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Student Mental Health Study 2023

IN PARTNERSHIP WITH

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Imperial College
London

Universities
UK

A call to improve and
sustain students' and
graduates' mental health

SUPPORTED BY

student
minds

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After three years of running the Cibyl Student Mental Health study, what strikes me the most is the continued impact of environment, background and circumstances on mental health. The first year of research showed the effect of the COVID-19 pandemic on student and graduate mental health, and now the cost of living is causing anxiety. Levels of support available at university continue to influence a sense of community, belonging and improved mental health. Across the years, we have seen personal identity consistently linked to mental health outcomes, with marginalised groups experiencing worse mental health than average.

Cibyl's market-leading research aims to improve students' and recent graduates' lives through data and actionable insights. We're grateful for the expertise and input from our partners Accenture, Imperial College London and Universities UK, and supporting advice from Student Minds, the UK's student mental health charity.

Lisa Marris
Head of Research at Cibyl

The relationship between mental health and equality, diversity and inclusion issues is clearly demonstrated within this report. As a sector, we cannot meaningfully improve students' wellbeing without also committing to identifying, challenging and dismantling the barriers to good wellbeing which continue to exist through the sustaining of deep-rooted inequalities. Collectively, we must endeavour to intentionally create university communities which are safe, inclusive and supportive for all students – not just those who have traditionally been privileged by an unequal society. This includes developing specific interventions for marginalised groups, and providing effective, culturally competent support.

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I am delighted that 2023 marks our third year of partnership with Cibyl to better understand student mental health. We already know that for many students their experience in education is not necessarily akin to the much talked-about promise it will be "the best years of their life" and sadly their transition into the world of work can also present some unique challenges. Our hope is that this report will encourage schools, universities and employers to consider what more they can do to support students through these important development years to ensure they are able to reach their full potential.

Almost all of us are impacted by mental health issues, either directly or through experiences of those who are close to us. It is heartening to see more organisations providing opportunities for employees to be part of a safe and open culture where people feel they can openly talk about their mental health. Having visible role models sharing their experiences can be really impactful for students as they take the first steps on their career journey. At Accenture we look for opportunities to convey our culture of belonging and inclusion as part of the attraction, assessment, pre joiner and induction phases. People are at the heart of our business and connection is what will enable us to perform our best work at the heart of change for our clients. We are excited to learn the insights and recommendations from this year's report to help shape our plans for 2024.

Joan Moore
Head of Early Talent Recruitment

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Students are increasingly looking at what mental health support is available when choosing where to study. This suggests greater awareness of either existing needs or potential challenges ahead. However, we still see students facing unexpected difficulties and not knowing how to access support – whether that is what services are available or what language to use to ask for help. This demonstrates the need for enhanced efforts around transitions and communication.

We must continue to improve the ways in which we prepare students for the significant transitions into, through and out of higher education. Institution-wide induction and progression approaches need to be built with sufficient nuance to ensure that the range of backgrounds, characteristics and identities are reflected. Partnership working is critical to creating a shared language and open discourse in relation to mental health.

At Imperial College London, we have launched a Mental Health and Wellbeing Strategy which pulls focus on these issues while also seeking to enhance our service offering and deepen links with external statutory providers such as the NHS. This has been informed by our own experience of our students' needs, as well as the significant and sector-wide work of universities, colleges and other sector bodies such as Universities UK.

The work we have been privileged to undertake with Cibyl and partners helps with pinpointing those areas where we can continue to make a positive impact on our students' experience.

Claire Fox
Head of Student Counselling & Mental Health Advice Service

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UK

The Cibyl Student Mental Health Study 2023 makes uncomfortable reading, revealing a student and early career cohort facing severe difficulties.

Some of the report's findings, though difficult, should not surprise us. For example, that one in four students may have a diagnosed mental health condition – this corresponds to wider prevalence in young adults. Or that cost of living pressures and student housing problems are contributing to consistently low student wellbeing.

It is also to be expected that both prospective students and recent graduates cite accessible mental health support as a reason to choose a place of study or work. There has been much policy focus on the transition into higher education. We also need to see employers working more closely with universities to embed resources and support across into early careers.

More worrying for university leaders are the findings that how we teach and assess contribute to poor student mental health and that 2 in 5 students report that their mental health has got worse during their time at university. As a sector, we need laser focus on the relationship between learning and mental health, particularly on how we become kinder and more inclusive in our academic processes. It is in our gift and well set out in the whole university approach required by the Student Minds University Mental Health Charter. But our vice chancellors need to lead this change, not delegate it.

Universities cannot do this alone. It is important that we understand and improve the continuum of support across what we resource – the student services and mental health teams deserve huge credit for the way they are responding to surging need and complexity – and what is available from the NHS and third sector service providers, as well as from peers, carers and families. But, as is often pointed out, universities, as settings for education, are de facto health settings. Our mental health is fundamental to learning and work. We must acknowledge our keystone role in students' and graduates' health, and their future productivity and happiness.

I am pleased that UUK will continue to partner with the Cibyl Student Mental Health Study into 2024.

John de Pury
Assistant Director of Policy

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About this survey

What this survey found

Now in its third year, the Cibyl Student Mental Health Study asked 12,796 students and graduates from more than 140 universities to put student life and mental health (MH) into perspective. The 2023 survey reveals that half of respondents (50%) have worries about their MH daily or weekly with a similar proportion (48%) concerned about their physical health.

Within the group of survey respondents, 11% were graduates and 89% were current students. This group can be broken down as follows:

82% full-time students

4% part-time students

2% completing a placement year at the time of survey

1% completing a year abroad

1% currently taking a year out

Students are typically depicted as care free and perfectly poised on the gateway to success and fulfilment. University life traditionally brings new friendships and exciting horizons, hard work and hard partying, with a sub-text of too little sleep and a no-worries diet to offset time spent in lectures and libraries. The real picture is more nuanced: the future, however brightly it shines, involves some dark moments for many young people, even those whose prospects are traditionally seen as elevated. When asked overall how satisfied students are with life, the average rating works out at 5.9 out of 10.

Economic factors

Current economic hardships affect a significant number of young people, no matter what their background. More than 3 in 5 (62%) respondents put money on their list of key issues, despite only 4% of student respondents and 5% of graduates (around 1 in 20 and 1 in 25 respectively) coming from low socio-economic groups. Those from neither high nor low socio-economic groups make up 85% of respondents (around 17 in 20), with 2 in 20 (10% of students and graduates) coming from high socio-economic groups.

What proportion of respondents worry about money daily or weekly
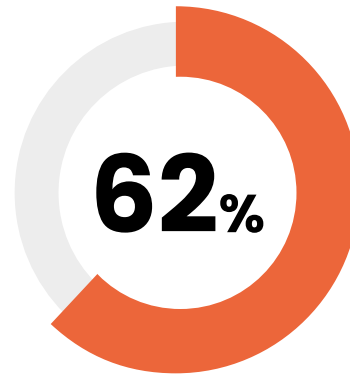
62%

Base n = 10,328

More than **3 in 5** (62%) respondents put money on their list of key issues despite only 4% of students and 5% of graduates surveyed coming from low-socio-economic groups.

Worrying about money

40%

22%

21%

10%

7%
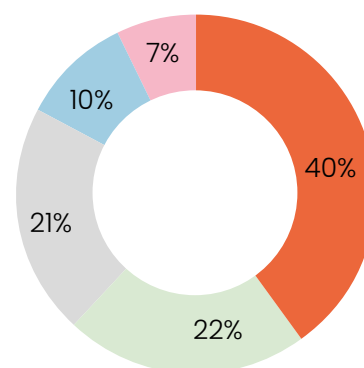
■ Daily
■ Weekly
■ Monthly
■ Once or twice a year
■ Never

Base n = 12,459

Mental load

The need to make the grade at university and work is a big factor in the mental load being carried by young people daily and weekly.

Around 3 in 5 (57%) respondents indicate they are worried about finding a graduate job, with 2 in 3 (67%) anxious about not being good enough or doing well enough. Around 3 in 5 (61%) student respondents worry about exams and other key deadlines, the same figure as those concerned about studying for long hours. And it's worth remembering that such pressures don't end with university – a new career path or profession may involve further study and exams, to gain accountancy or legal qualifications, for example.

For those respondents in work, more than 1 in 5 (22%) fear losing their job at any moment, and even when they have time off at the weekend, or for a holiday, more than 1 in 4 (27%) feel concerned about returning to work, with a similar proportion (24%) saying the same about returning to university after holidays.

Finding a place to live, as a student or graduate, is an issue for the majority of respondents, with only 1 in 3 (32%) never thinking about it and around 3 in 10 (29%) thinking about it once or twice a year. More than 1 in 10 (11%) respondents think about finding their next place to live every day.

Few respondents were untouched by the list of factors signalling MH concerns over the last 12 months. Only 1 in 20 (6%) were able to say that they had experienced none of the signs, with 1% or 1 in 100 preferring not to say. Around half of respondents to our survey experience feelings of being unable to cope with work or study, thinking negatively about the future, being tired, being unable to sleep and avoiding things because they were too stressful.

Student mental load

57%
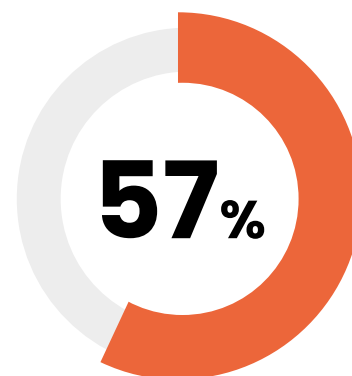
Base n = 10,328

Around **3 in 5** (57%) student respondents indicate they are worried about finding a graduate job.

61%
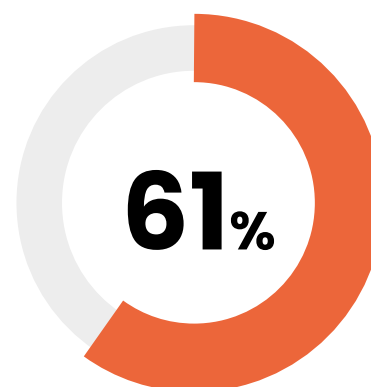
Base n = 1,169

Around **3 in 5** (61%) graduates worry about exams and other key deadlines.

1 in 4

respondents say they have never had any MH difficulties.

What are the positives?

The survey looks more deeply into each of these areas of anxiety, concern and hardship but there are positives. When asked which statement best describes their own MH:

- 23% of respondents, around 1 in 4, say they have never had any MH difficulties

- 22%, just over 1 in 5, say they had difficulties in the past, but not currently

- 3%, 3 in 100, prefer not to say whether they have had difficulties or not.

However, that still leaves:

- 28%, more than 1 in 4, experiencing MH challenges at the time of the survey

- 24%, just under 1 in 4, unable to describe their MH.

It is the state of students' MH and the factors that affect it that this survey examines but at Cibyl we feel data is at its most valuable when used to understand and address findings head-on. Only then can universities, employers, parents, tutors and students themselves work out how to ease MH pressures. The Cibyl Mental Health Survey 2023 provides a roadmap through the difficult transition into adulthood via university and on into working life and a happier future.

Which one of the following best describes your own mental health?

23%
50%
24%
3%
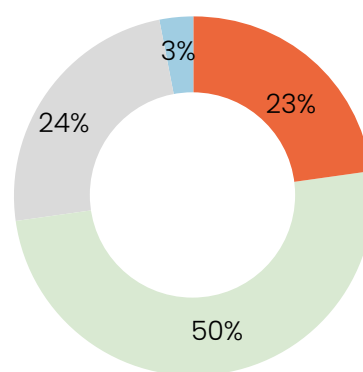
■ I have never experienced any mental health difficulties
■ Experienced mental health difficulties
■ I'm not sure how to describe my own mental health
■ Prefer not to say

Base n = 12,108

Student mental health: the inside story

The importance of mental health provision

Increasingly young people place good MH support on their list of important factors when they are choosing universities and employers. Year on year, significantly so in the case of assessing what employers have to offer, awareness and expectations of MH provision are changing.

Our survey invited young people to outline how they would describe their MH. The findings show that some groups are particularly vulnerable to mental health challenges while studying and entering the workplace.

Importance of mental health provision at university

When choosing a uni how important is it to know that they have a robust mental health provision?

Legend:
- 2021
- 2022
- 2023

Category	2021	2022	2023
Not important	36%	22%	15%
Important	32%	46%	58%

Legend:
- Russell Group University
- Non Russell Group

Category	Russell Group University	Non Russell Group
Not important	19%	12%
Important	53%	61%
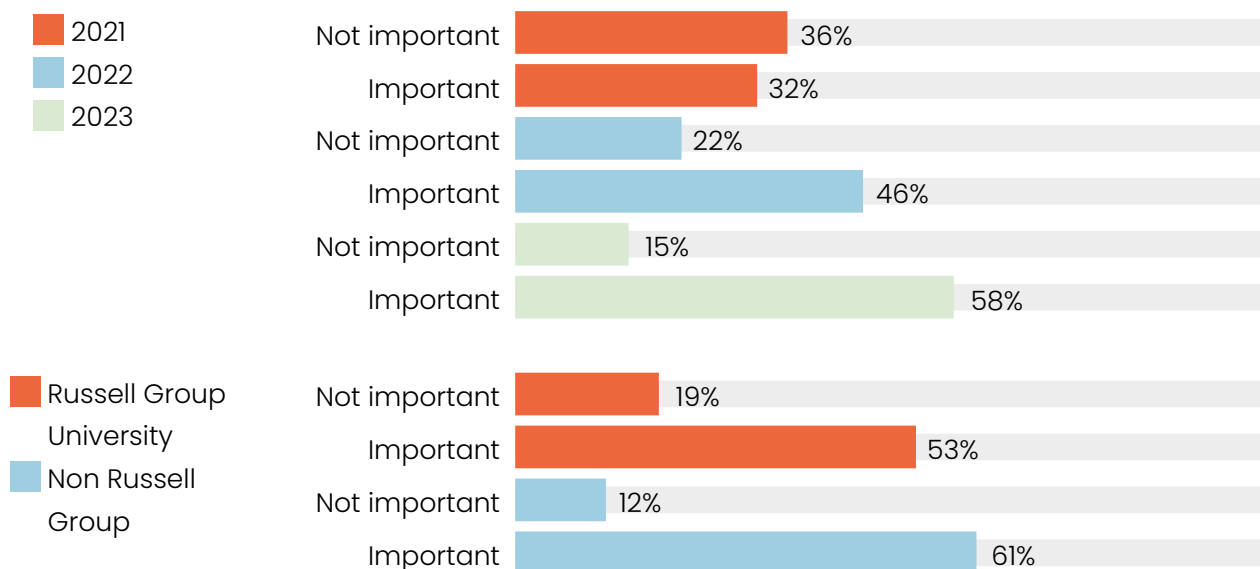
Importance of mental health provision at work

When choosing an employer how important is it to know that they have a robust mental health provision?

Legend:
- 2021
- 2022
- 2023

Category	2021	2022	2023
Not important	33%	19%	6%
Important	32%	51%	81%

Legend:
- Russell Group University
- Non Russell Group

Category	Russell Group University	Non Russell Group
Not important	7%	6%
Important	79%	82%
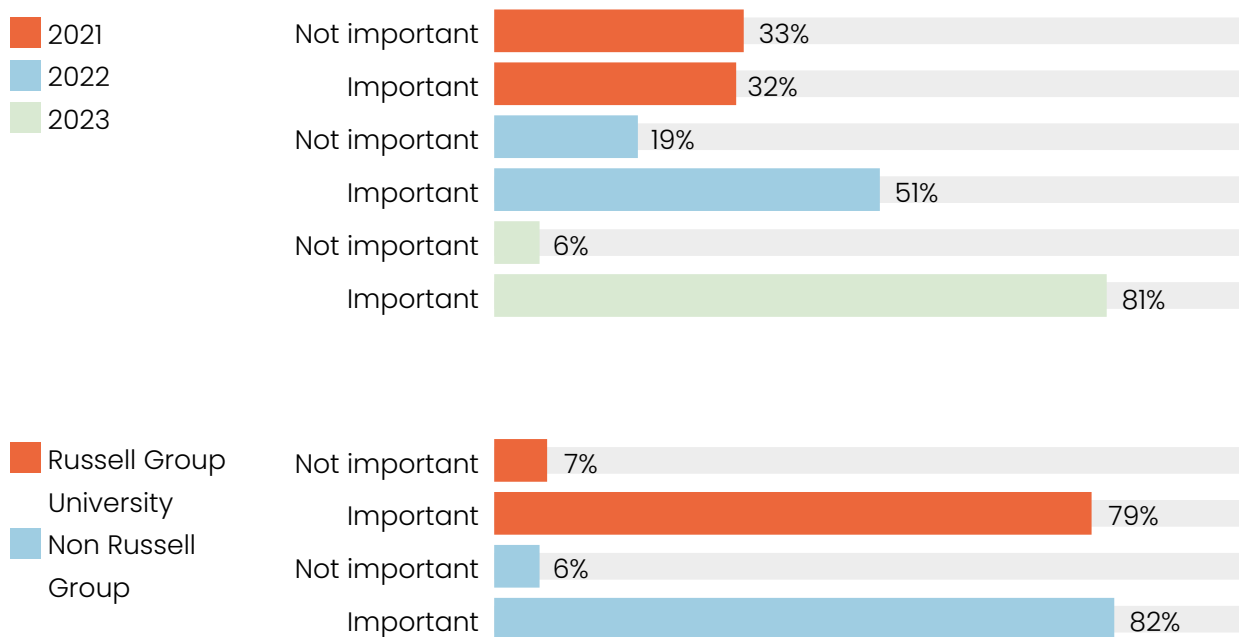
Asking the right questions

When setting the questions for the survey, Cibyl aligned them with the University Mental Health Charter (details of which can be found on page 97) and sought input from MH experts and charities.

Cibyl used the World Health Organisation (WHO) wellbeing index to assess students' WHO-5 score at 50 out of 100.

The WHO wellbeing index consists of five statements, which respondents rate based on the experience of their last two weeks.

These are:

- all of the time = 5

- most of the time = 4

- more than half the time = 3

- less than half the time = 2

- some of the time = 1

- at no time = 0

A starting point

One of the key things we can ascertain through the report is how many respondents experience a decline in their MH after starting university and what happens next. Nearly 2 in 5 (39%) said that it had declined, while nearly 1 in 3 (32%) said their MH had not changed and around 1 in 4 (23%) said their MH had improved (5% opted not to say). This year's results are similar to those Cibyl highlighted in last year's survey but when we asked students if they were currently experiencing MH difficulties there was a fall in the percentages from 35% in 2021 and 33% in 2022 (both studies took place when students had been affected by COVID-19 lockdowns) to 29% among this year's respondents.

Student descriptions of their mental health [current students]

Never experienced any MH difficulties	23%
Experienced MH difficulties in the past	21%
Currently experiencing MH difficulties	29%
Not sure how to describe my MH	24%
Prefer not to say	3%

Base n = 10,924

My MH has declined	39%
My MH has not changed	32%
My MH has improved	24%
Prefer not say	5%
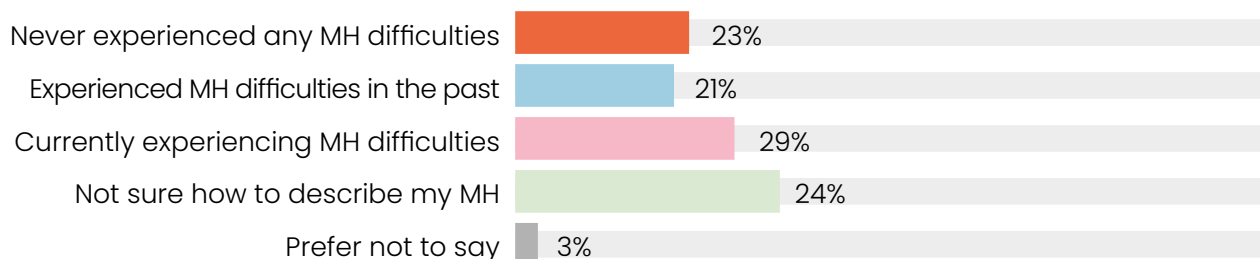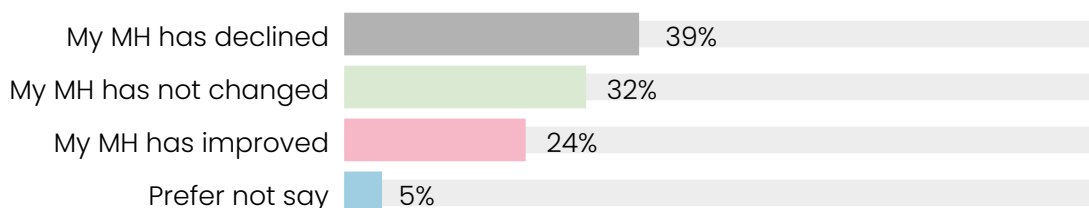
Base n = 11,551

Changes in how students report on their mental health [current students]

Currently experience MH difficulties

COVID-19 lockdowns	2021	35%
	2022	33%
	2023	29%
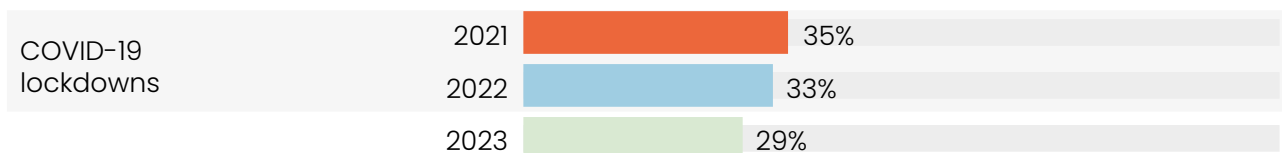
Mental health has declined

COVID-19 lockdowns	2021	39%
	2022	39%
	2023	39%
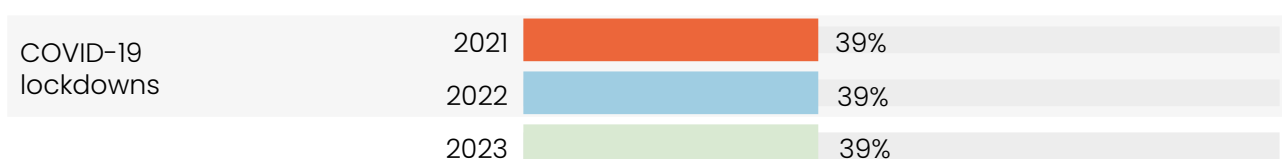
So how important is robust MH provision to students choosing a university?

As previously indicated, this is a growing consideration, though university rankings are based on factors such as course, teaching quality and career prospects. Even though MH provision does not affect ranking points, universities should be aware how much students value it:

- more than half of students and graduates (58% and 55% respectively) said robust MH provision was important

- around 1 in 4 of students and the same number of graduates (24%) felt neutral about MH provision

- only 3 in 20 (15%) students and 1 in 6 (17%) graduates said it was not important.

Across the three years of Cibyl's Student Mental Health Study, the proportion of students saying that robust MH provision was important in choosing a university has risen from 1 in 3 to nearly 3 in 5 (32% in 2021, 46% in 2022, 58% in 2023).

Looking across student year groups:

- more than 3 in 5 (63%) first years indicated good MH support was overall an important factor in choosing a uni

- nearly 2 in 5 (39%) first years said it was very important, compared with 28% of middle year and 31% of final year respondents.

Robust MH support is rated a particularly important factor for the 2 in 3 students with an existing MH disability (67%) and those who are LGBTQ+ (63%).

These two groups of respondents are examined in more depth on pages 29 and 34.

Employer support and MH provision

Looking at employers' MH provision, a significant number of undergraduates answered this question, with 4 in 5 respondents saying good MH provision is important. The results are similar, regardless of year of study, whether responses came from undergraduates or graduates, or from postgraduates who were either looking for, or in, work. What is remarkable is that year on year, this has risen significantly from 1 in 3 (32%) in 2021, to 1 in 2 (51%) in 2022, to 4 in 5 (81%) in the 2023 Cibyl Mental Health Study. Would good MH provision ever outweigh such other factors that graduates take into account when choosing an employer, such as pay, holiday provision, prospects of career progression and the location and reputation? A recent Universities UK (UUK) report points out the rising number of graduate vacancies while the Chartered Institute for Professional Development (CIPD) acknowledges MH issues can affect one in four people at some point in their lives and have a significant impact on employee wellbeing. You can find more on this topic on page 81.

Who needs support?

Overall, responses show that 4 in 5 (81%) current students have been directly affected by MH difficulties, a similar proportion to employed graduates (82%) and unemployed graduates (83%).

Importance of MH support in an employer [graduates]

- 79% Important
- 12% Neutral
- 8% Not important
- 1% Don't know

Important
Neutral
Not important
Don't know
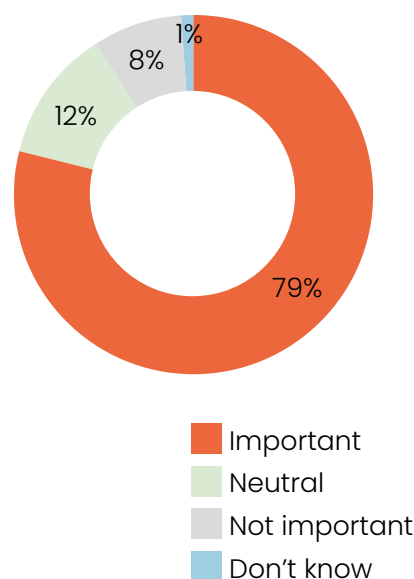
Base n = 1,159

What is your employment status?

Seeking work	41%
Employed FT in a permanent role	33%
Employed FT in a temporary role	12%
Employed PT	9%
Self-employed (incl. gig economy)	3%
Neither working nor seeking work	2%
Long term sickness or not seeking work due to disability	0%

Base n = 1,169

Employed

Total (n=1,169)	57%
Male (n=437)	55%
Female (n=699)	58%
White (n=447)	68%
Asian (n=446)	46%
Black (n=149)	53%
Low SE background (n=60)	63%
High SE background (n=121)	58%
LGBTQ+ (n=195)	59%
MH disability (n=155)	59%
Other disability (n=96)	46%
No disability (n=818)	56%

81%

consider employer's MH provision an important factor in choosing a role.

Cibyl derived these figures by combining respondents who had:

- experienced MH symptoms in the last 12 months

- experienced suicidal feelings

- currently or previously experienced MH difficulties.

Breaking this down by student groups, almost all LGBTQ+ respondents (94%) have had MH difficulties, with students who were white (90%), from a low socio-economic background (87%) or female (86%), showing the highest rates of experience of MH difficulties past or present. Undergraduates have higher rates of personal MH experience than postgraduate students (85% vs 73% respectively). In more depth, 17 in every 20 middle or final year respondents (85% and 84% respectively), along with more than 3 in 4 (77%) first-year students, were touched by MH difficulties.

Touched by mental health difficulties by student groups
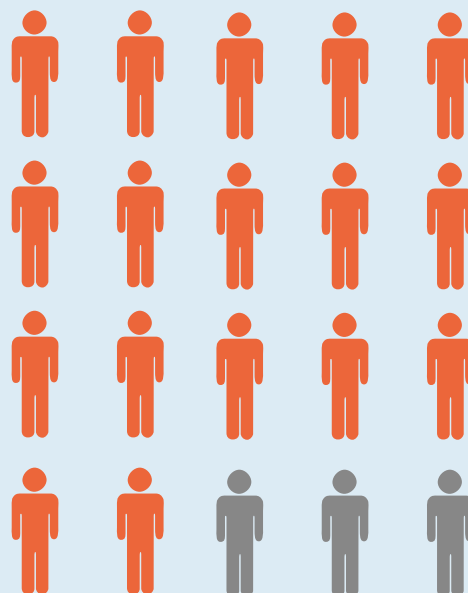
17 in every 20 middle or final year respondents were touched by MH difficulties.

More than 3 in every 4 (77%) first year students were touched by MH difficulties.

98%

of students are employed or seeking employment.

On the subject of which one description matched students' own assessment of their MH, it is notable that this year's respondents paint a slightly more positive picture than those who responded in previous years – which could be the effect of greater resilience post-COVID-19, something we examine in greater depth later in the report.

Comparing the percentage of respondents who said they had never experienced MH difficulties year on year this figure was:

• 16% in 2021

• 18% in 2022

• 23% in 2023.

The percentage of respondents who have experienced MH difficulties fell from 57% in 2021 to 50% over the three years of the survey, with those not sure how to describe their MH consistently around 1 in 4 (25% falling to 24%) and those opting not to say rising from 2% in 2021 to 3% in 2022 and 2023.

But even so, with other pressures coming into the picture, now is not the time to be complacent about student MH.

2 in 3

students (who are aware of the university counselling services) do not use any.

The services students and graduates use

Despite more than half of this year's student respondents placing a value on robust MH services when choosing a university there is a low rate of engagement and usage when they actually need support. University and student union (SU) help available to those in need ranges from counselling, advice and wellbeing sessions to 24/7 support, self-help resources and a mentor or buddy scheme. However, among all current student respondents, 1 in 5 (19%) are not aware of any of the services their university or SU provides.

University and SU services are not an option for most graduates, but MH support services are available from the NHS, charity or third-sector provision. Some employers also offer private and in-house MH support, such as counselling services, as part of a wellbeing policy. Despite moves to improve public awareness of failing MH and to break down any stigma that still surrounds it, 1 in 6 (16%) graduates said they did not know about any NHS and third-sector MH support services.

1 in 5

students are not aware of their university or SU providing any mental health support services. Students are most aware of, and make most use of, counselling services and MH advisers.

Awareness of university/SU MH support services [current students]

Service	Percentage
University/SU counselling services	45%
University/SU mental health advisers	38%
University/SU wellbeing sessions	37%
University/SU 24/7 support	36%
University/SU self-help resources	30%
Mentor/buddy provided by university/SU	25%
Other	1%
Prefer not to say	4%
None	19%
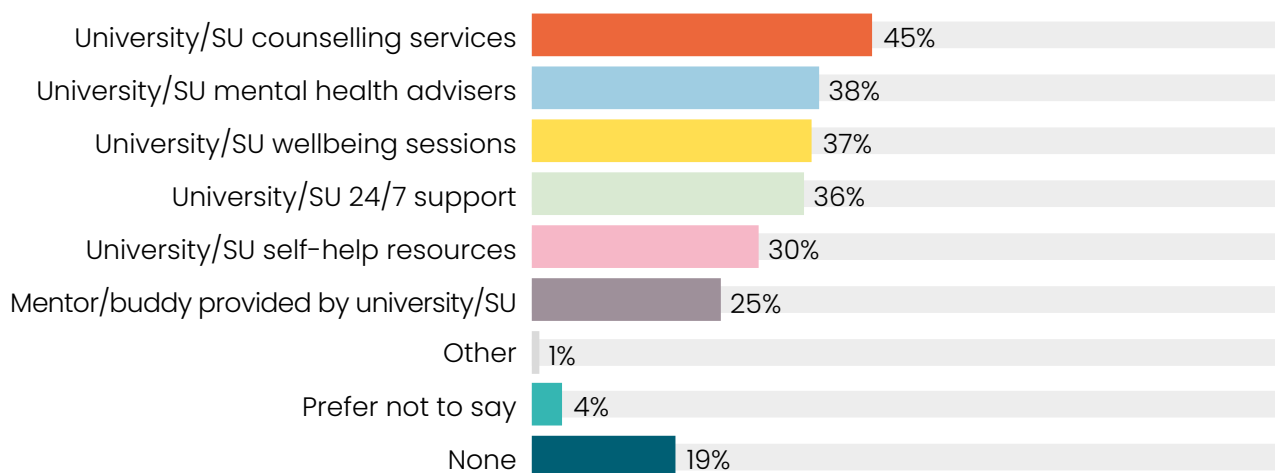
Base n = 10,433

Awareness of NHS/third sector MH support services [graduates]

Service	Percentage
GP services	64%
24/7 support helplines	51%
Counselling services	48%
Not-for-profit support	45%
A&E	38%
IAPT (talking therapy)	15%
Disability services	11%
Eating disorders services	11%
Prefer not to say	1%
Other	1%
None	16%

Base n = 1,079
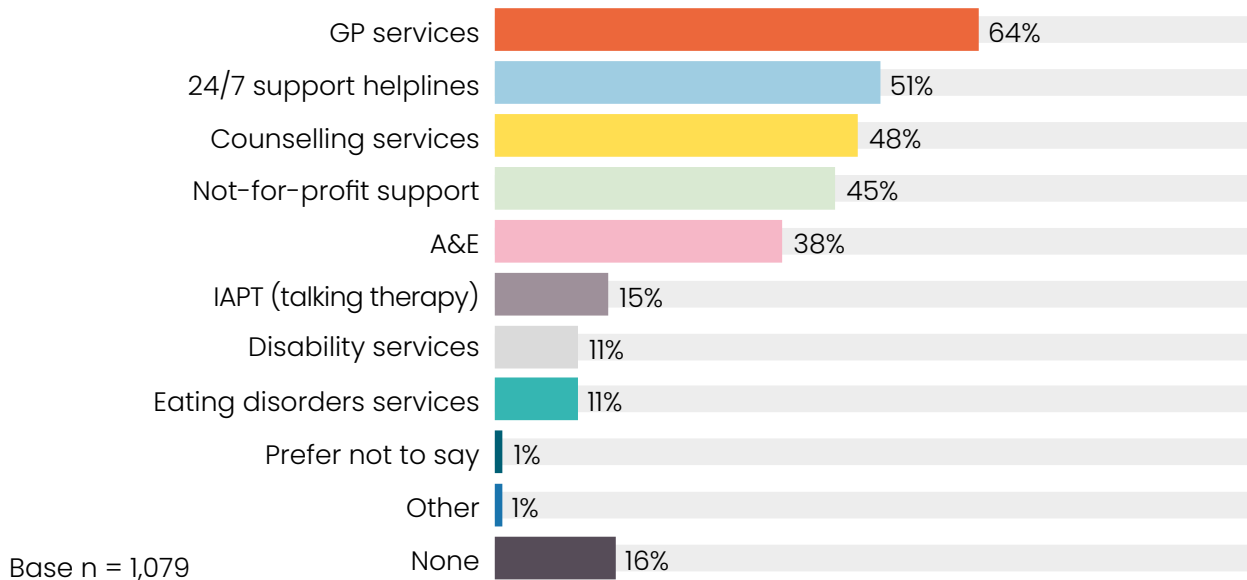
Bearing in mind that 4 in 5 (81%) current student respondents have experienced MH difficulties, past or present, 2 in 3 (64%) admitted they had not used any of the support on offer. The most frequently used service was university or SU counselling, used by 3 in 20 (15%) student respondents aware of provision. Least used was 24/7 support, used by 1 in 20 (5%).

Given that 2 in 3 (64%) graduate respondents have experience of depression and anxiety, (61% among employed graduates, 68% for unemployed graduates), there are low levels of engagement with the support and help available. More than half (54%) of graduate respondents had not used any MH support services, but the rate of engagement among those who did use services (and who may have used more than one) were:

• 1 in 3 (32%) used GP-led MH support services

• 1 in 6 (17%) used counselling services

• 1 in 14 (7%) used hospital accident and emergency (A&E)

• 1 in 14 (7%) used 24/7 support helplines.

Student usage of SU MH support services [by those aware]

Service	Usage
University/SU counselling services	15%
University/SU mental health advisers	10%
University/SU self-help resources	8%
University/SU wellbeing sessions	8%
Mentor/buddy provided by university/SU	6%
University/ SU 24/7 support	5%
Other	0%
None	64%
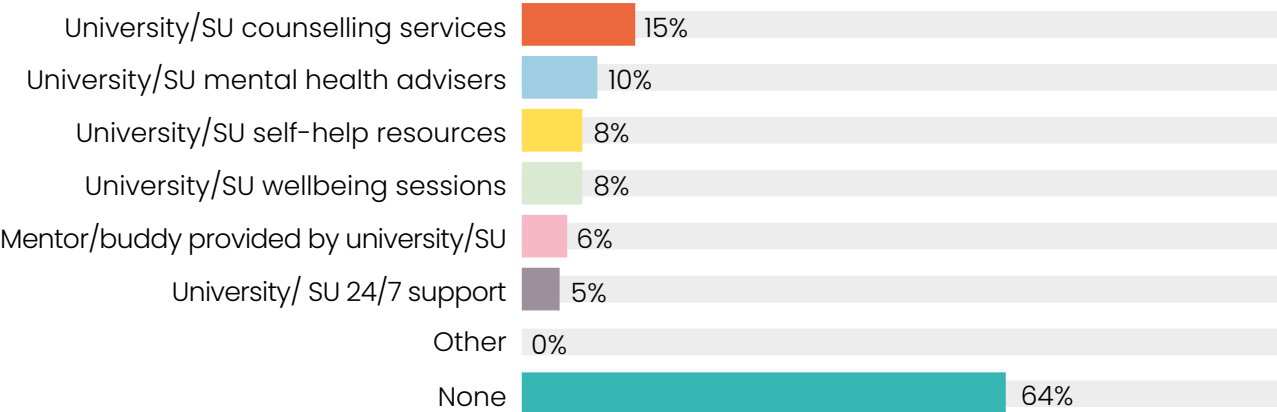
Base n = 8,140

Student usage of NHS/third sector MH support services [graduates]

Service	Percentage
GP services	32%
Counselling services	17%
A&E	7%
24/7 support helplines	7%
IAPT (talking therapy)	6%
Not-for-profit support	6%
Disability services	1%
Eating disorders services	0%
Other	1%
None	54%
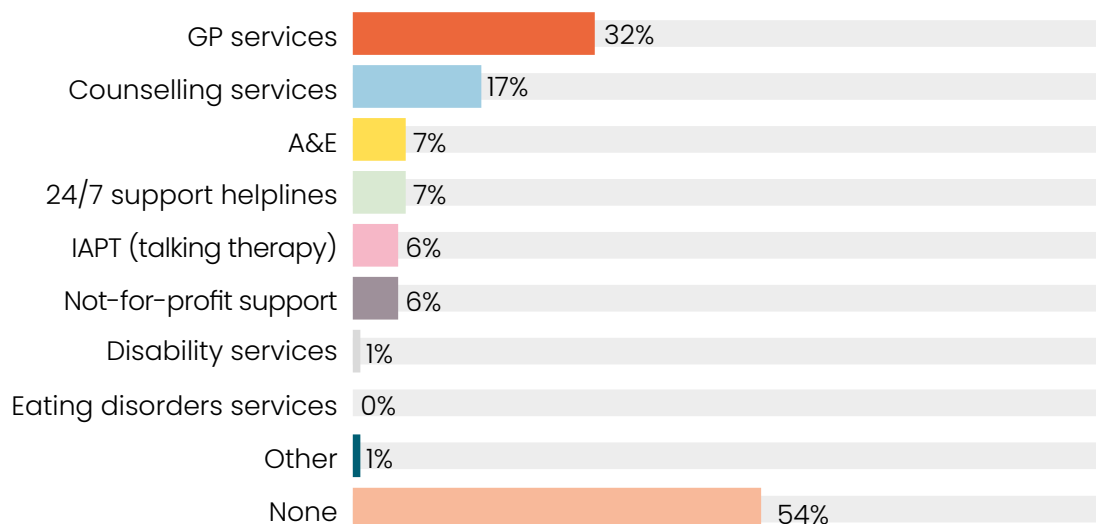
Base n = 1,079

How effective are support services?

Current students' assessment of services engaged with varies, so although students seemed to prefer counselling as an option, 1 in 4 (26%) felt this had been somewhat/ totally ineffective, although 2 in 3 (67%) said it had been somewhat or very effective. The remainder preferred not to say or had no opinion on the effectiveness of counselling. Most effective (though not most popular as a choice of service) were wellbeing sessions, well-rated by 8 in 10 (77%) of the current student respondents who had engaged with these, with only 3 in 20 (14%) saying they had been either totally or somewhat ineffective. Self-help resources were the least effective MH support according to more than 1 in 3 (36%) student respondents using the services, though more than half (55%) rated them effective.

When we asked students why they had not engaged with their university's MH support services, 2 in 5 (38%) said not knowing what to say and how to express what had happened to them, were the foremost barriers, with feeling ashamed and feeling there was nothing anyone could do to help also key issues. Difficulty in securing an appointment was an issue for 14% of respondents. As an overview, students still feel there is a stigma attached to MH, and lack trust in the help.

The top reasons for not seeking MH support are related to a lack of understanding of how to talk about MH, the stigma and a lack of faith that effective help can be provided.

Effectiveness of SU MH support services [current students]

	Totally ineffective	Somewhat ineffective	Somewhat effective	Very effective	No opinion	Prefer not to say
University/SU self-help resources	10%	26%	39%	18%	8%	
University/SU counselling services	11%	16%	43%	24%	6%	
University/SU 24/7 support	8%	17%	37%	28%	7%	
University/SU mental health advisers	8%	13%	46%	28%	4%	
Mentor/buddy provided by university/SU	8%	9%	45%	28%	12%	
University/SU wellbeing sessions	5%	10%	47%	30%	8%	

Legend:
- Totally ineffective
- Somewhat ineffective
- Somewhat effective
- Very effective
- No opinion
- Prefer not to say

Base n = 373 to 1,319

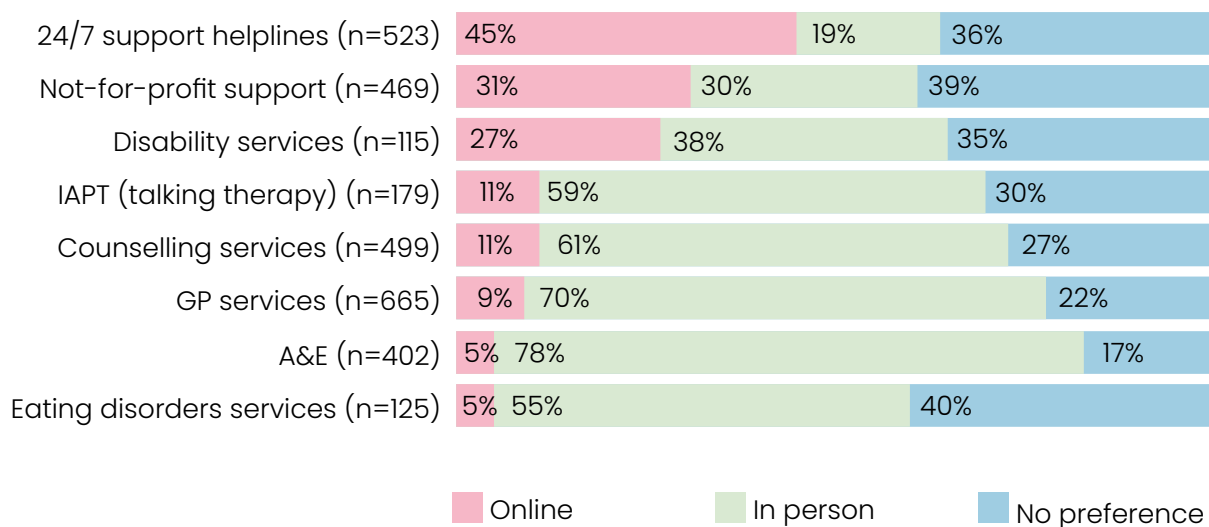Looking at the kind of MH support services graduates use, 24/7 helplines, talking therapies and A&E were considered the least effective (and they were also among the services least engaged with), while counselling and not-for-profit support were the most effective. Although GP services had the highest rates of engagement by far, only 2 in 3 (66%) graduate respondents felt these were effective, with 26% (1 in 4) saying they were ineffective (the remainder preferred not to say, or had no opinion). Least engaged with of all the MH services were those offered by not-for-profit organisations, yet they were rated effective by more than 2 in 3 (68%) respondents, which implies that these should be used more.

When it comes to accessing MH support services online and in-person, graduates would prefer to engage with talking therapies, a GP or counsellor in-person (59%, 61% and 70%, respectively). There's an ambivalence when it comes to not-for-profit services, with 1 in 3 (31%) respondents preferring on-line access, compared with 30% in-person. The remaining 39% said they had no preference. Graduate respondents (perhaps not surprisingly) mostly want to access 24/7 helplines online (45%), with only 1 in 5 (19%) saying they would like such help to be available in-person. More than 2 in 3 (36%) said they had no preference.

In-person or virtual preferences [graduates]– NHS/third sector support

Service	Online	In person	No preference
24/7 support helplines (n=523)	45%	19%	36%
Not-for-profit support (n=469)	31%	30%	39%
Disability services (n=115)	27%	38%	35%
IAPT (talking therapy) (n=179)	11%	59%	30%
Counselling services (n=499)	11%	61%	27%
GP services (n=665)	9%	70%	22%
A&E (n=402)	5%	78%	17%
Eating disorders services (n=125)	5%	55%	40%

Online   In person   No preference
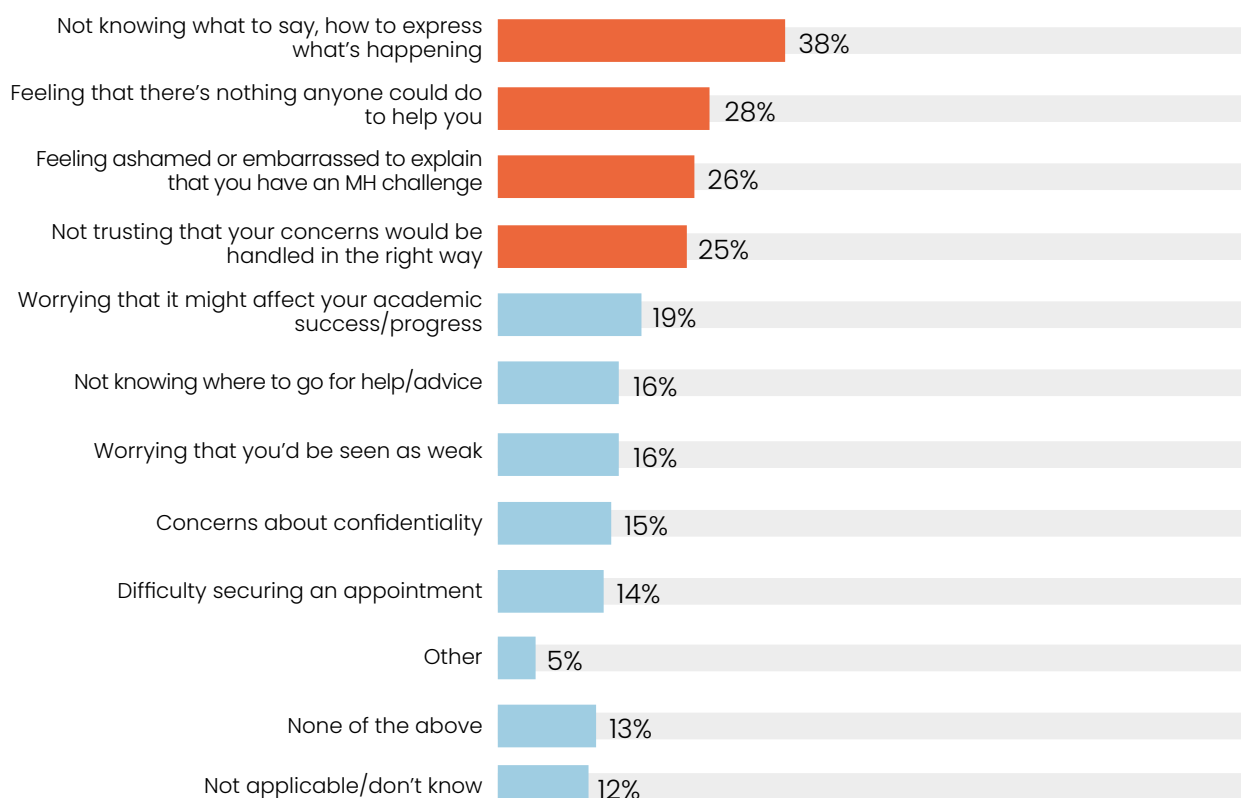
What students say they would like

In open responses, student respondents needing MH support say they would like such things as:

- free-flow sessions, available without appointment to those who need MH help

- better understanding from and training for professors, so they value students' MH

- introductions and workshops from the MH support teams at the start of an academic year.

They also want more availability of appointments and for the university to reach out to students rather than putting the onus on the student with MH difficulties.

Graduates tend to want practical measures from their employer and look for general wellbeing benefits (such as gym memberships) and healthy working practices (such as no emails after hours). We examine these further in our section covering the transition from university to workplace on page 81.

Barriers to using university MH support services [current students]

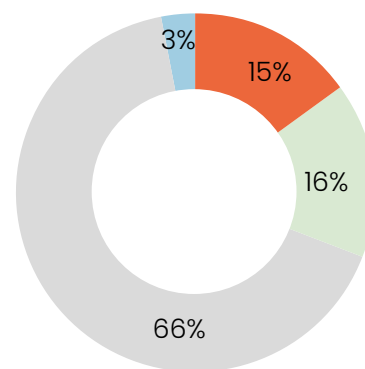| Barrier	Percentage
Not knowing what to say, how to express what's happening	38%
Feeling that there's nothing anyone could do to help you	28%
Feeling ashamed or embarrassed to explain that you have an MH challenge	26%
Not trusting that your concerns would be handled in the right way	25%
Worrying that it might affect your academic success/progress	19%
Not knowing where to go for help/advice	16%
Worrying that you'd be seen as weak	16%
Concerns about confidentiality	15%
Difficulty securing an appointment	14%
Other	5%
None of the above	13%
Not applicable/don't know	12%

Base n = 4,115

Looking at respondents' MH by background can help identify students and graduates most likely to need help and not ask for it. The picture painted by ethnic background, gender, sexual orientation and disability can be completely different from averaged-out statistics, challenging assumptions about who is not OK. Of course respondents will fall into more than one group – LGBTQ+ respondents may also be those who self-identified as having an MH disability, Asian respondents will include females, and so on. Employers and universities need to understand the why and the what, as well as the who. Awareness of risk is never more important than when an employee or undergraduate experiences depression and anxiety, or among those who are most likely to have planned or attempted to take their own lives.

1 in 3

students who have had suicidal thoughts have acted on them (either by forming a plan or attempting suicide).

Have you ever acted upon suicidal thoughts [current students]?

- 3%
- 15%
- 16%
- 66%

- ■ Yes, I have/had a plan to take my own life
- ■ Yes, I have attempted to take my own life
- ■ No, I have not acted on these thoughts
- ■ Prefer not to say

Base n = 3,907

The LGBTQ+ picture

Around 1 in 5 (18%) of all respondents were LGBTQ+ and 4 in 5 (79%) defined their sexual orientation as straight or heterosexual (4% preferred not to say).

Nearly all (94%) our LGBTQ+ student respondents have experienced MH difficulties and more than 2 in 5 (42%) have planned or attempted to take their own lives. More than 1 in 3 (37%) LGBTQ+ students have had MH training and advice from university as well as from friends and family (35%) – high rates compared to other respondents and second only to those with MH disabilities.

In addition, LGBTQ+ respondents were the least likely demographic to say their university or employer was doing everything possible to support their mental wellbeing (33% and 34% respectively). LGBTQ+ students were also the least likely to engage with direct university support environments (15%).

Worryingly, 2 in 3 (66%) LGBTQ+ students have taken time off university because of poor MH, while among graduates who are LGBTQ+, almost half of those in work (49%) have had to take time off because of poor MH. Both these represent higher percentages than any other defined group.

Half of LGBTQ+ respondents who had graduated said they felt prepared for working life, the lowest rate of preparedness across all groups (54% vs 62%). In a separate study conducted by Cibyl and **Just Like Us** earlier this year (Postive Futures, How Supporting LGBT+ Young People Enables Them To Thrive in Adulthood), a quarter of young LGBT+ adults went back into the closet when they started work, showing how much change is still needed in the workplace.

Almost all LGBTQ+ students have been touched by mental health difficulties; undergrads, females and white students and low socio-economic students along with those from low socio-economic backgrounds also have higher than average rates of mental health difficulties.

Ethnicity

We asked survey participants to describe their ethnicity, then banded them into broader groups:

- 2 in 5 (43%) respondents were white

- 1 in 3 (34%) were Asian

- 1 in 8 (13%) were Black

- 1 in 12 (8%) were from other ethnic backgrounds

- 2% preferred not to say.

There are marked differences in MH and resilience levels between respondents from white, Asian and Black backgrounds.

White backgrounds:

- 9 in 10 (90%) student respondents from white backgrounds have experienced MH difficulties

- 2 in 3 (64%) have experienced or are experiencing depression and anxiety

- 1 in 3 (33%) have planned or attempted to take their own lives

- nearly 3 in 5 (57%) white students have taken time off for their MH.

Asian backgrounds:

- 3 in 4 (74%) student respondents have experienced MH difficulties

- more than half (53%) have experienced or are experiencing depression and anxiety

How do you describe your ethnicity?

Legend:
- White
- Black – Caribbean
- Black – African
- Asian – Indian
- Asian – Pakistani
- Asian – Bangladeshi
- Chinese
- Asian – other
- Mixed/multiple ethnic groups
- Other ethnic group
- Prefer not to say
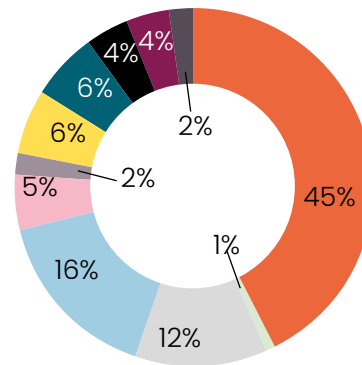
Base n = 12,796

- 1 in 4 (26%) have planned or attempted to take their own lives

- nearly 2 in 5 (38%) Asian students have taken time off for their MH.

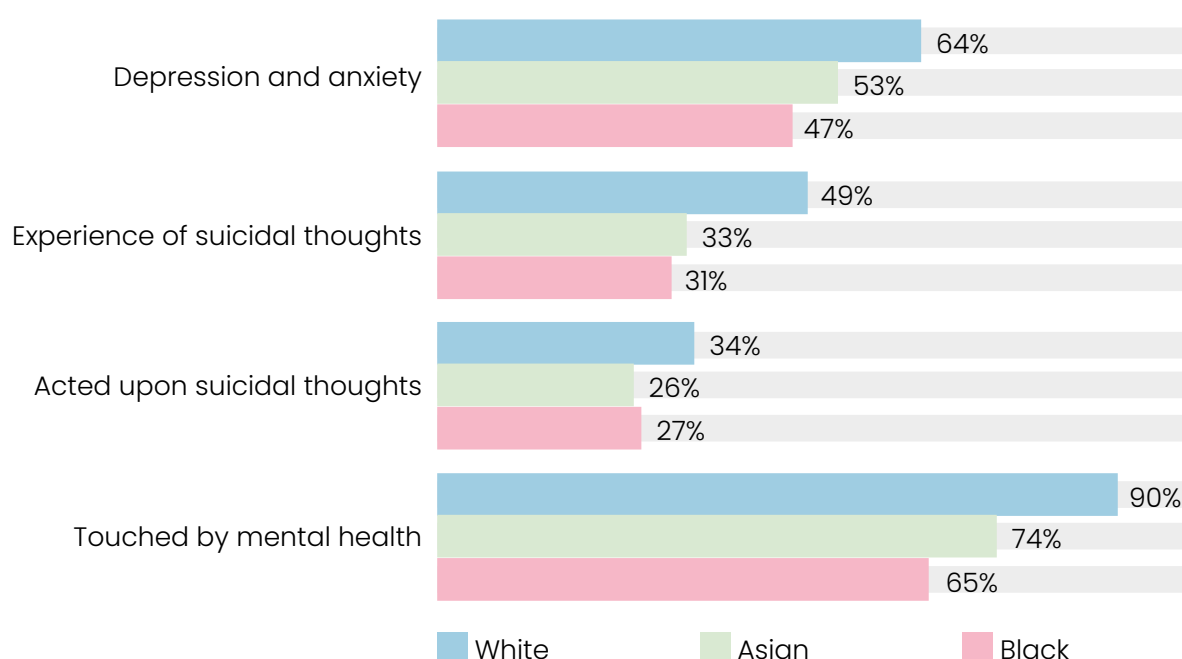Black backgrounds:

- 2 in 3 (65%) student respondents have experienced MH difficulties

- 1 in 2 (47%) have experienced or are experiencing depression and anxiety

- more than 1 in 4 (27%) have planned or attempted to take their own lives.

- fewer than 1 in 3 (32%) Black students have taken time off for their MH.

Graduates from Black backgrounds were by far the most likely (70%) to say they felt prepared for the realities of work of

any demographic, compared with 64% of those from white backgrounds and 57% from Asian backgrounds. There was little difference in the numbers who had taken time off work because of their MH challenges, though Black respondents were the least likely (33%) compared with Asian (36%) and white (37%) respondents. Despite their slightly higher rates of absence to cope with MH issues, white graduates were the least likely to say it was important for employers to prioritise MH, and the least likely to feel their employer was doing everything possible to support their mental wellbeing. Proportionately twice as many graduates from Black backgrounds said they had MH training at work than those from Asian backgrounds (18% vs 9%), while 16% of white graduates had had such training.

Mental health conditions [current students]

Condition	White	Asian	Black
Depression and anxiety	64%	53%	47%
Experience of suicidal thoughts	49%	33%	31%
Acted upon suicidal thoughts	34%	26%	27%
Touched by mental health	90%	74%	65%

White   Asian   Black

Gender

We asked our survey respondents to describe their gender identity:

• more than 2 in 5 (44%) were male

• more than half (55%) female

• 1% were other.

None of this year's respondents were non-binary or preferred not to disclose their gender, and while 98% of respondents identified with the gender they were assigned at birth, 2% were transgender.

Across all respondents, females were more likely than males to say that knowing a university prioritised MH support was important when choosing a university (62% vs 53%). Close to 9 in 10 (86%) female student respondents have been affected by MH difficulties compared with 3 in 4 (74%) of males, and young women with MH issues were more likely than young men with MH issues to have planned or attempted to take their own lives (32% vs 28%).

When it came to which strategies used to maintain MH when under pressure, 1 in 3 (34%) females said they opted to talk about MH, while

Nearly

9 in 10

female student respondents have been affected by mental health difficulties.

Mental health conditions [current students]

	Male	Female
Depression and anxiety	54%	61%
Experience of suicidal thoughts	34%	46%
Acted upon suicidal thoughts	28%	32%
Touched by mental health	74%	86%

■ Male ■ Female
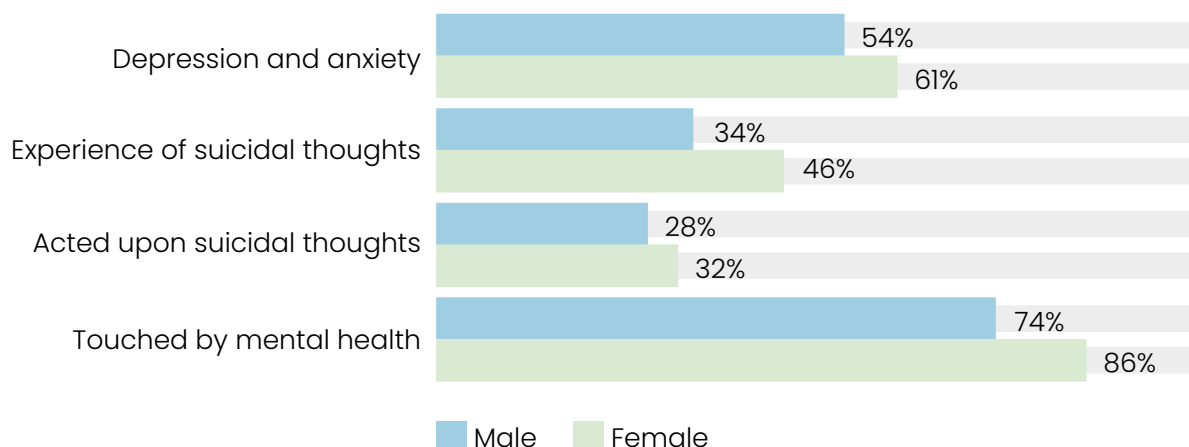
fewer than half (43%) chose exercise. By contrast more than half of males (53%) opted for exercise, but only 1 in 4 (26%) males chose to talk about MH. Across all students, 2 in 5 (42%) found positive thinking or mindfulness helpful to their MH, regardless of gender.

There was little difference between how many young women and men were employed at the time of our survey (58% vs 55%) but females said they felt less prepared for working life than their male peers (59% vs 66%); females were also more likely than males to feel that knowing MH support was prioritised was important when choosing an employer (86% vs 75%).
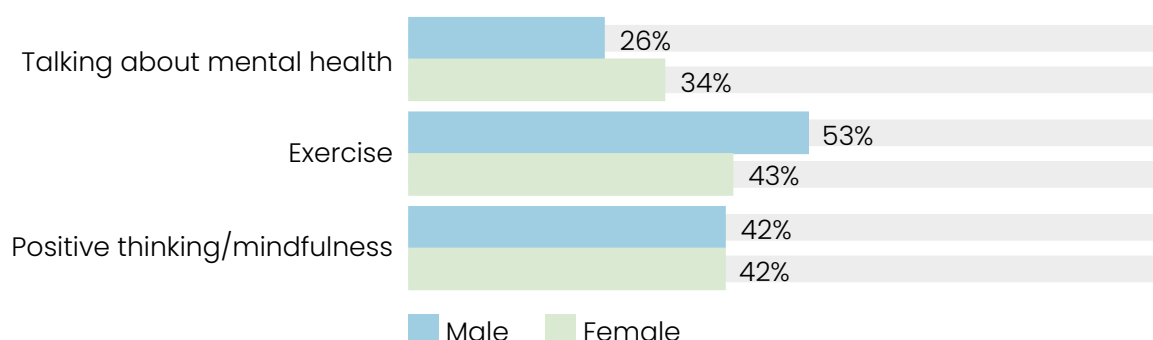
1 in 4

male student respondents affected by mental health difficulties chose to talk about it.

Strategies for staying mentally healthy

Talking about mental health
- Male: 26%
- Female: 34%

Exercise
- Male: 53%
- Female: 43%

Positive thinking/mindfulness
- Male: 42%
- Female: 42%

Legend: ■ Male ■ Female

Realities of working life

Employed
- Male: 55%
- Female: 58%

Were you prepared for working life?
- Male: 66%
- Female: 59%

Employer prioritising MH is important
- Male: 74%
- Female: 83%

Legend: ■ Male ■ Female

Respondents with disabilities

We asked all our respondents if they considered they had a specific learning disability, impairment, long-term illness, or physical or MH condition. Data showed that:

• 2 in 3 (68%) said no

• nearly 1 in 4 (23%) said yes

• 7% said they did not know

• 2% preferred not to say.

Of those answering yes:

• nearly 2 in 3 (63%) said they had MH difficulties

• more than 2 in 5 (43%) were neurodiverse (autistic or had learning difficulties)

• nearly 1 in 5 (18%) had an unseen disability

• nearly 1 in 10 (9%) had a physical disability.

When we looked across the groupings, 1 in 3 (34%) had multiple disabilities.

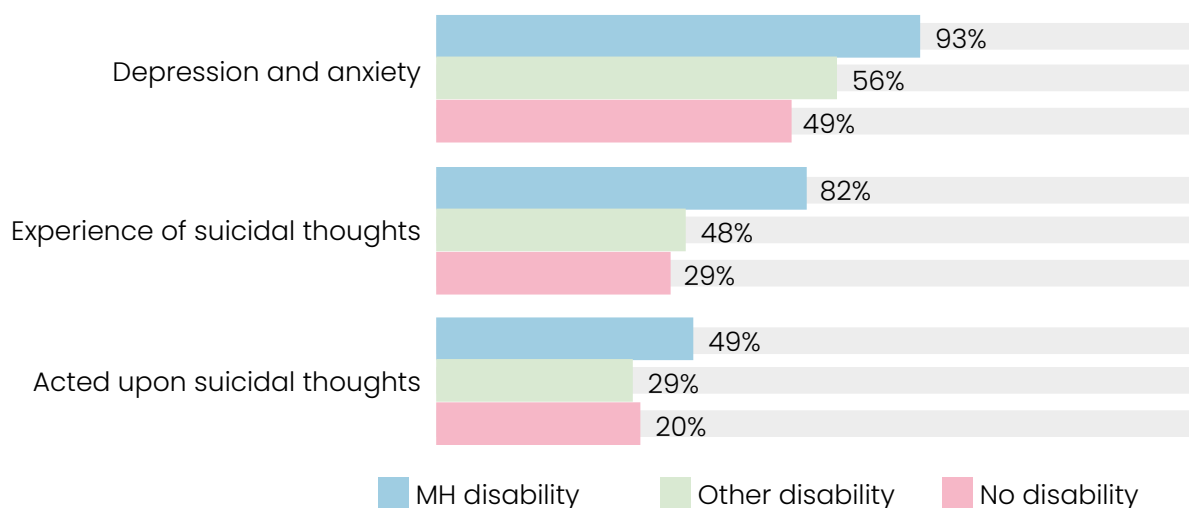More than 3 in 20 (16%) of our student respondents self-identified as having an MH disability while fewer than 1 in 10 (9%) said they had other disabilities. These figures changed when we examined which respondents were employed graduates (14% MH disability vs 8% other disability) and which were unemployed graduates (12% MH disability vs 11% other disability).

1 in 4

student respondents have a specific learning disability, impairment, long-term illness, or physical or MH condition.

Mental health conditions [current students]

Depression and anxiety	MH disability	93%
	Other disability	56%
	No disability	49%
Experience of suicidal thoughts	MH disability	82%
	Other disability	48%
	No disability	29%
Acted upon suicidal thoughts	MH disability	49%
	Other disability	29%
	No disability	20%

■ MH disability   ■ Other disability   ■ No disability

Disabilities and definitions

The charity **Mind** offers a good definition to help understand what an MH disability is, explaining wording from the Equality Act and offering examples.

Disabled Students UK is a support and campaigning organisation that aims to highlight inequalities and improve accessibility to and at university.

Scope is a disability equality charity in England and Wales providing support and advice to disabled people, as well as campaigning for fairness and against disability discrimination.

The charity points out that there are 16 million disabled people in the UK, and life costs an extra £975 a month on average for those who are disabled. Disabled people are almost twice as likely to be unemployed.

Health charity **The King's Fund** has reported on the connection between mental and physical health problems, pointing out that around 30% of all people with a long-term physical health condition also have a mental health problem, most commonly depression/anxiety.

4 in 5

**current students with an MH disability had experienced suicidal thoughts and feelings.**

More than 4 in 5 (82%) current students with an MH disability had experienced suicidal thoughts and feelings – almost twice as many proportionately as the average (42%). This compared with fewer than half of those with other disabilities (48%) and less than 3 in 10 (29%) students with no disability at all who had such thoughts and feelings. Half (49%) of current student respondents with an MH disability said they have planned or attempted to take their own lives, compared with nearly 3 in 10 (29%) of those with other disabilities, and 1 in 5 (20%) with no disability.

Almost all students with an MH disability (93%) had suffered depression and anxiety, compared with 56% of those with other disabilities and 49% of those with no disability. More than half (54%) of students with MH disabilities found the transition from school to university hard – this compares with the 3 in 10 (30%) respondents with no disability who found the transition hard. Unsurprisingly 2 in 3 (68%) students with an MH disability rated MH support an important factor when they chose their university, compared with 53% of students with other disabilities and 56% of students with no disability.

When it comes to securing jobs, graduates with MH disabilities have similar levels of employment to the mean average (59% vs 56%) respondent. It is students with other disabilities who were least likely to be employed (46%).

Importance of mental health support when choosing universities

University prioritising MH is important
- MH disability: 67%
- Other disability: 54%
- No disability: 56%

Found the transition from school to university hard
- MH disability: 54%
- Other disability: 43%
- No disability: 30%

Legend: ■ MH disability ■ Other disability ■ No disability
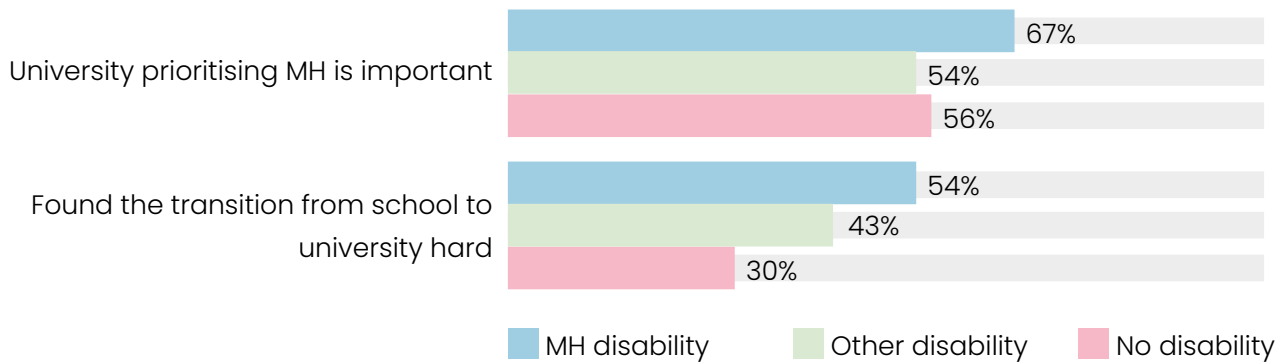
Preparedness and mental wellbeing have an influence on students' transition from school to university. COVID-19 also made the transition to university harder whereas living circumstances have minimal impact.

Neurodiversity and specific learning difficulties

Among respondents who say they have MH difficulties, 1 in 3 (34%) are neurodiverse or had learning difficulties (LD). 9 in 10 (90%) are students and 1 in 10 (10%) of whom are graduates. Of those:
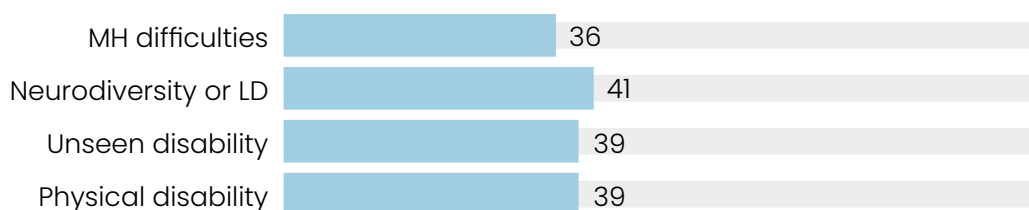
- 2 in 5 (42%) have attention deficit disorder or ADHD

- 1 in 5 (17%) have post-traumatic stress disorder

- 1 in 8 (12%) have obsessive compulsive disorder

- 1 in 10 (9%) had none of the options.

More than half (52%) of respondents who were neurodiverse had LD said they had found the transition from school to university hard, with fewer than 1 in 3 (29%) finding it easy (1 in 5 (19%) said it had been neither hard nor easy). This compares with the survey averages of 1 in 3 (35%) who found it hard, and 2 in 5 (38%) who found it easy plus the 27% who were neutral.

Around 3 in 5 (62%) neurodiverse students and those with LD said MH support was an important factor in choosing a university, though 14% rated it unimportant, similar proportions to the average (58% and 15% respectively).

Respondents with neurodiversity/LD had a marginally higher WHO-5 score (Cibyl used this to rate MH), but at 41, this is still below students' average score of 50, and lower than those of LGBTQ+ respondents, or those from low socio-economic backgrounds (43 and 44 respectively). Neurodiverse/LD respondents and those with learning difficulties were also less likely than other disabled groups to say they were worried about their MH or physical health.

52%

respondents who were neurodiverse or had learning difficulties said they had found the transition from school to university hard.

WHO-5 score by disability

Disability	Score
MH difficulties	36
Neurodiversity or LD	41
Unseen disability	39
Physical disability	39

Types of MH challenges

Legend: ■ MH disability ■ Neurodiversity or LD ■ Unseen disability

Depression
- MH disability: 78%
- Neurodiversity or LD: 59%
- Unseen disability: 60%

Anxiety
- MH disability: 84%
- Neurodiversity or LD: 69%
- Unseen disability: 70%

Easting disorder
- MH disability: 20%
- Neurodiversity or LD: 16%
- Unseen disability: 15%

Alcohol or drug dependence
- MH disability: 5%
- Neurodiversity or LD: 6%
- Unseen disability: 5%

Another diagnosed condition
- MH disability: 12%
- Neurodiversity or LD: 10%
- Unseen disability: 14%

Psychosis
- MH disability: 6%
- Neurodiversity or LD: 5%
- Unseen disability: 4%

ADHD
- MH disability: 20%
- Neurodiversity or LD: 41%
- Unseen disability: 18%

PTSD
- MH disability: 19%
- Neurodiversity or LD: 18%
- Unseen disability: 19%

OCD
- MH disability: 16%
- Neurodiversity or LD: 12%
- Unseen disability: 16%

None of these
- MH disability: 1%
- Neurodiversity or LD: 9%
- Unseen disability: 12%

Prefer not to say
- MH disability: 1%
- Neurodiversity or LD: 3%
- Unseen disability: 4%

More than half (53%) of respondents with neurodiversity/LD felt their university offered good support for people who experienced MH challenges in general, with 1 in 3 (32%) disagreeing that support was good. This compares with 55% and 20% respectively across all respondents. Among respondents in work, 2 in 5 (40%) felt their employer supported people with MH challenges well, with 3 in 10 (29%) saying their employer did not support them very well – this compared with averages of 49% and 26% across all respondents.

Although 7 in 10 neurodiverse/LD respondents said they had personally experienced suicidal thoughts and feelings, this was less than the 8 in 10 people with MH difficulties generally and the 4 in 10 (41%) across all respondents to the survey. Proportionally more neurodiverse/LD respondents said they had not acted on their thoughts than others with MH difficulties (51% vs 48%), though this was a lower percentage from the average across all respondents who had experienced such thoughts and feelings (66%).

What is neurodiversity and who has a learning difficulty? A partner perspective.

Imperial College London points out that every organisation and workplace has neurodiverse people within it and that dyslexia, for example, affects 10-15% of the population. Through its Disability Advisory Service, Imperial offers support to students and staff who are, or think they might be, neurodivergent or have a specific learning difficulty (SpLD). Examples of neurodiversity and SpLDs include autism, dyslexia, dyspraxia, dyscalculia and AD(H)D and the college has created **a document** to explain its use of terminology.
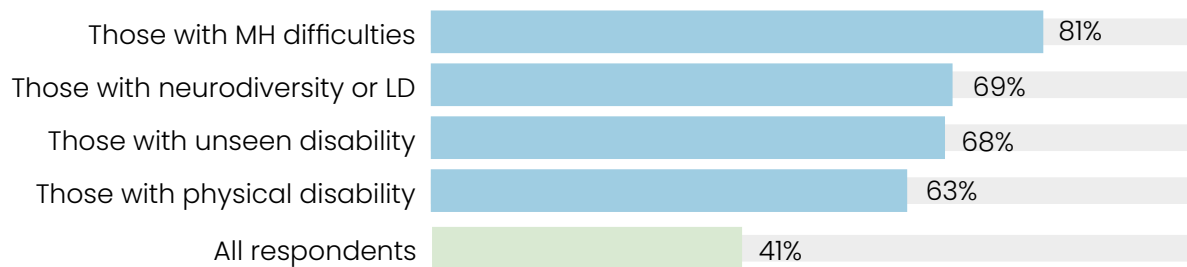
Accenture's website includes **articles** about autism, neurodiversity and other invisible disabilities on its inclusion and diversity pages. The company highlights that 1 billion people worldwide have a disability and features two executives with autism.

Other organisations, such as The Chartered Institute of Personnel and Development (CIPD) have **online resources** for recruiters and HR departments on how to include, support and encourage neurodivergent people in the workplace.
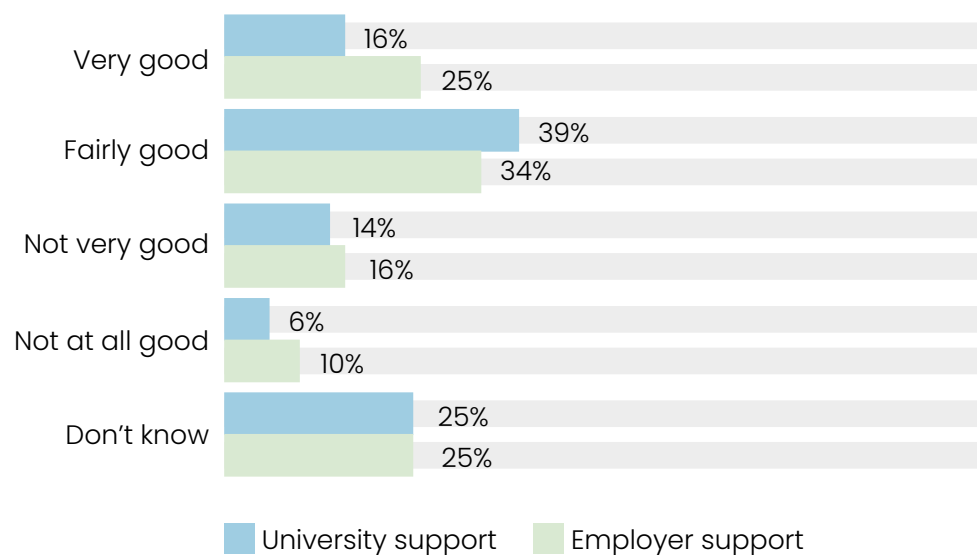
The National Autistic Society states that autism in itself is not an MH problem, but that high numbers of autistic people experience poor MH. Its own survey showed that 76% of autistic adults had reached out for MH support in the five years prior to the survey. In a publication in association with the MH charity **Mind** the society also states that autistic people can experience greater levels of anxiety, depression and loneliness than the general population and that autistic people were significantly more likely to think about, attempt and die by suicide than the general population.

Experienced suicidal thoughts and feelings

Those with MH difficulties	81%
Those with neurodiversity or LD	69%
Those with unseen disability	68%
Those with physical disability	63%
All respondents	41%

How good is your employer/university support provision for those with MH challenges

|	University support	Employer support
Very good	16%	25%
Fairly good	39%	34%
Not very good	14%	16%
Not at all good	6%	10%
Don't know	25%	25%

■ University support ■ Employer support

The bigger picture

What's happening at universities?

Those responsible for managing and teaching students at university know how badly affected young people were during a world pandemic. Examples include interruptions to studying, restrictions on socialising and travel, and being cooped up in enclosed environments.

The 2023 Cibyl Mental Health Study shows proportionally more students now think their university is supportive of those with MH difficulties than our previous years' studies. It is a testament to our partners in this report, Universities UK (UUK) and Imperial College London, and the many higher education institutions that have sought to up their game and improve MH outcomes for both students and staff. As this report was being written UUK

Students with low mental health (all 3 criteria)

Started during COVID-19		
First year		20%
Middle years		26%
Final year		25%
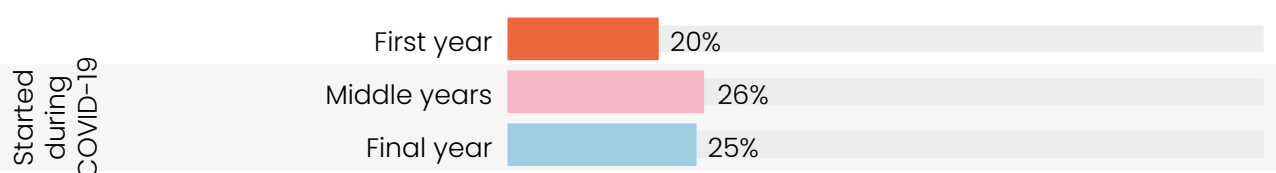
was also calling for greater government focus on student MH to meet increased demand for university-funded support services, a topic we look at in "Universities – what's on offer?" on page 66.

Universities' increased emphasis on improving services is well timed, since 4 in 5 (81%) current student respondents to this year's survey have been directly affected by MH challenges, based on Cibyl's three criteria for assessing low MH (see the graphic to the right for how this was calculated).

Cibyl has seen students report the same percentage of MH challenges in this year's survey, but in different proportions to last year:

- 3 in 4 (77%) of first-year respondents this year have been affected by MH difficulties

- 17 in 20 (85%) of middle years have been affected

- 17 in 20 (84%) of final-year students have been affected.

Fewer first years, 1 in 5 (20%), met all three low MH criteria than those in their middle years (1 in 4 or 26%) and final year (25%).

Touched by mental health difficulties

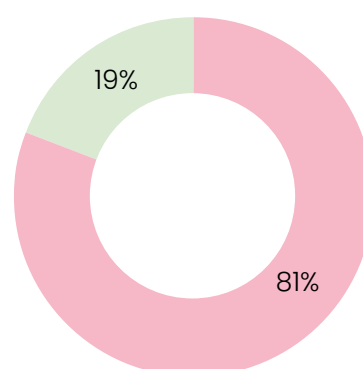experienced **mental health symptoms** in the last 12 months

+

experienced **suicidal feelings**

+

currently or previously experienced **mental health difficulties**

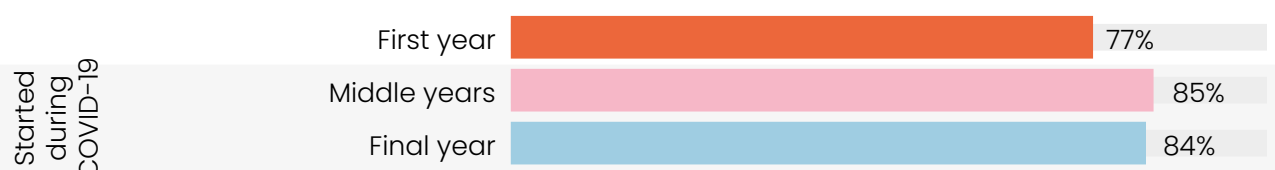### Touched by mental health difficulties [current students]

19%

81%

Directly touched by MH difficulties

Not touched by MH difficulties

Base n = 11,551

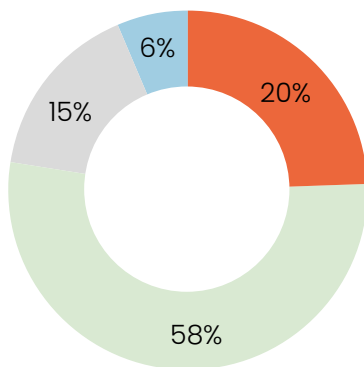### Touched by mental health difficulties by student groups

Started during COVID-19		
First year		77%
Middle years		85%
Final year		84%

1 in 2

students have taken time out for their mental health; primarily just a few days.
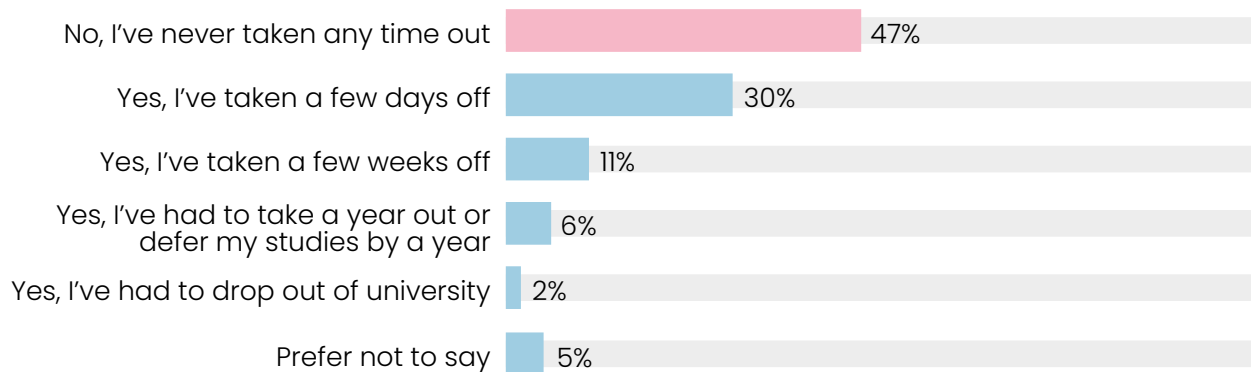
New challenges

This year's student respondents were better prepared for uni (something we look at in more detail in the next section, "The transition from school to university" on page 52), but while the privations of COVID-19 have faded, others have taken their place. Climate change has become frighteningly apparent with fires and flooding regularly hitting media headlines, and geopolitical turmoil has continued in 2023, with armed conflicts in Ukraine and Sudan causing millions of people to flee fighting and uproot from their homes. In the UK, and not unrelated to hostilities in Ukraine, grain, commodity and crude oil prices have become inflated causing many of our survey respondents to face a cost of living crisis. Food and fuel prices, energy and travel costs have been affected and rent rises have been triggered by the interest rate hikes imposed to curb inflation.

More than 9 in 10 (92%) students found their living costs had increased, according to an **Office of National Statistics (ONS) survey** and UUK members have reported their students are concerned about course-related expenses, on top of other price rises. UUK has put together **a list of recommendations** for members, as well as shared strategies, to help students managing financial pressures.

Responding in Cibyl's Student Mental Health Study 2023, 3 in 4 (73%) current students say the cost of living crisis has caused a decline in their MH, with only 1 in 5 (20%) able to say it has not affected their MH. Among students taking a year off their studies, more than 1 in 5 (22%) said finances were a driver, and 3 in 4 (74%) said they were doing so to look after their MH. Some respondents may have made the decision based on both factors, since these often cross over.

To what extent do students attribute their MH difficulties to concerns about the cost-of-living crisis? [current students]

- Not at all
- Somewhat
- Fully
- Don't know

Base n = 5,593

20%

58%

15%

6%

Time off for mental health

No, I've never taken any time out	47%
Yes, I've taken a few days off	30%
Yes, I've taken a few weeks off	11%
Yes, I've had to take a year out or defer my studies by a year	6%
Yes, I've had to drop out of university	2%
Prefer not to say	5%

Base n = 8,520
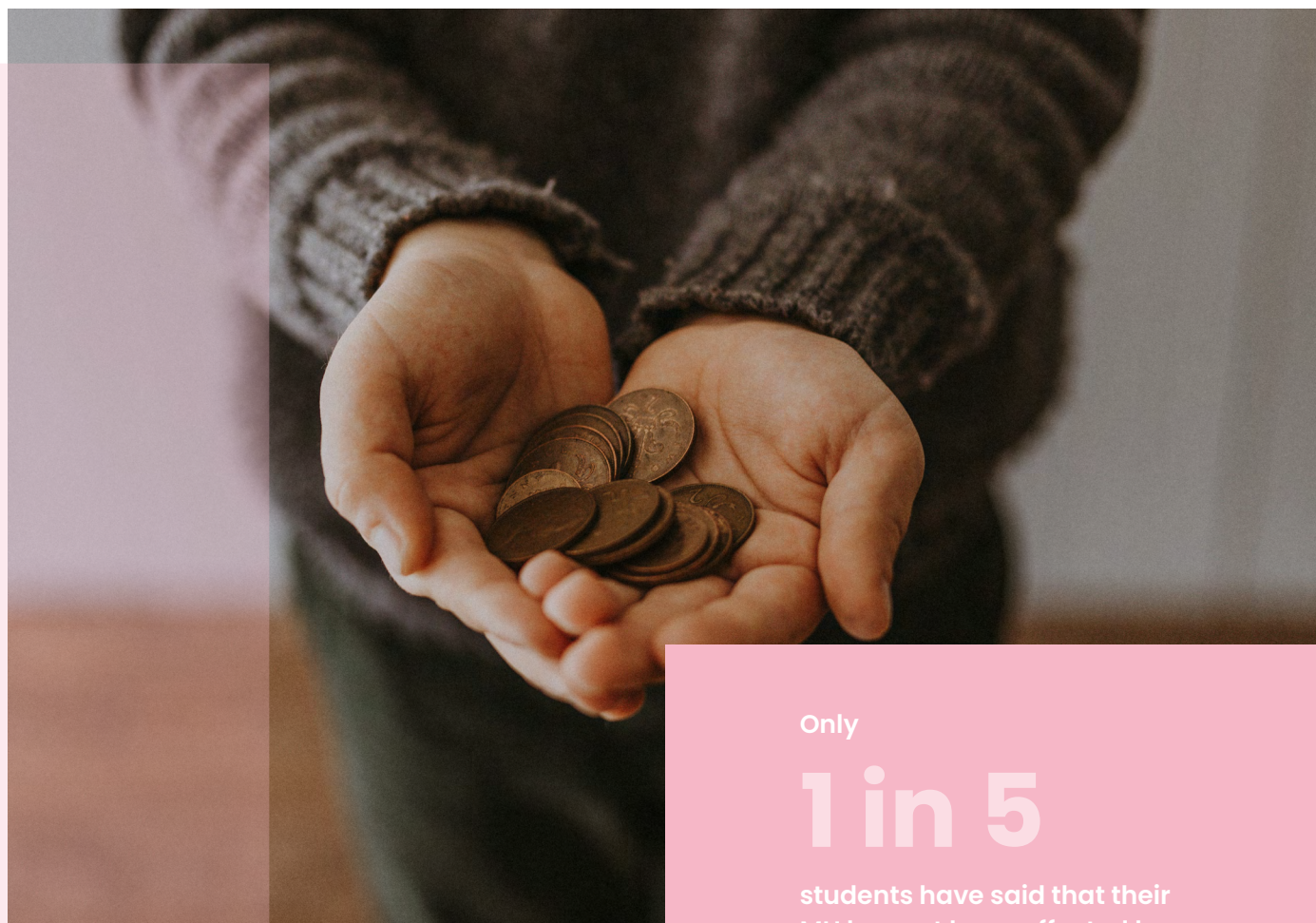
Only

1 in 5

students have said that their MH has not been affected by the cost of living crisis.
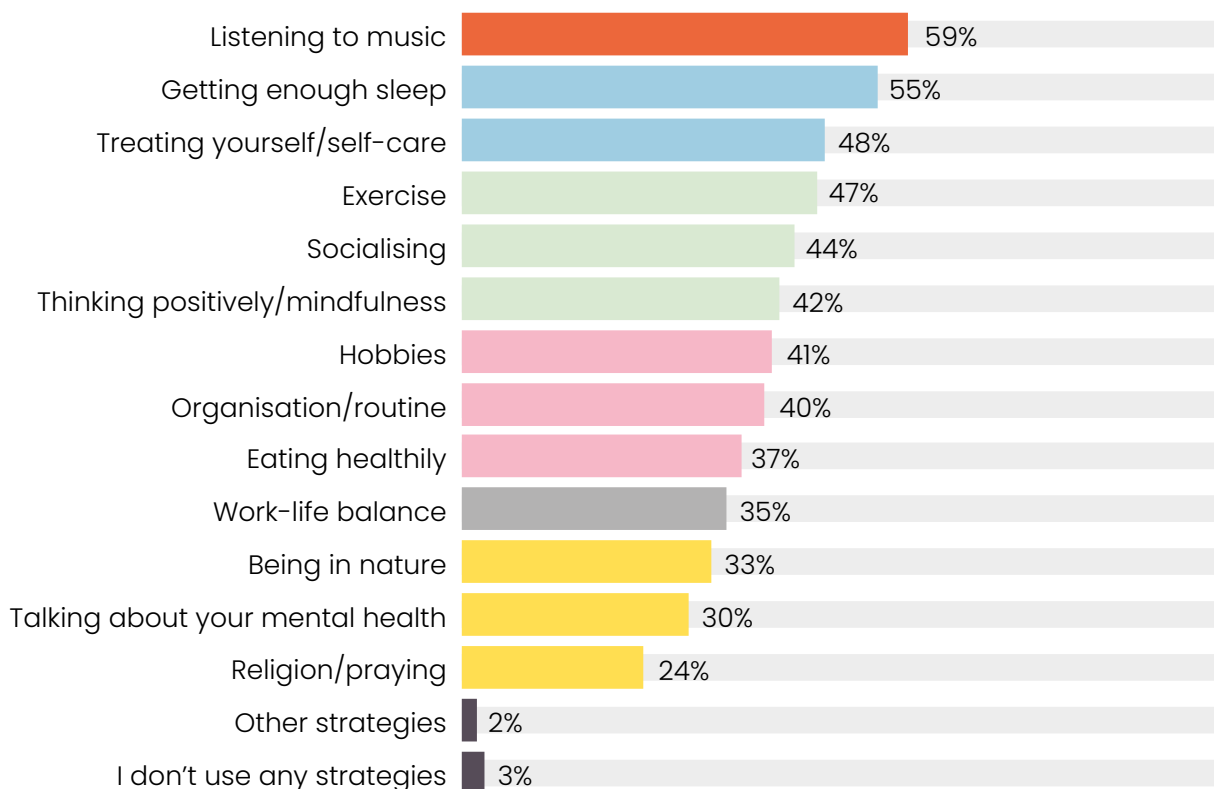
When coping with a squeezed budget it is tempting to cut back on nice-to-haves such as those that boost mental wellbeing and MH. Financial pressures were cited by a sizeable proportion of respondents who felt unable to take part in extra-curricular activities such as sports, social events, student societies and enterprises – all things that help build and maintain the friendships that are key to good MH. More than 1 in 3 (36%) student respondents said they do not get involved with any extra-curricular activities and of those, 1 in 5 (21%) said it was because they could not afford to take part, while nearly 2 in 5 (37%) pointed to anxiety or poor MH as reasons for not being involved.

Students may opt for meat-free, plant-based diets and low carbon usage as part of an environmentally friendly approach to life but for some, eating cheaply, not travelling and turning off heating are cost-cutting measures. In open responses, students said:

"Cost of living is too high to go outside and socialise often, so I just have to stay back home alone."

"Due to limitations on budget, I have to hold back from buying a lot of stuff including groceries, warm clothing, etc."

Strategies for staying mentally healthy [current students]

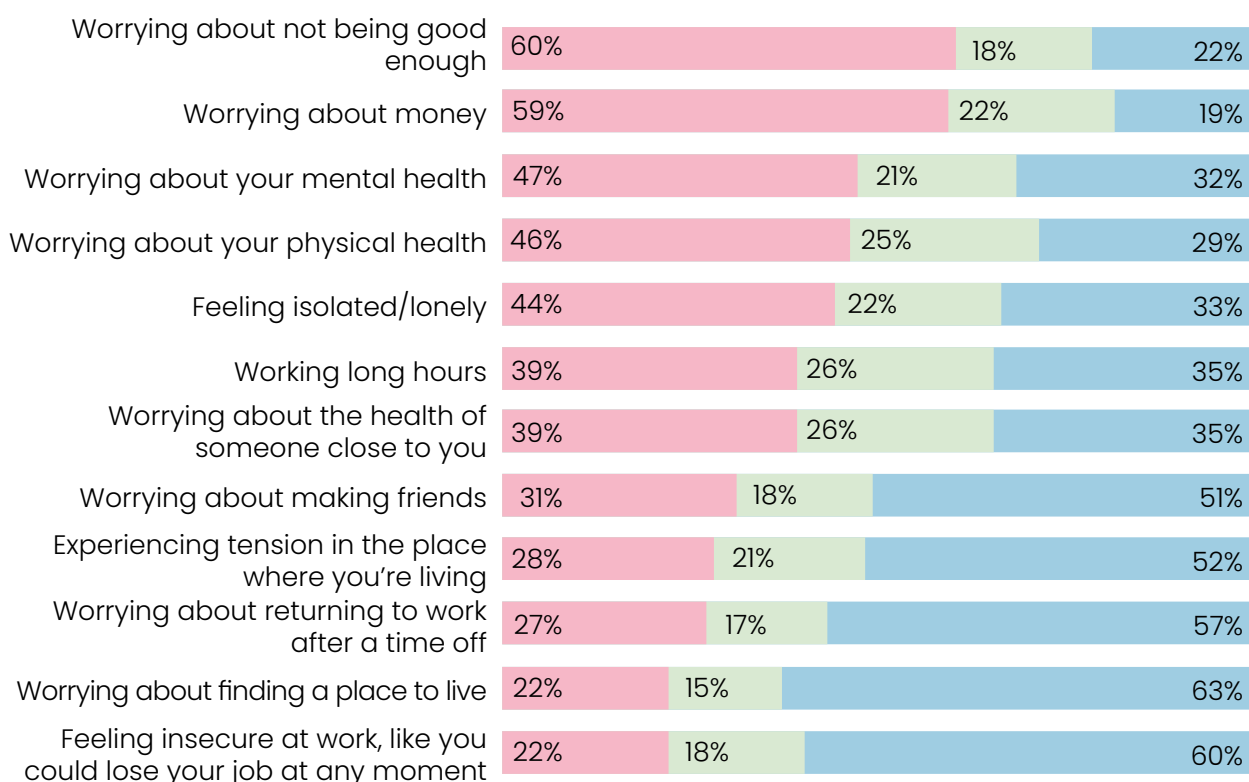| Strategy	Percentage
Listening to music	59%
Getting enough sleep	55%
Treating yourself/self-care	48%
Exercise	47%
Socialising	44%
Thinking positively/mindfulness	42%
Hobbies	41%
Organisation/routine	40%
Eating healthily	37%
Work-life balance	35%
Being in nature	33%
Talking about your mental health	30%
Religion/praying	24%
Other strategies	2%
I don't use any strategies	3%

Base n = 11,627

Graduate life

Money is also a worry for 4 in 5 (81%) graduate respondents, 3 in 5 (59%) of whom said they think about it frequently: 4 in 5 (79%) of those with low MH scores have frequent money worries, alongside half (51%) whose MH is less low. Perhaps surprisingly given headlines about rent rises and squeezed landlords, 2 in 3 graduate respondents said they never worried about finding a place to live, though this was a frequent issue for 1 in 5 (22%) and an occasional issue for 3 in 20 (15%). Following on from last year's improved figures, the number of employed graduates who say their MH has declined since starting work has risen this year to nearly 3 in 10 (27%), though a similar percentage (28%) said their MH had become better. Unsurprisingly higher living costs affected more of our unemployed graduates respondents' MH than those who were employed, though both were hit more than students, 20% of whom said they had not been affected by such rises at all, possibly because they were cushioned by financially supportive parents.

4 in 5

graduates with low MH scores have frequent money worries.

Graduate worries and negative experiences

|	Frequently	Sometimes	Never
Worrying about not being good enough	60%	18%	22%
Worrying about money	59%	22%	19%
Worrying about your mental health	47%	21%	32%
Worrying about your physical health	46%	25%	29%
Feeling isolated/lonely	44%	22%	33%
Working long hours	39%	26%	35%
Worrying about the health of someone close to you	39%	26%	35%
Worrying about making friends	31%	18%	51%
Experiencing tension in the place where you're living	28%	21%	52%
Worrying about returning to work after a time off	27%	17%	57%
Worrying about finding a place to live	22%	15%	63%
Feeling insecure at work, like you could lose your job at any moment	22%	18%	60%

Base n = from 645 to 1,140 ■ Frequently ■ Sometimes ■ Never

MH and cost of living

Rises in the cost of living are more likely to affect graduates –particularly unemployed graduates – than students. However, students are more likely to report a decline in MH than employed graduates.

Cost of living has caused decline in MH

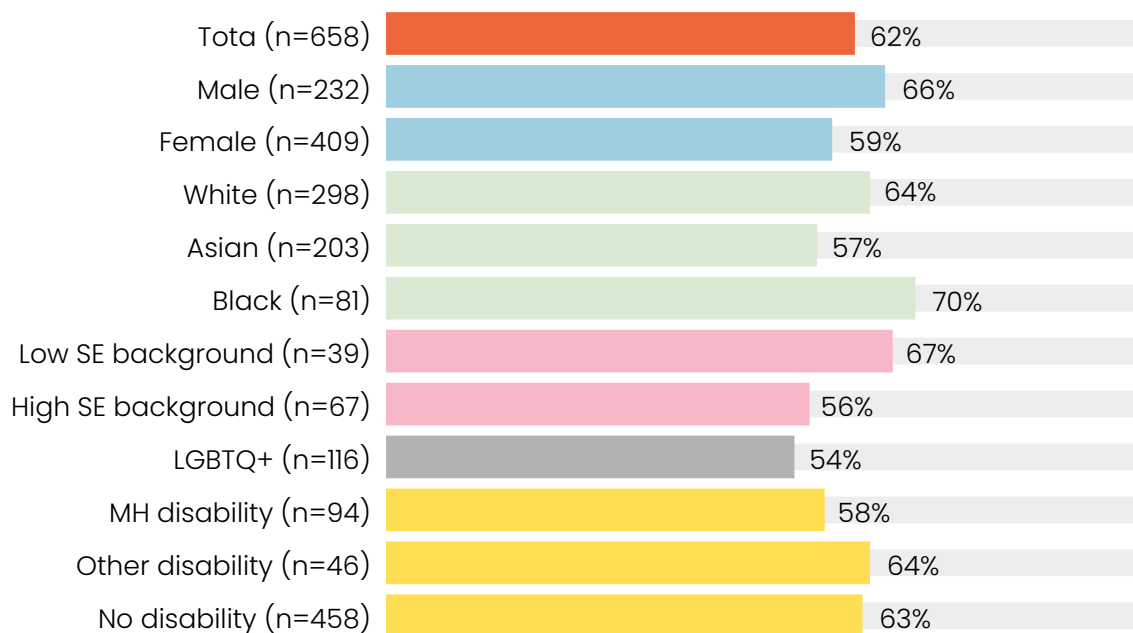|	Not at all	Somewhat	Fully	Don't know
Students	20%	56%	15%	
Employed grads	14%	66%	15%	
Unemployed grads	9%	63%	23%	
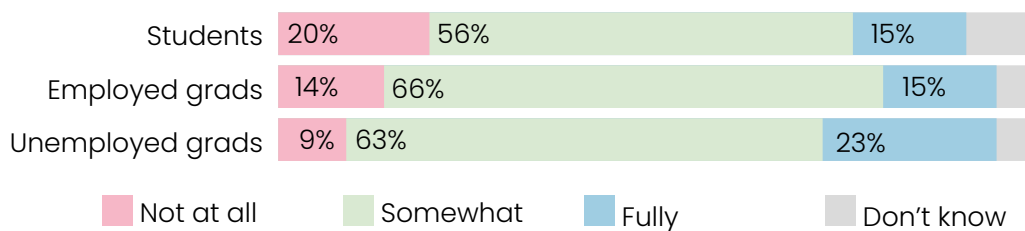
It is heartening to see that employed graduates from low socio-economic backgrounds, (who are among the least likely respondents to speak to their senior colleagues or HR about their MH difficulties) are also the most likely (3 in 5) to feel their mental wellbeing is being well supported by their employer. However, for LGBTQ+ respondents who suffer high rates of poor MH, there's a different picture: they are the least likely to feel their employer is doing everything possible to support their mental wellbeing with only 1 in 3 saying this was the case.
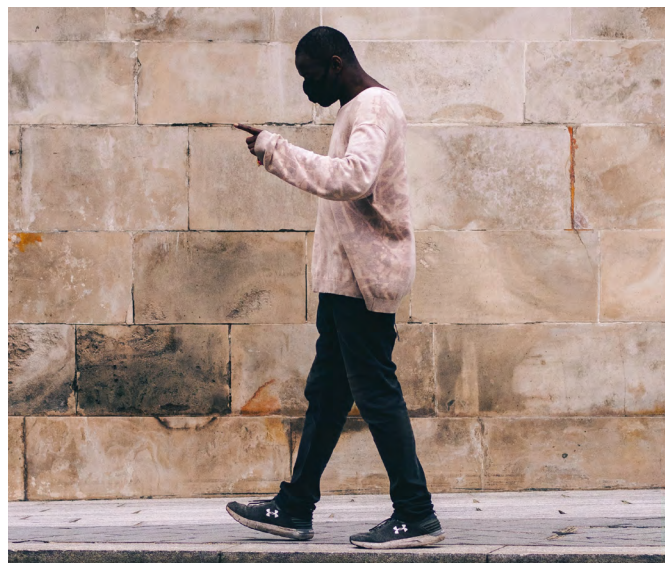
2 in 3

graduate respondents feel prepared for working life; this is highest in Black and low-socio economic respondents. Student respondents from high socio-economic backgrounds and LGBTQ+ students are the least prepared.

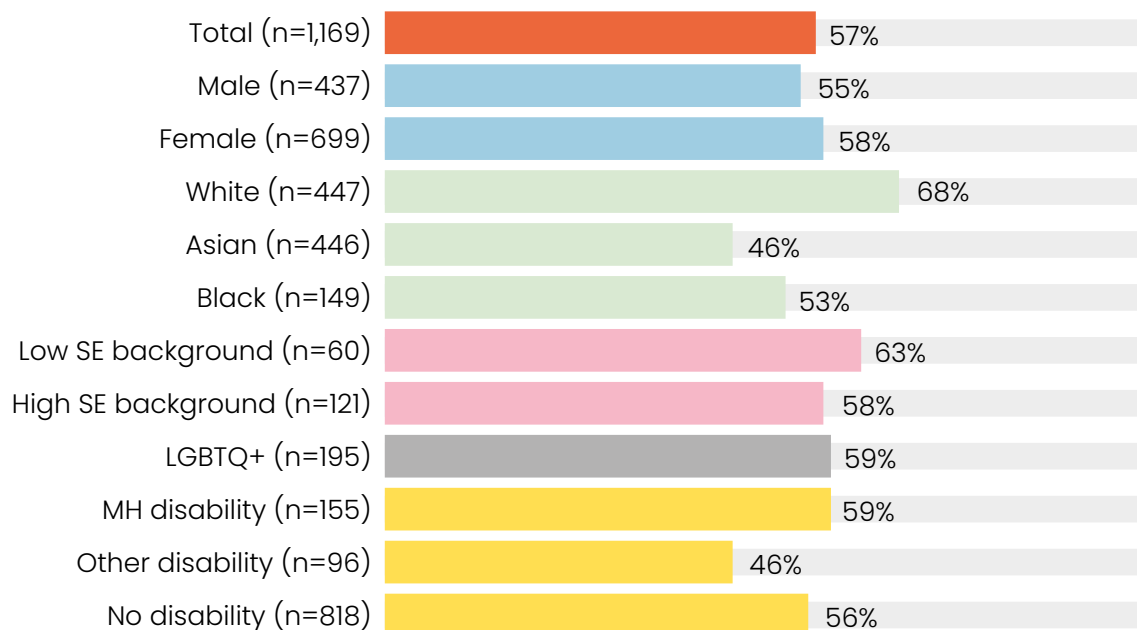### Prepared for the realities of working life

Tota (n=658)	62%
Male (n=232)	66%
Female (n=409)	59%
White (n=298)	64%
Asian (n=203)	57%
Black (n=81)	70%
Low SE background (n=39)	67%
High SE background (n=67)	56%
LGBTQ+ (n=116)	54%
MH disability (n=94)	58%
Other disability (n=46)	64%
No disability (n=458)	63%

50

Trends to watch

More than 1 in 10 (11%) of our respondents were graduates, and 75% of those had graduated this year, with the remainder graduating last year. Across both years, 3 in 5 (57%) were employed, while 2 in 5 (41%) were seeking work and just 2% said they were neither employed nor seeking work. Another 3% were either self-employed or working in gig-economy jobs. Around 2 in 3 graduates from white (68%) or low socio-economic (63%) backgrounds were employed, but fewer than half of those from Asian backgrounds (46%) or with a non-MH related disability (46%) had jobs.

Graduates in employment

Total (n=1,169)	57%
Male (n=437)	55%
Female (n=699)	58%
White (n=447)	68%
Asian (n=446)	46%
Black (n=149)	53%
Low SE background (n=60)	63%
High SE background (n=121)	58%
LGBTQ+ (n=195)	59%
MH disability (n=155)	59%
Other disability (n=96)	46%
No disability (n=818)	56%

Base n = 1,169

The demand for graduate skills remains high, according to a UUK report, and a degree continues to boost young people's employment prospects. Meanwhile, the Office for Students (OfS) recently released figures to show that 1 in 5 graduates would be better off financially if they had not gone to university and the Department for Education announced it would clamp down on so-called "low value" degrees, stating that 3 in 10 graduates do not progress to highly skilled jobs or further study 15 months after graduating. UUK has countered that by pointing out that the benefits of going to university are not confined to salary and employability outcomes. Professor Steve West CBE, president of UUK and vice-chancellor of the University of the West of England, says: **"Many graduates go on to work in roles that are vital to our economy and society, and meaningful to graduates even though starting salaries may be lower. The vast majority of graduates (84%) say they are engaged in meaningful activity and of those in employment that their work fits with career plans (88%)."**

In summer 2023 the TUC issued a warning that "work intensification" is putting people of all ages at risk of exhaustion, and a Royal College of Psychiatrists' spokesperson stated that burnout can lead to prolonged MH problems when not treated appropriately. Post-pandemic, and as evidence that Gen Z is shunning high-octane, high-pressure working life, TikTok is trending with a shift away from flat-out jobs in favour of maintaining work-life balance. Our respondents say they want to work for employers that prioritise and protect their MH, and align with their values, so despite cost of living pressures, big salaries at the expense of wellbeing may be a thing of the past. Will students and graduates start "leaning out" and shunning corporate careers and overbearing employers and choose work that gives them a glow rather than a glittering future?

84%

graduates say they are engaged in meaningful activity.

88%

of those in employment say their work fits with career plans.

The transition from school to university

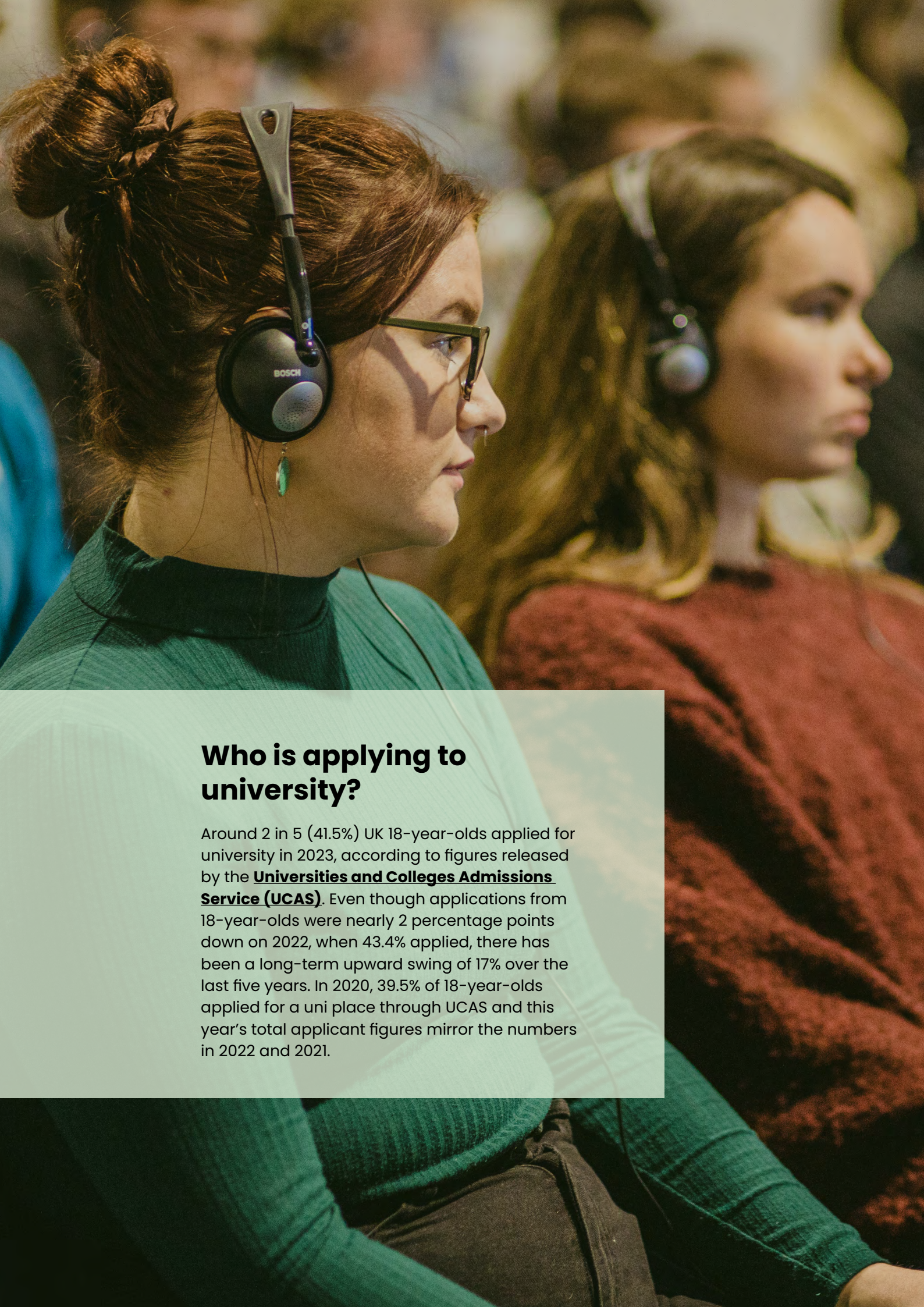## Who is finding it hard to settle at uni and why?

Leaving school and starting self-directed study at university involves big life changes, from finding new friendship groups and establishing a new home environment to managing personal finances and coping with independent living. New responsibilities and unfamiliar environments add to stress levels however old we are when we find ourselves managing them, and can lead to MH challenges. So how do starters at university cope when so much change happens all at once?

2 in 5

felt the transition from school to university had been easy.

Who is applying to university?

Around 2 in 5 (41.5%) UK 18-year-olds applied for university in 2023, according to figures released by the **Universities and Colleges Admissions Service (UCAS)**. Even though applications from 18-year-olds were nearly 2 percentage points down on 2022, when 43.4% applied, there has been a long-term upward swing of 17% over the last five years. In 2020, 39.5% of 18-year-olds applied for a uni place through UCAS and this year's total applicant figures mirror the numbers in 2022 and 2021.
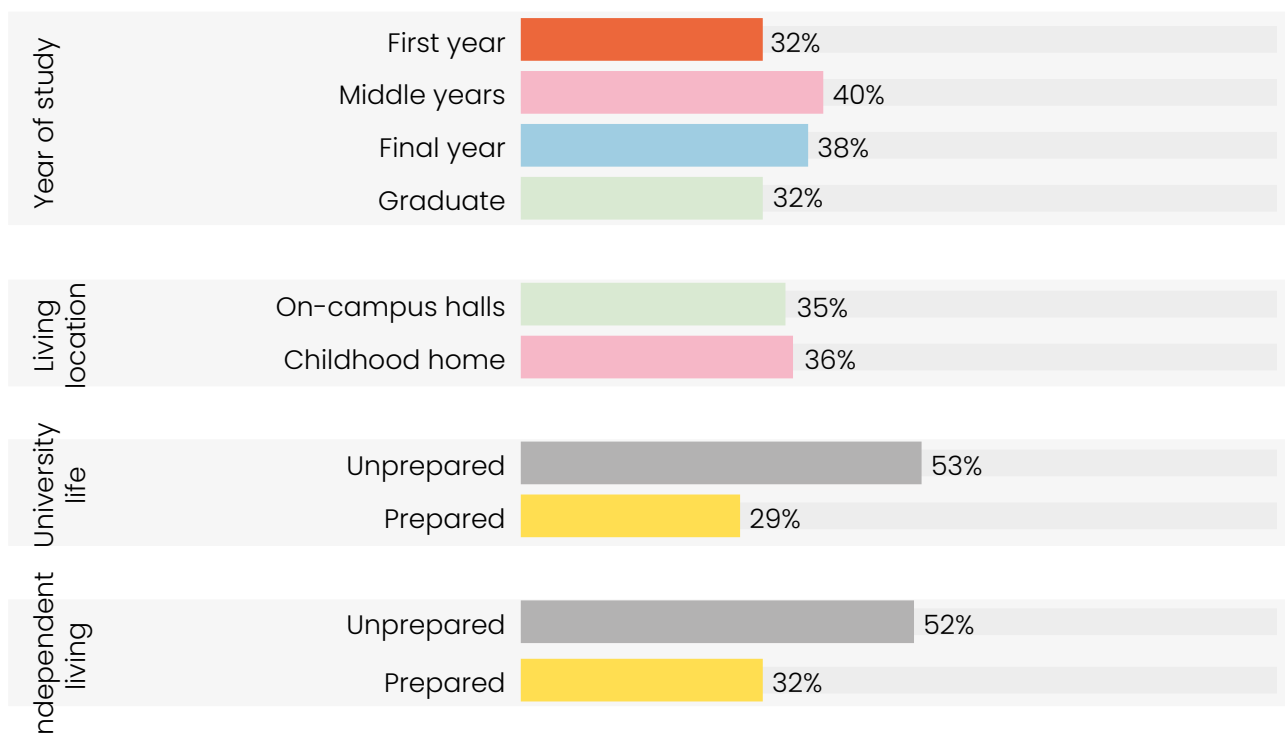
Across our survey participants, nearly 2 in 5 (38%) felt the transition from school to university had been easy, while more than 1 in 3 (35%) indicated it had been hard (the remainder felt neither). So what are the key factors for those who find it hard and are there any lessons to be learned from those who found it easy?

International students pointed to issues with visas and accommodation, while among domestic students who had struggled, making friends was the key difficulty. Being unprepared for independent living and university life and having an existing MH disability were big indicators that the transition would be difficult.

Among our student respondents, 3 in 4 (75%) first years (most of whom would have started uni in autumn 2022) said they felt prepared for independent living, with more than 2 in 3 (68%) feeling prepared for course demands – an improvement on previous years' starters, who would have had to manage COVID-19 restrictions on top of all of the above.

How hard did you find the transition from school to university?

Year of study		
First year		32%
Middle years		40%
Final year		38%
Graduate		32%

Living location		
On-campus halls		35%
Childhood home		36%

University life		
Unprepared		53%
Prepared		29%

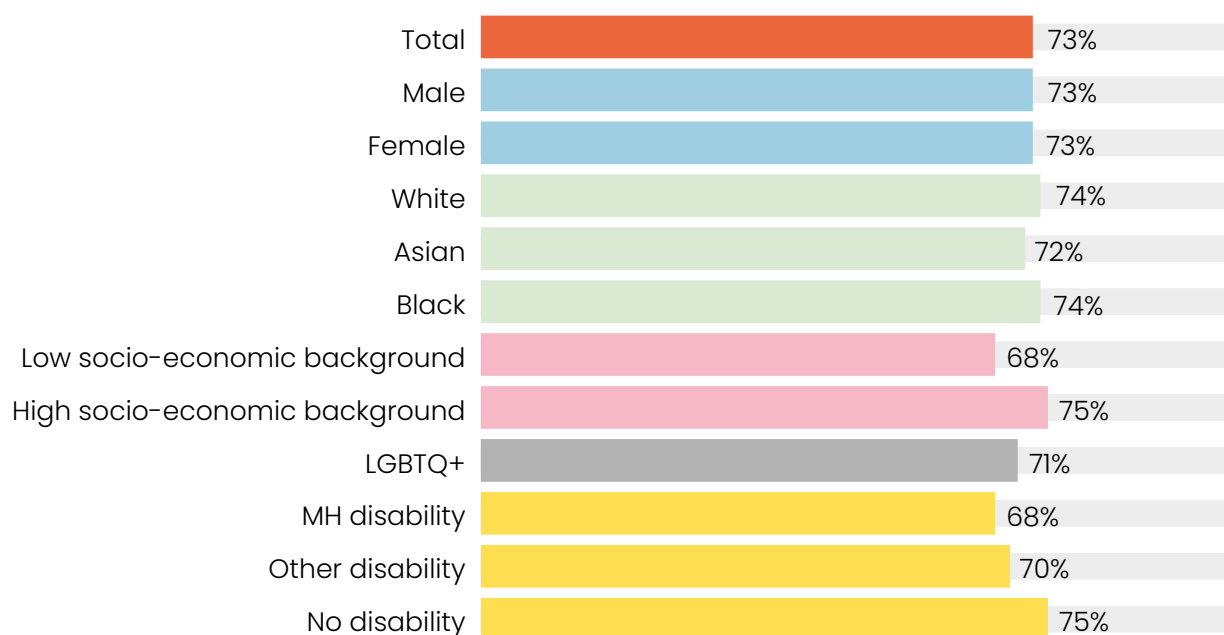| Independent living		
Unprepared		52%
Prepared		32%

Across all student respondents, 7 in 10 said they had been prepared for independent living, with those who were from low socio-economic backgrounds or experiencing an MH disability less likely to say they felt prepared. As an interesting point, among graduates, respondents from low socio-economic backgrounds were among those who felt best prepared for working life.

Students who meet all three of Cibyl's criteria for having low MH, (based on WHO-5 scores, MH symptoms and their Office for National Statistics (ONS) wellbeing score – see page 14) included LGBTQ+ respondents and those from low socio-economic backgrounds. Nearly all (94%) LGBTQ+ students have experienced MH difficulties.

7 in 10

students are prepared for independent living (up from last year); students from low socio-economic backgrounds and those with an MH disability continue to have lower rates of preparedness.

Students who felt prepared for the demands of independent living

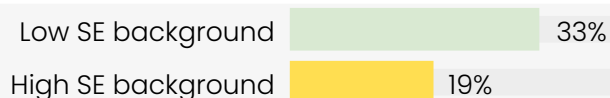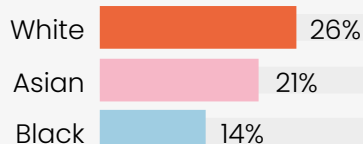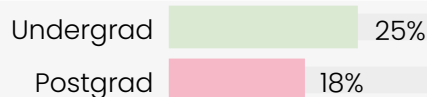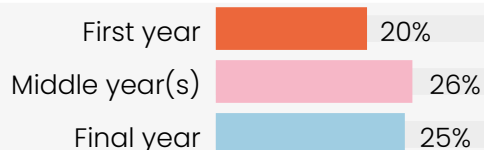| Category	Percentage
Total	73%
Male	73%
Female	73%
White	74%
Asian	72%
Black	74%
Low socio-economic background	68%
High socio-economic background	75%
LGBTQ+	71%
MH disability	68%
Other disability	70%
No disability	75%

Base n = 10,925

56

Feeling unprepared for the demands of a new university course is another potential factor in struggling to maintain good MH or manage existing MH conditions. Across all our 2023 respondents, 2 in 3 felt they were prepared for these demands, while 1 in 5 (21%) felt unprepared. Students who are less prepared for their course and university life are also less likely to feel engaged with the content of their course, which could influence other outcomes. Student respondents with low MH were also likely not to have made friends at university, or say the friendships they had made were of poor quality. Those with low MH also tended not to live with friends and also indicated they did not participate in extra-curricular activities – a place where good friendships may be forged through common interests.

3 in 4

first years (most of whom would have started uni in autumn 2022) said they felt prepared for independent living.

Students with low mental health

First year	20%
Middle year(s)	26%
Final year	25%

Undergrad	25%
Postgrad	18%

Male	18%
Female	26%

White	26%
Asian	21%
Black	14%

Low SE background	33%
High SE background	19%

LGBTQ+	35%

Students from low socioeconomic backgrounds and LGBTQ+ students have the highest proportions of low mental health scores. Undergrads also have poorer scores than postgrads; females' scores are worse than males' scores are and white students are worse than those of Black and Asian students.

There may be a cause and effect situation within these responses as students with low MH who live at their family home might be doing so to manage MH conditions more effectively, to take away the stress and costs of independent living, or to be able to continue as carers, a stressful situation in itself.

Our survey found 1 in 3 (34%) students who were from London originally and 1 in 4 (25%) at university in London said they lived at their parental/guardian home. Given the high costs of accommodation and wider choice of university in the city, together with good transport links, this is perhaps less surprising than the figures for Northern Ireland. Nearly 1 in 4 (27%) students who were from Northern Ireland originally and more than 2 in 5 (37%) who were students at uni there lived with their parents/guardians.

Students from the east of England, south-east and south-west (12% in each area) were least likely to have grown up and chosen a local university, then stayed at their parents' or guardians' home. Those who go to university in the East Midlands (5%), north-east (7%) and south-west (7%) were least likely to be living at their parents' or guardians' home.

Scottish students who attend a Scottish university are entitled to free tuition, so by not moving out into student accommodation it is possible to minimise costs and in theory graduate debt free. However, only 1 in 5 students from Scotland remain (or return to) living in their parental/guardian's home, implying that for many the appeal of independent living (without parents around) is greater than the appeal of minimising costs or else the courses they want to study are not in their region. This may be borne out by the fact only 8% of students at university in Scotland live at their parents'/guardians' home.

We asked student respondents to give us examples of the factors they had found difficult in the transition to university, and received such answers as:

"Knowing how different making friends would be when class sizes are 200–300 people."

"Difficult going into an environment… where there was pressure to make friends and be sociable."

"COVID meant less in-person activities [and] opportunities to socialise and meet people."

"Financially it was a nightmare, I came with little funds; awaiting my scholarship payments made life hell. I am glad it is over now."

"Finding accommodation was a major challenge. If the locals had a better understanding of the student community, things would have worked better."
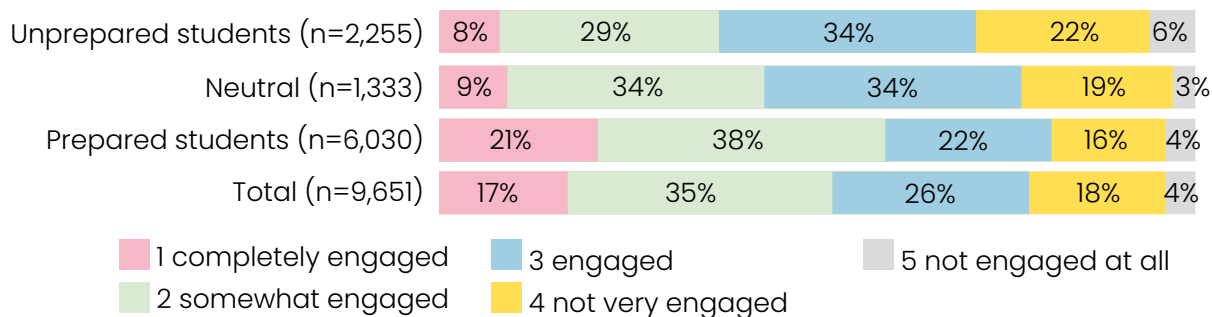
Coping strategies included:

"Talking to people in similar situations, going for walks, being in nature, eating food that is familiar to me (my own country food)."
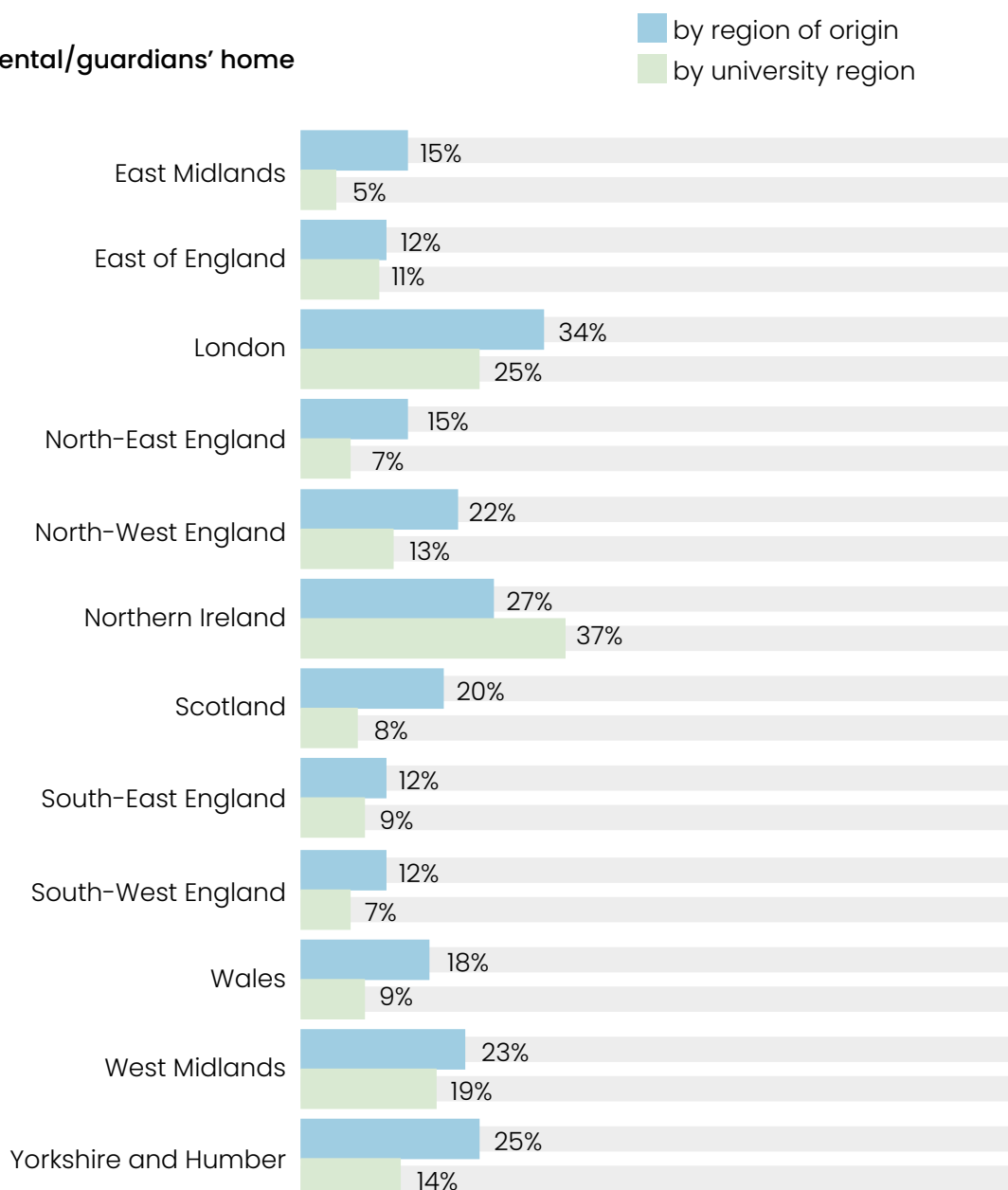
"Buddy systems, chat rooms, student to student MH support, organised activities on campus."

How engaged do you feel with the content of your course? (scale 1–5)

	1 completely engaged	2 somewhat engaged	3 engaged	4 not very engaged	5 not engaged at all
Unprepared students (n=2,255)	8%	29%	34%	22%	6%
Neutral (n=1,333)	9%	34%	34%	19%	3%
Prepared students (n=6,030)	21%	38%	22%	16%	4%
Total (n=9,651)	17%	35%	26%	18%	4%

- 1 completely engaged
- 2 somewhat engaged
- 3 engaged
- 4 not very engaged
- 5 not engaged at all

Living at parental/guardians' home

- by region of origin
- by university region

Region	by region of origin	by university region
East Midlands	15%	5%
East of England	12%	11%
London	34%	25%
North-East England	15%	7%
North-West England	22%	13%
Northern Ireland	27%	37%
Scotland	20%	8%
South-East England	12%	9%
South-West England	12%	7%
Wales	18%	9%
West Midlands	23%	19%
Yorkshire and Humber	25%	14%

3 in 5

student respondents say they have no friends but students have better friendships this year than in our 2021 and 2022 surveys.
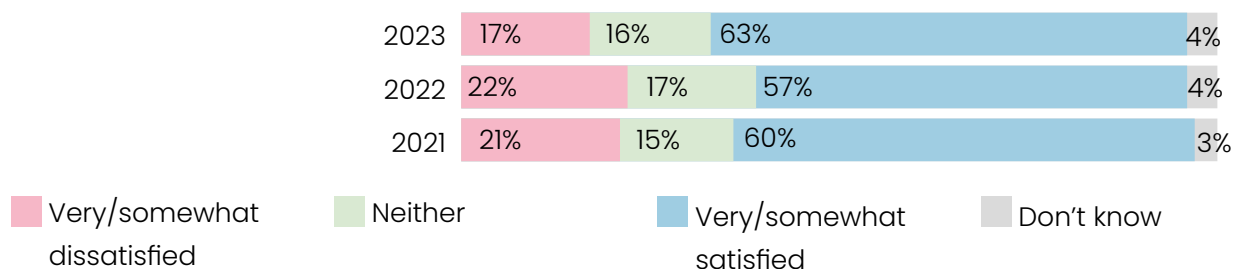
Finding friends and the implications of loneliness

This year, students respondents were more likely than previous years' respondents to say they had made friends at uni, almost certainly helped by fewer COVID-19 restrictions hampering extra-curricular activities and social lives, and more interactions taking place in libraries, laboratories and lectures, for example. Although 2023's student respondents are faring better than those who took part in our previous surveys in 2022 and 2021, there were still almost 1 in 5 (17%) this year who said they have no friends at university.

According to Higher Education Statistics Agency (HESA) figures, there were nearly 2.9 million undergraduate and postgraduate students in the UK in the 2021/22 academic year. 1 in 5 of this group would amount to 580,000 people. *(Source HESA)*

There was a slight fall in the proportion of respondents who said they were dissatisfied with the friendships they had made, and almost 2 in 3 (63%) were satisfied with their friendships. At the time of the survey, some of our respondents might have been at university for only a matter of weeks, a potential factor in the quality of those friendships. It's very often friends, a partner or family that students turn to when they have an MH setback, so establishing these friendships is a key part of being able to cope later.

Friendships at university [current students]

Year	Very/somewhat dissatisfied	Neither	Very/somewhat satisfied	Don't know
2023	17%	16%	63%	4%
2022	22%	17%	57%	4%
2021	21%	15%	60%	3%

Very/somewhat dissatisfied   Neither   Very/somewhat satisfied   Don't know

Our study also showed that most students live with friends: they had either made friends with the people they found themselves living with, or they chosen to live with the friends they had made. However, 3 in 20 (15%) current student respondents had no friends in their house/flatshare. As a fresher (first-year student) housemates can be pot-luck, based on who applies for which accommodation or halls and how rooms and flats are allocated; second-year students frequently commit to their accommodation for the next academic year (September or October) very early in the calendar year (January or February) of their first year, before they have made good friends. In either case, since our survey was conducted between December 2022 and February 2023, those responding might have found that the people they thought they would be happy to live with turned out to be less than friends.

What is clear is having friendships among housemates is important in more ways than one – those who live with friends (or their partner) were more likely to say they were prepared for the demands of their course than those not living with friends. The flip side of that coin is the proportion of students who say they have experienced tension in their household in the last 12 months – for 1 in 4 (24%) tension was a frequent occurrence and only 1 in 3 (35%) respondents could say tension had never happened.

Worrying about making friends had affected nearly 3 in 4 (72%) of our student respondents within the 12 months leading up to the survey, while 17 in 20 (85%) had felt lonely or isolated in the same period. Student respondents with low MH scores, as defined in our methodology on page 43, were almost twice as likely as respondents from other groups to have experienced loneliness and isolation (78% vs 39%). They were also significantly more likely to have worried about making friends (56% vs 28%).
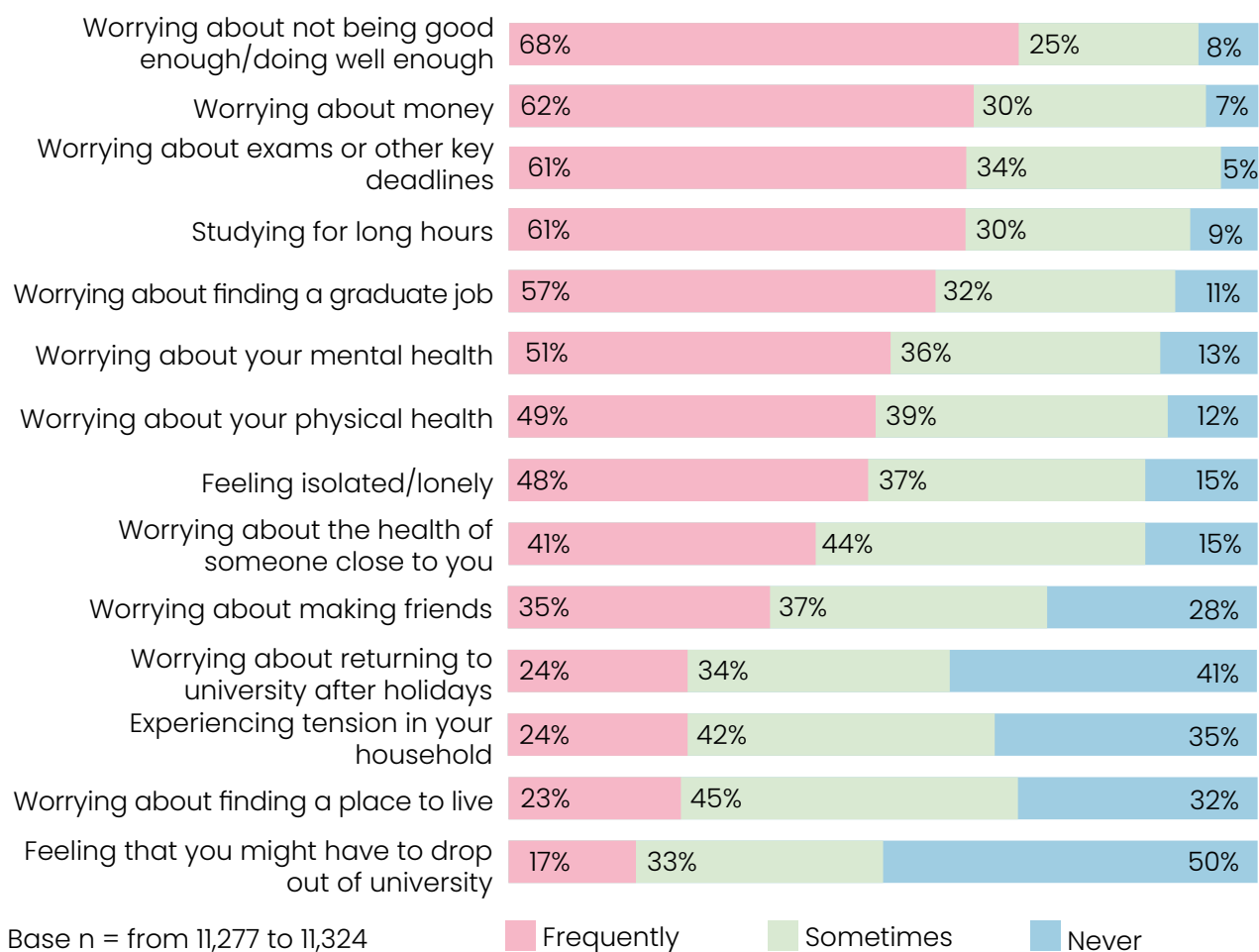
3 in 4

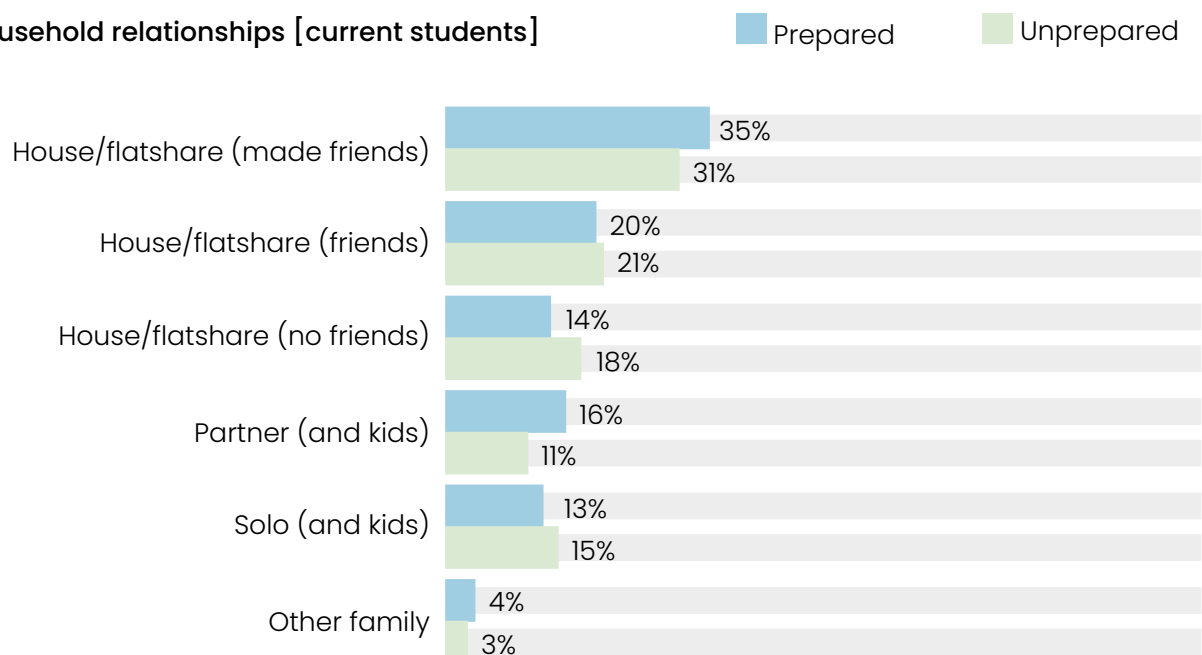of our student respondents had worried about making friends.
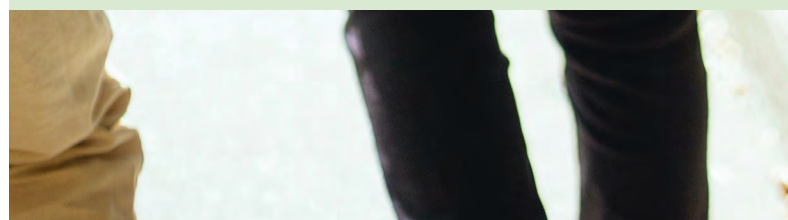
Student worries and negative experiences

	Frequently	Sometimes	Never
Worrying about not being good enough/doing well enough	68%	25%	8%
Worrying about money	62%	30%	7%
Worrying about exams or other key deadlines	61%	34%	5%
Studying for long hours	61%	30%	9%
Worrying about finding a graduate job	57%	32%	11%
Worrying about your mental health	51%	36%	13%
Worrying about your physical health	49%	39%	12%
Feeling isolated/lonely	48%	37%	15%
Worrying about the health of someone close to you	41%	44%	15%
Worrying about making friends	35%	37%	28%
Worrying about returning to university after holidays	24%	34%	41%
Experiencing tension in your household	24%	42%	35%
Worrying about finding a place to live	23%	45%	32%
Feeling that you might have to drop out of university	17%	33%	50%

Base n = from 11,277 to 11,324

Household relationships [current students]

	Prepared	Unprepared
House/flatshare (made friends)	35%	31%
House/flatshare (friends)	20%	21%
House/flatshare (no friends)	14%	18%
Partner (and kids)	16%	11%
Solo (and kids)	13%	15%
Other family	4%	3%

With so much riding on friendships when it comes to maintaining good MH, the wise words offered by MH experts at Imperial College London in last year's report still resonate. They pointed to evidence that loneliness is a strong predictor of mental distress in students, and that it can lead to MH difficulties. Loneliness can also leave students with low mood, reduce their academic performance and contribute to dwindling self-belief and lower levels of immunity, Imperial College London's experts warned.

"These are challenging to overcome at any time, but even more so at transition points such as starting university, moving on to a higher level of study, graduating and starting the next chapter," they said, adding that loneliness does not always have an identifiable source.

Most students (54%) either live with existing friends or have made friends with people they live with. Students living with friends or partners are more likely to be prepared for the demands of their course than those not living with friends.

Does privilege change the picture?

Around 1 in 2 (46%) current student respondents with MH conditions have not used any formal support services, and students with no friends, or those who are dissatisfied with their friendships, are the most likely to think their university is not supportive of their MH difficulties. Given that 1 in 6 (16%) student respondents said they have never had any MH training, information or advice, and of that group, 1 in 5 (21%) had no friends, a good starting point for assessing which students may be suffering low MH in silence might be made by identifying isolated or unsupported students.

Training and advice on how to look after mental health [students]

At university	33%
At school or college	29%
By family/friends	29%
General health or MH providers	22%
Club/society outside of school/college	8%
Other	5%
Never been given any MH training	16%
Don't know/can't remember	9%
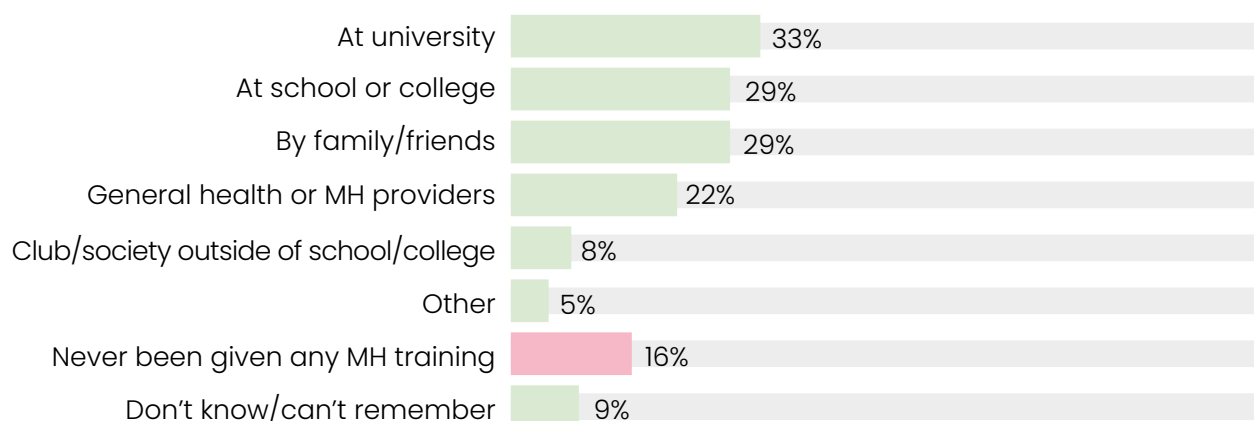
Base n = 10,234

By categorising students into either supportive or unsupportive environments based on the levels of the peer support they received, or how connected they were, Cibyl was able to show what proportion of students lacked indirect support and which groups they fell into.

Students from high socio-economic backgrounds had the best level of indirect support (32%) of any of our respondents, while those from low socio-economic backgrounds had half that level (16%) – the lowest amount of indirect support among any sub-category. Students who were Black or in

their final year of study also endured low levels of support (19% and 20% respectively), while those who were white or male or in their middle years of study had higher levels of indirect support (25%, 24% and 24% respectively).
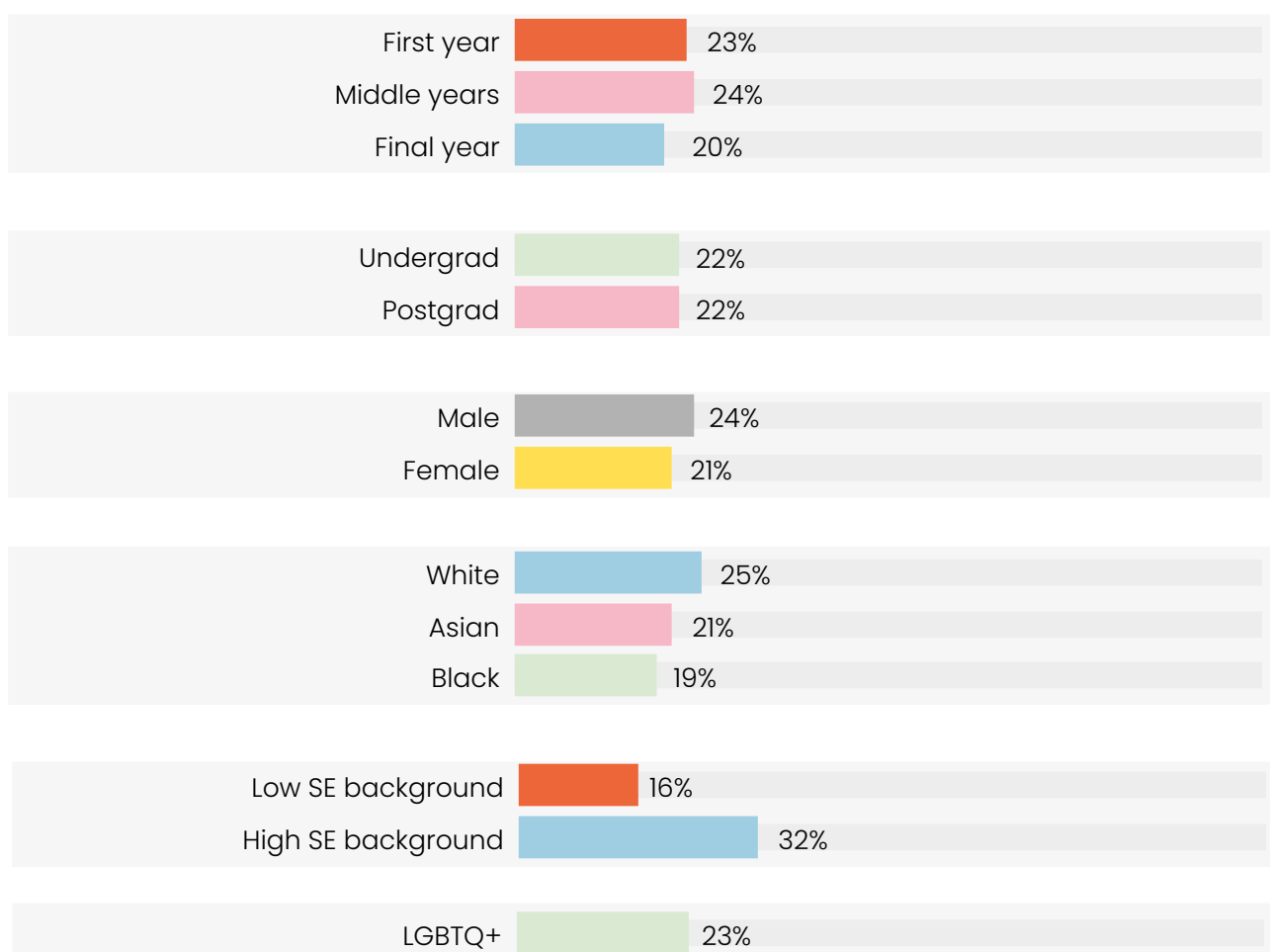
We come back to expert recommendations for finding support at university – and work – when MH is a concern in section 5 (page 66) and section 6 (page 74).

Something that is certain is friends are key to helping buoy up students with low levels of MH both indirectly and by pointing them to direct support systems in times of need.

1 in 6

1 in 6 students haven't received any MH training, information or advice.

Indirect university support environments [current students]

First year	23%
Middle years	24%
Final year	20%

Undergrad	22%
Postgrad	22%

Male	24%
Female	21%

White	25%
Asian	21%
Black	19%

Low SE background	16%
High SE background	32%

LGBTQ+	23%

Universities – what's on offer?

New expectations

We examined the growing number of young people placing a value on MH support in "Student mental health: the inside story" (page 12). Year on year, Cibyl can track the growth in the number of young adults who choose their university based on its robust MH support.

In 2021, respondents who said MH support was not an important factor compared with those for whom it was important were similar (36% vs 32% respectively). This has changed significantly, so that in 2023, just 3 in 20 (15%) say robust MH support was not important in their choice and 12 in 20 (58%) say it was.

3 in 20

respondents say robust MH support was not important in their choice.

When you chose your university, how important was it to know that they have a robust mental health provision?

Year on year changes

Not at all important
- 2021: 20%
- 2022: 11%
- 2023: 7%

Somewhat unimportant
- 2021: 16%
- 2022: 11%
- 2023: 9%

Neutral
- 2021: 28%
- 2022: 28%
- 2023: 24%

Somewhat important
- 2021: 19%
- 2022: 22%
- 2023: 24%

Very important
- 2021: 13%
- 2022: 23%
- 2023: 34%

Don't know
- 2021: 5%
- 2022: 4%
- 2023: 3%

Legend: 2021 | 2022 | 2023
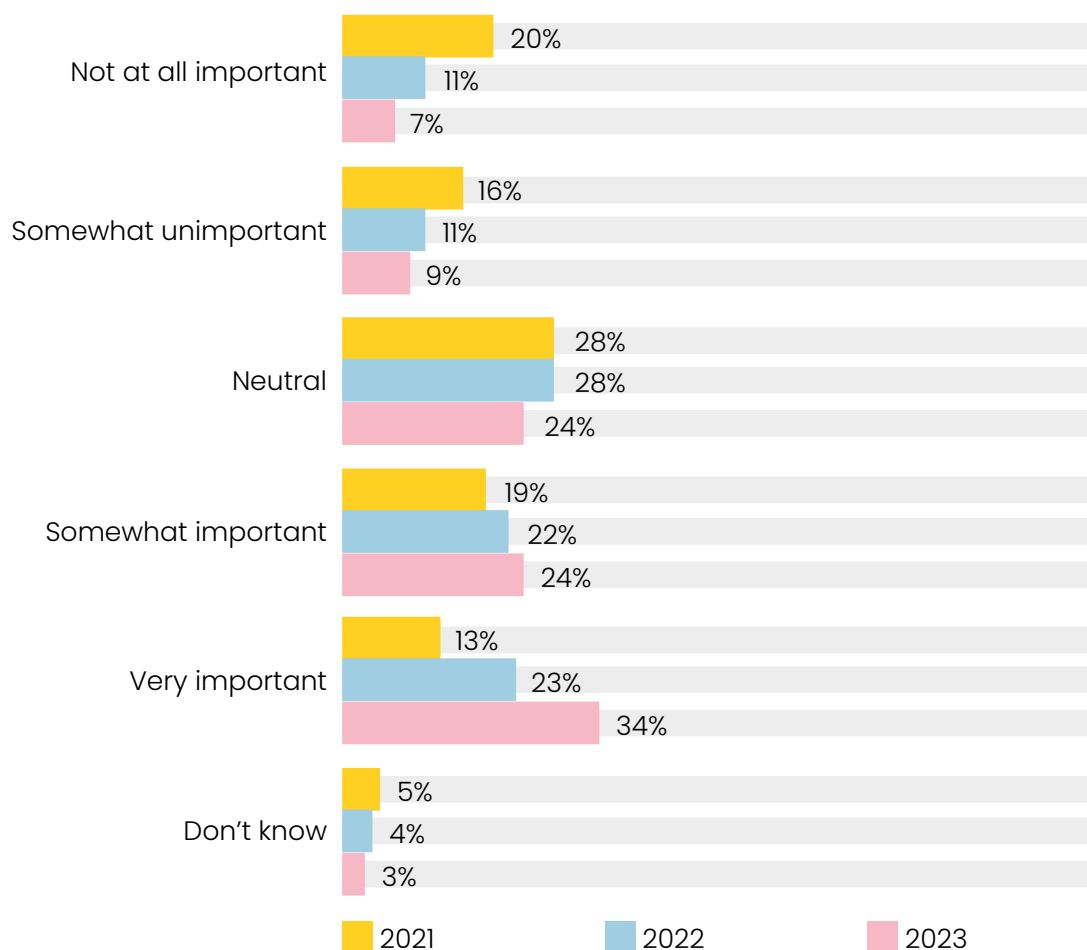
On page 23 we touched on which university/student union (SU) support services students are using to help their MH. Close to half (46%) had not engaged with any support services and 2 in 3 (64%) had not used their university/SU support services, despite 4 in 5 (81%) of our respondents being touched by MH difficulties and 3 in 5 (59%) experiencing depression and anxiety. For those who did engage:

• around 3 in 10 (30%) used MH support services

• around 2 in 10 (20%) used student services

• around 2 in 10 (15%) used SU counselling services

• around 1 in 10 (10%) used SU MH advisers.

Students also engaged with other help and advice points at uni, including academic support and careers services. These results were similar year on year and it is important to point out that some students will use more than one support service when they feel in need.

3 in 10

respondents say they used university MH support services.

2 in 10

survey respondents say they used university/SU counselling services.

Year on year university/SU MH support services used

University/SU counselling services
- 14%
- 20%
- 15%

University/SU mental health advisers
- 7%
- 10%
- 10%

University/SU self-help resources
- 8%
- 13%
- 8%

University/SU wellbeing sessions
- 1%
- 4%
- 5%

Mentor/buddy provided by university/SU
- 3%
- 8%
- 8%

None
- 5%
- 6%
- 6%

Other
- 60%
- 55%
- 63%

■ 2021 ■ 2022 ■ 2023
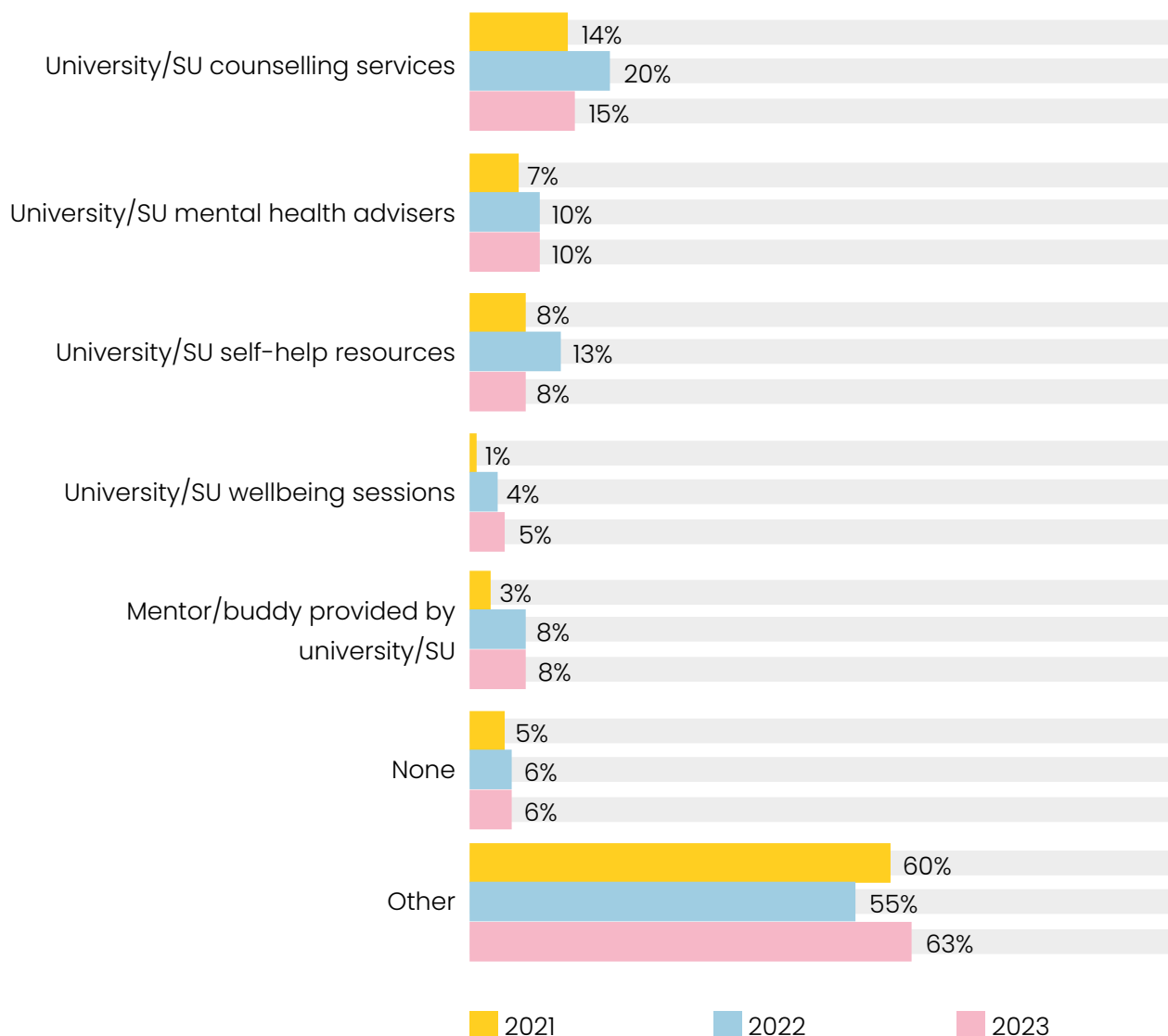
Why don't students use MH support services?

The lack of student engagement seems in part to be because of a lack of awareness. Though year on year Cibyl can see a rise in the number of respondents saying they were aware of each service individually, almost 4 in 20 (19%) respondents say they were aware of none of the services in our survey. Around half were aware of external (NHS/third sector) MH support services such as counselling and 24/7 helplines (47% and 49% respectively) and around 2 in 5 (41%) knew about not-for-profit support, but 3 in 20 (15%) respondents said they knew of none of these.

Positive action and interaction

Students say they want their university staff to actively reach out to them, rather than the onus being on the student to engage with the services on offer. They also want more appointments available with counselling services and a kind of "drop-in" offering, rather than needing to book in advance. That's not a practical ask however nice to have, given that HESA calculated there were 2.75 million students in higher education compared with 225,000 academic staff (including those in managerial, clerical and technical roles) in the academic year 2020/21. Financial squeezes on all budgets mean universities have to ensure funding is made available to the most needed and effective support.

Many universities have their own website support pages and some employ specialist counselling teams offering expert help in-person and online. Imperial College London, for example, lists numbers and support services and includes links to accident and emergency units for those in crisis and urgent need. For those who can wait, but need to engage with student counselling and support, besides face-to-face appointments there is a range of online help and signposts including those for coping with anxiety and stress, including its Kind Mind series, plus courses, workshops and therapeutic groups. There are also people who can help with wellbeing advice.
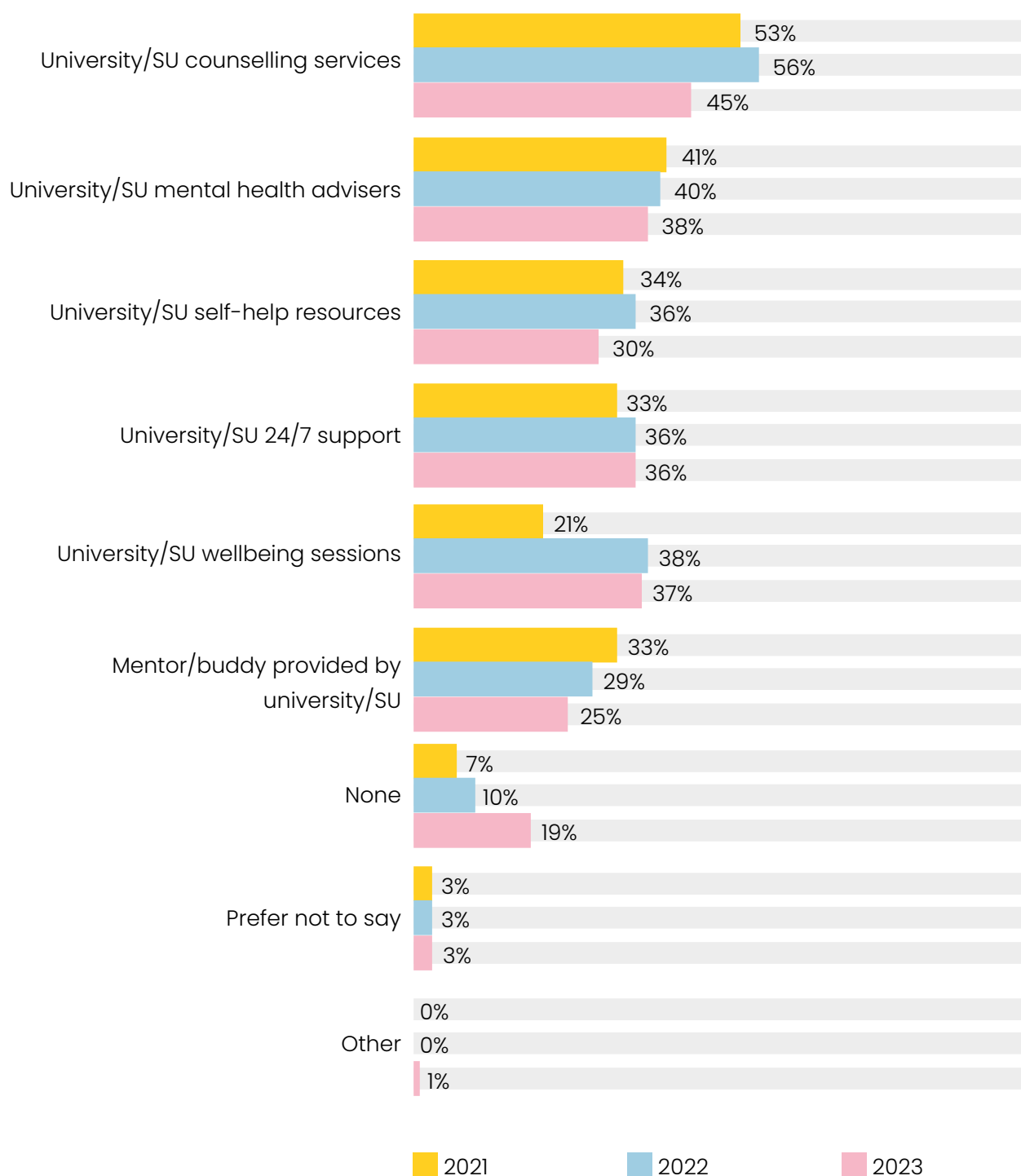
4 in 20

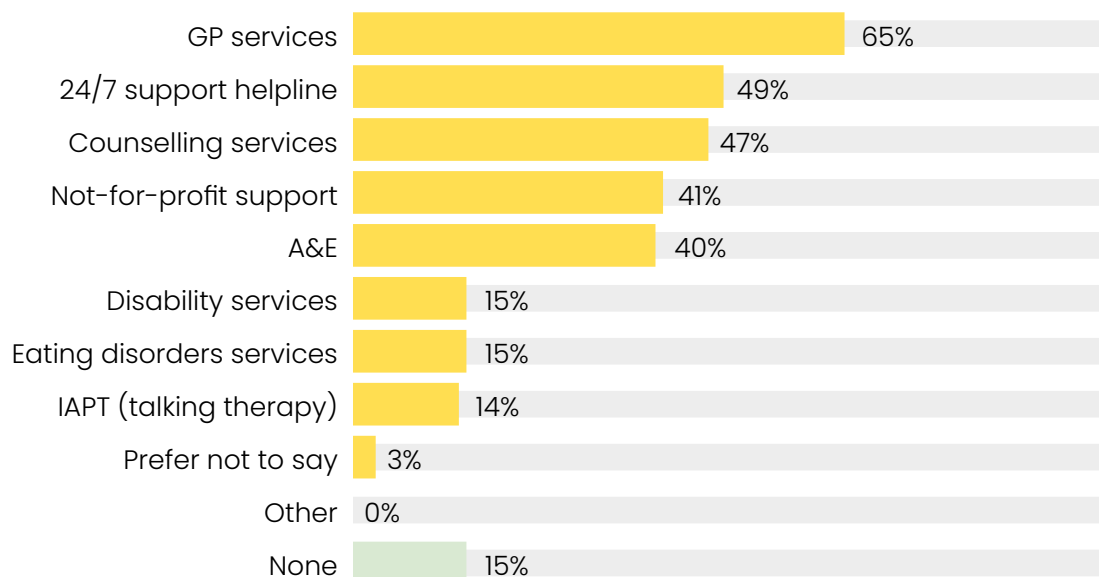respondents say they were not aware of any of the services mentioned in the survey.

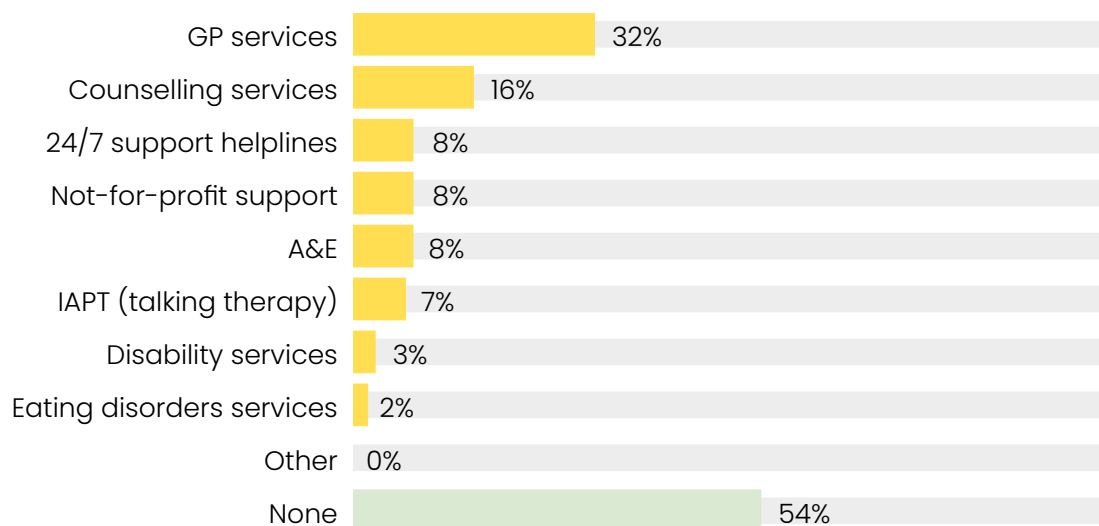## Year on year awareness of university/SU MH support services

University/SU counselling services
- 53%
- 56%
- 45%

University/SU mental health advisers
- 41%
- 40%
- 38%

University/SU self-help resources
- 34%
- 36%
- 30%

University/SU 24/7 support
- 33%
- 36%
- 36%

University/SU wellbeing sessions
- 21%
- 38%
- 37%

Mentor/buddy provided by university/SU
- 33%
- 29%
- 25%

None
- 7%
- 10%
- 19%

Prefer not to say
- 3%
- 3%
- 3%

Other
- 0%
- 0%
- 1%

Legend: 2021, 2022, 2023

University mental health support services awareness and use

Awareness

Service	Percentage
GP services	65%
24/7 support helpline	49%
Counselling services	47%
Not-for-profit support	41%
A&E	40%
Disability services	15%
Eating disorders services	15%
IAPT (talking therapy)	14%
Prefer not to say	3%
Other	0%
None	15%

Base n = 10,433

Use

Service	Percentage
GP services	32%
Counselling services	16%
24/7 support helplines	8%
Not-for-profit support	8%
A&E	8%
IAPT (talking therapy)	7%
Disability services	3%
Eating disorders services	2%
Other	0%
None	54%

Base n = 8,630

How universities work with other agencies

A number of MH charities and organisations offer direct training and advice specifically for university staff, friends of students and other people who come into contact with students experiencing MH difficulties.

In the 2022/23 academic year, Student Minds, the UK's student mental health charity, trained 1,599 students to confidently support their peers plus a further 168 staff members to deliver a range of workshops to students across the country. Through their online support platform, **Student Space**, Student Minds helped 121,955 visitors to navigate the challenges and uncertainties of university life. This takes the total number of visitors to Student Space to almost half a million since launching in 2021. Student Minds also continues to run University Mental Health Day alongside the University Mental Health Advisers Network (UMHAN), while campaigning and advocating for students year-round, and supporting universities to take whole-university approaches to mental health through the University Mental Health Charter.

Besides its own counsellors and experts, Imperial College London points students to NHS general practice (GP) services as a starting point, which 1 in 3 (32%) of our respondents have used for the MH support needs. GPs can refer on to more wide-ranging NHS services, when necessary.

Specific external support resources also fill the gaps, such as Beat, the eating disorders charity; Mind, the MH charity; Student Space, run by Student Minds; MH text service Shout, and LGBTQ+ support charities such as MindOut, and Galop. There are also links for services aimed at international students, who may not be entitled to access NHS care and support.

UUK is continuing its campaign for better MH support across universities so staff and students are well served, and wellbeing improves across the university community. Besides targeting its 140+ member universities, the organisation lobbies parliament for improved funding and support for MH through NHS care. In addition, UUK works with NHS providers to coordinate and develop support to promote a better understanding of what staff and students need.

Shaping the future

Creating better mental health

This is the third year that Cibyl has conducted a study into young adults' mental health (MH) and invited them to reveal what MH issues they have and how they deal with MH difficulties. Extraordinary challenges in the recent past have been replaced by climate change and geopolitical unrest that are very much in the present – plus for many, rising prices and money are a major concern.

Young adults go to universities to learn, gain independence and forge new friendships through a gateway that also improves work opportunities and careers. How they define success may be different from previous generations' aspirations – so how universities and employers help them achieve it may need to change too.

Cibyl is always grateful for the openness of its survey participants and the support of its partners, and welcomes the knowledge they share. Following on from studies in 2021 and 2022, Cibyl's 2023 report builds a year-on-year picture of young people's MH challenges and changes in patterns.

Here we expand our call for action on the five fronts of our previous reports: KNOW SUPPORT TEACH CONNECT CULTURE. We call on universities, companies and organisations to continue the good work they have instigated, and join us in building a brighter future.

1.

Know

This year's report introduces new questions around the support services young adults prefer to use, how effective they feel they are, and which services they shun. Knowing and monitoring this data allows Cibyl, universities and employers to ascertain the support services to target and invest in.

Many students and graduates experience MH difficulties before they even start university or work. Knowing whose MH is likely to be challenged, by demographic and disability or other factors, is a way to actively highlight support and interventions so that students and employees in need engage with them. Signposting MH web pages and support and inviting communication and trust helps students and graduates gain knowledge of their university or employer, as well as helping them thrive. School leavers and graduates already consider good MH provision important in a university or employer, whether they have existing MH concerns of their own, or experience of friends' and family members' MH challenges, or are thinking what they might need in future. Wellbeing benefits, healthy working practices and dedicated counselling services remain at the forefront of the MH support young adults want – and now expect – when they are making these important life choices.

Knowledge is power and can bring about change. The information that young adults share in this survey should be a resource that universities, employers and charities build on. We know that students and graduates expect a return on their investment in a degree and we also know that they no longer measure this in financial rewards alone.

2.

Support

Supporting young adults and their transitions from school into university and on to the workplace is a must, as 4 in 5 have experience of MH difficulties. Life changes, loneliness and unfamiliar environments are big pressure points, and the quality of these transitions can lay the foundations of future wellbeing within those environments.

Last year our partner, Universities UK (UUK), flagged up concerns about the provision and accessibility of NHS MH services, pointing out that there are gaps between adult and children's services and those offered by the NHS and university, and between term-time and "home" support. Cibyl has previously drawn attention to the need for students who had accessed MH treatment through Child and Adolescent Mental Health Services (CAMHS) to receive support during the transition into adult services in a different location. The gaps between the availability of NHS MH services and need remain, plus staff in MH services are under strain. In summer 2023 UUK outlined its position on legislating for an additional statutory duty of care for students in higher education, calling for greater government focus on student MH. UUK is also campaigning for student-facing NHS services that match the commitment made in the NHS Long Term Plan.

On the plus side, proportionately more students think their university is supportive of students with MH difficulties than in previous years. Charity services make up some of the shortfall, with organisations such as Student Minds, the Samaritans, and LGBTQ+ charity Just Like Us all providing support services.

Support closer to home from friends and family remains vital to young adults when they have MH concerns, but 17% of students do not seek advice from anyone and 16% have never been given any MH training or advice on looking after their MH. What students want is for universities to reach out to them early, rather than students trying to find support services in times of great need.

Graduates also prefer to speak to family and friends about their MH concerns, but external providers, such as GPs and therapists were used by more than 1 in 3 employed and unemployed graduates, with text, telephone and online services used by 1 in 10 graduates. However, 1 in 5 unemployed graduates and 1 in 6 employed graduates have not sought advice or support from anyone.

3.

Teach

Educating students, student leaders and tutors so they can watch for signs of MH decline in themselves, their peers and the groups they work and socialise within, continues to be vital, especially when dealing with students who are unlikely to use services on offer. Understanding how to support students or employees living with MH illness is another important lesson to be learned.

In 2022's report, partner Imperial College London highlighted the way to teach students life-long resilience skills and pointed out that students have a bank of innate resilience built by challenges they have already overcome. The college's experts reminded us that even the most resilient people will still experience sadness and self-doubt as well as distress and worry.

Universities UK advocates a whole-university approach to MH and wellbeing, and wants to develop students' ability to thrive alongside the academic curriculum. UUK's approach offers an excellent framework for all organisations – teaching all employees how to look after their own MH needs is an aspect of modern life and working well – something young adults appreciate.

4.

Connect

Finding points of connection helps those students and graduates who struggle through the transitions between home and university, and university and work. Loneliness remains one of the strongest predictors of MH distress and difficulties.

The University MH Charter highlights that the only guaranteed points of contact between individual students and their university are academic staff and the curriculum. Certain groups can feel like outsiders but regardless of age, ethnicity, gender or sexuality, friendships and connections make a difference to positive MH. Universities and employers should seek to build interaction and inclusivity into inductions and introductions for every new starter.

Lack of cultural connection is a factor in the uptake of MH services among certain groups and visible role models have a part to play in this. In January 2023 the Higher Education Statistics Agency **(HESA)** revealed that among professors who declared their ethnicity, 12% were from ethnic minority backgrounds and 88% were white. Among academic staff, 68% were of UK nationality, 16% were EU nationals and 16% non-EU nationality. Only 6% of staff declared a disability.

Among Cibyl survey respondents, those with Black and Asian backgrounds were the least likely to seek advice with MH concerns and the most likely to use positive thinking and mindfulness to stay mentally healthy when under pressure. Physically disabled people do need additional consideration when MH support provision is being organised, since inaccessible services are not only a barrier to face-to-face services, they also exacerbate feelings of otherness.

At university, students make new friends among flat-mates, course mates and those with shared interests. Social, sports, special interest societies and other non-academic activities offer additional points to connect. Workplaces and employers rarely offer the same resource to employees, but this year proportionally more employed graduates had made friends at work than in previous years' studies. Even so, 26% of our employed respondents and 17% of students said they had no friends at work/university.

Both universities and employers should be aware that money worries affect 83% of current students and 81% of new graduates (at least monthly), putting pricey activities out of reach of some. 21% of students don't get involved because they can't afford to and 21% cite poor MH. Students may be working a part-time job that takes time away from joining social gatherings. Even when earning, 79% of graduates with a low MH score worry about money daily or weekly, and 76% of graduates with low MH scores frequently feel isolated or lonely.

Mindful and timely interventions and stronger support networks are key ways universities and employers can help students and employees build better connections, which in turn can lead to friendships.

5.

Culture

We can all create an inclusive and nurturing culture in university, at work and across society. By creating a balanced, holistic approach to student and employee wellbeing with targeted help and a range of options to manage MH difficulties when they arise, ultimately universities and employers help everyone.

Though 19% of students still have no awareness of their university/student union MH services and support, out of those who are aware but don't use them, 16% gave the reason they worried they would be seen as weak and 26% said they felt embarrassed or ashamed. The same reasons and similar percentages were given by graduate and student respondents who don't engage with NHS and third-sector support services.

Normalising MH difficulties, as high profile sports people, actors, musicians, actors and social media influencers have started to do, helps break down these barriers. But in another survey conducted by Cibyl, LGBTQ+ charity Just Like Us, which works with school pupils and young adults, pointed out that people with high profiles can seem too remote. The charity advocates closer connections to create a culture of acceptance.

Most employed graduate respondents agree they feel able to work in a way that helps maintain good MH (55%), and that their senior leaders cared about MH and wellbeing (52%). However, only 41% of respondents agreed their employer was doing everything possible to support their mental wellbeing, and 23% disagreed with the statement. Universities need to either improve their culture of support or nurture students' understanding of existing culture. Fewer than half (49%) of student respondents feel empowered to study in a way that helps them maintain good MH, or that their senior leaders care about students' MH and emotional wellbeing (46%).

Last year our partners at Accenture made the observation that younger employees won't yet have a professional reputation that enables confidence to talk about their MH. This year only 7% of respondents said they would like future or current employers to support their MH through employees sharing their own MH stories – that's a percentage point fall compared with last year's survey. In addition, the percentage of respondents saying they would like MH to be discussed at one-to-one and review meetings dropped from 28% to 22%.

The University MH Charter suggests that improvements to culture can be made by asking students themselves what they want, while Disabled Students UK highlights the invaluable knowledge based in its own membership. Student Minds recommends that universities and students' unions promote support through improving social connections, but with a financial squeeze ongoing, universities may find this difficult. Another recommendation is to support the development and facilitation of accessible social spaces, particularly for those from marginalised groups. Some of this is enshrined in law and UUK is pressing for commitments to be upheld.
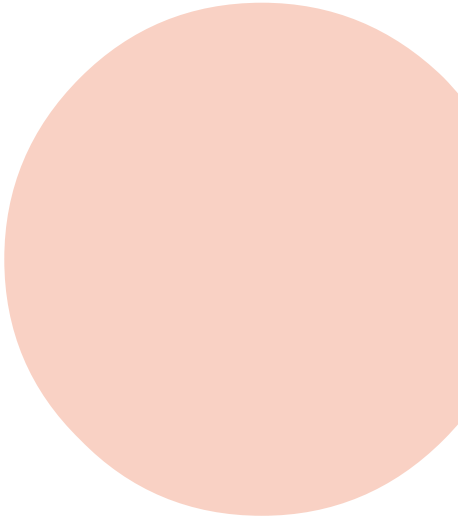
There has been a shift in culture with companies highlighting policies including employee welfare alongside their environmental, social and governance (ESG) and corporate social responsibility (CSR) statements. These particularly matter to young adults looking for an employer, but they also matter to stakeholders, potential investors and business partners, as well as consumers.

Cibyl is committed to continue researching MH issues. Year on year we have widened our database to understand the reasons for MH challenges and what kind of help young people want to maintain or improve their MH and wellbeing. No employer or university can ignore the value of good MH support services and the impact poor MH has on young adults – and on wider society.
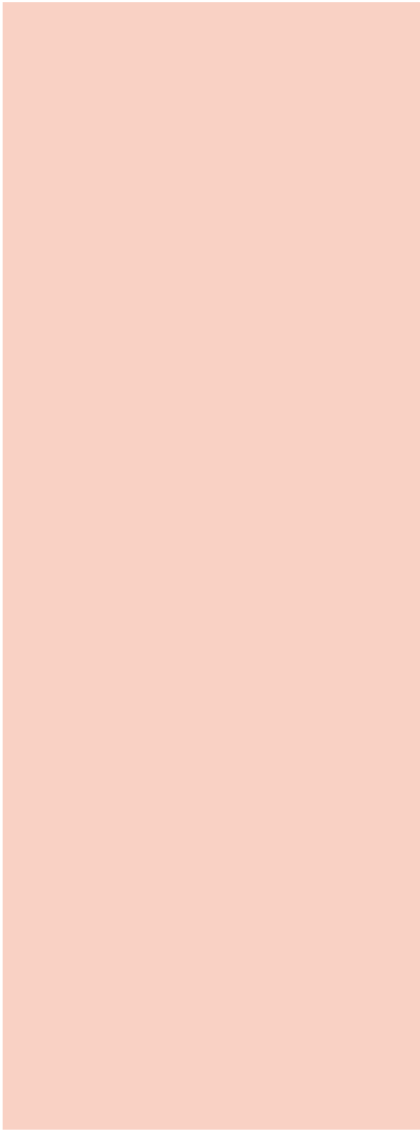
The transition from university to workplace

What students and graduates want from employers

In a jobs market where strong candidates are highly sought after, graduates can afford to be choosy about their future employer. Recruiters are acknowledging there's a "what do graduates look for in employers?" question besides the usual tick list of qualifications, attributes and skills that employers want from graduates. As highlighted earlier in this report, 4 in 5 (79%) graduate respondents say robust MH provision is an important or very important factor in choosing an employer.

Acccording to our survey, LGBTQ+ graduates, those from low socio-economic backgrounds and females are most likely to take time off work for mental health difficulties.

In official UK government data for 2021/22, an estimated 36.8m working days were lost to work-related ill health, with stress, anxiety and depression accounting for just under half (17m) of these. On average, each person taking time off suffering stress, depression or anxiety lost 18.6 days of work – more than those who took time off from musculoskeletal disorders (15.2 days) or general ill health (17.2 days). (Source **Labour Force Survey (LFS)** self-reported estimates).

Our research study this year found in-work friendships made a key difference to the amount of time graduates took off work, as did feeling prepared for work. We examine these on pages 83.

Taken time off for MH by demographics [graduates]

Recent graduate	34%
Last year graduate	37%
Male	29%
Female	40%
White	37%
Asian	36%
Black	33%
Low SE background	43%
High SE background	35%
LGBTQ+	49%
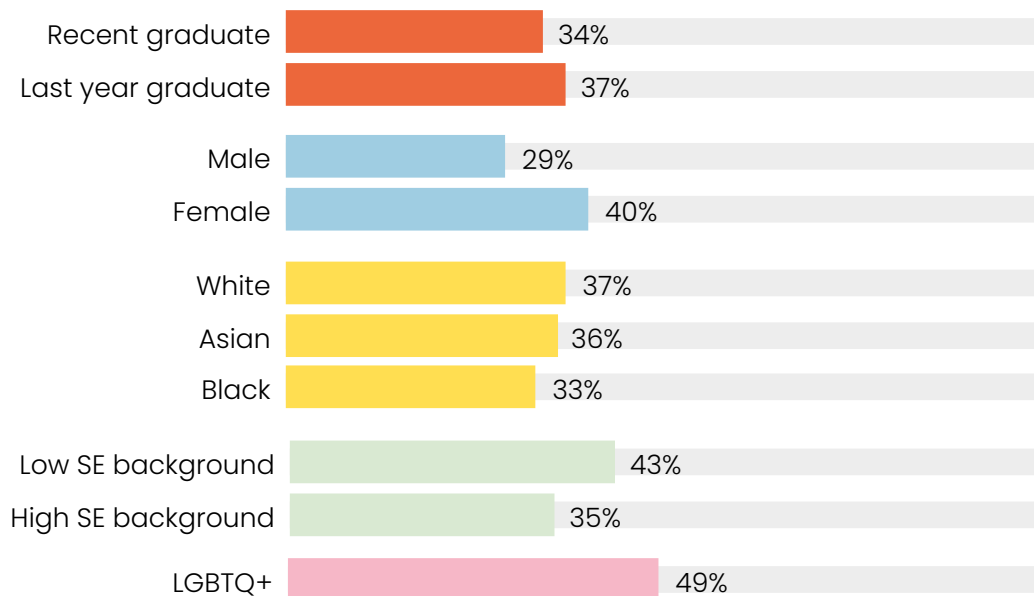
Taken time off for MH by belonging metrics [graduates]

Friends	33%
No friends	42%
Satisfied	35%
Dissatisfied	46%
Prepared to work	33%
Not prepared to work	45%
Spoke to work about MH	56%
Have not spoken to work about MH	33%
Supportive employer	36%
Unsupportive employer	43%
Other MH level	32%
Low MH (all three)	45%
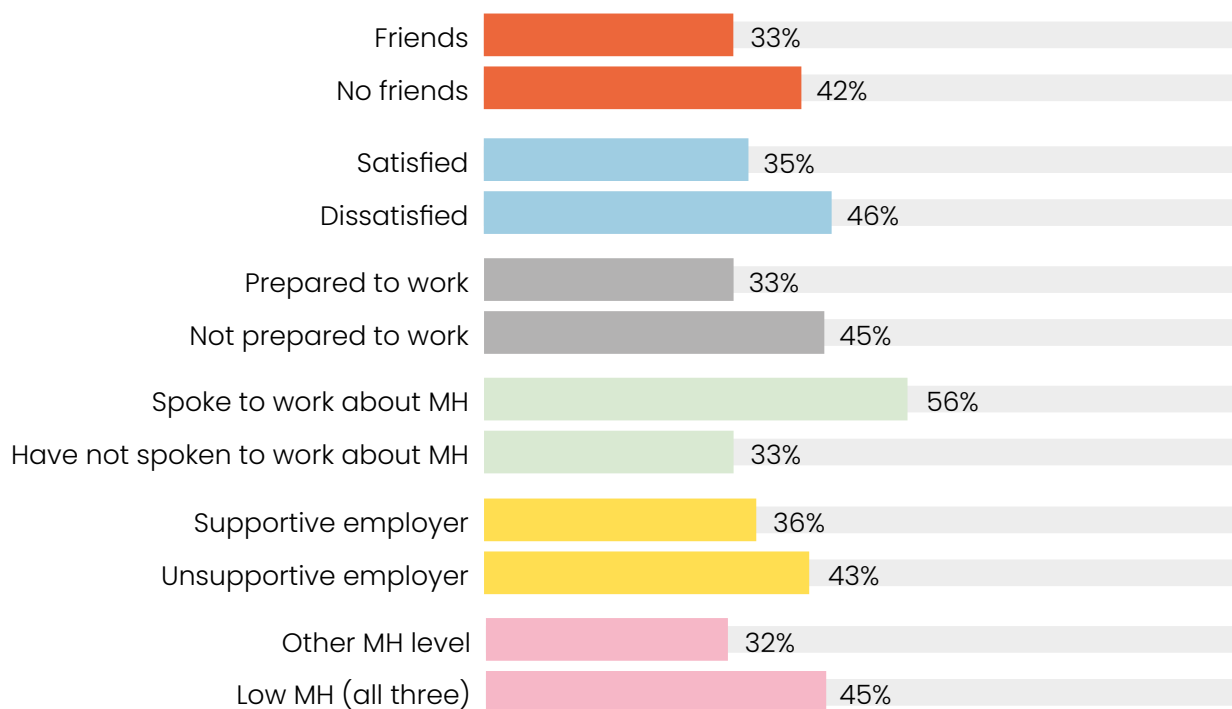
Gen Z, our respondents' age group, expect more from working life than financial reward and career progression, though money worries in themselves are a challenge to MH.

Post-pandemic, graduate respondents reporting depression and anxiety have risen from 3 in 5 (59%) in 2022 to 2 in 3 (64%) in 2023. Unemployed graduate respondents are particularly affected in 2023 (68%), compared with employed graduates (61%). Despite the strong jobs market and the employer investment in recruiting, training and retaining employees:

- 1 in 10 (11%) student respondents indicated that they never worried about finding a graduate job

- fewer than 2 in 5 (37%) respondents now in work never felt insecure about their job

- 1 in 10 (10%) worried about losing their job daily

- 1 in 8 (12%) worried about losing their job on a weekly basis.

Even after a weekend or a holiday break only 1 in 3 (33%) could say they never worry about returning to work after time off, with 1 in 4 (24%) saying they worry once or twice a year. It's noteworthy that worrying about returning to work after a weekend or holiday affects 43% of employed graduates either daily, weekly or monthly and 67% respondents with low MH scores acknowledged this as an issue.

Prepared for work?

While the move from student life into work is known as a challenging time, overall close to 2 in 3 (62%) graduate respondents feel they were somewhat or completely prepared for the realities of working life, a rise from Cibyl's previous studies (59% in 2021, 60% in 2022).
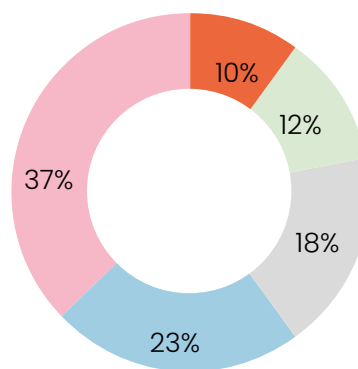
Around 1 in 4 (25%) agree they were unprepared and the remaining 3 in 20 (14%) feel they were neither prepared nor unprepared, which is a fall from previous studies (28% in 2021, 27% in 2022). Black respondents were best prepared (70%) along with those from low socio-economic backgrounds (67%). Respondents from high socio-economic backgrounds, or who are LGBTQ+, were least likely to feel prepared (56% and 54% respectively). In a separate study Cibyl found that LGBTQ+ respondents who had previously come out often go back into the closet when they start work.

Worrying about finding a graduate job
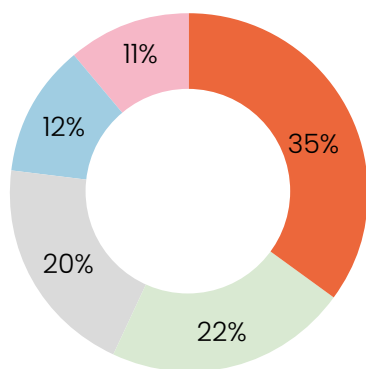
- 35% Daily
- 22% Weekly
- 20% Monthly
- 12% Once or twice a year
- 11% Never

Feeling insecure at work, like you could lose your job at any moment

- 10% Daily
- 12% Weekly
- 18% Monthly
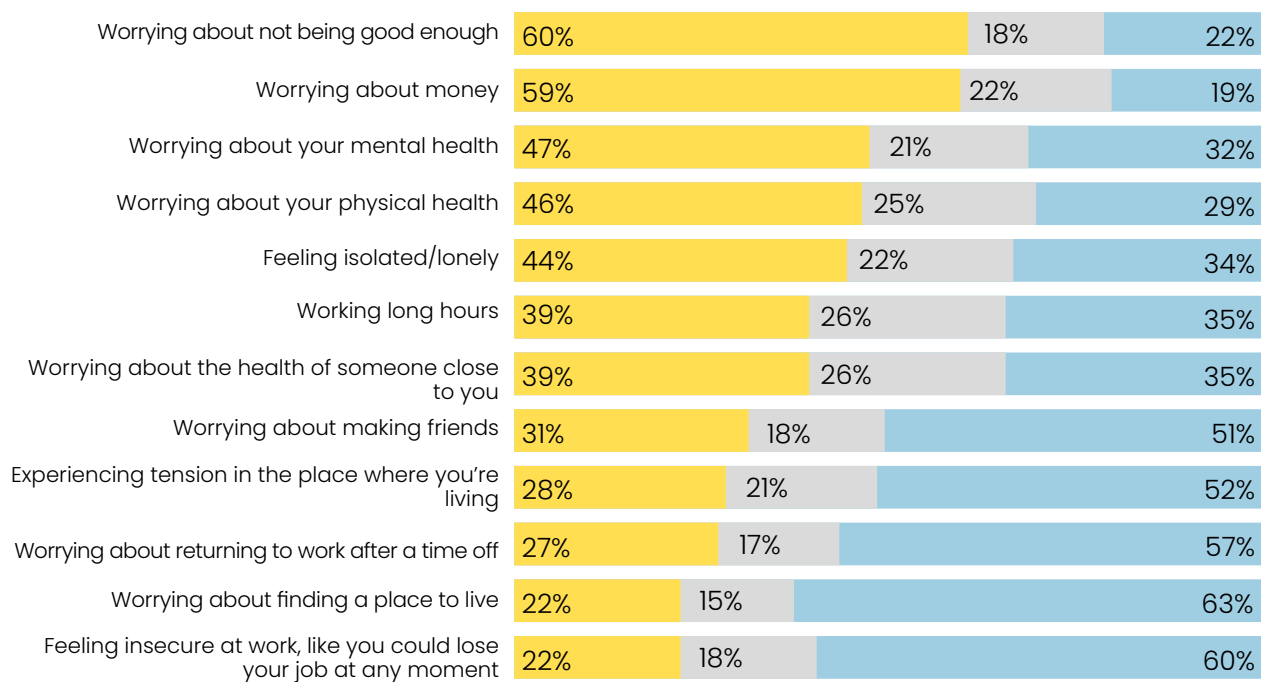- 23% Once or twice a year
- 37% Never

Legend: Daily · Weekly · Monthly · Once or twice a year · Never

Graduate worries and negative experiences

	Frequently	Sometimes	Never
Worrying about not being good enough	60%	18%	22%
Worrying about money	59%	22%	19%
Worrying about your mental health	47%	21%	32%
Worrying about your physical health	46%	25%	29%
Feeling isolated/lonely	44%	22%	34%
Working long hours	39%	26%	35%
Worrying about the health of someone close to you	39%	26%	35%
Worrying about making friends	31%	18%	51%
Experiencing tension in the place where you're living	28%	21%	52%
Worrying about returning to work after a time off	27%	17%	57%
Worrying about finding a place to live	22%	15%	63%
Feeling insecure at work, like you could lose your job at any moment	22%	18%	60%

Base n = 645 to 1,140

Legend: Frequently · Sometimes · Never

Prepared for working life

58%
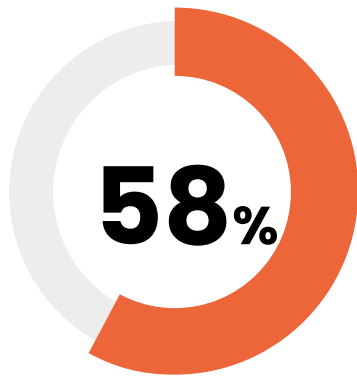
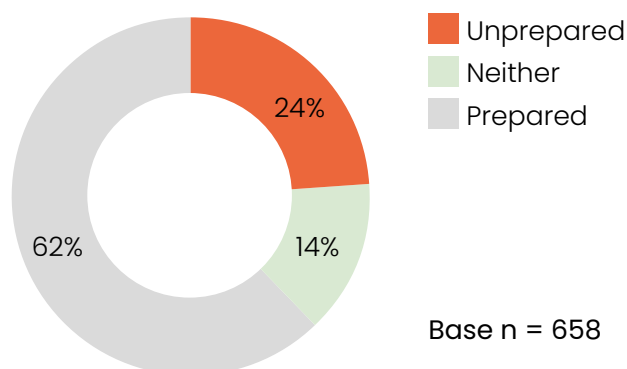2021 research year

59%
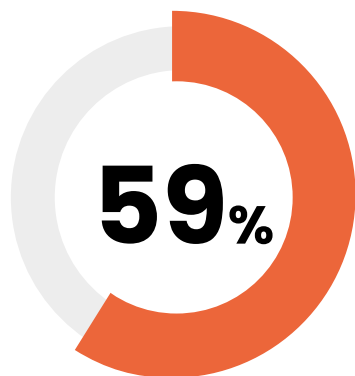
2022 research year

62%
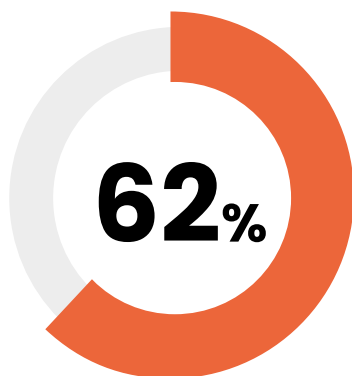
2023 research year

Another Cibyl study established that environment and sustainability are important to more than 9 in 10 students, while 1 in 5 students think about environmental sustainability in graduate career engagement. When we asked respondents what MH support they would like their future/current employer to provide, general wellbeing offerings, such as gym memberships and private health benefits (often seen as a nice-to-have as part of an employment package regardless of MH) featured on nearly 3 in 5 respondents' wishlists. However, under half (44%) of 2023's graduate respondents value healthy working practices (such as no emails after working hours), a decrease from 47% in 2022 (this question was not part of 2021's study). Around 2 in 5 (38%) graduates want their employers, present or future, to provide counselling services (the same result was found among 2022's respondents). Least engaging among our list of support practices were employees sharing personal MH stories (8% respondents valued these), webinars on MH and wellbeing topics, and celebrating MH awareness days, with only 1 in 10 (9%) graduate respondents saying they would like their future or current employer to offer support services such as these.
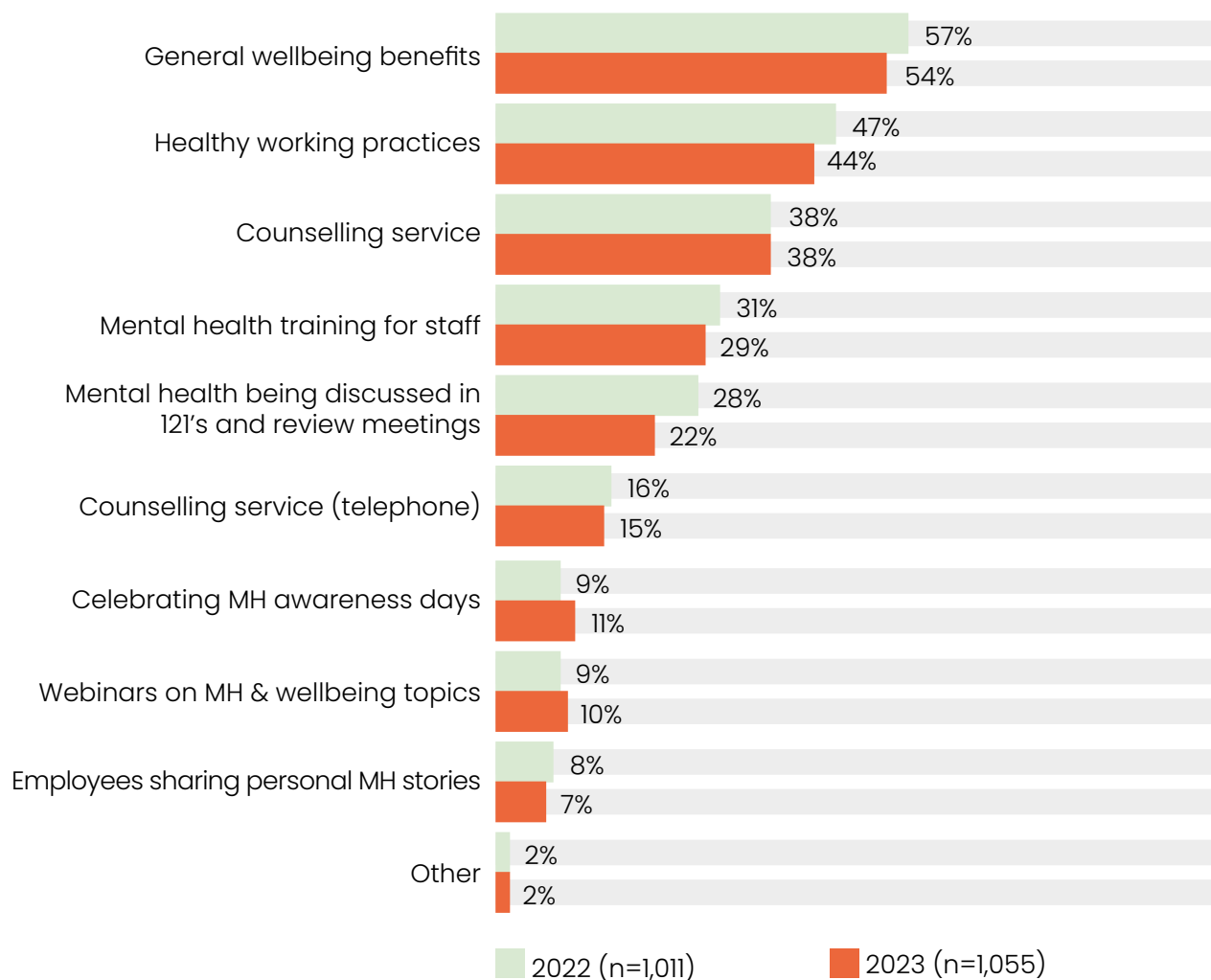
Graduates continue to want practical measures from employers that will help improve mental wellbeing.

How well prepared were you for the realities of working life?

- Unprepared
- Neither
- Prepared

24%

14%

62%

Base n = 658

Future/current employer mental health support [graduates]

	2022	2023
General wellbeing benefits	57%	54%
Healthy working practices	47%	44%
Counselling service	38%	38%
Mental health training for staff	31%	29%
Mental health being discussed in 121's and review meetings	28%	22%
Counselling service (telephone)	16%	15%
Celebrating MH awareness days	9%	11%
Webinars on MH & wellbeing topics	9%	10%
Employees sharing personal MH stories	8%	7%
Other	2%	2%

2022 (n=1,011)   2023 (n=1,055)

Why employers should promote good MH

In June 2023 the **Chartered Institute of Personnel and Development (CIPD)** stated that MH issues affect 1 in 4 people at some point in their lives and have a significant impact on employee wellbeing.

Employers – even those who have trained MH first-aiders and HR staff well-versed in MH support – should note the following findings from our survey:

Who do you speak to about MH difficulties?

Category	Employed grads (n=509)	Unemployed grads (n=355)
Friend, partner or a colleague	54%	56%
Family member	42%	39%
External provider (eg GP, therapist)	37%	37%
Uni's medical/mental health services	22%	26%
Academic/teaching staff	13%	16%
Telephone, text or online service	9%	10%
Senior colleague at work	7%	0%
HR at work	4%	0%
Someone else	1%	1%
Haven't sought advice	16%	20%
Prefer not to say	3%	4%

Employed grads (n=509) Unemployed grads (n=355)

In particular:

- only 7% of our employed graduate respondents experiencing MH difficulties speak to a senior colleague at work

- only 4% speak to HR at work.

Among that figure, employees who have an MH disability (21%) and/or other disability (26%), or who are LGBTQ+ (14%) are the most likely to do this, while Black employees or those from high socio-economic backgrounds are least likely to speak to HR or a senior colleague (5%).

Instead:

- more than half of graduate respondents, both employed (54%) and unemployed (56%), turn to friends, partners and colleagues when experiencing MH difficulties.

- around 2 in 5 graduate respondents, employed and unemployed, speak to family members.

- a difficult to reach 1 in 6 (16%) employed graduates and 1 in 5 (20%) unemployed graduates have not sought any advice about their MH difficulties.

- around 1 in 10 of both unemployed and employed graduates with MH difficulties use telephone, text or online services.

At the lowest ebb, rates of suicidal thoughts and feelings are similar across graduates and student respondents although 3 in 4 (72%) of our employed graduates say they have not acted on these thoughts or feelings (falling to 2 in 3 students and 3 in 5 unemployed graduates). Among employed graduates, 1 in 8 (12%) have had a plan to take their own life while 1 in 100 of our respondents preferred not to say. Among unemployed graduates these figures stood at 1 in 6 (17%) and 1 in 25 (4%).

Worryingly, around 1 in 7 (14%) of employed graduate respondents have attempted to take their own life, a figure that rises to 1 in 6 (16%) students and 1 in 5 (20%) unemployed graduates.
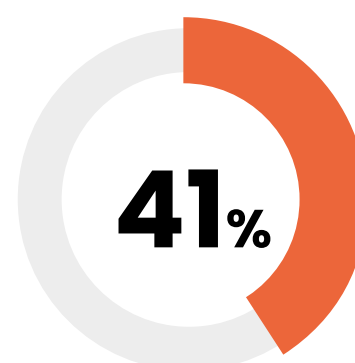
Experienced suicidal thoughts

42%
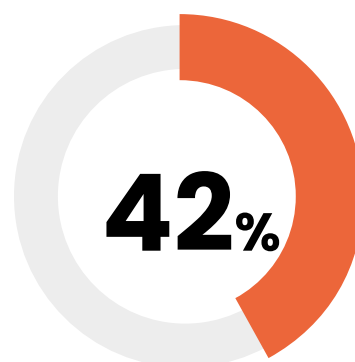
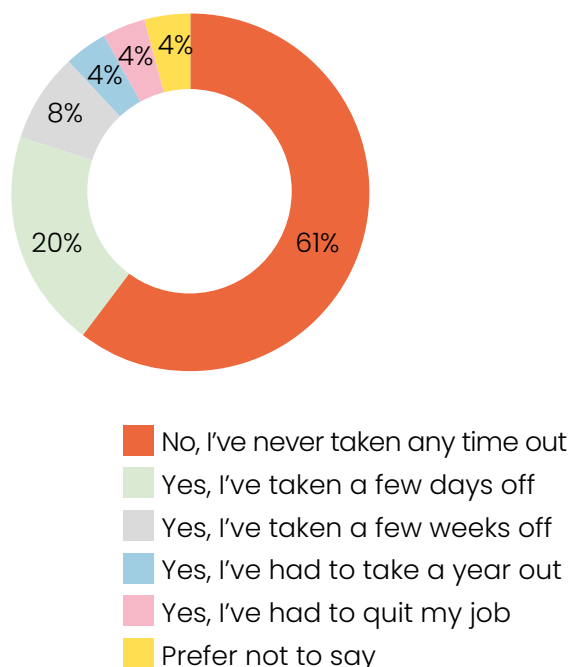Students (n=8,841)

41%
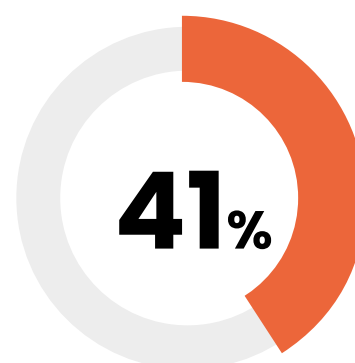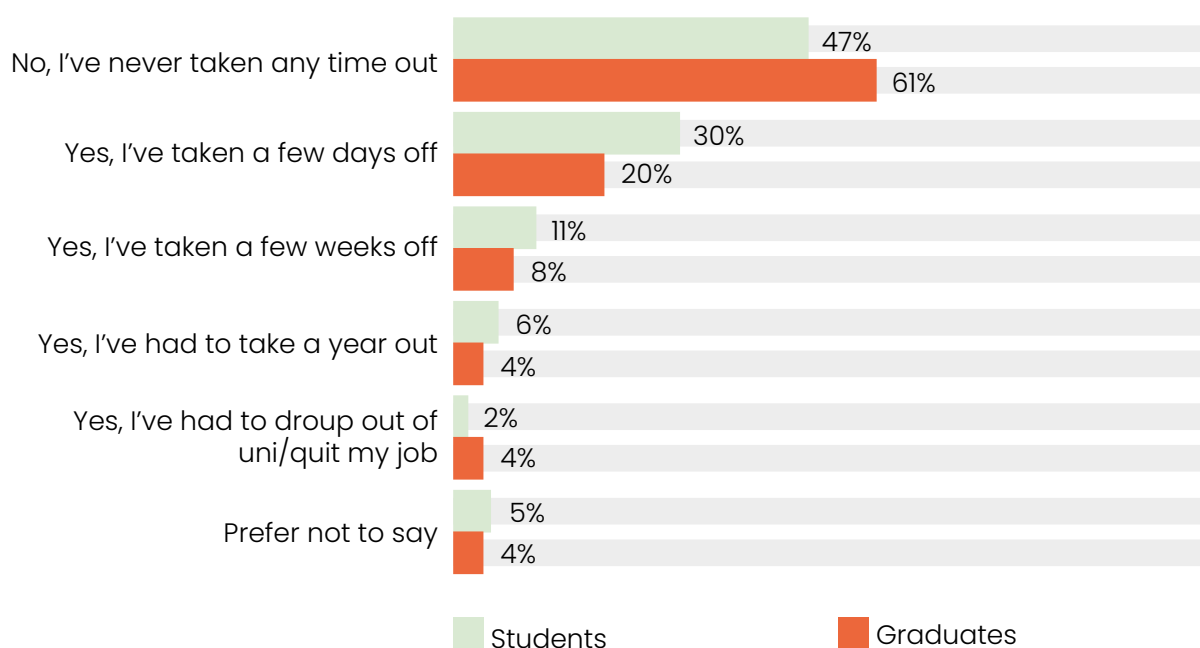
Employed grads (n=518)

41%

Unemployed grads (n=414)

Most graduates have not taken time off work and are generally less likely to take time off than students.

Time off for mental health

- No, I've never taken any time out
- Yes, I've taken a few days off
- Yes, I've taken a few weeks off
- Yes, I've had to take a year out
- Yes, I've had to quit my job
- Prefer not to say

Base n = 491

Time off for mental health

	Students	Graduates
No, I've never taken any time out	47%	61%
Yes, I've taken a few days off	30%	20%
Yes, I've taken a few weeks off	11%	8%
Yes, I've had to take a year out	6%	4%
Yes, I've had to droup out of uni/quit my job	2%	4%
Prefer not to say	5%	4%

How poor MH affects employees

It is interesting to note that among graduate respondents reporting MH challenges:

- 3 in 5 (61%) have never taken any time off as a direct result of their MH

- 1 in 5 (20%) have taken a few days off

- 1 in 12 (8%) have taken a few weeks off

- 1 in 25 (4%) have either had to take a year out of work, or have quit their job altogether as a direct result of their MH difficulties.

Students with MH challenges manage their resilience differently from those in work:

- under half (47%) have never taken time out as a result

- 3 in 10 (30%) say they have taken a few days off

- 1 in 10 (11%) acknowledge they have taken a few weeks off.

Among the different demographics (see graphic on page 83) coping with MH challenges:

- 1 in 2 (49%) LGBTQ+ graduates have taken time off work as a direct result

- 2 in 5 (43%) graduates from a low socio-economic background have had to take time off.

Those who speak to someone at work are the most likely respondents with MH challenges to have taken time off (56%), which should be an indicator that they are being encouraged to rest and recuperate by employers, rather than only speaking to a colleague to explain why they have a poor attendance record.

Making friends at work vs making friends at uni
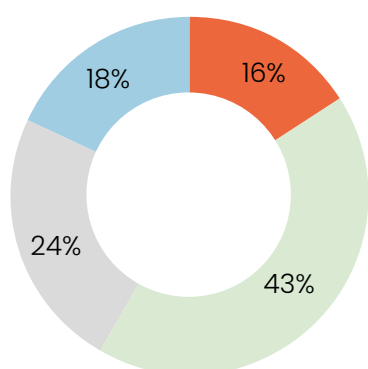
- 16% It's easier to make friends at work
- 43% It's easier to make friends at university
- 24% It has been easy in both situations
- 18% I haven't found it easy in either situation

Base n = 655

The importance of friendships

This year, graduates are more likely than previous years' respondents to report having a group of friends at work.

As new work patterns have been established, many employers have set rules around how many days must be spent in a workplace or office, partly to counter the isolation some employees feel working from home, while still allowing those who want to work flexibly to be accommodated. However, there has been a trend for employers to cut back on expensive office space and instead operate desk sharing/booking systems. Having a full and buzzing office every weekday may be a thing of the past. In our 2021 and 2022 studies, 1 in 4 (25% and 24% respectively) respondents did not feel connected to their colleagues. This has fallen to 1 in 5 (19%) in 2023, and where fewer than half (46%) of 2021's respondents agreed they felt connected to colleagues, in 2022 and 2023 more than half (53% and 54% respectively) felt connected.

Unlike starting university, where there are multiple opportunities to create friendships and new bonds – freshers' days, flat-sharing, studying alongside course mates and joining societies or sports activities – work offers a single hub. And good friendships take time to establish and build. Since 3 in 4 (75%) of our respondents graduated this year, and the remaining 1 in 4 (25%) graduated last year, it should be less surprising that 1 in 4 (26%) of 2023's graduate respondents say they have no friends at work, (this compares with with 2 in 5 in 2021 (41%) and 2022 (39%). But employers should note that graduates who have a low sense of belonging, because they have no friends at work, feel dissatisfied with work or did not feel properly prepared for work, are most likely to take time off because of MH difficulties (see graphic). This year we asked graduates how making friends at work compared with making friends at uni:

- more than 8 in 20 (43%) said it had been easier to make friends at uni

- around 3 in 20 (16%) said it had been easier at work

- almost 5 in 20 (24%) found making friends easy in both situations

- close to 4 in 20 (18%) said it wasn't easy in either situation.

Belonging to friendship groups

- Large group of friends
- Small group of friends
- No friends

Base n = 507
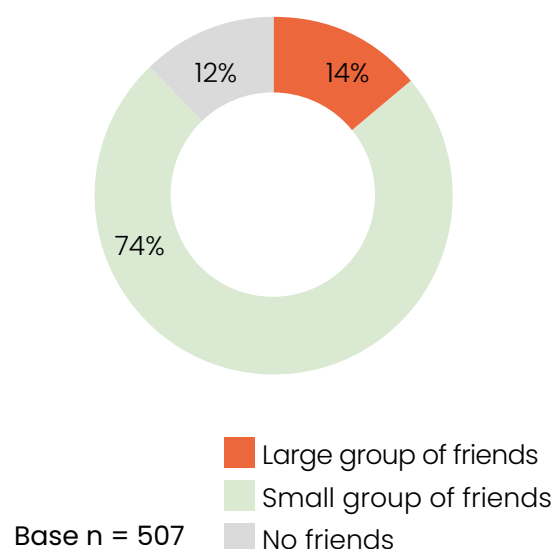
Year-on-year figures should be contextualised against the extraordinary circumstances of 2020-2022, when many graduates had to navigate virtual interviews and assessment days followed by online inductions and working from home, as COVID-19 lockdowns demanded. There were few opportunities to meet other graduates and potential future colleagues or experienced employees in person. For many young people returning to a family house and a shared bedroom or kitchen table, or stuck with uni workspaces were less than ideal. Graduates reported feeling isolated, finding it difficult to raise queries and ask for help, and struggling to establish a working rapport or find friends among other employees.

Taken time off by belonging metrics

42%
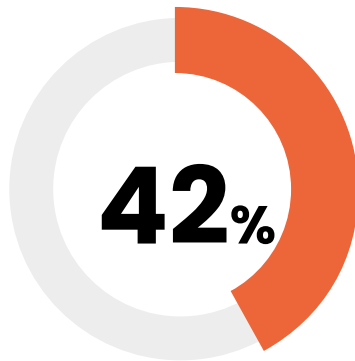
Those with no friends

33%
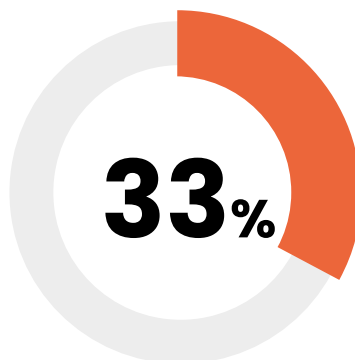
Those with friends

1 in 5

graduate respondents do not feel senior leaders are human, open and cared about the MH and emotional wellbeing of their graduate recruits.

In last year's report, a spokesperson from our partner Accenture said they were heartened to see that across employers, 53% of respondents felt their senior leaders were human, open and cared about the MH and emotional wellbeing of their graduate recruits. That's a similar percentage to this year's respondents (52%). But there are a number of trends among respondents that should set alarm bells ringing:

- After dropping from 25% in 2021 to 18% in 2022, the proportion of respondents who do not feel senior leaders are human, open and cared about the MH and emotional wellbeing of their graduate recruits has risen to 21% in 2023.

- The number of respondents saying their MH has declined since starting work is above 2021 levels, (26% in 2021, 23% in 2022, 27% in 2023).

There is no room for complacency among HR or senior executives and they need to ensure they are engaging young and new employees and targeting their MH and wellbeing practices accordingly.

What employers do seem to be getting right, on the plus side, is that more than half (55%) of 2023's graduate respondents feel empowered to work in a way that helps them maintain good MH, a rise from 48% in 2022, and 43% in 2021. There there has also been an annual fall in the number of graduates who disagree with the statement, dropping from 1 in 4 (25%) in 2021, to 1 in 5 (21%) in 2022 to 1 in 6 (17%) in 2023.

Employer support [graduates]

	Agree	Neutral	Disagree	Don't know
I feel empowered to work in a way that helps me maintain good MH	55%	21%	17%	6%
I feel connected with my colleagues	54%	23%	19%	5%
The senior leaders in my current company are human, open & care about my MH/emotional wellbeing	52%	18%	21%	9%
I know where to go to get help for myself or a friend/colleague who is experiencing MH difficulties	51%	19%	23%	6%
My current employer is doing everything possible to support my mental wellbeing at the moment	41%	24%	23%	12%

■ Agree ■ Neutral ■ Disagree ■ Don't know

Methodology

For this year's survey, Cibyl contacted students and recent graduates from 140+ universities across the UK, using Cibyl's database, university partnerships, and access to more than 1.5 million students.

The survey was conducted by Cibyl online between December 2022 and February 2023 and was completed by 12,796 respondents (89% current students and 11% graduates of the last three years). 42% of our respondents were international students.

Our data was weighted by gender and university to ensure the results were representative of the national student body.

Within our sample...
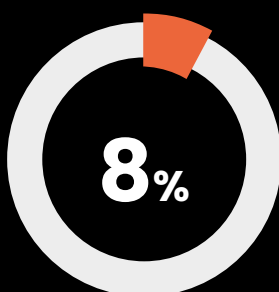
8%
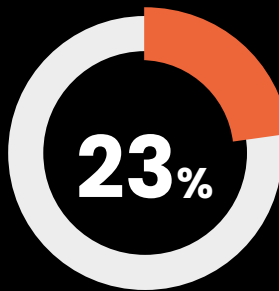of respondents were of mixed ethnic origin and other ethnic minority backgrounds
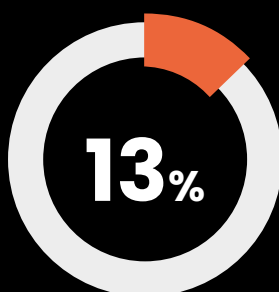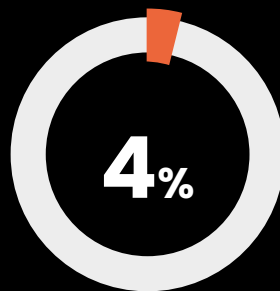
13%
of respondents were Black
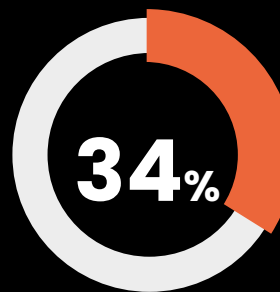
34%
of respondents were Asian
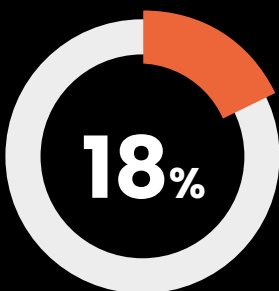
18%
identified as LGBTQ+

23%
identified as having a long-term illness or disability

4%
were from lower socio-economic groups

University Mental Health Charter

The University Mental Health Charter was developed by **Student Minds** and a group of higher education organisations, supported by the Office for Students and a grant from the University Partnerships Programme (UPP) Foundation.

Following discussions with 360 students and staff at 181 universities across the UK, plus the results of an online survey of 2,274 staff and students, the Charter aims to address the gap in care of students with MH challenges and in particular to prevent suicides among the student population.

Although developed separately and independently, both the Cibyl report and the University Mental Health Charter share other goals: to improve MH and promote wellbeing, to banish stigma, and to maintain and develop the dialogue between students, university staff and MH supporters and practitioners.

The charter framework has four core themes:

Learn

• Understanding students' needs as they transition into university, particularly in their first year

• Maintaining a holistic approach to students' development throughout their time at the university, including periods of absence, placements, and beyond into career or further studies

• Ensuring the learning environment is supportive of good MH.

Support

• Establishing services that are well resourced, safe, effective and accessible to all students, regardless of background, culture or disability

• Assessing support services' effectiveness and responsiveness to immediate, long-term and future needs

• Enabling access and reducing risk through collaboration between the university, students, families, NHS and other support services to prevent serious harm and suicide while maximising choice and student autonomy.

Work

• Addressing the MH needs of university employees by enabling staff to adopt and maintain healthy lifestyles and workplace behaviours.

Live

• Building a university culture and environment that promotes the positive MH of all members of the community

• Making it safe for students and staff to raise concerns and offering access to a range of helpful resources and interventions

• Prioritising MH as important, breaking down barriers and improving messaging and role modelling from leadership, making it easier to disclose poor MH.

Student Minds continues to encourage students to share their experiences and create positive change. The charity's **student-led improvement tool** was co-developed with a panel of students, and builds on the domains of the University Mental Health Charter Framework, empowering students to lead positive change at their own institution.

About

About Cibyl

Cibyl is a leading market research consultancy firm in the UK and Ireland. We provide employers, universities, professional bodies and researchers with unparalleled insights into students' career thinking.

Our work supports attraction and hiring, including diversity, equity and inclusion, brand, student engagement, wellbeing, learning and development, talent management and career service planning. Working with a pool of 1.5 million schools and university students and graduates from all year groups and regions, we provide some of the largest and most representative samples in the UK and Ireland. Cibyl is part of Group GTI.

Visit us at **www.cibyl.com**

Acknowledgements

Authors & contributors

Lisa Marris, Head of Research, Cibyl

Rachel Johnson, Business Director – Cibyl UK & Ireland

Priya Patel, Research Analyst, Cibyl

Maya Little, Design

Sandra Kessell, Writer and Editor

Joan Moore, Accenture

Claire Fox, Imperial College London

John de Pury, Universities UK

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