**Pilot Study of a Student-led Peer Support Wellbeing Programme**

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**Summary**

Many students find the transition to university life difficult, and often struggle with their mental health and wellbeing during this time. Ulster University have developed several initiatives to help address this transition. For example, several Schools within Ulster University run a scheme called Peer Assisted Study Sessions (PASS) which is student led and aims to aid the first-year transition into higher education whereby higher year students (mentors) facilitate weekly study sessions with lower year students (mentees). The aim of the current study was to design, develop, implement and evaluate a 12-week student-led peer wellbeing programme for first year undergraduate students attending the PASS programme in the School of Psychology, Ulster University (mentees). These sessions focused on enhancing the wellbeing and resilience of students during semester two. Mentors and mentees were surveyed, and the top 12 wellbeing topics were included in the programme. Trained PASS mentors delivered the programme and sessions were evaluated each week by both mentors and mentees. At the end of the programme, focus groups were held with mentors and mentees to gain feedback on the wellbeing programme. Overall, all those involved reported that they had benefited from the programme and recommended that it should be continued. It is hoped that the findings from this pilot study will lead to the wellbeing sessions being rolled out within the university and other institutions.

**Project Background**

Research has revealed elevated levels of mental health problems among university students (Thorley, 2017). Some students commence university with pre-existing psychological conditions, while others may develop disorders for the first time. In 2015, the Ulster University Student Wellbeing Study (UUSWS) found very high levels of suicidal behaviour and mental health disorders among students starting university (McLafferty et al., 2017; O’Neill et al., 2018). For example, almost a quarter of students screened positively for lifetime mood disorder and over a fifth had an anxiety disorder. Furthermore, nearly a fifth had engaged is self-harm or had made a suicide plan and 7.7% had attempted suicide.

PASS was introduced in Ulster University in 2010 by Professor Melanie Giles in the School of Psychology. At present, PASS sessions for the School of Psychology are coordinated by Dr Kelly Norwood and Professor Melanie Giles. PASS is a peer mentoring scheme where trained PASS mentors work in pairs to facilitate weekly study sessions with first year students to ease their transition into university. PASS is primarily academic and first-year students set the agenda for each study session based on their own needs which has included (but not limited to) learning how to navigate the university’s physical space and virtual learning environment, coursework and exam advice, referencing, statistics and research methods guidance and study skills. PASS provides a ‘safe place’ for students to learn and ask questions - PASS mentors share their experiences and facilitate discussions in these confidential, student led sessions.

While many students benefit greatly from these sessions, it was noted that engagement with the programme declined in the second semester. In 2019, Dr Norwood conducted an evaluation with PASS mentors and mentees - both student groups reported that they would welcome a programme which included strategies to enhance their wellbeing, help them develop coping skills and build resilience. Mentors and mentees agreed that semester 1 should focus on academic skills and semester 2 could include material that would enhance their wellbeing. A small, successful feasibility study was conducted during early in semester 2 (2020) and subsequently in Spring 2020, the research team applied to SMaRteN for a grant to enable them to conduct a pilot study in the academic year 2020/2021. The aim of the project was to involve students in the design, development and delivery of wellbeing sessions in semester 2. It was hoped that these sessions would improve student wellbeing and that the wellbeing materials could be delivered successfully by PASS mentors.

**Main objectives of the pilot study:**

The main objectives of this pilot study were to enhance the wellbeing and resilience of undergraduate students at Ulster University through the design, development, implementation, and evaluation of a Wellbeing programme using the infrastructure created by the PASS programme.

Programme design

* Identify topics/themes for inclusion
* Design wellbeing content
* Determine modes of delivery

Programme Development

● Development involved a collaborative approach with staff, Student Wellbeing, mentors and mentees.

Programme Implementation

● This pilot study was implemented over semester 2 (weeks 1-12). For 12 weeks, wellbeing strategies were delivered by peer mentors to first-year mentees. Initially, face-to-face on campus sessions were planned, but due to ongoing COVID-19 restrictions, all sessions were delivered online.

Programme evaluation

* Assess the benefits and shortcomings of the programme from the mentor and mentee perspectives.
* Evaluate mentors and mentees levels of resilience, optimism, mental wellbeing using pre and post-test measures.

**The project deliverable milestones:**

* Obtain ethical approval
* Design wellbeing programme
* Train mentees
* Employ a part-time researcher to conduct the interviews and disseminate the findings
* Deliver the programme
* Evaluate the programme
* Complete research interviews/focus groups
* Complete short surveys
* Analyse research interviews and survey responses
* Write up report

**Ethical approval**

Ethical approval was obtained for the pilot study from the Ulster University School of Psychology Research Ethics Filter Committee in January 2021.

• Informed consent

**Wellbeing session delivery and evaluation:** Potential participants were emailed a participant information sheet (PIS; Appendix 1) and consent form (Appendix 2). Consent was obtained from 32 peer mentors and mentees to take part in the design and evaluation of the wellbeing sessions.

**Focus groups:** Potential participants were emailed the PIS (Appendix 3) and consent form (Appendix 4). Consent was obtained from 7 mentors and 3 mentees which created two focus groups and two one-to-one interviews.

Inclusion criteria

Students were enrolled as PASS mentors or mentees from the School of Psychology, Ulster University.

Exclusion criteria

Participants under the age of 18 were excluded from the study, and those not involved in the PASS programme.

• Participant confidentiality

All data was anonymised, using a unique identification number for each participant. No information disclosed in the focus groups was shared outside the research team and all parties were reminded not to state any self-identifying information during the focus groups. (The only exception to this was if participants disclosed information that was concerned about their safety, or the safety of others). We assured participants that based on the information they provided, that no individual will be identifiable in any future reports and/or publications.

• Withdrawal from study

Wellbeing session and evaluation participants were free to withdraw at any time by contacting the PI without giving a reason. Focus group participants were free to withdraw at any time up to one week post-focus group using the same method.

• Participant safety

Participants were notified during consent that if they disclosed harm to self or others, that there was a duty of care to forward their information onto Student Wellbeing to ensure their safety. If a participant became distressed because of the study, support details were available on the PIS. There were weekly debrief sessions also with mentors, facilitated by an academic member of staff (Dr Kelly Norwood).

• Data storage

Audio recordings and transcripts are confidentially and securely stored with access strictly controlled and audio recordings were destroyed following transcription. Survey data was anonymised and stored on encrypted, and password protected university computers.

**Wellbeing sessions**

To establish the student led wellbeing programme, all students were invited to participate in all parts of the process: design, development, implementation and evaluation of the 12-week programme.

**Design**

Following consultation with students and Student Wellbeing, a list of potential topics were collated in a survey (Appendix 5). Peer mentors and mentees were then surveyed to determine which wellbeing strategies were most important to them, with the 12 highest ranked topics included in the Wellbeing sessions.

The 12 sessions identified were:

1. Managing physical anxiety and stress
2. Relationships
3. Self-care and low mood
4. Life during a pandemic
5. Academic achievement
6. Negative thinking
7. Confidence
8. Managing physical health
9. Consent
10. Disabilities at university
11. Loneliness
12. Mental health matters

The PowerPoint presentations were developed each week by the project team in collaboration with the mentors. Mentors reviewed the material and had the opportunity to provide feedback prior to, and following, each session taking place - presentations were amended on their recommendations. Each presentation included an overview of the topic under discussion, some real-life examples, audio or video components and activities to generate discussion.

**Training of mentors**

Second year students were trained to become PASS mentors before the start of the 2020-2021 academic year. For the current study, PASS mentors were involved in the design, delivery, and evaluation of wellbeing materials. They had been delivering PASS online during semester 1 and had the appropriate technological training. They met with the PASS Academic Lead (Dr Norwood) before semester 2 and then during weekly online debriefing sessions to discuss strengths and improvements for that week’s session and how the wellbeing materials could be improved (e.g. more videos and activities).

**Delivery of the programme**

**Wellbeing Sessions:** Following training, PASS mentors delivered the wellbeing sessions for 12 weeks, during semester 2 (February to May 2021). As part of the ethical process only those mentors and mentees who consented to the wellbeing programme (n=32) were included in the report. Overall, there were 14 mentors and 18 mentees who consented to the current study. Please note, additional mentors and mentees were involved in the wellbeing programme as part of PASS. During recruitment it was made clear that all mentors and mentees could avail of the wellbeing programme and that only data from those who consented to the design, development and evaluation would be included in the reported results.

The groups typically consisted of 2 mentees and approximately 12 mentees (as above, please note that not all students within the groups consented to the current study). All wellbeing sessions were delivered online, and each session lasted approximately 1 hour - this included time for presentation delivery, videos, activities and time for questions and answers. Some groups spent time discussing any academic queries they had - it is worth noting that academic queries did not stop during semester two as some groups answered questions during their sessions and others dealt with these online, during the week. Weekly debrief sessions took place with the PASS mentors and Dr Norwood to gain mentor feedback on the session they had delivered. This information was used to develop the remaining the wellbeing sessions based on student requests and was a constant process during semester two.

**Evaluation**

A mixed-methods approach was used in this pilot study, including pre- and post-session questionnaires, online weekly evaluations and qualitative interviews/focus groups after the 12-week implementation period.

**Questionnaires**

To evaluate any changes on mentors and mentees levels of resilience, optimism, hope, self-efficacy and mental wellbeing a range of pre and post-test questionnaires were administered (Appendix 6):

1. Resilience: Brief Resilience Scale (BRS)
2. Optimism: The Life Orientation Test (LOT) - Revised (LOT-R)
3. Mental Wellbeing: Warwick-Edinburgh Mental Well-Being Scale
4. Depression, anxiety, stress: DASS-21

**The Brief Resilience Scale** (Smith et al, 2008) was scored on a 5-point Likert Scale ranging from 1 (strongly disagree) to 5 (strongly agree). The responses for the six items are added together and then divided by the number of questions answered to give a total resilience score. Higher scores were indicative of higher levels of resilience.

**The Life Orientation Test – Revised (LOT-R)** is a 10-item measure of optimism versus pessimism (Scheier et al, 1994), three items measured optimism (1, 4, 10), three items measured pessimism (3, 7, 9), and four items served as fillers (2, 5, 6, 8). LOT-R was scored on a 4-point Likert scale ranging from 0 (strongly disagree to 4 (strongly agree). The fillers were not scored, and the pessimism items were reverse scored to give an overall optimism score.

**The Warwick-Edinburgh Mental Well-Being Scale** (Tennant et al., 2007) is a 14-item measure of mental health which included positive affect, satisfying interpersonal relationships and positive functioning. It used a 5-point Likert scale ranging from 1 (none of the time) to 5 (all of the time) with higher scores indicative of higher levels of mental wellbeing.

**The DASS-21** (Lovibond & Lovibond, 1995) which consisted of 21 items, measured the emotional states of depression, anxiety and stress (7 items each). It was measured using a 4-point Likert scale; 0 (Did not apply to me at all) 1 (Applied to me to some degree, or some of the time) 2 (Applied to me to a considerable degree or a good part of time) and 3 (Applied to me very much or most of the time). Higher scores are indicative of elevated levels of depression (Qs, 3, 5, 10, 13, 16, 17, 21) anxiety (Qs 2, 4, 7, 9, 15,19,20) or stress (Qs 1, 6, 8, 11, 12, 14, 18).

The online survey was administered using Qualtrics software, with a link emailed to student who consented to take part in the study. The survey data was downloaded and cleaned, coded and analysed by Dr Margaret McLafferty and Dr Kelly Norwood.

**Weekly evaluations**

Following weekly sessions, a link to an online evaluation was emailed to mentors and mentees (Appendix 7). The evaluation considered the usefulness of the materials (if they felt the sessions helped them and what was most useful) and made recommendations for improvement during the implementation phase and if they would recommend the sessions to a friend. The feedback and recommendations from the evaluations and debrief sessions were incorporated into the sessions for the following weeks.

**Qualitative Interviews/focus groups:**

Focus group and interviews asked mentors and mentees about the usefulness of the wellbeing materials, ease of delivery (mentors only), strengths and drawbacks and future improvements for the wellbeing programme (see appendix 8 and 9). The focus group moderator, Dr Emma Walker, had prior experience of facilitating focus group discussions. Dr Walker was employed to conduct this research and was independent of the staff team involved in the implementation of this pilot study. Focus group were conducted via Microsoft Teams, were audio recorded and transcribed.

**Data Analysis**

Data collected from interviews and focus groups were analysed using Thematic Analysis, described by Braun and Clarke (2006, p. 6) as ‘a method for identifying, analysing and reporting patterns within data’. Thematic analysis adopted a realist method, reporting the experiences, meanings and reality of participants. Transcripts were read several times and initial codes were generated. Once codes were developed, they were sorted into potential themes creating an initial thematic map. Further refinement of themes then took place to ensure greater external heterogeneity between themes. Potentially identifying information was removed from quotes to maintain participant anonymity. Qualitative research focused on the individual’s experience, meaning and reality and as such, objective measurement is not the goal (Payne et al. 2012).

**Findings:**

A mixed methods approach was used to evaluate the programme; weekly evaluations, pre and post session questionnaires and focus groups.

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# Weekly evaluations of the well-being Programme

Mentees reported a high level of satisfaction with the weekly wellbeing sessions as illustrated by the post-session evaluation scores displayed in Table 1. When asked what they [PASS mentees] found most useful about the sessions, participants described the sessions as ‘important’, ‘uplifting’, ‘comprehensive’, ‘challenging’ and relevant to both their studies and their lives outside university, as well as increasing their knowledge and awareness of mental health and well-being issues.

**Table 1**: Weekly evaluations - Mean scores on wellbeing sessions

|  |  |  |  |
| --- | --- | --- | --- |
| **Wellbeing session** | **Mean ‘helpfulness’ score[[1]](#footnote-1)** | **What was useful?** | **Suggested Improvements** |
| Managing physical anxiety and stress | 7 | Action plans  Learning practical techniques | More activities  Keep interaction  Online not ideal |
| Relationships | 7 | How to manage conflict  Tips for making friends  Contact details for services | Ensuring material is applicable to students of all ages, including mature students |
| Self-care and low mood | 8 | Sleep hygiene  Practicing self-care  Relevance of topic  Tips – real life examples | Some material “shallow” (re getting nails done) – may not be a preferred self-care approach for all. |
| Life during a pandemic | 8 | ‘Bitesize’ Tips  Personal experiences  Five Steps to Wellbeing | More activities and discussion |
| Academic achievement | 8 | Advantages to remote learning and positivity.  Tips for academic success | Less repetition  More reflective content |
| Negative thinking | 8 | Ways to change and control negative thinking  Using CBT techniques | Presentation too long  Some information triggering |
| Confidence | 9 | Importance of being oneself  Positive affirmations | None |
| Managing physical health | 8 | Variety of topics covered  Physical health guidelines  Comprehensive | None |
| Sexual consent | 9 | Raised awareness  Clear, balanced message  Misguided truths | Advance sensitivity warnings re session content  (NB: This was advised) |
| Disabilities at university | 9 | Hidden disabilities  Real-life stories  How to provide support | Less rigid adherence to PPT slides |
| Loneliness | 9 | Tips and activities to manage loneliness  De-stigmatizing loneliness | Inclusion of chronic illness when discussing loneliness |
| Mental health | 9 | Relevance to current life  Talking and listening to each other  Warning signs | None |

0 – not at all helpful – 10 definitely helpful

Although the mean scores for each weekly session did not differ significantly across the 12-week period, as the semester progressed, the mean scores increased slightly suggesting that after a ‘bedding-in’ period, participants engaged more with the wellbeing sessions and benefited from having participated in the process. Most participants also said that they would recommend the sessions to a friend.

**Focus Group and Interview Findings**

The inclusion of the wellbeing sessions engendered a culture of reciprocity between mentors and mentees by providing a safe space for students to ‘open up’ and share ideas and personal stories around mental health and wellbeing themes, further complementing student learning and growth. The main objective of the evaluation was to assess the benefits and areas for improvement of the wellbeing programme. There were three main themes each of which had a series of related sub-themes (Table 2).

***Table 2: Summary of Themes and Sub-Themes***

|  |  |
| --- | --- |
| Themes | Sub-themes |
| 1. Benefits for mentors | Self-efficacy  Skills  Wellbeing |
| 1. Benefits for mentees | Peer support  Wellbeing |
| 1. Barriers and future improvements | Interaction  Attendance  Online vs Face-to-Face Sessions  Wellbeing content |

**Theme 1: Benefits for Mentors**

Despite the challenges of adjusting to an online learning environment and studying during a global pandemic, there was a strong sense across all participants of the value and worth of the wellbeing programme, with one mentor saying,

*“I think it’s priceless really. The idea of it, you can’t overestimate it.”* (PASS mentor)

**Self-efficacy**

The benefits of participating in the wellbeing programme were agreed by mentors. Mentors had several roles during this time, for example, they encouraged mentee participation and engagement, delivered the wellbeing content and offered academic support - all of which increased their sense of self-efficacy.

*“It has helped me learn, it was a learning curve…I remember the first two times me and X did it together* [led a wellbeing session] *and it was clumsy, and it was nervous but by the end of it we just became so comfortable with what we were doing, we were sad to see it end.”* (Mentor)

Mentors reported that running the sessions increased their confidence and increased their sense of accomplishment as they provided academic and wellbeing support for their mentees.

*“It’s been a great journey in the sense for me when I started university it was really intimidating, and my PASS group helped me… “So when you’re able to actually make their [mentees’] journey easier with the knowledge that you’ve gathered, it’s really reassuring, it’s a really great feel good factor at this time when we’re struggling so much with the pandemic.”* (Mentor)

Mentors expressed that the responsibility of running the wellbeing sessions increased their self-efficacy by challenging them – it was a new experience and encouraged them to move out of their ‘comfort zone’. There was acknowledgement that the mentors had grown both academically and personally.

*“It* [wellbeing sessions] *gives you responsibilities and makes you want to do things and organise yourself. You can’t grow without doing things that challenge you.”* (Mentor)

*“In school I never did anything but in uni, this* [PASS] *was an opportunity for me to do more things and get out of my comfort zone cos in psychology you do have that public speaking and I just knew PASS would be a good thing for all that.”* (Mentor)

**Skills**

All mentors reported that being a PASS leader and facilitating the wellbeing programme had a positive impact on their existing skillset and personal growth. Many felt that they had become more organised, they had enhanced communication skills and increased problem-solving skills. Importantly, mentors felt that the wellbeing sessions helped and improved their wellbeing also.

*“I had a few job interviews to go to and I just felt more confident in myself in comparison to doing job interviews prior to starting PASS and taking part in the wellbeing programme.”* (Mentor)

*“It* [PASS] *helped me consolidate what we did in first year, when I get asked questions, I have to go back to my notes from first year. So now I understand things better because I have explained them.”* (Mentor)

Mentors believed that leading the wellbeing programme increased their skills including exercising the ability to problem solve, think, listen and understand.

*“I can now think broadly and listen to other people’s views and trying to make sense of it and trying to pull all the ideas together into a unified idea. I think the wellbeing sessions has given me a broader knowledge to look at things holistically.”* (Mentor)

*“I felt like they* [mentees] *were too shy to speak on the mic or put the camera on. I didn’t want to pressurise them so we found Whiteboard and asked questions and they’d respond if they want to chat and they really engaged with that I think.”* (Mentor)

All mentors noted that the wellbeing sessions taught them to communicate more effectively and think about word choices used when delivering the wellbeing sessions.

*“It* [wellbeing sessions] *has helped me learn to talk better and more consciously to other people and be confident enough in what you think. I’ve also helped myself on my degree because when it comes to presentations and things like that, I can speak in a concise manner. So it’s a skill I can take anywhere now. It’s a real transferable skill.”* (Mentor)

**Wellbeing**

Mentors agreed that the wellbeing content helped them on a personal level also in both the delivery of the materials and the presentations which taught them how to better manage wellbeing issues that they were dealing with.

*“It’s confidence… I have anxiety and I’ve found that the wellbeing materials has just opened me up so much. I’m able to talk to people a lot more… I just feel more confident in myself and I found that once I start talking I don’t shut up, whereas before I was just quiet in the corner.”* (Mentor)

**Theme 2: Benefits for Mentees**

PASS is focused on creating a “safe, friendly place to help students adjust to university life” (Capstick, Fleming and Hurne, 2004, p.2). Participants described valuing peer mentorship in easing their transition into university life, especially during the global pandemic. All mentees reported that attending PASS and the wellbeing sessions was of great value especially in terms of gaining tailored practical help with their academic studies and receiving the wellbeing material in semester two, alongside general wellbeing advice. Both mentors and mentees felt that PASS gave them a safe space to discuss their studies and wellbeing without feeling ‘silly’ or ‘stupid’.

**Peer Support**

Mentees agreed that receiving peer learning and wellbeing support from their mentors had a beneficial impact on their studies and wellbeing. It was clear that the mentors used time outside of their wellbeing sessions to support their mentees which was recognised and appreciated by the mentees.

*“It would be the mentoring side from the Leaders, helping us, getting us to engage with them. Our PASS leader, it wouldn’t matter what time of the day, you would have messaged, and she was there on hand, giving us tips, so definitely the mentoring side is a real strength.”* (Mentee)

Peer support worked in both directions – the mentees found their mentors a source of reassurance and familiarity, with a few groups feeling like they had developed friendships. Interestingly, these were reciprocal relationships as some mentors expressed that when a wellbeing topic wasn’t too relevant to their mentee group they still attended and engaged due to respect for their mentors.

*“I think they’re nearly like a comfort blanket. We have that support from someone who has come up through the year before us. I think the relationship was built over them weeks of how she helped us and how well she did it.”* (Mentee)

*“I think there was an element of trying to be supportive because we did develop a little relationship. I think even if the particular topic maybe did not seem relevant to them, they still tried to be there at least that’s my impression.”* (Mentor)

The value of the mentors was spoken about in terms of their ‘perspective’. All mentees referred to their PASS Leader as being a valuable source of advice and support. This happened through the passing on of knowledge and having an understanding of the mentees’ first year experience because ‘they had been there’.

*“Even though they were second year psychology, it’s the fact that they knew what we were going through, which I liked. They had the modules that we had, and they knew the kinda things that we had to do so that was real nice.” (Mentee)*

Mentors also understood the importance of having a student-centred understanding of the first-year experience in terms of their approachability.

*“We have been there last year, so they ask us ‘how did you guys do that?’ and I’m like, we have memories of it because we did it last year so we’re approachable to them* [mentees]*.”* (Mentor)

**Wellbeing**

Both mentors and mentees had a shared purpose in trying to adapt to a new way of living and studying through a global pandemic which provided an opportunity for reciprocal wellbeing support. The existence of the small study groups provided mentors and mentees a forum to open up and discuss wellbeing and resilience together in a safe place.

*“I found whenever they gave personal examples I could relate to, that’s what got our discussions flowing. Negative thinking for example…I’m very good at that, so whenever it was mentioned a lot of us came forward and said ‘oh I’m a negative thinker too, but I try and do this and this’ and they all shared their ideas and how they approach negative thinking, which I thought was good.”* (Mentor)

It was shared that good wellbeing discussions began when one person could start by describing something that they had experienced, or someone close to them, and the group would join in and talk together.

*“Whenever someone got a little spark, it would bring out their own experience or somebody close to them. It was very visible that once one person would start talking then others will start opening up more.”* (Mentor)

All mentees discussed the usefulness of the wellbeing sessions as it normalised their concerns and feelings and increased their coping mechanisms. Mentees expressed appreciation for the advice in the wellbeing sessions on how to cope with feelings and thoughts as there was recognition that these thoughts were normal and many people were experiencing them, or had experienced, and provided them with tools to cope.

*“I think there were very useful little tips that made you feel normal if you were going through any of these things. It normalised it a little and I felt it certainly allows you to feel like, it is normal and there are ways to deal with it.”* (Mentee)

At the end of each wellbeing session contact details (e.g., telephone and email) were provided for organisations both within (e.g., Student Wellbeing) and outside (e.g., Samaritans) of the university. It was hoped that if mentees did not feel comfortable talking about any issues during the sessions, they could avail of additional help. Mentees stated that they found these helpful and appreciated the additional information for further wellbeing help and advice.

*“Every session had lots of people to contact at the end and that was good”* (Mentee)

**Barriers and Future Improvements**

Overall, mentors and mentees response to the wellbeing sessions was positive – as this was a pilot study, barriers to effective wellbeing sessions and suggestions for future improvement was sought. Barriers included interaction and attendance, and future improvements considered online versus face-to-face sessions and adjustments to wellbeing content.

**Interaction**

Mentors and mentees described challenges with the online format as both discussed reduced interaction and participation during some wellbeing sessions. For some mentors delivering PowerPoint wellbeing sessions was a new experience and some felt that they may have benefited from a training session. They also reported that they experienced some difficulties when trying to engage with their mentees and encourage group discussion.

*“Because of the pandemic and all, it was difficult online, it would have been better in person…very awkward at times trying to get them to speak and engage”* (Mentor)

Mentees felt that it was the responsibility of the mentors to start and facilitate group discussions during the sessions to encourage interaction. It was suggested that the mentors could have had training to promote interaction.

*“Maybe if there was more interactivity. The younger ones [mentees] just won’t speak. They will not speak. They [Leaders] need to get the communication going and make them feel like they’re contributing rather than just being spoken to.”* (Mentee)

**Attendance**

Mentors reported that some sessions contributed to them feeling frustrated due to reduced attendance. At times, mentees did not attend a session and left the mentors feeling discouraged as they had prepared prior to the session.

*“Sometimes we had sessions where no-one turned up… it was annoying because we have to go through the slides and get prepared and no-one would show up.”* (Mentor)

Mentees expressed that timetabling and communication problems contributed to them feeling disengaged with their wellbeing sessions. It was felt that a consistent time for the wellbeing sessions and increased communication may have improved attendance and engagement.

*“I found it changed from the Monday to the Thursday because of their [Leaders’] timetable. There was no way I was getting to them so after that I didn’t get to many. And just the communication, there are some lags. There was no forward communication.”* (Mentee)

**Online vs Face-to-Face Session**

When asked about future improvements for the wellbeing programme mentors and mentees both highlighted advantages and disadvantages with online sessions and suggested that a model which accommodated online, and face-to-face sessions should be developed to accommodate those wishing to meet face-to-face and online. It was agreed that the use of social media platforms such as WhatsApp and Facebook Messenger were extremely beneficial and should be available for all PASS groups.

*“I would prefer to meet rather than this online business because I prefer the personal face-to-face interaction and getting to know someone.”* (Mentee)

*“I think there are certain advantages of doing it online. People who perhaps wouldn’t have a chance to come over to the university for those sessions did join and even maybe they did not engage much, there’s the chance that they did hear something that might have made a difference. So some sort of an online aspect of it I think should remain for the future and would be an advantage of some sort.”* (Mentor)

**Wellbeing content**

One mentee felt that the wellbeing materials did not consider those students with specific learning difficulties such as dyslexia.

*“Some of the slides had a lot of information put onto them so it was hard to read so I drifted at bit. It was hard to follow and I lost concentration halfway through it. It could be just me, but that was my thought about it.”* (Mentee)

Some mentees reported that the wellbeing sessions could have included more coping strategies to help with wellbeing issues that they had or were experiencing.

*“There was no…how can you put a practical side into well-being sessions unless there were maybe a few strategies, breathing or sleeping and stuff but they can’t go into great depth because they [Leaders] haven’t been trained in that. But yeah, there was a lack of practical help in the well-being side of things.”* (Mentee)

**Pre-session and post-session questionnaire data**

In the current study, 16 participants completed the pre-session survey, at the start of the semester, with 11 completing the post-session survey (8 fully completed), at the end of the semester, when all the wellbeing sessions had been delivered. Questionnaires included:

1. Resilience: Brief Resilience Scale (BRS)
2. Optimism: The Life Orientation Test (LOT) - Revised (LOT-R)
3. Mental Wellbeing: Warwick-Edinburgh Mental Well-Being Scale
4. Depression, anxiety, stress: DASS-21

**Pre-session**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **N** | **Minimum** | **Maximum** | **Mean** | **Std. Deviation** |
| Resilience | 16 | 13.50 | 17.33 | 16.0521 | 1.23035 |
| Optimism | 16 | 2.00 | 22.00 | 11.1250 | 5.11045 |
| Mental Wellbeing | 16 | 32.00 | 67.00 | 47.4375 | 10.60798 |
| Depression | 16 | .00 | 10.00 | 5.5000 | 3.28634 |
| Anxiety | 16 | .00 | 19.00 | 6.6875 | 5.40023 |
| Stress | 16 | .00 | 14.00 | 7.6250 | 4.19325 |

**Post-session**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **N** | **Minimum** | **Maximum** | **Mean** | **Std. Deviation** |
| Resilience | 11 | 13.50 | 25.83 | 17.6667 | 3.76976 |
| Optimism | 8 | 7.00 | 18.00 | 13.8750 | 4.05101 |
| Mental Wellbeing | 8 | 41.00 | 66.00 | 52.0000 | 9.56183 |
| Depression | 8 | .00 | 4.00 | 1.7500 | 1.75255 |
| Anxiety | 8 | .00 | 9.00 | 3.7500 | 2.96407 |
| Stress | 8 | 1.00 | 10.00 | 5.2500 | 3.01188 |

The study revealed that from baseline to follow up, levels of resilience increased slightly, as did levels of optimism and overall mental wellbeing. Levels of depression decreased substantially as did levels of anxiety and stress. However, it is difficult to determine how much of this could be attributed to the wellbeing sessions. It must be remembered that when students took the questionnaires at the start of semester 2, a new lockdown has just been imposed which may have impacted on their overall mental health and wellbeing. Furthermore, only 8 participants fully completed the follow up survey and due to the anonymous nature of the study we were not able to link the data at this time.

**Attendance**

For those mentors and mentees who had consented to the current study attendance was monitored via the PASS process. Over the past 3 years a significant reduction in attendance during semester 2, as compared with semester 1 was noted (exact data cannot be published for ethical reasons). During this study PASS attendance in semester 2 was similar to that of semester 1 which demonstrated that attendance did not reduce and was importantly maintained during the wellbeing sessions.

**Next steps**

One of the main aspirations of the team was to examine if the wellbeing programme was found to be beneficial to students, following that it was hoped that it could be embedded within the curriculum. We also hoped that by sharing our findings we will encourage other universities to undertake such a wellbeing course to help address the needs of their students.

The project team plan to publish the findings of the pilot study in an academic journal and plans are in place to disseminate the findings at conferences. Student representatives will also help disseminate the findings of the study.

**Conclusions**

This project was a student-led initiative, designed by students, for students. Engaging students in all aspects of the study has enhanced the project greatly. Helping students learn wellbeing skills early in their time at university may address issues before they exacerbate. Furthermore, it may help academic performance and retention rates and reduce the stigma around mental health issues. Prior research has found that student led peer wellbeing programmes can be very beneficial in the university setting for both mentees and mentors (Bryom, 2018; Crisp et al., 2020; Suresh et al, 2021). This was also the case in this pilot study, and it is hoped that these findings will encourage others to embark on such a programme to enhance the wellbeing of students in higher education.

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**Acknowledgements**

The project team would like to thank all the student mentors and mentees who participated in the study and Dr Emma Walker for overseeing the qualitative aspect of the study. A special word of thanks to Dr Rachel McHugh, Ulster University for her help and support with the materials for the study. Thanks also to Student Wellbeing for their support and expertise in the development of the programme.

**Funders**

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**Appendix 1**

**Participant Information sheet for pilot study**

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**Pilot Study of a Student-led Peer Support Wellbeing Programme**

**What is the purpose of the study?**

You are invited to participate in a pilot study aimed at enhancing your wellbeing as a first-year student. Ulster University have introduced a new student-centred wellbeing strategy which aims to reach students across the University. A range of materials have been designed and you can choose which ones are important to you. This project will work with Student Wellbeing to deliver these materials within the PASS scheme.

**Who is conducting the study?**

The study is being conducted by myself andstaff from the School of Psychology and Biomedical Sciences at Ulster University.

**Who can take part in the study?**

You are invited to take part if you:

● Are over 18

● Are enrolled as a Psychology student

**What will I be asked to do?**

You will be asked to complete a short survey indicating your top 12 wellbeing themes this semester. During week 1 and week 12 of the second semester you will be asked to complete four short questionnaires measuring your levels of resilience, optimism, hope, self-efficacy and mental wellbeing via Qualtrics. You will also be asked to attend your PASS sessions during semester two to engage with the weekly wellbeing themes delivered by your PASS leaders. Attendance is taken during your PASS sessions in semesters 1 and 2, and attendance will be monitored in semester 2 for programme engagement.

**Do I have to take part?**

Your participation in this study is entirely voluntary. You can decline to take part and your attendance with PASS will not be affected in any way. You will still be able to access the wellbeing materials during your PASS sessions, as normal.

**How do I withdraw from the study?**

If you decide to take part, but later wish to withdraw, please email myself using the address below. Please note, that as the week 1 and week 12 surveys will be completed on Qualtrics and no identifying information is recorded, it will not be possible to withdraw your survey data after it has been submitted.

**Are there any risks involved in participation?**

Your non-participation or withdrawal will have no impact on your PASS attendance or access to the wellbeing materials. We understand that some students may not want to avail of the current study. If you are concerned about your own wellbeing please contact Student Wellbeing (details at the end of this sheet).

**What will happen to the information collected during this study?**

No identifying information will be collected or recorded during survey completion therefore it will be anonymous. Your attendance will be collected and monitored for engagement statistics only – no identifying information will be published. Data from this study will be published in a report and in academic journals. All information from the study will be stored securely in the School of Psychology, Ulster University for 10 years and kept in accordance with the GDPR and the Data Protection Act 2018 (we have provided a separate information sheet for you which details how Ulster University will look after your personal information).

If you have any questions about the study, please contact me or Kelly (Dr Kelly Norwood) via email:

Dr Margaret McLafferty: [m.mclafferty@ulster.ac.uk](mailto:m.mclafferty@ulster.ac.uk)

Dr Kelly Norwood: [k.norwood@ulster.ac.uk](mailto:k.norwood@ulster.ac.uk)

**Would you like to talk to someone about problems you are experiencing? Please consider using the support information below (Student Wellbeing at Ulster University).**

**It’s ok not to feel ok**

**Student Wellbeing**

● **Phone: 02895367000**

● **Email:** [**studentwellbeing@ulster.ac.uk**](mailto:studentwellbeing@ulster.ac.uk)

**24 Hour Helplines**

● **Lifeline: 0808 808 8000**

● **Inspire: 0800 028 5510**

**Appendix 2**

**Consent form for pilot study**

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**Pilot Study of a Student-led Peer Support Wellbeing Programme**

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***Please tick the box for consent***

|  |  |
| --- | --- |
| I confirm that I am over 18 years old. |  |
| I confirm that I am a Psychology student at Ulster University. |  |
| I confirm that I have read the participant information for this study. |  |
| I understand that if I disclose potential harm to myself, or others, there is a duty of care for my details to be passed onto Dr Kelly Norwood and Student Wellbeing. |  |
| I consent for my attendance to taken and monitored for programme engagement |  |
| I understand that my participation is voluntary and that I am free to withdraw at any time without giving reason and without my rights being affected in any way. |  |
| I understand that the researchers will hold all information and data collected securely and in confidence and that all efforts to ensure that I cannot be identified as a participant in the study. |  |
| I understand that Ulster University will retain my data for 10 years after the study has ended. |  |

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**Name of participant Signature Date**

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**Name of researcher Signature Date**

**Appendix 3**

**Participant Information Sheet for Focus Groups**

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**Pilot Study of a Student-led Peer Support Wellbeing Programme**

**What is the purpose of the study?**

We would like to understand your thoughts and opinions on the Student Wellbeing programme that you have just completed during semester 2. We would like to understand your thoughts on the how useful the wellbeing materials were – did they help you during the semester? We would also like to identify any strengths and weaknesses of the pilot scheme and hear your thoughts on any recommendations you can suggest. We need approximately 24 students for the focus groups, and recruitment will be made on a first come, first serve basis.

**Who is conducting the study?**

The study is being conducted by myself andstaff from the School of Psychology and Biomedical Sciences at Ulster University. The focus groups will be conducted by a Researcher who is independent of the study.

**Who can take part in the study?**

You are invited to take part if you:

● Are over 18

● Are enrolled as first-year Psychology student or PASS leader

● Took part in the student-led peer support programme

**What will I be asked to do?**

If you agree to take part, you will be invited to take part in a small focus group discussion comprised of approximately 8 fellow students. This will take place in the School of Psychology at UUC or online via Blackboard Collaborate Ultra. The discussion will focus on your views and thoughts about the strengths, weaknesses and possible improvements for the wellbeing programme. Discussions will be audio recorded and the recording will be transcribed into a written account for analysis of qualitative themes and sub-themes.

**Do I have to take part?**

Your participation in this study is entirely voluntary and you are under no obligation to take part. If you decide to take part, you are free to decline to answer any questions without giving a reason.

**How do I withdraw from the study?**

If you decide to take part, but later wish to withdraw, please email myself using the address below and quote your Participant ID (located at the top left-hand corner of this form). Please note, that withdrawal will be possible for 1-week following focus group discussions. All attempts will be made to remove your data from focus groups discussions.

**Are there any risks involved in participation?**

Your non-participation or withdrawal will have no impact on your studies. We understand that some students may not want to avail of the current study. If you are concerned about your own wellbeing please contact Student Wellbeing (details at the end of this sheet).

**What will happen to the information collected during this study?**

All identifiers will be removed during transcription and the published results will be anonymous. Data from this study will be published in a report and in academic journals. All information from the study will be stored securely in the School of Psychology, Ulster University for 10 years and kept in accordance with the GDPR and the Data Protection Act 2018 (we have provided a separate information sheet for you which details how Ulster University will look after your personal information).

If you have any questions about the study, please contact me (Dr Kelly Norwood) via email: [k.norwood@ulster.ac.uk](mailto:k.norwood@ulster.ac.uk)

**Would you like to talk to someone about problems you are experiencing? Please consider using the support information below (Student Wellbeing at Ulster University).**

**It’s ok not to feel ok**

**Student Wellbeing**

● **Phone: 02895367000**

● **Email:** [**studentwellbeing@ulster.ac.uk**](mailto:studentwellbeing@ulster.ac.uk)

**24 Hour Helplines**

● **Lifeline: 0808 808 8000**

● **Inspire: 0800 028 5510**

**Compliance with GDPR and the Data Protection Act 2018**

Ulster University is the sponsor or managing organisation for this study and we will use information gathered from you and/or your record in order to carry it out.

We will act as the data controller, which means that we are responsible for looking after your information and using it properly, as stipulated in GDPR and the Data Protection Act 2018.

Ulster University will keep identifiable information about you for 10 years after the study has finished, until 2030.

You can find out more about how we look after your information at:

<https://www.ulster.ac.uk/about/governance/compliance/gdpr>

As a University we use personal identifying information to conduct research to review and improve people’s health, wellbeing and care, the services they use and our understanding of the world in which we live. As a publicly funded organisation, we have to ensure that it is in the public interest when we use identifying information from people who have agreed to take part in research. This means that when you agree to take part in a study, we will use your data to conduct the research and analyse the information and findings.

We need to manage your information in specific ways in order for the research to be reliable and accurate and therefore your rights to access, change or move your information are limited.

You should note that if you withdraw from the study, we will keep the information about you that we have already obtained. To safeguard your rights, we will use the minimum personal identifying information possible.

Health, care and other human research should serve the public interest, which means that we have to demonstrate that our research serves the interests of society as a whole. We do this by following University and appropriate UK policies and codes of practice.

The only people in the University who will have access to your personal identifying information will be those who need to contact you for the study or to carry out audits of the research.

If you wish to raise a complaint on how we have handled your personal data, you can contact our Data Protection Officer who will investigate the matter. If you are not satisfied with our response or believe we are processing your personal data in a way that is not lawful you can complain to the Information Commissioner’s Office (ICO).

Our Data Protection Officer is Eamon Mullan; you can contact him at [e.mullan@ulster.ac.uk](mailto:e.mullan@ulster.ac.uk).

**Appendix 4**

**Consent Form Focus Groups **

**Pilot Study of a Student-led Peer Support Wellbeing Programme**

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***Please tick the box for consent***

|  |  |
| --- | --- |
| I confirm that I am over 18 years old and a Psychology student at Ulster University. |  |
| I confirm that I have read the participant information for this study, I understand the study and have had the opportunity to ask questions. |  |
| I understand that I can choose not to answer any questions if I feel uncomfortable. |  |
| I understand that if I disclose potential harm to myself, or others, there is a duty of care for my details to be passed onto Dr Kelly Norwood and Student Wellbeing. |  |
| I understand that my participation is voluntary and that I am free to withdraw at any time during the focus group without giving a reason, and up to 1-week following the focus group, without my rights being affected in any way. |  |
| I understand that the researchers will hold all information and data collected securely at Ulster University for 10 years after completion of the study and that all efforts will be made to ensure that I cannot be identified as a participant in the study. |  |
| I agree to audio recording of the focus group. |  |

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**Name of participant Signature Date**

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**Name of researcher Signature Date**

**Appendix 5 Wellbeing Themes**

**Semester Two - Have your say!**

**Pilot Study of a Student-led Peer Support Wellbeing Programme** is a new initiative being piloted in semester 2 during your PASS sessions – you can choose the top 12 wellbeing themes that are important to you. Your PASS leaders will be trained by Student Wellbeing to run the sessions and as first-year students you can co-design this initiative! We will deliver the most popular 12 wellbeing themes as chosen by you. If there is a wellbeing topic that you would like to see included, please provide details of this at the end of the survey (Pg.3).

Please rank your top 12 choices in order of importance to you with 1 being your most preferred theme – 12 being your least preferred theme. Place the corresponding number in the column labelled ‘Rank (1-12)’.

|  |  |  |
| --- | --- | --- |
| **Wellbeing Theme** | **Description** | **Rank**  **(1-12)** |
| **Relationships** | Transition to university, changes in relationships, making new connections, building a social life, staying safe on-line, dealing with rejection, appropriate boundaries. |  |
| **Living away from home** | Finding accommodation, moving house, sharing with others, cooking, budgeting, dealing with difficult situations in shared living. |  |
| **Academic achievement** | Understanding rules of course, what is expected, staying motivated, procrastination, perfectionism, fear of failure. |  |
| **Consent** | Healthy relationships, sexual decision making, sexual misconduct. |  |
| **Disabled at university** | Valuing diversity, being neuro-diverse, mental health issues, accessibility challenges. |  |
| **LGBTQ+ at university** | Valuing diversity, access to services, gender and sexual orientation understanding, making connections, mental health issues. |  |
| **BAME at university** | Valuing diversity, access to services, making connections, mental health issues, cultural needs. |  |
| **Loneliness/isolation** | Being alone, peace, resilience, independence, feeling left out, problems connecting with others, being away from loved ones. |  |
| **Mental health matters** | Long term MH conditions, getting support, feeling safe, overcoming/coping with difficult experiences. |  |
| **Managing anxiety and stress** | Understanding the physical symptoms of anxiety, the fight or flight response, facing your fears, mindfulness and breathing techniques. |  |
| **Negative thoughts and over-thinking** | Challenging negative thinking, what is in our control/out of our control, learning thought techniques. |  |
| **Self-esteem and self-talk** | How self-esteem is established, examining how we talk to our self, improving low self-esteem, positive affirmations. |  |
| **Low mood and self-care** | Behaviour, sleep tips, structure and routine, me time and self-care, goal setting. |  |
| **Life during a pandemic** | Living at home (both positives and negatives), studying remotely, staying in touch, communication systems between students and academics, types of support available. |  |
| **Managing physical health conditions** | Looking after your physical health e.g. diet & alcohol use, setting limits, chronic physical health conditions and 'invisible' illnesses, the relationship between physical and mental health, what support is available at UU if you have a long-term health condition. |  |

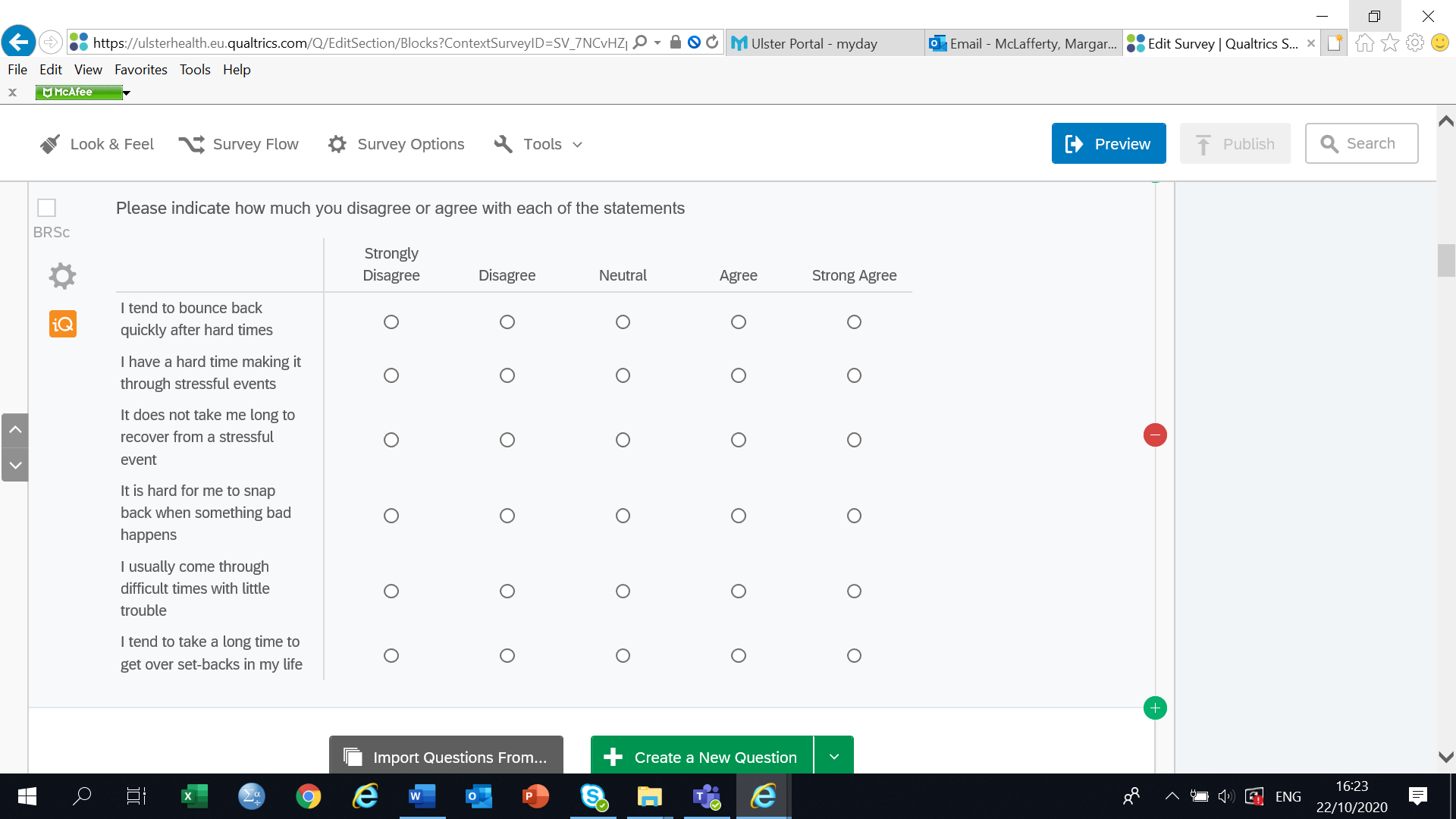
**Please feel free to suggest any additional wellbeing themes that are not included above!**

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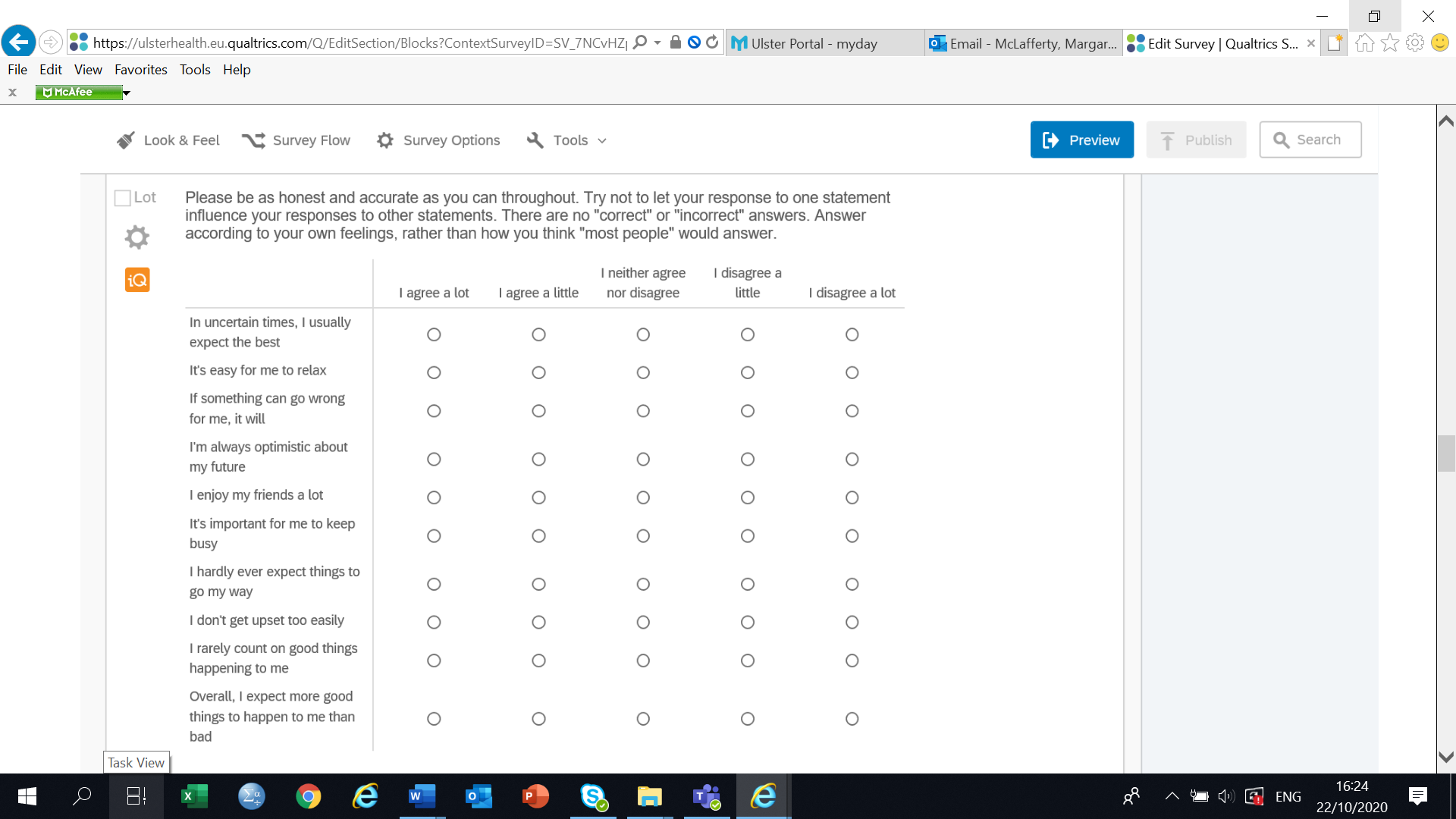
**Appendix 6**

**Online Pre- and Post Questionnaires.**

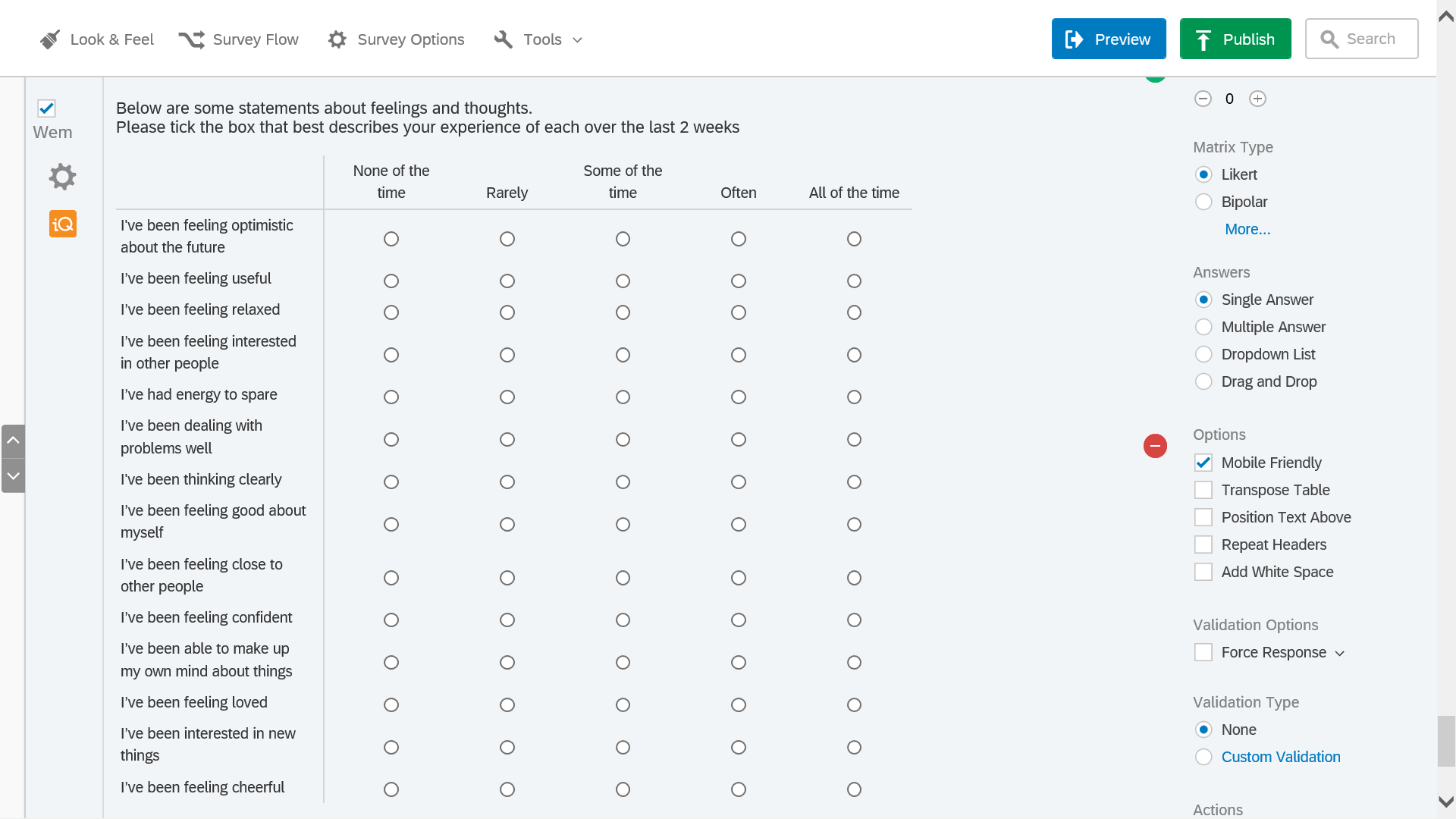
**Brief Resilience Scale**



**The Life Orientation Test (LOT) - Revised (LOT-R)**

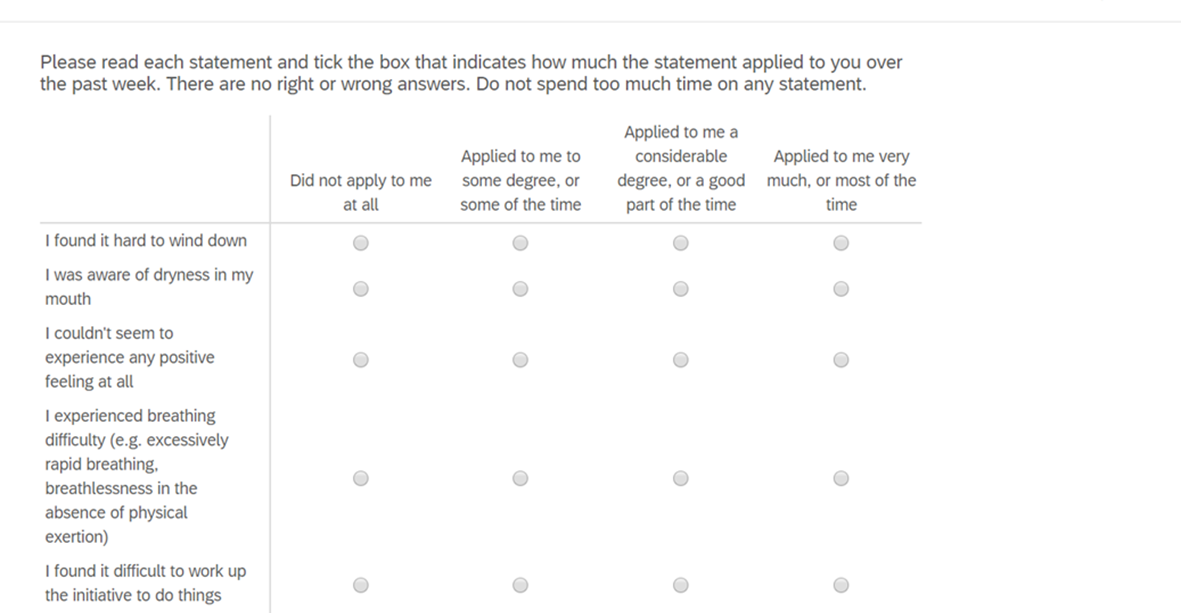


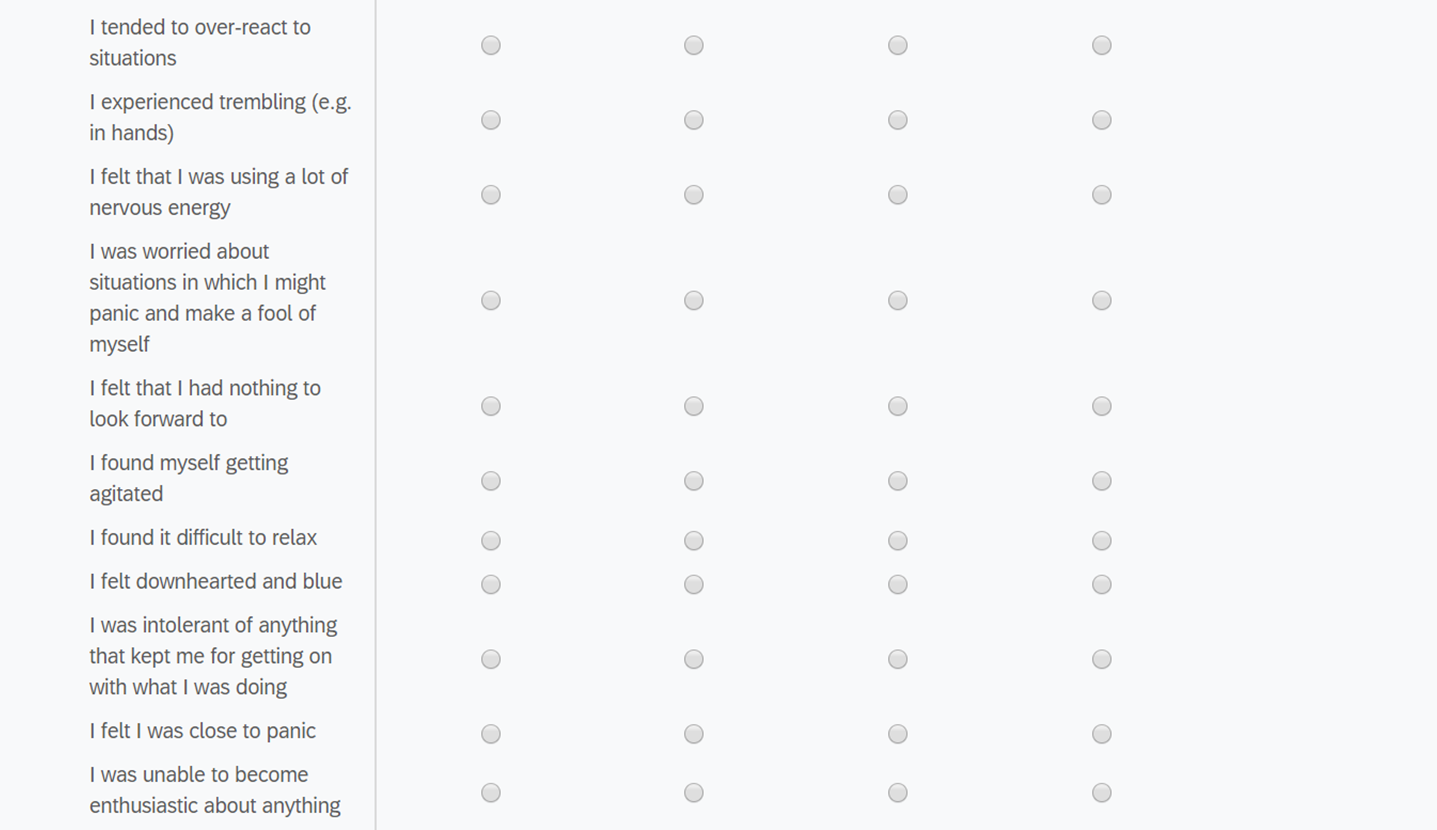
**The Warwick-Edinburgh Mental Well-being Scale**



"The Warwick-Edinburgh Mental Well-being Scale was funded by the Scottish Government National Programme for Improving Mental Health and Well-being, commissioned by NHS Health Scotland, developed by the University of Warwick and the University of Edinburgh, and is jointly owned by NHS Health Scotland, the University of Warwick and the University of Edinburgh.

**DASS21**

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**Appendix 7 **

**Evaluation form for each weekly session**

**Pilot Study of a Student-led Peer Support Wellbeing Programme**

***We would be most grateful if you could provide some feedback on the wellbeing session and how you felt that it went.***

1. On a scale of 0 to 10, do you feel that the session helped you?

(0 – not at all, 10 definitely)

1. What did you find MOST useful about the session?
2. Do you have any further comments on the session, or suggestions for improving similar sessions in the future?
3. On a scale from 0 to 10 how likely would you be to recommend this specific session to a friend or to attend another similar one in the future? (0 – not at all, 10 – definitely would recommend)

**Appendix 8 Focus group questions**

**PASS Mentors**

**Icebreakers**

How is everyone and are we all happy to be at the end of the semester?

How have you found this year overall e.g. online, mixture of face-to-face and online?

**Have you enjoyed being a PASS leader this year? (yes/no, if not, why not?)**

* Did you find it rewarding?
* Improve confidence?
* Developed skills?

**And would you recommend becoming a PASS leader? (why/why not?)**

**What parts of the session(s) do you feel went well in terms of student engagement/response?**

* Why did that work?
* What, if anything, seemed to work less well?

**How useful were the wellbeing materials IN TERMS OF DELIVERY?**

* Did they help you deliver the session with confidence?
* Were they easy to understand/follow?
* Were any of the materials not useful? Why?

**As a PASS leader, what do you think were the strengths of the programme?**

* Meeting with your fellow students?
* Offering students tips and advice
* Hearing real-world examples

**What were the drawbacks of the programme?**

* Too many sessions?
* Repetitive?
* What materials would you recommend being removed, if any?

**Future recommendations?**

* Can you think of any information/topics that should be included/covered that wasn’t?
* What materials should be kept and which didn’t work?
* Does the overall format flow well?

**Is there anything else you would like to discuss that hasn’t been covered?**

**Appendix 9 Focus group questions**

**PASS Mentees**

**Icebreakers**

How is everyone and are we all happy to be at the end of the semester?

How have you found this year overall e.g. online, mixture of face-to-face and online?

**Have you enjoyed the PASS sessions? (yes/no, if not, why not?)**

* Did you enjoy the combination of academic and wellbeing help?
* Do you think you will use/have you used to tips/advice given?
* Did you attend majority of sessions (what made you want to go/not go?)
* Would you recommend PASS to students starting next year?

**How useful were the wellbeing materials?**

* Did they help you further understand/appreciate the topic that week?
* Were they easy to understand/follow?
* Were any of the materials not useful? Why?

**What were the strengths of the programme?**

* Meeting with your fellow students?
* Mode of delivery/Leader preparedness?
* Complementary to academic work?
* Information given?
* Weekly sessions?

**What were the drawbacks of the programme?**

* Not enough activities/points of discussion?
* Too many sessions?
* Certain materials that were not useful? What materials would you recommend being removed, if any?

**Future recommendations?**

* Can you think of any information/topics that should be included that wasn’t?
* Which materials/topics should stay?
* Which materials/topics were not useful at all?
* Did you find it worthwhile being able to rate your choice of wellbeing topics?

**Is there anything else you would like to discuss that hasn’t been covered?**

1. [↑](#footnote-ref-1)