



Counselling Service Annual Report 2021-22



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Introduction

2021-2022 was a year of significant change and challenge at the Counselling Service. September 2021 saw a long-awaited return to in-person provision in the Student Welfare offices at 3 Worcester Street. Due to the ongoing covid pandemic, a cautious return was implemented with the majority of our team limited to one in-person day in the office offering one-to-one sessions with students, one day a week online, and one in their designated college where the majority of the counselling team work offering on-site counselling provision. Groups and workshops continued to be offered online, in line with university policy. This hybrid system worked well until planned essential maintenance of the Student Welfare offices meant that the building was closed at Easter 2022 for the remainder of the academic year. A limited number of rooms in an alternative location in town meant that the majority of our clinicians resumed online working for the Easter vacation, Trinity Term and the Summer vacation of 2022. The staff team proved themselves to be immensely resilient and positive in the face of the disappointment and disruption experienced.

Despite restrictions on space and staffing, the Counselling Service has seen positive clinical outcomes that exceed previous years. The data collected in pre and post counselling measures demonstrate clinically significant positive changes in mental health and overall personal wellbeing in students. Feedback from students also demonstrates the high quality and effectiveness of the support offered, though some constructive criticism from students also highlights the need for increased provision relating to the number of sessions offered and the wish for improved waiting times. These can be found later in the report.

The legacy of the pandemic continues with the fundamentally changed pattern of demand the Counselling Service experiences – both online and in-person working, increased demand for counselling from undergraduates during the vacations, differences in data-gathering potential, as well as generalised fatigue, with online working placing different demands on individuals, both student and staff.

The recently-established College Welfare Supervision programme continued without interruption during this period with senior members of the counselling team offering supportive, thoughtful clinical spaces to welfare colleagues across the collegiate university. Colleges continue to be able to request supervision arrangements for their welfare staff one-to-one, in pairs or in small groups. This structure is designed to support staff supporting students, to ensure a coherent approach to issues of concern, and to contribute to college wellbeing and welfare strategies. The counselling team have very much enjoyed supporting college-based colleagues in this way, and the feedback from those receiving supervision through this scheme has been very positive. There are currently 24 colleges in receipt of such supervision arrangements.

As recommended by the Mental Health Task Force working group in the previous year, one of the service's most senior clinicians began a fixed-term part-time role as Training Development Co-ordinator, alongside usual clinical work supporting students with individual sessions and offering therapeutic groups and workshops. The Mental Health Task Force had recognised the need for a dedicated member of the Counselling Service to offer an in-house training programme to the whole collegiate institution, building on the extensive training already available to college welfare teams and academic staff in university departments, particularly at graduate level.

During this year, the work of the Mental Health Task Force was transferred to the new Joint Student Mental Health Committee. The Counselling Service would like to thank the Joint Student Mental Health Committee for its support, especially the Chair, Sir Tim Hitchens, President of Wolfson College.

As part of a whole-university approach to mental health, as advocated by Student Minds, planning and funding arrangements for a pilot Staff Counselling Service were considered and developed via the University's Wellbeing Programme Board. An agreement was made to second senior clinicians from the

Counselling Service for a 12 month pilot due to begin in the academic year 22-23. A close-working with Occupational Health Services with whom the pilot will be launched in partnership, was established to help facilitate the project.

The Counselling Service continues to maintain and strives to enhance our working relationships and opportunities for collaboration with all of our key stakeholders, both internally and across the collegiate university, and also with College Doctors, local NHS services and various organisations in the third sector.

Staffing and resources

Counselling Staff

For the year 2021/22 the costs of all FTEs were covered by core funding with the exception of the Training Development Co-Ordinator post, and some of its backfill, which were both funded by the Walter Gordon Trust Fund. 0.2 FTE of our Medical Consultant's (Psychiatrist) 0.4 FTE contract were covered by Silver monies, as part of the agreed pandemic overspend. We have funded an additional 1.41 FTEs via the On-Site (College) Counsellor programme. Because the cost of employing On-Site Counsellors is covered by colleges, we are able to fund additional counselling within the central service.

However, available staffing has decreased this year, and we saw a fall in the FTE of employed Counsellors from 15.68 FTE in 20/21 to 14.53 FTE at the start of the academic year 21/22, further dropping to 14.14 FTE by 30th September 2022. Our staffing challenges are in line with experiences across the sector as the covid pandemic has impacted recruitment as well as fundamentally changed the pattern of demand. This is a trend which we began to observe in the previous academic year 20/21, where it was becoming increasingly difficult to recruit suitably qualified and experienced clinicians, compared to previous years, likely due to an increase in demand for experienced counsellors across the HE sector and in NHS services, and the increased popularity of private practice.

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

Changes in Staffing

Over the course of the academic year we have been very fortunate to employ new colleagues on a mixture of permanent, fixed term and sessional contracts. This means we have continued to be able to offer the same variety of one-to-ones, groups and workshops, as well as supporting some students in serious crisis. Because of pre-existing professional and personal commitments, some of our team work as little as one day a week for the Counselling Service. This is a less efficient model for us operationally, due to the responsibilities of supervision, management and administration, and costs more overall than employing staff who are able to offer more in terms of time. However, we have a very strong clinical team, with a wide range of student-facing skills and aptitudes. We are very grateful for their dedication, work ethic and commitment to supporting students at Oxford.

This year was marked by a significant number of departures from the core Counselling team, further impacting our clinical capacity.

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 supports the work of the service because Associates enhance our capacity to offer longer-term counselling to students.

In 2021/22 we hosted 9 Associate Counsellors who worked with 55 clients, offering an average of 14.5 sessions per client for a total of 798 sessions. We were also able to offer 31.5 hours of additional group work to 7 students.

The Associate programme continues to be of strategic importance to the Counselling Service as it offers an intensive apprenticeship to clinicians who develop the specialist skills to work effectively in our context. Over the years, many of our core staff began their professional lives with us as Associates. We also know that Associates who move on from the Counselling Service go on to sought after clinical roles in both the public and private sector.

Staff Development

As in previous years, we are committed to a generalist model whereby we expect all counsellors to be able to work with the full range of presenting issues. In addition to this, many of our staff have significant expertise in particular presentations or treatment modes. Across the team, to cite just a few examples, we have staff who have worked in NHS Specialist services including Trauma, Forensic Psychiatry, Eating Disorders, Child and Adolescent Mental Health, ADHD amongst many others. Our staff have specialist qualifications in Cognitive Behavioural Therapy (CBT), Mindfulness, Acceptance and Commitment Therapy (ACT), Compassion-Focused Therapy (CFT), Eye Movement Desensitization and Reprocessing therapy (EMDR), and many other established therapies.

We continue to prioritise skill-sharing and CPD within the team, with fortnightly staff and training meetings alternating with small-group clinical discussions, in addition to the regular clinical supervision in place for all members of the counselling team, at every level.

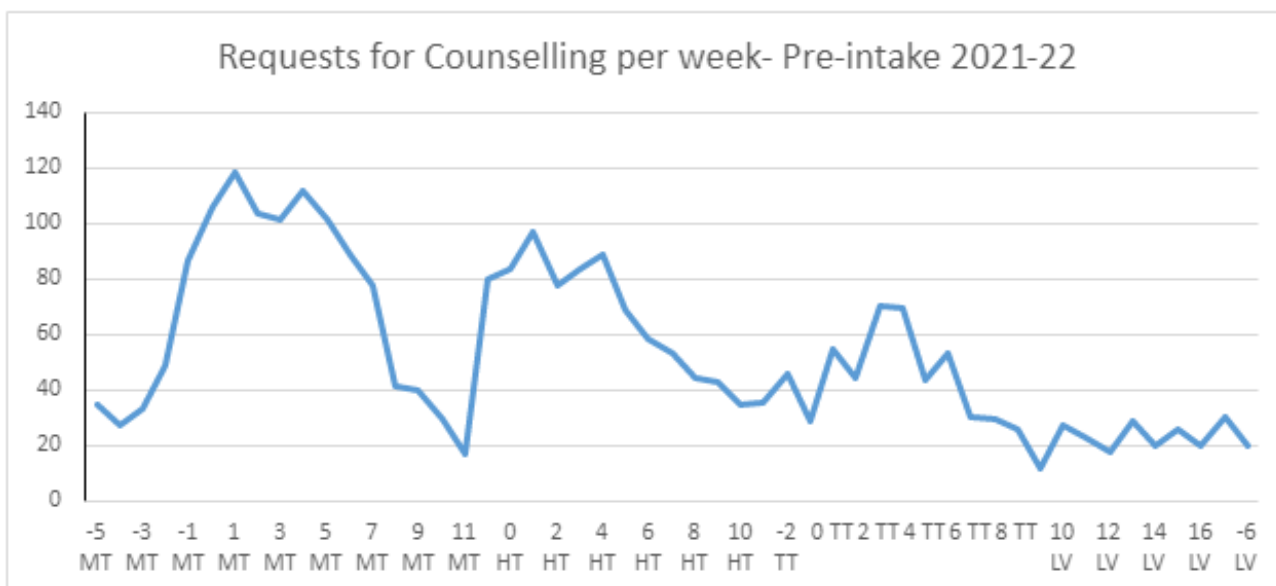
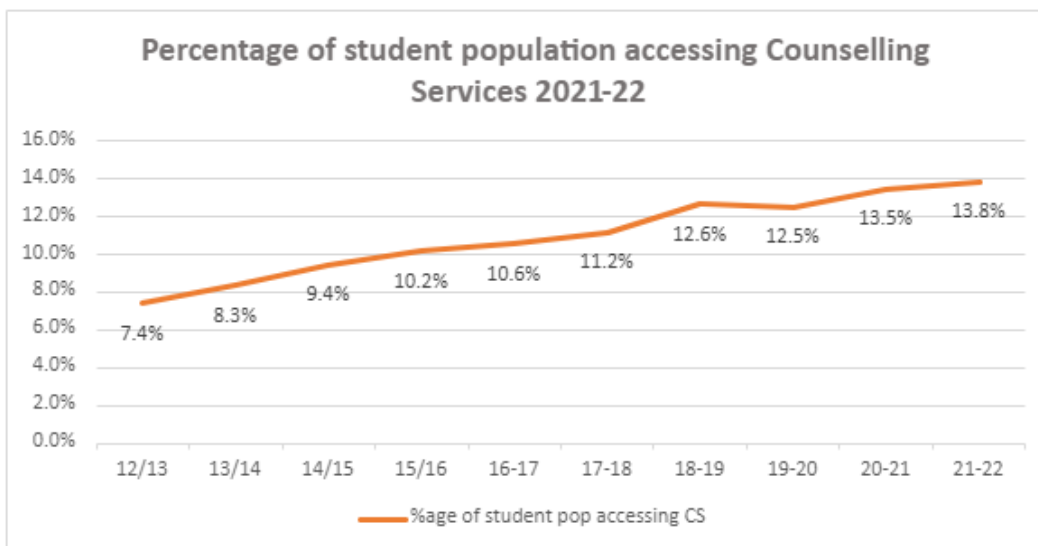
We have continued to offer the evidence-based therapy, EMDR (Eye movement desensitization and reprocessing), to students presenting with post-traumatic symptoms following a single, clearly-defined traumatic event.

Students accessing the service

Demand for Counselling

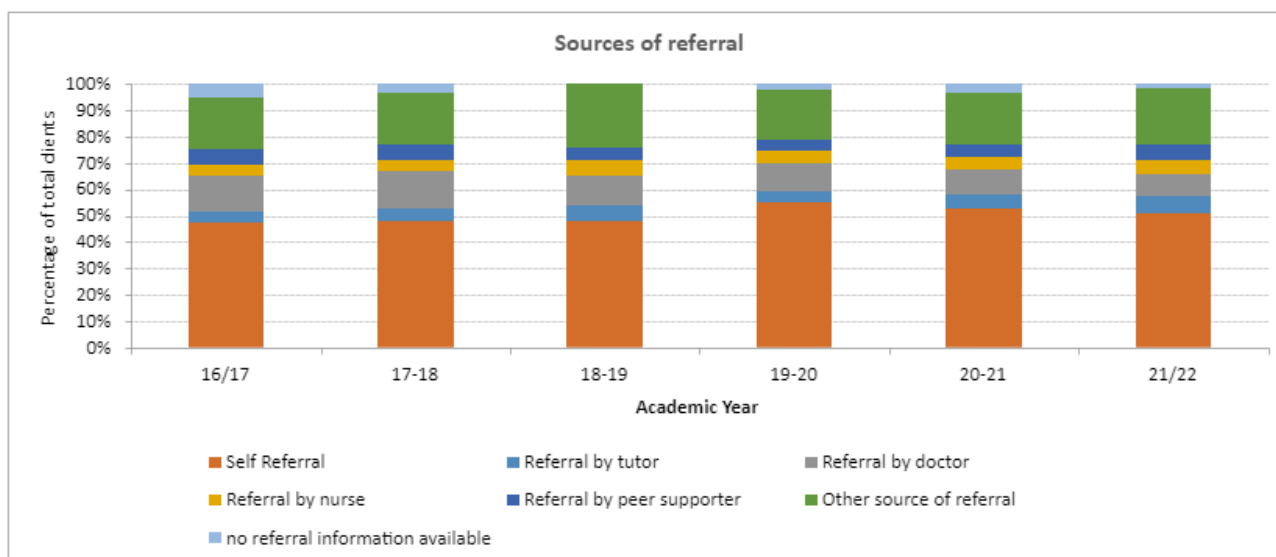
A total of 3,595 individual students attended counselling, comprising 3,005 students seen at Worcester Street (11.5% of the student body) and 590 seen in colleges as part of the On-Site Counsellor (OSC) Scheme (2.26% of the student body). This compares with a total of 3,440 students seen in 2020/21, of whom 2,820 were seen at the central service and 620 in colleges. This represents a 4.5% increase in overall student demand from the previous year. This is in line with increased demand for counselling across the UK university sector.

In 2021/22 13.8% of Oxford students sought counselling compared with 13.5% in 2020/21.



Referrals

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



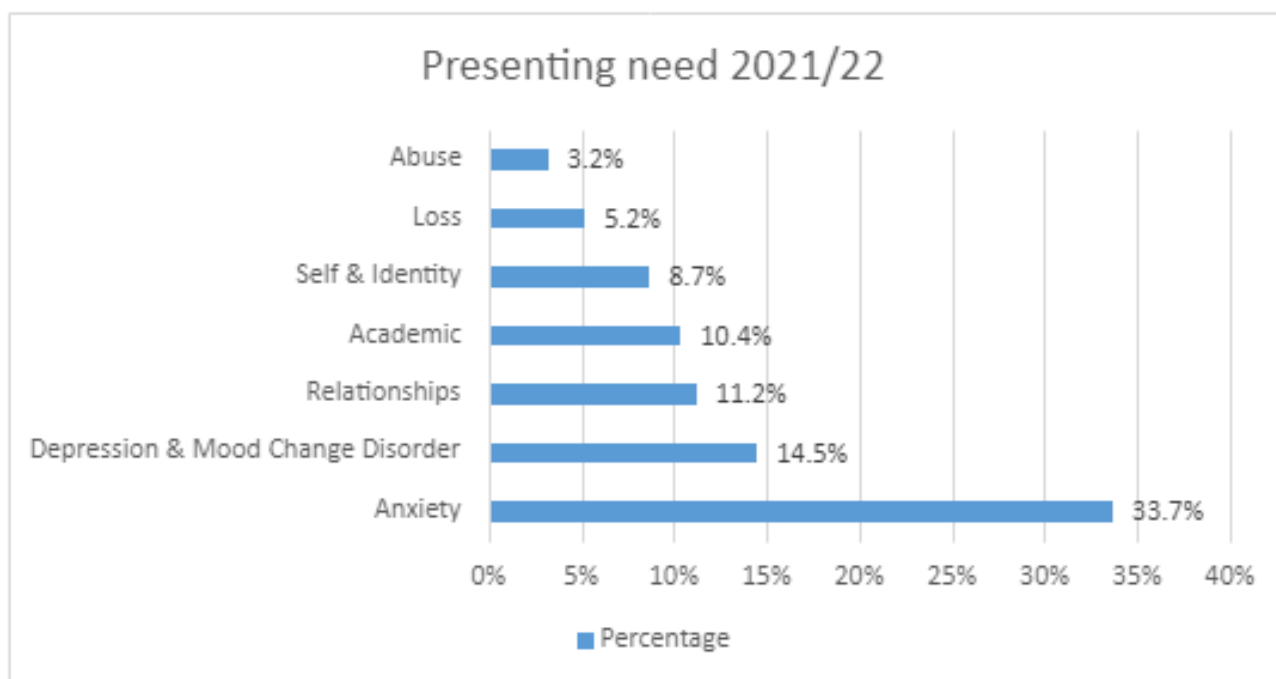
Presenting issues

The Association for University and College Counselling Services (AUCC) system is used to categorize student presenting issues. These 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 nearly 87% of cases in 2021/22. All of the remaining categories account for the remaining 13% cases.

Anxiety remains largest single category of presenting issue, and increased in percentage of presentation from 30.9% in 2020/21 to 33.7% in 21/22. This seems to confirm reports showing increased anxiety in the general population and particularly in young adults during the Covid-19 pandemic. There were some small changes in the other categories. It is important to note that these figures representing the initial student-defined presenting problem do not reflect subsequently identified co-morbidities. However, it remains that since 2018/19 the percentage of students presenting with anxiety has doubled, as in that year the percentage of students presenting with anxiety was 16.7%.

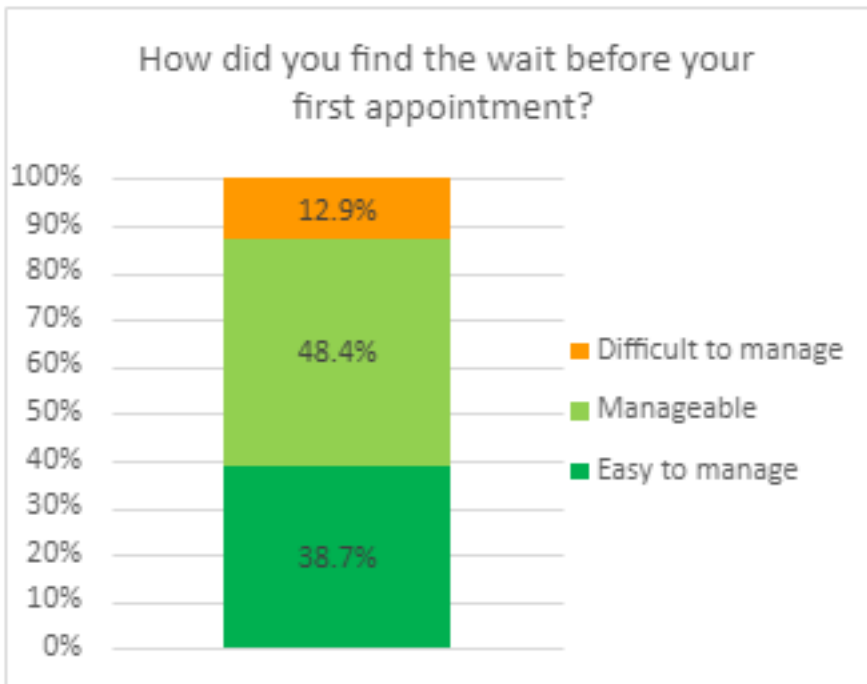
It has been widely reported that the series of lockdowns and subsequent social isolation throughout 2020/21 and into 2021/22 has had direct effects on the mental health of the whole population, and this could be seen in the presenting issues of students attending the Counselling Service. During 2020/21 the clinical team had reported that students were experiencing greater generalised anxiety, reduced motivation, impaired concentration and a general sense of life feeling 'unreal', and that this has continued into 2021/22. As students returned to in-person attendance there were also reports from the counselling team of students feeling socially anxious due to the ways in which lockdowns had interrupted their early time at Oxford or their pre-university studies. It will take some time for the long term effects of the pandemic on the mental health of young adults to be fully understood, and it is worth noting the increased number of students registering with the Disability Advisory Service.



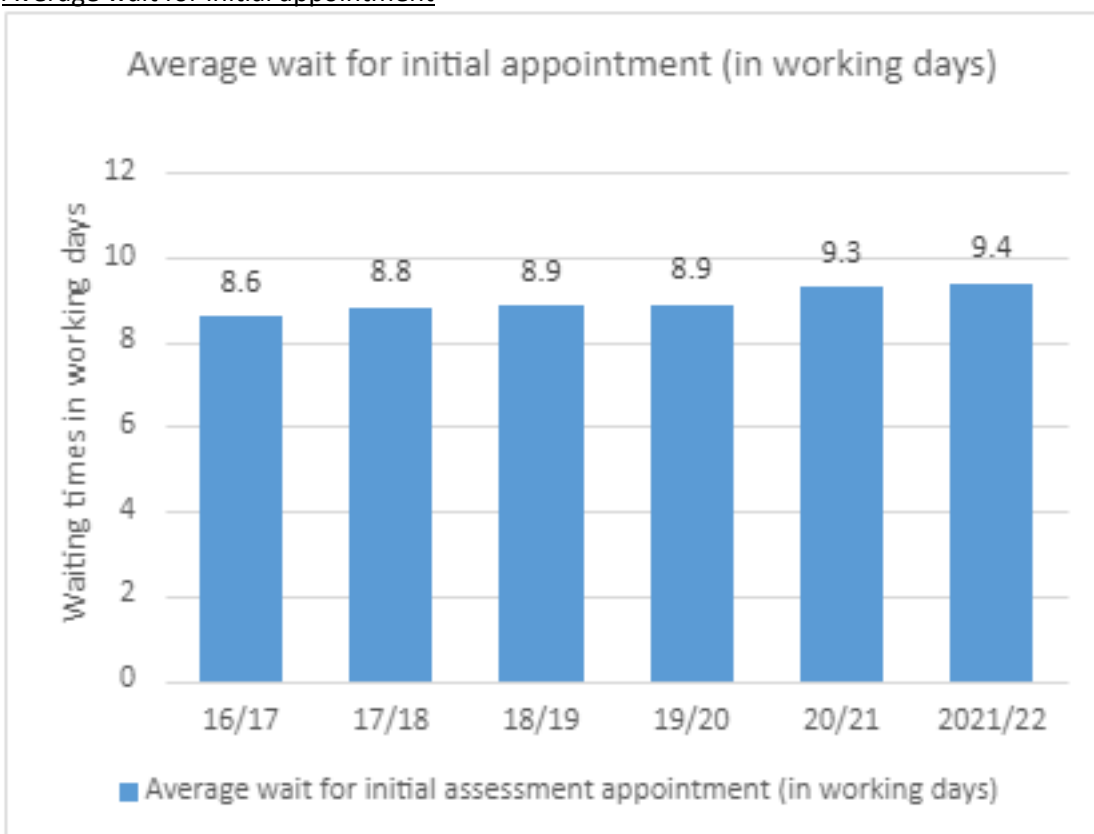
Waiting times

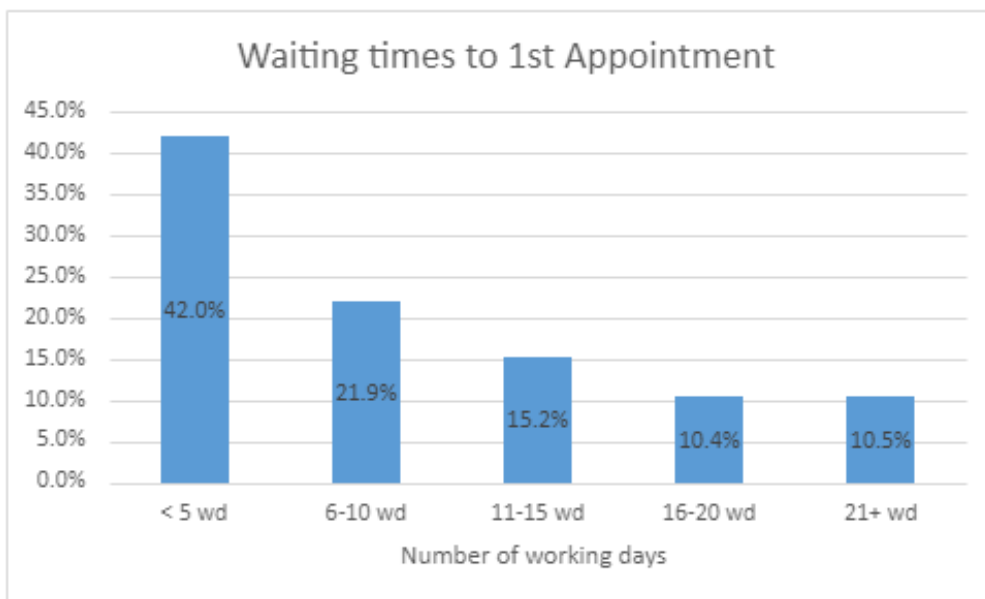
The percentage of students seen in fewer than 5 working days has increased from 35.2% in 2020/21 to 42% of students in 21/22. 79.1% of students were seen within 15 working days compared to 81.7% in 2020/21. The average waiting time for initial appointments increased from 9.3 working days in 2020/21 to 9.4 working days in 21/22. The increase in waiting times can be in-part attributed to the temporary loss of our accommodation at 3 Worcester Street, and move to temporary premises. The very limited number of rooms that we had available for in-person work meant that students were offered online appointments, but some elected to remain on the waiting list until an in-person appointment became available. A reduction in available staffing will also have contributed to student waiting times.

Notwithstanding the long waiting times for some, 87.1% students indicated that they found the way 'easy to manage' or 'manageable' during 2021/22.



Average wait for initial appointment

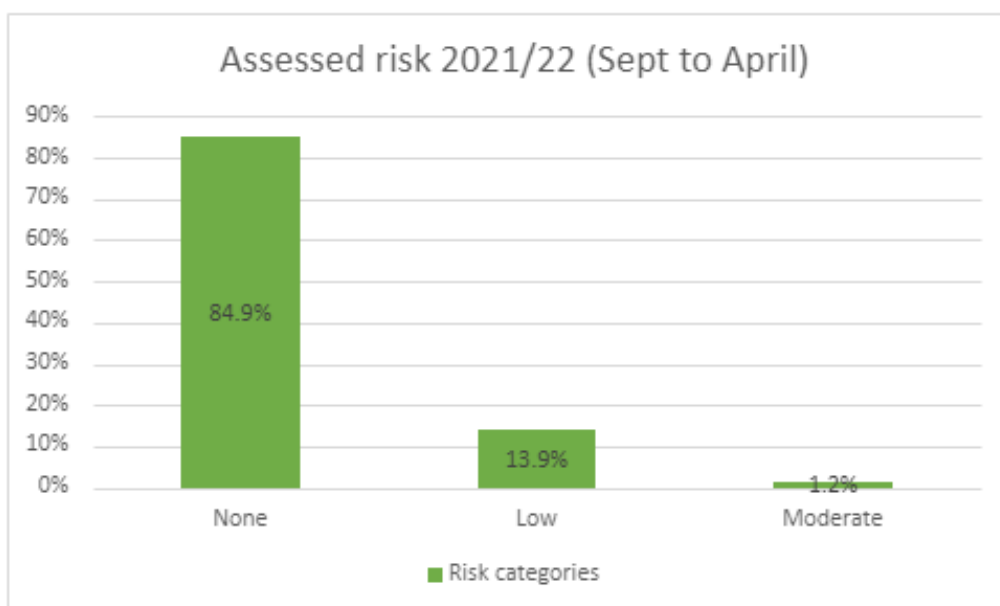




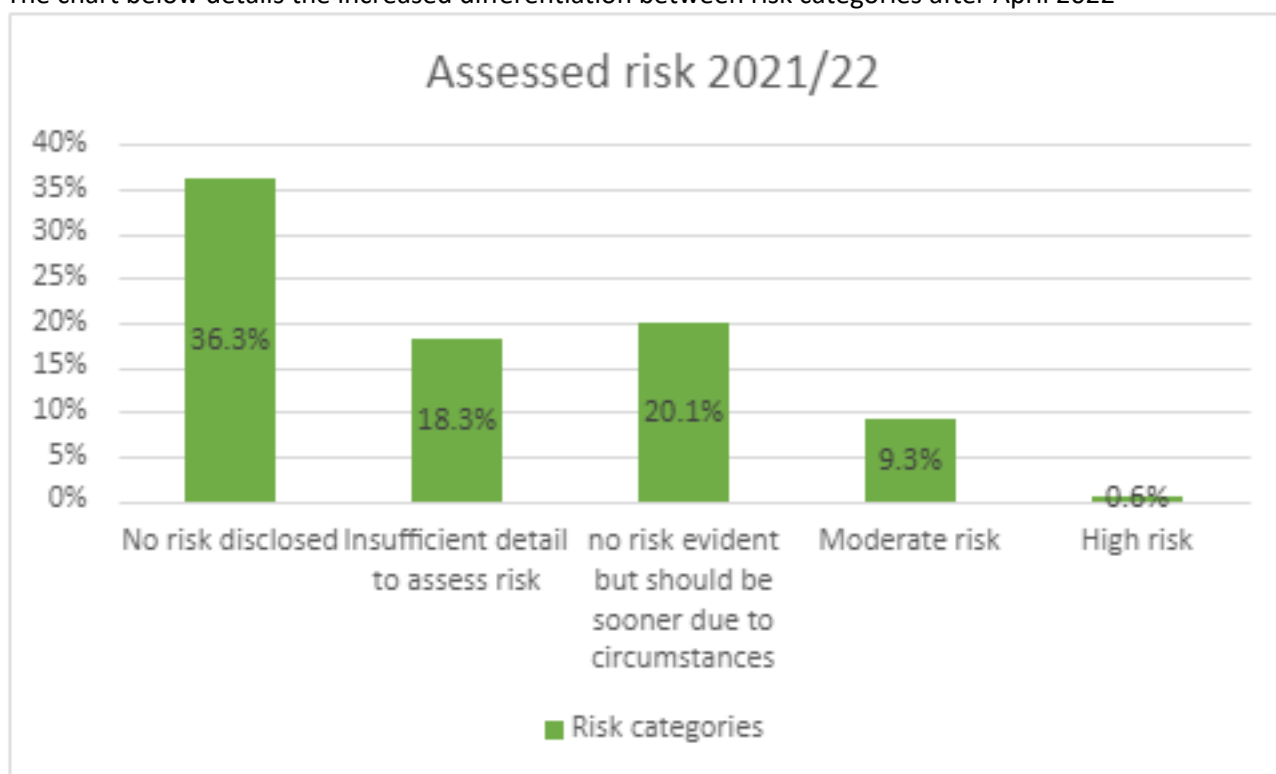
Risk

The Duty Counsellor role is taken on by various highly experienced clinicians to ensure incoming requests for counselling are managed in the most efficient way. The Duty Counsellor, oversees incoming communications to the service that may need clinical input and 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 that individual. Risk has historically been given a numerical indication of severity in the range of 0-3. This system was refined during the course of the year (April 2022) to better differentiate between different types of presentation, not all risk-related, and so the data presented here represents both risk ranges. Students presenting as high and moderate risk are immediately contacted and fast tracked to appropriate medical care.

The changes made to the way that risk is evaluated enables greater differentiation between presentations. The percentage of students presenting with moderate risk has therefore risen from 2.3% in 2020/21 to 9.3% after April 2022. The new system has therefore made it easier to identify students presenting with varying risk profiles and respond accordingly.



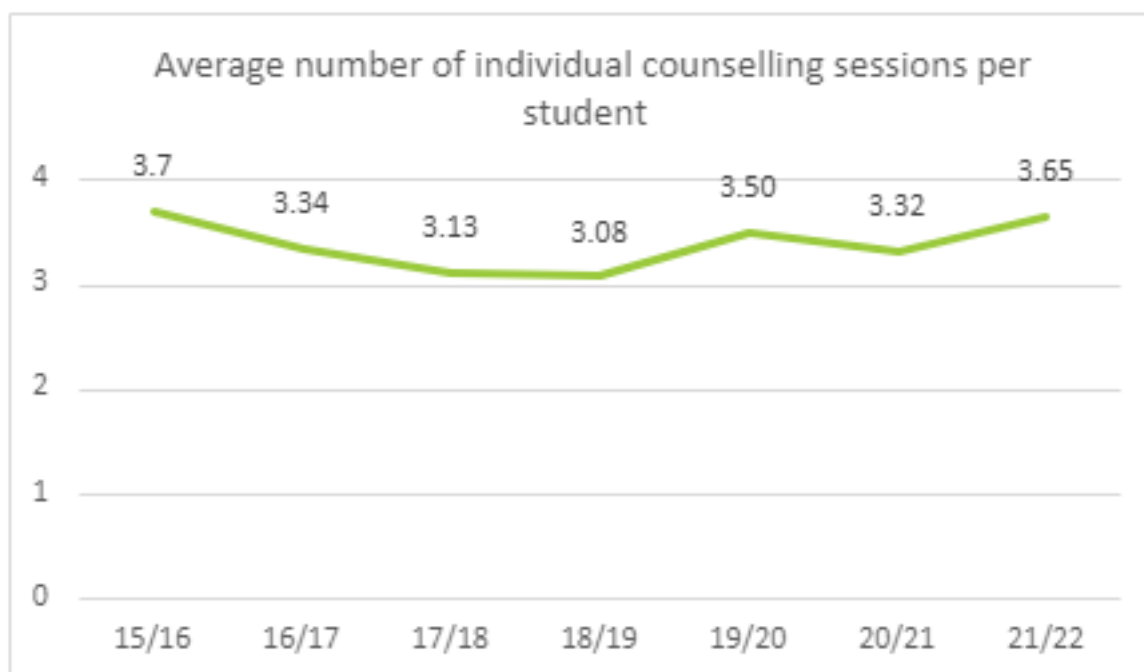
The chart below details the increased differentiation between risk categories after April 2022



Individual counselling

Average number of sessions

The average number of sessions increased slightly from 3.32 in 2020/21 to 3.65 in 2021/22. It should be noted that the average of 3.65 sessions does not mean all students have 3.65 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, and the presenting level of risk. 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 24.73% of students receiving 1 session, 39.84% receiving 2-3 sessions, 23.76% of students receiving between 4-6 sessions and 11.66% receiving 7 sessions or more. It should also be noted, in the context of reduced FTE of available counsellors and restrictions on space limiting in person sessions, the management of student needs in this flexible way reflects both the likely increase in complexity of presentation and student need, as well as the expertise of the counselling team in meeting this need.



The distribution of number of sessions

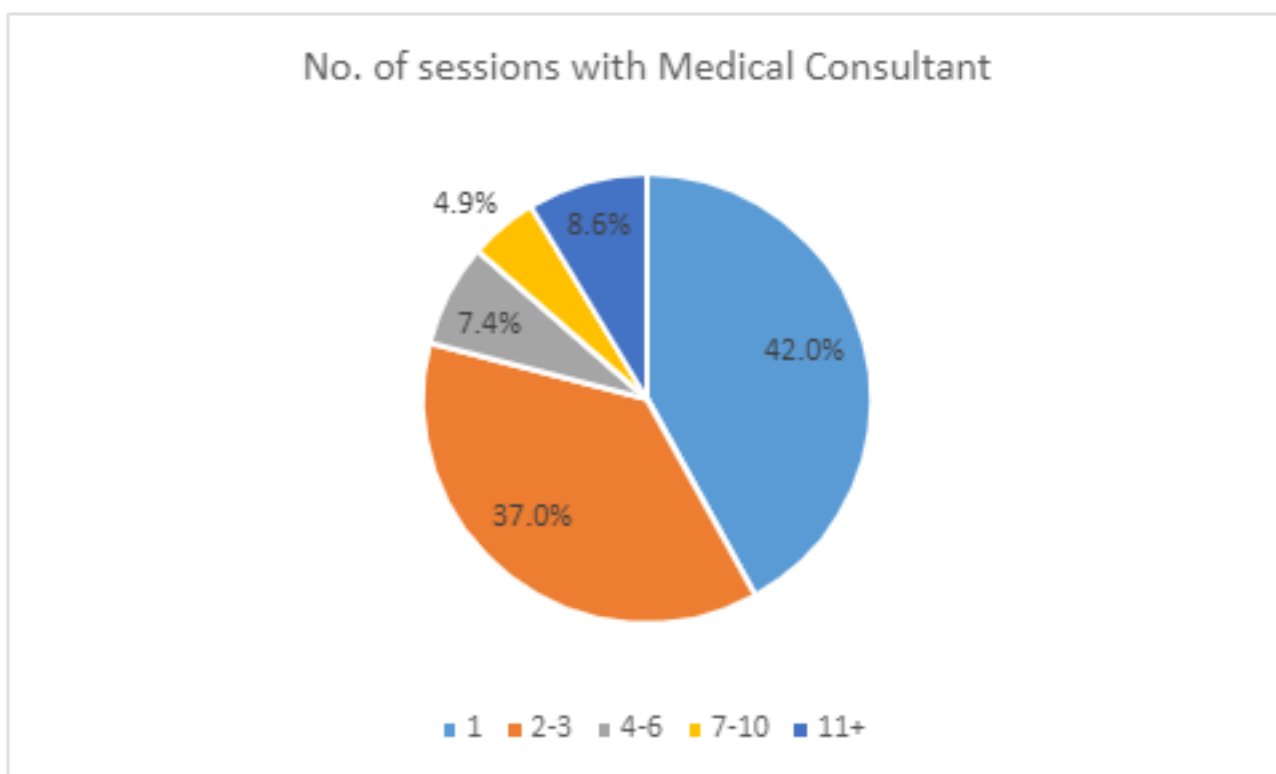
	2019/20	2020/21	2021/22
1 session	27.9%	28.21%	24.73%
2-3 sessions	39.3%	41.94%	39.84%
4-6 sessions	21.4%	19.77%	23.76%
7+ sessions	11.4%	10.08%	11.67%

Medical consultations

As noted above, the service employs a medical consultant (psychiatrist), 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. The consultant sees students with a full range of different mental health needs. 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 2021/22, the consultant saw 142 students for psychiatric consultations.



Groups and Workshops

During academic year 2021-22, another successful program of online only Groups and Workshops was delivered with a rotation of 30 Workshops and 24 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.

The existing groups and workshops adaptable for both online and in-person provision are outlined below. We were pleased that our new groups (Compassion, Students of Colour, and Managing Strong Emotions) all saw a significant increase in participation, compared to the previous year:

Groups 2021/22	Sessions attended
Anxiety Management Group	101
Compassion Group	114
DPhil	113
Low Mood Group	44
Managing Strong Emotions	44
Masters	89
Mindfulness	58
Students of Colour	88
Total sessions attended	651

Workshops 20/21	Sessions attended
Can't Work	53
Connecting with your values	19
Forest Bathing	21
Managing Exam anxiety	23
Managing Sleep and Insomnia	26
Overcoming Panic	37
Perfectionism	29
Persecutory Perfectionism and Imposter Syndrome	25
Relaxation	12
Responding to self-criticism	12
Total sessions attended	257

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.

A successful liaison with Gardens, Libraries, and Museums within the university, led to the facilitation of six psychoeducational workshops in non-clinical spaces across the university. Students attended Panic, Perfectionism, Managing Sleep, Impostor Syndrome, and Mindfulness in Nature workshops in a selection of venues, which included the Ashmolean, the Museum of Natural History, Pitt Rivers Museum, and the Botanical Gardens. Approximately 100 students made use of these workshops, which did not require prior registration with the Counselling Service.

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 15 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 5 college counsellors offering half day provision and 10 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 and student record management. Remote access to Titanium is now available in all college sites.

Benefits

Benefits of the scheme include the following:

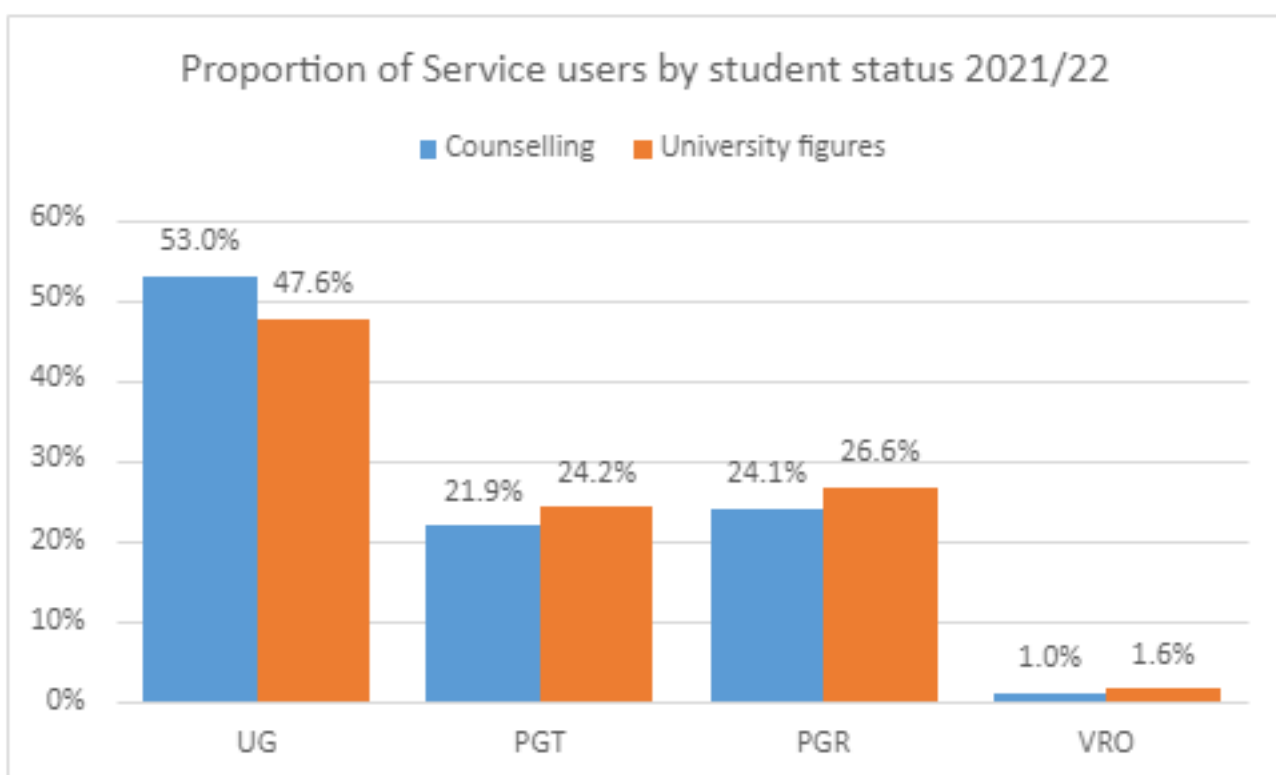
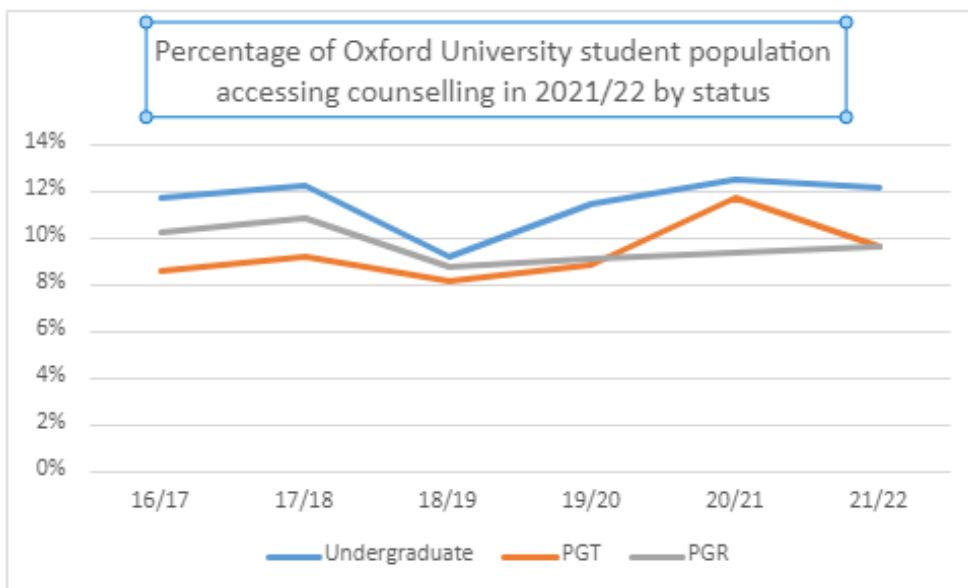
- Having an on-site counsellor produces an immediate and substantial increase in total counselling resource available to students. It has obvious benefits to students of colleges with OSCs in place, but also benefits students across the collegiate university: when students see OSCs this relieves pressure 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.
- Enhances partnership arrangements in the collegiate institution

Demographics

Demographic data is shown for students who access central service (11.5% of total the student body).

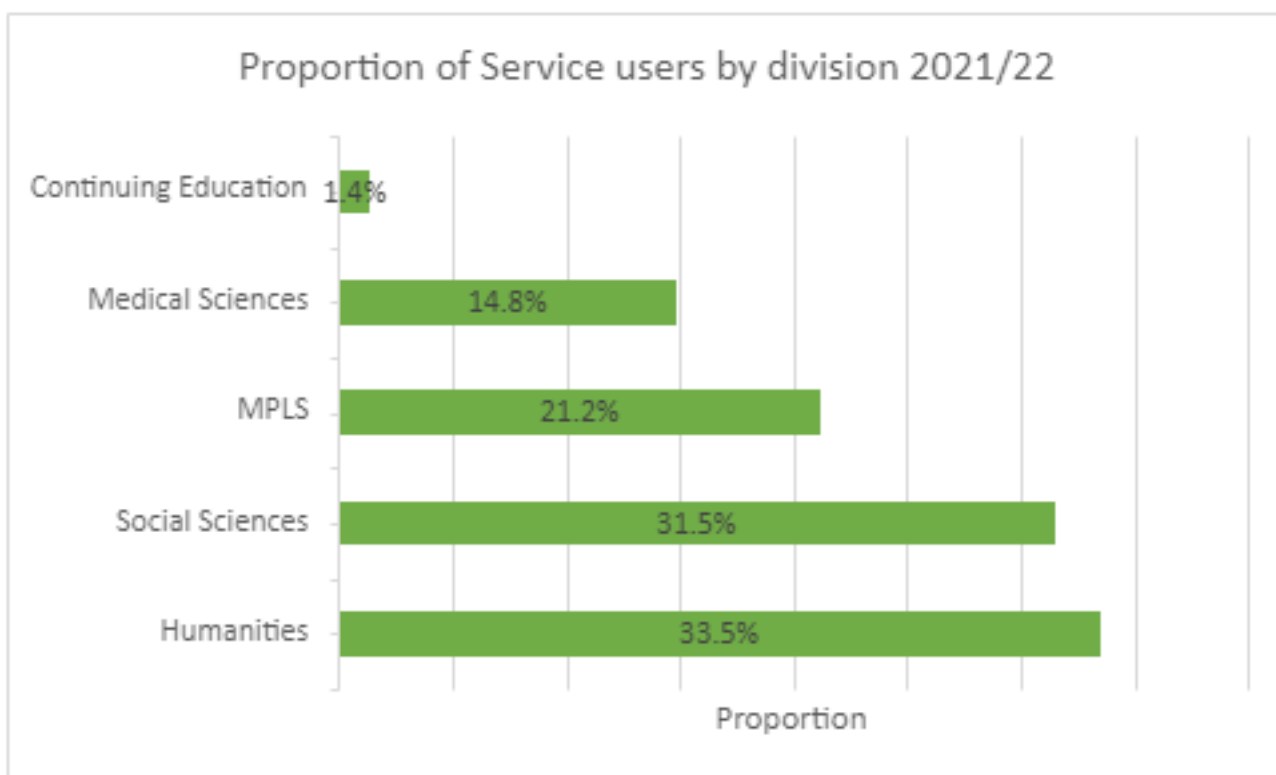
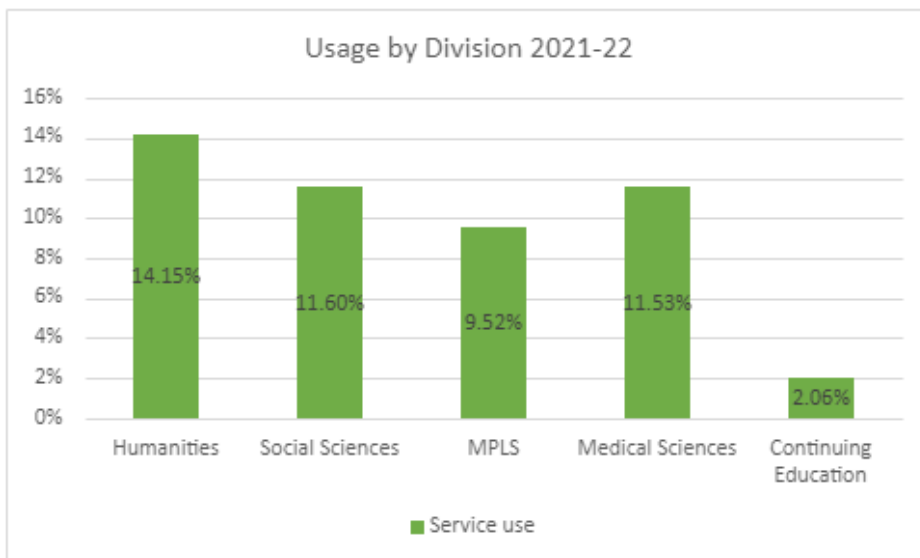
Level of study

As for many years, a higher proportion of Undergraduate students than Postgraduate students access counselling. This is evidenced in the chart below, for example 47.6% of students at Oxford in 2021/22 were undergraduates. Of the students that accessed the Counselling Service, 53% were undergraduates.



Academic Division

The pattern of participation in counselling by Academic Division is slightly less marked than previously. Whilst Humanities and Social Sciences students are over-represented users of the Counselling Service, and students in MPLS are notably under-represented, the margin of difference is less than in previous years. 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. Some of this data may also reflect varied workload and scheduling considerations for students across divisions.

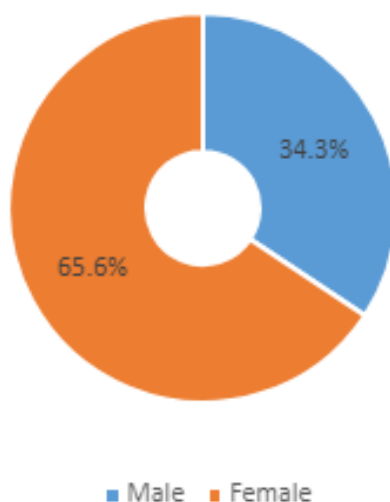


Gender

The disparity in the gender split at the service decreased slightly in 2021/22 with 65.6% female (68% 2020/21) and 34.3% male (32% 2020/21) users.

[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.]

Service users by gender 2021/22

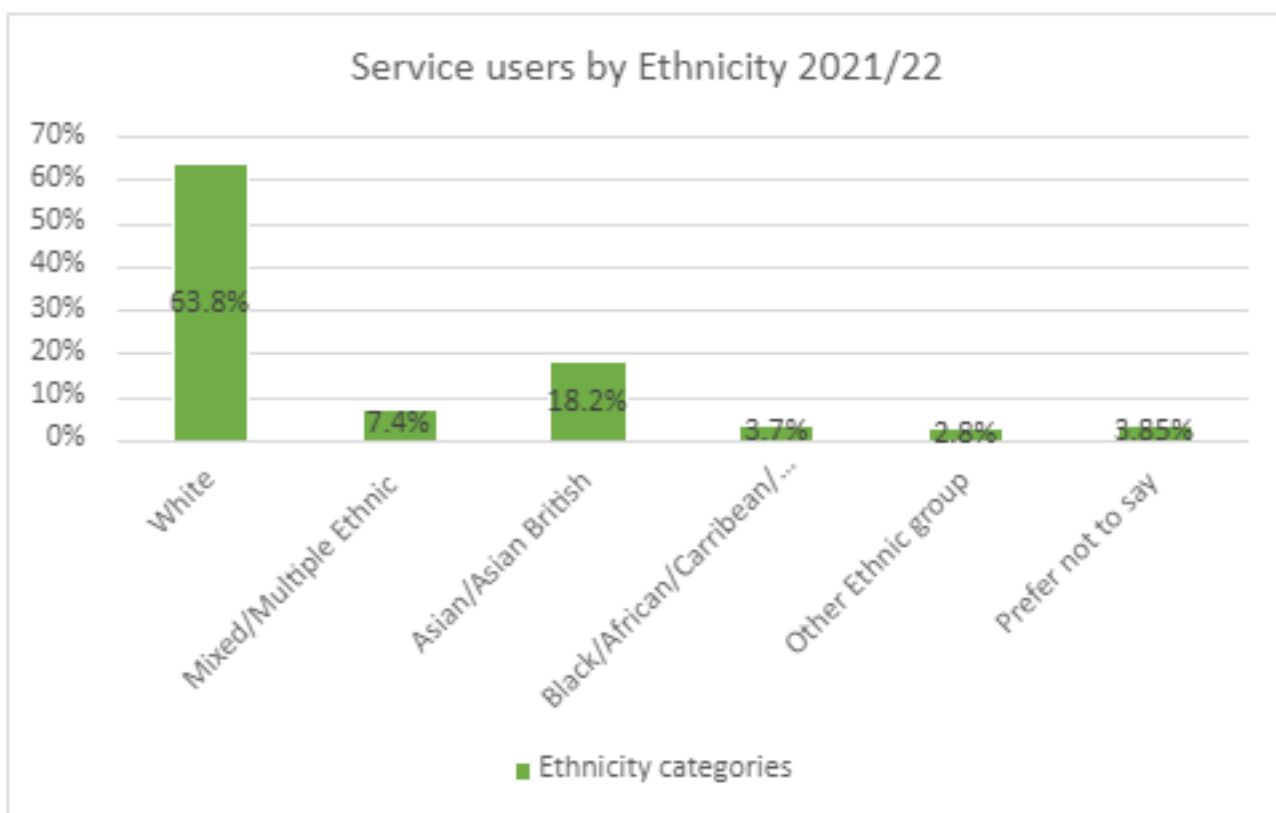
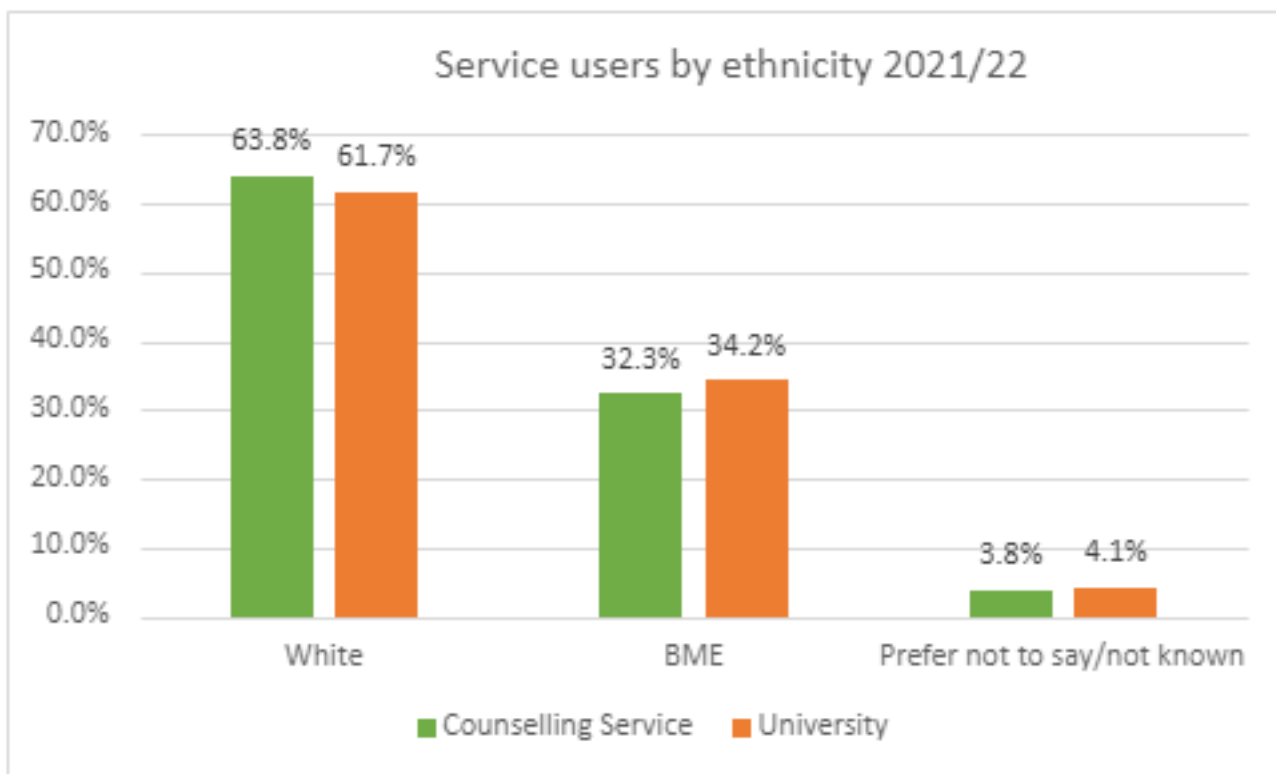


Ethnicity

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 slightly from 7.1% in 2020/21 of service users in 2020/21 to 7.3% in 2021/22. This represents 220 students.

The Counselling Service made efforts to increase the ethnic diversity of the counselling clinical team and has had some success in recruiting counsellors of colour on a sessional basis, in addition to the two black counsellors recruited in 2020/21. However, recruitment and retention across the sector have been difficult.

The increase in the number of counsellors of colour and black counsellors within the Counselling Service, may have contributed to an increase in the percentage of students attending the service from previous under-represented ethnic groups. In 2021/22, 3.7% of service users were Black students, compared to 3.2% the previous year. 18.2% of service users were Asian/Asian British students. This was a significant increase on the 10.2% of Asian/Asian British service users in year 2020/21). 7.4% of service users were of mixed ethnicity, which is relatively unchanged on the previous year.



Clinical Outcomes

What is CORE?

The service 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.

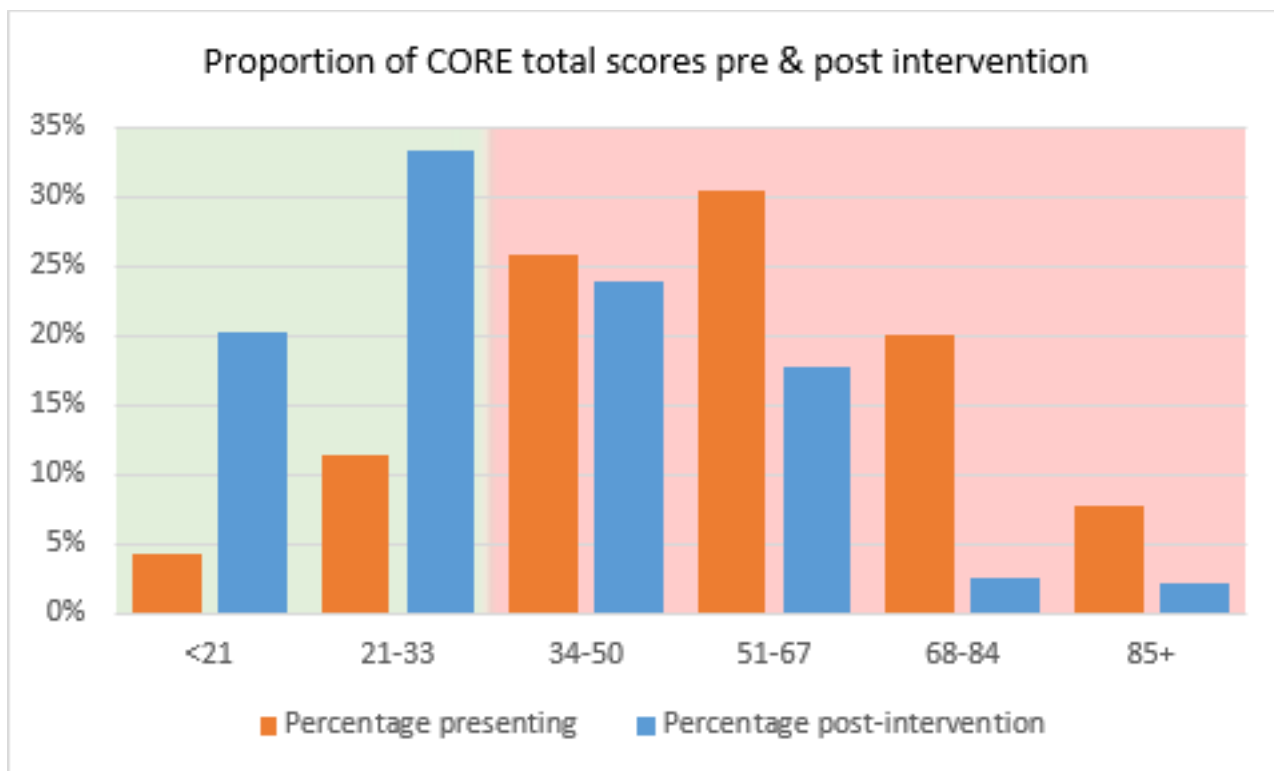
CORE measures psychological distress in four domains: subjective well-being, problems/symptoms, functioning and risk to self or others. It yields a score for each domain and a single overall score. Scores range from 0 to 136, where 0 signifies 'no disturbance' and 136 signifies 'maximum disturbance'. 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. As in 2020/21 the service received a much lower rate of returned post counselling (end) CORE forms in 2021/22 than in previous years. As in the Counselling Service Evaluation Survey (see later in the report) counsellors and students are having fewer 'planned' endings, as more students are being offered the opportunity to return to counselling after a period of time. This practice was borne out of the need to offer flexibility in the clinical work (see increase in number of sessions). It also allows for students to recontact as and when they feel the need for additional support. No planned follow up means there may not be contact with the student again for an undefined period of time, but that ongoing work may resume as required. Asking students to complete end CORE forms online rather than in the waiting room has also meant that fewer are returned. To mitigate the impact of this practice on the collection of data and feedback, the service has implemented new ways of collecting per session data in the 22/23 academic year. Despite these challenges, CORE data continues to show a similar picture when compared to previous years.

Results

For all students in 2021/22 the mean CORE score for students presenting at the start of counselling was 55.02, whereas the mean score at the conclusion of counselling was 35.58. This shows a mean improvement of 19.44 points. This was almost an identical score and pattern to the figures for 2020/21 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 2021/22 and the figures in brackets being for 2020/21.

Core Score	Category	Clinical need	Proportion pre intervention	Proportion post intervention
<21	Healthy	Sub-clinical	4.3% (3.7%)	20.3% (27.3%)
21-33	Low distress/disturbance	Sub-clinical	11.5% (10.4%)	33.3% (25.7%)
34-50	Mild distress/disturbance	Clinical	25.9% (25.9%)	24.0% (26.%)
51-67	Moderate distress/disturbance	Clinical	30.4% (32.5%)	17.7% (12.5%)
68-84	Moderate/severe distress/disturbance	Clinical	20.2% (20.6%)	2.6% (6.9%)
85+	Severe distress/disturbance	Clinical	7.7% (6.8%)	2.1% (1.6%)



The CORE measurement will continue to be used at the Counselling Service to gather long term data and also to be aligned with the SCORE Consortium research project, with strategies in place to increase the accuracy and frequency of collecting this data.

Service feedback

Feedback in the words of students

Feedback from students highlighting the quality of the provision offered:

“The advice given was really practical, applicable, and came from a place of understanding”

“I find it really helpful that someone is there to listen”

“A safe space to elaborate and talk very difficult and personal inner issues”

“Amazing to have this kind of resource available for students”

“Really excellent counsellors on both occasions I used the service”

“Honestly, that I am worthy and capable of being loved, by both others and myself”

“It helped me to understand myself better and build healthier practices going forward”

“I think that the service has changed my life for the better”

“The thing I have found most helpful is the flexibility to be able to work with my counsellor, to be able to devise a plan which worked best for my problems and that could be flexible in terms of what we covered and number of sessions”

“I think my counsellor is very wise, insightful, and brilliant. I especially appreciate how she is able to understand individual suffering in relation to the sociopolitical and historical contexts. She also offers tentative and compassionate listening which provides a sense of safety for counselling”

“I cannot say enough good things about my counsellor. He did an excellent job being present and listening during the sessions. He was very supportive and provided a lot of incredibly helpful feedback. I have been to counselling several times and this was the best counselling I have ever had”

Feedback from students, commenting on the ease of navigating the system to request support:

“I find it really helpful that someone is there to listen”

“The ease with which I could navigate the entire process”

“Counselling services was promptly available and very supportive”

“Being able to have sessions online so I could talk in a place I found comfortable”

“Appreciated having sessions over a year, did not seek help earlier as worried about limited sessions”

Some comments also indicate the need for increased provision and reduced waiting times, which would be possible with the necessary FTE:

“I found the sessions to be helpful, though I hadn't realized there would be so few of them”

“Counsellor's advice helpful and friendly. Waiting times for sessions too long”

“I thought the speed (comparatively) to be referred was fast. Too few sessions”

“I was grateful that the service was responsive to my situation and the experience was a positive one overall. The scope for progressing in just three sessions feels very limited but I understand why there is not the capacity for more. I appreciate the help I have received”

“Counselling was very good, but too short to fully develop skills. For me, the counselling was the start of understanding my underlying problems, but was not enough to deal with it enough”

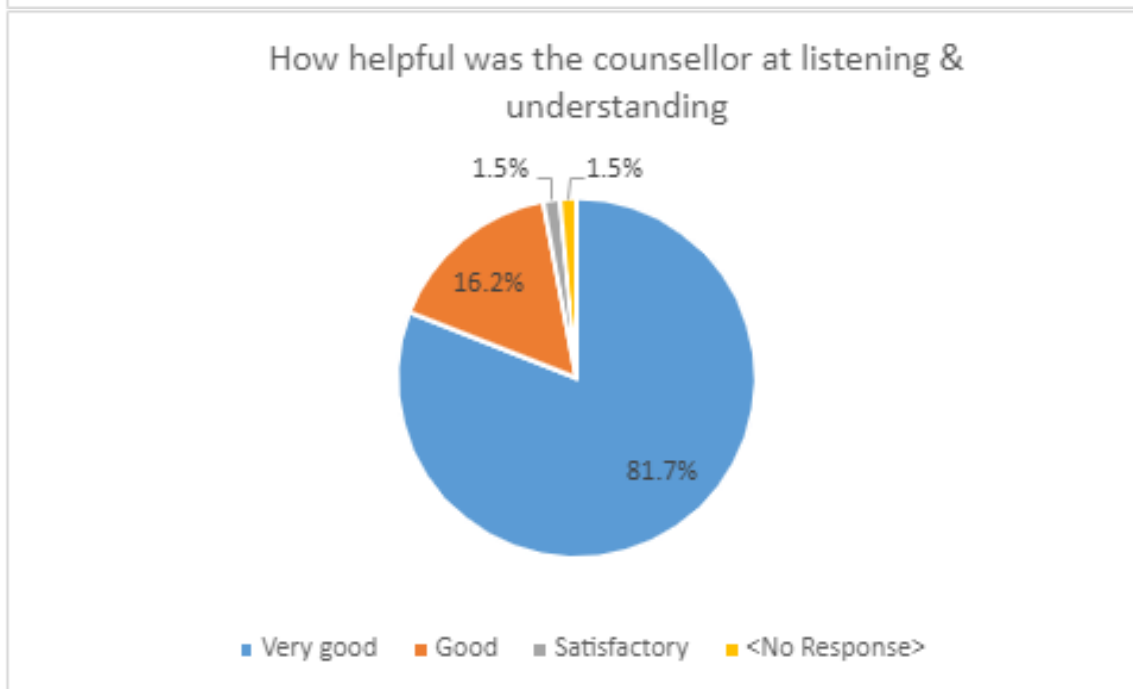
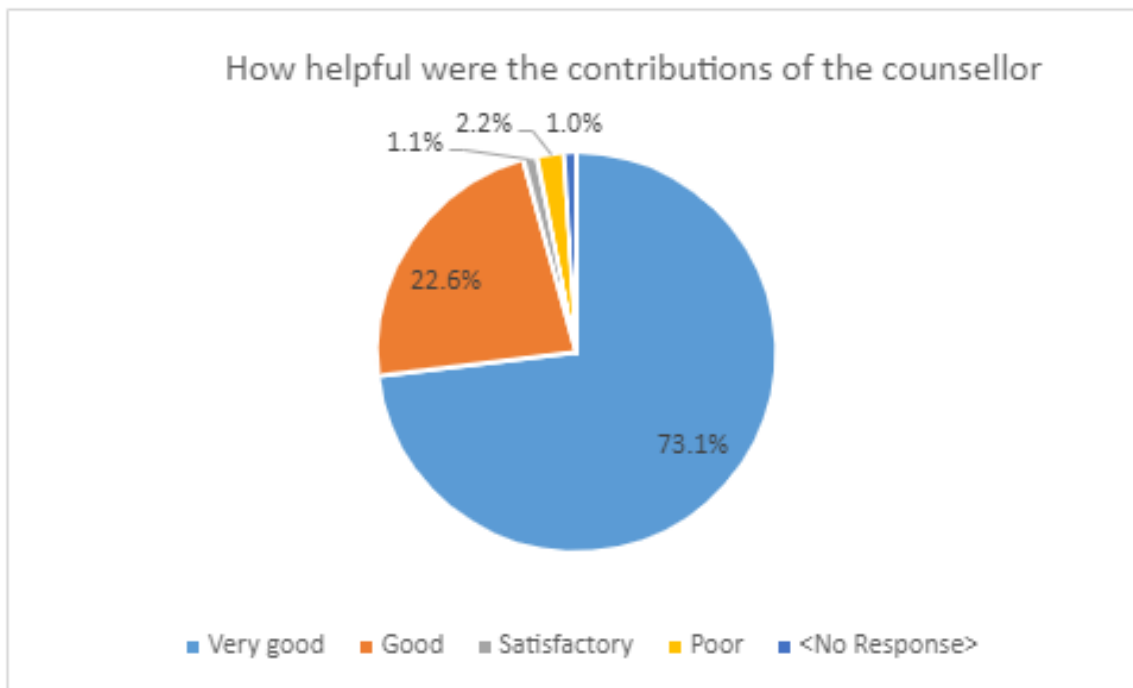
Counselling Service survey

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 for students to 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 mostly online, electronic survey forms were sent out and it is believed that this has

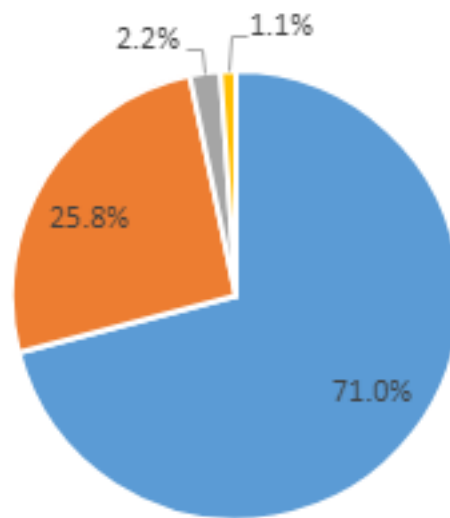
contributed to an even lower return rate than normal. However, with the results of the survey being very closely in line with results from the previous several years it is believed that they give an accurate picture.

Survey Results

Students responding to the main CS survey expressed high levels of satisfaction: 81.7% said their counsellor was 'very good' at listening and understanding; 97.9% said their counsellor was 'good' or 'very good'; 73.1% said their counsellors' contributions were 'very good', rising to 95.7% who said their counsellors' contributions were 'good or very good'. These are increases on the previous year.

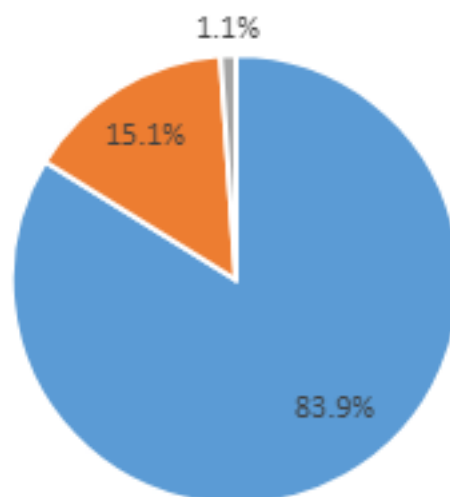


How would you rate your counselling experience overall



■ Very good ■ Good ■ Poor ■ <No Response>

Total number of counselling session were?

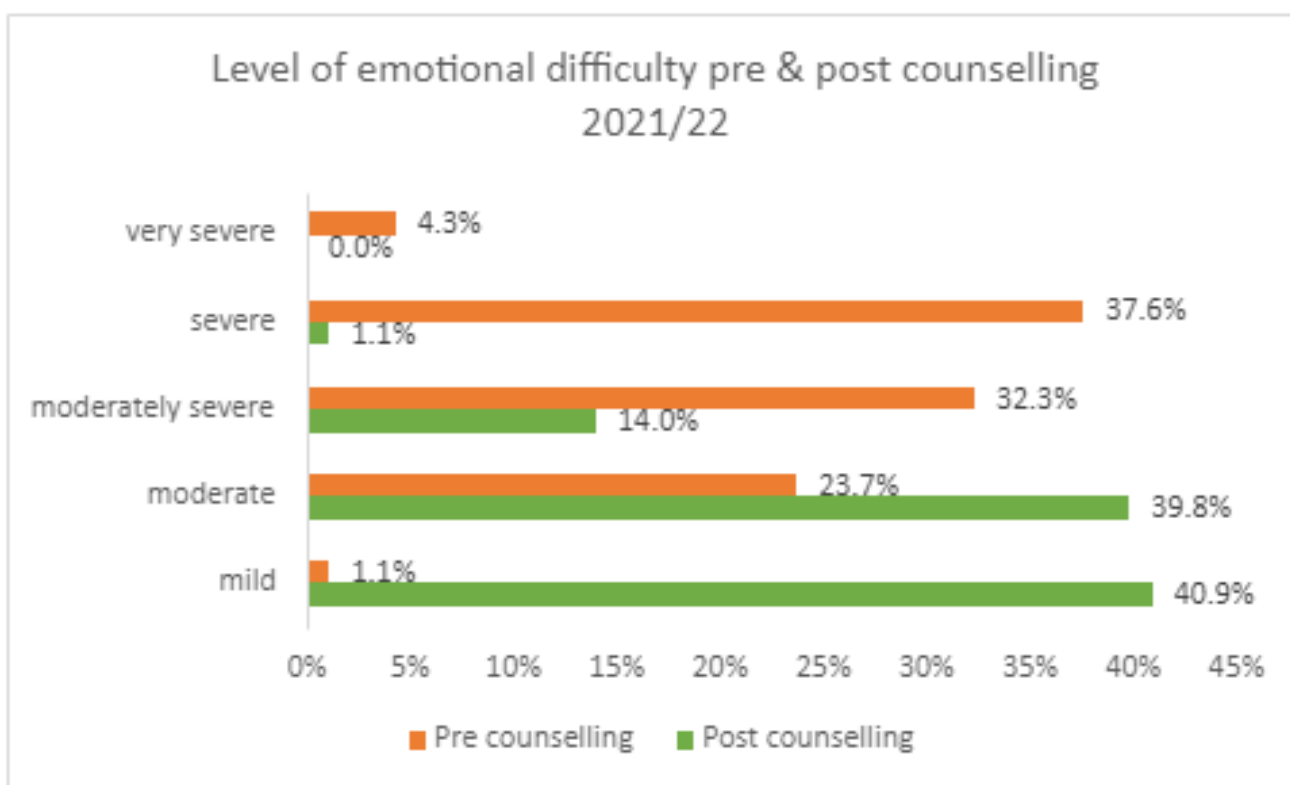


■ About right ■ Too Few ■ <No Response>

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

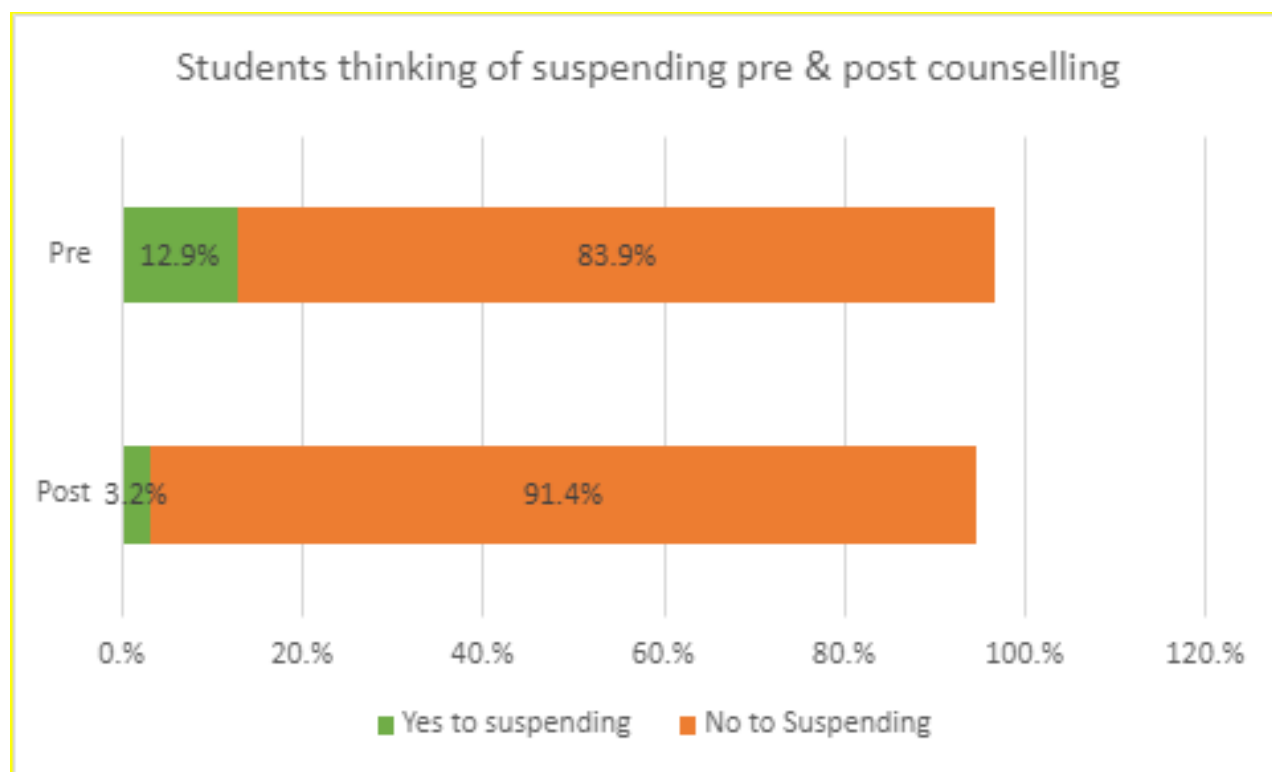
- In rating their overall experience of the Counselling Service, 71.0% rated it as 'very good', and 25.8% rated it as 'good'.
- 83.9% rated the number of sessions they received as 'about right', 15.1% rated it as 'too few'.

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.



12.9% 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 3.2% of students were thinking about suspending or withdrawing.

Impact of counselling on decision to suspend/withdraw



Peer Support Programme

The Peer Support Programme has grown, with more colleges and departments joining the programme, leading to more students receiving the 24-hour Peer Support training, spread across 8 weeks. The programme also continues to offer training and supervision for Junior Deans, which is reported to be invaluable for the role within colleges. The level of demand on the provision has also led to a dedicated team of Peer Support Trainers being recruited and trained in the second half of the academic year. Previously the Programme commonly employed Counselling Service staff to offer the training, whereas the recent growth of the programme in the 20/21 and 21/22 academic year led to the necessity of dedicated trainers for the programme. In addition, the Peer Support Programme was nominated for the Vice Chancellor’s Diversity Awards in 2022.

A full report of the work of the Peer Support Programme for 2021/22 is supplied separately.

Other service activities

Staff mental health awareness training to support student mental health

At the beginning of Michaelmas Term 2021, following the work of the Mental Health Task Force, a member of the service was appointed to the new role of Mental Health Training Development Coordinator, offering staff across the collegiate university and associated departments an opportunity to learn and reflect on matters concerning student mental health.

The appointment is leading the development and delivery of training for staff, incorporating relevant material from the nationally recognised Mental Health First Aid syllabus but focusing on issues most relevant to the specific Oxford context. This training includes attention to issues of risk, including the risk of suicide, and explores case studies which reflect the specific challenges and dilemmas likely to arise when working with Oxford students. The training is tailored to speak directly to the specific needs of staff across the university, and to give them the skills and tools to feel more confident and to be more effective in their roles when dealing with students in distress.

SWSS now offers a half-day Mental Health Awareness training (MHA) training to all staff in the collegiate university and associated departments focussed on supporting students in distress. The training offers staff an opportunity to learn and reflect on matters concerning student mental health and focusses on issues most relevant to the specific Oxford context, using case-studies to explore and discuss the type of scenarios that staff are most likely to encounter when dealing with a distressed student. The training looks at common mental health difficulties and gives practical advice and guidance on how best to respond in such situations.

Foundational Course content

- Understanding the spectrum of mental health
- Recognising signs and symptoms of common mental health difficulties
- How to have mental health and well-being conversations
- Practical advice and pragmatic skills for dealing with students experiencing distress
- Guidance on dealing with risk, including the risk of self-harm and suicide
- Knowing when, where and how to signpost to appropriate support services
- The importance of maintaining professional boundaries
- Managing confidentiality
- Taking care of yourself when supporting others
- Case studies

Progress to Date

Since taking on this new role of Mental health Training Development Coordinator in Michaelmas Term 2021, Mental Health Awareness (MHA) training has been delivered to more than 600 collegiate and departmental staff within the first year. Feedback indicates that the training has been well received with staff overwhelmingly reporting that they feel more confident, knowledgeable, and better equipped to deal with students in distress following the training.

Although fewer colleges have sought training than departments, the gap between the two is closing and 21 colleges have now received MHA training while three more colleges have booked training for this academic year.

Future plans

As well as continuing to advertise and encourage colleges and departments to undertake the MHA training, SWSS is currently working closely with the Universities Wellbeing Programme Team to develop a structure to include those who have already completed Mental Health First Aid/MHA training so that they are integrated into the university-wide MHA system, to try and ensure that the University is offering a more coordinated and coherent approach to dealing with students in distress. The aim is to encourage the continuous professional development of those who have undertaken MHFA/MHA training by attending additional training/masterclasses on a range of mental health topics, which will be delivered by individuals from, or familiar with, the climate of Oxford and the nature of student life.

There will also be the opportunity to reflective practice sessions run by an experienced clinician from SWSS. This is in line with recommendations made by the University Mental Health Charter which states that universities have a duty of care to ensure that staff are encouraged to undergo training to deal with mental health issues that arise in the student population. However, they also raise concerns about any mental health training that is not properly designed and implemented as research suggests that volunteer individuals who undertake MHFA training are frequently left to their own devices following training without appropriate managerial structure and guidance in place. This is a particular concern when it comes to the issue of individuals managing boundaries, with the research suggesting that a lack of managerial oversight, and lack of opportunity for reflective practice with a clinician, put both the MHFAider, and the individual they are supporting, at risk. The aim of the trial being proposed for Trinity Term 2023 is address these concerns and to put structures in place to ensure best practice when dealing with the mental health of students.

Feedback

- Very comprehensive and informative. I wish this training had been available when I started 10 years ago. Should be part of college lecturers' induction if it isn't already.
- Good to get advice on what to do in difficult situations.
- Clear and practical information especially about what is available for students in terms of mental health support.
- Information about specific conditions/challenges and how to react in the moment.

National Liaison

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

- 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, before speaking at their annual conference in May 2022 where he also stood down.
- 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, standing down in Autumn 2021

- Mr Percy was thanked for his services to student mental health over many years by those with whom he had come into professional contact.

The current Deputy Heads of Service have continued external liaisons:

- Links with Heads of University Counselling Services, continues to provide insight and involvement in the most current pressures and innovations in the HE sector.
- The research on Student Wellbeing in Experiential Learning Spaces Project promotes wellbeing across academia and welfare, for students to be able to access non-clinical spaces for learning and psychoeducation. The ongoing liaison has involved supporting the research project clinically (offering psychoeducational workshops in GLAM spaces) as well as academically.
- Active liaisons with NHS services for eating disorders, crisis, and other mental health needs, facilitates better care for students both directly and indirectly, through knowledge and referrals.

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.

- Continuing to build on hybrid provision, offering both in-person and online individual and group counselling to students, and increased access opportunities for access to those requiring flexibility. The university has adopted New Ways of Working, offering such flexibility to staff who are then able to deliver high quality work based on their strengths and circumstances. As a consequence, clinicians offer a mixture of online and in-person sessions, which where possible are matched with student preference.
- Building on individual and group counselling and its offering of highly tailored support, using student feedback to refine and enhance provision in both content and mode.
- 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.
- Continued involvement in external research projects such as SWELS, Social Prescribing, and Reducing Digital Distractions. Involvement in such research ensures our methods remain current and relevant to student needs. Based on feedback, staff are receiving training in any areas that may require additional development.
- 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. Staff shortages meant it was not possible to roll this out as planned during 2021/22
- To work with Les Wright, Director of Occupational Health and Safety, to develop plans for a pilot Staff Counselling Service, based on the model of the current Student Counselling Service. It is planned that the pilot Staff Counselling Service will launch sometime in 2022/23 as a matter of priority, and be open to university staff.
- Maintaining team stability whilst a permanent Head of Counselling Services is appointed. We very much look forward to welcoming the new appointee in due course.
- The start of the 22/23 has already seen increase and improvement in data collection, by implementing new measures and better collection methods.

- New administrative systems and ways of working are being devised relating to triage, fairer distribution of appointments based on needs and urgency, and improved management of waiting times.