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J. Zike & Sam Illingworth

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'I have struggled': how individual identities impacted staff working experiences in higher education during COVID-19

J. Zike  and Sam Illingworth 

The Department of Learning and Teaching Enhancement, Edinburgh Napier University, Edinburgh, UK

ABSTRACT

The impact of individual identities on university staff's experiences during the COVID-19 pandemic has been profound. We conducted a survey of 118 staff members at one Scottish university to explore how their identities were impacting on their experiences. Results from qualitative content analysis showed that existing inequalities had been exacerbated by the pandemic. The level of support received from line managers and colleagues had a direct effect on staff's self-efficacy and wellbeing. Furthermore, feelings of disconnection from the university community further isolated staff, causing further negative impacts on their wellbeing. These findings suggest that 'one-size fits all' approaches to staff wellbeing are unlikely to be effective, and that policies should take into account individual situations, resources, and challenges. Policies should focus on promoting staff autonomy and self-efficacy, and should be flexible enough to consider the unique needs of each individual.

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Introduction

The ongoing impact of COVID-19 has been profound, and most people's lives have been disrupted due to the pandemic and its associated lockdowns. For staff in higher education institutions, this manifested in a significant increase in staff workload as they worked to move all university activities online virtually overnight (Cleland et al. 2020; Shankar et al. 2021; Jump 2021; Watermeyer et al. 2020). According to the international Times Higher Education survey (Jump 2021), 89% of academic staff agreed that their workload had increased following the transition to online teaching. Third space professionals likely experienced a similar increase in workload as they often work directly with academics and students to support learning and teaching (Smith et al. 2021). The emerging literature focusing on COVID-19 experiences in higher education has tended to focus on academic staff rather than professional services staff, so this article seeks to bridge the gap by including both groups and focusing on their shared experiences.

While many studies have focused on students' experiences during the pandemic (Hewitt 2020; Alzaharani and Seth 2021; Harris et al. 2021; Borkin 2021), there has been a call for more research on staff experiences (Shankar et al. 2021) particularly from a holistic perspective (Jelińska and Paradowski 2021). This holistic perspective is important because research suggests that barriers between personal and professional lives and identities were further eroded as many staff had

to work from home for a substantial period of time (Gourlay 2020; Watermeyer et al. 2020), which in turn has had significant impact on their wellbeing and mental health (Carr et al. 2022; Dinu et al. 2021). Therefore, exploring solely professional experiences may not provide an accurate picture of staff's experiences as their personal and professional lives were intricately intertwined (Gourlay 2020; Jelińska and Paradowski 2021).

Conceptualising identity

In this study, we adopt Taksa, Powell, and Jayasinghe's (2015) multidimensional understanding of identity. We believe that identity is complex and aspects of a person's identity are intersectional (Scottish Government 2020) and experienced differently (Taksa, Powell, and Jayasinghe 2015). Taksa, Powell, and Jayasinghe (2015) stress that different dimensions of identity (e.g. gender, age, sexuality, disability, race, and parenthood) are experienced simultaneously, but the importance or salience of these dimensions may shift depending on the context. Although researchers often treat dimensions of identity as social categories and attempt to isolate one or more to determine the impact of identity on a person's experiences, Triandafyllidou and Wodak (2003; as cited in Taksa, Powell, and Jayasinghe 2015, 3) stated that researchers should focus on 'whether, when and how identities are used'. This does not mean that other kinds of

CONTACT Sam Illingworth  s.illingworth@napier.ac.uk

identity research are unimportant as concepts can and should be explored in multiple ways, developing a better collective understanding of the complex reality of people's experiences (Maxwell and Mittapalli 2010). However, it is important to explore identity in holistic ways because this perspective is underdeveloped in the existing COVID-19 literature (Jelińska and Paradowski 2021).

To investigate identity, we chose to focus on the nine protected characteristics set out in the UK Equality Act 2010. These are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, and sexual orientation. This approach is used by higher education institutions in the UK to evaluate the current or potential impact of policies, initiatives, and practices to ensure that potentially vulnerable groups are not disadvantaged. In many universities, including Edinburgh Napier University, this process involves separating these aspects of identity to consider the impact on groups of people with each of these protected characteristics, focusing on groups of people who more frequently face discrimination (e.g. non-white or female staff members). However, realistically many people will fit into multiple identity groups and one limitation of considering each protected characteristic as a separate group of people is that this approach could miss the complexity of people's lived experiences. We view these aspects of identity as intersectional and recognise that the importance of a particular protected characteristic may shift depending on the context (Taksa, Powell, and Jayasinghe 2015) and may be evaluated positively in one context and negatively in another (Jaspal 2015). For example, that fact that a lecturer is a parent may not have been important to their working experiences pre-COVID or may have had a perceived positive impact on their work. However, their parental status may have become significantly more important if they assumed primary responsibility for helping with home-schooling their children during lockdown. This could result in their parent and academic identities coming into conflict where they previously were compatible (Jaspal 2015).

In this study, we were interested in how participants felt their identities had impacted their experiences during COVID-19. This differentiates our research from some of the identity studies that have sought to measure impact and/or isolate aspects of identity (Andersen et al. 2020; Jelińska and Paradowski 2021; Staniscuaski et al. 2021). Taking an approach that concentrates on participants' perceptions affords us the opportunity to determine whether and how they used different aspects of their identity to make sense of the impact of COVID-19 on their professional lives, adding another perspective to develop the expanding base of literature in this area.

Unequal impact of COVID-19 on protected groups

While most staff have experienced some impact from the pandemic, it is clear that the effect has not been equal (Scottish Government 2020; Mental Health Foundation 2020; Shankar et al. 2021; Myers et al. 2020). Cleland et al. (2020) asserted that staff working in high expectation settings with low support were particularly hard hit. Indeed, many staff highlighted that management did not acknowledge the full extent of their workload, especially in relation to their personal circumstances (e.g. caring responsibilities, lack of appropriate work set up) (Jump 2021). Researchers have explored the disproportionate impact of COVID-19 in relation to: gender, disability, age, race and caring responsibilities.

Research on disabled academics' experiences during the pandemic is scarce and has revealed a nuanced impact (Hannam-Swain and Bailey 2021; National Association of Disabled Staff Networks [NADSN] 2020). In Hannam-Swain and Bailey's (2021) autoethnographic research, they reported experiencing some benefits including being better able to manage chronic symptoms and mental health benefits from being exempted from social contexts. The NADSN position report (2020) stressed that many disabled staff flourished during the pandemic after being told for years that remote working was not possible. However, Hannam-Swain and Bailey (2021) also highlighted challenges such as the loss of routine leading to anxiety and stress. Additionally, disabled academics who were classified as highly vulnerable were dealing with fears of contracting the virus and the lack of value that seemed to be placed on their lives in the medical guidance (Hannam-Swain and Bailey 2021).

The impact of COVID-19 has been highly gendered, with female academic staff being disproportionately impacted (Shankar et al. 2021; Myers et al. 2020; Pugh and Liu 2021). Shankar et al. (2021) stressed that this is not a new problem and highlighted that the pandemic exacerbated existing gender inequalities. Women who tended to already take on primary responsibility for childcare have struggled to balance their work responsibilities with childcare and other domestic responsibilities (Gourlay 2020; Myers et al. 2020; Shankar et al. 2021; Derrick et al. 2019). Staniscuaski et al.'s (2021) study in Brazil found that Black women and mothers were most affected, particularly mothers with young children. This was also evident in the UK, given the restricted childcare access during the lockdowns (Audit Scotland 2021; Pugh 2021).

The impact on young female academics may be the most profound and long lasting. Many mothers with young children are early career academics whose

long-term career trajectories may be disproportionately impacted (Andersen et al. 2020; Myers et al. 2020; Shankar et al. 2021). Women's publication rates were negatively affected (Andersen et al. 2020), they were less able to work on research than men, and received fewer rapid response research grants related to COVID-19 than men (Shankar et al. 2021). UK academic staff are periodically assessed on their outputs in accordance with the Research Excellence Framework (REF), meaning that fewer research outputs and grants could have a significant and long-term negative impact on career progression. Additionally, women and particularly women from minority ethnic backgrounds are more likely to be on casual and short-term contracts, many of which were adversely impacted by COVID-19 (Pugh and Liu 2021).

Jelinska and Paradowski's (2021) research showed a nuanced perspective of the gendered impact on wellbeing. After adding professional adaptation variables to their regression model, gender was no longer a significant predictor of negative affect. This indicates that individual characteristics like adaptability may also be important when considering who was at risk of negative impact to their wellbeing. Rather than contradicting the disproportionate impact on young mothers, Jelinska and Paradowski's (2021) study likely captured this in their work-life synergy variable, as young mothers struggled more with this during the pandemic (Myers et al. 2020; Staniscuaski et al. 2021). However, this does show that individual experiences are important and groups of people sharing one aspect of identity should not be seen as homogenous.

The purpose of this study was to better understand how people's individual identities impacted their working experiences during COVID-19. This was formalised into the following research questions (RQs):

RQ1: In what ways did participants feel their protected characteristics impacted their experiences of learning and teaching during COVID-19?

RQ2: Is there evidence that digital learning and teaching resulted in more/less equal experiences for staff during COVID-19?

Methods

We adopted a qualitative single case study informed by content analysis for this research (Hsieh and Shannon 2005). A qualitative survey was chosen because this method offers a degree of anonymity that helps to reduce participant bias towards socially acceptable responses, which is often seen in face-to-face methods (Holliday 2016). This was important in our case because there is evidence that some groups of people had negative experiences during COVID-19 (Scottish Government 2020), some of which likely

stemmed from their workplace's COVID-19 response. Since we were researching our own institution and both hold roles in teaching enhancement, we felt that anonymity was necessary for staff to feel able to freely express negative perspectives of the institution and its response.

The survey was distributed across Edinburgh Napier University using a variety of methods including mailing lists, targeted emails, and internal social media (i.e. Workplace). The survey was open for responses from the 7th of May until the 1st of July 2021. We received 118 completed responses from staff on academic contracts ($n=49$) and professional contracts ($n=69$). The survey contained a mix of open and closed questions with the aim of enabling staff to talk about aspects of their identity (specifically their protected characteristics) in relation to their experiences at Edinburgh Napier University during COVID-19. While we acknowledge that we are all more than our protected characteristics, this approach enabled our participants to consider multiple aspects of their identity in relation to their working experiences during the pandemic. Participants were not required to have protected characteristics that are commonly linked with discrimination and many of our respondents did not, which was reflected in many responses where participants indicated that there was no impact on their experiences in relation to a protected characteristic. It is also important to acknowledge that although the protected characteristics in the Equality Act (2010) were chosen as a focus because they have been linked to discrimination and disadvantage in the UK, this list is not complete and there are many other facets of identity that could impact on participants' experiences. Consequently, we included a question at the end that gave participants space to talk about other experiences that they did not feel were connected to any protected characteristic. The full survey can be found in [Appendix A](#).

In order to provide further context regarding the COVID-19 restrictions that were in place at the University (and Scotland more broadly) during the run-up and conduction of the survey, on the 17th May 2021 most of Scotland (including Edinburgh) had just moved into 'Level 2 restrictions', which meant that colleges and universities had more flexibility to resume in-person learning (following over a year of mostly remote teaching since the first day of lockdown was declared in Scotland on the 24th March 2020). However, in reality, it was not until well into 2022 that students and staff went back to face-to-face teaching across the institution. This was because Scotland's legal COVID-19 restrictions, including the wearing of face coverings, ended on the 21st March 2022.

Qualitative content analysis (see e.g. Gibson, Illingworth, and Buitter 2021; Graneheim and Lundman 2004) was used to interpret the responses. A

conventional approach to qualitative content analysis was adopted in this study, with any codes and categories to be determined by the implementation of the coding process (Hsieh and Shannon 2005). Both authors individually coded the set of responses according to the two RQs, which allowed us to engage in triangulation by bringing two different perspectives to the data analysis process (Tracy 2010). Samples from each author's code book can be viewed in [Appendix B](#). We then came together to discuss the overlaps and synergies of the codes that we had identified and then merged these into four broad categories, as shown in [Table 1](#). In our discussions, we noted that for each of the categories, participants related both positive and negative experiences. Therefore, it was important not to introduce any positive or negative valence when naming our categories, to reflect the nuance in participants' narratives.

Results and discussion

As [Table 1](#) shows, four categories emerged during our analysis. We now discuss each of these categories and provide recommendations for how the learnings from this study could be used to improve the staff wellbeing and working experiences at higher education institutions.

Community

The 'community' category was assigned to responses that somehow related to the sense of loss (or growth) of community that developed because of the disruptions to learning and teaching that were brought about by COVID-19. This disruption most closely manifested in the sense of isolation felt by staff, despite steps taken to try to enrich the student experience, as is apparent from the following quote:

I have found the isolation of working from home for such a prolonged period difficult, despite the online platforms. My role previously was extremely

collaborative and often corridor/library conversations would be a rich source of ideas and plans for interesting student opportunities/engagement. Although students have benefited greatly from the resources we have produced the remote service has returned to being reactive and supportive rather than being developmental. (Participant 135)

These informal conversations and the community that they can help foster have been shown to be a powerful conduit for developing learning and teaching (Thomson and Trigwell 2018). Participants' responses indicated that the lack of this type of encounter strongly affected their sense of community. Staff missed out on the opportunity to develop their own communities beyond their immediate team and this was particularly salient for new staff members:

Since I hadn't worked at Edinburgh Napier University for long before the COVID, I don't have many social contacts at the university. My age might have made me more insecure and lead to me not reaching out to colleagues, in fear of bothering them. (Participant 32)

In terms of protected characteristics, several participants spoke of their difficulty in engaging with university communities that were tied to their personal identities:

I have felt less engaged with the Staff LGBT + Network, due to fatigue from online socialisation. (Participant 49)

This sense of online fatigue has been reported elsewhere, although as noted by Saldanha et al. (2021), remote teaching can be carefully nurtured to build community both in the online classroom and between colleagues. Unlike the other categories, participants almost unanimously felt their sense of community to be negatively affected. Only one participant remarked on the growth of community, which might instead be related to 'Support', which is further discussed below:

I have experienced genuine collegiality and community during lock-down which I had not expected. Colleagues and students have been accessible and overwhelmingly positive and supportive. I feel we all came together. (Participant 123)

It was interesting that these mostly negative sentiments contrast with those from other studies (see e.g. McGee and Tashakkori 2021; Saleh and Mujahiddin 2020), which revealed that online groups and networks could help to reaffirm a sense of community during the move to remote teaching. It is perhaps telling, however, that these networks tended to exist beyond any single institution, and that in reaching for them, staff in higher education relied on extensive networks they had perhaps built up over a number of years in a mainly digital capacity (i.e. through international or long-distance collaborations).

Table 1. The combined categories used in the analysis of the survey responses.

Category	Codes (original coder in brackets)
Self-efficacy	Physical environment – affordances and constraints (Zike), Self-efficacy (Zike), Flexibility (Zike), Upskilling (Zike), Workload (Zike), Work-life balance (Illingworth), more productive (Illingworth), QOL improvement (Illingworth), upskilling (Illingworth)
Wellbeing	Physical health (Zike), Mental health (Zike), Mental health (Illingworth), Physical Wellbeing (Illingworth)
Community	Connection to community (Zike), Communication (Zike), Less engaged (Illingworth)
Support	Identity-based assumptions (Zike), Identity-neutral space (Zike), Competing and changing priorities (Zike), University response / support (Zike), Power (Zike), Less valued (Illingworth), Empathy (Illingworth), Lack of support (Illingworth), Technical issues (Illingworth)

From the results of our study, it appears that this loss of community affected participants mostly independently of their personal identities, and that it was those informal encounters that take place in a face-to-face environment that they missed the most. In providing recommendations for how to address a loss of community during remote teaching, we would urge colleagues to consider what it is about their existing multi-institutional communities that work well, and how they could utilise this to mitigate any sense of online fatigue in nurturing community more closely to home.

Wellbeing

Responses in the 'wellbeing' category indicated that staff experienced positive and negative impacts on their physical and mental wellbeing. The Times Higher Education survey (Jump 2021) also reported a nuanced impact on staff's mental health. We found that participants' experiences were highly dependent on their individual life contexts and that experiences were not equal – in other words 'we are all in the same storm, but we are not all in the same boat' (Mental Health Foundation 2020, 3).

Staff who shared protected characteristics that are often linked with discrimination reported differing experiences, demonstrating that these groups are not homogenous, even if they share specific characteristics (Wise 2016). Therefore, Dodge et al.'s (2012, 230) definition of wellbeing as 'the balance point between an individual's resource pool and the challenges faced' fitted most closely with our data. The data showed that participants had different social, physical, and psychological resources, so even if they faced some of the same challenges, their wellbeing was closely connected to their individual contexts (Dodge et al. 2012).

Staff reported age, disability, and caring responsibilities as having an impact on their experiences of wellbeing during the pandemic. Although caring responsibilities are not a protected characteristic, participants often considered these responsibilities to be linked to other protected characteristics for which they might experience discrimination such as being a woman and/or a married partner. This aligns with some of the groups identified as being at higher risk of deteriorating mental wellbeing in the Mental Health Foundation report (2020). However, the impact for these groups was not straightforward. For example, two staff members who both reported experiencing a physical disability reported different effects on their physical health:

Without the routine trip to work and moving about on campus, have lost further mobility (Participant 73).

I have found it easier to manage my condition whilst working from home. It is easier to manage pain and

fatigue and I am in a better state of mind because of it (Participant 21).

Some older staff members also reported deteriorating physical health, usually attributing this to being less physically active when working from home. However, similar to Participant 21's response, a staff member experiencing the menopause also reported finding it easier to manage her symptoms with the flexibility for a later start.

In the extreme VUCA (volatile, uncertain, complex and ambiguous) environment (Hadar et al. 2020), participants who experienced mental health issues prior to COVID-19 often reported that their mental health deteriorated further, aligning with the Mental Health Foundation report (2020).

I have quite bad panic and anxiety disorder, and with guidelines changing so frequently, being told that I may have to return to working on campus 'soon' for the past 6 months has had an effect on my mental health. The thought of returning to work without time to adjust to 'normal' commuting and working life is a very scary prospect for me. (Participant 121)

Staff with caring responsibilities, particularly mothers who tended to take on the most responsibility for childcare (Scottish Government 2020), often reported experiencing more stress. This seemed to be a result of managing competing professional and personal priorities, which became harder when normal childcare options (e.g. schools) closed during the multiple lockdowns:

I faced an immense struggle trying to manage full-time childcare alongside a full-time working schedule. During the pandemic, I was also acting up as programme leader for many programmes, tasked with guiding the programme teams through the pandemic. I was working more hours, in the evenings and at weekends (around childcare) and I became extremely stressed, I couldn't sleep and slowly became exhausted. (Participant 139)

However, some staff reported less stress because of the flexibility working from home provided. This allowed some parents to better balance their personal and professional responsibilities, such as allowing for easier school drop-off and pick-up.

While many of the negative impacts on wellbeing described here were unavoidable due to the COVID-19 related lockdowns, research indicates that staff wellbeing at UK universities is not a new concern (Kinman 2014). COVID-19 further eroded the boundaries between work and home domains (Watermeyer et al. 2020) and this often meant that staff were working longer hours with increased workloads (Cleland et al. 2020).

We agree with Kinman's (2014) suggestion that a broader cultural shift is needed to prioritise supporting university staff to achieve an effective work-life balance. Our data suggest that one-size-fits-all

approaches are unlikely to be helpful. University policies should instead prioritise staff wellbeing but must be flexible enough to centre staff input when making decisions around how to achieve an effective work-life balance and optimise wellbeing for individuals with differing resources and challenges.

Self-efficacy

Responses assigned to the 'self-efficacy' category indicated a participant's beliefs about their ability to accomplish goals or tasks related to their professional role (Bandura 1977). More generally, self-efficacy relates to a person's beliefs about their ability to 'exercise control over events that affect their lives' (Bandura 1990, 128). A narrative around control emerged strongly in the data in this category. Some participants found the flexibility of working from home gave them more control over managing their workload, which benefited both their personal and professional self-efficacy:

Increased flexibility in working hours and pattern has made a huge difference to my ability to do my job well and balance my childcare/caring responsibilities. (Participant 70)

However, as Hadar et al. (2020) point out, many people experienced a loss of control over their personal circumstances in the VUCA environment of the COVID-19 pandemic. Other staff with caring responsibilities discussed losing access to resources that helped them to manage competing demands:

Nothing was done despite absence of school/nursery for nearly a year for some of us. Overall, the quality of my work was negatively affected but also had direct effect on my relationship with partner and children and my physical health. (Participant, 75)

As the responses above illustrate, self-efficacy was also highly dependent on the individual's circumstances and the resources available to them and the challenges they faced (Dodge et al. 2012). Workload increased for many staff, particularly during the transition to online delivery (Cleland et al. 2020; Jump 2021). Additionally, when schools closed some staff's childcare responsibilities also increased while their access to resources like childcare decreased. This made it difficult to manage competing roles, negatively impacting self-efficacy and wellbeing. Support was also important to participants' self-efficacy beliefs, resonating with Cleland et al.'s (2020) assertion that staff in high expectation/low support settings were particularly hard hit. Support will be further discussed below.

Physical resources such as work environments also had an impact on staff's self-efficacy, which has been discussed in other studies highlighting the importance of workspaces during the lockdown (Gourlay 2020; Jump 2021):

As a member of the neurodiverse community working from home can be a nightmare. It is so difficult dealing with the overload of primarily textual information, requests and multiple tabs and screens. I need to move about to focus and this is easy on campus. Neurodiverse students report the same and it is very difficult to get support. (Participant 59)

I have been able to be more efficient and effective as there is less disruption to my day from being in a shared office. (Participant 98)

While it was clear that physical environment had an impact on self-efficacy, only a few staff volunteered information about being neurodiverse, so we cannot make any specific conclusions about neurodiverse staff's self-efficacy. Other studies including Shaw, Hennessy and Anderson's (2021) study of dyslexic medical students' experiences indicated that many benefited from increased control over their learning, but that there were challenges in the digital environment as well. However, student experiences may not align with neurodiverse staff's experiences, particularly for staff in low-support/high-demand workplaces.

The rapid changes to digital delivery during the COVID-19 pandemic resulted in increased workload for most staff as they adapted to online delivery (Cleland et al. 2020; Jump 2021). The ways that staff were able to manage these demands and whether their self-efficacy increased or decreased largely depended on their personal resources, the support they received, and what other personal challenges arose alongside the increase in workload. Similar to wellbeing, we reiterate that university policies should be supportive and flexible enough to centre staff autonomy when making decisions around how to manage workload and ensure that staff members feel they are being effective in their roles.

Support

Similar to 'Wellbeing' and 'Self-efficacy', 'Support' was a far more nuanced narrative that presented itself in both positive and negative experiences during COVID-19, and which certainly impacted staff in a less equitable way, depending on their identities, personal resources and challenges.

Most of the positive experiences in this category were associated with a greater empathy for/by colleagues in relation to the ways in which their personal identities influenced their experiences. This was perhaps most evident in relation to caring responsibilities and gender identities:

My impression of working from home, along with all my colleagues and fellow staff members is that somehow this may have caused a reduction in a lot of gender-based language and conversations (e.g. accidental casual sexism), feelings of inequality, and

even awareness from my colleagues that I am a female. I prefer all of this ... (Participant 106)

But also with regards to race:

My white European colleagues and I discuss racial identities more and our personal roles in the professional, research, social and cultural dialogues. Everyone seems to be more willing to challenge the white narrative that has dominated academia... while finding ways to actively support other narratives (Participant 106)

However, participants' experiences were not unanimously positive, with support seeming to depend on immediate supervisors:

When things got too much and I mooted the idea of taking unpaid leave as an option, I had a discussion with my line manager about workload which helped a bit, but I didn't feel like my request for unpaid leave was taken particularly seriously. (Participant 111)

This lack of consistency, or fair treatment, was evidenced in many responses:

I think the confusion over flexible working, on the one hand being encouraged to take time out in the day if needed but policies around flexi-time/TOIL and how to track this haven't been revised at all during COVID-19 – this relies on managers' discretion and can lead to differences in treatment. (Participant 116)

I have struggled more with anxiety over the past year. Edinburgh Napier University, and my line manager in particular, have been very supportive and helped me through these issues. (Participant 68)

Regarding the equity with which staff experienced the move to digital learning and teaching, responses revealed that many staff experienced empathy and understanding from colleagues. However, this did not always manifest itself in actionable support and was instead largely dependent on individual collegiality. As discussed by Lemos Lourenço and colleagues (2021), it is essential that individual offerings of empathy between colleagues are supported by, and lead to the development of, meaningful actions. Based on our findings, such actions could include (but are not limited to): transparent dialogues between senior leadership teams and other members of staff, acknowledgment of and mitigations for increased workload, and greater flexibility to allow for personal circumstances, especially in relation to caring responsibilities and mental and physical health needs. In turn, such support stands to benefit more than just staff; as pointed out by Evans (2020), in being offered actionable empathy staff feel supported in offering (and demonstrating) that same empathy to students.

The rapid changes to teaching and learning brought about by COVID-19 revealed that the support that staff encountered varied greatly depending on their personal resources/challenges and the attitudes and behaviours of their immediate supervisory team. In

any transition to digital learning and teaching and the changes to working practices brought about by increases in remote and/or hybrid working, the findings from this study indicate a need to build on individual empathies and how these could be converted into supportive, flexible, and well-communicated policies across the university.

Conclusions

In this study, we aimed to better understand how people's individual identities impacted their experiences during COVID-19. Specifically, we asked the research questions:

RQ1: In what ways did participants feel their protected characteristics impacted their experiences of learning and teaching during COVID-19?

RQ2: Is there evidence that digital learning and teaching resulted in more/less equal experiences for staff during COVID-19?

In reference to both research questions, our analysis spoke to the complexity of change and the variety of staff needs. Participants with protected characteristics that are frequently linked with discrimination believed that these characteristics impacted their sense of community, self-efficacy, support, and wellbeing in relation to their working experiences. Some responses showed a perceived positive impact, indicating that they felt their experiences were more equal compared with their pre-COVID experiences while others showed a perceived negative impact. This shows that the impact was far from straightforward and varied according to staff's individual identities, resources, and challenges.

While the way this study was conducted means that we are confident in the trustworthiness of its findings, there are still limitations that should be addressed. Firstly, this study was limited to a single university, and further research is needed to confirm the extent to which these narratives were representative across the wider sector. Secondly, the study specifically asked about protective characteristics, which do not represent all relevant aspects of identity. Some respondents made reference to other identities, highlighting several identities that should be considered for future studies, as they are known to have a significant impact on working practices; for example, immigration status (Gray, Rolph, and Melamid 1996), the extent to which participants may be experiencing menopausal symptoms (Hammam, Abbas, and Hunter 2012), and caring responsibilities (Jump 2021). As noted in the Introduction, it is also important to consider the intersectionality of these protected characteristics and other identities for many of the staff working in higher education, and future studies could potentially focus on how the importance or salience of these dimensions may shift depending on the context. In

particular, we received a high response rate from white staff and a relatively low response rate from staff who identified with any other ethnicity, so future studies could investigate whether and how ethnicity impacted participants' experiences in relation to their other identities (however, in this regards the sample of survey respondents was representative of the staff body as a whole, which for 2021–22 observed that only 9.7% of the staff working at Edinburgh Napier University identified as any ethnicity other than white). This is especially important because other studies have found that there was a disproportionate impact staff from minority ethnic backgrounds (Pugh and Liu 2021; Staniscuaski et al. 2021) and it would be helpful to further understand how this intersects with other identities. Finally, future studies could consider surveying staff at different times of the academic year to fully capture the changing pace of workload and work-related expectations.

Despite these limitations, we believe that the findings from this study will be of benefit to the wider community, and that the following recommendations should help to further catalyse both the dialogue and action arising from changes to teaching and learning brought about by COVID-19:

- (1) One-size fits all approaches are unlikely to be helpful.
- (2) Individual empathies should be converted into effective university-wide policies.
- (3) Such policies should prioritise staff wellbeing and be flexible to cater for this at an individual level, while also affording staff autonomy.
- (4) Individuals should use the learnings from external remote networks to help develop those at an institutional level.

It is our intention that these four recommendations act as a starting point for higher education leaders to explore within their institutions, and we welcome the opportunity to discuss how they might be implemented and evaluated effectively. Our study indicated that staff experienced changes in working during COVID-19 differently and therefore we recommend that change processes should be participatory involving staff from a variety of different positions within the university and particularly ensuring that staff with protected characteristics which are often discriminated against are represented within this process. As the Sector continues to evolve in response to COVID-19, and many staff return to campuses or adopt more hybrid approaches to learning and teaching, we also hope that many of the lessons that have been learnt are not forgotten, and that instead we can use the results of this study (and others) to create better working environments for all.

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Disclosure statement

No potential conflict of interest was reported by the authors.

Data availability statement

Given that the data contains responses that could potentially lead to the identification of the respondents (even with all demographic information removed), we have chosen not to make the survey responses available, but a redacted version can be provided upon request.

Notes on contributors

J. Zike was a research fellow at Edinburgh Napier University and is now a public health intelligence analyst at NHS Lothian. Their research interests include mixed methods research and particularly the use of visual and creative methods to understand how people make sense of their own experiences and construct beliefs.

Sam Illingworth is an Associate professor in the Department of Learning and Teaching Enhancement at Edinburgh Napier University, where his research interests involve using creative pedagogies to address staff and student belonging in higher education. You can find out more about his work via his website www.samillingworth.com.

ORCID

J. Zike  <http://orcid.org/0000-0003-1972-380X>

Sam Illingworth  <http://orcid.org/0000-0003-2551-0675>

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Appendix

Appendix A: Questionnaire

- (1) What is your main work or study location?
- (2) What is your primary role?
- (3) On what sort of contract are you employed?
- (4) What is your working pattern?
- (5) Had you worked at [Edinburgh Napier University] prior to the COVID restrictions?
- (6) How would you describe your gender?
- (7) Is the gender you identify with the same as your sex registered at birth?
- (8) To what extent has COVID impacted your experiences at [Edinburgh Napier University] based on this aspect of your identity?
- (9) What is your age?
- (10) To what extent has COVID impacted your experiences at [Edinburgh Napier University] based on this aspect of your identity?
- (11) Do you have caring responsibilities outside of the University?
- (12) To what extent has COVID impacted your experiences at [Edinburgh Napier University] based on this aspect of your identity?
- (13) Do you consider yourself to have a disability?
- (14) To what extent has COVID impacted your experiences at [Edinburgh Napier University] based on this aspect of your identity?
- (15) Do you consider yourself to be: (Asexual, Bisexual, Gay Man, Gay woman/lesbian, Heterosexual/straight, Queer, Prefer not to say, Other (write in))
- (16) To what extent has COVID impacted your experiences at [Edinburgh Napier University] based on this aspect of your identity?
- (17) How would you describe your ethnicity? Please select the one box that you feel most closely represents your ethnicity
- (18) To what extent has COVID impacted your experiences at [Edinburgh Napier University] based on this aspect of your identity?
- (19) What is your religion?
- (20) To what extent has COVID impacted your experiences at [Edinburgh Napier University] based on this aspect of your identity?
- (21) Are there any other ways that COVID has impacted your experiences at [Edinburgh Napier University]?
- (22) Are you interested in being contacted about your experiences, and to potentially provide more information via focus groups or interviews? If yes, then please write your [Edinburgh Napier University] email address
- (23) Do you have any other comments that you would like to add?

Appendix B: Author code books

Extract from the code book used by Zike in the initial coding exercise, including a definition and example for each code.

Code name	Description	Frequency	Examples
Physical health	Participants' remarks about impacts on their physical wellbeing.	11	"I have developed quite severe back pain (I think in part due to age) due to sitting for 8-10 hours a day. A standing desk and hundreds of pounds of physio has helped this but unable to sit at any time for longer than 2 hours. I also have experienced a deterioration in my eyes – which I think is probably age-related but also due to staring at a computer for 8-10 hours a day."
Mental health	Participants' remarks about impacts on their mental wellbeing.	35	"I've visibly aged due to the stress of the pandemic – it's impacted on my health leading to taking antidepressants for the first time, and it's made me less healthy than I've been for some time. There has been too much work, and there's been no willingness to acknowledge that in a meaningful way beyond understanding noises."
Connection to community	Feeling connected or disconnected from a community of peers/colleagues.	20	"I have really missed after work drinks & socialising with my teammates."
Communication	Impact on the way that information is exchanged via speaking, writing or some other medium.	12	"Contact with students remotely has meant more time communicating by email."
Identity-based assumptions	Often implicit, taken for granted presuppositions about a person or group of people based on their identity (or identities), often based in traditional sociocultural norms.	20	"I am the only member of my household who is working from home. I already do the majority of the housework, but this has increased as my partner is going out to work."
Identity-neutral space	A space where identity is invisible or perceived to not matter.	3	"My impression of working from home, along with all my colleagues and fellow staff members is that somehow this may have caused a reduction in a lot of gender-based language and conversations (e.g. accidental casual sexism), feelings of inequality, and even awareness from my colleagues that I am a female. I prefer all of this."
Competing and changing priorities	The perceived importance of different aspects of life/roles and attempts to balance competing demands.	64	"As primary care giver I found demands of family, home learning and work very challenging when schools were closed."

Extract from the code book used by Illingworth in the initial coding exercise, including a definition and example for each code (corrected for spelling).

Code name	Description	Frequency	Example(s)
Work / life balance	Resulted in greater pressure in work/life balance.	48	"As primary care giver I found demands of family, home learning and work very challenging when schools were closed."
Mental health	Adversely affected mental health.	30	"Maintaining standard of work has been challenging and stressful."
More productive	Led to increase in productivity.	13	"Made work much easier as meetings are now online."
Less valued	Exacerbated feelings of inequality.	31	"My thoughts and opinions have always been less valued by certain members of the team and this has been exacerbated by COVID."
Empathy	Led to opportunities for empathy.	29	"I guess I've benefitted from being married to a woman who has been doing a lot of the childcare."
Less engaged	Reduction in engagement with the University / networks / colleagues etc.	44	"I have felt less engaged with the Staff LGBT + Network, due to fatigue from online socialisation."
Lack of support	Lack of support from the University / colleagues in dealing with any issues.	39	"I did ask for partial furlough when informal childcare was banned before Christmas and was told that it was not for covering childcare issues, which I felt was quite unfair and not a correct interpretation of the scheme."