Improving the wellbeing and mental health of young people through the delivery of online mentoring and counselling services

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This paper will discuss the online model of counselling and therapeutic support by the national charity, We’re Altogether Better. Through the use of proprietary technology known as ‘Cosmo’, We’re Altogether Better demonstrates how they have begun to change the way in which young people access Tier 1 and Tier 2 support, whilst maintaining traditional needs of a counselling relationship, including the effective safeguarding of vulnerable children and young people. Expanding the use of this sustainable, evaluated and highly cost-effective model of service provision sees the introduction of ‘MindFull’: providing early intervention to those in need of wellbeing and mental health support services.

1. INTRODUCTION

We’re Altogether Better is a social action organisation that uses the proprietary technology ‘Cosmo’ to scale up and develop independently proven (Banerjee et al., 2010, Thompson et al., 2011 and Centre for Excellence and Outcomes, 2012) digital support services and volunteering programmes to increase social action and improve the reach and scale of support to the most vulnerable. We are able to develop accessible and sustainable support services that not only push the boundaries of our model, but of technology itself, by designing tools that are bespoke to our needs and those of our young stakeholders.

We’re Altogether Better is the over arching charity to the programmes, BeatBullying, Cybermentors, Thefutureyou and Minimentors. These programmes use the Cosmo framework to address social issues facing young people, ranging from; bullying, employment and relationships through its peer mentoring and counselling support model.

The Cosmo framework, which has been built in-house by the We’re Altogether Better digital team, offers a new medium of social intervention that is suitable for the digital age. Counselling and therapeutic intervention has so far been implemented by this Cosmo framework, across the platforms of Cybermentors.org.uk, thefutureyou.org.uk and minimentors.org.uk to support a national peer to peer support model. The framework leverages functions such as instant messaging, private messaging, group web-chat (for general purposes, training and supervisions), group dashboards, live referral systems. By employing both human and e-moderation, all conversations take place in a safe environment, which are fully monitored.

We’re Altogether Better is already running a team of multi-disciplinary professionals to provide Tier 1 and Tier 2 interventions to Organisations and young people. A tier 1 intervention is a preventative measure and can involve campaigning, influencing national policy or delivering training to professionals and young people on social issues. Tier 2 interventions involve online counselling across the three platforms to those young people experiencing emotional distress or psychological crisis. In just three years, the online services of We’re Altogether Better have already provided expert intervention and contracted counselling to around 9,000 children and young people, with 95 per cent of them reporting positive results.

Using this proven and highly evaluated model (Banerjee et al., 2010, Thompson et al., 2011 and Centre for Excellence and Outcomes, 2012), the
discrete focus of the platform is on both extending and developing further these intensive therapeutic interventions by qualified professionals. This is the basis for the development of MindFull: a service dedicated to helping children and young people overcome the mental health and wellbeing difficulties they encounter.

2. WELLBEING AND MENTAL HEALTH

Mental health – the physical, mental and emotional state – is widely recognised in both academic and practice terms as a significant issue we should be doing more about (HM Government, 2011 and World Health Organisation, 2010). Definitions often identify the promotion of wellbeing “as a key criterion”. Wellbeing can be defined as the overall, long-term quality of a person’s life and the fundamental state of his or her feelings over time, as distinct from happiness, which can fluctuate greatly in the short term and is significantly influenced by events (Parry-Langdon, 2008).

In the UK, mental health problems such as depression and self-harm affect one-in-10 children and young people aged five to sixteen (Green et al., 2005), impacting on their physical health, happiness, learning, development, and future prospects. Half of those with mental health problems first experience symptoms by the age of 14, three-quarters before their mid-20s, (Department of Health, 2012) and despite knowing that early psychological treatment can significantly reduce hospital admissions, GP visits and drug prescriptions there is a lack of appropriate services (Mental Health Foundation, 2007).

Furthermore, only one-quarter get access to the support they need due to the stigma of accessing support, extensive waiting lists and lack of youth-centric services. A majority of GPs believe that counselling and psychotherapy are the most effective strategies for treating depression: more than three-quarters (78 per cent) of GPs prescribed anti-depressants between 2004-2007, because the alternative was not available or that waiting lists for psychological therapies are, on average, six to nine months, and can be as long as two years, (Mental Health Foundation, 2007).

Enabling young people to understand and articulate concerns about their wellbeing or mental health, enables them to access appropriate early intervention support to prevent the escalation to more serious mental illness (Mental Health Foundation, 2007). By improving access to Tier 2 support services for wellbeing and mental health issues, we can not only make economical savings, but improve the outcomes and life chances of children and young people. A culture in which young people are both confident and able to access support at the earliest opportunity should be a reality, not a vision.

3. DELIVERING ONLINE COUNSELLING

We already know from our experience, delivering counselling online through our current platforms differs to the traditional approaches commonly associated with face-to-face counselling environments. The heart of our service beats a person-centred and holistic pulse which empowers young people to make informed decisions. Choices of who, when and how therapeutic interventions are delivered are made by the young person. Young people have never before been free to take ownership of their mental health and wellbeing. Authoritative figures have previously made those important decisions with little or no input from the service user.

Seeking professional therapeutic support online enables young people to adopt a liberal attitude towards their mental health and wellbeing and the anonymity removes many of the stigmas usually attached. We’re Altogether Better currently have 30 online counsellors supporting young people every day between 8am and 2am, 365-days-a-year. The counsellors offer a range of long- and short-term interventions via synchronous and asynchronous messaging across the 3 specialist network platforms. Site members that are in counselling can be within our support system from between six weeks to six months. Online counselling is facilitated by a team of multi-disciplinary professionals by transferring their clinical expertise of face-to-face work online and use many of the techniques and approaches used in physical environment.

We have a continuous recruitment process designed to attract specialist knowledge and expertise from numerous therapeutic schools of thought, including humanistic, psychodynamic, cognitive, and the medical model. Counsellors undergo intense training to navigate the necessary platforms and transfer their clinical practice in an online capacity. Critically, the cost of delivering counselling online is significantly cheaper than traditional offline modes of delivery: at Year 5 of the service, 15 hours of counselling on the National Health Service will cost at least £1125 or £75 per hour, resulting in the services delivered by We’re Altogether Better 74 per cent cheaper.

4. EVALUATION

The service provision of We’re Altogether Better is underpinned by sound academic theory and independently proven and evaluated practice of an
extensive nature. Academic organisations and institutions such as the University of Sussex, Goldsmiths, University of London, Department for Education (DfE), New Philanthropy Capital (NPC), Deloitte and the Centre for Excellence and Outcomes (C4EO) have also evaluated the programmes with highly successful results (Banerjee et al., 2010, Thompson et al., 2011 and Centre for Excellence and Outcomes, 2012).

Our technology universally monitors (e.g. through the use of social networking, usage and usability and content, thematic and case study analysis), the connections between users, how they communicate and their demographics. This information is crucial to understand the cause/effect and respond to the need of our most vulnerable service user. The therapeutic process is evaluated holistically by a model that focuses on the journey of a service user from start to finish.

We're Altogether Better conducts internal research on the effectiveness of online counselling, as well as working with leads in the industry to develop evaluation outcomes, best practice guidelines and therapeutic approaches. In three years of providing online counselling to children and young people, over 9,000 young people have contracted into a counselling relationship. Our evaluation model of intervention asks clients to complete a baseline evaluation when they begin a counselling contract as well as an exit survey when ending. With this information we are able to analyse changes in wellbeing and identify trending issues and behaviours. Clients will specify why they needed help, how they felt before, how they feel after, what they gained and perhaps what they didn’t find useful.

Our most recent results shows 97 per cent of those engaging in contracted counselling reported increased wellbeing and issues resolved and over 80 per cent of service users in contracted counselling attended their sessions. Furthermore, 85 per cent said they felt much better after having counselling online, 34 per cent needed help because they felt low or depressed. The top three trending issues between June 2012 and August 2012 have been feeling low, bullying and family problems. This information allows us to continuously tailor the therapeutic service, shape Clinical Practice and facilitate a better allocation of resources.

5. SAFEGUARDING AND CHILD PROTECTION

We’re Altogether Better is highly experienced in online safeguarding, child protection, data protection, privacy and ethics, and considers the safeguarding of all service users an absolute priority. A robust child protection and safeguarding policy underpins the model, which is unique within the UK sector. All conversations are monitored and filtered (including input, static, or user-generated content, such as blogs) providing swift intervention when necessary. With a dedicated safeguarding team on call 24-hours-a-day, a detailed and robust referral route is in place for any identified child protection concerns, through Local Safeguarding Children’s Boards (LSCBs), the Child Exploitation and Online Protection Centre (CEOP), social services and the emergency services.

Current evaluation of Safeguarding measures undertaken by We’re Altogether Better, show that the majority of Safeguarding cases result in a referral to offline services with the most common disclosures being around suicidal thought, abuse and attempted suicide. Disclosures have most commonly been made between 10.00pm and 2.00am and less than a third have any existing support in place. It is important to note that the organisation is increasingly skilled, too, at dealing with safeguarding incidents overseas, which is challenging without a geographical presence in the territory concerned – it has, for example, successfully dealt with high-level child protection incidents in both Australia and Europe.

The work has challenged existing thought and practice around privacy, consent and data protection: our model has undergone stringent scrutiny by the Information Commissioner’s Office in the UK – an independent authority set up to uphold information rights and data privacy for individuals – pushing the boundaries of their own best practice.

6. CHALLENGES

Some argue the more dependent we are on digital technology, the more isolated we become. The more time spent online, the less we spend with family and friends, leading to the loss of common skills required to interact and communicate in physical environments putting us at greater risk of becoming emotionally dysfunctional (Nie, 2000). This is the type of argument that stands in the way of receiving the full support, recognition and buy-in of the wider counselling and psychotherapy industry.

The British Association of Counselling and Psychotherapy (BACP), have recently taken steps to recognise online counselling by accepting hours practiced online to count toward professional accreditation. And with the emergence of organisations like The Online Therapy Institute and The International Society for Mental Health Online (ISMHO), there are signs online counselling and
psychotherapy will become a mainstream psychological intervention.

With the younger generation experiencing a life with computers and networking. Digital technology is here to stay. Recent stats show that 80 per cent of Americans will use the internet as the first reference point for health-related issues (Fox, 2011). It is inevitable that future generations will not only use the internet as a signposting tool, but as a means to receive treatment. Embracing technology is imperative to compliment the vast amounts of counselling research we already know, respond to the ever-changing needs of those seeking psychological assistance and deliver high quality effective interventions. Sophisticated technology needs to be developed if we are to achieve this without sacrificing the level of quality practiced by professionals and experienced by clients within the face-to-face setting.

7. MINDFULL AND THE FUTURE

We’re Altogether Better has recently secured £1.8m investment funding, with £1.3m coming from the Cabinet Office. This income stream and those imminent from social tech investors are enabling us to extend our model into other areas: most notably, to build a safe, evaluated platform, to address the more complex psychological and wellbeing issues experienced by young people – working title MindFull. MindFull is currently under development for children and young people aged 11-17 and will launch in 2013.

As an online therapeutic platform, MindFull aims to give young people immediate access to professional counselling and psychotherapy. By building on the synchronous and asynchronous counselling functions currently used across the We’re Altogether Better platforms, MindFull counsellors will use more sophisticated ways to work with clients. Therapeutic tools, such as art and imagery, music and sound, and therapeutic writing are in development.

Working with our young person-centred approach and a multi-disciplinary team of expert professionals, MindFull tailors the most effective, efficient intervention to suit the individual’s specific needs. As MindFull sits within the charity We’re Altogether Better, a package of additional services can also be provided to, for example, enhance education, employment and training opportunities for those experiencing mental illness.

We believe we are at the inception of a service that is radicalising how children and young people access mental health and wellbeing services and would welcome the opportunity to share our findings in more depth and learn from others working in similar fields, both in theory and in practice.

8. REFERENCES


