

2021 CAUT Post-Secondary Counselling Survey Report

November 2021

Summary

Counselling Faculty and other post-secondary mental health professionals face challenges and issues at work that often differ from those of other faculty and academic staff. In the face of increasing demands for mental health services on post-secondary campuses, as well as the cross-sector impact of COVID-19 on working conditions, the 2021 CAUT Post-Secondary Counselling Survey aimed to identify key issues of concern for Faculty Counsellors and other post-secondary mental health professionals.

With 103 responses from counsellors across nine provinces, it is important to note that the results of the survey reflect the characteristics and experiences of the group of survey respondents, and not necessarily the Canadian post-secondary counselling sector as a whole. The survey resulted in the following key findings:

- Half of respondents were members of their institution's academic staff association, 33% were members of another union and 14% were not unionized.
- Ninety per cent of respondents were employed full-time and 10% part-time.
- Counselling Faculty tended to have access to some faculty privileges but not others:
 - The majority of respondents in academic staff associations had academic freedom and the option to provide community service, take sabbaticals, conduct research, and obtain tenure (or equivalent status). Fewer than 50% of respondents in academic staff associations had the option to teach or had a flexible work schedule.
 - The majority of respondents in academic staff associations had the right to sit on hiring committees and counselling-related committees. Fewer than 50% of respondents in academic staff associations had the right to be active members of Council, be active members of the Board of Governors or be active members of the Senate.
- Academic staff association and union membership were associated with lower annual counselling caseload for respondents. The overall average

caseload of respondents was 203, but for respondents in academic staff associations it was 186, for respondents in other unions it was 280 and for respondents who were not association or union members it was 338.

- The majority of all respondents (54%) indicated that their workload had increased since the COVID-19 pandemic began. However, 40% of respondents in an academic staff association indicated that their workload had stayed the same, compared to only 18% of respondents not in an academic staff association. Half of respondents said they thought their workload was negatively affecting their health.
- The most common reasons given for increased workloads were an increased demand for services, (76%), additional administrative tasks (67%) and the addition of new technology (57%).
- More than one-third (37%) of respondents had raised an issue with their union during the last round of bargaining, with remote or hybrid work, outsourcing and job security, and workload being the most common. While some respondents who did not raise issues simply had none to raise, others either felt management could resolve the issue or did not feel heard by their union as counsellors.
- Prior to COVID-19, the most common way of providing counselling services (53%) was in-person only. At the time of the survey, it was video or telephone only (57%).

Introduction

At its 87th meeting, CAUT Council passed a motion that staff initiate a survey of university and college counselling centres across Canada to identify issues facing counselling faculty members. The motion was motivated by the increasing demand for student mental health services as well as concerns about counselling faculty being replaced by non-academic mental health professionals and e-mental health solutions. There were also concerns about excessive workload and limited academic freedom.

In response to this motion, CAUT established a working group of Counselling Faculty. The 2021

CAUT Post-Secondary Counselling Survey was developed with the input of this working group. Distributed directly to individual mental health professionals at Canadian post-secondary institutions, the survey's questions aimed to identify key issues of concern for these workers as well as the ways in which these issues may have been impacted by the ongoing COVID-19 pandemic.

Survey methodology

In the absence of a reliable national contact list of post-secondary counsellors, CAUT assembled a list for the survey by reviewing counselling centre websites and contacting the counselling or student services departments at 146 colleges and 127 universities in Canada to obtain the email addresses of the institutions' counsellors. CAUT membership was also notified of the survey, and member associations who had counsellor members were prompted to contact CAUT for a survey link to distribute to their members. Overall, the survey link was sent to 32 associations with counselling members and 574 individual counsellors, and was open from June 7, 2021 to September 24, 2021.

The survey received 103 responses from counsellors at 52 different universities and colleges. The responses were not evenly distributed by institution or province and therefore do not comprise a representative sample of post-secondary counselling as a whole. While most institutions had between one and four responses each, one outlier had 11 responses, and another had nine. Thus, the results of this survey must only be interpreted as a reflection of the attributes and experiences of the people who responded and not as a comprehensive study of Canadian post-secondary counselling.

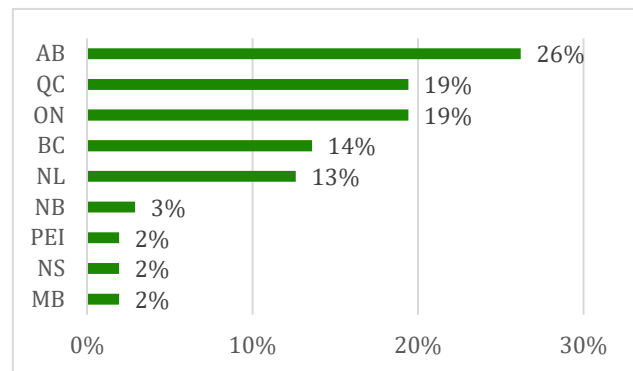
Results

Who completed the survey

Survey respondents were split closely by institution type, with 43% employed at colleges and 57% at universities. There were a disproportionately high number of respondents from Alberta (26%) and Newfoundland (13%) and a disproportionately low number of respondents from Ontario (19%) and Manitoba, Nova Scotia, and Saskatchewan (2%, 2% and 0% respectively). Institutions in Alberta and Newfoundland tended to

have multiple respondents compared to institutions in other provinces.

Figure 1: Respondents by province

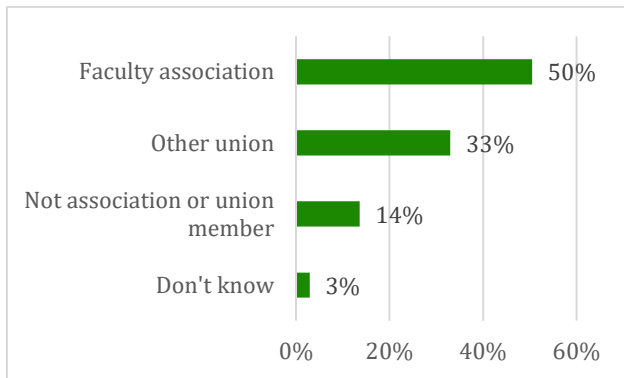


Employment status

Ninety per cent of respondents were employed full-time and 10% part-time. When asked about the permanence of their jobs, 62% reported being tenured or permanent employees, 21% were in limited term appointments, 15% were tenure-track or in an equivalent probationary appointment and only 1% were casual employees. However, multiple respondents noted in open response questions that there were either a high number of contract staff at their facilities or that counselling services were being outsourced to third parties. Consequently, this low number of reported casual staff may simply reflect that casual staff were less likely to have been reached with the survey or less likely to respond.

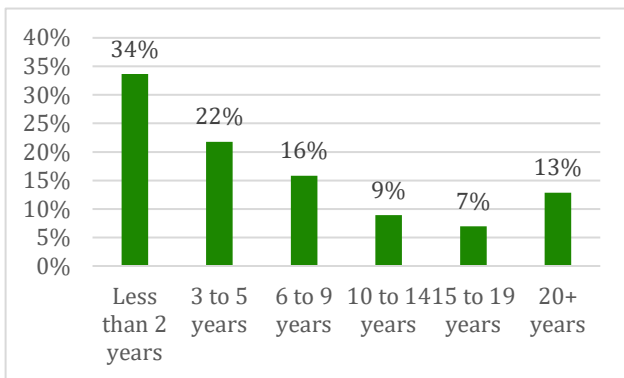
Half of respondents reported that they were members of their employing institution's academic staff association. Thirty-three per cent of respondents were members of a different union at their institution, 14% were not unionized at all and 3% did not know whether they were unionized. This does not necessarily indicate that half of post-secondary counsellors are in academic staff associations, but rather that counsellors in academic staff associations were more likely to respond to CAUT's survey. This may have been compounded by the survey being distributed primarily during the summer as opposed to peak times during the academic year when there are likely to be more contract staff working.

Figure 2: Association & union membership



The length of time respondents had been in their current jobs varied greatly from less than two years to 20+ years, with 56% of respondents having been in their jobs for five or fewer years.

Figure 3: Length of employment in current role



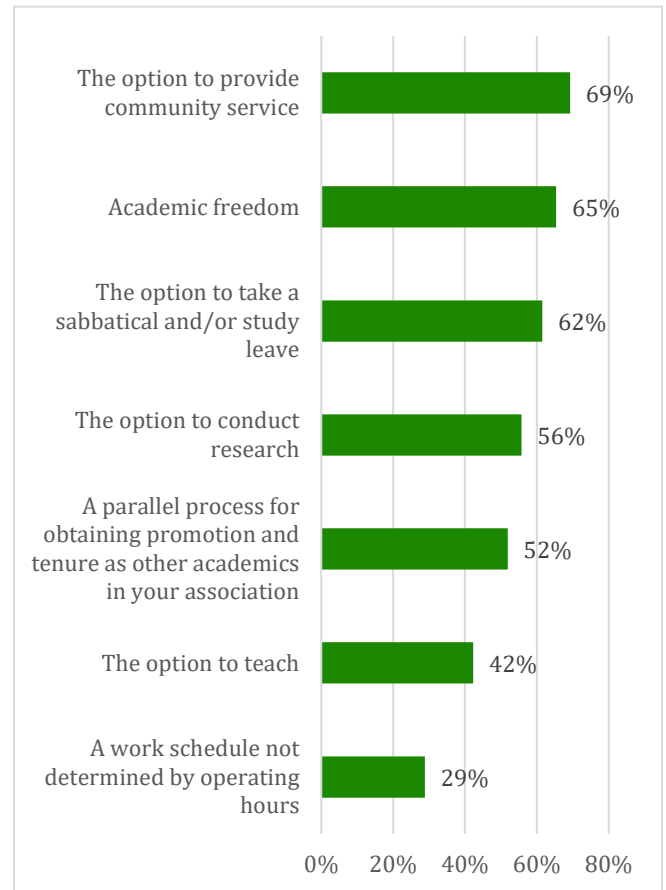
When asked about retirement plans, 65% reported that retirement was at least 10 years away, while only 12% reported that retirement would take place within one to four years.

Faculty privileges

The 50% of respondents who were members of academic staff associations were asked about job characteristics that are common in non-counselling faculty roles, such as teaching, academic freedom and service. With the exceptions of teaching (42%) and flexible hours (29%), a small majority of respondents indicated that their job contained each of the other components. Although only 65% of faculty counsellor respondents had academic freedom, levels are higher among those whose activities are most relevant for

academic freedom: 93% of the respondents who had the option to conduct research and 81% of respondents who had the option to teach had academic freedom.

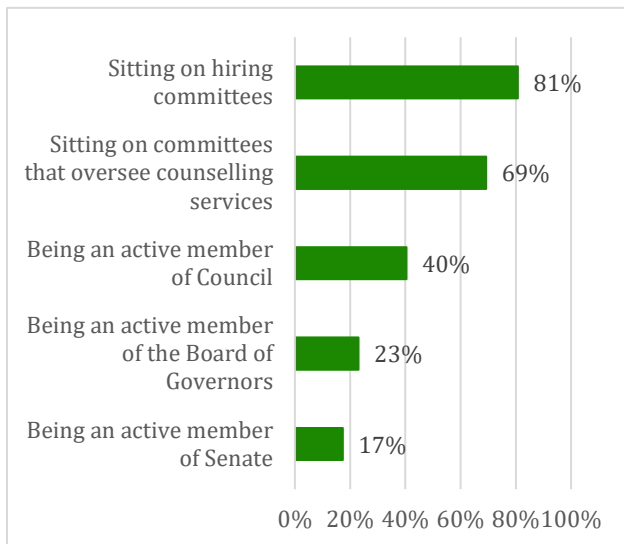
Figure 4: Access to faculty privileges



However, this still leaves a significant number of faculty counsellors without access to the same professional rights as their other faculty colleagues.

The larger gap between faculty counsellors and non-counselling faculty was apparent in inclusion in collegial governance. A majority of the respondents reported that they were allowed to sit on hiring committees and counselling services committees, but relatively few were eligible to be members of Council, Senate (or its equivalent) or the Board of Governors.

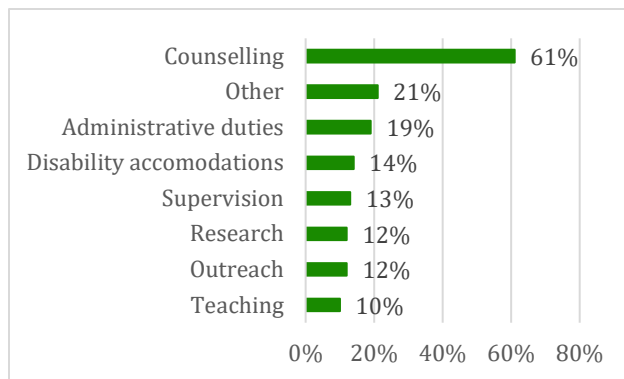
Figure 5: Right to collegial governance activities



Job components

All respondents were asked to describe the proportion of their time spent on each component of their job. Those who provided counselling (90% of respondents) spent on average 61% of their time providing counselling. 'Other' activities included community, university, and professional service; meetings; and collaboration.

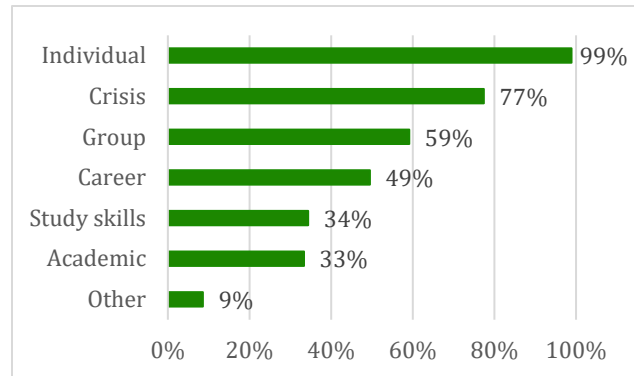
Figure 6: Time spent on components of job



Respondents who provide counselling reported spending an average of 18 hours per week on this activity, with 48% of respondents spending between 16 and 21 hours per week. When asked about the type of counselling provided, 99% provided individual

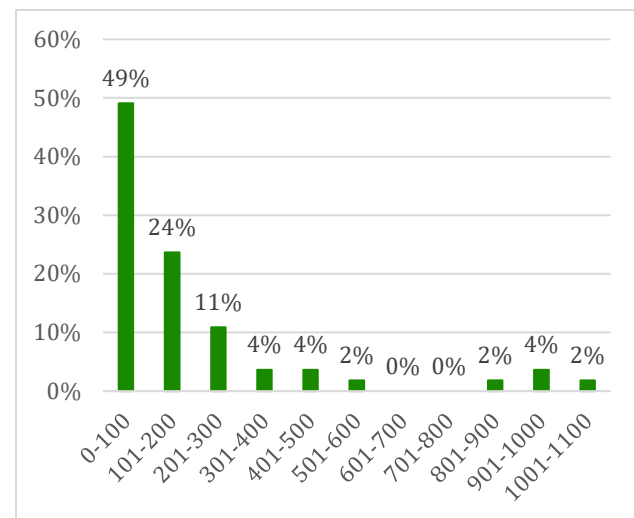
counselling, 59% provided group counselling and 49% provided academic counselling.

Figure 7: Types of counselling provided



When asked about annual caseload (the number of different students seen for counselling services by the individual practitioner per year), answers ranged from as low as 19 to as high as 1,100 with an average of 203.¹ However, most respondents reported caseloads lower than 200.

Figure 8: Annual caseload



When split by association and union membership, the average annual caseload of respondents who were members of their institution's academic staff association was 186, while the average annual caseload for respondents who were members of a different union

1. Three respondents indicated caseloads of 900 or higher – one respondent in an academic staff association, one in a non-faculty union, and one not in any association or union.

was 280 and for those not in any association or union was 338. Association and union membership, especially academic staff association membership, appears to be associated with lower annual caseloads. For academic staff association members, this may be due to a higher number of other responsibilities like teaching and research.

Respondents who provided outreach were asked what types of activities this includes. Eighty-five per cent said workshops for students, 78% said class presentations on counselling services, 76% said training for students or faculty and 15% said other. 'Other' here includes class presentation on other topics like life skills, consultation, supervision, and collaboration.

Decision-making

Respondents were asked about their involvement in decision-making about institutional mental health initiatives and provided a very mixed picture. Twenty-seven per cent indicated that they are always or almost always involved, 43% indicated that they are sometimes involved and 25% indicated that they are never or almost never involved.

When asked about the amount of autonomy they had over determining the treatment plans for their clients, 73% of respondents reported that they have complete autonomy, 26% that they have some autonomy and only 1% that they have little autonomy.

Change over time

Respondents who had been in their jobs for at least five years were asked how aspects of their jobs had changed over time. Their responses are summarized below. Notably, 68% of respondents reported an increase in annual caseload over the course of their employment.

Table 1: Changes in aspects of jobs over time

Job Component	Increased	Stayed the Same	Decreased
Number of sessions per week	43%	32%	25%
Length of sessions	12%	83%	6%
Annual caseload	68%	19%	13%
Number of counsellors employed at center	47%	32%	21%
Involvement in institutional mental health initiatives	22%	36%	31%

Counselling centre operations²

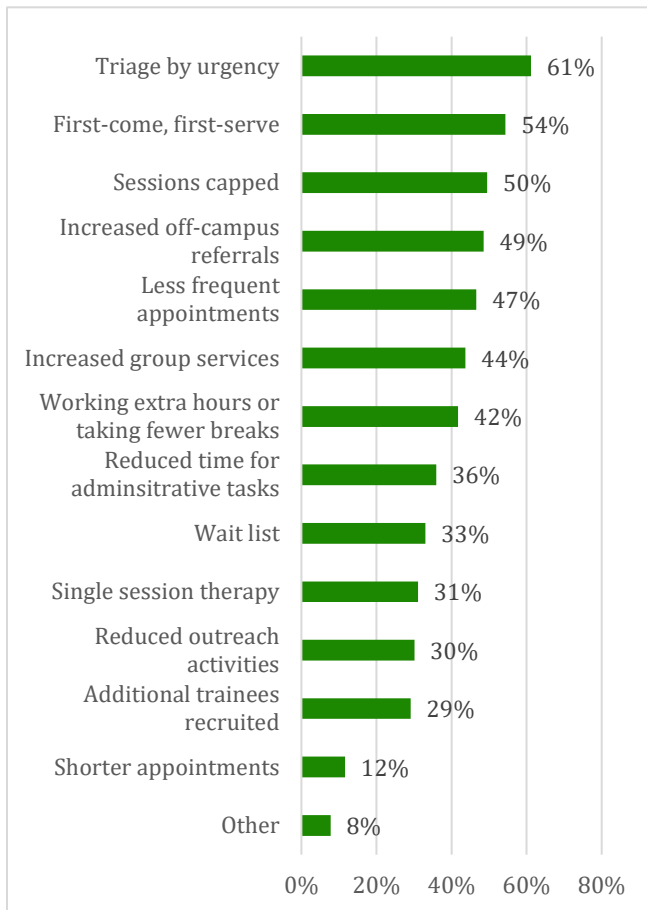
Respondents' descriptions of their counselling centres show that they are primarily oriented around providing services to students, with 100% providing services to full-time students, 95% to part-time students, 10% to employees and 9% to community members.

Respondents reported a wide range of strategies used by their centres to manage client demands for services, with the most common strategies being triage by client urgency (61%), a first-come first-serve approach (54%) and some form of session caps (50%). The 'other' strategies included stepped care, reserved same-day hours, support from student advisors and reduced time for research and service.

When asked about the relative ease or difficulty of referring clients to off-campus services, when necessary, responses were mixed. Forty per cent reported that these referrals were somewhat difficult, 40% reported that they were somewhat easy, 10% said they were very difficult and 8% said they were very easy.

2. Please keep in mind that there are uneven numbers of respondents from different counselling centres, and the results in this section reflect the respondent sample and not PSE counselling in Canada overall.

Figure 9: Demand management strategies



Session caps

Of those respondents who indicated that their centre used session caps to manage demand for services, there was a roughly even split between those who reported flexible caps (50%) and fixed session caps (48%). Two per cent either did not indicate what type of cap was used or said that the fixed vs. flexible aspect of the cap was inconsistently applied.

The parameters of the caps varied between respondents, defined either in terms of academic year, calendar year, lifetime, semester or presenting issue (e.g., the cap resets if the client returns to counselling for a different clinical issue).

Table 2: Variation in session caps

Sessions per	% of respondents with cap type	Average session cap
Academic year	40%	9.6
Calendar year	6%	11
Lifetime	9%	10.3
Semester	23%	6
Presenting issue	20%	11.1

Impact of COVID-19

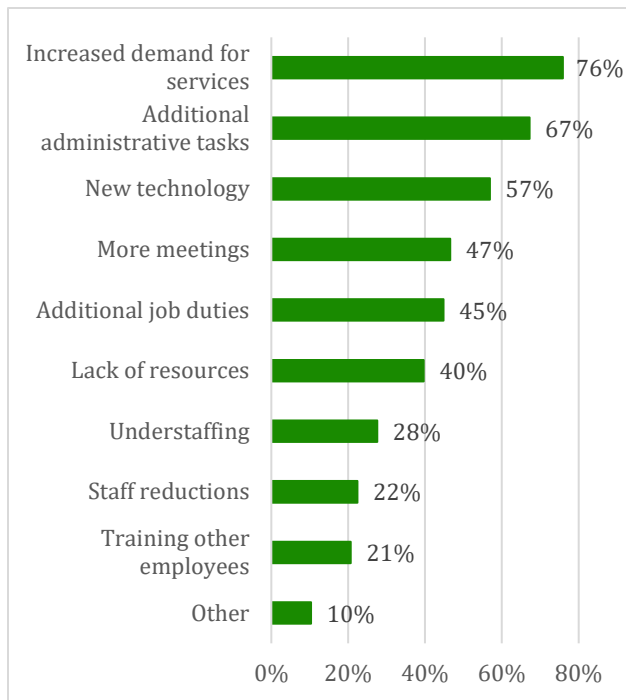
Workload

Respondents’ assessments of their current workloads were mixed. Fifty-six per cent described their workload as somewhat manageable, 17% as somewhat unmanageable, 14% as very unmanageable and 11% as very manageable. Half of respondents reported that they believed that their workload was hurting their health.

Since the beginning of the pandemic, 54% of respondents reported that their workload had increased, 29% said that it had stayed the same, 9% said that it had decreased and 8% did not know. Forty per cent of respondents who were members of an academic staff association said their workload had stayed the same compared to only 18% of those who were not in their institution’s academic staff association — this may indicate that academic staff association membership is somewhat protective against workload fluctuations.

Of those who indicated that their workload had increased (58 respondents), the most frequently identified causes were an increased demand for services (76%), additional administrative tasks (67%) or new technology (57%). The ‘other’ categorized responses included factors such as additional time spent on hiring committees and increased need for internal support.

Figure 10: Factors contributing to workload increase



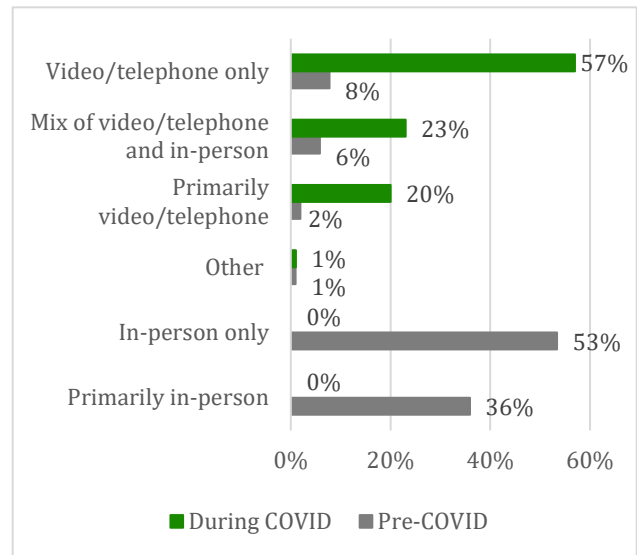
Of those who indicated that their workload had decreased (11 respondents), the most frequently identified causes were a decreased demand for services (55%), more staff being hired (18%) and the limits of online services (18%).

Service Provision

Ninety-four per cent of respondents indicated that their counselling centres had changed the way they provide services since the beginning of the pandemic. The majority of respondents (57%) reported that they currently were only providing counselling by video or telephone, 23% reported a mix of remote and in-person sessions and 20% reported that they primarily provide remote sessions.

Eighty-nine per cent of respondents reported that, prior to the pandemic, their centres were providing services primarily or entirely in-person.

Figure 11: Provision of counselling services



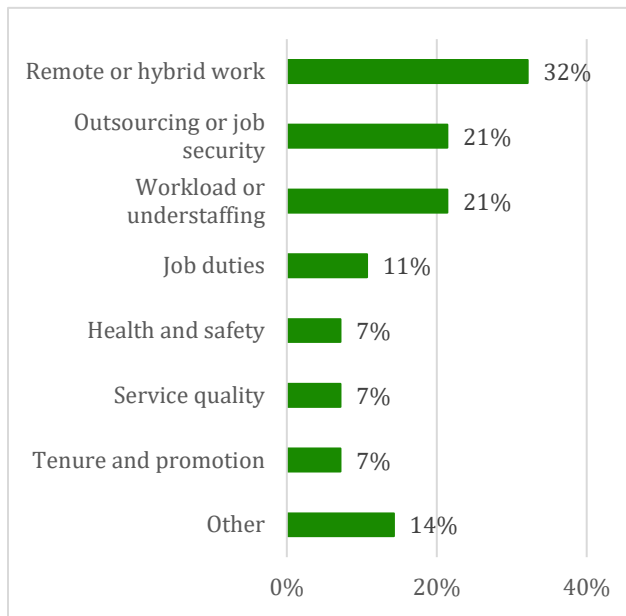
When asked about anticipated future service delivery modes, 63% of respondents said that they expected some form of hybrid or mixed service provision to continue after the pandemic.

Issues brought to the association or union

More than one-third (37%) of respondents reported that they had attempted to address issues related to their work conditions via their association or union. The most common issues brought forward were related to remote or hybrid work (32%), outsourcing and job security (21%), and workload or understaffing (21%). Multiple respondents specifically noted that the university or college had brought in or attempted to bring in a third-party counselling service. When collecting contact information for counselling centres prior to this survey, multiple colleges had no web presence for a counselling centre, but instead linked out to third-party online counselling services.

Other issues counsellors brought to their associations or unions included compensation, academic freedom, hiring human resources professionals, and counsellor input in decision making.

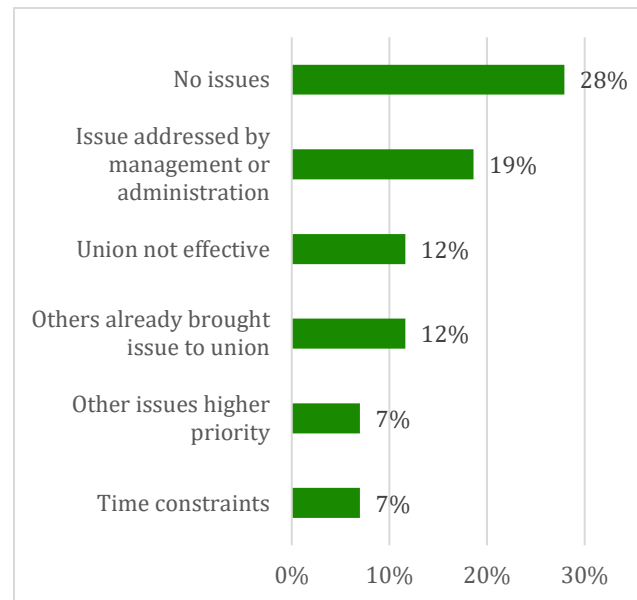
Figure 12: Issues brought to association or union



Thirty-nine per cent of these respondents reported that the issue was successfully resolved, 43% said that the issue was not resolved and 17% said that bargaining was still in progress.

For those who did not attempt to bring issues to their association or union (60%), the most common reason was that they just did not have an issue to raise (28%). Of those who did have issues, however, the most common explanations for not bringing them to the association or union were that the issue was adequately addressed by management or the administration (19%), that they did not believe their association or union would be effective and/or that they would not be heard by the association or union as counsellors (12%) and that others had already brought the issue to the association or union (12%).

Figure 13: Reasons issues not brought to association or union



General respondent comments

Respondents were given the option to provide additional comments about topics not covered in the survey, and these comments varied widely. Some respondents were positive about their academic staff associations. One respondent reported “I have felt very supported by my faculty association and my research has served to support student success and add to the university’s reputation.” However, some respondents reported that they felt their voices were not heard in their academic staff associations, or that the issues unique to their roles as counsellors were not well understood or supported. One respondent commented, “I think the addition of counselling representation is important; our services do not fit a typical faculty model which can be problematic.”

Respondents also expressed concern about the impact of administrative decision-making and resource shortages on their ability to provide quality services. As one respondent put it, “Being unable to offer an adequate amount of care to the majority of students presenting for service is demoralizing, and is, without question, the most stressful and overwhelming aspect of my job.” Increased involvement of counsellors in high level decision-making was suggested as a solution by some respondents, as well as increased permanent staffing. Concerns were also raised about shifts toward

contract, third-party and online-only counselling services.

Conclusion

Given the limits of the survey's response rate and sample consistency, further research on post-secondary Counselling Faculty would be beneficial. Determining the total number of Counselling Faculty and post-secondary mental health professionals in Canada is necessary to make more definitive claims about the challenges facing this sector.

The Council motion noted a concern about a shift away from Counselling Faculty as the primary mental health professionals on campuses — repeating this survey or similar research in the future would help create longitudinal data to show the existence and/or severity of this possible trend.

Academic staff associations and unions should endeavor to ensure that their counselling members are aware of the support that their union can provide, feel heard amongst other members (particularly if counsellors are a small group in the association or union) and understand the different roles of management versus the union in addressing workplace issues.

Workload — and related issues such as increased demand for services and understaffing — is a pressing issue for many post-secondary counsellors. This issue

has been compounded by COVID-19 for many but is not entirely caused by the pandemic. Academic staff associations advocating to protect the integrity of their members' jobs and pushing back against resource cutbacks should ensure that they understand and account for the unique ways these issues may play out for counselling members. The fact that half of the respondents have identified a negative impact of their workload on their health is alarming. Associations and unions representing counsellors need to ensure adequate collective agreement language regarding workload that protects against erosion of certain elements of their workload (such as research), unreasonable increase in caseload and other relevant issues raised by counsellors. Additionally, since the COVID-19 pandemic has prompted the introduction of a hybrid model of providing counselling services, such processes need to be negotiated to address counsellors' concerns regarding any permanent changes including impact on their workload, quality of service and professional integrity of such services.

Since outsourcing has become a trend in many institutions, academic staff associations and unions representing counsellors also need to bargain for or protect collective agreement language against outsourcing and, at a minimum, ensure that there is no reduction in counselling members' complement and ideally that complements be improved.

Appendix A - List of institutions represented

Colleges

British Columbia Institute of Technology
 Camosun College
 Cégep de Chicoutimi
 Cégep de Granby - Haute Yamaska
 Cégep de Matane
 Cégep de Saint-Laurent
 Cégep de Trois-Rivières
 Cégep de Victoriaville
 Cégep du Vieux Montréal
 Cégep Édouard-Montpetit
 Cégep de l'Outaouais
 Collège communautaire du Nouveau-Brunswick
 Collège communautaire du Nouveau-Brunswick, campus d'Edmundston
 Collège d'Alma
 Collège de Bois-de-Boulogne
 Collège Montmorency
 College of the North Atlantic (CNA)
 Grande Prairie Regional College
 Holland College
 Kwantlen Polytechnic University
 Lakeland College
 Medicine Hat College
 Mohawk College
 New Brunswick Community College
 North Island College
 Okanagan College
 Olds College
 Red River College
 Seneca College of Applied Arts and Technology
 Sheridan College
 Vancouver Community College

Universities

Alberta University of the Arts (formerly ACAD)
 Bishop's University
 Brandon University
 Capilano University
 Concordia University
 Concordia University of Edmonton
 Dalhousie University
 Kwantlen Polytechnic University
 Laurentian University of Sudbury/ Université Laurentienne de Sudbury
 MacEwan University
 Memorial University of Newfoundland
 Mount Royal University
 Royal Roads University
 Ryerson University
 The King's University
 Université de Hearst
 Université du Québec, Institut national de la recherche scientifique
 University of Alberta
 University of British Columbia
 University of Calgary
 University of Toronto

Appendix B - Survey questions

1. This survey is for people employed at Canadian universities, colleges or polytechnics. In which type of institution are you currently employed?
 - University
 - College, Institute or Polytechnic
 - Not employed at a Canadian university, college, institute or polytechnic
2. What is the name of the university where you worked in 2020-2021? (If more than one, please select the university at which you spent the most time.)
3. What is the name of the university where you worked in 2020-2021?
4. What is the name of the college, institute or polytechnic where you worked in 2020-2021? (If more than one, please select the one at which you spent the most time.)
5. What is the name of the college, institute or polytechnic where you worked in 2020-2021?
6. What is your job title? (This may differ from your professional designation.)
 - Counsellor/Counselling Faculty/Professional Counsellor
 - Therapist/ Counselling Therapist
 - Psychologist
 - Psychotherapist
 - Social Worker
 - Counselling Associate Director/Director
 - Clinical Coordinator
 - Administrative support staff
 - Other (please specify)
7. What is your employment status?
 - I am employed full-time
 - I am employed part-time
8. Please choose only one of the following
 - I am tenured / continuing, regular or a permanent employee
 - I am on tenure track/ pre-tenure or have a probationary appointment
 - I have a limited-term appointment (which includes as specified duration or end date)
 - I have a casual appointment (hired on an as-needed basis without a specific term and no expectation of permanent employment)
 - Other (please specify)
 - Don't know

9. Are you a member of your employing institution's faculty association?
- Yes
 - No
 - Don't know / Unsure
10. To which faculty association do you belong?
11. Are you a member of your employing institution's union?
- Yes [please specify]
 - No
 - Don't know / Unsure
12. How long have you been in this role?
- Less than 2 years
 - 3 to 5 years
 - 6 to 9 years
 - 10 to 14 years
 - 15 to 19 years
 - 20+ years
 - Don't know/ no response
13. As a faculty counsellor, do you have (check all that apply):
- A parallel process for obtaining promotion and tenure as other academics in your association?
 - Academic freedom?
 - The option to teach?
 - The option to conduct research?
 - The option to provide community service?
 - The option to take a sabbatical and/or study leave?
 - to conduct your work exclusively within a set regular work schedule (prior to COVID-19 changes, for example, 9-5, during the centre's operating hours)?
14. Do you have the right to participate in any of the following collegial governance activities? (Check all the apply.)
- Being an active member of Council
 - Being an active member of Senate
 - Being an active member of the Board of Governors
 - Sitting on hiring committees
 - Sitting on committees that oversee counselling services

15. Understanding that your work may have changed since the beginning of the pandemic, how would you describe your work activities **before the pandemic**? (Please provide a percentage for each, totaling 100%.)

- Counselling (personal, group, career, academic, etc.) : _____
- Outreach (workshops, training students/faculty, etc.) : _____
- Teaching : _____
- Research : _____
- Disability accommodations : _____
- Supervision : _____
- Administrative duties : _____
- Other (please specify) : _____
- Don't know / no response : _____
- Total : _____

16. Which types of counselling do you provide?

- Individual counselling
- Group counselling
- Career counselling
- Academic counselling
- Study skills counselling
- Crisis counselling
- Other (please specify)

17. Which types of outreach do you provide?

- Class presentations on counselling services
- Workshops for students
- Training for students or faculty
- Other (please specify)

18. With which regulatory body, are you registered and/or licensed? (Check all that apply.)

- Not registered or licensed
- Provincial College/Association of Registered Psychotherapists
- Provincial College/Association of Counselling Therapists
- Provincial College/Association of Psychologists
- L'Ordre des conseillers et conseillères d'orientation du Québec
- Provincial College/Association of Social Workers
- Other (please specify)

19. How much autonomy do you have in determining the treatment plan for your clients?

- Complete autonomy
- Some autonomy
- Little autonomy
- No autonomy
- Other (please specify)
- Don't know / no response

20. When do you plan to retire?

- 1 to 4 years
- 5 to 9 years
- Within 10 years
- More than 10 years
- Don't know / no response

21. Does your Centre use any of these options to manage demand for service? (Select all that apply.)

- Cap on the number of sessions per student
- Clients triaged by urgency
- First-come first serve
- Single session therapy
- Group services added and/or more clients redirected to existing group services
- Wait list
- Client appointments scheduled less frequently
- Length of appointments reduced
- Outreach activities reduced
- More clients referred to off-campus services
- Centre staff routinely work additional hours and/or skip breaks
- Additional trainees recruited
- Reduced time for administrative tasks
- Other (please specify)
- Don't know / no response

22. How does your Centre cap/limit the number of counselling sessions available per student?

- We have flexible session cap/limit (exceptions made in certain situations).
- We have session caps/limits, but exceptions are made in rare cases.
- We have hard session caps/limits.
- Other (please specify)
- Don't know / no response

23. Over what time span are counselling sessions capped for students? Per:

- Week
- Semester
- Academic year
- Calendar year
- Lifetime
- Other (please specify)
- Don't know / no response

24. Approximately, how many counselling sessions per [Q23] can each student receive?

25. In your position at the Centre, to whom do you provide services? (Select all that applies.)

- Full-time students
- Part-time students
- Employees at your institution
- Community members/people not registered as students?
- Other (please specify)
- Don't know / no response

26. How often do you provide services to community members / people not registered as students?

- Never
- Occasionally/sometimes
- Regularly
- Don't know / does not apply

27. How easy is it to successfully refer clients to other campus services or community resources?

- Very difficult
- Somewhat difficult
- Somewhat easy
- Very easy
- Don't know / no response

28. Please enter the average of the following:

Number of counselling hours per week _____

Your annual caseload _____

29. How likely are you to be involved in the decision-making process of your institution's mental health initiatives?

- Never
- Almost never

- Occasionally/sometimes
- Almost every time
- Every time
- Don't know / no response

30. You mentioned that you have been employed in this role for [Q12] years. If you think back to this earlier time, have these factors changed over the course of your employment?

	Increased	Stayed the Same	Decreased	Unsure
Number of sessions per week				
Length of sessions				
Annual caseload				
Number of counsellors employed at your centre				
Involvement in institutional mental health initiatives				

31. Are there any other factors not mentioned in the previous question that have changed over the course of your employment? Please explain.

32. Since the beginning of the COVID-19 pandemic (March 2020), how has your workload been impacted? Has it:

- Increased
- Stayed the same
- Decreased
- Don't know / no response

33. How would you describe your workload?

- Very manageable
- Somewhat manageable
- Somewhat unmanageable
- Very unmanageable
- Don't know / no response

34. Do you believe that your workload is hurting your health?

- Yes
- No
- Don't know / no response

35. You indicated that your workload has increased since the start of the pandemic. Which of the following factors contributed to this increase? (Select all that apply.)

- Additional job duties
- Additional administrative tasks
- Increased demand for services
- Lack of resources
- More meetings
- New technology (i.e., computers)
- Staff reductions
- Understaffing
- Training other employees
- Other (please specify)

36. You indicated that your workload has decreased since the start of the pandemic. Which of the following factors contributed to this decrease? (Select all that apply.)

- Decreased demand for services
- Decreased service offerings
- More staff hired
- Other (please specify)

37. How did you deliver counselling sessions prior to COVID-19?

- Video/telephone only
- Primarily video/telephone
- Mix of video/telephone and in-person
- Primarily in-person
- In-person only
- Other (please specify)
- Don't know

38. Since the beginning of the COVID-19 pandemic, has your counselling delivery mode changed?

- Yes
- No

39. How has your counselling delivery mode changed since COVID?

- We only provide counselling by Video/telephone
- We primarily use video/telephone
- We do a mix of video/telephone and in-person
- Primarily in-person
- In-person only
- Other (please specify)

40. Do you expect the change in delivery mode to remain after the pandemic?

- Yes (please explain)
- No (please explain)
- Don't know

41. Have you attempted to address any issues related to your work condition via your faculty association or union?

- Yes
- No
- Don't know

42. What issues did you try to address in bargaining and were these attempts successful? Please explain.

43. Why have you not tried to get these issues addressed via bargaining of your collective agreement? Please explain.

44. How do you identify:

- Woman
- Man
- Gender-fluid, non-binary, and/or two-spirit
- Prefer to self-describe in comments (specify)
- Prefer not to say

45. Do you identify as an Indigenous person (Métis, First Nations, Inuit)?

- Yes
- No
- Prefer not to say

46. Using Statistics Canada's Census categories of race and ethnicity, are you: (Select all that applies.)

- White
- South Asian (e.g., East Indian, Pakistani, Sri Lankan)
- Chinese
- Black
- Filipino
- Arab
- Latin American
- Southeast Asian (e.g., Vietnamese, Cambodian, Laotian, Thai)
- West Asian (e.g., Iranian, Afghan)
- Korean
- Japanese
- Other group (please specify):
- Prefer not to say

47. For each of the following, mark Yes or No. Do you consider yourself to be a person:

- Living with a physical disability
- Living with a learning disability
- Living with a mental health problem or illness
- Living with low vision/vision disability
- Who has difficulty hearing
- Living with a disability not listed above, please describe

48. Please select your age range:

- Less than 30 years old
- 30 to 39 years old
- 40 to 49
- 50 to 59
- 60+
- Prefer not to say

49. Please select your highest completed academic qualification.

- High school diploma or a high school equivalency certificate
- College, CEGEP or other non-university certificate or diploma
- Bachelor's degree (e.g., B.A., B.Sc., LL.B.)
- University certificate or diploma above bachelor level
- Master's degree
- Doctorate (e.g. PhD, Ed.D, Psy.D)
- Other (please specify)
- Prefer not to say

50. Is there anything else related to the topic of this survey you would like to share?