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**THINKING DIFFERENTLY ABOUT
'STUDENT MENTAL HEALTH AND
WELLBEING' – LEARNING FROM
UNDERGRADUATES' STORIED
'UNIVERSITY LIFE' SELF-
REFLECTIONS**

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PhD

2023

**THINKING DIFFERENTLY ABOUT ‘STUDENT
MENTAL HEALTH AND WELLBEING’ –
LEARNING FROM UNDERGRADUATES’
STORIED ‘UNIVERSITY LIFE’ SELF-
REFLECTIONS**

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requirements of the University of Northumbria at
Newcastle for the degree of
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Abstract

Background: Increasing rates of university student mental distress are being recorded; continuation of this upward trend remains apparent. Current explorations of students' mental health and wellbeing primarily use quantitative approaches, contributing to significant gaps in qualitative understanding.

Aim: To explore undergraduates' accounts and self-reflections regarding their own mental health and wellbeing within their overall experiences of student life.

Methodological Approach: After in-depth examination of key definitions and perspectives traditionally underpinning research in this area, and drawing on elements of suicide loss lived experience, principles guiding the Power, Threat, Meaning Framework, and sociological perspectives on affect and emotion were together used as the research design lens. Free Association Narrative interviews fronted by a social media elicitation task were employed to foreground students' own storytelling and meaning-making in reference to their mental health, distress and wellbeing experiences. Each participant engaged in interviews at two timepoints in 2020 and 2021.

Analysis: Twenty-one undergraduates at a university in the Northeast of the UK participated. Through data analysis using reflexive thematic analysis, identified were parallel-running and interweaving elements in the students' mental health, distress and wellbeing stories. First, within their 'General Life', students thematically located their experiences in their overall-life contexts in terms of 'Time'; 'Place/Space'; 'Relationships'; 'Loss' and 'Macro-level Threads'. Second, within their 'University Life', stories displayed mental health, distress and wellbeing aspects connected to particular elements of their university; the themes presented are 'Institution-led Mechanisms, Systems and Procedures'; 'University-bordered Relationships'; 'University as a Mirror' and 'University-Specific Meanings, Perceptions and Expectations'. Third, uniting students' general and university lives and experiences, their 'Felt Life' was explored – common emotion underpinnings to their mental health, distress and wellbeing experiences comprised of three key sentiments: 'Feeling in Control'; 'Feeling Secure' and 'Feeling Recognised'.

Contribution: The contribution of this thesis is multi-pronged. The methodological approach employed demonstrates the importance of over-time and multi-level qualitative engagement with students as key to making visible what may be obscured by continued reliance on traditional data collection methods. Turning to the content, offered here are two elements; first, a different, wider-contextual understanding on risk factors for negative student mental health and wellbeing, and second, a theoretical framework of the emotions that underpin student mental health and wellbeing risk factors. The emotional undercurrents to university-connected mental health, distress and wellbeing experiences are insightful as an important, yet at present still under-appreciated, aspect of student mental health and wellbeing. The thesis encourages review of existing in-response university support approaches and mechanisms (in specific reference to, for example, student bereavements and study programs including placements) in light of such findings. Cumulatively, this research overall acts as an invitation to augment existing perspectives and approaches to university student mental health, distress and wellbeing through re-evaluation and discussion regarding how these may be conceptualised differently and alternatively understood.

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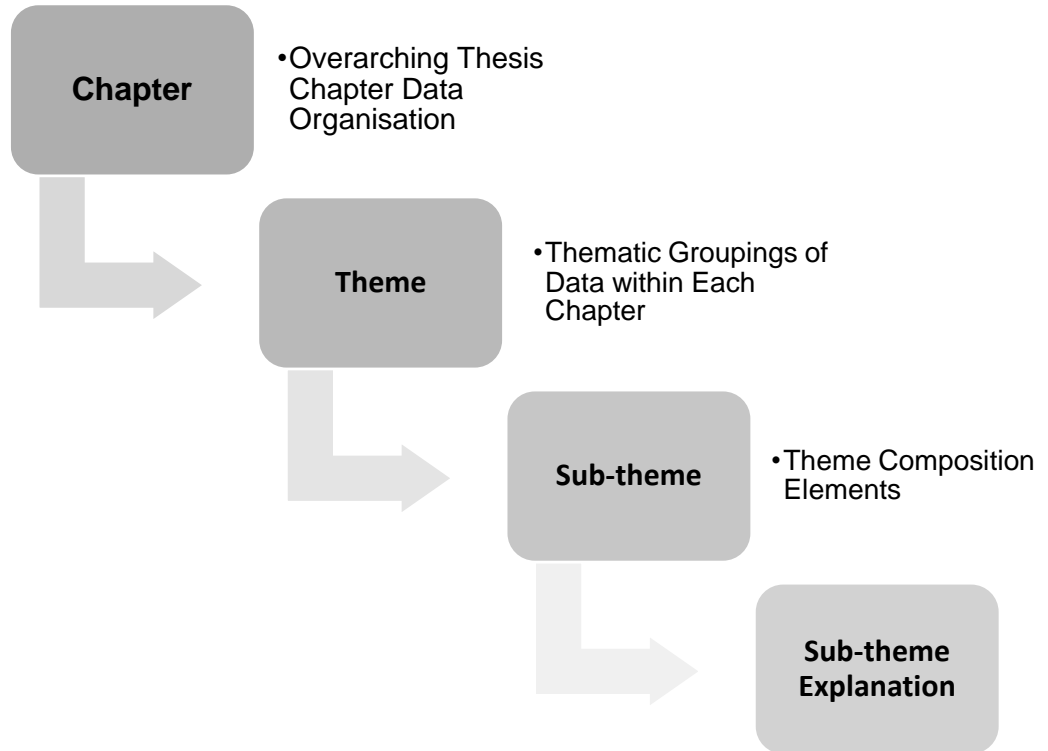
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<u>LIST OF ABBREVIATIONS</u>		
SMHWB	'Student Mental Health and Wellbeing' used as a label	
MHWB	'Mental Health and Wellbeing' (as a general label/expression)	
UKHE	UK Higher Education	
PTMF	Power Threat Meaning Framework	

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'Hierarchy of Data' Organisation - Terminology:



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This thesis is dedicated to the memory of:

Matilda Moreno Sutherland (2020); Paul Weir (1979-2022)

Martin Andrew Sutherland (1984-2011)

Message to Martin:

Little Bro; Co-author. This thesis is for you. Although I *may* have issue with my sibling having led me into a second PhD endurance test (!), I am so very sorry it took you experiencing such awful despair for the work and my knowledge to be developed.

I wish you were here to tell me what you think.

Forever proud to be your sister.

Author Declaration:

I declare that the work contained in this thesis has not been submitted for any other award and that it is all my own work. I also confirm that this work fully acknowledges opinions, ideas and contributions from the work of others.

Any ethical clearance for the research presented in this commentary has been approved. Approval was sought and granted through the researcher's submission to Northumbria University's Ethics Online System on 22nd October 2020 (ref. 120.1020). An amendment to the original application was sought and granted via EthicsOnline@Northumbria on 30th November 2021 (ref. 40833).

I declare that the word count of this thesis is [92925] words.

Name: *Heather Ann Sutherland*
Signature:

Date: *10th August 2023*

THINKING DIFFERENTLY ABOUT 'STUDENT MENTAL HEALTH AND WELLBEING' – LEARNING FROM UNDERGRADUATES' STORIED 'UNIVERSITY LIFE' SELF-REFLECTIONS

THESIS OVERVIEW

BACKGROUND TO THE PROJECT

Recorded rates of undergraduate students' mental difficulties in the UK have been rising over recent years (Thorley, 2017). Exacerbated further by disruption wrought by the COVID-19 pandemic (ONS, 2022) and the 'Cost of Living Crisis' (NUS, 2022; Student Minds, 2022), this rise does not at present show signs of abating (Hall, 2022b). Student demand for university mental health support services continues to increase (Priestley *et al.*, 2022), the citing of 'mental health' as a primary reason for students to consider leaving their studies has been noted (Lewis and Bolton, 2023; Randstad, 2022), and levels of student suicide remain concerning (ONS, 2022). Across UK Higher Education (henceforth UKHE), sector- (UUK, 2018, 2020, 2022a, 2022b, 2022c; Hughes and Spanner, 2019) and institution-level initiatives have been developed, and increased funding allocated (Office for Students, 2018, 2020), as part of an overall aim to better support student mental health. In academic circles, a burgeoning of networks (such as the Student Mental Health Research Network (SMARTEN) and the Scottish Student Mental Health Research Network (ScotSMART)) and research taking the labelled topic that is 'student mental health and wellbeing' (henceforth SMHWP) as the overarching focus are further illustrative of the current sense of urgency attached to this element of university experiences.

Whilst activity aimed at supporting SMHWP is observable, there are elements of the current engagement that require review and critique. Main concerns are arguably rooted in the definitions and approaches informing research on the subject. The (implicit) deficit and individualising emphases in SMHWP discussions and the noticeable lack of qualitative research need address. The study of SMHWP most often favours quantitative research methods that monitor, measure, and facilitate statistical reporting (Foster and Francis, 2019). This, however, acts to 'contain'

knowledge and understanding on SMHWB within pre-determined research agendas and foci, rather serving to obscure crucial contextualising information. Responding to such concerns, (and drawing on lived experience knowledge developed as a consequence of the suicide of a family member), this research therefore centred on exploring and enhancing understanding of students' qualitative expressions regarding their mental health, distress and wellbeing experiences during their undergraduate stories.

AIMS AND OBJECTIVES

The following overall research question was developed:

'What do undergraduate students qualitatively express about their mental health and wellbeing experiences during their 'undergraduate stories'?'

Furthermore, to locate and add richness, the sub-aims and objectives posed (grouped into two areas) within the project were:

1. To explore undergraduates' accounts and self-reflections regarding their own mental health and wellbeing within their overall experiences of student life:
 - To explore the events, circumstances, timepoints, transitions and periods of change where participants identify their mental health, distress and/or wellbeing as a dominant feature.
 - To garner understanding regarding the shape of students' mental health, distress and wellbeing experiences within and across academic years, and to understand how time plays a role in students' own reflections.
 - To explore how student mental health, distress and wellbeing interacts with individual intersectional/other-life-role elements and contexts.
 - To explore how students talk about and describe their own mental health, distress and wellbeing management, coping strategies,

sources of support through their university experiences, and to understand students' decision-making process(es) regarding self-care.

- To identify where students describe institution-led support provisions/activities/initiatives as helpful and/or not helpful, relevant and/or irrelevant, in reference to their mental health, distress and wellbeing.

2. To explore and increase understanding regarding what the terms 'mental health' and 'wellbeing' mean to participants during lived experiences of being a student.

- To explore students' own references regarding such terms as 'trigger(ing)', 'sense of wellbeing', 'good mental health', et cetera.

METHODOLOGICAL TOOLS AND PROCESS

Fieldwork for this project proceeded after ethical approval was granted in October 2020. Adopted was a qualitative, narrative questioning approach with 21 undergraduate students.

Recruitment avoiding university-staff gatekeeping was prioritised; recruitment locations where direct access to students could occur were actively chosen. Consequently, the majority of participants were recruited via a snowballing process extending out from a range of student society contacts and student-to-student university communication forums. Would-be participants were invited to complete an 'Expression of Interest' online form (Appendix 3) and engage in an online 'Screening Call' (Appendix 4) before confirming their 'full participant' status.

Given an apparent lack of opportunity for students to fully lead question agendas in current research about SMHWB, storytelling was identified as crucial, given its ability to permit agency and facilitate important insights (Ainsworth and Hardy, 2012). Interviews for this project were thus conceived primarily as spaces for unguided,

student-led talk. A Free Association Narrative interview format (Hollway and Jefferson, 2008), fronted by a social media elicitation task, was adopted. Participants were asked to engage in 2 interviews at different timepoints in 2020 and 2021 (Table 1a.). Prior to each interview, participants were asked to curate 5 of their social media posts from their preceding academic year - the posts chosen were to mean to themselves, 'my student mental health and/or wellbeing at the time'. These posts were not considered data; their role was as elicitation-prompt for spoken story sharing. The interview context itself opened with uninterrupted time for the participants to tell the stories behind their posts. Following conclusion of their narratives, developed-in-interview probing questions were asked, followed by questions semi-structured in nature (developed based on existing academic knowledge areas). Two students were interviewed as part of a pilot test - demonstrated was the effectiveness of the overall procedure, as well as need for attentiveness to specific (unanticipated) areas of experience during interview interactions. Such was the value of the data from the pilot that these students were added to the overall sample. Ultimately, in total (including the pilot participants), 16 students completed both timepoint interviews; 5 others engaged in the first interview, but not the second. All 37 completed interviews were conducted via Microsoft Teams (due to COVID-19 restrictions in place at the time); all were audio-only recorded, and the average time length of the interviews was 2.75 hours.

(Table 1a. Interview Date Windows and Reflection-Period Foci).

Timepoint 1 <i>Interview window and 'Reflection Period' for social media task.</i>	Timepoint 2 <i>Interview window and 'Reflection Period' for social media task.</i>	'Resonance' Interview
October/November/December 2020. – 5 social media posts connected to preceding academic year.	May/June/July 2021. – 5 social media posts since first interview.	December 2021. No social media elicitation task required.

Following verbatim transcription of all interviews, an inductive and iterative approach to analysis was undertaken. An initial familiarisation, organisation and coding (using manual means as well as NVivo) was conducted. Engagement with the data was informed by the principles, purpose and tools underpinning Braun and Clarke's

process of Reflexive Thematic Analysis (henceforth RTA) (Braun and Clarke, 2022), and attentiveness to narrative elements (such as language use) was paid. Memos on individual transcripts were also created. Key was maintaining engagement with the recorded talk both within and across cases, to retain the significance of individual experience whilst permitting broader-level insight (Ayres, Kavanaugh and Knafel, 2003). After this initial data analysis, participants were re-approached and asked to engage in a third interview to test the resonance of the analysis in reference to their experiences. Essentially, the research interpretation as initially developed was taken back to participants as a means of 'sense-checking'. Two participants agreed to engage in this third interaction in December 2021. The interviews clarified that these students related their experiences to the analysis well, and they offered further insights in relation to specific parameters going forward. Data analysis continued, ultimately leading to the identification and confirmation of three parallel-running, thematically-described elements that constitute the findings chapters presented in this thesis.

ANALYSIS

Three interweaving aspects to these students' mental health, distress and wellbeing experiences were identified through the data analysis. These are briefly summarised as, first, located in 'General Life'; second, located in 'University Life', and third, the emotion undercurrents to the previous two areas, comprising the students' 'Felt Life'.

The first 'General Life' element concerns the participants' location of mental health, distress and wellbeing experiences in their overall lives. Across five themes – 'Time'; 'Place/Space'; 'Loss'; 'Relationships' and 'Macro-level Threads' – these participants situated and described their experiences connected with mental health, distress and wellbeing in their general lives. Elements such as previous education experiences; family lives; friendships and other significant relationships; geographical associations and meanings; bereavements; language and labelling were visibly crucial to the participants' identification of their mental health, distress and wellbeing generally. These opening findings highlighted the importance of *outside* context (over time) to

individuals' mapping and understanding of mental health, distress and wellbeing whilst *inside* a university experience.

Second is 'University Life', running in tandem with as well as building on the first, and made visible through the participants' specific-to-university experience accounts. Here, participants' stories highlighted key connected-to-mental-health/distress/wellbeing flashpoints within university, subsequently thematically organised into the following areas: 'Mechanisms, Systems and Procedures'; 'University-bordered Relationships'; 'University as a Mirror', and 'Perceptions and Expectations specific to University Settings and Experiences'.

Third, underpinning the prior two account areas was revealed to be the importance of participants' emotion ascription to mental health, distress and wellbeing experiences. Three thematic strands were identified. Reported here as 'Feeling in Control', 'Feeling Secure' and 'Feeling Recognised', these sentiments together can be seen as key in weaving together individuals' 'whole-person' and 'student-role' mental health, distress and wellbeing whilst engaging in a university experience.

THESIS CHAPTER OUTLINE

The seven-chapter organisation of this thesis is as follows. Chapters 1-3 serve to, respectively, outline the current problem that is SMHWB; put forth the clear need to augment how SMHWB is conceived and approached via amplified inclusion of alternative perspectives, and describe the research design, process and analysis conducted. Chapters 4-6 constitute the thematic organisation of the research findings. Finally, Chapter 7 discusses the findings, presenting implications resulting from their detail.

To offer a little more orienting detail, Chapter 1 reaffirms the problem that is SMHWB, but demonstrates need for openness to 'different thinking' and alternative perspectives on the issue, to build appropriate knowledge (and aid effective, proactive action taken in its name). Chapter 2, building on this suggestion, via a narrative literature review, questions the embedded nature of definitions attached to

'mental health', 'wellbeing', 'student' and 'university', and the subsequent implications of these in reference to SMHWB. Adopted is a critical stance toward the current dominance of individualising identification of and approaches to the issue. Drawing on psychological and sociological perspectives, this chapter highlights a need to adopt a more interdisciplinary and relational approach to the topic of SMHWB. The value of the Power Threat Meaning Framework (Johnstone and Boyle, 2018) and ideas drawn from sociological work on affect and emotions are discussed and presented as the lens for this research. Chapter 3 explains the methodological philosophy, fieldwork decisions and actions, and analysis process adhered to within this project. Chapter 4 highlights students' thematic locations of mental health, distress and wellbeing experiences in their 'General Life' contexts. Chapter 5 accounts for students' 'University Life' and describes the specific references to university as they connected them to their SMHWB. Chapter 6 unites the prior two contexts and their elements through exploration and description of the common undercurrent emotions experienced by students in their mental health, distress and wellbeing experiences.

DISCUSSION AND CONTRIBUTION TO KNOWLEDGE

The final chapter in this thesis (Chapter 7) offers a discussion and concluding comments. After a summary outlining the findings as they respond to the declared research aims and objectives, the strengths and limitations of this project are acknowledged. Whilst this thesis offers important qualitative additions to information on the topic of UK SMHWB, it is important to acknowledge the participant recruitment difficulties experienced, as well as the fact that the stories shared are contained (limited) to one university. Implications and possibilities illustrated by and through this project in reference to current UKHE activities and potential sites for future research are also explored. With regard to the former, for example, issues relating to institutional communication practices are noted, and turning to the latter, the areas of course specific and student bereavement experiences are highlighted.

Ultimately, this project generates impact via its provision of timely qualitative data (useful for the design and tailoring of new support mechanisms) and its ability to

augment existing information pertaining to student mental health, distress and wellbeing. The point is made that the contribution of this thesis is multi-pronged. Firstly, in reference to the methods employed, demonstrated is the importance of over-time and multi-level engagement with students as key to making visible what may rather be rendered obscured by continued reliance on traditional research tools. Secondly, the affective reading of university-connected mental health, distress and wellbeing experiences is particularly insightful as an important, yet at present still under-appreciated, aspect of SMHWB. Reframing how SMHWB experiences are approached and questioned, to consider not only events, circumstances and actions but emotions, appears crucial to understanding what this element of a university experience means at a deeper level. Lastly, cumulatively shown is how this research should be considered an invitation to augment existing perspectives and approaches to SMHWB through re-evaluation and discussion regarding how it may be conceptualised differently and alternatively understood.

Chapter 1: **Introduction**

1.1. The Current Landscape of UK University 'Student Mental Health and Wellbeing' (SMHWB)

UCAS' identification of a 450% increase between 2011-2020 in UK university applicants' declarations of mental health conditions (UCAS, 2021) provides stark indication that the growing rates of student distress recorded across recent years (Thorley, 2017; ONS, 2018; Shackle, 2019; ONS, 2022; Pollard *et al.*, 2021: 10) show no sign of abating. This one detail in itself adds further weight to Shackle's identification that, "the number of students seeking help inevitably reflects a wider crisis in young people's mental health...six times more young people in England (aged 4 to 24) have psychological problems today than a generation ago" (2019). It also signals a coming of even greater demand for university mental health services that are already under pressure (Broglia, Millings and Barkham, 2018; Thorley 2017; Haroun in Waddington, 2021: 105). Alongside this, current figures on university student suicides also continue to concern. Whilst demonstrating a decrease to "the lowest rate over the last four years" (ONS, 2022), the figure of 3.0 suicide deaths per 100,000 students (64 to the end of academic year 2020) is certainly high enough to merit societal as well as UKHE sector worry.

Recent pattern details in SMHWB noted include that male students are the least likely to seek mental health support from academic-institutional services (Waight and Giordano, 2018: 397; Hemmings 2019), and that anxiety and depression present as the most common self-reported student mental health problems (Student Minds, 2022). Issues of loneliness and belonging are now also noted as growing (Student Minds, 2022; Malta *et al.*, 2022). In reference to suicide, demonstrated remains a higher prevalence of suicide amongst undergraduates, and male students continue to be those with a higher completed-suicide rate than females (Top Universities, 2018; Hemmings, 2019; Waddington, 2021: 10; ONS, 2022), despite higher numbers of female students experiencing mental distress (Bíró *et al.*, 2011; Richardson, 2016). Specific concerns connecting SMHWB with particular study disciplines (Araque *et al.*, 2009; Cardwell *et al.*, 2013: 266; Yasuhiro *et al.*, 2018) and year groups (McKendry

et al., 2014; Macaskill, 2013; Thomas *et al.*, 2017; Macaskill, 2018) have also been highlighted. Macaskill (2013, 2018), for example, has pointed to a need to consider mental health and wellbeing experiences as specific to each undergraduate year group (Macaskill, 2013; see also Barr, 2020), highlighting how pressure-emphases experienced can be year-associated. Her work indicated first-year concerns as concentrated on homesickness, adjusting to independent living/working, managing finances and 'housemate issues', whilst second year anxieties moved to revolve around changing course structures and expectations, motivation and performance, during and post-university employment, and student debt (Macaskill, 2018). Other foci considered in projects have included student mental health literacy levels (Hearn, 2019); interactions between student personality traits and institutional culture and provisions (Yasuhiro *et al.*, 2018), and how student mental health issues are handled in academic relationships (for example, between lecturer and tutee) (Mistry, 2018: 9; Foster, 2019; Derounian, 2011). Furthermore, given the increased diversification and 'reshaping' of the overall student body in the UK (Macaskill, 2013; Mistry, 2018: 7; See Ch2: p.55), indicated is that there remain strong barriers for some students to help-seeking for their mental health (Office for Students, 2023). International (Corona *et al.*, 2017; Forbes-Mewett, 2019), 'first-generation' (Stebbleton, Soria and Huesman, 2014), BAME (Lynam *et al.*, 2020) and LGBTQ+ community (Smithies and Byrom, 2018) students have all been identified as specific student subset populations in need of increased concern and attention in reference to their mental health and wellbeing.

Such examples highlight current points of focus in reference to the students themselves, but it is also important to map current SMHWB in relation to wider societal 'events'. As Crook points out, there is necessity to consider and describe the topic of SMHWB as something entirely connected with its wider temporal (and geographical) context (Crook, 2020). In this regard, firstly, whilst it is still not yet fully appreciated how the COVID-19 pandemic affected SMHWB, students' own perceptions of the pandemic as negatively impactful upon their mental states (Student Minds, 2022) have been recorded, as have raised levels of difficulty in certain student sectors (Student Minds, 2021; Chen and Lucock, 2022). Highlighted as experiencing increased difficulties specifically connected with pandemic circumstances have been those with "past histories of mental ill health" (Royal

College of Psychiatrists, 2021), postgraduate students, and those with caring responsibilities (Byrom, 2020; OfS, 2020b, 2020c). Furthermore, negative mental impacts upon students because of pandemic experiences appear as persisting (Hall, 2022b; Student Minds, 2022). Most recently, the UK's 'cost of living crisis' is also important to acknowledge given its increasingly visible negative impact on SMHWB. For instance, reporting in November 2022, the Office for National Statistics illustrated students as connecting a worsening in their mental health with financial worries. Forty-five percent of the students declared their mental health had deteriorated since the start of the 2022/3 academic year; 50% of them also reported as already experiencing financial difficulties, (15% of those identifying the difficulties as 'major') (ONS, 2022; see also Student Minds, 2022). Adding to this, reporting in March 2023, the Russell Group Students' Unions identified 1 in 4 students as going without food or necessities due to lack of funds, and ultimately 72% of those consulted described their mental health as having suffered because of the 'cost of living crisis'. Such statistics are important in terms of describing current facets of SMHWB, but they also should function as a warning going forward, given research has already demonstrated financial difficulties as predictive of greater stress and depression in undergraduates (Richardson *et al.*, 2017; Macaskill, 2018).

Composite elements of SMHWB are important to map but also important is what students think about institutional responses to the issue. It is, for example, important that 1 in 5 of those consulted in research conducted by Student Minds *disagreed* with the statement 'My university is taking steps to improve student mental health' (Student Minds, 2022). It is significant also that recent research organised by the charity Humen presented 41% of the students consulted as considering their universities as lacking in preventative action in specific reference to mental health, with a third of their sample declaring "they didn't know where to go to seek help" (Humen (2022) cited in Hall, 2022a). Simultaneously apparent is that mental health and wellbeing (henceforth MHWB) (and a university's rhetoric and action demonstrated in reference to these) generally are increasingly important as part of individuals' selection criteria in even applying for university. In this regard, UCAS' identification that 1 in 5 investigate a university's support available for existing mental health conditions is significant, as is the noting that 'more than 1 in 4' examine a

university's general MHWB service provisions before application (UCAS, 2021). Alongside recognition that individuals are now seemingly more willing to talk about mental health more generally (NUS, 2022), apparently the explicit searching of, and high expectations regarding, institutions' MHWB accommodation and support (Pollard *et al.*, 2021: 10) even before formal student status is achieved is also important to acknowledge and appreciate.

Turning to UKHE institutional perspectives on SMHWB, proclamations of increased concern, understanding and commitment to act are being made, with some interventions being piloted and/or implemented (OfS, 2020a; UUK, 2018; UUK, 2020; Dhingra *et al.*, 2018: 1; Hughes and Spanner, 2019), and new advice and guidance is being issued (UUK, 2018; UUK, 2022b, 2022c; See Ch2: p.50). Summarising various elements deemed as tangible evidence of action, the Department for Education laid out how £15 million had been allocated to student mental health for 2022/23; that there is a large range of support on offer for students (Student Minds' Office for Students-funded 'Student Space' cited as a particularly valuable example); that knowledgeable charity partners are engaged with (such as Papyrus' involvement in the creation of 'Suicide-Safer Universities' guidance (UUK, 2018); and that the recently-developed University Mental Health Charter and associated award are key to supporting UK universities to "make cultural change" aiding MHWB more generally (Department for Education, 2023; Hughes and Spanner, 2019; Waddington, 2021: 8). (At present, having engaged in the 'voluntary award accreditation scheme' accompanying the University Mental Health Charter, 5 UK universities are 'Award Holders'; 61 are participating as 'Programme Members' in 2022/23.) Underpinning all such activities, the core sector guiding emphasis in relation to SMHWB rests on the idea of 'whole university' action and responsibility. As Pollard explains:

"A whole-university approach is defined as providing well-resourced mental health services and interventions, and (critically) taking a multi-stranded approach which recognises that all aspects of university life can support and promote mental health and wellbeing" (Pollard *et al.*, 2021:12-13)

However, though sector and institutional intentions may appear positive, research still points to large gaps in awareness and fully effective support provision (Dhingra

et al., 2018:1; Gask *et al.*, 2017: 593; Yasuhiro *et al.*, 2018). Important to note here is that the research into SMHWB guiding policy and UKHE initiatives remains dominated by quantitative approaches and reporting. Current explanations and declarations pertaining to SMHWB tend to draw most heavily on statistics and 'Learning Analytics' (Foster and Francis, 2019) approaches, utilising survey methods that draw on pre-determined themes and questions (Koshkin *et al.*, 2017: 2501). Furthermore, the tone of survey-result accounts frequently concentrates on mental *ill* health and *poor* wellbeing (Davoren *et al.*, 2013), overlooking how more positive-toned accounts can also contribute to discussions and activity-responses related to MHWB on campuses. What appears problematic at present, then, in reference to not just the research but broader societal perceptions dominating SMHWB conversations, is that frequently overlooked is the personal agency (Farrell *et al.*, 2017: 397), and indeed the interplay between that agency (student) and the structure (university), involved in issues of mental health, distress and wellbeing, leading to data and information that foregrounds "much more about how tools could and should work, than how they do work" (Farrell *et al.*, 2017:398; Batchelor, 2006). Qualitative understandings, whilst declared as centrally important, are afforded little space, to the extent that in-depth knowledge pertaining to students' own understandings and reflections on mental health, distress and wellbeing is lacking and incomplete (Koshkin *et al.*, 2017: 2501), even potentially misleading (Grebennikov and Shah, 2013: 607; Batchelor, 2006: 789; Broughan and Prinsloo, 2020). Essentially, arguably, dominant approaches to SMHWB have produced an overarching way of talking about the issue that may be counterproductive – SMHWB as a labelled topic has been made to appear constituted by stand-alone (disconnected), 'snapshot' and 'fixed' elements. Resulting from the limited qualitative exploration of MHWB in the overall landscape of students' lives as '*whole persons*' is lack of appreciation for how SMHWB elements may shift and interconnect differently over time, something that hinders both the understanding of, and action taken toward, the issue.

1.2 Researcher Positionality - An Initial Reflection

At this point it is pertinent to present an opening researcher-standpoint reflection. Writing in his introduction to *When It Is Darkest: Why People Die By Suicide And*

What We Can Do To Prevent It, Professor of Health Psychology Rory O'Connor recounted having experienced what he described as a form of paralysis 'by self-disclosure anxiety' whilst compiling the volume:

"As someone who has spent all of my adult life endeavouring to portray myself as competent and self-assured, I kept asking myself why on earth would I risk exposing any vulnerabilities, uncertainties and neuroses in a book." (O'Connor, 2021: 6)

Such a statement reflects the persistent discomfort in academia (amongst academics) with 'the personal' – the dominance of 'the scientific' has contributed to an embedded hierarchy of knowledges in academia within which lived experience continues to be (however implicitly) regarded as relatively lacking in authority. In reference to research activities, for all outward facing pronouncements of support and need for experiential data (particularly in social science and health-related subjects), it is still the case that qualitative work is more often than not the 'add-on', used to produce illustration for figures as opposed to an integrated, equal, partner in the work from the outset (Baum, 1995; Shelton *et al.*, 2018). Given this is the case in reference to the researched, it is perhaps not surprising that there has been even less of a 'narrative turn' (Goodson and Gill, 2011) in reference to researchers' own experiences – judgements directed at autoethnographic research, for example, of it as always "self-indulgent, narcissistic, introspective, and individualized" (Stahlke Wall, 2016), serve as illustration of continuing academy-internal scepticism toward and discomfort with researcher lived experience, contributing to perpetuation of 'missing the point' with regard to what personal knowledges can offer and bring to research topics.

Accounts of 'researcher reflexivity' customarily appear within the 'methodological account' areas of research write-ups (See Ch3: p.127). They are placed as such as means to explain and justify the conduct of the research as it happened, exploring researcher-position influences on process decisions and actions, data analysis and interpretations. My own lived experiences, however, are important to reflect upon outside of the specifically-labelled research process stages – they are key to my initial agreement to even undertake this project in the first place. I sought and undertook this study for specific reasons stemming from a specific experience, and it is

necessary to openly acknowledge this as part of the originating 'starting block' and context underpinning this project from its outset.

My witnessing of the mental distress and deterioration of my brother Martin, difficulties which culminated in his death by suicide, is the over-time experience significant to my researcher role. Martin experienced mental distress for several years prior to his death. I noted his deterioration as connected to a multitude of circumstances, such as a long-term relationship break-up; an experience of assault; alcohol use, and insomnia. Of particular significance in reference to the research presented here is the relationship I viewed between my brother's mental distress and his experiences of academic settings. Although not registered as a student at the time of his death (he had deferred his studies for a year), Martin's connection with UKHE and his 'student identity' are to me significant elements in the with-hindsight roadmap to his passing (Sutherland, 2021). My brother appeared to regard his mental state as an inhibitor of his potential as a student – in a letter draft intended for his university department 9 months before he died, he wrote the following as part of an explanation for an extensive number of absences:

“The progress of my professional/academic career has been continually interrupted and on some occasions completely forestalled. I received a 1st class degree and a Masters with Distinction ... but my work in both cases was not nearly to the standard that – had I been ‘well’ – I believe I was capable of. I received an offer to study for a PhD ... but was forced to turn it down after considered reflection on my mental state ... Part of what I experience is what I can only describe as ‘social phobia’, a fear that increases over a period of time, and will often end up with me isolating myself completely from my peers ... I have always had trouble sleeping but more recently I have suffered from severe insomnia, which is the primary cause of my recent inability to attend lectures and seminars at university.” (23rd March 2011)

Furthermore, in an appointment with a Consultant Psychiatrist in November 2011, a month before his death, situations he spoke on seemed to imply direct negative connection between his university-related experiences and contexts, sense of self, and mental state:

“when a [PhD] course in London fell through, he took tablets”

“Martin then went to [university name] to study [subject] and found that he hardly spoke to anybody in halls.”¹

Martin was, by the time of his death, feeling isolated and socially anxious, relying on antidepressant medications, though it was recorded by the consultant psychiatrist he saw just under a month before his death that:

“Martin is concerned that medication may be treating the symptoms but not the root cause, which he now sees as an inability to be with people.”²

Despite this note, prioritised was increasing his existing medications - there was no mention in the report of any other therapy options. Martin took his own life on 15th December 2011.³

At the risk of appearing dramatic to those happily unencumbered with the lived experience, whilst also wishing to emphasise the at-core significance of the detail surrounding my brother’s life and death to my research approach, watching a sibling endure such distress over years is deeply, upsettingly impactful. When, furthermore, such an experience concludes in bereavement by suicide, the already-existing difficult impact has further layers added – new questions arise and new readings/understandings/explanations of (even long-past) circumstances emerge, in relation to the person gone, but also in relation to own and others’ roles in the chain of events. My brother’s death, however unintentional on his part, ruptured my life and created a personal sense of disorientation. After a chance meeting with a charity worker, I began to learn more about suicide (and suicide loss), about mental health more broadly, about trauma (impacts), and about alternative support options about which I had no awareness, (from peer support to aromatherapy massage, to animal therapy, to formal therapies, such as ‘Eye Movement Desensitization Reprocessing’ (EMDR)). Across the years since my brother’s death, I have begun to assimilate the

¹ Consultant Psychiatrist’s report letter to General Practitioner regarding Martin Andrew Sutherland, 21st Nov. 2011.

² Ibid.

³ Martin’s death received a formal ‘Open Verdict’ coroner’s ruling; the manner of death and what I knew/learned of his mental states over the years, however, led to my own identification of it as his having taken his own life. As recorded by ONS, in 2018, the ‘standard of proof’, i.e., “the level of evidence needed by coroners to conclude whether a death was caused by suicide” was changed from ‘beyond all reasonable doubt’, to ‘on the balance of probabilities’ (ONS, 2020). This may have impacted upon the verdict given for Martin’s death had this stood in 2011.

experience into a new identity, in part a result of learning new detail and recalibrating personal assumptions, ideas and stereotypes in relation to the topics of mental health, mental illness, wellbeing, suicide – to me these had appeared unchallengeable things and they would have remained so had I not had the lived experience I have had. Whilst Martin’s death was horrific in all manners imaginable, his departure has guided me to continuously reflect on, question, rethink and re-evaluate elements falling under the labelled category that is ‘mental health’, and he himself remains a motivation to always think about ‘the layers beneath’, ‘the lines that could be running parallel’.

Thus, this research and subsequent thesis owes much to the impacts of my encounter with suicide (loss). This has not only shaped and influenced my perceptions and views of the broader topic-areas and definitions but formed into what might be described as a type of ‘person-centred knowledge’ (Gatera and Singh, 2021, 2023), even prior to development of the specific research proposal itself. Rather than this being a negative feature in this project, there is benefit in terms of acute awareness of and attentiveness to elements that would perhaps be overlooked by those without the lived experience, elements that can ultimately be integrated with and “work alongside [instead of replacing] existing knowledge systems in mental health.” (Gatera and Singh, 2021, 2023; Watling *et al.*, 2022; Rittenbach *et al.*, 2019).

1.3. Thinking Differently About SMHWB

Uniting the details of the current UKHE landscape on the specific issue and the perspectives generated via lived experience, the assertion put forth is that we need to think differently about SMHWB. Such a statement is not declared tinged with drama with an accompanying desire to ‘rip up’, abandon all work already conducted and data gathered to date on the subject; rather the intention behind such a blunt utterance is more driven by desire to impress upon those who would engage the now identifiable need for review and evaluation of existing information and approaches in order to augment and deepen our understanding of the subject in a more meaningful way.

Already, to date, there has been much activity in terms of both research and university-led development and implementation of ‘interventions’ geared toward addressing the labelled ‘student mental health crisis’. However, whilst the swiftness of such projects and activities on the part of institutions implies concrete, focused action, there persists a problem in that many underlying assumptions, even definitions, connected to SMHWB as a specific field, have not been entirely reflected upon, secured or indeed openly challenged. The fact that there is a multiplicity of working definitions of ‘mental health’ and ‘wellbeing’ (including individual-institution determined ones) being employed by UKHE institutions (Pollard *et al.*, 2021), speaks volumes on the vagueness underpinning SMHWB at present – made visible in the “variation in the ways in which universities design their strategic response” (Thorley, 2017) is a major lack of clarity in need of address. Also in need of address is the imbalance induced by the to-date largely quantitative approach to SMHWB. Student experiences remain subject to some stereotyping and assumption (Tinklin, Riddell and Wilson, 2005: 509; Batchelor, 2006: 795), and it is essential to appreciate that a student is never ‘just a student’ in order to understand SMHWB at a deeper, more meaningful level.

Given that MHWB are things that all humans have (Glazzard and Bostwick, 2018: 5), which do not exist in a vacuum away from all other elements in a person’s existence (Macaskill, 2013; Tinklin, Riddell and Wilson, 2005: 498, 511; Squires, 2019: 40), it would appear necessary to, as it were, ‘take a breath’ before refining and implementing further action (especially in the name of ‘prevention’). To achieve more refined knowledge, understanding and correspondingly ‘better’ responses, it is necessary to return to students themselves, to hear and learn from the personal experiences that they connect to their own mental health, distress and wellbeing, as a means of illuminating the granularity within this complex issue. Instead of channelling further concentration into and on developing ‘the next intervention’, there is need to pause and, to paraphrase Edinburgh University’s Chancellor’s Fellow in Health Dr Amy Chandler, (speaking on the subject of stigma within one session of the 2023 British Sociological Association Critical Mental Health Seminar Series), ask ‘bigger questions’ and correspondingly consider/explore ‘bigger ideas’.

Chapter 2:
Contextualising Today's 'Student Mental Health and Wellbeing' in the UK
– A Literature Review

2.1. Introduction

Presented here are the wider debates and discussions from which the research questions and approach developed. Adopting a narrative review technique (Gordon, 2017; Putukian, 2016; Gregory and Denniss, 2018), existing definitions and framings of terms such as 'mental health', 'wellbeing', 'student' and 'university' are examined and challenged. The topic that is SMHWP is presented as a set of discourses within discourses, and as such there is need to explore literature and concepts across disciplinary boundaries (notably psychology and sociology) to demonstrate the rationale behind and lens for this project.

This chapter is organised into four sections. The first explores how 'mental health' and 'wellbeing' are generally defined and understood. Demonstrated are multiple 'models' of MHWP, the historically established dominance of those models focused on the individual in identifying and responding to issues of distress, and criticisms of these models relevant specifically to the purposes of this thesis. The second section unpacks the labels 'university' and 'student' in relation to MHWP in the UKHE context. Identified and considered here are the current overall UKHE climate and pressures, the sector's alignment with 'individualising models of mental health', and implied consequences for SMHWP. The persistence of the 'traditional student' stereotype is challenged and the need for full acknowledgement of diversity in reference to both the demographic and affective layers attached to the meaning of being a student is brought forth. The third section explores whether current framings and modes of questioning about SMHWP function for the UK's current higher education settings. Following this exploration, the fourth section examines what alternative approaches and perspectives might aid consideration of the issue that is SMHWP. This latter section demonstrates the potential value of newer frameworks and principles guiding re-conceptualisations of distress more generally, alongside sociological perspectives on affect and emotion, for university settings specifically.

2.2. How ‘Mental Health’ and ‘Wellbeing’ are Defined and Understood

Publications reporting work in the fields of ‘Mental Health’, ‘Mental Illness’, ‘Wellbeing’, et cetera, customarily open with definition descriptions, presenting them in absolute and incontrovertible terms. It is, furthermore, most often the case that it is highly crafted, succinct statements from high level public bodies, such as the World Health Organisation, that are presented as self-explanatory definitions for the topics. The power of such definitions can be immense (McNaught, 2011: 8). However, leaving such terms and their accompanying descriptions as unscrutinised starting blocks is immediately problematic. Despite increasing visibility of questioning or criticism of the implied detail in declarations such as that from the WHO (Galderisi *et al.*, 2015: 231; Manwell *et al.*, 2015: 8; Wren-Lewis and Alexandrova, 2021) rare still is open acknowledgement of the absence of consensus regarding clear, formalised and agreed definitions of ‘Mental Health’ (Manwell *et al.*, 2015) and ‘Wellbeing’, despite these being identified as necessary to support policy and action determinations (Dodd *et al.*, 2021: 375; Manwell *et al.*, 2015). Importantly, relied-upon definitions and terms can serve more to reinforce established schools of thought on the topic, subsequently restricting knowledge rather than enabling it to deepen.

2.2a. Multiple ‘Models’

There are a myriad of models and perspectives all vying to be considered *the omnipotent way* to know and talk about mental health. To illustrate, Manwell *et al.*’s (2015: 4) survey of participants with ‘mental health expertise’ highlighted 19 “paradigms/theories/models” informing responses, whilst Richter and Dixon’s (2023: 6) ‘quasi-systematic review of theoretical approaches’ identified 34 models of mental health grouped into the 5 categories of ‘Biology’, ‘Psychology’, ‘Social Models’, ‘Consumer Models’ and ‘Cultural Models’. Such an extensive range is further complicated by sector-specific applications (illustrated by Lundqvist and Andersson’s outline of perspectives on mental health as they apply to elite sport (2021)) and developments responding to newer societal issues, (indicated by Bratman *et al.*’s (2019) ‘ecosystem service perspective’ recognising nature experiences as they relate to mental health). The array of perspectives demonstrates the complexity involved in

defining concepts (Dodd *et al.*, 2021: 375; McNaught, 2011: 7). This complexity is driven by different emphases within concepts, most often in reference to the role of and relationships between the biological, the psychological and the social (Manwell *et al.*, 2015: 1) in individual experiences. ‘Wellbeing’ as an overarching term is illustrative in this regard, given it includes related yet distinct aspects. For instance, the discrete natures of hedonic and eudaimonic wellbeing (Dodd *et al.*, 2021: 375) are important to acknowledge, the former focusing on positive emotions life satisfaction, and the absence of negative emotions (Diener, Lucas, & Oishi (2018) in Joshanloo, Jovanović and Park, 2020), the latter on aspects such as “meaning in life, a sense of continued personal growth, and social contribution” (Ryff, 2018 in Joshanloo, Jovanović and Park, 2020). Adding another layer, Galvin *et al.*, (in Galvin and Todres, 2013) describe wellbeing as grounded in individual and embodied sense-making, presenting 18 variations across the experiential domains of spatiality; temporality; intersubjectivity; mood; identity; and embodiment. As the researchers conclude:

“Our bodies know what well-being is. We recognise well-being in many different forms and nuances when it is present, and recognise its absence ... we can sense very concretely our state of well-being or otherwise, even if we are not able to find the best words to say all of it.” (Galvin and Todres, 2013: 78)

Not only are language and features complex, also important to record are the disciplinary spats seen accompanying definitional diversity – fights over paradigm authority are increasingly visible, whereby debate participants appear to be aiming for domination over not just the ‘what’ of MHWB but ‘the how’ of subsequent actions and responses. Such arguments add further difficulty to ‘knowing’ MHWB, functioning as a hindrance to meaningful perspective interaction and integration to effect positive change. It is beyond the scope of this thesis to explore entirely the detailed emphases, commonalities and, importantly, tensions between all ‘models of MHWB’, but important in relation to SMHWB in UKHE is consideration of the properties and criticisms in particular of ‘the medical model’ and ‘the psychological model’ and highlight of the need for enhancement of ‘the social model’ to deepen understanding of the issue.

2.2b. The Medical Model of Mental Health

As Tew comments, “By its very nature mental distress may be a profoundly confusing and frightening experience, both for those going through it, and for those close to them within their social and professional networks” (2005: 9). He states this as part of a suggestion as to why the biomedical model is leaned towards, because it “seems to provide answers, meanings and certainties” (Tew, 2005: 9). Huda’s explanation and evaluation of the ‘medical model in mental health’ as being about pattern recognition (Huda in Aftab, 2020) adds weight to this – the priority in this approach, he states, is to identify relevant and helpful information to aid informed care choices (Huda, 2019). The medical model of health generally takes a ‘mechanistic view of the body’ and ‘relies on biological causation’ (Barry and Yuill, 2022: 19). Nettleton’s (2013) clear identification and description of five significant features of the medical model of health (cited in Barry and Yuill, 2022: 20-21) are particularly useful in understanding its core characterisation and, consequently, priorities - firstly, a mind-body [separating] dualism guides the approach; secondly, the body is viewed in mechanical terms; thirdly, ‘intervention to treat and cure’ is emphasised; fourthly, explanations are ‘reduced’ to physical, bodily workings, and fifthly, as the umbrella to all these elements there is an overarching “belief that all disease originates from specific and knowledgeable causes” (in Barry and Yuill, 2022: 20-21). Mental health encased in such a model is therefore understood and approached predominantly in terms of illness (Rogers and Pilgrim, 2021: 1). Essentially, this model’s core regards mental health in terms of equivalency to physical health - “mental health problems are illnesses parallel with physical illnesses” (Thompson, 2018: xiv). Consequently, Thompson (2018: xv) continues, “To be mentally healthy is therefore widely understood as the absence of ... problems.” In turn, ‘symptoms’ are key and “diagnosis is considered a worthwhile ritual” (Rogers and Pilgrim, 2021: 2). As Priestley, drawing on Bentall (2009), explains, “the biomedical paradigm ... conceptualises mentally ill health as an internal pathology, mediated by certain genetic risk factors, and requiring accurate diagnosis and effective drug therapy (Bentall, 2009)” (in Priestley, 2019: 185). Within the medical model of mental health, therefore, the focus is on the identification, labelling, treating and curing of mental diseases inside an individual.

2.2c. The Psychological Model(s) of Mental Health

Described as an alternative perspective, yet one that “can also be integrated with biological perspectives” (Davidson, 2016: 25; Kinderman, 2005) is the ‘psychological model’ of mental health. This model is not singular in character, as “There are many perspectives and conceptual models that can be said to make up the psychological approach (Kinderman and Tai, 2008)” (in Lister, 2022: 9). However, the common thread to all psychological approaches, and where they do divert from the medical model, is in the recognition offered to individual contexts. The opening standpoint within psychological models is thus that “psychological processes always mediate the relationship between causal factors and the outcome (mental health problems)” (Davidson, 2016: 25); the approach taken overall is “not to diagnose a particular illness, but to describe and explain the problems of a particular individual, drawing from a variety of psychological theories” (Davidson, 2016: 25). To illustrate via one example, Kinderman describes how a psychologically grounded perspective might be characterised in the following terms: “Psychological vulnerability factors such as neuroticism may make a person more emotionally vulnerable to life events” (Kinderman, 2005: 206-17). Essentially, then, within these models, emphasis is on examining ‘disturbed’ and/or ‘disrupted’ psychological processes, in terms of “interactions and interrelationships” (Kinderman, 2005: 206-17), in order to explain rather than simply describe ‘disorder’.

2.2d. Criticisms of the Medical and Psychological Models of Mental Health – dominance of ‘disorder’ and ‘in the individual’

The grounding principles of the medical and the psychological models remain the dominant ones guiding the examination of MHWB, providing the main foundational perspective-blocks for decisions regarding response actions across western societies (and indeed beyond). However, there are criticisms directed toward these ways of thinking about mental states and experiences, particularly with regard to the medical model, which are pertinent to this study’s focus on UKHE students.

Implications of the medical model approach toward mental health have been and remain significant. Yet, as Thompson clearly explains, there are now growing views that,

“this [medical model] analogy is not only invalid, but highly problematic, misguided and oppressive, creating major problems for large numbers of people and blocking the way to more effective and less problematic way of helping and supporting people through their difficulties.” (2018: xv)

Specific concerns in reference to the medical model include that it remains wedded to “symptoms as descriptions (not explanations) of behaviours or experiences” (Timimi, 2020: 1); that it encourages notions of ‘normal’ versus ‘abnormal’ to persist, and it continues adherence to “specific treatments to address specific pathological processes” (Timimi, 2020: 1), characterised in the most part by medication, where this may not be the best course of action for an individual (Davidson *et al.*, 2016). A further key critique cites overdiagnosis in psychiatry, accompanied by assertions of the Diagnostic and Statistical Manual of Mental Disorders (DSM)⁴ as having increasingly “medicalized or pathologized various normal human experiences ... [resulting in] an inappropriate medicalization of normal sadness.” (Pierre, 2012: 653).

The problematic nature of the medical model is best described in three ways. First, the medical model is identifiable as a deficit model – this model has led to the embedding of an approach to mental health guided in the main by ‘looking for problems’ (Retief and Letšosa, 2018; Rothman, 2010). Though arguably at its intentional-origin level the medical model has a view of health and illness that could seem positive, via its expressed aim to ‘reach recovery’ (Barry and Yuill, 2022: 22), the focus inevitably still concentrates on ‘what’s wrong’. Primary concern is directed toward the ill.

Second, one of the most important of the criticisms facing the ‘the medical model’ resides in its origin focus on “sick *individuals* [*thesis author emphasis*]” (Rogers and Pilgrim, 2021: 1), despite clear evidence that “individuals do not fit neatly into

⁴ The DSM is not formally used in UK but lauded nonetheless by many as ‘the psychiatrist’s bible’ (Davies, 2013; Nettleton, 2021: 96).

categories” (Scheff (1966) in Davidson *et al.*, 2016: 12). The model’s conceptual definition of mental health, its privileging of ‘symptoms’, and its concentration on ‘disorders’ and accompanying ‘treatments’ continue to be considered, spoken about and acted upon in individualistic terms (Manwell *et al.*, 2015: 1), that is to say mental health is about what resides *in the individual*.

Third, last, and connecting the two prior elements, the language of mental illness used in the medical model is the one that continues to dominate not only discussion but mental health research and action. As Read and Sanders (2022: 11) point out, the shared vocabulary for mental states produced by the medical model can be seen to aid some people – for example, provided is the means through which experience-induced feelings of isolation can be removed, or access to specific sources of ‘treatment’ (support) might be secured, due to the terminology appearing to “offer a causal explanation for our distressing feelings”. However, the wider point to make is that the medical model has served to make mental illness terminology the dominant means through which to communicate about mental health. This language-driven element is visible in several ways. Those who have formally ‘learned the language’ have become and remain deemed the most trustworthy on the subject(s). Authority to speak on mental health-related matters therefore is afforded most to medically-qualified professionals, and it is these practitioners who are viewed, trusted and relied upon as those with the most appropriate knowledge to not only identify but also ‘treat’ and ‘cure’ what is declared a ‘disorder’ (Nettleton, 2021: 5, 23). Extending from this, the reverence for medical professionals stemming in part from their language control has also contributed to the embedding of ‘their’ terminologies in other life sectors - originally-medical diagnosis terms can be seen repurposed as descriptors for non-medical elements and experiences (Kousoulis, 2019) across society. Western societies’ over-time learning to depend on medicine (Barry and Yuill, 2022: 22) has ultimately contributed to a now firm-rooted reliance on its terminology. Medical model-derived language has *lay* currency and is not restricted to professional (medical) arenas (Barry and Yuill, 2022: 20). This is important, for example, in reference to the now frequent use of ‘mental well-being’ - whilst reaffirming the medical model as the dominant approach to understanding the issue, the repeated use of the expression has arguably contributed to a minimizing, even trivializing, of meaning (Thompson,

2018: xv). Such a language-related issue as this certainly can be seen as having significance when it comes to how populations and individuals themselves, away from medical settings, currently conceive of and talk about their mental health, distress and wellbeing experiences.

Criticisms of psychological approaches, though arguably less viscerally debated in public, are also significant. Davidson *et al.*, (2016: 39) draw attention to psychological approaches to mental health as ‘relatively recent’ and state that “psychological theory and research are developing all the time in tandem with our interventions”. Such a statement could be interpreted as signalling the models’ up-to-date relevance in reference to MHWB concerns. However, also possible to suggest is that the quick-pace of change in the psychological field, without reflective pause, could rather be unreliable and still-reactionary in terms of the interventions produced. Most important, it is the crossover with problematic elements of the medical model in three particular ways that needs outlining. First, psychological approaches still engage with the pathologizing and labelling of persons in terms of ‘disorder’. As Lister (2022: 10) explains, the psychological model remains a negative-oriented mental health approach as a consequence of “aligning disorders or deficits with psychological theories and constructs (such as resilience, identity and self-management, among others)”. Second, problematic in psychological approaches is continued preoccupation with measuring as the main way of researching (Lister, 2022) and knowing about mental health and/or wellbeing. Third, psychological approaches also emphasise the starting point in MHWB as being *in the individual*, further affirming (however unconsciously) to people ‘at large’ that MHWB should be thought about in reference to individual behaviours (Barry and Yuill, 2022: 24; Davidson *et al.*, 2016: 38). Aims of research remain largely concentrated on furnishing individuals (rather than institutions) to ‘help themselves’ (Davidson *et al.*, 2016: 38). This model, therefore, continues to ‘place the burden of recovery’ on individuals (Price-Robertson, Obradovic and Morgan, 2017; Lister, 2022).

2.2e. Amplifying ‘The Social’

Mentions of the need to at least consider social contexts and circumstances do appear in the medical and psychological approaches to MHWB and have done since the early-mid 20th century (Lugg, 2022). Within the psychological field, the labelled 'biopsychosocial model' provides clear acknowledgement of the need to take "into account social circumstances and biographical nuances" (Rogers and Pilgrim, 2021: 3). This model, credited to Engel, was conceived as a humanising counter to the "tradition and authority of dogma" of the biomedical approach (Cormack *et al.*, 2022: 2-3; Pilgrim, 2015; Bolton and Gillett, 2019). It remains described as respectful of "*both causes and meanings*" (Pilgrim, 2015: 165), integrating body and mind (Lugg, 2022) in individual experiences. However, identified have been a multiplicity of interpretations and applications conducted under the biopsychosocial banner, many demonstrating deviation from the intended ideas and purpose (Cormack *et al.*, 2022; Bolton and Gillett, 2019). Noted particularly has been a continuing of a reduced status afforded to the social aspect, ultimately signalling a failure of the model to fully integrate its three specified elements (Pilgrim, 2015; Haslam *et al.*, 2021).

The biopsychosocial model provides a clear example of a general problem across the medical and psychological approaches to MHWB - they appear somewhat rigid and resistant to change, especially regarding the status within them of 'the social'. Ultimately, the dominance of tradition in these approaches overall means that neither go far enough when it comes to social acknowledgement. In reference to the medical model in particular, Davidson is definite in his identification of its conscious disregard for how the social connects to mental distress presentations:

"Biomedical models ignore strong evidence that mental health problems are caused by adverse social circumstances." (Davidson, 2016: 25)

Tew (2005) outlines three core elements as to why social perspectives on mental health are crucial. First, distress is situated, "not constructed as some alien entity which separates out some people as fundamentally 'different' and starts to define their identities in terms of their 'pathology'" (Tew, 2005: 16); second, individual lives cannot be reduced to consistent patterns and categories, and third, these approaches allow individuals' own meaning attached to experiences to be 'taken seriously',

something which continues to be identified as a problem within mental health services (Tew, 2005: 17). Adding a further, more recent perspective to this, Chandler and Brossard argue how,

“mental disorders ... should be understood and responded to as embedded in (not only correlated with) social stratifications; thought of through the unequal production of potentially stressful emotions; considered as tied up with the politics of labelling and categorizations; and examined within the historically situated notions of culture in which they emerge.” (2022: 133)

In continuing to privilege and direct their foci on ‘mental ill health’ and ‘individual processing’, what remains underappreciated in the medical and psychological models are aspects such as the role of time, environmental factors, relationships (Read and Sanders, 2022: xii) that combine and ultimately contribute to overall concepts being skewed constructions (Dodd *et al.*, 2021; McNaught, 2011; Read and Sanders, 2022). As Barry and Yuill (2022: 22) point out, even medicine needs identifying as “a dynamic body of thought, capable of changing and adapting in light of new discoveries”. Medical knowledge itself, generally, is subject to social construction and change over time (Bradby, 2009: 55) – and in reference to mental health specifically, a survey on the adequacy of current definitions led to an important concluding comment that:

“Respondents articulated multiple levels at which mental health can be understood (i.e., from the basic unit of the gene, through the individual and up to the globe) and how meaning changes across time ... and across context.” (Manwell *et al.*, 2015: 5)

Debates regarding the organisation of the DSM (See p.37) are particularly illustrative in this regard. As Pierre (2012: 652) explains, the DSM is essentially “very much a reflection of evolving American psychiatry and the prevailing ideological, cultural and social forces” of the time, yet the manual continues to be revered outside of the American context. Consequently, the American-derived view, and definitions, can be described as a form of export (Giddens *et al.*, 2020: 712; Thomas *et al.*, 2005), perhaps not entirely appropriate for and in alternative times and contexts.

Overall, failure to be open about the historical, socially-constructed origins and nature of current and widely-used MHWB terms is not only obscuring of ‘important facets in important conversations’, there is an accompanying failure to openly acknowledge the prevailing, “certain moral and philosophical energy” (McNaught, 2011: 8) brought by said constructs. Thomas *et al.*’s (2005: 28) identification of the global expansion of biomedical psychiatry as a form of ‘neo-colonialism’, involving the “imposition of western values, customs and practices on non-western cultures”, still applies to a great extent today. The need for acknowledgement for locally- and culturally-connected meaning in relation to mental health and/or wellbeing remains. Such recognition of and engagement with this element would go some way to aid the development of appropriate and relevant support mechanisms for people experiencing mental difficulty going forward. As Chandler and Brossard point out, “Mental health is an embedded aspect of social relations, organizations, identities and structures” (Chandler and Brossard, 2022: 8), and this is particularly problematic given the “routine part of our language” (Beresford, 2020: 1338) that biomedical and psychological mental health terminology has become. Further fuelled by media outputs (Barry and Yuill, 2022: 24), which contribute to terms essentially becoming core aspects of “our *assumptive [thesis author emphasis]* world ... without explicit definition” (McNaught, 2011: 8; Horwitz in Scheid and Brown, 2010: 6; Vos in Vos, Roberts and Davies, 2019: 11), terminology is used unreflexively and without understanding of the associated full meaning.

To explore this further, whilst there has been acknowledgement of how wellbeing can be “both an objective and subjective construct” (McNaught, 2011: 9), across the two dominant models there is palpable underappreciation of how ‘mental health’ and ‘mental ill health’ can also be constructed by individuals themselves. Interesting here is consideration of the growth of lived experience and service-user voices, such as those forming the basis of the ‘field of scholarship, theory, and activism’ that has become ‘Mad Studies’ (Beresford, 2020). This field in large part is about challenging the terms ‘mad’ and ‘madness’ as “discourse ... still essentially imprisoned within a mental health paradigm,” (Beresford, 2020: 1337) and ‘reclaiming’ ownership of language use and relationships with/to the terms. As Beresford explains from his perspective,

“it is the responsibility of survivor activists like myself to work hard to make sense of this terminology and see if it truly can be put to emancipatory purposes and become anything other than one of those many terms of abuse that we have had to get used to having applied to us as mental health service users/survivors” (2020: 1338)

Amplification of the more holistic, social perspectives and models of understanding mental health and illness is not newly sought. The need for greater inclusion of the social perspective as central to issues of MHWB, however, has been deepening, especially since the beginning of this century (Beresford, 2002: 582; Boyle and Johnstone, 2020: 1). It is often the case that critiques of the more individual-focused approaches to mental health are disregarded or fiercely repudiated on the basis that those proffering the perspectives “[do] not recognize the intense pain and suffering associated with mental health problems” (Thompson, 2018: xvii; Boyle and Johnstone, 2020: 4). More socially oriented approaches have been identified as disregarding, even silencing, of important physical aspects (e.g., pain), elements that can be ‘deeply internal and individual’ (Fancourt *et al.*, 2020; Barry and Yuill, 2022: 19). However, such evaluations can be seen as misunderstanding the critical parties’ intentions and goals. In this it is appropriate to cite Thompson’s explanation of the issue in full:

“What they are saying is not that such problems do not exist, but that it is unhelpful and counterproductive to refer to them as illnesses and to tackle them as if they are primarily examples of biological misfirings, rather than complex, multi-level phenomena that need to be understood holistically by recognizing the role of psychological, social and spiritual factors and their various interactions.” (2018: xvii)

By reducing or neglecting the social perspective, the complexity of mental health, distress and wellbeing is also lessened, but in a potentially harmful way rather than one that aids those experiencing difficulty (Davidson *et al.*, 2016: 53; Bradby, 2009: 109). It may rather be the medical and/or psychological mental health models that are the misrepresenting approach(es).

Given the emphasis in social perspectives on mental health that they be “informed by principles of anti-oppressive and empowering practice” (Tew, 2005: 17), it is

relevant to highlight recent and developing work on trauma and ‘trauma-informed’ approaches to understanding and responding to mental difficulties. Beneath the current, ‘trendy’ nature (Becker-Blease, 2017: 131) of the label ‘trauma-informed’, it is important to record that evidence is growing regarding the existence of strong links between exposure to childhood trauma and mental distress in adulthood, and experiences of physical and sexual trauma as known features in the lives of many who make contact with formal mental health services (Mauritz *et al.*, 2013; Bentall *et al.*, (2014) in Sweeney *et al.*, 2016: 174). This is significant to note in the UK specifically, given that the UK Trauma Council (working with the Anna Freud Centre) has identified that 1 in 3 children and young people experience at least one adverse childhood event (Asmussen *et al.*, 2020; Public Health Scotland, 2021) by the age of 18 years (UK Trauma Council and Anna Freud Centre, 2023). Furthermore, ONS data in 2020 demonstrated that 1 in 5 adults aged 18-74 years had experienced at least one form of child abuse (emotional, physical, sexual and/or as a witness to domestic violence) before they had turned 16 years old (ONS, 2020). Such information is important considering evidence demonstrating the cumulative effect of trauma, that is, “the more traumatic experiences a person is exposed to, the greater the impact of mental and physical health” (Sweeney *et al.*, 2018: 319). Moreover, ‘Big T’, societal-level traumas including “marginalisation, poverty, racism and violence” have been acknowledged as correlates with poor mental health (Paradies (2006) in Sweeney *et al.*, 2016: 174; McCrory and Minnis (UK Trauma Council), 2022; Yang, (2018) and Wallace, (2016) in Nettleton, 2021: 104), whilst recent research has demonstrated that:

“Trauma not only affects individuals in the present, but crosses generations socially, psychologically and, recent evidence suggests, epigenetically (e.g., Yehuda 2016).” (in Sweeney *et al.*, 2018)

Importantly, while adverse childhood events can be experienced by anyone, there is evidence demonstrating that higher rates of experience do link with areas of higher deprivation (Public Health Scotland, 2021).

Importantly, also recognised has been a general public perception of trauma and adverse life events as direct, causal elements for mental health difficulties (e.g., Read

et al., 2014; Choudhry, 2016; Angermeyer and Dietrich (2006) in Sweeney *et al.*, 2016: 175). Given the recent immense strength of political and economic shifts, including quick-succession movements and events such as Black Lives Matter, #MeToo, the COVID-19 Pandemic, the 'Cost of Living Crisis', a 'trauma-informed' approach to identifying and understanding mental health, distress and wellbeing might seem appropriate in current contexts. As Vos and Roberts argue:

“the multiple crises pervading the global stage are entangled ... creating a tide of instability which shows no sign of abating ... the unfolding mental health crises we see are related to wider social upheavals. The global crises are mirrored in personal crises” (Vos, Roberts and Davies, 2019: 1)

In responding to such information regarding prevalence, recent 'collective' and 'cultural' traumas (Stanley *et al.*, 2021; Lai *et al.*, 2022) and general perceptions, trauma-informed approaches to mental health, distress and wellbeing can be seen as involving a shift from asking 'what's wrong with you?' to 'what's happened to you?' (Sweeney *et al.*, 2018; Boyle and Johnstone, 2020: 3). In reference to formal mental health services, refocused emphases are becoming apparent. 'Trauma-informed practices' are being implemented with six specific elements – safety, trust, choice, collaboration, empowerment and cultural consideration (Office for Health Improvement and Disparities (UK), 2022) – being adopted from the United States Substance Abuse and Mental Health Services Administration (SAMHSA) definition as guiding principles. Furthermore, key to an approach under the banner 'trauma-informed' is that, as Sweeney *et al.* explains:

“trauma does not need valid and reliable diagnosis or measurement, because principles of engagement are implemented for all service users ... Trauma informed approaches are, in effect, a process of organisational change that creates recovery environments” (2018: 321)

Increasing recognition of trauma can be seen as a positive step in amplifying the social perspective in thinking and conversations about mental health, distress and wellbeing. However, there are discernible criticisms of this growing focus. First, there is suggestion that trauma's current popularity has ultimately contributed to a proliferation of definitions and a subsequent diversity of implementation(s), because

of vagueness in its meaning. Becker-Blease (2017) listed the inclusion of varied practises conducted under the 'trauma-informed banner' as including, for example, 'Meditation'; 'Journal Writing'; 'Pet Therapy'; 'Cognitive Behavior Therapy' and 'Peer Specialists' amongst others. Becker-Blease commented on these not to dismiss 'trauma-informed' as a guiding principle but to make the point that such practices still emphasise responses, "to individual pathology ... in contrast to models of trauma-informed care, and a long history of clinical work and research, that emphasize connecting personal experiences to broader social systems" (Becker-Blease, 2017: 133). Whilst the idea of the 'trauma-informed' approach is important to pursue in seeking better understanding of and responses to mental difficulties, it remains important to be reflective:

"history tells us to pay particular attention to how trauma is defined, who is and who is not defining trauma, and how victims/survivors are affected by those definitions, even when there is an apparent blossoming of societal awareness (Bloom, 2013; Moffat, 1991; Tseris, 2013)." (Becker-Blease, 2017: 132)

Second, a large element of concern relates to retraumatisation caused by those bodies acting as and conducting activities as 'mental health support'. As Sweeney *et al.* (2018: 322) point out, retraumatisation "occurs when something in a present experience is redolent of past trauma". This can stem from both overt and less tangible experiences, such as "the use of 'power-over' relationships that replicate power and powerlessness by disregarding the experiences, views and preferences of the individual" (Sweeney *et al.*, 2018: 322), and can relate to experiences connected with historical and/or cultural trauma (such as racism) (Jackson (2003) in Sweeney *et al.*, 2018: 322). Important to acknowledge is that retraumatisation is often unintentional but also something persistent as a result of larger failure "to acknowledge the role of trauma in people's lives and their consequent need for safety, mutuality, collaboration and empowerment." (Jennings in Sweeney, 2016: 176). Whilst these points stem from examination of trauma in the UK's mental health system, given the transfer of the term 'trauma-informed' into work and conversations regarding actions in other systems (such as the criminal justice system, and education settings) (Becker-Blease, 2017; McChesney, 2022), it appears pertinent to

engage further with the particular perspectives on mental health, distress and wellbeing that it brings.

2.2f. Mental Health Models Summary

All models of MHWB can be critiqued, and, as Thoits explains, “No single approach to mental illness - biological, psychological, or sociological - can completely explain” (Thoits in Scheid and Brown, 2010: 124). However, whilst the biological, psychological, and social are cited as things needing acknowledgement as interrelated and interacting (Sweeney *et al.*, 2018: 319), still made visible is that each model, “tends to focus on only certain kinds of causes” (Thoits in Scheid and Brown, 2010: 124). What needs to be mapped, then, is a central point about ‘power’ in relation to these models. Ultimately what all the various approaches to mental health, mental illness and wellbeing do is function as “reasoning” discourses (Chandler and Brossard, 2022: 1), and the dominant, most powerful ‘reasonings’ remain focused on ‘the ill’ and ‘the individual’. This in turn results in a continued overlooking of the nuance and complexity of mental health, distress and wellbeing experiences (Barry and Yuill, 2022: 20, 117) and there remains a marked underrepresentation of the social perspective that therefore emphasises a,

“goal ... to deepen and elaborate appreciation of the sociological factors involved in the causes, consequences, treatment and prevention of mental illness because these sociological factors are the most likely to be ignored or neglected in the field of mental health in general.” (Thoits in Scheid and Brown, 2010: 124)

2.3. Unpacking ‘Student’ and ‘University’ in relation to ‘Mental Health’ and ‘Wellbeing’ in UK Higher Education (UKHE)

Alongside mapping the multiple ways in which mental health, mental illness and wellbeing have been and are thought about and approached generally, also needed is examination of existing identifications and definitions of ‘student’ and ‘university’ as additional contextualising elements. These labels and definitions need to be unpacked as neither can be regarded as static or fixed entities - the meaning of

'student' and/or 'university' continues to be subject to change, impacting upon understandings and subsequent approaches to SMHWB.

2.3a. An Ever-Changing University Landscape

Traditionally in the UK, universities have been viewed as having “a key role and responsibility to engage with and impact positively on communities and society as a whole” (Dooris, Powell and Farrier, 2020: 730). As Lawrence explains,

“Universities traditionally have been seen to have a tripartite purpose: to conduct research, to deliver education, and to contribute to the public good” (2021: 49).

The reality now appears more that UK universities have become more uncertain regarding their priorities, purpose, and actions (O'Connor in Brooks and O'Shea, 2021: 97; Desierto and de Maio, 2020: 148; Nixon, Scullion and Hearn, 2018), especially in reference to their relationships with their students. These uncertainties, and questions regarding the “existential core of HE institutions” (Eringfield, 2021), have certainly been made visible by the COVID-19 pandemic. Discussions about what 'post-colonial' universities should be and do (Eringfield, 2021) have illuminated issues relating to student support and modes of teaching and learning (as two examples) more generally (Raaper and Brown, 2020: 343; Eringfield, 2021). However, the origins of today's disquiet in UKHE are connected to wider over-time policy-driven changes with which the sector was already having to grapple pre-pandemic (Blackledge, 2021; Lawrence, 2021: 49). Robbins (2019), (drawing on Keat (1991)), traces the current shaping and actions in the UK's higher education sector back to the 'new vocationalism' (“associated with the 'Thatcherite' label”) originating in the late 1970s. This initiated an “attempt to remodel all institutions as commercial enterprises” (Robbins in Reay, 2019: 21), including universities. Onward from that timepoint, as Sykes (in Brooks and O'Shea, 2021: 77) lists, the UK higher education sector has gone on to experience change, “linked to consumerisation, neo-liberalisation, 1990s expansion, widening participation policies since 1997, [and] tuition fee rise”. The reference here to the neoliberalisation of UKHE is particularly important. As the dominant guiding political and economic ideology of the last few

decades (Monbiot, 2016), neoliberalism emphasises free markets and individualism (Desierto and De Maio, 2020). In reference to higher education specifically, neoliberal ideology refers to the marketization and commodification of education (Canaan and Shumar, 2008), involving a shift in emphasis from social and educational value to competition (Desierto and De Maio, 2020). Under neoliberalism, therefore, universities have become businesses for whom the primary concern is securing income via competition for students, and funding for research (Morrish, 2019). This shift to business-oriented priorities has also in turn led to a rapid and substantial expansion, or ‘massification’, of UKHE (Evans *et al.*, 2021; Giannakis and Bullivant, 2016), made visible by increased institutional and university-student profile diversity (Evans *et al.*, 2021) (See p.55-7). Overall, identified in current literature are UKHE universities as having been fundamentally changed (Roberts in Vos, Roberts and Davies, 2019: 84-86) in terms of their origin values and purpose (Desierto and De Maio, 2020). Moreover, the majority view is that this change has been for the worse as opposed to the better. With UKHE now established as a marketplace (Patfield *et al.* in Brooks and O’Shea, 2021: 22), attendance at university is becoming discussed more in terms of ‘investment’ and ‘risk’ (Danvers and Hinton-Smith in Brooks and O’Shea, 2021: 65). Ultimately, the movement away from developing learning and knowledge as the core UKHE priorities have been to a focus on finances and profit (Roberts in Vos, Roberts and Davies, 2019: 84-86) is largely considered to have been damaging.

Central to the UKHE’s neoliberal ‘remodelling by marketisation’ (Nixon, Scullion and Hearn, 2018: 927) is an institutional imperative to and preoccupation with ‘selling themselves’. As Robbins explains:

“Higher education institutions now have to market themselves ... They have to attract students and they need to benefit from the financial sponsorship of business and industry. Market forces operate at the level of corporate images, public relations, prospectuses and logos.”
(in Reay, 2019: 22)

This pressure has, in turn, produced a changed relationship with potential as well as existing students, as Tight identifies:

“Institutions of higher education, their component schools and departments, and individual academics have ... been concerned with trying to ensure that students, once enrolled, remain and successfully complete their studies, and that they get as much out of them as they can.” (2020: 689)

Such an implied regard of students as elements ‘to get as much out of as possible’ certainly indicates an altered, sector-held yet not overtly declared perception of the university-student relationship and interaction, one not exactly aligned with values connected to the enduring impression of universities as ‘leading the agenda to widen participation in HE’ (Burke, 2013; Danvers and Hinton-Smith in Brooks and O’Shea, 2021: 63). The latter would suggest more of a wish to support and ‘build-up’ students rather than extract from them; increasingly apparent is a sense of universities as being principally guided instead by the idea that “students [are] consumers of higher education” (Brooks and Abrahams in Tarabini and Ingram, 2018: 185; Pederson in Waddington, 2021: 137; Patfield *et al.* in Brooks and O’Shea, 2021: 10). Though research is beginning to explore the issue (Priestley, 2019), it is as yet unclear as yet how the present climate and changed character of the university-student relationship described has overall impacted UKHE SMHWB specifically.

2.3b. ‘Mental Health’, ‘Wellbeing’ in the Current UKHE Landscape

In light of the high numbers of students declaring difficulties and seeking support, ‘a student mental health crisis’ (Mistry, 2018) has been labelled and SMHWB declared as a matter of both concern and priority from the institutional perspective (Batchelor *et al.*, 2020). Since 2003, there has been a burgeoning of forums, actions and rhetoric all geared toward creating an impression of concrete, appropriate action in response to the concerning levels of student distress. Recent examples of what could be described as a flurry of initiatives with associated information and guidance publications include the Universities UK (UUK) #Stepchange Framework (2017); ‘A Whole University Framework for Mental Health’ (MHFA, 2017); ‘Suicide Safer Universities’ (UUK, 2018); the University Mental Health Charter (Hughes and Spanner, 2019); ‘NHS-university partnerships: Working together for student mental health’ (UUK, 2022a); ‘Suicide-safer universities: support for placement students’ (UUK, 2022b) and ‘How to respond to a student suicide: Suicide Safer guidance on

postvention’ (UUK, 2022c). All these documents and initiatives were deeply researched, often drawing on external, specialised collaborators (including charitable organisations, such as The Samaritans, Papyrus and Student Minds). They have contributed not only to increased sector and public awareness and discussion regarding student distress, but increased funding and formal guidance afforded to institutions to develop actions designed to both support students and lessen the problem going forward.

The initiatives and pronouncements mentioned above all fall under broader guiding principles in relation to the SMHWB concern. For instance, an overarching focus on “supporting a preventative approach” (Mistry, 2018: 7; Wavehill, 2022) has been declared and adopted. Such an approach includes an institutional attention shift to reevaluate sources of student information in terms of how they might indicate potential student difficulty (before crisis points). The aim is to be more anticipatory, or ‘predictive’, of student distress better, to be able to act quicker and earlier in signposting students to support (Wavehill, 2022). Furthermore, also key to the UKHE perspective is the idea of taking, “a ‘whole university’ approach” (Brewster and Cox, 2023; Barrett and Twycross, 2020: 33), also labelled as ‘a whole institution’ (OfS, 2021a) and ‘a whole community’ approach (OfS: 2021b) to SMHWB. Described as a “refreshed strategic framework” (UUK, 2020) for UKHE, the principles have been adopted as central in formal initiatives. At its core, the emphasis on ‘whole’ stresses a locating of mental health as “foundational to all aspects of university life, for all students and all staff” (UUK, 2020) and support for mental health as a responsibility of all engaged across a campus. As outlined by Universities UK (UUK) in its 2020 *Stepchange: Mentally Healthy Universities* framework publication, the ‘whole university approach’, across its 4 domains of ‘learn’, ‘live’, ‘work’ and ‘support’:

- “recognises the effect of culture and environment, and specific inequalities, on mental health and wellbeing
- seeks to transform the university into a healthy setting
- empowers students and staff to take responsibility for their own wellbeing” (2020:12)

However, despite the sector-level positive impression created through such publications and pronouncements, it is necessary to raise and question certain

facets. For instance, current sector perspectives and actions in the name of SMHWP can arguably be identified as still reactive rather than proactive. This is apparent in two ways. Firstly, as Crook (2020: 203) points out, since the 1944 Goodenough Committee on Medical Education located psychological health in institutional remit, university concern regarding SMHWP is not new and, “anxiety about student mental health has a longer historical lineage than that which is allowed by headlines proclaiming a contemporary crisis” (Crook, 2020: 193-4). What needs increased appreciation, then, is not simply a general what of SMHWP but *why* this particular moment merits the label ‘crisis’ specifically. The wider social, political and economic context within which UKHE institutions operate needs central, not peripheral, acknowledgement in current discussions about and initiatives designed for SMHWP. Whilst changes in student population demographics (Mistry, 2018), for example, are often noted, there remains little in-depth engagement with the macro-level political, economic and social climate that ultimately filters into the specific issue that is SMHWP. Secondly, and connected, overlooked also is explicit acknowledgment of SMHWP as not simply a matter of care but a business strategic imperative and priority (Roberts in Vos, Roberts and Davies, 2019: 92-3). Essentially, there is need to revisit current students’ mental states and universities’ responses taking full account of how, as Roberts argues,

“The [mental health] crisis we are embedded within is a direct and unavoidable consequence of the neoliberal remaking of education” (in Vos, Roberts and Davies, 2019: 84-86; Desierto and de Maio, 2020: 148, 150-2).

Central to both these elements, therefore requiring review, is an apparent linkage between the afore-described neoliberalist underpinning of UKHE (See p.48-50) and the state of SMHWP within it. There is emergent in the literature a suggestion that current UKHE contexts may in-part be responsible for some student difficulties, due to their alignment with neoliberal ideology and the corresponding dominance of the business facet of their function, regardless of any public pronouncements of care and concern. This is made visible in two specific ways. First, for example, identification of ‘toxic positivity’ via institutions’ ‘selling’ themselves “in highly positive and idealised ways” to entice would-be students has been presented (Danvers and Hinton-Smith, in Brooks and O’Shea, 2021: 71-2). Certain university marketing tactics have been

criticised for pushing forward to students potentially mentally harming behaviours, via the stressing of “their ‘party credentials’” and emphasising a particular form of ‘Student Experience’ that follows a “‘party pathway’” (Brooks and O’Shea, 2021: 6) revolving heavily around alcohol use. Similarly, accusations of the UKHE activities in the name of widening participation comprising in part a ‘positivity industry’ are present (Danvers and Hinton-Smith in Brooks and O’Shea, 2021: 71-72). Evident through such an identification includes a critique that, even before arrival at university, through their promotion and outreach activities institutions may contribute to instilling in individuals that they should identify themselves as the ones individually responsible and at fault if they experience distress whilst a student (Danvers and Hinton-Smith in Brooks and O’Shea, 2021: 71).

Second, the fact that a key element of neoliberal ideology rests upon individual independence and self-reliance (Robbins in Reay, 2019: 22) is crucial in examining the ideological underpinnings to UK universities’ approach and response to current SMHWB concerns. Important is recognising the ripple effect of neoliberalism’s “normative privileging of the individual” (Teghtsoonian, 2009: 28) on understandings of mental health, distress and wellbeing. Whilst neoliberalism’s emphasis on the individual may suggest positive possibilities (self-care and responsibility et cetera), there is also evidence appearing that indicates ‘exposure’ to neoliberal ideology can have negative impacts on people’s wellbeing, due to the senses of reduced social connection and increased loneliness accompanying said exposure (Becker, Hartwich and Haslam, 2021: 947). Peterson identifies overall that,

“the manifestation of neoliberalism within universities serves to increase anxiety, precarity and fear [published emphasis] as fundamental features of contemporary academic life.” (2019: 259)

In adhering to neoliberal ideological perspectives, it can be argued UKHE institutions themselves can foster *disconnected* environments (DeLaquil, 2021), thereby contributing to the increased mental difficulties being experienced by students. Furthermore, UKHE’s alignment with neoliberalism’s focus on the individual also perpetuates the dominance of the individualising principles of the medical and psychological models of mental health, that is to say, in UK university contexts there

persists a privileging and reliance on the *in-the-individual* understandings and discourses of mental health, distress and well-being (Poole in Lawrence, 2021: 135; Lawrence, 2021: 133). Priestley, for instance, acknowledges this in stating the perspective that “student ‘depression’ and ‘anxiety’ are conditions that are, in part, (re)defined by, produced by, and (re)produce neoliberalism.” (Priestley, 2019: 191). Essentially, upon deeper scrutiny of institutional actions and rhetoric, what is apparent is that:

“the academy has long been ‘so loyal to the medical model that sanest aggressions, such as pathologising, labelling, exclusion and dismissal have become a normal part of professional practice and education’.” (Poole in Lawrence, 2021: 135)

This embedded-ness of the individualising models of MHWB in university settings is made visible through various aspects. In reference to university mechanisms specifically organised to support students experiencing mental difficulties, it is evident that not only the quantity of support is insufficient, but also that the interventions themselves qualitatively do not always meet need, as Lawrence explains:

“interventions are likely to focus on service provision and not pay critical attention to existent institutional policies, curriculum and social structure that indelibly form and figure the character of the organisation and student experiences within it.” (2021: 131)

Furthermore, there are researchers scathing in their assessments and descriptions regarding university support for SMHWB at present. Robbins, for example, goes so far as to identify university staff as “as (undercover) agents of psychiatry” (Roberts in Vos, Roberts and Davies, 2019: 92), his example for this being the signing off of extensions requests on ‘mental health grounds’, which require diagnostic labels, but which are not fully investigated with regard to their validity or reliability. This appraisal is most extreme, but there are other subtle ways in which UKHE’s favouring of individualising understandings and approaches to SMHWB can be seen as embedded across university activities. For instance, in institution-to-student messaging, as Lawrence demonstrates, “The narrative of ... self-enhancement comes across quite strongly” (Lawrence, 2021: 50), as does emphasis on resilience as a ‘trait’ and direction toward self-help and self-reliance (Robbins in Reay, 2019: 22). Certainly perpetuated is a focus on individual mental *ill* health, given that focus

remains on self-alleviation of distress and avoidance of crisis, with a lack of attention on actual (good or 'everyday') mental health (Roberts in Vos, Roberts and Davies, 2019: 92; Doris, Powell and Farrier, 2019: 1). As a consequence of such things, universities can arguably be seen to be framing SMHWB themselves, in particular and potentially unhelpful ways, because of non-recognition of "broader social, cultural, and discursive approaches" (Lawrence, 2021: 151) to the issue.

In sum, in reference to UKHE it is increasingly evident that institutions focus on SMHWB from a perspective influenced by neoliberal ideology and guided by individualising models of mental health. The issue is conceived in UKHE in primarily individual terms, leading to university activities continuing to contribute to 'normalising the medicalization of human life' (Lawrence, 2021: 136) and emotions. Many initiatives and pronouncements present as reactive (rather than proactive or truly preventative (Nixon, Scullion and Hearn, 2018: 929)) and disconnected from realities of SMHWB, however well-meaning or awareness-raising the institutions declare their current work on the matter to be (Wessely and Bennett (2019) in Lawrence, 2021: 137).

2.3c. Changing Student Bodies

Turning specifically to those who opt to enter this still evolving higher education landscape, key to acknowledge is the diversification of university student bodies that the changes have brought over the last few decades (Knight, 2019; Finn, Ingram and Allen in Brooks and O'Shea, 2021: 187; Brooks and O'Shea, 2021: 1; Evans *et al.*, 2021). Universities in the UK are seen as actively inviting and encouraging of student diversity (Ellis and Johnston, 2022). The UK 'Widening Participation' agenda (Vignoles and Murray, 2016) over recent years has aimed specifically to address access to higher education barriers and increase representation of currently marginalised groups within UKHE. Targeted groups include, as a few examples, those individuals from low-income backgrounds; who are first in their families to consider going to university; who are care leavers; who have a disability, or who are from underrepresented ethnic backgrounds. At the time of writing, latest figures demonstrated an UK undergraduate population of 1.94 million individuals, with Smith

and Mallon (2022: 13) identifying that, “50 per cent of young adults in the UK are now going into HE”. Within this, activities under the ‘widening access’ banner have proved important in reference to ‘home student’ recruitment (Thompson, 2019; Kaye, 2021). Noted recently for example, was a 47% increase between 2009-2015 in university entry rates for young people from black ethnic backgrounds. Furthermore, Arday, Branchu and Boliver (2022: 13) identified that “while White British students entered higher-tariff UK universities at 2.4 times the rate of Black British students in 2010, by 2020 this ratio had declined to just 1.1 to 1.” Also recorded has been a rise from 7.4% in 2009/10 to 10.7% in 2014/15 in the number of disabled students entering UKHE (Connell-Smith and Hubble, 2018: 4), and though representing less than 1% of the student body (OfS, 2021c) one important group demonstrating ‘year on year growth’ is that of care leavers and other care-experienced individuals (Harrison, 2020; Ellis and Johnston, 2022). In reference to the recruitment of students from outside the UK, this has also continued to develop – despite a significant drop in EU-based student applications to UK universities in academic year 2021/2, data demonstrated non-EU first year enrolments rose by 32% (HESA 2023) in the same period.

However, while such details are illustrative of the growing heterogeneity in the UK student population, they do not explain the full picture of experience. Research has demonstrated that there remains difficulty for those individuals who join universities from non-traditional and/or still-marginalised backgrounds (Danvers and Hinton-Smith in Brooks and O’Shea, 2021: 62-79), especially in relation to emotional experience. For example, Danvers and Hinton-Smith’s qualitative work with school pupils thinking about attending university, highlighted the problem of overlooking the affective elements of university in ‘widening participation’ rhetoric. From the pupils’ perspectives, these authors noted, worry, risk, fear, overwhelm and lack of clarity were key life-related themes often overlooked in universities’ recruitment pursuits, leading to a suggestion that there is need “for more respectful and emotionally aware approaches to WP... to more explicitly and sympathetically acknowledge and speak to the emotional realities of HE decision-making.” (Danvers and Hinton-Smith in Brooks and O’Shea, 2021: 66, 75). Similarly, care leavers and care experienced individuals are described as having “complex and disparate needs” (OfS, 2021c) as students, ‘first-generation’ university students have been identified as facing in

university “unique stressors such as a lack of academic preparation, absence of support from family and friends, and difficult cultural transitions” (House *et al.*, 2020: 158), and realisation of the lack of in-institution representation has been suggested as something to potentially “accentuate loneliness” (Sampson *et al.*, 2022) amongst those from minority groups. Overall, what demographic-descriptive information should really prompt is recognition of student diversity as a key element in reference to SMHWB at this time, something to, as Thompson argues, “make us stop and reflect critically about ... the changing demands and pressures on students entering higher education” (Thompson, 2019: 184). There is need to be attentive to the diversity and intersectionalities in student populations to adequately respond to accompanying SMHWB experiences.

2.3d. ‘Imaginings’ of ‘Student’

A clear problem identified in the literature is that, despite the obvious diversification of the UK’s student body composition, across both macro- and micro-level conversations traditional ideas of what it is and means to be a student remain stereotyped (Sykes in Brooks and O’Shea, 2021: 79). A student is still understood as being someone “young (18-21), unmarried, middle class and white” (Sykes in Brooks and O’Shea, 2021: 81). Moreover, persisting associated ideas move “beyond demographic characteristics to behaviours and values felt to be characteristic of ‘normal studenthood’”; a partying/drinking/‘risky behaviours’ culture is deemed characteristic of UK university student life (Sykes in Brooks and O’Shea, 2021: 81). Importantly, this embedded ‘traditional student’ perception still dominates in expectations held on the part of many individuals seeking entry into UKHE. In this regard, universities themselves can be argued as encouraging of continued subscription to and reproduction of this particular stereotype due to their own continued referral back to the phrase ‘*The Student Experience*’, this phrase neither having a clear definition (Jones, 2018), nor acknowledging that ‘student’ is not singular in meaning (Sabri, 2011). As Sykes sums up, the idea of ‘the traditional student’ in the UK continues to homogenise students, is inaccurate and yet,

“impact[s] the daily lives of students, how they understand their own identities ... the myth serves as a measure of legitimacy for their own experience, excluding many students who do not fit this myth.” (in Brooks and O’Shea, 2021: 81)

‘Student’, as a term, a role, and an experience must be approached as something inherently “imagined through dominant discourses and policies” (Brooks and O’Shea, 2021: 2). Brooks and O’Shea’s (2021) edited collection entitled, *Reimagining the Higher Education Student: Constructing and Contesting Identities*, in drawing together multiple researchers’ deep-divings into how students might currently be identified and understood, points ultimately to a need to recognise the meaning of ‘student’ as fluid, open to interpretation and subject to external forces. Dominant in the UK as a consequence of the changes that have affected, and continue to effect, change in the UKHE landscape already described in this chapter is the “significant rhetoric” identifying ‘student’ as equated with ‘customer’/‘consumer’ (Whitton and Langan, 2019) and ‘future worker’ (Brooks and O’Shea, 2021). However, research that has recently sought students’ own perspectives on the meaning beneath the role label has highlighted a need to not generalise or underestimate the complexity involved in defining ‘student’. For example, for all the ‘student-as-consumer/customer’ talk, Tomlinson (2017), as one example, in working to ascertain students’ perspectives on this identity, demonstrated that the consumerist label and description does not “fundamentally capture their perspectives and relationships to higher education,” showing rather “variability in attitude and approaches towards consumerism of higher education”, with some students outright rejecting it in relation to themselves (Tomlinson, 2017; Brooks and O’Shea, 2021: 3). Moreover, somewhat overlooked elements in the meaning construction of ‘student’ have been highlighted via other work also prioritising student perspectives. For instance, important nuances emphasising the diversity of ‘student’ have been presented by Brooks and Abrahams (2021), who (via asking students to produce plasticine models as representations of themselves as students) highlighted the importance of culturally-located perceptions of ‘student’ at play and (in England) differentiation in understandings of ‘what it means to be a student’ as in part related to the degree studied and institution attended (Brooks and O’Shea, 2021: 3). What such developing research indicates is that rather than allowing ‘student’ to continue as a “‘taken-for-granted’ [role], an accepted and

somewhat unchallenged type” (Brooks and O’Shea, 2021: 247), there should be increased attention given to noting students’ own perspectives regarding the understanding they ascribe to the label ‘student’.

In reference to personal meaning, what ‘student’ (and ‘being a student’) means to an individual is important in this conversation. Work by Patfield *et al.* (in Brooks and O’Shea, 2021: 10-26), is of interest here. In this mixed-method study engaging with Australian university students, the authors drew on the Bourdieusian concept of *illusio*, interpreting it “as an individual’s interest in a specific field ... one’s interest in the ‘game’ that takes place within, and in relation to, [the] field” (in Brooks and O’Shea, 2021: 12). Identified were five forms of *illusio* mapped to students:

1. Work-oriented (university as ‘career investment’)
 2. Scholastic (focus of higher education is learning, the ‘pursuit of knowledge’)
 3. Social (university’s value is in the experience of being at university, notably in meeting and forming relationships with new people)
 4. Emancipatory (university as connected to freedom, independence, control over own lives and ‘no longer being children’)
 5. Quixotic (focus on an “idealised version of university life” involving the romanticisation of ‘university student life’ and involving media portrayals as strong features)
- (Patfield *et al.* in Brooks and O’Shea, 2021: 22).

Where this work is particularly interesting is in its noting that away from current macro-level apparent fixations on students as consumers, “rarely did the young people ... explicitly mention the economic value of university” (Patfield *et al.* in Brooks and O’Shea, 2021: 23). The work indicated a multiplicity of beliefs, ideas, perceptions, goals and indeed affects underpinning the meaning of ‘(being a) student’. Though confined to students in Australia, the identification of the less tangible, perhaps more affective, elements of ‘student’ in this study chime with others’ work in the UK demonstrating the range of what students bring to their own definition of the role and in turn to their overall university experience.

Ultimately, the term ‘student’ is devoid of singular definition and meaning and is constructed in a myriad of ways by those both internal and external to the role. Imaginings of the role stem not only from the students themselves, but also the

institutions with which they engage as well as broader societal mechanisms, such as media representations (Brooks and O'Shea, 2021). What such studies as those discussed above cumulatively indicate, though, is two elements important in relation to the research in this thesis. Firstly, that 'knowing' what and who a student is must now involve concrete attempt to know them as 'a person first', open acknowledgement of their life elements (and their impacts) outside academia. Secondly, how 'student' *feels* should be recognised as a central part of defining the role and understanding 'The Student Experience'. Whilst research commentaries, and media representations, have tended to identify what it means to be a student with tangible actions, i.e., being a student is frequently equated with what they *do* whilst in the role (Calver and Michael-Fox in Brooks and O'Shea, 2021:151-168), perhaps there is need to incorporate a spotlight on the more non-tangible dimensions informing individuals' interpretations of 'student'.

2.4. Students' Perspectives on 'Mental Health' and 'Wellbeing' – exploring the functionality of current framings and modes of questioning in UKHE

With numbers of students reporting difficulty raised (Brown, 2018; Broglia, Millings and Barkham, 2018; Priestley, 2019: 185), and demand for university support services immense (Priestley, 2019: 185; Thorley, 2017), the language of 'crisis' is prevalent, and students are more often than not considered and portrayed in terms of their 'vulnerability' (Calver and Michael-Fox in Brooks and O'Shea, 2021: 162-4). Positive perspectives in relation to the issue are harder to find (Lawrence, 2021: 134). Though visible is increasing consideration of elements such as student thriving and flourishing, and (self-)compassion and kindness in university settings (Kotera, Green, and Sheffield, 2020; Kotera, Ting and Neary, 2021; Waddington, 2021; Lawrence, 2021), the majority of research activity retains a starting focus on student distress. Students' publicly-shared, press-reported stories also still predominantly describe negative experiences (Page, 2014; Shackle, 2019), regardless of their compilation being described as reassuring and evidence of no individual 'being alone' in their difficulties. As Ask and Abidin note, students' problems are still often framed "as ubiquitous, something impossible to change, and as an inescapable part of

student life ... the only available option is to endure the agony.” (Ask and Abidin, 2018: 838).

Arguably, this framing could be as much of a concern as the mental distress experiences students are reporting. Clear in the literature are two facets to note. First, student perspectives are crucial and viewed and professed as central to developing knowledge about SMHWB specifically. Second, how that ‘student voice’ is generated and recorded can actually be seen as at times problematic in terms of the authenticity of the perspectives garnered. In this respect, Ask and Abidin provide a succinct summary of the issue:

“many processes used to include student voices reduce their contribution to ‘student feedback’, which places limits on what issues students can speak of and is tied to institutional attempts to gain a competitive edge. Consequently, we need alternative ways to engage with student discourses, also in non-institutional settings, to ensure that students are heard.” (2018: 1)

Key, then, is consideration of how such perspectives specifically on the subject of SMHWB are garnered, and the implications that has for the data-content collected.

Evident across published works, and grey literature sources, is that SMHWB as a topic has a clear and dominant methodological entwinement with quantitative research approaches (Foster and Francis, 2019; Koshkin, 2017), especially in reference to the idea of ‘student voice’. In reference to SMHWB specifically, even pre-COVID online surveys were a popular means by which to research student perspectives (Batchelor *et al.*, 2020), and apparent in the literature is that the pandemic context has served to further embed the idea of questionnaires and surveys as the main ways through which to glean student voice on this issue (e.g. Lischer, Safi and Dickson, 2022; Chen and Lucock, 2022; Catling *et al.*, 2022), given the ease of conducting such approaches at distance. Such approaches perhaps meet needs for scale and speed, in terms of their capturing data in ‘real time’, contributing to the implementation of ‘timely action’. However, they can also obscure the diversity and varied dynamics in students’ responses (Bourke and MacDonald, 2018). Quantitative approaches to researching SMHWB ask participants to align their

perspectives with those determined elsewhere, not entirely put forth their own. In many respects, the reliance on quantitative monitoring and measuring of student perspectives on SMHWB can miss the “importance of what is not voiced by students, as much as what is voiced” (Seale, 2010: 995). As Bourke and MacDonald explain:

“what might in quantitative methodologies be viewed as an ‘outlier’, becomes a pivot point in qualitative data and must be heard as legitimate and real experiences.” (2018: 165)

Whilst statistical gathering and reporting may be seen as equating to and representing student voice (Carey, 2013), it may not always be the case that the full meaning underpinning the data has been understood or, importantly, listened to (Bourke and MacDonald, 2018).

That quantitative approaches dominate ‘student voice’ is not to say that qualitative work conducted in the field of SMHWB is absent or inconsequential. There is certainly acknowledgement of the need for the inclusion of qualitative research, given the approach’s exploratory and emancipatory strengths (Dederichs *et al.*, 2021; Thambinathan and Kinsella, 2021), and there are increasing examples of projects developed specifically to address qualitative gaps in knowledge – one example of the latter is Moreton and Greenfield’s (2022) work examining UK university students’ views on the impact of Instagram on their mental wellbeing. Overall, importantly recognised, as Dederichs *et al.* explain in reference to their methodological choice to research medical students’ views on digital mental health interventions, is that:

“Qualitative designs are especially suitable to answer explorative research questions without the need of presuppositions from previous research” (2021: 2)

Similarly, thinking differently about how data of depth might be accessed is beginning to be visible. Ask and Abidin’s work, for instance, highlighted through their research (which examined memes about ‘student issues’) that there are alternative sources of information that may be especially valuable in reference to SMHWB. As they explain,

“memes as expressions of a new networked student public that contain discourses that may fall outside the main discourse on higher education ... students use humour to express, share and commiserate

over daily struggles, but also that the problems related to work/study balance and mental health are experienced as a persistent feature of student living” (Ask and Abidin, 2018: 834)

Similarly, recent work has presented forms of questioning that seem to signal shifts away from reliance on more relied-upon types (semi-structured interviewing, for example) in concerted efforts to amplify authentic student perspectives. For instance, the value of more creative and/or elicitation techniques in generating data of illuminating depth can be seen – Dalton’s work employing plasticine model-making and describing as means to explore the mental health awareness of trainee teachers facilitated a safe and less pressurised research setting, which ultimately produced “rich, deep data as participants were able to share thoughts and emotions without reticence” (Dalton, 2020: 35). Similarly, using Lego proved an insightful conduit through which to elicit and explore the ‘emotion work in doctoral education’ (Brown and Collins, 2018). Less physical in activity but thought-provoking nonetheless, Sampson *et al.*’s (2022) work asking students for their own ‘student mental health research priority’ questions reads as an interesting way of eliciting of a wide range of views, whilst Priestley *et al.*’s (2022b: 1246) employment of ‘co-creation panels’ using a “‘future retrospective’ creative ideation strategy wherein students collectively imagined the ideal university culture and environment for mental health” encouraged the participants to think both differently and self-reflectively across all elements of their lives. Furthermore, in their implementation of more imaginative ways of asking about and exploring students’ perspectives, such studies as these have begun also to orient spotlights to fall more on students’ direct linkage of their MHWB to university-academic specific elements. Specific SMHWB experiences connected to learning and teaching environments and tasks (Jones *et al.*, 2021; Lister, 2022; Baik, Larcombe and Brooker, 2019), relationships within university contexts (Priestley *et al.*, 2022b; Brewster *et al.*, 2022)), and importantly the affective elements of university life, notably in reference to loneliness and/or not feeling a ‘sense of belonging’ (Priestley *et al.*, 2022b; Sampson *et al.*, 2022), have all come more to the fore.

However, even where qualitative SMHWB research is present, there are problems to acknowledge. First, within qualitatively-focused works, participants have been and are still often approached as ‘student first’, as opposed to ‘whole person’, and their

'student perspectives' are generally permitted only within the parameters of researcher-determined topic-area focus. Thus, the nature of the qualitative work on SMHWB to date can be seen as still aiding a compartmentalising of knowledge through concentration on specific student year groups and/or would-be professions (e.g., student nurses, medical students (Rich *et al.*, 2023), or those students already identified as those with specific 'risk factors' (such as the work of Cotton, Nash and Kneale (2014) examining experiences of care leavers). A further consequence of the continuing 'snapshotting' approach to SMHWB research is that there remain many underexplored elements – there has been limited movement to address, for example, the lack of consideration of 'good' SMHWB; limited appreciation of time and fluidity in students' experiences, and limited thorough examination of the role of "the culture and practices of an institution" (Lawrence, 2021: 132), all specifically from students' perspectives.

A second issue is that even where qualitative approaches and methods are employed, most often they invariably are still guided by biomedical and psychological mental health definitions (Macaskill, 2018). This is made visible through such elements as the research on student perspectives on SMHWB still leaning heavily toward principles embedded in individualised assessment of these elements, and the fact that in qualitative research reporting it is not uncommon to see quantitative principles allocated and applied to the work. As one example of the latter, visible in Vasileiou *et al.*'s (2019) study is the application of content analysis to qualitative data used explicitly to quantify students' meaning(s). Arguably, quantifying meaning can rather serve, however unwittingly, to reduce and even reproduce problems, as opposed to employing qualitative data fully to open up possibilities that enhance insight into students' perspectives. Whilst there has been no explicit declaration of alignment with particular models of mental health, deeper inspection of the forms of research decision-making, activities conducted and reporting in the name of SMHWB 'student voice/perspective' indicates an implicit allegiance to the embedded views (within specific academic disciplines) of these elements (Roberts in Vos, Roberts and Davies, 2019: 91-2), despite "growing recognition that an exclusively medical framework is insufficient to account for the social, academic & financial pressures that students face" (Priestley, 2019: 185). Apparent, then, is suggestion that the idea

of 'authentic student voice' in relation to SMHWP is a problem not simply in methodological terms, but as one inextricably linked to the topics of MHWP themselves more broadly. It is useful to consider here the work of Briggs, who in discussing the 'mediatization of health' identifies that "scholars have internalized features of dominant communicable models" (Briggs, 2011: 225) and this subsequently filters into research questions and conduct. What this might imply in relation to research focusing on SMHWP, and in particular student perspectives on the subject, is that projects can serve to continue the invisibility (Briggs, 2011: 225) of certain 'student voice' detail vital to know to ensure both knowledge and action develop appropriately. Thus, there is need to re-evaluate and augment how and in what ways we ask students themselves about SMHWP.

2.5. Proposing Other Perspectives to Augment Understanding of SMHWP

What is apparent in the literature, despite professions of commitment to equal consideration of the elements and acknowledgement of the complexity inherent to this area (Barry and Yuill, 2022: 117), is still that, "explanations for mental illness broadly speaking fall into one of two camps: biological explanations and social explanations" (Barry and Yuill, 2022: 116). In reference to students specifically, such a dichotomy has filtered into how their SMHWP is both explored and subsequently explained, with an immense under-consideration of how their 'illness/sickness' (Shackle, 2019) may be, "in part, an experience of being sick and tired of the conditions of neoliberal higher education" (Priestley, 2019: 186). Such a contention is not uttered to belittle or dismiss the depth of feeling in students' mental distress experiences, but rather to suggest, in alignment with others already voicing the idea (Priestley, 2019: 187; Thompson, 2018: xvii), that how we have been approaching and ultimately describing SMHWP may have been obscuring important elements because of the framing. The issue at present is that reliance is still placed on a single approach to exploration and explanation that "deemphasizes the importance of other causes" (Thoits in Scheid and Brown, 2010: 124), despite already-made calls for this to alter. Consequently, to reiterate Thoits' stance from 2010, remaining is,

“the goal [is] to deepen and elaborate ... appreciation of the sociological factors involved in the causes, consequences, treatment and prevention of mental illness because these sociological factors are the most likely to be ignored or neglected in the field of mental health in general.” (in Scheid and Brown, 2010: 124)

It is not a matter of entirely abandoning existing dominant framing in favour of replacement with another – rather there is need to augment existing approaches with other perspectives to enable access to overlooked information. As Lawrence explains most clearly, there needs to be concerted effort to grant,

“due attention ... to social models of mental (ill) health and wellbeing ... in addition to the hitherto near ubiquitous focus on a medical model which positioned the individual student’s body and mind as disordered and/or in need of treatment” (2021: 134).

Within the overall topic that is SMHWP, then, there needs to be increased interdisciplinary willingness to engage in conversations for a shared goal. This thesis responds to the call by drawing on perspectives from both psychology and sociology as a means to develop a more appropriate lens through which to approach SMHWP experiences today. The following final sections of the chapter thus highlight elements of the *Power Threat Meaning Framework* (henceforth PTMF) and the sociological ‘affective turn’ (an academic rethinking and repositioning of emotions and feelings as central to the development of research and knowledge about social life (Knight and Zempi, 2020; Clegg in Maxwell and Aggleton, 2013)) as influential and facilitative for the questioning and subsequent sense-making of student perspectives on their SMHWP.

2.5a. The Power Threat Meaning Framework (PTMF)

In 2018, a new framework for understanding how humans cope with distress was published. Funded by the British Psychological Society’s Division of Clinical Psychology, (the culmination of half a decade of work involving psychologists and those with lived experience (as service users) (Harper and Cromby, 2022: 1)), the *Power, Threat, Meaning Framework* (henceforth PTMF) was published. It was presented as a “conceptual resource” (Johnstone *et al.*, 2019: 47), not a ‘model’

(Harper, 2023). This description emphasised the PTMF not as a ‘how to’, enforceable and prescriptive manual for a new practice (to entirely replace that already in existence), but rather an initial and still-evolving set of ideas and principles inviting of interest and translation-trial into practice in different settings (Morrill, 2019; Read, 2018; O’Toole, 2022). The PTMF was described as integrating social, psychological, and biological factors to respond to the question, “How might we best conceptualize emotional distress and behavior which might concern or trouble others?” (Harper and Cromby, 2022: 1). The authors explicitly outlined their intention for the PTMF to put forth a different perspective on distress and people’s experiences of it, offering the framework as ‘an alternative to medicalised approaches to ‘mental health’ (Johnstone and Boyle, 2018), indeed a “more systemic alternative to diagnosis” (Milligan, 2022: 22). As principal authors Johnstone and Boyle explain, the PTMF,

“aims to provide a conceptual foundation for opening up new ways of understanding and identifying patterns in mental distress, anomalous experiences, and problematic behavior.” (2018: 2)

To do this, the key concepts of the PTMF are illustrated clearly via the questions at its centre (Johnstone and Boyle, 2018, 2020). Of central importance is a moving away from the more established manner of asking, ‘what’s wrong with you?’, rather engaging via:

- “‘What has happened to you?’ (How is *power* operating in your life?)
- ‘How did it affect you?’ (What kind of *threats* does this pose?)
- ‘What sense did you make of it?’ (What is the *meaning* of these situations and experiences to you?)
- ‘What did you have to do to survive? (What kinds of *threat response* are you using?)
- ‘What are your strengths?’ (What access to *power resources* do you have?)
- ...and to integrate all of the above: ‘*What is your story?*’”
(Boyle and Johnstone, 2020: 30; Johnstone and Boyle, 2018: 8; Harper, 2023)

Made visible by this list are the underlying PTMF aims to foreground the role of power in relation to distress; emphasise storytelling as key in accessing details and meaning of experiences, and contextualise difficulties. As Harper and Cromby fully explain,

“adversities in life are patterned by social inequality and thus by the negative operations of power in the lives of individuals. These adversities pose threats, and we react to those threats with embodied threat responses. Within a medical or diagnostic framework these threat responses get decontextualized and viewed as symptoms of underlying disorders. In contrast, the PTMF proposes that they are meaningful and potentially intelligible responses to complex combinations of toxic circumstances and events.” (2022: 2)

Adding further illustration to this perspective, it is worth citing the ‘five messages’ author Johnstone has more recently sought to convey in discussions of the PTMF:

- “Emotional distress and troubled or troubling behaviour are understandable in context.
- There is no separate group of people who are ‘mentally ill.’
- Narrative and meaning-making can be an empowering and healing alternative to the diagnostic model.
- Varying cultural experiences and expressions of distress should be respected.
- Distress is rooted in wider contexts of social inequality and injustice.” (Johnstone, 2022)

In brief summary, the PTMF (as a still evolving piece of work) acts as an invitation as well as a conceptual system to both think and ask differently about mental distress.

2.5b. Power, Threat, Threat Responses and Meaning in the PTMF

The proposed shift in thinking and intention as that presented by the PTMF requires a closer examination of its composition. Whilst at its umbrella level the PTMF aims at identifying patterns in emotional distress in an alternative way that diverts from medical diagnosis, symptoms, bodily dysfunction, et cetera (Johnstone *et al.*, 2018: 2; Johnstone, 2022: 16; Boyle and Johnstone, 2020: 107), the priority aspects of the framework for this thesis are located in its core framing, manner of questioning and stressed importance of narratives.

Firstly, ‘Power’ and the role it plays in individuals’ lives is at the PTMF’s core (Milligan, 2022: 18). Furthermore, it is the “negative operations” (Harper, 2022: 69; Boyle, 2022) of power that are noted in reference to their role in individual distress. In this referred to are forms of power exertion, such as coercion, discrimination and

exploitation, most often deployed by those in positions of authority or through wider structures and systems in society. Importantly, whilst acknowledging power in various forms, the PTMF places emphasis on “ideological power—power over language, meaning, and perspective—as part of the operation of other forms of power” (Johnstone and Boyle, 2018: 8).

Secondly, ‘Threat’ concerns the emotional distress implications for people stemming from said harmful uses of power (Johnstone and Boyle, 2018: 9). Here what is referred to are challenges to humans’ ‘core needs’ (Boyle and Johnstone, 2020). These needs include feeling safe, secure and valued; experiencing positive relationships; having a sense of personal control (Boyle and Johnstone, 2020:60); having basic physical and material needs met; having a sense of fairness or justice regarding life circumstances (Johnstone and Boyle, 2018: 9); experiencing a sense of hope and meaningfulness in life activities (see Johnstone and Boyle, 2018: 9; Boyle and Johnstone, 2020: 60-69; Milligan, 2022: 18). Unexpected or ‘at random’ circumstances (such as exposure to unanticipated loss or a sudden (traumatic) event, for example) can also exert ‘negative power’ in such a way to pose ‘threat’ to any person.

Thirdly, connected to identification of ‘threat’, the PTMF moves to demonstrate that “evolved THREAT RESPONSES [sic.], mediated through meaning-based bodily capabilities” are employed by individuals as means to protect themselves (Johnstone and Boyle, 2018: 9). This is a reframing of pathological symptoms as (learned) ‘survival strategies’ (Milligan, 2022: 20). For example, using drugs/alcohol, overworking/exercising, dieting, anger, distrust, self-injury, et cetera (Milligan, 2022: 19; Boyle and Johnstone, 2020: 90-91) through the PTMF can be identified as examples within a wide spectrum of individually-employed ‘responses’ to the ‘threats’ experienced (Johnstone and Boyle, 2018: 10). Furthermore these ‘threat responses’ are identified as things developed locally and across time (Johnstone and Boyle, 2018: 10).

Lastly, ‘Meaning’, in the PTMF constituted “through both beliefs and feelings, as well as through bodily reactions, and symbols” (Johnstone and Boyle, 2018: 9), concerns

individuals as “meaning-making creatures who actively try to make sense of their worlds” (Boyle and Johnston, 2020:70). This facilitates the personal meaning in responses to ‘What has happened to you?’ to emerge (Johnstone and Boyle, 2018:9), and ultimately provides the “linchpin” (Milligan, 2022: 18) of the conceptual system - without ascertaining the ‘Meaning’ there is little chance of fully identifying or understanding the threats posed by power operators and operations. To explore ‘Meaning’, the PTMF focuses on personal narratives, identifying these as the more appropriate and better-illustrative means through which individuals ‘construct’ themselves (Harper, 2022: 68-9). In identifying narratives as culturally-shaped and internalised, illustrative of “dominant frames and metaphors” influencing self-location and position (Harper, 2022: 69), and crucial to the making visible of dominant ideological power at work (Harper, 2022:69) via the ideas, beliefs and values they relay, narratives are therefore central to the PTMF as key in “conveying the inter-relatedness of the individual and culture” (Harper, 2022: 68-69; Milligan, 2022: 19; Boyle and Johnstone, 2020: 107). Across all these elements of the PTMF, ultimately what is considered and described, the authors state, is “what people *do* in the face of threat, and not ‘disorders’ that they *have*.” (Boyle and Johnstone, 2020: 108; Johnstone, 2022: 20).

2.5c. Evaluation(s) of the PTMF

The PTMF is a recent development, and there has been a somewhat polarised discussion of the framework in the public sphere (particularly on social media platforms (Milligan, 2022: 22)). The tone of this debate, often becoming characterised by trolling and personal attacks rather than concentrated on the ideas needing discussion, at times can be obscuring and divisive as opposed to constructive (Ramsden, 2019).

Criticism, even to the point of outright rejection of the PTMF, has been plentiful. As the authors outlined in a reflection published a year following the PTMF’s original publication, descriptors attached to the framework have included “‘sociopolitical’, ‘extremist’ and ‘polemical’” (Johnstone *et al.*, 2019: 48). The work has been described as lacking evidence (Salkovskis and Edge, 2018) and having been developed without

adherence to 'rigorous, scientific methodology' (Ramsden, 2019: 132). Further content areas challenged relate to its being problematic given it, "does not lend itself to marketable messaging or instantaneous understanding" in a fast-paced world (Aherne, Moloney and O'Brien, 2019: 5), and its at times dense and limiting language resulting in need for adaptations for different audiences (Milligan, 2022: 21). Mental Health Nurse, critical theorist, and *Continental Philosophy of Psychiatry* author Alastair Morgan (2023: 53) has offered a philosophical critique, including his perspectives that the PTMF's identification of mental distress actually retains similarity to other accounts of psychiatric illness or disorder, and that overall it presents as a "reductive, behavioral account of adaptation". Indeed, it is the PTMF's challenge to diagnosis and the language of disorder and illness that has faced the strongest criticism. Key in the criticism has been a perception that the authors were (are) engaging in 'stripping' people of diagnostic labels which they themselves consider helpful and necessary (Johnstone *et al.*, 2019). Ramsden (2019: 132) has also made the point that the PTMF assumes "that people want to talk about their trauma", which may not actually be the case, and which therefore suggests the PTMF as having "the potential to deepen and entrench what already tends to obstruct truly therapeutic encounters".

In contrast, positive reception of the PTMF has been noted. For example, the PTMF's resonance with lived experiences; capacity to offer dignity, respect and story ownership to those experiencing distress (Grant and Gadsby (2018) cited in Milligan, 2022: 24); recognition of power relationships at play, and the PTMF's overall facilitation of 'a space in which to speak openly' (Milligan, 2022: 21) have been appreciated. Furthermore, responding to the criticisms, the authors state there is not a removal in the PTMF of the biological but a repositioning of it, "as a 'mediator' rather than as a primary cause of mental distress," (Rose and Rose, 2023: 49; Harper, 2023; Johnstone and Boyle, 2018: 4). They reiterate their position as respectful to those who personally value their diagnoses but emphasise the perspective that offered individual choice of how to understand own distress should be key (Johnstone *et al.*, 2019; Ramsden, 2019). It is beyond the scope of this thesis to explore the intricacies of the debate, but it would appear that the sum of criticism directed at the PTMF rests mostly upon its overt challenge to the traditional and original philosophical

underpinnings of the still-dominant medical approach to issues of mental health. As Johnstone identifies:

“One way of looking at this sense of offense is that we have indeed managed to challenge some core, and usually unexamined, aspects of our taken-for-granted perspectives on the world.” (2022: 18)

2.5d. Value of the PTMF in Education Contexts

For the specific purposes of this thesis, the following statement is what draws attention to the value of the PTMF:

“The individual does not exist, and cannot be understood, separately from his or her relationships, community, and culture; meaning only arises when social, cultural, and biological elements combine; and biological capacities cannot be separated from the social and interpersonal environment.” (Johnstone and Boyle, 2018: 10)

Such a declaration enables the concepts, principles and manners of questioning underpinning the PTMF as workable principles outside the mental health sector and services, possible to map on to a range of settings (Milligan, 2022: 50), including education contexts.

Already visible in schools specifically is subscription to the idea of ‘trauma-informed approaches’ to supporting those within the institutions (Harper and Neubauer, 2021; O’Toole, 2022). Being ‘trauma informed’ in schools has come to be seen as referring to elements such as the promotion and supporting of “more inclusive education practices for children and adolescents” (Berger and Martin, 2021: 224), the latter encompassing for example the development of “trauma-sensitive classroom practices” (Thomas, Crosby and Vanderhaar, 2019), such as creating ‘safe spaces’ and engaging in active listening, empowering pupils/students (via skill teaching and content adjustments) (Berger and Martin, 2021; Record-Lemon and Buchanan, 2017; Liasidou, 2022) and facilitating personal academic choices (Berger and Martin, 2021; Morton, 2022). Also referred to is taking an “alternative approach to management of behaviour... where all behaviour is seen as a form of communication and an opportunity to develop self-regulation” (Emerson, 2022: 352; Thomas, Crosby and Vanderhaar, 2019). However, as already discussed earlier in this chapter (See p.44-

7), 'trauma-informed' as a term applied in school settings remains somewhat vague and subject to wide practice interpretation and implementation (O'Toole, 2022: 6). As O'Toole (2022: 6) outlines, "there is concern that contemporary conceptions of trauma informed practice actually reinscribe deficit perceptions and essentialize children's experiences". Furthermore, there remains in school settings an overlooking of trauma experienced at collective level (e.g., racism, sexism) (O'Toole, 2022: 6).

The PTMF seems a useful thinking and questioning aid for education settings (O'Toole, 2022). The framework does acknowledge the role of adversities in individuals' experiences. Consequently, its value for education contexts can be seen, for example, in terms of its providing a useful approach where previous mental health support (for specific population groups, such as those from black and ethnic minority groups) might have proved ineffective (Milligan, 2022: 51); in reference to it being a means to facilitate 'upstream', truly preventative support (Harper, 2023); its explicit emphasis on coping strategies and strengths (James *et al.*, 2022: 2); its suitability for use with people with and without diagnoses (Read in James *et al.*, 2022: 2), and its provision of space where "varied problems can be understood in an integrated manner" (Harper, 2023: 151). Through the combination of all these elements the PTMF would appear both a useful lens and tool for education settings, not just in reference to thinking differently about pupil mental difficulties, but in contributing to the adjusting or re-orienting of whole school cultures. O'Toole's reporting on student-teacher feedback after her employment of the PTMF as the basis for a 'Wellbeing, Mental Health and Education' module for a 'Master in Education' programme (O'Toole, 2019: 16) indicates this. Her work led to a view of the PTMF as potentially,

"provid[ing] teachers with a holistic and compassionate understanding of the origins of emotional distress, which can support them in becoming more attuned and responsive to their own inner lives as well as those of their students." (O'Toole, 2019: 15)

O'Toole identified in the students that shifting thinking about pupil distress from "discourses of disorder, maladaptation, symptoms and deficits to a language of distress, power, threats and survival strategies" could be something to positively alter education practitioners' mindsets in their overall relationships with learners (not solely in relation to the issue of mental (ill) health) (O'Toole, 2019: 17).

2.5e. The PTMF in this Thesis

The value of the PTMF for this thesis is twofold, content-derived and methodologically-related.

Firstly, though growing in reference outside of the UK (notably in the US and Australia (Harrison, Burke and Clarke, 2023)), to date the label ‘trauma-informed’ appears under explored in reference to UK university SMHWB. There are examples where the needs of students engaged on professional courses, who will need to work within a ‘trauma-informed’ paradigm in their careers (e.g., Young *et al.*, 2019), are considered and discussed, but such work concerns students’ learning *about* what it means to be trauma-informed, rather than their own experiences as learners involving trauma-informed approaches/practice. Whilst, arguably, the ‘whole university approach’ to SMHWB mentioned in the University Mental Health Charter (See p.25, p.50), citing as it does the need to appreciate the influence of “a wide range of societal and environmental factors” and afford consideration to “an individual’s context and background and the context of the institution as a whole” (Hughes and Spanner, 2019: 10), would perhaps align with trauma-informed principles, a specifically trauma-informed approach to UKHE SMHWB has not been explicitly referenced or discussed.

To date, the PTMF has not been applied to UK undergraduates and university settings as a contributory lens through which to think about and question the labelled issue that is SMHWB. The framework itself has begun to filter into discussions relating to UK compulsory education settings (pre-18 years of age) but not beyond. The PTMF’s emphases on the relational and contextualisation, social justice and recognition of diversity were thus all important in the identification of its value to this project. So too was/is its ability, in education settings specifically, to amplify student voices and narratives in this particular area of concern. As O’Toole (2022: 12) explains: “Too often students’ perspectives and voices are denied, and they experience education that is ‘done to’ them rather than *with* or *for* them” – the ‘orientation’ of the PTMF is characterized by “being with” rather than “doing to”

(O'Toole, 2022: 13). Taking this on board, this thesis therefore employed the core elements of the PTMF as part of the lens through which to think differently about how SMHWP experiences could be sought, described and understood.

Secondly, attention must be drawn to the attention given in the PTMF to narrative and storytelling as being crucial in identifying and understanding mental distress at deeper levels (See p.70). In this regard, the PTMF is particularly thought provoking, given that undergraduate students, arguably, are not in possession of entire ownership of their student stories, including in reference to their MHWP experiences. Student experiences are already subject to some stereotyping and assumption (Tinklin, Riddell and Wilson, 2005: 509; Batchelor, 2006: 795), something further compounded by the complexities of the intersection and interaction of their role as 'student' with other roles they hold as an overall citizen. As a student is never 'just a student', and MHWP are things that all humans have (Glazzard and Bostwick, 2018: 5), that do not exist in a vacuum (Macaskill, 2013; Tinklin, Riddell and Wilson, 2005: 498, 511; Squires, 2019: 40). There is need, therefore, to consider how best to access and examine, as Eastmond explains,

“the interplay between self and society, letting us see the ‘subjective mapping of experience, the working out of a culture and a social system’ that is often obscured in more typifying accounts (Behar, 1990: 225)” (2007: 250)

The want to capture “the local and textured character of [MHWP] experience against the simplifying abstractions of behaviourist theorizing” (Polletta *et al.*, 2011), and develop more meaningful understanding about SMHWP, led this project to draw on the PTMF's prioritising of narratives as important tools precisely because the process of storytelling permits agency and allows tellers to identify, make sense and situate elements of significance in their own contexts (Ainsworth and Hardy, 2012).

2.5f. Connecting to Other Disciplinary Perspectives

The PTMF is useful to the project given its adoption of a renewed, weightier focus on the role of social context (Isham, Morgan and Haddon Kemp, 2023). However, while the PTMF's approach provides an appropriate way to ask students about their mental

health, distress and wellbeing tangibly, to make further detailed sense of experiences it is also useful to employ a degree of sociological imagination. Drawing on multiple disciplines when examining mental health, distress and wellbeing is important, not least because “no one discipline can provide all the tools” (Phoenix in Twamley *et al.*, 2015: 175). As Phoenix demonstrates, there is value in interdisciplinary work given emphases in one might serve to obscure rather than illuminate – in reference to the topic in this thesis, it is worth citing the perspective in detail:

“Psychological work frequently focuses on the interpersonal as social and leaves the societal as unexamined social context. Yet, [certain] areas ... can only be partially understood interpersonally. This is not to minimise the central importance of the interpersonal but to recognise that... the interpersonal is part of nested systems that operate at micro-, meso-, exo- and macro-levels over time.” (in Twamley *et al.*, 2015: 174-5)

The augmenting value of other disciplinary perspectives and approaches in this thesis, then, is clear. They facilitate critical reappraisal of taken-for-granted assumptions, especially in reference to those ideas often presumed to be ‘common-sense’ (Barry and Yuill, 2022; 8-10), allowing exploration of the more non-tangible elements of experience (James and Gabe, 1996: 5).

2.5g. Affect and Emotion

As a specific area, research taking emotion and affect as foci for analysis (Zembylas (2007) in Reay, 2019: 42) has over recent decades contributed to a clear demonstration of the importance of feelings in reference not only to subjective experience but also those subjunctive (Banham, 2020: 134, 137) and relational in nature (Quinlan, 2016: 102). The value of this research stemming from the sociological ‘affective’ turn (Becker in Hopkins *et al.*, 2009: 204-10; Simonova, 2019; Threadgold, 2020: 3; Mintz, 2022; Jupp, 2022: 20) has been to challenge the dominant (biomedical and psychological) perception that emotions are to be examined and understood solely as ‘individual’ and ‘private’ phenomena (Zembylas, 2007: 42; Harding and Pribram, 2004; Brossard and Chandler, 2022). It is beyond the scope of this thesis to explore all to-date sociological theorizing pertaining to emotions (see Turner, 2009; Bericat, 2016), suffice it to say that the research has

contributed to understanding regarding, “the social nature of emotions and ... the emotional nature of social reality” (Bericat, 2016: 495).

What has been confirmed is that affect and emotions are temporally and culturally learned and located, as well as central to identities, motivations and behaviours (Mintz, 2022). Key concepts to have been developed include ‘emotional labor’ (Hochschild, 1979, 1983), (a collocation that speaks about the necessity to manage and perform appropriate feelings) and ‘feeling rules’, (which describes the ‘rooted in culture’ norms and expectations in social settings with which individuals’ emotions need to be aligned) (Hochschild, 1983; Hochschild in Hopkins *et al.*, 2009: 31). Other work has led to the development of ideas equating individuals’ emotional resources to ‘emotional capital’ (Zembylas (2007) in Reay, 2019: 42, 41-59; Heaney, 2019: 228), whilst, the concept of ‘sticky’ objects (Ahmed, 2004b) poses that meaning is created via emotions – objects (human and non-human) and spaces provoke feeling (in Whitehead, 2023: 16; Hunter, 2022: 131) and over time ‘affective value’ becomes attached (‘stuck’) to those with which a person is in repeated contact and interaction (Ahmed, 2004a, 2004b, 2010, 2014; Peeren, 2019: 835). Ahmed’s work in particular invites closer consideration of consequences and tensions stemming from the “intertwining of the affective and the structural” (in Whitehead, 2023: 8; Hunter, 2022). Particularly important to consider is how,

“organisational lives are partially formed through power-relations which produce not just rules about how emotions ought to be expressed, but also expectations about the affects which will be experienced.” (Hunter, 2022: 131)

Overall, most significant to note via such works is that sociological thinking and examination of affect and emotions performs as an important lens on the internal world *in interaction with* the social. Drawing on the sociology of emotions enables understanding of connections between the seen and unseen and “challenge[s] the juxtaposition of emotional and rational” in such a way as to generate new insight (James and Gabe, 1996: 5). As von Scheve identifies:

“emotions are important for human agency, for social interactions, and for understanding communities and societies.” (2018, 40; see also Barbalet in Barbalet, 2002: 4)

In reference to the topics of mental health, mental illness and wellbeing specifically, emotional nuance has been and still is underappreciated (Chandler and Brossard, 2022), something toward which sociological perspectives are now aiming more to respond. In particular, Chandler and Brossard's important recent work *Explaining Mental Illness: Sociological Perspectives* (2022), revolving as it does around a central premiss that "mental health is not about mental health" (Chandler and Brossard, 2022: 132), emphasises a need for refined questioning and a redressing of the status of emotion especially in relation to this particular topic. Their provocation that, "The mental health crisis might be a crisis in the social production of emotions" (Chandler and Brossard, 2022: 124), invites consideration with specific reference to university settings and SMHWB perspectives and experiences. It is potentially through attentiveness to student emotion and affective experiences that detailed insight may be generated with regard to the role and impact of institutionally-located power, culture, norms and values (von Scheve, 2018; Benesch, 2018; Barbalet in Barbalet, 2002: 6; Galvin and Todres with Dalhberg in Galvin and Todres, 2013).

2.5h. Education Spaces, Affect and Emotion, and 'Mental Health'

In the sphere of education specifically, there has been a long-time projected sense of discomfort in reference to affect and emotion (Zietsma and Toubiana, 2018: 427; Beard *et al.*, 2007: 236; Clegg in Maxwell and Aggleton, 2013: 71). Bloch, for instance, highlights the image of academia as a rational space, incompatible with emotionality, despite the fact that humans are always emotional (Bloch in Barbalet, 2002: 113). In published works, there has been largely an overlooking of the role of affect and emotion in reference to educational contexts (Becker in Hopkins *et al.*, 2009: 195; Quinlan, 2016: 101; Bloch in Barbalet, 2002: 115). Although these elements have been somewhat hinted at (Threadgold, 2020: 12), overall assessment suggests that the specific dimensions of them in the academy have not been adequately considered (Bloch in Barbalet, 2002: 117-8; Heaney, 2019: 227; Reay, 2004). However, identification that the importance of emotions today is generally growing (Becker in Hopkins *et al.*, 2009: 195; Lawrence, 2021: 137), something made visible by the developing viewpoint of emotions as "a new collective currency" (Jupp,

2022: 19), indicates need for the inclusion of affective extensions to researching education contexts, especially given that “sensations ... spring from a particular social context” (Threadgold, 2020: 15).

In relation to affect and emotions in universities, research has illustrated emotions as embedded in their structures (Reay, 2019: 8; Barclay, 2021: 2; Clegg in Maxwell and Aggleton, 2013). ‘Feeling rules’ (Hochschild, 1983) (the established and regulating informal and formal emotional norms of institutions) as a general concept are already acknowledged as sites of inequality. As Mandala and Ortiz illustrate:

“white women and professionals of color are expected to display deference in the face of emotionally charged experiences at work, while their counterparts are given more flexibility in how they could display anger or annoyance.” (2023, 427)

Within university settings specifically there is added complexity in reference to emotion rule navigation and management, given staff are required to perform in simultaneous corporate and service modes of behaviour (Mandala and Ortiz, 2023). Concentrating on academic staff, Barclay’s recent work explains how closer mapping of emotional cultures of universities, and university-related *felt* experiences, “can highlight the very different levels of power that exist across the academy” (Barclay, 2021:10). In large part, she argues, “the modern academy is an uncomfortable place and its feeling rules shape how that discomfort is experienced and expressed” (Barclay, 2021: 10; see also Matthewman in Waddington, 2021: 120; Haroun in Waddington, 2021: 105; Pederson in Waddington, 2021: 146). Specifically growing are critiques of the neoliberalist influence on universities as connected to growing feelings of suffering amongst their workers (Barclay, 2021:7; Jayman *et al.*, 2022; Morrish, 2019). These negative feelings are described as consequences of UKHE sector-wide elements such as the dominance of an overall ‘performance culture’ and metrics; a now widely perceived sense of academic professionalism as undermined and academic freedom as restricted, and realisation regarding job insecurity (Jayman *et al.*, 2022). Responding to this, cited is an apparent call for emotional injection - Waddington (2021: 5), for example, argues for a ‘compassion turn’, “as a response to the well-documented tyranny of neoliberalism in the global academy”. Pedersen too identifies the need for compassion in UKHE, going so far as to call it “an antidote”

to the effect of neoliberalist policies on the sector (in Waddington, 2021: 136-148). However, importantly, what such perspectives also seem to suggest is that the issue of poor SMHWP in the academy generally is perhaps moving beyond the individual – these conversations actually appear to conflate SMHWP as a topic with arguments about the place of affect and emotions in institutional settings more broadly. As Waddington illustrates, mental health-related discussions seem to now include as a central issue how:

“the organizational cultures, structures and processes that currently operate in universities, and the relentless political drive on standards, targets, results and student satisfaction ... can stifle compassion.” (in Waddington, 2021: 9)

If MHPW in academia as a general topic is becoming increasingly discussed in more emotional terms, this is also important to recognise in relation to university students and their SMHWP. The value of an ‘emotion lens’ (Hochschild in Hopkins *et al.*, 2009) is made apparent given identification of an apparent conflation of emotion with what Saltmarsh calls ‘the ‘psy’ discourses in student mental health’ (Saltmarsh in Bendix Peterson and Millei, 2016). As Saltmarsh identifies,

“‘psy’ discourses of mental health coalesce with ‘emotional labour’ (Hochschild 1983/2012) and ‘affective economies’ (Ahmed, 2004) to construct notions of happiness, well-being, and work-life balance as desirable and attainable.” (in Bendix Peterson and Millei, 2016:168)

Such an amalgam has not been queried in depth as a consequence of limited attentiveness afforded the emotion dimensions of students’ mental health, distress and wellbeing experiences i.e., how SMHWP experiences are *felt*. Nor deeply questioned have been the ‘sentiment frames’ (Pavlova and Berkers, 2022: 638-9) around SMHWP in reference to how these might function to elicit emotions, or how emotions might aid students’ understanding of those frames, both aspects ultimately contributing to a blurring of definitions and loss of specificity in relation to the topic. Despite argument having been made for increased appreciation of both students as “affective and embodied selves” and their higher education learning experiences to be understood as in large part emotional journeys (Beard *et al.*, 2007: 235), consideration of their emotions remains limited (Quinlan, 2016: 101). Quinlan makes

the point that an individualising view of students' emotions can still be seen as persisting in sociological circles (Quinlan, 2016: 102) as much as it does in psychological research, given the focus on emotion *management* in academia as the prime concern (Bloch in Barbalet, 2002: 113). What literature that is available has concentrated on emotion labor, rules (Quinlan, 2016: 102; Newcomb, 2021: 639), impact on individual learning and as shaping elements in student-teacher relationships (Barclay, 2021: 7). Yet, As Barclay states,

“feeling is never simply a response to structural conditions but an active component in their production and in the operation of power” (2021: 7)

It must be appreciated that consideration of students' emotional experiences is not simply about conforming to or suppressing in the face of imposed feeling rules (Bloch in Barbalet, 2002: 127), but rather their overall agency (Burkitt, 2016: 322) in academic spaces. Galvin *et al.*, for instance, point out how an individual's awareness of their emotions can be a source of both motivation and/or apathy (in Galvin and Todres, 2013: 29), whilst Barbalet explains overall that,

“Not only do emotions provide instant evaluation of circumstance, they also influence the disposition of the person for a response to those circumstances. It is for these reasons that it is possible to say that emotions link structure and agency.” (2002: 3)

What students might do, (in relation to their self-perceptions of their mental health, distress and wellbeing), may be intricately connected to how they feel emotionally in and/or about an interaction within their university setting. Waddington (2021: 17) raises this as something to consider through suggesting that there may be different languages through which students can describe their university experiences – it is possible that the language of emotion is one that is overlooked. It is therefore important not to lose sight of the students as being in an affective and emotional relationship with all elements of their institutions. There appears real need to expand how and where students' emotions are identified, considered and responded to in connection with their SMHWB experiences, something that therefore forms part of the lens for this research.

2.6. Closing Summary

Through revisiting established definitions and presenting wider debates and discussions connected with the terms 'mental health', 'wellbeing', 'student' and 'university', this chapter has presented the pathway to and rationale for the research aims and objectives of this project. Through examination of and challenge to existing framings of the subject, gaps in knowledge and avenues through which the topic of SMHWP can be researched have been illuminated. There is need to draw on research and concepts from across disciplinary boundaries (notably psychology and sociology), to deepen understanding of SMHWP within the current UKHE climate. In particular, elements of the Power Threat Meaning Framework (PTMF) are useful for the education sector, prompting of a reimagining regarding how SMHWP experiences can be asked about/recorded, in such a way to bring forth nuanced detail to effect change. Similarly, attentiveness to the affective experience of university study is important. Together these elements can work together to not only enhance understanding about what, where and how SMHWP in UKHE is currently experienced, but also what it means and how it *feels*. Ultimately, the literature exploration here demonstrates the need and justification for increased qualitative engagement with undergraduate students themselves, to ask them directly for experiential narratives responding to the question, 'What do undergraduate students qualitatively express about their MHWP experiences during their 'undergraduate stories'?'

Chapter 3: **Methodological Account, Findings and Reflections**

3.1. Introduction: Justification of Research Design and Procedure

Given the project's aim to explore how undergraduate students themselves account for and make sense of their SMHWB experiences, a qualitative approach (Neubauer, Witkop and Varpio, 2019; Groenewald, 2004; O'Reilly, 2009) was adopted for this project. The epistemological position for the work was characterized by a constructivist-interpretive paradigm (Kelly, 2017; Booyesen, Bendl and Pringle, 2018; Setten, 2018), within which integrated and contextualised understandings of phenomena can be developed. The approach placed emphasis on appreciating complexities and dynamics via the emic point of view, i.e., the subjective perspectives, views, beliefs of those with first-hand, lived experience (Schwandt in Denzin and Lincoln, 1998: 221). In adopting this epistemological stance, the aim was to amplify participants' voices. This is especially needed in light of the limited opportunity for students to fully lead question agendas in current research about SMHWB. Storytelling was identified as a crucial means through which to encourage student voices (Ainsworth and Hardy, 2012); consequently, a narrative-facilitating interviewing approach (via an interaction format permitting uninterrupted participant talk) was employed with participants. Ethical approval for the project was received in October 2020 (Appendix 1).

Recruited predominantly via student-led societies and communication spaces, the participants were each asked to speak in 2 interviews at different timepoints in 2020 and 2021 (Table 2.). A strategic decision was made to seek to speak with and hear undergraduate-level students' stories at two different time-points. This was included in the research design as a means to capture and explore students' reflections and perspectives in relation to SMHWB at different times within overall undergraduate experiences. This purposeful choice to include 2 interviews at different times was considered a device to deepen researcher-participant rapport and trust to facilitate openness in storytelling, but most importantly it was incorporated to encourage and enable deeper, across-time (past, present and future-related) reflections on SMHWB on the part of the participating students themselves. Between the 2 timepoints,

monthly email communication was sent to participants. There was no requirement to reply on the part of the involved students; this was a researcher-determined activity to encourage participant memory and maintained engagement with the project.

Interviews for this project were conceived primarily as spaces for unguided, student-led talk. An established format of narrative interviewing was deliberately chosen. This format was further augmented through inclusion of an elicitation task. Having determined that story-making and -telling in the present-day merit consideration and inclusion of digital technologies as a methodological tool, instigated was a pre-interview social media reflection task for participants, as a means to open up the conversation. The participants were asked to curate a total of 10 posts (5 for each interview, referencing their preceding year) that they identified as connected to 'mental health and/or wellbeing episodes' in their own student stories, and forward the chosen posts to the researcher via email before their allotted interview time(s), without inclusion of any form of explanation. Once in attendance at their interview, a Free Association Narrative (henceforth FAN) (Hollway and Jefferson, 2008) interview format, fronted by the social media elicitation task, was employed. The conversation began with uninterrupted time for the participants to tell the stories behind their social media posts. Following conclusion of their narratives, developed-in-interview probing questions were asked, followed by questions semi-structured in nature (developed based on existing SMHWB published knowledge aspects). Participants were offered the opportunity to voice any other elements they felt were important but that had not yet been mentioned at the conclusion of the interviews.

In total (including 2 pilot participants), 16 students completed both timepoint interviews; 5 others engaged in the first interview, but not the second (Table 2.). All 37 completed interviews were conducted via Microsoft Teams (due to COVID-19 restrictions in place at the time); all were audio-only recorded, and the average time length of the interviews was 2.75 hours.

Following verbatim transcription of all interviews, engagement with the data was informed by the purpose, principles and tools underpinning Braun and Clarke's process of Reflexive Thematic Analysis (RTA) (Braun and Clarke, 2022), and attentiveness to narrative elements (such as language use) was paid. An initial

familiarisation with, and organisation and coding of the data (using manual means as well as NVivo) was conducted. The analysis approach was highly iterative, a flexible process involving cyclical and repeated engagement with data elements to facilitate refinement of themes. Memos on individual transcripts were also created (Appendix 12). Key was maintaining engagement with the recorded talk both within and across cases, to retain the significance of individual experience whilst permitting broader-level insight (Ayres, Kavanaugh and Knafel, 2003).

After initial data impressions and potential thematic organisation was developed, participants were re-approached and invited to engage in a third interview to test the resonance of the analysis in reference to their experiences (Table 4.). Essentially, the research interpretation as initially developed was taken back to participants as a means of sense-checking the resonance of the analysis directions. Two participants agreed to engage in this third interaction in December 2021. Subsequent to the students' confirmation of resonance to their experiences, data analysis continued, ultimately leading to the confirmation of the three parallel-running, thematically-described areas that constitute the findings chapters subsequently presented in this thesis.

(Table 1b. Interview Date Windows and Reflection-Period Foci).

Timepoint 1 <i>Interview window and 'Reflection Period' for social media task.</i>	Timepoint 2 <i>Interview window and 'Reflection Period' for social media task.</i>	Third 'Resonance' Interview
Oct/Nov/Dec 2020. – 5 social media posts connected to preceding academic year.	May/June/July 2021. – 5 social media posts since first interview.	Dec 2021. No social media task required.

(Table 2. Participant 1st and 2nd Timepoint Interview Information).

Pseudonym	Gender	Year at TP 1	Degree	TP Interview 1	TP Interview 2
Cherry (PILOT)	F	3	Psychology	20/10/20	26/05/21
Amy (PILOT)	F	3	Psychology	22/10/20	17/06/21
Lucy	F	3	Psychology	04/11/20	10/06/21 - No show

Gemma	F	4	Design	03/11/20	07/06/21
Andrew	M	3	Theatre and Performance	06/11/20	15/06/21
Anna	F	1	Children's Nursing	10/11/20	20/07/21 - No show
Beryl	F	1	Psychology	12/11/20	27/05/21
Alex	F	3	Primary Education (BEd)	23/11/20	27/07/21
Charlotte	F	3-4	Geography	17/11/20	28/05/21
Nicola	F	3	Sports Science	16/11/20	10/06/21
Dolly	F	1 (F-Yr)	Law	18/11/20 and 24/11/20 (both tech problems). Concluded via email.	13/07/21
Pippa	F	3	Mass Communication and PR	01/12/20	25/05/21
Dave	M	3	IT for Business Management	26/11/20	18/06/21
Lily	F	3	Psychology	27/11/20	20/05/21; concluded 21/05/21
George	M	3	Sports Science	03/12/20	No response after first interview
Isobel	F	3	Adult Nursing	17/12/20 (tech problems) and 18/12/20	No response after first interview
Sara	F	3	Occupational Therapy	14/12/20	22/06/21
Mia	F	1	Occupational Therapy	21/12/20	29/06/21
Jorja	F	3	Applied Sport and Exercise Science	21/12/20	Working FT - not sure on availability – stopped responding to emails.
Bobbie	F	1	Psychology	10/12/20	28/06/21
Maguire	M	3	Politics and International Relations	08/01/21	16/06/21

Summary Points	<ul style="list-style-type: none"> - Total Participants = 21. - Total interviews conducted/completed at timepoints 1 and 2 = 37. - 16 completed 2 timepoint interviews – 5 completed 1st timepoint interviews, but not the 2nd.
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(Table 2. Participant 1st and 2nd Timepoint Interview Information).

3.2. Participants

The priority was for the consulted sample to be as varied as is possible (Butina, 2015), to capture the richness of possible student experiences (whilst also allowing any recurring and outstanding themes across the group to be identified). The study aimed to recruit, in line with qualitative research principles, a micro-scale sample, i.e., a smaller group of individuals from within a larger specified population. Such a sample size was purposefully sought with a view to exploring the phenomenon that is SMHWB in much greater depth, given that smaller samples permit access to thick description whilst also preventing the acquisition of an unwieldy amount of data (Cleary *et al.*, 2014). The inclusion criteria for participants comprised of the following:

- To be enrolled as an undergraduate (or foundation degree) student at the specified university.
- To be in the first or final year of an undergraduate degree.
- To be over the age of 18 years old.
- Fluency in spoken English.
- To be active users of at least one social media account.

Firstly, undergraduates were prioritised due to the limited qualitative information regarding SMHWB at this study level in current research, despite their dominance as the main population of concern (Foster and Francis, 2019). Postgraduate students were not recruited due to the markedly different forms of study and experience that they can experience within universities – these students necessitate SMHWB research designed specific to their circumstances. Connected to this, students on foundation degrees were included as these courses tend to lead directly onto undergraduate programmes within the same subject and institution – this is also usually the goal for those studying on them. Secondly, 18, as the UK’s legal adult age and still the most common age at which university study (following the conclusion of secondary-school education experiences) in the UK is embarked upon was deemed an appropriate boundary. Thirdly, a single university was chosen primarily

for logistical reasons (in light of the COVID-19 context), though it was also considered important to concentrate recruitment as a means to contextualise individual experiences within one common institutional setting. Fourthly, social media activity/use and spoken English fluency were included due to the storytelling required activity involved in the project. In reference to the latter, it was appreciated that non-native English-speaking students may wish to talk but feel inhibited by language concerns, but in this regard the researcher's prior experiences as an English teacher abroad were considered helpful as a conversation facilitator and aid.

The identification of participants as being in their first or final years of study was a strategic decision. Interviewing students in either Year 1 or their final year at two different timepoints allows student reflection across different sections of undergraduate experiences – elements of experiences can be related to each other, rather than compartmentalised in singular moments. For example, those in the first year are able to reflect on their pre-university experiences, their transition into undergraduate study, their current Year 1 experiences, and their thoughts about going forward into Year 2. Similarly, those in their final year can reflect on their preceding, mid-undergraduate years and their current experience, as well as potentially able to offer perceptions connected to post-graduation and their university exit. Thus, first and final year undergraduates were sought to access SMHWB experiences across the whole timespan (past, present and future) of university experiences.

In conjunction with these overarching specified elements, participants in the sample were also to be drawn from already identified 'at elevated mental ill health risk' groups within wider student bodies. Subset populations of interest identified in recent SMHWB research were kept in mind here – for example, male (e.g., Scott-Young, Turner and Holdsworth, 2020; The Insight Network/DigIn, 2020), disabled, BAME, mature, International (Clough *et al.*, 2019; Forbes-Mewett and Sawyer, 2016; Forbes-Mewett, 2019), 'First Generation' students (Hughes and Spanner, 2019; The Insight Network/DigIn, 2020; Stebleton, Soria and Huesman, 2014). Furthermore, hermeneutic phenomenological ideas permitting researcher instinct, judgement and prior knowledge derived from own experience as helpful and "valuable guides" for

sample selection (Neubauer, Witkop and Varpio, 2019: 95; Groenewald, 2004: 45) were also considered to facilitate access and capture a sample including a wide range of experiences from within the overall student population, allowing a high degree of granularity regarding the phenomenon of interest.

3.3. Recruitment Strategy and Process

A non-probability sampling technique (Given, 2008; Vehovar, Toepoel and Steinmetz, 2016) guided the recruitment strategy, the intention being to implement purposive sampling of individuals, with a view to further recruitment via snowballing (i.e., confirmed participants leading to the recruitment of other participants). Snowballing as a method is documented to facilitate better access to 'hard to reach populations' (Woodley and Lockard, 2016). Whilst in this project it is not per se that the students are hard to reach; rather it is the subjects/themes of MHWB that can exacerbate recruitment difficulties, given the potential for stigma within certain demographics.

Recruitment avoiding university-staff gatekeeping was prioritised, with recruitment locations where direct access to students could occur actively chosen. Direct email to open communication (Lunnay *et al.*, 2015) with the university's student union, various student-run societies and student representatives within each faculty was conducted (Appendix 9). By beginning the formation of the sample through these specific, diverse and (importantly) student-led avenues, the aim was that an equally varied sample could be developed – it was not representation within the sample that was the goal, but rather variation in narratives. Through these communications, also asked for was assistance to reach other potential participants – permission to advertise the project on student-led groups' social media accounts was always granted, sometimes even offered without ask. Several waves of emailing and advertising for participants was conducted, to maximise potential reach and consequently recruitment. Initial contact was sent in October 2020, with a view to securing both the overall sample and first interviews in early November 2020.

The process to become a confirmed participant in this research was stepped. Initially, any interested student was asked (via the emailed or posted advertisement) to complete an online 'Expression of Interest' form (Appendix 3) that asked for their

name, contact details, confirmation of age, year of study, use of social media and willingness to attend an initial online screening call. After receipt of this form, each student's eligibility was determined in line with the specified inclusion criteria. Following confirmation of eligibility, each student was contacted directly, supplied with a 'Student Participant Information Sheet' (Appendix 5) and invited to arrange an online 'Screening Call' (Appendix 4). The purpose of this initial in-person meet (albeit conducted virtually) was not only to explain the project verbally and clarify any information sheet points if requested, but to begin developing rapport, especially given the COVID-19 pandemic context in which both researcher and potential-participant were living and operating.

Subsequent to a 'Screening Call' concluding in verbal agreement to participate, all formal documentation was forwarded to the student concerned. All necessary steps were taken to guarantee informed consent, confidentiality and anonymity (subject to all disclosures) – participating students were asked to electronically sign (due to COVID-19 impacts) a 'Student Participation Consent Form' (Appendix 6) before returning it by email to be securely stored for the duration of the project. Participants were asked to repeat this informed consent signature and return-email process prior to each interview in which they spoke (as the majority of participants contributed to 2 interviews).

3.4. Data Generation and Collection

3.4a. Free Association Narrative Interviews and Social Media Elicitation

Multiple data gathering techniques were amalgamated and employed to capture and explore individual experiences, personal meaning, and contexts in reference to the SMHWP of these participants. Across 2 timepoints, employed were social media elicitation and an interview format to foreground individual storytelling; at a third timepoint a semi-structured form of interview was used to 'sense check' the developing analysis with participants.

Interviews drawing on narrative research principles were chosen given their value in permitting participants freedom to express whilst also retaining a degree of formality (Hansen *et al.*, 1998; May, 2011; Hollway and Jefferson, 2000). However, as Jewett,

Kerr and Tamminen (2019: 3) assert, “narrative inquiry [can be considered] as a family of methods”. As such, while the common elements of any approach seeking and using storied/narrative data remain a movement away from a pre-determined, researcher-imposed agenda in terms of questioning (Anderson and Kirkpatrick, 2016) and a prioritisation of participant perspectives and voices, there exist various tools available to generate accounts. Chosen for this research was the Free Association Narrative (FAN) interviewing format. This choice was made subsequent to a review of how different academic disciplines employ different means to both record and analyse a variety of forms of participant stories. Ranging from oral history interviews (Thompson, 2000; Ritchie, 2003; Sutherland, 2013), life story interviews (Atkinson in Gubrium and Holstein, 2002), autobiographical narrative interviews (Domecka *et al.* in Day and Miller, 2012), the biographic narrative interview method (Wengraf, 2001; Corbally and O'Neill, 2014; Kutsyuruba and Mendes in Okoko, Tunison and Walker, 2023), and creative methods such as narrative picturing (Simpson and Barker, 2007), there are many options to glean narratives. The FAN approach to interviewing presented as the most appropriate given that it not only provides storytelling space but permits consideration of “emotional motivations, rather than rational intentions” (Hollway and Jefferson, 2013: 34; Hickman in Hoggett, 2019: 43). The linear process of this form of interview overall begins with open and uninterrupted narrative elicitation/sharing, followed by researcher probing of the stories via emic questions (i.e., using participants’ language choices to frame follow-up questions) (Hollway and Jefferson, 2008: 308), concluding with time at the end for researchers to ask any further questions from their own perspectives. Interviews conclude with non-recorded closing talk, though written notetaking is permitted.

Most important within the FAN interview setting is the space afforded to encouraging storytelling via elicitation. However, in considering the particular population and their contexts for this research, identified was a need for ‘something a bit different’ in reference to *how* to elicit stories relating to the specific subject matter concerned. Literature regarding FAN interviewing acknowledges that it is not unheard of for research participants to struggle in telling stories within seemingly formal narrative interview contexts (Hollway and Jefferson, 2008); there was need within this research to augment the interview format according to the specificities of both the consulted

population and the subject matter being examined. Consequently, to aid in the “anchoring [of] people’s accounts to events that have actually happened,” (Hollway and Jefferson, 2008: 307) in reference to SMHWB specifically, inserted was a researcher-developed pre-interview social media elicitation task for participants, as a means to open up their expressions.

The development and incorporation of social media elicitation as a methodological technique for this project stemmed from researcher identification that delving deeply into lived experiences and story-making/storytelling in the present-day must now include consideration of digital technologies. Most significantly in reference to the choice/decision to elicit using social media specifically, a position aligned with a view that the ‘how’ and ‘why’ of posting needs examination, not simply the ‘what’ (Thomas, *et.al.*, 2017), was adopted. Posts were thus *not* regarded (used) as data; rather, posts were considered and valued as reflection tools for participants, to aid elicitation of ‘the stories behind’. In essence, guiding this research was a reframing to focus on the way in which individuals (students) *reflect* upon and *explain* their social media employment as part of their everyday life (Marshall and Rossman, 2011: 25), and moving away from solely examining *what* is posted/made visible can be valuable in identifying and increasing understanding and learning about (S)MHWB specifically. As such, social networking-site posts in this research were deemed useful because they provided a means through which, first, participants could deeply review and reflect on their experiences, and second, a more in-depth exploration of the individuals’ lived experiences (stories) with reference to the specified theme could be elicited.

In determining the precise nature and form of the social media elicitation within this research, perspectives on elicitation techniques more broadly (particularly those involving photographs/visual artefacts) were reviewed. Consequently, elicitation was determined as important for inclusion in the methodological conduct of this research in particular reference to participant experience/engagement and the *non-visual* data it could conceivably generate. In reference to the former, firstly, across research literature pertaining to elicitation techniques in general there is present consensus that elicitation activities are empowering experiences for research participants

(Church and Quilter, 2021). Positive evaluations include that elicitation is motivating for and enhancing of participant engagement in research (Roger and Blomgren, 2019), not least because elicitation permits participants to both be and feel active in the research (as opposed to simply identify their position as ‘research subjects’) (Sebastião, 2016). Moreover, elicitation techniques allow participant reflections untethered by certain boundaries – for example, Roger and Blomgren (2019) highlight how elicitation techniques involving visual elements facilitate research that ‘crosses linguistic and national boundaries’ (something important in relation to SMHWP research, given the desire and indeed need to increase inclusion of international students’ experiences and perspectives, for instance). Overall, in reviewing such accounts referencing positive impacts on participant engagement, reflection and ultimately experience of research project involvement, determined for this project was that the social media elicitation task should therefore focus on *participant*-curated elements, as opposed to any chosen by the researcher and presented to elicit thoughts (an approach often adopted in more theory-driven research (Church and Quilter, 2021)). This was identified as appropriate to enhance the students’ personal senses of agency in this project and their abilities to reflect on and within their own personal circumstances. In this regard, the decision to include social media elicitation ultimately connected entirely with the epistemological stance and overall aims of this research to prioritise participants’ experiences, perspectives and voices.

Secondly, turning to the potential *data* impacts of elicitation techniques influential in the decision to include the social media reflection activity for this research, whilst the purpose here was not for the elicitation to produce *new* visual/posted-content data, identified nonetheless was the potential for the task to *add* further (contextual) dimensions to information, (through probing the details/experiences behind *existing* digital artefacts). In thinking this through, Carlsson’s (1999) described ‘5 benefits of using photographs for elicitation’ was identified as applicable to this project. Carlsson’s outline provided an aid in thinking about how social media posts could be a reflection tool (rather than production goal) for the participants that could correspondingly lead to potential new and more-detailed information dimensions behind *existing* social media postings, given how elicitation activities can:

- enable participants to express experiences beyond personal vocabulary boundaries;
- ground conversations on concrete and visible things;
- stimulate conversations about context;
- represents something of the generator's values;
- enhance the possibility of expressions regarding feelings about place.
(cited in Church and Quilter (2021))

Essentially, and cumulatively in thinking about *both* participant research experience/engagement and possible data dimensions, the approach taken to the social media elicitation within this research was in alignment with Roger and Blomgren's assertion that:

“elicitation is not a single act, or one act of the research study – rather ... a process and a mind-set” (2019: 8)

The social media elicitation task-element was thus core to each interview interaction, as an entry point into more in-depth engagement (Veletsianos, Johnson and Belikov, 2019; Thomas *et al.*, 2017).

The particulars of the social media task and elicitation were as follows. Each interview was preceded by a request for the participant to reflect on their historical social media activity. Participants were asked to curate a total of 10 posts (5 for each interview, referencing their preceding year⁵) that they personally identified as connected to 'mental health and/or wellbeing episodes' in their own student stories. The chosen posts did not have to mention (S)MHWB explicitly – they had only to mean/signify/prompt to themselves 'my mental health and wellbeing as a student at that time,' as these digital-archive compilations were intended as “cultural probes” (Thomas *et al.*, 2017) to facilitate further, deeper questioning later in the interviews. The participants were asked to conduct the social media reflection task in their own time, away from researcher presence. Following their reflections, participants were asked to email screenshot-pictures of their specific chosen posts (as opposed to any links that would connect to their overall social media accounts) to the researcher prior

⁵ For the first interview, across their preceding academic year; for the second, since their first interview with the researcher.

to their interview.⁶ This was principally requested due to the COVID-19 context in which the research took place, to enable both the participant and researcher to have reference-only access to the posts during the interview-conversation itself (should this be needed/initiated by the participant). Given the posts were not to be included as data, steps were taken to avoid close researcher engagement with them. The content of the posts themselves was not relevant for the research project intentions/outcomes and therefore their email-receipt was regarded and interacted with as a simple research-process checking step/task, purely to ensure the students had engaged in the required reflection for participation in the project. Given the posts' actual purpose as 'story prompts', the researcher did not engage significantly with post content in advance of the interviews; no questions for a participant's ensuing interview were formed based on their social media posts' content. The researcher did not spend time with/examine the received posts prior to any of the interviews, as it was deemed possible that (closely) examining posts could hold potential to influence researcher judgements (either connected with individual participants or the topic of conversation overall) that in turn could impact upon both the participants' (reflective) agency in interviews and their corresponding transcribed data. Social media posts emailed to the researcher as screenshot-picture file attachments were thus opened and viewed only for verification purposes before being downloaded and saved in accordance with the project's data protection/management guidelines (as outlined to the participants in their information sheets (Appendix 5)). Participants' posts were subsequently only to be opened or used as part of the interview contexts should a participant request the researcher view them during their actual storytelling. This latter element, ultimately, did not occur/was not required – the students presented as prepared (to tell their 'behind-the-post'/reflection stories) for the interviews, having entirely engaged in the social media reflection they had been asked to conduct. All participants attended their interviews with their posts ready for their *own* reference (on their computer screens or mobile phones), having identified and organised the

⁶ One student did not want to forward their posts by email to the researcher, and it was negotiated that they would verbally describe their posts to the researcher in their interview, before telling 'the stories behind'. This worked well, emphasising that the researcher *not* having physical access to the original posts did not matter - the exercise had still prompted the participant to reflect and be able to tell a detailed story behind each of their chosen posts. The social media task, therefore, was successful in eliciting as hoped, without a need for the researcher to have visual/physical access to the post themselves.

order in which they wished to speak about them,⁷ and they verbally described or held up to the video camera any post elements that they felt significant/appropriate to their storytelling in the moment of speaking during the interview scenario. Most had found the task positive, encouraging and allowing them (sometimes unexpectedly) to reflect upon and explore the wider contextual elements of their experiences (See Ch3, p. 119-20). Upon completion of the interviews, all social media posts were deleted from digital storage, and none were consulted during the transcript-analysis stages (as the posts had served their function as reflection tools to elicit the participants' stories, generating the actual data sought and required for this research).

3.4b. Pilot Interviews

In bringing together the FAN format with social media elicitation and a more semi-structured question section towards the end of the interactions, an 'Interview Guide' (Appendix 7) was formulated. To test the effectiveness of the designed interview format and research procedure, 2 pilot recruitments and interviews were conducted whilst ethical approval was awaited in mid-October 2020. In line with the advantages of their use in determining the appropriateness and functionality of the research design as highlighted by Ismail, Kinchin and Edwards (2018) and Kim (2010), the pilot interviews were conducted in order to both check this project's recruitment strategy and the interview format components and procedure. Furthermore, it was considered important to test the elements given the prolonged backdrop of the COVID-19 pandemic necessitating that all interviews be conducted in an online environment.

The value in employing 2 pilot interviews for this project lay not only in their providing the means to assess and refine the research instruments/procedure – they also facilitated deeper reflections and evaluations relating data content (Sampson, 2004). Confirmed via the pilot interviews was the overall appropriateness of the design and process, but also indicated was need for attentiveness to specific (unanticipated) areas of experience during interview interactions.

⁷ Certain participants used their posts within the interview context itself for temporal orientation, as well as re-prompts in their story relays.

To reflect a little further on the detail of the pilot interviews, firstly, they confirmed the ease of the research procedure for the participants (as well as the researcher). Student recruitment for the pilot interviews ran smoothly in terms of procedural flow and learned was the importance of swift contact with those who expressed interest in participating, to secure involvement and build rapport. Also confirmed was the necessity for all designed steps to be in place - there was no refining needed for this aspect. After the pilot recruitment process, only minor changes were made connected to students' screening call interactions. The time allocated for the initial-meet screening calls was permitted to lengthen, depending on individual student need – prompted by the pilot was assessment that time flexibility in first interactions was vital for research rapport and trust building, especially within the context of COVID-19 social distancing. Also altered (increased) was the number of reminder emails sent to all participants between their screening call and subsequent first timepoint interviews, to ensure smooth return of both signed informed consent forms and chosen social media posts prior to the recorded conversations.

Secondly, in reference to procedural elements concerning the pilot interviews specifically, the appropriateness of the pre-interview social media elicitation task was made evident. The pilot participants spoke of initial concern about 'not finding enough posts to talk about' but later expressed appreciation for the opportunity to do the task, commenting that it had been both helpful and surprising. Consequently determined was that the social media elicitation task was appropriate and crucial. Identified was that social media was highly successful as both an elicitation tool and prompt-source for students' MHWB narratives. The pilot interviews evidenced that asking participants to reflect on their social media facilitated deeper levels of reflection on their own SMHWB. Alongside this, the overall suitability of the FAN Interview approach (Hollway and Jefferson, 2008) to engage students' thinking and storytelling about their (S)MHWB was made clear via the pilot study. This interview form, as anticipated, allowed participants both uninterrupted time and thematically-focused questioning. Furthermore, there was a successful conversational flow between the different questioning-modes in the interview setting itself that cumulatively helped to

retain focus on the specific research topic (in terms of specific stories told as well as broader thematic statements made).

Thirdly, the pilot interviews were important in reference to their contribution to data content. Stemming from them certain questions/topics of interest were added to the interview guide (within the thematically-informed section of the interview). Both pilot participants prompted awareness of a need to explore with students encounters with personal tutors specifically; emotional responses to course content; the significance of physical activity, and the employment of public and private social media accounts. Questioning to specifically probe experiences related to mental and emotional experiences between assignment submission and 'results days', and reactions to different forms of feedback was also developed. In reference to initial data analysis indications across the transcripts, both pilot students drew attention to experiences of bereavement as an important element connected with their senses of SMHWB, an aspect that is a continuing research gap with regard to published research. The significance of such an event had not been appreciated pre-pilot; these interviews thus led to noting of the element as an aspect to be attentive to in ensuing interviews, (not in terms of direct questioning, but certainly in reference to probing, should other participants comment on similar experiences).

Given the value of the data generated through the pilot interviews it was decided to include the transcripts alongside those of the subsequent non-pilot participants. The decision to absorb the pilot data into the overall project was taken based on pragmatic circumstances (time impacts and reduced levels of recruitment), but most significantly in reference to the data content in these particular conversations. Such was the nature of the pilot participants' narratives and the thematic areas about which they spoke that a waste of their contributions needed to be avoided (Sampson, 2004). In reviewing the pilot transcripts after further interviews were completed, the themes seen were identified as significant in terms of their depth and correspondence to those of other 'formal' participants. The pilot participants' contributions were identifiably valuable in reference to and for the overall study aims and objectives. Both pilot participants were asked to re-sign informed consent as 'full, formal

participants', which they agreed to provide, and both completed second timepoint interviews.

3.4c. Timepoint 1 and 2 Interviews

Subsequent to the pilot interviews, the formal first timepoint interviews commenced. On average, these interviews took place a week after initial 'Screening Call' conversations. During that time, students were asked to curate their SMHWB social media posts and ensure researcher receipt of them by email the night before their interview – this was adhered to by the participants without difficulty. Upon entering the online meeting room for the interview, initial conversation revolved around reiteration of the research aims and clarification pertaining to participation requirements and rights. Once formalities had been confirmed and following the developed 'Interview Guide' (Appendix 7), audio-only recording (via the iPhone app 'Voice Memos') started. Participants were asked the following:

"Please can you tell me about your mental health and wellbeing experience(s) whilst you've been a student this year, describing the events or experiences that have been important to you? You can refer to the social media postings you have chosen to bring with you today, as well as any other instances that come to mind."

Participants were permitted to speak for as long as they wished before signalling an end to the stories they wished to tell (elicited from the starting point of their social media posts). Encouragement to continue speaking and confirmation of researcher listening was offered (e.g., via nodding and deliberate looking into the camera to simulate face-to-face eye contact). The average length of the interviews was 2.75 hours, with non-recorded opening and closing talk conversations taking place around the formal recordings. The shortest conversation lasted 1 hour and 40 minutes; the longest just over 4 hours. As each student spoke without interruption, handwritten notes were taken, and the story probe-questions developed for the subsequent section of the interaction. Close and active listening to language/keyword choices, sequences in storytelling and other references was conducted and noted. Also noted were general non-verbal cues (e.g., extended pauses, eye-rolling, smiles, tearful displays), as well as descriptions of enacted suicide-related gestures (such as hand mimes of shooting their head or imitations of hanging), to provide contextual

information at point of analysis. Despite distance and screens as features, attentiveness was paid to any signs of distress, and where participants experienced/showed this (such as through increasing lengths in pauses, face-covering or crying), a break was offered. Reassurance was offered that interviews could be restarted whenever/if they felt able. No experience of participant distress caused a full halt to any of the interviews. Subsequent to the students' narratives and the ensuing probe-question section of the interaction, asked were the more semi-structured, researcher-determined questions relating to the current SMHWB research landscape. At times, responses to these overlapped with what students had already themselves raised, but the questions did occasionally serve to expand accounts a little further. At the close of the interview, participants were asked if they had anything they wished to add, if they had any questions they wanted to ask in return, and how the experience had felt for them overall. The audio-recording was then terminated.

Following the end of an interview call, time was given to researcher reflection on the interview experience and, in line with suggestions put forward by Groenewald, (2004: 48-9), 'fieldnotes' (observations, methodological notes, own emotional reactions et cetera) were recorded by hand, to aid data processing and analysis at a future date. Subsequent to this activity, a follow-up email was sent to the participant to offer thanks. Furthermore, as part of a general duty of care toward participants' post-project-involvement as well as during, a 'Post-interview Resources/Debrief Sheet' (Appendix 8) containing contact information details for university and approved organisations acting in the field of (S)MHWB support were provided. This was something offered in recognition of the possibility that engaging in the research activity may prompt (upsetting) self-reflections not previously anticipated after conclusion of the interview itself.

This entire process was repeated without change for the second timepoint interviews. The second interactions were organised to take place close to each student's final academic requirement submission at the end of their timetabled academic year – consequently, the time span between the interview timepoints averaged at around 6 months. Between the 2 timepoints, researcher-initiated, monthly emails were sent to

participants. Care was taken to address the individual students. These communications were implemented as a means to aid participant memory and enthusiasm to return to talk in the second interviews, especially given the varied impacts of the COVID-19 pandemic on individuals that were preventing any face-to-face research-relationship building/maintaining. There was no requirement for participants to reply to the emails, though some did, appreciating the 'check in' (Appendix 13). Sixteen students returned to participate in the exact same interview procedure they had completed for Timepoint 1; 5 students did not. Amongst those not returning, 2 did not due to placement pressures; 2 did not provide a reason, and 1 was experiencing difficulty after a family bereavement. In reference to the completed Timepoint 2 interviews, the only identifiable difference to the process came within the probe-question element of the interview, given these questions were dependent upon the stories chosen for telling by the participants.

3.4d. Data Recording

All interviews were audio-only recorded. Participants were assigned unique non-identifying codes at Timepoint 1 audio-recording stage. These included a letter denoting gender identification (M/F), a number indicating order in which they contacted the researcher (1-21) and a number indicating their year of study (1, 3 or 4). These codes were also applied to the typed transcripts. Students were invited to choose their own pseudonyms (ensuring they chose a name wholly unconnected to their lives) (Heaton, 2022: 124) for quotation usage in final written and spoken research dissemination items. Some opted to do this; others asked the researcher to choose for them. In regard to treatment of the generated data itself, secure storage of all supplied information was compliant with current GDPR regulations. All of the interview audio-recordings were transcribed verbatim (including non-lexical utterances, ellipses to indicate pauses and descriptions of laughter or crying). Transcription was conducted by the researcher as well as by employed external transcribers (the latter was employed due to time impacts connected to COVID-19 circumstances). All names and identifiable details were removed, and short descriptions inserted in their place (e.g., [course title], [friend name], [home city

name]). Where inaudible elements were present, these were recorded/noted in transcripts, to avoid any assumptions being made during data analysis.

3.5. Data Analysis

3.5a. Reflexive Thematic Analysis (RTA); Attention to Narrative Elements

The purpose of the analysis for this study was not to find a singular, 'truthful', explanation or understanding, but rather to explore a range of experiences and their meanings to individuals. Important also as an opening standpoint was researcher agreement and alignment with the argument that themes do not simply reside in data, waiting to be uncovered (Braun and Clarke, 2019; Braun and Clarke, 2021: 342-3; McAllum *et al.*, 2019). Thus, sought and subsequently developed for the data analysis approach was a means through which to mesh 'within' and 'across' case information and patterns (Ayres, Kavanaugh and Knafl, 2003), whilst also permitting researcher-lived experience interaction with the data, to overall allow reflexive and interpretative descriptions of the data (Byrne, 2022). As such, given that it offers an approach to data analysis which views "knowledge generation [a]s inherently subjective and situated" and "provides access to situated interpreted realities, not simple decontextualised truths" (Braun and Clarke, 2021: 8, 171), Reflexive Thematic Analysis (RTA) was adopted (Braun and Clarke, 2006; Braun and Clarke, 2021; Braun and Clarke, 2022).

RTA, despite repeated protestations and clarifications, most noticeably from its original authors (Braun and Clark, 2019, 2021, 2022; Byrne, 2022), remains frequently conceptualised as a singular approach (Braun and Clarke, 2021: 334). Furthermore, RTA remains persistently perceived as something to be implemented via adherence to the following stages as sequential rules (Braun and Clarke, 2022: 4; Braun and Clarke, 2021):

1. Familiarisation with the data.
2. Coding the data.
3. Generating initial themes.
4. Developing and reviewing themes.

5. Refining, defining and naming themes.
6. Writing up.

Whilst in written form these appear as activities to follow consecutively, what is necessary to note rather is an inherent messiness (McAllum *et al.*, 2019) and iterative nature to an RTA process. As Braun and Clarke explain, it is more appropriate to understand RTA,

“as a progressive but recursive process. You’re moving along a trajectory from dataset to developed analysis, but that *often [author emphasis]* involves going sideways, backwards and sometimes even in circles, as you move from start to the end of the process.” (2022: 36)

This project therefore employed the stage-labels cited as means to locate current activity focus, guidelines rather than ordered rules to follow. Moreover, recognising RTA as an approach to be considered as a flexible, rather than entirely prescriptive, set of tools (Braun and Clarke, 2019), encouraging of researcher reflexivity and choice-making specific to their data and research objectives, the decision was also taken for this project to retain attentiveness to narrative analysis elements (Carson *et al.*, 2017; Riessman, 2008). Such elements include, for example, language use and word play, underpinning meta-narratives, points of emphasis in stories, and value judgements implied in experience accounts (Feldman *et al.*, 2004; Carson *et al.*, 2017). Employing RTA whilst remaining sensitive to such narrative elements was determined as facilitative of an appropriately detailed analysis approach to develop interpretations and explain data patterns without becoming anecdotal.

3.5b. Conducting the Analysis

Developing familiarisation with the audio as well as the transcribed data was important. Actively reading-along transcripts with their accompanying audio was an important initial analysis activity. During this aspect, transcripts were smoothed (Emden, 1998), i.e., non-lexical utterances (‘um’, ‘ah’, et cetera) and unnecessary repetitions were cleared, though where these were clearly indicative of meaningful pauses they were retained. Impression notes were also taken during this stage, as well as highlights of points of interest marked manually on the transcripts. A research

journal was kept (Appendix 13), and memos relating to individual transcripts were also created (Appendix 12). These latter elements included self-reflections as well as descriptions of the data. Guided by Braun and Clarke (2022) and Towers (2020), memos involved recording brief content summaries, reflections on a range of elements (such as research design/methods, disciplinary aspects, and researcher emotional responses), as well as any initial analytic impressions. Srivastava and Hopwood's 'reflexive framework questions' (2009) also provided thought-aids in reference to noting 'what does the data tell me that it might not tell someone else?' alongside retaining focus on the project's research questions and objectives. These familiarisation and initial impression activities were conducted as transcripts became available, and as such were carried out as new interviews were being recorded. This permitted further deepening of familiarisation across cases as new data was collected and considered alongside.

Moving into the systematic coding of the transcripts (Braun and Clarke, 2022: 52-3) a blended inductive-deductive (Braun and Clark, 2022: 56-7) approach to analysis was undertaken. This builds knowledge via a combination of data-driven alongside researcher- and/or theory-sensitive engagement when coding the data collected. Though a primarily inductive orientation starting from the data itself was adopted, deductive readings drawing on researcher-knowledge and the project's conceptual lens elements was permitted, particularly in reference to implied or latent elements in the students' talk (Braun and Clarke, 2022: 57, 64). NVivo was used for the first stage of coding, to facilitate ease of organisation and mapping of a very large dataset. Initial coding concentrated on within-individual-case data descriptions – the 'what' and 'where' of SMHWB as the students described it in their individual stories. Close reading of the transcripts led to the identification of small text sections to which code labels were tagged. Gerunds were utilised as code labels (e.g., 'Feeling X', 'Learning about X', 'Managing X', et cetera), as were noun terms (e.g., 'Physical Activity'; 'Suicide'; 'Student Accommodation'). This reading and tagging process was repeated until all transcripts had been worked through and an extensive list of codes was produced. This opening list provided the means to access an impression of across-case core topic areas. These were:

- Doing vs Being a Student
- Geography and Nature
- Identifying and Knowing Self as a Student
- Loss
- Mental Health and Wellbeing Ideas and Literacy
- Physical Health and Activity
- Relationships
- Time

Subsequent to the identification of these topic summaries, further re-review of the data led to the development of the following two specific areas (Table 3.):

(Table 3. Initial Data Topic/Thematic Impressions).

Explicit/Manifest elements to SMHWB	Implied/Latent elements to SMHWB
<ul style="list-style-type: none"> • Time - perceptions (of connection between periods) and events/moments. • Place • Relationships • Losses • Existing/enduring university-related myths (being realised or not) • Language and Communication (including between university and student(s) on the subject of MHWB) 	<ul style="list-style-type: none"> A. Safety and Security B. Control and Choice (Empowerment?) C. Validation and Recognition

3.5c. Third ‘Resonance Interviews’ as Data Analysis Aid

The main data generation sessions for this research amounted to 37 interviews. Following the conclusion to the second timepoint interactions, and upon review and initial coding of the transcriptions for both timepoints 1 and 2, it was clear that rich and deep data had been generated. The detail in the transcriptions demonstrated that study aims could be achieved via the interviews already conducted – the purpose of any further interviews, it was determined, should be to build on the analysis of the existing data, rather than result in accumulation of similar data. Recalling that a purpose of this research was developing granular detail and not representation, the decision was taken not to recruit further participants. Rather it was decided that it would be more beneficial to the project to continue with a co-analysis element via the inclusion of third interviews with existing participants. These were employed as a

means to test or sense-check the resonance of the data analysis as it stood at that point. Whilst 'member checking' is often considered a useful means through which to establish data analysis credibility, validity and trustworthiness in qualitative research (Birt *et al.*, 2016; Erdmann and Potthoff, 2023), the purpose (indeed goal) of these interviews was not *confirmation* of results per se, but rather continued recognition and amplification of the students' voices in co-creating the final data interpretation. As such, the interactions themselves were conceived in alignment with the principles informing the technique of *Synthesised Member Checking* (Birt *et al.*, 2016), whereby participants are provided with "an opportunity to engage with, and add to, interview and interpreted data" (Birt *et al.*, 2016: 1802; see also Erdmann and Potthoff, 2023) after their original interviews. Moreover, alongside the (continuing) aim of prioritising the students' involvement in the ongoing analysis, these third interactions were also undertaken with a view to checking the *researcher-member*, i.e., as part of a process of monitoring any potential imposition of personal researcher beliefs or voice dominance in the ongoing analysis (Birt *et al.*, 2016; Erdmann and Potthoff, 2023: 2).

A revised sample drawn from within the existing sample, determined via the following details:

- *All existing participants were asked in their first and second interviews if they would like to remain informed about the project, including if any further opportunity to speak were to arise. Responses were noted.*
 - *Potential participants who remained students at the specified University were contacted only where they reported 'yes' to the above question.*
 - *Potential participants who responded 'yes' to the above question but who were no longer students at the specified university would only be contacted if they supplied a 'forwarding email' that they agreed to be used for further contact.*
 - *Any participant who was no longer a student at the specified university who expressed interest in remaining informed about the project and its opportunities but who did not supply a 'forwarding email' was not approached.*
- *Any existing participant who did not attend their second interview was not approached.*

In all, 7 of the original 21 participants were eligible to participate in the third interviews, details of the recruitment of which can be seen below (Table 4.):

(Table 4. Third 'Resonance' Interview Eligibility and Recruitment).

Pseudonym	Year at TP 1	'Resonance' Interview 3 – 'testing ideas'
Cherry	3	Not eligible – no forwarding email.
Amy	3	Not eligible – no forwarding email.
Lucy	3	Not eligible – did not complete two timepoint interviews.
Gemma	4	Not eligible – no forwarding email.
Andrew	3	Not eligible – no forwarding email.
Anna	1	Not eligible – did not complete two timepoint interviews.
Beryl	1	Invited but no response to request email.
Alex	3	Not eligible – no forwarding email.
Charlotte	4	Interview conducted 10/12/21
Nicola	3	Not eligible – no forwarding email.
Dolly	1 (Foundation Year)	Invited but no reply to email request
Pippa	3	Not eligible – no forwarding email.
Dave	3	Invited but no reply to email request
Lily	3	Not eligible – no forwarding email.
George	3	Not eligible – did not complete two timepoint interviews.
Isobel	3	Not eligible – did not complete two timepoint interviews.
Sara	3	Invited but no reply to email request
Mia	1	Invited and response received - wanted to participate but mental health difficulties prevented securing interview.
Jorja	3	Not eligible – did not complete two timepoint interviews.
Bobbie	1	Interview conducted 17/12/21
Maguire	3	Not eligible – no forwarding email.

(Table 4. Third 'Resonance' Interview Eligibility and Recruitment).

Eligible students were emailed an invitation to participate; students interested in speaking again were swift in their responses to the contact. Whilst COVID-19-related circumstances and mental-ill-health prevented some following through on their interest, there were 2 third interviews (of an average length of approximately 2 hours).

These were conducted in December 2021, audio-only recorded and transcribed verbatim by the researcher upon their conclusion.

Having reviewed the different ways in, and activities through, which ‘resonance checking’ in qualitative research can be conducted (Birt *et.al.*, 2016: 1803), and in responding to critiques of the conduct of *Synthesised Member Checking* (regarding specifically its revolving around the provision of *written* data interpretation to participants (Erdmann and Potthoff, 2023: 5)), developed for this research was a *spoken-interaction* resonance-exploring technique/format, in which participant *and* researcher storytelling and meaning-making were foreground⁸. An interview guide (Appendix 7) was prepared, (opening with the researcher’s spoken narrative of the data analysis to-date and concluding with questions to ascertain the resonance of this to the students’ experiences and perspectives), but the interactions remained fluid and conversational. It was important for these interactions to revolve around the to-date analysed and interpreted data from *all* participants, rather than around solely a revisitation of the returning students to their own stories (Birt *et.al.*, 2016: 1805). As Birt *et.al.* note,

“if studies are undertaken to understand experiences and behaviours...then surely participants should still be able to see their experiences within the final results.” (2016: 1805)

This was a guiding thought in the employment of the resonance interviews for this research.

Turning to the content of these third interviews, the students provided overall positive replies in response to the analysis-to-date story and preliminary-theme descriptions. They described the storied analysis as comprised of ‘resonant detail’ and as overall ‘a comprehensive list’ appropriate in exploring SMHWP. Considering Estroff’s (1995) work, at a surface level, this description may appear as potentially ‘privileging of the researcher’, a display of simple acceptance of the analysis on the part of the students – however, highlighted within the conversations were certain elements, particularly involving language references, requiring of deeper discussion/navigation. The areas

⁸ Alternative to the customary process of *Synthesised Member Checking* (Birt *et.al.*, 2016), the students were *not* provided with or asked to comment on ‘synthesized data’ with alongside ‘illustrative quotes’ that would then be returned to the researcher.

highlighted by the students cannot be described fully as ‘disconfirming voices’ (Birt et.al., 2016) – the students did not *disagree* with the original described analysis elements⁹ but rather felt that detail was insufficiently conveyed, and they wished to provide more nuanced description to clarify the resonance with their experiences. What resulted, therefore, was not student rejection of (and/or researcher change-in-response to) any of the initial analysis; rather, additional *incorporation* of elements to the original dataset and spotlighting of avenues requiring researcher-return to the transcripts (Birt et.al., 2016: 1808) for review and refinement at a more nuanced level were facilitated.

Both students were asked in their third interviews to order the themes in the narrated analysis-interpretation according to their personal resonance, and in reply both were careful to acknowledge that they “[*couldn’t*] *generalise for all students because my circumstances are my own*” [Charlotte]¹⁰. However, common to both these conversations was the importance of delving deeper into language and communicative elements linked to SMHWB, (which ultimately aided the ensuing finalisation of the data analysis). For example, explored here by the students were granular level definitional details and possible meanings pertaining to across-all-transcripts already identified language references, such as ‘the little things’. Charlotte, for example, provided concrete examples of important ‘little things’ in her experience, which encouraged researcher-return to the other transcripts to see if similar existed in other students’ stories:

“A lecturer asking how you are can make or break it, knowing that someone cares.” [Charlotte]

Similarly, in exploring the at-the-time interpreted theme labelled ‘Safety and Security’, Charlotte described a separation of ‘*obvious* safety and security’ and ‘*mental* safety and security’ in her SMHWB experiences – the properties of each of these¹¹ encouraged researcher-return to the transcripts to explore the applicability of this

⁹ Important to note is that the students were informed at the outset of their third conversations that they were not engaging with the *final* analysis, and they did have permission to disagree (Birt et.al., 2016:1808), (and that was welcome if it was a feature for them).

¹⁰ Each of the two students identified, or found more resonant to their own experiences, different themes from the interpretation offered/described - Bobbi emphasised ‘Time’ and Charlotte, ‘Relationships’.

¹¹ For example, physical and campus safety and security in reference to the former, and relationship-related and perceptions of the future in terms of the latter.

separateness in reference to other students' accounts. Crucially, both the participants identified 'Mental Health' and 'Wellbeing' as terms used interchangeably by both students and their university institution – this acted as a revisitation signpost for re-reading in other transcripts:

“The university can kind of put them together a lot, mental health and wellbeing, wellbeing and mental health.” [Bobbi]

Researcher: *“If you’re talking to students about mental health and wellbeing, do you think they understand those two things as different?”*

Charlotte: *[shouts immediately] “No!” [laughs]*

Importantly, the resonance of the word 'Empowerment' to SMHWB as a topic provoked deeper discussion in both third interviews. Within the to-date analysis, 'Empowerment' had presented as a possible but questionable theme (see Table 3. p.105). As the researcher, I had identified this term as potentially appropriate but personally retained a degree of uncertainty about it as a 'final stage analysis theme-label'. This uncertainty was not relayed within the resonance interviews, yet both participants *also* displayed and described discomfort/unsureness regarding 'Empowerment' as an appropriate overarching descriptor, emphasising instead feeling senses of choice and control as vital *precursors* to feeling empowered:

“what helps is being able to have the choice to go and do something because then [you] feel better because you’ve done it, which empowers you more ... if you’re told to do something, where’s the empowerment?” [Bobbi]

*“I think empowerment is separate, if I’m honest. You are empowered **by** [participant emphasis] being in a situation where you have free choice, so then that comes back to the choice and control ... at Uni you think you have a lot of control, but you don’t ... it’s a very controlling environment.” [Charlotte]*

In essence, such responses confirmed not the data's 'truth' or these students as 'correct' (Erdmann and Potthoff, 2023: 8)¹², but that as the researcher I may have been right to sense uncertainty regarding the allocation of this term as an overall theme descriptor. Understanding this as the perspectives of these particular participants *alongside* my own as the researcher/interpreter provided confirmation of

¹² This would also be inappropriate given the epistemological stance taken for this research – see Ch3, p.83.

a need, and a signpost, to re-engage with this area of the analysis specifically. Facilitated through the resonance discussions, therefore, was a return to the data analysed within this initial theme to conduct deeper readings, to ascertain the applicability of this *uncertain* regard of 'Empowerment' to other students' stories and descriptions. Upon review of the data coded to this specific aspect, determined was that 'feeling in control' was indeed and importantly the grounding *beneath* and *before* 'Empowerment' in these participants SMHWB experiences overall.

Overall, the third interactions with participants were productive and positive in terms of the students' engagement and comments regarding the resonating nature of the ongoing analysis to their own experiences, and the signposting they provided to deepen further the ongoing analysis. The ability to explore the interpretations of the existing data whilst simultaneously permitting further storytelling resulted in,

"each type of data ... enhance[ing] our understanding of the other ... prompt[ing] further iterative analysis to deepen understanding of the phenomenon (Hesse-Biber, 2010)." (Birt et.al., 2016: 1809)

Ultimately, the resonance interviews were not considered simply as a "technical step" (Erdmann and Potthoff, 2023: 10) for a qualitative research project, but rather part of an "intellectual process" (Birt et.al., 2016: 1810), acting as useful and meaningful aids in further theme refinement as the overall data analysis was completed.

3.5d. Finalising the Analysis

Through the initial stages of the RTA of this project's data, and via the third interview interactions, the complex entanglement of 'person' and 'student' experiences in reference to (S)MHWB became apparent. Subsequent revisiting, re-reading, coding and initial-theme evolution was conducted, now with specific attention to direct references to university and those falling outside of academic settings as distinct topic areas – these were simultaneously significant but were organised apart, i.e., codes were clustered (Braun and Clarke, 2020) into 'university-specific' and 'life-world general' categories. Within these further coding was conducted, leading to an identification of the 'patterns of meaning' (Braun and Clarke, 2020) comprising them. Furthermore, through organising these two specific clusters, a third underlying, more

latent/non-visible element could be determined. What was ultimately developed through this iterative process of coding, clustering and thematic refinement was an overall explanation of the core multiple patterns and intersecting layers to SMHWB as storied by the participants.

3.6. Discussion of Methodological Findings

Given that an important element of this project was the specificity of its methods, it is important at this point to reflect upon the methodological findings that presented as a consequence. How this study was conducted was in itself meaningful, for both the data generated and in reference to future SMHWB research methodological options and directions (See Ch7: p.270, 290). The subsequent sections here reflect on the participants involved and their recruitment; the value of social media elicitation in the project; contributions stemming from having to conduct qualitative research at distance during the COVID-19 pandemic and impacts of research positionality.

3.6a. Reflecting on the Participants

Overall, a varied sample was recruited. Participants were 21 students from across all the university's faculties, studying in either their first or final years at the university (see (Table 2.) and (Table 5.)).

(Table 5. Participant Further Demographic Details).

Participant Information	Number of Participants
In First Year of Study (inc. foundation year).	5
In Final Year of Study.	16
Identifying as Female.	17
Identifying as Male.	4
Status as 'First Generation' Student.	4
Status as 'Mature' Student.	6
Status as 'International' Student.	1
Status as belonging to LGBTQ* Community.	1
On a degree program including formal placements.	6
Completion of a Foundation Degree.	3
Experience of UK Privately-funded Secondary Education.	2

Current Mental Health Diagnosis/Awaiting Diagnosis/In receipt of NHS and/or University Mental Health Services/Using Medication.	3
Declaration of suicide attempt/suicidal ideation <i>without</i> contact with mental health services (NHS or University).	2
Caring responsibilities relating to family members or as a parent.	5
Single Parent Family/Divorced Parents/Estrangement from parental figure.	5
Previously 'dropped out' of an undergraduate program of study.	2
Average Age of Participants (At 1st Timepoint Interview) = 24 years (<i>Oldest – 49 years; Youngest – 19 years</i>)	

(Table 5. Participant Further Demographic Details).

A total of 33 students responded to the advertisement inviting participants for this research. Five students were excluded as they did not meet eligibility criteria (for instance, they were not students at the specified university, or were in their second year of study), and 5 students did not respond to follow up of their 'Expression of Interest' form to arrange a screening call. Two students participated in a screening call but subsequently did not proceed to participate in the interviews due to personal reasons, about which they emailed the researcher to explain.

There are several elements about the participant sample to reflect upon. Firstly, first year students proved difficult to recruit. Secondly, those identifying as female came forward in larger numbers than those identifying as male. Thirdly, UK 'home' students dominated over those with international status. Fourthly, limited engagement was achieved in reference to students of specific 'populations of concern', such as those belonging to the LGBTQ* community and those of black and minority ethnic origin. Whilst the COVID-19 pressured circumstances may have impacted all students' personal capacities to participate in this research, recruitment in these 4 particular areas was expected to take the form it did. These problematic recruitment patterns have long-time been experienced in relation to mental health research generally. Limited detailed understanding on students' culturally-located attitudes and perceptions toward mental health remains a continuing concern (Tang *et al.*, 2012), as does mental health (self-)stigma in relation to 'masculinity' more broadly (Sagar-Ouriaghli *et al.*, 2020). Similarly, levels of student mental health literacy as related to

gender and year of study (Miles *et al.*, 2020) may all have impacted on the willingness of students to join the project. In relation to the latter in particular, it has been mapped that mental health literacy levels do become more developed with progression through each year of study (Gorczyński *et al.*, 2017). Though identifiable as potential limitations in reference to the sample for this study, these elements nonetheless remain findings in themselves, providing avenues for more focused research stemming outward from this project. For instance, the fact that LGBTQ*, Islamic, Indian and African-Caribbean student-led societies were directly contacted without receipt of reply (Appendix 13) would suggest concerted research is needed to deepen understanding regarding perceptions of mental health within these student communities specifically. For example, building on the work of Stoll *et al.* (2022) and Minutillo *et al.* (2020), in order to facilitate improved engagement with research. In reference to all the harder-to-reach-and-engage student-demographic areas, this project's sample reasserts the need for work on aspects such as specific attentiveness to language and content used to encourage participation in SMHWB research (Choi *et al.*, 2017).

Overall consulted for this project, however, was a strong, varied mix of students. The interest in this project from those students with placement requirements within their programs of study was important, aligning with UUK's recent identification of such students' specific support needs (UUK, 2022b). Similarly, mature student interest in the project was noticeable – these students, too, are frequently under-represented in research about SMHWB, despite record levels of mature entrants to full-time undergraduate courses being recorded consecutively in 2018, 2019 and 2020: in academic year 2019/20, 37% of all undergraduate entrants were classed as 'mature' (Hubble and Bolton, 2021). Interestingly, greater engagement from those in their final year of undergraduate study was clear. This could have resulted from the already mentioned deeper mental health literacy developed as university years build upon each other (Gorczyński *et al.*, 2017), but also evident as interviews progressed was a participant perception that SMHWB as a research topic tends to overlook the later undergraduate years; concern identifiably falls on the transition into university and the first-year undergraduate. In overlooking those in their second undergraduate year and beyond, different SMHWB experiences and thus priorities can be missed,

misunderstood (Macaskill, 2018) and importantly incorrectly acted upon. This project provided a space for final year students to illuminate such elements from their experiences.

Amongst participants there were those with a current mental ill health diagnosis (or awaiting diagnosis), alongside those with past experience of mental distress (diagnosed) and no experience of a diagnosed mental illness, altogether allowing a shift away from concentration on mental distress alone in the data gathered. Similarly, there was a pleasing variety of subjects of study (with subjects of study falling in half of the specified university's academic departments), which permitted examination of elements such as potential intersections between department/discipline of study and SMHWP experiences. In sum, the participants reached and sample achieved provided a wide range of experiences and perspectives, allowing in turn access to a high degree of granularity regarding the phenomenon of interest.

3.6b. Reflecting on Recruitment Challenges

Central in the recruitment decision-making process was ensuring steps were taken to prioritise student 'ground-level' voices (Koshin *et al.*, 2017: 2501). By reaching out purposefully to student-led activity areas, the research sought to gain a varied sample of participants whilst simultaneously gaining insight into student everyday connections/networks in reference to the themes of wellbeing and mental health. Consequently, as already described, specific sectors or sites at student ground-level were directly contacted to open awareness of the opportunity to participate in this project (Appendices 2 and 9). Included in the targeted sites were, for example, societies with members of subset populations already deemed important in reference to SMHWP, (such as the LGBTQ* Society, the African-Caribbean Society and societies containing high levels of male participation). Adhered to also were the principles of 'researcher instinct' (as permitted in phenomenologically informed work (Neubauer, Witkop and Varpio, 2019)) in the directing of initial contact/invites to societies including, for example, the Self Care and Yoga societies. Whilst certain of these contacted societies were unresponsive, others were highly engaged (Appendices 9 and 13).

However, despite the intention to bypass university staff as gatekeepers, targeting student-led university spaces in order to directly access student voices, it became apparent in the initial recruitment waves that this did not function as well as hoped. This could have been in part due to the impact of increased distancing measures and reliance on virtual communication forming the specific (pandemic) context of the project. However, there were elements of activity that pointed to deeper reasons. For instance, contacted student leaders, such as departmental/course student representatives or Student Union leaders, were identified as often including in any reply that they would forward the project information and advertisement to their module leaders/other (teaching) staff, for them to circulate on their behalf (Appendix 13). There was an identifiable reliance on referring to staff almost in the tone of their being 'adults' to their 'child', and a view of them as those with greater facilitative power(s).

As anticipated strength of targeted-student contacts and assistance did not fully materialise into increased participant engagement, the decision was made to augment the existing approach to students via alternative means. For instance, subsequent to noticing low recruitment in the initial stages, incorporated into the screening calls with those who did express interest was a direct question asking if personal aid to recruit another student was possible, or if they knew of anyone who might also be interested to whom they could speak. In response, two facets were identified. Firstly, participants frequently offered the use of course 'group chats' for circulating information about this project. Students agreed to mention the project in these informal information spaces, and this did lead to recruitments. However, secondly, there did appear to be a shying away from directly talking to individual others. Participants frequently presented as reluctant, and it was apparent that participation was viewed as an individual affair, something for themselves only. Such facets could in themselves lead to speculation regarding two elements. Firstly, it appeared that 'course-peer-group' as opposed to 'friend-peer-group' snowballing should be distinguished in reference to conversations regarding SMHWB. Secondly, the visible reluctance may indicate something about the depth of conversations regarding mental health and/or wellbeing specifically amongst students at individual level as potentially limited, even minimal. At the time of talking to these students,

while stigma about declaring mental health issues to the university is presented as possibly no longer the primary obstacle to any help seeking (Brown, 2018), the responses to the snowball-recruitment requests for this research did prompt consideration as to whether negative stigma within certain areas of ‘the student body’ might still persist.

Working through the period of low potential-participant engagement a direct approach to staff within the university’s sports centre was subsequently made. This was a consequence of researcher judgement of physical health as deeply entwined with mental health. Considered was that sport, as a specific area of the university’s overall community and activity, could provide a source within which reflective students may be interested in the project. The staff within the sport services were also engaged (as a result of a current ‘strategic goal’ within the department to develop a focus on SMHWB) and placed an advertisement for the research, to tie in with ‘International Men’s Day’, on their Instagram channel. This did lead to a participant joining the research, though interesting was that the post led to the recruitment of a female participant and no males.

Lastly, important to note in this reflection is the varying success (in terms of leading to direct recruitment) of the social media spreading of the information about this project. Given the larger, restricting context of the COVID-19 pandemic, as well as a university-wide experience of a cyber-attack at the time of initial recruitment, utilising social media advertising certainly facilitated onward movement within the recruitment process. However, nuances of note include that the numbers of ‘likes’ and shares of the advertisement posts did not always translate into formal ‘expressions of interest’. It became clear that more students engaged with the *idea* of the project than action to actually participate in it, which may in itself have implications for how student willingness to engage in conversations about SMHWB can be interpreted. Whilst retaining the original intention to engage in waves of advertising, the character of these waves altered. Online postings became more frequent (weekly) due to lack of initial response – every *second* post resulted in the recruitment of at least one participant. Noted also were the timings of when the posts received more ‘likes’, in order to continue advertisement-postings accordingly – weekday mornings were less

effective (in terms of numbers of advertisement views) than weekends, and weekday posts were less acted upon/responded to than those placed on Sundays. Ultimately, the initial response level to the social media participation invitation waves became such that this research came to rely on self-selecting participants, though these still derived from targeted (purposefully determined) advertisement placements.

3.6c. Reflecting on the Value of Social Media Elicitation

The social media elicitation task was employed in acknowledgment of how social media is now a 'naturally occurring' setting for many students' comments on their everyday lives (Marshall and Rossman, 2011: 25). In reference to younger people generally, 'digital natives' (Koshkin *et al.*, 2017) is now a firmly ascribed description, whilst research also shows increasing utilisation of social media in identity work (Thomas *et al.*, 2017: 542), notably in relation to wellbeing (Settanni and Marengo, 2015). Social media's role in the shaping of 'digital personhoods' (Kerrigan and Hart, 2016), self-presentation and 'impression management' (Thomas *et al.*, 2017) has been suggested as significant in terms of how it can be used to contribute to a person's lived experience story. In specific reference to previous work considering students' use of social media, it has been supposed that online posts and presentations are actual-reality representations – individuals' stories/narratives have been assumed through what they have made visible to their networks (Kerrigan and Hart, 2016: 1704). However, social media use is increasingly being shown to be a more complex activity. Zhao, Grasmuck and Martin (2008: 1826), for instance, have pointed to the distinction users themselves make between 'showing' and 'telling or displaying themselves' online. Kerrigan and Hart (2016: 1706-7) have drawn attention to the temporal issues at play, whereby online activity considered and examined in 'over time' terms can result in more nuanced statements regarding the meaning of online material an individual chooses to post. Overall, as Hongladarom has emphasized, what must be remembered is that:

“the online self is...made up of physical and mental episodes...There must be something functioning as the 'I think' that binds up all of the various texts and images posted online...This binding...does not have much to do at all with the content of what is posted.” (2011: 545-7)

Such research mappings provided the grounding to the decision to employ social media as a novel means through which to encourage reflection and open conversations on students' own perspectives on their (S)MHWB. Such digital artefacts as social networking site posts were considered useful as means of elicitation of a more in-depth exploration of the issue, as well as how it connects to or is impacted upon by the broader story-context of their lives (Veletsianos, Johnson and Belikov, 2019: 1715). The use of social media in this way was significant in that it is already acknowledged that "when conducted alongside other data (e.g., interviews), the sites can provide unique in-depth autobiographical accounts of scenes and respondents" (Murthy (2008) in Skågeby, 2011: 414-5).

Given the revised use of social media as a means through which to encourage participants' SMHWB reflections and storytelling in this project, the opportunity was taken at the end of the interviews to specifically ask participants how they felt and experienced the elicitation task. Their accounts and reactions were plentiful and overall positive. A discussion of their responses was presented at the annual Media, Communication and Cultural Studies Association conference 2022, the following image providing the sum up (including participant quotations) presented:

(Fig. 1. Participants' Thoughts on Social Media Elicitation for SMHWB Stories).



Essentially, the social media elicitation task was approved by the participants as an appropriate means to encourage across-time and deeper reflection on their SMHWB. It also facilitated for them a sense of individual agency in relation to both the topic at hand and the research process, contributing to authentic voice generating for this research. Overall, in reflecting on the social media elicitation task and its anticipated role and purpose, its implementation was both evidenced as successful and valuable, in reference to both this particular research and indeed SMHWB research going forward.

3.6d. Reflecting on Qualitative Fieldwork Conducted at Distance

The COVID-19 pandemic context did not appear detrimental to participant retention, or the data collected for this project. Where participants did not return to their 2nd timepoint interviews, the reasons were in the majority not directly connected to pandemic impacts. Similarly, in relation to the data generated, a weaving together of pre- and during- COVID-19 circumstances was facilitated and seen – students did not present as solely concerned with COVID-19 impacts on their SMHWB. However, there are certain methodological impacts of the COVID-19 pandemic context that require acknowledgement in relation to this project. As with the social media elicitation task, and recognising the uniqueness of the particular historical moment, the opportunity was taken to specifically talk with the participants about their at-distance/online research experience in this project.

Whilst social science research being conducted online is not new, the circumstances of the pandemic meant that research choices were removed (Howlett, 2022; Moran and Caetano, 2022) – i.e., research was *forced* into being conducted at distance, online (Howlett, 2022: 2). First, this produced anxiety in reference to the building and maintaining of research relationships with participants. As such adaptations *had* to be made. In reference to this project, this related most significantly to communication practises – what was required, to cite Santana *et al.* (2021: 1064), was “more lengthy, frequent communication”. The implementation of the opening screening call and the between-timepoints emailed-communication were part of this. Participants’

comments on these elements revealed that the nature of the communication was important for a number of relationship aspects, as illustrated below:

(Table 6. Participants' Comments on Research-Related Communication).

<p>Reminder for Participation</p>	<p><i>"I liked that you were still checking in ... it makes you remember that it's an ongoing process."</i> [Mia, first year]</p> <p><i>"If I ain't not heard from you I'd have probably forgot."</i> [Dolly, first year]</p>
<p>Rapport</p>	<p><i>"It was nice. It felt like you remembered that I existed."</i> [Gemma, final year]</p> <p><i>"I didn't feel pressured [into replying] which was really nice."</i> [Nicola, final year]</p>
<p>Re-confirming individual participant importance to the research</p>	<p><i>"It was just nice to have someone asking if you're ok, really, other than university, who send a big email out to everyone. It felt like more personal to me."</i> [Amy, final year]</p>

Ultimately, as Gemma's comment below illustrates, indicated was that the communication practises implemented as a direct result of the pandemic-dictated circumstances had been successfully navigated to ensure continued engagement in the project:

"It was also nice that they [emails] weren't like ping, ping, ping, ping, ping, [shouts] 'Tell me about your mental health!' Arrrrggghh! It was like Goldilocks, just the right amount." [Gemma, final year]

A second project concern induced by the pandemic context related to conducting interviews online without detriment to the data generated. Retained here was a focus on the idea that *physical* distancing is not the same as *social* distancing (Tremblay, 2021), and as such it is not about the technology in isolation but rather about how individuals engage with and employ the devices. In this respect, the 'performance' of the researcher role, (i.e., the conveying of *researcher* engagement, as a central, co-creative element of narrative interviewing interactions), through a screen was an important consideration. Here not only was researcher modelling in reference to keeping the camera on important, but also conveying heightened visible conversational cues was a significant detail to encourage participant talk to continue.

This was acknowledged by both Mia and Gemma who stated the following after their experience of the interviews:

“It’s those cues, smiling or nodding ... encouraging you, it makes you happy to continue ... it would be very easy to just trail off mid-sentence if you didn’t have someone’s facial expressions reassuring you.” [Mia, first year]

*“You’re quite communicative, and because you’re so engaged it feels like you’re in the room with me. If you were a black screen then it would probably have been really s***, but you’re not.”* [Gemma, final year]

A third worry connected to COVID-19 was that it would negatively impact the data generated. However, what became apparent is that the pandemic context rather contributed to an augmenting of the data types that could be accessed, precisely because of the at-distance conduct. Students described how being able to participate online permitted them a greater sense of freedom to express, often due to increased confidence resulting from being able to speak from their own spaces. For example, interviewing at distance for these participants proved:

(Table 7. Participants’ Comments on Experience of Virtual Interviews).

Less intimidating	<i>“for a topic so sensitive, I’d say it could be easier ... if you’re in the comfort of your own home ... I feel like it could be more intimidating going somewhere, maybe [I’d] not want to do it as much”</i> [George, final year]
Conducting of feelings of it being ‘safe and comfortable’ to talk	<i>“it’s a good way to do it because you’ve got a bit of a barrier, so you can probably open up more ... this is a good way to [do it]”</i> [Isobel, final year] <i>“I’m at home, in my pyjamas. I’ve had a hot chocolate, I’m very comfortable. I feel OK talking at whatever volume about these personal things because I’m at home, whereas if we’d been in an office, I’d have been in a nice outfit and a bit uncomfortable, sat on a sweaty chair, unable to be as expressive because I’m worried that someone might hear me talk. I feel more comfortable in this situation because I’m in my own space. And because it’s at a distance, I feel more at liberty to share because you’re in a little box, you’re not real [laughs]. It’s less overwhelming to talk about this stuff and I feel much more confident because I’m in a safe environment. I prefer it.”</i> [Gemma, final year].
Encouraging of feelings of personal	<i>“I think I’ve done a lot better doing it this way as opposed to doing it face to face because I don’t have to say anything to you. We can say</i>

power in the interactions	<i>goodbye and hang up and I've not got to leave the room</i> " [Bobbi, first year].
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(Table 7. Participants' Comments on Experience of Virtual Interviews).

Alongside enhancement of students' internal senses of comfort, safety and freedom to talk more openly on SMHWB as a consequence of COVID-19 restrictions, enabled also were supplements to the types of data available and noted. In essence, the interviews for this research aligned with Howlett's (2022) and Rahman *et al.*'s (2021: 7) identification of virtual interviewing as able to bring to the fore overlooked facets and "unique particularities" of a research topic. Thus, provided were insights into "domestic triggers" (Moran and Caetano, 2022), such as audible impacts, the effects of shared-living interactions, and relationships with pets, for example (Appendix 13). Also possible was participant instant retrieval and demonstration on screen of physical props connected to their stories; visible exhibition of movement changes between spaces explained as part of narratives (e.g., separating sections of single rooms for different SMWB reasons; demonstrating kitchen use in reference to eating difficulties) (Appendix 13), and a witnessing of individuals' multiple living circumstances (home *and* student accommodation) in different interviews. Overall, enforced at-distance online interviewing actually enabled gathering of greater and significant context details relating to the realities of student living, elements that potentially could not have been learned in as much detail in alternative, face-to-face interview settings – these interviews permitted a taking of SMHWB conversations out of university spaces into places where students' wider lives and roles exist, increasing the visibility of these aspects and consequently generating important insights.

To sum, the pandemic context surrounding this research provided opportunity for re-evaluations regarding the how and where, alongside the what, of SMHWB research (Howlett, 2022). The COVID-19 backdrop to the research, despite expectations of negative impact, was successfully navigated, facilitative of unexpected elements of an augmenting nature for the specific topic to come to the fore.

3.6e. Reflecting on Ethical Dimensions of the Research Process

This project met all formal requirements for ethical clearance as determined by the Research Ethics Committee in the institution within which the research was conducted (Appendix 1). Where adjustments to procedures were required during research process – such as the development of the third ‘resonance’ interviews considering the continuing analysis and the want to revisit this with existing participants (See Ch3, p.105) – renewed formal ethical clearance for the changes was applied for and granted (Appendix 1, p.297). Alongside these steps, it is also appropriate to reflect upon participant and researcher-concerned ethical issues and decision-making during the research process itself. It is entirely possible for situations to arise within qualitative research that are somewhat anticipated yet still present unexpectedly (Taquette and Borges da Matta Souza, 2022), thereby necessitating engagement in *immediate* ethical choices and “situational solutions” (Taquette and Borges da Matta Souza 2022: 2).

In this research, given the topic under review, particular consideration was afforded from the outset of the research design to the possibility of participant distress being prompted (Van Manen, 1990), particularly during their interview experiences. Whilst all participants were provided with an interview ‘Debrief Information Sheet’ (Appendix 8), including institutional as well as local/national charitable organisation contact details, also important were in-the-moment responses and actions on the part of the researcher where/when distress presented. Several participants did become upset and cried during their interviews. Given the online nature of these interviews, noticing the start of any upset required close attentiveness to visual cues¹³ on the streaming video and/or any audio changes¹⁴; required in response was researcher compassion and quiet¹⁵. Offered was participant choice as to what they would like to do – continue or stop the interview. Reassurance was also conveyed, including via statements such as ‘there’s no rush; take your time; it’s ok; there’s no need to worry; please do as you need to for yourself right now.’ One interview recording was paused before being re-started at the request of the participant, and no interview across the project was

¹³ Such as participants moving backward away from their computer, hiding their face, switching off their camera or changes amounting to increased avoidance of looking directly into their camera.

¹⁴ Such as shaking voices or more frequent pauses/silences/non-lexical utterances.

¹⁵ After acknowledging that upset was being experienced, and having relayed the choices available with regard to continuing or stopping the interview, the researcher did not speak or pressure for participant response, rather offering time for the participant to calm and make their own considered decision.

terminated after participants had experienced distress. All those who experienced upset verbally expressed their want to continue, did not experience distress/crying again in the same session, and at the close of their interviews stated they had found carrying on beneficial. Given they had experienced upset, the researcher re-advised them of the already supplied support-source contact details sheet, should they experience a want for continued support. This was deemed sufficient as 'researcher care' for these students.

Two students in the sample, however, revealed in their first interviews experiences that were of particular concern to the researcher. Indicated from one was a worsening mental state and from the other the potential for self-harm as part of ongoing struggles (within which described repeated suicide attempts were a feature). For both these students, the level of researcher concern was such as to raise questions regarding whether participant confidentiality should be breached to ensure both participant and researcher (emotional) safety (Taquette and Borges da Matta Souza, 2022). It was thus important to move beyond simply providing a list of support contacts to ensure full care of the participants. In these instances, therefore, the researcher took in-interview spoken steps to reiterate their position as 'researcher' and their corresponding role in ensuring participant safety, and to ascertain the current situation and support networks of the individuals concerned. Through these conversation elements, it was learned and recorded that both the participants already had in place specified formal support from their university and external organisations – the student who mentioned self-harm and suicide in particular had frequent, regular access to two other mental health practitioners for support and consultation. Consequently, the researcher was not required to break participant confidentiality and was reassured that the participants had direct and secure access to appropriate support. Both participants were asked if there was any other support or signposting they thought the researcher might be able assist with, but both regarded and declared themselves as having access to what they needed. For the student experiencing deterioration in their mental health, the interview in itself (and the emotional response they experienced during it) provided them with the impetus to return to their existing support providers and General Practitioner – they received further support as a consequence of this post-interview action. Both students returned to complete their

second timepoint interviews; both described within these how they had sought further support following the participant-researcher conversation detours specifically addressing their support needs/options during their first interviews.

It is also important to acknowledge the researcher response in these encounters – there were further ethical dilemmas for the researcher arising from these student cases. The concerns centred here around the navigation of boundaries and roles. The intensity of the emotion and depth of the stories from these two particular students was impactful upon the researcher and required the seeking of external advice to facilitate researcher debriefing (See Ch3, p.129). This was necessary to avoid researcher-absorption (carrying) of the stories long-term, and indeed immense worry about the consequences that *may* result outside of the interview/research context(s). Essentially, tackling a conflation of caring duties as ‘interviewer/researcher’ with those of ‘counsellor’ was required. Aware that boundaries were threatened, the researcher sought specific conversations with a university-employed mental health practitioner, recognising that these ethical tensions needed to be navigated not alone but in tandem with others with specific and extensive experience in listening to and dealing with student mental distress. Sought principally was assistance not for researcher mental/emotional distress derived from the interactions with the participants, but rather navigation of insecurities in and ideas regarding caring *professionally* (whilst researching). The aim was not to *eliminate* researcher emotional responses/reaction but rather facilitate the “certain level of emotional involvement” (Dickson-Swift *et.al.*, 2006) appropriate, productive and important for the aims and objectives of this qualitative research. Discussed in 2 meetings, therefore, was how to identify and manage the specific components and boundaries of the *role* that is ‘researcher’ in emotionally charged scenarios (Taquette and Borges da Matta Souza, 2022; Dickson-Swift *et.al.*, 2006). Also provided by the consultations with the practitioner was aid in reviewing and reflecting upon the ‘methodological practises’ (Taquette and Borges da Matta Souza, 2022) being implemented in the research, not so they would be entirely changed but rather made temporally or verbally flexible to accommodate emotionally experienced impacts should they occur. Thus, overall, ethically important for the researcher was to learn skills, language and in-the-moment decision-making pointers from a person who was

practiced in and worked daily with human distress, particularly learning from them how to remain sensitive to others but not become overtaken by others' (often difficult) stories. Subsequent to these consultation appointments, strategies such as increased time spacing between interviews, an in-interview declaration that *both/either* participant and/or researcher could voice a need for a break in the conversation, and immediate post-interview walking then personal journaling were implemented, (to ease any possible pressure impactful upon the researcher, as well as continue dutiful and responsible care for the participants).

3.6f. Reflecting on Researcher Positionality and Experience

Connected to the preceding described ethical elements, it also necessary to reflect further upon the as acknowledged (See Ch1: p.26) explicit researcher lived experience element brought to this project. Important then is reflection on the researcher's positionality in specific reference to the various components of the research process, to acknowledge where influences may have presented/been identified and how these were responded to/managed. From the outset of the research, unavoidable interaction between researcher-responses and research process as potentially influential to project outcomes (Kumar and Cavallaro, 2018: 655) was appreciated. It was, for example, anticipated that there would be times of negative emotional connection and reaction to both the participants and the data collected, given both the overall 'sensitive topic' nature of the research and the researcher's direct experiences of mental distress and suicide loss (Mallon and Elliott, 2019). Stemming from this acknowledgment, understood was the necessity to engage in watchful and active, honest and self-critical accounting in relation to the research subject matter as it was developing (Nowell *et al.*, 2017). The label of 'vulnerable researcher' was rejected (Sherry, 2013; Borgstrom and Ellis, 2021), in favour of concentration on researcher emotions as valuable (Knight and Zempi, 2020) and researcher reflexivity as important in increasing the credibility of work (Dodgson, 2019; Kumar and Cavallaro, 2018: 655).

Whilst the importance of *being* reflexive was embedded from the outset of the project, the *doing* of reflexivity (Mauthner and Doucet, 2003) throughout it evolved (Folkes,

2022) as the process flowed. Reflexivity was actively incorporated across different stages of the research process in several ways, depending on the triggers and circumstances. Key strategies were research journaling (Nowell *et al.*, 2017) and actively seeking-out and engaging in debriefing conversations. Attached to these was also careful and continuing referral back to research aims and objectives, to retain focus through experiences of lived experience connection – the aim was not detachment from but productive incorporation of lived experience in relation to the specific purposes of the research. Alternative ‘self-care’ strategies, such as walking and exercise were also employed (Kumar and Cavallaro, 2018: 651). The implementation of varied management strategies contributed to the avoidance of detrimental effects to both the researcher and the research.

To provide a little more example specificity in reference to researcher triggers and management responses in this research project, the following are relevant. In reference to research relationships, thoughtful decision-making regarding researcher self-disclosure was conducted. Sharing of experience was only offered where identified as facilitative of conversation – for example, for one participant, the researcher’s experience of suicide loss was revealed only after a participant described their own experience of the same as both difficult to talk about and a primary reason for their overall engagement in the project. In interview scenarios, involved was conscious *non*-insertion of researcher views or judgements regarding the specified university (in which both researcher and participant were enrolled), or in relation to attitudes regarding COVID-19 restrictions.

Three particular research stages requiring reflexive comment are those of the literature review, the interviews and the data analysis. First, engagement with already published literature is not frequently identified as a stage prompting of researcher (difficult) reaction. However, researcher awareness of emotional state in learning from and critiquing literature was important in this research, given pre-existing perspectives. Similarly, it was important to consciously detach somewhat from the visceral nature of social media academic discipline-related conversations (about the PTMF specifically), to be able to form a more tempered, nuanced and appropriate discussion of all relevant ideas/information for the purposes of this research.

Consequently, journaling about reading included personal reflections, to ensure engagements with texts where not influenced, for example, by anger or personal agendas (Mauthner and Doucet, 2003: 421).

Second, it was during some of the interviews that heightened negative-emotion responses were experienced, requiring specific mitigating strategies to avoid adverse impacts on the developing project. Where participants recounted attempted-suicide stories or suicidal ideations or made visible references to suicide (Appendix 13) proved problematic. Moreover, through accumulating across interviews information and imagery connected to numerous, detailed, difficult and sometimes trauma-related stories, the researcher came to identify with Sherry's description of the 'emotionally fatigued researcher' (2013: 285). This began to influence the project – identifiable reduction in researcher willingness to continue participant recruitment, with the accompanying requirement to listen to further stories, was recognised, as was increasing want to avoid the reading through of the existing interview transcripts (Appendix 13). The research-journal noting of this prompted initiation of communication with a university mental health practitioner – though space for spoken debriefing in academic research is not routinely anticipated (Sherry, 2013: 285), here identified was specific and swift need for this to ensure continuation of this project. Ultimately, spoken debriefing with the practitioner led to adjustments regarding time-spacing between interviews and post-interview decompression activities, which together rendered the project more emotionally manageable without detriment to either researcher or participant engagement.

Third, in reference to engagement with and interpretation of the data collected, activities during which the researcher "becomes the instrument for analysis" (Nowell *et al.*, 2017: 2), it was important to chart personal reflections impacting judgements in connection to coding, theming, et cetera, given that these can "act as a filter" (McAllum *et al.*, 2019) in the analysis process. Here it was in some respects useful to draw on certain impacts of having endured direct exposure to suicide – for this researcher, living with suicide loss involves in part learning to embrace uncertainty. Attempting to approach any understanding of a suicide inevitably involves the making of informed interpretations and judgements based on all possible evidence avenues.

Such a perspective formed part of the approach taken to this project's data. Recognised was the capacity for analysis categories to change/evolve across time in light of other elements in the project, and the need to avoid too-quick assumption of or commitment to theme allocations and descriptions. Included also as part of the data analysis were efforts to question researcher-as-reader responses to transcriptions (Mauthner and Doucet, 2003: 419; Sherry, 2013: 282); respond to specifically reflexive questions (such as 'whose story is being told?' (via an allocated code or theme)) and note where judgements about the participants' words were being made in light of researcher experience.

This research benefited from at-project-outset recognition of the need for researcher reflexive engagement and responsibility (to ensure project continuation and credibility) across all facets of the research process. Though not all impacts were anticipated, through understanding the importance of researcher openness in reference to positionality impacts, appropriate self-care and other management strategies were implemented successfully.

3.7. Closing Comment

Described in this chapter have been the rationales and process behind methodological choices for this project. This qualitative research was designed and conducted in such a way as to amplify student voices and perspectives on the subject of SMHWP. Twenty-one student participants were engaged in a total of 39 interviews. Implemented were multiple modes of questioning and conversation. Careful and vigilant incorporation of researcher-reflexivity across the entire research process aided the construction of a blended inductive-deductive reflexive thematic analysis of the data generated. Such was the relevance and success of the methodological tools and overall research procedure across time that greater detail to augment existing SMHWP knowledge was generated, alongside illumination of previously overlooked facets of these students' MHPB experiences (important for future research development within this subject area). What follows in the following chapters of this thesis is the analytic narrative (Braun and Clarke, 2022) of the developed analysis.

Chapter 4:
**‘General Life’ – Students’ Situation of Mental Health, Distress and Wellbeing
Across All Life Roles and Experiences**

4.1. Introduction

In positioning participants from the outset of this project as people rather than students first, the interviews elicited data of a multi-layered variety, each one necessary to develop more detailed understanding of SMHWB. Two overarching (S)MHWB contexts united by undercurrent emotional experience were identified through the data analysis (see Table 8.). These aspects and their composite themes run parallel and interweave, rather than exist in any hierarchy. Together demonstrated is that students entering an academic institution should not be regarded as ‘blank slates’ in reference to MHWB experiences, knowledge, views. Altogether indicated is that universities need to know their students as ‘whole persons’ in order to meet and work with them appropriately, especially in reference to any SMHWB support offered. This chapter presents an interpretive account (Braun and Clarke, 2022) of the first data area: ‘General Life.’

(Table 8. Finalised Data Analysis Themes).

Area 1 – ‘General Life’	Area 2 – ‘University Life’	Undercurrent – ‘Felt Life’
<ul style="list-style-type: none"> • Time. • Place and Space. • Loss. • Relationships. • Macro-level Threads. 	<ul style="list-style-type: none"> • Institution-led Mechanisms, Systems and Procedures. • Impacts of University-bordered Relationships. • University as a Mirror. • Perceptions and Expectations of University. 	<ul style="list-style-type: none"> • Feeling in Control. • Feeling Secure. • Feeling Recognised.

4.1a. Mapping ‘General Life’

Within ‘General Life’, five specific themes to explain the participants’ ‘person-first’ references, understanding, and experiences of SMHWB were developed: ‘Time’; ‘Place and Space’; ‘Loss’; ‘Relationships’ and ‘Macro-level Threads’ (see Table 9.).

(Table 9. Chapter 4 Theme Summary – ‘General Life’.)

Theme	Sub-themes
Time	<ul style="list-style-type: none"> • Childhood and School. • Present Day Patterning – seasons and days. • Concerning ‘The Future’.
Place and Space	<ul style="list-style-type: none"> • ‘Happy’, ‘Safe’ and ‘Me’ Places and Spaces. • (Feeling) ‘At Home’. • Space and Place Properties. • Organising and Controlling Spaces.
Loss	<ul style="list-style-type: none"> • Loss of Opportunities, Living Relationships and Experiences. • Bereavements.
Relationships	<ul style="list-style-type: none"> • Family and Friends; Meaning and Trust. • Animals. • Perspectives of and Relationship(s) with Self (including physical self).
Macro-level Threads	<ul style="list-style-type: none"> • Navigating Definitions. • Mental Health in the Media. • Pre-enrolment Expectations of ‘Student’ and ‘University’.

Here presented are broader life events, circumstances, periods of change, behaviours and relationship interactions that together provide the filter through which student-specific experiences travel. This data illustrates what can be embedded in a person before acquiring the label ‘student’, what a person might weave into their undergraduate-specific experiences from external-to-university life. These are not ‘outside academia’ aspects of these participants’ SMHWB experiences to be considered separate or detached. Rather, the themes (and their composite sub-themes) described in this chapter demonstrate the complexity of the issue, and can be identified as core to how students expect, perceive, and subsequently experience their MHWB whilst in attendance at university.

4.2. Time

The first ‘General Life’ theme is that of ‘Time’. Events reported by participants drew attention to the importance of (across) temporal contextualisation and relationships. There was a high prevalence of stories linking past to present experiences. Regardless of participant-age and life stages, the participants moved between different time periods in their accounts. They appeared unable to contain their

understanding of their MHWB to fixed timepoints. Personal history presented as resource to facilitate present day recognition of, and actions taken to aid, own mental states.

4.2a. Childhood

Childhood, as a stage defined in these interviews as the time before leaving home, was conveyed as an impactful personal period in terms of its role in grounding individuals' MHWB knowledge, understanding and behaviours. Participants' stories conveyed childhood experiences as explanatory of their present-day mental health. Accounts of having gone through a process of learning (from an early age and from caregivers) about mental health that can still be seen in present day perspectives and actions were common.

"I'm very much one of those, 'Oh look, she's fallen down. Get back up again, you'll be fine.' ... I was taught that as a child." [Bobbi]

Though this may have been generationally impacted, it was notable that younger students also recounted a learned reluctance to talk about mental health in their early learning (from both mothers and fathers). Implied in the conversations was a lack of access to learning about MHWB in a detailed and positive way.

4.2b. School

Alongside childhood-home mental health learning, dominant memories and impacts stemming from various education settings were common. School contexts presented as crucial to the shaping of current perceptions of and experiences in reference to MHWB - they appeared locations of commanding experiences in reference to participants' present-day mapping and experiences of MHWB. Whilst two participants were privately educated and the others attended state-funded schools, the emotional impacts at individual-level appeared shared (Appendix 14), especially in reference to the academic-success focus of the sector overall. Participants described how much

their school's approach and emphasis on academic achievement impacted their sense of self. For example:

"I went to a private school and I always felt like I was one of the worst there. I've always felt quite dumb ... it was a school that [was] ... only really bothered about your Oxbridge applicants ... I became very unconfident because I would never want to get anything wrong because I'd be scared at people taking the mick out of me and teachers would often make you feel bad for getting something wrong." [Lily, private school]

"school was quite competitive ... you always want to be top set, and you always wanted to be the best ... it was that thing of you have to be the best and you have to prove why you're here." [Charlotte, state school]

"I finished school at sixteen with no exam results, nothing ... teachers said, 'Oh you're going to be nothing in life [own name]', and ... you accepted it." [Andrew, state school]

A further important facet was descriptions of how their school environment included apparently-fostered and implicitly-communicated attitudes in reference to the subjects of MHWB. A lack of acknowledgement (and willingness for that to alter) amongst peers was recalled. Charlotte, for example, indicated that mental health was not 'a thing' to be made visible in her school:

"It was not something you discussed at school; it was definitely not something you discussed in the sixth form. It was just not a thing, like the very British stiff upper lip, head held high, and you've got nothing to cry about because there's people worse off." [Charlotte]

Similarly, George described his teen self as unaware on the topics of MHWB. George appeared to question with hindsight the way in which MHWB had been handled and communicated within his own school experiences. Having recently experienced the loss of a school friend to suicide, he implied from his present-day perspective that he assessed his school teachers as having not communicated the topics thoroughly, responsibly or with enough seriousness:

"from a school perspective, I'd say it was probably not covered enough. It did talk about it at times, it said how to make yourself feel more positive about life and goal setting, and talking to people about it, but

it never really went into how severe, the big issue it is in the UK.”
[George]

Important was that many participants traced mental distress outset and their current SMHWB-related difficulties and behaviours back to their time at school. Difficult situations and mental health-related behaviours were identified as having originated during their time at school. School stories were employed as explanatory devices for current mental states and behaviours. Consider the following, in which current SMHWB was explained through reference to experiences:

“I used to not eat at school when I was in sixth form. I would make the excuse of ‘Oh I’ve got loads of work to do,’ and I used that as an excuse to hide the fact that I wasn’t eating ... I would do stuff like I wouldn’t spend my lunch money that my mam gave me on food. I would spend it on things I wanted instead” [Mia]

“it was suicidal thoughts, like year ten? That would be fifteen, fourteen maybe. And then it was the eating stuff and that was quite a big issue for quite a long time, not eating, throwing lunches away and just not liking the way I looked.” [Maguire]

“I got more lazy in terms of sleep during the GCSE, sixth form stage ... it was more because all of my friends were the kind to stay up to 3 o’clock in the morning and I would stay up late talking to them, sitting on social media. Then obviously I would be tired the next morning, so then I would sleep longer. I went into uni like that.” [Jorja]

Alongside identification of mental difficulties as originating during school years, these years were described as formative for personal actions in response to MHWB concerns. Actions developed in school remained important for SMHWB maintenance within university. As one particular example, Anna identified how she consciously wanted to avoid ‘doing the same’ as she had done at school. Recognising how her schoolwork-related conduct/actions had caused past emotional difficulty, she consequently developed and implemented new behaviours at university, to avoid experiencing mental distress:

“every Friday I get my planner out and I will write down every single thing that I’ve got to do for the week after and when I need to do it ... because if I miss something, like secondary school, when you used to get homework, if I didn’t do the homework I would used to cry my eyes

out because ... it just panicked me so much that I didn't do something, and that's what I'm like. I don't want that to happen with university."
[Anna]

Overall, the most noticeable aspects in which participants talked about memory deployment for present action was schoolwork completion and deadlines. There was clear demonstration of embedded school study habits and their emotional consequences now providing reference points to prompt thought about and (potentially different) action in regard to participants' present university academic requirements.

School settings were also often described as contributing to formative ideas regarding the importance of specific relationships with education-setting staff, and ideas relating to how pastoral care and structures *should* be experienced were indicated. There was a sense of valuing swift access to personally-chosen individuals and wanting both individual recognition and to feel cared for by education-setting staff across the accounts. The suggestion made was that when such elements were realised, positive senses of MHWB could also be experienced. Implied was that such relationships and pastoral care experiences were key for present day, post-school confidence and self-belief as well as potentially used as reference points regarding what might be sought for in university relationships:

"My favourite teacher was my [subject] teacher, if ever I had something wrong, I'd just go to him ... this man is my hero ... he'd do everything - he'd explain things to me, and he was always amazed at the work I was doing, and he noticed. He could tell that I loved it and he nurtured the entire love of [subject] for me. I used to be really bad at presentations ... so he used to give me one-to-one little lessons where he'd make me go through things, so I'd get more confident at it. And every time I do a presentation now, I'm like, 'imagine if he hadn't helped me.' [laughs] I would have been a stuttering mess. I wouldn't have been able to speak ... if it wasn't for him, I probably wouldn't have been doing what I am today, or be where I am today, because he believed in me." [Cherry]

"The deputy head, she was lovely. She invited me into her private office, she let me work in there whenever I got upset ... I'd knock on her door and she's like, 'go and work in my room'. She'd bring me a cup of tea, anything. She was so nice." [Pippa]

“at school I got really attached to teachers that were very maternal because I just wanted them to look after me and tell me that it was gonna be okay...she’s [dissertation supervisor] really nice, and like straight away, when I was speaking to her, I could tell that she was like a mum, d’you know what I mean? ...she just was really nice, friendly and reassuring whereas I think some other people are more blunt and less supportive.” [Lily]

Overall, MHWB-related impressions made by outside-university education-setting experiences, notably schools (during teen years), appear deep, enduring and not to be underestimated.

4.2c. Patterns in the Present – Seasons and Days

Whilst the strength of an individual’s past could be identified as impactful to their present-day perceptions and descriptions of their MHWB, participants also mentioned specific-to-present-day time reference points as aids to their emotional mapping. Frequent and notable in the participants’ stories were references to seasons and their associated weather features (Appendix 14) as impactful upon mood and mental health. In particular, attention was drawn to winter and summer. Common amongst the participants was an implied regard of summer as ‘the season of a lighter, happier self’, accompanied by more positive MHWB, whilst winter dominated as the season within which most difficulty and distress can be experienced, even expected. Seasonal Affective Disorder (SAD) was alluded to by some, though for the majority this was not explicit – rather, across all genders and year groups, there was emphasis on winter as bad, and summer good, in reference to the matters of MHWB:

“winter ruins me. I hate it ... when it’s short days, it really bothers me. It really just gets me a bit down. Because I want to be doing things, whereas you can’t ... Longer days just make me happy.” [Cherry]

“I struggle in the winter anyway. I’m a very, very summery person ... I’ve learned about myself over the years that I am better in the summer than I am in the winter, just generally.” [Mia]

Furthermore, such references also suggested these two seasons were particularly connected to specific MHWB actions. For instance, seasonally-affected changes in

time given to self-reflection and care, to going outside, to the taking of supplements were visible:

*“when it’s dark outside, I don’t unpack anything. I don’t question why I’m doing things. I don’t read, I don’t go outside, I don’t do anything nice, almost like I’m punishing myself. Like, I don’t do anything nice, **all the way** [participant emphasis] up until the moment that it then gets sunny, where I turn into a completely different person.”* [Gemma]

“now winter’s coming, I’ll take vitamin D because that helps” [Andrew]

What might be inferred through such comments is that self-care strategies can be associated with and informed by individual seasonal experience, i.e., seasonal awareness could connect to how individuals identify and subsequently act in reference to MHWB self-care.

As with references to seasonally-connected extremes of good and/or bad MHWB, with regard to individual days, the focus fell on the beginnings and ends. First, although morning time was presented as difficult (due to tiredness and sleep-related difficulties), it was also described as a key time for self-reflection, indeed the best time to engage in such activity. Checking in with oneself in the morning was suggested an important activity in order to ‘set themselves up’ for the day. Essentially, how a day starts, emotionally as well as physically, was deemed by these participants as indicative of how the rest of it will go on to be experienced (Appendix 14):

“It’s the getting out of bed bit that I need to do [smiles] ... it sets the tone for the day ... The whole getting out of bed, the routine follows from that ... once I’m out of bed that’s it, I’m ready for the day. I’ll be productive, I’ll do work, I’ll eat all my meals that I’m meant to, take the dogs out and not be too tired.” [Cherry, no physical disability]

“I go through an evaluation when I wake up in the morning. Get out of bed. As I’m wandering off to the bathroom it’s, ‘OK, my knee’s hurting and my elbow’s are hurting, why? Am I ok? Am I stressed? What am I stressed about?’ And this is the sort of thing I go through while I’m doing my ablutions in the morning.” [Bobbi, diagnosed physical disability]

These participants had appeared to have determined through personal experience that a positive start to the day equates to, for them personally, better MHWB.

Conversely, night-time was described in negative terms in relation to MHWB experiences. Across accounts, night-time appeared mentally and emotionally challenging, not simply in relation to sleep but in reference to the arrival of surprising thoughts, rumination, and increased *loss of control*. Lily, for example, described the frustration and tension she has experienced at night-time: *“it’s so relentless at night.”* Other participants similarly expressed night-time as mentally problematic and intense:

“during the day, I tend to be completely alright ... But then when it’s getting to bed ... you can think and there’s nothing else to distract your mind from it, and it starts to get a bit worse at night ... when I’m trying to get to sleep, it just pops into your mind” [Maguire]

“went to bed and I felt low and I thought, ‘Oh God, I just don’t wanna do it, what am I doing? What am I doing?’ and it was about five o’clock in the morning when I eventually got to sleep.” [Andrew]

What might be inferred from all the stories linking in night references is a view that night-time can be most hazardous in reference to mental health-related thoughts and behaviours.

Second, participants also talked about their MHWB in terms of *whole days*. Present was, for example, wide use of assumed common-knowledge labels ‘down day’ and ‘bad day’:

“people have their bad days” [Cherry, no mental illness diagnosis]

“everyone has bad days” [Dolly, mental illness diagnosis]

The experience of ‘down days’ and ‘bad days’ was perceived as common to all, but participants demonstrated individual responses to these days. For some, inaction and staying in bed remained dominant. For others, taking a day off to ‘reset’ (*“mental health day”, “self-care day”, “a switch-off day”* [Gemma]), was the direction

considered and often implemented. As with the nature of 'bad days', responses appeared highly individual:

"I just take the day off. I'll just stop for the full day ... and just have a [laughs] self-care day and just do nothing. I'll just sit, and I'll read, and I'll have a bath, and it really helps" [Amy]

"I think I cried for a good hour and then I did nothing ... I switched off ... I took the Saturday off and on the Saturday night we went out and just got drunk. Just let off steam, which was really good." [Alex]

Whilst Amy's activities would align with common ideas about what self-care *should* look like, Alex's alcohol use would not. Thus, whilst at times some activities performed under the labels 'mental health day' and 'self-care day' could appear not appropriate to achieve the declared aim, they appeared functioning at a *personal* one.

Furthermore, certain actions to be taken on 'down/bad' days were explained through reference to memories of a 'good' day. Participants described employing social media for memory banking – social media was highlighted as a tool for recording the 'good days', as a resource to draw upon when 'bad days' hit. Recording and looking back on 'good days' was implied an important means through which to cope with the 'down/bad' days, encouraging realisation that 'bad days' end:

"I like to keep Facebook as this memory thing, and this goes with my mental health, 'cause if I'm having a bad day, when I wake up, I go back and I can look and go, 'Oh I went there with Mum; I've done this, you know, four years ago'... when you need that pick me up." [Dave]

"I did a Facebook video of me rambling on, just something to look back on on your Facebook memory. Because it was a good day. It's nice to have a good day, and next year that'll come up and I'll be able to listen back to it and say, 'well that was a good day.'" [Andrew]

Overall, the prominence of participants' day-related experiences serves to emphasise further that for them the nature of their MHWB (and thus SMHWB) might only be realised in and through acute moments.

4.2d. Concerning Future

Participants' accounts included largely negative preoccupations regarding 'The Future' (as a widely-defined, sometimes abstract thing). While that encompassed their immediate future (e.g., next academic year), longer-term future concerns and the MHWB behaviours they evoked dominated (perhaps due to the majority of the sample being in their final year):

"I'm trying not to think about it [the future] at the moment ... I am worried about actually finding a full-time job ... there's quite a lot of competition ... it's gonna be difficult, it's a worry." [Alex]

Alex's indication here was that her uncertainty about the future was very much connected to worry about job prospects and financial insecurity *outside* of her student-time, and this was visible in other participants' reflections as well. It was these aspects that led to an apparent and general negative regard of 'The Future', as something to them insecure and almost threatening. Connected to this was participants' negative imaginings about the future negatively influencing their current MHWB. There was a sense of wanting to address and tackle this negative feeling through planning and securing 'things to look forward to':

"I need ... something to look forward to. It keeps me calm, I guess."
[Nicola]

"it's remembering that this isn't forever, it's not gonna last forever, and actually looking forward to next year." [Bobbi]

What such examples suggest is a process of recognising the harmful effects of worry about the future, and responding by organising and firming up future plans, as a way of coping and preventing a worsening of the present anxiety. These future plans referred to a range of activities and areas of life: Take the following examples, within which Charlotte highlights general life plans, whilst Lily describes her planning in specific reference to mental health support access:

"I was like, 'I know what I'm doing next year,' whereas before then, I couldn't plan." [Charlotte]

"I am really concerned about what's going to happen ... I don't have anything in place ... I don't have any plans ... I don't really have any

kind of reason to try and keep myself safe ... so that's basically the [pause] worry at the forefront of my mind." [Lily]

Both these participants, the former having been able to plan, the latter remaining plan-less, regardless of the where and how specifics of their plans, serve to draw attention to the calming effect of being able to identify something secure in the face of a perceived uncertain future.

4.2e. Closing Comments on Time

Participants' stories highlighted that perceptions and experiences across time are both complex and central to the mapping, interpretations and understanding of their current MHWB, regardless of their 'student' label. Specific-time connected MHWB-related memories constituted a resource/bank from which individuals could draw when experiencing difficulty in their present day. Furthermore, movement between and across different timepoints and periods in these participants' accounts needs acknowledgement. Stories here frequently weaved together different time-located experiences, including the linking of 'outside university' to 'inside university' times, indicating how the individuals may deem them inextricably linked in terms of their personal SMHWB meaning.

4.3. Place and Space

The second theme to the 'General Life' area of the students' stories is 'Place and Space'. This contextual element indicated as significant concerned the speakers' sense of themselves, physically and virtually, in terms of place and space. This theme could have been affected by the COVID-19 pandemic's imposition of geographical restrictions heightening people's awareness of themselves in space more generally. However, these accounts did not present 'Place and Space' connections to MHWB as having been caused by the unique context of the pandemic – this was highlighted through participants' reflections describing pre-pandemic situations.

4.3a. 'Happy', 'Safe' and 'Me' Places and Spaces

Key to participants' accounts were emotional associations attached to places and specific locations. Specifically labelled 'happy' and 'safe' places were described. These locations were talked of as self-resetting and coping mechanisms, places to which individuals would want to physically travel when experiencing difficulties. Such places were described as locations where thinking about/ 'working on' own MHWB states was permitted (Appendix 14):

*"there's this really weird tree. It's a tree that's been bent over and it's got moss on the top so it's nice and padded and it's basically a seat in my eyes. And whenever I was stressed or overwhelmed or if something bad's happened, I'll just go have a little sit ... that for me is my happy place ... it makes me feel warm and comforted inside, like 'there's my tree', like '**my** [participant emphasis] tree' [laughs]. It's where I always go ... when I was at my parents', if a bad thing happened, like if in school I was a bit upset or something, I'd just go to my tree, and I'd just sit, calm myself down."* [Cherry]

"it's like when you go to your happy place ... with me ... I go [abroad location] and I stand at that beach, and I take that deep breath in, and everything's just okay." [Andrew]

"I live in a very small town ... I know the area, and I can go to the forest, alone and everything, and I feel pretty confident, and I'm not scared. I feel just better here." [Beryl]

Interestingly, across all such comments was that the experienced 'happy' and/or 'safe' sense was connected to open-nature, countryside, or coastal locations. The positive mental health association with these places was also presented as having been established over time, as a consequence of repeated visiting. Such locations were conveyed as emotionally-anchoring places to which return visits could, and should, be made due to the positivity the individuals attached to them. The personal emotionally-positive identification and labelling of spaces also brought attention to ideas of ownership in relation to spaces/places as important to how MHWB was described. Overall implied through such descriptions was that an individuals' mental and emotional self may at times be experienced as somewhat suppressed outside of a designated/chosen 'me space/place' – being in these 'purposefully me' locations can be suggested as providing of relief, rejuvenation and motivation.

4.3b (Feeling) 'At Home'

There was a focus on the idea of (feeling) 'at home'. Navigation of questions such as 'where can/do I feel at home?' and 'how can/do I feel at home?' appeared to underpin many of these individuals' MHWB experiences. Participants' descriptions of home before university (in both physical and non-tangible terms) appeared to guide and inform how they sought to feel 'at home' once at university, especially where geographical transition for their studies had occurred. Even where participants had not moved to attend university, the importance of home was stressed. Expressions of not being able to imagine 'how awful student accommodation must be' appeared alongside gratitude for their own home-spaces. Ultimately, seeking, recreating and/or maintaining (feelings of) home whilst at university was conveyed as part of the management of SMHWB at university. Consider the following examples (Appendix 14):

"You're probably not gonna be any more comfortable than you are at home. 'Cause you've got Mum doing everything for you, everything's clean all the time, which seems magical [smiles]. I think if you can have that nice, homely environment there [at university] it makes everything a bit nicer, it feels more like you're at home." [Maguire]

"it was really hard because [it] didn't feel like home. It just doesn't, you know, there's no, like, Mum making roast dinners, there's none of that." [Gemma]

Underneath umbrella ideas of home, what such examples indicate is that encompassing elements are wide-ranging, including home-associated interactions, presentation and cleanliness, and even food. Ultimately, the emphasis placed on all expressions about (feeling at) home appeared as an important reference in the mapping of the participants' emotional and mental states generally, perhaps bringing to attention a wider need to connect individuals' overall experiences with living spaces to SMHWB.

4.3c. Space and Place Properties

Given the location of the institution from which the participants were drawn, important were comments on the potential emotional and mental impacts of living in a city with

an established reputation for certain activities. Many participants referenced pre-university expectations regarding the normal student experience they expected *in this locality*:

“one of the big things that people think especially when they’re coming to [city] is, like, the party scene” [Sara]

*“[it’s] a drinking city ... people come [here] because they want the party ... if you choose **not** [participant emphasis] to, how isolated you can become.” [Charlotte]*

Beyond the named city’s specific reputation, references apparently connecting life and living in a city to experiences of loneliness and isolation, stress and pressure, and feelings of needing to escape were also present in these participants’ stories. Responding to such feelings, access to open country and coastal spaces were described as the main locations to provide aid for MHWB (– indeed these types of spaces were also described often in reference ideas about ‘happy’ and ‘safe’ spaces (See p.132-3)). Lucy and Beryl, as ‘Home’ and ‘International’ students respectively, provided accounts of their similar perspectives on this:

“in a city, it’s not that OK, that great, because it’s very noisy, a lot of shops, and a lot of people. But when you go to the woods, it’s calming and helpful.” [Beryl, International Student Status]

“that getting out into the fresh air is so important ... you can feel very under pressure in a city ... It’s easy to feel like you’re falling behind or not doing as well as everybody else. But I think once you come to yourself, and you go and walk to the beach, you just ... think ‘well, maybe there’s more to life’.” [Lucy, Home Student Status]

Whilst such comments were uttered as specific to the institution concerned in this study, the wider indication is that space and place are intrinsically connected to how individuals think about and respond to their MHWB.

4.3d. Organising and Controlling Spaces

Also made implicit in these interviews was a need to have personal senses of control over space. Being able to move and separate spaces (Appendix 14) and employ

different spaces for different reasons was an important MHWB facet for participants, particularly in reference to work and rest spaces. Ultimately, having a sense of choice and organisation regarding space/place purpose and use appeared as something allowing participants to feel more in control of their mental states more broadly:

“in my head I need to have a work spacing area etc., you know, ‘And this is where my mind is.’ ... In my head there’s a wall that runs across the edge over here. This side of the room that you can see now is the study. That side there is my living space, and then there’s another invisible wall on the far end, that’s my bedroom ... The only space I’ve got is my room, so the boundaries were [sic.], are even more important. It’s important that I set them up for my mental health” [Dave]

“I found it [being in the same room] hard. There was no space to like switch off ... I found it really hard not having a boundary or barrier, just [doing] everything in my bedroom.” [Sara]

This ‘mental space allocation’ control was also made visible in participants’ references to their evaluations of and behaviours in virtual spaces. Descriptions relating to social media use made further apparent participants’ wishes to personally contain where their emotional and mental experiences appear. For example, accounts of decisiveness and actions taken to control where personal mental health and/or distress-related content would be placed frequently arose (Appendix 14). Having and maintaining control over different virtual spaces presented almost as equating to a perception of having control over their mental health. Several accounts indicated how having multiple ‘public’ and ‘private’ digital spaces for different personal purposes, each presenting different content dependent on the spaces’ audiences, was an important feature in thinking about MHWB more generally:

“I have a public Instagram where I post nice pictures ... I’ll post it for anyone to see; I don’t care ... And then the private one is people I trust ... my private one is for my friends and people I actually speak to, people that I want to see my good days and my bad days.” [Pippa]

“my Facebook is completely locked down ... my entire profile is private ... I only accept people I know ... I know with my Facebook it’s OK to have [a] vent, to have that cry on a media forum ... it is my place for me ... my Twitter is open, it’s a public forum in that sense ... I don’t know who’s seeing and I quite limit what I post into there.” [Dave]

Connected to the elements above was an identifiable emphasis on ‘the *who* of space control’ in the narratives. Students’ accounts drew attention to times when their space-related decision-making became restricted, the cause of the restriction stemming from the actions of others connected to the same spaces. Many of the examples concerned restrictions experienced in living spaces. For example:

“I did feel really, really trapped in my room ... there was nowhere that I could go, especially when I wasn’t getting on with one of my flatmates.” [Amy]

“I was scared to leave my bedroom to go into the kitchen because him and his aggressive girlfriend were there ... and there was no way to leave because I’d signed a contract.” [Gemma]

“my bedroom was connected to the living room, so they would come home after a night out and they would be up partying in the next room. It’s keeping me up, so I would message and just say, ‘Oh, do you mind keeping it down?’ ... this argument slowly developed ... [and] I kind of got stuck in my room ... I was always staying in the bedroom and it just got to the point where I’d had enough.” [Jorja]

Such examples provide insight into feelings of being ‘trapped’, ‘stuck’, ‘unsafe’ (the latter appearing in stories recounted by female students) in spaces/places because of circumstances perceived as outside of their own control. Also included, and emphasising the point, were perspectives expressing gratitude and luck in regard to the spaces they currently had, that these were not as entrapping as they potentially could be. Such references indicated a personal sense of liberty in space (particularly for everyday living) as a key element in MHWB experiences.

“I’m lucky, I’ve got a garden, I’ve got a big house, I’m not stuck ... to be forced to stay in that room, I can’t imagine, I mean it’s worse than prison.” [Andrew]

Overall, there was a sense of a want to both compartmentalise and control the where of their (S)MHWB (in both physical and digital spaces). Implied was that having command over themselves in spaces/places, especially those central to their everyday living, enables positive senses and experiences.

4.3e. Concluding Comments on Place/Space

The importance of different spaces/places in their lives, specifically in reference to MHWB, was perhaps an element brought more to the fore for these participants by their COVID (restriction) experiences. However, what the pandemic appears to have facilitated is deeper reflection on these elements of significance already in existence. In this regard, the interactions for this research facilitated for the participants recognition of space/place as perhaps more significant for themselves than previously appreciated. Individuals' broader personal geographies, physical and virtual, and the relationships contained within those specific spaces were clearly described crucial aspects to consider when seeking to understand SMHWB at a deeper level.

4.4. Loss

The third key theme developed through the analysis was that of 'Loss'. At its most obvious level this term encompasses the many impacts of bereavement described by participants. However, through closer (re-)reading of the students' words it became apparent that what they connected to their MHWB was grief associated with less tangible forms of loss. Inevitably, losses wrought by the COVID-19 pandemic were spoken about, such as the loss of ability to secure employment or see friends, but at an overarching level loss of (expected) opportunities, relationship and/or friendship breakdowns, and loss of support more generally were all underpinning strands in this theme. These were crucial to record as often in society only specific forms of loss are determined as important in reference to (support for) MHWB – overlooked forms of loss can be unseen and implied 'unimportant' within institutional systems and procedures. The stories here indicate what can *really* matter for students. Important to note also was that while initial thoughts about their losses were connected to accounts of mental distress, several participants talked about their loss(es) in terms of motivation and purpose across their lives. Overall, loss was demonstrated as multifaceted and fundamental to participants' understanding of their own MHWB, outside and filtering to the inside of their 'university life'.

4.4a. Loss of Opportunities, Living Relationships and Experiences

Turning first to students' accounts of loss outside of experiences connected to death. Given the time-context within which this research was conducted, 'COVID Losses' were prominent, yet these simultaneously provided avenues to broader elements important for SMHWP outside of a pandemic. These included losses in terms of sudden changes, stoppages, or removals of access to often-taken-for-granted things such as the loss: of opportunity to learn from previously-guaranteed training; of opportunity to live in already secured/paid-for housing (or return to original homes); of ability to engage in extra-curricular activities to which a personal sense of belonging was attached; and of ability to develop existing or form new relationships. A primary aspect concerned impacts on social relationships wrought by the loss of physical proximity:

"we were all sobbing and crying like we were never going to see each other again." [Nicola]

"over lockdown we broke up ... my mental health and wellbeing was better when I was with [name] ... But then we broke up over lockdown, that was a pretty dark period." [Maguire]

"lockdown showed me really who my true friends were in terms of who contacted me regularly against the people I just didn't speak to for months or didn't hear from." [Sara]

Such expressions indicate a deeply held belief regarding the importance of social connection to positive mental experiences. Going beyond the surface narrative of the loss of face-to-face social interaction during the COVID-19, participants' descriptions indicated the individual meanings *behind* that loss. It was implied that the unexpected changes and endings in relationships induced feelings of uncertainty and insecurity in life more generally. These aspects were highlighted in a further important element - loss in relation to work/employment was intimately connected to mental health, distress and wellbeing experiences:

"I'm self-employed ... obviously with COVID, my work stopped ... which isn't good, mentally or financially." [Andrew]

“I had a right nightmare with work and they changed us ... to casual workers, which meant that they cannot pay wor [sic.] for furlough, so [!] wasn't getting paid.” [Alex]

“I've got a job but because of COVID, I can't go ... all the shifts that they'd given me in advance, they started taking off me ... it was a bit shit, not gonna lie ... when I get me hopes up ... when it doesn't happen, it's more detrimental than anything.” [Dolly]

These examples indicate that participants made direct connections between work loss (and associated financial situation) and their personal mental state. This was emphasised when these negative accounts were considered in juxtaposition with the more positively toned stories of students who did *not* experience loss of work during the pandemic, which emanated gratitude and security (due to financial cushioning) (Appendix 14). Combined, the positive and negative experiences created a strong impression regarding the *loss* of work and money as impactful on students' ideas about MHWB within the COVID-19 pandemic and beyond. Whilst COVID19-related impacts are situation and time specific, it is important to stress the legacy of such experiences for individuals – as can be seen in reference to other past-time-bound stories (See p.122-7), prior experiences do remain meaningful and important as personal reference points with lasting impacts, talked about and poignant for individuals' MHWB moving forward.

4.4b. Bereavements

Losses via bereavement were commonly described; 13 out of 21 participants described bereavement as a particular 'mental event' beyond other forms of loss. These included different relationships lost through bereavement, ranging from friends, mentors, pets, to (most commonly) grandparents. Also described were experiences of multiple manners of death/dying, such as sudden death (including suicide), miscarriage and long-illness-induced (accompanied by anticipatory grief). Whilst bereavement in itself is not in the UK classified as a mental health issue/condition (Valentine, 2018; Turner and Price, 2021; Valentine and Woodthorpe, 2018), the students here directly linked bereavement with mental distress due to a sense of the world having suddenly changed and become unrecognisable:

“my granddad passed ... he was the closest father figure I had in my life and my entire world caved in” [Dave]

“what happened [suicide of a friend] made me think not everyone seems as they are or what they tell you ... [pause] made me feel that I was in the wrong.” [George]

“My Nanna was like my absolute best friend so it just broke my heart and I really did go into a massive, massive depressive episode where I would just not get out of bed” [Anna]

The death of a loved one was an inherently negative ‘trigger’ for many participants, regardless of how the loss may be judged by others. This was illustrated by an account of the death of a childhood pet – such a loss may not be considered as profound as other forms of bereavement, but can be an immense challenge to the individual grounding of the person experiencing it:

“we had a family dog. She died ... that was just a huge part of my childhood. I don’t remember the dog not being in my childhood and [I] struggled with the news a bit” [George]

The dog symbolised stability for George, and loss as destabilising was an important feature across participants’ accounts. Alongside feelings of instability, the negative triggering resulting from a bereavement could be seen as manifesting in other behaviours and emotions in these participants. Social withdrawal, hiding, quietness and self-isolation, cumulatively developing into a general feeling of loneliness, arose after a major bereavement, sometimes extending across time. Loneliness in bereavement experiences was a strong strand across the stories, due in large part to participants experiencing the effects of an under-recognition of the lack of uniformity in grief experiences:

“I didn’t get out of bed for weeks. The progress I [had] made getting out of my shell and everything, I went straight back in and shut myself off from everyone. I was pushing everyone away ... that was probably the lowest I’ve ever felt in my life. I just felt alone.” [Anna]

*“I remember feeling lonely, thinking that no-one [participant emphasis] had ever gone through what I’ve gone through. Yeah, I know people have lost babies ... but no-one’s been in **my** [participant emphasis] story.” [Dolly]*

“every grieving process is very different and unique to that person, and everyone handles things differently.” [Lily]

Bereavements as mental health-related ‘events’ were described as having different-for-individual and often lingering/reoccurring impacts. These were often triggered by, for example, anniversary dates. The extent and longevity of the mental health impacts on an individual was described as connected to the specific nature and meaning of the relationship(s) lost (Appendix 14):

“[friend] used to encourage us [sic.] ... I’ve struggled to come to terms with the fact I don’t have her to talk to ... when I’m stressed and stuff ... that support has gone.” [Alex]

“with my grandad, I was finally starting to get better and then someone would mention something or something would come up and I would get upset all over again ... every reminder I had, it didn’t matter how far along it was, I’d still get upset every single time.” [Amy]

“November [anniversary month] isn’t always the best for me ... I just get through it ... as long as I’ve got something to do, we’re good ... I do a lot in November just to keep busy.” [Charlotte]

Through these accounts was created the impression of ‘just having to get through it’. Though not explicitly stated, it was implied that *feeling* alone in grief did not necessarily mean wanting to *be* alone. External support after loss was not discussed; more common, as in Charlotte’s example above, were descriptions of coping alone. Coping after bereavement appeared descriptively in active choices, yet there was a latent sense of coping alone as being about doing what you *have* to and *should* do, accompanied by not knowing what else to do, or what support might be accessible.

Positive connections post-loss were also raised. Bereavement experiences for some were described as (eventually) proving to be sources of motivation, change-in-self and positive decision-making. Following the suicide of a school friend, George described the experience as,

“a wake-up call, really, just [to take] things more seriously. It definitely changes the way I interact with people ... I’m quite wary of what I say to people now ... I thought, ‘I need to, myself, look into more about the

topic [of mental health] itself and understand it, and understand where people can come from.” [George]

For him, the loss of his friend prompted self-reflection and taking steps to deepen his mental health literacy. Similarly, the following students also described positive influences of bereavement, after time, such as more positive mindsets and life choices, focus and renewed energy, and inspiration:

“she’s part of my reasoning for going to uni ... inspired me that I could”
[Alex]

“I started thinking my grandad wouldn’t want me to quit because of him and I just thought, ‘you need to get yourself together’.” [Amy]

“My granddad did so much for me. He’s the reason I’m at university in a sense. His wish was ‘no child, grandchild or great grandchild of mine will never not go to university because they couldn’t afford to go.’ ... he would move heaven and earth to make sure I got the education. It’s why I want to go into [career], he brought me up to it.” [Dave]

“We all live a life for two ... we live a life for her.” [Charlotte]

Such perspectives do not remove the difficulties the students experienced because of their losses, but they demonstrate how bereavements may, given time, morph to act as resources for personal positivity and motivation. The amalgam of negative and positive mental states in connection to single bereavements described by many of these participants suggests that there is need for revised organisational perspectives on supporting bereaved individuals, given the multiple meanings and experiences they can bring.

4.4c. The (Emotional) Complexity of Loss Experiences

Though ‘Loss’ as an overarching theme was perhaps of heightened significance because of the COVID-19 pandemic, all participant descriptions of losses nonetheless identified important considerations as far as SMHWB is concerned. The ending of an expected-to-continue life element could be a ‘trigger’ for emotional and mental deterioration, due to destabilisation and disorientation wrought by the experience. Furthermore, whilst participants’ accounts connected loss experiences

to their mental health states, these were not 'fixed' emotional experiences. Stories pointed toward the complex emotional and mental impacts of loss as changing over time, as a result of individuals navigating the symbolism and meaningfulness of the loss to them personally. Loss experiences were described as intense events with the ability to trigger individuals both negatively and positively across different timepoints – the extent to which each end of this spectrum was experienced by the speakers here depended much on their present contexts.

4.5. Relationships

“I would love to say that I am solely responsible for my mental health. Reality is so many people can change my mental health. I wish it wasn't the case, but it is. If my core people, the people that I need the validation and the reassurance from, one of them does something the slightest-est [participant expression] wrong, they can singlehandedly derail me completely.” [Charlotte]

The fourth overarching theme in this area of students' experience concerned their relationships. Mental health and/or wellbeing were not seen as individual matters, but as intertwined with the characters and actions of others. Participants described multiple forms of relationships crucial to their understanding of their own MHWB.

4.5a. Family and Friends; Meaning and Trust

Participants focused on relationships with immediate family (notably parents or caregivers). Family relationships (from childhood) were described as crucial to initial tone-setting and understanding, either negatively or positively, of their MHWB over time (into the present day). This might appear to connect and link to other childhood-related experience (See p.123-7), but the significance identified in the data was a particular emphasis placed on the specific bond that is child-parent(al figure). Lily, as one example, implied how problematic elements in her family relationships negatively impacted her mental state growing up, insinuating a need for distance from these relationships to improve MHWB:

“me [sic.] and my mum used to have a really bad relationship through school ... we did not like each other at all ... And my brother's quite

aggressive, so it was just quite a volatile household ... it was quite a toxic environment ... when I left that [pause] resolved a lot of the problems, because I didn't have to deal with people that made me feel worse." [Lily]

Family members were often deemed influential to participants' own 'mental health literacy', i.e., individual understanding of and approach to their own MHWB were explained as often learned predominantly from family members (and potentially generationally transmitted). Identification of parents/caregivers as 'mental health (behaviour) role models' presented as a means through which to explain own feelings and actions. For some, mental health literacy and action-for-self ability was described as stunted, even prevented, as a consequence of a lack of positive role modelling from and/or obvious discomfort in parental/carer figures:

"she [mum] was like, 'did I cause it?' [laugh] ... we got into the depths of it and we found out that actually the behaviours that my mam's had since she was little and how she deals with her mental health is how I deal with mine, and it's because I've learnt from her. It's not that anything's triggered me, it's just that I've learnt that from her. And the same with [my sister], she's learnt her behaviours from my dad." [Alex]

*"my parents aren't understanding of it. I don't really speak to them about it ... my mum, she'll be like, 'are you ok?' and if I was to be like, 'not really, no,' then she'd say, 'oh are you feeling suicidal?', and I've said 'yes,' automatically the conversation would then switch and it would be her almost attacking me, saying, 'you don't understand how that makes me feel, you don't understand how selfish you sound' ... she just can't have that [sigh] conversation about my mental health ... my dad's more level-headed ... but he finds it difficult to accept **that** [participant emphasis] from his daughter, so he takes the approach of avoidance. He'll try and change the subject ... I wouldn't talk to him because he **can't** [participant emphasis] ... I just don't speak to them about it."* [Lily]

For other participants, however, referenced were positive behaviours learned from parents/carer-figures. Consequently implied was that positive parental/caregiver experiences can positively influence MHWB into and through adulthood. Across both the following students' accounts, for example, was clear influence of their fathers' views and advice in their activities, which were deemed crucial for their present-day MHWB:

“[I care for houseplants] because dad’s taught me, and as a child I was obsessed with my dad. I was a proper daddy’s girl. We’re interested in really similar things such as nature ... I’ve always had at least one plant in my room since I was really little” [Cherry]

“with the morning checks it’s, ‘Am I ok?’ and one of the main things is, ‘Am I worrying about anything?’ and applying the ‘what doesn’t matter, doesn’t matter’ analogy. My dad’s got this thing, ‘You die if you worry; you die if you don’t. Why waste your life worrying?’ [So] ‘Can I control it, can I change it?’ And if he answers no, then I won’t.” [Bobbi]

Overall, taking both the positive and negative accounts of parental/carer-figure influence, indicated across participants’ accounts was the deep impact of these particular relationships on embedding core ideas about their understanding of and action in relation to their present-day MHWB.

Participants’ also perceived support from family relationships as being most reliable during times of distress and difficulty. Important were mentions of parents/carer-figures (notably mothers and grandmothers) and siblings as being first ‘ports of call’ in times of difficulty. Even where such a perception was not realised, it was apparent that participants positioned family at the top of a *wanted* support hierarchy. Implied across narratives was that support from family can be important because it is characterised by trust and acceptance (without judgement):

“I talk to me [sic.] brother a lot. And for all his pain-in-the-arse-ness [smiles] he does talk a lot of sense, especially when it comes to me ... he can look at me and know that I’ve got a problem, or that I’m worrying about something. He knows that I won’t always talk to him about it in detail, but we can talk around it. Which helps. I think it’s that being able to talk and not be judged that makes a difference.” [Bobbi]

“I’d be lost without my mum and granny” [Dave]

Despite many valuing and feeling secured through family support, some participants also connected notions of family duty and responsibility to MHWB. Several individuals made implicit reference to carrying weighty thoughts about family members and their views, the latter sometimes contradictory to their own. Participants indicated how they held the idea of their family in particular ways – if they identified themselves as not adhering to that, feelings of shame and guilt appeared induced. Thoughts of family

were sometimes described as highly influential in personal decision-making. Family-connected guilt (specific one-off occasions and across time) was hinted at as a component of mental health-related experience:

*“My family, whether they know or not, will forever dictate my decisions on whether it is an acceptable decision to make, even though I’m a grown-ass woman, and I’m 200 miles away from them, they will **forever** [participant emphasis] make a decision without them knowing they’ll make a decision ... that unsaid, unwritten thing that you just don’t do it in my family.” [Charlotte]*

“my parents were making me feel quite guilty ... my mum was saying, ‘you don’t know how much effort we’ve put into making your day so nice and you’re just in a bad mood all the time, you just seem ungrateful for it.’ That was frustrating because I was like, ‘I’m really not ungrateful. I just can’t help that I’ve got a mental illness, like my mental illness doesn’t disappear on my birthday’.” [Lily]

“I feel like they [parents] miss me more than I probably miss them, just ‘cause they’re on their own. Being an only child, the house is probably really quiet.” [Maguire]

Across accounts were examples of the emotion work being undertaken to maintain family ideals. Students consequently explained their behaviours as being in part about honouring others, and not make others’ lives more difficult. Such examples, indicated a key element of the MHWB stories for some participants was about feeling a weight of responsibility, not simply for themselves but for valued others:

“I just don’t want to make it harder for my parents this year.” [Beryl]

“I don’t think it’s just my degree. It’s a bit of my mum’s degree; it’s a bit of my granny’s degree; it’s a lot of my grandad’s degree ... it’s not been a one-man effort and I think that’s where the emotions will come from.” [Dave]

Alongside family, formed-in-childhood friendships were significant. These were described in predominantly positive terms connected to mental health, distress and/or wellbeing-related experiences, as highly trusted support sources, perhaps at times relied upon even more than family connections. Implied through these relationship descriptions was that long-held friendships developed across childhood (through school) facilitate a particular interpersonal closeness and depth of

knowledge that in turn enables the levels of reliability and trust apparently required in support (particularly where issues of mental difficulty arise):

“your childhood friends always have a little piece of your heart no matter what ... [my friend] she knows a lot about my life and I know a lot about her life and I think we are the only people that can really relate to each other on a lot of things ... it’s that sense of security that I know there’s somebody there who knows me inside out, back to front, and cares for me regardless and will support me regardless.” [Lucy] (see also Appendix 14)

Participants’ comments connecting family and childhood friends to their MHWB experiences altogether appeared to stress that what can matter most is the meaning of and sense of security in their relationships. This was further made visible in students’ descriptions of deliberately implemented evaluations regarding relationship trustworthiness in reference to MHWB specifically. For example, Lily and Charlotte provided accounts of their use of relationship appraisals as part of their mental health-related decision-making:

“I know who would get it and who wouldn’t. I won’t even dare open up to someone who I didn’t think would get it ... I wouldn’t want to be vulnerable and show that for someone to just dismiss it.” [Lily]

“I put people through a test, without them knowing ... to judge. Like, ‘What is your opinion on this ... on that? How much do I trust you? Where is this friendship going? Can I see it going into the future?’ ... telling them something, how do they react? I do it without even realising I’m doing it. I just do it, but I think it’s my coping mechanism” [Charlotte]

Participants presented that the relationships that matter the most are the ones that have (had) time to prove themselves non-judgemental, able and reliable ‘in all weathers’. Family and from-childhood relationships, consequently, appear as the priority, embedded-in-mind mental health, distress and wellbeing resources (long before any engagement with higher education institutions).

4.5b. Animals

Participants highlighted relationships with animals as important in relation to MHWB. Interactions with animals were overwhelmingly talked of as positive for individuals’

MHWB. Animals, most notably dogs (though some cats also appeared), were described as creators and maintainers of needed routine, energy and reassurance; encouragers of taking responsibility and giving care; sources of orientation, confidence, calm and comfort; instigators of needed physical activity and connection with ‘the world outside’; and as simply providers of non-judgement/unconditional acceptance, smiles, and laughter. Numerous stories directly connected interactions to personally positive emotional and mental states. The following extracts illustrates the scope of these (Appendix 14):

“I love dogs and they give you a purpose ... gives you routine ... with a dog I’ll go out more ... she [the dog] is like my child, I wouldn’t do anything to harm her.” [Cherry]

“[my dog] she almost reminds me where I am ... even just touching her and knowing that she’s there, it brings me back to reality a bit.” [Lily]

“On my worst day, she [the dog] makes me get out of bed ... she’s seen me a mess on the floor, especially after losing [friend] [pause] I don’t think I spoke to anyone, I just spoke to the dog [laughs]. Speaking to people was hard; the dog didn’t ask any questions. She knows when I’m having a bad day.” [Charlotte]

“a dog is great because, I’m having a crap day, I’m gonna sit on the floor with a tennis ball and a dog’s gonna hug me ... play with a dog and it just takes you out of the environment you’re in and creates a little bit of happiness, it’s so much fun ... they do give that energy” [Dave]

“my dog has definitely increased mental health, as in it gives me something to look after ... that was something to do, walk the dog, something to look after, and he’s a dead happy puppy. Learning to train him as well, that made me feel quite responsible ‘cause I’ve never had to train a dog before [dog barking].” [Dolly]

Perhaps most interesting of all was one example whereby dog behaviour provided a clear way to identify and explain her own mental health-related behaviours:

“I think I’m like a dog, to be fair – if I’m happy me tail wags [laughs] and if I’m not, I go and hide under a table ... it’s that whole ‘happy dog’, you know, wandering about amongst people and their tails are wagging, looking everywhere and interested in everything. But then when I’m not so happy or I’ve been told off or something, like I say just go and hide out of the way and hope nobody comes along and kicks me for being there [laughs].” [Bobbi]

Essentially, the animal-human relationship here was considered 'different', one in which the non-judgemental nature and support emanating from the former was crucial. Animals also presented as encouraging of protective *self*-management behaviours e.g., establishing own routines; taking on caring responsibilities; engaging in self-reflection, as opposed to being simply 'the external other with the answers to fix me/things'. Taken altogether, these participants' relationships with and descriptions of animals were the one element universally recounted and connected to positive MHWB experiences.

4.5c. Perspectives of and Relationship(s) with Self

Through the students' accounts of their relationships with others, implicitly presented as important was how participants can use their interactions as a means to recognise and know themselves.¹⁶ Indicated by several individuals was that relationships can be significant because of how they signal to a person something about their own emotional or mental state. Appraising the actions and emotional states of others – in light of general ideas of what is 'normal' for them – appeared in these examples as a way to clarify and know oneself:

"[wife's name] would notice ... and she'd try and be careful what she said, and I know, as soon as she starts like walking around me, I know I'm low then, because she's not [wife's name i.e., herself]. She goes quiet." [Andrew]

"[my sister] she has mental health issues but they're different to mine. She's a very angry person and when she's struggling with things, she'll get angry and she'll shut down and she'll shut you out. Whereas I'm the opposite [laughs]" [Alex]

However, an important facet of the theme of 'Relationships' developed within this research refers to the participants' relationship with themselves (as much as with external others). Many of the stories recounted, implied a central component of

¹⁶ Changes in themselves as identified through interactions with others, for example, might signify where personal control or stability is under challenge or has been lost.

mental health, distress and wellbeing mapping as involving navigation of opinions and thoughts about themselves. Consider the range in the following self-descriptive statements:

“I’m a very stressful person [small laugh] I worry and over-analyse absolutely everything” [Anna]

“I’m a massive nerd ... it does affect me sometimes, when people make little comments, it can affect us.” [Alex]

“I can’t feel good about myself unless people say it was good. I need constant support from people of like, ‘yeah, it’s great’. I need to constantly ask people, ‘is this OK? Is this OK? Is this OK?’ And that’s how I’ve always done it.” [Gemma]

Adjectives used about themselves revealed embedded processes and foci in self-appraisal. Overall discernible were more self-critical than self-celebratory tones to these individuals’ relationships with themselves. Whilst some participants identified as *‘pretty happy in general’* [Jorja], more frequent were references to perceived self-faults and dislikes (rather than likes), which had been learned (to the point of being seen as defining identity features) over time. This had implications for how their present-day mental health was identified and storied – in having learned to focus on more negative attributes and behaviours of self.

Providing further depth to participants’ relationships with themselves, also talked about was the physicality of MHWB experiences. Implicit in all conversations was an inherent sensory navigation of MHWB. Sight and sound were considered the most helpful senses in mapping mental state changes i.e., MHWB was implied as visible and audible. Whilst this applied in both positive and negative terms, the latter dominated and were more easily recognised than those for positive or everyday mental states. Most notable were references to *‘going quiet’* and becoming physically still as key changes facilitative of personal negative mental state recognition – whilst these elements appeared across the majority of the transcripts, Jorja’s description clearly exemplified the combining of the 2 aspects to create meaning:

“there’s days where I’ll just sit there ... I’ll just sit on the settee or lie in bed ... I’m just a lot more quiet.” [Jorja]

A further three important areas connecting the body to mental health, distress and/or wellbeing experiences were also described. First, across male and female participants, body features and image were frequently raised, in both positive and negative terms, though again the latter dominated. The noticing of personal physique, and attitudes toward that, were described as prompting (triggering) for current mental states. For example:

“I’m not very body positive at the minute and that is a massive trigger for my mental health” [Alex]

“there’s a lot of confidence issues around my body ... I’m bigger and it’s such a change over the past two years ... I can feel this extra roll [motions to body visually] has developed, and I’m just so conscious of it that when I do go out for a walk I’m like, ‘I don’t look like I should be out here anymore. I don’t feel confident anymore.’” [Gemma]

“I lost quite a bit of weight which made me feel better about myself.” [Pippa]

“I really don’t like the way I look and I feel like going to the gym and lifting weights and seeing visible changes to you physical stature is something that’s positive.” [Maguire]

Particular in such comments were references to noticed body-changes over time, the evaluations of which could prove impactful to levels of MHWB. Identification of weight gain was most often considered detrimental, whilst weight loss was commonly linked to more positive mental states.

Connected to this, ideas about and relationships with eating, food and nutrition were key elements in participants’ mental health, distress and wellbeing storytelling. Importantly, in this area descriptions emanated from all genders (there was not the perhaps expected dominance of female experiences). Consider the following (Appendix 14):

“the problem is it’s very impulsive ... I find comfort in food which [sighs] isn’t the best coping mechanism [but] it’s the best one I’ve had ... I’ve spoke with people, they’ve said, ‘look, it’s not the best, but if it’s a case of you ordering pizza or you in hospital, it’s pizza.’” [Dave]

“another toxic behaviour, not eating correctly. I don’t have the best relationship with food anyway. It was either I’d ignore it all day or I’d eat too much, and then I’d end up feeling really, really upset ... ever since 15, I know how many calories are in any of the foods, and when I’m in a bad place, I’ll just know and be like, ‘I don’t wanna eat that,’ ... I find food very tricky and complicated.” [Pippa]

“[we have] been making dinner with or for each other, which has been so nice ... just have a chat, make dinner. It makes me feel so much better than just eating something on my own.” [Sara]

Food and eating, beyond issues of body image, could be seen connected to issues of habit and self-control as well as comfort and self-care. Implicit across all stories was a knowing of how and what they *should* eat for optimal (mental) health, yet this was not always adhered to in personal practice. Overall, eating and food presented as a most complex and meaningful element to these individuals’ general MHWB.

A second bodily connection was identified in the storied experiences of physical injury. Those students engaged in sporting activities and teams particularly referenced physical injury as problematic for their MHWB (Appendix 14), though there were also references from non-sporting students:

“I used to be a keen [sportsman] but I suffered a really bad tear ... I was told that ... I need to give it a year or two to heal. I went back to training with the same team and it just never felt right. It’s never felt the same ... not being able to do something you enjoy [pause] is gutting.” [Dave]

“I went to step up the kerb and fell face first ... and opened a scar on my knee ... obviously I’m starting uni the next day and ... I was panicking, which is why I ended up wearing my dungarees so that it covered most of us [sic.], so people couldn’t see that I had fallen, even though I was limping ... I just panicked because I thought it was just typical of me to make an absolute fool of myself ... I worried about what they would think of us [sic.]” [Alex]

Such examples indicated not that the injury in itself was entirely the problem, but rather what the injury *meant* or *represented* could prompt difficulty and distress. None of the students who referenced physical injuries described positive mental and emotional outcomes after their experiences. Possible emotional and mental impacts of physical injury could be identified as relating to experiencing loss of/being

prevented from accessing something important to self and feeling embarrassed and open to the judgement of others.

Of third importance in reference to the physical elements included in participants' stories, as orienting features for mental health, distress and wellbeing, were gender specific experiences. These were particularly visible in accounts of students identifying as female:

“there’s a lot of things that women experience mental health wise that aren’t [participant emphasis] recognised, that are a women-only thing, and we think we’re making it up and we’re not. And I think that there are similar for men, if not worse because men don’t admit that they have mental health issues at all [participant emphasis].” [Gemma]

Implied through such a comment is a perception that in discussions on MHWB gender-related circumstances can be under-recognised and -appreciated. Other identifying-female students appeared to align with this sentiment, connecting repeated menstrual cycle mood patterns, hormonal fluctuations and even contraceptive use to their understanding and experience of MHWB:

“it is always influenced by my period, always, always, always ... when I was due on my period, I’d just cry over something. I wasn’t upset; it’d just be like nothing. Like something fell on the floor and I’d just cry [laughs] ... it was just I couldn’t control my hormones. I think it was just taking over.” [Nicola]

“I am one of those people who is very much like, ‘Women need to talk about periods and how much it affects their mental health.’ I’ll yell at people until they listen.” [Mia]

“things dramatically changed when I stopped taking the contraceptive pill ... I was like, ‘Oh my God, I’m not crazy and I don’t want to kill myself, it was just the pill’.” [Gemma]

Female participants' references to such aspects demonstrated these elements not only as directly influential to their mental and emotional states, but also the lack of recognition of them was indicated as problematic. Whilst the physical elements themselves were described as impactful, arguably hinted at as more so is a perceived lack of validation of these experiences as meaningful and mentally and emotionally

important. Such expressions served to further emphasise the overall significance of embodied understandings and identification of the students' MHWB experiences.

4.6. Macro-Level Threads

The fifth and final theme in this chapter concerns macro-level frames of reference underpinning and therefore overlapping with themes already presented. These macro-level perspectives relate to participants' awareness of general 'mental health narratives' (including stigma), as well as political and social circumstances perceived as mentally and emotionally impactful. Also significant were ideas regarding 'student' and 'university' as being embedded elements within their expected-life trajectories from early ages.

4.6a. Navigating Definitions

Implied were participants' relationships with the labels 'mental health', 'wellbeing', 'mental illness', et cetera. Ambiguous mental health language use/references from all participants suggested a lack of alignment with universal, concrete definitions and instead a variety of self-definitions being used to guide experiential understanding. It was conveyed that this was not consciously decided – rather it was a result of general confusion and lack of formal education regarding these labels. Interesting also were comments from students who held, or who had held, a mental health diagnosis:

“even though it is a chemical imbalance in the brain, I'd rather try and manage them chemicals meself [sic.] by creating the chemicals ... I've learnt how to cope over the years.” [Andrew, past diagnosis, re-diagnosed between Timepoint 1 and 2 interviews]

Andrew was clear about problems being caused by 'chemical brain imbalances', yet within his conversations he appeared to challenge this idea for himself. The medical appeared to provide a baseline from which personal modifications developed - creating an impression of individuals trying to figure out terminology, definitions and their attached associated ideas/meanings in relation to personal circumstances.

4.6b. Mental Health in the Media

Media-conveyed narratives were important to the students' personal understandings and navigations of MHWB – most often those encountered through social media. Learning from online media consumption presented in three ways. First, total exclusion of 'wellbeing' was apparent – wellbeing presented as an overlooked and indistinct concept in media coverage, and this was emphasised through participants' concentration on descriptions of their engagement with 'mental health posts' only. Second, there was realisation amongst participants of increased mental health media exposure in general. George, for example, as a participant self-declared as unfamiliar with the topic stated:

"I don't actually post often about mental health but I see a lot of posts about mental health itself." [George]

Even if personal sharing was not consistently engaged in, participants' awareness of mental health as a frequent topic of conversation was immense. In particular, the discernible attachment of mental health, distress and/or wellbeing experiences to annual, social-media-pushed 'marker days' were highlighted as repeated 'timepoints of power' with accompanying powerful narratives:

"it was up for 24 hours ... It was the 'OK to not be OK' thing." [George]

"I just always felt that I am so strong and now I feel like it's OK not to be OK." [Beryl]

"I always do a post on Mental Health Day ... just because obviously it is something that is important." [Alex]

"I always post stuff about Mental Health Day." [Mia]

Participants indicated that with labelled 'mental health days' came increased awareness of not only others' but their own personal emotional and mental states (in either positive or negative terms). Also apparently encouraged, alongside the momentary posting participation on these designated days, was a personal absorption of campaign hashtags as almost self-mantras to carry forward.

In extension to the perceived increased amount of 'mental health in the media', also

recognised was that the tone of that coverage referred mainly to widespread deterioration in mental states, particularly in young people. Lily's comment below encompasses an appraisal of social media mental health content expressed by other participants, namely that mental health is a term referring to *negative* experiences and that it is to be understood as a (growing) *problem*:

"It's definitely got worse, I see someone going missing on my Facebook every single day, and they're all like similar age to me ... clearly it's such a big problem, and there are a lot of people losing their lives [pause] way before their time." [Lily]

The third strand to students' talk on social media and mental health relates to the nature of their perceptions of and interactions with the content. Whilst some participants indicated that increased coverage was considered important, "a *good way of, say, keeping it in your mind*" [Dave], for some the blanket 'bad mental health' focus of social media content was identified as a source of difficulty in itself:

"social media can be toxic ... it's all [participant emphasis] negativity... everyone's so low, it's hard to find anything positive ... there's not much positivity around at all." [Andrew]

This may imply a want for more of a balance, positive *and* negative, in the public media framings of mental health. Considering this, two participant approaches were discernible. First, as in Andrew's case, deliberate choices to 'take breaks' from social media entirely were made after identification of their overall engagement with it as detrimental to their mental states. Second, deliberate appraisals regarding and choices about who and what to follow online were implemented. For example:

"I changed the whole content on my social media. I unfollowed a lot of accounts that made me feel bad, and followed some new ones" [Beryl]

The role of social media was not as clear cut as the common narrative line 'social media is bad for mental health' might convey; nuances in the individual-social media interaction need acknowledgement. Social media 'toxicity' in reference to mental health appeared connected to perceptions of media content on these topics as artificial. Participants described views regarding how mental health posts are and

should be constructed. In reference to the former, in these descriptions were critiques of social media content as either lacking depth or being obviously inauthentic. With regard to the latter, participants offered examples of the kind(s) of criteria they considered crucial for mental health content to be responsible and taken seriously, and in particular indicated was want for increased visibility for perspectives from those with lived experience. Lived experience appeared considered vital in determining the reliability and/or helpfulness of resources. The following three examples provided clear illustrations of these aspects. Lily, as student with a diagnosed mental health condition who was also studying a program including mental health-related topics, described her frustrations when working with a friend on a social media-hosted ‘mental health support account’. Pippa, angrily demonstrated how, based on in-physical-life and contradicting knowledge about the poster (a friend), public pronouncements on mental health could be rejected as fake constructions. Dave challenged the basis of broader mental health awareness campaigns, indicating a perspective of them as ‘band wagons’ lacking full acknowledgement of the reality of experiences:

“I’d love her to do the captions, I’m just better equipped knowledge-wise ... I was like ‘It’s nothing against you personally, I’m just ... gonna have more knowledge on the topic,’ especially because ... she doesn’t have any diagnosed mental illnesses, she hadn’t been through anything like that... I couldn’t have put something online that I didn’t agree with or wasn’t appropriate” [Lily]

“it just really grinds my gears because one of them shares stuff like ‘support your friends’ mental health’, and I’m like, ‘you’re the reason I literally had to go and see a therapist ... you’re the exact reason ... you’re spreading ‘oh my DMs are always open, I’m such a nice person, mental health matters’ and you literally made me feel like shit’.” [Pippa]

“although, yes, it’s now a more recognized thing, you have businesses posting, you have charities posting, it’s more of a trend across social media ... I feel like it’s more important to hear from people who suffer from this day-to-day. It’s alright Costa saying ‘Oh this is Mental Health Awareness Day, make sure you say hello to someone new or smile at someone, it could change their day,’ although that’s true, if you hear from someone else’s story, it creates a connection ... because I’ve been through the system loads and it’s something I battle with daily.” [Dave]

Such comments suggest that it is not perhaps what is seen/heard about mental health

in media forums that matters but rather how it might be conveyed, by whom and with what perceived purpose. When media content is deemed genuine, individual action may be encouraged:

“like [celebrity], I thought he was a genuine person ... he doesn’t make this thing up for what the camera wants to see. He’s just quite a genuine person, that’s why I thought true to his word about it, so that’s why I sort of followed his advice on what he was saying.” [George]

Implied through George’s case, a student not accustomed to or comfortable in talking publicly about mental health, was that the identification of authenticity in communication can be crucial to the encouragement and positive development of own literacy and actions. In contrast, participants suggested, where spuriousness or a *performance* of mental health is perceived, or even sensed, ignoring of the content as relevant or helpful to self is most likely the result.

In knowing how they themselves judge the authenticity of others’ content, there was indicated a degree of worry regarding how their own content would similarly be judged. Consider the following:

“there is a lot of stigma about mental health ... especially on social media, people thinking, ‘oh he’s attention seeking’ ... so I’m really hesitant to post things on social media ... I’ll limit what I will post onto a public platform.” [Dave, final year]

“I don’t want to be that person on social media who’s ‘oh look at me, I’m having the worst time.’ I’ve got some of them on social media and they’re annoying, and I don’t want to be that person.” [Charlotte]

Such comments imply personal wariness grounded in an awareness of general and persistent stigma, regardless of any public rhetoric to the contrary. Despite a want for more positive inclusion of mental health in their media platforms within which they could confidently participate, at an individual level there were visible self-restricting communication behaviours. Apparent overall was a continuing reticence in individuals in relation to their being entirely open where MHWB is concerned, due to feelings of insecurity regarding how their personal experiences might be received and judged by others.

4.6c. Pre-Enrolment Expectations of ‘Student’ and ‘University’

The last macro-thread concerns the participants’ perspectives of academia from ‘before and outside’. There was an embedded view of university institutions, and the associated properties and behaviours of their students, as normal and to-be-expected life experiences, indeed *the* goals to aim for. Regardless of age at which they entered university and indeed social and economic background statuses, presented were ideas about university as ubiquitous for individuals, beginning from early ages:

“I think I’ve always been there [pause] not fully knowing what uni was but being aware of what uni was from a really, really young age. I can remember wanting to go to Oxford Uni, but not knowing what Oxford Uni was. I just wanted to go to Oxford Uni ... Didn’t know what subject I was gonna study [laughs], didn’t know what Oxford Uni was, but I’d heard the prestige of it, so I wanted to go.” [Charlotte]

Charlotte continued her description by explaining how she now recognised that her pre-university expectations were built from the people around her, whether or not they had attended academic institutions themselves. The majority of the stories told, that grounded her expectation upon entering the institutions, emphasised the positive – what she would get from university, that it would manifest as a “*massive party*” [Charlotte]. In effect, Charlotte described herself as being encouraged to foster and embed within herself an “*idealistic picture of uni*” that would guide her as she moved into her institution. Charlotte’s description was mirrored in others’ accounts of how they came to learn about and what they came to expect from university.

4.7. Chapter Summary – Linking to the Student-Specific in SMHWB

Presented in this chapter has been the interpretive account of the overlapping themes comprising the first data area of these participants’ SMHWB, namely those derived from the broader context to these students’ lives. In positioning the participants as people as well as ‘just students’, the complexity of SMHWB and the necessity to consider wider conditions and experiences in individuals’ lives and personal timelines

is illuminated and emphasised. Responding to the research aims of exploring undergraduates' own accounts of events, circumstances, timepoints and triggers, the analysis identified the key across-life organising themes of 'Time'; 'Place and Space'; 'Loss(es)'; 'Relationships' and 'Macro-level Threads'. Within these, currently under-appreciated elements in reference to SMHWB were brought to the fore – these included the role of school experiences and media mental health conversations in shaping knowledge as well as expectations and actions, individuals' relationships with family, friends and notably animals, and impacts resulting from losses, (extending beyond bereavements). Altogether the data presented in this section provides important, needed and detailed grounding to the more student-role-specific facets of SMHWB, to which the subsequent chapter turns.

Chapter 5:
'University Life' – Students' Situation of Mental Health, Distress and Wellbeing Within University Settings and Experiences

5.1 Introduction

This chapter draws attention to the university-distinct, 'University Life', area of the participants' MHWB experiences. Presented here are where and how the students talked about elements particular to their university setting and student role. There were four themes developed: 'Institution-led mechanisms, systems and procedures', 'University-bordered relationships'; 'University as a mirror', and 'University-specific perceptions and expectations'. The sub-themes to these, and their explanations, are as follows:

(Table 10. Chapter 5 Theme Summary – 'University Life'.)

Theme	Sub-themes	Sub-theme Explanations
<i>Institution-led Mechanisms, Systems and Procedures</i>	<ul style="list-style-type: none"> • Experiences of University Mental Health and Wellbeing Support Mechanisms 	<ul style="list-style-type: none"> - Reputation(s) of University Mental Health and Wellbeing Support. - Gaining Access to University Mental Health and Wellbeing Support. - Direct-use Experiences
	<ul style="list-style-type: none"> • Mental Health and Wellbeing Connections to Programmes of Study 	<ul style="list-style-type: none"> - Means of Teaching and Learning: Placements, Online and Group Work. - (Meanings of) Assessment, Results and Feedback. - Course Content – Interest, Meaning, Relevance, Triggers and Coping.
	<ul style="list-style-type: none"> • 'Whole Institution' Elements (Time; Communication) 	<ul style="list-style-type: none"> - University as Provider of Structure and Routine. - Time Pressure and Juggling. - Explicit and Implicit Communication Experiences.
<i>University-bordered Relationships</i>	<ul style="list-style-type: none"> • With Staff 	<ul style="list-style-type: none"> - With Academic Teaching Staff - With Personal Tutors and Dissertation/Project Supervisors

		- With University Management
	• With Other Students	- Students' Union, Students Societies and Sport
University as a Mirror	<ul style="list-style-type: none"> • Material and Academic Preparedness • Magnified Self-Reflection on 'Normality' and 'Maturity' at University. • University as a Place to 'Bracket' Self. 	
University-specific Perceptions and Expectations	<ul style="list-style-type: none"> • Symbolic Meanings of 'University' and 'Student'. • 'The Student Experience' - Secure Ideas vs Time-Related Realities • Student Mental Distress and Deterioration in Wellbeing as 'Normal' and 'Expected'. • University as a Hindrance to 'Balanced' SMHWB. 	

(Table 10. Chapter 5 Theme Summary – 'University Life'.)

5.2. Institution-led Mechanisms, Systems and Procedures

Turning to the first theme of 'Institution-led Mechanisms, Systems and Procedures, in which students' identifications of SMHWB experiences connected to encounters with the formal operations within their university, participants concentrated on the following specific areas: 'Experiences of University Mental Health and Wellbeing Support Mechanisms'; 'Mental Health and Wellbeing Connections to Programmes of Study', and "Whole Institution' Elements.'

5.2a. University Mental Health and Wellbeing Support Mechanisms

Participants described their encounters with the university's formal mechanisms for SMHWB as (emotionally) complex interactions. These interactions were determined through both direct and 'hearsay' knowledge of the services. The sub-theme explanations are outlined as follows:

- Reputation(s) of University Mental Health and Wellbeing Support.
- Gaining Access to University Mental Health and Wellbeing Support.
- Direct-use Experiences

5.2a-1. Reputation(s) of University Support

Many participants drew attention to university SMHWB services reputation(s). Participants often contextualised their comments by referencing 'knowing' that SMHWB resources within universities are under pressure:

"I think things would have been a lot easier for me if I had support from the uni, but I do understand that it's all limited and that there's thousands of students and everyone needs support" [Amy]

Amy's employment of broader contextualisation as a means to lessen frustration at her personal experience was mirrored in other participants' accounts. Whilst declaring understanding that SMHWB provisions for students in general are under strain, amongst the participants was an overall view of their university's SMHWB support as lacking and mismatched with real need, even if they had not accessed them. There was a common perception of university SMHWB services being subject to massive demand and underfunding (Appendix 14). Student-peer service reviews were prioritised over institutional communication in shaping these perspectives and in deciding whether or not to engage with the services for themselves. On the whole emphasised were fixed-in-time and negative perceptions of university SMHWB support before actual access. Importantly, these reputational elements on many occasions culminated in individuals *not* seeking or accessing support.

Despite recognising the current pressures SMHWB support services face, participant described viewing them as difficult, unreliable, and potentially irrelevant. Lucy's description exemplified views expressed by several participants. Clear attention is drawn here to the multiple facets involved in and impacting upon an individual's relationship with university SMHWB support mechanisms, even before these are

actually accessed and experienced. Also indicated in the account is the key role of hearsay regarding services as potentially influential and preventative to a continued seeking of support:

"I tried to get on to the counselling at university and I filled out a form ... they replied saying that 'it'll be 12 weeks' and that was it ... they give (sic.) me some links for stuff to do ... but for me that just doesn't work ... It just felt pointless ... it made me feel like I didn't even want to try ... 'ineffective' is the [word] that comes to mind, 'brushed off', not very prioritised [giggle], that's what that felt like. It felt like ... just box ticking ... it's quite sad because a lot of universities at the minute are experiencing suicide rates. And I thought, 'well even though I've not explicitly stated on there that I'm going to harm myself, not everybody wants to explicitly state things like that to somebody who they don't know'... I'd rather actually build things up with someone before stating on a form that I feel like I'm gonna harm myself. Why would I want to do that? 'Cause I don't know what you're going to do with that information. For me it felt like unless you're on the brink of doing something seriously dangerous to yourself, you weren't prioritised. And I thought, 'well where's the increase[d] importance on wellbeing?' Not just rescuing you from a dark place but keeping you at a level place where you're not going to slip into that dark place. That's just not there ... I mean, I don't know what it's like when you actually get in there because I don't know anyone who's ever been in there, I don't know anyone who's ever got through the door ... The only people I know have paid for therapy privately, they've not actually got it through university so ..." [Lucy]

Views of the university SMHWB support offerings prior to actual access were described as developing via several channels. Most important were reviews of SMHWB support from current peers, as well as experiences of those who had already graduated:

"I know that they've been very supportive for a couple of my friends, but then on the other hand one of my other friends was put on a very long waiting list before he was able to speak to anybody. Yeah, so mixed." [Sara]

"I'd seen other people post things on Facebook about how it was not that great." [Isobel]

"my wife just says, 'Well that's [the] uni for you ... they're not much help.' She went through the support network and it was an absolute ... waste of time. It wasn't people qualified to deal with mental illness. These were volunteers that didn't really have a clue what's going on

in someone's life, not like a psychologist or a professional counsellor ... So that's one of the reasons why I'm saying I can manage on my own." [Andrew]¹⁷

Overall indicated was that personal assessment of support applicability or appropriateness for self may be determined based on what others have said about their SMHWB support services experiences. Other students appear as authoritative information sources regarding the *reality* of support mechanisms. What can apparently count most is the 'passing on' of direct student support experiences, regardless of any encouraging outlines of current SMHWB provisions proffered by a university. In reference to this last element in particular, consider the following extract. Gemma's description, referencing the university's own publicising of one service, reveals the distrust and scepticism produced. These were elements that drove her decision *not* to use the facility:

"I think there's that hotline but it's marketed as, 'Do you want to kill yourself? Call this hotline.' And it's like ... I'm really glad that we have service there for people who do want to talk to a stranger ... just get it off their chest, but, for me, that wouldn't help, that would make it more traumatic." [Gemma]

Across the interviews were two important features informing the reputation(s) of the SMHWB support services. First, SMHWB support mechanisms viewed as fixed and unchanging. Having a view of SMHWB support mechanisms as homogenous and incapable of meeting present needs appeared important in students' decisions as to whether or not they themselves engage. Second, implied was a dominant negative reputation of university SMHWB support services, despite some positive experiences – nonetheless focused on were the negative elements:

"[I] never got involved with uni's support system because I'd heard several stories that it just weren't (sic.) useful ... a few people I know that had tried to get involved ... had a reply, but it was basically useless ... I just heard one positive story ... she managed to get some counselling. But anyone else I'd spoken to hadn't given me any positive

¹⁷ Raised here is the role of false information in fuelling student knowledge and decision-making. Andrew's comment contains factually incorrect information regarding the SMHWB support services at his institution (volunteers have never been used to provide support), which have been used to construct a personal narrative/perception which prevents him from engaging himself. This issue shall be further considered in Chapter 7 (see Ch7: p. 281-2).

feedback. I didn't want to waste time going into a system that you wouldn't get anything out of. So that was the reason that I didn't go to the uni." [Maguire]

Overall implied was that greater numbers of negative reviews produce less certainty as to why to engage with support offerings personally, regardless of there being any positive account heard. Altogether these stories present a sense that there can exist major doubt as to whether the actual experience of university SMHWB support will be 'really worth it', the level of which can negatively influence any individual help-seeking decisions and/or action taken.

5.2a-2. Gaining Access to University Support

Participant accounts referred to SMHWB impacts stemming from their experiences of the university's process(es) to access support. Regardless of the form of support being sought (be it related to mental distress or for specific academic support where mental health concerns were a feature)¹⁸, there were common areas of impact in reference to the access process. These concerned, first, confusion and/or lack of knowledge regarding where and how to access support; second, students' judgements regarding support options (notably those provided by the university versus those in the NHS), and third, impacts derived from interactions with the services when trying to access the support. This latter aspect referred specifically to triage-communication/information-gathering experiences, having to evidence difficulties and thoughts about service judgement and responsiveness.

Turning to the first area, emotional difficulty arose from their being unaware or confused about the processes to access specific forms of support. There was a perception of their university as permitting of support seeking, yet vague in reference to guidance regarding physical access:

¹⁸ Important to mention is that the participants did not distinguish between the types of support and their accompanying access procedures at their university. Students appeared to conflate different services (i.e., those for mental health and wellbeing directly and those for university study reasons but where mental wellbeing featured for them e.g., in seeking personal extenuating circumstance extensions etc.).

“Sometimes I feel like they’re talking a lot about mental health but at the same time I’m not sure where should I go if I actually need any support.” [Beryl]

Feeling unsure in this way ultimately contributed to Beryl not seeking any university support.

A further level to the confusion issue was how accessing one university support mechanism does not guarantee complete knowledge of, or access to, what is available. In this regard the tension between student personal responsibility and university responsibility to provide clear information about support upfront was visible. Dave’s story, for example, implied too much of a need for student responsibility in uncovering different access procedures for different elements of support, due to a lack of both cohesiveness and clarity in the university’s accessing process:

“I feel with the university, unless you ask there’s not much guidance towards things ... I was going through my counselling and it was one of the first sessions ... they were talking about, ‘how does your mental health affect university, and is everything ok at university?’ I said, ‘well I’m struggling. I struggle with deadlines which build stress because I have weeks off university where I’m just physically too unwell to work.’ And they were like, ‘you are aware that mental health is a disability, there’s stuff in place?’ And I was like, ‘no, I’m fully unaware.’ And they said, ‘oh, well, meet with the DSSR or disability support counsellor or administrative staff and they’ll talk through some things with you.”
[Dave]

Whilst there may be arguments suggesting students *should* take full, personal responsibility in reference to (S)MHWB, that they *should* uncover for themselves how and where to access support, these students did raise the point that clear signposting can help in itself, especially when institutional rhetoric is encouraging of help-seeking. Implied by participants was that access to clear information and knowledge and support could potentially be a means to facilitate more individual agency in the matter.

The students’ judgements regarding other support options were important in engagement decision-making. Most significantly, examples drew attention to

comparisons with NHS support as influential. For instance, Nicola highlighted awareness of access to NHS-led support as being problematic in relation to that at her university, prompting her to 'go for' the latter first:

"[the doctor] did say, 'get in touch with your university.' But I'd already been in touch with them about the counselling service, just because the NHS one is months and months wait." [Nicola]

Within both the NHS and amongst students exists recognition that there are support-related advantages to being at university, and that students have access to resources for MHWB that the general public do not. This can consequently manifest in deliberate choices to access university support over any 'outside'. Whilst university support mechanisms were often deemed on the whole negative (See p.164-7), nonetheless determined was that they would be better than any sourced elsewhere, and that as students they were fortunate to have the options. Furthermore, there was present a sense of 'having to make the most' of the support in the time that they had as part of their university (as a student). Knowing specific university support exists, and that there is relatively easy access to it, can be seen as something not only appreciated and valued, but prompting of student engagement and action:

"I know there's other people who don't have the support and students are lucky that we have services" [Charlotte]

"if you've got services there, they're there for a reason. So I drain everything ... 'cause why not?" [Dolly]

The third access-related area described was triage-communication, service information-gathering, and service responsiveness. There was marked and visible dislike of writing and reiterating difficult experiences to unknown readers. It was emotionally problematic and could be distressing in itself, even if procedurally correct for the form of support sought. This was the case for accessing services and academic support relating to mental health difficulties (such as obtaining a disability report outlining accommodations to support the student):

"How do you email someone your deepest, darkest emotions and thoughts? ... You can't do that ... I couldn't write an email to a

psychologist when I was at my lowest point and explain what I was going through because I didn't know what I was going through ... So I've avoided the student support, because I just don't think it's fit for purpose for me." [Andrew]

"the writing out ... of how you're doing is a horrible experience. No-one's gonna enjoy it, explaining what you're going through, having to do it 2 or 3 times...it's like 'I don't wanna have to explain this again'." [Cherry]

"It was tough getting [the report] in the sense that I have to talk about emotions and stuff I don't like to do ... you have to talk on a really personal level about how this affects you day-to-day ... they weren't asking the questions like a counsellor will, like, 'how do you feel?' ... it was more like, 'why is this restricting you?' But that is difficult to talk about because it's talking about, 'oh because I can't look after myself', and you feel like, 'well am I less of a student?'" [Dave]

Participants also indicated negative emotional impacts stemming from the need to provide evidence to access support. This included mitigations such as requesting personal extenuating circumstances for individual academic deadlines and disability reports being granted:

"they were asking for proof of death, that ... really upset me. I know it was to process my attendance ... [but] I was like, 'she hasn't even got a death certificate yet' ... they were being a bit abrupt and pushy with that." [Anna]

"putting in your extension request, you have to put your reason in, show evidence, which I think's wrong, having to show a photograph of me (sic.) tablets ... it felt low of the low ... getting that email saying, 'Oh we need proof. Can you send us a photograph of your prescription?' I'm like, 'What?!'" [Andrew]

"Why do I have to get evidence that I'm sad? ... why do you have to see my prescription for this anti-panic attack medication? ... it made it feel a bit shameful because I didn't want people to know." [Pippa]

Regardless of the support sought, the common requirement to provide evidence was perceived by students as signifying 'you have to *prove* your problem' – interpreted was institutional invalidating disbelief regarding their support need. In relation to support for mental health situations specifically, implicit across stories was a

perception of student-problem descriptions as subject to hierarchical judgement by the university service staff:

“I used to tell people, even if they weren’t, and I know it’s horrendous, ‘even if you’re not suicidal, tick the suicidal box because you’ll be seen quicker.’” [Charlotte]

Implied was a perception that support access is more swiftly granted if a student’s circumstance is judged ‘serious’. ‘Experiencing crisis’ presented in these students’ comments as a main criterion they believed they needed to fulfil for guaranteed access to university mental health support. Having a perception of staff as ‘guided by crisis’ has further ramifications. For example, apparent in the participants’ accounts was a degree of fear about how their experiences might, or might *not*, be judged worthy of support. This was exacerbated by not knowing who would read the information sent in application for support. Though participants demonstrated understanding that their personal information and reasons for support-need would be used for resource allocation purposes, nevertheless indicated were negative emotional implications connected to being unaware of who would see their information, how their stories would actually be treated and engaged with during the access procedures.

The last identified difficulty prompted by the process of accessing university support was a perceived lack of responsiveness in the service(s). In the face of having had to engage in access processes requiring deeply personal information and evidence of distress, without full knowledge regarding how and by whom those details would be judged and handled, students also talked of frustrations at the lack of a timely response from the support services:

“they put me on the waiting list and I didn’t hear back from them until months and months later ... And then when they offered it to me, they said ‘if you no longer need it, just let us know’, so I said to them ‘I don’t need it anymore’ ... obviously that wasn’t very good [laughs].” [Amy]

“[SIGH] I know they're busy ... But I feel like they don't respond as fast as it says they should ... I've waited days for responses, to the point of where the issue that I've raised is no longer an issue anymore because it's gone past that.” [Alex]

“I applied for [extenuating circumstances] and they didn't give me it ... I emailed them and they were like, 'we're still processing it'. I only got it completely processed about 5 weeks after I already did the exam ... I messaged loads ... and they were all like, 'It'll be processed when it's processed,' ... I was already absolutely distraught after what happened ... so it really, really did upset me. I remember I was ringing my Mam, like 'Mam, the uni genuinely don't care.’” [Anna]

For these students, fostered through the access procedures appeared a replacement of hope with frustration, even anger, on the part of the help-seekers, many of whom conveyed a resulting regard of university support as unhelpful, irritating and even exacerbating of difficulty. Implied was that experiences of the access-to-support processes can actually result in the opposite of what they are supposed to facilitate and achieve.

5.2a-3. Direct Use Experiences

Descriptions of encounters with university SMHWB support mechanisms once access had been achieved appeared mixed. Some experiences prompted evaluations that they had *“gone above and beyond really”* [Lily] and that *“the support they offer is brilliant”* [Dave]. This excellence presented as being associated with elements such as the physical environment housing the services and relationships with specific (named) practitioners. Noted and appreciated was staff-initiated flexibility, for example how much support (how many sessions) could be accessed:

“[university mental health practitioner name], she has quite literally saved my life ... she's the best person I've ever had, of anyone I've spoken to about my mental health. She trumps all the people from the NHS that I've spoken [to] and she's been really valuable in [that] that's been the only consistent thing that I've had. She could've quite easily said 'sorry, you're allowed 6 sessions', but I almost felt like she cared, and it wasn't just a job that she had to do. I felt like she actually cared about me ... she's just very understanding and validates everything I say” [Lily]

Lily's account drew attention to the importance of consistency and feeling cared for and listened to. Dolly also highlighted consistency in support-related relationships as a university-specific feature enhancing the positive appraisal of her experience:

"[university counsellor name] was my counsellor last year as well. I requested to have her again, which I felt was a good thing. I don't know whether in [external support provider] you can do that but it's good to be able to get your old counsellor back, 'cause then you're not having to explain your situation every year to a different person." [Dolly]

The core of positive experiences of the university's SMHWB services were not solely related to curing or fixing difficulties, but rather the comfort and security created and sustained throughout support-relationship interactions. Feeling secure in the relationships facilitated students 'coming back to themselves'. Conveyed through these stories was that students may approach university support structures with collaborative ideals, wanting assistance to take self-responsibility in reference to their (S)MHWB. Feeling more knowledgeable about themselves and more in control of their own (S)MHWB *after* direct use of university support presented as important markers of services' success, giving students the opportunity to 'retake charge' of themselves:

"we spoke through everything. She got me to speak about things and that really helped me just come to terms with stuff. I'd never done anything like that before. I'd never been to see a counsellor. I do feel like it really did help because ... I needed to go through it for myself ... I needed to realise it myself that I would be fine ... the counselling sessions just really helped with that realisation." [Nicola]

"I really appreciated what uni did because they helped me to recognise that this is something I needed to go and fix on my own." [Gemma]

Turning to more negative experiences relating to university support, expressed were frustrated views of university offerings as inappropriate or irrelevant for the students' needs, seen as generic to the point of being unhelpful: *"[the services] they don't know anything specific about what I'm asking."* [Gemma]. Visible was frustration at the general, non-tailored nature of advice proffered and a lack of swift-to-reach face-to-face support options:

“Some of them were ... ‘exercise is so good for you, go for a walk every day. Go for a run’ [pause] [shouts] No! [sigh]” [Bobbi]¹⁹

“I was like, ‘Honestly, if you extend my deadline, all I’ll do is not do anymore work for another week ... Don’t extend my deadline because it’ll just make it worse.’” [Mia]

“we had an email through, and it had all these links about mental health, and it’s like, ‘Well, that’s the problem ... you sent an email with links’ ... mental health’s not about reading a pamphlet, reading a website ... to get help you’ve got to have somebody to speak to.” [Andrew]

Cumulatively presented was a general sense of the services as not meeting individuals’ expectations, i.e., that students’ interactions with and judgements of university support can be heavily guided by existing ideas about what they *want* from support, what it *should* look like and do. Particularly noticeable in this regard were multiple student references to the emphasis on crisis in university services:

‘there’s so few [university] services between information, in terms of a leaflet, ‘What is Depression? What is anxiety?’ and crisis. There’s nothing in between ... There’s no one there for the middle. You’re either finding out about it, or you’re at crisis.’ [Charlotte]

Such a comment draws attention to an apparent mismatch between the students and the university in reference to the (expected and wanted) when and what of support. This perceived lack of connection between the support mechanisms and individual reality also stemmed from ideas about the types of problems the university services were/are able (and willing) to help with. Ascertained by students was inability to respond to ‘serious’ problems, but more importantly a lack of ability to accommodate individuality of/in mental health experience:

“I had one session and I was deemed too complicated for university services. [LAUGH]... I kind of just said everything, what was going on and just laid everything out ... And she just went, ‘I don’t think we’re the best for you, you need [therapy type] ... we don’t offer it here, I can

¹⁹ Important in reference to Bobbi’s circumstance is the added facet that she has a physical condition diagnosis which further fuels the frustration when ‘general’ advice is given, advice that does not recognise her physical impairment.

email you a link to go private. We're here if you want to talk, but realistically we're not going to help.' Sound. [LAUGH] Walked out ... that was a very off-putting thing ... I do get they're not qualified probably enough for my brain ... They deal with, not normal experiences, that's undermining everyone else, but it's not a normal one ... I get it's not, it's just ... wasn't the best." [Charlotte]

Pippa too recounted an experience of feeling dismissed, leading her to disengage with (seeking) university support:

"got one session with a lady who concluded that I had just been bullied and it wasn't really an issue, and I wasn't really in a bad place, I wasn't having panic attacks, I was just upset because I wasn't used to being at uni. So that put me off talking to anyone ... [she] discouraged me from trying to come back because, 'do you want to waste them [allocated number of sessions] on crying over little girl problems?' She didn't say it like that, but it's how it felt. And that's why I did not want to talk about my mental health for ages because it got reduced down to, in my head, being, 'this is just a silly girl problem.'" [Pippa]

5.2b. MHWB Connections to Programmes of Study

Alongside the systems and procedures institutionally labelled as being for student pastoral support, students drew attention to other formal elements of their university lives in which their mental states mattered or were impacted. Across transcripts was an apparent plea to increase consideration of students' emotional health in teaching and learning university activities. The sub-theme explanation aspects to this sub-theme are as follows:

- Means of Teaching and Learning: Placements, Online and Group Work.
- (Meanings of) Assessment, Results and Feedback.
- Course Content – Interest, Meaning, Relevance, Triggers and Coping.

5.2b-1. Means of Teaching and Learning

A key theme was the impacts that methods of teaching and learning had on SMHWB, in three specific areas: placement-related issues; ambivalent relationships with online learning, and experiences connected with group work.

5.2b-1a. Placements

“I guess pretty much all of the issues I’ve had, good or bad, have been based around my placement.” [Isobel]

All the students who recounted placement stories described experiencing, to cite Alex, “a rollercoaster of emotions.” Emotion and mental states were described as subject to sudden and extreme positive and negative changes across the course of a placement. The value and appreciation of placements was felt - Alex expressed how she, “love[s] placement... it is one of the times where I feel most at home within the university year,” whilst Sara noted that once the initial “big shock to the system” dissipated, “you go on and get used to it and it’s what you want to do, [and] it [has] a really positive impact.” Participants reflected that placements facilitated confidence-building, senses of belonging and personal achievement.

However, students did indicate that having to engage in a placement could prompt negative stress through workplace pressures (e.g., difficult relationships with mentors), time-related impacts (e.g., dramatic changes to routine, geographical distance) and increased financial difficulties (e.g., requirements to juggle paid employment alongside, (Appendix 14)). Placements were also described as experiences leading to students identifying problems relating to their university. Perceptions of university as under-appreciative of how scary placements might be (due perceptions of them as vital for life and careers post-university) were implied. Also suggested was that embedded but unacknowledged university cultural biases and assumptions could surface as placements were sought, contributing to feelings of personal inadequacy and insignificance:

“it was so stressful because they didn’t say, ‘Sixty percent of you won’t get a placement, don’t worry about it ... You won’t fail your course ... it’s not bad if you don’t get a placement.’ ... instead it was just, ‘You have to look for this placement. You have to find it now. If you don’t find it, you’re a terrible person.’ Basically, in my head that’s how it translated ... they show you all the success stories, but they don’t say, ‘okay, sixty-seven percent of you didn’t get a placement and that’s okay’ ... and then when you don’t get a placement, it’s like, ‘oh my god,

*I'm worthless. My [course work] are so crap'... It made me feel like utter shit because I was like, 'I'm not good enough. No one wants me. I'm never gonna be able to succeed in this.' And then you watch all of these other people go off and you don't realise at the time, [only] later, that their parent worked for [company]; that's why they got that placement. Not because they're better than you, but because they knew someone ... and it's like, 'well **of course** [participant emphasis] they got that placement.' That's fine, but it's not made clear by the lecturers that there is that unbalance (sic.) ... So the whole placement thing just made me so anxious and feel so worthless ... I felt like utter shit [laughs] and they don't really help you with that feeling. And they don't really acknowledge that you have that feeling." [Gemma]*

Once a placement is underway, the students' relationships with and needs from the university can intensify. Reported were experiences of feeling 'forgotten' as a consequence of how placements emphasised their status as neither 'worker' nor 'student', and recalled was staff confusion regarding where duty for a student's care lay:

"there's always a confusion of where the responsibility for students lies, is it with the [organisation] or the university? ... it was frustrating ... even when I had to isolate, the university told me to speak to the [organisation]'s occupational health and they were like, 'you need to talk to the university' ... I ended up isolating anyway 'cause I was like, 'I don't know what to do' ... it's irritating that no-one really properly takes responsibility for [us]." [Isobel]

Students working towards professional award degrees implied an institutional under-appreciation and overlooking of how programmes including placements can be emotionally difficult because they do not align with ideas about what 'normal' student life and 'The Student Experience' are/should be (as portrayed within wider narratives):

"I feel like a lot of people don't realise that we do the job of a [role]. [pause] [becoming tearful] ... we're ... treated like all other students but ... I don't think you can just treat us like other students ... we had to do the same amount of credits as other students in half the time, because the other half of my time was spent on placement ... and when I'm actually on placement, you've got extra stuff, which doesn't count towards your overall grade and you don't get any credits for it ... so it was almost like triple the workload of other students, which I felt a lot of people didn't understand." [Isobel]

Offered here was emotional expression of a want for recognition for the diversity of students' course-demands and experiences. Regardless of what placements (as a means of teaching/learning) could *do* for the students – in terms of confidence and practical skills for their career, et cetera – students felt left alone to navigate unanticipated difficulties. Institutional non-acknowledgement of the variation and individuality in reference to placements was indicated as a potential source of mental deterioration and distress.

5.2b-1b. Online

Online provision proved another mode of teaching and learning to which specific attention was drawn by participants. The COVID-19 pandemic prompted the students to reflect on the experience of teaching and learning at distance and the SMHWB impacts of teaching and learning online more broadly. There was no decisive position from participants as to whether online teaching and learning was good or bad for SMHWB. All participants, regardless of their own position, identified that “*some people hate it*” [Cherry]. References were made to levels of students' technological skills and literacy; institutional acknowledgement of individual needs and circumstances; students' abilities to control the where and when of their studies, and how interactive with and connected to other students they felt when online. Specifically, extensive screentime; technological confusion/unfamiliarity; reduced interactivity and physical movement, and exacerbation of difficulties for those with specific learning needs were referenced as problematic for SMHWB:

“I was really struggling with the online aspect of learning, sitting at my desk in my house, looking at my computer ... watching lectures and not being able to take part, I think was a big issue that I had.”
[Bobbi]

“no one on my course likes using the microphone feature ... so then we all type up what we’re trying to say, and I feel that’s very pressured ... like, do other people get what I’m trying to say ... does that make sense? ... I’ve had to email my lecturers, like, ‘I am trying to engage, but sometimes you move on too quickly or start pressuring everyone and I can’t write as quick as other people can because my dyslexia doesn’t let me. [LAUGH]” [Pippa]

Conversely, more positive associations made between SMHWB and online teaching and learning were a sense of personal power and choice, such as enabling them to decide for themselves when to study. The examples below came from students both with and without mental health diagnoses:

“I weirdly love it ‘cause once they upload the lectures ... you can do them whenever ... I’ve got more time and I feel more in control of what’s going on.” [Cherry]

“I’ve actually probably benefited from it ‘cause ... I can do my own timetable ... I can work at my own speed; I can stop lectures and rewind them and write notes when I want to ... I think that’s actually been really good for me.” [Lucy]

“I do think that online uni has suited me a lot better than face-to-face ... that has almost been a blessing for me because it means that I can have my own schedule. I don’t have to plan my days around external things, I can do things in my own time.” [Lily]

These examples imply that the modes of teaching and learning employed in universities can impact upon SMHWB based on how they come to reduce or empower students’ ability to retain power over their own time.

Overall, both negative and positive SMHWB impacts of online teaching and learning were identified. Given the lack of consensus, what appeared most important was not the overt detail, but the undercurrents and meanings conveyed. Emphasised was not the technological employment in isolation but rather how this interacted with individual circumstances and needs.

5.2b-1c. Group Work

From an institutional perspective, group work as a mode of course delivery is popular, given the perceived ability of it to foster peer-to-peer discussion and collaboration. However, students spoke of group work as pressurising due to students' university-peer relationships. Highlighted were group work situations as sites of challenge for students to 'be themselves'. Group work could intensify negative mental states because layered on top of academic requirements appear social pressures to perform in certain ways. Wanting to engage academically could be seen as conflicting with students' desires for social belonging whilst at university. In essence, group work settings could be seen as locations where different definitions of 'student' can collide in a problematic way for individuals. Lucy, for instance, identified group work as a particular area of her student experience where she felt pushed toward personal inauthenticity:

"I don't think I can think of an experience at university where I felt I couldn't be myself, maybe only in group work experiences, where people just want you to perform a certain role and that's it ... I didn't know the people from Adam before I met them ... I felt like I had to hide my personality a little bit. I had to water myself down in order to fit in, and not cause too much of a scene with certain ideas that I had about research ... I wouldn't really voice my opinion because I didn't want to be that person that's too opinionated in a group experience ... I'll feel a little bit uneasy, or I'll just be as appealing as possible just to get through it and we'll get the mark." [Lucy]

Whilst positive SMHWB stories connected with group work did not appear, there were examples where the students pointed to acceptance of the inability to change the institutional requirement and moving to 'make it work' for themselves. Demonstrated were (individual) strategies employed to cope with group work situations and the peer-to-peer relationship pressures experienced. Dave, as one example, (and as a student currently awaiting a mental health diagnosis and engaging in therapy), described how he responded to a group work requirement, already appreciating that the situation would be "*daunting*" for him:

"I made a point at the first meeting, and it's the hardest thing to do, to say, 'look, sorry guys, but I do suffer from mental health issues', or sometimes I might say 'depression,' or something, 'and there will be days where I can't work or I might not feel comfortable attending a

meeting or work might be pushed back a little bit. I'll apologise in advance now and obviously I'll do my best'." [Dave]

Although Dave's account at first could appear proactive, there is arguably a negative undertone to his account; the institutional requirement of group work, implemented without reference to the wider contexts of students' lives, could bring with it necessity to self-disclose mental difficulties. There was a general impression of group work as often imposed and lacking accommodations or flexibility for individual circumstances. This in turn could be seen as prompting stress, resulting in students feeling pushed into implementing personal strategies to mitigate emotional difficulty.

5.2b-2. (Meanings of) Assessment, Results and Feedback

Inherent to a university experience is the evaluation of students' learning. Significant was that any experienced difficulty did not appear directly related to the assessments, results or feedback themselves but rather concerned the contexts in which they occurred, and the meanings attached to them by individuals.

Turning first to assessments as connected to SMHWB, all references pooled into two interweaving strands – time and format. Focusing on present-day experiences, described was both individual and communally-experienced intense pressure, stress and even distress as a consequence of institutional assessment timetabling. The latter often leads to students having simultaneous deadlines, which in turn were described as prompting self-doubt, self-neglect, and poorer SMHWB:

"you normally have a big batch of deadlines due in ... everyone's stressed ... the extra stress of all the deadlines can create a little bit too much, and it's when things start to get too much that my self-care slips - I'm not cooking, it's easier to binge-eat mass amounts of junk food. And then in terms of cutting ... I take my anger out on my arm with a knife or something." [Dave]

Whilst Dave's comment referred to his current experiences connected with assessments, also indicated in his account was an already established behaviour pattern in himself. Indeed, historical assessment experiences were referred to by

many of the participants as setters of personal (SMHWB) expectations for present situations. Negative assessment experiences were foregrounded, providing foundation for considering current or approaching assessments as 'bad' in reference to SMHWB. Raised also was a suggestion of students having developed across time 'an assessment self' – most of the students retained views developed before university regarding which format(s) of assessment were emotionally better (or not) for themselves. Most common were descriptions of examinations as the format most likely to prompt most negative feeling due to time pressures as well as feelings of physical restriction:

"I don't do exams well. They're too stressful. I don't have the best concentration ever and I have to move. I hate being trapped ... if I can't move, I don't like it. ... when I do essays, when I've got deadlines, I walk constantly ... Exams I can't do. I can't do them, I can't hack them, I can't sit still, I can't sit quiet, I have to have music on, I can't concentrate, the second I walk in that door I forget things ... deadlines, they are stressful, don't get me wrong, but I don't panic like I do in an exam." [Charlotte]

Here, again, an implied importance of prior experiences in shaping negative expectations and worries about assessments in the present day was also clear. Altogether, then, emphasised in accounts was that an amalgamation of time and format factors can prompt a linking of negative SMHWB with assessments.

Moving beyond the assessments themselves, participants also drew attention to SMHWB experiences as connected to their results. Students spoke about specifics such as worries whilst waiting for and imagining grade outcomes (Appendix 14) as well as emotional reactions once in receipt of their actual awards. Academic performance and achievement (made visible by assessment outcomes) were described as a means through which an individual assessed whether or not university had been 'the right thing' for them. Where awarded grades and feedback were deemed inadequate for themselves, negative impacts on SMHWB were described.:

"getting a good grade reinforces the fact that I've made the right choice by coming to uni. But that first one ... I spent all that week wondering if I'd made the right choice. I was like, 'I've made a horrible life decision."

I'm not good at this.' ... I was in danger of being in like full-on spiral mode." [Mia]

"there was a few times where there was [feedback] comments made that really impacted on me and I think I spent ... especially the last four weeks ... in total turmoil inside ... [it] really made us (sic) question myself, question whether or not I was doing the right career." [Alex]

As with talk regarding assessments, key again in references to results were the themes of time and format. In relation to the former, for example, many participants indicated results as powerful in their ability to denote an individual's state of being at both single moments and across time, often considered as visible evidence of personal emotional state and development:

"you can see [participant emphasis] it in the grades ... you can absolutely see the difference in the work between the year that they [my parents] were getting divorced and the end of third year and this year. You can absolutely see [participant emphasis] it." [Gemma]

Suggested through such a comment might be that assessment results can provide a tangible means for an individual to understand their own (S)MHWB across time.

The significance of results in relation to SMHWB, therefore, can lie beyond individual assessments and their outcomes. Single results may not be taken at face value or considered in isolation; results have personal meaning, especially when they are considered through a personal life-course perspective. Importantly, this concerns examination of and reaction to result achievements in light of other life circumstances. Results can function as personal triggers, either positively or (most often) negatively, considering preceding experiences. Whilst this can relate to worries about the future, i.e., needing to *"work on your grades in the first semester, so they're not too bad for the second semester"* [Beryl], in these accounts focus fell heavily on influences from personal pasts. For example, Cherry described using her grades to judge herself in relation to pre-university ideas of herself, whilst Dave spoke of the interaction between university-assessment results and his experience of childhood trauma:

"loved my first year but I just always think that I can do better than what I'm doing because I used to be better at things ... I wasn't failing or

anything but compared to work that I know I can do, it wasn't up to scratch." [Cherry]

"The trauma that all this relates to is well before university. It was while I was growing up as a child.... it does affect my university because it's damaged my confidence. Whenever I get a low mark, I do struggle. It does rear its head ... So, a bad mark will always be demoralising to a student, but for me it hits twice as hard because of all the other things ... in the time and the moment, because of the trauma, I see the red marking as 'done bad', not 'where you can improve', just 'what is not good enough'. And at the time it can create the stress that I'm not good enough, I'm not great." [Dave]

The point indicated by these participants amongst others was that in reference to SMHWB what matters is not necessarily what an assessment result *is*, but rather what it might *mean* in the broader context of their pre- and during university lives and experiences.

Alongside time-related elements, further facets of results' meaningfulness were connected to feedback format. SMHWB could be seen as relating to number symbolism and language. With regard to the former, conveyed was a sense of there being results (numbers) a student should feel bad about receiving, and others granting permission to feel personally good. The latter could be problematic through perceived 'harshness' in tone or the production of confusion and uncertainty. Both formats, though, were described as gateways into non-academic self-assessment and critique.

In reference to numerical results, highlighted was how university number-grades symbolise different things to different individuals, regardless of their objective institutional definition. Subsequently prompted are different emotional reactions upon receipt of numbered results. Also indicated was that students can oscillate at best, lurch at worst, between emotional extremes as a consequence of loaded personal meanings behind different numbers achieved within academic years. Apparent was strong emphasis on numbered results as *either* good *or* bad – there was no indication given of middle ground, something that has implications for the emotional responses experienced (students appeared able to only recognise *either* happiness/pride *or* sadness/frustration in their accounts) (Appendix 14). Maguire, as one example,

illustrated this through describing his reaction to two different number-results. Regardless of his numerical results as all objectively acceptable (as per institution definitions), what they symbolised to him personally was key:

“just seeing that number ... when you’ve put so many hours into something and it’s a 55. You’re just like urgh. That makes you feel so annoyed ... even though you’re putting the hours in, you’re not getting those grades back and that weighs on my mind a lot.”

“when I got my 67 on the essay, that was a really great feeling ... that is just something that I’m so proud about, that sort of positiveness that you can share with friends and even with Mum and Dad - ‘Mum, I nearly got a first!’”

Similar personal, emotional meanings were applied to the wording and tone of written feedback. The focus was on negative experiences upon initial receipt of feedback reports. Abrupt tone and confusing information were cited as the most problematic elements, these leading to reduced confidence and increased self-doubt. However, notable were comments that this opening (reactive) negativity could be mitigated through in-person discussion and clarification with markers. It is worth here recounting Alex’s experience as a detailed example:

“I ended up submitting it late, but I emailed my lecturer to tell her and she was like, ‘it’s fine, don’t worry about it’ ... But when I got it back, the feedback that I got was very critical. It was very harsh ... so critical and so blunt. It was ... hard for me to take and I didn’t [pause] take it well. I got very down about it, and it knocked my confidence massively ... because everything that was in the feedback was stuff I’d never been pulled up on before ... It was like, ‘my last assignment ... got 68 - how has that assignment got 68, but this one has only got 30-odd? And I’ve been pulled up on all this when in previous ones it’s never been pulled?’ ... it really knocked us for six ... And then when I spoke to her [the marker] ... She was very nice about it, and it wasn’t harsh, and it wasn’t critical. And she did give me a lot of points that I needed to improve on, but it wasn’t done in the way that her written feedback was ... it was like battling with this opposite [LAUGH] thing of, ‘eh?!’ ... it really was hard to get my head around ... I got very confused.” [Alex]

Inflection and level of clarity can be seen here as central and triggering to the student’s emotional response to written feedback. Also important, however, is the previous context of the student’s work and relationships with staff. Thus, written

feedback criticism of unexpected elements (as determined by the recent history of their submissions and results) left the student feeling almost disoriented. Similarly, where the written timbre of feedback did not match the in-person, spoken communication the student was accustomed to, again, prompted was the student to feel perplexed, having to manage emotional responses they had not expected to be confronted with in reference to their assessment outcome.

Taking together the time- and format-related interactions associated with assessments, results and feedback described in these interviews, there would appear need to move away from thinking about SMHWB impacts of these elements solely in terms of single, isolated moments. Rather, what assessment, results and feedback *mean* to/for individual students in their wider self-contexts can be what drives the emotional responses and (often negative) SMHWB identification.

5.2b-3. Course Content - Interest, Meaning, Relevance, Triggers, Coping

A final element of programmes of study the participants connected to their SMHWB concerned the course-content experienced. Content was described in terms of personal interest, meaning and relevance; spoken of as tool for personal coping and noted in reference to its ability to trigger (positively or negatively) emotional reactions.

First, SMHWB was linked to individuals' perceptions and judgements of 'interesting' content. Whilst it could be easy to dismiss as 'childish' students' connection of study-interest to ideas about SMHWB, the stories elicited here asked for this to be reconsidered. Curriculum and content did matter for these students, because 'interesting' as a label appeared as also involving matters of personal emotional investment, meaningfulness, and relevance – ideas about 'interesting content' did not simply refer to boredom prevention or consumerist-want-for-entertainment satisfaction. Across participants' varied degree programmes, talk about their interest in content referred to feelings of inspiration, motivation, and control, all of which presented as positive elements of their SMHWB:

“if the content’s good and it’s engaging you then it could impact in a really positive way” [Maguire]

“whenever it’s a topic that I’m really interested about, it makes me excited to learn, so I don’t get as stressed out ... it doesn’t trigger my mental health negatively because I’m enjoying what I’m learning.” [Anna]

“Doing something that you want to do rather than being forced to ... I do think it’s important to do something that you actually are interested in doing, otherwise you just feel like ‘what’s the point?’. It feels a bit pointless if you don’t care about the content. If the content feels frivolous, or like it’s just gap filling ... if it’s not very exciting ... I would say that’d then make you feel like you don’t want to do it and you don’t wanna carry on, which’ll impact your mental health.” [Lucy]

The importance of these secondary ripples from ‘interesting content’ was made further visible in two particular ways. First, common in students’ accounts were pre-existing and deep relationships with their chosen subjects of study overall. Conveyed in absolute terms were long-time held commitments to and emotional investments in the content of their degrees. Some chose their study content based entirely on meaningful subjective experiences. Several students described having **“always [participant emphasis] wanted to do [this]”** [Anna], not having back-up plans in place and considering themselves failures if they did not achieve as wanted in the content-field chosen (Appendix 14). Such was the apparent strength of these commitments that content of study appeared emotionally meaningful to them and positive for their SMHWP before courses even started. As such any challenge presented during actual study, such as that posed by ‘uninteresting content’, could present as difficult for students and their mental states. Consequently, negative accounts of SMHWP could be discerned when content expectations were not realised in classes or assignments.

Second, interest as interconnected with ideas of personal relevancy were indicated through talk about imagined post-university lives. Indicated was a want to experience course content explicitly linked to individual future ambitions. Where content appeared to students as lacking in relevancy and employability value, negative SMHWP was often described. If study content presented as relevant in such a way as to suggest career security, reassurance and confidence could be achieved, an

individual's sense of their SMHWP appeared improved, despite the overall workload feeling stressful:

*"I was so inspired by the project because it was very current. I got so stuck in ... That one project brought me back from the brink, and it was like, 'you **can** [participant emphasis] do this. You **are** [participant emphasis] good at this' ... it really helped me to feel better [pause]. I didn't know what it was at the time that was making me feel better, but now I know that it was that project and the fact that I could get stuck into it, and that I was working on something that was meaningful and that made a difference. It was real." [Gemma]*

"the content of the course is really good. What we've got to do is really relevant to what we need for making us into [professionals]. I don't have any issue with it - I think it's just the stress of the amount of things that we have to do ... The content itself is all really relevant." [Alex]

Overall, expressions connecting SMHWP to 'uninteresting' course content presented here as concerns about being able to fulfil personal ambition (in the present and future). Being able to study personally meaningful and relevant content was indicated as a conduit to good SMHWP.

Content of study as a form of mental distress prevention tool was also conveyed. Participants recounted how they found that course content could tangentially help foster practical knowledge and skills valuable for own SMHWP management, especially students engaged on health and education-related courses. Such comments from the students' perspective bring to the fore questions regarding how MHP topics might be embedded alongside study content across all subjects within degree programs:

"[self-reflection] it's something that I've had to learn how to do, because I didn't originally do it. Uni has helped ... we have to reflect on our own practice in uni ... that has worked for me in terms of thinking about my mental health, thinking about how I deal with it and then improving on it ... because of the reading that I'm doing and because of the strategies I'm looking up, I'm kind of broadening my own mental health in that sense. And it's becoming better because I'm more aware and I'm more informed on how to deal with it." [Alex]

“one of the modules I were (sic.) doing at the time was great ... it was enjoyable to learn [about mental health related content] and think about applying [it] to myself really.” [Cherry]

“quite a lot of the [course] articles that we've read about have made me realise that I need to give myself those breaks and need to not run myself into the ground ... it's been a bit of a learning curve, but weirdly my degree is actually helping quite a lot with that.” [Mia]

The third and final element in which students linked SMHWB experiences to course content presented in talk about ‘triggering’. This was an element raised notably by those studying on professionally-oriented courses, though some students on ‘traditional’ academic courses also mentioned the issue. Some comments implied certain topics as inherently problematic, such as death, sexual assault, child abuse. Also implied was a want for recognition of students as having limited life experiences (especially younger students) which might lead to adverse reactions to content. Several students, for instance, presented as concerned about possible negative emotional impacts after exposure to unfamiliar and/or unexpected potentially distressing content in lectures:

“even people who have good mental health, who've never really suffered with depression or anxiety or mental illness, they might come on to the course bright-eyed, bushy-tailed, never had a problem, and then they start learning about things like rape, child rape, forced marriage, murder [chuckles]. It's not a course you do if you're not wanting to deal with stuff like that.” [Dolly]

However, whilst the participants presented as universally wary of ‘triggering content’, some suggested that blanket assumptions regarding students’ responses to (potentially) sensitive material should not be made. Such instances of individual response to course content do indicate an unseen element to content ‘triggering’ in reference to university settings. In these stories, negative emotional reactions to study content were commonly hidden from lecturing staff. Furthermore, apparent was unwillingness in the students’ themselves to speak to their academic staff of having been (negatively) ‘triggered’. Whilst recognising not all individual-student responses to content can be anticipated, nonetheless there appeared a preference for academic staff proactivity to ‘prepare’ students for (potentially) difficult content. Recounted, in

particular by students engaged on health-related courses, was appreciation for university staff implementing pre-teaching ‘trigger warnings’ which they equated to institutional acknowledgement of the possibility of student emotional connectedness and reaction to content. In turn, participants also considered them a form of visible marker of genuine care and support on the part of academic staff (Appendix 14):

“at the beginning of a lecture, when they say, ‘oh this may upset you,’ then I can prepare myself a little bit.” [Isobel]

“I don’t mind stuff if I’ve been prepared for it. Even if they were going to do like ‘a week about eating disorders’, I would go [SIGH] ‘Ok,’ and I would be able to email the tutors and go, ‘Hi, just a heads-up, if I bail out of the session at any point, it’s because of this,’ and I can give them a warning and I’m pre-warned. But if they suddenly started talking about eating disorders in the class and I wasn’t expecting it, I’d feel a bit blind-sided.” [Mia]

Taking together the three strands within which SMHWB was connected with content of study, participants here demonstrated this relationship as complex. The nature of and meaning within students’ relationships with their degree topics cannot be assumed. Content connections with SMHWB were identified as revolving around integrations of personal life experiences and expectations into university life. Also suggested was that students employ content as a means through which to gauge university levels of care and acknowledgment of student individuality.

5.2c. ‘Whole Institution’ Elements

The final element in which institution-led mechanisms, systems and procedures were referenced concerned macro-facets of the institution. Students highlighted particular elements of their university at ‘whole institutional level’; the sub-theme explanation aspects to this sub-theme are as follows:

- University as Provider of Structure and Routine.
- Time Pressures and Juggling.
- Explicit and Implicit Communication Experiences.

5.2c-1. University - Provider of Structure and Routine

Students' spoke of an underlying need for structure and routine, and how this was crucial for positive SMHWB. University for many participants was identified as a means of limiting emotional difficulty through its providing a specific focus for mental as well as physical activity (Appendix 14). Ideas about university-as-structure/routine importance in relation to SMHWB were noticeable in stories about altered physical elements and schedules introduced in response to the COVID-19 pandemic (Appendix 14) – however even outside the pandemic context students appeared to think and talk about their academic institution as a site of grounding for themselves. University structures and routines could present as a shock to new students, (with time needed to become familiar with them), and full timetables and frequent deadlines could prompt initial apprehension and 'panic' (Appendix 14). However, ultimately presented was learned appreciation for university as a provider of targets to aim for and work towards. University requirements were described as providing a baseline structure around which students could implement their own routine strategies, such as setting their own deadlines to ensure they met the university specified ones (Appendix 14). Using university requirements/deadlines for orientation and action was described as means through which to justify self-confidence, -praise and -positivity:

“when I get told the assignment ... I start doing little bits every day [that] make me think that I'm on track ... And then after an assignment, I'm quite pleased that I've done it 'cause I [think], 'You did it. It's in the timeline and that was down to you managing your time properly'.”
[George]

“At first, they [deadlines] terrified me, but now I look at them, they're just a goal ... Deadlines are there for a reason, they're there to keep you on track.” [Dolly]

“it didn't give me any time to think about home or be homesick ... keeping busy definitely helped me to settle into uni ... you've got structure, and university gives me a lot of purpose.” [Sara]

Some students' stories implied a lack of appreciation on the part of their university with regard to the importance of structure and routine for positive SMHWB. Stories of when staff adapted structural aspects (such as via informal deadline changes) and of unexpected alterations to established routines (such as lecture times) were

accompanied by students' assessments of the institution-led decision-making as unhelpful, or erratic in reference to SMHWB (Appendix 14). Overall, such was the implied strength of their university setting as a positive provider of structure and routine that from several participants there was expressed apprehension regarding the post-graduation loss of their institution:

“although yes, university has contributed a lot of [pause] academic stress and subsequent mental health difficulty ... it gave my day a purpose ... I was quite disciplined in that sense of I had quite a set routine ... and I didn't have as much time to think about my thoughts and ruminate on situations. Whereas obviously when I've graduated, I don't need to go to the [laughs] library anymore, like, there'll be no reason to [pause] so I am a bit worried about that change, because [pause] uni did feel like I had a purpose.” [Lily]

5.2c-2. Time Pressures and Juggling

Identified as significant in the students' mapping of their SMHWB were time pressures because of institutional organisation and control over student time. Two areas were particularly referenced as difficult. First, the time of year most associated with time pressure was that of winter (with a specific focus on Christmas). Second, the requirement to juggle different time needs (in reference to aspects such as employment roles and family/caring needs) could prove problematic in reference to SMHWB.

University timetabling (especially in reference to examination and assessment deadlines) was highlighted as contributing to a particular exacerbation of negative SMHWB in winter. Participants saw the winter season as accompanied by a sense of being trapped by university schedules. Alongside general identification of winter months (December to February) as physically *“just the worst months 'cause it's freezing cold, [and] it's dark”* [Lucy], there was also in these stories a bleak emotional sense attached to the atmosphere and experience of university, (particularly within the immediate new year period). University in wintertime was across the transcripts presented as ominous, pressured and preventative of positive SMHWB:

“there's nothing to look forward to ... I've never felt I could enjoy Christmas because there's always that looming deadline. There's the looming revision you've got to do for an exam; there's the looming idea of creating a research proposal or continuing to keep up with your degree ... you always have that looming ... and you think, 'I just wanna relax. I just want a break from it to see my family.' ... I've found post- Christmas since coming to uni, is very difficult, coming away from the family and having that sense of impending doom.” [Lucy]

Many students described Christmas as important due to childhood associations they attached to it, emphasising this as a time for family connection and rest. Students described university experiences and time-related requirements as contributing to changes in personal meanings attached to Christmas. For some, becoming a student created problems in reconnecting with family members, who now appeared to them somewhat detached from their university lives. Some participants described having to navigate clashing (physical and emotional) elements of a liminal self during the Christmas vacation; some implied a sense of (childhood) loss as a consequence of the change to Christmas resulting from being a student:

“It's not a break, but our family thinks it is. So you go home and mum's like, 'well you're on your Christmas break,' and it's like, 'yeah, I've got to write a dissertation and do a final major project.' So it's not really a break at all. I've got all of this work to do, and they don't understand it ... I don't know, I just don't like it.” [Gemma]

“It's not as enjoyable as it used to be ... you can't really enjoy Christmas as much as you used to ... the whole month of December was me decorating for Christmas, I didn't care about anything else. Whereas now I need to just make sure I've got my assignments done on time ... So it is a lot different, you can't really celebrate it as much as you were when you were a child.” [Anna]

The overall impression created in these participants' accounts was of university and student-related requirements as both taking over and away from them at an already emotional time of year.

The attention drawn to the negative SMHWB dominance in winter serves as an entry point to a wider issue of undergraduate life apparently requiring individuals to reorganise, shape, and 'juggle' their time according to the omnipotence of the

academic timetable/calendar. At a broad level, the supremacy of 'the academic calendar' over individual timetables was universally acknowledged by these participants. Presented was a view of university time-related decisions as, in general, autocratic, immovable, and inflexible. In light of this, participants expressed emotional difficulty, stress and even 'panic' as stemming from institutional non-receptiveness to ideas of/requests for change even where personal need was declared. Students described feeling relieved and lucky when their personal and academic time needs coincided (Appendix 14).

Also mentioned were experiences of having to juggle different time pressures *within* the single university setting. Made apparent was that different sectors of university lack coordination and can impose different time-related requirements. The latter was described in reference to academic experiences by students on courses with practical/placement components, (who identified that "*vocational courses don't fit with the academic timetable at all*" [Isobel]), but this was also an issue for those wishing to engage in university-provided extracurricular activities. For example, a lack of time alignment between academic and sporting activities within the institution could be seen as placing pressure on individual students to navigate:

"I'd always miss a lecture on a Wednesday ... I did it a lot and if I could get to the one on Wednesday I would, but most of the time with games you couldn't, just because for me [sport] was always more important than going to a lecture. It'd been instilled in us in our first year by one of the captains, like, 'This is really important, if there's games, you're there, uni doesn't matter in this situation' ... you develop that culture."
[Maguire]

A final facet to the time-juggle pressures in university referenced students' other life roles and commitments. Implied in general was that few outside-university activities, (many of which students have no choice but to engage with alongside their studies), coincide with or can be successfully juggled alongside university timings. A key problem resulting from a student's feeling forced to make fit their other life circumstances and necessities into university timings can be the development of an overall sense of having no time. Participants described perceptions of having no time

as a consequence of juggling multiple roles, needs and corresponding timetables as 'triggering' of behaviours and emotions associated with negative senses of self:

"I'm just thinking I've no spare time for anything. So if I'm sat at the table, doing some uni work and he's [the dog] crying and he needs to go on a walk, I'm getting worked up thinking, 'I don't have time for this. I should be spending all of my time on the assignment.' Or if my boyfriend asks me to do something, I get snappy and I'm like, 'I don't have time to do anything else other than the work'. So it makes me easier irritated. I would say it's more stress, worry and irritation. I am in a bad mood and I do just snap at things easier because I've got no time to do anything else; it should just be uni work non-stop. And then obviously I'm overworking myself ... so then I'm exhausted and I'm just thinking like, 'I could do with a break,' ... I just need to constantly work and it is exhausting. It does tire you out." [Jorja]

Essentially indicated in these participants' stories was that as a consequence of time juggling required whilst a student, there can actually be limited time for MHWB (either in reference to thinking about it or in a meaningful/actionable, self-care way). Implied in these transcripts was that being a student can involve having to make a choice between university and mental/wellbeing state because of the time pressures involved.

5.2c-3. Explicit/Implicit University Communication Experiences

The final 'whole institutional' element of significance described by these participants concerned their experiences of institutional communication. Both university-to-student and student-to-university scenarios were described. Elements impactful upon SMHWB were the (lacking) amount of informative communication received, the slowness of university responses to student contact, and the need to seeking information from alternative sources due to university unreliability. Also important was implicit communication discerned by the students as accompanying the explicit elements.

Some spoke of institutional communication activity as excessive to the point of stressful for students. Described was an inability to absorb information for personal need and action because, *"They just send us a load of emails, and it's overwhelming"*

[Gemma]. Accounts were also concerned with the lacking and disorganised nature of university-to-student communication. For example, where students spoke about having contacted the university with particular queries, their experiences often recounted slowness and a lack of specificity in the return communication. Despite demonstrating recognition that “*everybody is getting battered with emails*” [Bobbi] and that consequently academic staff are under intense pressure themselves, participants nonetheless talked of replies to their communications as most often serving to worsen their personal situation (and SMHWB). Some participants described responses to information requests as swinging between the extremes of ‘not enough’ and ‘too complicated’; others cited confusion caused by different university sources sending contradictory information, and particularly problematic were no responses/acknowledgements where personal struggling had been declared to teaching staff (Appendix 14). Frustration at delayed or non-receipt of necessary communications/information was apparent across multiple accounts. Students deemed this as not only inconvenient but a cause of non-necessary stress, resulting in their feeling pushed into unsupported uncertainty:

“we’d had nothing, not a single email, nothing ... we didn’t have a clue what was going on ... that was a massive let down ... we were expecting a lot more from uni and that was depressing ... we had to go and hunt it [information] out ourselves and it was just stress that we didn’t need.” [Andrew]

In finding university communication slow, unreliable, overwhelming, confusing and/or prompting of increased (rather than reduced) stress, many of these students described seeking out and relying on other sources of information away from the institution itself. Notably, other students were described as key university information communicators (particularly via course group chats). The participant perception presented was of students having been forced to step into a gap caused by a lack of communicative conscientiousness in the institution:

“the only communication we had was through a group chat, luckily it’s from the students and they helped guide us ... without that I wouldn’t have even known I was starting university ... [I was] feeling like, ‘Well, they [university] don’t care, do they?’ ... “[student peers] explained

what basically the tutor should have done...They explained what happens, where stuff is, what to do. They were sharing the modules because we didn't even know what modules there were, and they were sharing their emails ... That was the angry part, that the tutors at the university didn't do anything to ease us in and it had to be the students to do that." [Andrew]

In this respect, it is suggested that failures in university-to-student communication are impactful upon SMHWB given how they function as indicators to students of how trustworthy and indeed caring the institution is toward their needs.

Across the interviews, participants suggested that it is not always the explicit aspects of university communication that matter most. Rather, what might be *implied* and *interpreted* by the students from the manner and content of university communication can be key in understanding the role of this element of university life in relation to SMHWB. Participants often identified communication as being conducted in a 'tick box' manner on the part of the institution, as opposed to it being grounded in real care for the students. Important here, for example, was that despite centralised attempts to personalise communication, students described understanding of messages as easily replicated and generic. Similarly, though message content was presented as conveying institutional solidarity and support, from the students' perspective university communication was interpreted as pushing for them to take full responsibility to 'help themselves':

"they were very generalised messages, like when you can tell it's just copy and pasted from something ... They told you there was help available but they never specifically said where the help was, and it was you have to go find your own help ... it was like 'helping yourself' when you don't really want 'help yourself'." [Anna]

“I did have one email from my tutor, but I do think it was a very blank email that was just sent to everybody ... it was just a case of ‘oh I sent the email, box ticked, next thing to do’, that’s what it felt like ... I think me and my friends felt like we were just being sent these emails that didn’t feel very personal, and we were struggling. I think that’s the main thing, nothing felt very personal ... It was all very general.” [Lucy]

*“they’re just so **fake** [participant emphasis]. Every communication I get from a lecturer is **not** [participant emphasis] genuine ... It’s a, ‘I am being paid to write this email to you’. It’s a corporation.” [Gemma]*

The issue did not focus entirely on the communication itself – rather demonstrated was that the meaning beyond the communication for these participants was significant to their SMHWB mapping. Participants, as a consequence of their experiences involving university communication, indicated a view of their institution’s approach to SMHWB as one inauthentic, lacking depth and acknowledgement of student individuality, somewhat vague, and pushing of responsibility onto individual students at times when they were seeking the presence, as much as assistance, of others.

5.3. University-bordered Relationships

A further key theme to these students’ SMHWB stories was that of ‘university-bordered’ relationships, relationships specific to university contexts, formed and experienced directly as a result of being a student. From the outset, it was apparent that participants associated and looked forward to the prospect of the relationships that come with ‘The Student Experience’. University held promise regarding the relationships that were to come as a principal component of it:

“it’s exciting to be moved out and away from home and meeting new people, and it’s a fresh start.” [Amy]

Two relationship strands were identified within the participants’ accounts. These comprised relationships with university staff (both academic and non-academic) and with students. These pathways rarely intertwined in the stories but require parallel

consideration. The sub-themes and their explanation aspects within these two university-bordered relationship strands are presented here as follows:

- With University Staff
 - With Academic Teaching Staff
 - With Personal Tutors and Dissertation/Project Supervisors
 - With University Management
- With Other Students
 - Students' Union, Student Societies and Sport

5.3a. With University Staff

Academic teaching staff members appeared revered and respected as professionals in these accounts. Several students described awareness of staff perspectives, and there was appreciation expressed in reference to current working pressures they face – academic staff members' lack of time and overwhelm were clearly identified (Appendix 14). There was overall recognition that staff “*need to keep that professional-type distance from everything,*” [Alex]. However, there were emotion-grounded elements to these relationships that impact SMHWB.

If ‘excited anticipation’ can be seen as an initial emotion connected with the idea of meeting of new people at university generally, that excitement appears to coexist with some fear(s) even before terms begin. For several students, fears concerned practicalities. Beryl, for example and as an international student, described how she was “*pretty afraid*” that she would not understand her lecturers. For others, however, fears and anxieties about relationships with academic teaching staff were indicated as revolving around the unknown nature of relationships. For those already experiencing mental health difficulties, there was worry regarding how emotionally understanding academic teaching staff would be:

“[just before starting in September] that’s normally when the insomnia starts ... I start feeding my own mind with my anxiety ... especially with teaching staff I don’t know ... with new staff, I can find it difficult because I’d assume they all understand, but it’s hard to know who understands and on what level. I know some members of staff are less understanding and can be a bit blunt and arrogant and rude with it,

while other staff are lovely. So it's just a whole case of the worry starts then." [Dave]

Indicated also was wariness that relationships with academic teaching staff can persist once the academic term is underway. Participants described their judgements regarding a staff-member's capability (or not) to respond non-judgementally to their emotional or mental health-related needs as cementing how they engaged with them at points of stress during terms. Worry about being judged negatively by academic teaching staff appeared a key reason for students *not* to initiate help-seeking (for either academic or pastoral concerns). Regardless of any knowledge of formal support that a staff member could offer (as described in university policies), students' personal appraisals and perceptions mattered more. Overall, there was an impression given by participants of them coming to an understanding that support from academic teaching staff has to/should be earned:

"There was one lecturer that I was quite scared to tell anything to and I was scared that she'd just be like, 'well, that's not good enough' ... she was nice, but you wouldn't know how she would react or if she'd be like, 'well that's not good enough.' And I don't need that." [Pippa]

"as long as [they] see that student putting in the work, then they'll give you it back ... before you meet them [lecturers], you've got to go in with a lot of work otherwise they're just going to be like, 'well he's coming to me and done absolutely nothing'." [Dave]

Whilst acknowledging the professional context and experiencing some insecurity in the relationships, stories nonetheless indicated a desire for informality and spontaneity in interactions with academic teaching staff. The formality involved in relationships with academic teaching staff, including having to arrange specific meetings as opposed to being able to engage in unplanned conversations, was identified by students as a hindrance to feeling supported (Appendix 14). Having a sense of shared exchange and experience with academic staff was considered an aid for better SMHWB. Essentially, a key sought element was (visible) academic teaching staff sensitivity to students' positions and perspectives. That this this could not always be found/experienced was understood by these students as a

consequence of established academic culture, yet it still proved disappointing, even belittling, and ultimately negative for their SMHWB:

“some academics, because they’ve done their degree and they’ve done their masters and their PhD, some of them don’t have the empathy. They do lack empathy ... there was one lecturer when I was going through stuff in my first year, I told him and he was like, ‘ooh you just need to go and speak to [student support], like that’s not for me, I don’t want to hear about that,’... And I do feel like the academic pathway does take people away from that compassionate aspect... sometimes the smarter ones are the ones that don’t understand people do go through stuff. Or they just block it out like, ‘that’s not what university’s about.’ I feel sometimes the best tutors that I’ve come across are the ones that understand that you do have a life outside of uni ... the ones that realise you might be going through something that’s more than your dissertation or more than the question.” [Nicola]

Students described evaluating individual staff members in relation to their own needs. The outcomes of these appraisals led to specific actions and decision-taking regardless of university policy, such as choosing to ‘go to’ different lecturers for different purposes. Talk about decisions regarding which lecturers to interact with (or not) implied that academic teaching staff members might be considered as ‘coping mechanisms’ in themselves for individual students. A learned strategy of ‘using staff’ appeared an embedded idea in reference to coping with any senses of mental deterioration or distress.

“Everybody has the lecturers that you would prefer to go and talk to about things.” [Alex]

“I’ll get to a point, I’ll be like, ‘I don’t know what to do, this is an absolute nightmare.’ So I’ll speak to the lecturer and that’s always my go-to. That’s what I’ve done since first year ... I can always make myself feel better by going to the lecturer and even if I’m not on the right track, they’ll get me on the right track” [Dave]

In reference to SMHWB, academic teaching staff mattered for these participants not solely as reliable sources of information/study-content knowledge but as sites of individual acknowledgement, (constant) reassurance, grounding, and encouragement (regardless of how staff member themselves may have felt about the situations) (Appendix 14). Stability and feelings of being cared for/about derived from

these relationships appeared crucial. Self-belief presented as increasing in light of positive interactions with academic teaching staff. From the students' perspectives, key in the relationships appeared the level of personal (emotional) mentorship provided, as opposed to the pedagogical requirements alone. Descriptions pointed to detailed wants concerning how teaching staff *should* be and act in relation to their students:

“she’s lovely, nothing is too much for her... It’s like what you would model yourself to be like. And she’s just so kind with everything she does. She’s so down-to-earth and people like that usually aren’t, y’know? They’re usually a bit up themselves and she’s not ... she understands life and she treats you like you’re an adult. And if you need help with something or you need to find something, if you can’t find it, she’ll find out who can find it for you, or who you can go to to get help” [Dolly]

“I hated him. He would be so sexist it hurt ... And you couldn’t go to him if you got stuck ... his room was really intimidating ... you were scared to be in a room with him ... and it was that thing of, ‘I’m really struggling with this, but I can’t ask for help’... it demotivates you and then you get stressed and it’s just that negative spiral. But if you have a really good staff member, you can be really motivated and then at least you can ask for help.” [Charlotte]

Ultimately, kindness, thoughtfulness, and demonstrations of understanding from staff were described as valued. However, appearing overall vital for positive SMHWB in reference to students' relationships with academic teaching staff was demonstrable awareness of issues and emotions connected to students' wider lives.

5.3a-1. With Personal Tutors and Dissertation/Project Supervisors

Two staff member roles were highlighted in relation to participants' SMHWB experiences: 'Personal Tutor' and 'Dissertation Supervisor'. Where students reported interactions with Personal Tutors as positive for their SMHWB, the main benefits included this relationship as providing a safe and confidential space; a means to 'not feel alone', and facilitation of self-realisation and clarification (in reference to personal emotional state):

“just the fact that [personal tutor] she’s willing to talk to me ... but she’s not going to pass it round the other members of staff. She’s just going to talk to me and let me know that I’m not alone.” [Pippa]

“even though we have a personal tutorial that’s compulsory and I feel like there’s not much I’m going to talk about, I always go in and then end up remembering loads of things that I need to bring up and ... it has a very beneficial impact.” [Sara]

However, the dominant opinion of encounters with Personal Tutors was that these relationships did not function very well for SMHWB purposes. Despite the university-wide implementation of a ‘Personal Tutor System’ being institutionally considered (in part) a student support mechanism, individuals here spoke about its irrelevance for or detachment from themselves. There was a general lack of clarity as to what exactly students could use the interactions for, and what they can and cannot talk about with a Personal Tutor. The success of the Personal Tutor relationship in reference to SMHWB could be seen as dependent upon student willingness and ability to ‘figure it out’ and fit the interaction mould dictated by the institution in order to render it authentic and helpful:

“You can’t really talk to them [personal tutors] about the real problems because they’re like, ‘Talk to me about anything that’s not uni-related,’ and I’m like, ‘Well, technically all [participant emphasis] of these problems are uni related. If I wasn’t here, I would have any of them, so what can I talk to you about?’ ... I struggled to understand what they were actually for. I think there are a lot of people that don’t make use of them because they don’t understand what they’re actually for ... And yeah, they’re very short ... I would practice before ... I would write down three key points and I would make the list way in advance ... and then I’d be like, ‘Right, [personal tutor name], I’ve got a problem with my house, I’ve got a problem with [housemate name] in particular, and I’ve also got a problem with my parents getting a divorce. I don’t know how to deal with that.’ So then he’d listen, he’d be like, ‘If you feel unsafe, call the police. Arrange a counselling meeting, they can help you. If you want to talk to me again about this, that’s fine.’ It’s like, ‘Great, okay.’ I’ve got things to do then, and things that I can do to help ... It gave me tools to get started, to try and cope with the issue.” [Gemma]

Unfamiliarity with and lacking the ability to choose their Personal Tutor reduced the trust students felt in the relationship. Similarly, the kind of advice offered by Personal

Tutors, though appropriate according to university directives, to the students appeared insufficient or inappropriate. Ultimately students viewed the Personal Tutor relationship as inadequate avenues of SMHWB support:

“it was awkward ‘cause [personal tutor] it’s a complete stranger. I was hardly just gonna go in and act like I was her best friend ... I need to know the person before I just confide in them ... so if it’s just x stuff, timetable stuff, that’s fine, but if it was support for my wellbeing? I wouldn’t go to her ... I’d rather go to someone that I knew.” [Cherry]

*“Usually he [personal tutor] is the first person that I go to but he’s not who I would **want** [participant emphasis] to go to ... I do have a good relationship with him but in terms of fully opening up about something, I don’t think we’ve quite got that relationship ... most of the time I have no other option but to speak to him ... he’s not hard to talk to but he is a little bit by the book, almost too much ... sometimes you need to discuss ifs and buts, but he’s quite like, ‘no, there’s no ifs, there’s no buts’ ... that’s a bit frustrating ... he’s quite factual, rather than thoughts and feelings.” [Isobel]*

Dissertation Supervisors were identified as a second 1-to-1 academic role/relationship of significance for students’ SMHWB. Students often described their relationships with dissertation tutors in extreme terms - positive or negative. Dissertation supervisors were seen as instilling confidence if they were subject-knowledgeable and enthusiastic, but also important was personal connection, including via similar senses of humour and shared interests outside academia (Appendix 14). Optimistic and secure perceptions of immediate futures (in comparison to other times at university) were described as entwined with positive evaluations of dissertation supervisors (e.g., *“my project supervisor, I absolutely love ‘em (sic.), so I feel like this year is gonna be quite different to what it was last year”* [Cherry]).

Perceptions about dissertation supervisors and the supervisory relationship suggested a further two elements. First, individual staff members appeared regarded by students as a form of safety net for the final year of a student’s university experience, with the Dissertation Supervisor role seen as providing personal guarantee, security, and reassurance as much as academic guidance. Second, this

was perceived as a 'high stake relationship' whereby, if initial hopes and perceptions were not realised, students would experience mental deterioration. Indeed, in talking to students twice at different timepoints for this research, it was noticeable that some original positive assessments of the relationship with dissertation supervisors had diminished by the time of the second interview, as had personal senses of SMHWB connected with these interactions. Identified, for example, were supervisors as becoming more of an obstacle to students' work and experiences, contributing in turn to, increased senses of frustration, stress and lack of control:

"my supervisor hadn't replied in five weeks. He was just nowhere to be found. I couldn't find him anywhere and it was getting me quite agitated because if you don't submit this before December, you'll have to wait until midway through January, and that's a lot of weeks lost that I could be collecting my data. And I tried this year, I was like, 'I need to be prepared, I need to be ready, I need to get things in on time.' So knowing that this thing that was out of my control hadn't replied in five weeks ... [it] gets you quite angry because, 'this is your job to reply to me ... I know ninety-nine percent of the effort needs to come from me. You have one percent to do, and you've not done it properly,' ... it's just frustrating because I can't do anything about that." [Cherry]

Whilst the strong presence in the stories of relationships with Dissertation Supervisors related to the larger number of final-year students who participated in this research, the general SMHWB significance attached to these interactions remains important and highlight *year-of-study* relationships as needing increased consideration and appreciation in reference to their emotional impacts.

5.3a-2. With University Management

There were important references made to wider institutional staff roles in connection to SMHWB. In particular was a perception of university upper echelons as detached from students. Noticeable in student accounts was a separation of academic teaching staff and managers. Rather than it being a case of 'students (us)' and 'staff (them)', there was implied a large void between 'students and academic teaching staff (us)' and 'university managers (them).' Whilst students appeared to somewhat sympathise with and relate to academic teaching staff, (despite deficiencies experienced),

managerial-level staff were considered disconnected from student realities and needs. Consequently, presented was a view of managerial activities (particularly communications) as not only frustrating but inappropriate, even conducive of negative self-appraisal:²⁰

“it’s not the lecturers ... they are really good. They all try and help where they can, but they can only do so much without higher up giving them permission ... it’s the people who make decisions about us that don’t know the full picture and that’s what’s frustrating.” [Isobel]

“[it] feels like the people in charge are disconnected from students ... they should be a lot more sympathetic and understanding ... I don’t think they’re being as understanding as they could be and trying to make us feel worse than we should” [Pippa]

For all difficulties experienced and expressed in reference to relationships with academic teaching staff, what participants implied as particularly exacerbating for student stress, frustration and senses of isolation was realisation of university managerial underestimation, overlooking and distance from students’ (physical and emotional) realities and needs.

5.3b. With Other Students

Participants raised significant connections between their SMWHB and their university relationships with other students. Number of friends made did not matter to SMHWP

²⁰ Such a point was emphasised further through students’ descriptions of encounters with security staff. Stories here described interactions with non-academic, ‘front-line’ staff as caring, responsive/proactive and supportive (none of which appeared as adjectives to describe relationships with managerial staff). Indicated was the importance and meaningfulness to SMHWP of any university staff demonstrating these elements in interactions:

“it was starting uni that saved my life ... my first week, I was met by a woman from the security ... and I was telling her about my boyfriend at the time ... he was telling me he was gonna come on campus, and she was like, ‘no.’ So she said, ‘give me his name, it won’t happen, I’ll make sure it doesn’t,’ ... And she got in touch with people to say, ‘this is a risk,’ whatever. She got me in touch with the counselling ... she put me on the right path.” [Dolly]

“the one saving grace of this whole thing is the man who sits at the [reception] desk] ... I walked in, and I was crying, and he was like [voice breaking], ‘Are you alright? Do you want a cup of tea?’ I was like, ‘Yeah, I do. [participant crying] I want a cup of tea.’ And he was so nice ... it was just as if someone was talking to me [participant emphasis], like someone stopped what they were doing and asked me a question ... he made such a fucking difference.” [Gemma]

as much as the quality of the relationships. Referenced were other students as crucial for SMHWB understanding and support, but also as key challengers to mental balance due to peer pressure and/or accommodation relationship difficulties.

At a broad level, for some students, particular peer-relationships and friendships formed and solidified within university experiences were described as intensely felt, almost in terms of them being like (a replacement) family. Such student-friends were valued as supportive encouragers and reassurers. Important in these relationships was working together as much as socialising together.

“I made a couple of really, really close friends that I think are just brilliant ... they supported me, they pushed me to do things, they reassured me that I could do things, they sat with me in the library and made you feel less alone ... it was just brilliant ... to have that little support system away from my family, ‘cause obviously when you move away for university, you come away from your usual support network, your family, your childhood friends, so for me having those friends there that I knew no matter what they were there for me was so important.” [Lucy]

Participants’ stories also indicated multiple labels attached to different university peers that in turn implied how the relationships and friendships functioned for them and their SMHWB. Common references, for example, were the labels ‘home friends’ and ‘uni friends’. Arrival at university appeared as bringing with it new emotional work to delineate old and new groups of friends. Furthermore, underpinning this separation and labelling of friendships was a sense that university-derived peer relationships and friendships were not always regarded or approached as ‘key’ or even ‘real’. University peer relationships and friendships, in comparison to those developed at home (across childhood), were described as somewhat forced; lacking in emotional depth and closeness; sometimes uncaring; and ‘products’ of and for the circumstance:

“that kind of intense university friendship [SIGH] ... the friends I’d made weren’t the friends that I would normally have made friends with. They weren’t my kind of people, but they were very much what I needed because they drank and they partied a lot ... they were older than me, so they knew their way around the university, so I didn’t have to find my way.” [Charlotte]

“uni friends are great but to me your home friends is what’s important ... it’s alright knowing people for two years, but it’s the closeness that I feel you can’t get ... you’ve done so many things with them [home friends], we’ve gone on holiday, we’ve been to festivals, and it’s those sort of memories you can’t make, or I won’t make, with people from uni. I know I won’t.” [Dave]

Such comments perhaps indicate a persistent degree of wariness, distrust, and even a lack of confidence, regarding other students. This suggests university contexts can hold the potential to prompt students into continuous decision-making regarding ‘who to trust with what’ of themselves, (especially with regard to pre-existing MHWB experiences). Some students spoke of taking specific decisions to withhold difficult personal experiences from university friends; others spoke of putting other students through tests to determine their trustworthiness (Appendix 14). This anxiety could be seen as impacting on how the students then reflected on and felt about themselves.

Importantly, the superficial, unreal, and consequent distrustful elements to university peer relationships and friendships were in part implied to be consequences of the university environment itself. Wider organisational issues were indicated as sometimes impactful upon the nature of inter-student relationships and friendships. For instance, some of their student-to-student relationships were determined by student accommodation placement or course cohorts. Across the majority of the conversations (including the reflections from those in final years of study), descriptions of first-year student accommodation experiences were described as involving dominant feelings of uncertainty and lack of control over who they were to live with:

“in student accommodation ... they’re just gonna put you with anyone and you just have hope that they’re nice ... obviously there’s nothing that you can do about it. You get put with who you get put with and you just have to deal with it ... you just have to get on with it because you have no control over it.” [Amy]

Whilst for some students these externally orchestrated accommodation and study/work relationships were positive, providing calm and relief that also enabled successful completion of academic work (Appendix 14), for others the opposite proved the case. Where the power over who was to be connected, worked, and lived

with during university lay outside of personal control was identified by several participants as resulting in forced peer-to-peer encounters that negatively affected both university experiences and overall SMHWB.

5.3b-1. Students' Union, Student Societies and Sport

Venturing further into the details of participants' accounts of their friendships and student-peer relationships, frequent mentions connected their SMHWB to 3 specific university areas: experiences of the students' union, student societies and the sports provisions within the university. Senses of community and belonging instilled through these activities were contrasted with negative experiences of pressures and traditions (particularly referencing alcohol use/consumption) being imposed.

There was appreciation of how participation in the Students' Union, student societies and/or sports activities provided enhancement to overall university experiences by the personal development that could be achieved and meetings with other people (Appendix 14). Most significant, however, were references to these areas implying their role and responsibility as aid to students' feelings of community and belonging whilst at university (Appendix 14), not simply within but across university cohorts. In particular, participation in sports activities presented as a conduit to feeling 'at home' for many participants.

"this [sport] for me is one thing that has solidified me a group of friends all the way throughout uni ... that is definitely something that's important for my mental health and wellbeing at uni. Just having that solidified group of friends that you train with, go to games with, you obviously see on your nights out ... I feel like it's really valuable because a lot of people at uni don't get that." [Maguire]

"when freshers come in, they get assigned a '[sport] mum.' So then that person is always looking out for their '[sport] daughter', and then above that the Fresher technically has a '[sport] granny', someone in third year who's a second year's mum. And it becomes a sort of chain and it's not clicky at all, as in that is a family and I mean that as family. If you've any problem at any point, your first point of call is usually who's been assigned your '[sport] mum.' So that in itself builds a very strong relationship with people in the years above. It's always been a

tradition, so it's always been passed down from captain to captain, or seniors to freshers, and it's just a big support network.” [Sara]

However, there were also difficulties; cost and time pressures were mentioned. At times, conversations suggested time pressures associated with the extra-curricular elements of university as prohibitive to their engagement in them. Also indicated was this problem as potentially segregating, a means of making visible to a student their difference from others, challenging their sense of belonging:

“I love the idea of societies and going to things where you are with likeminded people, but I'm also very conscious that I already do quite a lot of things. I don't want to take time away from academic study time, because I've just gained what I hope will be a good work/life balance ... I don't want to try and commit to something that I can't do.” [Mia]

“I joined the [sport] club and then I just couldn't keep up ... we were basically training for more than twenty-four hours in the week. And on my course, I couldn't do that. I couldn't manage the time. The other people, who just had exams, it was like, ‘Well, that's fine because you're not doing anything. You've got four hours of lecture time, so you can devote twenty- four hours a week to [sport]’. But I couldn't ... they were like, ‘Well, you just never turn up.’ So then when I did turn up, I didn't know how to [sport], and it was like, ‘Well now I just feel stupid’ ... it was just too much pressure.” [Gemma]

The overall social arena attached to sport teams and activities was indicated as having the potential to produce great distress for students. Whilst noted was that *“some people really got on with the sports stuff, and a lot of people don't”* [Gemma], those in ‘lower’ year groups, i.e., new-to-university students or joining teams (and therefore with limited experience compared to peers), were signposted as particularly vulnerable within sport-social activities. Key to this were apparent perceptions of societies and teams as being driven by largely immovable, fixed traditions difficult to challenge and change. Highlighted was that whilst personal assessment of situations could lead to self-understanding of them as ‘not good’ for individual SMHWB, ultimately it was difficult to ‘fight the system’ and its expectations due to embedded, hierarchically-located ideas about both the meaning of an/the activity and ‘The Student Experience’ generally (Appendix 14). In particular, the impression given here was of personally-honest views regarding negative SMHWB impacts rippling out from

peer-enforced 'drinking cultures' within university sport which could not necessarily be uttered in public. Noticeable in students' accounts, (especially those from students identifying as female), was discomfort with the identified 'drinking cultures'. Whilst demonstrating general knowledge of excessive alcohol consumption as detrimental to individuals' MHWB, accounts of students' experiences indicated personal inability to challenge established student alcohol-fuelled traditions imposed by those in the academic years above. Experience of social cultures revolving around alcohol were described, again, as not only potentially problematic in themselves, but also because of a lack of response-to-redress from the university. Many of the accompanying experiences in alcohol-guided socials, such as feeling forced to do something; feeling powerless in the face of peer pressure; enduring unwanted physical contact; experiencing social isolation, humiliation and physical insecurity, could be seen in the interviews as directly contrasting to the positive-for-self impacts originally anticipated and hoped for by the students choosing to join the activities:

*"I don't like the drinking culture in sport, and it's just really accepted by everyone that every [week] you go out and you have to drink ... I don't like them [sport socials] because obviously it's all focused around **forced** [participant emphasis] drinking ... I really hate it, and I've mentioned it to the university and got nowhere. I just don't like the culture. I feel really out of place. And I hate seeing the people that have just turned eighteen, 'cause it's just setting the tone for the rest of their time at university ... it's drilled into them from starting ... drinking alcohol is really emphasised. And obviously alcohol's bad for your mental health so this makes no sense, does it?" [Isobel]*

*"obviously you go to uni and play sport to [pause] meet people, and it's supposed to add value to your uni experience, and you could just tell for a lot of them it was not a nice experience ... freshers would get forced to drink a **lot** [participant emphasis] of alcohol. And [pause] if they don't do it, they'd get it poured all over their head. You'd get made to eat dog food [pause] and it's like, 'I don't wanna eat dog food.' [pause] ... You'd get shouted at and they'd be like, 'get on your knees,' in the club. And then they'd go and pour the prosecco all over their face and hair ... like, that's not fun. You'd have freshers crying and the seniors would just be like, 'oh shut up'. The amount of times I've had to take freshers home that I don't even know and put them into bed because they can't even stand up or walk ... God knows what would've happened to them." [Lily]*

There was an overall suggestion that alcohol-fuelled social cultures connected with students' engagement with sports (which filtered out to other areas of the university more widely) could prove not only negative for individual SMHWB but also risky, polarising, and divisive for the community as a whole. Whilst university extra-curricular provisions at surface-level could be considered important university features to aid SMHWB, (in terms of their perceived function in fostering collegiality and belonging, tackling students' feelings of 'being alone' and contributing to a senses of routine), *how* some students experienced these aspects and the peer-to-peer relationships within them, proved to have the opposite effect(s).

5.4. University as a Mirror

Being a student appeared as prompting self-reflection on previously underappreciated properties and characteristics connected with, for example, personal (education) history, socio-economic status, identity formation, as well as current circumstances. The sub-themes in this area are as follows:

- Material and Academic Preparedness.
- Magnified Self-Reflection on Personal 'Normality and 'Maturity' at University.
- A Place to 'Bracket' Self.

5.4a. Material and Academic Preparedness

Entering a university setting can, these participants suggested, encourage individuals to re-think on and re-evaluate their preparedness for higher education. Common, implied negative realisations of 'I'm not as prepared as I thought I was/should be' appeared in these interviews. Such reflections on preparedness concentrated in two areas – academic capability and in relation to material aspects (financial resource).

First, challenges posed to self-perceptions of academic preparedness by university experiences were frequent. Students often identified their 'university-student selves' as grounded in ideas about their prior 'education selves' (in school or college) (See

Ch4: p.133).²¹ Preceding academic experiences were described as providing an indicator or benchmark of self that university activity was assessed against. Whilst for some, becoming a university student facilitated a sense of a freer 'education self' (Appendix 14), for others identified was an inferior sense of self in university. The level of contrast (self-deterioration) sensed between these 'education selves' appeared to have implications for students' self-confidence going forward through university. Reduced confidence in course settings also presented as rippling out into general student life, such as in accommodation and social experiences. Negatively referenced elements included unexpected intellectual challenge, and/or negative comparisons of self in relation to (perceptions of) peers' intelligence and abilities. Whilst 'home students' experienced difficulties, also important to note were the specific dimensions of an 'international student' experience – referenced was personal inhibition wrought by language concerns. Despite expressions of a broad perspective of university overall as positive for self, considering what had been experienced in previous school/college cultures, at the level of individual experience concern about newly-appraised educational deficiencies was highlighted as impactful upon SMHWB. Consideration of earlier 'education selves' could be seen as inducing perceptions of being 'worse than before', as a consequence prompting stronger feelings of self-doubt and anxiety in the university context:

"it's harder ... I always was the person who pushed hands up from the class when it comes to speaking of any topic, and right here, doing workshops, sometimes I really want to say it, but at the same time I'm not sure ... so I'm like 'no, just be quiet, don't say anything'." [Beryl, 'international' student]

"I was thinking, am I really cut out for this? I was ok in [Post 16], yeah, but is this something that I have the ability to do, actually get a decent

²¹ Interestingly amongst the students were examples of previous university experiences as providing a lens for evaluation of current student circumstance - these participants had 'dropped out' of their original degree programmes, but were now using those previous encounters with a university as a resource to navigate their renewed connection with undergraduate study:

"I previously went to [a different] University, but I wasn't prepared for university life at that point ... It's definitely been a lot more positive than my first time around at university. I've always said that this has been how it should have been. I don't feel like my first time around at university was the way things should have went (sic.). And it's purely because I wasn't ready to go to university then, I just didn't know it. I feel like this time around I was ready. I knew what I was coming into and, yes, it's been a rollercoaster, but it's positive because I still feel like it's the right thing and it is what I want to do." [Alex]

grade? ... just having that playing on your mind like, 'am I actually made out for this sort of academic work or is it just something I was good at [Post 16]?' [Maguire, 'home' student]

Second, students spoke about how, upon entering their institution, they felt their material preparedness to be a university student spotlighted. There were specific references to participation at university as a highlighter of socio-economic position, from which students appeared to connect negative evaluations of self. High costs involved in university experiences (e.g., accommodation), senses of personal insecurity stemming from limited financial resources, and paid employment as not a matter of choice but necessity could be seen in stories. The importance of recognising student finance as not something fixed but changeable over time and in relation to (family) circumstances was indicated (Appendix 14) – dramatic changes in students' financial resources were indicated as intimately connected to changes in their mental states. Furthermore, some students spoke on how negative senses of self connected with their financial circumstances could be exacerbated by institutional elements. Financially-related assumptions (indeed unconscious bias) discerned from university staff, support systems (Appendix 14) and specific course requirements, (however unconsciously communicated), appeared problematic. Indicated, for example, was that students can feel judged and shamed by staff emphasising that working alongside studying is non-desirable – such expressions appearing to label paid employment as 'bad' when studying may be in direct conflict with a student's absolute need. Similarly, feeling forced to purchase specific items for courses was described as magnifying of personal financial struggle:

"I have to work otherwise I can't afford my accommodation and stuff like that ... I just couldn't afford to not work as well. I know our lecturers are very against it, they don't think we should be. I've had a few discussions where I've had to back-up my point for why I work. But it's one of those [things] where I know I have to." [Alex]

"when you do practicals, you have to wear [course specific] gear, the appropriate wear, so if you're someone that doesn't own a lot, that can be a bit of a stress, thinking, 'I'm gonna have to go out and buy something,' 'cause it's expensive." [Jorja]

Presented was a dominant view of institutional understanding of and approaches to students' financial situations as lacking and most often guided by persisting traditional assumptions, detached from their realities. Conveyed was an impression of their university as lacking appreciation for the complexity of current students' material circumstances. Consequently, indicated was university as sometimes prompting of student negative self-reflections regarding their material preparedness for university; the negative self-reflections on this aspect were connected with negative SMHWB experiences in general.

5.4b. Magnified Self-Reflection on Personal 'Normality and 'Maturity' at University

Accounts also described university experiences as prompting reflection back to self regarding personal backgrounds and relationships' properties; feelings of being different (and isolated) could be amplified. Senses of personal abnormality referenced aspects such as 'non-conventional', 'difficult' or 'unstable' family relationships/home lives or personal lack of familiarity with academia as a consequence of other family members having *not* attended university. Coming from a 'non-traditional' student background was described as prompting of self-concealment, preventing of feelings of belonging and inducing of worry about being negatively judged by both other students and university staff. This latter element was also identified as detrimental to knowledge about (and ability to seek out) university support for SMHWB when difficulties arose:

"I've always felt I've not got the same experience as anybody else. I've always felt I'm not unique or individual in a good way, just different ... the thing for me is my background, because a lot of people at university maybe don't come from the same sort of place that I've come from ... I don't want to divulge that information about what the environment for me was growing up because very little (sic.) people can relate to that when you get to university. I know things are changing but the great body of people at university in my experience have all got fairly stable houses and stuff. They have somewhere to go and call home. I don't necessarily have that ... they can't relate to that. They don't understand it." [Lucy]

"I haven't gone the stereotypical way into uni, so I didn't know that there was such a thing as resitting ... I didn't wanna tell anyone 'cause I

didn't want anyone to know. I didn't want them to be like, 'oh there's a scruffy girl who's homeless, living on the streets' ... No one knew I was homeless for quite a while. And it wasn't until I had a breakdown at uni because I was that hungry ... and they couldn't believe that I didn't know all this help was available. They were like, 'how did you not know? There's signs everywhere,' and I'm like, 'cause when you're depressed, [you] don't go round reading signs at uni.'" [Dolly]

Participants' comments also pointed to confusion regarding their personal stages of maturity, how much they self-identified as either a child or an adult. Implied through these stories was that senses and assessments of SMHWB can be much linked to ideas of who is responsible for what, who should take care of whom. These ideas appear amplified by a university setting/context.

At the outset, participants described university as a place/experience to encourage an individual to leave elements of their childhood behind. Many students presented having a pre-university view of their institution as a place where they *had* to be and *should* be mature, responsible, and 'adult'. Thus, some students described themselves as initially not wanting to go to university, due to a sense of seeing themselves as not ready for university – this lack of readiness concerned academic ability, but also emphasised the idea of being generally 'too young for it':

"I was crying my eyes out in the car because I just didn't want to go. I was so, so scared and nervous about moving to university. I felt like I wasn't gonna be mature enough, or smart enough to be able to go ... I was still just absolutely petrified." [Anna]

However, despite explicit references to feeling pulled into maturity by university experiences, students displayed contradictory attitudes regarding student child/adult status once enrolled at their institution. Students gave an implied realisation that they *could* still be child-like at university, subsequently approaching university as means to extend childhood. Implied was that participants learned to like being students precisely because they identified that *"it gives more time to not be a real adult"* [Cherry]. Indicated as important in this area was mixed-messaging emanating from the different facets of university, which they suggested hindering of a 'child' to 'adult' transition. Included were descriptions of elements, such as lecturer-student

interactions and life-skill-related university experiences, that students specifically pinpointed as having the potential to make them ‘feel childish/like a child’:

“I remember a situation in one of the lectures where I got my phone out to check the time and she reprimanded me as if I was a child and this is in front of our full cohort. And I was absolutely mortified ... it’s all good and well for her to have strict rules, but it wasn’t like she even gave me the chance to explain ... she just shouted at me.” [Alex]

More generally highlighted via the participants’ experiences was university as a context in which ideas about age can be magnified. This issue in turn was connected to their SMHWB. For example, entering university at ages *not* common for undergraduate students was described as important for study confidence. Those students describing *not* attending university immediately after school highlighted their older age as initially important for more positive SMHWB – they recognised value in their life experience and ‘knew themselves better’, both things aiding how they coped with particular facets of student life (especially in reference to relationships with staff and self-organisation):

“I know what works for me now as an adult because I’ve worked for the past however many years. I’ve been in charge of people and myself, my own time and their time, and I’ve gotten a lot better at that level of organisation, which I feel is going to help me hugely as a student.” [Mia]

However, conversely, there were also examples of age-related experiences that pointed to university experiences as negatively-challenging. Regardless of personal confidences, the enduring sense of university as ‘a young person’s domain’ could be identified as negatively- impactful upon those not of typical-student-age. In particular, feelings of isolation; irrelevance; frustration; doubt; (technological) ineptitude; of ‘just being out of it’, as a mature student were visible. Personal regret at not having ‘done this when I should have, when I was younger’ was also implied. Furthermore, experiences of such negative emotions attached to age-grounded perceptions were identified as catalysts for disengagement and thoughts about leaving university overall:

“I am three years older than everyone on my course ... it's amazing how them (sic.) few years can make you feel out of place with people ... they were talking about things that I just didn't care about or were so irrelevant to my life ... I just felt so lost ... being with people that I couldn't relate to and [feeling] I was just there to fill up some space and time.” [Lucy]

“some of the younger ones just seemed to be really stressed all the time that it's not exactly like school...the younger ones almost seem like they want to be, I don't want to say babysat, but they ask questions that the lecturers have gone over more than once ... [online] the younger students keep their cameras off, their microphones off and they just don't speak and they don't contribute to group work, and it's really frustrating because I'm like, 'I want to be here. I want to learn. I want to benefit from group working. You can't not put your thoughts and things forward, otherwise what's the point of you being there?’” [Mia]

The impression overall conveyed was of university as a potential magnifier of personal life course stage. Personal age and life-stage were presented as elements not so deeply reflected on until encouraged to do so as a student, through student-to-student interactions and institutional implicit communication. Identified meanings and feelings associated with self-assessment on these elements – which were notably negative amongst mature students – were described as important SMHWB-related elements.

5.4c. A Place to Bracket Self

For some, the separating of different elements of themselves whilst a student was viewed as an important strategy for coping. Self-compartmentalisation appeared to aid senses of being in control, in terms of both practical life elements and mental states. Wanting to compartmentalise, knowing that would be ‘good for MHWB’, and achieving it, however, were implied as two different things. Indeed, for all there was apparent a perception that ‘student life’ *can* be separated, participants relayed experiences where it was highlighted to them that, emotionally, it cannot. A successful appraisal of own ability to compartmentalise whilst a student was presented as a way through which individuals considered themselves to be experiencing positive SMHWB. If successful compartmentalisation of self was visible,

participants considered themselves to be fitting into university and their student role, (things which in themselves were deemed markers for self-positivity). Where the boundaries between 'student' and other life roles were blurred, there was more negativity, particularly regarding increased anxiety stemming from role conflicts or feelings of being forced to choose:

"it's separating the study, student side of things from everything else ... When I'm at home I can be a mum, if she needs me to be. When I'm here, I'm a student and I'm learning, and it's, 'I love you lots [child], but I'm going to have to call you back after this lecture or after this workshop.' ... last year it gave me a lot of anxiety because how can I be a good mum if I'm telling her to go because I'm being a student? It was very much I couldn't be one without the other ... I go back to the boxes, and everything lives in its own little compartment. Being able to separate this as 'being student' from 'being [own name]' or 'Mum' or 'big sister' or 'daughter', I think it's beneficial for me because otherwise, if work stuff was at home all the time then I'd get so focussed on that that everything else would kind of slip away." [Bobbi]

"from my Nanna passing, for that whole week, none of my family left each other. We slept round each other's houses because none of us wanted to be alone. And then all of a sudden I had to, 'cause I actually had an exam the week after, go back up to [university]. All my family were still together grieving and I was kind of ripped away. I was ripped away from being able to grieve with my family to having to grieve in student accommodation away from my family. I really didn't take that well." [Anna]

In reference to the university's role in these experiences, participants implied contradictory views. For some, university provided a compartmentalisation aid via consistent and immovable points of reference (such as deadlines); also important was an apparent embedded understanding of university as 'not a place for emotion'. Both these were hinted to be helpful for some students, providing means of orientation through difficulties when roles and responsibilities felt confused. However, for others, university was identified as precisely the opposite, a setting in which non-student roles and accompanying emotional experiences *should* be acknowledged but in which they are not and/or should not. Indicated in several students' accounts where the need to (emotionally) compartmentalise featured were perceptions of their institution as imposing 'no choice' when difficult personal circumstances arose. Furthermore, there was an implied view of the university as encouraging and guiding

students to simply control their emotions and ‘shut down’ of parts of themselves, rather than permitting of them to express difficulties being experienced. In this, participants implied ‘knowing’ to prioritise their academic activity over experiences and emotional states connected with other life roles whilst a student. This university-implied encouragement for students to self-bracket, presented as negatively impactful for SMHWB – pushing aside identified emotional need was described as ultimately detrimental. Experiences of bereavement were those in particular described in this regard – when institutional support for such experiences was sought, mirrored back from the university was often an assessment of their experience and emotional need that appeared (to the students) as dismissive. For most students who described seeking university support after losses, the experiences presented as contributing to continuation of an understanding that when in university emotional experiences should be self-managed; mental states should be considered primarily matters of personal control:

“I had so many exams and essays to do, and I wasn’t getting help for them or getting any PEC [Personal Extenuating Circumstances] or anything, so I was like, ‘I’m just gonna have to just stop the bereavement for a second and just focus on this’. And it was a massive struggle ... I did just have to try and stop my emotions to start doing all of my work ... I just completely pushed that aside. I was like, ‘I’m not even gonna allow myself to feel anything,’ and I just tried to focus on what I had to do, when I had to do it and get the exam and the assignment out of the way ... and then after all that, my Nanna and everything just came absolutely crashing down on me and proper hit me hard.” [Anna]

5.5. University-specific Meanings, Perceptions and Expectations

The final theme identified in students’ university-specific references to their SMHWB concerns meanings, perceptions and expectations attached to (even the idea of) ‘University’. Alongside physically experienced circumstances, these non-physical elements were implied as important drivers in their mapping of SMHWB. ‘University’ and ‘Student’ were indicated as labels with accompanying symbolic meanings which, if challenged, were identified as intimately tied to negative senses of self. The sub-themes for this section are as follows:

- Symbolic Meanings of ‘University’ and ‘Student’.
- ‘Student’ and ‘University’ – Ideas Versus Realities.
- Student Mental Distress and Deterioration in Wellbeing as ‘Normal’ and ‘Expected’.
- University as a Hindrance to ‘Balanced’ SMHWP.

5.5a. Symbolic Meaning(s) of ‘University’ and ‘Student’

Grounding many of the students’ experiences at university and their accompanying SMHWP were apparent symbolic meaning(s) attached to academia in general. Beyond university meaning as being about (desires to) learn/study, the participants drew attention to university as symbolically meaningful in reference to family (relationships) (Appendix 14); as an opportunity not to be discarded; as very much a privilege; as a guarantee of better career, and therefore life, prospects (Appendix 14). Indeed, across the transcripts university as a form of mentally-meaningful object appeared something connected with ideas of inherent stability and high status, to be revered, and of which they needed to make themselves deserving:

“My destiny wasn’t for university, it’s not something that was supposed to happen to me ... I need to be the best I can be.” [Andrew]

Indicated was that such meanings provided fuel for not only motivation and engagement but high (self-)expectations at university. Student and university experiences appeared perceived by many as containing direct markers of self:

“being a student ... it’s the forefront of who I am” [Nicola].

Interesting in this regard were descriptions from students who struggled with their mental health identifying that their attendance at university provided precise and visible evidence of mental *wellness* – being able to enrol at university provided confirmation of *good* mental health. Overall, such strength of perceptions and meanings regarding university presented as having strong implications for how SMHWP was then mapped and understood.

5.5b. ‘The Student Experience’ - Secure Ideas vs Time-Related Realities

A particularly secure facet within students' university-specific perceptions and expectations concerned 'The Student Experience' (See Ch2: p.57). Clear in the students' stories was that hopeful and positive perceptions and expectations of this as 'student reality' influenced their decisions to engage in UKHE. 'The Student Experience' to the majority of these participants implied an overall, even guaranteed, attractive way of living:

"there's a certain lifestyle that I expected to live" [Maguire]

Two aspects to participants' 'Student Experience' perceptions and expectations were discerned – the first concerned social activities and relationships; the second, student academic-experiences and workloads. In reference to the former, it was clear that participants arrived at university with embedded expectations of 'automatically and definitely making loads of friends'. This was implied a key evaluation element in relation to both 'The Student Experience', and the state of their SMHWB within that. The latter facet drew attention to the SHMWB impacts of perceptions and expectations concerning participants' academic requirements and workloads. Importantly, when considered together, what the stories on these elements demonstrated was the students as experiencing across-time generated realisations of nuanced different-reality and SMHWB-challenging details to their ideas about 'The Student Experience'.

In reference, first, to their social ideas, the first undergraduate year was spoken about as *the* year in which the social elements of university both matters most and are prevalent. The first year was thus implied as crucial in laying the ground for a *socially* positive 'Student Experience' overall. Multiple accounts from these participants described their social hopes as not materialising. Realities not matching expectations led to feelings of both disappointment and loneliness. Implied was swift self-realisation of having been mistaken in their perceptions and expectations relating to the social aspects of university:

"you come in with this misconception that it's going to be like it is on TV ... you're just going to have loads of people that you know all the time." [Maguire]

“I don't think I made as many friends as I expected, and as many friends as people seemed to speak about ... I know a lot of people say before you go, “you'll make so many friends and it'll be the best time of your life,” and it is not always the case. It can be quite a lonely place to be ... university's not got the sense of community I expected it to have.” [Lucy]

Where social expectations of university were unmet in their first undergraduate year, these participants mapped periods of negative SMHWP which took considerable time to reverse. Moving beyond the first year, indicated were lingering negative implications for SMHWP in other year groups, because of the non-realisation of first-year social expectations. Described, for example, were problematic, embedded year-specific social perceptions and/or perceptions within university itself – with the emphasis on the first year as *the* social year, students in subsequent years appeared to socially struggle if they had not developed secure friendships. Negative SMHWP associated with social elements thus presented as keenly felt *post*-first-year. From the second undergraduate year upward, participants described feelings of personal failure, exclusion, isolation, and disorientation after having not secured friendships in their first undergraduate year. Also indicated were experiences of impactful negative judgements from other students referencing participants' *non*-achievement of first-year-associated social expectations. Importantly, the negative impacts in relation to this aspect were described as open to exacerbation by university channels. The institution itself was identified as tending to emphasise the social experiences of the 'Fresher' (first) year, this being indicated through both rhetoric and events organised. Participants indicated SMHWP-associated difficulties stemming from institutional perpetuation of first-year social emphases. Perpetuating an institutional implicit regard of, and outward communication in relation to, 'the student *social* experience' as for first-years only appeared increasing of individual frustration and senses of self as being of lower value (to the university):

“I didn't know where to go, what to do, how to make new friends because it's all focused, at uni, [on] making friends when you're a fresher ... once you've got past that, and you realise they're not very good friends, how do you make new ones? ... going into the [sport] club, when I was in third year, they were like, 'What are you doing joining us in third year? You're not a fresher.' I was branded with

'fresher', and they would write 'F' on my forehead ... all the clubs [had] this mentality of, 'If you are new, you're a fresher, and if you're a fresher, you've got no friends. But if you're in third year, you must have your friends already, you must be settled.' And it's like, 'No, I'm not. I'm desperately searching for more friends and I don't really feel like I can meet them.' [Gemma]

"if you've not solidified friendships in the first year... trying to make new friends in second year's very difficult ... there weren't as many things put on for second-year students. Everything seemed to focus around new first-year students. I didn't think that was very good, because I think second-year is equally as important. You're still in the midst of your university life and you're not really supported, I don't think. It didn't feel like I was as valued in the university as you (sic.) are in first year." [Lucy]

Overall, social expectations presented as, in reality, rapidly changing during the course of an undergraduate experience, though normative rhetoric may portray them as fixed. Referenced as impactful upon SMHWB were 'false narratives' before and brought to university. Unrealised social expectations in the first year were identified as having lingering impacts in subsequent study years, and difficulties stemming from this could be seen in students' relationships the university – presented as problematic was institutional focus on first-year social experiences to the detriment of those in further years of student life.

Turning, second, to the students' changing academic-workload-related perceptions and expectations as related to year(s) of study. For most, the first year was identified as the least problematic, it *"wasn't this crazily important thing. It was just something to keep slowly plugging away at"* [Maguire]. However, perceptions and expectations of second and subsequent academic year requirements were more pronounced. For several students, the transition from first to second year undergraduate study was perceived (before the actual move) as reminiscent of the switch from school to university – it was characterised as a 'big jump', inducing of greater anxiety. The second year was identified as one within which there is potential for a student to become and feel 'lost' and/or 'stuck'; it is also one in which there is a requirement for a student to *"step it up a bit"* [Maguire] as the academic requirements intensify. Perception and expectations concerning final years of study built even further on these descriptions – emphasised was an 'all or nothing' extremes view of a student's

academic experience in the final year. From the second year of study onward, each year presented as guided by a perception of there being “*more riding on it ... this counts*” [Nicola]. Grades were described as mattering more with each progressing year – and accompanying this perception were self-expectations of having to go through (emotionally) harder, more difficult, and stressful academic experiences with each year, in order to achieve:

“Second year feels like you’re stuck in the mud. You’re trudging through. It’s the second year, it’s the hard year, as everyone seems to refer to it, and I definitely agree. It was for me ... it’s a long slog because everything accelerates ... I do think second year, you do need more support ... and you don’t really get that ... I didn’t feel as seen or heard ... second year, you get a little bit lost.” [Cherry]

*“in final year, I knew that [pause] **these** [participant emphasis] were the ones that really did matter ... I used to get stressed about year one multiple choice exams, but this is a different level.”* [Lily]

“this [final year] is the business year, the year that isn’t meant to be fun. It’s not meant to be great, and it’s not meant to be that student experience. It’s just hard, solid graft and it’s getting a job at the end. And I think that’s what everyone says ... you get into it and it’s like, ‘yeah, there’s no room for error. You screw up, you screw up your degree.’ So there’s a lot more pressure.” [Charlotte]

Of particular importance were common mentions of participants’ perceptions and expectations of what could be labelled ‘The Dissertation Experience’. Even simple awareness of the academic year in which dissertation completion is required presented as a source of anxiety. Indeed, the dissertation (as both a process and an object) was spoken about in almost mythological terms. Learned perceptions and expectations specific to the dissertation could be discerned – external others (e.g., family members) as well as existing final-year students and university alumni were described as influential to participants’ negative ideas about dissertations. Others’ dissertation narratives were identified as contributing to increased trepidation, pressure, and anxiety regarding the task, even before participants had started their work:

“People always go, ‘the dissertation’s the most stressful time of your life’ ... having a third year say, ‘God, if you can’t get through this, God help you when you come to this year,’ isn’t helpful.” [Charlotte]

“it’s built up ... even when I was in school, you hear of dissertations ... and then it’s all of a sudden upon you, and, ‘I’ve got to do this now, this big piece of work that I’ve built up in my head.’ So you put a lot of pressure on yourself with it ... it’s the moment that people remember, your dissertation.” [Cherry]

“I was nervous because I knew that I’d be doing my dissertation this year.” [Amy]

Universally implied, then, by participants was year-on-year incremental realisation regarding ‘the student *academic* experience’ realities, alongside gradational increases in stress, anxiety, self-doubt, worry, and indeed negative SMHWB, connected with perceptions and expectations of academic requirements. Indeed, across the accounts indicated was that SMHWB expectations for specific academic years were interwoven with ideas about forthcoming academic workloads and requirements.

Cumulative examination and consideration of securely-held perceptions and expectations regarding social and academic aspects of ‘The Student Experience’ for these participants raises suggestion of a need for greater recognition regarding and tailored support in response to the granularity of year-related student life elements (Appendix 14). Regardless of any *realised* expectations, which were outlined as positive in reference to SMHWB, emphasised in the students’ accounts was a focus on where they had experienced for themselves an obvious unsettlement between their ideas and realities.

5.5c. Negative SMHWB as ‘Normal’ and ‘Expected’

Implicit across participants’ university-related stories was regard of academic institutions as now places where mental distress and deterioration in wellbeing are both normal and expected. Conveyed was negative SMHWB as a naturally occurring feature of an undergraduate experience. This view was developed as a direct consequence of their experiences at university – this perception was not described

as one held before entering student life, although it is now one seen as being passed on to potential new students.

Individual accounts described persisting *self-stigma* when distress was experienced at university. Seeking support from university SMHWB services was presented as something still personally shameful for some (Appendix 14). There were perceptions directed toward the self regarding the types of mental and emotional distress acceptable or not for university help-seeking. Implied was existence of student-*self-determined* hierarchies of valid SMHWB experience/issues.²² However, though self-critique was present, more dominant was an apparent embedded nature of the idea of student mental difficulty in any capacity as normal, an ‘obvious’ part of ‘The Student Experience’ in general. Students talked about ‘knowing’ that even where an overall undergraduate experience is recalled as ‘great’, they expected that the individual had experienced (at least a period of) negative SMHWB at some point. Academic requirements, in particular, were described as known sites of negative SMHWB because of the elevated levels of stress they ‘naturally’ prompt. Terminology associated with mental distress was indicated as common parlance amongst students. Indeed, indicated was almost an idea that no individual can really be a student, or do their academic work correctly, without knowing about and experiencing mental difficulties:

“obviously it’s natural to be stressed because it’s [the dissertation], the most important piece of work that you’re gonna do. The stress that I feel feels normal.” [Cherry]

“in the uni bubble ... all you have to go with is ‘I’m stressed’ ... [I’ve heard students] overusing diagnosable illnesses to express how they’re feeling that day ... ‘Oh my God, I’m so OCD’ or ‘I’ve got PTSD from that essay’.” [Charlotte]

²² Most apparent was a self-perception of distress stemming from friendship and/or relationship difficulties with other students as an inappropriate reason to seek support:

“[the fallout] it was something that you have to handle yourself. [I] feel it would be a bit pointless bringing in the uni just to try [and] sort out a little fallout ... that would be a waste of the uni’s time.” [Jorja]

“I don’t want to use the word bullying because I was nineteen, like, it’s not bullying, you’re at uni.” [Gemma]

“anxiety is always high because that's the way university makes you feel. You just always feel on edge ... that's a pretty common theme ... even people that have this experience with a really a good time ... for me what epitomises student mental health and wellbeing is feeling overwhelmed and stressed and anxious. Everyone just feels anxious”
[Lucy]

With such an image of normality attached to negative SMHWB, many accounts pointed to students' awareness of others' difficulties as a means through which to cope with their own problems. It was important for several participants to note how they 'weren't the only ones', that they were aware of other students' struggling. Described in stories in particular was how personal mental difficulty derived from 'feeling alone' could be combatted (even reframed in more positive light) through recognition of mental distress as a simply normal and shared part of being a student:

“I am struggling ... but I am aware that I'm not the only one and that everybody is struggling ... I feel like it is normal and it's not necessarily a bad thing that it is that way at the minute ... as much as I might be dealing with a deadline stress, I know there's going to be other people who are dealing with the deadline stress too. It's not just me.” [Alex]

“we had a group chat for the whole cohort and I found that really important ... because, like, everybody does feel the same way as you, it's not just you ... when you feel like it's just you, it feels a lot harder, but when you feel like a lot of people feel the same way, it feels so much better and ... it just makes you feel less alone.” [Lucy]

In response to realisation of negative SMHWB experience as normal, indicated was increased engagement in self-learning and -responsibility in reference to their own mental states. Having identified the acceptability for their SMHWB 'baseline' to be understood as negative, students described subsequent approaches to it that sought incorporation rather than avoidance or removal of negative experiences. Described was the giving of personal attention to not *“let it [university] come over me”* [Nicola], despite 'knowing' university life as inherently stressful and inevitably problematic for SMHWB. Students described their own learning from negative SMHWB experiences, (identifying personal boundaries, et cetera), as used for proactive and preventative decision-making in relation to their own SMHWB. For example, in relation to social

activities, students did not describe disengagement or evasion as a consequence of previous negative experiences, but rather more assertive, positive-oriented SMHWB decision-making in light of having learned what was bad for them:

“my second year was difficult ... Whereas this year, I know what’s good for me and I know what’s not good for me. I’ve been more assertive to other people about what’s good for me [pause] ... I’ve been able to voice how I’m feeling more and stand my ground a bit ... I’ve become better at saying ‘no’ to things that I probably wouldn’t have said no to before ... before I was just flat out doing what everyone else wanted to do ... now I’m fine with saying, ‘no, I’m not going there, you can go without me’ ... all students, no matter how good or bad their mental health is, they’re all going to experience some form of decline during their student years ... it’s about creating healthy habits to almost minimise the effect of things that just come hand in hand with studying for a degree.” [Lily]

Overall implied across such stories was a general view of SMHWB as an issue as being not about complete avoidance, removal or even prevention of negative experiences, but rather finding/achieving balance in a climate where negative is already perceived as normal.

5.5d. University as Hindrance to Balanced SMHWB

Having established a view of ‘good SMHWB’ as being about ‘achieving balance’, the final perception conveyed was that in trying to realise the equilibrium, university is often experienced as an impediment. Participants presented as deeming their university experience not a root-cause of their problem(s)²³ but often responsible for worsening difficulties. University pressures were implied as *“always just like the cherry on top of a turd”* [Gemma], as it were, difficulties layered on top of other problematic life circumstances and experiences. Being a student presented as ‘making things harder’ than they need or should be. Obstructions in the way of personal attempts to maintain more balanced states of SMHWB were identified by participants as ‘inflicted’ by their institution. Ultimately, simply being at university was implied a hindrance rather than help – being a student appeared regarded as a

²³ It is *“not really the uni’s fault.”* [Jorja]

source of exacerbation for already-existing difficulties through which individuals were trying to navigate (Appendix 14):

“University puts a lot of stress on because, I mean, it’s what it says. At the end of the day, it is difficult. But on someone who’s already got a fragile mind, it can be a lot harder.” [Dave]

“being a student, if I’m feeling down or whatever, it’s a lot harder to deal with, and my mental health takes more of an impact whilst being at uni than what it would do if I wasn’t.” [Amy]

In exploring further what it might be about being a student at university specifically that hinders ‘balanced SMHWB’, important is one of the participants’ baseline perceptions of their university. As an opening standpoint, presented was a hopeful view of their institution; expected were compassionate and understanding reactions and responses to declarations of difficulty to any institutional contact-point. Such expectations appeared grounded in an overarching perception of university as *the* cornerstone aspect for their current lives (particularly for those younger in age) (See Ch6: p.253). However, participants subsequently described negative SMHWB stories when interactions with the institution did not match these hopeful expectations. Suggested was that experiences of system and staff responses that challenged on-pedestal regard of the university functioned as negative ‘triggers’, prompting feelings of loneliness, isolation, insecurity alongside disappointment. A particular element in this negative ‘triggering’ referenced participants’ in-university-developed realisations that the university lacked appreciation and space for certain types of (emotional) experiences. Notable were accounts of a lack of support and understanding in university spaces for revealed bereavements. Whilst expecting from the university (what was deemed) appropriate compassionate and understanding responses and support, experiences were not forthcoming in this regard. Particularly problematic for SMHWB were university responses requiring students to ‘just continue regardless’ – participants implied feeling dismissed where no acknowledgement of a loss was incorporated into their academic requirements. Overall, unmet hopeful expectations of university responses in reference to bereavement were key to negative SMHWB accounts:

“My Nanna passed away when I was at uni ... I didn't really get support from uni, which wasn't the best. I told my personal tutor and she was just like, 'oh right', and that was pretty much it ... I wish uni gave me more support 'cause they just kind of leave (sic.) me to it ... That was probably the lowest I've ever felt in my life. I just felt alone, sad, absolutely awful ... the day she passed away, I was supposed to do a presentation, so I emailed the lecturer ... And she was like, 'OK, you can do it another time' ... there was no sort of sympathy ... I was passed off, which I thought was a bit weird considering it was literally the day she passed.”
[Anna]

“there was just no space in uni to talk about it ... university just don't really acknowledge that we go through normal things like normal people, like our parents die, our parents get divorced, our grandparents die, our brothers and sisters die, people die, and that happens to students as well ... there was no one for [my friend] to talk to. His sister died ... and it was like, 'what does he do? Who does he talk to? Where does he go?' There was just no space for that. There was no one to talk to.” [Gemma]

Conveyed overall was an apparent shift from optimistic perceptions and expectations attached to university to one dominated by disappointment and frustration because of participants' experiences. The negative perceptions and/or expectations appeared formed as a consequence of students coming to identify their institution as mismatched with their ideas of what university *should be* as well as actually detached from/unaccommodating of their 'real' lives.

5.6. Summary of Students' University-Specific Connections to SMHWB

This chapter has presented the university-specific explicit and implicit references within participants' SMHWB stories. Presented has been a nuanced and detailed account of multiple facets of university-specific experiences that were connected with changing SMHWB by the students. Four overarching themes – 'Institution-led Mechanisms, Systems and Procedures'; 'University-bordered Relationships'; 'University as a Mirror'; 'University-specific Perceptions and Expectations' – were developed from the data. Interesting was the apparent dominance of attention afforded to the visible, physical elements of a university experience – systems and procedures as well as learning and teaching elements provided the main reference sources for these students' accounts. However, while these provided focus in many

descriptions, crucially signposted alongside were more latent and felt experiences referencing relationships and (dis)connections between perceptions and/or expectations and realities. Notable were apparent views of negative SMHWB as 'normal', 'balance' as a descriptor for 'good SMHWB', and of university as not the cause of distress but a powerful hindrance to achieving balanced SMHWB. Many participants presented as facing negative challenges to their university and student-role hopes, which in turn were linked to the mapping of negative SMHWB. Such elements suggest that university may be not only transitional as a physical experience in a life-course, but as a mental one, in reference to changing perspectives on 'traditional' understandings of what a university is/should be. Emotional responses prompted by realisations in reference to the latter aspect can have strong implications for SMHWB.

Chapter 6:
'Felt Life' – Underpinning Emotions in Student Mental Health, Distress and Wellbeing

6.1. Introduction

Having described the elements that mattered to these students in reference to (S)MHWB in their 'General Life' and 'University Life' facets, this chapter acts to bring these areas together; explored are the commonalities running through and across them. Participants appeared to frame their SMHWP in emotion terms; they talked about their experiences in terms of the feelings they provoked. Thus, this chapter describes the analysis-identified three underpinning emotions that together comprise the students' 'Felt Life', a usually unseen undercurrent to SMHWP – irrespective of what issues arose for the individuals, these presented as the common feelings guiding their experiences. Students demonstrated a university experience as a deeply emotional endeavour, though found their university context as a place to heighten certain (negative) feelings over others. The three emotion-themed experiences to SMHWP identified were 'Feeling in Control'; 'Feeling Secure' and 'Feeling Recognised' (see table below):

(Table 11. Chapter 6 Theme Summary – 'Felt Life' underpinning (S)MHWP.)

Theme	Sub-themes
<i>Feeling in Control</i>	<ul style="list-style-type: none">• SMHWP as a Matter of Luck and Chance.• Pressure to 'Be in Control' at University.• Student Control via 'Self-Support Arsenal'.
<i>Feeling Secure</i>	<ul style="list-style-type: none">• Threats to Feeling Secure in University Experiences.• Achieving Balance to Counter 'The Rollercoaster'.
<i>Feeling Recognised</i>	<ul style="list-style-type: none">• Being Unseen in a System; Just One of Many.

6.2. 'Feeling in Control'

'Feeling in Control' relates to these students' sense of command and personal agency within the university context. Emphasized was a want and need to feel in control. Sensing a lack of control in a situation contributed to deepening anxiety, and

thus was central to these students' understanding of negative SMHWP. Central to the need to feel in control was a general perception of university as a context permitting self-authority. University, as both an environment and an experience, was expected to guarantee autonomy and an opportunity to be independent, particularly amongst students entering university directly after school completion. The apparent promise of university as a place in which active decision-making for self is both encouraged and necessary appealed to participants because they identified this as important for improved (S)MHPB generally:

"I like control. I ... like the control over my things, and when I don't have the control [pause] it's the not knowing and not having the control of what the outcome is, is the thing that drives my anxiety the worst."
[Dave]

"I think it's better me having my own independence and responsibilities ... it's better for my own mental health because it forces me to do a lot of things that I perhaps wouldn't [pause] prioritise at home." [Lily]

However, perceptions and expectations that being at university would be a time in which they could feel in control (or more so than they had previously) were described as misplaced. A consistent theme of feeling controlled rather than in control during their university experiences was apparent. Participants frequently storied that their student experience served to dash personal power hopes and feelings, rather effecting the opposite, producing feelings of vulnerability and restriction. Experiences within different branches of university activities that prompted feelings of oppression, even entrapment, were described – references to formal procedures to gain academic extensions or other forms of support were present, as well as problematic relationships with university staff. Described were personal experiences of coming to a view (through experience) of their institution as almost dictatorial, a remover rather than enhancer of personal power and this provoked negative SMHPB:

"the university's power that they have, that 'Whatever we say goes and you have to just comply with it' ... they have that power over us. It's just that sense of feeling powerless and not being able to do anything ... university's supposed to be free and you're supposed to be allowed to express yourself and whatever, and it was just another block on that." [Nicola]

6.2a. SMHWB as a Matter of Luck and Chance

Emphasizing ideas about personal control were participants' references to the importance of luck and chance in (S)MHWB. These provided strong indication of the way in which students' can feel 'out of control' in relation to their SMHWB. Positive SMHWB was perceived as something that happens by chance; it is not something an individual student can have full control over. Almost universal across the interviews was a suggestion that positive SMHWB is linked to the extent to which an individual identifies or feels themselves to have been 'lucky' in a university-related situation. Luck was heralded as important in reference to numerous aspects of student life, such as accommodation, work environments, personal technological resources and course-related allocations, teaching and learning practices/requirements (See also Ch4: p.137; Ch5: p.169, p.194). How 'lucky' a participant identified they had been at university was often described through comparisons with known or perceived experiences of *other* students.

"I really benefitted from having a nice environment to work in, if I hadn't had that, it could've been a lot more stressful ... people I know have got really bad Wi-Fi connections, the house isn't nice, and if you've not got that nice environment and the right set up, it can be an awful thing. I got lucky, very lucky." [Maguire]

"I think I've been lucky that I've got a half-decent computer, I've got a decent set-up in my room and if I hadn't have had that, I think I'd have been a lot more stressed than I have been." [Dave]

Most significant were luck levels ascertained in relation to academic teaching staff and supervisors. If a student identified themselves as having had bad luck in reference to the lecturers they had, work-related anxiety and thus negative SMHWB, were more likely. However, where students considered themselves lucky to have encountered their tutor(s), more positive experiences and indeed SMHWB were described:

"I've been lucky with educators in that they've all supported me very well and been nice, but I know that there's other people that maybe haven't got on as well with their educators and ... it's caused them to have to stop the placement or not be able to continue on." [Sara]

“she was just so nice, and I was really lucky that [pause] I got someone like that. ‘Cause I know that a few of my friends got dissertation supervisors that were really unresponsive on emails, weren’t very helpful, were quite critical ... But her approach was really nice, she was really encouraging. I could’ve got someone a lot worse. I was really lucky to have [pause] someone like her.” [Lily]

Alongside these university-specific relational elements, there were also accounts of the importance of just being ‘lucky in life’ in reference to SMHWB impacts. The non-materialisation of always-possible (out of personal control) general life difficulties or negative experiences was connected with a sense of having been lucky, which in turn was deemed helpful for more positive SMHWB experiences. Not having negative personal general life circumstances – such as losses, parental divorces, family illnesses, financial difficulties – to think or worry about made a student ‘lucky’ and, importantly, more able to describe their SMHWB experiences in positive terms:

“in other years there’s been problems that have happened, like in our first year when like we had personal and family things going on, so it’s harder to concentrate. I feel very lucky that nothing has happened, because if something had happened, I probably wouldn’t have done as well as I have done. And it’s out of your control whether something like that happens. It’s just potluck.” [Cherry]

The significance of luck should be considered in two specific ways. First, identifying personal *good* luck in student experiences may potentially remove an individual’s sense of a need to think about/monitor their (S)MHWB. Consideration of self as ‘lucky’ presented here as tallying with an understanding of their SMHWB as positive, ‘nothing to worry about/act upon’:

“I do think I’m quite lucky now, and I feel that’s probably why I don’t pay too much attention to my mental health.” [Jorja]

Second, that *good* luck experiences can induce feelings of being in control of both self and situations; *bad* luck may contribute to the emotional opposite. Perhaps the participants’ implied connection between ‘being lucky’ at university and positive SMHWB is indicative of a broader perception of latter as actually somewhat outside of personal control, subject to ‘student experience’ as determined by the university as much as themselves. Essentially, the students’ emphasis on luck in these

accounts might indicate an inclination toward a passive approach to both university and ‘general life’ difficulties, led by a perception of them as presenting at random and, importantly, beyond their personal control.

6.2b. Pressure to ‘Be in Control’ at University

Participants often described feeling controlled by as opposed to being in control within their university experience. University culture as well as specific mechanisms were connected to negative SMHWB via experiences detrimental to participants’ senses of personal power. Whilst the usurpation of student-self-power via pressure to conform was talked about in relation to other students²⁴, the university (and its rhetoric(s)) were also pointed to as exacerbating the pressure and reduced feelings of control. Institutional discourses were described as pressurising, with communication emphasising university as a time of plentiful opportunity not to be lost were implied as pushing forward ideas of how a student *should* be and what a student *should* do. Participants described feeling unable to challenge such institutional discourse, despite recognising it as unappreciative of individual student circumstances:

“the whole ethos at uni with that whole, ‘You have to do everything, and you’ve got to take control and you’ve got to be amazing and do all of these things ... and blah, blah, blah,’ I would never have said like, ‘this is terrible for me. I don’t want to do it.’” [Gemma]

Across all students’ accounts, university work was identified as so time intensive that it usurped the ability to implement their own self-care strategies. Academic experiences, for example, were cited as disruptive of creative or arts-related activities

²⁴ Described, for example, were experiences within which participants implied having to relinquish control of themselves to navigate pressures to conform to peers’ expectations and attitudes. Participants provided accounts of ‘struggling to say no’ or having either to censor themselves or perform an accepted view in light of others’ dominant voices/positions. Students’ talk about their social media activity in relation to the(ir) ‘Student Experience’ was particularly illustrative of the abandonment of their authentic wants-for-self in light of ‘what others (might) think’: *“my friends go to different unis so I think it can become quite competitive over who’s having the best time, who’s at the best place. So in first year I posted more stuff on ‘Oh look what I’m doing, [UK location] is unreal!’ Was my reasoning behind that right? Maybe not.”* [Sara]. Such elements presented as problematic for SMHWB because students implied an internal struggle as part of the explicit experiences – despite feeling (knowing) they would want something different for themselves, they felt no choice but to resist or change themselves to ‘fit in’.

(including fiction reading) – these were cited as important for relaxation, comfort and stress-reduction. Mia described anxiousness upon realizing how it, “*almost got to the point where it was like a chore to read [fiction],*” as a result of overwhelm induced by a deadline cluster, whilst Alex described how she “*missed doing my art. [pause] I literally stopped doing it because of uni ... now I’m learning it again for fun*” [Alex]. Also described was feeling pressure to prioritize university needs at times of personal health crisis. Students overall implied feeling ruled by academic requirements, required to ‘put university first’ regardless of personal need (Appendix 14; See also Ch5: p.218-20):

“I remember ... I ended up self-discharging myself from hospital and I walked straight to the library. Straight from the [local hospital] [pause] because I knew that I needed to get it done. [pause] ... I shouldn’t really have discharged myself, but I was like, ‘I really need to go to the library. I really can’t afford to miss another day.’” [Lily]

*“as the deadlines approached, my mental health took a back seat. It was prominent. It was flaring up ... but it was hard to work on my mental health because I just had that **much** [participant emphasis] to do. In a sense it was like, ‘I can’t. I don’t have time in my day to worry [laughs] about my worries’ ... I was literally a robot, like a drone ... I never really woke up and was like, ‘how is [own name] doing today?’. It was always like, ‘nope, don’t, can worry later.’ ... that was the hardest bit, trying to find time for myself among all of that.”* [Dave]

Expressions indicated student recognition of and want for personal power and responsibility in relation to matters of (S)MHWB. However, the (symbolic) power afforded by students to university work can be immense, to the point where they may actively decide to self-neglect. Despite any institutional discourses presenting choices for ‘thriving’, academic commitment seems most often decided as the priority rather than SMHWB self-management.

Noticeable also was a mismatch between institution and students’ perspectives in regard to where individuals might be expected to be in/take control of MHWB. Participants appeared to challenge the fixed nature of expectations placed upon them by the university. Students indicated a want for greater university understanding regarding across-time changes in abilities to talk about and help-seek in reference to their (S)MHWB. Despite a want to be in control, sometimes it may be the case that a

lack of experience can prevent a student from taking decisive action. In particular implied was a view that younger undergraduates may not be as able as expected to ask for help, precisely because they can lack MHWB knowledge, confidence and indeed vocabulary (literacy):

“when you are more mature, sometimes you do make better, more informed choices ... I know way more about myself and what I'm able to handle now, in terms of my mental health ... If I'd gone to uni and they were like, 'you should talk to the mental health team,' I would've been like, [snorts] 'No.' [Laughs] You know, 'cause you're eighteen.”
[Mia]

“unless you are very open about it and very able to voice it you don't get that much support off the uni ... I genuinely don't believe that people who've come in straight from school can do that.” [Alex]

Also important were comments regarding expectations attached to student-to-student (peer-to-peer) SMHWB support. There were accounts that implied there are limits to where students should 'take control' themselves in reference to the SMHWB. Implied was recognition of the university as considering SMHWB difficulties as individually experienced. However, witnessing other students' distress was described as impactful upon individuals' senses of control and responsibility. Feeling responsible (in control) of others' SMHWB as well as their own was identified as potentially problematic. Students aware of and caring for other students experiencing mental difficulties described feeling alone and pressured in the experiences. There were stories implying the university should step in, or at least provide support for the peer-supporters. Where the university was identified as not assuming control/responsibility, participants described some deterioration in their own SMHWB:

“one of my friends has been struggling for years with her mental health and just got to breaking point ... I found it very hard, especially because she was very closed off about people knowing, didn't want her parents to know, didn't want her close friends to know, didn't want the people she lived with to know. I felt a lot of responsibility in that because I knew that potentially something very bad could happen and I was just sitting there with that information ... that was a time where I was not really knowing what to do, and that I found hard ... it is hard taking on other people's things.” [Sara]

“that's the side the university don't realise, is if they don't do something, that goes on another student. And often the student it goes on is also already having five other people rely on her and then their own mental health. They don't do something, not only does it impact that student, but every other student that that student's in contact with.” [Charlotte]

Indeed, important to suggest from such examples is that university encouragement for students to ‘look out for each other’ may rather produce feelings of being personally unsupported. Whilst participants seemed to broadly want to feel in control, implied in the accounts was a want to feel supported by their university to assume that self-control, and for that to refer to their *own* SMHWB (not that of other students).

6.2c. Student Control via ‘Self-Support Arsenal’

Regard of university as ‘not the (only) place’ for support appeared encouraging of participant action to ‘take control’, in order to feel their personal needs responded to. Described, in essence, were personal self-support armouries, the elements of which were deployed once individual senses of control had been challenged by their university setting. These included specific actions and decision-making to enhance their own senses of feeling in control which developed over time (Appendix 14). Tools for self-soothing at university were connected to what they had implemented for themselves in prior education contexts (See Ch4: p.133). These referred to both non-academic²⁵ and study-related activities. For example, importance was attached to ‘being/getting organised’ through forming plans, as central to feeling more in control of both the work and emotional state(s): *“when everything's planned out, I know where I am, I know where I need to be, I know what I need to be doing, and it gives a sense of calm, a level playing field.”* [Bobbi]. Most students described the act of planning (regardless of whether or not there was follow through) as something historically learned as helpful at times when anxiety was sensed. Ultimately, self-aid strategies embedded during personal histories provided students with ideas of ‘this is what I *always* do’ when difficulties occur.

²⁵ *“while I was at school and when I was at college, I found it [reading fiction] a very good way to get my brain to switch off from worrying about work, well just anything really ... reading was **always** [participant emphasis] my me time.”* [Mia]

A variety of alternative options for sense-of-control, *self*-SMHWB support were described. Clearing mess was seen as a means through which to enhance feelings of control and facilitate a more positive identification of their SMHWB. Students also made specific choices to devote time to self-reflection. Having time to review and negotiate with their own thinking about events and the accompanying (often negative) emotional responses experienced was deemed valuable. Taking time to ‘step back’, “*see the bigger picture*” [Sara], and personally clarify (even reframe (Appendix 14)) experiences and the associated feelings was described as an important means through which to “*fight back*” [Dave], feel more in control, and support their (S)MHWB. Another was the importance of recognising and catching ‘the little things’²⁶. Prompt personal reflection on small scale, individual ‘bad SMHWB’ risk indicators²⁷ was described as important to maintain balance in SMHWB: “*It’s trying to keep the little things in check.*” [Dave]. For example, instant identification of own uncontrolled or excessive emotional reaction to minor inconveniences was described as both an indicator of (S)MHWB deterioration and a prompt for swift self-support action (Appendix 14). Carrying out self-checking was implied as key to self-grounding, feeling more in control, and indeed preventative of difficulties worsening:

*“I remember one of the worst feelings while I’ve been writing my dissertation was I really wanted a cup of tea and my milk had gone off ... at the time that was heart-breaking. That felt like someone had said you’re never allowed back home again. So you ground yourself and you think, ‘right, what are you upset about here? ‘Cause it’s not the milk, is it? Right, well come on then, we’ll go for a walk. We’ll get that tea.’ ... you’ve **gotta** [participant emphasis] keep a check on the little things.”* [Dave]

Appearing most significant in the student self-support action arsenal to feeling in control was personal organisation and deployment of different relationships for different (S)MHWB purposes; descriptions of having multiple relationships and making deliberate choices about who to seek support from to support their SMHWB most effectively were present (Appendix 14). This applied to formal as well as personal relationships. In reference to the former, students spoke about doing their

²⁶ Participant frequently uttered collocation.

²⁷ In this context, ‘risk factors’ from the students’ perspectives presented as entirely removed from formal institutional understandings, concerning everyday life occurrences.

own research into external-to-university support and 'looking further afield' for help for their specific circumstances – contact with charities (national and local, with foci relevant to the individuals' specific concerns) were described.²⁸ In terms of the latter, students described knowing only certain people can be trusted with certain information (and problems). Appreciated was feeling in control in the choosing of who to share with and seek support from:

"it's not so much one relationship, it's all [participant emphasis] of them. Having friends that are doing the same course as me is important, because then I can talk about what I'm learning about and any problems that I'm having, to see if they can help and vice versa ... that's important, that there's somebody else who understands exactly where I'm at, what I'm doing and what I'm going through. Having me (sic.) brother, he's good just as a sounding board. He helps to temper my emotions, so if I'm angry about something, I'll ring him and then by the end of conversation, I realise that I might be overreacting or that maybe I'm angry for the wrong reason ... he lets me rant and rave until I come to a conclusion myself ... being able to have those different people as sounding boards for different things, it helps me keep a level, for want of a better way of putting it ... it's good to be able to get different opinions when I think I'm [pause] struggling." [Bobbi]

Deliberate choice to conceal personal mental health information/experiences in some relationships and *ending* relationships were also indicated as much self-SMHWB-support actions as deciding who to share with:

"if the friendship or the relationship isn't serving me, I'm done. I draw the line and I move on." [Bobbi]

"there's a few people who I'm very closed off with and they don't know a lot. There's a few people who I've phased out of my life 'cause ... I don't need to be friends with people who are just all about themselves." [Alex]

Overall, specificity in (formal and informal) relationships was identified as crucial to students retaining senses of control whilst trying to resolve or at least aid their own difficulties. Such clarity of expression regarding students' decisiveness (feeling in control) regarding 'who gets to know what' or 'who is trusted or not' in reference to

²⁸ "I went to a grief charity just to get a little bit of support." [Dave]

their (S)MHWB information has strong implications for interactions with university support mechanisms.

6.3. 'Feeling Secure'

The second emotional state identified through participants' (S)MHWB experiences concerned the extent to which they felt secure. Implied was the importance of feeling both emotionally and physically secure, with better (S)MHWB frequently tied to how secure the individual assessed themselves to be. Dramatic changes in self-security were used to explain why SMHWB had 'gone bad':

"I was so happy a year ago. And now everything I was so secure about is just to pot." [Pippa]

In reference to university specifically, students made clear their perspective that attending university in itself is risky – becoming a student was described almost as a gamble of self, immediately challenging to any existing feelings of being secure: *"[we] go all and on black, in gambling terms, and push it into a degree"* [Dave]. Students described 'giving up' previous secure aspects of their lives (particularly jobs) to enter university and retained awareness of having done so as their studies progressed (Appendix 14). Thus, 'student', inherently and even before actually experienced, means and involves feeling at risk, feeling *insecure*. However, a willingness to engage in the risk was seen through students' apparent regard of university as solid, stable and indeed protective, due to respectable reputations and league table positions – individual feelings of *insecurity* were expected to be countered by their institution. Ideas presented highlighted perceptions of universities as being strong grounding and stabilising forces for their students:

"It's a top ranked university now, isn't it? ... we have a brilliant university, so I have all the faith in the world that ... they're going to keep me safe." [Dolly]

"the university is your only anchor in life ... uni is that pillar in your life and the one focal point and the reason you're here and the reason you've moved away, then you look to them for advice." [Gemma]

Furthermore, the promise of security accompanying university more broadly seemed to extend post-graduation. University and student experiences were indicated as opportunities within which to access secure aspects for their post-student lives. An undergraduate degree was described as foundational, a secure springboard to leap from (Appendix 14) – a secure career cannot be had without one; the personal networks developed during university were hoped to be firm and long-lasting. Essentially, there was regard of university (experiences) as providing lifelong secure elements:

“at university, you meet the people that you’re gonna go through life with. Don’t get me wrong, I don’t expect us to be going out for drinks in twenty years, but I’d like to think that these people will always be around to chat to ... again, life’s constantly changing, you’re constantly moving things ... you create more, your groups move, but I like to think that these are relationships that will last forever.” [Dave]

A final important element providing emphasis to the ‘source of security’ idea was students’ conveyance of emotional impacts stemming from university ending, with participants’ feeling torn at the prospect of the end of their student time. Many wanted to move to new experiences but simultaneously not, because of the emotional insecurity provoked by the idea of university all coming to an end. Participants appeared largely to view and anticipate the end of their time at university in terms of loss; for many a major loss prompting of insecurity and alarm (Appendix 14):

“I don’t want uni to end right now. I didn’t really wanna get rid of my dissertation because it was the last thing, and although I was like, ‘thank goodness it’s done,’ it was also, ‘what do I do now?’” [Nicola]

“university has been a nice little routine and everything’s been where I know it is, and I’m moving onto the big world now, so that’s intimidating and scary.” [Dave]

Whilst ‘the university experience’ as a whole coming to an end was described as prompting anticipatory insecurity, there were also specific elements to SMWHB, such as the prospect of no longer having access to mental health support from the university. This was a source of worry, particularly amongst those with mental health diagnoses. The approaching end of their contact with university support services prompted realisation regarding how it had aided them to feel secure (via the creation

of personal routines and continuous relationships) and that they would feel destabilised without it:

*“I finish uni next week, so I’m losing all the support I’ve had from uni. I’ve had the [same] mental health practitioner from uni for three years ... and for the past two years I’ve spoken to her every single week ... I’m very kind of attached to her, and I’m also attached to my mentor that I have to help me with work, and I’m losing them at the same time ... uni finishing, I’m worried about what I’m gonna do ... I am really concerned about what’s going to happen ... given I don’t really have [pause] any kind of reason to try and keep myself safe ... I think losing that would [sic.] be a **lot** [participant emphasis] of change, going from speaking to someone every single week, that knows **every** [participant emphasis] aspect of my life, to then [pause] never speaking to her again ... I finish uni, I lose that support ... that is a **lot** [participant emphasis] of change ... going from having a lot of support [pause] to none [pause] I think that could probably have a really bad effect on me.” [Lily]*

Overall, the perception implied was that what is experienced within student time at university can and should provide solid foundation for both present and future lives. Also, the stability of the university’s specific SMHWB support mechanisms (See Ch5: p.173) was connected to stability in students’ states of mind – implied was a linking of support service insecurity/uncertainty to greater levels of negative SMHWB: “*good student mental health is obviously facilitated by good mental health services within the university*” [Mia]. Ultimately, students perceived their university as having responsibility to instil in them a feeling of security, and through realising this responsibility, by extension, SMHWB may be supported:

“I just want uni to make people feel comfortable, not even happy, just make them feel safe and comfortable.” [Pippa]

6.3a. Threats to Feeling Secure in University Experiences

Identified in accounts were descriptions regarding university successes in creating ‘sites of feeling’ in reference to comfort, safety and security. Various physical as well as imagined aspects of the institution were described as providing stability, something enhancing of personal senses of security and in turn SMHWB. Specific members of staff were described as trusted and therefore secure. Drawing on

sensory experiences and referencing campus geographical locations, described was a regard of the university almost as a protective bubble.²⁹ The library was a particular focus for positive accounts, as a guaranteed anchoring location; the support services rooms were also appreciated as 'safe spaces' (Appendix 14).

However, in other aspects of their experience students appeared to feel less secure. Perhaps because of the perception of university study as something risky to undertake, heightened emotional significance was attached to all activities associated with student life. However benign/*non*-harmful a circumstance might appear to an outside eye, certain cross-university scenarios could cause distress to individual students due to the perceived security challenge they posed. For example, academic performance and achievement (See Ch5: p.191) were described as important for SMHWB not solely in themselves but as a most meaningful avenue through which an individual assessed whether or not 'the risk of university' was overall 'worth it'. Similarly, in reference to group working (See Ch5: p.189), students' dislike regarding their group's composite membership might be best considered/understood *not* at face value (as something akin to a tantrum about not being allowed to work with who they wanted) but rather in terms of what the removal of personal choice might mean – a lack of access to working with those with whom they feel accepted and secure. Thus, appearing through these interviews was suggestion that SMHWB connection/experience may not be determined by the seen, physical circumstances themselves; rather more significant is what those circumstances *mean* in terms of impacts on individuals' senses of self-security.

Moreover, significant was realised disconnect between the participants' 'security provider' expectations of their university and their actual experiences. 'Failure' in various institutional facets and activities were described, indeed blamed, as reducing of personal senses of security, this forming a key element in negative SMHWB stories. References included academic staff not making them feel comfortable or being unable to provided concrete guidance; perceptions of their student experience

²⁹ "my idealistic picture of uni, 16, 17-year-old depressed me, thinking ... that life would be amazing because I was in the uni bubble" [Charlotte]

as not preparing them for ‘the real world’ well enough (Appendix 14); obscure institutional decision-making and mixed-message university communications:

“as a tutor it’s your responsibility to make your students feel comfortable ... I felt threatened by them [voice rises high], I would definitely say.” [Dolly]

“I’ve actually had lecturers, when you ask them a question ... they have said, ‘I don’t actually know what exactly to do,’ and I just think, ‘well if you don’t know, then how can I know?’” [George]

“the changing of [personal] tutors doesn’t help. I need the same person all the time ... I don’t understand why they change.” [Alex]

Furthermore, to be noted were references from many of the participants who identify as female - specific attention was drawn in their accounts to details of the Sarah Everard case³⁰ (a case in England in March 2021 in which a woman was kidnapped, raped and murdered as she walked home at night). For several participants, the case prompted a sense of it being generally *“a really scary time, I feel, to be just a female student”* [Pippa]. Increased feelings of personal physical insecurity and fear about walking alone at night, were mentioned (Appendix 14). Most significant to these accounts, however, was negative assessment of the university’s response to the case and their emotional reaction to that. The *not* providing/issuing of an institutional statement acknowledging the event was perceived as the university underestimating the strength of feeling of insecurity amongst its identifying-as-female students:

*“all of the stuff was going on Instagram and all the lighting the candles. Then it was police arresting the girls and stuff like that ... and I was like, ‘OK, the police **aren’t** [participant emphasis] on our side,’ and [my university] didn’t put a statement out. [pause] Okay, so then the university hasn’t recognised that’s a problem. I know girls who’ve been spiked in the SU, so like campus isn’t even safe.” [Charlotte]*

Additional stories beyond this specific case came from students identifying as female that indicated there are aspects of female experience (such as pregnancy) that

³⁰ Sarah Everard was a 33-year-old woman who was kidnapped, raped and murdered by a police officer in south London, UK, on 3rd March 2021.

remain underacknowledged in university settings – this hiddenness may have the potential to stoke individual feelings of insecurity with resulting impacts for (S)MHWB:

“I'm aware that if I was in a full-time job and decided to have a baby, I would have the very confident backup of maternity leave ... Whereas now, I can't decide whether to ... I'm like, 'Actually, if I want a baby, why don't we just do it while I'm at uni?' And then I'm like, 'But what if I can't do my degree? What if I can't go on placement...?' I don't wanna hinder my uni experience ... I don't know how being pregnant is dealt with at uni. I don't know anyone who's been pregnant at university, and I'm like, 'Is there much help in place?’” [Mia]

Indicated by participants was a want for university clarity and support when experiencing feelings of insecurity in relation to their wider lives as much as for student-specific scenarios. Alongside institution-specific features criticised for making feelings of insecurity endure, also suggested was institutional failure (however unintentional) to acknowledge and engage with the significance of wider societal issues for student body members as prompting of doubt, discontent and frustration. Such overlooking in turn presented as reinforcing students' feelings of insecurity, consequently illuminating further this negative-emotion underpinning to their SMHWB.

6.3b. Achieving Balance to Counter 'The Rollercoaster'

When asked how they would describe their university and SMHWB experiences overall, participants commonly uttered 'up and down'. Such language choice emphasises further the suggestion that feeling *insecure* can be a key feature in university and student experiences at the present time. Feeling more secure as a student was described as not easy to achieve, not least because university/student emotional life appeared to these students as inherently characterised by extreme emotion volatility – *“I'm either happy or panicking.”* [Pippa]. Consequently, feeling steady as a student was implied difficult to achieve because of the *“the natural rollercoaster”* [Dave] of being a student. It is not insignificant that the most common adjective chosen to describe overall assessments of their SMHWB experiences was the word 'rollercoaster':

“this has been the worst year emotionally. It’s been so much of a rollercoaster that it’s been unbelievable, and I’ve just really struggled a lot of the time to keep it under control ... a complete and utter rollercoaster ride, with massive highs and massive lows.” [Alex]

Recognition of the negative impacts of the ‘up and down’ nature of university/student experiences did not imply these students’ capitulation to it. The association of ‘good SMHWB’ with ideas simply of balance, and achievement of that balance (See also Ch5: p.226-9), was described as requiring strategies to counter insecurity, in favour of feeling more grounded in experiences. In this regard, participants spoke about what steadiness as a student looked like for them, and what they did to develop feelings of personal equilibrium. Significant was that accounts had an absence of expectation from their institution to aid in achieving balance. Indicated was more the idea of it being a personal responsibility to locate the means through which to feel stabilized: *“it’s all about finding **your** [participant emphasis] balance”* [Anna]. Descriptions of keeping in mind specific physical and mental points of reference to which they could return, reflect and act upon should their sense of security be disturbed were relayed. The noticing of body-linked aspects (ranging from aspects such as increased acne to physical pain sensations) was frequently talked of as initiating reflections and subsequent actions to redress balance. This was particularly important for those students living with diagnosed physical conditions, some of whom described reflecting on physical pain levels to understand any current imbalance in their (S)MHWB, but universally mentioned were self-assessments connected to imbalanced sleep patterns (having too much or too little sleep) (Appendix 14). Acting to ensure personal physical balance in terms of both stillness and movement, being inside and going outside, not spending too much time in the library (or any other location) in comparison to other places were also mentioned as facilitative of both feeling more secure as a student and more balanced in reference to their SMHWB (Appendix 14). Lastly, academic productivity levels as compared with amount of social engagement were also common areas requiring attention – if these two particular aspects are balanced, so too is SMHWB:

“it’s getting work done whilst sustaining an enjoyable social life ... being able to do those things, and not letting either side drop ... I think if you can keep both sides up at once, balanced, then you’re alright” [Maguire]

“it’s balance, being able to keep up with your workload, but having enough downtime, having enough social time and then the time to study ... for the whole mental wellbeing, it is about a balance. If there’s too much of one thing, there’s not enough of another, which I think is really important.” [Bobbi]

Overall, notable in accounts was that any achievement of balance and therefore sense of personal security whilst at university required deep personal reflections and the implementation of individualised actions-for-change (regardless of any remaining want for university aid).

6.4. ‘Feeling Recognised’

The third emotional underpinning to these participants’ SMHWB accounts concerned how visible as an individual person, rather than ‘just a student’, the participants assessed themselves to be within their university context. Feeling recognised and valued presented as perhaps the most significant undercurrent sentiment, given students’ feelings of control and security rested much on how appreciated by their institution as an individual they considered themselves to be.

Students’ implied being hopeful upon entry to their university experience of their individuality being recognised and responded to by their institution. Accounts where this was realised did appear. Peppering transcripts were experiences of individual acknowledgement providing sustenance for more positive SMHWB throughout their student journeys. The majority of such accounts revolved around relationships with *individual* staff members (See Ch5: p.212). For instance, experiences describing staff members as providers of reassurance and encouragement for students’ specific circumstances were common. Notable was the importance of recognition regarding personal *academic* ability. Significant to the speakers and their SMHWB experience overall was not just the kindness in these interactions but the signification through them of their individual value and ability:

*"I can remember having a personal tutorial this time last year ... and my tutor had asked me what I wanted to achieve, what I wanted my final classification to be. I'd said that I'm aiming for a 2:1 and she really challenged me, like 'Why?' Not in a bad way, it was, 'oh, well why are you not pushing for a first? Look at your grades, it is achievable.' And I've had that in my head this whole year. She didn't say it in a pushy way, she didn't say it in a negative way, she didn't challenge me negatively, she challenged me in a good way. Just one sentence made me think this whole year. And anytime I've been doing something or thinking about a result, that's what I have thought. And it's not that I have in my head, 'oh, she's gonna be disappointed if I don't get it,' it's more, 'she thinks that I actually can do this ... she brings a lot of **positive** [participant emphasis] support. That's a reassuring thing to have, to know that there is someone there that actually cares" [Sara]*

Feelings of recognition also appeared to stem from staff relationships providing students with a sense of an institutional-someone 'having their back'. Implied was a need for personal-level affirmation of their emotional readings of university-related experiences from staff – when such affirmation was both offered by and received, the relief and recognition felt and expressed appeared strong. Accounts from students required to complete placements particularly highlighted this. Where relationships with placement staff became problematic, support from their course staff members, in the role of 'go-between', could be crucial in facilitating students to feel recognised whilst in their liminal, not-employee/not-student activities (Appendix 14):

*"I explained my situation [to course tutor]. We had a chat. We talked about it all. She went off and found some information for me. It was reassuring to know that there was somebody who knew what **I** [participant emphasis] was going through ... there was the empathy ... as opposed to feeling like you were a bit of an annoyance or taking up time that you shouldn't be." [Bobbi]*

Similarly, having a sense of university staff as 'having their back' was important in reference to 'General Life' circumstances when family/home-related circumstances were emotionally difficult. Through listening as well as conduct (via maintaining frequent contact and swiftly responding to queries) staff were described as both helping to lessen students' role conflicts and conveying their understanding of the difficult circumstances faced. Appreciation was expressed in reference to times when staff shared their own strategies for 'difficult times' or demonstrated flexibility in

interactions based on identification of students' real needs (Appendix 14). Staff were importantly regarded as possible sources of normalisation of students' emotional responses to difficult general-life circumstances – when this was realised students felt positive benefits. Family illnesses, bereavements (See Ch4: p.150), divorces were all cited as important circumstances within which SMHWB deterioration could be prevented via staff acknowledgement and validation of the challenges students faced:

*“my dad was still getting [treatment for illness] at that time ... it was a stressful environment sometimes to work in ... I was always worrying that something was gonna go wrong. They [personal and course tutors] were very aware of that, and both of them supported me in that, in terms of answering any questions that I had, checking in, and also replying to emails quickly ... these two would've replied within the same day, usually within the hour, and that just really helps me, and really encouraged me. I knew that there was backing behind me ... how well uni **backed** [participant emphasis] me ... really made me feel more at ease with the whole situation.” [Sara]*

“my diss tutor was literally like, '[name] you need to get extensions because of how upset you are.’ I was like, ‘Thank you, [name], you've acknowledged it’, like I do need it and it's not just me being paranoid here.” [Pippa]

Overall, individual staff members' responsiveness to students during times of personal difficulty presented as equating to the conveyance of whole university understanding and individual acknowledgement. Both of these were seemingly crucial in the participants' emotional mapping of their SHMWB.

6.4a. Unseen in a System; Just One of Many

Though micro-level university interactions could sometimes provide the wanted/needed feelings of individual recognition and validation³¹, more of the

³¹ Important to note is that not all interactions with staff were positive. Disrespect, feeling ignored and invalidation were recounted from stemming from interactions with individual staff members. For example:

“there's one lecturer, he seems rude, a bit abrupt ... we were showing these videos we'd made as groups ... come to ours, played it, one of the tutors said, 'That was brilliant ... Right [lecturer name], what have you got to say about it?' 'Oh, I was busy downloading something. I didn't watch it.' [pause] and I was like, 'What?!' And then in our little private

participants' stories referenced wider university experiences as prompting senses of *invalidation*, *invisibility*, and *insignificance*. As previously described (See Ch5: p.205), university-wide communication on SMHWB was considered largely inauthentic, but participants also indicated a view of it as disrespectful, even insulting of reader intelligence. Participants implied feeling patronised after reading university communiqués on SMHWB (Appendix 14), knowing the information to be presentational as opposed to factual. They also implied frustration towards any institutional messaging about SMHWB because they identified within university *unknowing* about their real and individual circumstances and needs:

“Stop offering mental health support services that are so overwhelmed that it’s actually pointless communicating with them ... they’re like, ‘Oh yeah but our counselling service,’ and I’m like, ‘I probably wouldn’t get an appointment until I’d finished, so stop offering false hope.’”
[Charlotte]

“It’s emails and links ... it’s nothing to me. It’s virtual (sic.) signalling. It’s not real. It’s ‘Look, here’s some links. Learn how to breathe. Learn how to meditate. Come off your phone.’ It’s not realistic ... It doesn’t matter how much you read, how much you breathe ... Someone’s gotta understand you.” [Andrew]

Lack of responsiveness in university support operations was described as indicative of underappreciation of students' difficulties, the time pressures they were working within, and ultimately of the university not taking them seriously. In the face of such experiences, feelings of insignificance and non-recognition were indicated, as well as worsening of the existing SMHWB difficulties:

“sometimes [the university has] been late, like really late, to approve my extension, and I’m like, ‘Guys, [it’s] for anxiety and panic and you’re making me panic and be more anxious because you’ve not given me it!’ ... sometimes I have been like, ‘You’re making me more anxious than I need to be and I’m already anxious. Please help me out here.’” [Pippa]

group chat, it just went, ‘What the fuck?!’ ... It’s like you don’t stand a chance. I think that was the trigger last week, of why I found it so hard.” [Andrew]

“I emailed the heads of year and they’d get it solved, but I’m like, ‘if you can reply to them, why can’t you reply to me?’ ... Like, ‘I’ve been messaging you every week for five weeks, and then one message off the Head of Year and all of a sudden you’re available again. Why couldn’t you just reply to me in the first place?’” [Cherry]

"I know they're not sending it to me, as a person. I'm more of a number"
[Nicola]

*"you'll remember university, but university will never remember **you** [participant emphasis]. I'm just another cog in the machine ... you go through the system."* [Dave]

"they just think of us as students, oh sorry, price tags." [Charlotte]³²

Suggested was that even slight awareness/discerning of student-individual value to the university as numerical above all, (instigated through lived experiences and interactions within their institution), could be a form of 'trigger' for feeling *unrecognised* and *invalidated*, even dehumanised. Such negative feelings subsequently and directly connected to mental distress came more to the fore in these participants' experiences. Moreover, adding emphasis to this last point, an awareness of the university apparently prioritising public image (as part of business need; See Ch2: p.47) over students themselves was both visible and indicated as problematic to SMHWB. Bearing witness to institutional presentation of contradictory-to-personal-experience descriptions or concealment of information connected to 'The Student Experience' at the university was considered maddening. Students identified positive media coverage as mattering more to the institution than their lived experiences of being a student within it, this contributing to exacerbation of their feelings of not been seen or valued to the point of negative impact on their SMHWB:

"It was like, 'oh, the university offering all this help.' And it's like, 'are you? 'Cause we're not seeing it' ... they were trying to pride themselves on, 'oh, we're doing all this for the student body,' and most of the student body were like, 'how?'" [Dave]

"you're like, 'I'm sorry, I forgot it was a business.' ... The university doesn't care. As long as nothing gets out to the media, and, it sounds horrible, as long as no one kills themselves ... And, if it does happen ... 'we'll just cover it up. We'll just plaster over it. We just won't talk about it.' 'Cause it doesn't affect any other student, you know? 'If we just don't talk about it, who cares if they knew them?' They don't talk about it, it didn't happen ... [Most] frustrating thing ever." [Charlotte]

³² *"at the end of the day, the only thing the university's interested in is money."* [Andrew]

In prioritising public, media-presentable faces over concentration on the inside-university relationships with individual students, participants suggested that institutions can contribute to their own blinkering in reference to knowing and understanding what SMHWB *really* is. Key to the individual recognition and acknowledgement emotion underpinning in their SMWHB experiences was participants' apparent exasperation with the misalignment between what they saw as SMHWB experiences and what they perceived the university considering them to be. In alignment with elements earlier in this thesis (See Ch5: p.231), suggestions that institutional mapping of and action to address SMHWB are incomplete, even to a certain extent wrong, were described as directly because universities do not know their students *as people*. Participants spoke of a lack of authentic listening to and engagement with students' (lives) – through the university 'not listening', students implied feeling unknown and unacknowledged during times of personal SMHWB difficulty:

*“Uni asks you what’s wrong and they expect it’ll be something about like exam stress or stress with projects and stuff, and I’m like, ‘I’m not stressed about my projects. The projects are great, they’re really fun, I love them. What I’m stressed about is that the guy downstairs seems to want to do lines of cocaine on the table while I’m eating my breakfast’... saying ‘student mental health’ is a bit s**t [laughs], ‘cause it sort of makes it sound like we’re not people...this is mental health. You are a **person** [participant emphasis], not a student or a number or a statistic.” [Gemma]*

“there’s that thing of [imitates an institutional voice] ‘Your studies are so important.’ Well no. If someone needs caring for ... an independent grandparent who normally did their own shop now suddenly needs you to do their shopping, that adds to it. But they don’t recognise that. Like, when was the last time you spoke to students and actually listened to them?” [Charlotte]

Overall inferred from such perceptions were participants' perspectives of their university, and its provisions and mechanisms for SMWBH, as ill-informed. The perceived shortfall in university helpfulness could be seen in the stories as reinforcing notions of the institution as 'non-caring', and the students themselves as 'unknown and under-valued'. Overall, what was indicated by these students were the emotional

outcomes stemming from wanting to be recognised by their university as a person who happens to be a student, rather than a student only.

6.5. 'Felt Life' and the Emotional Undercurrents in SMHWB Experiences

The perspectives shared by the participants in their accounts shed light on the emotional complexity of and nuances in MHWB in a university setting. These accounts emphasised the importance of appreciating the *felt* nature across all students' experiences, as a means to support SMHWB. Irrespective of the situational factors, the students' stories and reflections on their impact on SMHWB highlighted three underpinning, interweaving emotion strands – these revolved around feelings of control, security and recognition. Overall expressed was a desire to feel a sense of shared experience alongside empathy for individual circumstances and needs within a university community. When interacting with university-life others (notably staff) who acknowledged their circumstances and concerns, students felt validated, supported and importantly more in control of their own SMHWB; where interactions were interpreted as downplaying the significance of personal challenges or involved visible lack of institutional concern, students' sense of disconnection and insecurity increased, as did negative understanding of their own SMHWB.

'Feeling in Control' related to personal senses of control and personal agency. The university context and mechanisms were often described as provoking of feelings of restriction, even entrapment. The emphasis placed upon 'luck' – being and feeling (un)lucky in SMHWB experiences – was significant. Indicated was a perceived lack of total control over MHWB as a student, which they wished to regain through personal command over elements such as time management, support sources, and relationships. Feeling in control of these aspects was seen as a way to prevent mental deterioration.

Students' senses of security were also crucial. Universities were held in high esteem by participants and were regarded as providers of security for their present and future lives. However, participants described experiences that challenged this perception, leading to losses of feeling secure and subsequent mental distress. Even the

approach to a university experience conclusion was implied as a source of anticipatory difficulty. Coping mechanisms when facing uncertainty revolved around attempts to achieve balance, as means to restore 'feeling secure'.

Students' want to 'feel recognised' as individuals beyond their student label/role provides a key undertone to their SMHWB experiences. Participants described frustration and feelings of insignificance when they felt their individuality unacknowledged within university relationships and structures. Indicated was desire for institutional recognition of themselves as people (first) with lives outside of their student role. Though participants did not express negative SMHWB as *caused* by their student- and university-related experiences, they did imply that university exacerbated difficulties through lack of recognition of their realities – insinuated was that institutional perspectives, structures and actions can hinder students in their efforts to manage and maintain their own mental equilibrium.

Overall, the need for 'The Student Experience' and SMHWB within that to be understood as a heavily *emotional* experience was conveyed as vital in these interviews. Key feelings for students presented as connected to personal senses of control, security, and recognition. Institutional (genuine) acknowledgment of students as individuals and university fostering of empathetic interactions were portrayed as vital in creating an environment in which students feel known, valued, and supported. Based on these participants' stories, institutional appreciation of these emotions, and action responding to them appropriately, would appear crucial to support SMHWB.

Chapter 7: **Discussion, Contribution to Knowledge and Implications**

7.1. Introduction

Across the preceding chapters, an approach to ‘thinking differently’ about SMHWP has been explored. A thematic narrative literature review drew attention to and critiqued traditional and institution-embedded perspectives regarding the labels and inter-sections between ‘Mental Health’, ‘Wellbeing’, ‘University’ and ‘Student’. Offered through the review was a justification for a newer framework for thinking about mental distress (the PTMF; See Ch2: p.66) and alternative disciplinary perspectives (sociological and historical) to current SMHWP research. Through social media elicitation and free association narrative interviews, participants shared in-depth stories and details about their (S)MHP. Findings resulting from the participant engagement were thematically presented across three chapters. Chapter 4 presented the ‘General Life’ area to the participants’ MHP; Chapter 5 described the participants’ ‘University Life’ as connected to SMHWP stories, and Chapter 6 comprised the interpretive account of the underpinning emotions (the ‘Felt Life’) that traverse participants’ narratives in reference to both ‘General Life’ and ‘University Life’ factors.

This chapter turns to provide an overview of the findings in light of the project’s original aims, objectives and research questions. Referring to all three aspects of SMHWP described, findings will be summarised, and their interweaving considered in light of existing literature. Explained will be how this work contributes to, extends, and augments current knowledge(s) relating to (S)MHP in the UK specifically. Both limitations and strengths of this project will be discussed. Signposted will be potential implications of this work, in reference to both actions and future research seeking to address university SMHWP.

7.2. Overview of Aims, Objectives, and Research Questions

The core aim of this research was to explore undergraduates' accounts and self-reflections regarding their own mental health and wellbeing within their overall experiences of student life. Guiding this exploration was the following research question:

'What do undergraduate students qualitatively express about their mental health and wellbeing experiences during their 'undergraduate stories'?'

Furthermore, to add depth and detail, the sub-aims and objectives posed (grouped into two areas) within the project were:

1. To explore undergraduates' accounts and self-reflections regarding their own mental health and wellbeing within their overall experiences of student life:
 - To explore the events, circumstances, timepoints, transitions and periods of change where participants identify their mental health, distress and/or wellbeing as a dominant feature.
 - To garner understanding regarding the shape of students' mental health, distress and wellbeing experiences within and across academic years, and to understand how time plays a role in students' own reflections.
 - To explore how student mental health, distress and wellbeing interacts with individual intersectional/other-life-role elements and contexts.
 - To explore how students talk about and describe their own mental health, distress and wellbeing management, coping strategies, sources of support through their university experiences, and to understand students' decision-making process(es) regarding self-care.
 - To identify where students describe institution-led support provisions/activities/initiatives as helpful and/or not helpful, relevant

and/or irrelevant, in reference to their mental health, distress and wellbeing.

2. To explore and increase understanding regarding what the terms 'mental health' and 'wellbeing' mean to participants during lived experiences of being a student.
 - To explore students' own references regarding such terms as 'trigger(ing)', 'sense of wellbeing', 'good mental health', et cetera.

7.3. Summary of Key Findings

The findings of this research illuminate temporal, spatial/environmental, relational and perceptual details and contexts impacting upon the students' lives and personal understandings of SMHWB. The project identified both single-point elements of note/concern and experiences of enduring significance across time in students' 'General Life' and 'University Life' contexts. Further to this, most importantly, examining potential commonalities across these two facets, three (S)MHWB underpinning emotions that together comprise the students' 'Felt Life' were ascertained – irrespective of what issues arose for individuals, 'Feeling in Control' 'Feeling Secure' and 'Feeling Recognised' presented as key to (S)MHWB experiences. Demonstrated were university experiences as inherently and deeply emotional endeavours for individuals, this having significant implications for their SMHWB. Altogether, the illuminating SMHWB risk factor detail and the underpinning emotions exploration provided through this research offers augmenting information for existing SMHWB research.

The 'General Life' elements described in Chapter 4 (See p.121-61) encompassed 5 themes: 'Time'; 'Place and Space'; 'Loss'; 'Relationships' and 'Macro-Level Threads'. Within these, there was reference to lasting influences from childhood, day and seasonal associations, and worries about the future. Participants' personal MHWB meanings and uses attached to places and spaces were also illuminated. The meaningfulness of different relationships (including with themselves) was described;

particularly interesting was the commonality of positive MHWB references connected with animals. Surprising was the frequency of mention afforded to experience of loss – MHWB impacts of bereavement (regardless of the time passed since the event and the nature of the death experienced) were a key finding recorded. Also interesting were participants' navigations of MHWB definitions and descriptions regarding the role of media coverage in underpinning their general MHWB understanding and coping actions.

Within the 'University Life' accounts (referencing specific areas of university experience described as connected to SMHWB) explored in Chapter 5 (See p.162-232) four themes can be seen: 'Institution-led Mechanisms, Systems and Procedures'; 'University-bordered Relationships'; 'University as a Mirror', and 'University-specific Perceptions and Expectations.' Key findings presented regarding university support structures, in reference to peer-to-peer (negative) influential reputations as well as actual experiences. Also important were SMHWB as connected to pedagogical elements, timetabling and institutional communication practices/content. However, alongside the specific tangible elements of the university through which students identified their SMHWB, crucial were latent/non-physical aspects of their 'University Life'. Meanings to relationships with personal tutors, dissertation supervisors, individual lecturers and other students were described as significant to SMHWB experiences. Notable was frustrated disengagement with managerial-level institutional authorities. Significant also were descriptions of university as an overall time during which students can feel prompted to self-reflect and -evaluate. This was seen particularly in relation to self-reflections on personal access to material resources, their levels of 'normality' and 'maturity', and what parts of themselves were or were not compatible with university. Significant findings also concerned how 'The Student Experience' is perceived and/or expected to be, with over-time generated realisations of nuances within this concept appearing to impact heavily on SMHWB as experienced. Described, for example, were 'university myths' (such as 'the Dissertation Myth') and social life imagery as influential in setting up SMHWB expectations. Important findings concerning students' perspectives on what SMHWB means in itself were generated. Indicated was, first, that negative SMHWB can be considered a 'normal', even perhaps expected, part of a student experience.

Stemming from such an opening premise, positive SMHWB presented as frequently tied to notions of 'balance'; not elimination or avoidance of 'the (inevitable) bad' but being able to 'balance the bad out'.

Chapter 6 (See p.233-58) provides the lynchpin for this thesis through description and examination of the common emotional undercurrents to (S)MHWB, irrespective of whether they are 'General Life' or 'University Life' specified. This exploration is significant as it specifically references individuals' non-visible/physical and emotion framing to SMHWB, something under-considered in current research (which retains focus on 'what' is influential on SMHWB rather than 'why' it is influential). This element draws further attention to where and how SMHWB experiences interact with individual intersectional/'outside university' elements – these emotions interweave through both the preceding finding-areas already described. Three emotional tenets were developed through the data analysis: 'Feeling in Control'; 'Feeling Secure', 'Feeling Recognised'. Within the first of these, students' senses of their own personal agency within the university contexts was described as intricately connected to the nature of their SMHWB. Participants described feeling restricted or controlled by, even powerless in the face of, some university systems and mechanisms. Importantly, this research brought to attention a strong student regard of good SMHWB as being a matter of extrinsic luck, rather than intrinsic resilience or psychological resources. Students implied wants to have personal command in relation to a wide range of elements, including time (not wishing to be entirely subject to institution-determined timetabling in reference to both academic and support features); study content (having a degree of personal choice in relation to degree content can be a way of coping during difficult times); the where of their living and studying as a student, and, importantly, the *type* of support accessible and *who* from (being able to determine their support based on their own trust and labelling in relationships). The second element of feeling highlighted students' desire to feel both internally and externally secure whilst at university. Participants can view becoming a student as something inherently 'risky' to do, and fostered is hopeful high regard of university institutions as 'bastions of security' in the face of broader life uncertainties. However, realities of student experience often challenge this, with the common appraisal of university (and attached SMHWB experiences) as a 'rollercoaster' in

need of stabilising. Notable threats to feeling secure as a student included the lack of space in university to acknowledge and process bereavements, under-acknowledgement of gender-related physical safety concerns, and obscurity and perceived mixed-messaging in institutional decision-making and pronouncements. The final emotion component is that of 'Feeling Recognised'. This research showed how visibility *as an individual* student can be significant to SMHWB experiences. Crucial to the findings in this area were participants' perceptions of university support as misaligned with students' 'real needs' – conveyed was assessment of their institution as lacking in appreciation of students lived realities and hence what their SMHWB *really* is. Participants identified university as exacerbating negative SMHWB via insensitive systems and mechanisms, especially in relation to communication. Altogether, the significance of the common emotion findings lies in the attention brought to the need for an individual's 'Student Experience' to be understood as a heavily *felt* and *emotional* experience. Institutional appreciation of the emotional undercurrents and their connection to students (S)MHWB mapping would appear crucial in providing appropriate support. The project identifies through this in particular the absolute need to consider SMHWB outside and well as inside university experiences in order to fully appreciate and respond to the complexity of the issue.

7.4. Discussion of the Findings and Contributions to Knowledge

The findings presented in this thesis contribute important elements to current SMHWB literature and knowledge. There are both subject/topic and methodological contributions to knowledge made through this project.

First, of particular importance is the positioning in the project of students as 'people first' – the 'student imagining' (See Ch2: p.57) informing this project deliberately includes *outside-of-university* experiences as a means to understanding who a 'student' is and how they behave and experience (SMHWB) *inside* university. Ultimately, this work enhances knowledge regarding students' own in-depth perceptions of 'student' as part of and connected to their overall lives, adding more detailed facets to the current still-limited body of qualitative work on SMHWB (Foster and Francis, 2019). In this way, this research has opened and consequently operates

from a standpoint that contrasts with much current SMHWB research. The latter still tends to concentrate on ‘student first’, a concentration that contributes to somewhat stereotypical and externally-derived ‘student imaginings’ as those most often used to guide SMHWB research and support provisions (despite rhetoric acknowledging the increasing diversity in ‘the student body’). In approaching students as ‘people first’, this work adds to Sykes (in Brookes and O’Shea, 2021), Patfield *et al.* (in Brooks and O’Shea, 2021) and Brookes and Shea (2021), for example – this project agrees that ‘student imaginings’ (explicit and implicit) remain heavily stereotyped and homogenising and there needs to be greater recognition of how university means a myriad of things to different incoming and existing students. This work adds to such literature in making the point that there needs to be explicit connection drawn between institutional ‘student imaginings’ and resultant SMHWB experiences.

Also significant is that the prioritising of ‘person first’ in this research allowed in the data movement beyond the compartmentalised nature of current SMHWB research, which examines discipline-specific concerns, impacts of particular staff-student relationships or year-group focused experiences (Macaskill, 2013; Macaskill, 2018). This work is not entirely at odds with the details in such studies, nor with recent publications that focus on particular elements of students’ (MHWB) experiences. For example, the findings confirm the importance of place/space MHWB associations, adding weight to the work of Brewster and Cox (2023) on academic libraries as important sites in reference to SMHWB support. In reference to recent policy recommendations also, the project’s findings demonstrating the meaningfulness of individuals’ different relationships and students’ want for choice regarding who to seek/receive support from align with the UUK (2022d) guidance advising students be permitted to name ‘trusted contacts’ as part of institution student welfare policies. The project also relates well to the recent identification of the particular needs of students who are required to complete placements (UUK, 2022b). However, in reference to such examples, the work here adds necessary granular-level detail as to *why* these needs present and reiterates that the student individual be at the forefront of institutional support (e.g., not all ‘placement students’ or indeed placements are the same). Notably, whilst the research here would appear generally compatible with the idea of there needing to be a ‘whole-university approach’ taken toward addressing

SMHWB concerns (Pollard *et al.*, 2021: 12-13; OfS, 2021a, 2021b; UUK 2020), it also concurs with assessments identifying ‘barriers to delivery’ of such an approach (Robertson, Mulcahy and Baars, 2022). This research illustrates these barriers as referring not simply to lack of ‘buy-in from staff’ and/or insufficient skill-training for staff but an overall insufficient focus on the students *as people beyond the role ‘student’* within the model. Based on the research here, there could be a further dimension added to the meaning behind a ‘whole university approach’. Indeed, a key finding of this research is that knowing/recognising the underpinning emotions of SMHWB could help guide better a ‘whole university approach’, encouraging understanding of SMHWB irrespective of specific concerns – invited here is movement beyond understanding ‘whole university approach’ as being about standardised actions to being more focused on standardised awareness of the common feelings acting as the overall undertone to SMHWB. Moving away from the continuing emphasis within it on the institutional perspective, what the research here might propose is a modification to this policy-guiding label; the findings suggest rather a ‘whole-person university approach’ is required, (one in which includes thinking about students’ pasts and personal resources in times of difficulty).

Such a suggestion is made because, overall, a key contribution of this project is the added context it provides in reference to already known risk factors and the signposting it offers toward suspected ‘difficult’ facets that could benefit from deeper quantitative *and* qualitative examination, (particularly in reference to aspects such as bereavement, processes to access support). Of particular note, in inviting participants to contextualise their student (MHWB) experiences within their overall lives, speaking to them about more than, and away from, ‘*what’s happening now, whilst you are inside university?*’, the wider temporal aspects crucial to SMHWB have been illuminated. Facilitated through this research has been learning regarding the *pre-university* determinants of and the *predisposing* mindsets informing present-day SMHWB experiences. Students’ references particularly drawing on childhood and school experiences, for instance, have led to this project’s alignment with Crook’s (2020) argument regarding understanding SMHWB as connected to wider temporal (and geographical) context – indeed, this work adds to Crook’s research, demonstrating the need to across-time contextualise SMHWB at individual-student

level as well as generally (as a topic overall). In bringing such a facet to the fore, the qualitative detail in this thesis acts to augment the predominantly quantitatively-derived, present-focussed information already in the SMHWB domain, making more visible the integrated and interdependent nature of such different facets and any resulting impact on SMHWB experience in *whole* undergraduate experiences.

Second, and tangentially, in reference to the topic of mental health generally, this project responds to and agrees with Chandler and Brossard's identification of how heightened awareness of and attention to emotion can "enable us to refine the questions raised" (2022, 125), that considering, "how emotions are generated in a systemic way, unveils other routes to understanding mental disorder" (Chandler and Brossard, 2022: 125-6). Essentially, this project appears to align with the suggestion that 'mental health is not about mental health' (Chandler and Brossard, 2002: 118, See Ch2: p.78) and draws attention to student emotions as a particular area in which this can be made visible. Offered via this research, then, is a theoretical framework of the emotions that underpin student mental health and wellbeing risk factors. This project illuminates the immense complexity within the labelled topic that is SMHWB specifically via reference to students' emotions – and the specific feelings underpinning the students' experiences are significant. Whilst there has been identified an 'emotional turn in higher education' (Gilmore and Anderson, 2016), this turn remains largely guided by psychological approaches to emotion. It also retains a pedagogical focus (Christie and Morris, 2021). Whilst work has begun to consider academic *staff* emotions within academic cultures more generally (Barclay, 2021), there is a continuing gap in reference to *student* emotions. An important element to these research findings is their chiming with those of Christie *et al.* (2008: 567), who (in examining learning experiences specifically) noted that student experiences rest heavily upon "emotional interaction between the student and the [learning] environment of the university". This research demonstrates the same in relation to SMHWB experiences. For example, participants' particular reference to negative emotion reactions resulting from university communiqués (See Ch5: p.205; Ch6: p.263) appears consistent with Scheff's identification that "every interaction is not merely the communication of content but also a communication of respect and esteem or disrespect for the other ... every communication is simultaneously a

building up of, damage to, or maintenance of social bonds” (Bloch in Barbalet, 2002: 120). Similarly, the participants’ comments and stories connecting their university-related perceptions and expectations to their SMHWB experiences very much links to Hochschild’s argument that “emotion emerges as a result of a newly grasped reality ... as it clashes against the template of prior expectations” (in Robb *et al.*, 2004: 249). Importantly, the apparent attachment of feelings of security to university (See Ch6: p.253) aligns with Ahmed’s (2004b) argument that “feelings and values ... become ‘stuck’” (in Peeren, 2019: 834) to objects and spaces. Ahmed described how “where objects perceived to be the cause of happiness...become ‘happy objects’” (in Hunter, 2022: 131); in this research, similar appeared in relation to security – university to the students was perceived as a source of security and thus became a ‘secure object’. However, this research moves beyond such labelling and affective value to demonstrate what may happen when the object’s ‘sticky’ value becomes challenged or contradicted. For these students university had a revised emotion ‘stickiness’ attached to it; university became an ‘insecure object’ in light of their experience. In this case, the research demonstrates the accumulated-over-time ‘stickiness’ of the ‘affective value’ placed on even the notion of university can move and that the result ultimately has meaning and impact in reference to SMHWB experiences. This project contributes, therefore, to this under-examined and -contextualised aspect to students’ experiences and argues for sociological work on student emotions in academia to be further developed if enhanced understanding regarding SMHWB is to be achieved.

Moreover, in bringing forth three key emotion undercurrents to ‘The *Current* Student Experience’, this work makes two important points regarding SMHWB within the current UKHE climate. First, whilst research has begun to consider the impact of neoliberalism on academic institutions, and their staff (Morrish, 2019), to date there remains limited consideration of the impacts on students themselves (Karter, Robbins and McInerney, 2021) - this research adds insight in this regard. Offered through the research is clear indication of the kinds of mental and emotion impacts of neoliberal-guided practices upon students specifically. That students described negative emotional experiences attached to heightened awareness of themselves as

'statistics' (with accessible financial resources for the university business) (See Ch6: p.265), for example, can be read as illustration of how, to augment Chandler and Brossard's phrasing in relation to the specific context under review, 'SMHWB may not actually be about SMHWB' but rather about how UKHE systems and mechanisms might be functioning in such a way as to generate negative student emotions and linked self-perceptions. Indeed, this research seems to present qualitative illustration to Priestley's argument that, "neoliberal higher education, not the individual, is 'sick'" (2019: 186), due to the negative emotion experiences connected with institution mechanisms elicited. Moreover, and second, offered by this research is a lens through which to explore and assess (the need for) compassion in universities (as an 'antidote' to the 'neoliberalism-induced compassion gap' in UKHE (Pederson in Waddington, 2021; see also Lawrence, 2021) from the student perspective specifically. This research responds to Waddington's call for this to be more deeply explored (2021; 17). Furthermore, as a consequence of these findings, an invitation is extended to researchers to incorporate alongside any examinations on student *self*-compassion (Kotera, Green and Sheffield, 2020; Kotera, Ting and Neary, 2021) to consider more in-depth *system*-compassion in reference to SMHWB. Altogether, this thesis provides illustration of, and highlights the need for extension in, more interdisciplinary-inclined studies of student emotion (as a key part of interactions with university systems and structures), noting that these have much influence upon how SMHWB may be both experienced and understood.

The third contribution of this project stems from its being, to the best of the researcher's knowledge, the first application-use of the Power, Threat, Meaning Framework (PTMF) in reference to UKHE SMHWB specifically. As a consequence of applying the principles of the PTMF in this research, there is agreement with Jessiman *et al.* (2022) that, as with schools, universities and their cultures *are* crucial sites for health promotion to students (alongside their education function). However, in reference to MHWB, unscrutinised and unadjusted transference of medicalised and individualised understandings/definitions as core guiding aspects for the issue in education contexts can now be seen as problematic. As one specific example in this research, the apparent judgement (rejection) of university messaging on the grounds of detachment and inauthenticity (See Ch5: p.205; Ch6: p.265) adds weight to

Danvers and Hinton-Smith's indication of universities becoming regarded as purveyors of 'toxic positivity' through their over-emphasis on individual experience and responsibility (in Brooks and O'Shea, 2021: 71). In the current climate, not only is it possible that arguments regarding universities as containing '(undercover) agents of psychiatry' (Roberts in Vos, Roberts and Davies, 2019: 37; See Ch2: p.54) could increase, but institutions as a whole risk becoming known as *unserious* about SMHWB, acting as '(undercover) agents of 'toxic positivity"' (See Ch2: p.52) more broadly, precisely because they align with individualising models of mental health inappropriate for and unappreciative of student wider-life realities. The PTMF is demonstrated via this research as most applicable to renew and improve institutional knowledge about and responses to SMHWB concerns precisely because it allows for full recognition of the changing UK 'student body' demographics – this work, for example, agrees with O'Toole's (2022) assessment that there is an overlooking of trauma-related experiences, particularly collective-level trauma (e.g. racism) in school settings and extends this to state the same in reference to UKHE contexts. Challenged, therefore, through the referral to the PTMF in this research has been the embedded-in-UKHE emphasis on 'the individual' and the privileging of medical and psychological models of mental health in understanding and responding to SMHWB (See Ch2: p.33-40, p.48-55). The hopes and aims for "targeted support within a proactive and preventative model" (Peck, 2023: 7) in reference to student distress cannot be realised without examining student individual *in context*, acknowledging their pasts as well as their presents. This research confirms the necessity of 'amplifying the social' (across time) specifically in reference to SMHWB and makes visible how this can be achieved through adoption of the PTMF principles in researching the topic. The use of the PTMF in this research demonstrates not only how "varied problems *can [thesis author emphasis]* be understood in an integrated way" (Harper, 2023), but that they *should* be within the current UKHE climate.

Moving to the PTMF's methodological contribution, this research also raises questions regarding the over-reliance on certain methodological tools (notably surveys) for SMHWB research, noting their ability to obscure important context. Reframing questioning to essentially ask, 'what happened to you?' as opposed to 'what's wrong with you?' (Boyle and Johnstone, 2020, 2018; See Ch2: p.66-72) and

affording centrality to student storytelling/narratives has led to far more nuanced detail in this SMHWP data. For instance, whilst the research here would concur with Worsley, Harrison and Corcoran (2023), regarding the need for connections between student accommodation experiences and SMHWP to be noted, it might be suggested that the described findings miss important context because of the research approach. It may not be simply 'poor relationships with fellow residents' or 'sharing cooking' as specific experiences that prompt 'higher levels of depression and anxiety' (Worsley, Harrison and Corcoran, 2023: 179-80); rather it can be the cumulative meaning of such aspects for individuals within the overall context of their stories that matters. The key issue is not the in-the-moment experiences but rather what these together signify, i.e., that the students may feel no longer 'at home' more broadly, not simply that they 'lack belonging' whilst in/at university. The methodological approach adopted for this research thus allows isolated experiences to be situated and made meaningful within larger life stories, ultimately facilitating a reading of student distress experiences differently. The success of centring storytelling in this research emphasises not only the need to increase efforts to encourage lived experience centrality (via co-production and/or participatory action research) in reference to mental health research more broadly (Norton, 2021; Bell *et al.*, 2023; Kaluzeviciute *et al.*, 2022), but further develop *how* students' voices in SMHWP research may be authentically accessed and recorded (Robinson and Taylor, 2007; Young and Jerome, 2020), in order to not only identify what SMHWP is but what it *means*. Overall, via open narrative telling under the reframed questioning guidance of the PTMF, vital context to SMHWP has been made visible. The research confirms the PTMF's assertion that in understanding MHP, narratives are key to the "conveying the inter-relatedness of the individual and culture" (Harper 2022: 68-9; Boyle and Johnstone, 2020: 107) – in reference to SMHWP specifically, the *interdependence*, rather than *independence*, involved came to the fore via the students' narratives. Informing as it does the epistemological assumptions underpinning this project (See Ch3: p.83), this research identifies the PTMF as a valuable new set of principles with accompanying methodological applications through which to conceptualise and investigate the labelled issue of 'SMHWP' in universities, one that moves beyond the student-individual to consider their interactions with institutions and institutional cultures.

7.5. Limitations and Strengths

There are some limitations and strengths to this project requiring acknowledgement and critique. First, that the project spoke to a small sample attached to only one UKHE institution could be viewed as limiting. The specificity of the examples could be regarded as too particular to one context to be of wider use. Small samples are frequently referred to as an inherent qualitative researcher problem, indicated as troublesome in reference to notions of truth, representativeness and generalisability (Vasileiou *et al.*, 2018; Leung, 2015). The sample for this research, at 21 participants, presents at face value as small – however, it is worth noting that multiple interviews with the individuals were conducted, and as such a total of 39 conversations provided the data for this work. Moreover, this work was not conducted with a view to making ‘truthfulness’ claims of a representative or universal character. Focusing on lived experiences, embrace, exploration and illumination of *detail* within *varied* experiences (Butina, 2015) from students’ own perspectives was a principal aim of the work. Interesting, despite the small sample there were commonalities in experience that appeared, for example, bereavement, accessing support services (See Ch4: p.150; Ch5: p.177). Whilst it would remain inappropriate to generalise entirely based on the stories gathered for this research, suggestion can be made that the importance of such events is unlikely to be isolated and may be found as significant for other students in other UKHE settings. Overall, the work here should be considered an invitation to other UKHE institutions and researchers to explore SMHWB experiences in their own settings or even across different institutions simultaneously. Signposted through this group of students and one UKHE institution case is that the same methodology could be employed to consider cross-sector as well as other university-specific circumstances in future research.

Connected is required acknowledgement that presented here are student perspectives only. Given that academic environments involve not just students, this could be regarded as a potential limitation. As demonstrated earlier in this thesis (See Ch5: p.176) the subjective viewpoint of students can be driven by information that is not factually true – student viewpoints can be skewed because of the lenses and

relationships central to/in their own lives. Factual dissonance between details in student accounts and the recorded formalities of university operations (particularly with regard to what support is available and how it is provided) is important as a weakness. However, again, whilst the facts may not be cognisant of university provision reality, there remains value in student perspectives where discord is clear. We have to, as a consequence of this research, raise the issue and ask *how and why* such lack of formal knowledge features, (because of the influence this has on support-seeking), and ultimately consider how to ensure factually correct information reaches students in order to contribute to better informed decision-making.

Third, it is unfortunate that the project did not manage to secure access to certain student voices. Whilst the project was successful in reaching students across a range of disciplines and ages, with those with and without diagnosed mental health condition experiences, the lack of engagement from students from Black or Ethnic Minority Groups, for example, was noted. Despite direct communication of the invite to participate being forwarded to student societies, no response was secured or experiences heard. This certainly impacted the data, in that varied cultural experiences could not be explored. The lack of engagement by those students from BAME communities connects to wider issues regarding their inclusion in mental health research (King and Gillar, 2019; Tchouankam et.al., 2021) more generally, and this research should be regarded as contributing further evidence as to why greater efforts need to be taken to both listen to and learn about the experiences of those from underrepresented cultures. Similarly, the project was limited by the largely absent male voice. Again, this research aligned with established concerns regarding the lack of male engagement in mental health research (Choi et.al., 2017; Tchouankam et.al., 2021). Though the male students included in this research provided a wide range of ages, student stages and overall experiences, that they were very much outnumbered by the female participants further emphasises the need to think about how best such participants can be communicated with and encouraged to share.

Stemming further from thoughts about these two subset student populations, there becomes visible a need to review the use of student-led means to recruit for SMHWB.

It is of paramount importance to facilitate authentic student voice(s) in SMHWP research. Similarly, co-production is increasingly touted as a vital element in mental health research in general (Bell *et.al.*, 2023; Alsopp *et.al.*, 2023). As such, avoiding university gatekeepers (such as academic staff) can be considered important to reach students directly – hence the approach taken for this research, which sought to communicate with potential participants directly (See Ch3: p.87-90). However, it was apparent through this work that those who agreed to participate were broadly engaged with their university *beyond* their studies (via student representative and society organiser roles, et cetera) – that is to say, they were involved in university life elements *away* from academic activities. That, for example, students from Black and Minority Ethnic communities could not be encouraged to participate could be suggestive of general detachment in their university spaces (rather than the unwillingness being solely linked to the topic of mental health). Given that the questions of ‘belonging’ and ‘loneliness’ at university (Campbell *et al.*, 2022; Vasileiou *et al.*, 2018; Wawera and McCamley, 2020) in relation to SMHWP impacts are increasingly prominent areas of interest, it would appear important to consider how *unengaged* students might be reached for research purposes.

Forth, there are longstanding cross-disciplinary arguments regarding the ‘fallibility of memory’ (Marwick, 1991: 26) and subjectivities in interviews that are pertinent to consider. Across the Academy there is a long history of debate regarding the validity and reliability of data drawn from a subjective storytelling. However, narratives of experiences within institutional settings are important as a means to highlight the more ‘unconscious’ impactful elements of organisations. Interviews remain helpful as they augment the more formal, (written-documented and/or statistical), material recording and mapping of a subject (Sutherland, 2010). Moreover, in this research, while memory is subjective, the fact that students recalled in great detail specific encounters/experiences of their general and university lives when given uninterrupted opportunity to talk highlights how meaningful and valuable such memories and their associated elements might be for the topic overall. As such, the interviews here were crucial for accessing both the visible and non-seen facets to SMHWP experiences, regardless of any concerns regarding memory. (And indeed, the use of the social media elicitation task in this research facilitated a grounding of

participants memories, allowing very thoughtful and detailed experience accounts to be relayed.)

Fifth is the impact upon this project of the COVID-19 pandemic. Beginning 2 weeks before the first UK lockdown, this work was encased in the restrictive environment wrought by COVID-19. This specifically impacted how participants could be recruited and interviews conducted. Several interviews were interrupted by technological failures – rescheduling was sometimes required. To be noted is that only those students with access to adequate computer hardware and software could be consulted (and this in itself raises the need to consider different students' technological resources when designing inclusive SMHWP research). Steps were taken to mitigate the COVID-19-related limitations. For example, extra steps (such as the screening call and the between-interview research-relationship monthly emails) were implemented in the research process; the period across which participants were asked to reflect included non-COVID-19 time, inviting them to contextualise current experiences and thoughts in a broader self-map; in reference to the researcher, the data familiarisation stage of analysis was extended to allow re-listening alongside externally-transcribed documents. Notwithstanding the limiting facets described, where potential problems were noted during the ongoing research, appropriate responses and reflections enabled the lessening of their impact. In responding swiftly and thoughtfully to the COVID-19 circumstances, for example, what was achieved was movement from the context as wholly limiting to actually one in which strengths of the specific context to the research could be brought to the fore. In particular, extensive and new data types were accessed precisely because interviews had to be conducted online and at distance. For example, agreeing with the experiences of Tremblay *et al.* (2021) and Howlett (2022), the online conduct of the research enabled, rather than harmed, research relationships and participant trust. Also, in alignment with Moran and Caetano (2022), data regarding students' home environments and actions, which would have been inaccessible in in-person interactions, was accessed as a consequence of the at-distance conversations (see also Howlett, 2022). Overall, the number of students who returned for the second interview confirmed that the 'dangers' of COVID-19 for research purposes had been largely managed well, given their in-depth and across time engagement in the project.

Rather than a barrier to the research, greater details regarding SMHWB experiences were gleaned because of the dictations of the COVID-19 pandemic. As such the organisation and navigation of the research during the COVID-19 pandemic can be regarded in part as a strength of both the work and the content produced.

Last, the employment of multiple methodological tools in this project were within it a key strength. In this respect, the interdisciplinarity of approach in the project was helpful – considering approaches outside of the core psychological research methods corpus, such as techniques and aspects from oral history interviewing (Portelli, 2019), was important as part of the ‘thinking differently’ about how to amplify student perspectives. Altogether, drawing on an elicitation technique, open narratives and research-guided questioning, a greater level of detail in data and illustration of the variety and complexity to/in SMWHB was garnered. This was aided by the capacity of the elicitation task in particular to disrupt the power imbalance between researcher and researched that can (often and still) occur in academic projects³³ (Pyle, 2013; Greyson and Spear, 2023) – opened up through the task was a participatory approach offering a space for increased participant agency. Elicitation at present is a technique particularly that has been lauded in reference to research seeking to include/increase children’s voices (Pincock and Jones, 2020) – this research however shows the value of using participatory elicitation approaches for those older. Moreover, in realising their ability to set interview agendas from their own perspectives, stronger rapport between researcher and participants was also facilitated. This latter aspect was also supported through the employment of 2 interviews with single participants – this, again, benefitted the project as multiple meetings with students encouraged deepening trust in the researcher-researched relationship which aided narrative sharing (Carduff, Murray and Kendall, 2015). The multiple methodological tools in this project are a strength because together they generated detailed qualitative student voiced information that augments the at-present limited amount already in existence. In doing so they also added further

³³ Despite qualitative research being positioned in opposition to quantitative approaches, power relations across qualitative projects can remain inconsistent in practice (Karnieli-Miller, Strier and Pessach 2009).

evidence to continue pressing home the value that stories have, that, “Storytelling counts” (Gardiner, 1988: 120).

7.6. Significance and Implications

The findings and contributions presented in this research are of interest and relevance across academic disciplines. Shown through this work is the value of bringing together different disciplinary perspectives to try to enhance overall knowledge and understanding. Work from this project has already been presented and shared, (in conferences, research seminars, consultancy calls and a continuing professional development session), to psychologists, (medical) sociologists, education practitioners, thanatologists, education psychologists, other mental health researchers, undergraduate programme managers and a charity (Appendix 15). Alongside academic/research interest in the research, the insights gained from this may also be of assistance to those working in university student support services, in reference to provisions both inside and outside of mental health.

This research matters to universities because it highlights SMHWB contextualisation details for existing known and unknown risk factors, and under-considered impacts of institutional action/decision-making. It is important to understand that presented here are SMHWB experiences that can morph into influential pronouncements regarding university support provisions passed on, in person or via social media, to potential new students, as well as existing following cohorts. Increasingly expressed and made visible is student want for security, care, validation, and tailored support. These are challenging wants (needs) given the current pressures facing UKHE (See Ch2: p.48) – indeed when listed, from the institutional perspective, they may be read as unfeasible or even inappropriate demands to be made of a higher education provider. However, rather than defensive reaction, this project encourages and highlights the importance of institutional reflection on such elements. In particular, offered below is a set of core reflection questions informed by the influencing underlying principles derived from this research that may aid institutional review and potential action-for-change:

- **In reference to overall university culture:**
 - Can the institutional commitment to SMHWB be described and assessed as tangibly authentic? (Do actions follow through on pronouncements made?)
 - Where and how does the university centre, or could more centre, the individual student, fully acknowledging the diverse experiences and needs amongst ‘the student body’?
 - What university spaces are made available within which active listening to and meaningful engagement between management, staff and students, is facilitated?
 - Are student temporal needs respected (understanding that delay can be an enhancer of student distress and feelings of insignificance)?
 - Where can staff be better supported (via skill training or increased provision of resources (including time)) to be able to manifest genuine care?
 - Are student reader (emotion) responses to centralised communication appreciated, anticipated or considered as part of the institution-to-student communication process?

- **In reference to support provisions (academic and/or SMHWB-related):**
 - Does the support offered, and the means of access, instil in the student the ability to feel in control; secure; recognised as an individual?
 - Is support proactive or reactive? If the latter, how might this be altered into the former?
 - How can information regarding support services be better communicated and signposted to students (to limit reliance on ‘hearsay after experience’ influence)?
 - How could the access-to-support process be improved in such a way as to enhance confidence and reduce anxiousness regarding university support?

- Are the university support services guided by a holistic perspective, one that is sensitive not to academic issues but historical, social, personal, economic and emotional facets of students' lives?
 - Can support services address multifaceted needs in a student-relevant way?

The knowledge generated through this project could have practical implications in areas across university operations. First, in reference to SMHWB-labelled support provisions specifically, suggested might be system/process modifications to incorporate peer support – i.e., how peer-to-peer interactions might be integrated into the system to facilitate improved access *and* experience. For example, rather than being viewed as something to be employed as a separate intervention (as in 'peer support groups', 'peer support programmes' or 'peer support sessions' (Byrom, 2018; John *et al.*, 2018)), peer support during the support access process itself could potentially enhance necessary feelings of safety and connectedness at a time often characterised by uncertainty and even isolation. Essentially, in the same way that student peer *writing* groups have been shown to aid students through demystifying academic writing, increasing confidence and fostering community (Doody *et al.*, 2017; Robertson, Mulcahy and Baars, 2022), peer support as part of the access-to-support process, *whilst waiting* for SMHWB support to materialise, could be important as a means to generate realistic support expectations, feel reassured regarding use of any personal information sent, and simply experience reliable social connection at a time of personal insecurity.

Second, moving beyond SMHWB-labelled support, other university areas require review and consideration in light of these findings. These might include further efforts to clarify relationship purpose and specifications relating to the role 'Personal Tutor' (building on the work of, for example, Yale (2020) and Hughes and Bowers-Brown (2021)). The creation of a specific bereavement policy for students (as separate from absorption under the broad 'Personal Extenuating Circumstances' title/process) should perhaps be considered, as it has in academic settings outside the UK (Liew and Servaty-Seib, 2020; Spiccia *et al.*, 2023) – such a policy could be an appropriate *proactive* SMHWB support provision, though this would require further research.

Similarly, course-specific standpoints and definitions relating to the employment (or not) of ‘content trigger warnings’ should perhaps be established (Cebula *et al.*, 2022). The importance of space/place in relation to (S)MWHB apparent across this project also implies a need for institutions to think more deeply about their geographies and how these may be mobilised to support SMHWP *proactively* – Brewster and Cox’s work on university libraries (2023), (which discusses ‘a holistic model of library support for student mental health and well-being’ as part of a ‘whole university approach’), for example, is extended upon here and invites institutions to consider their own student populations in light of their locality specifics.³⁴

Third, and last, given its strength as a theme across this project, implied is an institutional priority to develop ways through which to harness the ‘time’ facets to SMHWP experiences. In particular, participants’ attention devoted to school experiences (as influential to their present-day SMHWP), indicates that universities might want to consider deepening further the already ‘integral facet’ that is their outreach activities (Johnson *et al.*, 2019). Moving beyond content-specific foci (e.g., STEM concerned) (Vennix *et al.*, 2018) and ‘Widening Participation’ agendas (Johnson *et al.*, 2019; See Ch2: p.48-56) specific talk on SMHWP should be included in *pre*-university engagements with potential students to aid realistic perceptions and expectations (see Baines *et al.*, 2022), as well as self-identification regarding how to cope. Turning to the end of university, alongside engaging with individuals’ *pre*-student experience, there is perhaps a suggestion wrought by this research that points to a need for research or universities to increase their tracking of SMHWP *post*-graduation. Indicated in the research (See Ch5: p.177) was identification of university support as ‘better than that for non-students’ – giving the possibility of university as potentially *protective* in reference to SMHWP (and notably suicidality) as opposed to detrimental, contrary to some pervasive present common narratives. However, without systematically and deeply engaging with students *post*-graduation, such a claim cannot be substantiated. Whilst work has considered *post*-university

³⁴ For instance, universities could consider signposting accessible local green (and blue, if applicable) spaces via local maps etc. Such offerings could aid student orientation (and thereby sense of personal security) in unfamiliar locations, and also respond to the apparent student-made affiliative link between such spaces and ‘better MHWB’. Furthermore, there perhaps should be consideration to actively include such spaces to support SMHWP included in campus developments.

transitions in reference to employability and work-related experiences (Monteiro, Almeida and Garcia-Aracil, 2021; Tomlinson, 2023), adoption of a life course approach to tracking SMHWP *after* graduation would be of value to universities. Closer monitoring of how SMHWP experiences become integrated into *post*-university MHPB generally would provide insights to enhance SMHWP conversations – deeper context to ‘inside uni’ experiences and universities’ handling of and support for SMHWP would be provided through illumination of what happens after ‘student life’ concludes.

7.7. Recommendations for Future Research

Given the work’s priority exploratory nature, there are within this project areas raised that could be further researched. Methodologically, this research lays some groundwork for future qualitative research projects in other universities or for cross-institution comparative work. The research tools and techniques used here could be applied by other researchers in different institutions to ascertain details of experience within their own specific student populations, or by researchers in different institutions looking to compare SMHWP experiences in different geographical locations. In reference to SMHWP-specifics, alongside clear need for more across-time mapping of SMHWP³⁵, there are several directions in which future research could be taken – these areas concern both micro-level detail in reference to students’ experiences as well as macro-level cross-disciplinary research development. Also important are suggestions for future research drawing on the researcher experiences connected to the reflexivity involved/needed for this project – there are recommendations put forth regarding possible research to conduct with a view to fully supporting researchers examining SMHWP as a topic.

There is an existing strong future research agenda regarding SMHWP. Future priorities for SMHWP questioning/priorities have been identified (e.g., Sampson *et*

³⁵ This references the increasing attention being offered to longitudinal studies but makes the point that longitudinal should include individuals’ experiences *outside* university life – ‘longitudinal’ as a term should not only refer to *inside* university time boundaries; including *outside* experiences before or after university is crucial to a more detailed understanding of SMHWP.

al., 2022) and the project here responds to these, agreeing with and emphasising the need to ask such questions as: ‘How effective is a whole-university approach to mental health?’ and ‘In what way, and for what reasons, do students experience loneliness and how can it be prevented?’ (Sampson *et al.*, 2022: 3). Adding to these questions, we might want to ask, ‘What do students *expect* and *perceive* about both SMHWB as a topic and the support they can access whilst at university?’ as these elements appeared so influential in this research. In reference to specific, more tangible, facets of SMHWB, this research indicates the necessity to more deeply explore students’ experiences of access-to-support procedures; course-specific concerns and the impacts of year-specific academic myths (e.g., ‘the dissertation myth’) and bereavement experiences whilst at university (mapping quantity as well as quality of these). In reference to loss more generally, in particular and for example, experiences of *multiple* losses in a range of life areas, either simultaneously or sequentially (over time) experienced, could be explored, to deepen understanding regarding possible vulnerability to emotional and mental difficulty whilst at university. Similarly, whilst pronouncements on what universities need to think about in supporting students on placements have been made (UUK, 2022b), this project has illustrated that there is need to heighten information on actual student experiences in relation to placements – placements are not uniform experiences across cohorts or indeed across different disciplines and this requires research to enable tailored support. A research priority also stems from the dominance in these students’ stories regarding the importance of relationships with individual academic staff members. Aligning with Brewster *et al.*’s (2022: 548) noting of the “intrinsic interconnection between staff and student wellbeing,” indicated through this project is the need to develop increased in-depth exploration of staff perspectives and experiences in relation to SMHWB. Staff and student MHWB experiences should be united in future research, rather than continue to be viewed and approached as somewhat separate research topic areas.

Notably indicated through this research is the need to increase inclusion of perspectives that might ‘think differently’ about SMHWB, to consider the issue *in relation to/with* wider contexts and issues. Given the acknowledgement that students from low socioeconomic status households; from Black, Asian and Minority Ethnic

backgrounds; who are mature; who identify as part of the LGBTQ+ community, and who are care experienced, are all groups at 'greater risk of suffering poor mental health' as students (Robertson, Mulcahy and Baars, 2022), there is now absolute need to fully contextualise SMHWB and move research on this topic beyond 'in the individual' perspectives. This project has demonstrated the value of such a move, and as such encourages future research to not only truly embrace 'co-production/participation' and '*whole* lived experience' perspectives but also be informed by a trauma-informed paradigm and fully value interdisciplinarity as productive in reference to better supporting SMHWB going forward. Thus, moving beyond the methodological focus for this thesis, suggested is that the PTMF as a SMHWB aid in education settings specifically might be further explored with such a goal in mind. The reframing of the questioning involved in the PTMF (See Ch2: p.66) may be of use for mental health practitioners supporting university students; indeed, considering the students' declared desire for 'tailored to circumstance' support, it could be suggested that a PTMF-based/informed intervention (Sapsford, 2021) for university support services might something useful to explore, (given that "an advantage of the PTMF is that it offers options other than therapy for young people to understand and overcome their difficulties." (Aherne, Moloney and O'Brien, 2019: 5)). In a separate though connected vein, as another example, (also responding to the Robertson, Mulcahy and Baars (2022: 4) recommendation that "Research based on techniques as discourse analysis should explore how the framing and language around mental health and well-being interventions could be adjusted"), this project also advocates for future research to draw on other humanities and social science perspectives to examine in-depth now common media SMWLB narratives and how these might impact/influence students' (and indeed *non*-students') perceptions and expectations.³⁶

³⁶ Indeed, research examining language and labelling in relation to mental health is a (re)burgeoning area (e.g., Foulkes, 2022) (and one recommended, for example by Brossard and Chandler, 2022). The research presented in this thesis connects heavily in this regard, for example, to a recorded discussion for the Queen Mary University 'History of Emotions' podcast (Dixon, 2022), between Prof. Thomas Dixon, Dr. Sarah Chaney and Richard Firth-Godbehere. The now heavily and publicly conveyed message of '*your emotions are valid*' was debated, with the argument put forth that emotions might be based on a distorted view of the world, hence their validity cannot be secure. However, even if felt through a distorted view of the world, emotions can still 'be very real' to individuals, and without understanding that, the question becomes (as asked by Dr Chaney) 'how can you deal with the anxiety and fear that they're feeling?' Cumulatively through the conversation a movement away from labelled emotions as 'valid' to 'existing' and 'understandable' was

Last, turning briefly to offer a final reflective note, future research should also consider the mental health of SMHWB researchers – there is need to deepen consideration of the researcher and their research process experiences, as it were. This project, and the researcher’s experience within (See Ch1: p.26), acts in part as a contribution to the growing body of literature concerned with the emotions involved in doing research, and in particular ‘researcher vulnerabilities’ (e.g., Steadman, 2023; Reed and Towers, 2023; Råheim, 2016; Howard and Hammond, 2019; Clift *et al.*, 2023). The researcher’s experience in conducting this work chimed much with Steadman’s autoethnographically mapped researcher vulnerabilities, particularly in reference to ‘fluctuating vulnerabilities’ (2023: 13-4) and aligns with the call to “move beyond the ‘vulnerability as failure’ framing in academic culture” (Steadman, 2023: 16). However, in the literature regarding researcher vulnerabilities, ‘researcher individual responsibility’ via heightened reflexivity and open declaration/autoethnographic writing remains prevalent. Extending upon this, then, suggested here is the need for research that focuses on the *institution* role in relation to researcher work-related emotions. Essentially, in order for university cultures to embrace the wider “‘vulnerable turn’” (Steadman, 2023)³⁷, responsibility perhaps should not fall solely on researchers to self-manage – formal research should be conducted regarding what institution support for researchers in reference to work-derived/exposed vulnerabilities can be developed and deployed. Connectedness to a topic often brings researchers to their work³⁸ – whilst academia increasingly seems to welcome this, there should be increased university-driven thoughtfulness and preparedness to ensure supportive cultures and working relationships should ‘triggering’ circumstances arise during the research process. Thus, for example, formal examination of institutional ethical approval application requirements/procedures

agreed appropriate – a message language change from ‘your emotions are *valid*’ to ‘your emotions are *real and understandable (in context)*’ was considered potentially better/more productive. Such a discussion is relevant and thought provoking in the context of this doctoral project, given the attention afforded to (institutional) communication and emotional responses to that.

³⁷ It appears academia does want to embrace the ‘vulnerable turn’, given the now common and increasing emphases on ‘co-production’, ‘collaboration’ and ‘participant involvement’ in research.

³⁸ Furthermore, alongside possible impacts for researchers with lived experience(s), existing work does also indicate the possibility that researchers *without* direct experience might experience vicarious traumatization connected to their research work (van der Merwe and Hunt, 2019; Nikischer, 2019; Williamson *et al.*, 2020), thereby indicating that proactive development of support mechanisms for researcher mental health and wellbeing is a priority in reference to *all* researchers.

should be conducted, regarding what should be included in reference to *researcher* care alongside care for the researched. Similarly, in reference to debriefing processes and options for qualitative research, for example, Tolmos *et al.* (2023) have described autoethnography as a way through which researchers can ‘process fieldwork’ – research regarding other debriefing forms and spaces for qualitative interviewers should be developed, to allow for their inclusion in research project designs from the point of their conceptualisation. Moreover, and drawing on the same principles that shaped the presented project, it is vital to remember that (student) researchers are ‘people first’; as such, research examining the applicability value of trauma-informed principles and practices in pedagogical spaces, such as in undergraduate-dissertation and doctoral supervision activities and relationships, could be pertinent to develop. Whilst trauma-informed qualitative approaches to research in reference to “ensuring the safety and promoting the resilience of research participants” (Alessi and Kahn, 2022) has begun to be considered, called for via the presented research is for this to also be considered and explored in reference to those *conducting* the qualitative research as well.

7.8. Conclusion Statement

This thesis aimed to augment existing SMHWB research through qualitative exploration of students’ experiences. In drawing on a relatively new framework for understanding distress (the PTMF) and interdisciplinary perspectives on MHWB, this work deliberately sought to think and ask differently about SMHWB, with a view to increasing the visibility of overlooked and underappreciated facets to undergraduate students’ experiences. Students were positioned and addressed as ‘people first’, and a methodological approach designed to amplify participant agency in the research process was adopted with students invited to story their SMHWB experiences according to their own understanding of the issue. Through several methodological tools, including the novel inclusion of social media for elicitation purposes and uninterrupted space for narrative-telling, students reflected on and talked about their SMHWB in three key interweaving areas. They referenced their wider personal histories and contexts, as well as their present ‘university contained’ encounters, revealing valuable visible and physical and latent details regarding (S)MHWB

experiences. Importantly, the students talked about their SMHWB as being in large part about how they *felt* as a student, and the university mechanism/system/culture's role in generating specific feelings. The data generated through this research is important as it challenges the existing focus on 'what happens whilst a student is at university' in SMHWB research – illuminated here are still neglected elements, such as student-background characteristics and what *has happened* to them before university, that remain impactful on MHWB once a person becomes a student. Demonstrated through this thesis is knowledge that can inform UKHE institution and sector-level policies and practices going forward, in reference to such aspects as access to support mechanisms; the role/purposes of staff roles (such as 'Personal Tutor'); even how universities might support SMHWB researchers themselves. Thus, this thesis builds on current academic literature in several ways – expanded context to already-known risk factors is provided; signposts to areas in need of deeper exploration (such as bereavement experiences) are indicated, and the importance of definition and methodological review and development within the overall field of SMHWB research is highlighted. Moreover, indicated as central to any understanding of SMHWB is appreciation of the emotional undercurrents – a theoretical framework of sentiments comprising 'Feeling in Control', 'Feeling Secure' and 'Feeling Recognised' is put forth and indicated as helpful in developing aid for SMHWB. Overall, through its alternative lens and approach, this research generated valuable insights that demonstrate the importance of thinking differently about SMHWB.

Appendix 1: Confirmation of Ethical Clearances

A. Original Ethics Clearance (Email Screenshot)

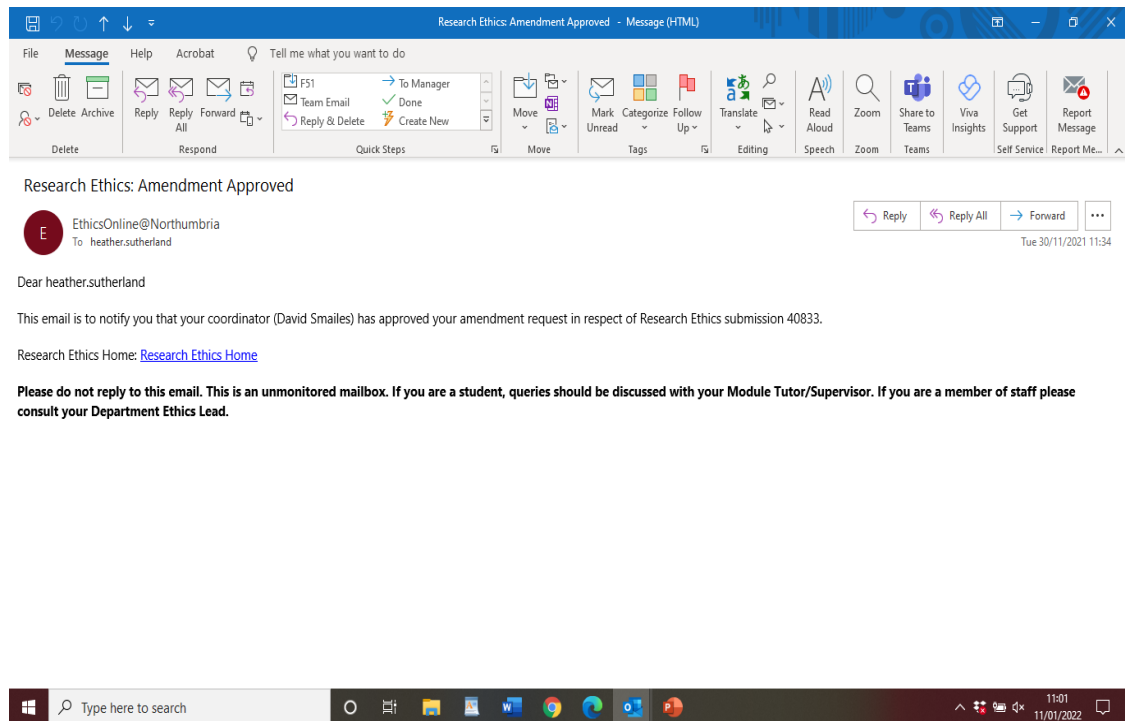
From: [FP.FinanceSystems](#)
To: [heather.sutherland](#)
Subject: MyForms: 120.1020 (Processed)
Date: 22 October 2020 09:49:11
Importance: Low

Dear Heather,

Your recent submission of a Ethics Approval, [120.1020](#), has been closed with status Processed.


northumbria.ac.uk/myforms

B. Amendment Clearance Confirmations



The screenshot shows an email client interface. The title bar reads "Research Ethics: Amendment Approved - Message (HTML)". The ribbon includes "File", "Message", "Help", and "Acrobat". The "Message" ribbon has several groups of icons: "Delete" (Delete, Archive), "Respond" (Reply, Reply All, Forward), "Quick Steps" (F51, Team Email, Reply & Delete, To Manager, Done, Create New), "Move" (Move), "Tags" (Mark Unread, Categorize, Follow Up), "Editing" (Translate), "Speech" (Read Aloud), "Zoom" (Zoom), "Teams" (Share to Teams, Viva Insights), "Self Service" (Get Support), and "Report Message" (Report Message). The email content is as follows:

Research Ethics: Amendment Approved

 EthicsOnline@Northumbria
To: heather.sutherland

Dear heather.sutherland

This email is to notify you that your coordinator (David Smailes) has approved your amendment request in respect of Research Ethics submission 40833.

Research Ethics Home: [Research Ethics Home](#)

Please do not reply to this email. This is an unmonitored mailbox. If you are a student, queries should be discussed with your Module Tutor/Supervisor. If you are a member of staff please consult your Department Ethics Lead.

The bottom of the screenshot shows the Windows taskbar with the search bar, taskbar icons, and system tray showing the time as 11:01 on 11/01/2022.

Amendments						
+ Create New Amendment Refresh						
SUBMISSION ID	CREATED DATE TIME	CREATED BY	STATUS	DESCRIPTION	UPDATED DATE TIME	COORDINATOR
40833	25/11/2021 08:38	heather.sutherl...	Amendment Approved	Further to the init...	30/11/2021	David Sm...

Submission

Submission Ref: 40833

Status: Approved

Submission Coordinator: David Smailes david.smailes@northumbria.ac.uk

Name: heather.sutherland

Email: heather.sutherland@northumbria.ac.uk

Faculty:

Department:

Submitting As:

Externally Approved: **Note: ONLY tick this box if your project has already received full ethical approval from an external organisation**

Please note you will need to attach all documentation relating to your externally approved project. This must contain confirmation of ethical approval from the external organisation.

Appendix 2: Invitations to Participate

A. General Invitation for Initial Interview Set (two timepoints)

1



Student Stories: Self Reflections on Mental Health and Wellbeing Across Undergraduate University Experiences

Qualitative Doctoral Project

Participation Invitation
Version 0.1 (28/07/2020)



Department of Social Sciences
Northumbria University, Newcastle
Via Sutherland Building
Newcastle-upon-Tyne
NE1 8ST
Email: heather.sutherland@northumbria.ac.uk

Doctoral Supervisor – Prof. Peter Francis:
peter.francis@northumbria.ac.uk

Dear Student,

I am writing to invite you to participate in a PhD research project looking at students' experiences of mental health and wellbeing whilst at university.

This research is looking to move beyond the usual statistics relating to the themes of mental health and wellbeing to concentrate specifically on what is meaningful to students themselves. Through this project, I (Dr Heather Sutherland) am asking participants to share with me in interviews the 'student mental health and wellbeing' stories and experiences (those either positive, negative or neutral) that have been important to them.

I am hoping that this research will lead to increased and more appreciative understanding of what higher education student mental health and wellbeing are and how they are really experienced, as a means to influence and better the university support and resources available to students as they work towards their first degrees.

If you would be interested in learning more about the project and indeed in contributing your voice to university understandings of issues and elements affecting student mental health and wellbeing broadly, please do complete the form attached [here](#).


I do hope to hear from you!

All best wishes and thank you for your time,

(Dr) Heather Sutherland
(PhD Student, Northumbria University).

HS Doctoral Project. Invitation to Participate, V0.1, 28/07/2020

B. Example Social Media Invitation Posts

 **Northumbria CONNECTED**
Heather Moreno Sutherland · 28 Oct 2020 · 🌐

Hi Everyone!


I'm Heather, a PhD Student at Northumbria, and I'm looking for 1st year and 3rd year students to talk to for my research.

My project gives space for Northumbria students to speak freely about their wellbeing and mental health experiences.

For further information about how to contribute your student mental health and wellbeing story(ies) to help develop university support systems, please email heather.sutherland@northumbria.ac.uk or complete the form at <https://forms.gle/tV9phVaQG3P6pHq28>
https://forms.gle/tV9phVaQG3P6pHq28?fbclid=IwAR3ocAwhlpH25kgaCPymPxBp5j1areLLQUa80t98yo7_5vZ2m707xd6BGoU)


This research comes at a vital time and will be used to provide better support and services to many students, so please do think about being involved. I'd love to hear from you!

Thank you.

 **Northumbria CONNECTED**
Heather Moreno Sutherland · 28 Oct 2020 · 🌐

This research comes at a vital time and will be used to provide better support and services to many students, so please do think about being involved. I'd love to hear from you!

Thank you.



The flyer is titled "Student Stories: Self Reflections on Mental Health and Wellbeing Across Undergraduate University Experiences" and is an "Invitation to Participate". It is addressed to "Dear Students" and explains that university students are reporting lower levels of general wellbeing and more students than ever are disclosing mental ill health. It states that Dr. Heather Sutherland is asking undergraduate student participants (who are also social media users) to take part in interviews that explore their experiences (both positive, negative or neutral) that have been important to them and/or that have impacted on their wellbeing and mental health during their time at this university. The flyer mentions that participating in the project provides an opportunity to say what elements, events and timepoints during an academic year (for example, moving to start university, changing accommodation, exam/deadline periods, transitioning between academic years/terms etc.) you yourself feel are important and critical in relation to the experience of students in specific reference to wellbeing and mental health. It notes that as part of an Office for Students' funded project, this research will increase understanding of what students are experiencing, informing how the university can better provide support and resources for them as they work towards their degrees. It asks if the student is interested in learning more about the project and/or taking part, to email heather.sutherland@northumbria.ac.uk or complete the form at <https://forms.gle/tV9phVaQG3P6pHq28>. It concludes with "I hope to hear from you!" and "All best wishes and thank you for your time." signed by "(Dr) Heather Sutherland (PhD Student, Northumbria University)".

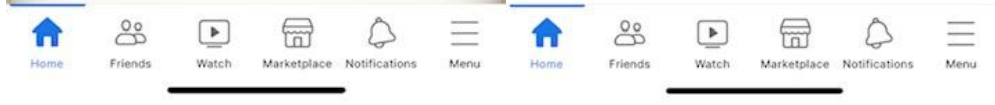
 **The NE Performance, Drama, Music, Dance, Make-Up and Techie's**
Heather Moreno Sutherland · 4 Jan 2021 · 🌐

Hi Everyone,
I hope you've managed a relatively peaceful couple of weeks despite the whirlwind we're currently existing in...I hope you're well!
I'm still looking for a few more 1st year and final year undergraduate students to talk to for my PhD research. My project gives Northumbria students space to speak freely about their wellbeing and mental health experiences whilst at uni.
This is a chance to talk about what's important to you in an uninterrupted space.
For more information about how to voice your student mental health and wellbeing story(ies) to help develop/improve support systems, please email heather.sutherland@northumbria.ac.uk or complete the form at <https://forms.gle/TnFAtvroB6SykFBM9>
Please do think about being involved at this important time for mental health and wellbeing. I'd love to hear from you!
Thank you.
Heather :-)

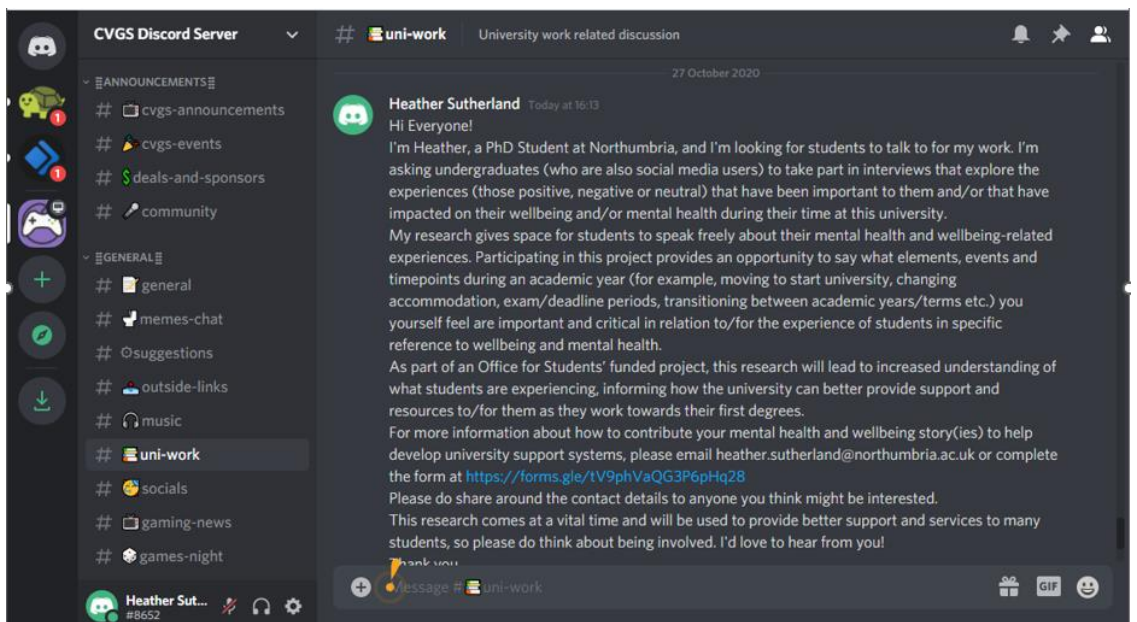
... Please do think about being involved at this important time for mental health and wellbeing. I'd love to hear from you!
Thank you.
Heather :-)



2 comments



C. Example of Post Made Via Computer and Video Games Society



D. Invitation for Third ‘Resonance’ Interviews (Emailed Wording)

Hello _____!

How are you? 😊

I hope that you don't mind my emailing you again. You mentioned in our last meeting that you would be interested in hearing about the development of the project going forward, and that you'd also be happy to help further if needed. As I've begun delving into the interviews that you so kindly took part in last academic year, I would like to ask if you'd talk with me again sometime this winter. There have been a number of interesting elements that have come out across the interviews that I've already conducted, and I'd really like to explore these with you, if you'd be willing? I'd ask you for another chat, but this time there would just be questions from me, all developed from the interviews already analysed. I'd be looking to do this around November/December/January, though the timing is flexible, and you could make it fit around your life heading into early 2022. How would you feel about possibly talking with me again?

I do hope you're keeping well and to hear from you sometime 😊

All best wishes,
Heather

Appendix 3: 'Expression of Interest' Online Form

Research Participation for PhD Research on Student Mental Health and Wellbeing - Expression of Interest

Please let researcher Dr Heather Sutherland know of your interest in talking to her about your mental health and wellbeing experiences as a student.

*Required

Email address *

Your email address _____

My full name is: *

Your answer _____

1 new notification

Type here to search

17:09 31/08/2020

My full name is: *

Your answer _____

I confirm that I am interested in taking part in the PhD research project looking at Student Mental Health and Wellbeing: *

Yes

No

Maybe

My current year of study is: *

First year undergraduate

Second year undergraduate

Third year undergraduate

Fourth year+ undergraduate

1 new notification

Type here to search

17:10 31/08/2020

Research Participation for PhD R x Settings x | +

https://docs.google.com/forms/d/e/1FAIpQLScn9gHwexNgrgrWtXvLAGs7KcS66I-7RigolSF6aSU0N_8sQ/viewform

I confirm I am aged 18 years or older:

Yes

No

I confirm I have at least one social media account that I use regularly (at least twice monthly):

Yes

No

I confirm that I am happy to talk to the researcher (Dr Heather Sutherland) by phone, to help her confirm my participation and to allow her to give me all necessary details regarding my role in and contribution to this research: *

Yes

No

Type here to search

17:10
31/08/2020

Research Participation for PhD R x Settings x | +

https://docs.google.com/forms/d/e/1FAIpQLScn9gHwexNgrgrWtXvLAGs7KcS66I-7RigolSF6aSU0N_8sQ/viewform

I confirm that I am happy to receive (by email) the Participant Information and Consent documents required for this research: *

Yes

No

My full written contact details (postal address inc. postcode; preferred email address) are: *

Your answer

My telephone number is: *

Your answer

Should you have any comments, queries or initial questions you'd like to address to the researcher (Dr Heather Sutherland), please write them here and she will contact you to talk about them. *

Your answer

Type here to search

17:11
31/08/2020

Research Participation for PhD | Settings

https://docs.google.com/forms/d/e/1FAIpQLScnl9gHwexNgrgrWtXvLAGs7KcS66I-7RigolSF6aSU0N_8sQ/viewform

My telephone number is: *

Your answer

Should you have any comments, queries or initial questions you'd like to address to the researcher (Dr Heather Sutherland), please write them here and she will contact you to talk about them. *

Your answer

A copy of your responses will be emailed to the address that you provided.

Submit

Never submit passwords through Google Forms.

reCAPTCHA
Privacy Terms

This content is neither created nor endorsed by Google. [Report Abuse](#) - [Terms of Service](#) - [Privacy Policy](#)

Google Forms

Type here to search

17:11
31/03/2020

Appendix 4: 'Screening Call' Prompt Sheet

Screening Call Prompt Sheet for Researcher Reference - v.01 01/09/2020

- A. Express "thank you" for their interest in participating in the research.
- B. Offer further brief, broad information on the project and the importance of their contribution.
- C. *"Can I give you a bit more specific detail about what you would need to do in this project?"*
 - a. Participation requirements – 2 interviews; different times of academic year; focus on mental health and wellbeing 'stories' etc.
 - b. Participation process:
 - i. Participation Information Sheet and Informed Consent.
 - ii. Social media-post curation – micro-blogging type posts required; longer blogging excluded.
 - iii. How a narrative interview might be experienced (given the space for uninterrupted talk).
 - iv. Online/Remote interviewing circumstances/applications.
 - v. Data recording and use
- D. Confirm:
 - a. 'Would you like to continue with your participation?'
 - b. Details given on the 'Expression of Interest' form - status as 'undergraduate' and '[Name] University Student'; Age; Year of study; Social media use.
 - c. "Is there any other information about yourself that you think would be useful for me to know at this point?"
- E. Arrangement of first interview.
 - a. Online application preference?
 - b. Pre-interview email of social media and Informed Consent requirements.
 - c. Time/date?
 - d. Any specific needs?
- F. Snowballing request – can they refer 2 other students?

Appendix 5: Student Participant Information Sheet

1



Student Stories: Self Reflections on Mental Health and Wellbeing Across Undergraduate University Experiences

Qualitative Doctoral Project

Participant Information Sheet
Version 0.1 (23/07/2020)

Department of Social Sciences
Northumbria University, Newcastle
Via Sutherland Building
Newcastle-upon-Tyne
NE1 8ST

Email: heather.sutherland@northumbria.ac.uk

Doctoral Supervisor – Prof. Peter Francis:
peter.francis@northumbria.ac.uk

Student Participant Information Sheet

You are invited to take part in a qualitative research project....

You have expressed a wish to participate in the research for a doctoral study that asks about the mental health and wellbeing experiences/stories of undergraduate students.

I would very much like to talk to you (in two interviews at different times, incorporating looking at some of your social media posts that you choose to share) about your experiences.

The project provides a space for you to both speak freely and respond to questions about your experiences/stories regarding your mental health and wellbeing whilst you are/have been a student.

What is the purpose of this project?

This project invites students to talk about mental health and wellbeing in their own words, drawing on their own references and experiences/stories. In total, I aim to talk with 30-36 first- and final-year undergraduate students, to build a picture of the types of experiences pertaining to the themes of mental health and wellbeing had across all undergraduate years. I am interested in hearing how mental health and wellbeing features within daily life whilst a person is engaged as a student, as well as learning about experiences that are either positive, negative or neutral in tone. I strongly believe it is important to hear from students directly, in and on their own terms. I would like to understand what things are important to them in reference to mental health and wellbeing in day-to-day living whilst engaged as a student. The outcomes of this project, built from information gained from you in this research, will include recommendations regarding how universities can better foster and support student mental health and wellbeing.

Am I eligible?

Anyone over the age of 18 who is in either their first or final year of an undergraduate study program and who has good command of the English language is eligible to take part.

Do I have to take part?

No, taking part is entirely voluntary. If after reading this information sheet you do not want to continue participation, you are fully able to declare your wish to withdraw.

HS Doctoral Project. PI Document, V0.1, 23/07/2020

If I take part, what does participation involve and how long will it take?

As a first step, I will contact you in person to conduct a screening call and fully explain the project process in terms of your participation. Next, I will invite you to choose 5 of your own social media posts from your preceding academic year which you think illustrate or remind you of 'mental health' and/or 'wellbeing' episodes or stories from that year. Following on from this, you will be asked to attend two interviews at different times. I will invite you bring your chosen posts to the first interview session. In the interview itself you will be invited to talk about your posts and to tell me about your experience(s) of mental health and wellbeing in an uninterrupted manner. I may ask you some questions about what you have said in your talk, but there will not be a set of specific questions that I want you to answer. I will take handwritten notes as you speak to remind me of any follow up questions I'd like to ask and in case of any problems with the recording. The interview itself is a space for your experiences as you want to talk about them. At the end of your current academic year, I will ask you again to choose another 5 of your own social media posts that to you illustrate or remind you of 'mental health' and/or 'wellbeing' episodes or stories from that particular year. I will again ask you to a second interview session where the same process as the first will be conducted.

I am happy to conduct the interviews at any time of day during Monday-Friday. With your permission, I will audio-record the interviews. With your permission and with the correct procedures in place for privacy etc. your social media posts will be retained as illustrative data. The conversations will last no longer than 60-90mins and will be done in person, by telephone or using online platform StarLeaf (should current pandemic-related restrictions need to be adhered to) – you will be able to voice your preference as to which environment/scenario would be best for you. The table below demonstrates to time points for the interview process:

Participants	Social Media Request	1st Interview Time-point and 'consideration period'	2nd Interview Time-point and 'consideration period'
New/Arriving First Year Undergraduates	5 posts for each time-point interview. (10 posts in total per student participant).	October/November 2020 – to cover final school/FE year and transition into university (what is 'brought to university').	June/July 2021 – to cover 1 st year of university experience.
Returning students entering undergraduate 3 rd year.	5 posts for each time-point interview. (10 posts in total per student participant).	October/November 2020 – to cover 2 nd year undergraduate experience.	June/July 2021 – to cover 3 rd (final) stage (year) of university experience.

What will happen with any information I provide?

The audio recordings of the interviews will be transcribed. If you request it, I can send you a summary of your transcript. I will analyse your full transcript alongside those of the other interviews. The analysis I make will be used to create other information sources, including online sources, publications and conference presentations. The information may also be used and referred to in future studies. Overall, the information you give could go towards improving the future experiences of students with regards to mental health and wellbeing issues.

Data Protection and Confidentiality

I will have the primary access to all the information and my doctoral supervisor(s) will also be able to view information as this research is written up. I will follow all ethical practices and any information you give me will be handled in full confidence. The interview recording will be destroyed after transcription is complete. Your personal name will not be used in any analysis. Any quotes will

be anonymised so you cannot be identified. You will not be identified in any publication. All documents/files relating to your interview will be stored confidentially at a digital encrypted file location for up to a maximum of 5 years. After this, arrangements for destruction will be made.

Any personally identifiable information and data gathered during this research is subject to and will be stored in line with EU General Data Protection Regulation (GDPR) and the UK Data Protection Act (2018). The legal basis for the study's personal data processing is that the research is being conducted in the public interest, and/or is necessary for scientific and historical research purposes. For more information on how research data is processed by Northumbria University, and your rights under the GDPR, please see our [Research Participant Privacy Notice](#). Personally identifiable information will be destroyed as soon as it is no longer needed (e.g. email addresses used to keep in contact with you will be destroyed as soon as they are no longer required). Consent forms with personal details will be destroyed within six months of the conclusion of the project.

Are there any risks to taking part?

There are no anticipated risks to taking part in this project, but it is possible that you may reach a realisation you hadn't thought of before during your talk, or a question might trigger emotion. If that happens, we can take a pause or time out or rearrange the interview for another day. Please let me know whatever you would like to do.

I will provide a list of resources relating to mental health and wellbeing for your reference as part of the interview process. Should a continued emotional response be experienced, I would encourage you to contact your GP for further support.

Who is organising and funding the research?

This doctoral project is being run at Northumbria University, Newcastle, and is funded by the Office for Students. The project forms part of a larger project being headed by Prof. Peter Francis entitled: "Mental health and analytics: a continuum approach to understanding and improving student mental health".

Brief further information on the larger project can be seen here:

<https://www.officeforstudents.org.uk/advice-and-guidance/student-wellbeing-and-protection/improving-mental-health-outcomes/>

What happens if there are any problems?

If you have a concern about any aspect of the project, you can contact me and I will do my best to help (my contact details are on the following page). If I see anything that is worrying during my analysis, I will raise my concerns with my supervisor(s), but your anonymity will be protected at all times.

Who can I contact if I have more questions or want more information?

Please do ask if there is anything unclear or if you'd like any more information.

You can contact me, (Dr) Heather Sutherland, at any time by emailing:
heather.sutherland@northumbria.ac.uk

What happens if I don't want to continue in the project?

If you wish to discontinue your participation and withdraw from the project, please contact me via email within 2 weeks of completing the first interview, to ensure that data analysis has not started. I will hold on to and may still use the information you provide up to the point of leaving the project.

If you have any concerns or worries concerning this research, or if you wish to register a complaint, please direct it to my doctoral supervisor Prof. Peter Francis:
peter.francis@northumbria.ac.uk

THANK YOU!

Appendix 6: Student Participation Consent Form

1



**Northumbria
University**
NEWCASTLE

Student Stories: Self Reflections on Mental Health and Wellbeing Across Undergraduate University Experiences

Qualitative Doctoral Project

Participant Consent Form
Version 0.1 (24/07/2020)

Department of Social Sciences
Northumbria University, Newcastle
Via Sutherland Building
Newcastle-upon-Tyne
NE1 8ST

Email: heather.sutherland@northumbria.ac.uk

Doctoral Supervisor – Prof. Peter Francis:
peter.francis@northumbria.ac.uk

Student Participant Consent Form

Please complete this form after you have read the Information Sheet about the research. This study has been granted ethics approval by the Northumbria University Ethics Approval System

Thank you for considering taking part in this research. I have explained the project to you and provided you with the Information Sheet. I am now asking if you agree to take part. If you have any questions arising from the Information Sheet or explanation already given to you, please ask before you make your final decision about participating. I will email you a signed copy of this Consent Form to keep and refer to at any time.

Please tick/initial the boxes below to confirm your consent for each element of the project. If any boxes are unticked/not initialled, I will assume you DO NOT consent to that part of the project. If you do not give consent to one part, you may be ineligible to participate overall.

1. I confirm that I have read and understood the Information Sheet (V0.1, 24/7/20) for the named project. I have had time and opportunity to think about the information, what will happen and what I will be expected to do. I have also had the opportunity to ask questions, which have been answered satisfactorily.	
2. I understand I have free choice to take part and can stop taking part at any time, without giving a reason, without my legal rights being affected.	
3. I consent to my interviews being audio recorded and understand clearly the ways in which the data will be used. I understand that the recordings will be destroyed after the content has been fully transcribed.	
4. I understand that if I feel upset or unable to respond to a question in the interview, I can ask for a break or stop the interview.	
5. I understand that my interview data will be treated confidentially and may be shared anonymously with other researchers. I understand my data will be stored securely on encrypted drives.	

HS Doctoral Project. IC Document, V0.1, 24/07/2020

6. I confirm that the social media posts I bring to this project will be kept, securely stored by the researcher, until the end of the project. I confirm that only the content of these posts can be used in the write up of the research and understand that all identifying features of the posts will be removed prior to any publication.	
7. I understand that it will not be possible to identify me in any of the publications or other works produced that use the research data I provide.	
8. I understand that I can withdraw my data up to two weeks after the first interview has taken place.	
9. I understand that assurances on confidentiality will be adhered to unless there is evidence that potential harm may occur. In such cases, I understand that the researcher may need to contact her supervisor or other professionals.	
10. I understand that I can access more information on how research data is processed by Northumbria University, and my rights under the GDPR, by consulting the University's Research Participant Privacy Notice .	
11. I wish to receive and review a summary of my interview after transcription has occurred.	
12. I agree that my anonymised research data (transcripts of the interview) may be used for future research	
13. I confirm that I voluntarily agree to participate in this project.	

Please confirm your contact details for the duration of your participation in this project:

Postal Address (including postcode):		Telephone Number:	
University Email Address:			
Alternative Email Address:			

If you would like your contact details (name and email address) to be retained so that you can be contacted in the future by our research team to participate in follow-up studies to this project, or in future studies of a similar nature, please tick the appropriate box below.

Yes, I would be happy to be contacted.	
No, I would not like to be contacted.	

Full name of Participant	Date	Signature
Full name of Researcher	Date	Signature

Appendix 7: Interview Guides

A. Guide for Timepoints One and Two

Interview Phases Guide: Student (Narrative) Interview

(Interview structure drawing on narrative model by Jovchelovitch and Bauer (2000) and free association narrative interview method by Hollway and Jefferson (2000))

Pre-recording information

I am doing a PhD that is looking at students' mental health and wellbeing experiences as they go through their undergraduate degree. I really want to capture students' mental health and wellbeing experiences in their own words, to foreground student voices when it comes to these themes/issues. I'm hoping that these interviews will help inform universities about how better to support all students' mental health and wellbeing whilst they are studying.

- You've given your permission for this interview to be audio-recorded.
- Everything you say will be confidential.
- You can choose to take a pause or stop the interview any time you wish. You also don't have to answer any question in the later part of the interview if you feel you don't want to.
- This is how the interview will be structured:
 - There are some elements of student mental health that I am interested in BUT I want to hear your own story and what's important to you most of all. The first part of the interview is therefore just about you having time to talk about your mental health and wellbeing experiences at university as you want to. You should start with the social media posts you've brought with you, telling me about them and what they mean to you in the context of your mental health and wellbeing. You are welcome to go on to talk about other mental health and wellbeing experiences you've had as a student that come to your mind, if that's what you find yourself wanting to talk about. You can take all the time you wish to talk. I will keep quiet, just listen, during this part and won't interrupt you to ask anything. I will take some written notes, but these are just to prompt me to ask you about after you have finished telling your story/stories.
 - We will take a little break after you've finished talking, and in the second part of the interview I will ask a few more focussed questions to follow-up on things you've spoken about or topics that are relevant to the research.
 - You will have time at the end to add in anything else you want to say or that you think is important.
 - After the recording has stopped, I may still take a few notes about what you say, as a reminder to myself of things you've said that I think will be important for the research.
- Do you have any questions at this point?

Part 1 – Start Recording

- A. Discussion about student and their current situation – year group, degree, intersectional characteristics etc.
- B. Students invited to bring forth their chosen social media posts.
- C. Opening question:

“Please can you start by telling me about the social media posts that you’ve brought in the order that you posted them and in reference to your mental health and wellbeing at those times, before expanding on your mental health and wellbeing story(ies) as you’ve experienced it(them), as it has (they’ve) been important to you, whilst you’ve been a student this year?”

- *Notes for interviewer only:*
 - o *Encouraging non-verbal gestures permitted to encourage continued storytelling.*
 - o *Look out for the ‘Coda’.*
- a. *Prompts permitted if needed may include:*
 - i. *Can you tell me a bit about yourself?*
 - ii. *Can you tell me about your experience of being a student? What do you enjoy/not enjoy?*
 - iii. *Can you remember what happened around X time? What was the experience like for you?*
 - iv. *How do you cope with any difficulties you have?*

(If the student is struggling with the narrative format of the interview, move to the more focused question list of part 2 without initiating the scheduled pause)

Pause recording – a five-minute break is permitted to allow design of immanent questions.

Part 2 – Re-start recording - Probing follow-up (Free Association Narrative Approach)

- A. Follow up elements as they were mentioned in the narrative, uninterrupted section of the interview using immanent questions.
 - o *‘Can you tell me more about....?’*
 - o *‘How was [event/experience] for you?’*
- B. Move to the focused Free Association Narrative-style question probes below:

- c. Can you tell me how **X** at university has affected you this academic year? (**X** = start of term; housing; finances; family life; friends; exams; deadlines; relationships with staff)
 - d. Can you tell me about a time during the last academic year when you've been really conscious of your mental health and wellbeing? What happened and what did you do?
 - b. Can you tell me about a time over the last academic year when you have felt your mental health or wellbeing triggered somehow, in either a good or bad way?
 - c. Can you tell me about a time as a university student when you felt or thought that you were struggling or suffering emotionally? What happened and what did you do?
 - d. Can you tell me about a time as a university student when you were feeling emotionally good? What happened and what did you do?
 - e. Can you tell me about a way in which you manage your mental health and/or wellbeing whilst you're at university?
 - f. Can you tell me how involved you are with **X** and how that experience makes you feel? (**X** = students' union; clubs and societies; sports; student support services etc.)
 - g. What have been the university wellbeing resources you've made most of this academic year? What experiences generally have you had with university resources/support services?
 - h. How has being a student impacted on other areas of your life or vice versa this academic year?
 - i. Can you think of and tell me about something you've read, seen, heard about or experienced that made you think about your mental health and/or wellbeing as a student?
 - j. Can you tell me the story of one of your social media posts, how you made the decision of what to write/show in reference to your sense mental health and/or wellbeing at the time? Can you tell me of a time relating to your wellbeing and/or mental health when you have made a decision not to post on social media?
 - k. How do you feel about your overall student experience in reference to your mental health and wellbeing so far? Can you identify a way (ways) that your mental health and/or wellbeing as a student has changed at all?
 - l. Can you tell me how you would describe your mental health and wellbeing over your 1st/2nd/3rd year/whole university experience?
 - m. (1st year students only – Can you tell me what it was like for you emotionally moving into this university?)
 - n. (2nd/3rd students only – Can you tell me what it was like for you emotionally moving into **this** academic year?)
- (No 'why' questions/No explicit questions regarding attitudes/opinions etc.)

C. CLOSING:

- *Is there anything else you would like to share about your mental health and/or wellbeing experiences as a student that we've not covered till now?*
- *Do you have any questions you'd like to ask me?*
- **PILOT RELATED:**
 - *Can you tell me about your experience in looking back at your social media posts for this interview?*
 - *How do you feel about your experience of this pilot process?*

Part 3 – Conclusion of Interview

- A. Initially not recorded.
- B. Concluding 'small talk'.
- C. 'Why' questions permitted at this point – if not already commented, ask explicitly '*You said X was an important emotional time for you - why did you choose to post on social media at that time?*'.
- D. Contextual information can be gathered.
- E. 'Small talk' and other (impression) notes will be recorded handwritten immediately after the end of the interview.

Should valuable comments be made, seek permission to restart recording to include such comments in the overall data for the participant.

B. Third 'Resonance' Interview Schedule

Pre-recording information

Thank you for agreeing to participate in this third interview. As you know, I am doing a PhD that is looking at students' mental health and wellbeing experiences as they go through their undergraduate degree. I really want to capture students' mental health and wellbeing experiences in their own words, to foreground student voices when it comes to these themes/issues. I'm hoping that these interviews will help inform universities about how better to support all students' mental health and wellbeing whilst they are studying.

- You've given your permission for this interview to be audio-recorded.
- Everything you say will be confidential.
- You can choose to take a pause or stop the interview any time you wish. You also don't have to answer any question in the later part of the interview if you feel you don't want to.
- This interview is primarily structured around questions I have formed after initial analysis of the transcripts from the other two interviews conducted for this project. There are a number of categories and themes that have begun to be mapped across the participant conversations, and I would like to explore these with you further. As such, I have a number of specific questions to ask. However, should you wish to raise any other aspects yourself, please feel free to do so at any point.
- I will take some written notes during the interview, as prompts to remind me of anything I'd like to ask you about more after you have finished speaking.
- You will have time at the end to add in anything else you want to say or that you think is important.
- After the recording has stopped, I may still take a few notes about what you say, as a reminder to myself of things you've said that I think will be important for the research.
- Do you have any questions at this point?

Part 1 – Start Recording

A. Opening 'small talk' about student and their current situation

B. Question section:

At the moment, I'm just trying to work through my thoughts and ideas about the details that have come out of the transcripts for the project so far. I'd like to 'play these back to you', as it were, and see what you think. These are categories and themes that I've developed-to-date, and I'd like to run them the past you.

How do these feel to you? (Do the word choices/descriptions resonate with you?)

1. Key reference points/categories:

The experiences highlighted by the participants seemingly fall into the following categories. These seem to be the contexts/content of experiences that matter in reference to 'student mental health and wellbeing'- what do you think?

- Time - perceptions (of connection between periods etc.) and events/moments.
- Place
- Relationships
- Losses
- Existing/enduring university-related myths (being realised or not)
- Language and Communication between university and student(s) on the subject of mental health and wellbeing

2. Through references to these elements, students appear to concentrate on the following themes/strand as core to discussions of 'Student Mental Health and Wellbeing' – what do you think about these (descriptions/wordings/terms)?

- D. Safety and Security
- E. Control and Choice (Empowerment?)
- F. Validation and Recognition

Prompt questions to aid discussion (if required)

- *Who or what is important for your mental health and wellbeing at university?*
- *Who or what is responsible for your mental health and wellbeing as a student?*
- *What are good language/communication examples when trying to understand/talking to students about their mental health and wellbeing?*
- *What are recurrent challenges or positive elements that you associate with 'student mental health and wellbeing'? Why do you think these are recurring elements?*
- *Why do you think the idea of 'crisis' dominates 'student mental health and wellbeing' conversations?*

- *Notes for interviewer only:*
 - o *Encouraging non-verbal gestures permitted to encourage responses.*

Part 2: Conclusion/Closing of Interview

- A. Closing questions:
 - o *Is there anything else you would like to share about your (thoughts on) mental health and/or wellbeing experiences as a student that we've not covered till now?*
 - o *Do you have any questions you'd like to ask me?*

Switch off recording.

- B. Contextual information can be gathered.
- C. 'Small talk' and other (impression) notes will be recorded handwritten immediately after the end of the interview.

Should valuable comments be made, seek permission to restart recording to include such comments in the overall data for the participant.

Appendix 8: Post-interview Resources/Debrief Sheet

1



Student Stories: Self Reflections on Mental Health and Wellbeing Across Undergraduate University Experiences

Qualitative Doctoral Project

Debrief Sheet and Resources List
Version 0.6a (30/11/2021)

Department of Psychology
Northumbria University, Newcastle
City Campus
Newcastle-upon-Tyne
NE1 8ST

Email: heather.sutherland@northumbria.ac.uk

Doctoral Supervisors –

Prof. Peter Francis: Peter.Francis@bcu.ac.uk

Dr James Newham: james.newham@northumbria.ac.uk

Thank you!

Thank you for participating in this research – it has been a privilege to hear your stories, experiences and views, and I appreciate you taking the time to help contribute to the way in which [redacted] understands and supports student mental health and wellbeing.

What was the purpose of the study?

This project wanted to ask undergraduate students to talk about mental health and wellbeing in their own words, drawing on their own references and experiences/stories, to help build a picture of the types of experiences they have and what's important to them relating to themes of mental health and wellbeing whilst at university. It was interested in hearing how mental health and wellbeing features within 'everyday student life'. The outcomes of this project will include recommendations on how universities can better support student mental health and wellbeing.

What will happen to the information I have provided?

The data will be used in a PhD thesis written by the researcher. It may also be used in academic (journal etc.) publications and conference presentations. The information you have provided will remain confidential and fully anonymized wherever used. No personal information will be shared.

Who should I contact if I have any questions?

Please email any questions to Heather Sutherland: heather.sutherland@northumbria.ac.uk in the first instance. If you would like independent information or advice about the project, you can contact Dr David Smailes (Department of Psychology Ethics Coordinator for Post-graduate Research): david.smailes@northumbria.ac.uk or Duncan James (Northumbria University Records and Information Officer): dp.officer@northumbria.ac.uk If you have any concerns or worries concerning this research, or wish to register a complaint, please direct it to Dr David Smailes (Department of Psychology, Ethics Co-ordinator for Post-graduate Research): david.smailes@northumbria.ac.uk ..

If I wish to withdraw the information I have provided, what should I do?

If you decide you want to end your participation and withdraw from the project, please contact me (Heather Sutherland) via email within 2 (two) weeks of completing the interview, to ensure that data analysis has not started. The information you provided in the previous two interviews you spoke in will still be retained and used, but if you wish for your contribution on this third occasion to be removed, this will be adhered to if you contact me within 2 (two) weeks of the third interview.

(This project has been granted ethics approval by the Northumbria University Ethics Approval System)

HS Doctoral Project. IR Document, V0.6a, 30/11/2021

Resources

Below are a few resources that you may like to be aware of, should you come to feel you require any information or support following your interview.

1. Student Support @ [REDACTED] University	Web: https://www.[REDACTED].ac.uk/[REDACTED]/support-for-students/counselling-and-mental-health-support/
2. Student Minds	Web: https://www.studentminds.org.uk/
3. Students Against Depression	Web: https://www.studentsagainstdepression.org/about-us/
4. Student Space	Web: https://www.studentspace.org.uk
5. 'Student Mental Health' via Mind	Web: https://www.mind.org.uk/information-support/tips-for-everyday-living/student-life/about-student-mental-health/
6. Papyrus: Prevention of Young Suicide	<ul style="list-style-type: none"> • Call: 0800 068 4141 • 9am – 10pm weekdays; 2pm – 10pm weekends; 2pm – 10pm bank holidays. • Text: 07860039967 • Email: pat@papyrus-uk.org • Web: https://papyrus-uk.org/ •
7. The Student Mental Health Research Network	Web: https://www.smarten.org.uk/
8. UMHAN – University Mental Health Advisers Network, 'For Students' section	Web: https://www.umhan.com/pages/13-for-students
9. The Samaritans	Call: 116 123 Email: jo@samaritans.org.uk
10. CALM – Campaign Against Living Miserably	Web: https://www.thecalmzone.net/help/get-help/
11. IUCSF – If You Care Share Foundation	Call: 0191 387 5661 9am – 5pm weekdays Web: https://www.ifucareshare.co.uk/
12. Shout	Crisis Text Line – Text 'Shout' to 85258 Email: info@giveusashout.org Web: https://www.giveusashout.org/
13. Office for Students – Mental Health	Web: https://www.officeforstudents.org.uk/advice-and-guidance/student-wellbeing-and-protection/mental-health/
14. No Panic – relating to anxiety and panic attacks.	Web: https://nopanic.org.uk/ Call: 0844 967 4848 Email: info@nopanic.org.uk

HS Doctoral Project. IR Document, V0.6a, 30/11/2021

Appendix 9: Sample Recruitment Engagement and Sites

A wide variety of student-led positions and societies at the specified university were directly contacted by me, (Heather Sutherland), with regard to aiding the publicising of the research participation opportunity at 'student-ground-level'. The list below comprises those who returned contact, and who permitted postings on their social media channels (predominantly Facebook and Instagram) as initial advertisement points for students:

- Yoga Society.
- Self-Care Society.
- The OT (Occupational Therapy) Society.
- *[university name]* Sports Centre.
- Arts and Design Department Welfare Student Rep.
- Department Student Rep., Psychology.
- Social Work, Education and Community Wellbeing Student Rep.
- Department Student Rep., Gender and Diversity, Engineering.
- Department Student Rep., Law.
- Computer and Video Games Society.
- Running Society.
- *'[university name] Drama Students'* – Facebook.
- *'Primary Education Society [university name]'* – Facebook.
- Erasmus Student Network.
- Salsa and Bachata Society.

I contacted but received no response from the LGBTQ* society, the African Caribbean Society, the Women Breaking Barriers Network, the Islamic Society, the Politics Society, amongst several others.

Appendix 10: Sample (Participant) Detail Across Two Timepoints (Nov-Jan 2020-1 and May-June 2021)

<i>Pseudonym</i>	<i>M/F</i>	<i>Year Group at Timepoint 1</i>	<i>Degree</i>	<i>Interview 1</i>	<i>Interview 2</i>
Cherry (PILOT)	F	3	Psychology	20/10/20	26/05/21
Amy (PILOT)	F	3	Psychology	22/10/20	17/06/21
Lucy	F	3	Psychology	04/11/20	10/06/21 - No show
Gemma	F	4	Design	03/11/20	07/06/21
Andrew	M	3	Theatre and Performance	06/11/20	14/06/21 - participant got the date wrong - rearranged for 15/06/21
Anna	F	1	Children's Nursing	10/11/20	20/07/21 - No show
Beryl	F	1	Psychology	12/11/20	27/05/21
Alex	F	3	Primary Education (BEd)	23/11/20	27/07/21
Charlotte	F	3-4	Geography	17/11/20	28/05/21
Nicola	F	3	Sports Science	16/11/20	10/06/21
Dolly	F	1 (Foundation Year)	Law	13/11/20 - no show, rearranged 18/11/20 - computer lost battery, part 2 for 24/11/20 Part 2 interview = tech issues causing cut off. Concluded via email.	21/06/21 - experiencing difficulties, chaotic, expressing wish to continue participation BUT difficult to get a date committed to. Rescheduled 4 times - confirmed for 13/07/21
Pippa	F	3	Mass Communication and PR	01/12/20	25/05/21
Dave	M	3	IT for Business Management	26/11/20	09/06/21 - rescheduled due to illness to: 18/06/21
Lily	F	3	Psychology	27/11/20	20/05/21 - had to leave suddenly; 2nd interview part next day: 21/05/21
George	M	3	Sports Science	03/12/20	No response after first interview

Isobel	F	3	Adult Nursing	17/12/20 (tech problems) and 18/12/20	No response after first interview
Sara	F	3	Occupational Therapy	14/12/20	22/06/21
Mia	F	1	Occupational Therapy	11/12/20 - cancelled due to overwhelm - rearranged for: 21/12/20	29/06/21
Jorja	F	3	Applied Sport and Exercise Science	09/12/20 - cancelled due to illness - rearranged for: 11/12/20 (tech problems). Interview part 2 rearranged for: 17/12/20 - cancelled due student forgetting, rearranged for: 21/12/20	Working full time as well as doing another personal project - not sure on availability – stopped responding to emails.
Bobbie	F	1	Psychology	04/12/20 - cancelled due to illness Rearranged for 10/12/20	15/06/21 - rearranged due to personal circumstances to 28/06/21
Maguire	M	3	Politics and International Relations	08/01/21	16/06/21

- **TOTAL Participants = 21**
- **F = 17; M= 4**
- **1st year of study = 4 (1 = foundation year)**
- **Final year of study = 16**
- **16 Participants completed two timepoint interviews – 5 participants completed first timepoint interviews but not the second.**
- **Total interviews conducted/completed = 37**

Appendix 11: Recruitment and Participant Detail for Third ‘Resonance’ Interviews

All interviews for the third interviews were sought from the existing participants based on the following details:

- All potential participants were asked in the ‘closing talk’ stage of both their first and second interviews if they would like to remain informed regarding the project, including if any further opportunity to speak were to arise. Their responses were noted.
- Potential participants who remain students at the specified university were contacted only where they reported ‘yes’ to the above question in their first two interviews.
- Potential participants who are no longer [name] University students were only be contacted if they supplied a ‘forwarding email’ that they agreed to be used for further contact.
- Any existing participant who did not attend their second interview was not approached.
- Any participant who is no longer a student at the specified university who expressed interest in remaining informed about the project and its opportunities but who did not supply a ‘forwarding email’ was not approached.
- Monthly email communication to both maintain research relationships and to keep participants informed was ongoing since existing participants’ first interviews. It was noted who engaged with (via reply) to these emails, and initial invitations were forwarded first to those who demonstrated engagement in the communication (i.e., those most responsive were prioritised).

<i>Pseudonym</i>	<i>Year Group at Timepoint 1</i>	<i>Degree</i>	<i>Interview 3 – ‘testing ideas’</i>
Cherry	3	Psychology	Not eligible for contact – no forwarding email supplied
Amy	3	Psychology	Not eligible for contact – no forwarding email supplied
Lucy	3	Psychology	Not eligible for contact - did not complete two timepoint interviews
Gemma	4	Design	Not eligible for contact – no forwarding email supplied
Andrew	3	Theatre and Performance	Not eligible for contact – no forwarding email supplied
Anna	1	Children’s Nursing	Not eligible for contact – did not complete two timepoint interviews
Beryl	1	Psychology	Invited but no response to request email
Alex	3	Primary Education (BEd)	Not eligible for contact - no forwarding email supplied

Charlotte	4	Geography	Interview conducted 10/12/21
Nicola	3	Sports Science	Not eligible for contact - no forwarding email supplied
Dolly	1 (Foundation Year)	Foundation Law	Invited but no reply to email request
Pippa	3	Mass Communication and PR	Not eligible for contact - no forwarding email supplied
Dave	3	IT for Business Management	Invited but no reply to email request
Lily	3	Psychology	Not eligible for contact - no forwarding email supplied
George	3	Sports Science	Not eligible for contact – did not complete two timepoint interviews
Isobel	3	Adult Nursing	Not eligible for contact – did not complete two timepoint interviews
Sara	3	Occupational Therapy	Invited but no reply to email request
Mia	1	Occupational Therapy	Invited and response received - wanted to participate but mental health difficulties prevented securing interview.
Jorja	3	Applied Sport and Exercise Science	Not eligible for contact – did not complete two timepoint interviews
Bobbie	1	Psychology	Interview conducted 17/12/21
Maguire	3	Politics and International Relations	Not eligible for contact - no forwarding email supplied

B. Initial Transcript Familiarisation and NVivo Coding Example

It's the 'little things'

wanting personal contact.

we were just being sent these emails that just didn't feel very personal and we were just struggling and y'know. I think that's the main thing is nothing felt very personal. We didn't, because our cohort is so big maybe there was like no sense of like, like y'know, belonging in terms of anyone knowing who you are, in terms of the, the tutors. I mean, it was all very general. I had one, she was a masters student who tutored us through our em lab reports and she was the only one that I felt I had a little bit of rapport with but other than that, maybe because the cohort's so big nobody was keeping tabs on individual students, so I think people really started slipping at this point, and y'know, people are slipping through the cracks and people are really struggling and y'know. I felt really daunted by the aspect of even finishing second year. I thought I don't know if I can even do it, and so for me these posts of going to the beach were like so important when we used to get our little walk and it was that sense of freedom and going out, clearing your head, taking the dogs out seeing their excitement and stuff, and that was sort of the thing that, little things like that really kept me going through university at that point. Erm but despite that, it's quite a nice post to look at because I think that's when I started feeling a lot better in myself, because that sense of loneliness had really left at this point because I think everybody was in the same situation and so I felt less alone 'cause I thought, well, everybody's in their house and everybody's y'know feeling this weight and y'know, everybody's got this sense of 'what the hell is going, what're we gonna do? How're we gonna to complete uni?' erm and we had like a little group chat in for the whole cohort, so some people'd send and I found that really important, erm was, were that group chat because you really think, like everybody does fail the same way as you, it's not just you and I think that's so important for people to understand, is like it isn't, if, when you feel like it's just you, it feels a lot harder. but when you feel like a lot of people may feel the same way, it feels so much better and it feels like erm, y'know it, it just makes you feel less alone and I think that's the main thing for me, with, with that post and with going to the beach and that time at, at university where I felt like I was lost and like 'I can't do it', I felt really stressed out, erm that felt, y'know, that getting out into the fresh air is, is so important and I think I recommend to anybody getting out there and just feeling a little bit of freedom of going to the beach or going to a forest or just walking around, I think it's really important for your mental health and it works for me, especially in regards to university 'cause I know when most universities are in cities and you can feel very under pressure in a city, y'know you look around and everyone seems successful and everyone's rushing around and y'know they're all doing their own thing, and it, it's easy to feel like you're falling behind or you're, y'know not doing as well as everybody else, but I think once you come to yourself and you go and you go and walk to the beach you just don't think about success and you don't think about erm sort of getting the best, the best grades you can get 'cause you think "well maybe there's is more to life than just sitting at my laptop and stressing over a paper and trying to find the best paper to fit in with my lab report and so that's what that signified for me, and mainly as well having the animals there. I think the animals are so important and I know at uni a lot of people don't have animals and obviously I didn't have animals for the first, y'know, two years 'cause I had a family dog, y'know, but I couldn't see her erm. So I think even just being able to have that like sense of a little animal there to keep you company, it's, it's great, it was really nice, so with that post that's definitely what I feel, it's a sense of freedom. Erm clearing, clearing my head and going out into an open space, it was just, it was really, really important during that particular lockdown.

excitement + happiness of others = overall +ve senses

idea of 'alone'

comparing with others.

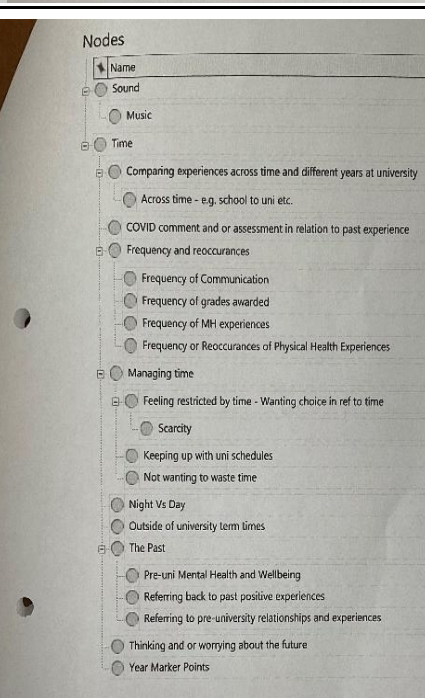
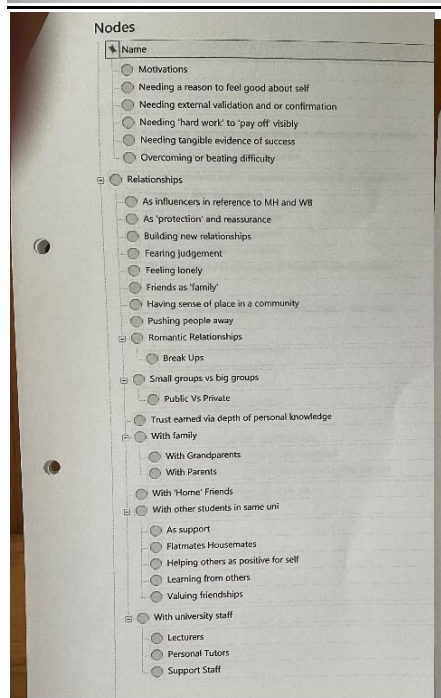
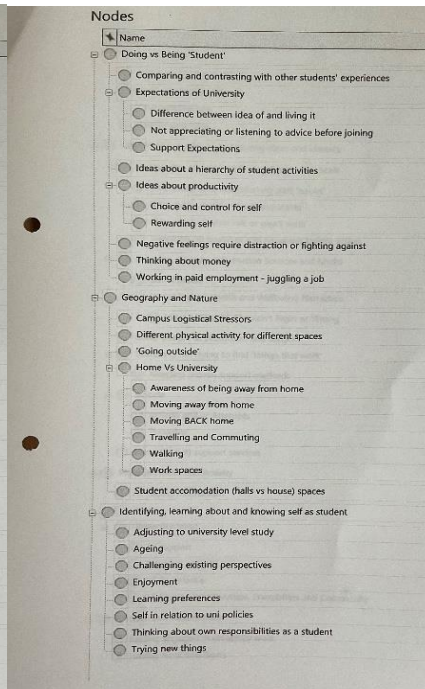
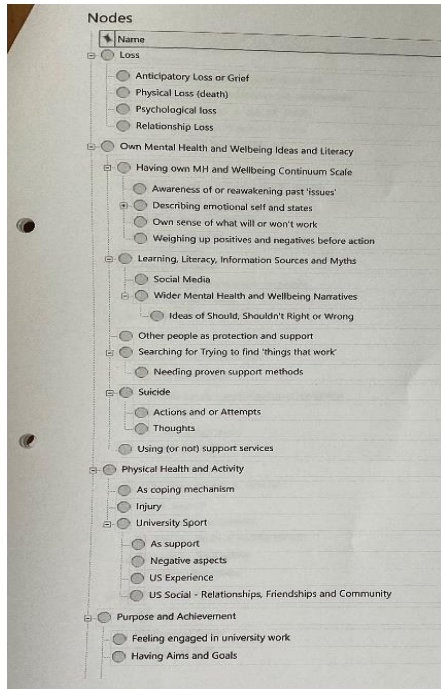
combating idea of 'alone'

going to feel like trapped by me knowing a escape = share help

going outside = coping

redirecting attention to present self.
→ escaping, avoiding, wanting to not feel restricted/trapped

what does going outside mean/imply



Appendix 13: Research Fieldwork Journal Example Notes

29/9/20 - initial contact sent to:

1. President of SU
2. SU VP Welfare
3. Arts + Design Welfare
4. Business and Law Welfare
5. Psychology Rep. Rep.
6. Social Work, Education and Community
7. Self care society
8. Women Breaking Barriers Network
9. African Caribbean Society
10. Chinese Students and Scholars Assn
11. LGBT+

not responding with no contact.

Replies on 29/9/20 from 3., 5. and 10.
Replies on 30/9/20 from 6.

3. Posted request + expression of interest via ADSS private facebook group.
5. Sent out details to 3rd years

2 expressions of interest received via link (1 on 29/9/20, 1 expression of interest via link on 30th/9/20. All 3rd years.

5. Signposted me to lecturing staff.
6. will disseminate details at departmental meeting and also signposted to teaching staff.

(interesting that the reps themselves did not put selves forward, did consider themselves ANO that referred to adult, non-student figures first.... why?).

Comments/notes on recruitment, replies and responses.

References to suicide.

Notes -
Appeared tired at end.
Overwhelming to talk about it all.
Hand gestures.
Used suicide - shooting hand gesture during the talk

9:30 - NO ST

Feeling of tiredness, compassion fatigue
problem of having the energy for conversations.

Noting of emotional impacts on researcher during fieldwork.

20/11/20 - sought Brief support from Phil Brooke.

Noticing a desire to not recruit more participants.
More anxiety about the project.
Running away a bit from the data, no sense of the data.

Her brother - noise interruption
Her dog needing a ~~addle~~.
Closing the window as people going passed.

She changed her room - folders + shelves etc.
May fever exhaustion.

eating +
coffee making
during
interviews.

'Domestic trigger' and visible interview elements example notes.

Post Lockdown email sent to all participants on 5th Jan
↳ 3 responses on 5/1/20.
↳ 1 expressing frustration at
the university, feeling let down
She has stayed at home and
is still paying rent.

Example note on
between-timepoint
'check in' emails.

Appendix 14: Supplementary Participant Quotations

Page	Quotation
133	<p>On impacts of school ethos and culture: <i>"I went to Catholic school ... it was a private school, very small class sizes. You're expected to just ... be really good at sport or be really good at academics, and I was very much in the middle ... I was good in my classes but was getting Cs and Bs rather than As and A stars, which the other people in my class were getting. So ... I was really, really, really upset in upper sixth ... the school got the counsellor in ... that's the first time I ever really talked about it [mental health] because ... go to a school with a lot of opportunities ... I was like, 'I have no reason to be this sad or this stressed or this anxious.'" [Lucy]</i></p> <p><i>"[I] had a few issues in my sixth form, and it was one of those sixth forms that was very like, 'if your parents don't put anything in, we're not going to help you.'" [Nicola]</i></p> <p>On distress as originating in school years: <i>"I was being bullied at school but going to [sport] was a break from it ... it was just something that I could go and do; there was no one from school there." [Isobel]</i></p> <p>On pastoral relationships with school staff: <i>"I've always had great relationships with my teachers, especially in A Level, I had brilliant relationships with teachers. I was very comfortable with them." [Pippa]</i></p>
137	<p>On seasons and weather in relation to mental health: <i>"the weather makes everything better ... when the sun's shining ... you can wake up, you open your blinds and like [nods], 'Nice.' Literally blue sky, it just makes you feel so much better ... the weather definitely does affect mental health." [Maguire]</i></p>
138	<p>On times of the day: <i>"I tend to be better in the morning, and then kind of drop off" [Lily]</i></p>
143	<p>On 'happy' places: <i>"My little sister died, so one of my big places is her graveside, it's just peaceful. It's very quiet, it's beautiful, no litter. It's a beautiful place to go. If I've got too much going on in my head, and I feel sad, I go there just to talk to her basically." [Dolly]</i></p> <p><i>"just feeling a little bit of freedom of going to the beach or going to a forest, I think it's really important for your mental health and it works for me" [Lucy]</i></p>

144	<p>On [feeling] ‘at home’: <i>“[we said] that we’d make it a house, and we’d go to IKEA and decorate and I was really excited, you know, like a proper flat, proper homely, and it wasn’t. I didn’t spend a lot of time in the flat; I didn’t want to ... it just wasn’t a very homely thing.” [Charlotte]</i></p> <p><i>“We’d go on a shopping trip, get some snacks in and just have a family games night. We used to call them ‘family games night’ [laughs]. We always used to, if someone was down.” [Anna]</i></p>
145	<p>On separation of spaces: <i>“I get too distracted at home” [George]</i></p> <p><i>“If I’m in my room, depressed, I’ll go into the living room, kind of just take myself out of the room, or I’ll get out the house, so I’m not in the house.” [Lily]</i></p>
146	<p>On controlling virtual space mental health content: <i>“I have my main Instagram account; I don’t post on that much ... and the fun [private] account, something that I find really valuable ... it’s mostly my closest friends. I feel it’s a good way for me to get stuff off my chest ... if I’m not feeling great or if something really good’s happened that I wouldn’t want to share with everyone, I’d put [it] on here ... I find the private Instagram really useful for me.” [Maguire]</i></p>
150	<p>On COVID-19 positives for work: <i>“I saved so much money by not travelling constantly and then getting my furlough pay” [Mia]</i></p>
152	<p>On enduring impacts of bereavements: <i>“I still get emotional thinking about my pet dog that died about 10 years ago” [Cherry]</i></p> <p><i>“the things she did or said still, 2 and a half years on, can derail me like that [clicks fingers]” [Charlotte]</i></p>
158	<p>On childhood friendships: <i>“the main person I speak to is my friend from home who I went to school with, who knows all about my situation from school, and she was the only person I really spoke to in school as well.” [Lily]</i></p>
159	<p>On the positive impacts of relationships with animals: <i>“I love animals ... I was a pretty sensitive child ... I was not very confident and I felt very bad in my own skin ... I was just scared of people ... then the horse-riding [laughs] you could just feel the connection with the horse and it was so good.” [Beryl]</i></p> <p><i>“this cat is a character, such a bonnie, happy thing in my life that I can’t be sad, even when I’m feeling, ‘Oh this is a terrible day’ ... there’s a cat,</i></p>

	<i>and he's playing with my feet, and it's like, 'How can I be sad?' ... I know that [cat] is worth it, for me and for my mental health" [Gemma]</i>
162	<p>On food and nutrition: <i>"I've got full control of my diet at uni. What the issue was when I was younger is that I didn't, and I couldn't control what I ate ... when I was younger, I was like, 'when I go to uni, I'm just not going to eat anything, no one can tell me.' But since I've got to uni that hasn't been that much of an issue. I can cook foods that I enjoy and, well not all the time, but I can make sure they're healthy." [Maguire]</i></p> <p><i>"I feel ninety when I wake up 'cause that's the stress, or the fact I probably haven't had fruit and veg in about three weeks because who has time to prepare vegetables? You don't have time for that. You have time for a bag of crisps or chocolate because you [mimics fast gulping], do you know what I mean?" [Charlotte]</i></p>
163	<p>On sporting injury: <i>"I had a really bad sporting injury to my shoulder; this is something that has reoccurred quite a few times. Obviously, sport is a big part of my life and I thought I'd just have to give it up, and I just thought, "there's no element of fun really, I'm not going to be able to do what I enjoy most"" [George]</i></p> <p><i>"if there's ever been a time where I haven't been able to exercise so much or if I've been injured or anything like that, I definitely don't feel as on top or... as positive ... at the start of last year I got injured ... and I know that had a big impact on how I was feeling. And then once I got back to [sport], it completely helped me to feel better ... because when I was injured, I couldn't do anything." [Sara]</i></p>
174	<p>On stretched university SMHWB support services: <i>"ok there's student services and stuff like that, but the waiting list, and it's so undervalued within the university that there's not the funding, so there's not the people, so there's not the support." [Charlotte]</i></p>
186	<p>On placements as producing difficulties: <i>"it's flat out, eight to four, nine to five, which takes a lot of adjustment when you've maybe been in uni for just half days ... you feel you're being watched the whole time and ... I think it's a massive routine change ... people just aren't always ready for I t... and travelling ... that was quite tricky ... by the time I walked and got the Metro, it was about an hour each way, so I found that all quite tricky along with having to be on form all day and then quite often going to [uni sport] in the evenings." [Sara]</i></p> <p><i>"by the time my rent had went [sic.] out of my student loan ... I was having to work otherwise ... I couldn't get to placement ... we have tried to bring up the fact that [other course] students get money back for placement - they can submit receipts or bus tickets ... to get their get money back,</i></p>

	<p><i>what they spend to get to placement. We do not. Our course is not like that, we have to pay for that ourselves ... it cost me nine quid a day for placement in the first year ... it was mad. So yeah, it has been a little bit of a struggle.” [Alex]</i></p>
192	<p>On waiting for assessment results: <i>“I hate the wait, and I hate not knowing ... [I’m] really anxious about it. I found it worse when I’d had an extension and when people that hadn’t had got their marks back and I was still waiting.” [Isobel]</i></p> <p><i>“the email comes through and I have that moment where it’s like, ‘if I just delete this and don’t open it...’, y’know, the Schrödinger’s Cat kind of vibe. If I don’t open it, I don’t know.” [Dave]</i></p>
194	<p>On symbolism of numerical results – good/bad: <i>“40% is only just a pass, it’s no good, ‘you need to pull your ideas up, you’re stupid.’ And I cried a lot. I wondered if university was right for me because I’m not your bog-standard university student [pause] ‘Should I be doing this? Why do I want to do this? Why do I want to put myself through this?’ It’s remembering that I want this, and the reason that I’m doing this is to make a change for me.” [Bobbi]</i></p>
197	<p>On emotional relationship with/ attachment to study content: <i>“I’ve always [participant emphasis] wanted to do [this], like I’ve never had a back-up plan. It’s always been that. If I didn’t end up doing it, I genuinely would feel like I’ve failed in myself. And I know it would’ve just drove me insane and would’ve really, really made me down and sad ... genuinely a lot riding on it, so it was quite a big thing for me, what I studied.” [Anna]</i></p> <p><i>“I think that’s what got me really interested and wanting to do [subject], [the] things that have happened in my life ... because I’ve gone through these things, I think I can handle my course content ... I’ve been there before ... and I was shocked to find that, ‘actually, no, [own name], you don’t know everything’ and it was a knock on me [sic.] confidence [smiles].” [Dolly]</i></p>
200	<p>On staff engagement in reference to triggering content: <i>“when it comes to people talking about very intense things or conversations becoming very deep, people sharing personal experiences and stuff, [it] can be quite tricky sometimes. There are obviously things, risks that come up or things that are sad that we have to learn about ... it can make you feel really sad at that moment in time and for that day when you’re studying it. One of my tutors ... gave us a talk, and quite a bit of it was quite sad. But they had this disclaimer that it was going to be sad, and if you had to go out at any point to do that. So we all felt supported through it and I think that helps to get over it ... there are just some things that are triggering or quite sad, but at the same time because our tutors know they’re going to be, we’re supported through it.” [Sara]</i></p>

201	<p>On university as 'provider of focus': <i>"I woke up and I can remember having the realisation that I'd probably be spending the entire, full day on my own ... then I actually felt good once I was there [on campus] ... once I got to university, I always felt great ... But then when I finished, I would wander round thinking 'I don't know what to do next. I don't know what to do now,' so I'd just walk home. And then I'd think, it was always mealtimes I'd be thinking, 'well I gotta sit and make a meal for myself. Maybe I don't want to make a meal just for me, so I won't have any food then'."</i></p>
201	<p>On COVID-19 disruption to university routine and structure: <i>"if there's an online lecture I just think, 'well I'm not gonna get penalised for attendance so I'll just catch up on it later,' and then obviously that's one of the ways that I start getting behind." [Jorja]</i></p> <p><i>"Over lockdown I had absolutely no routine ... And I was like, 'I know I'm better with routine and, obviously, in [university physical location], I'll be in a routine." [Lily]</i></p> <p><i>"for the first year I had a good balance of what I did at home, what I did in uni, and then it all became at home along with everything else. So I think that move triggered me." [Jorja]</i></p> <p><i>"COVID and student wellbeing is an absolute minefield to be brutally honest. It's even easier to avoid a class. At least when I was going into class it was like, 'Right, out of bed. Go in the shower. Look, you've got a fifteen- minute walk,' maybe go in a little bit earlier if I want to grab a tea or a coffee ... it was easy to get in a ritual because it was like. 'Right, you've been in the shower, you might as well put clothes on now. Now you're dressed, you might as well put your shoes on. You've got your shoes on, you might as well go outside.' And it builds up. Now I could really avoid it." [Dave]</i></p>
201	<p>On needing time to learn about the university structure and routines: <i>"as much as it's terrifying, 'cause I've got a dissertation to do ... I feel like I've got the experience now of the first two years. I know more what's going on. I understand the timetable of when things happen in uni, when they don't, so I feel happier and more content in what I've gotta do this year, even if it's gonna be more important work ... it just feels like I know the structure of the year better, so I can prepare myself better and in turn feel more relaxed about it than I have done in my previous years." [Cherry]</i></p> <p><i>"as a [final]-year student, I'm now watching the freshers go like, 'oh my god', panic. I think that definitely as the time has gone on, I've got way better at dealing with it ... I think that that level of stress really negatively affected me in the first and second year, but then you sort of learn to do it ... I think that those constant deadlines just cause massive stress and strain, and a lot of the younger students don't know how to deal with it yet. But they get there. And I got here. And I actually really</i></p>

	<i>like the regularity of it ... in the beginning it was tricky because I'd never done anything like it before." [Gemma]</i>
201	<p>On creating personal strategies from the university baseline structure:</p> <p><i>"I started setting my deadlines for a week or half a week earlier than they were, and I'd always forget the actual [laughs] date of the deadline but remember my fake one. I kept thinking 'well, that must be the real deadline'. I'll just pretend that they're a week earlier than they are, so I know I've got that time. I'll always get them done for my now new fake deadline and to me that really helps." [Cherry]</i></p> <p><i>"I really like to have everything done a bit earlier, not on [sic.] the last minute. I wanted to have it ready a few days before the deadline." [Beryl]</i></p>
202	<p>On institution unhelpful changes to structure and routine:</p> <p><i>"I went to them and I was like, 'look, I've put my extension on it anyway, because I've got dyslexia, but I just can't do it. Can I have an extension? I don't know what to do.' And he was so lovely, and he sorted it for us, which is amazing and took a lot of pressure off, but he was too nice and was like, 'whenever you can do it, just let us know and submit it by email. You do it when you're ready.' [pause] I need a deadline! And it just kept floating ... it needed doing, it was in the back of my mind, it was causing stress, but I didn't have the motivation because I didn't have that deadline ... he didn't go, 'well can we try and get it done by January?' It just continued. And it was just a thing that hung over us [sic.] ... Give me a deadline, it gets done in time, but if it's not got a deadline, it's just going to float." [Charlotte]</i></p> <p><i>"as long as I know what I'm doing it's fine ... So, if I went in at twelve and was told, 'It's twelve until three', and then they were like, 'Actually, we need you to stay till five', I'd start to panic if I didn't have any food with me, because I'd be like, 'I'm hungry,' and I really don't cope very well with the feeling of being hungry." [Mia]</i></p>
204	<p>On [feeling relief/lucky] when academic and personal time requirements are 'juggled' successfully/coincide:</p> <p><i>"I'm very lucky in the job that I've got. Because it's the students' union, it works ... it has no choice but to work with the uni timetable." [Nicola]</i></p>
206	<p>On ineffective response and/or imprecise information in university communication:</p> <p><i>"asking them like five questions in an email and their reply would be, 'okay, sounds good.' You're like, yeah, that answered nothing ... and sometimes they'd try and explain things and just make it worse." [Cherry]</i></p> <p><i>"when I contacted the university, it was actually strange because one man told me that the hardship is not to fund students - they won't just give me money because I'm not in like a very difficult situation, so I can't have</i></p>

	<p><i>the hardship ... and then on my student portal, I got the information that I can't apply for hardship because I'm not a UK student and that's it [the reason]. So I didn't know what to do." [Beryl]</i></p> <p><i>"I sent an email to all of my module leaders and personal tutor and everybody who's teaching ... I said I'm struggling. I need to let you know that I'm struggling ... There was a couple that didn't reply ... [it] kind of annoyed me. There was just no response. No acknowledgement ... it's frustrating that he doesn't seem to have acknowledged that I was struggling. But then I guess everybody is getting battered with emails. So the logical side of my head is saying, 'there's only so many hundred thousand emails they can reply to in a day, week, year. But ... [pause]."</i> [Bobbi]</p>
209	<p>On pressures facing academic staff: <i>"I think they've been a bit overwhelmed by the fact that we've got an enormous cohort this year and everything's online. I've seen people say ... 'I've emailed about something and I need some help' and nobody's gotten back to them ... the tutors go, 'Oh just drop us an email and we'll get back to you,' but I think they've maybe been a bit overwhelmed themselves." [Mia]</i></p> <p><i>"universities have a lot more people than school, so I know that lecturers can't help you out as much as teachers. They don't have a lot of spare time in comparison to teachers, so I mean I do think the help provided by uni is probably the best that they can." [Jorja]</i></p>
210	<p>On wanting informality and spontaneity in relationships with academic staff: <i>"[I] had more support from placement ... not because I've purposely asked - it's just if I've gone a bit quiet or whatever, someone's asked if I'm OK ... I think the ability to have a conversation, and it seems much less formal on placement, so it's a bit easier. Whereas if I wanted to talk to my tutor about something, I'd have to plan a time and meet and then I could be feeling completely different by then, but then on placement it's like they're like there and then, which [is] a lot more helpful." [Isobel]</i></p>
211	<p>On the role of reassurance and stability provided by academic teaching staff: <i>"I sat down and I showed him my notes and stuff and ... He says, 'you're on the right track to start' ... just having that voice of reason to tell you've been alright." [Maguire]</i></p> <p><i>"we made an appointment to speak about the assignment ... he was very helpful, didn't seem judgey at all...And I just said, '... it's been a great help. I'll go away and give it a go.' And he was like, 'you won't give it a go, you'll smash it.' Which obviously was a confidence boost, it did really help ... when he replied, saying that I would smash it, that did boost my confidence and it put me in more of a positive frame of mind." [Jorja]</i></p>

	<p><i>“two of our course tutors started a weekly drop-in ... it was one of the only constant, stable things and ... just provided a lot of reassurance ... even if they didn’t know the answer, just knowing that they cared, and that they were there.” [Sara]</i></p> <p><i>“Some of the lecturers that we do have haven’t been in school for years and so it’s a real struggle for them to actually realise that things have changed quite a bit [LAUGH] They don’t tend to understand some of the stresses that we have.” [Alex]</i></p>
214	<p><i>On good relationships with dissertation/project supervisors:</i> <i>“it’s nice to be able to get guidance from a person that I feel connects with me academically, we’re doing similar things. He enjoys doing what I enjoy doing, and he’s got a nice sense of humour. He also loves the dog [smiles] and it could have been a lot worse basically, is what I’m thinking. I feel like [smiles] I’ve got quite lucky.” [Cherry]</i></p>
218	<p><i>On not sharing personal [emotional] experiences with university friends or judging their trustworthiness:</i> <i>“none of my uni friends know about the story [friend suicide loss] ... I don’t talk to them about it.” [George]</i></p> <p><i>“I put people through a test, without them knowing, to judge ... like, ‘What’s your opinion on this? What is your opinion on that? How much do I trust you? Where is this friendship going? Can I see it going into the future or are you kind of around because we’re course-mates? ... telling them something, how do they react? ... I think it’s my coping mechanism to not rely too much on that person.” [Charlotte]</i></p>
218	<p><i>On the importance of positive peer relationships when in university-allocated accommodation and on programmes of study:</i> <i>“I really clicked with all of my flatmates so that was a massive relief. I just thought, ‘it’s gonna make doing uni work a lot easier.’” [Amy]</i></p>
219	<p><i>On university as location for wider opportunity and self-development:</i> <i>“I’m in quite a few societies. They make you feel like you’re not just at uni to learn, like you <u>are</u> [participant emphasis] there to make friends, you <u>are</u> [participant emphasis] there to experience things that you wouldn’t otherwise experience.” [Dolly]</i></p>
219	<p><i>On involvement in student societies and Students’ Union as means to feel part of a community:</i> <i>“[the student union] it’s made me feel like I’m a lot more part of a community, and a lot more at home at uni ... ‘cause you meet people that are years above you or below you, on completely different courses, that you would’ve never met otherwise, and it really does help build this sense of community, and it took a long time but I do feel I’m part of a community and a really nice university. I’ve always liked the uni ... but I finally feel like I know the people more.” [Cherry]</i></p>

220	<p>On embedded ‘drinking culture’ traditions – inability to challenge/change them:</p> <p><i>“there was quite a lot of conflict in the team, with the older girls ... we didn’t think the way they were treating the freshers was appropriate ... they were saying that they were just treating them how they were treated when they were freshers. And we just didn’t really agree with what they were doing. And it just wasn’t enjoyable for anyone ... they felt like they had this sense of authority ... I think we were the first year to almost hit back and stand up for ourselves a bit and be like, ‘this is so wrong what you’re doing’ ... me and my friends were the only people to stand up to them, and I think they felt a bit threatened by us ... I think they had this perception that when they would reach final year, they would be the best in a team, they would have all this authority and they would run the show ... there was just a big sense of hierarchy basically ... the leadership roles just went to their head, and they used it as a way to abuse what they were supposed to do ... it was slightly better this year because a lot of the people that were like that left last year, but there are two or three that are still here...and they’re still trying to reinforce older generations’ behaviour.” [Lily]</i></p>
223	<p>On university as facilitative of a more positive ‘Education Self’:</p> <p><i>“here in the UK, I can be myself and not try to stick to any norms or anything because the society is much more open ... back in [my country], on (sic.) our classes, even our teacher were (sic.) saying some racist or homophobic things” [Beryl]</i></p>
224	<p>On how university can reflect back to students changes in their financial situation across time:</p> <p><i>“going into my third year, Mum had got a new job and that means I got a lot less student finance and it only just covers my rent this year. So it’s been more stressful. I lost two grand in my student loan, which was a sizeable chunk. It just made things more stressful. I’ve got to be more careful.” [Maguire]</i></p>
224	<p>On university finance support mechanisms as negatively impactful/stressing:</p> <p><i>“student finance is one I’ve had problems with for years because my mum does my application and she just isn’t very good at doing very many things in terms of responsibilities, so I seldom ever get the full amount that I’m actually entitled to until much later on ... so I’ve got to work more in order to support myself at university because there’s actually very little you can do. If I were to tell student finance ‘my family aren’t cooperating with the application’ I think they would just say ‘it’s tough’.” [Lucy]</i></p>
231	<p>On personal family-related meanings connected to university:</p> <p><i>“I started thinking my grandad wouldn’t want me to have quit uni ... and I just thought ‘you need to get yourself together’.” [Amy]</i></p>

231	<p>On university bringing ‘better life prospects’: <i>“I still have in mind that if I stayed in [my country] it would be much cheaper, but at the same time I know that I will have better perspectives (sic.) for my life after finishing in British university.” [Beryl]</i></p>
236	<p>On the need to differentiate between year-group academic needs to avoid institutional contribution to student stress: <i>“they had a meeting with all years of [course subject] students. It was possibly the most chaotic thing I’ve ever been a part of. And we emailed, like, ‘why didn’t you do it for each separate year?’ Because we were asking questions about dissertations, but instead random questions about group work from first-year were getting answered, and it was impossible. It made the matter just worse.” [Cherry]</i></p>
237	<p>On self-shaming when needing support from the university: <i>“even though there wasn’t any shame, I felt ashamed that I needed to rely on that [student support], that I had to stoop to counselling levels.” [Gemma]</i></p>
240	<p>On university as source of exacerbation for distress during difficult life experiences: <i>“it [relative’s death] wasn’t during an exam deadline or anything, it wasn’t at the most stressful time ... It would’ve probably been worse if it was around a deadline or an exam or something like that ... obviously ... when you’re at uni and you’ve got a lot of uni work to do as well, it’s just not the best timing.” [Jorja]</i></p>
248	<p>On support mechanisms as remover of personal choice/control: <i>“they [university support] basically just said ... the only other option was to submit a PEC form and hand it in in August, but that would’ve meant that I wouldn’t have been graduating at the same time as everyone else ... I was in hospital 3 weekends leading up to my diss, and I couldn’t even get extra time based on that. There was no leniency. It was, ‘either hand it in on this day or hand it in in August.’” [Lily]</i></p> <p>On ignoring personal need to prioritise university requirements: <i>“sometimes I just disregard it [my mental health] because I’m like, ‘I’m busy. I’ve got loads of lectures; I can’t go for a walk now.’ So sometimes I just ignore it.” [Mia]</i></p>
250	<p>On the over time development of ‘Self-support’ Arsenal: <i>“I think I’ve, over the years, learned different techniques, whether it’s been from therapy, from books I’ve read, from my friends, and I’ve learned that actually these things do help me. And I know that if I am starting to struggle with eating or anything else, actually there are little things that I’ve got in my arsenal now that I can go, ‘Hm, this helps.’” [Mia]</i></p>

251	<p>On reframing emotional understanding upon self-reflection: <i>"it was the disappointment [of a non-achievement] ... But I now see the experience's value ... I know that it's something I can put on my CV and it'll be useful."</i> [Maguire]</p> <p><i>"it's not a 'me problem', it's a 'them problem' ... 'me problems' and 'them problems'."</i> [Bobbi]</p> <p><i>"I think that isn't something that people are taught, [that] criticism isn't always criticism. It isn't always telling you that you're bad. It's telling you how to improve."</i> [Dolly]</p>
251	<p>On keeping 'little things' in check: <i>"I am actually stressed about uni or being on placement. I'm anxious and telling him off because ... he ate the last of my cereal. I properly told him off. And he's like, 'we can go and get you some more cereal later. It's cereal!' And I was like, 'Yeah, OK, I'm really sorry.' ... I knew I was being a dick, but I was just like [shouts] 'YOU'VE EATEN THE LAST OF MY CEREAL.' I was really mad at him and it's like, 'It's cereal, why....? I go, like, 'Right, OK, why are you stressed about this? What do you need to do?' And I'll break it down, to manage"</i> [Mia]</p>
251	<p>On different relationships for different information: <i>"nothing wrong with my flatmates here, they're lovely and supportive, but they didn't know the ins and outs, and they don't need to know the ins and outs. They were never going to. I wasn't prepared to open myself up and create a load of vulnerability with strangers I'd just met just because I couldn't see anyone else."</i> [Dave]</p> <p>On controlling who knows what: <i>"I am quite selective on who I'm friends with ... I don't have an issue with just cutting people off. So, if someone was to [pause] do something that I didn't like or just not be a good friend [pause] I would be very quick to be like, 'right, goodbye.'" [Lily]</i></p>
253	<p>On having given up secure employment to go into university: <i>"I haven't given up a full-time job that I've been in for years, that was essentially my career, to go back to uni to do something half-arsed."</i> [Mia]</p>
254	<p>On a university degree as a secure foundation: <i>"for a lot of people and myself included, it's the biggest thing you achieve <u>ever</u> [participant emphasis] ... things build up on it ... you can't build up on it without the undergrad degree, so it is the biggest foundation."</i> [Dave]</p>

254	<p>On being a FORMER student as ‘scary’: <i>“I’m [own name], former student, scary to say.” [Maguire]</i></p> <p>On university ending: <i>“I was looking out at [the city] Monument. I pressed ‘Submit’ and then I was walking. The sun was shining. I got really nervous [smiles], really panicking. I was like, ‘Woah [laughs] what’s going on?!’ Just because [of] the thought of, ‘That is it,’ nothing more to do and that’s me all finished and I never have to think about it again. Which I was really happy about that, but I think it was just nerve wracking, knowing that I’m coming up to the last couple of weeks, that great three years I’d had just winding down, and I’ve never wanted to leave because I loved it ... you’ve got this deep affinity with the university and the city itself, and then to lose that relationship in such a small space of time and to be ripped from [the city] ... [I] was sad. And then that made it even scarier to finish uni because you feel like you haven’t got the same experience to [that of] someone two years ago or what the freshers this year will get ... I love the city and obviously I love the university, and now I’m not part of it anymore [laughs]. It’s scary.” [Maguire]</i></p>
256	<p>On the physical environment of university support services: <i>“[it] didn’t feel like ... anywhere weird or scary. It felt quite comfortable and safe; it was a nice environment to be in. Those rooms that they have there, they’re lovely, and the physical space was really calming” [Gemma]</i></p> <p>On the stability provided by university locations: <i>“where I used to go and see my counsellor. The rooms make me so happy ... used to make me smile, seeing them (sic.) rooms ... that is always a really nice, safe place for me to go, just sit on the couches. Even if I didn’t have a counselling session, that’s where I like to sit ... I would say that is definitely my safe space.” [Dolly]</i></p> <p><i>“the library was a good place ... it was something that had stability because every day I was going there.” [Nicola]</i></p>
257	<p>On the university not providing preparation for ‘the real world’: <i>“being a student and being in full-time work are two completely different worlds apart. And as much as uni is supposed to prepare you for being in that, it doesn’t ... for example, this year I didn’t attend barely any lectures that were live, but in a real life world of work, if I didn’t attend any meetings, I wouldn’t have a job by the end of the week ... it doesn’t really match up.” [Nicola]</i></p>
257	<p>On the insecurity sensed following Sarah Everard’s murder: <i>“the Sarah Everard stuff, that really scared me. That made me not like being a girl and a student at all ... it was really dark all the time. I didn’t want to be outside the house. Even just walking to my friend’s house, I’d pretend to be on the phone all the time. I do all those things where it’s like keep your hair down but put your hood up, like the body stuff ... So that was a really scary time, I feel, to be just a female student.” [Pippa]</i></p>

259	<p>On identifying need to re-balance (S)MHWB through reflections on the physical elements: <i>"I use my physical pain to address the mental, it keeps me on balance." [Bobbie]</i></p> <p><i>"In the first year, when I had the depression, it was very all over the place. I was staying up until 3am and sleeping in till 1pm, and I couldn't quite get the pattern properly. I do feel like if I don't get enough sleep, I am very angry. I can get very groggy and irritable almost, so I feel like having that balance, as small an aspect as it seems, is actually a big impact. If you don't have enough sleep, you're not going to be in the right mindset to do work. And I feel like that really helps with me. I won't say my sleep pattern is amazing, but I get enough now and I know that I can wake up at a normal time ... I do feel like sleep's quite a big factor to me."</i> [Nicola]</p>
259	<p>On physically balancing connected to SMHWB: <i>"for the first year I had a good balance of what I did at home, what I did in uni, and then it all became at home along with everything else, so I think that move triggered me."</i> [Sara]</p> <p><i>"it has been really helpful making sure that I do get up and move and go for a walk and stuff. It makes me generally feel better, rather than sitting indoors all day and sitting down all day, 'cause then my body feels rubbish ... I don't like that, and it makes me feel mentally a bit meh (sic.) as well"</i> [Mia]</p>
261	<p>On university staff 'having the back' of students on placements, when they experience relationship difficulties in the workplace: <i>"uni were really supportive. My link tutor was constantly messaging us (sic.) back and forwards, just to make sure that I was okay ... She also had a word with the [mentor] which I think helped, 'cause I think she then got it, that actually there was underlying factors - it wasn't just me being this emotional person."</i> [Alex]</p>
262	<p>On staff helping to normalise students' emotions during difficult experiences: <i>"one of our tutors would send quite a bit about mindfulness and things she'd do or was doing ... that helped her ... It's really nice and lovely. You can really tell that she's trying to help other people, and that she cares, and that she knows it's not easy."</i> [Sara]</p> <p><i>"there has been a couple of times when they've just sacked off what they're supposed to be teaching us and they're like, 'it's actually more beneficial if we all just have a conversation.' ... or they stay late ... They always make the time for us."</i> [Isobel]</p>
263	<p>On being disrespected by non-genuine university communication: <i>"coming towards the end of my dissertation ... stupidly stressed. I haven't slept in a while ... And a certain member of staff, who's quite high up, sent every single student an email, 'How's your mental health?' [pause]."</i></p>

	<p><i>No. Don't trigger me on a Friday afternoon when everyone's about to finish work and send an email like [puts on sarcastic tone of voice] 'How's your mental health?' when you're not ready for everyone's answer." [Charlotte]</i></p>
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Appendix 15: Research Dissemination Talks and Presentations

- July 2023 **(Online) Presentation as Invited Guest Speaker for the PTMF-Education Special Interest Group.**
Talk given: 'Thinking Differently about 'Student Mental Health and Wellbeing' – Learning from Undergraduates' Storied 'University-Life' Self-Reflections'.
- May 2023 **(In-person) Presentation for Northumbria University Psychology Department 'Research Lunch' Seminar Series. Northumbria University, UK.**
Talk given: 'Behind the Posts – Social Media and Undergraduate-Student Mental Health and Wellbeing.'
- March 2023 **(In-person) Presentation for Northumbria University Psychology Department PGR Conference 2023. Northumbria University, UK.**
Paper: 'Thinking differently about 'student mental health and wellbeing': Learning from undergraduates storied 'university life' self-reflections.'
- October 2022 **Invited as Guest Speaker for the Edge Hill University (UK) Centre for Teaching and Learning Professional Development Sessions Series. Edge Hill University, UK.**
(In-person) Talk given: 'Examining Student Mental Health, Distress and Wellbeing Qualitatively: Preliminary Findings from an Elicited-Reflections Study'.
- September 2022 **(Online) Presentation to the SMARteN (The Student Mental Health Research Network) ECR Research/Discussion Group, UK.**
Paper: 'Behind the Posts – Social Media and Undergraduate-Student Mental Health and Wellbeing.'
- September 2022 **(In-person) Presentation for British Sociological Association, Medical Sociology Conference 2022. Lancaster University, UK.**
Paper: 'Examining Student Mental Health and Wellbeing Qualitatively: Preliminary Findings from an Elicited-Reflections Study.'
- September 2022 **(In-person) Presentation for Media, Communication and Cultural Studies Association Conference 2022. Robert Gordon University, Aberdeen, UK.**
Paper: 'Behind the Posts – Social Media and Undergraduate-Student Mental Health and Wellbeing'.

- June 2022 **(Online) Presentation for Centre for Death and Society Conference 2022.**
University of Bath, UK.
 Paper: 'Grief, Loss and Academic Institutions – what can be learned from undergraduate experiences?'
- May 2022 **(Online) Presentation to the SMARteN (The Student Mental Health Research Network) ECR Research/Discussion Group.**
 Presentation Title: 'Examining Student Mental Health and Wellbeing Qualitatively.'
- February 2022 **(Online) Presentation as invited Guest Speaker for University of Cumbria Psych+ Seminar Series:**
University of Cumbria, UK.
 Talk given: 'Student Mental Health and Wellbeing: why we need more qualitative research.'
- September 2021 **(Online) Presentation for Northumbria University's Sociology Department Research Seminar Series.**
Northumbria University, UK.
 Presentation: 'Reflections on Qualitative Interviewing During the COVID-19 Pandemic'.
- June 2021 **(Online) Presentation for the 'Motherhood and Work' Conference 2021.**
Maynooth University, Ireland.
 Paper: 'Just a student...Reflections on mothering and researching student mental health and wellbeing during the COVID19 pandemic.'

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