



# **Counselling Service**

## **Annual Report 2020-21**



## Contents

<b>Introduction</b>	<b>3</b>
<b>Staffing and resources</b>	<b>4</b>
Changes in staffing	6
Staff development	7
<b>Students accessing the service</b>	<b>8</b>
Demand for counselling	8
Referrals	9
Presenting issues	9
Waiting times	10
Risk	11
<b>Individual Counselling</b>	<b>12</b>
Average number of sessions	12
Distribution of session numbers	12
<b>Medical consultations</b>	<b>13</b>
<b>Groups and Workshops</b>	<b>13</b>
<b>On-Site Counsellor Programme</b>	<b>15</b>
<b>Demographics</b>	<b>16</b>
Level of study	16
Academic Division	17
Gender	18
Ethnicity	18
<b>Clinical outcomes</b>	<b>19</b>
<b>Service feedback</b>	<b>21</b>
<b>Peer Support Programme</b>	<b>25</b>
<b>Other service activities</b>	<b>26</b>
<b>Forward view</b>	<b>27</b>

## Introduction

2020-21 was a year like no other at the Counselling Service, and hopefully will never be again. With the ongoing Covid pandemic and series of national lockdowns, the Counselling Service delivered all therapeutic provision, training and interventions online. Although this was not the optimal state of affairs, through the adaptability, hard work and effort shown by all members of the Counselling Service, we were able to provide a more than good enough level of provision for students and the collegiate university as a whole. The staff team should be congratulated on their level of performance during this period.

The Counselling Service was able to put into action a number of changes to its provision and mode of delivery which not only addressed the immediacy of the specific challenges arising from the pandemic but a number of these adaptations have improved provision in general and will be maintained going forward. However, working completely online and working from home placed some additional pressures on the staff team and fundamentally changed the pattern of demand. With increased demand for counselling from undergraduate students during periods of vacation, this may have longer term implications for staffing during vacation periods and the need for resources.

The Counselling Service strongly supported the formation of the Mental Health Task Force (MHTF) working group, which was part of the university's response to identify any additional provision for students to address the widely reported specific challenges in terms of student mental health and wellbeing during the pandemic. The MHTF recognised the need for additional counselling resource for the period of the pandemic and additional resources were provided by the central university to employ part-time sessional counsellors on fixed terms contracts for the academic year. These additional resources were known as 'Silver fund'. Additional resources were also made available to increase the capacity for the medical consultant (psychiatrist) Dr Richard Lawes over this period. The additional resources were also used to fund throughout 2020-21, the two black counsellors who were employed in August 2020 to increase the diversity of the Counselling Service. It was agreed that the service needed all the additional provision, listed above, on a permanent basis for the long term and additional funding for this was provided to resource this in the 2021-22 budget.

The MHTF working group also provided an opportunity to identify other additional interventions the Counselling Service could do to support students and the collegiate university, especially the college welfare teams during this difficult period. The Counselling Service was able to provide an advice and consultation service to senior college welfare staff every day, apart from bank holidays, over the Christmas vacation fixed closure period of 2020-21.

The Counselling Service put forward plans to support college welfare staff and academic departmental staff, both through a more comprehensive in-house training programme as well as a complementary supervision scheme for college welfare staff. In Trinity term 2021 the supervision scheme was launched, offering clinical supervision, provided by senior members of the service, for college welfare staff to help in their supporting students with mental health problems. Colleges could request supervision arrangements for their senior welfare staff for individuals, pairs, or in groups. The initial response was very positive from colleges with 22 colleges going on to request a variety of supervision arrangements. This will be expected to increase in the coming years. It was also recognised by the MHTF working group that there should be a dedicated member of the Counselling Service to offer an in-house training programme to the whole collegiate institution, building on the extensive training that had already been offered to college welfare teams and academic staff in university departments, particularly at a PG level. This was recognised by the central university and funding was included into the 2021-2022 budget for a part-time Training

Development Co-ordinator, on a fixed term contract. In August Dr Ruth Collins, one of the service's senior clinicians was appointed to this position.

The Counselling Service was asked by the MHTF to explore the possibility of developing a mental health provision, offering more specialist support and therapeutic interventions to certain groups of students who are currently not being adequately supported by the local NHS specialist psychiatric services. The Head of Counselling, together with Ms Maureen Freed, Dr Richard Lawes, met with Professor Kate Saunders from the Department of Psychiatry to work out the level of need in terms of student numbers as well as which type of mental health problems would be appropriate for this type of specialist provision. From the data provided by Professor Saunders as well as the number of students seen by Dr Lawes, it was estimated that between 300-400 students would fit into this category. It was also established that the types of problems experienced by these students would predominantly be eating disorders, mood instability and emotional regulation and students with issues of neuro-diversity, including ADHD. It was envisaged that students who had these types of problems and were experiencing moderate levels of disturbance would be most appropriate for this type of provision, to help them manage their condition and maintain a level of stability, rather than students who were experiencing more severe levels of disturbance. Senior members of the Counselling Service met with student representatives of a national campaigning organisation to promote increased support and treatment for students and young adults with eating disorders, as they were very concerned about the lack of support currently offered by the local NHS services to Oxford students experiencing eating disorders. The student representatives were very much in favour of the possibility of the Counselling Service developing such a level of support. However, due to the time limited nature of the life of the MHTF it was not possible to develop these plans further or explore ways in which such a provision could be funded. It would be hoped that the new Joint Student Mental Health Committee could take forward these proposals in 2021/22.

The Counselling Service would like to thank the members of the MHTF working group for their support, especially the Chair of the MHTF, Sir Tim Hitchens, President of Wolfson College.

During 2020/21 the Counselling Service was even more committed to maintaining and improving our working relationships, collaboration and support of all our key stake holders, both internally with the collegiate university of colleges and departments, but also with the College Doctors, local NHS services and various organisations in the third sector. The Counselling Service was represented on many of the key committees with the collegiate university.

## **Staffing and resources**

### **Counselling staff**

The additional resources from the 'Silver fund' enabled an increase in the number of counsellors to meet the additional demands experienced through this period of the pandemic. This meant that In 2020/21 the Counselling Service employed: 15.68 FTE Counsellors and a 0.4 FTE Medical Consultant (Psychiatrist). The cost of 14.48 FTEs was covered by our core funding. We have funded an additional 1.2 FTEs via the On-Site Counsellor (OSC) programme: because the cost of employing OSCs is covered by colleges, this enables us to fund additional counselling within the central service. Finally, we have received some funding from the Peer Support Programme which 'bought out' time from counsellors delivering Peer Support training and supervision.

<b>Head</b>	Mr. Alan Percy	UKCP Rag Psychoanalytic Psychotherapist and Supervisor, BACP Senior Accredited Counsellor/Psychotherapist
<b>Deputy Heads</b>	Dr. Anne-Marie Daly Ms. Maureen Freed	HCPC Reg, BPS Chartered Psychologist (Assoc Fellow) UKCP Reg Psychotherapeutic Counsellor and Supervisor
<b>Counsellors</b>	Dr. Melissa Barkan Ms. Juliet Bulman Ms. Mischka Byworth Dr. Brigid Carley Dr. Ruth Collins  Dr. Kam Dhillon Ms. Jane Enticott Ms. Laura Evers Ms. Sara Hitchens Ms. Kirsty Hunter Ms. Karen Kendall Dr. Tim Knowlson Ms. Heidi Lerner Dr. Sarah Leung Ms. Sophie Lopez-Welsch Ms. Virginia Norman Ms. Nicola Psaila Dr. Jonathan Totman Ms. Elizabeth Treasure Mr. Sean Veitch	HCPC Reg, BPS Chartered Counselling Psychologist UKCP Rag Psychotherapeutic Counsellor UKCP Rag Psychotherapeutic Counsellor UKCP Rag Integrative Psychotherapist HCPC Reg, BPS Chartered Psychologist (Assoc Fellow and Supervisor)  MBACP (Accred) Psychodynamic Counsellor, MBpsS OrgPsychologist UKCP Rag Psychotherapeutic Counsellor, MBACP UKCP Rag Psychotherapeutic Counsellor BACP Accredited Counsellor UKCP Rag Psychotherapeutic Counsellor MBACP (Accred) Psychodynamic Counsellor HCPC Reg, BPS Chartered Psychologist BACP Integrative Psychotherapist HCPC Reg, BPS Chartered Psychologist (Assoc Fellow) UKCP Rag Psychotherapeutic Counsellor UKCP Rag Psychotherapeutic Counsellor HCPC Occupational Therapist, CBT Therapist HCPC Reg, BPS Chartered Psychologist BACP Senior Accredited Counsellor Rag Member MBACP (Accred)
<b>Sessional Counsellors</b>	Ms. Audrey Bronstein Ms. Alice Bulman Ms. Marigold Brown Ms. Dilys Codrington Dr. Joanne Dent Dr Hend Farza Dr Lindsey Hardy-Griffin Mr. John Hoysted Ms. Harriet Peters Dr. Judith Rassman Ms. Ruth Sandford-Smith Ms. Elitsa Slavkova Ms. Femke Stokes Dr Theresa Turner Ms. Kara Young	UKCP Rag Psychotherapeutic Counsellor, MBACP (Accred) BACP Senior Accredited Counsellor UKCP Rag Psychotherapeutic Counsellor Ad Dip.PC. MNCS (Accred) BPS Chartered Psychologist UKCP Rag Psychotherapeutic Counsellor UKCP Rag Psychotherapeutic Counsellor UKCP Rag Psychotherapeutic Counsellor UKCP Rag Psychotherapeutic Counsellor ACP Rag Child and Adolescent Psychotherapist BPS Chartered Psychologist BABCP accredited UKCP Rag Psychotherapeutic Counsellor BPS Chartered Psychologist UKCP Rag Psychotherapeutic Counsellor
<b>Associate Counsellors</b>	Ms. Catherine Bailey Alexine van Biervliet  Mr. Ian Davin Mr. Nick Hagan	
<b>Psychiatrist</b>	Dr. Richard Lawes	Royal College of Psychiatrists

The Counselling Service operates under the 'Ethical Framework for Counselling Professions' of the BACP.

## Changes in staffing

The additional resources from the 'Silver Fund' allowed the service to bring in a number of counsellors and psychologists on fixed term contracts to bolster the clinical team to meet increased demand. However during this period it became increasingly difficult to recruit suitably qualified and experienced clinicians compared to previous years. This was due to the fact that there was heavy demand for experienced counsellors, not only across the HE sector but also in NHS services. The other and in some ways more concerning reason was the huge growth in the private sector for counsellors and psychologists, especially in more affluent regions like Oxford. Counsellors working privately can receive much greater financial reward for much less demanding work compared both to the university sector and the NHS. This may have longer term implication for future recruitment and gives greater need for the service to develop the Associate Programme as outlined elsewhere in this report. The service was able to employ a number of very good clinicians, but on fix term contracts for the academic year offering as little as one clinical day per week. This added a greater burden in terms of management, administration and supervision by having a much larger staff team, but many staff only doing one day per week. The service was also able to use the fact that we were only working online, so could employ counsellors outside the Oxford area. The service would like to thank all the clinicians who did valuable work on a sessional basis through 2021/22, and had to adapt to the demands of the service very quickly and 'hit the ground running'.

The additional 'Silver Fund' was consolidated into the budget for 2021/22, which meant during the summer of 2021 the service could go through an extensive recruitment process to turn many of these time limited posts into permanent positions. The most significant of these was the funding used to employ the two black counsellors throughout 2020/21 being made into a permanent position. The Counselling Service had mixed-race and other counsellors who identify as BAME but not specifically black counsellors. Following the Black Lives Matter Campaign and the letter of response from the Vice Chancellor and Heads of House we committed to introduce black counsellors into the service. After a rigorous recruitment exercise, we were please two employ two permanent counsellors of colour, Ms Mubeen Rowe and Dr Wanderley Santos. The service was also able to employ two further counsellors of colour, Ms Dilys Codrington, who had been one of the black counsellors working throughout 2020/21 and Dr James Cones, who had previously worked at UCLA Counselling Centre and had specialised in clinical work with male students and students of colour. The services very much welcomes these appointments and the increased diversity of the clinical team.

With this additional 'Silver Fund' being put into the permanent budget the service was able to appoint Ms Marigold Brown, Ms Femke Stokes and Ms. Kate Simpson during the summer of 2021 as permanent part-time counsellors for 2021/22. In Trinity term the service was also able to increase the contract of Dr Richard Lawes, as psychiatrist and medical consultant from 0.2 to 0.4 of a FTE post. In August 2021, Dr Ruth Collins, one of the service's most senior and experienced clinicians, was able to be appointed as the Training Development Co-ordinator on a fixed term post for one year.

For most of the academic year of 2020/21, Ms Brigid Carley was on maternity leave and her work was covered by a combination of sessional clinicians. In August 2021, Ms Nicola Psaila started maternity leave for one year.

In April 2021 Gillian Hamnett left her position as Director of Student Welfare and Support Services, to take up the role of Deputy Academic Registrar. Ms Hamnett had been Director of SWSS since May 2017 and during this time had been a great support of the work of the Counselling Service and helped in terms of developing and promoting the work of the service throughout the collegiate university. The Counselling Service would like to thank Ms Hamnett for all her support over the years and wish her well in her future career.

The Counselling Service would also like to thank Dr Eleni Kechagia-Ovseiko who stepped into the role of Interim Director of Student Welfare and Support Services from May until September 2021. Dr Kechagia-Ovseiko did a very good job in this time helping the Counselling Service with various practical challenges and recruiting decisions. All the work she managed to do in this time was particularly impressive since she was only doing this on a part-time basis as well as fulfilling her role as Senior Tutor at Nuffield College.

The service welcomes the appointment of Mr Rotimi Akinsete as the new Director of Student Welfare and Support Services, who was also appointed in the summer of 2021 to take over his role in October 2021. The services looks forward to his leadership and support of the Counselling Service.

A hugely significant departure from the Counselling Service was of Ms Maureen Freed, one of the Deputy Heads of the Counselling Service who resigned from her position, leaving in the September 2021. Ms Freed had been a long serving and dedicated member of the Counselling Service since 2000. She started at the service as a trainee placement from the Diploma course in Psychodynamic Counselling at the Department of Continuing Education and continued as an Associate until she became fully qualified. She was appointed as a part-time psychodynamic counsellor in 2005. In April 2017 she was appointed as one of the Deputy Heads of the Counselling Service. During her whole time at the Counselling Service Ms Freed has demonstrated an unstintingly high level of commitment in terms of hard work and high degree of thoughtfulness and insight. During her time as Deputy Head she developed a number of key service initiatives and made a huge difference in terms of the Counselling Services working relationship with the collegiate university. She demonstrated a high level of insight, skill and care in her clinical work with students and showed the same degree of thoughtfulness and compassion in her clinical supervision and management of clinical staff. Her contribution to the Counselling Service has been of enormous significance and she will be greatly missed.

## Staff development

In general, we are committed to a 'generalist' model: we expect all counsellors to be competent to work with the full range of presenting issues.

Many of our staff have deep expertise in working with specific presenting issues and/or in offering particular treatment approaches. To cite just a few examples, we have staff who have previously worked in NHS Specialist services including: Acute Psychiatry, Early Intervention in Psychosis, Trauma, Forensic Psychiatry, Learning Disabilities, Memory Service, Eating Disorders, Child and Adolescent Mental Health, ADHD, Substance Abuse and Primary Care. Our staff have specialist qualifications in: Cognitive Behavioural Therapy (CBT), Dialectical Behaviour therapy (DBT), Acceptance and Commitment Therapy (ACT), Compassion-Focused Therapy (CFT), Transactional Analysis, and many other established therapies.

To derive full benefit from the range of skills held within the team, we regard it as essential that we have effective mechanisms to share expertise between clinicians, so that individual clinical strengths become team strengths. In this academic year, we dedicated 3 staff meetings per term to intensive staff knowledge sharing sessions on individual topics; in addition to this, staff contributed to our growing collection of internal publications.

As part of the response from the University of Oxford to the Black Lives Matter movement the Counselling Service was granted funding from the central university to arrange a series of anti-racism and transcultural training sessions. These were led by Dr Isha McKenzie-Mavinga and her colleagues for all members of the Counselling Service as well as some of the mental health mentors from DAS. This consisted of two 2 day training programmes and is seen by the service as the start of an on-going dialogue and professional development in terms of a more radical understanding, awareness and practice of the work and clinical practice at the Counselling Service.

Since 2015, we have offered a small amount of ‘specialist’ intervention in the Counselling Service ‘Trauma Clinic’, offering the evidence-based therapy EMDR to students presenting with post-traumatic symptoms following a single, clearly-defined traumatic event.

### Associate Programme

For more than 25 years, the service has had an Associate Counsellor programme offering supervised clinical placements to counsellors completing graduate-level qualifications in Psychodynamic Counselling, Counselling Psychology and Cognitive Behavioural Therapy. This scheme has had substantial benefits to the Service because Associates augment our capacity to offer longer-term counselling to students, with limited commitment of resource.

In 2020/21, we hosted 4 Associate Counsellors who worked with 27 clients, offering an average of 19.7 sessions per client for a total of 532 sessions.

The Associate Programme has additional strategic importance for us because it enables us to develop a pool of counsellors whose intensive apprenticeship with us means that they have the specialised skills to work effectively in our context. Over the years, many of our professional staff joined us in the first instance as Associates. Currently 20 members of our clinical staff have at some point in their counselling careers worked with us as Associates.

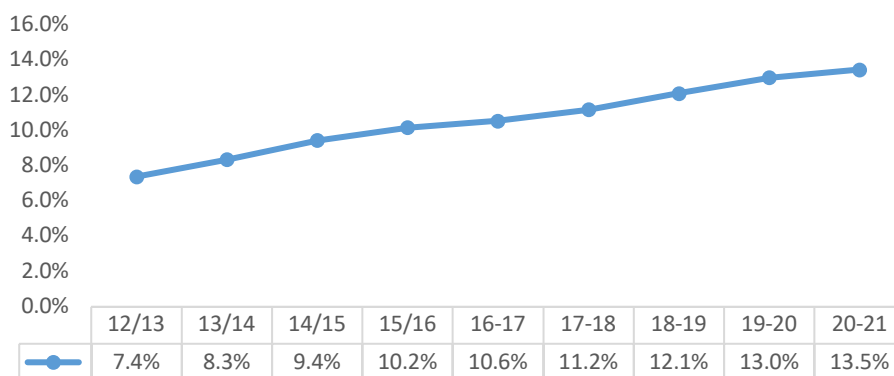
## Students accessing the service

### Demand for counselling

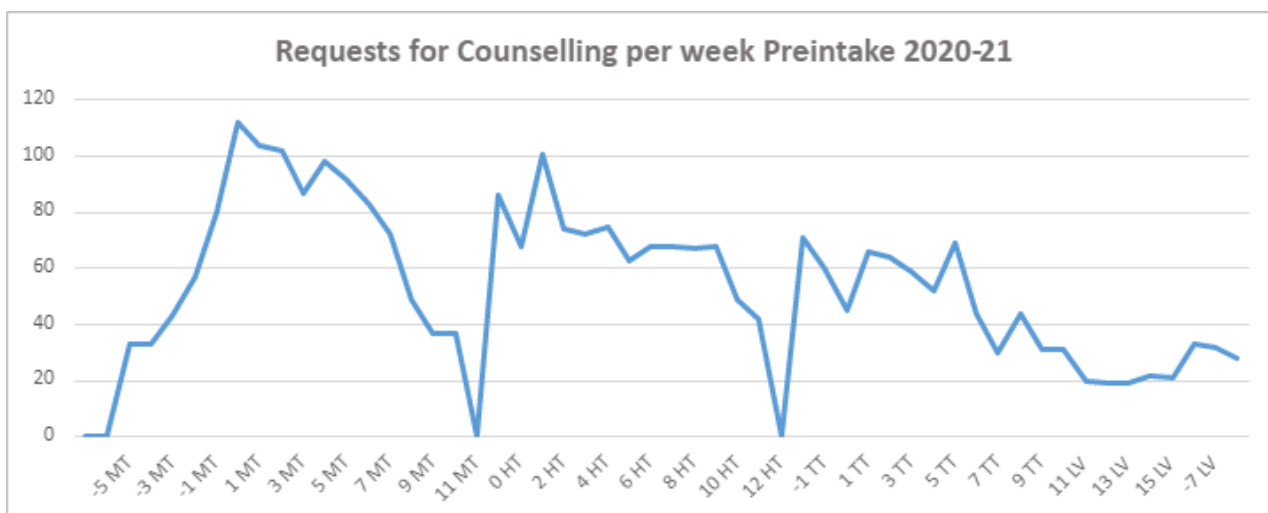
A total of 3,440 individual students attended counselling, comprising 2,820 students seen at Worcester Street (11% of the student body) and 620 seen in colleges as part of the On-Site Counsellor (OSC) Scheme (2.5% of the student body). This compares with a total of 3,195 students seen in 2019/20, of whom 2,694 were seen at the central service and 501 in colleges. This represents a 7.6% increase in student demand from the previous year. This is in line with increased demand for counselling across the UK university sector.

In 2020/21 13.5% of Oxford students sought counselling compared with 13% in 2019/20.

Percentage of student population accessing counselling 2020 - 2021

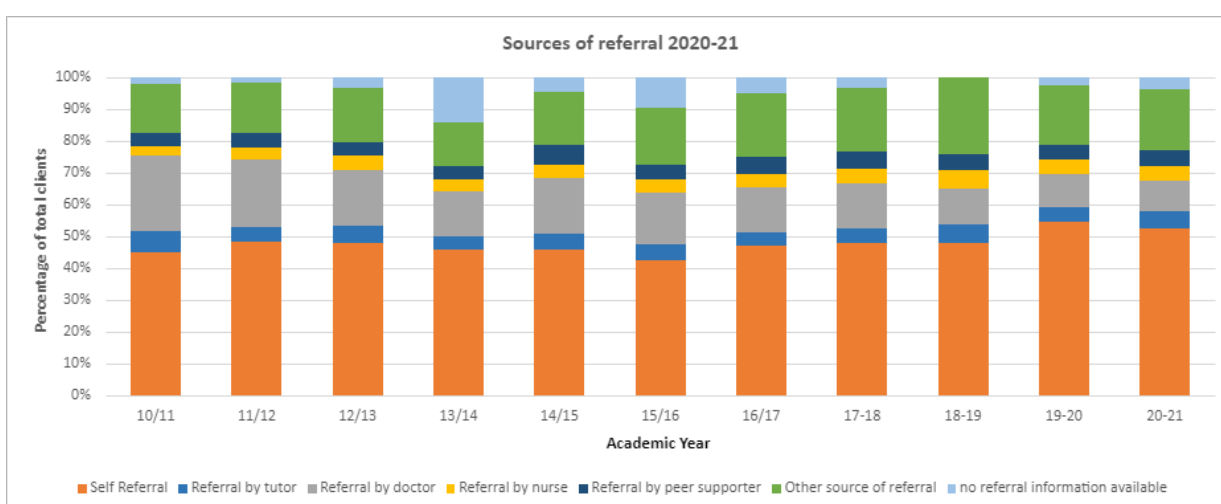






### Referrals

Referral routes have remained largely stable with most students self-referring. ‘Other’ may include parents, friends or Common Room welfare reps.



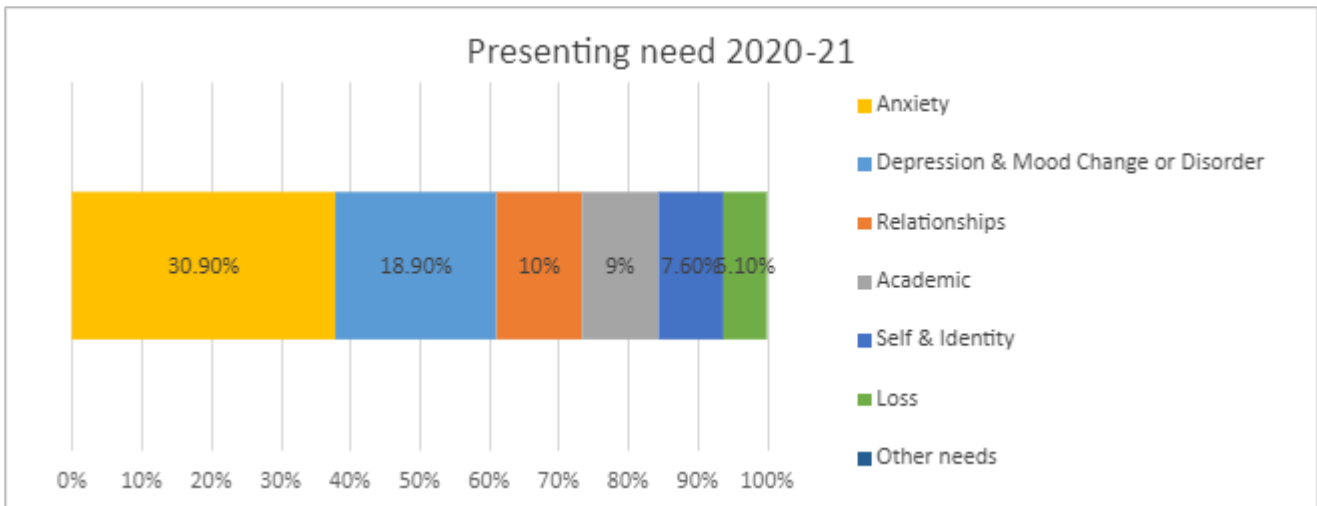
### Presenting issues

In 1997, the Association for University and College Counselling Services (AUCC) introduced a system to categorize the problems with which clients present to university and college services. The AUCC categories make it possible to compare data between services, and to aggregate data from many services to identify trends in the sector as a whole.

Presenting issues fall under 15 general headings. However, the majority of students present with issues falling under just 7 of these: Anxiety, Depression & Mood Change or Disorder, Relationships, Academic, Self & Identity, Loss and Abuse. These 7 categories accounted for 90% of cases in 2020/21.

Anxiety remains largest single category of presenting issue, and increased in percentage from 26.4% in 2019/20 to 30.9% in 2020/21. This seems to confirm reports showing increased anxiety in the general population and particularly in young adults during the Covid pandemic. There were some small changes in the other categories. It is important to note that these figures representing the initial presenting problem by the student, however, in many, if not most cases students had co-morbidity with a variety of different problems.

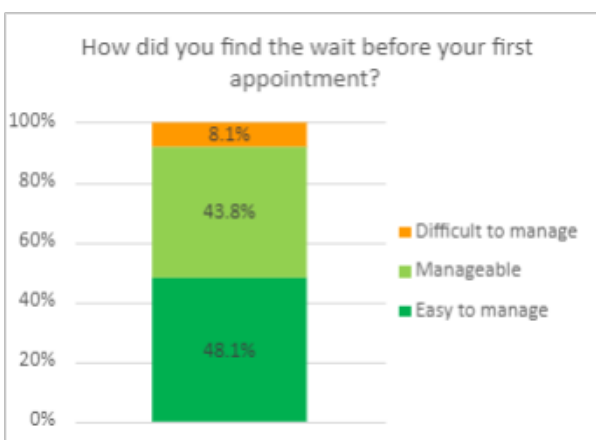
It has been widely reported that the series of lockdowns and social isolation throughout 2020/21 has had direct effects on mental health of the whole population and this could be seen in the presenting issues of students attending the Counselling Service. The clinical team reported that students were having greater generalised anxiety, lacking in motivation, more limited ability to concentrate and a general sense of life feeling 'unreal'. However, the counselling team also noticed an increase in the number of students who 'self-diagnosed' using information on the internet and we have seen a very steep rise of students reporting that they think they have either ADHD or 'dissociative anxiety'. It may take some time until the long term effects on young adults mental health through the pandemic are fully understood.

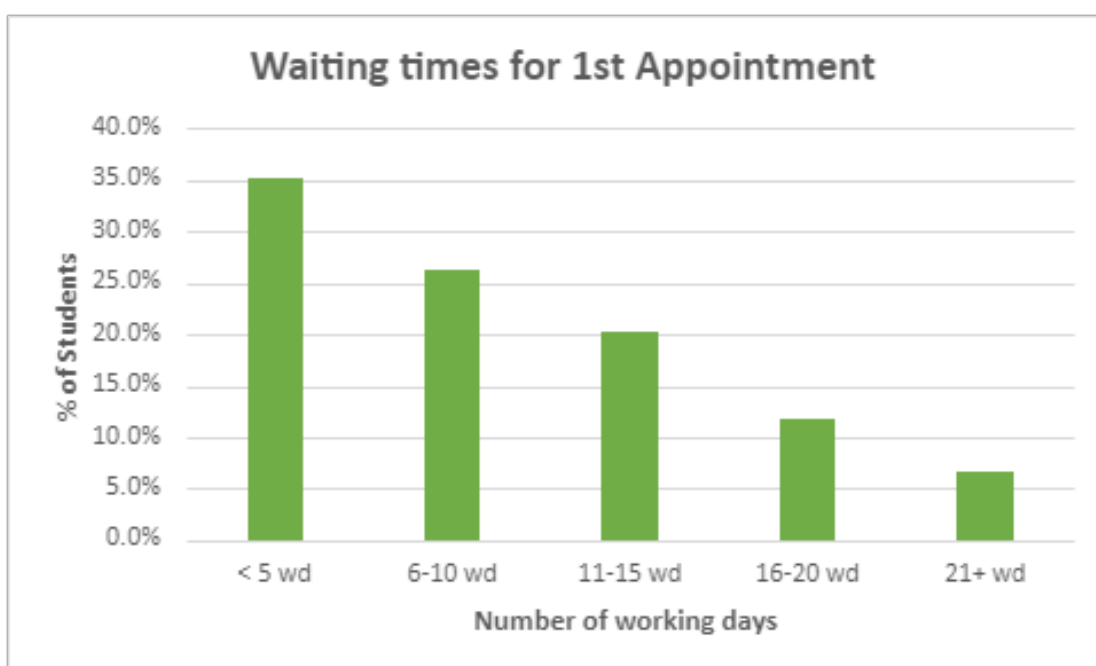
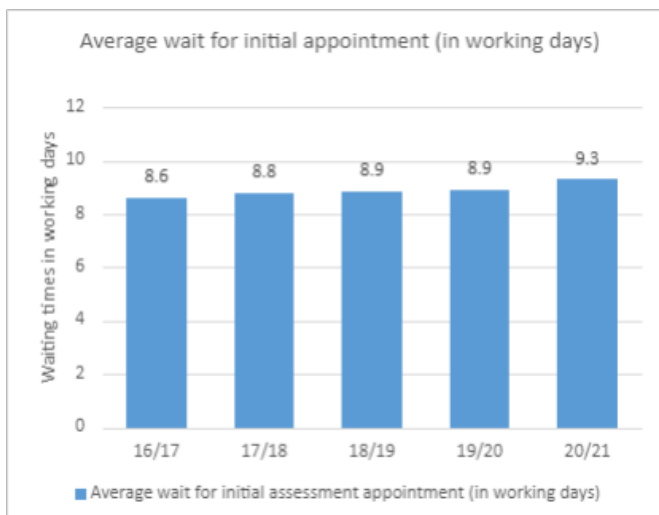


### Waiting times

The average waiting time for initial appointments increased from 8.9 working days in 2019/20 to 9.3 working days in 20/21. 35.2% of students were seen in fewer than 5 working days compared with 41.4% in 2020/21. 81.7% of students were seen within 15 working days compared to 83% in 2020/21.

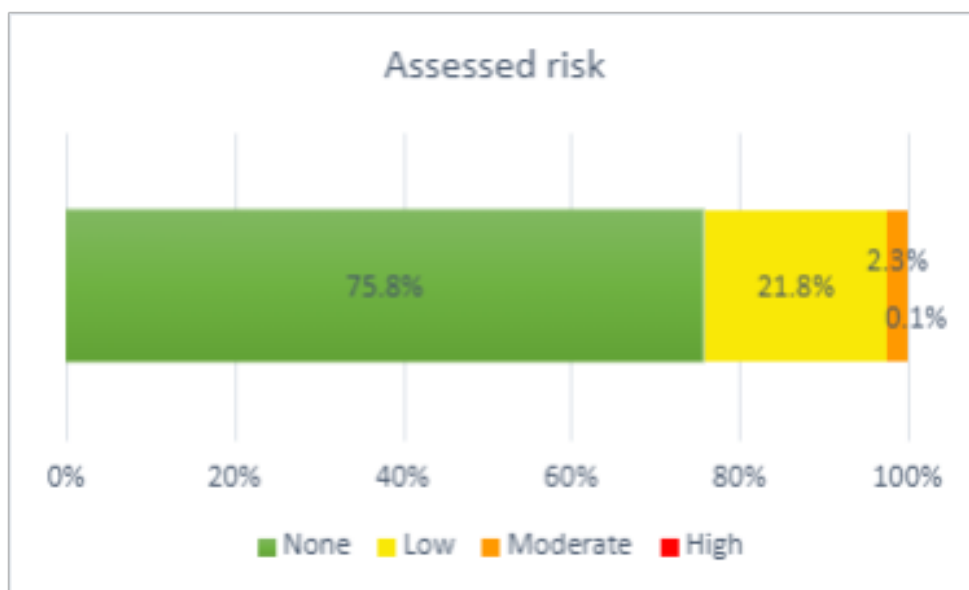
Notwithstanding the long waiting times for some, 92% students indicated that they found the way 'easy to manage' or 'manageable' in 2020/21, which was the same figure from our evaluation survey in 2019/20.





### Risk

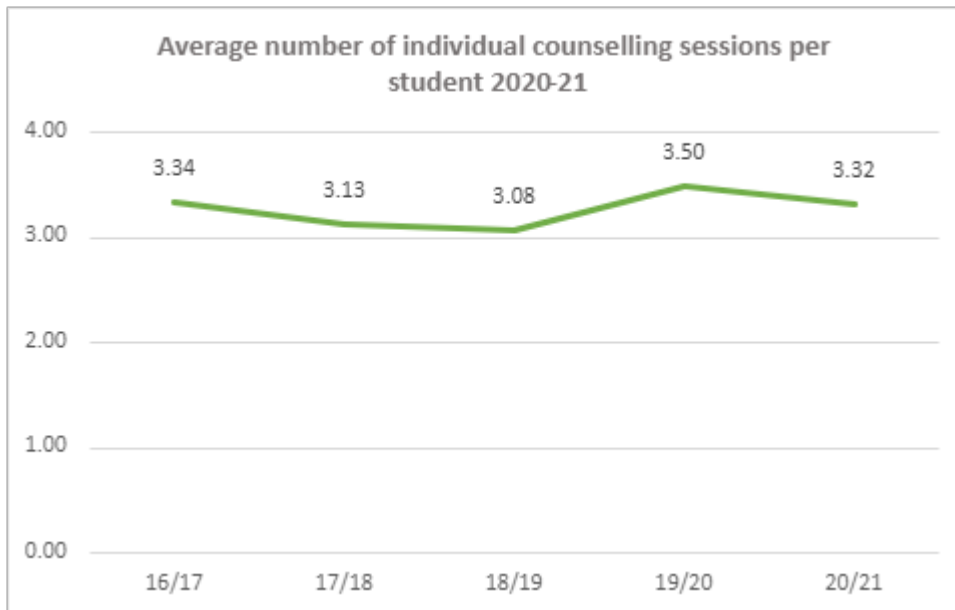
The duty counsellor reviews pre-intake paperwork carefully for an indication that a student may be at risk, as part of the determination of the most appropriate support route for the student, categorising this in the range of 0-3. Students presenting as high and moderate risk are immediately contacted and fast tracked to appropriate medical care. The risk profile is slightly different in 20/21 compared to 2019/20, with an increase in 'no risk' from 74% to 75.8% and a decrease in 'low' risk from 23.1% to 21.8%. Students with moderate to high risk who needed immediate action slightly decreased from 2.9% to 2.4%.



## Individual counselling

### Average number of sessions

The average number of sessions decreased slightly from 3.5 in 2019/20 to 3.32 in 2020/21. It should be noted that the average of 3.32 sessions does not mean all students have 3.32 sessions. There is significant variation in the length of engagement, and we regard this as a great strength of the service. Rather than imposing a 'one-size-fits-all' approach, we give our professional counsellors freedom to make clinical judgments about the length of their engagement with each individual student, consistent with the need to manage their allocated caseload. This means counsellors can give more time to individuals whose issues are complex and/or who are dealing with complicated life situations such that they require support over a more extended period. The distribution of sessions is similar to recent years with 28% of students receiving between 1 session, 42% receiving 2-3 sessions, 20% of students receiving between 4-6 sessions and 10% receiving 7 sessions or more.



### The distribution of number of sessions

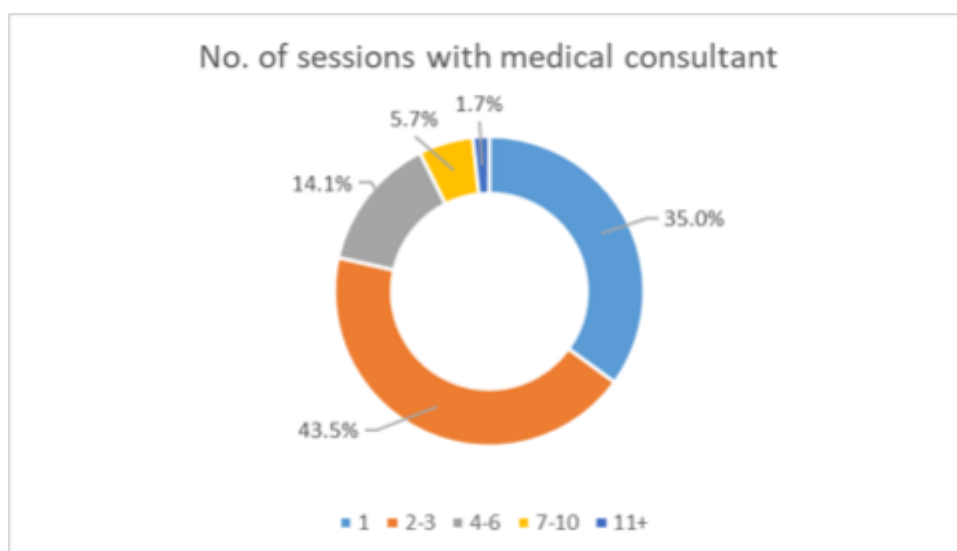
	2017-18	2018-19	2019-20	2020-21
1 session	31.4%	30.6%	27.9%	28.2%
2-3 sessions	41.6%	41.6%	39.4%	41.9%
4-6 sessions	19.5%	19.5%	21.4%	19.8%
7+ sessions	8.4%	8.4%	11.4%	10.1%

## Medical consultations

As noted above, the service employs a medical consultant (psychiatrist), Dr. Richard Lawes whose remit is to provide consultation to the team and, on a limited basis, to students. In the event that a counsellor has some doubt about how most appropriately to help and support a student, the counsellor can consult informally with our medical consultant. In some cases, the counsellor feels that it would be helpful for a student to meet with the medical consultant so that he can offer an opinion as to whether referral to NHS secondary services is appropriate. It is not the role of our medical consultant to treat mental health problems of students, but to advise on the most appropriate course of action, i.e. to hold and work with the student within our service or to advise the student's GP to make a psychiatric referral. Dr Lawes sees students covering a full range of different mental health problems and illnesses. Most common are severe depression and anxiety, a range of eating disorders, bipolar disorder and emotional instability, neuro-diversity and students who are in general presenting with a high degree of risk or concern.

In the past, this model has served very well. However with NHS services under significant strain in recent years, and many students facing very long waiting periods to access NHS psychiatric services, our medical consultant is under pressure to 'hold' students over much more extended periods.

In academic year 2020/21, Dr Lawes saw 150 students for psychiatric consultations.



## Groups and Workshops

During academic year 2020-21, another successful program of online only Groups and Workshops was delivered with a rotation of 27 Workshops and 25 Groups, running across the academic year. Most workshops were delivered as one-session structured, psycho-educational sessions whilst the groups are a mix of semi-structured, short and long term sessions running termly and throughout the academic year.

Our more popular, psycho-educational workshops / webinars such as *Relaxation skills*; *Overcoming Panic*; *Managing Sleep and Insomnia*; and *Social Anxiety* were extended to up to 50 participants during Hilary and Trinity term 2021 to manage increasing demand. A one-off *Exam Anxiety* workshop was opened to 100 students during Trinity Term.

A new series of themed workshops open to up to 50 participants: '*Covid Support*' and '*Emerging from Covid*' were also introduced during Hilary and Trinity Term 2021 to address a specific need for students requiring coping skills to manage the impact of the pandemic on their personal and academic life.

Relatively new groups such as *Compassion Focussed Therapy*, *Managing Strong Emotions*, *Mindfulness for Life* and *Students of Colour* groups all ran successfully online and it is anticipated that they will be delivered again during academic year 2021-22.

In May 2021 the Head of Counselling facilitated an online workshop on ‘Persecutory Perfectionism and Imposter Syndrome’ at the Department of Statistics. This workshop was open to all staff and students across the MPLS Division and had over 160 attendees.

The existing groups and workshops adaptable for both online and in-person provision are outlined below:

Groups:

- Masters
- DPhil
- Undergraduate
- Compassion Focussed Therapy
- Anxiety
- ACT-based Anxiety
- Mindfulness
- Mindfulness for Life
- CBT for Low Mood
- Managing Social Anxiety
- Students of Colour
- Managing Strong Emotions
- Body Image

Workshops:

- Can’t Work
- Perfectionism
- Managing Sleep and Insomnia
- Relaxation
- Overcoming Panic
- Covid Support
- Emerging from Covid
- Social Anxiety Webinar
- Managing Exam Anxiety

<b>Groups 2020/21</b>	<b>Sessions attended</b>
ACT based anxiety	145
Body Image	91
CBT for low mood	111
Compassion focussed Therapy	12
DPhil	125
Managing Strong Emotions	28
Masters	102
Mindfulness	290
Students of Colour	57
<b>Total sessions attended</b>	<b>961</b>

<b>Workshops 20/21</b>	
Can't Work	49
Perfectionism	27
Managing Sleep and Insomnia	71
Relaxation	123
Overcoming Panic	104
Covid Support	29
Emerging from Covid	7
Social Anxiety Webinar	54
Managing Exam anxiety	119
Reducing Digital Distraction	32
<b>Total sessions attended</b>	<b>615</b>

Group and workshop facilitators concluded that overall, online provision did not affect the attendance and outcome rates during this period. In some cases attendance and engagement was improved in the online provision possibly due to more flexibility in attending from home (less cancellations, DNA's due to reduced commuting) and feeling less exposed when participating online than in person. Equally, some feedback suggested that for some attendees, the informality of being in ones' own accommodation alongside technological issues with participating on online platforms (screens freezing, time delays etc.) prevented some participants from engaging optimally.

## **On-Site Counsellor (OSC) Programme**

### **Overview**

The Counsellor-on-site (College Counselling) Scheme was launched in 2017/18 in response to students and staff in many colleges expressing a strong desire for students to access counselling in colleges. The scheme has expanded over the past 5 years with a current total of 14 Colleges retaining a college counsellor. Counsellors are present in colleges as a satellite provision with college counsellors making counselling available on college premises for up to one day per week with 6 college counsellors offering half day provision and 8 offering full day provision. The scheme delivers individual, brief therapeutic interventions alongside welfare team support and liaison and provision of relevant, themed workshops as required.

The college counsellor remains employed by the central service; management and clinical supervision is provided within the central service and counsellors are insured under university policy. Our central case management system (Titanium) is used remotely by counsellors on college sites to maintain the highest standards in confidentiality for student records, with remote access currently being rolled out across all college sites this academic year.

The scheme has helped the central service in providing additional space for counselling at a time when there is no further space available within SWSS and which would otherwise make increased provision impossible.



## Benefits

Benefits of the scheme include the following:

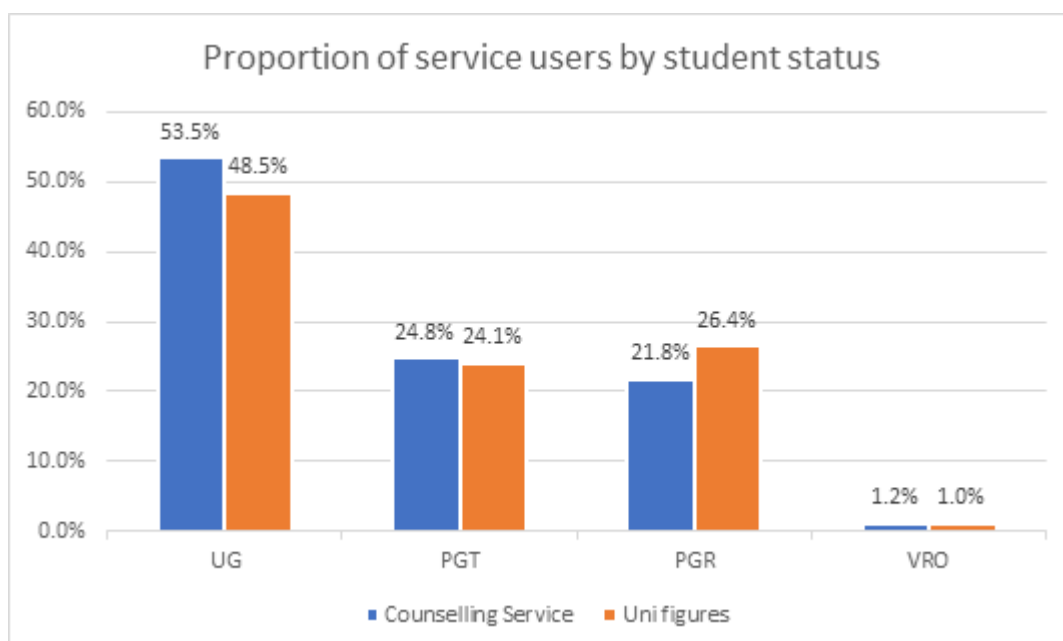
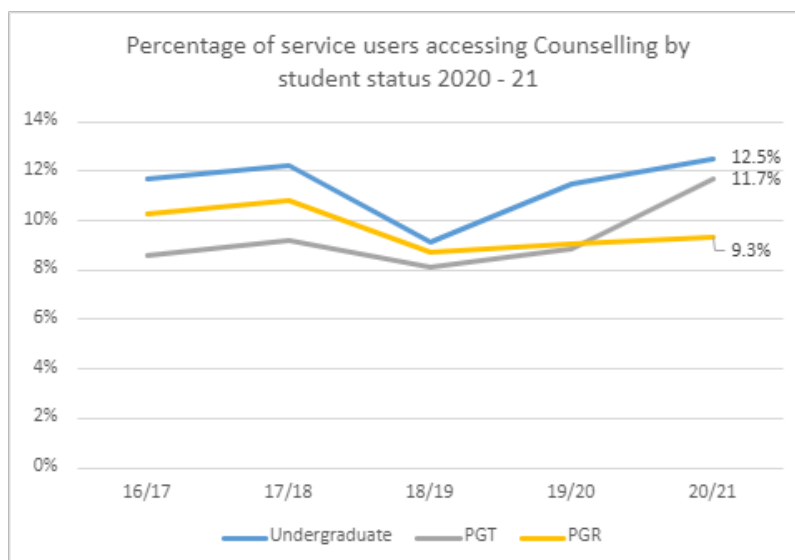
- Having an on-site counsellor produces an immediate and substantial increase in total counselling resource available to students. It has obvious benefits to students of colleges with OSCs in place, but also benefits students across the collegiate university: when students see OSCs this relieves pressure on the central service.
- Enables the central service to increase provision despite the tight space constraints that preclude offering more counselling hours at Worcester Street
- Having an on-site counsellor may make counselling feel more accessible to some students. There is evidence that some students—predominantly undergraduates, especially first-years—regard making an appointment with the central service as a daunting step, and these students may delay seeking help to their detriment. For these students, having an on-site counsellor who is a familiar face within the college and whom they can meet in the familiar college setting may encourage earlier help-seeking.
- The college counsellor becomes available as a resource to senior members and staff with welfare roles who may be concerned about how best to support a student. (Currently, this role is played by the designated ‘link counsellor’ at the central service, but because the link counsellor is less familiar to those in college he/she tends to be used less in this capacity.)
- The on-site counsellor contributes one workshop in college each term, on a topic which is responsive to student concerns. This helps to maintain the counsellor’s visibility in college and also ensures regular provision of high-quality input for students. (Some examples of workshops offered by college counsellors this term: “Mental health: what it is and how to keep it”, “How much stress is too much stress”, “Writing for Wellbeing”, “Enlightened Self-Management”.)

## Demographics

Demographic data is shown for students who access central service (11% of total the student body).

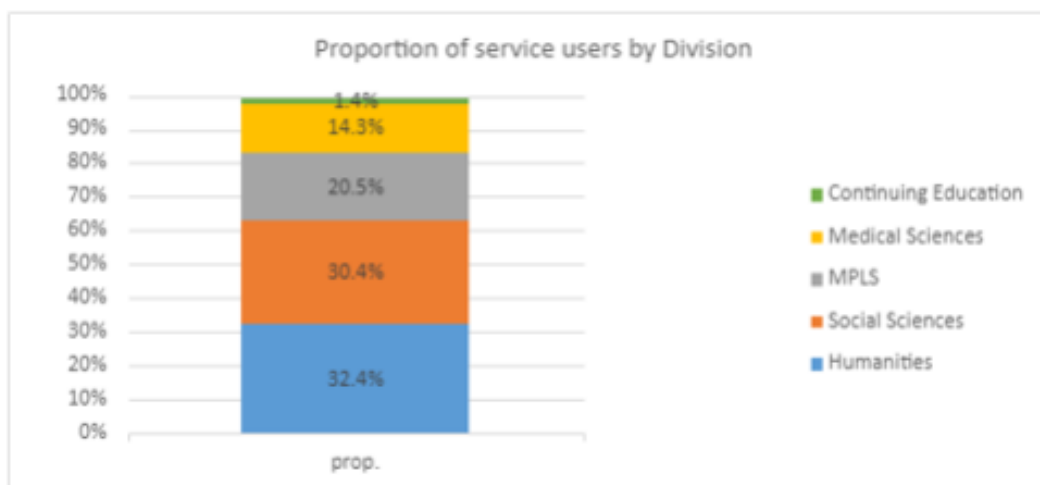
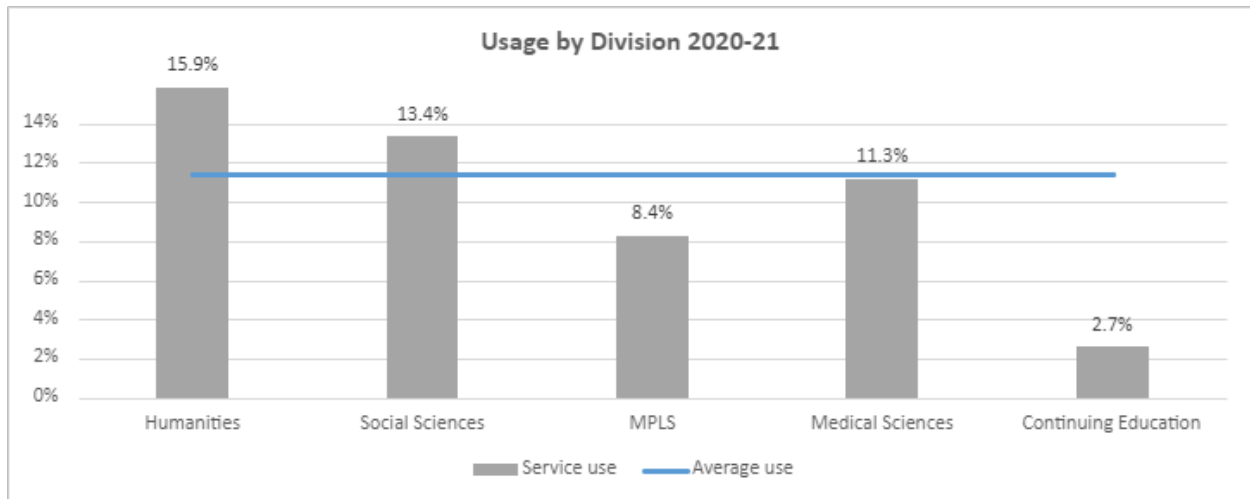
### Level of study

As for many years, a higher proportion of Undergraduate students than Postgraduate students access counselling.



### Academic Division

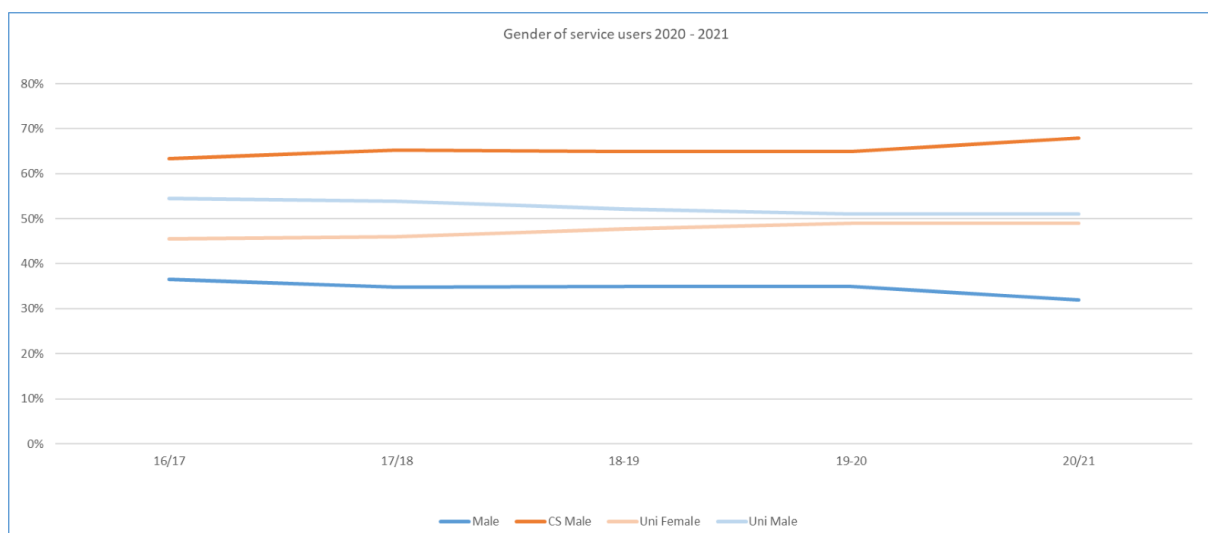
The pattern of participation in counselling by Academic Division is unchanged versus last year. Students within the Humanities and Social Sciences are over-represented amongst users of the Counselling Service, whilst students in MPLS are notably under-represented. The differences in levels of attendance from the Academic Divisions may be explained by the differences in terms of gender representation of the Divisions (See Gender). These graphs show students who used the central service.



### Gender

The disparity in the gender split at the service increased in 2020/21 with 68% female (65% 2019/20) and 32% male (35% 2019/20) users, despite an almost equal representation of male and female students in the total population (48% female and 52% male).

[Note: The above statistics on gender come from the central university database, and do not reflect the increasing number of transgender, non-binary and gender questioning service users. These students represented around 3% of students attending counselling in 2020/21.]

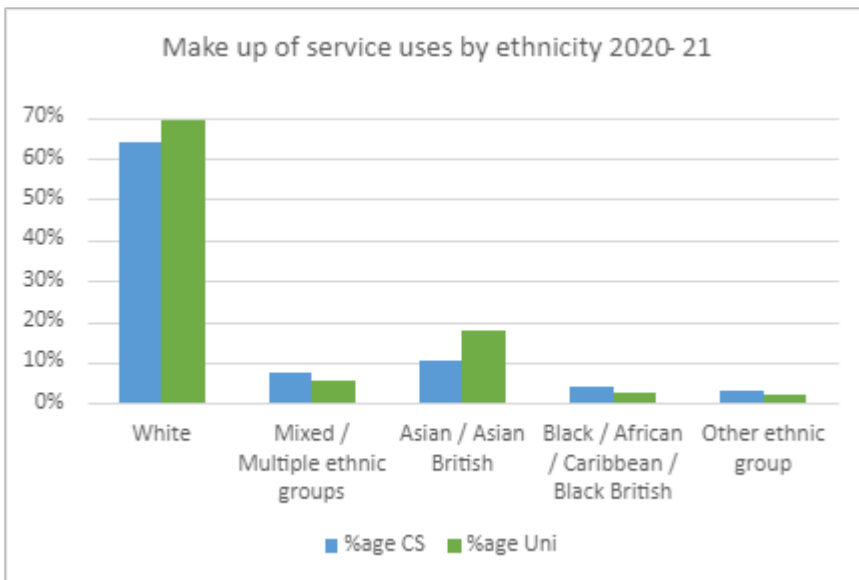
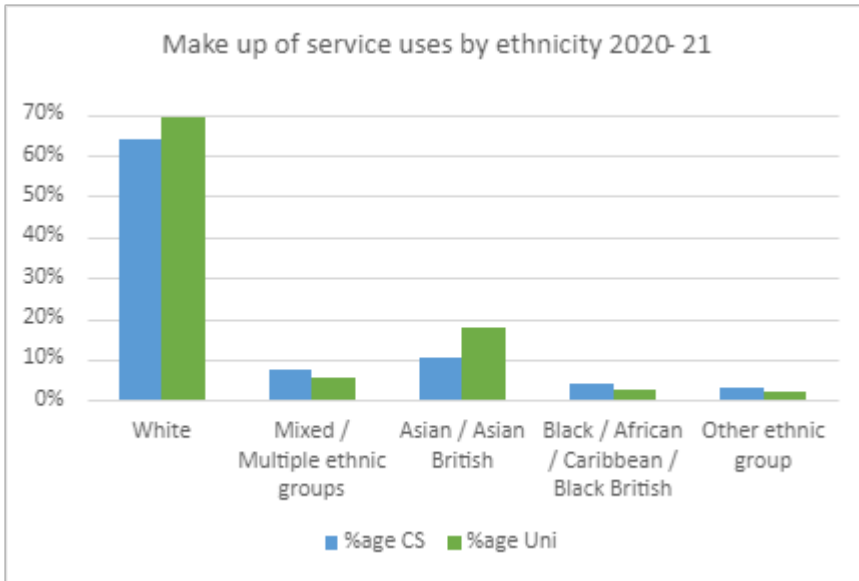


## Ethnicity

The Counselling Service sees most ethnic groups of students roughly in proportion to their representation in the general student population. Only Chinese students are significantly under-represented amongst counselling clients, although the percentage of Chinese students accessing the Counselling Service did increase from 6.2% in 2019/20 of service users to 7.1% in 2020/21. Chinese students represent 10.4% of the Oxford student population as a whole.

The Counselling Service made efforts to increase the ethnic diversity of the counselling clinical team. As stated earlier, two additional black counsellors were employed in 2020/21, funded from the additional resources provided by the university for that academic year and these posts were consolidated as permanent posts going forward for future years. This enabled the service to promote the increase in diversity at the service and make some new initiatives, such as making a presentation at the African and Caribbean Society, and run a support group for Students of Colour, facilitated by two counsellors of colour.

This may have contributed to an increase in the percentage of student attending the service from ethnic groups who in the past had been underrepresented in access counselling. In 2020/21, 4.2% of service users were Black students, who represent 3.2% of the student population at Oxford. 10.2% of service users were Asian/Asian British students, who represent 9.6% of the student population at Oxford. 7.6% of service users were of mixed ethnicity, who represent 6.4% of the student population at Oxford.



## Clinical Outcomes

### What is CORE?

The services uses Clinical Outcomes in Routine Evaluation (CORE) analysis with students.

CORE ('Clinical Outcomes in Routine Evaluation) is an important tool used by the University Counselling Service since 2006 to evaluate the effectiveness of our work with students. It consists of a questionnaire administered before counselling and again after counselling provided the student has had two or more counselling sessions. Since its introduction in the mid-1990s, CORE has been extensively tested in clinical setting and in the general population.

CORE measures psychological distress in four domains: subjective well-being, problems/symptoms, functioning and risk to self or others. It yields a score for each domain and a single overall score. Scores range from 0 to 136, where 0 signifies 'no disturbance' and 136 signifies 'maximum disturbance'. Scores below 34 suggest a low (sub-clinical) level of distress. Scores above 34 reflect clinically significant disturbance.

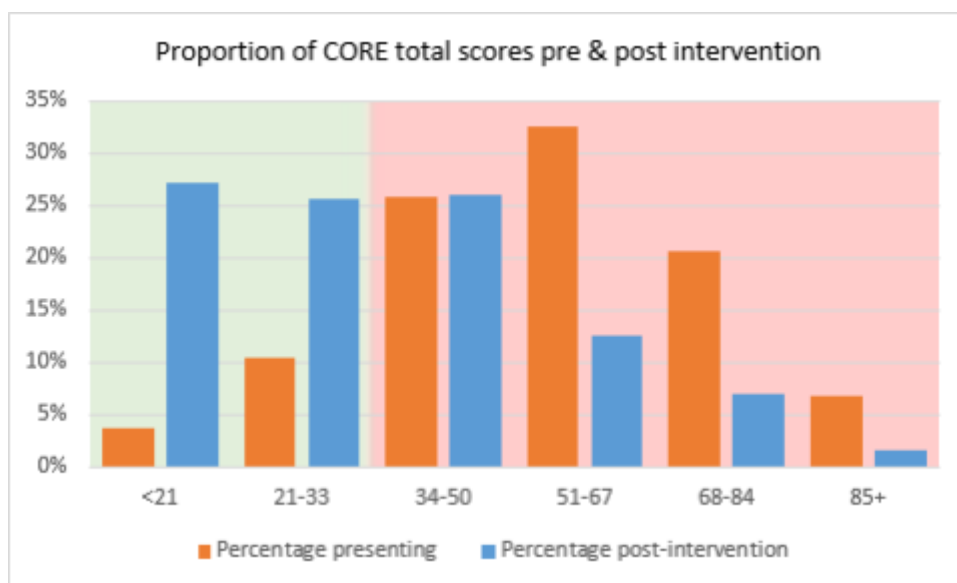
CORE enables us to monitor the severity of the symptoms with which our students present for counselling. It also allows us to measure the effectiveness of our work by comparing students' pre-treatment and post-treatment CORE scores. In 2020/21 the service received a much lower rate of returned post counselling CORE forms, than in previous years. As in the Counselling Service Evaluation Survey (see later in the report) counsellors and students are having fewer 'planned' endings, whereby counselling may have a more flexible ending as students "sees how things go". The service also had to send out all end CORE forms online and the service has noticed a much lower rate of returned forms if they are all completed online, rather than hard copies filled out, often in the waiting area. However, as the results were extremely similar to CORE data for over the previous ten years they would imply that this is an accurate picture.

### Results

For all students in 2020/21 the mean CORE score for students presenting at the start of counselling was 56, whereas the mean score at the conclusion of counselling was 35. This shows a mean improvement of 21 points. This was almost an identical score and pattern to the figures for 2019/20 and the preceding several years' data. This demonstrates a consistency in presenting levels of psychological distress in the students coming for counselling and a consistency in patterns of change, from pre to post scores. The tables below illustrate this pattern, with the figures in bold being for 2020/21 and the figures in brackets being for 2019/20.

	Start mean score	End mean score	Improvement
Wellbeing	<b>9</b> (8.91)	<b>5.42</b> (5.49)	<b>3.59</b> (3.42)
Problem	<b>25.61</b> (25.94)	<b>15.77</b> (15.75)	<b>9.84</b> (10.19)
Functioning	<b>19.03</b> (19.39)	<b>12.81</b> (12.45)	<b>6.23</b> (6.94)
Risk	<b>1.59</b> (2.09)	<b>1.07</b> (0.94)	<b>0.52</b> (1.15)
Total	<b>55.55</b> (56.33)	<b>34.97</b> (34.63)	<b>20.58</b> (21.70)

Core Score	Category	Clinical need	Proportion pre intervention	Proportion post intervention
<21	Healthy	Sub-clinical	<b>3.7%</b> (3.7%)	<b>27.3%</b> (23.7%)
21-33	Low distress/disturbance	Sub-clinical	<b>10.4%</b> (9.3%)	<b>25.7%</b> (31.5%)
34-50	Mild distress/disturbance	Clinical	<b>25.9%</b> (25.6%)	<b>26%</b> (24.9%)
51-67	Moderate distress/disturbance	Clinical	<b>32.5%</b> (32.1%)	<b>12.5%</b> (13.6%)
68-84	Moderate/severe distress/disturbance	Clinical	<b>20.6%</b> (21.4%)	<b>6.9%</b> (4.6%)
85+	Severe distress/disturbance	Clinical	<b>6.8%</b> (7.9%)	<b>1.6%</b> (1.7%)



The changes from the pre to post CORE score can also be demonstrated in seeing the shift in pre counselling scores of 40% (38.6% 2019/20) scoring as 'Healthy/Low to Mild' levels of distress/disturbance to 79% (80% 2019/20) for the same range post counselling. 60% (61% 2019/20) of students scored in the 'Moderate to Severe' levels of distress/disturbance and this dropped to 21% (19% 2019/20) post counselling.

The CORE measurement will continued to be used at the Counselling Service to gather long term data and also to be aligned with the SCORE Consortium research project.

## Service feedback

### Feedback in the words of students

*"I just wanted to say, thank you so much for all your support throughout this year. From my most troubled period with heart palpitations to now, when things are so much better, I have found our meetings incredibly beneficial. You have been so understanding and a wonderful listener, and your feedback has been well incorporated into my life and thought habits. I'm so lucky to have had your ears and guidance."*

*"Once again, thank you so much for everything. This was quite a transformative experience and helped me at a time I needed my emotional resources the most. I am very grateful."*

*"I am really glad that I decide to use the counselling service. It is a very good experience, and I do feel better. Thanks a lot for your help. I am really grateful to you."*

*"I just wanted to say again thank you very much for supporting me - I hit a real low point, and being able to talk about my doubts with you has really put me on track to getting better. I know if I dip again I have good strategies to manage and a great service to turn to if need be."*

*"Thank you for helping me understand my past and helping me no longer feel shame about things that were not my fault. For showing me what it feels like to be cared for and safe. To have had this opportunity is one of the most important things to have happened to me and sent me down a different path. This has made me feel hopeful that good things can happen in the future."*

*I just wanted to thank you for all your help in my last year - I could not be more grateful for your time and support - the sessions were undeniably the most important part of my time at university and I'm looking to keep implementing the CBT tools as best I can.*

*I just wanted to write a very short note to thank you for your podcast on CBT for low mood and depression. It has given me great comfort as well as concrete resources to continue moving forward through term. I am very grateful.*

### **Feedback from groups and workshops**

*"Super helpful hearing other people's perspectives and it made me feel less alone in feeling anxious!"*

*"Everyone was really lovely, and I had so many 'breakthrough' moments, thanks to you guys! I think I'll miss our group :("*

*"Gained confidence in myself by talking to others about difficult things"*

*"The group discussions have been very helpful to understand that the way we feel is normal and it has been great to find new ways to react to stressful thought and situations. Thank you!!"*

*"I'd like to thank you again for running the workshop. It was a really positive experience for me and I'm grateful for all of your support and guidance throughout. The changes in my mood were quite gradual, so I don't think I realised the extent of the improvement until I filled out the questionnaires again and compared them to my initial responses."*

*"I cannot thank you enough for all the teaching and support that you provided across the mindfulness course. A thank you is clearly an understatement for the radical and huge difference your course has made in my thought process and in my life in general."*

*"You have made a very important difference, where I no longer even remotely think of acting on my suicidal and self-harm thoughts. The sense of having control over my thoughts and reactivity is real. I have the capacity to take care of myself and feel empowered all thanks to you, I will never act on my impulsive thoughts."*

*"I just wanted to say thank you so much for running the course this term. I have honestly found it really useful and mindfulness has now become part of my daily routine. I'm planning on continuing with mindfulness in my everyday life now as I have found the course really beneficial for getting a sense of perspective and stopping my mind from running away when I begin to get anxious. I just wanted to let you know that I am very grateful to you for delivering the course."*

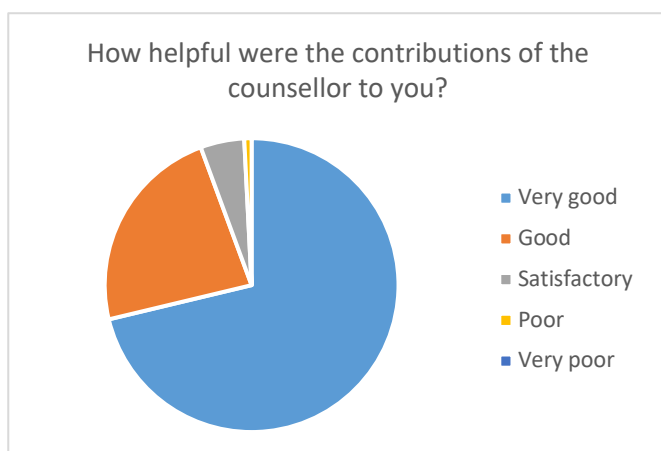
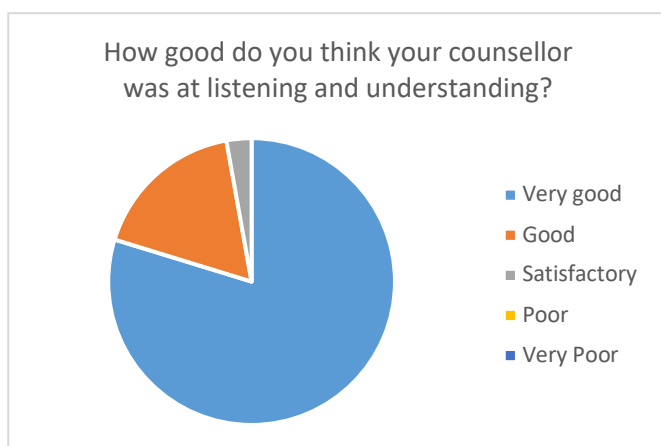


## Counselling Service survey

The Counselling Service routinely gathers feedback via a survey given to students attending two or more sessions upon completion of counselling. This year we had a very low return rate. The service has fewer students completing planned final sessions and it is increasingly common for counsellor and client to agree to 'see how it goes' and get back in touch when it would be useful to meet again. As a result, the population completing the routine CS survey is a diminishing proportion of total service users. It was also recognized that the service received far higher numbers of returned survey forms when students were given hard copies of the survey and often completed them in the waiting room. With the service provision being online, electronic survey forms were sent out and it is believed that this has contributed to an even lower return rate than normal. This fact is also in line with a number of other surveys conducted with students during 2020/21, with low return rates being due to them all being online and some reports of student 'survey fatigue'. However, with the results of the survey being very closely in line with results from the previous several years it is believed that they give an accurate picture.

### Survey results

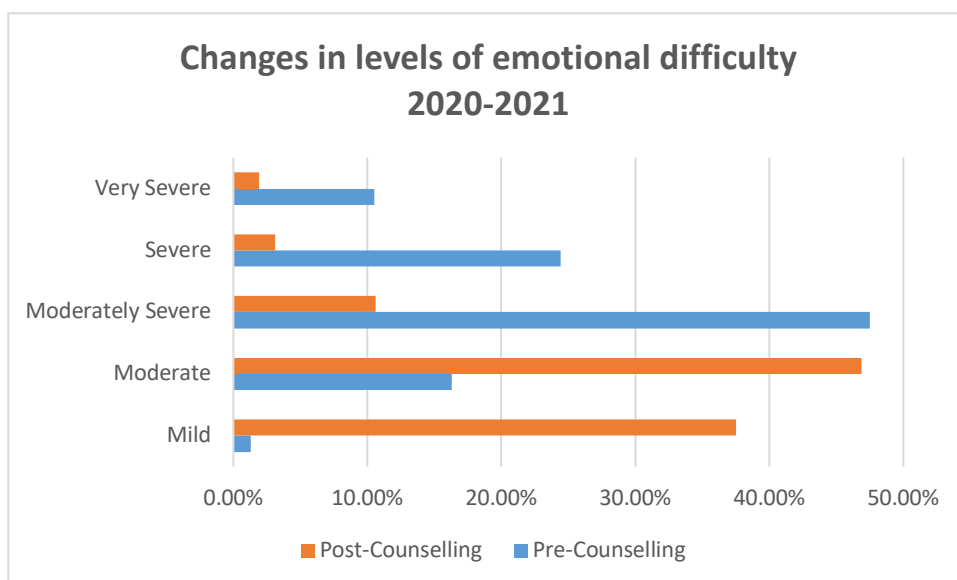
Students responding to the main CS survey expressed high levels of satisfaction: 84% said their counsellor was 'very good' at listening and understanding; 96% said their counsellor was 'good' or 'very good'; 70% said their counsellors' contributions were 'very good', rising to 93% who said their counsellors' contributions were 'good or very good'.



More detailed evidence is available for those students who had a planned final session and completed the CS Survey:

- In rating their overall experience of the Counselling Service, 72.5% rated it as ‘very good’, 19.4% rated it as ‘good’ and 6.9% as satisfactory.
- 84% rated the number of sessions they received as ‘about right’, 15% rated it as ‘too few’.

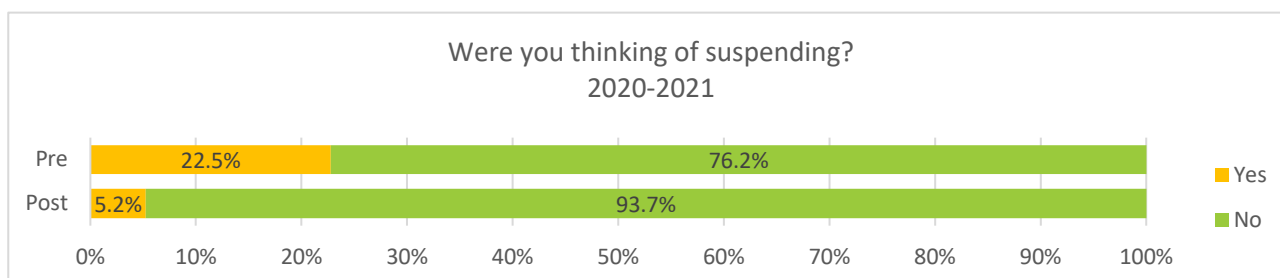
Two of the most telling answers from the survey is how students rate how much they think that counselling had changed their level of emotional difficulty and how much it had impacted on their decision to suspend or withdraw from their course. The changes in the level of emotional difficulty can be seen in the table below.



	Pre-Counselling	Post-Counselling
Mild	1.3%	37.5%
Moderate	16.3%	46.9%
Moderately Severe	47.5%	10.6%
Severe	24.4%	3.1%
Very Severe	10.5%	1.9%

22.5% of students indicated that when they first came to counselling, they were “thinking about suspending or withdrawing from the university”; at the end of counselling only 5.2% of students were thinking about suspending or withdrawing.

### Impact of counselling on decision to suspend/withdraw



## Peer Support Programme

The Peer Support Programme remains an integral part of the Counselling Service and continues to play an important part in increasing awareness and support of mental health throughout the student body as a whole. The immediacy of the lockdown restrictions in March 2020 meant that all the planned Peer Support Training for the remainder of that academic year, particularly Trinity Term 20, had to be cancelled as it was not possible in that timeframe to adapt the training to be held online. Through the summer of 2020 Dr Tim Knowlson, who has direct responsibility for managing the Peer Support Programme, and his team of Peer Support Trainers, were able to adapt the whole training programme to be run online. Not only were they able to run all the planned Peer Support trainings and supervision groups for 2020/21, but they were also able to run the college trainings which had been cancelled in Trinity Term 2020 and expand the Junior Dean trainings. The Counselling Service would like to thank Dr Knowlson and his team on all their hard work and efforts to continue to run the Peer Support Programme in such difficult circumstances.

A full report of the work of the Peer Support Programme for 2020/21 can be seen in Appendix 1.

## Other service activities

### Training offered within the collegiate University

Despite all provision being held online, the service continued to provide training sessions to improve awareness, understanding, identify risk, make appropriate referrals and practical strategies to support students in mental distress and difficulties. Several training sessions were run for college staff and academic departments focussed on supporting the mental health problems of students. The Counselling Service continued to deliver a series of training sessions arranged with Medical Sciences Division to train all PG supervisors in mental health awareness and skills to support students in distress. The Counselling Service also ran the same training session to academic staff, mainly supervising PGR students, in the Faculty of Law.

The service continued to work in partnership with CWMT (Charlie Waller Memorial Trust). The service continues to promote the E-Learning package from CWMT for all academic and non-academic staff to support students with mental health problems <http://learning.cwmt.org.uk>.

Dr Ruth Collins facilitated a number of training sessions totalling over 60 staff from the Examination Schools and also members of college welfare teams in how to support student experiencing anxiety and panic attacks, often associated with exams.

The new Supervision Scheme launched in Trinity term 2021, had staff from 22 different college welfare teams, supervised in various sized groups or individually. This type of supervision, delivered by senior members of the Counselling Service, provided an on-going space and structure to encourage reflective practice and consolidate awareness, understanding and skills to be able to support students in emotional distress or with mental health problems. It is seen by the Counselling Service that this type of Supervision Scheme not only builds on and consolidates training on mental health but going forward dovetails into the in-house training programme offered by Dr Ruth Collins the new Training Development Co-ordinator.

### National and international contributions

The Head of Counselling has been fully engaged with the current national and international debate on issues of student mental health and wellbeing. Key activities have included:

- Presenting a lecture called 'Thriving and Surviving: issues of mental health and wellbeing for academic researchers' at the online European Planetary Science Congress, September 2020.
- Continued membership of the SCORE (Student Counselling Outcome Research and Evidence) Consortium, established to develop a large scale national data set to analyse effectiveness of embedded university Counselling Services, using standard clinical evaluation tools.
- Continued as Chair of MWBHE (Mental Wellbeing in Higher Education / Advance HE) group of experts from professional organisations engaged in front line support of students and staff, including: AMOSSHE, RCPsych, HUCS, BACP-UC, UMHAN, NUS, and Nightline. Key achievements included organising and chairing the MWBHE national conference on 18<sup>th</sup> May 2021. Keynote speakers included the new Director of SWSS, Mr Rotimi Akinsete and Professor Peter Fonagy, two leading figures in student mental health.
- Continued as a member of the Universities UK strategic working group on mental health for university staff and students, helping developing national policy and initiatives.

## Forward view

The Counselling Service would wish to build on many of the initiatives and projects highlighted in this report. The key areas for development are outlined below.

- Returning to a combination of ‘blended’ provision in terms of in-person work and online provision, to provide a comprehensive and mixed form of delivery to fit in with the needs and demands of the student body and utilise resources to gain maximum efficiency. One example of this would be returning to more traditional, in-person, therapeutic support groups, but maintaining larger online workshops and presentation for between 50-100 students.
- The Training Development Co-ordinator providing a more comprehensive training programme for college and departmental staff in terms of awareness, understanding, skills and prevention on a range of mental health problems and emotional distress.
- Developing the Supervision Scheme not only to college welfare staff, but also to academic departmental staff, particularly those involved in supporting the mental wellbeing of Post Graduate students.
- To continue the work started for the Mental Health Task Force in developing a model of mental health provision at the Counselling Service to support students with eating disorders, mood instability and emotional regulation and students with issues of neuro-diversity, including ADHD.
- In March 2021, the former Director of SWSS instructed the Head of Counselling to work with Les Wright, Director of Occupational Health and Safety, to develop plans for a Staff Counselling Service, based on the model of the current Student Counselling Service. An outline of the proposed Staff Service was completed for the Staff Wellbeing Board in Trinity Term 2021. It is hoped that a pilot of the proposed Staff Counselling Service would be set up sometime in 2021/22.
- The Counselling Service would like to improve how it monitors all the different range of provision, particularly improving the return rate of the end CORE form and the student evaluation survey.