

**A Compassion Development Approach in a Higher
Education Setting –
A Thought Piece**

Supporting A University Staff Community

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Introduction

A clear relationship between performance and wellbeing are well established in the literature. Based on this knowledge, it is clear that many academic organisations are committed to enhance their approach by setting a strategic direction and acting to ensure staff wellbeing is considered seriously.

Compassion is an intention and commitment to be helpful and not harmful to self and others. This is the premise from which all our work at Creating Compassion derives. This thought piece aims to set the context in a Higher Education setting and provide relevant information relating to self-compassion and compassionate leadership development.

Context – The challenges to health and wellbeing of staff in a Higher Education setting

Stress levels experienced by individuals in the workplace are highly prevalent and well documented. There is a growing consensus across the peer reviewed literature that the marketised environment and culture of performativity, as seen across the UK Higher Education sector, has had an increasingly dire impact on the health and wellbeing of staff who work in university settings (Jayman et al., 2022). This is of particular concern when UK wide surveys, such as the one conducted by Wray and Kinman (2021), show that over half of respondents among Higher Education staff are experiencing probable depression.

This challenge has only been exacerbated by the Covid-19 Pandemic, with almost half of respondents in a recent study describing their mental health as “poor” coupled with chronic stress and exhaustion being exacerbated by the entrenched inequalities that exist in the sector for women, those with caring responsibilities, staff from ethnic minorities and those on temporary contracts, who appear at even greater risk of poor mental health (Dougall et al., 2021). As well as a moral imperative, there is a well-established and clear relationship between workplace wellbeing and performance and there is emerging evidence to suggest that staff and student wellbeing are inextricably linked. In fact, staff wellbeing is essential to support the student learning experience (Plakhotnik, M. et al., 2021). Therefore, key questions are now being asked as to how mental wellbeing can be improved for every person employed in the Higher Education sector, who unfortunately appear to suffer to a greater extent than the general population.

If an organisation wishes individuals to be successful, then facilitating emotional wellbeing as much as possible is essential. It is critical that initiatives aimed at improving staff wellbeing are multi-level and systemic in their approach, as this is what is required for optimal effectiveness (Nielsen and Noblet, 2018). Universities are tasked with taking a more strategic approach to instigate changes in the ways in which work is organised. Addressing potential risk factors, and

initiating primary interventions to address these directly, cannot be underestimated and are a crucial first step in eliminating the causes of organisational stress at their source. Secondary interventions, which look to equip staff with knowledge, skills and resources to cope more effectively with stressful conditions, also have a role to play. Systemic solutions universities need to develop include, raising awareness around mental health as well as offering a range of solutions to improve the psychological wellbeing of staff. A more open culture around mental health is critical in the sector to reduce barriers to access initiatives, both formally and informally (Hughes and Spanner, 2019), and universities need to ensure that available tailored support is well communicated as well as confidential, to increase awareness and subsequent take up by staff.

Brewster et al., (2022) argue that to support positive wellbeing outcomes for the whole university community there is a need to proactively and cohesively embed cultural and structural change, including access to training interventions to support staff wellbeing with both compassion and community held as the central tenets of this work. In fact, by shifting towards a change in culture focused on compassion, community, connection and belonging, improved wellbeing may be developed for all (Hughes, 2020). Post-pandemic, it is becoming increasingly clear that the policies, training and culture in the Higher Education sector must emphasise the importance of cultivating compassion and community and take a 'whole university' approach. In fact, organisations which do demonstrate compassion, have been found to be associated with both positive individual and organisational outcomes (Meechan, McCann and Cooper, 2022).

Background to Compassion and Self-Compassion

"Our every interaction every day shapes our world. To the extent that we are present with and pay attention to all those we interact with, understand their challenges, empathise with them, and take action to help them, we create a more compassionate world. To have the capacity and resilience to show compassion to others, we must first practice self-compassion."

Professor Michael West, Lancaster University Management School, 2017

The definition of compassion is to recognise suffering with a desire to alleviate it (Goetz et al., 2010) and to be helpful and not harmful to both self and others (Gilbert, 2019). It is recognised, from a research perspective, that the understanding and practice of self-compassion is critical for individuals to be able to offer authentic and sustainable compassion to others (Gilbert, 2009; Neff, 2011). In fact, it can be stated that, "self-compassion is the foundation of compassion for others," Germer (2009). Self-compassion has been suggested as an approach that may support the health and wellbeing of individuals and enable them to stay well at work (Super, 2019)

Self-compassion is understood as compassion directed inward to the self at times of difficulty, failure, perceived personal inadequacy or general suffering and relating to the self as the object of care and concern. The research on and practice of self-compassion advocates three main components: showing the self kindness as opposed to criticism; recognising our connection to others as opposed to experiencing a sense of isolation; and mindfulness, which relates to noticing how we are feeling in the present moment, without judgement as opposed to over-identifying with emotions and automatically responding (Neff, 2003).

All three components of self-compassion, when delivered together have been shown to increase compassion for others (Jazaieri et al., 2013; Neff and Germer, 2013; Neff and Pommier, 2013) in addition to increased resilience and emotional intelligence (Heffernan et al., 2010; Neff and McGehee, 2010). In fact, self-compassion has been shown to be a protective factor for a wide range of wellbeing indicators (Duarte, 2016) including psychological health. Furthermore, training staff to develop self-compassion leads to greater self-care and emotional resilience (Beaumont and Irons et al., 2016).

Meta-analyses have shown that self-compassion is associated with higher levels of health and wellbeing, particularly psychological health (e.g. Zessin et al., 2015), that it is a robust predictor of stress outcomes and associated with less depression and anxiety (MacBeth and Gumley, 2012) as well as mediating burnout (Barnard and Curry, 2011). Self-compassion is a dynamic skill or mindset that can be developed (Gilbert, 2010; Kanov et al., 2004) at any age, at any stage of life. Systematic literature reviews, considering self-compassion development interventions, have shown potential benefits on a range of psychosocial and wellbeing outcomes in diverse populations (Ferrari et al., 2019; Kirby et al., 2017). A recently published study highlights the benefits of developing self-compassion as a means to improve the mental health of academic staff and found that a brief intervention, designed to develop self-compassion, showed significant improvements in job-satisfaction, work engagement and overall job-related wellbeing (Dreisoerner et al., 2022).

With today's uncertain outlook, further prompted by the ongoing implications of Brexit and pressing global concerns, the age of anxiety appears never ending to many. The immense challenge of operating in the current higher education economy only increases stress and other mental health related issues, which has an impact on everyone, particularly those who are responsible for leading others in their organisation. Compassion is central to the practice of leadership (Georges, 2011) and leadership is recognised as the most important influence on an organisation's culture (West et al., 2014). Compassion, integrity and ethical behaviour are the hallmarks of developed leaders, evidenced by their actions and decisions, particularly in difficult times. Compassionate leaders are attuned to the importance of building relationships through careful listening, understanding, empathising and supporting people so they feel valued, respected and motivated to do their best work (Bosetti and Betts, 2022).

Concluding Remarks and Organisational Support for Engagement:

The data from the Covid-19 Mental Wellbeing and Surveillance Report (GOV.UK, 2022) showed that key workers – those in roles deemed essential in the running of society, such as health and education staff – were more likely to have been adversely affected (Jayman et al., 2022). University leaders have historically been recruited on the basis of their academic pedigree and recognition as exemplary scholars. They are now also being valued for their business acumen, entrepreneurial flair, and ease in engaging with government and community, as well as for their emotional intelligence, charisma and ability to engender trust and commitment to a vision of a preferred future (Bosetti and Betts, 2022).

Whilst it is clear that support at an organisational level is the key to good mental wellbeing, which includes making sure workloads are manageable, staff have autonomy and feel valued and respected, successful interventions must be genuine and not seen as tokenistic or inaccessible. This is especially the case for staff from diverse and minority backgrounds, specifically those who are under-represented at the highest levels of leadership. It is therefore essential that the interventions offered to staff are purposeful, selective and look to build greater levels of confidence and assurance in the self, as well as recognising the additional support required for marginalised groups and under-served communities, based on their experience of working in academic settings. Across the board, the barriers that may exist in regard to take up of and engagement with interventions, relate mainly to inaccessibility, a lack of time, inflexible schedules and a pervading fear of stigma around work-related stress and mental health as well as fear of being perceived as weak or inadequate for seeking assistance, which could be detrimental to their career (Jayman et al., 2022).

Higher Education settings are tasked with creating an open culture around mental health and wellbeing, encouraging staff to seek help (Hughes and Spanner, 2019) and promoting good communication around available support and its confidentiality (Hughes et al., 2018). Furthermore, academic staff show a clear reluctance to speak to their managers regarding their mental health for fear of repercussions, but do value the opportunity to engage with coaching, amongst other services (Wray and Kinman, 2021).

In order to improve wellbeing across the sector, it is argued by Kinman (2014) that any approach offered, provides a creative and equitable strategy rooted in firm research evidence. Ensuring that a proactive approach is offered, and any psychological interventions are fit for purpose, ongoing qualitative and quantitative evaluations of programmes provided to staff are embedded, and where necessary acted upon, as a matter of course.

Offering a range of interventions so that there is a programme to suit any member of staff to improve their mental wellbeing is helpful as a 'one size fits all' approach can create further barriers to access. Providing online programmes with high quality supporting material to

embed learning in day-to-day activities which are fully accessible to staff members and are offered on a confidential basis, will enhance uptake and engagement. It is also important that any programme is designed to be acceptable to a busy working population and are delivered by suitably qualified occupational psychologists, over a pre-determined timescale.

It is important to acknowledge and recognise, that all of us have mental health that requires support, just as we know this to be true of our physical health. An open and honest approach reduces the stigma of mental health and purposefully builds trust, to the point that Higher education staff are able to acknowledge the fact that, at times, we all suffer as human beings and there is no shame in this, thus creating a deeper sense of self-acceptance.

To ensure all academic leaders are healthy and well and that their approach in their role encompasses the benefits of compassion, various interventions could provide the difference that a university is looking to make across the board. Providing programmes in purposefully small groups, preferably from across specialisms, to reduce the silo working that can easily be a feature of organisational life, is beneficial. This ensures psychological safety and the expert facilitator encourages open dialogue and discussion around key issues, such as work life balance, boundary management, compassion fatigue, challenges and obstacles to compassion for self and others as well as a greater understanding of human behaviour and how we, as leaders, can assist. The overall approach can be based on the research evidence that “Leadership is not about being in charge. It is about taking care of those in our charge,” (Sinek, 2021) and from this premise, only beneficial systematic change will occur.

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