### View results

Respondent

12 Anonymous

22:33
Time to complete

### Title and contact details

1. Title of Initiative (please ensure this is a good description of your initiative in no more than 90 characters) \*

Embedding a Culture of Self-Care in Healthcare Education

2. Name of organisation and region (please state context, ie general practice, community care etc) \*

School of Nursing & Midwifery (Queen's University Belfast)

3. Name of person or team involved in the self-care initiative \*

Gary Mitchell, Christine Brown Wilson, Anita Mallon, Johanna McMullan, Lynne Robinson, Ciara Close, Deidre O'Neill, Laura Creighton, Steph Craig, Clare McKeaveney, Elizabeth Henderson

4. Timeframe and dates of initiative \*

01.09.2024-30.06.2025

5. Contact name for entry \*

Gary Mitchell

6. Contact email for entry \*

Gary.Mitchell@qub.ac.uk

## About your self-care initiative

7. Describe the problem you were facing and your objective(s) in tackling this. (1200 characters max)

Within the School of Nursing and Midwifery at Queen's University Belfast, students and staff were experiencing rising levels of stress, burnout, and poor wellbeing. Research and student feedback highlighted unhealthy coping behaviours, such as poor diet, disrupted sleep, low mood, and reduced exercise, especially during clinical placements and exam periods. Staff, under growing pressure from service demands and funding cuts, were also experiencing fatigue and reduced morale. There was a pressing need to challenge the cultural norm of self-neglect in healthcare education. Our objective was to embed a sustainable, inclusive self-care culture across our School. We aimed to empower individuals with evidence-based knowledge, practical tools, and peer-led support networks. Our focus was not only to educate but to create lasting behaviour change. One student summarised the impact best: "Before this, self-care was something I felt guilty for. Now I see it as essential to my future as a nurse."

Please enter at most 1200 characters

8. Outline your initiative, explain your planning and execution of the project. (1200 characters max)

Our three-pronged initiative focused on curriculum integration, digital access, and peer-led leadership. First, we introduced a 12-week assessed module on evidence-based self-care practices across all pre-registration nursing and midwifery programmes. This includes structured exploration of topics such as mindfulness, sleep hygiene, nutrition, and journalling. Second, we co-developed the Wellbeing Shelf, a digital wellbeing platform designed by and for students. It contains videos, toolkits, and self-paced activities like 5-minute breathwork or stress management. Third, we launched three student-led groups: Wellbeing Champions (organising events and campaigns), Heart Health Champions (focusing on lifestyle changes), and Peer Mentors (academic and pastoral support). A planning team including staff and students ensured collaboration and governance. Evaluation was embedded from the outset, ensuring data collection and continuous refinement. Every element was designed to be scalable, accessible, and inclusive.

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9. What were the challenges and how did you overcome these? (1200 characters max) \*

Cultural stigma was an initial barrier, self-care was often perceived as an indulgence rather than a necessity. To address this, we integrated self-care into the academic curriculum with formal assessments, positioning it as a professional competency. A second challenge was engagement. Healthcare students often feel overwhelmed with academic, and placement demands. We responded by offering flexible, digital resources via the Wellbeing Shelf and student-led drop-in events. Fatigue among peer leaders was another issue, which we tackled by building structured supervision and ensuring each group refreshed annually. Some students, such as parents or neurodivergent learners, faced additional barriers. We created specialist working groups to ensure inclusivity. Feedback confirmed this was critical. One neurodivergent student said, "For the first time, I didn't feel like I had to adapt to the system – the system adapted to me."

Please enter at most 1200 characters

10. Did you collaborate with other local partners, if so, who and why were they chosen? \*

We partnered with Queen's University Belfast's Wellbeing Services, who provided tailored training, mental health first aid courses, and in-person workshops for students and staff. Their input strengthened our response mechanisms and ensured fast referral pathways. We collaborated with the Department of Health NI, who endorsed the student-developed serious game on smoking and vaping. This increased credibility and widened our audience. We also worked with local charities and community partners to organise creative wellbeing events, such as forest walks and art sessions, which supported wider social connection. Cross-faculty collaboration with the School of Law allowed us to test our model's adaptability. Partners were chosen for their expertise, reach, and alignment with our goal of embedding self-care into education and professional identity. These partnerships allowed us to deliver a richer, more inclusive programme and expand our impact.

11. Would you describe your initiative as "innovative", if "yes" please tell us why. (800 characters max) \*

Yes. Our initiative is innovative in combining assessed self-care education with digital and peer-led engagement. We have integrated self-care into the core curriculum, developed a co-designed digital wellbeing platform, and launched three separate peer-led leadership programmes. Our serious game on smoking and vaping, created by students and endorsed by the Department of Health, brings innovation in public health communication. The initiative's layered design, offering learning, doing, and advocacy, builds a sustainable culture. One student said, "It's not a side project. It's part of who we are here."

Please enter at most 800 characters

12. Did you use any of the Self-Care Forum's free resources as part of your initiative? Provide details \*

Yes. We used the Self-Care Forum's resources, including self-care factsheets, posters on self-treatable conditions, and the Self-Care Week toolkit. These were shared via our Wellbeing Shelf and through student newsletters and social media. During Self-Care Week, the Wellbeing Champions created themed daily events using adapted resources from the Forum, including hydration challenges and positive affirmation cards. The structured messaging from the Forum helped validate our efforts and was especially useful for students unfamiliar with self-care principles. These materials provided consistent, trusted language to embed across platforms.

## Impact, outcomes, and evidence

13. Who was the initiative directed at and what were the benefits to the targeted group or individuals? (1200 characters max)

The initiative targeted over 2,500 undergraduate and postgraduate nursing and midwifery students, as well as 100+ academic and support staff. Benefits to students included increased wellbeing literacy, better coping mechanisms, and access to digital and peer-led support. Many adopted new practices like mindfulness or journalling. Staff benefited from increased engagement and improved help-seeking behaviours among students. Dedicated sub-groups such as student parents, neurodivergent learners, and international students received bespoke support. A student parent commented, "Having access to support that understood my life circumstances changed everything and I finally felt seen and supported." Our inclusive model empowered students to improve their own wellbeing while developing the skills to support others, both now and as future healthcare professionals.

Please enter at most 1200 characters

14. Please quantify the impact of your initiative. (e.g. cost improvement, numbers of people helped, time saved) ((1200 characters max))

Since launch, the Wellbeing Shelf has had over 2,000 unique users. Our peer-led groups have trained more than 120 students across three years. The student-developed serious game on smoking and vaping was played over 3,000 times in the first three months, with user feedback indicating improved awareness and motivation to change behaviour. Over 200 students have participated in live wellbeing events, such as guided walks and workshops. Our formal evaluation found statistically significant improvements in student self-care behaviours and wellbeing scores pre- and post-engagement. Informal metrics show greater uptake of counselling services, increased peer referrals, and improved module attendance. Academic staff have also reported reduced levels of crisis referrals and late submissions. One senior lecturer noted, "This initiative has changed the climate, students are more engaged, more open, and more resilient."

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15. Do you have formal or anecdotal evidence of success? (e.g. qualitative, quantitative, informal feedback?) (1200 characters max)

Yes. Formal evidence includes a published evaluation study using mixed-methods research. Pre/post surveys showed statistically significant improvements in perceived wellbeing, self-efficacy, and engagement with self-care strategies. Qualitative interviews highlighted increased resilience, sense of belonging, and positive behavioural changes. One student stated, "This programme made me realise self-care isn't selfish. I now journal every day and feel mentally stronger." Informal feedback was gathered via focus groups, reflective assessments, and social media engagement. Staff have reported higher levels of proactive help-seeking and peer support. The project has been showcased at international education conferences and has attracted interest from other faculties and institutions. Feedback from external reviewers noted the initiative's originality, practicality, and strong cultural integration within the school.

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# Learning and sustainability

16. What was the cost of this initiative in time, money, and other resources? Please be as specific as you can. (1200 characters max) \*

The Wellbeing Shelf was developed using existing digital infrastructure and student volunteer hours, requiring only minor financial input for graphics and editing. The serious game on smoking and vaping cost £4,000, funded through internal university grants. Annual event budgets, such as for wellbeing weeks or resource packs, average £1,500, covered by the school. Staff time includes 1–2 hours weekly per group for academic leads, which is integrated into their workload. Peer leaders volunteer or gain academic credit for their contributions. Additional resources, such as counselling drop-ins or mental health training, are provided by university services without extra cost. Overall, the initiative is highly cost-effective, relying on coordination and creativity more than capital. Its low financial burden has made it sustainable and replicable. A project lead said, "We didn't need massive investment. We needed commitment, collaboration, and consistency."

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17. Were there any learnings from the initiative, if so what were they? (1200 characters max) \*

We learned that embedding wellbeing in assessed curriculum legitimises it and increases engagement. Students were far more likely to engage deeply when self-care was framed as a professional responsibility. Co-design was critical because resources created with students were more authentic and widely used. Flexibility was another lesson; digital, asynchronous access increased uptake during busy placement periods. Peer support added credibility and community. We also learned that tailored responses matter, support designed for neurodiverse students or student parents had far more impact than generic messaging. Finally, regular feedback loops were essential for improvement. Student feedback directly shaped future activities, strengthening engagement. One student commented, "I felt part of something meaningful, we weren't just given content, we shaped it. That changed how I saw myself, and what I could contribute."

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18. Are you continuing to implement the initiative, please give details. (1200 characters max) \*

Yes. The initiative is now embedded in our school structure and continues to grow. The 12-week self-care module runs annually and is reviewed regularly. The Wellbeing Shelf is maintained and updated with new student-generated content, including blogs, tutorials, and digital guides. Peer-led groups continue to recruit and train new members annually, maintaining momentum and fresh ideas. Staff training in mental health awareness continues through the university, reinforcing referral knowledge and supportive practices. We are developing bespoke resources for postgraduate and international students, expanding beyond undergraduates. Other faculties, such as Law and Pharmacy, have begun replicating our model, and we are collaborating with community healthcare providers to develop wellbeing materials for use in practice settings. One student recently said, "It's become part of the fabric of our School, you feel it from day one."

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And finally .....

19. How easy will it be to replicate your initiative and do you have top tips to share? (1200 characters max)

Our initiative is highly replicable with appropriate planning. Start by embedding wellbeing into academic structures, if it's part of assessed teaching, engagement increases. Use existing platforms to host digital content and involve students in co-design to ensure relevance. Establish peer-led groups with clear training, role descriptions, and academic oversight. Engage with institutional wellbeing teams to link into existing support. Flexibility is key, use short, ondemand materials and recognise that not everyone engages the same way. Build in feedback from the outset and refresh annually to maintain energy. Top tips include don't overcomplicate, focus on genuine student voice, and treat self-care as core business. As one peer mentor said, "This worked because it wasn't a gimmick, it was real, student-led, and taken seriously by the whole School."

	Please enter at most 1200 characters
20.	Please let us know the social media addresses of those involved in the initiative.
	@QUBSONM - X.
21.	Why do you think this initiative deserves to win the award? (800 characters max)
	This initiative has transformed how self-care is taught, experienced, and embedded within our School. It is evidence-informed, student-led, and culturally embedded. Thousands have benefited from structured education, digital access, and inclusive peer support. The approach is sustainable, scalable, and already influencing other disciplines. By treating wellbeing as a core professional skill, not an optional extra, we've built a model that empowers future healthcare professionals to care for themselves as well as others. It represents what modern health education should be: informed, inclusive, and human.
	Please enter at most 800 characters
22.	Do you have an image, materials or weblinks to supplement your application? Please supply no more than 2 images which may also be used to promote your application if successful. Ensure images are square (ie height and width dimensions are the same). Please email information to <a href="mailto:selfcare@selfcareforum.org">selfcare@selfcareforum.org</a> including the name title of your initiative (as in Q1).
	Yes - available on request
23.	Your application may be chosen to be uploaded to the "best practise" page of the Self-Care Forum website to share self-care excellence with others who might want to use the learnings in your application. We will also include your email address so that people may get in touch with you. Please confirm your preference below. *
	I am happy for the Self-Care Forum to add our entry to the website with my email address
	I am happy for the Self-Care Forum to add our entry to the website <b>without</b> my email address
	I would rather our entry was not included on the Self-Care Forum website
24.	Would you consider becoming a self-care champion? *
	Yes
	○ No
	Maybe, I'd like to know more