Annual Report 2021

RMIT wellbeing

Mental Wellbeing Strategic Action Plan

(2020-2025)

PART 1

Acknowledgement, Introduction,

Womin djeka & Summary

RMIT wellbeing

Acknowledgement of Country

RMIT University acknowledges the people of the Woi wurrung and Boon wurrung language groups of the eastern Kulin Nation on whose unceded lands we conduct the business of the University. RMIT University respectfully acknowledges their Ancestors and Elders, past and present. RMIT also acknowledges the Traditional Custodians and their Ancestors of the lands and waters across Australia where we conduct our business.

RMIT recognises that Aboriginal and Torres Strait Islander people are the proud custodians of Earth's longest surviving cultures. The value of Aboriginal and Torres Strait Islander traditional ways of wellbeing are evidenced by the resilience and resourcefulness in the face of colonisation and unjust attempts to destroy their cultures or force assimilation.

RMIT acknowledges the importance of history and culture in in understanding and promoting social and emotional wellbeing. The University values cultural diversity, believes all staff and students should be treated with dignity and respect, and seeks to contribute to creating a nation that provides equal life chances for all and works in collaboration with its Indigenous heritage.

Artwork *Luwaytini* by Mark Cleaver, Palawa

Code of Conduct

RMIT's new Code of Conduct is grounded in the principles of the Bundjil Statement.

This sent a strong and nationally significant signal that RMIT is serious about the conditions of 'Welcome' and of living respectfully on the lands of the Kulin Nations. As the University's foundational policy document, the Code of Conduct demonstrates the University's dhumbali to embedding reconciliation in everything we do.

Bundjil's statement

Bundjil Womin Djeka ngarna-ga – Bundjil asks you to come and asks what is your purpose for coming and understanding

"Bundjil was a powerful man, who travelled as an Eagle. He was the head man of the Kulin people. Bundjil taught us to always welcome guests. Bundjil asks what is your purpose for coming and understanding place.

When you are on place you make dhumbali (promise/commitment) to Bundjil and the land of the Kulin Nation.

The first dhumbali, is to obey the ngarn-ga (understandings) of Bundjil. The second dhumbali, is to not harm the bubups (children). The third is not to harm the biik biik (land) and wurneet (waterways) of Bundjil.

As the spirit of Kulin ancestors live in us, let the wisdom, the spirit and the generosity in which Bundjil taught us influence the decisions made on place. Do this by understanding your ways of knowing, your ways of doing, and your ways of being on place."
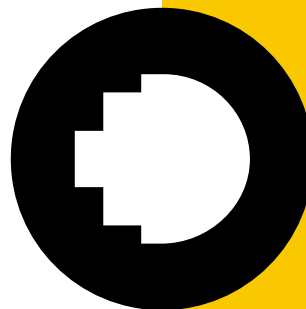
Introduction

The Mental Wellbeing Strategic Action Plan 2020-2025 (the Plan) is a longitudinal, systematic and evidence-informed approach to creating a mentally healthy work and study culture.

The Plan is data-driven and evidence-based and so we track our performance each year against a formal evaluation framework. The dedicated Mental Wellbeing Initiatives team implements a range of evidence-based mental health promotion activities and produces this Annual Report to ensure these activities have desired outcomes and impacts over both shorter and longer terms.

The initiatives are made possible thanks to funding through SSAF, CSF, and the RMIT Health Safety and Wellbeing strategic project.

The Plan contributes to RMIT's commitment to the UN's Sustainable Development Goals (SDG's). In particular, it represents strategic action towards SDG3 to "Ensure healthy lives and promote well-being for all at all ages." Our focus on partnerships is also aligned with SDG17 to "Strengthen the means of implementation and revitalize the global partnership for sustainable development".

Contents

This inaugural Annual Report 2021 provides background to the development of the Plan, as well as key metrics and indicators of progress towards the ultimate vision.

"Together we create a mentally healthy community in which everyone can realise their potential and feel safe and supported in their experience of mental wellbeing."

Womin djeka

Dionne Higgins

Senior Vice-President Strategy and Operations

Together we can create a mentally healthy community in which everyone can realise their potential and feel safe and supported in their experience of mental wellbeing. At RMIT this is our courageous ambition and our ongoing challenge to make it a reality for people in their day-to-day lives while working and learning at RMIT.

Many staff and students sent a clear message to leadership over the last year: collectively we are struggling to meet the demands of work and study. Much of this recent struggle has been a consequence of the pandemic but some has also stemmed from other factors that RMIT can influence and we've been working to address these.

This Annual Report demonstrates our commitment to make the necessary changes to create a mentally healthy RMIT community by being open and transparent about the current state of mental wellbeing experienced by our people. One of the first challenges we face is understanding what a mentally healthy community really means. To me it means that RMIT has a role to play in ensuring that being part of our University community helps us feel good about ourselves, each other, and the wider world.

As a place of learning, our primary objective is to create bright and open futures for our graduates to grow into. We must prepare them for a world where they feel safe to explore with the confidence and can make a positive contribution. Their own internal sense of mental health and wellbeing is the foundation upon which graduates will build their post-RMIT careers, so wellbeing outcomes are interconnected with learning outcomes.

The same applies to staff, both during their tenure here at RMIT and as their career develops elsewhere. A mentally healthy workplace is, to me, somewhere people want to be not just because they are paid to be there or because they are passionate about the job. Staff also need to feel they are valued, listened to, and part of a culture that cares whether they are well or not. RMIT's job, in short, is first to care and then to show that we care by providing the appropriate support.

Our task as leaders is to follow through our commitment to mental wellbeing by making it a priority for RMIT over the long-term and beyond the distractions of current complex times. I am pleased to endorse this Annual Report as representing a clear milestone in that long-term commitment, despite the huge obstacles to mental health and wellbeing over these first two years since we launched our Mental Wellbeing Strategic Action Plan 2020-2025.

As we look with optimism to a post-pandemic world, my hope is that mental wellbeing initiatives continue to grow and flourish to a point where they become just part of what we do and the care we take. This is particularly important for our leaders with responsibility for teams of people, because they set the standard for the value we place on the mental wellbeing of our community.

To live our courageous ambition, RMIT needs to promote the positive aspects of mental wellbeing through improved culture, safer systems and processes, better work and learning experiences, and enhanced support services. I personally remain strongly committed to these foundational principles of the Mental Wellbeing Strategic Action Plan, as I hope everyone at RMIT does, long into the future.

RMIT wellbeing

Foreword

Emma Blee

Director of Health, Safety and Wellbeing

At RMIT we are committed to promoting and protecting the social and emotional wellbeing of all our people. We believe strongly that people work and learn most effectively when they are mentally healthy.

In 2019, we committed to an integrated approach for both students and staff. This represented a major shift in our focus and a major innovation for the tertiary education sector.

To carry our commitment from words into action, RMIT's Mental Wellbeing Strategic Action Plan 2020-2025 (the Plan) was drafted in 2019 by the newly formed Wellbeing Initiatives Team, with extensive internal and external consultation. The Plan was subsequently endorsed by the then Vice-Chancellor, Martin Bean CBE, along with a draft Implementation Plan and Evaluation Framework.

At that point we had not anticipated the turmoil that we would all experience with the COVID-19 pandemic. However, as RMIT and our wider community adapted to the challenges of new risks and restrictions, we found that the actions we had already planned provided a strong base for the rapid response the pandemic demanded. We were able to anchor in our foundational principles while adapting efforts to focus on the short-term needs of our people through the early stages of the crisis. In 2021 our core initiatives resumed, balanced with ongoing responsive supports connected to the pandemic.

In many ways the past two years have been more active and productive for the Wellbeing Initiatives Team than they would have been under normal circumstances. The pandemic has taught us much about how essential it is to prioritise wellbeing, and to promote and protect people's experience of work and study during major disruptions of lockdown and remote learning. These are lessons that we will no doubt carry forward into the future in the ways we design work and study experiences. The pandemic has highlighted the sector-wide cultural and systemic factors that impact wellbeing, putting a clear focus on the socio-economic, environmental and political determinants of mental health and wellbeing.

What the next year will bring in terms of the pandemic response remains unclear. But my team and I, along with our RMIT Leaders, remain fully committed to the principles underpinning the Mental Wellbeing Strategic Action Plan.

Our approach is not designed as a short-term fix for risks or problems that are easily identified and remedied or removed. While student and staff supports such as counselling and employee assistance programs are crucial to our ongoing work for those confronting wellbeing challenges or mental ill-health, the Plan was designed to shift our attention towards promotion, prevention and early intervention activities that address more the underlying causes of work- or study-related distress. This focus on upstream factors is a key pillar in our work and features heavily in this Annual Report.

Just as physical health requires a range of services that promote healthy behaviours and prevent illness or injury, research shows that mental wellbeing services need to span the whole spectrum of people's experiences, including those who are generally "well" most of the time. Keeping people well is as important as helping people to recover, regardless of the situation but especially during challenging times like a prolonged and highly disruptive global pandemic.

This report covers a broad range of evidence-based interventions delivered by a strong collaborative network including information sessions and webinars, mindfulness and skills training, digital communications and campaigns, focus groups, workshops and surveys.

I am exceptionally proud of the work reflected within this Annual Report. I acknowledge that more needs to be done, but we are confident that we are on the right path for the RMIT community. Thanks to the participation in our 2021 Mental Wellbeing Survey and our governance groups we have solid evidence to inform a focus for the years ahead. Here, we will bring a systems lens to ongoing issues raised by students and staff in relation to workload, uncertainty, and social disconnection. Even amid ongoing pandemic related challenges, 2022 brings opportunity for us to adopt a recovery mindset: to work sensitively, responsively, and foster a participation-focused approach, at all levels, for wellbeing planning, interventions and support.

RMIT wellbeing

Executive summary

This is the first Annual Report for the Mental Wellbeing Strategic Action Plan 2020-2025 which integrates action on both student and staff mental wellbeing.

The Plan consists of a Vision, the "Why", Guiding Principles, Key Action Areas, and Enablers to ensure a systematic, values-driven and broad-based approach to mental health and wellbeing.

This Annual Report outlines how RMIT is "shifting the dial" of mental wellbeing towards mental health promotion and prevention. The Key Action Areas are aligned with external frameworks for student and staff mental health and wellbeing, and the Plan helps RMIT maintain our commitment to the UN's Sustainable Development Goals.

This Report was compiled by the Wellbeing Initiatives Team, which is a specialist team established within the Health, Safety and Wellbeing area of Operations to deliver all aspects of RMIT's Mental Wellbeing Strategic Action Plan, including the Evaluation Framework which this Annual Report reports against.

The Plan was not fully implemented or formally evaluated in 2020 as envisioned due to the COVID-19 pandemic. As capacity to address longer-term priorities has gradually returned during 2021, early progress has been made to make up for lost time.

Major milestones were achieved in 2021, including the official launch of the Plan (including governance and evaluation structures) and the inaugural Mental Wellbeing Survey of all onshore students and staff (over 3000 responses).

Survey data show that RMIT's Psychosocial Safety Climate was at "medium" risk which, while concerning in itself, is a relatively strong result compared to other Universities around Australia. It means further work is required to make RMIT a more mentally-healthy workplace for students and staff.

Other results show that mental wellbeing was low and emotional exhaustion was high. While these were expected results during a Stage 4 lockdown in Victoria, they remain a significant challenge during the post-COVID-19 recovery period in 2022 and beyond.

This Annual Report also spotlights several local initiatives from across RMIT business areas including Ngarara Willim, CoBL, VE, Student Counselling, RMIT Creative, RMIT's Biomedical and Health Innovation ECP, and others. This reinforces the idea that mental health and wellbeing is everyone's responsibility.

This Report also details key student and staff data points to measure outcomes and impacts for this long-term Strategic Action Plan. Many indicators are currently severely affected by COVID-19, which has been extremely challenging for individual and collective wellbeing.

This year represents baseline data and the aim is to monitor trends over time using a data dashboard and then report changes in successive Annual Reports.

Evaluating progress in Key Action Areas

Culture
Significant progress has been made towards actualising RMIT's collective value on care, collaboration, health and wellbeing, so that both groups and individuals thrive in work and learning.

Systems
Some progress has been made towards enhancing the way people work and study, the prevalence of psychosocial risk, and the rates of psychosocial injury.

Skills
Some progress has been made towards improving the links between mental health promotion activities, psychosocial protective factors, and the emotional and psychological wellbeing of staff and students.

Supports
Some progress has been made towards strengthening a continuum of wellbeing supports, upstream service enhancement, and improvement of downstream services.

What's next? Our Focus for 2022

Invest in RMIT's Psychosocial Safety Climate

We are offering mental wellbeing action planning workshops and resources for local areas within RMIT, as well as finalising our Psychosocial Risk Management approach to align with current and anticipated legislation requirements.

Increase social wellbeing

We will create ways for students to build their social wellbeing skills, belonging and sense of connection. Our work includes on-campus activities and events in collaboration with RMIT student life, Teaching and Learning staff, and our partners, to give students more opportunities to feel and be part of the RMIT community.

Acknowledge and address staff exhaustion levels

While exhaustion levels may alleviate naturally over the course of 2022 as regular teaching practices approach pre-pandemic levels (i.e., no prolonged lockdowns and more face-to-face contact) our team will turn a focus towards understanding and formulating the impact of workloads and other psychosocial risks that predate the pandemic.

Suicide prevention strengthening

We will review the interim postvention approach, materials and tools to further enhance our postvention approach, while expanding the process to include an aligned approach to respond to sudden deaths of staff in our community.

Capability building for wellbeing and respect

2021 saw the development of a draft capability framework in consultation with staff and students. Our hope is that this framework will support the development of a more coordinated approach to skills and training, to set some fundamental standards for our community, and to support students in developing 21st century employability skills.

Data dashboard and Evaluation

Maintain the university's commitment to collecting data and feedback about mental wellbeing, including a 2022 Mental Wellbeing Survey. We will adopt a more systematic quality improvement lens across the initiatives we implement and collaborate on with other areas of RMIT.

Wellbeing at RMIT
2021 highlights

Culture

Launched our staff
Wellbeing Hub
with visits from 701 staff

Maintained our
RMIT Together
student Facebook group, providing wellbeing information to a community of 3630 members

Partnered with batyr
to amplify student voices - 14 students recruited to executive group and 129 attendees at 6 lived experience talks

Worked with
58 Mental Wellbeing Champions
to share staff and student perspectives on mental wellbeing

Support

7865
counselling sessions provided to 2391 students and reduced wait list times to under 10 days

Provided more than
23,200 days
of additional Wellbeing Leave to staff in semester 2

1380 hours
of EAP counselling provided to 553 staff and their families.
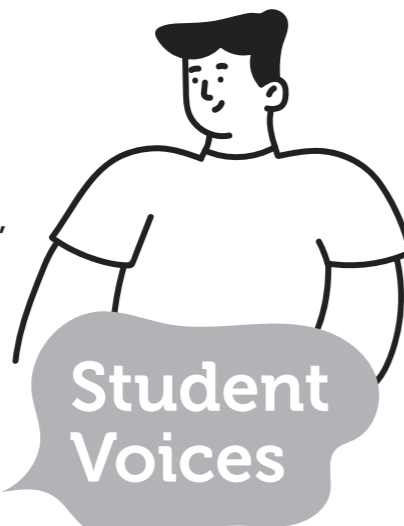
Tailored practical and emotional support
for students and staff during distressing times

Systems

Launched our evidence-based model
Five Ways to Wellbeing
Give • Keep Learning • Take Notice • Connect • Be Active

Aligned
RMIT's processes and procedures with the Universities Australia suicide postvention toolkit

3350 staff and student
responses to our first-ever whole-of-community Mental Wellbeing Survey to guide wellbeing initiatives into 2022

Skills and Experiences

1144 staff & 788 students
grew skills at wellbeing webinars, workshops and training

Student Voices
created 11 videos with RMIT students highlighting study and wellbeing skills

Learn more about mental wellbeing at RMIT

RMIT wellbeing

Meet the team...

The Wellbeing Initiatives Team is a specialist team established within the Health, Safety and Wellbeing area of Operations to deliver all aspects of RMIT's Mental Wellbeing Strategic Action Plan, including the Evaluation Framework which this Annual Report reports against.

The team includes clinical and organisational psychologists, mental health researchers, and project management and population health experts equipped to administer a wide range of programs to both students and staff. Much of their work over 2020 and 2021 was focused on spearheading wellbeing activities to tackle COVID-related stress across the RMIT community to help people deal with uncertainty, grief and loss, social isolation, or disruptions to work and study.

It is important to note, however, that the Wellbeing Initiatives Team does not provide one-on-one counselling or EAP services. Instead, the team uses a "many-to-one" mental health promotion approach to provide information and support to large groups of individuals, teams, work areas, leaders, or the whole RMIT community through information sessions, training, focus groups and workshops, campaigns and messaging, or other means as necessary.

Population mental health is for everyone, including those who consider themselves to be well, and is better suited to the overarching promotion, prevention and early intervention principles underpinning the Strategic Action Plan, and so complements more traditional therapeutic counselling and recovery services.

...and our supporters

The work of the Wellbeing Initiatives Team would not be possible without the contribution of many others across RMIT. We would like to acknowledge all those who have lent their support as well as those who have engaged in Mental Wellbeing initiatives, whether directly or indirectly, in the many ways that go above and beyond their day-to-day work or study.

These include members of our Governance Groups (Strategic Advisory Committee and Research Advisory Group), our Mental Wellbeing Champions dotted around the community, our Student Executive volunteers, and many more. See here for more.

Our heartfelt thanks to you all. ♥

RMIT wellbeing

PART 2

Philosophy and Concepts

RMIT wellbeing

Defining mental wellbeing

The World Health Organization defines mental health as "a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community". In this context, mental wellbeing is part of "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (WHO, 2020).

These WHO definitions tend to prioritise the individual and individual factors of mental wellbeing as opposed to wider social or cultural factors. A broader conceptualisation of mental wellbeing continues to evolve over time. More recent formulations define mental health as "a dynamic state of internal equilibrium which enables individuals to use their abilities in harmony with universal values of society" (Galderisi et al, 2015) but, again, the focus is on the internal state of the individual.

Along with First Nations peoples of Australia (Gee et al, 2014), RMIT embraces internal/individual and environmental/cultural factors of social and emotional wellbeing, such as:

- The need for cultural understanding
- The impact of history in trauma and loss
- Recognition of human rights
- The impact of racism and stigma
- Recognition of the centrality of kinship
- Recognition of cultural diversity
- Recognition of Aboriginal strengths.

Noogal means "belonging" in the Woi-wurrung and Boon-wurrung languages of the Eastern Kulin nations, some of the Traditional Owners of Naarm (Melbourne). *Durrung* means "heart" in the Woi-wurrung language. Vietnamese culture also emphasises "collectivist" values (Ralston et al, 1999) which are aligned with social wellbeing in this context, and so RMIT's approach needs to be holistic, global and inclusive of all its people.

As described below in relation to the Mental Health Continuum, RMIT places equal importance on both the social (noogal) and emotional (durrung) aspects of mental wellbeing for our people individually and collectively as a whole organisation.

- Individual mental wellbeing is the type we are most familiar with, namely our personal experiences of emotional, psychological, and social wellbeing.
- Organisational mental wellbeing is what RMIT displays at a "higher level" than the individual, in terms of our policies, systems and culture.
- In-between these two "levels", there are also factors related to work and study. This is where organisational and individual aspects of mental wellbeing interact. For example, if RMIT is enacting positive mental wellbeing policies and culture at a high level, then the expectation is that individuals will experience more positive mental wellbeing as a result of engaging in (or being exhausted by) work or study.

RMIT wellbeing

The Mental Health Continuum

Languishing
Generally negative feelings, functions, and relationships

Moderate
Mixed or average feelings, functions and relationships

Flourishing
Generally positive feelings, functions and relationships

As part of the evaluation of the Strategic Action Plan, RMIT uses a scientifically-validated measure of mental health/wellbeing named the Mental Health Continuum. People shift along the continuum over time depending on how well they are feeling (emotional wellbeing), functioning (psychological wellbeing), and relating to others (social wellbeing).

This continuum is distinct from, but related to, the continuum or spectrum of experiences of mental ill-health (like anxiety, depression, or general psychological distress). It refers to positive aspects of mental health and wellbeing.

We can divide people's current experiences of wellbeing into three broad categories, at different points on the continuum:

1. **Flourishing**: High levels of wellbeing
2. **Languishing**: Low levels wellbeing
3. **Moderate**: Medium levels of wellbeing

The Plan is designed to help people move up the continuum, not only because it helps support work and learning outcomes, but because we want everyone in our community to have the opportunity to live full and meaningful lives.

RMIT's use of the Mental Health Continuum is an evidence-based approach using scientific measures such as the Mental Health Continuum Short-Form (Keyes, 2002). However, aligned with The Okanagan Charter's framework for health promoting universities, we recognise that health is an expanding concept and that the Mental Health Continuum cannot capture all aspects of an individual's health and wellbeing.

For example, The Okanagan Charter also accepts findings from the World Health Organization's 2012 Our Planet, Our Health, Our Future initiative stating that all human health "ultimately depends on ecosystem services that are made possible by biodiversity and the products and services derived from them."

RMIT wellbeing

Shifting the dial

The Mental Wellbeing Strategic Action Plan 2020-2025 has four key action areas spread along the Mental Health Continuum:

RMIT is "shifting the dial" of mental wellbeing towards mental health promotion and prevention.

This means investing in programs aimed at keeping people well instead of just providing support for those who may be struggling with mental ill-health. This is why RMIT created the Mental Wellbeing Strategic Action Plan 2020-25.

1. CULTURE	2. SYSTEMS	3. SKILLS & EXPERIENCES	4. SUPPORTS

"Shifting the dial" means improving **Systems**, **Skills & Experiences** that increase engagement and **PROTECT** against work- or study-related exhaustion or burnout.

"Shifting the dial" means tackling broader organisational and **Cultural** factors that **PROMOTE** shared values and reduce stigma, discrimination, bullying and harassment.

"Shifting the dial" will also help our **Support** services **RESPOND** more effectively to those in need. RMIT will continue to enhance critical counselling, EAP, crisis, suicide prevention, and other "downstream" services by ensuring there are also "upstream" services available across the entire continuum of mental health.

PROTECT

PROMOTE

RESPOND

Everyone contributes to shifting the dial

Creating a mental healthy Culture at RMIT requires leadership at all levels. If you would like to see more being done to promote mental health in your area, contact the Mental Wellbeing Initiatives team to find out how you can get involved.

RMIT wellbeing

The Strategic Action Plan in more detail

The Plan was developed in 2019 in response to a community call-to-action around mental health and wellbeing and was subsequently endorsed by former Vice-Chancellor, Martin Bean.

The Plan consists of a Vision, the "Why", Guiding Principles, Key Action Areas, and Enablers to ensure a systematic, values-driven and broad-based approach to mental health and wellbeing.

It also defines specific Actions within each Key Action Area so that the Plan can come to life "off the page" and translate into specific, targeted, and concrete activities on the ground.

Although it precedes external frameworks, the Plan's Key Action Areas broadly map onto external frameworks of mental health promotion and prevention in Australia's university context.

For students it reinforces core principles of the Australian University Mental Health Framework, and for staff it aligns with the Blueprint for Mentally Healthy Workplaces (see Table below on page 17).
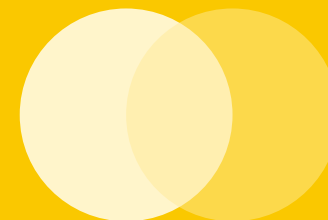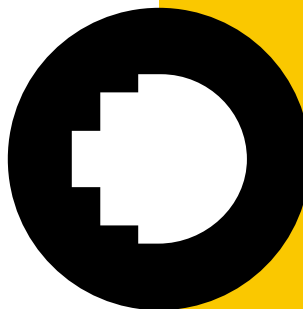
RMIT's integrated approach to student and staff wellbeing

Importantly, the Plan applies to everyone at RMIT regardless of their role as either student or member of staff. Many students go on to become staff and many staff are also students, and both have the right to be part of a community that cares about their wellbeing, so there is no clear distinction between the two.

We also know that staff wellbeing is impacted by the wellbeing of students they work with, and vice versa. Wellbeing is contagious and relational.

The hope is that an integrated approach to mental wellbeing will lead to innovative solutions that tackle work and study issues simultaneously.

Our Mental Wellbeing Strategic Action Plan 2020-2025

Vision

Together we create a mentally healthy community in which everyone can realise their potential and feel safe and supported in their experience of mental wellbeing.

Why

- We value our people and want them to thrive
- Positive mental wellbeing is an enabler of study and work success
- Mental ill-health is growing global challenge with diversity across cultural groups
- Individual and collective resilience helps navigate disruption and change
- There are both individual and organisational influences on mental health outcomes
- There are clear points in the university year that have greater psychosocial risk

Guiding Principles

1. Initiatives are aligned with our values and core priorities
2. Initiatives focus across the mental health promotion, prevention and early intervention
3. We have an integrated, yet tailored approach to student and staff mental wellbeing
4. Mental wellbeing is embedded in all that we do
5. Mental wellbeing as a shared responsibility

Key Action Areas

Culture

1. Articulate our commitment
2. Collaborate for collective impact
3. Grow meaningful engagement and tell our stories
4. Learn, celebrate and share our success

Systems

1. Review and uplift our policies and procedures
2. Identify, address and monitor key psychosocial risks
3. Influence key organisational system levers in teaching, research and work
4. Audit our practices and strive for accreditation e.g. eSmart

Skills and Experiences

1. Build the mental health literacy of our community
2. Increase capabilities to assist others (and self) when in distress
3. Provide tools to proactively build psychological safety and resilience
4. Create physical and online environments that foster mental wellbeing, engagement and access

Support

1. Promote initiatives that support personal mental wellbeing
2. Develop prevention initiatives to support early action
3. Optimise our services and supports for those in need
4. Strengthen our suicide prevention and postvention

Enablers

Leadership
Our leaders are committed and set the tone from the top and invest in mental wellbeing

Partnerships
We partner with internal and external experts to increase our capability, capacity and impact and to respect different ways and knowledges

Evidence
Our work and ways of working are informed by the latest evidence and we use data, monitoring and evaluation to inform decisions
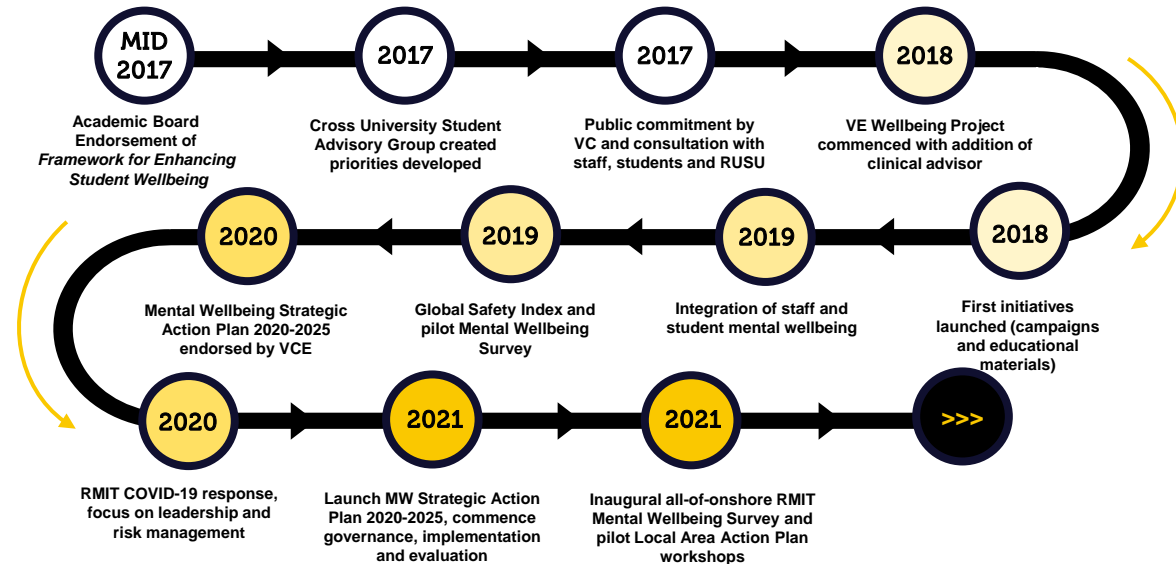
Road to here
Major milestones

Best laid plans in 2020…

The first year of the Plan coincided with the onset of the COVID-19 global pandemic. Evaluation of the long-term Plan was thus overshadowed by more pressing short-term priorities for the Mental Wellbeing Initiatives team, most notably staff and students' immediate distress caused by disruption to their work, learning and living.

This meant that the Plan was not fully implemented or formally evaluated in 2020 as envisioned. As capacity to address longer-term priorities has gradually returned during 2021, early progress has been made to make up for lost time.

MID 2017
Academic Board Endorsement of *Framework for Enhancing Student Wellbeing*

2017
Cross University Student Advisory Group created priorities developed

2017
Public commitment by VC and consultation with staff, students and RUSU

2018
VE Wellbeing Project commenced with addition of clinical advisor

2018
First initiatives launched (campaigns and educational materials)

2019
Integration of staff and student mental wellbeing

2019
Global Safety Index and pilot Mental Wellbeing Survey

2020
Mental Wellbeing Strategic Action Plan 2020-2025 endorsed by VCE

2020
RMIT COVID-19 response, focus on leadership and risk management

2021
Launch MW Strategic Action Plan 2020-2025, commence governance, implementation and evaluation

2021
Inaugural all-of-onshore RMIT Mental Wellbeing Survey and pilot Local Area Action Plan workshops

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RMIT wellbeing

RMIT's Key Action Areas mapped onto external frameworks for student and staff mental health and wellbeing

	RMIT key action areas	Australian University Mental Health Framework	Blueprint for Mentally Healthy Workplaces
Culture	Actualising the organisation's collective value on care, collaboration, health and wellbeing, so that both groups and individuals thrive in work and learning.	3) Mentally healthy university communities encourage participation; foster a diverse, inclusive environment; promote connectedness; and support academic and personal achievement. 4) The response to mental health and wellbeing is strengthened through collaboration and coordinated actions.	**Promote**: Recognise and enhance the positive aspects of work that contribute to good mental health.
Systems	Strengthen the organisational policy and processes that drive to reduce risk and increase protective factors for wellbeing.	6) Continuous improvement and innovation is informed by evidence and helps build an understanding of what works for student mental health and wellbeing.	
Skills and experiences	Strengthen individual and shared literacy for mental wellbeing, promote resilience, and capability to respond to others in distress.	1) The student experience is enhanced through mental health and wellbeing approaches that are informed by students' needs, perspectives and the reality of their experiences. 2) All members of the university community contribute to learning environments that enhance student mental health and wellbeing.	**Protect**: Identify and manage work-related risks to mental health.
Support	Support personal mental wellbeing through optimising support services, and uplifting systems and processes for suicide prevention and postvention.	5) Students are able to access appropriate, effective, timely services and supports to meet their mental health and wellbeing needs.	**Respond**: Build capability to identify and respond to support people experiencing mental ill-health or distress.

RMIT wellbeing

PART 3

Summary report

How did we perform in 2021?

Over the length of the plan, our aim is to build a thorough evaluation over successive reports from year-to-year.

Quantifying outcomes and impact takes time and so this report will highlight baseline measures of Mental Wellbeing Initiatives and their contribution to implementing the Plan throughout 2021.

The Strategic Action Plan will be assessed according to three types of evaluation: process, outcome, and impact.

1. **Process** evaluation describes what was implemented and how successful it was in terms of raw numbers and qualitative feedback.

2. **Outcome** evaluation focuses on whether the implemented activity had the desired effect in the short term and in a specific domain.

3. **Impact** evaluation asks whether the processes and outcomes had more general effects over the long term.

In 2021, the focus is on Process evaluation and the collection of baseline Outcome and Impact data. The emphasis is therefore on progress towards implementing each of the activities listed in the Strategic Action Plan's Evaluation Framework and Logic Model.

Illustrating progress in this report

Each Key Action Area and specific action within each Area are marked to signify progress towards completion or level of ongoing activity. Specific activities are coded as "Yes" if complete/in-place, "Partial" if in-progress or some work achieved, or "Not yet" if not started.

Not implemented
Means yet to begin

Partially implemented
Means incomplete or in development

Fully implemented
Means complete or continuing

RMIT wellbeing

2021 Initiatives mapped onto the Strategic Action Plan

Vision
Together we create a mentally healthy community in which everyone can realise their potential and feel safe and supported in their experience of mental wellbeing.

Key Action Areas

Culture
- R U OK?Day
- Mental Health Month
- Mental Wellbeing Champions
- Student executive (batyr)

Systems
- Local area action planning pilot (WellEducated)
- Psychosocial risk management resources
- 5 Ways to Wellbeing
- Suicide postvention

Skills and Experiences
- Capability framework (draft)
- Assisting Others in Distress training
- RMIT Together & Wellbeing Hub
- Staff and student skills webinars

Support
- Wellbeing leave
- Vicarious Trauma project
- COVID-19 wellbeing checks
- Counselling service model review
- 24/7 Urgent Mental health support line project

Enablers

Leadership
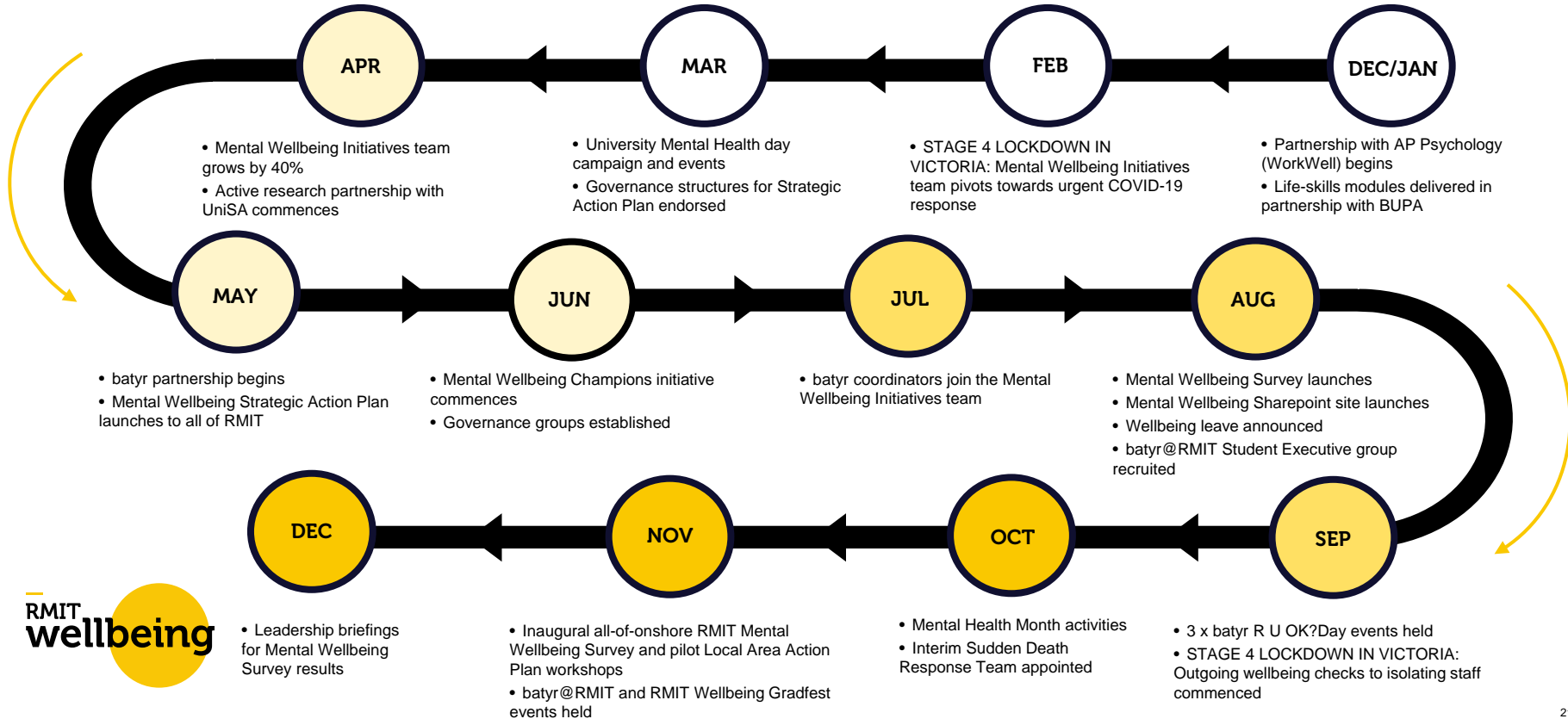Applied Mental Health Leadership (WorkWell)

Partnerships
Benestar, BUPA, and Medibank
batyr
RUSU
Black Dog Institute and headspace
FBG and AP Psychology

Evidence
Evaluation framework
Mental Wellbeing Survey

2021 timeline of key events

APR
- Mental Wellbeing Initiatives team grows by 40%
- Active research partnership with UniSA commences

MAR
- University Mental Health day campaign and events
- Governance structures for Strategic Action Plan endorsed

FEB
- STAGE 4 LOCKDOWN IN VICTORIA: Mental Wellbeing Initiatives team pivots towards urgent COVID-19 response

DEC/JAN
- Partnership with AP Psychology (WorkWell) begins
- Life-skills modules delivered in partnership with BUPA

MAY
- batyr partnership begins
- Mental Wellbeing Strategic Action Plan launches to all of RMIT

JUN
- Mental Wellbeing Champions initiative commences
- Governance groups established

JUL
- batyr coordinators join the Mental Wellbeing Initiatives team

AUG
- Mental Wellbeing Survey launches
- Mental Wellbeing Sharepoint site launches
- Wellbeing leave announced
- batyr@RMIT Student Executive group recruited

DEC
- Leadership briefings for Mental Wellbeing Survey results

NOV
- Inaugural all-of-onshore RMIT Mental Wellbeing Survey and pilot Local Area Action Plan workshops
- batyr@RMIT and RMIT Wellbeing Gradfest events held

OCT
- Mental Health Month activities
- Interim Sudden Death Response Team appointed

SEP
- 3 x batyr R U OK?Day events held
- STAGE 4 LOCKDOWN IN VICTORIA: Outgoing wellbeing checks to isolating staff commenced

RMIT wellbeing

Culture

RMIT wellbeing

Actualising the organisation's collective value on care, collaboration, health and wellbeing, so that both groups and individuals thrive in work and learning.

Our commitment *Articulate our commitment*
Advocacy for inclusion of mental wellbeing in key university strategy documents. **YES**
Support senior leaders to articulate their commitment to prioritising mental wellbeing at RMIT. **YES**
Launch our Action Plan. **YES**

Our way *Collaborate for collective impact*
Develop whole of community engagement model for staff and students to be co-creators of mental wellbeing initiatives. **NOT YET**
Develop governance structures to foster collaboration with RMIT Academics and researchers. **YES**
Foster opportunities for RMIT students' collaboration with RMIT Wellbeing. **PARTIAL**

Our stories *Grow meaningful engagement and tell our stories*
Deliver tailored whole of community mental health promotion and stigma reduction campaigns. **YES**
Consultation with RMIT Academic/s, staff and students with a lived experience of mental ill-health. **NOT YET**
Support staff and students to share their lived experiences in safe ways that support our commitment to reduce stigma of mental ill-health. **PARTIAL**

Our growth *Learn, celebrate and share our success*
Develop the Action Plan Evaluation Framework, including program Logic. **YES**
Produce publications and conference presentations showcasing Action Plan initiatives. **YES**
Create strategic partnerships with other universities **YES**

"Hearing someone share their struggles validates our own struggles and may even give us the courage to share our own."
R U OK? Day event participant

Overall Culture progress in 2021

"There are real-life examples, simple and practical skills, and also fun activities to keep me engaged and informed. Thanks team for the wonderful event.."
R U OK? Day event participant

Example activities

Student executive
RMIT Wellbeing partnered with *batyr* to help raise student voice through RMIT. Fourteen students volunteered to join an executive group to guide *batyr*'s wellbeing activities at RMIT. With the group's input, *batyr* conducted six lived experienced talks with a total audience of 129 RMIT community members.

R U OK? Day
RMIT Wellbeing ran a range of activities to encourage people to check in on one another, including an event featuring ex-AFL star and mental health advocate Wayne Schwass, an art therapy class, and *batyr@RMIT* sessions for students and staff. Resources were posted to the Mental Wellbeing Hub on Sharepoint.

Mental Health Month
RMIT Wellbeing had had two active programs for staff running during the month of October, 2021.
1. *Time for Change*: Self-paced learning about mental health in the workplace. Over 130 employees registered and completed over 520 individual activities.
2. *Webinar Series for Staff:* Covering topics such as "Managing Anxiety through COVID-19", "Safeguarding against Burnout" and "Positive Adaptation: Post-Pandemic Growth". Over 350 people attended the series, with over 100 staff attending two or more sessions.

Mental Wellbeing Champions
RMIT Wellbeing has created a network of 58 Mental Wellbeing Champions across Colleges and Portfolios to share staff and student perspectives on mental wellbeing. Champions help to amplify campaigns around Mental Health Month and R U OK? Day and meet quarterly as a group to share their experiences with RMIT Wellbeing and each other.

PROTECT
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Shifting the dial

Spotlight on
Ngarara Willim

Development of the "Cultural Safety at RMIT" Workday training module

"Cultural Safety at RMIT" learning module was the initiative of Ngarara Willim and is part of *Reconciliation: racism and cultural safety*.

As a community, all students and staff should feel culturally safe within RMIT learning and working spaces. To achieve this, we must do our best to create safe environments for ourselves and those around us, including calling out behaviour that has the potential to cause psychological harm to others.

Students are studying for many different reasons and connect with culture in diverse ways. They are a valuable part of the RMIT community and are at the heart of the Ngarara Willim Centre. RMIT is here to support them during their study and beyond. One of the important ways we can do this is by working with staff to ensure their experience is a culturally safe one.

Universities Australia Indigenous Strategy 2022 – 2025 details "Racism and cultural safety commitments" which highlight the expectation of cultural safety training to be provided to all staff.

Cultural safety was intended to reduce alienation from existing services by ensuring that organisations in general, as well as individual employees: understood the broad contours of the history of colonial violence and dispossession producing…inequalities; and also undertook to suspend their own ethnocentric views in favour of respecting alternative worldviews and cultural practices, prioritising the needs and preferences of their clients (Australian Human Rights Commission, 2018).

Through the "Cultural Safety at RMIT" training module, Ngarara Willim sought to help staff to:

— Understand the meaning of the terms cultural and emotional intelligence.

— Understand the different levels of cultural capability from awareness to cultural safety.

— Know how to act respectfully in relation to Aboriginal and/or Torres Strait Islander students and staff, and action this accordingly.

— Be able to create working and learning environments in which Aboriginal and/or Torres Strait Islander students and staff will flourish.

**RMIT wellbeing**

Spotlight on
RMIT Creative

Creative Wellbeing Festival

RMIT Creative sought to improve the resilience and wellbeing of the RMIT student cohort through creative commissions developed by students in a supported peer-to-peer process.

Goals for the Festival included:

— developing the creative capacity for self-expression and professional practice of the commissioned student artists

— fostering a creative and caring community of RMIT students and start/continue conversations about wellbeing and mental health

— directing students who are in need to RMIT's other wellbeing support offerings e.g. Five Ways to Wellbeing, RMIT Together Facebook groups, as well as RMIT's Mental Wellbeing initiatives and the RMIT student counselling service.

— Eight student artists were commissioned from four areas of study (arts, design/comms, science/biomed, and engineering) to co-create the project, and to produce creative wellbeing artworks for the whole RMIT community to enjoy.

— Five artworks were produced by six students in 2021, with delivery of a further on-campus artwork in 2022 planned.

— Artworks included:

  • a curated *Affirmation Exchange* involving personalised affirmation illustrations or videos created and curated especially for the recipient - by Vanessa Kiliari and Phoebe Thompson

  • a creative wellbeing zine titled *Day by Day* including wellbeing invitations and mindful activities - by Wipawan 'Peach' Witayathawornwong

  • an online playable planner titled *Life in Progress* allowing students to gamify their student life, check in with their feelings, track self care, and unlock joyful animations and affirmation for their progress - by Hsiao Wei Chen (Michelle)

  • videos and interactive social media conversations about the experience of students with non-English names titled *Orúkọ Yorùbá (My Yoruba Name)* - by Oluwafolakemi Bolarinwa

  • and an interactive virtual space for students to explore, play and exchange messages of support and connection titled *Fessona* – by Manav

— Throughout the Festival, Creative Communities and RMIT University digital channels received a total of 38,472 views and 2,149 responses.

— Students who engaged with artworks were invited to share feedback, and 89.3% of student participants reported learning creative and new ways to approach wellbeing.

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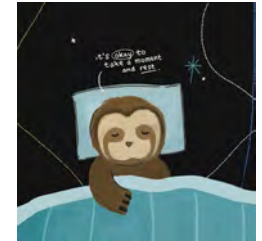
Systems

Evaluating the links between the way people work and study, the prevalence of psychosocial risk, and the rates of psychosocial injury.

Our policies *Review and uplift our policies and procedures*
Create a plan, process action plan and consultation process for suicide prevention approach. **PARTIAL**

Our responsibilities *Identify, address and monitor key psychosocial risk*
Enhance process for identifying, addressing and monitoring psychosocial risks. **NOT YET**
Develop a planned approach and consultation process to develop resources for local/program level psychosocial safety management. **YES**

Our systems *Influence key organisational system levers in teaching, research and work*
Embed key mental wellbeing information (e.g. model for wellbeing, key supports) into student curriculum. **PARTIAL**
Embed mental wellbeing as a key consideration of RMIT research. **PARTIAL**
Embed key mental wellbeing information (e.g. model for wellbeing, key supports) into staff programs. **NOT YET**
Strategic communications plan for whole of community to embed mental wellbeing messages. **NOT YET**
Uplift influential groups, networks and leaders incl. HSW, champions networks, advisory groups. **YES**

"I loved being able to have suggestions for wellbeing come right up on my feed."
Calm Zone user

Overall Systems progress in 2021

RMIT wellbeing

Example activities

Well Educated pilot workshops
RMIT Wellbeing partnered with experts from the University of South Australia to run workshops and provide follow-up coaching/mentoring for four groups, representing 2 Schools, 1 Cluster and 1 Portfolio area. Equipped with Mental Wellbeing Survey Results, teams learned about Psychosocial Safety Climate in their local area and worked towards a tailored Action Plan to address issues important to their colleagues and students.

Psychosocial risk management approach
Workplace psychosocial hazards are psychological and social factors in the workplace that have the potential to pose a risk to the mental health and wellbeing of staff. These variables can include high workloads, exposure to trauma in the workplace, poorly managed change, and bullying amongst many others.

We are currently in the process of developing RMIT's Psychosocial Risk Management Approach, which aims to articulate:
- The purpose and vision for psychosocial risk management at RMIT
- The way in which psychosocial risk management will be governed
- The process of psychosocial risk management (and associated roles)
- The approach to psychosocial incident investigations.

The first draft of the Psychosocial Risk Management Approach is now in consultation with senior stakeholders, with a target date for implementation of end Q1 2022.

5 Ways to Wellbeing
5 Ways to Wellbeing is an evidence-based model that RMIT has formally adopted to structure our mental health promotion communications and activities. The 5 Ways are:
- Connect – Talk and listen, be there, feel connected.
- Be active – Do what you can, enjoy what you do, move your mood.
- Keep learning – Embrace new experiences, see new opportunities, surprise yourself.
- Be aware – Remember the simple things that give you joy.
- Help others – Give your time, your words, your presence.

These behaviours help us to communicate the "how to" of practical self-care. For more information, visit our dedicated website. The Five Ways to Wellbeing were developed by the New Economics Foundation (NEF) on behalf of the Foresight Commission in the UK.

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Shifting the dial

Spotlight on
College of Business and Law

Planning and Resources Wellbeing Plan

In response to the impacts of the pandemic and remote working on staff mental wellbeing, a wellbeing plan was made to uplift and reinvigorate staff connections within the college.

A working group was formed to project-manage the variety of activities planned, and a wellbeing community of practice was set up with representatives from all schools/portfolios.

In consultation with the Staff Wellbeing Manager, the working group developed a survey for the college's Students and Operations teams to evaluate 2021 activities and to help inform psychosocial risk planning needs and actions.

The CoBL wellbeing working group organised:

— 4 Lunch and Learn sessions
— 8 online trivia sessions
— *Walk this May* with nearly 400 participants from across the University
— a mini buddy program to support staff during the 2nd lockdown
— an R U OK?Day online morning tea for the College
— local morning teas to recognise everyday staff achievements
— a College blood donation account and ran a blood donation drive
— a CoBL Wellbeing Hub Sharepoint site, hosting a Mindfulness resource hub

RMIT wellbeing

Spotlight on
Suicide Prevention
Sudden Death Response Team

One of the four key action areas within the RMIT Mental Wellbeing Strategic Action Plan 2020-2025 is developing a Systems approach, which includes strengthening our suicide prevention and postvention supports.

Prevention means trying to stop suicide from occurring in the first place. Postvention means supporting people in our community who are exposed to a death by suicide.

Both are equally important because clear postvention protocols can help prevent suicide contagion and reduce the risk of suicide in those affected, directly or indirectly. Research suggests (Maple & Sanford, 2019; Cerel et al., 2018; Cerel et al., 2014) that approximately 135 people are exposed to each suicide death that occurs, so postvention requires a dedicated System to ensure people are safe and supported.

RMIT Wellbeing conducted a gap analysis in 2021 and recognised that more systematic postvention policies and procedures were urgently needed as the first pillar in a wider prevention plan. The Team consulted widely across RMIT (Health, Safety and Wellbeing, Student Services, StaffLine, Security, Safer Community, CIMT and Communications) to establish a clear postvention approach aligned with the Toolkit for Australian Universities. This outlines incident response and aftercare approach following a sudden death in our community.

Recognising the risk of suicide contagion, included in this approach was the establishment of a multi-disciplinary Sudden Death Response Team (SDRT) to:

— coordinate an institutional response to sudden deaths of students in our community

— provide safe communications about the death

— provide practical and emotional support to students and staff during these times.

Throughout August-December 2021, this approach was implemented by the SDRT for institutional responses to sudden deaths in our community, providing much needed support to staff and students during those challenging times.

RMIT wellbeing

Skills and Experiences

Evaluating the links between mental health promotion activities, psychosocial protective factors, and the emotional and psychological wellbeing of staff and students.

Our knowledge
Build the mental health capability and literacy of our community
Develop a model for promoting mental wellbeing. **YES**
Provide mental health promotion and literacy through various comms channels. **YES**
Develop a mental wellbeing skills capability & resilience framework. **PARTIAL**

Our skills
Increase capabilities to assist others in distress and look after own wellbeing
Student and staff training Assisting students/others in distress. **YES**
Source and/or deliver skills specific training around self-care, supporting others, and resilience. **PARTIAL**

Our resources
Provide tools to proactively build psychological safety and resilience
Develop staff and student engagement plan to share our resources and support implementation. **PARTIAL**
Resources are made readily available, easy to access, download and implement. **YES**
Explore digital mental health promotion tools that offer scale and impact. **PARTIAL**

Our environments
Create physical and online environments that foster mental wellbeing, engagement and access
Develop online spaces for Champions groups and Communities of practice collaboration. **YES**
Strengthen online channels for wellbeing skills e.g. Facebook, Yammer. **YES**
Enhance access to online resources, online architecture and website uplift. **YES**

"Calm zone gives students like myself the ability to openly share and exchange ways in which we manage everyday stressors."
Calm Zone user

Overall Skills and Experiences progress in 2021

"I work with students every day and it is really important to learn how I can assist them effectively."
R U OK? Day event participant

RMIT wellbeing

Example activities

Capability framework
In order to embed sustainably high levels of wellbeing across our community, we need all staff and students to have some level of proficiency in mental health, wellbeing and respect. RMIT's Mental Wellbeing and Respect Capability framework was drafted in consultation with staff and students. It outlines the key capabilities required for students, student leaders, staff, managers and senior leaders to effectively support the wellbeing of self and others, to manage workplace risks to mental health, to respond to disclosures of sexual harm and disrespectful behaviour and to promote and embed a culture of care across our community.

The capability framework is currently in draft and is sitting with senior stakeholders for further consultation.

Assisting Students/Others in Distress training
Equipping university staff with the knowledge and skills to recognise and refer students in need is a critical strategy for increasing access to support services. 2021 saw the expansion of our blended training approach being extended to students, with a student Mental Wellbeing Essentials module on canvas and an in-person/virtual training pilot, a program that mirrors the staff training (offered regularly throughout the year)

Virtual Calm Zone, RMIT Together & Wellbeing Hub
In 2021, while most students and staff were working and studying remotely, RMIT Wellbeing focused on creating digital environments such as the collaboration with the student union RUSU for the Virtual Calm Zone (approx. 600 page views), the Wellbeing Hub for staff (701 visitors), and RMIT Together Facebook student group (3630 members).

Webinars, workshops and training
Population mental health involves spreading information on a "many-to-one" basis, which differs to counselling and other "one-to-one" wellbeing services. Online webinars, workshops and training sessions served as the primary way to disseminate information while most people were working and studying from home. A range of topics were covered such as "Managing anxiety though COVID-19", and "Protecting against burnout". All were well attended (1144 staff and 788 students) and feedback was generally very positive.

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Shifting the dial

Spotlight on
Ngarara Willim – Counselling Partnership

Collaborating for the wellbeing of Aboriginal and Torres Strait Islander students

Recognising the benefits of strong connections between Ngarara Willim and RMIT Student Counselling, in 2021 the teams joined forces to formalise their working relationship.

Over a series of monthly meetings, RMIT counsellors and Ngarara Willim staff were able to share resources, ideas, and experiences. These meetings resulted in the revival of a buddy network between counsellors and Ngarara Willim staff (4 pairs of buddies in 2021, and 5 in 2022) allowing for regular consultation, collaborations, and opportunities to seek advice on areas where the services overlap.

Ngarara Willim facilitated two opportunities for counselling staff to meet with local elders connected to RMIT (N'arweet Carolyn Briggs AM, Boon Wurrung elder, and Auntie Di Kerr, Wurundjeri elder) to upskill the team in cultural literacy and context, and mental health skills for working with Aboriginal and Torres Strait Islander students.

Other outcomes of the collaboration in 2021 included:

— The creation of a new designated position for an Aboriginal or Torres Strait Islander mental health social worker or psychologist, working within the student counselling team.

— Ngarara Willim staff consulting on counselling space design and decoration to make the environments more welcoming, including incorporating natural elements and Indigenous artworks into the counselling and waiting rooms.

— Counsellors visiting the Ngarara Willim centre in the city campus during their 2021 review day so the teams could meet face-to-face, and to orient counsellors to the Ngarara Place Indigenous garden and design space.

— An *On Country* week-long camp planned for students for late 2021, with an RMIT counsellor attending and participating throughout - unfortunately deferred to 2022 due to lockdowns.

RMIT wellbeing

Spotlight on
Vocational Education

Building Design and Business Administration activities

Recognising the importance of mental wellbeing and the impacts of lockdowns, the Building Design area within the College of VE facilitated activities to benefit staff and students:

- 15-minute wellbeing sessions during lockdown for all students and staff, reaching 220 students and eight staff. Sessions were delivered by a member of the Wellbeing team and held to address concerns about the impact of lockdown. Sessions were scheduled in class time to increase attendance, and resulted in greater engagement between students and staff, as well as increased support-seeking by students.

- A batyr@RMIT session held for final semester building design students. 35 students attended and feedback was gathered about the session to confirm usefulness and relevance. Of those students who attended, 43% indicated they were or might be more likely to reach out for support if they needed it, and 93% said it was important to hear from other young people about mental health.

As part of their program, Diploma of Business Administration students organised a mental health conference, including sourcing expert speakers.

Topics included:

- Stigma reduction

- Self-care and social interaction

- Impacts of social media on mental health

- Mindfulness to support positive mental health

Attendees and organisers felt encouraged to 'smash the stigma', and one student organiser followed up by joining the batyr@RMIT student executive group to share their own experiences around mental health and help others at RMIT.

RMIT
wellbeing

Supports

Evaluating the links between a continuum of wellbeing supports, upstream service enhancement, and improvement of downstream services.

Our model *Promote initiatives that support personal mental wellbeing*
Offer wellbeing initiatives connected to the wellbeing model. **YES**
Student focused events: Orientation, wellbeing support during assessments, Calm Zone for exams. **YES**
Staff focused events: Wellbeing sessions, individual wellbeing professional development and training. **YES**

Shift the dial *Develop prevention initiatives to support early action*
Use data to inform area and population specific prevention initiatives (e.g. enhanced peer support options, promotion of EAP). **PARTIAL**
Collaborate to review and create plan for best practise for prevention, with attention to tailoring for target populations (e.g. international students). **NOT YET**

Our supports *Optimise our services and supports to those in need*
Quality improvement initiatives in Student and Staff Supports Services e.g. counselling service, student support, ELS and EAP etc. **PARTIAL**
Injury Management Team optimise return to work processes. **NOT YET**

Prevent, prepare, respond *Strengthen our suicide prevention and postvention protocols and processes*
Support the development of the headspace postvention toolkit for the sector. **YES**
Review of RMIT's current approaches . **YES**

"We've listened to you, your leaders and line managers, and can see that, while our support services are great, it's time to help our people in new ways."

Interim Vice-Chancellor, Dionne Higgins

Overall Supports progress in 2021

"I liked how everyone supported each other and shared our feelings and thoughts."

Calm Zone participant

RMIT wellbeing

Example activities

'Take a break' - Wellbeing leave and University-wide slowdown
In August 2021, RMIT Executive Leadership recognised that staff were struggling with energy levels after nearly two years of pandemic-related uncertainty, intermittent lockdowns, and disruptions to work and learning. To help people recharge, fixed-term and continuing staff across all global locations had the opportunity to take five additional leave days in support of their wellbeing. Because it's also sometimes hard to take a break, RMIT also agreed to a University-wide slowdown in Australia from Monday 30 August to Friday 3 September.

Nearly 5000 staff took advantage of the 'Take a break' Wellbeing Leave , totalling over 168,000 hours of time off (or 23,000 days). This industry-leading intervention represents a true promotion and prevention initiative, aiming to boost mental wellbeing across the entire continuum.

COVID-19 wellbeing checks
Inspired by a suggestion received from a concerned VET Trainer and Assessor, the Wellbeing Team initiated weekly "welfare check" phone calls to VE staff who were isolating due to COVID-19 exposure or illness. This offering was expanded to include all COVID-positive staff. Many people reported struggling with feelings of social isolation, excessive worry, general distress, anxiety, fatigue or depression. The calls were designed to keep people's spirits up by reminding them that, although isolated, they were not alone in their experiences and that there were other supports available like EAP or student counselling if they felt they needed it.

Vicarious trauma project
Sometimes people can develop posttraumatic stress reactions when engaging empathically with another person's traumatic experiences. Trauma is common among university students (estimated 85% lifetime prevalence) and professionals working in tertiary education are likely to be indirectly exposed to students' traumatic events.

Delivered in partnership with FBG Group, the vicarious trauma project aimed to develop a framework to prevent, mitigate, and support recovery from vicarious trauma in staff working in student services roles. The framework was informed by in-depth consultations with staff and a detailed desktop review of latest literature. Recommendations included training for staff at high-risk of exposure, training for supervisors and managers to identify signs, and a debriefing framework. Training for supervisors was conducted last year as the first step towards implementing this framework.

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Shifting the dial

Spotlight on
Student Counselling

Reducing waiting times for students seeking psychological support

With wait times for mental health treatment at some public mental health services averaging 5 weeks (headspace, 2019), and in some cases stretching into 3 or more months during the pandemic (Elias, 2021), RMIT student counselling has been striving to make appointments more rapidly available to students who are seeking support.

Service changes including increasing staffing, offering new on-the-day appointment slots for those with urgent needs, as well as proactive contact from counsellors to encourage more prompt appointment cancellation if students could no longer attend, so that those times could be made available to other students.

Average wait times for an initial appointment at the RMIT student counselling service reduced from 12.6 days in 2019 to 10.2 days in 2020, and then further to 9.5 days in 2021.

Other service improvements

— When RMIT ceased most on-campus activities in March 2020, RMIT student counselling shifted to video and phone appointments with no break in service delivery. As we move back into on-campus activities in 2022, counselling will be planning and implementing a hybrid (face-to-face and phone/video counselling) service delivery model for the first time, to ensure the service is accessible to on- and off-campus students.

— RMIT student counselling provide 9am-5pm Duty Work support, with a psychologist available to reach out to students in distress, assess risks, and consult with staff. This has been complemented by an after-hours mental health and support crisis line available to students via phone or SMS. Plans to expand this crisis line to be available 24 hours each day were progressed over 2021, and this expanded service was made available to students in early 2022.

— In addition to providing 7865 sessions of one-on-one counselling, the service delivered 55 webinars and workshops for staff and students over 2021.

RMIT wellbeing

Leadership

RMIT
wellbeing

Our leaders are committed, set the tone from the top and invest in mental wellbeing.

Although the Strategic Action Plan was spurred by a community call-to-action in 2018 and 2019, it would not have come to fruition without RMIT leaders listening, engaging and responding to their people.

This includes leadership at all levels, and is enacted through the ongoing commitment, leadership communication, governance groups, reporting mechanisms and opportunities to participate. See here for a full list of our sponsors and governance group membership.

Leading for mental wellbeing means being equipped with knowledge, skills and capability. Our activities in 2021 progressed this work through a Partnership with AP Psychology/Workwell to join four other universities in training offerings focused on increasing psychologically safe workplaces.

> *"I find myself missing my normal routine and being among our RMIT community on campus, a place where I draw so much energy from."*
>
> **Martin Bean, Vice-Chancellor in 2020**
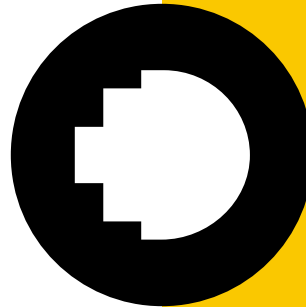
> *"I encourage you to rest, relax and take care during the slowdown period."*
>
> **Michael Vanderheide, Interim Chief Operating Officer**

Example activities

Workshops for people leaders
The Wellbeing Initiatives Team provided workshops to give people leaders the opportunity learn more about general wellbeing issues and more specific topics for particular situations or work areas. More than 25 sessions were delivered in 2021 to introduce evidence of best practice on general wellbeing principles such as "Safeguarding against burnout", "Self-care for leaders", and "Fostering sustainable wellbeing". The sessions also addressed more urgent or forward-looking concerns such as "Supporting Wellbeing Through Lockdown" and "Managing Anxiety around Return to Campus".

Leadership briefings: Mental Wellbeing Survey
Leading for mental wellbeing includes preparing leaders with the knowledge and data to understand their groups and inform best practise. Prior to the 2021 MW Survey result being made available to all students and staff, briefings with onshore College and Portfolio leadership groups were delivered. These sessions gave leaders the opportunity to learn about the survey measures and what they mean for the wellbeing of their people. They were also encouraged to think about how they will circulate their own local area results in the shorter term, and how they can promote mental wellbeing in the longer term.

Spotlight on
Staff Leaders

WorkWell Applied Mentally Healthy Leadership (AMHL) Project

"Building a Psychologically Safe and Thriving Workplace"

The WorkWell Applied Mentally Healthy Leadership Project is about workplaces proactively creating safe and mentally healthy environments. RMIT partnered with AP Psychology (funded through Worksafe) to join four other universities on the project.

The project was educational, increasing executive leaders' and their direct reports' capability to identify psychosocial risks and reduce work-related psychological harm. The program used an evidence-based systemic approach to psychological safety to support leaders in driving positive change directly in the team environment.

The program was delivered using a blended learning approach, beginning with a workshop and followed by an engaging, social and interactive digital platform.

All Executive leadership staff attended the workshops. Then they, with their direct reports, were invited to complete four online learning modules to enhance their understanding and skills around mental health in the workplace, including:

- psychological safety and its evidence base,
- leading by example,
- applying prevention and intervention strategies around mental health, and
- building a team strategy for mental health.

Time for Change

Time for Change was an extension of the AMHL online learning platform made available to all staff. It was launched in October 2021 during Mental Health Month.

Between October 2021 and February 2022, AMHL and Time for Change recorded:
- 118 managers and 166 regular staff registering for the platform.
- 1256 activities completed, 131 badges achieved and 270 self-care activities undertaken.
- A quarter of managers (8/34) completed the full certificate, below the sector benchmark completion rate (28%).
- Completion rates for the Time for Change (58%) program were above sector averages (52%).

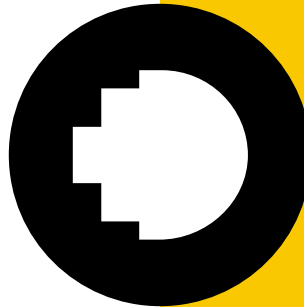**RMIT wellbeing**

Partnerships

We partner with internal and external experts to increase our capability, capacity and impact and to respect different ways and knowledges.

The University Framework for Mental Health (principle four) notes how population wellbeing is strengthened through collaboration and coordinated actions.

The Plan acknowledges the essential role that expertise within RMIT plays in guiding and participating in RMIT initiatives, as well the importance of partnering with external organisations and institutions whose primary focus is on mental health and wellbeing services, consulting, and research.

Our 2021 partnerships have enabled us to be confident in our approach, and to implement a broader range of evidence-based initiatives. These collaborations unlock the potential for cross disciplinary action, inter-sector learning, and greater impact.

We would like to express our gratitude to all the people, groups and organisations who we have partnered with over the year. It is through this spirit of collaboration that we can more generously shift the dial for whole of community wellbeing. For a full list of our governance groups and partnerships see here.

Example activities

headspace: Coaching on suicide postvention
RMIT wellbeing has engaged with headspace throughout 2020 and 2021. Our initial activity was contributing to the development of Universities Australia and headspace's *Responding to Suicide: A Toolkit for Australian Universities.* headspace has also generously offered coaching and support for our developing sudden death response team, a valuable partnership to work through very complex scenarios.

Black Dog Institute (BDI): Leading for Mental Wellbeing Project
Our partnership with BDI commenced in 2020 where we supported the delivery of leadership forums for VE. Following this, the BDI training *Understanding workplace mental health and wellbeing* is now available to all staff on Workday, our staff learning platform. The aim of the training is to provide practical ways to increase workplace resilience and share evidence-based strategies for individual and team wellbeing.

FBG Consulting: Vicarious Trauma Risk Management Project
Our partnership with FBG commenced in 2021 to develop a leading practise framework to reduce and manage the risk of exposure to vicarious trauma for student services staff. Activities included a desktop review and facilitated focus groups to understand the frequency, experience and impact of potentially traumatic events. A framework was produced that outlined prevention, mitigation and recovery initiatives that could be applied in service areas.

Spotlight on
RMIT's Biomedical and Health Innovation ECP

RMIT Mental Health Research Innovation Network

The RMIT ECP Post COVID-19 ReStart Initiative 'A Healthier Start', led by the Biomedical and Health Innovation Enabling Capability Platform (BHI-ECP) established the Mental Health Innovation Network, a cross-disciplinary group of researchers across RMIT's four Colleges with unique strengths in mental health, isolation, ageing well and depression. The network aims to promote physical and mental resilience during and beyond these challenging times as it relates to people's susceptibility to the COVID-19 pandemic.

Current membership includes over 40 researchers, teaching academics, professional staff, and students across more than 10 Schools and four Colleges.

While the network was formed to examine problems and projects outside of the university in partnership with organisations in the community, members have been able to respond rapidly to the pandemic and apply their expertise to the experiences and challenges of staff and students at RMIT.

See here to find the key people involved in the BHI-ECP. Some key activities of the initiative were:

— **Mental Health Webinars** were developed by the Mental Health Innovation Network Webinar Working Group to support mental health during the COVID-19 pandemic. Students and staff from the School of Health and Biomedical Sciences and the School of Education worked collaboratively to design three interactive 20-minute webinars, which formed part of the course assessment. These webinars were updated to be used again in 2021.

— **The Personalised Email Initiative** was a collaboration between School of Health and Biomedical Sciences and the Academic Development Group to develop personalised email templates to use in providing feedback to students on their major course assessments. This aims to capture those students falling behind, not responding to emails or not submitting work, etc, triggering further personal emails that will encourage students to engage by seeking assistance with support services embedded into these emails.

— **The Mental Health Indian Subcontinent Initiative** was established as a rapid response to the COVID-19 crisis in the Indian Subcontinent. It organised and shared a compilation of mental health resources for staff and students affected by the crisis in the region, as well as two wellbeing webinars in partnership with the Mental Health Foundation Australia.

— **STEM College Mental Health Resource Kit** is a compilation of mental wellbeing resources is an initiative in collaboration with Student Graduate Research, RMIT Health, Safety & Wellbeing, and RUSU. The aim of this initiative is to compile essential and helpful resources and tools into one booklet for staff and students, in particular HDR Supervisors who have students in need of wellbeing resources or quick links to emergency or crisis numbers. This booklet will be an ongoing resource, which will be updated regularly by adding recorded wellbeing webinars and linking to new sites and resources.
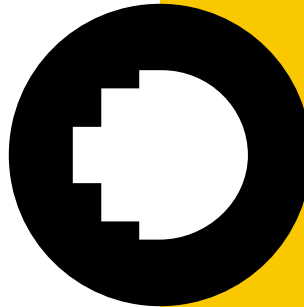
RMIT wellbeing

Evidence

Our work and ways of working are informed by the latest evidence and we use data, monitoring and evaluation to inform decisions.

There are several ways we ensure that our activities are data-driven. Firstly, by sourcing only evidence-based or evidence-informed programs and interventions from third parties. Secondly, by using data to prioritise specific programs to address emerging or urgent issues. Thirdly, monitoring and evaluating any program developed internally for quality assurance. And finally, by ensuring best practice guidelines and external frameworks for action are adhered to across RMIT.

We also apply a data-driven approach to the core pieces of evidence that underpin the Strategic Action Plan, namely the Evaluation Framework and the Mental Wellbeing Survey. The aim is to not just use data to drive our own activities, but also to create tangible evidence that mental health promotion works in the university context. RMIT is not the sole beneficiary of this work. We want others in the sector to benefit as well.

This Annual Report is a key public-facing document that demonstrates our commitment to openness and transparency for our own RMIT community and similar communities in Australia and around the world.

Example activities

5 Ways To Wellbeing
5 Ways to Wellbeing is an evidence-based model that RMIT has formally adopted to structure our mental health promotion communications and activities. The model was first developed in the UK (see original Government report here) and then adapted to the Australian context by the Royal Melbourne Hospital.

RMIT conducted a desktop literature review of available evidence-based models and determined that 5 Ways was the best-suited to the University context, especially given that one of the 5 Ways is to *Keep Learning.*

R U OK?Day evaluation survey
R U OK?Day is held in September each year as a way to remind people to check-in on the mental wellbeing of their family, friends, colleagues or peers. RMIT runs events and campaign to encourage people to find opportunities to connect and show support for one another, especially those who may be struggling.

An evaluation survey was run following a batyr sessions on R U OK?Day in 2021. Of the 87 staff and student attendees, 24 completed a feedback form. Results showed that between 90-100% of people felt better equipped to support people and more likely to reach out for support. All were also highly engaged by the program meaning it was very successful in terms of process evaluation.

RMIT Together evaluation survey
The Wellbeing Initiatives team helped to launch the RMIT Together Facebook group in 2019 and has contributed to its ongoing activity. The pandemic prevented most face-to-fact contact on campus in 2021, so the group gave students an opportunity to connect online.

Four evaluation surveys have been run since the group was launched, with over 350 responses. In 2021, over 70% of respondents thought that #RMITtogether had improved their understanding of mental wellbeing, nearly 90% enjoyed reading the posts, and over 80% thought the group had encouraged them to undertake actions for self-care.

How is the Plan evaluated?

An Evaluation Framework was implemented to foster accountability and commitment to our Mental Wellbeing Strategic Action Plan.

The Evaluation Framework articulates:

- A logic model, evaluation principles and assumptions
- Quality improvement processes and data management practices
- Evaluation stages, hypotheses and primary measures
- Governance, reporting and risk management.

The Evaluation addresses four main aspects of the Plan:

- The extent to which the Plan improves RMIT psychosocial culture, stigma reduction and mental wellbeing.
- How implementing key policies and processes can reduce psychosocial risk and improve mental health outcomes.
- The impact of building our knowledge and skills on mental health and wellbeing capability and outcomes.
- The impact of enhancing our resources, programs and supports on early intervention, recovery and mental wellbeing outcomes.
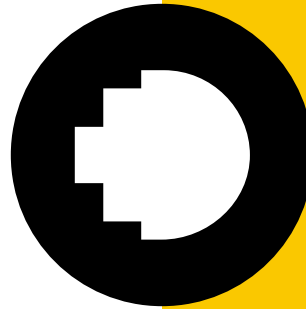
Evaluation is about processes, outcomes and impacts

Initially, we want to know whether activities and initiatives are appropriate, accessible, and actionable - called *process* evaluation. Then we want to know whether they worked as intended – called *outcome* evaluation. In the end, we want to know what difference the Plan has had in the long-term – called *impact* evaluation.

Has it led to increased wellbeing? Has it protected against psychosocial injury? Has it improved critical support services? These are all questions about day-to-day experiences across the RMIT community that the Plan's systematic evaluation is intended to answer.

Culture — Process: Strategic Action Plan implemented → Outcome: Psychosocial Safety Climate increased → Impact: Social wellbeing increased

Systems — Process: Policies and Procedures enhanced → Outcome: Risk factors reduced → Impact: Psychosocial injury reduced

Skills & Experiences — Process: Promotion & prevention enhanced → Outcome: Protective factors increased → Impact: Personal wellbeing increased

Supports — Process: Continuum of interventions → Outcome: Upstream supports enhanced → Impact: Downstream supports enhanced

Spotlight on
Key evaluation data

Mental Wellbeing Survey

The 2021 RMIT Mental Wellbeing Survey was conducted in mid-August, run by the RMIT Mental Wellbeing Initiatives team in partnership with the University of South Australia's Psychosocial Safety Climate Global Observatory (PSC-GO). In this survey, we asked participants about three main things:

1. Their own **mental wellbeing** along the continuum
2. How **engaged** or **exhausted** their work or study makes them feel
3. Their view on RMIT's **Psychosocial Safety Climate** (PSC)

Final participants included 1857 current staff, 1386 students, and 107 participants who were both staff and students. A total of 1150 participants shared narrative information in text about their experiences – qualitative and thematic analysis is scheduled for Q1 2022.

Why measure Psychosocial Safety Climate (PSC)?

- To meet obligations under Work Health and Safety laws, Guidance, and Code of Practice.
- Because PSC levels can provide information on future risk of stressful work conditions on psychological health.
- Because evidence strongly suggests that enhancing PSC can:
  - Increase positive outcomes including engagement, learning, social connectedness, healthy behaviours.
  - Reduce negative outcomes including exhaustion, bullying, depression/anxiety, physical health conditions.

RMIT
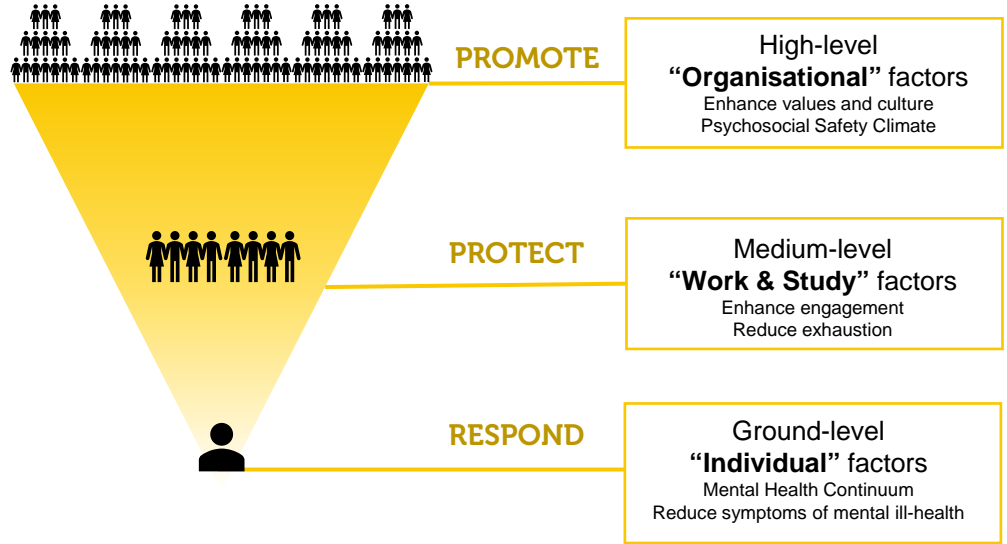wellbeing

Wellbeing at RMIT is LEVELLING UP

CULTURE

SYSTEMS

SKILLS & EXPERIENCES

SUPPORTS

The Mental Wellbeing Survey measured all 3 levels of RMIT Wellbeing so we know how people feel in themselves, in work or study, and about RMIT.

PROMOTE — High-level **"Organisational"** factors
Enhance values and culture
Psychosocial Safety Climate

PROTECT — Medium-level **"Work & Study"** factors
Enhance engagement
Reduce exhaustion

RESPOND — Ground-level **"Individual"** factors
Mental Health Continuum
Reduce symptoms of mental ill-health

Individual supports like counselling or EAP are critical services for individuals in need, but RMIT needs to do more than just **Support** those who are struggling. It has a moral and legal responsibility to **Protect** everyone's wellbeing by addressing work- and study-related risk and protective factors.

"Levelling up" means improving **Systems** and **Skills & Experiences** that increase engagement and reduce exhaustion or burnout. It also means we need to **Promote** broader organisational and cultural factors that enhance shared values and reduce stigma, discrimination, bullying and harassment.

RMIT wellbeing

WellEducated pilot

As part of the collaborative research project with University of South Australia, 4 work-groups participated in a Pilot Workshop to prepare a PSC Action Plan.

These groups are People team (Operations), School of Fashion & Textiles (DSC), Creative Industries (VE), and School of Engineering (STEM).

Pilot workshops took place on 23 and 25 November 2021, with ongoing coaching from RMIT Wellbeing and our UniSA partners over the following six months.

Non-Pilot Areas

Starting from March 2022, all Colleges, Portfolios, Schools and Clusters are encouraged to review their results as a work group and develop a Wellbeing Action Plan for their local area. Areas will have access to the Mental Wellbeing survey data, recommendations and action planning materials via the RMIT Wellbeing SharePoint site.

Interested areas can also request a facilitator from RMIT Wellbeing to conduct a Wellbeing Action Planning workshop to assist with this planning process. This support is subject to availability.

Wellbeing leave – an example of what works

Additional staff wellbeing leave was announced during the Mental Wellbeing Survey.

The survey recorded a significant boost to PSC for those who responded after the leave had been announced. Beyond any specific recommendation, the key takeaway message is to just *do something, no matter how small.*

With more sustained effort to prioritise and communicate about mental wellbeing, RMIT can gradually increase by addressing key risk and protective factors like staff exhaustion and student engagement.

It is estimated that RMIT could save upwards of $1 million in excess unplanned leave if it is able to shift 10% of staff in the high or very high risk PSC category to low risk (41% high risk down to 31%, Becher & Dollard, 2016)

RMIT wellbeing

PART 4

Data Points

2021 evaluation data

The Plan's Evaluation Framework articulates a set of quantitative indicators we will track over time to determine impact.

Baseline data of these key indicators has been compiled in this first formally-evaluated year of the Strategic Action Plan 2020-2025. Subsequent years will be compared against this baseline data to identify trends and then, if those trends are informative, to determine impact.

Some of the main barriers to strategic, evidence-based, and data-driven action tackling complex problems like mental health and wellbeing are lack of consistency over time, lack of integration of data, and lack of transparency. The following tables of staff and student data points represent only a minimal dataset that we hope will remain relatively stable, integrated, and transparent over time and across RMIT.

Qualitative data

Quantitative data is essential for longitudinal tracking across the multiple years of the Plan (2020-25). Qualitative data is equally important in bringing impact to life by telling the story of mental health and wellbeing at RMIT from the point of view of the beneficiaries themselves – students and staff.

The Mental Wellbeing Survey conducted in August invited participants to comment on issues and, at the time of publishing this Annual Report, the qualitative analysis to identify themes and demographic trends within this rich data is still ongoing. Results for 2021 will be shared separately and included in the Annual Report for 2022.

Data in context – what the numbers can and cannot tell us

As with any quantitative data, the following tables come with inherent limitations and should be interpreted with care and caution. In many cases, individual data points may underestimate the true extent of the measure being tracked over time.

Importantly, though, the data can still be informative if we continue to track the same sources over successive years from baseline in 2021. The aim is to improve data collection and collation procedures in 2022 and beyond.

Statistics can be misleading when taken out of context. We urge readers to quote these figures in context of this Annual Report and in conjunction with the commentary provided.

RMIT wellbeing

Staff data points summary table

Data source	Key questions	Data	Interpretation
Psychosocial Safety Climate (PSC-4)	1. Senior management show support for stress prevention through involvement and commitment. (Management commitment) 2. Senior management considers employee psychological health to be as important as productivity. (Management priority) 3. There is good communication here about psychological safety issues which affect me. (Organisational communication) 4. In my organisation, the prevention of stress involves all levels of the organisation. (Organisational participation)	PSC-4 scale averages (range 1-5): Management commitment **3.19**, Management priority **3.09**, Organisation communication **3.11**, Organisation participation **3.67** *1. Strongly disagree 2. Disagree 3. Neither agree or disagree 4. Agree 5. Strongly Agree* See pg 49 for more details.	PSC across RMIT was at a "medium" level of risk for staff. Baseline data will be tracked longitudinally as both an outcome measure and lead indicator. The aim is to bring RMIT into the "low" risk category in future surveys and so we need to enhance our approach to PSC in 2022 and beyond. *Note: Results are sampled from voluntary onshore participants in the Mental Wellbeing Survey, comprising less than 20% of students and staff. Convenient selection may have skewed results higher or lower and increased variability, depending on people's motivation for participating.*
Mental Wellbeing Measure	**The Mental Health Continuum Short Form (MHC-SF)** **Emotional well-being EWB:** Happy (Item 1) Interested in life (Item 2) Satisfied with life (Item 3) **Social well-being SWB:** Social Contribution (Item 4) Social Integration (Item 5) Social Actualization (i.e., Social Growth) (Item 6) Social Acceptance (Item 7) Social Coherence (i.e., Social Interest) (Item 8) **Psychological well-being PWB:** Self-Acceptance (Item 9) Environmental Mastery (Item 10) Positive Relations with Others (Item 11) Personal Growth (Item 12) Autonomy (Item 13) Purpose in Life (Item 14)	MHC-SF scale averages (range 0-5): EWB **2.90**, SWB **2.24**, PWB **2.65** *During the PAST MONTH, how often did you feel… 0. Never 1. Once or twice 2. About once a week 3. About 2 or 3 times a week 4. Almost every day 5. Every day* See pg 48 for more details.	Again, results are from a self-selected sample. All domains of individual mental wellbeing are low on average (< 3/5 which equates to between 1-3 times a week), but Social Wellbeing is particularly low. This finding is consistent with the social isolation staff have endured throughout the COVID-19 pandemic.
		MHC-SF categorical results: Flourishing **31%**, Moderate **54%**, and Languishing **15%** ***Flourishing***: 'everyday' or 'almost everyday' for at least seven of the categories, with one from the hedonic EWB cluster ***Languishing***: 'never' or 'once or twice' for least seven items, with one from the EWB cluster. ***Moderately*** mentally healthy: Neither flourishing nor languishing	Rates of Languishing were much higher than we would like to see (circa 1-6%) and Flourishing rates were much lower (circa 40-60%). Other research (Dollard & Bailey, 2021) suggests this is largely attributable to the COVID-19 pandemic but these figures are very concerning and RMIT needs to prioritise the mental health and wellbeing of staff in 2022 and the extended recovery period.
Study related wellbeing measures	**Emotional Exhaustion from Burnout Assessment Tool (BAT)** 1. At work, I feel mentally exhausted. 2. After a day at work, I find it hard to recover my energy. **Engagement items UWES** 1. For my work, I feel bursting with energy 2. I am enthusiastic about my work	BAT scale averages (range 1-5):Mentally exhausted **3.45**, Hard to recover **3.54** 1. Never 2. Rarely 3. Sometimes 4. Often 5. Always UWES scale averages (range 1-7): Energy **4.29**, Enthusiasm **5.08** 1. Never 2. A few times a year or less (almost never) 3. Once a month or less (rarely) 4. A few times a month (sometimes) 5. Once a week (often) 6. A few times a week (very often)7. Every day (always)"	When risk factors outweigh protective factors, the outcome is exhaustion. Exhaustion was elevated across RMIT onshore staff in 2021. We would like to see BAT levels no higher than 2.7/5. (Shaufeli et al., 2020) Work engagement is present when protective factors are equal to or exceed risk factors. Engagement levels should be around 4.8/7 but energy levels did not match enthusiasm and so averaging both items brings current engagement below this benchmark. (Carmona-Halty et al., 2019) RMIT needs to continue to work to reduce risk factors and enhance protective factors in 2022 to prevent negative psychosocial outcomes for staff such as anxiety, depression, and burnout.

Staff data points summary table (continued)

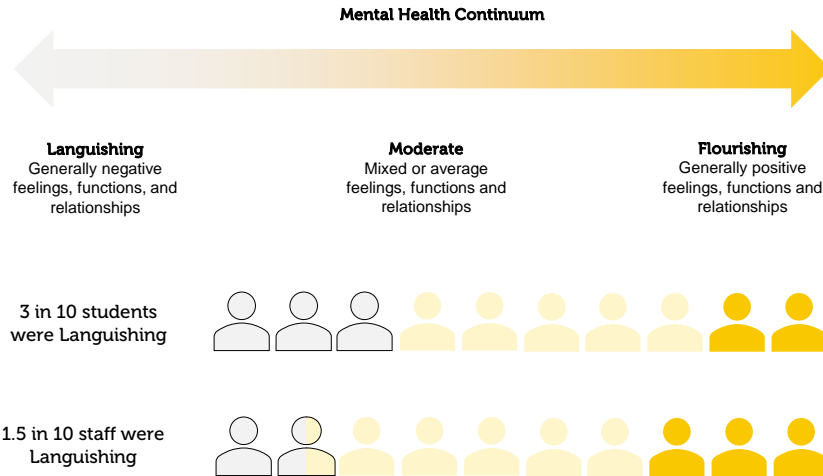| Data source	Key questions	Data	Interpretation
Staff Experience Survey	1.I feel like I belong at RMIT 2.My manager gives me useful feedback on how well I am performing 3.My manager genuinely cares about my wellbeing 4.I feel in control and on top of things at work 5.Generally, I believe my workload is reasonable for my role 6.Behaviours like bullying and harassment are not tolerated at RMIT 7.I know how to seek support when concerned about my/others wellbeing	Data not available at time of publication.	
EAP	1.Utilisation data	1. EAP utilisation rate of **4.8%**, above Education sector benchmark of 2.4%.	The relatively high rate of EAP utilisation at RMIT could be due to either higher demand (e.g., greater need, higher stress levels, or less stigma) or more supply (e.g., lower barriers to uptake, more availability or better-quality service). This elevated rate does not necessarily mean that distress levels are higher at RMIT than elsewhere in the Education sector. RMIT actively encourages staff to use EAP and, at least in the early years of the Plan, we would expect to see efforts to provide support reflected in higher utilisation rates. Over time, utilisation may then come down and stabilise as longstanding promotion and prevention initiatives take effect to reduce the prevalence of work-related stressors and incidence of mental ill-health.
	2.Presenting issue data	2. Presenting issues: 34% work-related and 66% personal	With no benchmark data for comparison, this ratio of personal to work-related presenting issues cannot be interpreted as either high or low. However, we would like to see the proportion of work-related issues decline in successive years.
	3.Presentation (standard or crisis)	3. Presentation: **7** critical incidents (**1.27%**)	Again, there is no benchmark data for critical incidents. We hope the proportion of critical incidents declines over time but, from such a small baseline, we also expect considerable fluctuation given criticality is influenced by work, personal and wider environmental factors.
	4.Service satisfaction data	4. Satisfaction: Data not available at time of publication	
PRIME incident report data	1.Mechanism of injury description: Bullying, Harassment, Exposure to mental stress factors (incidents logged) 2.Bodily location description: Mental wellbeing/health 3.Student or Staff (person injured)	1.Mechanism: Bullying **5**, Harassment **10**, Exposure to mental stress factors **11** 2.Bodily location: Mental wellbeing/health **13** 3.Student or Staff: Student **5**, Staff **21**	All figures are incidents / cases. These figures probably underestimate the true numbers as they only include cases filed in the central reporting system (PRIME). With such low raw numbers, change over time will be heavily influenced by random variation and we will need to enhance data collection in order to interpret meaningful trends. It is hoped that promotion and prevention initiatives will help to improve wellbeing (MHC-SF) as well as reduce incidence of mental ill-health or psychosocial injury at RMIT in 2022 and beyond.
Annual and Sick Leave	Number of staff with more than 25 days accrued annual leave, sick leave taken	Across all of RMIT, **1077** staff members have accrued annual leave in excess of 25 days and **11661** days of sick leave were taken between 7 June and 31 December (after Workday system implementation).	No sector benchmark data is available to the Wellbeing Team at time of publication. These figures will be used as baseline measures to track changes in future years. Unfortunately, data for all of 2021 are not available due to the changeover to Workday mid-year. The 2022 Annual Report may compare these same periods to ensure consistency, and then make annual comparisons from 2023 onwards. It is hoped that accrued annual leave figures lessen over time so that people are taking advantage of regular and extended rest periods to protect their mental wellbeing in the long-term. Excessive annual leave can indicate excessive workload or work pressures preventing or discouraging people from taking time off.
People Connect	Categories: Harassment, discrimination, bullying, interpersonal conflict (number of complaints)	Harrassment **2**, discrimination **1**, bullying **4**, and interpersonal conflict **20**.	As above, these figures are an underestimate because they do not represent all incidents, just those captured in the HR Assist system. However, they do reflect an improvement on 2020 figures (e.g., interpersonal conflict down from 76 incidents the previous year to 20 in 2021) and so we may be able to interpret a trend in 2022, especially for interpersonal conflict which has a higher raw frequency than the other categories.

Student data points summary table

Data source	Key questions	Data	Interpretation
Psychosocial Safety Climate (PSC-4)	1. Senior management show support for stress prevention through involvement and commitment. (Management commitment) 2. Senior management considers psychological health to be as important as participation. (Management priority) 3. There is good communication here about psychological safety issues which affect me. (Organisational communication) 4. In my organisation, the prevention of stress involves all levels of the organisation. (Organisational participation)	PSC-4 scale averages (range 1-5): Management commitment **3.19**, Management priority **3.09**, Organisation communication **3.11**, Organisation participation **3.67** *1. Strongly disagree 2. Disagree 3. Neither agree or disagree 4. Agree 5. Strongly Agree* See pg 49 for more details.	PSC across RMIT was at a "medium" level of risk for students. Baseline data will be tracked longitudinally as both an outcome measure and lead indicator. The aim is to bring RMIT into the "low" risk category in future surveys and so we need to enhance our approach to PSC in 2022 and beyond. *Note: Results are sampled from voluntary onshore participants in the Mental Wellbeing Survey, comprising less than 20% of students and staff. This convenient selection may have skewed results higher or lower and increased variability, depending on people's motivation for participating.*
Mental Wellbeing Measure	**The Mental Health Continuum Short Form (MHC-SF)** **Emotional well-being EWB:** Happy (Item 1) Interested in life (Item 2) Satisfied with life (Item 3) **Social well-being SWB:** Social Contribution (Item 4) Social Integration (Item 5) Social Actualization (i.e., Social Growth) (Item 6) Social Acceptance (Item 7) Social Coherence (i.e., Social Interest) (Item 8) **Psychological well-being PWB:** Self-Acceptance (Item 9) Environmental Mastery (Item 10) Positive Relations with Others (Item 11) Personal Growth (Item 12) Autonomy (Item 13) Purpose in Life (Item 14)	MHC-SF scale averages (range 0-5): EWB **2.47**, SWB **1.83**, PWB **2.58** *During the PAST MONTH, how often did you feel… 0. Never 1. Once or twice 2. About once a week 3. About 2 or 3 times a week 4. Almost every day 5. Every day* See pg 48 for more details.	Again, results are from a self-selected sample. All domains of individual mental wellbeing are low on average (< 3/5 which equates to between 1-3 times a week), but Social Wellbeing is particularly low. This finding is consistent with the social isolation students have endured throughout the COVID-19 pandemic.
		MHC-SF categorical results: Flourishing **18%**, Moderate **52%**, and Languishing **30%** ***Flourishing**: 'everyday' or 'almost everyday' for at least seven of the categories, with one from the hedonic EWB cluster* ***Languishing**: 'never' or 'once or twice' for least seven items, with one from the EWB cluster.* ***Moderately** mentally healthy: Neither flourishing nor languishing*	Rates of Languishing were much higher than we would like to see (research suggests 1-6% under normal pre-pandemic conditions) and Flourishing rates were much lower (circa 40-60% pre-pandemic). Other research suggests this is largely attributable to the COVID-19 pandemic but these figures are very concerning and RMIT needs to prioritise the mental health and wellbeing of students in 2022 and the extended recovery period. (Dodd et al., 2021)
Study related wellbeing measures	**Emotional Exhaustion from Burnout Assessment Tool (BAT)** 1.While studying, I feel mentally exhausted.. 2. After a day of study, I find it hard to recover my energy. **Engagement items UWES** 1. For my study, I feel bursting with energy 2. I am enthusiastic about my study	BAT scale averages (range 1-5): 1. Mentally exhausted **3.83**, 2. Hard to recover **3.62** *1. Never 2. Rarely 3. Sometimes 4. Often 5. Always* UWES scale averages (range 1-7):1. Energy **3.91**, 2. Enthusiasm **4.61** *1.Never 2. A few times a year or less (almost never) 3. Once a month or less (rarely) 4. A few times a month (sometimes) 5. Once a week (often) 6. A few times a week (very often) 7. Every day (always)*	When risk factors outweigh protective factors, the outcome is exhaustion. Exhaustion was elevated across RMIT onshore students in 2021. We would like to see BAT levels no higher than 2.7/5. Study engagement is present when protective factors are equal to or exceed risk factors. Engagement levels should be around 4.8/7 but energy levels did not match enthusiasm and so averaging both items brings current engagement below this benchmark.. RMIT needs to continue to work to reduce risk factors and enhance protective factors in 2022 to prevent negative psychosocial outcomes for students such as anxiety, depression, and burnout.

Student data points summary table (continued)

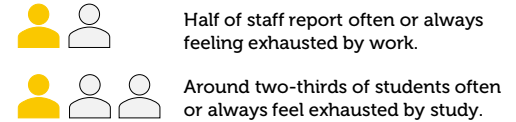| Data source	Key questions	Data	Interpretation
Student Experience Survey	1. At your institution during 2021, to what extent have you had a sense of belonging to RMIT University? 2. The teaching staff normally gave me helpful feedback on how I was going 3. My teacher/lecturer/supervisor genuinely cares about my wellbeing (support) 4. I feel in control and on top of things at university (control) 5. Generally, I believe my study load is reasonable for the course I am enrolled in (demands) 6. Behaviours like bullying and harassment are not tolerated at RMIT (relationships & risk) 7. I know how to seek support when concerned about my/others wellbeing (support)	Scale averages (range 1-5): 1. **3.08** 2. **3.66** 3. **3.80** 4. **3.32** 5. **3.69** 6. **4.22** 7. **3.76** *1.Strongly disagree 2.Disagree 3.Neither agree/or disagree 4.Agree 5. Strongly Agree*	Sense of belonging rated the lowest for student at RMIT in 2021, which is an obvious result of the lack of on-campus contact due to the pandemic. All other item are also only between 3-4 on average, with the exception of item 6 which is between Agree and Strongly Agree on average. These numbers will be tracked over time with the hope that they will improve year-on-year. They tell us how students feel about issues related to study that affect their mental health and wellbeing, and are important indicators of psychosocial risk and protection.
Counselling service	1. Utilisation data	**2391** students attended (4% of student cohort), 7865 appointments attended (12% cancellation rate and 9% no-show), 29% initial appointments, 10.6 days between booking and appointment (9.5 days for initial appointment).	Around 1 in 25 of RMIT's enrolled students accessed the counselling service in 2021, very similar to utilisation rates in recent years and at comparable universities. A continued reduction in wait-times for initial appointments means that those accessing the service can do so sooner, but it is unknown how many students are missed when they attempt to book an appointment but do not because they cannot be seen sooner. As in 2020 (10%), the rate of no-shows continued to decrease from pre-pandemic rates (14-16% in 2017-2019).
	2. Presenting issue data	**67**% mental health (40% anxiety, 33% study stress, 27% depression) **66**% academic & study (50% study stress, 28% special consideration, 21% assessment anxiety/stress, 18% motivation) **54**% developmental & family (37% family issues, 34% relationship issues, 34% self-esteem)	These percentages do not add up to 100% because multiple codes are assigned to each person. Overall, very similar reasons for attendance compared to 2020, with the exception of a reduction in developmental & family (62% in 2019 and 2020 compared to 54% in 2021). A project is underway to revise the reason codes for presenting issues and ensure standardised usage among staff at the counselling service, to ensure that high-quality data is gathered regarding the reasons students attend the service.
	3. Presentation (standard or crisis)	Of the 1814 students surveyed, **328** (18%) reported extremely severe distress at intake	This figure tells us that a substantial proportion of students present to student counselling in an acute state of severe distress and/or crisis. We would like to see this proportion reduce over time as we shift the dials towards promotion, prevention and early intervention.
Equitable Learning Services	No. of registrations for students with mental health conditions	**508** students who have registered for an ELS plan reported a mental health condition	No benchmark data is available to compare this number of students reporting a mental health condition to Equitable Learning Services. These numbers will be tracked over time. An increase in reporting could be seen as a good thing If it means that there is less stigma associated with registering a mental health condition. These figures will need to be interpreted in context of other data associated with incidence and prevalence of mental ill-health at RMIT.
Enrolment	Leave of absence	**9955** students took a leave of absence from study (1723 due to COVID-19 and 2283 due to personal reasons)	No benchmark data is available to compare this number of students who took a leave of absence in 2021. Comparison with 2020 data may not be meaningful during the pandemic, either. These numbers will be tracked over time and we expect that the number of COVID-19 reasons will decline. Again, these figures will need to be interpreted in context of other data associated with incidence and prevalence of mental ill-health at RMIT.
Other student support services	Reason codes (headcount of students reporting particular issues when seeking support other than counselling) Behaviours of Concern – Bullying Behaviours of Concern - Discrimination/Vilification/Victimisation Health and Wellbeing - Mental health issues Health and Wellbeing - Suicidal ideation	Bullying **2**, Discrimination/Vilification/Victimisation **2**, Mental health issues **82**, Suicidal ideation **15**	As above, these numbers will be tracked over time. They tell us how many students are experiencing negative outcomes related to mental health and wellbeing, and some of the potentially RMIT-related causes related to interpersonal wellbeing.

Mental Wellbeing

The Mental Health Continuum Short Form (MHC-SF)

Mental Health Continuum

Languishing
Generally negative feelings, functions, and relationships

Moderate
Mixed or average feelings, functions and relationships

Flourishing
Generally positive feelings, functions and relationships

3 in 10 students were Languishing
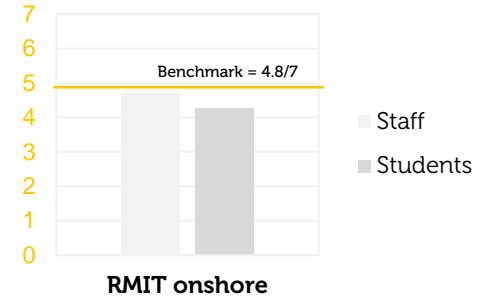
1.5 in 10 staff were Languishing

Students have been worse off during COVID-19, especially their sense of social wellbeing. Under ''normal'' pre-pandemic circumstances, we would typically expect 1-6% of people to report languishing and around 40-65% flourishing.

RMIT wellbeing

Work-related Wellbeing

Exhaustion (BAT)

Half of staff report often or always feeling exhausted by work.

Around two-thirds of students often or always feel exhausted by study.

Engagement (UWES)

Benchmark = 4.8/7

Staff

Students

RMIT onshore

Exhaustion levels were significantly elevated in 2021, with students again being worse off than staff. Engagement levels are also down from where they should be for students but not markedly for staff. All of these results are impacted by remote work and learning
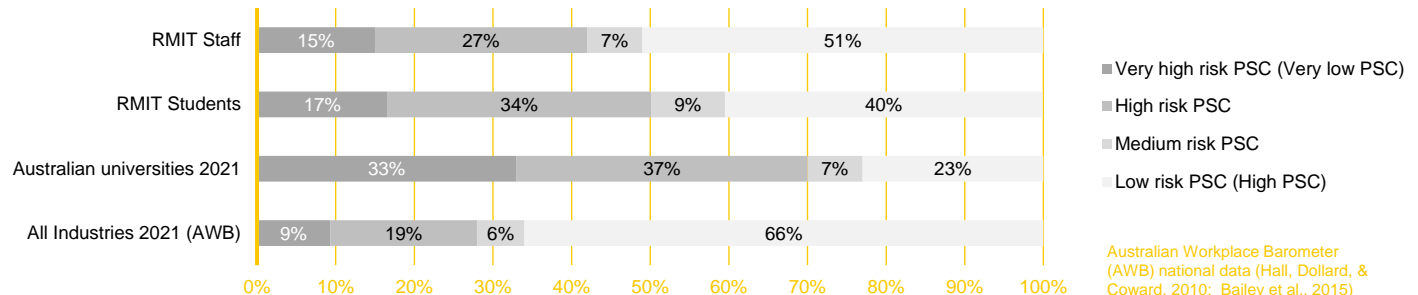
Psychosocial Safety Climate (PSC-4)

Overall, RMIT's onshore PSC risk was assessed as "Medium" with an average score of 39.2 for staff and 37.7 for students.

This result means that RMIT can do more to protect its people from psychosocial injury by enhancing PSC principles. While concerning, RMIT appears to be faring relatively well when comparing our staff PSC levels against those of other Australian universities in 2021.

Our UniSA partners provided a comprehensive report with specific recommendations for how to boost PSC.

PSC Standards	Range 12 – 60	Prognosis
Low risk PSC	≥ 41	Performing well, improvements in PSC levels might be noted; increased leader performance in PSC
Medium risk PSC	< 41 and ≥ 37	Need more enacting of PSC principles
High risk PSC	< 37 and > 26	Increasing PSC levels from low could reduce depression by 16% and job strain by 14%
Very high risk PSC	≤ 26	Urgent action required to prevent further dramatic increases in depressive periods, worsening conditions (e.g. increased bullying)

RMIT Staff: 15% | 27% | 7% | 51%
RMIT Students: 17% | 34% | 9% | 40%
Australian universities 2021: 33% | 37% | 7% | 23%
All Industries 2021 (AWB): 9% | 19% | 6% | 66%

Legend:
- Very high risk PSC (Very low PSC)
- High risk PSC
- Medium risk PSC
- Low risk PSC (High PSC)

Australian Workplace Barometer (AWB) national data (Hall, Dollard, & Coward, 2010; Bailey et al., 2015)

RMIT wellbeing

PART 5

What's Next?

RMIT wellbeing

Our Focus for 2022

Invest in RMIT's Psychosocial Safety Climate

To strengthen our focus on the four PSC principles of management commitment, management priority, organisational communication, and organisational participation, we are offering mental wellbeing action planning workshops and resources for local areas within RMIT, as well as finalising our Psychosocial Risk Management approach to align with current and anticipated legislation requirements.

Increase social wellbeing

Many areas across RMIT are committed to creating opportunities for students to build their social wellbeing skills, belonging and sense of connection. With intersectionality in mind, we need to continue to understand our staff and student cohort's diverse needs and prioritise activities accordingly. Our work includes on-campus activities and events in collaboration with RMIT student life, Teaching and Learning staff, and our partners, to give students more opportunities to feel and be part of the RMIT community.

Acknowledge and address staff exhaustion levels

While exhaustion levels may alleviate naturally over the course of 2022 as regular teaching practices approach pre-pandemic levels (i.e., no prolonged lockdowns and more face-to-face contact) our team will turn a focus towards understanding and formulating the impact of workloads and other psychosocial risks that predate the pandemic. Further, we will be implementing some workplace initiatives, such as a pilot project aimed at strengthening a culture of respect and engagement, that help to alleviate the long-term effects of burnout.

Suicide prevention strengthening

In 2022, RMIT aims to review the interim postvention approach, materials and tools to further enhance our postvention approach, while expanding the process to include an aligned approach to respond to sudden deaths of staff in our community. Additionally, RMIT would like to broaden our approach to include prevention and intervention initiatives to enhance capability in managing suicide risk in our community.

Capability building for wellbeing and respect

2021 saw the development of a draft capability framework in consultation with staff and students. The framework outlines the key skills, knowledge and attributes for (i) preventing gender-based violence and promoting respect, and (ii) building mental wellbeing literacy, psychological safety and resilience and increasing capability to assist others in distress outlining. Our hope is that this framework will support the development of a more coordinated approach to skills and training, to set some fundamental standards for our community, and to support students in developing 21st century employability skills.

Data dashboard and Evaluation

Maintain the university's commitment to collecting data and feedback about mental wellbeing, including a 2022 Mental Wellbeing Survey. Collaborate with the Health Innovation Lab to advance our evaluation approach towards systems and relationships between data points. Adopt a more systematic quality improvement lens across the initiatives we implement and collaborate on with other areas of RMIT.

RMIT wellbeing

2022 Initiatives mapped onto the Strategic Action Plan

Vision

Together we create a mentally healthy community in which everyone can realise their potential and feel safe and supported in their experience of mental wellbeing.

Key Action Areas

Culture

- batyr partnership
- Civility pilot project
- University events and activations including University Mental Health day, Welcome events, The Big Anxiety Festival
- Ngarara Willim "Cultural Safety" Module

Systems

- Mental wellbeing survey 2022
- MW local action planning
- Psychosocial risk management Project
- Suicide Prevention Project

Skills and Experiences

- Capability Framework Project
- Assisting students/others in distress
- "Fostering social connection in the classroom" staff resource
- Student leader training
- Counselling service webinars
- Occupational violence prevention training

Support

- COVID-19 wellbeing checks
- Suicide postvention
- Covid wellbeing supports
- Peer support for students
- Counselling service model implementation plan and relaunch
- Implementation of 24/7 urgent mental health support line

Enablers

Leadership
Leading for mental wellbeing and psychosocial safety

Partnerships
Benestar, BUPA, and Medibank
batyr
The Big Anxiety Festival
RMIT Health Innovation Lab

Evidence
Data Dashboard Project
Systems Evaluation Project
Mental Wellbeing Survey

Noon gudgin

RMIT
wellbeing

Noon gudgin, Thank you

We would like to thank everyone who has contributed towards wellbeing at RMIT – our staff, students, and partners. In particular we would like to thank members of the following organisations and groups for their contributions.

Governance groups

- **Strategic Advisory Committee**: Julie Cogin (executive sponsor), Mish Eastman (executive sponsor), Anna Betts, Emma Blee, Brad Burton, Dene Cicci, Denise Cuthbert, Vanna Garrick, Bronwyn Gresham, Leya Hockman, Akshay Jose, Meegan Marshall, Val McFarlane, Adam Steiner (incoming), Nicole Shanahan

- **Research Advisory Group**: Louise Byrne, Brad Crammond (new member), Bronwyn Gresham, Lachlan Kent, Renata Kokanovic, Mark Lee, Katrin Leifels, Shona Leitch, Christina Scott-Young, Michael Swadling, Michelle Turner, Gillian Vesty, Rachel Wilson

- **Mental Wellbeing Champions:**

  - **Higher education**: Erika Beljaars-Harris, Jonathan Boymal, Sandhya Burriss, Jess Caceres, Jesseka Chadderton, Carolyn Dancevic, Loren Dela Cruz, Melissa Drum, Sandy Fitzgerald, Elise Fraser, Melanie Gatfield, Carlie Groves, Fiona Hawke, Adelle Hutchings, Dan Jazby, Jarian Lake, Anna-Katharina Lenz, Anna Madyarova, Prashant Mahajan, Bridie McCarthy, Sharon Mekhamer, Dr Robyn Moffitt, Elham Naghizade, Abby Nelson, Meg Neyland, Virginia Nezis, Myly Nguyen, Rachel Nowotnik, Michael Olasoji, Rebecca Overend, Sarah Palmer, Milan Patel, Konrad Peszynski, Hannah Pilkington, Raziff Sharil, Dr Sarvesh Soni, Michael Tian, Vincent Viggiano

  - **Vocational education**: David Bruce, Catherine Ciavarella, Diane Curtis, Jessie DiBlasi, Hannah Freedman-Smith, Ryan Gunasekera, Ejanul Haque, Katie Henry, Amita Iyer, Paola Kollias, Elizabeth Langton, Dianne Mackay, Damian Manassa, Toby Manning, Lisa Mee, Evander Mitchell, Rebekha Naim, Trish Newstead, Meg Neyland, Nick Patterson, Belinda Pye, Joel Rainford, Katrina Rose, Emily-Kate Salmon, Annitta Siliato, Melissa Tinetti, Darren Trueman, Robbie Van Dijk, Jo Wallwork, Chris Walters, Laura Yeomans

Spotlights

- **Mental Health Research Innovation Network**: *Active members:* Magdalena Plebanski, Michelle Nicolo, Sophia Xenos, Andrea Chester, Elisa Hill, Sarah Spencer, Debolina Majumdar, Sarvesh Soni, Sampa Sarkar, Simon Pervan, Melissa Monfries. *Regular members*: Sefa Awaworyi Churchill, Bronwyn Coate, Wendell Cockshaw, James Collett, Ruth Desouza, Sandy Fitzgerald, Jacinthe Flore, Paul Gorry, Mark Lee, Keely Macarow, Robyn Moffitt, Prasad Podugu, Dominic Redfern, Samantha Richardson, Cesar Sanchez Huertas, Dein Vindigni, Penelope June Weller, Jenny Zhang, Zhen Zheng
- **College of Business and Law**: Catherine Cheong, Vicky Huynh, Hannah Pilkington
- **College of Vocational Education**: Catherine Ciavarella, Diane Curtis
- **Ngarara Willim**: Jeyda Dolek, Carlie Grove, Nicole Shanahan
- **Elders**: Boon Wurrung Elder N'arweet Carolyn Briggs and Wurundjeri Elder Aunty Di Kerr
- **Student Counselling**: Lyndon Medina, Laura Mulherin, Birgit Mumelter
- **RMIT Creative**: Adelaide Fisher, Lynda Roberts

Partners

- AP Psychology, funded by WorkSafe Victoria
- batyr
  - Staff: Christian Barkho, Steph Darling, Jocelyn Victoria
  - batyr@RMIT student executive: Aaron Aitken, Maansi Arora, Oshi Bombuwela, Jake Charnock, Michelle Chen, Bella Jacob, Sophie Kelzke, Nell Metcalf, Koushik Mukherjee, Herschel Rego, Elizabeth Steel, Joseph Torpy, Makayla Walker, Jaimee Warren
- FBG Group: Louisa Detez, Katie Heine
- headspace: Jessica Morgan
- Prevention United: Stephen Carbone and Luke Martin
- University of South Australia: Maureen Dollard, Leah Smolarek, Amy Zadow

RMIT wellbeing

Connect with us

We'd love to hear from you about any of:

- your thoughts on our Annual Report;
- our activities in 2021;
- our plans you'd like to know more about for 2022;
- wellbeing activities or needs in your area in 2022.

Please reach out to us at RMITwellbeing@rmit.edu.au or, for RMIT students and staff, please post in our Health, Safety, and Wellbeing Yammer channel.

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