Research Article



The impact of the self-empowerment journey in supporting students' transition: A psychoeducational solution-focused process to support students in the transition to higher education

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Foundation courses at Level 3 tend to attract students from non-traditional backgrounds who find transitioning to Higher Education difficult and challenging. Students are encouraged to seek support through the University services which are often generic and unable to offer individual support. The Self-Empowerment Journey (the SEJ) is a novel meditative process of self-enquiry, which offers students the ability to respond positively to perceived difficult situations as they arise. The aim of this study was to evaluate the effectiveness and impact of the SEJ process, in supporting students with their mental health and wellbeing, during their transition into Higher Education. Data was collected as part of a pilot, final year project and subsequent larger study comprising of 350 Foundation year students within the Faculty of Science, Engineering and Computing. The results from our studies indicate the SEJ has improved the students experience during their transitional year. Interestingly, workload, course success and progression were of the most concern amongst the Foundation year students. Overall, this study has offered an insight into the effectiveness of the SEJ, as a preventative measure empowering the individual to better self-manage themselves allowing them to thrive rather than survive during their University journey.

Keywords: Transition, self-empowerment, mental wellbeing, transferable skill, student support, the SEJ

1. Introduction

According to the World Health Organisation [WHO], mental health has become a leading cause of the overall disease burden worldwide and is a priority for public health prevention (Ebert et al., 2019). Mental illness is particularly prevalent in young people aged 16 - 24 years old, with several studies reporting that university students often face new challenges for the first time. Over the last decade, there has been a steady increase in cases of mental illnesses and increased reports of suicides due to long waiting lists for access to wellbeing services (Galante et al., 2018; O'Driscoll et al., 2019; Royal College of Psychiatrists, 2011). In 2018, the UK government have called upon universities to improve their mental health services for students (Donelan & Dorries, 2020; Hernamdez-Torrano et al., 2020).

Studies have also been carried out to understand how significant the transition into higher education and the change in lifestyle and responsibility affect students' mental health. It has been reported that the transition into university can induce stress caused by a variety of factors, including moving away from home, financial strains, social change and increasing workloads (Hernández-Torrano et al., 2020). The study conducted by (Gallagher et al., 2014) argues that the stress perceived by students in an undergraduate pharmacy program is comparable to that of a similar sample of US students at the same progression point in a graduate professional degree. Although female students appear to suffer from higher stress levels in general, the overall degree of stress remains relatively unchanged as these students progress through the program of study.

2.1. Background

Many universities are now working towards providing more mental health and wellbeing services such as counselling, drop-in sessions, and stress management. Additionally, teaching coping mechanisms/self-supporting tools for stress and anxiety can significantly decrease preventable deaths, avoid the consequential emotional effects, and improve academic success (Galante et al., 2018; O'Driscoll et al., 2019). Mindfulness training (O'Driscoll et al., 2019; Royal College of Psychiatrists, 2011) to increase resilience and reduce stress in university students (Galante et al., 2018; Reavleya, 2017) and meditation workshops are also offered (Van der Riet, 2018). Some academic institutions have also started to invest in moving counselling and mental health support online and meditation mobile applications such as 'Togetherall^{©'} and 'Fika^{©'} (Kings College London, 2020). A study on the use of the meditation mobile app 'Calm' similarly suggests regular meditation, around 40 minutes a week for 11 weeks, can reduce stress in university students and improve self-compassion (Lyzwinski et al., 2019). Moreover, Zollars et al., 2019 reported using the meditation app 'Headspace^{TM''} to improve participants' overall mental health uniformly and independently.

However, despite being aware of these services, research has shown that a large population of students will still hesitate to take advantage of this support due to their fear of stigma (Bryant et al., 2021; Pereira et al., 2019). Additionally, studies have demonstrated that Black and Asian students tend to report greater stigma about mental health and help-seeking (Bryant et al., 2021; Eisenberg et al., 2009). A higher rate of negative help-seeking attitudes has been associated with individuals from minority ethnic groups, such as Black and Asian communities, who report lower rates of professional help-seeking (Bryant et al., 2021).

Several studies have effectively demonstrated positive impacts following the intervention, utilising an individualised toolkit, including the Self-Regulation Empowerment Program [SREP] (Cleary et al., 2017). Moreover, by enabling students to take ownership of their health and wellbeing, stress and burnout can be mitigated, and most importantly, resilience is improved (Croke, 2020).

Supporting evidence from the study on the effect of training on different aspects of mental health showed that life skills training improves elementary school students' mental health and self-esteem (Rahmani, 2019). It was also reported that " ... The results of this study showed that the life skills training program had improved participants' mental health. Students had better feelings about themselves and had fewer interpersonal and intrapersonal problems when they knew how to cope with their situation "(Savoji et al., 2013).

For the Higher Education settings, reviews located a large body of evidence on specific interventions such as mindfulness and cognitive-behavioural interventions. This evidence suggests that these interventions can effectively reduce common mental health difficulties in the higher education student body. Evidence on other types of intervention was, however, limited (Worsley et al., 2020). This is the very reason we have decided to integrate the SEJ to fill in this gap to support students to stay mentally healthy during their life at university, as an essential and necessary life skill.

The Self Empowerment Journey [SEJ] is a psychoeducational solution-focused process that supports individuals in staying mentally healthy and reaching their full potential. This meditative process of self-enquiry follows a structured framework, supporting both experienced and non-experienced meditators. The SEJ framework allows the mind to settle naturally as the student works through the process of questioning their stressful and fearful thoughts, at the same time enabling them to see their own physiological and psychological changes. The outcome of this creates an openness within the student, enabling them to see life situations from a new and truthful perspective. Similarly, it has been claimed that "Heartful Living is our unique cardiac wellness program based on self-inquiry. This meditative system has helped reduce cardiac symptoms, procedures, and medicines, all while enhancing confidence and optimism." (Chockalingam et al.,2021).

Having the SEJ as a life skill gives students the ability to respond appropriately to difficult situations as they arise; they can, therefore, adapt quickly and easily to whatever is presented in the moment. The SEJ encourages personal responsibility as students find their own answers to stressful situations. They gain in-depth insights and the skills required to question limiting stressful thoughts, which trigger fearful emotions and repetitive limiting reactions and behaviours. It enables them to be aware of their thoughts and emotions but not react to them, causing them to respond with discernment and awareness.

In Higher Education, not only is it of value to support students during the transition, related improvement in student retention and progression is of utmost importance as it not only reputationally affects universities but, more importantly, has advantages for improving student employability and improving the social economy (Wilcox et al., 2005). There are several factors which can act as barriers to retention and progression and one of these include dispositional factors, which include self-confidence, attitudes, and beliefs (Jancey & Burns 2013).

Rather than offering post-stress treatment, it would seem more effective to have a preventative and individualised tool that students can use before the symptoms become unmanageable or lifethreatening. This would also alleviate students' unwillingness to address their mental health and wellbeing due to the perceived stigma.

In this study, the aim was to evaluate the effectiveness and impact of the SEJ process in supporting students with their mental health and wellbeing during their transition into Higher Education. Since there has not been any previous research work for the SEJ, and there is no direct relevant literature, it was decided to use this study as an intervention tool to support students and for this research to be conducted as an investigative study.

2. Method

2.1. Overview

Data was collected from both a pilot and final year project in 2019 and 2020 on Foundation Year students within the Faculty of Science, Engineering and Computing [SEC]. A larger study was subsequently carried out to understand the impact of the SEJ on these students. Students were asked to complete a questionnaire three times during the study (Ethic approved and following consent), which measured the scale of their concerns relating to their studies and general wellbeing. All answers were anonymised, and all those who had agreed to participate were incorporated into this study.

2.2. Study Design and Participants

Before the study began, ethics approval was granted by the Kingston University Centre for Higher Education Research and Practice Research Ethics Committee. The adopted study design was experimental, as we did not have any previous study base to build from regarding the impact of the SEJ in supporting students. The Level 3 Foundation Year cohort comprised students from various academic and demographic backgrounds with diverse needs. The population group was over 400+, which provided an opportunity to obtain both qualitative and quantitative data, respectively.

2.3. Pilot Study

In 2019, a pilot study of the survey was conducted on six participants in Level 3 Pharmacy Foundation Year in a focus group for purposes of validation and reliability of the study. The preliminary study consisted of a sample of 64 Level 3 Foundation Year students on the Pharmacy pathway, of which survey data from 40 students were collected. The participants were also invited to the focus group via email, which was facilitated by a project student. The discussions were audio recorded. In the pilot study, there were 72.5 % female and 25% male students. Ninety per cent of the participants were aged between 18-22 years old. Furthermore, 67.5% were from a Black and Asian Minority Ethnic [BAME] background, and 54% were commuters.

The SEJ process was piloted to support students at the Foundation (Level 3) and undergraduate degree level (Level 4) to support their mental and general wellbeing, ensure a smooth transition, provide them with tools to empower themselves and enable them to reach their full potential. These courses offer a route into a Master of Pharmacy (MPharm) degree, and these students tend to be students that have entered higher education through non-traditional routes, mature students (e.g. Foundation Pharmacy – average 10% mature students) and/or the first generation students. Therefore, due to the varying levels of intersectionality that exist amongst these student groups, self-belief is often weakened (Nairz-Wirth, 2015).

2.4. Main Study

The main study, conducted in September - November 2020, consisted of a sample of 350 Level 3 Foundation Year students at Kingston University recruited to participate in the study. The group of students comprised 60 students in the Pharmacy pathway and 290 students in the Science, Engineering and Computing [SEC9 pathway. Of these, 265 respondents provided written consent for this study.

2.5. Questionnaire

The questionnaire consisted of 10 questions, and students were asked to rate their level of concern in order of severity (from 1 to 10, with 1 being not worried and 10 being very worried). In the following areas: starting university, meeting new people, fitting in, leaving home, independent living, finances, workload, course success, degree progression and work-life balance. The students could articulate any specific worries and/or concerns within the comments section. MS Forms were used as an online survey tool to gather the questionnaire responses.

2.6. Questionnaire Distribution

Before the survey was distributed, a participant information sheet and introductory podcast were sent electronically via university email, notifying students of the study. Microsoft [MS] Forms were used to present the questions and scale, and a link to the survey was sent to the Level 3 students via the university Virtual Learning Environment [VLE], Canvas, and completed online. The students were required to complete the same questionnaire at three different stages: the first at least one week before the SEJ online training, the second immediately after the online training and the third at least two weeks after attending the SEJ workshop.

2.7. Implementation of the SEJ Programme

The SEJ training consisted of two stages: stage 1 training consisted of a pre-recorded two-hour long video and exercises covering theory. Stage 2 was an online two-hour workshop delivered by an SEJ expert, enabling students to practice what they have learnt, i.e., applying the SEJ process. The two-hour online workshops were delivered with up to 35 students in each session.

2.8. Data Analysis

The survey responses from MS Forms were exported as an Excel spreadsheet. The information of the participants who did not wish to participate in the study was removed. The survey data of the remaining participants were anonymised and coded numerically to maintain the confidentiality of the respondents.

As part of the pilot study, all quantitative data collected were entered and coded into IBM SPSS Statistics v23. This data was then analysed using descriptive frequencies to allow for simpler data interpretation. T-test was used to determine statistically significant relationships (p-value) between survey questions focused on the effectiveness of the SEJ process and overall mental and emotional wellbeing and engagement.

3. Results

3.1. Response Rate

51% of the Foundation Year students who responded (n = 207) answered the questionnaire before the SEJ training (This was taken as the baseline). The participation rates for the second and third survey responses were low. The questionnaire response rate reduced to 13 % (n = 44) and 4 % (n = 14) after stage 1 and stage 2, respectively. The response rate of participants who answered all three questionnaires as part of this study was 4 % (n = 14).

The small number of returns to the questionnaire is typically in line with the levels of participation for a survey of this type at universities (Mulrooney et al., 2020). 81% (n = 167) of the responding participants were from the SEC Foundation Year course, and 19% (n = 40) were from the Pharmacy Foundation Year program.

3.2. Starting University, Personal Wellbeing, and University Careers

Three important themes from the questionnaire responses were observed as a result of our study, namely starting university, personal wellbeing, and university careers (see Figure 1).

Figure 1

Three main themes of the SEJ questionnaire



Starting university, personal wellbeing and university career were measured by order of concern, from 1 to 10, with 1 being not worried to 10 being very worried. The lower the score, the less worried students felt.

The mean baseline score for starting university before completing the SEJ training was $5.2 \pm SD$ 1.41. However, after stages 1 (learning the theory via pre-recorded video) and 2 (putting into practice the SEJ Process), the mean scores reduced to $3.2 \pm SD$ 2.08 and 2.6 \pm SD1.82, respectively. (see Figure 2). The lower score indicates that the students felt less concerned about starting university after the SEJ intervention.

The mean baseline scores for personal wellbeing before the SEJ training and following the completion of stages 1 (theory delivered via pre-recorded video) and stage 2 (post the SEJ Workshop where they practised the SEJ) were $3.0 \pm \text{SD1.04}$, $2.85 \pm \text{SD1.00}$ and $2.62 \pm \text{SD}$ 0.76, respectively (see Figure 3). The lower score indicates that the students felt less concerned about starting university after the SEJ intervention.

The mean baseline scores for a university career before the SEJ training and following the completion of stage 1 (theory delivered via pre-recorded video) and stage 2 (post the SEJ Workshop where they practised the SEJ) were $5.48\pm$ SD 0.90, $4.25\pm$ SD 0.87 and $4.21\pm$ SD 0.72, respectively. In every question, the score improved (i.e. scores showing fewer concerns) after the workshop compared to the baseline (see Figure 4).





Figure 3 Mean score change personal wellbeing



Figure 4





Question 1 ('Are you worried about starting university?') showed a change in score from 5.2 at baseline (before they learnt the SEJ Process) to 2.6 after the 2-part training (see Figure 5). The *t*-test result of a *p*-value of .002 revealed that it is highly likely that the SEJ intervention has impacted students during this transitional period.

Figure 5

Score response at baseline and after SEJ workshop attendance for Q1



The transition to and first year at university represents critical times when friendships are developed. Thomas et al. (2020) explored the factors that predict loneliness in the first year of university. A sense of community and higher levels of 'social capital' were significantly associated with lower levels of loneliness. Question 8 ('Are you worried about passing the course?') showed a change in score from 6.3 (baseline) to 4.1 after the training (see Figure 6); the *p*-value was .003.





Other studies indicated that high levels of perceived stress caused by exam and coursework pressure were positively associated with poor mental health and lack of wellbeing (Boulton et al., 2019; Denovan et al., 2017; Mahadevan et al., 2010).

In Figure 7 below, the blue bar indicates the score at the baseline as before the SEJ intervention, and the orange bar shows the score post-intervention after the SEJ training for all ten questions. The smaller the overall bar area, the better the score and indicates improvement in their score.





Figure 8 *Relative improvement for the ten questions*

Figure 7



Figure 8 shows the relative improvement for the total ten questions. It is clearly seen from both Figures 7 and 8 that the two most significant relative improvements in terms of the perceived change are in questions about starting university and course success.

3.3. Qualitative Data

Additional comments within the questionnaire were the only source of qualitative information available from the group.

Before completing the SEJ training, the main concerns stated by students were related to starting university and making new friends. Comments under the theme of university career mainly related to time management, information overload and academic performance. Some students also perceived that studying at university would have an impact on managing their work-life balance. In terms of personal wellbeing, students living at home stated that living independently was not a major concern for them.

Following the completion of stages 1 and 2, the number of comments from students was reduced; nonetheless, making new friends, managing university workload, navigating study during the COVID-19 pandemic, and lack of confidence became the main concerns of students throughout the three themes: starting university, personal wellbeing and university career.

4. Discussion

Question 1 (starting university) showed a change in score from 5.2 at baseline to 2.6 after the 2-part training (see Figure 5). The t-test result of a *p*-value of 0.002 revealed that it is highly likely that the SEJ intervention has positively impacted students during this transitional period. To explore this postulation, we investigated further any factors that may cause students to experience challenges during the transition to the first year of university. The questions such as fitting in, living independently and financial concerns were also asked.

Other potential stressors, including financial anxieties and accommodation factors, appeared to be less consistently associated with mental health outcomes (Campbell et al., 2022). Out of all the questions asked, Question 8 (course success) showed the most significant reduction in score response (*p*-value .003) in relation to passing the course. Whereby a change in score from 6.3 (baseline) to 4.1 was observed after the SEJ training (see Figure 6). McArthur and others looked at the stress levels of the first year of veterinary medical students. They found that struggling students reported more first-semester homesickness and academic concerns, along with difficulty fitting in with peers and poorer perceived physical health during the second semester (Hafen et al., 2008).

Additionally, workload, course success and progression were of the most concern among the Level 3 SEC students. This supports the research results previously published by O'Driscoll and Gallagher (Gallagher et al., 2014; O'Driscoll et al., 2019). In this study, the data suggest that the SEJ has made a positive impact on the student's fears regarding university careers (n= 9, 64 %), starting university (n= 12, 86%), and personal wellbeing (n= 7, 50%). The change in students' response to Q8 appears around the fact that their worries and concerns were reduced or removed due to the intervention introduced. This strongly suggests that course progression is the factor driving the fear and concerns experienced about starting university for this cohort of students.

In both the pilot study conducted (Gines, 2020) and this study, the SEJ has demonstrated success in improving the student's experience during their transitional year. Figure 7 shows the change in score for every ten questions, showing a reduction in their scores from a higher score of concerns and worries to a lower score of worry. As seen in Figure 7, of those who returned the surveys, there was a 100% improvement evidenced in the qualitative comments. Therefore, this suggests that teaching the SEJ could provide a valuable approach to improving students' mental health and wellbeing.

Mulrooney suggests that a mixture of emotions related to Foundation Year was apparent among Level 3 students, reflecting the complex nature of the transition to higher education (Cheng et al., 2015; Mulrooney et al., 2020). Elias et al. 2011 concluded that 'stress is shown to be significantly correlated to academic achievement' (Elias et al., 2011). In this study, the SEJ has been shown to improve students' wellbeing in all the ten questions being investigated. Student engagement, in general, is an ongoing issue at universities, whether it is related to their academic program or to accessing services provided by the institutions (Gines, 2020; Mulrooney et al., 2020; Pereira et al., 2019). The level of full participation in this study is similarly affected and is not directly related to the SEJ process itself. In terms of relative improvement, question 1, "Are you worried about starting university?" had improved by 54% and question 8 ", Are you worried about passing the course?" by 60% as the two most significant improvements in the score (see Figures 5, 6 and 8).

Boulton et al. (2019) undertook a longitudinal survey of undergraduate students at a campusbased university. They found that engagement and wellbeing varied during the term but were strongly correlated.

The narrative synthesis by Sheldon et al. (2021) found that academic pressures, financial stress and experiences of sexual harassment whilst at university may trigger or exacerbate a range of mental health difficulties, suggesting that student life in itself can be a causal factor. 'The evidence suggests that both the university environment and the academic pressures associated with studying in higher education can be risk factors for depression.'

Personal wellbeing and concerns about leaving home or living independently (see Figure 7) were of the least concern to these students. The question regarding leaving home or living independently elicited the lowest score out of the ten questions asked. According to the Kingston University student academic records, over 50 % of the student population are commuters. In the SEC Foundation, 56.4% of students are described as commuters and 17.2 % as non-commuters. However, in the Pharmacy Foundation cohort, 71.7% of students are commuters, and 21.3% are non-commuters. The remaining value is assigned to data not being available.

Overall, an improved score was observed from the students after just attending a single 90minute session covering the theory of the SEJ and a single SEJ Practice workshop. This also suggests the importance and significance of completing the full training in achieving the effectiveness of the whole of the SEJ training. Similar findings have been reported by (Conley et al., 2015).

In this study, there were some limitations; in particular, the number of students who participated in the research was high. However, the group size and number of questionnaire responses decreased upon the completion of both the second and third post-training responses. Due to the method of data collection, focus groups did not take place. However, researchers were able to obtain qualitative comments within the questionnaire. Furthermore, the design of the questionnaire was not based on the frequently used Likert Scale. Therefore, whether the results would differ if the questionnaires were structured this way is unclear.

5. Conclusion

In this study, the need for cost-effective and preventative mental health provisions to address the increased mental health crisis university students are facing has been highlighted in many previous studies. The SEJ is the only program that has been found to be an effective, easily accessible, and adaptable skill-based program for Foundation Year students in their preliminary year of study. This study found that the SEJ was highly effective, particularly in addressing students' stressful thoughts, beliefs and fears regarding starting university and progression to further study. What is of interest to students is that this process does not detract from their studies but rather enhances them and all aspects of student life as the process is done in real time.

The SEJ has shown to be a core transferable skill to learn in empowering students during their transition. Students can apply the SEJ process in the moment, adaptable in all situations, unique to the individual, without external intervention. This helps to remove the stigma or reliance on overburdened services with delayed waiting times. The SEJ allows the practitioner to move from a state of stress, fear, and worry to a place of empowerment. This easy-to-use process not only proactively prevents mental health issues from developing or increasing in severity but moreover is proven to completely restore positive mental health, thereby enabling the individual to reach their full potential.

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