

Article

A Qualitative Analysis of South African University Students' Perceptions of Telehealth Counselling for Mental Health

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Abstract: Telehealth psychological counselling, while it has long been in existence, it gained growing recognition during the COVID-19 pandemic era and has since continued to grow and be incorporated in mental health treatment. Despite the growing knowledge and utilization of telehealth psychological services, knowledge about the benefits and challenges of telehealth psychological counselling is limited, particularly in the university population. This study aimed to explore students' perceptions of the benefits and challenges of telehealth psychological counselling during the COVID-19 pandemic. Using an exploratory research design, eight students were purposively selected to participate in semi-structured individual interviews. Thematic analysis was used to analyse data. The findings indicate that telehealth psychological counselling was perceived as beneficial in alleviating psychological distress during the pandemic. However, poor network connectivity was reported as a significant barrier. Overall, the study outlined the importance of integrating telehealth psychological counselling into future mental health services to enhance support for students and promote mental well-being.

Keywords: Counselling; COVID-19; mental health; psychology; students; telehealth; therapy

Introduction

The COVID-19 pandemic brought unprecedented restrictions that led to social isolation and prolonged confinement in the home, factors that are closely associated with poorer mental health and increased substance use (Mahlangu et al., 2022). Shen et al. (2024) also argue that Social isolation and loneliness are related to depressive symptoms, suicidal ideation, and anxiety. Such symptoms are associated with stress can be destructive and can affect individual's daily function (Nabil Mat Isa & Hoesni, 2024). A cross-sectional study by Islam et al. (2020) in Bangladesh found a high prevalence of depression and anxiety among university students during the COVID 19 pandemic. University students' mental health has been a growing concern in recent years, even before the COVID-19 pandemic (Chen, 2022). University students have been found to be vulnerable to depression and anxiety, due to high levels of academic, interpersonal, and financial stressors (Rousseau. et al 2016). Additionally, university students face significant role and relational transitions, such as assuming autonomy and social role changes (Auerbach, 2018).

Amidst the COVID-19 pandemic, mental health challenges were the leading impediments to academic success and the overall well-being of the American student population (Son et al., 2020). Similarly, in South Africa, mental health disorders are prevalent among university students, with major depressive disorder and generalised anxiety disorder as the most common (Bantjes et al., 2023). A study by Zhang et al. (2023) found that university students experienced an increased worsening of psychological illnesses, such as depression and anxiety, during the COVID-19 pandemic. The increase in mental health related illnesses during the COVID 19 pandemic necessitated the need for mental health intervention, with little care provision by mental health care

providers (Gladys & Emmanuel, 2023). Insufficient mental health resources at student health care centres and other barriers to psychosocial treatment result in low rates of students receiving health care treatment, potentially impacting academic performance and long-term health (Weissinger et al., 2022). Therefore, it can be argued that the university student population was vulnerable to poor mental health before the pandemic; this vulnerability worsened during the pandemic due to various reasons associated with the lockdown restrictions and limited mental health face-to-face healthcare services. This resulted in the need for telehealth mental health services.

Telehealth and Mental Health Services

Telehealth is defined as the delivery of healthcare services, where distance is a critical factor, by all healthcare professionals using Information and Communication Technologies (ICT) for the exchange of valid information for diagnosis, treatment, and prevention of disease and injuries (Cooney et al., 2022). According to Ngcobo-Sithole and Mabusela (2022), the concept "of telehealth" is an umbrella for telemedicine and other healthcare services provided remotely, such as telehealth psychological counselling or telepsychology. Telehealth involves the use of technological devices such as phones and laptops that are connected to the internet for effective audio and videoconferencing interactions, all aimed at eliminating psychological distress (Ngcobo-Sithole & Mabusela, 2022).

Telepsychology is not a mere switch to a different form of medium; however, it involves awareness of the presence of the device as a third person potentially impacting therapeutic relations, and acknowledgement of legal, ethical, and clinical issues involved. Moreover, digital interventions exist at different ranges of intensities and levels of digitization (Bantjes et al., 2023). The difference between a phone call conversation between a therapist and patient, versus a full-on telepsychology session, lies in the depth, structure, and effectiveness of the support offered. Bantjes et al. (2023) further state that phone calls lack visual cues, quality of interaction, and limited ability to foster rapport building. Some, like online therapy, have digital delivery, but otherwise resemble traditional in-person mental health services, due to the real-time connection with the therapist.

Previously, telehealth was mostly used in areas with limited availability of professionals, in rural settings with challenges due to resources, financial and transportation issues, and during conflicting work schedules (Zhang et al., 2021). The pandemic provided a new opportunity for telehealth to clarify its purpose. The COVID-19 pandemic saw a rise in telepsychology in many African countries due to a wider acceptance of digital solutions and increased awareness of mental health challenges. The normalization of remote work and online classes set the foundation for the acceptance of digital interventions by individuals, educational institutions, and organizations for various purposes, including teaching, telehealth. Furthermore, endorsement from the government and organizations such as the World Health Organization (WHO) encouraged professionals and patients to adopt telehealth services, thereby reducing skepticism towards telehealth.

Telehealth promotes compliance with treatment and prevents premature termination from therapy (Ngcobo-Sithole & Mabusela, 2022). The notable increase in the use of telehealth psychological counselling during the pandemic has been attributed to its convenience and accessibility, and ability to address the ever-increasing mental health needs of the population (Raju et al., 2024). Increasing patient access to evidence-based mental health treatments through telehealth is important both during the pandemic and beyond (Sora et al., 2021).

In the South African university context, telehealth psychological counselling shows great potential to address mental health care needs. The immediate accessibility of telehealth psychological counselling has contributed to students who would not attend in-person sessions engaging in online sessions (Goldschmidt et al., 2021). University students may be more comfortable with technology usage, particularly due to their familiarity with technology (Bathje et al., 2014).

Telehealth facilitates disclosure, reported feeling more at ease to disclose sensitive issues they would ordinarily have had difficulty discussing, mainly because they were not face-to-face with someone (Ngcobo-Sithole & Mabusela, 2022). The effectiveness of online counselling for treating depression, anxiety, and panic disorder supersedes the concerns of technical barriers impacting its effectiveness (Bathje et al., 2014). These arguments highlight the benefits of telehealth psychological counselling. Hence, the need for the current study to explore these benefits in an under-resourced community. As such, this study aimed to explore students' perceptions of the benefits of telehealth psychological counselling during the COVID-19 pandemic in a resource-constrained setting. The present study addresses how students perceived tele-counseling services that the

universities tailored for mental health support for students during the pandemic. Through utilizing the Technology Acceptance Model (TAM), this study sought to understand students' behavioral intentions and attitudes towards online counselling. TAM has five standard constructs, which are perceived usefulness, perceived ease of use, attitude towards using, behavioural intention to use, and actual system use (Davis, 1989). Garcia et al. (2024) define the perceived ease of use as the extent to which individuals believe the adoption of technology is effortless and that his or her performance is enhanced by the use of such technology. Regarding the construct of perceived usefulness, Garcia and colleagues define it as the belief that the use of a tool can improve an individual's productivity. The construct of attitude towards using the tool or technology is the user's behaviour and intention to proceed with the technology and how motivated the individual is towards the acceptance of using the given technology and lastly, the construct on the intention to use, entails the individual's determination to choose a particular behaviour. The uniqueness of this study lies in its adoption and adaptability in the South African context, pandemic-specific conditions, and resource-constrained setting. This study therefore, sought to explore students' perceptions of the benefits and challenges of telehealth psychological counselling experienced during the COVID-19 pandemic.

Methodology

The study employed a qualitative research approach with an exploratory research design to explore students' perceptions of the benefits and challenges of telehealth psychological counselling during the COVID-19 pandemic in a resource-constrained setting. This approach was selected to deeply understand the distinctions and subjective experiences regarding telehealth psychological counselling in the university students' context (Austin & Sutton, 2014). The qualitative approach was relevant for this study because it allowed the researchers to gain deeper insights from the participants who had participated in telehealth counselling services and had, therefore, richer experiences about telehealth counselling.

Participants

Table 1 below shows the demographic information of the participants. Total population consisted of 29 students, with 25 females and 4 males. 8 participants aged between 18 to 24 years participated in the study. This total number was determined by data saturation. The sample consisted of 7 female participants and 1 male participant and represented a considerable proportion. The participants were enrolled in nursing and medical degrees, from level 1 to level 3. Non-probability purposive sampling was applied to recruit participants who received online counselling provided by the Student Counselling Centre during the COVID-19 pandemic between 2020 and 2021 (Tenny, 2022). Participants received 2 to 9 online therapy sessions via Zoom.

Table 1. Participant demographics

Participant	Gender	Ethnicity	Income	Age
Participant 1	Female	Black African	Low income bracket	24
Participant 2	Female	European	Middle Income bracket	21
Participant 3	Female	Black African	Low income bracket	21
Participant 4	Female	Black	Upper income bracket	18
Participant 5	Female	Black African	Upper income bracket	23
Participant 6	Female	Indian	Lower income bracket	22
Participant 7	Female	Black African	Lower income bracket	21
Participant 8	Male	Black African	Middle income bracket	24

Data collection and procedure

Research posters were distributed electronically to various student groups on Facebook, Instagram, and WhatsApp as a way of recruiting the participants. The researcher circulated the research poster for five months and received minimal engagement from potential participants. Thereby, the researcher amended the recruitment strategy by requesting permission through the university ethics committee from the director of the Research and Innovation Centre, the Head of the Clinical Psychology Department, and the COVID-19 Telehealth Psychological Counselling Project Coordinator, to obtain participants' contact details. The Protection of Personal Information Act (POPIA) was upheld at all stages of the research. Potential participants were then sent the research flyer via

WhatsApp. Interested individuals expressed a willingness to participate in the study and were provided with further details on how to contact the researchers.

The interview guide was designed based on the study aim and literature on telehealth psychological counselling (Creswell & Creswell, 2022). The data was collected until no new trends or patterns emerging. An open-ended semi-structured interview guide was utilized to obtain information on the experiences of students who received online counselling from the designated higher education institution during the COVID-19 pandemic.

Ethics

This study was conducted after obtaining approval from the School Research Ethics Committee (SREC) and the Sefako Makgatho Health Sciences Research Ethics Committee (SMUREC), SMUREC/M/177/2021: PG. Written permission was received from the director of the Research and Innovation Centre to conduct research with university students, and the Head of the Clinical Psychology Department and Project Coordinator of the COVID-19 telehealth psychological counselling program. Participants were provided with research information and written consent was obtained. All ethical principles were upheld, including voluntary participation, withdrawal from participating at any phase of the study, confidentiality, and removing personal identifiers (De Vos et al., 2021). Desirability bias was counteracted through assuring participants of anonymity and encouraging open, honest responses, emphasizing that there is no wrong or right answer. In order to prevent construct bias, an inductive approach was utilized, allowing themes to naturally emerge from the data. The study utilized multiple data sources to confirm findings; furthermore, all interviews were conducted using the same semi-structured interview guide.

Data Analysis

The collected data was analysed using the Thematic Analysis method (Maree, 2020). The interviews were conducted and recorded on Zoom. The recordings were played back during the transcription process, and written responses analysed. In this study, Otter.ai was used solely for transcription to capture participants' responses accurately, with no additional software utilized. Authors transcribed and meticulously reviewed the data from Zoom-recorded interviews to ensure accuracy and gain a thorough understanding. Utilizing thematic analysis, data were coded with a focus on the research aim, organizing similar statements into meaningful groups (Polit & Beck, 2022). Authors reviewed and analysed all emerging themes. Codes were generated by identifying frequently mentioned words. The data were manually coded; categories were extruded by grouping recurring codes into broader themes. Key codes that emerged included scheduling, modes, opening, experience, therapist relationship, privacy, comfort, timesaving, waiting period, and satisfaction, among others. Authors then organized and refined the initial codes into potential themes, grouping related information based on consistency and meaning (Maguire & Delahunt, 2017).

The Findings

This section outlines the results for the study. Figure 1 shows thematic mapping of themes and subthemes resulting from the data. Benefits of telehealth psychological counselling were noted through participants' responses included obtaining a different perspective of what they were going through and understanding what they presented with. All eight participants experienced benefits associated with telehealth, however, there are differences noted in what participants experienced as beneficial, as is outlined below.

Referral to other relevant professionals

Participants shared that with online consultations, they benefited from receiving referrals to other relevant professionals. Participant 1 indicated obtaining help by being referred to a tertiary hospital for specialist care.

“I got to see that I have a problem...I was able to be transferred to the hospital and that is where I got the help that I needed. It was not just a one-day thing, but it was a process, and I still to get the help that I need.”

(Participant 1, Female, 24 years old)

Participant 5 described a point in her life when she felt she was struggling to the point of suicide; however, getting connected with the psychiatrist by the psychologist she consulted with online assisted her.

“I saw different doctors, and they were so nice and told me that they understood. Overall, it was better because I think my situation was so bad that I thought maybe at some point I’m gonna take my own life, but I went to see a psychiatrist, and I was given antidepressants.”

(Participant 5, Female, 23 years old)

One participant explained how they promptly helped her when she needed help.

“They referred me to the relevant people when it came to my mental health. That was the benefit. Yeah”

(Participant 6, Female, 22 years old)

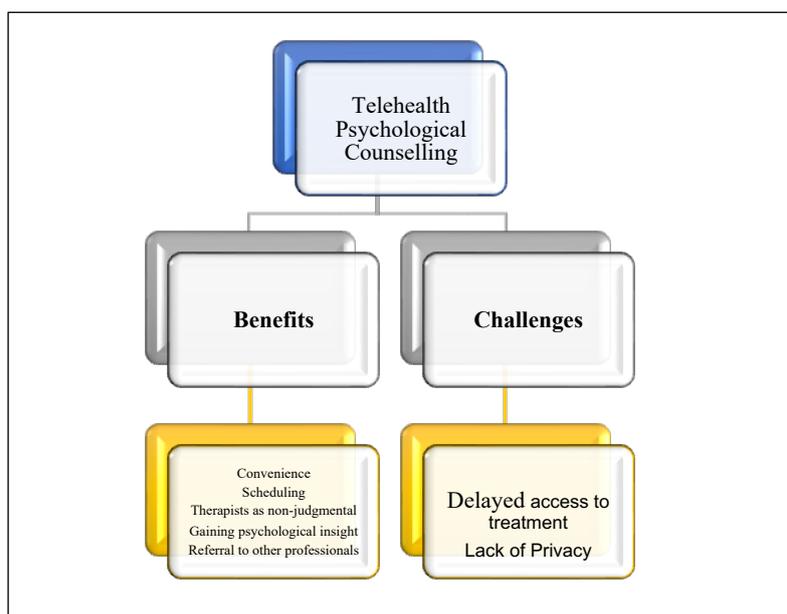


Figure 1. Thematic mapping of themes and subthemes derived from the transcript data.

Gaining psychological insight

An additional benefit that participants noted during the semi-structured interview was that they felt they were able to gain insight into their presenting complaints.

“I would say it benefited me a lot because I was going through a lot. So, it kind of helped me see things differently. I think I was channeled in a certain direction and yeah, things were just going downhill by then I benefited from it.”

(Participant 2, Female, 21 years old)

Another participant shared that the telehealth she received helped in providing insight into her emotional and physical symptoms.

“I didn't know I was suffering from PTSD when I came, I thought it's that thing of depression you know when people preach depression, so, the moment I found out it was PTSD, not depression.”

(Participant 3, Female, 21 years old)

Participant 4 narrated how opening up and brainstorming possible alternatives to her situation led to her feeling better.

“I learned that as a person, you don't always have to deal with your problems on your own. You can talk to someone and then uhm take some things out of your mind. Open up to someone. It makes like the situation much better when

you explain it to someone and then they also help you come up with better ways to deal with the situation because on your own you can come up with solutions on how to deal with the problems.

(Participant 4, Female, 18 years old)

Flexibility in scheduling appointments

This sub-theme on flexibility in scheduling appointments revealed that, based on students' busy and sometimes changing schedules, they appreciated the benefit of rescheduling their set appointment times.

"I think it's really good. Because with me and my busy schedule, we can set up a different time than previously agreed on."

(Participant 2, Female, 21 years old)

Participant 3 conveyed that she was able to have two sessions in the week based on how they set up their appointments.

"Also, with the schedule I could have a session with the psychologist, for two days, if our schedule allowed. I used to have those unplanned appointments, so I'll just call my psychologist and be like, can you please schedule me when you have time? So, I think that was the advantage of it."

(Participant 3, Female, 21 years old)

Convenience

The sub-theme of convenience was noted as a benefit associated with telehealth, with 4 participants noting the convenience of telehealth. The convenience was increasingly noted through participants indicating that it was during the lockdown period, and they were at home, yet still able to access the psychological help that they needed. Participant 2 stated that travelling to see a psychologist could be tricky, however, through telehealth counselling there is no longer a need to travel.

"Having to travel and go see the psychologist. It is a bit tricky. I speak to the person at a convenient time for both of us"

(Participant 2, Female, 21 years old)

Both participants 5 and 7 outlined the convenience of telehealth given the context of lockdown during the COVID-19 pandemic.

"I remember, there was a point where I went home. I needed to go home, and we also had a scheduled meeting, I think that was the benefit because I could be anywhere and still have the meeting."

(Participant 5, Female, 23 years old)

"The advantage was it was lockdown. Therefore, it was nice to still have that kind of support. I was looking forward to the sessions, you know, because being at home, I wasn't doing anything".

(Participant 7, Female, 21 years old)

Participant 3 shared the same convictions as Participant 2 that telehealth counselling was convenient in reducing travel.

"So, for me, it was amazing because it did not want for me to like to go to hospitals or go to whatever location that they will like uh require me to go to meet the psychologist. So, the online thing made my life easier"

(Participant 3, Female, 21 years old)

"You see, even now, you are there maybe in Pretoria? I am here in New Castle for just one hour. Me being in my place doing what I can do. Maybe in Pretoria, it's timesaving. It's fast and effective because I can even do something else."

(Participant 8, Male, 24 years old)

Experiencing compassion and no judgment

This subtheme highlights an additional benefit that participants conveyed in that the interaction they had resulted in them receiving compassion and not being judged.

“I was able to open up with everything that I never told anyone, I felt free around her.”

(Participant 3, Female, 21 years old)

“And also that I think talking to someone you don't know a stranger, especially an experienced person who knows how to deal with people's problems is a good way cause you're not uhm you're more comfortable and you don't have a problem with being judged the person doesn't know you also don't know them.”

(Participant 4, Female, 18 years old)

“I was able to open up about things that I've never actually opened up before.”

(Participant 6, Female, 22 years old)

Most participants had indicated that they were looking to obtain help and find someone to listen to. Based on participants' responses on the benefits that they experienced, it suggests that they felt understood by their therapists.

For challenges of telehealth psychological counselling. Participants described the discomfort and distress concerning setting up an appointment and having a conducive environment to attend the therapy session. Based on this theme, it was evident that some participants struggled to access a safe and comfortable space for the sessions. These experience-evoked frustrations in the participants. The following section elaborates on the specific factors that participants had identified and described as contributing to the challenges they experienced. These challenges appeared to have shaped the students' perceptions, experiences, and overall level of satisfaction with telehealth.

Delayed access to treatment

Participants expressed their frustration with the delay in receiving services. Thus, the theme of delayed access to treatment.

“Yeah, the challenges are that you text, there was a number given. You text that number, and you tell them, can I please see a psychologist, then they will refer you to a life coach which takes time. Honestly, it takes time because I remember I almost stayed, I think about two or one week before I could get transferred to the psychologist because the life coach was busy analysing my case.”

(Participant 1, Female, 24 years old)

“Oh and there's the time frame of setting up meetings. To wait for like two weeks to get a spot. Is something else? Uh-huh. And they took, okay, the process was a bit longer than expected. Because they were overbooked. And it took a bit of time because you have to first go by a health coach. And then the life coach transfers you to the therapist.”

(Participant 2, Female, 21 years old)

Lack of privacy

This sub-theme addresses the challenge of not having a private space to have telehealth counselling sessions. They were at home either with their family members or at a university residence with their roommate. Securing alone time was deemed challenging for the participants. This made participants uncomfortable, and they had to resort to an alternative space.

“I was at home so I had to find a space where I am sitting alone because you can't be attending therapy sessions around people, and also, being at home around people it was also difficult to find a quiet space. Yeah, and then I had to like tell people at home to be a bit quiet. Maybe lock myself in my room.”

(Participant 4, Female, 18 years old)

“And also, in terms of me living at res, I have a roommate. So, I needed to make time and explain to my roommate that I need to have the session, sometimes she would be there and then I’ll be stranded, sometimes she would be in the room, and I wouldn’t be comfortable talking. So, it really wasn’t as great. And I ended up just quitting like the whole thing because I felt it was not working for me.”

(Participant 5, Female, 23 years old)

“I wouldn’t say I felt comfortable because you know, at home, everybody’s at home, you know, and I’m trying to discuss things that I can’t discuss with my family, you know, and now I’m on a call but everybody else can listen, and possibly hear when I’m talking to my therapist, so I wasn’t really comfortable with the idea. I always had to find a spot for myself that is away from other people. In addition, it wasn’t convenient because everybody was at home all the cousins, all the siblings, everybody was at home. However, yeah, I made it work. And I’m just, yeah, I made it work.”

(Participant 7, Female, 21 years old)

Discussion

Telepsychology emerged as a viable solution for providing mental health support for the university population during the pandemic. This study sought to add new insights into the ever-growing field of telepsychology by adding the voices of South African students to the discussion. In our discussion, we will address the common themes that align with existing literature. These recurring themes set a premise for our findings, reinforcing known patterns within the field. By highlighting these similarities, we demonstrate our study’s relevance in the field of telepsychology. Additionally, we will discuss the unique insights that emerged, offering a perspective that will contribute to our current understanding of telepsychology.

Our findings suggest that convenience is a key benefit of engaging in telehealth services, as reported by participants. This aligns with Poh Li et al. (2013), who noted that online counselling allows clients to be able to engage in therapy at a time that is convenient to them. Similarly, Hawke et al. (2021) observed that individuals who had received virtual services reported their appreciation of service accessibility, including convenience, easy scheduling, and expressed appreciation for being able to connect with a professional. Accessibility is critical for healthcare access, and management of presenting symptomatology, especially among college students who not only view telehealth as a convenient and accessible tool, but as a tool to seek mental health support, without facing the stigma associated with help-seeking (Bathje et al., 2014).

The concept of convenience can be understood through the TAM’s construct of perceived usefulness, which measures how telehealth improves access to mental health care and mental health management, making it convenient for the participants amidst the COVID-19 pandemic. Telehealth creates an opportunity for more convenient ways of accessing mental health services and overcoming structural barriers (Molfenter et al., 2021; Hadler et al., 2021). For both client and clinician, this may result in reduced need to travel and savings on associated expenses (Snoswell et al., 2020). For example, a participant in this study who was in a different province from their psychologist reported the convenience of telehealth in continuing to receive mental health support, without the strain of travel. Furthermore, in resource-constrained areas such as African universities, the convenience offered by telehealth is invaluable. A study conducted among students from the University of the Western Cape suggests that some students may find it easier to engage with an online counsellor rather than attending in-person services (Goldschmidt et al., 2021). This was attributed to the immediate accessibility of online counselling since the need to travel is removed.

Individuals in this study highlighted flexibility in scheduling appointments as a significant benefit of telehealth psychological counselling. Flexibility in scheduling results in a decrease in no-shows and cancellations, and supports sustained engagement in telehealth (Sugarman et al., 2021). In the same manner, Hadler et al (2021) reported that students who have access to flexible scheduling options through telehealth are more likely to consistently attend their counselling sessions, leading to better therapeutic outcomes.

Telehealth removes the logistical challenges associated with rescheduling sessions, such as travelling for in-person sessions and adhering to office hours (Malouff et al., 2021). Telehealth psychological counselling enhances accessibility to psychotherapy but also offers increased flexibility (Raju et al., 2024). Participants in this study reported that telehealth allowed them to book appointments outside of traditional office hours, thereby

increasing their engagement with mental health services. This ease of use in rescheduling and flexibility with appointments allows students to choose session slots that better fit their academic and personal schedules.

Individuals in this study were pleasantly surprised when they experienced therapists as compassionate and not being non-judgmental. This resulted in them feeling more comfortable and safer to disclose their challenges. Before we proceed with this discussion, we must define “compassion”, particularly in the field of psychology, wherein words like compassion, empathy, and sympathy are often interchanged. In this study, we consider compassion as a mental state characterized by feelings of warmth, caring, and concern and motivated by an interest in the well-being of another (Bentley, 2022).

Experiencing compassion and no judgment can be well summed up under Rogerian's 3 core conditions required for the success of person-centred therapy (Yao & Kabir, 2023). These core conditions consist of accurate empathy, congruence, and unconditional positive regard. A non-judgmental counsellor eliminates the fear of being judged by the individual sharing their personal experience, and fosters trust and rapport (Choi et al., 2024). Echoing the same sentiments, Ngcobo-Sithole and Mabusela (2022) assert that clients must feel that the therapist is authentic and cares unconditionally for positive outcomes in counselling. For participants in this study, the perceived anonymity and non-judgmental approach created a safer environment for students, encouraging them to express themselves freely. This openness is essential for effective therapy, as it allows for a deeper exploration of problems and diagnoses that are more accurate.

Our findings revealed that telehealth psychological counselling assisted participants in gaining valuable psychological insight into their condition. This included insight into their emotions, behaviors, identity, and presenting symptoms. This observation aligns with McPherson et al. (2020), who reported that engaging in telehealth counselling helps individuals gain better psychological insight into their emotions and thought patterns. Notably, the psychological insight gained from telehealth counselling has been reported to be as effective as in-person counselling are (Mlungu et al., 2024). Additionally, McPherson et al (2020) noted that telehealth facilitates processes in which individuals gain new insights that help them reframe emotions and problems, increase self-awareness, and identify coping mechanisms.

Insight is regarded as a key mechanism of change, and when patients gain insight into their maladaptive interpersonal patterns, they confront their difficulties and find more adaptive ways to interact with others, which eventually improves their relationships and reduces psychological distress (Jennissen et al., 2021). Through treatment, the participants gained new insights that helped them manage their feelings, revise their understanding of depression, and gain coping skills (McPherson, 2020). Participants reporting increased awareness of their psychological conditions highlight how telepsychology has become a platform for mental health education and insight.

A unique finding was the benefit of being referred to other relevant professionals, including psychiatrists and other medical professionals. This theme highlights the unique function of telehealth, bridging gaps. Referrals to other specialists, such as psychiatrists or other departments, facilitate their treatment progress (Singh et al, 2017). Telehealth has been noted to streamline the process of referring through an integrated referral systems that enhance coordination of care and improve access to specialized services (Zhou et al., 2020; Chatterton et al. 2022). Telehealth was also noted to promote greater equity of access to specialist services, which is a critical issue for regional service delivery.

Contrary to the findings of the current study, Perrin et al (2020) reported that the absence of physical presence in the workspace led to a decrease in referrals from medical colleagues. It was noted in this study that the participants found psychiatry referrals to be beneficial, as the referrals provided symptom relief. The benefit of referrals made by another professional is that the patients receive a timely referral, proper referrals, which patients would not have access to, and referrals to specialists they may not have been aware of (Roughley et al., 2021).

Implications and Recommendations

The study findings revealed that telehealth psychological counselling is convenient and increases access to psychological services. Telehealth psychological counselling creates an environment in which clients are comfortable and willing to disclose more information, which in turn assists in accurate diagnosis and tailored treatment. Further, telehealth psychological services are flexible and are available to students any time of the day,

thus improving the access to mental health. In support, Robertson & Robertson, (2020) and Buck et al. (2025) contend that using telehealth psychological counselling facility ensures that multitudes of people access mental health services thereby expanding the mental health services to all. By their very nature, telehealth psychological services also allow even the remotest students who might be on school break or are doing internship away from the university or college to access the services without delay or an extra cost. The provision of telehealth psychological services to the communities around the universities can also go a long way in strengthening university-community ties thereby contributing to mental health wellbeing for all.

The findings suggest that practitioners must ensure clients are well informed and prepared for the teletherapy process, including providing guidelines for referral processes. Lastly, it highlighted the need for both clients and therapists to maintain flexibility in session scheduling. Further research is needed to explore the long-term benefits of telepsychology on patient outcomes compared to traditional therapy methods, post-pandemic. This study did not investigate the therapeutic modalities utilized; therefore, future research could explore how different therapeutic modalities impact client experiences and outcomes. Policymakers should consider subsidizing internet access or providing technological support to marginalized communities to enhance the effectiveness of telepsychology services.

Conclusion

This study highlighted that the majority of the participants perceived telehealth psychological counselling as beneficial. The benefits varied from receiving appropriate referrals and gaining insight into their condition to convenience in scheduling consultation appointments. Telehealth psychological counselling provided flexibility in scheduling appointments. Challenges encountered included delayed access to treatment, lack of privacy, and poor technological connectivity. While these barriers exist, the benefits of telehealth psychological counselling ultimately enhance the overall experience, resulting in higher user satisfaction. It can be concluded that therapists providing telehealth psychological services were able to establish good rapport with their clients and treated them with unconditional positive regard, which facilitated the process of therapy.

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