

CHAPTER 1

INTRODUCTION AND PROBLEM

STATEMENT

Over 250,000 clients used Youth Information, Advice and Counselling Services in 1993 (Feaviour 1994). The growth in availability of such services reflects a growing awareness in society that young people are increasingly facing complex decisions at an earlier age and against a background of the disintegration of traditional support structures such as the family, the church and the community. They need therefore to turn elsewhere for help (Goodey 1973; Clarkson 1991; Feaviour 1994). In 1961 the first service opened in Brent, by 1992 176 agencies were registered with Youth Access (the new name for the National Association of Young People's Counselling and Advisory Services).

In spite of this rapid growth nationally large areas of the country have no such service. Where such services do exist many young people do not use them. Thus many young people remain geographically and emotionally distanced from the help they need.

The Mental Health Foundation estimates that two million children and young people suffer from mental distress with young adolescents particularly vulnerable. Although most conditions are relatively mild and temporary some 250,000 16 year olds per annum require specialist help (Young People Now Sept. 1995). Since 1980 there has been a 71% increase in the numbers of young men aged between 15 to

24 taking their own lives. In 1992 582 males and 132 females in this age group committed suicide (Department of Health Figs. 1992). Samaritans research suggests 47% of all young people had serious thoughts of suicide and 11% had actually tried suicide. (Young People Now Sept. 1995).

Shropshire Youth Service is currently attempting to establish a Youth Counselling Advice and Information Service for Young People in Shropshire. Hopefully this will redress some of the difficulties of geographical inaccessibility. The question arises however of the best model for delivery of such a service in order to maximise access for young people.

In order to be effective, providers attempting to meet the needs of young people need to consult with them in designing services. As pointed out by Feaviour (1994) there has been little attempt to explore and listen to the thoughts and opinions of young people about the nature of provision offered to them. Such disregard for clients' views is not unusual in the area of social welfare provision, (Mayer and Timms 1970; Porteous and Fisher 1980). Currently however there is a trend towards acknowledging the rights of clients to influence the nature of the services they receive. Some attempts have been made in the area of Information, Advice and Counselling (Murgatroyd 1977; Porteous and Fisher 1980) and in related fields, for example Woodcock et al (1992) surveyed young people attitudes towards sexual health programmes in school. There is however relatively little research available in the field of youth counselling. In his review of the literature on the subject Feaviour (1994) concluded that even in the research that had been done there have been no real attempts to elicit the views of young people, thus an important research variable has been omitted.

In his study Feaviour explored the attitudes of clients and providers of youth counselling services in relation to four dimensions: confidentiality, informality of service provision, specificity in offering services and independence of the agency. His study provides useful information in relation to the characteristics likely to increase the attractiveness of a youth counselling agency to potential clients. He also notes a close correspondence between client and provider attitudes in these areas.

In reviewing literature from a number of youth counselling agencies it appears that there is some consensus on the nature of the services to be offered (For example the 1995 Annual Report of Centre 33 and Off the Record). Significant characteristics seem to be those as described by Feaviour. Another common feature is the combination of counselling with advice and information service often without clear definition of the difference between these services or the appropriate level of training and support required to deliver each appropriately. Thus the term “counselling” is used to describe a wide range of helping in relationships without definition. I suspect such confusion in service providers reflects and engenders confusion for potential clients.

An interesting aspect of Feaviour’s report (1994) is the large proportion of quotations from young people in the upper age range of the target population. Only one quarter are for those aged 14 - 18 years (See Figure 1).

FIGURE 1

Number of Responses Quoted for Each Age in Feaviour's Study.

Age	14	15	16	17	18	19	20	21	22	23	24	25	25+
Number of	0	5	3	9	10	11	4	7	6	6	3	10	23

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Number of	0	5	3	9	10	11	4	7	6	6	3	10	23

My own experience suggests that it is easier for young people to ask for help as they get older (16+) yet we know many in the lower age range (13 - 16) have serious difficulties.

For many young people the years between 13 and 16 represent the height of their adolescent "Identity Crises" (Erikson 1968), a stage of development marked by "storm and stress" (Coleman and Hendry 1980 p.12). Even for those who do not experience such internal turmoil this "second individuation process" (Bloss 1967) of adolescence is a time of considerable challenge and ambiguity as the individual negotiates separation from the family of origin and begins to adopt a more autonomous role. It is not surprising that young people at this stage of development would be reluctant to ask for help particularly in the light of their own uncertainty and the lack of consistency in the response of adults around them who may treat them as children sometimes and as adults at others. I would expect the study to reveal some clues about these issues and the associated perceptions of young people about asking for help in counselling.

In the light of my desire to elicit the views of young people on the nature of the service to be established to serve them in Shropshire, the experience in other similar agencies and prior research in the area I have chosen to focus this research project on the perceptions of young people about counselling. My own experience suggests that even when counselling is available young people are often reluctant to engage in the process. In explaining such reluctance there seem to be two possible foci to explore: the nature of the service being provided (including those aspects explored by Feaviour) and young people's wider perceptions of the whole process of counselling which could be regarded as inclusive of the first focus or distinct from it.

I want to focus on the perceptions of young people about counselling in the widest sense. It seems crucial in designing a service which is accessible that in addition to practical considerations about the nature of the service I also attempt to explore deeper and perhaps subconscious perceptions in relation to counselling since it is likely that it is on the basis of such perceptions that they will make their final decision about whether to take the step in asking for the help they need. An understanding of these perceptions is essential if education, publicity and outreach work is to focus accurately on changing those perceptions which block young people and enhance those perceptions which encourage their use of counselling services.

I have conducted a literature search around my focus of enquiry but decided not to include a review of the literature at this point because, as described below, I adopted a phenomenological approach and an emerging design. In order to remain as far as possible "presuppositionless" (Kvale 1983) I read the literature after collecting and analysing the data. In order to mirror the process I followed in the study in recording

it here I have deferred the review of the literature and its relevance here to the section in which I discuss the outcomes of the study. It is worth noting at this point, however, that my literature search did indicate a paucity of relevant material on the subject of client perceptions of counselling.

In the next section I will outline the research process which I adopted and the methods of data collection and analysis used. The data will be presented in an organised but raw form with a minimum of comment in Appendix I. In the outcomes section I will present the main themes emerging from the data and then discuss these in the context of information from other studies. In the evaluation section I will explore the positive and negative aspects of the study and in the conclusion I will summarise the main findings, future directions for research and recommendations which emerge from the study.