If you ask me if every school could do with a counsellor, then my answer is an emphatic Yes.

Gill Whitfield talks to Anne Wise

‘Even though I don’t want thanks, it’s nice to get it.’

Could you provide a little bit of background to your work as a school counsellor?

I started off life in school as a science teacher. After 23 years of doing this I had the opportunity to do a one-year full-time postgraduate diploma in counselling at Edgehill College, Lancashire. I came to my present school in 1997.

Devon has had counsellors since the early 1960s, encouraged by the late Josh Owen, who was Director of Education at that time. Money was available and a number of schools took the opportunity to appoint a counsellor.

At the time I came we had a good support network, facilitated by the Senior Clinical Psychologist from the local hospital. These sessions were paid for by the LEA. Supervision is considered to be critical.

My job in Exeter was quite an unusual post, as I spent about half my time working in four feeder middle schools and the other half in the secondary school — an age range of 5-16. I was amazed at the number of children with problems that the teachers or school nurses had been struggling with, often really out of their depth.

That was some time ago?

Yes, and it lasted until LMS came in. There was less money available: my secondary school was given the equivalent of 0.22 of me instead of 1.0.

At that point the head wrote to the four feeder schools to ask if they would like to contribute so as to keep receiving my services, but they also had less money, and only one of them felt able to keep me on, which amounted to half a day a week for a further two or three years.

The support network disappeared as well, but I managed to put up a sufficiently good case for some INSET money to enable me to find a supervisor, whom I met initially on a monthly basis, although the budget has now cut these meetings down to about one a term. Of course I have plenty of support at the end of the phone, so I’m not as isolated as it may sound, but it is nice to have somebody who you know is skilled at supervision.

The cut-back left me without full-time work, but as it happened a science teacher left the secondary school, and as this is what I had originally been trained for I became a part-time teacher and a part-time counsellor in the secondary school and counsellor in a combined school. I don’t feel that being a teacher and a counsellor is a satisfactory situation; my teaching workload has increased, which doesn’t help the counselling, and I don’t think being a counsellor helps the teaching.

Could you say something about the problem of having to wear two hats?

I think, in fact, I find this more of a problem than the children do. I have a younger I’m always having to tell off when I teach her — she’s quite bright and her work is all right, but she’s very

Young People in 1998 and looking back as far as 1983

The lifestyles and behaviours of 18,221 young people aged 12-13 and 14-15 in 1998, and a ‘look back’ at about 200,000 in the same age ranges that have been surveyed over the past 16 years.

As usual, the book is exceptionally well laid out and “reader friendly”...a vital resource, painstakingly created and highly useful for planning at school, local, regional or national level. — Health Education.

£35 post free from the Unit
I do feel that counselling lower down the age group is particularly valuable.

I always tell children that have been referred by other people that they don’t need to see me if they don’t want to.

silly, and starts squealing for no reason, which annoys everybody. But when she comes to see me as counsellor she’s a totally different child — her problem is that her father lives abroad — and although she can’t look at me as a teacher, as a counsellor I’m all right, and I think it counts as a sort of success both for her and for me.

There are children who ask: “Who can I use as a counsellor, because you teach me?” I have to reply that there isn’t another counsellor in the school, so they could go to a teacher; they get on with, or just give me a try and see how it works. Certainly I do counsel a lot of the children I teach, although I only teach Years 8 and 9; as I mentioned earlier, I think I find it a bigger problem than the children do, but certainly the ideal situation would not involve having to be two different people.

If you had a choice, what would you do?
The ideal would be for me to go back to full-time counselling, preferably partly in the middle schools and partly in the secondary school. Many of the children that moved up to the comprehensive functioned better as a result of the counselling they had already received — I’ve got testimony to this effect from teachers, and particularly from parents, so I do feel that counselling lower down the age group is particularly valuable.

We’ve talked about the job and the constraints. Could you now say something about the counselling process itself?
Well, there has to be some sort of referral to start with. The most unusual referral I ever had was from the leader of a troupe of drum majorettes, who realised that one of her girls came from my secondary school; she suspected that the girl was being abused, and it turned out that she was right, so I was able to alert the appropriate agencies.

However, referrals usually come from teachers, other children, or parents; social services also refer children to me, as well as the police, school nurses, and the school doctor. But the best referrals of all are from the children themselves.

The self-referred children always seem to come to my room and sit down and start off by saying “It’s silly, really”. My reaction to that is always “If you think it is worth seeing me about, it is not silly”. If something is bothering them, then they have done the right thing. On the other hand, teachers, when they refer children, are usually concerned that something has ‘changed’ — they may have become more noisy (or less noisy), or they’re not doing homework, or if the teacher knows the child well they could just sense something is wrong.

I always tell the children who has referred them, unless it’s their parents and they have particularly asked me not to. I also tell children that have been referred by other people that they don’t need to see me if they don’t want to. I’ve only had two refusals. One was a girl who said “mind your own business”, and she went on to get herself into deep, deep trouble, and I often regret that I gave her an option, but then counselling has to be a voluntary activity.

Currently I’m dealing with a boy who is experiencing difficulties because he comes from a different culture. I find this absolutely fascinating, and if I had the time I would like to study cross-cultural counselling. The boy I’m seeing at the moment keeps on saying how much I’ve helped him, and even though I don’t want thanks it’s nice to get it. Then I also see other very sad children, who are just victims. Whatever they do, they’re going to get bullied.

Is all your work done on a one-to-one basis?
Oh no. I do quite a lot of group work, both with bullies and victims, and with very shy children, even with children that swear — you name it. I can run a group for it! I usually take these groups, of 4-6 children, for one lesson a week for about four weeks. They have to miss a subject lesson, but it’s a different one each week.

I never mix the sexes, because I find it just doesn’t work in this particular school, though it might elsewhere. Currently the big thing is ‘anger management’.
How does your role as an 'official' counsellor fit in with the 'friendly adult' support provided by teachers?

There are some teachers who quite often have children going to them, but as soon as they feel out of their depth they pass them straight on to me. Things like pregnancy, drugs, or home breakup, come into this category, and I always feel how glad the children are to have someone who can offer the right sort of support.

To say that 'I do' things would be wrong, but if I can contact parents or talk to staff on behalf of children, I do. My supervisor always says she loves the way I 'nurture' the children by lending them books, records or cassettes. I haven't lent anybody a CD yet — or I'll get them addresses, and so on, because this kind of thing makes the relationship between myself and the young person that much better, and the relationship between the two people involved in counselling is very, very important.

Gil Whitfield may be contacted through the Unit.

How would you sum up your value to the school and its population?

My principal aim is to put children at their ease and encourage them to talk to me, and they often say something like 'I'm pleased that I've been able to talk to you — I feel better just for talking.' That's when I haven't done anything constructive, except be there for them — the unconditional positive regard. A couple of the children I see are extremely smelly, but I don't open the window while they're there, although I certainly do as soon as they've gone.

I love counselling. You might ask how I can experience 'job satisfaction' when I get nothing but problems, but when I get a parent ringing up and say 'I don't know what you've done with our Mary, but she's certainly a much happier person,' then I go home at night feeling I'm doing a worthwhile job. If you ask me if every school could do with a counsellor, then my answer is an emphatic Yes.

As surveys need to explain in young people that emotional problems are common, and that many others have experienced similar feelings.

Dr David Regis is the Schools Health Education Unit's Research Manager.

What do young people worry about?

It is normal to worry. Stress is a part of everyday life, and at the right level it is enabling rather than disabling. Perhaps we need a more precise vocabulary to distinguish between the two, such as concern (healthy) and preoccupation (unhealthy).

Here at SHEU we know a great deal about the 'mental' health of young people, because our survey work studies nationwide samples of the school population with all their aspirations, joys and anxieties.

We have compiled the 'rating' of worry about different things, and conclude, for example, that personal appearance is a source of worry for the largest number of young people. We have also divided the young people into those who worry a lot and those who worry less, so that the effect of these different levels of worry on other aspects of their life can be studied.

In 1998 we published a report entitled No Worries? in which we described these two things in considerable detail. This article incorporates survey data up to and including 1999.

How should we measure 'mental health'?

One concern that prompted us to do so was the high level of public attention given to the relatively few young people in real crisis (the Government's criteria for measuring the nation's 'mental health' is still the suicide rate), whereas we felt that the less disastrous but still disabling worries that from time to time affect most people, young and adult, were in practice a more fruitful area for study and action. This article is based on some sections of the No Worries? report, which is still available from the Unit.

Summarising the 'clinical situation' between the age of five and puberty, mental health problems are divided largely into conduct disorders and emotional disorders specific to childhood. Boys with conduct disorders outnumber girls by two to one.

Depression is found in about 10% of 11-16 year old girls. Disorders of mood (anxiety and depression) are found in 15-20% of 15-19 year old girls.

It isn’t a fault to need help

However, very serious problems are relatively rare. Most young people cope well enough with their lives, often with an abundance of energy and optimism. It sometimes seems that we know more about the small minority that exhibit acute mental symptoms than we do about the vast majority, who just have the occasional problem!

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