

Signposting and Referral

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Signposting and referral are an essential requisite to assist students with the complexities of contemporary academic life. The expansion of higher education, the increased use of online teaching platforms and the challenges Higher Education Institutions (HEI) face in addressing student wellbeing and supporting students through higher education constitute the discussion on signposting and referral imperative. In this short text, we aim to describe what is wellbeing signposting and referral within the higher education context, identify signposting and referral practices, examples used in the sector and make recommendations that we anticipate, and hope will start a discussion within European academic communities on how signposting and referral practices could play a pivotal role on student wellbeing.

What are signposting and referral, and how are they relevant in discussing students' wellbeing and mental health? As signposting and referral, we describe all the processes and mechanisms that Higher Education Institutions utilise to promote wellbeing and support students' needs. Signposting is the process of giving a student a comprehensive description of all the services and links around wellbeing. As signposting, we are not referring to the mere description of all the different services available to a student in an HEI, but the systematic and targeted provision of relevant information to individual students or a larger group of students (e.g. BAME, first-year students, mature students etc.). With the term referral, we describe the mechanisms and processes within an HEI to monitor and refer students to specialist care or provision of information. Signposting and referral might describe two distinct processes in mental health provision, but HEI settings are using the terms interchangeable as both represent the processes of monitoring student wellbeing and intervening when there is a need. The key challenge for successful signposting and referral strategies in students' wellbeing is how easily and timely students have access to the required wellbeing-related information and how HEIs can identify students who might need specific services.

Why are signposting and referral important, and how do they fit the challenges universities face around students' wellbeing? Universities as academic communities, in which knowledge in the form of scientific and scholarly research is created and disseminated, have a long tradition of taking the necessary steps to safeguard the wellbeing of its members. Learning activities thrive in environments that promote wellbeing, and its members feel safe and protected. Empirically driven dynamic signposting and referring mechanisms capable to identify students whose wellbeing needs addressing tend to have a great impact to students and HEIs (Barkham et al., 2019). However, to our knowledge, there is no published research that investigates the effectiveness of the signposting and referral in higher education.

Nevertheless, research in mental health in secondary education students and the general population highlights the importance of signposting and referral (Tegethoff et al., 2014; Onnis et al.,

2020). Furthermore, higher education students' wellbeing measurement and standardised assessment is the topic of contemporary research that will help develop valid and reliable mechanisms for the timely identification of students who could benefit from the referral to appropriate support structures (Dodd et al., 2021). In addition, policy frameworks that prioritise student wellbeing and mental health issues emphasise the importance of wellbeing signposting in HEIs (University Mental Health Charter, n.d.).

Signposting and Referral Practices that Foster Student Wellbeing

Probably the first point of contact for signposting students is the university staff. Both academic and administrative staff in student facing roles in a university are the first points of contact for students in need of support, and they constitute the main referees to in-house student mental health and wellbeing support services. Personal tutors and student services personnel are the members of staff who interact the most with students and tend to have a good overview of the students' wellbeing. Because of the plethora of different services that HEIs offer to support student wellbeing and the social and psychological complexities underpinning student wellbeing, optimal practices for signposting tend to involve toolkits and flowcharts to signpost students to the most appropriate services. Mental Health First Aid training provision to staff who are dealing with students can optimise referral to the most appropriate services (Hadlaczky et al., 2014), although it is not a signpost technique, but a psychoeducation programme on emergency mental health support.

The role of peer support and fellow students in student wellbeing is important. HEIs make an effort to relinquish some of the signposting to peer support mechanisms, which are effective for signposting and the overall student wellbeing (Collings et al., 2014).

Policy frameworks and sector-wide guidelines on the provision of student wellbeing services from HEIs can help standardise signposting and referral mechanisms. For example, the UK initiative of the University Mental Health Charter, which is supported by HEIs, the National Union of Students and the British Psychological Society, can foster the promotion of standardised mental health and wellbeing across provision across different HEIs.

(<https://universitymentalhealthcharter.org.uk/>)

The Universities of Keele and Staffordshire in the UK have partnered up to develop the *Start to Success* programme in which community-based signposting is used to foster student mental health and wellbeing. In addition, the universities will be working with the local communities and agencies to remove barriers to the support they provide to students.

(<https://www.starttosuccess.co.uk/>)

The efficiency of referral mechanisms lies in the ability to capture indicators and markers of student wellbeing. The psychosocial complexities of student wellbeing accentuate an empirically driven mechanism that fosters wellbeing. Indeed the efforts of the HO World Mental Health International

College Student (WMH-ICS) Initiative and the Student Counselling Outcomes Research and Evaluation (SCORE) consortium in the UK are in the direction of developing and promoting tools for student wellbeing screening.

(https://www.hcp.med.harvard.edu/wmh/college_student_survey.php)(<http://www.scoreconsortium.group.shef.ac.uk/>)

Recommendations

1. Clearly provide a point of access for students and staff of all the wellbeing and mental health resources in an HEI and relevant community agencies.
2. Embed student wellbeing and mental health to the curriculum. All courses and modules materials should contain information on wellbeing and signpost students to the relevant services.
3. HEI to work closely with student wellbeing agencies, organisations and providers at the surrounding academic communities to share practices and data surrounding student wellbeing.
4. Intensify the use of peer support groups and structures; train peer-tutors to function as first points of contact for student wellbeing signposting
5. There is a need for empirical research in student wellbeing and mental health signposting and referral in higher education. Support research in the is for the creation of tailored-made health psychology interventions of higher education settings.

References

- Barkham, M., Broglia, E., Dufour, G., Fudge, M., Knowles, L., Percy, A., Turner, A., & Williams, C. (2019). Towards an evidence-base for student wellbeing and mental health: Definitions, developmental transitions and data sets. *Counselling and Psychotherapy Research*, 19(4), 351–357. <https://doi.org/10.1002/capr.12227>
- Collings, R., Swanson, V., & Watkins, R. (2014). The impact of peer mentoring on levels of student wellbeing, integration and retention: a controlled comparative evaluation of residential students in UK higher education. *Higher Education*, 68(6), 927–942. <https://doi.org/10.1007/s10734-014-9752-y>
- Dodd, A. L., Priestley, M., Tyrrell, K., Cygan, S., Newell, C., & Byrom, N. C. (2021). University student wellbeing in the United Kingdom: a scoping review of its conceptualisation and measurement. *Journal of Mental Health*, 1–13.
- Hadlaczky, G., Hökby, S., Mkrtchian, A., Carli, V., & Wasserman, D. (2014). Mental Health First Aid is an effective public health intervention for improving knowledge, attitudes, and behaviour: A meta-analysis. *PLoS ONE*, 9(4), e924910. <https://doi.org/10.1371/journal.pone.0092491>
- Tegethoff, M., Stalujanis, E., Belardi, A., & Meinlschmidt, G. (2014). School Mental Health Services: Signpost for Out-of-School Service Utilization in Adolescents with Mental Disorders? A Nationally Representative United States Cohort. *PLoS ONE*, 9(6), e99675. <https://doi.org/10.1371/journal.pone.0099675>
- Onnis, L., Kinchin, I., Pryce, J., Ennals, P., Petrucci, J., & Tsey, K. (2020). Evaluating the Implementation of a Mental Health Referral Service "Connect to Wellbeing": A Quality Improvement Approach. *Frontiers in Public Health*, 8, 585933