

ETHOS: a rigorous RCT

The ETHOS study – an effectiveness and cost-effectiveness trial of humanistic counselling in schools – has published its protocol paper,¹ and the data collection is complete in all schools. **Karen Cromarty**, the study's School Coordinator, explains what this important research project is all about

With one in 10 young people in the UK experiencing a diagnosable mental health disorder, and an increased national policy focus on children's mental health, this has been an optimum time to undertake a large, scientifically rigorous trial into the effectiveness and cost-effectiveness of school-based counselling.

Four smaller-scale pilot studies conducted over the previous seven years demonstrated the feasibility of a much larger trial. So the ETHOS study methodology has been built upon a sound foundation. Its funding body is the Economic and Social Research Council (ESRC).

The trial

The ETHOS study is the first, fully powered, randomised controlled trial (RCT) of school-based humanistic counselling (SBHC). With a team of researchers from across the UK, led by Professor Mick Cooper from the University of Roehampton, the aim is to find out how effective and cost-effective SBHC is in reducing psychological distress in young people aged 13–16.

We're measuring the progress of these psychologically distressed young people, who are offered up to 10 sessions of counselling, and comparing their amount of change with other young people who are not offered this therapy. Both groups in the trial will receive pastoral care as usual (PCAU). This is the normal menu of interventions that schools offer their pupils, such as planned meetings with pastoral staff,

time spent with a mentor, or being the focus of multiagency meetings.

Value added

Because we've had this unique chance to work with schools and young people on this scale, we're also looking at a whole range of other comparators between the two groups of SBHC and PCAU. In terms of psychological dimensions, we're comparing the differences in symptoms of depression and anxiety, self-esteem, resilience, wellbeing and achievement of goals.

Moreover, as the study is based in schools, we'll also be comparing the educational engagement and attainment of both groups – looking at attendance rates, exclusions, incidents that incur disciplinary procedures, and academic results.

The research also offers an opportunity to study in more depth the young people's experiences of school-based counselling, as well as the perceptions of a sample of their parents/carers and teachers. As such, we have been conducting qualitative interviews, following counselling, to find out what participants and the adults around them found most helpful and unhelpful about the intervention.

Why humanistic counselling?

When undertaking any RCT, it's important that the intervention is consistently delivered throughout the trial. This means the intervention needs to be clearly defined and described. In this study, we chose to test 'school-based humanistic counselling' – which is a distillation of the way in which many person-centred and humanistic-

integrative counsellors work in schools. It has been articulated for us via a manual developed from BACP's *Competencies for Humanistic Counselling for Young People 11–18*. Counsellors in the study are all experienced and qualified in humanistic/integrative counselling, and have also received 'top-up' training in the specific SBHC intervention.

First steps

Once we'd recruited schools and counsellors, trained the pastoral staff, developed the protocols, written the documentation and had ethical approval, we were ready to recruit young people into the study. As an internal pilot, to test our systems and documentation, we began to recruit young people as research participants in just three schools in September 2016, with the remaining recruitment in the other 15 schools taking place in 2017.

How recruitment worked in practice

At all stages, the young people involved had to want to be part of the trial. There was no compulsion, nor pressure on them to be involved, from the school or research team.

The following recruitment process was undertaken in each school at least twice during the study. Most schools went on to recruit three cohorts, with a small number recruiting four cohorts.

Identifying potential participants

At the start of term, pastoral care staff compiled a list of young people in their school who they *thought* were distressed and believed would benefit from counselling. These potential participants were aged between 13 and 16, had at least 85 per cent school attendance, were prepared to have their counselling sessions recorded, and were willing for their parents to be contacted to give consent.

Assessing the young people's eligibility for the study

Each of these young people next met, on a one-to-one basis, with a trained ETHOS assessor, who gave them information about the trial and assessed the young person's level of distress (measured by the Emotional Symptoms Scale of the Strengths and Difficulties Questionnaire: SDQ-ES). The assessors also gauged the young person's capacity to give informed consent and checked that they were not at risk of serious harm. If the young person was sufficiently distressed (scoring five or more on the SDQ-ES), was not at significant risk, and could give informed consent, then they were deemed eligible to take part in the study.

First set of measures

In the same initial meeting, the assessors then invited the participants to complete, one by one, a range of measures and data capture forms – eight in total – including the YP-CORE, which is the primary outcome measure for the study. Once all measures were completed, the assessor then called up a computer software program that randomised the young person to either school-based counselling immediately, or just pastoral care as usual – with the promise of accessing counselling in six to nine months' time. No one involved in the research team, the school, or the young people themselves has had any influence over the result of the randomisation process.

Ongoing participation The following six weeks

Those who were randomised to counselling started their sessions with their counsellor. Participants were entitled to up to 10 weekly sessions, but could choose to take fewer, should they wish. The sessions have been recorded (although the participants could request for the recorder to be turned off at any point). The counsellors have received supervision fortnightly.

Those participants randomised to PCAU were not offered counselling but, importantly, were able to access any support the school would normally

Collaborating centres

University of Roehampton; University of Sheffield; University of Manchester; the London School of Economics; University College London; Metanoia Institute; Karen Cromarty Consultancy; BACP; National Children's Bureau.
Study supported by the Manchester Academic Health Science Centre, Trials Co-ordination Unit

offer, as could those in counselling. Thus, ethically, the study did not deprive any pupil of any intervention they could usually access. Rather, it simply added a new intervention (school-based humanistic counselling) to half of these pupils.

At about six weeks

All young people randomised, those in SBHC and PCAU, met one to one at six weeks with a different researcher, and again completed the outcome measures – the same forms as at assessment, plus another two that reviewed their alliance with their therapist and captured their views on their relationship with the school's pastoral care.

At about 12 weeks

By this time, those in the counselling group had come to the end of their therapy. All participants met with yet another researcher to complete the same measures again. The reason why different researchers were used at each 'testing point' was so that researchers were, as far as possible, 'blind' to each participant's condition. Researchers asked young people not to reveal whether they were having counselling or not, and this helped to mitigate against researcher bias.

At 24 weeks

The final stage of the data collection was the completion of the measures at 24 weeks, again by all participants. Following completion of this assessment, participants were given a £30 High Street Voucher to thank them for their time in the study. This was in addition to a £10 voucher being given at the six-week meeting, and a £20 voucher at the 12-week meeting. Those who had been in PCAU were then offered counselling, if they still wished to access it.

Risk

Young people who were deemed to be at risk of serious harm were excluded from this study. This is because there was a 50 per cent chance at randomisation that they would not receive an intervention until six to nine months' time. Clearly, this would be unacceptable, and the ETHOS team encouraged schools to immediately refer these young people to external mental health services. However, this does not mean that those young people with lower levels of risk, such as self-harming behaviours, were excluded. On the contrary, it is often these young people who access school counselling services because specialist CAMHS services' thresholds can be high.

Data analysis

A detailed analysis of quantitative, qualitative and economic data will be undertaken during autumn

The numbers

18 schools
20 counsellors
5 supervisors
30 fieldwork researchers
330 participants
£835,000 funded grant from ESRC

2018, and we expect the final report of our findings to be published by 2019.

Conclusion

Working on this study has been challenging and demanding, with many taxing ethical considerations to overcome. But the team collaboration has been excellent, with much knowledge and experience shared. All involved have been highly committed, and determined to get the most from this opportunity. As specialist mental health services for children and young people in this country become increasingly stretched, and thresholds to specialist CAMHS teams rise, school staff are often left not knowing what they can do to support their increasing number of students with psychological difficulties. The results of a study such as this could dramatically change the landscape of young people's mental health services.

More information on ETHOS can be seen at www.roehampton.ac.uk/ETHOS/ or by contacting Karen directly.

Reference

1 Stafford MR, Cooper M, Barkham M, Beecham J, Bower P, Cromarty K, Fugard AJB, Jackson C, Pearce P, Ryder R, Street C. Effectiveness and cost-effectiveness of humanistic counselling in schools for young people with emotional distress (ETHOS): study protocol for a randomised controlled trial. *Trials* 2018; 19(1): 175. <https://trialsjournal.biomedcentral.com/articles/10.1186/s13063-018-2538-2>

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