

Student belonging, mental wellbeing, and help-seeking at Durham University

Abstract

Previous research suggests there is a positive correlation between belonging and mental wellbeing, and that among students, belonging is associated with improved academic performance and positive experiences at university. This mixed methods research explores relationships between and experiences of students' sense of belonging, mental wellbeing, and help-seeking at Durham University. Durham is commonly referred to as an 'elite' institution, with a predominantly White student population, a relatively low number of international students compared to other Russell Group universities, and bad publicity around reports of inequality and lack of inclusivity. An online survey was completed by students (n=119) and semi-structured interviews were carried out with students (n=9) and staff involved in support provision (n=3). A range of theoretical and conceptual lenses are explored, with theories of structural violence, cultural/social capital and habitus, and broad understandings of mental wellbeing being especially relevant when assessing the findings. A key finding is that belonging was found to be a significant predictor of mental wellbeing. Several aspects of university life were seen to impact belonging, mental wellbeing, and help-seeking. The research contributes some detailed insight into student wellbeing and makes suggestions for improvement and further study.



Student belonging, mental wellbeing, and help-seeking at Durham University

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Master of Arts (By Thesis) in Anthropology
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2023

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List of Abbreviations

The list below defines the abbreviations and acronyms used in this thesis. The page where they are first defined or used is also provided.

| Abbreviation/Acronym | Meaning | Page |
|-----------------------------|---|-------------|
| COVID-19 | Name for the coronavirus disease and the virus that causes it | 8 |
| DSM | Diagnostic and Statistical Manual of Mental Disorders | 17 |
| EDI | Equality, Diversity, and Inclusion | 22 |
| EU | European Union | 24 |
| GDPR | General Data Protection Regulation | 30 |
| GHSQ | General Help-Seeking Questionnaire | 33 |
| GP | General Practitioner | 28 |
| IBM | International Business Machines Corporation | 35 |
| ID | Identification | 40 |
| JCR | Junior Common Room | 28 |
| LGBTQ+ | Lesbian Gay Bisexual Transgender Queer (plus other sexual identities) | 9 |
| LSE | London School of Economics | 70 |
| MCR | Middle Common Room | 28 |
| NHS | National Health Service | 27 |
| PCA | Principal Component Analysis | 37 |
| RDCRVB | Report of the Durham Commission on Respect, Values, and Behaviour | 24 |
| SHNA | Student Health Needs Assessment | 23 |
| SPSS | Statistical Package for the Social Sciences | 35 |
| STEM | Science, Technology, Engineering, and Mathematics | 21 |
| SU | Students' Union | 71 |
| SWEMWBS | Short Warwick-Edinburgh Mental Wellbeing Scale | 27 |
| UK | United Kingdom | 19 |
| USA | United States of America | 21 |
| WEIRD | White, Educated, Industrialised, Rich, and Democratic | 13 |
| WEMWBS | Warwick-Edinburgh Mental Wellbeing Scale | 32 |
| WHO | World Health Organization | 16 |

Statement of copyright

The copyright of this thesis rests with the author. No quotation from it should be published without the author's prior written consent and information derived from it should be acknowledged.

Acknowledgements

Thank you to my supervisors, Dr Nasima Akhter and Dr Edward Stevenson, for the unwavering support and encouragement throughout this process. From participating in a pilot interview to providing me with out-of-hours statistical support, you have each given a lot to me and this research project. I am very grateful for what you have taught me.

Thanks also goes to the participants, who generously volunteered their time to share personal and valuable insights.

Finally, I would like to thank my friends, partner, and family for constantly supporting me and showing interest in my work. Thank you for believing in my abilities.

1. Research Overview

1.1. Introduction

This thesis explores student experiences of belonging, mental wellbeing, and help-seeking at Durham University, a well-renowned Russell Group University in the North-East of England. Awareness of mental wellbeing issues has increased in recent years (World Health Organization, 2001, 2005), notably so during the COVID-19 pandemic (Cullen, Gulati and Kelly, 2020; Pfefferbaum and North, 2020; O'Connor *et al.*, 2021), where restrictions such as isolation led to an absence of in-person socialisation. University students have received significant attention in the burgeoning mental wellbeing discourse, both through awareness of rising mental health issues among them and through research to assess and improve how they seek support (Davoren *et al.*, 2013; Equality Challenge Unit, 2014; Laidlaw, McLellan and Ozakinci, 2015; Johnson and Crenna-Jennings, 2018; Office for Students, 2019; Srivastava and Srivastava, 2019; Wada *et al.*, 2019; Pereira *et al.*, 2020). Belonging has been positively associated with student success and wellbeing (Cooper, 2009; Jones, 2009; Stebleton, Soria and Huesman, 2014a; Karaman and Tarim, 2018; Moeller, Seehuus and Peisch, 2020) and is useful in examining these issues further.

Durham University is distinctive as it has a significant culture of elitism and a lack of diversity (The Durham Commission on Respect Values and Behaviour, 2020, p. 31, 35). It is important to understand how this may affect students' wellbeing and to explore options for improvement.

Belonging in this thesis is viewed as an important life concept that has a variety of definitions and contextual understandings. The belonging literature is abundant and involves a number of constructs including integration, inclusion, acceptance, and love. Mental wellbeing was chosen as a key concept term because it encompasses a range of experiences that account for 'both feeling good and functioning well' (Warwick Medical School, 2019). It goes beyond looking at the presence or absence of mental disorders and accounts for wider physical and social experiences (Warwick Medical School, 2019). While some scholars and institutions use the term 'mental health' as well as 'mental wellbeing' (NHS, no date; World Health Organization, 2022) the latter was chosen as the conceptual term for this thesis due to its consistently holistic definition. Mental wellbeing is broader and more inclusive whereas mental health can be limiting and more diagnostic. For instance, someone diagnosed with poor mental health can still experience mental wellbeing. Help-seeking is defined in this research as the act of seeking support for one's mental wellbeing and is useful in exploring how students deal with their mental wellbeing. Each of these variables are important in forming an idea of overall student wellbeing at university, where wellbeing means feeling good and functioning well (Centers for Disease Control and Prevention, 2018), in other words being 'happy and healthy' (Cambridge Dictionary, no date).

The study assesses how belonging affects mental wellbeing and help-seeking in the sample, with quantitative hypotheses dictating it to have a positive relationship with both. The research also explores other factors that affect belonging, mental wellbeing, and help-seeking. The data provides some insight into how successful the university is in supporting student participants with these concepts and to understand how their overall wellbeing might be improved at university.

The mixed methods approach was chosen to provide a comprehensive insight into student and staff perspectives. Combining qualitative and quantitative methods facilitates broader avenues of exploration (Almalki, 2016, p. 288) and ‘allows the strengths of one approach to complement the restrictions of another’ (Regnault, Willgoss and Barbic, 2018, p. 1).

1.2. Research questions and hypotheses

Below are the research questions that governed the research, followed by their corresponding hypotheses, informed by relevant literature. Research Question 4 does not have any hypotheses as it was exploratory:

- 1. Research Question 1:** How does belonging affect mental wellbeing and help-seeking among Durham University students?
 - 1.1 There is a positive association between student sense of belonging at university and mental wellbeing, i.e., students with a better sense of belonging are likely to have better mental wellbeing (Figure 1, p.10).
 - 1.2 There is a positive association between student sense of belonging at university and help-seeking intentions for university mental wellbeing services, i.e., students with a better sense of belonging are more likely to intend to seek help from university mental wellbeing services when they have a personal or emotional problem (Figure 1, p.10).
- 2. Research Question 2:** What factors affect student belonging, mental wellbeing, and help-seeking at Durham University?
 - 2.1 Students belonging, mental wellbeing, and help-seeking intentions vary by specific sets of characteristics (e.g., academic characteristics; protected characteristics, socioeconomic status):
 - 2.2 Students who are non-white, international, LGBTQ+, disabled, who do not use English as a first language, or who have lower socioeconomic status have lower belonging than those without these characteristics.
 - 2.3 Students who are non-white, international, LGBTQ+, disabled, postgraduates, or who have lower socioeconomic status have lower mental wellbeing than those without these characteristics.

- 2.4 Students who are non-white, international, or who have lower socioeconomic status have lower help-seeking intentions from university sources than those without these characteristics.
3. **Research Question 3:** How successful is Durham University in supporting student belonging, mental wellbeing, and help-seeking?
- 3.1 There is room for improvement in the support provided by the university for promoting sense of belonging, mental wellbeing, and university services help-seeking intentions.
4. **Research Question 4:** What changes could Durham University make to support student wellbeing?

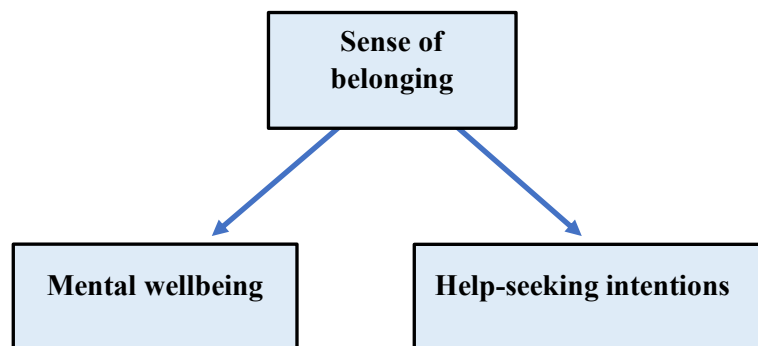


Figure 1. Conceptual model of hypotheses

1.3. **Thesis outline**

Chapter 2 (Literature Review) contextualises the research concepts (belonging, mental wellbeing, and help-seeking) through evaluation of the wider literature and explores them in relation to university students and Durham University in particular. Chapter 3 (Methods) outlines and justifies the research methods and explains how data was collected and analysed. Chapter 4 (Quantitative Results) presents the quantitative survey data findings, followed by Chapter 5 (Qualitative Results) which presents an analysis of the qualitative data. Chapter 6 (Discussion) situates the results within the range of literature covered in the literature review and assesses how well the findings address the research questions and hypotheses. It also suggests areas of further research and puts forth some limitations and recommendations for how to rectify these. Chapter 7 (Conclusion) summarises the key findings and outlines the research implications.

2. Literature Review

This chapter discusses approaches to understanding the concepts of belonging, mental wellbeing, and help-seeking and evaluates the literature on each. It also looks at the concepts in the context of university students. It then summarises the findings of existing research on these issues within Durham University.

2.1. Belonging

A range of definitions and theories of belonging exist within the social sciences, and anthropologists, sociologists, political scientists, and geographers (among others) have taken varying approaches to researching it. This section explores some key approaches and theories about belonging and what can affect it, to inform how the concept will be discussed in the research study.

For the purpose of introduction, a general dictionary definition of belonging is:

‘the feeling of being comfortable and happy in a particular situation or with a particular group of people, and being treated as a full member of the group’ (Oxford Advanced Learner’s Dictionary, 2023)

This definition is useful and relatively comprehensive, but it should be remembered that belonging can have a multitude of different interpretations and meanings, reflected in the word cloud (Figure 2).



Figure 2. Belonging word cloud showing words commonly connected to belonging in the existing literature

Framing belonging as a fundamental need

Arguably the most common theory of belonging is that it is regarded as a need. Bronislaw Malinowski (1944) theorised that biological impulses or needs underlie human behaviour, some of these being kinship, reproduction, and protection (Sklair, 2003, p. 164). Each of these concepts relate to belonging and social group living. Based on his work in the Trobriand Islands, Malinowski argued that the Trobrianders' intricate patterns of exchange were not purely economic in nature but indexed and reinforced social and political standing (Malinowski, 1922). He emphasised the importance of social relationships, a concept that is consistently related to belonging throughout the literature.

A more specific definition of belonging where it is viewed as a basic human motivational need comes from psychologist Maslow's (1943) widely known 'hierarchy of needs.' In the hierarchy, each need can only be fulfilled when the needs below it are satisfied (Maslow, 1943, p. 380). Belonging is a need that can be fulfilled once physiological and safety needs are fulfilled (Maslow, 1943). Maslow describes how one will 'hunger for affectionate relations with people in general, namely, for a place in his group, and he will strive with great intensity to achieve this goal' (Maslow, 1943, p. 381), displaying a human need for social affinity and acceptance. Studies have since found little to no evidence that motivational needs exist in the hierarchical structure set out by Maslow (Wahba and Bridwell, 1976; Agrawal and Sharma, 1977), something Maslow himself acknowledged in his later work (Maslow, 1954, p. 149). Glasser's Choice Theory (1998) takes an alternate approach. The theory proposes that behaviours are choices motivated by the need to fulfil basic needs. He discusses five fundamental psychological needs which underlie all human behaviour, such as 'freedom' and 'self-worth,' and includes 'love and belonging' as one of them (Glasser Institute for Choice Theory, 2022). The needs proposed by Glasser are purportedly omnipresent for everyone and while the strength of each need can vary between individuals, the needs do not exist in a predetermined hierarchy where some needs can only be attained if others are met first (Glasser, 1998). This addresses criticism of Maslow's work while maintaining the theory that belonging is a need.

Baumeister and Leary (1995) note the lack of evidence supporting earlier theories of belonging, such as Maslow's, and in response present a comprehensive evaluation of the evidence from psychology, sociology, and anthropology, as well as forming their own belongingness hypothesis. According to their hypothesis, in order to belong one needs 'a minimum quantity of lasting, positive, and significant interpersonal relationships,' in other words, a few close personal bonds (Baumeister and Leary, 1995, p. 497). The quantity of personal bonds may depend on the person but generally as more bonds are added beyond the person's required minimum quantity, they have less impact on belonging (Baumeister and Leary, 1995, p. 520). The authors cite evidence from various fields using methods such as observations and experiments to show that people have a strong inclination to form social bonds, are reluctant to end social relationships, think deeply about interpersonal relationships, and experience strong emotions linked to their social bonds (Baumeister and Leary, 1995, pp. 502–508).

These findings lend support to the idea that belonging constitutes a need. Waller (2019, p. 70) notes that much of the research Baumeister and Leary drew upon for their analysis did not directly test for the need to belong and often had non-representative samples. Many were restricted to WEIRD (White, Educated, Industrialised, Rich, and Democratic) (Henrich, Heine and Norenzayan, 2010) populations or specific groups such as prisoners or widowers (Baumeister and Leary, 1995; Waller, 2019, p. 70). Additionally, Baumeister and Leary (1995) offer potential alternative explanations for some of the reported findings and correlations. Despite these limitations, the theory remains supported across other studies and disciplines (Leary and Cox, 2008; Waller, 2019, p. 70), and the large number of studies presented as in favour of the hypothesis warrants recognition.

The term ‘need’ implies that belonging is necessary for humans, to the extent that it aids survival. Evolutionary theories, outlined by Leary and Cox (2008), support this idea that belonging is adaptive. They draw on evidence discussing how social and group living has been necessary for the continuation of *Homo sapiens* and earlier human ancestors. Cooperative group living played a large role in the survival of early humans as they lacked certain characteristics that would benefit lone survival – such as being fast, fierce, or able to escape by climbing trees or flying (Leary and Cox, 2008, p. 29). Living cooperatively would have therefore provided safety, protection, and teamwork when it came to hunting and surviving, which links to Malinowski’s (1944) theory that describes the human need for protection. Research from evolutionary anthropologists supports this and suggests cooperative relationships may have evolved to enable the acquisition of food, e.g., in big game hunting (Kaplan, Hooper and Gurven, 2009). Leary and Cox find further support for belonging as adaptive through a review of research on the effects of belonging on physiology (Leary and Cox, 2008, p. 38). The review highlights that forming social connections is rewarding biologically – bonding and connecting with others activates ‘neuropsychological systems that involve reward centres, and thus are inherently pleasurable’ (Leary and Cox, 2008, p. 38). Similar effects are found with oxytocin, a hormone involved in social bonding, that can have stress reducing effects (Olf *et al.*, 2013). Other traits plausibly associated with social bonds include improved ‘fecundity, reproductive success, offspring survival and longevity’, as well as improved ‘psychological stress, health, and survival’ (Amici and Widdig, 2019, p. 1). Work by Hrdy (2011) endorses the benefits of social bonds and group living by discussing their benefits in childrearing and instilling empathy. The accumulation of evolutionary theory and findings to support belonging as an adaptive need are significant.

Belonging in the wider world

In political science, scholars have emphasised the ways belonging operates in modern states, with theories that go beyond standalone social interactions. For instance, Yuval-Davis (2006) looks at belonging from a political standpoint and provides an analytical framework with which to explore the politics of belonging. She views belonging as a fluid concept and proposes it can be constructed on three levels. First, there are ‘social locations’ (Yuval-Davis, 2006, p. 199) – classifications such as

gender, age, race, class – that position people, often in intersectional ways, within the social landscape and which dictate their belonging to different contexts and groups. Many different social locations exist and they, along with their definitions and reception, vary with differing contexts and social environments in which they have been constructed (Yuval-Davis, 2006, pp. 199–202). The next analytical level is ‘identification and emotional attachments’ (Yuval-Davis, 2006, p. 202), whereby individuals’ belonging is defined by the way they and others view themselves – their identity – and what they feel or their emotional affiliation in relation to specific social groups (Yuval-Davis, 2006, pp. 202–203). Lastly, there is the level of ‘ethical and political values’ (Yuval-Davis, 2006, p. 203), which describes the existence of decisions about how social location, identity, and attachments are judged. From this, boundaries of belonging can be constructed, and the political aspect of belonging becomes prominent (Yuval-Davis, 2006, pp. 203–204). Yuval-Davis takes a more holistic perspective and acknowledges the multifaceted tendencies of belonging and how it can be deeply political. The politics of belonging involves deciding who belongs and who does not as well as the ways belonging is made possible, and involves power relations (Yuval-Davis, 2011, p. 19).

Social geographers, meanwhile, argue for the crucial roles of place and space in belonging. Social geographer Antonsich (2010) proposes that there can be important emotional relationships with place which should not be neglected. Antonsich uses a model with two ways of experiencing belonging, which expands on Yuval-Davis’ work. The model describes potential for belonging through personal connections with place (territorial belonging) (Antonsich, 2010, p. 4), as well as in the broader context of the politics of belonging where power affects inclusion and exclusion (Antonsich, 2010, p. 19). Antonsich’s model furthers the possibilities of belonging outlined by Yuval-Davis.

Definitions and experiences of belonging can change between disciplines and contexts. This fluidity of belonging is exemplified in ethnography by Andits (2015) who explores sense of belonging in Hungarian migrants in Australia after the fall of the Berlin Wall. Through interviews, Andits notes how migrants’ experiences of home and belonging shifted and transformed over time. Some referred to their home through social traditions and experiences rather than through material things and physical spaces (Andits, 2015). Andits introduces the idea of unlinking ‘belonging’ and ‘home’, following that belonging is a ‘dynamic’ process where home can be related not only to the physical home, but also the loss and regaining of a feeling of being at home when individuals may not be able to live in their original home (Andits, 2015, p. 315). Political sociologist Wekker (2021), on the other hand, situates belonging as closely related to feeling at home yet follows the thought pattern that belonging can be affected by emotion and identification. These insights reflect the personal nature of spatial belonging outlined by Antonsich (2010), and place emphasis on the intangible and ever-changing nature of belonging.

An anthropological conceptualisation of belonging that further encompasses its complexity, and sometimes ambiguity, comes from Gammeltoft (2018), who explores belonging in relation to subjectivity and issues regarding freedom or a lack of it. She draws upon two ethnographic examples to show how Vietnamese women ‘belong’ to specific people, places, and political spheres. A key theme throughout her discussion is that belonging is often more ambiguous than one might initially conceive. She claims it ‘entails ambivalence, uncertainty, dominance, and exclusion’ (Gammeltoft, 2018, p. 77) and concerns ‘possession, membership, and moral obligation’ (Gammeltoft, 2018, p. 88), some of which juxtapose the positive feelings generally associated with feeling a sense of belonging. Gammeltoft outlines three ways of belonging in her exploration of the concept. These are intersubjective belonging (belonging between people), territorial belonging, and political belonging (Gammeltoft, 2018, p. 85-87). These ways of belonging are realised through the processes of possession, membership, and moral obligation, with attention paid to the role of emotional affiliation in belonging (Gammeltoft, 2018, p. 89). Gammeltoft’s framework encompasses belonging that is not explicitly positive or negative and involves people, place, emotions, and political environment. It is inclusive of perspectives put forward by psychologists, geographers, and political scientists. Gammeltoft’s approach is therefore useful in highlighting the complexity and breadth of belonging as a concept, something that will be considered throughout the research and analysis.

Positive or negative?

Much of the literature explored on belonging so far has tended to portray the concept as positive and ‘rosy’ (Duyvendak *et al.*, 2021), something that, once acquired, provides fulfilment. Gammeltoft’s theory, on the other hand, suggests belonging is not consistently positive. For instance, Halse (2018, p. 18) demonstrates a socially harmful kind of belonging – that of belonging to a criminal organisation. Yet in spite of the negative social connotations, there can still be a sense of community. Forced belonging to a group you do not wish to be associated with is a better example of negative belonging e.g. being part of a family where you do not agree with their behaviours and values. This brings up the debate of whether belonging is based on prescribed social location or if it is more based in feelings e.g. do you still belong to that family even though you do not feel at home or accepted or safe among them? Yuval-Davis’ (2006) analysis of belonging as affected by social location provides space for such belonging that is not chosen – i.e. if an individual is socially localised as a woman in a patriarchal society, and resultantly belongs to this group, they may experience discrimination and harassment less common to men. On the other hand, Halse (Halse, 2018, p. 18) points out that belonging or unbelonging can be a choice made when an individual defies or disagrees with the conditions of a certain group.

Not belonging or unbelonging are also important to consider in the belonging narrative – they can in some ways be the flip side of the same coin. Feelings of not belonging tend to have negative consequences for an individual’s health and wellbeing. A lack of belonging is associated with both

physical and mental problems such as eating disorders and decreased immune system function (Baumeister and Leary, 1995, p. 509). Children who experience rejection are more likely to have psychopathic tendencies than other children (Bhatti *et al.*, 1989; Hamachek, 1992) and children who lack sufficient attention from caregivers growing up have emotional and behavioural pathologies (Bowlby, 1969, 1973; Rutter, 1979). Not belonging appears to be highly unpleasant and disruptive, and an important aspect of belonging to consider. The findings about unbelonging again promote the theory that a sense of belonging is an important need for a fulfilled life. Awareness of positive and negative experiences should be considered when understanding the concept of belonging.

2.1a. Belonging, wellbeing, and mental wellbeing

Since the seminal report on social determinants of health led by Michael Marmot (2010), the World Health Organization (WHO) (2003) has acknowledged that belonging affects health and wellbeing. The report describes how ‘Belonging to a social network of communication and mutual obligation [...] has a powerful protective effect on health’ (World Health Organization, 2003, p. 22). In more recent commentaries on social determinants, the WHO has maintained this idea, citing ‘social inclusion’, a term similar to, though perhaps a bit narrower than, belonging (World Health Organization, no date). This notion is reflected too by the Center for Disease Control and Prevention, which discusses how ‘cohesion within a community’ plays a role in health (CDC, 2021; see also McGowan *et al.*, 2022). While not explicitly referring to belonging, the terms ‘social inclusion’ and ‘cohesion within a community’ connote ideas of acceptance, being part of something, and connected involvement with others, all themes that fit under the umbrella of ‘belonging’. The widespread support for this idea across multiple disciplines and institutions is striking, and it is backed by substantial research. A meta-analysis on 64 different studies across more than 10 databases found that social support (being part of a social network where one feels cared for and supported, a construct closely linked to belonging) was significantly correlated with better mental health (Harandi, Taghinasab and Nayeri, 2017). Below I explore the concept of mental wellbeing further.

2.2. Mental wellbeing

This section will define mental wellbeing and explore how it is conceptualised and experienced, to illustrate how it will be used in this research.

Definitions of mental wellbeing tend to emphasise that the concept is determined by more than just the absence or presence of mental disorders. This comes after years of social scientists pushing the idea that an individual can have a mental disorder but still experience positive wellbeing and fulfilled mental states (Keyes, 2002, p. 208).

As defined by Warwick Medical School for the Warwick-Edinburgh Mental Wellbeing Scale, mental wellbeing involves ‘feeling good and functioning well’ and is ‘holistically linked to other aspects of wellbeing: physical, emotional, and where appropriate, spiritual’ (Warwick Medical School, 2019).

This definition captures the myriad of experiences of mental wellbeing, encompassing the holism and cultural relativism characteristic of anthropological perspectives.

Perspectives on mental wellbeing and mental disorders have changed over time within Western society. Mental illness is much more openly discussed and recognised now than it was in the past, with some previously unlabelled symptoms (such as shyness) now being diagnosed as psychiatric disorders (such as social anxiety disorder) (Scott, 2006). Although mental illness is becoming destigmatised and more accepted in society (Venters, 2018), some stigma still exists (Rössler, 2016) and mental illness contributes significantly to the global burden of disease (Patel, 2012, p. 7; GBD 2019 Mental Disorders Collaborators, 2022). Anthropology has played a vital role in exploring mental health and wellbeing, both raising awareness of the broad applicability of certain psychological conditions worldwide (e.g., depression, anxiety, trauma) and bringing attention to culture-bound syndromes and unwarranted applications of Western diagnostic categories in some instances.

2.2a. Anthropological perspectives on mental wellbeing

Before the 1950s, when mental wellbeing was less understood than it is now, both anthropology and psychiatry were involved in viewing culture as static and labelling indigenous groups according to mental traits (i.e. megalomaniac, Apollonian) (Benedict, 1934; Kaiser and Kohrt, 2019, p. 2). These generalisations were characteristic of the culture and personality school in anthropology, represented by anthropologist Ruth Benedict, and occurred at a time when scientific theories were employed to rationalize racial discrimination (Kaiser and Kohrt, 2019, p. 2). Since then, there has been a positive shift away from such discriminatory interpretations and towards greater inclusivity and awareness of factors that may implement bias. Anthropology began to offer a culturally relativist lens and illuminate issues around structure, power, and equity (Kaiser and Kohrt, 2019, p. 1). For example, work by Margaret Mead illuminated the falsity of biological essentialist views about gender and sex and suggested that gender roles are greatly influenced by the society they exist in (Mead, 2001). This challenged some of the conceits of early psychiatry – e.g. labelling homosexuality as a mental disturbance in the 1952 Diagnostic and Statistical Manual of Mental Disorders (DSM) (Drescher, 2015, p. 56; Kaiser and Kohrt, 2019, p. 2).

Critical medical anthropologists (e.g., Singer and Baer, 1995) have drawn attention to external factors or determinants that might impact mental health. This theoretical perspective looks at the political economy of health and assesses how structures and systems both result in suffering and impact the

way medicine operates (Kaiser and Kohrt, 2019, p. 3). Particularly relevant to the social production of illness is the concept of structural violence.

Structural violence is a term coined by Galtung (1969) who described it as indirect violence where there is no single actor (Galtung, 1969, p. 170). In other words, it describes factors on an institutional level that prevent people from meeting their basic needs and having a sufficient quality of life (Lee, 2019, p. 123). Some examples (Krieger, 2005, p. 101) include findings that queer and lesbian people living in a heteronormative society experience higher psychological distress than heterosexuals (Bradford, Ryan and Rothblum, 1994; Meyer, 1995) and African-American men in a racist society have higher blood pressure than white men (James *et al.*, 1984; Krieger, 1990). (2015, p. 21)

Bourdieu's (1977) concept of habitus, 'the learned set of preferences or dispositions by which a person orients to the social world' (Edgerton and Roberts, 2014, p. 195) overlaps with structural violence (Edgerton and Roberts, 2014, p. 195). However, while habitus is 'structured and structuring' structural violence is 'structured and structuring' in that it restricts the agency of those affected by it (Farmer, 2004, p. 315). A criticism of structural violence from Kirmayer is that it predominantly applies to groups of people and does not consider individual characteristics; it obscures the experience of individuals or precludes attention to individual agency (Farmer, 2004, p. 321). However, Farmer's ethnographic work details accounts of informants' experiences and stories, showing that individual life histories can still be accounted for within structural violence research (Farmer, 1992, 2003, 2004).

As a result, structural violence is a useful theory to consider when examining the research data because it focuses on negative systemic and structural factors, factors that the research aims to explore further to produce useful insight and recommendations. The research aims to understand personal experiences localised within the institution but will also consider other contributing factors.

2.3. Help-seeking

In a review by Rickwood, Thomas, and Bradford (2012), help-seeking in the field of mental health is defined as '*an adaptive coping process that is the attempt to obtain external assistance to deal with a mental health concern*' (Rickwood, Thomas and Bradford, 2012, p. 6). The term is used extensively in health research and has been included in illness behaviour models as a part of the illness experience (Rickwood, Thomas and Bradford, 2012, p. 10). There are several different types of help source in the domain of help-seeking, the predominant ones being informal, formal, and self-help. Formal help sources consist of professionals, such as doctors, psychologists, or community workers (Rickwood, Thomas and Bradford, 2012, p. 10). Informal help-seeking means seeking help from personal, non-professional sources such as relatives or friends. Self-help refers to help sources that do not involve human interaction – help that can be provided through online services (Rickwood, Thomas and

Bradford, 2012, p. 11). Young people have been found to prefer seeking mental health support from informal sources such as friends and family as opposed to formal sources (Offer *et al.*, 1991; Boldero and Fallon, 1995). A similar finding was reflected among UK university students, who were most likely to seek help from a partner or parent before opting for formal sources (Gorczynski *et al.*, 2017, p. 9).

2.4. Belonging, mental wellbeing, and help-seeking at university

Having explored the concepts more generally, this section provides an insight into how they are experienced at universities and reviews the literature on each.

2.4a. Belonging at university

Belonging has been explored in academic environments, like school, college, and university, and has been found to play a significant role in the experiences of students. Influential work by Tinto (1975, 1993, 1997) proposes a theory regarding student retention in higher education. The theory discusses how academic and social integration have important influence on whether students stay in higher education until completion of their studies. Tinto's views on student integration were in part influenced by the works of Durkheim (1951) regarding suicide – Tinto compares student dropout to suicide and maintains that the more integrated a student is within the higher education environment (in Durkheim's case, the more integrated a person is into society), the less likely they are to drop out (in Durkheim's case, commit suicide). Poignantly, some students do commit suicide, a point that reiterates the importance of understanding student wellbeing further. While Tinto's theory does not specifically refer to 'belonging,' integration is a related term that involves being accepted into a social community and, as seen in theories of interpersonal belonging, a feeling of belonging can come from this integration. Tinto's theory has gained credibility and validity through various research studies (Aljohani, 2016, p. 7), and its suppositions are logically aligned with the idea that belonging is an important factor for success and wellbeing; since students who are more involved and enjoying university life will be less likely to leave.

More specifically, studies of university students report positive relationships between belonging, wellbeing (Jones, 2009; Karaman and Tarim, 2018) and mental health (Gopalan and Brady, 2020). However, scholars identify that the body of research on the belonging of university students is slim, with even less literature exploring belonging at university in relation to wellbeing (Karaman and Tarim, 2018, p. 786). Also discussed is a need for further exploration of university student belonging across identity (Gopalan and Brady, 2020, p. 137), among more varied populations, and with different psychological measures (Jones, 2009).

Cooper (2009, p. 2) likens the university campus to Anderson's imagined community. Students generally do not know every other member of their university or college, yet it is hoped that the student will feel they belong there. Anderson's work applies here as he claims 'all communities larger than primordial villages of face-to-face contact are imagined' (Anderson, 1983, p. 15). Cooper describes how belonging – feeling supported and valued and identifying with the institution – is integral to ensuring students persist in their education (Cooper, 2009, p. 1), therefore it is in the university's interest to help foster student belonging. In a diverse community, Cooper suggests that student belonging might be achieved through having universities or colleges promote core values which students can affiliate with, and which will allow them to feel part of the community (Cooper, 2009, pp. 2–3). This suggestion may support students in feeling part of an imagined community, particularly in a diverse or large institution where an individual may feel small.

Report on student engagement and belonging in higher education

A large-scale programme, called the 'What Works? Student Retention and Success Change Programme,' to enhance retention and success of university students was implemented in the UK between 2008-2011 (Thomas, 2012, p. 4). It received funding from the Paul Hamlyn Foundation – a charity supporting social change (Paul Hamlyn Foundation, 2023) – and the Higher Education Funding Council for England (Advance HE, 2020) and was designed to provide more information regarding what students need to feel engagement and belonging. It involved various projects carried out across 22 UK institutions (Advance HE, 2020). The project was prompted by a proposed rise in student fees, which was predicted to impact students' expectations of the university and whether they would still opt to live at university, choose to study part-time, or postpone attending university altogether (Thomas, 2012, p. 5). These factors were stated to affect student belonging, integration, and engagement, which in turn were found to impact student retention and success (Thomas, 2012, p. 5). (Tinto, 1993)

In the report, engagement is discussed as involvement with social and academic aspects of student life, such as participation in societies, living in shared accommodation and having contact with staff (Thomas, 2012, pp. 13–14). The report also describes that engagement leads to belonging, a finding gained throughout the programme's research (Thomas, 2012, p. 12).

As noted above, belonging on an individual level is associated with respect, being accepted, being included, and feeling connectedness. Baumeister and Leary's (1995) theory that belonging involves fulfilling interpersonal relationships is noted in the report along with a definition by Goodenow that describes sense of belonging in educational settings (Thomas, 2012, p. 13). Goodenow describes belonging in this context as:

'Students' sense of being accepted, valued, included, and encouraged by others (teacher and peers) in the academic classroom setting and of feeling oneself to be an important part of the life and activity of

the class. More than simple perceived liking or warmth, it also involves support and respect for personal autonomy and for the student as an individual.’ (Goodenow, 2016, p. 25)

This definition includes various terms encompassed in the belonging word cloud (see Figure 2). It relates to engagement, respect, and social support, and highlights how belonging goes deeper than superficial liking and is based on feeling genuinely accepted and valued by others. Similar to Gammeltoft’s (2018) model of belonging, the definition discusses a range of criteria for belonging. However, it describes more wholly positive and agentic experiences of belonging, whereas Gammeltoft’s (2018, p. 89) conceptualisation involves restricting concepts such as ‘obligation’ and ‘possession.’ Goodenow’s is a holistic definition that will be useful in exploring student experiences in this research.

The report describes belonging on an institutional level as also related to sociological theory. It takes a structural perspective, using Bourdieu’s (1977) concepts of cultural capital – learned behaviours and abilities that affect one’s ‘cultural competence’ (Edgerton and Roberts, 2014, p. 195) – and habitus – the expression of cultural capital through the specific ways one relates to the social world, informed by previous experiences and often the sub-conscious (Thomas, 2002, 2012, p. 13; Edgerton and Roberts, 2014, p. 195). Institutional habitus is a concept that describes ‘the impact of a cultural group or social class on an individual’s behaviour as it is mediated through an organisation’ (Reay, David and Ball, 2001, para. 1.3). Thomas (2012, p. 13) explains how if a student’s habitus is discordant to the university’s institutional habitus, this can result in them feeling a lack of belonging to university. This idea is linked to Bourdieu and Passeron’s theory that habitus affects inequality in education, whereby those with a lower-class habitus will be at a disadvantage because university is structured by the upper and middle classes (Bourdieu and Passeron, 1977; Bourdieu, 1984). This also ties back to the theory of structural violence (Farmer, 2004), whereby the institution acts unequally upon those within it, in indirect, harmful, and constricting ways. The reproduction of such inequalities in education is an important aspect to consider when understanding belonging.

Studies looking into such inequalities (across categories such as ethnicity and gender) have found variations in belonging. For instance, BAME students in the UK are more likely to report difficulties with belonging at university than non-BAME students (Cureton and Gravestock, 2019), a finding also reflected in a 2022 student survey (Neves and Brown, 2022, pp. 6, 29). Research by Gopalan and Brady (2020) found that belonging at 4-year schools in the USA was lower among ethnic minority students and first-generation scholars than their peers. Moreover, studies have found that female STEM students who were either people of colour or identified as being from a minority group experienced lower levels of belonging than non-minority students (Rainey *et al.*, 2018, p. 1; Mooney and Becker, 2020, p. 24), aligning with a need for more representation of women from minority

backgrounds doing STEM degrees, and demonstrating the importance of an intersectional point of view when considering experiences of belonging.

Inequalities appear to be an issue that can affect belonging, especially given that many universities have ongoing problems with equality, diversity, and inclusion (EDI). For instance, Kimura (2014) found that universities can fail to sufficiently address structural issues of diversity and suggests that they must go beyond simply increasing admission diversity. She calls for universities to be more active in their address of these issues. Warikoo (2016) explored perceptions of diversity at three elite universities (Harvard and Brown in the USA and Oxford in the UK) and found that some white students were supportive of diversity so long as it enhanced the quality of their time at college by exposing them to a more diverse campus community. This selfish perspective reiterates that active and prolonged work must be carried out to improve the social safety of the university environment.

Where social inequality can have negative impacts on belonging, strong social relationships can have the opposite effect. Like cultural capital, social capital – networks of social relationships such as friendships (Bourdieu, 1977) – has been explored in relation to student belonging and has been found to be significantly associated with it (Ahn, 2017). This reinforces the importance of interpersonal bonds in belonging, as highlighted in several of the earlier discussed models and theories.

While university belonging can come from concordance with its habitus or agreeing with its core values, as suggested by Cooper (2009, pp. 2–3), the definition by Goodenow (2016, p. 25) points to the importance of genuine respect and support, things which may not be present just because there are core values or habitus alignment in place. Inequalities can still exist in spite of these things and affect some students negatively. To belong at university, a student must truly feel cared for and important within it, something that can come about through multiple routes, including social capital.

2.4b. Mental wellbeing at university

A growing literature focuses on the importance of supporting university student mental wellbeing. A large survey on UK university student mental health found that 1 in 5 students has a diagnosed mental health problem (Pereira *et al.*, 2020, p. 6). However, other studies suggest that university students are not necessarily worse off than other demographic groups in terms of mental health (Tabor, Patalay and Bann, 2021). Regardless, going to university can bring challenges, some of which can impact mental health. The majority of students start university just as they begin adulthood, a transitional time in their lives. As well as navigating this, going to university brings up independence and other new challenges to contend with. University life has a lot of potential stressors, such as academic study and managing finances (Johnson and Crenna-Jennings, 2018). Furthermore, different sociodemographic factors, such as ethnicity, age, overseas status, and gender can affect mental health (Pereira *et al.*, 2020). Additionally, being from a socially disadvantaged background can increase risk of mental health issues (Education Committee and Health and Social Care Committee, 2018, chap. 4).

A report from the Office for Students suggests more could be done to support the mental health of LGBTQ+ and international students too (Office for Students, 2019).

Following on from its general effects on mental health and wellbeing, social support has been found to be important in protecting student mental health specifically (Alsubaie *et al.*, 2019). Evidence for this comes from a UK university student population (n=461) (Alsubaie *et al.*, 2019, p. 484). Given the link between social support and belonging, this enforces the importance of exploring belonging and mental wellbeing in tandem.

2.4c. Help-seeking at university

Of the constructs that this dissertation focuses on, the least researched is help-seeking. Unfortunately, university students are unlikely to receive support for mental health issues (Johnson and Crenna-Jennings, 2018), with stigma continuing to be a barrier to help-seeking, as well as the fear of being treated differently by the university (Equality Challenge Unit, 2014, p. 9).

Some findings suggest that belonging has been found to have an impact on help-seeking for mental health within educational settings, with a higher sense of belonging, or social support and connectedness (Doan *et al.*, 2020), implying that an individual will be more likely to seek help for their mental health (Thompson, 2011). However, these findings were gained among populations of Canadian school children and American university students of colour respectively, meaning they cannot be generalised to UK student populations. The studies suggest importance in studying help-seeking and how it relates to belonging at university.

2.5. Durham University

In the past few years, two large-scale reports have investigated student experiences at Durham University in relation to well-being and inclusion/exclusion: the Student Health Needs Assessment and the Durham Commission on Respect, Values, and Behaviour. The reports are useful in outlining the state of the key concepts (belonging, mental wellbeing, and help-seeking) within the university.

Student Health Needs Assessment

The Student Health Needs Assessment (SHNA) (Durham University, 2019) was a review – carried out by university colleagues and an external public health practitioner (Durham University, 2019, chap. 1.2) – designed to understand the current state of student health and wellbeing and student opinions on these issues. It consisted of a survey (n=1495), student focus groups, and consultation events about mental health and wellbeing (Durham University, 2019, chap. 3.2) and the final report is publicly available online.

Report of the Durham Commission on Respect, Values, and Behaviour

The Durham Commission on Respect, Values, and Behaviour was a group of university staff that was formed ‘to understand people’s experiences of working and studying at Durham University and what can be done to create positive change.’ (The Durham Commission on Respect, 2020, p. 4; Durham University, 2022e). The Report of the Durham Commission on Respect, Values, and Behaviour (RDCRVB) (2020) was carried out by the Commission to assess the current state of these issues and put forward recommendations for the university. It also aimed to explore whether there were differing experiences based on sociodemographic characteristics (The Durham Commission on Respect, 2020, p. 18). It acknowledges both the positive work already being done and highlights issues that must be worked upon. The report recommendations were then passed to the Respect Working Group, a group formed to implement these changes (Durham University, 2022g). The university claims that respect is being continually worked on, even after implementation of the report’s suggestions, and has a designated Respect Oversight Group to supervise related changes (Durham University, 2021b, 2021a, 2022f). Through interviews, focus groups, a survey, and a secondary data review, the Commission collected data on staff and student experiences within the Durham University environment. Key themes were identified (The Durham Commission on Respect, 2020) and the final report is accessible to the public.

2.5a. Belonging at Durham University

Belonging is a recognised and well-explored concept in the university, both in the university’s own marketing, and in reports carried out by its staff. For instance, the colleges webpage uses a subheading ‘Belonging and responsibility’ and describes colleges as ‘safe spaces’ to grow, explore hobbies, and make friends (Durham University, 2022d). While these quotes imply that belonging is central to student lives, issues to suggest the contrary are prevalent at the university. The university has received ongoing criticism regarding its elitism and lack of equality, diversity, and inclusion, issues which have made national headlines in recent years (Parveen, 2020; BBC News, 2021; Halliday, 2021; Wolfe-Robinson, 2021). The Commission formed by the university to investigate such issues has acknowledged that the institution must do more to promote respect and diversity and prohibit bullying and harassment (The Durham Commission on Respect, Values, and Behaviour, 2020, p. 6).

The SHNA (Durham University, 2019) and the RDCRVB (The Durham Commission on Respect Values and Behaviour, 2020) both research and discuss the concept of belonging.

The SHNA recognises that belonging contributes to student health and wellbeing and belonging is acknowledged as part of the ‘Wider Student Experience’ offered by the university (Durham University, 2019, chap. 3.14). It measures belonging to college, clubs/societies, academic departments, and the Durham City community, and how this varies between undergraduates and postgraduates, and home/EU students and international students. Some students suggested there

should be more social events for inclusion purposes and there were reports of students, especially international students, having difficulty integrating into their departments and colleges and experiencing feelings of isolation (Durham University, 2019, chap. 3.14).

In focus groups within the SHNA, colleges were generally seen as fostering a sense of community, though this was not as prominent for students who live out of college (Durham University, 2019, chap. 4.1). Other issues affecting belonging were tensions with Durham local residents and a mismatch between one's socio-economic status and that of the average Durham student who likely has a higher socio-economic status. In relation to academic departments, lack of belonging was described as being related to departments not 'putting effort into building a community' (Durham University, 2019, chap. 4.1, para. 14).

The RDCRVB found that respect was strongly associated with how satisfied students were with the university (The Durham Commission on Respect Values and Behaviour, 2020, p. 15). 'Respect' is part of the word cloud on belonging (see Figure 2) and links to the concept, as in the definition by Goodenow (2016, p. 25). The report discusses how the general university culture can be a predominant force in enabling disrespect within the institution and aimed to understand whether disrespect was unique to Durham University or is part of a systemic problem within all comparable organisations (The Durham Commission on Respect, 2020, p. 16).

The report argues that regardless of how common negative experiences are, the very existence of them plays a significant role in portrayals of the university and how others view it, since these views can spread and cause further negative effects (The Durham Commission on Respect, 2020, p. 21).

The report confirmed that Durham University culture had a general atmosphere of inequality and elitism. There were reports of discrimination and experiences of exclusion throughout, with much of this based on gender, class, or the proportion of BAME students (The Durham Commission on Respect, 2020, p. 31). Women's experiences of sexism included being subject to gendered expectation and language, as well as feeling undervalued in comparison to male colleagues. Some reports of sexism about male students discussed drunken initiations or sporting behaviours (The Durham Commission on Respect, 2020, pp. 31–32).

BAME representation at the university is low and this contributes to BAME students and staff feeling undervalued. Microaggressions, such as assumptions that BAME staff are assistants or mocking of different accents, were detailed in the data, along with suggestion that the university does not sufficiently deal with them, which can lead to a culture where it feels unsafe for BAME individuals to speak up. This is intensified by the lack of diversity in the university. The report suggests that the prevalence of these microaggressions means they have been normalised in some workplaces. It states

that improvements in diversity have been welcomed but emphasises that more needs to be done (The Durham Commission on Respect, 2020, pp. 32–33).

International students in a Health and Wellbeing Survey were more likely than Home/EU students to be subject to hate crime. Disabled students and individuals who had to take care of children or other people also expressed a lack of consideration for their needs. The EDI team was criticised for being too small and lacking diversity, and comments were made that the university placed too much emphasis on outward presentation of EDI issues, rather than tackling root problems (The Durham Commission on Respect, 2020, pp. 32–33).

Fear of failure was seen as characteristic of Durham University culture, with the making of mistakes leading to blame and criticism of individuals (The Durham Commission on Respect, 2020, p. 33). The high number of independent school students is discussed in relation to the class divide it has forged, and the elitist, derogatory attitudes – especially towards students with working class backgrounds or from the local Durham area – that have thrived as a result (The Durham Commission on Respect, 2020, p. 34).

Colleges were sometimes presented as furthering elitism, through costly social events and long-held traditions, such as ‘gowns, expensive balls, and formal dinners’ that might not resonate with all students, especially those who are less privileged. (The Durham Commission on Respect, 2020, p. 35).

In response to these findings, the Commission drew up recommendations for the university to progress positive change. The recommendations include, but are by no means limited to, the implementation of counselling support specifically tailored to BAME staff and students, greater investment in the EDI team, making respect a core university value, and enhancing relationships between student leaders and the staff they will be communicating with (The Durham Commission on Respect, 2020, pp. 42–49).

Some of these recommendations have already been actioned, such as a counselling service link with the charity Nilaari, which offers experience supporting BAME individuals (Durham University, 2022b). The report authors acknowledge that its findings are not generalisable or necessarily representative of the university student and staff populations (The Durham Commission on Respect, 2020, p. 20), nonetheless the findings are still important as they highlight negative experiences which arise in accordance with specific negative culture and attitudes within the university.

Again, while predominantly about respect, the report’s discussion of systemic issues within the university is pertinent to research on belonging. Its acknowledgement of the elitism, lack of diversity, and offensive attitudes within the university highlight structural issues that demonstrate more needs to

be done. It seems likely that if structural factors such as these can impact the respect felt by students and staff, they can also have an impact on belonging.

2.5b. Mental wellbeing at Durham University

On its mental health policy webpage, Durham University states how it is important to note the expectations and responsibility of the university in attending to mental health, and to be aware that it is not a medical facility. The university is not obligated to offer the same treatments as the NHS for example. It does not offer treatment, but rather it offers support in different forms and an environment that should support students with their mental health and wellbeing (Durham University, 2022c, sec. 2).

The extent of this support and how it has been received was studied by the university itself in the 2019 SHNA (Durham University, 2019). The SHNA survey (n=1495) was advertised to all students, except for finalists due to it coinciding with a similar finalist survey, and was open for five weeks. Of the student sample, 36% described their mental health as ‘bad’ or ‘very bad’, and 45% of students surveyed described their overall health as having been worse since starting Durham University (Durham University, 2019, chap. 3.2). The Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) (Warwick Medical School, 2020a) was used to measure the mental wellbeing of the student population sampled and found that the average wellbeing score (20.46) was significantly below the UK average (23.61), although the data was not weighted for age (Durham University, 2019, chap. 3.3). These figures demonstrate that the mental wellbeing of students could be much improved, however, the sample represented only 10% of the student population so the results are not generalisable to the entire student population. Additionally, finalists were excluded and more females than males responded suggesting the survey sample was not representative of the population.

As a component of the study, a mental health consultation was held by the Counselling Service and the Durham Students Union (as part of the SHNA), and spoke with students representing different groups, such as Welfare Officers and officers from Liberation societies such as the Disabilities Association (Durham University, 2019, chap. 4.2). Some key findings from the discussions at this event were that students generally appreciated the university’s service provisions and understood that there were limits on the extent of the support that the university should offer. There was discussion of the need for increased awareness and clarity regarding the support services, as they were ‘seen as a bewildering array’ (Durham University, 2019, chap. 4.2, bullet point 13). Interestingly, the two priorities selected most often as needing attention to improve mental health were housing issues and academic support. Support accessibility received fewer votes, and issues regarding diversity and the counselling service received even less (Durham University, 2019, chap. 4.2). This insinuates that housing and academia were significant stressors for students and could impact their mental health and wellbeing.

The consultation event is useful in understanding student perceptions, though using only student representatives may have led to some lesser held views by others in the student body being overlooked.

2.5c. Help-seeking at Durham University

The SHNA (Durham University, 2019) looked into help-seeking and found that 4 in 10 female students sought mental health help where 1 in 10 males did, despite both having similar SWEMWBS scores. Of participants who had sought help, over 60% utilised the ‘University Counselling Service’ and 45% sought out a ‘GP’. The Counselling Service was rated ‘not helpful’ more than other help sources, but ‘Friends’ and ‘Family’ had the most ‘very helpful’ ratings (the other sources being the GP, College, JCR/MCR, and Specialist NHS) (Durham University, 2019, chap. 3.3).

2.5d. Current strategies

Durham University has an extensive range of resources to support student wellbeing. There is the Counselling and Mental Health Service, offering counselling sessions, workshops, webinars, support groups, self-help resources, psychological wellbeing guidance and mental health advice. The Counselling Service link with Nilaari reflects awareness of the need for a culturally tailored offer in terms of counselling. Further, each college has its own welfare team; a group of students who volunteer to run wellbeing activities and drop-in sessions, as well as a student support team, who can give support on different issues (Durham University, 2022d). Immigration and disability support are also provided. There is also a drug and alcohol awareness drop-in, along with a student wellbeing programme that offers free exercise and meditation classes. There are a wealth of online resources and signposting to external resources (e.g. crisis helplines) (Durham University, 2022b), including information about different faiths. There also exists a chaplaincy within the university which offers welfare and ‘pastoral support’ (Durham University, 2022a). The university has an equality, diversity, and inclusion (EDI) team and mission, as well as a health and wellbeing strategy (Durham University, no date).

The variety of resources and student support – including formal, informal, and self-help sources (Rickwood, Thomas and Bradford, 2012, pp. 10–11) – on offer ensures there is something for different levels of personal comfort and confidence when seeking help. It aims to be inclusive, and the strategies and missions provide evidence of ongoing research and improvements. The success of some of these strategies will be assessed further in this research.

In summary, the exploration of belonging, mental health and wellbeing, and help-seeking in these reports provides useful findings that show there are areas for improvement within each concept, something this research will explore in more detail. While acknowledging the problems with the university, it is important to remember that change, particularly regarding inequalities that have a history of being rooted in society, can be a very gradual process. Inequalities still exist in society and

so they do in society's institutions, but that is not to say that no progress has been made. The efforts made by institutions to instil positive change should not be dismissed.

Summary

The literature forms the rationale for this research and its aim. It puts forward evidence to suggest belonging has a positive impact on mental wellbeing and help-seeking, informing the hypotheses. Further, it shows the importance of understanding belonging, mental wellbeing, and help-seeking, how they are shaped and experienced, and how they can contribute to student wellbeing. These aspects underlie the research questions. Reports carried out at Durham University suggest that there should be further work to improve Durham students' experiences with each of the concepts. While a university is not a medical institution, it becomes a home to many students during formative years of their lives. They deserve to feel comfortable and supported there, not only because it will assist their studies, but because it will encourage their wellbeing.

3. Methods

This chapter will explain the research design and methods. The methods are designed to collect detailed student and staff perspectives in relation to student belonging, mental wellbeing, and help-seeking, to understand how these concepts interact, and what might affect them.

3.1. Study design

A mixed methods approach was used in this research to provide both quantitative and qualitative insights. Data were collected through an online survey and semi-structured interviews. The choice to utilise both methods was to provide a rich mapping of the concepts. It also offered different kinds of engagement for participants, since interviews may feel somewhat intrusive and could be daunting for some. Furthermore, while a survey tends to yield more participants, it is not guaranteed to collect as much detail as interviews. Since the research was completed over five months, mixed methods allowed for the collection of more detailed data within this time.

The survey was carried out using JISC Online Surveys, due to the online software's versatile question style options and GDPR compliance. The semi-structured interviews were carried out online over the Zoom meeting platform for convenience and to enable participation where participants could not meet face to face, or did not want to in cases of safety concerns surrounding COVID-19. The survey was piloted with some participants prior to its final rollout, to ensure adequate functioning and clarity. The interview guide was also piloted, and relevant changes were made to ensure the questions flowed and were appropriately focused on the study themes.

The research methods and modes of analysis were informed by the research questions and hypotheses, as illustrated in Section 3.5 (p.35).

3.2. Participants

For both elements of data collection, convenience sampling was used through encouraging voluntary participation. Recruitment of survey participants occurred through sharing the survey weblink on Facebook groups affiliated with Durham University students as well as in an email newsletter (see Appendix A). Snowball sampling was also used through promotion in personal networks. All Durham University students, current or recently graduated, were eligible to participate. This sampling approach ensured the survey was widely distributed to attract as many participants as possible during the timeframe. Participant characteristics of those taking the survey were assessed throughout to determine if it was reaching students from a range of backgrounds, which it did successfully. A total of 119 participants took part in the survey.

This study attempts to explore associations between belonging and mental wellbeing among Durham University students utilising quantitative and qualitative data, hence a sample size estimation was not done at the beginning. Post-hoc power calculations were done on significant regression results using G*Power software (pp. 60-61).

The student interviews were promoted through the same avenues as the survey (see Appendix A), though this time the recruitment text specified a desire for participants of minority backgrounds. This was because the sample was smaller, so diversity may have been harder to achieve otherwise. As illustrated by the literature discussing inequalities and effects of these (Bourdieu and Passeron, 1977; Rainey *et al.*, 2018; Cureton and Gravestock, 2019; Gopalan and Brady, 2020; Mooney and Becker, 2020; The Durham Commission on Respect Values and Behaviour, 2020; Neves and Brown, 2022), it was deemed important to hear perspectives of students from a range of backgrounds. Nine student participants took part in the interviews.

Staff involved in student wellbeing support at the university were also invited to participate. The staff were recruited through an email circulated to all college vice principals and other staff involved in student support (see Appendix A). Interested staff could respond and register their interest. Three staff members reached out and participated in the semi-structured interviews.

3.3. Data collection period

Online survey

An online survey remained open to participants between 20 May 2022 and 7 August 2022.

Semi-structured interviews

Interviews were carried out between 11 July 2022 and 30 September 2022.

3.4. Measures

3.4a. Survey measures

The survey included three composite continuous scale measures (see Appendix B) that were key outcome indicators. These scales assessed belonging at university, mental wellbeing over the last 2 weeks, and help-seeking intentions for a personal and/or emotional problem.

The three scales each covered one of the key research concepts (belonging, mental wellbeing, help-seeking) and were taken from existing tools used in similar settings which had been previously validated:

1. Belonging: *Belonging scale* (Yorke, 2016)

2. Mental wellbeing: *Short Warwick-Edinburgh Mental Wellbeing Scale* (Warwick Medical School, 2020d)
3. Help-seeking intentions: *General Help-Seeking Questionnaire* (Wilson *et al.*, 2005)

Belonging scale

To come up with an instrument measuring student belonging, engagement, and self-confidence, a 16-item measure was developed in partnership with the ‘What Works? Student Retention and Success Change Programme’ (Yorke, 2016). It included six items that measured belonging (see Appendix B p. 105) with a reliability score (Cronbach's alpha) of 0.76 when used in UK university settings (Yorke, 2016, p. 154). A score of 0.70 or above is considered good for Cronbach's alpha, a statistical measure of scale reliability (Field, 2009, p. 681).

For this study, belonging was measured using the 6 specific scale items that assessed belonging from the 16-item instrument (Yorke, 2014, p. 156). Only the belonging part of the scale was used in this study since the other concepts were not directly assessing belonging. The belonging scale includes items that ask participants to rate their agreement with each statement (from 1 to 5) in a Likert format. Some of the statements are: ‘I feel at home in this university’ and ‘I wish I’d gone to a different university’ (Yorke, 2016, p. 166). As well as using the items in their original form, a latent construct of belonging was created using the items (see 'Statistical analysis' section, p. 37). The reliability of the scale in this setting was also checked.

The conceptualisations of belonging used in the report for the ‘What Works? Student Retention and Success Change Programme’ (Thomas, 2012) describe the university as a socially, economically, and politically charged environment that can reproduce societal inequalities and stratifications. Hence, the scale was deemed relevant and appropriate for measuring student belonging within Durham University due to its grounding in relevant theory.

Mental wellbeing scale

Mental wellbeing was measured with the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS), the shortened version of the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS), an established measure used across various settings (Warwick Medical School, 2020a, 2020b) that assesses positive aspects of mental health (Tennant *et al.*, 2007, p. 1). The scale asks participants how often they’ve related to certain statements over the last 2 weeks, ranging from ‘None of the time’ to ‘All of the time’. Example statements are ‘I’ve been feeling optimistic about the future’, and ‘I’ve been dealing with problems well’ (Warwick Medical School, 2020d) (see Appendix B, p. 106). This scale was selected since it is brief, hence would increase the likelihood of participants completing the survey. Additionally, the scale questions are worded in a broad way, allowing room for different experiences of mental health and wellbeing difficulties. The questions’ positive wording avoids the use of potentially triggering labels such as ‘depressed’ (Kessler *et al.*, 2002), reducing the

chance of participants being upset and potentially increasing the number of participants that felt comfortable answering the questions. The SWEMWBS defines mental wellbeing as ‘psychological functioning and subjective wellbeing’ (Warwick Medical School, 2019), as well as ‘feeling good and functioning well’ (Warwick Medical School, 2019), linking to aspects of functioning as well as wider emotions and experience. The scale is a holistic and inclusive measure, aligned with current values and shifts in psychiatry (Warwick Medical School, 2020c). Furthermore, the SWEMWBS was used in the Durham Student Health Needs Assessment (Durham University, 2019) and was tested on UK students (Warwick Medical School, 2020a) so has already been validated for use with the research demographic (Davoren *et al.*, 2013).

Help-seeking intentions scale

Help-seeking intentions were measured through one part of the two-part General Help-Seeking Questionnaire (GHSQ) (Wilson *et al.*, 2005), in which participants are asked to rate the likelihood (where 1 is ‘Extremely Unlikely’ and 7 is ‘Extremely Likely’) that they will use different sources of help when encountering a ‘personal or emotional problem’ and ‘suicidal thoughts’ (Wilson *et al.*, 2005, p. 19). The latter question was omitted, as done in the study by Gorczynski *et al.* (2017), due to the potentially triggering wording. This scale was chosen because the authors permit editing of the scale (Wilson *et al.*, 2005, p. 18) and it provides data on hypothetical help-seeking (help-seeking intentions), which is inclusive of those who may not have any past experience with help-seeking, and non-intrusive for those who have past experience. Additionally, the phrasing ‘personal or emotional problem’ was deemed a sensitive way of asking participants about their mental state. As allowed by the scale authors (Wilson *et al.*, 2005, p. 18), some help sources were added to match the target population and research questions. These were university mental health support services to measure how likely students would be to seek help from the university (see Appendix B, p. 108).

Help sources of the GHSQ were condensed into two different categories for descriptive analysis: ‘university sources’ and ‘non-university sources’. This was to enable analysis of intentions to seek help from the university sources alone, as this was relevant to the research questions which looked specifically at the role of the university.

Apart from the key outcome indicators (belonging, mental wellbeing, and help-seeking intentions), the survey included some explanatory variables. These were retrieved through sociodemographic questions and academic characteristics, as well as questions about participants’ awareness and use of any university mental wellbeing services, and the level of satisfaction with these if they had used them.

Demographic information – Data were collected on student age and sex, to enable the control of these variables when examining associations for key variables of interest, as they may shape students' belonging and wellbeing (Parr, 2022; Fernández, Ryan and Begeny, 2023).

Academic characteristics – The online survey collected relevant data on academic characteristics, such as level of study (undergraduate, postgraduate) (Moss *et al.*, 2022) and whether they were an international student (Singh, 2018; Brennan, 2022).

Protected characteristics – Data was collected on characteristics such as ethnic group (Johnson *et al.*, 2007), whether English was a first language (Penner *et al.*, 2021), whether a participant identified as LGBTQ+ (Gnan *et al.*, 2019; Moran, 2023), and whether they had a disability (McMillan and Jarvis, 2013; Barnes, Kelly and Mulrooney, 2021).

Socioeconomic status – Two main indicators were used in this context, where one of the measures was the 'MacArthur scale.' This assesses subjective social status by asking participants to rank their position on a social status ladder, with '1' indicating being the worst off and 10 indicating being 'best off,' with the most money, highest education, and best jobs. This scale is recommended for use in student populations for whom objective measures may be difficult to implement (Diemer *et al.*, 2013; Rubin, 2021). The other measure used asked for the highest qualifications of the participant's parents/guardians (Aarø *et al.*, 2009; Pedler, Willis and Nieuwoudt, 2022) where having at least a degree level education was considered to indicate better socioeconomic status.

The quantitative questions were followed by an open text box allowing participants to note relevant issues in greater detail. All questions were optional to ensure participants felt comfortable and to ensure completion rates were as high as possible.

Where participants did not complete a question, they were excluded in analysis of the skipped question, but remained in the analysis for questions they had answered. In the case of scales, participants were excluded where they had not completed all parts of the scale, since this would lead to an inaccurate score. In other words, cases were excluded pairwise throughout the data analysis.

3.4b. Semi-structured interviews

Two interview guides, one for students and one for staff (see Appendices C and D respectively), were designed to explore how students understood and experienced belonging and mental wellbeing, and to investigate their experiences of help-seeking.

Student interview guides asked about the students' experiences and staff interview guides asked for their perspectives on student experiences. In both interview guides, thematic questions were precluded by some general questions about the interviewee's life and how the interviewee was doing to establish rapport with them and make them feel comfortable. All interviews were semi-structured, with open questions allowing for detailed elaboration. The questions were worded sensitively to mitigate the

likelihood of distress when discussing potentially sensitive topics. The questions were also worded as neutrally as possible to avoid leading or inducing bias. Probing phrases such as ‘tell me more’ were used to encourage interviewees to share more detail.

3.5. Study design rationale based on research questions and hypotheses

The creation of the survey and interview guides was informed by the research questions and hypotheses (see Section 1.2, pp. 9-10).

- In answering Research Question 1 and its hypotheses, the scales on belonging, mental wellbeing, and help-seeking intentions were used in correlations and regression models to see how belonging affected the other two concepts. Qualitative data gave exploratory insights into links between the three concepts.
- In answering Research Question 2 and its hypotheses, the sociodemographic characteristics were used in regression models to see how they impacted the three key concepts. Conceptual understanding and literary evidence (Johnson *et al.*, 2007; Thompson, 2011; McMillan and Jarvis, 2013; Stebleton, Soria and Huesman, 2014b; Han and Pong, 2015; Singh, 2018; Gnan *et al.*, 2019; Reiss *et al.*, 2019; Barnes, Kelly and Mulrooney, 2021; Bettencourt, 2021; Morris, 2021; Olaniyan, 2021; Penner *et al.*, 2021; Rubin, 2021; Brennan, 2022; Lipson *et al.*, 2022; Moss *et al.*, 2022; Parr, 2022; Fernández, Ryan and Begeny, 2023; Jeong, Kim and Lee, 2023; Moran, 2023) informed the hypotheses and the choosing of this set of variables that would likely impact the concepts of belonging at university, mental wellbeing, and help-seeking intentions. In the qualitative data, factors discussed in relation to belonging, mental wellbeing, and help-seeking were established and explored.
- In answering Research Question 3 and its hypotheses, data on past student support use and satisfaction, as well as descriptive exploration of the scales’ means in comparison to other studies gave some indication of how successful the university is in supporting student belonging, mental wellbeing, and help-seeking. The qualitative interview data on student attitudes about how supportive the university is were also considered.
- In answering Research Question 4, some descriptive data on scale means, university support service use, and from the interviews gave insight into whether students and staff had any points for improvement or change, and what these were.

3.6. **Variables and analysis**

Recoding of variables (quantitative survey data)

The survey data were exported from JISC Online Surveys into IBM SPSS Statistics and subsequently recoded and organised to allow for relevant analysis. Some student characteristic variables were recoded into more meaningful condensed categories because some categories otherwise had very small frequencies. Following guidelines provided (Wilson *et al.*, 2005; Stewart-Brown *et al.*, 2009, p. 7; Yorke, 2016; Warwick Medical School, 2021), data for items included in the belonging scale, SWEMWBS scale, and help-seeking intentions scale, were coded to create meaningful scores as follows:

Belonging – Belonging at university was calculated by summing the values of each of answer on a five-point scale (where ‘Strongly Agree’ equalled 5 and ‘Strongly Disagree’ equalled 1) and dividing by the number of questions (6) to get a mean, with 1 being the lowest and 5 being the highest. Questions 3 and 6 of the scale were negatively worded while the remainder were positive, so answer values of the five-point scale were reversed on these two questions when calculating overall scores. The score was measured in the same way as the original survey (Yorke, 2016, pp. 155–156). As was also presented by Yorke (2016), the descriptive results in this study used the original item score and the inferential analyses used the derived construct of belonging. Yorke’s paper (2016) does not quantify benchmarks for levels of belonging that are considered adequate or inadequate, hence this paper does not attempt to dictate this and instead uses scores from Yorke’s pilot studies of the scale as a point of comparison.

Mental wellbeing – Mental wellbeing was calculated by summing the scores of each question’s answer (‘None of the time’ = 1, ‘Rarely’ = 2, ‘Some of the time’ = 3, ‘Often’ = 4, ‘All of the time’ = 5). Following the Warwick Medical School guidance (Warwick Medical School, 2021), these raw scores were then converted using the SWEMWBS conversion table (Stewart-Brown *et al.*, 2009, p. 7). When assessing the item breakdown of the scale, mean scores were used for each item. The SWEMWBS guidance (Warwick Medical School, 2021) provides defined categories of high, average, and low mental wellbeing for 2011 UK population scores – where the top 15% (scores of 27.5 or higher) and bottom 15% (scores of 19.5 or lower) of UK scores were defined as high and low mental wellbeing respectively. These categories of high and low wellbeing from the previously studied UK population (Warwick Medical School, 2021) were used as comparative benchmarks for the mean SWEMWBS score in this study.

Help-seeking intentions - Intentions to seek help from sources in the help-seeking intentions scale were scored by calculating the mean value for each help source, as done by the scale developers (Wilson *et al.*, 2005, p. 23). Means for the categories ‘university sources’ and ‘non-university sources’ were also calculated. Similar to the belonging scale, the descriptive results of this scale used the

original question items, while inferential analyses used the reduced single dimension variable of help-seeking intentions scale as a construct (Field, 2009, chap. 17; Olivari and Guzmán-González, 2017). The General Help-Seeking Intentions scale, like the belonging scale, does not define what adequate and inadequate help-seeking intentions are, hence neither will this thesis. However, the scale sample study (Wilson *et al.*, 2005, p. 22) illustrates expected average help-seeking intentions scores for informal sources, which are used as comparison points for this study's data.

Statistical analysis

Regarding the quantitative survey data, descriptive analysis was used to present student characteristics, and to present the status of students in relation to belonging, mental wellbeing, and help-seeking intentions. Percentages, used to summarise categorical variables, were rounded to the nearest whole number. The ordinal scale items (Likert scale) were presented using means and standard deviation to one decimal place to aid comparison with previous studies' scores.

Principal component analysis (PCA) was used to create unidimensional scales, for belonging and help-seeking intentions for university sources (see Appendix O). Often in the social sciences, variables of interest are not directly measurable. Therefore, they are measured indirectly through a combination of items that can be measured directly (Knekta, Runyon and Eddy, 2019, p. 2). Applying this concept, this research created latent constructs of 'belonging' and 'help-seeking intentions for university sources' using validated scale items used in previous research in similar settings. Since belonging was assessed in relation to students' affiliation to the university, the help-seeking intentions construct also focused on this particular aspect only, by looking at help-seeking intentions for university sources. The analysis applied statistical data reduction techniques and assigned weights on the correlated sub-items measuring the same underlying concepts (Wilson *et al.*, 2005; Field, 2009, chap. 17; Yorke, 2016). The reliability score (Cronbach's alpha) for the PCA adjusted belonging scale was 0.79 and for the PCA adjusted help-seeking intentions scale was 0.77 (see Appendix O).

Correlations were used to explore associations between belonging (PCA scale), mental wellbeing, and help-seeking intentions for university sources (PCA scale). To examine correlations between continuous variables of interest, a Shapiro-Wilk test, considered suitable for this sample size, and generally the preferred normality test due to its power (Razali and Yap, 2011, p. 25), was performed to check whether the normality assumption required for the Pearson's correlation test was satisfied. The results for the Shapiro-Wilk test on the PCA-derived belonging scale indicated that the null hypothesis 'the variable is normally distributed' could be accepted ($W = 0.980$, $p\text{-value} = 0.120$). However, the test performed on mental wellbeing, using the indicator SWEMWBS ($W = 0.950$, $p\text{-value} = <0.001$) and the PCA-derived composite scale of help-seeking intentions for university sources ($W = 0.966$, $p\text{-value} = 0.008$) were both non-normally distributed (see Appendix P). In this

context, the non-parametric Spearman's rho test was chosen for investigating correlations between these continuous variables.

Multiple linear regression models were then used to quantify the association in terms of how belonging affects mental wellbeing and help-seeking intentions for university sources while controlling for other variables.

As well as this, the models were used to explore the association and explainability of the sociodemographic variables for belonging, mental wellbeing, and help-seeking intentions. While some variables were seen to only impact one or two of the concepts in the literature, the same set of variables were used consistently across all three for continuity and in case any significant results were found. The selected categorical variables were recoded to have only 2 categories if they did not already, except for 'age' where three dummy variables were created.

Once the variables were chosen, univariate regression analysis was carried out to explore the association of each variable individually with the outcome variables (belonging at university, mental wellbeing, help-seeking intentions for university sources). Variables were considered eligible for inclusion in the multiple regression analysis if they had a $p < 0.25$ in univariate regression (Traub *et al.*, 2004, p. 690; Bolland *et al.*, 2006, p. 318).

The variables were then grouped into blocks based on their common theme. The significant variables for each outcome were then used, in their blocks defined by their characteristics, in a multiple regression model for their respective outcome. This was to assess whether they explained more variability in the outcome than the base model or other characteristics included earlier in the model. Each outcome variable had a different set of included predictor variables because not all the variables were significant in the univariate analyses. Note that for some models, only one variable from a themed block was used in a block due to the other variables in that theme not showing significance in the univariate regression results.

The grouping of explanatory variables against outcome variables by types (as blocks) is shown below (Table 1).

Table 1. Grouping of explanatory variables for each outcome

| Characteristics type/ Outcome | Variable (categories) | Belonging | Mental wellbeing | Help- seeking intention from University sources |
|---|--|-----------|---------------------|--|
| Basic demographic characteristics | Age (18-19, 20-21, 22-23, 24+) | X | X | X |
| | Gender (female, male) | X | X | X |
| Conceptual scale | Belonging | | X | X |
| Protected characteristics | Ethnicity (white, non-white) | X | X | X |
| | English as first language (yes, no) | X | X | X |
| | Disability/learning difficulty (yes, no) | X | X | X |
| | LGBTQ+ (yes, no) | X | X | X |
| Academic administrative characteristics | Level of study (undergraduate, postgraduate) | X | X | X |
| | International/Home student (international/Home) | X | X | X |
| Socioeconomic status | Subjective social status (N/A as continuous) | X | X | X |
| | Parent/guardian | X | X | X |
| | Qualification (above degree level, below degree level) | | | |

Blocks were added to each outcome variable's model progressively, with the demographic category of age and gender being the base model for each outcome. Gender in particular was controlled each time because it was significantly different in the sample and the wider Durham student population (Table 2, p. 43). The order in which blocks were added was dictated by the impact they were predicted to have on the outcome, from conceptual understanding and the literature, with those expected to have a greater impact entered prior to those expected to have a lesser impact. This was done in attempt to control for as much variation as possible while adding variables.

Models with an insignificant model fit were discarded. Where a model had a significant model fit, it was assessed against the assumptions for multiple regression (Field, 2009, pp. 241–251) and necessary steps were taken to satisfy these. The final mental wellbeing model was found to have an implausible outlier, so the same model was run but this time excluding the outlier. The new model was checked against the model assumptions again (see Appendix R). Partial plots to check the assumption of linearity were done for continuous variables only. All model assumptions were satisfied for the final model presented in the result section. Post-hoc power calculations were carried out on the significant results.

Analysis of qualitative semi-structured interview data

Interviews were recorded using a mobile device and the Zoom auto-transcription feature. The audio recordings assisted Zoom transcript edits in Word. The final transcripts were then coded thematically using Nvivo to aid analysis.

Reflexive thematic analysis (Braun and Clarke, 2006, 2012, 2013, 2019, 2020) was carried out on the final transcripts to identify patterns and themes related to student experiences of belonging, mental wellbeing, and help-seeking. This method of analysis was chosen since it enables an exploratory, creative, and organic assessment of the data (Byrne, 2022, p. 1393), which aligned with the broad and exploratory nature of the research.

Braun and Clarke's six phases for analysis (Braun and Clarke, 2012, 2013, 2020) were used as a guide for the qualitative data interpretation. First, the researcher read over the transcripts to get familiar with them. Subsequently, codes were picked out and noted in Nvivo. Related codes were then grouped together to create key themes, some of which were reviewed and developed as further codes were accumulated. Themes were defined more clearly and then discussed in relation to belonging, mental wellbeing, and help-seeking.

The qualitative data was analysed in a constructionist way, whereby meaning and Ie were seen as socially constructed (Byrne, 2022, pp. 1395, 1396). It was experiential to follow informants' perspectives and chosen meanings (Byrne, 2022, p. 1396). It was largely inductive to allow meaning to be shaped by participants, though partially deductive to ensure that the coding conjured themes that were relevant to the research questions (Byrne, 2022, p. 1397). Data was coded using both semantic and latent techniques, and each were used where they felt natural, to allow meaning to be found on the surface as well as beneath it (Byrne, 2022, p. 1397). These epistemologies and philosophies relate to the broad nature of the research questions by enabling the participant data to guide much of the analysis.

3.7. Ethics

Prior to participation in the study, participants were provided with an information sheet (see Appendices E-G) and privacy notice (see Appendices H-J) to read. These detailed what the study was about, what information the participant would be providing, and how this information would be processed, kept, analysed, and reported. They then had a consent form to sign if they wanted to participate in the research (see Appendices K-M). There were separate, tailored ethics forms for the survey and interviews, and for students and staff members. Participation was voluntary and participants had a right to withdraw their data at any time. Anonymity and confidentiality were ensured by survey participants being required to devise a unique Participant ID number that did not

identify them. For the interviews, participants were given a Participant ID and no names were recorded. Any personally identifying information disclosed in the survey or interviews was omitted. A debriefing sheet with appropriate resource signposting was included at the end of the survey and was sent to interview participants after their interviews (see Appendix N).

4. Quantitative Results

4.1. Population sociodemographic characteristics

The survey yielded 119 responses. The sociodemographic characteristics of the population are outlined in this section.

4.1a. General characteristics

Table 2 outlines the distribution of general sociodemographic characteristics within the population, alongside data from the Durham University 2021-2022 population for comparison (Student Registry, 2023a, 2023b). Where relevant demographic data in the Durham University population could not be found, cells are marked with N/A.

The majority of participants (90%) were aged 25 or under and largely (72%) cisgender women. Most participants were undergraduates, spoke English as a first language, had no disability or learning difficulty and had parents/guardians with qualifications to Degree level or above. About three quarters of the survey participants were White and subjective social status varied, with most participants describing themselves as having a status of 7.

Table 2. Characteristics of the studied sample (2022) and the Durham University population (2021-2022)

| Variable (total n) | Categories | My sample n (%) | Durham University population n (%) |
|--|--|----------------------------|---|
| <i>Age in years (119)</i> | 18-19 | 33 (28) | N/A |
| | 20-21 | 47 (40) | N/A |
| | 22-23 | 23 (19) | N/A |
| | 24-25 | 4 (3) | N/A |
| | 26-27 | 5 (4) | N/A |
| | 28-29 | 3 (3) | N/A |
| | 30 and over | 4 (3) | N/A |
| <i>Gender (119)</i> | Cisgender woman | 86 (72) | 54 |
| | Cisgender man | 21 (18) | 46 |
| | Transgender, non-binary, gender-fluid, or agender | 12 (10) | 0 |
| <i>Sexual orientation (119)</i> | LGBTQ+ identifying | 51 (43) | 960 (10) |
| | Non-LGBTQ+ identifying | 56 (47) | 6940 (75) |
| | Prefer not to say | 12 (10) | 1355 (15) |
| <i>English as first language (118)</i> | Yes | 102 (86) | N/A |
| | No | 16 (14) | N/A |
| <i>Disability or learning difficulties (118)</i> | Yes | 28 (24) | 1440 (16) |
| | No | 85 (72) | 7820 (84) |
| | Prefer not to say | 5 (4) | N/A |
| <i>Ethnic group (119)</i> | Asian/Asian British | 20 (17) | 3915 (42) |
| | Black/Black British/African/Caribbean | 2 (2) | |
| | Mixed/Multiple ethnic groups | 3 (2) | |
| | White | 92 (77) | 5340 (58) |
| | Prefer not to say | 2 (2) | N/A |
| <i>Level of study (119)</i> | Undergraduate | 94 (79) | 78 |
| | Postgraduate | 22 (18) | 22 |
| | Graduate | 3 (2) | N/A |
| <i>International (including EU) or home student (119)</i> | International | 28 (23) | 30 |
| | UK | 91 (77) | 70 |
| <i>Highest level of qualifications achieved by parent(s)/guardian(s) (119)</i> | Degree level or equivalent or above | 79 (66) | N/A |
| | Qualifications below Degree level | 33 (28) | N/A |
| | No qualifications | 1 (1) | N/A |
| | Do not know or cannot remember | 6 (5) | N/A |
| <i>MacArthur Scale of Subjective Social Status (119)</i> | 1 | 1 (1) | N/A |
| | 2 | 2 (1) | N/A |
| | 3 | 10 (8) | N/A |
| | 4 | 7 (6) | N/A |

| | 5 | 15 (13) | N/A |
|--|---|--|---|
| | 6 | 27 (23) | N/A |
| | 7 | 31 (26) | N/A |
| | 8 | 15 (13) | N/A |
| | 9 | 10 (8) | N/A |
| | 10 | 1 (1) | N/A |
| <i>Variable (total n for my sample / total n for Durham population sample))</i> | Categories | My sample n (%) | Durham University population n (%) |
| <i>Gender (119 / 25,785)</i> | Cisgender woman Cisgender man Transgender, non-binary, gender-fluid, or agender | 86 (72) 21 (18) 12 (10) | 14,104 (55) 11,673 (45) 8 (0) |
| <i>Sexual orientation (119 / 22,229)</i> | LGBTQ+ identifying Non-LGBTQ+ identifying Prefer not to say | 51 (43) 56 (47) 12 (10) | 2611 (12) 16,923 (76) 2695 (12) |
| <i>Disability or learning difficulties (118 / 25,815)</i> | Yes No Prefer not to say | 28 (24) 85 (72) 5 (4) | 4148 (16) 18,424 (71) 3243 (13) |
| <i>Ethnic group (119 / 25,814)</i> | Asian/Asian British Black/Black British/African/Caribbean Mixed/Multiple ethnic groups White Prefer not to say | 20 (17) 2 (2) 3 (2) 92 (77) 2 (2) | 8380 (32) 14,659 (57) 2775 (11) |
| <i>Level of study (119 / 25,815)</i> | Undergraduate Postgraduate Recent graduate | 94 (79) 22 (18) 3 (2) | 19,854 (77) 5961 (23) N/A |
| <i>International or home student (119 / 25,815)</i> | International Home | 28 (23) 91 (77) | 6911 (27) 18,904 (73) |
| <i>Age in years (119 / N/A)</i> | 18-19 20-21 22-23 24+ | 33 (28) 47 (40) 23 (19) 16 (13) | N/A N/A N/A N/A |
| <i>English as first language (118 / N/A)</i> | Yes No | 102 (86) 16 (14) | N/A N/A |
| <i>Highest level of qualifications achieved by parent(s)/guardian(s) (119 / N/A)</i> | Degree level or equivalent or above Qualifications below Degree level No qualifications Do not know or cannot remember | 79 (66) 33 (28) 1 (1) 6 (5) | N/A N/A N/A N/A |
| <i>MacArthur Scale of Subjective Social Status (119 / N/A)</i> | 1 2 3 4 5 6 7 8 9 10 | 1 (1) 2 (1) 10 (8) 7 (6) 15 (13) 27 (23) 31 (26) 15 (13) 10 (8) 1 (1) | N/A N/A N/A N/A N/A N/A N/A N/A N/A |

A Z-test was used to check whether the sample studied for this research significantly differed from the university population. With the data available, the test showed insignificant results at $p < .05$ for level of study (undergraduate: $Z = 0.54$, $p = 0.59$, postgraduate: $Z = -1.19$, $p = 0.23$), international/home students (international: $Z = -0.80$, $p = 0.42$, home: $Z = 0.80$, $p = 0.42$), and not having a disability/learning difficulty ($Z = 0.16$, $p = 0.87$). This meant the null hypothesis (that the proportions are the same in each sample) was accepted and suggests this study's sample is representative of the proportions of students at different levels of study, international and home students, and students who do not have a disability/learning difficulty. The remainder of categories with data for both samples (gender, ethnicity, sexual orientation, and having a disability/learning difficulty) showed significant Z-test results at $p < .05$ and the alternative hypothesis (that the proportions are different in each sample) was accepted. These results imply that the research sample was not representative of the Durham university population for these sociodemographic characteristics. The research sample is therefore partially representative of the Durham University 2021-2022 population, so results need to be interpreted carefully.

4.2. University service use and satisfaction

Figure 3 shows participant awareness of different mental wellbeing support options offered by the university. As each option could be chosen more than once, these percentages do not reflect 100%. Most support options were well-known among the participants. Welfare was the most widely known support option, followed by the Counselling and Mental Health Service. The Health and Wellbeing Hub had much lower awareness, with 'Other' having the lowest awareness. The option 'Other' was described by one participant of the two who had selected it, as 'Talking Changes', a support option not actually offered by the university, but by the NHS.

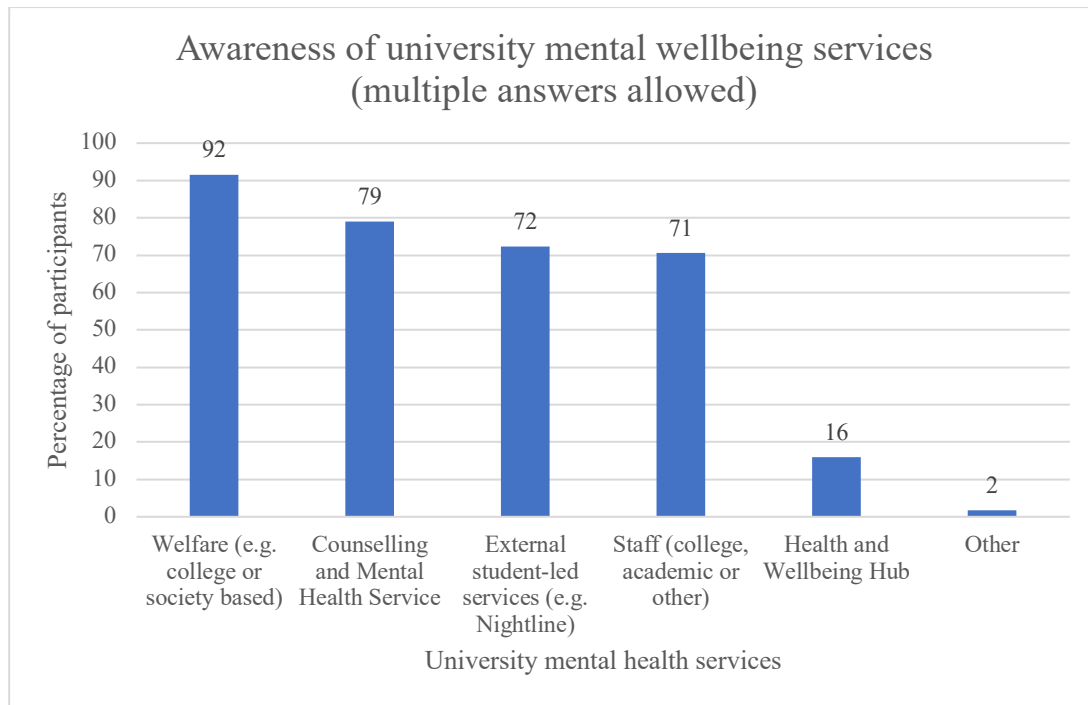


Figure 3. Participant awareness of university support services by percentage (multiple answers allowed)

About 58% of respondents ($n = 69$) sought support from one of the above-listed mental wellbeing services, while 42% ($n = 50$) did not. The following pie charts show the distribution of these responses by gender (Figure 4), level of study (Figure 5), and international/UK students (Figure 6).

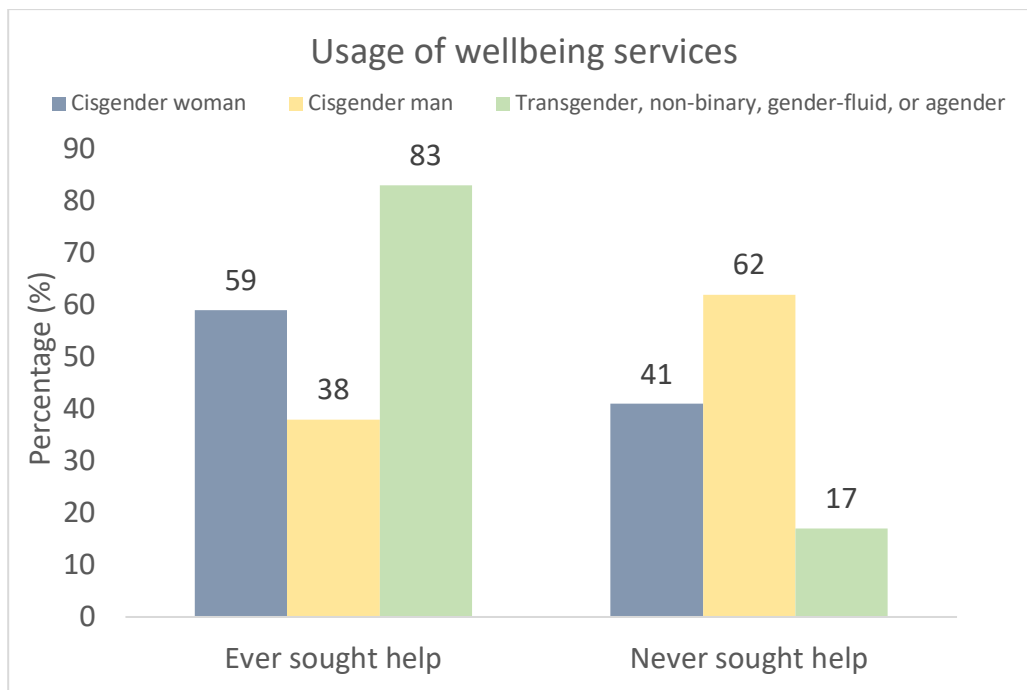


Figure 4. Gender distribution of whether participants sought help

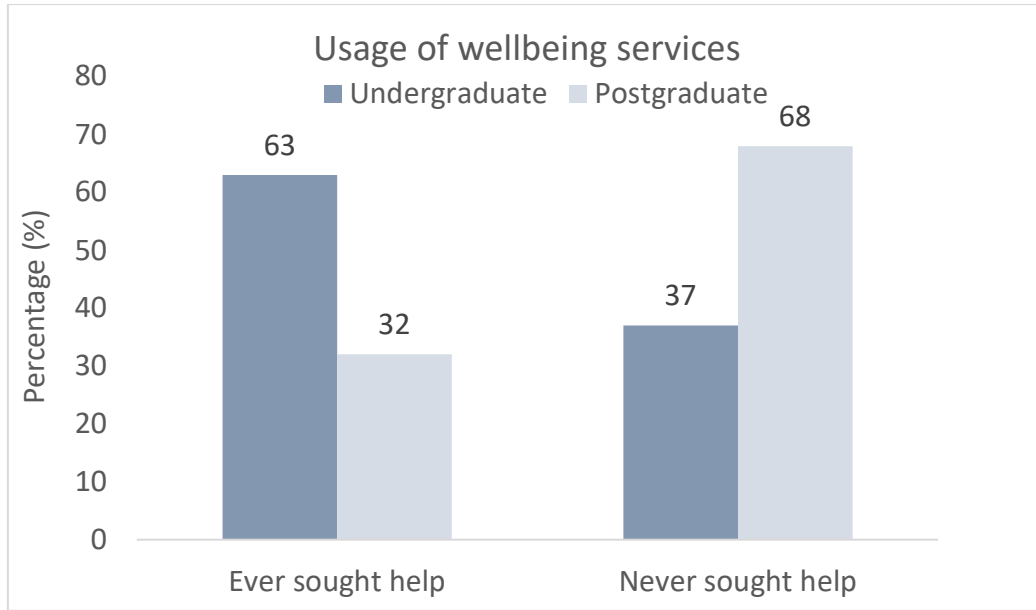


Figure 5. Level of study distribution of whether participants sought help

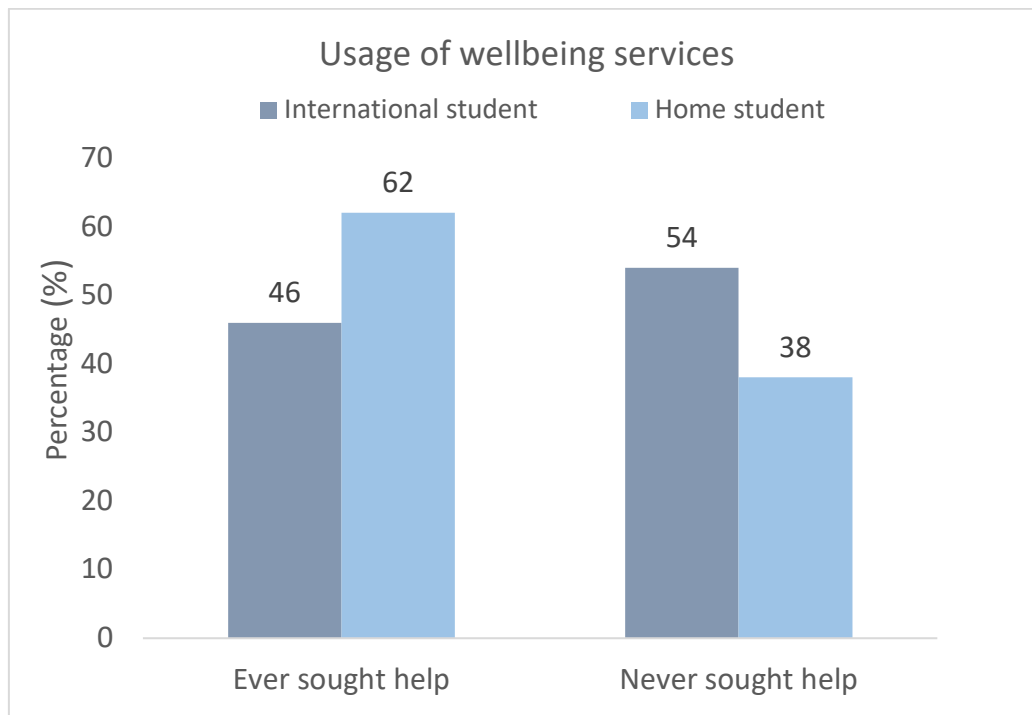


Figure 6. International and home student distribution of participants who sought help

Of the participants who used the services, their satisfaction is presented in Figure 7. The highest frequency response was 'Satisfied' (32%), followed by 'Unsatisfied' (28%). However, when positive and negative responses were put together (Satisfied = 'Very satisfied' and 'Satisfied'; Unsatisfied = 'Very unsatisfied' and 'Unsatisfied'), although 36% were satisfied, a higher percentage (38%) were unsatisfied, and yet another 26% were neither satisfied, nor unsatisfied.

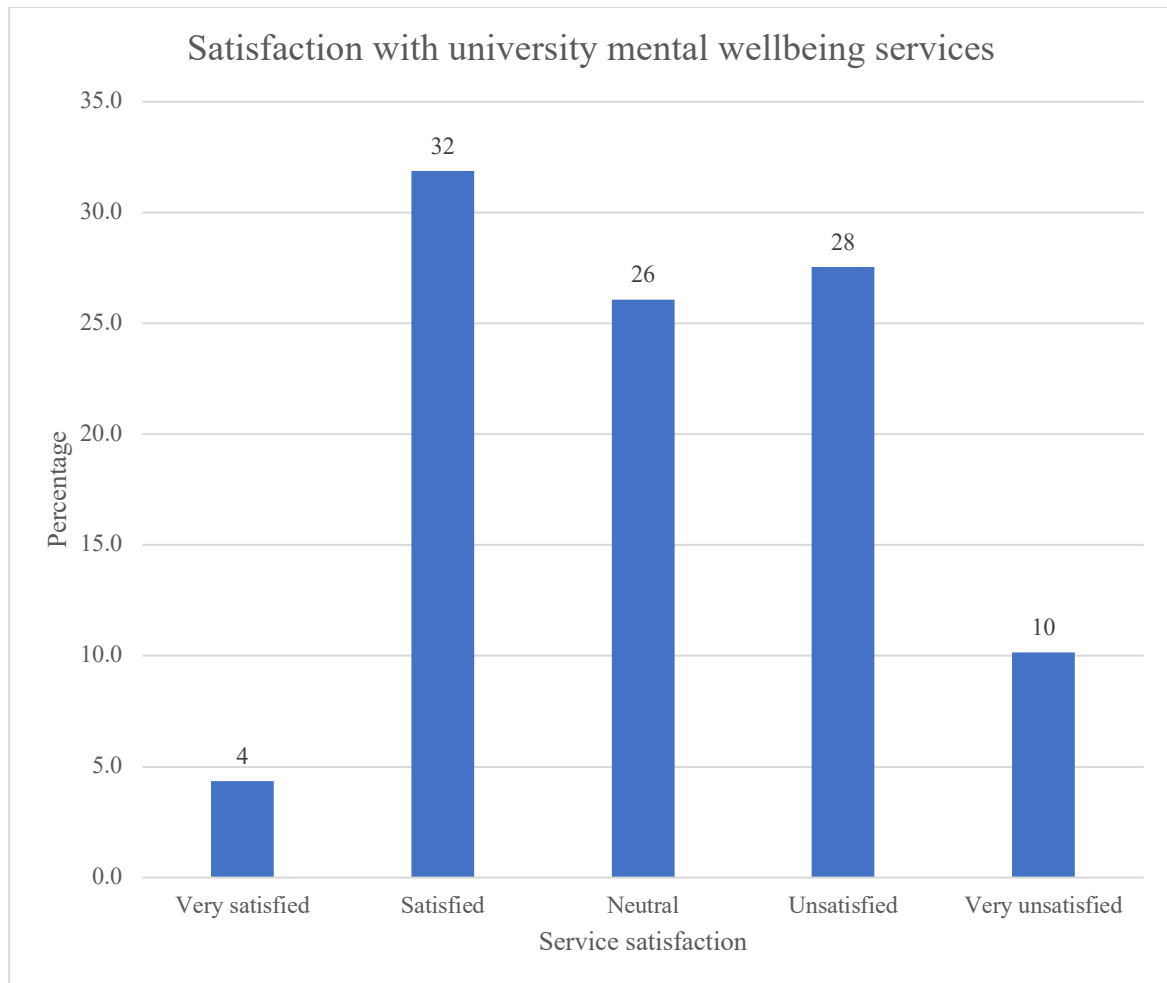


Figure 7. Participant satisfaction with services by percentage (n=69)

4.3. Belonging, mental wellbeing, and help-seeking intentions (in original form)

This section first descriptively summarises the average of total scores for the items included in the belonging scale, mental wellbeing scale, and help-seeking intentions scale, in their original form. It subsequently shows a breakdown of the scale scores by item.

4.4a. Means using original scale scores

Table 3 descriptively summarises the survey sample's average scores for the belonging scale, mental wellbeing scale, and help-seeking intentions scale split into 'non-university sources' and 'university sources,' with comparison scores from the scale authors' studies' detailed below the table.

Table 3. Descriptive statistics for the belonging scale, SWEMWBS, and both university and non-university sources of the help-seeking intentions scale

| | | Belonging scale | Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) | Help-seeking intentions scale – Non-university sources) | Help-seeking intentions scale – University sources |
|----------------|-------------|-----------------|--|---|--|
| N | Valid | 117 | 119 | 110 | 114 |
| | Missing | 2 | 0 | 9 | 5 |
| Mean | | 3.4 | 19.2 | 3.6 | 2.7 |
| Std. Deviation | | 0.8 | 3.8 | 0.8 | 1.1 |
| Range | | 3.7 | 28.0 | 3.9 | 5.4 |
| Minimum | | 1.3 | 7.0 | 1.6 | 1.0 |
| Maximum | | 5.0 | 35.0 | 5.5 | 6.4 |
| Percentiles | 25 | 2.8 | 16.9 | 3.1 | 2.0 |
| | 50 (Median) | 3.5 | 18.6 | 3.6 | 2.6 |
| | 75 | 4.0 | 21.5 | 4.1 | 3.6 |

Belonging

Of 119 participants, 117 completed the belonging scale, for which the higher the score, the higher the belonging. On a scale of 1-5, the average belonging score was 3.4 ± 0.8 .

The study sample has a relatively lower mean when compared to Yorke's pilot surveys used to introduce the scale (involving over 2500 UK first-year students from more than 10 UK universities) (Yorke, 2016, pp. 156, 157). These studies had means of 4.06 ± 0.57 and 4.02 ± 0.60 respectively (Yorke, 2016, p. 159) for the 6 belonging items used in this research.

Mental wellbeing

Like the belonging scale, higher scores indicated better mental wellbeing. On a scale of 7-35, the mean score was 19.2 ± 3.8 .

In comparison to the normative 2011 UK population data for the SWEMWBS (Warwick Medical School, 2021), which had a top 15% average score range of 27.5-35 and a lower 15% average score range of 7-19.5, this study sample had a lower percentage of participants in the top wellbeing range (<2%), and a higher percentage in the lower wellbeing range (58.8%). The mean score falls just within the UK population's lower 15% threshold.

Help-seeking intentions

On a scale of 1 to 7, where higher scores indicated a greater intention to seek help from a specific source, non-university sources (including 'Intimate partner', 'Friend', 'Phone/text helpline',

‘Doctor/GP/NHS’) had a mean of 3.6 ± 0.8 , while university sources (including ‘University welfare’, ‘University staff’, ‘University Counselling and Mental Health Service’) had a lower mean of 2.7 ± 1.1 .

For comparison, the sample GHSQ study found scores tended to range between 5 and 7 for informal sources (Wilson *et al.*, 2005, p. 22).

4.4b. Scale item breakdown

Figures 8-11 show the item-by-item average score breakdown for the scales before Principal Component Analysis (PCA) was applied to create a composite score for belonging and help-seeking intentions. Midpoints are marked by red dashed lines to provide a point of comparison and confidence intervals are included on each bar.

Belonging

Positively worded items have green bars, while negatively worded items have orange bars (Figure 8).

All belonging items were above the midpoint except for ‘I wish I’d gone to a different university.’ The highest scoring item was ‘I am shown respect by members of staff in the department.’ While the positive items scored above the midpoint, so did agreement with the statement ‘Sometimes I feel I don’t belong in this university.’



Figure 8. Belonging scale means by item breakdown ($n=119$ for all except ‘Being at this university is an enriching experience’ and ‘I have found this department to be welcoming’ where $n=118$)

Mental wellbeing

Six out of seven items had scores or confidence intervals below the midpoint. Only ‘I’ve been feeling close to other people’ and ‘I’ve been able to make up my own mind about things’ had average scores

above 3, though the former had a confidence interval below this. The latter received the highest score overall. The lowest scoring item was ‘I’ve been feeling relaxed’ (Figure 9).

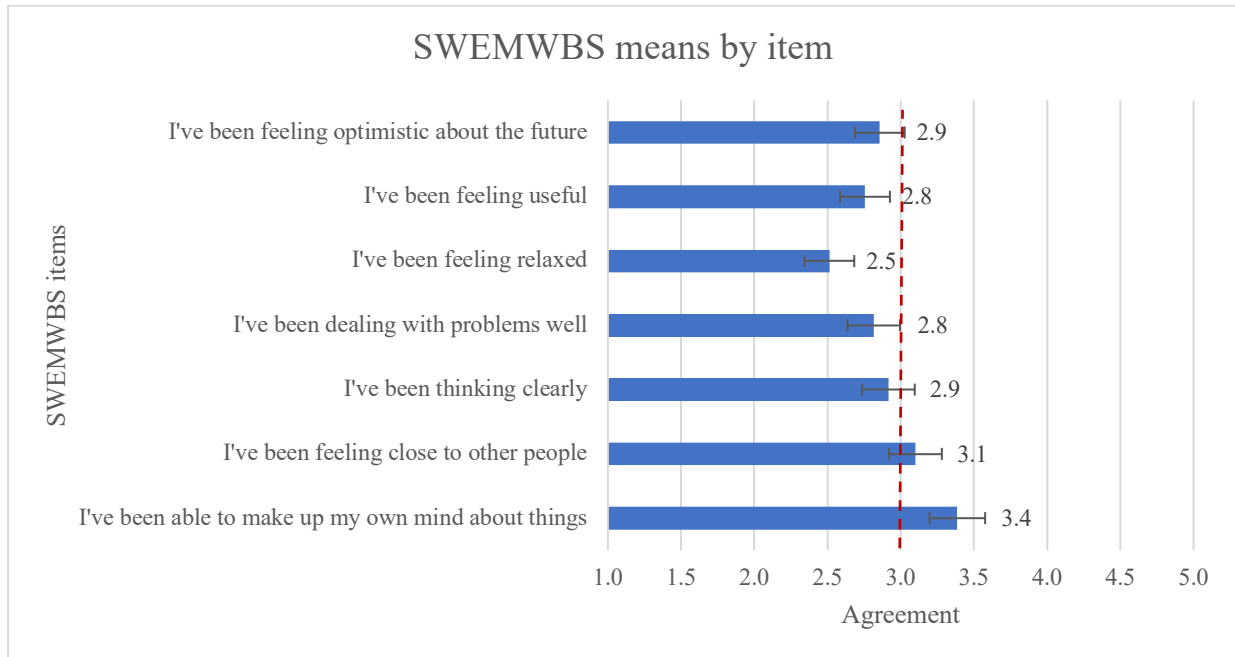


Figure 9. SWEMWBS means by item breakdown (n=119)

Help-seeking intentions

For university help-sources, average intention scores for all items were below the midpoint. The highest intention rating was for the item ‘University Counselling and Mental Health Service,’ while the lowest intention rating was for the ‘University Health and Wellbeing Hub’ (Figure 10).

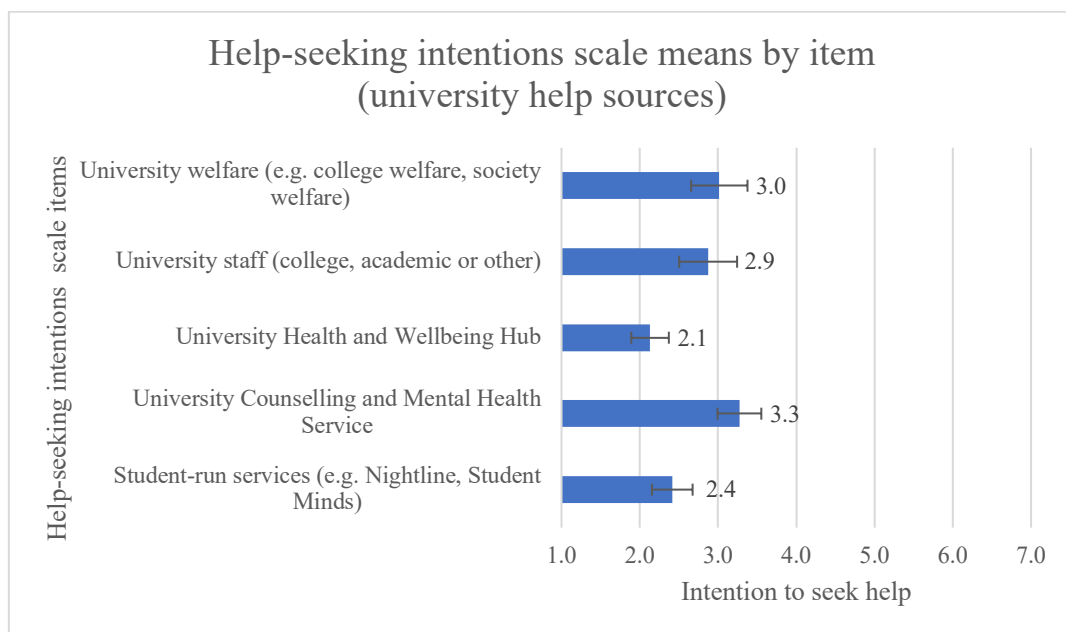


Figure 10. Help-seeking intentions scale means by item breakdown for university help sources

For non-university help-sources, three scores were above the midpoint, the highest being ‘Intimate partner,’ closely followed by ‘Friend.’ The lowest items were ‘Minister or religious leader’ and ‘I would seek help from another source not listed above,’ with 0.1 between their scores. The item ‘I would not seek help from anyone’ had a score just below the midpoint, of 3.4 (Figure 11).

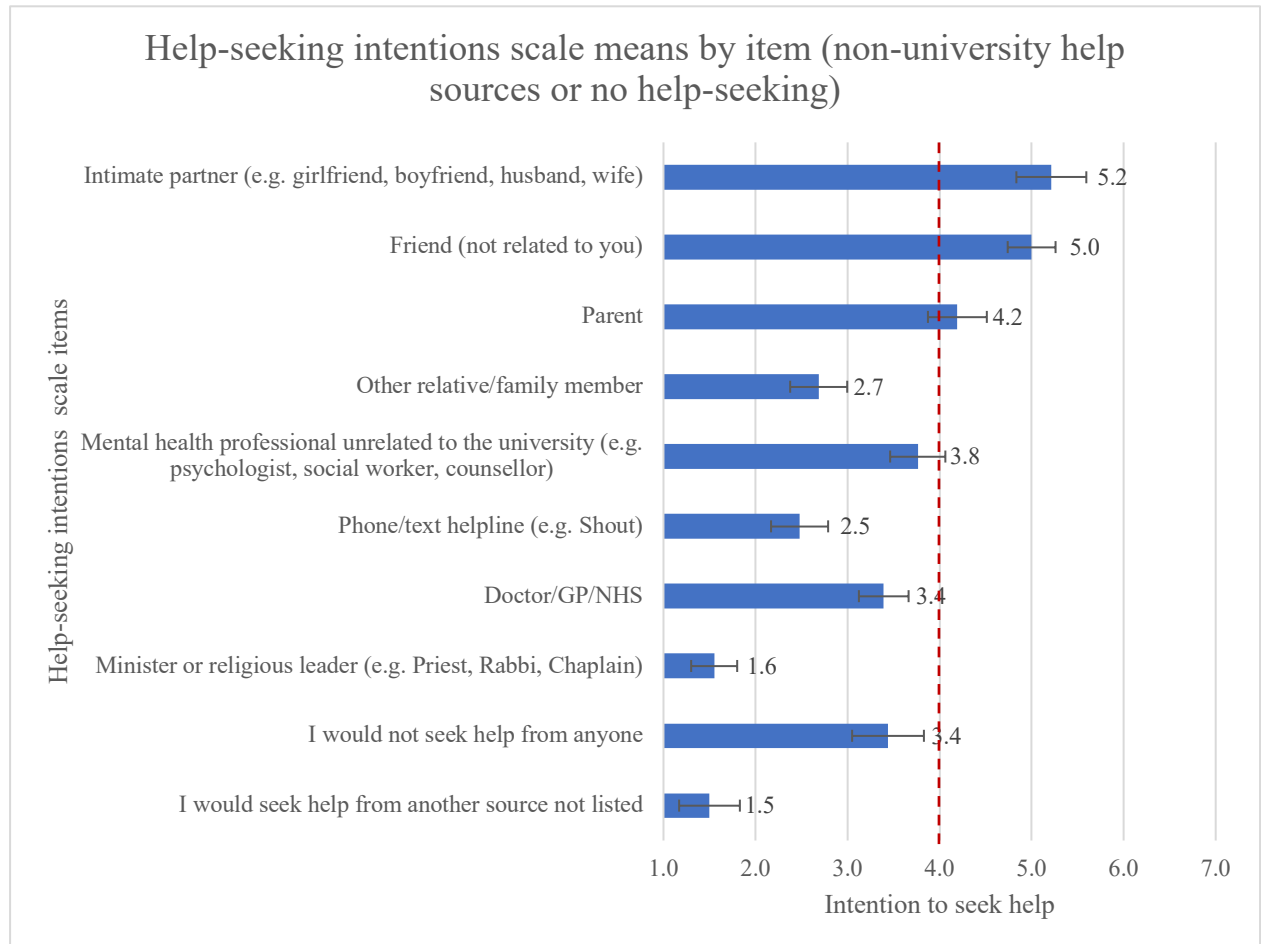


Figure 11. Help-seeking intentions scale means by item breakdown for non-university help sources

Figure 12 shows the likelihood of seeking help from each source, as was calculated by summing percentages for the three answer options above the neutral option ‘4’. These were options ‘5’ (Likely), ‘6,’ and ‘7’ (Extremely likely). Three informal sources (‘Intimate partner’, ‘Friend’, and ‘Parent’) had the highest percentages, while the lowest score was ‘Minister or religious leader.’ University sources had some of the lower scores. Some university sources had higher scores than ‘Other relative/family member’ and ‘Helpline.’ Likelihood to seek help from no-one (‘Would not seek help from anyone’) had a higher score than likelihood to seek help from each university source, as well as the ‘Doctor/GP/NHS, ‘Other relative/family member,’ ‘Helpline,’ and ‘Minister or religious leader.’

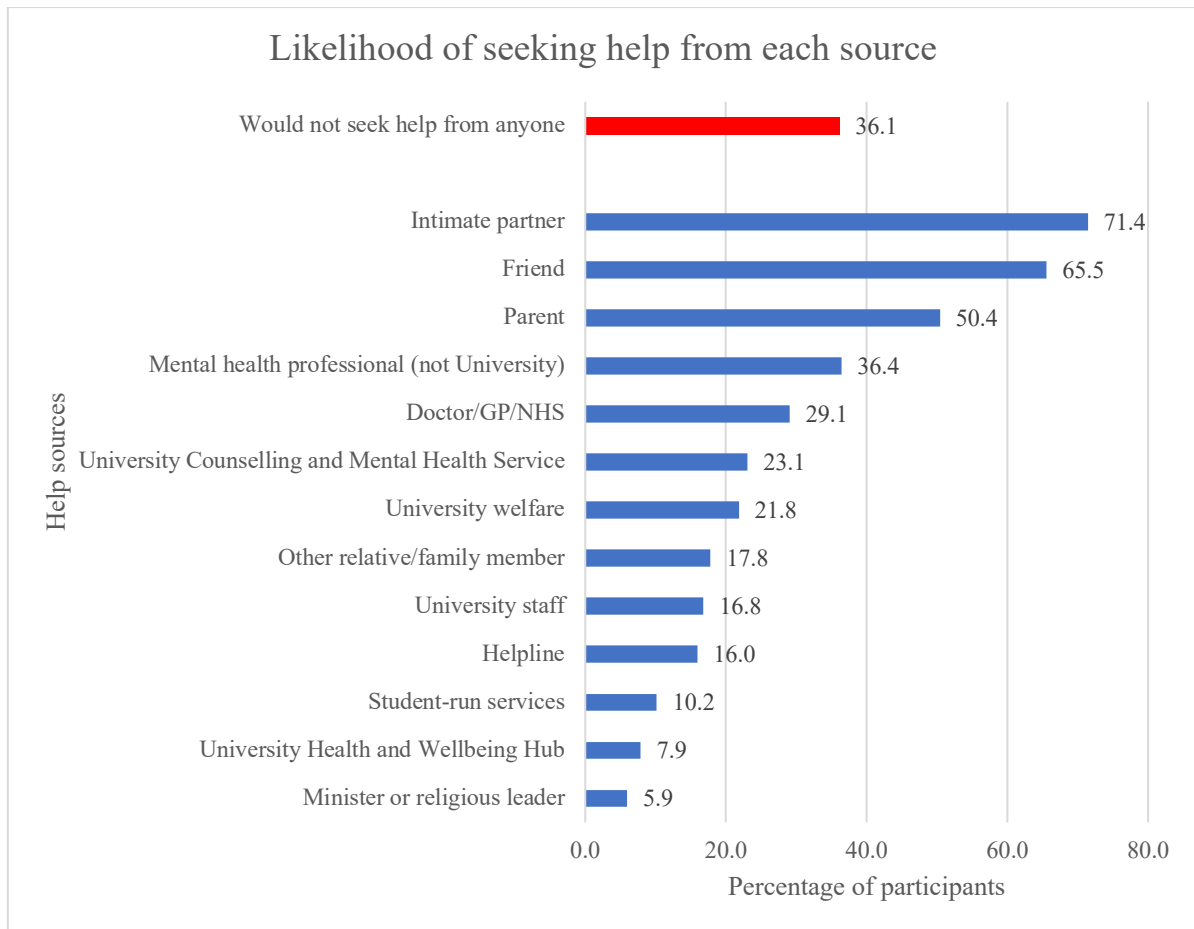


Figure 12. Likelihood of seeking help from each source by percentage

4.4. Correlations between variables of interest

PCA adjusted data for the Belonging scale, SWEMWBS, and Help-seeking intentions scale (university sources) were used in Spearman's rho to explore bivariate correlations between the scales. The correlation matrix (Table 4) shows the correlation output data, with significant correlations shown with an asterisk.

The belonging scale had significant positive correlations with the SWEMWBS (n=117) and the help-seeking intentions scale (n=112).

Table 4. Correlation matrix

| | | Belonging scale | Short Warwick- Edinburgh Mental Wellbeing Scale | University help-seeking scale |
|-----------------|--|--------------------|---|-------------------------------------|
| Spearman's rho | Belonging PCA scale | 1 | | |
| | Short Warwick- Edinburgh Mental Wellbeing Scale | .312 | 1 | |
| | University help- seeking PCA scale | .212 | 0.061 | 1 |
| Sig. (2-tailed) | Belonging PCA scale | - | | |
| | Short Warwick- Edinburgh Mental Wellbeing Scale | <0.001* | - | |
| | University help- seeking PCA scale | 0.025* | 0.518 | - |

4.5. Regression

4.7a. Univariate regression results

Below are the univariate regression results showing the results for each outcome variable with the grouped set of predictor variables (Tables 5-7). Age and gender were included as a baseline block for

the models irrespective of their significance. Other variables with a p-value of <0.25 for univariate regression (indicated as bold) were then used in the multiple regression models for each outcome.

Table 5. Univariate regression results for belonging, $p < 0.25$, bold indicates significant result, β represents standardised beta

Belonging

| Variable block | Variable* | R square | Adjusted R square | B (95% confidence intervals: lower bound, upper bound) | Std. Error | β | t | Sig. |
|---------------------------|---------------------------------------|----------|-------------------|--|------------|---------|--------|--------------|
| Demographic controls | Age (18-19) | 0.033 | 0.007 | 0.288 (-0.313, 0.890) | 0.304 | .130 | 0.950 | 0.344 |
| | | | | 0.222 (-0.351, 0.795) | 0.289 | .109 | 0.767 | 0.445 |
| | Age (20-21) | | | 0.611 (-0.037, 1.260) | 0.327 | .240 | 1.868 | 0.064 |
| | Age (22-23) | | | | | | | |
| | Gender | 0.006 | -0.004 | -0.186 (-0.671, 0.300) | 0.245 | -.075 | -0.759 | 0.450 |
| Protected characteristics | Ethnic group | 0.009 | 0.000 | 0.230 (-0.221, 0.682) | 0.228 | .095 | 1.011 | 0.314 |
| | English as first language or not | 0.006 | -0.002 | -0.226 (-0.751, 0.299) | 0.265 | -.080 | -0.852 | 0.396 |
| | Sexual orientation | 0.002 | -0.008 | -0.093 (-0.494, 0.307) | 0.202 | -.045 | -0.462 | 0.645 |
| | Disability/learning difficulty status | 0.004 | -0.006 | 0.138 (-0.298, 0.574) | 0.220 | .060 | 0.627 | 0.532 |
| Academic characteristics | Level of study | 0.004 | -0.005 | -0.155 (-0.633, 0.322) | 0.241 | -.061 | -0.645 | 0.520 |
| | International/UK student | 0.001 | -0.008 | 0.080 (-0.357, 0.516) | 0.220 | .034 | 0.362 | 0.718 |
| Socioeconomic status | Parent/guardian qualifications | 0.000 | -0.009 | -0.033 (-0.441, 0.375) | 0.206 | -.015 | -0.159 | 0.874 |
| | Subjective social status | 0.030 | 0.021 | 0.096 (-0.005, 0.198) | 0.051 | .173 | 1.883 | 0.062 |

* Those shown in bold have a p-value <0.025 to be eligible for inclusion in multiple linear regression. Age 24 and above, female, non-white, English as first language, non LGBTQ+, disabled, undergraduate, home students, and degree and above level parental education were reference groups.

Table 6. Univariate regression results for mental wellbeing, $p < 0.25$, bold indicates significant result, β represents standardised beta

Mental wellbeing

| Variable block | Variable | R square | Adjusted R square | B (95% confidence intervals: lower bound, upper bound) | Std. Error | β | t | Sig. |
|-------------------------------|---------------------------------------|----------|-------------------|--|------------|---------|--------|--------------|
| Demographic controls | | 0.041 | 0.016 | -1.612 (-3.874, 0.649) | 1.142 | -.192 | -1.412 | 0.161 |
| | Age (18-19) | | | | | | | |
| | Age (20-21) | | | -0.251 (-2.400, 1.898) | 1.085 | -.033 | -0.231 | 0.818 |
| | Age (22-23) | | | 0.455 (-1.962, 2.872) | 1.220 | .048 | 0.373 | 0.710 |
| | Gender | 0.004 | -0.006 | 0.570 (-1.179, 2.320) | 0.882 | .063 | 0.646 | 0.519 |
| Conceptual scale | Belonging | 0.116 | 0.109 | 1.293 (0.634, 1.951) | 0.332 | .341 | 3.889 | 0.000 |
| | Ethnic group | 0.014 | 0.006 | 1.089 (-0.586, 2.764) | 0.846 | .119 | 1.288 | 0.200 |
| | English as first language or not | 0.001 | -0.008 | -0.262 (-2.290, 1.766) | 1.024 | -.024 | -0.256 | 0.799 |
| | Sexual orientation | 0.003 | -0.006 | 0.445 (-1.061, 1.950) | 0.759 | .057 | 0.586 | 0.559 |
| Protected characteristics | Disability/learning difficulty status | 0.105 | 0.097 | 2.845 (1.286, 4.405) | 0.787 | .325 | 3.615 | 0.000 |
| Academic characteristics | Level of study | 0.038 | 0.030 | 1.884 (0.125, 3.642) | 0.888 | .195 | 2.122 | 0.036 |
| | International/UK student | 0.001 | -0.008 | -0.210 (-1.834, 1.413) | 0.820 | -.024 | -0.257 | 0.798 |
| Socioeconomic characteristics | Parent/guardian qualifications | 0.025 | 0.016 | -1.233 (-2.691, 0.225) | 0.736 | -.157 | -1.676 | 0.097 |
| | Subjective social status | 0.014 | 0.006 | 0.249 (-0.132, 0.630) | 0.193 | .119 | 1.293 | 0.199 |

* Those shown in bold have a p-value < 0.025 to be eligible for inclusion in multiple linear regression. Age 24 and above, female, non-white, English as first language, non LGBTQ+, disabled, undergraduate, home students, and degree and above level parental education were reference groups.

Table 7. Univariate regression results for help-seeking intentions for university sources, $p < 0.25$, bold indicates significant result, β represents standardised beta

University source help-seeking intentions

| Variable block | Variable | R square | Adjusted R square | B (95% confidence intervals: lower bound, upper bound) | Std. Error | β | t | Sig. |
|-------------------------------|---------------------------------------|----------|-------------------|--|------------|---------|--------|--------------|
| | | | | | | | | |
| Demographic controls | Age (18-19) | 0.013 | -0.013 | 0.382 (-0.245, 1.010) | 0.317 | .171 | 1.207 | 0.230 |
| | | | | 0.243 (-0.350, 0.837) | 0.299 | .120 | 0.813 | 0.418 |
| | Age (20-21) | | | 0.298 (-0.370, 0.966) | 0.337 | .118 | 0.885 | 0.378 |
| | Age (22-23) | | | | | | | |
| | Gender | 0.007 | -0.003 | -0.218 (-0.720, 0.284) | 0.253 | -.085 | -0.860 | 0.392 |
| Conceptual scale | Belonging | 0.053 | 0.045 | 0.230 (.047, .414) | 0.093 | .231 | 2.486 | 0.014 |
| Protected characteristics | | 0.008 | -0.001 | -0.210 (-0.660, 0.240) | 0.227 | -.088 | -0.925 | 0.357 |
| | Ethnic group | | | | | | | |
| | English as first language or not | 0.001 | -0.008 | -0.097 (-0.631, 0.437) | 0.270 | -.034 | -0.361 | 0.719 |
| | Sexual orientation | 0.016 | 0.007 | -0.259 (-0.656, 0.138) | 0.200 | -.128 | -1.294 | 0.199 |
| | Disability/learning difficulty status | 0.044 | 0.035 | -0.481 (-0.912, -0.049) | 0.218 | -.209 | -2.208 | 0.029 |
| Academic characteristics | | 0.003 | -0.006 | -0.148 (-0.625, 0.328) | 0.240 | -.059 | -0.618 | 0.538 |
| | Level of study | | | | | | | |
| | International/UK student | 0.000 | -0.009 | 0.041 (-0.398, 0.479) | 0.221 | .017 | 0.184 | 0.854 |
| Socioeconomic characteristics | Parent/guardian qualifications | 0.003 | -0.007 | 0.110 (-0.310, 0.530) | 0.212 | .050 | 0.518 | 0.606 |
| | Subjective social status | 0.007 | -0.001 | | 0.052 | -.086 | -0.916 | 0.361 |
| | | | | -0.048 (-0.150, 0.055) | | | | |

* Those shown in bold have a p-value < 0.025 to be eligible for inclusion in multiple linear regression. Age 24 and above, female, non-white, English as first language, non LGBTQ+, disabled, undergraduate, home students, and degree and above level parental education were reference groups.

4.7b. Multiple regression model results

The results for the final mental wellbeing model are shown in the table below (Table 8). The multiple regression models for belonging and help-seeking intentions for university sources had insignificant model fits (belonging: $F = 2.209$, Sig. = 0.059, $R^2 = 0.100$, help-seeking intentions for university sources: $F = 1.598$, Sig. = 0.139, $R^2 = 0.139$) so were excluded from the results (see Appendix Q).

Model 3 for mental wellbeing was selected for inclusion in the results because it had a significant R^2 change and the model fit was satisfactory. It included the predictor variables age, gender, belonging, disability/learning difficulty status, and ethnic group (see Appendix Q).

Models 4 to 6 either did not show significant changes or did not all meet the model assumptions, so are not reported in the results (see Appendix Q).

The model fit of the mental wellbeing model (Table 8) improved as variables were added to the model. At the start, age and gender explained 5.1% of the variabilities in mental wellbeing, followed by an increase of 10.3% in block 2 when belonging was included, indicating that belonging explained substantially more variability in mental wellbeing over and above what was explained by the demographic variables. Block 3 showed a further increase in adjusted R-square of 23.6%, when ethnic group and disability/learning difficulty status were added, which shows that these are important factors in influencing variabilities in mental wellbeing. Adding belonging, ethnic group, and disability/learning difficulty status improved the model's predictability of SWEMWBS scores.

Table 8. Multiple regression model results for mental wellbeing, $n=98$

| Model | Variable | Categorical variable categories | B (95% confidence intervals: lower bound, upper bound) | Std. Error | β | t | Sig. |
|--------------|---------------------------------------|---------------------------------|--|------------|---------|--------|--------|
| 1 | Constant | | 19.457 (16.763, 22.151) | 1.357 | | 14.343 | <.001 |
| | Age 18-19 | | -1.990 (-4.113, 0.133) | 1.069 | -.270 | -1.861 | 0.066 |
| | Age 20-21 | | -0.545 (-2.544, 1.455) | 1.007 | -.081 | -0.541 | 0.590 |
| | Age 22-23 | | 0.754 (-1.500, 3.008) | 1.135 | .091 | 0.664 | 0.508 |
| | Age 24+ | (Reference) | | | | | |
| | Gender | Male | 0.276 (-1.345, 1.896) | 0.816 | .034 | 0.338 | 0.736 |
| | | Female (Reference) | | | | | |
| 2 | Constant | | 19.614 (16.991, 22.237) | 1.321 | | 14.852 | <.001 |
| | Age 18-19 | | -2.208 (-4.280, -0.136) | 1.043 | -.300 | -2.116 | 0.037* |
| | Age 20-21 | | -0.669 (-2.616, 1.278) | 0.980 | -.099 | -0.683 | 0.496 |
| | Age 22-23 | | 0.160 (-2.081, 2.401) | 1.129 | .019 | 0.142 | 0.888 |
| | Age 24+ | (Reference) | | | | | |
| | Gender | Male | 0.368 (-1.210, 1.945) | 0.794 | .045 | 0.463 | 0.645 |
| | | Female (Reference) | | | | | |
| | Belonging | | 0.834 (0.177, 1.491) | 0.331 | .250 | 2.521 | 0.013* |
| 3 | Constant | | 13.275 (8.330, 18.220) | 2.489 | | 5.333 | <.001 |
| | Age 18-19 | | -2.285 (-4.206, -0.364) | 0.967 | -.311 | -2.364 | 0.020* |
| | Age 20-21 | | -0.712 (-2.528, 1.103) | 0.914 | -.106 | -0.779 | 0.438 |
| | Age 22-23 | | 0.120 (-1.993, 2.232) | 1.063 | .014 | 0.113 | 0.911 |
| | Age 24+ | (Reference) | | | | | |
| | Gender | Male | 0.570 (-0.905, 2.044) | 0.742 | .070 | 0.768 | 0.445 |
| | | Female (Reference) | | | | | |
| | Belonging | | 0.770 (0.161, 1.380) | 0.307 | .231 | 2.511 | 0.014* |
| | Disability/learning difficulty status | No | 3.121 (1.648, 4.593) | 0.741 | .383 | 4.210 | <.001* |
| | | Yes (Reference) | | | | | |
| Ethnic group | White | 0.295 (-1.259, 1.850) | 0.782 | .035 | 0.377 | 0.707 | |
| | Non-white (Reference) | | | | | | |

Note: $R^2 = 0.051$ for Step 1, $R^2 = 0.103$ and $\Delta R^2 = 0.059$ for Step 2 ($p < .05$), $R^2 = 0.236$ and $\Delta R^2 = 0.142$ for Step 3 ($p < .05$). * $p < 0.05$.

Each model showed statistical significance in ANOVA indicating that all 3 models had some influence in predicting SWEMWBS scores.

The model 3 (final model) reflects that mental wellbeing varied significantly by gender, belonging, disability. It shows that younger students have significantly lower mental wellbeing (by -2.3 units) compared to those aged 24 years and above.

The variables for disability/learning difficulty and ethnic group were categorical variable with the categories: 'Yes I have a disability/learning difficulty' and 'No I do not have a disability/learning difficulty,'; 'White' and 'Non-white', respectively. The coefficient (3.121) for the disability/learning difficulty variable suggests that students without a disability/learning difficulty have SWEMWBS scores that are higher by 3.121 units than those with a disability/learning difficulty. This difference is statistically significant ($p < 0.001$) suggesting that students without a disability/learning difficulty have higher SWEMWBS scores on average. A post-hoc power calculation showed this result to have 95% power (effect size = 0.425, $n = 98$) (Table 9, p. 59).

For the ethnic group variable, the coefficient (0.295) implies that the 'White' category had SWEMWBS scores that are 0.295 units higher than the 'Non-white' category. However, this difference was not statistically significant ($p > 0.05$) which could be due to a small sample or that ethnic group does not significantly predict SWEMWBS scores when controlling the other variables.

Belonging remains significantly associated in all models 1, 2, and 3, which means when adjusting for other variables it still has a significant effect on mental wellbeing. The coefficient of 0.770 for model 3 implies that for a one unit increase in the belonging scale, there is an increase of 0.770 units in SWEMWBS scores. The association of the belonging variable is statistically significant ($p < 0.05$) suggesting that higher levels of belongingness are associated with higher SWEMWBS scores. In a post-hoc power calculation, this effect calculation retained 72% power (effect size = 0.253, $n = 98$) (Table 9, p.59).

Overall, the model shows that belonging and having a disability significantly impact SWEMWBS scores, while gender and ethnic group do not have a significant impact on the SWEMWBS scores when controlling for the other variables.

Post-hoc power calculation

The post-hoc power calculation was done using estimated effect size for association between mental wellbeing and belonging, as well as for mental wellbeing and disability, as these variables showed significant associations in the mental wellbeing model (Table 8). The power calculation for estimating effects of belonging (effect size = 0.253) and disability (effect size = 0.425) on the mental wellbeing outcome based on the multiple regression ($n = 98$) satisfy 72%, and 95% power, respectively (Table 9).

Table 9. Power calculation results

| Power (%) | Mental wellbeing and belonging Sample size (n) | Mental wellbeing and disability Sample size (n) |
|-----------|---|--|
| 60 | 74 | 24 |
| 70 | 92 | 30 |
| 71 | 94 | 31 |
| 72 | 97 | 31 |
| 73 | 99 | 32 |
| 74 | 101 | 33 |
| 75 | 103 | 34 |
| 76 | 106 | 34 |
| 77 | 108 | 35 |
| 78 | 111 | 36 |
| 79 | 114 | 37 |
| 80 | 117 | 38 |
| 85 | 133 | 43 |
| 90 | 156 | 50 |
| 95 | 192 | 61 |

5. Qualitative Results

Twelve interviews were conducted, 9 with current or recently graduated Durham students, and 3 with members of university staff involved in college student support. The small sample size enabled the interviews to be detailed and in-depth, though this also means the qualitative findings should not be read as representative of the wider Durham University population.

Of the student participants, 6 were female and 3 were male. There were 5 international students and 4 students from the British Isles. Of the staff, 2 were male and 1 was female. All participants lived in Durham City during university terms. Interviews were coded thematically, and the key themes are identified and discussed below.

In the survey, 22 participants left comments in the open text box at the end. These comments were included in the qualitative analysis and are used to illustrate points in this chapter where relevant.

A range of themes came up in relation to the concepts of belonging, mental wellbeing, and help-seeking. Some themes related solely to one of the concepts, while others had links to more than one. Core to all three were academic work and friendships. Both belonging and mental wellbeing were linked to accommodation. Common to both belonging and help-seeking were colleges and confidence (see Figure 13).

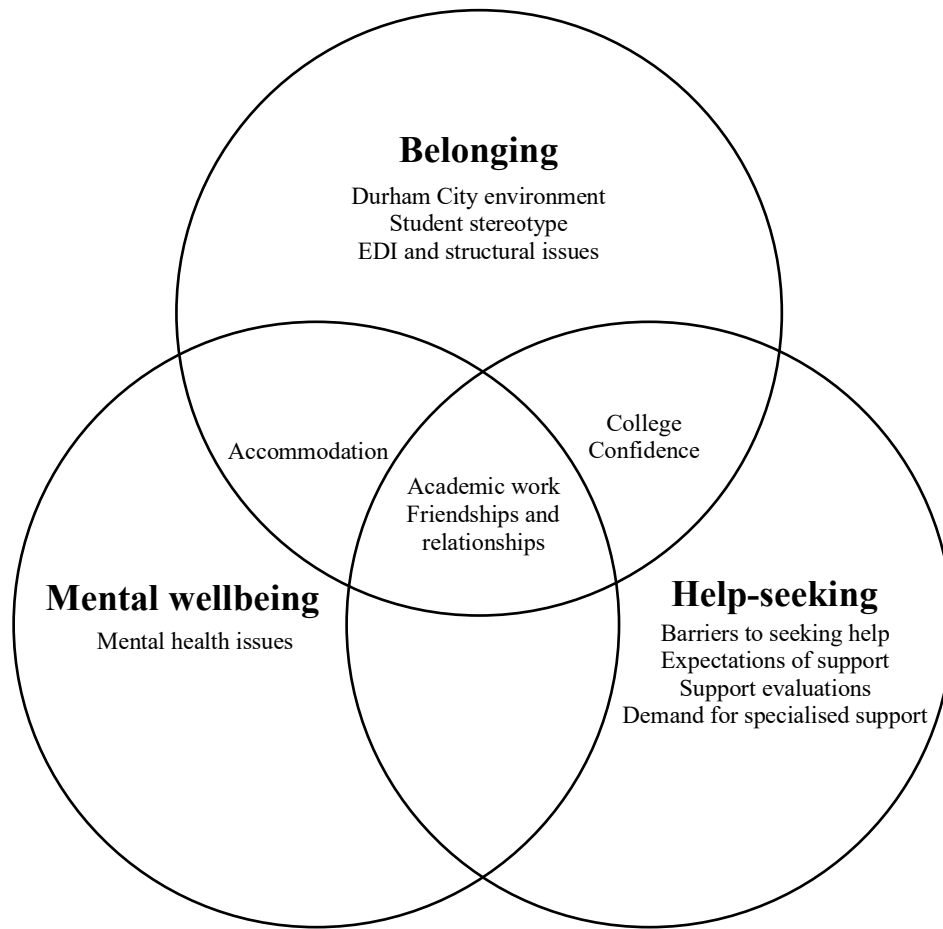


Figure 13. Venn diagram of thematic and conceptual relationships

Perceptions and settling in

Prior to coming to the university, students described having preconceptions that it was posh, prestigious, and had issues with equality, diversity, and inclusion (EDI). A staff member echoed these sentiments. While the academic potential was recognised, the social environment was less idealised:

‘quite posh.’ – Student

‘snobby, a bit racist’ – Student

‘quite prestigious’ – Student

‘there were the group chats where these guys made disgusting remarks about girls, so that kind of like influenced my view of Durham’ – Student

‘I think a lot of it would be the perception about the place and some of that social media stuff as well and that traffic. If you just looked at all that, you’d think, gosh, this is a horrendous place, which has all these sort of terrible, awful problems’ – Staff

These preconceptions recurred throughout the interviews.

Despite these negative views, perceptions of the university's physical environment were significantly more complimentary and seemed to suggest links to belonging. Words such as '*small*', '*peaceful*', '*safe*', and '*scenic*' came up. The small size of the city was described as making it seem '*a bit more homely feeling*', with an international student explaining that '*it was easy to make Durham my home.*' The appeal of the Durham City environment was noted by some participants prior to attending the university and, as the latter two comments suggest, influenced their decision to choose the university. One student participant mentioned that '*the only reason I went to Durham University is because I liked the river*' and another said, '*I liked the idea of being kind of on my campus.*'

Once at university, the college experience seemed to provide fruitful opportunities for cultivating a sense of belonging. In principle, the college provides a more supportive environment and sense of collective identity than the larger university, something that non-collegiate universities may not be able to replicate. A staff member described colleges as '*a very, very good way of feeling more integrated within a community, [...] that, you know, students are far less isolated because they've got student support within a smaller context, they've got a JCR [Junior Common Room: a space for undergraduates within a college] as well, which they can be involved with it, or not be involved with it as well, you know.*' In furthering the association between colleges and belonging, a college Vice Principal explicitly equated the two, stating that being a collegiate university means '*we are kind of selling this sense of belonging [...] selling this wider student experience.*' An international student described excitement about the '*many colleges, to like take care of students.*'

Rites and rituals of community

Efforts to promote belonging through college life could be seen in the multitude of community traditions and rituals offered to students. Such rituals were discussed in most interviews, with the mention of formal dinners, matriculation, societies, the JCR, fresher's week, and the fresher's fair. Though intended to foster positive experiences, thoughts on these rituals and traditions varied, with some instilling a sense of belonging while others increased feelings of exclusion. For example, one international student described enjoying matriculation (enrolling at the university in a grand cathedral ceremony) as it gave her a sense that '*Oh, I really come here and like, I'm really gonna live here and yeah, I feel belonging at that moment.*' Yet the same student felt isolated at a formal dinner where other international students had already made friends and would converse in a different language. She would feel similarly excluded at a dinner with European friends, stating '*there's kind of like a barrier to talk to them*', and citing her discomfort with reaching out because it feels '*so awkward for me, to do that. But like the Europeans kind of like, they really know how to do things, how to talk, yeah.*'

Another student claimed that the unique rituals of Durham, '*the traditional Durham experience, like the Bailey College experience pretty much, [...] the gowned formals and stuff like that*', was a factor in influencing her to apply to Durham University and she was disappointed when not allocated to one

of the older, more traditional colleges. She also stated *that 'I think the uni didn't help me find my people, I think it was just myself like, I don't know, like for example, like JCR events: I don't feel at home, I don't take part'*, suggesting she was not interested in the community activities offered by her college. In her case, the potential for belonging to her college through community rituals was not achieved. However, the same student felt a sense of community as a member of the People of Colour Association and the LGBTQ+ society and she expressed a desire to join the 97% club (a society for state school students).

Involvement with the JCR community was described as *'not my thing'* by one undergraduate, who also believed that involvement in the JCR was a factor in increasing feeling *'at home with Durham.'* This comment suggests that being part of the JCR and highly involved with college life can instil belonging, whereas being separate from it can have the opposite effect. It seems evident that being in a college an individual dislikes, or does not feel strongly about, can have a negative impact on their university experience, because as one staff member strikingly put it, *'You're marked for life really, whether you like or not. You'll always belong to your college. Yeah, whether you want to belong to it or not, you still get contacted as an alumnus, etc. as well.'* One student exemplified this negativity by holding disdain for her current college due to it not being her desired college. Another did so when reflecting on seeing others in her college be very involved in college life *'because it's been a positive experience for them'* and claiming *'I just think it hasn't necessarily worked out for me.'*

A staff member recognised the importance of the long-held college traditions and community rituals, but was aware that some of them can be *'fairly alienating'*, and offered a perspective considerate of this: *'It's about thinking about well what bits of the traditions of the university are helpful and nice, and yeah, "Do what you want to do", and which bits, you know, belong to the past, want to get rid of them? It's a tightrope because you don't want to throw the baby out with the bathwater, you don't want to make every college exactly the same. What would be the point of that? You might as well just have halls of residence and be done with it.'*

Two male undergraduate respondents had more positive belonging experiences through college. One discussed that playing football with his friends for their college football team increased his sense of belonging, and another described how speeches from his college principal made him feel as though he was part of the college and university communities and that he *'could fall back on'* them if needed.

While part of the colleges' role is to serve as a home from home, with rituals and events used to help students make friends and integrate in the community, colleges also provide pastoral support. Those involved in college support seemed to have good intentions, though these intentions were not always successfully executed. One staff member discussed their role in college student support, and how they offered support during mental health treatment, by keeping in touch with students as they go through counselling, wait for treatment, or try medication. This support may be able to assist when students

finish their 6 counselling sessions or do not get on with a counsellor, but it depends on whether the student's college is aware, and if the student discloses their struggles to college.

There was mention of how college support was accessible and offered through a variety of streams. For instance, a college staff member discussed how their college made an effort to put postcards in freshers' welcome bags to signpost them to student support, and another explained how they give welfare talks to new students to encourage them to reach out if they need help.

College support was discussed as unhelpful by a couple of students. For instance, an undergraduate student recounted a negative experience where seeking help from college staff made her *'not feel at home at uni.'* She recounted going to a member of college staff for support after experiencing sexual assault, and that the response she got was judgemental and uncaring. As a result, she recommended going *'to the specialized Durham uni counsellors or mental health support'* rather than college support as she did not think they were *'qualified enough'* and *'won't know exactly what to say'* which could have a detrimental effect on the sufferer. She also emphasised that her college claimed to be inclusive and welcoming of everyone, yet her situation was not handled appropriately.

In the college system, but not in college

While undergraduates are routinely allocated to live in colleges in their first year, those in later years often live outside colleges. The living situation and form of accommodation outside the college was seen to have an impact on students' senses of belonging. This was particularly negative for three international postgraduate students:

- (1) *'It's extremely hard to find accommodation [...] But I remember it took me nearly one month to find, very hard to find, because, you know, Durham, so many students, and housing is not enough and I don't want to live in the college because it's quite expensive and also I have a family and my college [...] catering is expensive. And I also know [that for] many other people this year, it's very hard for them to find accommodation.'*
- (2) *'I have been placed in student housing that is external to my college (it is actually the family housing for a different college since my college ran out of housing for its international postgrads twice) [...] This housing has resulted in one of the loneliest years I have experienced, and that includes the 2020-2021 school year where I was essentially quarantined in a single flat of student housing because of the pandemic. I feel profoundly socially isolated and almost completely unsupported. In this sense, the college system has completely failed me, by placing me in housing that is a 30-40 minute journey away from the college itself. I rarely attend college events as a result'*
- (3) *'Like I live in [accommodation name] but I don't know anyone in my accommodation, because we live in studios so we don't have to go to like the shared kitchen and I don't have to meet anybody here. But in the first semester, I don't know anybody in my accommodation, so I*

barely join my college activities. But like in second semester I got to know some people more because, like, we walk past each other in the main building or something like that so I know, like a couple of people more like 3 or 4. [...] At first I'm really excited to be in my college because it's a college I really want to live in, it's my first choice, but I think because of the room type, I haven't met with anybody else, and they also have, like the shared kitchen, you know, in others, but mine is a studio room. So because of this I don't go anywhere. I don't talk to anybody. I don't make friends in my college. So I don't attend the activities that college provide as well. [...] Because when I choose accommodation, they told me there is only studio room left. Living in studio is convenient, yeah. But it also doesn't push me to meet anybody. I can live in my room for like 4 days straight... without seeing anybody. I kind of envy people who have flat mates, they will bump into each other in the kitchen and it's kind of natural you know like, "I have to use the kitchen, you as well? Oh hi." I mean we'd be forced to meet. So, eventually we'd become friends, something like that, yeah.'

Each of these students' experiences communicates a sense of deflation and disappointment as opportunities for integration and belonging failed to materialise. The second participant seldom visited their college *'as a result'*. The third, who had mentioned feeling unease at formal dinners, proposed the idea of having *'casual dinners [...] in the first month'* of moving into the accommodation to facilitate getting to know others in the same block.

Some undergraduates expressed their own difficulties with living situations, with tensions among housemates impacting their sense of belonging and mental wellbeing. On the other hand, where participants discussed living with friends and people they liked, they described a stronger sense of belonging and fulfilment.

Academic life: fulfilment and stress

Departments and academic work also play a large role in the life of a Durham University student and can impact student wellbeing. For example, a survey respondent who described feeling very alone due to living in housing outside their college, found a sense of belonging through their course: *'When I am attending my course [...] I feel intense belonging. We are all united by a common specific interest and also by the course material.'* This academic belonging was particularly important when considering that the participant did not experience social belonging due to their living situation.

Less desirable associations with academia came from interviews where university work was discussed as being a stressor with the potential to impact mental wellbeing, especially for postgraduate students. Two PhD students discuss the tolls it can take:

- (1) *'But at that moment, like in March, because I have, like 5 essays, like 3 essays, one presentation, one infographic so like 5 assessments I have to complete in 2 weeks in March,*

so it's kind of like fatigue for me, like in the first and second assessment, okay, still alive, but in the third or fourth it's kind of like oh, I can't handle this anymore. It's like 2 weeks straight that I have to plan and like do all the work. So I think by the third or the fourth assessment, I kind of broke down. Like I cannot work anymore. I want to rest, but I feel guilty to rest because of the deadline....

When we have exam season all of my friends will lock themselves in their rooms. Yeah, we will not meet for like a week or until the deadline is over. Yeah, they are stressful as well. Like, my friend is so stressed, so we have a phone call during that time. And then they go back to work again. So it's kind of like a loop: we work, we get exhausted, we call a friend, we work again until it ends.'

- (2) *'But sometimes you face some revisions in your research, and maybe your supervisor or your reviewer, they will give you some comments and tell you things you need to spend a lot of energy to raise a lot of things and to be very productive during specific times. At that time, I think it's quite stressful and sometimes may raise some mental health issues. Just 2 weeks ago, I got a I think, inflammation with my stomach. I just went into hospital, and the doctor say you may [...] take some medicine but when I come back home it was still painful and so I call 111 again and they ask me to go to hospital again and check with me. When I tell them how I feel now, very painful, the doctor finally says, I think your pain has come from your mind, and because you're stressed, [...]. And the doctor asked me what you're doing. I say, I'm a PhD student, and he say, well, it's very reasonable why. [...] I didn't realize these things will bring some physical problem as well, so after that I'm just very careful not getting too much on my mind and be relaxed when I face something so I don't get angry.'*

These experiences signal considerable stress caused by academic pressure. A postgraduate survey respondent emphasised this and commented that *'there is little support for postgraduate mental health.'*

Some undergraduate participants by contrast experienced less academic stress than they expected, with one being surprised at how the academic work was not as intense as she had anticipated: *'I was expecting it to be a lot more demanding but what I found out in the past 2 years, I think, at least for me, it's been that it's up to me how much time I want to give into the academics, how much time I want to give to my friends, how much time I want to give to societies [...] And just mostly whatever I decide works out.'*

Imposter syndrome was mentioned by a couple of student participants and one member of staff, suggesting a perceived pressure to excel academically that could heighten stress. A staff member pointed out that Durham students, *'because they are high flyers, most of them'* find academic failure difficult to deal with when they get to university, which he believes is *'important to recognise within*

mental health.’ However, another student indirectly referenced how they did not experience imposter syndrome because of their course subject: *‘anthropology specifically, it’s not like, I don’t think anyone had really studied it before uni, so in that respect everyone was on the same footing.’*

Some aspects of academia were useful in stressful times and provided wider networks of support beyond specific university mental health services like counselling or college support. Academic extensions were useful to those who used them when experiencing pressure or mental health struggles, with one PhD student participant describing how she is *‘really thankful’* that extensions are allowed as it provided her with *‘time to breathe’*, during a particularly intense period of study. A member of staff involved in college student support discussed how the university *‘really does bend over backwards to help people to complete degrees, you know there’s very strict rules for everything, and the concession system allows you to break all of them as well so that’s the main thing’*, showing that the university acknowledges the need for academic lenience.

Academic supervisors were also described as providing support for student wellbeing. Two PhD student participants mentioned positive and encouraging relationships with their supervisors which were beneficial to their mental wellbeing during times of stress. One described her supervisor as *‘the one who, like, advises me not just [on] academic things, but also my well-being as well. So I feel really supported from her.’*

However, some students felt unsure of how much to disclose to their supervisors: *‘Sometimes I don’t want to share too many personal things with [my] supervisor.’* Similarly, another student participant disclosed that she *‘did not know where the boundary lay’* when discussing mental health issues with supervisors and college support *‘because they’re not counsellors.’* Despite this, the same participant said she found going to her supervisors more helpful than going to college support.

Others, by contrast, found departmental staff lacked understanding of mental wellbeing, suggesting unevenness in the way different staff members handle mental health issues.

The Durham stereotype

On top of academic difficulties, most interviews depicted there being truth to preconceptions about the university’s issues with EDI which could impact belonging. A Durham student stereotype was identified and descriptions of it were synonymous with ideas of poshness and privilege. While a few respondents felt there was no stereotype, other students and staff did, and descriptions of this stereotype were largely consistent with each other.

The stereotype was described by a member of staff as *‘middle class, white students that come from privately educated backgrounds.’* Students echoed this, with some adding *‘Southern’* and *‘posh’* to the description. Additionally, the stereotype was often referred to as being a male, specifically *‘a white male who went to private school’*, *‘a posh boy who is quite stuck and sheltered in their bubble and not*

willing to expand.’ The Durham university environment was described as having ‘*a very different culture*’, with the student stereotype sometimes labelled as an ‘*Oxbridge reject*,’ indicating that students who could not get into Oxford or Cambridge often go to Durham instead.

The student stereotype can lead to a lack of belonging, equality, and inclusion for students who do not fit the criteria, such as those who come from a lower-income background. Financial pressures left one student feeling ‘*ostracised*’ for having less money than many of her peers and having to work ‘*all the time to keep up with the amount of nights out or the amount of like dinners out.*’ She was also surprised at the ‘*amount of people that I’ve seen who literally just go on ski trips like in the middle of term.*’

A student with a working-class background described that ‘*Even the working-class students I’ve met all seem to be more privileged than me and my friends back home.*’ A ‘*local student class divide*’ was mentioned by a student, and there were a couple of references detailing how students at the university would be judgemental based on which school students had gone to, which made one student feel ‘*uncomfortable.*’

Another student described a friend’s experience, where she told some peers that she had never been abroad, to which one of them replied ‘*We get it, you’re poor.*’ This student also described going on a Sutton Trust Summer School in Durham (a charity residential where prospective students spend some time living in a university – aimed at increasing university participation of students from socially disadvantaged backgrounds) (The Sutton Trust, 2019) prior to coming to Durham. She thoroughly enjoyed it but felt ‘*maybe it made the point in itself that, like, we would be in a minority.*’ When applying for a bursary, the small number of student applications in comparison to the number of students in the college, made this student reflect on how most of the college had higher family incomes than she did: ‘*it was almost like I was being told that I had less money than I thought I did.*’ The same student had gone to a state school and described an experience of feeling different at her college fresher’s fair, where she felt she did not have the ‘*right sporting background*’ compared to students who went to private schools. A student who attended a private school provided a comment which supports this view: ‘*The guys I hung out with were all good sports players.*’

A lack of diversity among the student population and the prominence of the stereotype similarly affected feelings of inclusion and belonging among students with other characteristics. A gay student disclosed that ‘*Sometimes as someone who is gay, it feels like there aren’t many other gay people at this uni, which can sometimes feel a bit isolating.*’ Another described how people of colour, as well as working-class students, had bad experiences at the university.

Another key characteristic of the Durham student stereotype that could further isolate students was ‘*confidence.*’ High confidence was attributed to the stereotypical Durham student, and the university was seen as suited to extroverts. For instance, some students saw Durham University as ‘*quite an*

outgoing uni’ and that *‘a lot of Durham’s culture is more suited towards extroverts’*, though one student reflected that this may be *‘just true of uni’* in general.

A member of staff discussed how the confident and outgoing nature of the ‘typical’ student might affect classroom dynamics. A student making comments in seminars would often be *‘a tall Hatfield lad at the back [...] whereas somebody who’s probably actually done a lot more reading and whatever might not be as confident so might not put themselves forward.’* Hatfield College is stereotypically known amongst Durham students and evidently some staff too for taking on a large proportion of privately educated and highly privileged students. A student who went to a private school raised the topic spontaneously and corroborated the idea that private schools bred confidence: *‘Coming from the school I came from, like we’re all very confident boys.’* This confidence appears to have an impact on how active a student is in ‘putting themselves out there’, which could impact their belonging and help-seeking.

Another participant spoke about how she thought the university *‘needs to make more of an effort to like reach out more to like students in terms of like publicising specialised support, because honestly like it’s scary to put yourself forward for counselling, or stuff like that, and, the fact that like you have to put yourself forward for societies first to actually know about these things is quite like bad, and I don’t think the university is very inclusive in that way.’* She was referring to societies that offered specialised welfare for different groups of students, such as the LGBTQ+ society, or the People of Colour Association, which each have a welfare team. She goes on to describe how state school students often have less confidence than private school students making them less likely to put themselves forward for societies and she thinks the university should publish support information in a way that is accessible for all students, regardless of their school background. This suggests that confidence could impact help-seeking behaviours.

On the other hand, there were some positive comments regarding diversity and inclusion. A male undergraduate student from a working-class background described Durham University as *‘one of the most inclusive places I’ve been’*, and another said there is *‘a mix [of people] from different backgrounds and everything, and different socioeconomic backgrounds.’* For context, the former undergraduate was a white male from a Northern town and described how the people at the university were different to where he had been before, implying a difference in culture between his Northern background and the background of Durham students. He acknowledged that Durham is *‘a posh university’* but felt that *‘the majority of people were very welcoming, regardless of their background.’* The latter student was a white male who attended a private school and described how he had not met that many students at Durham who had been to private school. He said that most of his university friends were *‘public school boys’*. He acknowledged that who you are exposed to in terms of diversity might depend on *‘what you’re doing and societies and stuff.’*

Moving between worlds: international students' experiences

Being an international student came with comparable challenges. Several international students discussed instances of finding it hard to integrate into and be included in the wider student body, which impacted their sense of belonging. One instance of this involved a Thai student finding it hard to make European friends because, as they put it, there is a '*big difference*' culturally. The student wished '*it could be more integrated*' and discussed how they had enjoyed having more European friends when studying previously in a university in Southern England. Also mentioned was a lack of support specifically for international students, and some instances of xenophobia and racism based on student's nationalities and accents.

Another student felt '*a little left out, a little homesick*' when living with English housemates, and recounted a long walk they went on where her housemates sang British primary school songs 'for the entire thing.' She found the international community at Durham University small compared to '*LSE [London School of Economics] or any London universities,*' and described that being around other international students was comforting and '*an easy bond to latch onto when you're meeting a whole bunch of new people.*' Another international student reflected that being around other international students in her accommodation helped her feel more at ease and at home: '*I did have a couple, I guess like postgraduate students as well, who are also from where I'm from, and they sort of just adopted me I guess in a way and it felt like I had a family there.*' These examples highlight a divide between international and home students, where international students can find it hard to integrate and often stick together.

Induction and settling in was a period where some international students struggled, with one student experiencing a lack of help from the university regarding his accommodation and administration. Another student, who arrived during the COVID-19 pandemic, felt the university neglected the care of international students. Regarding an incident where her kitchen was in a terrible state upon moving into her accommodation, she said: '*I was tired from travelling, travelling during that time [during the pandemic] was very, very difficult. But it was just horrible. I guess they didn't really give us any sympathy for the fact that we are locked in for two weeks, and the fact that we were travelling and the fact that we don't have any connections here, yeah, I think that's something the university has to work on.*'

The difficulties faced by international students were described as '*quite different*' to those faced by home students, with another describing '*a cultural barrier*' which makes it hard to share things with GPs and counsellors in the UK. A need for '*more trained people specifically for international students*' was suggested. A member of staff described an increase in diversity among staff: '*we've got a lot more staff from around the world than we used to have perhaps 20 years ago, as well, which is good,*' though this was not described as being support staff specifically.

A staff member discussed how, when providing student support, some communities are harder to reach than others, but that this is not necessarily a bad thing: *'Some overseas student communities, for instance the Chinese community, often just supports itself, doesn't want to be particularly involved with lots of other things.'* In the absence of specialised support, however, it is hard to see what option the Chinese community has but to support itself.

Relationships with and within the university

Not only was there descriptions of a lack of diversity and inclusion among the student body, but several students expressed distaste with the way they thought the university treats students. In free text comments on the survey one student wrote, *'The university treats you like a number and not a student'* and *'This university truly does not care. Expect less than nothing from the uni.'* Another described how *'Durham University makes very little effort to make you feel welcome and support you.'* The fact that the survey was anonymous may have emboldened people to air negative views more frankly. Moreover, a student interviewee describes how the university's expansion seems like *'for them it's a money thing, which doesn't make me feel supported, [...] just makes me feel like I'm a cog in the machine.'* The imagery used by this interviewee connote a lack of trust in the system and imply that these students do not feel cared for by the university.

In contrast to issues surrounding EDI, friends and positive relationships with people at the university were highly regarded and often provided a sense of belonging and mental health support. Where such positive relationships were lacking, belonging, mental wellbeing, and mental health support often were too. Positive feelings regarding friendship are illustrated through the different student quotes below:

'I don't really feel much supported by the system but I feel supported by people. Yeah, like my friends that I found here.' – Student

'we'd often cope with stress and stuff by either hanging out with friends, chilling with them talking about problems I guess that helped, but it just felt like we had more of a community we could lean back on.' – Student

'like I feel at home, like knowing that I found my people.' – Student

A member of staff noted the importance and power of people and their personal experiences within the university: *'The best sort of advert for the place is the students who come out the other end and say, you know "This was my experience," so I think, you know, the university needs to listen to the students and student experience as well. Hopefully it's getting better at that. Hopefully/thankfully the SU [Students' Union] are getting better at that too.'*

Another member of staff discussed his role in student support, saying that *'I love it, I mean because I've already retired 12 years ago, I don't actually need to work. So I do it for the love of it really. And*

I love working with students and trying to help them in any way that I can.’ His strong passion for his job highlights the positive impact that social relationships can have in finding purpose and fulfilment. These sentiments were echoed by another staff member who said *‘the reality is [...] none of us really do this for the money’* a powerful phrase that demonstrates a passion for working with students.

While a love for people and friends was a strong factor in enhancing the experiences of some students and staff, others described the difficulty of being in the opposite situation – lonely and without many people to support them around them. These quotes from different students illustrate this:

‘I don’t have many friends so I just kinda sit there.’ – Student

‘It’s difficult to seek help especially when you don’t have any family members that can support you, instead of making fun of you, and having no friends at all.’ – Student

‘The only way to ‘belong’ is if you manage to find other students who will look out for you, which isn’t easy to do.’ – Student

‘Where I don’t belong, [...] I just lived with people that I didn’t really get along with very well.’ – Student

Mental wellbeing and support experiences

University life can bring about challenges as well as positive experiences. Some of these challenges had an impact on mental wellbeing. One student described that it was *‘the journey of finding my people rather than the actual uni itself that impacted my mental health badly,’* suggesting their mental difficulties were to do with finding valuable friends, a universal task when joining university. Another discussed how *‘I’ve kind of struggled with my mental wellbeing a bit before uni, so it’s not like it [university] caused a complete new problem, but I do think it found new ways for my mental wellbeing to be affected if that makes sense? As well as continue ones that existed when I’d been at home.’* This comment came from a participant who felt they did not fit the Durham student stereotype.

Other students with mental health difficulties, such as clinical and seasonal depression, also reflected that they might have experienced these problems even if they weren’t at university. For instance, one student said, *‘I don’t know how much uni affected me [...] Having depression, I think that’s just something I was going through.’* Another stated of her mental health issues *‘I wouldn’t attribute that to the university, I would just say that’s something that’s on the side on its own.’*

Barriers to help-seeking included stigma, motivation, and accessibility of support. Stigma in society was acknowledged as an issue: *‘It is still not normalized enough to ask for help’*, with a member of staff discussing how *‘Sometimes students will feel like saying “I need some help” is some sort of sign of weakness.’* Several student experiences – mostly international student experiences – support this

idea and suggest stigma may prevent them from seeking help for their mental wellbeing, with one survey respondent attributing his reluctance to reach out as related to cultural reasons, such as '*ideas of masculinity*' and '*other aspects of habitus*.' Another student felt '*backed up*' (i.e., validated) after receiving a diagnosis of depression, otherwise she would have felt she '*had to prove myself in some way*.' An international student with a scholarship from her country disclosed being '*scared*' that if the university knew about their depression, '*they might not accept me as the achiever of the scholarship*.'

This reluctance to reach out for fear of judgement was seen first-hand by a member of staff involved in student support: '*there is still stigma about declaring things. You get people who are stigmatized about declaring things and the problem is that they sort of soldier on, so they get through the first 2 weeks, and then they have an episode about something and you deal with it yeah and go, "Gosh what's going on here", and then, as you pick down through it, you find out that they have a history which goes back quite a long way (laughter) and you just think, "If we'd known about this we could have done X, Y, and Z."*'

Some students described lacking the motivation to reach out and one stated that during a mental breakdown, she didn't '*want to talk to anybody, even my friends, I don't want to make them feel negative*', suggesting she worried her friends would be burdened and she doesn't have '*the motivation to reach out*.' An international PhD student detailed that he did not have '*very strong [...] motivation to use the services*' because he did not think that the advice provided to him would be useful and he did not '*trust enough*.' Another student described difficulty finding the motivation to reach out, because of there being '*a long wait and a lot of hoops to jump through to get mental health support set up*' both within and outside of the university.

On the other hand, one student felt it was less of a barrier to access university support than to speak to their parents about their mental wellbeing: '*Despite really struggling with my mental wellbeing before I came to Durham, I only started seeing someone and seeking professional help when I came to Durham, and I think it was because I didn't have to necessarily tell my parents and it didn't have to be a big, I don't know if it would be but, there definitely wouldn't have been a big family intervention, it was just something that I signed up for*.' This comment attests to fear of stigma or judgement from family as well as from professionals.

In terms of how university mental health and wellbeing support fulfilled expectations, there was a variety of responses. Some students labelled it '*inadequate*' and '*not good enough*' compared with other universities.

On the other hand, one student felt the support was '*what you'd expect from a university support system*.' An international student was similarly '*personally satisfied but that's partly [...] as I mentioned I wasn't expecting that stuff from a university*.' She did feel however that student support

was important in the UK where it is *'much more common to move away from home'* than in her country, since students might be leaving behind support as they move to a new place.

A staff member echoed the importance of providing support and felt that *'selling'* the experiences of college and belonging means the university should sufficiently support students, as well as out of moral obligation. However, she did note that students from private schools may have to adjust their expectations of university support because *'obviously the level of support that we can provide is never going to be able to match what a private secondary school offers.'*

Another staff member agreed that students should set expectations for what to expect from the university support and that it could not be a replacement for external therapy: *'it's about setting expectations, because the expectation is: look, the university is here as a place of learning, you are an adult in the place of learning, There are lots of things we can do to support you in your learning, But we're not here to be your therapist, we're not here to be your doctor, we're not here to be your psychiatrist. But we will work with those things to get you through things as well.'*

He also felt that recent developments in the way mental health is discussed mean there has been an increase in *'medicalisation'* or *'labelisation'* of certain things. He gave the example that someone who used to be shy may now say they have *'social anxiety.'* He says that not all these conditions can be expected to be catered for if the university does not get an official doctor's diagnosis.

Mental health support at the university was useful and beneficial for some, but not for others. A variety of support options were evaluated in the interviews and survey comments, and several points of improvement were put forward.

The counselling service received both criticism and praise, with one student interviewee describing it as *'very, very slow, weren't very helpful'*, and another finding it to be *'quite an easy system'* when they used it and *'trusted that the professionals I'd be speaking to would help.'* Counselling was accessible for some students, where one student *'was very surprised the first time self-referred how quickly I got an appointment,'* in comparison to going to the doctor, and found the option to do it yourself appealing since it could be kept discreet. However, for others, it was less simple. A student reached out to the counselling service but was told they were *'very, very busy at the time'* and the student was not assigned a counsellor until after they had sought out private counselling. Another student described how they did not get their call answered by the Wellbeing team which meant they did not make an appointment to be seen.

The counselling service only offers *'6 sessions per academic year,'* which a staff participant said is *'just a random number really. There's no evidence that people will necessarily get better in 6 sessions.'* A student discussed being dropped from the counselling service after 6 sessions, having been told in the last session that the counsellor thought they had depression and could try medication.

They discussed not having had *'any contact from the university since'*, and how a lack of follow-up from the service to someone in a *'vulnerable mental state'* can be quite dangerous.

The efficiency of counselling for one student depended on how well they got on with the counsellor. She described how you were assigned a counsellor and you would not know their therapeutic approach or what they were like. According to another student, student welfare offered more versatility in terms of allowing students to choose who they spoke to by going off a photo and a description, which made it easier for the student to *'feel comfortable.'*

Student-led welfare was regarded as attempting to do the most it could to support students and was described as quite helpful and accessible for those who used it. However, a student who was involved with providing college welfare support thought that student-run welfare would not be appropriate *'if someone was experiencing a serious mental crisis.'* A staff member reiterated this and described that the support provided is not enough for severe circumstances. She stated that there is a need for more staff and resources to support student mental wellbeing and thought that while there is low-level support, there is not always support for students who are *'acutely unwell'* or in crises who need a level of support that university counselling or colleges cannot always provide. She feels this is necessary as the NHS crisis teams are often overwhelmed themselves.

The same staff member described how budget cuts by the university *'in the 2 years prior to me arriving in 2021, and now'*, were negatively affecting the capacity of staff to deal with student mental health issues. It was emphasised that even with the cuts, there is still a need for sufficient training of staff and more members of staff to aid with mental health support. The staff member described that *'there's quite a few structural changes that affect the resources in terms of people especially. So I think the team is a lot leaner, [...] or has not been as well prepared as it should be for a lot of the cuts that are being done.'* She went on to describe the current college support system as *'firefighting'* rather than having *'the capacity to develop students'*, and that without adequate staff and training, *'you're kind of fighting a losing battle.'* She also hinted that the university is not supporting current staff sufficiently, saying *'you've got to look after your people that are doing this as well.'* These issues highlight a desire from this member of staff to support student mental wellbeing, but suggests she felt limited in what she can offer due to the top-down budget cuts and lack of support for the staff.

One student participant stated how she *'didn't feel comfortable sharing, what, why I was feeling what I was feeling'* with her college support because she felt there *'wasn't much transparency on how much should you be telling college support or welfare or whatever.'* This suggests there could also be more clarity on how much information you can disclose to college support and welfare and where that information will go.

One avenue of support that received praise was the disability support service, which was described by two participants as being very good. It recognises depression as a disability which was validating to a

student who went to the service. However, this student was only made aware of the service because a friend had a disability, so perhaps the accessibility of this too could be improved.

Accessibility and publicity of support was reiterated as an area for improvement, with there being a demand for a centralised way of sharing support information. This was deemed important especially for more specialised types of support that may not usually be advertised with support like the general counselling service.

Accessibility was an issue for one student who described how their accommodation building (an external college accommodation that houses students for whom there is not enough capacity in the main college accommodation) had a support session every Friday. They said, *'but sometimes I have a mental breakdown on Tuesday'*, suggesting they would like more frequent support.

An important aspect of providing support is to have culturally tailored services, to ensure all members of the community have adequate support available in an environment where they feel that they belong. One student described how there are specialised welfare options offered by societies such as the People of Colour Association, the LGBTQ+ society, and the 97% club, which may be more appropriate for students of colour, queer students, and state-school educated students respectively. She stated that these support options would be better tailored to the individual unlike the college or university-wide support systems where they are less specialised. The societies discussed are student-run however, so this suggests a need for the university to tailor to these groups more too, since students are not professionally qualified to support mental health issues. The student also described how these specialised support groups often lack sufficient publicity, and that she only heard about some of them through word of mouth. She called for the central publicising of such specialised support to ensure it is accessible to all.

Despite these complaints, there was some discussion of institutional improvements being made. A staff member described how the university was implementing *'a lot more training'* of better quality for staff members, and *'they're also putting in more student support into departments'*, and *'recruiting more counsellors.'* An undergraduate student said of the university *'compared to [the] NHS or compared to other places, it offers quite a lot, even if it's not perfect, [...] there is some progress, they're trying, and I appreciate the effort.'*

The interviews and survey open text box comments revealed a wide range of experiences in relation to belonging, mental wellbeing, and help-seeking at Durham University. The next section places these in dialogue with the quantitative findings and reflects on the way each relates to the research questions and the theories and bodies of literature reviewed in the Introduction.

6. Discussion

The qualitative and quantitative results provide valuable insights into the participants' experiences of student wellbeing at Durham University, explored through belonging, mental wellbeing, and help-seeking.

Notable in the quantitative data were the significant correlations between belonging and mental wellbeing, and belonging and help-seeking intentions for university sources. Additionally, multiple regression models saw the variables of belonging and whether a student had a disability/learning difficulty to be significant predictors for mental wellbeing when controlling for other variables in the model. Belonging was not found to be a significant predictor of help-seeking intentions for university sources in the multiple regression models, though it was in univariate regression analysis, suggesting other variables may have been at play in this significant result.

In the qualitative data, the three concepts (belonging, mental wellbeing, and help-seeking) were discussed as being influenced by a range of factors involved in university life and were experienced in both positive and negative ways by the informants. Overall, the results suggest student wellbeing of these student participants at the university could be improved through the tackling of structural inequalities, the improvement of mental health and wellbeing services, and awareness of the importance of friendship and interpersonal belonging.

6.1. **Research Question 1: How does belonging affect mental wellbeing and help-seeking among Durham University students?**

Hypotheses

- 1.1 There is a positive association between student sense of belonging at university and mental wellbeing, i.e., students with a better sense of belonging are likely to have better mental wellbeing.*
- 1.2 There is a positive association between student sense of belonging at university and help-seeking intentions for university mental wellbeing services, i.e., students with a better sense of belonging are more likely to intend to seek help from university mental wellbeing services when they have a personal or emotional problem.*

As predicted in Hypothesis 1.1, there were positive correlations between the belonging scale scores and the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) scores. This was further evident from the multiple regression models, which found that belonging was a significant predictor of mental wellbeing when controlling for demographic characteristics (age and gender), a result that had 72% power in detecting such an effect. Additional data in support of this association between belonging and mental wellbeing comes from the qualitative data. Belonging within friendships was

described as helping with mental health struggles. On the other hand, struggling to make friends affected one participant's mental wellbeing badly, reminiscent of findings discussed by Baumeister and Leary where lacking belonging can lead to mental health issues (Baumeister and Leary, 1995, p. 509). These examples illustrate that belonging can bring benefits and lacking it can bring mental health difficulties. They link to Baumeister and Leary's (1995) interpersonal belonging and are in favour of the idea that social support can impact mental wellbeing, as seen in previous literature.

Hypothesis 1.2 was accepted for some of the quantitative data (correlations and univariate regression) but not all. The significant positive correlation between the belonging scale and the university sources help-seeking intentions scale was supported by univariate regression analysis where belonging was seen to significantly predict university source help-seeking intentions. However, this was not supported by the multiple regression models where demographic variables were controlled, so Hypothesis 1.2 was not accepted here. On the other hand, other quantitative support for this association can be found in the non-constructed help-seeking intentions scale where the top three highest-scoring sources of support ('Intimate partner,' 'Friend,' and 'Parent') were all informal and close relationships (Rickwood, Thomas and Bradford, 2012, p. 11). This is consistent with results found in the Student Health Needs Assessment (SHNA), where 'Friends' and 'Family' were rated the top two most helpful sources of support (Durham University, 2019, chap. 3.3), and results observed in another study among UK university students where 'Intimate partner' and 'Parent' had the highest intentions scores of all help-sources (Gorczynski *et al.*, 2017). Relationships with partners, friends, and parents tend to be some of the deepest bonds in life, within which individuals often experience feelings of love and belonging, feelings included as a need in Glasser's Choice Theory (1998). These findings prompt the need for further exploration of whether and how belonging affects help-seeking (Thompson, 2011; Doan *et al.*, 2020), and provide exploratory insights into this lesser researched phenomenon.

The quantitative and qualitative findings discussed here provide support for the idea that belonging at university is important as it can predict mental wellbeing. However, the same support for the link between belonging and help-seeking intentions was not seen consistently, so this association would benefit from further study. Further research with a larger sample and adequate power would also shed light on if lack of power was the reason for the lack of association between belonging and help-seeking intentions.

6.2. Research Question 2: What factors affect student belonging, mental wellbeing, and help-seeking at Durham University?

Hypotheses

2.1 Students belonging, mental wellbeing, and help-seeking intentions vary by specific sets of characteristics (e.g., academic characteristics; protected characteristics, socioeconomic status):

- 2.1.1 Students who are non-white, international, LGBTQ+, disabled, who do not use English as a first language, or who have lower socioeconomic status have lower belonging than those without these characteristics.*
- 2.1.2 Students who are non-white, international, LGBTQ+, disabled, postgraduates, or who have lower socioeconomic status have lower mental wellbeing than those without these characteristics.*
- 2.1.3 Students who are non-white, international, or who have lower socioeconomic status have lower help-seeking intentions from university sources than those without these characteristics.*

For this research question, factors other than belonging, mental wellbeing, and help-seeking are considered.

Belonging

The factors affecting belonging connect to a multitude of theories outlined in the literature review, linking to the broad and often subjective nature of belonging. Interpersonal belonging seemed to be the most widely experienced and desired form of belonging. Several themes in the qualitative data were described to contribute to and affect interpersonal belonging, beyond sociodemographic ones outlined in the hypotheses.

The multiple regression models found no student characteristic to be a significant predictor of belonging, in other words belonging did not vary significantly by characteristics for this sample, hence Hypothesis 2.1.1 cannot be accepted for the quantitative data. However, differing experiences of belonging across some sociodemographic categories were evident within the qualitative data, so this discrepancy suggests an avenue that would benefit from further exploration with a larger and more representative sample.

One factor seen to have an impact on belonging in the qualitative data was degree course. One interviewee found a sense of belonging through their course, achieved through sharing a common interest with fellow students. It should be noted that this participant experienced a lack of interpersonal belonging. Their academic belonging likely resulted from feeling passion for their subject and consequently identifying with their peers. Yuval-Davis' concept of 'identification and

emotional attachments' (2006, pp. 202–203) could explain this kind of belonging as the student is identifying with people who have similar interests. Belonging in this way was only described by one participant, in the absence of interpersonal belonging, suggesting interpersonal belonging is of greater importance, as reflected in the literature. The role of degree course in belonging would benefit from further study to investigate whether there are any significant quantitative findings.

The Durham City environment contributed towards belonging that aligned with definitions of territorial belonging (Antonsich, 2010; Gammeltoft, 2018). Several student participants discussed their perceptions of the city environment as being peaceful, small, scenic, and safe, connoting ideas of comfort, security, and appreciation of the environment's atmosphere and scenery. These personal and emotional connections to the city link to Antonsich's (2010) and Gammeltoft's (2018) theoretical interpretations and suggest there is some strength to their theories that external environments can shape belonging. However, such sentiments were not mentioned by all participants, implying the concept of place is not universally linked to an individual's sense of belonging in this sample. These participants also tended to give importance to their own experiences of interpersonal belonging, promoting that territorial belonging is, like academic belonging, of lesser significance in instilling a complete sense of belonging. The two could instead be seen as contributing factors towards a rounded experience of belonging, similar to how Gammeltoft's (2018) belonging model enables the involvement of different factors.

Throughout the qualitative data, the value of friendships was consistently emphasised and seen as one of the most important aspects of university life. For instance, one student discussed how they felt '*at home*' after they '*found my people*.' This poignant use of the term '*home*' is linked to belonging by Wekker (2021) and Andits (2015) and is part of the belonging word cloud (Figure 2). The importance attributed to friendship here supports definitions and theories from the literature review indicating the value of friendships and social capital (Bourdieu, 1977) in instilling interpersonal belonging (Maslow, 1954; Baumeister and Leary, 1995; Ahn, 2017).

Colleges and associated rituals of community figured in student participants' sense of belonging partly because they provided opportunities to make friends. Colleges deliberately worked at instilling a sense of interpersonal belonging, for example through social activities and sports, proximity to other students, and greater student support. These efforts had the desired effect in the cases of a student who enjoyed matriculation and another who enjoyed his college principal's speeches. Belonging in these examples could be explained using Cooper's (2009) idea that core values, such as those underlying a matriculation ceremony or college speech, can instil belonging at university. Similarly, they relate also to Yuval-Davis' political belonging through 'ethical and political values' (Yuval-Davis, 2006, p. 203), since these students are subscribing to the values and boundaries of belonging to the college and university.

Core values were also relevant in the experience of another student who received insufficient college support that reduced her ability to feel at home upon her disclosure of experiencing sexual assault. The judgement she received from a member of college staff opposed the core value of inclusivity that was associated with that college, highlighting that despite such a value being in place, it was not consistently actioned and had a detrimental effect on her belonging.

Some informants found certain rituals of community in colleges to be alienating or unappealing, reflecting similar findings from the Report of the Durham Commission on Respect, Values, and Behaviour (RDCRVB) where some traditions felt exclusive due to cost and style (The Durham Commission on Respect Values and Behaviour, 2020, p. 35). This may be explained by a discordance between a student's habitus and the institution's habitus, as outlined by Thomas (2012, p. 13).

Accommodation and living situation were seen as having potential to influence interpersonal belonging because they can alter proximity to prospective friends and limit the accessibility of college activities and other social events. The negative side of this was seen in the experiences of three international students who were living in housing external to their colleges where they felt isolated. The comments convey a sadness and a longing for socialisation, emphasised by quotes such as '*one of the loneliest years I've experienced*' and '*I can live in my room for like 4 days straight... don't see anybody.*' Being an international student was discussed as making it more difficult to integrate socially in the first place, so to then have an extra physical barrier with one's accommodation situation appeared to make it even harder for these participants. In non-college shared accommodation, it was important for residents to have bonding exercises and activities – seen through one student's suggestion of casual dinners – to form relationships and friendships (providing social capital) and assist in promoting feelings of belonging. These experiences reiterate a strong desire for interpersonal belonging, supporting the theory that it has an integral role in supporting students' overall wellbeing.

Knowledge of the Durham student stereotype, '*middle class, white students that come from privately educated backgrounds,*' was pervasive in the interviews, even among staff, and had the effect of alienating students who were people of colour, LGBTQ+, went to a state school, and were of lower-income backgrounds. The perceived disparity in confidence between state school and private school students was felt by some to be ever more alienating. These difficulties relate to the ongoing presence of diversity issues in the student population, as expressed in reports on the university (Durham University, 2019; The Durham Commission on Respect, 2020). They speak to issues of inequality as discussed by Bourdieu and Passeron (1977) and Thomas (2012, p. 13), brought about by a misalignment of some students' habitus with the institutional habitus, which is based in elite traditions and culture. They also link to expectations of Hypothesis 2.1.1 and suggest that certain characteristics can negatively impact belonging if they are in a minority at the university.

Some students felt that the university did not care for them which made them feel *'like a number and not a student'* or *'a cog in a machine,'* claiming that this affected their sense of belonging. This lack of belonging likely came about through feeling a lack of *'support and respect for personal autonomy'* from the university, criteria outlined by Goodenow (2016, p. 25) as requirements for student belonging. Here, the blatant juxtaposition between an inanimate cog and personal agency aptly summarises how feeling a lack of respect from the university can reduce feelings of belonging.

One particular group of informants who expressed difficulty fitting in were international students. Not only did they feel a lack of support from the university, but they also experienced difficulty integrating among fellow students, an experience needed for student retention (Tinto, 1993). They exemplified how lacking such integration was difficult and mentioned how cultural differences often led to them feeling isolated or struggling to talk to other students. A poignant example is the international student who felt *'a little left out, a little homesick'* when her housemates sang British primary school songs during a walk. This illustrates well the result of lacking cultural capital due to being an international student, which then can negatively impact sense of belonging. Additionally, the Chinese community was described as supporting itself, suggesting there are divides within the student community due to lack of shared cultural capital. The experiences of international students in this sample reflect findings from the Student Health Needs Assessment (SHNA) (Durham University, 2019, chap. 3.14) where international students were reported to have difficulty integrating into colleges and departments.

Additionally, a couple of instances of xenophobia and racism were reported by international students, reflecting experiences of microaggressions experienced by BAME students in the Report of the Durham Commission on Respect, Values, and Behaviour (RDCRVB) (The Durham Commission on Respect, 2020, pp. 32–33) and reiterating political and structural inequalities which do not evoke positive feelings of belonging. These findings again provide support for Hypothesis 2.1.1.

Where some participants experienced a lack of diversity and inclusivity, a couple of students and one staff member saw the university student environment as welcoming and diverse. One student went so far as to describe it as the most inclusive place he had been. These perceptions might be explained by sociodemographic factors, since participants with these views were white males, hence they would likely be less affected by the student stereotype narrative or lack of diversity. Nonetheless, they also recognised that there are some structural issues within the university, such as a class divide, that did not directly affect them. These examples show that where inclusivity was perceived by informants as satisfactory, it enhanced feelings of belonging.

Hypothesis 2.1.1 found some tentative supporting evidence in the qualitative data through the difficult experiences of international students and the exclusivity of the Durham stereotype. A number of other factors were described as affecting belonging in this sample – such as accommodation, friendship, and

environment – suggesting these are also important to consider when exploring belonging. Most of these factors were in alignment with existing literature.

Mental wellbeing

The mental wellbeing of student participants was affected by several aspects of the university experience, as expected when considering how university often comes at a pivotal time in life with new responsibilities and independence.

The mental wellbeing regression models found disability to significantly predict mental wellbeing in the regression model (controlling for age, gender, and belonging), with a disability/learning difficulty predicting lower mental wellbeing than no disability/learning difficulty. This result had over 95% power suggesting it is reliable. It is logical that having a disability/learning difficulty would reduce one's mental wellbeing, in fact, mental health difficulties are sometimes classed as disabilities, as was echoed by a qualitative informant who described that depression is considered a disability by the university disability service. These findings suggest support for the role of the university disability service in supporting mental health and wellbeing. Hypothesis 2.1.2 was accepted in the case of disability, but not for the other factors as no significant predictability was found for these.

The most commonly discussed mental wellbeing stressor in the qualitative data was academia. This relates to the SHNA (Durham University, 2019) where academia was seen to be one of the top mental health stressors. The intense pressure experienced by postgraduate students was outlined in detail, with one student explaining how she broke down and could not work anymore. Another postgraduate student experienced somatic pain because of the stress he was under. These experiences highlight the potential for poor mental wellbeing due to academic stress. They also suggest that being a postgraduate might exacerbate work stress, as there was less mention of academic stress among undergraduates in the qualitative sample.

However, the quantitative results did not find level of study to be a significant predictor of mental wellbeing. This result implies the qualitative implication that postgraduates suffered most was not matched across the quantitative sample, perhaps due to differences in the distribution of each group within the two samples.

Perhaps the mental strain from academia experienced by some students is exacerbated by the university's academic prestige and the privately educated student stereotype. Mentions of imposter syndrome from several interview respondents favour this. This could be interpreted as a form of structural violence (Farmer, 2004) or a further example of discordance in habitus, where those with less cultural capital felt imposter syndrome.

As well as this, accommodation was seen to impact mental wellbeing in the interviews. In the experiences of the three international postgraduates who struggled with finding sociable housing, an

assumption can be made that being extremely lonely and barely coming out of one's room suggests that these situations had an impact mentally, though mental wellbeing was not disclosed in relation. A more concrete example comes from the undergraduate student who discussed how her mental health was affected when she experienced tension with her housemates; her accommodation situation put strain on her mental wellbeing. Like academia, accommodation was a top priority for mental health in the SHNA (Durham University, 2019), and the qualitative data shows similar.

The latter example of housemate tension links to the final factor seen to affect mental wellbeing: friendship/social capital. Where friendships existed, student participants felt mentally supported and fulfilled. Where friendships were lacking, the opposite was true. This echoes findings by Alsubaie et al. (2019) where friendship and social support were found to protect the mental health of UK students, and again ties into the important association between belonging (amongst friends) and mental wellbeing.

As with belonging, factors other than student characteristics were seen to have impact on mental wellbeing for participants of the interviews, suggesting that their mental wellbeing was experienced in a multitude of ways and has significance in many areas of their lives.

Help-seeking

Help-seeking appeared to be impacted by several factors and barriers in the data, with both qualitative and quantitative results alluding to these.

Descriptive results for Question 24 of the survey – asking whether participants had sought help from any of the university sources listed – showed an imbalance in distributions of help-seeking between different student characteristics. International students, postgraduate students, and male students each were less likely to have sought help than UK students, undergraduate students, and female/other gender identifying students respectively. Students identifying with a gender other than male or female had the highest percentage of past help-seeking out of all the characteristics, which prompts the question of whether this was because they felt more comfortable reaching out or because they have more mental health issues they need support for. Further research with a larger sample could explore this. The differences seen in this question's data suggest there were inequalities in help-seeking behaviour among the participants and that identifying with the lower-scoring categories may impact help-seeking. The result for international students means Hypothesis 2.1.3 is tentatively accepted in the case of international students, but a greater sample and inferential testing would provide greater clarity on this.

Exploring reasons for these findings, international students may not seek help as much due to a '*cultural barrier*', or a lack of cultural capital (Bourdieu and Passeron, 1977), which was mentioned by one qualitative data respondent as making it difficult to share things with UK mental health

services. The disparity in help-seeking between undergraduates and postgraduates might exist as a result of there being '*little support for postgraduate mental health*', as one interviewee states. Considering the interview comments where postgraduates struggled with academic and housing pressures, this comment seems to be accurate for the qualitative sample. Fewer males than females seeking help is a pattern also seen in the help-seeking data in the SHNA (Durham University, 2019). This finding relates to a comment from a participant discussing how he is reluctant to seek help due to '*ideas of masculinity*' and '*other aspects of habitus*'. This comment connotes ideas of toxic masculinity, where seeking help is seen as weak, and could explain the lack of male help-seeking in Question 24.

The mention of '*other aspects of habitus*' provides a segue into looking at barriers to help-seeking for the sample: stigma, motivation, and accessibility of support. Strong concerns surrounding mental health stigma existed among some interviewees, with one fearing the loss of their scholarship if they disclosed their depression. This example suggests a fear of being seen differently by the university upon disclosing problems with one's mental wellbeing, a phenomenon common among students (Equality Challenge Unit, 2014, p. 9). The existence of stigma among student participants likely comes about due to there still being stigma in the public field of mental health (Rössler, 2016) which can negatively impact help-seeking intentions and behaviour.

Motivation to seek help was also discussed as a factor affecting help-seeking, with some student participants finding it difficult to reach out. This was sometimes because they did not want to be a burden, insinuating stigma as an issue again. Other times it was because they felt there was '*a long wait and a lot of hoops to jump through*' to set up support. In these cases, accessibility of support impacted their help-seeking. Insufficient accessibility of support, particularly in the case of specialised welfare accessed through societies, was also described as a potential issue for students lacking in confidence, since it would involve them putting themselves out there. For one student, university counselling support felt more accessible than her parents, indicating that it also felt less stigmatised. However, she sought support prior to covid, which may have impacted how readily available sessions were in comparison to the student commenting about the long wait and inaccessibility.

As previously mentioned, friendship, or social capital, was seen to score highly on the help-seeking intentions scale, but also to provide a source of support in the qualitative data. Having good friends around gives a student opportunities to seek help that likely feel less daunting than speaking to the university. This study finds friendship to be a wider network of support beyond university provided services and an important factor to consider when exploring help-seeking.

In contrast to the qualitative data which explored several factors described as affecting help-seeking, the multiple regression models for help-seeking intentions found no significant predictors for help-

seeking intentions, suggesting that no sociodemographic characteristic was a significant predictor for this sample when controlling for the other variables in the model. However, the models did not include factors from the qualitative data such as social capital or motivation, so further tests could be done to explore the role of these factors in future research. Also, the discussion of certain characteristics that might affect help-seeking in Question 24 (like being a male or a postgraduate student) could prompt further quantitative investigation with a greater sample size.

Research Question 2 finds data to suggest that a variety of factors impacted the student participants' belonging, mental wellbeing, and help-seeking or help-seeking intentions. Such factors can be aspects of university life, such as accommodation, or student characteristics, such as being an international student. Hypothesis 2.1 was accepted in light of quantitative and qualitative data that showed some variation in how certain characteristics impacted the concepts. However, these variations were not always seen in the quantitative data and it is clear that other factors beyond what were expected had an impact. These factors relate to theory, definitions, and findings from the literature review and generally align with current ideas about belonging, mental wellbeing, and help-seeking.

6.3. Research Questions 3: How successful is Durham University in supporting student belonging, mental wellbeing, and help-seeking?

Research Question 4: What changes could Durham University make to support student wellbeing?

Hypothesis

3.1 There is room for improvement in the support provided by the university for promoting sense of belonging, mental wellbeing, and university source help-seeking intentions.

Research Questions 3 and 4 are answered in tandem since the evaluation of Durham University's success logically corresponds with suggestions for improvement and change. The evaluation and improvements proposed in this section suggest areas of further exploration and they are not intended as recommendations to the university due to the small nature of the samples. Regardless of the sample size, the data provides a variety of valuable insights into student wellbeing for this sample that could prompt further research.

Quantitative findings

From the survey, scores for the belonging, mental wellbeing, and help-seeking intentions scales are assessed and compared to previous studies. It should be noted that the current survey is done in a post-COVID-19 context, which could have impacted the scores.

The average belonging score using the original (not the PCA constructed) scale (3.4 ± 0.8) was lower than the average scores yielded in pilot studies of the original 16-item scale measuring belonging, engagement, and self-confidence (Yorke, 2016). These surveys were carried out with over 2500 UK first-year students from more than 10 UK universities (Yorke, 2016, pp. 156, 157). They found means of 4.06 ± 0.57 and 4.02 ± 0.60 respectively (Yorke, 2016, p. 159) for the 6 belonging items used in this research. While there is a great difference in sample size that could explain these findings, the differences suggest that belonging for the survey sample could be bettered and that it is lower than at other universities, perhaps due to issues surrounding Durham University's culture and status.

The item breakdown of the belonging scale showed interesting results. Each of the positively worded items scored above the midpoint, and above the average of 3.4, suggesting participants felt a significant feeling of belonging at the university. However, the negatively worded item 'Sometimes I feel I don't belong in this university' also scored above the average with a mean of 3.6, which was the third highest scoring item overall. The word 'sometimes' allows room for both positive and negative experiences of the same individual. It implies that a lack of belonging was not felt consistently by participants but was nevertheless experienced. Regardless of the frequency of unbelonging, the fact that this item gained a higher average than others implies that Durham University is not consistently successful in instilling belonging for the survey participants.

The average SWEMWBS score was 19.2 ± 3.8 , which was lower than the average SWEMWBS scores reported among Durham students in the SHNA ($n=1495$). This score was 20.5 (Durham University, 2019, chap. 3.3). In comparison to the UK population – with a top 15% range of 27.5-35 and a lower 15% range of 7-19.5 – the mean score falls just within the UK population boundary of the lower 15% of mental wellbeing (Warwick Medical School, 2021). The sample had only around 2% of scores within the higher 15% boundary and over 58% in the lower wellbeing boundary. The more common lower scores could be due to a difference in sample size or bias in the sample, but also suggest that mental wellbeing could be better for this sample. The results also show a difference over time in mental wellbeing between Durham student samples, which could inspire further research to understand whether covid has had a significant impact on mental wellbeing.

The SWEMWBS average scores per item showed a majority of the items were below the midpoint of 3, suggesting they were more negative than positive. The lowest average score (2.5) for 'I've been feeling relaxed' calls to mind those students in the interviews who were stressed with academic work and suggests relaxing was difficult for students in the survey sample. The highest scores were for 'I've been feeling close to other people' (3.1) and 'I've been able to make up my own mind about things' (3.4). The former links to social relationships, connecting to belonging.

On the help-seeking intentions scale, university sources on average (2.7 ± 1.1) scored lower than non-university sources (3.6 ± 0.8). The difference in scores here suggests that the university sources were

less favourably looked on than other sources, though the non-university source mean score may have been swayed by the high average scores for informal sources such as ‘Intimate partner’ (5.2), ‘Friend’ (5.0) and ‘Parent’ (4.2).

When assessing the help-seeking intentions scale by item, the average rating of sources such as ‘Intimate partner’ (5.2), ‘Friend’ (5.0) and ‘Parent’ (4.2) were the highest scores on average, as seen. This finding agrees with previous research, which shows intimate partners and parents were the preferred support source in relation to help-seeking intentions (Gorczynski *et al.*, 2017). Also, the high scores for these informal sources were to be expected according to the original General Help-Seeking Questionnaire (GHSQ) paper (Offer *et al.*, 1991; Boldero and Fallon, 1995; Wilson *et al.*, 2005) and the findings from the SHNA (Durham University, 2019, chap. 3.3). Again, they suggest there is value in considering social support and belonging when understanding help-seeking (Thompson, 2011; Doan *et al.*, 2020).

Below these scores was the average rating for intentions to seek help from a mental health professional (3.8), suggesting such formal sources are more appealing than university sources among this sample, perhaps due to their professional credits. The average rating of all university sources was 3.3 or below, below the midpoint of 4, which implies that intentions to seek help from them could be improved when comparing them with other sources. The average rating for ‘University Counselling and Mental Health Service’ (3.3) was the highest out of the university sources, followed by ‘University welfare’ (3.0) and then other ‘University staff’ (2.9), suggesting these sources were preferred above ‘Student-run services’ (2.4) and the ‘University Health and Wellbeing Hub’ (2.1) by the survey participants. University sources, particularly the latter two, could be interpreted as not as successful as they could be among the participants when considered in comparison to higher-scoring sources.

The awareness of university services semi-reflects the item scores, whereby the higher-scoring items for help-seeking intentions had higher awareness among the sample. This is only inaccurate in the case of ‘External student-led services’ (akin to ‘Student-run services’ in the help-seeking intentions scale) and ‘Staff’ (akin to ‘University staff’ in the help-seeking intentions scale) because ‘Staff’ scored 1% lower than ‘External student-led services’ on the awareness question. This generally suggests that awareness of services can improve help-seeking intentions for the survey participants, something that is discussed in the interviews.

Service satisfaction is a good indicator of the university’s success in supporting help-seeking, since a satisfactory experience will likely satisfy the need to seek help and encourage further help-seeking where it is needed. The highest percentage of respondents were ‘Satisfied’ with the support they

received, indicating some success of the help-seeking services among the survey participants. However, ‘Very satisfied’ only received 4% of votes, while ‘Unsatisfied’ and ‘Very unsatisfied’ combinedly received 38% of votes. If also true of the wider Durham student population, this would suggest there is still work to be done to ensure that all services provide adequate support for help-seeking students. The qualitative data gives further insight into which services were appreciated and which were considered in need of improvement.

Qualitative findings

The qualitative data suggests that there is room for improvement in the ways belonging, mental wellbeing, and help-seeking are experienced at Durham University, at least in this sample. Arguably most concerning are the issues surrounding equality, diversity, and inclusion (EDI), such as the pervasive student stereotype motif, the non-inclusive traditions, and the discrimination experienced by some international students. These instances strongly reflect findings from the earlier RDCRVB (The Durham Commission on Respect, 2020), suggesting these findings have not demonstrated an excessive change between 2020 and 2022. Granted, this could be because the university is a large institution so change on a grand scale to oppose long-standing institutional habitus (Thomas, 2012, p. 13) will take time. When considering that recommendations from the Commission report have been actioned and that there remains a Respect Oversight Group (Durham University, 2022f) and an EDI team (The Durham Commission on Respect, 2020, pp. 32–33), it could be that changes have not had their full anticipated effect yet or have not been made noticeable to this study’s participants. Nonetheless, data from the qualitative results signal support for ongoing action to establish EDI, as there remain problems and unfair experiences, as seen in the qualitative data. University leadership could explore how to make rituals of community inclusive for everyone and implement strategies to dismantle the student stereotype. Not only is increasing admission diversity important but so is changing the narrative and reputation surrounding the university, to ensure students from more diverse backgrounds can have expectations of feeling safe and respected and as though they belong. In addition, if core values such as inclusivity are to be used, they should be consistently reinforced to avoid issues like the mishandling of one participant’s sexual assault.

This study’s data suggests the university could also be more successful in instilling interpersonal belonging for the student participants. Friendship was seen to play a vital role in experiencing belonging, mental wellbeing, and help-seeking, therefore opportunities that involve everyone could be employed and promoted. These opportunities should be accessible to everyone, regardless of how confident they are. A survey would be useful in understanding the needs and wants of students when it comes to social activities. Ways to integrate students in non-college accommodation where they do not live with pre-made friends could be explored, such as one participant’s suggestion of ‘casual

dinners. ' Furthermore, it seems care of the student participants, especially certain groups like postgraduate and international students, could be improved. This comes in relation to housing and settling in procedures but also to the overall atmosphere of the university.

Mental wellbeing in the interviews is discussed in line with several themes. Some participants had satisfactory mental wellbeing, some had mental health diagnoses that were present regardless of university impacts, and others were affected by university life through academia, accommodation, and friendships. Mediation of mental health issues in academia came from supervisors and extensions, which suggests they were also useful as wider networks of support. Both were valued, though more clarity was desired regarding how much detail to disclose to supervisors. This could be clarified by the university or by the supervisors themselves. While these options were helpful, the root issue of academic pressure ought to be explored further. Imposter syndrome and pressure to succeed were seen among the participants and suggest that academic worry could be reduced if there was less fear of failure. The same issue was highlighted in the RDCRVB (The Durham Commission on Respect, 2020, p. 33). As with belonging, this issue may already be being worked on, nonetheless these findings maintain its need for attention.

Help-seeking in the qualitative data was extensively covered when it came to evaluating and suggesting improvements for the mental health services. There was a discrepancy between different expectations of university support, and an acknowledgement from staff that the level of support could not match private schools or external professional therapy. Several students expressed that the support was inadequate, but one international student was surprised at how much support was in place. This could have been because universities in her country did not provide as much support. These disparities highlight participant differences in awareness of the university's responsibilities in the mental health policy (Durham University, 2022c), something important to rectify, particularly in light of the increasing medicalisation of different experiences (Scott, 2006).

Participants' criticisms of the counselling service focused on how it is difficult to access, only offers 6 sessions, and how one is simply assigned a counsellor who they may not necessarily have rapport with. Counselling was desired to be more personal and available, since some students experienced extreme waiting times or a lack of response. This predominant narrative on counselling seemed similar to comments where students felt *'like a number'* and not cared for by the university. The restrictions on counselling are reminiscent of structural violence (Farmer, 2004), since they restrict some students from receiving sufficient mental health treatment, though the mental health policy suggests there is not a responsibility to treat students, reiterating a need for clarifying these responsibilities.

One way to improve the counselling support offered is through extra funding put towards employing more counsellors, something which is allegedly already happening according to one staff interviewee. Similarly, funding was desired by one college staff member who stated that there could be more support for students in college and that this was limited due to '*structural changes*,' implying the university was not sufficiently backing student support. This further alludes to structural violence (Farmer, 2004) and the '*number*' and '*cog*' commentary. They even implied that staff were not being looked after, contributing to this narrative that the university does not show appropriate care for its members.

Counselling and disability support did receive some praise from student informants for being accessible, and college support was recognised as multifaceted in its offerings. These commendations indicate aspects of support that students appreciated, which can be useful when attempting to understand how to improve services. By contrast, other comments complained that support in general needed to be more accessible and widely publicised to ensure all students could access it if needed. A couple of students also mentioned desiring more clarity on how much data to share with services, which could help tackle stigma. Attending to complaints about the mental health services could help to improve how cared for these student participants feel by the university.

A final improvement that came up several times in the qualitative data was a desire for specialised support for groups of students that were minorities in the student population. Examples discussed were international, postgraduate, LGBTQ+, people of colour, and state-school educated students. Support for postgraduates and international students was described as minimal, and while there was mention of some support for LGBTQ+ students, state-school educated students, and students of colour, these were all student-run welfare groups within student-run societies, hence not necessarily equipped to deal with more severe mental health issues. This indicates a need for more specialised support for these groups, especially so in an environment where there are established problems with diversity and experiences alluding to structural violence (Farmer, 2004). The university has demonstrated some awareness of this through the counselling service link with BAME-led charity Nilaari (Durham University, 2022b), however no participants mentioned this charity suggesting there is not enough signposting about it. All students, regardless of their characteristics, deserve a safe space to access support.

Hypothesis 3.1 was accepted in light of the data, which highlights that there are opinions regarding areas for improvement with the university's support, as well as the fact that scores for belonging, mental wellbeing, and help-seeking intentions for university sources could be higher. Some of these suggested changes or areas for improvement may be useful to consider. However, the data shows that

there are already positive implementations and improvements being made, which will increase the success of the university in supporting student wellbeing.

6.4. Limitations

Although this research provides useful findings from both quantitative and qualitative data, it has some limitations. The research data were collected in a relatively short period of time post-COVID19 which may have affected participation rates of the survey and interviews and representativeness of the data for students. The research is specific to this university context and the findings cannot be generalised to the other university student or staff populations. Further, this study sample was recruited through convenience sampling with voluntary participation so only those who actively chose to participate were recruited, which may have affected how representative the sample was. The survey and interview sample sizes were small in comparison to the entire university population and were not wholly representative demographically, so again views cannot be generalised to the rest of Durham University's student and staff population. A greater and more representative sample size would be beneficial in further study. However, the findings still provide insightful data for this sample that can inspire further exploration of the concepts, their associations, what impacts them, and how they can be improved.

In addition, the sample could have been biased due to the voluntary sample recruitment procedure. The study outline may have appealed more to individuals who had something specific or something negative to say about belonging, mental wellbeing, or help-seeking, whereas those who felt no resonance with the topics may have been less inclined to participate. However, a range of views were included in the data suggesting this issue may not have largely impacted the findings. Even if the data was biased towards more negative views, it was still appropriate for the research questions because it would highlight areas of weakness and ways the university could improve.

The quantitative data were collected through a survey and presented as descriptive findings alongside correlations and regression analysis. Results were presented in both original item scores and as latent constructs (where applicable), so that comparisons could be made with existing published research that presented results using original item scores. However, because of the nature of the analyses, no causations can be drawn. Nonetheless, the associations explored between key variables (mental wellbeing and belonging; help-seeking intentions and belonging) shed light on important issues and avenues for greater exploration.

A limitation of using the General Help-Seeking Questionnaire (GHSQ) (Wilson *et al.*, 2005) as the template for the help-seeking intentions scale is that it measures help-seeking intentions rather than actual help-seeking behaviour which therefore cannot be inferred from the scale. Despite this, help-

seeking intentions still provide a useful insight into respondents' opinions regarding different help sources. Other quantitative and qualitative findings gave insight into help-seeking behaviour.

A theoretical limitation of the research is that the research scope and chosen theory do not consider alternative hypotheses, like the role of help-seeking or mental wellbeing in impacting the other key concepts. Additionally, there remain factors not covered in the research that could impact the concepts. For instance, internal individual factors such as past experiences, trauma, or quality of relationship to one's family can all have an impact on student wellbeing. These alternative explanations could provide avenues for further research. Despite this, the findings still provide useful data on external factors and their impacts within the university context for the study participants.

7. Conclusion

A sense of belonging is a need that once fulfilled, can influence wellbeing. Previous studies have looked at belonging, mental wellbeing, and help-seeking in relation to academic success, but few have explored these concepts in terms of how they relate to one another and impact student wellbeing at university. This study provides a mixed-methods contribution to the literature on student belonging, mental wellbeing, and help-seeking specific to Durham University, which details relevant experiences of university members and areas for improvement.

The study suggests that belonging is an important determinant for mental wellbeing among the student sample, in agreement with previous literature. This indicates that higher education institutions such as Durham University would do well to recognise this importance and foster belonging where possible for students. While not found to be a significant predictor of help-seeking intentions for university sources in multiple regression models, belonging was found to be significantly correlated with help-seeking intentions and was a significant predictor of them in the univariate regression, suggesting that the association between these two concepts could benefit from further exploration with a greater and more representative sample. If this link were to be established through further studies, the importance of student belonging would be increased as it would improve student help-seeking from the university.

Belonging, mental wellbeing, and help-seeking are seen in this data to be affected by various sociodemographic characteristics as well as factors involved in university life, with friendship being a key influence positively impacting each of them. This finding is useful to consider when exploring these concepts further, and when considering how to promote student wellbeing.

Durham University's many avenues for student wellbeing to be achieved are acknowledged by the participants. However, some of these were described by student and staff participants as less successful than they could be due to issues such as accessibility, culture, and lack of equality, diversity, and inclusion. The data suggests there is room for improvement.

Belonging, mental wellbeing, and help-seeking are useful concepts to study when understanding university student wellbeing. Durham University is an example of an institution where these concepts can bring about great experiences as well as unfulfilling ones. This study highlights issues of structural violence and inequality due to habitus discordance and shows the importance of friendship in supporting wellbeing. Durham University is taking positive steps forward, but the remaining discontentment among some students and staff implies a need to examine and address concerns actively and consistently.

8. Appendices

Appendix A: Recruitment text

Student participant Facebook recruitment text:

Survey:

Survey participants needed for research on belonging, mental health, and help-seeking at Durham University (Survey link in comments)

Hi everyone! I am carrying out a quantitative survey as part of my master's research and all current Durham University students are eligible to participate - I would love to hear from you! My research looks at belonging, mental health, and help-seeking at Durham University, and I hope it will provide some valuable insight into student experiences. The survey takes about 10 minutes and is anonymous. The link in the comments will take you to the survey, where you'll find the information sheet and privacy notice for more details! Thanks

Interviews:

I am looking for interview participants to discuss experiences of belonging, mental health, and help-seeking at Durham University. All current or recently graduated Durham students are eligible to participate, and I am keen to get a range of participants from different backgrounds. Students who may be underrepresented (e.g. international, minoritised ethnic groups, LGBT+, mature, disabled, working-class background, first-generation scholar, etc.) are particularly encouraged to take part in this exploration of student experiences. Interviews will take between 30-45 minutes and can be in-person (in Durham) or online depending on your preference. Data will be anonymised to ensure that no individual is personally identifiable. I'd really appreciate your interest! For more information, please send me a message or email me at rosie.f.harris@durham.ac.uk. P.S. I am also carrying out a 10-minute survey on the same topics – click the link in the comments for more information and to take part if you haven't already. Thanks!

Student participant email newsletter recruitment text:

First paragraph:

All current Durham students are invited to participate in a 10 minute survey looking at belonging, mental health and help-seeking at the university. The survey is being undertaken as part of an anthropology master's degree, and aims to understand student experiences first-hand.

Full item accessed through clicking to read more:

An anthropology master's student, Rosie Harris, is conducting research on student sense of belonging, mental health, and help-seeking at Durham. The research aims to understand student experiences of these prominent issues, and explore what could be improved within the university to ensure students feel a sense of belonging and feel supported with their mental health.

The survey is anonymous and will take about 10 minutes. It asks questions about belonging, mental wellbeing, help-seeking, general health, general life satisfaction, and sociodemographic factors. The link below will take you to the survey, where you'll find the information sheet and privacy notice for more details.

<https://durham.onlinesurveys.ac.uk/researchsurvey>

Thank you for considering taking part!

For any queries, please email rosie.f.harris@durham.ac.uk

Staff participant email recruitment text

Staff participants needed for interview on student belonging, mental health, and help-seeking at Durham University: My name is Rosie and I am an anthropology master's student. I am looking for staff members to interview as part of my research on student belonging, mental health, and help-seeking at Durham University. I am especially keen to interview staff who are involved with student wellbeing and mental health, to gain their perspectives on the university environment and how it supports students. Interviews will take between 30-45 minutes and can be carried out on Zoom or in-person (in Durham) depending on participant preferences. All interviews will be anonymised. For more information or to register your interest, please contact me at rosie.f.harris@durham.ac.uk. Thank you!

Appendix B: Quantitative online survey

The following questions were precluded by consent questions (see Appendix K) and a box to enter an anonymous Participant ID.

3. What is your level of study?

- ☐ First year (undergraduate)
- ☐ Second year (undergraduate)
- ☐ Third year (undergraduate)
- ☐ Year abroad/placement year (undergraduate)
- ☐ Fourth year (undergraduate)
- ☐ Masters student
- ☐ PhD student
- ☐ Other

3.a. If you selected Other, please specify:

4. Which faculty are you in at Durham University?

- ☐ Business School (includes Accounting, Economics and Finance, Management and Marketing)
- ☐ Faculty of Arts and Humanities (includes Classics and Ancient History, English Studies, History, Music, Philosophy, Theology and Religion, Modern Languages and Cultures, Liberal Arts)
- ☐ Faculty of Science (includes Biosciences, Chemistry, Computer Science, Earth Sciences, Engineering, Mathematical Sciences, Physics, Psychology, Natural Sciences)
- ☐ Faculty of Social Sciences and Health (includes Anthropology, Archaeology, Education, Geography, Law, Politics and International Relations, Psychology, Sociology, Sport and Exercise Science)

5. Are you an international or UK/Irish student?

- ☐ International student
- ☐ UK/Irish student

5.a. Which region are you from?

- ☐ East Asia
- ☐ South Asia
- ☐ Southeast Asia
- ☐ Asia - other
- ☐ Europe
- ☐ North Africa
- ☐ East Africa
- ☐ Central Africa
- ☐ Southern Africa
- ☐ West Africa
- ☐ North America
- ☐ Central America
- ☐ South America
- ☐ Middle East
- ☐ Oceania
- ☐ The Caribbean
- ☐ Other

5.a.i. If you selected Other, please specify:

5.b. Where are you from in the UK (or Ireland)?

- ☐ Scotland
- ☐ Wales
- ☐ Northern Ireland
- ☐ Republic of Ireland
- ☐ North East
- ☐ North West
- ☐ Yorkshire and the Humber
- ☐ East Midlands
- ☐ West Midlands
- ☐ East of England
- ☐ London
- ☐ South East
- ☐ South West

6. Is English your first language?

- ☐ Yes
- ☐ No

7. Where do you mostly reside during term time?

- ☐ In the City of Durham
- ☐ Elsewhere in County Durham
- ☐ Elsewhere in the North East (e.g. Newcastle)
- ☐ Elsewhere in the UK
- ☐ Outside the UK

7.a. What is your accommodation?

- ☐ College provided accommodation
- ☐ Rented accommodation with other students
- ☐ Rented accommodation with non-students
- ☐ Rented accommodation with parents
- ☐ Rented accommodation alone
- ☐ Owned accommodation with non-students
- ☐ Owned accommodation with parents
- ☐ Owned accommodation alone
- ☐ Other

7.a.i. If you selected Other, please specify:

8. What type of school did you attend for your secondary education? You may choose more than one.

- ☐ State school in the UK - non-selective
- ☐ State school in the UK - selective on academic, faith or other grounds
- ☐ Independent/private or fee-paying school in the UK - no bursary
- ☐ Independent/private or fee-paying school in the UK - bursary
- ☐ College in the UK
- ☐ State school outside the UK - non-selective
- ☐ State school outside the UK - selective on academic, faith or other grounds
- ☐ Independent/private or fee-paying school outside the UK - no bursary
- ☐ Independent/private or fee-paying school outside the UK - bursary
- ☐ College outside the UK
- ☐ Other

8.a. If you selected Other, please specify:

9. Are you a mature student? (this means you were over age 21 when you started your undergraduate degree or over age 25 when you started your postgraduate degree)

- ☐ Yes
- ☐ No

10. Are you studying full time or part time?

- ☐ Full time
- ☐ Part time

10.a. What is your employment status?

- ☐ Unemployed
- ☐ Employed full time
- ☐ Employed part time
- ☐ Employed but currently on study leave
- ☐ Other

10.a.i. If you selected Other, please specify:

11. What is the highest level of qualifications achieved by either of your parent(s) or guardian(s) by the time you were 18?

- ☐ Degree level or Degree equivalent or above (for example first or higher degrees, postgraduate diplomas, NVQ/SVQ level 4 or 5, etc)
- ☐ Qualifications below degree level (for example an A-level, SCE Higher, GCSE, O-level, SCE Standard/Ordinary, NVQ/SVQ, BTEC, etc)
- ☐ No qualifications
- ☐ Do not know or cannot remember
- ☐ Prefer not to say
- ☐ Not applicable

12. What is your religious affiliation?

- ☐ Atheist, agnostic or non-religious
- ☐ Christian - Catholic
- ☐ Christian - Protestant
- ☐ Christian - other denomination
- ☐ Buddhist
- ☐ Jewish
- ☐ Hindu
- ☐ Muslim
- ☐ Sikh
- ☐ Other
- ☐ Prefer not to say

12.a. If you selected Other, please specify:

13. What is your age?

- ☐ 18-19
- ☐ 20-21
- ☐ 22-23
- ☐ 24-25
- ☐ 26-27
- ☐ 28-29
- ☐ 30-31
- ☐ 32-33
- ☐ 34-35
- ☐ 36-37
- ☐ 38-39
- ☐ 40-41
- ☐ 42-43
- ☐ 44-45
- ☐ 46-47
- ☐ 48-49
- ☐ 50+
- ☐ Prefer not to say

14. What is your gender identity?

- ☐ Woman (same as birth sex)
- ☐ Man (same as birth sex)
- ☐ Transgender man (not the same as birth sex)
- ☐ Transgender woman (not the same as birth sex)
- ☐ Non-binary or gender-fluid (not solely male or female)
- ☐ Agender (not identifying with any gender)
- ☐ Other
- ☐ Prefer not to say

14.a. If you selected Other, please specify:

15. Do you identify as being part of the LGBTQ+ community?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

16. What is your ethnic group?

- ☐ Asian/Asian British
- ☐ Black/Black British/African/Caribbean
- ☐ White
- ☐ Mixed/Multiple ethnic groups
- ☐ Other
- ☐ Prefer not to say

16.a. If you selected Other, please specify:

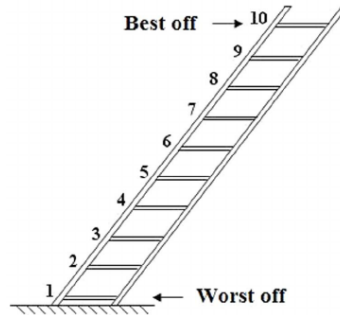
17. Do you have a disability or learning difficulty?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

18. What is your marital status?

- ☐ Never married
- ☐ Separated
- ☐ Divorced
- ☐ Widowed
- ☐ Married
- ☐ Prefer not to say

19. Think of this ladder as representing where people stand in relation to their socioeconomic status. At the top of the ladder are people who are the best off - those who have the most money, are the highest educated, and have the best jobs. At the bottom of the ladder are people who are the worst off - those who have the least money, little or no education, and no jobs or undesirable jobs. On a scale of 1 to 10, where do you think your family would fall on this ladder?



- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10

20. Please click the box which indicates how strongly you agree or disagree with each statement.
 (Note: the word 'department' in these questions refers to your course's academic department e.g. physics, history)

Please don't select more than 1 answer(s) per row.

| | Strongly Agree | Tend to Agree | Neutral | Tend to Disagree | Strongly Disagree |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| I feel at home in this university. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Being at this university is an enriching experience. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I wish I'd gone to a different university. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I have found this department to be welcoming. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I am shown respect by members of staff in this department. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sometimes I feel I don't belong in this university. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

21. How would you describe your general health?

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Poor

22. Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks

Please don't select more than 1 answer(s) per row.

| | None of the time | Rarely | Some of the time | Often | All of the time |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| I've been feeling optimistic about the future | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I've been feeling useful | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I've been feeling relaxed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I've been dealing with problems well | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I've been thinking clearly | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I've been feeling close to other people | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I've been able to make up my own mind about things | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

23. Please tick which Durham university mental health support options you were aware of before completing this survey.

- ☐ Welfare (e.g. college or society based)
- ☐ Staff (college, academic or other)
- ☐ Counselling and Mental Health Service
- ☐ Health and Wellbeing Hub
- ☐ External student-led services (e.g. Nightline)
- ☐ Other

23.a. If you selected Other, please specify:

24. Have you ever sought support from any of the options listed in question 23?

- ☐ Yes
- ☐ No

24.a. Overall, how satisfied were you with the service/services you used?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Unsatisfied
- ☐ Very unsatisfied

25. If you were having a personal or emotional problem, how likely is it that you would seek help from the following people/sources? Please indicate your response by ticking the box of the number that best describes your intention to seek help from each help source that is listed. (1 = Extremely Unlikely, 3 = Unlikely, 5 = Likely, 7 = Extremely Likely)

Please don't select more than 1 answer(s) per row.

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Intimate partner (e.g. girlfriend, boyfriend, husband, wife) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Friend (not related to you) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Parent | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other relative/family member | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mental health professional unrelated to the university (e.g. psychologist, social worker, counsellor) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Phone/text helpline (e.g. Shout) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doctor/GP/NHS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Minister or religious leader (e.g. Priest, Rabbi, Chaplain) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| University welfare (e.g. college welfare, society welfare) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| University staff (college, academic or other) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| University Health and Wellbeing Hub | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| University Counselling and Mental Health Service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Student-run services (e.g. Nightline, Student Minds) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I would not seek help from anyone | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I would seek help from another source not listed above (please list in the space provided, e.g. work colleague. If no, leave blank) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

25.a. If you selected 'I would seek help from another source not listed above', please list the other help source/s you would seek help from.

Appendix C: Student interview guide

- Hiya, **thanks** so much for taking part. To help me remember key points from our discussion today, I'll need to audio record our conversation. No personally identifiable information will be used in my thesis. Is that okay with you?
- How is your **week** going **so far**?

BACKGROUND

- What was your **life** like **before university**?
- What did you know or think about **Durham University** **before** you came here?

GENERAL FEELINGS ABOUT UNIVERSITY LIFE

- How was the **move**? [any difficulties]
- What was it like **settling into Durham**? [Can probe to ask more]
- How is your **university life** going **at the moment**?
- How has the experience so far **been compared to your expectations**? [How come/what makes you say that?]

BELONGING

- So, university is where you'll mostly be living for the next few [years/months/right now]. Do you **feel at home** here? [prompt with how/why if needed]
- How does it **feel to belong** somewhere? [what are some words you might use?]
- Would you say you **belong here** at Durham?
- Do you think there is a **typical Durham student**? If so, how would you **describe** them?
 - How do you **view yourself** compared with this typical student?
- Can you describe a **moment or experience** that sticks out for you, either when you felt **belonging** to the university, or when you felt a **lack of belonging**?

MENTAL HEALTH

- Some parts of **uni life** can be **stressful** e.g. exams, deadlines, making new friends. How do you feel you have **managed that**? [or if already mentioned negatives: Has your mental health suffered because of negative experiences mentioned previously/lowlights?]
 - Have **negative belonging experiences affected your mental health**?
- Would you say these feelings/issues are **unique to Durham** or just university life in general?
- How do you think **other students** are doing with these things?
 - Do you have a sense that **others are struggling**?

UNIVERSITY SUPPORT

- In relation to stress and mental health, how **supported** do you feel **by the university**?
- Are you **aware of support systems** within the university for student mental health and wellbeing? Which ones?
- Have you **used any** of these services? [might come up naturally if they report feeling low, could ask how they managed it and did they turn to anyone for help]
- **What do you think of the support** offered by the university?
 - Does it **suitably meet student needs**?
 - **If no:** What could be **done differently**?
- Would you consider **asking a friend/classmate to seek mental health support** from the university in case they need it?
- How would/did **you** feel about **seeking mental health support** from the university if you needed it? [e.g. comfortable or not]

OTHER COMMENTS

- Is there **anything else** relevant you'd like to add?

Appendix D: Staff interview guide

INTRO AND BACKGROUND

- Hello, **thanks** so much for taking part in my research. Just to check, are you okay to be audio recorded? Tell me about your **life outside of work** and your **life before university**.
- [if they mention going to **uni**] How was your **experience as a university student**? Have you noticed **many changes** since then?
- [if did **not** go to uni] How have you found your **working life** so far in terms of **fitting in** and **transitioning** between jobs?

WORKING AT DURHAM

- How did you **come to** work at **Durham**?
- What does your **job role** involve?
- How do you **find working** in this role at Durham?
- What did you **know or think** about **Durham University before** you came here?

BELONGING

- Would you say the university is a **welcoming** environment for students?
- **How** is it/isn't it?
- **If** you were a **student** at Durham, do you think you'd feel like you **belong** here?

MENTAL HEALTH

- What do you think of the **current state** of **student mental health** these days. Has it **changed** over the years? [e.g. pandemic, longer term.]
- How would you describe the **state** of **student mental health** at **Durham**?
- What kinds of things would you say have an **impact** on student mental health? [can be at Durham or in general]

HELP-SEEKING

- How do you think the university does in terms of **supporting student mental health**?
- In your opinion, is university mental health support being **used as much as students might need** it?
- [dependent on answer] What do you think would make students **more likely to use** it? OR What **contributes** to it **being used**?
- Would you say there are **certain characteristics** that make students more likely to engage with the support? [Is it more **accessible** for some? E.g. Home students over international students perhaps]

OTHER COMMENTS

- Do you have any other **relevant comments** you'd like to share?

Appendix E: Student survey information sheet

Participant Information Sheet

Project title: Belonging, mental health, and help-seeking at Durham University

Researcher: Rosie Harris

Department: Anthropology

Contact details: rosie.f.harris@durham.ac.uk 07966745895

Supervisor names: Nasima Akhter and Jed Stevenson

Supervisor contact details: nasima.akhter@durham.ac.uk and jed.stevenson@durham.ac.uk

You are invited to take part in a study I am conducting as part of my Masters by Research degree at Durham University. The research will contribute to improving understanding of student wellbeing and university support. This study has received ethical approval from the Anthropology Ethics Committee of Durham University. Before you decide whether to agree to take part it is important for you to understand the purpose of the research and what is involved as a participant. Please read the following information carefully and get in contact if there is anything that is not clear, or if you would like more information.

The rights and responsibilities of anyone taking part in Durham University research are set out in our 'Participant

Charter': <https://www.dur.ac.uk/internal/research.innovation/governance/ethics/considerations/people/charter/>

What is the purpose of the study? The aim of this study is to understand and explore the link between belonging, mental health, and help-seeking for students at Durham University. It will look at different factors involved, including whether sociodemographic factors affect student experiences, and aim to suggest improvements. The study will be completed by November 2022, with data collection occurring before July 2022.

Why have I been invited to take part? You have been invited because you are a Durham University student. The study does not require you to have experience with mental health issues or seeking support for mental health. Since the study is aimed at understanding your experience, there are no right or wrong answers. I appreciate you participating in this research and sharing your opinions.

Do I have to take part? Your participation is voluntary, and you do not have to agree to take part. If you do agree to take part, you can withdraw at any time, without giving a reason. Your rights in relation to withdrawing any data are explained in the accompanying Privacy Notice.

What will happen to me if I take part? If you agree to take part in the study, you will be asked to complete a survey that will take 10-15 minutes to complete. The survey will ask some sociodemographic/background questions, followed by some questions about your sense of belonging at university, your general health, your thoughts and feelings over the past 2 weeks, your help-seeking behaviour and intentions, and your general life satisfaction. The survey is online and can be completed on a phone, tablet, or computer. You can skip any questions you do not wish to answer.

Are there any potential risks involved? The research discusses the potentially sensitive topic of mental health. If questions on this topic might be distressing for you, you are advised not to take part. The risk of distress will be mitigated through the provision of relevant support signposting at the end of the survey and the option to skip any questions you wish to.

Will my data be kept confidential? All information obtained during the study will be kept confidential. If the data is published it will be entirely anonymous and will not be identifiable as yours. When you participate, you will be asked to create a Participant ID that will ensure your anonymity. It is not possible to connect data to the IP address from which the survey was completed. Full details are included in the accompanying Privacy Notice.

What will happen to the results of the project? The results are expected to be published in October 2022 in the form of a thesis. All research data and records needed to validate the research findings will be stored for 10 years after publication of the results, in line with university policy. Durham University is committed to sharing the results of its world-class research for public benefit. As part of this commitment the University has established an online repository for all Durham University Higher Degree theses which provides access to the full text of freely available theses. The study in which you are invited to participate will be written up as a thesis. On successful submission of the thesis, it will be deposited both in print and online in the University archives, to facilitate its use in future research. The thesis will be published open access.

Who do I contact if I have any questions or concerns about this study? If you have any further questions or concerns about this study, please speak to the researcher or their supervisor. If you remain unhappy or wish to make a formal complaint, please submit a complaint via the University's [Complaints Process](#).

Thank you for reading this information and considering taking part in this study.

Appendix F: Student interview information sheet

Participant Information Sheet

Project title: Belonging, mental health, and help-seeking at Durham University

Researcher(s): Rosie Harris

Department: Anthropology

Contact details: rosie.f.harris@durham.ac.uk 07966745895

Supervisor name: Nasima Akhter and Jed Stevenson

Supervisor contact details: nasima.akhter@durham.ac.uk and jed.stevenson@durham.ac.uk

You are invited to take part in a study that I am conducting as part of my Master's by Research degree at Durham University. The research will contribute to improving understanding of student wellbeing and university support. This study has received ethical approval from the Anthropology Ethics Committee of Durham University.

Before you decide whether to agree to take part it is important for you to understand the purpose of the research and what is involved as a participant. Please read the following information carefully. Please get in contact if there is anything that is not clear, or if you would like more information.

The rights and responsibilities of anyone taking part in Durham University research are set out in our 'Participants Charter':

<https://www.dur.ac.uk/research.innovation/governance/ethics/considerations/people/charter/>

What is the purpose of the study?

The aim of this study is to understand and explore the link between belonging, mental health, and help-seeking for students at Durham University. It will look at different factors involved, including whether sociodemographic factors affect student experiences, and aim to suggest improvements. The study will be completed by November 2022, with data collection occurring in July 2022.

Why have I been invited to take part?

You have been invited because you are a Durham University student. The study does not require you to have experience with mental health issues or seeking support for mental health. Since the study is aimed at understanding your experience, there are no right or wrong answers. I appreciate you participating in this research and sharing your opinions.

Do I have to take part?

Your participation is voluntary, and you do not have to agree to take part. If you do agree to take part, you can withdraw at any time, without giving a reason. Your rights in relation to withdrawing any data that is identifiable to you are explained in the accompanying Privacy Notice.

What will happen to me if I take part?

If you agree to take part in the study, you will be asked to participate in an audio-recorded interview asking some questions about your university experience, especially your sense of belonging at university, your mental health at university, and where you might seek help if you needed it. You may also discuss your background and sociodemographic characteristics. The interview can be in person or online, depending on your preference, and will last approximately 30-45 minutes. The date and time of the interview will be agreed between you and the researcher depending on your availability. You can skip any questions you do not wish to answer.

Are there any potential risks involved?

The research discusses the potentially sensitive topic of mental health. Furthermore, if you choose to share it, special category data (e.g. race, ethnic origin, sexual orientation, religion) may be collected and discussed. If discussing any of these subjects might be distressing for you, you are advised not to take part. The risk of distress will be mitigated through the provision of relevant support signposting and the option to skip any questions you wish to.

Will my data be kept confidential?

All information obtained during the study will be kept confidential. If the data is published it will be entirely anonymous and will not be identifiable as yours. When you participate, a specific code will be generated as your anonymous Participant ID that will replace your identifiable information (i.e. your name or email address). It is not possible to connect data to the IP address from which online interviews are completed. Full details are included in the accompanying Privacy Notice.

What will happen to the results of the project?

The results are expected to be published in October 2022 in the form of a thesis. All research data and records needed to validate the research findings will be stored for 10 years after publication of the results, in line with university policy. Durham University is committed to sharing the results of its world-class research for public benefit. As part of this commitment the University has established an online repository for all Durham University Higher Degree theses which provides access to the full text of freely available theses. The study in which you are invited to participate will be written up as a thesis. On successful submission of the thesis, it will be deposited both in print and online in the University archives, to facilitate its use in future research. The thesis will be published open access.

Who do I contact if I have any questions or concerns about this study?

If you have any further questions or concerns about this study, please speak to the researcher or their supervisor. If you remain unhappy or wish to make a formal complaint, please submit a complaint via the University's [Complaints Process](#).

Thank you for reading this information and considering taking part in this study.

Appendix G: Staff interview information sheet

Participant Information Sheet

Project title: Belonging, mental health, and help-seeking at Durham University

Researcher(s): Rosie Harris

Department: Anthropology

Contact details: rosie.f.harris@durham.ac.uk 07966745895

Supervisor name: Nasima Akhter and Jed Stevenson

Supervisor contact details: nasima.akhter@durham.ac.uk and jed.stevenson@durham.ac.uk

You are invited to take part in a study that I am conducting as part of my Master's by Research degree at Durham University. The research will contribute to improving understanding of student wellbeing and university support. This study has received ethical approval from the Anthropology Ethics Committee of Durham University.

Before you decide whether to agree to take part it is important for you to understand the purpose of the research and what is involved as a participant. Please read the following information carefully. Please get in contact if there is anything that is not clear, or if you would like more information.

The rights and responsibilities of anyone taking part in Durham University research are set out in our 'Participants Charter':

<https://www.dur.ac.uk/research.innovation/governance/ethics/considerations/people/charter/>

What is the purpose of the study?

The aim of this study is to understand and explore the relationships between belonging, mental health, and help-seeking for students at Durham University. It will look at different factors involved, including whether sociodemographic factors affect student experiences, and aim to suggest improvements. The study will be completed by December 2022, with data collection occurring before September 2022.

Why have I been invited to take part?

You have been invited because you are a staff member at Durham University. The study does not require you to have experience with mental health issues or to have experience of seeking support for mental health. Since the study is aimed at understanding your views, there are no right or wrong answers. I appreciate you participating in this research and sharing your opinions.

Do I have to take part?

Your participation is voluntary, and you do not have to agree to take part. If you do agree to take part, you can withdraw at any time, without giving a reason. Your rights in relation to withdrawing any data that is identifiable to you are explained in the accompanying Privacy Notice.

What will happen to me if I take part?

If you agree to take part in the study, you will be asked to participate in an audio-recorded interview asking about your views on student sense of belonging, mental health, and help-seeking, as well as your views on the current support offered by the university. The interview can be in person or online, depending on covid regulations and your preference, and will last approximately 30-45 minutes. The date and time of the interview will be agreed between you and the researcher depending on your availability. You can skip any questions you do not wish to answer.

Are there any potential risks involved?

The research discusses the potentially sensitive topic of mental health. Furthermore, if you choose to share it, special category data (e.g. race, ethnic origin, sexual orientation, religion) may be collected and discussed. If discussing any of these subjects might be distressing for you, you are advised not to take part. The risk of distress will be mitigated through the provision of relevant support signposting and the option to skip any questions you wish to.

Will my data be kept confidential?

All information obtained during the study will be kept confidential. If the data is published it will be entirely anonymous and will not be identifiable as yours. When you participate, a specific code will be generated as your anonymous Participant ID that will replace your identifiable information. It is not possible to connect data to the IP address from which online interviews are completed. Full details are included in the accompanying Privacy Notice.

What will happen to the results of the project?

The results are expected to be published in December 2022 in the form of a thesis. All research data and records needed to validate the research findings will be stored for 10 years after publication of the results, in line with university policy. Durham University is committed to sharing the results of its world-class research for public benefit. As part of this commitment the University has established an online repository for all Durham University Higher Degree theses which provides access to the full text of freely available theses. The study in which you are invited to participate will be written up as a thesis. On successful submission of the thesis, it will be deposited both in print and online in the University archives, to facilitate its use in future research. The thesis will be published open access.

Who do I contact if I have any questions or concerns about this study?

If you have any further questions or concerns about this study, please speak to the researcher or their supervisor. If you remain unhappy or wish to make a formal complaint, please submit a complaint via the University's [Complaints Process](#).

Thank you for reading this information and considering taking part in this study.

Appendix H: Student survey privacy notice

Privacy Notice



Durham University's responsibilities under data protection legislation include the duty to ensure that we provide individuals with information about how we process personal data. We do this in a number of ways, one of which is the publication of privacy notices. This privacy notice provides a general description of the broad range of processing activity in addition there are tailored privacy notices covering some specific processing activity.

To ensure that we process your personal data fairly and lawfully we are required to inform you:

- Why we collect your data
- How it will be used
- Who it will be shared with

We will also explain what rights you have to control how we use your information and how to inform us about your wishes. Durham University will make the Privacy Notice available via the website and at the point we request personal data.

Our privacy notices comprise two parts – a generic part (i.e., common to all of our privacy notices) and a part tailored to the specific processing activity being undertaken.

PART 1 – GENERIC PRIVACY NOTICE

Please access our [General Privacy Notice](#) online.

PART 2 – TAILORED PRIVACY NOTICE

This section of the Privacy Notice provides you with the privacy information that you need to know before you provide personal data to the University for the particular purpose(s) stated below.

Project Title: Belonging, mental wellbeing and help-seeking at Durham University

Type(s) of personal data collected and held by the researcher and method of collection:

Personal data will be collected through a survey. Firstly, you will be asked some sociodemographic questions. You will be asked about your feelings of belonging at Durham University. You will also be asked some questions about your mental wellbeing generally and your help-seeking intentions. Most of the survey questions will be structured, although some will have boxes for other answers or elaboration. IP addresses will not be traceable from the questionnaire. There will be the option to omit questions you do not wish to answer, and no data will be collected or processed that you have not freely and consensually provided.

Lawful Basis

Under data protection legislation, we need to tell you the lawful basis we are relying on to process your data. The lawful basis we are relying on is public task: the processing is necessary for an activity being carried out as part of the University's public task, which is defined as teaching, learning and research.

Potentially sensitive data (ethnic group, sexuality) will be processed in this research, if you choose to disclose it, since they might impact sense of belonging.

How personal data is stored:

All data will be held securely and strictly confidential to the research team.

You will be allocated an anonymous Participant ID for data collection.

All personal data in electronic form will be stored on a password protected computer, and any hardcopies will be kept in locked storage. Electronic data will not be available to anyone outside the research team.

The interview conversations will be recorded and stored on an encrypted device until they have been transcribed by the researcher. No-one else will have access to the recordings, and they will be erased once the transcripts have been completed.

How personal data is processed:

Information will be entered into a database for analysis. Since you will have a Participant ID instead of disclosing any personally identifiable data, the data will be completely anonymised.

Withdrawal of data:

You can request withdrawal of your data at any point during the study by telling the researcher your Participant ID so they can locate your data to withdraw.

Who the researcher shares personal data with:

Please be aware that if you disclose information which indicates the potential for serious and immediate harm to yourself or others, the research team may be obliged to breach confidentiality and report this to relevant authorities. This includes disclosure of child protection offences such as the physical or sexual abuse of minors, the physical abuse of vulnerable adults, money laundering, or other crimes covered by prevention of terrorism legislation. Where you disclose behaviour (by yourself or others) that is potentially illegal but does not present serious and immediate danger to others, the researcher will, where appropriate, signpost you to relevant services, but the information you provide will be kept confidential (unless you explicitly request otherwise).

How long personal data is held by the researcher:

Data will be anonymised from the outset with Participant IDs. The anonymised data will be stored for 10 years after publication of the results, in line with university policy, after which it will be destroyed.

How to object to the processing of your personal data for this project:

If you have any concerns regarding the processing of your personal data, or you wish to withdraw your data from the project, contact Rosie Harris on 07966745895 or rosie.f.harris@durham.ac.uk.

Further information:

Rosie Harris – rosie.f.harris@durham.ac.uk

Appendix I: Student interview privacy notice

Privacy Notice



Durham University's responsibilities under data protection legislation include the duty to ensure that we provide individuals with information about how we process personal data. We do this in a number of ways, one of which is the publication of privacy notices. This privacy notice provides a general description of the broad range of processing activity in addition there are tailored privacy notices covering some specific processing activity.

To ensure that we process your personal data fairly and lawfully we are required to inform you:

- Why we collect your data
- How it will be used
- Who it will be shared with

We will also explain what rights you have to control how we use your information and how to inform us about your wishes. Durham University will make the Privacy Notice available via the website and at the point we request personal data.

Our privacy notices comprise two parts – a generic part (i.e., common to all of our privacy notices) and a part tailored to the specific processing activity being undertaken.

PART 1 – GENERIC PRIVACY NOTICE

Please access our [General Privacy Notice](#) online.

PART 2 – TAILORED PRIVACY NOTICE

This section of the Privacy Notice provides you with the privacy information that you need to know before you provide personal data to the University for the particular purpose(s) stated below.

Project Title: Sense of belonging, mental health, and help-seeking at Durham University

Type(s) of personal data collected and held by the researcher and method of collection:

Personal data will be collected through an interview. You will be asked to describe your feelings of belonging at Durham University. You will also be asked about mental health and help-seeking behaviours. Special category data (e.g. race, ethnic origin, sexual orientation, religion) may be discussed and processed in this research since they might impact individual experiences. IP addresses will not be traceable from the interview. The interviews will be audio recorded to enable transcription. There will be the option to skip questions you do not wish to answer. Only data that you have freely and consensually provided will be collected or processed.

Lawful Basis

Under data protection legislation, we need to tell you the lawful basis we are relying on to process your data. The lawful basis we are relying on is public task: the processing is necessary for an activity being carried out as part of the University's public task, which is defined as teaching, learning, and research.

How personal data is stored:

All personal data will be held securely and strictly confidential to the research team.

You will be allocated an anonymous number (Participant ID) for data collection. Information that identifies you will be kept separate from the anonymised data and destroyed once your data has been allocated to your number.

All personal data in electronic form will be stored on a password-protected computer, and any hardcopies will be kept in locked storage. Electronic data will not be available to anyone outside the research team.

The interview conversations will be recorded and stored on an encrypted device until they have been transcribed by the researcher. No-one else will have access to the recordings, and they will be erased once the transcripts have been completed.

How personal data is processed:

Information will be entered into a database for analysis. Once you have been given your Participant ID, the data will be completely anonymised and the original records, including any information which can identify you personally, will be destroyed.

The recorded interview conversations will be transcribed by the researcher, and personal information will be coded and anonymised. The original recording will then be erased.

Withdrawal of data:

You can request withdrawal of your data at any point during the study by telling the researcher your Participant ID so they can locate your data to withdraw.

Who the researcher shares personal data with:

Please be aware that if you disclose information which indicates the potential for serious and immediate harm to yourself or others, the research team may be obliged to breach confidentiality and report this to relevant authorities. This includes disclosure of child protection offences such as the physical or sexual abuse of minors, the physical abuse of vulnerable adults, money laundering, or other crimes covered by prevention of terrorism legislation. Where you disclose behaviour (by yourself or others) that is potentially illegal but does not present serious and immediate danger to others, the researcher will, where appropriate, signpost you to relevant services, but the information you provide will be kept confidential (unless you explicitly request otherwise).

How long personal data is held by the researcher:

Data will be anonymised after it has been collected and you have been given your anonymous number. The anonymised data will be stored for 10 years after publication of the results, in line with university policy, after which it will be destroyed.

How to object to the processing of your personal data for this project:

If you have any concerns regarding the processing of your personal data, or you wish to withdraw your data from the project, contact Rosie Harris on 07966745895 or rosie.f.harris@durham.ac.uk.

Further information:

Rosie Harris – rosie.f.harris@durham.ac.uk

Appendix J: Staff interview privacy notice

| |
|-----------------------|
| Privacy Notice |
|-----------------------|



Durham University's responsibilities under data protection legislation include the duty to ensure that we provide individuals with information about how we process personal data. We do this in a number of ways, one of which is the publication of privacy notices. This privacy notice provides a general description of the broad range of processing activity in addition there are tailored privacy notices covering some specific processing activity.

To ensure that we process your personal data fairly and lawfully we are required to inform you:

- Why we collect your data
- How it will be used
- Who it will be shared with

We will also explain what rights you have to control how we use your information and how to inform us about your wishes. Durham University will make the Privacy Notice available via the website and at the point we request personal data.

Our privacy notices comprise two parts – a generic part (i.e., common to all of our privacy notices) and a part tailored to the specific processing activity being undertaken.

PART 1 – GENERIC PRIVACY NOTICE

Please access our [General Privacy Notice](#) online.

PART 2 – TAILORED PRIVACY NOTICE

This section of the Privacy Notice provides you with the privacy information that you need to know before you provide personal data to the University for the particular purpose(s) stated below.

Project Title: Sense of belonging, mental health, and help-seeking at Durham University

Type(s) of personal data collected and held by the researcher and method of collection:

Personal data will be collected through an interview. You will be asked some open-ended questions about your opinions on student sense of belonging, mental health, and help-seeking. You will be asked your views on the university support available. Special category data (e.g. race, ethnic origin, sexual orientation, religion) may be discussed and processed in this research since they might relate to individual opinions or experiences. IP addresses will not be traceable from online interviews. The interviews will be audio recorded for the sole purpose of enabling easier analysis. There will be the option to skip questions you do not wish to answer. Only data that you have freely and consensually provided will be collected or processed.

Lawful Basis

Under data protection legislation, we need to tell you the lawful basis we are relying on to process your data. The lawful basis we are relying on is public task: the processing is necessary for an activity being carried out as part of the University's public task, which is defined as teaching, learning and research.

How personal data is stored:

All personal data will be held securely and strictly confidential to the research team.

You will be allocated an anonymous number (Participant ID) for data collection. Information that identifies you will be kept separate from the anonymised data and destroyed once your data has been allocated to your number. All personal data in electronic form will be stored on a password-protected computer, and any hardcopies will be kept in locked storage. Electronic data will not be available to anyone outside the research team. The interview conversations will be recorded and stored on an encrypted device until they have been transcribed by the researcher. No-one else will have access to the recordings, and they will be erased once the transcripts have been completed.

How personal data is processed:

Information will be entered into a database for analysis. Once you have been given your Participant ID, the data will be completely anonymised and the original records, including any information which can identify you personally, will be destroyed. *The recorded interview conversations will be transcribed by the researcher, and personal information will be coded and anonymised. The original recording will then be erased.*

Withdrawal of data:

You can request withdrawal of your data at any point during the study by telling the researcher your Participant ID so they can locate your data to withdraw.

Who the researcher shares personal data with:

Please be aware that if you disclose information which indicates the potential for serious and immediate harm to yourself or others, the research team may be obliged to breach confidentiality and report this to relevant authorities. This includes disclosure of child protection offences such as the physical or sexual abuse of minors, the physical abuse of vulnerable adults, money laundering, or other crimes covered by prevention of terrorism legislation. Where you disclose behaviour (by yourself or others) that is potentially illegal but does not present serious and immediate danger to others, the researcher will, where appropriate, signpost you to relevant services, but the information you provide will be kept confidential (unless you explicitly request otherwise).

How long personal data is held by the researcher:

Data will be anonymised after it has been collected and you have chosen your anonymous number. The anonymised data will be stored for 10 years after publication of the results, in line with university policy, after which it will be destroyed.

How to object to the processing of your personal data for this project:

If you have any concerns regarding the processing of your personal data, or you wish to withdraw your data from the project, contact Rosie Harris on 07966745895 or rosie.f.harris@durham.ac.uk.

Further information:

Rosie Harris – rosie.f.harris@durham.ac.uk

Appendix K: Student survey consent form

Consent Form

Project title: How does sense of belonging affect student mental wellbeing and help-seeking at Durham University?

Researcher(s): Rosie Harris

Department: Anthropology

Contact details: rosie.f.harris@durham.ac.uk 07966745895

Supervisor name: Nasima Akhter and Jed Stevenson

Supervisor contact details: nasima.akhter@durham.ac.uk and jed.stevenson@durham.ac.uk

This form is to confirm that you understand the purposes of the project, what is involved and that you are happy to take part. Please initial each box to indicate your agreement:

| | |
|--|--|
| I confirm that I have read and understand the information sheet dated [dd/mm/yy] and the privacy notice for the above project. | |
| I have had sufficient time to consider the information and ask any questions I might have, and I am satisfied with the answers I have been given. | |
| I understand who will have access to personal data provided, how the data will be stored and what will happen to the data at the end of the project. | |
| I agree to take part in the above project. | |
| I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason. | |
| I consent to the collection and processing of sensitive data (e.g. racial or ethnic origin, sexuality etc.) I choose to share. | |

| |
|--|
| Participant's Signature _____ Date _____ |
| (NAME IN BLOCK LETTERS) _____ |
| Researcher's Signature _____ Date _____ |
| (NAME IN BLOCK LETTERS) _____ |

Appendix L: Student interview consent form

Consent Form

Project title: Sense of belonging, mental health, and help-seeking at Durham University

Researcher(s): Rosie Harris

Department: Anthropology

Contact details: rosie.f.harris@durham.ac.uk 07966745895

Supervisor name: Nasima Akhter and Jed Stevenson

Supervisor contact details: nasima.akhter@durham.ac.uk and jed.stevenson@durham.ac.uk

This form is to confirm that you understand the purposes of the project, what is involved, and that you are happy to take part. Please initial each box to indicate your agreement:

| | |
|---|--|
| I consent to being audio recorded and understand how recordings will be used in research outputs. | |
| I understand that my words may be quoted in publications, reports, and other research outputs. | |

| | |
|---|--|
| I confirm that I have read and understand the information sheet and the privacy notice for the above project. | |
| I have had sufficient time to consider the information and ask any questions I might have, and I am satisfied with the answers I have been given. | |
| I understand who will have access to personal data provided, how the data will be stored, and what will happen to the data at the end of the project. | |
| I agree to take part in the above project. | |
| I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason. | |
| I consent to the collection and processing of special category data (e.g. race, ethnic origin, sexual orientation, religion, etc.) I choose to share. | |

| |
|--|
| Participant's Signature _____ Date _____ |
| (NAME IN BLOCK LETTERS) _____ |
| Researcher's Signature _____ Date _____ |
| (NAME IN BLOCK LETTERS) _____ |

Appendix M: Staff interview consent form

Consent Form

Project title: Belonging, mental health, and help-seeking at Durham University

Researcher(s): Rosie Harris

Department: Anthropology

Contact details: rosie.f.harris@durham.ac.uk 07966745895

Supervisor name: Nasima Akhter and Jed Stevenson

Supervisor contact details: nasima.akhter@durham.ac.uk and jed.stevenson@durham.ac.uk

This form is to confirm that you understand the purposes of the project, what is involved and that you are happy to take part. Please initial each box to indicate your agreement:

| | |
|---|--|
| I consent to being audio recorded and understand how recordings will be used in research outputs. | |
| I understand that my words may be quoted in publications, reports, and other research outputs. | |

| | |
|--|--|
| I confirm that I have read and understand the information sheet and the privacy notice for the above project. | |
| I have had sufficient time to consider the information and ask any questions I might have, and I am satisfied with the answers I have been given. | |
| I understand who will have access to personal data provided, how the data will be stored and what will happen to the data at the end of the project. | |
| I agree to take part in the above project. | |
| I understand that my participation is voluntary and that I am free to withdraw at any time without giving a reason. | |

| |
|--|
| Participant's Signature _____ Date _____ |
| (NAME IN BLOCK LETTERS) _____ |
| Researcher's Signature _____ Date 11/08/2022 _____ |
| (NAME IN BLOCK LETTERS) _____ ROSIE HARRIS _____ |

Appendix N: Student and staff debriefing sheet

Debriefing Sheet

Project title: Belonging, mental health, and help-seeking at Durham University.

Thank you for taking part in this study. This research aims to understand how students and staff feel about student sense of belonging, mental health, and help-seeking at Durham university, and how these concepts relate to one another. This study will also explore what might be improved.

The data you have provided is automatically anonymised and cannot be traced back to your identity. You have the option to withdraw your data which is further outlined in the privacy notice.

If you would like further information about the study or would like to know the findings when all the data have been collected and analysed, then please contact me on 07966745895, or at rosie.f.harris@durham.ac.uk. I cannot however provide you with your individual results.

If taking part in this study has raised any specific concerns about mental health, sense of belonging, or any other kind of distress, support can be provided through the following:

- Contact your GP.
- Contact the university mental health and counselling service:
<https://www.dur.ac.uk/counselling.service/>
- Contact your college's student support or welfare.
- Listening services:
 - Call Samaritans on 116 123 or email jo@samaritans.org for a reply within 24 hours.
 - Text "SHOUT" to 85258 to contact the Shout Crisis Text Line.
- Useful websites
 - Mind (mental health charity): <https://www.mind.org.uk/>
 - NHS mental health page: <https://www.nhs.uk/mental-health/>

Appendix O: Creating the PCA scales

Belonging

Using the six items included under the belonging domain, a new construct of belonging at university was created using PCA. The correlated variables were reduced to a unidimensional variable reflecting belonging. Firstly, correlations between the items were checked and all variables were significantly correlated to either $p < 0.05$ or $p < 0.01$ level of significance, as indicated below.

All items included under the belonging scale were significantly correlated. Therefore, the items met the requirements for creating a composite score of belonging using correlated items measuring dimensions of belonging.

Correlations between questionnaire items included in the belonging scale

| | | I feel at home in this university | Being at this university is an enriching experience | I have found this department to be welcoming | I am shown respect by members of staff in this department | I wish I'd gone to a different university | Sometimes I feel I don't belong in this university |
|--------------------|---|-----------------------------------|---|--|---|---|--|
| Correlation | I feel at home in this university | 1.00 | | | | | |
| | Being at this university is an enriching experience | 0.52 | 1.00 | | | | |
| | I have found this department to be welcoming | 0.28 | 0.44 | 1.00 | | | |
| | I am shown respect by members of staff in this department | 0.21 | 0.36 | 0.69 | 1.00 | | |
| | I wish I'd gone to a different university | 0.54 | 0.50 | 0.31 | 0.32 | 1.00 | |
| | Sometimes I feel I don't belong in this university | 0.46 | 0.31 | 0.35 | 0.19 | 0.30 | 1.00 |
| P - value | I feel at home in this university | | | | | | |
| | Being at this university is an enriching experience | <0.001 | | | | | |
| | I have found this department to be welcoming | 0.001 | <0.001 | | | | |
| | I am shown respect by members of staff in this department | 0.011 | <0.001 | <0.001 | | | |
| | I wish I'd gone to a different university | <0.001 | <0.001 | <0.001 | <0.001 | | |
| | Sometimes I feel I don't belong in this university | <0.001 | <0.001 | <0.001 | 0.020 | <0.001 | |

The table below shows that each of the 6 items had high factor loadings, with a minimum of 0.60 and a maximum of 0.76.

Components extracted using the PCA as the belonging scale explained 49% of the variability. The constructed scale for belonging had high reliability (Cronbach's alpha = 0.79) and a high sampling adequacy (0.73) for these settings.

Factor loadings for belonging items, scale reliability, and percentage variance

| Variables | Factor loadings |
|--|-----------------|
| I feel at home in this university. | 0.72 |
| Being at this university is an enriching experience. | 0.76 |
| I have found this department to be welcoming. | 0.73 |
| I am shown respect by members of staff in this department. | 0.66 |
| I wish I'd gone to a different university. | 0.72 |
| Sometimes I feel I don't belong in this university. | 0.60 |
| Kaiser-Meyer-Olkin measure of sampling adequacy | 0.73 |
| % variance explained | 49.0 |
| Cronbach's alpha (reliability) | 0.79 |

Help-seeking intentions for university sources

The five items for university help sources in the help-seeking intentions scale were used in PCA to create a new construct of help-seeking for university sources. A unidimensional help-seeking intentions scale was formed by reducing correlated variables. As with the belonging PCA, correlations between the items were checked and all variables were significantly correlated to either $p < 0.05$ or $p < 0.01$ level of significance, as indicated in the following table.

All items included under the help-seeking scale were significantly correlated. This meant the items met the requirements for creating a composite score of help-seeking intentions, using correlated items measuring dimensions of help-seeking intentions for university sources.

Correlations between questionnaire items included in the university source help-seeking intentions scale

| | | University welfare (e.g. college welfare, society welfare) | University staff (college, academic or other) | University Health and Wellbeing Hub | University Counselling and Mental Health Service | Student-run services (e.g. Nightline, Student Minds) |
|-------------|--|--|---|-------------------------------------|--|--|
| Correlation | University welfare (e.g. college welfare, society welfare) | 1.00 | | | | |
| | University staff (college, academic or other) | 0.64 | 1.00 | | | |
| | University Health and Wellbeing Hub | 0.40 | 0.32 | 1.00 | | |
| | University Counselling and Mental Health Service | 0.53 | 0.54 | 0.32 | 1.00 | |
| | Student-run services (e.g. Nightline, Student Minds) | 0.30 | 0.17 | 0.49 | 0.24 | 1.00 |
| P - value | University welfare (e.g. college welfare, society welfare) | | | | | |
| | University staff (college, academic or other) | <0.001 | | | | |
| | University Health and Wellbeing Hub | <0.001 | <0.001 | | | |
| | University Counselling and Mental Health Service | <0.001 | <0.001 | <0.001 | | |
| | Student-run services (e.g. Nightline, Student Minds) | 0.001 | 0.034 | <0.001 | 0.005 | |

The table below shows that all the 5 items had high factor loadings, with a minimum of 0.55 and a maximum of 0.83.

Components extracted using the PCA as the help-seeking intentions scale explained 52% of the variability. The constructed scale for help-seeking intentions for university sources had high reliability (Cronbach's alpha = 0.77) and high sampling adequacy (0.74) for these settings.

Factor loadings for help-seeking intentions university source items, scale reliability, and percentage variance

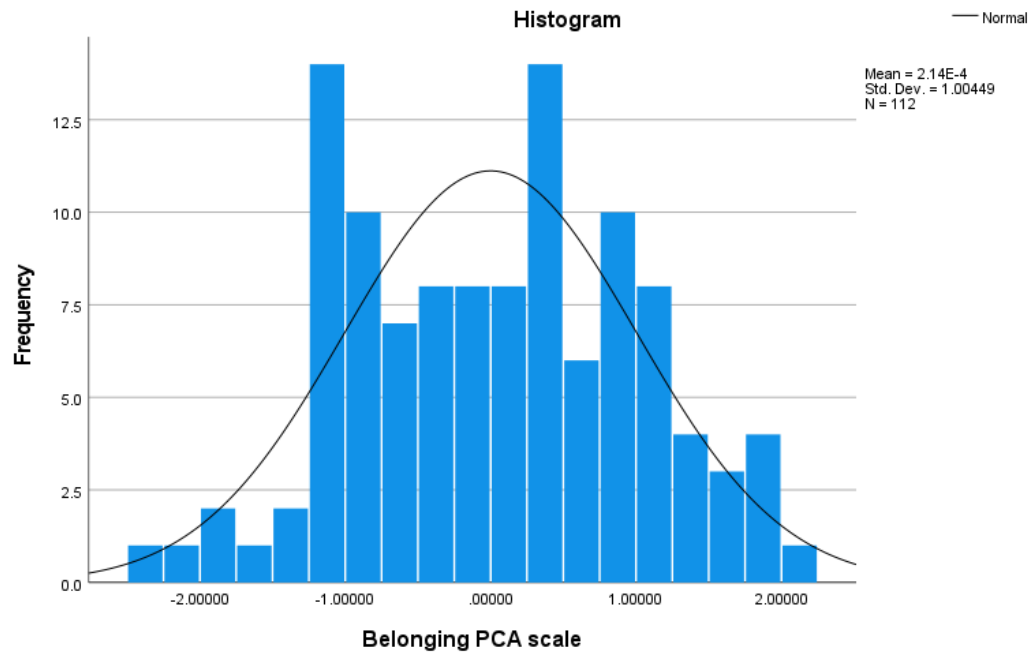
| Variables | Factor loadings |
|--|-----------------|
| University welfare (e.g. college welfare, society welfare) | 0.83 |
| University staff (college, academic or other) | 0.77 |
| University Health and Wellbeing Hub | 0.68 |
| University Counselling and Mental Health Service | 0.75 |
| Student-run services (e.g. Nightline, Student Minds) | 0.55 |
| Kaiser-Meyer-Olkin measure of sampling adequacy | 0.74 |
| % variance explained | 52.3 |
| Cronbach's alpha (reliability) | 0.77 |

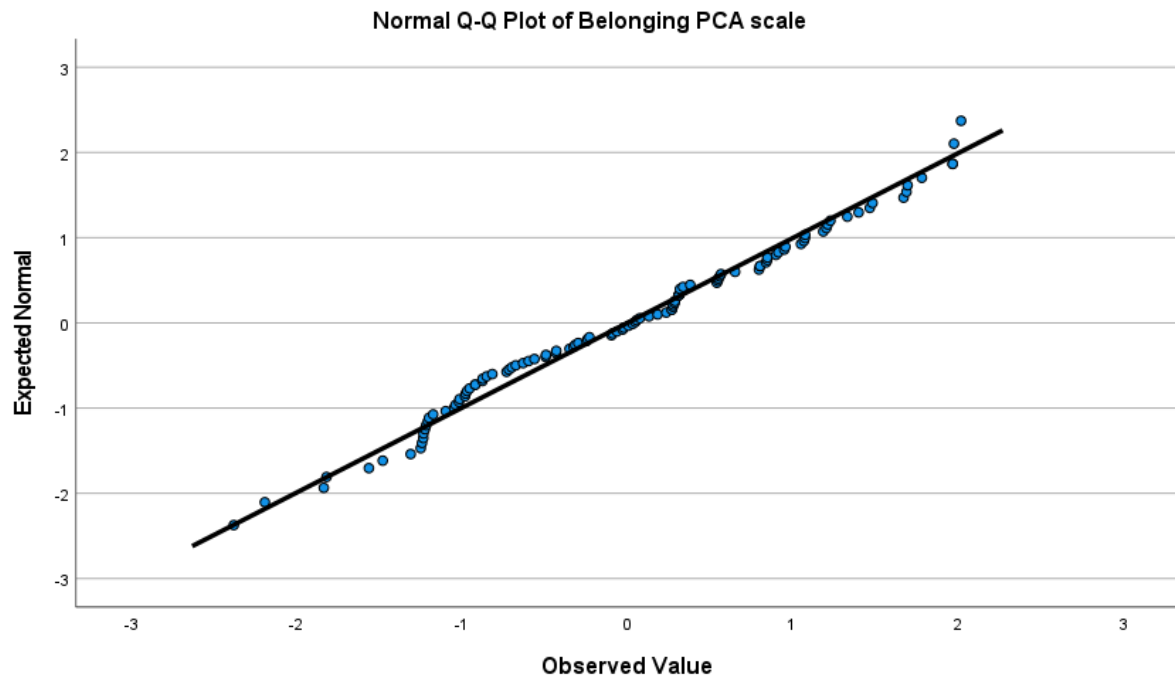
Appendix P: Normality test output, histograms and Q-Q plots for belonging, mental wellbeing, and university source help-seeking intentions scales

Normality test output

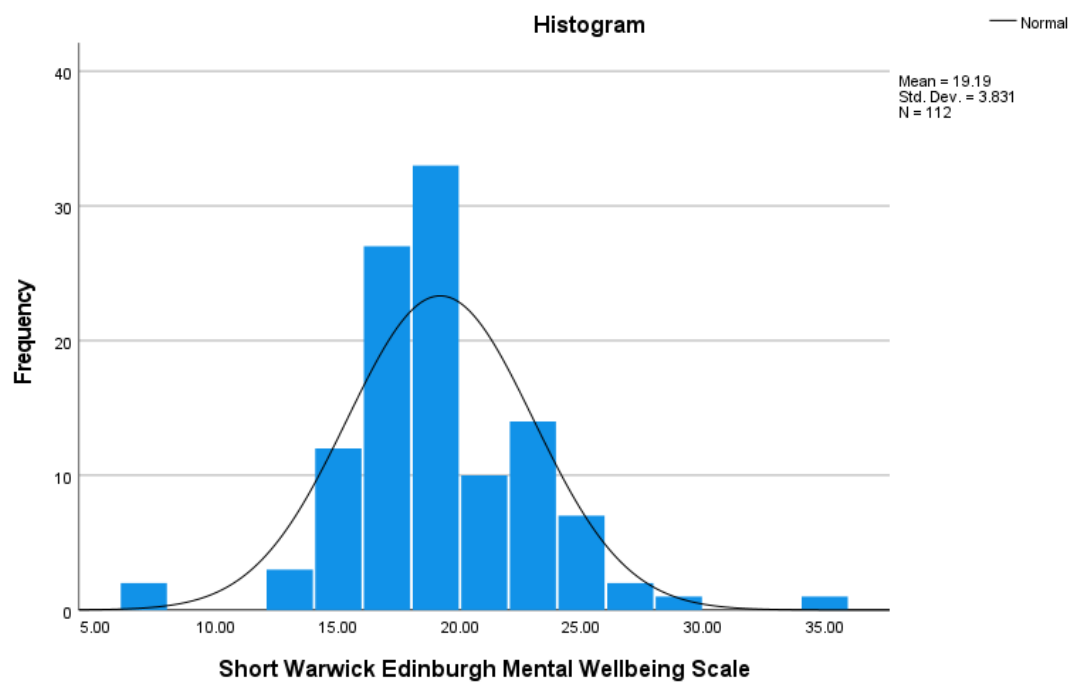
| | Shapiro-Wilk | | |
|---|--------------|-----|-------|
| | Statistic | df | Sig. |
| Belonging scale | .980 | 106 | .120 |
| Short Warwick Edinburgh Mental Wellbeing Scale | .950 | 106 | <.001 |
| Help seeking intentions - University sources | .966 | 106 | .008 |

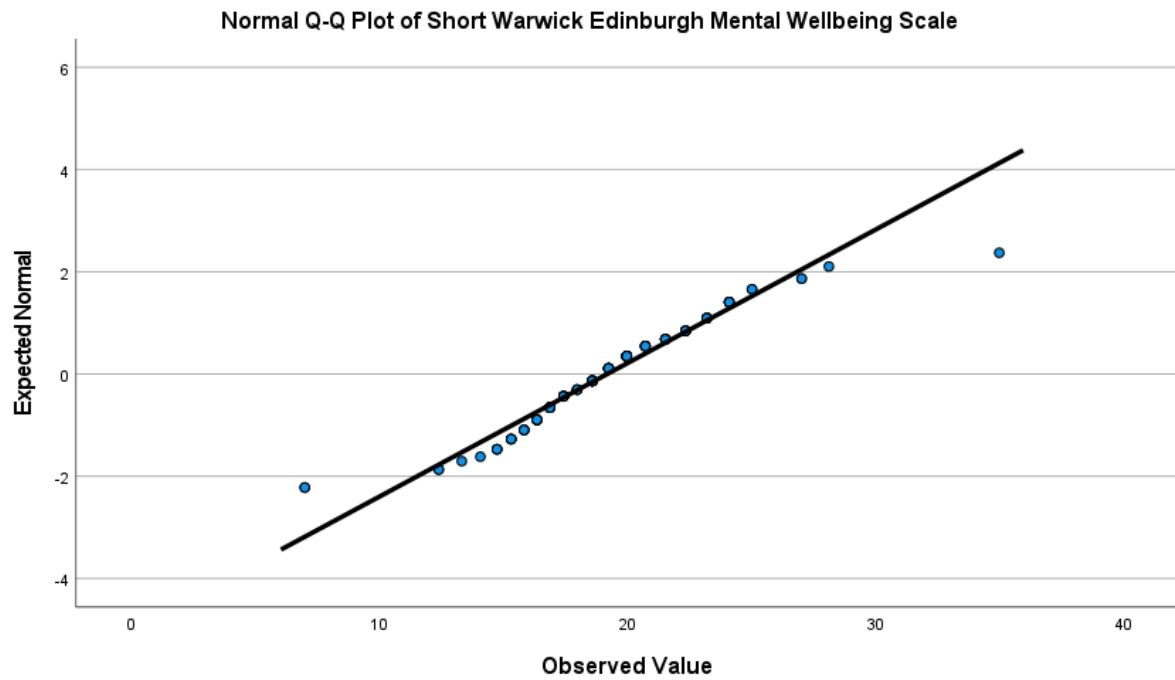
Belonging



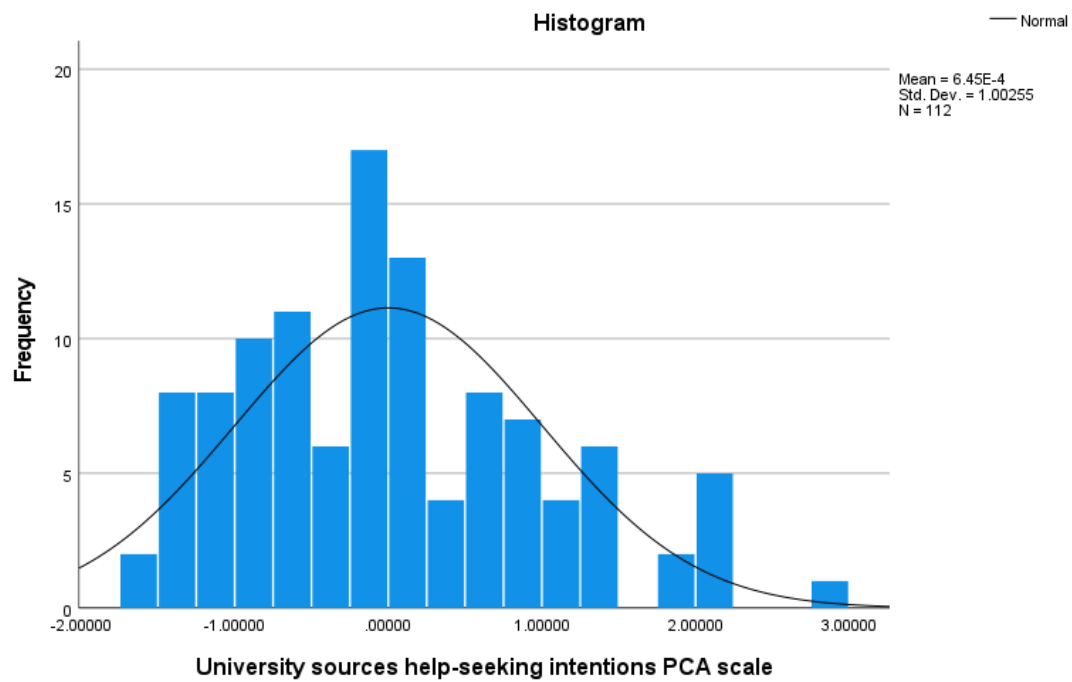


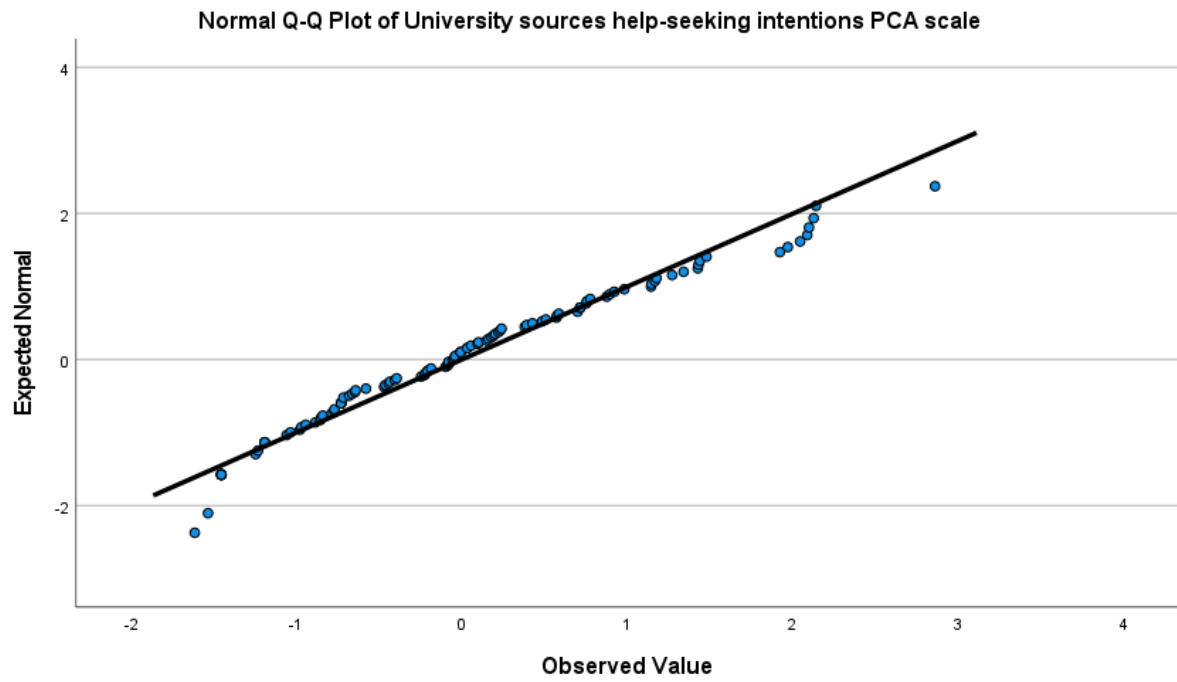
Mental wellbeing





University sources help-seeking intentions





Appendix Q: Multiple regression models not displayed in ‘Quantitative Results’ section

Belonging multiple regression model outputs

Model variables:

1 – Age and gender (base characteristics)

2 – Age, gender, and subjective social status (base characteristics and socioeconomic status)

Model Summary

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | R Square Change | Change Statistics | | | Sig. F Change |
|-------|-------------------|----------|-------------------|----------------------------|-----------------|-------------------|-----|-----|---------------|
| | | | | | | F Change | df1 | df2 | |
| 1 | .253 ^a | .064 | .026 | .98772480 | .064 | 1.705 | 4 | 100 | .155 |
| 2 | .317 ^b | .100 | .055 | .97315018 | .037 | 4.018 | 1 | 99 | .048 |

ANOVA

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|-----|-------------|-------|-------------------|
| 1 | Regression | 6.655 | 4 | 1.664 | 1.705 | .155 ^b |
| | Residual | 97.560 | 100 | .976 | | |
| | Total | 104.215 | 104 | | | |
| 2 | Regression | 10.460 | 5 | 2.092 | 2.209 | .059 ^c |
| | Residual | 93.755 | 99 | .947 | | |
| | Total | 104.215 | 104 | | | |

Coefficients

| Model | | Unstandardized Coefficients | | Standardized Coefficients | t | Sig. | 95.0% Confidence Interval for B | | Collinearity Statistics | |
|-------|-------------------------------|-----------------------------|------------|---------------------------|--------|------|---------------------------------|-------------|-------------------------|-------|
| | | B | Std. Error | | | | Lower Bound | Upper Bound | Tolerance | VIF |
| 1 | (Constant) | -.125 | .409 | | -.305 | .761 | -.935 | .686 | | |
| | age_recoded1=18-19 | .311 | .323 | .140 | .962 | .338 | -.330 | .953 | .444 | 2.251 |
| | age_recoded1=20-21 | .203 | .305 | .100 | .665 | .508 | -.403 | .809 | .415 | 2.408 |
| | age_recoded1=22-23 | .772 | .345 | .304 | 2.238 | .027 | .088 | 1.456 | .507 | 1.973 |
| | What is your gender identity? | -.160 | .243 | -.064 | -.658 | .512 | -.641 | .322 | .987 | 1.013 |
| 2 | (Constant) | -.777 | .518 | | -1.500 | .137 | -1.804 | .250 | | |
| | age_recoded1=18-19 | .350 | .319 | .157 | 1.095 | .276 | -.284 | .983 | .443 | 2.259 |
| | age_recoded1=20-21 | .188 | .301 | .092 | .624 | .534 | -.409 | .785 | .415 | 2.409 |
| | age_recoded1=22-23 | .800 | .340 | .316 | 2.354 | .021 | .126 | 1.475 | .506 | 1.977 |
| | What is your gender identity? | -.190 | .240 | -.076 | -.794 | .429 | -.666 | .285 | .983 | 1.018 |
| | MacArthur scale | .110 | .055 | .193 | 2.004 | .048 | .001 | .219 | .980 | 1.021 |

Mental wellbeing multiple regression model outputs (including outlier)

Model variables:

1 – Age and gender (base characteristics)

2 – Age, gender, and belonging (base characteristics and conceptual scale)

3 – Age, gender, belonging, disability/learning difficulty, ethnic group (base characteristics, conceptual scale, and disadvantaging characteristics)

4 - Age, gender, belonging, disability/learning difficulty, ethnic group, and ‘ever sought help from university sources’ (base characteristics, conceptual scale, disadvantaging characteristics, and whether sought help from university sources)

5 - Age, gender, belonging, disability/learning difficulty, ethnic group, ‘ever sought help from university sources,’ parent/guardian qualifications, and subjective social status (base characteristics, conceptual scale, disadvantaging characteristics, whether sought help from university sources, and socioeconomic status)

6 - Age, gender, belonging, disability/learning difficulty, ethnic group, ‘ever sought help from university sources,’ parent/guardian qualifications, subjective social status, and level of study (base characteristics, conceptual scale, disadvantaging characteristics, whether sought help from university sources, socioeconomic status, and administrative characteristic)

Model Summary

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | R Square Change | Change Statistics | | | Sig. F Change |
|-------|-------------------|----------|-------------------|----------------------------|-----------------|-------------------|-----|-----|---------------|
| | | | | | | F Change | df1 | df2 | |
| 1 | .282 ^a | .079 | .038 | 3.65152 | .079 | 1.917 | 4 | 89 | .114 |
| 2 | .423 ^b | .179 | .132 | 3.46810 | .100 | 10.663 | 1 | 88 | .002 |
| 3 | .555 ^c | .308 | .252 | 3.21985 | .129 | 8.046 | 2 | 86 | <.001 |
| 4 | .562 ^d | .316 | .252 | 3.22047 | .008 | .967 | 1 | 85 | .328 |
| 5 | .577 ^e | .333 | .252 | 3.21901 | .017 | 1.038 | 2 | 83 | .359 |
| 6 | .596 ^f | .356 | .269 | 3.18223 | .023 | 2.930 | 1 | 82 | .091 |

ANOVA

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|-------|--------------------|
| 1 | Regression | 102.258 | 4 | 25.564 | 1.917 | .114 ^b |
| | Residual | 1186.693 | 89 | 13.334 | | |
| | Total | 1288.951 | 93 | | | |
| 2 | Regression | 230.509 | 5 | 46.102 | 3.833 | .003 ^c |
| | Residual | 1058.441 | 88 | 12.028 | | |
| | Total | 1288.951 | 93 | | | |
| 3 | Regression | 397.351 | 7 | 56.764 | 5.475 | <.001 ^d |
| | Residual | 891.600 | 86 | 10.367 | | |
| | Total | 1288.951 | 93 | | | |
| 4 | Regression | 407.381 | 8 | 50.923 | 4.910 | <.001 ^e |
| | Residual | 881.569 | 85 | 10.371 | | |
| | Total | 1288.951 | 93 | | | |

Mental wellbeing multiple regression model ANOVA with outlier (continued)

| | | | | | | |
|---|------------|----------|----|--------|-------|--------------------|
| 5 | Regression | 428.901 | 10 | 42.890 | 4.139 | <.001 ^f |
| | Residual | 860.049 | 83 | 10.362 | | |
| | Total | 1288.951 | 93 | | | |
| 6 | Regression | 458.570 | 11 | 41.688 | 4.117 | <.001 ^g |
| | Residual | 830.380 | 82 | 10.127 | | |
| | Total | 1288.951 | 93 | | | |

| | | Coefficients | | | | | | | | |
|-------|--|-----------------------------|------------|---------------------------|--------|-------|---------------------------------|-------------|-------------------------|-------|
| | | Unstandardized Coefficients | | Standardized Coefficients | | | 95.0% Confidence Interval for B | | Collinearity Statistics | |
| Model | | B | Std. Error | Beta | t | Sig. | Lower Bound | Upper Bound | Tolerance | VIF |
| 1 | (Constant) | 19.714 | 1.561 | | 12.628 | <.001 | 16.612 | 22.816 | | |
| | What is your gender identity? | -.080 | .965 | -.008 | -.082 | .934 | -1.998 | 1.839 | .983 | 1.017 |
| | age_recoded1=18-19 | -1.852 | 1.238 | -.226 | -1.496 | .138 | -4.312 | .608 | .452 | 2.212 |
| | age_recoded1=20-21 | .117 | 1.182 | .015 | .099 | .921 | -2.230 | 2.465 | .430 | 2.326 |
| | age_recoded1=22-23 | 1.000 | 1.329 | .106 | .752 | .454 | -1.641 | 3.641 | .519 | 1.928 |
| 2 | (Constant) | 19.843 | 1.483 | | 13.377 | <.001 | 16.895 | 22.790 | | |
| | What is your gender identity? | .091 | .918 | .010 | .099 | .921 | -1.734 | 1.916 | .980 | 1.020 |
| | age_recoded1=18-19 | -2.112 | 1.179 | -.258 | -1.792 | .077 | -4.455 | .230 | .450 | 2.223 |
| | age_recoded1=20-21 | -.047 | 1.123 | -.006 | -.042 | .967 | -2.279 | 2.186 | .429 | 2.330 |
| | age_recoded1=22-23 | .177 | 1.287 | .019 | .138 | .891 | -2.381 | 2.735 | .499 | 2.005 |
| | Belonging PCA scale | 1.175 | .360 | .324 | 3.265 | .002 | .460 | 1.890 | .947 | 1.056 |
| 3 | (Constant) | 13.208 | 2.891 | | 4.569 | <.001 | 7.461 | 18.955 | | |
| | What is your gender identity? | .404 | .861 | .043 | .470 | .640 | -1.307 | 2.116 | .961 | 1.041 |
| | age_recoded1=18-19 | -2.228 | 1.097 | -.272 | -2.032 | .045 | -4.408 | -.048 | .448 | 2.232 |
| | age_recoded1=20-21 | -.097 | 1.059 | -.013 | -.092 | .927 | -2.202 | 2.008 | .416 | 2.402 |
| | age_recoded1=22-23 | -.035 | 1.217 | -.004 | -.029 | .977 | -2.453 | 2.383 | .481 | 2.077 |
| | Belonging PCA scale | 1.114 | .336 | .307 | 3.312 | .001 | .445 | 1.783 | .934 | 1.071 |
| | What is your ethnic group? | .167 | .956 | .017 | .175 | .861 | -1.733 | 2.067 | .900 | 1.111 |
| | Do you have a disability or learning difficulty? | 3.362 | .845 | .365 | 3.979 | <.001 | 1.682 | 5.041 | .958 | 1.044 |
| 4 | (Constant) | 12.347 | 3.021 | | 4.087 | <.001 | 6.341 | 18.354 | | |
| | What is your gender identity? | .317 | .866 | .034 | .366 | .715 | -1.404 | 2.038 | .951 | 1.052 |
| | age_recoded1=18-19 | -1.951 | 1.132 | -.238 | -1.723 | .088 | -4.203 | .300 | .420 | 2.379 |
| | age_recoded1=20-21 | .046 | 1.069 | .006 | .043 | .966 | -2.080 | 2.171 | .409 | 2.448 |
| | age_recoded1=22-23 | .143 | 1.230 | .015 | .116 | .908 | -2.303 | 2.589 | .471 | 2.124 |

Mental wellbeing multiple regression model coefficients with outlier (continued)

| | | | | | | | | | | |
|---|--|--------|-------|-------|--------|-------|--------|--------|------|-------|
| | Belonging PCA scale | 1.099 | .337 | .303 | 3.263 | .002 | .429 | 1.769 | .932 | 1.073 |
| | What is your ethnic group? | .251 | .960 | .025 | .262 | .794 | -1.657 | 2.159 | .893 | 1.119 |
| | Do you have a disability or learning difficulty? | 3.148 | .873 | .341 | 3.608 | <.001 | 1.413 | 4.883 | .899 | 1.113 |
| | Ever sought help from university sources | .709 | .721 | .095 | .983 | .328 | -.725 | 2.143 | .858 | 1.165 |
| 5 | (Constant) | 13.890 | 3.367 | | 4.126 | <.001 | 7.194 | 20.587 | | |
| | What is your gender identity? | .272 | .869 | .029 | .313 | .755 | -1.455 | 2.000 | .944 | 1.060 |
| | age_recoded1=18-19 | -1.706 | 1.145 | -.208 | -1.490 | .140 | -3.982 | .571 | .411 | 2.433 |
| | age_recoded1=20-21 | .037 | 1.069 | .005 | .034 | .973 | -2.089 | 2.162 | .409 | 2.448 |
| | age_recoded1=22-23 | .271 | 1.234 | .029 | .220 | .827 | -2.183 | 2.725 | .468 | 2.138 |
| | Belonging PCA scale | 1.107 | .340 | .305 | 3.252 | .002 | .430 | 1.784 | .912 | 1.097 |
| | What is your ethnic group? | .259 | .964 | .026 | .269 | .789 | -1.658 | 2.176 | .885 | 1.130 |
| | Do you have a disability or learning difficulty? | 3.144 | .876 | .341 | 3.590 | <.001 | 1.402 | 4.886 | .891 | 1.122 |
| | Ever sought help from university sources | .590 | .742 | .079 | .795 | .429 | -.886 | 2.066 | .810 | 1.234 |
| | MacArthur scale | -.001 | .216 | .000 | -.003 | .998 | -.431 | .429 | .793 | 1.261 |
| | What is the highest level of qualifications achieved by either of your parent(s) or guardian(s) by the time you were 18? | -1.045 | .765 | -.135 | -1.366 | .176 | -2.567 | .477 | .826 | 1.210 |
| 6 | (Constant) | 8.309 | 4.659 | | 1.783 | .078 | -.960 | 17.578 | | |
| | What is your gender identity? | .623 | .883 | .066 | .706 | .482 | -1.133 | 2.380 | .893 | 1.120 |
| | age_recoded1=18-19 | 1.008 | 1.948 | .123 | .517 | .606 | -2.867 | 4.882 | .139 | 7.208 |
| | age_recoded1=20-21 | 2.766 | 1.913 | .363 | 1.446 | .152 | -1.039 | 6.572 | .125 | 8.026 |
| | age_recoded1=22-23 | 1.841 | 1.526 | .196 | 1.206 | .231 | -1.195 | 4.876 | .299 | 3.347 |
| | Belonging PCA scale | 1.195 | .340 | .330 | 3.511 | <.001 | .518 | 1.872 | .891 | 1.123 |
| | What is your ethnic group? | .361 | .955 | .036 | .379 | .706 | -1.538 | 2.260 | .881 | 1.135 |
| | Do you have a disability or learning difficulty? | 3.043 | .868 | .330 | 3.506 | <.001 | 1.316 | 4.769 | .887 | 1.127 |
| | Ever sought help from university sources | .374 | .744 | .050 | .502 | .617 | -1.107 | 1.854 | .787 | 1.271 |
| | MacArthur scale | -.022 | .214 | -.010 | -.104 | .918 | -.448 | .404 | .790 | 1.266 |
| | What is the highest level of qualifications achieved by either of your parent(s) or guardian(s) by the time you were 18? | -.992 | .757 | -.128 | -1.310 | .194 | -2.498 | .514 | .825 | 1.212 |
| | What is your level of study? | 2.809 | 1.641 | .310 | 1.712 | .091 | -.456 | 6.074 | .239 | 4.187 |

Mental wellbeing multiple regression model outputs (excluding outlier)**Model variables:**

- 1 – Age and gender (base characteristics)
- 2 – Age, gender, and belonging (base characteristics and conceptual scale)
- 3 – Age, gender, belonging, disability/learning difficulty, ethnic group (base characteristics, conceptual scale, and disadvantaging characteristics)
- 4 – Age, gender, belonging, disability/learning difficulty, ethnic group, and ‘ever sought help from university sources’ (base characteristics, conceptual scale, disadvantaging characteristics, and whether sought help from university sources)

5 - Age, gender, belonging, disability/learning difficulty, ethnic group, 'ever sought help from university sources,' parent/guardian qualifications, and subjective social status (base characteristics, conceptual scale, disadvantaging characteristics, whether sought help from university sources, and socioeconomic status)

6 - Age, gender, belonging, disability/learning difficulty, ethnic group, 'ever sought help from university sources,' parent/guardian qualifications, subjective social status, and level of study (base characteristics, conceptual scale, disadvantaging characteristics, whether sought help from university sources, socioeconomic status, and administrative characteristic)

Model Summary

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | R Square Change | Change Statistics | | | |
|-------|-------------------|----------|-------------------|----------------------------|-----------------|-------------------|-----|-----|---------------|
| | | | | | | F Change | df1 | df2 | Sig. F Change |
| 1 | .301 ^a | .090 | .051 | 3.21778 | .090 | 2.313 | 4 | 93 | .063 |
| 2 | .386 ^b | .149 | .103 | 3.12896 | .059 | 6.355 | 1 | 92 | .013 |
| 3 | .539 ^c | .291 | .236 | 2.88845 | .142 | 8.979 | 2 | 90 | <.001 |

ANOVA

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|-------|--------------------|
| 1 | Regression | 95.778 | 4 | 23.945 | 2.313 | .063 ^b |
| | Residual | 962.931 | 93 | 10.354 | | |
| | Total | 1058.710 | 97 | | | |
| 2 | Regression | 157.995 | 5 | 31.599 | 3.228 | .010 ^c |
| | Residual | 900.714 | 92 | 9.790 | | |
| | Total | 1058.710 | 97 | | | |
| 3 | Regression | 307.827 | 7 | 43.975 | 5.271 | <.001 ^d |
| | Residual | 750.883 | 90 | 8.343 | | |
| | Total | 1058.710 | 97 | | | |

Coefficients

| Model | | Unstandardized Coefficients | | Standardized Coefficients | t | Sig. | 95.0% Confidence Interval for B | | Collinearity Statistics | |
|-------|-------------------------------|-----------------------------|------------|---------------------------|--------|-------|---------------------------------|-------------|-------------------------|-------|
| | | B | Std. Error | Beta | | | Lower Bound | Upper Bound | Tolerance | VIF |
| 1 | (Constant) | 19.457 | 1.357 | | 14.343 | <.001 | 16.763 | 22.151 | | |
| | age_recoded1=18-19 | -1.990 | 1.069 | -.270 | -1.861 | .066 | -4.113 | .133 | .463 | 2.160 |
| | age_recoded1=20-21 | -.545 | 1.007 | -.081 | -.541 | .590 | -2.544 | 1.455 | .439 | 2.278 |
| | age_recoded1=22-23 | .754 | 1.135 | .091 | .664 | .508 | -1.500 | 3.008 | .525 | 1.906 |
| | What is your gender identity? | .276 | .816 | .034 | .338 | .736 | -1.345 | 1.896 | .977 | 1.024 |
| 2 | (Constant) | 19.614 | 1.321 | | 14.852 | <.001 | 16.991 | 22.237 | | |
| | age_recoded1=18-19 | -2.208 | 1.043 | -.300 | -2.116 | .037 | -4.280 | -.136 | .460 | 2.175 |

Mental wellbeing multiple regression model coefficients without outlier (continued)

| | | | | | | | | | | |
|---|--|--------|-------|-------|--------|-------|--------|--------|------|-------|
| | age_recoded1=20-21 | -.669 | .980 | -.099 | -.683 | .496 | -2.616 | 1.278 | .438 | 2.283 |
| | age_recoded1=22-23 | .160 | 1.129 | .019 | .142 | .888 | -2.081 | 2.401 | .502 | 1.993 |
| | What is your gender identity? | .368 | .794 | .045 | .463 | .645 | -1.210 | 1.945 | .975 | 1.026 |
| | Belonging PCA scale | .834 | .331 | .250 | 2.521 | .013 | .177 | 1.491 | .941 | 1.062 |
| 3 | (Constant) | 13.275 | 2.489 | | 5.333 | <.001 | 8.330 | 18.220 | | |
| | age_recoded1=18-19 | -2.285 | .967 | -.311 | -2.364 | .020 | -4.206 | -.364 | .456 | 2.192 |
| | age_recoded1=20-21 | -.712 | .914 | -.106 | -.779 | .438 | -2.528 | 1.103 | .429 | 2.328 |
| | age_recoded1=22-23 | .120 | 1.063 | .014 | .113 | .911 | -1.993 | 2.232 | .482 | 2.076 |
| | What is your gender identity? | .570 | .742 | .070 | .768 | .445 | -.905 | 2.044 | .952 | 1.051 |
| | Belonging PCA scale | .770 | .307 | .231 | 2.511 | .014 | .161 | 1.380 | .934 | 1.071 |
| | Do you have a disability or learning difficulty? | 3.121 | .741 | .383 | 4.210 | <.001 | 1.648 | 4.593 | .954 | 1.048 |
| | What is your ethnic group? | .295 | .782 | .035 | .377 | .707 | -1.259 | 1.850 | .890 | 1.124 |

University source help-seeking intentions multiple regression model outputs

Model variables:

1 – Age and gender

2 – Age, gender, and belonging

3 – Age, gender, belonging, disability/learning difficulty, and LGBTQ+

4 - Age, gender, belonging, disability/learning difficulty, LGBTQ+, and ‘ever sought help from university sources’

Model Summary

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | R Square Change | Change Statistics | | | Sig. F Change |
|-------|-------------------|----------|-------------------|----------------------------|-----------------|-------------------|-----|-----|---------------|
| | | | | | | F Change | df1 | df2 | |
| 1 | .155 ^a | .024 | -.023 | 1.02838888 | .024 | .514 | 4 | 83 | .726 |
| 2 | .273 ^b | .075 | .018 | 1.00751832 | .050 | 4.474 | 1 | 82 | .037 |
| 3 | .356 ^c | .127 | .050 | .99100029 | .052 | 2.378 | 2 | 80 | .099 |
| 4 | .373 ^d | .139 | .052 | .98997823 | .013 | 1.165 | 1 | 79 | .284 |

ANOVA

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|------|-------------------|
| 1 | Regression | 2.175 | 4 | .544 | .514 | .726 ^b |
| | Residual | 87.779 | 83 | 1.058 | | |
| | Total | 89.954 | 87 | | | |

University source help-seeking intentions multiple regression model ANOVA with outlier (continued)

| | | | | | | |
|---|------------|--------|----|-------|-------|-------------------|
| 2 | Regression | 6.717 | 5 | 1.343 | 1.323 | .262 ^c |
| | Residual | 83.238 | 82 | 1.015 | | |
| | Total | 89.954 | 87 | | | |
| 3 | Regression | 11.388 | 7 | 1.627 | 1.657 | .132 ^d |
| | Residual | 78.567 | 80 | .982 | | |
| | Total | 89.954 | 87 | | | |
| 4 | Regression | 12.530 | 8 | 1.566 | 1.598 | .139 ^e |
| | Residual | 77.424 | 79 | .980 | | |
| | Total | 89.954 | 87 | | | |

| | | Coefficients | | | | | | | | |
|-------|--|-----------------------------|------------|---------------------------|--------|------|---------------------------------|-------------|-------------------------|-------|
| | | Unstandardized Coefficients | | Standardized Coefficients | | | 95.0% Confidence Interval for B | | Collinearity Statistics | |
| Model | | B | Std. Error | Beta | t | Sig. | Lower Bound | Upper Bound | Tolerance | VIF |
| 1 | (Constant) | -.197 | .488 | | -.404 | .687 | -1.167 | .773 | | |
| | age_recoded1=18-19 | .432 | .380 | .190 | 1.136 | .259 | -.324 | 1.188 | .419 | 2.386 |
| | age_recoded1=20-21 | .158 | .358 | .077 | .441 | .660 | -.555 | .871 | .391 | 2.559 |
| | age_recoded1=22-23 | .350 | .396 | .140 | .885 | .379 | -.437 | 1.137 | .472 | 2.118 |
| | What is your gender identity? | -.082 | .276 | -.033 | -.297 | .767 | -.631 | .467 | .970 | 1.031 |
| 2 | (Constant) | -.218 | .478 | | -.457 | .649 | -1.169 | .732 | | |
| | age_recoded1=18-19 | .396 | .373 | .174 | 1.061 | .292 | -.346 | 1.138 | .418 | 2.391 |
| | age_recoded1=20-21 | .129 | .351 | .063 | .369 | .713 | -.569 | .828 | .390 | 2.563 |
| | age_recoded1=22-23 | .215 | .393 | .086 | .547 | .586 | -.567 | .996 | .460 | 2.175 |
| | What is your gender identity? | -.028 | .272 | -.011 | -.105 | .917 | -.569 | .512 | .961 | 1.041 |
| | Belonging PCA scale | .226 | .107 | .230 | 2.115 | .037 | .013 | .438 | .953 | 1.049 |
| 3 | (Constant) | 1.198 | .802 | | 1.493 | .139 | -.398 | 2.794 | | |
| | age_recoded1=18-19 | .313 | .372 | .138 | .841 | .403 | -.428 | 1.054 | .406 | 2.466 |
| | age_recoded1=20-21 | .019 | .359 | .009 | .054 | .957 | -.695 | .734 | .361 | 2.767 |
| | age_recoded1=22-23 | .091 | .395 | .036 | .231 | .818 | -.694 | .877 | .440 | 2.271 |
| | What is your gender identity? | -.061 | .268 | -.024 | -.226 | .822 | -.594 | .472 | .956 | 1.046 |
| | Belonging PCA scale | .223 | .105 | .227 | 2.119 | .037 | .014 | .432 | .951 | 1.052 |
| | Do you have a disability or learning difficulty? | -.451 | .285 | -.168 | -1.582 | .118 | -1.018 | .116 | .972 | 1.029 |
| | Do you identify as being part of the LGBTQ+ community? | -.290 | .225 | -.141 | -1.289 | .201 | -.738 | .158 | .912 | 1.097 |

University source help-seeking intentions multiple regression model coefficients with outlier
(continued)

| | | | | | | | | | | |
|---|--|-------|------|-------|--------|------|-------|-------|------|-------|
| 4 | (Constant) | 1.453 | .835 | | 1.739 | .086 | -.210 | 3.116 | | |
| | age_recoded1=18-19 | .197 | .387 | .087 | .508 | .613 | -.574 | .968 | .374 | 2.672 |
| | age_recoded1=20-21 | -.049 | .364 | -.024 | -.135 | .893 | -.774 | .676 | .350 | 2.854 |
| | age_recoded1=22-23 | .000 | .403 | .000 | -.001 | .999 | -.803 | .802 | .421 | 2.376 |
| | What is your gender identity? | -.023 | .270 | -.009 | -.083 | .934 | -.560 | .515 | .940 | 1.064 |
| | Belonging PCA scale | .225 | .105 | .229 | 2.137 | .036 | .015 | .434 | .951 | 1.052 |
| | Do you have a disability or learning difficulty? | -.396 | .289 | -.147 | -1.368 | .175 | -.971 | .180 | .942 | 1.062 |
| | Do you identify as being part of the LGBTQ+ community? | -.266 | .226 | -.130 | -1.179 | .242 | -.716 | .183 | .903 | 1.107 |
| | Ever sought help from university sources | -.249 | .230 | -.122 | -1.079 | .284 | -.707 | .210 | .847 | 1.180 |

**Appendix R: Multiple regression outputs informing assumptions for mental wellbeing
model 3 (outlier excluded)**

| Model Summary | | | | | | | | | | |
|---------------|-------|----------|-------------------|----------------------------|-------------------|----------|-----|-----|---------------|---------------|
| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate | Change Statistics | | | | | Durbin-Watson |
| | | | | | R Square Change | F Change | df1 | df2 | Sig. F Change | |
| 1 | .301a | .090 | .051 | 3.21778 | .090 | 2.313 | 4 | 93 | .063 | |
| 2 | .386b | .149 | .103 | 3.12896 | .059 | 6.355 | 1 | 92 | .013 | |
| 3 | .539c | .291 | .236 | 2.88845 | .142 | 8.979 | 2 | 90 | <.001 | 2.293 |

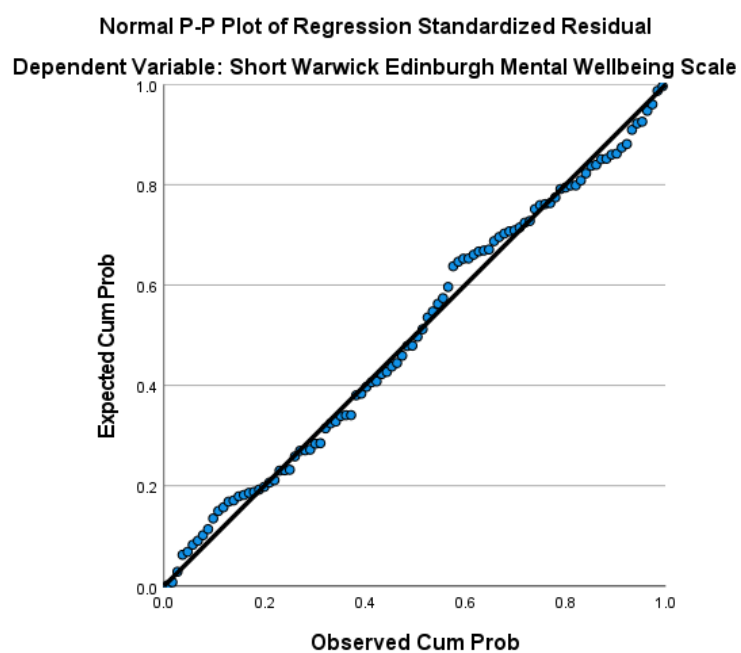
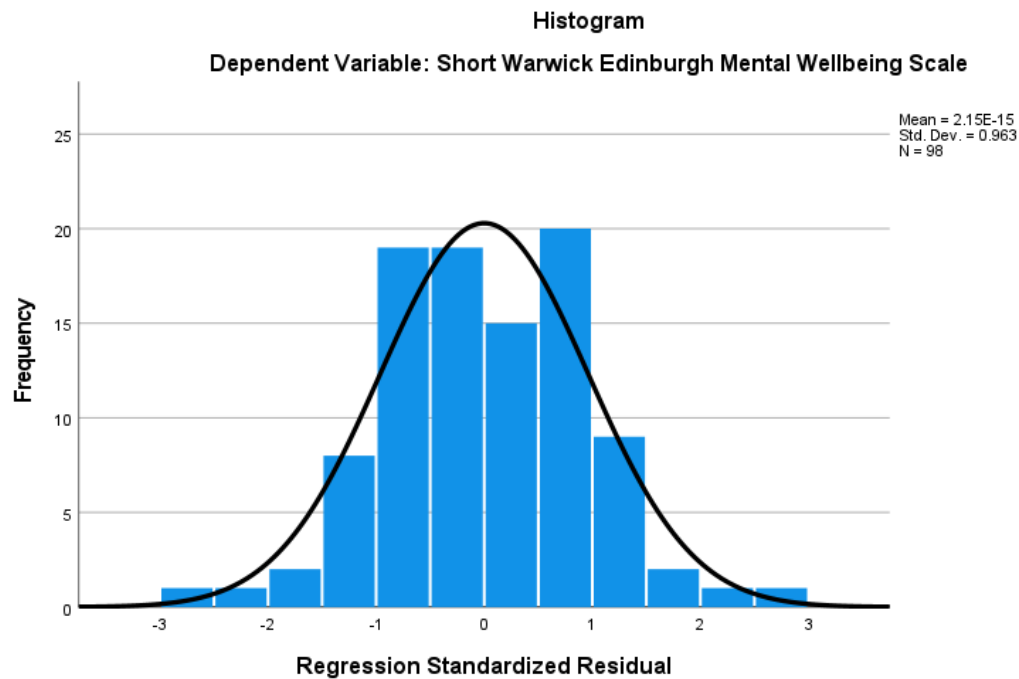
| Collinearity Diagnostics | | | | | | | | | | | |
|--------------------------|-----------|------------|-----------------|----------------------|---------------------|---------------------|---------------------|-------------------------------|---------------------|----------------------------|--|
| Model | Dimension | Eigenvalue | Condition Index | Variance Proportions | | | | | | | Do you have a disability or learning difficulty? |
| | | | | (Constant) | age_recoded 1=18-19 | age_recoded 1=20-21 | age_recoded 1=22-23 | What is your gender identity? | Belonging PCA scale | What is your ethnic group? | |
| 1 | 1 | 2.829 | 1.000 | .01 | .01 | .01 | .01 | .01 | | | |
| | 2 | 1.001 | 1.681 | .00 | .23 | .08 | .01 | .00 | | | |
| | 3 | 1.000 | 1.682 | .00 | .01 | .06 | .31 | .00 | | | |
| | 4 | .133 | 4.613 | .01 | .42 | .56 | .43 | .30 | | | |
| | 5 | .037 | 8.702 | .99 | .34 | .28 | .24 | .69 | | | |
| 2 | 1 | 2.832 | 1.000 | .01 | .01 | .01 | .01 | .01 | .00 | | |
| | 2 | 1.207 | 1.532 | .00 | .00 | .02 | .13 | .00 | .39 | | |
| | 3 | 1.001 | 1.682 | .00 | .23 | .07 | .02 | .00 | .00 | | |
| | 4 | .792 | 1.891 | .00 | .00 | .05 | .17 | .00 | .59 | | |
| | 5 | .130 | 4.658 | .01 | .42 | .55 | .44 | .31 | .02 | | |
| | 6 | .037 | 8.712 | .99 | .34 | .28 | .23 | .68 | .00 | | |
| 3 | 1 | 4.723 | 1.000 | .00 | .00 | .00 | .00 | .00 | .00 | .00 | .00 |
| | 2 | 1.209 | 1.977 | .00 | .00 | .03 | .12 | .00 | .38 | .00 | .00 |
| | 3 | 1.001 | 2.172 | .00 | .22 | .07 | .02 | .00 | .00 | .00 | .00 |
| | 4 | .792 | 2.442 | .00 | .00 | .05 | .16 | .00 | .59 | .00 | .00 |
| | 5 | .132 | 5.980 | .00 | .45 | .58 | .45 | .25 | .02 | .01 | .00 |
| | 6 | .078 | 7.770 | .01 | .27 | .22 | .19 | .53 | .00 | .13 | .07 |
| | 7 | .053 | 9.401 | .00 | .02 | .04 | .05 | .00 | .00 | .38 | .40 |
| | 8 | .010 | 21.489 | .99 | .03 | .01 | .00 | .21 | .01 | .48 | .53 |

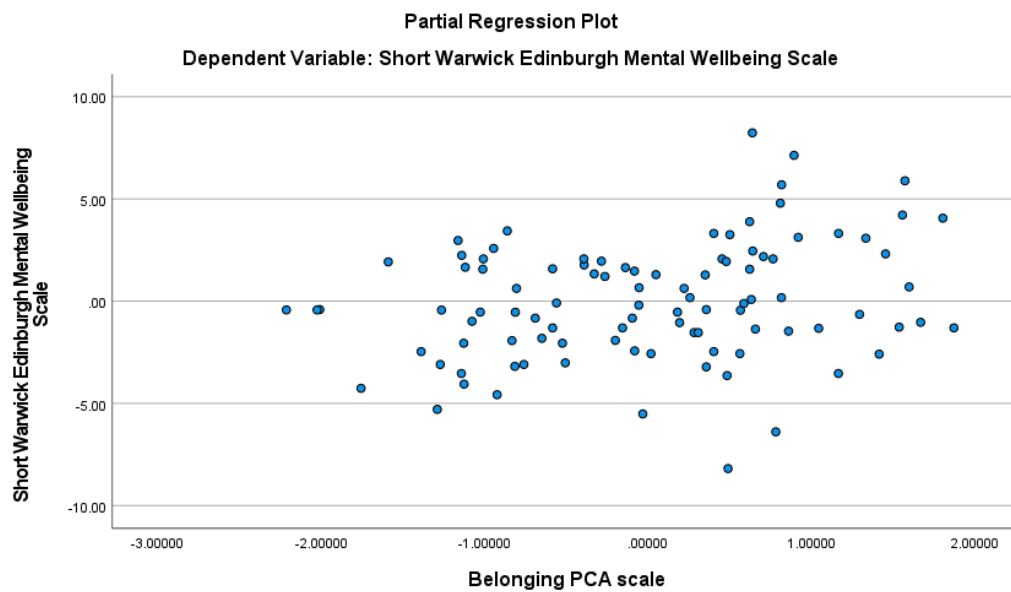
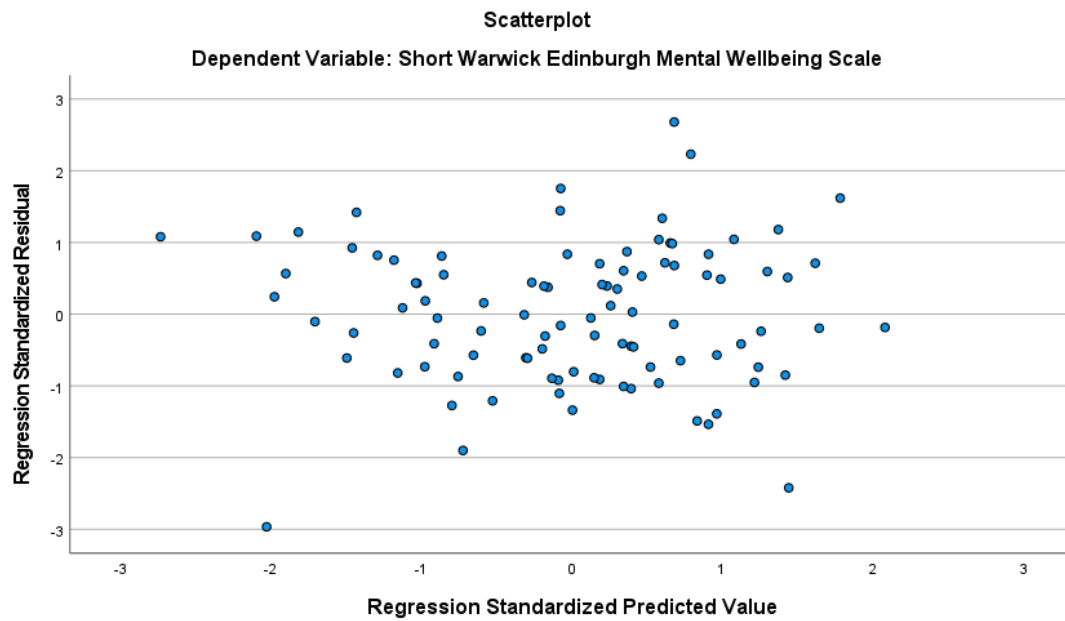
| Casewise Diagnostics | | | | |
|----------------------|---------------|--|-----------------|----------|
| Case Number | Std. Residual | Short Warwick Edinburgh Mental Wellbeing Scale | Predicted Value | Residual |
| | | | | |
| 6 | 2.232 | 27.03 | 20.5831 | 6.44689 |
| 8 | -2.965 | 7.00 | 15.5639 | -8.56394 |
| 45 | -2.421 | 14.75 | 21.7425 | -6.99254 |
| 51 | 2.681 | 28.13 | 20.3867 | 7.74327 |

| Residuals Statistics | | | | | |
|-----------------------------------|---------|---------|---------|----------------|----|
| | Minimum | Maximum | Mean | Std. Deviation | N |
| Predicted Value | 14.3088 | 22.8820 | 19.1757 | 1.78142 | 98 |
| Std. Predicted Value | -2.732 | 2.081 | .000 | 1.000 | 98 |
| Standard Error of Predicted Value | .542 | 1.218 | .810 | .160 | 98 |

Residuals statistics (continued)

| | | | | | |
|--------------------------|----------|---------|---------|---------|----|
| Adjusted Predicted Value | 13.9804 | 22.9605 | 19.1739 | 1.82203 | 98 |
| Residual | -8.56394 | 7.74327 | .00000 | 2.78228 | 98 |
| Std. Residual | -2.965 | 2.681 | .000 | .963 | 98 |
| Stud. Residual | -3.097 | 2.736 | .000 | 1.002 | 98 |
| Deleted Residual | -9.34148 | 8.06273 | .00186 | 3.01228 | 98 |
| Stud. Deleted Residual | -3.258 | 2.841 | -.001 | 1.016 | 98 |
| Mahal. Distance | 2.429 | 16.255 | 6.929 | 3.065 | 98 |
| Cook's Distance | .000 | .109 | .010 | .015 | 98 |
| Centered Leverage Value | .025 | .168 | .071 | .032 | 98 |



Scatter and partial plots

9. References

- Aarø, L.E. *et al.* (2009) 'Parental education as an indicator of socioeconomic status: Improving quality of data by requiring consistency across measurement occasions', *Scandinavian Journal of Public Health*, 37(2_suppl), pp. 16–27. Available at: <https://doi.org/10.1177/1403494808086917>.
- Advance HE (2020) *What Works? Student retention and success change programme*. Available at: <https://www.advance-he.ac.uk/guidance/teaching-and-learning/student-retention-and-success/what-works-student-retention-and-success-change-programme> (Accessed: 22 January 2023).
- Agrawal, K.G. and Sharma, B.R. (1977) 'Gratification, Metamotivation, and Maslow', *Vikalpa: The Journal for Decision Makers*, 2(4), pp. 265–272. Available at: <https://doi.org/10.1177/0256090919770402>.
- Ahn, M.Y. (2017) *Sense of Belonging as an Indicator for Social Capital: A Mixed Methods Analysis of Students' Sense of Belonging to University*. Bangor University.
- Aljohani, O. (2016) 'A Comprehensive Review of the Major Studies and Theoretical Models of Student Retention in Higher Education', *Higher Education Studies*, 6(2), p. 1. Available at: <https://doi.org/10.5539/hes.v6n2p1>.
- Almalki, S. (2016) 'Integrating Quantitative and Qualitative Data in Mixed Methods Research—Challenges and Benefits', *Journal of Education and Learning*, 5(3), p. 288. Available at: <https://doi.org/10.5539/jel.v5n3p288>.
- Alsubaie, M.M. *et al.* (2019) 'The role of sources of social support on depression and quality of life for university students', *International Journal of Adolescence and Youth*, 24(4), pp. 484–496. Available at: <https://doi.org/10.1080/02673843.2019.1568887>.
- Amici, F. and Widdig, A. (2019) 'An evolutionary perspective on the development of primate sociality', *Behavioral Ecology and Sociobiology*, 73(8), p. 116. Available at: <https://doi.org/10.1007/s00265-019-2722-8>.
- Anderson, B. (1983) *Imagined Communities: Reflections on the origin and spread of nationalism*. London: Verso.
- Andits, P. (2015) 'Rethinking Home, Belonging, and the Potentials of Transnationalism: Australian Hungarians after the Fall of the Berlin Wall', *Ethos*, 43(4), pp. 313–331. Available at: <https://doi.org/10.1111/etho.12101>.
- Antonsich, M. (2010) 'Searching for Belonging - An Analytical Framework', *Geography Compass*, 4(6), pp. 644–659. Available at: <https://doi.org/10.1111/j.1749-8198.2009.00317.x>.
- Barnes, R., Kelly, A.F. and Mulrooney, H.M. (2021) 'Student belonging: the impact of disability status within and between academic institutions.', *New Directions in the Teaching of Physical Sciences* [Preprint], (16). Available at: <https://doi.org/10.29311/ndtps.v0i16.3607>.
- Baumeister, R.F. and Leary, M.R. (1995) 'The need to belong: Desire for interpersonal attachments as a fundamental human motivation.', *Psychological Bulletin*, 117(3), pp. 497–529. Available at: <https://doi.org/10.1037/0033-2909.117.3.497>.
- BBC News (2021) *Durham University students claim culture of apathy over bullying*. Available at: <https://www.bbc.co.uk/news/uk-england-tyne-58717598> (Accessed: 6 January 2022).
- Benedict, R. (1934) *Patterns of Culture*. Boston: Houghton Mifflin.

- Bettencourt, G.M. (2021) ‘“I Belong Because It Wasn’t Made for Me”: Understanding Working-Class Students’ Sense of Belonging on Campus’, *The Journal of Higher Education*, 92(5), pp. 760–783. Available at: <https://doi.org/10.1080/00221546.2021.1872288>.
- Bhatti, B. *et al.* (1989) ‘The association between child maltreatment and self-esteem’, in A.M. Mecca, N.J. Smelser, and J. Vasconcellos (eds) *The social importance of self-esteem*. Berkeley: University of California Press, pp. 24–71.
- Boldero, J. and Fallon, B. (1995) ‘Adolescent help-seeking: what do they get help for and from whom?’, *Journal of Adolescence*, 18(2), pp. 193–209. Available at: <https://doi.org/10.1006/jado.1995.1013>.
- Bolland, M.J. *et al.* (2006) ‘Fat mass is an important predictor of parathyroid hormone levels in postmenopausal women’, *Bone*, 38(3), pp. 317–321. Available at: <https://doi.org/10.1016/j.bone.2005.08.018>.
- Bourdieu, P. (1977) *Outline of a Theory of Practice*. Cambridge University Press. Available at: <https://doi.org/10.1017/CBO9780511812507>.
- Bourdieu, P. (1984) *Distinction: A social critique of the judgement of taste*. Harvard University Press.
- Bourdieu, P. and Passeron, J.-C. (1977) *Reproduction in Education, Society, and Culture*. SAGE Publications Ltd.
- Bowlby, J. (1969) *Attachment and loss: Vol. 1. Attachment*. New York: Basic Books.
- Bowlby, J. (1973) *Attachment and loss: Vol. 2. Separation anxiety and anger*. New York: Basic Books.
- Bradford, J., Ryan, C. and Rothblum, E.D. (1994) ‘National Lesbian Health Care Survey: Implications for mental health care.’, *Journal of Consulting and Clinical Psychology*, 62(2), pp. 228–242. Available at: <https://doi.org/10.1037/0022-006X.62.2.228>.
- Braun, V. and Clarke, V. (2006) ‘Using thematic analysis in psychology’, *Qualitative Research in Psychology*, 3(2), pp. 77–101. Available at: <https://doi.org/10.1191/1478088706qp063oa>.
- Braun, V. and Clarke, V. (2012) ‘Thematic analysis.’, in *APA handbook of research methods in psychology, Vol 2: Research designs: Quantitative, qualitative, neuropsychological, and biological*. Washington: American Psychological Association, pp. 57–71. Available at: <https://doi.org/10.1037/13620-004>.
- Braun, V. and Clarke, V. (2013) *Successful Qualitative Research: A Practical Guide for Beginners*. First Edition. SAGE Publications Ltd.
- Braun, V. and Clarke, V. (2019) ‘Reflecting on reflexive thematic analysis’, *Qualitative Research in Sport, Exercise and Health*, 11(4), pp. 589–597. Available at: <https://doi.org/10.1080/2159676X.2019.1628806>.
- Braun, V. and Clarke, V. (2020) ‘One size fits all? What counts as quality practice in (reflexive) thematic analysis?’, *Qualitative Research in Psychology*, 18(3), pp. 328–352. Available at: <https://doi.org/10.1080/14780887.2020.1769238>.
- Brennan, I. (2022) *Better targeting of mental health support is needed for international students*. Available at: <https://www.hepi.ac.uk/2022/07/01/better-targeting-of-mental-health-support-is-needed-for-international-students/> (Accessed: 16 August 2023).

Byrne, D. (2022) 'A worked example of Braun and Clarke's approach to reflexive thematic analysis', *Quality & Quantity*, 56(3), pp. 1391–1412. Available at: <https://doi.org/10.1007/s11135-021-01182-y>.

Cambridge Dictionary (no date) *well-being*. Cambridge University Press. Available at: <https://dictionary.cambridge.org/dictionary/english/well-being> (Accessed: 26 January 2023).

Centers for Disease Control and Prevention (2018) *Well-being concepts*. Available at: <https://www.cdc.gov/hrqol/wellbeing.htm> (Accessed: 26 January 2023).

Centers for Disease Control and Prevention (2021) *Social Determinants of Health: Know What Affects Health*. Available at: <https://www.cdc.gov/socialdeterminants/about.html> (Accessed: 4 May 2022).

Cooper, R. (2009) 'Constructing Belonging in a Diverse Campus Community', *Journal of College and Character*, 10(3). Available at: <https://doi.org/10.2202/1940-1639.1085>.

Cresswell-Smith, J. *et al.* (2022) 'Mental Health and Mental Wellbeing Impact Assessment Frameworks—A Systematic Review', *International Journal of Environmental Research and Public Health*, 19(21), p. 13985. Available at: <https://doi.org/10.3390/ijerph192113985>.

Cullen, W., Gulati, G. and Kelly, B.D. (2020) 'Mental health in the COVID-19 pandemic', *QJM: An International Journal of Medicine*, 113(5), pp. 311–312. Available at: <https://doi.org/10.1093/qjmed/hcaa110>.

Cureton, D. and Gravestock, P. (2019) "'We Belong": differential sense of belonging and its meaning for different ethnicity groups in higher education', *Compass: Journal of Learning and Teaching*, 12(1). Available at: <https://doi.org/10.21100/compass.v12i1.942>.

Davoren, M.P. *et al.* (2013) 'Positive Mental Health and Well-Being among a Third Level Student Population', *PLoS ONE*, 8(8), p. e74921. Available at: <https://doi.org/10.1371/journal.pone.0074921>.

Diemer, M.A. *et al.* (2013) 'Best Practices in Conceptualizing and Measuring Social Class in Psychological Research', *Analyses of Social Issues and Public Policy*, 13(1), pp. 77–113. Available at: <https://doi.org/10.1111/asap.12001>.

Doan, N. *et al.* (2020) 'Reluctancy towards Help-Seeking for Mental Health Concerns at Secondary School among Students in the COMPASS Study', *International Journal of Environmental Research and Public Health*, 17(19), p. 7128. Available at: <https://doi.org/10.3390/ijerph17197128>.

Drescher, J. (2015) 'Out of DSM: Depathologizing Homosexuality', *Behavioral Sciences*, 5(4), pp. 565–575. Available at: <https://doi.org/10.3390/bs5040565>.

Durham University (2019) *Durham University Student Health Needs Assessment*. Available at: <https://www.dur.ac.uk/resources/wellbeing/HealthNeedsAssessmentStudents2019.pdf> (Accessed: 16 May 2022).

Durham University (2021a) *Next Steps*. Available at: <https://www.dur.ac.uk/respect/nextsteps/> (Accessed: 21 January 2023).

Durham University (2021b) *Respect: creating a place where we can all flourish*. Available at: <https://www.dur.ac.uk/respect/> (Accessed: 21 January 2023).

Durham University (2022a) *Chaplaincy*. Available at: <https://www.durham.ac.uk/colleges-and-student-experience/student-support-and-wellbeing/faith-support/> (Accessed: 22 January 2023).

Durham University (2022b) *Counselling and Mental Health Service*. Available at: <https://www.dur.ac.uk/counselling.service/mhadvice/mhsupport/> (Accessed: 3 June 2022).

- Durham University (2022c) *Mental Health Policy and Procedure*. Available at: <https://www.dur.ac.uk/counselling.service/mhadvice/mhpolicy/> (Accessed: 13 November 2022).
- Durham University (2022d) *Our Colleges*. Available at: <https://www.durham.ac.uk/colleges-and-student-experience/colleges/> (Accessed: 3 June 2022).
- Durham University (2022e) *Respect Commission Report*. Available at: <https://www.dur.ac.uk/respect/report/> (Accessed: 4 June 2022).
- Durham University (2022f) *Respect Oversight Group (RoG)*. Available at: <https://www.dur.ac.uk/respect/rog/> (Accessed: 21 January 2023).
- Durham University (2022g) *Respect Working Group*. Available at: <https://www.dur.ac.uk/respect/workinggroup/> (Accessed: 21 January 2023).
- Durham University (2022h) *Student Support and Wellbeing*. Available at: <https://www.durham.ac.uk/colleges-and-student-experience/student-support-and-wellbeing/> (Accessed: 3 June 2022).
- Durkheim, E. (1951) *Suicide: A Study in Sociology*. New York: NY: Free Press.
- Duyvendak, W.J. *et al.* (2021) 'Mapping Belonging as a Field of Study'. Available at: <https://spui25.nl/programma/mapping-belonging-as-a-study> (Accessed: 5 April 2022).
- Edgerton, J.D. and Roberts, L.W. (2014) 'Cultural capital or habitus? Bourdieu and beyond in the explanation of enduring educational inequality', 12(2), pp. 193–220. Available at: <https://doi.org/10.1177/1477878514530231>.
- Education Committee and Health and Social Care Committee (2018) *The Government's Green Paper on mental health: failing a generation*. Available at: https://publications.parliament.uk/pa/cm201719/cmselect/cmhealth/642/64207.htm#_idTextAnchor035 (Accessed: 10 November 2022).
- Equality Challenge Unit (2014) *Understanding adjustments: supporting staff and students who are experiencing mental health difficulties*. Available at: <https://www.advance-he.ac.uk/knowledge-hub/understanding-adjustments-supporting-staff-and-students-who-are-experiencing-mental> (Accessed: 10 November 2022).
- Farmer, P. (1992) *AIDS and accusation: Haiti and the geography of blame*. Berkeley: University of California Press.
- Farmer, P. (2003) *Pathologies of power: Health, human rights, and the new war on the poor*. Berkeley: University of California Press.
- Farmer, P. (2004) 'An Anthropology of Structural Violence', *Anthropology*, 45(3), pp. 305–325. Available at: <https://doi.org/10.1086/382250>.
- Fernández, D.P., Ryan, M.K. and Begeny, C.T. (2023) 'Recognizing the diversity in how students define belonging: evidence of differing conceptualizations, including as a function of students' gender and socioeconomic background', *Social Psychology of Education*, 26(3), pp. 673–708. Available at: <https://doi.org/10.1007/s11218-023-09761-7>.
- Field, A. (2009) *Discovering statistics using SPSS*. Third. London: SAGE Publications Ltd.
- Fusar-Poli, P. *et al.* (2020) 'What is good mental health? A scoping review', *European Neuropsychopharmacology*, 31, pp. 33–46. Available at: <https://doi.org/10.1016/j.euroneuro.2019.12.105>.

- Galderisi, S. *et al.* (2015) 'Toward a new definition of mental health', *World Psychiatry*, 14(2). Available at: <https://doi.org/10.1002/wps.20231>.
- Galtung, J. (1969) 'Violence, Peace, and Peace Research', *Journal of Peace Research*, 6(3), pp. 167–191. Available at: <http://www.jstor.orgURL:http://www.jstor.org/stable/422690http://www.jstor.org/page/info/about/policies/terms.jsp> (Accessed: 25 June 2022).
- Gammeltoft, T.M. (2018) 'Belonging', *Social Analysis*, 62(1). Available at: <https://doi.org/10.3167/sa.2018.620106>.
- GBD 2019 Mental Disorders Collaborators (2022) 'Global, regional, and national burden of 12 mental disorders in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019', *The Lancet Psychiatry*, 9(2), pp. 137–150. Available at: [https://doi.org/10.1016/S2215-0366\(21\)00395-3](https://doi.org/10.1016/S2215-0366(21)00395-3).
- Glasser Institute for Choice Theory (2022) *Quickstart Guide to Choice Theory: Basic Needs*. Available at: <https://wglasser.com/quickstart-guide-to-choice-theory/#basic-needs> (Accessed: 30 July 2022).
- Glasser, W. (1998) *Choice Theory: A New Psychology of Personal Freedom*. 1st edn. New York: HarperCollins Publishers.
- Gnan, G.H. *et al.* (2019) 'General and LGBTQ-specific factors associated with mental health and suicide risk among LGBTQ students', *Journal of Youth Studies*, 22(10), pp. 1393–1408. Available at: <https://doi.org/10.1080/13676261.2019.1581361>.
- Goodenow, C. (2016) 'Classroom Belonging among Early Adolescent Students: Relationships to Motivation and Achievement', <http://dx.doi.org/10.1177/0272431693013001002>, 13(1), pp. 21–43. Available at: <https://doi.org/10.1177/0272431693013001002>.
- Gopalan, M. and Brady, S.T. (2020) 'College Students' Sense of Belonging: A National Perspective', *Educational Researcher*, 49(2), pp. 134–137. Available at: <https://doi.org/10.3102/0013189X19897622>.
- Gorczynski, P. *et al.* (2017) 'Examining mental health literacy, help seeking behaviours, and mental health outcomes in UK university students', *The Journal of Mental Health Training, Education and Practice*, 12(2), pp. 111–120. Available at: <https://doi.org/10.1108/JMHTEP-05-2016-0027>.
- Halliday, J. (2021) *Durham University failing on bullying, staff say*. Available at: <https://www.theguardian.com/education/2021/aug/05/durham-university-failing-on-bullying-former-staff-say> (Accessed: 6 January 2022).
- Halse, C. (2018) 'Theories and Theorising of Belonging', in *Interrogating Belonging for Young People in Schools*. Cham: Springer International Publishing, pp. 1–28. Available at: https://doi.org/10.1007/978-3-319-75217-4_1.
- Hamachek, D. (1992) *Encounters with the self*. 4th edn. San Diego: CA: Harcourt Brace Jovanovich.
- Han, M. and Pong, H. (2015) 'Mental Health Help-Seeking Behaviors Among Asian American Community College Students: The Effect of Stigma, Cultural Barriers, and Acculturation', *Journal of College Student Development*, 56(1), pp. 1–14. Available at: <https://doi.org/10.1353/csd.2015.0001>.
- Harandi, T., Taghinasab, M. and Nayeri, T. (2017) 'The correlation of social support with mental health: A meta-analysis', *Electronic Physician*, 9(9), pp. 5212–5222. Available at: <https://doi.org/10.19082/5212>.

- Henrich, J., Heine, S.J. and Norenzayan, A. (2010) 'The weirdest people in the world?', *Behavioral and Brain Sciences*, 33(2–3), pp. 61–83. Available at: <https://doi.org/10.1017/S0140525X0999152X>.
- Hrdy, S. (2011) *Mothers and Others*. First. United States of America: Harvard University Press.
- James, S.A. *et al.* (1984) 'John Henryism and blood pressure differences among black men. II. The role of occupational stressors', *Journal of Behavioral Medicine*, 7(3), pp. 259–275. Available at: <https://doi.org/10.1007/BF00845359>.
- Jeong, H.J., Kim, S. and Lee, J. (2023) 'Mental Health, Life Satisfaction, Supportive Parent Communication, and Help-seeking Sources in the wake of COVID-19: First-generation College Students (FGCS) Vs . Non-first-generation College Students (non-FGCS)', *Journal of College Student Psychotherapy*, 37(2), pp. 71–86. Available at: <https://doi.org/10.1080/87568225.2021.1906189>.
- Johnson, D.R. *et al.* (2007) 'Examining Sense of Belonging Among First-Year Undergraduates From Different Racial/Ethnic Groups', *Journal of College Student Development*, 48(5), pp. 525–542. Available at: <https://doi.org/10.1353/csd.2007.0054>.
- Johnson, J. and Crenna-Jennings, W. (2018) *Prevalence of mental health issues within the student-aged population, Children and Young People's Mental Health: Policy Analysis*. Available at: <https://epi.org.uk/publications-and-research/prevalence-of-mental-health-issues-within-the-student-aged-population/> (Accessed: 10 November 2022).
- Jones, R. (2009) *Sense of belonging and its relationship with quality of life and symptom distress among undergraduate college students*. Oklahoma State University. Available at: <https://www.proquest.com/docview/305087522/fulltextPDF/178EB0F3B6474D7CPQ/1?accountid=14533&parentSessionId=GlseFh%2FpWcEo8QgDCV380gdFGQdxsGirfp8bOmWls4I%3D> (Accessed: 10 May 2022).
- Kaiser, B.N. and Kohrt, B.A. (2019) 'Why Psychiatry Needs the Anthropologist: A Reflection on 80 Years of Culture in Mental Health', *Psychiatry*, 82(3), p. 205. Available at: <https://doi.org/10.1080/00332747.2019.1653142>.
- Kaplan, H.S., Hooper, P.L. and Gurven, M. (2009) 'The evolutionary and ecological roots of human social organization', *Philosophical Transactions of the Royal Society B: Biological Sciences*, 364(1533), pp. 3289–3299. Available at: <https://doi.org/10.1098/rstb.2009.0115>.
- Karaman, Ö. and Tarim, B. (2018) 'Investigation of the Correlation between Belonging Needs of Students Attending University and Well-being', *Universal Journal of Educational Research*, 6(4), pp. 781–788. Available at: <https://doi.org/10.13189/ujer.2018.060422>.
- Kessler, R.C. *et al.* (2002) 'Short screening scales to monitor population prevalences and trends in non-specific psychological distress', *Psychological Medicine*, 32(6), pp. 959–976. Available at: <https://doi.org/10.1017/S0033291702006074>.
- Keyes, C.L.M. (2002) 'The Mental Health Continuum: From Languishing to Flourishing in Life', *Journal of Health and Social Behavior*, 43(2), p. 207. Available at: <https://doi.org/10.2307/3090197>.
- Kimura, M. (2014) 'Non-performativity of university and subjectification of students: the question of equality and diversity in UK universities', *British Journal of Sociology of Education*, 35(4), pp. 523–540. Available at: <https://doi.org/10.1080/01425692.2013.777207>.
- Knekta, E., Runyon, C. and Eddy, S. (2019) 'One Size Doesn't Fit All: Using Factor Analysis to Gather Validity Evidence When Using Surveys in Your Research', *CBE—Life Sciences Education*, 18(1), p. rm1. Available at: <https://doi.org/10.1187/cbe.18-04-0064>.

- Krieger, N. (1990) 'Racial and gender discrimination: Risk factors for high blood pressure?', *Social Science & Medicine*, 30(12), pp. 1273–1281. Available at: [https://doi.org/10.1016/0277-9536\(90\)90307-E](https://doi.org/10.1016/0277-9536(90)90307-E).
- Krieger, N. (2005) 'Embodying Inequality: A review of concepts, measures, and methods of studying health consequences of Discrimination', in *Embodying inequality: Epidemiologic perspectives*. Amityville, NY: Baywood Publishing Company, pp. 101–158.
- Laidlaw, A., McLellan, J. and Ozakinci, G. (2015) 'Understanding undergraduate student perceptions of mental health, mental well-being and help-seeking behaviour', <https://doi.org/10.1080/03075079.2015.1026890>, 41(12), pp. 2156–2168. Available at: <https://doi.org/10.1080/03075079.2015.1026890>.
- Leary, M.R. and Cox, C.B. (2008) 'Belongingness motivation: A mainspring of social action', in J.Y. Shah and W.L. Gardner (eds) *Handbook of motivation science*. The Guilford Press, pp. 27–40.
- Lee, B. (2019) 'Structural Violence', in *Violence: An Interdisciplinary Approach to Causes, Consequences, and Cures*. Hoboken, NJ, USA: John Wiley & Sons, Inc., pp. 123–142. Available at: <https://doi.org/10.1002/9781119240716.ch7>.
- Lipson, S.K. *et al.* (2022) 'Trends in college student mental health and help-seeking by race/ethnicity: Findings from the national healthy minds study, 2013–2021', *Journal of Affective Disorders*, 306, pp. 138–147. Available at: <https://doi.org/10.1016/j.jad.2022.03.038>.
- Malinowski, B. (1922) *Argonauts of the Western Pacific*. London: G. Routledge & Sons.
- Malinowski, B. (1944) *A Scientific Theory of Culture*. Chapel Hill: University of North Carolina Press.
- Marmot, M. (2010) *Fair Society, Healthy Lives*.
- Maslow, A.H. (1943) 'A theory of human motivation.', *Psychological Review*, 50(4), pp. 370–396. Available at: <https://doi.org/10.1037/h0054346>.
- Maslow, H.A. (1954) *Motivation and Personality*. New York: Harper and Row.
- McGowan, V.J. *et al.* (2022) 'Collective control, social cohesion and health and well-being: baseline survey results from the communities in control study in England', *Journal of Public Health*, 44(2), pp. 378–386. Available at: <https://doi.org/10.1093/pubmed/fdaa227>.
- McMillan, J.M. and Jarvis, J.M. (2013) 'Mental Health and Students with Disabilities: A Review of Literature', *Australian Journal of Guidance and Counselling*, 23(2), pp. 236–251. Available at: <https://doi.org/10.1017/jgc.2013.14>.
- Mead, M. (2001) *Sex and Temperament: In Three Primitive Societies*. HarperCollins.
- Meyer, I.H. (1995) 'Minority stress and mental health in gay men.', *Journal of health and social behavior*, 36(1), pp. 38–56.
- Moeller, R.W., Seehuus, M. and Peisch, V. (2020) 'Emotional Intelligence, Belongingness, and Mental Health in College Students', *Frontiers in Psychology*, 11. Available at: <https://doi.org/10.3389/fpsyg.2020.00093>.
- Mooney, C. and Becker, B.A. (2020) 'Sense of Belonging: The Intersectionality of Self-Identified Minority Status and Gender in Undergraduate Computer Science Students', in *United Kingdom & Ireland Computing Education Research conference*. New York, NY, USA: ACM, pp. 24–30. Available at: <https://doi.org/10.1145/3416465.3416476>.

Moran, P. (2023) 'Do We Belong? Promoting a Sense of Belonging in LGBTQ Youth Through Artistic Community Engagement: A Literature Review', *Expressive Therapies Capstone Theses*, 619.

Morris, C. (2021) "'Peering through the window looking in": postgraduate experiences of non-belonging and belonging in relation to mental health and wellbeing', *Studies in Graduate and Postdoctoral Education*, 12(1), pp. 131–144. Available at: <https://doi.org/10.1108/SGPE-07-2020-0055>.

Moss, R.A. *et al.* (2022) 'Mental health and wellbeing of postgraduate researchers: exploring the relationship between mental health literacy, help-seeking behaviour, psychological distress, and wellbeing', *Higher Education Research & Development*, 41(4), pp. 1168–1183. Available at: <https://doi.org/10.1080/07294360.2021.1906210>.

Neves, J. and Brown, A. (2022) *Student Academic Experience Survey 2022*. Available at: https://s3.eu-west-2.amazonaws.com/assets.creode.advancehe-document-manager/documents/advance-he/AdvHE_HEPI_SAES%202022_1654522609.pdf (Accessed: 10 November 2022).

NHS (no date) *Top tips to improve your mental wellbeing*. Available at: <https://www.nhs.uk/every-mind-matters/mental-wellbeing-tips/top-tips-to-improve-your-mental-wellbeing/#good-mental-health> (Accessed: 23 June 2023).

O'Connor, R.C. *et al.* (2021) 'Mental health and well-being during the COVID-19 pandemic: longitudinal analyses of adults in the UK COVID-19 Mental Health & Wellbeing study', *The British Journal of Psychiatry*, 218(6), pp. 326–333. Available at: <https://doi.org/10.1192/bjp.2020.212>.

Offer, D. *et al.* (1991) 'To Whom Do Adolescents Turn for Help? Differences between Disturbed and Nondisturbed Adolescents', *Journal of the American Academy of Child & Adolescent Psychiatry*, 30(4), pp. 623–630. Available at: <https://doi.org/10.1097/00004583-199107000-00015>.

Office for Students (2019) 'Mental health: Are all students being properly supported?', *Insight*, 5. Available at: <https://www.officeforstudents.org.uk/publications/mental-health-are-all-students-being-properly-supported/#data> (Accessed: 10 November 2022).

Olaniyan, F. (2021) 'Paying the widening participation penalty: Racial and ethnic minority students and mental health in British universities', *Analyses of Social Issues and Public Policy*, 21(1), pp. 761–783. Available at: <https://doi.org/10.1111/asap.12242>.

Oloff, M. *et al.* (2013) 'The role of oxytocin in social bonding, stress regulation and mental health: An update on the moderating effects of context and interindividual differences', *Psychoneuroendocrinology*, 38(9), pp. 1883–1894. Available at: <https://doi.org/10.1016/j.psyneuen.2013.06.019>.

Olivari, C. and Guzmán-González, M. (2017) 'Validación del cuestionario general de búsqueda de ayuda para problemas de salud mental en adolescentes [Validation of the general help-seeking questionnaire for mental health problems in adolescents]', *Revista chilena de pediatría*, 88(3), pp. 324–331. Available at: <https://doi.org/10.4067/S0370-41062017000300003>.

Oxford Advanced Learner's Dictionary (2023) *belonging*. Oxford University Press. Available at: <https://www.oxfordlearnersdictionaries.com/definition/english/belonging> (Accessed: 26 January 2023).

Parr, N.J. (2022) 'Differences in the age-varying association of school belonging with socioemotional flourishing among minority and non-minority college and university students', *Journal of American College Health*, 70(5), pp. 1336–1340. Available at: <https://doi.org/10.1080/07448481.2020.1808662>.

- Parveen, N. (2020) *Students from northern England facing 'toxic attitude' at Durham University*. Available at: <https://www.theguardian.com/education/2020/oct/19/students-from-northern-england-facing-toxic-attitude-at-durham-university> (Accessed: 6 January 2022).
- Patel, V. (2012) 'Global Mental Health: From Science to Action', *Harvard Review of Psychiatry*, 20(1), pp. 6–12. Available at: <https://doi.org/10.3109/10673229.2012.649108>.
- Paul Hamlyn Foundation (2023) *Paul Hamlyn Foundation*. Available at: <https://www.phf.org.uk/> (Accessed: 22 January 2023).
- Pedler, M.L., Willis, R. and Nieuwoudt, J.E. (2022) 'A sense of belonging at university: student retention, motivation and enjoyment', *Journal of Further and Higher Education*, 46(3), pp. 397–408. Available at: <https://doi.org/10.1080/0309877X.2021.1955844>.
- Penner, K. *et al.* (2021) 'Sense of Belonging and Social Climate in an Official Language Minority Post-Secondary Setting', *Canadian Journal of Higher Education*, 51(4), pp. 26–39. Available at: <https://doi.org/10.47678/cjhe.v51i4.189087>.
- Pereira, S. *et al.* (2020) *University Student Mental Health Survey 2020*. London.
- Pfefferbaum, B. and North, C.S. (2020) 'Mental Health and the Covid-19 Pandemic', *New England Journal of Medicine*, 383(6), pp. 510–512. Available at: <https://doi.org/10.1056/NEJMp2008017>.
- Rainey, K. *et al.* (2018) 'Race and gender differences in how sense of belonging influences decisions to major in STEM', *International Journal of STEM Education*, 5(1), p. 10. Available at: <https://doi.org/10.1186/s40594-018-0115-6>.
- Reay, D., David, M. and Ball, S. (2001) 'Reay, David and Ball: Making a Difference?', *Sociological Research Online*, 5(4). Available at: <https://www.socresonline.org.uk/5/4/reay.html> (Accessed: 22 May 2022).
- Regnault, A., Willgoss, T. and Barbic, S. (2018) 'Towards the use of mixed methods inquiry as best practice in health outcomes research', *Journal of Patient-Reported Outcomes*, 2(1), p. 19. Available at: <https://doi.org/10.1186/s41687-018-0043-8>.
- Reiss, F. *et al.* (2019) 'Socioeconomic status, stressful life situations and mental health problems in children and adolescents: Results of the German BELLA cohort-study', *PLOS ONE*, 14(3), p. e0213700. Available at: <https://doi.org/10.1371/journal.pone.0213700>.
- Rickwood, D., Thomas, K. and Bradford, S. (2012) *Help-seeking measures in mental health: a rapid review*. Available at: https://www.saxinstitute.org.au/wp-content/uploads/02_Help-seeking-measures-in-mental-health.pdf (Accessed: 27 May 2022).
- Rössler, W. (2016) 'The stigma of mental disorders', *EMBO reports*, 17(9), pp. 1250–1253. Available at: <https://doi.org/10.15252/embr.201643041>.
- Rubin, M. (2021) 'Explaining the association between subjective social status and mental health among university students using an impact ratings approach', *SN Social Sciences*, 1(1), p. 20. Available at: <https://doi.org/10.1007/s43545-020-00031-3>.
- Rutter, M. (1979) 'Maternal Deprivation, 1972-1978: New Findings, New Concepts, New Approaches', *Child Development*, 50(2), p. 283. Available at: <https://doi.org/10.2307/1129404>.
- Scott, S. (2006) 'The medicalisation of shyness: from social misfits to social fitness', *Sociology of Health and Illness*, 28(2), pp. 133–153. Available at: <https://doi.org/10.1111/j.1467-9566.2006.00485.x>.

Singer, M. and Baer, H. (1995) *Critical Medical Anthropology*. Second edition. Boca Raton: CRC Press.

Singh, A. (2018) *Investigating the Sense of Belonging for International Students Through a Predictive Model*. Iowa State University. Available at: <https://www.proquest.com/openview/45fd41b570d18d5854e4c3eaf877baf6/1?pq-origsite=gscholar&cbl=18750> (Accessed: 9 August 2023).

Sklair, L. (2003) *The Sociology of Progress*. Taylor & Francis Group. Available at: <https://ebookcentral.proquest.com/lib/durham/detail.action?docID=169664> (Accessed: 22 January 2023).

Srivastava, Rani and Srivastava, Raman (2019) 'Impact of Cultural Identity on Mental Health in Post-secondary Students', *International Journal of Mental Health and Addiction*, 17(3), pp. 520–530. Available at: <https://doi.org/10.1007/s11469-018-0025-3>.

Stebbleton, M.J., Soria, K.M. and Huesman, R.L. (2014a) 'First-Generation Students' Sense of Belonging, Mental Health, and Use of Counseling Services at Public Research Universities', *Journal of College Counseling*, 17(1), pp. 6–20. Available at: <https://doi.org/10.1002/j.2161-1882.2014.00044.x>.

Stebbleton, M.J., Soria, K.M. and Huesman, R.L. (2014b) 'First-Generation Students' Sense of Belonging, Mental Health, and Use of Counseling Services at Public Research Universities', *Journal of College Counseling*, 17(1), pp. 6–20. Available at: <https://doi.org/10.1002/j.2161-1882.2014.00044.x>.

Stewart-Brown, S. *et al.* (2009) 'Internal construct validity of the Warwick-Edinburgh Mental Well-being Scale (WEMWBS): a Rasch analysis using data from the Scottish Health Education Population Survey', *Health and Quality of Life Outcomes*, 7(1), p. 15. Available at: <https://doi.org/10.1186/1477-7525-7-15>.

Student Registry (2023a) 'Census Reporting 02 - Demographics'. Unpublished.

Student Registry (2023b) 'Census Reporting 02b - Demographics Protected'. Unpublished.

Tabor, E., Patalay, P. and Bann, D. (2021) 'Mental health in higher education students and non-students: evidence from a nationally representative panel study', *Social Psychiatry and Psychiatric Epidemiology*, 56(5), pp. 879–882. Available at: <https://doi.org/10.1007/s00127-021-02032-w>.

Tennant, R. *et al.* (2007) 'The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development and UK validation', *Health and Quality of Life Outcomes*, 5(1), p. 63. Available at: <https://doi.org/10.1186/1477-7525-5-63>.

The Durham Commission on Respect Values and Behaviour (2020) *Report of the Durham Commission on Respect Values and Behaviour*.

The Sutton Trust (2019) *Sutton Trust Summer Schools*. Available at: <https://summerschools.suttontrust.com/> (Accessed: 12 January 2023).

Thomas, L. (2002) 'Student retention in higher education: the role of institutional habitus', *Journal of Education Policy*, 17(4), pp. 423–442. Available at: <https://doi.org/10.1080/02680930210140257>.

Thomas, L. (2012) *What Works? Student Retention & Success – Final Report*. Available at: What Works? Student Retention & Success – Final Report (Accessed: 21 May 2022).

Thompson, G. (2011) *Feelings of belongingness and attitudes toward help-seeking for ethnic minority college students at a historically black institution*. Fordham University.

- Tinto, V. (1975) 'Dropout from Higher Education: A Theoretical Synthesis of Recent Research', *Review of Educational Research*, 45(1), pp. 89–125. Available at: <https://doi.org/10.3102/00346543045001089>.
- Tinto, V. (1993) *Leaving College: Rethinking the Causes and Cures of Student Attrition*. Chicago: University of Chicago Press.
- Tinto, V. (1997) 'Classrooms as Communities: Exploring the Educational Character of Student Persistence', *The Journal of Higher Education*, 68(6), p. 599. Available at: <https://doi.org/10.2307/2959965>.
- Traub, R.J. *et al.* (2004) 'The prevalence, intensities and risk factors associated with geohelminth infection in tea-growing communities of Assam, India', *Tropical Medicine and International Health*, 9(6), pp. 688–701. Available at: <https://doi.org/10.1111/j.1365-3156.2004.01252.x>.
- Venters, N. (2018) *The past, present and future of innovation in mental health*, NHS Digital Transformation Blog. Available at: <https://digital.nhs.uk/blog/transformation-blog/2018/the-past-present-and-future-of-innovation-in-mental-health> (Accessed: 31 October 2022).
- Wada, M. *et al.* (2019) 'University students' perspectives on mental illness stigma', *Mental Health & Prevention*, 14, p. 200159. Available at: <https://doi.org/10.1016/j.mph.2019.200159>.
- Wahba, M.A. and Bridwell, L.G. (1976) 'Maslow reconsidered: A review of research on the need hierarchy theory', *Organizational Behavior and Human Performance*, 15(2), pp. 212–240. Available at: [https://doi.org/10.1016/0030-5073\(76\)90038-6](https://doi.org/10.1016/0030-5073(76)90038-6).
- Waller, L. (2019) *A grounded theory of a sense of not belonging in the workplace and implications for self-concept*. University of Reading.
- Warikoo, N. (2016) *The Diversity Bargain*. Chicago and London: University of Chicago Press.
- Warwick Medical School (2019) *Conceptual Framework*. Available at: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/research/framework> (Accessed: 16 May 2022).
- Warwick Medical School (2020a) *About WEMWBS*. Available at: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/about/> (Accessed: 31 October 2022).
- Warwick Medical School (2020b) *How and where WEMWBS is used*. Available at: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/about/use/> (Accessed: 6 November 2022).
- Warwick Medical School (2020c) *Mental wellbeing: disciplinary and historical context*. Available at: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/research/mentalwellbeing> (Accessed: 31 October 2022).
- Warwick Medical School (2020d) *WEMWBS: 14-item vs 7-item scale*. Available at: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/about/wemwbsvsswemwbs/> (Accessed: 14 November 2022).
- Warwick Medical School (2021) *Collect, score, analyse and interpret WEMWBS*. Available at: <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/howto/> (Accessed: 23 September 2022).
- Wilson, C. *et al.* (2005) 'Measuring help seeking intentions: Properties of the General Help-Seeking Questionnaire', *Canadian Journal of Counselling*, 39(1), pp. 15–28.

Wolfe-Robinson, M. (2021) *Durham head steps back after calling students 'pathetic' at Rod Liddle event*. Available at: <https://www.theguardian.com/education/2021/dec/09/durham-head-steps-back-after-calling-students-pathetic-at-rod-liddle-event> (Accessed: 6 January 2022).

World Health Organization (2001) *The World Health Report 2001: Mental health: new understanding, new hope*. Available at: https://books.google.co.uk/books?hl=en&lr=&id=GQEdA-VFSIgC&oi=fnd&pg=PR9&dq=mental+health+awareness+world+health+organisation&ots=d2TEYFbizE&sig=QD613hYl-N-vOcVqZqYJMCiDfNk&redir_esc=y#v=onepage&q&f=false (Accessed: 23 February 2022).

World Health Organization (2003) *Social determinants of health: the solid facts*. . 2nd edn. Edited by R. Wilkinson and M. Marmot. Copenhagen: WHO.

World Health Organization (2005) 'Mental health atlas 2005'. Available at: https://books.google.co.uk/books?hl=en&lr=&id=2SXuXnlz3PgC&oi=fnd&pg=PA6&dq=mental+health+awareness+world+health+organisation&ots=KIKpdFGfrv&sig=4704E4I1llF99f7cj02BbDaEQnM&redir_esc=y#v=onepage&q&f=false (Accessed: 23 February 2022).

World Health Organization (2022) *Mental health: strengthening our response*. Available at: <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response> (Accessed: 14 May 2022).

World Health Organization (no date) *Social determinants of health*. Available at: https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1 (Accessed: 4 May 2022).

Yorke, M. (2016) 'Assessment & Evaluation in Higher Education The development and initial use of a survey of student "belongingness", engagement and self-confidence in UK higher education'. Available at: <https://doi.org/10.1080/02602938.2014.990415>.

Yuval-Davis, N. (2006) 'Belonging and the politics of belonging', *Patterns of Prejudice*, 40(3), pp. 197–214. Available at: <https://doi.org/10.1080/00313220600769331>.

Yuval-Davis, N. (2011) *The Politics of Belonging: Intersectional Contestations*. 1 Oliver's Yard, 55 City Road, London EC1Y 1SP United Kingdom : SAGE Publications Ltd. Available at: <https://doi.org/10.4135/9781446251041>.