Measuring well-being in higher education

Rachel Hewitt, HEPI’s Director of Policy and Advocacy

Measuring personal well-being in the UK has been debated for well over a decade. The initial focus came from economists who questioned whether there are better ways than assessing Gross Domestic Product to track progress in society. This led to the Office for National Statistics (ONS) developing and implementing the current UK measure of well-being, initially used in the 2011 Annual Population Survey. The results provided the first well-being statistics on the general population in the UK.

More recently, well-being has also begun to be measured within the higher education sector to understand students’ welfare better. Since 2014, HEPI – in conjunction with the Higher Education Academy/AdvanceHE – has been building a time series on well-being among full-time undergraduate students via the Student Academic Experience Survey. This has enabled us to build a deeper awareness of well-being among students, how this changes from year-to-year and the factors that affect it. Other organisations have also begun to produce data on well-being among students, including Wonkhe/Trendence research on student loneliness, HESA’s new survey of recent graduates (Graduate Outcomes) and forthcoming HEPI/Unite Students polling of applicants and students, due to be published in September 2019. But our understanding of well-being across the higher education sector, the impact higher education has on this and how we can best respond, remains limited.

Mental health and well-being

The terms ‘mental health’ and ‘well-being’ are often used interchangeably. While both terms are difficult to define precisely, well-being is generally regarded as a broader term than mental health. The mental health charity Mind defines the relationship between mental health and well-being as follows:

*If you experience low mental well-being over a long period of time, you are more likely to develop a mental health problem.*

*If you already have a mental health problem, you’re more likely to experience periods of low mental well-being than someone who hasn’t. But that doesn’t mean you won’t have periods of good well-being.*

The Higher Education Academy (now AdvanceHE) used the two-continua model to further explain this, demonstrating that mental health and well-being are not necessarily interrelated.

Conflating mental health and well-being can be damaging to individuals and the provision of support services. David Mair, Head of Counselling at the University of Birmingham, stated that existing figures on mental health combine ‘feeling anxious about exams to depression, which makes it hard to get out of bed in the morning.’ Single statistics which combine both mental health and well-being therefore, do not help those in either scenario. Those who suffer mental ill health need dedicated interventions, such as counselling.
Those with low levels of well-being may have more agency to address this with the help of generalised resources, such as online information. It is critical that individuals are not mismatched with the services they require.

At the same time, universities are struggling with a lack of resources in this area and looking for ways to manage this. In some cases, the conflation of mental health and well-being has led to universities replacing mental health services with well-being services, reducing the number of counsellors available. Universities can only understand the demand for mental health and well-being services if they have data available on both areas. This issue of incorrect offering or reduced provision of services may only be compounded if cuts have to made as a result of a reduction in fees from the Review of Post-18 Education and Funding.

While the measurement of mental health is important, this report focuses solely on the measurement of well-being. HEPI has previously written about the measurement of mental illness in students and plans to cover staff mental health in the near future.

What are the benefits to universities of measuring well-being?

Higher education institutions support students through two of the biggest transitions in life: the transition from school / college to higher education and the transition from university into the workplace. There are high expectations on universities, in part arising from the predominance of the residential model of higher education and the increasing proportion of the student body made up of full-time young school leavers. For example, UK higher education providers are generally expected to offer more support to students facing mental health challenges than universities in many other countries.
One way higher education institutions can take a key role in helping to manage these transitions is through promoting well-being. By measuring well-being, we can better understand the long-term trends in the health of those in the higher education sector across the spectrum and, with this understanding, can develop interventions to support individuals’ well-being. This may in turn help in some cases to reduce the likelihood of mental illness. Organisations such as Student Minds are already operating in this space, providing resources to students on how to look after their well-being. Similarly, by better understanding the well-being of staff, universities can be better equipped to take action where low levels of well-being are identified.

**How is well-being measured?**

The development and implementation of the well-being measure commonly used across the UK was led by the Office for National Statistics (ONS), which devised the following questions. These questions gained National Statistics classification in September 2014, following significant consultation and review. They have been modelled on comparable international measures, as the study of well-being becomes a global activity. However, in terms of directly measuring well-being, the higher education sector is relatively behind the curve.

**What do the existing data show about well-being in higher education?**

Some data are currently collected about well-being within the higher education sector but, at the moment, the coverage and consistency of collection are limited. In order to understand the benefit of collecting information on personal well-being, it is useful to understand the existing sources of data, and the uses to which they have been put to date.

**Students**

Coverage: UK wide  
Consistency: Five years of data

One of the first sources to collect information on students’ well-being using the ONS measures, was the HEPI / Higher Education Academy Student Academic Experience Survey back in 2014. This annual survey, now run in conjunction with AdvanceHE, has repeated the questions each year since. These data have been used to make comparisons between the general population and all young people on the one hand and students on the other, finding that students do generally have lower levels of well-being than the general population. The year-on-year trends show students’ wellbeing has been in decline in recent years. The data have also been used to compare between groups within higher education, such as gender or workload. The data have also been split to explore the different experiences of lesbian, gay, bisexual and transgender (LGBT) and heterosexual students. The data show that heterosexual students are likely to have higher levels of well-being than LGBT students across all the well-being measures.

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Next I would like to ask you four questions about your feelings on aspects of your life. There are no right or wrong answers. For each of these questions I’d like you to give an answer on a scale of 0 to 10, where 0 is ‘not at all’ and 10 is ‘completely’.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life Satisfaction</td>
<td>Overall, how satisfied are you with your life nowadays?</td>
</tr>
<tr>
<td>Worthwhile</td>
<td>Overall, to what extent do you feel that the things you do in your life are worthwhile?</td>
</tr>
<tr>
<td>Happiness</td>
<td>Overall, how happy did you feel yesterday?</td>
</tr>
<tr>
<td>Anxiety</td>
<td>On a scale where 0 is ‘not at all anxious’ and 10 is ‘completely anxious’, overall, how anxious did you feel yesterday?</td>
</tr>
</tbody>
</table>
Applicants

Coverage: UK wide
Consistency: Only one year of data (so far)

Students are typically at the age most vulnerable to the onset of recognisable mental illness, with the peak of disorders developing between adolescence and mid-twenties.\textsuperscript{10} Therefore, it is useful to track the well-being of applicants before they enter higher education and monitor how well-being changes as they move through higher education.

The HEPI and Unite Students report \textit{Reality Check} asked applicants about their well-being. This allowed for comparison between applicants, students and the general population aged 16-19 and all ages. The results showed similarities between applicants and students, although with slightly lower levels of anxiety in applicants. They also showed that both students and applicants have lower levels of well-being than the general population.\textsuperscript{11}

Graduates

Coverage: UK wide
Consistency: Only one year of data (so far)

Data on well-being are now beginning to be collected from graduates. In the final Longitudinal Destination of Leavers from Higher Education (Longitudinal DLHE) survey from the Higher Education Statistics Agency, graduates from the 2012/13 academic year were asked the four well-being questions forty months after they had left their studies.

The data were analysed by the Office for Students (OfS) to produce statistics comparing the general population to graduates. Recent graduates tended to rate lower than the general population across these three well-being measures. The general population averaged around 0.2 points (on a ten point scale) higher than graduates for both happiness and life satisfaction.\textsuperscript{12} Graduates’ well-being is grouped as low (scoring 0-4), medium (scoring 5-6), high (scoring 7-8) or very high (scoring 9-10). However this data is collected only 3.5 years after students leave university, so may be too soon to establish the long-term impacts on well-being. There is evidence to show graduates go on to have better general health and life satisfaction than non-graduates.\textsuperscript{13}
The Longitudinal DLHE data for graduates from 2012/13 which included the well-being questions was the last in a series, as it is currently being replaced by HESA’s Graduate Outcomes survey. The Graduate Outcomes survey will similarly capture information about graduate well-being, but 15 months after leaving their studies.

The recent focus on well-being has been largely concentrated on students. However as stated in the HEPI Occasional Paper *The Positive and Mindful University* by Anthony Seldon and Alan Martin, ‘It is a false economy if an improved student environment comes at the expense of staff health and well-being.’¹⁴

There is currently no national measure of staff well-being within universities. Universities conduct their own staff surveys, but as the results of these are not published, we do not know whether these collect information on well-being or, if so, what the results show. This leaves a big gap in our understanding of well-being on university campuses and should be addressed. To ensure a full picture of the workforce, this should include both academic and professional services staff.

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**Staff**

Coverage: None  
Consistency: None

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*Source: HESA Longitudinal destination of leavers from higher education survey 2012-13.  
Population: Graduates from English, publicly-funded higher education institutions who were UK domiciled at the start of their course.*
I do not underestimate the challenge of doing this. Collection needs to be conducted by a neutral body, to avoid politicisation of the collection and results. National public data currently collected on university staff is largely limited to objective information about the nature of employment in institutions and the personal characteristics of staff, collected through the HESA Staff record. The collection of well-being data would not fit neatly within this, as it is largely collected through university human resource systems. It would also not include non-academic atypical staff (defined by HESA as 'staff whose contracts involve working arrangements that are not permanent, involve complex employment relationships and/or involve work away from the supervision of the normal work provider'). However, the Staff record does benefit from anonymity for staff. One option could be to seek for new surveys of staff to be conducted by either HESA, separate to the Staff record, or UCEA who have experience conducting surveys on employment in higher education. Alternatively, universities could collect this information through their existing surveys of staff, and collectively commit to the publication of this data.

**How can we use well-being data?**

Broadening the collection of well-being data could lead to a number of new uses of the data. Wider availability of well-being data would allow for more detailed comparisons between those in the higher education sector and the general population, to understand how working conditions within universities impact staff well-being and to track whether levels of well-being are consistent from a student’s application to graduation. It would also help us understand better the experiences of different groups within universities and how their well-being can differ. Similarly, it could aid with understanding of the impact that the university experience has on well-being and how this develops over time. For example, we might expect well-being to dip during a university experience or immediately after graduation as these are periods of uncertainty, but graduates could go on to have higher levels of well-being in later life.

**Why is there reluctance to do this?**

Not everyone is keen on the increased collection of well-being measures. I worked on the introduction of the well-being measures to the Graduate Outcomes survey in my previous role at HESA. Higher education institutions raised concerns about its inclusion, and some of this criticism has been echoed in the research for this Policy Note.

Common arguments against the collection of the data include:

1. **We should not collect additional measures such as well-being, as there is already too much focus on metrics.** This is a common argument against new data collection. However, the trend towards the use of metrics in higher education is unlikely to reverse. With the prevalence of league tables, the Teaching Excellence Framework and Unistats, there is a clear focus on measuring higher education. Poor performance in metrics inspires universities to take action. If we genuinely believe that there is more to picking a university course than which generates the highest salary, should we not be providing a richer dataset to help inform decision making?

2. **Well-being data will be turned into a league table.** Again, this is a common refrain when talking about new data collection – and a legitimate one. However, if we avoided collecting all data because it might feed new league tables and unfavourable headlines, we would end up with no evidence basis for policy making. Diversifying the data that are available at university level could change the approach taken by existing league table providers or be used by universities to provide additional information about their broader impact on individuals’ lives.
3. Well-being is a measure by which universities will be judged that they do not have control over. This is an argument particularly associated with the collection of these data from graduates. But if we want to have better conversations about the long-term impacts of higher education on both individuals and wider society, we need the data to support this. As a sector we are generally happy to utilise this data when it is favourable (for example, the research that concludes graduates are healthier and more engaged in society), therefore we should be confident in the collection of well-being data once students are out of the higher education system. Moreover, we cannot make improvements in the delivery of higher education if we do not understand our weaknesses. Higher education inevitably impacts well-being, even if it is just one factor of many.

4. The questions are not good. These questions have been developed by experts in the area for the Office for National Statistics and have been through significant testing and consultation. They have stood up to international comparison. When this measure was introduced under the Coalition Government, David Cameron accepted the measure would not be perfect:

*Just as the GDP figures don’t give a full story of our economy’s growth, but give us a useful indicator of where we’re heading. So, I believe a new measure won’t give the full story of our nation’s well-being, or our happiness or contentment or the rest of it — of course it won’t — but it could give us a general picture of whether life is improving.*

The best way to make imperfect data better is to collect them, publish them and to have a debate about it, as that allows for contextualisation of the results, to strengthen understanding and improve the data collected in due course.

5. This well-being measure is not the best for understanding well-being. Other measures could be used. One of the most prominent alternative or complementary measures is the Warwick-Edinburgh Mental Well-Being Scale, which asks questions about respondents’ feeling and functioning aspects of mental wellbeing, including questions on optimism about the future and confidence levels. These questions are sometimes seen as more positive than the Office for National Statistics personal well-being questions. However, the Warwick-Edinburgh Mental Well-Being Scale uses 14 questions to rate well-being, which is a big increase on the four of the Office for National Statistics. Data collection is costly and can be burdensome and therefore minimising the impact while still collecting high-quality data is important. The Office for National Statistics estimate the current well-being questions take 1 minute 30 seconds to ask so can be usefully and easily added to existing surveys. We would also lose the existing time series data in this area if we were to change the measure.

**Conclusion**

Consistent, high-quality data on the well-being of the general population have been collected by the Office for National Statistics since early 2011, and this has been copied by a number of other sectors. Given the concerns over student mental health in the higher education sector and the high proportion of students who are at an age when mental ill-health tends first to appear, we have an even greater incentive than others to understand personal well-being better. However, collection of the data in higher education is not currently consistent and there are significant gaps, including on the well-being of staff. We need to understand both staff and student well-being together, as both groups are strengthened by high levels of well-being in the other. If we want to promote and understand higher education beyond a financial transaction, we should be committed to better measuring and understanding well-being.
## Recommendations

1. We should be consistent in our terminology and clearly distinguish between mental health and personal well-being.

2. Rightly much of the focus is on mental health in higher education, but we should also commit to measuring well-being to understand better the broader health of those studying and working at universities.

3. We should do more to collect and publish information on the well-being of staff in higher education institutions.

4. Wherever possible, collection of well-being data should be consistent across the UK and there should be a commitment to collect the data from students, staff, applicants and graduates over a number of years to allow the building of a timeseries. Consistency across the UK allows for comparison in well-being between the different regulatory and funding systems across the four countries. International measurements would similarly allow for comparison between different models of higher education.

5. Data collectors should work together to enable tracking of cohorts, allowing us to track the same cohort of students and staff over time.

## Endnotes


15. HESA, *Definitions: Staff*, available at: https://www.hesa.ac.uk/support/definitions/staff
