Editorial

Are We Addressing “Quiet Quitting” in Faculty, Staff, and Students in Academic Settings?

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Many of you readers may have heard the term “quiet quitting” and fewer may be aware of what this phenomenon is all about, but it is highly likely that you know someone (maybe yourself even) who is quiet quitting. This phenomenon does not literally mean faculty or staff silently walk into your office with a resignation letter, drop it on your desk, and leave without a word. Rather, it is an employee’s slow and insidious disengagement. For example, they mentally “check out” and reduce their effort to function at total capacity in their role. Quiet quitting challenges academic settings with a workforce who are no longer working off-hours, answering emails and texts when out of the office, or enthusiastically volunteering for additional work challenges or opportunities. Just like every other work setting, academia and health centers were faced with the “great resignation” that took place, by choice or necessity, during the pandemic as workers aged out, resigned due to stress, or just walked out earlier than anticipated. Our precious resources – faculty and staff who make academic settings run, flourish, and prosper – need attention if we are to retain them during this post-pandemic, virtual meeting and teaching, new way of working, brave new world (Morrison-Beedy, 2021).

Similar concerns exist on the other side of the coin within our student populations. In a survey of 1,000 college students ages 18-24 from a broad swath of universities and community colleges, it was quite clear that students, both full- and part-time, are also quiet quitting (Intelligent.com Higher Education Team, 2022). Post-pandemic, one-third of students reported that they were only putting a little to no effort into their studies, and much of this lack of effort was related to their need to put their mental health first. One in five of these respondents reported that their school-life balance was somewhat to very unhealthy. Many were reprioritizing their mental health above school, their physical health, and relationships. While most students (59%) agreed that “C’s get degrees,” this lack of motivation and enthusiasm may be related more to the stress experienced and the impact on their mental well-being rather than a change in academic focus.

Now is not the time to be Chicken Little with cries of “the sky is falling.” Instead, it is precisely the time to implement the evidence we have on ways to reduce workplace and school stress and build healthy academic communities. True, we still need more rigorous research studies that move beyond describing the problem and assessing the prevalence. We need continued development and testing of interventions that specifically address
stress, anxiety, burnout, overload, and emotional and physical fatigue in our students, faculty, and staff. Importantly, we need positive, preventive, health-focused interventions to pre-emptively improve resiliency, coping, and engagement for all persons connected to academic settings. Fortunately, we do have a growing number of evidence-based resources, programs, and expert clinicians in the field (Aryankhesal et al., 2019; Melnyk et al., 2020; Sinsky et al., 2020; Tucker et al., 2022). However, our translation of these programs across the nation in both small or large, private or public, land-grant or religious-affiliated institutions is slow and uneven. We owe our students, faculty, and staff more. Let’s practice what we preach – identify the science that currently exists, determine gaps or need for adaptation, develop and test targeted interventions, and rapidly translate and implement efficacious interventions into communities most in need. For academia, that is every university, community college, and post-secondary training program. Let’s get to work!

References


