Online counselling provision for children, young people and young adults

Dr Cathy Street – July 2013
Executive summary

overview

This report presents the findings of a scoping of online counselling services for children, young people and young adults aged 5–25 years. Information was gathered through three main routes: a call for information circulated to all members of the charity Youth Access and via the professional membership of the British Association of Counselling and Psychotherapy (BACP); internet searches; and consultation with a number of the national UK charities who provide counselling services for children, young people and young adults.

Scope

Online counselling was defined as provision offering specific online sessions or responses from a counsellor; it also included services where sessions might be offered by telephone, possibly following initial email or web-based contact. Excluded were online counselling provision for adults aged 18 years only; generic advice, signposting, support and discussion forums on websites; and online communities and online ‘chat rooms’.

Online counselling services identified

Ten online counselling services were identified through the searches. Three of these services are new – they are in the final planning stages and will go live in summer 2013. Two reflect an expansion and diversification of an existing voluntary and community sector (VCS) counselling service and one service is a new national service that will operate on an online basis only. Also included in the ten services is one youth counselling provider which does not operate as a specific online or telephone based provision but reported that, every year, they offer counselling via these routes to young people who are physically unable to access their premises to attend face-to-face counselling, for example as a result of serious illness.

Strengths and weaknesses of online counselling provision

Online counselling is clearly a growing sector and the providers of online counselling recognise a number of strengths and advantages. These include that online provision is flexible, widely available (in particular at times outside normal school or working hours), and allows people to explore their concerns and difficulties whilst at home (i.e. in an environment that is familiar and comfortable to them). It is also a medium that young people are familiar with and like to use. For these reasons, it is seen as a valuable avenue for reaching new audiences, including those who do not feel comfortable using face-to-face counselling, and it is thought to complement existing counselling services very well.

Some of the disadvantages are that online counsellors and therapists cannot pick up easily on factors such as body language; it can be difficult to ensure that a client has thought of their own needs for privacy, and there can be the possibility of disinhibition as a result of the greater degree of anonymity offered by online access. At this time, there is also only limited outcome data and it is acknowledged that this needs to be addressed in the future. However, what has been gathered so far looks potentially promising and service user feedback is also highly positive.
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About the author

Cathy Street is an independent mental health consultant and researcher. Cathy has worked for many of the UK’s national charities working in the field of children and young people’s mental health including Rethink Mental Illness, YoungMinds, the Association for Young People’s Health (AYPH) and the Mental Health Foundation. At Youth Access, she has led a variety of national projects evaluating youth counselling provision and new initiatives to promote stronger links between primary care and Youth Information Advice, Counselling and Support Services (YIACS); she has also authored various guides and reports to assist the commissioning of counselling services. Cathy is currently a core team member of the GIFT Partnership (Great Involvement, Future Thinking), commissioned by the Department of Health in 2012 to support the participation of children and young people in Children and Young People’s Improving Access to Psychological Therapies (CYP IAPT).
Introduction

This report presents the findings of a scoping of online counselling services for children, young people and young adults aged 5-25 years in England.

Online counselling was defined as provision offering specific online sessions or responses from a counsellor; it also included services where sessions might be offered by telephone, possibly following initial email or web-based contact. Excluded were online counselling provision for adults aged 18 years only; generic advice, signposting, support and discussion forums on websites; and online communities and online ‘chat rooms’.

Methodology

Information for the scoping was gathered via the following methods:

- A call for information that was circulated to all Youth Information, Advice, Counselling and Support Services (YIACS) who are members of the national charity Youth Access and also via the professional membership of BACP.
- Google searches of the internet. Search words/terms included: online counselling for children; online counselling for young people; online counselling for young adults; online counselling for families; online counselling for looked after children; online counselling for young carers; online counselling about mental health; online counselling about emotional difficulties; online counselling for young people about… family issues; school issues; peer relationships; drugs; alcohol; bullying.
- A number of the national UK charities that contributed data for the scoping of voluntary and community sector (VCS) counselling services for children, young people and young adults (see scoping report at www.counsellingminded.com) were also consulted by email and/or telephone. These included Action for Children, Barnardo’s, Beat and Relate.
Summary of online counselling services for children, young people and young adults

Ten counselling services for children and young people were identified for inclusion in this report. This includes a number of newly set up online counselling services, identified via the call for information circulated by Youth Access and the BACP, and one service just finishing its pilot phase that is now considering how it will operate in the future. Three of the new services were described as in the final planning stages and will go live in summer 2013.

Several voluntary and community sector (VCS) providers responded to note that they did not offer counselling via online or telephone avenues. One organisation, working with young deaf people, highlighted that telephone counselling would not be feasible for their client group. Action for Children (detailed in the scoping of VCS provision, see www.counsellingminded.com) reported that they did not offer counselling via these routes since this was not felt appropriate for the much younger children they typically work with, in their local projects.

Rethink Mental Illness provided information about its Gloucestershire Self-Harm Helpline Service (www.rethink.org/glosselharm), available to people of all ages living in Gloucestershire and in distress as a result of self-harming behaviour. Whilst the helpline staff use counselling skills, the helpline is not included in the following service descriptions since it works more along the lines of offering general support and work towards self-management of self-harm.

The national charity Re-Solv also reported that, with Department of Health funding, and in partnership with a local Northampton-based charity Solve-it, it is about to start a short-term online counselling service for people affected by volatile substance misuse. Initially www.communityforrecovery.org.uk will only be available for individuals aged 18 and over, but in the future, this service may be expanded to work with young people.

The following service descriptions are ordered alphabetically.

Big White Wall (BWW)
www.bigwhitewall.com

- **Counselling approaches:** Integrative, person-centred, cognitive-behavioural therapy (CBT) and psychotherapy.
- **Access:** Open, with contracts (both national and international) covering specified areas for additional services.
- **Funding:** A variety of different sources including various Clinical Commissioning Groups (CCGs), a number of universities and the Ministry of Defence.

The main focus of Big White Wall (BWW) is to provide an online support network or community, where people can write, draw or tell their stories on ‘therapeutic bricks’ which are then built up into the ‘wall’. Its ethos is self-help and empowerment.

The service also offers ‘Community Talkabout’ where people can post issues that members of the community can respond to. A team of counsellors and therapists work in shifts to cover the site at all times and act as Wall Guides. In addition, people in crisis can access one-to-one support from the Wall Guide who is on shift. Such individuals may be identified by the Wall Guides who regular scan the wall for any risky or ‘danger words’; where these are picked up, a Wall Guide sends the individual a personal message via their profile.

BWW works with anyone aged 16+ and it reports that young people in the age range 16–25 years make up just under 20% of its users. (see Figure 1 on page 5 – please insert when report formatted).

The service also offers one-to-one counselling sessions for members referred by contract holders who have purchased support in addition to the community side of Big White Wall. These sessions are delivered via software that is very similar to Skype called ‘LiveTherapy.’ This is a bespoke package developed specifically for BWW. Sessions, which last for 50 minutes, are run by qualified counsellors or therapists (all are BACP or BABCP accredited or are working towards accreditation). Members are able to choose the therapist they want and the modality (mainly counselling or cognitive-behavioural therapy (CBT)).

These counselling sessions are only offered to individuals aged over 18 years and BWW currently provides LiveTherapy services for NHS clients in England, working within the government adult Improving Access to Psychological Therapies (IAPT) programme. This provides talking therapies to adults experiencing common mental health problems. Clients are usually referred with depression and/or anxiety, although some have phobias, post-natal depression, or PTSD. Clients are typically offered 10 sessions.

BWW counsellors and therapists are offered advice and supervision from the Tavistock Clinic in London. Service user feedback about the services offered by Big White Wall is reported to be highly positive. This material is collated for its website and a star rating system is used for each counsellor/therapist.

According to one of the service managers involved with the Big White Wall, the service has a number of clear strengths including its flexibility, availability 24/7, and the opportunities it provides for people to explore their concerns and difficulties whilst at home, i.e. in an environment that is familiar and comfortable to them.
The disadvantages identified by the Big White Wall therapists (which echo points made by other online counsellors and therapists) are that the therapist cannot pick up easily on factors such as body language; it can be difficult to ensure that a client has thought of their own needs for privacy; and that there can be the possibility of disinhibition as a result of the greater degree of anonymity offered by online access.

Summary of service outcomes for Big White Wall.
Figures 1 to 4 are taken from a report summarising the service outcomes of Big White Wall prepared by Jen Hyatt, Founder and Chief Executive of Big White Wall in June 2013, for this scoping exercise.

Figure 1: Age of new members of Big White Wall support network, January to May 2013

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>16 to 24</td>
<td>19%</td>
</tr>
<tr>
<td>25 to 34</td>
<td>29%</td>
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<tr>
<td>35 to 44</td>
<td>23%</td>
</tr>
<tr>
<td>45 to 64</td>
<td>19%</td>
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<tr>
<td>55 to 64</td>
<td>7%</td>
</tr>
<tr>
<td>Over 65</td>
<td>2%</td>
</tr>
</tbody>
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Figure 2: Referral sources for new members, January to May 2013

- Excludes ‘other’ and ‘prefer not to say’ responses
- Clinician: 54%
- Another person or organisation: 25%
- Internet or media: 22%

Timing of LiveTherapy sessions.
LiveTherapy clients are offered a choice of session times – these are shown below (Figure 3) and highlight the value of provision that is available outside ‘traditional’ office hours.

Figure 3: Times of first session, September 2012 to May 2013

- Weekends: 22%
- Weekdays after 5pm: 49%
- Weekdays noon to 5pm: 11%
- Weekdays before noon: 19%

Results from independent evaluative review.
BWW commissioned an independent review of its Support Network service in 2009. The review is based on survey responses from 229 members. Of those who were asked to take part, 38% responded to the survey.

Figure 4: Results of evaluative review 2009

- Improved mental wellbeing: 95%
- Improved self-management: 80%
- Disclosed issue for first time: 73%

Childline
www.childline.org.uk 0800 1111

- Counselling approaches: person-centred and solution-focused.
- Access: open access.
- Funding: NSPCC/charitable donations.

Childline is a private and confidential service for children and young people up to the age of 19 years. In addition to its free helpline, Childline offers one-to-one online chat, a form of instant messenger service, and the facility to send and receive advice and support via email through a service called Ask Sam. All of these services operate 24 hours a day, every day.

The service reports receiving hundreds of call each week; often these are about high-risk issues such as suicidal thoughts and serious physical, emotional and sexual abuse. Some young people are supported on a regular basis via one-to-one chat and will speak to the same person at the same time each week. These case managed contacts are reviewed every six weeks.

Childline staff are not qualified counsellors, but are volunteers who have been trained by Childline in counselling skills and about issues frequently presented by children and young people.

Children and young people access the one-to-one chat service by first creating a free Childline account; while they wait for a counsellor to join them, they are able to watch videos and play games on the Childline site. On average, an online chat lasts around 40 minutes.

Childline attempts to reply to emails sent by children and young people seeking help via Ask Sam within 24 hours.
COAP Online Counselling - Children of Addicted Parents and People

www.coap.org.uk/onlinecounselling

- **Counselling approaches:** various modalities including humanistic, gestalt and person-centred.
- **Access:** UK and Northern Ireland only.
- **Funding:** charitable trusts.

Established in 2009, COAP provides free online counselling to people in the UK between the ages of 11 and 30 years. The counselling is via email correspondence and COAP offers either pre-arranged weekly counselling sessions or drop-in sessions wherein a person can send in an email without having arranged a time beforehand and can expect a response within the next four days.

The service operates from Monday to Friday; emails sent in to COAP over the weekend are responded immediately after, i.e. on Mondays.

The COAP service is accessed via the service’s Contact a COAP Counsellor page which requests basic personal details (name, email, username, age and location) as well as some information about what the person wishes to talk about in the counselling session.

Around 40 young people use the COAP service each year and, on average, each young person accesses six counselling sessions. Ninety per cent of those using COAP are female and the service reports increasing demand for online counselling from young people between the ages of 12 and 15 years.

The COAP service is offered by five counsellors supported by an online counselling supervisor; there are also 20 mentors. All counsellors are reported to be accredited counsellors with the BACP and work within the BACP Ethical Framework for Good Practice in Counselling and Psychotherapy (see www.bacp.co.uk/ethical_framework/) and the BACP Guidelines for Online Counselling and Psychotherapy. They are also reported to have received training to deliver counselling online via www.ocst.co.uk and/or www.onlinetrainingforcounsellors.co.uk.

COAP also support an online community and notes that it has over 1,900 messages on its message boards.

Croydon Off The Record

www.offtherecordcroydon.org/our-services/skyline

- **Counselling approaches:** wide range of modalities.
- **Access:** Croydon area only.
- **Funding:** one-year grant from Pfizer Limited.

On 1st August 2013, Croydon Off The Record, a long-established counselling service, plans to ‘soft’ launch a new online service for young people aged 14–25 years called Skyline, ahead of a main launch scheduled for September 2013.

The service will be mainly message-based, but will also offer ‘live chat’ sessions at pre-determined times. These will be offered in slots across the week, out-of-hours and at the weekends. Young people will be able to access counselling by sending a text message and the service will work with all issues.

In the first pilot year, the target is for Skyline to offer 120 young people online counselling support. Outcomes are likely to be monitored using YP-CORE, although in the longer term, the service would like to use more of the Children and Young People’s Improving Access to Psychological Therapies (CYP IAPT) suite of outcomes tools.

To start with, Skyline will be run by four paid counsellors. These staff members have all received training by a specialist organisation, Online Counselling Training Limited, and will work to BACP ethical guidelines for working online in delivering the service. In time, it is hoped to then recruit volunteer counsellors and to gradually expand Skyline, depending on demand.

The plan is for Skyline to complement the other services offered by Off The Record and, in particular, to target new audiences such as young people who cannot access the Off The Record premises. These include young people with physical disabilities and young people with caring responsibilities. It is also thought that the service will be attractive to those who do not want to use face-to-face counselling as a result of issues to do with their culture, family viewpoints or worries about stigma.

It is intended that Skyline will only be available to young people living in the Borough of Croydon. To try and ensure this, all young people requesting online counselling will be required to register and to provide their address. (Obviously it is possible that young people from other geographic areas may hear of the service and could give a friend’s address, so it cannot be completely guaranteed that Skyline will only be accessed by young people from Croydon.)

E-motion in Brighton

Frankie@e-motion.org.uk

- **Counselling approaches:** integrative; core orientation of counsellors is person-centred but elements of solution-focused and cognitive-behavioural therapy (CBT) are also offered depending on the clients’ needs.
- **Access:** open but targeting children and young people from across Brighton and Hove area.
- **Funding:** Brighton and Hove City Council Children’s Services.

Commissioned by Brighton and Hove City Council Children’s Services for an 18-month pilot, E-motion is a new online project for young people aged 13–25 years who live in the
area of Brighton and Hove. The service has been developed through a partnership of two voluntary sector agencies who are well-known and established providers of counselling services for young people in this area of England: the Young People’s Centre (YPC) whose umbrella organisation is the charity Impact Initiatives, and the Youth Advice Centre (YAC) which is part of Sussex YMCA.

E-motion was soft launched locally in June 2013, with a wider roll out planned for later in the year. To begin with, it will operate on weekdays only and young people can access the service by sending an email which will generate a request for the young person to then supply some basic details, in order to check that online counselling may be appropriate for them. Where it is decided that counselling is appropriate, young people will then be allocated their own online counsellor who will offer the young person support by email. E-Motion aims to respond to all emails received from young people within 24 hours; emails received over the weekend will be addressed on the following Monday.

The E-motion service will be run by five counsellors who are all trained and experienced staff and who will all receive specialised online training. They will work to the BACP guidelines and Code of Ethics.

Staff involved in the development of this new service report that they have been trying to develop an online form of counselling for some years, but have been prevented from doing this because of problems securing funds. Their interest in offering online counselling stems from a wish to address the needs of young people who either do not engage with face-to-face counselling, or who find accessing youth counselling premises problematic. These include young men, young carers and young people with disabilities.

It is intended that outcomes of the online counselling provision will be monitored using YP-CORE.

iRelate
www.irelate.org.uk

- **Counselling approach:** integrative.
- **Access:** selected schools in specified areas of the country only.
- **Funding:** Department for Education (DfE)

The pilot online project iRelate ran for 12 months from March 2012. Relate has offered online counselling for adults and parents for some while, however, the piloting of iRelate was the first time the organisation had tried online counselling with children and young people. iRelate was provided by a staff of 25 counsellors; these staff were all experienced, with postgraduate qualifications and they had also been trained by Relate in delivering counselling via online software. The project offered online ‘live chat’ sessions, which specific schools in six areas of England (Yorkshire, Derbyshire, Warwickshire, Birmingham, Lincolnshire and North London) could pre-book during normal school hours.

Each school involved in the project had a nominated lead to oversee the bookings, with teachers identifying those children and young people they thought would benefit from online counselling. These children and young people would then access the online iRelate counselling sessions via their school computer suite where they would be sent a link to the live chat facility. Staff were also on-hand to offer support should a child or young person become distressed during or after the online counselling session.

In total, around 55–60 schools took place in the pilot, with the aim being that once this ended, local areas would then sustain the provision. Unfortunately in many cases, and probably as a result of the difficult economic environment and pressure on budgets facing many schools, once the free provision ended, only a handful of schools (thought to be about six) have continued to be involved and to run the online sessions.

The iRelate pilot was independently evaluated and the following data are taken from the evaluation report:

- 442 clients accessed iRelate between March 2012 and March 2013; a total of 1916 sessions were offered.
- The mean age of clients was 14.26 years.
- The majority of clients were female (n = 262, 69.7%), and of White British ethnicity (n = 325, 86.9%).
- On average, children and young people accessed four online sessions, which is not dissimilar to the number of sessions children and young people typically access in face-to-face sessions.
- In terms of presenting issues, the most frequently occurring, as recorded by the counsellors, was ‘anxiety/stress’ (23.23%), closely followed by ‘relationship – family’ (21.87%) and ‘communication’ (20.51%). In addition ‘friendships’ (12%), ‘self-esteem’ (11.17%) and ‘self and identity’ (10.13%) were presented in more than 10% of total sessions. This profile is somewhat different from previous studies of face-to-face school-based counselling where anxiety/stress issues tend to be less present, and anger issues more present.
- Outcomes of the iRelate counselling sessions were monitored using YP-CORE and on average, participants scored 20.18 on the YP-CORE at their first recorded measurement point, and 17.72 at their last recorded measurement point. This indicates a significant

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1 Relate also runs Ask Alex via the iRelate website; this is more of an ‘agony aunt’ type of service which allows children and young people to email in requests and queries.

In terms of the challenges encountered in developing and delivering iRelate, the following were identified: recruiting schools to join the pilot and building school staff confidence to refer children and young people for the online sessions. Demands posed by iRelate included the need for good counselling team links and supervision structures (it was noted that all counsellors had access to a Senior Practice Consultant and a practice helpline).

Identified strengths were that once established in the schools, the service had been very well received, with high levels of satisfaction reported from the children and young people using the service. School staff were also reported to be very positive, with some expressing the view that the online sessions, possibly because of the anonymised format, had helped some young people to start to talk more quickly about their worries or concerns.

Now that the pilot phase of iRelate is over, Relate is currently considering the different options for offering online counselling in the future; this may include working with local authorities to deliver a service.

KOOTH
www.xenzone.com

- **Counselling approach**: wide range of modalities.
- **Access**: selected local authorities.
- **Funding**: local authority contracts.

Staffed by 14 qualified counsellors (all either BACP accredited or working towards this; three are also qualified mental health nurses), KOOTH is part of Xenzone and works across 14 locations of the UK. It offers online counselling to young people aged 11–25 years (in some areas of the country, the service is only funded for young people up to 19 years of age).

In three of these locations – Knowsley, Cornwall and Powys in South Wales – KOOTH offers ‘blended services’ where both online and face-to-face counselling are offered.

KOOTH has been running for just over eight years and has an average of just over 10,000 young people using its services each year, 69% of whom logged in outside office hours in the period April 2012–March 2013. Its site, in addition to being the access point for the online counselling, offers a range of features including: message boards; support forums; a co-created e-magazine and blogs.
Between April 2012–March 2013, KOOTH recorded 9254 new registrations; 6807 of these were by females and 2447 were by males. Registrations by age for this period are shown in Figure 5.

**Figure 5: Registration by age at KOOTH.com for period April 2012 to March 2013**

KOOTH reports that the average for young people signing up for the online counselling is 14–15 years and for the message boards, the average age is 12–13 years. Online counselling is available on a booked or drop-in basis and KOOTH reports roughly a 50/50 split between these two entry routes. Advice and general support is also part of the package offered, and as noted, in three locations, there is also the option to move to face-to-face counselling.

In the year April 2012–March 2013, 81% of young people using KOOTH were White British; 9% were recorded as coming from the following ethnic groups (1% for each group) – Pakistani, White & Asian, any other mixed, White & Black Caribbean; Indian; Bangladeshi; Chinese; Caribbean and White & Black African. The routes through which young people heard about KOOTH are shown in Figure 6. These data clearly show the important role played by schools.

**Figure 6: How young people heard about KOOTH.com (n: 9254 young people)**

Young people access the online service by registering and then going to the online ‘waiting room’. There is then a ‘roaming period’ of up to four weeks at which point they will be assigned a primary counsellor who will offer weekly sessions. Many young people only use the roaming and drop-in support and never proceed to the more structured weekly sessions.

According to staff running KOOTH, self-harm is a prominent feature of the referrals received for online counselling. It is also apparent that some young people use the KOOTH online sessions to practise what they then might discuss face-to-face with their therapist at specialist CAMHS. KOOTH reports working closely with many specialist CAMHS workers, especially in its blended services, and offers a consultation service to these practitioners which is reported to be well-regarded and used.

Outcomes are monitored every session using YP-CORE and young people also complete ‘COGS’, a goal-based measure, and complete an evaluation feedback form. An ‘end of session’ form also requests feedback concerning four key areas of therapy: ‘Did you understand what was said?’; ‘Did you feel listened to?’; ‘Did you talk about what you wanted to?’; and ‘Did it give you ideas for the future?’ Data from KOOTH indicates that 92% of young people reported feeling listened to. In Figure 7, the number of responses given to the question ‘I found chat/messaging/forums/magazine helpful’ are shown.

**Figure 7: Clients’ evaluations of helpfulness of the different elements of KOOTH.com**

In response to the question, ‘Do you prefer to access advice/info/counselling online or in another way, e.g. phone or face-to-face?’ 86% of users of KOOTH reported that they preferred online to other ways of accessing support.

Mindfull
www.mindfull.org

- **Counselling approach:** various modalities.
- **Access:** open access, UK-wide.
- **Funding:** Help for Children UK.
MindFull is a new national charity that will provide a new online counselling service for children and young people aged 11–17 years. The service, which will be available every day between 10:00–21:00 hours, has been developed in partnership with young people and aims to use social networking technology to offer support to young people, on the basis that this is a medium of communication that young people understand and trust.

MindFull was launched on 5th July 2013 by the organisation behind Beat Bullying, the BB Group, and will offer online counselling sessions to young people who have registered on the site. MindFull will also work on a contractual basis to offer counselling in schools, youth clubs and community centres; counselling can be commissioned in various bundles and professional support, awareness-raising work and mentor training workshops can also be provided. The peer mentoring programmes, which will run in schools and local communities, aim to train young people to act as mentors who can then support other young people to register and use the online support.

MindFull intends to monitor the outcomes of its online counselling using an in-house outcome tool, previously used by the BB Group to monitor its online peer mentoring provision.

Streetwise in Newcastle upon Tyne
www.streetwisenorth.org

- **Counselling approach:** integrative.
- **Access:** open but targeting young people living in the North East of England, in particular those living in rural and outlying areas and those unable to access the Streetwise premises.
- **Funding:** Comic Relief.

With three-year-funding of just over £120,000 from Comic Relief, Streetwise started to plan an online counselling service in December 2012. The site became operational in January 2013 and since then, 35 young people have accessed the online service. Most of these have come from Newcastle, although referrals have also come from North and South Tyneside, Sunderland, Durham and Northumberland.

The Streetwise online provision complements the face-to-face service and operates from 3pm–9pm every Wednesday and Thursday and from 10am–5pm on Saturdays.

Young people access the initial assessment for online counselling via various routes including Streetwise’s Facebook page, the service website, email, Skype or by dropping into the service premises.

The service targets those young people who often struggle to attend face-to-face counselling sessions, including young people living in rural and more outlying areas, young carers and young people with disabilities.

The online counselling support in open-ended (i.e. not time-limited) and is provided by two part-time counsellors (both 18.5 hour posts) - these are new posts dedicated to the delivery of online work. However, the whole Streetwise counselling team (five counsellors) have been trained in online counselling techniques so that the two online workers do not feel isolated and the provision is integrated as much as possible into the service and overall team working. (Training was provided by the UK Online Institute.)

So far, most of the young people accessing the online provision have been in the 16–18 age range, although referrals have been received across the whole Streetwise age range of 11–24 years. It appears that there is equal interest from both males and females but some suggestion (from the initial feedback) that females are more likely to sustain online counselling contact.

In terms of the needs presented, Streetwise report that anxiety is by far the most common issue presented, including by young people who are out of school and experiencing panic attacks. Depression, self-harm and self-esteem are other commonly presenting issues – and some differences with the face-to-face counselling are apparent in that in the latter, family relationships are the main presenting issue.

The service has also reported some issues with young people who appear to be under the influence of alcohol using the online service – this differs markedly from the face-to-face service given that the service policy is not to work with young people when they are intoxicated.

To date, 85% of the young people accessing counselling online do so via email and instant messaging and Skype does not appear to be popular. Feedback from young people indicates that, at least in the early stages, many find visual contact too intimidating – and that over time, as the counselling relationship develops, young people become more open to using Skype.

Reasons for using online counselling reported by those using the Streetwise service include: anonymity (not having to be seen); easier access (noted by some young people with caring responsibilities); not having to rely on parents for transport and being seen more quickly, rather than having to wait for a face-to-face appointment.

Like other counselling sessions at Streetwise, there is session-by-session outcomes monitoring – CORE 10, YP-CORE and CORE NET are used.
The Market Place, Leeds
www.themarketplaceleeds.org

- **Counselling approach:** person-centred.
- **Access:** only young people already known to and using The Market Place.
- **Funding:** variety of funds including from public health and the Department for Education.

The Market Place is not set up as a telephone service but its Director responded to the Call for Information to report that sometimes telephone counselling would be offered, in order to be as flexible as possible around a young person’s requirements. On average, each year around six young people are supported by The Market Place to access counselling via the telephone.

A specific example of when telephone counselling was offered was given: this concerned a young person requiring serious medical treatment who could not access The Market Place building and who was confined to their home for a period of months.

**Training implications**

The data gathered through the scoping indicates that all of the counsellors working online have required some additional training in order to deliver counselling via this medium. Little information has been available about the training and this warrants further investigation in the future.

Information from the various current providers of online counselling also indicates that self-harm is often a prominent feature of the referrals received. This highlights the need for online counselling staff to be trained and supported to work with this problem, which clearly has associated high levels of risk. There are also indications that anxiety issues may be particularly prominent in online work and, again, specialised training in evidence-based approaches to address this difficult may need to be considered.

Other factors associated with the delivery of online counselling that have implications for training, as well as line management and supervision, include the increased possibility of worker isolation as a result of online counsellors being relatively few in number and often delivering sessions outside normal working hours.

The current work by BACP on developing competency frameworks for best practice, including a framework specifically for BACP members working with children and young people, has the potential to play an important role here. This is also the case for BACP’s ethical guidelines for different aspects of counselling practice, which a number of the online counselling services reported working to.
Conclusions

Online counselling is clearly a growing sector – even in this modest scoping exercise, a range of newly developed online counselling services was identified. Many of those supplying information also indicated that their online provision is well used by children and young people and that demand for this form of support is growing.

Providers of online counselling recognise a number of key advantages – online counselling is flexible, easy to access and is a medium young people are familiar with and like to use. For these reasons, it is a valuable avenue for reaching new audiences. It also appears to complement existing provision very well.

A need for more outcome data is acknowledged. However, what has been gathered so far, looks potentially promising. Service user feedback is also highly positive.

In terms of possible disadvantages, there has been some mention of the possible disinhibition some young people may show, due to the greater anonymity afforded by online access. This has not, as yet, been noted to be a significant difficulty but clearly needs to be carefully monitored as this sector grows.

Appendices

Appendix 1: Call for information

Call for information about online and telephone counselling services for children and young people

As part of its work to develop a new online learning resource for counsellors working with children and young people, the MindEd project, which has been funded by the Department of Health, wishes to gather information about any online or telephone based provision currently available for children, young people and young adults (up to age 25 years) in England.

Dr Cathy Street, an independent health researcher who has worked with Youth Access for many years, has been commissioned to lead this work.

If you offer online or telephone counselling support, or you are aware of any counselling services where this is offered to children and young people, then Cathy would very much like to hear from you. This work needs to be completed by the end of May 2013 so a prompt response would be much appreciated.

You can send information to Cathy via her email – cathy.street1@btinternet.com. The sort of materials she would find useful include: annual service reports that detail the online or telephone provision; evaluation reports; service user feedback and outcomes monitoring information; any activity data.

If you would prefer to talk with Cathy on the telephone, she is happy to arrange this – again, in the first instance, please do email her.

Many thanks for your assistance
Contact us

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