Introduction

This report looks at all the counselling work undertaken to date with young people aged 11-25 years by Mindspace, the counselling service for Perth Association for Mental Health. It gives an overview of the activities undertaken, the advantages and disadvantages of each place in which counselling has occurred, and some statistical information about the service. Finally, it provides a summary of the feedback and evaluation of the service by users and referrers and explores some untapped opportunities identified during our work with this age group.

Overview

The counselling service of Perth Association for Mental Health has been open to 16 – 65 year olds, however for many years the youngest people accessing the service were in their late twenties. With the arrival of some students on placement with an interest in working with young people, the service co-ordinator started to look at how we might support younger people through counselling.

In 2002, the Go-Project, a support service for young people leaving care, had secured some additional funding for the provision of counselling within their service. They approached PAMH to provide and manage a counsellor providing 6 hours of counselling a week. This service continued until the end of 2005 when the Go-project closed following withdrawal of funding.

In 2003, the student support service at Perth College were looking to offer some emotional and therapeutic support to some of their students who were hampered in their studies by issues elsewhere in their lives. They too approached PAMH to provide and manage this service for them. This service continued until December 2005 when funding was withdrawn.

These two services gave us the opportunity to find out more about how to engage and work with teenagers and young adults and to show that counselling could benefit this age group. We were also able to explore how to work in partnership with other organisations to support vulnerable young people.

As an organisation, we were still looking for an opportunity to encourage more young people to access the counselling service. In 2004, with Choose Life funding available, we joined up with the Perth Community School, PLUS, and the Public Health Team to bid for funding to trial a young people’s counselling service based in a variety of locations around Perthshire. These were a secondary school, a rural GP surgery, two city based Medical Centres, a health service centre for the homeless, and at the PAMH counselling rooms. We called the service Mindspace Young People’s counselling service. Three counsellors with experience in working with young people were employed to deliver the service. This service ran from November 2004 to March 2008. Having a team of counsellors and ongoing funding enabled us to develop leaflets, forms and evaluation specifically targeted at young people and to be able to widely advertise the service. After a year, we had firmly
established the benefit of counselling for this age group and that specifically targeting this age group supported them to access counselling when they previously hadn’t. We also noticed an increase in the number of referrals of young people from GPs who had previously been sceptical that such a service was needed or would be of benefit to their patients.

Another opportunity for the development of the service came in 2007 with the availability of area based regeneration money in Blairgowrie which enabled us to base a counsellor in a youth project. Determined to Succeed money, in the same year, was used to provide counselling in a second secondary in Perth.

**Places counselling undertaken**

Secondary schools: *Perth Academy, Perth Grammar, Blairgowrie High*

GP surgeries and Medical Centres: *Caledonian Road, Whitefriars Green Practice, Aberfeldy, Central Health Care Services*

Dedicated counselling rooms: *Mindspace*

Within other projects: *Go-project, Strathmore Youth Community Development*

FE college: *Perth College*

**Statistics**

**Numbers accessing the service**

Between January 2005 and April 2008 the service was accessed by a total of 615 young people. 57% of these were aged 11 – 17 years and 43% 18 – 25 years.

In both age groups roughly a third of clients were boys/men and two thirds girls/women.
Sessions per client

For clients accessing service between January 2005 and April 2008:

<table>
<thead>
<tr>
<th>Location</th>
<th>% of clients who did not attend an IA following their request for counselling</th>
<th>% of clients who attended 1 or more sessions</th>
<th>Average number of sessions attended per client</th>
<th>Average number of session not attended or cancelled late per client</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mindspace Rooms</td>
<td>44%</td>
<td>56%</td>
<td>4</td>
<td>1.5</td>
</tr>
<tr>
<td>GP Surgeries</td>
<td>33%</td>
<td>67%</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>Secondary Schools</td>
<td>14%</td>
<td>86%</td>
<td>5</td>
<td>2</td>
</tr>
</tbody>
</table>

CORE (Clinical Outcomes in Routine Evaluation) Scores

CORE is an evaluation system that was developed to provide practice-based evidence for psychological therapy services. It uses a client self-report questionnaire designed to be administered before and after therapy. The client is asked to respond to questions about how they have been feeling over the last week on a 5-point scale from ‘not at all’ to ‘most or all of the time’. The responses are designed to be summed to produce a mean score to indicate the level of current psychological distress (from healthy to severe). Following the last session, the questionnaire is repeated, and the comparison of the pre and post-therapy scores offers a measure of ‘outcome’. That is, whether or not the client’s level of distress has changed, and by how much.

For the period January 2007 to April 2008, the clients of the young people’s service recorded an average pre-therapy CORE score of 20 which equates to moderate to severe distress. Their average post-therapy score was 13, which equates to mild level of distress. This shows a general improvement over the period of clients attending counselling.

Issues brought to counselling

These were recorded at the initial appointment.

Anxiety 51%
Depression 47%
Self esteem 43%
Bereavement/loss 38%
Mindspace Counselling Service

Family relationships 36%
Abuse 22%
Trauma 19%
Peer relationships 18%
Eating disorders 12%
Work/Academic 12%
Physical problems 11%
Addictions 8%
Self Harm 8%
Learning difficulties 5%
Psychosis 4%
Other issues 14%

Evaluation from clients

- All but one client felt that they had enough information about the counselling service before they met the counsellor. (Unfortunately, the one person who would have liked more information did not say what she would have like to have known).

- 86% of clients who completed an evaluation form were either satisfied or very satisfied with the counselling service.

- 100% of respondents thought that counselling had helped them. 38% thought counselling had helped them a lot, 38% thought quite a lot, and 24% a little.

- 96% of respondents said that they would definitely (61%) or probably (35%) use the counselling service again.

- 91% of respondents said that they would recommend the counselling service to a friend. (Definitely – 59%, Probably – 32%)

- 100% of respondents gave a score of 7 or more when asked to judge the importance of having a young persons’ counsellor on a scale of 1 – 10.

Summary of how counselling helped (full details in Appendix 1)

- Able to talk to someone outside of family members and friends
- Feel better about self, increased confidence
- See things in a different way and finding new approaches
- Re-establish relationships with family
- Confidential, non-judgemental and trusting relationship with someone who listens
- Achievement of personal goals, able to move on from past experiences
- Sharing of things not spoken about previously with anyone
Summary of suggestions for improvements to the service (full details in Appendix 2)

- More appointments outwith school hours
- Using rooms conducive to a welcoming and relaxing environment
- Continue the service beyond March 2008

Summary of Feedback from referrers (full details in Appendix 3)
Referrers to our service included GPs, Psychiatrists, teachers, social workers, and other professionals

- Positive and beneficial effect on young people who have an opportunity to talk about difficult issues affecting them
- Lessens the prescribing of antidepressants
- Provides a service that is different from that which other professionals can provide and takes pressure off others who are not trained to work emotionally and therapeutically
- Provides an option for distressed young people under 16 years of age
- A valuable and fantastic service providing fast and effective counselling to a vulnerable group of people with various complex problems
- Having a service geared towards young people is helpful

Suggested improvements

- Opportunity to share strategies and advise key staff, provide counselling skills training
- Make counselling service available in all secondary schools
- Make it a long term resource with consistent funding
- Increase capacity to cut waiting times and reach more young people
- Explore options for group work with young people
- Greater flexibility in number of sessions when working with homeless YP

Conclusion

Advantages and disadvantages of each location

<table>
<thead>
<tr>
<th>GP Surgery</th>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>All young people within the age range are able to access the service</td>
<td>Gp consulting room not easy to convert to a counselling room. Eg no comfy chairs, clinical.</td>
<td></td>
</tr>
<tr>
<td>Many referrals come from GPs, their patients can then see a counsellor in the same building.</td>
<td>Evening appointments limited as many surgeries close by 6pm</td>
<td></td>
</tr>
<tr>
<td>Closer communication with GPs and feedback on their patients</td>
<td>School pupils sometimes need to miss a considerable part of a school day to attend each counselling session as GP surgeries are not located adjacent to</td>
<td></td>
</tr>
</tbody>
</table>
### Mindspace Counselling Service

<table>
<thead>
<tr>
<th>Offers GPs an alternative to prescribing anti-depressants</th>
<th>Variable attitudes of practice managers towards counselling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gives GPs an option for &lt;16 years for whom antidepressants and tranquillisers are not an option</td>
<td></td>
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</tbody>
</table>

#### Secondary School

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pupils need only miss one lesson a week to attend counselling and this can be a different lesson each week</td>
<td>Only a third (11-17 year olds) of the target age group (11-25 years) can access the service and only from the school where the service is based.</td>
</tr>
<tr>
<td>School is often the place where yp’s difficulties are picked up and so they have immediate direct access to a service</td>
<td>Pupils fear that counselling will not be confidential as school confidentiality is more ‘flexible’</td>
</tr>
<tr>
<td>A dedicated counselling/interview can be available with comfy furniture and counselling materials</td>
<td>Pupils worry that their friends/teachers will find out they are coming when they do not want this to be the case</td>
</tr>
<tr>
<td>Teachers have available the counsellor as a consultant regarding issues with pupils</td>
<td>Service only available to pupils during school term times. No support during the holiday times, which can be a difficult time for some YP</td>
</tr>
<tr>
<td>Able to employ counsellor specialising in work with teenagers</td>
<td>Counsellors lone working can become isolated</td>
</tr>
<tr>
<td>Option of a drop in service</td>
<td>Drop in service sometimes difficult to organise if pupils are not allowed in the school building outwith lesson times</td>
</tr>
<tr>
<td>Direct link to consultation on Child Protection Issues with nominated ‘officer’ at school</td>
<td>Pupils sometimes struggle to remember the time of their next appointment as it varies from week to week</td>
</tr>
<tr>
<td></td>
<td>Rooms may be difficult to retain</td>
</tr>
</tbody>
</table>

#### Youth Project

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct access to the service by young people using the project</td>
<td>YPs worry that what they say may not be confidential and that other YP workers may find out what they are saying</td>
</tr>
<tr>
<td>Access the service in a place that is familiar</td>
<td>YPs seen by other project users, so keeping their attendance confidential is difficult</td>
</tr>
<tr>
<td>Project workers can encourage the YPs to access the service</td>
<td>Only YPs who can access that project can be seen by the counsellor (some projects are specific to a target group eg. care leavers)</td>
</tr>
<tr>
<td>Counsellor available as a consultant for</td>
<td></td>
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</tbody>
</table>
### Child and Adolescent Mental Health Services Inquiry

**Mindspace Counselling Service**

<table>
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<tr>
<th>Advantages</th>
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</thead>
<tbody>
<tr>
<td>Direct access to the service by young people studying at the college</td>
<td>Only young people enrolled at the college may access the service</td>
</tr>
<tr>
<td>Option of a drop in service</td>
<td>Service only available during term times when the college is open. No support during vacations.</td>
</tr>
<tr>
<td>Young people seen in a setting with which they are already familiar</td>
<td></td>
</tr>
<tr>
<td>Placing within the Student services section provides opportunity for multi-displinary working and consultancy work</td>
<td></td>
</tr>
<tr>
<td>Counsellor available as a consultant for lecturers and other college staff</td>
<td></td>
</tr>
<tr>
<td>Young people can be offered appointments that fit around their college course times</td>
<td></td>
</tr>
<tr>
<td>Possible to employ specialist counsellor in student counselling</td>
<td></td>
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</tbody>
</table>

### FE college

<table>
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<tr>
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</tbody>
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### Dedicated counselling service

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rooms set up specifically for counselling</td>
<td>YP seen in unfamiliar surroundings initially</td>
</tr>
<tr>
<td>Therapy materials readily available for use in sessions</td>
<td>More difficult to arrange a drop in service</td>
</tr>
<tr>
<td>Possible to employ specialist counsellors for work with 11-17 year olds and 18 – 25 years</td>
<td>Requires robust referral procedures to ensure take-up</td>
</tr>
<tr>
<td>All young people within 11-25 years age group able to access the service</td>
<td></td>
</tr>
<tr>
<td>Option of post-4pm and evening appointments for school pupils and those in full time employment</td>
<td></td>
</tr>
<tr>
<td>GP trusted service</td>
<td></td>
</tr>
<tr>
<td>Support for YP counsellors with an established service</td>
<td></td>
</tr>
<tr>
<td>Clients can be seen at the same time each week</td>
<td></td>
</tr>
</tbody>
</table>

Things we have learnt about working with young people which would be useful to bear in mind for any future service
• Young people, particularly those under 18, prefer to be seen by the same person throughout (initial appointment and ongoing sessions).
• Young people, particularly those under 16, are intolerant of waiting for a long time to see a counsellor after their initial appointment.
• Their issues tend to be intense and short lived, particularly for those under 16. A ‘drop in’ service with sessions of 15 – 30 mins can work well in this age group.
• Support for counsellors working in outreach locations is essential to lessen the feelings of isolation – achieved by having a team of counsellors who met regularly.
• Young people of all ages are able to self refer, though many are encouraged to come by an adult eg. GP, teacher, support worker.
• Young people are more likely to engage in counselling when they self refer.

- 11-16 years tend to come for less sessions (1-4). Older clients will come for more sessions – generally up to 20 sessions and in some cases, over one year. The average number of sessions varies from 4.5 in schools to 6.5 in GP surgeries.
- YPs are more likely to engage in counselling if they seen quickly after they have requested the service. We tried to see all YPs for an initial appointment within 2 weeks of receiving their request form.
- Counsellors using mobile phones was a highly effective way of receiving requests for counselling and making appointments with this age group.

Appendix 1

The ways in which evaluation respondents found counselling useful

• It gave me a chance to talk about what was going on, and sort through stuff in my head.

• That I could talk to some else instead of a family member.

• It changed my way of seeing things, now I feel like the way I feel is normal and its just part of life.

• Helped me realise what the problem wasn’t.

• It was nice having someone neutral to talk to. The counsellor helped me achieve my goals that I thought I would never be able to.

• I was able to speak to someone and feel like there was someone who wanted to help.

• It had helped me to feel better about myself and improve things at school.
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• It’s taught me to not get so worked up about little things and to let go of things not worth worrying about. My confidence has also grown throughout the sessions.

• It really helped to have someone who wasn’t personally involved to talk to. I will really miss that and don’t understand why such a fantastic service is getting taken away

• It was useful to be able to meet with someone with an outside perspective and say exactly what is on my mind and what has happened during the week knowing it is entirely confidential

• Things stuck way down were helped to come out, no judgement, felt like I had someone I could trust

• It was useful to me because I had someone to talk to

• Helped me get things off my chest. Things I could not tell anyone who knew me

• Just helps to get things off your chest and so you can tell someone you can trust

• Counselling helped me regain my relationship with my mum, also helped me become more confident, and to say ‘NO’ to people

• It gave me the opportunity to speak about issues I was unable to talk about elsewhere. Being given this time allowed me to work through certain problems and gave me a different way of looking at, and approaching things

• Useful as was able to accept things that have happened in the past and move on
• It helped being able to talk to somebody ‘outside the circle’ who would not or could not judge me. It was useful having someone who listened

Appendix 2

Evaluation respondents comments on what they thought might improve the service

• A counsellor at the school would be great
• I would have liked to have completed the whole 20 sessions but funding was withdrawn
• It is really disappointing that the young people’s counselling service is ending. I know I qualify for the adult service but I feel for people who are younger and more vulnerable
• Don’t get rid of it, I don’t know where I would be now if I didn’t have the help from a counsellor. I feel very let down by the people who are taking it away, it’s obvious they just don’t care what happens to us
• Don’t pull funding half way through
• Just keep doing what you do best. Using this service has helped me with my problems
• Although my counsellor made the best of the environment, a GP’s office is not conducive to a relaxing atmosphere
• Communicate with the parents, we do worry. The counsellor has not been in touch with us at all and our son will not tell us anything.
• Better times for young people who are at school. Times after school would be more beneficial, so as to not fall behind on work.
Feedback from Referrers

Have you been aware of any effect the service has had on young people?

Schools
- Pupil has felt she has been listened to and her concerns/worries acknowledged
- Boy who was not attending several classes settled into attending a number and was more amenable
- Having a service based in school was of huge benefit to young people and staff
- Very positive, one young person indicated that this service was a lifeline
- Pupils like the service but seemed to stop very quickly
- Positive place for young people to go and have the opportunity to talk and work through issues affecting them
- Chance to talk to someone completely confidentially has been appreciated
- One very positive, one totally negative, one didn’t pursue, one on waiting list

GP Surgeries
- Fantastic counselling service in a group where we cannot use antidepressants and there is no other available service
- Very positive effect: source of support; lessens prescribing of antidepressants
- Yes, very helpful to patients
- The service has been a fantastic way of accessing counselling to young and often vulnerable children and young adults
- All patients have felt very positive about the service and clinically, the service has had a huge impact
- Very beneficial
- I have several patients who have gained significant benefit from this service
- No direct feedback from patients so difficult to comment
- Yes, positive feedback from many people, benefit perceived by most who attended
- In my experience all found it beneficial and have helped to progress with things

Other NHS professionals
- 1 person very positive, 2\textsuperscript{nd} did not take up the service, 3\textsuperscript{rd} did not think it was worthwhile, but client very difficult to engage
- No: I tend to refer patients to the service
- Mindspace is viewed by young people as a very helpful step from often intense therapy, to support delivered at their pace, in their community and without stigma of attending a hospital or GP practice

Social Work
• It has started the process of young people dealing with difficult issues, which prevent them from getting on in life.
What difference, if any, has it made to your organisation to have this service available?

Schools
- Has helped to provide specialist support especially when we have just lost our Pupil Support Worker. Has helped one pupil to limit telling her worries to one person, instead of telling everyone
- This has provided a service which teachers (even guidance) cannot – professional, confidential service which pupils have confidence in
- It has taken the pressure off other workers in school
- Guidance teachers do not have the time or the depth of skill required to conduct a thorough counselling session. This service has provided that expertise
- Good to have a specialist but too short a time actually in the school
- Freed up some time – also and more importantly has been a great non-institutional service that our young people can access
- I think it is a hugely important part of our aim of building the emotional intelligence of pupils so that they can learn
- Another supportive option/strategy

GP surgeries
- Fantastic service – if we see patients <16yrs we have nowhere to refer them for counselling on the NHS
- Service has been invaluable in terms of offering necessary help and not leaving a feeling, as a GP, that we have nothing to offer
- Fast and effective counselling
- It has been the only service we have for offering counselling and support to troubled and often disturbed young people
- It has made helping and supporting young people with problems +/- low mood much easier. A very valuable service
- Very beneficial
- This is a vulnerable group of people with variable complex problems. There was previously little help available
- Useful for younger patients to have someone to spend time with
- Resource for helping a ‘difficult to help’ group of patients. Has been a great aid to patient management
- Fantastic service. There has previously been a significant gap in local support for these people

Other NHS professionals
- Would love it to continue. Feel it is greatly need. Just starting to appreciate service
- Helpful to have a service to suggest and the fact that it is geared towards the yp is helpful
- With difficult to engage young people, Mindspace offers quality input to vulnerable people who may otherwise have no support

Social work
Child and Adolescent Mental Health Services Inquiry
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- It has been beneficial to have this service to allow various young people the opportunity of receiving specialist help and advice in how to deal with difficult issues in their life

**Can you suggest ways in which any future service could be improved?**

**Schools**
- To be more effective there has to be an opportunity to share strategies/advise key staff of successful approaches to help individuals. This can be done without compromising confidentiality
- Similar format, confidential meetings by appointment 2-3 days a week.
- Look at counselling service being made available to all secondary schools
- Yes, it could continue! This is the second time in 8 months that the resource has been pulled
- Long term resource
- Consistent funding - or a means by which young people can continue to attend outwith school. I have pupils who are presently very concerned as they have reached a certain point in their journey to realise the wider issues and resolve them but are now highly anxious as to how they will continue this
- I would like to see counselling training for staff and young people so that the benefits could be extended
- Less waiting lists! More/increased staff availability

**GP surgeries**
- Bring back the service!
- Keep the service we have, in the first instance, and then extend the hours!
- Yes, permanent funding
- By restarting ASAP
- Reinstate current system
- Must be carried on and in surgery if possible
- I would strongly support further funding to keep this service running
- Capacity. Given number of patients we see capacity has not been sufficient
- Re-instate practice based young people’s counselling
- Continuing it would be good

**Other NHS professionals**
- No. Would need to find more evidence over a longer period of time
- Shorter waiting list
- More resources to continue individual work but also to look at group work as a treatment

**Social work**
- Mindspace operated in a very structured way, in terms of limited number of sessions and attendance of yp being near 10%(or 70% - writing unclear). Appreciate that attendance need to be controlled, but homeless YP have
very unsettled, day to day lives. Very happy with this service overall and professionalism of staff
Any other comments?

Schools
- Valuable resource which should be prioritised for a school like PGS
- Very sorry to see this service withdrawn, young people will be the losers – not just those using the service but those whose education is disrupted by some youngsters who cannot cope with school life without some emotional support
- We were unaware both times it happened that this resource was to be withdrawn. Pupils who rely on it feel left in the lurch. The counsellor has made a big difference to the lives of some pupils at PGS
- Young people need to have access to this service within the school. Should be part of the school support service
- Well done – I think you were doing a great job and hope that new funding is found to allow it to continue
- Positive situation – boy very happy with outcome
- Have read info and believe it to be a useful service

GP surgeries
- Losing this service is extremely detrimental to the management of mental health issues in young people. We now have no counselling options
- Many thanks for all your help
- This is a very valuable service that has been upheld by patients and staff alike
- Many thanks for the benefit you have given my patients
- Thank you
- A great service, A real pity it has been stopped. My patients will be the losers here
- Hopefully funding can be found to continue the service

Other NHS professionals
- Hope service can be funded
- Good service – would be sorry to lose it

Johanna Babbs
Counsellor
Mindspace Counselling Service
19 January 2009