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Social work educators and student wellness needs

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ABSTRACT

When students struggle with inconsistent food or housing, social distress, or mental health challenges, this can directly impede their learning. Social Work educators in the United States were surveyed to understand what influences their sense of responsibility to address these student issues. 74% of the 116 respondents indicated that they have developed an increased sense of responsibility to address these issues over their time as educators. Student focused concerns were the most common motivation guiding this sense of responsibility, followed by personal and professional motivations. Understanding how social work educators determine how and when to address student wellness needs will continue to influence student learning and the development of future social workers.

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College students face significant challenges affecting their learning, wellbeing, and success. According to the United States Department of Labor (2023), over 60% of students in the United States who graduated high school in 2022 were enrolled in college later that year, demonstrating that college is commonly pursued by American young adults. Recent studies at large public universities across the United States indicate that 15.49% – 48.5% of college students faced current food insecurity, and 9.47% – 66.1% endured previous-year housing insecurity (Coakley et al., 2022; Haskett et al., 2021; Robbins et al., 2022). Students at American Historically Black Colleges and Universities face food insecurity even more frequently, with a recent study showing 72.9% of students at four HBCUs struggling with past year food insecurity in the prior year (Duke et al., 2023). This is certainly an international issue as students struggle to meet basic needs amidst varied economic realities and social safety nets. World literature investigate the challenges associated with college student distress in numerous settings and cultures, including community colleges in Canada (Innis et al., 2020), efforts to support student wellbeing in the United Kingdom (Howells & Bald, 2022) and Spain (Schoeps et al., 2020), and strategies to ameliorate college student food insecurity by decolonizing the curriculum in South Africa (Adebayo & Mudaly, 2019). Quantitative and qualitative studies have consistently shown that students dealing with food or housing insecurity often have lower GPAs, impaired sleep, reduced health, and more mental health struggles than students who have these basic needs met (Coakley et al.,

2022; Haskett et al., 2021; Meza et al., 2019). While basic needs are the primary concern, they are not the only wellbeing challenge students face.

Literature review

College student wellbeing struggles

In the past, colleges in the United States were developed with an expectation that students would be young, relatively financially secure with access to family support, and hold few additional responsibilities beyond learning (Bahrainwala, 2020). Today's college students bring diverse experiences and life responsibilities to their academic pursuits. Current students, however, may be entirely reliant on loans, have limited family support, be working part-time or full-time, and have caretaking responsibilities for family members. Students strive for college and graduate degrees even as the wealth gap in the United States is growing (Pfeffer, 2018), often leaving school with considerable debt. Some advocates argue that it is a necessary act of social justice to change traditional college systems to accommodate better current students' challenges (Bahrainwala, 2020; Broton et al., 2022).

Universities face pressure and expectations to do more for students than provide courses. Addressing students' basic need insecurities may be a fundamental responsibility of universities (Trawver et al., 2020). Reducing food insecurity can help students be more effective in the classroom and increase retention (Balzer Carr & London, 2020). Beyond financial needs, Allen et al. (2022) suggest that universities should address student mental health concerns by supplying resources and ensuring educators are aware of the predominance of problems (Allen et al., 2022). Manik (2016) states that universities are responsible for providing different kinds of support for students struggling with personal issues or stressors. Using the wellness model, we may recognize that there are multiple intervention opportunities for universities trying to assist their students.

College wellness models

Wellness models are commonly used in college campus settings in the U.S. to explore and define the different aspects of a college student's life that need attention to help them flourish as whole people. The expectation is that when these wellness needs are met, academic achievement can be best supported (University of Houston, n.d.). For instance, the areas of wellness identified by the University of Houston (n.d.) include not only the basic needs of physical and financial wellness but also emotional, social, cultural, spiritual, intellectual, occupational, and environmental factors. Emotional distress impairments on student academic success are well documented (De Luca et al., 2016; VanderLind, 2017). There is growing literature on the relationship between a sense of belonging and student academic success (Gopalan & Brady, 2020), which is one aspect of social wellness. Cultural wellness could include students feeling that their racial, ethnic, and other identities are valued, and there is plenty of evidence of how harmful it is for students when this is not the case (Corona et al., 2017; Haft et al., 2022; Hussain et al., 2021; Qeadan et al., 2022). While there may be less research on spiritual wellness on college campuses, instructor interest and encouragement can influence students' spiritual

journeys (Riggers-Piehl & Sax, 2018). Intellectual, occupational, and environmental aspects of wellbeing undoubtedly contribute to a student's success in college.

Wellbeing in social work education

In social work education, researchers have been imploring chairs, advisors, and faculty to consider how students are affected by the larger environment and better address their wellbeing needs. We use the term wellbeing to include the specific areas of wellness noted in wellness models, but also more informal ways that educators might perceive contribute to students' contentment and health. In a qualitative study of social work students facing homelessness or food insecurity, Crutchfield et al. (2020) specifically identify social work educators as having a responsibility to connect students to resources, destigmatize help-seeking, and strengthen campus resources to meet student needs better. Another study of social work student food insecurity noted an ethical mandate for social work educators to centralize student health and wellbeing within their priorities and mission statements (Miles et al., 2017). Scheffert et al. (2021) emphasized the need for social work programs to attend to stressors affecting students after their wide-ranging study of social work student needs during the COVID-19 pandemic. Those researchers explained that the students in programs with greater academic support appeared to have less stress (Scheffert et al., 2021). Todd et al. (2019) noted the plethora of mental health needs among social work students and urged social work academics to have clear strategies and protocols in place for these situations. Evans et al. (2021) shared the distress of doctoral social work students during the pandemic and recommended modeling effective self-care and connecting students to resources.

Amidst this growing appreciation of college student wellbeing needs and the university's responsibility to address them systematically, there is also increasing scholarship on teaching and learning around social work educators' efforts to strengthen student emotional regulation. The literature describes classroom activities designed to help students improve their mindfulness, attend to self-care, and enhance coping strategies (Apgar & Cadmus, 2022; Curry & Epley, 2022; Grise-Owens et al., 2018; Ogden & Rogerson, 2021). The 2022 Educational Policy and Accreditation Standards (EPAS) (Council on Social Work Education CSWE, 2022) established by the Council on Social Work Education (CSWE) explicitly articulates that self-care be integrated into the social work curriculum as a part of BSW and MSW degree expectations in the United States. With 750 institutions accredited at the BSW or MSW level in the United States (Council on Social Work Education CSWE, 2023), thousands of students are now expected to develop self-care capacities during their social work training. Despite these trends, there is limited research on social work educators' views on addressing student wellbeing. Gaining a better sense of how social work educators think could help administrators better understand their faculty's efforts and help faculty think through their multiple roles with students.

The purpose of this research is to learn how social work educators in the United States think about student wellness needs and how they make decisions about addressing student wellness needs. As a part of a larger quantitative and qualitative survey exploring how social work educators think about student wellness, educators were asked to consider their sense of responsibility toward student wellness. This descriptive study offers insights into how educators think about these issues within their teaching roles.

Methods

This research was approved as an exempt study #(redacted) from (redacted). A convenience sample of social work educators was obtained through national listservs and contacts sharing the survey at schools of social work across the United States. Respondents indicated informed consent within the survey and data was collected anonymously. A separate link offered participants a chance to win a gift card for participation. One hundred twenty-four respondents completed at least one of two open-ended questions about their sense of responsibility toward addressing social work student wellness. 78.2% of the respondents were female, 20.2% identified as male, and one individual identified as non-binary. The ages of the educators ranged from 31 to 75, with a mean age of 51.2 years. Respondents identified as White (83.9%), Black (7.3%), Asian (2.4%), Latino or Hispanic (2.4%), Multiracial (1.6%), and 2.4% did not share their racial or ethnic identity. 98.4% of the responding social work educators had a social work degree. Two-thirds of the respondents (67.7%) held a doctoral degree for 67.7%, and 31.5% currently had a master's degree as their most advanced educational degree. Regarding the educator's primary roles, 62.1% were tenured or tenure track faculty, 10.5% were non-tenure track faculty, 10.5% were field educators or supervisors, and about 16% identified as advisors, part-time faculty, administrators, doctoral students, or staff—just over half of the respondents (56.5%) identified as clinical social workers.

The survey included a description of nine focus areas of student wellness (University of Houston, n.d.), in addition to demographics and other questions. Later in the survey, educators were asked to respond to two open-ended questions that were used to gather their perspectives on addressing student wellness needs:

- (1) What guides your sense of responsibility to address social work student wellness needs?
- (2) Has your sense of responsibility to address social work student wellness needs changed over time? If yes, how so?

One hundred twenty-two social work educators answered the question describing what guides their sense of responsibility to address student wellness needs. One hundred twenty-one social work educators responded to that question that asked whether their sense of responsibility to address student wellness needs had changed over time.

Inductive content analysis (ICA) is a method of qualitative research where the codes arise from the text being analyzed and the results stay close to the data (Vears & Gillam, 2022). ICA begins with reviewing the data to get an overall sense of responses (Vears & Gillam, 2022). Each question was grouped with the related responses in a word document. Each response was labeled with a code describing the main concept. Often, an answer from one respondent would include more than one concept, so each code was acknowledged and counted. Multiple rounds of coding were conducted in order to refine and clarify the categories (Vears & Gillam, 2022). This allowed for similar codes to be grouped together as the overall themes became more evident (Kyngäs et al., 2020). As this was a descriptive content analysis conducted on brief sentence responses and the resultant codes are close to the data there is minimal interpretation in the results, but categories were quantified based on frequency of identification. Resulting themes and

categories were reviewed among the research team for divergent perspectives or disagreements to strengthen trustworthiness.

Results

Instructor sense of responsibility towards student wellness

Educators demonstrated three motivations informing their sense of responsibility to respond to student wellness concerns: Student-focused, Personal, and Professional. (See Table 1). Three categories focused on students (Student Need, Learning Facilitation, Better Prepared Social Workers), two focused on the educators' perspective (Personal Experiences, Personal Values), and two focused on the educators' professional experience (Professional Values, Professional Role, School Culture). Representative quotations are also presented.

Student focused

Almost half (60/122) of the responding social work educators described students as the motivation behind their sense of responsibility to address student wellness needs. These responses articulated that a belief about what was best for students guided their decisions. Three distinct themes emerged: Better Prepared Social Workers, Student Needs, and Learning Facilitation.

Better prepared social workers. The most common student-focused theme was Better Prepared Social Workers, identified by a fourth (30/122) of the social work educators. These educators articulated that addressing student wellness needs in the classroom would help these students become social workers who can better meet client needs, 'I feel we should assist our students with their ability to function as clinicians, which requires attunement to their needs. Without attunement to our own needs, we cannot be efficient clinicians or, really, social people in general.' The educators emphasized that future social workers need to have enough regulation that they can be present to others, 'recognizing the importance of a grounded social worker in meeting the needs of vulnerable populations will impact their practice, now and in the future.' They often described the need to help students learn self-care early to reduce future burnout, 'It is also a sustainability issue, for if students fail to adequately support their own wellness, they are unlikely to last long in the field of social work.'

Table 1. What guides your sense of responsibility to address student wellness needs?

Motivation	Themes	Mentions
Student-focused (60)	Better Prepared Social Workers	30
	Student Need	21
	Learning Facilitation	14
Personal (55)	Personal Values	45
	Personal Experience	12
Professional (43)	Professional Values	32
	Professional Role	13
	School Culture	2

Student need. Another frequent student-focused theme was Student Need, identified by a sixth (21/122) of the social work educators. These educators described how witnessing student needs prompted them to take some responsibility for addressing them, ‘Noticing burnout among the students or when a major crisis occurs’. These educators told how some financial or emotional needs were quite intense, and that hearing or reading about their stories prompted the educators to act, ‘they are suffering so openly.’ They recognized many social work students had endured previous difficult experiences which compounded their stressors, ‘the difficult life experiences that a majority of my social work students have already experienced prior to entering either the BSW or MSW programs.’

Learning facilitation. Learning Facilitation was the final student focused theme identified by 11% of the sample (14/122). These respondents described how addressing student wellness needs was necessary to help students get the most from their education. One instructor described ‘I understand that students need to have basic needs including emotional health met or they aren’t able to learn. As an educator I take this into consideration. I want my students to learn and therefore I must also find ways to assist with their health and wellbeing.’ Another instructor simply said, ‘a pedagogy of kindness,’ recognizing an integrated teaching philosophy that recognizes the connections between student wellbeing and capacity to learn.

Personal

Forty-five percent (55/122) of the respondents explained a personal motivation for addressing student wellness needs. These educators recognized that opinion or belief guided how they decided to address student needs. The two distinct themes were Personal values and personal experiences.

Personal values. Personal values were the single most identified theme guiding the social work educators in this sample. Thirty-seven percent (45/122) of all respondents explained that their values helped guide them to decide to address student wellness needs. They described caring about their students, their empathy, and their value system and saw it as a necessary response based on who they are as people, ‘Helping address student wellness needs demonstrates respect for their lives. Plus, it’s just the right thing to do as a human being.’ Often these responses were very brief, communicating a ‘self-evident’ conviction of the necessity, such as ‘my own personal values’ and ‘my personal sense of responsibility for the world.’

Personal experiences. About 10% (12/122) of the sample explained that their personal experiences guided them to determine how to address student wellness needs. Some participants described situations from when they were students, ‘having been a student very recently, I remember what it is like to deal with the pressures of academics and work balance. I don’t want to push my students over the edge but to model making it ok to take extra time when needed.’ Other respondents alluded to a change in personal perception over time or their recognition of what they have needed for themselves as social workers, ‘I also feel like no one every taught me to consider my wellness as a social worker until I entered clinical supervision, 5 years into my social work career.’

Professional

Thirty-five percent (43/122) of the social work educators noted that a professional expectation motivated them to address student wellness needs. These educators viewed a sense of responsibility through their professional obligations. Three themes became evident: Professional values, Professional roles, and School Culture.

Professional values. Over a fourth (32/122) of the social work educators identified that their professional values guided their sense of responsibility. Many participants noted the NASW Code of Ethics as a reason for addressing student needs ‘It is part of our Code of Ethics responsibility to promote justice and practice with integrity,’ and some included accreditation standards ‘NASW Code of Ethics and CSWE Social Work Competencies.’ Other educators noted more general ethical obligations as social workers or educators, ‘Professional ethics.’

Professional role. About 10% (13/122) of the social work educators described their professional role as guiding their efforts to address wellness, distinct from values or pedagogy. They saw these decisions as a part of their obligation as an instructor ‘mentor role’ and social work professional ‘my responsibility to my profession.’ Some educators seemed to see their instructor role as an expansion of their social work role, ‘students are my constituency, and systemically I am responsible for adequately supporting them as they learn to support others in our shared constituencies.’ Alternately, some vocalized how the decisions they made reflected their effort to have healthy boundaries or to gatekeep ‘my role as an instructor and maintaining appropriate boundaries.’

School culture. Fewer than 2% (2/122) of respondents identified School Culture. Both educators explained that expectations of the department or school influenced how they addressed student wellness needs, ‘It is a small school where the expectation is for personal connection and support’ and ‘University Mission, Program Mission.’ Because it speaks to the affect a department can have, this rare theme seems distinct and worth noting.

Changing sense of responsibility

These educators were also asked if their sense of responsibility to address student wellness needs changed over time. One hundred twenty-one social work educators responded directly to that open-ended question. Five responses did not specifically answer the question, but the other 116 are represented in [Table 2](#).

By far, most respondents indicated that their sense of responsibility had changed during their time as educators. About three-quarters of the respondents stated that they had developed a greater responsibility to address student wellness needs over time, ‘yes, the longer I’ve been in academia, the more the needs for student wellness have been in focus. Students heading to higher education or in higher education have had to deal with many mass tragedies and the pandemic as well as a technological world.’ Several educators described how their understanding of teaching and learning changed, ‘yes, I’ve grown more flexible and more willing to give students “the benefit of the doubt.” I feel as though times are particularly challenging with the pandemic,

Table 2. Social work educator sense of responsibility changes.

Change over time?	How So?	Frequency?
Yes	Sense of responsibility had increased over time	86
	Sense of responsibility had decreased over time	3
No	No change in sense of responsibility	27

social unrest, and war. It wears on people. Allowing students to prioritize their wellness before responding to an e-mail or working on an assignment is an ethical obligation we have as educators.’ Some spoke most passionately about this change in themselves,

Definitely. My first few semesters, I bought into the lie of academic rigor. That changed about 2 years in to teaching when I realized students did not see me as effective. I had to relearn what teaching and learning meant. Everything comes down to student wellness. If they are unwell, then learning is difficult. Focusing on student needs is our future.

Other educators described changing because of their increased awareness of student struggles, ‘Yes, I’ve become more aware of their financial struggles and about the additional stresses, difficulties, traumas, our BIPOC students experience.’ Twenty-six of these educators voluntarily identified COVID as one of the reasons for this change in their view, ‘Yes. The COVID-19 pandemic has reinforced the need for mental health, social health, and overall health (self-care).’

Three respondents suggested that their sense of responsibility for student wellbeing had decreased over time. These infrequent answers are important to consider and provide insight into how some educators struggle with this aspect of education. In two cases, the individuals described shifting to administration, where they had less student contact, and an associated decrease in time and capacity to assist, ‘I used to be more dedicated. As an administrator I have reduced student contact and I am also pretty burnt out from my own life circumstances. I have fewer internal resources to invest in others.’ One educator described the decrease in responsibility as an example of more appropriate boundaries that were better for themselves and the students, ‘Yes- At the beginning of my career as an educator, I felt more responsible/obligated, however similar to my clinical work, I have learned how to set appropriate expectations and boundaries for my own mental health.’ They perceived this change as the benefit of growing skills in teaching.

Discussion

Considerable variation exists in how social work educators think about their responsibilities to student wellness. Most respondents indicated having some responsibility toward student wellness needs, either motivated by concern for the student, personal conviction, or professional responsibility. Some educators, however, emphasized that this was not a part of their role or would indicate problematic boundaries. Careful and intentional thought was evident in both perspectives and worth exploring to understand student experiences and instructor expectations better.

Student-focused motivations included instructors wanting to support students just because they needed it or to help them learn better now and perform better as social workers later. Social workers are trained to ameliorate clients’ needs. While there is

differentiation in the role of educator and social worker, and students are not clients, the pull to reduce distress is natural. As many of our educators articulated, there is a connection between student wellness and the capacity for deeper learning or career longevity. Studies have demonstrated that students learn better when their basic needs are met (Balzer Carr & London, 2020; Coakley et al., 2022; Haskett et al., 2021). Students who cannot meet their basic needs are at a disadvantage in the learning environment, which can negatively impact the quality of their preparation as social workers (Baglow & Gair, 2019). Educators recognize that helping students learn to manage their emotions will contribute to better learning (Hill et al., 2021). Indeed, practitioners in the field with more self-care practices and reflexivity may also remain in the field longer and have more satisfactory jobs (Curry & Epley, 2022).

Higher education literature demonstrates that instructors' personal experiences can influence how they perceive their roles and obligations, which aligned with our study's identification of personal history influenced educator views of addressing student wellness. Educators described how their own experiences, either what they endured as students or learned as practitioners, could affect how they thought about their role with students. Experientially induced empathy or earned understanding of challenging academic situations was sometimes the impetus behind the respondents' efforts to support students. Brissett (2020) studied faculty of color and their views on mentoring students of color. A common theme included a profound sense of responsibility these faculty felt for their students, particularly because of their personal experiences with mentors and their perception of the students' needs. Prock et al. (2019) emphasize the pressure and responsibility LGBTQ social work faculty experience to mentor sexual minority students and serve as role models. Being a member of an oppressed group is profoundly different from using one's experience as a social worker or social work student, however, both studies support our research that social work educators may be motivated to address student wellness because of their personal experiences and needs. Reflexivity is valued in social work practice, and recognizing the impact of personal experience on educators' interactions with students could be a valuable reason to encourage more reflexivity among instructors.

The two most described motivations to address student wellness needs were personal and professional values. Numerous instructors explained that their efforts to support student wellness were a part of who they were as people and how they lived out their values. Mirick and Davis (2021) found that social work students appreciated and desired the non-academic support they received from instructors during the beginning of the COVID-19 pandemic. These students described that they value concrete access to needed resources and how some instructors provided them with emotional support. For many educators, this expression of care grew as a natural response to living out their values. Several educators cited values directly from the NASW Code of Ethics. For these educators attending to student wellness needs was a demonstration of their ethical obligations as social workers.

The professional role was the one motivation that seemed to guide educators both to (and not to) address student wellness needs. Related to personal experiences, values, and pedagogy, many educators experienced their actions to support students aligning with their roles as educators. Recent literature would concur. Holley et al. (2022) articulate the need for schools to consider the welcoming climate they create

and the need to actively promote the utilization of wellness resources. A qualitative study of students struggling with food insecurity or housing displacement identified that the instructors who ‘do more than teach’ were most valued (Guzzardo et al., 2021, p. 51). These were instructors who mentored, showed concern for student wellbeing, made appropriate referrals, and demonstrated flexibility in their teaching pedagogy, and the students felt respected and cared about (Guzzardo et al., 2021). Another qualitative study of students in Australia found that instructors’ concern and enthusiasm could increase engagement with multi-stressed students who were struggling with compromised wellbeing (Hews et al., 2022). If instructor attitude can affect students, then it is vital to explore how social work educators think about their role with students. Social work educators underscore aspects of trauma-informed teaching to use when working with students in crisis and urge instructors to be flexible, to help refer students to resources, and to foster self-regulatory skills in students within classes (Hitchcock et al., 2021).

The most commonly described reason for resistances toward addressing student wellness needs for some social work educators was their sense of professional boundaries and role. They perceived students to be responsible for themselves. Alternately they perceived that addressing student needs would be stepping outside their teaching roles and, therefore, problematic. This may reflect internalized boundaries, a traditional approach to education, or a realistic assessment of the instructors’ limited capacity to change the problematic systems the students are in.

Implications

The diversity of motivation and interest in addressing social work student wellness needs has implications for both social work educators and higher education administrators. This data suggests that social work educators in the United States are growing in their sense of responsibility to address student wellness needs, whether due to personal or professional values or an appreciation for the interconnections between learning and wellbeing. Educators should be mindful that their colleagues might view the relevance of student wellness challenges quite differently than they themselves do. This can impact how educators work together to create policies and practices in their schools and departments. Administrators should consider that this inconsistency between instructors could contribute to confusion for students around whether or not to disclose wellness stressors or expect support for needs beyond the classroom. These potential differences in perspective could provide an opportunity for social work faculty in a department or school to dialogue about student needs and develop a shared vision around both boundaries and intervention opportunities when student wellness needs emerge and impact student learning. This dialogue and development of shared expectations could strengthen educator clarity around the department’s mission and offer a more consistent learning space for students.

While most of the respondents suggested they felt responsibility toward addressing students’ vaster wellness needs, these research questions did not investigate how they intervened or what supported these interventions. Educators are limited in what they can offer students and what knowledge or authority they have to address needs. The larger university environment could influence educators’ perception of the responsibility they

had to assist students, a few of our respondents alluded to School Culture as affecting them, but it is also possible that the university or department systems that might place burdens on students that interfere with wellness or restrictions on educators around how they can support students. Educators who are addressing student wellness needs are undoubtedly navigating an assortment of supports and challenges to doing so in their university systems. Better understanding how educators prioritize learning and student wellness within the demands of their roles and accreditation standards, as well as university environments, will continue to demand exploration.

Strengths and limitations

A strength of this research was that it named and explored a shift in social work education in the United States, a recognition that some educators are perceiving attention to student wellness as a part of their educator role. This provides an opportunity for intentional reflection and discussion about the responsibilities of social worker educators. In addition, perspectives of macro and micro social work educators were gathered across various professional roles.

Limitations of this research reflect potential response bias and limited racial and gender breadth. While most respondents did indicate increased attention to student wellness needs during their time as educators, it is possible that educators more prone to attending to student wellness were more likely to respond to this survey. Perhaps similar data gathering under a broader educational perspective might reduce any response bias. It is also possible that the extent to which educators do or do not feel responsible for assisting students may vary by personal history, such as varying experiences of discrimination, economic need, and mental or physical health. These variations may or may not be accounted for in racial and gender differences, but greater diversity and exploration of these possible variables could strengthen this area of study and give more prioritization to different voices. A future study could explore with more detail the characteristics of educators who do and do not feel a greater sense of responsibility, including cultural contexts.

Conclusion

Over the years, legal and social expectations have varied to the extent universities have *in loco parentis* responsibilities, where higher education institutions are expected to provide and oversee for students as a parent would (Carlisle, 2017) rather than limit their obligations to knowledge-building. As universities have been attributed ‘in loco parentis’ status they were seen to take on additional responsibilities for students’ success.

Social work educators have ethical, pedagogical, and professional reasons for deciding whether or not and how to address student wellness needs. Social work educators are trying to find the balance in their professional roles as values, pedagogical beliefs, and the reality of intense student distress inform them. For the majority who completed this survey, finding a way to support student wellness was a part of their responsibility and often a part of their pedagogy. For others, they saw their responsibility lay in teaching effectively, and they expected students to be ready and prepared for maximal learning. With the new EPAS articulating self-care as a needed competency for students to develop

as they become social workers and lessons learned from the pandemic, there may be more professional expectations of the need for attending to student wellbeing in the classroom. Further exploration and guidance may be valuable as social workers, many of whom have worked hard to develop professional boundaries as clinicians or practitioners, are being asked to modify boundaries in the face of a growing understanding of student wellbeing on learning and the systemic injustices, including environmental pressures affecting our students. Navigating how and when to address student wellness needs, mindful of the larger environments students and faculty are contending with, will continue to influence student learning and the development of future social workers.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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