



Research Article

School Counselors' Self-Efficacy in Addressing Adolescents' Mental Issues in the After-COVID-19 Era

Loukia Dimitriou^{*a}, Rita Panaoura^a

[a] Frederick University, Limasol, Cyprus.

Abstract

The unanticipated arrival of the COVID-19 pandemic has upset thousands of adolescents worldwide, whereas shifts to remote schooling have minimized their access to school-based support. This study focused on three research questions: (a) evaluate the impact of COVID-19 restrictive measures on adolescents' mental health? (b) appraise their self-efficacy to help adolescents cope with the challenges? (c) Assess post-pandemic pupil behavior and their self-efficacy beliefs. It aimed to resource creative school-counseling approaches to improve youth resilience. Findings showed that counselors regarded generalized worry, concern about academic studies and job development, and increasing internet use as adolescents' most important psychological/behavioral issues. Most counselors felt efficient in their professional development, teamwork, cross-cultural sensitivity, leadership, assessment, personal and social growth, and development. Counselors who evaluated pupils as high/medium in generalized anxiety, depressive symptoms, academic/career development, and excessive internet time evaluated themselves significantly higher on all factors of the self-efficacy scale compared to those who assessed students as medium/low on the aforementioned factors, who scored significantly lower in self-efficacy.

Keywords: adolescents; anxiety; counselors; Covid19; resilience; school counseling; self-efficacy.

Table of Contents

- Method
- Results
- Discussion
- Limitations and future research suggestions
- References



Psychological Thought, 2024, Vol. 17(1), 271-298, <https://doi.org/10.37708/psyct.v17i1.903>

Received: 2023-09-27. Accepted: 2024-02-24. Published (VoR): 2024-04-30.

Handling Editor: Natasha Angelova, South-West University "Neofit Rilski", Blagoevgrad, Bulgaria. *Corresponding author at: Frederick University, Cyprus. E-mail: luciad61@gmail.com



This is an open access article distributed under the terms of the Creative Common Attribution License (<https://creativecommons.org/licenses/by/4.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

The sudden arrival and rapid spread of the COVID-19 virus have upended the lives of children and adolescents worldwide in 2020 and 2021. According to the [United Nations 2030 Agenda](#), government mandates to contain the virus's spread resulted in school closures that kept 90% of all students out of school, presenting a new social reality. In Greece and Cyprus, the in-school operation of all public and private schools was suspended from March 11, 2020, to May 21, 2020, and from November 16, 2020, to February 8, 2021. Schools switched to remote and hybrid methods and applied synchronous and asynchronous methods for all the teaching and assessment. Adolescents and parents went through hard times during the school closures as they were left to their own devices to manage distance learning with little help and supervision from school authorities ([UNESCO, 2020](#); [Courtney et al., 2020](#)). Recent research findings reporting on the pandemic's aftermath on students of all ages raise increasing concerns about mental and behavioral difficulties ([Sheasley, 2021](#)). While schools were operating remotely, students had no access to the critical support of school counselors ([Meyers, 2020](#)). School counselors have faced many pandemic-related challenges in providing much-needed support and services to students.

At the time of this study, there was still limited research to systematically examine how COVID-19 affected school counselors' ability to help their advisees cope with the new challenges ([Strear et al., 2021](#)). According to [Savitz-Romer \(2021\)](#), a binary approach is necessary to comprehend the possibilities and limitations of school counselors' modus operandi during the pandemic, one that considers their experiences and the organizational context that forms the framework of their work. In this study, based on Bandura's concept of self-efficacy, the school counselor's self-appraised knowledge and confidence in applying those skills were addressed, which would support their students upon returning to their schools after a long period of remote learning.

The Challenges of Pupils and School Counselors in Times of COVID-19

In Cyprus and Greece, like in many other Western countries, the government-mandated restrictive measures to contain the virus resulted in lengthy school closures and a shift to distance learning. Pupils confronted new and additional challenges regarding accessing school-based resources and support (Meyers, 2020), consequently increasing students' need to receive support.

Long-term effects on children, adolescents, and youth are shown to be caused by the extreme measures practiced during the Sars-Cov-2 pandemic and the consequent rapid changes to our way of living, as indicated by recent studies. The restrictive measures to contain the spread of the virus, such as the lockdowns and the consequent social isolation that people experienced, led to home, family, and peer-group issues, fear of death and illness, and a feeling of uncertainty.

Adolescents were burdened by new stressors such as the fear of infection, worries about their parents' work and financial situation, death, and sudden separation from their peers, teachers, and counselors (Wang et al., 2020; Brooks et al., 2020; Jones et al., 2020). Mental health issues such as depression, anxiety, and somatization of symptoms (sleep problems and deprivation) could harm students' motivation for learning and academic achievement and contribute to school conduct issues (London & Ingram, 2018; Talmus, 2019). Youth Truth conducted a large-scale study in 2021, showing that those pupils who felt more affected by COVID-19 reported having less positive learning and well-being experiences. Studies with European youth confirm these findings, emphasizing that the pandemic primarily affects individuals between 18-30 and children and adolescents. Results by Gómez-Salgado et al. in Spain (2020), Mazza et al. in Italy (2020), Branquino et al. in Portugal (2020), and Hyland in Britain (2020) have all shown a significant negative correlation between lower age and symptoms of anxiety, depression, and psychosomatic disorders. The importance of psychological issues in children and adolescents becomes imminent if one considers the long-term effects of stressful experiences on their later lives (McLaughlin et al., 2010).

Returning to school in September 2021 presented new challenges for adaptation and learning following the prolonged absence of students and faculty from traditional learning/teaching environments. Children and adolescents, especially those in vulnerable groups already experiencing problems in school due to health issues or stressors related or unrelated to the pandemic, needed additional support (Griffith, 2020). Students who suffered significant emotional and physical disengagement also needed more care (Jiao et al., 2020).

School counselors are trained to support and promote adolescents' psychosocial and academic development and prepare them to transition to postsecondary education. However, during the lockdowns and school closures, school counselors were challenged in many ways in performing their work-related duties remotely and as human beings facing challenges in their personal and family lives. [Savitz-Romer et al. \(2021\)](#) reported on data from the Covid-19 National Survey of School Counselors, conducted in the Summer of 2020 with 1,060 participants and eleven follow-up focus groups with 47 survey respondents. Their findings showed that some barriers to school counseling during the pandemic's peak were bureaucratic, for example, reduced time in students' schedules for meeting with counselors and missed opportunities for connecting with hard-to-reach students. Amongst the numerous organizational constraints that school counselors encountered while performing their duties was a lack of guidance on remote counseling and a barrage of administrative tasks.

Data from the study by [Savitz-Romer](#) and associates showed that in the USA, school counselors were, upon their return to physical presence schooling, able to adapt, for the most part, to the new challenges presented by the COVID-19 pandemic to bypass the constraints and to capitalize on their autonomy (2021). Nevertheless, school counselors need to be trained and access new resources and organizational support to effectively feel ready to support students, especially those impacted the most by the pandemic.

The Construct of Self-efficacy and its Importance for School Counselors

The profession of school Counselor emerged out of the need to provide students with support for their personal, social, academic, and career development ([Schmidt, 2008](#)). School counselors have the task of facilitating students' integration into their community and establishing a positive contribution to the workforce ([Gysbers & Henderson, 2006](#)). Even before the onset of the pandemic, emerging social, political, economic, and cultural changes have impacted the role of school counselors by requiring them to address a wide variety of student and societal needs. These included bullying, negative coping skills, and employability in a highly competitive job market, factors that had a potentially negative impact on student success in school ([Coleman & Yeh, 2008](#)).

According to [Bandura \(1995\)](#) and [Larson & Daniels \(1998\)](#), self-efficacy is essential to counseling and coping with change. Self-efficacy reflects the person's belief that he/she can perform those behaviors necessary to achieve specific results ([Bandura, 1977, 1986, 1997](#)) and his/her confidence in the ability to control his/her motivation and behavior. Following Bandura's

introduction of the notion of self-efficacy, repeated investigations using a variety of tasks in the 1980s revealed that a person's assessments of his/her potential to accomplish desirable results are strongly tied to successful task performance. When self-efficacy beliefs were low, people exerted less effort for shorter periods and worried more about failing. Self-efficacy is considered essential in any circumstance where people are required to exhibit or accomplish a set of activities to a high level of skill (Barling & Abel, 1983; Lee, 1983; Williams & Watson, 1985).

School counselors must be competent and proficient in responding to their advisees' complex and diverse needs by providing efficient services according to counselors' professional guidelines (American Counselor Association, 2005; ASCA, 2019). Competency entails constant awareness of new scientific proof approaches and ongoing training to enhance abilities and skills. Furthermore, school counselors work hard to remove impediments to all students' accomplishments and growth (ASCA, 2019) while seeking techniques that optimize the growth and achievement of all pupils.

In 2005, Bodenhorn and Skaggs created the SCSE (School Counselor Self-Efficacy Scale), giving theory and research on the effects of self-efficacy on school counselor performance a new perspective. Applying Bodenhorn's Scale led to more research on the effects of self-efficacy in school counseling (Bodenhorn & Skaggs, 2005; Bodenhorn et al., 2010). For example, Woods (2009) demonstrated that the length of school counselors' experience increased their self-efficacy. Bodenhorn et al. (2010) demonstrated that the higher the levels of counselors' self-efficacy, the higher their perception of equity within the school. Moreover, Owens et al. (2010) identified a positive correlation between cultural acceptance self-efficacy and school counselors' multicultural competence. Clark's findings (2006) connected school counselors' self-efficacy with the frequency with which they used programmatic service delivery interventions. These and other findings highlight the significance of self-efficacy in school counselors' job performance.

Purpose and Rationale of the Study

School counselors' assessment of adolescents' mental and behavioral states following the long school closures during the peak of the COVID-19 pandemic, as well as their self-reported beliefs on their self-efficacy to deal with these new challenges, were investigated in the present study. Three research questions were established to examine how the new pandemic challenges may have affected their self-efficacy beliefs concerning the demographic characteristics of the counselors. It is believed that the findings will shed light on the social circumstances that affect the students' behavior and the counselors' self-efficacy beliefs, enabling us to suggest more

efficient ways to face difficult and unexpected adolescents' mental behavior. Resourcing effective and creative school counseling approaches to improve and maintain the psychological resilience of the youth is the aim of this study. Specifically, three research questions were posed:

1. How do middle- and high-school counselors evaluate the after-effects of the COVID-19 restrictive measures on adolescents' mental and behavioral health, as measured by the Counselor Adolescent COVID-19-Impact Tool?
2. How do middle- and high-school counselors appraise their self-efficacy, as measured by the five-factor School Counselor Self-Efficacy Scale?
3. How do counselors' assessments of pupils' post-pandemic mental and behavioral states affect their self-efficacy beliefs in the five factors of the Self-Efficacy Scale?

Method

Procedure – Data collection

A web-based design was used to conduct the survey with school counselors in Cyprus and Greece. An online questionnaire was developed using Google Forms as the survey platform. Instruments included a PIF, the CACIT, and Bodenborg's Self-Efficacy Scale. The ethics approval came from the Resilience Research Unit Council of the Department of Psychology and Social Sciences at Frederick University in Cyprus. The survey link was sent directly to members of the Hellenic Society of Counseling and Guidance (ELESYP) and the Cyprus Counseling and Vocational Education Service (YSEA), both of which fall under the jurisdiction of the Ministry of Education, Culture, Sports, and Youth. The survey was conducted from September 1st to September 30th, 2021. A brief introduction to the study's scope and objectives, along with instructions on completing the questionnaires and a consent form, were included in our questionnaire. The demographic data were age, gender, educational attainment, counseling specialization, country of residency (Greece/Cyprus), and service delivery area (urban/rural).

The sample was comprised of eighty school counselors ($N = 80$, $n = 49$ Greek and $n = 51$ Cypriot), with a gender split of 70% male and 30% female. The largest age group was made up of counselors between the ages of 35 and 54 (63.8%), followed by those aged 35 to 44 (31.3%) and 45 to 54 (32.5%). Younger counselors (age 25–34) comprised 18.8% of the sample, whereas senior counselors (age 55–64) made up 17.5%. As for their educational level, 77.5% had a postgraduate (MA) degree, and 12.5 had a Ph.D. in Counseling. Just 10% of the participants had

only a B.A. degree. Eleven or more years of professional experience were held by half of our subjects (51%), while 11.3% had six to ten years, and 37.5% had five years or less of experience as school counselors.

Measures

School Counselors' Self-Efficacy Scale (SCSE)

The first questionnaire, the SCSE, comprised role-specific statements asking the respondents how confident they were in carrying out the task mentioned in the affirmations. Participants rated their confidence level on a Likert scale with five possible responses—varying from "Not Confident" to "Highly Confident." According to Mullen (2015) and Hair et al. (2006), both reliability and internal consistency of the total SCSE scale (43 items) were strong (Cronbach's $\alpha = .959$). The five emerging subscales were (i) Individual and Social Development (items 18, 20, 21, 23, 8, 19, 25, 27, 17, 24, 35). (ii) Leadership and Assessment (items 38, 39, 41, 36, 37, 3, 40, 5, 30). (iii) Career and Academic advancement (items 14, 12, 16, 11, 13, 33, 6). (iv) Collaboration (items 32, 2, 9, 10, 1, 7, 4, 43, 34, 42, 15) and finally (e) Cultural Awareness (items 29, 28, 26, 31). Applying Cronbach's alpha, Bodenhorn et al. (2010) estimated the reliability of the five SCSE subscales as follows: Individual and Social Development (.88), Leadership and assessment (.90), Career and assessment (.84), Collaboration (.82), and Cultural Awareness (.68).

The Counselor Adolescent Covid-Impact Tool (CACIT)

The «Counselor Adolescent Covid-Impact Tool» (CACIT) was designed for the purpose of this study. The instrument comprised seventeen items, each dealing with a distinct aspect of potential psychological anguish. These statements were created by combining relevant literature, the DSM-V (2013), and research findings from several authors who demonstrated that COVID-19-related government curfews resulting in social isolation, domestic problems, and ambiguity could be a source of mental health issues such as anxiety, depression, and sleep loss. These mental states could have adversely affected adolescents' academic achievement motivation, leading to problematic school behavior patterns (London & Ingram, 2018; Demetriou et al., 2022; Talmus, 2019). Trauma, suicidality, technology addiction, drug and alcohol misuse, family dysfunction, and other mental health concerns have been exacerbated (Gallo, 2017; Hou et al., 2019; Wan, 2020). The school counselors were asked to rate how much they agreed, disapproved, or entirely disagreed with the appearance of behaviors such as generalized fear, anxiety about post-secondary education and career advancement, and the desire to engage in social/peer

interactions, interest to advance school achievements, compulsive behaviors (alcohol, drugs, and internet abuse) in their adolescent advisees. The percentages of agreement or disagreement were used to distinguish adolescents' three most outstanding mental states as reported by their school counselors.

Data analysis

Data was cleaned, coded, and scored using Excel. The reported confidence intervals were 95%. SPSS 25 was used for the analyses. Specifically, descriptive statistics were employed to describe and assess the demographic features of our sample, encompassing the mean, standard deviation, frequencies, and percentages. The p -value (significance level) was set at $p < .05$ to examine the statistically significant differences. Analysis of Variance (ANOVA) was used to detect statistically significant differences in the seventeen statements about the counselors' age, educational background, and work experience. The t -test means comparison was used to compare the means between the participant's demographic characteristics (gender, area of practice, urban/rural, country of practice). Furthermore, a Kaiser-Meyer-Olkin (KMO) and Bartlett's Test were used to assess the adequacy of our sample data for exploratory factor analysis. The KMO test for the CACIT yielded a score of 0.804 ($p < .05$), and for the SCSE, a score of 0.887 ($p < .05$). After the content analysis of the statements loaded to the factor derived from the factor analysis (factors with eigenvalue >1), new variables were conducted, and their means were estimated for further analyses.

Results

Descriptive statistics of the CACIT

The loadings of the statements were all high (above 0.500), indicating that the data fit the expected theoretical model. The content analysis indicated that for the first factor, the items expressed anxiety, the second factor concentrated on social withdrawal, the third on school achievement and addictive behavior, and the fourth on depression and delinquent behaviors. Table 1 shows the loadings of the four factors identified after the exploratory factor analysis, accounting for 67.8% of the overall variance (with eigenvalue >1). Table 2 shows the descriptive statistics for the four factors.

Table 1.*Factor loadings of the item of the CACIT questionnaire*

Items	Component			
	Factor 1	Factor 2	Factor 3	Factor 4
1. Generalized Anxiety	.650			
2. Anxiety about academic studies	.936			
3. Anxiety for career development	.896			
4. Withdrawal and Loneliness		.607		
5. Sleep disorders		.651		
6. Decreased interest in socialization		.760		
7. Decreased interest in outdoor activities		.757		
8. Decreased Concentration			.608	
9. Increased Time Spent Online			.521	
10. Addictive Behaviors			.529	
13. Indifference School Achievement			.777	
14. Decreased Emotional Wellbeing			.612	
11. Excessive use of Alcohol/Drugs				.677
12. Delinquent Behaviors				.639
15. Depressive Symptoms				.709
16. Suicidal Ideation				.834
17. Generalized Fear				.620

¹ Demetriou et al., 2022.**Table 2.***Descriptive Statistics of the Four Factors*

Factors	N	Minimum	Maximum	M	SD
F1 Anxiety Factor	80	1.00	4.80	2.87	0.81
F2 Social Withdrawal Factor	80	1.00	5.00	3.29	0.87
F3 School Achievement/Addictive Behaviors	80	1.50	5.00	3.59	0.78
F4 Depression / Delinquent Behaviors Factor	80	1.00	5.00	3.90	0.85

²

The means for the four factors were as follows: (F1): *Anxiety Factor* ($M = 2.87$, $SD = 0.81$), (F2): *Social Withdrawal and Loneliness factor* ($M = 3.29$, $SD = 0.87$). (F3): *School Achievement and Addictive Behaviors* ($M = 3.59$, $SD = 0.78$). (F4): *Depression and Delinquent Behaviors Factor* ($M = 3.90$, $SD = 0.85$) (Demetriou et al., 2022).

¹ Table was retrieved from Demetriou et al. (2022) as the findings are relevant and belong to the broader unit and research project.² Table 2 was retrieved from Demetriou et al. (2022), as the findings are relevant and useful for comparisons and results of the current research, which belongs to a broader unit and research project.

Research question 1: How do middle—and high-school counselors evaluate the aftereffects of COVID-19 restrictive measures on their advisees' mental health?

When addressing the first research question, the answers of the subjects in the seventeen statements of current CACIT questionnaire were grouped as 'agree' or 'agree completely,' revealing the following tendencies in our sample:

Anxiety Factor (F1): Generalized anxiety was believed to be present by 82.7% of our participants concerning their pupils (item 1), with 83% of the counselors noting heightened anxiety among their advisees regarding their college education (item 2). Furthermore, 79% of the sample observed increased anxiety in their pupils concerning career development (item 3).

Social Withdrawal/Loneliness Factor (F2): An increased withdrawal tendency from peers and family members was reported by more than half of the counselors in the sample (53%) (item 4). Additionally, 43% observed a decrease in adolescents' interest in outdoor activities (item 7) and general difficulties in sociability (item 6), while 36% noted sleeping pattern disorders among their advisees (item 5).

School Achievement/Addictive Behaviors Factor (F3): 74% of the school counselors considered that the students under their supervision had an increased online presence (item 9), and 56% estimated that adolescents displayed decreased concentration issues (item 8). A tendency towards elevated addictive patterns was perceived by more than half of the counselors (57%) among teenagers (item 10). Furthermore, 48% and 53% of counselors noted increased indifference towards school achievements (item 13) and reduced emotional well-being (item 14) in their students, respectively.

Depression/Delinquent Behavior Factor (F4): A relatively high percentage of counselors (40%) detected in their pupils' behaviors depressive symptoms and generalized fear reactions (items 15 and 17, respectively). On the other hand, only 21% and 19% of our participants (respectively) believed that their advisees were inclined towards delinquent behaviors or substance abuse (items 12 and 11), and even fewer counselors (11%) claimed that adolescents suffered from suicide ideation (item 16).

Following the government-mandated COVID-19 physical and social restrictive measures and the long school closures, our analysis of the frequencies of the school counselors' responses on the CACIT showed that they considered the most prominent behavioral and mental issues of their teenage advisees to be generalized anxiety (82,7%), anxiety for academic studies (83%), anxiety

for career development (79%) and last, but not least, increased time spent online (74%). Comparing the sample's demographics and the counselors' responses to the four-factor statements (t-test, $p < .05$) revealed no statistically significant variations between counselors' gender, professional locations, or ethnicity (Greek/Cypriot). Moreover, a two-way ANOVA study comparing the means of participants' ages, education, and professional experience revealed no statistically significant differences in their judgment of their adolescent advisees.

Descriptive statistics of the SCSE

Factor analysis of the 43 statements of the SCSE questionnaire using the Rotated Component Matrix (Varimax with Kaiser Normalization) indicated five factors. Following their content analysis, they were posed as F1: Individual and Social Development; F2: Leadership and Assessment; F3: Career and Academic Advancement; F4: Collaboration; and finally, F5: Cultural Awareness. Table 3 shows the loadings of the five factors identified after the factor analysis, accounting for 73.66% of the overall variance (eigenvalue >1).

Table 3.

Factor loadings of the items of the SCSE questionnaire

Items	F 1	F 2	F 3	F 4	F 5
3. Analyze Data	.588				
6. Consult and collaborate w/ teachers, admins & parents	.685				
10. Conduct interventions w/ parents, guardians, and families	.628				
11. Teach students time and task management skills	.676				
13. Explain to pupils, parents & teachers learning styles & school performance	.506				
14. Deliver age-appropriate programs on the world of work	.633				
15. Implement a program enabling students to reach career decisions	.658				
18. Model and teach conflict resolution skills	.591				
20. Change situations where individuals/groups treat others in disrespectful ways	.531				
21. Teach students effective communication skills	.799				
22. Follow ethical & legal obligations regarding SC	.639				
23. Guide students in techniques to cope with peer pressure	.801				
24. Adjust communication style according to student's age	.584				
25. Incorporate students' developmental stages in the school counseling program	.815				
26. I can communicate with any student in my school	.666				
27. Teach, develop & support students' coping mechanisms	.665				
28. Counsel effectively students and families from different social/economic statuses	.766				
2. Recognize situations that impact student learning		.465			
12. Foster an understanding of the relationship between learning and work		.527			



29. Understand the experiences of parents and students from different cultural backgrounds	.529	
31. Discuss sexuality & sexual orientation in an age-appropriate manner with students	.735	
32. Speak in front of large audiences (students/parents)	.746	
34. Communicate in writing with staff/parents/community	.531	
35. Help students attain attitudes, behaviors, and skills for successful learning	.692	
36. Select & implement strategies to assess school-wide issues	.785	
37. Promote counseling activities by the total school community	.733	
38. Develop school improvement plans	.637	
39. Identify aptitude, achievement, interest, values, and personality appraisal resources	.688	
40. Implement a preventive approach to student problems	.712	
41. Lead school-wide initiatives focused on promoting a positive learning environment	.699	
42. Consult with external community agencies	.742	
9. Effectively deliver suitable parts of the school counseling program through large group meetings in classrooms	.675	
17. Evaluate commercially prepared materials designed for school counseling	.723	
19. Ensure a safe environment for all students in my school	.504	
30. Help teachers improve their effectiveness w/ students	.605	
33. Use technology to support student success in the learning process	.644	
5. Develop measurable outcomes for a school counseling program		.728
7. Establish rapport w/ a student for individual counseling		.628
8. Function successfully as a small group leader		.647
4. Advocate for self as professional SC		.789
16. Teach students to apply problem-solving skills		.526

Table 4.*Descriptive Statistics for the Five Factors of the SCSE*

Factors	N	Minimum	Maximum	M	SD
F1 Individual and Social Development	80	1.92	5.00	4.03	0.69
F2 Leadership & Assessment	80	1.44	5.00	3.82	0.77
F3 Career & Academic Advancement	80	1.63	5.00	3.96	0.72
F4 Collaboration	80	1.60	4.50	3.53	0.58
F5 Cultural Awareness	80	1.50	5.00	3.88	0.71

As shown in Table 4, the five factors had very high means. Factor 1: *Individual and Social Development* ($M = 4.03$, $SD = 0.69$); Factor 2: *Leadership and Assessment* ($M = 3.82$, $SD = 0.77$); Factor 3: *Career and Academic Advancement* ($M = 3.96$, $SD = 0.72$); Factor 4: *Collaboration* ($M = 3.53$, $SD = 0.58$) and Factor 5: *Cultural Awareness* ($M = 3.88$, $SD = 0.71$).

The t-test ($p < .05$) was used to relate the demographic data of the sample with their responses to the statements of the five factors: Statistically significant differences have not been found between the counselors' gender and area of service (urban/rural) or between Greek and Cypriot counselors. Additionally, the means of counselors' age, education, and years of work experience were compared via a two-way ANOVA, revealing no statistically significant differences in their self-efficacy evaluations.

As seen in Table 5, the 2-tailed Pearson correlation analysis revealed that the correlations between the factors were all statistically significant positive correlations ($p < .01$), thus indicating a robust linear relationship between the five factors of the School Counselors' Self-Efficacy Scale (SCSE).

Table 5.

Correlation analysis between the five factors

	F1	F2	F3	F4	F5
F1 Individual / Social Development	1				
F2 Leadership/Assessment	.869**	1			
F3 Career/ Academic Advancement	.938**	.902**	1		
F4 Collaboration	.910**	.918**	.905**	1	
F5 Cultural Awareness	.872**	.862**	.854**	.903**	1

** Correlation is significant at the .01 level (2-tailed)

Research Question 2: How do school counselors assess their self-efficacy in the five areas of the School Counselor Self-Efficacy Scale (SCSE)?

The frequencies of the counselors' responses on the SCSE items were used in order to examine the second research question. The subjects' answers 'generally confident' and 'highly confident' in the forty-three statements of the SCSE scale were grouped. Percentages for these two response categories were added and recorded for each item. Subsequently, the items were regrouped into their factors, and the average percentages for each were calculated. (Table 6)

Table 6.

Average Frequencies in 'confident' and 'highly confident' responses on the five factors of the SCSE

Factor	M	Average percentage of confident / highly confident responses
Factor 5 Cultural Awareness	3.88	88.2%
Factor 1 Individual and Social Development	4.03	82.3%
Factor 4 Collaboration	3.53	75.8%
Factor 2 Leadership and Assessment	3.82	62.8%
Factor 3 Career & Academic Advancement	3.96	53.2%

Factor 5 (F5, *Cultural Awareness*, $M=3.88$) had, on average, the highest frequencies in 'generally' and 'highly confident' responses (88.2%), followed by Factor 1 (F1, *Individual and Social Development*, $M = 4.03$) (82.3%). Factor 4 (F4 *Collaboration*, $M=3.53$), with a confidence level of 75.8%, represented the third factor regarding the participating counselors' confidence responses. Factor 2 (F2, *Leadership and Assessment*, $M = 3.82$) and Factor 3 (F3 *Career and Academic Advancement*, $M = 3.96$) occupied the last two positions in our counselors' confidence levels.

More specifically, out of the forty-three items of the scale, the highest confidence levels of the counselors were concentrated in the following three items (taking into consideration items where the frequencies exceeded 90%): Item 6 (F1), "I can consult/collaborate with parents, guardians, and families," had the highest percentages of confident/highly confident responses (92.2%). Item 26 (F1), "I can communicate with any student in my school," item 7 (F4), "I can establish rapport w/ a student for individual counseling," and item 4 (F5), "Advocate for self as professional SC" came in the counselors' second place of confidence levels with 91.2% respectively. On the other hand, the lowest confidence levels of the participants were recorded in three items (frequencies <55%): Item 31 (F2), "Discuss sexuality & sexual orientation in an age-appropriate manner with students (53.7%), item 41 (F2) "Lead school-wide initiatives focused on promoting a positive learning environment" (53.7%) and item 17 (F3), "Evaluate commercially prepared materials designed for school counseling" (55%).

The two-tailed t-test revealed no significant statistical differences in the counselors' responses on the SCSE regarding their gender, area of their school (urban/rural), or country (Greece/Cyprus).

The comparison of means (ANOVA) also revealed no statistically significant differences amongst the participants regarding their age(s), educational levels, or professional experience.

Research question 3: How do counselors' assessments of pupils' post-pandemic mental and behavioral states affect their self-efficacy beliefs in the five factors of the Self-Efficacy Scale?

Cluster analysis was conducted to divide the sample into two groups: The counselors who identified low (group 1) and high (group 2) anxiety levels of their advisees on the CACIT. It was conducted t-tests to compare the two categories with the five factors of the SCSE. (Table 7)

Table 7.

Descriptive analysis of the factors concerning the advisees' anxiety level

Anxiety level of advisees	<i>N</i>	<i>M</i>	<i>SD</i>
F1 low	20	3.92	1.09
high	60	4.07	0.51
F2 low	20	3.73	1.07
high	59	3.85	0.64
F3 low	20	3.84	1.06
high	60	4.01	0.57
F4 low	20	3.49	0.89
high	60	3.54	0.45
F5 low	20	3.66	1.11
high	60	3.96	0.51

Table 7 shows that 60 counselors identified high levels of generalized anxiety in their advisees, whereas 20 regarded that their pupils experienced low anxiety levels. In all cases, the means were too high (> 3.00). However, there were statistically significant differences between the counselors who assessed their students as having 'high' or 'low' anxiety in all five factors of the SCSE. I.e., all counselors who assessed students as having high anxiety also recorded high scores on all five factors of the self-efficacy scale, thus displaying higher levels of self-efficacy (Table 7). The sixty counselors assessing their pupils as having "high anxiety" had statistically significant higher means ($p < .05$) in all the five factors of the SCSE compared to the twenty counselors who characterized their advisees as having 'low anxiety' after returning to school post-COVID-19 school closures: F5 Cultural Awareness $F(4,79) = 20.767, p = .02$; F1 Individual and social development $F(4,79) = 15.98, p = .03$; F4 Collaboration $F(4,79) = 13.169, p = .03$; F3 Career and academic advancement $F(4,79) = 8.961, p = .04$; F2 Leadership and assessment $F(4,79) = 8.243, p = .04$.

Moreover, according to their assessment of pupils' mental and behavioral states on the CACIT questionnaire, cluster analysis was applied to divide the sample into three categories of Depression/Delinquent behaviors. Most of the counselors ($n = 56$) posed that their pupils had high depression and tendencies towards delinquent behaviors; 18 counselors evaluated their pupils as medium, and 6 counselors as low in depressive symptoms/delinquent behaviors. The ANOVA test determined statistically significant differences between the three categories (high, medium, low) and the five factors of the Self-Efficacy Scale (SCSE) ($p < .01$). Specifically, the means for the two groups with statistically significant differences, derived by the Scheffe analysis were:

- $F_1(2,79) = 5.93, p < .01, M_{\text{high}} = 4.10, M_{\text{low}} = 3.15$
- $F_2(2,79) = 8.74, p < .01, M_{\text{high}} = 3.91, M_{\text{low}} = 2.66$
- $F_3(2,79) = 6.43, p < .01, M_{\text{high}} = 4.06, M_{\text{low}} = 3.02$
- $F_1(2,79) = 5.32, p < .01, M_{\text{high}} = 3.58, M_{\text{low}} = 2.81$
- $F_1(2,79) = 7.17, p < .01, M_{\text{high}} = 4.05, M_{\text{low}} = 2.91$

These differences were prominent among the counselors who evaluated their students as high or low in generalized anxiety, depressive symptoms/delinquent behaviors, anxiety regarding their studies and careers, and excessive internet time ($p < .05$). Similar tendencies were detected in those counselors who assessed their students as having medium to low symptoms in the four factors mentioned earlier in the CACIT assessment questionnaire ($p < .05$). In other words, counselors that detected in their advisees high/medium generalized anxiety, depression/delinquent behaviors, career anxiety, and excessive internet use had higher means in all the factors of the SCSE ($p < .05$), indicating that the stricter they evaluated their students' post-pandemic mental and emotional states on the CACIT the higher they evaluated their self-efficiency on the SCSE.

Discussion

The extended school closures in 2020 and 2021 due to the restrictive measures to prevent the dissemination of the Sars-V-II virus led to increasing concerns about adolescents' mental and behavioral states. Early research showed that the negative experiences of adolescents during the social isolation periods, combined with the lack of access to support mechanisms (school counseling), confronted teenagers with new stressors with detrimental effects on their well-being.

On the other hand, school counselors faced personal and professional challenges during the COVID-19 pandemic when the pupils returned to schools following the end of the social isolation measures. Findings by [Serafini et al. \(2020\)](#) pointed to the fact that restrictive measures (e.g., quarantine and social restrictions) triggered adverse psychological reactions not only during the pandemic but also after the pandemic had passed and the measures had been lifted. The three research questions were answered by the findings in the following manner:

In accordance with the first research question, the 17-item questionnaire CACIT was answered by eighty Greek and Cypriot school counselors. Factor analysis of the counselors' responses identified four factors, namely Anxiety (F1), Social Withdrawal and Loneliness (F2), School achievement/ Addictive tendencies (F3), and Depression/Delinquency (F4). Frequency analysis of the responses showed that counselors ranked their advisees' four most prominent mental health issues as generalized anxiety, anxiety about future academic studies, stress about career pursuits, and increased time spent on the internet. Indeed, according to a recent study conducted in Greece ([Demetriou et al., 2022](#); [Anastasiou & Duquenne, 2020](#)), confinement has significantly increased the feeling of social isolation for a notable portion of the Greek population: 35%, primarily women, young people under 30 years old, and those on work suspension, experienced not only psychological discomfort but also fear about the future. According to [Burrai et al. \(2021\)](#), research investigating the effects of COVID-19 on teenage mental health marked cases of significant mental/behavioral issues with anxiety, depression, and PTSD as the most prominent. [Chevance et al. \(2020\)](#) noted an upsurge in both pre-existing and non-pre-existing cases of psychopathological disorders in adolescent populations. The first Eurofound e-survey (Living, Working, and Covid-19), which provided a picture of the pandemic's impact on people's lives in E.U. countries, revealed that during the first lockdown in Greece, the public expressed a low sense of well-being ([Eurofound, 2020](#)). Notably, only some experienced this feeling in the same way or with the same intensity: Socio-demographic characteristics, economic and working conditions, and residential areas were all factors that explained why certain demographic groups were more likely to experience loneliness and social isolation. A survey published in 2021 by a USA-based non-profit organization, revealed that teenage students identified as their primary obstacles to learning anxiety, stress, and depression, while [Yildiz \(2021\)](#) also claimed that risk factors associated with lockdowns might have led to despair and bad mindsets, which could have given on to collapse and anxiety. The participating counselors identified anxiety about future academic studies and career development as the pandemic's second and third most prominent

psychosocial effects on adolescents. It should be underlined that when this survey was conducted, the unemployment rate in Cyprus for young people aged 15-24 had reached 14.5%. (Press and Information Office, C.Y., 2021), while in Greece, unemployment amongst young people had climbed, in November 2021, to a record high of 39.1% (Eurostat, 2021).

Research showed that self-efficacy is crucial to effective teaching, counseling, and adjustment to change (Bandura, 1995; Larson & Daniels, 1998). Data analysis for the *second research question*, namely counselors' self-reported assessment of their efficacy, showed that our samples' general self-efficacy was high. Specifically, it was highest in cultural awareness (F5), followed by individual and social development (F1) and collaboration (F4). Leadership and assessment (F2) and career and academic advancement (F3) were identified as the areas where they felt less competent, occupying the last two positions. The comparison of means among our counselors' age, education, and years of work experience resulted in no statistically significant differences in their self-efficacy evaluations. High scores in school counselors' self-efficacy have been reported in studies by Scholz et al. (2002), whose findings showed that counselors reported higher levels of general self-efficacy than the international averages of the general population. Correspondingly, Holcomb-McCoy et al. (2008) findings showed that school counselors tended to report high self-efficacy. In our study, the majority of participants (81.2%) were above 35 years old, and half of these individuals had over eleven years of work experience, potentially contributing to their elevated levels of self-reported self-efficacy.

Concerning the *third research question* regarding school counselors' assessments of their self-efficacy in handling pupils' post-pandemic mental and behavioral states, the predominant trend observed in our findings was as follows: Counselors who detected in their advisees high/medium generalized anxiety, depression/delinquent behaviors, career anxiety, and excessive internet use had higher means in all the factors of the SCSE ($p < .05$), indicating that the stricter they evaluated their students' post-pandemic mental and emotional states on the CACIT the higher they evaluated their self-efficiency on the SCSE. Because preserving children's mental, emotional, and physical well-being is at the heart of the school counselor's job, these professionals have been at the center of the problem-solving process since the coronavirus emerged and have been multi-tasking throughout the school closures: School counselors attempted to ensure that students had the necessary equipment and internet access; aided parents, older siblings, or grandparents with technical troubleshooting; responded to teacher requests to determine why students were not showing up for online classes. All that while continuing to provide academic advice, emphasizing

students' emotional and social development, and providing tailored assistance to children struggling with various personal and school-related issues. Meanwhile, school administrators' expectations about what constitutes the school counselor job are frequently at odds with counselors' expectations (Amatea & Clark, 2005; Benigno, 2017), and this issue often reflects uncertainty about what counselors may and should do (Fye et al., 2017; Ruiz et al., 2018). Organizational restrictions such as job ambiguity and overemphasizing administrative obligations (Chandler et al., 2018), as stated by Blake (2020), combined with the corresponding adaptations to new challenges brought about by the pandemic outbreak, may have empowered counselors with a newly-founded autonomy to carry out their jobs by supporting students to the best of their knowledge, skills, and resources (Savitz-Romer et al., 2021). During school closures, counselors acclimated to not receiving direction from their school or district leaders by embracing this autonomy and taking the initiative to carry out their roles the best way they knew. According to Savitz-Romer (ibid.), participants in a study with 1060 school counselors described this as "fending for ourselves" or "coming up with a system that works for us." Whereas some of the counselors experienced autonomy due to limited guidance, there were a few cases in which counselors described independence because their school leaders trusted in them. This autonomy may have reflected their elevated self-efficacy ratings with students' post-pandemic behavioral and emotional states. Previous findings demonstrating that school counselors had a beneficial influence on student outcomes, coupled with studies identifying organizational and structural hurdles that impeded counselors' practices, suggested that when the settings are appropriate, counselors can be effective and can, therefore, feel effective. This pattern is consistent with teacher-focused research, emphasizing that working environments may help or hinder teachers' efficacy (Johnson et al., 2011).

Limitations and Future Research Suggestions

Certain limitations were identified in this study. First, it was initially a pilot study and thus included a relatively small sample of school counselors from Cyprus and Greece. Two problems with small samples are determining whether the study results are accurate and the inability to reject a false 0 hypothesis (Type II error). The sample size affects the study's ability to generalize its conclusions. Another significant limitation in generalizing the findings was that the study included only Greek and Cypriot school counselors. This is the only nationality of counselors employed by the respective ministries of education, thus limiting counselors' ability to communicate with and assess teenagers of other nationalities, especially those belonging to vulnerable social groups,

i.e., refugees, in the school system. Last but not least, the study's main limitation was the low response rate from school counselors. The questionnaire was sent to all counselors through professional associations, but only a few responded. Perhaps, at the time of data collection, in September 2021, when schools reopened after extended closures, counselors were already experiencing burnout from heavy workloads, role confusion, and multitasking.

Further Implications

This study was part of a project that examined how COVID-19 restrictions affected adolescents' mental health (15-17 years old) and how counselors assessed their self-efficacy to help their advisees. As a scientific community, many lessons have been gleaned about the roles of professionals during or after a crisis, even though we are now several years beyond the pandemic. In the aftermath of the pandemic, teenagers who have faced significant disruptions in their daily lives, such as trauma, illness, loss of routine, minimal social contact, and family financial hardships, are still in dire need of social-emotional programs that would support their resilience. It is believed that a follow-up step should involve implementing an intervention program for counselors, utilizing creative processes and techniques (such as drama or art) to educate them on best practices for addressing teenagers' post-crisis psychosocial issues. The issue is complicated, and it needs the contribution of an interdisciplinary team (e.g., psychologists, creative drama and visual arts teachers, educators, and counselors) to prepare a psychoeducational intervention for adolescent focus groups. After examining the accountability of such types of interventions, researchers can propose specific suggestions about the upgraded role of the experts who are expected to work with adolescents.

Funding/Financial Support

The authors have no funding to report.

Other Support/Acknowledgement

The authors have no support to report.

Competing Interests

The authors have declared that no competing interests exist.

References

- Amatea, E. S., & Clark, M. A. (2005). Changing schools, changing counselors: A qualitative study of school administrators' conceptions of the school counselor role. *Professional School Counseling, 9*(1). <http://doi.org/10.1177/2156759X0500900101>
- American Counseling Association. (2005). *Code of ethics*. Alexandria, VA: Author.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). <https://doi.org/10.1176/appi.books.9780890425596>.
- American School Counselor Association. (2019). *The National Model: A framework for school counseling programs* (4th ed.). Alexandria, VA: Author.
- Anastasiou E, Duquenne M. (2021). What about the “Social Aspect of COVID”? Exploring the Determinants of Social Isolation on the Greek Population during the COVID-19 Lockdown. *Social Sciences, 10*(1), 27. <https://doi.org/10.3390/socsci10010027>.
- Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review, 84*(2), 191–215. [https://doi.org/10.1016/0146-6402\(78\)90002-4](https://doi.org/10.1016/0146-6402(78)90002-4).
- Bandura, A., & National Inst of Mental Health. (1986). *Social foundations of thought and action: A social cognitive theory*. Prentice-Hall, Inc.
- Bandura, A. (Ed.). (1995). *Self-efficacy in changing societies*. Cambridge University Press. <https://doi.org/10.1017/CBO9780511527692>
- Bandura, A. (1997). *Self-efficacy: The exercise of control*. W H Freeman/Times Books/ Henry Holt & Co.
- Barling, J., & Abel, M. (1983). Self-efficacy beliefs and tennis performance. *Cognitive Therapy and Research, 7*(3), 265–272. <https://doi.org/10.1007/BF01205140>
- Benigno, S. (2017). Counselor perceptions: Let us do our job! *Journal of Education and Learning, 6*(4), 175–180. <https://doi.org/10.5539/jel.v6n4p175>
- Blake, M. K. (2020). Other duties as assigned: The ambiguous role of the high school counselor. *Sociology of Education, 93*(4), 315–330. <https://doi.org/10.1177/0038040720932563>

- Bodenhorn, N., & Skaggs, G. (2005). Development of School Counselor Self-Efficacy Scale. *Measurement and Evaluation in Counseling and Development, 38*(1), 14-28.
- Bodenhorn, N., Wolfe, E., & Airen, O. (2010). School Counselor Program Choice and Self-Efficacy: Relationship to Achievement Gap and Equity. *Professional School Counseling, 13*, 165-174. <http://www.jstor.org/stable/42732890>
- Branquinho, C., Kelly, C., Arevalo, L. C., Santos, A., & Gaspar de Matos, M. (2020). "Hey, we also have something to say": A qualitative study of Portuguese adolescents' and young people's experiences under COVID-19. *Journal of community psychology, 48*(8), 2740–2752. <https://doi.org/10.1002/jcop>.
- Brooks, S., Webster, R., Smith, L., Woodland, L., Wessely, S., Greenberg, N. (2020). The psychological impact of quarantine and how to reduce it: a rapid review of the evidence. *Lancet 395*(10227), 912–920. [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
- Burrai, J., Barchielli, B., Cricenti, C., Borrelli, A., D'Amato, S., Santoro, M., Vitale, M., Ferracuti, S., Giannini, A.M., Quaglieri, A. (2021). Older Adolescents Who Did or Did Not Experience COVID-19 Symptoms: Associations with Mental Health, Risk Perception, and Social Connection. *Int. J. Environ. Res. Public Health, 18*, 5006. <https://doi.org/10.3390/ijerph18095006>
- Chandler, J. W., Burnham, J. J., Riechel, M. E. K., Dahir, C. A., Stone, C. B., Oliver, D. F., Davis, A. P., & Bledsoe, K. G. (2018). Assessing the counseling and non-counseling roles of school counselors. *Journal of School Counseling, 16*(7).
- Chevance, A., Gourion, D., Hoertel, N., Llorca, P. M., Thomas, P., Bocher, R., ... & Gaillard, R. (2020). Ensuring mental health care during the SARS-CoV-2 epidemic in France: A narrative review. *L'encephale, 46*(3), 193-201.
- Clark, D. M. (2006). *School counselor self-efficacy as related to the ASCA national model for school counselors*. Unpublished Doctoral Dissertation, University of North Carolina, Charlotte.
- Coleman, H. L. K., & Yeh, C. J. (2008). *Handbook of school counseling*. Routledge.
- Courtney, D., Watson, P., Battaglia, M., Mulsant, B. H., & Szatmari, P. (2020). COVID-19 Impacts on Child and Youth Anxiety and Depression: Challenges and Opportunities. *Canadian Journal of Psychiatry. Revue canadienne de psychiatrie, 65*(10), 688–691. <https://doi.org/10.1177/0706743720935646>

- Demetriou, L., Panaoura, R. & Levent, T. (2022). School Counselors' assessments of the impact of COVID-19 restrictive measures on the well-being of adolescents in the ages 15-17 years, *Psychology and Education* 59(2), 1100–1110.
- Eurofound (2020). *Living, working and COVID-19, COVID-19 series*, Publications Office of the European Union. Luxembourg.
- Eurostat (2021). EU Labour Force Survey ad hoc module 2019 on work organisation and working time arrangements — Quality assessment report. ISBN 978-92-76-22410-5 ISSN 2529-3222.
- Fye, H. J., Miller, L. G., & Rainey, J. S. (2017). Predicting school counselors' supports and challenges when implementing the ASCA National Model. *Professional School Counseling*, 21. <https://doi.org/10.1177/2156759X18777671>.
- Gallo, L. L. (2017). Professional issues in school counseling and suicide prevention. *Journal of School Counseling*, 15(11), 1-27. <https://eric.ed.gov/?id=EJ1151461>
- Gómez-Salgado, J., Andrés-Villas, M., Domínguez-Salas, S., Díaz-Milanés, D., & Ruiz-Frutos, C. (2020). Related Health Factors of Psychological Distress During the COVID-19 Pandemic in Spain. *International Journal of Environmental Research and Public Health*, 17(11), 3947. <https://doi.org/10.3390/ijerph17113947>
- Griffith, G.J., Morris, T.T., Tudball, M.J., Herbert, A., Mancano, G., & Pike, L. (2020). Collider bias undermines our understanding of COVID-19 disease risk and severity. *Nature Communications* 11, 5749. <https://doi.org/10.1038/s41467-020-19478-2>.
- Gysbers, N. C., & Henderson, P. (2006). *Developing and managing your school guidance and counseling program*. Alexandria, VA: American Counseling Association.
- Hair, J., Black, W., Babin, B., Anderson, R., & Tatham, R. (2006). *Multivariate Data Analysis*. 6th Edition, Pearson Prentice Hall, Upper Saddle River.
- Holcomb-McCoy, C., Harris, P., Hines, E. M., & Johnston, G. (2008). School counselors' multicultural self-efficacy: A preliminary investigation. *Professional School Counseling*, 11(3), 166–178.
- Hou, Y., Xiong, D., Jiang, T., Song, L., & Wang, Q. (2019). Social media addiction: Its impact, mediation, and intervention. *Cyberpsychology*, 13(1), Article 4. <https://doi.org/10.5817/CP2019-1-4>.

- Hwang, T. J., Rabheru, K., Peisah, C., Reichman, W., & Ikeda, M. (2020). Loneliness and social isolation during the COVID-19 pandemic. *International psychogeriatrics*, 32(10), 1217–1220. <https://doi.org/10.1017/S1041610220000988>
- Hyland, P., Shevlin, M., McBride, O., Murphy, J., Karatzias, T., Bentall, R. P., Martinez, A. P., & Vallières, F. (2020). Anxiety and depression in the Republic of Ireland during the COVID-19 pandemic. *Acta Psychiatrica Scandinavica*, 142(3), 249-256. <https://doi.org/10.1111/acps.13219>
- Johnson, S. M., Kraft, M. A., & Papay, J. P. (2012). How context matters in high-need schools: The effects of teachers' working conditions on their professional satisfaction and their students' achievement. Harvard Graduate School of Education. *Teachers College Record*, 114(10), 1-39.
- Jones, N., Qureshi, Z., Temple, R., Larwood, J., Greenhalgh, G., Bourouiba, L. (2020). Two meters or one: What is the evidence for physical distancing in COVID-19? *BMJ (Clinical research ed.)*, 370, m3223. <https://doi.org/10.1136/bmj.m3223>
- Jiao, W. Y., Wang, L. N., Liu, J., Fang, S. F., Jiao, F. Y., Pettoello-Mantovani, M., & Somekh, E. (2020). Behavioral and Emotional Disorders in Children during the COVID-19 Epidemic. *The Journal of Pediatrics*, 221, 264–266.e1. <https://doi.org/10.1016/j.jpeds.2020.03.013>
- Larson, L. M., & Daniels, J. A. (1998). Review of the counseling self-efficacy literature. *The Counseling Psychologist*, 26(2), 179–218. <https://doi.org/10.1177/0011000098262001>.
- Lee, C. (1983). Self-efficacy and behavior as predictors of subsequent behavior in an assertiveness training program. *Behaviour Research and Therapy*, 21(3), 225–232.
- Limberg, D., Villares, E., Gonzales, S., Starrett, A., & Boyce-Rosen, N. (2022). An Investigation of How School Counselors Adapted Their Delivery Due to COVID-Induced Disparities. *Professional School Counseling*. 26(1b). <https://doi.org/10.1177/2156759X221105797>
- London, R., Ingram, D. (2018). Social isolation in middle school. *School Community Journal*, 28(1), 107–127. <https://files.eric.ed.gov/fulltext/EJ1184924.pdf>
- Mazza, C., Ricci, E., Biondi, S., Colasanti, M., Ferracuti, S., Napoli, C., & Roma, P. (2020). A Nationwide Survey of Psychological Distress among Italian People during the COVID-19 Pandemic: Immediate Psychological Responses and Associated Factors. *International Journal of Environmental Research and Public Health*, 17(9), 3165. <https://doi.org/10.3390/ijerph17093165>

- McLaughlin, K.A.; Conron, K.J.; Koenen, K.C.; Gilman, S.E. (2010). Childhood adversity, adult stressful life events, and risk of past-year psychiatric disorder: A test of the stress sensitization hypothesis in a population-based sample of adults. *Psychol. Med.*, *40*, 1647–1658.
- Meyers, L. (2020, September 28). School counseling in the time of the coronavirus. *Counseling Today*. <https://ct.counseling.org/2020/09/school-counseling-in-the-time-of-the-coronavirus/>
- Mullen, P., Lambie, G., Griffith, C. & Sherrell, R. (2016). School Counselors' General Self-Efficacy, Ethical and Legal Self-Efficacy, and Ethical and Legal Knowledge. *Ethics & Behavior*, *26*(5), 415–430, <http://10.1080/10508422.2015.1033627>.
- Orben A, Tomova L, Blakemore SJ. (2020). The effects of social deprivation on adolescent development and mental health. *Lancet Child Adolesc Health*, *4*(8):634-640. [https://doi.org/10.1016/S2352-4642\(20\)30186-3](https://doi.org/10.1016/S2352-4642(20)30186-3)
- Owens, D., Bodenhorn, N., & Bryant, R. (2010). Self-efficacy and multicultural competence of school counselors. *Journal of School Counseling*, *8*(17), 1-20.
- Pincus, R., Hannon-Walker, T., Wright, L., & Justice, J. (2020). COVID-19's Effect on Students: How School Counselors Rise to the Rescue. *NASSP Bulletin*. *104*(4), 241–256. <http://doi.org.10.1177/0192636520975866>
- Press and Information Office (CY)(2021). Labour Force Survey (LFS): 3rd Quarter 2021 [retrieved from <https://www.pio.gov.cy/en/press-releases-article.html?id=24427#flat>
- Ruiz, M., Peters, M. L., & Sawyer, C. (2018). Principals' and counselors' lens of the school counselor's role. *Journal of Professional Counseling: Practice, Theory & Research*, *45*(1), 1–16. <https://doi.org/10.1080/15566382.2019.1569321>

- Savitz-Romer, M., Rowan-Kenyon, H.T., Nicola, T.P., Carroll, S., & Hecht, L. (2020). Expanding support beyond the virtual classroom: Lessons and recommendations from school counselors during the COVID-19 crisis. Harvard Graduate School of Education & Boston College Lynch School of Education and Human Development. Chestnut Hill/Cambridge, MA.
- Savitz-Romer, M., Rowan-Kenyon, H., Nicola, T., Alexander, E., Carroll, S. (2021). When the Kids Are Not Alright: School Counseling in the Time of COVID-19. *AERA Open*. 7(1), 233285842110336. <https://doi.org/10.1177/23328584211033600>
- Schmidt, J. J. (2013). *Counseling in schools: Comprehensive programs of responsive services for all students*. Pearson/Allyn and Bacon.
- Scholz, U., Doña, B. G., Sud, S., & Schwarzer, R. (2002). Is general self-efficacy a universal construct? Psychometric findings from 25 countries. *European Journal of Psychological Assessment*, 18(3), 242–251. <https://doi.org/10.1027/1015-5759.18.3.242>
- Shevlin, M., McBride, O., Murphy, J., Miller, J. G., Hartman, T. K., Levita, L., Mason, L., Martinez, A. P., McKay, R., Stocks, T. V. A., Bennett, K. M., Hyland, P., Karatzias, T., & Bentall, R. P. (2020). Anxiety, depression, traumatic stress and COVID-19-related anxiety in the UK general population during the COVID-19 pandemic. *BJPsych open*, 6(6), e125. <https://doi.org/10.1192/bjo.2020.109>
- Serafini, G., Parmigiani, B., Amerio, A., Aguglia, A., Sher, L., & Amore, M. (2020). The psychological impact of COVID-19 on the mental health in the general population. *QJM: Monthly Journal of the Association of Physicians*, 113(8), 531–537. Advanced online publication. <https://doi.org/10.1093/qjmed/hcaa201>
- Sheasley, C. (2021, March 24). "Somebody cares": How schools are helping with student well-being. <http://www.jsc.montana.edu/articles/v19n42.pdf>
- Strear, M., Duffy, H., & Sunde, A. (2021). When schools go dark, school counselors shine: School counseling during a global pandemic. *American Institutes for Research*. <https://www.air.org/sites/default/files/When-Schools-Go-Dark-School-Counselors-Shine-Feb-2021.pdf>
- Talmus, L. (2019). Tackling social isolation in middle school. *Childhood Education*, 95(6), 42-49. <https://doi.org/10.1080/00094056.2019.1689058>.
- UNESCO (2020). Inclusion and Education. Global Education Monitoring Report. ISBN 978-92-3-100388-2

- UN General Assembly. (2015, October 21). Transforming our world: The 2030 Agenda for Sustainable Development (A/RES/70/1). <https://www.refworld.org/docid/57b6e3e44.html>
- Wan, W. (2020). The coronavirus pandemic is pushing America into a mental health crisis: Anxiety and depression are rising: The U.S. is ill-prepared, with some clinics already on the brink of collapse. *The Washington Post*. <https://www.washingtonpost.com/health/2020/05/04/mental-health-coronavirus/>
- Wang C., Horby P.W., Hayden F.G., Gao G.F. (2020). A novel coronavirus outbreak of global health concern. *Lancet*, 395(10223), 470–473.
- Williams, S. L., & Watson, N. (1985). Perceived danger and perceived self-efficacy as cognitive determinants of acrophobic behavior. *Behavior Therapy*, 16(2), 136–146.
- Woods, K. W. (2009). *Self-efficacy as a mediator in the relationship between non-counseling roles and wellness in school counselors*. Unpublished Doctoral Dissertation, Texas Tech University.
- Yıldız E. (2021). What can be said about lifestyle and psychosocial issues during the coronavirus disease pandemic? First impressions. *Perspectives in psychiatric care*, 57(1), 413–415. <https://doi.org/10.1111/ppc.12560>.
- YouthTruth (2021). Students Weigh in Part II: Learning and Wellbeing during COVID-19. <http://youthtruthsurvey.org/wp-content/uploads/2021/02/YouthTruth-Students-Weigh-In-Part-II-Learning-and-Well-Being-During-COVID-19.pdf>

About the authors

Dr. L. Dimitriou is a professor of Developmental Cross-Cultural Psychology at the Department of Psychology and Social Sciences at Frederick University in Cyprus. She also chairs the Resilience Research Unit. Her main research interests cover the Psycho-social effects of resilience and positive emotions in times of austerity and the pandemic, Socialization/Parental Acceptance-Rejection Theory, and Counseling and Career Decision-Making of Children and Youth. She participates in funded European research projects and is a member-researcher of the European Cooperation for Science and Technology, the Psychological Science Accelerator – PSA, the Global Social Norms Network, and the World Pandemic Research Network. She is a member of the American Psychological Association, the International Society for Interpersonal Acceptance-Rejection (ISIPAR), and the Hellenic Society for Counseling and Career Guidance (ELESYP).

Dr. Panaoura is a professor in Mathematics Education at the Department of Education at Frederick University and the Dean of the School of Education and Social Sciences. She has taught postgraduate courses at the University of Cyprus and the University of Athens. She coordinates the Ph.D. in Education at Frederick University. Her main research interests are the development of students' and teachers' metacognitive and mainly self-regulatory strategies in mathematics, the affective domain in Mathematics, the evaluation of the implementation of innovations in education, the use of different representations for understanding mathematical concepts, the parental involvement in developing mathematical thinking and the role of informal and non-formal teaching in all the educational levels.

Corresponding Author's Contact Address [\[TOP\]](#)

Department of Psychology and Social Sciences, Frederick University
18, Mariou Agathagelou Str., Limassol, Cyprus
Email: luciad61@gmail.com