

Holistic Faculty Development for University Mental Wellbeing: a Narrative Review

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Abstract

University mental wellbeing has gained increasing relevance in both scientific and socio-political agendas. Recent research shows an increase in students' need for psychological support, and the crucial role faculty plays in promoting such wellbeing. As faculty is often faced with psychology related challenges without having received adequate preparation, many universities have adopted faculty development models aimed at providing staff with evidence-based knowledge to inform their support interventions. A narrative review highlighted the effectiveness of projects such as ABC-Uni model at the University of Copenhagen; Professor Hippo-on-campus educational programme at McMaster University and RAKSHAKA framework by King's College London and Manipal University. These initiatives share a holistic view of university mental wellbeing and the crucial role of the synergy between faculty development, support services and active collaboration with students. This review is part of a wider case-study that, based on a whole university approach, seeks to implement mental wellbeing training for faculty, students and staff in an Italian public online university.

Keywords: *Mental wellbeing, faculty development, whole university approach*

1. Research Context

In recent years the attention on the impact mental health has both at an individual and global level has ignited scientific and socio-political discourse [6]. The World Health Organisation Mental Health Action Plan 2013–2030 outlined the need to better understand mental health, foster clinical support and enhance preventative measures [7]. Following the Covid-19 pandemic, mental health was defined as a "growing crisis" [6], activating further investments and propelling new research in this field [1, 8]. Already prior to the Covid-19 pandemic, numbers of university students with mental health problems were rising and in following years higher education institutions reported insufficient capacity of in-house psychological support services to cope with the increasing demand [9, 10, 11]. The questions of how this may impact students' mental health probed new research questions and uncovered the even greater need for mental health support [2]. As educating communities universities hold a key role in promoting mental wellbeing and mitigating mental health challenges [2, 12].

1.2 Key Concepts

The concept of wellbeing has been conceptualized through two primary dimensions: hedonic and eudaimonic. The hedonic perspective emphasises subjective experiences of wellbeing, such as the presence of positive emotions, life satisfaction, and affective responses to various life domains, including relationships, work, and health [13]. The eudaimonic perspective focuses on the objective realization of an individual's potential, highlighting personal growth, purpose, and meaningful engagement with the surrounding environment [13]. The term "positive mental health" encapsulates both dimensions and aligns with the World Health Organization's definition, which describes positive mental health as a state in which individuals are able to realize their abilities, cope effectively with life's stresses, work productively, and contribute to their communities [14]. Mental health is an integral part of our general health and wellbeing and is a basic human right [7]. This integrated understanding underscores the multidimensional nature of mental wellbeing and its relevance in higher education contexts.

Mental health promotion in higher education typically involves the development of structural

frameworks or standalone interventions that address specific domains, including resilience-building, counselling services, stress management, and suicide prevention [15, 16].

In recent years innovative educational programmes [17] and teaching approaches [18] have been piloted, using tools from the world of psychology [19] and coaching [20, 21]. Support services have been enhanced by the integration of digital tools used to monitor and support students' mental wellbeing [12, 22]. Numerous international studies have been conducted on how to support the mental health of university students [17, 19, 23, 24], while less attention has been placed on supporting faculty and staff. This lack of preliminary knowledge contributes significantly to faculty feeling ill-prepared to support students [25].

2. Methodology

In this study a narrative review was conducted to highlight current holistic faculty development approaches to university mental wellbeing. The search was based on the use of electronic databases: PubMed, Scopus and Web of Science, with specific keywords: "mental wellbeing" AND "university" AND "faculty development". Papers eligible for analysis were those which were open access and written in English in the last ten years (2014-2024). Seven papers [2, 3, 4, 5, 25, 28, 45] explored faculty development for mental wellbeing in universities and of these three were selected as they embraced a holistic approach to faculty development honouring its interconnectedness with the wider university community. Papers which focused on other levels of education or different settings were not eligible for analysis. Duplicates, review articles, letters to the editor and published abstracts from conferences were also excluded. The results presented in this paper are the ones that were deemed most aligned with the research focus of the holistic whole university approaches to mental health.

This review is part of a broader case-study which aims to implement a mental wellbeing online intervention for students, faculty and staff at an Italian public online university. This online training programme is intended to equip participants with practical tools for stress management, resilience-building, and the enhancement of overall mental wellbeing. The course is conceived as an inclusive initiative, engaging the entire university community and underscoring the importance of prioritising mental health in higher education. It comprises synchronous online training and asynchronous, evidence-based resources.

The investigation is guided by four primary research questions. First, what "whole university approach" training programmes on mental wellbeing currently exist in international higher education contexts? Second, what are the perceived mental health and wellbeing needs within this university community? Third, which mental wellbeing strategies have demonstrated the greatest effectiveness in higher education environments? Finally, what is the impact of a short-term, online training intervention on the mental wellbeing of members of the academic community? The research is structured across three interrelated domains. The pedagogical dimension involves the design and implementation of a customised synchronous training programme, developed in response to participants' baseline wellbeing levels, which are measured through a validated questionnaire. This approach ensures that the training is tailored to the specific needs of the university population. The educational domain focuses on the development of asynchronous learning materials, grounded in contemporary scholarly literature. These resources are designed for individual engagement and reflection, enabling participants to deepen their understanding of mental wellbeing strategies and in alignment with their personal or professional roles within the academic community. The scientific component of the study centres on the evaluation of the training programme's impact on participants' mental wellbeing. This includes assessing the effectiveness of the intervention, identifying its limitations, and considering its potential for broader application within and beyond the institutional context.

3. Holistic Approaches to University Mental Wellbeing

A holistic approach to mental wellbeing in higher education encourages the cultivation of an organisational culture and environment that actively promotes health and wellbeing across all domains of university life—including work, study, and personal development. This perspective emphasises the integration of wellbeing principles into both institutional structures and day-to-day practices, aiming to create a supportive ecosystem for the entire academic community [26]. DiPlacito-DeRango underscores the significance of expanding training and awareness initiatives for students, educators, and staff, highlighting the broader objective of integrating student mental health into the

core functions of higher education [27]. Central to this approach is the continuous evaluation and enhancement of existing initiatives to ensure their sustainability and relevance. Such efforts extend beyond isolated interventions, engaging the whole university population in the development of insight, understanding, and practical skills through both curricular integration and comprehensive support services [28].

A critical component of this approach is the strategic alignment and synergy between faculty development, professional support services, and meaningful collaboration with students [26, 29]. This triadic partnership fosters a shared responsibility for wellbeing, ensuring that mental health promotion is embedded throughout the university system, rather than being treated as the sole remit of specialist teams. By enabling staff and students alike to participate actively in shaping a health-promoting university culture, institutions are better positioned to respond to diverse needs, build resilience, and support long-term wellbeing [1, 2].

3.1 Whole University Approach

The Whole University Approach [26] finds its origins in the Okanagan Charter, established in 2015 by the International Health Promoting Universities and Colleges network [30]. This was followed by the publication of the *#StepChange* guidelines in 2017 by Universities UK [31], the representative body for university executive leadership in the United Kingdom, which plays a key role in shaping institutional strategy. These developments collectively laid the groundwork for the *University Mental Health Charter* [32], further formalising a strategic framework for mental health promotion within higher education.

At the heart of the Whole University Approach is the conceptualisation of the university as a dynamic ecosystem, wherein the interaction of structural, organisational, and interpersonal elements contributes to the overall experience and wellbeing of all members of the academic community [33]. This model calls for a balance between top-down strategic leadership and broad-based engagement, including active collaboration with staff and co-creation of initiatives with students. It recognises the necessity of embedding mental health promotion across institutional structures and everyday practices, rather than confining it to standalone services [26, 33]. The Whole University Approach identifies three interrelated domains that influence mental health: genetic predispositions, environmental conditions, and the learning experience. Faculty development is particularly pertinent to the latter, highlighting the potential of academic staff to foster positive educational environments and to enhance mental health literacy. This, in turn, equips them to support students more effectively and to contribute to early identification and prevention of mental health difficulties [5].

Although considerable research has explored strategies to support student mental health, there remains a notable gap in the literature concerning the mental wellbeing of lecturers and academic staff [22, 34]. Nonetheless, existing studies highlight the pivotal role that lecturers play in fostering the overall mental wellbeing of the university community [2]. By emphasising the connection between the learning environment and students' lived experiences, the Whole University Approach advocates for a synergistic model of health promotion. Effective support must be integrated into all dimensions of university life, including curriculum design, pedagogical practice, staff development, and institutional policy [4]. This holistic perspective underscores the importance of coordinated action between faculty development initiatives, professional support services, and meaningful student participation [11]. Furthermore, institutions that have adopted this approach increasingly acknowledge the value of a population-wide strategy—one that aims to foster a coherent institutional identity and a strong sense of belonging [35, 33, 36]. Additionally, addressing the diverse and specific needs of sub-groups within the student body is viewed as essential to building inclusive, supportive academic communities.

3.2 ABC-Uni Model

In response to growing concerns regarding university students' mental health [10, 11, 19] the ABC-uni intervention proposes a comprehensive, multi-level strategy to promote wellbeing across the higher education setting [3]. Informed by a salutogenic orientation and grounded in the "whole university approach", the intervention draws upon the "ABCs of mental health" framework—Act, Belong, Commit—to guide its conceptualisation and implementation [37, 38]. Originally developed in Australia in 2002, the ABC framework is premised on the understanding that mental health is shaped by a



range of determinants operating at the individual, community, and structural levels [39]. The ABC-Uni intervention adopts this model to ensure a holistic response, aiming to enhance mental health literacy while cultivating a culture of wellbeing throughout the institution [3]. Rather than focusing exclusively on the management of psychological difficulties, the initiative prioritises proactive wellbeing promotion embedded across the university environment. The overarching aim is to raise awareness, build supportive environments, and strengthen institutional capacity to promote mental health across all levels of the university. The ABC framework advances this agenda by promoting a shared vision, establishing common terminology, encouraging participatory practices, and embedding wellbeing into the organisational fabric. These mechanisms are anticipated to enhance knowledge, skills, resources, commitment, and accountability across the academic community [40, 41]. The ABC-Uni interventions comprises a series of interlinked components targeting the structural, community, and individual domains. Key elements include staff development programmes, awareness-raising campaigns, a participatory photovoice project, integration of wellbeing content into induction activities, an elective credit-bearing course, and an online module. Staff training is designed to strengthen capacity in mental health promotion by enhancing knowledge and mental health literacy, thereby contributing to the creation of supportive academic and social settings [3, 50]. Communication initiatives serve to elevate awareness and improve mental health literacy using both physical and digital media, empowering students to capture and communicate their experiences of wellbeing, through photography to engage and inform stakeholders. Wellbeing content is embedded in introductory programmes to support students' transition into university life, while the elective course integrates theoretical and practical dimensions of mental health promotion within the curriculum. In parallel, a web-based module offers accessible, self-directed learning to further reinforce students' knowledge, skills, and motivation to engage in wellbeing-enhancing behaviours [3, 10]. Effective implementation of the ABC-Uni approach requires strategic capacity building at multiple levels, encompassing students, staff, and faculty. The development and delivery of each component involved consultation with internal and external partners, including students, academic and professional staff, student organisations, and other higher education institutions. This participatory ethos is integral to fostering shared ownership and sustainability of this model of mental health promotion within higher education [3, 26].

3.3 RAKSHARA Framework

The increasing prevalence of mental health challenges among university students necessitates a shift from reactive responses to proactive, institution-wide strategies [42]. Central to this transition is the adoption of a whole university approach, which embeds mental health support into every aspect of the student experience, moving beyond standalone services [42, 43, 44]. A recent scoping review by King's College London and Manipal University introduces the RAKSHAKA framework, which positions faculty as key figures in safeguarding student mental wellbeing [5]. It highlights the need for academic staff to be equipped with the necessary knowledge, relational skills, and resources to identify and respond effectively to students in psychological distress. The framework guided the review of university-based training initiatives and student support services, focusing on faculty preparedness in promoting mental health. RAKSHAKA comprises eight integrated components: Resources, Affective skills, Knowledge of mental health, Severity identification, Health promotion, Assistance strategies, Knowledge of roles and boundaries, and Access to services. These elements collectively support staff in recognising distress, responding appropriately, and referring students to the relevant services. Key aspects include the provision of practical tools such as manuals, reporting systems, emergency contacts, and educational materials; training in empathetic engagement, including active listening and open dialogue; and education in identifying behavioural, cognitive, and emotional signs of distress. Despite its structured guidance, concerns persist regarding role ambiguity among educators, many of whom report insufficient training and uncertainty about the scope of their responsibilities [25, 42, 45, 46]. The framework underscores the importance of maintaining professional boundaries and understanding when confidentiality may be ethically breached, such as in cases of sexual misconduct or discrimination. Faculty are also supported in assessing the severity of mental health concerns, particularly risks of self-harm and suicide, while promoting their own wellbeing and modelling healthy behaviours. It also promotes inclusive learning environments by addressing stigma and encouraging referral through clearly defined protocols. In this context, the RAKSHAKA framework offers a clear and comprehensive model to enhance faculty confidence and competence in supporting student wellbeing, aligning with broader institutional

efforts to create a mentally healthy university culture. The effectiveness of mental health programmes within higher education is significantly enhanced when student support services are strategically aligned with the components of faculty development related to student mental health [3, 4, 5, 26]. A coherent and integrated approach—linking the scope of student services with staff training initiatives—ensures consistency in practice, fosters shared understanding across institutional roles, and facilitates a more responsive and supportive environment for student wellbeing.

4. Faculty Development for Mental Wellbeing

While university is being recognised as an essential site for mental health promotion, prevention and early intervention, evidence-based programming tailored to this setting and population remain limited [47]. Faculty and staff are well-positioned to act as "gatekeepers" due to their frequent interactions with students in roles such as educators, mentors, supervisors, and service providers [4, 5]. Gatekeeper training, since its conceptual emergence in the 1990s, is commonly designed to enhance mental health literacy (MHL). MHL is typically defined as comprising three core components: (1) improving knowledge and understanding of mental health and mental illness; (2) reducing stigma associated with mental health difficulties; and (3) increasing help-seeking efficacy, including both behaviours and confidence in seeking or encouraging support. Gatekeeper training involves educating individuals (typically non-professionals) who frequently interact with community members, to identify, communicate, and connect individuals experiencing distress or mental health symptoms to support and care [48].

In the light of the growing prevalence of mental health distress among students in higher education institutions, it is fundamental to equip academic staff with skills and resources to effectively respond to such challenges [1, 10]. McMaster University published the Professor Hippo-on-Campus Mental Health Education Programme for Educators and Navigators, a novel mental health literacy training initiative [4]. Modules were evidence-based and centred on providing knowledge for university faculty and staff about mental health disorders, notably the Keyes Dual Continuum Model of Mental Health [49]. The program consists of three hours of asynchronous virtual e-modules and an optional two-hour synchronous workshop. The eight asynchronous modules delivered online cover topics such as understanding student mental health, stress and resilience, emotions and mental illness, creating inclusive learning environments, communication strategies, the "5 R Protocol", academic accommodations, and self-care for educators. The synchronous models are designed to reinforce and apply module content through engaging discussions, creating mental health-positive environments, applying the "5 R Protocol" to case studies, and reviewing campus resources [4].

Literature shows how faculty development nourishes the cultivation of positive relationships, personal growth, self-acceptance, as well as developing a sense of purpose within the role of lecturers [12, 22]. While faculty and staff often want to support students, many feel unprepared or lack sufficient education and training. To this avail, the study on Professor Hippo-on-Campus programme reports significant improvements in faculty attitudes, knowledge, and stigma toward student mental health issues [4]. Parallel to the development of the Professor Hippo-on-Campus program, a campus-wide protocol, "Responding to Students in Distress and Difficulty" was created. The 5 Rs represent key steps in supporting a student in stress or difficulty which include: (1) Recognize (signs of difficulty or distress); (2) Reach out (to the student or identify an alternative helper); (3) Rate (the level of student distress or difficulty as no additional support (green), support (yellow), urgent (orange), or emergency (red)); (4) Respond (recommend, refer or accompany, act); and (5) Review (student and supporter needs). The Professor Hippo-on-Campus programme demonstrated strong feasibility and acceptability, resulting in notable improvements in participants' confidence, knowledge, attitudes, and stigma reduction, alongside high levels of satisfaction [4].

These findings can act as a springboard for other institutions interested in exploring the feasibility of mental health literacy training for staff in student-facing roles, strengthening institutional support systems and evaluating training outcomes.

5. Conclusion

Building on the growing evidence of positive applications of holistic approaches to faculty development, this study seeks to contribute to the advancement of mental health literacy courses in an Italian online context. Honing the best practices of inclusive and systemic faculty development,



with staff acting as mental health “gatekeepers” and students actively contributing to universities’ policies, a whole university approach to universities’ wellbeing can be applied. As we broaden our horizon of the role universities can have in the promotion and prevention of mental health challenges, such wellbeing initiatives have the potential to ripple across higher education institutions bringing sustainable change. Bearing in mind the limitations linked to a single case study, further studies could aspire to inform the development of a pedagogical framework designed to support mentally flourishing academic communities.

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