Student mental health in England: Statistics, policy, and guidance

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Prevalence of mental health issues among university students

The proportion of home students (students who normally live in the UK) who disclosed a mental health condition to their university has increased rapidly since 2010 and was over 5% in 2020/21.

Mental health conditions reported by students in 2020/21 nearly seven times as high as a decade earlier

Home students reporting a mental health condition, England
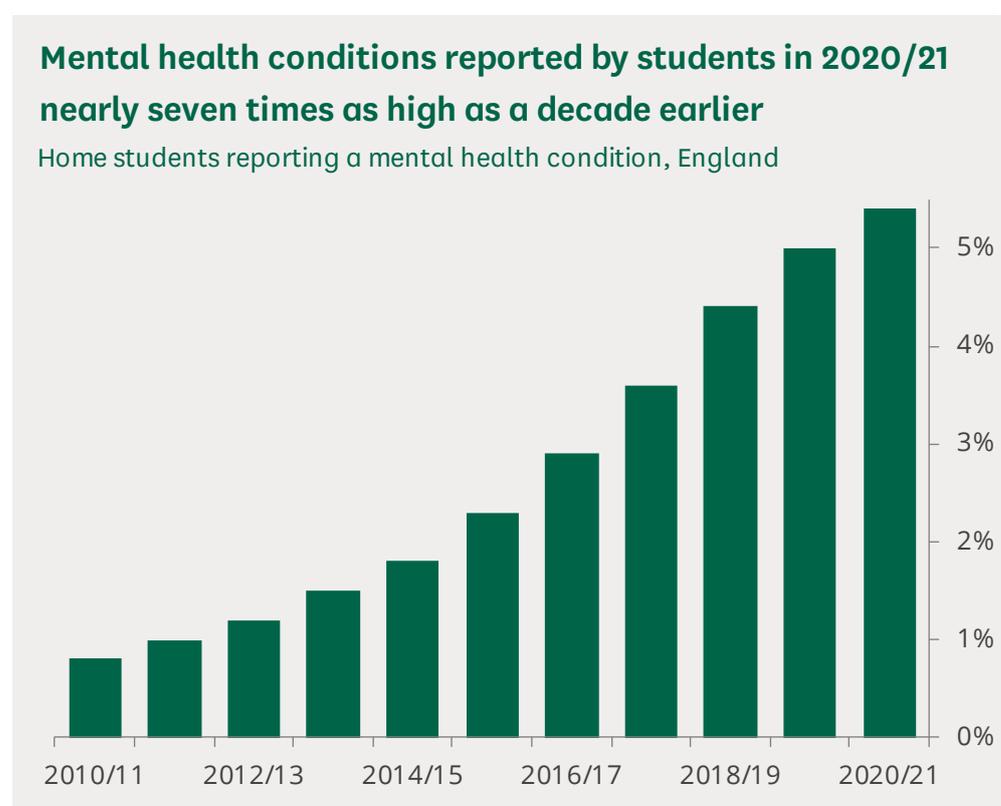
Source: Office for Students, Student characteristics data: Population data

However, surveys of students where responses are confidential have found much higher rates of poor mental health than disclosed to universities. In a 2022 survey by the mental health charity Student Minds, 57% of respondents self-reported a mental health issue (PDF) and 27% said they had a diagnosed mental health condition.

The consequences of mental health issues for students range from poor academic performance and dropping out of university, to self-harm and suicide.

While there is some evidence the overall suicide rate for students increased in the decade to 2017/18, it fell in 2018/19 and 2019/20. However, the Office for

National Statistics has warned the small annual numbers mean it is difficult to identify statistically significant differences over time. Suicide rates among students are lower than for other young people and the general population.

Factors contributing to poor mental health among students

According to the National Institute for Health and Care Excellence, factors that contribute to students having poor mental health include moving away from home, academic and financial pressures, and the absence of familiar social and emotional support networks.

Office for National Statistics data shows that during the Covid-19 pandemic, students reported higher levels of anxiety and lower levels of happiness than the general population. Many students have also said the rising cost of living has negatively affected their mental health (PDF).

Do universities have a duty of care to students?

The Government has often asserted that universities have a duty of care to their students, but it acknowledged in March 2023 that "the existence and application of a duty of care between HE [higher education] providers and students has not been widely tested in the courts".

This acknowledgement followed the May 2022 court judgment in the case of _Abrahart v University of Bristol_ (PDF), which was brought by the parents of a student who died by suicide while studying at the University of Bristol. The judge found there is "no statute or precedent" concerning a duty of care owed by a university to a student to take reasonable steps to avoid and not to cause injury, including psychiatric injury and harm.

Nevertheless, some sector bodies and legal firms maintain universities have a general duty of care not to cause harm by careless acts or omissions in certain circumstances. Universities also have established legal duties arising from health and safety, safeguarding, and equalities legislation.

Government policy on students' mental health

The Government believes the most effective way to support students' mental health is through a "two-pronged approach" of funding services and working with mental health experts and the sector to implement best practice.

The Government's work in supporting students' mental health includes:

- Asking the Office for Students (OfS), which regulates higher education in England, to allocate £15 million towards student mental health in the 2022/23 academic year.

- Working with the OfS to provide Student Space, a dedicated mental health and wellbeing platform for students.

- Appointing a Student Support Champion to advise universities on supporting students who may be struggling and at risk of dropping out.

- Working with the higher education sector in support of the Suicide Safer Universities framework, the Stepchange framework, and the University Mental Health Charter programme.

Guidance and support from universities

In September 2018, Universities UK and PAPYRUS, a national charity for preventing young suicide, published Suicide-safer Universities, a framework to help university staff understand student suicide, mitigate risk, and intervene when students get into difficulties. In October 2022, Universities UK added guidance on sharing information with trusted contacts, supporting placement students, and what to do after a student dies by suicide.

In December 2019, the University Mental Health Charter was published. It is a set of principles universities can adopt to improve the mental health and wellbeing of their communities.

Universities UK's Stepchange Framework was introduced in 2017 and relaunched in 2020 as Stepchange: Mentally healthy universities. It is a strategic framework for a whole-university approach to mental health and wellbeing.

University support for students' mental health

Universities are autonomous institutions, and the way mental health support is provided varies across the sector. The most common model of mental health provision involves three services:

- wellbeing services to deliver low-intensity support and signpost to non-medical services;

- counselling services for students with moderate mental distress; and

- disability services for students who receive disabled students' allowances and have a diagnosed mental illness.

A 2023 survey of 4,000 UK students by the Tab, a student news site, and Campaign Against Living Miserably (CALM), a suicide prevention charity, found just 12% of respondents think their university handles the issue of mental health well.

1   Prevalence of mental health issues among students

1.1   Mental health conditions

Mental health conditions can be clinically diagnosed. Mental health issues or poor mental health are broader terms used to describe mental distress that may or may not be related to a diagnosable mental health condition.

The Higher Education Statistics Agency collects data from students on any disability that they have, including mental health conditions. In 2021/22, 416,000 UK students said they had a disability of some kind; this was 19.1% of all home students. Within this, **119,500 students** said they had a mental health condition; **5.5%** of all home students.[1] The number saying they had a mental health condition was three and a half times as high as in 2014/15.

Higher rates of mental health conditions were reported among:

- Women

- Undergraduates

- Full-time students

- Those in their second or later years.[2]

In 2021/22, **88,800 female students** said they had a mental health condition or **6.9%** of all female students. This rate was more than double the rate for male students of **3.3%**.[3]

The number of accepted home applicants through UCAS who declared a disability related to their mental health on their application form increased from around **2,500 in 2011** to almost **22,500 in 2022**. The 2022 figure was 4.6% of all home accepted applicants. This rate was 6.3% among women, more than double the 2.4% rate for men. It was also higher among new students in their 20s at 2.2& compared to 3.8% of those aged under 20 and 4.0% of those aged 30 or older.[4] [5] These figures only include those applying to full-time undergraduate courses.

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[1]   This only includes those with a single declared disability. Those with a mental health condition and another disability would be included in the 'two or more conditions' category.

[2]   HESA, UK domiciled student enrolments by disability and sex 2014/15 to 2021/22. This data is not broken down by other personal characteristics such as age or ethnic group.

[3]   HESA, UK domiciled student enrolments by disability and sex 2014/15 to 2021/22

[4]   UCAS, UCAS undergraduate end of cycle data resources 2022, (and earlier)

[5]   This data is not broken down by other personal characteristics, such as ethnic group.

It is possible some of the increase described above is due to students with mental health conditions being more likely to report them. This increase in disclosure may be because of greater public awareness and reduced stigma associated with poor mental health.

Other evidence

There have been many surveys of student mental health in recent years. This briefing gives some high-level results from some and links to others. It is not a comprehensive list of surveys and their results.

The Being Well, Doing Well survey for Student Minds and Alterline (PDF) carried out in November 2022 found 57% of students said they had a current mental health issue, 36% had poor mental wellbeing,[6] and 27% had a current diagnosed mental health issue.[7] 30% said their mental wellbeing had got worse since starting university, 32% said it had improved. 60% said their financial situation had a negative or very negative affect on their wellbeing. Student Minds has a wide range of reports and insight briefings on the issue.

The Cibyl Student Mental Health Survey 2022 found 81% of respondents had been 'directly touched' by mental health difficulties, up from 60% in the 2021 survey.[8] Rates were higher among female (86%), White (88%) and LGBTQ+ students (91%). 75% of students said the pandemic had negatively affected their mental health, down from 80% in 2021.

The Office for National Statistics (ONS) carried out ongoing surveys of students in England during the Covid-19 pandemic, particularly asking students about their life satisfaction out of 10.

- Average life satisfaction among students was at its lowest level of 4.6 in early January 2021.

- It gradually increased over the year and was in the 6.5-6.7 range from September 2021 to March 2022 (when the surveys finished).

- These levels were significantly lower than those in the general population in early 2021 and this remained the case for surveys carried up to late November 2021.

- The final survey in late February/Early March 2022 found average life satisfaction among students was still significantly lower than the overall adult population, but not significantly different to the level among all 16–29-year-olds.

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[6]   As measured by the Warwick-Edinburgh Mental Wellbeing Scale
[7]   Student Minds, Student Minds Research Briefing – February '23 (PDF)
[8]   Experienced mental health symptoms in the last 12 months OR experienced suicidal feelings OR experienced mental health difficulties in the past OR currently experiencing mental health difficulties.

The final survey also found 36% of students said their mental health had got worse since the start of term and 17% often or always felt lonely compared to 7% of the whole adult population.[9]

A [2023 survey of 4,000 UK students](#) by the Tab, a student news site, and Campaign Against Living Miserably (CALM), a suicide prevention charity, found 69% of students had suffered with a mental health illness at some point during their studies. Anxiety was the most prevalent mental health issue, with 61% saying they had suffered from it. 54% had suffered from depression, 39% had experienced suicidal thoughts, 28% eating disorders, 10% OCD, and 3% bipolar disorder. Around half of those who said they had suffered with poor mental health had applied to their university for extenuating circumstances.[10]

A [report by the Institute for Public Policy Research in September 2017](#), looked at a wide range of different data sources and research on the subject and set out the following findings:

- The number of students to disclose a mental health condition to their institution had increased dramatically over the previous 10 years.

- Students experience lower wellbeing than young adults as a whole, and experience lower wellbeing than was the case in previous years.

- Over the previous five years, higher education providers had experienced significant increases in demand for counselling and disability services.[11]

The report concluded by saying a growing number and proportion of students were seeking support and adjustments from their higher education provider in relation to a mental health condition, with a significant level of mental distress evident among the student population.

1.2 Suicide rates among students

In 2018, the Office for National Statistics (ONS) published a report [estimating the number of suicides among higher education students](#) in England and Wales between 2000 and 2017. It [updated this in 2022](#) with data covering the period from 2017 to 2020.

The reports found substantial year-on-year variations in suicide rates among students. There was some evidence that the overall rate had increased in the decade to 2017/18, but it fell in 2018/19 and 2019/20. The chart below looks at trends in the suicide rate since 2000/01 and gives a five-year rolling average to help identify underlying trends.

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9 ONS, [Coronavirus and higher education students: 25 February to 7 March 2022](#) (and earlier)
10 ["'They made me feel invalid': Shocking new figures show scale of student mental health crisis"](#), The Tab, May 2023
11 IPPR, [Not by degrees: Improving student mental health in the UK's universities](#), 4 September 2017

Suicide rate among higher education students
Per 100,000 students aged 17+ England and Wales
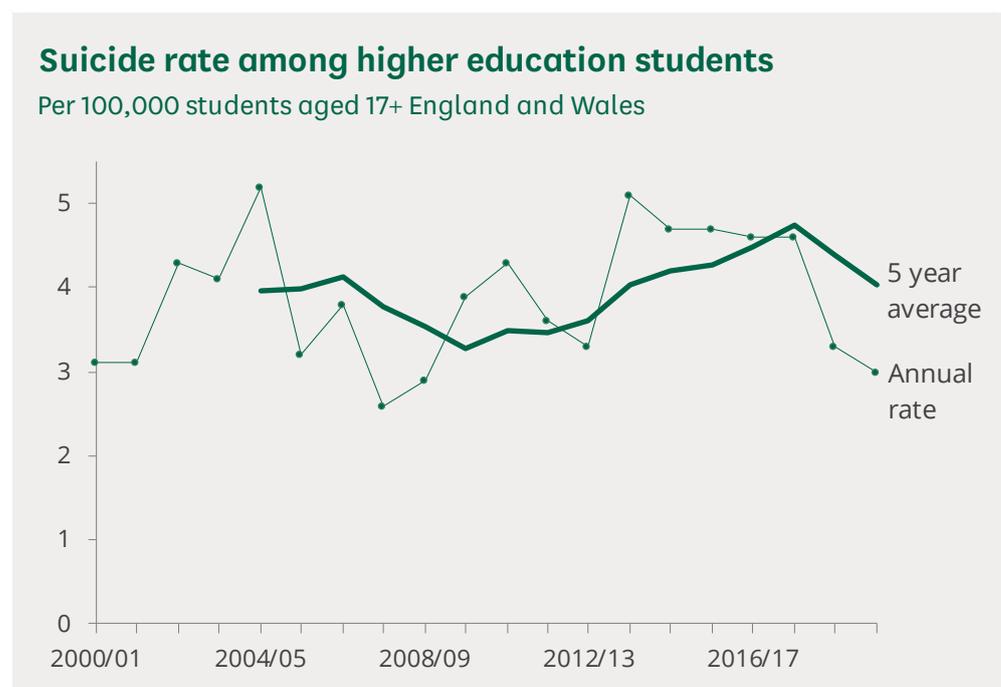
Sources: ONS, Estimating suicide among higher education students, England and Wales: Experimental Statistics, June 2018; ONS, Estimating suicide among higher education students, England and Wales: Experimental Statistics: 2017 to 2020

A total of **1,554** students died by suicide between the 12 months ending July 2001 and the 12 months ending July 2020. The suicide rate for students in England and Wales in the 2019/20 academic year was **3.0 deaths per 100,000** students (64 suicides). This was the lowest rate for a decade. According to the ONS the relatively small annual numbers mean it is difficult to identify statistically significant differences over time. [12]

The suicide rate among higher education students across the years covered was significantly lower than among the general population of the same age. For the three years 2017/18 to 2019/20, the rate among the general population aged under 20 and 21-24 was 2.7 times higher than for higher education students. This applies when the data are broken down by age group and by gender. Other findings covering the three most recent years include:

- Of the 319 students who died by suicide, 202 (63%) were male and 117 (37%) were female.

- The suicide rate for male students was significantly higher at 5.6 per 100,000 students compared to 2.5 per 100,000 for females.

- The rate was generally higher among older students.

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[12]   ONS, Estimating suicide among higher education students, England and Wales: Experimental Statistics, June 2018; ONS, Estimating suicide among higher education students, England and Wales: Experimental Statistics: 2017 to 2020

- White students had a higher suicide rate than Black and Asian students, but the differences were not statistically significant.

- Among younger students (aged under 20 and 21-24) the suicide rate was significantly higher among first year students.[13]

1.3 Factors contributing to poor mental health among students

While suicide rates among students are lower than their non-university attending peers and the general population at large, there has been much debate about a student "mental health crisis" in recent years.[14]

The consequences of mental health issues for students can be serious and range from poor academic performance and dropping out of university, to self-harm and suicide. Data on students in England from the Office for Students shows students with a declared mental health condition were less likely than average to:

- continue in higher education after their first year

- achieve a first or upper second degree

- 'secure higher level employment' or go on to study as a postgraduate.

While there is a strong connection between poor mental health and suicide or self-harm, the ability to identify students who are at risk of suicide is difficult. A 2017 report revealed only 12% of students who died by suicide were reported to be seeing student counselling services.[15]

There are several factors specific to the higher education experience that can contribute to poor mental health, including:

- **Moving away from home.** Living independently, loneliness, and the absence of familiar social and emotional support structures and networks are associated with a higher risk of mental health conditions.

- **Workload pressures.** Students report difficulties with academic demands and the pressure to get a high-class degree as a factor with mental health issues. Students who experience imposter syndrome or perfectionism are also more likely to develop mental health issues,

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13   ONS, Estimating suicide among higher education students, England and Wales: Experimental Statistics: 2017 to 2020

14   "Warnings of mental health crisis among 'Covid generation' of students", The Guardian 28 June 2022; National Union of Students, Mental Health Policy; ""There is a mental health crisis with or without corona"", BBC News, 16 December 2020

15   National Confidential Inquiry into Suicide and Homicide by People with Mental Illness (NCISH), Suicide by children and young people, July 2017, p3

including anxiety. Many students must also balance studying, coursework, and exams with part-time work or course placements.

- **Financial pressures.** Worries about debt and being able to afford food and accommodation can lead to mental health issues for students.

- **Transitions.** While many students may struggle with starting university, some can also find moving beyond the first year challenging, due to an absence of support initiatives that were previously present, as well as moving out of halls of residence, and increased workload.[16]

Certain groups of students have been identified as being more likely to experience mental health issues or being at higher risk of suicide:

- People from disadvantaged backgrounds are more likely to experience mental health issues, and students from such backgrounds can face particular financial challenges.

- International students can face unique challenges relating to isolation, integration, cultural expectations, and concerns about funding.

- Mature students may feel more isolated because they are unable to engage socially. They may also have childcare responsibilities and face greater financial pressures.

- Neurodiverse students, including those with autism and attention-deficit hyperactivity disorder (ADHD) can experience mental health issues at times of transition and change.

Other groups of students at particular risk include those who have experienced bereavement or trauma, asylum seekers and refugees, students with underlying health conditions, and LGBTQ+ students.

It is also important to note the apparent increase in the number of students reporting poor mental health may relate to reduced stigma among young people who attend university, as well as the changing demographics of university students. For example, the number of students from disadvantaged backgrounds has increased over the last 15 years, and mental illness, mental distress, and low wellbeing are more common among those from more disadvantaged socioeconomic backgrounds.[17]

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[16] National Institute for Health and Carew Excellence, Mental health in students: What are the risk factors?, October 2020; HMG, Preventing suicide in England: Fourth progress report of the cross-government outcomes strategy to save lives, January 2019, p32

[17] IPPR, Not by degrees: Improving student mental health in the UK's universities, 4 September 2017, p32

Rising cost of living

In 2022/23, student maintenance support did not rise in line with recent levels of inflation across the UK.[18] According to the Institute for Fiscal Studies (IFS), in England, real terms cuts to student support since 2020/21 will leave the poorest students around £1,500 worse off.[19]

As UK household costs and bills have risen, university leaders have warned students are consequently at of risk becoming "the forgotten group in the cost of living crisis".[20] Black students, students aged over 25, and students from lower socio-economic backgrounds are likely to be hardest hit by rising costs of food, transport, rent, and energy.[21]

In July 2022, Student Minds, the student mental health charity, commissioned a survey of 500 university students, which found the rising cost of living was causing high levels of stress and concern.[22] It was the number one issue identified ahead of the 2022/23 academic year, above studying and exams, loneliness, and the Covid-19 pandemic.

90% of students surveyed by the National Union of Students (NUS) for its September 2022 Cost of Living report said the rising cost of living had negatively impacted their mental health.[23] According to the Office for National Statistics (ONS), over three-quarters of students are also "concerned" rising costs may affect how well they do in their studies.[24]

Mental health and money worries are the most common reasons students give for thinking about dropping out of their studies.[25]

Covid-19 pandemic

The Covid-19 pandemic had had a detrimental impact on student mental health. This manifested particularly during the pandemic lockdowns and associated restrictions,[26] but it has also had a lasting effect, as new students

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18   Commons Library briefing, The value of student maintenance support
19   IFS, Large real cuts to student financial support to become permanent, 11 January 2023
20   Universities UK, Don't overlook students in cost of living crisis, say university leaders, 20 December 2022
21   Million Plus, Learning with the lights off: students and the cost-of-living crisis, October 2022
22   Money and Metal Health Policy Institute blog, How the cost of living crisis is affecting students' money and mental health, 25 November 2022
23   NUS, Cost of Living Report (PDF), September 2022
24   ONS, Cost of living and higher education students, England: 24 October to 7 November 2022, 23 November 2022
25   Save the Student, Student Money Survey 2022, 20 September 2022
26   "Students are having to choose between physical and mental health", Wonkhe, 11 December 2020; "Student mental health: 'I am living in a bubble of one'", BBC News, 9 December 2020; "More than half of students polled report mental health slump", The Guardian, 9 December 2020; ""There is a mental health crisis with or without corona"", BBC News, 16 December 2020; Higher Education Policy Institute: New poll finds a decline in student mental health but growing satisfaction with online learning, 3 December 2020

have struggled to transition and adapt to higher education following significant disruption to their lives.

At the height of the pandemic, many students struggled with the measures employed to prevent the spread of Covid-19 across the country and in university settings. Some students had to socially isolate on a regular basis due to repeated outbreaks of Covid-19 in their accommodation. This resulted in limited socialising and restrictions on their ability to return home and see their family. Students were also concerned about the pandemic's effect on their academic performance and prospects after graduation. A survey by the Save the Student website in October and November 2020 found 79% of respondents were worried the pandemic would affect their job prospects.[27]

Over half of respondents to a November 2020 National Union of Students survey said their mental health was worse than before the pandemic.[28] Isolation, loneliness, anxiety, stress, not being able to see or make new friends, and not being able to see their family were all identified by students as factors behind their deteriorating mental health. ONS's November 2020 Student Covid Insights Survey reported students were significantly more anxious than the general population of Great Britain, with mean scores of 5.3 compared with 4.2 respectively (where 0 is "not anxious at all" and 10 is "completely anxious").[29]

A report by Student Minds on the experience of students during the 2020/21 academic year found:

- 74% of students reported Covid-19 has had a negative impact on their mental health and wellbeing at university

- 49% of students reported the pandemic has negatively impacted their financial situation

- Two thirds of respondents say they have "often felt isolated or lonely since March 2020"

- 82% of respondents say the Covid-19 pandemic has negatively impacted their academic experience

- 65% of respondents say they needed additional help/advice during the Covid-19 pandemic. Of these, 19% got the help they needed.[30]

In November 2022, Nightline, which coordinates student-run listening and information services, reported it had recorded a 51.4% increase in calls in 2020/21. Early data indicated numbers for 2021/22 were 30% higher,

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27   Save the Student, COVID-19 UK student survey 2020 (follow up) – Results, 18 November 2020

28   NUS, Coronavirus Student Survey phase III November 2020 Mental Health and Wellbeing, 7 December 2020

29   ONS, Coronavirus and higher education students: England, 20 November to 25 November 2020, 9 December 2020

30   Student Minds, University Mental Health: Life in a Pandemic, June 2021

suggesting the pandemic was still influencing student mental health.[31] Nearly all students had suffered significant disruption to the lives, with those transitioning to university having missed out on important social, academic, and personal milestones. It has been argued this has led to "grief, loss, uncertainty and a lack of confidence",[32] particularly when it comes to forming social connections, and increased rates of anxiety.[33]

[31] "Pandemic still affecting UK students' mental health, says helpline", The Guardian, 14 November 2022 (accessed 3 May 2022)

[32] "Pandemic still affecting UK students' mental health, says helpline", The Guardian, 14 November 2022 (accessed 3 May 2022)

[33] "Warnings of mental health crisis among 'Covid generation' of students", The Guardian 28 June 2022 (accessed 3 May 2022)

2   Do universities have a duty of care to students?

The Government has often asserted that universities have a duty of care to their students,[34] but in March 2023 it also acknowledged "the existence and application of a duty of care between HE [higher education] providers and students has not been widely tested in the courts".[35]

This acknowledgement followed the May 2022 court judgment in the case of _Abrahart v University of Bristol_ (PDF). The judge found there is "no statute or precedent" concerning a duty of care owed by a university to a student to take reasonable steps to avoid and not to cause injury, including psychiatric injury, and harm.[36]

Nevertheless, some sector bodies and legal firms maintain a general legal duty of care not to cause harm by careless acts or omissions does exist in certain circumstances, but that this cannot reasonably be expected to apply to all aspects of a university's relationships with its students.[37]

There also exist established legal duties to which universities must adhere arising from health and safety, safeguarding, and equalities legislation.

2.1   Abrahart v University of Bristol

Natasha Abrahart was studying physics at the University of Bristol when she was diagnosed with chronic social anxiety. She died by suicide in April 2018 on the day she was due to give an assessed oral presentation in a lecture hall to students and staff.

Natasha Abrahart's parents took the university to court arguing their daughter was a victim of disability discrimination under the Equality Act 2010 and that the university had breached its duty of care to their daughter under the law of negligence.

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[34] PQ 56624 [Students: Long Covid] 25 October 2021
[35] PQ174398 [Higher Education: Standards] 31 March 2023
[36] _Abrahart v University of Bristol_ [2022] (PDF), paras 143-44
[37] Universities UK, Creating a statutory duty of care for students, 19 April 2023; Shakespeare Martineau, Student suicide - why new laws are not the answer, 22 November 2022

The law of negligence

To assess a claim of negligence, a court must determine whether:

- The defendant owed a 'duty of care' to the claimant.

- The defendant breached its duty of care.

- The breach of the duty caused the damage or losses complained of in the case.

Evaluating whether a duty of care exists is, therefore, the first step in assessing a claim of negligence.

When does a duty of care exist?

Whether a duty of care exists is assessed by considering the precedents set by the decisions made in previous cases (this is called case law). There is a large body of case law on this topic which would be impossible to summarise here, but the classic exposition of the approach taken by the courts is the judgment of Lord Atkin in *Donoghue v Stevenson*:

> You must take reasonable care to avoid acts or omissions which you can reasonably foresee would be likely to injure your neighbour. Who, then, in law is my neighbour? The answer seems to be - persons who are so closely and directly affected by my act that I ought reasonably to have them in contemplation as being so affected when I am directing my mind to the acts or omissions which are called in question.[38]

While still a useful case for demonstrating the concept of a duty of care, *Donoghue v Stevenson* was decided almost a century ago and the case law has evolved since. A more recent, and currently authoritative, expression of the concept was given by the Court of Appeal in *Caparo v Dickman*,[39] which considered that a duty of care exists when:

- Relevant actions or omissions of one party might reasonably be **foreseen** to cause damage to another party.

- There is a relationship of **proximity** between the parties (this essentially refers to the degree and type of connection between the parties).

- The court considers it **fair, just, and reasonable** for the law to impose a duty of care in particular aspects of one party's relationship with the other.

There are various other legal tests that would be applied depending on the circumstances of any given case.

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[38]   [1932] AC 562
[39]   [1990] 2 AC 605

Court judgment

The judgment in the case of *Abrahart v University of Bristol* (PDF) was delivered in May 2022.[40]

Claim of disability discrimination

The claim of disability discrimination covered the university's duties to make reasonable adjustments, avoid indirect discrimination, and to ensure it does not treat students unfavourably because of a disability.

The judge found against the university, concluding it had treated Natasha unfavourably by not making enough adjustments to her oral assessment work in light of her mental health disability. The judge awarded more than £50,000 in damages to Natasha Abrahart's family.

Claim of negligence and breach of duty of care

On the duty of care argument, the judge said there is "no statute or precedent" concerning a duty of care for a university to take reasonable steps to avoid and not to cause injury, including psychiatric injury, and harm. The judgment said:

> 143. Paragraph 12 of the Particulars of Claim pleads a general duty as follows: "… to take reasonable care for the wellbeing, health and safety of its students. In particular, the Defendant [the University of Bristol] was under a duty of care to take reasonable steps to avoid and not to cause injury, including psychiatric injury, and harm"

> 144. There is no statute or precedent which establishes the existence of such a duty of care owed by a university to a student therefore the Claimant's argument is novel.

The judge also distinguished between the care a university owed to its students and the care a school or the state owed to a child or prisoner respectively. He said:

> 149. In a sense it is the Claimant's case that the University owed a duty of care to Natasha to protect her from herself. However, Natasha was not in the care or control of the University beyond its Rules in contrast to, for example: (a) A schoolchild in the care of a school or (b) A prisoner in the care of the state.[41]

The judge concluded by saying he did not believe a relevant duty of care arose at any point during Natasha Abrahart's time at university, but, if he was wrong on this point, the university would have been in breach of this duty through its actions. He said:

> [I]f I am wrong on the matter of the existence of a relevant duty of care, the question of breach of that duty arises… There can be no doubt that the University would have been in breach; the main breach would be continuing to require Natasha to give interviews and attend the conference and marking her

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[40]   *Abrahart v University of Bristol* [2022] (PDF)
[41]   *Abrahart v University of Bristol* [2022] (PDF), para. 148-49

down if she did not participate when it knew that Natasha was unable to participate for mental health reasons beyond her control.[42]

Appeal

In March 2023, the University of Bristol was granted permission to appeal some of the judge's findings regarding the Equality Act to the High Court.[43] The lawyers of the family of Natasha Abrahart have said this will allow the existence of the specific duty of care argued for by Natasha Abrahart's family to be considered again.[44]

2.2   What legal duties do universities have?

A general duty of care?

A blog post in November 2022 from the law firm Shakespeare Martineau, in response to calls for a statutory duty of care in higher education, argued universities already have "a general legal duty of care to persons to whom they are closely connected, including their students".[45]

However, the blog post stated this duty does not, and could not reasonably be expected to, apply to all aspects of a university's relationship with its students. It argued there are three requirements for there to be a duty:

- The duty applies to students who might reasonably and foreseeably be harmed by a university's careless acts and omissions.

- The act or omission must cause or contribute to the harm that ensues.

- The circumstances must be ones a court regards as just, fair, and reasonable.[46]

Consequently, the duty only exists where a university can exercise real control, when a failure to exercise that control causes injury, and when the courts regard it as reasonable to impose a duty.[47] For example, this could be if a university neglected to install proper ventilation systems in a laboratory in which toxic fumes were generated, causing lung damage to students who worked in there.

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42   *Abrahart v University of Bristol* [2022] (PDF), para. 159

43   Jamie Burton KC and Sarah Steinhardt (Doughty Street Chambers) and Gus Silverman (Irwin Mitchell LLP), A Note regarding a potential duty of care owed by universities to students (PDF), 15 May 2023, para. 9

44   Jamie Burton KC and Sarah Steinhardt (Doughty Street Chambers) and Gus Silverman (Irwin Mitchell LLP), A Note regarding a potential duty of care owed by universities to students (PDF), 15 May 2023, para. 34

45   Shakespeare Martineau, Student suicide - why new laws are not the answer, 22 November 2022

46   Shakespeare Martineau, Student suicide - why new laws are not the answer, 22 November 2022

47   Shakespeare Martineau, Student suicide - why new laws are not the answer, 22 November 2022

The blog post also noted "persons of sound mind engaging in acts of deliberate self-harm are generally regarded as the legal cause of the injury they inflict on themselves".[48] As a result, only in very rare circumstances do courts regard it as fair, just, or reasonable to impose liability on a third party for any injury suffered through self-harm, for example those arising from the complete control police exercise over prisoners in custody.[49]

Health and safety

The Health and Safety at Work etc Act 1974 requires universities, so far as is reasonable in their provision of higher education, to ensure the health and safety of their employees and non-employees, including students.[50] For example, universities are expected to manage and mitigate risks to ensure the provision of safe premises and equipment, appropriately trained educators, and other relevant support staff.

For a university's employees, this duty also extends to their welfare because of the "close relationship of control" that exists between an employer and employee.[51] This relationship is different to that between a university and a student.

Equality Act 2010

Under the Equality Act 2010, it is unlawful for higher education providers to discriminate, harass, or victimise students on the grounds of a characteristic protected by the Act. This means providers have a duty not to discriminate against potential or current students if they have a disability. A disability is defined as:

> a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.[52]

A mental health condition is considered a disability if it lasts, or is likely to last, 12 months. 'Normal day-to-day activity' is defined as something a student would do regularly in a normal day. This includes things like using a computer, working set times, or interacting with people.[53]

There are many different types of mental health condition which can lead to a disability, including:

- depression

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[48]   Shakespeare Martineau, Student suicide - why new laws are not the answer, 22 November 2022

[49]   *Reeves v Commissioner of Police of the Metropolis* [2000] 1 AC 360 House of Lords

[50]   Health and Safety at Work etc Act 1974, s3. See Health and Safety Executive, Health and Safety at Work etc Act 1974 for more information.

[51]   Shakespeare Martineau, Student suicide - why new laws are not the answer, 22 November 2022

[52]   Disability Rights UK, Factsheet F56. Understanding the Equality Act: Information for disabled students, June 2020

[53]   GOV.UK, When a mental health condition becomes a disability.

- bipolar disorder

- obsessive compulsive disorder

- schizophrenia.[54]

Higher education providers must not discriminate against a disabled student in the way they provide access to education, services, and facilities. The Act's Public Sector Equality Duty also requires that providers eliminate discrimination and advance equality of opportunity between those who share a relevant protected characteristic and those who do not.[55] Disability is a relevant protected characteristic.

Reasonable adjustments

Universities are obliged to anticipate and put in place 'reasonable adjustments' to avoid disabled students being treated less favourably.[56] The duty aims to ensure disabled people do not face 'substantial disadvantage' in comparison to non-disabled people.

- The first requirement of the duty covers changing the way things are done (such as changing a practice).

- The second covers making changes to the built environment (such as providing access to a building).

- The third covers providing auxiliary aids and services (such as providing special computer software or providing a different service).[57]

The aim is to prevent disabled people being from disadvantaged and to encourage greater equality in participation and outcomes among all students.

Contractual duties of providers

The November 2022 Shakespeare Martineau blog post argues universities have an "implied contractual duty to provide higher education to a reasonable standard", which includes any other services they provide, such as student support and counselling.

This means staff delivering educational and related services, such as counsellors, should be appropriately trained to deliver those services to the

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[54] GOV.UK, When a mental health condition becomes a disability. The Mind website has more help and guidance.

[55] Equality Act 2010, Section 149

[56] Equality Act 2010, Section 20 and Schedule 13.

[57] Equality Act 2010, Section 20. Disability Rights UK has a factsheet on some common adjustments for disabled students: Disability Rights UK, Factsheet F11. Adjustments for disabled students, April 2020

required standard and, where relevant, must comply with the professional standards of their accrediting bodies.[58]

Prevent duty and vulnerability to radicalisation

The Counter Terrorism and Security Act 2015 introduced a new statutory duty for universities to have "due regard to the need to prevent individuals from being drawn into terrorism". This is known as the Prevent Duty.

The Department for Education has published specific guidance on the Prevent Duty and the wellbeing of staff and students in higher education.[59] It explains that while a duty of care does not mean providers have to guard against every conceivable harm that might arise, it does mean providers have to think about and risk assess their activities. They then must take action which is "reasonable in the circumstances".[60] This includes undertaking risk assessment and action planning when implementing the Prevent Duty.

Safeguarding

While universities do not have the same safeguarding duties as schools and colleges in relation to children,[61] or local authorities in relation to vulnerable adults,[62] many have policies in place to reflect the fact children and adults at risk may come onto campuses.[63]

These reflect legal duties concerning the protection of children and vulnerable adults, particularly under the Safeguarding Vulnerable Groups Act 2006 (as amended).

2.3 Petition for a statutory duty of care

Following the judgment in *Abrahart v University of Bristol*, 25 bereaved families, also known as the LEARN network, petitioned Parliament to create a statutory duty of care for students in higher education.[64]

Natasha Abrahart's father, Bob Abrahart, has explained the petition is not calling for universities to stand "in loco parentis" (acting in the place of a

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58 Shakespeare Martineau, Student suicide - why new laws are not the answer, 22 November 2022
59 Department for Education, The Prevent duty of care and the wellbeing of staff and students in higher education (HE): notes for trainers, 22 June 2021
60 Department for Education, The Prevent duty of care and the wellbeing of staff and students in higher education (HE): notes for trainers, When can a duty of care arise?, 22 June 2021
61 Education Act 2002 s175
62 Care Act 2014
63 See, for example, UCL, Safeguarding children and adults at risk. Policy and Procedure (Staff and Students)
64 UK Government and Parliament petition, Create statutory legal duty of care for students in Higher Education, 19 October 2023

parent), nor replicate the mental health work done by the NHS. Instead, he has said:

> [O]ur petition is simply arguing that universities should owe a legal duty to exercise reasonable care and skill when teaching students and providing support services.[65]

In this context, "duty" would mean legal obligations on universities to act towards others in a certain way, in accordance with certain standards. "Care" would mean giving serious attention to doing something correctly and in such a way that causing damage or creating a risk is avoided. It would cover both acts and omissions.[66]

The petition closed on 19 March 2023 and received 128,293 signatures. It is scheduled to be debated in Parliament on 5 June 2023.

Government response

On 20 January 2023, the Government responded to the petition asserting that universities already owe their students a "general duty of care", and so "further legislation to create a statutory duty of care, where such a duty already exists, would be a disproportionate response".[67] The Government said:

> Higher Education providers do have a general duty of care to deliver educational and pastoral services to the standard of an ordinarily competent institution and, in carrying out these services, they are expected to act reasonably to protect the health, safety and welfare of their students. This can be summed up as providers owing a duty of care to not cause harm to their students through the university's own actions.

This language reflects that from a report published in 2015 by AMOSSHE The Student Services Organisation, which is an organisation that promotes good practice within higher education student services. The report noted that while student law is still evolving and largely untested in the courts, universities have a general duty of care at common law. It said:

> In essence, a university has a general duty of care at common law: to deliver its educational and pastoral services to the standard of the ordinarily competent institution, and, in carrying out its services and functions, to act reasonably to protect the health, safety and welfare of its students.[68]

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65 "Everyone assumes universities have a duty of care towards students – our campaign would establish one", Wonkhe, 10 October 2022

66 "Everyone assumes universities have a duty of care towards students – our campaign would establish one", Wonkhe, 10 October 2022. See also HEPI blog, Should there be a new statutory duty of care for students in higher education?, 7 November 2022

67 UK Government and Parliament petition, Create statutory legal duty of care for students in Higher Education – Government response, 20 January 2023

68 AMOSSHE The Student Services Organisation, Where's the line? How far should universities go in providing duty of care for their students?, May 2015. The report does not represent the policy

The Government has also said while it is determined to provide students with the best mental health support possible at university, "a statutory duty of care for higher education providers is not the most effective way to improve outcomes for students". This is partly because it considers a duty of care to already exist in common law as part of the law of negligence.[69]

Instead, the Government has said it favours a "two-pronged approach" of funding services and working with mental health experts and the higher education sector to implement best practice.[70]

In March 2023, the Shadow Minister for Higher Education, Matt Western, asked the Government what the legal basis was for a general duty of care on higher education providers to deliver educational and pastoral services. The Government said while the "existence and application of a duty of care between HE [higher education] providers and students has not been widely tested in the courts", there was an understanding in the legal and education sector that the law of negligence applies in the relationship between a provider and a student.[71]

In May 2023, #ForThe100, which is campaigning in support of the Learn Network's calls for a statutory duty of care, published a legal note (PDF) written by the lawyers that represented and supported the family of Natasha Abrahart in their legal proceedings against the University of Bristol.[72] It said the current legal reality, as expressed in the judgment of *Abrahart v University of Bristol,* was that there was "no clear legal authority to the effect that universities owe a duty of care to take reasonable care for their students' wellbeing, health and safety".[73] It also highlighted how this contrasted with the expectations of students, their families, and even the Government.

Petitions Committee evidence session

On 16 May 2023, ahead of the petition's debate on 5 June 2023, the House of Commons Petitions Committee held an evidence session which heard from the petition's creator, other affected individuals, and representatives from relevant charities and sector bodies.[74]

Relatives of students who had died by suicide argued the current voluntary approach of following best practice did not work because there was

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stances of AMOSSHE but was instead intended as a record of the issues considered at a policy discussion on 29 May 2015.

[69]   PQ 181273 [Higher Education: Health and Safety] 25 April 2023

[70]   PQ 181273 [Higher Education: Health and Safety] 25 April 2023

[71]   PQ 174398 [Higher Education: Standards] 31 March 2023

[72]   Jamie Burton KC and Sarah Steinhardt (Doughty Street Chambers) Gus Silverman (Irwin Mitchell LLP), A Note regarding a potential duty of care owed by universities to students (PDF), 15 May 2023

[73]   Jamie Burton KC and Sarah Steinhardt (Doughty Street Chambers) Gus Silverman (Irwin Mitchell LLP), A Note regarding a potential duty of care owed by universities to students (PDF), 15 May 2023, para. 34

[74]   Petitions Committee, A statutory duty of care for higher education students - Oral evidence, 16 May 2023. The evidence session is discussed in the Wonkhe article "Is it time for a Support Excellence Framework?", 17 May 2023.

inconsistency in adopting and applying the guidance across the sector and within individual universities. They also said there was little accountability for when things went wrong. They highlighted the duty of care that exists in employment law, and said a statutory duty of care would ensure institutions not implementing best practice could be held accountable.

The Vice President for Higher Education at the National Union of Students, Chloe Fields, said the current funding and support structures in universities were insufficient to meet the needs of students, in part because many students split their time between home and university addresses. She also said students struggled to access NHS support because of long waiting lists. On the specific point of whether there should be a statutory duty of care, Chloe Fields said there needed "to be more standardised regulation of university processes", but she expressed concern about possible "over-policing and intrusion".

The Influencing and Advocacy Lead at Student Minds, Dominic Smithies, said there would need to be adequate resources to ensure staff were supported and did not face additional pressure when many were potentially already feeling stretched. He also said it was important to recognise the need for a broad spectrum of interventions and initiatives, and no one solution could be seen as a "silver bullet".

The Chief Executive of the suicide prevention charity PAPYRUS, Ged Flynn, noted many of the issues being discussed were not specific to the higher education sector and more needed to be done across society when it came to learning from deaths by suicide. He also said he worried that introducing a statutory framework would make people "avoid any natural intervention that they would ordinarily make".

This risk was also highlighted by the Chair of AMOSSHE, Jill Stevenson, who said:

> From our practitioners that work in student services, there are real fears about retribution and people being held personally accountable for failings and mistakes. I think the fear of litigation and retribution means that some people who are working in this area feel that this is not something that they would want to engage in.

She also suggested if a statutory duty of care was introduced, and university staff became less risk-averse, universities might be more likely to apply 'fitness to study' procedures earlier than is currently the case. She said this could mean that rather than being supported to continue with their studies, students might be removed from their courses because a university feared the risk of their support structures being deemed inadequate.

President of Universities UK, Professor Steve West, said student mental health and wellbeing were not "on the radar" of universities ten years ago, and while they have made improvements, the sector needed "to go further faster", and ensure everyone is "engaging with the best practice and we are learning together." However, he said he did not believe a statutory duty of care would

necessarily help because, unlike in a school or employment setting, universities do not have a sufficient level of control and influence.

Professor Steve West did acknowledge there should be a mechanism by which the university sector could be held to account though, and said a 'support excellence framework', which could exist alongside the Research Excellence Framework and Teaching Excellence Framework, was an interesting idea.

Survey

Ahead of the debate on 5 June 2023, the Petitions Committee also ran a survey asking petitioners about their experiences of poor mental health at university, support provided by their university, and views on introducing a statutory duty of care for higher education students. The survey received over 1500 responses within which:

- 86% of current students said they had suffered with poor mental health at university.

- 26% of current students said their university was 'supportive' of their mental health

- 67% of parents or guardians of a current student said that their child had not felt supported by their university with their mental health.

- 88% of parents or guardians of a current student said they would expect to be contacted if their child was suffering with poor mental health at university.

Further information and the full survey summary can be found on the Petitions Committee webpage.

2.4 Sector reaction to calls for a statutory duty of care

Universities UK, which is the representative body for 140 universities, has said imposing a statutory duty of care would be "disproportionate and inappropriate".[75] In a briefing outlining its position on the issue and highlighting the work it already does in this area, Universities UK said that universities already have a general duty not to cause harm to students:

> Universities already have a general duty of care to their students - not to cause harm by careless acts or omissions - corresponding to their role and capabilities as settings for adult education. They also have further legal duties relating to contract, health and safety, human rights, the safeguarding of vulnerable adults and equalities legislation.

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[75] Universities UK, Creating a statutory duty of care for students, 19 April 2023

> Given the size, diversity, and dispersal of student populations, we believe that these existing duties provide a proportionate and practical regulatory framework for student safety and health. We do not believe a further statutory duty would be the best approach to improve outcomes for students.[76]

Instead, Universities UK has called for "concerted action and further support" from the Government and the NHS to help their members respond to increasing numbers of students, with increasingly complex needs, accessing mental health and/or counselling services through universities.[77]

AMOSSHE has also argued a statutory duty of care is not necessary and more funding is instead needed for NHS mental health services:

> Universities are already subject to health and safety regulations, duties under the Equality Act 2010 and section 75 of the Northern Ireland Act 1998, and duties around the protection of children and vulnerable adults. Therefore AMOSSHE does not believe that an additional statutory duty of care on universities is necessary.

> Given the need for professional NHS support for students presenting with diagnosed and emerging mental health conditions, it is our view that increased funding for student mental health services in the NHS is a greater priority than an additional duty of care on universities.[78]

In highlighting current obligations placed on universities, the AMOSSHE statement did not mention the "general duty of care at common law" discussed in its 2015 report.

[76] Universities UK, Creating a statutory duty of care for students, 19 April 2023, p5
[77] Universities UK, Creating a statutory duty of care for students, 19 April 2023, p5
[78] AMOSSHE, Proposed statutory mental health duty of care on universities: AMOSSHE response, 12 October 2022

3 Government policy on student mental health

The Government has said it believes the most effective way to support student mental health is through a "two-pronged approach" of funding services and working with mental health experts and the sector to implement best practice.[79]

The Government's work in this area includes:

- Asking the Office for Students (OfS), which regulates higher education in England, to allocate £15 million towards student mental health in the 2022/23 academic year.

- Working with the OfS to provide Student Space, a dedicated mental health and wellbeing platform for students.

- Appointing Edward Peck, Vice-Chancellor and President of Nottingham Trent University, as Student Support Champion to advise universities on supporting students who may be struggling and at risk of dropping out.

- Working with the higher education sector in support of the Suicide Safer Universities framework and the Stepchange framework.

- Writing to all higher education providers to ask them to sign up to the University Mental Health Charter programme by the end of 2026.[80]

The Government has also said while it is determined to provide students with the best mental health support possible at university, it does not believe a statutory duty of care for higher education providers is the most effective way to improve outcomes for students.[81]

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79   PQ 181273 [Higher Education: Health and Safety] 25 April 2023

80   PQ 163890 [Students: Mental Health and Safety] 21 March 2023; PQ 160249 [Higher Education: Suicide] 15 March 2023; PQ 16026 [Pupils and Students: Mental Health], 23 June 2021; Department for Education Hub blog, How we're supporting students with their mental health, 9 March 2023.

81   PQ 181273 [Higher Education: Health and Safety] 25 April 2023

3.1   The Office for Students

The Office for Students (OfS) regulates higher education in England. It was established by the Higher Education and Research Act 2017 and is a non-departmental public body of the Department for Education (DfE).[82]

A framework document outlines the OfS' relationship with the DfE.[83] The DfE sets priorities for the OfS in annual guidance letters explaining how the OfS should allocate the public money it receives. In the March 2023 guidance letter, the Education Secretary, Gillian Keegan, said:

> I would like the OfS to continue to take a leading role in relation to student mental health, including through distributing funding to give additional support for transitions from school/college to university - with a focus where possible on providing counselling services for students - and to support join-up between the higher education and health sectors to avoid students falling through the gaps.[84]

The Education Secretary also noted the continued funding of Student Space, a dedicated mental health and wellbeing platform for students, and welcomed the delivery of "a central hub of digital resources for the sector to improve the effectiveness of mental health practices" in the coming months.

Work of the Office for Students

The OfS does not directly regulate student welfare or support systems at individual universities and colleges. Instead, as part of its role in ensuring all students are supported to access, succeed in, and progress from higher education, the OfS' mental health work covers three broad areas:

- Providing funding for higher education providers to develop "practical and innovative approaches and solutions".

- Challenging providers to address gaps in outcomes between different groups of students through its access and participation regulation.

- Working with a range of partners to develop and disseminate sector-wide effective practice.[85]

The OfS has overseen three funding programmes for higher education providers to develop practical and innovative approaches and solutions to

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[82]   Department for Business, Innovation & Skills, Case for the creation of Office for Students (OfS), 7 June 2016.

[83]   Department for Education (DfE) and the Office for Students (OfS), Office for Students framework document, 16 January 2023.

[84]   Department for Education, Guidance to the Office for Students on the Higher Education Strategic Priorities Grant for the 2023-24 Financial Year (PDF), 30 March 2023

[85]   Office for Students, Student mental health, Our role, October 2020

support students' mental health.[86] In partnership with the Higher Education Funding Council for Wales (HEFCW), the OfS has also made £3 million available to support the development of Student Space, which is an online platform that includes wellbeing information, student stories, and a directory of services students can access at their own university or college.

The OfS has also published guidance for providers on supporting student mental health, including:

- A briefing on suicide prevention;

- an Insight brief exploring the differential outcomes for students with a declared mental health condition;

- a mental health briefing note and case studies looking at the ways universities and colleges have supported the mental health needs of their students during the Covid-19 pandemic and signposting to sources of advice.[87]

The OfS also supports and funds the sector in developing its own guidance, including guidance to help university leaders prevent student suicides, which was published in September 2018 by Universities UK (UUK) and Papyrus, and the University Mental Health Charter, which was developed by Student Minds.

3.2   Suicide prevention

The Government has said "preventing suicide and self-harm in our student populations is a key priority."[88] The fifth progress report on preventing suicide in England (2021) said the Government was currently coordinating two approaches to improving mental health among university students.[89] These included:

- Supporting Public Health England and Universities UK to develop a serious incident framework for use following student death. This would ensure incidents are identified correctly, investigated thoroughly, and learned from to reduce their reoccurrence.

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86   Office for Students, Mental health funding competition: Using innovation and intersectional approaches to target mental health support for students, April 2023; Mental health Challenge Competition: Achieving a step change in mental health outcomes for all students, October 2022; Catalyst fund: Supporting mental health and wellbeing for postgraduate research students, July 2022

87   Office for Students, Student mental health, What we're doing, October 2022

88   Department for Education Hub blog, How we're supporting students with their mental health, 9 March 2023

89   HMG, Preventing suicide in England: Fifth progress report of the cross-government outcomes strategy to save lives, March 2021, p61

- Setting up Student Mental Health Collaboratives to improve coordination of care between universities and the NHS, investigate potential barriers to accessing support, and develop a clinical risk assessment tool which can be rolled out across the UK. Thus far, collaboratives have been established across an initial five university sites in Bristol, Liverpool, Manchester, London (UCL), and Sheffield.

In June 2021, the then-Minister of State for Universities, Michelle Donelan, and the President of Universities UK, Steve West, co-hosted a roundtable on suicide prevention in the higher education sector.[90] The event brought together Government departments, sector bodies, charities, higher education providers, and several bereaved family members. The then-Minister said she expected all higher education providers to have suicide prevention strategies in place.

The Government has said it also strongly supports the Suicide Safer Universities guidance, which is led by Universities UK and Papyrus.[91] More information on the framework is available below in section 4.1.

3.3 Disabled Students' Allowance

Disabled Students' Allowance (DSA) helps to cover the extra costs a student might incur because of a disability, including a mental health condition.[92] DSA can help to pay for:

- specialist equipment, such as a computer or disability-related software;

- a non-medical helper, such as a British Sign Language interpreter;

- the day-to-day costs of study related to the student's disability; and

- travel costs.

The amount of DSA a student is entitled to will depend on their individual needs. Students may need to provide evidence of their disability and attend a Study Needs Assessment to establish the necessary support.

In England, undergraduate and postgraduate students can get up to £26,291 of support for the 2023/24 academic year.[93] Students apply through Student Finance England and the money is generally paid directly to the organisation

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90 Office for Students blog, Working together on suicide prevention in higher education, 10 September 2021

91 Universities UK and PAPYRUS, Suicide-safer universities, September 2018 (updated 2022)

92 GOV.UK, Help if you're a student with a learning difficulty, health problem or disability (accessed 16 March 2023)

93 GOV.UK, Help if you're a student with a learning difficulty, health problem or disability (accessed 16 March 2023)

providing the service or equipment, but may also be paid into the student's bank account depending on the support required.

The Government's Special Educational Needs and Disabilities (SEND) Improvement Plan, which was published in March 2023, said the Department for Education and the Welsh Government are working with the Student Loans Company to reduce the length of time between a student making a DSA application and having their support agreed. It also said the Government would "seek to set expectations" on how students should be supported to apply for DSA.[94]

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[94]   Department for Education, SEND and alternative provision improvement plan: right support, right place, right time, CP 800, March 2023, p46

4   Sector guidance and support

4.1   Suicide-safer Universities

In September 2018, Universities UK (UUK) and PAPYRUS, a national charity dedicated to the prevention of young suicide, published Suicide-safer Universities. In October 2022, the main guidance was supplemented with recommendations on sharing information with trusted contacts, supporting placement students, and what to do after a student suicide ('postvention').

In May 2023, Universities UK asked universities in England how many of them had adopted its guidance. 83 universities out of 115 responded.

- 99% have adopted the main Suicide-safer Universities guidance

- 93% have adopted or are adopting the trusted contact guidance

- 89% have adopted or are adopting the placement guidance

- 100% have adopted or are adopting postvention guidance[95]

The main guidance provides a framework to help university staff understand student suicide, mitigate risk, and intervene when students get into difficulties.[96] The guidance states suicide prevention, intervention, and "postvention" should be connected in a university's overarching mental health strategy. The strategy should be created in partnership with staff, students, and external stakeholders, and should be developed into a multi-agency action plan detailing how, by who, and when it will be implemented.[97]

The guidance also covers best practice for universities in preventing student suicides and aims to help university leaders develop effective strategies. It calls for a whole-university approach to good mental health, and the need to raise suicide awareness, provide effective signposting, and encourage the disclosure of difficulties and distress.[98] The guidance ends with a checklist, setting out that universities should, among other things:

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[95]   Petitions Committee, A statutory duty of care for higher education students - Oral evidence, 16 May 2023

[96]   Universities UK and PAPYRUS, Suicide-safer universities, September 2018

[97]   Universities UK and PAPYRUS, Suicide-safer universities, Main guidance for university leaders, September 2018, p15

[98]   Universities UK and PAPYRUS, Suicide-safer universities, Main guidance for university leaders, September 2018, p17

- make suicide safety an institutional priority;

- develop a suicide-safer strategy and action-plan as a distinct component of their overarching mental health strategy;

- train suicide intervention and postvention teams, and train all student-facing staff in suicide awareness;

- create strong links with local and national partners from the health sector, voluntary sector, and local authorities; and

- work together with schools, colleges, and other universities in the area to ensure smooth transitions between educational settings.[99]

Sharing information with trusted contacts

Parents who have been bereaved by suicide have called for universities to share more information relating to student mental health. Following a number of student suicides at the University of Bristol, the university introduced an "opt-in" system in which students can give consent for a parent, guardian, or friend to be contacted if there are serious concerns about their well-being.[100]

Following the establishment of an Information Sharing Taskforce, which brought together student representatives, bereaved parents, professional and clinical staff working within universities, legal advisers, the NHS, government departments, and clinical leaders, Universities UK published guidance in October 2022 setting out when and how universities should share information with families, carers, and trusted contacts.[101]

The guidance includes:

- advice on how and when to approach trusted contacts

- how to have conversations with students about information sharing

- advice on sharing information in emergencies

- case studies on student contact statements and critical incidents liaison processes.[102]

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99   Universities UK and PAPYRUS, Suicide-safer universities, Main guidance for university leaders, September 2018, p21

100   "Would parents be told about student mental health crisis?", BBC News, 9 February 2020 (accessed 3 May 2023)

101   Universities UK, Suicide-safer universities: Sharing information with trusted contacts, October 2022

102   Universities UK, Suicide-safer universities: Sharing information with trusted contacts, October 2022

Supporting placement students

Placements are an essential part of many university degrees and students' learning, self-development, and graduate careers. But they can involve significant change, including new settings, challenges, and colleagues, as well as additional financial costs. There is inherent risk this transition negatively affects students' wellbeing and mental health, including their ability to access support.

Following the death of her brother Harrison, who died by suicide while on a teaching placement, Isabella De George launched the Positive Changes in Placement campaign, which aimed to strengthen suicide prevention strategies for university placement students. She worked with universities on their unnotified absence policies and the support students are provided while on placement.[103]

Isabella De George went on to work with Universities UK in producing a checklist that covers what universities can do, in partnership with placement providers, to better support students in difficulty with their mental health before, during, and after going on placements.[104] This includes:

- Checking in advance of a placement the workplace setting has properly considered wellbeing and has clear routes for support when people need it.

- Ensuring wellbeing is a key part of pre-placement briefings and training, such as techniques for maintaining a good work/life balance or preparing healthcare students for potentially upsetting and traumatic situations.

- Establishing a key university contact for each student and provide students with opportunities to 'check-in' with that person on both a scheduled and unplanned basis if needed.

- Working with placement providers to set-out a clear process for unnotified or unexplained absence reporting, so it is clear how concerns for a students' whereabouts or welfare would be escalated to the university.[105]

4.2 Stepchange: Mentally healthy universities

Universities UK's Stepchange Framework was introduced in 2017 and relaunched in March 2020 as Stepchange: Mentally healthy universities. It is a

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[103] "'My brother took his own life, but his university didn't even know he was absent. Things must change'", I News, 3 October 2022 (accessed 3 May 2022)

[104] Universities UK, Increased mental health support needed for university students on placements, October 2022

[105] Universities UK, Suicide-safer universities: Supporting placement students, October 2022

strategic framework for a whole university approach to mental health and wellbeing at universities. It calls on universities to see mental health as foundational to all aspects of university life, for all students and all staff.[106] The framework was co-developed with Student Minds' University Mental Health Charter (see section 4.3 below).

The framework states universities should adopt mental health as a strategic priority and institutions should implement a whole university approach, so all aspects of university life promote and support student and staff mental health. Universities should also pursue partnerships with the health and care system, parents, schools and colleges, and employers. According to the framework, the whole university approach:

- 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.

The approach should encompass prevention and early intervention, the importance of open conversations about mental health, and appropriately resourced and effective support services. To do this, the framework explains universities must develop local and national partnerships with the health and care system to improve access to and coordination of care, as well as working with parents, schools, colleges and employers to mitigate the risks of transitions into and out of higher education.

The updated framework is discussed in an article on the Wonkhe website, The new Stepchange is an opportunity to renew our efforts on mental health, 21 May 2020.

4.3   University Mental Health Charter

In December 2019, the University Mental Health Charter was published. It is a set of principles universities can commit to working towards to improve the mental health and wellbeing of their communities.

The charter was developed by Student Minds in partnership with the UPP Foundation, the Office for Students (OfS), National Union of Students (NUS) and Universities UK. It comprises:

- Charter Programme: a voluntary improvement programme, which supports staff within participating universities to understand,

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[106]   Universities UK, Stepchange: Mentally healthy universities, updated February 2023

demonstrate, and share good practice, to take action to improve their approach, and to prepare for accreditation.

- Charter Award: accreditation process for programme members. Through a process of self-assessment and an onsite visit, the university and Award assessment teams assess the university's progress towards the principles in the Charter to inform ongoing improvement and recognise excellent approaches to student and staff mental health with a charter mark.[107]

The University Mental Health Charter framework provides a set of evidence-informed principles to support universities to adopt a whole-university approach to mental health and wellbeing. The framework includes 18 themes covering, among other things, the transition into university life, learning, teaching, and assessment, support services, and residential accommodation.[108]

In May 2023, the Influencing and Advocacy Lead at Student Minds, Dominic Smithies, said five institutions have achieved award status, but a lot more have engaged with the programme.[109]

4.4 Disabled Students' Commitment

A disability is defined as:

> a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities.[110]

A mental health condition is considered a disability if it lasts, or is likely to last, 12 months. 'Normal day-to-day activity' is defined as something a student would do regularly in a normal day. This includes things like using a computer, working set times, or interacting with people.[111]

The Disabled Students' Commission is an independent group established by the Office for Students in March 2020 and coordinated by Advance HE. The Commission provides advice and information to higher education providers to improve support for disabled students.

Following a consultation, the Commission launched the Disabled Student Commitment in April 2023 "to secure an enhanced and improved experience

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[107] University Mental Health Charter, FAQs
[108] University Mental Health Charter, The Framework
[109] Petitions Committee, A statutory duty of care for higher education students - Oral evidence, 16 May 2023
[110] Disability Rights UK, Factsheet F56. Understanding the Equality Act: Information for disabled students, June 2020
[111] GOV.UK, When a mental health condition becomes a disability

for disabled students within higher education".[112] The Commitment does not seek to replicate or replace existing legal duties, but instead asks providers to consider what more they can do to improve the disabled student experience by looking at their practices and policies.

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[112]   Advance HE, The disabled Student Commitment (accessed 16 March 2023)

5   University support

Students are encouraged to declare a mental health condition when they apply for university via UCAS. Prospective students can record any needs related to their mental health difficulty, and this is then passed on to higher education providers so they can consider additional support. Providers have reported an increase in the numbers of students accessing mental health and/or counselling services and an increase in the complexity of student needs in recent years.[113]

Higher education providers are autonomous institutions and the way in which mental health provision is organised and delivered varies across the sector. Most higher education providers have mental health policies setting out their mental health services and provision for students. The most common model of mental health provision within providers involves three separate services:

- wellbeing services to deliver low-intensity support and signpost to non-medical services;

- counselling services targeted at students with moderate levels of mental distress; and

- disability services targeted at students in receipt of disabled students' allowances or who experience mental illness which meets a clinical threshold for diagnosis.

In 2022, the vast majority of higher education providers had a suicide prevention strategy or were working towards putting one in place (66% and 32% respectively).[114] The University of Wolverhampton and the University of Cumbria, for example, employ Connecting with People and the Columbia Suicide Severity Rating Scale (C-SSRS), which are preventative approaches that include training for students and staff.

A research report published by the Department for Education in May 2023 on mental health and wellbeing practices in higher education found many providers were adopting health and wellbeing at a strategic level within their organisation.[115] It said those providers with strategies in place or in development generally consulted with students, NHS services, local third sector organisations, and local authorities, as well as using sector tools and

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[113]   Department for Education, HE providers' policies and practices to support student mental health, 25 May 2023, p10

[114]   Department for Education, HE providers' policies and practices to support student mental health, 25 May 2023, p8

[115]   Department for Education, HE providers' policies and practices to support student mental health, 25 May 2023

frameworks. Some providers felt that they would benefit from closer links and greater clarity about how to work with local emergency services.

A 2023 survey of 4,000 UK students by the Tab, a student news site, and Campaign Against Living Miserably (CALM), a suicide prevention charity, found just 12% of respondents think their university handles the issue of mental health well.[116]

5.1   Student-led initiatives

There are also several student-led initiatives offering mental health support to students, including:

- Nightline: A service run for students, by students. Trained student volunteers answer calls, emails and messages in person to fellow students;

- Student Minds: A charity which carries out research and campaigns on mental health issues. It trains volunteers and supports student-led societies across campuses; and

- Students Against Depression: A website offering advice, information, guidance and resources to those suffering from depression and suicidal thinking.

The Samaritans Step by Step service, a suicide prevention service for schools, has also been expanded to the higher education sector.[117]

5.2   Calls for transparency on suicide rates

Following the death of their son Harry Armstrong Evans, who died by suicide in 2021 after suffering a mental health crisis at the University of Exeter,[118] Armstrong Evans' parents, Alice and Rupert, launched a campaign to require universities to record or publish their student suicide rates. A parliamentary petition called for:

- Coroners to inform universities when the suicide of an enrolled student is registered.

- Universities to publish annually the suicide rate of enrolled students.

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[116] "'They made me feel invalid': Shocking new figures show scale of student mental health crisis", The Tab, 2 May 2023

[117] Samaritans, Universities

[118] "University failed to support Harry Armstrong Evans, inquest told", BBC News, 31 October 2022 (accessed 3 May 2022)

- New powers to place universities into 'special measures' where suicide rates exceed that of the national average.[119]

The 2023 survey of 4,000 UK students by the Tab and CALM found 88% of respondents wished their university was more transparent about suicide numbers.[120]

In response to the petition, Universities UK, which represents 140 universities in England, Scotland, Wales, and Northern Ireland, said coroner decisions are already in the public domain and so it would be "inappropriate" for universities also to publish this information. A briefing published in April 2023 said:

> Our position is that it is ultimately for the coroner to determine and record the cause of death and those decisions are in the public domain. It would be inappropriate for universities to set up a parallel reporting system or any kind of league table of student deaths.
>
> We support better use of this coronial information and more proactive follow-up on coroner's findings to prevent future deaths as recommended in our guidance on 'postvention' in partnership with PAPYRUS and the Samaritans, which asks universities to conduct critical incident reviews of all student deaths, to understand likely cause and to learn from each event.[121]

This 'postvention' guidance was published in December 2022, as a supplement to Universities UK's Suicide-safer Universities guidance.[122]

The Department for Education has said it has no plans to legislate for higher education providers to record suicide numbers publicly, but it "does believe it is important to understand the overall trends in HE suicides and share best practice when tragedy does occur."[123]

[119] UK Government and Parliament petition, Introduce new rules regarding the suicide of higher education students, 8 November 2022

[120] "'They made me feel invalid': Shocking new figures show scale of student mental health crisis", The Tab, 2 May 2023

[121] Universities UK, Creating a statutory duty of care for students, 19 April 2023, pp6-7

[122] Universities UK, Suicide-safer Universities, How to respond to a student suicide, December 2022

[123] PQ 185818 [Students: Mental Health] 24 May 2023

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