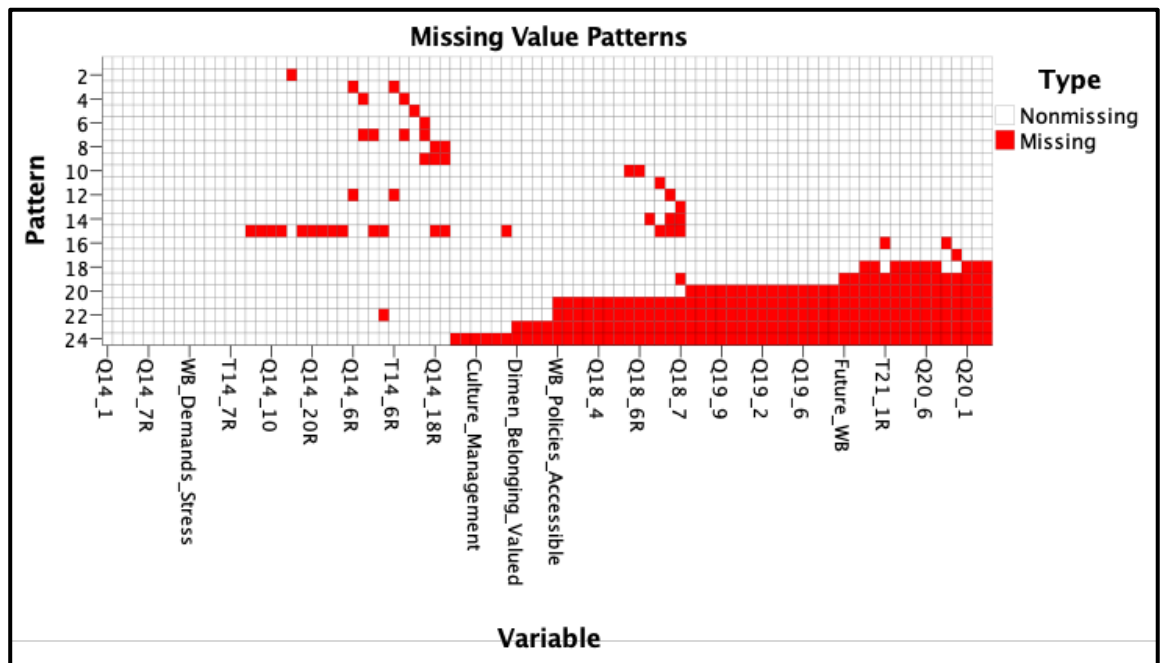
In this study, a test for MCAR (Little's MCAR test) was undertaken, the following result was observed Chi square=1723.874, DF=3695, Sig=1.000. A non-significant score was observed, suggesting that the data was missing completely at random.



**Figure 3. Overall summary of missing data**



On closer examination of the output for missing data in SPSS it is evident that 83.91% of the 73 variables had missing data. In terms of cases, that had missing data, 56 (18.73%) respondents had missing data. Overall, the missing data from the respondents was 5.955% (1,549) missing values. It is also commonplace to analyse the pattern of missing data and on closer examination of the missing data it can be seen to be non-monotone and arbitrary (see Figure 4)



**Figure 4. Pattern of missingness**

The reasons for the non-completion of these variables require further consideration. As Field (2018, p. 940), comments: ‘It is important to stress that no statistical procedure can overcome data that are missing. Good methods, design and research execution should be utilized to minimize missing values, and reasons for missing values should always be explored.’ On closer examination of the data, the most frequent missing data related to items within specific sections of the survey, Part 4 (Policy on wellbeing. Sample size of missing data = 172), Part 5 (University services available for staff. Sample size of missing data = 175), Part 6 (Responsibility for staff wellbeing. Sample size of missing data = 179),

Part 7 (Future wellbeing. Sample size of missing data = 179) which may imply that the length of the survey and the number of items within the survey impacted on the respondents completing the survey fully.

In response to the missing data, imputation was undertaken utilising Expectation Maximization technique available in SPSS. Expectation Maximization technique is applicable only if the data is missing at random. Expectation maximization technique is beneficial for dealing with missing data as it increases the power of the results, due to the fact the analysis is based on a complete data set.

From the total of 442 online survey responses, respondents that had completed the demographics and included complete responses in at least one of the variables were included in the analysis.

### ***5.6.2 Validity Analysis***

Construct validity was established using a Exploratory Factor Analysis (EFA) and Principal Component Analysis (PCA) with Varimax rotation for each of the assigned sections to identify relevant dimensions within them. Initially, a Kaiser Meyer-Olkin (KMO) and Bartlett's test of sphericity were calculated, with the latter significant for all seven variables (e.g.,  $X^2 = 18640.340$ ;  $df = 3828$ ,  $P < 0.001$ ). The KMO measures highlighted (0.898) that the sample size of the data was appropriate for Factor Analysis. Furthermore, seven factors could explain more than half of the variance (51%). Items related to each component were above 0.4.

For further scrutiny, these variables have been divided into between 1 and 3 dimensions each, aligning with the outcomes of the interviews. To ensure items were appropriately assigned, EFA were conducted for each. A KMO test was undertaken for each of the

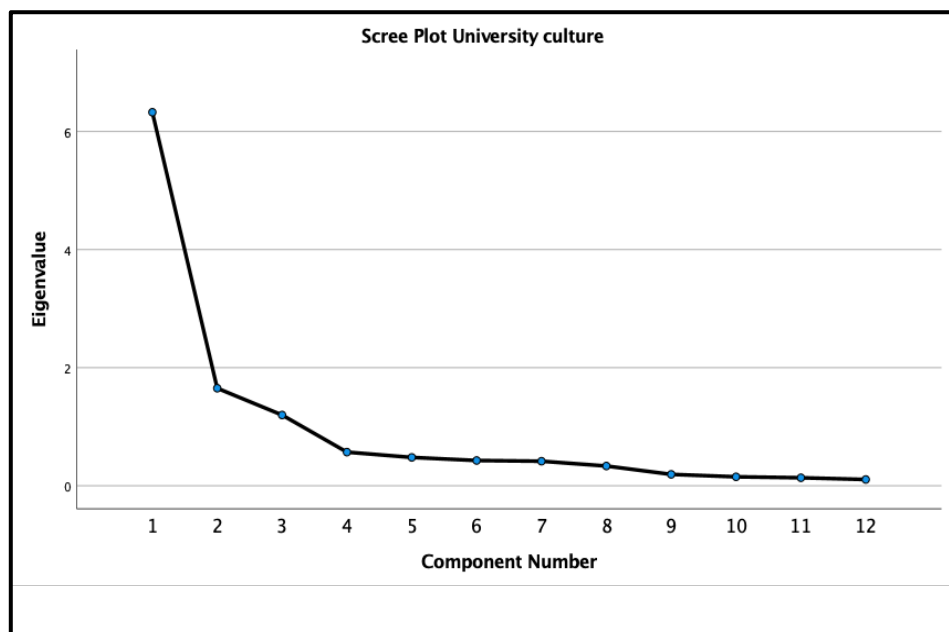
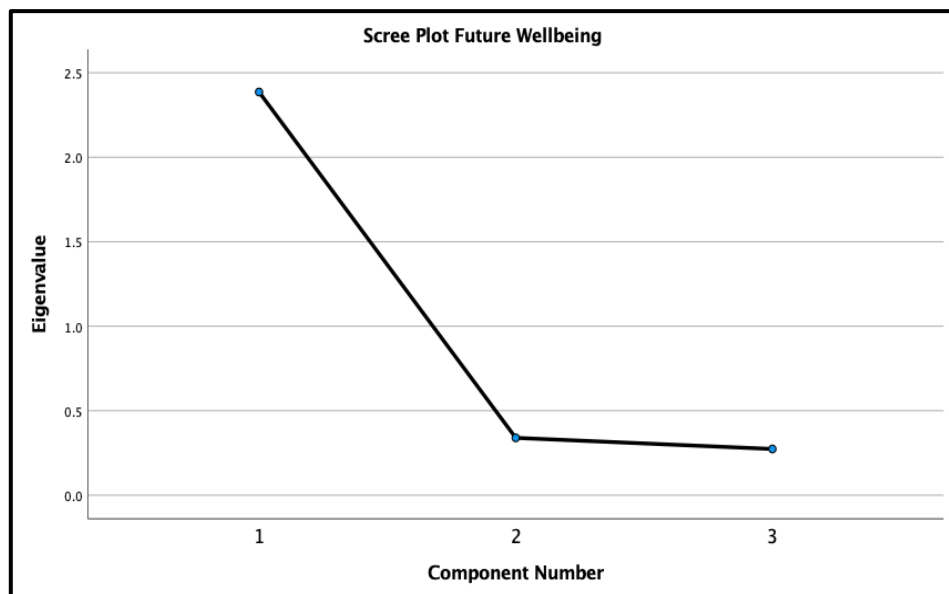
variables and the extraction value for each of the dimensions was above 0.4 (factor loadings) in each test, therefore meeting the condition for a factor analysis. Table 9 displays the KMO and Bartlett's scores for each analysis, the number of suggested factors/dimensions, the number of dimensions used in the analysis, and the variance explained by the number of dimensions used. Items within each dimension had a component value above 0.5 for that given factor/dimension.

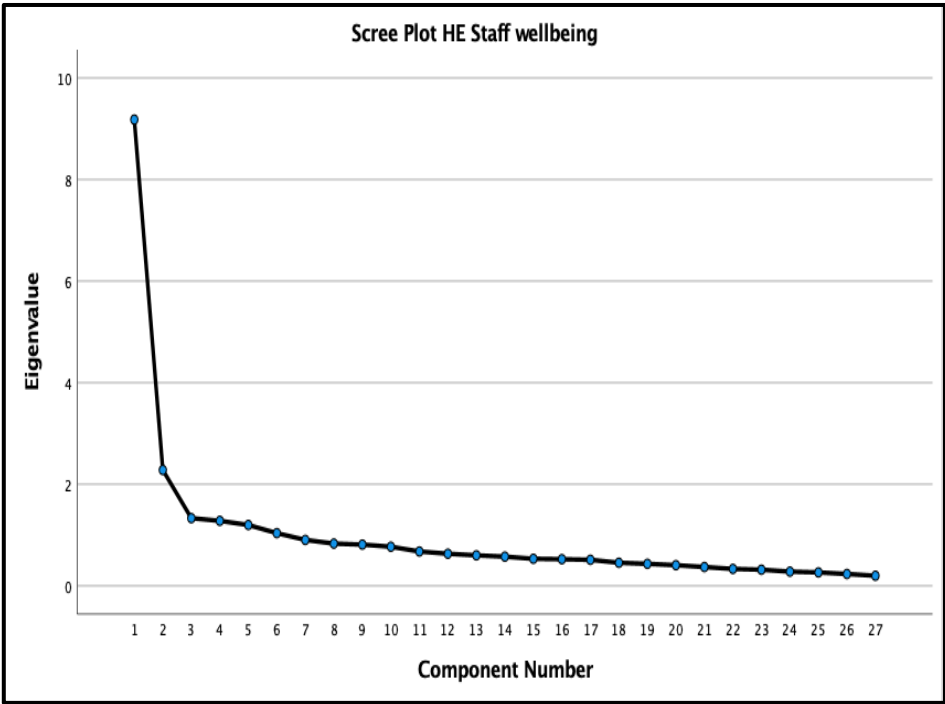
**Table 9. Validity Analysis using Factor Analysis(KMO, Bartlett's test, Proposed factors, Dimensions used and variance)**

Variable Name	KMO test	Bartlett's test score	Proposed factors	Total Dimension	Variance (%)
<b>HE Wellbeing</b>	.898	18640.34;df=3828;p<0.001	3	Component 1 Component 2 Component3	34.007 4.938 8.452
<b>University Culture</b>	.902	2734.555;df=66;p<0.001	3	Component 3 Component 2 Component 1	9.993 13.770 52.772
<b>Dimensions of wellbeing</b>	.931	3638.70;df=153;p<0.001	3	Component 1 Component 2 Component 3	51.308 6.096 7.964
<b>University policies</b>	.831	795.079;df=36; p<0.001	1	One construct explained the majority of the variance.	n/a
<b>Services to support wellbeing</b>	.826	1357.728;df=66; p<0.001	3	Component 1 Component 2	39.884 10.305
<b>Responsibility for wellbeing</b>	.688	566.142;df=21; p<0.001	2	Component 1 Component 2	36.722 23.947
<b>Future Wellbeing</b>	.737	445.663;df=3; p<0.001	1	As this only contained 3 items it was decided to keep as one construct.	n/a

Figure 5 provides a sample of the scree plots related to the proposed dimensions for Future wellbeing, University culture, Dimensions of wellbeing; Higher Education (HE) staff wellbeing.

Figure 5: Panelling of Scree plots related to Future Wellbeing, university culture, Dimensions of wellbeing; Higher Education staff wellbeing





**Figure 5. Panelling of scree plots**

**Table 10. Final Variables and Dimensions**

Themes/Dimensions	Description	Items (R = reversed)	Cronbach alpha	Variance %	mean
<b>Q14 HE Wellbeing</b>					
<b>Current wellbeing Component 1</b>	Staff views about their current wellbeing	14.1, 14.3, 14.9, 14.26, T14-11RT14-15R, T14-18R, T14-20R, T14-4R, 14-5,14-10, 14-27	.890	34.007	2.818
<b>Workload Demand &amp; Stress Component 2</b>	Level/impact of work demands on staff wellbeing	14-14,14:25,T14:6R,T14-7R, T14-8R,T14-12R	.804	4.938	2.139
<b>Staff and Management Support- Component 3</b>	The influence colleagues and management have on supporting high levels of wellbeing in universities	14-2,14-13,14-19,14-21,14-16,14-23,14-24,T14.22	.754	8.452	2.523
<b>Q15 University Culture</b>					
<b>A wellbeing culture Component 3</b>	A wellbeing culture exists in the university.	15.1,15.2,15.3,15.5	.931	9.993	2.392
<b>Management interested and committed to wellbeing Component 2</b>	Management is interested and committed to supporting staff wellbeing.	15.4,15.6,15.7	.802	13.770	2.889
<b>Communication about wellbeing Component 1</b>	Communication about staff wellbeing is supportive and does not blame others	T15-9R,T15-10R,15-11,15-12,15-8	.725	52.772	2.578

Themes/Dimensions	Description	Items (R = reversed)	Cronbach alpha	Variance %	mean
<b>Q16 Dimensions (Characteristics)of Staff Wellbeing</b>					
<b>Belonging and feeling valued Component 1</b>	A feeling of belonging and being valued enhances staff wellbeing.	16-1,16-2, 16-3, 16-7, 16-8,16-14,16-15	.888	51.308	4.222
<b>Security and Trust Component 3</b>	Having security at work and trust at work increases level of staff wellbeing.	16-4,16-5,16-9,16-10,16-17	.751	6.096	4.223
<b>Creativity and Learning Component 2</b>	Opportunities to develop, be creative and make a difference at work improves wellbeing.	16-6,16-11,16-12,16-13,16-16,16-18	.888	7.964	4.199
<b>Q17 Open ended question</b>	What do you think is important for your wellbeing at work?	Content analysis	n/a		
<b>Q18 University Policies</b>					
<b>Wellbeing policies promote involvement and is accessible Component 1</b>	The university policy on staff wellbeing is accessible and encourages staff to be involved in policy development.	18-4,18-9	.633	41.671	2.676
<b>Staff Understanding of the wellbeing policy Component 2</b>	An awareness and of the staff wellbeing policy.	18-1,18-2,18-3,18-5,18-7,18-8, T18-6R	.697	13.096	2.557
		As the Cronbach Alpha is lower than 0.7 for each dimension, it was decided to treat as one construct which improved the alpha rating.	.789	n/a	2.632



Themes/Dimensions	Description	Items (R = reversed)	Cronbach alpha	Variance %	mean
<b>Q19 Services to support wellbeing</b>					
<b>Types of services and support available is accessible Component 1</b>	Staff are aware of the services available to support wellbeing	19-8,19-9,19-10,19-12,19-11, 19-6, 19-7	.760	39.884	2.891
<b>Used wellbeing services available Component 2</b>	Staff use services to support their wellbeing and they are seen as effective	19-2,19-3,19-4,19-5,19.1	.761	10.305	2.661
<b>Q20 Responsibility for Wellbeing</b>					
<b>My responsibility for wellbeing Component 1</b>	Staff should have a role in supporting their own wellbeing and their colleagues	20-2,20-3,20-4,20-5	.757	36.722	3.407
<b>University responsibility for wellbeing Component 2</b>	Managers have a key role in promoting the wellbeing of staff in higher education	20-6,20-7 (Item 20.1 was removed to improve reliability scores)	.728	23.947	3.788
<b>Q21 Future Wellbeing</b>					
<b>Future Wellbeing</b>	Staff view on their anticipated future wellbeing working in higher education.		.868	79.545	2.205
<b>Q22 Open ended question</b>	Provide any additional comments about the future of wellbeing	Content analysis	n/a		

### ***5.6.2.1 Reliability Analysis***

The internal reliability of the survey scale implies that each item within the scale has a common score and measures the same concept (Netemeyer et al., 2003). I tested for internal consistency of the scales by examining the coefficient alphas (Cronbach, 1951). The coefficient alphas seek to establish the interrelatedness of the survey items created to quantify a construct (Netemeyer et al., 2003) and to determine if people are answering in a consistent manner. The Cronbach's Alpha for each dimension were above 0.7 for that given factor/dimension (except two dimensions/themes) and met the requirement for reliability. The Cronbach's Alpha score for reach construct and corresponding items are outlined in table 10 above.

### ***Normality, Outliers and Skewness/Kurtosis***

Normal distribution means that a researcher's observed data aligns with the theoretical normal distribution of data (Pallant, 2005). It is necessary to determine normality of data distribution before determining the statistical techniques that can be undertaken. Normal distribution is achieved when the mean is symmetrical, the distribution of data is bell-shaped, and the tails meet the x-axis at infinity (Dancey & Reidy, 2011:73). Univariate normality was determined through the inspection of the skewness and kurtosis statistics and indicated that the data was not normally distributed. Two tests for normality (Kolmogorov-Smirnov and Shapiro-Wilk)(Shapiro & Wilk, 1965; Razali & Wah, 2011) were performed, and an inspection of skewness and kurtosis measures (Cramer & Howitt, 2004) and a visual inspection of their histograms, normal q-q plots and box plots showed that the data was not normally distributed. The normality tests for the dependent variable, Future Wellbeing, highlighted that the score was significant (See Table 11 Dependent variable test for normality), thus indicating the data is not normally distributed.

**Table 11. Dependent variable test of normality**

Tests of Normality					
Kolmogorov-Smirnova			Shapiro-Wilk		
Statistic	df	Sig.	Statistic	df	Sig.
Future_					
WB	.154	299 <.001	.911	299	<.001

Prior to applying statistical techniques, it is important to identify if any outliers exist within the data, as these can adversely impact the statistical techniques involving the calculation of means (Dancey & Reidy, 2011). Outliers within the data were extreme scores by respondents in the sample and fell outside of the higher and lower range of most of the scores. Descriptive statistics obtained through SPSS, which observe the data through histograms and box plots, can identify univariate outliers. According to Hair and colleagues (1998), where the sample size is equal to or less than 80, cases with a score of 2.58 or more are outliers. If the sample is above 80, standard scores greater than 3.26 and less than -3.26 are considered outliers. Based on the sample size,  $SD+3.26$  was used to identify outliers within the data. Outliers were observed in the data.

A method for identifying multivariate outliers is called Mahalanobis distance (Mahalanobis, 1936). The purpose of this test is to calculate the distance of a score from the midpoint of the remaining scores. The alpha level of 0.05 of statistical significance determined in SPSS was used when undertaking a regression procedure on the independent variables. According to this test, outliers were identified. Outliers were retained in the data.

### *Multicollinearity and homoscedasticity*

Where there is a relationship between two or more independent variables, this is known as Multicollinearity. The presence of Multicollinearity causes the effect of each independent variable to be difficult to determine (Hair et al., 2006). The presence of Multicollinearity can be recognised by using SPSS (26) to check the variation inflation (VIF). From this test, no VIF exceeded the threshold value of greater than 10. The results indicated that the data did not show multicollinearity issues.

Homoscedasticity is determined by the level of homogeneity of variance. To establish the level of homoscedasticity, a non-parametric Levene's test (Levene, 1960; SPSS, 26 version) was undertaken to verify the equality of variance in the sample of homogeneity of variance). The P-value for the dependent variable future wellbeing was ( 0.535), and is above 0.05, therefore we keep the null hypothesis and assume equality of variance.

## **Chapter 5a. Staff Wellbeing Survey Findings (Phase 2)**

### **5.1 Overview**

The chapter presents the findings from the Phase 2 study (Survey) about staff experiences working in higher education. The hypotheses of the study are listed below:

**H1** Current and Future wellbeing experiences of men and women will differ in Higher Education.

**H2** Current staff wellbeing experiences are positively related to future staff wellbeing.

**H3** Anticipated future staff wellbeing is positively related to university commitment and communication about staff wellbeing in the organisation

**H4** The existence of a wellbeing culture in the university is positively related to future wellbeing.

**H5** Positive staff experiences of the interventions to support their wellbeing are positively related to future wellbeing, and vice versa.

**H6** Current staff wellbeing is negatively related to workload demand and stress.

**H7** University responsibility for staff wellbeing is positively related to current wellbeing.

**H8** Staff experiences of wellbeing policies are positively related their future wellbeing.

**H9** Creativity and opportunities for learning is positively related to future wellbeing.

**H10** Belonging, feeling valued, security and trust are positively related to current and future wellbeing.

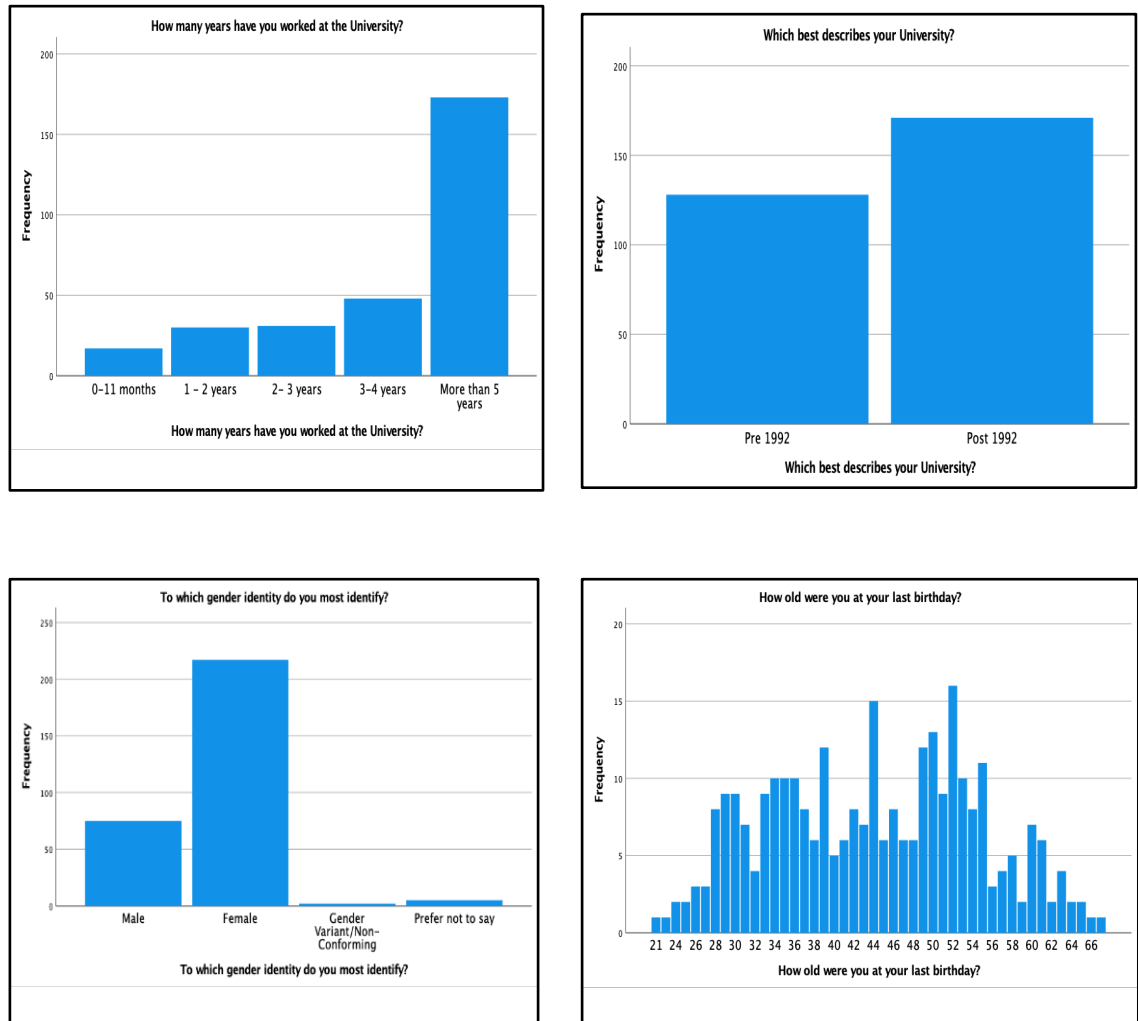
## **H11** Job roles is negatively related to anticipated future wellbeing

In this chapter, I present demographic information about the respondents, variables, and corresponding dimensions, then move on to report the findings of the hypothesis testing by using a Spearman's correlation before reporting on additional tests such as the Mann-Whitney Test and Kruskal-Wallis test. As reported earlier, the data for the dependent variable was not normally distributed, therefore did not meet one of the conditions for a linear and multiple regression analysis. However, some researchers have highlighted that multiple regression is a robust technique if there is variance in the sample, regardless of normality (Li et al, 2012). As a result, a multiple regression will be used. However, to support this, more conservative non-parametric correlations will be used to establish the existence of any relationships between independent and the dependent variable. Therefore, the relationships between variables can still be assessed using a Spearman correlation. The chapter includes the outcomes of content analysis of the free text data provided by the respondents to Q17 and Q22. I conclude with an overview of the results, providing commentary on how the findings contribute to the model I developed in the literature review.

### **5.2 Descriptive statistics**

A total of 442 survey responses were recorded, including complete and partial responses. The respondents included in the final analysis totalled 299 and had a mean age of 43.98 (SD=10.56), ranging from 21 to 74 years. The majority of staff (74.2%, N = 222) were permanent employees on a full-time basis (35 hours or more) and 81.6% (N = 244) were White (English/ Welsh/ Scottish/ Northern Irish/ British). Furthermore, 45.8% (N=137) respondents were in support service roles, and the remainder in Senior Management or academic roles. Respondents were predominantly female (72.6%, N=217), without a disability (83.6%, N=250). Most participants had worked in higher education for more

than 5 years (57.9%, N=17) and were based primarily within universities in London (24.7%, N=74) and the Southeast regions (17.4%, N=52). The respondents were distributed across both Pre 1992 (42.8%, N=128) and Post 1992 (57.2%, N=171) Universities.



**Figure 6. Panelling of descriptive charts relating to respondents**

Trends relating to the final variables and the dimensions (See Table 12) were measured on a Likert Scale of 1-5. Scores were greatest for Security & Trust (Mean=4.22; SD=.657), Belonging and Feeling valued (Mean=4.22; SD=.780) and Creativity and Learning (Mean=4.20; SD=.770), meaning that, on average, staff felt these were important facets(characteristics) of staff wellbeing in Higher Education. Similarly,

University responsibility for wellbeing was high (Mean=3.80; SD=1.053), implying that staff believed the University has a role in supporting the wellbeing of staff. The dimensions that scored the lowest were workload demands and stress (Mean= 2.14; SD=.903), implying that the level of workload demands is a source of discontentment for most staff. A low score of Future Wellbeing (Mean=2.20; SD=1.090), suggests that staff are less optimistic about their future wellbeing in higher education. Lower scores were recorded, for the presence of a wellbeing culture (Mean=2.40; SD=1.153), management commitment to staff wellbeing (Mean= 2.55; SD=.997) and communication about wellbeing (Mean=2.58; SD=.882), implying staff are less satisfied, or do not routinely recognise these features as being present within their own organization.

Many of the respondents scored neutrally for several of the items, for example, Types of services and support is accessible (Mean= 3.09; SD= .854). In this instance, this might imply that staff lack awareness or are unsure of the services available to support their wellbeing. It is noticeable that the variable Used wellbeing services available was a low score (Mean=2.70; Sd= .789), which might suggest there is low take up of services to support staff wellbeing See table 12: Descriptive statistics for each variable).

**Table 12. Descriptive statistics for each dimension**

Variable/Dimensions	Mean	Standard Deviation (SD)	Median	Skewness	Kurtosis
Current wellbeing (e.g., part of broader HE Wellbeing)	2.82	.913	2.8182	-.044	-.844
Workload Demands & Stress (e.g., part of HE Wellbeing)	2.14	.903	2.0000	.539	-.692
Staff and Management Support (e.g., part of HE Wellbeing)	2.52	.903	2.5000	.238	-.276
A wellbeing Culture (e.g., part of broader University Culture)	2.40	1.153	2.0000	.420	-.975



Variable/Dimensions	Mean	Standard Deviation (SD)	Median	Skewness	Kurtosis
Management committed to wellbeing (e.g., part of University Culture)	2.55	.997	2.6667	.167	-.627
Communication about wellbeing (e.g., part of University Culture)	2.58	.882	2.6000	.117	-.698
Belonging and feeling valued (e.g., part of broader Dimensions of Staff Wellbeing)	4.22	.780	4.4286	-1.673	3.015
Security and Trust at work (e.g., part of broader Dimensions of Staff Wellbeing)	4.22	.657	4.2885	-1.327	2.855
Creativity and Learning (e.g., part of broader Dimensions of Staff Wellbeing)	4.20	.770	4.3333	-1.612	3.058
University policies	2.63	.702	2.6224	.125	-.182
Types of services and support is accessible (e.g., part of broader Services to support wellbeing)	3.09	.854	3.2000	.009	-.283
Used wellbeing services available (e.g., part of Services to support wellbeing)	2.70	.789	2.6000	.102	.545
My responsibility for wellbeing (e.g., part of broader Responsibility for wellbeing)	3.40	.902	3.5000	-.450	-.128
University responsibility for wellbeing (e.g., part of Responsibility for wellbeing)	3.80	1.053	4.0000	-.524	-.528
Future wellbeing	2.20	1.090	2.0000	.615	-.692

### 5.3 Hypothesis Testing

H1 Current and Future wellbeing experiences of men and women will differ in Higher Education.

***To determine differences in Current staff wellbeing in males and females***

A Mann-Whitney test was performed to investigate the differences in wellbeing experiences between males and females. The results indicated that there are no significant differences in the current wellbeing experiences for males and females i.e., in the dimension of current wellbeing (WB) ( $p=.509$ ), the dimension of WB staff support and management ( $p=.954$ ), and the dimension of WB Work Demand and stress ( $p=.742$ ). Therefore, the hypothesis is rejected.

***To determine differences in staff Future wellbeing in males and females***

A Mann-Whitney test was performed to investigate the differences in anticipated future wellbeing experiences between males and females. The results indicated that there are no significant differences in their anticipated future wellbeing scores for males and females, i.e., in Future wellbeing ( $p=.160$ ). The hypothesis of no difference is supported.

**H2** Current staff wellbeing experiences are positively related to future staff wellbeing.

A Spearman's correlation analysis showed that the Future Wellbeing variable and Current Wellbeing are positively correlated and have a positive strong correlation ( $\rho=0.789$ ;  $p<0.0005$ ). This hypothesis is supported.

**H3** Anticipated future staff wellbeing is positively related to university commitment and communication about staff wellbeing in the organisation

A Spearman's correlation analysis showed that the Future Wellbeing variable, management commitment and communication about staff wellbeing in the organisation ( $\rho=0.641$ ;  $p<0.0005$ ) and culture of communication ( $\rho=0.666$ ;  $p<0.0005$ ) have a strong and positive correlation. This hypothesis is supported.

**H4** The existence of a wellbeing culture in the university is positively related to future wellbeing.

A Spearman's correlation analysis showed that the Future Wellbeing variable and the presence of a wellbeing culture in the university are positively correlated and shows a positive strong correlation ( $\rho=0.679$ ;  $p<0.0005$ ). This hypothesis is supported.

**H5** Positive staff experiences of the interventions to support their wellbeing are positively related to future wellbeing, and vice versa.

Spearman's correlation analyses showed that the Future Wellbeing variable and staff experiences of the intervention are positively correlated and have a positive moderate to strong correlation i.e. Wellbeing service types ( $\rho=0.525$ ;  $p<0.0005$ ) and Wellbeing services- awareness ( $\rho=0.492$ ;  $p<0.0005$ ). This hypothesis is supported.

**H6** Current staff wellbeing is negatively related to workload demand and stress.

A Spearman's correlation analysis showed that Current staff wellbeing, in terms of workload demands, and stress reveal a positive strong correlation ( $\rho=0.502$ ;  $p<0.0005$ ). This hypothesis is supported.

**H7** University responsibility for staff wellbeing is positively related to current wellbeing.

A Spearman's correlation analysis showed that Current wellbeing and University responsibility for staff wellbeing are negatively correlated and have a strong correlation ( $\rho=-0.577$ ;  $p<0.0005$ ). Therefore, the alternative hypothesis is supported.

**H8** Staff experiences of wellbeing policies are positively related their future wellbeing.

A Spearman's correlation analysis showed that Future Wellbeing and staff experiences of wellbeing policies has a moderate to strong, positive correlation ( $\rho=0.471$ ;  $p<0.0005$ ). This hypothesis is supported.

**H9** Creativity and opportunities for learning is positively related to future wellbeing.

A Spearman's correlation analysis showed that creativity and learning opportunities and future wellbeing has a weak and negative correlation ( $\rho=-0.176$ ;  $p<0.0005$ ). Therefore, the alternative hypothesis is supported.

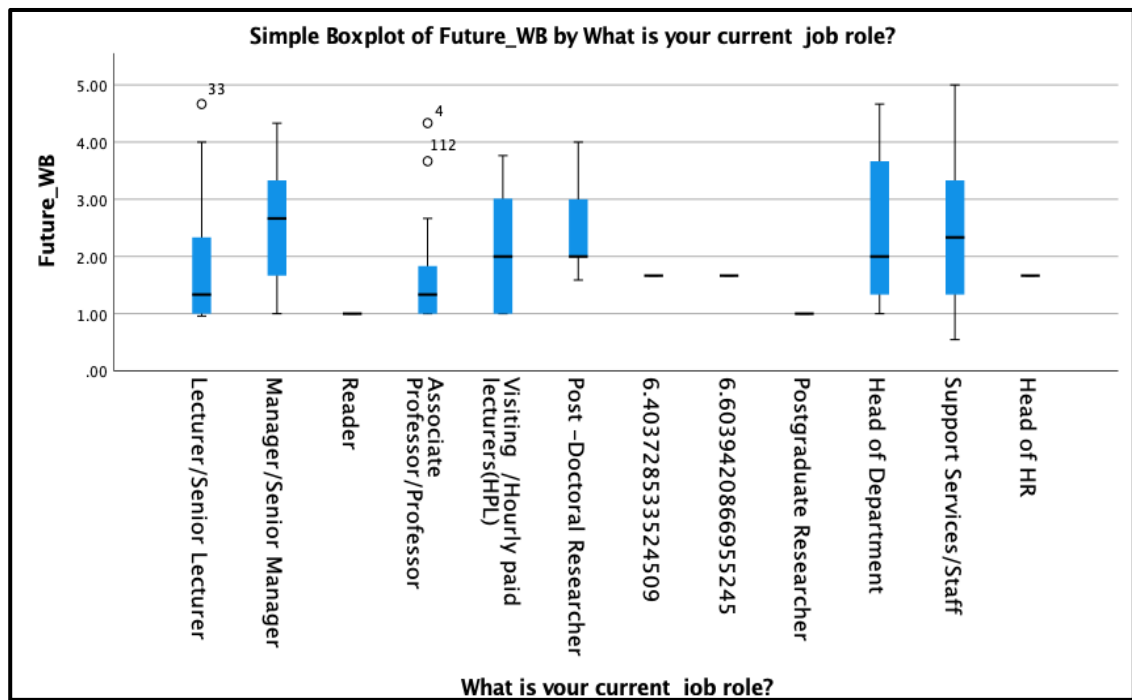
**H10** Belonging, feeling valued, security and trust are positively related to current and future wellbeing.

A Spearman's correlation analysis showed that Future Wellbeing and belonging and valued, security and trust are negatively correlated and have a weak correlation i.e., Belonging and Feeling Valued ( $\rho=-0.072$ ;  $p>0.0005$ ) and Security and Trust ( $\rho=-0.191$ ;  $p>0.0005$ ). The Spearman's correlation analysis showed that Current wellbeing, Belonging and valued, Security and trust are also correlated (Belonging being negative), but shows a weak correlation i.e., Belonging and valued ( $\rho=-0.051$ ;  $p>0.0005$ ) and Security and Trust ( $\rho=0.084$ ;  $p>0.0005$ ). Therefore, the alternative hypothesis is supported.

**H11** Job roles is negatively related to anticipated future wellbeing

A one-way MANOVA was conducted to examine differences in anticipated future wellbeing between job roles. Preliminary checks were performed to assess normality, homogeneity of variance (Leven's Test) and these were satisfied.

A box plot indicated that there were only three mild univariate outliers (See Figure 7)



**Figure 7. Future wellbeing by job role (Boxplot)**

There was an overall significant effect of job role upon the dependent variables (Pilla's Trace=.877,  $F(176,3102)=1.53$ ;  $p<.001$ , partial  $\eta^2= 0.942$ , observed power=1.0). When interrogating these values further, there were significant differences for 13 of the 18 dependent variables with the dimensions of wellbeing (Belonging, Security and Creativity), Policies and University Responsibility having p-values above 0.05 for corrected subsequent tests.

It is important to note that there was a significant effect of job role on future wellbeing in particular, with lecturers (Mean = 1.79; SD = 0.92) and associate professor/ professors (Mean = 1.6; SD = 0.97) having a lower anticipated future wellbeing compared to managers (Mean = 2.5, SD = 0.97) and support staff (Mean = 2.38, SD = 1.14) ( $F = 2.636$ ;  $p=.003$ ).

#### **5.4 Additional Findings**

##### ***To determine the differences in the Dimensions of staff wellbeing across staff working in pre-1992 and post-1992 universities***

Mann-Whitney tests were performed to investigate the differences in the Dimensions of staff wellbeing experiences between pre-1992 universities and post-1992 universities. The results indicated that there are no significant differences in dimensions of wellbeing of pre-1992 and post 1992 universities i.e., in the dimension of belonging ( $p = 0.751$ ); the dimension of security and trust ( $p = 0.253$ ) and the dimension of creative Learning ( $p = 0.835$ ).

##### ***To determine the differences in current staff wellbeing experiences of staff working in pre-1992 and post 1992 universities***

Mann-Whitney tests were performed to investigate the differences in the current staff wellbeing experiences between pre-1992 universities and post-1992 universities. The results indicated that there are no significant differences in the current staff wellbeing experiences of staff working in pre-1992 and post 1992 universities: Current wellbeing ( $p = .789$ ); WB-Workload Demand and Stress ( $p = .328$ ); Staff and management support ( $p = .190$ ).

##### ***To determine differences in staff wellbeing in males and gender variant/non-conforming***

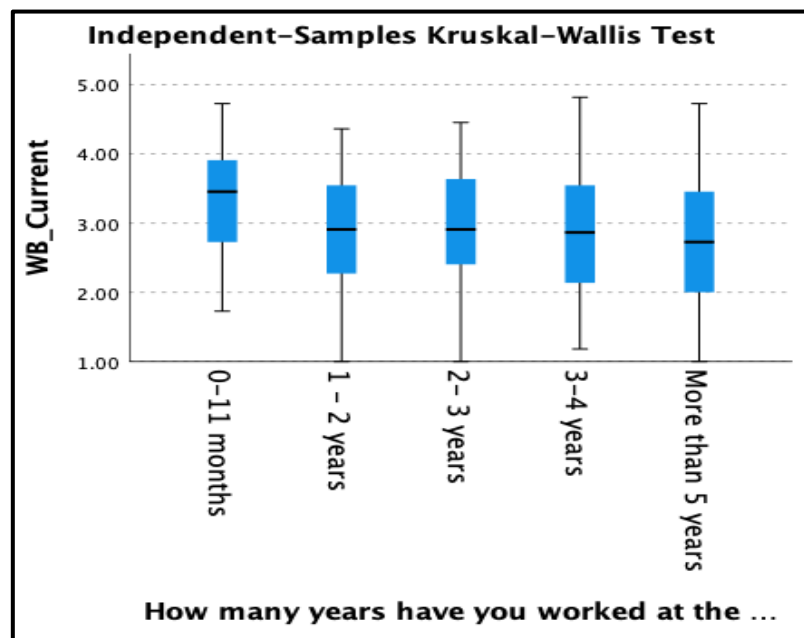
A Mann-Whitney test was performed to investigate the differences in wellbeing experiences between males and gender variant/non-conforming. The results indicated that there is a statistically significant difference in wellbeing experiences for males and gender variant/non-conforming= WB current ( $p = .049$ ); WB\_ Demand and stress ( $p = .048$ ) but

not for the dimension of WB staff support and management ( $p=.105$ ). However, it is noted that the subsample of gender variant/non-conforming is a small number.

In addition to the current wellbeing and characteristics discussed above, I tested whether the number of years you worked in higher education is associated with current wellbeing scores.

***To determine differences in the current staff wellbeing of staff based on the number of years worked in higher education***

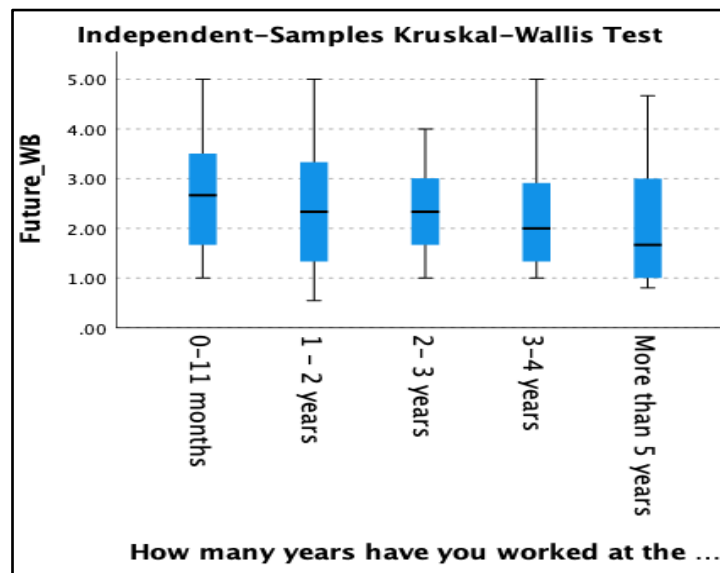
A Kruskal-Wallis test was performed to investigate the differences in current wellbeing experiences between staff based on the number of years worked in higher education. The results indicated that there is no statistically significant difference in staff wellbeing experiences based on the number of years worked in higher education i.e., Current Wellbeing ( $p=.136$ ).



**Figure 8. Current wellbeing based on years working at university (Boxplot)**

*To determine differences in the Future staff wellbeing of staff based on the number of years worked in higher education*

A Kruskal-Wallis test was performed to investigate the differences in anticipated future wellbeing between staff based on the number of years worked in higher education. The results indicated that there is not a statistically significant difference in staff wellbeing experiences based on the number of years worked in higher education i.e., Future being (p=0.143).



**Figure 9. Future wellbeing based on years worked at university**



## 5.5 Spearman Correlation Test

### *Characteristics of Wellbeing*

In addition to the Spearman correlations reported above, some other notable correlations related to current and future wellbeing were calculated: the dimension of belonging and feeling valued is highly and positively correlated to the existence of a wellbeing culture (.829) and a culture that promotes communication about staff wellbeing (.829). Dimensions of security and trust were also shown to be highly and positively correlated to the dimension of belonging and feeling valued. Awareness of WB services to support staff wellbeing was highly correlated to future wellbeing (.525) and current wellbeing (.629).

University responsibility for wellbeing was highly and negatively correlated to future wellbeing (-.576) and current wellbeing (-.577). Future wellbeing is positively and highly correlated to current wellbeing experiences (.789). Future wellbeing is positively and highly correlated to workload demands and stress (.605) and is significantly and highly correlated to the WB support available from colleagues and staff (.725). The culture of the organization in respect of the existence of a wellbeing culture (.679), management support of wellbeing (.641) and a culture of communicating about wellbeing (.666) are also all positively correlated to future wellbeing. Finally, the findings did show that Demand and Workload pressure & stress had a negative and weak correlation to Dimension of Belonging and being Valued ( $\rho=-0.121$ ;  $P>0.0005$ ) and to the Dimension of Security and Trust ( $\rho=-0.106$ ;  $P>0.0005$ ).

## 5.6 Multiple Regression Analysis

A Pearson's correlation coefficient was calculated to check for multicollinearity, based on the coefficient ( $r=.49$ ), it suggested that the assumption of multicollinearity was not

violated. Furthermore, the tolerance (.44) and variance factor (2.28) did not indicate a violation of this assumption. A Durban-Watson statistic was calculated to assess the assumption of the residuals are independent, the results confirmed that this assumption was not violated (1.88). To test the assumption that the variance of the residuals is constant (homoscedasticity) a scatter plot was generated to assess the assumption that the variance of the residuals was constant, and an examination of the plot indicated that a violation of the assumption did not occur (see Figure 10 Scatter plot below). A P-P plot was produced to assess the assumption that the variables of the residuals are normally distributed, as can be shown from the P-P plot (See Figure 11) this condition was met. Finally, a Cooks Distance value (.173) was calculated to confirm that there were no influential cases biasing the model. As all values were below, 1 this suggest that there were no cases biasing the model.

The multiple linear regression using the enter method was conducted to examine how staff future wellbeing can be predicted by their current wellbeing (WB Current), the level and impact of work demand and stress (WB Demand-Stress) and the level of support from colleagues/managers. This model was significant,  $F(3,295) = 224.67, p < .001$ , explaining 69.2%, ( $R^2 = .69$ ), of the variance in the outcome variable. With Current Wellbeing ( $\beta = 0.58, t = 9.99, p < 0.001$ ); WB Demand and Stress ( $\beta = 0.31, t = 6.52, p < 0.001$ ) and WB Staff-Management ( $\beta = 0.32, t = 4.30, p < 0.001$ ) all contributing significantly to the model.

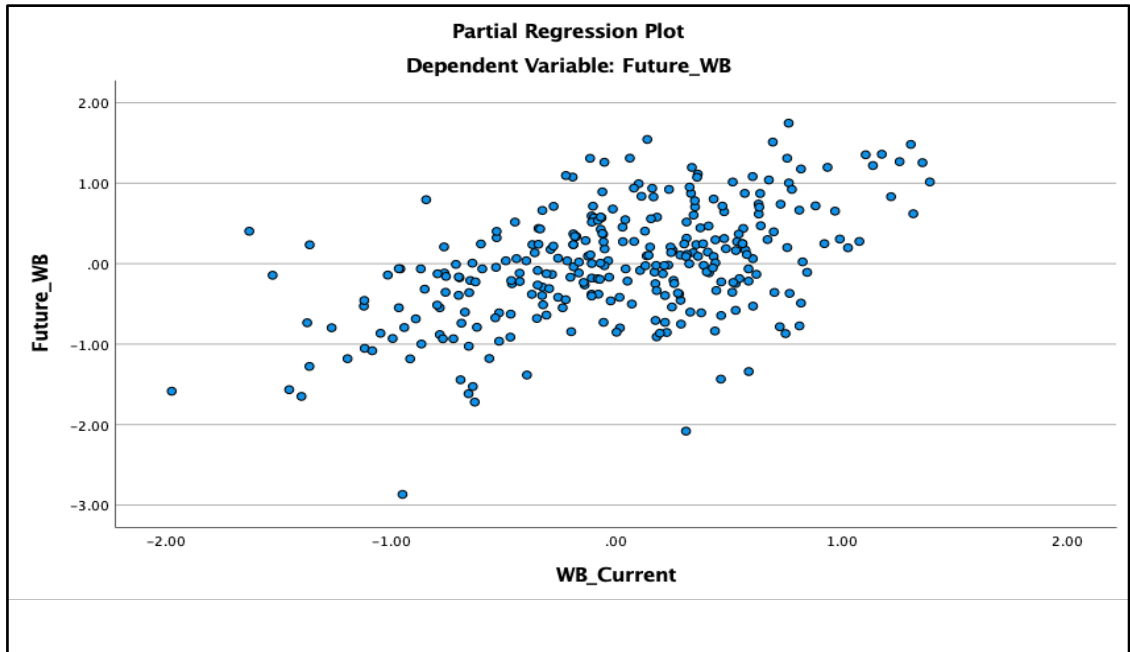


Figure 10. Scatter plot

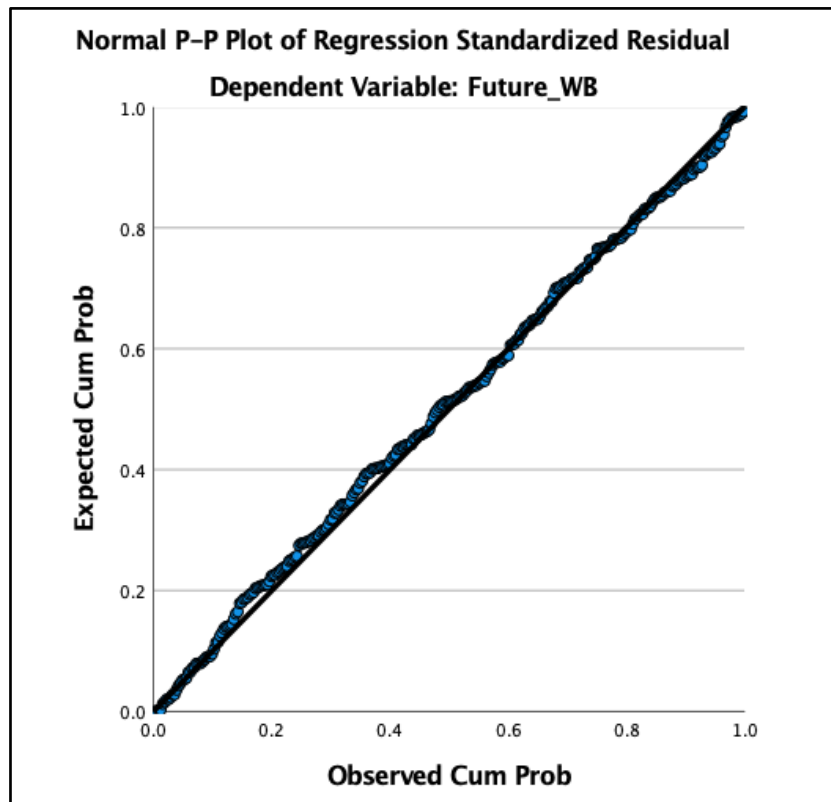


Figure 11. P-P plot

## 5.7 Free text data on survey

### 5.7.1 Results of phase 2 (part A)

Staff were also asked two free text questions as part of the survey. Question 17, to gain additional insight into what else they think is important to their wellbeing at work. Appendix M. below provides the reader with a sample of the comments received, and Q22, which invited comments about their anticipated future staff wellbeing in Higher Education. Appendix N provides the reader with a sample of the comments received).

The qualitative feedback received for Q17 was categorized and compared to four constructs derived from the literature review: **Quality of Work Life** (the quality of the relationship between the employee and their working environment and is related to factors, such as job security and equity and justice. **Coping Strategies** (strategies used to manage workload demands/stress), **Employee Engagement & Flourishing** (related to personal growth opportunities and participation in decision making) and **Organisational Commitment** (a sense of identification and attachment to their organisation). A total of 149 staff comments related to Question 17 were then analysed using a coding scheme. ( See Appendix Item O).

Similarly, in respect of Question 22, a coding scheme based on the constructs, **Job Demands**(linked to the Job Demand-Resource model), **Marketisation**( financial and resource pressures facing the HE sector), **Job Satisfaction**( related to factors such as, the work environment and staff intentions to leave and **Organisational Commitment** ( related to actions taken by the organization to support staff wellbeing) considered in the literature review (Chapter 3) and qualitative study (Chapter 4), was used to categorise 87 staff comments (See Appendix P).

Informed by the work of Kay & Knaack (2008), they also utilized content analysis, comments were also rated on a 5-point Scale to establish if the feedback was positive, neutral, or negative (-2 =very negative, -1=negative,0=neutral, 1=positive, 2=very positive). To determine the impact of a particular category (construct), the mean rating was calculated, and the number of those who scored -2, -1,0,1 and 2 will be considered in the findings below. For example, in Table 5.12, within the construct of coping strategies, the mean score for the theme of autonomy is 13.67, with 8 respondent's comments. Amongst these 1 was very negative (-2), 5 were negative (-1) and two were neutral (0). There were no positive comments from respondents about their experiences of autonomy.

#### ***5.7.1.1 Results***

A summary of staff comments is presented in the table below, including information on the themes, number of times comments were mentioned, percentages and is then linked to the relevant construct derived from the literature (See Table 14 below).

#### **Q17 Factors important for staff wellbeing**

The top 4 reasons cited as important to staff wellbeing at work was to feel valued and respected (15%, n=23), to review the current workload planning arrangements (14%, n=21), the importance of valuing staff time, along with the demands on their time (14%, n=21), and the quality of communication within the organization, (11%, n=17). To determine the impact of the theme respect and valued, which contributes to the construct of **Quality of Work Life**, the mean score was calculated, which is 15, with 23 respondents comments related to the theme of respect and being valued. Amongst these 6 was very negative, 11 was negative, and 6 were neutral. There were no positive

comments from respondents about their experience of being respected and valued in the workplace.

Over half of the comments (69%, n=103) were related to the construct of Organisational Commitment. These included comments related to workload, reward and recognition, communication and the availability of resources, The theme of culture, which is part of the broader construct of Organisational commitment had a mean score of 14.71, with 13 comments. Amongst these, 4 was very negative, 3 was negative and 6 were neutral. There were no positive comments from respondents about the culture that existed in higher education. Overall, the comments, suggest that staff are less likely to have a sense of identification and attachment to the organization. The second highest construct was quality of work life (46 %, n=60). The most prominent theme to emerge related to being respected and valued as discussed in the previous section. A total of 21(14%) staff spoke about the importance of time on their wellbeing. This included requests for flexible working, the option to take longer lunch breaks to attend the gym, taking annual leave without the pressure to cancel and the expectation that staff will work the hours required to undertake the job, rather than to work a normal week. They believed that organizations could better support them through flexible working arrangements. The comments were mainly negative, very negative and included some that were neutral.

**Table 13. Factors important for staff wellbeing**

Themes	Code	Constructs	N	%	Mean	Construct%	Construct N
<b>Autonomy</b>	e	Coping strategies	8	5%	13.67	28%	41
<b>Time</b>	j	Coping strategies	21	14%		0%	
<b>Managers</b>	o	Coping strategies	12	8%		0%	
<b>Development</b>	b	Employee Engagement & Flourishing	10	7%	4.00	8%	12
<b>Purpose</b>	q	Employee Engagement & Flourishing	1	1%		0%	
<b>Contribution</b>	r	Employee Engagement & Flourishing	1	1%		0%	
<b>Support</b>	c	Organisational commitment	15	10%	14.71	69%	103
<b>Culture</b>	f	Organisational commitment	13	9%		0%	
<b>Resources</b>	g	Organisational commitment	16	11%		0%	
<b>Communication</b>	h	Organisational commitment	17	11%		0%	
<b>Workload</b>	k	Organisational commitment	21	14%		0%	
<b>Stability</b>	m	Organisational commitment	7	5%		0%	
<b>Reward and Recognition</b>	n	Organisational commitment	14	9%		0%	
<b>Space</b>	a	Quality of work life	8	5%	15	40%	60
<b>Respect and Valued</b>	d	Quality of work life	23	15%		0%	

Themes	Code	Constructs	N	%	Mean	Construct%	Construct N
<b>Work life balance</b>	l	Quality of work life	14	9%		0%	
<b>Wellbeing</b>	p	Quality of work life	15	10%		0%	
	i		0	0%		0%	



## **Q22 Future of Staff Wellbeing**

Approximately 49%(n=43) of the respondents' comments related to the construct of marketisation. Marketisation, was seen negatively by the respondents due a reduction in available resources, increased business and financial models that encouraged increasing student numbers, often at the detriment of staff wellbeing. while 37%(n=32) of the comments related to organizational commitment, (see table 15 below) and was related to the existence of strong leadership, services to promote wellbeing. The feedback was predominately negative and no positive comments were observed within the responses.

The top four factors reported important to their anticipated future wellbeing at work was the changes and risks impacting HE (17%, n=15), increasing workloads and demands (15%, n=13), the impact of the above on their mental health and stress (15%, n=13), and depleting resources (11%, n=10). To improve staff views about their anticipated future wellbeing the four areas above offer opportunities to support staff wellbeing

**Table 14. Future staff wellbeing**

Themes	Code	Constructs	Numbers	Percentage	Construct %	Construct n	Mean
<b>Mental health and stress</b>	n	job demands	13	15%	34%	30	10
<b>Clearer boundaries between work and home life-sacrifice themselves</b>	p	job demands	4	5%			
<b>Increasing workloads and demands-not enough time</b>	q	job demands	13	15%			
<b>Poor communication, academics and support staff and future of HE/Dep</b>	e	Job Satisfaction	6	7%	33%	29	7.25
<b>Staff leaving/intention</b>	f	Job Satisfaction	7	8%			
<b>University success on wb and happy in my role</b>	h	Job Satisfaction	6	7%			
<b>Toxic environment, bullying, micromanagement, catastrophic</b>	k	Job Satisfaction	10	11%			
<b>Rising business and financial models</b>	a	Marketisation	7	8%	49%	43	8.6
<b>Changes and risks impacting HE sector, undermining WB</b>	d	Marketisation	15	17%			
<b>Focus given to student WB&amp; staff wellbeing ignored/abused</b>	g	Marketisation	9	10%			
<b>Focus on buildings, TEF and students</b>	j	Marketisation	2	2%			
<b>Depleting resources impacting HE and staff wellbeing</b>	m	Marketisation	10	11%			
<b>Wellbeing services, use/non-use and awareness</b>	b	Org Commitment	6	7%	37%	32	6.4
<b>wellbeing policies absent and ineffective</b>	c	Org Commitment	7	8%			

Themes	Code	Constructs	Numbers	Percentage	Construct %	Construct n	Mean
<b>Temporary contract, failure to recruit and HR challenges/ineffective</b>	i	Org Commitment	6	7%			
<b>Strong leadership, value staff, compassionate, realistic expectations</b>	l	Org Commitment	8	9%			
<b>Responsibility for wellbeing, self, university</b>	o	Org Commitment	5	6%			

## **5.8 Summary of survey findings**

There is no evidence that there is a significant difference in wellbeing experiences in males/females or is based on the length of time spent in Higher Education. There is a strong positive correlation between current wellbeing scores and anticipated future wellbeing. The spearman's correlations have shown that the dimension of security and trust are highly and positively correlated to the dimension of belonging and feeling valued in the organisation. Furthermore, the study has emphasized the importance of feeling a sense of belonging and being valued on current staff wellbeing. The study has also shown that the dimension of belonging and feeling valued is highly and positively correlated to the presence of a wellbeing culture and a culture that promotes communication about staff wellbeing. The study indicates that staff are less optimistic about their anticipated future wellbeing in Higher Education. Additionally, the multiple regression analysis has identified that future wellbeing of staff is influenced by their current work experience/level of wellbeing, workload demands and stress, along with the support available from their colleagues and managers.

Furthermore, the remarks from staff outlined in this chapter has emphasized the importance universities have in promoting and addressing staff wellbeing within higher education.

## **5.9 Relevance of the findings for the HE Staff Wellbeing model**

The staff wellbeing in higher education framework (See Chapter 2), supports the presence of two dimensions of wellbeing in higher education: wellbeing process and wellbeing appraisal. The importance of equality, diversity, and inclusivity measures as well as the need to have a sense of belonging and being valued, have been found to give support to the Staff Wellbeing in Higher Education Framework discussed in Chapter 2 (Literature

review). The presence of a wellbeing culture and how it is communicated within HE was felt to be important to staff. The staff highlighted the importance of coping strategies that included taking time away from work such as annual leave, experiencing autonomy and work-life balance.

As the respondents suggested, a complete overhaul of processes in Higher Education institutions, such as workload allocations and the principles of marketisation that underlie them to systematically address staff wellbeing is required. A detailed discussion of these findings will be considered within the discussion section of the dissertation (See Chapter 7).

## **Chapter 6. Freedom of Information Request (Phase 3)**

### **6.1 Overview**

The Freedom of Information request study contributes to the research question: What is wellbeing in Higher Education and how can it be managed? This study investigated how universities currently manage staff wellbeing through their existing policies and processes. As demonstrated in the previous chapter, the findings show that staff's perceptions of their organization's processes are related to future wellbeing. Similarly, staff's experiences of the organisation's interventions are also positively related to future wellbeing. Furthermore, the results indicated there is a significant effect of communication and leadership in the organization on staff wellbeing. To provide further insight into the approaches taken by universities to manage the wellbeing of staff, a documentary research methodology based on publicly available information was utilized. This chapter clarifies the rationale of the study and the approaches taken for the identification and analysis of the documents. The findings of this FOI request, and the implications of these findings, will be discussed in Chapter 6a. Ultimately, researching how the infrastructures of HEIs facilitate or hinder staff wellbeing will shed insight into a) what is currently being done (or not being done) to support staff, and what could be improved upon to ensure staff wellbeing in the future.

### **6.2 The Freedom of Information Act (2000)**

Documents represent a rich source of data for social science researchers (Bryman, 2004). Documents can either be personal or official in nature and, for the purpose of this study, official documents were employed. Official documents can include government records such as parliamentary transcripts, ministerial and political speeches, government committee reports, and statutes. Another type of official document includes organisation

or company documents. Companies produce several sources of documents such as strategic plans, policies, annual reports, press releases, and public relations materials (Bryman, 2004). This study focused on official policies produced by universities to support staff wellbeing. As May (2006:176) states, *“documents, read as the sediments of social practices, have the potential to inform and structure the decisions which people make on a daily and longer-term basis; they also constitute particular readings of social events. They tell us about the aspirations and intentions of the periods to which they refer and described places and social relationships at a time when we may not have been born or were simply not present.”* Through the analysis of university staff wellbeing policy documents, it is possible to gain an understanding of universities' intentions, values, priorities, and processes to support staff wellbeing.

Availability and access to public documents is determined by whether the document is considered to be closed (protected by The Official Secrets Act), restricted (British Royal Papers), open-archival (stored in the National Archives at Kew, Richmond, Surrey), or open-published (Acts of Parliaments, Hansards, Parliamentary debates [May, 2006, p.181]). As university policies are open and published documents, the records were easily accessible for use in this study.

Documents can be further classified by type, and there are three categories: primary (written by those that witnessed or were involved in the event), secondary (produced after the event and by a researcher who was not directly involved), and tertiary documents (which assist in discovering other documents such as bibliographies). For the purpose of this study, secondary documents were focused upon.

The Freedom of Information (FOI) Act 2000 allows members of the public (individuals/organisations), regardless of age or nationality, to request access to

secondary information held by any public authority (e.g., local council, hospital, educational establishments). According to the FOI Act 2000, public authorities must ensure that they respond to requests for information within 20 days, unless the public authority can give reasons why this information will be delayed. Organisations responding to an FOI request must (i) notify the person making the request whether the information is available or not, and (ii) notify the person making the request where the information is held. Costs are not usually associated with these requests made by the public. Occasionally, the organisation might ask for payments toward the cost of postage and photocopying or, in some cases, refuse to provide the information held if it can show that the cost of collating and providing the information requested will exceed £450. For this study, a wide range of policy documents were available in a 20 working days timeframe, thereby leading to excellent response rates. There are several notable advantages of FOIs for studying staff wellbeing. They offer an efficient and cost-effective method of collecting data, and provide documents which highlight the approaches taken by organisations. However, there are also disadvantages associated with FOIs. Firstly, documents are unlikely to give insight into why people or organisations respond or behave in the ways they do. Secondly, public authorities can refuse to provide information if they can confirm that doing so would contravene data protection legislation (i.e., potentially lead to the identification of a participant). Finally, the FOI information provided will be constrained by the type of data the organisation holds (Rigbye & Griffiths, 2010).

Despite the limitations outlined above, FOI has been employed to a variety of studies. FOI studies have been used to inform understanding of behavioural addiction treatment. The study of Rigbye & Griffiths (2011) on NHS Treatment of Gambling addiction utilised a FOI approach. The results showed that 97%( 318 of the 327) provided no services or treatment for gambling problems. A further study by, Griffiths & Dhuffar (2014),



examined the information available about sexual addiction and the treatment of sexual addiction with Mental Health Trust(MHT) services over the past 5 years. The findings showed that 53 of the 58 responses did not provide a specialist service.

To the best of the author's knowledge, there have been no previous studies using FOIs to collect information relating to organisational procedures to support staff wellbeing in UK universities. It was determined that the findings from this study could be triangulated with Phase 1 and 2 to demonstrate whether the emergent theory can be supported.

### **6.3 Rationale for the study**

The total university workforce has been increasing year by year. According to HESA, in 2018/19, this figure stood at 439,955. Therefore, the wellbeing of staff is a pressing issue that becomes more important to address every year (see chapter 2), and national publications, such as Universities UK's (UUK) 'Step Change: Mentally Healthy Universities' (May 2020), reinforce the importance of wellbeing and challenge the university sector to prioritise the mental health of their students and staff. The report by Universities UK states there is a need to adopt 'a whole university' approach to the mental health and wellbeing of staff and students, meaning that wellbeing and mental health should be seen as integral to the practices, policies, and processes of the university. Notable recommendations from the UUK report relate to universities being held accountable for wellbeing matters, including: the availability of resources to support the mental health and wellbeing of students and staff; visible leadership when it comes to dealing with wellbeing and mental health within the university; the inclusion of staff and students in discussions about wellbeing; and the provision of training to support managers to enhance the wellbeing of staff and students.

The current pandemic's impact on staff wellbeing has fostered a sense of urgency, ensuring that their wellbeing is of the utmost importance, both in the university's practices and processes. By examining the information gained from the FOI request (introduced in Chapter 6), this study was able to examine how universities' processes, practices, and policies address the UUK recommendations, outlined above, when it comes to supporting staff wellbeing in the workplace.

#### **6.4 Method**

A list of current universities was obtained by undertaking an internet search and was used as a mailing list to circulate the FOI request. In November 2018, 128 emails were sent to universities in the UK (sent to the person with responsibility for FOI requests ) requesting information about staff wellbeing provisions. The data requested covered the types of interventions to support staff wellbeing, use of services, and the policies underpinning their approaches to wellbeing. The results contributed to the research question (see Section 6.1). The information requested included:

1. The job title of the senior manager with lead responsibility for staff wellbeing in the university.
2. The number of mental health specialist staff available within the university to support staff wellbeing.
3. A copy of the university's policy (Procedures) and other relevant documents to support staff wellbeing.
4. The types of services offered to support wellbeing in the university.

5. The number of referrals to services offered where staff wellbeing was a primary reason for the referral.
6. Staff take-up (number) of each service offered to support wellbeing.

#### ***6.4.1 Collecting the documents***

‘WhatDoTheyKnow’ ([https://www.whatdotheyknow.com/?post\\_redirect=1](https://www.whatdotheyknow.com/?post_redirect=1)) is a website that can be used by any member of the public to submit a FOI request to a publicly funded organisation. The advantage of this site is that requests are published and made available for wide consumption by the general public. Besides sending emails, all responses are recorded and this contributes to the authenticity and trustworthiness of the data collection and analysis phase.

#### ***6.4.2 Exclusion and Inclusion Criteria***

In terms of analysing the policies on staff wellbeing, the researcher excluded health and safety policies and instead considered specific policies with a title that included any of the following terms: 'staff wellbeing', 'well-being', 'wellbeing policies', 'health and wellbeing', 'mental health and wellbeing', and 'support and wellbeing'. In total, 35 universities provided specific policies on staff wellbeing which were used for the analysis. It is recognised that universities have a range of policies, such as flexible working that can contribute to staff wellbeing. However, this study determined to understand if universities had a specific overarching policy on staff wellbeing.

The responses (completed/partial) received from 122 universities were included in the analysis. Due to human error, a request for information was sent twice to two universities.

Therefore, to prevent duplication, the two duplicate responses were excluded from the analysis.

It is worth noting that one organisation was not included in the data analyses because the request for information was refused because the organisation is not classified as a public body. Three further organisations were excluded from the analysis because information was not provided after three requests. Taking in to account the above omissions, the total responses included in the analysis is 122.

## **6.5 Analytical process**

For the purpose of this study, all the questions outlined in Section 6.3 underwent qualitative analysis. Question 3 also included the interpretive data analysis of each organisation's policies to support staff wellbeing. A thematic analysis approach (Braun & Clarke, 2006) was used to identify how universities have managed and responded to wellbeing. A total of 9 categories were constituted, related to the content of the staff wellbeing policies : definitions of health and wellbeing; indicators and measurements of staff wellbeing; problems the policy seeks to address; aims and approaches to address the identified problems/issues; involvement in the policy development; benefits of the policy; resources to support the implementation; the policy renewal date and monitoring process. The coding strategy employed was description and interpretation focused to help determine the meaning of the data in the policies( Adu, 2019).

### ***6.5.1 Statistical Method***

An excel document was compiled to record the data received from each university( See Appendix K, example of Excel data set). Descriptive statistics, percentages and total number count were obtained using excel.

### 6.5.2 Sample Data Analysis

Examples of the staff wellbeing policy coding process, categories, commentary and analysis are provided below.

Staff wellbeing Policy: Aim/Vision (A segment from the document only)

#### **Document Excerpt 6.3.1a:**

Source: Staff wellbeing policy submitted in response to the FOI request (based on a University in the Midlands Region).

*“The University wants to create a culture where we work together in collaborative manner to empower staff to be generally healthier, better informed, have a good work-life balance and hence be equipped to contribute to the success of the University.”*

The vision of staff wellbeing above conveys the tone of working together to promote a culture where staff are healthier, enjoy balance between their home and work life, and are prepared to contribute to the success of the university.

“**Success of University**”- a theme and a rationale for staff wellbeing. This theme contributes to the external context of the university, responding to the economic and external issues facing universities. The success of staff appears to be secondary.

“**Collaborative manner**” is coded within the broader category of Culture, representing a collective responsibility where both staff and managers foster a climate of empowerment. Further exploration of the processes outlined for creating a collaborative working environment is necessary.

### 6.5.3 *Quality criteria and Trustworthiness*

Documents used for research are required to meet four quality standards (Scott, 1990, p.6). **‘Authenticity’** refers to the extent to which the document is genuine and its origins can be confirmed. The policies analysed in the study were provided by universities responding to a FOI request. **‘Credibility’** relates to issues of misrepresentations or inaccuracies contained within the documents. For the researcher, a key concern is to determine to what extent the document may be biased. As May (2006:183) states, *“documents may then be interesting for what they leave out, as well as what they contain. They do not simply reflect, but also construct social reality and versions of events.”* Therefore, when analysing the policies, equal attention is given to what might be left out and the biases it may expose.

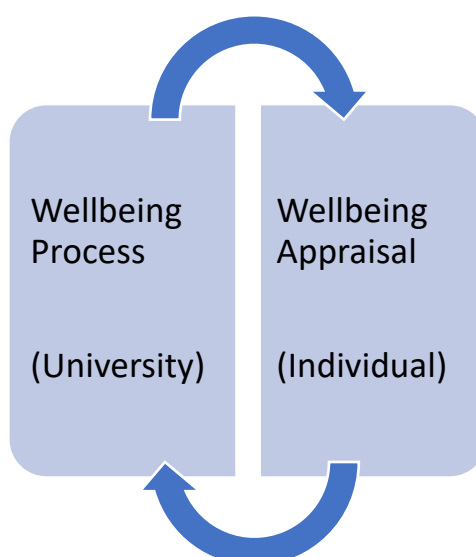
**‘Representativeness’** refers to the extent to which the document can be considered as typical. This study determined that each staff wellbeing policy would be unique, and therefore attempted to establish if a ‘cogent theoretical account’ existed (Bryman, 2006:387). This study examined policies across several universities to identify any common factors associated with managing staff wellbeing, as outlined in the documents. **‘Meanings’** seeks to establish whether the document is logical and understandable. However, when considering meanings, it is important to exercise a level of caution because documents are non-neutral. As May (2006, p.183) states, *“...it is not assumed that documents are neutral artefacts which independently report social reality (positivism), or that analysis must be rooted in that nebulous concept, common-sense reasoning.”* Therefore, the meanings identified in the documents are influenced by the cultural contexts in which they are produced. This study focused on the way in which staff wellbeing is constructed, the contributions of staff to the policy development, and the organisational and cultural assumptions underpinning the policies.

The findings from this study relating to the FOI Questions 1, 2, 3, 4, 5 and 6 are outlined below. Also, extracts from university policies (Question 3) – relating to HEIs’ values, priorities, and interventions available to support staff – will be used to give further insight into how universities currently manage staff wellbeing. The findings from the analyses of the staff wellbeing policies are summarised below.

## Chapter 6a. Freedom of Information Request results (Phase 3).

### 6.1 Overview

In the previous chapter (see Chapter 2b) I proposed an emergent Staff Wellbeing in Higher Education Framework. This framework suggests that staff wellbeing is influenced at both the individual and organisational level( Dimensions). Each of the dimensions are seen as inter-connected, and changeable ( See Figure 2.1) affecting the wellbeing of staff in Higher Education.



**Figure 12. Staff Wellbeing Framework in Higher Education**

This Freedom of Information study contributes specifically to understanding the **Dimension of Wellbeing Processes** outlined within the Higher Education Framework above. As outlined earlier, the Dimension of Wellbeing process is related to how the university articulates wellbeing through its policies and communications, is also concerned with the specific actions and interventions universities make available to support staff wellbeing, and the extent to which staff are involved in the design and development of these interventions. Moreover, a review of the specific staff wellbeing



policies created by each institution to support staff wellbeing will give understanding into how the concept of wellbeing is communicated, insights into whether each of the institutions exhibit a wellbeing culture and show the importance of other interrelated concepts, such as, equality, diversity, and inclusion. Furthermore, an examination of the staff wellbeing policies will seek to establish how the role of other related work processes in universities such as, workload allocations systems that might affect staff wellbeing. Moreover, the Freedom of Information request study contributes directly to the research question: What is wellbeing in Higher Education and how can it be managed? through examining the institutions staff wellbeing policies. This will be informed by asking specific questions about the types of interventions and services available to support staff wellbeing, and the recorded data held by each institution on the referrals and subsequent take-up(usage) of the services provided to support staff wellbeing . As demonstrated in the earlier chapters ( See Chapter 4 and 5), the findings show that staff's perceptions of their organization's processes and how they rate their current wellbeing are related to anticipated future wellbeing. Similarly, staff's experiences of the organisation's interventions and their willingness to take up the services to support their wellbeing at work also have the potential to negatively impact staff wellbeing.

This chapter clarifies the rationale of the study and the approaches taken for the identification and analysis of the staff wellbeing policies and information about the interventions available to support staff wellbeing. The findings of this FOI request, and the implications of these findings, will be discussed in Chapter 6a. Finally, researching how the infrastructures of HEIs facilitate or hinder staff wellbeing will shed insight into a) what is currently being done (or not being done) to support staff, and b) what could be improved upon to ensure staff wellbeing in the future.

## 6.2 The Freedom of Information Act (2000)

Documents represent a rich source of data for social science researchers (Bryman, 2004). Documents can either be personal or official in nature and, for the purpose of this study, official documents were employed. Official documents can include government records such as parliamentary transcripts, ministerial and political speeches, government committee reports, and statutes. Another type of official document includes organisation or company documents. Companies produce several sources of documents such as strategic plans, policies, annual reports, press releases, and public relations materials (Bryman, 2004). This study focused on official policies, produced by universities to support staff wellbeing. As May (2006:176) states, *“documents, read as the sediments of social practices, have the potential to inform and structure the decisions which people make on a daily and longer-term basis; they also constitute particular readings of social events. They tell us about the aspirations and intentions of the periods to which they refer and described places and social relationships at a time when we may not have been born or were simply not present.”*

Through the analysis of university staff wellbeing policy documents, it is possible to gain an understanding of universities' intentions, values, priorities, and processes to support staff wellbeing.

Availability and access to public documents is determined by, whether the document is considered to be closed (protected by The Official Secrets Act), restricted (British Royal Papers), open-archival (stored in the National Archives at Kew, Richmond, Surrey), or open-published (Acts of Parliaments, Hansards, Parliamentary debates [May 2006, p.181]). As university policies are open and published documents, the records were easily accessible for use in this study.

Documents can be further classified by type, and there are three categories: **primary** (written by those that witnessed or were involved in the event), **secondary** (produced after the event and by a researcher who was not directly involved), and **tertiary** documents (which assist in discovering other documents such as bibliographies). Those used in this study are secondary documents.

The Freedom of Information (FOI) Act 2000 allows members of the public (individuals/organisations), regardless of age or nationality, to request access to secondary information held by any public authority (e.g., local council, hospital, educational establishments). According to the FOI Act 2000, public authorities must ensure that they respond to requests for information within 20 days, unless the public authority can give reasons why this information will be delayed. Organisations responding to an FOI request must (i) notify the person making the request whether the information is available or not, and (ii) notify the person making the request where the information is held. Costs are not usually associated with these requests made by the public. Occasionally, the organisation might ask for payments toward the cost of postage and photocopying or, in some cases, refuse to provide the information held if, it can show that the cost of collating and providing the information requested will exceed £450. For this study, a wide range of policy documents were available within a 20 working days timeframe, thereby leading to excellent response rates.

There are several notable advantages of FOIs for studying staff wellbeing. They offer an efficient and cost-effective method of collecting data and provide documents which highlight the approaches taken by organisations. However, there are also disadvantages associated with FOIs. Firstly, documents are unlikely to give insight into why people or organisations respond or behave in the ways they do. Secondly, public authorities can refuse to provide information if they can confirm that doing so would contravene data

protection legislation (i.e., potentially lead to the identification of a participant). Finally, the FOI information provided will be constrained by the type of data the organisation holds (Rigbye & Griffiths, 2010).

Despite the limitations outlined above, FOI has been employed in a variety of studies. FOI studies have been used to inform understanding of behavioural addiction treatment. The study of Rigbye & Griffiths (2011) on NHS Treatment of Gambling addiction utilised a FOI approach. The results showed that 97% (318 of the 327) of Mental Health Trusts provided no services or treatment for gambling problems. A further study by Griffiths & Dhuffar (2014) examined the information available about sexual addiction and the treatment of sexual addiction with Mental Health Trust (MHT) services over the past 5 years. The findings showed that 53 of the 58 responses from Mental Health Trusts did not provide a specialist service.

To the best of the author's knowledge, there have been no previous studies using FOIs to collect information relating to organisational procedures to support staff wellbeing in UK universities. It was determined that the findings from this study could be triangulated with Phase 1 and 2 to demonstrate whether the emergent theory (outlined in section 6.1) can be supported.

### **6.3 Rationale for the study**

The total university workforce has been increasing year by year. According to HESA, in 2018/19, this figure stood at 439,955. Therefore, the wellbeing of staff is a pressing issue that becomes more important to address every year (see chapter 2), and national publications, such as Universities UK's (UUK) 'Step Change: Mentally Healthy Universities' (May 2020), reinforce the importance of wellbeing and challenge the university sector to prioritise the mental health of their students and staff. The report by

Universities UK states there is a need to adopt ‘a whole university’ approach to the mental health and wellbeing of staff and students, meaning that wellbeing and mental health should be seen as integral to the practices, policies, and processes of the university. Notable recommendations from the UUK report relate to universities being held accountable for wellbeing matters, including: the availability of resources to support the mental health and wellbeing of students and staff; visible leadership when it comes to dealing with wellbeing and mental health within the university; the inclusion of staff and students in discussions about wellbeing; and the provision of training to support managers to enhance the wellbeing of staff and students.

By examining the information gained from the FOI request (introduced in Chapter 6), this study gives previously unknown insight into the specific actions taken and services provided by universities to support staff wellbeing. As outlined, in the earlier chapter ( see Chapter 4 ) it suggests there may be some reluctance to take up the services offered by some staff. This study will examine specific data on the take up of services from institutions. Furthermore, this study will examine the institutions Staff Wellbeing policies to understand how their processes, practices, and policies address the UUK recommendations, outlined above, when it comes to supporting staff wellbeing in the workplace.

#### **6.4 Method**

A list of current universities was obtained by undertaking an internet search and was used as a mailing list to circulate the FOI request that was sent to via an email to each institution. In November 2018, 128 emails were sent to universities throughout the UK (sent to the person with responsibility for FOI requests within each of the institutions) requesting information about staff wellbeing provisions. A total of 122 (out of the original 128 contacted for data) provided information ( partial/full) regarding the 6 questions

asked. The data requested covered the types of interventions to support staff wellbeing, the number of referrals made for support and the take up of wellbeing services, and the policies underpinning their approaches to wellbeing. The data received contributed to the research question (see Section 6.1). The specific questions asked to each university is listed below:

1. The job title of the senior manager with lead responsibility for staff wellbeing in the university.
2. The number of mental health specialist staff available within the university to support staff wellbeing.
3. A copy of the university's policy (Procedures) and other relevant documents to support staff wellbeing.
4. The types of services offered to support wellbeing in the university.
5. The number of referrals to services offered where staff wellbeing was a primary reason for the referral.
6. Staff take-up (number) of each service offered to support wellbeing.

### **6.5 Dissemination of the questions and collecting the documents**

To disseminate the questions outlined above the website 'WhatDoTheyKnow' ([https://www.whatdotheyknow.com/?post\\_redirect=1](https://www.whatdotheyknow.com/?post_redirect=1)) was utilised to send an email request for information to gain insight into the questions outlined above. This website can be used by any member of the public to submit a FOI request to a publicly funded organisation. The advantage of this site is that once the freedom of information requests

is made, both the correspondences and the information provided by the organisation in response to the FOI are published on the website, and the general public can then have access to the data collected, thereby contributing to the authenticity and trustworthiness of the data collection phase.

## **6.6 Exclusion and Inclusion Criteria**

In terms of analysing the policies on staff wellbeing, the researcher excluded health and safety policies and instead considered specific policies with a title that included any of the following terms: 'staff wellbeing', 'well-being', 'wellbeing policies', 'health and wellbeing', 'mental health and wellbeing', and 'support and wellbeing'. Based on the researcher's selection criteria previously outlined only a total 35 universities provided specific policies on staff wellbeing( Question 3) and these were used for a inductive qualitative analysis. It is recognised that universities have a range of policies, such as flexible working that can contribute to staff wellbeing. However, this study determined to understand if universities had a specific overarching policy on staff wellbeing in higher education.

The responses(completed/partial) in respect of the other 5 questions that were received from the 122 universities who responded to the FOI request were included in descriptive analysis. For clarity, responses were considered completed in full if information was provided by the institution to all the questions. In contrast, partial responses related to institutions that did not provide all the information requested. Due to human error, a request for information was sent twice to two universities. Therefore, to prevent duplication, the two duplicate responses were excluded from the analysis.

It is worth noting that one organisation was not included in the data analyses because the request for information was refused because the organisation is not classified as a public

body. Three further organisations were excluded from the analysis because information was not provided after three requests. Taking in to account the above omissions, the total responses included in the overall analysis is 122.

## **6.7 Data Analysis and process**

For the purpose of this study, the majority of the questions outlined in Section 6.3 were quantitatively recorded and analysed, except for question 3 as this was also subject to qualitative analysis ( A request for a copy of the university's policy (Procedures) and other relevant documents to support staff wellbeing). Each of the policy documents to support staff wellbeing( a total of 35 that met the researcher's criteria) was also analysed qualitatively to identify emerging themes. A thematic analysis approach (Braun & Clarke, 2006) was used to identify how universities have managed and responded to wellbeing. To assist in the analysis and interpretation of the policy document 9 questions were used to help interrogate the document. The 9 questions/categories were, related to the content of the staff wellbeing policies: definitions of health and wellbeing; indicators and measurements of staff wellbeing; problems the policy seeks to address; aims and approaches to address the identified problems/issues; involvement in the policy development; benefits of the policy; resources to support the implementation; the policy renewal date and monitoring process.

### ***6.7.1 Statistical Method***

An excel document was compiled to record the data received from each university (See Appendix K, example of Excel data set). Descriptive statistics, percentages and total number count were obtained using excel. In addition, relating to questions 1, 2, 4, 5 and 6 descriptive statistics were undertaken and question 3 included a combination of descriptive statistics and a qualitative analysis of 35 specific staff wellbeing policies.



### 6.7.2 Sample Data Analysis

Examples of the staff wellbeing policy coding process, categories, commentary, and analysis are provided below.

Staff wellbeing Policy: Aim/Vision (A segment from the document only)

#### **Document Excerpt 6.5.3a:**

Source: Staff wellbeing policy submitted in response to the FOI request (based on a University in the Midlands Region).

*“The University wants to create a culture where we work together in collaborative manner to empower staff to be generally healthier, better informed, have a good work-life balance and hence be equipped to contribute to the success of the University.”*

The vision of staff wellbeing above conveys the tone of working together to promote a culture where staff are healthier, enjoy balance between their home and work life, and are prepared to contribute to the success of the university.

“**Success of University**”- a theme and a rationale for staff wellbeing. This theme contributes to the external context of the university, responding to the economic and external issues facing universities. The success of staff appears to be secondary.

“**Collaborative manner**” is coded within the broader category of Culture, representing a collective responsibility where both staff and managers foster a climate of empowerment. Further exploration of the processes outlined for creating a collaborative working environment is necessary.

### 6.7.3 *Quality criteria and Trustworthiness*

Documents used for research are required to meet four quality standards (Scott, 1990, p.6). **'Authenticity'** refers to the extent to which the document is genuine, and its origins can be confirmed. The policies analysed in the study were provided by universities responding to a FOI request. **'Credibility'** relates to issues of misrepresentations or inaccuracies contained within the documents. For the researcher, a key concern is to determine to what extent the document may be biased. As May (2006:183) states, *"documents may then be interesting for what they leave out, as well as what they contain. They do not simply reflect, but also construct social reality and versions of events."* Therefore, when analysing the policies, equal attention is given to what might be left out and the biases it may expose.

**'Representativeness'** refers to the extent to which the document can be considered as typical. This study determined that each staff wellbeing policy would be unique, and therefore attempted to establish if a 'cogent theoretical account' existed (Bryman, 2006:387). This study examined policies across several universities to identify any common factors associated with managing staff wellbeing, as outlined in the documents. **'Meanings'** seeks to establish whether the document is logical and understandable. However, when considering meanings, it is important to exercise a level of caution because documents are non-neutral. As May (2006, p.183) states, *"...it is not assumed that documents are neutral artefacts which independently report social reality (positivism), or that analysis must be rooted in that nebulous concept, common-sense reasoning."* Therefore, the meanings identified in the documents are influenced by the cultural contexts in which they are produced. This study focused on the way in which staff wellbeing is constructed, the contributions of staff to the policy development, and the organisational and cultural assumptions underpinning the policies.

The findings from this study relating to the FOI Questions 1, 2, 3, 4, 5 and 6 are outlined below. Also, extracts from university policies (Question 3) – relating to HEIs’ values, priorities, and interventions available to support staff – will be used to give further insight into how universities currently manage staff wellbeing. The findings from the analyses of the staff wellbeing policies are summarised below.

## **Chapter 6b. Freedom of Information Request Findings**

### **6.1 Introduction**

In Chapter 6, the aims, rationale, methods, and type of analysis required for this study's FOI request were summarised. In this sub-chapter, the findings of the FOI request will be summarised. By revealing information pertaining to the various policies that are (or are not) in place to support staff wellbeing, how staff are involved in these policies, who is responsible for staff wellbeing on HEIs, how many staff are referred to support services (and for what reason), and staff take-up of wellbeing services, it is hoped that a greater understanding of staff wellbeing – and the various infrastructural, social, and personal changes that need to be made to support staff wellbeing – will be gained.

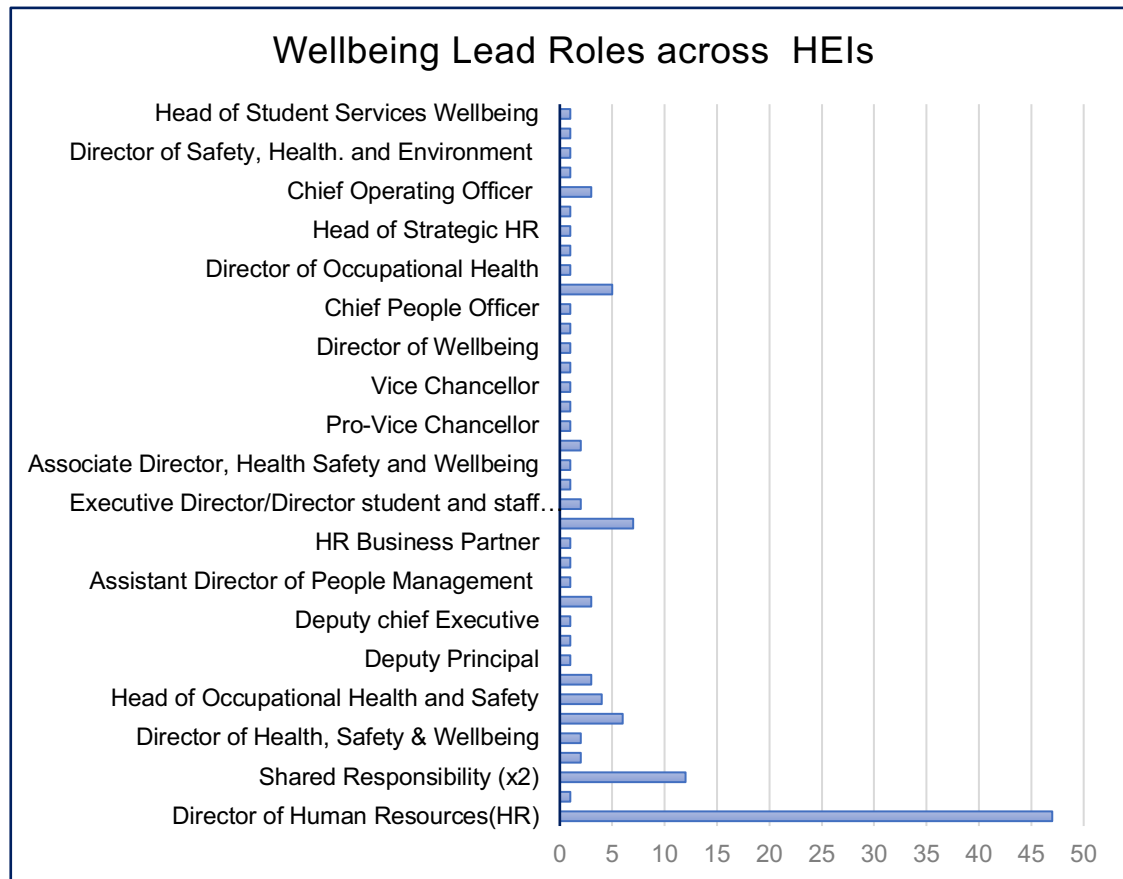
The FOI request consisted of questions about who was responsible for supporting staff wellbeing and the types of services/interventions provided to support staff wellbeing. Information was collected on staff's usage of services and referral rates to services where staff wellbeing was a primary reason for the referral. Each institution was also asked to provide their policy on staff wellbeing in higher education.

### **6.2 The findings**

A total of 122 institutions responded to the FOI request and their responses have been included in the analysis. Of the 122 responses, all were provided within the required 20-day period. Over 70% of the responses were answered in full (n=90). As outlined earlier, the responses included a request for a copy of the institutions specific policy to support staff wellbeing. The findings will be presented based on each question asked in the FOI (see section 6.4) and will be presented below:

### 6.2.1 Who has lead responsibility for staff wellbeing?

HEIs were asked who was responsible for staff wellbeing. Their responses are in the Figure 13 below.



**Figure 13. Wellbeing Lead roles across HEIs**

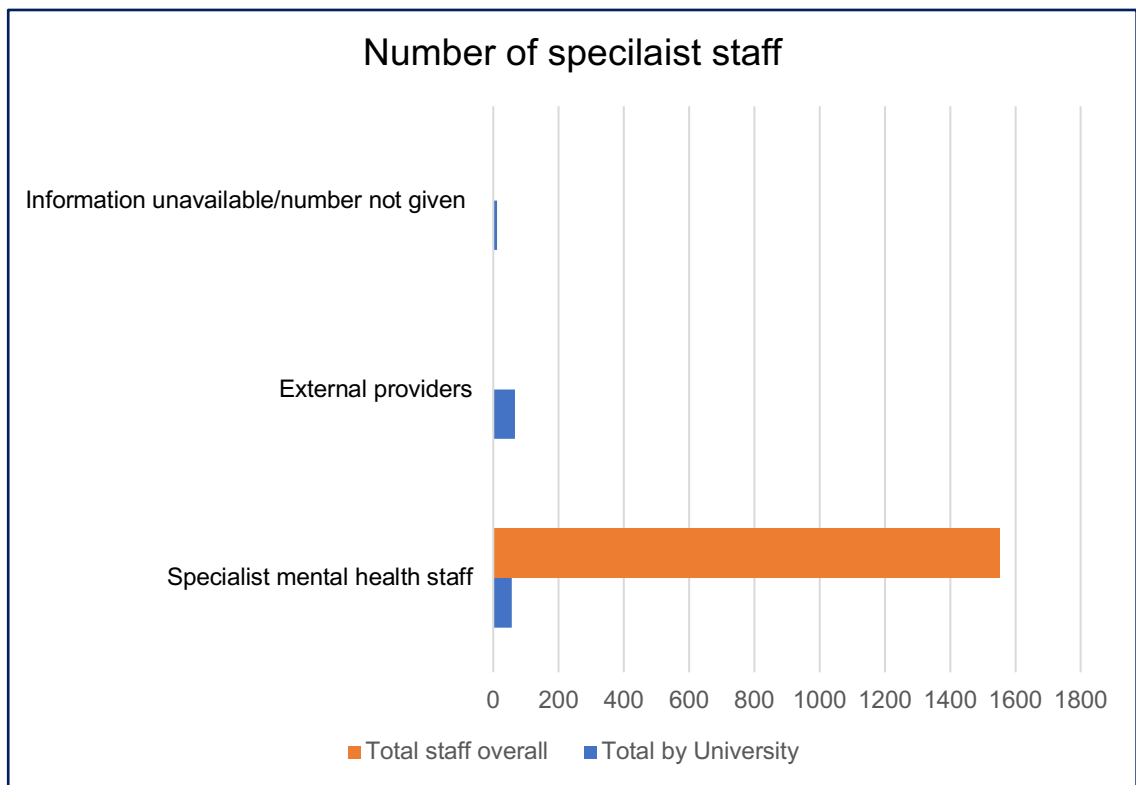
As Figure 6.1 indicates, 47 HEIs reported that their HR Directors held responsibility for staff wellbeing. The second most reported leadership arrangement included staff who shared responsibility for this strategic role(12 HEIs had wellbeing leads that shared this responsibility). Seven universities reported that the lead responsibility was shared with two or more people in the organisation. The majority(n=120) of HEIs had a designated person in charge of overseeing staff wellbeing. However, there were two additional

institutions that reported that they had no nominated lead and it is not clear why this is the case (e.g., this may be due to resourcing issues in those institutions).

Therefore, there is evidence that not all institutions (i.e., two HEIs) have met the recommendations of the UUK report ‘Step Change: Mentally Healthy Universities’ (May 2020) on visible leadership when acting on mental health and wellbeing.

### **6.3 Mental health specialist staff available to support staff wellbeing**

HEIs were asked to identify the number of mental health specialist staff that they had available within their institution to support staff wellbeing. As figure 14 indicates, 57 universities out of 122 (46.7%) were able to specify the number of specialist mental health staff employed or working in the institution to support staff mental health and wellbeing. The aggregate total figure for mental health specialist staff across the institutions was 1551. The majority of institutions (n=67) also accessed specialist mental health services from an external provider (external mental health provider). Based on the responses provided, 11 institutions indicated that this information was not currently unavailable, or they did not provide this information.



**Figure 14. Specialist staff to support wellbeing**

From the other responses, several of the universities showed commitment to prioritising the mental health of staff and students through the provision of a range of specialist mental health staff employed within the university (n=57). The remaining universities accessed specialist mental health staff externally. The following roles were identified in the information received.

**Table 15. Types of roles/services to support staff mental health and wellbeing across HEIs**

Role Type	Aggregate Total (N)	HEIs that use this role(N/%)	Average number in this role/service for HEIs that use it
Counsellors	16	5	3.2
Mental Health First Aiders Staff	228	26	8.7
Mental Health First Aiders Champions	187	2	93.5
Mental Health First Aid Aware Staff	42	1	42
Psychiatrists	1	1	1.0
CBT specialist	2	1	2.0
Student Counselling and Advice	1	1	1.0
Psychologists	7	2	3.5
OH Service (External)	21	21	1.0
OH Nurse	8	8	1.0
OH Physician	8	8	1.0
Counselling Services	22	22	1.0
External Counselling Provisions	40	40	1.0
None (no roles)	15	15	1.0
Other roles(not specified/clear)	11	11	1.0

There has been a commitment to the employment of mental health first aiders to support the wellbeing of staff and students, as evidenced in Table 19. At least 26 HEIs had Mental Health First Aiders (are trained to provide support and reassurance to individuals suffering from mental issues or emotional distress), and there was an average of 8.7 roles for each of these institutions that utilised this role. From the data made available, at least

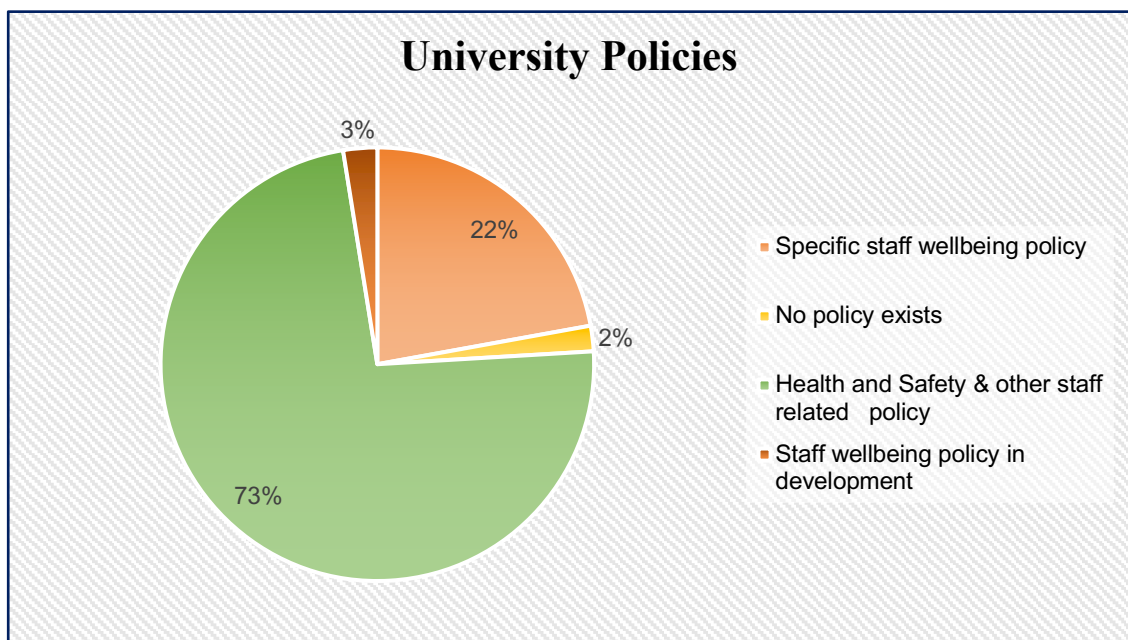


21 HEIs provided a counselling service and 40 institutions indicated that they provided an external counselling service. However, a total of 15 HEIs reported that they had no mental health specialists available within the university to support staff wellbeing.

## 6.4 University policies to support staff wellbeing

### 6.4.1 Staff wellbeing policies

Commitment to staff wellbeing through policy was evidenced in all the HEIs that provided information on their policies to contribute to staff wellbeing (n=122). A total of 35 universities currently has a specific policy on staff wellbeing (See figure 15).



**Figure 15. Data on HEIs Staff Wellbeing Policy**

From the responses, it was evident that, in some institutions, there was an absence of policies to support staff wellbeing (2%, three HEIs) because no policies existed. A total of four HEIs (3%) planned to address this matter.

Other HEIs commented that staff wellbeing was supported through key Health and Safety and other related staff wellbeing initiatives such as: managing stress at work, flexible working, family-friendly employment policies, sickness absence policies, bullying and harassment policies, staff development policies, managing stress at work, special leave policies, and ensuring dignity at work (this does not represent an exhaustive list but captures the most referred to policies). The policies above undoubtedly contribute to staff wellbeing within the university, seemingly suggesting that staff wellbeing within the organisation can be achieved without the presence of key strategic overarching policies on staff wellbeing to offer guidance and support.

#### ***6.4.2 Purpose of the policy***

As indicated previously, 35 institutions specified that they had an explicit/overarching policy on staff wellbeing. These policies were analysed, and the findings will be outlined and discussed in regard to observable trends relating to the policy aims. In summary the policies emphasized the significance of improving attendance and minimizing work related illness and to promoting a holistic approach to health and wellbeing. Partnership and collaboration between managers and staff were recognized as essential to enhancing wellbeing at work and ultimately to performance. As one organization states, the *'health and wellbeing of our staff is therefore an essential and relevant business consideration.'* (University A).

The work environment and culture are seen as important to promoting positive wellbeing and cultivating opportunities for conversations about wellbeing, where staff can reach their full potential. Moreover, wellbeing at work if it was to be realised in the policies should move beyond an aspirational commitment towards the implementation of strategies and action plans that are routinely monitoring and are seen to be responding to

staff wellbeing requirements. For example, providing support to staff who are experiencing stress at work. Below is a policy extract which supports the aforementioned comments.

**Extract C –: Policy aims**

Our commitment is to:

- Actively create and promote the conditions for wellness, taking into account the individualised nature of social, physical, emotional and mental needs.
- Create a positive, healthy and inclusive working environment where individuals are supported to perform to the best of their abilities and, through this, will be resilient and adaptable in the face of change.
- Develop line managers to understand how wellbeing impacts upon healthy, happy and productive teams, whilst equipping them to support their staff as their mental, emotional and/or physical health needs change or are disclosed.
- Ensure that risk factors leading to workplace stress are minimised or mitigated, putting support in place for individuals who are experiencing a high degree of stress irrespective of the reduction of risk.
- Foster a personal and shared responsibility for wellbeing, with all individuals in the School community contributing positively towards the School environment through their behaviours, words and deeds, and in accordance with the School's Ethics Code.

*( University B)*

### ***6.4.3 Definition of wellbeing***

The policies were reviewed to establish if there were common ideas and values informing the definitions of wellbeing. All the wellbeing policies acknowledged the multifaceted and complex nature of wellbeing in their definition. Principally the wellbeing definitions incorporated elements related to the physical, mental, and social health of staff at work. Additionally, other important dimensions of wellbeing at work included manageable workload levels and stress and the presence of a safe and collegiate and supportive workplace. At least a quarter of the definitions provided in the policies used nationally recognised definitions of wellbeing, such as the Public Health England (PHE) definition

that identifies five domains of wellbeing (health, work, personal growth, values and collective and social) and the Chartered Institute of Personnel Development (CIPD) (See chapter 2). Extracts D and E are examples of definitions that have incorporated the essential facets required to promote staff wellbeing at work:

**Extract D:** Wellbeing at work – wellbeing is difficult to define as it is a subjective state that takes into account physical health, psychological state, personal beliefs, social relationships, environmental and occupational factors

*(University G)*

**Extract F:** The University wants to create a culture where we work together in a collaborative manner to empower staff to be generally healthier, better informed, have a good work- life balance and hence be equipped to contribute to the success of the University.

*(University I).*

As evidenced in extract F, above the weight given to the working environment, and the potential for this to impact staff wellbeing is consistently recognised by each institution. Wellbeing in the workplace is shaped by a healthy work environment and culture, requiring commitment from both staff and management (the organisation) to achieve work-life balance, leading to improved performance and a successful university.

The next section considers how staff were included in the development and review of policies.

#### ***6.4.4 Staff involvement policy development***

Only a half of the policies indicated how staff were engaged in discussions concerning wellbeing and contributed to the development of their policy. This is not to imply that

this did not happen, instead this may suggest the information was not clearly identifiable in the staff wellbeing policies. Of the 14 policies that highlighted how and when staff had been involved in the development of their policies, two exemplar cases are outlined below:

**Extract I:** *“All staff/student consultation events provided an opportunity for wider engagement and consultation. This feedback was used to prioritise the objectives. The aims and objectives can be found on pages 6-10 of this Framework.”*

Extract I is important because it refers to the policy stemming from engagements with a broad range of staff. In contrast, extract J below shows that while staff are involved in the design of the policies, it outlines the responsibilities of stakeholders in ensuring and communicating with the wider staff group to continued wellbeing.

**Extract J:** *“Key stakeholders*

- Occupational Health Services*
- Hertfordshire Sports Village*
- HR*
- People Development*
- Safety*
- Equality*
- Academic Schools*
- Student Services Disability Services*

*Stakeholders on the wellbeing group have a responsibility for cascading information and messages to their respective constituencies as well a role in ensuring that ideas and comments are brought back to the wellbeing group to inform decisions and actions.”*

#### **6.4.5 Evaluation of policies by universities**

The evaluation process for policies was not made explicit in terms of how and when these policies would be reviewed. Overall, there is an absence of information in the policies concerning the process for evaluation and review. There were some exceptions(n=6). Each of the policies reviewed outlined measurements and specific metrics that were used

to determine the effectiveness of their wellbeing support to staff. Measurements used by the university to determine its understanding of staff wellbeing and its success in this area, included broader concepts such as control and work demand. For example, the extent to which staff perceive they can influence and have choices about the tasks allocated to them and how they view their current workloads. Other notable measures included organisations meeting the criteria required to be awarded the Workplace wellbeing charter, absence management figures, the levels of emotional wellbeing , feedback from staff exit interviews and the engagement of staff in pro- social behaviours, such as volunteering to develop others in the organisation.

An example of the measurements identified in a policy is listed below:

**Extract K:** *“The following form the measures for the purposes of the monitoring of health and well-being, as a means of identifying any management actions that are required: Recording, monitoring and analysing absences Reviewing exit questionnaires, with exit interviews where appropriate Reviewing the use of the Occupational Health, without breaching confidentiality Analysing staff surveys in relation to staff well-being Monitoring information on the management of return to work Reviewing actions taken as a result of the stress risk assessment.”*

#### **6.4.6 Managers’ roles in supporting staff wellbeing**

All the policies recognised the importance of both staff and managers working together to improve staff wellbeing. However, in all the policies, Managers were identified as essential to the delivery of the staff wellbeing policy, in terms of helping to support a work climate where staff felt valued and regular discussions about wellbeing were encouraged. If concerns were identified by staff regarding their wellbeing, they had an important role in advising managers of their experiences and the support required. Moreover, the policies implied that managers had a responsibility to support staff

wellbeing through discussions and identifying the appropriate support available in their institution to enhance staff wellbeing. One university stated:

**Extract K:** *“Managers have a critical role in the implementation of this Policy and Procedure within their respective School or Professional Service, in particular promoting a supportive and inclusive environment, which includes: • Regular and consistent communication with staff, ensuring that there are sufficient opportunities for individuals to raise any health or wellbeing matters with their line manager.”*

It was unclear in many of the policies if training was offered to managers to implement these policies, and only few (n=3) HEIs gave specific examples of how this should be done. The reasons for this are unclear and may be related to the availability of wellbeing courses, to support managers in promoting wellbeing. However, there were exceptions, including the development of a wellbeing toolkit to inform managers' understanding, as outlined in extract L:

**Extract L:** *“We have developed a Wellbeing Toolkit for managers to help them carry out team and individual wellbeing reviews. The purpose of a Wellbeing Review is to identify and prevent or control the potential causes of work-related wellbeing concerns. The toolkit provides advice on how to conduct a Wellbeing Review following a step-by-step approach.”*

Seemingly, there is an absence of how wellbeing issues can be addressed in staff appraisals, and most of the wellbeing policies did not explicitly identify this as an area for action within their staff policies.

## 6.5 Type of services to support staff wellbeing in university

This study provides the most comprehensive picture of wellbeing services provided by universities to support staff wellbeing. This driven by their legal obligation under the Health and Safety Act 1974 and duty of care to employees. The available research has emphasised the impact of stress on staff productivity and health. Broadly speaking the services provided to support staff wellbeing fall within three areas: primary(e.g., subsidised gyms, chaplaincy and prayer room, cycle to work schemes); secondary ( e.g., mental health first aiders, staff wellbeing weeks and staff surveys ; Tertiary( e.g., occupational health, counselling services, phased return to work)A full list of the services provided is presented in Table 10‘Type of Services’, with each service being categorised as a primary, secondary, or tertiary intervention.

**Table 16. Types of services to support wellbeing**

Primary interventions	Secondary interventions	Tertiary interventions
Mindfulness courses	Healthy food options in the canteen	Occupational health *
Cycle to work schemes	Dignity at Work Advisors	Counselling services **
Gym (subsidised)	Staff Wellbeing Week	(Employee assistance programme, Vallidum)
Staff membership	Staff development Weeks	The big white wall
Chaplaincy and Prayer room	Mental Health First Aid Training	Complementary therapist service
Flu jabs	Equality, Diversity and Inclusion workshops.	Physiotherapy and chiropractor service
Mini health checks	Staff Survey	Phased return to work
Health Cash Plans	Volunteering Schemes	Annual health screening for blood pressure and body fat
Staff/Student choir	Personal development reviews	
	Peer networks to offer support to staff	
	Coaching and mentoring	
	Mandatory Courses	
	Work life balance policies	

*Key \*\* and \* most reported services.*



The most frequently offered services offered by the institutions are occupational health services and counselling interventions. Access to services was free for all users but restricted to staff members and students.

#### **6.6 Total staff referrals to services where wellbeing was a primary reason.**

A noteworthy feature that emerged when asking for this information was the extent to which this data was reported as not being recorded or unavailable (n=29), as the criteria used for logging referrals did not include the term 'wellbeing'. Universities reported that they did not routinely record data at the level of granularity requested or indicated the number of staff referred and their reasons is not routinely collected or is not held centrally. As one institution stated, ' they do not record the reasons for referrals, *so we would not be able to identify referrals where staff wellbeing was a primary reason.* '”.

In contrast, some institutions could more easily provide the data requested. However, where this data was available it suggests that more referrals were received for occupational health(OH) support. Extract N and O below show that the general trend was a higher level of referrals were received for OH support. Many of these referrals were made by managers with a smaller number of staff making self-referrals( please see extract O).

**Extract N:** *“During 2018: 190 referrals to see Occupational Health Nurse or Physician, 3 referrals for physiotherapy, 46 referrals for counselling.”*

**Extract O:** *“Referrals of staff to Occupational Health Service by University Departments where a primary reason was staff wellbeing: 218 Management referrals· 3 On offer referrals (prior to taking up employment)· 54 Self referrals.”*

The absence of these data raises some challenges for the effective evaluation of the wellbeing services provided to staff to support their wellbeing and to determine the extent to which staff feedback about the services received is recorded, if staff referral numbers are unclear.

### **6.7 Staff take-up (number) of each service offered to support wellbeing.**

Universities, when asked for information about the staff take-up of each service to support staff wellbeing, again indicated that this information was not routinely available. They raised concerns about the need to uphold the confidentiality of staff and the resources that it would take to provide information for this request. From the data received ( see extract P, below) it suggests that the take up of counselling services(face to face counselling) has increased year on year. For example, in 2015, 78 face to face counselling services were recorded compared to 103 face to face counselling services in 2018.

#### **Extract P**

*2017. 50 phone calls to the Employee Assistance Programme (MH related) 12 face-to-face counselling Cases, 103 Face-to-face counselling Cases via In-house counselling service*

*2016. 30 phone call to EAP (MH related). 14 Face-to-face counselling Cases via EAP 76 Face-to-face counselling Cases via In-house counselling service*

*2015. 27 phone calls to EAP(MH related) 12 face to face counselling Cases. 78 Face-to-face counselling Cases via In-house counselling service.*

### **6.8 Other FOI data: A summary of staff wellbeing policies**

This study analysed university policies on staff wellbeing to gain insight into how wellbeing is defined, and the support provided to staff. When undertaking the analysis, policies were excluded if they did not specifically refer to the wellbeing of staff in the

title or introduction. Nine questions (see below) were used to interrogate these policies in detail, to ensure a consistent approach was adopted. It would appear that where specific policies on staff wellbeing existed in organisation, there is an inherent understanding in the benefits of staff wellbeing for organisational performance, the development and resilience of staff working in universities and the importance of staff controlling their own wellbeing at work. The availability of the intervention will be influenced by the organisations duty of care to staff and the legal requirements concerning staff at work , via existing legislation, including the Health and Safety at Work Act 1974 in the UK . This is important given evidence of staff reporting increasing stress (Mudrak et al, 2018) (see Chapter 1) and was identified as an important element of staff wellbeing, as evidenced from the staff interviews and survey responses. However, how this was operationalised by institutions in terms of the conceptualisation of wellbeing, the interventions, and structures available to support their vision varied across each institution. Following the review of each policy, an inductive approach was taken to the identification of emerging themes as identified below. The implications of the findings are considered within the discussion section and recommendations offered for the wellbeing of staff in higher education.

**A summary of each policy included in the analysis is provided below**

### ***6.8.1 How is wellbeing defined?***

Several of the universities specified that wellbeing is defined by the provision or creation of an environment which promotes healthy lifestyles and provides the resources for employees to reach their full potential. One of the universities defined wellbeing as the state of being happy and having a good quality of life. Some of the universities, however,

were not able to provide a working definition of wellbeing, although they acknowledged the importance of wellbeing in the workplace

### ***6.8.2 What measurement is the University using to understand wellbeing?***

Some universities utilised staff absence rates, attendance data, and retention figures to measure staff wellbeing. such as commitment, achievement, and excellence to gauge staff wellbeing. Other measures included the perceived levels of control, work demands, the support available to them, staff relationships, and others working towards or gaining a Workplace Wellbeing Charter National Award for England as a measurement of wellbeing.

### ***6.8.3 What is the problem the policy seeks to address?***

Some universities' policies identified staff illness, attendance, and absence as issues to be addressed. The others sought to improve staff wellbeing and mental/physical health directly.

### ***6.8.4 How does the policy seek to address this issue?***

The policies revealed that the universities sought to address the identified issues in a variety of ways. Most policies stressed cooperation with the different levels of the university and clear communication. Some of the policies stressed the responsibility that both staff and managers have for implementing the policies and being proactive. The policies also detailed the various internal and external measures to improve staff wellbeing.

***6.8.5 Who was involved in the development of the policy? How have they contributed to the development of the policy?***

Most universities, except for some notable examples( two institutions) were unable to clarify in their policies who was involved in the development of the policy or how these people contributed to its development.

***6.8.6 Who is affected by the policy?***

All universities were able to recognise that staff would be affected by the policies, with some universities stating that students would be indirectly positively affected by improved staff wellbeing, and one university stating that the wellbeing policies will contribute to their university's goals of creating a healthy working environment.

***6.8.7 What is the expected short-term and long- term outcome of the policy?***

Most universities were able to identify the short- and long-term outcomes of their policies. Several anticipated that staff wellbeing and attendance would be improved, many anticipated that they would get a better understanding of wellbeing, the causes of workplace stress and sickness, and which interventions/measures will need to be taken to improve staff wellbeing and sickness.

***6.8.8 What resources /capacity are available to implement the policy?***

Most universities were able to identify a variety of external and internal resources to help with the implementation of their policies. Examples of resources include, providing managers with appropriate training, workshops, and wellbeing schemes, in-line managers working in partnership with staff and utilising services available at the university, using

external support such as the school's occupational Health Service and the Employee Support Programme.

#### ***6.8.9 Is there a date by which the policy is to be reviewed?***

Most universities did not give a date for when their policies would next be reviewed, and it was generally unclear what arrangements were in place to implement these policies, who was responsible for them, and who was consulted about these policies. For example, a university in the West Midlands provided clear information about when the policy would be reviewed, and how and to whom the reports were circulated. Another university in the West Midlands was one of a few universities to provide information about who was responsible for the implementation of their policy.

### **6.9 Chapter Summary and Discussion**

Using FOI requests, this chapter identified the wellbeing policies and services implemented by universities. The information obtained from the FOIs indicated that many HEIs did not have specific policies to address wellbeing, and managers often do not receive training to implement wellbeing policies. As the data above indicated, the absence of data related to the staff uptake of wellbeing services, the reasons for their referral to wellbeing services, or how staff were involved or engaged in wellbeing policy discussions. Therefore, although many of the HEIs offered various primary, secondary, and tertiary services to support wellbeing, it is not clear if staff are benefitting from these services or if the services, they provided are wanted by staff. Overall, the FOIs indicated that, whilst universities may routinely attempt to implement wellbeing policies to improve staff wellbeing, HEIs' wellbeing responses are characterised by inadequacy and vagueness in some of the processes and policies.

This study has given insight into how the concept of wellbeing is articulated and communicated in current staff wellbeing policies. The research has also contributed to the knowledge about intervention and services made available to support staff wellbeing. In conclusion this chapter offers new knowledge about what is currently been done(or not done) to support staff wellbeing and provides a basis for future research concerning the lack of recorded information concerning the take-up of wellbeing services and how this is related to staff views about the quality of services received.

## **Chapter 7. Discussion**

### **7.1 Introduction**

The final chapter in this thesis includes a discussion of the findings from each of the studies (See Chapters 4, 5 and 6). The findings are considered in relation to the research question, to determine the extent to which it has been addressed. In this chapter, reference is made to literature on staff wellbeing in higher education to evaluate how the findings from this study either support or contrast with it. The collated results are discussed to consider what contributions the study has made to the literature on staff wellbeing, as well as to the Staff Wellbeing in Higher Education Framework developed earlier in the thesis (See Chapter 2b). A reflection on the overall results is shared to propose recommendations for practice and future research. An analysis of the strengths and limitations of the research with reference to GRAMMS (See Chapter 3) is provided, and the chapter concludes with a personal reflection of my PhD journey.

### **7.2 Revisiting the research questions and methodology**

The thesis intended to answer the following research question: What is wellbeing in higher education and how can it be managed (See Chapters 1 & 3)? A mixed methods sequential research design was adopted. The research commenced with a qualitative semi-structured interview study of staff working in higher education, followed by a survey, before concluding with a study utilising a Freedom of Information request approach. As mentioned in Chapter 4, the semi-structured interviews included a total of 21 interviewees, and aimed to gain insight into the views, attitudes, and feelings of staff regarding their wellbeing experiences in the university context. The second study comprised of a survey, sent via email to staff working in higher education (See Chapter 5). A total of 442 responses were received and, following a process of data extraction for



missing data, 299 responses were analysed using SPSS. The purpose of this phase was to understand the factors impacting on current and future staff wellbeing experiences in higher education. The results from the final study, utilising a Freedom of Information request, were based on 122 responses from universities in the UK (See Chapter 6). The FOI request examined university policies on staff wellbeing, and the services and roles provided to support it.

### **7.3 Findings from the Semi-Structured Interviews**

Outlined below is a summary of the findings from the interviews undertaken with 21 staff working in higher education. The findings are presented for each of the seven themes that emerged from the qualitative analysis, and which are connected to my overall research question and objectives.

The themes were:

1. *Dimensions of wellbeing* (the salient features of staff wellbeing)
2. *Fragility* (the factors that have challenged wellbeing and the extent it can be repaired)
3. *Outsider from within* (feelings of not belonging or being valued)
4. *Duality* (the oscillating and changing nature of wellbeing)
5. *Support systems* (the support strategies organised by and for staff)
6. *Care and concern* (organisational) (the university's actions to address staff wellbeing)
7. *Creativity and growth* (the opportunities to grow and flourish)

## **7.4 Staff perceptions of wellbeing**

Below is a summary of the themes identified from the semi-structured interviews.

### ***7.4.1 Dimensions of wellbeing***

Seven themes were identified from the interviews. Firstly, that there are multiple dimensions or features related to wellbeing. **Dimensions of wellbeing** emerged as a key theme for explaining the important and unique features of wellbeing in higher education. Staff commented on the value their role has given to others, the profession and the wellbeing gained. Staff felt that they made an important contribution to higher education and to the country. In some cases, staff remarked that teaching, and fostering the development of, new professionals was a source of pride. This features/dimensions include positive aspects of wellbeing which is currently limited in research on staff wellbeing.

However, they also remarked that their wellbeing was largely ignored by the university sector and frequent comparisons were made with the perceived higher level of attention given to student wellbeing.

Staff also commented that if their managers gave more priority to their wellbeing, this would help to create a work environment that was balanced and had reasonable limitations in terms of workloads. This aligns with the literature where Sang (2015) noted that job stress is related to work demand and workloads. Similarly, research by Kinman et al.,(2008) indicated that support and commitment from management contributed to staff wellbeing; and Straaten et al. (2006) supports the importance of managers valuing the contributions of staff in promoting staff wellbeing. The literature has shown that staff

are feeling the impact of increasing student numbers and workload, making many staff susceptible to stress. This also emerged as a theme from this study.

#### ***7.4.2 Fragility of wellbeing***

Staff described their wellbeing as susceptible and fragile and under threat from several directions (i.e., **fragility of wellbeing** theme). It was suggested that external influences such as political, financial and workload factors can affect working practice and potentially cause wellbeing to be diminished. It was suggested that this sense of fragility could be managed by overhauling negative work cultures and having in place a management structure that is committed to staff wellbeing. The findings are in line with earlier study (Dreyer et al., 2010; Teixeira et al., 2021) that have shown staff are susceptible to stress and burnout. For some staff, these experiences were compounded by being older, or Black, Asian, Minority and Ethnic staff often questioning if they belonged in higher education.

#### ***7.4.3 Outsider from within***

Outsider from within emerged as a significant theme, where some staff expressed feelings of not belonging in the university sector and remarked that this impacted on their wellbeing at work. This included accounts from BAME staff, who sometimes felt ignored and not visible within the organisation. This supports the study by Mahony and Weiner's (2019) which found that BAME staff bore the brunt of unfair working practices much more than their white colleagues did. They also observed that BAME staff were assumed to be less competent than white staff, indicating that greater communication is required between managers and BAME staff to redress this imbalance.

Similarly, accounts from ageing/older staff suggests they are questioning their sense of belonging in a changing higher education sector supporting Mulrooney and Kelly (2020) who found that staff identified belonging as important to their wellbeing. The findings from this research adds nuance to the experiences of older staff who were expressing feelings of reduced belonging due to the pace of the role. However, further research is required on ageing staff in higher education and the relationship to belonging.

#### ***7.4.4 Duality of wellbeing***

This theme captured the changing nature of staff wellbeing, where they expressed feelings of positive wellbeing whilst at the same time experiencing episodes and periods of negative wellbeing. From the staff accounts, the majority were questioning whether it was possible to remain in higher education in light of the changes impacting higher education. For example, all staff gave positive feedback about the impact of teaching on their sense of wellbeing. They felt that contributing to the development of others was an important facet of wellbeing.

However, there were several factors identified as contributing to a decrease in their wellbeing. These related to the following areas: the culture of the organisation, which is focused on commercialisation, the perceived level of management commitment to employee wellbeing, workload demands and workload allocation processes. In particular, the lack of management commitment was felt to be a factor that can diminish wellbeing. The research by McMurray et al., (2010) shows that a lack of leadership commitment can negatively affect staff morale, thereby impacting wellbeing. Equally of importance was the factor of workload on staff wellbeing. They talked about the importance of work-life balance and concerns that at present there were limited opportunities for work-life balance. This finding aligns with previous studies, which highlighted the importance of

reasonable working hours and the effect of the work-life balance in higher education (Fetherston et al., 2021). Similarly, according to JD-R theory, the impact of job demands, and the availability of job resources, if not balanced has the potential to result in stress, therefore, consequently impacting on home-life commitments and on their physical health (Dryer et al., 2010). Furthermore, research has shown that the presence of job resources can enhance engagement, and conversely, the deficiency of job resources can create cynical attitudes to work (Lewig et al., 2007).

#### ***7.4.5 Support Systems***

Staff identified that the availability of support from colleagues with whom they shared a common goal, vision, and focus, often enhanced their sense of their sense of wellbeing. They identified situations where this had worked well. Their examples tended to be organic and informal in nature. This feature/dimension includes positive aspects of wellbeing which is currently limited in the research on staff wellbeing. The findings also indicated that greater communication between staff in the team is likely to increase wellbeing and mediate the effects of stress. This would support the findings by Straaten et al. (2016) who noted that the availability of support services and being valued by the organisation as important for staff wellbeing. The findings from this study extends beyond support staff and includes the accounts of academic and professional staff.

#### ***7.4.6 Care and concern (organisational)***

Staff emphasised the importance of having effective arrangements in place to support wellbeing, such as access to quality counselling support and workload planning processes. However, some staff commented that they were unwilling to use such services due to issues of service quality and a desire to achieve work-life distance. Nevertheless, improved collaboration between staff in HE and their managers to design services to

support wellbeing can only be beneficial. Having services that were flexible and responsive to remote working was also felt to be important. This would support previous research by (Fetherston et al., 2020). It would suggest there is a need for further investigations into discussing the relationship between staff usage of the interventions to support staff wellbeing.

#### ***7.4.7 Creativity and growth***

Staff expressed that there were constraints on their time due to the work processes and demands, which is supported in the study by Mudrak et al. (2018). Despite these restrictions, staff actively sought out time to find opportunities for professional development. Staff highlighted the importance of having opportunities to be creative at work and to develop and grow. Managers were identified as being important in this process.

In summary, this study has identified several aspects/dimensions of wellbeing amongst staff in higher education both positive and negative. These dimensions co-exist and impact their wellbeing in a dualistic way. The findings have shown that staff wellbeing is associated and impacted by many factors that are entangled with the work environment, including, work demands, work-life balance, the lack of available and trustworthy help, management commitment and support, job satisfaction and support from staff.

#### **7.5 Findings from the survey data collected from staff in universities**

From the interviewees several hypotheses could be identified. This section considers the findings from the survey data. The results are considered alongside the available literature about staff wellbeing.

### ***7.5.1 The factors associated with staff wellbeing in higher education***

This study investigated the relationships between staff wellbeing, staff experiences in the HE context, the organisational culture, the characteristics of wellbeing, wellbeing policies, services to support staff wellbeing, responsibility for wellbeing, and the future of staff wellbeing in higher education.

The hypotheses of the study are listed below:

- **H1** Current and future wellbeing experiences of men and women will differ in Higher Education
- **H2** Current staff wellbeing experiences are positively related to future staff wellbeing.
- **H3** Anticipated future staff wellbeing is positively related to university commitment and communication about staff wellbeing in the organisation.
- **H4** The existence of a wellbeing culture in the university is positively related to future wellbeing .
- **H5** Positive staff experiences of the interventions to support their wellbeing are positively related to future wellbeing, and vice versa.
- **H6** Current staff wellbeing is negatively related to workload demands and stress.
- **H7** University responsibility for staff wellbeing is positively related to current wellbeing.
- **H8** Staff experiences of wellbeing policies are positively related to their future wellbeing

- **H9** Creativity and opportunities for learning is positively related to future wellbeing
- **H10** Belonging, feeling valued, security and trust are positively related to future wellbeing
- **H11** Job roles is negatively related to anticipated future wellbeing

### ***7.5.2 The current and future staff wellbeing of men and women will differ***

The survey indicated that there were no significant differences in wellbeing between men and women leading to a rejection of the hypothesis. This does not align to previous research that found that female teachers and professors experiences lower levels of wellbeing (Kell, 2016). It is probable that the reason for this finding is the comparably smaller sample of males within HE (and who completed the survey), and women are in in work areas associated with higher stress (post-docs and early career-professors). However, it is also possible that gender alone is not a large enough determinant of wellbeing, and that the influence of role, minority status may have masked the influence of gender.

### ***7.5.3 The effects of current staff wellbeing experiences are positively related to future wellbeing***

The findings indicated that there is a strong and positive correlation between current wellbeing experiences and anticipated staff wellbeing ( $R=0.789$ ;  $p<0.0005$ ). Therefore, suggesting that the current experiences of staff is related to how they feel about the future and their career. This hypothesis originated from the semi-structured interviews where staff talked about their wellbeing declining since joining the university sector. This findings is supported by current literature that indicates that the current working



conditions in higher education is causing staff to leave the university( (Kinman & Jones, 2008b). The findings suggests the potential importance of staff engagement for their long term involvement and wellbeing in Higher Education (Sang et al., 2013).

#### ***7.5.4 The effect of wellbeing culture in the university is positively related to future wellbeing***

This hypothesis originated from the interviews with staff, with the majority (over 15) referring to a work culture that did not promote wellbeing and their views about the current process available to support staff wellbeing. The findings give support to the influence of culture, on wellbeing. Therefore, suggesting that organisation that exhibit a wellbeing culture will positively effect staff wellbeing (current and future wellbeing). This finding is supported by the research by (O'Brien & Guiney, 2021) that described a 'bad' culture of management that did not support wellbeing.

#### ***7.5.5 The effect of. positive experiences of interventions to support staff wellbeing are positively related to future wellbeing, and vice versa.***

The study found that future wellbeing and positive experiences of the interventions available to support their wellbeing has a positive and strong correlation. Therefore, the availability and quality of interventions has the potential to affect the future wellbeing of staff negatively/positively. However, it is probable that experiences of the intervention may also be affected by leadership commitment to support wellbeing. The effect of leadership and commitment in higher education were noted by Kinman et al. (2006). who reported staff gained support from their immediate managers, which helped to support their wellbeing. Yet concerns have been expressed about academic leadership, in particular a lack of managerial competence (Goodall, 2006). Further interests have been raised about the temporary nature of leadership (Strathe & Wilson, 2006). Therefore,

management support is important for the wellbeing of staff working in higher education, and the approach and competence of the managers to support the wellbeing of staff is an important aspect of interventions to support staff wellbeing. Interestingly, whilst some staff in the semi-structured interviews provides further insight into the services provided by universities and their willingness /reluctance to use the services (See Chapter 4), the availability of services to support staff is an important determinant of staff wellbeing. The findings such that good leadership, well-designed interventions, and feeling like their wellbeing is taken care of seems to have a positive relationship on how staff think about their wellbeing.

#### ***7.5.6 The effect of current staff wellbeing is negatively related to workload demands and stress***

A spearman's correlation showed current wellbeing in terms of workload demands reveals a positive strong correlation ( $R=0.502$ ;  $p<0.0005$ ). Furthermore, the results of a multiple linear regression to examine how staff future wellbeing can be predicted by their current wellbeing, work demand/stress and support from staff explained 69% variance. With all contributing significantly to the model. This result supports previous research about the impact of workload demands and stress on staff wellbeing. In Mudrak et al.'s study (2018), 23.7% of staff reported that they experienced stress 'all the time' or 'most of the time', and there was a 46% variance rate for the effects of stress. The findings from this study suggests that other factors other than stress may be impacting staff wellbeing in universities.

### ***7.5.7 The effects of university responsibility on staff wellbeing is positively related to current wellbeing***

A Spearman's correlation showed university responsibility on staff wellbeing has a negative weak correlation, leading a rejection of the hypothesis. This does not align with previous research which suggests that Universities should take the lead for staff wellbeing.(Newton et al., 2016). It is probable that the reason for this finding is that staff recognize their own role in supporting wellbeing and may be caution about universities having 100% responsibility for wellbeing. However, it is probable that effective coping strategies and profiles that do not endanger the health of staff, is a determinant of current staff wellbeing ( Melin et al., 2014).

### ***7.5.8 The effects of wellbeing policies are positively correlated to future wellbeing***

A Spearman's correlation ( $\rho=0.471$ ;  $p>0.0005$ ) showed that future wellbeing and experiences of wellbeing policies has a strong positive correlation. To my knowledge there has been no previous research on the effects of wellbeing policies on anticipated future wellbeing. There is a need for further research to investigate these effects.

### ***7.5.9 The effect of creativity and opportunities for wellbeing is positively related to future***

A Spearman's correlation analysis showed that creativity and learning and opportunities and future wellbeing has a weak and negative correlation ( $\rho=-0.176$ ;  $p<0.0005$ ). The association between opportunities for development and creativity was a clear finding in the semi-structured interview yet is a weak and negative.

### ***7.5.10 The effect of belonging, feeling valued, security and trust are positively related to current and future wellbeing***

A Spearman's correlation showed that belonging, feeling valued and trust and future and current wellbeing has a negative and weak correlation. A sense of belonging emerged as an important aspect of staff accounts yet is weak and negative. ( $R=-0.072$ ;  $p>0.0005$ ).

### ***7.5.11 The effects of job role are negatively related to anticipated future wellbeing***

A MANOVA showed that job role has an overall significant effect on 13 of the 18 dependent variables. Most notably, the significant effect of job role on future wellbeing, indicated that senior lecturers/lecturers have lower anticipated future wellbeing compared to support staff and managers.

## **7.6 Other data from the survey (free text, Q17 and Q22)**

Two open-ended questions were also evaluated. The responses to questions 17 (What else do you think is important to your wellbeing at work?) and 22 (Please provide any additional comments about the future of staff wellbeing?) were analysed, and the key themes identified from them (See Chapter 5) are summarised below.

The response to the free text relating to question 17 showed that four constructs emerged, **coping strategies**, Employee Engagement and Flourishing, Organisational **commitment** **Quality of work life**. The staff comments related to the importance of being valued, the organisation respecting and valuing their time, flexibility, having a sense of purpose and contributing to the organisation. Yet comments were mainly negative and there were no positive comments from respondents about their experiences of being respected and valued. From the staff accounts, the impact of diminishing resources on the stability of job, impending job cuts and the introduction of zero-rated contracts emerged as areas of

concern. These comments are supported by literature on job security, organisational commitment, and engagement (see Chapter 2)

Meanwhile, in the responses to question 22, which asked about future wellbeing, identified four broad constructs emerged, **job demands, job satisfaction, marketisation and organisational commitment**. All comments were negative and included, increased workloads, the effect on their mental health, depleting resources.

The majority of the respondents' comments were related to the construct of marketisation evidenced by financial and business models that focused on increasing student numbers. The top four factors felt to be important for anticipated future wellbeing as changes and risks facing higher education, increasing workloads and demands, the impact of the above on staff wellbeing and depleting resources.

Staff identified their future wellbeing negatively due to concerns about work demands and pressures. It was suggested that the focus of attention should be on workload management processes (See Chapter 5 free text responses). It was also suggested that managers should plan for a changing workforce, due to the ageing staff population in higher education.

## **7.7 Findings from the Freedom of Information study**

From the first two studies, it is clear that university policies regarding wellbeing and positive experiences with university and wellbeing are crucial. It also appears that these are not available. The final study looked at what universities offer to support staff wellbeing and identified areas for improvement based on the above.

From 122 responses received, 35 institutions have a specific policy on staff wellbeing, which represents a small proportion of the total figure. This might be that institutions also

have policies that contribute to wellbeing such as flexible working. Furthermore, universities have been subject to several changes that have seen greater attention given to marketisation and commercialisation of the institution, with emphasis given to the student as the consumer and consequently it has led to less focus on the wellbeing of staff.

There was a designated lead, and this was primarily held by people in senior roles- Directors of Human resources and vice and pro-chancellors. This suggest that wellbeing is being recognised as important priority area. It is of note that the many leads were Directors of Human Resources, whose primary purpose will be the serve the needs of the organisations and not necessarily prioritize individual needs regarding their wellbeing. Therefore, there may be a value in an independent wellbeing officer being appointed or given allocated hours to champion this important role. Furthermore, the presence of a supporting action plan on staff wellbeing alongside the existing institutional wellbeing policies will help to support the effective implementation of the policy. Additionally, there were varied number of indicators used to measure staff wellbeing including staff ability to influence and make choices, attaining a workplace wellbeing charter mark, absence management figures, and feedback from staff in their leaving/exit interview. This supports findings of (Pollard & Lee, 2003b) regarding indicators lacking consistency and the value of a set of agreed indicators across the university sector. Yet, over 19 years later the findings from the study gives support to the lack of consistency regarding indicators.

Managers were identified by the staff interviewed and within the organizational policies as central to supporting staff wellbeing in the policies reviewed. However, it was not clear if training was offered to managers to promote staff wellbeing and what this should include. This finding supports existing evidence that learning, and development is important to wellbeing (Watson et al, 2018).

A surprising finding from the FOI study is related to the fact universities were unable to report/quantify the number of staff that were referred for a service and staff take of support because wellbeing was not identified as a criteria for monitoring staff who accessed support. The lack of information may be due to institutions not recording the reasons by the general criteria of wellbeing. The systematic review did not reveal existing research into interventions on staff wellbeing.

In summary, the data in this study highlighted a number of issues relating to staff take up of services and concerning the recording of the referral rates. It would appear from the findings that organisations did not routinely record data on the take up of support services. There was evidence of senior leadership roles holding responsibility for wellbeing in all but three of the universities. Only 35 universities had a specific and dedicated policy to support staff wellbeing. Many of these policies demonstrated a lack of clarity in terms of defining staff wellbeing and health. Furthermore, there was an inconsistent approach taken to the inclusion of the staff, whose wellbeing the policies are supposed to support, in their design and monitoring.

## **7.8 Thesis overview**

The thesis offers a valuable contribution to the methodological and theoretical approaches to understanding wellbeing in higher education and to explaining universities' interventions to support staff wellbeing. The first part of this chapter provided an overview of the research undertaken to answer the question: what is staff wellbeing in higher education and how can it be managed? Based on the combined data and findings from the three separate studies, I proposed the definition of staff wellbeing as follows:

“Staff wellbeing in higher education is a broad and dynamic construct that is influenced by University wellbeing processes and staff appraisals of their wellbeing; as well as

inclusivity and diversity related issues and behaviours that together create fulfilment, a sense of community and belonging at work, and wellbeing” (See Chapter 2).

After careful consideration and investigation of the literature, the study put forward a framework of staff wellbeing in higher education (See Chapter 2). This framework was validated by the staff experiences outlined in the semi-structured interview study (See Chapter 4) and the survey results, in terms of the characteristics of wellbeing identified as important. These included a sense of belonging, being treated fairly and with respect, and being trusted to do their job.

## **7.9 Reviewing the literature**

The focus of wellbeing development in higher education has previously been on the issue of stress and burnout of staff, along with the sources of stress that are related to changes in the higher education sector and government policies (Bell et al., 2012). The present research aimed to understand how staff perceive their wellbeing, and the various dimensions of staff wellbeing in higher education, in order to understand the relationship between staff wellbeing and the higher education context.

This research extends existing understandings of wellbeing to consider the positive and negative sides of wellbeing involved in wellbeing appraisals (See wellbeing framework, Chapter 2) and wellbeing processes (wellbeing framework, Chapter 2). This study’s conceptualisation of wellbeing acknowledges that views held by individuals will change, and managers will need to maintain regular dialogues with employees to examine their wellbeing experiences, in order to ensure appropriate services and interventions are provided. Straaten et al. (2016) state that there is a need to explore the forces that enhance wellbeing in HE and to understand the processes that affect it. The staff wellbeing in higher education framework (See Chapter 2) presents an emphasis on the connection



between staff's personal appraisals of their wellbeing and the organisational processes impacting on their wellbeing.

### **7.10 Reflection on the unique contributions to wellbeing literature**

This study represented the first mixed methods study on wellbeing in higher education that is not discipline specific. The study focused on gaining insight into staff's own views about their wellbeing, and on investigating the university processes and practices involved in supporting staff wellbeing.

The studies focused on people in both academic and professional support roles, in order to identify any similarities and differences in their accounts of wellbeing. This approach was taken to allay previous concerns from the literature about the absence of non-academic accounts (Straaten et al., 2016).

The data provided from the universities in response to the Freedom of Information request offered an opportunity to appraise the responses to 5 specific questions on the support available to promote staff wellbeing(See Chapter 6). It also offered insight into the universities' approaches to services to support staff wellbeing through their policies (See Chapter 6). The policies communicated the universities' vision, aims and approach to understanding the wellbeing of their staff. The data also helped to highlight to what extent staff were involved in developing and monitoring the services intended to support their own wellbeing. The results of my study add to the existing knowledge of the processes and interventions used to support staff wellbeing (O'Brian & Guiley, 2019).

The data from my research has highlighted the importance of the role of positive affect in understanding staff wellbeing. The study by Akanni et al. (2021) demonstrates the importance of emotional intelligence, coping styles and support systems on staff

wellbeing experiences. The results from my study add to the existing knowledge of coping styles, used by staff to support their wellbeing in terms of informal networks.

The results outlined in Chapters 4 and 6 suggest that there are gaps in universities' current practices of supporting staff wellbeing. The findings relate to several areas. One area concerns the recording of information about the take up of wellbeing services and referrals for these services. Also, the level of involvement of staff in wellbeing policies is unclear, and the evidence from the FOI shows that staff are not routinely or explicitly involved in the development or review of these policies. Furthermore, there is evidence from the semi-structured interviews that staff experience reservations about using services provided to support their wellbeing (See Chapter 4).

#### ***7.10.1 Connecting the findings to the Staff Wellbeing in Higher Education Framework***

The staff wellbeing in higher education framework (Chapter, 2) has been evaluated in reviewing the findings in Chapters 4, 5, and 6. A brief overview of specific findings from each of the studies that aligned with the Staff Wellbeing in Higher Education Framework is provided below. Turning firstly to study 1 ( semi-structured interview) , the comments suggest there is an awareness of the services available to support staff wellbeing and in some cases, staff have accessed these services, albeit in exceptional cases and it was appropriate for universities to make these services available. Seemingly, this specifically aligns with the **Dimension of Wellbeing Processes**( University) and the associated elements of wellbeing interventions. However, conversely, the feedback from some staff suggests there is a reluctance to use the services available, instead they preferred informal support networks – which aligns with the Wellbeing Appraisal(Individual) dimension and the related element of support(informal/formal) provided by colleagues. This seemingly implies, here is merit in organisation working jointly with staff to identify the services

they feel are important to promote their wellbeing and aligns with the engagement and co-production element within the dimension of **Wellbeing Processes( University)**. Study 3(FOI) suggests that there is a commitment to supporting the staff health and wellbeing, however, only 35 institutions had a specific policy to support staff wellbeing, that said there is the articulation of supporting staff of wellbeing and health as seen in the policies reviewed, implying that the articulation and communication of wellbeing through policies is an important element of the **Wellbeing Process( University) dimension**. However, the information recorded about staff take up of services and referrals for services suggests that there are inconsistent evaluation processes across universities. Although this information is not routinely available in all institutions the importance of evaluation(review and assessments about the progress made) as part of university wellbeing processes aligns with the above Higher Education Framework and requires further investigation. Finally, study 2(survey) identified three factors explained anticipated future wellbeing'; current wellbeing, work demand/stress and the availability of support. The Wellbeing Appraisal dimension, of the proposed framework aligns to staff views about wellbeing and support(informal/informal). Furthermore, the influence of workload demand/stress aligns to the workload allocation processes(element) outlined in the **Wellbeing Process( University) dimension**.

Taking the above into account the findings from the studies (survey, semi-structured interview and FOI) supports the presence of two processes- Wellbeing Appraisal and Wellbeing processes. From the semi-structured interviews staff talked about the importance of a leadership and management team that promoted a wellbeing culture. However, it is clear from the staff accounts and survey (free text responses) this is an area that requires further attention. The staff accounts suggest that this may be difficult to attain given the current focus on commercialisation and business models seeking to increase student numbers and profit. Despite, the current context of higher education there

is an imperative for leaders within HEI to adopt a co-produced approach, including staff to in the development of strategies to improve their wellbeing. Additionally, staff were self-determined and engaged, finding solutions to problems and acutely self-aware of the challenges they faced in their role, and keeping feeling trusted by their managers and colleagues contributed positively to their wellbeing. Coping strategies were mentioned in terms of the value of informal networks (positive effect). However, there was clearly evidence of negative coping strategies, such as compensatory strategy profiles (regularly skipping lunch, bringing work home and working during holidays and weekends) (Melin et al.,2014). It is recognised that the JD-R theory and Workplace Climate for Demand have relevance for my findings and to the constructs of Quality of life, job satisfaction mentioned in Chapter 2 and 2a.

### ***7.10.2 The implications for practice***

From the findings of the semi-structured interviews, staff experienced positive wellbeing within their work environment. However, the staff also described their wellbeing as fragile, and they felt it could be diminished by university processes and interventions. These findings highlight the need for managers to engage in regular dialogue with staff about their wellbeing. These wellbeing discussions should be incorporated into existing processes such as team meetings, line management supervisions and annual appraisals. This would allow managers and employees to identify wellbeing concerns and agree on ways to promote staff wellbeing.

The findings from the semi-structured interviews point to the need for a wellbeing index, which would set out the important facets of wellbeing within the workplace and the actions required to promote it. The wellbeing index could be used by managers to ensure a consistent and thorough approach is taken to the wellbeing of staff. The wellbeing index

could then be re-evaluated at a future meeting with staff. The wellbeing index could be informed by existing indicators, such as, PERMA scale but would also require the feedback from staff concerning the elements/indicators specific to wellbeing in Higher Education. Furthermore, the findings from this study could help in the identification of wellbeing in the context of higher education.

A notable aspect from this research is the coping strategy communicated by staff. The creation of an informal network driven by staff spoke of creating and using their own informal networks of wellbeing. The creation of these informal staff wellbeing hubs provided opportunities to share strategies, ideas, and innovative thinking, as well as to offer each other support. Managers should designate within each team a wellbeing hub co-ordinator, with responsibility for facilitating informal wellbeing networks and forums in the workplace. However, it is recognised that the current culture of commercialisation and the business model approach is likely to continue for some time, a co-produced (between staff and management) strategy to improve staff wellbeing is still required.

### ***7.10.3 Implications for Universities***

The findings from the FOI demonstrate that universities are committed to staff wellbeing and understand its benefits. Some universities had specific policies on staff wellbeing. An analysis of these found that universities should give further clarification about who has been involved in the development of the policy and how they have contributed. To ensure the existing staff wellbeing policy is kept up to date, a date for it to be reviewed should be recorded on the document.

In light of the feedback from staff, universities should review the arrangements in place and obtain further input from staff about their experiences of the wellbeing services

provided. The feedback can contribute either to the development of new services, or to the revision of existing support. This will not be without its challenges as the current culture of commercialisation and the business model approach is likely to continue for some time. More specifically, a focus on the experiences of BAME and older staff should be prioritised by universities in light of the findings from the semi-structured interviews, in order to gain insight into their lived experiences and the solutions required.

This research adds to existing knowledge on staff wellbeing in higher education. The staff wellbeing in higher education framework (See Chapter 2) allows for a guiding frame in which universities, disciplines and teams can focus on wellbeing strategies. The framework offers guidance for reviewing the quality assurance arrangements in place to support staff wellbeing. This thesis provides practical guidelines for improving staff wellbeing for both universities and for individual employees. A publication outlining the staff wellbeing in higher education framework is being drafted for publication.

#### ***7.10.4 Research limitations and future research directions***

The present study is not free from limitations and the resulting implications for interpretation and generalizability are important to note.

Firstly, the research is based on self-reported perceptions of staff wellbeing, therefore common method bias cannot be ruled out (Podsakoff et al., 2003). Furthermore, to enhance construct validity, an already validated scale for wellbeing at work could be used. However, a construct validity analysis of the developed survey does suggest that the scales created were valid and reliable and could be further developed in future studies.

Secondly, the survey did not go through a rigorous process of survey validation with a varied group of external experts, and this should be addressed in future. Furthermore, the

length of the survey, with a total of 88 items, was identified as a potential reason for the high levels of missing data, with participants possibly dropping off due to length. The time it took to complete the survey, and the potential for disruptions to the respondents' focus, was a contributory factor to the high levels of missing data. To address this issue, imputation was performed, although it is recognised the survey had a large sample size.

To assess the quality of the research the GRAMMS (Good Reporting of a Mixed Method Study) (O'Cathain et al., 2008), was applied and is applied to each method used in this research. Furthermore, an overview was undertaken against the above criteria prior to completion of the final thesis. The quality of the research is assessed on 6 key questions (see chapter 3), on reflection the justification for the research has come out of a gap in methodological approaches to understanding wellbeing and justification for this approach could have been extended by including expert opinions on wellbeing. Furthermore, the priority and sequencing of the mixed methods approach was influenced by the need to complete my PhD within a specific time frame and personal issues, such as I was made redundant during the period of data collection, which influenced time scales. With respect to criteria 4, the sample, data collection and analysis the use of (Cameron et al., 2013; Cameron, 2011) newly developed extended MMR notation system provides a process for detailing sample size, data collection and the instruments which would offer greater clarity of the approaches taken in this area. Furthermore, when applying GRAMMS (Good Reporting of a Mixed Method Study) (O'Cathain et al., 2008), the study meets all 6 criteria of effective mixed method research. The justification of a mixed method approach to answer the research question was articulated within the overall methodology chapter (See Chapter 3). As mentioned in my reflections, some limits were noted due to the missing data, and issues relating to survey design/length.

The review of the literature has shown there is no clear definition of staff wellbeing. The study has proposed a definition of staff wellbeing however, further studies are recommended to examine the usefulness of this definition

The staff wellbeing in higher education framework relates to staff employed in public pre-1992 and post-1992 universities. Private universities such as Arden University and others working in an alternative work context were not included in the study. Due to the gap in this area, the transferability of this model to an alternative context requires further investigation.

Further research is required to understand the unique experiences of effects of working in Higher Education on the wellbeing of BAME staff and how universities have responded to this. This knowledge could be shared and combined with findings from this study to further insights into their experiences. It is also recognised that the sample comprised of predominately older and white staff working in higher education. Future research would seek to include a diverse sample of staff. However, it is acknowledged that nationally BAME staff represent a small proportion of the workforce in UK universities. (See Chapter 1).

Despite the limitations identified, the research has added to the existing knowledge about staff perceptions of wellbeing, and the understanding of employee approaches and interventions to supporting staff wellbeing.

## **7.11 Recommendations**

1. Development of a national staff wellbeing charter mark to provide incentives for universities to prioritise staff wellbeing. The award of gold, bronze or silver charter mark would encourage universities to signpost their good and excellent practice in



relation to staff wellbeing. In the UK, we have seen similar developments in the area of race equality and Athena Swan (focused on gender equality in HE).

2. The Office for students is a regulatory body for Higher Education (aims to ensure students receive positive outcomes), it could consider the development of a criteria to assess institutions performance on promoting the wellbeing of staff and students.
3. Development of a definition of wellbeing in Higher Education based on the definition proposed in the study and case study approaches to demonstrate the benefits of this definition.
4. In response to the findings that current staff wellbeing is associated to anticipated future wellbeing universities should speak to staff regularly about their wellbeing experiences and clarify what is required to improve it. Through the current staff survey process that exist in most universities, it is suggested that a wellbeing section is incorporated.
5. The semi -structured findings suggest that some staff fair less favourably in terms of wellbeing in Higher Education, namely Black, Asian and Minority and older staff, institutions should consider the development of opportunities to quantify and understand their specific experiences and any related plans for improvements can be part of the institutions wellbeing policy.
6. The results from the FOI emphasised that only 35 institutions had a specific policy on staff wellbeing. It is suggested that all universities develop a staff wellbeing policy to communicate their position on wellbeing, supported by an action which is monitored, and the progress communicated to staff at least twice in the academic year.

## 7.12 PhD reflections

My PhD journey commenced in 2014. It has been a long, enjoyable journey, punctuated by events that have impacted both the PhD process and myself significantly. These events have been immensely personal and had the potential to derail me from the studies. They include the illness of my husband, redundancy, and starting three new roles, one of which meant relocating to a new area with my family. During this time, I have had to learn to listen to my own body, which resulted in me taking two breaks from my studies. I was reminded of the importance of making time for people you love when my husband became seriously ill. My focus was naturally on him, and providing the support required for his journey back to good health. Now, at the end of my PhD, my two children are no longer children; my son is 18 and daughter 23 years old. They are both proud and relieved I have finished my PhD. I look forward to spending more time with them.

I have had the pleasure of working with some great colleagues, in my role as a senior lecturer, and it was during this time that I became aware of how changes in government policy impact on universities and affect staff wellbeing. I was concerned by the negative effect of these changes on staff wellbeing and became interested in how universities could attend to this problem. From my basic awareness of the conceptualisation of wellbeing when commencing my PhD, it was clear that staff perceptions of their wellbeing in higher education was largely absent from the literature. Furthermore, university definitions of staff wellbeing were not fully articulated, as noted by Newton et al. (2016). My literature search enhanced my understanding of the general literature available on wellbeing. The research by Woods (2010) informed the directions of my study, in terms of moving away from a binary notion of wellbeing, and the notion of ‘good’ or ‘bad’ wellbeing. This encouraged me to ask staff about their perceptions of wellbeing, in order to gain insight into their experiences (positive and negative).

As mentioned previously, the first study involved a semi-structured interview, which allowed me to understand the perceptions of wellbeing in higher education. I enjoyed undertaking the interviews and remain very grateful to the staff who gave up their time to share their feelings and opinions. I was struck by how open they were in their accounts, and by how much they wanted to be heard and to tell others about their experience, and more importantly, for the universities to understand and respond to their needs. The second study consisted of a survey based on a quantitative approach. This study provided a challenge in terms of applying the various statistical methods with SPSS. It also reinforced the importance of planning and testing when conducting survey, to avoid issues relating to missing data. I have learned a lot through the process and look forward to developing my skills in this area further. The final study was a Freedom of Information request. It was the first one I had undertaken, and I remain grateful to one of my supervisors, Prof Mark Griffiths, who suggested this as a research option. The FOI method allowed me to gain data related to universities' interventions, providing more depth, as I was able to access policies on staff wellbeing, as well as information relating to 5 questions about the interventions to support staff wellbeing. This information allowed me to evaluate the universities' aims, and the support provided to enhance staff wellbeing. At the same time it helped me highlight gaps for further enquiry. When considering the question of what next after my PhD, I am more determined than ever to pursue my career goals, as well as my aspirations to continue undertaking research and write journal articles linked to the topic of staff wellbeing, with a particular focus on equality and diversity. Notably, when reviewing the available literature, I was struck by the absence of the BAME voice in the accounts of staff wellbeing and in the descriptive statistics, and I am keen to address this omission.

### **7.13 Conclusion and final comments**

In this research a sequential mixed methods study was undertaken to understand how staff perceive their wellbeing and how it is managed. A framework based on two dimensions of wellbeing – wellbeing appraisal and wellbeing processes was proposed to understand staff wellbeing in Higher Education.

Based on the results it is concluded that staff wellbeing in Higher is fragile but there are informal and formal processes that have contributed to positive wellbeing in higher education. Staff wellbeing is shaped by a sense of community, the ability to make a difference to others, support from colleagues and personal development opportunities and the importance of the duality of wellbeing( where staff are continuously experiencing both positive and negative aspects of wellbeing) which are less studied components of staff wellbeing in Higher Education.

It was observed that there was a lack of willingness to use interventions to support wellbeing. This has been explained by the quality of the services available, the availability of services and staff reluctance for work to be involved in their wellbeing. Nevertheless, to maximize the potential for staff to make use of the services attention should be focused on understanding the barriers for the take up of services.

Finally, this study has proposed different research paths to better understand the connection between context and staff wellbeing in Higher Education. Furthermore, more longitudinal research is required to understand the factors that promote and hinder staff wellbeing in the context of higher education. Moreover, studies of comparative groups such as teachers in schools and further education institutions will determine if the current findings are specific to Higher Education or can be generalizable to other teachers.

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## Appendices

### Appendix A. Ethical Approval (Semi- structured interview phase 1)

From: BLS Research Grants  
Sent: 06 July 2015 09:30:49  
To: Douglas, Vida 2013 (PGR)  
Cc: Muszanskyj, Anton  
Subject: APPROVAL Ethical

Dear Vida

Message sent on behalf of the College Research Ethics Committee

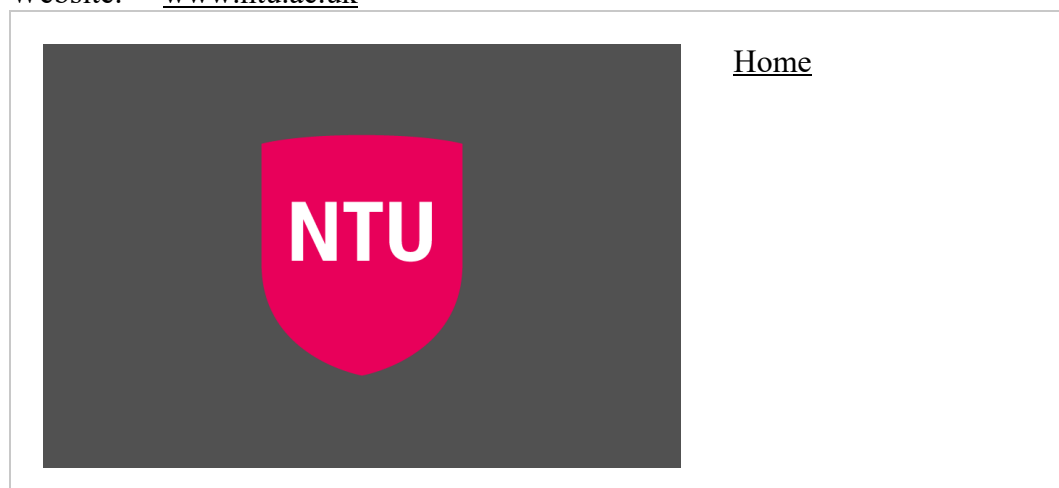
Thank you for your recent submission (No. 2015/09) to the College Research Ethics Committee (CREC) on 28 January requesting ethical clearance for the project entitled: A mixed method study of staff wellbeing within the context of Higher Education.

I am pleased to inform you that the CREC is happy to confirm that this application has now been approved

The committee wishes you well with your research.

Yours sincerely  
Kay Wheat  
Chair CREC

Ruth Russell-Jones  
College Research Support Administrator  
College Research Support team, Business, Law and Social Sciences, Nottingham Trent University, Nottingham, NG1 4BU  
Direct Tel: +44 (0)115 848 4391  
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Location: Chaucer Room 4704  
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## Appendix B. Interview Schedule

### N0552646 – RSCH124 leading to PhD in Social sciences Staff Wellbeing in Higher Education

<b>Participant ID Code:</b>	<b>Age:</b>	<b>Gender:</b>
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This interview will be a self- assessment of staff wellbeing in Higher Education and how organisations have responded. The following broad areas will be covered?

#### **Staff experiences/perceptions of 'wellbeing' in Higher Education**

Q1. If you had to describe what wellbeing means to you, what would you say? Prompt: What words come to mind? What images?

Q2. How would you describe the term ' staff wellbeing' in Higher Education?

Q3. Do you think staff wellbeing exists in Higher Education? Yes/No. Please explain your answer.

Q4. In what ways (if any) has your wellbeing changed since working in a University?

Q5. Has your wellbeing in Higher Education affected your everyday life? Prompt: work; interests and relationships

#### **Participants experience of organisational responses and interventions to staff wellbeing**

Q6. Thinking about staff wellbeing, what do you think organisational responses and interventions mean?

Q7. Can you tell me in what ways(if any) your institution facilitates the wellbeing of staff?

Q8. What if any has been your experience of organisational interventions to support staff wellbeing at the university?

Q9. What if any might influence your decision to make use of organisational support to facilitate staff wellbeing?

Q10. What do you feel your wellbeing at work would be without the organisational responses and interventions?

Q11. Can you tell me in what ways (if any) organisational interventions has made a difference to staff wellbeing in the institution?

Q12. If you have made use of the organisational interventions what have other significant others/relatives said about your attitude and behaviour since you started receiving the support?

Q13. Can you tell me how you have benefited from the organisational responses to your wellbeing at work?

**Future of staff wellbeing**

Q14. Can you tell me what else the organisation could do to facilitate staff wellbeing?

## Appendix C. Participant Information

### Information about the research: Staff Wellbeing in Higher Education

Version 3. 27/06/15

#### Introduction

I would like to invite you to take part in a research study to evaluate what is staff wellbeing in higher education and how it can be managed? For the purpose of this study we will consider the meanings given to wellbeing from the staff perspective. The research will reflect on how the university context can impact on staff wellbeing. The study will also try to find out the sorts of organisational factors that can either increase or decrease staff wellbeing in higher education.

Please take your time to read the following information carefully. Part 1 tells you the purpose of the study and what will happen if you take part. Part 2 gives you more detailed information about the conduct of the study. If there is anything that is not clear or if you would like more information, please let me know.

#### Part 1

##### **What is the purpose of the study?**

This research will explore what is the experience of staff wellbeing in higher education and how staff wellbeing can be supported within higher education?

##### **Why have I been invited?**

The research will take place at Higher Education (HE) establishments in the UK. Staff currently employed in a HE establishment will be approached to participate in this study.

##### **Do I have to take part?**

No you do not have to participate in this study. You are free to withdraw anytime up to 30<sup>th</sup> July 2016 without giving a reason.

##### **What will happen to me if I take part?**

The research will run from July to November 2015 and you would be asked to meet with the researcher no more than twice during this period. The researcher will visit you at your place of work (University). You will be asked to complete a simple questionnaire to find out about your quality of life and health and then take part in a brief semi structured interview to find out the experience of staff wellbeing in higher education and how staff wellbeing can be supported within higher education. The study will also try to find out the sorts of factors that can impact on the quality of staff wellbeing. The meetings with the researcher should last approximately between 1-2 hours.

##### **What will I have to do?**

You will each be asked to complete a brief questionnaire in order to provide information about your quality of life and health. The researcher will help you with these if required. You will then be interviewed by the researcher, who will ask you about what you understand by the term 'wellbeing' and the organisation has supported/or otherwise your wellbeing. The interview will be audiotaped so that the researcher can recall this information at a later date. The interview recordings will be confidential and will only be heard by the researcher. Names and identifying information will be removed from any information or quotes coming from these interviews in order to ensure anonymity.

##### **What are the possible disadvantages or risks of taking part?**

Taking part in this research should not cause you any risk, discomfort or inconvenience. You will not be asked to answer any questions that you feel are inappropriate or uncomfortable. Sources of support will be available through your own institutional counselling service. External support is available from Big White Wall (<https://www.bigwhitewall.com>).

The potential impact on institutional reputation will be addressed as all information (including, name, institution and identifying factors will be removed) about participants.

**What are the possible benefits of taking part?**

The information we get from this study will help improve our understanding about the wellbeing of staff in higher education wellbeing and the support provided to promote wellbeing in Higher Education. By gaining a better understanding of staff wellbeing and the reasons why people might experience an increase or decrease in the quality of their wellbeing we can hopefully provide more targeted services aimed at improving and maintaining wellbeing at these key times.

**What if there is a problem?**

Any queries/questions about the way you have been dealt with during the study or any possible concern you might have will be addressed. The detailed information on this is given in Part 2.

**Will my taking part in the study be kept confidential?**

Yes, we will follow ethical and legal practice (NTU code of conduct and British Psychological Society) and all information about you will be handled in confidence. The details are included in Part 2.

If the information in Part 1 has interested you and you are considering participation, please read the additional information in Part 2 before making any decision.

**PART 2**

**What will happen if I don't want to carry on with the study?**

You may withdraw from the study at any time, without giving a reason. If you wish to withdraw please contact the researcher (Vida Douglas, on [Vida.douglas2013@ntu.ac.uk](mailto:Vida.douglas2013@ntu.ac.uk)). Any data collected up until the point of your withdrawal will be retained and anonymised for use in the final study analysis unless you specifically ask for it to be withdrawn. You have the right to request all data is withdrawn from the study, up until the point of 30<sup>th</sup> July 2016.

**What if there is a problem?**

If you have a concern about any aspect of this study, you should ask to speak to the researchers who will do their best to answer your questions ([Vida.douglas2013@ntu.ac.uk](mailto:Vida.douglas2013@ntu.ac.uk)). If you have any further questions you can do this through my Director of Studies ([maria.karanika-murray@ntu.ac.uk](mailto:maria.karanika-murray@ntu.ac.uk))

**Will my taking part in this study be kept confidential?**

All data, including audio files, questionnaires and data files will be stored securely at NTU. Data will be anonymised and only identifiable through the use of ID codes. A list of participant names and associated ID codes will be stored at NTU in a separate location to the data. Similarly, all interview transcripts will be anonymised and all personally identifiable material removed. Interview transcripts will only be able to be linked to participant names through the use of the ID codes.

Once transcribed, all audio records of the interviews will be stored in a secure location within NTU. Only the researcher involved in this study will have access to identifiable data. The supervisor will have access to the anonymised raw data.

All information that is collected about you during the research will be kept strictly confidential, and any information about you which leaves NTU that has your name, address and any other identifying factors will be removed so that you cannot be recognised. The data from this study will be retained for approximately 5 years after the study finishes. After this time, it will be disposed of securely.

**What will happen to the results of the research study?**

Results from the study will be published within scientific journals and reported at conferences and local meetings of relevant community groups. A written summary of research findings will be provided to all participants, upon request. All data will be anonymous so that you will not be identified in any report or publication. We may publish

verbatim quotations from interview material, however all names and identifiable material will be removed so that you cannot be recognised.

**Who is organising and funding the research?**

This research is undertaken as part of an RSCH124 leading to PhD in Social Sciences at Nottingham Trent University.

**Who has reviewed the study?**

All research in NTU is looked at by an independent group of people called a Research Ethics Committee to protect your safety, rights, wellbeing and dignity. This study has been reviewed and given favourable opinion by Nottingham Trent University Ethics Committee.

**Further information and contact details**

You will be given a copy of this information sheet and a signed consent form to keep for your own records.

If you have any further questions about this study please contact [Vida.douglas2013@ntu.ac.uk](mailto:Vida.douglas2013@ntu.ac.uk)



## Appendix D. Interview Transcripts x 2

### Interview 1

Student Number N0552646

Participant ID Code Carina

1 | TRANSCRIPT OF INTERVIEW

2 | Interviewer Thank you very much for being involved in the interview today. The topic is staff well-being of  
3 | staff in Higher Education. There are in total fourteen questions and they're broadly split between  
4 | the following headings: the first one will be around your experiences or perceptions of well-being  
5 | in Higher Education and then we'll be moving on to questions looking at how organizations are  
6 | responding to the well-being of staff and the final lot of questions is just a general question asking  
7 | you to talk about what do you think the future of staff well-being will be in Higher Education.  
8 | The first question then, if you had to describe what well-being means to you, just a general  
9 | definition of what that means to you, what would you say? Any words that come to mind or  
10 | images about well-being?

11 |  
12 | Participant I would say it's not just not feeling, you think about depression, anxiety and mental health as  
13 | conditions, it's not just about not having those but well-being also means being happy, being  
14 | satisfied, not feeling too stressed, I think stress is probably, particularly if you think about work  
15 | environment, I think that well-being would involve not feeling an undue amount of pressure and  
16 | stress and also making sure that work doesn't start to encroach into other areas of life, having a  
17 | work/life balance, but I guess it does as well mean also recognizing when you have personal issues  
18 | going on that work is also supportive so there are issues like depression or stress at home work is  
19 | able also to respond and make sure you are protected as a person from stress or distress.

20 |  
21 | Interviewer Thank you for your explanation of well-being and in some ways you've also talked a little bit about  
22 | what that might mean in the context of work and I suppose it's, the next question is just to get  
23 | your thoughts around the term staff well-being in the context of Higher Education, what that is  
24 | and what that should look like and I know you've touch on the fact that you felt it was an  
25 | organization that responded to your needs and a work/life balance but anything else that you'd  
26 | like to add in addition to what you think the term staff well-being means in Higher Education?

27 |  
28 | Participant I think we're under a lot of pressure because we have to respond to students, keep research  
29 | going, do admin so there's a lot of different poles and I think you can get quite lost at times and  
30 | stressed out by the pressures that are put onto you. I don't think, there is no, we have workload  
31 | meetings and it's quite, the number of hours is tight but I don't think that that much consideration  
32 | is given to how we deal with, I think time is a really important thing because it does, sometimes

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33 when you don't have enough time you end up rushing or you think you're not doing your job  
 34 properly and days start to merge into your personal time and I think in the work context well-  
 35 being includes things such as the amount of time you spend doing certain activities and sometimes  
 36 you wonder if your employer really cares about the you're personally spending doing the various  
 37 tasks you have been asked to do.

38

39 Interviewer That's an interesting term or reflection around time and that one of the important components  
 40 of the well-being of staff is that idea of time and that often you are giving much more time than  
 41 that is actually allocated for within that Higher Education context and the idea, it kind of spills into  
 42 your own time.

43

44 Participant Yes. I think it's no secret but you end up spending a lot of personal time doing things and  
 45 sometimes you spend a lot of time doing very trivial matters but also nobody really takes account  
 46 of, there are emergencies or something needs to be done very quickly so you can get an e-mail  
 47 asking you to do a report and it needs to be done kind of next week or you have to mark students'  
 48 work and you have twenty students so you have to do your job but also mark all this work. So  
 49 when you get down to it you're actually encroaching on time in the evenings and weekends and I  
 50 think there is a lot of expectations that are set on staff and a lot of deadlines are set and I think it  
 51 just needs to be acknowledged that people are working evenings and weekends otherwise these  
 52 deadlines will never be met – I think there needs to be more acknowledgement that this is  
 53 happening because there is no way you can get this job done 9-5 hours, it just doesn't work that  
 54 way.

55

56 Interviewer Do you think that it should be accepted that in Higher Education there will be an imbalance in  
 57 your time and that actually that's just part of the role but do we get to a point when we say well  
 58 actually how far should it go, maybe? I'm just wondering when we think about well-being when  
 59 do we feel that enough is enough. I think I'm just exploring that idea really.

60

61 Participant Yes. I think as a first step is for universities to acknowledge that the activities that they expect  
 62 staff to do are encroaching on personal time. I know of members of staff who are taking annual  
 63 leave in order to write papers or they're still i work during their annual leave time just in order to  
 64 get things done and make sure that they're still meeting their performance criteria. I think it

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- 65 would be great if we were given more support to do our work so that it didn't encroach onto our  
 66 personal time but I feel that in the first instance universities need to acknowledge that it happens  
 67 because I don't feel as though there's a great awareness of the amount of time spent during  
 68 holidays, evenings and weekends doing work, meeting deadlines and just making sure that even  
 69 just to kind of stay still in your job you still need to do a lot more and I feel that leads to quite a lot  
 70 of stress and when you think about well-being and burn out and I think that's the reason why, you  
 71 think about that in academia and I think that is my biggest reason for wanting to stop working in  
 72 academia: I don't think you would get this type of expectation or pressure in other sectors. I think  
 73 the universities have got away with it or quite a while and it's just a thing that happens now.  
 74
- 75 Interviewer I'm just thinking whether or not you think that it's something that is going to be changed, kind of  
 76 structurally, because there needs to be a change in the culture of the organization or the managers  
 77 needing to appreciate that actually people give way more time than they ever accounted for.  
 78
- 79 Participant Yes, I think it's both. There needs to be an appreciation, an indication and an acknowledgement  
 80 of time, holidays and weekends, their time is being encroached upon but also I think that the  
 81 expectations from senior members of staff is they had to do it when they were kind of young  
 82 academics, they still do it themselves so everybody else should have to do it. I think it's a culture.  
 83 I'm not sure it's easily changed because obviously the university benefits from it, they benefit from  
 84 this stressful environment because it gets the job done with fewer staff, they can get more  
 85 students in and the people who are feeling the pressure are the staff rather than the institution.  
 86 I think the institution benefits from this kind of arrangement or this culture so I can't see there  
 87 being any reason for them wanting to change it.  
 88
- 89 Interviewer Thank you. It's useful to get that perspective. Bearing in mind what you've just said then do you  
 90 think that staff well-being exists in Higher Education from the point of view in a positive sense of  
 91 staff well-being or do you think it will ever exist, from what you've just said, in Higher Education?  
 92
- 93 Participant I think, you know, if you had a physical illness and you go off sick there is support. I mean, although  
 94 I've never taken a sick day actually ever even though I have been sick because it puts pressure on  
 95 other people, and I think that's another issue, but if I was sick for a long period of time then  
 96 couldn't physically come into work then there would be some support. I know we have counseling

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- 97 services now for mental health and for serious problems but I don't think that there's any support  
 98 for stress or day-to-day anxiety, just generally feeling run down, feeling burnt out, those types of  
 99 things I don't think there is any kind of support there for those.  
 100
- 101 Interviewer Thank you. This question is asking you, having worked in Higher Education now for some while –  
 102 I think you said 2008 when you started - do you think your well-being has changed since working  
 103 in a university?  
 104
- 105 Participant I think it fluctuates so there are times where I feel more stressed out and there are times when I  
 106 feel more committed as well so I think it has fluctuated but I think that different environments  
 107 have different pressure points so, for example, at the last institution where I was, there were quite  
 108 a lot of problems with, it was a red-brick university, there were quite a lot of problems with  
 109 bullying from senior members of staff, there was racism, lots of negativities that I don't see here  
 110 so I think at the other institutions staff feel problems in other areas but I think here it's particularly,  
 111 I think the only, my personal well-being, mental health is fine the only thing I feel is the stress, the  
 112 pressure and the burn out which sometimes makes me feel as though I don't want to continue to  
 113 work in academia any more and my feelings for not working in academia have got stronger and  
 114 stronger over time.  
 115
- 116 Interviewer Do you think if you had a different role in academia that might be different, do you think it's more  
 117 bound up in the role or it's the whole place of university, the context of the issue?  
 118
- 119 Participant I think moving out of academia into professional services or a different role within the university  
 120 could potentially be better, might bring more work/life balance so not being faced by students  
 121 might help but I do enjoy working with students, I really enjoy the lecturing role so I don't know  
 122 whether that would work because I've considered working in Further Education and then just  
 123 leaving education altogether and working in project management and another areas where I  
 124 definitely have a cut off, at five o'clock I wouldn't have to do any more work, I wouldn't have to  
 125 do stuff over the weekend, when I'm on annual leave I'm actually on leave, I'm not having to do  
 126 things whilst I'm away. So other options which I have thought about, I think more so now because  
 127 when I started in academia I didn't have two children to look after at home, I've had two children  
 128 and the pressure, the e-mails, it just goes on and it eats into their time as well.

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129

130 Interviewer Do you mind if I ask how old are your children, are they young children?

131

132 Participant Yes, they are young, 8 and 1.

133

134 Interviewer Yes, your right, there are different pressures so maybe there's something about universities being flexible, it said it should have a flexible working policy, but flexible around those changes in our kind of personal life path.

137

138 Participant We do have a flexible working policy and I have got flexible working hours but it's just that even, you couldn't rearrange your 37 hours a week and say I'm going to work at that particular time. It's just those 37 hours a week, that number is meaningless compared to the hours that you do. So they ask you to do 37 hours a week where in reality it's 40/45 hours a week, some weeks even more if you've got marking to do. So it's particularly the hours, I think, that are problematic. But also sometimes I think the way that people communicate with one another, e-mails which have a very nasty tone to them, the way some staff behave towards you, the culture of communication is very negative and that preys on your mind and gets in the way of you enjoying time at home because you're still stressed out about things that have happened during the day, negative conversations or an e-mail that has been sent to you, things like that.

148

149 Interviewer I suppose there's a bit of me that would like to unpick something about the – it wraps into the culture really about the way people speak to each other and the kind of communications mode and how they're used. Have you got an example, without going into too much detail obviously, I appreciate that, to make your point?

153

154 Participant An example of the type of e-mails which people have sent where the tone is very nasty or they can be blaming you for something which is out of your control, they can phrase things in e-mails in unfriendly ways.

157

158 Interviewer So would that be colleagues to colleague? I'm intrigued.

159

5

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- 160 Participant Yes. It's definitely colleague to colleague. I think the senior members of staff, particularly here,  
 161 are quite good at not, they are quite careful about the way they will speak to other people and I  
 162 think particularly other members of staff, the role that I do sometimes involves me having to talk  
 163 to students about their complaints and trying to talk to other members of staff about helping me  
 164 resolve them and having difficult conversations with members of staff about the way they've  
 165 behaved with students leads them to kind of attack you, almost the messenger, and sometimes I  
 166 think as well, I mean there have been times where I've asked people to send me information and  
 167 they've been very negative and quite nasty about me asking them as in this is none of your  
 168 business, this is really annoying that you're asking me for this information, and it's standard  
 169 information that you would ask any other member of staff but you just get a few people who feel  
 170 justified to have a go at you or to have a bit of a rant or a tantrum. There's a couple of examples  
 171 particularly from members of staff, I don't know if it's people just contesting the waters with you  
 172 to see what they could get away with but the tone of e-mails was quite nasty and you know when  
 173 things like that happen it does play on your mind because you get, you're offended and you can  
 174 get the effect of exactly what the nature of the e-mail is intended to do. I find them particularly  
 175 from people who are at the same level as me in the way the communication is managed, I don't  
 176 necessarily find it as much from senior people within the organization.  
 177
- 178 Interviewer Well that's quite positive to hear you say that it's not from senior managers but it's still troubling  
 179 that it's still from within, that it's a collegial sort of – one would hope it was like that all the time.  
 180 Thank you for that, for allowing me probe a little bit more. I appreciate that.  
 181 Have I asked you this question, has your well-being in Higher Education affected your everyday  
 182 life? So this is getting you to think about, you've already begun to touch on it really about working  
 183 within the context of Higher Education and how that's affecting things like your relationships and  
 184 your interests, hobbies. Any other ways it's spilling over into areas of your life outside of work?  
 185
- 186 Participant I think a few moments ago I was quietly reflecting that I don't have any hobbies any more, that I  
 187 don't have time for my hobbies and that's partly because I don't get as much free time as I used  
 188 to and I don't have time to do things that I previously enjoyed doing so I think that has been a big  
 189 thing. I've had to, I've had a few health issues, I'm having to go back to exercising and go to the  
 190 gym more regularly but that's been really hard to do and find time to do that. Not just because  
 191 work takes up a lot of time but when I'm not at work I'm just exhausted, drained, just really, really

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- 192 tired so even trying to do something simple like going to the gym or to exercise is really difficult  
 193 so I don't feel I have time to do so much outside of work, things I do outside of work is necessary  
 194 for kind of caring for the children or taking care of the house. It's very restricted now.  
 195
- 196 Interviewer So that something it sounds as though that is something you really want to change, it sounds as  
 197 though it is critical to get that sense of balance back and the fact you are pondering not having  
 198 any time to pursue your hobbies is interesting in itself.  
 199 I'm now moving on to the next lot of questions which is about how organizations actually sponsor  
 200 staff well-being. So thinking about staff well-being what do you think organizational responses  
 201 and interventions mean so when we think about an organization responding to well-being what  
 202 do we think of when we think about their responses and interventions, what does it mean to you?  
 203
- 204 Participant I know there was a staff survey and I think I remember there being some sort of response from  
 205 the Head of School about the way that particular answers were, sorry about the way that  
 206 particular questions were answered. So, from my experience, the way the organization seems to  
 207 respond is to gather information and then put it into a report and then feedback the report. I  
 208 haven't noticed any changes to our environment based on the report but I don't know whether  
 209 these changes are subtle or they're being worked on or whether they're not going to be actioned.  
 210 As an organization it would be good to see feedback of some kind, of feedback being taken  
 211 seriously, taken on board because I see feedback being gathered, I just don't see it being actioned.  
 212 I think that, as an organization, it would be good to see more being done quite actively to support  
 213 staff well-being which would include, for example, not necessarily opportunities to socialize but I  
 214 think we do, if we want to, get into socializing with members of staff, I don't that's necessary, but  
 215 more personal support, so access to exercise, gym, mindful nurse, I know we have counseling  
 216 services if we have problems but it would be good to, well look at the way the private sector looks  
 217 at their employees' well-being and mimic some of the things that are done if it affects us.  
 218
- 219 Interviewer Thank you. It's useful to get a few thoughts around that.  
 220 This question is just getting you to tell me in what way do institutions facilitate the well-being of  
 221 staff. You again started to talk about the fact that there was a survey, an opportunity to gather  
 222 opinions on what that would look like, and the counseling services, do you know of any other ways

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- 223 in which they facilitate the well-being of staff, other than the two you've mentioned what else  
 224 would they offer?  
 225
- 226 Participant Those are the only ones I know of. I don't know of anything else that's being offered. Not within  
 227 the department or the school or the university. I can't think of anything else that I know of but if  
 228 there is anything it's not advertised very well.  
 229
- 230 Interviewer O.K. Thank you. Have you actually ever used any support services, interventions that are available  
 231 within a university context to support your own well-being? This question is trying to explore  
 232 what you experienced after using the support available.  
 233
- 234 Participant I've only used occupational health because I was getting severe back ache so I had somebody  
 235 come in and have a look at my work station and give me bits of advice on posture and computers  
 236 and things like that. That's the only time I've ever asked for any help.  
 237
- 238 Interviewer And what was your experience of that? What did you feel about the whole process and how it  
 239 left you feeling at the end of it?  
 240
- 241 Participant Well it was very functional because I was experiencing quite severe back pain, in part it was due  
 242 from kind of travelling and then being quite stationary, sitting at my desk and at meetings always  
 243 sitting down, not a lot of opportunity to move, so those things were what occupational health  
 244 responded to because they're just part of everyday life so I don't think there was much that could  
 245 have been done in order to help with my back pain so anything that could have been done I was  
 246 going to have to do in my own time. So I didn't find it that useful.  
 247
- 248 Interviewer This question is trying to get you to think about what influences your decision to make use of the  
 249 support that's available to facilitate staff well-being. So obviously the condition of your back and  
 250 you were in a lot of pain so I think that was very important trying to resolve that but what practice  
 251 might influence your decision to make use of the support that is available to you?  
 252
- 253 Participant if I thought it was going to address the issues that I face, so if it was, if there were sessions put on  
 254 for kind of backs or mobility or physio or those types of things, then I would do it. If I thought



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- 255 there was stuff on stress or kind of work/life balance then I would go but I don't think the current  
 256 programme of things they have on is focused that way. I did see a mind issue session I saw  
 257 advertised once but I never went along, I can't remember why – I think it was just at a time I  
 258 couldn't make but I think that was something I considered but I never went to.
- 259
- 260 Interviewer So there's something about the types of things available to you but even when there were one or  
 261 two that you liked the sound of it was just that it wasn't available and again it didn't fit in with  
 262 your current work schedule.
- 263
- 264 Participant Yes. It's the timing of these things. It's nice that things can be put on at lunch time but I never  
 265 get a chance to take a lunch break so that's not useful and things that are on during term time,  
 266 that's extra busy and I wouldn't get a break otherwise.
- 267
- 268 Interviewer What do you think your well-being would be like without any interventions from your  
 269 organizations for your well-being? Would it even make a difference to you if there was nothing  
 270 there in terms of support?
- 271
- 272 Participant I don't know. I don't know if other members of staff use it and, if other people use it, if it makes  
 273 their lives easier it probably makes my interaction with them better but for me personally it  
 274 wouldn't make any difference if there was no support there. I don't use it, or haven't used it, and  
 275 the bits I have used haven't had a big impact on me so it wouldn't make a difference.
- 276
- 277 Interviewer This question then is just asking you, given that you've used occupational health, do you think it's  
 278 made a difference to your staff well-being at the institution? I think you stated that it didn't, not  
 279 really.
- 280
- 281 Participant Yes.
- 282
- 283 Interviewer This question is getting you to think, having used some of the support available to you, just getting  
 284 you to reflect on whether any significant others or relatives or family members have actually  
 285 noticed a change in you as a result of using the service, either in your attitude or your behaviour,  
 286 since you actually received the support.

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287

288 Participant I don't think the support that I've had has had a big impact on me and I don't think anybody else  
289 would ever notice. It didn't have that kind of effect.

290

291 Interviewer There is one other question which is about the benefits for you as a result of using the supports  
292 and I think again we have answered that bit. You've already said really there weren't any benefits  
293 in that respect.

294 If we can move onto the very final question which is the future of staff well-being, and this is more  
295 of a blue-sky thinking, open question for you, but can you tell me what else the university, the  
296 organizations in Higher Education should be doing to facilitate that well-being, what else could  
297 they do?

298

299 Participant I think that universities probably should have a think about whether their current structure is  
300 conducive to staff well-being. So, asking members of staff to be active in research, be active in  
301 teaching and also do administration and having external engagements – so having all these things  
302 on your plate asking whether that is conducive to having happy members of staff and also work  
303 loads, stress, burn out, fatigue – I think all those things need to be on their agenda to resolve. I  
304 mean, I think there are things the universities are doing now in terms of addressing biases, trying  
305 to address biases against women and the way women are treated in the work place. I think more  
306 needs to be done around that shift. But also the way that universities treat mobility and ethnic  
307 minority members of staff, those don't seem to be on the agenda much at all and I feel all those  
308 things contribute towards your sense of well-being, your sense of belonging and whether you feel  
309 as though you're part of an institution that cares. I think it's great that universities want to do try  
310 to do more in supporting people with things like depression, anxiety, alcohol abuse and those  
311 types of things but I think at a more basic level the way that the culture and the institution are  
312 designed isn't designed to support members of staff. I think we do now do a lot to support student  
313 well-being but I think staff has been quite neglected and I feel that there might be a reluctance to  
314 change because asking staff to do more generates more income for the university so sometimes I  
315 think it comes down to a financial issue that if you were to address stress, burn out and try to get  
316 rid of some of the biases, would the institutions then start to lose money because people are  
317 working as many hours and there was a culture of pushing people, the burn of negativity is buried

10

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- 318 deep. Those are the things I think are things I would like to see changed at universities. I don't  
 319 know if they're realistic.
- 320
- 321 Interviewer Thank you for that. There are two things I want to try to unpick with you: the experiences of  
 322 people with disabilities and staff from BME backgrounds and that of their well-being and  
 323 experiences in H.E. may not be what it should be in terms of overall experiences. What could be  
 324 done about that, do you think because the universities obviously talk very openly about wanting  
 325 to increase the number of staff, that's it's more representative within the institution, so what  
 326 could we be doing to kind of help that process of making it a place where more BME staff or people  
 327 with disabilities would want to even come to and stay in, more importantly?
- 328
- 329 Participant Traditionally when you think of the role of a lecturer, they don't usually look like somebody with  
 330 a disability, they don't look like somebody who's black – you know the typical image. So when I  
 331 first started lecturing I got stopped by security a couple of times because they didn't think I should  
 332 be going into a lecture theatre when the lecturer wasn't there so there was always the assumption  
 333 that I was a student – that's why I wore my I.D. badge, so I wouldn't get stopped and even when  
 334 I started here it took some members of staff probably a couple of years to even start saying hello  
 335 to me in the corridor so I'd walk passed them and say hi because I recognized them from a meeting  
 336 and they would kind of look at me as though who are you. I think that there is a lack of recognition  
 337 that people with disabilities or people from ethnic minority backgrounds have a belonging here as  
 338 a member of staff. It would be good if there was more support networks, more mentoring  
 339 opportunities but also the recognition that sometimes when you're from a background that you  
 340 face additional challenges and additional pressures and it's not as easy sometimes to network or  
 341 to have your voice heard during meetings and it would be good if there were more, better  
 342 recognition but also more solutions and more mentoring. I think those things are really important.  
 343 I think we need to look at general representation so do staff look like their students so if were  
 344 taking in large numbers of students from Beta backgrounds or Afro-Caribbean background or  
 345 students with disabilities, do our staff members also have, are they people who are previously  
 346 from Beta, Afro-Caribbean backgrounds, do we have staff with disabilities so we can show that  
 347 our staff body is just as diverse as our student body. There isn't that comparison actually when  
 348 you think of our staff body. Clearly our senior management is run by white males with no  
 349 disability, or at least with no visible disability, so that lack of representation, I think, particularly if

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350 students are looking at their diversity stuff at universities, they look at us and think we are not the  
 351 same group of people. So, I've gone off on a bit of a tangent there.

352

353 Interviewer No. It's about what can help facilitate staff well-being and being in an institution that represents  
 354 the community, the group of students that it erves and they chose to entire into their institution  
 355 is an important part of facilitating staff well-being and that sense of belonging which you talked  
 356 about again a couple of times which I think is key in that sort of picture.

357

358 Participant I think the culture and the social environment are things that do impact on your well-being so not  
 359 being accepted, not having people say hello to you or having people challenge you about whether  
 360 you should be here and also ....

361

362 Interviewer Do you mind if I just go back and unpick about another member of staff challenging you about  
 363 whether or not you should be here.

364

365 Participant Yes, so for example security saying I'm not allowed into particular rooms because I'm not a  
 366 member of staff, having to prove who I am because I don't look like a typical lecturer. It took a  
 367 long time for, so when I first joined I was the only ethnic minority member of staff, it took a while  
 368 for some people to even talk to me or having a conversation to just say hello which is quite a  
 369 feeling of like an outsider. It's people making assumptions as well. I was thinking about going for  
 370 a promotion and talking to a senior member of staff who made a lot of assumptions about my  
 371 background and made a lot of assumptions about me and it really annoyed me during that  
 372 particular meeting so just assuming that I had come to this institution straight from doing a PhD  
 373 assuming that I had no research experience, a lot of assumptions there so after teaching for years  
 374 and years just assuming that coming here I was new to everything, that I shouldn't be wanting to  
 375 pursue advancement in my career because you've already done so well getting to where you are,  
 376 those kind of things. So I see a lot of assumptions are made, there's still a lot of cultural biases, I  
 377 see people who come from backgrounds which are not reflected in senior management have a  
 378 bigger struggle to try to convince everybody else that they have a valid place within the institution  
 379 and I think you've not just got to work hard occupationally, you have to work hard socially within  
 380 a university if you come from a different background.

381

382 Interviewer Thank you for that. It's really interesting actually. Thank you very much.

## Interview 2

Student Number N0552646

Participant ID Code 2704

### 1 | TRANSCRIPT OF AN INTERVIEW

#### 2 | Staff experience/perception of 'wellbeing' in Higher Education

3 Interviewer Thank you for taking part in the interview today with me. I shall be asking fourteen  
4 questions. If at any point they are not clear stop me and we'll go over them again.  
5 Take your time and if you need me to stop just say so.

6 Q1. If you had to describe what wellbeing means to you, what would you say?  
7 Prompt: What words come to mind? What images?

8 Participant Wellbeing. Feeling healthy. Not feeling stressed. Not feeling overloaded. Feeling  
9 calm and feeling in control.

10 Interviewer Any images?

11 Participant Images. Yes, I suppose that sense of calmness creates images of relaxing theme, that's  
12 an interesting question because I think of calm, outdoor, natural environment scenes:  
13 so I associate wellbeing with being in touch with nature and just being able to be  
14 outdoors and breathe the fresh air. I don't image indoor scenes where things are busy  
15 and hectic. It's a complete opposite. I suppose I associate it with being off work.

16 Interviewer That's really helpful actually. Concentrating more on our experience in High  
17 Education, how would you describe the term 'staff wellbeing' in Higher Education?

18 Participant I think staff wellbeing in High Education is about people feeling as though they are  
19 operating within their reasonable sort of limitations so they're not feeling overloaded  
20 and overworked and feeling as though things are manageable, feeling as though what  
21 they're doing, having the time to prepare for their teaching, the actual hours that  
22 they're teaching and having enough time for preparation and marking and all of the  
23 additional quality-assurance-driven paperwork that goes with the role is manageable  
24 and reasonable and people feel in control of being able to do that. That's about  
25 wellbeing and that there's a nice sense of being able to work as a team and that people  
26 are feeling supported both above by the management but also by the colleagues.

27 Interviewer You mentioned control a couple of times. I wonder if you could just explain that a  
28 little bit more to me.

1

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29 Participant I think when you think of wellbeing you do think of feeling in control and I think when  
30 people feel that is threatened or challenged, one of the starting points of not having  
31 a sense of wellbeing is about feeling that things are out of your control and that's  
32 because other people either putting those pressures on you or asking too much of you  
33 or are just doing things to you that you haven't really had any consultation or say in.  
34 So control, I think, features heavily in dictating whether you feel well or not.

35 Interviewer Do you think staff wellbeing exists in Higher Education?

36 Participant Yes, I do but I probably should also say I'm a Union rep so I'm very well aware of the  
37 fact of where it doesn't and the kind of problems that members will bring to attention  
38 where they require support but I'm also aware that, I don't think it's a case that the  
39 staff that don't bring that up are the staff who for some reason are afraid to do that,  
40 I think that's because staff feel able to operate within the boundaries and limitations  
41 of the role and maybe are more able or are better at saying if it's too much. So, yes, I  
42 think it does exist. I think it would be just too dysfunctional to think that it didn't –  
43 and I don't think it's that dysfunctional – but that's not to acknowledge that there are  
44 some particular pockets where it is problematic.

45 Interviewer In what ways (if any) has your wellbeing changed since working in a university?

46 Participant Well, it's interesting actually because the context that we are in is slightly different to  
47 a university because we are defined as a mixed-economy college, so we are a higher  
48 education department which is attached to a further education department and in  
49 some ways people might say that staff in universities have a little more protection  
50 than staff in a college environment because the expectation to teach is a lot higher in  
51 this type of institution than in universities so staff, there are limitations, but staff can  
52 teach as much as twenty-five hours a week which, as you can tell, does not leave a lot  
53 of time for the marking and the planning and prep and something which has been  
54 challenged recently also for people to take on research. So that's got less recognition  
55 in this environment than in universities. So I think probably staff in this institution  
56 probably would say there are more challenges than in a university environment. But  
57 just to answer your question which I think was about how my wellbeing has changed  
58 since I've worked in this environment, I think it's because there's been quite a lot of  
59 staff changes and so I've gone from a position, because I've now been here now  
60 fourteen years, of being one of the lecturing staff with other people looking out for

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61 my workload and protecting that to now being course leader with virtually a new team  
62 since last year so that's meant that nobody else on the team has got a teaching  
63 qualification and I've had to, therefore, look out for their workload and also provide  
64 mentoring support for all the staff on the team because they're new and they require  
65 that so I guess in that sense it's gone a bit crazy but I do feel quite lucky in the sense  
66 that there's good management above me and we've got the next line of line-  
67 management is also a newly appointed staff member but a very experienced manager  
68 so I think perhaps a lot of the answers to my questions are going to come down to the  
69 people I work with and on the whole the people closest to me who I work with are  
70 really nice, supportive people though I think in that sense it has changed.

71 Interviewer Has your wellbeing in Higher education affected your everyday life, for example your  
72 interests, health and relationships?

73 Participant Well, yes I think it probably has. I've been having some personal relationship  
74 difficulties over the last year and it was my partner who pointed out that I probably  
75 wasn't noticing the pressures of my work in the way they were actually starting to  
76 impact at home which was quite interesting so I think I've just noticed that my  
77 workload has increased and I've had to get on with it and do it and in order to do some  
78 of the – in order to not to get bogged down with the pressures of (taking on courses,  
79 responsibilities and mentoring new staff and putting in all the extra) I've still  
80 endeavoured to create the space that is, what makes my job and what makes my role  
81 really interesting and enjoyable and have purpose in terms of the impact that it has  
82 on students and particularly as well service users that I work with – I suppose that's  
83 meant that the extra pressures **have been** extra, so obviously if you are taking on  
84 additional stuff it does have a knock on affect – it means you're looking for whatever  
85 time you can get to stay back at work late, that's the one practical way I've managed  
86 it, if I can work late I will, that's a way of staying on top of it. It also means if I can work  
87 on a weekend I will because that's just a way of keeping up with it and it's not good  
88 people saying 'Oh you should just not do it' because when there's only you to do it  
89 there's only you to benefit from keeping up with it. So in those kind of ways, yes, I  
90 probably work around the clock more than I used to and I, when I think back to a few  
91 years ago, I would never dream of going back onto my computer at night to e-mail my  
92 students because I felt it was quite important to give students the messages that I  
93 work between these hours so if you're going to e-mail me at this time of night don't



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94 expect to get a response. Regularly now I find myself e-mailing people in the evening  
95 because the evening is like down time, in the evening when I am at home I think I've  
96 got a quiet hour I can catch up on my e-mails so students may well get e-mails from  
97 me that have been sent at ten o'clock at night and in a way that once I would have  
98 thought, 'you know it really is not good to do that because I don't want to give people  
99 the messages that I am available.' But I know now that I can do that which means I  
100 can manage it, I can stay on top and it's not necessarily saying to students that if you  
101 e-mail me at this time you will get a response: it's just that I'm doing it when I can and  
102 I will, you know in a way it's just better that you're getting in touch with people and  
103 I'm less worried about the messages, the messages that I'm giving, so in that respect  
104 I guess I'm like other people, just trying stay afloat. It's what it feels like, treading  
105 water, keeping my head above it.

106 Interviewer Now this is going to focus on the organisational response to supporting staff  
107 wellbeing. So, thinking about staff wellbeing, what do you think organisational  
108 responses and intervention mean?

109 Participant Well, I think having a union presence is key so that staff are supported and know it's  
110 their right as an employee that they have that space to take some of their concerns  
111 and that that can be a sort of a collective concern because often people feel as though  
112 they're struggling with individual worries and having that space is really important  
113 because that's where they can recognise that actually it's not: it's an individual  
114 concern. But certainly in this college there's an O.T. department and there's all sorts  
115 of processes that are linked between H.R. and the Union and the O.T. department so  
116 that staff, where wellbeing is really an issue, staff are stressed or needing time of work  
117 and are struggling, those parts of the organisation can link up in a supportive way so  
118 that staff can attend meetings with H.R. to address things that they are struggling with.  
119 It might not go that far, it could be in the first instance it might just be a chat with the  
120 team and the line manager and those processes but they can get support from the  
121 Union and the Occupational Therapy department, for example, they offer massages  
122 and things like that but some staff feel as though that in itself is a problem and that  
123 actually the problems aren't dealt, getting massages, the problems are genuinely  
124 about having the workload reduced that's when it often lands up in the Union,  
125 supporting them in discussion with H.R. so their workload can actually be looked at  
126 and that changes can be made and – because I do act in a Union rep role I've sat in a

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127 lot of staff support and I can honestly say that this college is pretty open and receptive  
128 to wanting to support staff and change things so that there is more of a sense of well  
129 being and staff can be retained and happy in their work though it doesn't always work  
130 out like that for everybody. So I think those are the sorts of organisational structures  
131 that are key in the first instance that line managers are approachable and  
132 understanding and that does vary across the college: some are good at that, some or  
133 less good at that and that there are tiers of people knowing where they can get that  
134 support and there is also a very good counselling service based in the college – it's  
135 there for staff as well as students – and just the fact that that is there and that staff  
136 know that's there for them is important. But I also think it's got to be about the culture  
137 of the organisation which comes from the management at the top and I think that's  
138 probably the level where there's less in ~~touchness~~ or in ~~tuneness~~ with the staff.  
139 There's a real gap there.

140 Interviewer You've mentioned some of it but can you tell me in what ways (if any) your institution  
141 facilitates the wellbeing of staff? You've mentioned Unions, counselling services,  
142 occupational health. Anything else?

143 Participant Well yes. There's some discount with access to the gym and there are a lot of classes  
144 put on. However, they are always put on at times, it seems to me, and it might just  
145 be me, but my workload is too busy so, in theory, there's lots of things there but, in  
146 reality, you never get a lunch hour to do these things.

147 Interviewer So all these are at lunchtimes?

148 Participant A lot. There are some that are at the end of the day but the point is that nobody has  
149 really got the space and at the end of the day, well it depends on your circumstances:  
150 for me it doesn't work because I have to whizz off and pick up my kids and O.K. when  
151 I do negotiate the time to stay back at work it's because I'm catching up on my work,  
152 not because I can finally get to a yoga class. So in theory it's there, but in reality I get,  
153 you've got too much to do. Another thing is that once a year we have a staff  
154 conference where there's lots of workshops that are built in to make us feel treated  
155 and valued staff. However, it doesn't usually feel like that: it feels as though staff are  
156 being pushed into doing something like having a taster. I tend to go for the practical  
157 one myself and do something like bicycle maintenance, things where I might actually  
158 learn something and actually it's interesting because actually it's on the whole staff

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159 don't really want to spend a day being made to do things that are meant to make  
160 them find or discover a new talent or hobby. Staff would rather use that time to do  
161 some sort of meaningful consultation and feedback to the institution because mostly  
162 we are organized and there isn't really meaningful consultations – there's no channel  
163 for getting our views and having an influence on things that happen in the college.

164 Interviewer Is that in relation to staff well being or just generally?

165 Participant That's generally but I think that that links to staff wellbeing because I think that staff  
166 feel so frustrated a lot of the time at being told that things are changing and being told  
167 what they are doing. I'm fairly lucky because I have stayed within my role and my  
168 team since I've started but some staff experience getting moved about between  
169 departments and they don't feel as though they have any say on that whatsoever. I  
170 would say that most of the time when I was supporting staff in a Union representative  
171 support role it's when they've been told they have to go somewhere else where they  
172 feel they have no connection with and they feel that that is not fair and they have no  
173 say in that. So I think that, yes, there are those efforts made to say to staff 'we care  
174 about your wellbeing and these are the ways we care about you and this is what we  
175 are offering you' but a lot of the time people feel 'well actually you ask us what we  
176 would like that would genuinely show that you are caring about our wellbeing, we  
177 would have things to say and would have suggestions to make and we would feel  
178 valued in that respect.' So it's a bit like putting a square peg in a round hole a lot of  
179 the time.

180 Interviewer What if any has been your experience of organisational interventions to support staff  
181 wellbeing, for instance have you had to use any of those support services and what's  
182 been your experience of being on those?

183 Participant I have and I have talked to other people who have. I was off work for – well I say I  
184 was off work, I had a sick note which meant I could be absent from work but still do  
185 some work. This was – 2011 – three years ago and I lost my voice for a long period  
186 and the year before I had pneumonia so I was off for a month and, apparently, having  
187 pneumonia made me extra susceptible to losing my voice which it did – and I'm quite  
188 prone to that now but I can manage that fine now. At the time it was all new and it  
189 was all hitting me and I'd lost my voice and I was having to have speech therapy and  
190 all sorts of appointments to try to get to the bottom and it was all linked to having

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191 pneumonia. So I was absent from work because I couldn't teach them, doing a lot of  
192 marking and I was trying to stay in touch with work. I was having to have a couple of  
193 meetings with H.R. and I was going to O.T. who, my own experience and other people  
194 have told me, is – they're not – I was seeing a doctor and I was referred to speech  
195 therapy trying to get my voice to recover and you go to O.T. and apart from offering  
196 you something to help you relax, they can't, they're not a G.P. so they can't then go  
197 over what you are doing. But I felt as though there was a sense of them trying to get  
198 to the bottom of your problem and trying to help you resolve your problems but I  
199 couldn't quite work out why I was there because obviously they were saying 'oh well,  
200 you're seeing your G.P. and you're going to speech therapy' - which is very specialised,  
201 nobody there is going to be able to help me talk, they can't put in any practical support  
202 because I can't talk, I can't come back into the classroom. I was made aware of what  
203 I could be line up with support if I came back into the classroom and I didn't want to  
204 strain my voice – so that was quite helpful but that came from H.R. not Occupational  
205 Health. So I thought to myself, 'well O.K. what I think it boils down to is that people  
206 need to make sure that you're getting help and that you are genuinely off with these  
207 issues that you're getting support for' and it felt more like sort of just 'we're just  
208 checking that you're genuinely off for these reasons and you're not swinging the lead.'  
209 So I think in that respect when it was fairly clear that I couldn't talk, that I wasn't  
210 pretending I couldn't talk, I was doing as much marking as I could cope with, in fact I  
211 was probably doing too much: in fact my voice returned when I took two weeks of my  
212 holiday and I didn't allow myself to do any work for those week and my voice came  
213 back. So that was a bit of a learning curve for me. But what I think a lot of people feel  
214 is that the processes, they might be there to say we're here to support you, but  
215 actually in reality a lot of people feel it's a way of checking out that you are genuinely  
216 off and I think it may depend upon where you live and your G.P. surgery but certainly  
217 where I live they're very reluctant to give you a sick note, they are much more keen  
218 to keep you in employment and make sure that the support you need to work and do  
219 what you can so the way round it for me was to work from home because I couldn't  
220 teach and take on everything else. So I think there's a feeling that there's not that  
221 much they can do as long as you are off for health reasons. I haven't been off work  
222 due to stress and workload, which is why a lot of people are off work, but I was asked  
223 a lot of questions about that so there was a sense that 'so you are off for this length  
224 of time, I bet it is about stress and workload so why don't you tell us about it and we'll

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225 see what we can do.' And I said I'm not, I'm off work because I can't speak. So in that  
226 sense I didn't go through it in the same way that other people experienced it because  
227 a lot of people I support in my Union role are off because of stress and workload.

228 Interviewer What if any might influence your decision to make use of organisational support to  
229 facilitate staff wellbeing?

230 Participant I wouldn't use the counselling service. There are two counsellors and I rate them. I  
231 think they are really good counsellors. I refer students to them a lot. In and around  
232 referring students and in the fact that sometimes I meet them and we have a chat, say  
233 'how are you' and they are very nice, I wouldn't actually myself use the counsellors  
234 because I feel as though I have a different relationship with them. So, if I wanted  
235 counselling support for myself I would probably go outside of college: I would not use  
236 internal counselling because I think you just land up in that situation where you are  
237 just crossing boundaries of counselling relationship so in that respect, yes, it is on offer  
238 in respect of staff but actually it is not ideal when you are, when you can find yourself  
239 working alongside so I wouldn't use counselling. I would like to use some of the classes  
240 and other facilities but I can't really find a way round fitting them in. So I guess that's  
241 about my time and my availability and my organization so I would in principle use  
242 some of the classes linked to the gym that are on offer but I don't know how to  
243 organize my time effectively to do that. I think you have to be, I think the conditions  
244 to use the aromatherapy/massage services, I think you have to have been off, you  
245 have to meet the criteria so I don't think I would be able to just say, 'Do you know  
246 what, I'm having a really rough week and feeling stressed. Can I come and have a  
247 massage?' It doesn't work like that. So I wouldn't be able to use those facilities. I  
248 think they are on offer to you as an incentive to try to support you to stay in touch  
249 with work and think about coming back. While you're back at work, if you've been off  
250 a certain period of time, when you're back at work you could benefit from having a  
251 massage at the end of the week that might just be helpful for being here. So I think I  
252 would have to be off due to stress for a certain period of time: I think it's about three  
253 months. But if I was in that position, I think I would take that up because that just  
254 sounds like a genuinely nice way of getting through the week if you have that. I would  
255 definitely use the Union: I am a member. I understand the benefits and the rights  
256 and if I needed the Union support I wouldn't hesitate, I think that's critical in the  
257 workplace. So I'd definitely use the Union. But in the first instance I would be talking

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- 258 to my line-manager and the management above my line-manager because I have good  
259 relationships with them and feel able to ask for support if I needed it.
- 260 Interviewer What do you feel your wellbeing at work would be without the existing organisational  
261 responses and interventions?
- 262 Participant It would be about who I work with and the team and the way the team works and  
263 team support which really is what it actually comes down to.
- 264 Interviewer It's not so much the support as the relationship.
- 265 Participant Yes. And also about managing the workload within that so it's about managing as an  
266 individual within my job role and getting support for the team and I have to say that  
267 there's been, recently, this is a good example, we were coming to the end of the term  
268 and all of the marking was piling in and piling up and there's only three of us that  
269 could, out of a team of seven, that could mark dissertation and it was just  
270 overwhelming but had to be done and we moved things around, we worked, we  
271 prioritized – you know dissertation markers had to mark dissertations, what could  
272 other people do? We moved things around between us that we, everybody was under  
273 the hammer but we pulled together and shared and we all got through it and it just all  
274 came together as team work and I just thought, 'well that's great because we're a  
275 relatively new team, I've been here the longest but most of the staff didn't start until  
276 last September and some of them didn't come on board until a little bit later in the  
277 term, but everybody just clicked into that so I think that is the team and that is what  
278 I use because I don't really use the other support, I know they're there and I know  
279 when I would use them and why and I know why I wouldn't use some but I don't  
280 actually really use them so that's what counts, that's what matters.
- 281 Interviewer Can you tell me in what ways (if any) organisational intervention has made a  
282 difference to staff wellbeing in the institution?
- 283 Participant I think, I'm thinking of some of those things we've identified – yes, well definitely the  
284 Union and that's quite a big thing because that's been quite recent because the Union  
285 just dropped off to the extent that if you had a meeting the same four people would  
286 attend. I think that was around the time when there was quite a lot of agitation to  
287 strike and nobody wanted to strike and nobody wanted it and the Union was just not  
288 something people wanted to be involved with because they worried that it would

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289 mean they would have to go on strike and they didn't want to do that. The Union had  
290 to work hard to revive its image a bit and there hasn't been that proposal for some  
291 time and it has worked hard and now, when we have branch meetings, we can't close  
292 the doors because there are too many people trying to fit in and so people have  
293 actually realized that is quite an important source of support and I would say every  
294 week there are two of us reps that are in meetings that are to support staff so the  
295 Union is working and a lot of people are benefiting from having the support from the  
296 Union. So, as an intervention, and that is something staff are made aware of when  
297 they join the college, induction and so that has a considerable raised profile in the last  
298 year so that's been successful. I have no idea how many staff do use the counselling  
299 service. I've shared my views and reservations and I don't know – it's so confidential  
300 I wouldn't know. It would be interesting to know just as a sort of point of feedback  
301 over the course of the year how many staff access counselling service: that might be  
302 an interesting thing to ascertain but I don't know that. I don't know how many staff  
303 do find the time to use the gym facilities and I know that we're all required to attend  
304 staff conference - it's compulsory, not optional – so, yes, we all do these things but  
305 how many of us want to be there is another question. I don't really know and I think  
306 that's part of the gap that exists between being a staff member and management is  
307 you're not asked, you're not consulted, you're informed so you don't really know so,  
308 therefore, there is no kind of, there's no link that takes on board your views and  
309 feedback so, therefore, you don't get anything back so whatever information  
310 gathering goes on at a higher level seems to be for their purposes and we don't really  
311 get to know very much back. There was one piece of work that we were all given to  
312 do which everyone thought was pretty pointless – it's gone on for a number of years  
313 and we've been asked for our feedback and we've all said that it's a monumental  
314 waste of our time and question why we are all made to do this and year after year we  
315 were still being asked and we were still saying the same thing so it came to a point  
316 where we were having a school meeting and I did actually say, 'You know year after  
317 year we're asked our views on it and we're all sitting here now and we're all asking for  
318 it to be on the agenda because we all think it's pointless and we don't want to be  
319 involved with it anymore and that's all we are consistently saying and we just wonder  
320 if it's going to carry on, are we going to be made to this because we are all so open  
321 and clear about, and even when you ask us we tell you and what difference does it  
322 make?' The senior managers who were sitting there just said, 'No, no we're not going

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323 to take into account any of that, we have to keep doing it and you will all continue  
324 having to do the piece of work.' And I thought, 'Well that's really interesting.' So in  
325 the end the only difference we noticed after that is that they stopped asking us what  
326 we thought. I think all that did was just came to a point of why are you asking us  
327 because you don't take any notice of it and so they said no, we're not going to take  
328 any notice of it and it was almost like that was a good point so we'll stop asking you,  
329 we'll stop pretending that we care what you think about it, we're just going to say you  
330 have to do it. It was about this contact centre, we have to be admin staff, we're  
331 obliged to spend a few half days each over the summer to field calls from the public  
332 who might want to be students here that have never got anything to do with our  
333 courses so we are only able to send messages, so it's an admin function so we don't  
334 really understand why we have to do it and why it isn't just some people's job.

335 Interviewer If you have made use of the organisational interventions what have other significant  
336 others/relatives said about your attitude and behaviour since you started receiving  
337 the support?

338 Participant Right. Well, my own experience when I was off due to being unwell and having to  
339 come in didn't really have much of an impact because it was just agreed that I was  
340 unwell and I was getting the right intervention outside of work so there wasn't really  
341 many interventions that could be put into place. So for me, personally, I can't really  
342 relate to that, I can only say that in the Union rep role where I've been supporting  
343 other people that were very much at the receiving end of some of these interventions  
344 that we've talked about, it is because they've been off due to stress and they will talk  
345 about the impact that does have at home because obviously if they're stressed and  
346 off work then that creates a sense of unsettlement at home and worry amongst family  
347 members that that person might genuinely be under threat of losing their job but I  
348 personally haven't put that amount of pressure on my family.

349 Interviewer Can you tell me how you have benefited from the organisational responses to your  
350 wellbeing at work?

351 Participant Well, I think because I've always been in a position of having a very approachable line  
352 manager whose very – and I've had two because one of longstanding left two years  
353 ago and we didn't get a replacement until last year and she's brilliant – so I've always  
354 benefitted from that first line of being able to share what my concerns or stresses



Participant ID Code 2704

355 might be and kind of manage them and devolve them and get support with that but I  
356 think, and then I've only been required to attend because I was off for a period of time  
357 due to ill health which I've already mentioned, so I guess the only other bit of that  
358 would be about knowing what's there and knowing how to approach and who to  
359 approach and I think it's not always how it is for some staff. I've been here a long time  
360 and I'm involved with the Union so I feel more clear about what's about and what  
361 support I can have but I suppose the key thing is about making sure that all staff have  
362 that information because, certainly I've noticed that when some staff come for the  
363 first time to Union meeting, they're not even sure they're allowed to join the Union  
364 because of the impression or feeling they've been given from their managers. So  
365 that's just a key part of the overall culture, really. So I guess it's, for me, knowing what  
366 I'm entitled to access for support.

367 Interviewer Can you tell me what else the organisation could do to facilitate staff wellbeing?

368 Participant Well, I think it's asking staff, I think that's the ultimate flaw in all of it really. It's what  
369 polarises management and staff, it's what creates a seminal culture and I'm afraid  
370 despite, and there are a lot of proper endeavours, but as long as there's not going to  
371 be – at least no pretence – but as long as there's not going to be a line of  
372 communication with staff that says, 'we really want to know what you think and we  
373 really value that because what you tell us you think will influence how we operate and  
374 what we offer to support you'. Without that then you know, so that's key of a mental  
375 shift.

376 Interviewer Opportunities to talk, to share your views, being asked your views?

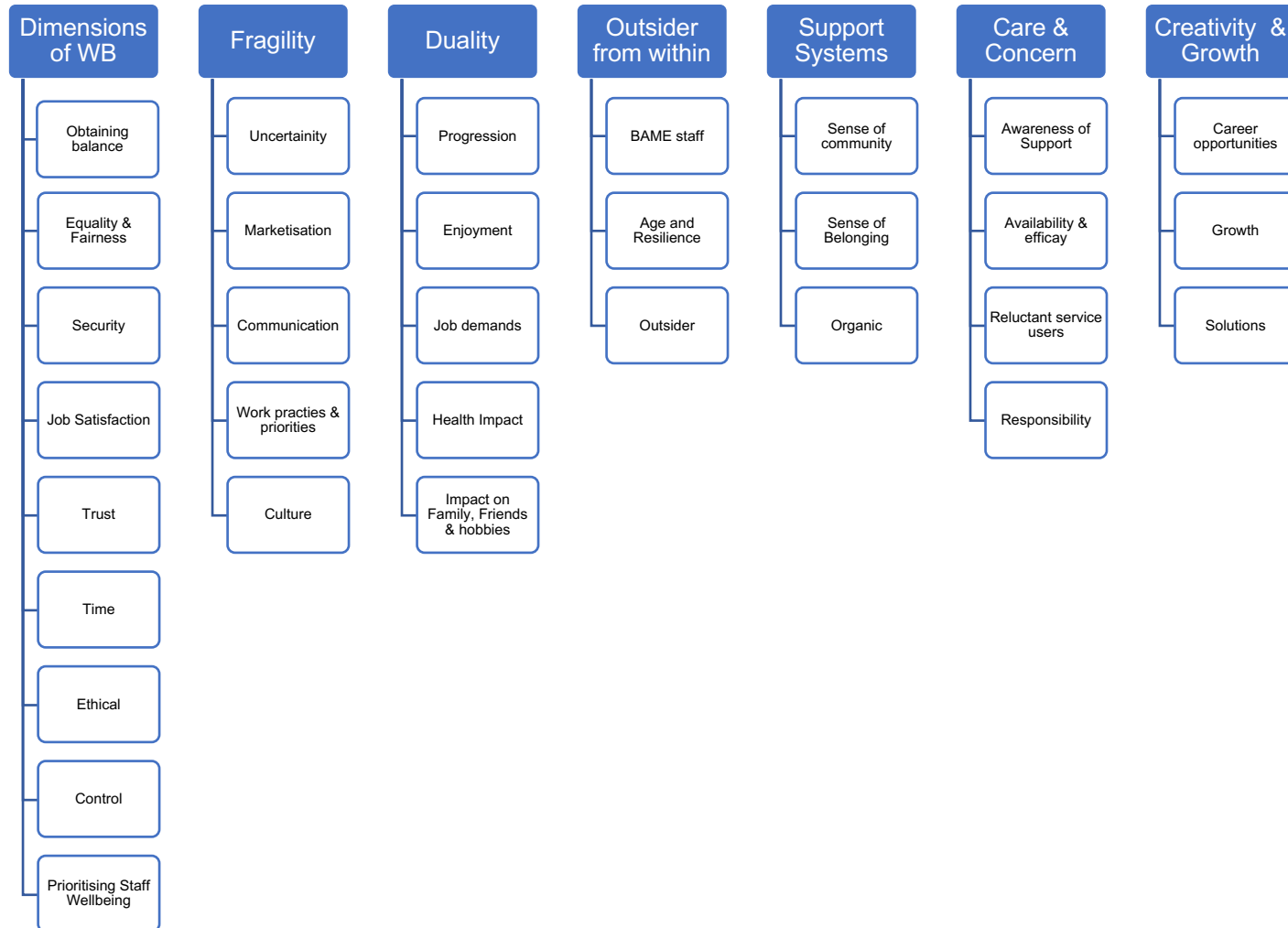
377 Participant Yes. And then actually telling you, you know, following on from that – it's got to go  
378 beyond consultation because often that can just stop at that and you never hear back  
379 – but going beyond that so that example I gave you earlier where overwhelmingly staff  
380 were saying this is meaningless and pointless, not a purposeful use of our time. We  
381 don't get it, we don't even feel as though we are able to really help people and send  
382 e-mails to make links with people who can help. There's more efficient and effective  
383 ways of doing this and so use our time more efficiently and effectively. That is a  
384 brilliant example of how management could listen and change things and respond to  
385 that and in fact the message is that 'well we're just going to stop asking you what you  
386 think then'. It's quite classic, that's really what's got to change.

Student Number N0552646

Participant ID Code 2704

387 Interviewer Thanks very much. That's the end of the interview.

## Appendix E. Framework Analysis Themes and Subthemes



## Appendix F. Survey

### Staff Wellbeing in Higher Education

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#### Start of Block: Default Question Block

Q1

This online survey is being conducted as part of a Psychology PhD project at Nottingham Trent University. The data collected will be used to investigate Staff Wellbeing in Higher Education within the UK. We appreciate your time in answering the questions about the wellbeing of staff in higher education. Your comments will help support future work in this area of research. The survey should take no more than 20 mins to complete. Most of the questions require you to state the extent to which you agree/disagree with a statement. For example, ‘my manager is committed to supporting my wellbeing at work.’ All data collected will be held confidentially, anonymously and securely. No personal data is asked for or retained. You will have the right to withdraw your data, and without giving a reason. To do this, you should send an email to [vida.douglas2013@my.ntu.ac.uk](mailto:vida.douglas2013@my.ntu.ac.uk) giving your unique identifier number (see next page). You will need to do this before **17th December 2018** as this is when the data will be used for research purposes as part of my PhD study. Cookies and or personal data stored by your web browser, are not used in this survey. If you are aged over 18, and would like to take part in the survey , then please give your consent by clicking on the continue button below. If you do not wish to participate in this survey just close the window of your browser and no data will have been recorded. Note when you have clicked on the ‘**continue**’ button at the end of each page you cannot return to review or amend that page.

#### End of Block: Default Question Block

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#### Start of Block: Block 1

Q2 Please give yourself a unique identifier and enter it in the field below. This can be a combination of letters and numbers and you should make a note of the identifier that you give yourself. You will use this identifier if you need to contact the survey author at [vida.douglas2013@ntu.ac.uk](mailto:vida.douglas2013@ntu.ac.uk) to identify and withdraw your data before 17th December 2018.

#### End of Block: Block 1

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Start of Block: Block 2

Q3 How old were you at your last birthday?

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Q4 Do you consider yourself to be disabled within the definition of the Equality Act 2010?

- 0. Yes (1)
- 1. No (2)
- 2. Prefer not to say (3)

Q5 To which gender identity do you most identify?

- 3. Male (1)
- 4. Female (2)
- 5. Transgender Female (3)
- 6. Transgender Male (4)
- 7. Gender Variant/Non-Conforming (5)
- 8. Not listed (6)
- 9. Prefer not to say (7)

Q6 Which race/ethnicity best describes you? (Please choose one)

10. White (English/Welsh/Scottish/Northern Irish/British) (1)
11. White and Black Caribbean (2)
12. White and Black African (3)
13. White and Asian (4)
14. Indian (5)
15. Pakistani (6)
16. Bangladeshi (7)
17. Chinese (8)
18. Caribbean (9)
19. Arab (10)
20. Other (11) \_\_\_\_\_

Q7 How would you describe your religious beliefs or affiliations?

21. Christian, catholic, protestant and any other Christian denominations (1)
22. Hindu (2)
23. Buddhist (3)
24. Jewish (4)
25. Muslim (5)
26. Pagan (6)
27. Spiritual (7)
28. No religion (8)
29. Prefer not to say (9)

Q8 Where is your University located?

- 30. East Midlands (1)
- 31. West Midlands (2)
- 32. London (3)
- 33. North East (4)
- 34. North West (5)
- 35. Northern Ireland (6)
- 36. Ireland (12)
- 37. Scotland (7)
- 38. South East (8)
- 39. South West (9)
- 40. Wales (10)
- 41. Yorkshire And The Humber (11)

Q9 Which best describes your University?

- 42. Pre 1992 (1)
- 43. Post 1992 (2)

Q10 What is your current employment status?

- 44. Employed full-time( 35 hours or more) Permanent (1)
- 45. Employed part-time ( 16 hours or more) Permanent (2)
- 46. Employed fulltime( 35 hours or more) Temporary (3)
- 47. Employed part-time ( 16 hours or more) Temporary (4)
- 48. Self-employed (5)

Q11 What is your current job role?

- 49. Lecturer/Senior Lecturer (1)
- 50. Manager/Senior Manager (2)
- 51. Reader (3)
- 52. Associate Professor/Professor (4)
- 53. Visiting /Hourly paid lecturers(HPL) (5)
- 54. Post -Doctoral Researcher (6)
- 55. Postgraduate Researcher (7)
- 56. Head of Department (8)
- 57. Support Services/Staff (9)
- 58. Head of HR (10)

Q12 How many years have you worked at the University?

- 59. 0-11 months (1)
- 60. 1 - 2 years (2)
- 61. 2- 3 years (3)
- 62. 3-4 years (4)
- 63. More than 5 years (5)

**End of Block: Block 2**

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**Start of Block: Block 3**



Q13 The next pages provides block statements about different aspects of staff wellbeing in higher education. Please answer in a way that reflects your experiences of wellbeing at the moment and answer as truthfully as possible. Please just select the answer that best describes you now.

**End of Block: Block 3**

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**Start of Block: Block 4**

Q14 The questions below are about your experiences of working at a university. Please mark the degree that you agree with the statements.

	1.Strongly Agree (1)	2. Agree (2)	3.Disagree (3)	4.Strongly Disagree (4)	5. Neither (5)
1. I am not worried about my current wellbeing at work (1)	64.	65.	66.	67.	68.
2. The level of trust at work is high and colleagues are supportive of one another (2)	69.	70.	71.	72.	73.
3. I feel safe and secure in the university environment (3)	74.	75.	76.	77.	78.
4. I regularly think about leaving the university (4)	79.	80.	81.	82.	83.
5. My prospect for development are good (5)	84.	85.	86.	87.	88.
6. I am worn out by the work demand and pressures (6)	89.	90.	91.	92.	93.
7. I rarely have enough time to get everything done at work (7)	94.	95.	96.	97.	98.
8. At times I have felt the need to compromise quality to get the job done (8)	99.	100.	101.	102.	103.
9. People feel positive and excited at work (9)	104.	105.	106.	107.	108.
10. My university promotes opportunities for professional and personal development (10)	109.	110.	111.	112.	113.

11. I do not feel that my current role gives me satisfaction and enjoyment (11)	114.	115.	116.	117.	118.
12. People regularly express concern about the amount of work they have to do (12)	119.	120.	121.	122.	123.
13. I have an effective working relationship with my line manager at work (13)	124.	125.	126.	127.	128.
14. It is uncommon to work long hours to complete the work required (14)	129.	130.	131.	132.	133.
15. I have witnessed or experienced discrimination at work (15)	134.	135.	136.	137.	138.
16. I do not feel that the changes in the organisation have impacted on my wellbeing at work (16)	139.	140.	141.	142.	143.
17. If something is troubling me at work I seek the support of colleagues at work (17)	144.	145.	146.	147.	148.
18. I do not feel that my work environment is appropriate for the job I do (18)	149.	150.	151.	152.	153.
19. I am satisfied with the support provided to me from colleagues (19)	154.	155.	156.	157.	158.
20. I do not feel that my safety and health is treated seriously at work (20)	159.	160.	161.	162.	163.
21. Communication between staff and managers about staff wellbeing is regular (21)	164.	165.	166.	167.	168.

22. Generally more can be done to help prepare staff to cope with change in university (22)	169.	170.	171.	172.	173.
23. Changes in the organisation have been managed well (23)	174.	175.	176.	177.	178.
24. I do not feel that my wellbeing has been impacted by recent changes in HE (24)	179.	180.	181.	182.	183.
25. I rarely feel stressed at work (25)	184.	185.	186.	187.	188.
26. I would recommend working in higher education (26)	189.	190.	191.	192.	193.
27. My prospects for promotion are good (27)	194.	195.	196.	197.	198.

**End of Block: Block 4**

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**Start of Block: Block 5**

Q15 The statements below are about your university's culture ( attitudes and behaviours) and values (principles/standards) and how they have impacted on your current wellbeing. Please mark the degree to which you agree with the statement.

	1.Strongly Agree (1)	2. Agree (2)	3.Disagree (3)	4.Strongly Disagree (4)	5. Neither (5)
1. The university is interested in my wellbeing (1)	199.	200.	201.	202.	203.
2. There is a culture of supporting staff wellbeing (2)	204.	205.	206.	207.	208.
3. The university is committed to supporting staff wellbeing at work (3)	209.	210.	211.	212.	213.
4. My manager is committed to supporting my wellbeing at work (4)	214.	215.	216.	217.	218.
5. I am able to identify with the Universities strategic direction on staff wellbeing and development (5)	219.	220.	221.	222.	223.
6. My line manager listens and responds to my views (6)	224.	225.	226.	227.	228.
7. Senior managers respond to the views of staff (7)	229.	230.	231.	232.	233.
8. The University environment encourages you to share your opinions and views (8)	234.	235.	236.	237.	238.
9. Colleagues are quick to blame others when things go wrong (9)	239.	240.	241.	242.	243.

10. Managers are quick to blame others when things go wrong (10)	244.	245.	246.	247.	248.
11. Communication between staff and managers about staff wellbeing is effective (11)	249.	250.	251.	252.	253.
12. My line manager is approachable and open to discussions about staff wellbeing (12)	254.	255.	256.	257.	258.

**End of Block: Block 5**

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**Start of Block: Block 6**

Q16 The statements below are about what you think are the important characteristics of staff wellbeing in higher education. Please mark the degree to which you agree with the statement.

	1.Strongly Agree (1)	2. Agree (2)	3.Disagree (3)	4.Strongly Disagree (4)	5. Neither (5)
1. Feeling a sense of belonging at work (1)	259.	260.	261.	262.	263.
2. Feeling valued at work by managers (2)	264.	265.	266.	267.	268.
3. Supportive colleagues/team (3)	269.	270.	271.	272.	273.
4. I need to feel a sense of security (4)	274.	275.	276.	277.	278.
5. A safe work environment (5)	279.	280.	281.	282.	283.
6. People at work that take interest in my development and needs (6)	284.	285.	286.	287.	288.
7. Feeling part of the university vision and future direction (7)	289.	290.	291.	292.	293.
8. Being treated with respect and fairly (8)	294.	295.	296.	297.	298.
9. I am trusted to do my job (9)	299.	300.	301.	302.	303.
10. Job security (10)	304.	305.	306.	307.	308.

11. Learning new things and being creative (11)	309.		310.	311.	312.	313.
12. Being satisfied with the level of responsibility in my role (12)	314.	-	315.	316.	317.	318.
13. A job role that provides satisfaction and enjoyment (13)	319.		320.	321.	322.	323.
14. Feeling valued at work by students or customers (14)	324.		325.	326.	327.	328.
15. Feeling valued at work by colleagues (15)	329.		330.	331.	332.	333.
16. Making a difference to the profession (16)	334.		335.	336.	337.	338.
17. Having flexible working arrangements (17)	339.		340.	341.	342.	343.
18. Making a difference to students/customers (18)	344.		345.	346.	347.	348.

Q17 What else do you think is important to your wellbeing at work?

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**End of Block: Block 6**

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Start of Block: Block 7

Q18 The statements below are about your university's policies on staff wellbeing. Please mark the degree to which you agree with the statement.

	1.Strongly Agree (1)	2. Agree (2)	3.Disagree (3)	4.Strongly Disagree (4)	5.Neither (5)
1. I am encouraged to take an active role in the delivery of the staff wellbeing policy (1)	349.	350.	351.	352.	353.
2. I am aware of the university policy on staff wellbeing (2)	354.	355.	356.	357.	358.
3. I am not aware of my organisation's staff wellbeing policy but have accessed services/support (3)	359.	360.	361.	362.	363.
4. The staff wellbeing policy has a clear purpose, objectives and action plan (4)	364.	365.	366.	367.	368.
5. I understand how to report concerns about the wellbeing of other staff/colleagues (5)	369.	370.	371.	372.	373.
6. I do not feel that the policy clearly states the services and support available to staff (6)	374.	375.	376.	377.	378.

7. I think the staff wellbeing policy is extensive (7)

379.

380.

381.

382.

383.

8. I can easily find information about supporting staff wellbeing in the University (8)

384.

385.

386.

387.

388.

9. Information about supporting staff wellbeing is available on the university's website (9)

389.

390.

391.

392.

393.

**End of Block: Block 7**

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**Start of Block: Block 8**

Q19 The statements below are about your university's services available to support staff wellbeing. Please mark the degree to which you agree with the statement.

	1.Strongly Agree (1)	2. Agree (2)	3.Disagree (3)	4.Strongly Disagree (4)	5. Neither (5)
1. I know what services are available to support my wellbeing at work (1)	394.	395.	396.	397.	398.
2. I have used the service available to support my wellbeing (2)	399.	400.	401.	402.	403.
3. The services provided are effective (3)	404.	405.	406.	407.	408.
4. The services on offer value my opinions/views (4)	409.	410.	411.	412.	413.
5. My views about the services to support my wellbeing are shared with senior managers (5)	414.	415.	416.	417.	418.
6. My University encourages me to take regular breaks (6)	419.	420.	421.	422.	423.

7. I have a place to take regular breaks at work (7)	424.	425.	426.	427.	428.
8. Staff Counselling services are available (8)	429.	430.	431.	432.	433.
9. The staff counselling service is accessible (9)	434.	435.	436.	437.	438.
10. I would use the staff counselling services if I needed to (10)	439.	440.	441.	442.	443.
11. Training and personal development services have helped to support my wellbeing (11)	444.	445.	446.	447.	448.
12. The university provides opportunities for me to access coaching and mentoring programmes to support me in my role/wellbeing (12)	449.	450.	451.	452.	453.

**End of Block: Block 8**

**Start of Block: Block 9**

Q20 The statements below are about who should be responsible for staff wellbeing. Please mark the degree to which you agree with the statement.

	1.Strongly Agree (1)	2. Agree (2)	3.Disagree (3)	4.Strongly Disagree (4)	5.Neither (5)
1. I believe that my University should provide services to support and maintain my wellbeing at work (1)	454.	455.	456.	457.	458.
2. I understand my role in supporting the wellbeing of staff (2)	459.	460.	461.	462.	463.
3. I understand how to respond appropriately to colleagues requiring support (3)	464.	465.	466.	467.	468.
4. If something is troubling at work I would seek the support of managers (4)	469.	470.	471.	472.	473.
5. I am able to support the wellbeing of other colleagues/staff (5)	474.	475.	476.	477.	478.

6. I feel that managers do not understand their responsibility to support my wellbeing (6)

479.

480.

481.

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483.

7. Generally I do feel more could be done by managers to support the wellbeing of staff at work (7)

484.

485.

486.

487.

488.

**End of Block: Block 9**

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**Start of Block: Block 10**



Q21 The statements below are about the future of staff wellbeing in higher education. Please mark the degree to which you agree with the statement.

	1.Strongly Agree (1)	2. Agree (2)	3.Disagree (3)	4.Strongly Disagree (4)	5. Neither (5)
1. I am concerned about my future wellbeing the longer I work at the University (1)	489.	490.	491.	492.	493.
2. I am optimistic about the future of staff wellbeing in universities (2)	494.	495.	496.	497.	498.
3. The work place environment creates high levels of trust and optimism for the future (3)	499.	500.	501.	502.	503.

Q22 Please provide any additional comments about the future of staff wellbeing

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End of Block: Block 10

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Start of Block: Block 12

Q23 There is interest in the area of staff wellbeing in higher education. The findings of the PhD will be shared at a Staff Wellbeing Conference planned for 2019. If you would like to attend the conference or receive the overall findings from the PhD please leave your email address below.

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End of Block: Block 12

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Start of Block: Block 11

Q24 Thank you for taking the time to help with this survey. Your data has now been submitted and will be used as part of a large data set, to examine staff wellbeing in higher education. If you wish to withdraw your data from this research please email to [vida.douglas2013@my.ntu.ac.uk](mailto:vida.douglas2013@my.ntu.ac.uk) giving your unique identifier number. You will need to do this before **17th December 2018** as this is when the data will be used for research purposes as part of my PhD study. Please close your browser window to exit this survey.

End of Block: Block 11

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## Appendix G. Summary of Literature (See below)

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Wood, C. (2010) Manchester, UK	“Employee Wellbeing in the Higher Education Workplace: a role of emotion scholarship”	To understand the relationship between emotions and the work environment.  Application of theory of appraisal (1991)	N/A  Conceptual Framework	N/A	“Questionnaire and qualitative research concerned with capturing attitudes to workplaces. It is rare to see items which ascertain the priorities and concern of the individual.”  Regular dialogue required with staff and managers.	“Foregrounding emotions, as opposed to stress or attitudes, presents a richer/more nuanced picture.” (p174).  Defines emotion- “self-referent and is bound up with individual values and identity(sense of self-worth).”  “Many emotions can co-exist - this complexity requires a shift from binary terms ‘good or bad/stressed’	“Research with specific focus on emotion has been under-exploited.  Little explicit overlap between work on identity and emotion.  More studies that explore the lived experiences of the workforce are needed”.

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Strevens, C. and Wilson, C. (2018) UK	“Perceptions of wellbeing in law teachers.”	“1. To explore how law teachers understand psychological wellbeing. 2. To explore how they perceive and maintain their own wellbeing. 3. How they seek to maintain the psychological wellbeing of their students.”	Face-to-face interviews, focus group and survey.  (Multi-methods)	24 Interviews 185 Surveys	Stress is associated with work.  REF goals expect staff to go the ‘extra mile’.  Concerns about balancing workload.  Wellbeing associated with friends and family.  Little mention of peer support (friendships)	Mixed methods approach  Collaborators in Australia are running a similar study and plan to analyse data.  Focus on academics.	Future research to rebalance work.  Development, dissemination, and evaluation of resources to support student wellbeing.
Akram, M. (2019) Pakistan	“Psychological Wellbeing of University Teachers in Pakistan.”	“To compare the psychological wellbeing of public and private university teachers in Pakistan.”	Psychological wellbeing scale (Quantitative)	437	“Teachers did not differ significantly in their wellbeing based on location.  Teachers in higher ranks and teachers in lower ranks differed in their wellbeing. Male and female lecturers perceived similar levels of PSWB”	“Professors had better psychological wellbeing than assistant professors and lecturers  Female teachers reported higher scores in developing positive relations.”	“Research to see if the wellbeing of teachers is influenced by demographics, work stress, conflicting situations of the organisation, and health.”

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Sang et al. (2013) China, Sydney and Lancaster (UK)	“Modelling Occupational Stress and Employee Health and Wellbeing in a Chinese Higher Education Institution”	“To test and refine the ASSET (An Organisational Stress Screening Tool) model of occupational stress.  Explore the relationship between job stressors and individual health, job dissatisfaction, and commitment.”	ASSET scale (Quantitative)	150	“There was no difference in levels of job satisfaction between males and females.  Academic staff reported high levels of job stressors relating to workload and work-life balance.  The results indicate participants had high levels of engagement despite high levels of job stressors and job dissatisfaction.”	Universities to introduce strategies to minimise job stressors.	“Multiple data collection techniques should be undertaken (including peer evaluations).”
Dryer et al. (2010) New Zealand	“The Health and Wellbeing of Staff at a Tertiary Institution in New Zealand”	“To determine the physical, psychological, and biochemical health status of staff”	Perceived stress scale  Health Screening questionnaires  Physiological variables  Fasting blood samples  (Quantitative)	81	“Many staff at tertiary institutions may be at risk of cardiovascular disease.  Reported emotional exhaustion seems to be a significant contributor to the variance of health in males and females.”	“Level of cardiovascular fitness improves overall health status but does not negate the relationship between emotional exhaustion and health.  Work environment negatively impacts cardiovascular and overall health.  Interventions are required in areas of stress management and mental health.”	

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Teixeira et al. (2021) Australia New Zealand	“An Exploratory Study of Perfectionism, Professional Factors and Psychological Wellbeing of Dentistry Academics”	To understand dentistry academics wellbeing and its association with perfectionism, professional factors, and socio-demographics.	Cross-sectional online survey in 9 tertiary educational institutions, 8 Universities in Australia and 1 in New Zealand	119 (94 providing completed data)	<p>“No significant association between perfectionism and wellbeing.</p> <p>Academics teaching undergraduates for more than 6 hours per week reported poorer wellbeing.</p> <p>Significant association between psychological wellbeing and age, income, and health.”</p>	“Younger participants reported poorer wellbeing than their older colleagues.”	“More research is needed to explore how teaching contributes to poor wellbeing.”
Mahony, P. & Weiner, G. (2020) UK	“‘Getting in, getting out’: Black, Asian and Minority Ethnic Staff in UK higher education.”	Investigate Black, Asian and minority ethnic (BAME) staff’s experiences in Higher Education	Semi-structured interviews (Qualitative)	6 White Staff 8 BAME staff	<p>“Microaggressions were experienced by men and women.</p> <p>Racialised staff often assumed to be less competent than white colleagues.</p> <p>Participants tended to bear the brunt of unfair working conditions compared to White colleagues.”</p>	<p>“Inadequate support from colleagues/university management often deters BAME staff from making further complaints.</p> <p>Lack of awareness among many white staff about what constitutes racism and how it can be tackled.”</p>	

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Bell et al. (2012) Australia	“Job Stress, Wellbeing, Work-Life Balance and Work-Life Conflict Among Australian Academics”	To understand the relationship between work-life balance/conflict, perceived job stress and wellbeing/illbeing	Wellbeing Scale Job Stress scale Work-Life balance Scale Work-Life conflict scale (Quantitative)	139 academic staff	“Perceived job threat stress more strongly related to work-life conflict and work-life balance than job pressure.  Job threat stress made strongest unique contribution to wellbeing.”	More research on wellbeing required.  Strategies to reduce stress, including mindfulness, meditation classes, and good food choices.	“Future research is required in areas of stress, health, and work-life balance to improve academic work-life balance.”
Kinman et al. (2006) UK	“The Wellbeing of the UK Academy, 1998-2004”	Compared findings of two studies, conducted in 1998 and 2004 about experiences of academic staff in universities	Postal self-report questionnaire (Quantitative)	650 academics (1998) 844 academics (2004)  Response rates achieved were 39% (1998) and 22% (2004).	Staff wanted to leave the profession.  Excessive working hours and working at the weekend.  Incidence of psychological distress and plans to leave	Staff were employed on permanent contracts.  “Academics gain support from colleagues and immediate managers - there is little belief in senior management.”	Comparisons between levels of stressors and psychological distress.
Williams et al. (2017) UK	“Stress and Wellbeing of University Staff: An Investigation Using the demands-Resources-Individual Effects (Drive) Model and Well-being Process Questionnaire (WPQ)”	“To investigate university staff’s wellbeing using the Demands-Resources-Individual Effects (DRIVE) model”	Wellbeing process Questionnaire Online survey (quantitative)	120 university staff	“Positive wellbeing was predicted by positive personality and positive coping.  Negative outcomes such as stress and anxiety were predicted by job demands and negative coping.”	Few studies on positive outcome - life satisfaction, positive affect, and happiness.	

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Mudrak et al. (2018) Czech Republic	“Occupational Wellbeing Among University Faculty: A Job demand Resources Model”	“The application of Job Demand Resources (JDR) model to examine how academics perceived their workplace and how these perceptions related to their occupational wellbeing.”	Online survey (Quantitative)	1389	<p>“Strongest predictor of work engagement was influence over work, followed by support.</p> <p>Strongest predictor of stress was work-family conflict.”</p>	<p>“Job demands and work conflict appeared to be the most significant stressors for academics.</p> <p>Evidence of motivational process taking place between job resources and work engagement.”</p>	“A large variance in wellbeing variables remained unexplained. Suggests that other factors not included in the study might have a similar or greater effect.”
Fetherston et al. (2020) UK Australia	“Wellbeing and work-life merge in Australian and UK academics”	Explore academic wellbeing and the roles played by factors related to work-life merge.	Online survey (Quantitative)	605 Australian participants 313 UK participants	<p>“Over 2/3 of Australian and UK Academics worked an average of 16-18 hours a week in excess of their contract.</p> <p>Perceived physical health good despite only 20.4% (AU) and 18% (UK) of participants spending a minimum of 150 mins in moderate aerobics activity a week.</p> <p>Intrinsic and extrinsic factors influence psychological wellbeing.</p> <p>Strongest negative predictor was perceived impact of work-life merge.”</p>		To inform wellbeing discourse and planning there is a need to undertake a meta-analysis of existing studies on the wellbeing



Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Akanni et al. (2021) Nigeria	“The relationship between emotional intelligence and employee wellbeing through perceived person-job fit among university academic staff: A Structural Equation Modelling Approach”	“Examined the indirect effect of perceived person-job fit on the relationship between emotional intelligence and employee wellbeing”	3 Psychological scales (Quantitative)	257 academic staff	“Emotional intelligence and perceived person-job fit have strong positive relationships with employee wellbeing.”	Emotional management training	“Investigate the mediating role of perceived job-fit on the relationship between EI and employee wellbeing using cohort or longitudinal studies to establish elements of a causal relationship.”

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Kinman, G. & Jones, F. (2008) UK	“A Life Beyond Work? Job Demands, Work-Life Balance, Wellbeing in UK Academics”	“Examination of work demands, work-life balance, and wellbeing in UK academic staff.”	“Used various scales relating to job demands, work/life conflict, job control, schedule flexibility, employer support, psychological wellbeing, somatic symptoms, job satisfaction.”	844 respondents (only used data from those who identified as lecturers/researchers)	<p>“Academics perceived more job demands and experienced higher levels of work-life conflict.</p> <p>Job demands were related to ill health symptoms and dissatisfaction.</p> <p>Symptoms most commonly reported were fatigue, sleeping difficulties, and headaches.</p> <p>¾ of sample indicated they worked longer hours.</p> <p>Level of psychological distress is higher than found in other professional groups.</p> <p>Most lecturers working in excess of 48 hours a week.”</p>		“Further research is necessary in order to inform the development of strategies that academics might adopt to enhance work life balance.”
Evans, L. (2017) UK	“The worst of times? A Tale of two higher education institutions in France: their merger and its impact on staff working lives”	“To examine the extent to which and in what ways the institutional merger impacts individuals: their attitudes, emotions, and ways of working.”	Semi-structured interviews (Qualitative)	32 (16 from each university)	<p>Perceptions of the workplace merger.</p> <p>Widespread frustration due to merger</p>	<p>HE context characterised by change.</p> <p>According to literature, post mergers can take up 10 years for staff to recover.</p>	

Author(s), Year & Country	Title	Aims and Objectives	Method	Sample Size	Main Findings	Comments	Future Research
Newton et al. (2016) UK	“Healthy universities: an example of whole- system health-promoting setting”	Explored how the concept of a healthy university is operationalised in 2 universities	Case study	2 universities	Leaders and decision-makers need to be clear about the “definitions and meanings given to wellbeing in the organisation”.	Emphasises the importance of clarifying organisational values related to wellbeing	
Straaten et al. (2016) South Africa	“Enhancing the wellbeing of support services staff in higher education: The power of appreciation”	“To address the lack of research on wellbeing amongst support staff  Explore driving forces that might enhance their wellbeing”	Qualitative action research design involving Appreciative Inquiry Workshop with support staff	20 participants on one campus	“Positive core that drives enhancement involves: willingness to adapt, hard-working dedicated staff, positive relations among colleagues, supervisors, job security, and a supportive work environment.  Ways to enhance wellbeing are manageable workloads, creating opportunities for promotion, valuing and acknowledging contributions, adequate support services to do the work.”	AI is described as the “research for the best in people and their organisation.’ A discovery of what makes the support staff institution feel most alive and most effective .....	

**Appendix G. Summary of Literature review (Studies with a focus on staff in Higher Education. Source: Includes extracts**

## Appendix H. FOI request and questions



### Registrar's Office

Queen's University Belfast  
Belfast  
BT7 1NN  
Northern Ireland  
Tel +44 (0) 28 9097 2500  
[www.qub.ac.uk](http://www.qub.ac.uk)

Our ref: FOI-19-130

3 June 2019

Ms Vida Douglas

Email: [request-569967-ae495f57@whatdotheyknow.com](mailto:request-569967-ae495f57@whatdotheyknow.com)

Dear Ms Douglas

Further to your access to information request received on 29 April 2019 please find attached the University's response in relation to your request for information about staff wellbeing in Higher Education.

The information requested is as follows (covering the last 12 months):

1. **The job title of the senior manager with lead responsibility for staff wellbeing in the University.**  
University Executive Board has lead responsibility and Head of Reward has responsibility for co-ordination.
2. **The number of mental health specialist staff available within the university to support staff wellbeing.**  
All mental health specialist services are outsourced.
3. **A copy of the University's Policy (procedures)/other relevant document(s) to support the wellbeing of staff.**
  - a. Queen's University Corporate Plan 2016 – 2021 (attached)
  - b. Health & Wellbeing site is still being developed but does provide links for support - <https://www.qub.ac.uk/directorates/HumanResources/pay-rewards-and-benefits/health-and-wellbeing/>
  - c. Managing Stress Toolkit - <http://www.qub.ac.uk/directorates/HumanResources/managers/sickness-absence-toolkit/managing-stress/>
  - d. Occupational Health - <http://www.qub.ac.uk/directorates/HumanResources/employees/occupational-health/>
  - e. Family Leave Policies - <http://www.qub.ac.uk/directorates/HumanResources/managers/leave-toolkit/family-leave/>
  - f. Flexible Retirement - <http://www.qub.ac.uk/directorates/HumanResources/leaving-the-university/>
  - g. OMNI - <https://www.qub.ac.uk/sites/StaffGateway/News/QueensStudentsUnionlaunchesOMNIstudentMentalHealthcampaign.html>

4. **The type of services offered to support staff wellbeing in the University**
  - a. Occupational Health Service
  - b. Employee Assistance Programme (counselling for a range of issues that may affect our staff - Alcohol problems; Anxiety or Depression; Bereavement; Bullying and Harassment; Debt problems; Drug related problems; Employment concerns; Experience of a traumatic event; Family worries; Personal relationship problems; Stress at work or at home). This service is completing anonymous as no referral required, and includes a helpline, available 24/7.
  - c. Calendar of wellbeing activities:
    - i. Lunch & Learn information/awareness raising sessions
    - ii. Staff Choir
    - iii. Physical activity classes
    - iv. Employee networks (Carers, LGBT+, etc)
    - v. Training (Stress control, mood matters, etc)
5. **The number of referrals to services offered where staff wellbeing was a primary reason for the referral**

319
6. **Staff take up (number) by each service offered to support staff wellbeing.**
  - a. Occupational Health Service – 203
  - b. Employee Assistance Programme – 116
  - c. Wellbeing activities – 1,500

If you are dissatisfied with the handling of part of your request, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original request and should be addressed to the Information Compliance Manager c/o [info.compliance@qub.ac.uk](mailto:info.compliance@qub.ac.uk). Please remember to quote the reference number FOI-19-130 in any future communications.

If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF.

Yours sincerely

Sandra McDonald  
Information Compliance Unit

Dear Ms Douglas

Freedom of Information Request (our reference FOI19170)

We refer to your Freedom of Information request dated 10 November 2018, and your email of 15 April 2019 confirming that you do still require the information. You requested the following information:

“I would like to request the following information, covering the last 12 months:

1. The job title of the senior manager with lead responsibility for staff wellbeing in the University.
2. The number of mental health specialist staff available within the university to support staff wellbeing.
3. A copy of the University’s Policy (procedures)/other relevant document(s) to support the wellbeing of staff.
4. The type of services offered to support staff wellbeing in the University
5. The number of referrals to services offered where staff wellbeing was a primary reason for the referral
6. Staff take up (number) by each service offered to support staff wellbeing.”

University’s Response

Further to Section 1 of the Freedom of Information Act 2000 (the “Act”) we confirm that the information requested is held by the University of Bristol (the “University”).

1. The job title of the senior manager with lead responsibility for staff wellbeing in the University.

Staff wellbeing is the responsibility of the Chief People Officer and of the Deputy Vice-Chancellor and Provost.

2. The number of mental health specialist staff available within the university to support staff wellbeing.

The Staff Counselling Service is staffed by a team of seven part-time counsellors and psychotherapists (2.2 FTE), and one professionally qualified mental health nurse. The University also has an Occupational Health Service through which employees can be referred for mental health support outside the University.

University staff also have access to an Employee Assistance Programme run by a third-party provider. The EAP offers a 24-hour confidential helpline staffed by counsellors, access to counselling sessions (based on assessment of need), online resources and a mobile app.

3. A copy of the University’s Policy (procedures)/other relevant document(s) to support the wellbeing of staff.

The University’s new staff mental health and wellbeing strategy is available on the University’s website:

[1] <http://www.bristol.ac.uk/university/medi...>

4. The type of services offered to support staff wellbeing in the University

The University provides several support services for staff, as outlined in question 2 above, and offers training on a range of topics linked to wellbeing. Staff can also complete a wellness action plan, as advocated by the charity MIND, to help map out what support may be required.

The Staff Counselling Service offers individual counselling sessions, and group sessions on various wellbeing topics including basic mindfulness.

The Occupational Health Service provides advice and support to both managers and individuals. The Service receives referrals to support University staff with a range of physical and mental health issues impacting on attendance and/or performance at work, with the ultimate aim of helping to keep employees healthy and at work. Occupational Health can make recommendations for workplace adjustments, or refer employees to external sources of support.

5. The number of referrals to services offered where staff wellbeing was a primary reason for the referral

University staff seek support from the Staff Counselling Service in relation to a wide range of presenting issues, all of which have the potential to impact on their wellbeing. In 2018, the Service received 436 requests for support.

Occupational Health received 211 staff referrals in 2018, on a range of physical and mental health issues that all have an impact on wellbeing.

6. Staff take up (number) by each service offered to support staff wellbeing.

In 2018, 332 employees were supported by the Staff Counselling Service.. 300 employees attended group sessions in addition to or instead of individual counselling sessions.

Of the 211 University employees referred to the Occupational Health Service in 2018, 208 accepted support from the Service.

In the 12 months from May 2018 to May 2019, over 700 members of staff attended workshops (run or facilitated by the Staff Development team) on wellbeing topics ranging from 'building inner resilience' and 'managing yourself and your time' to 'mental health first aid for higher education'.

Internal Review Procedure

If you are dissatisfied with the handling of your request, then you have a right under Section 50 of the Act to request an internal review. All such requests must be sent to us within 40 days, and must clearly state our reference number (at the top of this email) and your reason for requesting an internal review. We will respond to your request for an internal review within 20 working days of receipt.

Your request for an internal review should be sent to:

Director of Legal Services  
Secretary's Office  
University of Bristol  
Senate House  
Tyndall Avenue  
Bristol  
BS8 1TH

Or you can email your request to [University of Bristol request email], quoting your FOI reference number at the head of this letter.

Information Commissioners Office

Should you remain dissatisfied with the final outcome of the internal review then you may apply directly to the Information Commissioner (the "ICO") for an independent review. The ICO is the Government's Independent Body responsible for overseeing the Freedom of Information Act 2000, the Data Protection Act 1998 and The Environmental Information Regulations 2004.

Please note the ICO will only review cases that have exhausted the University's internal review procedure. All correspondence to the ICO must



quote the University's reference number and your reasons for your appeal.

The ICO's contact details are as follows:

The Information Commissioners Office

Wycliffe House

Water Lane

Wilmslow

Cheshire

SK9 5AF

More information can be found at the ICO's website

at [2] <http://www.ico.org.uk>

Kind Regards

Freedom of Information Team

University of Bristol

### **References**

Visible links

1. <http://www.bristol.ac.uk/university/medi...>

2. <http://www.ico.org.uk/>

## **Appendix I. Example of Analysis - Staff Wellbeing Policy Analysis (x2)**

### **Questions for Policy analysis: University A**

#### **1. How is wellbeing defined?**

Preventing and managing sickness in partnership with the employee is seen as central to the approach taken to address staff wellbeing. The policy articulates that wellbeing is further achieved when a culture exists that actively supports employees who have caring responsibilities and a positive work-life balance can occur there.

#### **2. What measurement is the University using to understand wellbeing?**

Sickness absence. They also use the completion of an individual risk assessment (See appendix 1) and reasonable adjustment guidance, detailed in Appendix 3 of the report. The management of stress is identified within the policy as a key measure of staff wellbeing. The definition utilised for stress is 'the adverse reaction people have to excessive pressure or other types of demand placed on them.' The standard/measures used include the following:

- Control - Do people have a say in their work?
- Demands - How do staff feel about their workload, work patterns and work environment?
- Support - What services and support are available to develop and encourage staff?
- Relationships - How are conflicts and unacceptable behaviours managed within the organisation?
- Role - Are staff clear about their roles and do they not have conflicting roles?
- Change - Is the process for organisational change clearly communicated to staff and managed in a timely way?

#### **3. What is the problem the policy seeks to address?**

The policy aims to improve attendance levels amongst staff. A partnered approach between staff, managers, and trade unions, where all take responsibility for improving wellbeing, will help to develop a culture in which staff can positively succeed in their tasks and flourish at work.

#### **4. How does the policy seek to address this issue?**

To address this issue, the policy states that managers must respond in a consistent manner to all staff. Guidance will be provided on the information required by managers to support sickness absence issues. The guidance will provide further clarity on the role and expectations of managers and staff, with everyone expected to contribute to a positive environment in which both the health and attendance of staff are improved.

#### **5. Who was involved in the development of the policy? How have they contributed to the development of the policy?**

UCU, The Trade Unions, and Unions have contributed to the development of the policy. It is unclear how staff have directly informed the content of the policy.

#### **6. Who is affected by the policy?**

This policy applies to all staff.. Staff are considered to have a key role in taking responsibility for managing their wellbeing and seeking assistance from their line manager, gaining medical advice where necessary, and returning to work only when they are well enough to so.

#### **7. What are the expected short-term and long-term outcomes of the policy?**

Improvement in attendance figures is a central focus of the policy. However, the university recognises that, to improve attendance, the culture of the organisation must create an environment where staff feel valued and are treated fairly and equally.

#### **8. What resources are available to implement the policy?**

Training for managers in the management of sickness absence, monitoring workload allocations and undertaking regular risk assessments. There are routine workshops available to support staff wellbeing, such as Mental Health First Aid, dealing with Difficult situations, and conflict resolutions, which are made available to all staff. External support is available through the school's occupational Health Service and the Employee Support Programme. Specific post-holders, such as the Health and Safety Manager, provide guidance on safety matters impacting both staff and students. When responding to concerns about staff wellbeing, managers are encouraged to seek guidance from HR and demonstrate knowledge of the Health and Wellbeing policy and supporting policies, such as Flexible working. To further support staff, wellbeing schemes are in place, such as the Cycle to Work scheme and Access to Work scheme (which is a government organisation providing advice for disabled people who are in work or about to start work). Other services are also available, such as a Gym, and Healthy Eating Options, which are available at the campus restaurant.

**9. Is there a date by which the policy is to be reviewed?**

The policy was developed in 2014 and updated in May 2017. It is unclear who was consulted about the update of the policy and it is noted that the policy is now 3 years old.

**Vida Douglas**

**24/2/2020**

## Appendix J. Example of Staff Wellbeing policies(x2)



### Policy Coversheet

<b>Name of Policy:</b>	<b>Health and Wellbeing</b>
<b>Purpose of Policy:</b>	<b>To advise staff on health and wellbeing</b>
<b>Intended audience(s):</b>	<b>All Staff</b>
<b>Approval for this policy given by:</b>	<b>Sustainability and Resources Committee</b>
<b>Last Review Date:</b>	<b>November 2016</b>
<b>Review Due Date:</b> (3 years from last review)	<b>November 2019</b>
<b>Individual responsible for review:</b>	<b>HR Business Partner</b>
<b>Authorising department:</b>	<b>Human Resources and Organisational Development</b>

## Health and Wellbeing Policy



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## **1. Introduction**

Staffordshire University is committed to the health and wellbeing of staff. The University has in place a comprehensive package of wellbeing measures including Occupational Health Services, an Employee Assistance Programme, and a rolling programme of wellbeing and healthy lifestyle events. This approach aims to work in partnership with staff to promote wellbeing, to prevent sickness absence wherever possible and to manage cases of sickness absence where they occur within a constructive framework of policy and procedures.

As part of the University's commitment to provide the highest standards of learning and teaching experience to students, supported by high quality business services, Staffordshire University needs and values good attendance by staff. Sickness absence is costly to the University, both from a financial perspective and in terms of ability to provide and sustain the level of customer service we would all wish to provide.

The University is fully committed to supporting staff in achieving good attendance levels although it recognises that employees experiencing ill-health may require periods of sickness absence from time to time. It is also recognised that some ailments may not preclude individuals from working and making a valid contribution, albeit that it may not be at their normal level of performance. In these circumstances, the University will make all reasonable efforts to support employees whose performance may be reduced due to a health issue.

This document should be used alongside the Sickness Absence Management Procedure, which outlines the process that should be followed in the management of short and long term absence(s) from work due to ill-health.

Further guidance and information, including template letters can be found on the Human Resources and Organisational Development page in IRIS.

## **2. Roles and responsibilities**

### **2.1 Managers**

Managers within the University are responsible for:-

- Ensuring that, as part of induction, employees are made aware of the University's sickness absence procedures and supporting guidance
- Ensuring that the Sickness Absence Procedure and guidelines are followed, and seek appropriate advice from Human Resources and Organisational Development when necessary
- Providing accurate and timely information to Human Resources and Organisational Development in respect of employee sickness absence

- Advising the Sickness Absence Co-ordinator when an employee returns to work
- Ensuring that employees who are absent through sickness are treated in a fair and consistent way, with sensitivity and confidentiality
- Remaining in appropriate contact with staff who are absent from the University due to sickness
- Providing support and encouragement to facilitate the smooth return to work for employees after periods of absence
- Implementing medical advice received from the University's Occupational Health Adviser in order to facilitate a return to work on a sustained basis, where appropriate.
- Making all reasonable efforts to support employees whose level of performance at work may be temporarily reduced as a result of a health issue
- Sharing a commitment to effectively manage and monitor the sickness absence of employees in all areas of the University

## **2.2 Employees**

It is the responsibility of the employee to:

- Take personal responsibility for his/her attendance at work, recognising that full attendance is the standard expected
- Make him/herself familiar with the provisions of the University's Sickness Absence Management Procedure and supporting guidelines
- Personally inform either their line manager or sickness absence coordinator who will notify their line manager as early as possible, in accordance with the guide, if they are unable to attend for work due to personal illness or injury
- In exceptional circumstances, where an employee is not able to make a phone call (i.e. they have been hospitalised), then a family member or friend should report the sickness on their behalf and the employee should make contact with the University as soon as they are able.
- Observe the University's notification procedures including the prompt submission of medical certificates as necessary, as outlined in the Sickness Absence Management Procedure
- Keep their manager informed of their progress and make him/her aware of any medical developments on a regular basis throughout a period of sickness
- Attend appointments with the University's Occupational Health Consultant/Advisor, if required, in accordance with the contract of employment
- Follow any medical advice received from his/her own General Practitioner/Specialist or the University's Occupational Health Advisor in order to restore good health as quickly as possible
- Take personal responsibility for his/her recovery and timely return to work.

### **2.3 Sickness Absence Coordinator**

It is the responsibility of the Sickness Absence Coordinator to:

- To take phone calls from employees reporting sickness absence within normal working hours and to ensure the service is provided where appropriate by a colleague or deputy in their absence;
- Record all of the information required from the employee in accordance with the Sickness Absence Management Procedure;
- Advise the line manager of the absence and complete the first section of the Return to Work form as appropriate, escalate to the line manager where alternative cover is required; and
- Enter the sickness absence details on Resourcelink and close the record when the employee returns to work.

### **2.4 Human Resources and Organisational Development**

The University, acting through the staff of Human Resources and Organisational Development, is responsible for:

- Informing all staff of the provisions of the Sickness Absence Management Procedure and supporting guidance
- Ensuring that the Sickness Absence Management Procedure and supporting arrangements are applied consistently and fairly
- Training managers in the understanding and implementation of the Sickness Absence Management Procedure and supporting arrangements to ensure consistency and equality in application
- Advising managers in the management of sickness absence and advising them in the use of the procedures and guidance
- Acting in accordance with all relevant legislation including the Equality Act 2010, Access to Medical Records Act 1988, the Data Protection Act 1998, and the ACAS Code of Practice
- Managing the Occupational Health contract and arranging for referral to the Occupational Health Service, where appropriate, in order to inform decisions in relation to an individual's health and absence
- Maintaining absence records and correctly applying sickness payments including statutory requirements
- Providing managers with access to information in relation to staff sickness absence to assist in the management and improvement of attendance
- Developing initiatives that further support a healthy workforce and improve attendance levels across the University
- Managing the Employee Assistance Programme contract, ensuring high levels of service provision and value for money



### **3. Supporting Services**

#### **3.1. Occupational Health Service**

An employee may be referred to Occupational Health by the line manager or Human Resources and Organisational Development if there is concern about the length, frequency or pattern of sickness absence(s), or if there is concern about his/her health and ability to carry out their duties even though he/she may not be absent from work. An employee must attend appointments with Occupational Health, as requested, and in line with the contract of employment.

The University's Occupational Health provision is contracted out to a third party organisation that provides a wide range of health advice and related support to the University. The Occupational Health Service is beneficial to the University and its employees, providing independent advice about an employee's fitness to work and rehabilitation needs together with advice on a range of general and other health issues affecting staff across the University.

#### **3.2. Programme of Health & Wellbeing Initiatives**

The University is committed to the creation of a workplace designed to protect the health and wellbeing of employees and optimise the opportunity to help people to improve their own health and prevent sickness wherever possible.

A rolling programme of health and wellbeing initiatives are organised which are designed to provide staff with advice, guidance and resources to enable them to maintain a healthy lifestyle.

#### **3.3. Employee Assistance Programme**

The University provides an Employee Assistance Programme, currently through Right Management. The aim of this service is to provide staff with a free, confidential source of advice on issues of concern to them. The Employee Assistance Programme is based on a telephone helpline staffed by specially trained advisors, who can be contacted 24 hours a day, 365 days a year on a strictly confidential basis. Contact details are available on the University website, publicity materials displayed around the University or from Human Resources and Organisational Development. Callers to the helpline will be given support, advice and information to deal with any issues they may be facing. The helpline service can be complemented by face-to-face counselling.

#### **3.4. Day 1 Intervention for Stress**

When an employee commences a period of absence due to stress an early intervention can positively support the member of staff, both in terms of making them aware of the sources of help available to them and to return to work at the earliest opportunity. The

University's employee assistance provider, Right Management operates a support package called Day 1 Intervention for Stress, which aims to provide immediate support to an employee who is absent with stress. When it is recognised that an individual is absent from work due to stress, the line manager can make contact with Right Management to access this support for the member of staff. Further information can be found on the University website or by contacting a member of Human Resources and Organisational Development.

### **3.5. Equality and Diversity**

Staff with a disability related enquiry can access support, help and advice from the University's Equality and Diversity Manager or HR Business Partners. In addition, if a member of staff would like to talk about disability equality issues generally, or would like to be involved in policy decisions around disability, they should contact the University's Equality and Diversity Manager.

### **3.6. Access to Work Scheme**

Access to Work is a government organisation providing advice and practical help for disabled people in or about to start work. Access to Work provides grants towards costs associated with helping people with disabilities to be able to function effectively at work. The University works closely with Access to Work in order to benefit from their specialist advice and to assist the University with costs of making reasonable adjustments to the workplace.

### **3.7. Healthy Eating Options**

Staffordshire University provides nutritionally balanced food, with University catering outlets providing a range of salad bars and/or fresh fruits. All standard recipe University produced meals are provided on a daily basis containing reduced salt and skimmed milk. The University is 'GM Aware' and all suppliers provide GM free food.

### **3.8. University Sports Centre**

The University has sports facilities available to staff at a reduced price. More information can be found on the University website or by contacting the Sports Centre directly.

### **3.9. A No Smoking Organisation**

In recognition of the need to provide a healthy working and study environment, to protect staff from the dangers of passive smoking and to comply with the law, the University has a No Smoking Policy which outlines in detail the ban on smoking in University premises. More details can be found on the University website.

## **4. Sick Pay Provisions**

### **4.1 University Sick Pay Provision**

In the event that an employee is unable to work due to personal illness or injury, the University provides a sick pay provision for a maximum period in accordance with the following table:

<i>During Year of Service</i>	<i>University Sick Pay Entitlement (calendar months)</i>
1st Year	1 month's full pay and (after 4 months' service) half pay for a further 2 months
2nd Year	Full pay for 3 months and half pay for 3 months
3rd Year	Full pay for 4 months and half pay for 4 months
4th Year + successive years	Full pay for 6 months and half pay for 6 months

The provision of University sick pay as detailed above will be determined by the length of service (based on the continuous service date with Staffordshire University) at the commencement of the period of absence.

For sickness absence recording purposes, all days and half days absent should be counted, including non-working days, as this information may be relevant for Statutory Sick Pay (SSP) recording purposes.

For the payment of University sick pay, only working days (and half days) are counted when calculating an individual's University sick pay provision.

An employee's access to University sickness pay provisions for full/half pay for any absence will be calculated by adding together the total number of working days of sickness absence (on full or half pay) during the 12 months immediately preceding the first date of the current absence, and deducting this from their entitlement.

The University sick pay provision as detailed above will be a maximum provision in any rolling 12-month period. However, an individual will be able to receive the SSP equivalent from the first day of his/her employment with the University, subject to the individual fulfilling the SSP regulations.

In order to receive University sick pay, the employee must comply with the provisions of the Sickness Absence Procedure. Any absence, for which the appropriate documentation is not provided or received late, may be classed as unauthorised absence and the employee will not be paid any University Sick Pay.

#### **4.2 The Relationship between University Sick Pay and Statutory Sick Pay (SSP)**

Statutory Sick Pay (SSP) is a statutory earnings replacement paid by the employer to an employee who is off work due to sickness, dependent upon them satisfying the statutory qualifying conditions.

The University sick pay scheme will include any entitlement to SSP. Therefore, in order to satisfy the University's statutory obligations, the SSP equivalent payments and entitlement will be recorded by Human Resources and Organisational Development.

The University's Sick Pay provision is generally more generous than SSP. The University will, therefore, pay the University sick pay provisions providing that the relevant University and statutory conditions are satisfied. In certain circumstances the University's Sick Pay provisions will end before the provision for SSP and in these circumstances, the University will continue to pay the equivalent payment for SSP for as long as it is due.

Human Resources and Organisational Development are required to send a form (currently 'SSP1') to any employee on long-term sick leave (or where there have been a number of 'linked' absences over a period of time) shortly before their University sickness payments are due to end. The employee will need to take this form to the Benefits Agency if they wish to make a claim for further state benefits such as incapacity benefits. Any amount of sickness related state benefit received during a period of University sick pay entitlement will be deducted from the University sick pay.

#### **4.3 Reclaiming Monies from Third Parties**

Where an absence results from an incident which gives rise to a claim against a third party by an employee, the sums paid to an employee under the University's Sick Pay Scheme will be paid as a loan to the employee. Once the employee recovers any such monies from the third party, the employee will be required to pay back this loan within 14 days of the date of the receipt of the money. A third party includes, but is not limited to, the University or the Criminal Injuries Compensation Authority or a similar body.

An employee will be required to indicate during the Return to Work meeting whether the period of absence has been due to an incident that may give rise to a claim against a third party and this should be documented on the Return to Work form. This information will be forwarded to the Sickness Absence Co-ordinator together with the absence details, as per the usual procedure.

Human Resources and Organisational Development will write to the individual on receipt of this information to inform them of their contractual obligations regarding claims against a third party.

An individual who receives money from a successful third party claim and who does not fulfil their contractual obligation in respect of these monies will be subject to disciplinary action.

#### **5. Reference to Other Policies**

On occasions, an employee may need to be absent from the University not due to his/her own personal illness or injury. In such circumstances, an individual may wish to consider the appropriateness of one of the other University policies:

- Family Leave Policy
- Annual Leave Policy
- Flexible Working Policy

For further information, an individual should contact their line manager in the first instance. The policies are also available on the Human Resources website or advice can be sought from a member of the Human Resources and Organisational Development team.

#### **6. Equality and Diversity**

Equality issues have been taken into account during the development of this policy and all protected characteristics have been considered as part of the Equality Analysis undertaken.

#### **7. Operative Date**

This policy was approved at the Sustainability and Resource Committee held on 22 November 2016 and will take effect from that date.



## Staff Health and Wellbeing Strategy 2017- 2020



Health relates to a person's physical and mental condition. Wellbeing is the subjective state of being healthy, happy, contented, comfortable and satisfied with one's quality of life. Mental wellbeing relates to a person's emotional and psychological wellbeing. This includes self-esteem and the ability to socialise and cope in the face of adversity. It also includes being able to develop potential, work productively and creatively, build strong and positive relationships with others and contribute to the community.

National Institute for Health and Care Excellence (NICE) 2017

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### **1. Introduction and Background**

1.1. The Discovering People Strategy 2016 to 2020 is part of the strategic plan to focus our efforts and energies on ensuring that the University of Leicester becomes a great place to work.

1.2. One of the six commitment pillars within the Discovering People Strategy is 'Delivering our Health and Wellbeing Programme'. This pillar describes our health and wellbeing commitment as:-

- We will create a collaborative, progressive and healthy workplace in which staff members feel valued, energised and engaged at all levels.
- Our priority will be to promote social, physical and mental wellbeing through a diverse range of accessible and current services that are responsive to the needs and wishes of our staff, including building relationships with colleagues' friends and families and recognising that a person's 'whole self' comes to work.
- Recognising that there are challenges to meet and opportunities to explore, we will develop our leaders and managers to recognise the signs when a staff member requires support, especially in times of change.
- We will ensure that our Occupational Health and counselling services are resourced well to support members of staff when needed.

## 2. Our Vision and Ambitions

2.1. The Discovering People Strategy directs that this strategy will be designed to:

- Ensure that working practices support, rather than detract from, our colleagues' health and wellbeing.
- Help leaders and managers to understand the impact that their style might have on colleagues' wellbeing, to recognise potential symptoms and to have the confidence and skills to begin conversations with team members about health and wellbeing.
- Recognise and respond to the different needs and circumstances of our staff through a range of activities and opportunities, including bespoke packages via external providers.
- Develop lifestyle and programmes that promote a healthier workplace and reduce the toll and cost of ill-health (for example, the Active4Health, which is in pilot at present).
- Promote the health and wellbeing of colleagues through our 'Discover' website.
- Develop the services of our Occupational Health and Employee Assistance Services to support staff and to work closely with managers.

2.2. There are a number of national health related drivers detailed below that have, in part, informed our strategy. (Referenced from Health and Safety Executive, NICE Guidelines and 5 Ways to (Mental) Wellbeing) :

- Negative Mental Health
- Reducing long term sickness absence
- Managing work related stress
- Supporting musculoskeletal conditions (MSK)
- Adult and (Childhood) Obesity awareness
- Stop Smoking
- Alcohol awareness

## 3. Strategy Themes

3.1. The six themes of this strategy, as detailed below, aim to give a holistic approach to an individual's health and wellbeing.





#### **4. Implementing the Strategy**

- 4.1. The development of a robust and comprehensive Occupational Health Service is key to achieving our strategic aims. Working closely with this team and Safety Services we will develop policies and processes that support the health and wellbeing of staff.
- 4.2. Appendix 1 shows the, 'plan on a page' of how in conjunction with Occupational Health, Safety Services, Sports and Active Life, Social Impact (Sustainability, in line with UN Sustainability Development Goals), Trade Unions, the Student Support Team and the Student Union we will bring this strategy to life.
- 4.3. Appendix 2 details the annual plans relating to each strategy theme, setting out the priorities that will be addressed with a range of events and activities.
- 4.4. Health and wellbeing activities should be accessible to all staff and reasonable time away from the workplace should be granted to attend events and activities. Every effort will be made to ensure that events and activities are scheduled at various times of the week and at various times of the day, during and outside of work hours.
- 4.5. Working within the new External Relations framework to develop a comprehensive communication and marketing plan to ensure that staff recognise health and wellbeing across the University and are made aware of the variety of activities.
- 4.6. Health and wellbeing information will be included in recruitment and selection paperwork, staff induction programmes and management/leadership training programmes.
- 4.7. The development of the new health and wellbeing intranet platform will be key to communications. The site can be utilised to allow a more interactive communication with staff, to allow them to book onto events and easily find an area that interests and supports their individual needs.
- 4.8. Using the members of the Staff Health and Wellbeing Steering Group staff are able to feedback their ideas to improve their health and wellbeing.

#### **5. Governance and Accreditation**

- 5.1. This strategy will be overseen by the Health and Wellbeing Steering Group. An annual report will be submitted to the University's Staffing Committee. Notes of the Steering Group will be submitted to the quarterly Health and Safety Committee.
- 5.2. Accreditation to three charters as detailed below will give the strategy a framework to evolve and keep up to date with future best practice and developments.

- The University is working towards ‘the Workplace Wellbeing Charter’. This Charter is widely recognised as *the* business standard for health, safety and wellbeing across England. The award helps to strengthen the organisation’s brand and reputation. The Charter guides an organisation to develop policies and processes in the key areas that support positive health and wellbeing. There are three levels to this Charter that can be achieved to measure the effectiveness of the University’s strategy in relation to their staffs health and wellbeing:
  - Commitment
  - Achievement
  - Excellence



**For better  
mental health**

- Mind’s Workplace Wellbeing Index is a benchmark of best policy and practice. It will help the University to find out what we are doing well and where we could improve our approach to mental health in the workplace. There is a cost to this as there is a comprehensive support package from MIND.
- **Carers Charter** - This charter is currently signed by a number of Local Authorities and NHS organisations. It is a set of principles that as reasonable employer the University should sign up to support an ageing workforce.

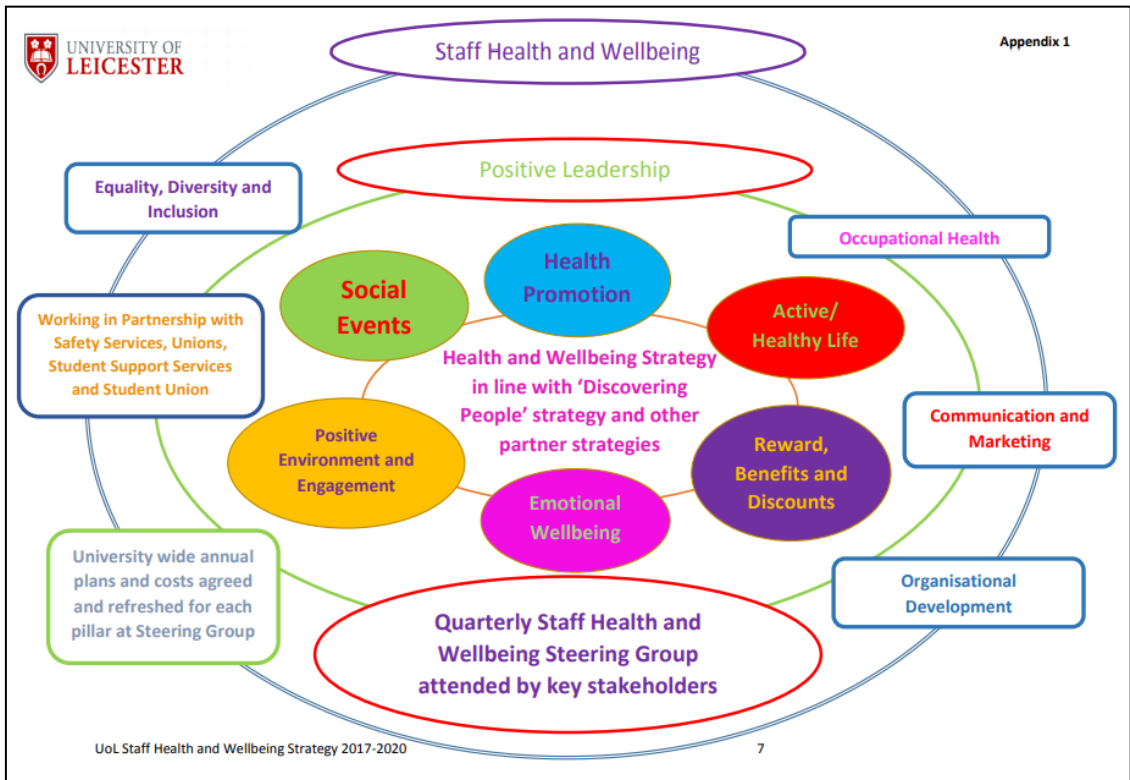
**6. Success Criteria, Evaluation and Monitoring**

- 6.1. The success of this strategy will be monitored through a set of performance indicators, which includes a reduction in sickness absence levels and at least 30% of the workforce participating in wellbeing activities and events, measured at 3, 6 and 12 month intervals.
- 6.2. The implementation of a new management information dashboard and the Maximising Attendance Policy and Procedure, will allow monitoring of sickness absence.
  - 6.2.1. As we will have better sickness absence data detailing the reasons for absence we will be able to focus our health and wellbeing initiatives on these areas to ensure staff are supported back to work.

6.2.2. The aspiration is that there is a reduction in the sickness absence relating to the reasons that have had a health and wellbeing initiative focus and that we are keeping staff well through our health and wellbeing programme.

6.3. The system of recording staff attending health and wellbeing events and activities will be refined to ensure the number of staff attending can be meaningfully monitored and reported. There will be an evaluation after every health and wellbeing event or activity to ensure that we are meeting staffs expectations and positively supporting and improving their health and wellbeing. A quarterly summary of the evaluations will be presented to the Health and Wellbeing Steering Group.

6.4. The health and wellbeing related staff survey questions will be reviewed each year to ensure that we are allowing staff to feedback on the key elements of their health and wellbeing. This feedback will enable continuous improvement to the annual programme of health and wellbeing events and activities.



## Annual Plans for Strategy Themes

Emotional Wellbeing	Health Promotion	Active/ Healthy Life
Emotional Resilience x 2 cohorts early 2018 – then evaluate	No Smoking Day	Staff Sports events (Potentially led by Sports Centres) – walking, running (0-5K), cycling, cricket, football.
Mindfulness programme x 3 cohorts (Speaker and book/CD)	Mental Health Awareness Week	Roulers Tournament x 2 per annum (VC promoting more staff team sports)
Employee Assistance Programme	World Mental Health Day	Walking Routes (to be redesigned and reprinted)
24/7/365 telephone counselling	Sun Awareness / Safe Travel	Healthy Eating Cookery Classes x 4 per annum
Face to face counselling	Alcohol awareness Day	Hydration Challenge x 2 per annum
Mental Health First Aider Training 'lite' x 6 cohorts per annum	Know Your Numbers	Desk Exercises video
Mind Workplace Wellbeing Index – once full assessment has taken place	International Day of People with Disabilities	Sedentary working presentation x 3
Floristry x 4 per annum (seasonal)	Diabetes Week	Gym pay as you go promotion
Mindfulness resources	Men's Health Month (November)	Physio drop in sessions
Social Events	On your feet day / Walking Month	Reward, Benefits and Discounts
Positive Environment and Engagement	Anti-Bullying Week	
Reward, Benefits and Discounts	Back Care week	
Co-ordinate and promote via SHWB website existing social clubs	Obesity awareness (slimming world)	Ongoing Benefits Portal promotions
Set up a carers support group within Principles of the Carers Charter	Staff Volunteering events and promotion	Benefits Roadshow x 2 per annum
Support existing and the set up of new groups	Develop process with Estates colleagues to consider SHWB as part planning process	Promote new staff benefits, such as will writing, private healthcare
	Support the Hungry for Change Project	
	Think of someone else /giving week	

## Appendix K. Excerpt of Raw FOI data analysis held on excel document

	A	B	C	D	E	F	G	H	I
1	University	Pre 1992/Post 1992	Date request sent	Date information received	Results Q_1	Result Q_2	Result Q_3	Result Q_4	Result Q_5
2	1	2	10/11/2018	21/12/2018	The HR Department support this provision, across a team of HR Business Partners and led by the University's Director of HR.	We engage a third party service to offer this provision to staff, Lifeworks.	<a href="https://www.whatdotheyknow.com/request/information_and_documents_relati_17#incoming-1284502">https://www.whatdotheyknow.com/request/information_and_documents_relati_17#incoming-1284502</a> I have attached a selection of the resources and policies from the University's intranet (apologies for the formatting)	The provision of Lifeworks above, we also run well being week for all staff and students per semester which include mindfulness, stress management, and resilience. The provision of Lifeworks above, we also run well being week for all staff and students per semester which include mindfulness, stress management, and resilience.	Formal Referral is held via the 3 and we receive an annual report from Lifeworks. The latest report hold is 2016/17 with a total of 3 accessing services.
3	2	1	10/11/2018	Duplication of 98 ignore!!			<a href="https://www.whatdotheyknow.com/request/information_and_documents_relati_22#incoming-1296054">https://www.whatdotheyknow.com/request/information_and_documents_relati_22#incoming-1296054</a> Our Healthy University Strategy (attached)  Employee Health Management and Sickness Absence Policy (attached)  Mental Health First Aid Staff: 46  Mental Health First Aid Champion	HK Department – The Resourcing and Business Support team work closely with managers and staff and deal with all aspects of the employee lifecycle including offering support and advice on a range of issues. The People and Organisational Development team is responsible for the appraisal process and the provision of training and development, such as the University's Staff development Weeks/Months and Diversity Festival and structured training sessions in a range of topics including resilience.  Occupational Health and Counselling – staff can be referred to Occupational Health for support and advice on any health concerns. Our Occupational health provider also provides a confidential counselling service.  Employee Assistance Programme – A confidential telephone counselling service is available for all University employees and	During 2018:

## Appendix L. Excerpt of semi- structured interviews raw data analysis held on excel document

Participant ID	Themes	HE Wellbeing-level coding
2704	reasonable, limitations, supported	Support(s), Resources (R) Exp
Sep-09	balance, clarity, contract, workload models	Stability( S)Expectation(E) Or
2608BT	security,environment, team, communication, contribution	Environment (E ) Organisation
07 1952	security, trust,morale and perceptions	Values(V), Organisation( O) E
Sep-25	opportunities, growth, development, environment	Motivation(M) Environment (
121256	sense of self, role and belonging,	Emotional ( E) Organisation( C
1307	autonomy, control, responsibility, benefit others	Motivation(M) Group (g) Ind
1202	shared agenda, enjoyment, development, group and individual w/b	
Mintie2	support, to do job well	
1711EC	fairness, expectations, environment, expectations, responsibility	
JH1	supported to do role	
286JR	happiness, fairness and treatment	
AC	Managers taking care of staff, workload balance, valued, opportunity progress, flexibility of work	
Carina	Work context wellbeing includes the amount of time you spend doing certain activities, do employers really care how long it takes. Time is an impotant part of wellbeing. Universities getting away with encroscing on peoples time.	
Jamilla	Respect for education, to be respected. Lack of understanding diminishes wellbeing	
Christebelle	It is a concept rather than a practice, stability, value and respect.	
Lorraine	coping, resources, taken care of at work.	
Cotton	feeling valued, vauing others, healthy relationships	
Morty	Wellbeing looks like someone who can manage all the work confidently. Not to be micromanaged. Positive affirmation.	
NW5618	physical environment, relationship between people, culture of organisation, being valued, how you treated, support, an outlet for creativity and flexibility	
HH22	It is impacting on work environment- educating future workforce. How do we contibute to a succesful student.	

## Appendix M. Free text responses to Q22 (Please provide any additional comments about the future of staff wellbeing?)

Case IDT	Role	Free text
A	Manager/Senior Manager	We have no well-being policy, so it's clear it's not taken seriously.
B	Lecture/Senior Lecturer	There may be lots of policies that look good on paper, but they focus on the individual. Workload is not something I can determine and demands increase all the time. Development courses are offered but even if I had time to attain because I'm teaching every single day it is impossible to do so. Especially if they are on another campus.
C	Manager/Senior Manager	Constant change without proper support is a big concern for my well-being.
D	Lecturer/Senior Lecturer	I am quite happy in my job even though it's not perfect in terms of staff well-being but it is clear that others are under pressure and impact them seriously. I have had periods of time where I was not so satisfied, but my well-being is not being badly affected.
E	Associate Professor/Professor	It is critical that we improve this aspect of the functioning of universities; workloads have increased almost across the board, but academic appointments have been stagnant for years. This serves as a major deterrent for top people to come to academia.
F	Manager/Senior Manager	Within HE we need to talk about workload- we talk about stress and resilience but not workload this needs to be addressed.
G	Lecture/Senior Lecturer	It is important that this is discussed alongside student well-being.
H	Support Services/Staff	Universities have to make this a key strategic priority to ensure the funds are available to achieve this.
I	Support Services/Staff	It ought to become as important as student well-being although think this is unlikely because were not paying customers.



## Appendix N. Free text responses to Q17 (What else do you think is important to staff wellbeing?)

	Role	Free text
J	Lecturer/Senior Lecturer	Soft space for working in- private space.
K	Support Services/Staff	Stability
L	Associate Professor/Professor	Seeing a better example by senior staff regarding working hours and presenteeism-is out of control here! They all seem to think they get brownie points for waking up at 4 AM and sending emails and working ridiculous hours. It makes normal people feel completely inadequate in the survey are not working hard enough.
M	Post-Doctoral Researcher	My current job seems lovely, but I started less than three weeks ago: early days. But I do think that the academic environment (around the world) is lousy for the mental health of postdocs, and that it will damage their health and family relationships. The system has been designed to prize mobility and range of teaching and research environment above stability and fair treatment of post-docs. this is not a problem unique to the UK. I can safely say it is also true in USA, Spain and Sweden. It is, however, unethical of governments and universities to treat early-stage researcher so badly, and likely damaging to universities and the general research environment. Furthermore, many staff (again not just in the UK) are so exhausted by the time they reach the holy land of the pending contract, that they then relax will stop the system is blighting itself.
N	Manager/Senior Manager	The work environment (layout, appropriateness of the office etc.).
O	Manager/Senior Manager	That a reasonable work life balance is fostered through an adequate workload planning model locally and nationally that is driven from the top of the organisation.
P	Lecturer/Senior Lecturer	Autonomy in my role, flexibility in my time management, recognition of the barriers that impact on my health and support with this such as protected time, extra allowances in my workload model and personal development review.
Q	Support Services/Staff	University's need to care for their staff as people- not numbers. My institution likes the idea change but fails to follow-through on so many occasions. The lack of equal flexible working arrangements is a massive issue for me.
R	Manager/Senior Manager	Mutual respect and trust. Challenging of unacceptable behaviour such as bullying.

## Appendix O. Coding Scheme for Q17

<b>(a) Quality of Work Life</b>	
Category Label	Criteria
	<p><b>Space:</b> Refers to the working spaces available and designated spaces for quiet time &amp; lunch</p> <p><b>Respect and valued:</b> Specific comments about feeling valued, equal treatment and comments about barriers</p> <p><b>Work life balance:</b> Refers to working hours and importance of work life balance</p> <p><b>Wellbeing:</b> Specific comments on the effects of work on personal wellbeing. Staff talked about wellbeing everyone's responsibility and increasingly more work demands were being put on them , ultimately impacting on their wellbeing, homelife and family.</p>
<b>(b) Coping Strategies</b>	
Category Label	Criteria
	<p><b>Autonomy:</b> Relates to specific comments about autonomy</p> <p><b>Time-</b> Refers to taking annual leave and taking time away from work</p> <p><b>Managers-</b> Specific comments about the role of managers/leaders</p>
<b>(c) Employee Engagement and Flourishing</b>	
Category Label	Criteria
	<p><b>Development:</b> Refers to CPD and development.</p> <p><b>Purpose:</b> Specific comments about making the Uni a better place</p> <p><b>Contribution:</b> Refers to work undertaken.</p>
<b>(d) Organisational Commitment</b>	
Category Label	Criteria
	<p><b>Workload:</b> Specific comments made about workload</p> <p><b>Stability (Security):</b> Refers to changes in the department and HE Sector</p> <p><b>Reward and Recognition:</b> Refers to the availability and fairness of the reward &amp; recognition</p>

## Appendix P. Coding Scheme for Q22 (Appendix Item P)

<b>(a) Job Demands</b>	
Category Label	Criteria
<b>Mental Health Stress:</b>	Refers to mental health and stress levels
<b>Clear boundaries:</b>	Clearer boundaries and challenge of keeping up to-date
<b>Workload demands:</b>	Specific reference about workload arrangements
<b>(b) Marketisation</b>	
Category Label	Criteria
<b>Rising Business models:</b>	Specific finance and business approaches observed in the Uni
<b>Changes and risks impacting HE:</b>	Refers to general and specific changes impacting HE
<b>Student wellbeing:</b>	Staff comments about a focus on student wellbeing in HE
<b>Depleting resources:</b>	Staff comment about resources
<b>(c) Job Satisfaction</b>	
Category Label	Criteria
<b>Staff leaving Intentions:</b>	Refers to staff leaving and intending to leave
<b>University success:</b>	Refers to comments on the support and success stories from staff
<b>Toxic working environment:</b>	Refers to the quality of the work environment.
<b>(c) Organisational Commitment</b>	
Category Label	Criteria
<b>Wellbeing Services:</b>	Refers to the specific services available
<b>Wellbeing Policies:</b>	Staff comments about a wellbeing policy
<b>Central recruitment and HR:</b>	Refer to contracts, recruitment and the role of HR
<b>Strong Leadership:</b>	Refers to the quality of leadership required for change