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# Bereavement during employment in Higher Education (UK): 2023 Survey Report

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# Bereavement during employment in Higher Education (UK) 2023 Survey Report

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## **Executive Summary**

Very little is known about the bereavement experiences of staff in Higher Education Institutes (HEIs), despite bereavement being a common experience and one that can impact both one's wellbeing and work performance. Members of Open Thanatology at the Open University surveyed staff across universities, open to all levels and roles, to find out more about staff knowledge of their institutions' policies and their own bereavement experiences. A total of 539 responses were received within a three-week period in early 2023; over 70% of those who responded had experienced at least one bereavement whilst working. This document reports descriptive statistics based on the survey findings. Topics covered include: the ease of understanding any available policy, if workload was covered in their absence, sufficiency of leave period, and support from line managers and colleagues. The survey, and related reports such as this, set the scene for generating improvements within the sector for university employers to become more compassionate and champion staff wellbeing. On page 17 we provide our five recommendations for HEIs to improve workplace experiences of bereavement.

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# Introduction

Bereavement is an issue that unfortunately comes to affect everyone. In the UK, there is no legal right to paid time leave following a bereavement, except in the context where someone is a parent of child who has died. Nevertheless, many UK Higher Education Institutes (HEI) provide some form of leave to their staff following a wider range of bereavement experiences; this may sometimes be classified as compassionate leave or contingency leave. Overall, little is known about the bereavement support that is available to UK HEI staff and their experiences of accessing and using bereavement leave policies to determine their rights in these challenging circumstances.

Research indicates that informal bereavement support [1] and support in the workplace can be helpful, [2] and may mitigate against the need for professional bereavement support and the risk of prolonged grief. Nevertheless, studies have shown that depending on the support they receive, and the ongoing impact of the death, people may struggle to re-join the workforce after a bereavement. [3] Personal accounts have shown that HEI staff may struggle with workload and work content when bereaved. [4, 5]

Others have argued that accommodation, for example in the form of flexibility in assignment of tasks, workload and hours in office, are needed when returning to work following bereavement. [3, 6] There is a growing call on organisations to be more compassionate, [7] particularly by improving grief literacy and institutional support. This call has escalated since the COVID pandemic, as the scale and intensity of grief has been increasingly recognised, thus the ability of organisations to use policy approaches to ensure they set a supportive tone in



relation to grief and bereavement is viewed as key. [8] Within the UK, Hospice UK offers a <u>Compassionate Employers Workplace Wellbeing programme</u> designed to provide organisations tools and knowledge to support staff, especially with life-changing diagnoses and bereavement. Some HEIs already provide a range of wellbeing-related support to employees through dedicated websites and access to hotlines, which may include short-term counselling.

Research looking at general workplace provisions for bereavement leave has been published [3, 9, 10, 11] but none that is specific to UK HEIs' policies affecting staff. Corden notes that not only are there issues around grief and wellbeing in the workplace for the bereaved employee, but also considerations about financial cost for the business, managing the return-to-work process, and training needs of those who deal directly with bereaved employees. [3]

To address this gap around lack of research focusing on HEIs, we conducted a survey of staff experiences of bereavement in higher education institutions. This survey is a pilot study and aims to add to our understanding of these issues and provide insights for future research and knowledge exchange. This report provides a summary of the quantitative data from the study.



## Methods

#### **Survey Design**

The online survey was designed with a mix of open (free text) and closed (multiple choice) questions. Most questions were optional except for a routing question asking if the respondent had experienced a bereavement whilst working in an HEI. Data collected included demographics, knowledge of bereavement leave policies, and bereavement support experiences in the workplace. We asked a range of demographic questions to understand the diversity of our participants. The full range of questions is available upon request.

The survey was designed and run on Jisc Online Survey. The survey was open between 14 March 2023 and 2 April 2023. Responses were only recorded if the respondent clicked the 'submit' button at the end of the survey.

#### **Sampling and Reach**

The survey was open to all staff across all HEIs in the UK. Within the Open University, the Student Research Project Panel (SRPP – also review research with staff subjects) generated a random sample of 3,000 out of the possible 10,000 staff. This sample received an invitation to participate via their OU email address from an OU staff email address (authors EB or CAH). It was not known to the research team if anyone in the sample had experienced a bereavement and/or taken leave related to a bereavement whilst employed at the OU.



Participants from other HEIs were alerted to the survey via three main methods: social media (Twitter, Facebook and LinkedIn), academic mailing lists, and snowball methods via personal-professional networks. The research team disseminated links to the survey via these methods several times during the three-week survey period.

#### Analysis

This report is about the quantitative data from the closed questions in the survey. It provides the results using descriptive statistics; further analysis of the full dataset will be conducted at a future point. Descriptive statistics were produced for each question within the Jisc Online Survey platform. The percentage presented for each question is about the percentage of people who answered a particular way to the question rather than being a percentage of the total respondents; we have noted in the text where we have corrected this to reflect the percentage of total respondents. This difference occurs because most questions were optional to answer.

#### Ethics

This project has been reviewed by, and received a favourable opinion from, The Open University Human Research Ethics Committee, reference HREC/4598/Borgstrom. It was also reviewed by SRPP to ensure OU staff were not disproportionately burdened by the request to participate. The study was not funded.

All participation was voluntary with no incentives to participate. Respondents were told that by completing the survey they were consenting to their data



being used for research purposes. Due to the nature of the data, we have not made the data set available open access. We have not consented participants to enable Open Access data as we wanted them to feel they could freely share their knowledge and expertise.

The survey was designed for full accessibility on a desktop computer. Participants had the option to contact the project lead (EB) if they had a disability or an additional requirement that makes it difficult to complete the survey online.

Given the topic of the study, links to bereavement support services outside of HEIs were provided in the email invite and at the end of the survey. These ranged from general information about bereavement, to signposting services and hotlines. We acknowledge that the project team may be impacted by bereavement and their own grief during the project period and have mechanisms in place for members to access support, step-back from the project as needed, and for peer-support.





## **Summary of Respondents**

539 people submitted responses to the survey.

Demographics: The majority were from England (82%), with others in order of frequency from Scotland, Wales, Northern Ireland, Republic of Ireland, and Isle of Man. 75% of respondents were female, 75% were White (English, Welsh, Scottish Northern Irish, or British), and the most frequent age groups to respond were 56-65 (33%) and 46-55 (30%). Over 55% stated that they have 'no religion' with the next most frequent selection being Christian (37.3%). 81% do not consider themselves to have a disability. 90% identify as straight/heterosexual; others identified as either gay, lesbian, bisexual, pansexual, asexual, or preferred not to say.

Employment: 61% of respondents are in full-time, permanent positions, followed by 26% in part-time, permanent positions. 49% are in academic posts and 35% in professional-services, with smaller number in research-related, senior management, and support or infrastructure-related roles. To help promote anonymity, we did not ask respondents to identify which HEI they are employed by; this has limited the ability to separate results by institution.

A note about representativeness: For reference, the most recent Higher Education Statistics Agency (HESA) data (2021/2022) indicate that there are 233,930 academic staff employed across the sector. [12] This means that the survey was completed by less than 1% of staff across all HEIs. The timing of the survey – just after industrial action across 150 institutions and around end of term with high percentage of annual leave – and the topic (bereavement) may



have reduced the number of potential respondents. We are also cognisant that the survey sample is not representative of the sector since HESA data shows that 65% of staff are employed in full-time roles, 24% of whom are on fixed-term contracts and 51% of part-time academic staff on fixed term contracts. [12] The high proportion of permanent staff who replied to our survey is likely to be influenced by 3,000 OU staff randomly being invited to participate via an email from an open.ac.uk email address; the OU has a higher proportion of permanent contracts compared to the sector.





# **Key Findings**

#### Knowledge about one's institutional policy around

#### bereavement

We specifically asked several questions to identify respondents' knowledge about their institution's policy around loss. In response to the question – Does your institution have a policy for when staff experience bereavement – 57% said yes, 2% said no, and 41% said they were not sure. When asked if they knew where to find this policy, 52% said yes, 23% said no, and 25% were unsure (Figure 1). Only a minority (18%) of respondents had used the policy to support other staff (e.g. in the course of carrying out line management duties).

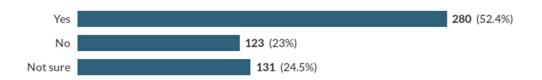


Figure 1: Responses to 'Would you know where to find the bereavement policy?'

Nearly 50% indicated they found their institution's policy neither easy or difficult to understand; 30% that they found it somewhat easy to understand and 16% found it very easy to understand. However, only 398 people responded to this question. Adjusted to reflect 'no response', only 11% of the total found it very easy to understand.



To help understand these responses, we included free text boxes. Whilst not yet fully analysed, indicative qualitative comments illustrate a range of knowledge and reactions to respondents own one's institutions' bereavement policy. This included comments about length of document, the reliance of the policy on manager's discretion, (in)ability to locate the document, and variance in amount of leave allowed within the policy.

# Respondents' own experience of bereavement whilst working in HEI

The majority of survey respondents had experienced a bereavement whilst working in an HEI: 36% experienced one bereavement and 38% experienced more than one. Of those who had experienced a bereavement, 38% said the leave they received was sufficient, 33% said it was insufficient, and 29% were unsure (Figure 2). Future qualitative analysis will seek to explore the free text comments linked to this question to understand the variation. The vast majority (89%) did not feel they needed to reduce their contractual working hours within the first 12 months upon return. However, the data showed some felt pressured to return to work due to financial circumstances (24%).



Figure 2: Answers to the question 'Did you feel that the bereavement leave provided was sufficient? This does not include any sick leave or annual leave that you may have taken following the bereavement.'



Nearly 50% felt their workload was covered during their period of leave, although 28% reported that it had not been covered and another 23% said 'other', indicating in comments that they did not take leave or that some workload was covered but other aspects were not. We asked if colleagues and/or students of the staff member were informed of the bereavement: people could choose multiple responses to this question. 39% stated that their line manager told others, 23% told other's in-person, and 27% told others via email/online communication with 5% doing so via an 'out of office' message. 26% stated that it was not announced (Figure 3).

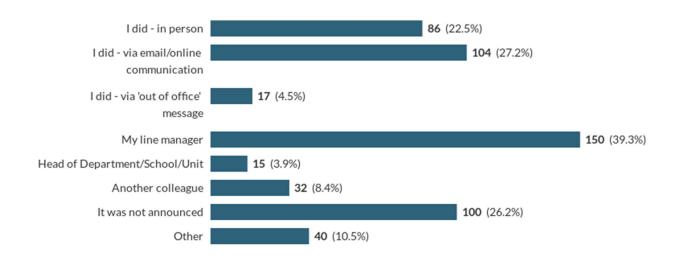


Figure 3: Answer to the question 'Who told your colleagues and/or students about your bereavement leave? You can select more than one option here.'

When it came to support, 61% reported feeling supported by their line manager on return, with 19% feeling unsupported and another 20% stating other (comments indicated a range of responses from 'no mention of bereavement



from manager', 'unable to remember', or 'they did not take leave'). Most people (65%) felt supported by their colleagues on return; 13% unsupported and remainder stated 'other'. Further qualitative analysis will explore these comments further as well as what people said was supportive.





# Discussion

The data in this survey shows a mixed picture in terms of the experiences that staff reported after a bereavement. Previous research has indicated that in a 12month period, 24% of the working population had experienced a bereavement. [13] So, although bereavement whilst working is not an uncommon experience, our data indicates that many staff are unsure of where to locate policies or report feeling that their leave period, if they took it, was not sufficiently long. This is important as other research across employment sectors has indicated that 2 million employees experience intense grief, which increases the likelihood that they will take more time off work. [10]

In our survey, 57% of respondents said their HEI had a policy. This is more than the 32% of employees being aware that their employer has a bereavement policy found in a survey done by Sue Ryder across sectors. [10] This difference may be due to respondent bias (those with experience of a bereavement being willing to take part) as well as HEIs being large organisations with many policies and having search-able intranets that people accessed during the survey (open text responses suggest some people did this). Some HEIs even have leave policies that can be accessed via Google (i.e., are not restricted to a password protected site). Moreover, by law, organisations must have a bereavement leave policy in the context of death of a child or stillbirth – so in theory we should expect 100%. However, in our survey we noted that the policy may have different titles other than bereavement, such as contingency or compassionate leave. Indeed, with our own institution there are different terms used across policy documents.



Most organisations are now aware of the importance of having policies which protect the health and wellbeing of their staff members. Such policies are important not only for the staff members by setting out what they can expect after such a death but are also important for organisations, as clear and unambiguous polices can help staff to set their expectations and improve satisfaction. While compassionate approaches require a degree of discretion, our data shows that staff do not necessarily know where to find information about leave or know how to make sense of it. Further analysis of the qualitative data will shine light on these issues further, particular in terms of leave length, use of manager discretion when applying policies and guidance, and wider sources of support within institutions.

There is a small but growing number of HEIs that identify themselves as compassionate employers or universities. <u>Vrije Universiteit Brussels</u> (VUB) is a pioneer in Europe for their action towards becoming a compassionate university, foregrounding grief in the university community through awareness raising, resource provision, and research. The <u>University of Worcester</u> is the first UK university to sign the Charter for Compassion, which is not exclusive to grief and bereavement but acting more generally with compassion and kindness. Other universities, like <u>Edinburgh</u> and <u>Westminster</u> claim compassion as one of their core values. Waddington recently edited a book arguing that universities are in need of more compassion, from acknowledging suffering to making meaning, feeling empathetic concern, and taking action.[14] We hope that this survey contributes to several of these steps and provides a basis for ongoing work across the sector to improve support for staff who are bereaved and create more compassionate workplaces.



### Recommendations

Based on the initial analysis of the survey data, we make the following five recommendations:

- Ensure a policy which sets out bereavement-related leave is easy-tolocate for staff
- 2. If line manager discretion is a feature of the policy, ensure managers are given training to know how to apply this discretion and are supported in making sensitive decisions
- 3. Discuss with the bereaved person how workload will be covered both during leave and upon returning
- 4. Discuss with the bereaved person if/how they would like colleagues/students to be informed about the bereavement
- 5. Foster a workplace culture that enables peer support from colleagues in the context of loss, by providing bereavement sensitivity training.

We anticipate further recommendations following the qualitative analysis of the data.



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