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DPY 5360 Final Doctoral Project

Online counselling in schools as an additional option to face-to-face provision: Exploration of pupils' experiences and comparison of effectiveness of working in different mediums.

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Acknowledgements

Abstract:

Aim/Purpose: A review of a UK Schools Counsellors attitudes to school-based online counselling (Hennigan & Goss, 2015) provided impetus for the current study, which sought to understand i) Pupil usage of online counselling provision (as an adjunct to f2f provision) from September 2016-July 2017 ii) Differences in CORE-10 and Goals Based outcomes for pupils using f2f only, online only or a blend of both iii) Pupil's thoughts about offering choice of f2f, online or blended counselling

Design/Methodology: A pluralist, mixed methods approach utilised a variety of quantative analyses and a qualitative thematic analysis of post counselling interviews with pupils who had experienced either f2f or online counselling,

Results/Findings: Of 68 pupils (7.6% of total pupil cohort) using the service, 52 (76%) chose to work f2f only and 16 (24%) chose online counselling (12 blended with f2f and 4 online only). Results suggest that those who received online counselling had a slightly a higher mean average first CORE-10 score and made slightly more improvement. Thematic analysis of post counselling pupil interviews revealed three main themes: 'Convenience', 'Connection' and 'Confidentiality'. Perceived concerns that pupils had about online school-based counselling e.g. quality of relationship, confidentiality online, miscommunication and lack of visual cues, are comparable to some concerns that UK secondary school counsellors had in 2014 (Hennigan & Goss, 2015) and are potentially based upon lack of exposure to relevant information.

Research Limitations: The relatively small sample size and school type selected for the study limit reliability and generalisability. Future research could address these through a larger group of participants and different types of schools.

Conclusions/Implications (including practice implications): This study suggests that pupils want the convenience and flexibility of having a school-based counselling service that is both online and offline and create strong enough connections with their counsellor to make roughly equivalent progress in both mediums. Clarity around confidentiality online may encourage more pupils to access counselling this way, as well as continued exposure to what is for many, still a new and potentially risky venture**.**

333 words

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Chapter 1   Introduction

1.1   The interweaving of the personal and the professional

This research officially began in 2012, but I believe that the seeds were sown in the 1970s and 80s, throughout my childhood and adolescence. It is based upon investigation into the development of a school-based online counselling service within a group of UK schools, as an adjunct to the long-standing (10+ years) face-to-face (f2f) provision.

This first chapter provides an account of the original motivation for the overall project (1.1 The Personal context), followed by a description of the background and the setting (1.2 The Professional context) of this research. From there, a brief description is given explaining how and why the research project had two main parts and how they fit together. As a full time counsellor myself in a group of UK secondary schools, the first part involved investigating the perspectives of my UK professional colleagues on the potential of working therapeutically online in schools (1.3 The motivation for the Practice Evaluation Project or PEP). This then became the foundation for the second part and focus of this report, the Final Project (1.4 A brief explanation of the Final Project or FP).

This project involved a two-year investigation of the usage of a school-based online counselling facility by pupils, as an adjunct to the long established f2f provision. It also investigated the experiences and perspectives of those pupils offered the choice to access counselling via different mediums in their schools - in person via the more traditional f2f medium, online (using text, audio, or video), or as a blend of both online and f2f mediums. This chapter concludes with a brief description of how the PEP and FP also led to development of two of the main products of this research:

1. An online training program for counsellors who work with young people, to equip them to work therapeutically online.
2. The development of a schools-based online counselling service, as an adjunct to f2f provision.

The following chapters of this full report contain a summary of the PEP (Chapter 2), a review of the pertinent literature (Chapter 3) and the design and methodology of the Final Project (Chapter 4). Chapter 5 explains the ethical issues considered, followed

by a description of the process of taking the f2f school-based counselling service online in Chapter 6. Chapter 7 presents the quantitative and qualitative results of the Final Project (FP), which describe two years usage and effectiveness of the schools-based f2f and online counselling service by pupils between September 2015 and July 2017. A thematic analysis of the experiences of young people that utilised either or both mediums is also provided in these results.

The results of the FP are fully discussed in Chapter 8 (connecting the FP to the PEP where appropriate) and limitations of each are considered. Chapter 8 also provides a concluding summary of these two pieces of research, combining learning from both, where appropriate, and suggesting possible next steps. Products originating from this research are then detailed in Chapter 9.

Both qualitative and quantitative (or mixed) methods (Goss & Mearns, 1997; Cresswell & Plano-Clark, 2007) are utilised for analysis and reporting throughout this work, and the reasons for this are explained in Chapter 4 (Design and Methodology). However, quite simply, I believe that utilising both approaches and the differences between them maximise the opportunities to gather and present the most detailed exploration and understanding possible.

Finally, although much of this research is written in the third person, as is conventional in academic writing (Arnaudet & Barrett, 1984; Spencer & Arbon, 1996; Hyland, 2002), some sections are written in the first person. I believe that this provides a reflexive element appropriate for the qualitative elements of this research (Day, 1994; Berger, 2015). This may also enable the reader to hear more clearly where I, as a practitioner-researcher, am situated within this research, with clear acknowledgement of potential biases therein (Brown, 1996; Mehra, 2002).

1.2   The Personal context
"We shall not cease from exploration and the end of all our exploring will be to arrive where we started and know the place for the first time."
T.S Eliot, Four Quartets (1944).

My first experience of being a counselling client was when I was twenty-three years old. My experience then and reflection upon that experience now, was that it was not a good one. I said nothing for most of the session and left feeling a fool, my life collapsing six months later. Why, and how then, did I end up becoming a therapist working with young people?

I have now been working in a variety of roles with young people for over thirty years, almost all my adult life. For more than a decade I have been working as a counsellor in both state and independent schools, with pupils aged from 3-18 years and their accompanying families and staff.

Upon joining the Doctorate in Psychotherapy by Professional Studies at Metanoia Institute in 2012, I examined my journey before and during those thirty years for the first time (Appendix 1). This revealed how deeply entwined the personal and professional are in my life, and in my chosen research area. As many therapists I consider myself a 'wounded healer' (Jung, 1963: Groesbeck, 1975; Kirmayer, 2003; Zerubavel & O' Dougherty, 2012) with much of my early life influencing my choice of profession (Barnett, 2007; Sussman, 2007) and potentially also the client population that I chose to work with. Furthermore, I appreciate that:

> Being wounded in itself does not produce the potential to heal; rather, healing potential is generated through the process of recovery. Thus, the more healers can understand their own wounds and journey of recovery, the better position they are in to guide others through such a process, while recognizing that each person's journey is unique. (Zerubavel & O'Dougherty, 2012, p. 482)

Born seventh out of ten children in an impoverished area of London filled with Irish, Pakistani, and West Indian immigrant families, until the age of 11 my childhood experiences were mixed. At home I felt myself to be both innately good and bad, as I perceived that my father loved me, but my mother (who had suffered much early childhood abuse herself) loathed me most of all my siblings. She would let me know this physically, but also more painfully verbally, on a daily basis. During infant and primary years at school, I also perceived myself as both 'good' (because I was strong academically and in sport), but also 'bad' as I would break rules, steal or lie when I could get away with it (as I had learned to do in my home environment to survive).

During those early years it seemed to me that life was a case of survival of the fittest, and as siblings, not all of us thrived. Learning to adapt to this environment, to tune in to body language, tone of voice and content of speech, would make a difference as to whether one received a beating or public humiliation in the group through verbal or physical abuse. As humans, most of us have this innate ability to tune in to our environments, but these harsh early experiences possibly fine-tuned this skill for me and it has proved to be incredibly useful in my current choice of profession.

Although part of a multi-cultural community, I do not remember being consciously aware of 'difference' being of any concern. We were all externally different in appearance and cultural routines and in these differences there was a sense of similarity and also what seemed to be an unspoken sense of belonging in this diversity. I accepted this way of living as just the way that the world was, until the age of 11 years.

At the end of primary school my siblings and my friends moved to the local co-educational comprehensive school, but I went to a single sex girls' grammar school that became an independent school the year after I joined in 1975. I remember distinctly that I felt as if I had landed on another planet. This transition separated me from my siblings, my friends, and my community - and for the first time, I began to feel different. From then on, I also felt threatened outside the family home, as well as within it.

Externally, I looked the same as 99% of the other girls, but the fact that I claimed free school meals, spoke, and dressed differently (initially in out-dated second-hand uniform) from the majority who seemed to be eloquent, well dressed and considerably affluent, meant that shame became my constant shadow.

I lost confidence quickly and withdrew into myself. Speaking differently from many of my peers was 'kindly' pointed out regularly by teachers. I therefore learnt to keep quiet to avoid attention and ridicule. Furthermore, I was exposed to other young people's home lives that were seemingly without any hostility or violence, and thus very different from my own. I felt lost and isolated. I began to consciously wonder why my family and I were as we were. I also wanted to make sense of why I was treated as I

was, particularly by some teachers and by my mother at home. I recognise now that perhaps part of this quest was because if I could find reasons for understanding general human behaviour like this, then maybe it would not be because there was something intrinsically wrong with me.

My saviour at the time was writing in a private diary, kept hidden and never shared with anyone. I wrote about my home life with the 'Toughs', my school life with the 'Toffs' and about the feelings of being lost in between. In my writing I found a way to express myself without fear of judgement or ridicule. It was as if I had someone to talk to who really cared and it was a written account to read back to myself that seemed to validate my experiences and helped me not to feel so alone. Writing in my diary was a way to express myself safely when I felt myself struggling emotionally, an experience that I now know that others have found to be therapeutic (Gortner, Rude & Pennebaker, 2006).

Those early childhood and teenage years - abuse at home, isolation in school, intense brain and bodily changes without emotional or psychological support from anywhere - were difficult. I feel that it could have been very different if I had had help from somewhere other than my diary. I think that it is no accident that the major part of my work is now in schools and why I feel that it is important that young people have the opportunity and support to express their emotions in a safe and confidential environment, and more importantly, in a way that works for them.

However, even if there had been an adult available then such as a school counsellor, I do wonder if I would have found the courage to access that support face-to-face (f2f), due to the fear of adults that I had at the time. I am now passionate about reaching young people who may benefit from emotional support in as many ways as I can, indirectly as well as directly.

Although my work in schools is already both in (one to one/group therapy) and out (delivering staff and pupil training and workshops, and running pupil clubs based on mental and emotional health topics) of the counselling rooms, the particular research idea that brought me to Metanoia stems from trying to widen the access to school counselling currently available, to reach those who may find f2f support too difficult,

for whatever reasons. Pupils suggested an idea (see section 1.3 below) that would involve using what seemed to me at the time to be an innovative tool in schools-based counselling i.e. technology. This would be to offer counselling online in a variety of ways other than f2f in the school counselling room, such as via text, audio and or video.

It included the concept that counselling support could be provided confidentially via text only, like my diary experience. However, this time it would be with someone trusted who could write back.

1.3   The Professional Context

In 2011, I was leading the Counselling and Coaching Team in a group of schools in Hertfordshire. This was a busy team of eight practitioners providing f2f counselling in a variety of counselling modalities across six school sites with 1900+ pupils. This service supported on average over 150 pupils and 30 staff every year and statistics collected annually were similar to client numbers in other school-based studies (Hill et al., 2011; Cooper 2013; Jackson et al., 2014; Perks, 2016).

As a professional, I have always considered it important to evaluate my work for my own personal curiosity and satisfaction, but more importantly to ensure that students (and other stakeholders) were benefitting. Evaluations of this school-based f2f service thus already included evidenced-based outcome measures such as the Young Persons Clinical Outcomes Routine Evaluation or YP-CORE (Barkham et al., 2006; Twigg et al., 2009; Twigg et al., 2010; Twigg et al., 2016), the Clinical Outcomes Routine Evaluation or CORE-10 (Barkham et al., 2013), and also a Goals Based Outcome measure (Law, 2009 & 2012), but also by asking for verbatim feedback both individually and collectively.

One such student satisfaction pupil evaluation survey (Hennigan, 2011) sent to 50 Sixth Form pupils in 2011 highlighted pupil demand for online counselling support as an adjunct to the current f2f provision. Eight (16%) pupils completed the free text response to the question "How might the school counselling service be improved?" by suggesting that an online form of support from the school-based counselling team might be beneficial. This impetus to develop online counselling resources directly from

clients was later discovered to be supported by research demonstrating that demand for the use of technology in therapy is often initiated by clients (Anthony, 2015)

It was highly unusual for me not to respond immediately with enthusiasm to feedback on how things might be improved, instead I sat with these requests for a year. I recognised that this was mostly about feeling uncomfortable with my perceived lack of technical knowledge and skill, something that I now understand is shared by other practitioners who have only ever worked therapeutically f2f (Hennigan & Goss, 2014; Paterson et al, 2017).

Also, I had strong sense (possibly underpinned by my f2f training and qualifications to date) that counselling was only effective when it was f2f and that something almost sacrosanct was being threatened by technology. Again, I was to later discover that these thoughts about integrating technology into psychotherapeutic work were common (Hennigan & Goss, 2014; Kettunen, Vuorinen & Sampson, 2013). I now believe that this initial scepticism is one of the attributes that have equipped me well for this study (in particular the qualitative aspects), and that from this position of scepticism, I may have been less likely to generate positive bias.

Yet, I was also aware from my training, as well as my past personal experience, of the proven therapeutic benefits of writing (Wright & Chung, 2001; Gortner et al., 2006). I have also always been keen to encourage young people to seek help sooner by making mental health support accessible in a variety of ways (e.g. drop in appointments, group work, co-curricular clubs, workshops etc.).

From the various professional groups of school counsellors that I belonged to, I was also aware that my network of peers from other schools did not seem to have developed such an online resource. I wondered why that might be, especially since technology was now such an important part of the lives of the client group with which we all worked (Livingstone & Bober, 2004; Livingstone et al., 2018), as well as with an increasing number of clients in general (Bundorf et al., 2006).

Furthermore, my statistics over the previous years in this group of schools demonstrated that the overall service use was generally around 40% boys and 60%

girls, and many of these boys were at the younger end of the age spectrum. Although this lower percentage of boys accessing school-based counselling is not unusual (Hill et al., 2011; Cooper, 2013; Jackson et al., 2014), I had tried a variety of ways over the years to find ways to make it easier for boys (and girls) to access counselling. These included having more male counsellors on the team, making counselling rooms gender neutral and having various creative materials (Russo et al., 2006; Trice-Black et al., 2013; Shen, 2017), to work with, such as games, music, using sand trays, art materials etc. I wondered whether online access to support might increase the numbers of boys, as well as girls.

I was also aware that the team was predominantly staffed with white, middle-aged women and often wondered about this lack of diversity. I questioned whether therapy online with someone that you did not face directly could lessen this effect, and also potentially lower the power differential inherent in the school-based 'counsellor-client, adult-child, staff-pupil' dynamic (Besley, 2006; Suler, 2004).

I also recognised that I needed to investigate my own resistance further and that if I were to respond to pupils' requests, I would need more information, support, and guidance to do so. If the online provision development was to go ahead, I wanted to deliver it to an equivalent standard to the current f2f practice in this group of schools, which operated according to the guidelines provided by my professional organisation (BACP, 2002; Anthony & Goss, 2009).

Finally, having completed some tentative explorations into online counselling development (Chester & Glass, 2006; Anthony, Nagel & Goss, 2010) I was keen to develop an online counselling resource for the pupils in the schools in which I was working. However, I also recognised how useful it might be both to my peers and potentially pupils in other schools to present my findings to them in a way that would be useful and more importantly, credible.

1.4   The motivation for the Practice Evaluation Project

I was also motivated by what I discovered at the time (2013/14) to be a relative lack of research into school-based online counselling in UK schools and elsewhere. Outside my immediate professional network, I wanted to find out who was doing what

and where regarding working online with clients (both for administration and/or for therapy) and what thoughts and feelings these UK peers had about development in this area. I wanted to investigate what the potential barriers or motivators for bringing school f2f services online might be, both as a piece of research in itself, but also to inform the development of my own service in a more systematic and positive way.

This research also provided the opportunity to discover if there was sufficient interest in a reported development of a working model of a school-based online counselling facility (alongside f2f provision) in secondary schools, such as the ones that I worked in.

Questioning how I could combine full-time work commitments with the formal research that was required, brought me to the Doctoral Program in Psychotherapy by Professional Works (DPsych) at Metanoia and Middlesex University.

The first part of my doctoral research, the Practice Evaluation Project (PEP), provided me with the opportunity to discover whom, or how many, of my professional peers would be interested to know more about this development. This gave me the chance to ask what they might want to know about online counselling development in schools? What was their current ease with using technology generally? Were they using technology in any way with clients already? What might be their thoughts regarding any future intentions in this area? What might motivate them to work this way (or not) and if they did not feel motivated by the concept, what might be the deterrents and why? I also wanted to know specifically what might be directly useful to them in terms of research in this area.

The PEP (Appendix 2) results presented a very mixed landscape in response to the concept of school-based online counselling development, from the perspectives of UK secondary school therapists (Hennigan & Goss, 2016) and it also gave me a clearer idea of what might be useful to my peers. Participants' responses included indication of a strong desire to understand exactly *if,* or *how*, pupils might utilise a school based counselling service that offered both f2f and online facilities. Participants particularly wanted to know about rate of uptake (including gender differences), any differences in presenting issues and if online school-based counselling was effective.

These questions were responded to in the second, more extensive part of this research i.e. the Final Project (FP), outlined in the following section of this introduction.

Before introducing the FP more fully however, it is worth noting that even though the PEP was originally planned only to be a springboard to the FP, it became a piece of work in its own right, winning the BACP New Researcher of the Year Award in 2015, with a subsequent article published in BACP's Research Journal, Counselling and Psychotherapy Research (Hennigan & Goss, 2015). Results have also been presented as a Paper (BACP Research Conference 2015) and Poster (Society for Psychotherapy Research, 2017); as well as at conferences for other professionals involved with young people e.g. Headteachers (HMC Heads of Sixth Form Conference, Jan 2017), school counsellors (Wellington School, May 2017), parents and the general public (article in the Sunday Times Newspaper, Education Supplement, April 2016), raising awareness of this topic amongst various groups of stakeholders involved in the mental health and wellbeing of young people.

1.5   The Final Project (FP)

This second, major part of my research involved developing a school-based online counselling facility and investigating the responses of the other component of the school counselling dyad – the pupils.

Although the Final Project (FP) flowed directly from the PEP, I also recognised that there was a gap in this area - a perceived lack of my professional peers' knowledge regarding online counselling research and online counselling skills training, that I wished to address. Alongside this FP, I therefore developed an online training program for counsellors working with young people, to equip them to work therapeutically online to the same high standards that they did f2f (see Chapter 9: Professional Products).

In the earliest parts of this research, I recognised that a hesitation of my own in developing an online counselling resource for pupils was that I believed that online therapy could not be as efficacious or ethically practiced, as f2f therapy. As previously noted, consultation with professional peers produced similar responses to this initial

reaction. However explorations into online practice development with young people in the UK (Hanley, 2004, 2006; Bambling et al., 2008; Street, 2013); the ethics of online practice (Goss & Anthony, 2003 & 2009; Suler, 2005); specific training in online therapy such as those at the Online Therapy Institute (OTI) (www.onlinetherapyinstitute.com) and academic research in this general area (Chapter 3: Literature review) all challenged and changed my initial expectations and scepticism.

Because of this exploration, I became excited at the potential that working in this medium seemed to offer for school-based counselling, potentially increasing access to timely support for young people in a way that may be more accessible. However, I also then fully understood that there were several important considerations that required attention.

My principal concerns at this time included my lack of specific training and experience in using this medium for therapy with young people, the legal and ethical issues of working in this way, and finding current working models of good practice from school-based counselling services from which I could learn.

I also recognised that I would need to find a suitable platform, i.e. one that was (as much as possible), a virtual equivalent of the physical school-based f2f counselling room. This needed to be separate from the school electronic platform and young-person friendly, but at the same time it needed to be satisfactory to senior management and the schools' governing body. Essentially, it needed to be a platform that would operate online school-based counselling in line with current school policies and procedures, as did the school-based f2f counselling service.

Counsellors working with young people in UK secondary schools are generally able to offer a high level of confidentiality in f2f settings (Baginsky, 2004). Any communication between the counsellor and client usually takes place in a specific setting within the school buildings (McGinnis & Jenkins, 2006; Pattison et al., 2009, Cooper, 2013), with adherence to school policies and procedures such as sharing information of any risk of serious harm with appropriate school safeguarding personal in a timely manner (Jenkins, 2010). The challenge was thus to find the electronic

equivalent which young people would have confidence in the privacy and confidentiality of, as they did in the physical school-based counselling room.

At the same time, this platform would need to follow best practice guidelines for working therapeutically online (Anthony & Goss, 2009), and adhere to pertinent legislation in the UK i.e. the Data Protection Act (1988). There should also be close attention to wider best practice global legislation, such as the Health Information Portability and Accountability Act (HIPAA, 1996)[1] and the Health Information Technology for Economic and Clinical Health (HITECH) Act (HITECH, 2009)[2].

I found several training providers for online therapy in general e.g. The Online Therapy Institute (OTI), guidance on practice development (Mallen, 2005a; Evans, 2009; Anthony & Nagel, 2010; Anthony et al., 2010) and information about legal and ethical issues in online therapy in general (Mallen et al., 2005a; Nagel & Anthony, 2009; Anthony & Goss, 2009; Anthony et al, 2010). While this information was essential and very useful, there was little that was written specifically with service development for young people in mind, or that related to school-based online therapy.

Research into online therapy with young people in general had already indicated it as a potential way of increasing access (Fenichel et al., 2002, Barnett, 2005) in a less embarrassing or stigmatising way (Lange et al., 2003) for young people. Stigma and embarrassment were reported as some of the main reasons that some young people do not seek f2f therapy in their school setting (National CAMHS review, 2008).

Furthermore, reviewing the resources offered by national organisations to help young people, such as *Childline*, *National Society for the Prevention of Cruelty to Children (NSPCC)*, *Relate*, *Young Minds*, *Barnardo's*, *Mindfull* and *Kooth*, revealed that these organisations were actively engaging in meeting a need for online support for young

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1 The Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, was enacted by the United States Congress on August 21, 1996. Sections 261 through 264 of HIPAA require the Secretary of Health and Human Services to publicize standards for the electronic exchange, privacy, and security of health information

2 The Health Information Technology for Economic and Clinical Health (HITECH) Act, enacted as part of the American Recovery and Reinvestment Act of 2009, was signed into law on February 17, 2009, to promote the adoption and meaningful use of health information technology

people. Some of these organisations were providing access to their bespoke online facilities (www.xenzone.org and www.Mindfull.org) to individual schools for a fee and using their own organisational staff. None of these were using the existing school-based counselling teams. Some research based upon these services was beginning to emerge (Hanley, 2004, 2005, 2009 & 2012), but again, nothing about current practice development or academic research within school-based counselling or psychotherapy services in UK secondary schools.

The existence of these services indicated that therapeutic work with young people was possible, and my PEP gave me insight as to what some of the barriers to school-based practitioners might be. These barriers were possibly preventing development from further, perhaps dramatic, expansion into existing f2f school-based practices, perhaps in particular, lack of practitioner awareness of the growing body of research and information in this area and in skills-based training.

Finally, I appreciated that a benefit of an online service within a school setting would be the potential for individual students to work with a specific therapist in either or both mediums, in a way that would not normally be available if they were using the services of external or national organisations. Research into online therapy as an adjunct to f2f is promising (Yager, 2000; Maheu, 2003; Tate & Zabinski, 2004; Murdoch & Connor-Greene, 2000), but again, as yet limited. I could find no research in this area with regards to young people in UK schools.

Equipped with this research and information, I undertook training in online counselling by completing a Certificate in Cybertherapy with OTI, along with a Certificate in Online Counselling Skills (www.onlinecounsellingtraining.com) with Jane Evans. I found a platform provider (www.plusguidance.com) that was specifically aimed at counsellors, HIPAA and HITECH compliant, young person friendly and aligned with my schools' policies and procedures for safeguarding. An agreement was signed (Appendix 3) in 2015 to work with this provider to produce a bespoke school counselling online service.

From September 2015, pupils in Years 12 and 13 (pupils aged 16-18 years in this group of schools) were offered the opportunity to have counselling from the school-

based counselling team either online, f2f or a combination of both. In September 2016, with an increase in trained online school-based therapists, this service was also extended to pupils from Years 10 and 11 (pupils aged 14-16 years).

The exploration of the use of this service by pupils became the basis of the FP: Online counselling in schools as an additional option to face-to-face provision: Exploration of pupils' experiences and comparison of effectiveness of working in different modalities.

Pupils in these year groups who were referred (or self-referred) for counselling were offered the opportunity to be counselled in the traditional f2f manner, or online via text only i.e. instant messenger or email, or by using audio and/or video tools. Counselling offered was therefore either synchronous (both parties engaged in conversation at the same time), or asynchronous (not necessarily happening at the same time, for example emails that would have some time lag/delay).

The same outcome measures (CORE-10 and GBO) that had been used to evaluate the school based f2f therapeutic work for several years were also now utilised in the online therapeutic work. Thus pre and post counselling scores were recorded as part of the data collected in this study for participants that used online, offline or both mediums. Aside from pre and post counselling outcome measures, data also recorded included service usage (pupil numbers, gender, and year group), choice of medium (f2f, online or a blend of both) and main reporting issues. These results are reported alongside the outcome measure data in Chapter 7. Following completion of the therapeutic work, pupils were also invited to take part in an Internet survey about their thoughts about counselling offline and online in school and some of these survey participants then volunteered to take part in a follow up interview. The flow chart below (Figure 1) gives a concise view of the steps of the FP to aid the reader. Each part of the process in the chart will be more fully explained in terms of planning, ethical considerations etc. in later chapters.

Figure 1   Flowchart to show the steps of the Final Project (FP)
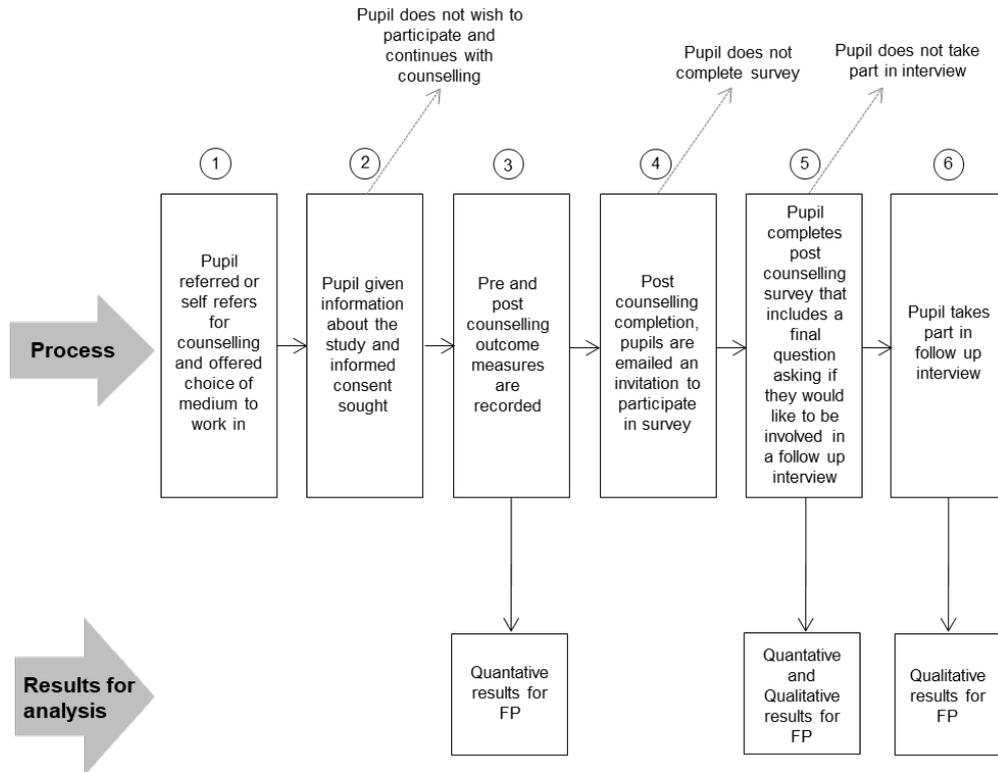
At the time of writing this report in April 2018, the counselling service in this group of schools continues to offer both offline and online counselling (or a blend of both) and has committed to doing so for the foreseeable future (which is another of the main products of this research).

I recognised that I was following the work of other pioneers in this area, and that building an online service for young people was not entirely new. However, I believe that a UK schools-based online service that is an extension of existing school-based f2f services is innovative and I hope to share my experience of building this service with others in a way that may allow them to do likewise. Both the development of the online school counselling service and the online training course developed from this research, may provide significant learning for those that want it.

Chapter 2   Summary of the Practice Evaluation Project

The Practice Evaluation project (PEP): UK Secondary School Therapists' online communication with their clients and future intentions

2.1   Introduction

Following initial explorations into the field of online counselling and psychotherapy with young people outlined in the previous chapter, in early 2014 I carried out my first piece of academic research in this area. This was a practice evaluation project (PEP) entitled 'UK Secondary School Therapists' online communication with their clients and future intentions' (Hennigan & Goss, 2016). This research and ensuing report was based upon an Internet survey targeted at school counsellors and psychotherapists working in UK secondary schools. The aim was to understand the current status of UK secondary school-based counsellors' then current use of online communication in their client work and their thoughts on working therapeutically online in the future.

The survey was designed to give both quantitative (descriptive and statistical analysis) and qualitative (thematic analysis) results. It attempted to take a snapshot of what was happening in terms of any online communication with clients from UK secondary school-based counsellors, as well as attempting to gain insight into practitioners' thoughts, feelings, and experience about potential developments in this area.

A full account of this study is given in (Appendix 3). However, a brief outline of this research and its results are given in this chapter, as the PEP was not only a practice project, but also a springboard to the FP. This account begins with a summary of the design and methodology involved, followed by description of the analyses, a summary of quantitative and qualitative results and a discussion of these in the context of current literature and research. An explanation is then given at the end of this chapter, indicating how this project relates to the main Final Project (FP).

2.2   Design and methodology

The study involved a pluralist, mixed methods design (Goss & Mearns, 1997; Cresswell, 2003; Cresswell & Plano-Clark, 2007), combining quantitative and qualitative (thematic) analyses. This design utilised the differences between the

natures of these approaches, as positive opportunities to gather the most detailed understanding possible. Mixed methods were also employed in the FP and the rationale behind these decisions will be further expanded in the design and methodology chapter (Chapter 4).

An Internet survey was chosen, as this is a fast, low cost method to gather information from a potentially large, widespread population (Pearce, 2002; Fricker & Schonlau, 2002; Axinn & Pearce, 2006; Babbie, 2007), as in the case UK secondary school counsellors and therapists. As there is no national register of UK school secondary counsellors readily available, the survey invitation was sent to a convenience sample compiled from a variety of sources, such as a list of attendees at the annual King Alfred's School counsellors conference in Oxford; a call for participants via the British Association of Counsellors and Psychotherapists Children & Young Peoples Practitioners Research Network (BACP CYP PRN) and through an advert placed in Therapeutic Innovations in Light of Technology (TILT) magazine. The main source however was from a publicly available list of Head Teachers from the Department of Education in March 2014, through the Freedom of Information Act, 2000 (available at: http://whatdotheyknow.com/request/contact_details_for_head_teacher).

As the specific target population was those providing therapeutic services within UK secondary academic institutions and the majority of invitations were addressed to the Head Teacher, the survey relied upon an individual receiving the initial request forwarding it to the correct person i.e. the school counsellor or therapist. The survey invitation (PEP Appendix 1) was thus designed to take this into consideration, using careful phrasing of both the invitation and survey questions and by sending reminders to increase participation.

The survey was pre-tested with a group of professional peers, asking them to consider whether the wording and format measured what they aimed to - acting, as De Vaus describes, as a "panel of judges" (2014, p.52). Before final release, the survey was also sent to a small number of peers not involved in the research to test, refine and ensure readability and ease of completion, and check against double entry as a final quality control mechanism to support construct validity.

The research questions that the study set out to address were:

- To what extent were UK school therapists using online communication* with their clients?
- What were the main motivators and/or barriers for those wishing to work therapeutically online in the future?
- What might be useful in terms of research or training in this area for school counsellors and/or the institutions in which they work?

(*Online communication was defined here as audio/video or text based synchronous and/or asynchronous communication used in isolation from, or in conjunction with, therapeutic work).

The survey asked UK secondary school counsellors' fourteen questions. Seven of these tested for sample representation such as school type, pupil age range and gender, professional status, qualifications, and memberships, age, and gender. These were to be compared with data provided by the BACP with regards to membership breakdown as of July 2014, and with data from a school counsellor survey from the Welsh Government's Social Research Report (Hill et al., 2011).

Two further questions asked about the current use and/or comfort with online communication; and five questions asked the participants for their thoughts, feelings and/or experiences about development in this. The earlier demographic questions in the survey were also used to test for correlations with later questions.

I was aware that response rates are often lower than anticipated for survey research (Witmer, Colman & Katzman, 1999), but also that as a researcher there were ways in which I could improve them (Fink, 2013). Thus, various strategies were employed (Wansink et al, 2003; De Vaus, 2004; Bradburn et al., 2004; Boynton & Greenhalgh, 2004; Dilman, 2006; Naithani, 2012; Póitorak & Kowalski, 2013) to ensure maximum success (Appendix 8).

A stakeholder analysis (PEP Appendix 7) was carried out prior to embarking upon this research, with consideration of risks and management of those risks to an acceptable level for the research to proceed. Each participant involved was given information

about the study in the introductory email (PEP Appendix 3). This indicated what was being asked of them, how any responses would be encrypted, stored, and processed, and included clear signposting of where to take any concerns throughout their involvement.

This information was repeated immediately before taking the surveys (PEP Appendix 4), in case of a time lapse between reading the introductory email and taking the survey. A final reminder of this information was given in the de-brief email (PEP Appendix 5) sent to participants post survey. A notification of the research was lodged with The Information Commissioner Office (ICO) to clarify current Data Protection requirements, and to comply with current legislation regarding unsolicited 'spam' emails. Ethical approval for this research was received from the Metanoia Ethics committee and in accordance with the following frameworks:

- BACP Ethical Guidelines for researching Counselling and Psychotherapy (2004)
- British Psychological Society's Ethics Guidelines for Internet-Mediated research (2013)

2.3   Analysis

Quantitative analysis of responses to thirteen questions provided a basis for both descriptive and statistical analysis using SurveyMonkey © software and with SPSS Version 21 using Chi-square tests for independence. Qualitative analysis of the remaining question provided data for a thematic analysis. Results were collated, and tabulated and initial points of interest were noted. Thematic analysis was carried out according to the guidelines proposed by Braun and Clarke (2006). The survey software also provided analysis of frequency of the most common words from the answers given, which was used to aid formulation of 'categories'. From these a set of themes or recurring patterns (McLeod, 2011) was established and organised into major and sub themes.

The data was analysed separately using the same process by a DPsych peer, as collaborative analysis (Gallagher, 2008; Gershon, 2009; Phillips et al, 2013) provided valuable quality control (Styles, 1993).

The study aimed to take a snapshot in March 2014 of the status of online communication between UK secondary school-based therapists' and their clients and their thoughts about potential development in this area. The results were therefore considered within the stated period of the research, with full acknowledgement that this was, and still is, a rapidly changing landscape.

2.4 Results

3753 schools were targeted, of which *n*=246 responded. Based upon an estimate that between 61-80% UK schools have counsellors (Cooper, 2013), the potential response rate was estimated at between *n*=2289 and *n*=3002 schools. The actual response rate was therefore between 8% and 11%.

The sample that responded to the survey was discovered to be representative of UK school counsellors in several ways:

- With regards to type of institution that they were working in, 18% (n=44) of the respondents of this survey were from independent schools. This compares positively to the Department of Education Statistical First Release (2012) which states that 19% (n=790) of the UK's schools are independent schools

- The majority of respondents to this survey were female (84%, n=206) BACP members (72%, n=177), who stated their profession as 'school counsellor' (68%, n=167) and were aged 45-54 years (38%, n=93), from co-educational state schools (62%, n=152), and qualified to a minimum Diploma level in Counselling (42%, n=103). This compares positively with the results of three other reputable data sources (BACP membership 2014, Welsh School based Counselling Strategy 2011* and the BACP School Counselling Practice Based Network**) regarding UK school counsellors, as shown in Table 1 the table below.

Table 1   Percentages in PEP survey sample compared to general BACP
membership and Welsh School Counsellors Survey (2011)

Survey	Female	Age range	BACP members	Diploma / Post Grad Diploma
PEP	84%	35-64 (88%)	72%	52%
Welsh School Counsellors*	84%	30-59 (78%)	77%	61%
BACP**	84%	30-59 (71%)	100%	Not available
BACP SCoPRNet**	94%	30-59 (90%)	100%	47%

*Data retrieved from Hill et al., 2011: Evaluation of the Welsh school-based counselling strategy.
**BACP membership and BACP SCoPRNet (BACP Children and Young People School based Counselling Research Network as of 2013, now known as Practice Research Network, PRN). Information sourced from BACP Research Office July 2014

48% (n=118) of respondents reported having no online communication with their clients in any way. 41% (n=100) of respondents stated that they used email or other online means for administration purposes with their clients. Of the 9% (n=23 respondents) who suggested that they were using technology for counselling other than administration, the majority (n=17) suggested that they used texting as well as email therapeutically with their clients during term time and for counselling support during school holidays.

With regard to comfort in using technology (as shown in Figure 2 below), 37% (n=91) of respondents selected '*not applicable'* in answer to this question. This may be accounted for by the 48% (n=118) of the sample that claimed to have no current communication online with their clients. Of the remaining 63% (n=155), only 7% (n=17) felt '*Not at all*' comfortable with their current use of technology with pupils and the remaining 56% (n=138) ranged in comfort from '*Fairly*' to '*Very*' comfortable, with the majority of respondents in the '*Mostly*' (18%, n=44) and '*Very*' (17%, n=42) categories.

Figure 2   School counsellors current comfort with technology and communication
with pupils

Q11 **To what extent do you feel comfortable with your current use of online communication with pupils, in terms of confidentiality, ethics, accountability etc?**

Answered: 246   Skipped: 0
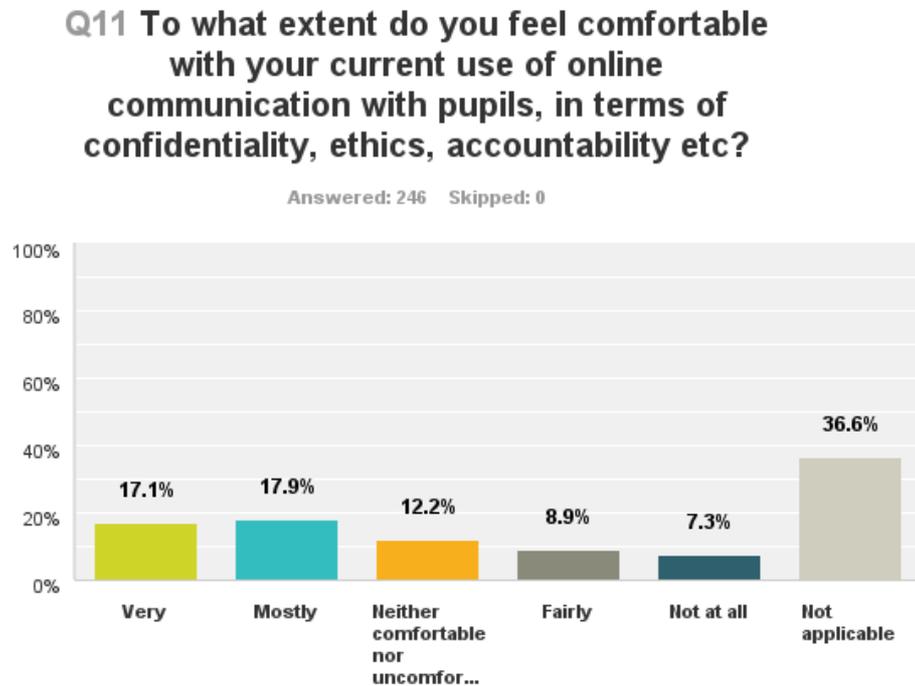
The results of the earlier demographic questions were tested for correlations within the respondents' answers regarding '*comfort with technology*', '*opportunity to provide therapy online*' and '*what type of institution do you work in*'. These were analysed using SPSS 21 software and Chi-square for independence tests. Cross tabulation of the categories indicated that two of the correlated variables were statistically significant at the <0.05 level. This indicated a small but significant association between '*Is there an opportunity to provide online counselling in your institution?*' and '*What type of institution do you work in?*'

Table 2   Chi square result to show association between 'Is there an opportunity to provide online counselling in your institution' and 'What type of institution do you work in'

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	33.06[a]	20	.03
Likelihood Ratio	35.47	20	.02
Linear-by-Linear Association	3.87	1	.05
N of Valid Cases	246		

[a] 17 cells have expected count less than 5. The minimum expected count is .14

x^2 (I, n=246) = 33.01, p = 0.03.

Many of the state school categories had lower than expected values, whereas independent schools (and colleges) had higher than expected values, suggesting that they have more of an opportunity to offer online counselling than state funded institutions. This is likely to be because independent schools generally have access to greater financial resources.

There was also a small but significant relationship, between '*Is there an opportunity to provide online counselling in your institution?*' and '*To what extent do you feel comfortable with your current use of online communication with pupils, in terms of confidentiality, ethics, accountability etc.?*' as shown in Table 3 below.

Table 3   Chi-Square result to show association between ''Is there an opportunity to provide online counselling in your institution?' and 'To what extent do you feel comfortable with your current use of online communication with pupils, in terms of confidentiality, ethics, accountability etc.?'

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	28.37[a]	10	.002
Likelihood Ratio	32.36	10	.00
Linear-by-Linear Association	10.13	1	.00
N of Valid Cases	246		

x^2 (I, n=246) = 28.3, p = 0.0005.

One explanation for this relationship is that participants who were reasonably comfortable with online communication with their clients were more likely to be positive about the opportunity to provide online counselling within their institutions, compared to those who were less comfortable with their current online communication with pupils. However, it is important to note that although these results suggest a relationship between these variables, it is possible that there are other reasons for these associations than those suggested here.

Regarding what might deter school counsellors from working therapeutically online, the results are shown in Figure 3 below. (Please note that respondents were given the option of selecting three options to this question, thus the totals are greater than 100%).

Figure 3   Main deterrents from offering school-based counselling online

Q12 **What do you believe may be three main deterrents from offering online counselling/psychotherapy in your institution? Please choose from this list:**

Answered: 246   Skipped: 0

Category	%
Lack of technical or...	8.9%
Lack of own technical skill	6.5%
Lack of conviction o...	12.6%
Issues around Confidentiality	43.5%
Concern of risk of clie...	28.0%
Miscommunication	28.9%
Accountability of written...	9.3%
Lack of specific...	19.9%
Lack of boundaries	18.7%
Quality of therapeutic...	61.4%
Impact of absence of b...	36.6%
Ethos of practitioner...	13.0%
Nothing	4.5%
Other (please specify)	8.1%

*Chart labels: Lack of technical or other resources/ lack of own technical skill/ lack of conviction of effective results/ issues around confidentiality/ concern of risks of clients requiring urgent help/ miscommunication/ accountability of written communication/ lack of specific training in medium/ lack of boundaries/ quality of therapeutic relationship/ impact of absence of body language/ ethos of practitioner or institution/ nothing

The main deterrents were '*Impact upon the therapeutic relationship'* (61%, n=150) and '*Issues around confidentiality'* (44%, n=108), followed closely by '*Impact of the absence of body language cues*" (37%, n=91). The '*risk of potential for miscommunication'* (29%, n=71) and '*risk of clients requiring urgent help'* (28%, n=69) were also a concern of more than a quarter of respondents.

Many of these issues have been addressed in research and literature (Chapter 3: Literature review) and increasing options for online counselling training could allay these fears. Yet this research and information did not seem to have reached this group in sufficient numbers at the time of the survey (2014). Even now in 2018 there is no specific training for school counsellors to work online with pupils in schools, which prompted the development of one of the main products from this research (Chapter 9: Products).

Regarding motivators to consider school-based online counselling, two options achieved a significant majority, as shown in Figure 4 below. The two main motivators were:

- Evidence of reaching pupils that may have psychological barriers to accessing face-to-face help (76%, n=185 respondents)
- Evidence of demand from pupils that it would make accessing the service easier for them (69%, n=167 respondents)

These were followed by: '*Specific online training for school counsellors' (30%, n=73*); '*Evidenced efficacy'* (29%, n=72) and '*practice-based research in schools' (24%).* Of the remaining options available, each was selected by 10% or more participants, except for the response with the lowest number of responses i.e. '*financial reward'* (4%, n= 10). Within the '*Other'* category, respondents reported further potential motivators such as; '*room space saving'*; '*potential appeal to boys'*; '*convenience for counsellor* e.g. *travel abroad';* having a '*holding' function*; '*being able to support absent students'* and '*increase session availability'*.

Figure 4   Main motivators for online school-based counselling

Q9 What do you believe may be the main motivators for school counsellors/psychotherapists to work therapeutically online with pupils? Please choose 3 from the list below.

Answered: 246   Skipped: 0

Category	Percentage
Evidence of demand from...	69.1%
Evidenced efficacy of...	29.3%
Practice based research in...	24.0%
Availability of specific...	29.7%
Availability of technical...	23.2%
Financial reward	4.1%
Efficacy of cost...	18.3%
Evidence of reaching pup...	76.0%
Nothing	16.7%
Other (please specify)	9.8%

*Chart labels: Evidence of demand from pupils that it would make accessing the service easier for them/ evidence of efficacy of email or other online counselling or psychotherapy/ practice based research in schools comparing online and f2f therapy/ availability of specific training for school counsellors/ availability of technical support and equipment/ financial reward/ efficacy of cost effectiveness/ evidence of reaching pupils that have psychological barriers to accessing f2f help/ nothing/ other – please specify

In each of these questions there was also a free text option i.e. '*Other, please specify'* for participants to suggest their own responses. These free text results present a varied landscape of responses, ranging from what could be interpreted as quite resistant:

> Young people already spend enough time plugged onto devices of all sorts. It is good to be able to provide them with the experience of good old-fashioned face-to-face direct communication. (Respondent 160)

However, there were also comments that suggested active engagement and enthusiasm:

> I work in a geographically spread area of the country: face-time facilitates availability and provides greater access for children. (Respondent 2)

It is also worth noting that 16% (n=39) of respondents chose '*nothing*' in answer to what might motivate them to consider working in this way. This is similar to a previous report (Othman, 2000), which suggests that some school counsellors are not ready, or not prepared to use the Internet for therapeutic work. It is also very consistent with the Glasheen et al., (2013) study, which reported that 15% of school-based counsellors were not ready to consider working therapeutically online.

Yet these results also indicated that a significant majority (52%, n=128), were already using online contact for other aspects of communication with their clients, such as administration purposes, setting up appointments etc. and 98 participants (40%) expressed interest in being involved in future research in this area, demonstrating a level of positive interest.

I was pleased to see that a quarter of participants 24% (n=59) could be motivated to consider working therapeutically online by practice-based research in schools; and that 30% (n=73) felt that the availability of specific training for working online in schools would motivate them. These results further fuelled the desire to build and research the online service within my own group of schools, and the development of a bespoke online training course for qualified counsellors to work therapeutically online with young people. This is being trialled currently and is due to be launched officially in July 2018.

The quantitative findings above are in accordance with similar research in this area in Australian schools (Glasheen & Campbell, 2009; 2012) which suggests that there are mixed feelings regarding providing counselling for young people online from school counsellors and therapists.

The responses to Question 13: *"What training/research may be useful to you or your institution in terms of development of online counselling or therapy? Please specify",* indicated some interest and enthusiasm for developing online counselling in schools, along with suggestions for what was needed or might be useful to school counsellors.

54% (n=133) respondents answered this question, 113 respondents omitted it. Thematic analysis was applied to the 133 responses. Thematic analysis was the chosen method as it is a commonly used process employed by research-clinicians (Taylor & Brogden, 1984) to analyse textual accounts. Thematic analysis is generally used to treat 'accounts' as a resource to learn more about the reality or experiences to which they refer. From the answers given, themes emerged, identified by: 'Bringing together components or fragments of ideas or experiences, which often are meaningless when viewed alone' (Leininger, 1985, p. 60).

Initial 'points of interest' or 'themes' were identified and noted on individual responses. Examples of several text extracts from each of these themes are given in the full PEP report (PEP Appendix 9).

The initial themes were clustered, and further developed into Meta themes that were considered relevant to the question '*What might be useful to school counsellors/therapists in the development of online working in schools?'*. The three principle themes that emerged from the results of the thematic analysis, as to what might be required for further development, were:

1. 'School therapist specific' needs
2. 'Practical' needs
3. 'Knowledge / evidence re online therapy in general' needs

The numbers of responses of each of the Meta and Sub themes discovered are illustrated in Figure 5 below with brief examples of each given in Table 4.

Figure 5   Meta and Sub Themes
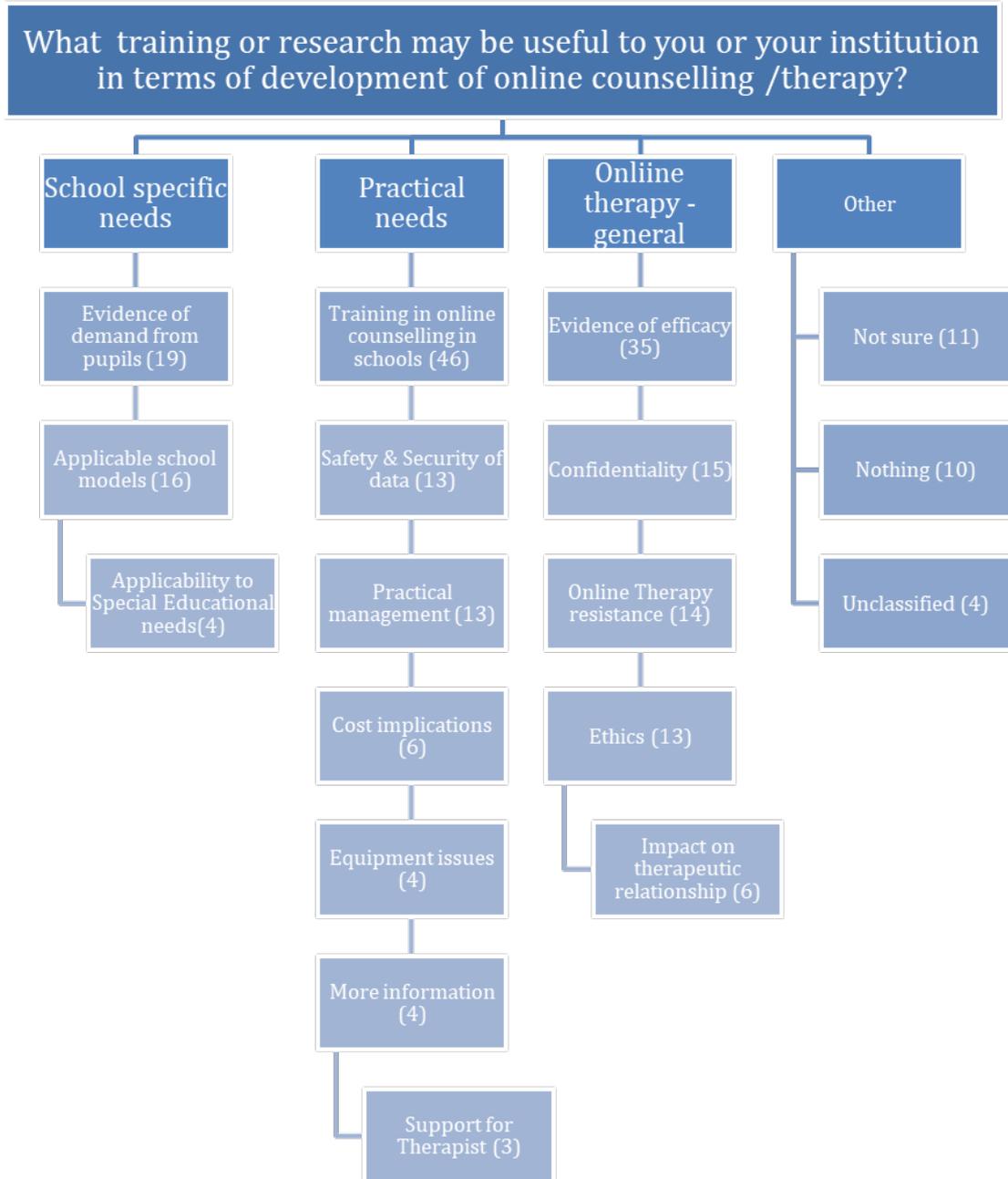
Table 4   Meta and sub theme frequencies with example extracts

Theme Category	Freq.	Example transcript (participant number)
1. School specific needs		
Evidence of demand from pupils	19	*"I would want to know that there are students who would like on-line counselling"* (201)
Applicable school models	16	*"Evidence of successful on-line service at a similar type of school to our own"* (180)
Applicability to pupils with special educational needs	4	*"Currently I am unaware of any online support material, or therapy systems that could be utilised with students with a special educational need and therefore would need to research the appropriateness of the online interventions offered'.* (192)
2. Practical Needs		
Training in online counselling in schools	46	*"I would need quite a lot of training around using the technology as well as pointers on how to translate counselling a face-to-face experience into an online one".* (4)
Safety and security of data	13	*"Research re confidentiality issues and the protection of the counsellor in terms of what they write in response to the client. The school is worried about parent come back about what the therapist says to the client online. Writing leaves the therapist open to accusation by parents and the school is worried about that"* (51)
Practical management	13	*"Establishing an online counselling service for schools"* (168)
Cost implications	6	*"Evidence to enable my agency to seek grants to enable us to justify the expenditure on the provision of online counselling within our catchment area".* (74)
Equipment issues	4	*"Sufficient access to equipment and time to develop the strategy".* (191)
More information	4	*"We have not looked at this idea so would be interested in find out more"* (157)
Support for therapist	3	*"support for the counsellor"* (173)
3. Online therapy – General		
Evidence of efficacy	35	*"Research to prove the efficacy of online therapy"* (130)
Confidentiality	15	*"I believe only very basic advice can be offered via email/on-line chat, such as: availability of the support, ways of contacting us, etc. I would not trust online counselling/therapy otherwise. I would have to see specific publications, accepted by the regulating bodies, showing that it would be a safe and confidential practice".* (207)

Online therapy resistance	14	*"I do not see the advantages of offering online counselling within the hours that I work. There is perhaps too much emphasis on online activity (teaching, social life, shopping etc.) that the quality of a real time, face to face relationship is of great importance"* (139)
Ethics	13	*"The ethics of working online, how prevent any such communication going viral, and how to manage this way of working with parents"* (43)
Impact on therapeutic relationship	6	*"Talking to adolescents face to face. How does it affect the relationship over a virtual medium and what about the accountability/boundaries"* (110)

As demonstrated in the following literature review (Chapter 3), many of the issues raised in the 'online therapy in general' theme are already being addressed in research and literature, alongside a growing database of information on various aspects of working therapeutically online, and general training for this modality. Training is particularly important as virtual relationships are considered to be different from f2f relationships in many ways (Suler, 2000; 2004; 2005; 2016) and regarding them as similar can be misguided (Anthony, 2000; 2014).

However, as previously mentioned, the research base for this particular client population is small, and what information there is may not be reaching a significant enough majority. Even with a growing evidence base, UK school counsellors seem slow to respond or reticent to bring it into their work with their clients.

Regarding the theme 'Practical needs', online counselling training and support is becoming more widely available, but again these trainings are not specific to school therapists, nor what might be particularly useful and attractive to this professional group. Other issues under this theme were 'cost' and 'equipment implications'. These could however be set against room cost such as heating, lighting, and upkeep and travel costs.

Finally, within the theme of 'school therapists' specific needs' the largest category (n=19) was 'evidence of demand from pupils'. This was reinforced by the quantitative results from the earlier part of the survey, where a large majority of the PEP respondents considered both '*Evidence of reaching pupils that have psychological barriers to accessing f2f help' (76'%, n=187)* and '*Evidence from pupils that it would*

make accessing the service easier for them' (69%, n= 170) as strong motivators for working in this way in schools. This finding, and the fact that my professional peers (n=16 from the thematic analysis) expressed a desire to see demonstrable working models of schools-based online counselling, became strong motivators for the FP.

One final point of interest to note with regards to these results is regarding Special Education Needs (SEN) schools. Some respondents (n=4) felt that the online medium may not be conducive to working with those with different needs. However, there are several ways of working therapeutically online (Waddington et al., 2015; Malinverni, 2017), other than predominantly text based (the main area of this study). Working virtually may be helpful for this group, for example using voice only, sound, pictures or avatars (Rijn et al., 2018). However, this area was not a main focus of this research.

2.5   Discussion

The results of this study appear to present a varied landscape of UK school counsellors and therapists responses. These range from voiced resistance:

> Our clients seem to have no problem with seeing us face to face. The time spent in training/using online counselling could be better used in actually seeing clients. (Participant 34)

To a more enthusiastic perspective:

> I feel it may be more in tune with the world of the young person today. Also, I feel there is a lot of misleading content that does damage to young people online, so it would be nice to have something that benefits them. I feel it is possibly the future of young person-centred counselling. (Participant 35)

As almost 50% of the respondents had no online communication with their clients at that time and 16% (n=39) chose 'nothing' as an option for what might motivate them to consider working therapeutically online, these results seemed in particular accordance with the similar study investigating this area with Australian school counsellors (Glasheen et al., 2013). This school-based counsellor's focus groups research proposed six broad themes that may potentially lie behind this reluctance:

1.   Suspicion/ comfort with technology and the 'virtual world'

2. Lack of online counselling skills (including lack of non-verbal cues to establish rapport)
3. Lack of boundaries
4. Fear of litigation, accountability, risk
5. Efficacy of online counselling within a school setting
6. Access to technology in a school setting for counsellor and/or student

These fit well under the main themes suggested by the PEP thematic analysis results:
1. School therapists' specific needs (corresponding to 2 and 5 above),
2. Practical needs (corresponding to 6)
3. Online therapy in general (corresponding to 1, 4 and 5).

As previously stated, it is clear that some of this reluctance may be due to research evidence or training information not reaching this group. However, there may also be other reasons behind this surprisingly slow uptake and research is now emerging (Glasheen et al., 2017) suggesting that views of other stakeholders (such as schools Principals or Head Teachers) may be an influence. This will be expanded upon in the discussion chapter (Chapter 8).

However, there is growing evidence that young people are already accessing online counselling services online in the UK, such as those provided by http://www.kooth.com/ and www.emotionbh.org.uk. This may in part be due to those aged 11-18 years being 'digital natives' (Prensky, 2001), i.e. more likely to have been exposed to, and interacting with, digital technology and digital relationships from an early age and perhaps therefore more inclined to seek support on the Internet than the generations before them.

Kids Help Line, an Australian online mental health resource for young people, reports that if online help had not been available, many young people would not have sought help at all (Kids Help Line, 2003). The total number of online sessions for this organisation has doubled since 2009 with the service seeing an increase of 3500 online counselling sessions in 2013 as compared to 2012 - a total of 72,416 online counselling sessions in 2013 (Kids Help Line, 2013).

However, Australian school counselling seems to have been in a similar place to the UK in 2014 (Campbell, 2004). However, Professor Campbell suggests that:

> Although we need to advance with care, with a good research base, to do nothing is to avoid a potentially useful tool. Young people are already accessing the Internet, changing the ways that they communicate, so school counsellors need to change with them. The new technologies are providing exciting possibilities to complement face-to-face counselling to provide more options for helping young people. (Campbell, 2004, p.138).

Although the response rate to the PEP survey was relatively low and the study could not substantiate any general conclusions, the results were published (Hennigan & Goss, 2016) in a peer-reviewed journal (BACP Counselling and Psychotherapy Research, September 2016). Since a large percentage of UK school counsellors are members of BACP (Hill et al., Cooper, 2013; Hennigan & Goss, 2016), it was hoped that members of the professional community to which it was particularly pertinent, would read it. The PEP also provided significant impetus for further, more detailed research in this area, and this is fully reported in the remaining chapters of this FP.

Apart from the small sample size limiting reliability and generalisability of the study, other limitations were acknowledged. These are more fully explored in the complete report (Appendix 3), but in summary included the non-probability sampling approach; better question designs that may include Likert scales and using free text options, which may lessen the impact of suggested categories on leading participants.

However, since a significant number of PEP respondents might be interested to work therapeutically online (99 respondents gave their email addresses asking to be contacted with further information) if there was evidence that clients would use these services, was particularly motivating to me. It correlated with the unprompted requests from my own service satisfaction pupil survey in 2011. As mentioned in Chapter 1, this had been the very reason that I had embarked upon research into this area in the first instance.

Thus the next stage of this research was to bring the schools-based counselling services online, as an adjunct to the f2f provision, then to research the outcomes of clients' usage and experience and share the findings with interested parties.

2.6   Linking the PEP to the Final Project (FP)

One intention for the Final project (FP) was therefore to answer some of the questions posed by my professional peers. The documenting of the development of this service from beginning to end could then include a discussion of practical management (including cost, equipment, safety, and security issues), as well as information about service demand and usage. The other significant intention was to use research of this developed model to give a voice to pupils' thoughts, feelings, and experiences of receiving online therapy, as an additional option in school-based counselling services.

The FP therefore followed a tri-partite project plan:

1. Recording development and usage of a new online counselling platform for secondary school pupils as an additional option to the previously established f2f provision. Aspects of service development recorded included consideration of ethical and legal aspects of counselling young people online in schools, as well as practical aspects of integration, including the use of technology from practitioner, researcher, and clients' perspectives. The service usage recorded included a quantitative analysis by pupils' school year and gender, with quantitative and qualitative analysis of one to one therapy in different mediums: f2f only or online therapy. Analysis included comparison of outcome data, using the same outcome measures that were already being used by the schools-based f2f counselling team i.e. Clinical Outcomes Routine Evaluation measure, the CORE-10 (Connell & Barkham, 2007; Gray & Mellor-Clark, 2007; Barkham et al., 2013) and a Goals Based Outcome or GBO measure (Law, 2009 & 2012).

2. A self-designed client experience Internet survey questionnaire was administered to participants at the end of therapy, to gain insight into clients' thoughts, feelings, and experiences regarding their choice of mode of therapy delivery.

3. One question in this online survey invited the respondent to take part in a semi-structured interview with the researcher, if participants wished to further

expand upon their responses. Transcripts of these interviews then provided the basis for qualitative analysis.

This research thus constituted a study that followed a patient-preference design, based on a pluralist methodology (Chapter 4) to record comparative outcomes and simultaneously investigate experience.

The next chapter outlines the literature review that was undertaken before, during and after the research was carried out. A chapter on the research design and methodology follows (Chapter 4), then ethical considerations are discussed (Chapter 5). An account of the development of the school-based online service is given in Chapter 6, which includes a discussion of the practicalities required to blend this resource into an existing school-based f2f counselling service, with discussion of some of the ethical and legal issues that are involved. The results of the research from use of this school-based f2f and online counselling service over two years is provided in Chapter 7, followed by a discussion of these results in Chapter 8 and resulting products in Chapter 9.

Chapter 3 Literature Review

This project specifically concerns the mental health of young people in UK secondary schools between the ages of 11-18 years, and the delivery of school-based counselling services with respect to the development of school-based online counselling. The literature review therefore covers the following areas:

This literature review is intended as an indicative sampling of the current literature available in each of the areas listed above, as of April 2018. I consider this to be reasonably thorough (see Appendix? for databases and search terms used) and have included a hand search of various journals and grey literature.

When using the phrase 'mental health' it is generally accepted that this is referring to mental health problems rather than positive mental thriving (Jahoda, 1958), as compared to the opposite for the phrase 'physical health'. In this report, descriptions of mental health will be defined as such and refer predominantly to young people in the UK aged between 11-18years.

3.1   The mental health and wellbeing of young people and the role of schools

In the UK, as in other parts of the world, a focus on physical health and social care has led to people living progressively longer (Christensen, 2009) and physically healthier lives. However, the same cannot be said for mental health, with research indicating that only 13% of the UK population have high levels of positive mental health (Mental Health Foundation, 2017), and the majority reporting times when they felt mentally unwell. Furthermore, although many developed countries have experienced rising wealth, there is also widening income inequality (Organisation for

Economic Cooperation and Development, 2011) both of which may be related to mental health problems (Langton et al., 2011; Luthar & Barkin, 2012). Although many young people have families that are economically in a better place than their equivalents from previous decades, the wellbeing of many of these young people has not improved (Luthar & Barkin, 2012; UNICEF, 2013).

A variety of other social and cultural areas have been considered as contributing to the number of young people with mental health issues, for example parental mental health problems (Fatori et al., 2013) or increasing academic pressure (Sweeting et al., 2010). There is also a suggestion that young people today are more narcissistic than previous generations (Twenge et al., 2009, Trzesniewski & Donnellan, 2010), although this is debated as being a developmental issue, rather than specific to this generation (Roberts et al., 2010).

With reference to the research area of this thesis, there is also a rising concern that technology and increasing exposure to screen time is impacting the mental health of young people (Carli et al., 2014). Research however suggests that screen time in itself may not be the problem (Livingstone, 2017), but rather that problems arise due to 'screen context' (where, when and how digital media are accessed), 'screen content' (what is being watched or used), or 'screen connections' (whether and how relationships are facilitated or impeded) (Blum-Ross & Livingstone, 2016. p.4). Furthermore, current estimates are that internet use accounts for less than 1% of subjective estimates of wellbeing (Huang, 2010) and there is currently no evidence from neuroscience studies that *typical* Internet use harms the adolescent brain (Mills, 2014).

However, the YoungMinds 2016 report *Resilience for the Digital World* indicates that:

> The concept of digital skills extends beyond technical knowledge, with implications for children and young people's social and emotional development. Increased time spent online means that children and young people are routinely presented with moral and ethical choices and take responsibility for their own social conduct (p.8).

Furthermore, the Children's Commissioner argues in the 2017 report *Growing Up Digital* that 'at the moment, children are not being equipped with adequate skills to negotiate their lives online' (Afia et al., 2017, p.3) and calls for an approach that

teaches young people to be resilient, informed and empowered in the digital world. Schools could be in a unique position to be able to respond to this plea, and the schools where this thesis' research is based have begun to address this (Knight & Hennigan, 2018). This will be expanded upon later in this chapter.

Previous research (Green et al., 2004) has suggested that one in every ten children and young people has a diagnosable mental health disorder, rising to one in five young adults up to the age of 25 years (Kessler et al., 2005; McGorry et al., 2007). Research also indicates that over half of all mental ill health in adulthood begins before the age of 14 years (HM Government, 2011). By the age of 18 years, 75% of later adult mental illness has begun (Murphy & Fonagy, 2012).

There is a direct personal cost to every individual child or young person that suffers mental health issues, but there is also a cost to families and carers, and a high cost to the UK economy in general. In 2011, it was suggested that these costs amounted to £105 billion annually in England alone, roughly the cost of the entire NHS (NHS England, 2011). It is indicated that the life chances of individuals with mental health issues can be considerably impacted in terms of their physical health, educational achievements, work prospects, their chances of being involved in the criminal justice system and their longevity (Murphy & Fonagy, 2012; Goodman, Joyce & Smith, 2011).

Over the course of their education, young people spend over 7000 hours (Burgess, 2013) at school. This amount of time offers a real opportunity for schools to promote good mental and emotional wellbeing and identify and respond to early difficulties. Research suggests that in an average class of 30 pupils, three pupils could have a mental health disorder (Green et al, 2004), ten pupils are likely to have parents who have separated (Faulkner, 2011), and one in ten could have experienced the death of a parent (Langford et al, 2014). Additionally, seven pupils in every class are likely to have been bullied (Langford et al, 2014), and six may be self-harming (Brooks et al., 2015).

It is perhaps commonly assumed that children and young people who feel safe and loved, have strong attachments to others, feel good about themselves and who are optimistic about their futures will thrive and adapt to life's challenges. However,

government research has indicated that some of these young people, whom many may consider to be privileged, are now succumbing to clinically significant mental and emotional health issues in greater numbers than ever before (Lessof et al., 2016).

In recent years there have been several key contributions to government policies for young people's mental health, with a focus on the role of schools in this provision. Over ten years ago, the Children's Plan (Foresight Mental Capital and Well Being Project, 2008) signalled a new role for the 21st century school as a vital community resource with increased accountability and duty to promote wellbeing.

Since that time, further government initiatives have focused upon the role of schools (and other organisations) in supporting the emotional and mental health of young people (Future in Mind, 2015; NHS England, 2015; Five Year Forward View for Mental Health, 2016; Frith, 2016; Department of Health & Department for Education's Children and Young People's Green Paper, 2017), highlighting a greater focus upon early intervention, increasing access and reducing stigma.

There have also been increasing calls in national proposals and policies (NICE 2008, 2009; Lavis & Robson, 2015; Weare, 2015) for primary and secondary schools to adopt a wider range of approaches to promote a whole school approach to the social and emotional wellbeing of pupils. This moves beyond teaching and learning to pervade all aspects of the life of a school (Weare, 2015) and has been found to be effective in bringing about and sustaining health benefits. An example of a wellbeing strategy proposal written in response to this (Hennigan, 2017) and currently being implemented by the group of schools involved in this research is included in the appendices (Appendix 5). This holistic wellbeing strategy proposal includes a discussion of the importance of helping young people learn to thrive in the modern digital world, by informed use of technology including the use of technology for therapeutic benefit.

Building upon the move for schools to develop a more holistic approach to pupil wellbeing, the 2015 report of the Children and Young People's Mental Health and Wellbeing Taskforce identified a national commitment that is 'encouraging schools to continue to develop whole school approaches to promoting mental health and

wellbeing' (p.19) with a 'need to value the importance of recognising and promoting good mental health and wellbeing in all people, not just focusing on mental illness and diagnosis.'

More recently (Nov. 2016) *The report of the Commission on Children and Young People's Mental Health: Time to Deliver* (Frith, 2016) proposed that the new Prime Minister should announce a national challenge on children's mental health: 'A high profile, national government programme to ensure a stronger focus on mental health and wellbeing within schools' (Frith, 2016, p. 9). A response to this was the government Green Paper 'Transforming children and young people's mental health provision' (DH & DfE, 2017). Amongst other priorities, this initiative proposes that all UK schools should have a trained designated Mental Health Lead by 2025. This person would be responsible for the school's approach to mental health, would oversee the help that the school gives to pupils with mental health problems, train staff to identify pupils who show signs of mental health difficulties and offer advice to staff as to when to refer to external services as necessary.

This is a role that is possibly suited to many counsellors already working in schools, and as an example of this I was promoted from being Lead School Counsellor to Director of Pupil Wellbeing in 2016. This role includes the responsibilities outlined above and more, including the development of a digital wellbeing strategy proposal (Knight & Hennigan, 2018), which followed the general wellbeing strategy proposal (Hennigan, 2016) mentioned earlier. Both proposals raise awareness amongst pupils, parents, and staff of how using technology appropriately can improve wellbeing.

This Government Green Paper also suggests schools should be linked to mental health support teams, such as local Child and Adolescent Mental Health Services (CAMHS). This would link schools directly to NHS provision in a timelier fashion (the aim being an average four week waiting time and faster for those needing urgent help). These teams are to work closely with any provision the schools currently have, such as school nurses and school counsellors as 'the school environment is non-stigmatising, making interventions offered in this context more acceptable to children and young people, and their parents' (DH & DfE, 2017, p.13).

However, as many counsellors are aware and research has also shown, many young people who have mental or emotional health difficulties do not seek help when they need it (Gulliver, Griffiths & Christensen, 2010; Smith, 2012), including in schools (Cooper, 2013) and for various reasons. These reasons may include perceived stigma and embarrassment, a preference for self-reliance, or poor mental health literacy particularly in understanding where their own distress lies within the framework of 'normal' or 'real' distress (Biddle, Donovan, Sharp & Gunnell, 2007).

Research has also shown that, as levels of psychological distress rise (Deane et al., 2001; Yakunina et al. 2010), people are less likely to seek help if they have not already done so. This is known as 'help-negation' or the 'negation-effect' i.e. not utilising available help when it is needed. It is evident as a negative association between suicidal ideation and help-seeking intentions, such that as suicidal ideation increases help-seeking intentions decrease' (Rickwood et al., 2005, p.14).

This is of concern considering the reported trend of decreased wellbeing and rising mental health problems in young UK adults (Pitchforth, Viner & Hargreaves, 2016) and the results of an NSPCC report (NSPCC, 2015) suggesting that between 2012/13 and 2013/14 there was an 18% increase in Childline counselling sessions regarding suicide. Although the numbers of adolescent suicides are relatively small (Appleby et al., 2016), risk can become more acute in late teens (Appleby, Kapur, Shaw, Turnbull, Windfuhr, Ibrahim, Rodway, & Tham, 2016). Therefore, help and support that is easily accessible to adolescents in a timely manner is crucial.

It seems particularly pertinent to investigate whether online school-based counselling might reduce barriers and increase accessibility to help at an earlier stage of distress for young people. Furthermore, uptake may also be improved if young people were actively encouraged to be involved in the development of services (Cooper, 2013; Martníez-Hernáez et al, 2014), including web-based services (Czyz et al., 2013).

3.2   Counselling young people in UK secondary schools

School counselling can be defined (BACP, 2015) as 'a professional activity delivered by qualified practitioners in schools. Counsellors offer troubled and/or distressed children and young people an opportunity to talk about their difficulties, within a

relationship of agreed confidentiality' (p.1). Furthermore, school-based counselling implies that 'the counselling service is located **in** the school, but that the focus of the counselling is not necessarily **on** school related issues' (Cooper, 2013. p.3).

Counselling in UK schools is said to have emerged in the 1960s and 1970s (McLaughlin, 1999; Baginsky, 2004) and was originally largely based upon the Person-Centred Approach (Rogers, 1961, 1980). Scotland was different as there is a long tradition of having 'guidance teachers' in most schools, generally qualified teachers who held a Certificate in Guidance, i.e. supporting pupils with behavioural, personal, family or health issues (Howieson & Semple, 1996). Changes in the government's values and priorities over the 1980s and 1990s (as outlined in the Education Reform Act of 1988) saw a decline in counselling activity in schools. Priorities were shifting, with a focus on academic outcomes and pupil behaviour management. There were also other reasons (Lang, 1999; Robinson, 1996) such as poor implementation, or confusion, from teachers as to what counselling was (Baginsky, 2004). However, it is interesting to note a rise in the number of pupils being excluded from school (Castle & Parsons, 1997) during this period.

Further changes in government priorities in the past two decades (DfES Every Child Matters, 2003; DfES Children Act DfES, 2004; Department for Children Schools and Families, 2007; DH & NHS England, 2015; DfE, 2016; DH & DfE, 2017) have occurred, together with a significant rise in school-based counselling activity (Polat & Jenkins, 2005; Cooper, 2013). It has been estimated that between 61%-85% of secondary schools in England and Scotland provide access to counselling (Cooper, 2013), although there may be considerable regional variation. Welsh legislation in 2008 required local authorities to make reasonable provision for school-based counselling to all children aged 10 years and above. Since 2007 Northern Ireland has provided ring-fenced funding to ensure all secondary aged school children (and those with special needs) are able to access counselling services.

There is increasing pressure on Scotland and England to follow the example of Wales and Northern Ireland, and the Scottish Government's 2017-2027 mental health strategy is committed to reviewing the provision of counselling in schools (Scottish Government Mental Health Strategy 2017-2027, 2017). However, although the recent

Green Paper (DH & DfE, 2017) is entirely focused upon the mental health of young people in England, as of 2018 it does not include an initiative to increase school-based counselling in England any further.

For those schools that do have a school-based counsellor, research has shown that pupils do value this provision (Fox & Butler, 2007; Cooper, 2013). Some pupils however have indicated concern around other people finding out (Cooper, 2004; Chan & Quinn, 2012) and the stigma attached to this, which could inhibit them from utilising the service.

Counselling in secondary schools has been shown to significantly reduce levels of distress and help young people work towards their goals (Kavanagh et al., 2009; Cooper, 2013; Pearce et al., 2017). Furthermore, a critical evaluation into UK school-based counselling suggested that it would be 'very useful to evaluate whether the effectiveness and/or cost-effectiveness of school-based counselling could be enhanced through specific adaptations.... or through supporting face-to-face counselling with online counselling delivery' (Cooper, 2013. p.18).

As the internet becomes an increasing part of the lives of young people and their families (Livingstone & Bober, 2004; Livingstone et al., 2018) with access both at home and at school, there is a growing reliance upon computer-mediated modes of communication for social interaction from young people (Livingstone et al., 2018) This causes mixed feelings and thoughts from adults about technology's influence on children and adolescent development (Gardner & Davis, 2013; Boyd, 2014; Byron, 2018).

One example of enthusiasm towards this growing reliance upon technology is that it could change the way that literacy is viewed. Greg Ulmer in *Internet Invention: From Literacy to Electracy* (2003), suggested 'Electracy' (which is to digital media what literacy is to print) is a new form of 'reading' and 'writing' emerging in young people. Furthermore, in their book 'The App Generation' Gardner & Davis make the point that 'technology is neither inherently benign, nor inherently evil. Instead it is the uses to which we put various technologies that shape the outcomes. A pencil can be used to write poetry, or it can be used as a weapon'. (Gardner & Davis, 2013, p. 12)

Young people today are often named as the 'net generation' (Montgomery, 2007) or as 'digital natives' (Prensky, 2001), as it is claimed that they are native speakers of digital language and process information differently from their predecessors. A study of 9 – 19-year olds' Internet use in 2004 showed that 75% had access at home and 92% had access at school (Livingstone & Bober, 2004), which has likely increased since. Children and young people are known to use technology more than any other medium to socialise and communicate (Kaynay & Yelsma, 2000) with those in their homes, schools, and local communities (Valkenburg & Peter, 2007), but also with others not previously known to them (Wolak & Finkelhor, 2003).

The Internet offers users a convenient and private way to seek out a vast amount of health-related information that they may have difficulty accessing in person. School-based counsellors may be interested in research that has shown that many people take this opportunity as a first step for support (Rains et al., 2015) and just like adults, young people are also more likely to use the Internet in the first instance to seek out health information (Gray et al., 2005; Skinner et al., 2003; Borzekowski et al., 2001; Burns et al., 2009).

This widespread adoption and acceptance of the Internet in the everyday lives of children and young people (Mesch, 2012) has caused considerable debate with regard to the delivery of counselling online in the profession (Barak, 1999; Fenichel, 2002; Goss & Anthony, 2003; Abney & Maddux, 2004; Rochlen et al, 2004). However, as far back as 1998 it was argued that for therapists to think that clients would not use the Internet to access counselling services was short-sighted, and that 'as technology advances to allow online activity to become even more integrated into daily life, many uses of the Internet that today are controversial, such as online therapy, will seem commonplace'. (King & Moreggi, 1998, p.105).

If young people are increasingly actively seeking health information and enjoying relationships online, and if online communication could be an easier first step to accessing support earlier, it is intriguing that UK school-based counsellors services are not offering this option.

3.3   Online counselling in general

This section will define online counselling, and those aspects of working therapeutically online that are different to f2f counselling. It will also outline some of the disadvantages and advantages of this method of therapeutic communication and relationship.

Online counselling can also be known as e-therapy, e-counselling, web counselling, telepsychology, cybertherapy or computer-mediated therapy. It is noted that the terms therapy and counselling have been used interchangeably (McLeod, 1994). This study will use the definition of online counselling given by Richards & Vignanó (2012) as 'the delivery of therapeutic interventions in cyberspace, where the communication between a trained professional counsellor and client(s) is facilitated using computer mediated communication (CMC) technologies, provided as a stand-alone service or as an adjunct to other therapeutic interventions'. (p. 699)

Online counselling occurs through many different methods such as text (Hazlewood, 2008), email (Anthony, 2004), audio (Lester, 2002), video (Simpson, 2003), the use of avatars (Mayor, 2017), or a combination of any of these (Nagel & Anthony, 2011). It can occur either asynchronously i.e. with a time delay such as traditional email, or synchronously i.e. simultaneously as in the more traditional f2f manner, and again as a combination of any of these. This blending of offline and online mediums can be referred to as Omni-Channelled therapy (Anthony, 2015 p.1), understood as therapy via multiple means of making contact.

Key aspects of online counselling include the perception of anonymity, the positive and negative effects of the 'disinhibition effect' (Suler, 2000, 2004); the disadvantages or advantages of non-verbal cues (King et al., 2006; Simpson et al., 2005; Hanley, 2009); ethical and legal issues (Mallen et al., 2005) such as confidentiality, record keeping and data protection, and the relevant need for specific training (Anthony, 2014).

The online disinhibition effect can be defined simply as the concept that people say or do things online that they would not do f2f. For example, there can be a tendency for people to reveal intimate details more quickly, or to express themselves more

openly, with either positive or negative effects. Suler (2000, 2004 & 2016) proposes several reasons why this might be. These include:

- A sense of invisibility
- Asynchronicity (e.g. not having to deal with someone's immediate reaction)
- Solipsistic introjection e.g. hearing the other person's message as a voice inside one's head
- Dissociative imagination e.g. a sense that their online self-lives in a not-quite-real world
- Perceived privacy e.g. a sense that the communication is more private than the person logically knows that it is
- Attenuated status and authority e.g. offline status (such as dress, body language, age, social class etc.) may not have any or much impact on online relationship, so that any impact of authority and associated power imbalance may be lessened
- Social facilitation e.g. negative or positive acts online that can be reinforced or amplified by a watching audience.

Invisibility, asynchronicity, dissociative imagination, perceived privacy, attenuated status and authority were all factors mentioned by participants in this study with regards to online school-based counselling. This will be expanded upon in the results (Chapter 7) and discussion (Chapter 8).

Furthermore, the experience of 'time' when communicating online can be more psychologically complicated when compared to f2f (Suler, 2016). It can be perceived as accelerated (types of social relationship building online can be faster), frozen (online communication can be recorded and preserved), ephemeral (photos that last on the screen only for a few seconds) or intersected (where, who with, and how often offline and online life interconnect). Finally, the distinction between reality and fantasy online can become blurred, such as relationships that are believed to be real online only to find out that f2f they are a hoax, which is widely known as 'catfishing' (Peterson, 2013).

Non-verbal cues can enhance or undermine f2f therapeutic relationships (Mallen et al., 2005; Bambling et al., 2008; Rains, et al., 2016), and the lack or distortion of these

cues can also present both opportunities and challenges (Liess et al., 2008) within online therapeutic delivery. Perhaps the most obvious challenge is therapy via text only (Epley & Kruger, 2005), where there may be issues around misinterpretation. However, missing non-verbal cues can also present when using audio (King et al, 2006a) or video (Kirkwood, 1998).

Numerous studies indicate that this relative paucity or distortion of non-verbal cues can be perceived as a negative by therapists, yet clients often feel differently. Research, including research in UK school-based counselling (Rijn et al., 2018) has shown that a lack of non-verbal cues can be managed in many rapidly developing and creative ways, such as using emoticons (Maheu & Gordon, 2000) or avatars (Phelps et al., 2017). Advantages of missing non-verbal cues include disclosure at a faster rate in that clients can often 'get right to the point' more quickly (Rochlen et al., 2004), benefit from perceived anonymity (Bar-Lev, 2008), experience a more equal power balance (Barker, 2008) and, if restricted to the written form only, clients can experience a more reflective stance than when verbalising in person (Rochlen et al., 2004).

However, criticisms and scepticism with regard to online counselling continue to come from both professionals and laypeople (Allerman, 2002; Wells et al., 2007; Barak et al., 2008; Mora et al., 2008, Hennigan & Goss, 2016; Glasheen & Campbell, 2017). Although research into general attitudes and experiences of psychotherapists concerning this medium exists (Bambling et al., 2008; Hanley, 2006; Wangberg, et al., 2007; Finn & Barak, 2010) there is currently little that is specific to the attitudes or experiences of school counsellors (Glasheen & Campbell, 2009, 2013; Hennigan & Goss, 2016).

There has however been a great deal of research into other areas of concern about online therapy, such as the online therapeutic working alliance (Cook & Doyle, 2002; Mallen et al., 2003; Lewis et al., 2004; Rees & Stone, 2005; King et al., 2006a), client attitudes (Robinson & Serfaty, 2001 & 2008; Young, 2005; King et al., 2006b) and legal and ethical issues in online therapy (Goss & Anthony, 2003; 2005; Suler, 2004; Mallen et al., 2005a; Nagel & Anthony, 2009; Anthony & Goss, 2009; Anthony et al, 2010; Bond, 2015).

Counter to these areas of concern, some of the more easily recognisable advantages of online therapeutic services include the practical benefits of an accessible provision for geographically isolated clients (Riemer-Reiss & Wacker, 2000), the convenience of time and flexibility (Chester & Glass, 2006), lessening of any perceived stigma of being 'seen', low or no travel costs for both the client & counsellor, and room or heating cost savings for organisations (Riemer-Reiss & Wacker, 2006). Online therapy can also be less inhibiting or psychologically safer for those who may not otherwise access traditional f2f therapy, or who may prefer to remain anonymous (King et al, 2006b). This may be particularly true of young people in their school environment (Davison, 2008).

The evidence base for the efficacy of online counselling has been rapidly expanding over the past few decades (Cohen & Kerr, 1998; Grohol, 1998; Anthony, 2000; Hanley, 2004; Rochlen et al., 2004) and particularly in recent years (Barak et al., 2008; Reynolds et al., 2012, Dowling & Rickwood, 2013; Goss & Hooley, 2015). Along with evidence of growing demand from clients (Goss & Anthony, 2003; Gainsbury & Blaszczynski, 2011), it would seem that online therapeutic interventions are not only here to stay, but are continuing to flourish (Aguilera, 2015; Berger, 2017).

However, regarding virtual relationships to be the same as f2f relationships can be misguided (Anthony, 2000, 2014) and training is therefore of crucial importance. There are a growing number of training providers for online therapy, such as the Online Therapy Institute (www.onlinetherapyinstitute.com) and Online Training for Counsellors (www.onlinetrainingforcounsellors.com), along with guidance on practice development (Mallen, 2005a; Evans, 2009; Anthony & Nagel, 2010; Anthony et al., 2010). Yet as of April 2018, no specific training or professional guidance is available for school-based counsellors to bring their services online.

3.4   Online counselling for young people

There is a small but fast growing body of research and development into online therapy with young people both globally (Barak et al, 2008, Spek et al., 2006) and in the UK (Hanley, 2004, 2006; Bambling et al., 2008; Hanley & Reynolds, 2009; Robinson & Serfaty, 2008; Street, 2013), but again, little identified that is specific to UK school-based counselling.

There are however a growing number of resources for young people to receive help and support online, offered by national and local organisations external to schools. A review of the resources offered by National organisations to help young people, such as *Childline*, *National Society for the Prevention of Cruelty to Children, Relate*, *Young Minds*, *Barnados*, *Mindfull* and *Kooth*, reveals that these organisations are actively engaging in meeting this need from young people. Some of these national organisations are providing access to individual schools to their online facilities (www.xenzone.org and www.Mindfull.org) for a fee (although free at the point of access for the young person), and some research based upon these services has emerged (Hanley, 2004 2005, 2009 & 2012; Vossler & Hanley, 2010). There is however nothing about current practice development or academic research within school-based counselling services in UK secondary schools.

Research into online therapy with this group in general indicates that it could be a way of increasing access (Fenichel et al., 2002, Barnett, 2005) to a diverse range of young people (Hill et al, 2011), in a highly convenient way that is less embarrassing or stigmatising for them (Lange et al., 2003). This is one of the main reasons that young people do not seek f2f therapy in their school setting (Davison, 2008).

In 2013, BACP commissioned a scoping report of online counselling services for children, young people and young adults aged 5-25 years (Street, 2013) that concluded that online counselling is a growing sector, with advantages such as flexibility and availability, in a medium with which young people are familiar and like to use (Bradford & Rickwood, 2014). It also concluded that demand for this type of support is growing (King et al, 2006; Hanley, 2007) and suggested that young people are more likely to return for further counselling f2f, as well as online. A recent BACP public attitudes survey (BACP, 2014) indicated that young people in the 16-24 years age range would be almost twice as likely as adults to choose counselling online rather than f2f.

Additionally, it is clear that a benefit of an online service within a school setting could be an opportunity to work online in conjunction with f2f provision, potentially with the same therapist. Research into online therapy as an adjunct to f2f is promising (Yager, 2000; Maheu, 2003; Tate & Zabinski, 2004; Murdoch & Connor-Greene, 2000, Baker

& Ray, 2011), but as yet limited and again there is very little with regards to school-based counselling.

Many other countries are engaging in and researching online counselling services with young people (Barak, 2008; Richards, 2009; Schreiber & Aartun, 2011; Popoola & Olusegun, 2012; Dowling & Rickwood, 2015; Pattison et al., 2012, 2015; Hollis et al., 2017; Ersahin & Hanley, 2017). These studies demonstrate that young people are actively engaging in online therapy, stating advantages such as accessibility, anonymity, a greater sense of control and the opportunity to review text-based sessions (Rochlen et al., 2004; Beattie et al., 2006; Ersahin & Hanley, 2017).

Some research focussed on school-based online counselling is beginning to emerge globally, for example in the Philippines (Vinluan, 2011), Cyprus (Beidoğlu, 2015) and America (Kimble, Jacokes & Stone, 2014). However, it is important to note that the role of school counsellor in some of these countries may have a different set of responsibilities (such as more academic or career guidance) than that of a UK school-based counsellor (where the focus is mostly psychotherapeutic in nature).

In Australia, there has been widespread development of online counselling provision of mental health resources generally, with the publication of The *E-Mental Health Strategy for Australia* (Australian Government Department of Health and Ageing, 2012). More importantly for the purposes of this research however, Australian researchers have recently published papers into school-based online counselling (Glasheen & Campbell 2009a, 2009b, Glasheen, Shochet & Campbell, 2013, 2015; Glasheen et al, 2018). This Australian research was part of a three-year government funded project (Campbell & Shochet, 2013) piloting school-based online counselling in 28 schools. This includes a series of papers investigating the perspectives of the different school stakeholders involved - school counsellors (Glasheen & Campbell, 2009; Glasheen et al, 2013), pupils (Glasheen & Campbell, 2015) and school Principals or Head Teachers (Glasheen et al, 2017).

3.5   School based online counselling services

As there seems to be a rise in online counselling in general (Aguilera, 2015; Berger, 2017), and a growing research base investigating online counselling from various

perspectives, it is somewhat surprising that there is little research exploring why school-based online counselling has not been developed.

Many school counsellors use technology for communicating with pupils for administration purposes (Glasheen & Campbell, 2009; Glasheen et al., 2014), but this group does not seem to be implementing it in their therapeutic work with pupils (Glasheen et al., 2013; Glasheen et al., 2015; Hennigan & Goss, 2016). This is surprising as the young people use technology regularly for communication and social relationships (Mesch, 2012), and there is growing evidence that they would be open to using technology for mental health support if it were available (Beattie et al., 2006; Bradford & Rickwood, 2015; Ersahin & Hanley, 2017).

Earlier research investigating the perspectives of school counsellors and technology (Owen & Weikel, 1999; Othman, 2000) suggests that some may be wary due to lack of confidence, or even that the personality types attracted to school counselling (Myrick & Sabella, 1995) are not 'technically minded':

> *"I feel intimidated by computers"* has been a common comment by counsellors, who even after training frequently revert to traditional procedures. The customary statements *"My kids know more about computers than I do"* and *"I'm not a technical person"* suggest that although counsellors may be interested or even intrigued, they frequently feel awkward and uneasy with computers and their operations. (p. 37).

Recent research (Glasheen et al, 2015; Hennigan & Goss, 2016) has indicated that although there is still some hesitancy to bring school-based counselling services online for several reasons, there is also a significant amount of enthusiasm that is not translating into development. Approximately 50% of participants in both the Australian and UK studies mentioned above indicated enthusiasm for development in this area, given appropriate training, resources, and support (technological, clinical, financial, and online counselling supervision). Furthermore, only 15% of Australian school-based counsellors reported that they would not use online counselling facilities even if they were available (Glasheen et al, 2013). This is similar to the 16% of UK school counsellors who stated that nothing would motivate them to consider working therapeutically online (Hennigan & Goss, 2016).

Reasons for hesitancy in considering school-based online counselling development (Glasheen et al., 2009, 2013; Hennigan & Goss, 2016) were similar to those mentioned in sections 3.3 and 3.4, i.e. perceptions of online counselling being less effective, lack of clarity about ethics, fear of litigation, confidentiality of data (theirs and their clients) and the impact of lack of non-verbal skills on the relationship.

Another reason indicated by Glasheen et al. (2017), is that the support (or not) of school Principals or Head Teachers may be having an influence. These are the people who are likely to be responsible and accountable for how school-based resources (money, staff and time) are allocated, along with how any new practices are introduced and aligned with school values, policies, and practices. Their views are likely to play a critical role in the adoption of any new practices.

Results from this study suggested that although some principals had negative attitudes to online school-based counselling, many regarded online communication as important for young people and implied that they would like to have these services available. Glasheen et al, (2017) also suggest that a strong working relationship between the school-based counsellor and the Principal (or Head Teacher) was likely to be crucial to the success of any such innovation being implemented:

> If an innovation has the Principal's support, it is in effect being sanctioned by the employing body and is, therefore, more likely to be implemented by school counsellors. Furthermore, school counsellors are more likely to innovate when they have a sound relationship with the Principal, as an innovative climate in the schools is more likely to exist where there is professional trust between staff members (p.7)

School policies are also of concern when considering implementing new practices, but particularly policies regarding technology and young people in these times (2018) of mixed feelings from adults. There has been extensive debate recently (George & Odgers, 2015; Greenfield, 2015; Bell et al., 2015;) regarding the impact of technology (particularly mobile phones) on the developing adolescent brain (Blakemore & Mills, 2014; Mills, 2014). Schools and other organisations are being called upon (Byron, 2008; NSPCC, 2017) to implement more rigorous policies in response to these strong feelings from parents and professionals (Lenhart et al., 2010). Views range from wanting technology banned in schools as in France where there is a ban on mobile phones in all schools from September 2018 (Sage, 2017), through asking schools to

better equip young people by creating policies (NSPCC, 2017) that will help support children and young people with a considered use of technology in conjunction with their wellbeing.

It is generally the role of the Principal or Head Teacher, in conjunction with their senior management teams, to agree new policies and procedures. Glasheen et al., (2018) take this view further and suggest that 'the disconnect between the policies of information communication and that of sound educational policy, is one that Principals must resolve to ensure that the technological advances that are widely used in society are also integrated into the educational process." (p. 8).

More pressure is being put on schools from government (as well as parents) to take an active part in developing digitally healthy citizens. In 2017, the British Children's Commissioner argued in the report *Growing Up Digital* (Afia et al., 2017) that 'at the moment, children are not being equipped with adequate skills to negotiate their lives online' (p.3) and calls for an approach that teaches young people to be resilient, informed and empowered in the digital world.

The British Medical Journal (Bell et al., 2015) suggests that although some valid concerns do exist about young people and digital technology, rather than technology affecting their capacities it is more likely a displacement of other activities that is a powerful source of negative effects e.g. lower levels of physical activity, less offline socialising, and passive or thoughtless use of technology.

Against this social, political, and cultural backdrop it may be particularly difficult for schools to consider implementing a technological innovation such as school-based online counselling. This is particularly true if these organisations are considering taking a limiting view of technology use with young people in general.

Finally, a major concern highlighted by Principals (Glasheen et al, 2018) is the impact of a potential additional workload on current counselling staff, and the potential need for more counsellors. As there is a similar response from school counsellors (Glasheen et al., 2013; Hennigan & Goss, 2016), this may be due to a lack of understanding that the school-based online counselling service can be as controlled

as any f2f provision i.e. only operate within specified hours, have confidentiality limits clearly specified and contracted, and have an agreed protocol for any safeguarding concerns. Waiting lists could operate in both online or f2f services, with the practitioner to prioritise and manage their workloads as required.

Much of the literature that relates to school-based online counselling globally is from the perspective of school counsellors (Vinluan, 2011; Kimble et al, 2014; Beidoğlu et al., 2015; Hennigan & Goss, 2016). In this final section of the literature review, research from the perspective of those pupils using school-based online counselling is considered.

3.6 School based online counselling services: research with pupils

There is a growing evidence base of research into online counselling with young people, including research from the perspective of the young person (King et al., 2006; Hanley, 2009 & 2012; Dowling & Rickwood, 2015; Glasheen et al, 2015; Phelps et al. 2017), yet again there is very little from the perspective of pupils using school-based online counselling services (Glasheen & Campbell, 2008).

However, one such study (Glasheen et al., 2015) sought to understand whether students would seek help through online counselling if it were offered in their schools. Results from 215 pupils aged 13-17 years suggested that over 80% of them 'definitely might' or 'definitely would' use online counselling if the school offered it. There was no reported gender difference in pupils' intentions in this respect, and no significant difference between those that had experienced f2f counselling or not.

This is an interesting discovery that may indicate that those that have never had counselling before may seek online counselling as a first step. This was suggested by previous research (Glasheen & Campbell, 2009) i.e. 'from a school perspective, the advantage over a national helpline is that the counsellor is then able to offer face-to-face counselling, if trust is built over time' (Glasheen & Campbell, 2009. p.15).

As suggested earlier in this literature review, school-based counselling in the UK often has a different focus than in other parts of the world. Yet, it is also interesting to note that the Australian research (Glasheen et al., 2015) suggests that pupils would be

least likely to use online school-based counselling services to discuss career development, with a stated preference to discuss these needs with a counsellor f2f. The preference for discussion issues in online counselling were considered more sensitive or personal in nature, such as concerns about sexuality, conflict at home, anxiety, and bullying.

The study (Glasheen et al., 2015) also compared current levels of distress with intention to seek online counselling, and discovered that as psychological distress levels increased, the intention to use online counselling also increased. This is an important finding in consideration of literature and research on the 'help-negation' effect (Rickwood et al, 2005). Of the rising numbers of adolescents in the UK with mental health issues, there are many who do not seek appropriate help in a timely manner, if at all.

3.7 Summary

There is both a growing global interest in, and a rapidly developing research evidence base about online counselling in general, including online counselling with young people. The research with young people to date is predominantly focused upon data collected by the national services mentioned earlier, or by services that are externally provided and brought into schools for a fee. Where there appears to be a gap in the literature is with regards to school-based counsellors working therapeutically online in schools that currently offer f2f services.

As most school-based counsellors are not unknown to either the pupils or schools in which they are located, they are uniquely placed to offer online services to their pupil communities. They are a known trusted quantity, someone who has direct knowledge of how the school operates and of local resources. Having school-based online support gives the pupil the opportunity to have counselling in a way that could reduce the issue or stigma of being seen by other pupils, provide a record of the therapeutic discussion to reflect on later if desired, make it easier for pupils to disclose sensitive or embarrassing personal information without having to deal with another person's reaction, and potentially provide more of a balance in the power relationship. There is also the opportunity of being able to work online and offline (f2f) with the same therapist if desired.

Following the implementation of this service (see Chapter 6), this study sought to enhance the knowledge base and add to existing literature by observing pupil use and effectiveness of a school-based counselling service offering a choice of counselling online, f2f or a blend of both. Furthermore, this research investigated pupils' perspectives about the reality of the choice that they made with regard to the medium in which they sought counselling, rather than just their intentions as in previous research (Glasheen et al., 2015). In this particular respect, this research seeks to address a gap in the literature.

Chapter 4   Design and Methodology

4.1   Introduction

This chapter details the approach taken in this study, in terms of both my epistemological position and the methods carried out (including details of the way in which data was collected and analysed).

The background as to why the design and methodology were chosen is given first, followed by a discussion of the critical realist perspective employed throughout and which justifies the pluralist mixed methods chosen. The three main stages of method involved in the FP are then fully described, with details of participants, procedure, material, data analysis and bias given for each stage.

4.2   Background to the design and methodology

As stated in Chapter 1, the impetus for this research came from requests from pupils for an online form of therapeutic support to supplement the f2f school-based provision. The findings from the PEP (Chapter 2) were also influential in planning the design of the FP.

The main results of the PEP were twofold:

1. Respondents expressed a desire and exhibited a need for more information regarding online counselling with young people in general, and more specifically in schools. However, such information was already available (see Chapter 3), therefore there was a clear need to connect practitioners to the information. I used this evidence to inform the development of a training course for counsellors working with young people to work therapeutically online (Chapter 9).

2. I also used the results of the PEP to attempt to address some of the apparent gaps in the knowledge base in this area i.e. a small scale exploratory study with pupils in the specific setting of UK secondary schools.

The Practice Evaluation Project reported in Chapter 2 suggested a desire for evidence of successfully reaching pupils that might have psychological barriers to accessing f2f

help, as well as evidence that online counselling in schools would make accessing the service easier for pupils. There was also a request for general information about how pupils might use this facility (for example which issues might be better suited to any particular medium, whether there were any gender differences in uptake and so on) and to understand whether online counselling in schools was as effective as f2f. Undoubtedly, these questions called for a more quantitative research approach to provide evidence of uptake and effectiveness.

Alongside this research a strong practical element would be required, as I would need to develop a school-based online counselling resource, as an adjunct to the long established f2f provision. I would also need to work closely with senior management in this group of schools to embed this into current systems, policies and procedures (as will be outlined in Chapters 6). It was important to these individuals that quantitative results were produced for this new venture into online counselling, so that they could clearly understand how it 'measured up' to the results provided by the current counselling service (usage numbers and outcome measure scores particularly). The future funding for this provision was also reliant upon providing evidence of uptake and effectiveness first and foremost, over and above accounts of pupil's experiences.

However, I was also always mindful of my initial reason for embarking on exploration of this area i.e. the unprompted requests from the pupil satisfaction survey (Hennigan, 2011) and thus wanted to investigate this development from the perspective of 'pupil voice' too. Research that considers clients experiences of this medium (as a key stakeholder in the counselling relationship) was therefore central to my research interests.

Questions that arose from the PEP, such as uptake and effectiveness, seemed best suited to a quantitative approach. Yet my other questions were *'What might school counsellors need to know about clients experiences, that they did not know they needed to know?* And '*What do pupils think and feel about this subject?'* These types of question seemed suited to a qualitative methodology.

A research approach was needed that could be used 'to obtain different but complementary data on the same topic' (Morse, 1991, p.122). This approach could also bring together the differing strengths and weaknesses of both quantitative and qualitative analyses (Goss & Mearns, 1997), by illustrating quantitative results with qualitative findings for example, or where possible synthesizing them to develop a broader understanding of school-based online counselling in UK secondary schools. An approach that considered both quantitative and qualitative data important was therefore required.

My early background in psychology (and a short career as a statistician) has led to a strong belief that some types of evidence are more convincing than others, namely those based on a scientific paradigm that values systematically manipulated, observable data that can be measured (a positivist paradigm). However, later training in Humanistic Counselling (Rogers, 1961 & 1980) challenged and changed this worldview to one where understanding, or meaning of phenomena are formed from the perspective of subjective experience/s. This understanding or meaning of phenomena are considered to be constructed by people experiencing things and then reflecting upon those experiences, as well as personal histories (Berger & Luckmann, 1967) i.e. a world-view that there is also a reality, independent of our thinking about it, that science could research (a constructivist paradigm).

As a scientist and researcher, it was important to me to endeavour to determine truths about reality, yet at the same time I understood that this was an impossible goal. This complexity called for more than either searching for 'deep, rich observational data' or 'hard, generalizable survey data' (Sieber, 1973, p.1335) to better understand human behaviour and experience. A combination of both forms of data would, surely, provide the most complete analysis? This does not mean an approach where 'anything goes' (Shaw & Frost, 2015, p.340), but more one that is informed by utilising the strengths of each approach, to provide a fuller picture than any one approach could arrive at alone.

However, this type of approach has been much debated in the past decades. According to Onwuegbuzie (2003), 'much of the quantitative-qualitative debate has involved the practice of polemics, which has tended to obfuscate rather than to clarify,

and to divide rather than to unite educational researchers' (Onwuegbuzie, 2003, p. 394). An answer to this tension was thus to look for an underlying philosophy that informed the needs for both qualitative and quantitative data collection. This is where the critical-realist perspective provided a solution.

4.3   The critical-realist perspective

Critical realism (Archer et al., 2013) is an integration of realist ontology (where there is a real world that exists independently of our constructions of it) with a constructivist epistemology (where our understanding of reality is inevitably informed by a construction of our own history, experiences, social interactions and views).

In this way, a post-positivist (a stance that critiques and amends positivism), critical-realist worldview was formed, and has been adopted for this research. In this, there is recognition that all observation is fallible, and it is important to remain critical of an ability to know reality with any certainty. A pragmatic view takes this one step further. It reasons that it is possible to work with both philosophies, if they are considered as a continuum, rather than opposite positions. Furthermore, Tashakkori and Teddlie (1998) propose that 'at some points the knower and the known must be interactive, while at others, one may more easily stand apart from what one is studying' (p.26).

Pragmatism (Howe, 1988) is also appealing as it avoids the researcher engaging in what might be considered pointless debates about truth and reality. Instead, as Pierce (1931) suggests, our knowledge 'swims, as it were, in a continuum of uncertainty and of indeterminacy' (Vol. 1, p.171). A pragmatist viewpoint also suggests that as a researcher you should 'study what interests you and is of value to you, study in the different ways in which you deem appropriate and use the results in ways that can bring about positive consequences within your value system' (Tashakkori and Teddlie, 1998, p.30). This pragmatic, creative-realist perspective fits particularly well with the type of design outlined as being required for this study earlier in this chapter, and why and how a pluralist mixed methods design was chosen.

4.4   A pluralist mixed methods design

The growth of mixed method research is implied to have started in the 1980's (Cresswell & Plano Clark, 2011), although such ideas were also in existence much

earlier, for example in the work of Campbell & Fiske (1959). This decade saw researchers from many different disciplines proposing similar ideas simultaneously (Fielding & Fielding, 1986; Bryman, 1988; Brewer & Hunter, 1989; Morse, 1991) i.e. that more than one worldview may be used alongside another to better understand reality, even though they may appear to be different in terms of ontology, epistemology, axiology, rhetoric, logic, generalisations, and causal linkages (Cresswell, 2009c).

Critics of this approach (Bryman, 1988; Guba & Lincoln, 1988; Smith, 1983) argue that mixing paradigms leads to confusion and conflict, and could also lead to practical difficulties for the researcher (the different paradigms are generally linked to different research methods which requires different skills and resources).

However, these somewhat traditionalist views have been challenged by both situationalists (Vidich & Shapiro, 1955), who adapt methods to the situation (accepting that both qualitative and quantitative approaches have separate value) and more recently by pragmatists (who place emphasis upon the research question itself as the main driving force for choice of research methodology), believing that 'epistemological purity doesn't get the research done' (Miles and Huberman, 1984, p.21).

Mixed Method research has become more popular recently (Tahsakkori & Teddlie, 2003; Cresswell & Plano Clark, 2007: *Journal of Mixed Methods Research* launched in 2007) and integrates methodology to explain the research process by 'the integration of different elements of research process to into a unified coherent whole… equal consideration to each element without privileging one element over any other' (Plowright, 2011).

My aim in this study were to use quantitative and qualitative methods in a pluralistic way, as highlighted by Shaw & Frost (2015): 'Pluralistic approaches seek out multiple perspectives to engage with difference. By considering how each method works alone and with other methods, pluralistic approaches set up dialogue across methods rather than putting barriers between them' (p. 643).

The aim was to use data sets of differing kinds and epistemologies to aid the interpretation and understanding of both, in a way that considers and addresses the strengths and weaknesses of each approach while also placing focus on where they might converge. A pluralistic approach (Goss & Mearns, 1997) can reduce confusion and harness tension in the differences between data types by making the most of the differing utility of the different kinds of data.

This pluralist design is also considered pragmatic, in that can achieve greater validity through offsetting the strengths and weaknesses of one approach against the other, adding to breadth and transferability, alongside reports of individual experience. This research project is therefore based upon a critical realist perspective involving a convergent parallel mixed methods design (Creswell, 2003 & 2015; Creswell & Plano-Clark, 2006) that follows the steps outlined in Chapter 1 (Figure 1) and as per the diagram below (Figure 6). The methods used are fully described in the next section and can be summarised as follows:

1. The collation and analysis of data from usage of a school-based counselling service (including pre/post counselling outcomes) offering both offline and online counselling (or a blend of both) to pupils over two academic years.
2. A post counselling Internet survey sent to all participants involved in the study.
3. A post survey interview for participants that self-selected from one of the questions in the survey mentioned above.

The convergent design is one where results from both qualitative and quantitative investigations will be merged, where possible, to provide a fuller picture i.e. where each analysis can provide different insight or may validate the other. This combination can also be used to view research questions from a variety of angles; to provide not only more data, but also (potentially) a more complete understanding than would be provided by one alone. I also wanted to be able to compare my findings with any similar studies where possible.

In summary, this research followed a client-preference design (Torgerson

& Sibbald, 1998), based on a pluralist methodology to record comparative outcomes and simultaneously investigate experience. This design accommodates a pluralist approach (Goss & Mearns, 1997; Cooper & McLeod, 2007) based upon pragmatism over paradigmatic analysis.

Following the analysis of results (Chapter 7), the concluding chapter (Chapter 8) will attempt to merge the results with those of the PEP (Chapter 2), in order to bring together the thoughts and feelings of two of the stakeholders in the school counselling relationship i.e. school counsellors and pupils. The aim is to fully understand the possible complement of traditional f2f school-based counselling services with an online adjunct.

Figure 6   A convergent parallel mixed methods design to investigate pupil usage of a counselling service offering both face-to-face and online mediums

Procedures

a) Data Collection
- *n* participants
- Variables: year group / gender / Core10 first & last scores / GBO first & last scores / choice of medium

b) Survey
- *n* participants
- 11 questions
- Variables: year group / gender / medium chosen / reason for preference explored
- Invitation to interview

Quan Data Collection

Products

(largely the same product outputs for Data Collection and Survey)

- Database with variables

Procedures

- *n* participants
- Recorded Interviews

Qual Data Collection

Products

- Text database transcribed for coding

Procedures

(same procedures applied to a & b above)

- Cleaning databases
- Input into software packages
  - SPSS, Excel & SurveyMonkey
- Analysis
- Descriptive & statistical results

Quan Data Analysis

Products

- Statistical & descriptive results in tables, charts & graphs
- Significance results

Procedures

- Transcribing data
- Coding
- Themes

Qual Data Analysis

Products

- List of quotes & themes
- Diagram linking themes

Merged Interpretation

- Sequential comparison in discussion chapter

4.5   Method

This study consisted of both quantitative and qualitative methods. It followed a tri-partite design:

> **4.5.1** Quantitative analysis of overall counselling service usage (including pupil year group, gender and presenting issue), alongside pre and post counselling outcome measures for each condition (i.e. clients who use the f2f service only, those who used the online facility only, or those that used both f2f and online in a blended way).

> **4.5.2** Quantitative and qualitative analysis of a post counselling Internet survey questionnaire

> **4.5.3** Qualitative analysis of post survey interviews

Students accessing the schools' counselling service during the research period and who were eligible to participate (see eligibility criteria in the participants section below), were invited to take part in any one, or a combination of parts of the research as outlined above. Each of these stages will now be explained, with sections on participants, procedure, materials, data analysis and bias. The ethics considered for each stage will be fully explored in the next chapter (Chapter 5).

It is acknowledged throughout this report that various tensions such as potential bias and ethical issues arose from my dual role as both researcher and counsellor in the schools where this research took place. There were however both advantages and disadvantages to this duality and these are acknowledged and expanded upon throughout this report.

A fuller discussion of this 'double-edged sword' (Mercer, 2007, p.3) is given in each part of the tripartite design in this methods section, followed by a discussion of ethical tensions in the following Chapter (Chapter 5).

4.5.1   Service usage
Participants

This group of co-educational independent schools currently has 1900+ pupils on roll. It was agreed with senior management that the online counselling service (as an adjunct to the f2f provision) would initially be open only to those in Years 12 and 13 (i.e. those aged 16 years - 18 years) from September 2015. This was considered both sensible and practical, as only one counsellor at this time had completed recognised training i.e. training endorsed by BACP to work therapeutically online, and there was no obvious way to predict client demand. From September 2016 another school-based counsellor had completed online counselling training, thus the online counselling facility was extended in Year 2 of the research to include pupils in Years 10 and 11 (i.e. those aged 14 years – 16 years).

The platform chosen for operating the service (detailed in Chapter 6) was pre-tested in the final half term of the academic year 2014-2015, in a small pilot and with Year 12 pupils only. Following the announcement of the online service pilot provision in a Year 12 assembly, two pupils contacted the counselling team asking for online counselling; one pupil chose counselling via email and the other via Instant Messenger. This pilot period (May – July 2015) was used for testing the platform itself, measuring ease of delivery and receipt of online outcome measures, and for the counsellor to develop familiarity with the system itself, as a precursor to beginning the research. These two pupils' data has not been included in the final data sets.

The online service was finally launched in September 2015 with an announcement in assemblies; posters (see Appendix 6) throughout the schools and leaflets distributed through new pupil packs.

During the period of research (Sept 2015 - Jul 2017 or six academic terms i.e. 72 weeks in total), pupils who approached the counselling service in the usual way (either self-referral via text, email, in person or via referral from a teacher/parent) were asked if they wished to receive their counselling f2f, online or a blend of both. If a preference had not been stated, they would have been randomly allocated using simple block randomisation to ensure similar numbers of pupils were evenly distributed (Sedgwick, 2011). However, all pupils stated a preference and therefore worked in their chosen counselling medium.

Procedure

Once participants had indicated which medium they wished to use, they were given information as to how to set up their first appointment in that medium. At the first appointment, informed consent was sought (see Chapter 5 Ethics) regarding participation in the research. This meant that (with participants permission) anonymised data was kept re gender, year group, pre and post counselling outcome measures and choice of medium for therapy. Following completion of their final counselling session, all clients were invited by email to participate in a survey about their choice of medium for counselling (see section 4.5.2 below). In the survey, the final question asked whether the pupil would be interested in taking part in an interview with the researcher (see section 4.5.3 below), if there was more that they would like to say.

Materials

Participants' anonymised details were recorded and stored on a password-protected spreadsheet. Categories listed included an anonymised client number, school year group, gender, pre and post counselling outcome measures (outlined below), presenting issue and medium chosen for counselling from any one or combination of these mediums:

1. F2f only
2. Email
3. Instant Messenger (IM)
4. Video
5. Voice

Options 2-4 were all considered 'online' counselling and this level of categorisation was used to note any differences in preference within the online medium for pupils that chose this option. The online category included clients who used the online facility only and those that used a combination of any of the online methods with some f2f school-based counselling.

There are many different outcome measures available for use with young people (Wolpert et al., 2012; Hall, 2015), but YP-CORE (Hill et al., 2011; Sefi & Hanley, 2012; Cooper, 2013; Perks, 2016) and CORE-10 (Gray & Mellor-Clark, 2007; Barkham et

al., 2013) are often used in research and much evidence supports their utility and reliability (Barkham et al, 2005, 2006 & 2012). As a researcher, I am familiar and comfortable with these freely available outcome measures, having used them as part of a BACP Children and Young Peoples Psychotherapy Research Network (BACP CYP PRN) initiative, which involved UK schools working as part of a joint venture between BACP and the Clinical Outcomes Research Consortium (CORC) since 2014. These measures were considered useful in this research, where comparative and normative data was available from other similar settings.

During the first session (either online or f2f) the use of outcome measures is explained and clients are asked for their permission to use them throughout the course of therapy. The CORE-10 measure is usually completed at the beginning of the first session of therapy (before therapy commences) and the Goals Based outcome is completed at the end of the first session if possible. Both these measures are repeated in every session thereafter if possible and if the client is happy to do so. At a minimum, clients are asked to complete both measures in their first and last sessions.

As a group of schools, the decision had previously been taken to use the Clinical Outcomes Routine Evaluation 10 or CORE-10 (Connell & Barkham, 2007) in school-based counselling f2f, rather than the YP-CORE with all senior school pupils using the school-based counselling service i.e. those aged 11-18 years. Thus the CORE-10 had been in use in this school-based counselling service for several years before the study began. It is an outcome measure that is easy to implement by individual practitioners using both 'pen and paper' and online methods. It is free to copy and the results enable service-wide analysis of data, which is particularly useful for practice-based research

This outcome measure was also chosen for this research, as it was felt most appropriate to this pupil cohort in terms of their levels of maturity and understanding (this group of schools is academically selective and also requires an entrance exam to be passed before a place might be offered). The original plan for this research had been to offer the online service only to pupils in Years 12 and 13 i.e. those aged 16-18yrs.

The decision to use the CORE-10 in this research was further supported by an authorisation of use (This email is included in Appendix 7) from the author of this outcome measure (John Mellor-Clark) including the suggestion it was the most appropriate measure for pupils aged 16 years – 18 years. Finally, this group of schools senior management felt that the CORE-10 also offered the clearest safeguarding measure for online counselling, as it had for the f2f work that it had been used for over the previous 8 years of f2f school-based counselling i.e. one statement is 'I have made plans to end my life' (Connell & Barkham, 2007, statement 6).

As mentioned earlier, during the first year of the pilot the online service was only open to pupils in Years 12 and 13, i.e. those aged between 16 years and 18 years. However, it was then extended into Years 10 and 11 in the second year of the research. This was principally due to initial caution on behalf of the school (and the researcher) as to how this new option may be utilised by pupils and also to ensure that at a practical level the service provision would be able to meet the, as then unknown, demand.

It is acknowledged however that the CORE-10 is not the most widely used evidenced based measure in research with young people under the age of 16years. It does not have the evidenced utility and reliability that the CORE-YP has in research with young people, therefore it has proven difficult to directly compare any results from this studies with any similar studies with young people.

There are ten statements in the CORE-10 measure and clients consider whether any of these are true over the period of the preceding week, either not at all, only occasionally, sometimes, often, or most/all of the time. Each of these ten statements is assigned a score of 0-4, depending on how often the statement is applicable to the client's experience in the previous week - for example if a client ticks 'only occasionally' for statement one, they would be scored 1 for this. The scores (from a maximum of 40) are interpreted within the following ranges (Connell & Barkham, 2007):
- 11 and under – below the clinical threshold i.e. healthy to low level distress
- 11-20 mild to moderate levels of distress

- 21-25 moderate to severe levels of distress
- 25 and above: severe levels of distress

Furthermore, clinically significant change occurs in therapy when a client moves from a 'clinical' score to a score within the 'normal' population i.e. 11 and under. Each pupil was informed of their choice to use the outcome measures or not (just as they had been informed of confidentiality and consent for counselling, e.g. Gillick v West Norfolk & Wisbech, 1983 & 1985).

The other outcome measure used in this study was a goals-based outcome (Law, 2009 & 2012) measure. Clients were asked to select a primary goal that they wish to work on in therapy and consider where they were at the beginning and end of their counselling period, on a scale of 1 to 10 (where 1 is no progress toward this goal being achieved, and 10 is the goal having been achieved) at both the first and last counselling sessions.

Data analysis

Service usage was analysed to produce both descriptive and statistical results. The descriptive results (bar charts, pie charts and tables) give total numbers of pupils using either the f2f or online service in terms of year group, gender and presenting issue for each year of the study and the overall totals. The online data was further analysed in terms of those that chose to work purely online, and those that chose to use the online service in a blended way with f2f counselling. These totals were tested for correlations between the variables recorded (year group, gender, presenting issue) and the choice of counselling medium (f2f, online or blended).

Average (mean) and standard deviations of pre and post counselling CORE-10 and GBO scores for the f2f and online conditions were recorded. The online condition was broken down for analysis in terms of results for those that chose to work online only or in a blended way (i.e. f2f and online combined). Repeated measures t-test calculations were performed on the data to determine any statistically significant differences between the groups. Jacobson plots were used to illustrate this pre and post CORE-10 and GBO data (see Chapter 7 Results).

Bias

It is acknowledged that bias can happen at any stage of research and occurs when the researcher consciously or unconsciously favours one outcome or answer. Pannucchi & Williams (2010) suggest that 'Bias is not a dichotomous variable. Interpretation of bias cannot be limited to a simple inquisition: is bias present or not? Instead, reviewers of the literature must consider the degree to which bias was prevented by proper study design and implementation' (p. 619).

Details of how bias is accounted for, including any role bias, are given at each stage of the research procedure. Regarding this service usage section, the following sources of bias were considered:

Insider researcher bias – I am both the clinical counselling lead in this group of schools and the sole practice-based researcher in this study. Being an insider-researcher in an educational setting (Anderson & Jones, 2000; Hockey, 1993; Labaree, 2002) is considered to have advantages and disadvantages, both of which may contribute bias. Indeed, Mercer (2007) describes this position as 'wielding a double-edged sword' (p.3):

> What insider researchers gain in terms of their extensive and intimate knowledge of the culture and taken-for-granted understandings of the actors may be lost in terms of their myopia and their inability to make the familiar strange (p. 5).

The ethics of being an insider-researcher in an educational setting (Anderson & Jones, 2000) will be discussed in the next chapter, but it is important to note that beneficence, non-maleficence, autonomy, and fidelity were fully considered before research was embarked upon, and continually re-visited throughout the process in conjunction with my clinical and academic supervisors and in regular meetings over the six years of the research period with DPsych peers.

Advantages of being an insider-researcher include having relatively easy access to intimate knowledge of the context of the research study (both historically and in its present format) with its associated politics, hierarchy, and understanding of the funding behind the current operating format of the school-based counselling service. As a Head of the Wellbeing Department (which includes line management of the Counsellors, Coaches, Nurses, Chaplains and Personal Social Health Education

teams), I have built up credibility as someone who is trustworthy and capable when considering what activity may be pursued in the best interest of pupils and in particular, with regard to school-based counselling.

One of the main disadvantages of being an insider-researcher is clearly separating the roles of counsellor and researcher, and this required substantial thought, effort, clarification and supervision throughout the research process (see Chapter 5). Other disadvantages include maintaining objectivity, keeping enough distance from the research topic generally so as not to alter the research outcomes and maintaining a constant level of raised awareness so as not to miss anything that might be useful due to over-familiarity with the research site and/or research topic.

In order to mitigate these disadvantages, I made a conscious decision not to reveal too much information about the details of the study, or my own opinions on the topic in public with pupils and staff, in order to minimise contaminating others' opinions. I asked for regular feedback on any clear indication of bias before, during and after study design, operation and completion from various external sources (Costa & Kallick, 1993; Deuchar, 2008), such as my academic advisor and my academic consultant. I also kept a reflexive diary to help identify and balance biases (Tufford & Newman, 2012). The ethics of being an insider-researcher will be considered further in the next chapter.

Selection bias – This can occur when sufficient randomization cannot be achieved in the selection of individuals or data for a research project, and therefore the sample may not be an accurate representation of the target population. Selection bias can include sampling bias, attrition (dropout rate) and sample size i.e. too few participants in any sample or group. For this study, it was acknowledged that pupils involved in the study were self-selecting in that they had approached the school-based counselling service specifically and were therefore more likely to be drawn to taking part in this study than the general pupil population. However, this was balanced against the fact that these participants would be able to reflect on choices that they had made in reality i.e. to request school-based counselling either f2f or online, as compared to a general population who might only answer on the basis of what they *think they would do*, rather than necessarily what they *would actually do*.

Efforts were made at various parts of the research (see sections 4.5.2 and 4.5.3) to prevent attrition, such as follow up emails to participants. There were also efforts made to increase the sample size such as increasing advertising around the school i.e. posters and reminders to key pastoral staff of the existence of the service. However, it is acknowledged that there would be some, perhaps significant, selection bias in this research.

4.5.2 Post counselling Internet survey
Participants

Pupils who used the counselling service during the research period (*N*=68) were invited to take part in a self-designed Internet survey (see materials below) once they had finished their counselling with the school-based counselling service. This population seemed particularly suited to an electronic survey, as all pupils had access to the Internet both at school and at home and were generally considered active technology users as the majority of homework in this school setting was set on an electronic platform. It was hoped that a large number of responses would add to generalizability. The survey was designed so that it could be completed on a phone as well as a laptop or desktop computer, for ease and convenience of completion.

Procedure

Online counselling methods seem particularly appropriate when investigating online counselling (e.g. Skinner & Latchford, 2006) and offer some distinct advantages. The Internet survey itself is a low cost, fast response method, within a potentially large, widespread geographical population (Axinn & Pearce, 2006). Data entry is automated, reducing potential for human error, and the software used can partially analyse results in a variety of formats. It also provides the option of browsing both collective and individual responses easily.

Response rates are often lower than expected in online surveys (Witmer, Colman & Katzman, 1999), but there are several things that a researcher can do to improve them (Fink, 2013). Within this research, various strategies (Póitorak & Kowalski, 2013; De Vaus, 2004, Bradburn et al, 2004, Dillman, D.A, 2006, Boynton & Greenhalgh, 2004, Wansink et al., 2003, Naithani, 2012) were employed to ensure maximum

success (Appendix 8). These included ensuring the survey was easy and engaging to read for the target audience (15-18 year olds), endeavouring to construct the survey so that it was 'to the point' and relatively short in length, with question formats that were easy to complete, estimation of completion time clearly articulated, and most importantly anonymity was assured (Ilieva et al., 2002).

Disadvantages of online research methods include technical challenges for both the researcher and the researched (Illingworth, 2001), and the fact that generally not everyone in the UK has access to the Internet (Office for National Statistics, 2017), though as mentioned earlier, this was not true for this population.

The post counselling survey questions (Appendix 9) were designed with the above information in mind. The aim was to investigate why pupils had chosen their specific medium (f2f, online or a blend of both) for the school-based counselling that they received. Pupils were asked demographic questions (gender, year group, school setting) to test for representativeness, and to use with later questions to investigate any correlations. They were asked what they believed the advantages or disadvantages of f2f and/or online school-based counselling were, and for any other thoughts or feelings that they had about this subject. One question asked if they had used outcome measures and if so, which ones. This question was added to test for representativeness of pupils using outcome measures in both online and offline mediums. The final question asked them to take part in an interview, if they wanted to say more about the subject of school-based counselling. It was made clear in the invitation to interview and at the start of the interview (see Chapter 5 for more information regarding ethics), that interview questions would not be connected to the content of their counselling work, but only the mode of delivery i.e. counselling online and/or offline.

The face validity (Bagozzi et al., 1991; Schwab, 1980) of this survey was tested by sending several versions to a small sample of professional peers and young people not involved in the study. The request asked them to consider whether the wording and format might measure what they were supposed to measure, thus testing for construct validity. This testing phase resulted in a small number of changes to the wording of the questions to make them easier (and quicker) to read.

Before final questionnaire release, the survey was again sent to a small number of peers not involved in the research (including reminders), to test, refine and ensure readability, ease of completion and double entry (multiple answers from the same user would not be counted as per the default of the purchased survey software package). Pre-survey testing generated length and processing time of responses received, which aided estimation of the scale of the task, and completed a final quality control mechanism.

Throughout the research process, collaboration and critical feedback was provided by fellow DPsych candidates to co-ordinate aspects of the design, content, analysis and corroboration of findings. These peers worked closely alongside the researcher throughout the project, from instigation to completion, in the role of 'critical friend' (Costa & Kallick, 1993; Foulger, 2010), to discuss key aspects of the research, ask probing questions and give helpful critique and bringing any perceived bias on the part of the researcher into discussions. These peers did not work in school environments and this lack of personal contextual understanding gave a wider perspective i.e. a 'step back' to see the data more clearly within its unique context.

There were three main stages to the survey procedure:
1. The survey was sent out to participants via an introductory email (Appendix 10) with a direct link to the survey embedded in the email. This email also had an attachment giving information about the study and asking for consent to participate (Appendix 11). An explanation of how to withdraw consent at any point in the process was also given. A follow up email was sent to all respondents after two weeks. Ethical considerations will be fully expanded upon in Chapter 5.
2. The link directed participants to the survey questionnaire (Appendix 10)
3. Following survey completion, there was a link to a de-briefing and thank you email (Appendix 12), with reminder information of where to access support or information, if affected by the research in any way.

Materials

The survey was designed using online survey software with eleven questions. Questions 1 to 5 were employed to test the representativeness of the sample achieved. Participants were asked to describe their school (boys only, girls only or Co-ed), gender, year group, and medium chosen for counselling and then asked about their preferences therein. These results were later compared with data provided by both the overall service use data in the study and from the schools' previous years' annual statistics of service use where available.

Questions 6 to 10 focused on the experiences, thoughts and feelings of the respondent with regards to f2f, online or blended communication for school-based counselling and also asked about the use of outcome measures. Questions 1 to 5 were designed to test for correlations with these later questions where possible, for example between gender and choice of medium for counselling; or medium chosen and any advantages declared. The questions about outcome measures used were designed to test for representativeness of outcome measures used across both online and offline (f2f) mediums.

Question 11 invited the respondent to take part in a follow up interview and twelve respondents agreed to do so. However, two of these omitted to leave contact details, and ten interviews were therefore carried out post survey completion.

Data Analysis

The survey data was analysed both quantitatively and qualitatively.
Quantitative analysis of responses to 11 questions provided a basis for descriptive and statistical analysis with SPSS version 21 using Chi-square and t-tests for independence.

Ten questions were analysed quantitatively and questions 5, 6, 7, 9 and 10 were also analysed qualitatively, using in-built survey software that provided an analysis of frequency of most common words from the answers given. This was used to aid formulation of 'categories' i.e. a set of themes or recurring patterns (McLeod, 2011). These were then used as a basis for and to supplement the information provided in the thematic analysis of participant interviews.

Bias

A concern of this survey method generally is sampling bias (Altmann, 1974; Patton, 2005; Lavrakas, 2008 & 2012). It has been suggested that 90% of people aged 16+ years in the UK in general have Internet access (Office for National Statistics, 2017), thus 10% of the UK population may not be represented in any electronic survey. However, this is likely to be strongly mitigated in this instance as all participants in the study had access to the Internet during school hours and also were highly likely to have access at home (as said, the majority of homework in this group of schools is set on an online platform).

Internet comfort, familiarity and acceptability (Berke et al., 2011; Haase et al., 2012) are other sources of potential bias mentioned in internet survey research (Wright, 2005), but again this is likely to be mitigated against as this particular participant population is known to regularly use technology for learning. There is also a drive in this group of schools to use technology even more as the schools are working towards becoming one of the first paper-free schools.

Another concern is that respondents interested in the subject matter may be more likely to respond than those who are not, which may bias results (Stanton, 1988; Thomson et al., 2003). The survey was therefore designed to take this into consideration (Appendix 8), through careful deliberation of the phrasing of the invitations and survey questions, and also by reminders to increase participation. However, it was acknowledged that there will have been some, perhaps significant, selection bias and any later claims from this research have been moderated considering this.

It may have been possible to reduce bias further by additional follow up emails to participants who had yet to respond etc. However, time and impact upon the participants (51%) that had responded (since the participants completed the survey anonymously, there was no way to target only those that had not responded) prohibited this. Follow up emails were therefore only sent twice.

4.5.3 Post counselling interview
Participants

Pupils (outlined in 'participants' in the survey section above) were invited to take part in an interview following their involvement in the survey if they responded affirmatively to the final survey question:

> 'Would you be happy to be contacted for a short interview about this research? You will **not** be asked about the content of your confidential counselling sessions. The interview would only focus on the method that you chose for counselling i.e. whether you had sessions online or face-to-face (or both). The interview could take place in person or online in a time and place that suits you...'

A follow up email was then sent to these participants outlining the details of the interview and asking them to confirm a day/time to meet either in person or online. Follow up emails were sent once to participants that did not reply. The one researcher involved in this study, who was also a school counsellor, carried out all interviews. This meant that two of the participants who agreed to be interviewed also had had their counselling with the researcher. Extra consideration (see ethics in Chapter 5) was therefore taken to ensure that the boundaries of relationship were clear, and expectations of the interview were openly acknowledged before, during and after the interview process. However, it is acknowledged that this may have also introduced bias into the results (see bias section below), which were moderated in light of this.

To moderate this bias, all interviews took place in an office in a different part of the school premises that had never been used for counselling. The layout of this office (a small room just off the schools main reception area, with two chairs either side of an office desk, and a filing cabinet), suggested it was used for administration purposes and not associated with school-based counselling in any way.

Pupils who volunteered to take part in an interview with the researcher were interviewed soon after their final counselling session had been completed. The advantages were that the experience of the medium used for counselling would be better remembered and there may be increased motivation to participate. One disadvantage was that it might have been more difficult to separate the experience of the counselling received (whether perceived as beneficial or not) from the medium in which it was delivered.

Procedure

Following self-selection for interview, participants were contacted in their stated preferred way (i.e. by phone or email) and interview arrangements were agreed. Before the interview took place, the researcher asked the participant to read an information and consent sheet (Appendix 13) and answered any questions about the research, without compromising the research questions. Participants were asked to give signed permission for their involvement before the semi-structured interview took place and were given a copy of this to take away with them.

The interview questions (Appendix 14) were semi-structured (Robson, 2011) to allow more flexibility of response with minimal prompting from the researcher, and the opportunity for probing more deeply as required (Hutchinson & Skodal-Wilson, 1992) in a way that a survey response would not allow. The questions listed were used as a checklist of topics to be covered, but were questions that could easily be modified or asked in a different order, based on the flow of the interviewee's responses. The questions were tested by a preliminary run-through with two colleagues (separately) to consider any ambiguities and ask for constructive criticism to improve the structure (Mann, 1985) as required.

Interviews were carried out with the participants based on the research area, but with flexibility to allow the discussion to move into any areas with regards to the research topic that the interviewee felt necessary. The pupils were interviewed individually in a confidential setting as described above, and interviews were recorded and transcribed verbatim. These transcripts were then utilised for the data for a thematic analysis. The participants remained anonymous, were assigned pseudonyms and given participant numbers for discussion. Participants were asked if they wished to have a copy of the transcripts or a summary of the research when it was complete if they wished. All interview participants took a signed copy of the information and consent form away with them at the end of the interview (Appendix 13).

Materials

The interview questions were devised to encourage the participant to talk about the area of interest using a series of semi-structured questions, but leaving more than 50% of the interview to provide 'space' for the interviewee to expand upon their

experiences, thoughts and feelings. The majority of the interviews (90%) took place in a private room on site during the school day and were recorded on a password-protected device. One participant was interviewed online (on the secure, encrypted platform used for school online counselling purposes) via instant messenger during the school holidays, as it was not possible to meet during the school term. This was the stated preference of the participant, and though the semi-structured questions used were the same, the process of typing rather than speaking may have limited what was achieved in one hour (the maximum time given for the interviews). It was interesting to note that this participant had accessed counselling through f2f only and during the interview stated that she didn't realise online counselling had been available. This was taken into consideration with regards to later analysis of all responses.

Thematic analysis was then carried out by the principal researcher alongside three other researchers, who were fellow peers from the Doctorate in Psychotherapy by Professional Works at Metanoia Institute, as a valuable means of quality control.

Data analysis

The qualitative data (recorded interviews) were captured as soon as possible after the client had completed their counselling sessions, as it was believed that leaving too long a gap after counselling may lead to less enthusiasm for participation in the study.

Qualitative analysis of these post-counselling interviews provided the data for the thematic analysis. Results were collated and tabulated and initial points of interest noted. Thematic analysis was chosen as a method of analysing the interview transcript data, as it is a commonly used process employed by many research-clinicians (Taylor & Brogden, 1984) using qualitative data. Thematic analysis is generally used to treat 'accounts' as a resource for finding out about the reality or experiences to which they refer and interpreting various aspects of the research topic (Boyatzis, 1998). Thematic analysis differs from other qualitative analytic methods that seek to describe patterns across data, such as Grounded Theory and Interpretive Phenomenological Analysis. It 'does not require the detailed theoretical and technological knowledge of approaches such as Grounded theory (Strauss & Corbin,

1998) and Discourse Analysis (Willig, 2003) and it can offer a 'a flexible approach that can be used across a range of epistemologies and research questions' (Braun & Clark, 2006, p. 97).

Furthermore, thematic analysis is a method that is relatively easy to learn, apply and use in collaboration with those who are not engaged directly in the research. It can usefully summarise a large body of data, and give an example of 'thick' description. Some of the disadvantages of thematic analysis are that it can have 'limited interpretative power beyond mere description' (Braun & Clarke, 2006, p. 97), if it is not used within a wider theoretical context. It also does not allow for as deep an analysis of individual accounts as other methods, such as Conversation Analysis (Hutchby & Wooffitt, 1998), or Interpretative Phenomenological Analysis (Smith & Osborn, 2003).

In this study, thematic analysis was used to search across the data set to find any repeated patterns of meaning concerned with experiences of chosen therapy modality (f2f only, online only or a blend of both) as well as any influence on the therapy itself. The interviews aimed to see things from the perspective of the participants' own understanding of their experiences of therapy in the chosen modalities and their thoughts or feelings about school-based online counselling.

From the conversations that took place in these interviews and the resulting transcripts, themes emerged that were identified by 'bringing together components or fragments of ideas or experiences, which often are meaningless when viewed alone' (Leininger, 1985, p. 60). Themes can be defined as units (Braun & Clarke, 2006) derived from patterns, for example 'conversation' 'topics', 'vocabulary', 'recurring activities', 'meanings' or 'feelings'.

Thematic analysis was carried out according to the guidelines proposed by Braun and Clarke (2006, p.87) using the following stages:
1. Transcription of and in-depth familiarisation of the data
2. Generation of initial codes
3. Searching for themes
4. Reviewing themes

5. Repeat of steps 2 to 4 by co-researchers for verification
6. Defining and naming themes
7. Producing a report

Following interview, the transcripts and recordings were scrutinised thoroughly by the researcher and initial 'points of interest' were noted. The data was analysed separately using the same process by three DPsych peers who were independent of this research, as collaborative analysis (Gallagher, 2008; Gershon, 2009; Phillips et al, 2013) provided valuable quality control. Interview transcripts were sent via password-protected email to these three collaborators separately and each person was asked to use steps 2 - 4 (Braun & Clarke, 2006) outlined above. They were given transcripts and the research title and asked to identify 'points of interest' or 'themes'. This was to promote validity of themes discovered by limiting bias. Following individual scrutiny and analysis of the transcripts, further discussions took place between the collaborators in several online meetings until agreement was reached on a set of themes and sub themes which are outlined in the results chapter (Chapter 7).

Bias

As mentioned above, one of the difficulties with this research was that I was sole researcher, lead school counsellor and the only counsellor on the team qualified to work therapeutically online for the first six months of the research. I had been working in this group of schools for ten years, and my role involved working with pupils in a variety of ways other than one to one counselling. These included for example delivering co-curricular clubs, workshops, courses in Mindfulness, presentations on mental health topics and so on. The majority of pupils were therefore used to seeing me in a variety of roles both inside and outside the counselling room. Therefore, whenever I am involved in a new counselling relationship online or f2f with a pupil, I always contract carefully around boundaries at the outset of the therapeutic relationship.

I believe that having many roles within the school context may have increased the credibility and rapport in interviews with participants in the study, which in turn may have increased the level of openness (Hockey, 1993) in research participation. However, I was also aware of some potential negatives of this, in that I may be

considered too much of an 'insider'. It could be difficult for some participants to share information with someone so closely involved in the life of the school, and its inherent power dynamics, for fear of being judged (Shah, 2004). Additionally, as an 'insider', some participants may be more likely to tell me what they think that I want to hear, rather than what they really think and a researcher external to the environment may have elicited more honesty from participants. However, research (Parades, 1977; Freeman, 1983) indicates that being an 'outsider' may also have its difficulties, with participants more likely to 'present outsiders with a distorted image' (Mercer, 2007, p.8).

I was careful to state clearly and regularly (in person and online) to participants in all of the documentation involved in the research (invitations, information, consent), that the survey and interview would be about the *method* of counselling delivery i.e. whether they had counselling f2f or online (or both) and not about any of the *content* of the counselling sessions.

All interviews (except the one that took place online) took place in the purposefully selected office mentioned previously, which was chosen specifically to reinforce the distinction of any previous counselling relationship with the researcher. The exception to this was the one interview that took place online via text only, in the same encrypted environment that had been used for online counselling. This client had had counselling f2f with another school counsellor and chose the online medium for interview as they wished to take part during the school holidays and this method was therefore the most convenient. As mentioned previously, it became apparent during the interview that this client was not aware of the online school-based facility, therefore chose f2f automatically without much thought and reflected upon this during the interview. This will be explored more in the results and discussion.

I was always aware of the complication that two of participants had also been counselling clients of mine. Whilst I believe that I took extra care to be explicit about boundaries, I am aware that this would have introduced some additional bias. This complication is also considered from an ethical viewpoint in the following chapter, along with other ethical considerations taken into account throughout the research design, implementation and analysis of results.

Chapter 5   Ethical considerations

This chapter describes the ethical considerations taken into account throughout the FP research. It will begin with general ethical aspects, followed by an account of the ethical issues considered in collecting school-based counselling usage data in this schools group. The next section considers the ethics of researching with children and young people and ethical considerations in developing an online school-based counselling service. The final sections outline specific ethical considerations with regards to participant involvement in the post-counselling Internet survey and the post-counselling interview.

5.1   General ethical issues in the Final Project research

While the various codes of ethics and guidelines described throughout this chapter provided a strong structure on which to build my research, I also believe that 'research codes and guidelines are not enough to ensure ethical behaviour' (Danchev & Ross, 2014, p.22), and that who we are is also a crucial factor. I consider both professional ethical guidelines and the considered personal ethics of researchers are important in ensuring no harm comes to participants; that respect is shown for their autonomy, dignity, privacy and confidentiality, and due consideration is given to how participants (and potentially others) may benefit from the research in which they are involved. Furthermore, as research ethics can be situated in very different contexts there can be no 'one size that fits all', i.e. 'ethical codes are a guide, but they cannot dictate to the researcher what to do in a specific, unique situation, nor can they absolve the researcher of responsibility for action taken in the research' (Cohen et al., 2018, p. 118).

Understanding ethics at the Five-level Model of Ethical Reasoning (Kitchener and Kitchener, 2009) clarifies that ethical reasoning could and should take place at various levels and be interwoven in all aspects of the research process. These levels involve gathering information on a situation and applying ordinary moral sense to it at a first level, followed by a consideration of ethical codes and guidelines alongside ethical theory, with a final level consideration of meta-ethics or the meaning of ethics. These levels were considered throughout the various stages of this FP research.

Finally, there has been a recent shift in mind-sets towards research studies involving children and young people (Shaw et al., 2013; Nuffield Council on Bioethics, 2015; Graham & Powell, 2015; Sammons et al., 2016), as 'we have learnt that, rather than protecting children and young people *from* research, we need to protect them *through* research and there is a strong recognition of the need for ethically and scientifically robust ways to conduct relevant clinical research *with* children' (Sammons et al., 2016, p.1086). While researchers must always consider young people's competencies and their potential vulnerability to exploitation and differences in power differentials, by working more closely in partnership with young people and their families throughout the whole research process, the risks of research placing young people in situations that make them vulnerable are further minimised.

5.2   Ethics considered in service usage and outcomes data collection

Parents and pupils are given information about school-based f2f and online counselling in this group of schools through various means: through a leaflet in all 'new pupil' packs provided when joining the school, regular reminders in various school electronic communications with both pupils and parents, by counsellors being present at parent evenings, parent talks, pupil talks, workshops and parenting courses, all of which is in line with best practice guidance in this area (BACP, 2011 & 2015).

With regard to accessing school-based counselling (either f2f or online) in this group of schools, young people over the age of 11 years are generally able to utilise the service directly i.e. without explicit parental consent. They are generally considered to be 'Gillick competent' (Gillick v West Norfolk & Wisbech, 1983 & 1985), although this competency is also assessed on a case-by-case basis between each client and individual counsellor. However, counsellors encourage pupils to talk to others (parents, teachers, school nurses etc.) where possible and there are very few young people in this group of schools that access school-based counselling without the knowledge of at least one other adult in the young person's life.

The school-based counselling team endeavours where possible to work closely with parents and aims to be as transparent as possible regarding school-based counselling. For example, this group of schools' Counselling Policy states that

'information about service use is collected and statistically analysed annually. This anonymised service user data is provided to senior staff management teams initially to respond to any 'patterns' or 'needs' as required, and to plan future service development effectively' (Hennigan, 2017, p.6). A summary of annual statistics is then shared with all staff and parents. Parents are presented with a general breakdown of current school-based counselling service usage at annual parent presentations at the beginning of the academic year, both to raise general awareness about school-based counselling and help de-stigmatise and normalise help-seeking behaviour of young people in the school context.

Service usage data (including outcome measures) has been being collected over the past ten years and continues to date. Clients are given information about this data collection (for example pupil year group, gender, outcome measure scores, presenting issues) at their first contact with the counselling service and asked for their consent for this anonymised data to be held (Appendix 15) and used in reports and presentations as outlined above.

This service data collection was used in the first stage of involvement in this research for those pupils eligible to participate (see section 5.3 below). Participation in the study involved three separate parts and if clients chose they could participate in one or more of the following (consent to participate was re-negotiated at each stage as outlined in sections 5.3, 5.4 and 5.5):

- Contributing anonymised data such as year group, gender, and outcome data
- Completing a post counselling Internet survey
- Being involved in a post survey interview, which was recorded and transcribed

All participants were assured that their decision to be involved (or not) in any part of the research would have no bearing on their counselling relationship either at that time or in the future. Verbal and written reminders of their right to withdraw consent before, during and after the study were given at all stages of the research. Pupils were also given the opportunity to work with alternative members of the schools counselling team who were not involved directly in the study, though it is acknowledged that for

many young people this may have been very difficult to do because of the inherent power differential in the adult-child, pupil-staff, counsellor-client, researcher-researched dynamic.

5.3   Ethical issues researching with children and young people

As an accredited member of BACP, I observe and follow the principles of BACP Ethical framework for the counselling professions (2016) i.e. trustworthiness, respecting client autonomy, beneficence, non-maleficence, justice, and self-respect. Throughout this research, I was mindful of BACP Ethical guidelines for researching counselling and psychotherapy (Bond, 2004) with regards to safeguarding research participants through trustworthiness, managing risk, considering aspects of relationships with participants, research integrity and governance. These guidelines are particularly important when considering vulnerable groups such as counselling clients; but especially as the research participants in this study were young people (Shaw et al., 2011; Grieg et al., 2013; Graham et al, 2013 & 2014) within a schools context (Rees et al., 2007). I referred regularly to the National Children's Bureau (NCB) Guidelines for Research with Children and Young People (Shaw et al., 2011) which suggests that 'recognising that CYP [children and young people] are experts in their own lives is vital to ensuring that the voices of CYP, including those from vulnerable backgrounds aged up to 18... influence research, policy and practice, and inform service developments' (Shaw et al., 2011, p. 4).

In addition, as part of this research involved online methods (online counselling, post counselling Internet survey and one of the post-survey interviews) ethical issues regarding Internet research (Hoerger & Currell, 2012; Cohen et al., 2018) were also considered (see section 5.5). I considered and complied with the following guidelines with regards to Internet-mediated research:

- Guidelines for Online Counselling and Psychotherapy (Anthony & Goss, 2009)
- British Psychological Society's Ethical Guidelines for internet-mediated research (2013)
- The Online Therapy Institute's Ethical Framework for the Use of Technology in Mental Health (Nagel & Anthony, 2009).

I also considered and complied with best practice guidance regarding working therapeutically with young people in schools:

- British Association of Counselling and Psychotherapy Good Practice Guidance for Counselling in Schools, 4th Edition (2006).

A notification of this research was lodged with the Information Commissioner's Office once ethical approval was achieved from the Metanoia Institute (Appendix 16), and prior to commencement of collection of any data for the study, the Internet survey and/or the interviews. This was to clarify current Data Protection requirements and comply with current legislation regarding unsolicited 'spam' emails.

At no point were pupils to be asked about the content of their counselling sessions and due care was taken if any such content was brought up by participants (see sections 5.4 and 5.5 below). The focus of the survey and interview were to elicit the thoughts and feelings of young people on choosing school-based online counselling as an adjunct to an existing f2f service. Following a stakeholder analysis (Appendix 17), the risk of this research causing harm to participants was considered low and will be considered in the next paragraphs. However, the risks that needed more detailed consideration were the practical and ethical management of the usage of the online counselling service itself, which will be explained in section 5.4.

As mentioned above, a stakeholder analysis (Appendix 17) was carried out prior to commencing this research, with a consideration of risks alongside responses for management of those risks to a specified acceptable level. This was discussed at the outset and throughout the research with the schools senior management team and the researcher's Clinical Supervisor and Academic Consultant, who is both an experienced online therapy clinician and respected researcher in this field (Anthony, 2000, 2004, 2010, 2015; Anthony & Nagel, 2010; Anthony, Nagel & Goss, 2010), and who had co-authored BACP professional guidelines for best practice in online therapy (Anthony & Goss, 2009) and online clinical supervision (Anthony & Jamieson, 2005). The risks of providing online counselling for school-based pupils were considered in collaboration with both school-based and external professionals and how they were managed is outlined in the section 5.4 below.

Each pupil eligible to participate in the research over the two year period (i.e. those in the academic year groups involved and who sought counselling), was offered a full explanation about the study both verbally and through an information sheet (Appendix 11) indicating what was being asked of them and requesting their consent before participation, with clear signposting as to where to take any concerns throughout their involvement. This information was given in hard copy where possible (i.e. to f2f clients) and via encrypted email to those that chose to work in the online medium.

As will be expanded upon in Chapter 6 (Building an online counselling service), pupils from years 12 and 13, i.e. those aged 16+ years were able to access the schools online counselling service for the first year of the study. This was due to only one qualified online therapist being on the schools' team, when an additional therapist from the team qualified to work online the service was extended to include pupils from school years 10 and 11, i.e. those aged 14-16 years.

It is considered best practice for most research studies with young people under the age of 16 years to gain direct consent from the parent as well as the young person. However, parental consent may be waived where actively seeking parental consent would breach a child's right to confidentiality (Shaw et al., 2011). All pupils in this research were using the schools-based counselling service (widely and regularly advertised to parents as outlined above) and may or may not have informed their parents of this. Consent for the involvement of any pupils in this research was therefore sought initially directly from the gatekeepers of this organisation i.e. the schools' senior management team, who are considered 'in loco parentis'. Consent was then sought from the young people themselves. On-going discussions with the schools' senior management team, my DPsych research peers and my academic consultant all helped me to reflect upon research ethics and practice, which helped me to challenge and amend anything that might influence the research process, or have a negative impact on the young people involved.

As all pupils in this group of schools are generally considered competent (also assessed individually on a case-by-case basis) to enter into counselling relationships without direct parental consent, they were also asked directly for their consent to be

involved in this research. This was not a single transaction between researcher and participant, but (as outlined in the sections below) an on-going process throughout each stage of involvement in the research (see sections 5.4 and 5.5 below).

5.4 Ethical issues in developing an online counselling adjunct to a f2f school-based service

As part of this research involved online counselling directly with pupils, specific considerations were given to the online counselling aspects of the study. These included the researcher receiving in-depth training in online counselling (via the Online Therapy Institute), increasing technical skills and competence and becoming knowledgeable about the legal and ethical aspects of counselling online in schools. This included ensuring pertinent and necessary information being given to clients at the outset, e.g. crisis intervention information, and information relating to the importance of understanding how counselling online can be different to f2f.

As part of the stakeholder analysis, concerns arose from the schools' senior management team regarding the operation of the school online counselling service, in terms of practical management, safeguarding pupils and data protection. One example given was if a pupil contacted the online school-based counselling service out of operational hours and needed urgent help - what would happen to ensure that appropriate help could be given? This concern was mitigated as follows.

Pupils were only given a link to the online counselling platform once they been through the initial informed consent process. The link was sent to the pupil's school email address, which helped to identify who this pupil was - even though pupils can create a unique username and password of their own once they are on the online counselling platform, they are never anonymous to the school counsellor in this service. Throughout the online counselling process, the online counsellor has access to the same client personal information (such as teacher or parent contact details) as are available for school-based f2f counselling.

The initial contact also involved sending the pupil information (Appendix 18) about what was different about working online, the operating hours, limits of confidentiality, how conversations online would be kept secure, what to expect and where to go for

assistance if urgent help was required. Following this, when the client accessed the online platform with their unique link they were taken immediately to a landing page bearing the school logo and photos of the school counsellors (Appendix 19). This had two purposes - to reassure pupils that they were in the right place, and to immediately highlight clear information as to where to go for urgent help if the pupil had visited the site outside operating hours. In the three years that the online school-based counselling service has been operating, there have been no incidents of inappropriate out of hours use.

Conversely, it is interesting to note that crisis contact from pupils using the f2f service may also occur 'out of hours'. Pupils have always been able to contact the f2f service in a number of ways, such as in person, text, or email to set up initial appointments. Pupils can self-refer for f2f counselling via email using a generic counselling email address, and even though this is also advertised as operating within certain hours, it does not mean that pupils *cannot* still make contact in this way at any time. In 2010, before the introduction of the school-based online service, an email was sent at 11.30pm to the generic school-based counsellor email address from a pupil suggesting that they were feeling suicidal in that moment, but I did not read this email until the following morning at 6.30am. However as I had access to the pupil's parent contact details (as do all f2f counsellors in this service), I was able to make immediate direct contact with both the parents and with the schools Designated Safeguarding Lead. I am pleased to say that after contact was made with the parents it was established that the young person was safe, the situation was not as this student had implied and all ended well. This example shows that as many f2f school-based counsellors also use technology for administration purposes (Glasheen et al, 2015; Hennigan & Goss, 2016,), it is important to acknowledge that f2f services also have elements of risk that are not always predictable. It is however important to consider these risks, and how to manage them to an acceptable level as much as possible.

Basic competence as an online counselling practitioner also included having alternative ways of communicating with clients if the primary method of communication fails - e.g. technological breakdown - while always maintaining the confidentiality of the work. Training specifically to work effectively in online therapeutic relationships increased my skills and competence in relational facilitation in online

environments, as well as being mindful of the potential impact of the disinhibition effect (Suler, 2004) on clients' early disclosure of sensitive, or intimate, details. I therefore took extra care to explain to any clients that engaged in online counselling what might be different about working online therapeutically, and how this could be managed.

The online platform explicitly chosen for counselling with pupils (www.Plusguidance.com) was selected as it operated software that was in line with best practice guidelines in this area (Anthony & Goss, 2009) and was compliant with both the Health Information Technology for Economic and Clinical Health Act (2009) and The Health Insurance Portability and Accountability Act (United States, 2004). It utilises browser-to-browser encrypted direct sessions and no data is stored by a third party, as for example it is via Skype which is considered not appropriate for online counselling (Goss, 2017). The chosen platform had the same level of security used by Internet banking services and the military and a detailed contract (Appendix 2) was signed between Plus Guidance and the schools' group senior management before work began.

As Director of Pupil Wellbeing, I am part of the schools group safeguarding committee and involved in contributing to school policies. This position enables me to ensure that work with pupils on the online platform adheres to policies and procedures for safeguarding pupils, such as including where to go for urgent help (as outlined in the paragraphs above). Pupils who chose to work online completed an online assessment to assure their suitability or not (such as pupils who were actively self-harming or who had any suicide ideation), and were given clear advice both at intake and throughout the counselling process regarding the boundaries when working online, such as turnaround time of emails, non-emergency service and boundaries around contact times.

The two counsellors involved in the study had the same level of access to pupil data whether they were being counselled f2f or online i.e. home contact details and mobile telephone numbers for parents, alongside mobile telephone numbers for the eight members of staff who are Designated Safeguarding Leads and who are contactable on a twenty-four hours, seven days a week basis.

I also engaged both f2f Clinical Supervision and an additional Clinical Supervisor trained in delivering both online counselling and online supervision. This was in line with best practice guidance (Anthony & Jamieson, 2005; Anthony & Goss, 2009) and an additional safeguard in protecting online counselling clients, ensuring my work met the same standards online as the counselling I delivered f2f.

As mentioned in Chapter 4, I maintained full awareness throughout the study of being an insider-researcher (Anderson & Jones, 2000; Gray, 2004; Costley et al., 2010) and considered how to both maximise the benefits of this (such as relatively easy access and intimate knowledge of the context of the research) and to mitigate against the disadvantages (maintaining enough distance from the research topic so as not to influence outcomes, maintaining a reflexive perspective and engaging in reflexive discussion to better understand the potential influence or dynamics of power, position or relationships with all stakeholders) (Costa & Kallick, 1993; Deuchar, 2008; Tufford & Newman, 2012).

I also understood the careful planning that needed to take place (McLeod, 1994) and the level of sensitivity required when asking any client to be part of the research (see section 5.5 below) in that:

> The dual nature of the clinician-researcher role means that in addition to the advantages that the transferability of clinical skills and attributes can bring to the research setting, there is need to ensure the clinician-researcher's privileged position is balanced with responsibility both to client-participants and rigorous research methods (Hay-Smith et al., 2016, p. 2).

Furthermore, as part of the professional ethical codes by which I abide and fully believe, I have a duty to always act in accordance with the best interests of the client/participant in roles of both therapist and researcher. This means putting a client/participant's wellbeing at the forefront of all my research decisions.

5.5   Ethics considered in the Internet survey

Internet-mediated research involves psychological research conducted using the Internet. In this research the Internet was used to carry out an electronic survey of the

young people who had used the school-based counselling service (either f2f or online), and who were in the school year groups that could participate in the study. As in f2f research, when asking participants questions that may involve personally identifiable information, informed consent is always required. With regards to the Internet survey in this research, pupils were sent an introductory email to their school email address inviting them to participate in the survey if they wished. However, once pupils had participated in the survey, it would have been difficult for the researcher to identify them individually, as the survey software only registers an IP address for survey participants and not their original email address.

The introductory email gave full information about the study (Appendix 10) with a link to the survey, and there was a repeat of this information once the client had clicked the link, i.e. immediately preceding taking the survey. This was in case time elapsed between reading the initial email and taking the survey, and/or the information about consent and participation not being read or retained.

The survey questions were designed (see Chapter 4) to collect demographic data alongside gaining understanding of participants' thoughts and feelings regarding the provision of f2f and online school-based counselling. Therefore no questions were asked about the content of counselling sessions. Before survey release, collaboration and critical feedback on the questions were obtained from several professional peers and young people not involved in the research, to ensure the questions would not cause harm to participants.

It was explained as clearly as possible to participants in the introductory email that they were free to take the survey or not, how long it would realistically take to complete, and that they would be free to skip any questions that they did not wish to answer. Information was included about privacy, confidentiality, and data storage.

Participants were thanked for their involvement after participation in the survey, with a final reminder of information about the research and where to get any help or support if needed in a de-brief email (Appendix 12).

5.6   Ethics considered in post counselling interview

The final question in the survey asked pupils if they wanted to be involved in an interview, if they felt they had more that they wanted to say about the research topic. Participants who volunteered to take part in the interviews were contacted via email to confirm a convenient time to meet in a neutral office in the schools' buildings. This group of schools has several rooms that staff can book on a 'hot-desking' basis, i.e. an office that has no specific purpose other than it can be booked for private meetings. It was therefore entirely different from any of the schools bespoke counselling rooms. The room booked for interviews also had two sofas and a coffee table, which helped to create a relaxing atmosphere for participants. It was hoped that this might lessen the power imbalance of meeting in a school context.

Before the interview took place, participants were given written information about the research topic and invited to ask questions for clarification before consent was sought. The interview questions (Appendix 14) were designed to limit the potential for causing participants any distress, however, if a participant had referred to any sensitive material, I would have taken careful steps to guide the participant back to the research focus, whilst ensuring that they felt heard and respected. It was also made clear to participants that they could end the interview at any point, and although there was up to an hour allocated for the interview, it might be that they felt that they had said all that they wanted to say in less time.

I remained aware throughout this process, and after interviews had taken place, that even talking about one's experience of the counselling medium could trigger recollections of problematic or painful experiences. I was therefore careful to regularly check with participants that they were happy before, during and after the interview. I also allowed for a de-briefing period at the end of the interview, when I engaged them in discussion about topics unrelated to the previous material such as asking about lessons for the rest of the day, or the last film that they had seen. All participants were given information to take away on accessing further specified support as appropriate, or whom to contact if they were unhappy with any aspects of the research. This included the schools Senior Safeguarding Personnel, my Academic Advisor and Metanoia Ethics personnel.

Extra care and consideration was taken with two of the interview participants who had been counselling clients of mine, both of whom were in Year 12, i.e. aged 16-17 years. This involved emphasising boundaries around the previous relationship and the intentions of the interview. I made it clear that I was interested in their unique thoughts and feelings about the development of school-based online counselling, but I had no idea of what the outcomes of the overall research might be, nor any preference for an outcome. There were therefore no right or wrong answers and they were free to say what they wanted to say, rather than what they might think I wanted to hear.

I ensured that they were comfortable with the content of the discussion during the interview, and that they felt that boundaries around the previous relationship were properly respected - any mention of this was handled sensitively. For example, one participant mentioned how useful it was to use the online counselling platform when not able to be in school, and how although we had had a few technical issues we could continue working therapeutically. I acknowledged this mention of our past therapeutic relationship, but moved the discussion on to other potential advantages that he might think of about working therapeutically online.

I took extra care to de-brief these participants at the end of the interview. They were made aware of whom they could talk to internally or externally if they felt unhappy with any aspect of their involvement with me. I also took care to discuss my preparations for interviewing these two particular participants with my external supervisors and DPsych peers as 'the value in these external monitors lies in the fact that the person carrying out a research study may be highly committed and passionate about the project and therefore less open to seeing potential problems.' (McLeod, 1994, p.167)

At the end of all of the interviews, participants were asked if they were happy for the researcher to use the entire interview and ensuing transcript, and given information on how they could change their decision until the point of submission of the report to Metanoia Institute and Middlesex University. They were also asked if they wished to have a copy of their transcript and/or a summary of the research when it was complete.

These same precautions were taken with the one interview that took place online via Instant Messenger, although interviewing online can bring other issues such as how to assess if interviewees are distressed and how to provide emotional care if they are. As much as possible this was discussed, and any questions about the research answered on Instant Messenger with the participant before the interview began. It was discovered at this point that the participant was at home in a room on her own, with her family in another room. She said that her mother was aware that she was taking part in an online interview with one of the school counsellors and was happy for her to be involved. She had chosen Instant Messenger rather than telephone or video, as she felt there was more privacy.

Information about the research had been sent to this participant via password-protected email before the interview took place, and the participant sent back a completed consent form in the same way. After the interview had been completed, the participant reported that she had enjoyed the experience of talking online and even though she had had school-based counselling f2f, working online therapeutically might be something that she would now consider for herself in the future and recommend to her friends.

The other participants involved in the f2f interviews all stated that they enjoyed being involved in the research, emphasising that they had enjoyed being asked what their thoughts and feelings were about the development of online school-based counselling and felt proud that they were involved in shaping something that might help other pupils in the future. Most of these participants (see Chapter 7: Results) also mentioned that they would now be likely to mention the existence of the school-based online counselling facility to friends, who they believed might not know it existed.

Chapter 6 Building an online school-based counselling service

6.1 Introduction

The previous reported research (PEP) and literature review (Chapter 3) guided and informed important elements to consider in the development of this school-based online counselling service. These included:

- Working closely with the senior management team (SMT) to ensure 'buy in'

- Developing an online resource in alignment with school policies and procedures

- Sourcing a platform that offered secure, encrypted online counselling in a variety of synchronous and asynchronous ways, and that was attractive and straightforward for both counsellor and client

- Specific additional training required, both for myself and other counsellors, to work safely and ethically online

- Information that pupils would require before beginning counselling online, regarding what is different and how to get the best from it

- Ethical and legal considerations of developing a school-based online counselling service, to blend with the current f2f provision

- Consideration of data protection and security of online communication and records

- Safeguarding policy and practice with regards to pupils requiring urgent help

- Updating and promoting information to pupils, parents, and staff, such as information about the online service in new pupil packs, posters in school, and amending the schools' counselling & coaching policy on school website

The aim of collating this information about service development was to bring together a body of knowledge to support counselling professionals working in other organisations with young people (particularly schools), when developing their own online school-based counselling services. It also informed the production of a 'How To...' guide or business case study, something not available to me when considering embarking on this endeavour in 2011 that I hoped this might be useful to others in a similar position.

The learning demonstrated in this chapter became part of the foundation for one of the main products (Chapter 9) of this research; specifically, a training course in online counselling with young people (Certified Cyber Therapist – Young People with the Online Therapy Institute). This has been piloted, tested, and evaluated and is due to be officially launched on 1st July 2018. There is currently a waiting list for counsellors who wish to join this training.

This chapter begins with a full description of the context for the online counselling service development and my place within it as a practitioner-researcher (Margison, 2000; Barkham et al., 2006), which triggered and then supported development. An outline of the development stages of the online counselling service will then be given. The information gathered and the activity that occurred before, during and subsequent to this innovative development in school-based counselling is outlined, within the context of this particular group of schools. The sections that follow are:

6.2   Background, context, and evaluation of the school-based counselling service
6.3   Stakeholder analysis, timeline, and proposal
6.4   Online counselling platform provision and organisational contracts
6.5   Training, supervision, testing and marketing
6.6   Launch, uptake, and maintenance
6.7   Review of the school-based online counselling service and next steps

6.2   Background, context, and evaluation of the school-based counselling service

6.2.1   Background

When I first arrived at the group of independent schools in 2008, it comprised four schools in total: a co-educational preparatory school for pupils aged 3-11 years, two single sex schools (one for boys, one for girls) for pupils aged 11-16 years and a co-educational sixth form. Each had a separate Head Teacher, but the schools came under the umbrella of one Principal and were collectively known as a schools group. Two further schools were incorporated into the group over the next ten years: a pre-preparatory school with a day nursery for pupils aged 0-7 years and an all girls' preparatory school for pupils aged 3-11 years. The schools group now serves 1900+ pupils and their families over six sites within a six-mile radius.

On arriving in 2008 I took over from a counsellor who had worked with the four schools as a self-employed consultant for over 25 years. She reported seeing on average of four clients a week (a combination of pupils and staff) customarily after the end of the school day. She was not a part of the school in any other way.

This surprised me as I had come as school counsellor from a school with fewer pupils (1000+) but had worked, on average, 25 hours per week. This was typically offering one to one counselling throughout the academic school day, but also delivering staff training and workshops for pupils on mental health issues. I was employed by this school just as any other member of academic or pastoral staff, and was considered to be a part of the staff team (albeit with clear boundaries around counselling work with pupils). There are known tensions from being a counsellor working in this way in a school environment (Loynd et al., 2005; Luxmore, 2013; Pattison et al., 2014). Such a role has to operate both as a part of the school staff, working in the best interests of individual and collective pupils, yet at the same time be someone who is trusted to keep clear boundaries and manage and maintain high levels of counselling confidentiality as required within a professional role (BACP, 2002 & 2016).

Having worked as a counsellor since 2004 in both private practice and in a variety of counselling organisations with young people (external to schools), I felt that there was on the whole a greater benefit for both young people and their communities through being involved as a part of those communities, rather than being outside them. Being a mental health professional that is a part of the school community suggests that the school placed at least some financial value on the emotional and mental wellbeing of its pupils, alongside their academic development.

Although there are some clear disadvantages, such as pupil concerns over confidentiality and the stigma of being seen entering or leaving a counselling room in school (Fox & Butler, 2007), there are also a number of clear advantages. As demonstrated in recent research (Cooper, 2009 & 2013: Hill et al., 2011; Perks, 2016), having school-based counsellors can raise awareness of the importance of mental health with both adults and young people. It can also make it easier for pupils and staff to access help in a timely and cost effective way, and potentially lessen the

stigma attached to mental health and wellbeing, through it being part of a suite of in house provision for overall wellbeing (alongside school nurses and chaplains). Indeed, in this group of schools, the nursing team, chaplaincy team and school counsellors are located together in one 'wellbeing' area for pupils and staff to access.

Having a counsellor on the staff team of a group of independent schools also acknowledges that pupils from what may be considered 'privileged' (Luthar, 2013; Galloway & Conner, 2015) environments may also need emotional and mental help and support, just as their peers in less advantaged schools. Recent research (Lessof et al., 2016) has suggested that there are increasing numbers of these privileged pupils struggling with their mental and emotional health.

During the ten years that I have been in position, the f2f counselling service has been fully supported to grow in line with increasing demand and has developed from a sole counsellor, to a team of eight counsellors from different counselling modalities (Cognitive Behavioural Therapy, Humanistic, Psychodynamic and Art Therapy) for an average of 180 clients a year. The team also offer parenting talks and courses, staff training, Mindfulness teaching, co-curricular clubs, and Mindfulness courses for parents. From the wide spread of resources and activities available, strong, trusting relationships have evolved.

Three of the six schools are for pupils aged 11yrs and under. The remaining three schools are for pupils aged 11-18 years and are the focus of this research. For clarification, these three schools are on different sites, within separate, buildings and are:
- A single sex boys school for pupils aged 11-16yrs (440+ pupils)
- A single sex girls school for pupils aged 11-16 years (380+ pupils)
- A co-educational sixth form school for pupils aged 16-18 years (400+ pupils)

The Principal of the group of six schools (1900+ pupils aged 3-18 years) has changed three times in this ten-year period. However the strong working relationships and the practice-based evidence continually provided to demonstrate the effectiveness of the school-based counselling service (Hennigan, 2008-2016) has shown there have been consistent financial and intellectual resources provided for development of pupils'

wellbeing (emotional, mental and physical), as well as support for new initiatives, such as school-based online counselling.

As an adjunct to this development, as lead counsellor I was often called upon to provide input into wellbeing developments and initiatives. In 2016, this led to a new role, Director of Pupil Wellbeing, being created for me. Although still leading the counselling team and able to hold a small clinical caseload (mostly online counselling), my job became more managerial and strategic in nature. One of my first tasks was to propose a more holistic way forward for pupil wellbeing (Appendix 3), one that involves achieving wellbeing through mind, body, spirit, relationships and the environment – a model called 'the Wheel of Wellbeing' (Hennigan, 2017). This proposal includes a section on supporting young people in learning how both how to better survive and thrive online, as well as offline.

6.2.2   Context – School-based counselling in this group of schools

F2f school-based counselling in the three schools involved in this research took place in custom-designed counselling rooms on each site, which are not used for any other purpose. As well as a variety of counselling resources (games, writing materials, clay, paint etc.) these rooms are furnished with comfortable chairs, cushions, blankets, music facilities and plants, with framed colourful prints on the walls. The rooms feel distinct from the normal school offices, administrative areas and academic parts of the schools, and pupils often comment on how relaxing the environments are compared to other areas. In these rooms, pupils are promised a greater level of confidentiality (BACP, 2011) from the school counselling team than is generally received from teaching staff (DfE, 2013).

In the first meeting with a pupil in a f2f counselling setting, a contract with the school counsellor is agreed which outlines the parameters of confidentiality and gives details about counselling. The use of outcome measures (or not) is also discussed, and the pupil invited to ask questions before informed consent (Appendix 15) is sought.

In this particular group of schools, parents are given information about the school-based counselling service when their child joins the school (with regular reminders in various school electronic communications with parents and at parent evenings, talks,

workshops and parenting courses) in line with best practice guidance in this area (BACP, 2011 & 2015). This information makes clear that in this schools group pupils from the age of 11 years are able to self-refer for counselling (i.e. without parental consent), as they are generally considered to be 'Gillick competent' (Gillick v West Norfolk & Wisbech, 1983 & 1985). This is however assessed on a case-by-case basis with each client and individual counsellor.

6.2.3 Evaluation of the f2f school-based counselling service

As a professional I have always considered it important to evaluate my work. This is both for my own personal curiosity and satisfaction, but more importantly to ensure that pupils (and other stakeholders) continue to benefit, and so that I can use this data to benchmark this service against both itself and available research (Hill et al., 2011; Cooper, 2013: Perks, 2016). I am certain that providing continuing evidence to the schools' senior management team (SMT) as to how the service was being utilised, and what impact it was having (Hennigan, 2008-2016), has helped in assuring continued funding and support. Apart from gathering numerical data such as service usage and change indicated in outcome measures, I have always sought verbatim feedback, both individually and collectively, in person and in surveys - originally paper surveys, and more recently online surveys.

When a pupil survey in 2011 revealed a desire for online support for pupils, this was discussed with SMT, just as any other new idea suggested for the creative use of the counselling team to further support pupils. I was asked for a proposal that included research evidence as to how/why this might be needed, and a plan of how to proceed practically, ethically and legally, if it was decided that it was desirable to do so.

If an online service was to be developed, it would need to be incorporated within the existing school-based f2f counselling services, aligned with current school policies and procedures and underpinned by practice guidance in this area (Anthony & Goss, 2009) therefore several documents therefore needed to be provided.

6.3   Stakeholder analysis, timeline, and the proposal

6.3.1   Stakeholder analysis

Time was spent investigating research (see chapter 3) and resources (online platform and specific training). A stakeholder analysis (Appendix 17) was then carried out as the basis for the proposal. This analysis considered the expectations, benefits, concerns, and risks of the development from the perspectives of the primary stakeholders (pupils, parents and staff and the researcher) and secondary stakeholders (such as other schools, professional peers and my family). It considered what was needed to manage any highlighted risks to an acceptable level for the resource development and research to begin.

One of the risks that seemed to cause most concern in the stakeholder analysis process was regarding confidentiality of online communication between pupils and school counsellors. Specifically, what were the guarantees that the communication would be as confidential between the two parties online, as it was in a f2f setting? It was therefore important to highlight (both to SMT before the agreement was given and to others since then), that a specific standard of online security was being sought for online school-based counselling. This would be an operating platform that was compliant with The Health Information Technology for Economic and Clinical Health Act (HITECH, 2009) and The Health Insurance Portability and Accountability Act (HIPAA, 1996). HIPAA and HITECH compliant software requires browser-to-browser encrypted direct sessions and *no* data to be stored by the third party. In effect the same level of security used by net banking services and even employed by the military. This level of security is required by UK professional bodies (Anthony & Goss, 2009) and is considered to be amongst the best global operational ways of defining the required standards available. Although HIPAA and HITECH are not enforceable in the UK, as these are considered the gold standard for online therapy, I wished to work as if HITECH and HIPAA applied in the UK too.

A concern of some of my professional peers in the UK (Hennigan & Goss, 2016) and Australia (Glasheen et al., 2009) was the possibility of a confidential conversation between counsellor and a client being *'cut and pasted'* without permission, shared with others or going *viral* (which refers to the sharing of information to a wide audience via social media outlets, often without permission). Although this was something of which I was aware, and could be clear with clients about in both information about

counselling online and again in the contract, it was something about which I also still felt uncomfortable. This was likely to have been somewhat influenced by media messages that focus on the negative aspects of technology. I also knew at a deeper level that there was no such thing as a totally risk-free counselling environment, even when counselling someone f2f. A few years earlier, it was reported to teaching staff that one of the pupils was talking to others about having recorded the discussions of his f2f counselling sessions on a phone in his pocket and was sharing the sessions with his friends in the lunch hour.

Thus, I realised that there is much that we think that we are in control of, when in reality we are not. At that time, my fear of this happening online more than f2f was not based upon evidence from my own experience or the experience of my professional network. Furthermore, filing cabinets in offices can be broken into just as online information can be vulnerable. The fear about working online seemed to be a combination of many things, including the fear of stepping into unknown territory. However, I embarked on this research aware of this fear and with appreciation that others might feel similarly.

There was also a discomfort about the change of power dynamic of working online rather than f2f (Anthony & Nagel, 2010; Anthony, Nagel & Goss, 2010). This was not necessarily just between a client and myself (it is, for example, much easier for a pupil to just close their laptop to end a session if it is not meeting their need, as oppose to getting up during a conversation with a member of school staff to leave the room, due to the expected etiquette of pupil/staff relationships), but also between technology and myself. As the majority of UK school counsellors (Hennigan & Goss, 2016), I am female, in my early fifties and considered a digital immigrant (Prensky, 2001) - the Internet has not always been a natural part of my life. A part of me remains uneasy about how much is still unknown about the impact of technology on our species both now and in the future, and just who, or what, will be in control. As Tenby says in his book Life 3.0: *"Do you want to own your technology, or do you want it to own you? What do you want it to mean to be human in the age of AI? [Artificial Intelligence] ... We're the guardians of the future of life now as we shape the age of AI".* (p.335)

However, I have always been keen to lessen the power imbalance in school-based counselling. As school counsellors we are known by our first names, behaviour that would not be acceptable in a classroom (such as swearing) is allowed in counselling sessions, time for the session is specified at the outset but pupils are told that they can end their sessions whenever they wish and so on. Yet I am also aware of the structural, culturally conferred power differential in my being a part of the schools' system in the privileged position as school counsellor and have fought a constant battle against still being called 'Miss' during a session, or telling pupils that they didn't have to apologise for swearing. I was therefore keen to think that an online counselling option might give pupils back more power (Gibson & Cartwright, 2014) within the counselling relationship.

It is thus acknowledged that before this research began, I had provided school counselling in a face-to-face way only. Although the original request for online school counselling had come directly from pupils, it is possible that my own feelings about this development as both researcher and school counsellor may have an impact on this research. As stated in Chapter 2, I was initially very hesitant to consider working online therapeutically and believed that the results that could be achieved in the strength of relationship and therapeutic outcomes would compare unfavourably. Similar to many of my peers (Hennigan & Goss, 2016), I also had many fears about working therapeutically online.

Yet exploration into the online therapy research field and embarking on a professional doctorate program at Metanoia Institute where leading experts in this field were currently working (Dr Stephen Goss & Dr Kate Anthony) all challenged and changed my initial thoughts and feelings and I became excited at what this development might have to offer clients. Yet throughout this research I have remained a counsellor who believes that different things work for different people and at different times and that there is no 'one size fits all' with regard to modality of therapy and now also choice of medium for that therapy.

These thoughts and fears were acknowledged and talked about in supervision sessions regularly. Experience of delivering online therapy for three years without any serious issue arising due to technology, means that these fears have somewhat lessened. This experience has also provided excellent learning to share with interested practitioners. Upon greater reflection, I understand that if I had let this discomfort or fear dominate my decision to proceed with online school-based counselling, it would mean those pupils who used the online service only, may not have received the help and support that they did otherwise.

Consideration had been given to the potential risks of offering school-based counselling online and the completed stakeholder analysis demonstrated that these risks had been managed to an acceptable level. I now needed to put together a timeline of the developments required, before the online counselling service could be incorporated, tested and ready for an official launch to pupils.

6.3.2 Timeline

A timeline (Appendix 20) for the pilot was created alongside the stakeholder analysis, (Appendix 17) which considered:

- The creation of a contract document for online counselling, which would include information for pupils about what might be different about working therapeutically online (Appendix 18); and what the boundaries of confidentiality would be

- Establishing and testing a secure and encrypted platform and the technology required to set it up, manage referrals, schedule appointments, host the online therapy sessions, upload outcome measures and store notes from sessions.

- Establishing a protocol for assessing both suitability for online counselling and minimising risk. As an example, SMT did not wish anyone who revealed that they were engaging in self-harm to be counselled online only. This information was incorporated into the information given and the contract agreed before counselling began

- Confirmation of personal, professional, and school insurance and liability protection were in place

- Adapting the existing school-based counselling and coaching policy which was publicly available at that time
- Marketing to pupils, staff and parents of the pupils involved in the pilot
- Evaluation of the online service in terms of outcomes and pupil satisfaction
- Specialised supervision both for the online clinical work and for professional advice and guidance re online service development

The time line proposed (Appendix 20) was a period of 3 months from January to March 2015, to prepare for a pre-launch test with a smaller group before the official launch due in September 2015. Many of the developments outlined in the pre-launch timeline above have since been further adapted and updated (e.g. the contract made more 'young person' friendly, the platform landing page portraying images of the school-based online counsellors) during the two years of the research period, based upon feedback as the service has been utilised.

I undertook an 8-week certificate course in online counselling and sought a clinical supervisor who was trained and experienced in online therapy (see Training and Supervision in section 6.5.1 below). Both initiatives provided support for the creation of an online school-based counselling contract, and an information sheet for pupils about what might be different when working online.

Contact details (names, year group, form teacher, academic timetable, home address and telephone numbers, parent emails and mobile telephone numbers) were available to the counselling team for all work with pupils (whether online or f2f) through the school database information management system (www.isams.com). To enable me to manage the online counselling within the number of hours that I was contracted to work, it was agreed that the online service would be open to pupils from 7am-7pm from Monday to Friday for video or Instant Messenger (IM) counselling, and that these sessions would need to be booked in advance in the same way that f2f sessions were. If a pupil wanted to work via email, they were given guidelines about word length and structure as well as information around turnaround time i.e. within 48 hours of the counsellor receiving the email from the pupil between Monday and Friday.

Before beginning any online counselling with pupils, the appropriate insurance and indemnity policy was confirmed as in place and the school counselling policy was amended to include information about online school-based counselling and HIPAA and HITECH compliance. The next step was to put information together in the form of a proposal to the schools' SMT to support the development of a trial of school-based online counselling in this group of schools.

6.3.3   Proposal

The proposal (Appendix 21), stakeholder analysis (Appendix 17) and timeline (Appendix 20) were put to SMT. This included the plan for a short pre-testing phase of the online platform mentioned above, using one academic year group (Year 12) for one term, before the official launch in September that year. This year group was suggested, as all pupils would be 16+ and giving informed consent (see Chapter 5) was generally uncomplicated (Shaw et al., 2011).

Based upon these documents presented to SMT, a pre-test pilot trial for pupils in Year 12 was agreed. It was also decided that if there were no obvious concerns with the pre-test, that the launch and research of the online counselling provision with Years 12 and 13, could go ahead in September 2015.

6.4   Online counselling platform provision and organisational contracts

6.4.1   Online counselling platform provision

I spent some time looking for an online platform that was young person friendly, easy to use, and access. This platform would also need to offer a high level of security (HIPAA and HITECH compliant) and keep up to date with the seemingly ever-changing requirements for Data Protection. It also needed to be easy for counsellors to utilise efficiently when working away from school premises, as well as within school buildings with incumbent restrictions on Internet use and firewalls.

Several platforms offered video (or, with the camera switched off, just audio) with an inbuilt messaging system e.g. Skype. However, many of these were not considered confidential, as small print reveals that ultimately the organisation owns the data i.e. the personal communications that take place on the organisation's platform may be

used by the organisation. There were services that provided encrypted email e.g. Hushmail (www.hushmail.com); however, there were (and currently in 2018 still are) very few platform providers that offer email, audio, video and IM in any combination that are also HIPAA and HITECH compliant.

6.4.2   Organisational contracts

I was fortunate to meet a number of newly qualified psychology graduates at a conference in 2014 that had developed such a platform called PlusGuidance (www.plusguidance.com). This platform was also specifically put together with counsellors in mind.

I arranged a meeting between the schools' SMT and the Chief Technology Officer of PlusGuidance, so that there was clarity on what was required from a platform from schools' perspective e.g. a bespoke landing page with the school logo. Contracts were agreed (Appendix 2) with regards to platform provision and security of data.

As well as hosting the online counselling provision, this platform also provided several other benefits that were useful to both counsellors and clients e.g. reminders to clients and counsellor of upcoming sessions, a calendar booking system and a online help chat facility for any technical questions and so on.

To initiate online counselling, after they had been sent information and consent form, those pupils who wished to use the online counselling facility received an email through their school email address with a link to the specific landing page on the PlusGuidance website. (Appendix 19). They were then invited to create a unique username and password, and choose the way that they would like to work therapeutically online (video, audio, email or IM). Meeting times/days (or email exchange turnaround times) were then agreed.

6.5   Training, Supervision, Testing and Marketing

6.5.1   Training and supervision

Counselling staff that wished to provide online counselling in the schools group needed to be trained by a reputable provider, in line with the best practice guidance available (Anthony & Goss, 2009; Anthony, 2015). This also recommended that the

practitioner working online should receive supervision from someone similarly trained and experienced in online therapy (Anthony, 2015).

I was able to find excellent clinical supervision from a specialist in online therapy and, apart from her strong support of my online clinical work from its beginning, this relationship was crucial in helping the planning, development and delivery of the online service too. It helped that this clinical supervisor also had business acumen and experience too.

I undertook two training courses from different training providers on online counselling. The course content included:

- Keeping a personal reflective journal – (an extract from this is shown in Appendix 22)
- Familiarisation with research and literature on online counselling in the UK and globally
- Experiential and practical skills-based learning, by being both an online client and online counsellor with other online counselling students and tutors, using email, IM and video/audio
- Understanding online data security and storage, legal and ethical issues
- Assessment, contracting and confidentiality online
- Understanding online disinhibition (Suler, 2004)
- Establishment, maintenance and understanding of online therapy relationships
- Integrating my counselling theoretical model into an online medium
- Writing case studies of work with course role play clients
- Avatar therapy

Following this training, I felt better equipped to provide the online school-based service and had written my own personal and professional model for online counselling (Appendix 23).

6.5.2 Testing and marketing

Before the pre-launch pilot I invited several friends and colleagues to join me on the platform to test the technology, learn from errors and become comfortable and familiar

with the platform before using it with clients. The feedback from this group (which included my own children who were in their late teens and early twenties) showed that it was user friendly and easy to manage. My next challenge was how to market this new initiative, so that pupils would know it was available if they needed it.

The online service was advertised in a similar way to the f2f service initially, such as posters (Appendix 6), announcements and presentations in assemblies and an email was sent with a link to a YouTube video that I recorded of myself introducing the school based online counselling service (https://www.youtube.com/watch?v=1pAfGre1Nwk&feature=em-upload_owner#action=share). This explained how the online service worked and was also sent to all pupils' school email addresses in the targeted year groups.

As mentioned above, before the pilot began in September it was agreed that the platform needed to be tested on site for some part of the final term of the 2014-2015 academic year. An announcement was therefore made in a sixth form assembly in the last half of the Easter term. Two pupils contacted the researcher the following day to ask about using the online service, and subsequently used it in the summer term of 2015 (they were not however involved in the research, which had been agreed to begin in September 2015). Details of how the platform was embedded and operated are given below.

6.6   Launch, uptake, maintenance

The online school-based counselling took place on school laptops both in the school counselling rooms, and from the homes of the online counsellors outside school hours (up to 7pm). Care was taken when working from home to create an environment specifically for counselling i.e. where the background was neutral and there was no chance of being disturbed. Headphones with a microphone were used for all audio video sessions, as this tended to improve sound quality and increase the sense of privacy for both parties.

Uptake for the online facility was good immediately after presentations (or email with video advert), but then seemed to tail off, whereas referral for f2f remained steady. The results from this research suggest that the slow take up could have been for

several reasons (Hennigan, 2018), but chiefly that pupils tended to forget that school-based online counselling was an option. Results from this study with pupils (that will be expanded upon in the next chapter) also suggested that pupils felt that online counselling would not be as confidential or as effective as f2f, just as my professional peers had thought in the previous research.

Finally, I also recognised that it had taken time initially for the numbers of pupils using the f2f service to rise in the first few years after set up and thus perhaps it would take time for a reputation to build about the online services in the same way.

6.7   Review and next steps

The number of pupils using the online service slowly increased over the first year, whilst another counsellor in the team completed training to work therapeutically online. The decision was then taken to expand into Years 10 & 11 the following academic year.

Results from this FP and from researching both quantitative and qualitative pupil outcomes of the school-based online counselling service are due to be shared both internally and externally from July 2018. These results will be fully expanded upon in the next two chapters. However, in summary, the results suggest that although 76% of pupils still used the traditional f2f service, some 24% of pupils that referred for counselling used the online school-based service. The majority of these used a blended approach, combining online with f2f sessions with a small percentage using online only. Many of the thoughts and feelings that pupils expressed about working online therapeutically echoed those of my professional peers in the PEP, and this will be expanded upon in the next chapters.

Chapter 7   Results

7.1   Introduction

The aim of this research was to understand how pupils in a group of UK secondary schools might respond to the availability of a school-based online counselling provision, as an adjunct to a longstanding f2f school-based counselling service. The research aimed to understand quantitative and qualitative aspects of this development, i.e. how many and which pupils would use either online or offline (or both) counselling facilities? Would there be differences in outcome measurement results depending upon the medium chosen? What were the thoughts or feelings of the pupils who used this online and/or f2f counselling service during the time of the research about having this facility in their community?

The research aims for the Final Project were underpinned by results from the PEP (Chapter 2), where UK school counsellors indicated that an understanding of *if* and *how* pupils used a school-based online counselling service would be of significant interest to them. As well as quantitative and qualitative evidence from pupils, a number of my peers expressed a desire to understand how a school-based online counselling facility might be developed and incorporated into an existing f2f service, with regard to information about practicalities, legal and ethical aspects as well as costs and implementation. It is this information, combined with the results presented in this chapter, that contributed to the course material for the main product of this research – an online training programme for counsellors to work therapeutically online with young people. Two course participants tested the quality of this product, and a report of the impact of this training is given in Chapter 9 (Products).

The FP research was designed to provide analysis of usage through both a quantitative and qualitative lens, of a new school-based online counselling platform for secondary school pupils, as an additional option to the previously established f2f provision. The results will be presented in four main sections as outlined below:

- 7.2: **Quantitative analysis of service usage and counselling medium chosen by presenting issue.** This section provides quantitative analysis of

two academic years (September – July) of service usage, by pupils' school year and gender. Variables that were recorded for the quantitative analysis of service usage were: client number, year group, gender, presenting issue and medium chosen. For the online medium a record was kept of which form of online method was sought, i.e. email, video, voice (audio) or Instant Messenger, but as the numbers for each of these individual categories were too small for reasonable analysis these were grouped under the umbrella of 'online' counselling. For the purposes of this research, the categories of f2f and online (both blended and online only) will be considered. This section of analysis of service usage also provides a report of counselling medium chosen via presenting issue. Finally, a brief overview of the ways that online counselling was utilised is provided, with an example mini case study to demonstrate how blended counselling brought together the f2f and online elements.

- 7.3 **Quantitative analysis of differences in pre and post outcome measure scores.** This section provides quantitative analysis of one to one therapy outcomes in two different mediums i.e. those that chose to work in the f2f medium and those that chose to use the online counselling medium. The online medium results are further broken down to show those who worked purely online, alongside those that combined their online counselling with f2f counselling. Due to the low numbers in the online category overall, this was mainly for interest at this stage. However, as the data collection has continued beyond the end of this study, it is hoped that these categories may provide more meaningful statistics and information for the service managers, school SMT and the researcher in the future. Alongside service usage data, this analysis also involved comparison of outcome data using pre and post counselling Clinical Outcomes Routine Evaluation or CORE-10 measures (Gray & Mellor-Clark, 2007; Barkham et al., 2005, 2006 & 2012) and Goals Based Outcome or GBO measures (Law, 2009 & 2012). This research was not intended to present a comparative outcomes trial (particularly given the small sample size), but rather indicative outcome data that may prompt larger

and more focused clinical trial designs which would provide the statistical power necessary to provide definitive comparative outcome information. Quantitative results in this section have been provided by both descriptive and inferential statistics. The descriptive statistics help describe the data in a way such that any patterns might be more easily seen in the data. The inferential statistics are presented to both help infer from the research sample how the general population may operate, alongside consideration of any differences between groups.

- 7.4 **Quantitative and Qualitative analysis of an Internet survey.** This section provides both quantitative and qualitative analysis of a self-designed post-counselling online questionnaire. This was administered to all pupils in the study (i.e. those that sought counselling from the school-based counselling team during the research period and in the year groups involved) to gain insight into pupils' thoughts, feelings, and experiences of their choice of medium for therapy delivery.

- 7.5 **Qualitative analysis (thematic analysis) of pupil interviews**. The final question in the survey invited the respondent to take part in a semi-structured interview with the researcher if interested in sharing more thoughts and feelings about online or f2f school-based counselling. Ten pupils took part in recorded interviews and transcripts from these interviews provided the basis for the thematic analysis reported.

- 7.6 **Summary of the results section.** This section will provide an overview of the results chapter and an explanation of how this is complemented by the results from the PEP (Chapter 2).

As mentioned above, this level of detailed breakdown is provided as part of a direct response to feedback from UK school counsellors outlined in the PEP where responses indicated a desire to understand exactly if, or how, pupils might utilise a school counselling service that offered both f2f and online facilities. Participants wished to know the rate of uptake (including gender differences), any differences in

presenting issues and it's effectiveness. Sample questions from the PEP were:

- Is there evidence of reaching pupils that may have psychological barriers to accessing face-to-face help? (76%, n=187 respondents)
- Is there evidence of demand from pupils that it would make accessing the service easier for them? (69%, n=170 respondents)
- What is the efficacy for counselling online compared to f2f? (29%, n= 72 respondents)
- Is there any UK practice-based research in this area? (24%, n=59 respondents)
- Would an online counselling option increase the numbers of boys accessing counselling in schools? (10%, n=25 respondents)

Where possible, results are described for each academic year of this pilot as well as the total of both years, where year 1 is the school academic year from September 2015 to July 2016; and year 2 is the school academic year from September 2016 to July 2017 (where each academic year is three terms of twelve weeks i.e. 36 weeks).

As mentioned earlier, during the first year of the pilot the online service was open to pupils in Years 12 and 13, i.e. those aged between 16 years and 18 years (n=354 pupils) and then extended into Years 10 and 11 in the second year of the research. This was principally due to caution on behalf of the school (and the researcher) as to how this new option may be utilised by pupils and to ensure that at a practical level the service provision would be able to meet the, as then unknown, demand.

Additionally, in September 2015, the researcher was the only therapist in a team of eight trained to work online. This therefore seemed an appropriately cautious use of a service that research ethics and a protectively minded service management rolled out in stages. Safety, acceptability, and early outcomes appeared to indicate that these steps were not likely to do harm, and indeed likely to provide help. When an additional therapist from the team qualified in 2016, the service was thus extended in the second year of the study. The total number of pupils that could access to the counselling service involved in the research was:

- Year 1, n= 354 pupils
- Year 2, n= 543 pupils

Therefore, due to reasons outlined above, the data pool is not consistent for both years of the study. This is acknowledged throughout the presentation and discussion of results, as it could be argued that the year 2 results give better data due to larger sample size and different provision (two online therapists rather than one), with the reduced impact of the variable of the therapist (Kim et al., 2006; Okiishi et al, 2006: Pybis et al, 2017). These types of compromise on ideal method are quite common in real-world practice-based research and any statements given in the results and discussion that follow are suitably moderated considering this. Ultimately, the flawed data set was the result of the needs of a practice that will always prioritise client need, benefit and protection over theoretical research design.

7.2 Quantitative analysis of service usage and counselling medium chosen by presenting issue

7.2.1 Quantitative analysis of service usage

68 pupils from the year groups involved in the research used the in-school counselling service over the two years of the study, i.e. 7.6% of the total student population (n= 897) that had access to the counselling service. This comprised 354 pupils in year 1 and 543 pupils in year 2. 76% (n=52) of those 68 pupils used the f2f service only and 24% (n=16) used the online service, as shown in the diagram below.

Figure 7   Counselling service usage by medium chosen
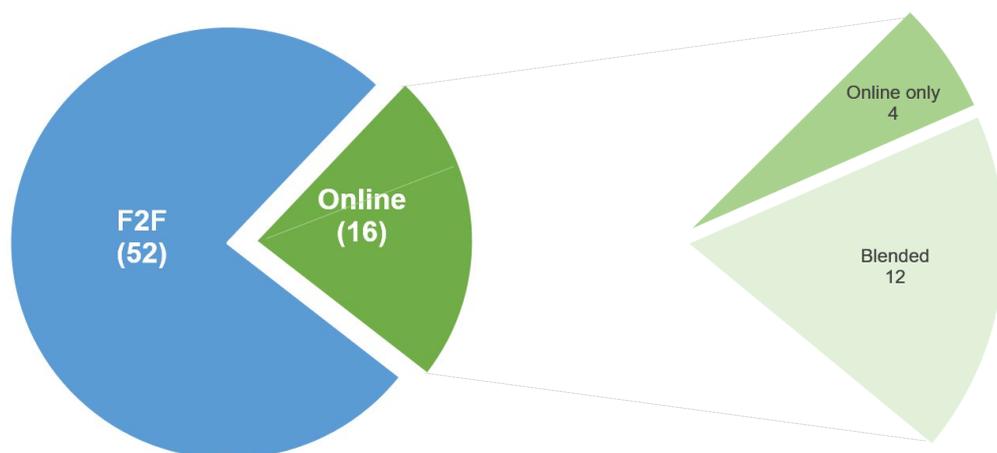
The diagram also indicates how pupils used the online service i.e. 12 pupils chose to use the online platform in a blended way with f2f work, and 4 pupils chose to receive counselling via the online medium entirely. As mentioned above, the numbers of participants in the purely online medium are small, but these are highlighted for interest. The numbers of pupils who used the online service (online only and blended) or f2f only are further broken down in the table below. Service usage is shown by year of the study and medium chosen for counselling in the table below.

Table 5   Pupil numbers by counselling medium chosen

Research study year	F2F only	Online (Blended / online only)	Totals
Sep 15 - Jul 16	18	5 (3 / 2)	23
Sep 16 - Jul 17	34	11 (9 / 2)	45
Totals	52	16 (12 / 4)	68

NB: 2015-16 choice of mediums available to pupils in Years 12&13 only, 2016-17 choice of mediums available to pupils in Years 10, 11, 12 & 13

The table shown below presents a further breakdown of the numbers of pupils who used either f2f or online counselling by research year, school year groups and gender. The ratio of pupils using the counselling service compared to the pupil population of each sample were 6.5% in the first year of the study, and 8.3% in the second year of the study. The average ratio of pupils using the counselling service in this group of schools from statistics gathered in previous years was 7.4% (Hennigan, 2008-2016), which indicates that the take up for counselling by year group and gender was consistent with previous years.

Table 6   Pupil numbers for counselling medium chosen by gender and pupil year group

Service Usage - Pupil Numbers By School Year Group and Gender																														
School Year Group	**Year 13**						**Year 12**						**Year 11**						**Year 10**						**TOTALS**						
Type of Interaction	**F2F only**		**Online overall *1**				**F2F only**		**Online overall**				**F2F only**		**Online overall**				**F2F only**		**Online overall**				**F2F only**		**Online overall**				**Totals**
			Online only		**Blended**				**Online only**		**Blended**				**Online only**		**Blended**				**Online only**		**Blended**				**Online only**		**Blended**		
Research Study Years	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
2015/16	3	7	0	0	1	0	4	4	1	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0	7	11	1	1	1	2	**23**
2016/17	3	5	0	2	1	3	8	4	0	0	2	0	2	1	0	0	0	2	4	7	0	0	1	0	17	17	0	2	4	5	**45**
Total of 2015-2017	6	12	0	2	2	3	12	8	1	1	2	2	2	1	0	0	0	2	4	7	0	0	1	0	24	28	1	3	5	7	**68**
Sub-totals	**18**		**2**		**5**		**20**		**2**		**4**		**3**		**0**		**2**		**11**		**0**		**1**		**52**		**4**		**12**		**68**

*1 - please note that 'Online overall' includes online only and the Blended category - those that had a combination of online and F2F

In summary, the school counselling service use by gender for each pilot year was:

Figure 8   Percentage gender split over study years
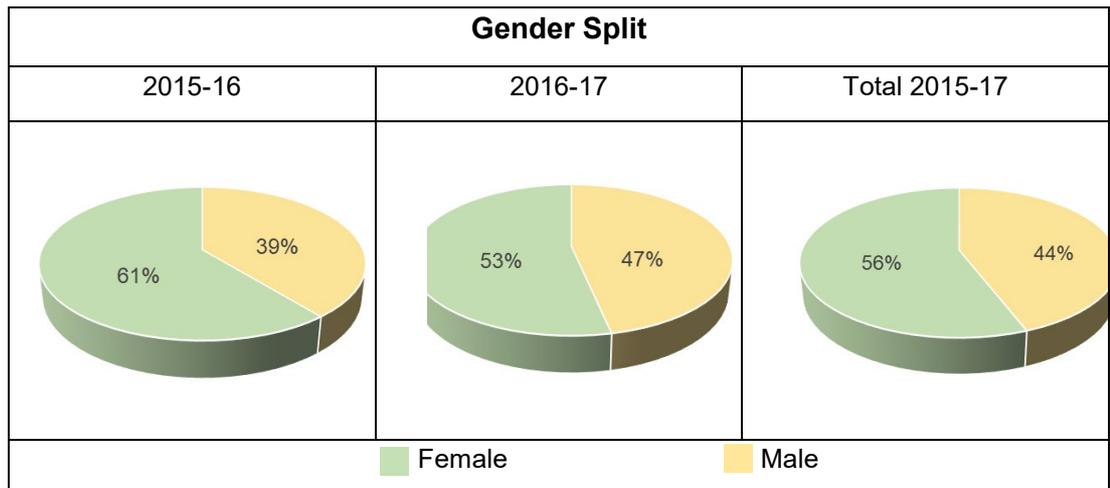
The ratio of female to males using the counselling service over the past decade in this group of schools has averaged 60:40 respectively (Hennigan 2008-2016), which is similar to the ratio of 64% female to 36% males reported in statistics for 2014/15 from a report of Welsh Schools Counselling (Perks, 2016). The ratio of gender in the first pilot year was similar to this, yet it is interesting to note that there is a rise in the percentage of males in year 2 to 47% (n=21) from 39% (n=9) in year 1. This was interesting as some research has suggested that males are more likely to access counselling if available online (Ingram et al., 2008; Glasheen et al, 2009; Neville, 2012), even though the results of a greater number of other studies have suggested the opposite i.e. that females are more likely to seek online counselling support (e.g. Dubois, 2004; Brown, 2012).

However, of the 47% (n=21) of males in year 2 of the pilot who used the counselling service, a larger percentage 81% (n=17) chose f2f and only 19% (n=6) chose online. Therefore although the numbers for this pilot are too small to make strong statistical indications or substantive claims, it appears that the rise in the male ratio in the second year of the study is related to a greater number of males using the f2f counselling service (from 10 males in year 1, rising to 17 males in year 2), alongside a smaller rise in the number of males seeking counselling online (2 males in pilot year 1 and 6 males in year 2).

The idea that more males than females may seek online counselling also came up in interview data described later. This quantitative data was later considered pluralistically against the interview data, to examine it again with a qualitative lens.

The total breakdown by gender and counselling medium chosen, for the combined two years of the study are shown in the chart (Figure 9) below.

Figure 9   Pupil number totals for counselling medium chosen by gender

	F2f	Online		Blended	Online only
Male	24	6		5	1
Female	28	10		7	3
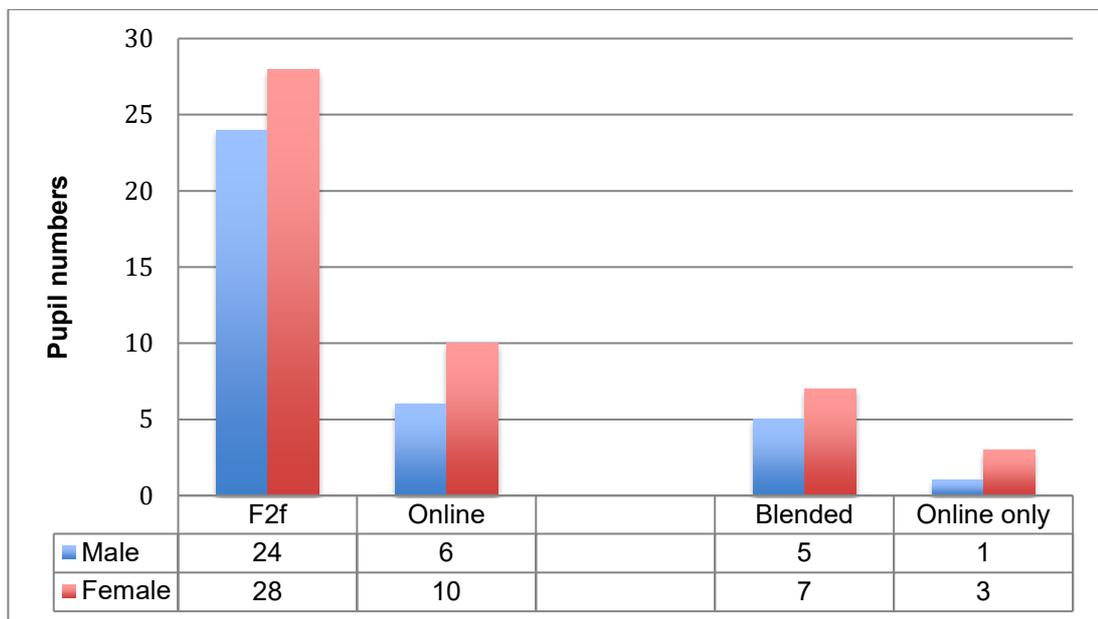
As mentioned previously, an approximately equal gender distribution (56% female: 44% male) was found for service usage across all conditions, as in other studies (Oliver et al., 2005; Mackenzie et al., 2007; Doherty & Kartalova-O'Doherty, 2010; Cooper, 2013), with a marginally higher proportion of females (63%) preferring online counselling. While the low n prevents strong conclusions being drawn here, this was consistent with other studies of online counselling (Dubois, 2004; Tsan & Day, 2007, Callahan & Inckle, 2012).

16 participants utilised online counselling in a variety of ways. Online only could include working via email, Instant Messenger, Video or audio. Blended working would be working in any of the ways previously listed using technology, combined with one

or more sessions in person. The maximum number of sessions for a client in this schools' counselling service is up to 12.

The following table provides a breakdown of how the 16 participants utilised the online service:

Table 7   Table to show how participants used the online medium:

Session Participant	O/B	1	2	3	4	5	6	7	8	9	10	11	12
1	B	E	IM	F2f									
2	B	E	IM	IM	F2f	F2f	A	F2f	F2f	IM	F2f		
3	O	E	E	E									
4	B	E	E	F2f									
5	O	IM	IM	IM	A	IM	IM						
6	B	IM	IM	IM	A	V	F2f	F2f	IM	F2f	F2f	F2f	
7	B	IM	IM	IM	IM	V	V	F2f	F2f	F2f	F2f	F2f	F2f
8	B	IM	IM	V	F2f								
9	B	IM	IM	IM	IM	IM	IM						
10	O	E	F2f										
11	B	E	IM	IM	IM	IM	IM	IM	IM	IM	IM	IM	
12	B	E	IM	IM	IM	IM	IM	A	A	V	F2f	F2f	F2f
13	B	E	IM	F2f	IM								
14	B	IM	IM	IM	IM								
15	0	E	IM	IM	IM	IM							
16	B	IM	E	F2f									

Key: **O** = Online Only, **B** = Blended (online with F2f),
E = Email, IM = Instant Messenger, V = Video, A= Audio

A mini case study of Participant 7 from the table above follows, to demonstrate how blended counselling brought together face-to-face and online elements.

Sam (not the client's real name) contacted the school service via text to ask for counselling soon after the start of term. The counsellor responded to say that counselling was available either in person or online from the school counselling team and asked Sam if he was happy to have more details sent via encrypted email to his school email account about the choices available, if Sam was not sure which he would like. The email was to have an anonymised subject line and the document containing information about school counselling would also be password protected.

Sam responded to the email contact from the school counselling service to say that he wanted counselling via Instant Messenger (IM) and a date and time for the first session was agreed once Sam had read and completed the informed consent document (Appendix 3). Sam was made aware that he had the opportunity to have up to 12 sessions with the same school counsellor, with any or all of these sessions being online or f2f as he preferred.

Outcome measures were completed at the beginning (CORE-10) and end (Goals based outcome measure) of the first session, in some of the following sessions and in the final session. Sam wanted to work on lowering his anxiety and improving his relationship with his parents.

The first three sessions with Sam were via IM and he seemed to enjoy working via this method. He was always punctual and engaged in the sessions and his outcome measures showed that he was making reasonably good progress in both of his goals. He had mentioned that he had thought about having school counselling before, but he had been a little concerned that other pupils might see him going in and out of the counselling room. He was able to have his counselling sessions online talking via text only during the school day, without any concern about his peers being aware.

During the third session, Sam had mentioned that he had seen me giving a Wellbeing Assembly to the Sixth form that week and thought about how we might get more done if we could talk in person, but he was still concerned about being seen by friends. We agreed to try a video session the following week after school when Sam was at home, where there was no concern about being overheard by peers.

Sam seemed to enjoy this session, though he had found it difficult to fit the timing for this in around other after school commitments. He decided that the following week he felt able to meet meet face to face in the school medical centre, rather than the school counselling room, to make it more explainable if any peers saw him entering or leaving the building. However, circumstances prevented us from meeting that week f2f, as Sam was not able to be in school.

We thus had one more session via video whilst Sam was unable to be in school and then the following six sessions were held weekly f2f in school. Sam made excellent progress on both of his goals and his levels of distress and anxiety were considerably lower than at the beginning of counselling.

7.2.2 Quantitative analysis of counselling medium chosen by presenting issue

The most frequently presented issues reported in the study were consistent with those reported in general counselling service statistics for this group of schools over the previous years (Berkhamsted Schools Group Counselling Statistics, 2008-2015). Anxiety, low mood and family were regularly the top three presenting issues annually, and these issues are reported as frequently presented in a recent critical evaluation into school-based counselling in UK secondary schools (Cooper, 2013).

The three most frequently presented issues in the two years of this study combined were: low mood (27%, n=17), anxiety (26%, n=16) and family (19%, n=12). The combined totals for these different issues are shown in Figure 10 below. Of particular note, anxiety and low mood were the two most commonly presented issues in both f2f and online mediums and there was no issue that appeared to be dominant in any medium when compared with the other. This is similar to findings in other research into presenting issues in online counselling with young people (Glasheen et al., 2016; Kids Help Line, 2013; Xenzone, 2017). The Xenzone (2017) report for example suggested that anxiety, stress, and family issues were the prominent presenting issues in online counselling for young people across the last year.

Although the numbers for online counselling are small, the data suggests that it was used for as wide a range of issues as the f2f service. The potential reasons behind the relatively low numbers for uptake for online school-based counselling presented here will be considered alongside the results of the analysis of the pupil interviews, and more fully explored in the discussion in the following chapter (Chapter 8). However, it is worth noting that perhaps due to its *newness,* many people may not understand what online counselling entails, and will not be open to the idea until they have more experience or understanding of it (Rochlen, Land & Wong, 2004; Joyce, 2012).

Figure 10   Presenting issue by counselling medium chosen
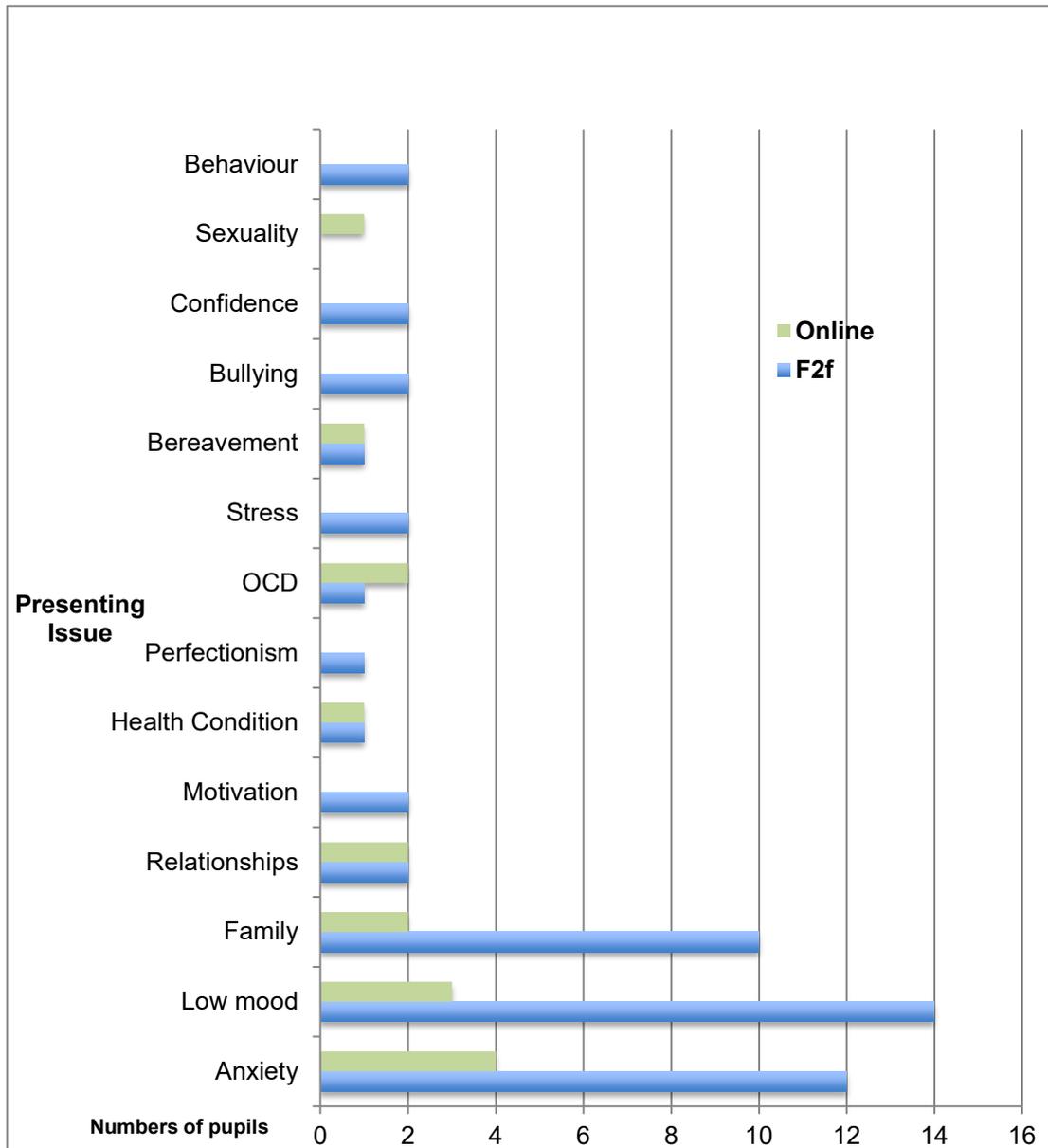
7.3   Quantitative analysis of pre and post counselling score differences of outcome measures for online and f2f counselling

Anonymised pupil results were recorded listing the following characteristics:

Client number, school year group, gender, CORE-10 pre-score, CORE-10 post-score, pre- counselling GBO score, post- counselling GBO score, presenting issue, total number of sessions and medium chosen for counselling.

These items were recorded to understand whether there were any significant differences in outcomes (using CORE-10 and GBO measures) between f2f and online (blended and online only) counselling by year of pilot and/or gender. Outcomes were measured by considering differences in mean (and standard deviation) in counselling medium chosen, i.e. either f2f or online (broken down into blended and online only). The results for the CORE-10 outcome measure analysis will be presented first (sections 7.3.1 to section 7.3.4), followed by a presentation of the GBO outcome measure analysis (sections 7.3.5 to section 7.3.8).

7.3.1 Quantitative analysis of differences in CORE-10

As stated in Chapter 4, the CORE-10 had been in use in this school-based counselling service for several years before the study began. It is an outcome measure that is easy to implement by individual practitioners using both 'pen and paper' and online methods. It is free to copy and the results enable service-wide analysis of data, which is particularly useful for practice-based research. Change can be considered against both clinical cut offs (see below) and simple hand plots of change, or more sophisticated graphs such as Jacobson plots (Jacobson & Truax, 1991). These can clearly outline changes at four levels – reliable deterioration, no reliable change, reliable improvement or reliable and clinically significant improvement.

What follows is a presentation of the inferential statistical analysis of results of the pre and post counselling CORE-10 scores, followed by the results of repeated t-test calculations performed on the data to determine any statistically significant differences between the groups (f2f and online – which includes blended/online only). Finally, the data will be presented as Jacobson plots (Jacobson & Truax, 1991) to indicate reliable deterioration or improvement, including any clinically significant improvement.

 The CORE-10 pre and post-scores were interpreted regarding the following ranges (Connell & Barkham, 2007):

- 11 and under – below the clinical threshold i.e. healthy to low level distress
- 11-20 mild to moderate levels of distress
- 21-25 moderate to severe levels of distress
- 25 and above: severe levels of distress

The questions imposed on the CORE-10 outcome data were as follows:

- *Are there differences in the mean CORE-10 score change (mean pre counselling CORE-10 score minus mean post- counselling CORE-10 score) in the f2f and online (includes online only and blended) counselling groups?*
- *Are there differences in gender in mean CORE-10 score change (pre counselling CORE-10 score minus post-counselling CORE-10 score) in the f2f and online (online only and blended) groups?*
- *Do any of the pre/post counselling CORE-10 or pre/post counselling GBO changes represent clinically reliable or clinically significant change?*

The results are presented in the following sections as responses to each of the questions outlined above.

7.3.2 Are there differences in the mean CORE-10 score change (mean pre-counselling CORE-10 score minus mean post-counselling CORE-10 score) in the f2f and online (including online only and blended) groups?

Table 8 below shows the mean average and standard deviation (SD) pre and post counselling CORE-10 scores for both the f2f and online (blended and online only) mediums for each year of the study and for the two years of the study combined. The results broken down by each year can be found in Appendix 42.

Table 8   Difference in CORE 10 scores – f2f and online

Interaction type	Number in group	Mean difference in pre/post CORE-10 score	Standard Deviation
F2f	52	3.9	4.9

Online (all)	16	5.3	2.5
Blended	12	5.5	2.3
Online only	4	4.8	2.9

Due to the increased data pool, the most significant data is from the two study years combined. This indicates that change in mean CORE-10 scores i.e. the difference of pre counselling and post counselling mean CORE-10 scores, was approximately equivalent in both mediums i.e. f2f only = 3.9 and online = 5.3 (blended =5.5 and online only = 4.8).

This suggests that, on average, pupils improved in all groups to a comparable extent i.e. between 3.9 - 5.8 points, using CORE-10 as a measure (consideration will be given to whether this degree of change is meaningful later in this section – 7.3.4)

Although caution is warranted in interpreting these results due to the small sample size, it is however worth noting that those who used the online counselling medium had a higher mean pre counselling CORE-10 score (18.1) than the corresponding mean pre counselling CORE-10 f2f score (15.3) even though the standard deviation (SD) of both scores is almost the same (f2f SD = 6.5 and online SD = 6.6). There was also a greater change between mean pre/post counselling CORE-10 scores amongst the mediums: 5.3 for online and 3.9 for f2f. This suggests that those pupils that used the online medium had higher levels of clinical distress at the beginning of their counselling than those using f2f, something that has been also been reported in similar research (Glasheen et al., 2016; Sefi & Hanley, 2012; Dowling & Rickwood, 2016) and this will be more fully explored in the discussion chapter to follow.

Repeated measures t-test calculations were therefore performed on the data to determine whether there were any statistically significant differences between the groups. T-tests compare two averages (or means) to explore if they are different from one another and if the result is significant or not (the *p*-value). The t-test calculations produce a *p*-value that helps determine and understand the significance of quantitative results. A *p*-value can be anywhere between 0 and 1 and a small *p*-value is considered less than 5% or 0.05. This simply means that if score of 0.05 or smaller

is achieved, then the results are likely to be significant and less likely to have happened by chance. Repeated measures t-tests calculations that assume unequal variances (as it was not certain that the groups were the same as each other) were performed on the data with the following results:

Table 9   T-test to compare differences in CORE-10 scores at counselling intake between f2f and online school-based counselling

t-Test: Two-Sample Assuming Unequal Variances

Pre Core10 Score - F2F v. Online

	Variable 1	*Variable 2*
	F2f	*Online*
Mean	15.29	18.06
Variance	43.07	46.06
Observations	52	16
Hypothesized Mean Difference	0	
df	24	
t Stat	-1.44	
P(T<=t) one-tail	0.08	
t Critical one-tail	1.71	
P(T<=t) two-tail	0.16	
t Critical two-tail	2.06	

This independent t-test showed that there was not a statistically significant difference (p = 0.16) in CORE-10 scores at intake between those who receive f2f counselling and those who received online counselling (t =-1.44, df =24, p=0.16, two-tailed).

The same test was performed on both the post counselling CORE-10 Scores and the differences between pre/post counselling CORE-10 scores between the groups (see Appendix 24 for the calculations).

These results, shown in Table 10, indicated that there was no statistically significant difference in either post counselling mean CORE-10 score (t=-0.77, df =26, p =0.45) or the difference between pre/post scores (t = 1.55, df =49, p =0.13):

Table 10   T-test results comparing means in pre/post counselling CORE-10 scores
           and means in CORE-10 difference between f2f and online counselling

Independent t-test, unequal variances assumed	t value (df)	p-value for t-test (two-tailed)
Pre counselling CORE-10	-1.44 (24)	0.16
Post counselling CORE-10	-0.77 (26)	0.44
CORE-10 difference	1.55 (49)	0.13

Given that the number of participants who received some or all of their counselling online was small (16 participants), it was likely to be difficult to detect significant differences between the groups. However, although not significant, the *p*-value for the independent t-test for pre-CORE-10 score and the difference between pre- and post-CORE-10 scores are low (p=0.16, and p=0.13 respectively), whereas for the post-CORE-10 scores the p-value for the t-test is p=0.45.

Considering effect size is another way to explore the results data as it emphasises the size of any difference between two groups without the need for a large sample size. Effect sizes (Cohen's d) with 95% Confidence Intervals were calculated for pre and post counselling CORE-10 scores and for the differences between them (see Appendix 43 for calculations) with the following results:

First CORE-10: *d* = 0.15
Final CORE-10: *d* = 0.22
Difference in CORE-10: *d* = 0.32

Cohen suggested that 0.2 is a small effect size, 0.5 a medium effect size and 0.8 is a large effect size. These results are all considered 'small' effect sizes, suggesting that there is no meaningful differences between the f2f and online counselling groups.

It is possible that if there had been more cases there may have been a better opportunity to detect any statistically significant difference, as tentatively suggested by the results in Table 8, i.e. those who receive online counselling may or may not be

more distressed at intake and may or may not show greater improvements on the CORE-10. As suggested, this is particularly interesting as a comparable study also suggests that school-based online counselling pupils can present with slightly higher levels of distress (Glasheen et al., 2016), but again with a relatively low sample size. Other studies with young people (but not school-based counselling) have also indicated similar trends (Sefi & Hanley, 2012; Dowling & Rickwood, 2016).

7.3.3 Do any of the pre/post counselling mean CORE-10 changes represent clinically reliable or clinically significant change?

To understand whether any of the CORE-10 results outlined in section 7.3.2 above represent reliable or significant deterioration, improvement or clinical significant change, each participant's pre/post counselling CORE-10 score was treated in two ways. Firstly, this data was plotted on a simple scatter graph and a trend line super-imposed to indicate overall mean change (in terms of clinical bands) for each counselling medium. Secondly, each participant's data set (pre and post counselling CORE-10 scores) was transposed onto a Jacobson plot to determine which and how many cases were reliable or clinically significant in terms of deterioration, no change or improvement. Figure 11 below shows these scores for each client using the f2f medium.

Figure 11   Chart to show pre (blue) and post (red) counselling CORE-10 score change for all individuals using the f2f medium
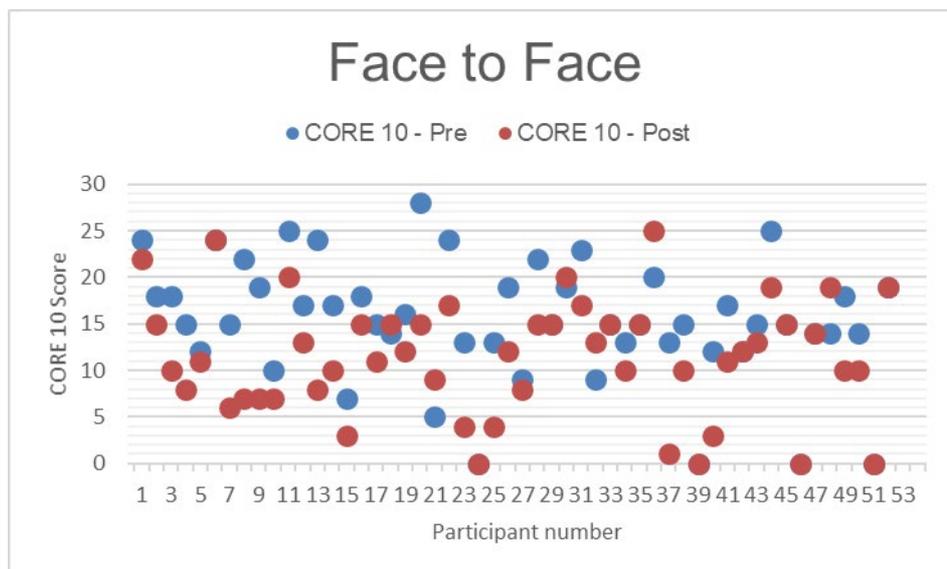
The mean pre counselling CORE-10 score of 15.3 (SD 6.5) is shown, along with the mean post counselling CORE-10 score of 11.3 (SD 6.2). Both pre/post counselling mean scores were in the 'mild to moderate' CORE-10 clinical bands.

The following chart (Figure 12) illustrates pre/ post counselling CORE-10 scores from participants who chose the online counselling medium.

Figure 12   Chart to show pre (blue) and post (red) counselling CORE-10 score change for all individuals in the online condition
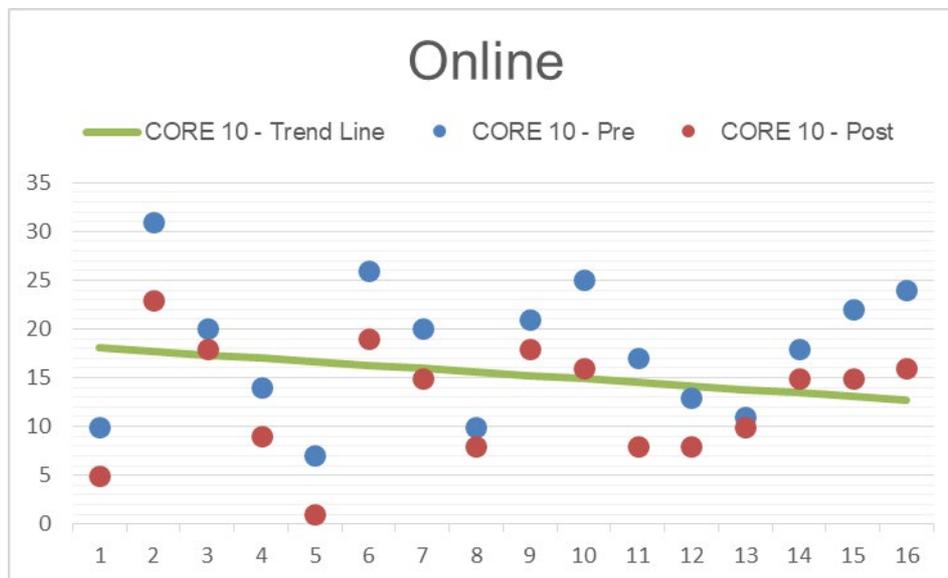
The mean pre counselling mean CORE score for the online condition was 18.1 (SD 6.6) and mean post counselling score was 12.8 (SD 5.7). Again, both pre/post counselling mean scores were in the mild to moderate CORE-10 clinical bands. For convenience, the trend lines for both the online and f2f pre/post counselling CORE-10 changes are shown in Figure 13.

Figure 13   Chart to show trends in pre and post counselling mean CORE-10 scores
by counselling medium chosen
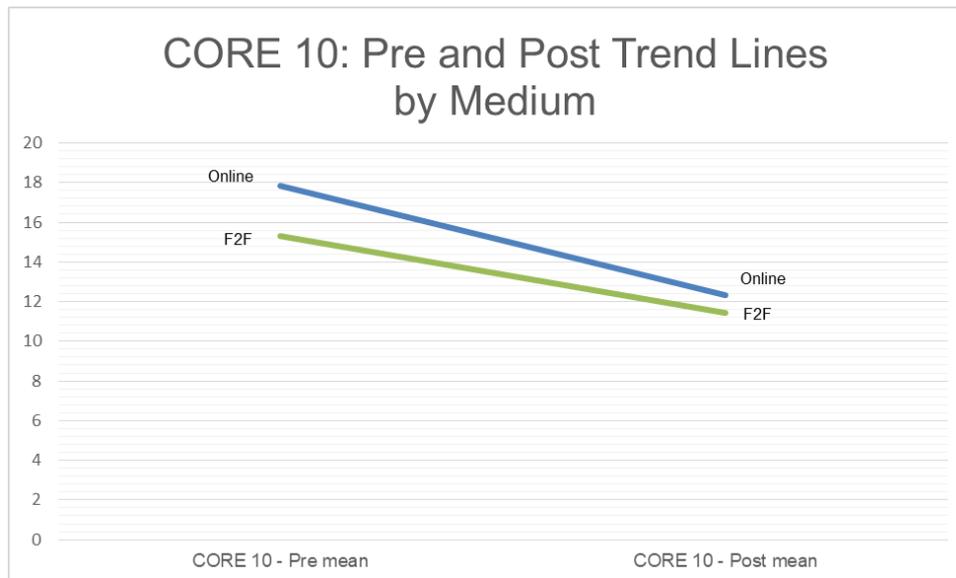
The results shown in Figure 11, Figure 12 and Figure 13 indicate participants in both groups improved to approximately equivalent extents (as shown without individual data points in the Figure 13). As noted in section 7.3.2, those participants using the online medium for counselling had higher pre and post counselling mean CORE-10 scores and these scores (and the scores of f2f participants) will now be investigated at a deeper level to understand whether any of these changes represent clinically reliable, or clinically significant change using Jacobson (Jacobson & Truax, 1991) plots.

In addition to the group summary statistical analyses above, Jacobson et al's "Reliable Change" paradigm (Jacobson & Truax, 1991) was used to explore individual data. This considered which individuals showed reliable change over the course of their counselling, and whether any change was clinically reliable and/or clinically significant.

This is an approach that is widely used in psychotherapy outcome research and with CORE outcomes (Evans, Margison & Barkham, 1998). It utilises the Reliable Change Index (RCI), a value that shows that if change were due to unreliability of measurement, only 5% of change would exceed this threshold (this is in line with

conventional statistical significance testing outlined earlier where p< .05 is considered statistically significant).

Where the pre/post counselling CORE-10 score change is outside 5%, i.e. more than the RCI, this is deemed reliable change in that it is unlikely to have happened by chance. It is important to note that reliable change can be in either direction i.e. reliable deterioration or reliable improvement. Changes showing reliable deterioration, no reliable change or reliable improvement in a set of data can be summarised in a Jacobson plot (Jacobson & Truax, 1991). All 68 participants in this research are represented in the various plots below, with those showing reliable change highlighted.

The chart below (Figure 14) shows the 52 participants who used the f2f counselling service, however only 43 dots appear, as there are 14 occurrences where the pre and post counselling CORE-10 scores were the same as each other. These 14 participants are therefore shown as 5 points collectively on the graph (details of these participants are given in Appendix 25).

There were no participants who showed reliable deterioration, 31 (60%) participants fell into the 'no reliable change' area, with another 8 (15%) in the reliable improvement area. 13 participants (25%) who chose the f2f medium for counselling had results of pre/post counselling CORE-10 score change that was both reliable and clinically significant. In total therefore 40% of pupils showed reliable improvement in this study. This can be compared favourably to recent research (Cooper, 2009) into school-based counselling using the CORE-YP as a measure.

Figure 14   Jacobson plot to show pre/post counselling mean CORE-10 for F2f counselling
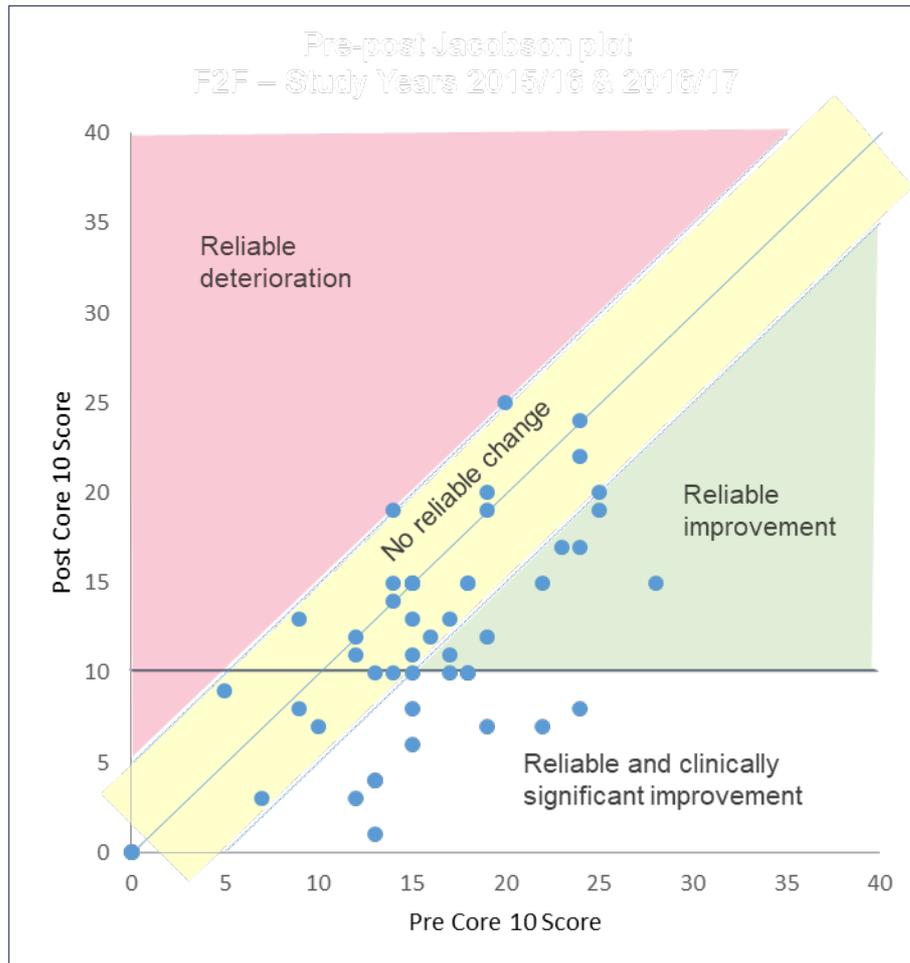
The online counselling option participants are shown in Figure 15 below (a combination of blended and online only) and a plot of the four participants who chose to be counselled online only are shown for interest, in a Jacobson plot below this (Figure 16). Of the 16 individuals that chose the online counselling option, there was no reliable deterioration again as in the f2f medium. The majority of these participants (n=11 or 69%) fell in the reliable change area and 5 (31%) of these were indicated as reliable and clinically significant improvement.

Figure 15   Jacobson plot to show pre/post counselling mean CORE-10 scores for online counselling (blended)
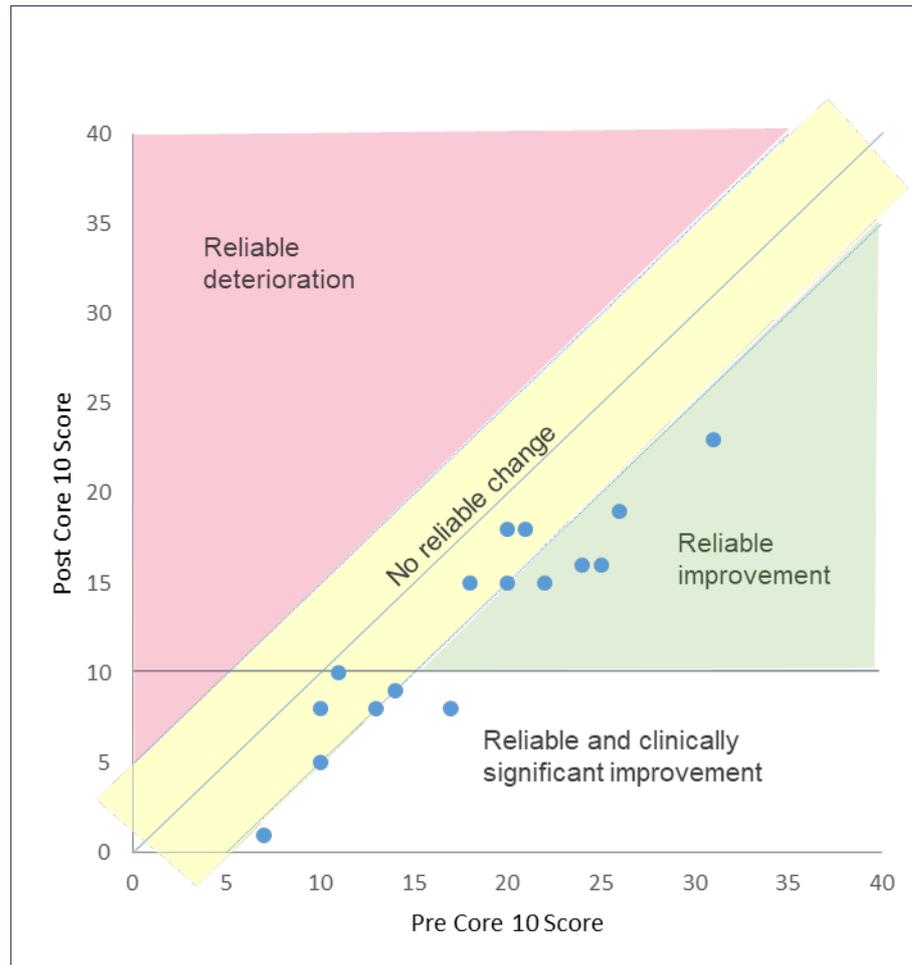
The number of participants that chose purely online counselling is very small but is included for exploratory comparison. Two of the four participants showed no reliable change and the other two had reliably improved scores but not of clinical significance.

Figure 16   Jacobson plot to show pre/post counselling mean CORE-10 scores for
            Online counselling only
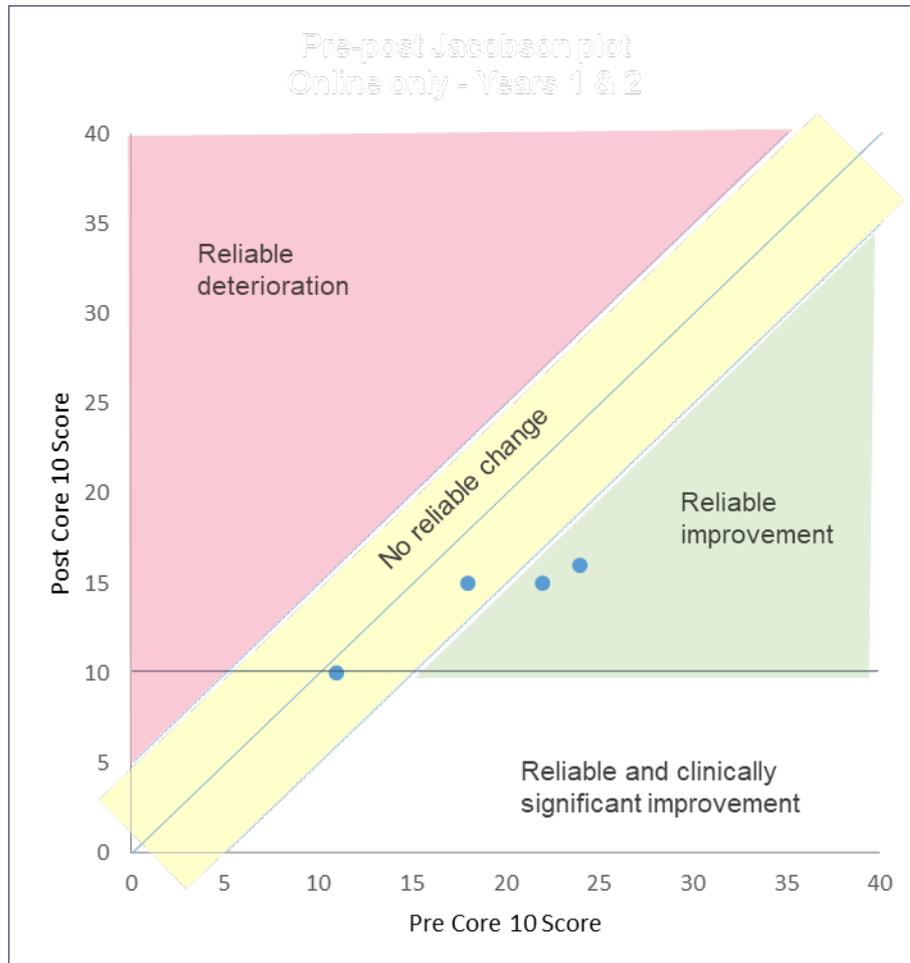
Again, although the sample size is small, these plots support earlier data (7.3.1) that indicates that no clients who worked in either medium deteriorated. As the summary data shows (Table 11 below) a similar proportion of clients who worked either f2f or online (according to their CORE-10 data) showed reliable and clinically significant improvement i.e. 25% in the f2f condition (*n*=52 participants) and 31% (*n*=5 participants) who chose the online counselling medium.

Table 11   Summary of Jacobson plot positions for f2f and online participants

Jacobson plot positions	F2f	Online
No reliable change:	60% (n=31)	No data in this area
Reliable improvement;	15% (n=8)	69% (n=11)
Reliable and clinically significant improvement	25% (n=13)	31% (n=5)

This finding is consistent with other research that suggests that, on average; online counselling is as effective or nearly as effective as f2f therapy (Day & Schneider, 2002; Barak et al., 2008; Murphy et al., 2009). The next part of the research data analysis will consider the relationship of gender to any changes in CORE-10 scores in f2f or online counselling in this study.

7.3.4   With regard to gender, what is the difference in mean CORE-10 score change (i.e. pre counselling CORE-10 score minus post counselling CORE-10 score) in f2f and online counselling (online only and blended) conditions?

Pre/post counselling mean CORE-10 scores with regard to gender and medium for counselling chosen were explored to investigate any differences.

With regards to differences between the genders, Table 12 and Table 13 below show that there was improvement (in terms of positive change in mean CORE-10 scores) in both online and offline counselling mediums by gender to similar extents.

Table 12   Difference in CORE-10 scores by Gender - F2F and online

Male:

Interaction type	Number in group	Mean difference in pre/post CORE-10 score	Standard Deviation
F2f	24	3.6	3.9
Online (all)	6	4.7	2.6
Blended	5	5	2.2
Online only	1	3	0

Female

Interaction type	Number in group	Mean difference in pre/post CORE-10 score	Standard Deviation
F2f	28	4.1	5.6
Online (all)	10	5.7	2.5
Blended	7	5.9	2.2
Online only	3	5.3	3.1

Table 13 below gives a summary of the mean changes in CORE-10 scores by gender. Although the scores are similar, it is worth noting that there was a slightly greater improvement for females using either the online or f2f counselling mediums as shown by the mean CORE-10 scores change (i.e. online 5.7 for females and 4.7 for males; using the f2f medium the change was 4.1 for females and 3.6 for males). This suggests that females in this sample lowered their overall distress levels, as measured by CORE-10 in both f2f and online counselling mediums, more than males.

Table 13   Table to show summary of mean core score change and SD by counselling medium and gender

	F2F Mean (SD)	Online Mean (SD)	Online only Mean (SD)	Blended Mean (SD)
Males	3.6 (3.8)	4.7 (2.4)	3.0 (0.0)	5.0 (2.4)
Females	4.1 (5.6)	5.7 (2.5)	5.3 (3.1)	5.9 (2.2)

This table is also shown in the figure below as a graph for the convenience of the reader:

Figure 17   Graph to show summary of mean core score change and SD by
counselling medium and gender
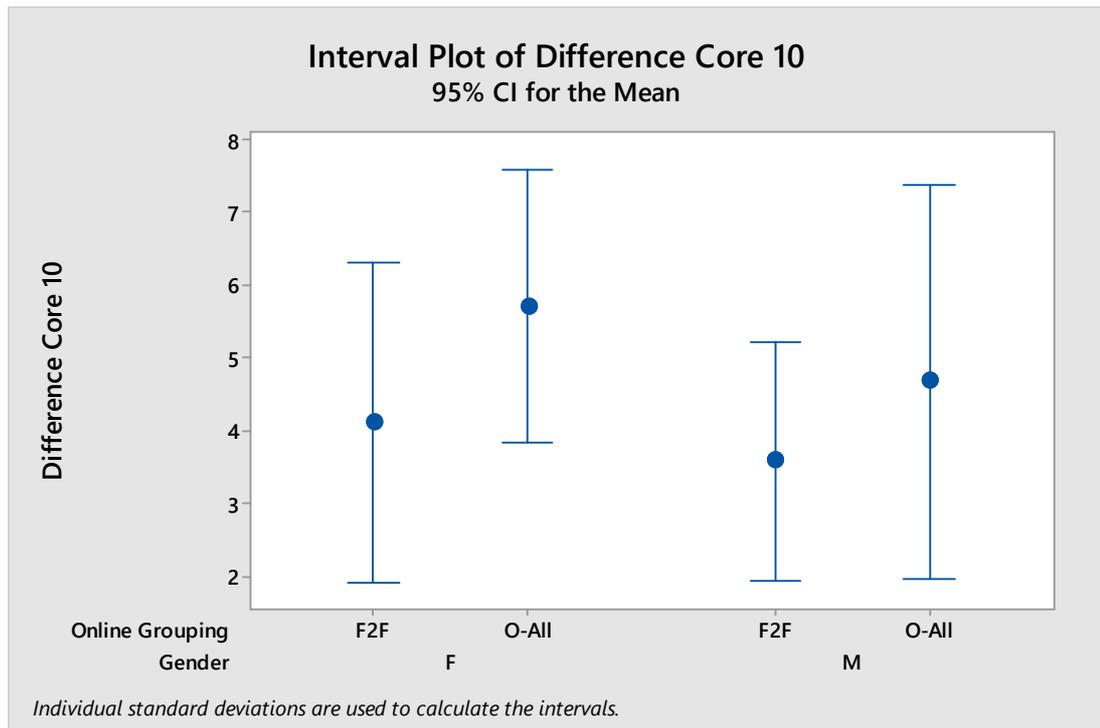
Repeated measures t-test calculations were also carried out (Appendix 24) separating the male and female data to investigate statistical significance. The results suggested that there was no statistical significance between the male and female data as Table 14 and Table 15 show:

Table 14   Results of independent t-test for females' pre/post counselling CORE-10 scores

Independent t-test, unequal variances assumed Females	t value (df)	p-value for t-test (two-tailed)
Pre counselling CORE-10	-0.80 (13)	0.44
Post counselling CORE-10	-0.23 (15)	0.82
CORE-10 difference	-1.17 (33)	0.25

Table 15   Results of independent t-test for males' pre/post- CORE-10 scores

Independent t-test, unequal variances assumed		
Males	**t value (df)**	**p-value for t-test (two-tailed)**
Pre counselling CORE-10	-1.16 (9)	0.28
Post counselling CORE-10	-0.76 (8)	0.47
CORE-10 difference	-0.82 (11)	0.43

Therefore, being male or female did not make any significant statistical difference in counselling medium chosen and CORE-10 scores. Therefore, any differences between the genders are either not meaningful or not revealed by this sample.

Again however, although not significant, the *p*-value for the independent t-test for pre counselling mean CORE-10 scores for females only is low (*p*=0.25), whereas the male equivalent *p*-value for the t-test is *p*=0.43. It is possible therefore that if there had been more data, there may have been a better opportunity to detect whether there was a significant difference in the direction that the results in Table 13 had suggested (i.e. females show greater improvements in both f2f and online counselling using CORE-10 as a measure).

Finally, analysis of co-variance also carried out (Appendix 43) to analyse pre and post scores for males and females provides a gender p-value of 0.925. This shows there is no difference between the means of the pre and post-counselling CORE-10 scores between males and females. Analysis of co-variance was carried out assuming that the regression gradients are equal (the data set passed an F-test for equality and an Anderson-Darling Test for normality). The analysis of co-variance calculation is shown in Appendix 43.

7.3.5   Quantitative analysis of differences in Goals Based Outcomes (GBO)

The second outcome measure used in this study and analysed in this section is the Goals Based Outcome measure (GBO). Pupils were asked to consider their goals in receiving counselling at the outset of their counselling work. These goals were measured on a scale of 1-10, with 10 being having reached their goal completely and

1 not having achieved their goal at all. Pupils were able to select up to three goals, but the majority of clients selected only one. Only one goal's pre/post counselling change is therefore given for each participant in this study.

The questions imposed on the GBO data were:

- *What is the difference in mean GBO score change (post counselling GBO score minus pre counselling GBO score) in the f2f only and online counselling (including a breakdown of online only and blended) groups?*

- *With regard to gender, what is the difference in mean GBO score change (post counselling GBO score minus pre counselling GBO score) in the f2f only and online counselling (including a breakdown of online only and blended) groups?*

The analysis in response to these questions will be considered in the next two sections.

7.3.6 What is the difference in mean GBO score change (post counselling GBO score minus pre counselling GBO score) in the f2f only and online counselling (including a breakdown of online only and blended) conditions?

Table 16 gives the result of participants' mean first (pre-counselling) and last (post-counselling) GBO score and the standard deviation (SD) per counselling medium chosen.

Table 16   Mean GBO score change and SD by counselling medium

Interaction type	Number in group	Mean difference in pre/post CORE-10 score	Standard Deviation
F2f	28	4.1	5.6
Online (all)	10	5.7	2.5
Blended	7	5.9	2.2
Online only	3	5.3	3.1

Mean pre counselling goals-based outcome scores (GBO) were comparable in both online and f2f mediums, with f2f at 1.8 and online at 2.5 (Blended=1.8 and Online only=2.8). In terms of positive movement towards their goals (i.e. differences in mean pre-counselling and post-counselling scores) pupils' GBO changes showed approximately equivalent outcomes in both f2f (1.8 increase in movement towards stated goal) and online (2.4 increase in movement towards stated goal).

With regard to the differences in the blended and online only categories, it is acknowledged that this wide range could be taken to indicate that blended and online conditions were operating very differently, and therefore the online only category is a poor category to use at all. However, the low *n* means that the result here is due to the variation of individual differences between clients and therefore this data may not be considered reliable for quantitative purposes. This will however be considered pluralistically with use of the qualitative data reported later.

Independent t-tests were carried out as per those carried out for the CORE-10 data (see Appendix 24). These calculations showed that there was no statistically significant difference in mean GBO scores at intake, mean post counselling GBO score and mean GBO difference (although all the p- values were relatively low, particularly the p-value for post counselling GBO score):

Table 17   Table to show independent t-test of pre counselling / post counselling mean GBO score with regards to statistical significance

Independent t-test, unequal variances assumed	t value (df)	*p*-value for t-test (two-tailed)
Pre counselling GBO score	-1.27 (27)	0.21
Post counselling GBO score	-1.51 (28)	0.14
GBO difference	-1.11 (35)	0.27

7.3.7   With regard to gender, what is the difference in mean GBO score change (post counselling GBO score minus pre counselling GBO score) in the f2f only and online counselling (including a breakdown of online only and blended) conditions?

Table 18 below shows that males and females moved towards achieving their goals in a positive direction in both online and f2f counselling mediums. Male stated goals (towards 10 as a best outcome) showed a mean 2.2-point increase in the f2f medium and a mean 2.8-point increase in the online medium. Females showed a mean 1.4 increase in the f2f medium and 2.2 mean increase in the online medium.

Table 18   Mean GBO score change and SD by counselling medium and gender

Male:

Interaction type	Number in group	Mean difference in pre/post GBO score	Standard Deviation
F2f	24	2.2	2.9
Online (all)	6	2.8	2.0
Blended	5	3.2	2.2
Online only	1	1.0	0.0

Female:

Interaction type	Number in group	Mean difference in pre/post GBO score	Standard Deviation
F2f	28	1.4	2.3
Online (all)	10	2.2	1.7
Blended	7	2.6	1.4
Online only	3	1.3	1.9

Although the numbers are small, females made less of an improvement towards their goals than males in the f2f condition (mean difference of 1.4 for females, compared to 2.2 described for males in the paragraph above); and a lower point increase in reaching their goal when working in the online medium when compared to males (mean difference of 2.2 for females, when compared to 2.8 for males as described in the paragraph above).

Alongside this, the greatest change in GBO scores was achieved in the blended category, which was a 2.8-point mean GBO change increase over the two years of the study. Here also, a greater change in GBO score was in the blended category for

males (3.2), rather than for females (2.6), as shown in the table below. Both results were interesting to note considering the findings above (section 7.3.4) in CORE-10 scores. This suggested that females made slightly more improvement in decreasing their distress levels overall. However, caution is warranted in any interpretation due to the low *n* (particularly in the online medium), and lack of any statistical significance discovered. These findings may or may not be helpful however in pluralistic use along with the qualitative parts of the analysis to follow (sections 7.4 and 7.5), to aid interpretation of the qualitative information gathered in this study.

7.3.8 Do any of the pre/post counselling mean GBO changes represent reliable or significant change?

Independent t-tests were carried out on the GBO data broken down by gender as per those carried out for the CORE-10 data (Appendix 24). These calculations showed that there was no statistically significant difference in GBO scores by gender at intake; post counselling GBO scores; or GBO change between those who received f2f counselling and those who received online counselling. Summaries of these calculations are shown in Table 19 and Table 20 below:

Table 19   Independent t-test to show female pre counselling / post counselling mean GBO score with regards to statistical significance

Independent t-test, unequal variances assumed Females	t value (df)	p-value for t-test (two-tailed)
Pre counselling GBO score	-0.59 (17)	0.56
Post counselling GBO score	-1.06 (17)	0.30
GBO score difference	-1.14 (21)	0.27

Table 20:   Independent t-test to show male pre/post-counselling mean GBO score with regards to statistical significance

Independent t-test, unequal variances assumed	t value (df)	p-value for t-test (two-tailed)

Males		
Pre counselling GBO score	-1.37 (9)	0.20
Post counselling GBO score	-1.20 (9)	0.26
GBO score difference	-0.57 (10)	0.57

Again, although there was no statistical significance that can be reported due to the small sample size, the *p*-values for female GBO score difference are on the low side ($p = 0.27$). A larger data sample may give more information about whether females do make less change toward achieving their goals (as measured by the GBO) than males in both online and f2f counselling in schools.

7.4   Quantitative and qualitative analysis of an Internet survey

Once pupils had completed their counselling f2f or online (blended and online only) they were invited to take part in an Internet survey, as outlined in the design and methodology chapter (Chapter 4).

35 pupils from a possible 68 respondents completed the survey (51% response rate). In terms of the survey design, the majority of the questions were not compulsory to prevent frustration with individual questions. This encouraged pupils to complete the survey to the end (Chapter 4). As some pupils chose to skip questions not all had 35 responses. However, the majority of the questions had 26 answers or more.

Quantitative analyses using descriptive and statistical data from the post counselling pupil survey are set out below. Questions 6, 7, 9 and 10 included an option for pupils to add comments, these have been categorised as summaries and are shown in tables where applicable. A breakdown of responses by question follows, where the survey question is given first, followed by an analysis of the responses:

Q1:   Which school do you attend?
29 respondents selected Berkhamsted School (6 respondents skipped this question). This question had an option of '*other, please specify'*, as the study had been planned to include other centres in the future where possible.

The following two questions were used to test for the representativeness of the sample and for potential correlations between year group and gender with later questions. The results for each question are given separately below, followed by tables of comparison.

Q2:   What is your current Year Group?

Table 21   Responses to question on Year Group

School Year Group	10	11	12	13	Total
Pupils	4	5	9	8	26

Of the 26 respondents that answered this question, the majority of pupils (n=17, 65%) were in Years 12 and 13. This was expected as the first year of the study only had participants from those years.

Q3:   What is your gender?

Figure 18   Responses to question on gender
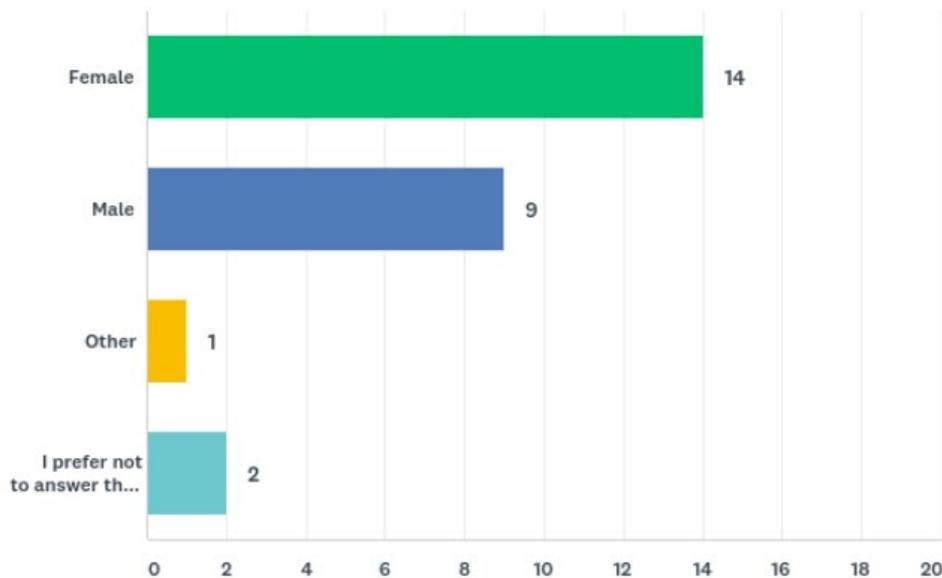
Of the 26 respondents that answered this question, 54% (n=14) respondents were female and 35% (n=9) were male. Three pupils selected '*prefer not to specify/other*'. The stated male: female ratio in this Internet survey of 35% male: 54% female compares favourably with the ratio from the overall study data given in section 7.2

(i.e. 68 pupils who had used the service over the past two years in the ratio 46% males; 54% females). In both samples the female percentage is 54%, giving confidence that the respondents answering this survey were a fair representation of gender spread of the total service users for the past two academic years.

Chi square analysis of this result was X^2 (1, n=23) = 1.32, p= 0.250. Chi square analysis was chosen as it measures how likely it is that an observed distribution is due to chance. It measures 'goodness of fit' i.e. how well the observed distribution of data fits with the distribution that is expected if the variables are independent. The resulting p value of 0.25 is therefore not statistically significant (likely due to the very small n of 23), but it is low. This suggests that the observed distribution of data fits reasonably well with the distribution that is expected if the variables are independent.

Q4: Which of the following methods or combination of methods did you use for counselling? (Please tick all that apply)

Figure 19   Responses to questions on methods used for counselling
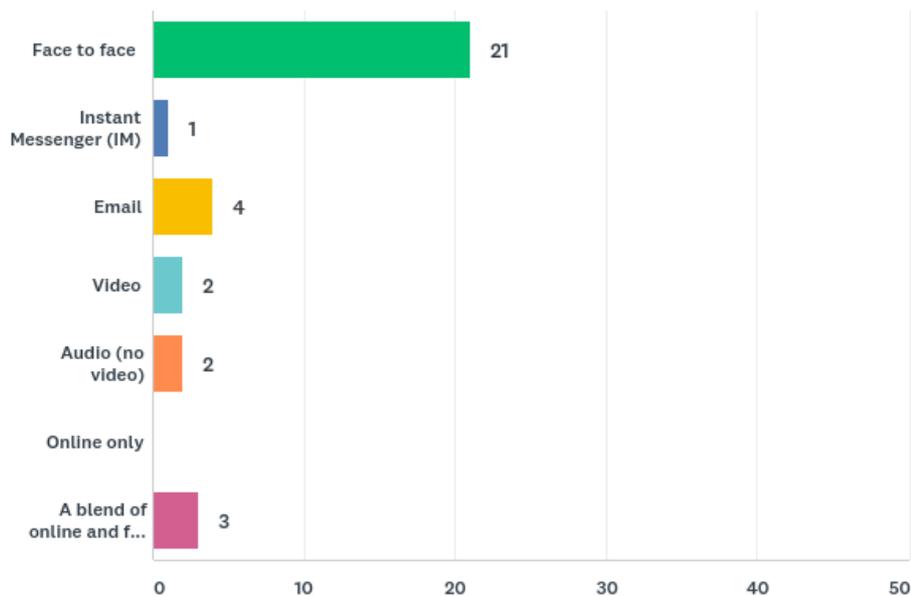
26 respondents answered this question. The majority of 81% (n=21) stated that they had used f2f only as their medium for counselling. This compares favourably with the recorded statistics of overall service use given earlier, where 76% (n=52) of the total in the study had used the f2f medium for counselling.

No respondents selected the online only condition (although 4 participants in the study had received counselling this way), but the remaining participants selected online methods such as: Instant Messenger (n=1); Email (n=4), Video (n=2), Audio (n=2) and also a blend of f2f and online (n=3). It is believed that this question may have lacked sufficient clarity and potential duplication meant that some pupils selecting the online options may have been 'online only'. However, the post counselling survey data suggests a roughly equivalent distribution of pupils choosing the f2f only medium alongside those selecting a combination of online only and blended mediums, when compared with the overall study data. To clarify:

- Post counselling survey - *Which method did you use for counselling?*
  F2f = 81%, Online (online only & blended combined) = 19%
- Overall study data – *Which medium was used for counselling?*
  F2f = 76%, Online (Online only and blended combined) = 24%

Q5: *What reason, if any, did you have for choosing the method of counselling delivery that you did?*

It was intended that all pupils who used the service during the years 2015-2017 and were part of the year groups allocated to participate in the pilot would be offered the choice of working f2f, online or a blend of both, before embarking on their course of counselling. This question was intended to test whether a pupil had been given this choice, or whether they had been allocated to the medium (some pupils in schools are 'sent' to counselling, for behaviour management for example). The question was also designed for pupils to indicate a reason for the choice that they made, through the free response option.

Figure 20 Reasons given for choosing the method of counselling delivery
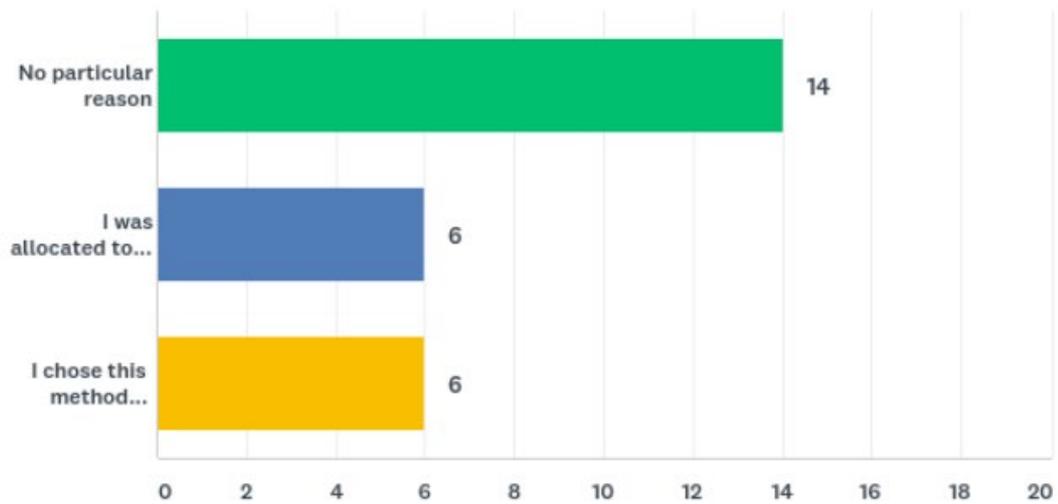
26 respondents answered this question, of which 54% (n=14) said that there was no particular reason. 23% (n = 6) said that they were allocated to this medium (all were f2f) and 23% (n=6) said that they chose the medium specifically. There was an option to give comments and seven pupils responded. Three f2f respondents, three blended respondents and one online only respondent commented as follows:

Table 22 Free text comments provided to the question regarding choice of medium for counselling delivery (Q5)

Gender	Year	Medium	Free text response
F	11	F2f	*Easier*
M	10	F2f	*It was easier to fit into my timetable*
M	13	F2f	*Face to face is more personal. It feels real and like someone genuinely cares and is taking the time to really listen to you. It is more liberating and almost therapeutic to voice your issues/worries aloud and sometimes it is easier to communicate face to face in terms of conveying what you have to say- online could make it harder to portray emotions.*
F	13	Online	*Easier than to talk face to face*

Not specified	10	Blended	*I did it with a friend*
M	12	Blended	*Easier with my anxiety to do so*
M	12	Blended	*I felt I needed personal support in order to tackle problems that I faced which I needed disclosure for.*

These comments suggested that choices were made for similar reasons across the different mediums - '*Easier*' was a comment that is given in both f2f and online mediums, and a suggestion that a stronger connection for '*personal*' support was also mentioned in both f2f and online mediums. Although these comments were few, they focused upon 'convenience' (*easier*) and 'connection' (*more personal*), two themes that correlate with some of the results from the thematic analysis following later in this report (section 7.5).

Q6: ***Were there any advantages to using the method of counselling that you did? If so, what were they?***

This question gave the participants the opportunity to say whether there had been any advantages and if they preferred, to state in their own words what these advantages were. In the survey development period (see Chapter 4), it was decided not to give a 'tick list' of specific potential advantages, as it was believed that this might lead participants and possibly bias their answers. By giving the participant the choice to say that there had been advantages but not specify what they were would ensure less frustration and potential exit before completion of the survey.

Figure 21   Responses to question regarding the advantages of the method of counselling chosen
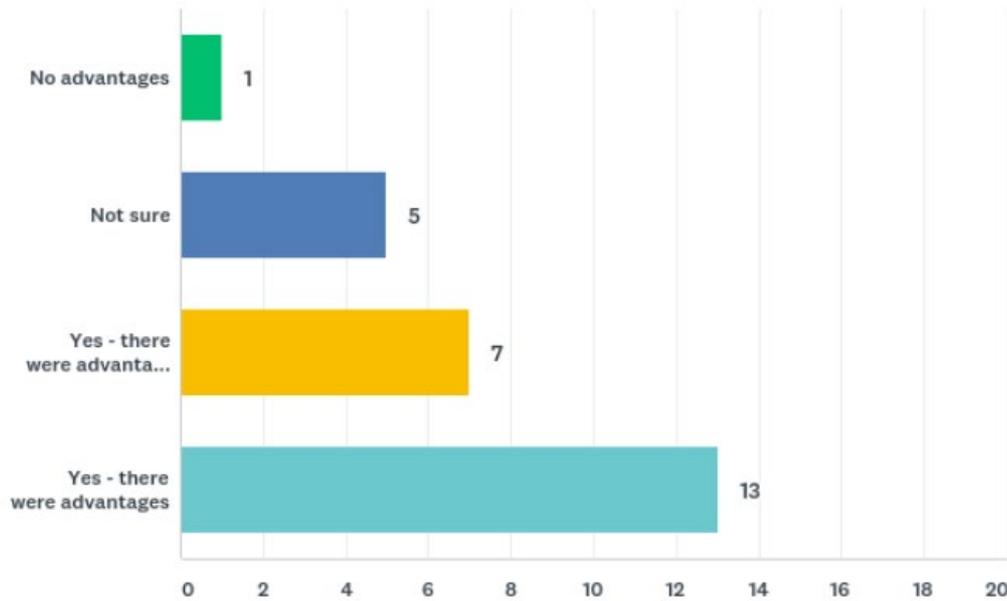
26 respondents answered this question with 77% (n=20) answering that there were advantages. 12 participants gave comments, which are outlined in Table 23 below:

Table 23   Free text comments provided to question regarding the advantages of the medium of counselling chosen

Gender	Year	Modality	Free text response
F	10	F2f	*There are always set sessions, making it more of a comfortable routine.*
Not specified	12	F2f	*It's more personal and more comforting (personally) when face-to-face.*
M	13	F2f	*Hopefully some of them are above! [In this respondent's other survey responses] But also having the same counsellor builds a relationship and trust and it's easier if the counsellor starts to know you and your issues/worries so you don't have to explain everything every time.*
F	Skipped	F2f	*I could see the counsellor being engaged to my stories, so I found it easier to talk about my issues in comfort.*

F	10	F2f	*It was more personal face-to-face and it was a relief to talk to someone openly.*
F	10	F2f	*Easier to see emotions face-to-face and more likely to be honest.*
F	12	F2f	*It's better for me to have face-to-face discussions with someone.*
F	13	Online	*It was more personal.*
Not spec	10	Blended	*It was two way thing.*
M	12	Blended	*Privacy, careful listeners, sensitivity and I came out with answers for issues that I felt not many could help me with.*
F	11	Blended	*I find it easier to talk face-to-face but I could use messaging to contact my counsellor whenever I wanted which helped when I had something pressing I wanted to talk about.*
M	13	Blended	*Easier, less 'exposed' than face-to-face etc.*

These responses were then categorised as per Figure 21 below.

Figure 22   Figure to show grouped categorisations of open responses to Q6

Showing **9** custom categories

Blended - Convenience		25%	3
Blended - Flexibility		33.33%	4
Blended - Less exposing		8.33%	1
Blended - Privacy		8.33%	1
f2f - comfort of routine		50%	6
F2f - Easier		8.33%	1
F2f - Engagement visible		8.33%	1
F2f - Less worrying		8.33%	1
f2f - More personal		33.33%	4
Uncategorized		0%	0
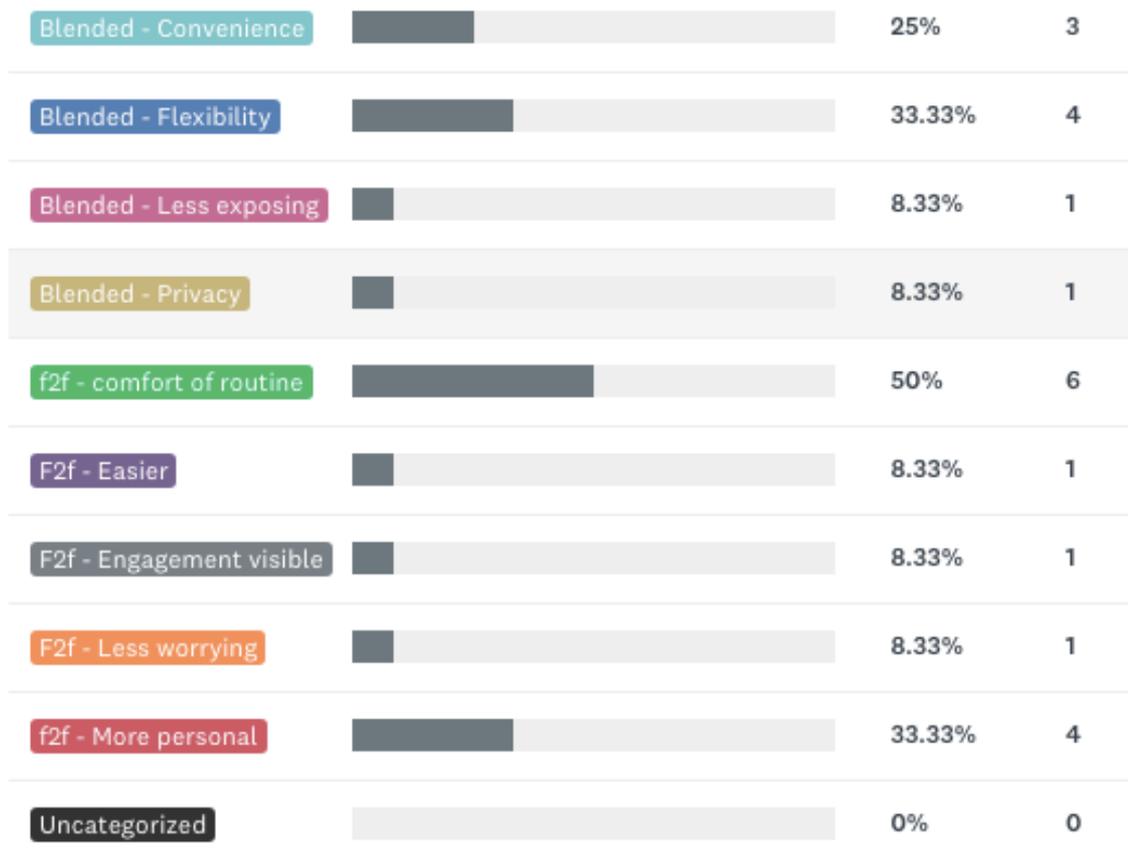
The overarching themes of 'convenience' (*flexibility, convenience*), 'connection' (*comfort of routine, engagement visible, more personal, less exposing*) and confidentiality (*privacy, less worrying*) were again spread across both f2f and online mediums. These will be discussed more fully in the next chapter. These eight categories also fell under the broader categories of convenience, connection and confidentiality which correlate with the data provided by the thematic analysis of pupil interviews that followed this survey, and of which more detail will be given in section 7.5.

Q7:   Were there any disadvantages to using the method of counselling that you did? If so, what were they?

Figure 23   Disadvantages to using the method of counselling chosen
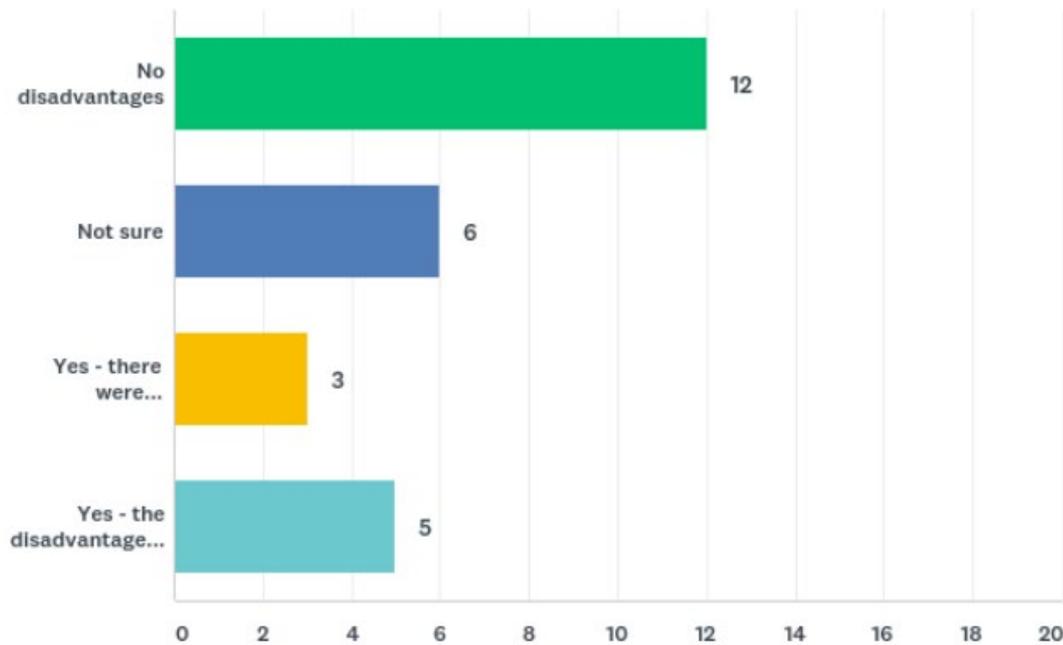
Five pupils stated the disadvantages of their choice of medium for counselling. These were all for the f2f medium and the verbatim text transcripts are shown below, followed by further categorisation.

Table 24   Transcripts stating the disadvantages of the choice of medium for counselling

Gender	Year	Modality	Free text response
F	10	F2f	*It can be very awkward having face-to-face counselling.*
F	13	F2f	*Finding the right time, quick enough.*
F	10	F2f	*You can only have 12 sessions a year.*
Not spec	12	F2f	*Not accessible out of school or at times when it was really needed.*
M	13	F2f	*Sometimes it can feel slightly awkward revealing some things face-to-face and saying them aloud - on some occasions I withheld things if I didn't feel comfortable enough to say them.*

Although there were only a small number of respondents who gave comments in answer to this question, the disadvantages could again be grouped into categories of convenience (or inconvenience) i.e. timing, flexibility and potential impact on connection ('*awkward to say things in person*'). These themes also correlated with the Meta themes reported later in the thematic analysis from pupils' post survey interviews.

Q8: Did you fill in questionnaires as part of your counselling? If so, which ones?

As part of the overall study data collection, a record was kept of service users' pre and post counselling score using CORE-10 and GBO measures. At the start of the study, the researcher had intended also using the Strengths and Difficulties Questionnaire, but discovered after the study had begun that there were prohibitive financial costs associated with this. Therefore, only the CORE 10 and GBO scores have been reported throughout the rest of this results chapter, even though some pupils may have completed other outcome measures as shown in the table below.

This question was also designed to test for representativeness of pupils using outcome measures in all mediums.

Figure 24   Questionnaires filled in during counselling
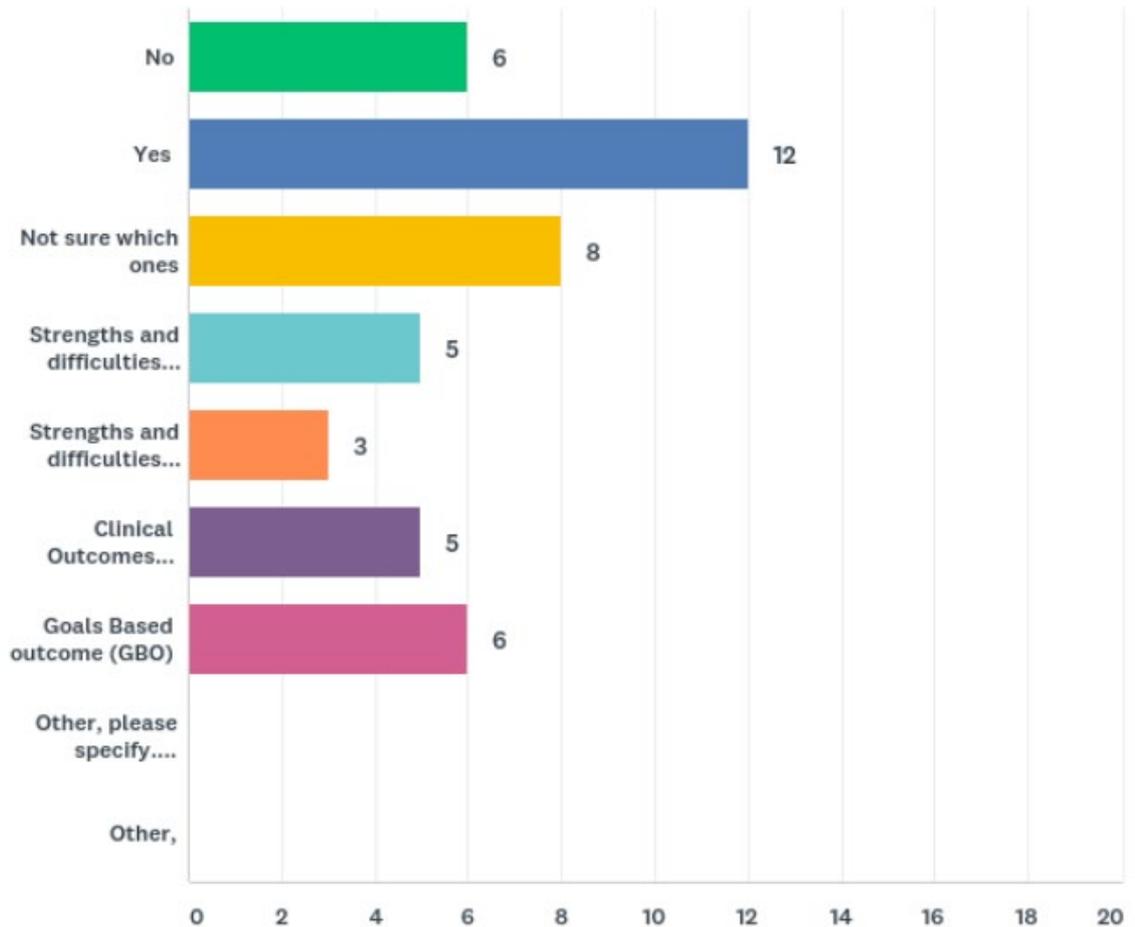
Of the 26 respondents who answered this question, twelve said they used outcome measures, six said that they did not and eight were not sure which ones they used. Of the measures used, only 19% (n=5) respondents reported using the CORE-10 even though the CORE-10 data available for the study (section 7.2) suggests a far greater number actually did. Upon reflection, this question may have been difficult to answer post counselling, as it may not have been clear to pupils what forms filled in during their counselling sessions were called.

Q9: Is there anything that you would like to say about using the questionnaires?

This question was to learn whether the usefulness of the measures (or not) was consistent across the data set, as well as what pupils thought of these measures of

their wellbeing. Although the number of responses is small, the results represent a varied landscape as shown in the table below.

Table 25   Verbatim text transcripts to Q9 above

Gender	Year	Modality	Free text response
F	10	F2f	*They're quite awkward questions. They're difficult to answer accurately because they're too open.*
F	10	F2f	*If you are self-conscious you may not be completely honest on the questionnaires.*
F	10	F2f	*I feel like the questionnaires I fill out are helpful for my counsellor however I do feel awkward answering truthfully as I feel I may be judged and taken to see someone I'd rather not talk to. It is also very hard to fill out how I have felt over the past week as I am suffering from very mixed emotions so at the very time I have counselling I may feel very different to an hour before I had my counselling session.*
M	10	Blended	*They were a good starting point for each session.*

Aside from one pupil, it is worth noting that the other three pupils stated that outcome measures might not present an entirely accurate picture of how they are feeling. This may be due to a number of different reasons, such as finding the statements '*too open'* and difficult to respond to, being prevented by '*self-consciousness'* to be completely honest, a fear of being judged if honest or of subsequent action being taken *('may be taken to see someone I'd rather not talk to')*. This suggests that the scores on outcomes measures may need to be interpreted with due caution and regard.

Q10: Is there anything that you'd like to say about your chosen counselling method?

This final question was designed to give participants the freedom to give any further detail about their chosen counselling medium. Two participants gave their thoughts, both of whom had chosen the f2f medium for counselling. Their comments suggested some frustration with not being able to fully use the time available in f2f work, either

within individual sessions or in the limited number of sessions offered by the service (a maximum of 12 sessions). The verbatim text transcripts were as follows:

Table 26   Table to show verbatim text transcripts to Q10 above

Gender	Year	Modality	Free text response
F	10	F2f	*Although I find face-to-face counselling an easy way to communicate my feelings on the whole, I sometimes find it very awkward trying to develop more of my answers. This leads me to feel a little uncomfortable at times and resulting in the session maybe not being quite as helpful as I was hoping it to be. I do though feel better when I am able to talk to someone about my issues though; it makes me feel as though I'm not alone. I am pleased with the current service I am getting and I feel comforted. However, I am feeling as though the help I am receiving is helping in the short term but not in the long term.*
F	10	F2f	*I felt that it was extremely helpful, but it was a shame that I could only have 12 sessions in a year*

With regards to the frustration regarding the limited number of sessions available, the school service has been limited to 12 sessions per pupil for the past 5 years, although it was previously working on a model of unlimited counselling sessions. This change was made for several reasons, but mainly as a way to manage the growing demand in numbers of pupils being referred for counselling. Practical aspects such as the number of available counsellors on the team and the number of rooms available were also a factor. The online counselling facility operated with the same session number limits (12 sessions) as in f2f. These sessions however could be offered outside the main school operating hours of 8.30am-4.20pm (Monday to Friday during term time only), and so were possibly a more flexible option for pupils. Opening the online counselling service to additional year groups may ease some of the burden on room availability, although the number of counsellors trained to work online would also need to be considered. Further discussion of the advantages and disadvantages to schools of incorporating school-based online counselling facilities into their f2f counselling provision will be more fully explored in Chapter 8.

Q11: Would you be happy to be contacted for a short interview about this research?

14 respondents declined, and 12 respondents said that they would be happy to be interviewed (however two omitted to provide their contact details). Therefore ten pupils volunteered to take part in a follow up interview.

The Internet survey software provided some analysis of word frequency within the answers given. This was used when considering 'categories' for the thematic analysis of the interviews (described in the next section). The survey data was analysed separately using the same process by three DPsych peers as collaborative analysis (Gallagher, 2008; Gershon, 2009; Phillips et al, 2013), to provide valuable quality control.

7.5   Qualitative analysis (thematic analysis) of pupil interviews

This section will outline the analysis of the pupil interviews that took place after the Internet survey. The section will begin with a brief introduction to the process and the participants involved (7.5.1), followed by a description of the initial stages of the thematic analysis (7.5.2). The final sections will outline the main themes and sub-themes produced (7.5.3 to 7.5.5).

7.5.1   Interview process and participants

The participants were ten pupils who had taken part in the post counselling survey (n=35), from the total group (n=68). The majority of pupils (70%, n=7) taking part in the interviews were in the school years 12 and 13 as outlined in Table 26 below. Pupils were interviewed soon after their set of counselling sessions had finished and pupils involved in these interviews were 60% male and 40% female.

Table 27   Data regarding interview participants

Pupil interview number	Interview date (Month / Year)	Gender	Year Group	Counselling medium chosen	Interview took place either f2f or online
1	03/16	Male	12	F2f	F2f
2	07/16	Female	13	F2f	F2f
3	10/16	Female	12	Online (blended)	F2f
4	02/17	Male	12	F2f	F2f
5	02/17	Male	10	F2f	F2f
6	02/17	Male	13	F2f	F2f
7	03/17	Female	10	F2f	F2f
8	03/17	Male	12	F2f	F2f
9	05/17	Male	12	Online (blended)	F2f
10	07/17	Female	10	F2f	Online

Ten recorded interviews were transcribed and thematically analysed according to the steps set out in Chapter 4. Pupils were asked several semi-structured questions (Appendix 14) about their choice of counselling medium, which included consideration of both the advantages and disadvantages. They were also asked their thoughts about the counselling medium that they hadn't chosen. Time was thus given for all interviewees to take the lead in the conversation and give any thoughts, feelings, or experiences about f2f or online school-based counselling, thus some of their disclosures were based upon their speculation about counselling (either f2f or online) rather than direct experience i.e. there was some speculation from participants in both directions. The data from participants who were counselled f2f or online were thus combined in a single thematic analysis. In the following report where appropriate, the reader is informed what the year group (10, 11, 12 or 13), gender (M for Male, F for Female) and whether the participant had F2f or Online (O) counselling. From this labelling, the reader is able to recognise where the participant is speaking from direct experience or is speculating.

7.5.2 Initial stages of the thematic analysis

I listened to the recordings repeatedly, and three peer DPsych candidates and myself read the transcripts several times. Initial 'points of interest' or 'themes' were identified and these were noted on the transcriptions. Discussions then took place regarding the themes via phone calls and regular DPsych group meetings online. The initial themes that were recognised were grouped, for convenience, under advantages and disadvantages for each medium (f2f or online counselling), with examples of transcripts that represented these themes. This is shown in Table 28 as an initial list of themes and clusters.

Table 28 Initial list of Themes and Clusters

Theme	Example transcripts	Freq.	Reference points (Interview number: Point number)
F2f - Advantages			
	Key: M/F = Male/Female. Y= Year group. F2f = Face to face O= Online (blended)		
Convenience of time / location etc. as pupil is in school	M, Y12, f2f: *"And for me in 6th form it's a lot easier because I have lots of time to just have it within school"* (1,12) M, Y10, f2f: *"I have the time to do a face-to-face session"* (5:20)	11	(1:12), (1:22), (1:24), (1:99), (4:108), (5:20), (5:22), (5:64), (8:100), (8:102), (9:26)
Easier to organise than online set up	M, Y10, f2f: *"Yeah, and it was quite flexible I guess, if you couldn't get an appointment in the morning, then another slot could easily be arranged, so that was good"* (5:24) M, Y12, O: *"... more convenient being face-to-face because it doesn't need phones or websites setting up, stuff like that"* (9:28)	4	(1:14), (2:14), (5:24), (9:28)
Talking 'in person' gives clarity	F, Y10, f2f: *"... And when I'm in the sort of flow of talking I find it better in person, if that makes any sense?"* (10:24) M, Y12, f2f: *"...Like you are so in the emotion and stuff, you're really confused, like everything is going around in your head... I found it really useful, sort of helping me work out how I felt. Sort of putting it down on paper (the therapist), writing notes and then 'what you are actually saying is this' then you sort of think, 'yeah, that is what I'm saying actually"* (8:26)	6	(1:16), (1:36), (1:79), (8:26), (8:94), (10:24)

Freedom / relief to speak out loud without ordering / censoring	M, Y12, f2f: *"It's not that I couldn't have done it by text, I wouldn't have been able to...um... because when I was talking I was just spurting words out, it was just coming out. There wasn't any particular order to what I was saying"* (1:18) M, Y12, f2f: *"...For me, the whole point of counselling was that I could actually say it out loud. I think that is a massive thing"* (8:24)	4	(1:18), (2:14), (7:25), (8:24)
Familiarity / comfort with medium	M, Y12, f2f: *"I would have only used face-to-face because that would have been my first thought, to actually talked with people first"* (1:99) F, Y10, f2f: *"I found that it was just a comfort to me"* (7:24)	8	(1:40), (1:99), (2:14), (7:24), (7:52), (8:38), (10:21), (10:26)
More confidential than online	M, Y12, f2f: *"There's still that risk involved that people may worry about, I think email especially... if whatever had happened had got out"* (1:56) M, Y13, f2f: *"The thing about the internet is... you don't know if it's going to record anything or put anything into a file on your computer....there's always that niggling little bit of fear that you've got, that third party could potentially be seeing it whereas face-to-face you don't have that thing, it's much easier to detect with their ear pressed to the door, than someone staring at a computer in Asia"* (6:26)	5	(1:56), (1:58), (1:89), (6:24), (6:26)
More time productive	M, Y12, f2f: *"But also another reason people probably choose face-to-face is that you get a lot more said or done during the face-to-face than using text"* (1:81) F, Y13, f2f: *"I think the fast paced-ness of it, because with me, you know it was only a couple of sessions and I literally went from feeling so low to*	7	(1:81), (2:24), (5:12), (5:48), (7:55), (8:32), (10:27)

	absolutely fine again and I don't feel like I would have got that change over email" (2:24)		
Like being able to 'see' other person / read non-verbal cues	F, Y13, f2f: *"Face-to-face would just be easier for me, just because you can. I like seeing people's emotion and I like interacting with people"* (2:14) M, Y12, f2f: *"Because you judge people's... how their posture is, their reactions to what you say. you don't exactly get that from a text or phone call"* (4:36)	4	(2:14), (3:22), (4:36), (8:18)
Enables better / deeper processing of thoughts and feelings	M, Y10, f2f: *"I feel like face-to-face offers...err... more like in depth....err...counselling, which is obviously better to get to the root of any problems you're having or stuff like that"* (5:12)	10	(2:14), (2:46), (4:20), (4:36), (4:40), (5:12), (6:24), (7:53), (8:32), (10:24)
More 'personal'	F, Y13, f2f: *"...We're texting so much now it becomes impersonal, so talking face-to-face feels the better option for me"* (2:16) F, Y10, f2f: *"Because you want that kind of connection face-to-face, and them to kind of look at you and understand...ummm... I can't really explain it.... more personal though"* (7:41)	9	(2:16), (4:38), (5:16), (5:18), (5:66), (6:24), (7:24), (7:41), (8:18)
Good to learn to open up to another in person in offline life	F, Y13, f2f: *"and I think that it's one of those things also that I sometimes find it hard to talk to people about things and it's quite nice to learn to open up about things which are actually you know, quite personal"* (2:16) F, Y10, f2f: *"Yes I think just for me personally it was a better option as I knew exactly what I was in for and it was nice to see another person like in real life to talk to try to open up about personal stuff"* (10:83)	2	(2:16), (10:83)
Able to respond in person to crisis in	M, Y12, f2f: *"Basically I came in on Monday morning and told the Head of Sixth form, you know, I've got this real major problem...ummm and he*	2	(4:28), (6:4)

school in person rapidly	said we'll try and find a counsellor for you as soon as possible and I saw a counsellor the same day in the space of half an hour" (4:28) M, Y13, f2f: "I ended up doing something that was rather silly [self-harm] and I came to the San (medical centre) and it was there that I talked to a nurse for a while and she said 'Do you want to get a counsellor over?' and I went 'ok'. ... and that's how I found out about counselling" (6:4)		
Emotional connection in person stronger than via electronic means	M, Y12, f2f: "Because you don't get the same emotional connection when you are on the internet.... like when you are with a counsellor, it can be very sensitive.... and to be at a distance like that, I don't feel it helps that much... because...it's something about the emotional connection that you have when you're opening up about a deep, meaningful conversation, that you really should be face-to-face with this sort of thing" (4:36) M, Y12, O: "I guess you get a bit more meaning out of stuff I guess...ummm like facial expressions, tone of voice and stuff, that doesn't really come through on the internet" (9:22)	3	(4:36), (6:24), (9:22)
More connection from session to session	M, Y10, f2f: "There's more of a personal relationship between the two people... if you came in the next week, they already know what you did last week, and you can just follow on quickly from what you were talking about" (5:16) F, Y10, f2f: "Because you want that kind of regular connection face-to-face.... more personal..." (7:41)	2	(5:16), (7:41)
Feels more 'real'	M, Y13, f2f: "But with face-to-face it feels more.... just for me, it feels more real" (6:14)	2	(6:14), (8:24)

	M, Y12, f2f: *"...it's quite a relief to just like let it all out, out loud. It sounds like more real, it sounds like ok, I'm actually like this... do you know what I mean?"* (8:24)		
Having someone 'there' for you	F, Y10, f2f: *"It's just nice to have someone who's there for you and... can just give you the support you need when...you're scared to tell people in your life, or in your family, or you just don't feel comfortable telling them"* (7:26) F, Y10, f2f: *"It can be nice having another person actually in front of you and knowing that they are there for you... quite comforting"* (10:26)	2	(7:26), (10:26)
F2f - Disadvantages			
Being 'seen' by peers / stigma	M, Y12, f2f: *"It's just that stereotypical-ness beforehand that anyone going to a counsellor has to have some major problem... but my problem wasn't major, it was so minor, that I don't think anyone would have even noticed, even if I told them about it"* (1:119) M, Y13, f2f: *"...but I think that there is that kind of mentality to it, like 'oh, if I go, my friends will see me as...you know, messed up, or wrong, or stuff."* (6:54)	11	(1:42), (1:44), (1:50), (1:119), (4:8), (6:54), (6:60) (7:31), (7:37), (8:76), (9:30)
Confidence required for first session f2f	F, Y13, f2f: *"Cos actually getting up and seeing someone in person is quite daunting"* (2:32) F, Y12, O: *"Not so much for me, but for other people, I can see it being a massive jump and it was for me at first. I can see them finding it a lot more difficult to actually get in the room"* (3:32)	5	(2:32), (3:8), (3:16), (3:32), (4:56)

Emotional processing expected of f2f might 'put people off'	F, Y10, f2f: *"[face-to-face] .... you might feel a bit embarrassed, because online it's internet, so you don't have to really confess all of your feelings, because it's just words, it doesn't feel like the emotions are connected"* (7:28) M, Y12, f2f: *"Some people don't like showing emotion at all, so counselling face-to-face, they'd find it really hard"* (4:56)	4	(2:48), (4:56), (4:74) (7:28)
Emotionally draining / harder work than online	M, Y12, f2f: *"And then you just like have to tell them. It can be really hard to say out loud, you can be really nervous and you just go round in circles"* (8:48) M, Y12, f2f: *"I also felt when you are face-to-face it can be quite tiring. To be emotional, or having this deep, meaningful conversation, really takes it out of you... especially if you are doing it in the middle of the day, you still have the afternoon to get through with all your lessons and then homework later on"* (4:48)	7	(2:50), (2:54), (4:48), (4:68), (4:70), (4:72), (8:48), (8:54)
Awkwardness / Pressure of running out of things to say in time allocated / the room	M, Y12, f2f: *"And I do find myself running out of stuff to say. So, you feel you know, you have to drag it out for 40 minutes of being face-to-face. You can run out of topics, you might feel awkward...you feel awkward to say, 'I don't have much more to say'... that can put people under pressure"* (4:48) F, Y10, f2f: *"Yes, I can find it intimidating at times because of long pauses and maybe too much silence"* (10:32)	7	(4:48), (4:52), (4:58), (4:60), (10:32), (10:34), (10:38)
Lack of flexibility of time / day / not possible out of school	F, Y10, f2f: *"And sometimes there are some days I'd like to see a counsellor more than others because of maybe what has happened or how I'm feeling.... because maybe for example, early in the week I may*	4	(4:48), (6:30), (10:42), (10:57)

	be upset but then when it comes to my session later in the week I'm a lot happier, which makes it a lot harder for the counsellor and for me to sort out the issues in the moment" (10:42) M, Y12, f2f: *"Well there's that, there's you know finding the time to make an appointment in person, which would last 40 minutes and you know, being a student is quite hectic to find that time to dedicate to a counselling session in school"* (4:48)		
Online - Advantages			
Easier to initiate first contact with counsellor	M, Y12, f2f: *"... when I emailed I wasn't clear what I wanted. So I emailed to basically connect with counsellors, saying how I'd quite like counselling, but I'm not sure what I want"* (1:8). M, Y13, f2f: *"I think it's already very accessible, all you have to do is fire up your email and email a counsellor"* (6:48)	5	(1:6), (1:8), (4:16), (4:30), (6:48)
Online counselling can be a bridge to f2f	F, Y12, O: *"It just felt like an easier step, like less real.... you've got that step up and then when you meet face-to-face it's more like bridging the gap, if you know what I mean"* (3:6) M, Y12, O: *"That's a good reason to have online counselling in schools, because it could potentially get more people to come face-to-face"* (9:91)	11	(2:34), (3:4), (3:6), (3:8), (3:12), (3:6), (3:88), (5:46), (9:84), (9:86), (9:91)
Flexibility / convenience if time poor	M, Y12, O: *"... for people in the younger years, I would say it's (online counselling) probably a lot more useful than for people in the Sixth Form, because they don't really have as much time in breaks and stuff, to go face-to-face"* (9:64) F, Y13, f2f: *"I guess it's more accessible as well, because most people have more time free in the evenings and it's not missing school... so for*	19	(1:12), (1:22), (1:30), (1:99), (1:105), (2:30), (2:106), (2:122), (3:34), (4:108), (4:10), (4:112), (6:56), (7:59), (8:66), (8:74), (9:64), (10:59), (10:77)

	students it's easier... instead of worrying about what you are missing (in lessons)" (2:106)		
Not being 'seen' by peers	M, Y12, f2f: *"Yeah, not being seen and no pressure to find a time or place to avoid others seeing me"* (1:54) F, Y13, f2f: *".... it's nice for people who are really struggling and don't want to come into a room and just in case people see and things like that .... and it can be in the comfort of your own home..."* (2:30)	5	(1:54), (2:30), (6:56), (6:58), (7:59)
Flexibility of time / place / frequency	F, Y13, f2f: *"Having the option... if you are having a really busy week and you just need to talk to someone, it's so easy to contact them online and have that in the evening.... especially in the months leading up to exams when it's so chaotic. Those are the times that you need help the most and there's not enough time in school"* (2:122) M, Y12, f2f: *"... cos I think it's a lot more flexible, because the counsellor that you sort of feel bad for them... to drive out all this way and then you don't have much to say. Whereas it's more convenient for everyone if you're online, even on call or text, you can just say, right, I think that's everything. You can arrange you know another online appointment, it's just a lot more flexible for everyone"* (4:54)	7	(1:56), (2:106), (2:122), (3:34), (4:54), (7:44), (8:68)
Useful if client is clear about issue/s	M, Y12, f2f: *"They would have benefitted a lot more from an online service than I would have done. Because the issues they went about, they knew exactly what the issue was, but had no idea how to resolve it. But my issue was, I didn't know what the issue was, so once I worked out what the issue was I could then resolve it"* (1:89).	3	(1:79) (1:89), (7:59)

	F, Y10, f2f: *"Cos I think that stress and day-to-day issues here and there, that would be brilliant. Cos if it was just sort of small... it would be so much easier to do it at home when you're stressed about something ..."* (7:59)		
YP Comfort / familiarity with technology / e-communication	M, Y12, f2f: *"Because when you text, your used to doing it with your friends anyway, so it's sort of innate..."* (4:64) M, Y12, O: *"I mean the internet is kind of younger people's domain, so (laughs) it probably makes people feel a bit more confident... maybe even say stuff that they wouldn't say in person"* (9:34)	9	(1:89), (1:91), (3:22), (3:64), (3:66), (4:64), (9:34), (9:44), (9:46)
Easier to manage / censor thoughts / feelings	M, Y12, f2f: *"And then you just have to like tell them. It can be quite hard to say out loud, you can be quite nervous....in online, you'd be more.... easier to say, just like say it, type it out... Because it's less real I guess"* (8:48) F, Y10, f2f: *"You might feel a bit embarrassed. Because it's online it's internet, so you don't have to confess all your feelings, it's just words"* (7:28)	5	(2:62), (2:122), (4,56), (7:28), (8:48)
Gives time to think	F, Y10, f2f: *"When I'm speaking in person it can be hard to say exactly what I want as I'm put on the spot whereas online you can have as much time as you like to think and phrase what you want to explain, which also might be easier to understand"* (10:61) F, Y10, f2f: *"Also because it's available all the time and an on-going flow of conversation and that you can have time to think how you want to explain which might help the counsellor too"* (10:59)	2	(10:59, (10:61)

Less 'real', therefore (less inhibition) easier to say things	F, Y12, O: *"It just felt like an easier step, like less real...not that being real would have been a bad thing, but just like, you've got that step up and then when you meet face-to-face it's more like bridging the gap, if you know what I mean?"* (3:6) M, Y12, O: *"I guess being online slightly removes it from reality, so they don't feel as bad saying stuff online"* (9:38)	8	(3:6), (8:48), (9:38), (9:50), (9,52), (9,56), (10:68), (10:70)
Being able to continue work during school absences	M, Y12, O: *"Ummm... I guess you can do it while you're suspended! That was really convenient (laughs)"* (9:58) F, Y12, O: *"Yes that's a really good advantage of having it, so that if when you're ill, if you still want to do something, you can do it online"* (3:26)	6	(1:22), (3:24), (3:26), (6:14), (6:32), (9:58)
Trust in school in-house online counsellors as known, qualified, professionals	F, Y12, O: *"I guess there is more trust in the school service for quite a few people probably. And knowing that you are getting help from.... like you're talking to someone who is professionally trained, who knows what's going on, rather than someone who is a little bit shaky and that... so... I know a few people online and some I would trust and some I absolutely wouldn't and you can end up in the dark world of the internet going searching your own stuff out..."* (3:38) M, Y12, f2f: *"... because they have inside knowledge of the school, so it could be helpful in that sense as well"* (1:70)	2	(1:70), (3:38)
Able to end session early if finished with no / or less discomfort / more power equality	M, Y12, f2f: *"You do see them as a higher figure because they are an adult and the whole point is that you're going to them because they have ways of helping you. You do see the difference in the equality, whereas online it's... you don't really... you don't really have a picture of*	4	(4:54), (4:60), (4:62), (10:61)

	them...maybe you do on video, but it still, it doesn't have that same effect" (4:60)		
	F, Y10, f2f: "Well when I'm speaking in person it can be hard to say exactly what I want as I'm put on the spot, whereas online you can have as much time as you like to think and phrase what you want..." (10:61)		
Enabler for people who find it difficult to open up in person	M, Y10, f2f: "Maybe if you are quite a shy person, or you're not very outspoken, let's say. I'd say offering maybe just audio or just typing something; I'd say that would be beneficial to some. It offers another way to do counselling" (5:44) M, Y12, O: "...that goes back to feeling more confident online, when you are not face-to-face with someone" (9:80)	6	(4:74), (4:76), (4:88), (5:44), (9:34), (9:80)
Can choose 'where' to work	M, Y13, f2f: "... If certain ones of them [his friends] could visit, you know, online at any time, from anywhere, they would certainly...much more strongly think about using it" (6:56) F, Y10, f2f: "Because when I was in that place that I was in, it was these chairs that were quite uncomfortable, and I couldn't completely relax. But in your own home, you can, really relax" (7:45)	3	(6:56), (6:58), (7:45)
Can see the same counsellor f2f and online	M, Y12, f2f: "That's probably one advantage of using the school counselling (online) service would be that you could easily change (between online and face-to-face with the same counsellor) if you wanted to" (1:76) F, Y12, O: "So, if they did reach that point where someone wanted to make the, like, move up to face-to-face then they could" (3:86)	3	(1:76), (3:84), (3,86)

Choice of face-to-face or online is important	F, Y12, O: *"If schools can offer it (online counselling), why don't they?"* (3:92) F, Y10, f2f: *"I think that it's good to have both on offer as different people will want and find different options easier. I think a combination could work best"* (10:91)	6	(2:122), (3:54), (3:92), (4:78), (10:87), (10:91)
Online - Disadvantages			
Difficulty putting emotions into text	M, Y12, f2f: *"It wasn't that I wouldn't have done it by text, I just wouldn't have been able to...um... because when I was talking I was just spurting words out, it was just coming out... but then if I tried to do that through text, it just wouldn't have worked, I'd have just sat there having no idea what to say"* (1:18) M, Y12, f2f: *"Cos like sometimes it's quite hard to like... to get everything across like, so like the emotional and the feeling behind it, so it comes across like quite blunt"* (8:18)	7	(1:12), (1:18), (1:20), (1:32), (1:107), (7:53), (8:18)
Impact of school online 'netiquette' / environment	F, Y13, f2f: *"...and you wouldn't say anything that... especially because it's still a sort of school environment, you wouldn't want to say something that was against that sort of etiquette... "*(2:64) F, Y13, f2f: *"... that now a lot of our work is based through email to teachers, so we know how to write formally and that's what we are doing all the time....and because you are in a school and the counselling team is to do with the school... I think you'd feel that you'd have to type it formally and sometimes, when you are upset about something in person, you would swear, you would do things that when you are writing [to school staff] you just wouldn't do it.."* (2:66)	2	(2:64), (2:66)

Risk of privacy / confidentiality being compromised due to external third party	M, Y13, f2f: *"The thing about the internet is...you don't know if it's going to record anything or put a file on your computer. So, although like you can assume quite safely in most cases that, when you're talking to a person over online it will just be between you and your counsellor. There's always that niggling little bit of fear that you've got, that third party could potentially be seeing it. Because you are not sure that the software you are using is100% safe to outside sources"* (6:26) F, Y12, O: *"I mean, disadvantages of online, some people might think that they can't trust... but you've got to like... obviously you can trust it, it's just overcoming that mental boundary, which people are a little bit shaky about... not actually having the contact with someone, knowing that they are actually there"* (3:58)	7	(1:56), (1:60), (3:58), (3:72), (3:74), (6:26), (6:58)
Risk of privacy / confidentiality being compromised due to school context	F, Y13, f2f: *"It's hard to understand how it can be separate (the online counselling system from the school online platform), because surely teachers can have access?"* (2:98) F, Y12, O: *"Yeah, knowing that it is an encrypted service really helps with that, I don't know.... maybe if you could do like an assembly showing people how to get onto it... people knowing that it's a safe, trustworthy source"* (3:60)	3	(2:98), (3:58), (3:60)
Text only – slower than f2f, i.e. time not maximised	F, Y10, f2f: *"Failing to communicate exactly what needs to be shared which makes progress very slow"* (10:73) M, Y10, f2f: *"I think building a relationship between two people might be a bit gradual... which for some, if you're looking for a long like...ummm... sort of counselling then that's fine.... I'd say you probably got to know me quicker face-to-face rather than if we were online"* (5:48)	6	(1:83), (2:24), (5:48), (8:32), (10:73), (10:75)

Separates thoughts from feelings in a way that slows processing i.e. a disadvantage	F, Y13, f2f: *"... and I find sometimes when I'm typing I'm not really thinking what I'm saying..."* (2:14) F, Y13, f2f: *"... I just think the emotion side, when I talk about... I just cry all the time and I don't think I would cry as much if it wasn't face-to-face... because you know when you are typing, it's just not... although it is what you are feeling, it's not deep down because you are not saying it... and for me it just wouldn't be as emotional..."* (2:46)	4	(2:14), (2:24), (2:46), (2:68)
Impersonal, blunt	M, Y12, f2f: *"And also, it's quite hard to sort of portray stuff like through messaging, through just text like that. Cos like sometimes it's quite hard to like ummm.... to get everything across like, so like the emotional and the feeling behind it, so it comes across like quite blunt"* (8:18) F, Y13, f2f: *"we're texting so much now it becomes impersonal..."* (2:16)	2	(2:16), (8:18)
Seeking help online can lead to the 'dark world' of the internet	F, Y12, O: *"There is a dark side of the internet and especially when you go out seeking your own help, you can get into completely the wrong stuff"* (3:40) F, Y12, O: *"They [online counselling sources outside of school e.g. Childline] are really a help... they are really good ones, but like I say, you can end up going completely wrong with the internet"* (3:80)	5	(3:38), (3:40), (3:42), (3:80), (3:82)
Initial information / sign up can be off-putting / difficult to navigate	F, Y12, O: *"Yeah, I do remember there being quite a lot of info and finding it a bit hard to navigate"* (3:76) M, Y12, O: *"... (the initial set up) was a little stressful to be honest... though I guess I'm used to technology being a bit slow and going wrong and stuff"* (9:66)	5	(1:91) (3:76), (9:64), (9:66), (9:76)

Miscommunication / things can be lost in translation	M, Y12, f2f: *"Or you know, the counsellor might not see the severity of the situation, because on text it doesn't sound all that bad... but in reality, it is for you. You really don't get that message across as you do in face-to-face"* (4:36) M, Y12, f2f: *"Yeah, I think tone is a massive thing as well, because I think a lot of things can be like lost in translation. It's quite hard to get sort of the tone right... I think a lot of people use like emojis to get the emotion behind it easier. But it is quite hard to get that across, if you know what I mean"* (8:22)	5	(2:24), (4:36), (8:22), (9:22), (10:73)
Technology reliability / breakdown	M, Y12, O: *"Well... you can't have glitch outs [face-to-face]"* (9:18) M, Y12, O: *"... though I guess I am used to technology being a bit slow and going wrong and stuff"* (9:66)	3	(9:18), (9:20), (9:66)
Difficult to transition from online to f2f and back again and vice-versa	M, Y12, f2f: *"Yeah, even when you are on a call, even when you can see them, it's not the same as when you're, you know, sitting next to them say, it's not the same. It doesn't have the same effect. And so, when we meet again, you know, it was completely different. You sort of have to get used to it again, it's not the same, you can't compare the two at all"* (4:46) F, Y10, f2f: *"I would still have probably chosen f2f but after having a few sessions of f2f I would felt more comfortable using online counselling"* (10:85)	2	(4:46), (10:85)

7.5.3 Further stages of the thematic analysis

Upon further analysis of the initial themes identified above (originally under the categories of advantages and disadvantages), three stronger themes appeared. These were thus identified as the major (Meta) themes within the data:

1. Convenience
2. Connection
3. Confidentiality

Several sub themes (with both positive and negative properties) were clustered under the Meta theme categories above, as indicated in Table 25 below. This table indicates the number of sub themes related to each Meta theme and is more fully illustrated in Figure 18 below. The sub themes applicable to aspects of both f2f and online school-based counselling were as follows:

- Physical aspects
- Emotional aspects
- Practical aspects
- Absence of technology
- Impact of technology

Table 29   Meta themes and sub themes

Meta Theme	Sub themes	Face-to-face counselling (numbers of sub-themes)		Online counselling (numbers of sub-themes)	
		Positive	Negative	Positive	Negative
Convenience	Practical aspects	3	2	4	2
	Absence / Impact of technology	2	0	4	3
Connection	Physical aspects	4	2	3	2
	Emotional aspects	2	2	2	2
	Absence / Impact of technology	4	0	3	2
Confidentiality	Physical aspects	0	1	1	0
	Emotional aspect	1	0	1	0
	Absence of technology	0	0	0	2

Figure 25   Thematic analysis showing distribution of themes and sub-themes
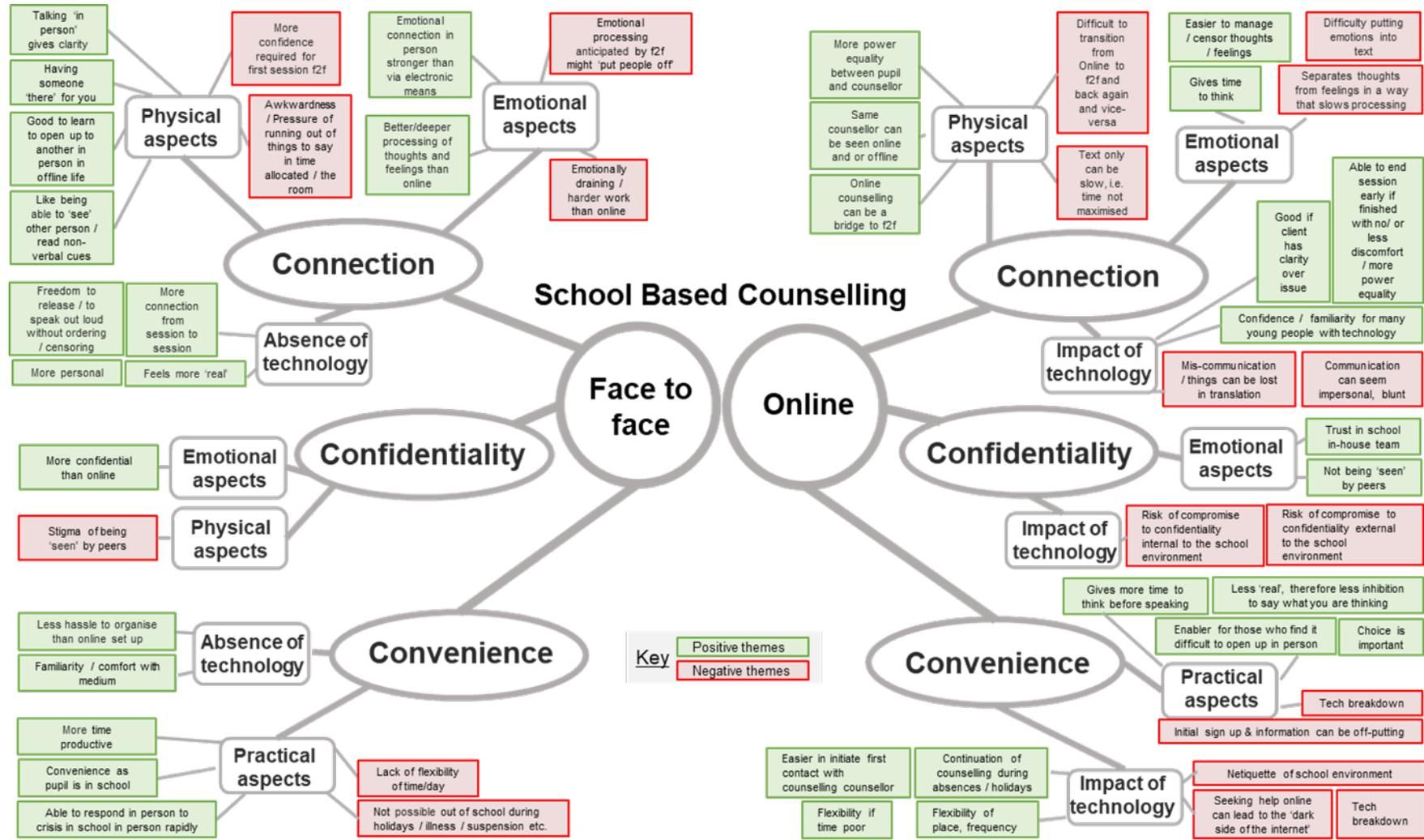
The results of the thematic analysis revealed three major themes and their associated sub-themes that will now be described below under the Meta theme headings of Convenience, Connection and Confidentiality. Each of the sub-sub themes shown in Figure 24 are emphasised in italics in the following clarification for the reader. Consideration will be given to aspects of both f2f and online school-based counselling as appropriate within each Meta theme.

7.5.4 Meta theme of 'Convenience'

This theme reflects aspects of convenience regarding participants' work in the specified medium. It will cover aspects related to convenience ranging from initial contact with the schools' counselling service, management of sessions or time between sessions and aspects of counselling processes. The sub-themes within this category (for online and f2f school-based counselling) were 'practical aspects' and 'impact or absence of technology'. The sub sub-themes in Figure 24 will be discussed under these categories as follows:

a) *Practical aspects*. This discussion will cover the sub-sub themes in Figure 24: *convenience of time and location, accessibility, productiveness of time allocated, the opportunity for being 'real' or not, ability to respond in person to crisis and choice or individual preference for f2f or online school-based counselling.*

b) *Absence, or impact of, technology*. This discussion will cover: *familiarity with medium, technology experienced as 'hassle' or as an 'enabler', flexibility, school netiquette, distraction, the dark side of the internet and finally, not being 'seen'.*

Participant responses are included to illustrate the points being made and include details of gender (M/F), year group (Y) and medium chosen for counselling, either (F2f) or online (O).

a) *Practical aspects*

Both the online and f2f mediums were experienced as convenient for relatively similar practical reasons, such as 'Time', e.g.:

> **M, Y12, F2f:** And for me in 6th form it's a lot easier because I have lots of time to just have it within school (1,12)

F, Y13, O: I guess it's more accessible as well, because most people have more time free in the evenings and it's not missing school... so for students it's easier... instead of worrying about what you are missing in lessons (2:106)

Accessibility was also mentioned for both f2f and online mediums:

M, Y12, F2f: Basically I came in on Monday morning and told the Head of Sixth form, you know, I've got this real major problem...ummm and he said we'll try and find a counsellor for you as soon as possible and I saw a counsellor the same day in the space of half an hour (4:28)

M, Y13, F2f: I think it's [the online counselling service] already very accessible... all you have to do is fire up your email and email a counsellor*' (*6:48)

Furthermore, with regards to time and accessibility, a principal disadvantage of f2f school-based counselling mentioned by several participants was that it was not generally possible to have f2f contact with counsellors during school holidays or absences. Additionally, some participants saw the rigidity of the same time/day arrangement as particularly unhelpful for therapeutic benefit, for example:

F, Y10, F2f: And sometimes there are some days I'd like to see a counsellor more than others because of maybe what has happened or how I'm feeling.... because maybe for example, early in the week I may be upset but then when it comes to my session later in the week I'm a lot happier, which makes it a lot harder for the counsellor and for me to sort out the issues in the moment (10:42).

Also, perhaps surprisingly, some participants who had chosen the f2f medium for their own counselling considered the combination of flexibility of time availability and accessibility of online counselling as strong advantages. They mentioned how it might be particularly important at various times in pupils' lives e.g. exam times:

F, Y13, F2f: Having the option... if you are having a really busy week and you just need to talk to someone, it's so easy to contact them online and have that in the evening.... especially in the months leading up to exams when it's so chaotic. Those are the times that you need help the most and there's not enough [f2f] time in school (2:122)

On official school holidays and unanticipated days not in school (e.g. due to illness or exclusion) it was also considered to be important for pupils to be able to access support if possible:

M, Y12, O: Ummm... I guess you can do it while you're suspended ...[laughs]...that was really convenient (9:58)

F, Y12, O: Yes that's a really good advantage of having it, so that if when you're ill, if you still want to do something, you can do it online (3:26)

Participants also expressed practical aspects that were considered advantages or disadvantages in both mediums. For example, participants who had only experienced f2f counselling saw f2f counselling as more time productive:

F, Y13, F2f: I think the fast paced-ness of it, because with me, you know it was only a couple of sessions and I literally went from feeling so low to absolutely fine again and I don't feel like I would have got that change over email (2:24).

One participant was very emotional in the sessions and in a later comment (2:46) expressed that if she had been working online, it may not have been as easy for her to cry. She would be more likely to separate her thoughts (as she typed them) from her feelings (as she was feeling them).

Another example of time used in f2f counselling perceived as being more productive in the time allocated is that more therapeutic work could be covered by talking in person, rather than having to convert speech into text that had then to be typed:

M, Y12, F2f: But also another reason people probably choose face-to-face is that you get a lot more said or done during the face-to-face than using text (1:81)

Yet some participants who also had f2f counselling felt that that more therapeutic material might be covered online for those that find f2f communication difficult because it can put them *'on the spot':*

F, Y10, F2f: When I'm speaking in person it can be hard to say exactly what I want as I'm put on the spot whereas online you can have as much time as you like to think and phrase what you want to explain, which also might be easier to understand (10:61).

This finding is echoed in other research (Hanley et al., 2016; King et al., 2006) where young people report finding the online environment less exposing and confrontational than some f2f situations; which might facilitate disclosure at a faster rate (Rochlen et al., 2004). Working therapeutically online via text was suggested as giving more time to think for some participants, enabling them to process their thoughts without the perceived pressure of someone sitting opposite waiting for their turn to speak:

M, Y12, F2f: And then you just have to like tell them. It can be quite hard to say out loud, you can be quite nervous...in online, you'd be more... easier to say, just like say it... type it out... (8:48)

This sense of having less pressure to respond within any given time limit was suggested as beneficial not only to the client, in having more time to think or process their thoughts, but also as something that could be helpful to the counsellor:

> **F, Y10, F2f:** Also because it's available all the time and an on-going flow of conversation and that you can have time to think how you want to explain, which might help the counsellor too (10:59)

This finding (having more time to think or process) is mentioned in Chapter 3, as part of a discussion about time being experienced differently when online (Suler, 2016) and particularly facilitative to relationship building from both counsellor and client perspectives.

Another positive aspect of online counselling in terms of convenience and productive use of the time allocated was described by participants as useful to those who may have difficulty expressing themselves to others in person for more general reasons, such as shyness or general personality disposition:

> **M, Y10, F2f:** Maybe if you are quite a shy person, or you're not very outspoken, let's say. I'd say offering maybe just audio or just typing something; I'd say that would be beneficial to some. It offers another way to do counselling (5:44)

Finally, some participants suggested that online counselling was an easier medium to access and for participating in counselling, as it seemed less *real*. This is likely to be for several reasons (which will be more fully explored in the discussion chapter that follows), but may be particularly due to the disinhibition effect (Suler, 2000). This suggests that people say and do things online that they would likely not do f2f, as both these online clients suggest:

> **M, Y12, O**: I guess being online slightly removes it from reality, so they don't feel as bad saying stuff online (9:38)

> **F, Y12, O:** It just felt like an easier step, like less real...not that being real would have been a bad thing, but just like, you've got that step up and then when you meet face-to-face it's more like bridging the gap, if you know what I mean? (3:6)

Research into the positive aspects of the disinhibition effect (Suler 2000, 2004 & 2016) as described in Chapter 3 is growing (e.g. King et al, 2006: Rochlen et al, 2004; Richards, 2009), but is as yet limited.

A clear benefit of offering an online service within a school setting is the opportunity of working online in conjunction with f2f provision, with potentially the same therapist. This is not generally possible from those external organisations offering schools an online counselling facility but which may be some geographical distance from the school. The quantitative results reported earlier in this chapter also support the blended use of the school-based online counselling service with f2f provision, with a smaller number of pupils using the online service alone.

Finally, with regard to the convenience of both f2f and online counselling, one of the main points put forward by participants was that of the importance of young people being given the choice over the medium that they could work in therapeutically:

> **F, Y10, F2f:** I think that it's good to have both on offer as different people will want and find different options easier. I think a combination could work best (10:91)

b) Absence or impact of technology

Many of the participants indicated that f2f would have been more familiar and less complicated a medium associated with counselling:

> **M, Y12, F2f:** I would have only used face-to-face because that would have been my first thought, to actually talked with people first (1:99).

However, as these participants were born into the digital age and could be considered 'digital natives' (Prensky, 2001) many of them also suggested that the familiarity of the online medium was a key advantage when considering online counselling e.g.:

> **M, Y12, O:** I mean the Internet is kind of younger people's domain, so (laughs) it probably makes people feel a bit more confident... *(9:34)*

However, with regard to convenience, there were certain aspects of online counselling mentioned as of concern by some participants, particularly related to the technological aspect of the online environment. School pupils and academic staff generally have a form of speaking to each other online that requires an expected level of etiquette - information via text-based communication would be normally be reasonably formal, for example expletives and emoticons would not normally be exchanged between staff and pupils. However, despite information given beforehand about how counselling online may be different, and about netiquette (a blended version of the words 'internet' and 'etiquette'), it could still be difficult for some young people to

switch to a more informal style when conversing with a school counsellor. Therefore, the client may feel more inhibited by the medium:

> **F, Y13, F2f:** ... that now a lot of our work is based through email to teachers, so we know how to write formally and that's what we are doing all the time...and because you are in a school and the counselling team is to do with the school... I think you'd feel that you'd have to type it formally and sometimes, when you are upset about something in person, you would swear, you would do things that when you are writing (to school staff) you just wouldn't do online. (2:66)

Another point made by some participants was that seeking help online (even if it is just a link to a platform that the pupil has not used before) can lead to time wasted on related, or unrelated, sources inspired by connecting to the Internet, or in the worst case spending time on unhelpful or potentially damaging websites:

> **F, Y12, O:** There is a dark side of the Internet and especially when you go out seeking your own help, you can get into completely the wrong stuff (3:40)

> **M, Y12, O**: ... more convenient being face-to-face because it doesn't need phones or websites setting up, stuff like that (9:28)

Furthermore, one of the main points made by participants was that f2f counselling was less *'hassle'* for them to initiate i.e. there are additional practical technical steps required before online counselling can begin, than in initiating f2f counselling:

> **M, Y12, O:** ...[the initial set up] was a little stressful to be honest... though I guess I'm used to technology being a bit slow and going wrong and stuff (9:66)

Yet, conversely, some participants suggested that as they initially contacted the school-based counselling team through online means (i.e. they had emailed or texted to ask for an appointment) it had made it easier for them to access counselling f2f or online in the first instance:

> **M, Y12, F2f:** ... when I emailed I wasn't clear what I wanted. So I emailed to basically connect with counsellors, saying how I'd quite like counselling, but I'm not sure what I want (1:8).

However, perhaps the most frequent point about the impact of technology regarding convenience, was being able to speak to someone online without the discomfort of being seen by peers as using the counselling services in school, which could bring additional pressures of having to explain why:

> **M, Y12, F2f:** Yeah, not being seen and no pressure to find a time or place to avoid others seeing me (1:54)

F, Y13, F2f: ... it's nice for people who are really struggling and don't want to come into a room and just in case people see and things like that ... and it can be in the comfort of your own home (2:30)

This is often cited (Davison, 2008: Glasheen et al., 2016) as one of the main reasons that young people do not use their school-based counselling facilities if they need to.

Online and f2f counselling may be convenient or not for the same causes; for different people at different times; and for practical or technological (absence or impact of) reasons. Feedback around disadvantages of the technological aspects of online counselling, such as an pupil expectation of a certain netiquette in online school-based counselling communication, how to get the best out of text-only communication, what to do in the event of a technology breakdown, making the sign-up process more young person user-friendly and so on, has been very useful information to use in planning training for therapists (see Chapter 9: Products), and to provide an online counselling experience that will endeavour to be more convenient, attractive, efficient and useful to young pupils.

This section concludes with a point that was made by almost half (40%) of participants, suggesting that where possible it would be important for young people to have the choice of both online and f2f counselling in schools:

F, Y12, O: If schools can offer it [online counselling], why don't they? (3:92)

F, Y10, F2f: I think that it's good to have both on offer as different people will want and find different options easier. I think a combination could work best (10:91)

7.5.5   Meta theme of 'Connection'

This theme reflects various aspects of the connection or therapeutic relationship between school counsellors and their 'clients' and what may help or hinder this in terms of working online or f2f. Participants' responses to interview questions were grouped in sub-themes under categories of 'physical' and 'emotional' aspects, and the impact on the strength of therapeutic relationship of technology or the absence of technology. The sub sub-themes in Figure 24 for this category will be discussed under these categories as follows:

a) Physical aspects. This discussion will cover the sub-sub themes in Figure 24:*'importance of having someone physically there for you, importance of non verbal*

cues, learning to open up to another, provides greater clarity, freedom to speak without censoring, challenge of being in presence of another / an adult/ member of staff, awkwardness, control over emotions/counselling process, strength and speed of relationship building

***b) Emotional aspects** – strength and speed of building relationships, processing of thoughts or feelings, inhibition and facilitation of emotional processing, time to think*

***c) Absence, or impact of, technology**.* This discussion will cover: *Confidence and familiarity with medium, miscommunication and ability to express emotions/thoughts, control/autonomy, sense of real-ness or not, personal.*

Physical aspects

With regards to f2f counselling in schools, participants expressed the importance of having someone physically there with them in the same space as being particularly important to the relationship:

> **F, Y10, F2f:** It's just nice to have someone who's there for you and it can just give you the support you need when...you're scared to tell people in your life, or in your family, or you just don't feel comfortable telling them (7:26)

> **F, Y10, F2f:** It can be nice having another person actually in front of you and knowing that they are there for you... quite comforting (10:26)

Being able to see and be with another person and the importance of non-verbal cues was also mentioned by 40% of participants:

> **M, Y12, F2f***:* Because you judge people's... how their posture is, their reactions to what you say... you don't exactly get that from a text or phone call (4:36)

This finding is supported by research that highlights similar concerns from clients about the potential lack of non-verbal cues in online counselling (Mallen et al, 2003; King et al., 2006; Richards & Viganò, 2013).

For young people to also learn how to open up in the physical presence of another person about sensitive topics whilst being in a f2f situation was highlighted as a useful skill by some participants:

> **F, Y13, F2f:** ...and I think that it's one of those things also that I sometimes find it hard to talk to people about things and it's quite nice to learn to open up [in person] about things which are actually you know, quite personal (2:16)

Alongside this, participants described greater clarity in talking, feeling, and working therapeutically in the presence of another person in the moment as things arose:

> **M, Y12, F2f:** ...Like you are so in the emotion and stuff, you're really confused, like everything is going around in your head... I found it really useful, sort of helping me work out how I felt. Sort of putting it down on paper [in the room with the therapist], writing notes and then 'what you are actually saying is this' then you sort of think, 'yeah, that is what I'm saying actually (8:26)

However, for some participants, to be physically in the school-based f2f counselling room could be considered a challenge at the beginning of a counselling relationship, as suggested by this pupil who worked in a blended way:

> **F, Y12, O:** Not so much for me, but for other people, I can see it being a massive jump and it was for me at first. I can see them finding it a lot more difficult to actually get in the room (3:32)

Some f2f participants found being in the physical presence of another difficult during the counselling session:

> **M, Y12, F2f:** And I do find myself running out of stuff to say. So, you feel you know, you have to drag it out for 40 minutes of being face-to-face. You can run out of topics, you might feel awkward...you feel awkward to say, 'I don't have much more to say'... that can put people under pressure (4:48)

This suggests that some young people may find it difficult to end a session when they prefer to, rather than staying for the pre-agreed time suggested by the therapist or automatically assumed i.e. the normal duration of an academic time slot. This pressure may be due to the perceived power differential between adults and young people, as well as school staff and school pupils. With regards to the physical aspects of connection online, some participants (both online and f2f) mentioned that difference in perceived power in the relationship between school counsellor and client could be different online, tending more towards equality:

> **M, Y12, F2f**: You do see them as a higher figure because they are an adult and the whole point is that you're going to them because they have ways of helping you. You do see the difference in the equality, whereas online it's... you don't really... you don't really have a picture of them...maybe you do on video, but it still, it doesn't have that same effect (4:60)

> **M, Y12, F2f:** ... cos I think it's a lot more flexible, because the counsellor that you sort of feel bad for them... to drive out all this way [the school sites are 6 miles from one another in this group of schools] and then you don't have much to say. Whereas it's more convenient for everyone if you're online, even on call or text, you can just say, right, I think that's everything. You can arrange you know another online appointment; it's just a lot more flexible for everyone (4:54).

This finding, suggesting that young people may be attracted to online counselling as they have more control over the physical and emotional process in f2f counselling, has been proposed by other research with young people (Cook & Doyle, 2002; Hanley, 2009: Gibson & Cartwright, 2014).

To take the concept of more control (and greater choice) for young people one step further, having the opportunity to work with a schools counsellor both online and f2f means they have the option of working with the same counsellor in both mediums if they wish (which may not be true if they were accessing online counselling from an external source e.g. Childline):

> **M, Y12, F2f:** That's probably one advantage of using the school counselling (online) service would be that you could easily change (between online and face-to-face with the same counsellor) if you wanted to (1:76)

This could mean that those who found it difficult to access f2f help at first, could use online counselling as a first step, or a bridge, to f2f counselling. Two participants who had had online counselling made this point:

> **F, Y12, O:** It just felt like an easier step, like less real.... you've got that step up and then when you meet face-to-face it's more like bridging the gap, if you know what I mean" (3:6) and "So, if they did reach that point where someone wanted to make the, like, move up to face-to-face then they could (3:86)

> **M, Y12, O:** That's a good reason to have online counselling in schools, because it could potentially get more people to come face-to-face (9:91).

Yet, the opportunity to blend online and offline counselling in schools was mentioned by other participants as also having some difficulties i.e. that the physical transition between online and f2f work may not necessarily be a smooth one:

> **M, Y12, F2f:** Yeah, even when you are on a call, even when you can see them, it's not the same as when you're, you know, sitting next to them say, it's not the same. It doesn't have the same effect. And so, when we meet again, you know, it was completely different. You sort of have to get used to it again, it's not the same, you can't compare the two at all (4:46).

Another difficulty mentioned by participants was regarding the speed of building a therapeutic relationship particularly by using text only, may mean that it takes longer:

> **M, Y10, F2f:** I think building a relationship between two people might be a bit gradual... which for some, if you're looking for a long like...ummm... sort of

counselling then that's fine.... I'd say you probably got to know me quicker face-to-face rather than if we were online (5:48).

Whilst this has been suggested by young people who have not perhaps experienced online counselling themselves (as Participant 5 above, who was speculating about the online therapeutic relationship development), there is a developing research base providing evidence to the contrary, i.e. that some relationships develop deeper and faster online than they may do f2f. This may be due in part to the disinhibition effect mentioned earlier, also illustrated by Participant 9 who had had online counselling:

M, Y12, O: Well, err… it's like, it not being direct face-to-face… I don't know… at least for me it makes like being online a lot more confident to say what I am thinking and feeling... (9.48).

Emotional aspects

Again, there were points made for and against f2f counselling with regard to the emotional aspects of connection or the therapeutic school counselling relationship. Positive aspects included participants suggesting that the emotional connection was stronger in f2f counselling compared to online counselling, and that there was better processing of thoughts and feelings when in person alongside a counsellor, that enabled them to work at more depth:

M, Y12, F2f: Because you don't get the same emotional connection when you are on the Internet.... like when you are with a counsellor, it can be very sensitive.... and to be at a distance like that, I don't feel it helps that much... because...it's something about the emotional connection that you have when you're opening up about a deep, meaningful conversation, that you really should be face-to-face with this sort of thing (4:36)

M, Y10, F2f: I feel like face-to-face offers...err... more like in depth....err...counselling, which is obviously better to get to the root of any problems you're having or stuff like that (5:12).

These clients were often speculating about what they believed an online therapeutic relationship might feel like. Conversely, some f2f participants said that counselling f2f made it harder for them to manage their thoughts and feelings, and speculated that an online therapeutic relationship might have made it easier for them:

M, Y12, F2f: And then you just have to like tell them. It can be quite hard to say out loud, you can be quite nervous.... but in online, it'd be more.... easier to say, just like say it, type it out... Because it's less real I guess (8:48).

This was also supported by the idea that some young people may be put off f2f counselling in person during the school day, as they expect to find it (or do find it) emotionally draining:

> **M, Y12, F2f:** I also felt when you are face-to-face it can be quite tiring. To be emotional, or having this deep, meaningful conversation, really takes it out of you... especially if you are doing it in the middle of the day, you still have the afternoon to get through with all your lessons and then homework later on (4:48).

Alongside this, there was some expectation that emotional processing is part of f2f work and may be particularly avoided by some pupils because of this:

> **M, Y12, F2f:** Some people don't like showing emotion [in person to other people] at all, so counselling face-to-face, they'd find it really hard (4:56)

Some f2f participants speculated that emotional processing online may also be inhibiting, particularly if communicating via text only:

> **M, Y12, F2f:** It wasn't that I wouldn't have done it by text, I just wouldn't have been able to...um... because when I was talking I was just spurting words out, it was just coming out... but then if I tried to do that through text, it just wouldn't have worked, I'd have just sat there having no idea what to say (1:18).

Or that online communication would separate thoughts and feelings in a way that would not have been helpful to the client:

> **F, Y13, F2f:** ... I just think the emotion side, when I talk about... I just cry all the time and I don't think I would cry as much if it wasn't face-to-face... because you know when you are typing, it's just not... although it is what you are feeling, it's not deep down because you are not saying it... and for me it just wouldn't be as emotional... (2:46).

However, those participants with experience of the online counselling medium reported that the online therapeutic relationship or connection was enabling in terms of emotional processing, as described in the section below.

Absence or impact of technology

When participants considered the impact of using technology or not on the strength of the therapeutic relationship, various aspects were revealed. Without technology between the counsellor and client, participants suggested that there was more freedom to release their feelings in the moment:

M, Y12, F2f: It's not that I couldn't have done it by text, I wouldn't have been able to...um... because when I was talking I was just spurting words out, it was just coming out. There wasn't any particular order to what I was saying (1:18)

M, Y12, F2f: ...For me, the whole point of counselling was that I could actually say it out loud. I think that is a massive thing (8:24).

This may have been connected to the sense that f2f counselling with no technology involved was experienced as more 'real'. Several times participants referred to counselling f2f as more 'real' and more 'personal' than online:

M, Y12, F2f: ...it's quite a relief to just like let it all out, out loud. It sounds like more real, it sounds like ok, I'm actually like this... do you know what I mean? (8:24).

Regarding the experience of f2f counselling being more '*personal*', this was sometimes related to the use of text in everyday relationships becoming more commonplace, and therefore less personal:

F, Y13, F2f: ...We're texting so much now it becomes impersonal, so talking face-to-face feels the better option for me (2:16)

F, Y10, F2f: Because you want that kind of connection face-to-face, and them to kind of look at you and understand...ummm... I can't really explain it.... more personal though (7:41).

Again however, some participants commented that the online counselling medium also gave them more of an opportunity to reveal their emotions at a pace that personally suited them, and in a way that felt less 'real':

M, Y12, F2f: And then (f2f) you just have to like tell them. It can be quite hard to say out loud, you can be quite nervous.... but in online, I'd be more.... easier to say, just like say it, just type it out... Because it's less real I guess (8:48).

Some participants commented that using technology may impact the therapeutic relationship, particularly when using text only i.e. the client is unable to be heard accurately:

M, Y12, F2f: Or you know, the counsellor might not see the severity of the situation, because on text it doesn't sound all that bad... but in reality it is for you. You really don't get that message across as you do in face-to-face (4:36).

Or that the participant may struggle to express thoughts and feelings, or express them in a way that impacts the therapeutic relationship. Important things could be portrayed in a way that seemed either blunter than the client might wish, or '*lost in translation*':

M, Y12, F2f: Cos like sometimes it's quite hard to like... to get everything across like, so like the emotional and the feeling behind it, so it comes across like quite blunt (8:18)

M, Y12, F2f: Yeah, I think tone is a massive thing as well, because I think a lot of things can be like lost in translation. It's quite hard to get sort of the tone right... I think a lot of people use like emojis to get the emotion behind it easier. But it is quite hard to get that across, if you know what I mean (8:22).

It is important to point out that many of the comments above come from the 80% of participants who had only experienced f2f school-based counselling. Of the 20% that experience online counselling, thoughts about the impact of technology on the therapeutic relationship tended to be more positive, particularly the point that young people are 'digital natives', and find it a more familiar and comfortable environment, one where they have a sense that they have the 'upper hand' over adults:

M, Y12, O: I mean the Internet is kind of younger people's domain, so (laughs) it probably makes people feel a bit more confident... (9:34).

In support of this finding, Gibson & Cartwright (2014) suggest that:

The priorities of young people in text counselling also highlight their immersion in a different communication culture to the one in which most adults might feel at home. Most of the participants who took part in this study seemed to feel that text was a 'natural' and comfortable mode for them and that face-to-face communication was, on the whole, more awkward and less secure. (p. 103).

In summary, there were both negative and positive aspects of the strength of the therapeutic relationship established in both online and offline school-based counselling by participants in this sample. Their comments echo current research that suggests that online and f2f counselling both have distinct advantages and disadvantages in terms of the counselling relationship, and if clients were more fully informed about the potential differences of both ways of working it may enable greater choice, or for those that have psychological barriers to f2f counselling to consider receiving help with the aid of technology.

7.5.6 Meta theme of 'Confidentiality'

This theme reflects one of the most important aspects of any counselling relationship for both the individual client and counsellor, and is considered here in the context of working in a school. Confidentiality in this research was considered with regards to both physical and emotional aspects, and in terms of the impact or absence of technology. The following discussion will include a description of confidentiality regarding the counselling medium chosen, any content or 'data' that was part of the

counselling process as it occurred or collected after the session or series of sessions, and thoughts about confidentiality and the therapeutic relationship. The discussion will cover the sub sub-themes in Figure 24 as follows:

a) Physical aspects.

This discussion will cover the sub-sub themes in Figure 24: The stigma of being seen, the known quantity of the school-based counsellor

b) Emotional aspects

This discussion will cover: Trust in the school-based counselling team, Feelings around confidentiality – both positive and negative and from inside and outside the school environment,

c) Absence, or impact of, technology.

This discussion will cover: *Trustworthiness of the technology, Fear of a record of written information being shared internally or externally, fear of leaving a 'digital footprint'*

Physical aspects

One of the most positive aspects of online counselling in schools is that it gives young people the potential to access counselling without being seen by their peers, suggested as a reason why young people do not seek help from their f2f school service (National CAMHS Review, 2008). Several participants stated this as an important point:

M, Y12, F2f: Yeah, [a disadvantage of f2f counselling in school] not being seen and no pressure to find a time or place to avoid others seeing me (1:54)

M, Y13, F2f: ...but I think that there is that kind of mentality to it, like, oh, if I go [to f2f counselling], my friends will see me as you know, messed up, or wrong, or stuff (6:54).

Participants from this study mentioned that there was a certain amount of trust in the known quantity of the school f2f counselling team, which translated to meeting those counsellors in an online environment too:

F, Y12, O: I guess there is more trust in the school service for quite a few people probably. And knowing that you are getting help from.... like you're talking to someone who is professionally trained, who knows what's going on, rather than

someone who is a little bit shaky and that... so... I know a few people online and some I would trust and some I absolutely wouldn't, and you can end up in the dark world of the Internet going searching your own stuff out... (3:38)

Previous research has suggested that young people value having school-based counsellors (Fox & Butler, 2007). Being school-based, counsellors are likely to have built up an intimate knowledge of the pupil's school context and culture that can support f2f trust being built. However, even though the counselling team in this group of schools is well established, well respected, and generally well used by pupils (see Chapter 1), there was a difference in the perceived level of confidentiality offered by the same school-based f2f counsellors when working online, due to aspects of technology.

Emotional aspects

Several participants mentioned their fears around confidentiality of working in an online environment, even if it were with a trusted school counsellor. This seemed to be for a number of different reasons, such as risk from an external third-party source:

> **M, Y13, F2f:** There's always that niggling little bit of fear that you've got, that third party could potentially be seeing it.... whereas face-to-face you don't have that thing, it's much easier to detect with their ear pressed to the door, than someone staring at a computer in Asia (6:26).

Absence or impact of technology

Furthermore, the technology itself was not deemed to be trustworthy by some participants:

> **M, Y13, F2f**: The thing about the Internet is...you don't know if it's going to record anything or put a file on your computer. So, although like you can assume quite safely in most cases that, when you're talking to a person over online it will just be between you and your counsellor... (6:26).

External risks to confidentiality online were not the only concern shared by participants in this study. Some expressed concern around the risk of committing personal details in text to a school counsellor, wondering if they would then not be automatically be available to other school staff, as both these (f2f) participants express:

> **F, Y13, F2f:** It's hard to understand how it can be separate [the online counselling system from the school online platform], because surely teachers can have access? (2:98)

M, Y12, F2f: There's still that risk involved that people may worry about, I think [internal school] email especially... if whatever had happened had got out (1:56).

Some participants felt that these risks might be mitigated by more emphasis on the information available in school about the security and encryption processes involved in school counselling online:

F, Y12, O: Yeah, knowing that it is an encrypted service really helped with that (3:60).

Furthermore, young people have generally been taught in schools (if not also at home) about online safety (Wishart, 2004; Ranguelov, 2010), so it is perhaps no surprise that this caution would be warranted in any online communication, particularly given the likely sensitive personal material to be shared. There would therefore be real benefit for any therapist thinking about offering online counselling in first taking steps to ensure that safety is offered to a high standard (i.e. HIPAA and HITECH compliant) and secondly that potential clients are clearly informed about it in a way that they can understand. This is consistent with current literature around best practice in online counselling (Anthony & Goss, 2009; Anthony & Nagel, 2010; Anthony et al., 2010; Anthony, 2015) and is an important part of the training program devised as a product of this research (see Chapter 9).

The majority of participants interviewed for the thematic analysis part of this study had sought counselling f2f (80%, n=8). This correlates with the numbers of pupils over the two-year study period that used the f2f service (81%, n=52). For those that had the confidence to access f2f counselling in school, and could manage any difficulty with regards being seen by their peers, there were suggestions that the f2f counselling offered higher levels of confidentiality when compared to online counselling:

M, Y13, F2f: Whereas if you are in a smaller room alone with an older person [comparing online counselling with f2f], or maybe a younger person in some cases, it just does feel a lot more confidential and private and it certainly allowed me to open up more... in the end (6:24).

Yet many of the participants could see both the advantages and disadvantages of both mediums and suggested that a way forward may be for school counsellors to provide more information and in a variety of formats:

F, Y12, O: Maybe if you could do like an assembly showing people how to get onto it or something, that might help… people knowing that it's a safe, trustworthy source (1:60).

This information has been useful in the creation of the training programme developed as one of the products of this research (Chapter 9) and has been used in this schools group in terms of development of its in-house school counselling provision. This seems to have enabled pupils to make an informed choice themselves about school-based counselling either offline, online or a blend of both:

F, Y10, F2f*:* I think that it's good to have both on offer as different people will want and find different options easier. I think a combination could work best (10:91).

7.6   Summary of results section

This chapter has given details of the results of investigations into the provision of a new online counselling service within an existing f2f school-based counselling service. Results have indicated that some (24%) of pupils have indeed used the new online service, some opting to use the online counselling service only (6%) and a larger majority (18%) using it in a blended way with f2f counselling. The largest number of clients (76%) used the school-based f2f service.

In summary, the quantitative results have indicated that 24% of pupils have used the new online service, some opting to use the online counselling service only (6%) and a larger majority (18%) using it in a blended way with f2f counselling. The largest number of clients (76%) used the school-based f2f service.

The series of comparison tables show that outcome measures indicated no statistically significant differences in changes between the mediums chosen for online counselling, nor any statistically significant differences between males and females. However, there were some interesting trends suggested, such as those who used the online counselling medium had higher mean distress levels at intake – potentially suggesting that they had left it longer before seeking help, though the small sample sizes are likely to have impacted any possibility of statistical significance.

The Internet survey was completed by just over half of the total participants (n=68) in the study and many of the results supported the data from the outcome measure investigations and the thematic analysis.

The thematic analysis presented a mixed landscape of responses of the pros and cons of school-based counselling in both f2f and online mediums. There were some unexpected points raised that will be discussed in the next chapter, in combination with the results of the other parts of the analyses. The discussion will also make explicit links (where appropriate) with the research investigating the other part of the school counselling dyad (UK secondary school counsellors) described in Chapter 2.

Chapter 8   Discussion

8.1   Introduction

This chapter will provide a discussion of the investigation into a school-based online counselling development in a group of secondary schools in Hertfordshire, UK. The discussion of this Final Project (FP) will synthesize quantitative and qualitative findings where appropriate.

The chapter will also provide a summary of findings from the Practice Evaluation Project (PEP) i.e. the investigation into UK secondary school counsellors' experience and opinions of school-based online counselling development, followed by a synthesis of the findings from both the FP and the PEP as per Figure 25 below.

Figure 26   Synthesis of the FP and PEP results
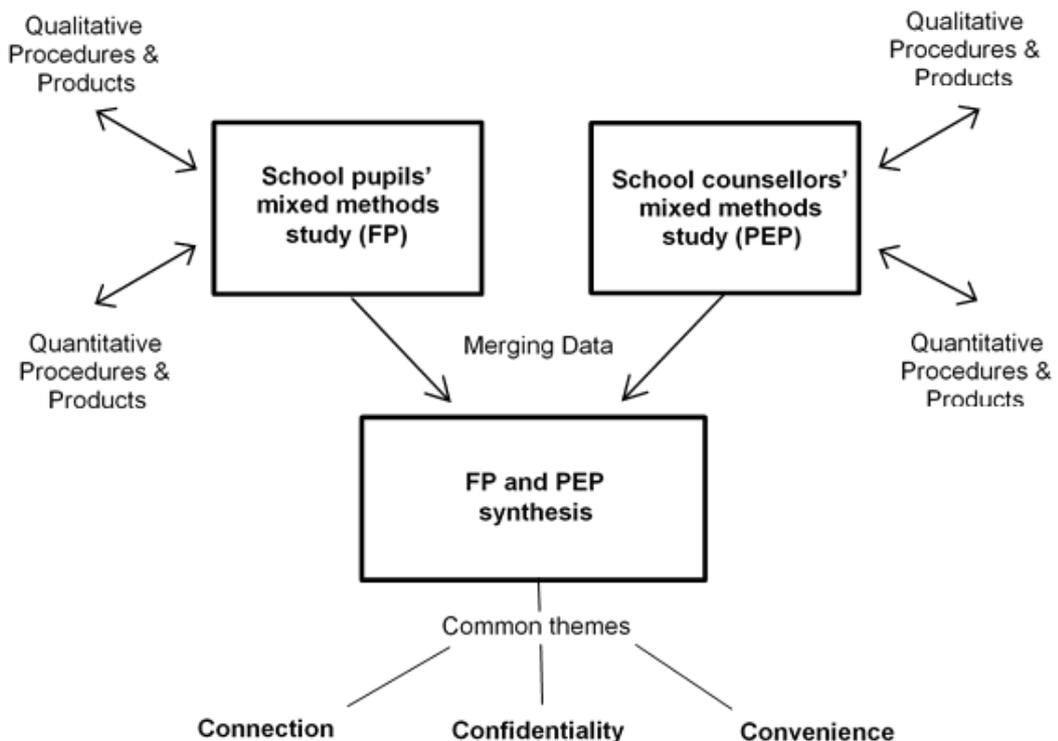
Where possible, these findings will be discussed in the context of the current literature and research base in this area. The strengths and limitations of the FP will also be

considered, along with potential implications for therapists and other professionals interested in school-based counselling development. Finally, a concluding summary and suggestions for future research will be given. The sections of this chapter are as follows:

8.2   Discussion of the results of the Final Project

Research (see Chapter 3) suggests that the mental health and wellbeing of young people in current times is deteriorating (Luthar & Barkin, 2012; UNICEF, 2013; Pitchforth et al., 2016; Lessof et al., 2016), with a potential negative impact on both academic performance and later life chances (Goodman et al., 2011; Murphy & Fonagy, 2012). As young people in the UK spend the majority of their time until 18 years old in schools, school-based professionals have opportunities to promote initiatives that could support young people in their mental health and emotional wellbeing. As many UK schools currently have counsellors (Cooper, 2013), and there is a government drive to equip schools with more mental health resources (Frith, 2016; Prime Minister's Office, 2017: DH & DfE, 2017), this research into school-based counselling services is particularly timely.

Young people's increasing use of technology to communicate in their relationships (Mesch, 2012: Livingstone, 2017), and the increase in external national organisations (such as the NSPCC, Childline and Young Minds) successfully offering online therapeutic services indicates that these services are meeting a need. However, UK schools-based f2f counselling services do not seem to be developing such resources in parallel, and schools may not be aware of possible advantages that technological developments could bring into their counselling work, particularly as these technological developments could be particularly relevant to their specific client group of adolescents, born into a digital age.

Within the group of schools involved in this research the original impetus for the FP came from unprompted requests from pupils (Hennigan, 2011) and was further reinforced by results from the PEP (Chapter 2). This suggested that UK school counsellors would be motivated to consider this development for a number of reasons, including evidence that pupils would use the school-based online counselling service, that it could be effective in terms of outcomes, and that it might reach pupils with psychological barriers to receiving f2f help in schools.

This research therefore aimed to provide a response both to requests from pupils in the original survey and to professional peers and others involved in the PEP (Chapter 2). It sought to understand quantitative and qualitative aspects of usage of a school-based online counselling provision alongside an existing f2f facility. The intention was to document the results of this research to share with pupils, school staff, professional peers, and other interested parties. The FP aimed to answer these principal questions:

- What might be required to develop a school-based online counselling adjunct to an existing f2f service?
- Would the school-based online service be used?
- Would the school-based online counselling service be effective?
- What did pupils think about school-based online counselling as an adjunct to the f2f provision?
- Would the provision of online school-based counselling attract those pupils who may have psychological barriers to f2f school counselling?

In response to the first question, an account of the development of a school-based online counselling service can be seen in Chapter 6. A discussion will follow in response to the remaining questions.

8.2.1 Would the school-based online counselling service be used?

Of the 68 pupils who used the school-based counselling service during the research period, 16 (24%) used the new online counselling medium. This suggests that should schools offer this service it is highly likely that some pupils will use it. However, many counsellors trained in traditional f2f methods may be relieved to hear that many more pupils (76%) still used the f2f service given the choice. The qualitative results suggest

that many of these young people felt that f2f counselling, with all the usual non-verbal cues available, provided a more efficient and effective therapeutic experience. This also explains why 75% (12) of the online clients blended their online counselling with the same therapist online or f2f. This is clearly a significant advantage over national organisations currently offering online counselling to many different schools (for a fee), where pupils may not ever have the option, or means, of meeting their online counsellor f2f. A school-based service that can offer both options to pupils was highlighted as very important by survey and interview participants in terms of choice, convenience, flexibility and in support of adolescent autonomy.

Some professionals (Stofle, 2001; Glasheen & Campbell, 2008) have suggested that online counselling may appeal to traditionally underserved groups, such as males, with regards to uptake of counselling. Interestingly, young people from this research expressed similar thoughts. Yet, quantitative analysis of service usage suggests that there is no significant difference between males and females in usage of the service f2f or online, a finding supported by recent similar research (Glasheen et al., 2015) regarding pupil intention to use online school-based counselling if it were available.

However, although the low n prevents strong conclusions being drawn, it appeared that there was a slightly larger female preference for counselling online in this research, again consistent with similar research (Dubois, 2004; Tsan & Day, 2007; Callahan & Inckle) and in line with gender differences historically found in school-based help-seeking (Hill et al., 2011; Cooper, 2013).

Both male and female interview participants (participant numbers 1, 4 and 10) suggested after participation in this research and knowing that the service was online, that this knowledge would be useful to share with friends who they felt may want help, but would not be likely to seek it by f2f means in school. This implies that the online service would be attractive to both genders. Perhaps the central focus to improve uptake should therefore be on raising awareness in the pupil population generally. This finding is supported by other research into online counselling (Rochlen et al., 2004; Joyce, 2012), where Joyce (2012) states:

> "Men who were in the online condition had significantly more positive attitudes toward online counselling after they learned about it than at pre-test. These results indicated that, due to the newness of online counselling,

people may not have a good idea what it entails but may be more open to it after education or experience." (p.14)

However, 'lack of awareness of services' is also an issue that applies to school-based f2f counselling (Cooper, 2013). A solution has been proposed: involving young people more in the development and advertisement of school-based counselling services. Pupils could then advise on information and promotion strategies that may be helpful and attractive to their peers, rather than the methods conceived by adults such as posters, leaflets and talks in assemblies.

There appeared to be no significant differences between presenting issues in f2f and online school-based counselling, with the spread of issues traditionally brought to f2f counselling (Cooper, 2013; Perks, 2016) also appearing in school-based online counselling. The two principal presenting issues in this research (anxiety and low mood) are supported by research with young people by national organisations offering online counselling (Kids Help Line, 2013; Xenzone, 2017). Family is also often a top presenting issue in school-based f2f counselling (Hill et al., 2011; Cooper, 2013; Perks, 2016), yet even though this is true for the f2f results of this research, it was not echoed in the online results. This may be due to a much smaller sample size and narrower age range of pupils i.e. Years 10-13 in this study, compared to the wider age range (Years 7 - 13) of other studies. These results may be particularly reassuring to counsellors who have traditionally worked f2f and believe that online counselling presenting issues could be very different.

However, the school-based online counselling service *was* utilised by pupils - for similar reasons as have been discovered elsewhere (King et al., 2006), and with similar issues brought to the school-based f2f service. The majority of participants felt that it was important for school counsellors to provide online school-based counselling as an option, where possible, so that all pupils had choice.

8.2.2 Was the school based online and f2f counselling service effective?

In terms of effectiveness, results from the analysis of outcome measures used showed that on average, clients lessened their original distress levels and made progress toward their therapeutic goals in both f2f and online mediums. Again, this is supported by the majority of research comparing outcomes from f2f and online

counselling (Barak et al., 2008; Richards & Viganò, 2013) and also research in this area with young people (Sefi & Hanley, 2012; Watsford & Rickwood, 2014; Xenzone, 2017) and in school-based f2f and online counselling (Hill et al., 2011; Cooper, 2013).

However, some caution is needed in assuming that measurement of effectiveness by use of outcome measures is entirely accurate (Cooper, 2013) especially given the small sample size. This was supported by participants suggesting that they may not present an entirely accurate picture of how they are feeling in their responses to outcome measures used, for several different reasons. These included finding the CORE-10 statements 'too open' (F, Y10, F2f) and difficult to respond to, being prohibited by 'self-consciousness' to be completely honest or a fear of being judged if honest, or of subsequent action being taken i.e. 'I may be taken to see someone I'd rather not talk to' (F, Y10, F2f). This suggests that outcomes measures results in this study can be considered as indicative but need to be interpreted with due caution and regard.

Although this research did not quantitatively measure any aspects of the therapeutic alliance, the results from the analysis did suggest that the strength of the online counselling alliance was sufficient for therapeutic change to occur. This is important, as research has suggested that the online therapeutic relationship is as crucial to successful counselling (Cook & Doyle, 2002; King et al, 2006; Dunn, 2012) as it is in successful f2f counselling (e.g. Lambert & Barley, 2001; Horvarth et al., 2011; Wampold & Imel, 2015) and also in counselling with young people (McLeod, 2011; Shirk et al., 2011).

Research with regards to young people's online therapeutic relationship (Hanley, 2009; Hanley & Reynolds, 2009) further supports the quality of online therapeutic relationships being rated as medium to high for users of a UK-based online counselling service (www.Kooth.com). However, more recent research by Hanley (2012) into the online therapeutic alliance from the perspective of young people emphasised that for a successful online alliance to be established and utilised for therapeutic benefit, counsellors should be aware of specific nuances related to working online 'including the rationale behind each individual's choice to approach

services online, their own computer-mediated communication skills, technical hurdles, and the perceived 'power' of the counsellor'. (p.35)

As both the counsellors involved in this study were trained to work online therapeutically, these nuances were considered. This may have contributed to the positive results in online counselling effectiveness, as measured by the CORE-10 and GBO outcomes. Again, caution is warranted due to the small *n* in this research, however these tentative positive comparative outcomes could be motivating to school-based counsellors considering incorporating online methods in their work.

My primary goal in this research was not to focus on a demonstration of comparative outcomes of the different mediums used, rather it was to establish that an online school-based counselling service *was* possible, that pupils who were counselled online might lessen their levels of distress, and that it may attract pupils who may not seek help otherwise.

8.2.3 What did pupils think about school-based online counselling as an adjunct to f2f counselling?

Quantitative results presented in this study reported a much lower uptake of online counselling (n=16) compared to f2f counselling (n=52). This may have been due to the *newness* of online counselling, as mentioned above, but also for reasons suggested by participants and are grouped under the themes of convenience, connection and confidentiality.

Convenience

Both f2f and online school-based counselling were perceived to be convenient by pupils who took part in both the survey and the post counselling interviews. The school-based f2f counselling service was perceived as easily accessible in a timely manner (pupils are generally seen within one week of referral) for those that had the confidence to access it, as in other research (Hill et al, 2011; Cooper, 2013). The majority of participants mentioned the convenience of not having to worry about being seen by peers as a major advantage of having a school-based online service, again supported by other similar research (Davison, 2008; Glasheen et al., 2016).

As in both adult online counselling (Mallen et al., 2005; Chester & Glass, 2006) and similar studies with young people (King et al, 2006), participants in this study felt that school-based online counselling was particularly convenient and accessible in a timely manner as it could happen after school, or in school holidays. This was helpful given the pressure on pupils' heavy academic, co-curricular and extra-curricular workloads, with support from known school-based professionals only a click away in terms of convenience.

Although the online service was operating within fixed time boundaries, it was particularly utilised when pupils were unable to come into school due to illness, or when absences were enforced e.g. exclusion. This aspect of convenience was also true for one of the school counsellors who suffered a back injury during the school term and was unable to travel into school. She was still able to work with her f2f clients online if they wished, as she had been trained to work therapeutically online and the work was properly contracted.

F2f counselling was seen as particularly convenient by pupils in terms of the amount of therapeutic work that could be covered in the time allocated, without the complications of technology - such as having to convert thoughts into text, technical breakdowns, or time wasted in 'surfing' other areas of the internet. Participants who had f2f counselling alone perceived barriers to working online, such as lack of non-verbal cues or being constrained by a generally accepted school *netiquette* when conversing with school staff. Yet, most of these challenges and barriers can be overcome with considered preparations around technology (Anthony & Nagel, 2010; Anthony et al., 2010) and by giving information in advance regarding how to use technology for maximum therapeutic benefit. These are now an important part of the online counselling training programme developed as a product of this research and have been considered in the further development of this schools-based online counselling facility.

Some of the f2f participants in this study, along with pupils who had used the online counselling facility, suggested that in working f2f some clients feel 'put on the spot' (F, Y10, F2f)) and are unable to use the time most productively i.e. 'it can be really hard to say out loud, you can be really nervous and you just go round in circles' (M,

Y12, F2f). However they felt that online counselling could be less exposed and confrontational, enabling disclosure of what a client really wanted to talk about at a faster rate, 'whereas online, you can have as much time to think and phrase what you want to explain, which also might be easier [for the counsellor] to understand' (F, Y10, F2f), a finding that has been supported by other research (Rochlen et al, 2004).

The convenience of having the choice to blend f2f school-based counselling with an online adjunct using the same therapist was another benefit mentioned by many of the participants. One interview participant who had worked in this way made the point that she had paced the counselling relationship from 'less real' to 'real' in a way that made it more manageable for her. This finding could be of interest to school-based counsellors who are looking to encourage those with psychological barriers to f2f. It may be that online counselling is a way to begin a therapeutic relationship in school for some pupils, which may not happen otherwise. Most external organisations could not offer this easily and is therefore a strong argument for school-based f2f counsellors.

Connection

Qualitative data gathered in the interviews suggests that some young people (who had opted for f2f counselling only) believed that the online relationship would not be good enough to be effective. This may be due to pupils' lack of experience or information about online counselling, but in support of this, Anthony (2000; 2014) suggests that believing that online relationships are the same as f2f is indeed misguided.

Yet online relationships can be developed rapidly and used successfully in therapeutic processes with adolescents (Hanley, 2009; Chardon et al., 2011; Dowling & Rickwood, 2014). Although young people are using technology in relationships much more than older generations, they seem to have pre-conceived ideas about online therapy. From the results of this study they seem unaware that rapport and relationship building online can be helped by the effects of a sense of anonymity i.e. the disinhibition effect (Suler, 2005), which can be utilised for therapeutic benefit. Conversely, young people seem cognisant of the negative effects of the online

disinhibition effect such as cyber-bullying, trolling - i.e. posting inflammatory comments with negative intent, and catfishing - i.e. luring someone into a relationship using a fictional persona (Savory & Sharma, 2015). All of these may add to fears and negativity surrounding online relationships. Compounding this, information from schools about online relationships tend to highlight the dangers, and do not place any focus on the potential benefits as far as I am aware

Several participants in this study expressed the feeling that digital life is *their* domain, where they have a sense of familiarity, autonomy, and power. This correlates with the fact that young people are increasingly using online methods for communicating with each other in their daily lives, in new and sophisticated ways that are perhaps not yet fully researched or understood. Green (2003) suggests that the older generation can misinterpret what appears to be young people's lack of connection to others or their environment, for example seen sitting next to each other yet communicating via text instead of talking to one other.

This phenomenon has been described in Sherry Turkle's popular book 'Alone together' (Turkle, 2012) in a negative sense, i.e. 'our networked life allows us to hide from each other, even as we are tethered to each other' (p.1). Yet it has also been suggested (Helton, 2003) that research may not have kept pace with the ways that young people are using technology to communicate, with little research in this area from the perspective of the young people themselves. One such study (Gibson & Cartwright, 2014) suggests that online counselling via text can provide a greater opportunity than f2f counselling for an adolescent to protect their autonomy and have more control over the therapeutic process.

It has been suggested that increasing the participation of young people in the design, development and/or monitoring of school-based f2f counselling (Cooper, 2013. P.19) could ensure that these services are consistent with the rapidly changing priorities, needs and concerns of young people today. The same is true for online therapeutic services and research is beginning to emerge that demonstrates responses to this, such as the Lundmark & Evaldsson (2017) study, that incorporated design features such as 'click guides' and 'panic buttons' to better enable agency and empowerment of young people in an online therapeutic development.

Confidentiality

Confidentiality is one of the most important aspects for both client and counsellor in any therapeutic relationship, yet remains a concern in f2f school-based counselling (Cooper, 2004 & 2013; Chan & Quinn, 2012), as indicated in previous research. This is highlighted in this study for both f2f and online school-based counselling. A main concern from pupils regarding counselling in schools is that others (peers, parents, school staff) could find out that they are having counselling, and/or find out what has been said or discussed. The results from this study indicate that this is true for both the online and f2f school-based mediums.

Online school-based counselling could give pupils access to the known quantity of a school-based f2f counsellor in a way that avoids them being seen by others as using the service. Yet several participants in this study felt that although online counselling offers this facility, they had stronger fears about the limits of confidentiality of the online school-based counselling environment than the f2f environment. They believed that others (both internal and external to the school environment) could potentially have access to their private and personal communication.

Concerns were both about the technology itself i.e. 'someone could be listening in China', 'you don't know if it [the technology] is going to record anything or put a file on your computer' or, as in f2f counselling, concerns over the extent of the confidentiality with regards to other staff 'I think because school email especially, if whatever happened got out' and 'It's hard to understand how it *can be* separate [the online counselling service] from the school online platform, because surely teachers can have access?*'*

These concerns were partially eased in both the f2f and online counselling mediums by the trust, developed over years, expressed in the known quantity of the school-based counselling team. However, it is clear that for school-based online counselling to be able to reach more young people, further work is needed with regards to explaining how confidentiality would be protected online in a way that they can easily understand and trust.

8.2.4 Did the provision of online school-based counselling attract those pupils who may have psychological barriers to f2f school counselling?

Although school-based counselling can give equal opportunity for all pupils to access counselling in school, not all pupils feel able to do so (Davison et al., 2008; Glasheen et al., 2016). There are concerns that young people from black and ethnic minorities, pupils with disabilities or special educational needs are under-represented (Cooper, 2013), and it has been suggested that offering online services may be helpful to these pupils (Hill et al, 2011).

One of the reasons suggested by participants in this study as to why young people have used an online school-based counselling service rather than a f2f service was the perceived stigma and/or fear associated with being seen by peers. Although these results cannot make any substantive claims, the fact that some pupils have utilised the online service only (and continue to do so), suggest that it may be reaching those who would not have sought help otherwise. Although the higher mean pre-counselling CORE-10 scores for those who refer for online counselling is not statistically significant, it may also be that online counselling is reaching those that have left it longer to seek help and have higher levels of psychological distress as a result i.e. the negation-effect (Rickwood et al., 2005). This finding has been reported in other similar research (Glasheen et al., 2016; Moulding, 2007). If these findings can be supported by more research and development in this area (particularly with larger samples) this may provide a persuasive case to support the development of school-based online counselling. Although the number of adolescent suicides is small (Appleby et al., 2016), help and support that is easily accessible to adolescents in a timely manner is crucial.

8.3 Summary of the discussion of the Practice Evaluation Project

The PEP was an internet survey exploring UK secondary school therapists' online communication with their clients and future intentions as of 2014, with acknowledgement that this remains a rapidly changing landscape. 3753 schools were targeted, of which 246 responded, a response rate of between 8% and 11%, based upon the estimate that between 61-80% UK schools have counsellors (Cooper, 2013).

Reaction ranged from distinct enthusiasm, with 40% of respondents asking to be informed about future research to a distinct lack of enthusiasm, with 16% of

respondents choosing 'nothing' when asked what would motivate them to work therapeutically online. Regarding potential deterrents to school-based online counselling development there were two principal areas: 'Impact upon the therapeutic relationship' (61%) and 'Issues around confidentiality' (44%). Other areas of concern included 'Impact of the absence of body language' (37%), 'Potential for miscommunication' (29%), 'Risk of client needing urgent help' (28%), 'Lack of training' (20%) and 'Lack of boundaries' (19%). Only 7% of participants reported a lack of their own technical skill as a barrier. These results suggest that technology itself may not be the main barrier for this group, but more a discomfort in using technology for therapy, due to a fear of lack of boundaries, and questions over accountability and potential litigation.

A small number of respondents (10) indicated a lack of resources (both financial and time) to develop support for students in any other way than f2f, but were likely to be interested and enthusiastic if resources were available. This point will be discussed further in section 8.4, particularly in relation to key decision makers in schools for distribution of resources i.e. Head Teachers, Principals and Senior Management Team.

'Evidence of reaching pupils that had psychological barriers to f2f counselling' (76%) and 'Evidence of demand from pupils' (69%) were the two prime motivators for respondents, followed by availability of specific training (30%) evidence of effectiveness (29%) and practice-based research in this area (24%). Together with the original requests from pupils (Hennigan, 2011) in the group of schools where the FP was carried out, these quantitative findings were significant in motivating engagement in the practice-based research of the FP.

The qualitative results suggested that UK school counsellors had specific needs before they might consider developing online school-based therapeutic services. These were grouped into three main categories:

1. School-specific needs (evidence of pupil demand, applicable school models/ practice-based research, applicability to SEN needs)

2. Practical needs (specific training, practical advice about cost and equipment, practical management such as data security)

3. Information about online therapy in general (efficacy, confidentiality, ethics, impact on the therapeutic relationship)

These findings are in accordance with other research in this area (Campbell & Shochet, 2013; Glasheen & Campbell, 2013; Glasheen et al, 2017) which suggests that in Australian schools, unmet skills and informational needs are also significant factors impacting development of school-based online counselling.

Yet, while professional organisations have provided best practice guidance in this area (Anthony & Goss, 2009; Anthony & Jamieson, 2005; Goss, Anthony, Jamieson & Palmer, 2001; Hill & Roth, 2014), and despite specialist training for online counselling being available for some time, it appears that this is not sufficient to prompt development.

However, school counsellors are generally not those with the power to make decisions about resource allocation in schools. Senior Managers or Head Teachers normally make these decisions. Although this research did not investigate this area, recent research (Glasheen et al., 2017) has suggested that the thoughts of school leaders about this development were similar to those expressed by school counsellors i.e. many of them would consider online counselling if they were better informed about how it might be managed safely, ethically and practically and how it might benefit pupils. Sharing information, research and literature and involving this group in further research may have an impact on development in this area.

8.4 Integrating the FP and PEP

The PEP results indicated that many school-based counsellors would consider development of school-based online counselling if there was evidence that pupils wanted it, pupils would use it, and it was effective. The FP results indicate that pupils did use the school-based online service, it was as effective as the f2f provision, and some pupils used the online service only suggesting that it may be reaching pupils with potential barriers to accessing f2f school-based counselling.

Where there was significant overlap in the results of both the FP and the PEP, was in the themes of 'Convenience', 'Connection' and 'Confidentiality', which are now discussed.

8.4.1 Convenience

We are perhaps aware that technology is offering more choice and options, with both pupils and school counsellors participating in this research suggesting that online counselling could offer a more convenient way for people to access and incorporate therapeutic support into their modern day, fast-paced lives. However, this research suggests that this decision/choice is not as clear-cut as it first appears and that there may be complex underlying issues that have an impact.

The implied convenience of accessing school-based counselling online did not translate directly into large numbers of pupils taking up this option just because it was convenient. More pupils still preferred f2f counselling, a result supported by similar research (Bradford & Rickwood, 2014; Palmer, 2015). Where online counselling was particularly convenient was in having the opportunity to blend with f2f counselling, which most pupils using the online medium in this study did. In this respect, participants reported that online counselling seemed to fit more easily around them, rather than them having to fit into a counsellor's more rigid timetable due to f2f room availability.

This finding could be reassuring and motivating to school counsellors, as it would provide more security and confidence in working online. They would continue at least some f2f relationship with clients, a way of working with which they are already familiar. School counsellors who are situated in schools are in a unique position of being able to offer this blend of mediums to young people, compared to external services currently offering online counselling solutions to schools.

8.4.2 Connection

Both pupils and school-based counsellors had questions over the strength of a therapeutic relationship created and developed online. However, as mentioned previously, many of these participants (pupils and school counsellors) had not had

direct experience of such a relationship, nor were they particularly aware of information or research in this area.

Those participants with experience of online counselling did report challenges to the online relationship, such as technological interruptions and breakdowns, potential misunderstandings, and the lack of non-verbal cues, but these were not enough to end the online work. Furthermore, many of these participants suggested positive impacts on the therapeutic relationship online (supported by other research in this area) of which many school counsellors seemed to be unaware. A number of participants mentioned a levelling of the power balance in a relationship online compared to f2f, with an increased sense of autonomy and control - such as feeling more comfortable in ending a session when they felt that they had had enough, and superiority over adults with whom they were working as the medium in which they were working was felt to be 'their' domain.

This change in the power dynamic may be a surprise or challenge to school counsellors who have not had training or experience of working therapeutically online and discussion of this is included in the newly created training program (see Products). It may however be a welcome finding, as counsellors usually desire clients to become more autonomous in general in their life decisions.

Furthermore, school-based counsellors may be more motivated to work in this way if they are more aware of other ways that participants reported that the therapeutic relationship was enhanced online. This included being able to think without being 'put on the spot' and therefore being able to 'get to the point' without fear of the counsellor's judgement (or boredom) more quickly.

However, it is important to emphasise that most participants in this study did not choose to work online, strongly suggesting that online counselling is not for everyone and should not replace f2f counselling. Where it may be helpful is as an addition to a range of help-seeking options for young people. Online school-based counselling may be a step towards getting f2f help, could be seamlessly blended with f2f help, or be an accessible form to those who have psychological barriers to receiving f2f help in schools and therefore remain in distress.

8.4.3 Confidentiality

One of the most unexpected findings from this research from my perspective was the fact that many young people may be as wary of using technology for therapy as school counsellors. My assumption that young people would be as comfortable in a therapeutic relationship online as they are in other online relationships was, upon reflection, rather naïve.

One reason for participants' caution in working this way may be due to the relative newness of online counselling, a service that is still perhaps seen by both young people and adults as occurring traditionally only f2f. This may be compounded by the many TV soap operas, documentaries and films that portray aspects of counselling or therapy in their stories, displaying this as a purely f2f activity, although it is understandable that plots involving online therapy maybe a little less engaging or entertaining.

This 'newness' of online counselling may also be perceived as a threat to existing systems. Research has shown that there are some fears among educational professionals about potential threats to learning organisations (Peters & Snowden, 2008; Collins & Halverson, 2009; Prensky, 2010; Becker, 2011; Staton, 2017) posed by technology, and there could be similar fears regarding online counselling replacing f2f counselling. In response to this, Prensky argues that teachers should become more like rocket designers as 'today's kids are a lot more like rockets' (2010, p.4). They can, for example, travel at faster speeds to more faraway destinations than previous generations, 'places that those who launch them often can't see' (Prensky, 2010, p.4) nor imagine what they can do.

Technological inventions have in the past caused fear about the threat to existing systems, such as the advent of video signalling the end of radio, i.e., 'Video killed the radio star' (Buggles,1979). Yet radio has survived as it has adapted its services to meet consumer needs, and continues to thrive (Ala-Fossi et al., 2015: Starkey, 2016). A growing number of clients demand that mental health services adapt to meet their needs in a similar way (Goss & Anthony, 2003: Bell, 2007; Gainsbury & Blasyczynski,

2011; Ratcliffe, 2017). Studies such as this suggest that school-based counselling may need to adapt to meet the needs of those it serves.

However, one of the main concerns reported by participants from both the PEP and FP suggest that both clients and counsellors have strong feelings about the levels of confidentiality and privacy afforded when working therapeutically online in schools, particularly as the 'client' and the counsellor may be identifiable and/or known to each other. Although this has benefits, such as in situations that require urgent help, the negative consequence is that both parties are fearful because they are identifiable, and it is possible that their identity and conversations could be shared with others without their permission. This information has been highlighted in the new training program for school counsellors wishing to take their f2f services online, so that they are aware of some of the challenges, which I had not been expecting.

This is very different from the way that national organisations generally work, i.e. where the young person's IP address is possibly the only information held by the organisation, and the counsellor's identifying details are never known to the client. There is therefore less to lose on both sides. This may be a reason for the relatively slow development in this area of school-based counselling and is worthy of further investigation.

However, all these fears could be mitigated by sharing information in accessible ways with all stakeholders involved in schools, and particularly by involving young people in the design and development of the resources offered to help and support their mental and emotional health and wellbeing.

8.5   Strengths and limitations of the FP

8.5.1   Strengths of the FP

One of the strengths of this research is its originality, and the fact that it has raised awareness of this topic amongst pupils, school staff, parents, and professional peers both within the organisation in which it was carried out, and in external organisations. I have not been able to find any other reported research of the development and usage of a school-based online counselling resource integrated into an existing f2f provision.

Within this group of schools, the online counselling service continues to operate and is slowly becoming more established and respected, as reflected in this comment from a school Governor (Twogood, 2018), as part of a day he spent talking to groups of staff and pupils to review pupil wellbeing:

> You will be pleased to hear that the availability of counselling was cited several times during the day as a very positive aspect to support pupil and staff wellbeing and the Sixth Form prefects said they liked the fact it was available both on and offline. I suspect the online offer just needs time and encouragement to be more fully utilised.

Further awareness raising has included presentations, publications, training developments (see Chapter 9) and online/offline discussions in forums with other researchers who have published research nationally and globally in this specific field (in particular from Australia and Israel).

8.5.2 Limitations of the FP research

A major limitation of this research is the small sample size in one group of independent schools. This means that the results were not likely to produce any statistical significance and may be limited in reliability and generalisability to other types of schools. A fuller sample involving other types of schools may provide more substantive evidence, and although I attempted to engage other schools in this research at the end of the PEP (as 95 participants gave their individual email addresses asking to be involved or informed about further research in this area), none of these attempts has come to fruition. However, the mixed method approaches demonstrated in this study indicate some consistent results, suggesting that a larger study is worthy of further investigation and may enhance generalisability.

The small sample size was unavoidable as I had not been able to predict the uptake for online counselling in advance, as there were no comparable models that I could find in literature or research.

Another limitation of this research was the self-designed survey sent using convenience sampling i.e. only to those pupils that had used the school-based counselling service during the research period, which may have biased results. This

stage of the study could be more readily comparable with other surveys if I had used similar questions or sampled similar age-ranges. The survey and interview questions may have been suggestive, and not given the participants enough freedom or time to consider their own ideas adequately. This could be enhanced by re-wording the survey or interview questions, for example simply giving the name of the topic and asking the participant to discuss freely.

Finally, it was acknowledged throughout the study that my insider-researcher position could introduce bias and is therefore a limitation of this research although as previously described I took steps to mitigate this where possible. However, future research involving more than one researcher, or using organisations where the researcher is not employed as a member of staff may improve reliability.

8.6   Recommendations

- This research suggests that school-based counsellors could be motivated to consider developing online counselling in their schools if they had examples of working models that pupils were actively using, and which were achieving effective results. However, it is recommended that before any wider development of online counselling as an adjunct to f2f counselling can occur at any pace in schools, there needs to be specific training available that can provide the education and skills development for working online with young people safely, ethically and within legal requirements.

- This could be followed by more practice-based research on a wider scale to determine whether findings can be generalised to a range of different types of schools (the schools in this sample were all from the Independent Education Sector) and with a wider age-range of adolescents.
- Additional samples could include State Schools, Academies, Sixth Form Colleges and other educational establishments in a variety of different geographical and socio-economic areas. These results could be compared with the growing research base from non-educational settings. It is also important that these results are reported in an accessible way not only to all

school stakeholders, but also to all of those interested in the mental and
emotional health of young people.

- Research is also limited regarding the views of those school stakeholders
  who are responsible and accountable for resource management in schools,
  such as Head Teachers or Principals. Further development in this particular
  area could have the most significant impact on any future development of
  school-based online counselling.

- Some results in this research suggest that online-counselling may attract
  those with higher initial levels of distress, perhaps because they have left it
  longer to get help. With rising numbers of young people struggling with
  mental health issues, and particularly those with suicide ideation, a further
  exploration of the higher levels of distress by gender, presenting issues
  and/or year group could be useful, and results from such studies could be
  important in informing earlier interventions. These studies would be useful
  both in educational and non-educational environments with young people.

- Online counselling appears to be more common in Universities. Further
  research with pupils who transition from schools with online counselling
  facilities, to Further Education establishments that both offer or do not offer
  online counselling would be useful.

- Further, it could be valuable to extend this research into the arena of 'what
  works for whom" (Roth & Fonagy,2016) type of comparison process and
  outcome studies.

- Finally, although the results of this study were too small to warrant
  investigation, further investigation of the effectiveness of the different types
  of school-based online counselling available i.e. IM, Email, Audio or Video, in
  terms of what difference there might be between them in uptake or
  effectiveness, would also be useful.

8.7   Conclusion

This research provides tentative support for the development of the concept of online
school-based counselling, particularly regarding early intervention in the mental
health of young people, reaching those that may not have accessed help via
traditional f2f means. However, the evidence is based on a small sample and is not

sufficient to draw definitive conclusions. There is an urgent need for more research in this area; particularly research that directly involves young people themselves, so that more may be helped to live healthier, happier, and longer lives.

Chapter 9   Professional Products

9.1   Introduction

This chapter provides an outline of the products that have been created through the process of this overall research i.e. both the PEP and the FP. The products are listed below in date order, but will be discussed collectively in the sections that follow with full details of each given in appendices:

1. Therapeutic Innovations in Light of Technology article (November 2014)

2. BACP New Researcher Award (March 2015)

3. Blog on www.plusguidance.com website: Reaching out to pupils in need (July 2015)

4. Launch of online service for Berkhamsted Independent Schools Group in Hertfordshire (Sept 2015)

5. Presentation to Wellington School Counsellors (November 2015)

6. Live Practice-based research video conference presentation with Salford University postgraduate students (December 2015)

7. Sunday Times article (April 2016)

8. HMC Conference article (April 2016)

9. CPR Podcast (April 2016) – Linking Research with Practice

10. BACP Research Conference (May 2016) - Paper Presentation

11. Counselling and Psychotherapy Research Video abstract (May 2016)

12. BACP News Bulletin - Advert announcing publication of article in BACP's Counselling and Psychotherapy Research (CPR) Journal (July,2016)

13. Publication of journal article in BACP's Counselling and Psychotherapy Research Journal (CPR) – (September 2016)

14. Headmasters' & Headmistresses' Conference (HMC) for Heads of Sixth Form (January 2017)

15. Wellington School Counsellors' Conference (March 2017) – Out of the Shadows – the evolving role of the School Counselling Service

16. Society for Psychotherapy Research (SPR) poster (September 2017)

17. Online Therapy Institute Training (OTI) Course – **Certified Cyber Therapist – Young People** (CCT-YP) Contract with The Online Therapy Institute and outline of course (August 2017)

18. OTI CCT – YP Feedback from course participants (March 2018)

19. British Association for Counselling and Psychotherapy Research Conference poster (May 2018)

9.2   General articles and blogs

My first opportunity to present findings from the PEP to an audience outside my immediate network was an article written for Therapeutic Innovations in Light of Technology (TILT) Journal (Appendix 26). Seeing this work 'in print' boosted my confidence and raised the profile of both the work that had occurred (the PEP) and also the work that was to yet to come (the FP).

Soon after this, I was asked to write a blog for Plusguidance.com (Appendix 28) – the providers of the platform that we were using as a school for the online counselling service. This was for mutual benefit - raising awareness of my research, but also promoting the platform provider. It remains on the site and has to date (April 2018) been shared 39 times.

In April 2016 I was interviewed for short articles that appeared in a national newspaper i.e. The Sunday Times (Appendix 30) and online, promoting the annual Spring Headmasters and Headmistress (HMC) conference (Appendix 31). Although the mention of online counselling development was only a small part of these articles (as they were mainly about other products that this schools-based counselling service offers), the audiences that may have read about online school-based counselling development were potentially very large.

9.3   Professional Award

Soon after I had written the TILT article mentioned at the beginning of this chapter, I decided to enter make my first venture into academic research writing (the PEP) into a competition for a BACP New Researcher of the Year 2015 award. I was surprised and delighted when I heard that it had won (Appendix 27), not only as it was another significant confidence boost, but also as I hoped that more people would become aware of the issue and ultimately more young people might be helped.

9.4   Peer-reviewed published article

After receiving this award I worked closely with my academic advisor to turn my research report into a piece that would be acceptable to the academic research community i.e. a submission to a peer-reviewed journal. This was the first time that I had done this, and it was not an easy journey. Without the on-going support of my academic supervisor, I may well have given up. I remember a dream that I shared with him about my house flooding and trying to escape with shoes that were too small for me. Though I am not trained to analyse, I felt that this symbolised my fear of being 'too big for my boots'. However, on reflection I learnt a lot about myself during that process and recognised how each of these stages have helped me grow into potential 'doctoral shoes'.

The article was finally published in BACP's Counselling and Psychotherapy Research (CPR) Journal (Appendix 36). Again, apart from the personal and professional growth that I experienced in the process, I hoped that this exposure might ignite interest in this area from of my professional peers. The article was mentioned in an electronic BACP news bulletin (Appendix 35), which is sent to the entire BACP membership on a regular basis - again potentially highlighting this development possibility.

9.5   Video abstract and live video presentation

As part of the DPsych programme at Metanoia Institute, candidates need to attend a minimum of six professional knowledge (PK) seminars designed to be a 'live literature search' (Metanoia Institute, 2012/2013 p.99). Recognised experts deliver group seminars and DPsych candidates are encouraged to think, engage in debate, systematically review the topics presented and consider how they might contribute to the research in which they are individually engaged. In one early PK seminar, focused

on clay therapy, we were asked to manipulate clay while thinking about ourselves as researchers. Without concentrating on what my hands were doing, I created a structure (see Figure 25 below), which I then reflected on as possibly relating to a fear of 'blowing my own trumpet'. Not only is this conventionally unacceptable in UK culture, it would have resulted in criticisms (or worse) for much of my earlier life (see Chapter 1). However, I recognised that I needed to be able to talk convincingly to as many audiences as I could about what I was doing so that again, ultimately, more young people might be helped.

Figure 27   Clay therapy workshop exercise

I have now been given the opportunity to 'blow my own trumpet' several times throughout this doctoral journey and I recognise that talking about my research has become something that I very much enjoy. I was asked to take part in a live video-conference with students from Salford University (Appendix 29) where I delivered a 30-minute presentation from my home to a professor and students in Salford, and then took part in a question and answer session, which I thoroughly enjoyed.

BACP asked me to take part in a 20-minute podcast discussion (Appendix 32) with the Editor of CPR to talk about the PEP. I was asked to produce a short video abstract (Appendix 34), designed to make the research accessible to a wider audience. Both the podcast and video abstract remain on the BACP website.

9.6 Conference presentations for professional bodies - posters and papers

I have had further opportunities to present both the PEP and the FP to academic research communities. For my first time formally presenting to one of these communities, I had planned to present a Poster as I believed that this would be more manageable in terms of my confidence. However, a few weeks before the conference date I was contacted by BACP to ask if I would present the poster as a paper (Appendix 33), as they had a slot that they needed to fill. Although this was more daunting than the planned Poster presentation, having the time to present and then engage in discussion with a captive audience of UK peers interested in my research was thoroughly rewarding.

I subsequently had the opportunity to also present this paper as a Poster (Appendix 39) at a Society for Psychotherapy Research conference (SPR), where I hoped to reach a wider audience through this international research organisation.

The first academic Poster from this FP will be presented in May 2018 at the BACP Research conference.

9.7 Conference presentations for schools' organisations

Presenting to fellow school-based counsellors at Wellington School, as well as school-based teaching staff, managers and Headteachers is where I feel this research may have the most impact. As stated in the introduction (Chapter 1), the initial impetus for this development had come from school pupils, followed by requests from school-based counsellors for information about a working model together with evidence of how pupils were using it.

My primary goal in this research was therefore not to focus on a demonstration of comparative outcomes of the different mediums used, but rather to establish that an online school-based counselling service was possible, and that pupils who are counselled online might lessen their distress. Presenting my results to these communities has resulted in a great deal of interest, but as far as I am aware has not translated directly into action, as yet. As stated throughout this thesis, a principal obstacle to development could be the lack of specific training available for school-

based counsellors to transfer their therapeutic skills into the online environment. I have taken this into consideration (see section 9.9 below).

9.8   Service development

Developing the school-based online service is the product of which I am most proud. Although this service has grown very slowly, it *was* utilised by young people who were not able to use the f2f service and it continues to be used. Knowledge of the service is spreading amongst pupils, staff, school governors (Twogood, 2018) and parents. I have been informed by several senior colleagues in this group of schools that they are proud to be leading the way in this respect, as part of the overall commitment to improving pupil wellbeing.

An additional therapist has been trained to work online this year, and the Departmental Development plan for 2018-19 has proposals to continue to develop the capacity and to actively promote the online counselling service to pupils, staff, parents, and other schools.

9.9   Certified Cyber Therapist – Young People (CCT-YP)

In 2017 I contracted with Dr Kate Anthony, Chief Executive Officer of the Online Therapy Institute, to co-write and teach an online training course for qualified f2f counsellors, therapists and coaches to work therapeutically online with young people. The suggested structure is twelve weeks, but this can be tailored to suit individual needs. Trainees learn by reading (including evidence-based research in this area), watching videos, undertaking experiential exercises, completing a set of written exercises, and participating in co-learning with fellow trainees via a bespoke online group forum. Apart from the written exercises throughout the course, students are assessed via four 'live' meetings with Dr Anthony and myself, along with a 2,000-word Personal Learning Statement (or similar alternative such as a PowerPoint presentation or video).

This course is open to Counsellors (and Coaches) who are qualified to a minimum of Diploma standard work with young people and who have experience of doing so. These professionals could be education-based or work in other types of organisations, so the course has been written to accommodate this.

The learning and experience of providing online therapy with young people for over three years now and the research results collected have informed the course content, as outlined in the modules of the course set out below:

<u>Week One – Introduction to Online Therapy</u>
- History of Online Counselling and Psychotherapy
- History of E-Counselling with Young People

<u>Weeks Two and Three – Theory</u>
- Theory 1: The Concept of Presence
- Theory 2: The Online Disinhibition Effect
- Theory 3: Written Communication Skills
- Theory 4: Anonymity and Fantasy

<u>Weeks Four to Six – Ethical Considerations</u>
- Ethics 1: Introduction of Ethical and Legal Considerations
- Ethics 2: Preparing an Intake form for assessment online
- Ethics 3: Informed Consent and Privacy Policies
- Ethics 4: Maintaining a Responsible Online Presence
- Ethics 5: Legal Issues pertaining to Delivery of Online Therapy

<u>Weeks Seven to Ten – Clinical Practice</u>
- Practice 1: Introduction to Email and Chat: Using the written word to communicate via distance both asynchronously and synchronously
- Practice 2: The initial email exchanges (an example case study is included)
- Practice 2: Working with Chat and Instant Messaging (an example case study is included)
- Practice 3: Working with Audio Tools (an example Case Study is included)
- Practice 4: Working with Video (an example Case Study is included)

<u>Weeks Eleven and Twelve – Closure, Virtual Reality and Marketing</u>
- The use of technology in testing and assessment
- Virtual worlds and Virtual Reality therapy

- Blended technologies and modalities
- Client closure and Discharge online
- The Business of Online Therapy (includes Business Case Study)

As outlined above, the course includes a complete case study of a series of online counselling sessions between a student named Martha (a role played in the audio and video sessions by a young member of school teaching staff) and a school-based counsellor (myself). The role-play therapy took place via an exchange of emails to begin with, followed by an Instant Messenger. Course participants are then able listen to (and review) a counselling session with Martha via audio only and then finally a video session. Martha is portrayed as a 17-year-old pupil who has recently joined the school who is struggling with anxiety, along with family and friendship issues.

The course has been trialled with two school-based f2f counsellors who have had dissimilar exposure to online counselling, and are also trained in different counselling modalities:

1. **Counsellor A**: A qualified Person-Centred Counsellor who has had previous training in general online therapy with another training provider
2. **Counsellor B**: A qualified Psychodynamic Counsellor who has had no previous online counselling training.

Both participants have given feedback throughout their training and given permission for some of their comments to be included. These are some of their thoughts at the start of the course:

Counsellor A: I remain sceptical of online counselling – still unsure as to whether a therapeutic relationship can really be established. I have always felt confident in my f2f counselling work and was not keen to extend my experience online.

Counsellor B: As I begin this training, I am unsure if I believe that online counselling will be effective or whether there is a genuine need/desire for online therapy within my field of work (school counselling) as I believe that most people will still prefer f2f counselling.

During the course, both counsellors demonstrated clear learning and what appeared to be a significant mind-set change:

> **Counsellor A:** I was already aware of the Hennigan & Goss (2016) research, but it is interesting to re-visit now having already started to engage in online counselling. It is a good reminder that I am not alone, that the barriers that respondents referred to are all those that I would have listed, but now having engaged more with my clients online, my view of the benefits of online counselling weighed up against the barriers has changed. Though I am still concerned if a client requires urgent help I no longer have concerns about the lack of body language cues.

> **Counsellor B:** During this training I came to realise that as a psychodynamic trained counsellor, the medium of technology actually could provide the same strength of boundary as f2f counselling and I experienced this sooner than I expected. I sustained a back injury and was unable to meet a client f2f, however we were able to meet online at the same time and place as usual, thus keeping important boundaries strong in difficult circumstances. I ensured that prior to my appointment, I was in an area of my house that did not present any images of my personal life, again maintaining another psychodynamic boundary. I was amazed at the ease with which my client and I connected, and I felt very present throughout and seemed to forget that we were not in the same room at the same time.

Final comments from the course participants have been very positive:

> **Counsellor A:** I have particularly appreciated the fact that this course is specialised for working with young people and perhaps one of the reasons that I have found the reading so useful and particularly enjoyed the case studies. I have also enjoyed completing my assignments, focusing on my thought of each module rather than slightly feeling that you are just regurgitating what you have just read. In the last course, I had weekly meetings via IM with my course leader and though I started out feeling they were valuable, by the end I felt that they were a bit of a waste of time and I prefer having the opportunity to work through the modules at my own pace, concentrating on what each part brings up for me, whilst knowing I will receive tutor feedback.

> **Counsellor B:** I have really enjoyed this training and would really like to develop my skills in online therapy through practice, especially working with people online without visual aids, through more live-chats and emails.

The CCT-YP course is due to be officially launched in July 2018 (Appendix 40), however a soft-launch took place in March 2018 when Dr Anthony sent an email (Appendix 41) to an opted-in mailing list of over 1300 people interested in online

therapy. There is now a waiting list for the July start, and there has also been interest from a counselling agency in the west of the UK which has been commissioned to provide online counselling for over 400 young people.

9.10   Future potential products

- I aim to continue to present in person (f2f and online) and on paper, with regards to all aspects of this research to a range of groups and organisations – pupils, parents and staff in my group of schools and other schools, school organisations, counsellors and therapists in the UK and elsewhere (I have connected with counselling researchers in Australia and Israel), academic researchers and the general population of the UK.

- Two of my DPsych peers (who are also counsellors working with young people) are involved in research topics with young people and we have had initial discussions about collaborating on further research together, with the intention of producing a guide for senior school staff on how to use a school-based counselling service (in proactive ways as well as the traditional reactive manner).

- As the online school-based service in this group of schools continues, the same usage data is collected (where there is client consent) for both the f2f and online conditions that could be added to the study data set. Investigating a larger data set might be particularly interesting regarding any differences within the online counselling condition (i.e. any differences between clients who use email, IM, audio, or video) which were unable to be investigated in this research as the sample was too small.

- CCT-YP course can be further tailored in response to bespoke requests. For example, there are currently (April 2018) discussions taking place with an organisation that wish to have access to all course materials for a group of counsellors working with young people. Instead of tutor feedback throughout the course they have asked for two day-long workshops from the course leaders

- This research began with my own scepticism with regard to online counselling with young people, but over the years of the study I have come to a place of

active enthusiasm for this additional way to reach young people. I would be interested to understand what this journey may be like for others, in particular therapists from different therapeutic modalities. If the CCT-YP has sufficient uptake, this research may not have too long a wait.

9.11   In summary

Taking time to listen and respond to pupils' requests for help in a way that may be unknown to me but could work for them has been an incredible journey. Although I have learnt much, in many ways I feel as though I am also back where I started. The quote at the beginning of Chapter 1, 'we shall not cease from exploration and the end of all our exploring will be to arrive where we started and know the place for the first time' (Eliot, 1944) is also apt for the end of this report.

The schools-based counselling service usage continues to grow and the therapists on the team continue to do what they are qualified to do, albeit in a new way. If we listen to young people carefully, they will guide us in how to help us better help them. We may just need to gather courage along the way to do so.

73,360 words

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