STUDENT COUNSELLING SERVICE

ANNUAL REPORT 2006 – 2007

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The
Annual Report of
The Student Counselling Service
2006/07

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Summary of key points in the Report

- 953 students came for counselling, an increase of 104 from last year.
- This number represented a 12% increase over last year and the largest in the history of the service.
- The service operates from three sites during semesters
- 28% of students learnt about us from the web
- Our maximum waiting list was 57 compared to 90 last year
- The waiting list for counselling is longest at the beginning of March.
- Our waiting times for counselling improved significantly from last year.
- 89% of students were seen within a working week for their initial appointment
- 69% (compared to 53% last year) of students received ongoing counselling within three weeks of their initial appointment
- We ran 12 workshops and 117 students attended – an increase of 30 participants from last year.
- The Mental Health Mentoring pilot scheme, in conjunction with the Disability Office, began in February
- The service is working with an increasing number of partners including TLA, Transkills, Chaplaincy, Disability office, EUSA
- The EUSA vice president for societies and activities, Tash Shotton and the Director gave a presentation on student mental health to the cross party group on mental health at the Scottish Parliament in February
('This is an excellent service' - student evaluation)

Introduction

This year saw an unprecedented rise in the history of the service of student uptake of all the services activities, particularly one to one counselling. Projections for the service’s five year strategic plan written in 2006 anticipated 100-150 more students by 2011. We almost reached it in one year. It is of course possible but extremely unlikely that there is no further increase until 2011.

In spite of this huge demand our waiting times for counselling have improved significantly. Streamlining by our administration team, focussing counselling resource into semesters and increased funding from a supportive management all contributed to our success.

This year has seen an increase in partnership working with other departments within and out with the university, the aim being to increase the coherence of the student support services and raise the profile and hopefully the resources for student mental health within Scotland.

Accessing the service

In the past there have sometimes been comments from both students and university staff questioning the ease of accessing our service. These comments have related to geography, knowledge of the service’s existence, and the ease of getting an appointment.

The service operates on three sites and we have gradually expanded our operation at Moray House. In 2002, 175 students were counselled at this site, the figure for this year being 271. Our trainee unit is based there and many of our workshops are held there.

We are also located in the Careers service in the Weir building for two half days a week and although many Science and Engineering students opt to come to 31 Buccleuch Place, we feel that it is important to keep a presence at Kings Buildings. The number of students seen at KB remains constant due to the limited room availability.
Of the students coming to the service, 28% say they found us via the web. In 2002 this figure was 7%. It is likely that this proportion will continue to rise and it is rare now that someone says to us ‘I didn’t know of your existence’. In our satisfaction survey 68% (of 130 respondents) thought that we were well publicised. We raised our web profile through advertising workshops through MyEd and joint activities with other departments such as TLA. 

We update our website frequently and have many links on it relating to common problems and self help websites. We also publish useful material on stress and coping with exams which we send out to schools.

Distance learning students and those who find it difficult for whatever reason to come into the department can access us through email counselling.

Administrative changes this year have resulted in a more efficient and rapid response to students requiring appointments. Our waiting times have improved as is shown below.

**Core Activities and Trends**

*‘A great help personally and academically. It has been an incredibly helpful, useful and enlightening experience.’*- Student evaluation)

Our target for this year was to improve our response times, reduce waiting times for students particularly for ongoing appointments, and reduce the overall size of the waiting list.

Numbers requesting counselling have risen in actual terms almost every year, but this year the increase has been unprecedented. Projections for the year anticipated an increase of between 20-30 additional students accessing the service. This year 953 came for counselling an actual increase of 104 students over last year, the largest increase in real and relative terms in the history of the service. See Figure 1 below.

It is not clear how to account for this. We have considered various theories such as poor weather, a higher proportion of female students in the university (now 56.2% women to 43.8% men) and increased profile. Our professional body the Association for University and
College Counselling (AUCC) has traditionally collected annual UK wide statistics from all counselling services which might help us judge if this is part of a national trend. However changes to AUCC’s method of collection resulted in comparative figures being unavailable for this year. A straw mail base poll suggests that some other similar universities have also experienced a similar significant rise in use.

We think partially that we might be victims of our own success. Many students come to us through recommendation and our improved response rates have been appreciated by students, academics and GP’s alike.

![No of EU Students attending the Student Counselling Service](image)

**Figure 1. Number of EU students attending the Student Counselling Service from 2002/03 to 2006/7.**

**Waiting List**

Despite the increase in numbers, our waiting list peak was 57 compared to 90 in the previous academic year. It was reached, as in the previous two academic years, at the beginning of March and we were able to anticipate this and provide more counselling hours. However we had 100 new referrals in the four weeks prior to the Easter vacation. Other than encouraging students to be more anticipatory or acquiring more space and resource, it seems unlikely that we will be able to avoid waiting lists in the future. Our aim is to keep it within manageable limits which it just managed to be this year, while remaining able to respond to more urgent cases.
Figure 2. Numbers of students on the Waiting List (2005/06 and 2006/07)

It is clear from Figure 2 above that we were particularly busy right from the start, last year.

The waiting list pattern is slightly more complex than it looks. Most counsellors have considerable capacity to take on new cases at the start of semester 1 whereas by semester 2 they already have a full caseload with few spaces. So the same demand might be manageable at one time and at others might result in a significant waiting list.

Our main aim in the service is to be able to offer initial appointments within one working week. We achieved this for 89% students, a figure almost identical to previous years.

Waiting times

The main area of concern for our service over the past few years but particularly since semesterisation has been the wait from initial assessment to ongoing counselling. This year we made this a priority area for improvement. We took as our philosophy the university’s aim to be ‘fast friendly and fair’ in our clinical work and to clearly define to students what and how much we could offer therapeutically. By using cancellations more effectively and deploying our resources more
efficiently we got closer to these aims. Waiting times were cut as demonstrated in Figure 3 below. Changed resources also helped us reach our targets.

<table>
<thead>
<tr>
<th></th>
<th>1 week</th>
<th>2 weeks</th>
<th>3 weeks</th>
<th>3+ weeks</th>
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<tr>
<td><strong>Semester 1</strong></td>
<td>25(23)</td>
<td>36(24)</td>
<td>24(21)</td>
<td>15(32)</td>
</tr>
<tr>
<td><strong>Semester 2/1</strong></td>
<td>22(20)</td>
<td>23(16)</td>
<td>9(12)</td>
<td>46(53)</td>
</tr>
<tr>
<td><strong>Semester 2/2</strong></td>
<td>22(12)</td>
<td>26(12)</td>
<td>18(11)</td>
<td>34(67)</td>
</tr>
<tr>
<td><strong>Total for acad. year</strong></td>
<td>23(19)</td>
<td>28(18)</td>
<td>17(15)</td>
<td>32(47)</td>
</tr>
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**Figure 3.** Waiting times for ongoing counselling from initial assessment (in percentages%). Last years totals in brackets.

We in the service feel that three weeks is quite a crucial length of wait for most students. If the wait is much more than this, when we offer ongoing counselling, often the student declines. Last year we ‘lost’ about 35 students who no longer wanted counselling as the length of wait was too long. This year the loss was minimal.

Although we in the Service feel reasonably satisfied with the improvements we have made 78% of the students who wait for 3 weeks or more feel that the wait is too long.(satisfaction survey).

**Semesterisation**

Now in our third year of the new system, we were able to plan more effectively for the peaks and troughs of demand. We know better now when is the most suitable timing for workshops. Many students now in the university have known no other system and accept how it works. As a service we are just busier generally all the time but, as previously mentioned, particularly towards the Easter vacation as counsellors’ diaries are already full.

It is hard to give some balanced reflections on the impact of the semester system. To some extent the staff of the counselling service mirror the experience of the students in terms of the pressures of the academic life cycle. Students seem to be more pressured perhaps due to the squeezing of the taught and assessed academic year. The shorter Easter break allowed little time to pause and reflect and restore ourselves.
Profile of Student Users

Gender balance

The gender balance of those using the service is 28% to 72% male to female. This is greater than last year (30%:70%) perhaps reflecting the gender balance in the university. 65% of our student users are in the College of Humanities and Social Science, 11% MVM and 24% S&E, very similar proportions to most years. See Figure 4 below.

<table>
<thead>
<tr>
<th></th>
<th>Humanities and Social Science (%)</th>
<th>Medicine &amp; Vet Medicine (%)</th>
<th>Science &amp; Engineering (%)</th>
<th>Total (%)</th>
</tr>
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<tbody>
<tr>
<td>Female</td>
<td>50</td>
<td>9</td>
<td>13</td>
<td>72</td>
</tr>
<tr>
<td>Male</td>
<td>15</td>
<td>2</td>
<td>11</td>
<td>28</td>
</tr>
<tr>
<td>Total</td>
<td>65</td>
<td>11</td>
<td>24</td>
<td>100</td>
</tr>
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Figure 4. Students attending Student Counselling Service (Gender by College).

We intend to try some campaigning over the next few years to improve the gender ratio and attract more men to counselling. This is not just about how men view talking therapies but may also be influenced by whether they are referred to our service as often as women are likely to be. Men are more likely to attend workshops.

Post graduates

The percentage of postgraduates using our service remain similar to last year with 62% from HSS, 26% from S&E and 12% from MVM.
**Figure 5. Postgraduate Severity Ratings.**

As part of our triage, counsellors ‘rate’ the level of urgency for all student users on a scale of 0-7. Although this is a qualitative judgement based on descriptors (e.g. 5 on the scale is ‘that the issue is causing severe anxiety in all areas of functioning and the clients ability to cope is severely limited’), it is a very useful tool. Comparing severity ratings for post graduates and undergraduates, our hypothesis was that PGs would tend to rate lower due to greater maturity. Interestingly severity ratings for undergraduates were almost identical.

Also the graph above (Figure 5) suggests that the severity of problems seem to be worsening with more students having been rated as 5 or more in the last two years, 36%, compared with 25% in 2002/03. This trend would support both counsellors and other staff views that the levels of distress in students is growing.

**International students**

International students are now proportionally represented in our service (14% of all referrals) as opposed to over represented 5 years ago. This suggests that they are well looked after by the International Office and other parts of the university and are well inducted. We seem to be increasingly involved with post graduate international students who are unsuccessful in their studies.
Students with Disabilities

93 students (approx 10% of the students using the service) declared a disability, the majority having dyslexia (37) and the next category having an ‘unseen disability’. The latter category can often include students with mental health problems. A further 12 declared mental health difficulties.

Ethnicity

66% of our students were of white British or Irish origin, ‘other white’ represented 26%, Asian British 3%, Chinese 3%, and black British 1%.

Other Service Activities

Workshop programme

Our intention stated in last year’s annual report to run a mixture of fixed and ‘on demand’ workshops was taken forward and rewarded with success. We ran a total of 12 workshops with the numbers attending group and workshop sessions rising from 87 in 2005-06 to 117. The procrastination workshops continued to draw the greatest number of participants. We introduced some new workshops such as ‘Playing about with art’ and ‘Out of your head’, a relaxation session.

Email counselling

We have been piloting an email counselling service over the last year. We have kept it fairly low key given the newness of the service, the recent training of the counsellor and the limited resource. Although there have been a number of inquiries only six students have actually used the service, two of them subsequently coming for face to face counselling, and one using email counselling when on placement.

The usage of email counselling has been less than we anticipated. Although we have not widely promoted this service it is clearly described on our website, and piloted with particular departments.
Trainee Unit

Our trainee unit has also completed a successful year with all the trainees choosing to continue in the service for a second year. As a result they made a significant contribution to the ongoing work of the department. As a consequence of the high standard of counselling experience and supervision the service is now being asked for more placements than we can offer.

Partnership work

Staff in the service have been working closely with other parts of the university, as well as in the community. The joint workshops with TLA (procrastination workshops) continue, as well as new ventures with the chaplaincy (Labyrinth), Lifelong learning (self esteem workshop), and the Accommodation Service (relaxation workshop).

We have always worked closely with TLA on inductions for members of staff and are now providing in depth training in collaboration with the Disability Office for Directors of Studies working with students with mental health problems. The feedback has been extremely positive.

Still on the theme of mental health both the Disability office and we teamed up with Transkills to brief staff on mental health provision for students. This is continuing into the next academic year.

External contacts comprise Depression Alliance Scotland, Lothian Health Board, and Universities Scotland.

Student Mental Health

Mental health mentoring

We have been working for over a year with the Disability Office to set up a professional mentoring scheme for students with ongoing mental health problems. The philosophy behind the scheme is to provide these students with specific one to one support for their academic progression, financed through the Disabled Students Allowance. A mentor with counselling and mental health qualifications is now working from within our service, but is directed by the director of the Disability Office. This is potentially a very exciting innovation which should provide vulnerable students with ongoing support and also relieve some academics of the pressure of constant supervision of
these students. We hope to see this service grow during the coming year.

Some universities have peer mentoring schemes to support students. Where they are specifically for students with problems rather than any student, training and support of the mentors is very resource heavy. I feel clear that professional mentoring is a more effective way forward for these particular students.

**Student Mental Health-the wider agenda**

The challenge of student mental health was taken on by EUSA through their sabbatical for societies and activities Tash Shotton. Together we presented a paper on student mental health to the cross party group on mental health at the Scottish Parliament in February. This was exceptionally well received and there was a verbal commitment to request a parliamentary debate in the new parliament.

As AUCC representative I continue as secretary of the UUK committee for the Promotion of Mental Wellbeing in HE. With a colleague from the Glasgow School of Art we have been instrumental in the creation of a working group at Universities Scotland on mental health.

Counselling services within universities are repositories of great knowledge and expertise in student mental health. With the increase in students with serious mental health problems, counselling services can and must be influential in this area and should use that experience to inform policy and student enhancement agendas as well as the duties of the DDA.
Evaluation of the Service

(‘I have found the service to be invaluable. It has been an incredibly helpful, useful and enlightening experience’- student evaluation)

We continue to evaluate individual counselling through CORE (an outcome measure) and now have 589 completed data sets which it would be useful to research further.

The service is evaluated using a satisfaction survey and ongoing accreditation through our professional body.

All group and workshop activities are evaluated as is all training to members of staff.

The Future

Our immediate future plans include improving accessibility by promoting the email counselling service and developing a moderated ‘talkboard’. We also intend piloting late opening, one evening a week, in conjunction with the Careers Service to improve accessibility.

We hope to use our CORE data sets for further research as well as evaluation and have a postgraduate student research into men and their use (or lack of use) of the counselling service.

We intend to start a Bibliotherapy project in partnership with the main library - for more information look at http://www.brookes.ac.uk/student/services/osmhn/about-osmhn/Newsletters/news13.html.

With our and EUSA’s support Depression Alliance Scotland are providing a workshop for students with depression in Semester 1.

Susie Jackson
Director
25th September 2007
Members of Staff

Counselling Team
Susie Jackson (Director)
Ronnie Millar (Deputy Director)
Barbara Malinen
Marc Richelieu-CORE evaluation organiser
Cathy Smyth-Medical and Chaplaincy Liaison
Mary Stack (retired May 2007)
Moira Tattersall-workshop organiser
Chris Walker-trainee unit organiser
Iola Wilson-email counselling

Sessional Counsellors
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Graham Lamont
Ali McBride
Yolanda Strachan
Iris Sloan

Administration
Meg Stroud  Office Manager
Irene Smith (to 12/06)  Frontline Administrator
Angie Robertson  Frontline Administrator
Nicky MacKenzie  Frontline Administrator
Joanna McKenzie  Clerical Assistant

Trainees
Dagmar Alexander
Kenny Boyd
Jenny Scarse

Thanks again to all service staff and trainees for an exceptional year and to Bruce Nelson, Katherine Novosel and Melvyn Cornish.