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# Creating Mentally Healthy Universities: Lessons from Staff Experiences of Transition through the COVID-19 Pandemic

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**Abstract:** The COVID-19 pandemic generated unprecedented challenges for educators world-wide. University teaching staff were forced to rapidly adapt to virtual classrooms during lockdown and the return to campus has seen continuing flux. Poor student mental wellbeing is a major concern and although nascent digital mental health interventions can increase reach and augment in-person services, research on the effectiveness of digital interventions is still in its infancy. The implementation of hybrid solutions is challenging due to the complexity and diversity of institutions; however, important lessons can be learned from the switch to online teaching and the integration of digital technologies during the transition process. This paper explores staff experiences of transition through the pandemic using interpretive phenomenological analysis (IPA). Semi-structured interviews were conducted with three teaching academics from English universities. Analysis yielded four group experiential themes: Transition was a traumatic process; Relationships as a source of support and strain; Opportunities for learning and growth; and Surviving and inspiring the mental wellbeing environment. Key findings revealed the switch to online working presented unique stressors, while relationships were pivotal for navigating transition and healthy personal development. Findings can inform transition guidance including the integration of hybrid pathways to support mental wellbeing for the whole learning community.

**Keywords:** transition; universities; COVID-19; digital; mental health and wellbeing; hybrid; IPA

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## 1. Introduction

Mental health is a fundamental human right and essential to the advancement of nations globally (Patel et al. 2018). Nonetheless, the number of individuals experiencing mental ill-health continues to rise with approximately one in eight of the world population living with a mental disorder (World Health Organization 2022). It is broadly recognised that the collective trauma of the COVID-19 pandemic, economic and political uncertainty, and the cost-of-living crisis have contributed to a deterioration in population mental health and wellbeing (Broadbent et al. 2023; Kwong et al. 2021). At the same time, compared to any previous generation, young people (in particular females) are more likely to experience common mental health difficulties such as anxiety and depression (Lewis and Bolton 2023). The demand–supply failure in mental healthcare is starkly evident in lengthy waiting lists for access to appropriate treatment and support. Despite this deepening crisis, the international median of government health expenditure on their citizens' mental health is less than 2% (World Health Organization 2023). Moreover, the burden is compounded by an under-resourced and overstretched workforce, creating a seismic gap between need and service provision. In the UK, shortages of mental health workers have hampered expansion and reform, leaving services in persistent crisis mode (British Medical Association 2022). The unique circumstances created by COVID-19 both exposed and exacerbated a pre-existing public health crisis and highlighted the urgent need for effective strategies to

support mental wellbeing across the lifespan (BMJ 2020). Meanwhile, in an uncertain, post-pandemic climate, universities are facing an unparalleled demand for student mental health support. The current authors posit that effective solutions to ameliorate current trends must focus on creating mentally healthy learning environments for all, and vital lessons can be gleaned from a better understanding of the transition experience of higher education teaching staff through the COVID-19 global health pandemic.

### 1.1. An Unprecedented Transition Environment

According to the Multiple and Multi-dimensional Transitions (MMT) theory (Jindal-Snape and Rienties 2016) transitions should be recognised as multiple and synchronous rather than linear and sequential. The sudden closure of university campuses at the peak of the first wave of the COVID-19 pandemic in early 2020 forced teaching staff to transition to a largely unchartered virtual learning environment without the traditional support systems embedded in physical learning spaces. Although digital technologies were not new in education, the onset of the pandemic dramatically accelerated their implementation (Bond et al. 2020). With subsequent periods of lockdown during the 2021/22 academic year, online teaching and learning was dubbed the 'new normal' while staff had to navigate rapid changes to work regimes. A comparative analysis across the four UK nations (Kaseem and Mitsakis 2023) concluded that enforced overreliance on technology was a significant factor in elevated stress for university staff. The pandemic placed even greater demands on a profession already at risk of poor mental wellbeing, with considerably increased workloads (Cleland et al. 2020; Shankar et al. 2021) and expectations from universities to maintain 'business-as-usual' (Wray and Kinman 2021).

A UK-wide survey conducted at the outset of the pandemic, sought to identify academics' experiences of emergency migration to online working, while a second survey, later the same year, centred on how the pandemic was affecting academics' mental and physical wellbeing (Watermeyer and Crick 2021). The authors revealed multiple reports of work intensification resulting from the rapid shift to online teaching and learning and an exponential rise in work demands across academic, pastoral, and administrative duties. Work-related stress and anxiety, demotivation, and chronic digital fatigue, were highlighted as common features of academic life during the transition period. Moreover, the authors concluded that the burden of performance management, exploitative work practices, and poor institutional relationships between academics and senior management were deleterious to the physical and mental wellbeing of staff.

Alongside mandated lockdowns, the world witnessed an explosion in the use of digital technologies. Radical changes arrived abruptly as individuals, organisations, and educational institutions were forced to adjust to new ways of living, working, and learning. In this uncertain new world, digital technologies transpired to be a double-edged force inciting both exceptional disruption and cutting-edge innovation. Research has shown the vast potential of the technology-enabled interventions which came to the fore during lockdown, permitting the continuity of mental health care for vulnerable individuals and opening digital support networks to the general population (Li 2023)—albeit conditional on reliable Internet access. Post-pandemic, digital modalities continue to offer alternative support for those who may struggle to attend traditional mental health services yet have access to a digital device. Rapidly-evolving technologies—the most salient being artificial intelligence (AI)—fundamentally change the way humans interact with one another and engage with the world in multifarious ways.

Pertinently, findings from Watermeyer and Crick (2021) exposed how universities in the UK were poorly equipped to tackle pandemic-driven changes associated with the global acceleration of digital technologies. Pre-pandemic research on the implications of technology for learning had shown several benefits including increased student engagement (Revere and Kovach 2011) and enhanced performance and course satisfaction (Hsu and Hsieh 2011). Conversely, other evidence suggested that technology does not always satisfy learners' diverse demands (Johnson et al. 2008) and may disadvantage some student

populations (Chen et al. 2010). Clearly, an understanding of learners' perceptions and experiences is essential to best meet their needs. Nonetheless, it is equally important to gather the views of teaching staff to ascertain the likelihood of those needs being met. Strikingly, systematic review evidence (Bastos et al. 2021) has shown that digital learning evaluations have consistently prioritised students' views and experiences over teaching staff with responsibility for curriculum development, delivery, and assessment. While the international literature boasts a myriad of studies capturing the student experience of the transition to online learning (Adnan and Anwar 2020; Bastos et al. 2021; Yeung and Yau 2022), the provocative title of Hardman et al.'s (2022) article, "Does anyone even notice us?" poignantly demonstrates how the voices of academic staff were largely unheard.

### *1.2. Shifting Social Relationships and Professional Identities*

Relationships are a cornerstone of managing effective transitions, while extensive evidence across the social science and public health literature demonstrates that social interaction and relationships are pivotal for mental wellbeing throughout the lifespan (e.g., Baumeister and Leary 1995; Saeri et al. 2017). Pertinently, the COVID-19 pandemic has been strongly associated with impoverished student wellbeing, negatively impacting social relationships, the quality of the learning experience, and optimism about future prospects (Duffy 2023). Universal social distancing and self-isolation measures, which mandated online teaching and learning, were associated with increased levels of student anxiety and depression, with many students feeling disadvantaged by a virtual learning environment (Riboldi et al. 2023). Aligned with these findings, a study by Knight et al. (2021, p. 8) revealed that some staff believed the online classroom had created "a unique cohort of students with unique needs". According to Schiller et al. (2023), individuals with multiple newly formed relationships, such as university students, may have experienced difficulties in transferring these relationships online, creating an elevated risk of social isolation. Notably, during the pandemic there was a greater demand for emotional support from students, placing enormous pressure on university teaching staff who are fundamentally not mental health experts, and have minimal training, if at all, in providing this type of support (Payne 2022). Helping students in emotional distress exposes educational staff to elevated stress levels which can be detrimental to their own mental wellbeing (Lever et al. 2017). Furthermore, Knight et al. reported that these frontline staff did not feel their own health and wellbeing was sufficiently supported by their managers, thus creating anxiety and the sense that their institutions were exposing them to elevated risks of poor physical and mental health.

Research by Zike and Illingworth (2023) found that many academic staff felt disconnected and isolated from their university community. Pertinently, the level of support received from line managers and colleagues had a direct effect on staff's self-efficacy and wellbeing. While the shift to homeworking and studying significantly reduced in-person interactions, online social support networks facilitated social contact and continued support. However, as Long et al. (2021) point out, while online interactions can increase perceived social support, evidence is lacking as to whether remote communication networks provided an effective substitute for in-person interaction during mandated lockdowns.

For some staff, extended periods of working from home were seen as a unique opportunity to spend more time with family (Knight et al. 2021). Nonetheless, authors suggest that the boundaries between personal and professional lives and identities became increasingly blurred (Watermeyer et al. 2020). For Woods et al. (1997) the personal self is inextricably bound to teachers' professional role and identity. In a similar vein, professional identity has been described as a continuous process, developed throughout one's life, and is especially sensitive in response to cultural shifts and pedagogical innovation (Adams et al. 2006; Avidov-Ungar and Forkosh-Baruch 2018). According to El-Soussi (2022), academics' professional identity suffered episodes of instability as tensions arose between their self-perception, their beliefs, and their practices in the online environment during the pandemic.

Giladi (2022) utilised the Professional Identity COVID Scale (PI-COVID) to examine the professional identity of 95 lecturers in Israel post-COVID. Pertinently, the results showed that younger lecturers identified more challenges associated with COVID-19 compared with their older colleagues. These findings suggest that experienced staff might be more confident in dealing with difficulties, whereas those with fewer years in the role might feel more insecure and therefore less capable in a crisis situation. Collectively, the literature on this topic suggests that the professional identity of academic lecturers is unstable and influenced by a variety of personal and contextual factors.

### *1.3. Harnessing Digital Opportunities for Positive Change*

In health and education settings, "digital provision"—"using electronic technology and data to support health and wellbeing, service delivery and transformation to improve outcomes for people" (Mental Health Network NHS Confederation 2023)—can alleviate overstretched in-person services, while also easing the stigma associated with help-seeking, particularly for some ethnic and sexual minority groups (James 2020). By implication, digital support has come to the rescue of a failing mental health system and is seen by some as a panacea. The multiple benefits of digital support have been boldly asserted, among them, extending reach and mental health literacy, facilitating easier access to training and support for health and education workers, delivering accessible (remote) care pathways, and providing a platform for self-help interventions (Mental Health Network NHS Confederation 2023). Certainly, such affordances are highly desirable, greatly extending the functionality of traditional services. However, robust evidence for the clinical efficacy and cost-effectiveness of digital modalities remains sparse (Srivastava et al. 2020).

An overview of systematic reviews on digital technologies to support mental health and wellbeing (De Witte et al. 2021) revealed a wealth of interventions available. While the content and target populations varied substantially, interventions were accessible in a range of locations including at home and in schools and universities. The majority of reviews focused on treatment with less attention given to preventive interventions. Interestingly, most reviews examined exclusively digital interventions (programmes accessed on computers or smartphones, or cross-platform digital environments), while technologies that had adapted conventional support to an online modality (e.g., video calling) and blended pathways (a combination of online and face-to-face support) received far less research interest. This is striking considering that complementary approaches are, arguably, the most promising direction for embedding digital solutions (Ruwaard and Kok 2015; World Health Organization 2020). Notably, WHO guidance (2020) for countries across all income levels recommends that digital mental health interventions (DMHIs) are best employed to supplement existing infrastructure and resources rather than supersede them.

Further systematic review evidence collected during the pandemic identified the potential benefits of DMHIs for the treatment of depression and anxiety and the enhancement of psychological wellbeing among university students (Harith et al. 2022; Lattie et al. 2019). However, review authors also air caution over the low quality of many study findings due to methodological flaws, and specify the need for more systematic testing and reporting so the effective elements of DMHIs can be more conclusively determined. In sum, while DMHIs including computer-based therapies and mobile phone apps continue to proliferate, they are still at a nascent stage and a radical transformation of mental health provision remains to be seen. Notwithstanding, the 'technology genie' has been set loose and the potential impact on mental health services—including those provided in university settings—is vast. While, arguably, the digital environment offers a favourable alternative for the 'digital native' generation to access services, the development and implementation of DMHIs in universities have outpaced robust empirical evaluation. Moreover, the limited understanding that can be gleaned from systematic review evidence has been acknowledged (Lattie et al. 2019). Research examining interventions which are perceived as usable, acceptable, and meaningful, as well as the key processes that facilitate successful implementation, is lacking. This requires interrogating the infrastructures, frameworks,

and cultures which currently exist in university settings and which the current paper helps to address.

### 1.4. Creating Mentally Healthy Universities for All

It is widely recognised that university students are a group at a higher risk of psychological distress and poor mental wellbeing, and while this is particularly salient during the period of transition *to* university, transition *through* university is also associated with multiple stressors (Riboldi et al. 2023). Distinctive factors contributing to poor mental wellbeing in the student population include academic, financial, and social pressures, the absence of familiar social and emotional support networks, and major shifts in lifestyle habits (Lewis and Bolton 2023; Moore et al. 2021). Negative outcomes associated with poor mental health among the student population range from low academic performance and course drop-out, to incidents of self-harm and suicide (Lewis and Bolton 2023). Inevitably, the COVID-19 pandemic exacerbated pre-existing stressors while introducing unique adversities.

In the UK, the heightened focus on student mental health has seen a seismic expansion in support services. A systematic review of the review-level evidence of interventions to support students' mental health and wellbeing (Worsley et al. 2022) highlighted a plethora of intervention types: mindfulness-based, psychological, psychoeducation, recreational, relaxation, setting-based, and stress management/reduction. The authors found a body of evidence for the effectiveness of specific approaches including interventions delivered via digital technologies. Alongside mindfulness-based interventions and cognitive behavioural therapy (CBT), DMHIs appear to be a promising direction for future focus. Nonetheless, as previously stated, tackling student mental wellbeing must be considered in the wider context of nurturing mentally healthy learning communities, which requires investigation beyond the scope of intervention effectiveness. Notably, the increase in demand for student support is mirrored in escalating pressure on academic staff in pastoral roles (Payne 2022). Despite growing evidence for the urgent need to address staff mental health (Mula-Falcón et al. 2022)—in stark contrast to services for students—timely and appropriate intervention remains demonstrably scant.

Student mental health provision varies considerably across universities, shaped according to local context (Bennett et al. 2024). Services include student health and counselling services, clinical and non-clinical mental health advisers, well-being teams, academic tutors, and peer mentors, as well as remote services available online or by phone. A small study by Bennett et al. (2024) evaluated the impact of introducing a new wellbeing advice service in a single UK university. The authors concluded that wellbeing advisers were an accessible, acceptable resource for students offering timely, low-intensity support. This is a role very much aligned with the pastoral support offered by academic tutors who, despite being positioned on the periphery of case-management systems, are frequently approached as a frontline service. This dilemma for academic staff, who often lack sufficient training, or adequate provision for their own mental wellbeing needs, is acknowledged by Bennett and others (e.g., Hughes and Bowers-Brown 2021; Payne 2022).

Albeit axiomatic to say the "[technology] genie is out of the bottle" (BenZeev 2020), this statement begs a crucial question: how do we harness nascent digital technologies, and integrate pre-existing and emergent in-person support, to create hybrid pathways to nurture mentally healthy communities for all? Firstly, our attention should focus on developing needs-led solutions rather than universities being directed by external forces and rapidly-evolving digital technologies. People, not technology, are change agents and at every level of education teaching staff have a pivotal role to play in effective transformations. With this in mind, the current paper proposes that crucial lessons can be learned from university staff experiences of transition during the COVID-19 pandemic and the unprecedented rise of digital technologies. The authors posit that key insights from this research can help inform strategies for augmenting digital solutions alongside traditional systems to support mental wellbeing in universities—for students and staff alike—in an uncertain and fragile post-pandemic landscape.

### 1.5. Introduction to IPA and Justification for the Methodological Approach

Interpretative phenomenological analysis (IPA) aims to uncover the individual meaning of a lived experience to the individual through a process of in-depth reflective inquiry (Smith et al. 2022) and is particularly useful for gaining insights into under-researched phenomena or perspectives (Peat et al. 2019). It was therefore the appropriate choice for the current study which sought to consider the transition experience at the micro level of human uniqueness. IPA is underpinned by an idiographic philosophy—the participant is the experiential expert; however, IPA's phenomenological and hermeneutic tenets place the researcher at the heart of the research encounter. Specifically, the IPA researcher seeks to make sense of the participant(s) making sense of their world (Peat et al. 2019), and to do so must be "curious, open-minded and exploratory" (Motta and Larkin 2022, p. 58). Moreover, IPA is well suited to unravelling "complex, ambiguous and emotionally laden" topics (Smith and Osborn 2015, p. 41), such as the current one which concerns the multiple and multi-dimensional transitions experienced by teaching staff in higher education, triggered by the COVID-19 pandemic. IPA has been successfully applied to similar, disruptive human experiences which bear significant consequences. For example, it has been applied in Motta and Larkin's (2022) exploration of the meaning of loneliness in the context of living within a religious community. The authors' fine-grained analysis yielded rare insight into the existential significance of loneliness as not only a disconnection from others, but also as a disjunction from one's self and self-knowledge. In a similar vein to Motta and Larkin, the current authors wanted to address a gap in the previous literature where relatively little has been grounded in, or developed from, a deep dive into the first-person accounts of university teaching staff. Notably, living through transition in its manifold guises has been of previous, keen interest to IPA researchers, for example, Smith (1999) investigated how a woman's sense of identity changed during the transition to motherhood. While, specifically, in an education context, Mathews (2012) explored children's experiences of transition to secondary school, and Denovan and Macaskill's (2013) study focussed on stress and coping among first-year undergraduates. IPA's meticulously idiographic approach facilitates the current researchers in giving voice to university teaching staff and eliciting their authentic views. It is anticipated that through the careful construction of interpretative accounts, rich insights can be gained to deepen our understanding and shine a light on a hitherto overlooked voice within the higher education transition literature.

### 1.6. Aims of the Current Research

The main aim of this study was to explore university teaching staff experiences of transition and adaptation to dramatically new ways of working during the COVID-19 pandemic, and to gain an understanding of factors related to personal change and wellbeing that can shape effective transformations in university settings. The impetus for the study was influenced by the predominance of quantitative studies in the extant literature on transformations in university settings, the priority given to evaluating student views, and the lack of voice afforded to academic staff. This research intends to demonstrate the need to glean multiple-stakeholder perspectives to robustly inform change processes.

The research question is the following: What are university teaching staff experiences of transition and new patterns of working which emerged through the COVID-19 crisis?

## 2. Materials and Methods

### 2.1. Design

The study was qualitative and used interpretive phenomenological analysis (IPA) (Smith et al. 2022). IPA's phenomenological lens enables a detailed examination of lived experiences: giving voice and making sense in order to glean an "insider perspective" of a particular event or process within a specific setting (Noon 2018). IPA is participant oriented, facilitating, "the innermost deliberation of the "lived experiences" of research participants. . . without any distortion and/or prosecution" (Alase 2017, p. 9). Thus, with IPA's focus on, "the examination of how people make sense of their major life experiences"

(Smith et al. 2022, p. 1), it aligned appropriately with the researchers' intention to gain an authentic understanding of the lived experiences of university teaching staff during the transition process catalysed by the COVID-19 pandemic.

### 2.2. Participants

Participants ($n$ = 3) were recruited through purposive sampling (see Table 1). IPA requires homogeneity in the selection of *information-rich* cases for the in-depth study of the phenomenon of interest (Patton 2002). Participants were purposively selected on the basis of a shared, highly disruptive transition experience which held significant importance to their lives. Accordingly—in line with Yin (2011)—specific 'study units' were selected with the intention of yielding the most relevant and plentiful data. All participants were currently working on a full-time contract as a teaching academic at an English university. All had been in post for a minimum of two academic years and had experienced transition through the COVID-19 pandemic.

**Table 1.** Participant demographics.

| Participant Pseudonym | Age Group | Gender | Ethnicity | Years Teaching in HE | Institution Location |
|---|---|---|---|---|---|
| Alice | 41–55 | Cis female | White European | 15 | London |
| Katie | 25–40 | Cis female | White British | 2 | London |
| Clara | 41–55 | Cis female | White European | 15 | South East |

### 2.3. Procedure

Approval for the study was granted by the ethics board of the University of West London. Data were collected following the standards of the Helsinki Declaration (World Medical Association 2013) and in accordance with the British Psychological Society (BPS) guidance (British Psychological Society 2021) that stipulate researchers should prioritise and respect the rights and dignity of participants. Participants were provided with full study information in writing, stating the purpose of the study and explaining confidentiality and anonymity, and the right to withdraw their participation without having to provide a reason. Participants were given the opportunity to ask any questions prior to signing the consent form. One-to-one, semi-structured interviews were conducted online and audio recorded. Prior to data collection, participants were reminded of confidentiality and the right to withdraw. A question guide was used which comprised a set of open-ended questions designed to elicit participants' meaning-making with respect to their personal experience of the transition process during the COVID-19 pandemic. Interviews were approximately 1 h in duration. On completion of each interview, participants were thanked and debriefed. They were notified as to how the study findings would be disseminated and signposted to relevant contacts should they require additional information, or felt in need of support in relation to any emergent issues.

### 2.4. Analysis

An in-depth, inductive and iterative cycle of analysis was conducted in accordance with the set of "common processes" and revised IPA terminology outlined by Smith et al. (2022, p. 75). Each transcript was formatted for analysis (wide margins and double spacing) and read several times by author 1 and author 2 for familiarity and to ensure the analysis was centred on each unique participant. For each case in turn, exploratory noting was undertaken independently by author 1 and author 2, and salient features and researcher reflections were annotated in the right hand margin and then discussed to consider the developing focus, and to enable the triangulation of the data. Individual analysis and the construction of experiential statements for each case were conducted by author 1 and annotated in the left hand margin. These created a synthesis of the crucial content from the exploratory notes, capturing both original voice and interpretation. Following careful

clustering of these statements, author 1 generated a set of personal experiential themes (PETs). These were mapped to the original transcript and supported with illustrative quotations to ensure the analysis was firmly rooted in the data. This process was repeated for each transcript and the emergent analysis was reviewed by author 2, resulting in some minor renaming of PETs. Author 1 proceeded with a cross-case analysis to identify patterns of similarity and differences in the individual cases. A preliminary set of group experiential themes (GETs) was developed to capture an understanding of participants' experience at a group level. The analysis was again reviewed by author 2 to ensure that all of the proposed themes were well represented in participants' voices and that the naming of themes captured their essence. This led to some further refinement and a final set of GETs were agreed on (see Table 2).

**Table 2.** Group experiential themes (GETs) and subthemes.

| Group Experiential Themes (GETs) | Subthemes |
| --- | --- |
| TRANSITION WAS A TRAUMATIC PROCESS | Dismantling of the professional teaching academic—"[My role] is a never-ending treadmill"<br>Unique stressors in the digital teaching and learning environment—"It felt like screaming into the void at times" |
| RELATIONSHIPS AS A SOURCE OF SUPPORT AND STRAIN | Strength and resilience through connectivity<br>Navigating toxic relationships |
| OPPORTUNITIES FOR LEARNING AND GROWTH | Recalibrating professional identities<br>Championing hybrid working practices for learning and wellbeing |
| SURVIVING AND INSPIRING THE MENTAL WELLBEING ENVIRONMENT | Student and staff wellbeing are intrinsically interconnected<br>Supports and barriers for staff mental health and wellbeing |

## 3. Results

### 3.1. Summary of Findings

A cross-case analysis of PETs from the three individual cases yielded four GETS: Transition was a traumatic process; Relationships as a source of support and strain; Opportunities for learning and growth; and Surviving and inspiring the mental wellbeing environment. For each GET, a set of subthemes was elicited (see Table 2). Pseudonyms were used to maintain the anonymity of participants.

### 3.2. Transition Was a Traumatic Process

Participants experienced feelings of uncertainty and distress by the sudden upheaval in their working lives. Against the backdrop of a global health pandemic, new working regimes created extra demands and high levels of stress for teaching staff. The transition process was perceived as a collective trauma which Katie felt would take time to recover from:

> *It was an unhealthy transition. We were all going through it together but, at the same time, I felt that I was having strips torn off me and looking for guidance and not really getting it. So it was a really, really difficult transition, the simplest way [to describe it], it was traumatic, and something that I still very much feel I'm recovering from, and everyone around me, you know, working in higher education* —Katie

Two subthemes were constructed to organise key contributing factors to participants' shared experiences of trauma during the transition process. The first, Dismantling of the professional teaching academic, encapsulates how the role of a teaching academic has

become increasingly onerous and dehumanising. Alice described how her professional confidence was shaken and the internal pressure she put on herself to rise to the perpetual challenge of high performativity which ultimately led to burnout:

> *It was this internalised pressure to produce more and more and more to prove yourself . . . I felt like a balloon. I mean, you keep blowing, blowing, blowing and at one point it's going to explode. That's how I felt and I did explode at some point* —Alice

The intensification of workload and ever-increasing list of tasks to complete was echoed by Clara who felt the demands were limitless:

> *I think the demands [on teaching academics] are constant—you have the extra survey to run, you have the extra thing to log in to and it's non-stop, it's endless* —Clara

The work burden was further compounded for Alice by a lack of empathy which she felt partly stemmed from ambiguity about the role of university academics which is often misunderstood by those outside higher education:

> *People have these misconceptions about what teaching in higher education entails. They think we have a lot of free time; we don't. Whenever I was moaning to my friends or to my husband, they'd make me feel like there was something that I was doing wrong, that I wasn't cut out for this job, or I couldn't manage my time effectively or I needed to develop a bit more professionally* —Alice

Participants' sense of professional self was characterised by a lack of power and agency over their time and work tasks. Micromanagement (e.g., constant checks on staff and their lack of consultation in decision-making) was de-stabilising. Both Katie and Alice felt that their own needs were not prioritised, nor even recognised, while the expectation was that staff would go above and beyond to meet the demands of students and managers.

> *There was no autonomy to have your own boundaries at all. So whatever the students asked for, you had to find a way to meet that. I remember we were being told what we had to do and every time we tried to share and say, 'Oh, I've tried this out and actually this could work. . .' No. . . so whatever we were sharing, ideas of good practice or efficient ways of working, it just wasn't listened to. I think that feeling of not being listened to when they felt so commonsensical—we were only asking for the little things, just a little bit of flexibility to make our working conditions feel easier* —Katie

> *She kept calling and calling and calling. I didn't even want to go out for a walk in case she [my manager] called. "I had quite a few arguments with my husband about working this late, or he would tell me off every time I answered the phone [from work], and it was hard. And he was right. I shouldn't have done that, but it was this, you know, this pressure that I had to prove to her that I am actually working. It took me quite a lot of time to be able to stand up for myself and protect myself and my own time* —Alice

The second subtheme, Unique stressors in the digital teaching and learning environment, refers to distinctive threats to work wellbeing associated with the rapid transition to online teaching and learning. Participants were thrown into a steep learning curve with high expectations placed on them to keep calm and e-teach on: *"[I was told] This is the technology we use, just play around with it and you'll get there. I did get there but it was time consuming and stressful for me"* (Alice).

However, participants felt largely unsupported in the rapid transition online, while the absence of appropriate training combined with a lack of buy-in to new procedures prompted anger and frustration. In the immediacy of the transition, dissonance between participants' perceptions of effective pedagogy and new delivery modalities negatively impacted their teaching experience:

> *It felt like we were suddenly being asked to do more with less capacity—suddenly having to become really adept at technology and suddenly like having all these expectations put on all this, but there was just no preparation for it. It was like 'Right, well, now we're in a pandemic and students are having to be taught online. You now need to produce this;*

> *you need to get this ready. You need to learn to do this. You need to be offering this.' And so suddenly our role kind of multiplied. Obviously in a face-to-face lecture, you've got that human connection and so [online] it felt like screaming into the void at times, to be honest* —Katie

The unique affordances inherent in a digitally-based infrastructure created novel conditions where the boundaries between the working day and personal time became blurred. For example, participants experienced the pressures of remote presenteeism and 24/7 online accessibility:

> *Because we were working online they expected us to be constantly available, like 24/7 and expected us just to pick up the phone. I had to take time from my own personal time to help students out, evening times or during my research time. I would work on weekends because there was no other way I could do it* —Alice

> *So we all seem to be working more than we ever have because we now have that immediacy of contact with online options; it feels like you're constantly accessible. We are worked to the bone. It was that immediacy of contact with the students. We found that we were contactable at all times of the day. We were responding at weekends and evenings. All the rules went out the window* —Katie

Conversely, the absence of (or unreliable) technology was also a stressor. New teaching and learning regimes required access to the internet for the majority of services, a responsibility which Katie felt was put on her shoulders, as it was assumed staff would be sufficiently digitally-enabled. This expectation added to the stresses already incumbent on staff when the physical classroom is removed:

> *There was a really distinct moment where suddenly there were all these rules, but they were not considering accessibility. I said to my manager, 'the staff themselves might have accessibility needs' like we're assuming the staff had high speed internet and computers and chairs. I said, 'Are we getting any budget?' because my husband came home the same day, and he was given a few hundred pounds—We got nothing. It was like, 'Use your own stuff'* —Katie

### *3.3. Relationships As a Source of Support and Strain*

Social relationships were a central thread in the transition experience and participants reflected on how relationships with other university staff became either a pivotal source of support or an extra burden. Two subthemes encapsulate the powerful impact of key interpersonal relationships. The first, Building strength and resilience through connectivity, highlights the beneficial effects of positive, healthy relationships. Typically, work colleagues (at the same or similar professional level) were seen by participants as sources of mutual support: *"Daily support and communication with each other makes things much easier. It makes a difference when you're working in a team where you feel that you belong"* (Clara). A strong sense of group belonging emerged which was emotionally bonding, and collegiality supported participants healthy wellbeing:

> *We were in the same boat together, there was an understanding and support from colleagues which meant a lot. It's the venting and having a group of people to share a common experience. Just talking informally with colleagues and saying this is what happened today and asking, 'What about your day?' It's kind of therapeutic"* —Alice

> *I think that actually in the moment, there was an immediate sense of pulling together and helping each other out; it very much felt as though we'd entered real survival states. It was a small cluster of us and we kind of reached for each other in one of those moments of desperation and frustration*" —Katie

Poignantly, counter to this restorative narrative, Katie reflected on the potential negative effects of group unity through a collective traumatic experience which can manifest in magnified feelings of negativity and hopelessness:

> *We did those typical things that everyone did in the pandemic, like WhatsApp groups, for those moments, all those outlets to sit and speak together. But, I think, one of the risks of those types of scenarios is that if you are feeling very low on capacity and then you get together, that just becomes a snowball effect of negativity. So we kind of, sometimes, got backed into a corner together. We were, like, 'Well these are all the problems', but we just couldn't find a way out of it* —Katie

For Alice and Katie, relationships with students showed remarkable resilience to the 'Covid shock' and rapid switch to digital interfaces; strong tutor–student alliances were fostered through nascent online interactions. Remote engagement mirrored in-person pedagogies characterised by flexibility, nurturing trust and mutual support, and a strong focus on wellbeing at the heart of the encounter:

> *Some of the students I met for the first time online and it was a bit difficult because for me it means a lot to create a trusting relationship with your students and initially, I had difficulties in achieving that online, but I did get better. I got so many private [chat] messages from students telling me, "you're doing great" [it] gave me a confidence boost* —Alice

> *I think I have a really, really good relationship with students, and I think I generally maintained that quite well online during COVID. Because I was very much from the get-go—"Your wellbeing, you feeling OK means more to me than anything else, so we will be flexible"* —Katie

On the contrary, for Clara, the quality of some tutor–student relationships had declined, but this was not associated with difficulties arising from the switch from in-person to online teaching. Rather, Clara reflected on how some students saw their university as primarily providing a "service". Consequently, this manifested in unrealistic expectations on staff to deliver teaching in line with perceived notions of value "for the amount of money I'm paying". This disjunction became more intensified during the pandemic, and played out in disharmonious social interactions, impacting Clara's level of work satisfaction:

> *Oh, the attitude and the constant demands—it didn't feel as pleasant as other years. I don't know if it was the effect of COVID-19 for these students. They are more demanding, much, much, much more demanding and challenging. We had one case of a student who wrote, "for the amount of money I'm paying. . .[I expect more]" Incidents like this can affect your whole experience of teaching* —Clara

The second subtheme Navigating toxic relationships embodies the antithesis of relationships as a source of strength and resilience. Participants shared a common perception of "us'" (teaching staff) as a distinct community to "the university" (represented by management) and struggled to reconcile making the necessary adaptations to work regimes within an unsupportive performative culture. Participants were negatively affected by dysfunctional leadership which put the onus on staff to manage change in working practices and, if things fell apart, were held responsible. Katie recounts her negative experience of a staggered return to in-person campus teaching:

> *[We were told], 'So we don't actually have the facilities [in every room] for you to record your lectures [on campus], so what we want you to do is deliver your lecture and seminar for three hours, but for those students that can't come in, you're going to need to record [the same session afterwards] on top of that'. So we said, "What's the workload allocation?" [The answer was] 'There isn't one; we're in a pandemic, you're going to have to find a way'* —Katie

Furthermore, both Katie and Alice felt that they had been exposed to 'academic gaslighting' (professional invalidation) from their line manager. They reflected on how in work-related conversations unjustified criticism was directed at them which undermined their confidence and left them questioning their own abilities to perform their professional role effectively. This notion of induced negative self-assessment is closely interlinked with the subtheme, Dismantling of the professional teaching academic (see Section 3.2).

> *[My manager] sent me the most awful email and I remember sharing it with colleagues and saying, "This is not very compassionate; there's no empathy". I think it's like a way to silence you, isn't it? Because the thing I felt was shame, "Oh, I'm not doing well enough"* —Katie

> *I remember being told, 'Well this is academia; this is now academia in a pandemic, and maybe you're not cut out for academia because you have to be able to bounce back and be flexible, and to be responsive in the moment'. And I remember, that really stuck with me because I thought, 'Oh, Ok, I'm not made... I'm not strong enough for this role', and even logically, I knew that was wrong, but emotionally, that really, really impacted and influenced how I felt about my role within academia* —Alice

### 3.4. Opportunities for Learning and Growth

Work-related trauma during transition was linked to major upheaval in participants' working practices, the lack of institutional care and support, and experiences of dehumanisation in a work context. Nonetheless, participants recalled how, over time, they began to re-frame their approach to work and personal life, which impacted their behaviour. This is encapsulated in the subtheme, Recalibrating professional identities. For example, Clara describes how she came to a conscious decision to re-assert professional and personal boundaries and to prioritise a healthy work–life balance:

> *So, I choose to put up some boundaries. I like having the weekend without any work. It makes Monday feel so much different. So this is one of my lessons, I try not to work weekends. It's family time, friends time. Work is work. Work is not going to be there for you when you hear sad or happy news. So yes, work is a big part of our life, and it's rewarding, and I love it. And I would never quit my job, it's part of my identity, but it's not everything* —Clara

Katie recounts the personal shift she underwent from a passive acceptance of her situation and her negative self-perception, "*I'm an online lecturer and that's all I am*", to (re)claiming agency over her own time and setting new boundaries:

> *It's taken time to know that it's OK to have boundaries. I think something happened in the pandemic, I felt like I'm an online lecturer and that's all I am. There was this expectation that it should be the be all and end all, and it should consume all of who we are. I realized that actually, I don't want my university job to be all of who I am. I don't want to brag that I worked on a Saturday and a Sunday and in the evenings. I don't want students to think that they can contact me of an evening or a weekend. And so I think the biggest thing, it's taken me time, but I'm learning to speak out and say, "These are my boundaries and that is OK for me to have them" By not speaking out the truth about what we expect from our employer, we then become squashed by the system, and so I've become a bit braver* —Katie

A different aspect of learning and growth to emerge from the transition experience was linked to participants' imposed immersion in the digital environment, having navigated first fully online, and then blended teaching pedagogies, with limited support and mainly self-directed training. Despite the unique stressors associated with the online realm, integrating digital technologies was largely seen as a positive change. Participants shared an optimistic vision of how technology could be harnessed to improve both working practices and work wellbeing in the post-pandemic university experience. This is encapsulated in the subtheme, Championing hybrid working practices for learning and wellbeing.

Alice reflected on how the immediate need to digitally upskill had been challenging; however, having done so, she had developed newfound confidence in this domain:

> *Online teaching was a bit of a steep learning curve because I'd never done it before. There were some efforts from the university to support and guide us but in the end, it was down to the individual. Now I'm quite confident using all sorts of technologies. A*

*couple of years ago that's something I could never have imagined because I always had the perception that I'm not very good with technology* —Alice

While for Clara, technology-enabled, flexible working had benefits for both students and staff, helping to alleviate—if not eradicate—some of the workload burden and related stress:

*I think I'm more optimistic—not in terms of the workload but in terms of flexibility. All this week I'm working from home, and I like this [blended] routine of working from home and going in and seeing my colleagues and interacting with my students* —Clara

Teaching staff were pivotal in embedding new working practices during the transition and shaping the outcome of transformative processes. Staff 'on the front line' developed expert insider knowledge for managing effective change, as Katie reflects on the lessons she has learned:

*I think it's knowing that people need transitional time, time to acclimatize to change and difference. I think it's being anticipatory, which universities often fail at. I think the solution was listening and having your ear to the ground at the moment and utilizing those good practices that were coming from the staff that were very much on the frontline of actually supporting students* —Katie

### *3.5. Surviving and Inspiring the Mental Wellbeing Environment*

The final GET relates to the mental health and wellbeing environment participants experienced at their respective institutions during transition. This encompasses perceptions of personal and institutional responsibilities alongside staff experiences of support for, and barriers to, healthy wellbeing in their learning communities. Two closely related subthemes were developed, the first is, Student and staff wellbeing are intrinsically interconnected.

Participants expressed an intrinsic interconnection between staff and student wellbeing. Although academic staff are expected to signpost students experiencing significant difficulties to specialist services, participants revealed a strong personal concern for their students' mental health and an obligation to help, despite the emotional cost.

*You're the first reference person for them as their academic tutor so you need to be aware of what is happening in their lives. You have to deal with lots of problems that they are facing as sometimes they disclose to you. I've often felt that I have been adversely affected by their stories; it can be very emotional* —Clara

Katie also felt a strong commitment to student welfare and consistently had a high volume of students disclosing significant difficulties to her, *"I met them [students] on a one-to-one basis if they needed it, I probably burnt myself out thinking about it, I just wanted them to feel ok"*. Staff's own wellbeing was put at risk by the lack of training and provision available to help them support their students' mental health. For Katie, this became overwhelming and ultimately led to compassion fatigue:

*There's only so much of people's problems that you can listen to. You got to the point where you just sit there and a student would be like, "My grandma died. My aunt has died. I 've not got a computer to do my work. I'm living in a 1-bedroomed flat with four family members. Stuff, you were hearing. And I remember saying to one of my middle managers, 'I'm having to disassociate. . . I can't take it on". I said, "It doesn't need to be that way, if we were given some support to be able to support the student"* —Katie

Nonetheless, Katie's attempts to convey the struggles she (and others) were encountering to her line manager were repeatedly frustrated, which she attributes to the precedence universities give to driving 'the business' over caring for staff:

*They [the university] were just taking from us and not realizing the impact that was having. We were obviously trying to also cope through the pandemic and so I kept saying, "If we don't look after the staff, we can't look after the students". I was so angry all the*

> *time because it was like, "Why don't you see the impact of these short-minded decisions on our wellbeing"? This is all business driven, this is all money driven* —Katie

This is further borne out by Clara, who was frustrated by the patent disjuncture between university directives to support students and those directed at staff, highlighting systemic failures in her institution's duty of care to staff:

> *It's about promoting what is available for the staff as well, like we do for the students. How many times have you sent an email informing them [students] about all the services the university offers them? I have never received anything like that for me* —Clara

While student mental health was seen as a priority at the university (and individual staff level), the perceived lack of institutional concern for staff wellbeing and the sense of de-humanisation are captured in Clara's simple self-reflection on her professional standing, "*I'm very replaceable at my workplace*". A shared belief that a culture of care for staff wellbeing was absent is incorporated within the subtheme, Supports and barriers for staff mental health and wellbeing:

> *My own experiences led me to believe that [name of university] do not really care about staff mental health and wellbeing, and this is something that I carried with me throughout the pandemic. I knew that I could not rely on them [my university]* —Alice

For Katie, institutional failure to support staff wellbeing was keenly felt in key decisions that were made during the transition process, for example, moving from exclusively online to blended learning delivery models:

> *It was just such blatant disregard [for staff]. They [the university] said, we want to make sure we are flexible for the students who may not be able to come back; they could be shielding and they could have caring duties. The staff, they didn't ask anything about that; we were just expected to go back* —Katie

In stark contrast, the support and sense of value Clara received from her colleagues made her feel safe and helped her to maintain her own wellbeing:

> *I feel valued by my colleagues but the institution, no. It's a corporation now. The team make me feel like I belong. You know they are there, no matter, we support each other. So it's informal, but we are always there for each other* —Clara

Similarly for Alice, "Because we were in the same boat together, there was an understanding and support from colleagues which meant a lot".

For participants, informal networks were those that could be relied upon and occupied the spaces where more formal support mechanisms were either unavailable, unsuitable, or simply unknown:

> *No-one is aware, or few people are aware [of support services for staff] and I think there isn't a lot, the university doesn't promote it much. So, unfortunately, you reach the worse point, the burnout* —Clara

Finally, for Katie, prioritising student wellbeing, while lacking organisational support herself, had put her own health at risk. Nonetheless, her personal journey through the transition led her to a better understanding of how mentally healthy universities could be nurtured to benefit the whole learning community:

> *I've learnt that wellbeing has to be central in university spaces, for both students and staff—I think collaborative wellbeing. So really from the get-go, meeting students and setting the kind of tone of what type of community and culture you want to create, whether that be face-to-face or online* —Katie

## 4. Discussion

This study explored university teaching staff experiences of transition through the COVID-19 pandemic which had catalysed radically new working regimes, characterised by the rapid reliance on digital technologies and virtual learning spaces to replace the physical

classroom. Four group experiential themes (GETs) were developed from first-hand accounts of this profoundly disruptive human experience: Transition was a traumatic process; Relationships as a source of support and strain; Opportunities for learning and growth; and Surviving and inspiring the mental wellbeing environment. Findings support some of the extant literature relating to multiple and multidimensional transitions, and mental wellbeing within the university context. Moreover, crucial insights were gained with respect to unique transition processes operating during the pandemic and key factors associated with personal change and wellbeing. Important lessons can be gleaned from participants' experiences of adapting to change, overcoming major challenges, and transformation through trauma to personal growth. The discussion of key findings that follows is organised under the four overarching GETS to keep the discourse firmly rooted in the lived experience of participants.

### *4.1. Transition Was a Traumatic Process*

Successful transition from face-to-face to online teaching requires time, planning, resources, and appropriate training for the staff who are responsible for curriculum and assessment design as well as remote delivery (Bowyer and Chambers 2017). Teaching staff must be enabled to develop new pedagogies to support student engagement with technology as features unique to the virtual realm require additional aptitudes and therefore specific pedagogical training is required; moreover, strong teacher–student relationships enhance student motivation for engaging in online learning (Akram and Li 2024; Smith 2016). The urgency of the 'Covid shock' prevented such steps towards best practice from being taken, while institutional pressure to maintain 'business-as-usual' (Wray and Kinman 2021) left participants in our study feeling stressed and destabilised by the rupture from the safety of traditional working patterns. Although the imposition of heavy workloads and shifting expectations around the role of a teaching academic predate the pandemic (Jayman et al. 2022), the transition process exacerbated already strenuous working conditions. Participants lacked power and agency over their time and work tasks and a culture of micro-management contributed to their sense of dehumanisation and diminishing professional status. These experiences align with the wider literature (e.g., Watermeyer and Crick 2021), highlighting a systemic culture in UK universities of high stakes performativity, exploitative work regimes, and disharmonious relationships between academics and management.

Pertinently, our participants' sudden immersion in the digital realm in the immediate aftermath of transition was a major cause of work-related stress. The lack of appropriate training or support, or consultation on hastily introduced new practices, were specific, significant stressors. Wider research by Kaseem and Mitsakis (2023) concluded that enforced overreliance on technology was a major factor in elevated stress for university staff, while digital fatigue and de-motivation were rife (Watermeyer and Crick 2021). Given participants' lack of say or support with nascent digital modalities, they felt frustrated and lacked initial buy-in to new pedagogies; their experiences entirely contradicted best practices for managing effective online transitions (Akram and Li 2024; Bowyer and Chambers 2017; Smith 2016). Sadly, these circumstances appear to echo the broader experience of teaching academics when new technologies are introduced that directly impact their professional role, whereby their views and opinions are routinely undervalued or ignored (Bastos et al. 2021). Woods et al. (1997) described how the personal self can be inextricably bound to teachers' professional role and identity. Our participants' voices were marginalised and the lack of consultation in relation to change processes diminished their self-efficacy and sense of professional value, exposing them to an elevated risk of poor mental health.

Our findings revealed that the experience of working in a high-intensity, toxically stressful environment, in which professional and personal needs were largely neglected, was perceived by participants as traumatic. Stressors unique to the digital shift, such as 24/7 availability and total dependence on reliable technologies, contributed to low work satisfaction and poor wellbeing. Although the deleterious impact of exclusion on

students finding themselves not connected or with limited access to the Internet is well-documented (Office for Students 2020), less attention has focused on staff accessibility issues which added to the stresses already incumbent when the physical classroom was removed. Employees who are exposed to trauma, at work or otherwise, may experience psychological symptoms that negatively affect their health, productivity, and relationships (Brooks et al. 2019), and this was reflected in participants' accounts of emotional distress, frustrations with work tasks, and disharmonious relationships. Emergent, post-pandemic literature has recognised the need for developing more trauma-informed approaches in employee management across sectors (Choitz and Wagner 2021). Furthermore, a study by Gutman et al. (2024), exploring the experiences of diverse academic and professional staff during COVID-19, highlighted the need for universities to provide targeted support and validate the traumatic experiences of university staff during crisis situations.

### *4.2. Relationships as a Source of Support and Strain*

The current study highlighted the primacy of interpersonal relationships in navigating the transition through the pandemic. Our findings aligned with research by Zike and Illingworth (2023), showing how perceived levels of support from colleagues and line managers directly influenced feelings of self-efficacy and wellbeing for staff. Participants in our study identified collegiality as a lifeline of support, while the 'safety' of peer networks instilled a sense of belonging to a working community. Online group networks facilitated regular social contact and ongoing support through periods of lockdown which participants strongly valued and relied on. This suggests, despite reservations from Long et al. (2021), that online interactions can increase perceived social support and offer a valid proxy for in-person connections when circumstances preclude physical encounters. Nonetheless, for at least one of our participants, Katie, the collective sharing of stressful and traumatic experiences could become counter-restorative, and was manifest in magnified feelings of negativity and hopelessness.

Related research with a student population (Schiller et al. 2023), exposed potential difficulties in transferring in-person relationships to the online realm. In part, this was attributable to the multiple, newly formed relationships characteristic among university students. As such, students may have been at an elevated risk of social isolation and in greater need of support during lockdowns compared to pre-pandemic cohorts. Certainly, our participants experienced high demand for emotional and welfare support from their students which they felt compelled to provide, despite lacking appropriate training or any supervision themselves. This aligns with Knight et al.'s (2021, p. 8) suggestion that the online classroom had created "a unique cohort of students with unique needs". While overall, our participants were able to develop strong tutor–student relationships online to help facilitate both learning and wellbeing support, the lack of institional back-up for staff left Katie feeling emotionally vulnerable and needing to disassociate to protect her own mental health. Research by Giladi (2022) revealed that younger lecturers reported more pandemic-related challenges than their older counterparts. Katie was over 10 years younger than Alice or Clara and had just two years of experience working in higher education compared to her co-participants who had both accumulated 15 years of service. Some of Katie's responses tentatively support Giladi's conclusion that experienced staff might feel more confident and better-equipped at dealing with the range and volume of difficulties arising.

The strong and supportive social relationships our participants benefited from with work colleagues were not replicated with management. Both Katie and Alice felt that they had been exposed to academic gaslighting from line managers which further diminished their sense of work-related self-efficacy and wellbeing. Academic gaslighting is an insidious form of bullying—not a single incident but occurring in relationships over time—involving the manipulation or invalidation of a person's academic abilities, accomplishments, or experiences (Sousa and Clark 2019). Katie's and Alice's experiences left them feeling disempowered and questioning their value as members of their university communities.

Academic gaslighting can lead to psychological difficulties including emotional stress, low self-esteem, a loss of confidence, and diminished self-efficacy (Aurangzeb et al. 2023; Christensen and Evans-Murray 2021), symptoms reflected in Katie's and Alice's accounts.

Worryingly, an investigation led by the Guardian (Marsh 2018) found that nearly 300 academics in senior positions across the UK had been reported for bullying; the true extent of the problem is unknown. Arguably, our participants' experiences of toxic hierarchical relationships are reflective of external market forces influencing the inner workings of universities and the cascade of performativity pressures down the managerial chain. In a highly marketised higher education system, students can perceive themselves as purchasing a product (their degree) in exchange for providing pecuniary reward (their fees) (Molesworth et al. 2009). Here, staff have been repositioned from educator to service provider, a proposition which closely resonates with Clara's view of her deteriorating relationship with students during the pandemic, which she puts down to their escalating demands for "more for the money", and the low regard she believes she is held in ("I'm easily replaceable") by her institution.

### 4.3. Opportunities for Learning and Growth

The transition experience for many teaching academics through the COVID-19 pandemic was characterised by work intensification, exploitative practices, disharmonious relationships with management, and elevated stress and anxiety (Cleland et al. 2020; Shankar et al. 2021; Watermeyer and Crick 2021; Wray and Kinman 2021). Certainly, first-hand accounts from participants in our study mirrored these collective features. Beyond this, through an iterative process of meaning-making, our participants' experience of transition was deemed traumatic; their professional identities were dismantled and unique stressors associated with the specific context of the pandemic presented elevated risks to their mental wellbeing. Nonetheless, participants showed enduring resolve and resilience, enabling them to re-frame their approach to their work and home situations, demonstrating personal development and growth. Posttraumatic growth in "ordinary" work is described as the transformative positive change that emanates from struggles with highly challenging life crises (Tedeschi and Calhoun 2004) and can be understood as both a process and an outcome. Growth occurs through a recursive cycle of emotion regulation and sensemaking (Maitlis 2020). Social support and attentive companionship—which all of our participants recounted experiencing—can facilitate such growth which occurs through acknowledging the emotional impact, analysing the significance to the self, and constructing a new narrative to explain self-transformation (Pals 2006). Posttraumatic growth can enhance wellbeing and prompt constructive work-related changes such as a positive work identity and career proactivity (Maitlis 2020). Our participants acknowledged the psychological strain they had experienced during transition and the negative impact on their emotional wellbeing. However, over time they were able to adapt their practices and re-frame their relationship with work more positively. This included embracing opportunities for digital technologies to enhance their own and their students' experiences. These findings align with the wider literature (El-Soussi 2022) which describes how, during the pandemic, academics' professional identity suffered episodes of instability as tensions arose between their self-perception, their beliefs, and their practices. As previously stated, professional identity is not static, but a continuous process across the career trajectory, sensitive to both cultural and pedagogical flux (Adams et al. 2006; Avidov-Ungar and Forkosh-Baruch 2018).

### 4.4. Surviving and Inspiring the Mental Wellbeing Environment

The current findings highlighted how student and staff wellbeing were intrinsically interconnected. The perception of a shared learning community and on-hand support helps to engender social interaction and dispel feelings of isolation (Muilenburg and Berge 2005) and applies equally to students and staff. Nonetheless, while our participants felt that students' mental health was a priority for their institutions (and for them), their own wellbeing was consistently overlooked. Likewise, Knight et al. (2021) found that academic

staff did not believe their own health and wellbeing was sufficiently supported by their managers. This lack of precedence is also reflected in the scant literature on the impact of the pandemic on staff mental health and wellbeing compared to students. A review by Kaseem and Mitsakis (2023) found only twenty studies, and just three from the UK. The current study helps to fill this extant gap.

A concerning absence of care for university staff wellbeing has been previously documented (Jayman et al. 2022; Mountz et al. 2015; Morrish 2019). Moreover, a lack of recognition at the institutional level that student and staff wellbeing are intrinsically interconnected is manifest in the separation of staff and student support systems. This strategy reinforces perceptions of university staff as service providers (including for wellbeing support) and students as the beneficiaries of these services (Molesworth et al. 2009). Unhelpful narratives frame student and staff wellbeing as oppositional (Brewster et al. 2022), yet education staff typically identify a high sense of responsibility for their students' mental health, despite the risks to their own wellbeing (Bokolo et al. 2020), and this was borne out in the current study. Pastoral support is generally highly valued by students but is reliant on staff capacity for welfare responsibility and this requires personal skills and appropriate training (Hughes et al. 2018). Otherwise, this can become burdensome and detrimental to staff's own wellbeing which, in turn, negatively affects the support staff can offer their students (Brewster et al. 2022), as was the case in Katie's experience.

Clara's frustration at the wealth of services her university targeted at students compared to those directed at staff is visible at the sector level (Brewster et al. 2022). The provision of mental health literacy and training in universities is often conceived of as something designed for staff to help students, rather than being universally relevant. This aligns with the wider discourse around the marketisation of higher education with students repositioned as customers paying for a service which university leaders are financially motivated to optimise (Collini 2016). Organisational culture has the power to determine and generate a sense of *not* belonging at work, thus institutions have a pivotal influence in fostering their staff's sense of belonging in the workplace and enhancing their wellbeing (Waller 2021). Belonging is a fundamental human need and, if hindered, has a significant detrimental impact on psychological wellbeing (Baumeister and Leary 1995). Furthermore, the importance of the "cohesiveness" of wellbeing support across the university community is a key theme in the UK Student Mental Health Charter, which advocates mental wellbeing for the whole university and a holistic approach to institutional wellbeing (Hughes and Spanner 2019).

## 5. Strengths and Limitations of the Current Study

This study sought to explore the marginalised voices of university teaching staff and add to the literature on transition through the pandemic which predominantly documents the student experience. Our findings add to the current dearth of voices and highlight how a better understanding of staff experiences and their essential contribution to change processes can inform more effective strategies for managing major transitions in university settings. In this respect, the authors' response to Hardman et al.'s (2022) provocative question—"Does anyone even notice us?"—is a resounding, "Yes!" These findings are particularly pertinent in the current context of transforming mental health provision in universities and creating hybrid in-person and digital pathways to tackle escalating demand across a spectrum of needs. Findings have exposed the fundamental need for universities to integrate their mental health provision for the whole learning community, as tackling student mental health is inextricably linked to supporting staff wellbeing. Future research should be directed at exploring creative solutions and developing truly collaborative, holistic approaches by employing action research methods which involve all key stakeholders and affords them equal voice.

A key strength of the current study is its commitment to IPA. As Reid et al. (2005, p. 22) insists, "less is more" with IPA, and examining fewer participants at greater depth is desirable. Thus, IPA offers an ideographic lens to home in on the convergence and diver-

gence of the experience of interest (Brooks and Wearden 2006). This requires "a reasonable degree of homogeneity" among "a relatively small sample of cases" (Motta and Larkin 2022, p. 63). In the current study, three participants were purposively selected on the basis of their commonality of experience and the importance of that experience to each of them. According to Staller (2021) purposeful sampling lies in selecting information-rich cases from which one can learn an in-depth understanding about issues of central importance to the research inquiry. While for Emmel (2013, p. 141), "cases are chosen because they contribute to creatively solving the puzzle under investigation and present as convincing a case as can be mustered with the resources to hand". The authors have demonstrated this by presenting a transparent evidence trail which draws explicit connections between the rich data set and the researchers' interpretations. Unlike quantitative approaches, qualitative researchers can reflect on the adequacy of their sample throughout the research process (Staller 2021). In the current study, the researchers concluded that adding more participants would not change or influence the themes elicited thus far and thematic saturation had been reached.

Nonetheless, the small sample size was limited to white cis-gender women from universities in London or the south of England. Thus, the findings cannot be assumed to apply to the wider population of university teaching staff. This lack of diversity in participants and geographical spread limits the transferability of the findings. Research suggests that some subgroups of university staff may have been more vulnerable than others during the pandemic and consequently more deeply impacted (Schmidt-Crawford et al. 2021). For example, global majority groups were particularly affected and disadvantaged by the pandemic (Katikireddi et al. 2021) and their voices are absent from this study. Furthermore, research by Gutman et al. (2024) highlighted the need to consider intersecting identities including age, gender, disability, care-giving status, and sexual and ethnic identities. Also, the perspectives of other (non-teaching) university staff warrant consideration and future research should focus on the transition experience of university managers and professional services staff. A holistic understanding from the perspectives of *all* key stakeholders can better inform major transformations in university settings.

As a meticulously idiographic method, IPA does not concern itself with making empirical generalisations. However, in terms of generating greater knowledge on a given research topic, quantitative and qualitative approaches can be seen as complementary, offering answers to different research questions. A quantitative approach, such as a questionnaire survey of a large sample population, provides more generalisable conclusions from a larger number of participants. For example, Giladi (2022) measured lecturers' professional identity in dealing with the COVID-19 pandemic and found statistically significant associations between age, years of seniority, academic rank, and work permanence. Future studies could look at mixed methods research that draws on the strengths of qualitative and quantitative approaches while mitigating some of the main limitations of a single method design. Moreover, complementary approaches provide opportunities for participants to have a strong voice, enabling different avenues of exploration that provide a breadth and depth of evidence to enrich our understanding.

## 6. Conclusions

Findings from the current study can be extrapolated to help inform universities' approach to managing major transformations in the post-pandemic education landscape and are particularly pertinent in relation to the ongoing transition in mental health and wellbeing provision which includes integrating digital mental health interventions (DMHIs) to help tackle the student mental health crisis. Despite the clear benefits of digital platforms for self-monitoring and signposting students to both online and on campus resources (Wies et al. 2021), robust evidence for the effectiveness of DMHIs is currently lacking (Harith et al. 2022; Lattie et al. 2019). While it is broadly agreed that digital services can be utilised further as part of a hybrid ecosystem in universities, the current study has shown how clarity, coordination, and collaboration between key stakeholders is crucial for

avoiding major pitfalls during transitions. Certainly, technology moves faster than cultural changes can be implemented; nonetheless, there is a clear imperative for universities to focus on consultation with *all* key stakeholders, and crucially teaching staff, to help build a shared narrative around needs-led solutions.

Plainly, a fundamental realignment of the way mental health and wellbeing are seen and approached in universities is required. Recent policy documents (Hughes and Spanner 2019; De Pury and Dicks 2020) reflect a broad consensus on the importance of a whole university approach. Universities UK (2020) have advocated the need to combine preventive, health promotion initiatives (e.g., healthy lifestyle) with nurturing healthy cultures and environments that are co-produced with students and staff. Naturally, this entails a significant rebalancing of current university resources and priorities and a cultural shift away from an implicit reliance on staff individual resilience to co-created models of collective support. In line with this rationale, all stakeholder engagement is needed to ascertain the acceptability and utility of digital wellbeing and mental health support for university communities. Evidence-based, digital mental health solutions have huge potential to address needs in ways that traditional in-person service models cannot (e.g., by widening access and enabling earlier intervention) (Srivastava et al. 2020), allowing universities to leverage existing resources more efficiently and effectively. Research also suggests that digital pathways are deemed acceptable and beneficial by students and can reduce stigma (Pankow et al. 2023). Even so, undesirable factors co-exist, including the generation of a digital divide which excludes and disempowers those students (and staff) without technology, or access to quality devices and/or reliable Internet connections. Clearly, digital solutions have a key role to play alongside traditional services as part of a wider ecosystem; however, to realise their transformative potential requires genuine collaboration and partnerships. Digital technology is not the main story here, as we continue to adjust to a post-pandemic higher education landscape. Rather, the sea change in university culture required with respect to mental health care must take centre stage, whereby all members of the learning community have a voice, feel a sense of value and belonging, and are recognised and supported as active change agents in transformative processes.

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