Equality, Diversity and Inclusion:
UK Technicians’ Experiences During the Covid-19 Pandemic
Introduction

STEMM-CHANGE is an EPSRC-funded Inclusion Matters project driving a positive change in culture and practices in equality, diversity and inclusion (EDI) across Science, Technology, Engineering, Mathematics and Medicine (STEMM). The STEMM-CHANGE programme has several linked projects that will enable a step change in approaches to promoting EDI in the workplace. It is led by a multi-disciplinary team at the University of Nottingham in collaboration with a diverse range of project partners.

STEMM-CHANGE takes a team science approach and acknowledges the diversity of staff roles that contribute to the research effort. Technicians make vital contributions to universities and research institutes. Their expertise enables teaching, research, knowledge exchange and outreach activities. This is being increasingly recognised through the Technician Commitment, a sector-wide initiative to ensure visibility, recognition, career development and sustainability of technical skills and roles within UK higher education and research. Many institutions have made progress towards these goals by offering increased training opportunities, supporting professional registration, finding innovative ways to recognise technicians’ contributions and improving technicians’ representation and inclusion at decision-making levels. The Technician Commitment currently has 92 institutional signatories and a number of supporter sector bodies.

Historically, initiatives to advance EDI in higher education have focused on the academic and research community. It is vital to appreciate that EDI challenges do not just apply to these staff groups. The expansion of the Athena Swan Charter to include professional and support staff has ignited a greater interest in EDI of non-academic staff across universities and research institutes. Their expertise enables teaching, research, knowledge exchange and outreach activities. This is being increasingly recognised through the Technician Commitment, a sector-wide initiative to ensure visibility, recognition, career development and sustainability for technicians working in higher education and research. They also play a fundamental role in the development of technical skills that students require to pursue a career in research, teaching and knowledge transfer. Members of the technical community from all research areas at all universities and research institutes across the UK were invited to contribute their workplace EDI experiences via an interview or a written submission. 65 people participated. Through technicians’ own words, the project brings to light their experiences of barriers, bias and discrimination, as well as instances of good practice experienced by those participants.

STEMM-CHANGE has been working with Technician Commitment signatories the University of Liverpool and the John Innes Centre, and project partners the Science Council to highlight and address EDI challenges facing technicians alongside academic and research staff. In 2019, STEMM-CHANGE published the report “Equality, Diversity & Inclusion: A Technician Lens”. For the first time, using quantitative data and qualitative findings from national workshops and presentations, the report identified key EDI challenges facing the technical community and made recommendations to institutions to advance equality for everyone working in the sector.

The present stage of the STEMM-CHANGE team’s work takes this research further by qualitatively exploring equality, diversity and inclusion through the everyday, lived experiences of technicians, to get behind the data published in the initial report. There are several advantages to undertaking this follow-on qualitative research. It allows in-depth and detailed exploration of the EDI experiences of the technical community in their own words and allows participants to raise any issues and highlight examples of best practice that may not have previously been considered or probed due to the broadness of a quantitative survey approach. It also offers time and space for often complex issues to be described and fully illuminated; when shared through research outputs, this process empowers participants by giving voice to those who may be facing challenges in the workplace. Analysing narratives of personal and vicarious experience is also a proven tool in social science research to empower workplace groups, enabling them to share their workplace EDI experiences, often for the first time.

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The technical community in Higher Education & Research

The technical community has a vast range of job titles including technicians, skills specialists, technologists, experimental officers, laboratory managers – and is recognised as being critical to the success of the UK’s higher education and research sector. A highly skilled workforce with a diverse range of expertise, technicians underpin the primary activities of higher education and research institutions, providing the technical excellence essential for research, teaching and knowledge transfer. Alongside this, many technicians are researchers and teachers in their own right. They also play a fundamental role in the development of technical skills that students require to pursue a career in research, academia and/or industry. The Technician Commitment, with support from the Science Council and the Gatsby Charitable Foundation’s ‘Technicians Make It Happen’ campaign is working in parallel with signatories and supporters to ensure visibility, recognition, career development and sustainability for technicians working in higher education and research, across all disciplines.

Covid-19

This research was undertaken in the midst of the Covid-19 pandemic. This report highlights a number of EDI issues experienced by the participants. Whilst sometimes long-standing, these issues have been affected by lockdowns and Covid-19 safety measures. In light of this, and in order to provide timely information and findings related to the pandemic, this report provides interim findings on the research journey to date. It highlights new issues that have arisen, as well as the exacerbation of existing ones, but also identifies instances of good practice and positive changes in the working conditions of technicians in higher education and research during Covid-19. By drawing on examples of best practice as evaluated by the participants themselves, the report outlines positive steps to advance EDI in technical workplaces both during and beyond the pandemic.
Methodology

Members of the technical community at all universities and research institutes across the UK were invited to participate in this project through open calls advertised through social media, the STEM-M-CHANGE website, the Technician Commitment network of institutional leads and the Technical Managers in Universities (TMU) network.

Ethical approval was granted by the University of Nottingham.

A total of 65 people submitted responses: 27 took part in face-to-face virtual, semi-structured interviews and 38 submitted written responses online. The data in this report is reproduced in the participants’ own words. In compliance with the University of Nottingham’s research ethics policy, all identifying features have been redacted (marked with [square brackets]) to ensure anonymity.

Participants were informed that the project would explore technicians’ EDI experiences before and during the pandemic. There was no obligation to participate and therefore participants likely represent those who had an interest in or experience of EDI issues that they were willing to share. Whilst this report does not purport to represent the experiences of all technicians in the UK, it represents an in-depth qualitative exploration of issues identified by those 65 participants.

59 participants provided demographic information. The charts illustrate the gender, ethnicity, roles and age of participants, and whether they reported a disability.

Due to rounding, some totals may not correspond with the sum of the separate figures.
Key findings

The technical community has been, and continues to be, at the forefront of the response to the Covid-19 pandemic. Technicians have shut down and maintained buildings, materials, animals and specimens, conducted essential and Covid-19-related research, been instrumental in reopening campuses and the return to face-to-face, blended and online teaching and learning. Technicians have also worked from home or experienced periods of furlough. We had a target number of 50 participants for this qualitative study and in the end a total of 65 technicians shared their narrative experiences with us, with submissions from across the four different countries of the UK. These qualitative responses are not intended to be representative of the experiences of all technicians working in all of the different areas of universities and institutes in the UK – rather, they present detailed accounts and explorations of key EDI themes that emerged in the quantitative survey. These narratives shed light on the importance of sharing experiences that can be used to inform positive social and cultural change. This report focuses on six key areas where the participants felt the pandemic has had a particularly significant impact on EDI matters. Importantly, in many cases, participants were not asked directly about these issues, but these themes emerged from their narratives – an established method of ‘active’ interviewing in the humanities and social sciences. These themes are as follows:

Flexibility and work-life balance

Most participants reported working from home at least part-time during the pandemic, particularly during the first lockdown. They also reported that they had worked flexibly, often working non-core hours around other commitments. Benefits have included improved work-life balance, better mental health and increased work productivity. While the majority were keen to return to site, many hope to continue working from home at certain times during the week/where possible and/or expressed the desire to work more flexible hours, based on their positive experiences of needing to do this at short notice from March 2020.

Communication

Workplace communication practices changed suddenly and without any opportunity for planning or consultation during the pandemic, with significantly increased use of digital technology. Just over half of participants in the data reported feeling excluded or marginalised by communication problems. These have included the following issues:

- changes in the ways that teams interacted, leading in some cases to miscommunication
- a lack of information from those in positions of authority and breaks in chains that typically allowed key information to ‘trickle down’
- changes in working relationships, which have led to some technicians feeling more valued, whilst others have had negative experiences regarding the manner in which they have been spoken to, particularly by academics

Ethnicity

Five participants observed increased Sinophobia towards people from Chinese ethnic backgrounds, as a direct consequence of the pandemic, witnessed in public spaces and at times on campuses. Another five participants raised concerns about return-to-work risk assessments of people from BAME communities.

Mental health

Numerous participants were impressed by employers’ efforts to support the mental health of the staff community both before and during the pandemic. Just over half of all participants reported mental health problems principally relating to social isolation, changed working practices, guilt about not being able to work effectively and anxiety about return to work and possible job losses. 12 respondents reported frustrations that the available institutional support was not filtering down through senior and middle management to help them.

Parenting

Whilst only six participants in our data sample reported long-standing parenting issues prior to the pandemic, school and nursery closures led to 36 participants observing that parents were struggling to balance work and childcare responsibilities. Several women reported that they have shouldered the greatest burden of childcare and home-schooling during lockdown, often because they have a male partner whose workplace was self-described as being less flexible.

Disability

A third of respondents noted that colleagues were absent from site due to shielding requirements. There were concerns that staff have experienced a loss of privacy as their medical conditions had become more widely known. Seven participants reported that they or their colleagues felt they had been unfairly excluded from the workplace when employers prevented them from working on-site because of perceived risks to their health. Six participants also reported negative attitudes amongst some line managers and colleagues towards those who were shielding.
Flexibility and work-life balance

The majority of non-furloughed technicians who participated in the research reported that they had switched to working from home at least part-time. For some, this predominantly lasted during the initial lockdown period and they returned to site either full-time or part-time upon reopening of buildings. For others, the switch to home-working has remained ongoing.

The vast majority of participants expressed a desire to work from site most of the time. They pointed out that they missed practical work, were unable to carry out many of their duties and missed contact with colleagues. Others disliked the lack of separation between work and home and reported feeling ‘on duty’ more often:

‘It’s not work, work isn’t doing it, I think it’s a personal thing, you just feel you need to be available, you need to prove because you’re working from home that you’re working at home. I usually work at home [one day a week] anyway but this is a different type of working from home.’

However, most participants want to retain the ability to work from home at times, either on an ad hoc basis or as part of a fixed pattern, for example, one day per week. Participants described several benefits of working from home. For many, the ‘lack of commute’ was welcome, saving time and money, avoiding early starts and allowing more free time or time to be spent on other commitments. Others felt they worked more efficiently at home without the distractions on-site:

‘I would like to be able to work from home but one day a week to have time to catch up with emails, which I have a hard time doing on site because when you’re in a technical role you’re constantly asked for something, to be disturbed, somebody knocks on your door, “Can you do this?” “Yes, of course.” So I would love to be able to work from home one day a week.’

‘We’ve not got our own offices and the students all come in [my office] so you just can’t concentrate and it’s not that productive because it takes twice as long to do anything because you’re forever interrupted.’

For some, working at home has significantly improved their home-lives, allowing them a better work-life balance:

‘It’s been good being at home to be honest with you. Probably having a lot more time at home to do things, whereas previously you’d be leaving early for work and home late on. It makes a massive, massive change that you’re in the house most of the time, even when you’re sitting working you’re still accessible for the kids and stuff.’

Reports were mixed about technicians’ workload during the pandemic, ranging between those with frustratingly little to do at times to those who were busier than ever. Most notably, some of those whose workload had increased still considered that their work-life balance had improved overall because they were working from home:

‘I would say I’m working more... but it’s different because I’m now based at home more so actually my work-life balance is great – I’ve got my washing on as we speak – that sort of stuff.’

‘The day is busier and longer now working at home, but less stressful. [...] I have worked more, but it has given opportunities to balance time better depending on workload and needs while still putting in excess of contracted hours.’

Technicians also reported preferring to work flexibly, whether on-site or at home, and many felt that they were more productive when they could adapt their hours to suit their own needs and the needs of their families:

‘It gives me the freedom to be productive or to rest if I need to, and carry on later. I’d definitely like to continue with the opportunity to work from home. I’m more productive in terms of my desk work, for sure.’

‘I feel like most of the change has been very positive for me. I’m able to work to my natural rhythms much better and get much better sleep, on the whole, which has been very good for my mental health.’

Many participants have enjoyed working staggered hours on-site, varying their start/end times. For some, this has helped with childcare or has allowed them to work around the peaks and slumps in productivity. Some respondents reported that their universities were considering staggered working patterns for when students returned to campus to allow more lab-based practicals to be delivered with lower room occupancy. While there were concerns about how mandatory shift patterns would affect those who preferred or needed to work core hours, the choice to vary working patterns was popular:

‘More flexible arrangements would mean we could start and finish late to cover labs as required. Personally under normal circumstances my preferred hours would be to commence work early and finish early when not needed in a lab.’

The responses show that many technicians have benefited from working from home during the pandemic and particularly appreciated the increased flexibility to adapt their hours. The majority of respondents were in favour of retaining the ability to work flexibly longer-term, and many were keen to be able to work from home at times, feeling it would bring advantages to their productivity, work-life balance and mental health.

Communication

Participants reported that the ways in which they communicated with colleagues changed rapidly during the pandemic. This was largely down to the relocation of teams from sites to home, as well as the necessity of maintaining social distance and limiting occupancy of buildings upon returning to work. Participants reported positive and negative experiences of digital communication.

Knowledge and information

Numerous participants remarked that a switch to digital technology such as MS Teams and Zoom had actually improved communication during the pandemic:

‘The regular Teams meetings both departmental and University-wide have created a greater sense of community and communication has been effective and well-managed.’

‘The weekly 1-2-1s with my boss feel more respectful than the previous battle to get a meeting with him. Lab meetings mostly work well online and are a bit shorter now.’

However, participants widely reported that, under normal circumstances, informal conversations were an efficient means of addressing workplace queries, and also an important source of team cohesion. These conversations commonly took place informally, in corridors, canteens and offices, and technicians in our data reported missing these opportunities:

‘There have been some frustrations where I have felt I could better resolve a situation if I could have a physical conversation with someone.’

‘It has become clear in Covid-19 that there has been no information flow.’

‘My academic colleagues often hear updates or policy changes before myself, as they are involved in higher level meetings or are copied into emails which do not include technical stuff. When we are in the office, this would immediately be passed to me verbally, but when we are apart, I may not hear for several days.’

Others reported that decisions were taken about their work without their involvement:

‘The academics have been better treated. They are more in-the-know. Things aren’t being decided about my work when I go back without consulting me.’

Whilst some teams used instant messaging and online coffee breaks to replicate these informal chats, some participants felt that these were insufficient to replace in-person social contact:

‘WhatsApp and Teams just don’t cut it for a quick, “Can I ask for some help?”’

During the pandemic’s first full lockdown period, chains of communication were really disrupted, particularly when technicians were working off-site. Many reported feeling excluded or marginalised by a lack of direct communication and felt that knowledge and information was not filtering down to them:

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Some respondents reported that they or their colleagues had experienced barriers to working from home and interacting with their team, which they felt were more commonly experienced by the lowest paid in the organisation. As one line manager explained on behalf of members of their team: ‘If you’re poorly paid, if you’re on the lower end of the pay scale, the chances are you’re going to be in accommodation that probably isn’t that easy to negotiate working from home. And certainly within the wider team there are techs who don’t have broadband. Can’t afford it.’ Indeed, over a fifth of participants reported a lack of access to the technology essential to working and communicating with their teams from home. When loan equipment was available, some participants described occasions where academic colleagues were prioritised. As one technician explained: ‘Of course because of our role, many of us were left out.’ 14 participants reported that they or their colleagues did not have internet access and struggled to perform basic tasks from home, such as checking email: ‘I found it very difficult as I do not have internet in my house and had to use a mobile hot-spot which was very temperamental and it took me literally an hour just to get into my emails.’

A similar number of participants related that they lacked a suitable space in which to work, reporting that they did not have access to basic equipment such as desks, computers and printers, which can have knock-on effects on health and wellbeing. One participant told of the following experience: ‘I do not own a table or chair at home so my back struggled.’ Another technician living and working in one bedroom explained, ‘I live in my family home with three younger [family members]. Therefore, it has been difficult to be able to complete my work in a quiet, relaxed environment.’

These observations about the home set-ups of some technicians illustrate important inequities to successful home-working.

Language barriers and miscommunication

Some participants reported that miscommunication was more common when using written methods such as email: ‘What I have seen is staff who are not used to admin type work react very badly to having to communicate via email etc. In some cases, where they have been asked for their input, it has been perceived as harassment.’ Another participant reported that her manager was ‘a bit cold and unconcerned’ based on ‘the tone of her emails’, but this perception changed when they met on-site: ‘I was wrong [...] she could not have been more caring towards me when she saw me. I think we all miss that face-to-face interaction.’

Changed methods of communication may also be particularly disadvantageous to speakers of English as an additional language. As another technician explained: ‘Sometimes it’s difficult to gauge the tones of email or even when you write emails, it sounds much harder than your tone. English is not my first language and sometimes I miss some of the words that people write’ and ‘Why did they write that?’ It’s easier to have a misunderstanding via email than to have it with people in front of you.’

Another example was reported of a colleague who seemed to have become ‘increasingly quiet during team meetings’ whilst working from home: ‘Another colleague rang her to have a more personal talk and check that she was okay. She attributed her quietness to the fact that, living at home, she is rapidly getting out of practice speaking English and is losing confidence in doing so.’

These linguistic observations from participants raise important points regarding how changes in working practices can affect inter-cultural communication.

Communicating with furloughed staff

Participants highlighted challenges in relation to communication and furlough. Government rules prevent furloughed staff from carrying out business-related tasks and receiving communications about work (as opposed to general employer updates or support). Six technicians reported that this led to them or their furloughed colleagues being cut out of conversations about matters that directly affected their roles: ‘There was an issue with […] a piece of kit I am responsible for that needed an engineer to fix it and they were discussing this while I was furloughed […] They were making decisions about the work that I do without discussing it.’

Whilst there is little that universities and institutes can do to include furloughed technicians in decision-making whilst UK Government rules remain in place, they can ensure that all staff understand the source of communication restrictions and that those who were furloughed are promptly included in all relevant conversations when they return to work.

Workplace relationships

Ten participants, particularly those contributing to Covid-19 research or reopening buildings, noticed improved working relationships during the pandemic and felt they were held in greater esteem by those in other job families. They reported that respect for technicians has increased during this time:

‘I think Covid-19 has shown the light on what technical services actually do - if anything, more people have actually thanked me since we restarted than had in the two years previously!’

‘[Technical staff are] often thanked in all staff meetings, and invited onto recovery meeting panels. I even got flowers and chocolates from the researchers as a thanks for getting the place opened and helping them with some wellbeing issues. That was a great day!’

Others felt that their relationships with team members from outside the technical community has improved:

‘You know if you have a train that breaks down you certainly start speaking to the people next to you. […] Normally when these borders are broken they are broken.’

‘Since being back in the office and being a main point of call because they’re primarily working from home, I feel that they’re delegating to me at a sort of senior management level.’

These examples highlight how distinctions between categories of staff have diminished during the pandemic in some contexts, and how direct communication and recognition can play a critical role in advancing job satisfaction, team dynamics and staff well-being.

On the other hand, 15 participants reported experiences which were not as positive, including unacceptable communication practices:

‘My line manager sent some rather harsh messages to me and my colleague which I feel were not appropriate and they have upset me and triggered a lot of anxiety and depression for me. I have tried to excuse these messages due to the stress of lock down.’

‘Myself and some of my colleagues have been harassed by some research academics. They do not like the shift patterns and do not like being asked to stay at home to work if they don’t have any lab work. My colleague has received an email with the sentence, “It can’t be that difficult to arrange!” from an angry researcher. This undermined my colleague’s ability and expertise and made her feel very low for a while.’

Some of these participants described situations where tasks were requested of them which they felt were unacceptable:

‘We were asked to deal with toilet seats… stupid things like, “Can you fix the photocopier?” “Wash the toilet?”’

‘I feel the crisis has just highlighted how little the technicians are thought of, as they have been sent into an unsafe building to make it safe for the return of academics and researchers… Technicians have been told to come in and risk their lives while academics and admin staff have been told that they can continue to work from home.’

These requests are clearly outside the usual boundaries of technicians’ roles and can arguably seem to be indicative of a lack of respect on the part of some team members for the skills and status of the technical workforce.
Six participants described feeling taken advantage of because they did not have children and felt that they were perceived to have “no life”. An interrelated issue was the lack of communication about who should assume additional responsibilities while team members were absent from the workplace during the pandemic. These technicians reported that their duties had increased due to colleagues being furloughed, parenting or shielding. For example, some felt they drew ‘the short straw’ of working with both, there are difficulties specific to both, and they are not always things that people even consider.’

Some technicians were happy to pick up the additional duties, at least temporarily: ‘I do not have any dependents, so was very happy to help out if others had commitments’. One technician also explained that there should be greater sensitivity towards those who do not have children: ‘Although it’s not often recognised, I would say childlessness, and even being single are underrepresented EDI issues because there are assumptions made about you with both, there are difficulties specific to both, and they are not always things that people even consider.’

These responses indicate the importance of clear and rapid communication about redistributing workloads, showing sensitivity and respect towards the circumstances of all members of staff.

One participant had experienced, and four others reported being aware of, a rise in Sinophobia towards members of the institutional community from Chinese ethnic backgrounds linked to the pandemic. One technician explained that, prior to the outbreak, issues of race discrimination were ‘being dealt with behind the scenes by the BME group and the EDI team.’ The same participant described experiencing Sinophobia as a direct consequence of the pandemic:

‘I experienced racism on campus and out of work. The racism experienced was so bad, I asked for help from [a senior university figure] who dealt with it immediately’.

It is positive that appropriate reporting channels were in place for this to be reported and that this individual’s experience was reported and dealt with effectively. Four participants reported witnessing discrimination in the wider institutional community:

‘Towards the start of the Covid-19 situation I did notice some friction happening with students with more the Asian groups, the British students were not wanting to participate with them so much because I think they were - the level of like news coming from like, “This virus is coming from China. Watch out for the Chinese students!”’

‘I was aware of increased division between people of Chinese ethnicity and others. I was aware that people were concerned over potential transmission from people who had recently visited China in early 2020 for Chinese New Year.’

During this research process, two key issues emerged in relation to ethnicity:

- Sinophobia, directly mirroring increases in instances of Sinophobia reported in wider UK society linked to the pandemic
- Uncertainty about the return to work of people from BAME backgrounds who may be considered especially vulnerable to Covid-19

Sinophobia

Exclusionary and discriminatory behaviours targeting people from Chinese backgrounds, whether members of the technical community, the wider institution or wider society are barriers to the equality of people from all ethnic backgrounds. A technician who had experienced this first hand commented: ‘We need to face the fact that we have to tackle inequality. It is everywhere. We need to stop treating it like it’s a taboo subject and we cannot speak about it. The employer must admit there is an issue and start to tackle it now.’

Return to work

Two line managers expressed confusion and concerns about the return-to-work risk assessments for people from BAME backgrounds. There was general awareness that those from BAME communities may be particularly vulnerable to Covid-19 and managers were concerned about mitigating risks to these groups. One line manager recognised that, ‘we really need to risk assess our black and ethnic minority groups’ but at that stage, the institution had not provided any guidance and the line manager acknowledged that, ‘I’m not sure what it is that we’re actually risk assessing or what it is that we need to be mindful of in that instance that’s really any different than any of the rest of my guys’.

Another manager commented that, although institutional guidance was clear, it was proving difficult to exclude people from the workplace who wanted to return:

‘I don’t necessarily agree with all the boxes or responses to certain boxes being ticked and then explaining that to someone, like, “You can’t come back to work because effectively the colour of your skin. You’re seen as higher risk”.’ I found that very difficult’. 

Ethnicity is one known risk factor for Covid-19, along with other factors such as age, being male and having certain underlying health conditions. It is unlikely to be a reason to exclude someone from the workplace in and of itself, but it may be the tipping point in a risk assessment, alongside other factors. At some institutions, it was unclear what guidance has been provided to line managers and how that guidance has been interpreted and applied.
Mental health and well-being

34 participants reported experiencing or witnessing colleagues experiencing mental health difficulties, particularly during the first lockdown, which impacted their participation in the workplace. A number of participants positively described their employers as being very well prepared to support staff mental health and well-being. Others felt that support could be improved.

There were 11 reports of employers adopting good practices in relation to mental health support and well-being prior to the pandemic:

- ‘They always stress the importance to look after yourself, your health. They had a lot of tools before the pandemic and now they revamped them and they did a lot of research for people coming back to work. They mean that they care for us, they care about us.’

- ‘The [institution] is already pushing mental health issues. This year they’ve instituted two well-being days so if you wake up in the morning and you’re just not having a day, you’re not in the mood, or not in the state to do a work day, you can just drop an email to your line manager to say, “I am taking a well-being day”. There is no approval process further up it is just on your say. Which is again, amazing.’

Nine participants also positively evaluated the steps taken by their employers to promote good mental health during the pandemic:

- ‘I think that it has put a spotlight on mental health and well-being, and that management have been very positive about supporting this and encouraging their employees to develop self-care practices. Several resources and tools have been put in place to support this.’

- ‘Overall I find the culture to be positive, and I think Covid-19 has reinforced this with a visible focus on well-being of staff throughout.’

Others described poor experiences and felt there was a long-standing lack of support available. These participants felt that although policies were in place at an institutional level, they did not necessarily filter down through layers of management. As one technician explained, ‘I feel mental health is not taken seriously. There are a lot of resources provided but senior managers expect you to sort yourself out. They will not go easy on you for one minute regardless of what has happened.’

It has been widely reported that the pandemic is having a significant impact on the mental health of many technicians. Particular sources of stress include:

- social isolation
- being on furlough
- losing daily structure
- working from home in an inappropriate home environment
- struggling with too little or too much work
- anxiety about safety in the workplace and returning to work
- anxiety about the long-term future of roles.

11 participants reported feeling ‘loneliness’, ‘despair’, ‘sadness’, as a result of working from home. This was particularly heightened amongst those who lived alone and missed physical contact with colleagues:

- ‘Social isolation during lockdown has probably been the worst part for me, as I live alone. I don’t come from a particularly close family, so communication with my siblings has been somewhat limited. Fortunately I have friendly neighbours.’

- ‘I feel unlucky as if I am isolated and not [in a] great living environment. […] My mental health has deteriorated at times, making interactions difficult. Lack of things to do [is] not good.’

26 participants found it stressful adjusting to new ways of working (whether at home or on-site) and to life on furlough:

- ‘I have experienced very low days during the first part of lockdown as [I have] been unable to complete lab work and having to adjust to working at the desk rather than in the lab has been very difficult for me.’

- ‘When staff got furloughed I think that made them feel really depressed. It made me feel depressed. […] You just feel like, “Oh they don’t need me! What am I going to do?”’. It heightens your anxiety a lot.’

There were also anxieties about health and safety in workplaces. 14 technicians felt compelled to return to site when they had concerns about whether it was safe to do so:

- ‘Mental health issues have increased i.e. anxiety levels. I would say, everyone on the team are very worried including myself. This is because of the forced nature that the technicians have to work on-site due to the operational nature of the job.’

When staff got furloughed I think that made them feel really depressed. It made me feel depressed. […] You just feel like, “Oh they don’t need me! What am I going to do?”’. It heightens your anxiety a lot.’

‘The exhaustion from moving around the [building], ensuring you move [in] the agreed direction, often thinking, have you touched doors or equipment? Do you need to wash or sanitise your hands again etc.? Especially during lockdown, it was exhausting when coming home as you were on edge the whole time.’

Eight participants remarked that their employers had handled the return to work sensitively:

- ‘In the [institution] you don’t have to justify the reason you’re not coming back, you simply have to say, “At this time I do not want to come back” — and that will be accepted and understood, whether it’s health, shielding, or just concern and anxiety.’

- ‘The leadership team and my boss have been really, really careful to ensure I could come [in] only when I could manage.’

While the experiences of technicians have varied, for many, the pandemic and the changes in working practices have impacted their mental health.
Parenting
Six participants reported that they or their colleagues had experienced parenting-related challenges linked to the workplace prior to the pandemic. Issues described included parents, particularly women, feeling ‘a little out of the loop’, especially when working part-time. Some also reported a lack of flexibility from employers over working times and taking leave to care for sick children. Overall, participants reported that their employers were supportive of parents in the workplace.

The pandemic brought huge challenges in this area, with 36 participants reporting that they or their colleagues struggled to balance work, home-schooling and childcare while schools and nurseries were closed for extended periods of time.

Childcare and school closures
Participants who had young children at home explained that working during lockdown involved having to ‘negotiate work time, which certainly put a strain on things’ and ‘trying to home school at the same time – it was all very difficult.’

Several participants reported that they or their colleagues were furloughed for childcare reasons. For some, this was at their request and brought feelings of relief from the pressures of working and home-schooling. But others felt unfairly selected, reporting a perception that ‘my childcare issues have been used as the reason for my furlough.’

Childcare challenges had also influenced where and when technicians were able to work. Participants with caring responsibilities reported difficulties working on-site, including ‘I can’t work a full day in the office’ because of shortened nursery hours. Others could only travel into work on certain days when they were sharing childcare with partners. Many respondents with parenting responsibilities found working from home logistically difficult:

‘We found ourselves working from 8 o’clock till midnight every night and then swapping over throughout the day so it’s been very difficult as a couple.’

‘Knowing that I have not been as productive whilst juggling children, I have sometimes worked on my usual non-working days. Overall I have a feeling of having done both jobs, my work and being a mum, badly.’

18 participants commented that their employers had been very supportive when they varied their hours for parenting reasons:

‘Our employer has been extremely understanding and flexible regarding workload and hours, but these things still affect people personally, when trying to do their job.’

‘Anytime there having ever been any issues with anything to do with parenting stuff, they’ve been really flexible.’

As noted above, the benefits of flexible working were recognised by some participants who were parents: ‘Being at home and able to structure my time appropriately has allowed me to spend more time with my kids at times when it matters. Work is also more productive as again, I can timetable myself to do work as and when I feel like it. I am not a 9-5 person by nature and I am also more productive at night.’

Five participants described instances where they felt unsupported by their line managers:

‘My line manager, initially, when we were working from home would almost make a point of ringing me at 8:30 in the morning but he’s sort of calmed down a bit now.’

‘...when I was working at home my line manager told me off for sending emails and working outside of core hours which I found very upsetting as I had spent the afternoon home schooling my son ... I felt very discriminated against as a single parent.’

Eight respondents reported finding it stressful to receive emails and calls late at night or early in the morning, when their colleagues (not necessarily technicians or parents/carers) were working outside standard hours. Good communication and clear expectations about availability for contact are essential in these circumstances, to allow staff with caring responsibilities to work flexibly without their colleagues feeling pressured to work additional hours. As one line manager explained:

‘This has been discussed amongst the whole team – just because this colleague is answering [emails] then, please don’t feel that this is for everybody, this is what suits someone that’s working at home.’

Ten women participants reported that they or their women colleagues were expected to shoulder more of the burden of childcare, with some specifically attributing the imbalance to inflexibility in their male partners’ workplace:

‘My husband’s work was not flexible. I was the main child carer.’

‘The [institution] has been very understanding about childcare issues but some of our female technicians’ partners have been expected to work rather than take a turn at childcare meaning the female technician can’t work.’

This suggestion that some men’s work is considered less flexible than women’s is concerning. It reinforces traditional stereotypes of women as primary care givers and therefore privileges men parents’ work above women’s. There may be a long-term impact on the careers of those who have been most burdened with additional childcare responsibilities, as a participant outlined:

‘I am concerned that those without caring responsibilities who have been able to be more productive through Covid-19 may now be looked upon more favourably than those of us who have really struggled to juggle our responsibilities, and may be more likely to progress.’

For women to be disproportionately burdened with the difficulties and compromises associated with working and parenting during lockdown is a clear barrier to equal participation in the workplace and needs to be carefully monitored during the rest of the pandemic and beyond.

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Return to work
There was widespread concern about how those with caring responsibilities would cope upon the reopening of workplaces. Six participants reported ongoing childcare issues, including a lack of wraparound school provision and the closure of nurseries. As one technician explained, there were also fears about redundancy implications:

‘I do have massive worries about returning to work as I will have to look after my [primary school-aged child] and currently there is no before and after school club scheduled... I do worry that this may make me less useful at work and therefore if redundancies are required I will be top of the list because of my childcare issues.’

Team leaders also reported problems amongst their team:

‘In my team I’ve got two single parents who have got young children and basically nursery is shut at the moment so they really are at their wit’s end.’

‘I know one of my staff who was due to come back off maternity leave has had her childcare place cancelled because of this.’

A further phase of data collection is currently investigating how parents are managing with the limited childcare available during local lockdowns and the second national lockdown (from 9th November 2020) and how school/nursery closures as a result of positive Covid-19 tests are impacting them.
Disability

15 participants reported long-standing challenges related to disability in the workplace (as defined under the Equality Act 2010). These included barriers in arranging reasonable adjustments to working hours and a perceived lack of awareness and support for mobility issues. During the pandemic, 22 participants reported that they or their colleagues’ work had been affected by disabilities. Participants reported that they had colleagues who were working from home or furloughed because they, or members of their household, were shielding. There were also health and safety concerns about how people who were at high risk would be able to return to work. The pandemic may have also raised awareness of technicians’ medical conditions amongst their colleagues. As one participant noted, ‘we are now more aware of colleagues’ health conditions such as asthma or diabetes which we may not have known about before.’ There were some concerns about the longer term implications of a loss of privacy about people’s medical conditions.

Seven participants reported that tensions had arisen in their teams. A participant commented that: ‘Where colleagues’ health issues are not well known, understanding why they aren’t available to come into work has proved a challenge for some of the team.’ For example, one respondent reported the following: ‘I have also felt judged by people for not being able to go in whilst they are, almost a disbelief.’

Another participant reported becoming increasingly frustrated during the initial stages of returning to work by the lack of awareness and adjustments for those with mobility problems. A university sign was modified to state that the lift serving an upper floor should only be used for ‘goods’, seemingly to avoid contamination. The participant felt that this demonstrated ‘no acknowledgement of anyone with mobility or any other issues which necessitate them using the lift’.

‘I believe this demonstrates a lack of awareness and, more importantly, understanding of EDI issues, at a time when attending work is difficult enough.’ Additionally, a respondent reported that some institutions did not offer support for staff with mobility problems who faced more complicated journeys on public transport during lockdown: ‘There are other institutions offering quite a lot of support for their staff going in, at least for people who don’t have their own transport. It’s just one of the things where they’ve done absolutely nothing.’

These stories of everyday lived experiences highlight the possible disadvantages that people with disabilities are facing in the workplace during the pandemic. Absence from site and deteriorating relationships with colleagues were perceived to be damaging to long-term career prospects. Those who had been expected to remain on-site, but whose additional requirements were overlooked, reported experiencing marginalisation and exclusion, as well as additional health and safety risks.

Conclusions

Like many workplace communities, working practices for the technical community have been significantly impacted by the Covid-19 pandemic. Technicians have played critical roles in closing down, maintaining and reopening facilities as well as assisting with critical research and teaching.

The associated changes to working practices have brought new EDI challenges, as well as exacerbating existing ones. Whilst the experiences of 65 participants are not representative of the whole technician community, exploring the lived experiences of these technicians during this time has provided insight into EDI in their workplaces. Their experiences highlight opportunities to advance EDI in the workplace, shining a light on best practice examples and highlighting areas for possible improvement to ensure a future working environment where all colleagues can participate on equal terms.
Sharing best practice to advance EDI for the technical community

Through interviews and written accounts, participants in this study cited examples of best practice and offered suggestions, in light of lessons learnt through the pandemic, of how moving forwards, working practices could adapt to advance EDI in the workplace.

Flexible working
Given the practical nature of technical roles, prior to the pandemic, flexible working and working from home arrangements had not always been perceived to be possible for members of the technician community.

Flexibility in working hours and working from home has been in place for many technicians as a consequence of the pandemic. Participants highlighted flexible working as a key practice they would like to see continued post-pandemic, along with the possibility of home working on occasions where appropriate.

Enhancing communication
Participants highlighted how critical clear, timely and tailored communication had been throughout the pandemic. Positive examples included ‘daily digests’ from senior members of the institution, clear and concise information videos about returning to site and teaching, regular direct communications from departments and line managers, ‘virtual department meetings’ that are open to all, team ‘tea breaks’ and good signposting of who ‘to go to for information’.

EDI training and policies
Participants were positive about diversity and inclusion training they had attended. Many of the participants’ institutions have recently included ‘active bystander’ and ‘microaggression training’ within their staff EDI training provision and this was viewed very positively as a key intervention that can play a significant role in changing deeply embedded organisational cultures.

Robust, responsive and transparent anti-racism policies allow staff and students to feel empowered to report cases of racism on campus. A coherent and consistent way of reporting racism that is clear, easy to find and known by all members of the organisation is also essential. Disciplinary procedures and sanctions must be made clear to all.

Supporting mental health and well-being
Participants reported a range of mental health resources and provisions which they assessed as having a positive impact on mental health during the pandemic. Examples include: the support of ‘Mental Health Champions’ and ‘Well-Being Officers’, online tools and resources, external support helplines, encouragement to adopt ‘Technology-Free Fridays’, the provision of ‘well-being days’ allowing occasional ‘no questions asked’ work-free days at times of strained mental health, training to promote good mental health and flexible working arrangements.

Training for technical line managers, to ensure a full awareness of organisational well-being resources, would enable them to direct colleagues to resources and support them as fully as possible.

Engaging directly with the technical community would enable institutions to understand the range of different ways that their workforce has experienced the pandemic and the various pressures impacting their mental health. This would help to inform decisions about how best to support strong mental health going forwards.

Concerns and anxiety about returning to work could be further addressed by managers engaging directly with their teams as much as possible, endeavouring to ensure that team members feel fully valued whether working on-site, from home or on furlough.

Supporting caring responsibilities
Participants welcomed flexible working practices to aid with caring responsibilities and encouraged the continuation of flexible working for technical roles moving forwards. Participants recognised the need for other team members not to be unduly put upon to work outside their usual hours to pick up work for those with caring responsibilities. Future decisions to furlough staff (if necessary) should not be imposed on colleagues on the grounds that they have caring responsibilities.

Participants found it valuable when employers sent e-mail reminders that clarified expectations about response times and recommended adding lines into the bottom of emails stating wording similar to the following example, ‘I am working flexibly but please do not feel obliged to reply to this email outside your normal working hours’.

Supporting disability
Participants valued working with occupational health, medical experts and employers to ensure a safe and fair environment for people with disabilities. Return to work risk assessments were reported to be most effective when based on scientifically accurate information, conducted consistently, and when they directly involved the individual and their medical team.

All staff should have a working knowledge of institutional policies to ensure colleagues with a disability do not face any discrimination in the workplace. This should include unconscious bias training and training in making reasonable adjustments.
Acknowledgements

This research was led by Professor Louise Mullany, Dr Victoria Howard, Lucy Williams and Kelly Vere MBE from the University of Nottingham and funded by the EPSRC Inclusion Matters STEMM-CHANGE project. The project team wish to thank all participants who contributed to the study and shared their experiences.

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