



**Cymru  
Wales**

**Report**

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**Developing school  
counselling services  
for children and young  
people in Wales**

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# 1. Introduction

This document provides a useful summary to which practitioners in schools and other educational settings can refer as they develop a local response to an identified national need to develop counselling services for children and young people.

Drawing on a range of sources, the document outlines the key policy steps in Wales which underpin the development of counselling services for children and young people. It explores the definition and concept of counselling, and the issues it can help to address. Research evidence on the impact of counselling is also presented, along with some of the factors to be considered when designing counselling services.

The review focuses primarily on schools-based counselling as opposed to independent provision delivered outside schools. Most of the published research is based on counselling in schools, and little systematic research relating to provision outside of the school environment was available.

## 2. Defining counselling

The concept of counselling has been interpreted in a range of ways. The BACP have emphasised the volitional nature of counselling, outlining that

‘Counselling takes place when a counsellor sees a client in a private and confidential setting to explore a difficulty the client is having, distress they may be experiencing or perhaps their dissatisfaction with life, or loss of a sense of direction and purpose. It is always at the request of the client as no one can properly be ‘sent’ for counselling’

(BACP, <http://www.bacp.co.uk/education/whatiscounselling.html>)

A broad definition was adopted by the Welsh Government, (at the time the Welsh Assembly Government but referred to throughout as WG), for the purpose of their Schools Counselling Strategy (2008):

‘a range of activities, which includes listening and other support for children and young people by a qualified counsellor. In this strategy we make a clear distinction between formal counselling and using counselling skills: Formal Counselling is undertaken by a professional, appropriately qualified counsellor acting in his or her specialist role and in accordance with a recognised code of ethics that requires confidentiality, accountability, supervision and continuing professional development.

Counselling skills are used by many people who work with children and young people in a specific role such as teachers, school nurses, youth workers and social workers. These skills include listening in a non-judgemental way, being empathic and helping people to feel valued and understood. The role and responsibilities of the individual professional will determine the boundaries of their working practice’. (Welsh Government, 2008, p.8)

Distinguishing between formal counselling and counselling skills helps to resolve confusion between counselling and psychotherapy, and between counselling, counselling skills, and helping skills (Lloyd, 1997, cited in Baginsky, 2004). Lloyd stated that all of these aspects are present on a ‘therapeutic continuum’ (Lloyd, cited in Baginsky, 2004, p. 5-6).

The BACP lists the main parts of the counsellor’s role as:

- Listening in a non-judgemental and patient way
- Viewing problems from the client’s perspective
- Assisting the client in seeing issues more clearly and perhaps from alternative viewpoints
- Minimising confusion, and
- Helping the client to make choices and changes (BACP, 2004).

Recognition of the value of counselling children and young people has increased in recent years and it is now more accepted than ever before (Pattison and Harris, 2006). This is partly due to movements in policy-making towards a more inclusive, child-led and rights-based approach, with the Children Act (2004) playing an instrumental role (Harris and Pattison, 2006). These policy changes are underpinned by a shift in policy makers' perspectives regarding the impact of counselling in helping to secure improved outcomes for children and young people.

### **Key findings**

Counselling has been defined in different ways. The BACP emphasise the volitional aspect of counselling. The WG has adopted a broad definition of counselling. (2008 Schools Counselling Strategy.) It outlines the types of activities counselling can include, and distinguishes between formal counselling and counselling skills.

Formal counselling is delivered by a trained and qualified counsellor acting in accordance with a recognised ethical code. Counselling skills are used by those working with children and young people in a specific role, and include listening, being empathic and helping people to feel valued and understood.

Policy-makers now recognise the value of counselling children and young people more than ever before.

### 3. Developing a culture of support in Wales: the WG response

The development of schools counselling in Wales is underpinned by the WG's commitment to a rights-based approach to the planning and delivery of services for children and young people. Supporting young people to achieve their full potential in the world of work or in further and higher education and in becoming participative and involved citizens is also emphasised in key policy documents such as the [Learning Country: A Paving Document](#) (2001); [The Learning Country: Learning Pathways 14-19](#) (2002); and [Wales: A Better Country](#) (2003).

Schools counselling services were a feature of [Everybody's Business](#) (2001), which outlined the framework for improving Child and Adolescent Mental Health Services (CAMHS) in Wales. Moreover, recommendation 21.29 of the [Clywch](#) enquiry report called for the publication of a strategy for the provision of counselling services for children and young people, with emphasis on promoting the awareness and skills of schools staff:

'I recommend that the Welsh Assembly Government devise a national strategy for the provision of an independent children's counselling service for children and young people in education including provision of appropriate support to children during disciplinary, child protection, complaints and exclusion processes within 12 months of the publication of this report. This national strategy should also consider teachers' pastoral care skills, training and support and the respective roles within pastoral care of teaching staff, counsellors and educational welfare support'

(Children's Commissioner for Wales [2004], p. 189-190).

Recommendation 21.30 of the [Clywch](#) Report also related to the provision of services for children and young people, placing responsibility on school governing bodies to promote pupils' awareness of available information, advocacy and counselling services:

'I recommend that the Welsh Assembly Government within 3 months of the publication of this report require all school governing bodies to ensure that children are informed in their school of the availability and purpose of relevant services, including ChildLine, the NSPCC Child Protection Helpline, social services, the Children's Commissioner for Wales and advocacy services'

(Children's Commissioner for Wales [2004], p. 190).

The four-tier strategic framework adopted in [Everybody's Business](#) formed the structure of the 2005 [National Service Framework for Children, Young People and Maternity Services \(NSF\)](#), which set out national standards and recommended actions for Wales for maternity services, and children and young people's health and social services. The [NSF](#) highlighted the need to promote positive mental health and wellbeing among children and young people through enabling them to have access to good quality mental health services when needed. This would ensure effective assessment, treatment and support. The [NSF](#) also called for a schools-based counselling service, which echoed Recommendation 21.29 of the [Clywch](#) report.

In 2008, the [Strategy for School-Based Counselling in Wales](#) was published. Under the [Strategy](#), all children and young people were to have access to formal counselling, should they need it. The [Strategy](#) recognised that young people should have easy access to a service which is confidential and which meets their individual needs.

Some key strategic documents have followed and supported the [Strategy for School-Based Counselling in Wales](#) (2008). [Talk to Me](#) (2009), the Assembly Government's national action plan to prevent suicide and self-harm, was produced in conjunction with a range of partners including the National Public Health Service for Wales (NPHS). The NPHS compiled some documents which were released in conjunction with the Strategy. They outlined a range of key facts and figures relating to suicide and self-harm among children and young people.

In October 2009, the [School-based Counselling Operating Toolkit](#) was published. Structured around the ten recommendations identified in the BACP study of schools counselling in Wales, the Toolkit provided guidance and standards for developing a schools counselling service. The need for sustainable funding to establish and maintain a service was emphasised in the guidance. It also included considerations for counsellors such as qualifications, resources, accountability, ethics, training and supervision. Expectations for schools were also outlined in the Toolkit, in terms of resources for counselling, monitoring and evaluation, and integration of counsellors and counselling. Example documents for setting up and evaluating a schools counselling service were also included.

In 2010 the WG released an action plan, [Breaking the Barriers: Meeting the Challenges](#) (2010). The action plan pledged to continue to expand school-based counselling services so that schools counsellors are in place in all secondary schools in Wales by December 2011. The action plan also set out that counselling services during school holidays and for children not in school were to be developed further. Stage one of an independent evaluation of schools-based counselling in Wales was published in 2011. Stage 2 (the final report) will be published after October 2011.

Also in 2010, [Thinking positively: Emotional health and well-being in schools and Early Years settings](#) was released. This document outlined good practice identified across a range of services in Wales in promoting positive emotional health and well-being, including schools counselling. Research findings on risk and protective factors for mental health issues were also presented, along with an overview of key supporting policy and strategy steps.

The [Schools Counselling Strategy](#) was published in April 2008. The Strategy was developed in consultation with children, young people and families, in conjunction with a steering group of experienced practitioners in the field of mental health and counselling. Guidance from strategic personnel from education and health services, the BACP and the Children's Commissioner for Wales was also sought in creating the Strategy. To implement the strategy, the WG supplied £8million between 2008 and 2011, and will provide an additional £14.25million between 2011 and 2014.

The aim of the Strategy was to '[set out a plan for developing school-based counselling services for children and young people across Wales that are independent, safe, accessible and of a high standard](#)' (Welsh Government, 2008, p.15). It focused primarily on expanding counselling provision for children and young people in secondary school and those in Year 6 at the transition stage, but also included young people post-16. Plans for developing services for primary school children would be further examined following a series of pilot studies to be conducted using some of the allocated funding between 2009 and 2012.

A series of 14 **principles**, 13 **objectives** and 9 **outcomes** for children and young people was embodied in the Strategy.

In summary, the **principles** related to:

- Developing a 'learner-centred' service, which considers the individuality of the user
- Respecting users' confidentiality and anonymity
- Learners' right to self-refer to the service, and access it through their language of choice, and
- The WG's commitment to monitoring, evaluation and supportive funding.

The principal **objective** of the Strategy was to '[make it acceptable and easier for young people to ask for help when they are upset, worried, confused or afraid](#)' (Welsh Government, 2008, p.17).

The Strategy's other key objectives were to:

- Make schools counselling services more accessible
- Promote schools counselling to potential users as independent of school structures, with the aim of building trust and confidentiality

- Emphasise strong inter-agency working in planning and delivering counselling services, and
- Sharing good practice in effective service provision to practitioners, learners and parents.

**Outcomes** for children and young people primarily focused on:

- The individuality, confidentiality and accessibility of counselling provision
- Fostering positive opinion among service users of the schools counselling services
- Securing improved emotional health and wellbeing ‘to reduce the effect of emotional and mental health problems as a barrier to learning’ (Welsh Government, 2008, p.18)
- Ensuring that counsellors were trained appropriately, were competent in their roles, and could assess when it was necessary to refer young people to more specialist services.

The [Counselling Strategy](#) concluded with a series of 15 actions, which were set against timescales. The key actions can be summarised as follows:

- The timely production of information and guidance for counsellors, children, young people and their parents
- Delivering appropriate training for counsellors and local authority staff
- Consulting with service users for their views on current and future counselling provision, Estyn for guidance on including schools counsellors in inspections, and training providers and counsellors for guidance on skills development
- Reviewing funding streams for schools counselling provision over time, and
- Appointing a coordinator to manage the implementation and development of the Strategy.

### **Key findings**

The WG has adopted a rights-based approach to developing services for children and young people. This is embodied within its [Learning Country](#) policy series, which emphasise the need to ensure that children and young people are supported to achieve their full potential.

The [Everybody’s Business](#) strategy outlined how CAMHS in Wales was to be improved. This included widening children and young people’s access to counselling.

The Children’s Commissioner for Wales’s [Clywch](#) report included specific recommendations for the development of a national strategy for counselling children and young people in Wales, and for school governing bodies to make children aware of the local and national

support services available to them. The NSF also called for the expansion of children and young people's counselling in Wales.

The 2008 [Strategy for School-Based Counselling in Wales](#) pledged that all children and young people would have access to confidential counselling. The 'Talk to Me' strategy, developed to address the issue of self-harm and suicide in Wales, also highlighted the need for this support.

Good practice in delivering services to promote emotional health and wellbeing in schools and Early Years settings in Wales is outlined in [Thinking positively](#) (2010), although the 2009 Wales Audit Office review found that schools-based counselling was not as fully developed in Wales as planned by the WG. An independent evaluation of the schools-based counselling service in Wales was published in June 2011.

The WG's approach to defining and delivering children and young people's counselling services was outlined in the [Counselling Strategy](#) (2008), which was developed after consultation with a range of key stakeholders. It has provided £8million between 2008 and 2011 to implement the Strategy, and will provide an additional £14.25million between 2011 and 2014 to develop it.

The main focus of the [Counselling Strategy](#) was on pupils in KS3 and KS4. It also included those in Year 6 who were undergoing a period of transition to secondary school, and post-16 young people. Pilot studies are being undertaken in primary schools between 2009 and 2012 exploring roll-out in the sector.

The importance of a 'learner-centred' service was emphasised whereby young people would be able to self-refer and to use their language of choice, as far as possible. This was intended to widen the service's accessibility and to heighten awareness of what it offered.

## 4. Defining the areas of need

Children and young people experience a range of issues which affect their wellbeing. These can affect relationships with peers and families, and their engagement with education. In some cases, problems can escalate into conditions which require more intensive intervention. The types of problems which most commonly affect children and young people include family-related matters, bullying, behavioural and emotional problems, depression, self harm and suicide, and mental health issues. It is for these issues that they tend to be seen or referred for counselling.

### Family-related matters

Family-related matters include a range of issues and this is the most frequently cited issue according to the WG (WG 2011).

### Bullying

Children who are bullied at school are at risk of experiencing a number of psychological issues. These include loss of self-esteem, depression, loneliness, insecurity, and anxiety (Olweus, 1995). Rigby (1998) suggests that these problems are likely to persist for several years after intensive periods of bullying. Bullying has also been identified as one of the main factors associated with suicide in adolescence (Estyn, 2006).

### Behavioural problems and emotional and behavioural difficulties

Many children display challenging behaviour occasionally. In some children in whom it becomes more frequent and problematic, it is referred to as 'emotional and behavioural difficulties' (EBD) (Joughin, 2006). Children and young people with behavioural problems are much more likely to behave anti-socially later on in life (World Health Organisation, 1992).

Behavioural problems and EBD are associated with several negative outcomes including school exclusion, substance abuse, unemployment and criminal activity. They can also lead to social withdrawal, compulsive lying, bullying, fighting, truancy, vandalism or destruction to property, cruelty to people or animals and aggression (World Health Organisation, 1992).

## **Emotional problems**

Children and young people can experience a wide range of emotional problems. Here, we focus on two which are most prevalent among young people - anxiety and depression. Self-harm and suicide are also discussed in this section because they are closely linked with emotional problems.

### **Anxiety**

Research has identified that between six and 15 per cent of children and young people experience severe anxiety (BACP, 2004). Anxiety disorders can lead to long-lasting and destructive problems, including poor school performance, school refusal, family relationship problems, depression, self-harm and suicidal ideation, and can have further implications for school attendance, learning, achievement and peer relationships (BACP, 2004; Pattison and Harris, 2006).

### **Depression**

Depression is increasing among children and young people. Diagnostic tools frequently fail to identify it, which has in turn led to its under-diagnosis (Lewinsohn, Hops, Roberts, Seeley and Andrews, 1993). Depression prevents children and young people from participating fully in everyday life. It can also lead them to disengage from education. Relationship problems can also arise as a result of depression, which can lead to marginalisation and isolation (World Health Organisation, 2002).

### **Self-harm and suicide**

Deliberate self-harm is one of the symptoms of anxiety and depression. It includes actions such as self-injury, eating disorders such as anorexia and bulimia nervosa, drug and alcohol abuse and suicide attempts. Self-harm is around four times more prevalent among adolescent girls than boys, and the majority of those who self-harm are aged between 11 and 25 years. The available evidence shows that around 1 in 12 and 1 in 15 young people self-harm in the UK. It suggests that the UK has the highest rate of self-harm in Europe (Mental Health Foundation, 2006).

## Mental health issues

*Everybody's Business (2001)* examined the scale and nature of the mental health issues affecting children and young people in Wales. It estimated that more than 40 per cent of young people are at risk of developing mental health issues. A further 30 to 40 per cent may experience a problem at some time, and up to one quarter may currently have a mental disorder, depending on the environment and circumstances.

*Everybody's Business* acknowledged that mental health problems and disorders were more prevalent among certain groups of children and young people, such as substance abusers, Looked After Children (LAC) and those considered to be 'vulnerable' as a consequence of abuse, seeking asylum, refugee status and homelessness.

The strategy reviewed some of the key CAMHS-related terminology, but acknowledged that some limitations of language existed. It defined **Mental Health Problems** as:

'a very broad range of emotional or behavioural difficulties that may cause concern or distress...[they] may be reflected in difficulties and/or disabilities in the realm of personal relationships, psychological development, the capacity for play and learning, developments of concepts of right and wrong, and in distress and maladaptive behaviour. They may arise from any number or combination of congenital, constitutional, environmental, family or illness factors. They are relatively common, may or may not be transient but encompass Mental Disorders, which are more severe and/or persistent'

(Welsh Government, 2001, p.14).

**Mental Disorders** were described as 'those problems that meet the requirements of ICD 10, an internationally recognised classification system for disorder. The distinction between a Problem and a Disorder is not exact but turns on the severity, persistence, effects and combination of features found' (Welsh Government, 2001, p.14).

The term **Mental Illness** might be used in relation to more severe cases, but 'usually it is reserved for the most severe cases. For example, more severe cases of depressive illness, psychotic disorders and severe cases of Anorexia Nervosa could be described in this way'

(Welsh Government, 2001, p.14).

The Cabrini Children's Society highlighted the decrease in positive mental health among children and young people in their 2006-2007 report. They linked this to the increased demand for their counselling services experienced

in recent years. The report cited the UNICEF report into Child Wellbeing in Rich Countries, which ranked children and young people in the UK among the highest in the world for standards of material deprivation, poor parental relationships and exposure to risks from substance misuse and unsafe sex. British children consulted in the research also self-reported lower standards of wellbeing than most of their counterparts around the world (Catholic Children's Society, 2007).

The prevalence of bullying, behavioural and emotional problems, self-harm and suicide, and mental health issues among children and young people highlights the need for effective and appropriate counselling services for them. The impact of counselling on improving the mental health and wellbeing of children and young people is outlined later on in this document.

### **Key findings**

There is a significant need for counselling services for children and young people, with key groups being particularly likely to require this support. The need for counselling is partly related to increasing mental health issues among children and young people.

Issues identified as affecting children and young people frequently include family-related matters, bullying, behavioural issues, and emotional problems, depression, self-harm and suicide.

If not addressed, these issues can lead to negative experiences in class/underperformance, reduced motivation to attend school, reduced attendance/truancy, and impeded academic attainment.

## 5. The evidence base

Until recently, there has been a lack of systematic research into counselling provision for children and young people (British Association for Counselling and Psychotherapy [BACP], 2007; Jenkins and Polat, 2006; Pattison et al., 2007). Jenkins and Polat (2006) stated that much of this research has been ‘...largely impressionistic, small-scale and perhaps unlikely to convince sceptics of its values and benefits’ (p.2). They reflected that this situation is changing, but that counselling is still not allocated the importance it deserves relative to other items on the educational agenda. To date, the main reviews of counselling provision for children and young people which relate at least in part to Wales are:

- Capey, M. (1997). [Counselling for Pupils and Young Adults: Examples of what LAs and Schools provide](#). Slough: National Foundation for Educational Research (NFER)
- Baginsky, W. (2004). [School Counselling in England, Wales and Northern Ireland: A Review](#). London: NSPCC
- Polat, F., and Jenkins, P. (2005). [Provision of Counselling Services in Secondary Schools: A Survey of Local Education Authorities in England and Wales](#). *Pastoral Care in Education*, Vol. 23, No. 1, pp. 17-24
- Pattison, S., Rowland, N., Cromarty, K., Richards, K., Jenkins, P., Cooper, M., Polat, F. and Couchman, A. (2007). [Counselling in schools: a research study into services for children and young people, commissioned by the Welsh Assembly Government](#). Lutterworth: BACP.

These four sources inform much of the following discussion of the shape and impact of counselling provision for children and young people in Wales, although other references are incorporated as and when relevant.

Numerous small-scale studies of counselling services in schools have been conducted. However, these studies relate only to England, as no such work has been commissioned at LA or school level in Wales to date. LA and school-level evaluations (as listed by Baginsky, 2004) include: Dennison (1998), who evaluated the Brighton and Hove Joint Action Consortium School Counselling Project in secondary and special schools, Chesterman, Help and McNulty (1999) examined schools counselling in Kent, and Colligan (1999) looked into provision in the Metropolitan Borough of Dudley. Klinefelter (1994) evaluated a counselling service set up initially in six schools in the Canterbury and Thanet Health Authority, and Jackson and Parnham (1996) examined a counselling service based in two London secondary schools. Also in London, Baginsky (2003) evaluated a counselling service in a primary and secondary school.

Mick Cooper and colleagues have conducted several evaluations of counselling services based mainly in schools in Scotland (e.g. Cooper, Hough and Loynd, 2005; Cooper, 2006). Cooper *et al.*'s work is methodologically rigorous and incorporates consultation of children and young people who have used the services, and of staff in the schools in which they operated. Also in Scotland, the East Renfrewshire Youth Counselling Service (ERYCS) produced a comprehensive review in 2007.

The Catholic Children's Society (now the Cabrini Children's Society) has been providing a school-based counselling service for children in Eastern England south of the Thames for over 15 years. The Society produces an annual evaluation report on its counselling services which examines aspects like take-up, client characteristics, client and therapist feedback, and new developments and plans.

### **Key findings**

Few large-scale reviews of the shape and effectiveness of counselling provision for children and young people have been undertaken. Of those which have been conducted, the four which relate at least in part to Wales are Capey (1997); Baginsky (2004); Polat and Jenkins (2004), and Pattison *et al.* (2007). At the time of writing, no small-scale evaluations of counselling provision in Wales had been published, but in June 2011 the WG published stage one of its [Evaluation of the Welsh School-based Counselling Strategy: Stage One Report](#). The paucity of research in this area is noted by researchers in the field, but the forthcoming report will include more outcome data, in-depth interviews and focus groups, incorporating the opinion of service users, parents, pupils and teachers.

## 6. The development of counselling services

This section focuses on the way counselling services for children and young people have developed prior to the WG's Counselling Strategy.

### 6.1 Development of counselling for children and young people

Little structured provision of counselling services for children and young people existed in the UK prior to the mid-1960s (Baginsky, 2004). The Newsom report, published in 1963, advised that school counsellors would enhance the ability of underachieving pupils to reach their full potential. The ideology behind this derived from the therapeutic, person-centred approach to counselling, pioneered by the American psychologist Carl Rogers (BACP, 2006).

There was a holistic, innovative and experimental approach to educational provision at this time, with emotional development considered a priority of the modern curriculum in schools (Baginsky, 2004). Counselling in schools was largely provided by teachers who had trained as counsellors, and was viewed as a positive and beneficial pupil service (Jenkins and Polat, 2006). Following a conference held by the National Association for Mental Health in 1963 which discussed schools counselling provision, courses were offered at Keele and Reading Universities for teachers with five or more years' professional experience to train as school-based counsellors (Bor, Eber-Landy, Gill and Brace, 2002). Counselling training courses were expanded throughout England and Wales during the 1960s and 1970s, leading to a perceived increase in the number of schools to offer counselling services to pupils (Baginsky, 2004).

351 schools counsellors were employed in schools throughout England and Wales in 1977. However, 54 per cent of these were concentrated in just six LAs (Mabey and Sorenson, 1995). The educational climate of the 1980s focused on assessment and the National Curriculum. This, combined with the difficult economic situation at the time, led to a decline in school counselling provision (Baginsky, 2004).

Newton (1993), reflecting on these changes, commented that 'The role of the school counsellor gradually changed in the 1980s, resulting in a counselling approach becoming an essential tool for good teaching styles and staff/student rapport. This resulted in the counsellors themselves having a lower profile in schools and being absorbed back into the school system as pastoral staff or as counsellors in the post-sixteen sector. The present situation seems to be one of a minority of education authorities appointing a few counsellors, some school-based, some peripatetic' (Newton, 1993, cited in Capey, 1997, p.5).

## 6.2 Developing a culture of support in Wales: an identified need

Counselling services in Wales for children and young people were extremely limited prior to the implementation of the WG's [Counselling Strategy](#) in 2008, according to the available evidence.

Four of the 12 schools which participated in qualitative interviews as part of the Pattison *et al.* (2007) study provided formal counselling services for pupils. In two, the counsellor was employed directly by the school. In one, a charity provided the counselling, and in the other, it was supplied by a community youth service. One of the other schools used to deliver counselling services to pupils but was currently unable to do so because of funding constraints.

While no formal counselling provision was available at the remaining schools, they had in the past used other services to support pupils. These included peer support systems, and informal counselling delivered by the school nurse, Police Community Support Officers, youth workers, and drop in advisory services. They had also made referrals to external counselling agencies.

Pattison *et al.* (2007) highlighted that while the scope of the survey element of their study was wider than Polat and Jenkins' (2005), a similar response rate was achieved (28 per cent). The comparison of the data from both surveys suggested that there has been an increase in the provision of counselling services across Wales. 64 per cent of schools reported in the Polat and Jenkins survey that they provided counselling services compared to 76 per cent in the Pattison *et al.* survey.

Though an apparent increase in school-based counselling provision in Wales had taken place, based on the outcomes of Pattison *et al.*'s study, many respondents were dissatisfied with aspects of the services. Over half of all questionnaire respondents were either '[dissatisfied or very dissatisfied](#)' with the number of counselling sessions provided (54 per cent) and with the funding of the service (57 per cent). Teachers interviewed for Rothi *et al.*'s (2005) study had expressed similar sentiments over the availability and resourcing of the schools counselling service. More positive evidence was identified in the Evaluation of the Welsh School-based Counselling Strategy, yet concerns about resources remained, although this was before the announcement of £14.25 million from the Welsh Government (WG, 2011).

19 per cent of the LAs which participated in Pattison *et al.*'s study relied heavily on their educational psychologists, Education Welfare Officers (EWOs), social workers and behaviour support teams to provide counselling. This was often delivered on an ad-hoc basis in times of greatest need, or where particular issues or groups were a priority, for example disaffected or poorly behaved young people or those with Additional Learning Needs (ALN).

Pupils who did not have these issues had little access to counselling services, however. Over three quarters (76 per cent) of the participating Welsh LAs did not have policies in place for recruiting counsellors in schools, and under one third (28 per cent) felt able to assist schools with enlisting the services of a counsellor. Most expressed that it was the school's responsibility to decide whether they needed a counsellor, and also whether they could afford to appoint one.

Where counselling services for children and young people **without** ALN, behavioural problems or disengagement issues were provided, Pattison *et al* (2007) found that take-up levels were significant. These findings highlight that the high demand for counselling services among children and young people in Wales may not be being met. Ten years previously in 1997, Capey also emphasised the outstanding need for services such as drop-in units and those which permit self-referral, and the positive impact that accessing these services could have on the children and young people who need them.

Similarly, Rothi *et al.* (2005) found that schools counsellors were in great demand yet short supply. This seems to be linked to constraints on staffing and resources. Interviewees in the Rothi *et al.* study reported that securing external funding for counselling was very difficult, and that the resultant funding was short-lived:

**'The issue of inadequate provision of schools counsellors resonated through most of the interviews... Under provision is a widespread concept amongst the teachers interviewed- even in schools that have access to a schools counsellor. Many teachers in these schools reported that they have to operate a waiting list system'**

(Rothi et al 2005, p. 28).

The scarcity of school counsellors had led some teachers to feel anguish on behalf of the pupils who were in need of their services, as the following quotation from a Special Educational Needs Coordinator (SENCO) illustrates.

**'It's heartbreaking when we know that that child needs support and it's... well what do you do? [...] if we had a school counsellor five days a week we could fill her time very, very easily. She has got a waiting list at the moment. I'm going to have to cut her time down to probably half an hour (because) we can't afford it...what else can you do?'**

(Rothi *et al.* 2005, p.29).

The amount of time that counsellors spent at the school **'varied substantially and was largely dependent on funding'** (Rothi *et al.* 2005, p.27). Counsellors were usually employed on a part-time basis, for up to three days per week. Counsellors were also appointed to deal with a smaller number of individual young people.

### Key findings

Counselling in schools began in the 1960s, and was provided mainly by teachers who had trained as counsellors. The numbers of counsellors in schools grew steadily, reaching a peak in the late 1970s. Cutbacks and a shift in ethos led to counselling services shrinking in the early 1980s.

Counselling in schools in Wales was extremely limited but has grown over the last decade, according to studies carried out by Polat and Jenkins (2005) and Pattison *et al.* (2007). 64 per cent of the schools in Wales surveyed by Polat and Jenkins provided counselling to pupils, and 76 per cent of those surveyed by Pattison *et al.* did so.

The schools participating in the Pattison *et al.* study which provided counselling did so through EWOs, social workers and behaviour support teams, often on an ad-hoc basis. Disaffected pupils, and those with behavioural issues or ALN took priority. Pupils not affected by these issues had little access to counselling, but there was a large unmet need among this group. Similar findings were obtained by Capey (1997) and Rothi *et al.* (2005).

## 7. Impact and perception

### 7.1 The benefits of counselling for children and young people

Research has highlighted that the work of schools counsellors needs to be monitored and evaluated regularly to ensure that high standards in service delivery are maintained (Pattison *et al.*, 2007). However, it can be difficult to evaluate counselling interventions. Where improvements in terms of symptom reduction have been observed, isolating the extent to which the effects have occurred as a direct result of counselling can be almost impossible. Also, maturation can account for a significant amount of symptom reduction in children and young people; some may simply ‘grow out of’ the problems for which counselling was received (BACP, 2004).

Despite this, evaluations of school-based counselling have shown that services are widely perceived as being effective.

The evaluation work undertaken by the Cabrini Children’s Society showed that the vast majority of children and young people who had accessed their counselling services felt happier, less worried, and that things were better at home and school since seeing the counsellor. 94 per cent also reported that they would either probably or definitely go and see a counsellor again. All service users reported that the counsellor was easy to talk to, and felt that they could be trusted to keep the matters discussed confidential. Less than one per cent of service users stated that the counsellor had not helped them with their problems, and that they had not understood their feelings.

All bar one of the headteachers in the schools which had hosted the Cabrini Children’s Society’s counselling service felt that it was valuable. Whilst 45 per cent could not see that the counselling had much impact, they reported that they knew the work was helping. A further 60 per cent reported that they had seen evidence of improvement in the pupils concerned. Only one negative response was obtained concerning the impact of the counselling for pupils, where a headteacher felt that little improvement had been incurred by the pupils referred for counselling. Staff were seen to have benefited from the service the most through being able to refer children in need of the service, and to consult with the counsellor about pupils who were a cause for concern, according to over three quarters of the respondent headteachers.

Other studies have shown that teachers have welcomed schools counselling because they felt they lacked the specialist skills, training and qualifications to provide such services themselves. Constraints on the time needed to address children’s wider emotional needs were also highlighted by schools staff as a benefit of employing schools counsellors (Baginsky, 2004).

Overall, the young people who had used the Glasgow schools counselling service (as outlined in Cooper *et al's* 2005 evaluation) reported 'significant improvements' in their mental health. Almost 80 per cent stated that the intervention had helped them either 'quite a lot' or 'a lot', and the greatest effect sizes were reported by those who had emotional difficulties such as feeling unable to cope with their problems, and feeling sad and distressed. Just under 90 per cent of the client group was either 'satisfied', or 'very satisfied' with the service they had received.

Pastoral teachers and many of the Local Authorities' Integrated and Joint Support Teams who participated in Cooper *et al's* study felt that counselling added value to schools' pastoral care systems, and felt that it facilitated links between schools and services for children and young people.

The evidence also highlighted the ways in which counselling could improve young people's engagement with learning. This, to Cooper, was a significant finding, as it reinforced evidence that mental health problems have a 'significant impact on a young person's capacity to study and learn' (p. 106). Attendance and attainment levels of counselling beneficiaries had risen post-counselling, and exclusion rates had decreased. Pupils' relationships with teachers had also improved as an indirect consequence of the counselling, which increased their readiness to engage in learning. The main way in which counselling appeared to influence these factors was through improving pupils' ability to concentrate in class through reducing the amount of time spent thinking about their problems. As Cooper states,

'Based on the evidence, the strongest inference would seem to be that, if a young person is having trouble concentrating in class because of the difficulties that they are experiencing, then counselling might be a useful way of helping them improve their capacity to study and learn. In addition, there suggests that young people who are missing classes because of their difficulties might benefit from counselling' (p. 108).

However, Cooper also warns against the direct use of counselling as a strategy for raising attainment. This, apparently, would undermine one of the primary characteristics of counselling: 'its non-directive nature' (p. 108).

Capey (1997) found that counselling services, and those to which young people referred themselves, provided effective support, and helped to prevent problems from worsening, as the following quotation reflects:

‘There was plenty of evidence from those counselling services which allowed pupils to self-refer, or which provided central drop in-facilities where counselling was available, that there is a significant take-up by children and young people where this occurs. This is no surprise. The pains and anxieties created for a pupil by a crisis can be felt by the child before they begin to have an observable effect on performance in school and other aspects of his or her life. The opportunity of counselling on a self-referral or drop-in basis can start the healing process before these problems begin to exhibit themselves as emotional or behavioural difficulties’ (p. 28).

In the Pattison *et al.* (2007) Wales-based review, most of the 76 schools in Wales which provided a counselling service were ‘very satisfied’ with the service itself, and with the counsellor(s) delivering it. Most schools were also satisfied with the space available for counselling, the arrangements for pupil access to the service, the level of information being disclosed to the service, and the processes for referring young people to expert mental health practitioners. Schools also expressed that counselling services could be improved by having more counsellors, and through being able to offer more counselling sessions. Further funding from the WG was needed to support this.

The WG (2011) found that schools identified many positive outcomes arising from the Counselling Strategy (see Section 8), although they emphasised the need for caution in interpreting the findings. The evaluation also noted that resources needed to be monitored to ensure adequate staffing and levels of service.

## 7.2 An accepted notion?

Despite the outlined support for expanding counselling services for children and young people among practitioners, policy makers and researchers, objections have been made on several grounds.

- Schools counselling can blur definitions of schools’ role and purpose, according to some critics. Robert Whelan, deputy director of the think tank Civitas, (cited in Bashford, 2004) states that issues which adversely affect children and young people are better addressed within the family unit: ‘Any widespread plans to roll out counselling services for primary school children would be an unwarranted interference in family life’.
- Author and Professor of Sociology Frank Furedi argues that counselling pupils is a non-educational issue which is not conducive to a positive learning culture in schools (Doward, 2004)
- Kerry (2001), considering the impact of support staff in schools, suggests that the incongruent perspectives of schools counsellors and teaching staff lead to tension. Kerry maintained that counselling staff condone the actions

of pupil clients whereas teachers impose sanctions. Teachers consequently perceive that counselling staff undermine their authority

- Polat and Jenkins (2004) found that some teachers perceive school-based counselling as a way of enabling students to avoid lessons, and that counselling provision should be offered out of school hours as it can serve to threaten the equilibrium of the school's functioning
- A similar attitude was observed by Montgomery (2003, cited in Cooper et al. 2005), who found that a small proportion of teachers did not feel that counselling was appropriate in an educational environment. Some teachers also felt that pupils used counselling as an excuse to get out of lessons and thus as a means of exploiting the system.

Lines (2005), who has worked as a school counsellor, found that not all schools staff welcomed counsellors and counselling on-site. However, in his experience, the greatest challenges to successful schools counselling were 'institutional factors' (p. 19), like having time, location and resources dedicated to the service. Lines also emphasises that it is often not possible for service managers to control these aspects, which is often not acknowledged in research.

A similar picture was obtained in Polat and Jenkins' (2005) survey. While most school-based respondents supported the development and expansion of counselling services, a relatively small proportion did not. Reasons for this were related to the perceived constraints that delivering counselling services placed on resources and time. Some respondents doubted that counselling was effective, and others felt that education funding should not be used to address pupils' personal problems. These quotations illustrate some of the views of Polat and Jenkins' respondents:

'Very time intensive and questionable value for money. Very difficult to ascertain cause-effect outcomes'.

'Difficulties in quality assurance of services provided and ensuring equitable access for appropriate pupils. Problems are not (or rarely) discretely educational (should education resources be used for 'domestic problems'?)' (p.22).

Clifford-Poston (2000, cited in Baginsky, 2004) has questioned whether schools counselling can ever be effective because service users' privacy, confidentiality and anonymity cannot be guaranteed. Pupil clients are likely to know each other, to have classes together, to be aware of others attending counselling sessions, and to see the schools counsellor(s) interacting with pupils and staff around the school. In their 2001 guidance, the BACP recommends that the counsellor should discuss and explore these aspects with the client.

Cooper *et al.* (2005) found that teachers were generally positive about counselling and felt it was effective, although a small minority was sceptical. Seven per cent of the teachers who participated in the study rated counselling in schools as ‘not at all’ important, or ‘virtually not at all’ important. Cooper *et al.* stated these beliefs were held because of the assumption that counselling was ‘indulgent’ and ‘pointless’ (p.208), as the following quotation suggests;

‘Indeed, one of the teachers, on being asked the question, ‘What three words would you associate with counselling’ gave the answers; ‘bleeding’, ‘heart’, and ‘liberal!’

(Cooper *et al.* 2005, p. 208).

Likewise, some learners were not convinced. In Cooper’s 2006 evaluation, fifteen per cent of student participants were unclear about the purpose and role of counsellors, and felt that they had gained little from counselling sessions they had received (Cooper, 2006). Cooper *et al.* (2005) highlighted the need for more in-depth qualitative work and the development of some standardised and validated scales to further investigate the negative attitudes held by a minority of schools staff towards counselling for children and young people.

Lang (1999) challenged negative views of schools counselling, maintaining that teachers who hold these views do so because of their poor and inaccurate understanding of it. They have typically had little involvement with counselling, and see it being inaccurately portrayed in the media as a service which is delivered only in times of crisis.

As noted above, evaluations of school counselling have highlighted the services’ positive impact on young people’s wellbeing. Although it can be difficult to isolate the role of counselling from other support which young people may access, feedback from young people indicates that emotional wellbeing improves where counselling is available. Even so, some scepticism about the purpose, value and impact of schools counselling remains, not least because of its perceived impact on schools’ functioning. This has to be considered in the light of evidence that the Counselling Strategy is viewed positively by many of the stakeholders in Wales (WG, 2011). These issues will need to be considered by those planning schools counselling services.

## Key findings

Counselling in educational settings has proved effective. Young people who have used schools counselling services generally report improved mental health as a result of doing so. They feel happier, less worried, and more able to concentrate in class.

Most of the school and Local Education Authority staff who have participated in evaluations of school counselling services report that it is a valuable service, which adds value to school pastoral systems. Staff have benefited through being able to refer pupils on to counselling services, and through being able to consult with counsellors about pupils they are concerned with.

However, a body of opinion remains unconvinced about the effectiveness of school-based counselling, and questions whether it should be part of the role of educational establishments.

Objections have been raised to the use of schools as venues for counselling on the grounds that such activities should not be the focus of work in educational establishments. Others maintain that counselling can cause tension between practitioners in schools, and that it could undermine discipline and expectations about behaviour.

At the same time a number of practical factors relating to service delivery such as lack of time, space, facilities, and resources can also undermine the efficiency of counselling services in schools. Concerns have also been expressed about the confidentiality, privacy and anonymity of school-based counselling services.

Further research into the attitudes of schools staff towards counselling is required. Some research suggests that negative views of counselling or a lack of understanding of its aims remain.

## 8. Future challenges in Wales

This paper sets the development of schools counselling in Wales in the context of the two key drivers for its implementation. The first driver is the body of evidence advocating the role of schools counselling in helping children and young people to overcome a range of personal and social issues which not only affect their educational performance but also affect their quality of life and broader wellbeing. The second driver is the specific approach adopted in Wales which underpins all policies relating to services for children and young people. This includes a central focus on wellbeing and support.

The development of counselling in schools in Wales reflects policymakers' and practitioners' recognition of the need for a holistic approach to meeting the needs of children and young people. While the structure of children's services in Wales has not been formally integrated, the cross-cutting and integrated approach embodied in the WG's policy agenda, and promoted on the ground by Children and Young People's Partnerships, has helped to foster a more integrated approach to service design and delivery.

At the time of writing, the WG had commissioned the BACP to undertake an evaluation of schools counselling in Wales.

Stage one of this report was published in July 2011 (WG, 2011). It found that local authority leads, school management and school counsellors all had positive opinions towards school counselling services. While around half the schools already provided counselling, they believed that these had improved since the implementation of the Schools Counselling Strategy. A large majority (91 per cent) of school managers agreed that the counselling service met the needs of pupils.

Young people in Wales mainly presented family-related issues, followed by anger and behaviour-related issues, to counsellors. These were similar to the pattern identified outside Wales. A majority of counsellors (70 per cent) were trained at least to postgraduate level and the vast majority (86 per cent) belonged to a professional body. The therapeutic approaches they used varied considerably.

In terms of delivery, WG (2011) found that there was flexibility in terms of delivery. Over 50 per cent of services offered counselling both within and outside of school premises, thus increasing accessibility for pupils. They were run on a regular basis and attendance rates were high. Moreover, services worked closely with other services such as NHS CAMHS.

It was acknowledged that a degree of caution was required when interpreting the data on impact. However, large improvements were observed from the beginning of counselling to the end and school managers perceived the counselling services to have had an impact on attainment (65 per cent), attendance (69 per cent) and behaviour (80 per cent) of pupils who have received counselling

The evaluation contained recommendations for improvements related to increased resources in terms of staffing levels to enable more counselling sessions to be made available.

The extent to which schools counselling (by whatever model is adopted for their delivery) will be sustained will be judged in the light of factors such as:

- The proven demand for such services, and the extent to which early, schools-based intervention will prove effective as a means of meeting the needs of children and young people
- The extent to which schools recognise that counselling offers a means of meeting the needs of the groups of children and young people receiving support
- The extent to which schools will regard addressing issues such as wellbeing as part of their core mission and the impact which this might have on discussions about allocating resources within schools and also within local authorities
- Whether local discretion about the nature of services and their extent will impact on the pattern of delivery across Wales.
- The extent to which resources will be devoted to counselling at a time when difficult decisions are being made about future spending priorities.

Schools counselling is an activity which in many ways resonates with the broader agenda of simplifying service delivery, and making schools genuine community resources delivering a wide range of services for children, young people, and families. The model also supports the notion of a progressively tiered pattern of delivery in which support is targeted for optimum effectiveness.

The challenge for the future will be to combine an analysis of the efficiency of counselling services with an analysis of the extent to which they contribute to the broader agenda of promoting achievement and equipping children and young people with the skills and emotional intelligence which they require in contemporary society. Such an analysis may well need to consider not only the cost of delivering counselling but also the cost of not doing so.

### **Key findings**

This paper outlines evidence which supports the use of counselling in schools to improve the mental health of children and young people. This, in turn, improves their quality of life as well as their educational engagement and attainment.

WG policies are strongly focused on children's rights, and reflect the requirement for a holistic approach to meeting the needs of children and young people.

Further research will examine the effectiveness of schools counselling services in Wales, which may usefully be combined with an analysis of the extent to which they help to promote achievement and support children and young people to develop skills and emotional intelligence they need in contemporary society.

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