

Mitigating Educational Disadvantage (including Community Education issues) Working Group

Learner Mental Health and
Wellbeing and COVID-19
- A *Discussion Paper*

Draft Paper

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Mitigating Educational Disadvantage (including Community Education issues) Working Groupⁱ Learner Mental Health and Wellbeing and COVID-19

A Discussion Paper

This paper sets out to highlight a range of recommendations that will support equality and safeguard the needs of disadvantaged students and learners. We would ask that such recommendations are considered when actions by the education institution are made in relation to the theme of the paper. No doubt after this crisis the education system as a whole will be collectively judged on how it mitigated disadvantage.

Key Recommendations

Immediate-term:

1. Ensure over-the-phone/online support services are made available to all learners.
2. Provide counselling for all learners, including bereavement and grief counselling for learners who have lost loved ones during the pandemic.
3. Providers should share tips and resources on health and wellbeing with students.
4. Communicate clearly with learners regarding expectations, assignments and course progression.
5. Provide emotional and psychological wellbeing supports whilst also offering practical support in terms of course work and exams. A key element of success in supporting students with mental health difficulties is the inclusion of personal connectedness to a key member of staff who is focussed on supporting the student, whilst also facilitating access to mainstream services.
6. Create an understanding, respectful and inclusive learning environment where students with mental health needs feel safe:
 - a. Promote (across learners, educators and stakeholders), a greater understanding of mental health conditions and mental illness, pre-existing and COVID-19 induced mental health needs, and advocate for respect and compassion for self, for carers and for all to support a receptive, understanding and inclusive community.
 - b. Provide online Mental Health awareness training for academic staff and/or all staff, so that they can signpost students to appropriate services. In higher education, provision should be made for enhanced cross-university communication and training to address fears around, and destigmatise, mental ill-health. A whole-institution approach is required. Supports should be provided for students regardless of diagnosis.
 - c. Provide equitable access to needs assessments for students with mental health needs and resources to implement a response to identified needs; parity of recognition and provision in Disability Support Services across all tertiary sectors and colleges.

- d. Prioritise the development of UDL policies and related CPD across all sectors and publicise these policies to reassure students of their access rights and to support a mainstreamed response.

Medium-term:

1. Ensure adequate direct mental health supports are available to all learners who require them. There will need to be an increase of resources/funding in this area for statutory and non-statutory providers of FET, HE and Community Education.
2. Increase integrated and wrap-around services accessed through education providers (e.g. guidance, family supports, addiction supports, domestic violence counselling and psychotherapy). Increase resources to non-statutory community education groups who engage with specific learner cohorts (e.g. through recovery education; working with women who experience intimate partner violence).
3. Increase in (non-accredited as well as accredited) courses that promote mental health and wellbeing, particularly within a community education context.

Overview

‘Mental health is a vital component of individual well-being as well as social and economic participation’. However, as noted by the OECD in *Health at a Glance 2019*, ‘it is estimated that about one in five people experience a mental health problem in any given year, while every second individual will experience a mental health problem in their lifetime (Institute for Health Metrics and Evaluation, 2019[43])’ with the most common mental health problems being ‘anxiety disorder (5.1% of the population)’, ‘depressive disorders (4.5%)’, and drug and alcohol use disorders (2.9%).¹ The recently published ‘My World Survey 2’, the National Study of Youth Mental Health in Ireland, indicated that 58% of 18-25 year old respondents in a HE setting were classified as outside the normal range for depression and anxiety.² Additionally, AHEAD data shows that the number of students with diagnosed mental health conditions engaging with disability support services in higher education has risen by almost 500% in the last 9 years of published AHEAD data (from 378 in 2008/09 to 2217 in 2017/18 – 487% rise).³ This swell in mental ill-health is recognised by the OECD’s *Health at a Glance 2019*, which contends that in OECD countries ‘mental health care is inadequate’⁴ and recommends that this be ‘addressed through more effective policies and

¹ OECD (2019), *Health at a Glance 2019: OECD Indicators*, OECD Publishing, Paris, <https://doi.org/10.1787/4dd50c09-en>. p.56. [Accessed 6th May 2020]

² B Dooley, C O’Connor, A Fitzgerald, and A O'Reilly. *My World Survey 2, The National Study of Youth Mental Health in Ireland*. Developed by UCD School of Psychology and Jigsaw. <http://www.myworldsurvey.ie/full-report> [Accessed 18th May 2020]

³ Christine Hynes and Dara Ryder. *Numbers of Students with Disabilities Studying in Higher Education in Ireland, 2017/18*. AHEAD. April 2019. <https://ahead.ie/userfiles/files/shop/free/Numbers%20of%20Students%20with%20Disabilities%20Studying%20in%20Higher%20Education%20in%20Ireland%202017-18.pdf> [Accessed 18th May 2020]

⁴ *Health at a Glance 2019*.

interventions to prevent and manage' mental ill-health.⁵ Within the context of a global pandemic and in its aftermath, the necessity of increased mental health supports is even more urgent as the number of learners affected is likely to soar to an even higher rate. Indeed, there is an added element of urgency on account of the greater potential impact of the crisis on those who already face significant educational disadvantage. A whole-institution approach is required and supports should be provided for students regardless of diagnosis.

Education plays a key role in promoting and supporting positive mental health and wellbeing, providing access to necessary supports for vulnerable learners. Furthermore, as noted in the Department of Education and Skills' *Wellbeing Policy Statement and Framework for Practice*, 'the promotion of wellbeing in the education community is a priority for the Department'.⁶ The statement considers wellbeing as 'present when a person realises their potential, is resilient in dealing with the normal stresses of life, takes care of their physical wellbeing and has a sense of purpose, connection and belonging to a wider community. It is a fluid way of being and needs nurturing throughout life'.⁷ The COVID-19 crisis has had a deeply destabilising impact both economically and socially on learners across Ireland and it is vital that in these extraordinary times, providers of education continue to offer supported leaner pathways.

During the COVID-19 crisis it has become clear that learning cannot simply continue as normal, even where courses have successfully migrated online. The global pandemic has forced major adjustments in people's lives and will continue to have a wide range of **structural, community and interpersonal impacts**, the gravity of which we are only beginning to understand. Therefore, within an educational context, there are many factors that might negatively impact a learner's mental health and/or exacerbate existing issues at this time, making it difficult for learners to engage in education as they did before. While social distancing measures persist, learners are experiencing 'separation from loved ones, the loss of freedom, uncertainty over disease status, and boredom [all of which] can, on occasion, create dramatic effects'.⁸ Some adult learners fear for their lives due to existing health conditions; this is especially true for older learners, those with existing health conditions and for many learners with a disability. Indeed, during this period of unprecedented change, learners are experiencing loss of all kinds, and some will be grieving loved ones. A large number of learners are also dealing with the psychological, social, and financial impacts of job loss. As outlined in recent ESRI study, 'the pandemic and subsequent policy response has led to an unprecedented rise in unemployment, with the Live Register (including PUP and TWSS applications) showing an increase of 330,734 from February to

⁵ Ibid. p.57.

⁶ Wellbeing Policy Statement and Framework for Practice, 2018–2023 (Revised October 2019). Department of Education and Skills. p.8 <https://www.education.ie/en/Publications/Policy-Reports/wellbeing-policy-statement-and-framework-for-practice-2018%20%932023.pdf> [Accessed 12th May 2020]

⁷ Ibid. p.10.

⁸ Samantha K Brooks et al. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. <https://www.thelancet.com/action/showPdf?pii=S0140-6736%2820%2930460-8> [Accessed 12th May]

March (CSO, 2020b).⁹ In the context of this pandemic, therefore, alongside adequate supports, there must be enough flexibility to allow learners to continue learning at their own pace, and if unable to continue now, to return to education when they are ready.

For almost all learners, an element of **uncertainty has also been introduced** in relation to their course(s) at this time (including by not limited to concerns regarding continuity of learning, assessment, or loss of social networks and resources). Many students have described **the impact that changes to the delivery of their education is having on their mental health**. While many have expressed a hope to re-engage in September when things have returned to ‘normal’ it is now looking very likely that remote learning will continue into the next academic year. As such, these students will require input over the summer months and going forward to support their mental health if they are to have any chance of re-engaging with their programme in the next academic session.

In a recent learner survey conducted by AHEAD, learners with disabilities reported experiencing major and multiple barriers to engaging in learning at home. As one learner described:

I am afraid I will continue to live in panic and having panic attacks when my exam paper is uploaded. Also, my lack of available time to study with 5000 questions a day and ‘Mammy will you play with me’ all day long. I have completely packed in home-schooling also as the stress was unbearable... if I have to do repeats my life will be a prolonged nightmare.¹⁰

Other learners reported ‘lots of uncertainty, anxiety, and lack of proper training with the proper tools’. The survey found that students with the ‘highest percentage of negative reaction (disagree or strongly disagree) to the statement “I am coping well with learning from home” [were] those with a Mental Health Condition (67%), ADD/ADHD (62%) or a Specific Learning Difficulty (58%)’.¹¹

As demonstrated in the learner quotes above, there are various **compounding issues for many adults engaging in education**. This is particularly the case for learners and potential learners with a disability, Travellers and Roma, migrants, those in Direct Provision or experiencing homelessness, and those in recovery from addiction.¹² Many more learners now find themselves in spaces that are not conducive to learning, and others are spending extended periods of time in spaces that are unsafe, both physically and psychologically. For learners experiencing (multiple kinds of) disadvantage, personal wellbeing is inextricably connected to social and material challenges such as poor living conditions, precarious

⁹ Keelan Beirne et al. The Potential Costs and Distributional Effect of COVID-19 Related Unemployment in Ireland. Budget Perspectives 2021 Paper 1, April 2020.

<https://www.esri.ie/system/files/publications/BP202101.pdf>

¹⁰ Learning from Home During COVID-19: A Survey of Irish FET and HE Students with Disabilities. AHEAD. p.36
<https://ahed.ie/COVID-19-student-report> [Accessed 12th May]

¹¹ Ibid. p.15.

¹² The broad range of issues arising for these specific learner cohorts are examined in the Mitigating Educational Disadvantage (including Community Education issues) Working Group paper ‘Educational Equity and Learner Cohorts’. <https://www.aontas.com/assets/resources/AONTAS-Research/MED%20Educational%20Equity%20and%20Learner%20Cohorts.pdf> [Accessed 6th May 2020]

employment, social exclusion, isolation, family dysfunction, addiction etc. As noted by the OECD, ‘vulnerable and disadvantaged groups will be impacted more severely and therefore require particular attention in the policy response’ during and post-COVID-19.¹³

Case Study – Student Central programme (NLN and MAP)

The National Learning Network (NLN) and Maynooth Access Programme (MAP) have collaborated since 2012 to provide the Student Central programme to students who are registered with a disability. Three assistant psychologists supervised by a Senior Educational Psychologist are part of the Student Central Team. The most prevalent disabilities in the service are mental health conditions, autism spectrum disorder, ADHD/ADD and dyslexia, providing academic and/ or wellness support. Students are supported with goal-orientated sessions targeting areas the student wishes to improve based on their individual needs. The service adopts a holistic approach and recognises that students’ well-being is intertwined with their academic experiences. The service strives to promote students’ independence and encourages them to develop these skills, which will help them flourish during their time in college. Student Central offers support to students in areas of academic development, organisation and time management, wellness and social support.

A recent study conducted by researchers at Maynooth University and the Centre of Global Health, Trinity College Dublin as well as universities in Northern Ireland, England and Scotland investigated how individuals are responding to and coping with the ongoing global pandemic. The first wave of this Irish COVID-19 Psychological Survey found that 41% of individuals reported feeling lonely, 23% reported clinically meaningful levels of depression, 20% clinically meaningful levels of anxiety and 18% reported clinically meaningful levels of post-traumatic stress. Women reported higher levels of anxiety and depression than men, whereas men were found to experience higher levels of post-traumatic stress than women. The study also suggested that **younger individuals** are at a higher risk of mental health problems.

As there has been a disruption to student’s lives due to the closure of college campuses, Student Central has altered its approach and made a rapid shift to deliver the service remotely. Students continue to receive support, in relation to their mental health and wellbeing, via email, online chat and Microsoft Teams. Students are experiencing different difficulties as they are now studying at home.

Students report finding it **difficult to keep up** with all the information. They state that they **fear missing important information** which in turn has created a **sense of worry and feeling overwhelmed**. Some students report having **difficult home environments** and some struggle with **adapting to working from home**. Students report finding it **difficult to establish a routine**. They also find that there are **more distractions** (e.g. parents and other siblings working from home also), which has led to **procrastination and low motivation**. Students with young children who have **caring responsibilities** are finding they **have less time to focus on college work** and **less concentration and motivation** to do so as a result of competing demands at home. Others are students who are **not used to being at**

¹³ OECD (2019). OECD Policy Responses to Coronavirus (COVID-19) COVID-19: Protecting people and societies. 31 March 2020. <https://www.oecd.org/coronavirus/policy-responses/COVID-19-protecting-people-and-societies/> [Accessed 12th May 2020]

home, have busy environments or issues with relationships within the home. A significant number of students face issues with **connectivity and lack of technological resources**.

A View Forward

While the pandemic continues and emotional stresses mount up, many of the **support networks** that were provided through education are now unavailable or only partially available to some of the most vulnerable learners. Moreover, following the financial crash in 2008 many such supports were greatly depleted, leaving communities and community support systems weakened and ill-prepared for the crisis which COVID-19 now poses. Education has provided an important access route to key support services for so many learners, and will continue to play a key role during the crisis and its aftermath. It is now crucial that education providers across the sector are equipped to respond to the psychological impacts of the crisis on learners and adequately resourced to do so.

To begin, there should be a mapping of all supports that are available across the HE, FET, and community education sector, through Access Offices and Student Services. We should highlight some of the really good practice that has developed in recent years and in recent weeks. Furthermore, there should be a consultation or surveying of students in the immediate term and again in the medium term to capture the impact of this crisis.

Useful resources and services:

Jigsaw

The Jigsaw Support Line is available for free mental health support and advice to young people aged 12 to 25 years old, and parents or concerned adults in Ireland.

- freephone 1800 544729 (from 1pm to 5pm Monday to Friday)
- text CALL ME to 086 180 3880, giving your preferred day and time for a call (from 9am to 5pm Monday to Friday)
- email help@jigsaw.ie (for responses from 9am to 5pm Monday to Friday)
- visit www.jigsaw.ie or www.jigsawonline.ie for more information

Turn2ME provides a three-tiered approach to supporting mental well-being – self-help, support groups and professional support. Online services include counselling and support groups

www.mymind.org provides access to counselling and psychotherapy, face to face and online

Samaritans

- The Samaritans telephone service is available 24 hours a day. For confidential, non-judgmental support:
Freephone: 116 123
email: jo@samaritans.ie
visit: Samaritans Ireland for details of the nearest branch

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**The Voice of
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