Why it's wrong to blame online learning for causing mental health issues during COVID-19
8 November 2022, by George Veletsianos, Michael Barbour and Stephanie Moore

Post-secondary student mental health is in crisis: Research shows students' mental health was adversely affected in the pandemic, and this falls on the heels of pre-existing concerns that campuses were struggling to keep up with demands for mental health services.

Over the last two-and-a-half years, many people—including educators, academics, education administrators, politicians and political commentators have argued that online learning is detrimental to student or family mental health or well-being.

Partly or largely on the basis of this perceived relationship, many have urged universities and schools to return to in-person teaching and learning.

What if this relationship doesn't actually hold water?

We gathered and analyzed all the empirical literature we could find that related to mental health and online/remote learning. We discovered that the findings in this literature are mixed, and any assertions about a relationship between online learning and mental health are confounded by research quality and pandemic grief.

Mixed findings, pandemic grief

The three of us have been studying and practicing online learning for over two decades, hold leadership positions in the field, and have been closely following the expansion of remote learning during the pandemic from day one.

We knew that there wasn't a large body of research on online learning and mental health pre-COVID-19, but we also knew that an avalanche of research on remote education appeared since then.

We wondered whether there was something in the research that we were missing, perhaps something new that was inconsistent with our prior experiences and understanding.

Our review of studies found the hypothesis that remote/online learning is detrimental to student mental health and well-being is unsubstantiated because the evidence upon which to judge this claim is both mixed and problematic.

Why is the evidence problematic?

We identified the following challenges with research we reviewed:

- The vast majority of research on this topic was conducted during the pandemic, but failed to control for the pandemic. This is
important because mental health is inextricably linked to the pandemic.

- Most studies judged the effectiveness of online/remote learning by asking people whether they were satisfied with their education. Satisfaction is a poor proxy for effectiveness.

- Some studies found relationships between mental health and remote learning, but asserted that remote learning caused declines in mental health without using the kinds of statistical methods necessary to establish causal relationships. Others found no correlations, and yet still went on to assert causal relationships.

We identified these problems in 75% of the studies we reviewed.

**Nature of learning rarely described**

Equally significantly, the nature of remote or online learning that was studied was rarely described. This matters because online learning is not a monolithic approach. Both its approach and its quality can vary widely: It can refer to students passively watching hours-long pre-recorded lectures, or to people working together in real time in workshop-style groups or everything in-between.

A wide variety of educational methods are possible in online settings. In other words, without controlling for instructional strategy, we can't be certain what kind of online learning was studied.

Of the small subset of studies that did not have serious methodological issues, findings on mental health impacts were mixed, and there isn't enough data to draw any firm conclusions.

Some of those studies looked only at specific populations, such as learners with ADHD or severe anxiety or learners in a specific program (such as nursing or agricultural studies) at a specific institution, and also discussed mental health issues predating the pandemic.

At best, what we can say about online learning and mental health in this context is the following:

Online learning that does not facilitate meaningful interactions and that doesn't include mental health supports—specifically the emergency remote learning that took place during the COVID-19 pandemic that required quarantine and physical distancing measures—may exacerbate feelings of loneliness and isolation.

**How should policy-makers proceed?**

How can universities and colleges respond to student mental health and well-being concerns when a return to in-person learning isn't going to resolve the mental health crisis?

There is some helpful guidance in published research that can help institutions craft responses to student mental health.

For example, one study by two researchers from Seton Hall University's department of Sociology, Anthropology, Social Work and Criminal Justice identified the following as root causes of mental health concerns for undergraduate students impacted by COVID-19:

- Loss and grief: loss of loved ones, loss of health, worry over economic impacts and loss of income, managing one's own illness and symptoms;

- Psychological impacts of how the pandemic was handled by federal, state, local and institutional leaders;

- Changes in personal routines, especially exercise, sleep and eating habits;

- Quarantine and physical distancing, which created feelings of isolation and loneliness.
In a different study, researchers highlighted how post-secondary institutions could offer customized wellness courses, publicized by course instructors, that included a physical activity component.

Importantly, purposeful design of online courses can also help mitigate feelings of loneliness and isolation.

**Simple answers obscure challenges**

Perhaps the most important lesson here is that focusing on the modality of learning (in this case, online/remote learning) obscures the loss, grief and challenges that students face.

Doing so costs us opportunities to identify solutions and supports that can be designed into online, in-person, or blended forms of learning.

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