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Off-campus study due the Coronavirus pandemic and access to psychological services: Challenges faced by the students from the School of Applied Human Sciences at the University of KwaZulu-Natal

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Declaration

I, Shaneece Chanderpaul, declare that this dissertation is my own academic work. It has not been submitted before at UKZN nor at any other institution for any kind of examination. All citations, references and ideas that have been borrowed have been duly acknowledged.

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As the candidate's supervisor I have approved this thesis for submission.

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Dedication

I would like to dedicate my thesis to my Lord and Saviour Jesus Christ for it is only His Grace, Unmerited Favour, Strength and Guidance that has successfully seen me through the blessed journey of my dissertation. Psalm 32:8 “I will instruct you and teach you in the way you should go; I will guide you with My eye.”

May the findings of this study make a positive impact in the academic arena and ultimately may God be Glorified.

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To the gatekeeper and participants of my study, without your permission and participation this would have not been possible. For that I am ever so thankful.

Abstract

This research study examined students' off-campus study due to the Coronavirus pandemic and their access to psychological services. The aim was to explore the challenges faced by students from the School of Applied Human Sciences at the University of KwaZulu-Natal (UKZN). Nine students from the School of Applied Human Sciences and one member from Student Support Services from UKZN participated in this study. The study sample was selected using two non-probability sampling methods: purposive sampling and snowball sampling. The instrument utilised in the study consisted of a photo elicitation interview which was conducted via the Zoom communications platform. The data obtained from the study was qualitative in nature; hence the data was analysed using Braun and Clark's six phases of thematic analysis. The findings revealed that there were student challenges in terms of intersectionality of household responsibilities, isolation and studying. Students held positive attitudes towards reaching out for online psychological services offered by the university despite the public stigma arising from friends and family. Student counsellors also faced difficulties in rendering their services during the COVID-19 pandemic, including being fully booked, excessive workload coupled with home life demands and poor technology, and no private spaces to render their online psychological services. Being based off campus, students suggested that to promote their mental health meant prioritizing their physical, mental, and emotional well-being and creating support groups via Zoom or WhatsApp. Student counsellors could also play a role in promoting students' mental health when they are based off campus during the COVID-19 pandemic by raising awareness of online psychological services and assisting with time management and coping mechanisms.

Keywords: Psychological Services; COVID-19 pandemic; Off-Campus Study; Student Support Services; Theory of Planned Behaviour

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List of abbreviations

CCMS	Centre for Communication, Media and Society
COVID-19	Coronavirus
TPB	Theory of Planned Behaviour
UKZN	University of KwaZulu-Natal
USB	Universal Serial Bus
WHO	World Health Organization

Chapter 1

Introduction

1.1 Introduction

According to the World Health Organization (WHO, 2004, p. 1), mental health is defined as “a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”. Mental health cultivates a positive sense of self as demonstrated in the way a person thinks, feels, and behaves (WHO, 2004). Galderisi et al. (2015) stipulate that mental health comprises three components that enhance an individual’s self-concept. These components are emotional well-being, psychological well-being, and social well-being. Emotional well-being refers to the state of being satisfied with one’s life. Psychological well-being may be understood as the ability to effectively manage one’s daily activities and responsibilities and is also characterised by liking most aspects of one’s own personality. In addition, Galderisi et al. (2015) posit that social well-being is characterised by maintaining good relationships with others and having a sense of belonging to one’s society and contributing meaningfully to that society to make it conducive for all people to live in.

With hopes of a better career and contribution to society in the future, many people pursue a qualification from a higher education institution (Tinklin et al., 2005). However, Goodman (2017) and Hernández-Torrano et al. (2020) state that there is a growing concern about the mental health and well-being of university students. These authors highlight that entrance to university is a major transition where students face challenges of adjusting to academic demands, making their own decisions regarding their studies and their lives, whilst interacting with people from diverse backgrounds. Lee et al. (2021) concur that stressors such as adapting to this new environment and to self-directed learning, prioritising working, and managing time can make students vulnerable to mental disorders. Pereira et al. (2020) affirm that university students are at a higher risk of developing mental health problems and indicate that students are likely to experience their first symptoms before age 25.

1.2 Background

Recently, in 2020, the COVID-19 coronavirus was deemed a pandemic. The United Nations Educational, Scientific and Cultural Organization (UNESCO, 2021) stated that on 1 April 2020, schools and higher education institutions (HEIs) were shut down in a total of 185 countries;

this had affected 1 542 412 000 students constituting 89.4% of the total number of enrolled students. The International Association of Universities (IAU) (2020) launched a global survey on the impact of COVID-19 on HEIs and found that 59% of 424 countries that responded to the survey reported stopping all campus activities. Within the continent of Africa, 77% of the institutions that responded to this survey had done the same, as 91% of HEIs have infrastructure to communicate with staff and students about COVID-19 (IAU, 2020). It was also found that 60% of HEIs had adopted online learning (IAU, 2020).

The mental health status of students around the world has, however, not improved. According to IAU (2020), previous challenges that students faced are now magnified. Grubic et al. (2020) found that the COVID-19 pandemic has exacerbated pre-existing mental health challenges in students. This may be due to academic disruption, loss of prior routines, and a restriction in social contact. Gumede and Badriparsad (2022) assert that, during this time, students mental health worsened.

1.3 Problem statement

Globally, HEIs are dealing with increasing rates of mental disorders, while the increasing demand for psychological services on campuses exceeds the resources that are available to help students (Toubasi et al., 2022, Auerbach et al., 2018; Tinklin et al., 2005). Goodman (2017) stipulates that universities in the USA have an issue of insufficient funding for mental healthcare oncampuses, and the WHO (2003) notes that, in developing countries, mental health services are widely underfunded.

Martin and Oswin (2010) carried out a study to investigate mental health, access, and equity in higher education. A total of 1517 students who were part of the Disability Liaison Unit within an Australian university, and who had experienced mental health difficulties in their studies, were invited to complete the anonymous online survey, with only 54 students responding (Martin & Oswin, 2010). Depression (n=35) and anxiety (n=23) were the main mental health conditions; additionally, a dual diagnosis of depression and anxiety (n=25) was found in under half of the students (Martin & Oswin, 2010). Similarly, in South Africa, data collected by Bantjes et al. (2019) via a self-report online survey from first-year undergraduate students from two universities (n=1402) found that the most common mental disorders among university students were major depressive disorder (24.7%) and generalised anxiety disorder (31.5%).

Other stressors accompanying entrance into university include funding cuts and, since many universities are enrolling larger numbers of students, classes are now bigger, making it difficult for students to make friends and find a sense of affiliation (Macaskill, 2012). University students from South Africa face a myriad of stressors that pose a challenge to their mental health, particularly for students who are socio-economically disadvantaged. At the University of KwaZulu-Natal, a great number of African students come from disadvantaged socio-economic backgrounds. As noted by Motau (2015), this exacerbates stressors emanating from financial problems whereby students find it difficult to pay for tuition or books. Furthermore, the study by Motau (2015) noted other stressors, such as feeling misunderstood by their families, while death of a family member or illness also contributed to mental health challenges experienced by these university students.

Counselling services are provided to students across all South African tertiary institutions; however, these services are generally underutilised (Motau, 2015). A survey to understand mental health literacy was administered to 140 African students from the University of KwaZulu-Natal, ranging from first-year to third-year students (Zita, 2018). Only a minority (39.1%) of participants were able to identify major symptoms of common mental disorder (Zita, 2018). This indicates that a majority of students have a limited understanding of mental health and mental illness.

Apart from the lack of mental health literacy, there are barriers that prevent students from utilising psychological services on campus. According to the American College Health Association (2015), large public universities have long waiting lists for students awaiting mental healthcare. Mental healthcare services in South Africa are also insufficiently funded, receiving only a small percentage of the national health budget (Lund et al., 2010). Students in South Africa who cannot afford private mental healthcare have no choice but to rely on campus mental healthcare services (Kaminer & Shabalala, 2019). Students at the University of Cape Town and other universities across South Africa report being put on waiting lists while their mental health challenges escalate (Kaminer & Shabalala, 2019).

1.4 Rationale

To deal with the challenges discussed above, universities provide psychological services to students in order for them to acquire resources that will help them meet the demands of higher education, whilst also imparting tools to assist them in coping with the stressors that contribute to their mental health challenges (Aldiabat et al., 2014). In the US, there are counselling services as well as wellness and health-promotion services offered to students in the universities (Goodman, 2017). At the University of KwaZulu-Natal Howard College campus, mental healthcare providers offer psychological services in the form of group counselling sessions to students from the College of Humanities; these consist of career workshops, support groups, interview skills, and workshops on various topics that are relevant, whilst individual services consist of academic support, personal counselling, crisis management, psychotherapy, career counselling, and career assessment (Matabane, 2015).

The above services are free to all students who are registered with the College of Humanities regardless of their cultural, socio-economic and racial backgrounds (Matabane, 2015). Statistics gathered from the Student Support Services show that, from July 2012 to March 2014, 565 students used psychological services (Matabane, 2015). As found by Matabane (2015), out of the 565 students, 70% were female and 30% were male, with a majority being black Africans (73%), followed by Indians (10.2%), others (6.3%), whites (6.2%) and coloureds (4.3%) using these psychological services.

Prior to the COVID-19 pandemic, students from UKZN (Howard College) who accessed student support services reported a high need for, and the importance of, career counselling. Dlamini (2019) makes an important point when he notes that students typically present with varying issues as the year progresses. At the beginning of the year, academic information appears to be the major concern for students. In the middle of the year, students typically present with depression, anxiety, and food insecurity, while towards the end of the year, they present with issues involving relationships, as well as recurring depression and anxiety.

Historically, students globally have under-utilised psychological and counselling services on campus. Challenges of accessing on-campus psychological services internationally and in South Africa have been studied. However, there has been very little that has been reported in South Africa, particularly at UKZN, on the challenges faced by students who are off campus due the COVID-19 pandemic. Furthermore, very little research has been conducted on how

students can promote their mental health when they are based off campus. Therefore, this research study aimed to explore the challenges faced by students at the UKZN in accessing psychological services when they are based off campus.

1.5 Objectives of the study

1. To establish the challenges students at UKZN, who are off campus due to COVID-19, experience with accessing psychological services.
2. To establish the challenges that UKZN student counsellors experience in offering online psychological services.
3. To explore ways in which students can promote their mental health when they are off campus due to COVID-19.
4. To explore ways in which student counsellors can promote the students' mental health when they are based off campus due to COVID-19.

1.6 Research questions

1. What are some of the challenges that students, who are off campus due to COVID-19, experience with accessing psychological services?
2. What difficulties do student counsellors who work off campus because of COVID-19 encounter in providing psychological services?
3. How can students promote their mental health when they are based off campus due to COVID-19?
4. How can student counsellors promote student mental health when they are based off campus due to COVID-19?

1.7 Outline of the dissertation

The chapters of this study are divided as follows:

Chapter 1

This chapter contains the introduction as well as the background of the study, the statement of the research problem, the rationale of the study, objectives, and the research questions of the study.

Chapter 2

This chapter includes a critical review of the literature and theoretical framework sourced from journal articles, e-books and findings from masters and doctoral dissertations.

Chapter 3

This chapter contains the description of and justification of the study's research methodology that was used. The research approach, paradigm, design, sampling, data collection tools, type of data analysis, reflexivity, trustworthiness, and ethical considerations are all covered in this chapter.

Chapter 4

This section presents the key findings of the study. In order to answer the research questions of the study, thematic analysis was used to analyze the data.

Chapter 5

This chapter covers the discussion of the key findings of the study. The findings are discussed in relation to the literature and research objectives.

1.8 Conclusion

This chapter begins with the definition of mental health following the three components of mental health namely emotional well-being, psychological well-being, and social well-being. The chapter then goes on to highlight the background of the study which is higher education shifting from face-to-face learning to online learning due to the Coronavirus pandemic which in turn negatively impacted the mental health of university students. The problem statement in this chapter further emphasizes the barriers that cause university students whose mental health has been negatively impacted to underutilize university psychological services. The rationale subsequently states the need to conduct a study on the challenges students who are off campus due to Coronavirus pandemic face in accessing psychological services as well as how they were able to promote their mental health when they were based off campus. Thereafter the four objectives of the study and research questions are specified. Lastly, the outline of the dissertation is highlighted.

Chapter 2

Literature Review

2.1 Introduction

Chapter 1 provided a definition of mental health, according to the World Health Organization (WHO, 2004, p. 1). Good mental health helps a person develop a positive sense of self, which influences the way a person thinks, feels, and behaves (WHO, 2004). In addition to the mental health components mentioned by Galderisi et al. (2015) in chapter 1, Keyes (2002) further expounds on the three components: emotional, psychological, and social well-being. An individual assesses their life based on how they feel about it as well as how well they can function both socially and personally (Moore & Keyes, 2008). Moore and Keyes (2008) elaborate further by stating that emotional well-being is an individual's state of feeling more positive than negative over time. Psychological well-being can emerge when an individual carries out an intrapersonal reflection about how they view their life (Keyes, 2002). Psychological well-being consists of an individual having a sense of purpose in life, as well as a sense of self-acceptance and personal growth (Moore & Keyes, 2008). Social well-being, on the other hand, is when the individual is able to thrive in their communities because they feel a sense of belonging there, which in turn allows them to contribute meaningfully to society as a whole (Keyes, 2002).

As noted in Chapter 1, many students enrol in an HEI with high hopes for their future contribution to society and career. However, several authors (Goodman, 2017; Hernández-Torrano et al., 2020; Tinklin et al., 2005) have noted concerns about the mental health and well-being of university students. This is partly because of the students' challenging transition to a new context and way of learning, and to managing their lives amongst people from diverse backgrounds. Stressors related to this adaptation can make students vulnerable to mental disorders Callender et al. (2011), with the first symptoms emerging before the age of 25 (Pereira et al., 2020).

2.2 Psychological services in higher education

As mentioned in Chapter 1, globally, HEIs are experiencing higher rates of mental disorders amongst students, with an increasing demand for on-campus psychological services (Auerbach et al., 2018; Tinklin et al., 2005). These demands are straining available resources, as Goodman (2017) notes that many US universities have insufficient funding for mental healthcare on

campuses. In addition, the WHO (2003) notes that, in developing countries, mental health services are widely unfunded.

A study comprising 500 university students from Sialkot in Pakistan was conducted on the frequency of depression, anxiety, and stress; this revealed that 75% of students suffered with depression, 88.4% with anxiety and 84.4% with stress (Asif et al., 2020). Similarly, a year before COVID-19, in South Africa, data collected from a study by Bantjes et al. (2019) via a self-report online survey from first-year undergraduate students from two universities (n= 1402) found that the most common mental disorders among university students were major depressive disorder (24.7%) and generalised anxiety disorder (31.5%).

A study conducted by Auerbach et al. (2018) reported the results from the first stage of the WHO World Mental Health International College Student project. In this study, a series of surveys in 19 colleges across eight countries (Australia, Belgium, Germany, Mexico, Northern Ireland, South Africa, Spain, and the United States) were carried out among first-year students. According to this study, at least one-third of the first-year college students who had participated in the surveys reported having a history of one or more mental disorders. The most common mental disorder found across the eight countries was major depressive disorder, followed by generalised anxiety disorder. Aldiabat et al. (2014), Nami et al. (2014), Mewett and Sawyer (2016), and Beebe (2017) all concur with these findings and also note alcohol use disorder as a common mental health disorder. It is thus imperative to explore whether students reach out for psychological help in order to thrive in both their personal and academic lives.

Many universities provide psychological services to students to help them cope in higher education in order to mitigate mental health challenges (Aldiabat et al., 2014). In the USA, counselling, wellness, and health-promotion services are offered to students in universities (Goodman, 2017). In a USA study by Watkins et al. (2012), ten college counselling and mental health centres were interviewed about the need for student mental health services at universities. It was found that, although the numbers of students accessing these services are consistent, the severity of mental healthcare needs has increased from 'typical' developmental challenges (such as relationship stress) to severe mental disorders such as major depressive disorder. Therefore, it was concluded that there is a high need for mental healthcare services on campus.

2.2.1 Psychological services at UKZN

At the University of KwaZulu-Natal (Howard College), mental healthcare providers offer a number of psychological services to students from the College of Humanities (see Chapter 1). These services are free to all College of Humanities students, regardless of their background or demographic (Matabane, 2015). Statistics gathered from the Student Support Services show that, from July 2012 to March 2014, 565 Humanities students used psychological services (Matabane, 2015). Out of the 565 students, over two-thirds were female, with the majority being Africans (73%) and Indians (10.2%).

According to Sagar-Ouriaghli et al. (2020), male students at universities are less likely to access help for their mental health difficulties compared to female students, who constitute the majority who reach out for help. This is largely informed by the belief held by many men that they should always display strength, not just physically but also mentally, and reaching out for mental health support is a sign of weakness and vulnerability (Sagar-Ouriaghli et al., 2020). In terms of race, in historically white universities, African students have been found to have under-utilised university mental health support services; however, more recently, it has been found that African students who have a more positive view that their university is supportive will be more likely to utilise the university mental health service (Leath et al., 2021). In addition, African students who come from socio-economically disadvantaged backgrounds access these university mental health support services, as they are provided free by the university (Leath et al., 2021).

Prior to the COVID-19 pandemic, students from UKZN (Howard College) who accessed student support services reported a high need for career counselling. However, as mentioned in Chapter 1, students commonly present with different issues as the year progresses (Dlamini, 2019), ranging from academic information to relationship issues and depression, anxiety, and food insecurity. Students are also struggling with larger classes due to funding cuts. Students who are socio-economically disadvantaged especially struggle with financial and family issues.

These challenges in accessing on-campus psychological services have been studied internationally and in South Africa. However, the COVID-19 pandemic particularly presented issues for students who had to study off campus, and very little has been reported about this. Furthermore, very little research has been conducted on how students can promote their mental health when they are based off campus. Therefore, this research study aimed to explore the

challenges faced by the students from the School of Applied Human Sciences at the University of KwaZulu-Natal in accessing psychological services when they are based off campus due to COVID-19.

2.2.2 Psychological services in higher education during COVID-19

In 2020, the COVID-19 coronavirus was declared a pandemic. Consequently, as mentioned in Chapter 1, the majority of HEIs globally were shut down, affecting about 1.5 billion (89.4%) students. It was also found that about 60% of HEIs adopted online learning (IAU, 2020). According to Al-Kumaim et al. (2020), although online learning is an efficient platform designed to assist university students to study during the pandemic, many students were forced to enter the unfamiliar environment of online virtual learning platforms. This unfamiliar environment faced by students may have brought about stress and poor mental health, which in turn made it difficult for them to adapt to the online virtual platform environment (Al-Kumaim, 2020).

Consequently, the mental health status of students, already under challenge, was exacerbated by the COVID-19 experience (Grubic et al., 2020). According to the IAU (2020), the previous challenges faced by students were magnified. Factors involved here include academic disruption, loss of prior routines, and reduced social contact. As a result, during this time, mental health challenges experienced by students have worsened (Li & Leung, 2020).

2.3 Barriers and challenges to accessing psychological services in higher education

Counselling services are available to students across South African tertiary institutions; however, many students are not familiar with these services (Motau, 2015). A survey by Zita (2018) to understand mental health literacy showed that around 60% of students have a poor understanding of mental health and mental illness. However, as noted by the WHO (2001), mental health is an important part of overall health, which is seen as a state of having complete physical, mental, and social well-being. This indicates that mental health is indeed an important element of health.

Similarly, according to Shah (2017), health is made up of three components (physical, mental, and spiritual health), which are all linked together. A person with a chronic physical illness is at risk of developing a mental illness, and an individual with a mental health condition is at risk of developing a chronic physical condition (Shah, 2017). Likewise, a lack of spiritual

involvement may be a contributing factor for an individual to be vulnerable to physical illness and mental health problems (Shah, 2017). To treat mental health problems, there are mental health services which can both treat and prevent mental disorders (Matlala et al., 2018). Therefore, having knowledge of mental health and mental health services is important.

Apart from their lack of mental health literacy, students may experience barriers to utilising psychological services on campus. These services are often underfunded in large public universities, resulting in long waiting lists for mental healthcare (American College Health Association, 2015). A similar situation occurs in South Africa, where mental healthcare is only awarded a small percentage of the national health budget (Lund et al., 2010). If students in South Africa cannot afford private mental health services, they have to rely on (and wait for) campus mental healthcare services. For example, University of Cape Town students reported being put on waiting lists while their mental health challenges worsened (Kaminer & Shabalala, 2019).

2.4 Mental health challenges faced by students during COVID-19

During the peak of the COVID-19 pandemic, in Malaysia, university students experienced high levels of anxiety. Sundarasan et al. (2020) noted that 20.4% of students experienced minimal to moderate anxiety, while 6.6% experienced marked to severe anxiety, and 2.8% experienced extreme anxiety. The stressors that had exacerbated anxiety at this time were a lack of emotional support due to the pandemic, remote online classes, financial constraints, and uncertainty about their academic performance, graduating on time, and future career plans (Sundarasan et al., 2020).

Additionally, the IAU (2020) has mentioned that students with difficulties in learning are overwhelmed by the new study circumstances. Furthermore, those students from socially disadvantaged backgrounds who study, and work have lost their jobs, making them dependent on their families. Similarly, among Bangladeshi university students, financial insecurity has caused them depression and anxiety symptoms (Islam et al., 2020). During university closure, two-thirds of Bangladeshi students experienced depression due to thoughts of falling behind their peers academically, as many of these students are still out of reach of online classes (Islam et al., 2020). Students in the USA also faced similar challenges, as anxiety, stress and depressive symptoms may be linked to uncertainty about future employment, technological issues of online learning and financial constraints (Browning et al., 2021).

2.5 Off-campus study and mental health

Son et al. (2020) affirmed that existing mental health challenges still persist among university students who are off campus. They noted that students who are off campus still experience depressive thoughts during the COVID-19 pandemic. Their study with 195 USA students revealed the major conditions that contributed to this; they found that loneliness (33%), uncertainty (12%), powerlessness or hopelessness (10%), academic performance concerns (8%), and overthinking (5%) contributed greatly to the mental health challenges faced by these students. Even during such times, they found that the barriers that prevent the students from seeking help remain the same.

Students have struggled to find ways to cope with the stressors of the pandemic. A study by Aristovnik et al. (2020) revealed that, across the globe, students have contacted close family members at least once a day or made contact with their roommate or their social networks. Although tele-counselling services were offered by the university off campus, university students, according to Son et al. (2020), claimed the reason why they did not access the service was because their condition was not severe enough to seek out such services. They did not feel comfortable to interact with people with whom they were not familiar; they also felt uncomfortable speaking about their mental health over the phone and, lastly, they had a lack of trust in counselling services. This suggests that students are exhibiting an unfavourable attitude to seeking tele-counselling services which prevents them from accessing these services. A participant in this study captured the feelings of loneliness, uncertainty, powerless and hopelessness by saying: “I actually suffer from chronic depression. [COVID-19] has definitely made it a lot worse, just being in isolation and being home 24/7. It feels like I need to get out but there’s nowhere to go” (Son et al., 2020, p. 8).

2.6 Theoretical framework

An individual’s attitude towards a particular behaviour, subjective norms, and perceived behavioural control shapes their help-seeking behaviours. The Theory of Planned Behaviour (TPB) posits that an individual’s attitude towards a behaviour, subjective norms, and their perceived behavioural control all indicate an individual’s intention to engage in a behaviour (Ajzen, 1991). Most studies that adopt the TPB are quantitative in nature (Bohon et al., 2016; Motau, 2015; Rise et al., 2010; Tomczyk et al., 2020). However, some qualitative studies have employed the TPB, and it was also employed in this study (Schomerus et al., 2009; Widayati et al., 2015). Rise et al. (2010) used meta-analytic procedures to study the role of self-identity

in the Theory of Planned Behaviour, and they found that self-identity is an important predictor of behaviour and intentions. Motau (2015) conducted a quantitative study using a questionnaire and found that being stigmatised and being judged in a negative way (including discrimination) influence students to not seek psychological help. This then presents a challenge to students in accessing psychological services. Students are nonetheless beginning to understand the role of psychologists and the positive value of utilising these services, which in turn helps the students to show a positive attitude towards seeking help (Motau, 2015).

2.6.1 Attitudes towards seeking psychological services

Attitudes within TPB are defined as the degree to which an individual evaluates a certain behaviour as either being favourable or unfavourable (Renzi & Klobas, 2008). Attitudes involve beliefs about consequences from performing certain behaviours (Motau, 2015). In South Africa, attitudes towards reaching out for psychological services are largely informed by culture; cultural beliefs have been said to be one of the major barriers to seeking psychological services. For example, Ruane (2010) notes that, in many African cultures, it may be perceived as embarrassing and shameful to reach out to psychological services for help. Burns (2011) concurs that many people in Africa prefer to consult with traditional healers about their spiritual and personal problems. Moreover, Africans tend to view psychological services as largely rendered by white psychologists who have a limited understanding of African cultures and therefore possess a limited understanding of the struggles that Africans face (Ruane, 2010).

In addition, during apartheid, the way in which Africans in South Africa were treated in the mental healthcare system was unfair; due to this brutal past, the attitude of Africans towards seeking psychological services may be negatively influenced. In a preliminary review by the WHO (1977), between 8000 and 9000 Africans in South Africa who had mental disorders were detained against their will in institutions that treated them poorly. White people presenting with mental disorders were placed in facilities provided by the government with three times as many beds provided for white patients, compared to African patients (WHO, 1977). Furthermore, Burke (2006) highlights that, during apartheid in South Africa, Africans who needed psychological services were either given sub-standard services or denied these psychological services altogether. Furthermore, many Africans who did receive psychiatric treatment during apartheid were subjected to inhumane treatment, where up to 10 000 African patients were incarcerated and excessively drugged; patients slept on mats on a concrete floor and used communal showers often without hot water (Burke, 2006).

Dlamini (2019) states that there are many reasons that make students reach out for psychological help. It has been found that parents of students from a Dutch university had encouraged their children to seek out psychological help for their mental health problems that were due to study-related stress (Smit, 2015). However, in relation to the TPB, Dutch students displayed an unfavourable attitude towards seeking professional help as they felt that stress is a 'normal' part of university life; stress was seen as being a valuable marker that distinguishes these students from their peers who are not studying, thus they tended not to seek psychological help (Smit, 2015). They did, however, seek psychological help if it was motivated by their parents, but not because they had found it favourable from their own perspective (Smit, 2015).

In South Africa, in a study conducted by Dlamini (2019) on the UKZN Pietermaritzburg campus, it was revealed that students who underperformed academically were sent alerts by the university, directing them to seek academic counselling. While receiving academic counselling, they were informed that they may need to use the psychological services offered at UKZN (Pietermaritzburg campus). Psychological services at UKZN are comprised of psycho-educational support, personal counselling, and psychotherapy, as well as career assessment and counselling (Dlamini, 2019). In this study, despite students knowing about the existence of the university counselling services, they had to be sent alerts by the university to bring to their attention that they needed academic counselling services. This indicates that the students had an unfavourable attitude towards seeking academic and psychological services on their own without having to be sent alerts. In another study by McKenzie et al. (2015), university students experiencing academic challenges accessed university counselling services on their own, without having to be sent any alert by the university reminding them that they need academic counselling. Hence, not all university students hold unfavourable attitudes when seeking academic counselling.

Nonetheless, the study by Dlamini (2019) did show that some students reached out for the university psychological services to aid them in overcoming loneliness upon first entry to campus, whilst other students sought help to deal with anxiety and fear due to high expectations from parents (Dlamini, 2019). The belief that psychological services would assist them to overcome loneliness, anxiety, and fear elicited a favourable attitude towards seeking psychological services, which in turn allowed them to reach out to their peers and student counsellors.

2.6.2 The role of subjective norms in seeking psychological services

According to Renzi and Klobas (2008), the social pressures related to whether or not to perform a behaviour known as subjective norms. Stone et al. (2009) stated that subjective norms may be viewed as descriptive or injunctive. Lawson (2016) gives an example of how stigma is influenced by descriptive and injunctive norms. Descriptive norms refer to an individual's view of how often a peer group takes part in a specific behaviour, or endorses a particular belief or attitude (Lawson, 2016). For example, an individual may see that their peer group stigmatises a person with a mental illness and treats that person badly; the individual may then behave in accordance with the attitudes displayed by their peers. Injunctive norms, on the other hand, refer to the individual's perception of the behaviours, beliefs, and attitudes that are either approved or disapproved of by their peer groups (Lawson, 2016). An example of an injunctive norm is where an individual's peers believe that a person with mental illness should be treated differently and so the individual also starts to share the same belief (Lawson, 2016).

Individuals with mental illness are often stigmatised by other people (Corrigan et al., 2003). Historically, mental illness was viewed as a form of demon possession; people with mental illness were therefore stigmatised (Fink, 1992). In South Africa, it was reported that people with mental illness were stigmatised as being bewitched, insane, weak, mad, lazy, and unable to think or do anything (Lund et al., 2008). Stigma is also identified as one of the common barriers to seeking psychological services. Smit (2015) identified two types of stigmas that prevent students from seeking psychological services: public stigma and self-stigma. Public stigma is the fear of not living up to society's expectations of success, while self-stigma involves an internal struggle where students fail to admit that they are experiencing mental health problems. In universities in the USA, stigma was also identified as a common barrier to seeking psychological services (Goodman, 2017). There is a strong relationship between subjective norms and help-seeking behaviour, as stigma has prevented many students from accessing psychological services.

In the UK, students also face stigma attached to mental health problems, as well as the fear of potential alienation, which makes it difficult for them to disclose their mental health status and seek help on campus (Tinklin et al., 2005). According to Stone et al. (2009), a favourable attitude, coupled with a supportive group norm, facilitates a strong intention to perform a behaviour. In the above study, the injunctive norm is demonstrated by the student's fear of

alienation, which is facilitated by negative attitudes towards mental healthcare services; thus, psychological services were not sought by students on campus.

Similarly, studies conducted with Australian university students showed a fear of disclosure due to stigma and discrimination (Martin & Oswin, 2010). A study carried out by Matabane (2015) amongst first-year students in the College of Humanities at UKZN (Howard College) highlighted how stigma and discrimination are highly feared among students, especially when other people find out that they utilise psychological services on campus. Apart from stigma, Smit (2015) also found that negative experiences with healthcare professionals on campus deter students from seeking psychological services. The findings from the above studies (Martin & Oswin, 2010; Matabane, 2015) highlight how stigma is influenced by subjective norms, which in turn prevents students from utilising psychological services.

2.6.3 Perceived behavioural control towards seeking psychological services

Stone et al. (2009) asserted that perceived behavioural control is when a particular behaviour is viewed as either difficult or easy to execute. Additionally, perceived behavioural control can have an effect on both behaviour and intention (Stone et al., 2009). Perceived behavioural control encompasses: i) self-efficacy, which is the confidence an individual has to perform a certain behaviour, and ii) controllability, which is the extent of the control an individual has to perform a particular behaviour (Tomczyk et al., 2020). When there are barriers to performing a certain behaviour, then that behaviour is viewed as difficult to execute (Stone et al., 2009).

One of the barriers to seeking out psychological services in South Africa is the geographical location of these services. The key reasons attributed to the low priority of mental health in South Africa were: i) the competition for resources by higher priority public concerns, and ii) not enough political support from the public sector (Lund et al., 2011). In the province of KwaZulu-Natal, in 2010, there were 32 psychiatrists who worked in the public health sector and only six of these were located outside of the major cities (Burns, 2011).

Apart from the geographical inaccessibility of psychological services in rural areas, a lack of knowledge of the service provided is also a barrier to accessing psychological services. In South Africa, the study conducted at UKZN (Howard College) by Matabane (2015) showed that most of the participants in the study were not aware of the psychological services offered on campus. This is clearly a challenge to accessing psychological services, and it has the

potential to impact the students' self-efficacy. Students, in this case, cannot exercise confidence to execute help-seeking behaviour due to their lack of awareness of psychological services. Additionally, this also affects the students' perceived behavioural control, as they cannot have control over a help-seeking behaviour if they lack knowledge of the service provided.

The students were also unaware of the scope of practice of a psychologist. The same went for the Pietermaritzburg campus of UKZN, where a study on students' use of psychological services on campus also found that students were unaware of such services existing on campus (Dlamini, 2019). Thus, lack of knowledge served as a barrier to executing help-seeking behaviour. This study seeks to explore the role that the attitudes, subjective norms, and perceived behavioural control play in the intention of students to seek psychological services whilst based off campus and how they promote their mental health when they are off campus due to COVID-19. Although the use of TPB in solely a qualitative research study is not very common, due to the limited number of participants, the proposed study made use of a qualitative approach (Renzi & Klobas, 2008).

2.7 Conclusion

This chapter provided a review of the literature on psychological services in higher education. Through this review, it has been shown that there were pre-existing barriers and challenges that university students faced in accessing psychological services whilst being on campus, and these barriers and challenges continued to exist even when students studied off campus due to the COVID 19 pandemic. Students were not alone in the struggle, as staff from the university's Student Support Services also faced challenges in rendering psychological services prior to COVID-19, as well as during COVID-19. It was evident from the literature that students' mental health was impacted negatively during COVID-19. The literature review was guided by the theory of planned behaviour, whereby attitude, subjective norms, and perceived behavioural control inform the behaviour of whether students intend to utilise university psychological services. In summary, it has been apparent from the literature that very little has been reported at the University of KwaZulu-Natal on the challenges faced by students who are off campus due to the COVID-19 pandemic and how they have promoted their mental health while being based off campus.

Chapter 3

Methodology

3.1 Introduction

Research methodology is a guide for how a researcher goes about designing their study to meet the research objectives and aims (Igwenagu, 2016). The purpose of the research methodology, as determined by Rehman and Alharthi (2016), is to introduce the research design and data collection tools to be employed. This research study made use of a qualitative research methodology, as the focus was on the subjective, personal, and experiential knowledge that was held by participants (Kielmann et al., 2012).

3.2 Research approach

This study made use of a qualitative research approach. Soiferman (2010) posits that qualitative research is inductive in nature; thus, the researcher began by making specific observations of the people being studied and then moved on to identify patterns and themes in the data. In the early decades of the 20th century, the qualitative research approach was first utilised by sociologists and anthropologists as a method of inquiry (Mohajan, 2018). Currently, the qualitative research approach, according to Mohajan (2018), is a form of social action that is interested in the way people make sense of their life's experiences; thus, qualitative researchers are interested in what people believe in, along with how they make meaning of their experiences. Therefore, in this study, this type of approach was appropriate to utilise because it allowed the researcher to explore how students made sense of the challenges they faced in accessing psychological services when they were off campus due to the COVID-19 pandemic.

3.3 Research paradigm

The study was embedded in the interpretivist paradigm, as the researcher sought to make meaning from the subjective experiences of students (Neuman, 2014). The interpretivist paradigm was initially developed as a critique of use of the positivist paradigm in the area of social sciences; the latter paradigm stated that a single reality exists, which can be understood, observed, and measured (Ryan, 2018). The ontological assumptions of the interpretivist paradigm were rooted in the existence of multiple socially constructed realities, as reality is understood in various ways by individuals (Rehman & Alharthi, 2016). Thus, this study focused on the participants' subjective interpretations of the challenges they faced in accessing psychological services whilst being based off campus due to the COVID-19 pandemic. This

pandemic had fostered a global shift in the nature of reality as perceived by students, giving rise to a 'new normal'. Globally, several activities were shut down, including educational activities, which led to universities swiftly migrating to online learning as a new educational platform in response to the COVID-19 crisis (Adedoyin & Soykan, 2020).

Al-Saadi (2014) explains an epistemological assumption as the way in which knowledge is produced. In the present study, this was done by exploring and interpreting the meanings that participants had of their social world (Ormston et al., 2013). The researcher made sense of the participants' social world and understood it by engaging their understanding of it, along with their understanding of the phenomenon under study (Al-Saadi, 2014).

3.4 Research design

This study adopted an exploratory design. According to Neuman (2014), this design is utilised when an area of research is new, or little is known about the area of research, therefore exploration is needed. There have been studies that have sought to understand the barriers to help-seeking behaviour that prevent students from accessing psychological services whilst being present on campus (Dlamini, 2019; Matabane, 2015). However, students were based off campus due to the COVID-19 pandemic (Adedoyin & Soykan, 2020); therefore, the present study explored the challenges that students who are off campus experienced with accessing psychological services and explored ways in which students could have promoted their mental health when they were based off campus.

3.5 Sampling

In qualitative research, a sample may refer to a small number of cases that is selected from a large number of people; sampling is guided by the purpose of the study (Neuman, 2014). According to Neuman (2014), the use of a non-probability sampling method in qualitative research is not to generalise the findings but to fulfil the purpose of the study whilst extracting rich detailed data from the sample. The types of non-probability sampling method used in the present study were purposive sampling and snowball sampling. Purposive sampling is a sampling strategy that is used to select cases with a specific purpose in mind (Neuman, 2014). The researcher engaging in qualitative research decides what needs to be known and thereafter finds people who are able and willing to provide knowledge of, or share experience of, the phenomenon of interest in the study (Bernard, 2002). Hence, the study made use of inclusion and exclusion criteria to identify a suitable sample.

Inclusion/exclusion criteria refer to a set of predefined characteristics that can be used to select participants (Hornberger & Rangu, 2020). The inclusion criteria entailed: students who were registered at UKZN, and were 18 years and older, as typically at 18 years old, the participant is old enough to provide legal consent (David, 2016). This was not a comparison study; therefore, all genders could participate. Students from first year to masters level could to participate, as it is these students who study on campus and therefore had the chance of utilising the psychological services offered by UKZN. Students registered in Criminology and Forensic Studies; the Centre for Communication, Media and Society (CCMS); Psychology; and Social Work could participate, as these disciplines make up the School of Applied Human Sciences within the College of Humanities at UKZN. In addition, a member from UKZN's Student Support Services was included in the study.

A second technique used was snowball sampling. Ghaljaie et al. (2017) say that snowball sampling follows the initial selection of research participants; after the researcher gathers data from these participants, they then ask the participants to make a recommendation for similar cases for the study. Snowball sampling is used to access participants who are not easy to reach. Under the COVID-19 lockdown guidelines, the recruitment of participants was not permitted in person. Therefore, the researcher requested that the two participants who had already consented to take part in the study also invite other students that they might know who fit the inclusion criteria of the study. From this technique, another seven students responded. Saberi et al. (2013) highlights that snowball sampling has advantages such as the reduced amount of time it will take to recruit participants and it is financially feasible. Saberi et al. (2013) also state that the benefits of this type of online recruitment is that there are no travelling costs incurred by participants, and participants will not feel stigmatised by participating in the research, which allows them to feel more comfortable to share their experiences.

In total, nine students comprised the study sample, including the two students who helped recruit the other students. The small sample size was acceptable for the study because large samples are needed in quantitative studies to generate statistics that are generalisable; however, small sample sizes are used in qualitative studies because the aim is to gain information that will be useful in understanding the depth and complexity of the participants' social world (Gentles et al., 2015). Cohen et al. (2000) stated that an interview study can make use of fewer than ten participants to allow for greater depth of inquiry.

A study by Dlamini (2019) found that the School of Applied Human Science was the second highest school (20%) using Student Support Services. To capture views from a different perspective, a member of the university's Student Support Services at UKZN was also requested to participate in this study. Having the member from the Student Support Services' perspective in the study was important because they offer psychological support to students at the university and are aware of the stress students experience from academic pressure and personal issues (Kamunyu et al., 2016).

The researcher is herself a student from the School of Applied Human Sciences at UKZN, and thereby had easy access to the contact details of the College of Humanities Student Support Services. However, due to the limitation to strictly online contact brought about by the COVID-19 pandemic, the researcher reached out via email to the UKZN Howard College Administrative Officer from Student Support Services to request participation from their staff members. In response to the researcher, the Administrative Officer copied the email to the psychologist from the College of Humanities Student Support Services at UKZN. The psychologist agreed to participate, and the Zoom interview was then conducted. Thereafter, the psychologist extended the invitation to participate to other Student Support Services staff members but no other member responded. Though the researcher was open to having as many staff members from Student Support Services to participate in the study, only one member was able to serve as a representative of the support services staff members who work at the campus.

3.6 Data collection

For the study to have been conducted the researcher ensured that ethical clearance was obtained from the UKZN Research Ethics Committee (Appendix H). Gatekeepers are important mediators for gaining access to study settings and participants for research studies (Andoh-Arthur, 2019). Therefore, the researcher requested permission to recruit students and staff of UKZN from the Registrar of UKZN (Appendix I). Once participants were recruited, the researcher then obtained informed consent which entailed detailing the purpose of the study and the procedures. The participants were informed that there were no rewards or potential benefits from participating, and that there were minimal risks to the individual that may arise from participation. They were also informed that it was their right to participate or withdraw their participation at any time. This information was relayed in a language that participants understood (Appendix B) (Rose et al., 2009).

To indicate the participants had understood that their participation was voluntary, they were requested to sign the consent form and email it back to the researcher (Appendix C). Thereafter, a qualitative data collection tool was used. The student participants were emailed three pictures (Appendix D) and thereafter the researcher conducted a Zoom interview with questions (Appendix E) pertaining to the three pictures that were emailed to the student participants. According to Thomas (2009), photo elicitation refers to the use of photographs or images to create a verbal discussion. The use of images is powerful and represents a lived reality (Dondero, 2019). Photo elicitation activities are presented by the researcher (Glaw et al., 2017). Therefore, in this study, the researcher obtained the visual images from the internet (public domain). The images were selected by using visual semiotics. Visual semiotics is a sub-domain of semiotics that analyses how visual images communicate a message; it also serves to aid in the analysis of finding themes (Pelkey, 2020). This study aimed to find themes surrounding the challenges of studying off campus due to COVID-19 and the challenges of accessing psychological services whilst being based off campus.

The researcher was aware that the limitation to conducting a photo elicitation activity is that the visual materials may be interpreted differently by the researcher compared to the participant, and the findings are not generalisable. However, as a strength, deep meaningful data may be collected by utilising photo elicitation activities (Glaw et al., 2017). The student participants were asked to provide answers to pictures in verbal form (Appendix D). Parker (2009) posits that photo elicitation allows for multiple views and/or various interpretations.

3.6.1 Activity 1: Photo elicitation interview pictures (students)

- Picture 1

During the COVID-19 pandemic, factors that have been acknowledged in contributing to students' level of stress were changes in their study environment, financial difficulties, and the challenges of balancing academics with personal life (Duraku & Hoxha, 2020). Students tend to feel overwhelmed by their academic workload and find it difficult to manage the university workload along with their recreational life (Kamel, 2018).

- Picture 2

Online studying for some students yields tasks that they find unmanageable which adds to students' stress levels (Fatonja et al., 2020). Fears of COVID-19 infection, along with the academic workload, have had negative effects on the health of some university students (Yang et al., 2021). Further, Fatonja et al. (2020) has added that university students find it difficult to adapt to online learning.

- Picture 3

Fatonja et al. (2020) has stated that learning online has benefits of convenience, easy access and flexibility, but it can also leave students feeling isolated. Sun et al. (2020) found that social isolation due to the protocol of social distancing has left university students with reduced emotional well-being, reduced support from peers, and has led to depression for some.

3.6.2 Activity 2: Semi-structured interview (student counsellor)

- When the interviews with student participants had concluded, the UKZN Psychologist from Student Support Services was interviewed via the Zoom Communications Platform (Appendix F).

3.7 Data analysis

Each photo elicitation interview was transcribed manually. Thematic analysis can be used to analyse interviews and photo elicitation activities (Glaw et al., 2017). The data gathered from the students and the student counsellor were analysed using Braun and Clarke's (2006) six phases of thematic analysis. Thematic analysis is a method of identifying, analysing, and reporting the themes which are present in the data (Braun & Clarke, 2006); the six stages are as follows:

1. Familiarisation: The researcher transcribed the interviews. The transcripts were then read and re-read by the researcher. By re-reading the transcript, the researcher made meaning of what participants had said which led to possible patterns being identified.
2. Coding: Here the researcher began to identify, highlight, and pick out general codes which are sentences or phrases in the transcripts that are relevant to the research questions.
3. Generating themes: After the data had been coded, patterns were identified, and the codes were then combined to form themes, or a code itself could become a theme.
4. Reviewing themes: When reviewing the themes generated in phase 3, it then became possible to remove themes that were not relevant, combine themes, or even separate themes.
5. Defining and naming themes: The researcher went back to give labels to the themes by considering the content of each theme.
6. Producing the report: The themes are supported by extracts from the data in order to augment the findings whilst also answering the research questions.

3.8 Reflexivity

Reflexivity is a process whereby the researcher carries out introspection on themselves and recognises that their personal background and assumptions affect how they conduct their research (Palaganas et al., 2017). Finlay (2002) asserts that research topics often stem from the researcher's subjective interests hence, the research topic was conceived through the researcher's interest in mental health and access to psychological services, as the researcher is a psychology student. The images that were used for the photo elicitation activity and for the interview were chosen by the researcher, based on their understanding of mental health challenges during the COVID-19 pandemic; therefore, the way the data was analysed included the researcher's understanding. Patnaik (2013) stated that the researcher has a pivotal role in influencing the way that the gathered data will be analysed. The researcher was aware that there might be biases in understanding mental health and the challenges in accessing psychological services. The researcher aimed to minimise bias by reflecting on and documenting the processes undertaken in this study (Patnaik, 2013).

3.9 Trustworthiness

To evaluate the rigour in quantitative research, measures of validity and reliability are used (Heale & Twycross, 2015). On the other hand, a widely used set of criteria to consider if the findings can be trusted in qualitative research are Guba's four criteria: credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985).

3.9.1 Credibility

Credibility refers to the demonstration that the research findings are a true reflection of the study (Shenton, 2004). To enhance the credibility of the study, triangulation was used; this is the practice of using data from multiple sources (Salkind, 2010). Apart from the students who participated in the study, a member from the UKZN Student Support Services was also interviewed as another data source to provide multiple realities about what is being studied. Credibility is also shown in the researcher's reflexivity where they are able to take note of their personal beliefs and judgements in the study (Palagnas et al., 2017). The researcher was mindful of her personal beliefs of the study but did not allow those beliefs to influence the findings of the study.

3.9.2 Transferability

When the findings of the research study can apply to other situations and contexts, transferability has been established (Shenton, 2004). The researcher ensured transferability by stating the number of student participants who took part in the study as well as the data collection method that was used in the study (Shenton, 2004).

3.9.3 Dependability

The researcher has provided the details about the methodology component of the study such that it could be repeated by other researchers (Shenton, 2004). The researcher has outlined the process of how data was collected and analysed, so that future researchers may be able to repeat the study.

3.9.4 Confirmability

The researcher ensured that the findings that emerged in the study accurately reflected the data offered by the participants and not the researcher's bias (Shenton, 2004). The researcher had confirmed the findings of the study with the participants, so that a true reflection of their views has been reported and not the preferences of the researcher.

3.10 Ethical considerations

Research ethics are established rules and guidelines that define researchers' conduct within a particular field of study (Akaranga & Makau, 2016). The researcher obtained Ethical Clearance from the UKZN Research Ethics Committee to conduct the study. The researcher made every effort to adhere to ethical protocols of the HSSREC. This includes maintaining the participants' autonomy and confidentiality. As per Ngobeni (2015), the consent form included the researcher's contact details, research supervisor's details, and the details of the Humanities Social Sciences Ethics Committee. Prior to collecting the data, all participants were emailed the informed consent sheet and made aware that, if they needed any clarity on the consent form, then they could request a phone call from the researcher.

Informed consent allows for participants to maintain their autonomy by knowing the purpose of the study and their rights, which include contacting the research supervisor or HSSREC if they wish to. Confidentiality was maintained through the use of pseudonyms. A pseudonym is a fake name that is given to participants in order to keep their identity anonymous (Given, 2008). The data collection was conducted as per COVID-19 regulation; therefore, the researcher engaged with participants via the Zoom online communications platforms. With the permission of the participants, interviews were audio-recorded using the researcher's cellphone. When it was time for the data to be analysed, audio-recordings became useful for the data to be transcribed (Bloor & Wood, 2006). The recordings were stored in an encrypted folder on the researcher's laptop. A copy on a USB was also sent to the supervisor to be stored in an encrypted folder, which will remain locked in the office cabinet of the research supervisor for safety.

During each Zoom interview with the participants, the researcher was respectful and assumed a neutral stance toward their responses, as there were no right or wrong answers (Gimbel, 2017). The focus of this study was on access to psychological services, rather than the students' emotional and psychological challenges; thus, the potential of harm to participants was minimised. Nonetheless, a mental healthcare practitioner was provisioned in the event of a student experiencing emotional distress stemming from participating in the study. The cost of the service was incurred by the practitioner as community service (Appendix G). Also, the purpose of the study was not to generalise the findings, but rather to gain a deeper understanding of the students' experience and challenges in accessing off-campus

psychological services and their mental health promotion strategies when they were off campus (Ghaljaie et al., 2017).

3.11 Conclusion

This chapter explained the qualitative research approach of the study and its exploratory research design. Thereafter the chapter highlighted how the targeted population of the study was sampled by using two non-probability sampling methods namely purposive sampling, and snowball sampling. Next, the tool that was used to collect the data which was photo elicitation interviews was explained in detail and how the data was analysed was described using Braun and Clarke's six phases of thematic analysis. The chapter also went on to highlight reflexivity of the study and using Guba's Four Criterion namely: Credibility, Transferability, Dependability and Confirmability, trustworthiness of the study was discussed. Lastly, the chapter ended with the ethical considerations that were taken into account when the study was conducted.

Chapter 4

Research findings

4.1 Introduction

This chapter presents the key findings from the photo elicitation interviews conducted with the student participants from UKZN as well as key findings from the semi-structured interview conducted with the psychologist from the UKZN College of Humanities Student Support Services. The aim was to explore the challenges faced by students at the University of KwaZulu-Natal in accessing psychological services when they were based off campus due to COVID-19. The participants' responses were analysed using Braun and Clarke's (2007) thematic analysis. Each theme and subtheme will be highlighted, explained, and substantiated with extracts from the interviews conducted with the participants.

4.2 Study participants

The study comprised a total of ten participants (see Table 1). Nine of which were suitable to participate in the study as they were students studying during the COVID-19 pandemic, and one staff representative from Student Support Services, who provided online psychological support during COVID-19 restrictions and had knowledge of the challenges that universities face in providing online psychological services. The student participants ranged in age from 20 to 27 years; there were five females and four males. Six participants were Indian, two were black, and one was white. All student participants either had a major in psychology or had taken it as an elective during their undergraduate study. Thus, they were also aware of the psychological services offered by the university.

Table 1 : Sample demographics

Student participants							
Pseudonym	Race	Sex	Age	Degree registered	Utilised UKZN psychological services	Utilised private psychological services	Did not utilise psychological services
Kruz	Indian	Male	20	Bachelor of Social Science	No	No	Yes
Mary	Indian	Female	25	Bachelor of Social Science Honours in General Psychology	Yes	Yes	No
Kirthi	Indian	Female	24	Master of Social Science	No	No	Yes
Ari	Indian	Female	27	Bachelor of Social Science Honours in General Psychology	No	No	Yes
Jaime	Black	Female	25	Bachelor of Social Science Honours in General Psychology	No	No	Yes
Sire	Black	Male	26	Bachelor of Social Science Honours in General Psychology	No	No	Yes
Frida	Indian	Female	25	Master of Social Science in Research Psychology	Yes	Yes	No
John	White	Male	26	Master of Social Science in Research Psychology	No	No	Yes
Chip	Indian	Male	24	Bachelor of Arts	No	No	Yes

Student support services representative

Role	Services provided
<ul style="list-style-type: none">• Psychologist	<ul style="list-style-type: none">• Personal counselling & psychotherapy• Career assessment & career counselling• Degree planning & academic support• Graduate recruitment & part-time employment• Developmental & psychosocial workshops• Support groups & forums• Advocacy & campaigns

The data is presented in relation to the four research questions focusing on some of the challenges that students and student counsellors who were off campus experienced with accessing/providing psychological services. Findings on how students promoted their mental health and how student counsellors promoted student mental health when they were off campus due to COVID-19 are also presented.

4.3 RQ1: What are some of the challenges that students, who are off campus due to COVID-19, experience with accessing psychological services?

Three subthemes emerged regarding the challenges that students faced as a result of off-campus study due to COVID-19. The subthemes are: i) an intersection of household responsibilities, isolation, and studying, ii) self-care versus self-indulgence: Attitudes towards reaching out for psychological help, and iii) family and friends: Subjective norms surrounding the use of psychological services.

4.3.1 An intersection of household responsibilities, isolation, and studying

The student participants indicated that they found it difficult to concentrate during online teaching compared to face-to-face teaching. The lack of campus resources and lack of interaction with their professors, lecturers, and tutors also added to the pressure of virtual learning. The inability to attend lectures, make new friends, or spend time with friends on campus, and also not having the in-person graduation experience, all added to their dissatisfaction with the COVID-19 student experience. Participants reported that disruptions in family life patterns, new study patterns, and chore allocations increased their level of dissatisfaction with online learning. Much of the tension felt by the student participants was exacerbated by engaging in domestic duties which also led to student roles and family member roles being blurred, thus causing an imbalance between work life and home life.

Frida expressed the challenge of being in the same space of the home where her roles as a student and a family member collided and merged as one. Not only was there an intersection of studying and household responsibilities, but also an intersection of being both a student and a family member (Sequeira & Dacey, 2020). Frida mentions:

Because of COVID, we are situated mostly at home or in the space of our families and we have to deal with doing household chores and there's much more responsibility and sometimes we can't be just in a secluded place and just say we

going to focus on our studies because we have to deal with our family lives as well.

Mary also expressed the challenge of studying off campus whereas, prior to COVID-19, students were given a schedule through which they could structure their academic and personal lives. However, due to COVID-19, students had to create their own schedules. Without this form of organisation (the schedules), according to Mary, not only were academic activities unorganised but this also contributed to the inability to partake in extracurricular activities and an active social life:

When it comes to students studying during COVID conditions, I think all these responsibilities become a little more difficult to manage because previously there was a sort of structure in place. You go to university, so that starts at a certain time, lectures start at a certain time, etc. There is already a sort-of schedule in place and you just need to slot in your social life and your extracurricular activities around that. But now because, during COVID, most people work from home, that academic time needs to be scheduled in by the student himself because there is not a preconceived schedule where he can work around it; he must create every single step and that is a bit daunting.

Kirthi also conveyed how the challenge of domestic duties impeded studies:

It's difficult to keep up with studying and many students that are at home sometimes get caught up with domestic duties because of the pandemic.

Mary deeply expressed the difficulty of studying at home and reiterated the challenge of allocating time to do studying and home activities:

Things are much different because, now that students are at home, they are expected to pick up more of the responsibilities, so they cannot operate as they would when they were on campus. The balance of the time that would have gone toward certain activities, some of the times now have to be increased or sometimes decreased, and that is difficult.

Kruz yearned for a balance between his work life and his studies and, just like Mary, he struggled with separating his student self from his personal self, which made it impossible for him to give sufficient time and energy for these roles:

As a student, we have so much to juggle at home. We aren't just students. We also have lives as personal individuals; we have personal relationships to maintain, some of us have work life to in addition to studying and it's just a lot to balance out. It's difficult to give equal time and effort to everything, especially since now we are at home and now we have to juggle all of this at once. We aren't going to respective places where we are one person. So, it's not like I am going to campus where on campus, I am focusing on being a student and, once I am done with campus, I am coming home, and I am just me and I can just watch a series and do all those things. Maybe now and then there is an overlap of doing assessments and assignments but, for the most part, my student self and personal self are separate. But with COVID and us being at home, everything sort of merged together. And students, therefore, students must find it difficult to attend to these various roles and give each role equal time and adequate energy.

While the participants might have spent more time with loved ones at home, they all identified a common challenge of having limited interaction with, or access to speak directly with, their lecturers and tutors, as well as lack of access to campus resources. Ari yearned for the classroom environment, which was more conducive to learning and to meeting students' emotional and academic needs:

In isolation, students during this COVID time have limited access to a lot of resources, limited interaction to professors, lecturers and tutors and it's gonna weigh the student down too much...

Kirthi expanded on the issues of limited access to lecturers and tutors:

I feel that there is limited interaction between the lecturer and the student so, even though interaction is encouraged via email, it's not always very helpful because you do not have the one-on-one basis with the lecturer, so you aren't able to understand a topic that may be explained to you so simply when it's face-to-face.

Kruz felt robbed of furthering his university experience. Being able to have a classroom experience, make new friends, and having the opportunity to have an in-person graduation had been taken away from him, leading to feelings of dissatisfaction with the university experience:

I was fortunate enough to have a university experience. I was on campus for first year and I would say two months for first semester in second year. For the new first years, they were robbed of having the university experience and, added to that, even people who didn't have a full year of university experience, I think we were also robbed too because we didn't get the opportunity to spend time on campus doing our degree. We were robbed of cultivating new ventures, having the university experience in general because, I mean let's be honest, doing all of this through a screen is just not the same as being in campus with your friends and going for lectures. It is sort of depressing as well to look back and think, oh well I didn't have a university experience, all I had was lectures through a screen and graduating through a screen, and it does take a toll when you look at it in terms of a personal aspect, because it feels sort of unfulfilled.

Sire emphasised the importance of engagement in learning:

The challenges students face are that of not being able to speak to your lecturers directly because, sometimes as a student before COVID, it was easier to go to the offices and talk to the lecturer and be like, "I don't understand what is happening, can you please elaborate further?", you know.

Kruz indicated that this isolation can lead to depression or feelings of sadness. He added that sadness is different from depression but often the two can be used synonymously. Depression is a mental disorder that impairs the daily functioning of an individual in the domains of work, school, and personal relationships, whilst sadness is a symptom of depression (Fitzgerald, 2019). In this instance, Kruz feared trivialising depression and did not want to equate sadness with depression:

I always associate depression with extreme sadness. I know it sounds like a trivialisation of the term depression and I know that it is much more than sadness. I think because when one is extremely sad, they don't have the energy to do anything; you're sort of wallowing in your emotion and that leaves you feeling unproductive and lazy. This then contributes to more negativity and emotions about yourself and how you view yourself. I feel depression is sort of a ripple effect for people. It starts off as sadness and then it grows into something much bigger.

4.3.2 Self-care versus self-indulgence: Attitudes towards reaching out for psychological help

Prior to the participants being asked about their attitude towards accessing psychological help when based off campus, eight out of nine participants indicated that they were aware of the on-campus psychological services being offered at UKZN. However, seven participants stated that they were not aware of the psychological services being offered off campus by UKZN. Overall, the participants displayed a favourable perspective towards accessing off-campus psychological services. Reaching out for psychological help was perceived as beneficial because of the ‘objective’ nature of the mental healthcare worker.

The participants acknowledged that seeking psychological help is typically associated with weakness or failure to handle life’s pressures. Kruz, on the other hand, spoke passionately of reaching out for psychological help and continued to emphasise it as a form of strength on the part of the student:

I think a student, the student is brave to do so because I think that it takes a really strong person to admit that they need help, because so many times, us as human beings want to fix things on our own and I think that is human nature. We don’t really want to accept help because we feel embarrassed to open up to people, especially if a student asks for psychological help, it would mean that they are asking a total stranger about an issue and when they open up it may make them vulnerable, which is such a hard thing for a lot of people to do, but again it takes a really strong person to do so. It takes a really strong person to admit that they need some sort of external help, because handling things on their own, it becomes too much or too difficult. It’s great for students to reach out for psychological help, especially if they do need it and [even] if they don’t necessarily need it, but if they need some sort of reassurance, it is also great in that aspect as well.

Barnett & Cooper (2018) defines self-care as involving routines or activities practiced by an individual that benefit their spiritual, psychological, and physical well-being. Frida viewed reaching out for psychological help as: *It’s self-care, it’s a brave thing to do*. She acknowledged that, at times, self-care might be seen as self-indulgence. Fatima et al. (2019) posited that self-indulgence refers to individuals giving in to an unrestrained need to satisfy their desires. Vidourek et al. (2014) confirmed that individuals who seek psychological help might be perceived as self-centered or lazy; as such, it takes courage and willpower to reach out.

Kruz mentioned that another problem is that, at times, students do not know how to conceptualise mental health and illness; thus are not able to identify when they need assistance:

Mental health is quite difficult to describe because there is so much associated with it, but I think it's sort of like when something is wrong in emotions and how you react and process things. That is the best way that I can describe it.

Individuals have distinct values which pertain to their beliefs and viewpoints that direct everyday life (Chowdhury, 2016). As such, individuals and those around them might not be able to identify factors that trigger and exacerbate the individual's undesirable mental health circumstances. Hence, Kirthi emphasised that psychological help is beneficial because of the mental health worker's 'objectivity' when establishing a professional and ethical relationship with the client. She felt that objectivity lessens the fear of being judged according to societal norms:

Psychological help is quite beneficial to an individual because the mental healthcare worker, since they are an outside or objective individual, they are able to pick up on things from an objective perspective, of course.

Sire expressed the dire need for the provision of psychological services by the university and that the university should treat this form of service as a priority. Sire also said that students, on the other hand, have a responsibility to prioritise their own mental health:

I feel like we as human beings neglect it [mental health] and so much so that we don't pay attention to that until we are at the verge of losing our mind. So I feel like psychological help needs to be addressed and paid attention to, because our mental health is not okay given that we are under COVID-19, something that has never happened before.

The growing prevalence of mental problems among college students has brought attention to the enormous demand for mental health services in colleges. Sire's view is in agreement with Toquero (2020), who said that due to the pandemic's global trends, higher education must give priority to academic needs, career counselling, and even medical services and programmes that should be available to students both on campus and online.

Despite not knowing about off-campus psychological services offered by UKZN prior to the interview, the participants held the belief that online psychological services offered by UKZN provided a convenient source of help for students who could not cope mentally during COVID-19. They believed that the act of reaching out for psychological help was easy to execute, because the shift to online psychological services offered by the campus was free, did not require the student to incur transportation costs and offered a degree of anonymity for the student. It was viewed by the participants as a convenient platform that allowed for students to confidentially open up to someone without feeling intimidated. Kruz captured these sentiments:

I think that it would be great because I think it's like a lifeline for those students who do need access to these psychological services. I think students who relied on these services back on campus, I think the online services will be like a lifeline, and for those students who didn't necessarily reach out for help, you know while they were on campus, and now if they would want to use these services, being based off campus would also be a great resource to them because now it is online and more convenient from the comfort of their homes, you know. They don't have to make a trip and since the services are free, it's even better for them.

This perspective takes into account that students who live in remote places had access to mental healthcare through online counselling offered by the university. Due to the lack, or limited availability, of mental health practitioners in rural locations (Burns, 2011), some students might not have access to any other type of mental healthcare. Sharing a similar view, Jaime stated:

It [online counselling] is more convenient, and they don't have to travel or walk to anywhere.

Mary enthusiastically noted an advantage of online counselling where it protects the identity of the student who chooses to reach out for the university's online psychological service:

I think they would be much more open to it [online counselling]; perhaps the internet and the virtual platforms provide a sense of anonymity or a barrier. It is not as close or as intimate as face-to-face contact. As a result, people become much more bold; by this, they don't have to go through any unnecessary discomfort.

Kruz also identified money as a limiting factor to accessing psychological service; however, he expressed his gratitude for the free service offered by the university which might minimise this challenge of incurring psychological service costs:

I would, most definitely I would, because, I mean, the campus help is free and is available and I think it's the best help you can use because it is there, it is available, it is free and because, let's face it, if I have to access psychological help that is outside of campus, I would need to pay. And I think people who are impoverished or students in my situation, where we are not earning a lot of money or not earning money at all, I would definitely make use of it because it is free and it is available and so why not?

Ari empathetically noted that the university online psychological service functioned as a medium through which students could minimise their isolation:

I think many of the students will find it as a convenience, because there is an outlet as opposed to being totally in isolation in the COVID pandemic.

On the other hand, it may seem unpleasant or unsettling if one believes that one has revealed too much in therapy (Audet, 2011). In this regard, Kirithi stated:

Some students during COVID may feel it to be more convenient to have online support services because it's an easier way of opening up to somebody. If somebody is directly in front of you, it might be intimidating; it might be embarrassing to open up about certain feelings, emotions or thoughts.

4.3.3 Family and friends: Subjective norms surrounding the use of psychological services

The participants stated that there can be stigma attached to the use of online psychological services that can be perpetuated by traditional conservative parents, family members or friends. Smit (2015) identified two types of stigmas that prevent students from seeking psychological services: public stigma and self-stigma. Public stigma can be viewed as the fear of not living up to society's expectations of success. It is the term used to describe negative attitudes and beliefs that lead others to fear, reject, shun, and discriminate against those who have mental illnesses. Self-stigma is an internal struggle where students fail to admit that they are experiencing mental health problems. Initially, Kruz highlighted that there is a gradual shift in perspective around the use of psychological services:

You know, I think the culture around psychology has changed so much over many years, because, you know back in the day, therapy and psychology 'was' like a hush-hush thing. It was a taboo, like if you are going for therapy, you not supposed to talk about it. I guess certain people would view you as weak or think that you are crazy or you are insane. But I think now, considering how we made so much progress and now we made progress where mental health has been taken seriously, and it has become something that it is okay to admit that you, what, things are hard and you do need help. So, you know, I think depending on the person and the community they are in and who they are surrounded with will depend where the stigma is attached. Now psychological help is a normal thing, especially with the people I am surrounded with; it [is] pretty normal for people to say that they do go for therapy.

However, Kruz acknowledged that public stigma about reaching out for psychological services still affects some students and recommended that they get the help they need but not disclose this information to anyone:

And confidentiality is a [key] thing. People don't have to feel afraid, because you can just choose to go for the help without telling anyone that you are getting psychological help.

Ari identified the type of parents or family she believed would stigmatise loved ones who sought psychological help:

I would say more headstrong, more set-in-stone, more traditional conservative parents and family members will stigmatise and might try to deter students from reaching out for psychological help.

Kruz's views strongly concurred with Ari's:

I think that it would be from parents, I hate to stereotype a generation, but I think it would be from the older generation mostly, because for them a lot of mental health issues are swept under the rug. They would just say, "Read a religious book or pray" to help the person. Mental health wasn't taken seriously back then. Perhaps also the new generation, because there are a lot of conservative people that exist in the younger generation.

Kruz continued:

... if you are raised in a culture where mental health is swept under a rug or not taken seriously, then it would be such a challenging thing for a person to reach out for help, because growing up in a community like that where people who probably do reach out for mental healthcare help maybe are looked down on and rumours are spread about them and you know the whispers you hear. So it would be difficult for a person who grew up with such people would reach out for psychological help.

The above view suggests that, rather than therapy being viewed as a platform to ponder one's own role in a scenario and what can be done differently to achieve better results, society typically views it as a fix for those who are flawed (Henriques, 2011). Similar, Mary highlighted a form of self-stigma in accessing psychological help:

... there always has been for a long time, centuries I would say, a belief that has been etched into people's minds that those who are mentally strong are able to face problems and solve them, but those who face problems and cannot solve them are mentally weak and they are the ones who need psychological help, and in that way there is that stigma. But it is a feeling that something is wrong with you if you are reaching out.

In reference to the above view, the student participants suggested that, in order to avoid the stigma, students should keep the use of their online psychological services offered by the university private from family and friends. Frida stated:

In one sense it [online counselling] can be done more privately. You can close your room door; your parents may think it is another lecturer or supervisor or someone around. They [parents] may think it is another online lecture and you can just hide the fact that you are getting the counselling help.

Although initially Kruz had indicated that there has been a gradual shift in public attitudes toward those who utilise psychological services, his views were in agreement with Frida's. He said:

I think for me personally I wouldn't necessarily tell my friends or family, because mental health is such a personal thing and I think that, I think, only someone who is qualified with mental health matters like a psychologist would

understand. But for some reason, if I wish to tell my family, it would be difficult because I would have to deal with whispers and rumours at events, you know, some criticism from people at home. Yeah, it would deter me but I would still go for the help and, at the end of the day, I know if I need the help, I am going to take the help that I need regardless of how people feel about it. Because, at the end of the day, I need to do whatever I need to do to be a stable and functioning and healthy human being.

Despite the public stigma, Kruz emphasised the positive impact that counselling might have on an individual:

If it means that I engage in activities that people are not necessarily approving of, then you know what, I will do it because I know I need the help. And it's not like I am doing something dangerous, illegal or unhealthy. I know I am accessing completely normal help and I would not be willing to let go of a lifeline to please other people.

4.4 RQ2: What difficulties do student counsellors, who work off campus because of COVID-19, encounter in providing psychological services?

Three subthemes were identified concerning the challenges that student counsellors face when providing off-campus psychological services: i) fully booked today, tomorrow, and next week, ii) workload capacity and home life, and iii) poor technological connectivity and no private spaces.

4.4.1 Fully booked today, tomorrow, and next week

University students were not the only population that faced challenges with university psychological services whilst they were based off campus due to COVID 19. Staff from Student Support Services who provided these off-campus psychological services also faced challenges, such as being fully booked due to large numbers of requests for their services; as a result, there were long waiting lists. This theme is divided into two accounts, one being given by the university counsellor and the other given by students.

4.4.1.1 Student Support Services Psychologist perspective

The staff representative began by discussing her experience as a psychologist from the UKZN College of Humanities Student Support Services when the COVID restrictions were first announced:

So, March 2020, well the end of March was when we began lockdown. So, what we noticed is there have been changes. Initially when our university closed, which was the 21st of March, somewhere around there, we brought our Easter recess a week earlier and I think at that point nobody quite gathered how long this was going to last. So, students went away, and we went on this lockdown. We had literally one month, that was very quiet in April ... we had a total of three students who made contact with us ... so our office was still open. We open throughout the year, except for the one week in December when the university officially closes. And so, students didn't know how to reach us. We also, at that point, didn't know which way we could communicate with our students as well. So, we had that lull, but in that one month, we did a lot of groundwork internally and to figure out how are we going to make this work. And that is when we got the telephone and the online [services].

Due to the university adjusting to the COVID-19 regulations, delays were inevitable; thus, this participant identified one specific challenge:

Remember that we had to wait for the university as well to provide the facilities, the Zoom licenses. I think we were up and running by the end of May, in terms of the resources. It was a slow start as, in comparatively with that year, with the same time frame as the previous years when we were in [face-to-face] contact.

The participant indicated that diaries were fully booked, which indicated that there were many students in need of the psychological services. There was a waiting list, as are not many counsellors employed by the university to attend to the requests of students when they 'dropped-in'.

Keep in mind these were new practices, so it took a while but we currently, about mid-year this year (2021), we reached our pre-COVID numbers, so we operate in very much the same way as in the numbers that we used have before we went into lockdown. In other words, diaries are fully booked and, in some instances, we had waiting lists ... and we noticed some changes. For example, we have

offices in Howard, Pietermaritzburg, and Edgewood campus and in [one] campus, we noted a significant increase in the number of students that were accessing our services from that particular campus.

In addition to this long-standing challenge of waiting lists, which existed prior to COVID-19 when students were on campus, as a result of the pandemic, students presented with more serious mental health issues:

We also noted that now, in the second year, that the nature [of] presentations have changed. We've got more students who report psychological distress. More students reporting suicidal ideation and a lot more clinical presentations as well. A lot more serious issues. Students now access our services at the same rate as they used to before lockdown (students now know how to contact the centre for help).

4.4.1.2 Students' perspectives on counsellor availability

According to the student participants, the university faced the challenge of having too few counsellors while catering for many students who needed free psychological services. As a result, students had to wait to access this service. Having reached out for psychological help herself, Mary shared her experience of utilising UKZN psychological services. She discussed her initial experience:

Well, my initial experiences with UKZN psychologists were such that I was studying for a different degree and I had a lot of problems when it came to family, as a result of problems concerned with how I perceived disease etcetera. So, I had a lot of anxiety and depression which I did not realise at that time.

As acknowledged by the staff member, Mary had also encountered the problem of too few university psychologists/counsellors to assist students, which in some cases can be fatal for the student:

First of all, booking a psychological appointment with the university psychologist, because there were so few of them ... there were only two of them available and, as a result, if I made a booking now, whether you are suicidal or not, you are getting a booking one month from now. You can only get to see them one month from now and so I had to go to her office, and I had explained, I couldn't get a booking [less than] one [month] from now and that was not

going to be sufficient for me because I was already depressed and, in some instances, yes, a feeling of the sense of death and wanting to die.

With much disappointment in her voice, she then went on to highlight the second problem, which was an unfulfilling experience she had with the university psychologist:

When she finally sat down and spoke to me, I hadn't realised that I had so many things that I had pushed down over the years. Emotional distress when it came to various things that had happened. And it all came pouring out and the way in which she had responded was quite clinical. And so that was a bad experience and I left. She told me then I should change my degree and then I left saying, "Okay I can do that, but I have no help emotionally for all these problems that happened". All I did was cry about it in her office, without any solutions to the problems that came up.

On the point of resource capacity, Kruz mentioned:

I think the biggest challenge for the university is providing resources for us while we are based off campus, because I mean, it will be difficult for them. The university can set up a mental health programme, yes, but how will that programme (already having few resources) be used being based off campus?

Likewise, Ari noted the disproportionate number of university counsellors there are relative to student numbers:

I think the challenge would be to get the limited number of university counsellors to assist say large numbers of students who need psychological help.

Similarly, Frida highlighted the same issue raised by Ari but went further to state the issue of the large volume of emails that the small number of university counsellors had to attend to:

There are very limited counsellors in each university and just imagine that there is [sic] two counsellors and possibly one that is still a student or an intern and you have thousands needing help. On campus itself [it] is a huge thing, but now having to deal with online, having to deal with thousands of emails and limited counsellors, it is more challenging.

In agreement with Ari, and Frida, Sire further stated:

I feel like there are limited campus counsellors; we were limited to see those people because I feel like there was two or three of them and many students. I feel like every time you need to see them, you had to book an appointment; it would be probably a month later to have access to them.

Mary concluded:

There are too few counsellors. The ratio of counsellors to students are not adequate enough and as a result, appointment bookings need to be made far in advance and this does not help students who are in distress immediately, and as a result, that is delayed, and that has been the problem that university has.

Mary also stated that some students might need more intense therapy, which the university might not be able to provide due to limited resources. Furthermore, university counsellors cannot refer students outside of the university as some do not have the financial means to access private services:

Also, the university psychologist would have trouble deciding the different circumstances that the students would be going through because, even though they are learning the same content, they are not learning under the same circumstances. There are some who live in wealthy homes, but have poor emotional support from those homes; there are others who live in poorer homes, but have the emotional support from their parents. And that is difficult to discern as a psychologist without having contact with that person, and so it would be difficult for them to advise correctly, because not everything is cut and dry when it comes to a person's emotional needs.

4.4.2 Workload capacity and home life

Employees around the world were affected by the rapid and unplanned requirement to work from home due to COVID-19, and university staff were no exception. According to Kooli (2022), household responsibilities were most demanding among employees who had the mammoth task of using the home environment as a workspace *and* home life space. The Student Support Services psychologist noted that her staff, too, felt the pressure of the COVID restrictions and the challenge of balancing work and home responsibilities:

Some staff members have children who are still at school and the bulk of our counsellors are also female. But again, I don't want to generalise and say that we all have the same number of chores or whatever responsibilities. But really, it was just about balancing those changes in the workplace and home. So, I think overall as a team, we managed to cope but our physical and mental fatigue has definitely set in and staff have reported that.

As a result of these challenges, she indicated that staff needed time off work:

I have had staff go on leave as well, because of being very exhausted with dealing not just with the presentations but the very nature of the work. But working remotely is really difficult and challenging.

The Student Support Services psychologist explained that their situation is especially challenging, as Humanities is the largest college:

In terms of our college specifically, we have, as you would have checked that, we are the largest college. We are twice the size of the next largest college but our staffing is almost the same.

She narrated that the workload increased such that she also worked at night:

When we started receiving those requests to return to campus, it was really very hectic and some of the staff did take strain. I remember I used to get up at four in the morning to catch up with emails and then get on with the day. And then after work and then finish at eleven in the night just to go through emails and we were not even able to go through all the emails for the day. So, in other words, you are available to consult during the day, but as that was happening, we were getting this influx of emails from students. It was really that that was catching up with us because, remember, we are working from home, so staff also have to balance home responsibilities.

4.4.3 Poor technological connectivity and no private spaces

Staff working from home during the COVID pandemic meant a surge in the use of digital technologies to get work done (De et al., 2020). The Student Support Services psychologist noted that, coupled with this, load-shedding in South Africa poses a challenge in rendering online psychological services to university students:

Students (or we) might get problems with connectivity. We've had load shedding which has impacted. We have had all of those which have impacted the quality [of services].

Opening up in therapy is already a hurdle to get over but doing that at home in the space of family members also poses a challenge for the one in need of therapy (Goldschmidt, 2021). Some students had difficulty locating a private space in their home to attend the virtual psychological services and the one providing the service could not fully engage when the student was unable to open up due to their environment. In light of the aforementioned unfortunate circumstances, and as mentioned by Mary, the Student Support Services psychologist noted that the students' backgrounds and social environment also needed to be considered by the counselling staff:

A lot of the students we have worked with are not coming from the traditional nuclear families, what we might think about when we think about families. They might not come from environments of homes that are necessarily well resourced. Sometimes kids don't even have a private space just to be able to have a consultation or session. Okay, so it has to be coming back to person-to-person contact, which is the gold standard.

The participant explained that mitigating the above situation might prove difficult:

For every student that makes contact with us, it's about trying to work out what is going to be the best form under the current circumstances to still make contact and reach our students. You might find, for some of my students, I might do a Zoom; for other students, I might do a telephonic. We have had students that have taken walks out at particular times. We have even adjusted and have had conversations after hours, so that we could be able to still be available, and then we have worked it into our own operations.

4.5 RQ3: How can students promote their mental health when they are based off campus due to COVID-19?

Two sub-themes were identified regarding the promotion of mental health whilst being based off campus due to COVID-19. These themes are: i) prioritising physical, mental, and social well-being, and ii) virtual connection: Start or join WhatsApp and Zoom support groups.

4.5.1 Prioritising physical, mental, and social well-being

Often, when wellness is mentioned, physical health is what comes to mind first (Gualdi-Russo & Zaccagni, 2021). Mary mentioned:

Well, when it comes to physical health, it is important to set a routine where there [are] certain healthy habits that you incorporate into the routine such that it has long-term good effects on your body.

Similarly, Kirthi asserted:

They have to remember to eat healthily.

Frida also placed emphasis on the importance of students taking care of their physical health:

They can eat, sleep and exercise. That's the best thing they can do.

During COVID-19, as mentioned by Aristovnik et al. (2020), many people found comfort in being around loved ones. However, Mary suggested that time away from loved ones, even in a different space in the house, is beneficial for students:

There is a saying that familiarity breeds contempt [and it] is more relevant than ever. So there should be a designated space that you can go to where you can take a break from engaging with people that you normally engage with at home, because there are times when things can become stressful because you are much more familiar with the habits. So taking a five-minute break or taking a walk or moving to the next room for the next five minutes when you are alone or quiet is very beneficial in that way and it helps your mental health greatly.

Taking breaks is also important as this gives an individual time to reset and plan accordingly (Vidra, 2020). Mary shared the same sentiment:

Set a routine and schedule breaks in, whether they are five minutes each, but having breaks needs to be scheduled and routines need to be set so that they are not doing everything at once.

Frida also strongly emphasised:

And also, they can take breaks ... Don't put pressure on yourself.

4.5.2 Virtual connection: Start or join WhatsApp and Zoom support groups

Kruz elaborated on how a culture of health and wellness can be promoted by students whilst being based off campus and he had the suggestion that students could ‘trend’ their COVID-19 health protocols on social media:

I think that students can do that by just following the guidelines, social distancing, wearing masks, getting vaccinated even and I think the culture of doing that ... I think stuff like, I know a lot of people after they had their vaccination, they were posting that they got vaccinated. I think it's stuff like that they will make it something like a trend, which will in turn make other people will do it and you know, there is this culture of prevention that is created and promoting health and wellness. Also talking about it and being, like, so I social distanced today or I went to this place and I social distanced or I got vaccinated, you know. Being open about you following the guidelines and how you benefitted, you will create a culture of health and wellness and prevention.

Apart from focusing solely on the physical health of students, John suggested that mental health should also be prioritised, and students should support each other in this way by establishing support groups:

First of all, we need to be honest and start a culture of honesty that none of us have it all together and that way we can see that we all have common problems. Having a WhatsApp group with friends and making a support group. And there is also Zoom, which is a free platform you can also use.

Ari also spoke passionately about the usefulness of online support groups:

I would say get into groups; start a conversation about what's going on. Everyone would want to better themselves, talk about their problems. Have like a good support group, an online support group.

Sire had a similar suggestion to John and Ari; however, he suggested that people can have the freedom not to expose or reveal their identities but use pseudonyms in these virtual support groups:

Let us talk about our problems and formulate groups whereby everyone can be free. Have an anonymous group chat whereby no one uses their real names, no one's information, and speak about their problems. In that way, they would

know that someone can hear them, someone is listening, someone can help them, and there [is no-]one who will judge you. Because the thing we are afraid of as human beings is being judged. If I am being judged, then I am not going to go about trying to fix myself. If I am judged, I am going to feel bad and stop doing this whole thing. Again, there should be a Zoom support group where everyone logs in with their pseudonyms and start speaking and sharing.

4.6 RQ4: How can student counsellors promote student mental health when they are based off campus due to COVID-19?

Two subthemes were identified regarding this research question; these are: i) raising awareness of online psychological services, and ii) assistance with time management and coping mechanisms.

4.6.1 Raising awareness of online psychological services

On-campus psychological services offered by UKZN were not widely promoted by the university, and students were only made aware of such services during their orientation at the beginning of the first year of their undergraduate degree, as Kruz stated from his personal experience:

I don't recall any services offered via email. The only time I think or the only memory I have of university discussing psychological services offered was in first year in orientation, and that's the only memory I have of psychological services being promoted.

Kruz, seeing the need for more awareness of psychological services, suggested that the emails sent by the university should be sent to the focus inbox which is an inbox where the most important email messages are sent on while “other” is where email messages not of high importance are sent to:

I really, really think that psychological services needed to be highlighted a bit more. I think that on the emails it should be set on 'focus' rather than on 'other', because it is something they will see as important. The university should emphasise that psychological services are free, so people don't have to worry about the costs of paying. Because, I mean, we are students, and we don't earn a lot of money so I think the university should promote it more and emphasise that it is a lifeline for anybody and that it is completely anonymous. I think that

students are afraid of it getting out to people, so you know, and yeah, like emphasise the anonymity, the free aspect of it, and advertise it a lot more.

4.6.2 Assistance with time management and coping mechanisms

According to Mary, psychologists also play a pivotal role in assisting students with managing their time:

One of the functions of psychologists, as I understand it, is to help with time management and to also to seek out underlying issues that may be contributing to poor time management and inability to achieve goals.

Kruz felt strongly about how students should utilise their autonomy and be bold enough to reach out to campus for coping mechanisms and for their mental health needs:

I think that students will need help with coming up with a balance of how to maintain their campus life and their personal life. I think with also dealing with a sense of isolation because you not with your friends as much anymore and you sort of do feel alone because you are with [just] yourself 24/7. Being in your head a lot can become quite detrimental. I think also as well dealing with the anxiety of COVID and how certain people have lost family members and friends and maybe just being afraid of catching the virus and your friends and family catching it as well, dealing with that anxiety as well. I also think maybe students who may have mental health issues would especially need it, because I feel with this pandemic and us being at home and isolated perhaps from important support structures. They [students] would need to reach out to campus to find healthy coping mechanisms for their mental health from the comfort of their homes, since maybe they can't necessarily go to the psychologist because of lockdown restrictions.

Mary elaborated on how psychological services can be helpful:

Mental health is about the way a person feels or the way a person is able to achieve their goals. The way they feel about their bodies, the way they interact with others, the way they perceive new experiences, all are related to mental health and to be in a state of mental health would be to be in a place where you are acting appropriately to different circumstances or any problems that may arise.

She continued:

The reason why we [students] reach out to a psychologist is so that you can implement the techniques that they teach you. They find out the root cause of your problem and your struggle emotionally and thereafter you have to implement the techniques or activities that they tell [you]. And if you do not have the support of your family and friends, then that can be very difficult because that may make you feel like you are taking a shot in the dark, and you need people around you who believe in you in order for this to work.

4.7 Conclusion

This chapter presented the key findings from the photo elicitation interviews conducted with the student participants from UKZN as well as key findings from the semi-structured interview conducted with the psychologist from the UKZN College of Humanities Student Support Services. There were four main themes and twelve subthemes that were identified. The themes covered challenges that students, who are off campus due to COVID-19, experience with accessing psychological services. The findings demonstrate an intersection of household responsibilities, isolation and studying. The participants also indicated that students tend to neglect self-care in fear of being perceived as self-indulgent, thus highlighting the impact that family and friends have on an individual's decision to reach out for psychological services. The challenges of providing psychological services to students who are off campus were also delineated from the perspective of a staff representative. The chapter concludes with some of the activities that students can engage in to promote their mental health, as perceived by the participants.

Chapter 5

Discussion and conclusion

5.1 Introduction

The purpose of this chapter is to discuss the findings from the preceding chapter, which responds to the study's four research questions. The themes reported in Chapter 4 will also be discussed using the Theory of Planned Behaviour (TPB). The discussion focuses on the challenges students at UKZN, who are off campus due to COVID-19, experience with accessing psychological services. The discussion then addresses the challenges that student counsellors, who are off campus due to COVID-19, experience in offering psychological services. How students can promote their mental health when they are based off campus due to COVID-19 is elaborated. The ways in which student counsellors can promote the mental health of students, who are based off campus due to COVID-19, are also discussed.

5.1 Challenges that students of UKZN, who are off campus due to COVID-19, experience with accessing psychological services

With online teaching and learning emerging as methods for the continuation of university studies due to the COVID-19 pandemic, students have been plagued with challenges. With the introduction of remote learning as a consequence of COVID-19, university students globally have faced many difficulties. In this light, university students who had to move from living in a campus residence back to their family home, as well as those students who already lived with their families whilst studying, struggled to achieve a balance between online learning and completing house chores (Gumede & Badriparsad, 2022). This is consistent with the responses from the participants of this study, who also found it a challenge to engage in online learning due to chore allocations amidst studying; hence, to find a balance between both seemed almost unattainable.

5.2.1 Unsuitable home environments and isolation

Wallengren-Lynch et al. (2022) conducted a study that examined 32 countries with 14% of the 166 participants being full-time students. These authors found that one of the major challenges of remote learning during COVID was that many university students studying at home lacked resources such as study desks and were forced to use the kitchen table and their beds as a study space; on the other hand, at university, this resource was taken for granted. Similarly, in South Africa, small, uncomfortable, and crowded living spaces are a reality for many university

students and, as a result, they were faced with the challenge of finding a conducive place to study away from distractions and noisy children (Fouche & Andrews, 2021). With online teaching, this reality this was under-estimated.

Prior to the COVID-19 pandemic, students were in the university environment, with resources such as study desks and ample space for learning, with study cubicles in libraries that had noise under control, where students could focus on studying (Toubasi et al., 2022). Students also did not have to be concerned with house chores on campus, as this environment solely promoted academics. Hence, university students ran the risk of increased stress and exhaustion by trying to balance the responsibilities that came with the living at home and studying online (Salmela-Aro et al., 2022). The participants in this study also struggled with the issue of balancing their academic studies with household chores, which led to increased levels of stress.

Apart from the challenges of a non-conducive learning environment that led to student stress and exhaustion, another challenge university students faced was social isolation; this was a measure put in place to reduce the transmission of COVID-19; however, it had a negative effect on university students (Knight et al., 2021), amongst other people. Humans are social beings, thus have an innate need for interaction. Without that interaction, university students were found having increased levels of stress and anxiety. This was largely due to the lack of in-person interaction with lecturers and peers from university (Filho et al., 2021).

Without interaction with lecturers, university students felt a sense of isolation from the content of their modules, which escalated their levels of stress; in contrast, in-person interaction allows for more engagement and better understanding (Filho et al., 2021). The participants in the study also shared the same sentiment that isolation from university lecturers can weigh down a student and isolation from friends on campus can lead to stress. To deal with the stress stemming from isolation and exhaustion which results from the inability to balance household chores with online studying, the university put in place psychological services that could be accessed online. Participants from the present study agreed that accessing these services could minimise isolation and burnout. However, many students were unaware of these services.

Because of the COVID-19 pandemic merging together family life, study life, and home life, privacy was highly compromised (Kombe & Mtonga, 2021). The consequence of this was that it easier for family members to overhear the student accessing the off-campus psychological

service telephonically than if they were on campus in the office of the counsellor (Kombe & Mtonga, 2021). The participants in the study, however, held the opposite view, as they saw the home space as a potential spot for privately accessing the off-campus psychological services, which could be done by closing their room door to speak to the university counsellor.

5.2.2 Lack of awareness about online psychological services

The academic programme provided by the university was not the only component of student life that was shifted online during COVID-19, as counselling services offered by the university also made a crossover to the virtual platform (Savarese et al., 2020). The literature confirms that students struggled with their mental health during the COVID-19 pandemic and were aware of the online counselling services that universities provided during this period (Xiong et al., 2020; Dimri et al., 2021; Situmorang, 2021). Online psychological services were seen as beneficial through significantly reducing levels of anxiety and perceived stress whilst increasing students' confidence in setting goals for their future and the tasks that needed to be put in place in order to achieve them (Celia et al., 2022).

Prior to the COVID-19 pandemic, some students in the present study also faced the challenge of not knowing about the psychological services offered to them by the university. This also applied for the Pietermaritzburg campus of UKZN, where a study done on the use of psychological services on campus by students found that many students were unaware of such services existing on campus (Dlamini, 2019). However, seven participants in this study stated that there were mental health challenges faced by university students during the COVID-19 pandemic, but they were not aware of the psychological services being offered off campus by UKZN to assist these students in need. Not attending to mental health can have negative effects for students, as what may start out to be a psychological distress could get progressively worse and this will impact on the academic performance social relations and their overall daily functioning of the student (Mahdy, 2020).

5.2.3 Misinformation about psychological help

According to Ecker et al. (2022), misinformation is any information that turns out to be false, while disinformation is false information which is provided deliberately with an intention to cause damage and lead people in the wrong direction (Ecker et al., 2022). Misinformation can lead to people making poor judgements about things, because essentially, the type of information that is passed on to a person influences the way they think, feel, and behave (Ecker

et al., 2022). In this case, misinformation about psychological help can mislead people into thinking that reaching out for such help is wrong.

The Theory of Planned Behaviour (TPB) posits that an individual's attitude towards a particular behaviour indicates their intention to engage in that behaviour (Ajzen, 1991). Attitudes within TPB are defined as the degree to which an individual evaluates a certain behaviour as being either favourable or unfavourable (Renzi & Klobas, 2008). In this study, whether or not to access the psychological service being offered off campus due to COVID-19 depended on the favourable or unfavourable attitude the student may have held about the use of psychological services.

Globally, attitudes have a big influence on intentions to seek out psychological services (Lawrence, 2009). In South Africa, attitudes towards reaching out for psychological service are largely informed by culture. The willingness to seek psychological help is not supported in many cultures where mental illness is viewed as a state of 'sin'; therefore, reaching out for psychological help is unthinkable. Hence, cultural beliefs are reportedly one of the major barriers to seeking psychological services (Seyfi, 2013). However, in the current study, the attitude towards reaching out for psychological services was positive, and culture did not play a role in stopping the students from utilising off-campus psychological help.

Utilising psychological services was seen by the participants as a means to "get one moving", "prevent one from losing their mind", "a brave thing to do", and a form of self-care. Additionally, participants viewed the use of online university psychological services as convenient, because no travel cost was incurred by the student, the identity of the student was protected, and it served as a medium through which students could feel less isolated. Students from the University of Malaysia (Abu Shahim et al., 2021) and students from Thailand (Yurayat & Seechaliao, 2022) also stated that counselling services offered online by the university were convenient, as cost of travel was minimised, a sense of anonymity was assured, and the service offered by the university was free. The findings of this study concurred with the findings of Abu Shahim et al. (2021) and Yurayat and Seechaliao (2022). Attitudes globally and within South Africa held the same positive attitude towards reaching out for online university psychological services.

As suggested above, attitudes influence behaviour; however, false beliefs which influence a person's attitude may also drive their behaviour. A false belief can easily be formed when someone is provided false information (Ecker et al., 2022). Beliefs are also informed by cognitive, social, and affective factors that either endorse or inform the person's beliefs. Cognitively, if a person is unable to think analytically or critically when a piece of information is shared, this makes it easy for the person to accept misinformation at face value (Ecker et al., 2022). Hence, if a person is unable to think analytically and hears anything negative about the use of psychological services, they are most likely to believe it.

Social cues also inform what a person believes and, if the sender of misinformation is known, powerful and similar to the receiver, then it is likely that the receiver will believe the sender of the misinformation (Ecker et al., 2022). In a more socio-affective sense, people tend to believe their ingroup members more than the outgroup members and, if the ingroup members hold a negative attitude towards seeking psychological services, then the person will most likely follow the ingroup belief (Ecker et al., 2022). The way in which information is relayed also plays a role in misinformation, as if any piece of information is presented to instil fear of harm, it can successfully change a person's attitudes, intentions, and behaviours (Ecker et al., 2022). In this sense, if psychological services are put across as harmful, then potential consumers of such services will hold a negative attitude and have no intention towards seeking such help.

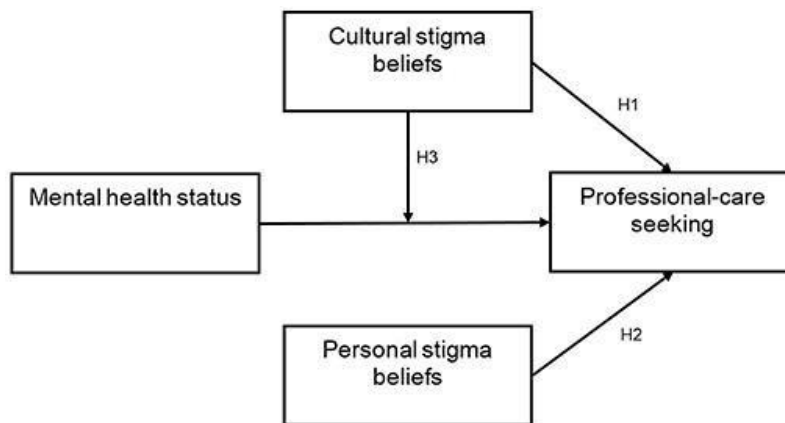
According to Renzi and Klobas (2008), the social pressures to either perform a behaviour or not are known as subjective norms. Subjective norms, like attitudes, also inform the intention of whether or not an individual will engage in a particular behaviour (Ajzen, 1991). Stigma has also been recognised as one of the common barriers to seeking psychological services. Bracke et al.'s (2019) conceptual model (see Figure 1) on personal and cultural stigma beliefs and seeking professional care states three hypotheses: H1: Individuals who adhere to stigmatising beliefs are less likely to seek help from professionals for mental health problems than are those who do not adhere to such beliefs; H2: Citizens of countries with a strongly stigmatising culture are less likely to utilise professional mental healthcare services; and H3: the effect of need on the utilisation of mental health services depends on the extent of societal stigma.

The findings of this present study are in line with the first hypothesis of the model that students who follow stigmatising beliefs about using psychological services offered by the university are less likely to reach out for help. The findings of the study are also in line with the second

hypothesis, as most of the students who participated in the present study are citizens of South Africa, where cultural stigma against using psychological services does exist; hence, students are less likely to reach out for help from the university’s psychological services. The third hypothesis also holds true for the present study, where it was found that, although there is a gradual positive shift in society about using mental health services, there still very strongly coexists the long-standing negative societal stigma against utilising these services. The findings of the present study suggest that it would be more acceptable for students to reach out in secret for help, without informing family or friends, due to the stigma they could potentially face.

Figure 1

Personal and cultural stigma beliefs influencing professional-care seeking



Note. This model was produced in 2019 to show how stigma affects the utilization of mental health care services. From “Dominant Cultural and Personal Stigma Beliefs and the Utilization of Mental Health Services: A Cross-National Comparison,” by P. Bracke, K. Delaruelle and M. Verhaeghe, 2019, *Frontiers in Sociology*,4(40), p. 3. Copyright 2019.

The findings by Lawrence (2009) highlight that many students feel guilty and ashamed if they are struggling psychologically. Hence, they do not reach out to get psychological help from the university for fear of being negatively stigmatised. It is apparent that, if key people (e.g. the friends and family of the individual in need of psychological help) react negatively towards the individual, then the individual will be discouraged from seeking out the help, as opinions from loved ones are important to the individual (Thoits, 2011). When family and friends view psychological help negatively, friends may reject that individual and family may threaten to disown them (Thoits, 2011). The participants stated that there can be stigma that can be

attached to the use of online psychological services, which can be perpetuated by traditional, conservative parents, family members or friends.

According to Corrigan and Watson (2002), the impact of stigma can be two-fold. The first aspect involves being stigmatised by the public, where the general population has a negative reaction to those who have mental illness (e.g. not associating with those who have mental illness because they can be seen as dangerous). The second involves being stigmatised by the self, where people who have mental illness turn against themselves, hating themselves and believing that they are dangerous. This self-stigma may prevent the individual from reaching out for psychological help. The stigma that they hold may include the belief that, if they reach out for help, then they are weak, emotionally unstable, and intellectually incompetent (Vidourek et al., 2014).

5.3 Challenges that student counsellors, who are off campus due to COVID-19, experience in offering psychological services

From the onset of the COVID-19 pandemic, the situation of students who already suffered with existing mental illness was exacerbated (Lee et al., 2021). According to the International Accreditation of Counselling Services (IACS, 2019), there was a shortage of staff compared to the number of students. These low numbers of staff had a great impact on students, as large numbers of students were put on waiting lists, and this may have resulted in students seeking help outside of university counselling services (IACS, 2019).

5.3.1 Staff shortage and high workload

The findings of the present study show that the staff representative from Student Support Services at UKZN stated that they had been fully booked due to large volumes of requests for their services and, as a result, there was a long waiting list with the risk that students' existing challenges escalate. The IACS (2019) goes a step further and explains that these students with pre-existing mental health challenges need the counsellor to have time to adequately manage their case; however, due to the high volume of requests for treatment, these counsellors cannot spend the extra time on one student only. The views of the student participants of the present study also concurred with the Student Support Services psychologist at UKZN: the university faced the challenge of having few counsellors while catering for many students who were in need of psychological services but who had to wait a month to access this service.

University counsellors have suffered tremendous burnout because of being understaffed and having to deal with a large volume of counselling session requests from students to the point of them not taking breaks in the day. Lee et al. (2021) states that university counsellors, just like university students, had to work from home and it became increasingly difficult to balance both home and family responsibilities, deal with technology constraints, as well as manage the challenge of trying to schedule space for students. Similarly, the study found that, according to the Student Support Services psychologist/manager, the staff who worked in conjunction with her to render this psychological service to students felt the pressure of the COVID restrictions and the challenge of balancing work and home responsibilities.

An increase in the workload of the university counsellors led to them having to take leave or further run the risk of burnout. Even before COVID-19, many universities were understaffed and if these few staff were to take leave, then waiting lists would grow longer and the remaining low volume of staff would be put under even greater pressure to deliver these psychological services to as many students as possible (Lee et al., 2021). This also holds true for the staff member from Student Support Services at UKZN, who stated that staff taking leave during the pandemic became a challenge for the remaining staff who had to take over the large volume of student requests for psychological services, getting to a point where the staff from support services had to work late at night or early in the morning to manage the workload. A study by Kovacs and Largade (2022) found that an increase in workload does not necessarily affect the quality of healthcare rendered by the counsellor; however, burnout is still inevitable if the workload becomes unmanageable, and this will negatively impact the quality of service rendered by the counsellor (Brand, 2019).

According to Brand (2019), burnout for mental healthcare professionals becomes inevitable when they are under pressure to deliver their services to a large population, especially if there are only a few of them compared to a large client population in need of the service (Brand, 2019). It was found that this can lead to a counsellor feeling demotivated and not empathetic; thus, they may struggle to deliver quality care to their clients. It then becomes imperative that counsellors identify the burnout they are facing and receive help as quickly as possible, so that they may deliver services effectively to their clients. Work-related stress is a common factor contributing to burnout in counsellors, and during the COVID 19 pandemic, it was found in the present study that university members from support services were said to be under stress due to the demands of providing the service and being off campus. In addition, trying to render

their services from home was difficult as there was no boundary between work life and home life.

5.3.2 Challenges in the students' environment and psychological services

One of the main difficulties, globally, that students encountered with remote learning during the COVID-19 pandemic was establishing a stable internet connectivity (Hermano & Denamarca, 2022). Structural challenges experienced by South African university students having to study from home during COVID-19 were power cuts and poor internet connection (Fouché & Andrews, 2021). The participants in this study found poor internet connectivity as being their greatest challenge in their online learning journey. In addition, although a substantial amount of data was issued to students monthly, half the data could only be used between midnight and 5am (Fouché & Andrews, 2021). As mentioned by the Student Support Services psychologist/manager, students faced the issue of poor internet connectivity when accessing the online psychological services. She added that even staff working from home during the COVID-19 pandemic suffered with poor internet connectivity, along with the power cuts, which, in South Africa, pose a challenge in rendering online psychological services to university students. Power cuts also negatively impacted students whilst being on online lectures and doing assessments, while the batteries of digital devices were at risk of going flat due to long periods of power cuts (Hermano & Denamarca, 2022).

The home environment also posed a challenge in terms of the lack of privacy, where students found it difficult to effectively participate in their online lectures due to loud music being played in the home and children running around playing during the student's online lecture (Kombe & Mtonga, 2021). Apart from the environmental challenges in the home, as mentioned earlier, a global study done on 32 countries was conducted by Wallengren et al. (2021) on working and learning from home during COVID-19 and found that 14% of the 166 participants who were full-time students struggled to locate a space in the home where they could study privately. This is also in line with the experience that the staff from the support services at UKZN faced in rendering psychological services, where students found it difficult to consult with them because these telephonic and Zoom communications were happening in the home of the students' families. It was also found that students had to take walks outside of their homes in order to consult with staff from the Student Support Services.

5.4 Ways in which students can promote their mental health when they are based off campus due to COVID-19

Due to COVID-19 restrictions, gyms and parks were closed (Kaur et al., 2020). By remaining within the confines of the home, students could not access these facilities to exercise, although home workouts became more widely used. However, the participants felt that exercising outside was the best way to maintain physical health.

5.4.1 Being physically active

According to Ai et al. (2021), the act of engaging in physical activity can be a problem-focused, active coping mechanism that is used to lessen the stress brought about by the impact of the pandemic. Social isolation, remote learning, and academic-related stress, such as deadlines for assignment and examinations written online, were all found to have led to elevated depression and anxiety (Coakley et al., 2021). As gyms were closed and people had to resort to exercising in their homes, which went on to include weightlifting, yoga, and dancing (Constandt et al., 2020). The student participants in the study stated that being physically active during the pandemic was, in a way, good for their mental health as this served as an outlet through which students could let out stress and frustration. An addition, the Department of Psychiatry (2021) at Michigan University stated that physical exercise during the COVID-19 pandemic was found to significantly reduce symptoms of both depression and anxiety. Furthermore, Ai et al. (2021) stated a pivotal point that, in conjunction with physical activity during the COVID-19 pandemic, it was important that individuals also had a healthy diet, because inevitably what one eats affects how one feels. This also held true for the participants in the study who stressed the importance of eating healthy foods during the COVID-19 pandemic.

5.4.2 Self-reflection and online interaction

Taking a break to self-reflect during a global crisis such as the COVID-19 pandemic was seen as being a way of helping individuals thrive (or at least cope) in their 'new normal'. According to Thompson (2020), to self-reflect means having an open and honest examination of the self, looking inward, with the goal of learning more about one's feelings, emotions, strengths, and limitations. Due the damage caused by the pandemic, where lives were lost, it was easy to get caught up in the associated negativity; however, self-reflection can also foster mindfulness, such as the gratitude for one's good health (Rahe et al., 2022). This is consistent with the findings of the study where breaks were seen as a way for students to sit back, relieve the pressure, and plan more effectively.

The COVID-19 restrictions prohibited individuals to gather in a room and speak about what they were feeling; hence, the closest thing to having that collective support during the COVID-19 pandemic was participating in online support groups (Williams et al., 2020). Online support groups served as a reminder during the pandemic that what one may be struggling with was most likely what everyone else was commonly battling with, such as the issue of the uncertainty of the future (Williams et al., 2020). In a study by Hechanova et al. (2021), it was found that utilisation of online support groups showed significant improvements in psychological well-being (Hechanova et al., 2021). In the same way, participants of this study suggested that, in order for students to promote their mental health while based off campus due to COVID-19, they needed to start support groups, either on the WhatsApp platform or the Zoom communications platform. Students added that this form of online support would assist them in speaking and opening up about how they were feeling, without the fear of being judged, as everyone in the support group was in it for help.

At the core of their existence, support groups aim to empower people by sharing their lived experience with mental illness and what healthy strategies they have used to cope (Wynn, 2022). The advantages of support groups are that they offer coping skills and practical knowledge from those who are living with mental illness; not only the members, but often also the leader, have had a lived experience of dealing effectively with a mental illness (Wynn, 2022). Members also feel a sense of affiliation, thus isolation is reduced. There is also a downside to support groups, however, such as feeling intimidated about describing a personal experience, especially those with anxiety disorders (Keelan, 2022). Also, some groups may measure progress and, if one of the members is not making adequate progress, then this may cause undue stress (Keelan, 2022).

5.5 Ways in which student counsellors can promote the mental health of students who are based off campus due to COVID-19

The participants in the present study felt that by connecting with university counselling services, students would be able to seek out professional help that would assist by giving them coping strategies to deal with academic and personal stressors. They believed that university students should not be afraid and should reach out for coping mechanisms for their mental health, as this is the only way that the university will know what to cater for in terms of the students' mental needs during the COVID-19 pandemic.

5.5.1 Increased awareness of online psychological services

According to the current study, eight out of nine participants acknowledged that they were aware of the on-campus psychological services being offered at UKZN. But seven out of nine participants said that they were currently not aware of the psychological services being offered off campus by UKZN. This did not come up as a reason as to why students did not access off-campus psychological services. The literature has shown that lack of awareness of existing campus mental health services prevent graduate students from accessing this form of help to aid their mental health (Daigle et al., 2019). As suggested by participants of the present study, student services should raise awareness about the services that they offer to university students, as the participants were only made briefly aware of these in the first year of undergraduate studies and in the subsequent years, there was no mention of such services.

The issue of student counsellors not maintaining students' confidentiality also impacts the way in which psychological services are marketed at the university. Ocansey (2018) noted the issue of confidentiality as one of the reasons why undergraduate students from three southern-based Ghanaian public universities do not reach out for counselling services on campus; this was because counsellors were viewed as unable to maintain the confidentiality of the students to whom they offered their services. Ramdass et al. (2020) also reported that students had raised concerns about issues relating to self-disclosure, the difficulty in accessing counselling services, and mistrust of counsellors, which all prevented these students from accessing counselling services provided by the University of Trinidad and Tobago. The participants of the present study stressed that, in order for student counsellors to promote the services they offer, they should highlight their commitment to maintaining the anonymity of the student; this, in turn, is said to gain the trust of the student to reach out to use the university psychological services.

5.5.2 Time management and coping mechanisms

During the COVID-19 pandemic challenges, time management skills by university students may have become more apparent as online teaching and learning resulted in students experiencing blurred social, academic, and personal routines. Time management is essential to academic success; university counselling services are called upon to address the challenge of the mismanagement of time by giving a virtual talk to students on how to effectively structure their academic timetables, which will also allow time for social and personal routines to be incorporated (van Staden & Naidoo, 2022). The participants in the present study also shared in

this stance, that university psychologists/counsellors should be active in helping students structure their time effectively. The participants believed that this is one of the roles of a university counsellor/psychologist.

Universities around the world provide psychological services to students in order for them to acquire resources that will help them meet the demands of higher education, whilst helping students develop tools that will assist them to cope with the stressors that contribute to mental health challenges (Aldiabat et al., 2014). There are many stressors that students face that have been brought about by the COVID-19 pandemic; for example, uncertainty about the future (van Staden & Naidoo, 2022), loneliness (Department of Psychiatry, 2021), and the inability to manage home chores whilst studying (Gumede & Badriparsad, 2022).

5.5 Limitations of the study

The major limitation of the study concerns the size and lack of representativeness of the sample, which impacts on the wider application of the findings. The sample only consisted of nine student participants from the School of Applied Human Sciences, leaving out the other schools and colleges of UKZN, as well as one staff member from the support services from the College of Humanities at UKZN. Other staff members from other colleges at UKZN were not part of the study, which would have offered more diverse perspectives and experiences.

This study was conducted with students who had done psychology as one of the majors for their degree or as an elective module; therefore, it would have been more inclusive (and perhaps informative) to have students who had not done psychology as a major or elective module. This would have helped to understand a wider range of students' perspectives on accessing off-campus psychological services and the challenges they believe the university faces in providing these psychological services.

5.6 Recommendations

- Further studies on the difference in the experience of accessing on-campus psychological service versus off-campus psychological services would shed more light on the current findings.
- Multiple staff and student views would strengthen the findings of the present study.

5.7 Conclusion

Challenges to accessing on-campus psychological services internationally and in South Africa have been studied. This research study sought to explore the challenges faced by students at the University of KwaZulu-Natal in accessing psychological services when they are based off campus. Challenges which students at UKZN, who are off campus due to COVID-19, experienced with accessing psychological services and the challenges that UKZN student counsellors experienced in offering online psychological services were discussed. In addition, the study explored ways in which students could promote their mental health when they were off campus due to COVID-19, as well as ways in which student counsellors could promote the students' mental health when they were based off campus due to COVID-19.

The findings show that students and staff members not only shared the common problems of power cuts and poor internet connectivity, but also struggled with balancing work, study, and home life. Exhaustion and a sense of feeling overwhelmed were also found to be a reality for university students, which stemmed from the intersectionality of household responsibilities, isolation, and studying. For the staff member of Student Support Services, burnout stemmed from staff shortages and high workload. To promote student mental health during the pandemic, the participants emphasised the importance of physical exercise, healthy eating, self-reflection, and online interaction. However, in terms of getting help outside themselves, they preferred that student counsellors should raise more awareness of the university's online psychological services and assist them with managing their time and establishing effective coping mechanisms in the 'new normal' living conditions brought about by the pandemic.

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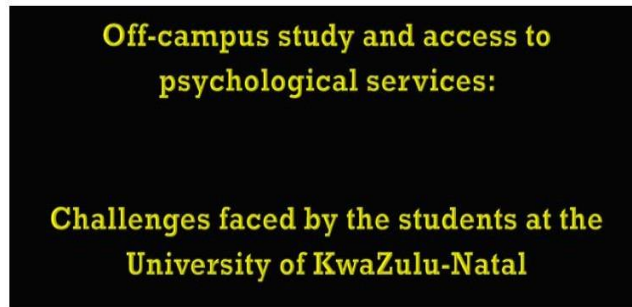
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Appendix A: Pamphlet

Appendix A:

Pamphlet



Let's talk...

- What are some of the challenges that students who are off-campus experience with accessing psychological services?

Hi

My name is Shaneece Chanderpaul. I am completing my Master's degree in Psychology (Research) at the University of KwaZulu-Natal (PMB). My student number is 216052293.

As part of my studies, I am obliged to complete a dissertation. My research focuses on students' mental health care during lockdown regulations.

I wish to interview students regarding this topic. Participants will be interviewed individually for approximately 30 minutes. The interviews will be conducted once and will use pictures that I will email to you before the interview.

Who can participate?

UKZN Students: 18 years+

All genders from 1st year to Masters

Students registered in:

- **Criminology and Forensic Studies**
- **the Centre for Communication Media and Society (CCMS)**
- **Psychology**
- **Social Work**

Your participation in this study will contribute significantly to my professional development and perhaps to yours as well. You can email me: 216052293@stu.ukzn.ac.za or WhatsApp me: **082 805 5252**



Appendix B: Information sheet

Information Sheet

Good day

My name is Shaneece Chanderpaul from the University of KwaZulu-Natal Pietermaritzburg campus (Department of Humanities). I am a student in the Discipline of Psychology. I am completing a Master of Social Science degree in Research Psychology. In partial fulfilment of this degree, I am required to conduct a research study. The topic of my study is: Off-campus study and access to psychological services: Challenges faced by students at the University of KwaZulu-Natal.

The objectives are:

1. To establish the challenges that students of UKZN who are off campus experience with accessing psychological services.
2. To explore ways in which students of UKZN can promote their mental health when they are based off campus

You are invited to participate in a study in this study.

Your participation

Your participation will be requested in one activity:

1. Individual interviews that will be conducted via the Zoom communications platform.
The interviews will be about 30 minutes.

Please note:

- Participation in this research is voluntary and participants may withdraw their participation at any point during the interview.
- In the event of refusal/withdrawal of participation, the participants will not incur any penalty.
- The individual Zoom interviews will be recorded so that they can later be transcribed and analysed.

- In order to maintain confidentiality, no third-party access will be given to the details of the student participants.
- The data collected for this study will be encrypted and the recordings will be in a password-protected file on the researcher's cell phone.
- Additionally, during the transcribing process, participants will only be referred to by their given number or pseudonym to further maintain confidentiality.

This study has been ethically reviewed and approved by the UKZN Humanities and Social Sciences Research Ethics Committee. You can contact me on my cell phone at (082 805 5252) or via email (216052993@stu.ukzn.ac.za).

You may also contact the research supervisor, Ms. Sindiswa Shezi, on shezis1@ukzn.ac.za. Alternatively, her telephone number is 033 260 6180. The UKZN Humanities & Social Sciences Research Ethics Committee details are as follows:

Humanities & Social Sciences Research Ethics Administration
Research Office, Westville Campus
Govan Mbeki Building
Private Bag X 54001
Durban
4000
KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557- Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

Appendix C: Informed consent

Informed consent

I _____
have been informed about the study titled *Off-campus study and access to psychological services: Challenges face by students at the University of KwaZulu-Natal*. I was informed by Ms Shaneece Chanderpaul (216052293).

Signature of Participant

Date

- I understand the purpose and procedures of the study.
- I have been given an opportunity to ask questions about the study and have had answers to my satisfaction.
- I declare that my participation in this study is entirely voluntary and that I may withdraw at any time without affecting any of the benefits that I usually am entitled to.
- In addition to the above, I agree to the audio-recording of my Zoom interview for the purpose of data capture. I am aware that no personal information or recording concerning me will be released in any form. I understand these recordings will be kept in security on the researcher's password-protected cell phone and will be destroyed on the instruction of the supervisor once the data is captured.
- I consent for my Zoom interview to be audio-recorded

Yes

No

Signature of Participant

Date

- If I have any further questions/concerns or queries related to the study I understand that I may contact the researcher at 216052293@stu.ukzn.ac.za.
- If I, _____ have any questions or concerns about my rights as a study participant or if I am concerned about an aspect of the study or the researchers, then I may contact the research supervisor Ms. Sindiswa Shezi on shezis1@ukzn.ac.za, alternatively on her telephone number 033 260 6180 or the UKZN Humanities & Social Sciences Research Ethics Committee.

Signature of Participant

Date

Humanities & Social Sciences Research Ethics Administration:

Research Office, Westville Campus

Govan Mbeki Building

Private Bag X 54001

Durban

4000

KwaZulu-Natal, SOUTH AFRICA

Tel: 27 31 2604557 - Fax: 27 31 2604609

Email: HSSREC@ukzn.ac.za

Appendix D: Activity 1

Activity 1

Photo elicitation interview pictures

You will be asked questions based on the three pictures presented on this page. Look at the pictures carefully and feel free to respond in any way that you wish.

Please note: You may refrain from answering any of the questions if you do not wish to answer.

Picture 1



(O'Keefe, 2018)

Picture 2



(Rubin, 2020)

Picture 3



(Bartuska & Marques, 2020)

Appendix E: Interview schedule

Photo elicitation interview

Interviewer: Miss Shaneece Chanderpaul

QUESTIONS:

1. Photo elicitation interview

- 1.1. Picture 1: What do you think is happening in this picture?
- 1.2. Picture 1: How do you think this individual feels?
- 1.3. Picture 2: What can this individual do to prevent burnout?
- 1.4. Picture 2: What do you the individual feels?
- 1.5. Picture 3: What do you think the individual can do to help how they feel?

2. Semi-structured interview schedule

- 2.1 What do you think are some of the challenges that universities face when addressing mental health needs and support for students who are off campus?
- 2.2 What can students do to equip themselves for the challenges of off-campus study?
- 2.3 How can students create a culture of health, wellness and prevention when they are off campus?

Appendix F: Semi-structured interview schedule for staff member from Student Support Services

Activity 2

Semi-structured interview for Student Support Services student counsellor

Interviewer: Miss Shaneece Chanderpaul

1. How can student services meet the needs of their students when they are based off campus?
2. How do student services address the mental health needs of students who may not have access to alternate services?
3. How can mental health care delivery improve both on campus and off campus?
4. How can student services empower students to make lifestyle choices that promote wellness across their life course?

Appendix G: Letter of approval for counselling service



Royada Omar

REGISTERED PSYCHOLOGICAL COUNSELLOR,
TIMELINE THERAPIST, NLP AND HYPNOSIS PRACTITIONER
B. Soc.Sc(UKZN); B. Soc.Sci Mons - Psychology (UKZN);
B. Psych Accreditation (UNISA)

Cell : 074 555 5786
Tel : (033) 345 7559
Email : royada@pmbcounselling.co.za
Website : www.pmbcounselling.co.za

560 Langalibalele Street
(Longmarket Street),
Pietermaritzburg, 3201
(Opp. Midlands Medical Centre
Private Hospital)

18 March 2021

To Whom It May Concern

Student (participant) access to psychological support from KZN Counselling Services.

This letter serves to confirm that students who are registered in the College of Humanities, University of KwaZulu-Natal may be referred to my practice (KZN Counselling Services) should they require psychological support as a result of their participation in the study by **Ms. Shaneece Chanderpaul (216052293)** entitled, **Off-campus study and access to psychological services: Challenges faced by students at the University of KwaZulu-Natal.**

Psychological support, should it be required, will be provided within context of **voluntary access** by students as applicable to all registered students at UKZN. Further, it is my understanding that ethical approval has yet to be obtained for this study and that Ms. Chanderpaul, under the supervision, Ms. Sindiswa Shezi (shezis1@ukzn.ac.za) will ensure that the study is undertaken in a manner that adheres to the ethical guidelines for social science research. I request that a copy of the ethical clearance be forwarded to me for my file once the study has been approved.

Regards,



Royada Omar

Registered Psychological Counsellor

Appendix H: Ethical Approval



06 October 2021

Shaneece Chanderpaul (Z16052293)
School Of Applied Human Sc
Pietermaritzburg Campus

Dear S Chanderpaul,

Protocol reference number: HSSREC/00003433/2021

Project title: Off-campus study due to the coronavirus disease and access to psychological services: Challenges faced by students from the School of Applied Human Sciences at the University of KwaZulu-Natal.

Degree: Masters

Approval Notification – Expedited Application

This letter serves to notify you that your application received on 31 August 2021 in connection with the above, was reviewed by the Humanities and Social Sciences Research Ethics Committee (HSSREC) and the protocol has been granted FULL APPROVAL.

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number. PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

This approval is valid until 06 October 2022.

To ensure uninterrupted approval of this study beyond the approval expiry date, a progress report must be submitted to the Research Office on the appropriate form 2 - 3 months before the expiry date. A close-out report to be submitted when study is finished.

All research conducted during the COVID-19 period must adhere to the national and UKZN guidelines.

HSSREC is registered with the South African National Research Ethics Council (REC-040414-040).

Yours sincerely,



Professor Dipane Hlalele (Chair)

/dd

Humanities and Social Sciences Research Ethics Committee

Postal Address: Private Bag X54001, Durban, 4000, South Africa

Telephone: +27 (0)31 260 8350/4557/3587 Email: hssrec@ukzn.ac.za Website: <http://research.ukzn.ac.za/Research-Ethics>

Founding Campuses:  Edgewood  Howard College  Medical School  Pietermaritzburg  Westville

INSPIRING GREATNESS

Appendix I : Gatekeeper Approval



10 June 2021

Miss Shaneece Chanderpaul (SN 216052293)
School of Applied Human Sciences
College of Humanities
Pietermaritzburg Campus UKZN
Email: 216052293@stu.ukzn.ac.za shezi1@ukzn.ac.za

Dear Miss Chanderpaul

RE: PERMISSION TO CONDUCT RESEARCH

Gatekeeper's permission is hereby granted for you to conduct research at the University of KwaZulu-Natal (UKZN), towards your postgraduate degree, provided Ethical clearance has been obtained. We note the title of your research project is:

"Off-campus study due to COVID-19 and access to psychological services: Challenges faced by students from the School of Applied Human Sciences at the University of KwaZulu-Natal."

It is noted that you will be constituting your sample by conducting interviews with students and staff (Taking in account the regulations imposed during lockdown ie restrictions on gatherings, travel, social distancing etc. Zoom, Skype or telephone interviews recommended) on the Pietermaritzburg and Howard College Campuses.

Please ensure that the following appears on your notice/questionnaire:

- Ethical clearance number;
- Research title and details of the research, the researcher and the supervisor;
- Consent form is attached to the notice/questionnaire and to be signed by user before he/she fills in questionnaire;
- gatekeepers approval by the Registrar.

You are not authorized to contact staff and students using the 'Microsoft Outlook' address book. Identity numbers and email addresses of individuals are not a matter of public record and are protected according to Section 14 of the South African Constitution, as well as the Protection of Public Information Act. For the release of such information over to yourself for research purposes, the University of KwaZulu-Natal will need express consent from the relevant data subjects. Data collected must be treated with due confidentiality and anonymity.

Yours sincerely

DR KE CLELAND: REGISTRAR

Office of the Registrar

Postal Address: Private Bag X54001, Durban, 4000, South Africa
Telephone: +27 (0)31 260 7971 Email: registrar@ukzn.ac.za Website: www.ukzn.ac.za

Founding Campuses: Durban Howard College Medical School Pietermaritzburg Westville

INSPIRING GREATNESS

Appendix J: Turnitin report

Off-campus study due the Corona virus pandemic and access to psychological services: Challenges faced by the students from the School of Applied Human Sciences at the University of KwaZulu-Natal

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