University Student Counselees' Attitudes and Experiences Towards Online Counseling During the Covid-19 Pandemic: A Mixed Methods Study

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The COVID-19 pandemic has caused many mental health difficulties in university students. However, with the assistance of online counseling (OC), students can now conveniently access support for psychological problems. The study's aims were 1) to investigate counselees' attitudes towards OC at the Psychology Excellence Center (PEC) at Thailand's Mahasarakham University; 2) to compare their attitudes towards OC, categorized by gender, academic year, GPAs, faculty, previous face-to-face counseling (FFC), and OC frequency; and 3) to study the of counselees' experiences towards OC during the pandemic. An explanatory sequential mixed method was used with two groups of participants. The two groups comprised 131 (122 and 9) total counselees who received OC services from the university's PEC. The results showed that the counselees' attitudes towards OC were positive. Also, there was no statistically significant difference in the counselees' attitudes toward OC when categorizing them by gender, academic years, GPAs, faculty, previous FFC experiences, or the frequency of OC. In-depth interviews revealed that participants preferred counseling to FFC and OC.

Keywords: cyber counseling, internet-based intervention, psychological experience, telepsychology, Thailand

INTRODUCTION

In early 2020, Thailand closed its borders to the ravages of the growing COVID-19 pandemic onslaught and saw its 40 million tourists a year tourism economy drop to almost zero (Ruenphongphun et al., 2022). Also, in Thailand, like the rest of the world, there was and continues to be a massive disruption in how education is conducted and delivered. Some studies have further stated that the pandemic created chaos and has led to some of the most extensive changes to educational systems in human history, which has been estimated as affecting 1.6 billion students (94% of the world's total students) in more than 200 countries (Pokhrel & Chhetri, 2021; UNICEF Thailand, 2021). Along with the school lockouts and closures has come a rapid acceleration in change under the '*New Normal*' (Callo & Yazon, 2020; Sittisak et al., 2022).

In Thailand, the New Normal is interpreted as including many things. First, traditional classrooms with rows of seats inches apart were replaced by online learning using various media and digital tools such as smartphones (Kanawapee et al., 2022). Budgets were reallocated, and teachers were expected to quickly grasp and develop teaching tools fitting into the New Normal education (UNESCO, 2020). Learning

pedagogies such as active learning, blended learning, and flipped learning became integrated into learning management systems (LMS) such as Google Classroom and Moodle and social media platforms such as Line and Facebook (Pattanaphanchai, 2019).

Other concepts such as gamification, virtual classrooms, and virtual reality/augmented reality are now being explored deeper and discussed in online learning for subjects such as physics, computer programming, and problem-based learning (Poondej & Lerdpornkulrat, 2019; Wannapiron & Pimdee, 2022).

However, the global COVID-19 pandemic has brought far-reaching changes to all aspects of each person's life (Okan et al., 2020). Along with the social distancing and restrictive movement, high-stress levels, confusion, and added expenses have come in many cases, impacting nearly all facets of an individual's life (Holm-Hadulla et al., 2021).

One aspect that has been slow in its discussion is how these events affect each student's mental health, as mental health discussions in Asia suffer from cultural stigmas where hiding the issues is perceived as better than bringing them into the sunlight for all to see.

Various factors have been identified as affecting an individual's mental health due to the constant threat of COVID-19 exposure. These include anxiety, stress, depression (Jiang et al., 2021), uncertainty about the pandemic's spread, its severity, false information, and the need for social distancing (Zandifar et al., 2020). Additionally, even once the pandemic is gone, it will likely have a long-term impact on individual mental health (Ornell et al., 2020).

Therefore, to study the pandemic's effect on Thai citizens, Thailand's Department of Mental Health (DMH) developed what has been called a 'Mental Health Check-in (MHCI),' which is an online mental health evaluation platform. During a collection period from the beginning of January 2020 to the end of September 2021, 183,974 Thai teenagers' input was evaluated. The data analysis found that 28% of the Thai teenagers that used the MHCI were experiencing high-stress levels, 32% were at risk of depression, and 22% had thought about suicide (UNICEF Thailand, 2021). Also, in the same poll from UNICEF in 2020, seven out of ten young people stated that the pandemic's effects on their life had negatively impacted their mental health. The top concerns were their studies, future education, employment, and their family's financial stability.

Other researchers in Germany have also noted that COVID-19's social distancing and isolation requirements have contributed to many students' loneliness and depression (Holm-Hadulla et al., 2021). Other studies have also noted that online learning is stressful, which in Thailand contributed to a significant student protest at one point (Kanawapee et al., 2022). According to various studies, long-term online learning has also negatively affected learners. Contributing factors have been student dropout rates, poor academic achievement, and violence against minors (Azevedo et al., 2021). Other negative factors include movement limitations or lockdowns in educational institutions, which impair learning.

Yuniarti and Asrowi (2021) have added that vocational students who study online often struggle with mental health issues, lower academic achievement, inaccurate information, and a lack of problem-solving skills (PSS). Other studies have found gaps in the mental health services provided to university students, with just about one in five receiving the proper care, even if the university is well-equipped to offer adequate assistance (Auerbach et al., 2016).

Rongbudsri et al. (2019) also found that only 15.7% of students with mental health challenges had counseling, with poor perceptions and attitudes regarding mental health issues being stated as the main barriers (Arin, 2015). Additionally, in another 2022 Thai Mental Health Department survey concerning Thailand's youth, it was reported that 7.99% were potentially suicidal and 5.34% were potentially depressive, with Covid-19 a key catalyst (Wipatayotin, 2022). Therefore, the unwillingness or inability to initiate proper and effective mental health treatment procedures has become a concern to many.

Mental health awareness and treatment have also been met with several difficult hurdles in Asian cultures due to social and cultural stigmas concerning mental illness (Ran, 2021). Recognizing the stigmas in acquiring mental health services, most today opt for informal counseling over proper care in a professional mental health setting. Influencing factors concerning this are the individual's and the family's

concern for their education and the future (Arin, 2015; Heflinger & Hinshaw, 2010; Rongbudsri et al., 2019).

However, not all is lost, as some authors, such as Sukmawati et al. (2019), have noted that the Internet and digital devices such as smartphones open the door to individuals seeking mental health services in Indonesia. Although people opting to use the Internet for mental health support are currently limited, the numbers are growing due to Indonesia's explosive growth in Internet users. In another study on the Internet's use in providing mental health OC services to students, Arianti et al. (2022) used the term 'cybercounseling' to describe the use of technological innovation in Indonesia to help fight' cyberbullying' (Pimdee & Leekitchwatana, 2022).

These studies are consistent with Davies et al. (2014), who also reported on the Internet's use in providing mental health OC for university student anxiety, depression, and psychological well-being. Similarly, Ebert et al. (2018) highlighted mental health prevention and intervention using the Internet and mobile devices. The authors also noted that the rise in popularity is due to the ease of access, anonymity, effective online assistance programs, and process flexibility. Also, the authors suggested that blending face-to-face approaches with OC could increase the effects of psychological interventions and reduce the costs of mental health treatments.

Furthermore, studies have shown that OC is a valuable tool in crisis management and is a mental health service that is flexible and can be adapted to multiple situations. This is because *telehealth services* can enable professionals to rapidly 'travel' to disaster areas and provide psychological support (Auerbach et al., 2016). Thus, applying technology such as synchronous video conferencing to psychological counseling has enhanced the possibility of continued treatment, even during the lockdowns and travel restrictions associated with most areas during the COVID-19 crisis (Williamson & Williamson, 2020).

In Ghana, Awabil and Akosah (2018) found that both male and female university students were generally receptive to OC and reported that the respondents perceived time savings and convenience as OC's most significant advantage. Similarly, 60 Turkish university students enrolled in a university Guidance and Counseling Program was optimistic about OC but voiced hesitations and concerns about the practice (Bac & Kocab, 2019).

However, the global COVID-19 pandemic has not left many options regarding how to implement student mental health care services. Regulations have been strict concerning the closure of academic and supporting university facilities for over two years. The *Psychology Excellence Center* (PEC) at Thailand's Mahasarakham University instituted Internet-enabled efforts to monitor the epidemic while simultaneously implementing processes and OC services to assure good student mental health.

As a result, starting in November 2021, the PEC started providing OC services using the Google Meet program's video conference format. As faculty and program participants, the researchers wanted to collect and review the data and determine and undertake a quantitative and qualitative study.

The quantitative research method investigated counselees' attitudes toward OC. An analysis was performed on the counselees' experiences from which an interpretative phenomenology analysis (IPA) (Paoin et al., 2020) or hermeneutic phenomenology was used in the qualitative study (Kakkori, 2009).

Finally, the study's aims were determined to be:

1) To investigate the attitudes of counselees towards OC at the *Psychology Excellence Center* (PEC) at Thailand's Mahasarakham University,
2) To compare their attitudes towards OC, categorized by gender, academic year, GPAs, faculty, previous face-to-face counseling (FFC), OC frequency, and
3) To study the experiences of counselees towards OC during the COVID-19 pandemic.

ONLINE COUNSELING OVERVIEW

In this section, issues related to OC are explored as well as the attitudes and perceptions of the OC counselors.

Online Counseling (OC)

For this study, online counseling (OC) refers to the primary mental health counseling made available to undergraduate students at Thailand's Mahasarakham University who exhibit stress, academic anxiety, adjustment, and personal and social problems. OC is conducted with a trained psychologist or professional mental health care counselor who uses various information communication technologies (ICT) such as email, real-time chat, and video conferencing for student OC (Chester & Glass, 2006).

These ideas are consistent with Poh Li et al. (2013), who suggested that because of the Internet, individuals seeking mental health services have a new way to communicate with healthcare professionals from anywhere in the world. However, the authors suggest that given the newest OC, some are concerned with the ethical dilemmas associated with OC.

Ethical concerns were also voiced in research by Chester and Glass (2006), who reported that OC focused on primarily Western-based practitioners who use email to communicate with mainly women clients. Interventions were also reported to be relatively short-term.

Moreover, in Thailand, Vongtangswad (2010) also noted ethical concerns and relationship problems from in-depth interviews with Department of Mental Health OC counselors. However, problems were somewhat offset by OC's advantages which included amenities for the clients, privacy, immediacy, conversation reflection, and the ability to multitask. However, the Thai counselors noted significant problems with ICT and software support platforms.

Furthermore, other studies point to the many advantages of mental health OC services. These include providing counselors access to online support services at low or no cost, while students can access trained mental health professionals quickly at any time, day or night (Herrero Camarano, 2019). Online counseling also helps eliminate treatment challenges, such as transportation limitations and students who need assistance but live in rural or remote places (Navarro et al., 2019). OC is also effective for students with disabilities who suffer travel obstacles or wish to remain anonymous (Jones & Stokes, 2009).

OC locations or working hours are also less critical when compared to face-to-face sessions as OC is accessible, simple to use, and effective (Hadler et al., 2021). Finally, OC has also been reported to help eliminate social stigmas associated with seeking mental health support services (Hadler et al., 2021; Poh Li et al., 2013; Ran, 2021).

Online Counseling Attitudes (OCA)

Numerous studies discuss attitudes toward any particular behavior, with the best predictor of behavior being a person's behavioral intention (BI) (Ajzen & Fishbein, 2005). As a result of learning and experience, people develop attitudes, which include opinions, beliefs, and feelings, with their BI catalyzing each individual's actions.

Other studies have suggested that the way people feel about OC varies depending on individual preferences and perspectives, as well as their demographics, OC knowledge, computer competency, previous experiences, and acknowledging the advantages, ease of use, and convenience of using technology (Lazuras & Dokou, 2016; Teh et al., 2014). A person's attitude about OC (for instance, excellent or poor) can also indicate their intention to attend psychotherapy or OC (Wang et al., 2022). This is consistent with Lazuras and Dokou (2016), who reported that the perceived utility and the session relevance predicated an individual's intent to use OC.

As we have seen, a student's attitude towards OC plays a critical role in the eventuality of one participating. Therefore, efforts must be made to provide an environment that is easy to use, safe and secure, anonymous, and ICT friendly, with minimal costs if institutions are expected to have successful student OC programs for stressed and anxious students.

RESEARCH METHODS

Mixed Methods

Mixed methods are techniques used in research as a systematic process of continually adopting qualitative and quantitative methodologies to find the truth and gain a better understanding over time (Navarro et al., 2019).

The main topics of the integration extended from defining research problems to designing research methodologies, as well as gathering data, analysis, interpretation, and a summary of referrals (Teddlie & Tashakkori, 2009). Moreover, a mixed-methods sequential explanatory design is used in the quantitative and qualitative research processes, which consists of two consecutive phases within a single study (Ivankova et al., 2006).

The qualitative study was performed after the quantitative study to support the interpretation of the findings. The quantitative research was a survey to investigate and compare the university's PEC counselees' attitudes toward OC. The qualitative research used semi-structured online interviews to analyze the experiences of counselees toward OC at the PEC during the COVID-19 pandemic (Paoin et al., 2020).

Research Design

A mixed-methods sequential explanatory design was used for this study. To explain the quantitative outcomes, the design collected qualitative data (Ivankova et al., 2006). The study was divided into two phases. The first phase focused on counselees' attitudes toward OC and the other on their experience using OC. A questionnaire was used to collect and compare counselee attitudes toward OC. The second phase employed online semi-structured individual interviews to analyze the experiences of counselees toward OC.

Participants

The study had two participant groups. The first group comprised 122 counselees (university students) who received OC services from Mahasarakham University's Faculty of Education PEC during the academic year 2021. The sample size was identified using Yamane's sample size method (Yamane, 1973), with a 95% degree of confidence and a 5% margin of error.

Singh and Masuku (2014) have suggested the simplified proportions version of Yamane's formula and tables in which a 95% confidence level and $p = .5$ are assumed, n is the sample size, N is the population size, and e is the level of precision.

$$n = N / [1 + N (e)^2] \tag{1}$$

Nine counselees (students) from the second group were selected through voluntary random sampling.

Research Instrument

The instruments included an attitude questionnaire and a semi-structured interview. Based on literature and several studies and references (Bastemur & E. Bastemur, 2015; Liu, 2015; Teo et al., 2020; Vongtangswad, 2010), the researchers developed an attitude questionnaire for the university's PEC counselees.

The 55 items on the questionnaire were divided into five categories. These included fourteen items (14) for OC counselor characteristics, eleven items (11) for OC counselee characteristics, ten items (10) for OC technology use benefits, ten items (10) for OC therapeutic relationships, and ten items (10) for OC ethical issues (Table 1). A five-level response scale was used to represent strong agreement (5=4.50 – 5.00), agreement (4=3.50 – 4.49), moderate agreement (3=2.50 - 3.49), disagreement (2=1.50 – 2.49), and strong disagreement (1=1.00 – 1.49).

Another instrument used was an in-depth interview using a semi-structured interview. It was divided into three primary sections consisting of 1) initial inquiries to learn more about the participant in general and to establish rapport throughout the interview, 2) in-depth questions, such as investigations about the

experiences of counselors who have benefited from online psychological counseling services provided by the university's PEC, and 3) a final inquiry that requests respondents to clarify any responses from the interview.

Questionnaire Validity and Reliability

Five experts evaluated the questionnaire using the item-objective congruency scale (IOC) index. Research suggests that scores of $\leq .50$ should be removed or revised (Taherdoost, 2016). However, after the IOC analysis, it was determined that all values were between 0.60 and 1.00, thus assuring questionnaire content validity.

Additionally, the researchers requested 30 counselees not part of the target sample to complete the same questionnaire to assure item reliability. After data analysis, the discriminating index of the questionnaire was determined to range from 0.33 to 0.79. Furthermore, Cronbach's α had an average value of 0.97., suggesting excellent reliability (Taber, 2018).

Five experts who reviewed the question structure and made revisions evaluated the quality of the in-depth interview. Further improvement to the questionnaire was made by using OC counselees who had similar experiences to the participants.

Collection of the Data

The collection of the data involved two phases. Phase 1 consisted of counselees that voluntarily participated in the research and were recruited by the researchers through email. The researchers described the study's objectives for collecting data in detail after the counselees confirmed their willingness to take participation. The counselees completed the questionnaire using Google Forms after the researchers requested them to sign a consent form.

In the second phase, participants were selected using a set of predefined criteria or criterion sampling (Moser & Korstjens, 2018). The study has used the following criteria to select counselees: 1) attending Mahasarakham University as a student, 2) having at least one experience using the PEC OC services, 3) being able to recall and describe experiences using those services, and 4) being willing to participate in research and willing to discuss their experiences.

Analysis of the Data

The descriptive statistics analysis of the data used percentages (%), the mean ($\overline{\text{x}}$), and standard deviations (SD). The independent samples t-test was used to compare groups by gender and experience with FFC. One-way ANOVA was used to compare groups by academic years, GPAs, faculty, and the frequency of OC use.

After analyzing the questionnaire data, the authors interviewed the participants/respondents by encoding their identities to protect their confidentiality and establish anonymity. Each respondent's recorded interview lasted between 40 and 90 minutes. The audio recordings had a passcode to access, from which the participants validated the transcribed recordings. The researchers concluded with a verbatim interview transcript that provided qualitative data. The interpretive phenomenological analysis (IPA) data analysis method was applied as follows (Nizza et al., 2021): 1) free/open coding from the perspective of the researcher, 2) phenomenological coding or descriptive coding, 3) combining the main points (theme), and 4) analyzing the structure of the main points.

Ethical Considerations

Throughout the research process, the researchers respected the participant's rights. The Mahasarakham University Human Research Ethics Committee examined the proposal, with all participants required to sign a participation consent form. Additionally, the researchers rigorously adhered to Mahasarakham University's regulations and placed considerable significance on the ethical standards of human research (Paoin et al., 2020).

RESULTS

The study's findings were divided into the following three sections.

The Participant's Distribution

The researchers employed frequency and percentage to analyze the data, and Table 1 provides the analysis findings in which the majority of the study participants were female (84.4%) and were second-year students (67.2%) enrolled in the Faculty of Humanities and Social Sciences (92.6%). Most students had GPAs between 3.51 and 4.00 (45.1%). Additionally, 75.4% of the counselees had no previous FFC experience, and 86.9% had gotten OC at least once or twice.

TABLE 1
THE PARTICIPANTS' CHARACTERISTICS

Variables	Category	No.	%
Genders	Male	19	15.6
	Female	103	84.4
Academic Years	Year 1	29	23.8
	Year 2	82	67.2
	Year 3	6	4.9
	Year 4	5	4.1
GPAs	2.01-2.50	6	4.9
	2.51-3.00	17	13.9
	3.01-3.50	44	36.1
	3.51-4.00	55	45.1
Faculties	Humanities and Social Sciences	113	92.6
	Technology Sciences	5	4.1
	Health Sciences	4	3.3
FFC Experience	Yes	30	24.6
	No	92	75.4
OC Frequency	1-2 times	106	86.9
	3-4 times	14	11.5
	5-6 times	2	1.6

Analysis of the Mean Score of the Counselees' OCA

Table 2 shows that the overall mean scores of counselees' OCA were high during the COVID-19 pandemic ($\bar{x}$ = 4.38, SD = .47). The OC counselor characteristics had the highest average score ($\bar{x}$ = 4.45, SD =.54) when categorized by domain, followed by the therapeutic relationship between OC and the ethical issues of OC therapeutic relationship of OC ($\bar{x}$ = 4.38, SD = .52; $\bar{x}$ = 4.38, SD = .58), the benefits of using technology for OC ($\bar{x}$ = 4.36, SD =.50), and the characteristics of OC counselee ($\bar{x}$ = 4.34, SD =.52).

TABLE 2
ONLINE COUNSELING ATTITUDES (OCA)

OC Attitudes	Items	$\overline{x}$	SD	Level
OC Counsellor Characteristics	14	4.45	.54	High
OC Counselee Characteristics	11	4.34	.52	High
OC Technology Use Benefits	10	4.36	.50	High
OC Therapeutic Relationship	10	4.38	.52	High
OC Ethical Issues	10	4.38	.58	High
Total OC Attitudes' Summations	55	4.38	.47	High

Analysis of the Mean and SD Scores of the Counselees' OCA

Table 3 shows the mean attitude scores regarding gender, academic years, GPAs, faculty, and experience while receiving FFC and the frequency of OC.

Experiences of PEC Counselees to OC During the COVID-19 Pandemic

Table 4 shows the experiences of the university's PEC counselees. The findings from the semi-structured interviews supported the conclusions from the questionnaire. Prominent themes and subthemes vividly clarify the respondents' earlier attitudes emerged.

TABLE 3
COUNSELEE'S OCA STATISTICAL ANALYSIS

Personal Factors			$\overline{x}$	SD	t		Sig*	Comparison results
Genders		Male	4.29	.56	-.880		.381	No significant differences.
		Female	4.40	.45				
Previous FFC experience		Yes	4.34	.51	-.561		.576	No significant differences.
		No	4.39	.46				
Variation Source			SS	df	MS	F	Sig*	Pairwise Comparison
Academic years	Between Groups		.219	3	.073	.323	.809	No significant differences.
	Within Groups		26.709	118	.226			
	Total		26.928	121				
GPAs	Between Groups		.033	3	.011	.049	.986	No significant differences.
	Within Groups		26.895	118	.228			
	Total		26.928	121				
Faculties	Between Groups		.125	2	.062	.277	.758	No significant differences.
	Within Groups		26.803	119	.225			
	Total		26.928	121				
The frequency of online counseling	Between Groups		.082	2	.041	.181	.834	No significant differences.
	Within Groups		26.846	119	.226			
	Total		26.928	121				

Note. SD = Standard Deviation, t = The independent sample t-test, Sig = significance, Sig* = .05, SS = Sum of Square, *df* = degrees of freedom, MS = Mean Square, F = One-way ANOVA.

TABLE 4
SEMI-STRUCTURED INTERVIEW HIGHLIGHTS

Research Objectives	Themes	Subthemes	Counselees' Quotes (Rspdt = Respondent)
OC counselor characteristics	Knowledge and Competency	Counseling knowledge and competency	Rspdt 8: "Counsellors are knowledgeable."
		The capacity to utilize technologies to communicate across the Internet.	Rspdt 8: "Because counselors can offer support and guidance, students can talk about their concerns. Therefore, I now dare to share my difficulties in public."
	Appropriate Personality	Identifying and understanding verbal and nonverbal emotions	Rspdt 9: "Counsellors should be capable of understanding their meanings even though they are not face-to-face."
		Friendliness, confidence, trust, attention, conscientious, respect for privacy, and being non-judgmental	Rspdt 9: "Counsellors have empathy and understanding."
OC counselee characteristics	Technology Competency	The capacity to utilize technologies to communicate using the Internet.	Rspdt 6: "Understanding technology is the first step."
	Appropriate Personality	Self-efficacy	Rspdt 8: "Counselees are ready to understand themselves."
		Self-regulation	Rspdt 4: "Counselees must show up when planned."
		Willingness to solve student problems	Rspdt 7: "Students should seek support in finding the solutions to the real problems."
		Courageous	Rspdt 1: "Counselees are prepared to discuss anything."
OC technology use benefits	OC Advantages	Ease of use	Rspdt 3: "Utilizing Google Meet is simple."
		Convenience	Rspdt 1: "Everything is simple and comfortable."
		Savings in both time and cash	Rspdt 2: "OC helps save time." Respondent 6: "OC helps save money."
		Anonymity	Rspdt 1: "OC provides a place where no one recognizes me. Therefore, I want to ask for assistance."
		Counseling with specialists	Rspdt 3: "OC allows me to engage an experienced professional and get further assistance."
	Flexibility	Flexibility in scheduling	Rspdt 1: "Using the internet for OC allows me to seek assistance anytime and anywhere."
		Flexibility in choosing places	

		Counselor selection flexibility	Rspdt 1: "I can choose whether to consult with a peer counselor or a professional"
OC therapeutic relationship	Communication	Two-way verbal and nonverbal communication	Rspdt 9: "If I want to communicate something, I should be clear and precise in my tone of voice."
		Feedback	Rspdt 2: "The counselor joined me for feedback and listening.
	Interpersonal Relationships	Positive interpersonal relationships	Rspdt 7: "I have a nice feeling about the relationship."
		Interaction	Rspdt 2: "The counselor made an effort to interact with me and respond to what I said in our conversation."
OC ethical issues	Ethical Issues	Signing the consent form	Rspdt 1: "There is a form for consent."
		Obtaining clarification of limitations and conditions	Rspdt 5: "OC allows me to clarify any restrictions, risks, or other concerns, including confidentiality."
		Appropriate risk assessment	Rspdt 8: "OC is not at all risky, in my opinion."
	ICT Data Confidentiality and Security	Confidentiality	Rspdt 1: "I respect the profession as well."
		Security of data	Rspdt 5: "I am not concerned about data breaches."
	Counselors and Counselees Identification	Identification of counselors	Rspdt 6: "Given the prevalence of criminals nowadays, I believe it is crucial to confirm the counselor's identification."
		Identification of counselees	Rspdt 6: "Because some students do not want to divulge their identities, their identity should be anonymous."

Note: Rspdt = Respondent

DISCUSSION

Based on a study of counselee attitudes towards OC, the researchers developed a 55-item questionnaire to query the opinions of 122 students who had participated in the OC process and volunteered to participate. The findings revealed that OC sessions of students were at a high level in every aspect. Further findings and discussion are presented in the following:

The Study's Mahasarakham University's PEC Uses Mental Health OC Outcomes

From the resultant closure of Thailand's Mahasarakham University during the COVID-19 pandemic and its physical student support facilities, the Faculty of Education merged its *Psychology Excellence Center* (PEC) and mental health counseling services into online counseling (OC) format due to the inability to provide face-to-face services. After that, starting in November 2021, the PEC started providing OC services using the Google Meet program's video conference format and services through anonymous email accounts.

This was consistent with other studies that have determined that OC and *telemental health* can effectively replace traditional face-to-face services, especially during the forced closures of facilities during the COVID-19 pandemic (Yurayat & Seechaliao, 2022). Additionally, it has been recognized that the number of people seeking OC has substantially increased throughout the pandemic, which is expected to

continue as there are no alternative ways of treatment during the pandemic (Vera San Juan et al., 2021) and even after the pandemic 'ends' (Pierce et al., 2021).

These observations are confirmed by this study's counselees, who also mentioned the advantages of OC and the proactive strategies implemented to address security concerns and ICT difficulties. Moreover, most university students prefer OC and have positive attitudes toward it (Awabil & Akosah, 2018), believing that OC is effective. OC also increases the likelihood of accessing treatment for mental health problems during moments of crisis when traditional services are not practical (Knechtel & Erickson, 2020). It also helps university students deal with fundamental challenges (Tannous, 2017).

OC Counsellor Characteristics

Of the five aspects evaluated, OC counselor characteristics were rated as most important by the respondents ($\bar{x}$ = 4.45, SD = .54). This includes having training in psychology and counseling and having a personality appropriate for being a counselor, including the capacity to recognize and understand emotions, a willingness to support others, friendliness, trustworthiness, the skill to establish relationships with others, and the counselors' responsibility to protect the student's confidentiality (Yurayat & Seechaliao, 2022).

Because OC involves two-way communication between the counselor and the counselee, counseling is a relationship-based process. Counselors are professionals with expertise, skills, and qualifications that empower the counselees in exploring their thoughts, feelings, behaviors, and life's purposes to realize challenges or concerns, search for solutions using their resources, and then activate the solutions to live a more productive and fulfilling life (Yurayat & Seechaliao, 2022). The quality of the relationship and genuine interest the counselor develops with the counselee indicates counseling or psychotherapy success (Luke, 2014).

Moreover, according to Vongtangswad (2010), OC counselor characteristics should include 1) knowledge and competence in counseling, 2) appropriate personality traits, such as the ability to comprehend and understand emotions and non-verbal communication, 3) language abilities, friendliness, and trustworthiness, 4) being attentive and respectful of privacy, and being non-judgmental. Since the counseling is 'online,' counselors are now expected to be 'digitally literate' with their ICT infrastructure, digital devices, and supporting software.

OC Counselee Characteristics

Students should be open-minded to the OC process and its abilities to help them cope with their difficulties. They should find and quiet and comfortable place for OC. They should be able to regulate and control their actions and be on time for their OC sessions. Like their counselors, they should have ICT proficiency and work on developing their digital literacy (Yurayat & Seechaliao, 2022).

The client must be willing to pursue psychological support and have a positive attitude toward the Internet. This encompasses both computer usage and self-efficacy with using a computer because OC attitudes may be affected by personal norms and beliefs about the Internet and psychological treatment (Teo et al., 2020; Yurayat & Seechaliao, 2022).

OC Technology Use Benefits

The ease of use, convenience, flexibility in scheduling and location, and choice are all advantages of using OC technology. There are also time and cost savings, anonymity, and the ability to connect with professional counselors from remote locations. Due to ICT and the Internet's rapid growth, OC services are recognized for their time savings, convenience, and privacy protection. This is in conjunction with contemporary society's expanding need for mental health.

These ideas are consistent with Bastemur and Bastemur (2015), who have reported that utilizing an online system for counseling is a convenient way to save time, access information quickly, get counseling online, ease discussing complex issues, increase a sense of confidence, and provide a more effective way to interact with clients. Furthermore, mental health counseling stigmas may get lowered, allowing more to seek professional help (Lamela et al., 2020).

Counselees' OCA Categorized by Gender, Academic Years, GPAs, and Faculties, Previous FFC Experience, and OC Frequency

The counselees' questionnaire responses showed little statistical significance between the genders, academic years, GPAs, faculties, FFC experience, and OC frequency. The findings suggest this is because of the Covid-19 pandemic, with anxiety, depression, and stress all being experienced by all higher education students, including students of all genders, students of all ages, students who have previously had difficulties in numerous areas of life, and students who have never had problems before.

Student mental health problems can also be accelerated by unexpected lifestyle changes due to social distancing or even home quarantine orders (Jiang et al., 2021). Other factors can include the elimination of the traditional classroom and the need for classes online (Yurayat & Seechaliao, 2022). Other anxieties and stress factors include anxiety over becoming infected, the consequential uncertainty about the future, and a highly regulated and restricted life due to the pandemic (Holm-Hadulla et al., 2021). This is consistent with Foon et al. (2020), who added that counselees' attitudes were influenced by demographic factors, such as age and sex.

OC Therapeutic Relationship

Colbow (2013) mentioned that the therapeutic relationship between OC counselors and counselees needs to maintain strong relationships. The therapeutic relationship of OC consisted of 1) two-way communication, both verbal and non-verbal, 2) a significant relation, 3) feedback, and 4) collaboration. Throughout the counseling process, there needs to be interaction and reflection. Counselors must also give counselees recommendations and suggestions.

OC Ethical Issues

Multiple studies have explored ethical and legal issues with providing mental health OC services (Chester & Glass, 2006; Teo et al., 2020; Vongtangswad, 2010; Yurayat & Seechaliao, 2022). From these studies, consistent themes emerge, including the need for a signed consent form from the provider to the counselee. Patient understanding of the limitations and responsibilities of everyone involved, as well as the need for anonymity and a security policy for ICT use. Also, to ensure accurate risk analysis, clarification of the rights and obligations of OC must be outlined as well as having a system in place to identify that the online counselors and counselees are who they say they are.

CONCLUSION AND RECOMMENDATIONS

The quantitative and qualitative research determined that counselees had favorable attitudes toward OC, with a counselor's characteristics determined to be most important to the counselees. One could claim that an online counselor's effectiveness depends on positive characteristics, and as a result, relevant organizations should set specialized training programs to maximize each counselor's potential. To develop increasingly qualified and confident counselors for OC, the training program should transmit knowledge and understanding, allowing for practicing OC techniques and enhancing the capability to use networked information technology. To deal with these difficulties, the student counselees should seek assistance from their university or other mental health departments when experiencing anxiety, depression, or stress. Mahasarakham University's *Psychology Excellence Center* (PEC) OC crisis center has adapted to various situations that have confronted it. It has also allowed mental health professionals the opportunity to meet the needs of the students under the current pandemic problems and restrictions. Online counseling supports students in minimizing their stress and making it easier for them to determine whether to seek assistance. While some students are happy with and more motivated by OC, others might see it as a transitional step to future face-to-face treatment of psychological problems. The study's findings revealed that although the university PEC counselees had positive attitudes toward OC, in-depth interviews showed that they preferred a combination of FFC and OC. Other similar studies support this as well. Therefore, universities need to develop a system of counseling that can be implemented according to the needs of the service clients, making OC more accessible, convenient, and straightforward.

LIMITATIONS

The Mahasarakham University's PEC launched its online counseling services during the height of the COVID-19 pandemic in 2021, with limited ways to reach out to the student body. Slow and inconsistent Internet connections exacerbated this. As physical classes were impossible for training counselors, some staff members had rudimentary training.

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