KEYS TO RESILIENCE AT ANU

An Exploration into Student Resilience Approaches and Needs

August 2016
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Budiani Students, Saraswati 1969, Bronze
(in pool near entrance of Chancery)
EXECUTIVE SUMMARY

Resilience is an integral quality for both academic success and personal health. It is often referred to as the ability to ‘bounce back’ from stressful circumstances and can be defined as “the potential to exhibit resourcefulness by using available internal and external resources in response to different contextual and developmental challenges” (Pooley & Cohen, 2010, p. 30). Maintaining strong resilience in the face of academic and personal demands enables tertiary students to reach their potential and obtain satisfaction and enjoyment from their studies. Whilst it is not the direct role of a university, supporting student resilience can contribute to improved academic outcomes and overall sense of fulfilment in the university experience. There are a range of ways students engage their own skills to support and facilitate resilience, and many of these can easily be supported by their institution of study.

This research was conducted as a part of Australia and New Zealand University Mental Health and Wellbeing Day, held on 27 April 2016, with the view to exploring the state of student resilience at the ANU. Students were invited via online survey link or hard-copy postcard provided to students during wellbeing events from 27 April – 27 May 2016 at the ANU. The survey involved two questions, the first of which asked students to list their current approaches to resilience and wellbeing, and the second eliciting feedback on how the university could support this. Responses were anonymous and via open-ended text. Responses were grouped during analysis using pre-assigned categories and proportions were calculated to reflect the range and strength of response types.

Results from the current study demonstrated, as expected, that of the 290 ANU students who responded, a wide and varied range of approaches to resilience were reported to be helpful and utilised. The most commonly reported categories for this student group included accessing social support (21%); engaging in physical exercise (21%); active personal self-care strategies (e.g. prioritising sleep, healthy diet, regular breaks and relaxation; 17%); psychological or cognitive approaches (13%); and regular engagement in personal interests (10%). Less frequently reported categories (i.e. under 6% each) which students deemed conducive to resilience included academic or occupational approaches, spiritual practices, interacting with nature and travel, accessing health professionals or using medication. When asked what students felt the ANU could do to support their resilience, responses indicated preferences for improvements to existing student services and support (19.5%); additional facilitation of social events, functions or groups (18%); increased promotion of student resilience and mental health support (13%); additional or ongoing availability of free or low-cost fitness activities on campus (12%); incorporation of resilience into academic support (11%); and facilities or spaces more favourable to both social interaction between students and for individual
self-reflection (9%). At a lower frequency (less than 6.5% each), some students reported alternative ideas; provided positive feedback on existing support; suggested changes to university policy, attitude, culture or leadership; or stated an opinion that resilience is the individual responsibility of each student.

In general, student needs reflected their reported preferences for resilience approaches and the majority of improvement suggestions pertained to existing support structures within the university, which many students identified as already beneficial and reiterated their appreciation for. This project highlights the importance of resilience in tertiary education, along with promoting a range of ways educational institutions could bolster and support student resilience.

The following report details the importance of resilience in university student populations, along with the current research procedure, results and outcome as it relates to ongoing ways the ANU can support student resilience and wellbeing.
BACKGROUND

The Concept of Resilience

Resilience is a widely researched concept, with the primary feature often being identified as the psychological ability to ‘bounce back’ following exposure to negative life events or challenges (Pooley & Cohen, 2010). However, definitions of resilience have varied widely, being a complex and multi-faceted notion to understand. Debate continues as to whether resilience is a personal characteristic or quality which provides stress-resistance (Ahern, Ark & Byers, 2008), a dynamic process between person and environment (Curtis & Cicchetti, 2007), or a positive outcome following a threat to adaptation or development (Masten, 2001). More flexible definitions are warranted, to consider that resilience can be both an outcome and a process, for example, when defined as successful coping following a challenging circumstance (Pooley & Cohen, 2010). A range of personal and environmental factors have been highlighted in the literature as influencing resilience and contributing to the thriving or flourishing of an individual, despite exposure to negative events. This approach to resilience is in line with the World Health Organisation’s concept of mental health as being more than the absence of mental illness, but “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community” (WHO, 2014). Factors commonly associated with resilience include positive emotions such as optimism and humour, the ability to find meaning in challenging circumstances, having a positive self-concept, applying cognitive flexibility, learned helpfulness, using active coping styles for stress, and having good social support or a sense of belonging and connectedness (Davydov et al. 2010).

As a multi-dimensional construct, Pooley & Cohen (2010) offer an expanded definition of resilience as “the potential to exhibit resourcefulness by using available internal and external resources in response to different contextual and developmental challenges” (p. 30). They review the support from previous research and conclude that internal resources such as self-efficacy or competence, coping skills, and a sense of belonging are important factors of resilience, along with external resources such as social support. The current research will be interpreted through the lens of Pooley & Cohen’s (2010) conceptualisation. It is important to note that the emphasis of resilience is not on the avoidance of stressful circumstances or distress, but on the individual’s ability to encounter life stress whilst maintaining a sense of self-confidence, social competence, mastery, and appropriate responsibility in their actions and adaptive response (Rutter, 1985; Windle, 2011).
Resilience in University Students

University students have been identified as being at a potentially elevated risk of distress and mental ill health, due to the increased demands of the academic environment combined with personal factors, along with the need for adjustment to the challenges of tertiary study (Cvetkovski, Reavley & Jorm, 2012). Mental illness is estimated to effect more than 1 in 4 (26%) of young people (aged 16-24) in Australia in a 12-month period (Australian Institute of Health & Welfare, AIHW, 2010), with the majority of mental illness onset occurring before 25 years of age (Kessler et al., 2007). University populations are estimated to be equally, if not more, at risk of mental ill health than their age-matched peers in the general population, and there is an association between mental health problems in university students and reduced educational outcomes (Stallman, 2010).

However, despite this increased risk and the inherent challenges, many university students maintain good health in the face of academic and environmental or cultural challenges. Providing an adequate range of support to students during their tertiary study presents an opportunity to bolster their individual resilience and enhance both academic and health outcomes (Veness, 2016). Typically, Australian universities offer this support via psychological, social work or counselling support, along with academic adjustments for students self-nominating for these types of assistance. Based on the current definition of resilience, wider opportunities are presented to support student resilience across the spectrum of university services, policies, systems and activities to enhance both individual and external resources.
KEYS TO RESILIENCE AT ANU

Aims

The current project aims to explore existing student approaches to resilience in order to highlight both individual variability, strengths and resourcefulness, and to also discover opportunities for further intervention or support beyond traditional means. The project invites direct student feedback on the current approach of the university and suggestions for enhancement.

Method

This research was conducted for one month as a part of Australia and New Zealand University Mental Health and Wellbeing (UMHW) Day, held on 27 April 2016, with the view to exploring the state of student resilience at the ANU. The research has been conducted with the approval of the ANU Human Research Ethics Committee. Students were invited via online survey link (using the Apollo system) sent to all-student email or via hard-copy postcard provided to students during wellbeing events (both Australia and New Zealand University Mental Health and Wellbeing Day, and during Spoon Week) from 27 April – 27 May 2016 at the ANU. The survey involved two questions, the first of which asked students to list their current approach to resilience and wellbeing, and the second eliciting feedback on any additional ways the university could support this. Responses were anonymous and via open-ended text, in the absence of demographic data for the sake of anonymity and ease of response. Responses were grouped during analysis using pre-assigned coding categories based on initial review of data ranges. Proportions (via percentages) were calculated to reflect the range and strength of response types.

Results

In total, 290 student responses were received – 142 students completed the online Apollo survey, 105 completed the postcard on UMHW Day, and a further 43 completed the postcard during the Spoon Week event. Incomplete and invalid responses (e.g. yes/no answers, absent responses) were excluded from analysis, such that for Question 1, 283 valid responses were analysed and for Question 2 this consisted of 276 valid responses.
Question 1

Individual Resilience and Wellbeing Approaches

On average, students provided 2.12 separately categorised responses each to the first question, with a range of 1 – 8 categories listed by each student. In general, responses tended to be more detailed and numerous when completed online. Responses to Question 1 were coded into the following categories and percentage totals were calculated for each category as in Table 1 below.

Table 1: Response categories and percentages for student resilience approaches

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical/Exercise</td>
<td>1</td>
<td>128</td>
<td>20.88</td>
</tr>
<tr>
<td>Social</td>
<td>2</td>
<td>130</td>
<td>21.21</td>
</tr>
<tr>
<td>Psychological/Cognitive</td>
<td>3</td>
<td>81</td>
<td>13.21</td>
</tr>
<tr>
<td>Spiritual</td>
<td>4</td>
<td>23</td>
<td>3.75</td>
</tr>
<tr>
<td>Academic/Occupational</td>
<td>5</td>
<td>34</td>
<td>5.55</td>
</tr>
<tr>
<td>Personal Interests</td>
<td>6</td>
<td>63</td>
<td>10.28</td>
</tr>
<tr>
<td>Active Self-Care</td>
<td>7</td>
<td>104</td>
<td>16.97</td>
</tr>
<tr>
<td>Nature &amp; Travel</td>
<td>8</td>
<td>23</td>
<td>3.75</td>
</tr>
<tr>
<td>Professional/Medication</td>
<td>9</td>
<td>15</td>
<td>2.45</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
<td>12</td>
<td>1.95</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>613</strong></td>
<td></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

As can be seen from Table 1, the most commonly reported resilience categories for this student group included accessing social support (21%); engaging in physical exercise (21%); active personal self-care strategies (e.g. prioritising sleep, healthy diet, regular breaks and relaxation; 17%); psychological or cognitive approaches (13%); and regular engagement in personal interests (10%). Less frequently reported categories (i.e. under 6% each) which students deemed conducive to resilience included academic or occupational approaches, spiritual practices, interacting with nature and travel, and accessing health professionals or medication.

Further detail is provided for the top five responses.

1. **Social**: General responses to this item included talking with friends or family, socialising, being with people, talking through problems with others, or seeking help from non-professionals.

   **Sample statements**
   
   “Confide in others”, “Spend time with my family”, “Seek help from family, friends, social groups…”, “Find positive people and support networks”, “Socialise”, and “Talk to people and include yourself with the community.”

2. **Physical/Exercise**: General responses included exercise, attending the gymnasium, playing team sports, and participating in group or individual fitness activities such as yoga classes, walking, running, or soccer.

   **Sample statements**
   
   “I go for a walk or do some sports”, “I do aqua classes, yoga and go cycling”, “I try to take regular walks”, “Gym, run, workout”, “Yoga”, “Fitness” and “Exercise.”

3. **Active Self-Care**: General range of responses included being attentive to diet, sleep, taking regular breaks, relaxing and spending time to self with intention of self-care.

   **Sample statements**
   
   “Find ways to relax”, “Get enough sleep, take lots of baths, force myself to take breaks”, “Taking care of myself with my own means”, “Listen to my body and mind, when it starts to tell me I need a break…”, “8hrs sleep”, “Eat well”, “I do a lot of self-care activities” and “Treat yourself.”
4. **Psychological/Cognitive:** General responses pertaining to thinking strategies, such as avoiding thinking about negative aspects and focusing on positivities of situations, active meditation, problem-solving, self-encouragement and reflection.

**Sample statements**

“Self-talk”, “I always try to think positively and turn negative thoughts into more positive ones”, “I try to work towards becoming conscious of my thoughts and emotions, and promoting positive attributes”, “Stop comparing my achievements to others” and “Believe in one’s self.”

5. **Personal Interests:** Generally included themes of engaging in personal pursuits, hobbies, enjoyable activities, and individual extra-curricular activities.

**Sample statements**


Responses from the remaining categories were broadly represented by the following:

6. **Academic/Occupational:** Work or study practices such as participation and planning or organisational strategies.

7. **Spiritual:** Identified religious or spiritual practice, prayer, reading religious texts and drawing on one’s faith.

8. **Nature & Travel:** Spending time in natural environments, with pets or travelling to other locations.

9. **Professional/Medication:** Consulting with a professional (typically a counsellor) or using medication for health purposes.

10. **Other:** Responses which do not fit into the specified categories, which included being unsure, doing nothing, doing “lots of things”, or other unrelated comments about university structures or facilities.

**Question 2**

**Suggested Improvements**

On average, students provided 1.36 separately categorised responses each to the second question, with a range of 1 – 5 categories per student. Again, online responses tended to be more numerous detailed. Coding categories and percentage data for Question 2 are presented in Table 2.

When asked what students felt the university could do additionally to support their resilience, responses indicated preferences for improvements to existing student services and support (19.5%); additional facilitation of social events, functions or groups (18%); increased promotion of student resilience and mental health support (13%); additional or ongoing availability of free or low-cost fitness activities on campus (12%); incorporation of resilience into academic support (11%); and facilities or spaces more favourable to both social interaction between students and for individual self-reflection (9%). At a lower frequency (less than 6.5% each), some students reported alternative ideas (e.g. petting zoos, music in public spaces); provided positive feedback on existing support; suggested changes to university policy, attitude, culture or leadership; or stated an opinion that resilience is the individual responsibility of each student.

*Tim Spellman, Music of the spheres 2001, Brick and mortar (School of Music courtyard)*
### Table 2: Response categories and percentages for institutional improvement suggestions

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
<th>#</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facilities &amp; Spaces</td>
<td>1</td>
<td>35</td>
<td>8.97</td>
</tr>
<tr>
<td>Student Services &amp; Support</td>
<td>2</td>
<td>76</td>
<td>19.49</td>
</tr>
<tr>
<td>Social Functions/Events/Groups</td>
<td>3</td>
<td>70</td>
<td>17.95</td>
</tr>
<tr>
<td>Academic</td>
<td>4</td>
<td>41</td>
<td>10.51</td>
</tr>
<tr>
<td>Individual Responsibility</td>
<td>5</td>
<td>8</td>
<td>2.05</td>
</tr>
<tr>
<td>Fitness Activities</td>
<td>6</td>
<td>46</td>
<td>11.80</td>
</tr>
<tr>
<td>Resilience/Mental Health Promotion</td>
<td>7</td>
<td>49</td>
<td>12.57</td>
</tr>
<tr>
<td>Policy/Attitude/Culture</td>
<td>8</td>
<td>16</td>
<td>4.10</td>
</tr>
<tr>
<td>Leadership</td>
<td>9</td>
<td>2</td>
<td>0.51</td>
</tr>
<tr>
<td>Positive Feedback</td>
<td>10</td>
<td>23</td>
<td>5.90</td>
</tr>
<tr>
<td>Other</td>
<td>11</td>
<td>24</td>
<td>6.15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>390</td>
<td>100</td>
</tr>
</tbody>
</table>

Further response detail is provided for the top six responses.

1. **Student Services & Support**: General responses to this item included expanding availability of general and supportive university services for students, and having more staff across the university provided with training in supporting student wellbeing and resilience. In particular, the Counselling Centre was listed as a well-appreciated, high demand service which students would like to access quicker than currently available. Suggestions were also made for specific support in the areas of postgraduate student health, and in offering classes on campus.

**Sample suggestions**

"More funding to mental health services and decrease in waiting times", "More counsellors", "Better pastoral care for postgraduate students (e.g. a student liaison officer for pastoral issues)", "Perhaps more people that are specifically employed to monitor health and wellbeing of students and staff", "More responsive and readily available Student Support for wellbeing, health, and mental health."

2. **Social Functions/Events/Groups**: A wide range of responses suggesting an increase in general university events, social networking opportunities, group or community activities and peer support.

**Sample statements**

"More inclusive group activities aimed at getting everyone involved", "More social activities through the week", "...pizza and movie nights too, and get international students involved", "...more events that encourage outdoor activities. More team building events and group projects to create a fun environment", "Group activities such as trivia or a networking night every week or fortnight", "Help people who don’t have older peers that they trust to find mentors of this form", "Meetings with art activities", "Music shows", "More support for clubs and their social events."

3. **Resilience/Mental Health Promotion**: General suggestions about information sessions on resilience and mental health; free meditation, mindfulness or relaxation classes; community awareness-raising activities on wellbeing topics.

**Sample statements**

"Events or regular activities about discussing resilience", "More funding towards wellbeing", "More promotion to drink responsibly, eat well - that the cultural norm would be to take the healthy option of looking after one’s health", "Different discourse around hardship", "Classes/seminars about building this resilience and discipline", "Free meditation and mindfulness classes, yoga classes etc."

ANU Counselling Centre

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4. **Fitness Activities:** Responses expressed appreciation for the fitness services already available on campus and suggested expansion of these, including additional group exercise programs and lunchtime sports (yoga was the predominant suggestion).

**Sample statements**

“Lunch time yoga classes”, “Group exercises”, “Free lunchtime sports”, “More free group exercise classes + training”, “Consider running support for students of different ages and social backgrounds”, “Casual sports, show up and play type thing.”

5. **Academic:** Suggestions were wide and varied and included a focus on incorporating wellbeing into teaching and learning practices; having more flexible study requirements and class times; having confidence that academic staff understand and are supportive of student wellbeing; providing clear academic expectations on entry to courses; and offering early intervention processes for students whose academic achievement is of concern.

**Sample statements**

“Well-being for students (in my experience) would seem to be a school/discipline-specific issue”, “Facilitators are needed in classrooms to bring students together, to help make ties, to make the learning a relaxed communal experience, and lecturers should take an interest in their students”, “More flexible but still keep the baseline of academic study”, “I think it is important lecturers understand more about student wellbeing”, “More flexible assessments”, “Less of a focus on the culture of consistently studying…support regular self-care practices”, “Approach students who failed and provide assistances, but not pressure”, “More Academic skill tutors and support available”, “I think that it would be helpful to run compulsory short courses for first year students that deal with core study skills (time management, citation, essay planning, etc).”

6. **Facilities & Spaces:** General emphasis of responses on increasing access to campus areas for relaxing, recharging, reflection, and socialising.

**Sample statements**

“More areas for relaxation/’chilling out’”, “Having somewhere small and quiet to retreat to (close to Union Court), purely for ‘recharging’, no talking”, “Make more areas where students can hang around and chat with others. Encourage interaction between students of different races”, “Places to sleep, nap & rest”, “Stress-free locations”, “More reflective spaces”, “Prayer rooms.”

The less commonly reported responses were represented as follows:

7. **Other:** A range of responses not fitting the specified categories, with no specific themes. Multiple suggestions around having petting zoos or therapeutic animals available, along with increasing music in public spaces, supporting students extra-curricular activities, enhanced “free time”, being unsure or having no suggestions.

8. **Positive Feedback:** Responses which were complimentary about existing university facilities or services, especially fitness, counselling, indigenous student support, libraries, outdoor spaces, and generally being satisfied with the campus and university as a whole.

9. **Policy/Attitude/Culture:** General comments on existing university culture on topics of wellbeing, mental health, and religion, along with suggestions on embedding a wellbeing culture (including open dialogue) into university policy and guidelines.

10. **Individual Responsibility:** A small proportion of respondents made firm statements on wellbeing as an individual (not a university) responsibility, referring to the importance of individual attitudes and coping.

11. **Leadership:** Comments on management and leadership roles and their impact on wellbeing.
DISCUSSION

It is apparent from the results that wellbeing and resilience are maintained in a variety of ways by existing students of the ANU and that students have a range of valuable and applicable suggestions on how to improve the support offered by the university. Key components of a student approach to resilience were identified including the value of social support, physical exercise, personal self-care strategies, individual psychological coping, and regular engagement in personal interests. The approaches reported by students reflect well the elements of resilience identified in the literature such as self-efficacy and competence, using active coping styles for stress, applying cognitive flexibility, possessing a sense of belonging, and accessing social support (Pooley & Cohen, 2010; Davydov et al. 2010).

Student support needs also paralleled and complimented their existing resilience approaches. Suggestions were made in particular for improvements in access to existing student services and support; additional facilitation of social events, functions or groups; increased promotion of student resilience and mental health support; additional or ongoing availability of free or low-cost fitness activities on campus; incorporation of resilience into academic support; and the creation of facilities or spaces more favourable to both social interaction between students and for individual self-reflection. Suggestions made by students were largely practical and within the scope of the university's current structures and systems. For example, the upcoming re-development of Union Court will provide opportunity to address health, fitness and wellbeing needs via improved facilities and support, along with improvement to existing university spaces to encourage social connection and engagement.

The theme of suggestions offered by students in the current research are reflected both in the recommendations from a recent report on improving student mental health (Veness, 2016) and in the Okanagan Charter (2015), an international charter developed to support health-promoting universities and colleges. The Okanagan Charter (2015) presents two Calls to Action. Firstly, it proposes embedding health into all aspects of campus culture, administration, operations and academic mandates – this includes recommendation 1.3 ‘Generate thriving communities and a culture of well-
being’ with the aim to “Be proactive and intentional in creating empowered, connected and resilient campus communities that foster an ethic of care, compassion, collaboration and community action” (p. 7) and recommendation 1.4 ‘Support personal development’ by creating opportunities to “build student, staff and faculty resilience, competence, personal capacity and life enhancing skills” (p. 7). Practical and evidence-based suggestions for incorporating wellbeing and resilience into academic settings are contained within the Healthy Campus Community resources provided freely by Simon Fraser University (Stanton, Dhaliwal, Black & Hutchinson, 2015) via https://www.sfu.ca/healthycampuscommunity/academic-settings.html. Core conditions for wellbeing in an academic setting are identified as incorporating social connection, supporting an institutional culture of wellbeing, reducing undue stress, providing opportunities for personal development, strengthening balance and resilience, fostering inclusivity, and promoting involvement and meaningful engagement (Stanton et al. 2015).

There is some suggestion that within the realms of leadership (Jackson & Daly, 2011) and in the academic health disciplines in particular (e.g. medicine, nursing, psychology, social work, allied health) that embedding resilience and self-care components should be a priority “in order to give students strength, focus and endurance in the workplace” (McAllister & McKinnon, 2009, p. 371). Amongst the key recommendations for university’s in supporting student mental health are nurturing a leadership and organisational tone committed to student wellbeing and mental health; supplementing on-campus treatment services with preventative health ventures, local partnerships and possible governmental support; matching screening programs with support services; and offering group programs such as mindfulness meditation (Veness, 2016). As a result of the current project, The ANU Counselling Centre plans to consider facilitating free resilience-themed group workshops for students throughout 2017 to begin addressing these needs.

The Keys to Resilience project represents one component of the ANU’s commitment to student mental health and wellbeing, serving primarily to increase awareness of current effective student wellbeing and resilience approaches and to assess student needs with the view to improving institutional support. Opportunities presented as a result of this research could include considerations in expansions to existing student support structures such as social, counselling/pastoral and fitness opportunities. This could also inform upcoming improvements to campus groups, academic programs, policies and facilities with the view to embedding resilience and wellbeing as core foundations of thriving in academic, personal and health domains.

**Acknowledgement**

The ANU Counselling Centre would like to acknowledge and thank all students who participated in the current project for their thoughtful and insightful responses.
REFERENCES


