

CHAPTER ELEVEN

The COVID-19 Pandemic's Impact on Post-secondary Student Counselling Services

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ABSTRACT

The COVID-19 pandemic and the associated ubiquitous transition to online learning have exacerbated mental health issues for post-secondary students, with a resulting impact on university counselling services. This chapter provides a comparative review of post-secondary students' presenting issues and usage of counselling services both before and during this period at King's University College in London, Ontario, Canada. Secondary data was analyzed over three years (2018-2021) and illustrated with an applied case study. The purpose of this research was to better understand the trends in how students coped with stress before and during the pandemic, and to consider service use needs afterwards. There has been a substantive drop in the number of students seeking assistance during the pandemic, despite a dramatic increase in the number of presenting issues raised. The most prominent counselling issues were resiliency/coping/stress, mood and emotions, university life, and relational concerns. There was also a noteworthy increase in diversity-related issues over the three year period.

Keywords: COVID-19 pandemic; Online Learning; Post-Secondary Students; University Counselling Services; Virtual Counselling

INTRODUCTION

The COVID-19 pandemic is an unprecedented global health crisis. Despite receiving less attention than the straightforward medical and epidemiological concerns of the pandemic, mental health is also a global issue, and has become even more pronounced during this time (Centres for Disease Control and Prevention [CDC], 2021). Mental health problems can cause untold human misery and is prevalent worldwide, with at least 10% of the world's population, including 20% of children and adolescents, suffering from some type of mental health issue. In fact, mental illness accounts for 30% of non-fatal disease burden worldwide and 10% of overall disease burden, including death and disability (World Health Organization [WHO], 2019).

Mental health concerns for post-secondary students have become particularly prominent during the pandemic (Robson, 2020; Savarese, et al., 2020). More students from a variety of economic and social backgrounds are pursuing post-secondary education than any previous generation (Centre for Innovation in Campus Mental Health [CICMH], 2020). This increase has been accompanied by an upward trend in students reporting feelings of anxiety, helplessness, and being overwhelmed during their post-secondary experience (Hellmans et al., 2021). Due to their typical age range, post-secondary students are at higher risk for mental illness, with their school campus being one of the first places mental health issues are noticed (CICMH, 2020; Langille et al., 2020; Matthews & Csiernik, 2019; Rango, 2017). This is evidenced by the data showing that 75% of mental health issues typically emerge in adolescence or early adulthood (i.e., between the ages of 15 and 24) which describes most individuals preparing for or attending post-secondary institutions (Armstrong & Young, 2015; Nunes et al., 2014; Robinson et al., 2017). Alongside

these trends, campus mental health services are reporting significant increases in year-over-year demand (Matthews & Csiernik, 2019) including higher reported rates of depression and suicidal ideation (Baik, 2019). Moreover, these numbers do not take into consideration the current state of the world under the COVID-19 pandemic and its effects on course delivery, and the isolating impacts it has caused.

The question of how post-secondary students are currently coping during the pandemic includes a presumption that there is a level or threshold of coping already existent. Robson (2020) explored students' coping during the pandemic, and found that stress levels has increased in all areas of life (family, social, work and school); including feelings of being overwhelmed with the transition to online learning and mental and physical distress due to changes in routine and isolation from family and friends. Dealing with distractions, issues with motivation, and precarious living situations are all within the 'new normal' for these students (Robson, 2020). In addition to virtual learning, the pandemic also forced a rapid transition to virtual counselling services for post-secondary students, with 90% of post-secondary counselling centers in Canada pivoting to remote mental health services within three weeks of campuses being shut down in March 2020 (Nath, 2021).

Similar stresses were experienced by post-secondary students at King's University College (KUC), a liberal arts Catholic University College affiliated with Western University in London, Ontario, Canada. King's student population consists primarily of undergraduate students, with a Master of Social Work being the only graduate degree offered. There were just over 4,000 full and part-time students studying liberal arts, business, and social work during the 2020-2021 academic

year from across Canada and from 35 other countries. The Accessibility, Counselling and Student Development (ACSD) department at KUC provides both walk-in and appointment-based counselling services, accessibility and accommodation support, and career counselling. With the onset of the pandemic in March 2020, all services transitioned to appointment-based virtual counselling via either telephone or Zoom™ video conferencing. This chapter provides a comparative review of students' presenting issues and usage of counselling services both before and during the pandemic at KUC, to better understand the trends in how students were affected and to consider service use needs post-pandemic.

LITERATURE REVIEW

This literature review will summarize the research on how the pandemic has impacted post-secondary students' mental health and social relationships, the challenges of online learning and service access, and the KUC mental health framework.

Post-Secondary Students' Mental Health Issues

The COVID-19 pandemic has harmful effects on the mental health of people all around the globe (Batra et al., 2021; Centre for Collegiate Mental Health [CCMH], 2021; Dodd et al., 2021; Jiang, 2020; Lederer et al., 2021; Turna, 2021), and it is anticipated to have long lasting and widespread mental health effects due to the trauma associated with the pandemic. Crowdsourced data published by Statistics Canada revealed that from April to May 2020, 24% of participants reported fair or poor mental health—a three-fold increase from the previous two years (Turna,

2021).

Because they are already an at-risk population for experiencing mental health issues, the mental health university students worldwide has been uniquely and heavily impacted by the pandemic (Batra et al., 2021; CCMH, 2021; Dodd et al., 2021; Jiang, 2020; Lederer et al., 2021; Turna, 2021). Several studies have shown a higher prevalence of depression, anxiety, and stress, and lower wellbeing among university students after the onset of the pandemic (Batra et al., 2021; Dodd et al., 2021; Jiang, 2020; Lederer et al., 2021; Savarese et al., 2020). Similarly, data from an international study by Dodd et al. (2021) showed that while 34.7% of students reported their level of wellbeing to be “sufficient,” 33.8% reported it to be “low,” and 31.5% “very low.” These concerns align with previous research indicating that university students tend to experience higher and increasing rates of mental health issues (especially depression and anxiety) and lower levels of wellbeing (Batra et al., 2021; Dodd et al., 2021; Lederer et al., 2021).

Turna (2021) found that North Americans of younger age, female sex, and a history of mental health treatment were significant predictors of generalized anxiety disorder, major depressive disorder, and significant stress during the COVID-19 pandemic. Similarly, Dodd et al. (2021) found that in Australia, young adults (aged 18 to 29) reported higher rates of moderate to severe anxiety and depression than older adults (aged 60 or older). They also found significant associations between lower wellbeing and higher anxiety among students aged 21 to 23 compared to students aged 24+ (Dodd et al., 2021).

Female college students have reported higher levels of anxiety and depression levels than males (Batra et al., 2021), and several studies have shown that being female is a risk factor for

more severe impacts from the pandemic on mental health and wellbeing (Batra et al., 2021; Dodd et al., 2021; Turna, 2021). Vulnerable populations with pre-existing mental health issues have also experienced exacerbated impacts on their mental health associated with the pandemic, which is also true for university students (Batra et al., 2021; Turna, 2021), and income and racial disparities were associated with lower wellbeing in coping with the pandemic for students (Dodd et al., 2021; Lederer et al., 2021; Liu et al., 2020). Finally, race plays a role here as well. Data from US and international studies suggests that students of colour, from marginalized communities, and/or racial and ethnic minorities have faced exacerbated inequalities, barriers to accessing mental health treatment, and discrimination and xenophobia during the pandemic (Dodd et al., 2021; Lederer et al., 2021; Liu et al., 2020).

Social-isolation and loneliness, fear and uncertainty, lockdown and quarantine protocols, and changes to means of support and services have affected the mental health of university students globally (Batra et al., 2021; CCMH, 2021; Dodd et al., 2021; Jiang, 2020; Lederer et al., 2021; Turna, 2021). A core facet of a well-rounded post-secondary education is the social interaction that occurs in and outside of the classroom (Batra et al., 2021; Dodd et al., 2021; Lederer et al., 2021; Savarese et al., 2020). The literature addressing university students' transitions throughout the pandemic has highlighted multiple disruptions to the traditional post-secondary experience of social engagement in university life, including: adjusting to changed living conditions from university residences to forced cohabitation with family; financial burdens due to reduced work opportunities; caregiving responsibilities for family members; inability to cultivate relationships in person with peers or faculty; inability to participate in social routines and events; and difficulty

navigating online learning (Batra et al., 2021; Dodd et al., 2021; Lederer et al., 2021; Savarese et al., 2020).

Challenges of the Online University

There is significant evidence indicating that student mental health and wellbeing are critical to students' academic success (Galloway, 2020; Rango, 2017). During these unprecedented times, everyone in the post-secondary environment continues to navigate an uncertain and ever-changing context (Galloway, 2020; Hellmans et al., 2021). With the abrupt transition of learning formats from in-person to online, the pandemic has also directly impacted students' learning due to less interaction with peers and teachers, accessibility issues, and the technology requirements suddenly needed to attend class and participate in academic life (Batra et al., 2021; Dodd et al., 2021; Savarese et al., 2020).

Physical presence on campus creates a sense of community that cannot be replicated with online learning. Students report that in the classroom they are able to make personal connections with like-minded peers who share their interests, while the online experience is more likely to produce feelings of isolation partly due to fewer chances for informal conversations inside and outside of the classroom (Ong et al., 2020). Conversational nuance, privacy, social cues, and meaningful organic discussions are all lost as a direct result of the culture of online coursework and education (Galloway, 2020; Ong et al., 2020). In addition to this, there is an increased need for post-secondary students studying online to approach their professors to request academic accommodations (Banerjee, 2021; Ong et al., 2020). In general, courses that are online by design

and intention had already been shown to produce additional challenges for students in navigating university administrative issues, and access to applying appropriate distance learning etiquette (Fernandez et al., 2016; Rango, 2017; Stanton et al., 2016). This has been further exacerbated during the pandemic as tens of thousands of students suddenly and unintentionally became online learners, with courses not always suited to the format, and faculty unprepared for it.

Along with the challenges of online learning, there are several additional barriers to accessing mental health support and services that may help to explain why university counselling centres have seen declines in appointments. Initially, there was the uncertainty of whether counselling services were even going to be offered during the complete campus shutdowns implemented across North America in March 2020. University counselling centres had to determine if and how they would continue to provide services—if they would even be allowed to continue working with students no longer on campus. Students abruptly left campus not knowing how appointments might continue, and those on waiting lists who had never yet connected with a counsellor became further isolated (Batra et al., 2021; Nath, 2021). For students in Canada who moved out of their university's province, or to another country after the shift to online learning, some were no longer eligible to access counselling from their university due to jurisdictional regulations set by counsellors' professional colleges (Nath, 2021).

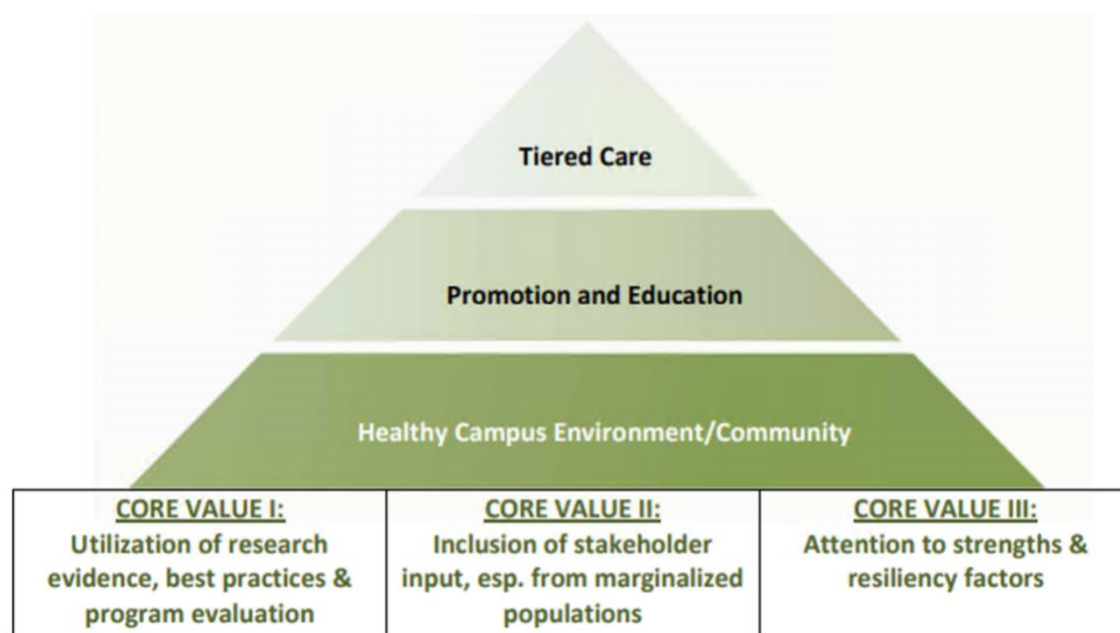
King's University College Mental Health Framework

In 2018, prior to the onset of the pandemic, King's University College created a Mental Health Wellness Plan, developed in conjunction with the range of campus stakeholders, staff,

faculty, and students. Core to the plan is that “the promotion of mental wellness at KUC is not the purview of any one particular person, department or group—it is the responsibility of all” (KUC Wellness Committee, 2018, p. 2). This aligns with the Mental Health Commission of Canada’s National Standard for Mental Health and Well-Being for Post-Secondary Students (CSA Group, 2020). Wellness of those at KUC recognizes that “community integration and connectedness are essential components of mental health” and the plan “incorporate(s) many activities spearheaded by a wide range of campus groups and individuals” to address mental health “through interpersonal and interdepartmental cooperation” (KUC Wellness Committee, 2018, p.2). This plan aligns with the broader movement toward more colleges and universities using a ‘whole campus’ or systematic approach where mental wellness is a commitment at every level—from students to faculty and administration—and engrained in the policies that govern the campuses’ practices and procedures. According to the Okanagan Charter, among others, there is a cohesive role for every person to play who works at a post-secondary campus (Canadian Health Promoting Campuses, 2015; MacKean, 2011; Rango, 2017).

Figure 1

King's Pyramid Framework for Mental Health



The KUC Wellness Committee created a pyramid framework for mental health with three tiers, upheld at three strategic levels by three core values (Figure 1). The broadest component, “Healthy Campus Environment/Community,” involves the infusion of wellness and health in every aspect of the campus setting. This first tier relates to the diversity, equity and inclusion guiding principle in the Mental Health Commission of Canada’s Standard (CSA Group, 2020). The second tier, “Promotion and Education,” involves numerous KUC programs related to health promotion and resiliency, while being evidence-informed and aiming to reduce stigma. This tier falls within the promotion of health and knowledge informed principles of the Mental Health Commission of Canada’s Standard. Lastly, the “Tiered Care” section of the pyramid comprises the “stepped care” approach (Siebarth, 2017) to deliver services, from least to most intensive, without doing harm.

This third tier ties into the Mental Health Commission of Canada's Standard's guiding principle of health promotion and reducing harm (CSA Group, 2020).

The tiered care level relates directly to the services provided by King's University College's Accessibility Counselling Student Development (ACSD) Department. The staff of the Personal Counselling team at ACSD comprises master's level therapists with extensive clinical experience, all registered members of either the Ontario College of Social Workers and Social Service Workers (OCSWSSW) or the College of Registered Psychotherapists of Ontario (CRPO). The department also frequently accepts student placements, and this additional staff, even while still learning, can play a vital role and allow for wider service capacity. Professional services offered at ACSD are dynamic and continually evolving over time. A snapshot of the tiered services offered at ACSD at its inception (pre-pandemic) were: counselling sessions (2 to 8 sessions or more); single session walk-in counselling; referrals to other resources; various psycho-educational talks; and a variety of group programming.

CASE STUDY

The following case study is an amalgam of concerns that are addressed by ACSD counsellors. It illustrates the increasing number and complexity of students' presenting issues seen in the ACSD counselling department both prior to and during the pandemic.

In October 2019, Perdita, an 18-year old Caribbean female, made an appointment with counselling services, wanting to talk about "feeling down and not myself," and "not getting along with someone in my family." During her first session, Perdita elaborated that as a first year

international student living away from home for the first time, she was having some difficulties with adjusting to the type and amount of work at university, but was coping. She was living with her aunt and two young adult cousins, and she discussed household routines and structures that were very different than her own home and how this was causing her distress. She reported conflicts with both of her cousins about TV and music, chores, and visits from friends. She said she missed her siblings and parents and sometimes wondered if she made a mistake coming to Canada. Perdita was seen for four sessions focused on normalizing homesickness and coping with change, problem solving issues in the home, communication and boundaries with her cousins, and self-care. The six presenting concerns reported by the therapist over four sessions were: life transitions; co-living conflicts; relationship issues; self-care; family culture; and homesickness.

One year later in October 2020, Perdita again reached out to her counsellor, reporting difficulty with school. She was having difficulty adjusting to online learning and establishing new study routines in her household where multiple people were home all day using the internet for school and work. The solutions for co-living she had co-created with her family members were no longer as effective in this context where they were extra stressed, including her aunt who was laid off from work due to the pandemic. Adding to this stress, her aunt commented that it “wasn’t working” having Perdita in the house because it felt too crowded. Perdita wondered if she should be looking for alternate housing arrangements, and the financial implications of this. An additional stressor was the fact that the family members differed in how strictly they were adhering to COVID safety protocols, which led to arguments and Perdita feeling unsafe. She told the counsellor that she was really missing her family at home and had not imagined that it would be so long between

visits but had been advised that it was unsafe for her to travel due to the pandemic. She was also worried because two of her grandparents had contracted COVID-19, one of whom also had severe asthma, and her parents were downplaying the situation to not worry her. After presenting six issues a year prior, Perdita now had eleven reported by the therapist from the first session alone: academic stress; online learning; homesickness; physical health; caregiving/family health; housing; financial stress; pandemic; co-living conflicts; relationship issues; anxiety.

METHODS

Prior to the pandemic, King's University College had already become proactive in addressing the mental health needs of its students. However, the pandemic has since significantly affected all facets of student life. This study addressed the research question: How are students coping during the pandemic? A comparative review was undertaken to explore the trends in students' presenting issues and usage of counselling services before and during the pandemic.

The findings of this study are drawn from a secondary analysis of data obtained from the King's University College ACSD database. During the 2018-2019 academic year, the Counselling Division of the Accessibility Services Department introduced a new database system to allow the Department to collect information on the number of students seeking counselling, total number of appointments provided, and issues raised during individual counselling sessions. The database had the capacity to be customized, which led departmental staff to brainstorm categories that best capture the variety of concerns with which students presented, leading the database to be divided into eight major categories which were initially separated into 22 sub-categories. At the completion

of the 2018-2019 academic year, an additional 52 sub-categories were added in response to more precise assessment of the issues students were raising. Likewise, at the end of the 2019-2020 academic year, as the pandemic was just beginning to impact students, 19 additional additions were made, increasing the total number of sub-categories to 93 (Table 1).

Table 1

Types of Counselling Issues

Diversity (7)	Mood/Emotions (6)
Family Culture	Anxiety
First Generation	Depression/Low Mood
Gender-Based Violence	Distress Tolerance
Gender Expression	Emotional Concerns
Identity – Self, Development	Existential Concerns
Mature Student	Mental Illness
Spirituality/Religion	
Physical Wellness/Addiction (12)	Relational Concerns (11)
Addiction – Processes	Breakup
Addiction – Substances	Bullying
Body Image	Co-Living Conflicts
Eating Problems	Dating/Sex
Engagement	Discrimination
Hygiene	Harassment
Physical Health	Intimate Partner Violence
Recreation	Loneliness
Self Care	Parenting
Self Injury	Relationship Issues – Family,
Sexual Health	Roommates, Partners, Friends
Sleep Problems	Stalking
Resiliency/Coping (23)	University Life (19)
Caregiving/Family Health	Academic Gains

Conflict with the Law/Court

Coping and/or

Coordinating Plan

Financial Stress

General Stress

Housing

Life Transitions

Managing Disability

Marginalization/Oppression

Motivation

Paid Work/Volunteering

Pandemic

Perfectionism

Personal Gains

Procrastination

Public Speaking

Resiliency

Self Esteem

Social Justice

Societal Gender Expectations

Termination/Closing/

Therapeutic Relationship

Test Anxiety

Academic Probation

Academic Stress

Adjusting to University

ADO – Letter of Support

Case Manager Involved

Homesickness

Motivation

Online Learning

Organization and

Time Management

Placement

Procrastination

Public Speaking

Required to Withdraw

Stress Management

Student Leader Debriefing

Test Anxiety

Transition Concerns

Voluntary Withdrawal

Risk Assessment (9)

Court Involvement

Knowing Someone

who is Suicidal

Police Involved/Contacted

Safety Planning

Self-Harm

Suicide Attempt

Suicide Ideation

Suicide of Friend/Family

/Partner/Other

Violence Toward Others

Trauma and Loss (6)

Abuse - Emotional

Abuse - Physical

Abuse - Sexual

Grief and Loss

Power and Control

Trauma

FINDINGS

While there were slightly more women than men enrolled at King's during the study period, significantly more women than men sought counselling each year (For 2020-2021 data, $\chi^2(1, N = 322) = 29.106, p < .01$). Likewise, while the vast majority of students attending King's were under the age of 25, there were a statistically greater proportion of those over 25 using counselling services (For 2020-2021 data, $\chi^2(1, N = 322) = 19.312, p < .01$) (Table 2). During 2018-2019, the last full year before the pandemic, 388 students sought counselling. The following year, in which the onset of the pandemic occurred during the spring term, the number increased to 438. But then, during the '20-'21 academic year fully under pandemic restrictions, the number of students seeking counselling dropped to 343, a 21.7% decrease (Figure 2). Similarly, there was a decrease in the total number of student appointments from 1776 in 2018-2019, to 1660 in 2019-2020 to 1320 in 2020-2021, a decrease of 25% from two years previously (Figure 3). In contrast, issues raised during counselling increased exponentially over the three years from 1351 to 9166 (Figure 4).

Table 2

Sex and Age of Students Seeking Counselling and Enrolled

	Students Seeking Counselling by sex (%)		Total Enrollment by sex (%)	
	Male	Female	Male	Female
2018-2019	22.9	77.1	43.3	56.7
2019-2020	21.2	78.8	43.8	56.2
2020-2021	24.2	75.8	44.5	55.4

	Students Seeking Counselling by age (%)		Total Enrollment by age (%)	
	25 & under	>25	25 & under	>25
2018-2019	77.6	22.4	88.9	11.1
2019-2020	72.6	27.4	88.5	11.5
2020-2021	75.1	24.8	88.6	11.4

Figure 2

Students Seeking Counselling

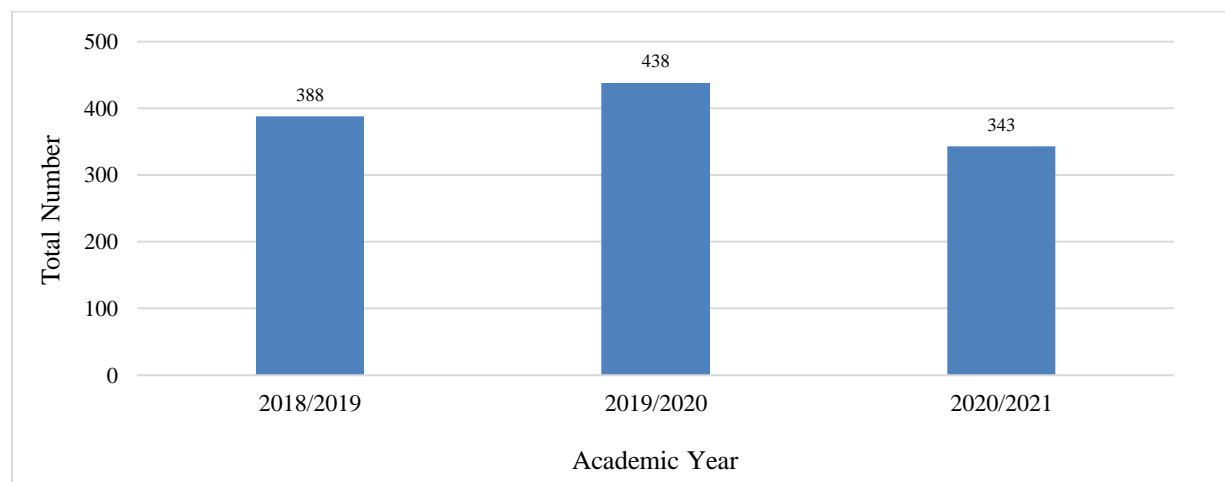


Figure 3

Total Number of Appointments by Year

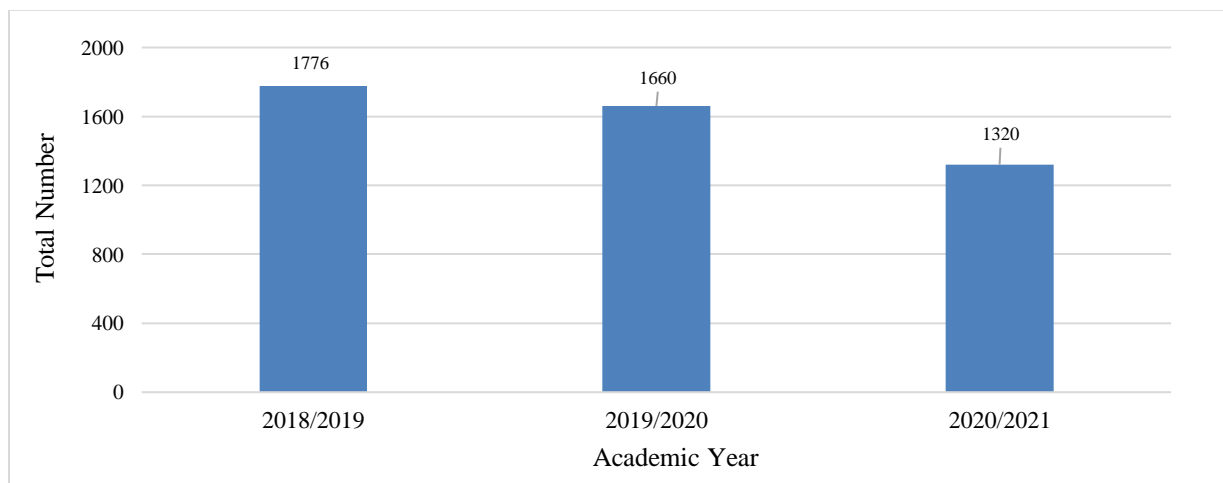
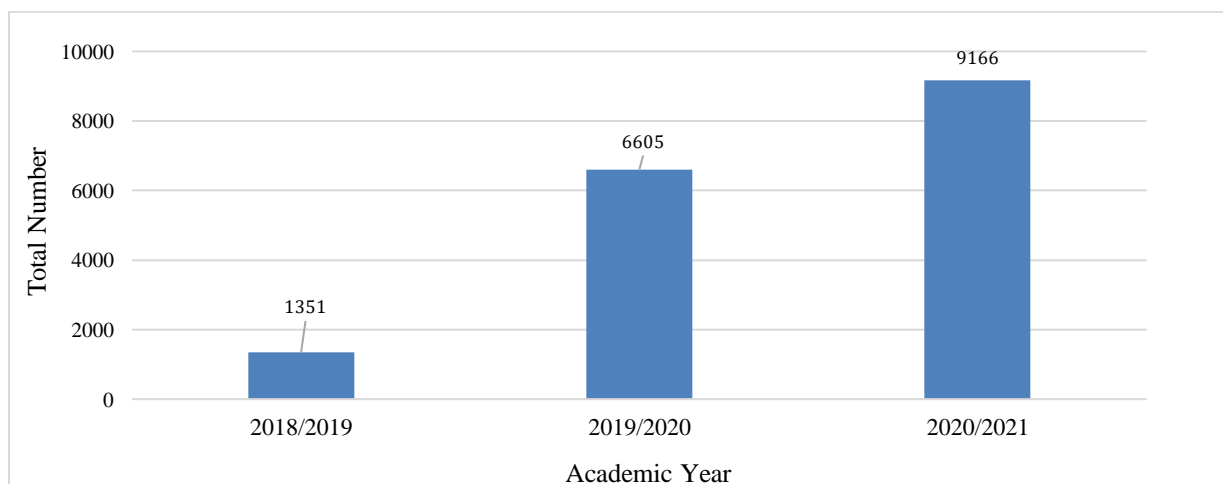


Figure 4

Issues Raised in Counselling

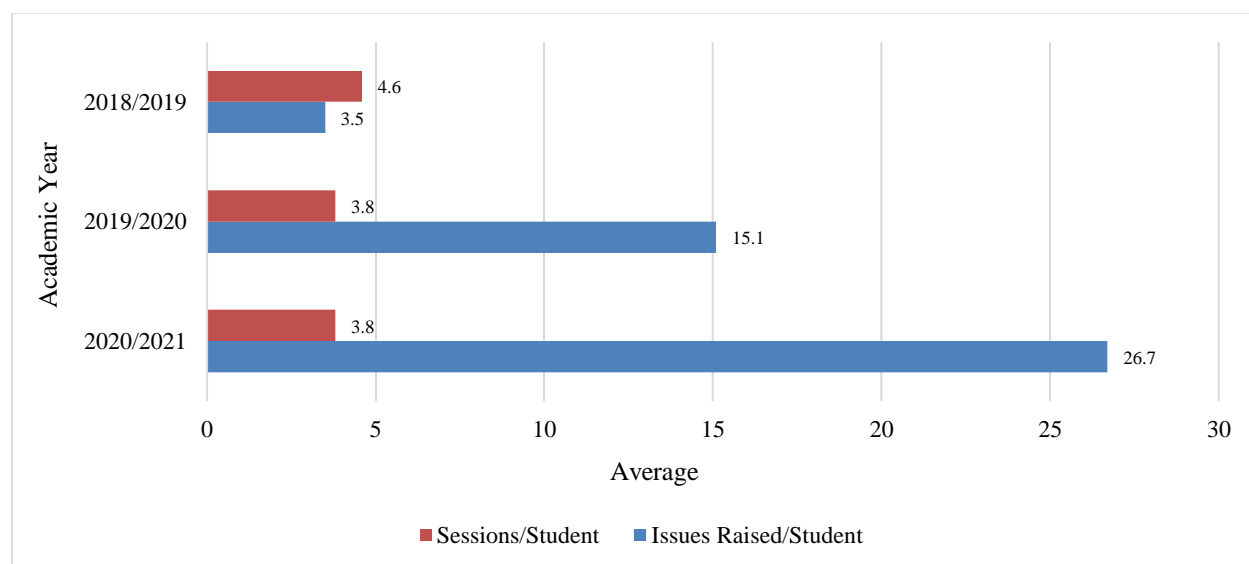


The average number of counselling sessions per student per year was greatest at 4.6 in 2018-2019, decreasing to 3.8 in 2019-2020, where it remained during in 2020-2021 (Figure 5).

The number of issues brought to King's counselling services by students on the other hand increased drastically over time. In 2018-2019 issues raised per student per year was 3.5, increasing to 15.1 in 2019-2020 and again to 26.7 in 2020-2021 (Figure 5).

Figure 5

Student Program Utilization



The most prominent issues raised by students during the academic year prior to the pandemic (2018-2019) were mood and emotional issues ($n = 433$ [32.1%]) followed by university life ($n = 304$ [22.5%]) and resiliency/coping/stress ($n = 200$ [14.8%]). For the following year (2019-2020) when the pandemic first emerged in the spring term but had limited impact on counselling services, the most prominent became resiliency/coping/stress ($n = 1390$ [21.2%]), followed by mood and emotional issues ($n = 1053$ [16.1%]). And in 2020-2021 fully under the pandemic, the most prominent issues were resiliency/coping/stress ($n = 2892$ [31.6%]) university life ($n = 1406$ [15.3%]), and mood and emotional issues ($n = 1257$ [13.7%]; see Table 3a).

Table 3a

Most Common Issues Raised in Counselling by Year

2018/2019	<i>n</i>	%	2019/2020	<i>n</i>	%	2020/2021	<i>n</i>	%
Mood/Emotions	433	32.1	Resiliency/Coping /Stress	1390	21.2	Resiliency/Coping /Stress	2892	31.6
University Life	304	22.5	Mood/Emotions	1053	16.1	University Life	1406	15.3
Resiliency/Coping /Stress	200	14.8	Physical Wellness/Addiction	1017	15.5	Mood/Emotions	1257	13.7
Relational Concerns	164	12.1	Relational Concerns	998	14.5	Physical Wellness/Addiction	1119	12.2
Trauma and Loss	124	9.2	University Life	889	13.6	Relational Concerns	1073	11.7
Physical Wellness/Addiction	67	5.0	Diversity	591	9.0	Diversity	765	8.3
Risk Assessment	48	3.6	Trauma and Loss	484	7.4	Trauma and Loss	553	6.0
Diversity	11	0.8	Risk Assessment	183	2.9	Risk Assessment	101	1.1
Total	1351	100	Total	6605	100	Total	9166	100

The most prominent issues raised by students across all three years in total were resiliency/coping/stress ($n = 4482$ [26.2%]), mood and emotional issues ($n = 2743$ [16.0%]), university life ($n = 2599$ [15.2%]), and relational concerns ($n = 2235$ [13.1%]; Table 3b). Also worth noting is the increase issues raised within the diversity category rose sharply from only 11 in 2018-2019 (0.8%) to 765 in 2020-2021 (8.3%).

Table 3b

Total Issues Raised in Counselling from 2018-2019 to 2020-2021

	<i>n</i>	%
Resiliency/Coping/Stress	4482	26.2
Mood/Emotions	2743	16.0
University Life	2599	15.2
Relational Concerns	2235	13.1
Physical Wellness/Addiction	2203	12.9
Diversity	1367	8.0
Trauma and Loss	1161	6.8
Risk Assessment	332	1.9
Total	17122	100

DISCUSSION

There are several results worthy of further discussion in the present findings and the case study illustration. The first cluster of findings indicates that during the first full year under the pandemic, there was a significant drop in both the number of students seeking counselling (21.7%) and the total number of student appointments (25.7%). These findings mirror other research that found an average decline of 32% in students seeking college counselling services, and an average decline of 19% in attended appointments (CCMH, 2021). Our findings also indicated a slight reduction in the average number of counselling sessions per student during the pandemic (from 4.6 to 3.8). This finding, on the other hand, contrasts with others the other research which found that appointments per student increased by 20% in the pandemic year (CCMH, 2021). Individual counselling was the sole service provided, and this is the most commonly offered type of assistance in post-secondary counselling centers (Matthews & Csiernik, 2019).

These findings may be explained by the context of how campus services were impacted by the pandemic. KUC closed all face-to-face contact on March 17, 2020, including counselling services for students. This lasted for two weeks before the ACSD Department began virtual and phone counselling sessions, which continued as the exclusive format through the 2020-2021 academic year in response to public health measures. At the time of the initial transition, several students returned to continue their counselling, but not all. Initially, there was a perception that virtual counselling would be a shorter-term reality and some students chose to wait for the resumption of in-person counselling. Some students who contacted the ACSD Department for support, particularly during the exam period, may have been uninformed that counselling was once again accessible or did not desire to undertake counselling virtually or by phone. In addition, when virtual counselling first became available, counsellors initially had lower caseloads while they acclimated and became more comfortable providing service online as they adjusted to new technological and administrative realities.

The decline in number of students, appointments, and sessions during the pandemic has not been unique to KUC and other studies have helped to explain these findings within the broader post-secondary trends resulting from the impact of COVID-19. These trends include: the rapid transition to remote learning and remote mental health services and reduction of students in residence and/or living out of province (CCMH, 2021; Nath, 2021); barriers to access or unawareness of virtual counselling (Batra et al., 2021; CCMH, 2021; Nath, 2021); stigma of seeking mental health services (Batra et al., 2021); a preference for in-person counselling, lack of privacy during virtual appointments, and limited access to virtual technology (CCMH, 2021).

The second important finding of the present study was the dramatic increase over time (78.6%) in the number of presenting issues raised by students during counselling during the pandemic. This finding aligns with survey data by Statistics Canada in 2020, which found a three-fold increase in the proportion of respondents reporting fair or poor mental health compared to the previous two years (Turna, 2021). Some of this increase may be attributable to KUC counsellors becoming increasingly more comfortable with the reporting tool, but the majority of this change seems to be related to increased clinical complexity, such that with the onset of the pandemic, students began presenting with more multilayered concerns. Students reported experiences of isolation, financial impact, living in closer contact with household members, changes in routine and feelings of uncertainty; they tended to introduce new issues as well as exacerbated existing issues. This is exemplified in the case study of Perdita described earlier.

The third key finding is that over the three-year period studied, the most prominent student issues reported were resiliency/coping/stress (26.2%), mood and emotional issues (16.0%), university life (15.2%), and relational concerns (13.1%).

The first category, resiliency/coping/stress, includes issues such as caregiving/family health, financial stress, housing, life transitions, and the pandemic, which was also illustrated in the case study. Moreover, others have found similar issues emerging for post-secondary students coping with the pandemic, such as a negative impact on family and social life, reduced motivation, and precarious living situations (Robson, 2020); increased caregiving responsibilities for family members, and financial difficulties (Batra et al., 2021; Dodd et al., 2021; Lederer et al., 2021; Savarese et al., 2020).

The second category, mood and emotional issues, includes problems such as anxiety, depression, and distress tolerance, some of which were also a focal point of the case study. Again, similar issues have emerged in other studies, including reports of mental and physical distress due to changes in routine and isolation from family and friends (Robson, 2020); and a higher prevalence of depression, anxiety, and stress, and lower wellbeing during the pandemic (Batra et al., 2021; Dodd et al., 2021; Jiang, 2020; Lederer et al., 2021; Savarese et al., 2020).

The third category, university life, includes issues such as academic stress, homesickness, and online learning, all of which were also illustrated in the case study. Several authors have reported similar issues for post-secondary students during the pandemic, such as stressful academic responsibilities being exacerbated and difficulty navigating online learning (Batra et al., 2021; Dodd et al., 2021; Lederer et al., 2021; Savarese et al., 2020).

The fourth category, relational concerns, includes issues such as co-living conflicts, loneliness, and relationship issues, most of which are yet again illustrated in the case study. Several authors have documented the negative impact of social-isolation, loneliness, fear/uncertainty, and reduced support/services on the mental health and wellness of university students globally. The pandemic has disrupted students' traditional post-secondary experience, reducing opportunities for social interaction, engagement in university life, relationships with peers and faculty; and requiring adjustment to forced living with family (Batra et al., 2021; CCMH, 2021; Dodd et al., 2021; Jiang, 2020; Lederer et al., 2021; Savarese et al., 2020; Turna, 2021).

Finally, the fourth noteworthy finding of the present study was the substantial increase in diversity issues raised by students during the pandemic, both in number and proportion of all issues

(Table 3a). This category includes issues such as family culture, gender, and identity, some of which were also discussed in the case study. This increase reflects the emergence of increased awareness and action in response to the Black Lives Matter (BLM) and related global movements that occurred during this time. Such movements may have had a reciprocal impact; making students more likely to bring forward these issues to counsellors and making counsellors more sensitive to asking students about their experience with such issues. Others have found that post-secondary students of colour, from marginalized communities and/or racial and ethnic minorities, faced greater discrimination, xenophobia, and challenges accessing mental health treatment during the pandemic (Dodd et al., 2021; Lederer et al., 2021; Liu et al., 2020).

Also notable regarding diversity was that a significantly larger proportion of women sought counselling than men. Likewise, a disproportionate number of older students than would be expected attended counselling. Female college students have exhibited higher anxiety and depression levels than males, although stigma is a known contributor to men not accessing mental health services (Batra et al., 2021). This finding is supported by other research indicating that female sex was a significant predictor of generalized anxiety disorder, major depressive disorder, and significant stress during the pandemic (Dodd et al., 2021; Turna, 2021).

PRACTICE IMPLICATIONS

These findings lead to several practice implications. Given the reduction in the number of students seeking counselling and attending appointments with the concurrent dramatic increase and complexity of presenting issues, the first implication is that counselling services at post-

secondary institutions need to accelerate their outreach, support, and resources to students during extraordinary times. Advertising counselling services on university webpages is an important first step to ensure students' awareness of virtual counselling resources (Dodd et al., 2021). Developing effective strategies to ensure accessibility of mental health services, and intentionally reaching out to students with exceptional circumstances, is also helpful (Liu et al., 2020). To expand traditional services, some suggest that 'hybrid' models that mix virtual and in-person counselling services will become more common in post-secondary institutions in the future (Nath, 2021). For example, this might include flexible service models, such as both walk-in and virtual services to provide remote counselling interventions (Batra et al., 2021; Liu et al., 2020). Virtual counselling does present challenges during crisis situations, so developing a proactive plan with students to manage these situations is important; for example they can be provided with online apps to connect with local crisis services (Nath, 2021). Online counselling interventions during emergency situations was also found to increase students' resilience and quickly identify issues of concern (Savarese et al., 2020).

The overall heightened incidence of students' presenting issues around resiliency/coping/stress, mood and emotions, university life, and relational concerns, suggests that post-secondary institutions' counselling services need to provide targeted resources and supports in these areas, as they have become core providers of mental health services. Providing psychosocial support and targeted interventions, monitoring and promptly addressing post-secondary students' mental health during the pandemic and potential similar future crises, is needed to mitigate damage to their mental health (Jiang, 2020). Identifying students' strengths and promoting

their resilience will support them in the eventual return to on-campus learning and the skills to respond more effectively to future crises (Liu et al., 2020). Several authors have made recommendations for how faculty can support their students' mental health and wellness. These include: developing positive relationships with students, role modelling wellness, watching for signs of struggling students, and referring them to campus resources (Banerjee, 2020); intentionally managing their own stress to avoid creating a tense classroom environment, since the majority of faculty report increased workload stress (CICMH, 2020); being more flexible and compassionate regarding course delivery and evaluation, as this creates a healthy classroom environment and reduces students' anxiety (Langille et al., 2020); and understanding the multiple challenges for students of balancing online learning, family responsibilities, financial difficulties, etc. (Robson, 2020).

The increase in diversity issues, and greater representation of female students, is an admonition to counselling services to pay greater attention to the mental health disparities these vulnerable populations may face to ensure more equitable service. For example, future interventions could include new policies and tailored interventions to address the specific needs of women (Batra et al., 2021). Liu et al. (2020), argue that schools can be proactive to assist counsellors' connection with vulnerable populations, by finding ways to track students with pre-existing mental health conditions, those limited financial means, and international students. Removing or diminishing existing barriers to access should be a guiding principle for university counselling centers. However, universities and colleges are challenged to create policies and provide more educational, emotional, and financial support to vulnerable groups to avoid

worsening existing disparities (Dodd et al., 2021). Potential solutions include using an equity framework and quality data to guide processes and decisions, prioritizing and expanding student support services, and providing students with clear information (Lederer et al., 2021).

RESEARCH LIMITATIONS AND IMPLICATIONS

As with any secondary analysis of data, the study is limited by what was available. With only three years of available data covering both the pre-pandemic period and the pandemic period, apparent trends from prior to the pandemic to the present should be interpreted with caution. Likewise, the database itself was modified in all three years of its existence to better suit the practice needs of the staff, but that leads to questions of how much of the differences found each year could be artefacts of these changes. A major limit of the data and a major research implication was the limited demographic information recorded: only dichotomous male/female and under/over age 25 information was collected by ACSD, with no information on race, other issues such as ability, sexual identification, and religion. Given that King's is a Catholic institution, these are all important attributes for fully understanding the impact of the pandemic on students' mental health and ACSD services, and in making any practice and policy changes post-pandemic. This speaks to the larger issue in terms of counselling and assessment, as any issues of intersectionality cannot be ascertained. Addressing these areas is recommended in future research on university counselling services for post-secondary students.

CONCLUSION

This chapter focused on how the COVID-19 pandemic, and the associated transition to online learning, has impacted post-secondary students' mental health and counselling services. A comparative review of students' presenting issues and usage of counselling services before and during the pandemic was undertaken at one Canadian institution. Secondary data was analyzed over three years (2018-2021) and illustrated with a case study, with the goal of understanding the trends in how students have coped with mental health stressors before and during the pandemic, and their service use needs post-pandemic. Several key findings were discussed, highlighting the significant drop in students seeking counselling and appointments, the dramatic increase in the number of students' presenting issues, the prominence of resiliency/coping/stress, mood and emotional issues, university life, and relational concerns, and a substantial increase in reported diversity issues.

Practice implications were discussed, including providing more outreach, support and resources to students; targeting resources to the most prominent issues; faculty support of students' mental health and wellness; and prioritizing vulnerable student populations to ensure equitable service. Research limitations and implications were noted. These implications may be helpful for those working in other post-secondary counselling departments, mental health professionals, administrators, faculty, and students.

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