Online Learning, a Pandemic, and its Toll on Mental Health: The Role of Faculty Addressing Student Needs

Mental health concerns are prevalent among students regardless of their educational setting. There is a disparity in the availability and access to campus mental health resources between traditional and online students. As online learning increases and the pandemic continues to impact students, mental health concerns among the online student population rise as well. Although many institutions have enhanced their strategies to address mental health needs, not all students may be aware of or seek out these services. Faculty are in a particularly advantageous position to notice signs and provide personal connections with students to help them connect with services.

As the saying goes, "You can't pour from an empty cup." While this phrase may apply to many aspects of an individual's life, little attention is given to the mental health of online learners in higher education (Marrero, 2019). Moreover, the emergence of COVID-19 prompted a surge in distance education, further increasing concerns for the mental health and wellbeing of college students (Hagerty & Williams, 2020). Awareness is key in recognizing online learners' mental health concerns. Knowing how to identify the signs, implement strategies, and offer available support and counseling services may assist in mitigating the growing trends in mental health issues online learners often experience (Becker, 2019).

Mental Health of Online Students

Students' capacity to engage in educational and other activities vital for success in higher education can be visualized as a cup. When mental and wellness elements are healthy, the cup is full, allowing students to pour into their academics, personal growth, and their own wellness. However, when mental health issues put a strain on online students, their capacity to engage decreases and their cup becomes empty, resulting in negative impacts on their academics, personal lives, etc. Mental health concerns are prevalent among students regardless of the setting in which they are pursuing their education. Online students, like traditional students, experience mental health issues, but the difference is the availability and access to campus mental health resources. Approximately 5.8 million students are served in an online higher educational setting, and roughly 71% of chief academic officers identify online learning as a crucial element to the institution's growth strategy (Holt et al., 2019). As the availability of online learning increases, mental health concerns among the online student population rises as well.

Online learners are frequently non-traditional students who may be working full-time jobs and raising families. Attending college can be stressful for any student; however, the demands that come with balancing school and other responsibilities can induce stress levels which place students at higher risk for mental health issues (World Health Organization [WHO], 2014).

Aside from the typical demographics of online learners, this student group often struggles with feelings of isolation and disconnect, and they have access to fewer resources than traditional students (Marrero, 2019; McManus et al., 2017). In a survey conducted by the American College Health Association (ACHA; 2019), 48.5% of 38,679 college students reported feeling lonely. This rate is representative of students in both a traditional and online higher education setting; however, it does serve as an indicator of the isolation online students may feel and a reminder that online students often feel lonely and isolated simply due to the virtual setting. Reduced social interaction of the online learning environment may induce symptoms of depression (Fierro et al., 2020). These feelings of isolation can take a toll on a student's mental health. The lack of accessibility to resources can further deepen the issues they may be facing.

The average age of the onset of mental illness is roughly 18 to 24, which is when many young adults are attending college (Barr, 2019). Data from the ACHA (2019) indicated that the following mental health issues had a negative impact on the academic performance of students; depression (21.5%), anxiety (27.6%), and stress (37.6%). Additionally, 19.3% of students reported a depression diagnosis, 72% reported having discussed depression with a mental health professional, and 72.3% reported having consulted with a mental health professional in regards to anxiety (ACHA, 2019). Although the survey does not differentiate between online and traditional students, it illustrates the mental health issues faced by students within all learning environments. Anxiety and other mental health issues are at high rates among all college students, including online learners.

Although most campuses offer mental health resources for on-campus students, online students are seldom offered these same resources (Lederman, 2019). It is often assumed that online learners need less non-academic and emotional support than traditional students (Marrero, 2019); however, this population of students generally need mental health services more than the traditional student as they work to manage mental health issues, life obligations, such as parenting stressors, and working full-time, along with the challenges of higher education programs. In a traditional setting, faculty can interact and engage with students face-to-face, allowing them to be aware of mental health warning signs, such as poor hygiene, mood changes, and varied levels of attention. The online learning environment creates obstacles as the "direct sensory contact" with students is missing (Barr, 2019).

The Rise in Online Learning due to COVID-19

Current literature suggests non-traditional online learners experience additional challenges and mental health concerns than traditional learners (Marrero, 2019; Barr, 2014). The lack of adequate support services, equitable access, and connectedness has been a concern for online learners for many years; however, the emergence of COVID-19 and the declaration of a global pandemic (WHO, 2020) has interrupted many aspects of society's lives, including education. Bozkurt et al. describes the global educational response to the pandemic as "emergency remote education (ERE)" (p. 2). Although online learning and the promotion of advanced technologies in education has continued to expand, the authors emphasized the difference between distance

education and ERE as an option versus an obligation. While there have always been challenges associated with online learning, distance education is a choice of individuals. In contrast, ERE "is about surviving in a time of crisis with all resources available, including offline and/or online" (Bozkurt et al., 2020, p. 2).

In addition to the later concerns associated with online learning, new challenges arose due to COVID-19 and the abrupt transition to increased remote instruction. Recent literature described teachers as students as they adapted to online methods of instruction, highlighting the challenges of learning new technologies, teaching new technologies to students in addition to teaching the content, maintaining academic integrity, and navigating technological challenges as they arise (Bertacco, 2020; Nasr, 2020). While there are concrete challenges in online teaching and learning to combat, the primary concern lies in the challenges that cannot be seen.

Mental Health and COVID-19

External factors such as social media, news reports, social distancing, health and safety mandates, and feelings of overall uncertainty can contribute to stress and anxiety due to COVID-19 (Haider et al., 2020). "Social connection is vital to well-being in humans, and whilst internet-based media and applications such as Zoom, Skype, WhatsApp and FaceTime may allow for social interactions to continue, they do not replace the need for in-person human contact" (p. 1). The protocols and mandates in place to mitigate the spread of COVID-19 counteract proven effective models and strategies used to reduce and prevent mental illnesses. Furthermore, individuals who have pre-existing mental health issues are at a higher risk of worsening symptoms or the introduction of new mental illnesses (Haider et al., 2020).

Further examining the paramount impact of COVID-19 on one's internal mental health and wellbeing, Hagerty and Williams (2020) review the correlation between the global pandemic and Maslow's Theory of Human Motivation. The authors determine all of Maslow's hierarchical basic human needs (physiological; safety; love and belonging; esteem; and self-actualization) are threatened by COVID-19, most significantly the need for love and belonging. Furthermore, the authors reviewed empirical research related to neurological structures, referred to as "brain styles," (p. 2) and its interaction with Maslow's basic need for human connection. It is the author's viewpoint that the impact COVID-19 has on one's mental health is partially due to the structure of the brain and the "universal threat to human connection posed by the virus" (Hagerty & Williams, 2020, p. 3). ERE has created challenges for meeting the basic need of human connection leading to feelings of isolation, lost sense of love and belonging, and potentially abandonment. Awareness of mental health issues at one's core and its domino effect throughout their life due to various factors is significant. The ability to identify and respond appropriately to signs of mental health concerns is crucial.

The combination of recent anxiety and stress due to COVID-19 and recurrent stressors related to challenges in online learning magnifies the profound impact on one's mental health in the present. As society continues to coexist and move forward during a global pandemic, additional research and knowledge on the effect of the virus on mental health and online learning is vital. Only time will tell the true mental health impacts of COVID-19 for online students; however, proactive measures and advocacy through collaboration and support services can promote wellness, mitigating the rise in mental illnesses. In addition, supporting and nurturing the educational needs and academic development of students can promote resiliency and prosperity.

Support for Online Students

One of the basic assumptions that must be acknowledged before discussing strategies to support online students' mental health is that online students simply need less services than their on-campus counterparts. The cost for face-to-face instruction, particularly for students who live on campus, is higher than for online students. One of the fee-based services that is often viewed as discretionary is mental health counseling (Lederman, 2019). Lisa Antel explained that the online population is often juggling more than the on-campus population. They do not have as many opportunities to hook into campus, which raises the odds that they become isolated (Lederman, 2019). Online students deserve an equitable level of care and services, and in fact, this population has unique needs that may make their needs for certain services, like mental health resources, greater.

Faculty: The First Line

Although many institutions have integrated mental health screenings and increased the number of resources available to students, not all students are aware of or seek out these services. Therefore, it is crucial that faculty and staff are trained on the warning signs of a potentially distressed student and protocol to intervene. Faculty are in an advantageous position to both notice signs and provide a personal connection with students to help link them with available services. For online students, their professor is likely the person they communicate with the most; in fact, he/she may be the *only* person at the university they interact with during the term. The professor may be their only link to the institution and therefore the only person who is in a position to notice they are struggling.

Warning Signs

In the traditional classroom, attendance issues, visible sadness or emotion, poor hygiene, and disruptive behavior are all signs that faculty are likely to note. However, in the online setting, these types of signs are more difficult to spot. In the virtual classroom, professors are more likely to notice a lack of or inconsistent access to the course, change in academic performance, frequent course drops over time, or discussion board posts/emails/communications that include unusual, inappropriate, and even aggressive language or topics. In addition, some students may openly discuss their struggles or mental health in discussions or assignments. It is also worth mentioning that educators are often keenly aware of their classroom climate, even online, and often they can sense when something is "not right" with a student.

Methods to Address

Gallimore, Braun, and McLaughlin (2019) point out that many faculty members embrace the responsibility of identifying students who may need intervention, but this role is not typically in the job description and intervening is not always easy. However, there are a few methods that can engage faculty in this effort, including encouraging faculty to build skills through training programs, including conversations about student mental health at new faculty orientations, continuing those conversations through faculty mentoring programs, and evaluating "the

disincentives that prevent faculty from taking a more active role and remove those roadblocks" (Gallimore et al., 2019, para 12). Of course, the authors and others who emphasized the importance of online faculty's place in recognizing potential mental health concerns do not assert that professors accept full responsibility for a national, and honestly worldwide, issue. Faculty cannot be the only ones helping students maintain positive mental health and wellness so that students are engaging with the higher education experience at full capacity. Instead, the call to action is for faculty to collaborate with existing endeavors and lead collaborative efforts that bridge the gap between the classroom and broader university personnel and services.

Implications

So, what does that bridge look like? What does that mean for online faculty, higher education personnel, and online students? With topics surrounding mental health steadily rising to the surface of the nation's attention, much of the stigma is fortunately being chipped away. Most higher education institutions have implemented programs that are increasing awareness of mental health as a "real" issue. Free mental health screenings along with campus-wide courses, events, and initiatives like wellness campaigns have proven successful (Becker, 2019; Eva, 2019). Some institutions are broaching mental health topics with new students during orientations and offering multiple ways for students to keep talking about mental health through online simulations, such as Kognito (Eva, 2019), and alternate ways to seek help like texting, online systems, crisis hotlines, and after-hours visits. Becker (2019) emphasizes that helping students lower their risk improves the benefit for the larger population more than solely focusing on those at the highest risk, and this suggests that institutions should explore factors that contribute to student stress, such as substance abuse, discrimination, and academic concerns, and then work to reduce their influence.

Participate

Faculty who teach on campus are in an ideal position to participate in on-campus events. However, online faculty can still take an active role in both on campus and virtual options. Online faculty who are not local to their university can plan trips to campus during events, and when there, should work to include their online students by recording and sharing videos that show them participating in events, give virtual tours of the campus, or include other campus personnel to show connection to the university. Virtual events, webinars, and other services have become increasingly available as a result of the COVID-19 pandemic, which has forced institutions to find alternative ways to reach students. This trend is unlikely to disappear completely once the pandemic subsides, which is great news for online learners. Virtual events provide equal access to services that may typically only be available to local students, and because of necessity during the pandemic, campus personnel from all areas have now become more confident using virtual tools to deliver services.

Communicate the Value of Mental Health

Along with participating in university mental health initiatives, online faculty should act as a conduit of information for their students. Mass emails and banners on university webpages and social media often advertise wellness campaigns and mental health services, but with the sheer

number of emails and information faculty and students receive, a lot of information can become lost in the crowd. Online faculty can act as a filter for their students by zoning in on relevant events and services that fit their online students' needs and can make announcements in their courses to encourage participation. Showing that they are plugged into the university and are aware of their online students' unique needs can allow faculty to keep the conversation about mental health alive during a course, but ideally, the seed should be planted from the very first day.

Flaherty (2017) discusses a movement at Northwestern University in which faculty were encouraged to include verbiage related to mental health in their syllabi. The faculty senate passed a resolution that encouraged faculty to include statements like "If you find yourself struggling with your mental or physical health this quarter, please feel free to approach me. I try to be flexible and accommodating" along with phone numbers for health and student services (Flaherty, 2017, para 2). Beginning the class with a prominent stance on mental health opens the door to continuing conversations. However, faculty also must be prepared if a mental health crisis presents. They must be knowledgeable of the protocols to follow, have the tools they need to refer, and be willing to assist.

Although many universities have Behavior Intervention Teams (BIT), counseling services, and crisis lines, many faculty do not know how to access their services. Yearly trainings should be provided to help faculty understand what services are available, how to access them, and basic information on how to assess students' needs. Particularly for online faculty who work primarily through email and text-based mediums, it is crucial that they understand how to refer a student to the appropriate service or how to reach a crisis response team if the need arises. The Question, Persuade, Refer (QPR) training is a popular method and is appropriate for both faculty and students as it "empowers all people, regardless of their background, to make a positive difference in the life of someone they know" (QPR, 2020, para 1). Even simple steps such as counseling services and behavior intervention personnel connecting with faculty each year through online meetings can develop faculty confidence that they know how to handle concerns about students' mental health.

Conclusion

Clearly, the mental health needs of online students must be considered in a different light than traditional students. The recent impact of the COVID-19 pandemic on students' mental health has increased the need for mental health support. Online faculty are the first line and can be powerful allies in the fight for mental health awareness. By collaborating with others to lead awareness initiatives and keep the conversation about mental health at the forefront, faculty can act as a bridge between students and available services, increasing the likelihood that students take advantage of mental health support so that they are able to fully engage in the online learning experience. Many institutions are reveling in increased enrollment due to online courses. These increases should be matched with equitable and accessible services to ensure that these students thrive.

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