ASC

Association for
Student Counselling

A DIVISION OF THE BRITISH ASSOCIATION FOR COUNSELLING

CONFERENCE PAPERS

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CULTURE AND PSYCHE IN TRANSITION:

A EUROPEAN PERSPECTIVE ON STUDENT PSYCHOLOGICAL HEALTH

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Contents

Preface.

Section One: Student Stress, Transitions and Study Difficulties.

SECTION TWO: Student Diversity and Cultural Difficulties.

Closing Address:

Preface

The 1996 conference of the Association for Student Counselling, held at the University of Sussex, marked a significant point in the development of student counselling in the UK.

It was the 25th Conference and Training event of the ASC, in itself a milestone, and an opportunity to reflect on the growth of student counselling over the years as well as on the challenges facing the profession for the years ahead. But it was also the first event at which we had made a clear effort to set out our work within the wider context of student counselling in Europe.

Nearly 200 student counsellors were able to attend from the UK and we were delighted that some 20 representatives came from mainland Europe, contributing not just their presence and their warmth, but also their experience and wisdom, through leading many workshops and presenting key addresses.

It is clear that there are many common issues presented by students in further of higher education right across the continent. Issues of transition, of success and failure, of struggling to maintain an education often of financial or other difficulty - these and others were recognised by counsellors from all backgrounds. Although the student support structures prevalent in each country varied - sometimes a more medical model, sometimes more psychologically or practically based, yet the themes and the care brought by those supporting were common.

Three days is a short time and with a great number of presentations on a very wide range of subjects, the constraints of time and place inevitably meant that those attending could only sample all that was on offer. These conference papers aim to present a comprehensive package of the lectures, presentations and workshops given at the conference, so that those who were present can review the totality of what was offered, and those who were unable to attend may nonetheless gain from the event.

Apart from the opening, closing and special lectures, the papers have been grouped into two sections. The first deals with student stress, transitions and study difficulties, and the second with student diversity and cultural differences. Some of the papers written by those whose mother tongue is not English have been slightly altered for inclusion here, in order to retain both the sense and native phrasing while making them easier to understand in written English. We trust that the authors will not be offended.

The editing of the conference papers proved a bigger task that at first imagined, so I apologise for the delay in its arrival. I want to thank all those who persevered with the task. Particular thanks are also due to 'FEDORA' and 'Psyche' for their support in the production of the papers.

It remains my task to thank all who contributed to the conference, whether by presenting papers, by attending, or by helping with the organisation of the event. It was well structured, thought-provoking and enjoyable, the opportunity to build contacts and friendships, not just within the UK but across the continent, were enormously valuable, and there was a balance of serious endeavour and light-hearted fun.

I trust that you will catch some of that richness through these papers.

Mark Phippen
Chair of ASC, 1996/97

Foreward

Celebrating its 25th anniversary, the ASC has stepped out into the complexity of the surrounding world. It has picked up the challenging topic of culture and the psyche in transition. To handle this vast field the ASC focused its recent conference on the field of its own professional experience, student counselling. However it was not the inner concerns of the profession as such but the students and their psychological health that were put into the centre and set in a cross-cultural European perspective. Quite a number of professional contracts were made with colleagues from very different cultural backgrounds and ranges of experience.

The ASC stepped into the outer world as well trained and educated 25 year old adults in order to use its potential and to establish constructive relations and working contexts. To stay with this metaphor FEDORA-PSYCHE in comparison is a six-year old child just starting school, it is still learning the alphabet, the grammar and the semantics of the common language.

After establishing the group and coining the name "Psychological Counselling in Higher Education', in Amsterdam in 1990, FEDORA-PSYCHE has organised four major events in which this learning process was implemented:

- The 4th European Counselling on Student Guidance and Counselling (1990). This was a place to get to know a variety of counselling approaches and to start an exchange among student counsellors on a European scale. PSYCHE was formally accepted as a working group inside the Forum European de l' Orientation Academique (FEDORA).

- The generation of the report Psychological Counselling in Higher Education - A European Overview which colleagues initiated with a meeting in Naples in 1992 and which was finally published in 1994. This report helps to clarify the common ground of communication between student counsellors, providing access to the background of the different traditions and institutions among the counselling services in Europe.

- The 5th Congress on Student Guidance and Counselling 1994 in Barcelona, for which FEDORA alone took responsibility. Here FEDORA-PSYCHE promoted a forum to present and to discuss Contributions of Psychological Counselling and Psychotherapy to Higher Education Universities.

- The one day Symposium of Practice and Research on psychological student counselling during the IV European Congress of Psychology in Athens (1995) gave us the opportunity of exchange our experiences with the larger community of psychological practitioners and researchers, and to support research in student counselling on a European scale.

The question of concepts, standards, method and research will also in future be the main topics in which the exchange and advancement of ideas will occur, but more pragmatic tasks must also be tackled. Some colleagues, for example, are working on a booklet on psychological counselling for exchange students in the European Union.

FEDORA-PSYCHE is a network of professionals who are trying to build up communications and co-operation between student counsellors and between universities in Europe. In doing so it stresses the importance for student counselling to be perceived as part of the university and of the academic context, and on the other hand, it promoted the idea that successful academic learning implies personal growth and development. With its holistic view of the student as a person, this network of student counsellors underlines the mutual respect and understanding of difference cultures within an expanding of a European perspective both inside the universities and in the process of European integration in general.

In order to do this is important to understand the various factors which influence students daily life and their education and the social changes they have to cope with. In this sense it is a great help to be part of a network in which all aspects of student orientation are looked at. FEDORA as an association of individual members is trying to provide this kind of network by integrating a large variety of aspects of student guidance and counselling and by establishing differentiated working groups.

A network needs strong impulses if it is to be productive. I feel that the ASC conference on the European perspective on student health has been one which will have a great impact on the future European exchange of ideas as well as of people and projects, and again I want to express my gratitude to the organisers for this encouragement.

Gerhart Rott
Co-ordinator of FEDORA-PSYCHE

Alienation and Adaptation:
First hand experience of Student migration.

Emmy Van Deurzen-Smith
Professor and Dean at School of Psychotherapy and Counselling, Regents College, London.

People are strange when you're a stranger,
faces look ugly when you're alone.
Women seem wicked when you're unwanted
streets are uneven when you are down. (Jim Morrison)

Introduction.

We live in a world that favours travel. We live in a European Union where student exchanges are increasingly of the order of the day. We live in a transcultural world where young people of all nationalities and cultural origins come to live and study in each others countries. We live in a world where many run the increasing risk of alienation and isolation.

Study abroad.

It all sounds so good: to go and study abroad. The very idea of it conjures up an exciting and promising sense of adventure and enterprise. Study and travel abroad seem like the epitome of human freedom. The reality is often very different and includes much loneliness, exclusion and culture shock. These things are hard to understand for those of us who are happily ensconced in the security of our home, our own country, our mother tongue and our family. As long as we travel for pleasure during our summer holidays, foreign countries just seem appealing and exotic. We envy those who get to spend a longer time abroad. Even when we see their obvious difficulties in integrating into the host culture we still tend to judge their problems as being fairly relative. We imagine that they will experience whatever they experience as a passing problem, as something temporary which is set in perspective against a background of a basis security about their origins and homebase in their own country.

This may indeed be the case for students who come to stay in a new country for only a short while and who are accompanied by friends who speak their own language. They may taste the euphoria of the extended holiday, as their sense of belonging with their companions allows them to hold on to a clear point of reference in themselves and in relation to their roots.

Sometimes of course students do not fit well into their group and in that situation they may become more vulnerable to the impact of culture shock. They are in a similar situation to those students who migrate on their own initiative and by themselves. They often make a commitment for a longer time and try to integrate into the host country rather than remaining an observer and a visitor. Those who do so soon discover that you do not have to have a black skin in a white society in order to feel like an outcast.

On your own

It is easy to underestimate the importance of the societal structures that regulate belonging. As Sartre remarked in his book <u>Anti-semitism and Jew</u> (Sartre,1948)

> To own a hut in a village, it is not enough to have bought it with hard cash. One must know all the neighbours, their parents and grandparents, the surrounding farms, the beeches and the oaks of the forest, one must know how to work, fish, hunt, one must have made notches in the trees of childhood and have found them enlarged in ripe old age. (Sartre 1948, p.83)

It is true in order to feel one belongs in a society one has to partake in it and put down one's roots. As a foreign student you are by definition the intruder, who is only accepted as a temporary guest. You represent a particular interest to the people you meet and they take a very definite position in relation to you. You sense that they either relish or dislike this taste of difference that you give them. You always remain aware that you are related to in terms of the otherness that you carry in you. You know that you will always remain the outsider.

There is a sharp contrast between being this permanent stranger or being the temporary tourist. Being a stranger is to be alienated. It gives you that sinking feeling of no longer having any point of reference. To not belong anywhere leaves you stranded in nomansland. To be without a home can give rise to the floundering and fluttering of insecurity or even to that of experiencing panic attacks. Freedom is one of the most scary things to handle and it consists of not being attached to anything. What we forget is that attachments are what secures us in the world and what gives things their meaning and context. Freedom is often used as a negative concept: what is attractive is the idea of being liberated from the ties that bind us. In reality the experience of absolute freedom is quite close to that of emptiness. Paradoxically we cannot use our freedom when we have too much of it, for the more freedom there is and the less certainty and less reality we have. As Colin Wilson once remarked in his book <u>The Outsider</u> (Wilson 1956):

> The Outsider's sense of unreality cuts off his freedom at the root. It is impossible to exercise freedom in an unreal world as it is to jump while you are falling' (p49)

Foreign students often feel that the time of freedom that is available to them is marred by their lack of connectedness. They do not have enough of a foothold in reality to make the most of the open space they find themselves in as they crave some of the security they have left behind at home.

Their insecurity is composed of many different elements that each may seem insignificant and small in their own right, but together build a picture of disconnectedness and separateness which may seem unovercomable to some.

Physical environment.

The first basic factor that stops one feeling at home, is to simply not have a place of one's own. There is nowhere to call one's home: one lives in other people's spaces and smells and everything seems unsafe. The basic animal instinct for security is tampered with: a continuous state of alarm is set off. This experience is so the more intense as one has fewer personal possessions to surround oneself with. Foreign students need objects to remind them of their home country and loved ones. I remember how attached I become to my old teddy-bar when I moved to France. To have a bit of safety suddenly becomes of stupendous importance. Other foreign students have shown me the special handkerchieves (embroidered by grandmother) or the old sweater or pyjamas that they have become unexpectedly attached to all at once.

External appearance

The experience of being unfamiliar with one's physical environment is often hard. To not be able to find one's direction and have no landmarks is very unsettling. Foreign students in a new, unknown city often have considerable trouble finding their way around and can report great distress over what would normally be a simple journey from A to B. A feeling of personal inadequacy is generated together with a physical sense of disorientation. This may be aggravated by the sense that one's body does not fit into the world as it used to. My excitement of being a foreign eighteen year old student in the South of France was muted into distress as I felt treated like an object of curiosity by many of the French people I came into contact with. One of the hardest things was to discover how ill-matched I was to my surroundings, leaving me with a horrific sensation of being out of tune and out of step with everyone else. The French girls were small and delicate, and by comparison I felt gawky and far too tall. Most of the French boys were shorter than me as well and I used to feel like a giraffe standing in the queue at the restaurant universitaire. To tower over others is bad enough but to also be dressed differently and to have different colour eyes than everybody else can be an extremely alienating experience. My jeans were very much out of harmony with the little skirts and dresses around me and I did not really want to adjust to what seemed to me outmoded and unemancipated behaviour. But it made me feel terribly isolated to have to hold out for feminism all on my own. Foreign students from African countries have told me of their similar distress in deciding whether to adjust to a western dress code. The conflict is between remaining dressed in the clothes that you used to feel comfortable in and that form a large part of your identity or adjusting to your new environment and being more acceptable. On the one hand you may feel you betray your culture and value system if you accommodate and on the other hand you may have to contend with feeling like the odd one out, behaving like an eccentric who attracts attention and who can easily become ridiculed. The irony of this is that clothes are the protective layer we wrap ourselves in so as to be safe and socially acceptable. When the clothes that used to be a source of comfort and strength become a source of discomfort and weakness instead we definitely have a problem. We then have a choice between either adjusting our appearance in order to get ourselves to be accepted, or expose and live out of our difference boldly, courageously but often provocatively.

Social and cultural habits

This brings one to considering other social aspects of alienation in relation to the things that can no longer be indulged in freely and happily when living in another country. There is nothing grand or profound about this either. It is quite extraordinary to find that a large part of one's sense of security and identity is based on such simple things as the brand of butter or bread that one consumes. I remember indulging in French bread and croissants for three months at the beginning of my stay in France only to get a terrible craving for good old Dutch brown bread. My German friend had similar frantic yearnings for German rye bread, but none of these things were at the time available to the South of France. We once had a special ceremony together, slowly consuming the bit of bread we had obtained from a friend who had come down to visit for a week: eating bread had suddenly been turned into a significant event. It was a good way of discovering things we had always taken for granted and learning to value essentials of life.

Even more mundanely we regularly complained to each other about the state the roads were in remarking on how unsuited they were to our bicycles. We made quite a spectacle of ourselves riding around on those. Being together we felt superior to the French in this way and it allowed us to maintain our sense of importance which otherwise would have been quickly eroded by having to make so very many efforts to fit in and being denied so many of what used to be essential habits. When my friend went back to Germany after one year and I was left by myself in France things became a whole lot more different. Suddenly it was not so easy to continue riding a bike, it made me too self-conscious and too different to other people around me. I realised that in order to maintain myself I would have to learn to fit in and stop being so obviously different, I could no longer bear to be conspicuous on my own. My alliance to other foreigners had been eroded. My connections to my own past world had completely gone.

Language and identity

At that moment the fact of accent also became a real problem. It is terrible to know that one is recognisable as a stranger by the mere way in which one speaks. But of course the much more essential loss is that all the words one says have been altered and never quite have the same meaning as the meanings of one's childhood and one's group of reference. Language is the instrument through which we communicate with others and form bonds with them. The words we learn when we are young have special poignancy, they make us part of a social system that we adopt and that adopts us.

> Man is defined first of all as a being `in a situation' . That means he forms a synthetic whole with his situation biological, economic, political, cultural etc. he cannot be distinguished from this situation, for it forms him and decides his possibilities. (Sartre 1948, p.60)

Language is what determines the strands with which we are attached to the world that moulds and nourishes us. When we give up our mother tongue for another language we are truly disabled and bereft. The initial struggle to acquire another language to a decent level of fluency is humiliating enough in itself. You find yourself babbling like a baby and unable to express the complex thoughts that used to flow from you so easily when you put them into what seemed like naturally available words. Now suddenly you have to rack your brain and the words still won't come and, what is worse, other people judge your mental abilities by the sounds you make and that will not come at a greater speed than that of a four year old. You are truly diminished and deprived of your status of adult and no longer accepted for full.

As soon as you stop believing in your own ability to communicate you will have a tendency to flee from others and hide away on your own or find others who understand and speak your mother tongue. If you come from a small minority culture this may not be possible. I have never been able to hide away in speaking Dutch when I was in France and have only rarely met people to speak Dutch with in England. To never hear one's mother tongue spoken, not in the street, nor on the radio or on television is a terrible lonely business that makes you feel as if you belong to a strange sect or subset of the population, for which there is not really any room.

The more suitable fact of not being able to swear with the words that keep coming naturally in your mother tongue, or to have to fall back on your own language when doing mental arithmetic because the times tables are stuck in your brain in one language only adds to a sense of you never being able to fully integrate. With different languages also come different ways of expressing yourself. The tone of different languages and their emphasis on certain concepts makes for a very different way of experiencing yourself. If you are ever to become part of your new culture, you know you have to lend yourself to such a deep transformation as well.

I learnt that I had to let myself get much more passionate, if I ever wanted to speak French well and then of course I had to learn to get much phlegmatic and rational when trying to get my English right, each time bringing out different aspects of my character, leaving the Dutch pragmatism somewhat behind. Not everyone is willing and able to make such adjustments and no-one ever makes them fully and completely. If one experiences the demands of the host culture as an imposition it

can become quite a nightmare to live in it for any stretch of time. A young Arab student once told me that she could not cope with the way in which the British culture was angular and mathematically organised, she missed the fluency and roundness of the architecture, culture and language and music back home and had a physical abhorrence of lots of things that just seemed too western, dull and square, lacking in elegance, shape and colour. She often felt physically sick at this dissonance in her world. It is hardly surprising that the incidence of emotional problems is so very much higher for foreigners that for natives, in any country in the world. As soon as you uproot yourself you make yourself vulnerable, you go out on a limb. Even Freud experienced great problems of insecurity when he went as a student to work in the Charcot in Paris. In his correspondence with his fiancee Martha he reports how it led him to become reliant on cocaine! (Jones 1953)

Being an outsider by vocation

There are four potential solutions to the predicaments described in this paper. The first is to go back home and make the most of having travelled and of having been away and having learnt to appreciate and embrace the comforts of one's home. The second is to stay abroad and to become integrated with the local population as much as possible. This always remains problematic because in one's heart one continues to be other. The third solution is to remain abroad but to stay with a community of people from one's home country: this is the solution of many immigrants who build a home from home and hang on to their original identity. This may work for the first generation but evokes considerable problems for the next generations, who have to stand in the tension between two cultures on a permanent basis. The final and fourth solution is to become integrated to a whole new class of rootless, international people, to become as it were identified with the idea of not belonging. After having lived abroad for long enough this is often the only solution as one becomes aware that one does no longer belong either in one's country of origin nor ever completely in the host country.

It is a difficult thing to accept that one speaks with an accent everywhere one goes and when people in every country enquire how long one has been here or is here for. It makes one feel very low and often unwelcome. The solution is to adopt this new identity of belonging to the international class, the adaptive set, the travelling elite, the ones who know what it feels like to be outcast.

What Sartre said about the Jews applies here:

> Jewish authenticity consists in choosing oneself as Jew - that is, in realising one's Jewish condition. The authentic Jew abandons the myth of the universal man, he knows himself and wills himself into history as a historic and damned creature, he ceases to run away from himself and to be ashamed of his own kind. He understands that society is bad, for the naive monism of the inauthentic Jew he substitutes a social pluralism. He knows that he is one who stands apart, untouchable, scorned, proscribed - and it is as such that he asserts his being, (ibid. p111)

In other words when one feels outcast and isolated the best way forward is to accept one's status and stop fighting for integration. To integrate into a new status quo is to become again like an object - to opt again to immutability and become set in stone. The best source of a new identity is not to hold on to one's origins, but to discover the new position of foreigner. To take such a position and such an attitude to one's predicament opens a new dimension of integration. The choice is no longer between adjusting to one culture or staying true to another but rather to overcome both by creating a new identity of the person who never fully belongs. Incredible support and loyalty can exist between people from different cultural backgrounds who have been united by the same predicament of feeling exiled. And the creation of his new nationality of meltingpot that we now live in will continue to shake our cultures and populations together and will require of us a new flexibility and an a ability to let go of previous securities in belonging to a country or culture. Travellers are the active agents of change in society and their role will become increasingly important. There are intense dangers in nationalism and the need to assert national identification - we cannot afford to be so ensconced.

The challenge and value of migration

Those who let themselves be challenged by the trials and tribulations of foreign study may well be the embodiment of the new values that we need for a multi-cultural future. These are values that no longer set out to protect vested interests and instead seek to establish what is feasible in a world where certainties are constantly challenged. Through migrating and finding one's usual assumptions undermined and contradicted one discovers new sides to the same old questions. This enables one to not take sides, but to view things from a variety of positions and to relativize one's own opinions, mitigating them with new input. Such flexibility of perspective is an essential asset for life in the world of tomorrow where people from different nations will have to get on with each other in ever closer co-operation in a shrinking world.

For those of us who do not find ourselves in a position to experience this process of experimentation with foreigners there is some hope in other forms. For we can be travellers and foreigners in many different ways, between classes and social systems, cities and neighbourhoods and cultures of lots of different sorts. Thus we can all find out a little about what it means to feel contradicted, unaccepted, alien and scorned. It is on the international knowledge of our own estrangement that we should draw when working with strangers. From them we can learn much about our own prejudices and pet hatreds and we can continue our own education second hand in this way. If we are privileged enough to work with many different nationalities a new picture emerges eventually. We no longer see only difference and variety, but we begin to see the underlying similarities. We begin to recognise the fundamental human issues that all cultures and nationalities are concerned with. We can begin to tell the difference between what is a basic human need and a secondary cultural habit. At this point we become less obsessed with the cultural relativism and can work with the alienation people feel no matter what its origin.

Then we are in the position to really work with the people we counsel instead of seeing the foreigner. We can play a small role in the integration of nations and ease some of the tension for those who do not fit in and do not feel that they can ever belong. In some ways all forms of counselling are of this type, those who come to us are always alienated and although not always foreign by culture they often feel foreign by nature. And all these strangers and alienated people need someone to understand them and translate what they are saying. In adopting an attitude of openness to the confusion such work may confront us with, we can improve our work and we can become better strangers to each other and thus better known to each other and ourselves. The objective is not to soothe the others' anxieties and make the other welcome and feel they belong - but rather to help them be strong in the midst of insecurity and find a new dignity in coping with the dialectic of their difference.

Conclusion

In final analysis keep in mind that when faced with alienation one is likely to go through several phases. The first is to hark back to the past and to one's previous identity. The second is to wallow in the sorrow of being an alien and an outcast. The third is to try and adapt anxiously to the new culture and assume a false identity. The fourth is to use opportunity of being challenged to the core and let yourself flounder into uncertainty. It is only when discovering one's ability to survive in the midst of doubt that a new identity can be shaped. Which consists of having confidence in one's ultimate flexibility.

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Adhesive Learning

Ann E. Heyno, Head of Counselling and Advisory Service
University of Westminster.

The idea of "Adhesive Learning" first came to me two years ago and I presented my initial thoughts to a group of PSYCHE counsellors at the 1994 FEDORA conference in Barcelona. As a student counsellor and trainer of student counsellors, I was becoming increasingly aware that external factors such as unemployment, student poverty, increased student numbers and cuts in education were all having an effect on the way students approached learning. I suggested that the market economy was in danger of producing a generation of students with an "Adhesive Identification" to learning rather than a truly internalised one.

What I have observed and understood since the Barcelona conference, is that there has also been a subtle but radical shift in Britain in people's perception of the purpose of education. For many years, it was assumed in the UK that higher education was significantly about intellectual, emotional and social development. It was also considered to be about cultural enrichment. as a preparation for life. Although university education was also viewed as a way of improving a person's career and social prospects, this was not seen as its only function. In 1996, there is growing view that universities and colleges are places where skills are acquired as a preparation for work. This shift from an arguably elitist view of education for education's sake to a more pragmatic view of education as a training for work, has also had a complicated effect on the way students learn.

In this paper I hope to illustrate how social and political changes and changed attitudes to education have all affected the learning process. I will allow time for us to consider how student counsellors can use their understanding to help students get more out of their learning experience and I hope we will also be able to think about whether this is a uniquely British phenomena or one which affects students all over Europe.

As student counsellors, we often see the effects of social and political change before it becomes clear to us exactly what the changes are. In my role as a student counsellor and teacher of student counsellors, I was aware of what I now call "Adhesive Learning" before I understood it in the context that I am describing today. I was noticing that many students were more interested in the marks they were getting or the class of degree they hoped to get, then they were in the content of what they were learning. I was also hearing my academic colleagues complain of increased plagiarism and incidents of cheating. It was around the time that I was re-reading a paper by the psychoanalyst, Esther Bick. In this paper, "The Experience of the Skin in Early Object Relations", Mrs Bick introduces the concept of "Adhesive Identification". I would like to borrow her ideas to introduce the idea of "Adhesive Learning", or learning which is stuck on rather than taken in or metabolised. In her paper, Mrs Bick says that very young infants in a high state of anxiety, fear falling apart or falling endlessly into space. To hold themselves together psychologically, they need to develop a skin, This psychological skin gives them a sense of internal space into which they can take in experience and from which they can project out their feelings. If the infant is unable to develop this psychological skin, perhaps because of an emotional breakdown in the relationship between mother and baby, s/he will develop a "second skin" says Mrs Bick. Through this second skin "dependence on the object (mother) certain replaced by a pseudo - independence, by the inappropriate use of certain mental conditions, perhaps innate talents, for the purpose of creating a substitute for this skin container. Precocious development or an act of mimicry can be the result of second skin formation".

What I have discovered since first writing this paper is that the analyst Donald Melzer also talked about Learning by Adhesive Identification in a book called "Studies in Extended Psychology". In a chapter on "Family patterns and Cultural Educability" he says that this type of learning "produces a type of identification with the superficial, socially visible qualities of the object but not with its mental qualities or states of mind. The behaviour that results is so immediate, so contingent on the presence or evidence of the external object as to deserve the description of mimicry".

In the 1990's jobs are scarce and a proportion of graduates fear unemployment or disappointment in their first choice of career. We also live in a culture which measures success in material terms. Personal worth is often seen in terms of a person's capacity to earn. The effect this has had on undergraduates is to make them more competitive, more anxious about failing, less satisfied with the prospect of a mid class degree and more anxious to get a first class degree.

Another result of this increased pressure, in face of poor job prospects, has been a marked increase in disturbance amongst students. We now see more students with suicidal thoughts, exam anxiety, high stress levels and difficulties in relation to learning. Many of the students we see are either too anxious to learn or too pre-occupied with studying to do anything else with their lives. Many of them are struggling to keep themselves together on very little money and many are working and studying at the same time. For some of these students, education seems to have become a commodity, and many are desperate to get a qualification at any price. What I would like to suggest is that those students who see education as a commodity cannot allow themselves to learn in any real sense of the word. Instead they resort to superficially collecting information in the hope that if they gather together enough of it they will get a good degree. In their desperation for a paper qualification I would also like to suggest that these students feel like Esther Bick's infants who fear they are falling apart or falling endlessly into space. Without an external world which is satisfying and which promises hope of employment, they are likely to find it difficult to take anything in or to learn effectively and may turn to mimicry instead. In such a situation the acquisition of a degree becomes everything and a true love of learning is not known. Some students simply want to "stick on" knowledge as quickly as possible in order to be the first in the queue for the job or the mortgage. A love of learning is replaced by an adhesive relationship to learning, in which what is learnt is stuck on rather than absorbed and thought about.

I would now like to give one or two examples of students who I consider to have an adhesive relationship to learning. The first is a final year student who came to my exam anxiety support group in the summer term of her final year. She arrived in a state of high anxiety and dominated the first fifteen minutes of the group with a stream of words about why she had to get a first class degree. She described how she worked every minute of the day and how unfair it was that her best friend, who worked less hard than her, usually got higher marks. Nothing anyone in the group said decreased her anxiety or reduced the hyped up patter she was uttering. "If I don't get a first," she said, "I won't be able to do a PhD and if I don't do a PhD, I won't get a job in my subject". I tried offering suggestions about her competitiveness and her desperation to cover every possibility but without much effect. In the end I said "For goodness sake you sound as if you are on the commodity market, buying and selling shares, not studying for a degree". Well that's what it's like these days, "she replied. "You have to be".

Some weeks later she came back to say the group had helped to calm her down but at the time she was in far too anxious a state to learn anything.

Another student I saw was a former business person in his 40's whose return to education was part of a personal struggle to be more himself and less geared towards only making money. For most of the time he studied successfully. However at the exam time, he suddenly reverted to a "business" mentality in which success was everything and thought was impossible. He tried to apply the technique he'd used to make money to study for his exams but it didn't work. In this state of heightened anxiety, he failed his exams and this threw him into a quite severe depression from which he is currently recovering.

In my work as a trainer of student counsellors, I have also noticed a tendency towards adhesive learning in relation to counselling practice. Because training counsellors are worried about getting work, they sometimes feel pressured into getting counselling placements before they are ready for this. This leads to fantasy that learning to be a counsellor is simply about sitting in a room with a client. In fact, the reality of being face to face with a very depressed, anxious or disturbed person, when you don't know what you're doing can be quite frightening and what it does is to further perpetuate the anxiety. It makes students feel de-skilled and even more anxious about whether they will ever get jobs. To cover up this further sense of anxiety, there is a temptation to familiarise themselves with counselling jargon and spout it authoritatively in the hope that no one will notice they don't understand it. In my opinion, this is akin to Mrs Bick's idea of mimicry and what I call "Adhesive Learning." It is learning based on very severe anxiety and therefore without foundation and quite opposite to the state of mind needed for counselling.

No counselling theory, however erudite, is of any use to an individual unless it has meaning for them. What needs to be developed in someone learning to be a counsellor is a counselling attitude or a counselling state of mind and this takes time. It cannot be stuck on but it can be acquired through observation and understanding in any relationship between a professional and another person, for example a teacher and student, a doctor and patient or young person and a youth worker. Trainee counsellors need to develop the capacity to take in the powerful feelings of the people they are working with, without being overwhelmed by them. They need to be able to think about these feelings, understand them and reflect them back in a way that is helpful and containing. This activity requires a peaceful and reflective mind and can only be developed over time with considerable self knowledge and maturity similar to state of mind needed for learning.

In summary, I am suggesting Adhesive Learning is an imitative form of learning which some students resort to as a result of the many external and internal pressures under which they are studying.

In her paper, Mrs Bick suggests that second skin formation may be the result of a breakdown in the relationship between mother and infant. In education in Britain in the 1990's students often complain about the lack of contact they have with their tutors. Class sizes are bigger, there are many more students in universities and colleges than there used to be and cuts in education have put additional stress on academic and administrative staff. At a time of constant pressure and change, there is less time for personal contact. Some people argue that undergraduates don't need personal contact in the way younger students do but my experience is that this isn't the case. Students need to feel someone has them in mind even if they don't have direct everyday contact with them. The significant increase in students presenting to exam boards with extenuating circumstances may be indicative of their desperation to "take out insurance" against failing but it also makes me think that they may feel that no one knows them or is holding them in mind. What I would like to suggest is that if the relationship between student and teacher breaks down in the student's mind, the student's relationship to learning in a real sense many also break down.

In 1964, Peter Marris said in a book called <u>The Experience of Higher Education</u>, all the most valued techniques of English education, from primary school to university, depend upon individual relationship between teacher and pupil. The larger the class, the more impersonal the lecture, the greater disproportion of students to staff, the greater our anxiety that these techniques will fail. Even if a university cannot pretend to be a community of scholars, it is certainly a community; learning is communicated by means of a complex interaction of personal relationships and upon the quality of these relationships the success of higher education is seen to depen. He then quotes from Professor Herbert Butterfield, who says universities, "ought primarily to be regarded as an arena where there is to occur the electric contact between teacher and pupil". This is the central requirement of any teaching system, the supreme object of all educational arrangements, and university administrators are "doomed to terrible unimaginativeness unless we can persuade them constantly to hold in their minds the picture of the single teacher at grips with the single pupil".

Before I finish I would like to return to a theme I raised at the beginning about the shift in culture from the belief in education for education's sake to a more market-driven, pragmatic view of education as training for work. In the past 15 or so years, Britain has seen a radical change in our cultural values. The philosophy of the market place and value for money permeates all our working lives and seems to set a price on everything we do. Our own AGM has a resolution which states "The Executive is heavily aware that managements in educational institutions increasingly want services to justify their existence in ways that are financially driven or motivated by other management concerns". I have never been slow to say that as student counsellors we need to come out of our closets and be accountable for what we do. However, I also feel that we have a duty to make our institutions and our policy makers aware that if you superimpose the philosophy of market too heavily on universities and colleges it will affect the quality of the learning process. This will lead to an impoverishment of the student experience, higher dropout rates and increased disturbance amongst students.

Student Stress Revisited

Declan Ahern
Head of Counselling.
University of Limerick, Ireland

A developmental approach to stress understands stress as being due to the threat to self adequacy as developmental tasks are undertaken (Ahern '96). This threat to self-adequacy in turn will prevent further development from taking place. As its extreme, this threat will be experienced as the threat of self annihilation (Rowe , 1987).

The application of the relationship between stress and development for college students is readily apparent. Students who fall within the traditional age range (18-22) are in a transition between adolescence and adulthood. The formation of an adequate self is at a critical stage during late adolescence, since it is at this stage that we stand apart from our families for the first time and begin to live a life of our own. There are a number of potential crisis points we are likely to encounter during this process of attaining independence and identity formation. Such crises are experienced at threats to self-adequacy and self-worth. What's at stake (using Lazarus', 1976, terminology) for students under stress is their sense of self, which is threatened by and also determines how they handle the core developmental tasks of identity, achievement, separation and intimacy .

Student development and student stress is linked together in a way that perhaps can be best summarised in the form of two key questions students encounter, namely: "Who am I?" (the development issue, Erikson, 1968) and "Am I OK?" (The threat to self).

Based on the evidence regarding student development and stress, it is not difficult to understand why student stressors can be identified within the family, academic and social domains. Each of the primary developmental tasks facing college students, as well as their associated threats to self, can have a particular relevance to specific areas of student stress. For example, the family presents the challenge of separation and independence which brings with it the need for a secure family base (see Bowlby, 1988; Satir, 1972). Academic demands centre on the inherent need to achieve, as a major aspect of one's identity formation. The need to achieve is accompanied by the potential fear of failure (McClelland, 1953). Within the social area the need for intimacy and friendship is highlighted, with the accompanying risk of rejection and loneliness (Chickering, 1969). Each of these aspects of student stress is explored in more detail below.

Not all student stress can be attributed to this particular group of developmental issues however. Some students may experience stress to the self as a result of need deficiencies other than achievement, intimacy and separation. For example, students may experience stress whenever their more basic survival needs are under threat e.g.. lack of money to buy food or life threatening circumstances. Any model of student stress must allow for these elements also.

According to Combs et al (1976), the degree of threat or level of stress experienced will be determined by the following factors: the immediacy of the threat, the clarity with which the threat is perceived and most importantly the degree of self-adequacy and self-worth the person brings to the situation. It is these factors which determine the extent of the stress response.

Academic Stress : Academic achievement and identity

Academic demands can be of three types: the threat in the need to achieve academically, i.e.. fear of failure; the external threat posed by an excessive workload and the threat posed by the lack of study skills, necessary to accomplish the required workload. I now wish to examine how these three demands might be related.

For many students experiencing stress, there would seem to be an over-identification with one aspect of their identity. This becomes stressful whenever academic success is threatened eg.exam time. Academic achievement can become the sole source of esteem and can be accompanied by and perhaps is due to, a lack of self-confidence in social circumstances.

Academic success is highly valued in modern society. Academic qualifications can provide a major boost to self-confidence. However, this kind of worth is conditional and is not based on the inherent worth of a person, regardless of their successes.

The bulk of the academic stress experiences reported by students can be accounted for within a developmental model of student stress, the need to achieve can be viewed as a central internal demand on students, which has an important impact on their being able to study and being able to complete their workload. What is at stake (Lazarus, 1976) for the student should this need be threatened is the student's sense of self-worth and self-adequacy. Maslow (1970) includes the need to achieve as an ego or esteem need, that has to do with one's reputation and how one is seen by others. Similarly Chickering (1969) refers to the need for students to develop competence as part of their overall identity formation. Combs, Richards and Richards (1976) argue that the need to achieve, as with all human needs, can be subsumed under the fundamental need of self-adequacy, as the basic driving force of human nature. Threats to self-adequacy come in the form of external demands, such as academic workload, and internal demands including expectations. Poor self-adequacy, in themselves, can also be the basis for the experience of threat to self.

This is not to ignore the workload to be regulated by course leaders, as well as the need for students to learn appropriate study skills. Coping with workload and study skills will only be properly addressed, however, when put in the context of students need to achieve. Neither excessive workload nor poor study skills alone adequately account for the stress experienced by students. It is in combination with the pressure to achieve that workload and study demands are reported by students. In every instance of academic stress it is prospect of failure which is at stake and it is this appraisal that primarily determines the students' coping response (Lazarus, 1976) to workload and study.

Family Stress and Separation Issues:

The most dominant theme in relation to family demands has to do with students' relationships with their parents.

The link between stress and the need for parental approval is highlighted in relation to students' achievement motivation. Parents do have a big influence on students' motivation and academic expectations (Davies, 1986) which is reflected in students wanting to do well academically, so as to **please parents** and wanting **to be as good as siblings.** Difficulties that students have with parents tend to be in relation to one parent in particular either because of conflict with that parent or **concern for that parents' well-being** or wanting **to please that parent** academically and otherwise. Very often the student may be caught up in a conflict triangle between parents.

These types of family demands highlight the importance of parents in providing the secure base for the healthy development of identity and self-worth of the student (Ainsworth, 1969: Bowlby,1969, Minuchin, 1974, Satir, 1972), The home is where students first learn to feel adequate about themselves (Coopersmith, 1967, Satir, 1972). As students move out and separate from home their need to feel adequate still exists and is heavily influenced by what they have learnt about themselves at home. Lopez el al, 1986, Anderson and Fleming, 1986 and Lydon, 1993 have all highlighted similar family difficulties to the above for college students.

It would seem that a positive identity is developed within the family where the student gets on well with parents, feels supported, approved and loved by them, thus providing the self-confidence necessary to be independent of home (Humphries, 1993).

Achieving independence through separation from home and the family is considered to be a primary developmental task of college students (Grayson 1989). Students' relationships with parents has been shown to have an important bearing on their separating from them and achieving independence (Armsden and Greenberg,1987, Ryan and Lynch, 1989). Students seek to be independent but, for many, this task is impeded due to an insecure home base caused by conflict, rejection or role commitments.

Students experiencing stress in their family do so primarily in their relationship with one or other of their parents. Within a development framework this stress can be seen to retard the development of a positive identity necessary for separation, independent living and achieving an adequate self. There are reports of students experiencing family demands as well as demands in their academic or social lives, from which it may be inferred that the family has not provided the necessary secure base needed in order to achieve adequate independence.

Within a developmental model of student stress, family based stress can be understood as a threat to one's sense of safety and belongingness which underlie the development of the self-esteem necessary for achieving a healthy separation and independence (Maslow, 1970, Bowlby, 1988). In the past this aspect of student stress has been overlooked. Thankfully, there now seems to be a growing acceptance amongst researchers and practitioners that indeed a central element of student stress is due to what is happening for students within their own family. The focus on the family may detract from focusing on the contribution of the University environment to student stress. However, by taking into account the importance of the family in generating and maintaining student stress, the University can more appropriately address its own role in promoting and alleviating stress.

Social Stress and Intimacy

The development of intimacy as a task facing college students has been the subject of much debate, with opinions differing as to whether this task comes at a later stage of development or not (Gilligan, 1982). Relationships can be understood to serve a number of purposes for college students, including intimacy but also serving as a source of approval and identity. As has been pointed out, for some students achieving academic success is seen as a priority, for others social acceptance and fitting in socially dominate.

Social demands reflect three very different issues, including the need for intimacy through relationships with others, the need for approval and acceptance by others and the need for social skills. How might these demands be related? Although there are different issues involved, the demands do not occur in isolation but are linked to one another by the unifying concept of <u>what's at stake</u>, as outlined by Lazarus, 1976. In this instance, it is the fear of loneliness and rejection by others that is appraised as a threat. Students who lack the intimacy of relationships also tend to lack a sense of self-adequacy and social skills necessary to form relationships. Students who feel adequate, on the other hand, tend to have social skills and do form close friendships if they wish.

In summary, students experiencing social stress often lack the confidence to form friendships and are left lonely and rejected. A development model of student stress maintains that social stress consists of threats of one's need for intimacy and acceptance by others. These threats are experienced where social skills and self-worth are poor.

Summary

Three main areas of student stress have been discussed, namely, academic, family and social. Each area has in turn been shown to refer to specific developmental tasks of college students, i.e., the need to achieve, separation and intimacy respectively.

Factors contributing to the experience of stress amongst students include: external demands (e.g.. workload, having something stolen), inadequate coping responses (e.g. poor study skills, poor social skills) and the appraisal of threat to the self inherent in the experiences of stress - with appraisal being the primary determinant of the stressfulness of external demands as well as the adequacy of one's coping responses.

The development model of student stress (based on the theoretical considerations of Erikson, 1963 , Chickering, 1969 and Grayson, 1989), can be adopted as the unifying framework within which student stressful demands can be understood. The developmental model of stress defines stress as the threat to self adequacy as developmental tasks are undertaken. This model recognises the ongoing need for esteem and adequacy (Maslow, 1965, Combs, 1976) without which development will not occur. Where one's feelings of self adequacy is lacking there will be a greater need for approval from the environment. This is demonstrated by student demands to be adequate academically (e.g.. to achieve standards) socially (e.g.. to be accepted/to fit in; to be as good as others) and in the family (e.g.. to please parents; to be as good as siblings). Student need for approval, esteem and adequacy ("Am I OK?") would appear to operate in parallel with and perhaps governs the students developmental needs for intimacy, autonomy and identity ("Who am I?"), and are experienced in a variety of different ways of students. For example, some students experience difficulties primarily in one area of their lives by the family, social or academic. For other students this threat to self can permeate through a number of areas e.g.. academic and family or academic and social and family. There are some students for whom the threat is extensive, affecting them in all aspects of their lives, including family, social and academic. We can conclude that there is an underlining threat to self occurring for all students experiencing stress but that this experienced in different ways for students depending on their most important developmental needs at that time. Three distinct variations of this nature can be identified namely: the over-identification with academic success, not fitting in socially and wanting to please parents.

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Whitman et al '84

Campus Psychiatry

Dr Anne Clara, Psychiatrist and therapist
Head of staff at the Vrije Universiteit, Brussels

Some aspects of the work in a university mental health centre

The University Mental Health Centre of the VUB (UDGGZ-VUB) is one of the seven Flemish mental health centres in Brussels, acknowledged and financed by the Ministry of the Flemish Community.

It is a small centre, situated near the campus of the VUB. The VUB or Free University of Brussels is a Dutch speaking university with some 8.000 students. Due to its position near the university, which acts as its organising institution, the centre is mainly consulted by university and other students. The centre is open to anyone with mental health problems, but its particular aim is to provide services to older adolescents and young adults.

The staff consists of members with a multidisciplinary background: a psychiatrist, a psychologist, a social worker and a secretary. The centre offers counselling, psychotherapeutic and psychiatric treatment. Consultations are held in either Dutch, English or French.

Belgian law defines mental health centres as specialised extra-mural services with a double objective: prevention of mental disorders and, on the other hand, their diagnosis and treatment. Some mental health centres specialise in a particular problem area (for example alcohol and drug dependency) or provide services to a particular population (for example migrants),

The main age category of the patient population of University Mental Health Centre is that of older adolescents and young adults between the ages of 18 and 25. Half our patients are under 25, which is rather exceptional for a Flemish mental health centres: the mental health centres with a children's team treat children and youngsters under 18, while those with an adults team are mainly consulted by adults over 30. Adolescents between the ages of 16 and 22 often seem to be forgotten in the out-patient mental health care.

The student as an adolescent proper

From a sociological point of view adolescence is the time of transition from a dependent position within the family toward a more autonomous position in society. This age period between 12 and 22 starts with the radical physical changes of puberty (beginning around the age of 10 for girls and 12 for boys until 16) and continues with adolescence proper (roughly from 17 till 22 years). The end of adolescence is usually marked by the fact that the young person starts working and living with a partner. Sigmund Freud considered "Love and work" to be typical for adults and generally this still applies today.

According to the Dutch child psychiatrist Oudshoorn, adolescents experience the greatest stress at the very beginning of this period (puberty) and at the end of it (the "birth: into adulthood). It is around these two transitions that most disturbances and problems occur. In the contemporary western world, adolescence goes on ever longer by an extension in both directions: it begins earlier and ends later. From a historical point of view there is a tendency for the physical changes related to puberty to start at a younger age, so that physical and sexual maturity are attained earlier. On the other hand, from a sociological point of view, one reaches an independent position much later, mainly due to longer compulsory school attendance and longer schooling.

Students in higher education are specially in a position or delayed transition into adulthood, more so than their working peers. Students are, among other things, dependent on their parents financially. Thus they can be considered to be "proper" adolescents, even when older than 22.

The registration at the university marks an important transition in a student's life. Fischer and Hood[1] describe the consequences of the stress, linked to this transition. Their stay at the university is for many students the first prolonged separation from home, by leaving their parental home and adapting to the demands of academic life, students are faced with a drastic reshuffle of their object relationships.

In "The Changing Family Life Cycle", edited by the family therapist Betty Carter and Monica McGoldrick, Richard Fulmer[2] devotes a chapter to the developmental stages of the life cycle of professional families. In his view, the role expectation of students is that they should function autonomously as regards the organisation of their daily life and studies, that they should engage into age-adequate friendships and sexual relationships and that they should take social political stands, but they are usually not expected to be completely independent on a financial level.

Complaints and mental disorders among students

Almost two thirds (63% in 1995) of the total patient population in the UDGGZ is formed by students and secondary school pupils. Nearly all patients under 25 are students or pupils. The student population forms a rather homogeneous group, as regards age and initial complaints. Many problems experienced by students have to do with their particular social stress status and the stress connected with the delayed transition from adolescence into adulthood. The specificity of this population has to be taken into account during therapeutic interventions. When working with studying adolescents, one is often confronted with particular situations, such as for example problems concerning study orientation or study methods or test anxiety at examinations. Anxiety is the single most frequent complaint for which our mental health centre is consulted by students (10% of all initial complaints in 1995).

Anthony Ryle[3] gives a survey of epidemiological studies on psychopathology in university student population and reports:

* 1-2 severe disorders, something requiring hospitalisation
* 10-22 rather serious disorders, for which specialised help is indicated
* 20% psychological or psychosomatic complaints, for which reassurance, counselling, medication or brief therapy are sufficient.

The frequency of mental disorders in a student population is not larger than that of a general population of the same age. It is usually accepted that about one in five adolescents suffer from a mental disorder, but most of them do not receive professional help. This applies to a student population as well. Probably only a small fraction of all students with mental health problems during their academic career, seek professional help. In a prospective study Rimmer[4] (1982) found that less than one third of college students, who were diagnosed as suffering from a mental disorder according to Research Diagnostic Criteria, sought professional treatment during their college years.

Characteristics of a mental health centre for students

As mentioned before, the UDGGZ is a small centre staffed with only one psychiatrist, one psychologist, one social worker and one secretary. I have worked there as a psychiatrist, system-oriented therapist and director for 10 years. About half my working hours is spent in seeing patients and the other half in staff meetings, administration, seminars, management and representative tasks. Students in higher education make up about 50% of all my patients, so the consultation for students takes up about 25% of my working time. The other staff members (psychologist and social worker) have a larger proportion of students among their clients.

A 21 year old female student (I will call her Evelyn) was brought in by another student Amina, who accompanied her at the first appointment. Amina, who is a psychology student, told me: "Evelyn has always been rather dull and flat, but it has worsened lately. She looks sad and cries a lot. I think she is depressed and needs medication" Amina was right: Evelyn was depressed. Interviewing her proved to be time consuming, because she showed a clear psychomotor retardation. To cut a long story short: I prescribed her antidepressant medication and about one month and a half later, she had recovered. In fact, she felt so well, that she seemed to have changed completely, even in appearance. She made new friends and fellow students wondered if she come over from another university, because they thought they had never seen her before. It became clear that she had been depressed for many years, without any apparent reason, although not so profoundly as during the last few months proceeding her first appointment. This is a success story of course not all my patient's stories end that well. Evelyn showed a very swift response to the medication, which is not always the case.

Richard for example, took much longer recovering from his depression, but then his story was more complicated, Richard was 21 years old and repeated the second year of his graduate studies in sociology when he first came to see me. His initial complaint was that he felt depressed. He wondered if there was any connection with the relational problems he recently had had with his girlfriend. One could say that Richard was a good illustration of the diagnostic criteria for a major depressive episode: he showed nearly all of them. He was depressed most of the time, felt tired, had lost interest in his studies and pleasure in his hobbies, he had lost some weight, he had difficulties sleeping, suffered from nightmares, was clearly retarded on a psychomotoric level, he felt hopeless, empty, he had trouble concentrating and finally he wished to be dead and undertaken two suicide attempts. He did not attend classes anymore, because he was too distracted when he did. We talked about his family. He was the fifth of six children. Both his parents had died: his father 5 years before from

a myocardial infarction and his mother 3 years ago from a cerebral haemorrhage. Moreover, his elder sister, who had acted as his tutor after the death of his parents, had committed suicide a few months ago. In the family history one great grandmother had committed suicide, a grandfather had been addicted to alcohol and two sisters had also attempted suicide. Moreover, two of the patient's friends had died in a car accident. When asked about the influence of all these deaths among his family and friends, Richard became tense. He did not want to talk too much about it, he had the impression of being cursed, sometimes he thought that everyone around him died and that he should die too. I gave Richard antidepressant medication, without much effect. Finally, I decided to admit him to hospital, because I thought the situation was too dangerous (the suicide risk too high). He slowly recovered and was able to leave hospital and finish his studies. He was not clinically depressed anymore, but remained a rather sad and ponderous young man.

Looking back on my experience of 10 years as a psychiatrist for students, I consider the following aspects as representative for the work in the setting of a mental health centre, mainly frequented by studying adolescents:

1. Students may be considered as the ideal target group for psychotherapeutic interventions: **YA(R)VIS**: Young Attractive, (not necessarily Rich), but Verbal, Intelligent and Successful. This has certain disadvantages too: it is sometimes tiresome to endure the tendencies to verbalise, intellectualise and rationalise, in which students excel.

2. Generally students are **critical consumers** and emancipated patients. For example, to persuade a student to take an antidepressant, I often have to plead like a lawyer before a jury. Still, many students are given a prescription, which does not necessarily mean that they take the medication as prescribed.

3. **First year students** (freshers) are well represented in our patient population, compared to the student population as a whole. The student transition from an often overprotective environment to a new one heightens the psychological vulnerability in freshers. The result is often that latent problems become manifest or that new problems arise. Loneliness, depressive moods, lack of self confidence in general and test anxiety more specifically, are frequent complaints among freshers. Test anxiety is not a groundless fear, as only about half the first year students at Belgian universities go up to the second stage.

4. Students who **fall behind in their academic schedule** are over represented. It is sometimes not easy to make out which is the cause and which the result: are mental health complaints the cause or the consequence of study problems? (Fig.9). On the other hand many students with psychological problems get good results on an academic level. For some students high grades are not only a sign of good intelligence and study abilities, but also indication of psychopathology: these are students who compensate a lack of social and emotional abilities in their study behaviour.

5. **Last year and postgraduate students** are also well represented in our population. For most Belgian students, university life ends after four (most graduate studies), five (clinical psychology, dentistry, law, engineering) or seven years (medicine), sometimes with voluntary or involuntary prolongations. Those who have finished their studies have to take leave of a familiar environment and to try and find a place in the professional world and in society in general. Some students do not manage to take this last step to adulthood or tend to postpone it as long as possible, for example by engaging in post-graduate studies. They can't get enough of university life. In my view the same rule applies to some members of the academic staff: an academic career as an elegant solution for those who do not want to grow up completely. These eternal adolescents and eternal students feel at home in the protective environment of the university,

6. Student's psychological problems often have to do with **complications of the process of leaving home**. Unfortunately, it is seldom possible to engage the student's family in his treatment. This is partly due to the reticence of the student, as part of his developmental stage, who might consider family therapy as a prohibition on separation from his parents. 18 to 20 year olds like to believe in the myth of the individual as a unit functioning autonomously. There is probably no other period in life, in which it is so difficult to acknowledge the ties with and the influence of the family or origin, as precisely at the transition of adolescence into adulthood. One 21 year old female student answered my question about the situation at home as follows: "I am not often at home in fact, I usually stay in my room". On the other hand there is also a simpler explanation for the fact that we usually work with individuals rather than families, it is that students sometimes study and live far from home. All the same, we do take the family context into account and we work with "here and now" as well as with "over there", in a sort of systemic approach in individual therapy.

7. **Male and female students** come and see us in equal numbers, contrary to the data of the other Flemish mental health centres for adults, where more women than men come for consultation. On the other hand, mental health centres for children and youngsters have more boys than girls as patients. So on this level also, we are in between services for adults and children. It is common knowledge that the mental health problems for which men consult are rather different from those for which women consult. Men in young adulthood show a different and often more serious psychopathology than women of the same age: more alcohol (and drug) abuse, more schizophrenia (an illness as frequent in men as in women, but which begins at an earlier age in men), more suicide(s). Women suffer more often from anxiety and eating disorders. Being a psychiatrist, I see more male than female patients.

8. The number of **foreign students** in the patient population of the UDGGZ has risen during the last years to 19% of our student population in 1995. This percentage is slightly higher that the proportion of foreign students at our university (15% in 1994-1995). Foreign students are a very heterogeneous group, as regards their cultural, their religious and ethnic background, language and academic knowledge, age, financial, familial and administrative status. In general, they run a higher risk of developing mental health problems than Belgian students (Minas[5]). Considering the fact that most foreign students in our patient population are not from Europe, we are in our daily work often confronted with other cultures, which does not make it easier. Moreover, in our experience, foreign students with psychological problems are often reported late. As a matter of fact, they usually **are** reported to us, while Belgian students mostly come and se us on their own initiative. At the first consultation it often turns out that the problems have escalated to such an extent (suicide attempt, psychotic breakdown, aggressive acting-out) that outpatient treatment is no longer possible and an admission to the hospital has to be arranged. When the student comes to see us afterwards, the ambulatory treatment is frequently complicated by communication problems of a linguistic nature (many foreign students have but a poor knowledge of Dutch or French or English), as well as on a cultural level.

9. Most students arrive on their **own initiative**: 40% of **all** our patients in 1995 came to see us on their own initiative, a percentage which is even higher for students and which is more double than that of other Flemish mental health centres (19% in 1994). We get less referrals from general practitioners, although some students are referred to us by the student doctors (general practitioners of the medical centre of the university). The students seen by the psychiatrist are more often referred than those seen by the psychologist or social worker.

10. The **Therapy** is usually **brief**: six sessions on average. This average is of course not very relevant, because some students come for a single consultation, while others need an intensive and long-term treatment. Still, the number of consultations per patient is smaller than in the Flemish mental health centres in general. This is typical for consultation services for students, not only in Belgium (Bell[6]), and it is partly due to the age of most students: they still have many choices to make and their problems are not usually as encrusted as they sometimes are with adults.

11. The number of **consultations** is **not evenly spread** over the year: there is a peak in October (the beginning of the academic year) and a low in June (examination time) and during the summer (holiday), so the working schedule of the UDGGZ is influenced by the academic calendar. During cramming and examination time, students have other priorities and come and see us less frequently or rather less regularly. When they do come, they often are in crisis and have to be seen.

12. When comparing the consulting behaviour of the student patient group with that of the non-students, it strikes me that students are much more **casual about keeping their appointments**. This attitude probably has to do with the fact that they are less subjected to the many routines and duties, that are typical for the life of a working adult. Many students only work according to a schedule during the period running up to the examinations and examination time itself. This implies that sometimes without notice they do not show up for their appointments, stay away for sometime and then suddenly emerge again, expecting you to be ready to receive them. They continue the process where they stopped as if there had been no interruption.

When students do not keep their appointments, they often have beautiful excuses afterwards, as for example:

-John (23)   "I overslept" (appointment at 3 PM)
-Elly (18)   "I was in the pub chatting with a friend and I completely forgot our appointment, but if you have time to see me now, that would suit me".

I frequently have the feeling that I am used as a transitional object, which can be discarded and temporarily forgotten and then picked up again. Adolescents on the verge of terminating their separation-individuation process have many points in common with toddlers, making their first steps in the process and experimenting with being alone in the presence of mother,

Jeremy Holmes[7] looks at **loneliness and being alone** in adolescents. Referring to Winnicott (1965), he describes the process of learning to be alone, of turning this condition to profitable use and of enjoying it, as one of the major developmental tasks in this stage of life. Learning to be alone is of major importance for students in order to be able to function autonomously as regards their studies. Obviously this is a very demanding task for many if them, homesickness and feelings of loneliness are frequent complaints among freshers.

13. Looking at the complaints for which students consult there often is a discrepancy between what I, as a psychiatrist, consider to be **pathological** and what is seen as **acceptable** or annoying behaviour by the university community. I will give an example:

13.1 Emile (22), a very timid and retiring biology student, suddenly began to behave in an obstructive and provocative way. It later turned out that he acted under the influence of mystical delusions and auditory hallucinations: a voice had commanded him to begin his life in public. He was hospitalised for some time and his flatmates at the student home thought that he would give up his studies. They were amazed and indignant, when he showed up again the following academic year, They wanted him to be thrown out and wrote a letter about it to the dean of the university. I was informed by the university staff and I paid the student a house visit. He was not psychotic and was doing reasonably well. I talked to his flatmates without any noticeable effect. It appeared that they were scared, although nothing really serious had happened, they were simply scared of what they considered to be strange, bizarre, crazy behaviour. Of course not all students react with reaction to fellow students with psychological or psychiatric problems. I could give you examples of solidarity and empathy, but tolerance for handicaps is certainly influenced by the nature of the handicap: people who are visually handicapped are usually treated with more consideration and sympathy and efforts are made to help along their integration. People with a mental disorder are more often confronted with rejection or negative reactions or at the least indifference by their fellow students.

13.2 Very few students consult because of alcohol abuse, which does not mean that the level of alcohol consumption is low at the university. On the contrary alcohol is by far the most popular drug. Some students use alcohol in such quantities or in such a way that is causes problems for the user or his environment: blackouts, several hangovers per week, driving under the influence. All the same, usually neither the user nor his peers or relatives worry much about it, because it is considered to be socially acceptable behaviour. The university is rather permissive towards alcohol use. Alcohol has a major role in many social events and heavy drinking is on some occasions even the norm (ragging, hazing, cantus). I don't see many students who are physically dependent on alcohol, but I often see students who have five or more drinks per day and this is rarely their first motive to come for consultation.

The role of the therapist

A therapist, psychiatrist or not, working with students has to be a kind of double agent. What is in the interest of the student may not be in the interest of the university or the student's parents. The therapist has to deal with all the parties concerned, but must sometimes also have the courage not to stay neutral. A student who came to see me spent more time playing his bass guitar than studying. I suppose he could become a better bass guitarist than a lawyer. The problem with students with such "symptoms", is that they usually are unable to make a choice, with the result that they end up doing nothing at all, they don't want to study and they are not allowed to play the guitar. The task of the therapist is to make them face up to this dilemma.

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Transitional Effects of Culture for Students Who Have Had a Severe Breakdown

Karine Brutin,
Teacher of French literature at the Georges Heuyer Clinic, Paris,
Art Therapist.

I was attracted by the title of the conference, "Culture and Psyche in Transition", an open-ended title and one which pays homage to Winnicott.

The study I have been making, over the last few years, of cultural experience and its place in the constitution and evolution of the personality was inspired, in part, by Winnicott. For it was Winnicott who introduced the idea of cultural experience in the face of Freud who was above all interested in the artistic experience. Freud established that only the artist can escape the split between the pleasure principle and the reality principle by producing a hero who is always miraculously saved from the worst eventualities. Winnicott introduced the idea of a transitional space between mother and child which is, for all human beings, the place where transitional and cultural experiences take place.

I am a literature teacher who uses literary texts, and an art therapist who uses theatre and writing. I work in the Georges Heuyer Clinic and in the Medico-Pedagogical Reception and Aid Centre Paris, where I am also a teacher counsellor. My professional experience in these institutions led me to examine cultural experiences from the point of view of the existence of Winnicott's "psychic place to put what we find". As you know, for Winnicott, there are children "deprived of play" (deprived children) who have no access to this transitional space. My talk concerns adolescents deprived of the transitional space which gives access to cultural experience. These are the type of adolescents I deal with, They are "deprived" either temporarily or for longer periods although their intelligence gives them access to secondary and higher education. It is not a question of aptitude or intelligence, therefore, but a question of psyche, a question of psyche transition, of culture and psyche in transition.

My paper will be both theoretical and clinical, drawing on my experience of teaching literature and as an art therapist using theatre and writing with people in difficulty. It falls into three sections, the first entitled, "Deprived of Cultural Experience, but not of Education", the second entitled, "The Lever of the Imagination" and a third consisting of a couple of clinical vignettes which illustrate ways of entering into the sphere of the imagination and cultural experiences.

I. Deprived of Cultural Experience, but not of Education

1. The institution where I meet these young people is unique in Europe. It exists neither in the UK nor in the United States where a student who experiences a psychotic decompensation is removed from the system. It is a clinic which treats young people experiencing severe psychological difficulties whilst at the same time allowing them to take up their studies again. They are admitted to the clinic and treated by chemotherapy and psychotherapy but are also enrolled at the nearby universities where they follow their studies. They also receive support teaching in the clinic which allows them to face up to the requirements of their university. The clinic's motto is "study despite everything". Despite difficulties or the handicaps created by illness.

2. So these young people are not deprived of education. They often possess high intellectual potential, but may be deprived of cultural experiences as I am about to explain.

How can this be? Winnicott explains this phenomenon by reference to the idea of false-self, as he establishes a link between the false-self and intellectual development. I would first of all like to make clear that there are degrees in the establishment of a false-self, so there are young people who are able to resume normal intellectual functioning after an episode of psychotic breakdown. I am talking here about extreme situations because they allow us to raise the issue of learning. On the other hand, Winnicott does not limit the false-self to psychosis since the false-self is compatible with a degree of adaptation and a high social position. It concerns all of us, through our students, our colleagues or ourselves.

Winnicott draws attention to the ruses of the false "self" on account of the fairly frequent link between the intellectual processes and the false "self".

> "When a false "self" organises itself in an individual who has high intellectual potential, the mind tends to become the place where the false "self" resides. In this case, "a dissociation between intellectual activity and the psychosomatic existence" takes place.

Winnicott's observation is interesting, because it describes facts which have been observed in the clinic, where young patients are capable of studying despite severe psychic disturbances,

The falsely constructed personality of thus capable of learning and sometimes this learning capacity constitutes a means of survival up until the time when a state of distress occurs which is linked, in my view, to the incapacity of the false "self" to adapt beyond a certain point, when new demands are made by changes in the school situation, for example. This is why many young patients decompensate at around 15 to 16 years old, the age at which they arrive at the lycee, or after the baccalaureate at 18 when they start university. Perhaps "undecidable" events have awakened the authentic demands of the true "self" which can only express itself through a breakdown. The special investment of study induces a transference, which paradoxically, will revive archaic modes of dependence, which must be anticipated in order not to be "seduced" as these patients have been "seduced", and diverted from their natural desire to exist by themselves.

I would now like to present you with a couple of situations. Firstly, we are going to look at what lies beneath the frequent complaint, "I don't understand anything about this text".

These words are frequently heard in the teaching situation. The reader hesitates over words and syntax, and asks for explanations that are given but which do not make sense of the reading, and he or she again declares that they don't understand anything. However, it is necessary to differentiate between the contexts in which this complaint is heard.

(a)   *When this complaint comes from a neurotic student*

Certain readers tackle a book as though it were a sacred text, bearing a secret they will never manage to uncover and before which they can only give up. A case in point was the sad and secret young man who arrived, saying "I don't understand anything" and indicating one of Roland Barthes books which was on the reading list of a credit course in modern literary criticism. In the case of the young man, the introductory phrase may be understood as an appeal for an "Open Sesame" to the text.

And in fact, it was enough to explain the historical and ideological context of the book and to explain the references to psychoanalysis for the young reader, provided with these keys, and certain of the benevolence of the teacher, to come to life and find the courage to take a critical approach which had been rejected as alien.

Seductions enter into the process and combat the depressive tendency to give in when faced with difficulties presented by an unknown text. Understanding reveals the Oedipean aspect of knowledge: the text is a sphinx whose riddles one wishes to uncover. This is, at it were, a neurotic version of the complaint, "I don't understand this text".

but *(b)* *When the complaint comes from a psychotic student,*
it is a very different matter. In this particular case, the world of signs has remained stable and is not affected by the unsteadiness seen in Van Gogh's paintings. But there are cases where "I don't understand this text" is the anguished expression of a kind of vertigo which affects the sense of the words at the same time as the sense of reality. As in the case of Jean, a young man whose reading of a Moliere play was impeded by incomprehension of the sense of the words and syntactical form and who, distressed, asked the meaning of it, without being satisfied by any of the answers he received. Words are villainous, persecutory objects which prevent access to the totality of the text.

What on earth can it be, this sense which surges forth in such a terrifying manner, hitting him in the face with crude words such as "charm" and "bait" and the suggestive turns of phrase used by Tartuffe in his seduction of Orgon? O.Mannoni explains that schizophrenics reject the meaning of words, and eliminate the signified from language, preserving only the signifier. Could it be that here words are overcharged and are looked upon as the revelation of a sexuality or homosexuality of nonetheless lays claim to? No, with each text we stopped because the words have more that one meaning, they have metaphorical meanings which render them incomprehensible and terrifying. Jean faces words as he would a foreign language. Words have become things. The only moment of respite in the relentless combat with words which have escaped from their symbolic case: when Jean reads the book aloud and laughs at the funny passages . The sentence "I don't understand anything" needs to be taken literally. The text signifies literally nothing, the exasperated effort to understand comes up against words which have become objects and which persecute, "beta elements" on which the alpha function cannot operate.

Could it be said that the significant links of the text have been the object of destructive attacks, or that sometimes one meets "blank" zones in the pedagogical care of these young people, or perhaps what F.Davoine calls "bassins de catastrophes" (thoughts of disaster) where nothing registers, nothing can be learnt because the sense of the words is so unsteady. Perhaps, without anyone knowing, we are approaching hidden traumas and genealogical secrets, in a manner of speaking the "rumblings of trauma". Teachers can only bear witness to their confrontation with this rumbling which invades their domain with its demented noise. In the face of this rumbling they have only grammatical and semantic

answers or literary form through which they finally impose sense, by authoritatively imposing silence, by dictating the explanation, by producing a form within which to contain this destruction.

But this form could not have been produced if the patient had not shown sensitivity to the "air or song of the writing".

The second situation concerns the use of drama. In an exercise I introduce at the beginning of the session, each person has to improvise using gesture and voice in front of the group who reproduce all their gestures. Everyone takes a turn,. When her turn comes, Virginie is incapable of proceeding and cannot enter into the situation when it is she who has to perform. She does not establish a barrier between the real and the imaginary. She chooses the role of Charlotte, the young peasant girl who is seduced, from "Don Juan". Once again, it is evident that she is not "getting under the skin" of the character, she can only be Virginie manipulated by the seducer. She cannot experience the poet Rimbaud's phrase "I is another" which is, in my opinion, one of the keys to the opening up of the imagination. Later I will present a sense of situation where the difficulties have been overcome.

II   The Therapeutic Lever in these Situations

Here, in concentrated form, are my ideas:

The pedagogical situation can be defined as a special kind of transference relationship in which the teacher is led to play in reality, the role of an authority which is missing in psychosis, the role of the imaginary speaker. From this very close transference position, the teacher can help open up or tame this imaginative space which is closed in psychosis. I forgot to explain the link I make with Winnicott: the transitional space is the place for operations of the imagination which will result in the constitution of the symbol.

III   The cultural experience

<u>Vignette 1: Christophe - does an actor really feel what he acts or is he pretending?</u>

Theatrical work, whether it involves improvisation or playing a part, arouses what I call "emotional experiences aimed at the symbolic" which uses the particularities of the language of the theatre to test, express and transmit oneself to an audience. In these situations, I am often confronted with the investment of situations and characters, without knowing the history of the subjects or the history they refer to in the particular act.

In the theatre workshop, we suggest an activity of group research into situations of oppression, whilst making clear that situations which are too emotional or personal such as separation or divorce are to be excluded. The situation imagined by Christophe and two of his friends is a racist scene in a police station. A policeman, truncheon in hand, is interrogating and brutalising a young black demonstrator arrested during an anti-racist demonstration, wanting to force him to reveal the name of his boss, under the gaze of a provocative prostitute locked up in a cell.

Earlier, Christophe had made himself known to someone whose problem was self-expression. He had literally fled from a theatre workshop session six months previously, explaining that he was "incapable of expressing himself". What's more, he complained to the medical team that he had trouble controlling his inner violence and at one time, before being admitted, he had been hearing voices belittling him.

Christophe, in the role of the young black demonstrator was inaudible. He slumped in his chair protecting his face and expressing fear. Asked to speak up so the audience could hear, he explained that someone who is frightened cannot speak loudly, that one is rendered speechless. During the rehearsal, the actors are asked to reverse their roles. In the role of the police inspector, he remained motionless for a moment, truncheon suspended in mid-air. He had to be encouraged to make the move from violence suffered to violence used in the game. As a result, his bodily attitude and the strength of his voice, changed. Back in his own character once more, he invented the end of the sketch - the name of his boss Malcolm X, thrown out like a challenge in the face of the policeman and he asked "does an actor really feel what he acts or is he pretending"?, discovering the fundamental question of the Actor's Paradox, a question which faces all actors when they begin, and which he has just experienced deep within himself.

His work continued to develop until he gained a sense of ludic control of the situation during rehearsals, and then during the performance since this scene was played in front of an audience from the clinic and repeated until different spectators, playing the roles in turn and replacing the actors, found a way of reversing the oppression. This scene aroused great emotion and led to a passionate debate among the spectators, who were all concerned by the need to find a possible way out of this violent situation.

It is possible to feel that the situation is based on a traumatic personal situation expressed imaginatively, of violence suffered and/or inflicted, "one beats a child, a child is beaten", a situation which draws its strength from being a real situation. Afterwards, our sketch seemed highly symbolic as a result of its collusion with current events since we heard that as a result of police bungling, three young people had met their deaths.

"What we cannot say, we can show". F.Davoine often repeats Wittgenstein's aphorism on the expression of the inexpressible. The theatre is, by definition, the place where we show, where we perform that which cannot be said in any other way. Elements which have risen from the depths of the psyche is transmitted, under cover of the character, to the group of people gathered together when the curtain rises. Surprising himself, Christophe feels relieved, "before, I couldn't express myself, there, I could".

Vignette 2 At the crossroads of teaching and therapy

So we see that instinctual drives sweep across the field of pedagogy, that the study of literature mobilises a person in that psychical area where it is possible to experiment the bonds of closeness and of separateness, and where too it is possible to play at destroying them,

Isabelle is as beautiful as she is depressed and anxiety-ridden. After two months of hospitalisation in the clinic, she is impatient to meet me. When I asked her to describe her university courses, up to her present decision to prepare for a BA degree, she asked whether I mean her university or her psychological courses. "Your academic course", I specify. But in fact, spontaneously. she unreservedly goes on to provide me with some very intimate details of her life, telling me of the strong relationship she has with her father, and the friends of his who had taken advantage of her instead of helping her with her professional choices as they were supposed to. For her, there followed a period of total intellectual annihilation, whereas she had been a brilliant student. The BA is a pretext to enter the clinic for treatment. She says she does not expect much. In the course of staff meetings with the medical teams, I learn that Isabelle's parents are separated, and that her mother has been mentally very sick for years. Before arriving at the clinic, Isabelle herself had electric shock treatment for a breakdown accompanied by melancholia. I am going to describe a phase in the teaching relationship which followed a serious and worrying breakdown by confrontation with the realities of the university and which paved the way for Isabelle to claim her place alongside her fellow students. This was a time when Isabelle was preparing for her first oral presentation. I should tell you beforehand that Isabelle's is a worrying case. Her sole wish, she says, is to die. In looking ahead she sees only a "big black hole". In the view of this, the medical team agreed to interrupting her university classes and at their request she was not allowed out of the clinic. This was at the beginning of the first university term. By the end of that term she wanted to start psychotherapy. The theme of her presentation forms parts of a comparative study on Hamlet from the historical, structural and psychoanalytical points of view. She has to write a summary of the book Hamlet and Oedipus by Ernest Jones, author of the well-known biography of Freud and a psychoanalyst himself. For this presentation, her university professor has provided her with a list of reading material which includes a chapter from Freud's The Interpretation of Dreams, "Dreams of the death of persons of whom the dreamer is fond", in which Freud introduces the Oedipus complex. In the class just prior to this, Isabelle had questioned me about Oedipus. Together we had gone over the plot of Sophicles' tragedy, Oedipus Rex. She had expressed surprise that the tragedy only began a full twenty years after the actual parricide and incest, and had asked: "When it's a girl, is it called the same thing?" Then she brought up the subject of her father again, and the far too intimate relationship she had with him. Two weeks before the date of her presentation she had still not read the book by Jones. Looking like a tracked Ophelia, she arrived in class with unkempt hair whereas normally it is carefully tied back. "I am going to ask you something very important. I want to read this passage from The Interpretation of Dreams with you and I want you to explain it to me". Her tone of voice was insistent and dramatic. Then she read "Dreams of the death of persons of whom the dreamer is fond" out loud, stopping at a passage she had difficulty in understanding which had been underlined: the re-appearance of childhood wishes in dreams. As an example I quoted Jones' analysis of Hamlet and, before saying anything about Freud's theory, I explained that as a child Hamlet wished to usurp his father's place beside his mother and that the murder of his father by Claudius fulfils an infantile though not an actual death wish. Then I explained that the Oedipus complex is a developmental phase through which everyone passes, in contrast to Hamlet who is "one particular case of psychoneurosis". I mentioned the resolution of the Oedipus complex, saying this could be Hamlet's choice of Ophelia, for example, and she seemed very relieved to learn that there could be a resolution of the complex. She continued reading the chapter, breaking off now and again with a remark based on Freud's text but relating her own story: "My mother could never be a rival because she was mentally very ill. My father chose me saying: Luckily I have you, Isabelle, otherwise I'd find it impossible to stay at home". When we reached the part dealing with the brother's jealousy she commented: "Yes that's exactly it. I was my father's favourite". And with a nod, "Yes, that's familiar" Then, when we came to the part where Freud mentions fathers who cling unhealthily to the ancient potestas patris familias she said: "Yes, that's it, my father had too great a longing for me". She stopped again at the point where Freud describes the Oedipus legend to ask: "Mrs. Brutin, do you think that it is the reason we are here in this clinic?. Given Isabelle's passionate and forceful manner of reading this was plainly an abreaction. I remained silent during her introspective reading and when I did intervene it was to refer only to the literary characters quoted in the texts. I used Hamlet to explain Oedipus, with no direct reference to her own case, so as to leave the domain

she had just uncovered completely free of interpretations. I felt sympathetically inclined to her desperate efforts to give meaning to her story and I was concerned about her presentation because it seemed to me that if she could not sufficiently objectify all she had discovered and named, thanks to Freud, in order to make it part of her university project, then it would remain without effect.

But she managed. With a great deal of pain, anxiety and hard work, she succeeded in mastering this elusive subject. Later, we concluded together that Ernest Jones' book does much to earn a place for analytical literature within the realm of culture. Her example illustrates the way a singular unbearable experience may find support by learning on a universal experience.

Isabelle is full of admiration for the man who discovered the unconscious as a result of his self-analysis, to whom we now owe psychoanalysis. She is grateful to me for having helped her with work that was "too close to her". Both her university professor and her fellow students agreed that her presentation was outstanding and very clear. Now it is over, Isabelle admits that she is "tired" but her face is serene and her hair neatly tied back as she sets off to university, a place she has established as somewhere she can belong. My emphasis on academic requirements rather than on the quality of the elaboration Freud's text elicited, may seem surprising to you. This is precisely the difference between my way of listening to the material and that of a psychotherapist. The elaboration she constructed with me in the transference was destined for her university professor, I believe, he himself, being called upon to play the role of "ferryman" in the text of reality: her presentation of Hamlet and Oedipus in point of fact. Without such a passage, the thoughts that make up the space from which she was able to present Jones' book will not acquire that status of reality and authenticity. When she works out her position with regard to the Oedipus complex, she is working on her identity as a student since the analytical text stimulates her to question its structure and what lies at its base. In this way an envelope for the ego is formed, making thought possible.

I hope to have shown how the study of literature has the effect of encouraging elaboration, through identification and externalisation, thus preparing for or accompanying the work of psychotherapist, though it is imperative never to confuse the two. The work I have been describing focuses only on literature. The literary text lends symbolic shape to a universal experience, thanks to which a singular and, until then, unthinkable experience can be named and contained.

Conclusion

Books, and the experiences they contain, are the founding myths of our civilisation. They are, according to the poet Mallarme, "the words of the tribe". It is indispensable to be able to reach these words when language vacillates. I believe I have shown that cultural experience is a vital area and the subject of psychic workings which must be taken into consideration when working with students.

Coping with Exam Anxiety:
The Effects of a Multidimensional Group Concept

Dr. Helga Knigge-Illner

Freie Universitat Berlin
Zentraleinrichtung Studienberatung
und Psychologische Beratung

I work as a psychologist in the centre for student and psychological counselling at the Freie Universitat Berlin. For nearly ten years I have been running a workshop for students under the title "Preparing for Exams", focusing on coping with anxiety of (oral) exams. I enjoy this work more than others because it represents a living learning situation, including a broad variety of experiences and procedures, which is rather effective in enabling students to overcome problems with their exam. There is always a great demand for this workshop, and the responses of our students to the workshop have been very positive.

Last summer I had the opportunity to evaluate the effects of the workshop in a methodical way, due to the sponsorship of a German health insurance scheme - the Barmer-Ersatzkasse.

The evaluation study focused on the following aspects:

- characteristics of our participants, investigated by a questionnaire
- assessment of the workshop by our participants with respect to different aspects of satisfaction and experienced effects
- effects of the workshop on the degree of exam anxiety as measured by a standardised test anxiety inventory.

In this presentation I will try to give an impression of this kind of the workshop - its concept and theoretical background - and show the main results of the evaluation study.

1. Objectives and content of the workshop

Diagram 1 shows the main objectives and strategies:

Intensions and Strategies

1) Building up study skills
time management and self organisation
active reading and intensive concentration

2) Coping with exam anxiety
analysing implicit thoughts and their
influence on emotions (RET) and changing
them, enhancing self assurance

3) Relaxation method
Autogenes Training

4) Training of presentation in oral exams
simulation of exam situations
coping with questions and critical points

5) Supporting group communication

1   It is our intention to improve skills like time management and reading on a cognitive level. Combined with it is the objective to enhance the motivation of our participants.

2   The second objective is to concentrate on the emotional dimension. Our goal is to enhance a more effective coping with exam anxiety, like trying to explore the fears, analysing beliefs and thoughts and changing them into more reinforcing thoughts, which can result in improved self assurance.

3   A relaxation method is taught: Autogenes Training, developed by J.H. Schultz (Kraft, 1982). The method is similar to Jacobson's progressive muscular relaxation training, but not quite the same. Autogenic training concentrates on some physical sensations like, "heaviness" of arms and legs or "warmth" or "regularity" of breath. The relaxation is not based on the mechanism of intended muscular tension and following relaxation, but only on directing the concentration by the mind. The objective is to get a better awareness of the sensations or to perceive them more sensible and intensive. Applying this method students can improve their concentration and reduce stress reactions and excitement.

4   Communicative behaviour for oral exams, especially presentation of knowledge, is taught by simulation of exam situations. Our participants learn strategies for good preparation, for coping with questions by the examiner and coping with critical points during exam situations. I use video recording during simulation.

5   Supporting group communication is an implicit objective, by which I will enhance exchange of experiences, mutual support and reinforcement.

The programme comprehends a broad variety of activities for the participants: learning and applying strategies, talking about one's anxiety, trying to express anxiety by painting it, exercising a relaxation method, taking part in the simulation of oral exam, analysing video clips for improving communication in oral exams In sum, it is a good example of a living learning situation.

Strategies and working methods are represented at the level of concrete recommendations, assisted by handouts. Our participants are supposed to continue the strategies at home and to report weekly about their experiences with them.

The main task of the group leader is to establish a good balance between the goal of teaching strategies on one hand and giving room for communication about personal experiences on the other. Sometimes it is not easy to balance this situation.

The workshop is intended as a short term event. We want to initiate an intensive learning process and to encourage our clients to make their own efforts in applying the strategies and managing their problems. We accompany them for a while, supporting and reinforcing them, but then we close the group hoping, that students will discover their own potentials and organise themselves.

The workshop starts with a one-day session (6-7 hours), followed up by four or sometimes five further sessions at weekly intervals, each of them lasting 3 or 4 hours. The first session is aimed especially to create an enhancing group climate and to introduce the different parts of the programme.

After an introductory circle, in which participants talk about their difficulties with exam and their expectations, the strategy of time management is focused on. Firstly students are asked to review their last three "working days" with regard to some given questions - i.e. amount of studying time per day, definition of learning objectives etc. On the basis of their actualised experiences we discuss the principles of making realistic time schedules. It is very important to deal with the objections and counter arguments of the group members. Otherwise the method won't be really accepted.

The next step of the programme approaches "exam situations" by role-playing. Students get text material and instructions for taking the roles of examiner and candidate. The subsequent evaluation regards the interaction between the two trying to find out opportunities for the candidate to steer the course of examination.

Main subject of the second session is the SQ3R-method of Robinson, the method of active reading, which is introduced by a handout and tested on a text example afterwards. In this session simulation of exam is already prepared: each candidate is supposed to prepare an abridged version of his subject for oral exam including written possible questions to the subject. The role playing sequence concentrates on the beginning of exam, the introduction of the subject matter.

The main intention of the third session is coping with exam anxiety. The sequence is started by the announcement of a stress inducing event e.g. the message that all participants have to pass an intelligence test in front of the video camera. They do not have to do it really, instead of which we talk about the stress inducing event, about the emotions they felt and the antecedent thoughts, which provoked the feelings. Further preparations are intended to cope with examiners' questions in a favourable way and to cope with blackouts by mental training.

In the third session we start with exam simulation proceeded by talk about aspects of rating the test achievement. In most cases of simulation I take the role of examiner. Sometimes one of the participants does it. The simulation takes not more than 10 or 15 minutes, each of them recorded by video.

The evaluation is based on different sources. Participants have a strong interest in getting feedback from the other group members. It is my task to ensure that the feedback will be constructive and acceptable. Video recording makes it possible to analyse behaviour sequences in detail and to get important cues for behaviour modification. The participants are extremely interested in watching themselves on the monitor. Being confronted with their image on video often results in a fruitful reflection of their self image and a more realistic self assessment.

2   Theoretical background of the concept

The therapeutic concept of this workshop corresponds to the model of coping with stress of Lazarus (1980). His model describes the stress experience of an individual in a threatening situation as the result of comparing assessment processes. The person takes into account the stressing factors of the situation (like probability of failure, loss or self esteem etc.) on the one hand - the "situational appraisal" and assesses his potential counteracting forces (like resources of support, his state of capabilities etc.) on the other hand - "self appraisal".

The result of the comparing the assessment process shows if the anxiety of the person tends to be high or low and if he tries to cope with the demands of the situation or - the opposite - starts escaping from it.

In terms of this stress model the intention of our workshop is, to show that comparing the assessment processes of our participants results in a positive relationship based on realistic assessment of the stressors on the side of the situation and of the state of counteracting forces of the person.

Our programme is based on the assumption that our students need some special skills. Therefore we try to improve their coping capabilities. Their experiences will result in a reassured positive self-assessment, especially in the awareness of being capable of acting in spite of threatening factors and being successful.

An increasing confidence is one's own abilities will correspond to a reduction of anxiety. This is the assumption on which we base our competence training.

Beyond this general intention the workshop focuses on exam anxiety in a more specific way. We aim to influence the factor of "worry", which seems to be connected with high test anxiety.

Actual research on test anxiety distinguishes between two main components: "worry" on one hand - that means anticipating negative outcomes and self-deprecatory thoughts - and "emotional" - intense affective and physiological arousal - (Liebert and Morris, 1967, Spielberger, 1980).

There is a lot of empirical evidence that the cognitive factor of worry is the more important one in influencing the intensity of test anxiety and the quality of test achievement (Scholz, 1995, Schwarzer, 1987). Hodapp makes a distinction of our dimensions (Hodapp, 1995)

    -Lack of confidence
    -emotionality
    -worry
    -interference (of thoughts)

In orientation on rational - emotive therapy (RET) or Ellis (1977) we help guide our students to analyse the relationship between their thoughts, beliefs and their emotions, discovering the worrying thoughts, which are demotivating, thus to revise and change them.

Besides this our relaxation training contributes to reduction of tension and excitement. It enables the students to regulate affective and physiological arousal.

The main part of our workshop programme - the simulation of tests - confronts our clients with real stress - situations, in which they are challenged to sustain, to cope with the demands and to overcome their anxiety. It is a behaviour training by which they also gain more competence.

3.   Workshop Participants

Our workshop is open to all interested students. Sometimes we recommend it to clients getting individual counselling. The number of participants is restricted to 15. We regularly offer two workshops per term.

The workshop is suitable for broad groups of students. It is a necessary condition that they are ready to work on their problem in a group. They must be able of talking about their emotions to a certain degree and capable of applying cognitive control on their emotional states. Our group offer is not indicated for individuals with severe grades of anxiety, based on deep-rooted neurotic conflicts, which are evoked by the situational factors of exams.

Our experiences with the participants show us that students join us, who mainly have a broad range of achievement/working and motivation problems. They often tend to procrastination and have an ambivalent or low self esteem.

4.   Results of the evaluation study

4.1 Method of evaluation

1. With the intention of a qualitative evaluation the course of the workshop sessions was registered by an assistant - especially relevant statements and reactions of the group members. Investigation was made into how much the strategies were accepted and what kind of difficulties arose. In addition group climate and quality of communication were assessed.

2. A questionnaire was constructed for gaining some more information about the characteristics of our clients. It includes aspects like age, number of years studied, job engagement, antecedent experience with exam situations etc.

3. We developed a second questionnaire focusing on different aspects of satisfaction after finishing the workshop. These aspects were: on example:

    -most important experiences in the workshop
    -application of strategies and principles at home
    -degree of satisfaction with the result of workshop participation
    -report of occurred changes in behaviour, attitudes and/or emotions
    -assessment of one's ability to cope with the approaching exam.

4. In addition we administered a standardised questionnaire of test anxiety to our clients: first at the beginning of the workshop and, then again, after the last workshop - session. So we were able to measure the anxiety reducing effect of our "treatment". We choose the TAI-G of Hodapp (1991 and 1995) a German adaptation of the Test Anxiety Inventory of Spielberger (1980), which distinguishes between the four dimensions of test anxiety - mentioned above - which corresponds very well with our dimensions of treatment.

4.2   Characteristics of participants

During Summer term in 1995 we ran three parallel groups of students, two of them started with 15 members, one with 9 only. We had some drop-outs- especially in one group, which had been very heterogeneous in motivation and expectations.

We based our statistical analysis on the 28 students who participated througout the workshop.

More female than males students visited our workshop. This ratio is rather typical for our clients. The average age of 29 of our group members is pretty high. The high average age is related with the fact, that a high proportion of our participants had studied for a long time - some of them having studied another subject before - not all of them having graduated - and some of them finished a vocational training before coming to university.

The average number of semesters studied, is at most 13.

With respect to studies, language and literature and arts are the main faculties. A considerable proportion come from the medicine and law - subjects with many examinations during course or studies.

Nowadays it is a very common trend in Germany that students have to work during their studies. 64.3% of our group are jobbing besides their studies during the term for long periods.

That our group has been affected some problems in the past, is indicated by the following information:

-53% of them had already interrupted their studies in the past because of personal, financial or other problems.

Another important result from our evaluation study shows that a rather high proportion of our participants had failed in exam situations before: nearly 43%.

At the time of workshop participation 56% were registered for exams - not a very high proportion. But not all of them were just before their oral exam, they still had time enough for their preparation. Only 25% were approaching examinations in the following weeks.

4.3 Assessment of the workshop by participants

Although there were some differences between our three groups in group climate, engagement and cooperativeness, the general tendency was mainly the same.

The "most important experience" were the following parts of the workshop:

-Firstly simulation of exams "clearing up one's attitudes vs. exam" then working and learning method.

The opportunity to exchange experiences of difficulties and problems in the group was also appreciated.

Participants preferred the following strategies:

-time management
-strategies for oral exams and
-active reading (SQ3R - method)
are on the best positions.

The responses showed the following improvements:

-better self organisation
-more optimism and
-more self - confidence and less anxiety.

They also agreed that they felt "better prepared for exams now after having finished the workshop".

The fact that they wished to recommend the workshop to other students indicated a high degree of satisfaction.

Group atmosphere was rated mostly as "pleasant" and "very pleasant".

We investigated the correlation between the different measures and found coefficients of a medium range, indicating that the different aspects of rating are related with a common factor, but concern special dimensions, for example: participants, who showed a high degree of satisfaction, tended to assess their "gained coping competence" as rather high. And there seemed to be a relationship too between "gained coping competence" and "extent to which they adopted learned strategies".

4.4 Effects on test anxiety

We compared the measurements made before and after the "treatment" of the workshop by the TAI-G of Hodapp. Applying a t-test for dependent samples we found a significant difference (t=5.61, p=0.000).

The difference on the different subscales were all significant. Comparing the differences of our parallel groups we found significant values in two groups only, but in the third group changes showed the expected direction.

In addition to the t-test, we made a multivariate analysis of variance in order to control internal group effects. By this we checked the assumption, that the difference in test anxiety could not be attributed to internal group effects but only to the influence of our treatment. The results corroborated the effectiveness of our workshop (F=253.77, p=0.000).

The statistical tests provide evidence, that our workshop was effective in reducing test anxiety, as measured by the TAI-G of Hodapp.

Participation in our workshop has resulted in improvements in the main factors defining test anxiety.

-an increase in confidence
-a reduction of emotionality (=especially excitement)
-a reduction of interference of irrelevant thoughts
-a reduction of worry.

These results are in accordance with the ratings to our self constructed questionnaire and with the personal statements given by our students.

We tested our hypothesis, that "being registered for exam" would have an influence on profiting from the workshop, also by the multivariate variance analysis and could ascertain that those participants indeed showed a significant greater decrease in test anxiety measures. They also had more means with test anxiety than the "non registered ones" at the beginning of the workshop and similar means as those in the end. The "registered students" also showed a higher degree of satisfaction with the workshop and felt "better equipped" after having finished it.

So we can assume, that our workshop is especially efficient with students under the actual stress of exam and having high degrees of test anxiety.

Other conditions , as e.g. "failed in exams before" did not show relevant effects. In other words, students with "negative experiences in earlier exam situations" could also profit from our workshop the same way.

5. Summary

It can be proved that the workshop "preparing for exams" was effective in reducing test anxiety with our participants. Measured by the TAI-G of Hodapp, significant changes were found in the different factors of test anxiety: less worry, emotionality (affective and physiological arousal) and interference of thoughts and an increase in confidence. The students expressed a high degree of satisfaction with the result of the workshop and reported positive changes in behaviour and attitudes. They had adopted many of the strategies successfully. Their "self appraisals" with respect to their coping behaviour had become more positive. It would be interesting to do further research to check if they really will succeed with their exams.

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Counselling Centre for Students - University of Athens

Diana Harila, Clinical Psychologist, University of Athens.

Student life is characterised mainly by problems related to a transitional developmental phase, from adolescence to a mature personality. So, the basic aim of the counselling centre for students of the University of Athens is to help the students to control these problems during their university life. Table 1 shows the goals and objectives of the counselling centre for students. As we see, the four goals are closely related to each other, since the one goal feeds the other. The experience from the counselling work gives stimuli for further investigation (goals 2, 3). At the same time, the post-graduate students are involved in the whole procedure either by taking part in the studies or by taking part in the counselling work under supervision (goal 4). Also, the results from the studies (goal 2) are used for the development of intervention programmes.

The organisational structure of the centre is clearly shown in table 2, where we can see that both professors and post-graduate students participate in the scientific committee of the counselling centre, together with the clinical psychologist who does the counselling work in the centre. The other three clinical psychologists - professors in the department of psychology do not do any counselling work because it is believed that relations between teachers and students should not be influenced by any therapeutic relation between them. Table 3 refers to the counselling services on individual and group basis. The statistics from the counselling on an individual basis is shown on tables 4, 5 and 6. The psychological problems of students as diagnosed by the therapist (table 4) show that problems as anxiety, lack of self esteem and problems with the studies, the opposite sex as well as with the family are the most common problems. Also, the counselling centre for students is doing systematic work with students with special needs who study in the University of Athens (approximately 400). The problems, they usually face are in relation to academic performance and to the withdrawal and social isolation.

I would like to present you with a typical example of our work. This is a case of test anxiety with agoraphobia and how we worked therapeutically.

Presentation of a case study with agoraphobia and test anxiety with panic attacks

This case concerns a female student with agoraphobia and test anxiety with panic attacks. As you know, each case can be treated by many therapeutic methods. However, since I use the behavioural-cognitive model the case I am presenting you was treated in the counselling centre for students by this model. I will present the history of the case very briefly with an emphasis on the therapeutic method we used.

Mary, sought the help of the counselling centre for students of the University of Athens, in October 1993. She was then, 19 years old. She reported that during the first exam in the previous examination period (June 1993) she had a panic attack and she left the classroom before she finished the exam. After that, she had two other exams but she again experienced a panic attack during these exams also and left the classroom before completing them. During the last exam period (September 1993) she was very anxious and she was afraid of having panic attacks again, so she decided not to participate in any one of her exams. This means that she did not pass any course in the last semester. This event worried and stressed her a lot.

She also reported that she felt very anxious when she was generally away from home, when she travelled to other places and when she used public transportation. She could not travel, stay overnight away from home or use any means of public transport. Under these conditions she felt a lot of tension and anxiety, she experienced headaches and her heart beats were very fast (table A). She reported she had her three first experiences of panic attacks in the classroom during the exams. Her fourth panic attack happened when she was on vacation with her mother in a place far from Athens. During the first night she felt very anxious, she had the feeling that something bad would happen to her and she would not be helped. Under the influence of this thought she had a panic attack and she could not sleep. The next day they left for Athens. Her fifth and last experience of a panic attack occurred a few days before she came to the counselling centre when she went to vote in the last parliamentary elections. As she was waiting in line for her turn, she felt tense and anxious and when voting she had another panic attack. After these experiences of panic attacks she sought professional help from the counselling centre. Before we see Mary's history let us try to make the behavioural-cognitive analysis of her case (Table A). With "O" there are represented the important events in her life that might have played an important role to her symptoms and we will see them right now.

This paper was prepared but not presented at the conference for practical reasons.

Social History

Mary lived with her family. She had a sister four years older. Her father was an accountant. Her mother did not work. No one in her family had been treated for serious adjustment problems. Her sister had left home and married four years ago, while she was still studying at the university. Mary's parents did not agree to that marriage because Mary's sister was very young and she had not finished her studies. Mary was then, 15 years old. She remembered that there were many quarrels and strong discussions between her parents and her sister at home. She reported that her adolescence was not a nice, calm period because of all these quarrels at home between her parents and her sister. She also reported that her parents often quarrelled. She had closed into herself, she had few girlfriends, and she did not go out very often.

She described her father as a demanding, egocentric, strict, authoritarian type, but also sensitive and sentimental, mother as weak, compromising and submissive to her husband. Her parents did not have any friends and they did not socialise. Her relationship with her parents was not good, especially with her mother. Her father always underestimated her successes and he frequently told her that she had not done anything serious in her life or that she should go to work to prove that she could do something.

Mary and her mother did not get along well. Her mother used to underestimate Mary's achievements and to tell her that she had failed generally, without explaining to her what she meant by that. She did it especially when she was together with her older daughter. She had the impression that her mother and her sister were in alliance against her because when one of them began to blame her that she had failed in her life, the other did the same.

Mary had warm relationships with her sister when they were kids and later. However, since her sister had married, their relationships were not so close, on the part of her sister, although Mary had supported her when she was quarrelling at home about her decision to marry.

When she passed to university, she started going out more often, with friends and colleagues from the department and started to have a stable emotional relationship,

Treatment

When Mary entered treatment, she expressed a desire to learn how to overcome her test anxiety and her agoraphobia, particularly when they reached their most excessive expression in the form of panic attacks. What frightened her mostly were the panic attacks. As we said before, the therapeutic method which was used by the therapist was the behaviour-cognitive one. The sessions were scheduled on a weekly basis. Table 2 shows Mary's improvements in each session as well as the behavioural and cognitive techniques in each session.

In the second session, after the first interview, the therapist explained briefly the therapeutic method to Mary and the major task was to determine the situations in which Mary was most likely to become anxious. These fall into two general classes: situations in which she had experienced panic attacks and situations in which she became tense and anxious but did not progress to a full attack but which she avoided because she was afraid of having a panic attack. The most frequent anxiety-provoking situations were being away from home overnight, being in a classroom having an exam, and using the public mass transport means (bus, metro etc.). Mary had experienced a panic attack while she was away from home, on vacation, far from Athens. While she was travelling back to Athens, she was extremely anxious and worried about having another panic attack. Probably, through the law of generalisation of the behaviour-learning theory, she started to feel equally tense and anxious when she was using public transportation as she felt in the bus, coming back to Athens. If we see the psychological situation in which Mary was when she started to have panic attacks, we will see that all panic attacks happened during the Summer of 1993. In that period she was very nervous and anxious because (1) her parents did not allow her to go away on vacation with her boyfriend, (2) her parents and her sister underestimated her efforts and her activities, during the whole previous period, something that worried her a lot (3) as a consequence, her relations with her parents and her sister were very bad - something which disappointed her a lot.

Also, the therapist asked the client to make a scale from the least to the most anxiety-provoking situations. It was interesting that situations in which she had experienced a panic attack such as having a test or being away from home overnight were considered by her as the least anxiety-provoked situations. On the contrary, she was afraid of having panic attacks, but did not, while travelling by metro, ship or plane, normally anxiety-provoking situations. The fear of being ridiculous in a public situation from which she could not easily escape, was very strong.

As we mentioned before, Mary was very anxious that these panic attacks could lead her to madness. That thought provoked more anxiety for her and she avoided situations where she was afraid she might have panic attacks. Therefore, in the last minutes of the session, the therapist explained to Mary the nature of panic attacks and she reassured her that a panic attack does not lead to madness. She did so, to relieve her from the fear of madness. The therapist assumed that would help her to stop penetrating her anxiety and avoiding more and more situations.

In the third session, the therapist used systematic desensitisation with muscle relaxation for the least anxiety-provoking situations which were those of being in a classroom and having a test. The therapist also used the technique of pleasant imagery during this technique. Mary did not show any anxiety. The therapist also worked on Mary's sentimental relationship which worried her during that period and provoked more stress, Mary was helped to see her relationship more objectively and to take some decisions about it, through the cognitive problem-solving technique.

In the fourth session, she reported that she was feeling less anxious during the previous week. She brought into the discussion the fact that she delayed doing different things in her life because she thought probably they weren't worthwhile. The therapist helped Mary to specify exactly which things she postponed doing because Mary was under the impression that she generally postpones doing things, something that made her feel helpless and unable to carry through an activity. It was concluded that Mary postponed very few things, especially things that she was afraid she would not be able to carry through. It seemed that she was highly influenced by her familys' - and mainly her father's - remarks that she hadn't done anything in her life. She had low self esteem about what she was able to do. The therapist using the cognitive restructuring technique, helped Mary to estimate more realistically and positively what she had achieved in her life which was not so insignificant and to have a more realistic view of herself. In the end of the session, the therapist used the imagery technique for the metro along with the positive thought technique as homework for Mary.

In the fifth session, she reported she could use buses but not yet the metro, when thinking of something positive. The discussion was focused on her relations with her mother and sister and the impression she had they were both against her. Mary didn't have the courage and didn't know the way to react when her sister and her mother talk about her negatively. The therapist hypothesised that if Mary could react to her mother and sister in such a way they would stop the negative comments on her, that could reduce the stress she experienced, to a large extent. So, the therapist helped her through modelling to see the way she could express her thoughts and feelings. Thus, the homework she was given was (1) to directly ask her mother and sister what they meant when they called her a failure and the like and discuss it with them and (2) to try to enter the metro using the positive thought method in the previous session. In this one, the therapist taught Mary effective breathing and cognitive coping skills, Thus, as homework, Mary was asked to practise these breathing exercises and the cognitive coping skills to combat panic.

The sixth session was held three weeks after, because Mary could not come earlier. She had an exam in a foreign language course. She used the positive thought technique to manage her stress and she reported she did very well in the exam. That gave her much confidence and satisfaction. When her mother started to talk generally about her in a negative way, she asked her directly what she meant and her mother didn't say anything. From then and on her mother didn't make any negative comments in front of her. However, Mary continued to avoid the metro. As homework she was given again the guideline to use the positive thought technique while exposed to the metro. Because of the Christmas holiday, the seventh session was held again one month later. In that period she achieved three one day excursions by bus with her boyfriend. She reported that before the first excursion she felt a little bit tense, but she finally travelled without any problem. She had no problem in the next two excursions. She also used the metro one without any panic attack. Discussion was focused on the midterm exam and on the cognitive coping skills she practised in order to cope with panic. The next session was scheduled one month after, after the exam period.

The period between the seventh and the eighth session was very productive. Mary made a lot of progress. First of all, she took the exams of her Winter semester courses without having any negative experience. Before the first exam she reported she was anxious of having a panic attack, but using the cognitive coping skills she felt more relaxed. She found the strength to talk openly to her mother about how she was feeling when her mother commented on her negatively. That discussion calmed Mary a lot and brought her a little closer to her mother. She reconsidered her relations and set new boundaries with her family. She decided that everybody has his/her own ideas, so she shouldn't pay so much attention to her sister's opinion about her own activities and choices. Next follow up meeting was schedule one month later, however, finally it was held four months later.

The first follow up session was held immediately after the Spring semester period exams, (June 1993) in which she took part and did very well. She reported she felt fine. She used all means of transportation without having any problem. She felt she was again normal. She also reported that she coped with the problems in her family more efficiently, which were mainly problems between her parents.

The next follow up was scheduled some time next academic period. She followed her courses and took the exams without any problem. In the family, things were not very much better but she coped with them in a more efficient way without becoming anxious. When asked what she mostly gained from the therapy she said, the skills to cope with difficult situations and with anxiety and we think that is really the most important.

In this case, we would work more deeply on Mary's relations with her family and the dynamics of the family. However, because the consequences of her symptoms were really dramatic for her and influenced her a lot, many aspects of her life, we chose to work on the symptoms first using the behavioural-cognitive model.

TABLE 1

Counselling Centre for Students (University of Athens) Goals and Objectives			
1. Counselling services	2. Research	3. Development of Intervention Programs	4 Training
a. Individual b. Group c Students with special needs	Investigation of important relevant issues (interruption of studies, substance abuse etc)	New Methods	Psychometry Counselling

TABLE 2

STRUCTURE

Director

↑

Scientific Committee
3 Professors of Psychology
1 Clinical Psychologist
(not related to teaching work)

Post-graduate students in Psychology

↑

Department of Psychology
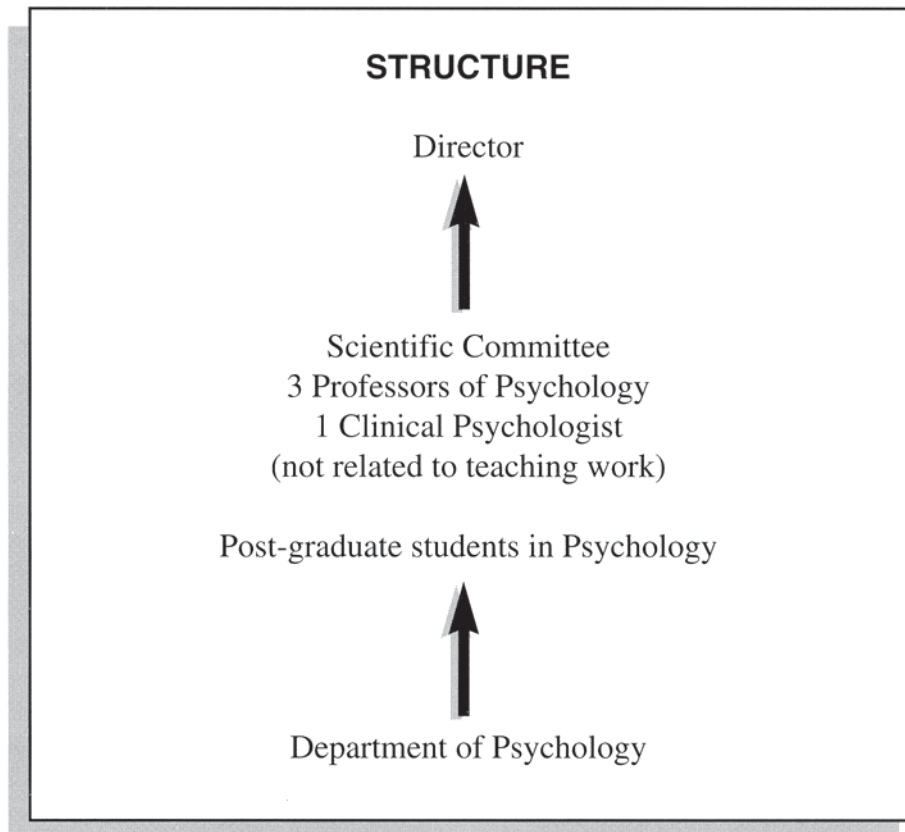
TABLE 3

Counselling Services

3a. Counselling Services on Individual basis
PSYCHIATRIC SERVICES NOT PROVIDED
Population: 84.000 (all schools and Depts included)
Procedure: Telephone call / personal contact - completion of application / intake
interview - referral to therapist - beginning of session
FREQUENCY OF SESSIONS: Once a week
Statistics of Individual Counselling for the Period OCT '93 - DEC '95 (see Tables)

3b. Counselling Services on group basis
Population: Students seeking help on specific difficulties

	Men	Women	Total	Duration
1. Educational and therapeutic group for people with difficulties in social relationships	1	7	8	8 sessions (2 hrs/week)
2. Concentration difficulties and distruction Test anxiety	1	5	6	8 sessions (11/2 hrs/week)
3. Formulation of a program for the reinforcement of self-efficacy's expectations	2	5	7	8 sessions (11/2 hrs/week)

TABLE 4

Counselling Centre for Students (University of Athens) Problems of students as diagnosed by therapists Period: 1/12/1993 - 31/12/1995			
Diagnostic Category	Women N=61	Men N=16	Total N=77
Anxiety	31	3	34
Low-self esteem	24	5	29
Problems a. with studies	21	5	26
b. with the opposite sex	19	2	21
c. with family relationships	13	6	19
Depression	14	1	15
Phobias	6	2	8
Eating disorders	7	-	7
Lack of self-assertive behaviour	6	1	7
Psychosomatic disorders	6	1	7
Psychosis	4	2	6
Problems with peer relationships	5	-	5
Suicidal ideas	5	-	5
Adjustment problems	4	1	5
Personality disorders	3	1	4
Sexual orientation	2	1	3
Obsessive Compulsive Disorder	1	1	2

TABLE 5

Counselling Centre for Students (University of Athens) Number of students seeking help in the Centre Frequency of sessions for cases applied 1/11/1993 31/12/1994																	
Frequency of sessions	1	2	3	4	5	6	8	10	12	13	23	24	29	41	55	Number of Students	Students applied but didn't follow therapy
Women	9	2	3	2	7	1	1	-	-	1	1	1	1	1	1	31	13
Men	3	-	1	1	1	-	-	1	1	-	-	-	-	-	-	8	-
Total Number of W & M	12	2	4	3	8	1	1	1	1	1	1	1	1	1	1	39	
Number of sessions	12	4	12	12	40	8	8	10	12	13	23	24	29	41	55	301	

TABLE 6

Frequency of sessions	1	2	3	4	5	6	8	9	11	12	13	22	23	Number of Students	Students applied but didn't follow therapy
Counselling Centre for Students (University of Athens) **Number of students seeking help in the Centre** **Frequency of sessions for cases applied 1/1/1995 31/12/1995**															
Women	9	4	2	4	4	1	1	1	1	-	1	1	1	31	13
Men	5	1	-	-	1	-	-	-	-	1	-	-	-	8	-
Total Number of W & M	14	5	2	4	5	1	1	1	1	1	1	1	1	39	
Number of sessions	14	10	6	16	25	6	8	9	11	12	13	22	23	301	

Literature

J.Boulougouris "Phobias" Ellinika Grammata, Athens, 1992

J.Papakostas "Cognitive Psychotherapy", Athens 1994

J.L.Deffenbacher "Relaxation in vivo in the treatment of test anxiety", Behav. Ther and Exp. Psychiatr. Vol 7, PP 289-292, Pergamon Press, 1976.

The Influence of Changing Educational Sytems for Student Psychological Health

By Ildiko Takacs

Technical University of Budapest
Department of Ergonomics and Psychology

1. The changes in the Hungarian educational system

The last six years in Hungary have seen much political and economic change, which has greatly changed the system of education in my country. New educational laws for primary, secondary and higher education were instituted.

Which was this old system, and which is the new one?

The basic feature of the old system was the strict regulation. When a pupil left the primary school, he or she could choose three ways: secondary school, vocational secondary school or vocational training school.

Secondary schooling ended with exams equivalent to British G.C.S.E.s which gave opportunities to pupils to go to college or university. Vocational secondary schools provided vocational qualifications. This qualification often determined the type of higher education, because the structure of education in the vocational secondary school is different from that of the other secondary school. It meant that from this school the pupils could choose the same type of profession. e.g. from a mechanical school the pupils went to a mechanical college or university.
After vocational training school pupils with vocational qualifications were unable to enter higher education, without passing a very difficult and selective entrance exam.

Theoretically, in the last decade, the students were able to choose different courses from the other universities or colleges but it needed a lot of administrative procedures , which only the very brave students undertook. In this educational system the drop out of those starting university was very low (maximum 5%).

This educational system was the norm in the eighties.

What is the new system like?

The period of primary school can be 4, 6 or 8 years, depending on the type the secondary school. If a pupil chooses 8 years secondary school, the primary school is only 4 years, and so on. The students apply to the colleges or universities after final examination by reason of their secondary school results.

At present the medical universities have a compulsory entrance exam and the other higher institutions have an entrance exam in a specific subject, e.g. drawing, music, physical abilities. If results from the secondary school are poor, he or she can take an entrance exam to demonstrate his or her abilities for higher education. But the results of secondary school and final exams still retain their importance. Universities and colleges however have strict limits of the student entry because of economic reasons which limit the size of colleges and universities.

Intending university students can choose courses from different universities or colleges. The changed educational system offers a wide freedom of choice for students.

This transformation process of the education system has a great influence on student life.

2. The influence of the economic and social changes

Which changes have influenced student life, student psychological health?

a) The scale of values becomes unstable

Social and economic changes have created uncertainty in every level of social life. Knowing and learning the intellectual values are very important for the students. Social mobility establishes the first-generation-intellectuals, and university socialisation can give them help for this process. But the changing and losing of values does not help in this socialisation. The students are very sensitive and they react to the obscure processes and values very passionately. They have lots of

questions and are expecting a model of behaviour, good knowledge and skills to fit the market economy.

But as long as the social requirements do not provide adequate answers to their questions, it is very difficult also for the universities. In this social situation it is very difficult to define the content of these new values.

b) Threat of becoming unemployed

The unemployment of youth in Hungary is no more than the population generally. But for students, the continuation of studies can mean a temporary escape from unemployment, and a good chance of obtaining a qualification which can help them to avoid this situation. The university system changes very slowly and clumsily. This new credit system which exists now at the universities gives new ways for students to avoid being unemployed. What does it mean? The students follow new and different courses e.g. an engineering student can study management, or teacher training, or economy, or language at the same time.

c) Direct influence of the economic changes on the educational system

There were dramatic changes in the last academic year. Budgets were cut and costs rose. Budgets were cut drastically because of deficiencies of the state budget. Consequently 20% of the teaching staff in higher education was made redundant with deterioration in the quality of education. The education condition got worse.

Students have to pay tuition fees, and student grants have been greatly reduced. Hungarian higher education after the second world war had been free of charge apart from postgraduate courses.

The introduction of fees in higher education aroused considerable protest because the government did not offer any financial help for students with limited resources.

There is no system yet in Hungary which offers credit to students and there are only a few foundations which can help the students in this difficult situation.

The cost of the student books has increased 20 times compared to 8 years ago, and residential costs have increased 6 times over the last 2 years.

The economic life leaves its mark on education, and that itself means difficulties for students.

3. The change of the university educational system

As I have already said, Hungarian higher education previously had a drop-out of only 5%. In 1993 the educational system at the Technical University of Budapest was changed. The former university educational structure was strictly regulated and a bit rigid. The new-credit system is an unusual and non-traditional system in our education. With the credit system the students have to make decisions about:

-their own path of the studies to their degree,
-the order of subjects, practices and training,
-the length of study period and time-table of their studies.

The former university (and secondary school) education did not provide these possibilities, and our students have not therefore got enough appropriate skills to choose their own path. This change in the system requires such a vocational socialisation, which can help the students in this situation,

Learning to manage freedom, is a big challenge for Hungarian students at the present . Previously every step was well-defined in their former educational socialisation in secondary school and also at university. The students have not got the skill to choose. And in technical higher education - where the content of curriculum in the first five semesters is well-defined. They have to know the different routes of professional teaching for a good choice in the system of subjects, Adequate knowledge of the system is necessary if the students are to make a wise choice of university and obtain good career planning.

The career socialisation is not a well-prepared and well-organised process at the universities, because this process does not have any support from a career counselling institution, which does not exist at out university.

First year students have not been prepared for the **new learning methods.** As one of the students said "in the secondary

school, the teacher drops the knowledge into the pupil's head, now at the university the teacher throws knowledge over students". Teachers do not help them to adapt to new methods, and no institution exists where their questions can be asked. The old learning methods survive, but they do not support their study at the university, because the students do not learn continuously.

The irregular work in the academic year makes this situation more difficult, There is a lot of training, drawing, laboratory works at the technical university. The deadline of their accomplishment is usually at the end of semesters. Before the sessions they usually have difficult and urgent tasks and for this reason, they begin the sessions very tired. It is a helpless situation now for them. Furthermore 7-8% of students have extra courses (e.g. engineering and teacher training, engineering and economic courses, engineering and interpreter), and often have **8-10 exams in the same period.**

One more fact influences the adaptation and psychological health of students. It does not belong to changes in the educational system, but it is symptomatic to Hungarian education. It is the students' hostel. 60% of the students live in a students' hostel at our university. It means they have to share their room with two other people. This situation is the cause of adaptation disorder.

Leaving home, many students suffer from this fact alone. Hungarian parents normally keep the children at home. Boarding schools, do not exist. If there is secondary school in the same town where the children live, they go to this school.

The parents' education style often characterises the strict control of children's school work, after the school day. The children's internal regulation develops relatively late and their independence is only partial as parents want to share their own children's life. The educational behaviour has part-psychological, part-economic causes. Parents cannot afford to provide in their children to rent independent flats. Flat rents cost up to 7 times more than a room in a student hostel.

Lack of independence creates difficulties for students in adapting to adjust to a new environment and student role.

As I mentioned we do not have a counselling department at our university which can help student in this situation.

Efforts have been made to establish a student counselling network at our university. This time of change is a good opportunity to raise new questions about our idea of a counselling network. How can we help the students increase their educational skills? A student counselling system could help.

4. Research programme on student counselling system

In 1994 we had a research programme to establish a student counselling system. The research programme consisted of the following four aims:

1. to ask the students' and the professors' opinions of the need to establish a counselling service,
2. to review the activities of university student organisations which could join the counselling system (e.g. student associations' unions and agencies/student representatives, student office),
3. to organise training for the peer-counselling group,
4. to prepare the structure of the counselling system.

Some fragments will be presented from this programme, first of all about the students' and the professors' opinions and demands for the establishment of a counselling service.

Two hundred students took part in the programme from all 7 faculties of the university and 14 professors who understood the new educational structure.

The questionnaire for students had four topics:

1. If students had a big problem and had no help, how often did this occur, what type of problem?
2. What would be the main tasks of the student counselling service?
3. Ranking the services to be offered
4. According to students' opinion, which activities of university student organisations could join the counselling service.

Results of the questionnaire

1. 70% of students had experienced problems and did not receive help.
   23% of students did not report problems. 7% had had serious problems without help. The main problems were connected with the student life or human relationships. There were some educational problems about changing courses, exams, difficulties in different subjects. The other group of problems involved the adaptation to the university life, autonomy in life and new relationships.

2. The main tasks of the student counselling system according to student opinion were:

   -educational counselling (45% of answers)
   -legal issues and representation of students interests (8%)
   -counselling for adaptation to the university life and way of life (8%)
   -career counselling (8%)

What do the students expect from the counselling service?
First of all the service should provide: assistance to analyse those problems of student life which have never been dealt with by any student organisations.

   -give different types of advice on educational problems, the selection of subjects, the study path, development of study and exam skills,
   -provide information about study programmes abroad, fellowships, possible financial support from different foundations
   -advice on employment options included information about employers, the connection among students and employers and development of the skills in application and interview and techniques and career planning.

The service was needed to help the new students to adapt to the university life, and use student time effectively.

Lifestyle problems were seen as often connected with the academic life. The students were frustrated with the exams, and often unable to cope with the competition, burden and fear of the exams. Additional problems included leaving home, new relationships, loneliness, health problems.

How would the student counselling service work?

A)It will be a service, which can help everybody in every type of problem
In the opinions of students the university has not got an organisational structure which can help students in different problems (including disciplinary /structural rules of the university).

Students need a service where the staff have access to every aspect of university life.

B) The service will have an information base
The students should be able to get information about the educational structure, the subjects, the credit system, especially for the freshman.

C) The service would improve human relationships between staff and students
This organisation should be "student-friendly".

D) Help in solving problems in crises.
This service should give the students safety, by providing help in personal resources.

3. Ranking of offered services
   12 services were offered and the students determined the order of rank of services. The offered services are from three parts of various counselling levels:

On consultation level:
information about university educational system,
information on change course or direction and advice,
information about joining other university courses,
information about the credit system,
information on employment options for finalists, and advice,
information about studying abroad and funding.

On the psychological counselling level:
advice on learning disabilities and exam problems,
individual advice on life problems (adaptation, relationships, etc.),
careers education programme for various student groups,
participation in groups for the development of self-awareness,
skills training in application and interview techniques.

On therapy level:
individual and group psychotherapy.

4. The majority of students were familiar with the activities of university organisations, which could be part of the student counselling service. These organisation are the student unions, the student office and various associations of engineering students.
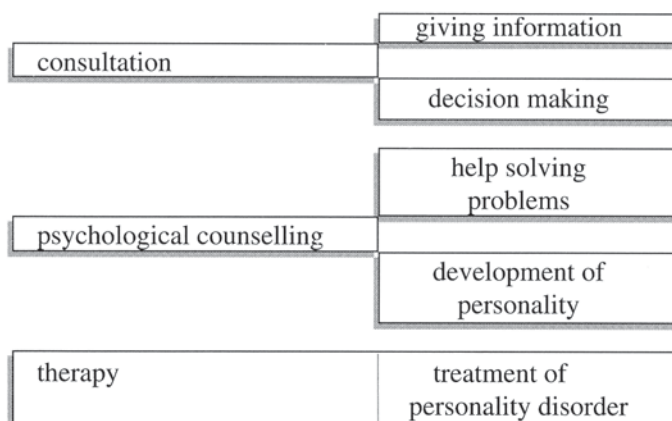
The professors' opinions

Fourteen professors were asked about the student counselling service. Each professor knew the new credit system, and the idea of an advisory system for the new educational structure. The main aim of the interview was to ask about this advisory system. Every faculty of the university has its own idea on this field. Seen as tutor, mentor, advisor, teaching staff and asked to help in every aspect of the university life.

Every professor agreed: the choice of the lecturer is a very important action. Who would be a good advisor? Those who have a good personality, empathy, who know the problems and difficulties of first year students and are acceptable to the students. These advisors are aware that the first weeks and the first term at the university can be both disorienting and exciting. The advisors need special support from the university system to inform and orient students. The professors considered that a very important activity of the counselling system is career planning. The counselling system would help the students and the teachers' life as well. This service would assist the students to achieve better results in their education and to develop their personality.

The plan of structure of the student counselling service

On the basis of the experience of this research programme the structure of the university student counselling system will be elaborated. The concept of the structure of this system is based on the idea of Wiegersma's counselling system (1976).[a]

The structure of the counselling system

consultation	giving information
	decision making
psychological counselling	help solving problems
	development of personality
therapy	treatment of personality disorder

The existing university organisations (student unions. student office), should join the system on the consultation level. Interaction between the organisations and the counselling system and the psychological counselling will be discussed and prepared in the near future.

We believe that students need to recognise that much of what concerns them is normal, rather than problematic, and that with us they will have help to find solutions - solutions they can live and work with.

Procrastination:

Just student laziness and lack of motivation or is the challenge for counsellors more complex?

Eric Depreeuw
Bart Dejonghe
Walter Van Horebeek

Student Counselling Service
University of Leuven - Belgium

As with fear of failure, procrastination can be a considerable and severe problem with extremely debilitating consequences for the student and his social environment. Nevertheless, contrary to the former dysfunction, it seems rather neglected by theoreticians and clinicians from inside and outside the area of student counselling. Recently a favourable evolution has been observed (e.g. Rothblum, E.D., Solomon, L.J. & Murakami, J., 1986, Baumeister and Scher, 1988, Kalechstein, Hocevar, Zimmer and Kalechstein, 1989, Covington, 1992, McCall, Evahn and Kratzer, 1992, Schouwenburg, 1993, 1994, Ruckert, 1994).

Just a Case: Jan Bram

During high school time Jan-Bram was a successful student, or apparently, he was a pupil without problems. He passed without failure the six years of the most difficult high school track (Latin-mathematics), while not committing much effort. Everyone expected him to succeed in the medical faculty but, the first year, he ran aground with 30% as overall result. As in Belgian universities only about half of the freshmen succeed, this was not too exceptional and he made a second attempt the year after. He was successful but only after a second trial within that year (September examination). His second year was a catastrophe: 9% in the first trial (June) and he gave up in the second (September). He came to the student counselling centre and complained about being incapable of intense effort and maintained concentration. Instead he spent a lot of time in cosy talks, daydreaming, watching television until 2 or 3 am and as a consequence he slept until noon or later. After one contact with the counsellor he decided to do his year over again, probably hoping that some 'super helping power' would resolve his problems. During that year he had regular individual counselling, focused on the interaction of personal functioning and study commitment. He was rather defensive, there was no real disclosure although the contact was not unwilling or cool. The second trial of the second year finished in a similar disaster as the first one. He was depressed and considered leaving the university although he was regarded as bright and intelligent. Repeated failures had caused too much self doubt. Psychodiagnostic tests revealed indeed his superior cognitive capacities but also inefficient and inappropriate study skills and attitudes. Probably his bad experiences in the medical faculty attended his study interest, that moment he felt more attracted by a cultural and linguistic specialisation. He seemed to be rather introvert and shy but extremely test-anxious. No further special problems could be detected. Father (teacher) and mother (employee) were divorced but although some impatience concerning his study progression grew, the relation between Jan-Bram and his parents was rather good. Anyway the parents were prepared to offer Jan-Bram new study career opportunities. An extensive test—anxiety training, a permanent procrastination counselling group and several individual interventions resulted in a first trial success in the first year, a still difficult second trial success in the second year and the third year is going on, coloured by more or less the same difficulties, although clearly reduced in severity.

Conceptualisation

Jan-Bram's transition from the high school 'culture' into the university 'culture' revealed or caused some severe study problems, leading to even worse psychosocial consequences. Seen from a student counsellor's standpoint, the main problem in the foregoing story about Jan-Bram can probably be labelled as procrastination or extreme postponing of study tasks. Screening the literature reveals that there is no generally accepted definition.

The English word procrastination derives from the Latin verb 'Procrastinare', which means 'postpone until tomorrow what one might do today' (Covington, 1992). McCall et al. (1992) give a pragmatic definition, or better a pragmatic limitation. A person belongs to the category of the procrastinators when he/she is localised one standard error under the regression line of intellectual ability and academic achievement. The advantage of this limitation is that students of all competence levels are involved and not only the extremely clever ones, as is often the case. The disadvantage is that it is too broad, being identical with under achievement and saying nothing about the mechanism leading to the discrepancy. Procrastination is often confounded with under achievement and/or demotivation and is conceptually not always differentiated from test anxiety (see Rothblum et al, 1986).

Restricting ourself to the academic context, the following aspects seem essential characteristics of the procrastination concept.

First, the student involved himself deliberately in the task or project and is reasonably well informed about the performance objectives, standards and time limits.

Second, this implies that there must be at least at a given moment in time the intention to achieve a goal (e.g. a diploma or a job) or to avoid some aversive event (e.g. a failure or unemployment).

Third, despite this intention all or some specific task behaviours, related to the preparation or to the performance itself, are postponed chronically or over a relatively long part of the task period. Mediated by some cognitive mechanisms the relevant behaviours are replaced or accompanied by more or less incompatible activities. These mechanisms are characterised as 'irrational' in relation to the task related intention (Silver & Sabini, 1981). The task irrelevant occupations can be disguised by an appearance of task relevance (e.g. spending too much time on less relevant and/or more attractive components) or they can be totally clear by their task irrelevant character. In the latter case, behaviour can be manifest or internal cognitive (e.g. reading the newspaper or engaging in some leisure activities versus dreaming or worrying).

Next procrastination aspect implies that sometimes severe complications follow the procrastination directly or indirectly. Baumeister and Scher (1988) use the notion 'self destructive consequences', Covington (1992) mentions procrastination as 'one of the most universal self-handicapping strategies' (p. 85). Examples of direct negative consequences vary from disturbances in time management immediately before the performance (too much in too little time), over a considerable decline in performance quality or quantity, to repeated failures. Indirect complications can be loss of material or psychosocial benefits, loss of self esteem, health problems, depression, conflicts with the partner, parents or other relevant people. Most frequently these negative consequences occur within a mid- or long-term period after the procrastination. The procrastinating subject is 'rationally' or theoretically informed about the possible, even probable negative consequences directly related to the non-accomplishment of the task or its preparation.

The fifth criterium will be described only in general terms. From the learning psychological standpoint we hypothesize that the procrastinator obtains some considerable advantage (s) by using this strategy. Although some authors stress the catastrophic or self -handicapping consequences, punctual and sometimes meticulous analysis makes obvious that procrastination is reinforced. The difference between long term and short term consequences is useful in this context (a parallel with addiction disorders can hardly be denied). The postponing strategy will be reinforced by positive effects related to the study strategy (success after procrastination assures a reputation for brilliance - Covington, 1992) or to the incompatible activities. On the other hand the avoidance of aversive ingredients, e.g. consequences of hard effort reinforces the discussed strategy as well (e.g. boring subject; fatigue; a failure after hard effort gives more shame, etc.).

The last condition relates to the differential diagnosis or the appearance of accompanying problems. It is more the case than not that more or less severe psychosocial and/or study problems can be diagnosed in procrastinating students. The student counsellor must carefully try to find out whether the procrastination problem is a core cause or a consequence of the accompanying problems. An alternative to this dichotomy is that a vicious circle has been established in which the components are related to each other but also independent (e.g. procrastination —> depression —> procrastination). A relevant question for the future is whether the diagnosis of procrastination must be limited to the primary postponing problem (causing the other problems or an independent co-problem) or should also be applied when it is a consequence of other clearly defined causing factors (e.g. illness, circumstances beyond one's control).

Hypothetical Model

Until now no well defined syndrome has been described, nor a dominant single cause detected. However important effort is spent in the student counselling field. Ruckert (1994) discusses some fascinating hypotheses. In Leuven University (Belgium) recently the co-operation between the Student Counselling Service and the Research Centre of Motivation Psychology and Time Perspective resulted in a still preliminary but highly interesting analysis of the procrastination phenomenon. The starting point was a descriptive achievement process model based on Heckhausen's motivation theory (Depreeuw, De Neve & Bracke, 1988, Depreeuw, 1989). The components of this model are: Value, Expectancy, Goal setting, Preparation, Achievement, Self evaluation and Causal attribution. An extensive exploration of scientific literature and clinical experience with extremely procrastinating students enabled us to compose a questionnaire with 182 items. This has been filled out by about 250 freshmen of the Leuven University and after a preliminary factor analysis a five factor solution seemed appropriate (see Scheme 1).

Restricting ourself to the academic context, the following aspects seem essential characteristics of the procrastination concept.

First, the student involved himself deliberately in the task or project and is reasonably well informed about the performance objectives, standards and time limits.

Second, this implies that there must be at least at a given moment in time the intention to achieve a goal (e.g. a diploma or a job) or to avoid some aversive event (e.g. a failure or unemployment).

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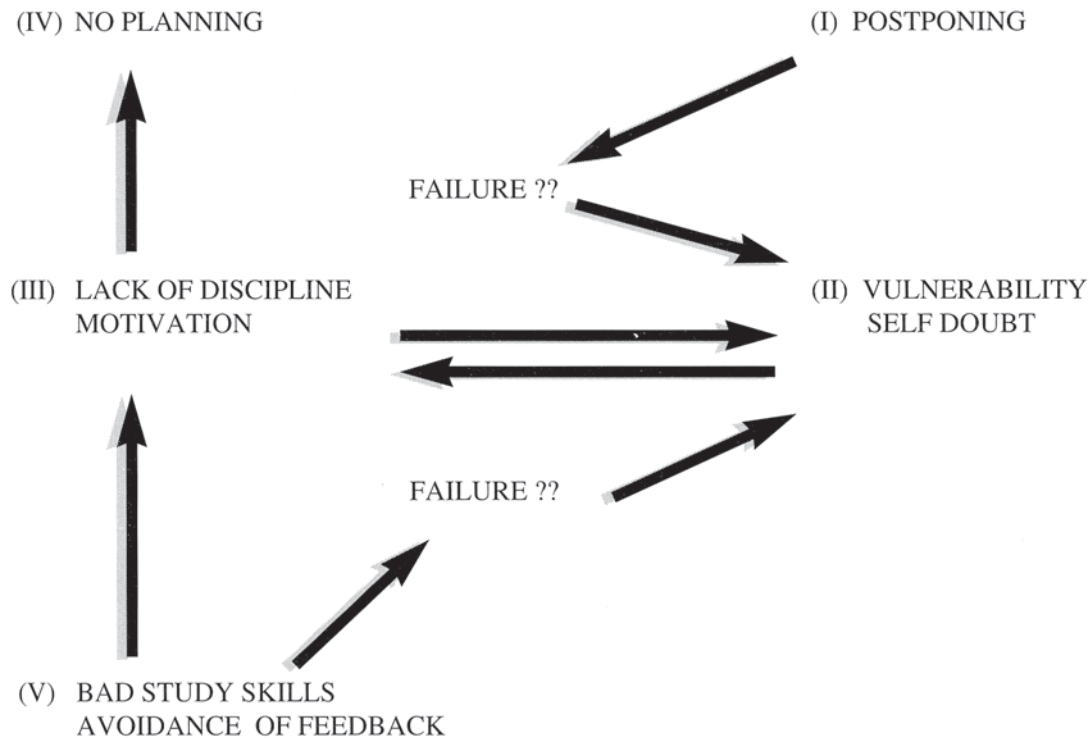
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Scheme 1
HYPOTHETICAL MODEL BASED ON RESULTS OF FACTORANALYSIS
(182 items)

(IV) NO PLANNING   (I) POSTPONING

FAILURE ??

(III) LACK OF DISCIPLINE   (II) VULNERABILITY
MOTIVATION   SELF DOUBT

FAILURE ??

(V) BAD STUDY SKILLS
AVOIDANCE OF FEEDBACK

The first factor is labelled Postponing or Procrastination strictly limited (items with highest factor load: starting study later than planned and study less hours than necessary). The second factor is characterised by some psychological vulnerability (items related to anxiety, depression and self doubt). Thirdly we find a factor related to (lack of) discipline and achievement motivation (item: the more difficult the task, the more you need good planning; I like to work hard). The fourth factor indicates the students attitude towards planning and work organisation (item: organising your work is useless; planning gives me a feeling of suffocation). Finally a factor concerning study skills emerged (items: deep versus superficial level of studying). In Scheme 1 we put these five factors in a hypothetical model. Probably there is a disposition of conscience and stick-to-itiveness, familiar to achievement motivation. Lack of discipline and a weak study motivation result in an aversion against planning and work organisation which leads to frequent postponing of what has to be done. Another consequence of this avoidant disposition is the application of superficial study skills. Probably frequent postponing and inappropriate study skills are related to a higher probability of failures. The latter and a deficient level of the motivational disposition can have a reciprocal interaction with psychological vulnerability, manifested by anxiety, depression and self doubt. Further research has to be carried out in order to confirm this hypothetical model.

Prevalence

Depending on the concept, the cut-off criterium, the assessment instrument and the population the percentages of procrastinating students vary from 95% of college students (Ellis & Knaus, 1977) to 10 % (Depreeuw, De Neve & Bracke, 1988). Rothblum et al. (1986, arrive at 40%, combining procrastination with test anxiety. Kalechstein et al. (1989) take as criterium a positive answer to half or more of the items of the Test Procrastination Questionnaire and label 33 % of 70 college students procrastinators. Taking one standard error under the regression line between intellectual ability and grade point average McCall et al. (1992) by definition have 16% procrastination. Depreeuw et al. (1988) find 25%, respectively 10% procrastinators in a large sample of senior students studying 8, respectively 14 or more hours a week less than they believed they should do. For the sample as a whole the mean difference between the estimated week total of study hours and the subjective standard was 3 hours in short.

Causing Factors

Depreeuw, Lens and Van Horebeek (1995) use a motivation psychology approach to untangle the problem at hand. Success in academic achievement is mostly dependent on the delay of immediate reinforcement in non task activities, in favour of long term goals. This attitude is a result of child rearing mechanisms and therefore a result of learning processes. In this general context their research data suggest that the procrastination/effort balance seems more sensitive to the parental child-rearing styles for girls than for boys. Girls' effort is positively related to parental support and positive feedback. A negative correlation can be observed between girls' effort and parental negative feedback, restriction or control and especially inconsistency. For the boys only a positive correlation has been found with support (0.01 level) and with positive reinforcement (0.05 level) and a negative one with inconsistency (0.001 level).

A second general factor in the genesis and/or perseverance of procrastination is related to the effect of study results in the development of a vicious circle. McCall et al. (1992) observed that the negative influence of bad academic grades is more important than the underachievement as such. Depreeuw (1992) found significant differences between procrastinating (passive) and non procrastinating (active) test anxious students, the former being more depressed and more involved in family conflicts.

Concerning the more specific mechanisms in the genesis of procrastination until now little significant research has been carried out. However clinical practice leads to some fruitful hypotheses, needing scientific confirmation.

Flett, Blankstein and Martin (1995) hypthesize that in general procrastinating students had insecure attachment with their parents. Research data reveal that procrastination is associated with both an avoidant attachment style and an anxious/ambivalent attachment style. In the same line Ruckert (1994) seems to find overwhelming clinical evidence for the following mechanism. Procrastination has the function of avoiding the non-resolved conflict between the need for individuality/independence and guilt feelings about breaking out the primary family. Ego weakness leads the procrastinator to counter dependence, made manifest by refusing to take his role-relevant behaviour.

In our Counselling Service regularly we observe a relation between procrastination and the absence of adequate challenges in the previous school history. In a major part of these cases this is a consequence of the (normal or low) school level on one hand and an abundant intellectual ability or a very low level of aspiration on the other. Another relation can be hypothesized in the case of some children growing up under extremely authoritarian and demanding pressure of their parents. This can cause an approach-avoidance conflict: achievement is rationally seen by the child as an important instrument for self-development but implies the parents' victory in the long standing fight for power and control. A third hypothesis can be that a long history of parental neglection of the child's daily task behaviours, whether or not combined with an explicit achievement oriented family culture, can create indifference by lack of an adequate reinforcement history. Fourthly, an unstructured, non-demanding parental style brings the child to a low commitment level. In some families a good atmosphere and relational warmth may not be troubled by negative feelings about under achievement and bad results (as consequence of procrastination). Finally, some children develop a Low Frustration Tolerance (LFT) as a consequence of a continuous over-indulgence or early and severe psychological and/or physical damage.

Some Characteristics

Research has revealed several distinctive characteristics of procrastinators in comparison with non-procrastinators (Rothblum et al., 1986, Depreeuw et al., 1988, Kalechstein et al., 1989, Depreeuw & De Neve, 1992, McCall et al., 1992, Schouwenburg, 1993, 1994, Senecal, Koestner and Vallerand, 1994, Flett, Blankstein & Martin, 1995). Procrastinators score lower on the trait persistence, 'Stick-to-itiveness' or conscientiousness; they tend to have a lower GPA and a considerable arrearage in their career; they have a lower self esteem, a higher level of test anxiety, a worse somatic condition and a higher medical drug intake; they are socially more isolated, have lower social skills and more family conflicts; their apathy and depression are higher; procrastination is found more frequently in lower SES-samples and also more among boys than among girls.

Most underachievers, especially those with medium and high ability and those with serious problems (two grade levels lower) do not catch up with what is expected (follow up after 13 years) (McCall et al., 1992).

Treatment

Clinical and research outcome data are not encouraging. Successes are reported more frequently in unreliable or vaguely described research.

Success seems most convincing when treatment packages involve parents and teachers and are embedded in the educational environment. When grade point average is the target criterium generally failures are the rule. These findings lead McCall et al. (1992) to the concluding advice to parents and teachers: 'Broaden your value system, adjust your expectations and accept your children's skills for whatever they are' (p. 150).

The following discussion on treatment of procrastination aims to stimulate the analysis, technical refinement and adequate outcome research, rather than to provide a 'cash and carry package'.

* Motivational interview *

In line with the strategies developed by Miller (1983) and Prochaska and Diclemente (1988) for the treatment of addicted clients we recommend a prudent start of treatment. Often procrastinating students (as is the case with addicted people) only very recently but often still ambiguously admit to have a problem that is severe enough to ask for help. The inviting but more or less waiting strategy at least helps to avoid two pitfalls. Since resolving the procrastination problem is a hard way to go (cf. studying 1800 hours a year instead of 900 makes a big difference in daily life) the student has to be strongly motivated. This has to be checked because with a weak motivation the counsellor is wasting his time, the student quickly will experience the thousand and first failure of his career. Sometimes a paradoxical strategy can be helpful to make explicit the students' balance between subjectively anticipated advantages and disadvantages of the aimed change. Another pitfall is that the counsellor, after stressing too much the importance of effort and good school results, automatically will be associated by the student with important demanding, authoritarian persons with whom he had so many overt or covert conflicts in his learning history. The counsellor will, without knowing, be fought as the other authorities were in the past and the chances for a successful treatment will decline.

* Applied behavioural analysis *

Behaviour modification has an effective strategy of analysing the clients problems on the base of learning psychological insight. The core of this analysis is the S-R-C-model (Stimulus - Reaction - Consequence), implying that each concrete behavioural chain is accomplished in a signifying context and is followed by a complex mixture of positive and negative consequences, reinforcing or weakening (punishing) these behaviours. An example of an applied behavioural analysis of procrastination accompanied by task irrelevant and task incompatible behaviour is presented in Scheme 2.

Scheme 2
APPLIED BEHAVIOURAL ANALYSIS OF PROCRASTINATION: COMPETITION WITH TASK IRRELEVANT BEHAVIOUR

ANTECEDENT TASK SITUATION		ATS
TASK RELEVANT BEHAVIOUR		TRB
TASK IRRELEVANT BEHAVIOUR		TIB
CONSEQUENCES	C - Short Run	-CSR
	Long Run	CLR

TASK RELEVANT BEHAVIOUR

ATS	TRB	+ CSR —-	-CLR-
Study desk	Read	Aversive	Failure
College notes	Summarize	Effort/ fatigue Etc	
Text book	Intensity and	Anxiety	
	concentration	Loneliness	

TASK IRRELEVANT BEHAVIOUR

	TIB	+CSR +++	+ CLR-
Strip cartoon	Reading	Fun	Failure
'Dirty'room	Cleaning	Clean room	Bad grade
Friend('s)	Visiting	Not alone	Arrearages
Financial short	Paid job	Luxury goods	Conflicts

Functional significance ◄──────────── Reinforcement of R ◄───────
of ATS

CONFLICT ◄═══════

Arousal has to be reduced

⇓

* Probability success/failure
* Weakening C—
* Attention

A global analysis as in Scheme 2 or an individualised contextual process based on the client's self observation and self report data must include an accurate description of the internal and external antecedents of the procrastination, the concrete behaviours and their respective hypothesized reinforcing and punishing consequences. Such analyses are congruent with and give inspiration for treatment in general and for self control treatment strategies in particular (Thoresen and Mahoney, 1974; Van Rillaer, 1992).

* Group counselling *

After the screening by a student psychologist, with particular attention paid to the principles of motivational interviewing, and after the behavioural analysis the student can start treatment. Participants combining procrastination with test anxiety generally first receive an extensive training programme focused on the anxiety reduction (Depreeuw, 1992; Depreeuw & De Neve, 1992). Afterwards, when necessary, hard procrastinators can continue in the specific procrastination programme. At the Student Counselling Service of the University of Leuven a group procrastination treatment programme runs under the non ego-threatening labels of 'Time Management' or 'Training in Study Planning'. Sessions are offered once a week during the academic year, as well as during the examination period. The mean session time is one hour. Groups are open which means that under certain conditions students can enter or leave at any moment. The group size varies from four to eight students.

Depending on the phase of the training and the particular procrastination mechanisms of the participants the therapist has the choice among several treatment techniques and strategies. Time management techniques have a core position and are concretely described in a student manual. Each meeting the participants are stimulated to propose realistic, clear and concrete objectives concerning the amount of study hours and curriculum tasks for the coming week (What? How much? How? questions related to the 'Reaction component' in the S-R-C model). Although it is repeatedly stressed that these objectives fall under the students control and that he can decide about them on a deliberate base, sometimes they are challenged by the group or by the student psychologist (e.g. too ambitious , as an unrealistic compensation for failures in the past, or too easy going, as a part of the procrastination). After a week each participant gives personal feedback in relation to the past performance. A curve with the weekly study time totals gives a survey of the evolution over the academic year and indicates whether or not the problem is on the way to 'cure' or amelioration.

During the same time a cumulative amount of lost study hours can be made in order to stress the global jeopardizing impact of the procrastination on the preparation of the examination (C-component). The latter technique aims to confront with reality and sometimes it works as an eye opener since procrastinating students tend to repress the long-term consequences of their strategy ('next week I'll do better!').

Although the therapist sees to it that the atmosphere in the group remains safe enough to expose personal weaknesses and to discuss failures, each student must be prompted to face the problems, as soon as possible and by preference at a sufficient time distance before the exams. Undeniably the social control by group members can be canalized in order to prevent the counsellors' role becomes too demanding. As highlighted earlier in this paper the latter relation between student and counsellor could enhance a negative transference (in the psychodynamic meaning of the term). Ruckert (1994) stimulates students to communicate the procrastination problem overtly with the parents in order to enhance reality testing instead of living in obscure phantasies.

Stimulus control of study behaviour or procrastination is also a crucial part of therapy (S-component): where to study (room, library, faculty building, at home; at the study desk or in bed)? alone or with whom? the organisation of the study desk must be sober or enhance attractiveness? It is our experience that looking for a 'study buddy' helps a lot. When a procrastinator co-ordinates his study behaviour with a non procrastinator, spontaneously realistic criteria are set but often a system of (mutual) support can be established. Sometimes procrastinators co-operate with each other.

More and more cognitive restructuring techniques are applied: exploration of automatic thoughts leading to delay is facilitated and alternative effort oriented cognitions are worked out. For example: 'I couldn't study because I had to go shopping with my mother' can be analysed as a rather misleading statement (was the 'shopping must' a more urgent obligation than the 'study must'?). Another example concerns the Low Frustration Tolerance: when I feel tired I cannot study. Ruckert (1994) combines these behavioural cognitive strategies with a psychodynamic approach.

Finally, on the C-component of the model, (deliberate) self management of positive and negative consequences of goal achievement, respectively procrastination, plays an important role. Since many procrastinating students have plenty of unconditional attractive activities, without reaching their study goals, in practice often this turns out in applying negative consequences (e.g. not to attend a planned social or sport activity when the day or week goals have not been reached).

* Outcome *

Until now, methodological and deontological barriers prohibit us from carrying out well founded outcome research. Our clinical impression and the participants' self report data suggest generally an amelioration in the total study time in comparison with the foregoing period. As regards to the GPA results the beneficial influence of our programme seems unclear and rather unpredictable. Some participants develop a more dynamic and autonomous style after some time. Other participants, especially over a longer period of time (e.g. two academic
years) do not succeed in overcoming their old habits. Often long term effects are weak and the students become demotivated and depressed by their frequent fall back and relapses.

Conclusions

The high prevalence in the academic environment, the resistance against current educational interventions and, particularly, the severe psychosocial consequences urge student counsellors to intensify the study of the procrastination dysfunction. Most important is the development of more extensive theoretical and clinical explorations and experiments. However conceptual refinement and a more accurate analysis of the genesis are basic conditions for optimalisation of the research efforts. Combined treatment interventions seem most appropriate although, until now, far from satisfying. An individual or group psychotherapy has to be carried out together with adaptations in the educational environment (frequent interaction with teacher, structured and concrete task goals, positive reinforcement of relevant task behaviour, short term confrontation with negative consequences of procrastinating behaviour, etc.).

Maybe the students' laziness is a part of the game but, along with other problems, procrastination confronts expert student counsellors with a huge challenge. Let us hope they will not procrastinate ...

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Short-Term Dynamic Group Psychotherapy for University Students

Stig Poulsen, Trine Fredtoft, Mette Bauer and Marianne Malm (clinical psychologists at the Danish student counselling services):

> If, in the fantasy of early growth, there is contained death, then at adolescence there is contained murder...
> In the unconscious fantasy, growing up is inherently an aggressive act (Winnicott 1971, p.169)

Anna is 24 years old. She is studying at the university and working on her final thesis. She has been doing this for a long time. A very long time. In fact she is stuck. All of the time, she thinks of her thesis, and what she ought to be doing. Still, when she sits down at her desk, her head is completely empty. No ideas emerge. Her desk seems to have become a dangerous place to her. So often she will stay in bed, reading all kind of literature - except for the books she is supposed to read. And the desk will be standing in the middle of the room as a dangerous obstacle.

When her parents call her to hear how she is doing - and they will call her very often indeed - she tells them how hard she is working. Every weekend she will visit them. Anna tells herself that she needs to be with the family to get some courage to go on with her work. But when she is with the parents, she feels terribly irritated and this gives her a very bad conscience. Then she tells her parents how much she needs them.

When she sits at her desk on Monday morning, she has no courage at all. So the same pattern will continue for another week.

Obviously, at one and the same time Anna is having troubles with her studying *and* is entangled in a strongly dependent relation to her parents. Furthermore the case example suggests a connection between these two problem areas, which otherwise might be treated separately.

Study related problems and dependency

At the counselling services where we are working, the typical presenting problems are difficulties related to studying. We have in the past operated with two different types of counselling modalities: One for students, who seemed generally well adjusted except for the study problem, and one for students, whose study problems had to be treated as symptoms of more deep rooted personal problems. The students with clear-cut study problems, have typically been offered relatively structured counselling, specifically aimed at alleviating their symptoms. For example we have through many years offered group-counselling for students with examination anxiety, using techniques similar to those used in cognitive behaviour therapy. Similarly students with writers' block or severe procrastination with regard to thesis composition had been instructed in techniques intended to facilitate the writing process. On the other hand students, whose problems have been seen as covering more life areas, have been offered individual psychodynamic therapy or long term group-analytic psychotherapy.

Through the years we have been increasingly aware of the fact that many students with study problems apparently find it very difficult to separate themselves from their parents. As a consequence of this the student counselling services in Copenhagen have for some years now been offering brief psychodynamic group therapy, focusing on themes within the overall spectrum of *study related problems and dependency*. In the earliest of these groups the common theme was simply *dependency*. Later on we have conducted groups around problems like *performance anxiety* or *graduation anxiety*. The experiences we will describe throughout this paper are primarily derived from these groups.

Dependency

Dependency as a phenomenon is manifest on many levels with the students, we are referring to. Most of these students are women, which typically on the manifest level are frequently in touch with one or both of their parents. For example it is not unusual within this group of clients to have daily telephone conversations with the parents. At the same time as a rule the dependency seems to go both ways. In other words the parents are apparently just as dependent on the close contact to the adult child as the children are to their parents. Often the student seems to function as a caretaker of the emotional stability between the parents and/or between the parents and the siblings. Often the clients have grown up in families, where one of the parents has suffered form serious psychic or somatic ailments, sometimes a parent has died, while the child was still living at home. For this particular group of students with difficulties regarding their abilities to fulfil their academic potential, it is nevertheless still more common to be entangled in a subtle emotional pressure from the parents.

For instance we often encounter students, whose parents on one hand are very ambitious on the behalf of their daughter, while at the same time finding it very hard to tolerate the daughters striving for autonomy. These parents may call or pay unannounced visits at all times, often questioning study progress. Nevertheless they may at the time be helpful and caring to a degree, which makes the student feel indebted to them and therefore unable to make autonomous decisions about her life.

It is hardly a coincidence that almost all of the clients in the groups are older sisters or only children. The responsibilities for the younger siblings - and in these cases also for the parents - will typically rest heavily on the shoulders of elder sisters. Only children will for their parts be more exposed to and consequently more sensitive to the moods and needs of the parents than children with siblings. At the same time the firstborn child may find it harder to experiment with different ways of being in the world and even harder to fail during such experiments. This can be understood as a consequence of the typically more pronounced insecurity and narcissistic vulnerability of the parents concerning the firstborn, which again makes for lesser tolerance regarding the inevitable failures and disappointments met in contact with the child.

As a whole, when being with these clients, one is often reminded of Winnicott's description of the false self (1965). As a rule they are well adjusted to the point of being compliant, and at first glance many of these women appear to be exceedingly competent and well functioning. However, this impeccable surface will soon be revealed to act as a cover for strong inferiority feelings, often accompanied by a thorough lack of contact with own feelings and needs. Alice Miller (1979 a&b) has amongst others stressed, how an upbringing with parents, who will cathect the child narcissistically for the purpose of regulating their own narcissistic equilibrium, stimulates the child in developing an almost uncanny ability to sense the needs of the *parents* and try to fulfil these rather than its own.

We have repeatedly observed, how our clients as a rule have experienced a more or less subtle suppression of their autonomous strives and expressions of own needs to a degree where such impulses will inevitably be accompanied by feelings of guilt or shame. Mahler claims (Mahler et al 1975), that the parents' abilities to both tolerate the increasing separation of the child while at the same time be available to the child, when it seeks contact, have a decisive impact on the development of object constancy, that is the ability to acknowledge that "good" and "bad" parts of the parent are properties of the *same* object. This means accordingly, that the self is experienced as a whole, containing "good" as well as "bad" parts. Although it may be hazardous to link phenomena seen with adult clients to an etiology in the earliest phases of life, it is interesting to consider the fact, that our clients, whose parents have more or less actively been acting as obstacles to their individuation process, very often present pronounced difficulties in integrating split object and self representations. The clients are dominated by an "all -or -nothing"- philosophy, meaning that they tend to cycle between idealisation and devaluation of their surroundings and first of all of aspects of their selves. Later on in this presentation we will try to illustrate how this is exceedingly characteristic of their evaluation of their own academic performance. On one hand their actual contribution is as a rule deprecated, because it does not live up to their own impossibly perfectionist demands. On the other hand many of the clients indulge in phantasies of having extraordinary academic potential.

We must stress, that although judging from this description, one might consider these clients in terms of a borderline or narcissistic disturbance, their psychopathology only rarely seems to be of a more severe nature. We are dealing with women whose lives are typically characterised by relative stability, meaning amongst other things that most of them eventually do graduate, albeit suffering great agonies along the way. Therefore, we have chosen to understand the common problems related to separation from the parents as the *developmental* crises of otherwise resourceful persons. In this way it seems meaningful to believe, that relatively short-term group therapy can help the client resume a line of development, which has been disrupted due to the family's difficulties handling separation.

Study related problems

For the students attending our groups, their parents attitude towards their study is of utmost importance. Many have grown up in homes where the child's school achievements have been scrutinised closely and, where the child has felt that the parents recognition of her as a person has been directly proportional to the degree of success in school. We have noticed, that such a background is very commonly seen with those students in our groups, who suffer from examination anxiety. These students typically make totally unrealistic demands on the results of the examination and often fear, that the examiner will be malignant stend exceedingly critical towards them. As a result the students often block completely already during the preparation for the exams and therefore abstain from trying to pass the exam because they (sometimes quite realistically) do not feel sufficiently prepared. Those who actually make it to the examination will often feel so nervous that they lead themselves to believe they cannot remember anything relevant to the test.

A problem, which may be even more common for the women in our groups than examination anxiety, is difficulty in composing and finishing theses. It should not be all that surprising that one regularly sees a connection between this

problem and difficulties around separation. During her course at the university the student will ever more frequently have to meet demands for independent work where the decisions about the composition of the given thesis have to be made by the student herself, and, where the criteria for the judging of the quality of the product may seem obscure. It is evident, that such a task will provoke anxiety in a person, for whom independence as such leads to anxiousness. Because the essential demand, when working with these theses, is to make *independent* decisions about the composition and to judge for oneself, when the written product is satisfactory.

In the young women from our therapy groups, the challenge of having to commence the academic work every day when home from the university will evoke intense displeasure and often activates regressive needs for TV-watching, easily-read crime novels etc. We must of course acknowledge that almost everybody will be acquainted with these reactions but for the women in our groups the blocks seem more insurmountable and the guilt and shame feels correspondingly more intense. One might say with D.W.Winnicott (1958), that these students to a certain degree seem to lack "the capacity to be alone". All too rarely is the academic work felt as a pleasing, creative activity. More often the encounter with the unstructured and loosely defined demands of this thesis will evoke a feeling of confusion bordering on disintegration. The thesis may be experienced as an engulfing void to be avoided by all means. Concurrently, as with the examination anxiety extreme demands for perfection will often arise, leading to the experience that only a unique result will be acceptable, otherwise all effort will be in vain.

Following Winnicott's thinking about playing and creativity (1971) the therapeutic goal for these women may be seen as the development of a "play area" where tentative ideas and drafts may be tried out, alone (in a dialogue with more benign inner objects) as well as together with fellow students and teachers. A well-functioning therapy group offers the participants the possibility of experimenting with challenging the false self, which is so dominant for most of the students we are describing here. In the group one may show sides of oneself, normally be kept hidden, and express feelings and needs, eventually to the formulation of autonomous attitudes. How to conduct the groups in order to facilitate this development is the theme of the next part of the presentation.

Technical aspects of the group work

The setting

We are working within a general model with a fifteen-session group of students that meets for 90 minutes once a week.

The groups consist of six or eight female clients and two therapists, if possible of opposite gender. Important to the whole setting is that the clients share common traits on several parameters: they are of similar age, thereby the transitional difficulties typical of young adulthood, same gender, and all are students. At the same time, the clients must be able to identify themselves and their complaints with a focal theme, initially formulated by the therapists. The specific wording of this theme has to cover the different dimensions of the students' problems. As stated above we are dealing with, for example, procrastination, fear of graduating, extreme involvement in the needs and demands of the family instead of involvement in their own grown-up life, tendencies to switch between depressive and omnipotent phantasies about studying, difficulties with dependency and search for autonomy, extreme perfectionistic inner demands that totally paralyse the student. To the extent that some of these problems seem to be shared by the group members, the therapists will tell the group, that these issues are troublesome for most of the women in the group and that the purpose of the group is to try work with exactly these problems.

The exclusion criteria of the group seemingly contributes to the homogeneity of the group as well. We do not do any kind of psychological testing on the clients. In the selection of group members however, both therapists assess if the clients have the necessary ego-strength to tolerate the anxiety that will arise during the therapeutic process. Additional to this, we are concerned about the ability to engage and disengage in interpersonal relations without collapsing. The ability for self-reflection and to form relations with others is equally important. This means that we exclude clients with personality disorders, and clients with any kind of psychosis as well as clients suffering from severe depression, because these will not be able to establish relations within a short-term frame. Severely narcissistic clients are excluded, due to their difficulties in sharing the therapists and accepting the time limit. Also, clients with various kinds of addictive problems and severe character-pathology are excluded.

In our experience, the homogeneity of the client group combined with the time limits and the sharing of a focal theme contributes to rapid development of group coherency and group identity formation (cf Goldberg et al 1983). In this way many of the initial stages known from traditional slow open analytic groups, where mutual trust has to be built up over a period of perhaps many months, seems to be done with within to or three sessions in these groups (cf Poey 1985).

The therapeutic approach

The inclusion criteria, the common focus and the time limit open for what we may call a *modified group analytical approach.*

Time-limited focal therapy

When working within this modified group analytic framework the therapists need to have realistic objectives, when selecting the focal theme. Grand ambitions of curing and working through all important themes with the clients must of course be given up. Paradoxically, this might contribute a feeling of hope and relief to the therapists. We have to accept that we do not offer any cure or comprehensive solution. What we do offer is a safe room for broadened understanding and exploration of the conflicts connecting the inner world of the clients with their outside world.

The focus and the time limit make it necessary for the therapists to be more active and less regressively provoking than usually when conducting a traditional analytic group approach.

The group sets off knowing that within four months this will stop. This opens for speeding up the process of revealing therapeutic material and at the same time delivers some kind of security, as the group members do not need to fear to become swallowed by the therapists or the group, knowing all along, that the group will eventually end. This is especially important, when the material is about separation, individuation and dependency, because these themes might provoke anxieties. At the same time, it is important that the clients do have time to get in contact with feelings of dependency. This is made possible by the fact, that all the clients share vital personality traits and behavioural patterns, exactly with regard to the reactions towards dependency and separation.

One may say the overall therapeutic technique exploits the fact that the clients, as young adults, are in a state of rebellion with time limits. The setting of well-defined time limits will provoke and enable them to confront their unconscious and infantile notion of time as endless, combined with phantasies of omnipotence and unlimited gratification. It is our experience, that especially students with problems of dependency, procrastination and so on tend to be trapped in their notion of time. They apparently have great difficulties in coping with the differences between an infantile notion of time as endless and a more adult notion of time as framed and limited. On one hand examinations and studies pose time limits upon their everyday life. On the other hand, the life-landscape of many students will be that of an extended adolescence without the obligation of children and fixed working hours. This fact may be conducive to more or less unconscious phantasies about postponing adulthood. In this sense, the general life conditions of the students invite to consider closely the whole notion of time-frames in the therapeutic setting when working with young adults (cf. Mann 1973, Adamo 1991).

The listening process

Although the sessions often take off from less focused, free floating discussion, the therapists will rather quickly by their *selective attention* direct the groups attention to remarks related to the common focus. This means that we, through our intervention, deliberately enhance the attention on the focal theme by sticking to the focus. We try to omit interpretation of material with little or no relevance to the theme. Furthermore, we sometimes carefully invite the clients to reveal material known by the therapists and not yet by the group, not by mentioning it, but by proposing the possibility, that a mentioned theme is not only relevant for the speaker, but for others as well.

> Lisa expressed problems concerning an over involved mother and the difficulties, guilt and rage connected with efforts to maintain state of separateness from her. She asks the group "How often do you have to visit your parents? My mother phones every Sunday morning and wakes me up at eight. What can I say to her?" Julia, who has been rather quiet and seemingly less involved in the group process until now, all of a sudden gets very involved in Lisa's problem, asking her how she usually solves it, and how she feels when the phone rings. The therapists know, that Julia's father very often phones her, and asks her what she and her boyfriend are doing (sic), and when (not if) they will come at the weekend. They therefore point out her interest in Lisa's problems and ask her how they might relate to her own.

These kinds of interventions may of course result in a blank denial. Nevertheless we have very often experienced, that the client found the therapists remark helpful in her efforts to take up more room in the group. While the therapists listen with an evenly hovering, but selective attention, a lot of the focusing work is done by the group itself. When trusting the group and giving the word free, we usually find, that whatever seemingly peripheral material comes up, it will consciously or unconsciously be connected to or referring to the main focus. This means that we encourage a free floating discussion, giving space to pauses and listening to what happens in the group. In this respect we work in accordance with the principles of group-analytic therapy developed by S.H. Foulkes (1964).

Here and now

The focus is kept within the framework of here and now. This does not mean that the clients are only allowed to talk about here and now events or problems. On the opposite, we experience a diverse flow of information and perspectives, often related to experiences from the past or from the clients relationships outside of the group. However, the therapists see it as their task to link the material related to matters from the world outside, to themes and emotions which are presently active in the group. When this relation is established, the therapists can direct the clients' attention to the connections between what is happening in the here-and-now of the group and the clients' ways of relating in the external world - and to the connections with significant aspects of the clients' life history, that have been told during the group sessions. In this way, we can underline how certain emotional responses in the group may correspond to other responses and ways of reaction in their lives outside the group.

> In a group Louise was talking about her isolation, and how she felt she had only her mother to turn to - no other friends. The mother was a lonely widow and was extremely idealised by her daughter. To the group the mother seemed incredibly demanding, interfering with her studying in any thinkable way. The group asked Louise, why she thought she could not make other social contacts, a question that astonished her a lot. Then some of the group members began to tell Louise, that they saw her as a very sociable person. Even before they had finished talking, she interrupted them. This happened several times, and the therapists pointed out the situation, asking what was happening. Louise did not have any idea that she was interrupting, and denied it at first. Nevertheless the group insisted that they had all experienced this and what more was, that she was interrupting a positive feedback even before hearing it. They she said "Now I know, I am always too scared, that the estimations or reactions on me will be negative or unbearable, so I always try to stop or control them in time". This was linked to her academic performance and uncreative way of studying, as well as to her interpersonal relations outside the group and her feelings of isolation. When the therapists asked her: "Who is deserting who or who is sacking who?" Louise answered quickly: "The guys are sacking me, and I am sacking the rest!" She now began to see her isolation and her habits of studying in a new way, this is, as a result of her perpetual efforts to control or avoid expected negative criticism. The notion: "Who is sacking who?" stayed as a metaphor in the group, and was humorously offered to other members in similar situations.

Analysing the transference

In a group, transference can occur between the clients and the therapist, between the client and selected other clients or to the group as a whole. The transference is of natural interest for the therapists, because the past is always presented in the present, especially the inner representations of their parents. Of equal interest are the countertransference phenomena, since these give valuable information about unconscious mechanisms between the group members. This is understandable, when we remember that the therapists may be seen as group members as well.

In a short-term group, the time limit as well as the activity of the therapists and the holding on to the focus acts to inhibit the development of a fully-fledged transference neurosis. Nevertheless transference phenomena are abundant, with the transference to the whole group rather often dominated by feelings of frustration and insecurity regarding the time limit and the fact that you do not receive quick and operational advices.

> A group was discretely beginning to express anger and frustration towards the time-limit: "We do not have much time, why don't we get some proper advice about what to do and where to being? We thought you were the experts, why do you hold in all back?" This was succeeded by a lot of peer advice giving, e.g. "If you fell uneasy visiting friends, why don't you make a big party and invite them instead? If your boyfriend will not tell you that he loves you, stop talking to him for a week, this usually works! If you can't read at your desk, then read in your bed instead! These reactions might be seen as fruitful peer-confrontations. At the same time it seems rather obvious, that the group is trying to deny feelings of helplessness when feeling deserted by the parental figures.

Following S.H.Foulkes (1964) you can understand group therapy as therapy of the group, in the group and by the group, where therapy by the group means the group members' active confrontations, commenting and even interpretations of the material in the group.

> The group was talking about feelings of loneliness and unbearable helplessness while trying to study. This was succeeded by quite a long pause released by Anna, talking eagerly about the delicate knitting work of a group members' sweater. The rest of the group silently followed this, until the therapists confronted the group with the pause and the shift of attention and encouraged the group to examine what was happening. In doing so, Anna interrupted the group again. The therapists now suggested that the group examined, whether they might have unconsciously chosen this special member to release tensions, since it was a role she often took in the group. Anna actually seemed to be

eating up as much group time as she could, thereby interfering with moments filled with unpleasant feelings but also disturbing moments in the group, where other members were working intensively with serious feelings. This group consisted of very anti-aggressive women, who - partly in denial of sibling rivalry - did not comment on Anna's interruptions at all. They seemed to prefer to have a 'naughty member' onto whom they could project unwanted feelings. From this point on, the therapists have different options regarding the focus of their attentions. They could choose to concentrate on Anna and her fear of not being heard, thereby doing therapy in the group, with one member in the foreground and the group as background. Alternatively, they could go on working on the unconscious mechanisms of the group as a whole, trying to show how the group chooses one member to release the tension, a member who acts as a container of all the abandoned feelings of the other group members. This is what Foulkes would call therapy of the group, seeing the group as figure and the individual members as background.

In the beginning of a group therapy the interpretations to the group-as-as-whole often are met with astonishment, curiosity and sometimes denial. Later on the group gets used to these interpretations which at first were usually perceived as offending attacks, but later on may be received with relief and followed by spontaneous exploration by the group. One member was talking about very critical teachers, another about people, who just could not be honest, a third about an ever gossiping girlfriend and so on. The therapists asked whether the group in fact might be talking about the group itself, and how much criticism it could contain. This remark made it possible to express openly the latent phantasies active in the group: "How much of my vulnerability and imperfectness can be expressed, without the threat of going to pieces, to feel destroyed and not being able to rejoin the parts, before the group is over?"

Therapy by the group

A unique asset inherent in group therapy is the possibility to interact with peers, as well as with therapists. The spontaneous sympathy and interest from other group members are of great importance in such a group. Furthermore peer-information, peer-confrontation and peer-interpretations are all very valuable elements in a group. By peer-information we mean simple information (e.g. "A teacher has not got the right to demand this!"), reality testing ("Can it really be necessary to study 18 hours a day?") and alternative ways of seeing and coping with things. Such contributions are of particular importance coming from fellow group members, who are known to have similar problems. Likewise, an interpretation offered from a peer is often more easy to accept. However, too eager confrontation and interpretation from a group member can also be a way of trying to create a subgroup with the therapists, behaving as a kind of co-therapist. This may be understood as a defensive act, intended to fend off self-exploration and thereby trying to escape from the status as a client.

Realising that other group members suffer and have similar problems, strange ideas, frights and feelings of guilt may in itself give relief to anxiety and guilt feelings. Furthermore, it is often easier to identify self-destructive or irrational behaviour in another group member than in oneself. For instance projection and denial may be of more easily identified in others than in oneself. Attending to another member expressing and wondering about her problems, is at the same time leading to intense silent work in the rest of the group members. In the projection of their own feelings onto the member working with material similar to their own, the clients are, in Foulkes' words *mirroring* themselves in the other. This mirroring process can be acknowledged by the group as a whole, either when a member spontaneously refers to her associations to the story of the fellow group member, or when the therapists comment, that the work done right now by a single member, is work done for the group, since the conflict is known by most of the women in the group. This leads to feelings of relief (or denial) and may serve as a clue to the listeners: They sometimes see themselves in the other.

Seeing the empty chairs of some absent group members led Marie to talk about her serious inherited disease which, since she was born, had led to numerous operations at the hospital, mostly without her parents being there to hold her, due to hospital politics. The sight of the empty chairs seemed to have led to the association of being left alone, helpless and stuck with a very serious disease. To this very sad situation the group at first reacted with compassion but also with denial of feelings of abandonment, projecting their own feelings of despair onto Marie. All of a sudden nobody seemed to have any serious problems, the empty chairs did not bother then at all, and they expressed feelings of relief - no wonder, having deposited all of the misery in one person, Marie.

It took some work in the group to understand what was happening, and for the members to take back their projections, not leaving it all on one chair/member. After a while, Marie realised, that she on her part readily took in all the unbearable feelings and thereafter isolated herself, feeling completely alone with no parents to hold her. She hereafter openly rebelled against being the target of the projection, trying to understand how she was placing herself at the disposal of the others, recognising the pattern from her own family. After this she talked about her lack of energy and fear that her memory would fail her, never being able to take her exams. Talking about this gave her relief and courage to get near her hated books again.

Group development

Many authors have tried to describe typical phases of therapeutic group development (e.g.. Poey 1985). Making a very rough generalisation one might detect three common phases, described in the literature. First of all one might see a *beginning phase*, where the participants have to establish a common attachment to each other and to the group as such. When this is accomplished, a *working phase* begins, where the clients talk about their problems that brought them in the group *and* the manifestations of these problems in the here-and-now of the group. Short term groups will furthermore be characterised by a distinct *termination phase*, where themes related to the termination of the group will be central.

A description at this general level will almost unavoidably fit in with the typical process in our groups. Nevertheless we have relatively often found, that groups with these clients almost skip the *beginning phase,* rapidly building up an intense group feeling and bringing up emotionally loaded and private material from the first session. To understand this phenomenon, one may take in consideration the point made by Goldberg et al (1983), who stress that group cohesion is built up much faster in theme-focused groups, because the participants feel they have more in common due to the shared theme. Furthermore, in our groups the specific personality traits of the clients will lead to efforts of mutual accommodation and feelings of responsibility for the well-being of the other members resulting in attempts to tune in to the needs of the others. Likewise the clients will seek to turn the group into a success, trying to be "good clients" who function well in the group.

Obviously this pattern has advantages as well as disadvantages. On the one hand, the building up of a group feeling undeniably leads to a strengthening of the groups therapeutic potential. At the same time it may turn out to make it more difficult for the participants to express emotions, which are not immediately shared by the other members of the group. Similarly we have met clients, who seemed to feel almost guilty, when having to admit, that they did *not* share a certain problem, which had been the subject of a group discussion.

In our experience, in groups where this early group cohesion is very strong, after 3-5 sessions some clients will try to challenge the idealised image of the group. One group member might allow herself to criticise another, or a depressively tinged feeling may spread, centring around doubts as to whether the group is actually as perfect as first perceived. This may herald the advent of the *working phase* in the group, often characterised by the clients being more oriented towards changing problematic behavioural patterns and seeking to find solutions to problems encountered outside the group. However, this reaction as well may serve defensive purposes. It is undoubtedly of importance that the participants will eventually be able to change rooted attitudes and behaviours, and actually as a result of the participation in the groups, most of the clients do try out other ways of relating to the study and to their parents. At the same time there is a risk that the clients through their focus on events external to the group are evading the confrontation with the relations *in* the group, and especially the aggressive feelings, that may be latently active amongst the participants. It is of utmost importance that the tendency is addressed, as it is exactly the acknowledgement of diversity and even animosity between the members, which makes it possible for clients to allow themselves to stand firm on their own beliefs and attitudes.

To allow this development to evolve, group composition is of great importance. It seems reasonably safe to state, that a short-term group should be organised around a theme, which is common for the participants. However, it seems to be preferable, if the members, while having the dependency and study problems in common, are different with regard to the ways they deal with these problems. As one might expect, many of these women will after a short while be able to use the jargon of the therapists and may develop an idea of ways to behave, if you are a "good" analytic group therapy client. Therefore, it may constitute an advantage if the group contains clients, who find it easier, to break the unwritten rules of the group, for instance by giving direct suggestions to the others without endless pains to empathise with the needs of the person, to whom the advice is directed. One might argue that for a group therapy there exists an *optimum level of diversity* between the members. Helping secure this level is an important task for the therapists, when selecting the clients as well as throughout the therapeutic process. In our experience the therapists will often have to work with their counter transference reactions towards the clients, who contribute with the necessary lack of adjustment. There is a risk, that the therapists will identify themselves with the wish for unity in the group to a degree, where they as well feel negatively towards the participants who threaten to break this unity. Discussions between the co-therapists may help to ensure the necessary neutrality in relation to the clients.

With regard to the *termination phase* in the groups it is obvious that themes related to termination occur rather early in the process. This seems inevitable in a short-term group, where the knowledge that the group has to end is always present. At the same time, the theme of termination may be especially provoking for this group of clients, because it activates the separation anxiety, which is so profound amongst the participants. It is therefore relatively commonly seen that discussions of any kind related to forthcoming termination of the group are conspicuously absent and one will often encounter widespread denial, when trying to interpret this as a defence to the group.

In the 12th session of a group, when termination was getting close, feelings of dependency arose again, showing polarisation within the group between dependency and fight-flight reactions with splitting mechanisms and simultaneous devaluation and idealisation of the group coming to the fore. "They hope it will last forever". This expression of course states the relief of not being seen as the expression of the anxiety of dependency and the relief in experiencing that the therapists (unlike their parents) would in fact let them go. Hereafter, Anna said with compassion "This is like a situation with children, they sit in the pushchair and they want to get out and walk on their own. The parents on the other hand keep them there because it is more easy this way. The children should be let out to walk since they are so eager to do so. After all they have learned to crawl. Still the pushchair should be near, so that the child may go back to it once in a while, whenever the child needs". Then therapists asked if the group could be seen as the pushchair - a kind of transitional object before walking totally on their own. While this was agreed on, it was more difficult to see where the therapists fitted in with the metaphor, the parental transference was more difficult to get in contact with.

Essential topics from the group sessions

The main topics through the sessions were not surprisingly the group members' presenting problems: their difficulties with their studies and with their families.

Study problems

All the group members are women studying a subject which they have actually chosen themselves. Nevertheless they experienced this situation, which might be seen as privileged, in an extremely negative way. One of the group members used the metaphor that *her books take up all the room in her apartment..* She felt, that there was no space for other activities. Another said that *life begins only after graduating.*

Already in the first sessions this topic was brought into being. In both groups several presented themselves as having study problems followed by discussions about their fear of rejection and their fear of seeing themselves as stupid and dull.

In one group the feelings of inferiority were immediately met by some practical advice from other members. *When you feel like this, you should tell yourself in the mirror every morning, that you are just the best.* This gave the therapists the possibility to point out how difficult it seemed for the women to endure this feeling of inferiority without having a picture of a clear-cut solution within reach. On a different level the discussion about fear of rejection and feelings of inferiority could be seen as a discussion about what was happening in the group right now. As stated above, at first the group members seemed rather puzzled when confronted with this point of view. This is hardly surprising: as it of course is very strange for them to learn, that talking about a theme from the world outside the group might be a way of talking about the present situation. Nevertheless, although the group members might initially react sceptically toward such group-as-a-whole interpretations, it is our experience that these are valuable in the initial sessions and serve to strengthen the group feeling.

During the first 2 to 3 sessions the main focus will emerge. In our groups we noticed little by little, that they talked about their studies and their patterns in a similar way. Both of these areas of their lives, seemed to be experienced as duties they had to pay attention to without any desire nor any feelings of encouragement. In one group it turned up that most of the members felt they were studying to fulfil their fathers' wishes (or more precisely what they *imagined to* be their fathers' wishes).

One young woman, who felt absolutely stuck in her work, told the group, that the theme of her thesis was introduced by her father. When he had introduced this theme she had been very deprecatory. Eventually, when she had at last accepted the idea, her father had actually died and she had not been able to work with the thesis ever since. The thesis had turned into a token: she had to pay back all her debt to him by getting the highest grade. She may even have been imagining, that he could be resuscitated, if she made the perfect thesis. By bringing these feelings and fantasies to the group, she was little by little able to see their self-destructive character. At the end she managed to have a much more realistic view of her work and her father. In session 12 she told the group about the joy of working. And in the last session she said, that she had learned she could work with her relation to her father, whether he was alive or not. He had finished being sacrosanct to her.

As stated in our introduction, a certain pattern of splitting was articulated by most of the members: Either I will be able to do the perfect thesis, or I am completely stupid! *Either I will be working all the time or I will be laying passively in bed! Either I will get a wonderful, well paid job or I will become a bag lady.* Being so one-sidely oriented towards the needs of their parents, these women do not know and do not respect their own needs. Instead the imagined or real demands of the

parents are internalised, producing an intolerant super-ego and leading to extremely high internal demands for perfection. Everything must be perfect and mediocrity is simply not tolerated. It is either - or, perfect or totally incompetent. This starting point makes it very difficult to experiment, to practice and particularly to play. Life becomes a duty. At the last session one of the group members said: *I thought, that all of my problems would disappear by attending this group. But what I got was a more realistic view of myself and my father. I thought I should be perfect. I do not think so anymore.*

Through the sessions we experienced a shift in the way in which the group members were talking about their study problems. Generally they grew more realistic. But in one of the groups a few members had a little relapse due to a message from the therapists:

> It was only in the last session we could tell the group, that we were going to present some material from the group at a conference in England. The group members agreed ostensibly in a very grown up way. We felt relieved, having had all kinds of worries about having to tell them this in the last and final session. After this exchange the group went on with its work and we noticed that most of the essential themes for a final session were brought up. We did not, however, notice any effect of our announcement until after the session. When we had given an account of the session and it had been written down, it became obvious, that this information about bringing the material to the conference had structured quite a bit of the session. We had in fact communicated to the group, that we were also producing a thesis. We had introduced a typical superego topic. And we had told them, that one never leaves off academic achievements. The group responded by a rearticulation of a previous discussion about their fear of achievement and procrastination. And when we tried to interpret their relation to us as a relation to mother figures, they denied it and told us: *You have just been a kind of teachers.*. It might be that they were also investigating whether they had produced a group worthy enough to be presented abroad. However, we could not do anything about these obvious connections, because we saw them only *after* the session.

Relations to parents

It was common to the female students in our group that they felt very dependent on their parents and that the parents felt very dependent on their daughters as well. In other words, there is a pattern of interdependence. Both parts seemed to need this daily contact often brought about by telephone calls. Many of the women felt burdened by these calls and repeated invitations for weekend visits. But at the same time they were scared about having to turn down any of these demands. They needed the full and constant acceptance from their parents and feared rejection so that they could be permanently worthy of this acceptance. Several talked about having to meet their parents' obligations in order to make their parents *feel good parents.*

Most of the group members were the oldest child in the family. They talked about having to be the clever child of the family, while their siblings could be offered more spacious roles as rebels or the creative ones. Almost all felt the obligation to give the parents something to be proud of. And when they did not feel able to do so, they imagined being a burden to the parents. A common motto for them could be: It is important not to be a burden to other people.

> One woman told the group about a dream:
> I was floating in a river, clinging to a piece of driftwood, and approaching a waterfall. My family was standing at the riverbank, and I said to myself: "You have to pull through to make them feel proud".

Several of the women felt they had the role of mediator in their families, for example between a rebellious brother and the parents or between the parents. If they tried to refuse, what they experienced as the family's demands, they felt *they were evil*. In the group they would typically try to help relieve the other group members of *their* fear of feeling evil or feeling swallowed by hopelessness.

Generally, the level of mutual identification between the group members was very high. Sometimes the women would express feelings, which seemed to belong to other group members, for example by crying when somebody else told the group *about some painful* experience. In this way they facilitated a contact with each others' repressed feelings. They were typically very caring towards each other asking: Did you refuse your fathers' call? etc. and in this way actually supported each other in developing a separation from their parents.

As they gradually became more separate from their parents, they also succeeded better in separating from their study. They gained a *broader horizon* that gave them the ability to demarcate and structure their relations as well as their studies. For many of the women, studies and parents had stopped being a duty which filled up their heads permanently.

Conclusion

Dealing with these groups has shown us that it is possible to work therapeutically with issues of separation and dependency within fifteen sessions. Typically, the group process was characterised by a rapid development of mutual identification leading to a strong initial group cohesion. This development is probably due to the fact that the clients share important problems, while at the same time having difficulties with regard to separation and expression of individuality. As a result of the therapeutic process, usually a larger tolerance for dissimilarity and separation has been built up in the group.

During the process, the linking of the here and now of the group with the members' behaviour outside the group as well as with family patterns generally has made the clients more aware of their individual ways of repeating dysfunctional personal patterns. Furthermore, working within narrow time limits has made the separation theme present from the very start. The therapists had the possibility to use the frame directly in their interventions, for example by repeatedly reminding the group, that there will be a given number of sessions left to work with a certain issue.

Generally, the young women appeared less dependent at the final sessions. They had conquered land in their quest for separateness and independence. They dared to respect their own needs and reject many of the claims of their family (and those of their friends and boyfriends), in this way claiming more control of their daily life. They seemed to have improved their capacity to loosen up their old and rigid patterns and thus gained more freedom and creativity.

Above all, the majority of the clients seemed to have gained courage to go on with their studies in a more creative and less compulsive way. Several were able to revive their thesis after having been stuck for months. They would suddenly talk about the joy of intellectual work. Their studies would not engulf their lives. There was room for other activities than studying. And they did not any longer have to be perfect all the time. They were able to appreciate the joy of *being good enough* instead of *being perfect*.

In many ways, we as therapists went through a similar development. Originally, we were worried that this kind of group would be a discount offer with too few sessions to make respectable therapeutic work possible. But we learned, that this kind of group work was *good enough*. We offered room for reflection and insight, thus having helped the students to resume a development, which had been interrupted. We as well had to give up the *all or nothing* thinking. You may say, that both therapists and group members became more tolerant, having learnt that it is ok not to have accomplished everything, as long as you are in a continuing process of development.

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Storms in the Psyche in the Midst of Academic and Emotional Tensions.

Dr Sylvette Gendre-Dusuzeau, Teacher of English at the Georges Heuyer Clinic Paris, and Psychoanalyst.
Christine Pradel-Pavesi Head of the Teaching service at the Georges Heuyer Clinic and also Clinical Psychologist.

Workshop:
An experimental counselling setting (C.A.A.M.P):Centre d'accueil et d'aide Medico-Pedagogique

The reasons that prompted us to start our counselling group were mainly the lack of existing help to meet the increasing demand of secondary school pupils, including pupils beyond A' levels, who are taught in Grammar schools at the university level to take competitive exams for the Grandes Ecoles (age group between 18 and 22). The same demand was found on the part of university students. Students at university can be in therapy paid for by social insurance through a system called B.A.P.U. But the point is that there is nothing in between to meet difficulties which are at the same time academic, emotional, behavioural and which may not require long treatments. An adolescent at grammar school or starting university is still dependent on his parents in many ways, being of the age of majority doesn't necessarily change the situation. He belongs to his family and is submitted to all sorts of interactions within the family. Most of the time, unless an adolescent happens to be helped into treatment, he will never go and see a psychotherapist. And this is because of various reasons we've all met with, and which range from his not being aware that something is not only wrong with the world but possibly with himself, to the fear of being mad. Taking this into account, we thought of offering help in direct relation with the academic difficulties encountered, whether they be panic at exam time, lack of interest, poor memory, truancy, incapability of using guidance for a career, violence etc... All these warnings have the advantage of drawing the attention of teachers, school nurses, or school counsellors, but who often have problems dealing with a situation beyond their means. These people on the staff are those who are best situated first to point out to the teenager that there is a problem here that he may not be conscious of and, secondly, to try and find ways of getting help. Of course, as you already know very well, sudden academic warnings are often the sign for other problems, but the advantage is that the adolescents are more willing to seek help for school difficulties than for something more personal that sound a lot more worrying. This is why our setting includes a teacher, who is there to evaluate the importance of the academic obstacle in case more direct help would prove to be relevant at the end of the sessions. The psychologist can also give indications to find guidance when information proves to be needed. The psychiatrist lends his ear to symptoms that might become serious. But before we come to these possible ends and their developments, the group tries to understand what the problem is, with the help of the family therapist. So, what's the problem ? he says. The idea is to try and untangle the situation which has led the adolescent into this dead-end situation. But how did this student happen to reach us ?

The member of the school or university staff who thinks he might benefit from our multidisciplinary approach would use our leaflet to inform her/him about the specificities of our setting and how to get in touch. S/he would call one of the secretaries of the CAAMP who would explain in more detail, for example that he is going to meet several counsellors together (each representing a different field), for up to 6 sessions. If he has come to his first session by himself, although he was informed on the phone that he could come with someone from his family, his school, or a friend, then he will understand in the course of the session that others might be involved in his problem. Some of our young people are very reluctant to come accompanied, but some of them are willing to bring someone. Very often the family comes, with the brothers and sisters, the father or the mother who happens to have disappeared since the divorce, etc....So, the problem which seemed to be only academic at first quickly opens up into another problem at the family level, in which the adolescent is trapped. During the session, with the two groups present, our counselling group and the family group, lots of things are talked about which had never been before or at least never in this way, never in a situation where each individual could make himself heard, could reproach things, complain even, and get an answer of some sort. Most of the time, these sessions loosen the grip of the effect of a family situation which has been blocked for various reasons. Thus the dynamics of family relations, freeing the pupil or student from his anguish, enable him or her to pursue his or her own course, once communication, which had been lost within the family, is restored.

I have several young people in mind. I think of a student, suffering from panic attacks at exams. He insisted on coming by himself because his father, a rather violent person, was out of reach and his mother illiterate. Within a short space of time, the terror he felt was able to be linked to another terror he felt when, a long time ago, in primary school, the school mistress would smack disobedient pupils on their naked bottom in front of the class, these scenes arousing anguish and terror among the observers. Having made this evocation and given the terror a name, the boy informed us in the next session, to our surprise, that he had made up his mind meanwhile to go back to his former primary school and talk to the headmaster about what the school mistress used to do and might still be doing. The headmaster who knew about the situation was very understanding and his welcoming response to the boy's complaint, after all these years, allowed the

anguish to loosen. The next exam having been sat without panic or terror, he stopped coming to see us after the second session, having found his own active solution to work through his school shock. There were obviously other situations of violence within the family but this one seemed the most within reach.

I also remember a school girl who just couldn't do any work out of lack of concentration although she had been excellent so far. Her mother who accompanied her was in great distress due to her difficult relations with her divorced husband who had completely broken down after his own girl friend had left him. This happened in another town, far away from the school the young girl was attending as she had moved with her mother at the beginning of the school term and she was extremely worried about her beloved father being abandoned by his former mistress who had been the apparent cause for the divorce. She also had the feeling that she had abandoned him too. The sessions brought to light the fact that her mother felt very guilty about a new relationship she was starting. After the second session, the girl phoned to say that she wanted to stop meeting us because she had realised that her present problems were in fact her parents' and that she couldn't do much about them herself, and therefore she felt alright. Her mother had said that she might get some therapeutic help for herself to cope with the situation. During the sessions, what had emerged was that, among other things, the mother and father had, for the past few months, been very demanding for their daughter's help. As could be expected, she had tried hard but had been unable to bring real help. How could she, really ?

Another adolescent required more direct intervention from the psychologist. He originated from the West Indies and although his mother was rather watchful about school, his father had never been fond of school and was more concerned with practical life than with academic questions. But his background was not the direct cause for his present problem. He confessed readily that he hated some classes and some teachers and consequently preferred to play truant. Actually, he sounded blocked when confronting his career projects which he had however quite well planned. But something wouldn't work out which we couldn't understand until he told us hesitantly about his past drug addiction, which had been noted somewhere on his report from his former school and was always in the way whenever he went to guidance interviews with the school staff who knew about it. This had a depressing effect upon him because even though his addiction was behind him, he felt hounded by it. As a consequence, he never dared ask for further information needed for the project he had in mind for the following year. We acknowledged that his present difficulty was to get rid of this harassing problem that barred his route, and we entreated him to go and talk to the head about his problems in the school and the resolution he had taken about his addiction, in short to take things into his own hands. Then, the psychologist thought it appropriate to organise a guidance interview with someone from another school, about which he was very satisfied.

For other students, the maximum of six sessions which is our self imposed limit, seems short. For instance, a young woman who studied Business at a Polytechnic, had been referred to our team by one of her teachers who was worried by her repeated academic failure and obvious depression. For the first three sessions she came alone. We were struck by the fact that at the same time she complained about the number of counsellors she had (four), although she seemed deeply reassured by it. She told us about her mother's suicide when she was ten, her life with her father with whom she said she got on very well from that time to the age of 16. At that time, "because of failure at school", she decided with her father's full agreement to go and live with his parents, 500 km away. Feeling very lonely and depressed in a new city, without friends, she had then started psychotherapy with a male therapist, which she interrupted against his advice after a few months. Her main complaint revolved around her inability to concentrate on any homework she had to do. During classes she could understand everything but when faced with the necessity to study on her own, she became totally inhibited especially when she had to write. Then her father joined us for sessions 4 and 5. The interactions between himself and his daughter and the group of counsellors helped him unveil for his daughter some "family secrets" and talk at length about her mother who had left her own family and emigrated from Eastern Europe at the age of 16. Her mother had then become a talented writer but had gradually sunk into depression and alcohol until she committed suicide. In between the two sessions, the girl had even managed to get hold of a few unpublished stories written by her mother which her father's parents had hidden away in a closet. In the last session she seemed much less depressed and had started a relationship with a young man. She thought that we had helped her father with his own difficulties, that both of them could now cope better with separation from each other while maintaining a meaningful relationship. She was glad she had learnt more about her mother. She even seemed to have found a roundabout way of tackling her academic problems.

The opinion of the counselling team was that this girl had probably dropped out from her psychotherapy because the dual relationship with her male therapist had become unbearable since it echoed too closely the dangerous closeness of the relationship to her father. In that case, working with a group facilitated her access to a very important part of her family history which her father had been unable to disclose until then, and thus was out of reach in a dual therapeutic process. It seemed to us that here, counsellors working in a group offered a variety of possible interactions and identifications which had the effect of a "holding". Our setting reassured the girl, thanks to the dispersion of the transference relations it allowed. Of course, this group work cannot be considered as a substitute for psychoanalysis, but it has a therapeutic impact of a different nature. It enables the patient and his/her own group to mobilise resources which had not been acknowledged until then and to re-open mutual exchanges through verbal communication.

On occasions when the academic aspect remains and when we feel it is advisable to offer specific help, we attach great importance to what we call "the academic complaint". Lots of students suffer from a great range of academic difficulties with great anguish linked to them and have nobody who will listen to all this in the first place. They have no idea of how to tackle the problem. Are they not always told that they should work to pass their exams, that they will never reach the correct level if they go on like this, that competition is hard, etc.... Expressing this complaint is very important because through formulating it to a teacher, who is after all the very person to welcome the predicaments of this painful field, it enables anger, helplessness, resentment to come out and the student can look at things from a less heated point of view. Then, the real difficulties that exist can be considered more specifically and estimated at their proper value. Only then can the relation to the academic object be seen differently: the cognitive modalities of learning such as remembering, imagining, etc.. can be observed from a distance, thus allowing new perspectives to open up concerning the relation to learning in general.

Exploring and Redefining One's Relationship with Academic Work and its Written and Oral Expression with the Help of a Teacher Counsellor.

Teachers-counsellors in France who work in the C.A.A.M.P have, besides the usual teacher training, either:

-a psychoanalytic training, or: -a training in approaches related to cognitive psychology, and a wide experience of working with severely disturbed students, and now: a two year experience in sharing counselling sessions with psychiatrists, psychologists, and family therapists, for students who are mainly referred by academic staff because they are going through a crisis which often inhibits their ability to study. Sometimes the crisis situation results in the student being rejected by the institution because his/her behaviour appears as questionable and may also question the institution itself.

We have devised a specific time-limited approach to help those who need to "reframe" their relationship to learning, which may allow them to open up new perspectives and begin to enrich their landmarks on the road to academic achievement. But it must be clear that this approach is completely different from remedial work:

-Individual sessions with the teacher-counsellor use the framework of a technique named "*dialogues pedagogiques*" which might be best translated into "Learning Conversations": a set of questions centred on the person's learning strategies outside the academic area covering four fields:

1. Visual and /or auditive "images".
2. Lexical verbal skills.
3. Abstract and reasoning (logical skills).
4. Creative skills.

After two to four sessions, the student becomes more concretely aware of the "mental gestures" s/he makes in the learning process, of those s/he might make, of how images (visual or auditive) may interfere or help when learning. Thus, his/her potentialities may be revealed and his/her self esteem may be increased.

Group Sessions:

1. The "Question-mark workshop": problem raising and construction when writing an essay on philosophy, history, literature; how to use the difficulty to organise the dialectics of the essay.
2. The "Scientific reasoning workshop": How to tackle scientific subjects.
3. The "Drama and communication workshop": drama technique used towards improvement of communicative skills for oral exams, interviews, etc....
4. The "Creative writing workshop": a roundabout way to overcome writing blocks .
5. The "Que sera sera" workshop for students who have trouble projecting into the future, or feel unable to make decisions: sharing and working through representations of the future.

This specific learning help, whether individual or in workshops is not systematically offered. We take specific care on this point: we offer academic help when we think it will meet the academic demand without banning the openings of the demand. We are very careful to allow for the student and his group a working through of the conflict that underlies the symptoms, and a mobilisation of their resources. In this way, we try to leave open the expression of what is at stake.

So as not to focus too soon on the academic complaint which might very well only be a symptom, the team never responds with concrete suggestions to that complaint before at least the end of the fourth session. We are very careful to allow for the "student and Co", a working through of the conflicts that underlie the symptoms. We try to leave open the expression of what is at stake and to allow the mobilisation of the clients' resources.

When the team think it appropriate, they suggest to the student either individual help with one of the six teacher-counsellors of the C.A.A.M.P. or one of the workshops we run. In all cases an assessment of this specific academic work is made in an extra session with the Counselling team.

Now, we will focus on the use of the "Learning conversations" via a case study.

Part of the academic help we use is based on the cognitive research of Antoine de Lagaranderie who discovered, for instance, that some people could only use their visual memory or their aural memory, which excluded a whole field of cognitive processes. Some teachers use what we call "Pedagogical dialogue", translated into "Learning conversations" directly issued from this type of approach, to help students become aware of their "mental gestures", in order to use them better. The "L C " are thus a series of questions aimed at the consciousness of the learning processes. For example there are questions like "What could you do to remember a phone number if you had no pen and paper"? Or "Give a description of your room". It seems quite simple but it involves lots of processes. This is how a teacher of philosophy (C. Allenbach) proceeded with a student suffering from panic attacks at tests. The background of this student was that she belonged to the second generation of an immigrant family. In one of these 'pedagogical dialogues", it appeared that the student could easily remember words visually but was unable to have any sort of "dialogue with herself". She would see words on paper, in books, and would remember them visually but without being able to "make them speak" or to use them to shape thoughts to build up an elaborated reflection on a topic. She felt at a loss when she had to write words down on paper because their meaning seemed limited. The teacher doing this "dialogue" happened to teach philosophy and was thus very much concerned with this difficulty since in philosophy, thinking implies a dialogue with oneself. She thought immediately of using "The origin of languages" by J.J. Rousseau because, in it, the core of his thinking is based on two visual scenes that open up a reflection on languages:

-the first scene shows men in Northern regions talking around a fire.
-the second scene shows men in Southern regions talking around a fountain.
These two scenes appeal to the eyes but they also involve the mouth and the ears.

What happened was that these "dialogues" carried out with the support of the teacher allowed the girl to gradually experience this inner dialogue with her own thoughts of which she had been ignorant so far. She was also able to take possession of words in her own mouth and was thus able to use them in new ways. This was all the more important to her as her mother tongue had not been French although French had been her "school and social tongue" from the start.

In conclusion we wish to stress the fact that in practice the therapeutic goal of our team is limited. We consider that if through the sessions the "student and Co" have mobilised enough resources to cope with the problem that made them come to us, the goal has been met. Besides, one of the specificities of this kind of counselling is the integration of the student's learning experience within a short term therapeutic approach. So, this multidisciplinary setting allows to take into account the various essential aspects of the student's life in so far as they are necessarily knitted together: academic, emotional and environmental.

Thus the perspectives of such group work are to facilitate the student's growth by opening up new resources through disentangling unmeshed situations.

The team of the C.A.A.M.P. includes the following:
* Psychiatrists: J.L. Auber, A. David, D. Monchablon.
* Psychologists: M. Pasquier, C. Robillard.
* Teacher-Counsellors: C. Allenbach, M. Bertaudiere, K. Brutin, M. Faventines, S. Gendre-Dusuzeau, C. Pradel-Pavesi.
* Social Worker: Betty Baron-Rousseau.
* Secretaries: M. Bigand, J. Cazeneuve, E. Janssen.

Effects of client-centred psychotherapy in student groups

Dr. Peter Figge, Director of Counselling & Psychotherapy Centre for Students, University of Hamburg, Germany

Client-centred psychotherapy can be considered to be the method most widely spread and most frequently used at Counselling Centres of German institutions of higher education. This method is being applied in more than two thirds of the counselling institutions which offer psychological counselling and psychotherapy for students. In 36 % of the cases client-centred psychotherapy is being used, followed by psychoanalytic methods (17 %), and behaviour therapy (16 %).

Contents of the study

58 students of Hamburg University and associated institutions of higher education who sought psychotherapeutic help at the Counselling and Psychotherapy Centre of Hamburg University participated in a one-year client-centred group-psychotherapy. After four single diagnostic sessions, the treatment consisted of two hour group sessions once a week, including a one-day and a three-day "intensive session" in the seclusion of a country meeting place. The therapy group consisted of a maximum of eight clients (male and female) and one female, one male psychotherapist.
Extensive data (based on personality questionnaires, ratings and interviews) was collected before and after the psychotherapy as well as six months after the last group-psychotherapy session. The results obtained give indications regarding the differential effectiveness and characteristics of the therapy process in client-centred group-psychotherapy with students.

Objective therapy-outcome

The form of client-centred group-psychotherapy investigated in this study is effective. In accordance with published data regarding the effectiveness of client-centred psychotherapy, significant positive development can be observed within the 37 variables measured in personality questionnaires.
The effects of client-centred psychotherapy in groups can be observed on the intersubjective level regarding the self concept (depressiveness, emotional liability, composure, nervousness) as well as on the interpersonal level regarding the symbolisation of one's own capability to relate to others (sociability, inhibition, social potency). Apparently the individual self-concept is being examined and newly defined within the process of therapy. In consequence, the self-concept approaches the ideal-self.
Client development due to client-centred group-psychotherapy does not only refer to a modified generalised assessment of the own self but also to new representations of behaviour experiences in real life situations.
The individual problems which led to the client's seeking psychotherapeutic help are mostly existent even after psychotherapy. At this time however these problems are of significantly reduced importance to the clients. This can be attributed either to the fact that psychotherapy has helped the clients find different ways of relating to their problems or has led to a considerable solution of their initial problems.

Subjective therapy-benefit

About two thirds of the participants reported a significant subjective benefit from group-psychotherapy when asked in a follow-up interview about six months after the last therapy session. A further 25 % rated the psychotherapy as "quite positive", whereas 8 % did not report positive consequences. Negative after effects were not been indicated.
Thus this form of client-centred group-psychotherapy has been experienced by a large part of the clients as highly useful. For these students hopes connected with seeking psychotherapeutic help have been fulfilled.

Relationship between therapy-outcome and therapy-benefit

In studies on the effects of psychotherapy it has been suggested to differentiate between objectively attained measures of "therapy-outcome" and individual ratings of clients regarding their subjective "therapy-benefit". Evidently only a weak correlation exists between therapy-outcome and therapy benefit.
It has been reported that objectively measured positive changes in personality questionnaires correspond in only 17 % of the cases to positive subjective client ratings of individual therapy benefit. In cases of therapy failure the correspondence between benefit rating and change measurement reaches 32 %. This means that in about half of the psychotherapies (51 %) an apparent positive objective outcome is not accompanied by individual client's feelings that the psychotherapy has been of personal use.

In client-centred group-psychotherapy there are specific fields of personality development in which significant relationships between therapy-outcome and therapy-benefit can be found . These variables can be considered to be core variables in which client centred group-psychotherapy is objectively as well as subjectively effective:

- • - decrease in depressiveness
- • - social potency: decreasing the discrepancy between self concept and ideal self
- • - decrease in general anxiety
- • - decrease in feelings of guilt in social relationships

Perspective

The investigation of the relationship between measures of therapy effectiveness and factors governing the process of client-centred psychotherapy points out factors which influence   the objective therapy-outcome as well as the subjective rating of therapy-benefit. Special elements within the therapy process can be identified which are responsible for the existence of particular effectiveness and usefulness.

It can be shown that specific aspects of the relationship between client and therapist (as measured in a questionnaire from the viewpoint of each client) significantly influence therapy-outcome as well as therapy-benefit. In terms of the client-centred concept these influences can be attributed to the client's experience of the therapist's "congruence" and "empathy". The results of this study support recent findings and assumptions regarding the indication for psychotherapy: positive therapy effects are largely dependent on a special approachability of the individual client towards a given method of psychotherapy and towards the respective psychotherapist.

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Working with dreams from an existential/phenomenological perspective.

Lucia Moja Strosser, Director of Diploma in Existential Psychotherapy and Counselling, Regents College, London.

No report of this workshop was provided. Here then is an outline:

The workshop focused on the following:

1. A demonstration of what it means to work existentially, particularly looking at the contextual element, the world of which we are an intrinsic part in which our existence unfolds, also examining the relational attitude towards the world. It was shown that our experience is coloured by our moods and emotions on all the different levels of existence (Umwelt, Mittwelt, Eigenwelt, Uberwelt). Dreams express our attitude to life and are considered as messages which inform the dreamer about basic intentions and projects. The meaning of a dream can be perceived if we are able to open ourselves to it.

2. Participants were given the overview of dream analysis, presenting the main contribution of Freud and Jung. This was contrasted with the existential/phenomenological attitude to dreaming life as developed by Binswanger and Boss, emphasising the role of the dreamer in finding and deciphering the meaning of the dream.

3. Participants were involved in working on their own dreams, being given clear guidelines to facilitate the process.

Eating Distress

Rosemary Pitt,
Seniot Counsellor, KIng Alfreds College, Winchester

The main focus of the **workshop** was to explore a range of eating behaviours seen on a continuum with anorexia and starvation at one end and compulsive eating on the other with bulimia in between' partly as many anorexics become bulimic or the reverse. This continuum is mirrored by a graph with invasiveness at one end, in terms of how we have been parented, with deprivation or neglect at the other.

We started by saying briefly our reasons for coming to the workshop and a common theme was a feeling of panic and/or inadequacy when encountering eating distress in clients and a feeling of needing to be an 'expert'. Part of the aim of the workshop was to de-mystify the area of eating distress, by recognising a number of conflicts that underlie it and linking these, when appropriate, both with other clients and with ourselves. In order to look at our own eating behaviour, a hand-out was used to analyse how food can be used as an emotional tool and is rarely a neutral commodity and is subject to cultural pressures and norms.

The signs of anorexia were then identified and seen in the context of the conflicts referred to above, these conflicts can be defines as the following:-

-conflict around expressing and owning needs and desires
-conflicts around sexuality and body image
-difficulties around a clear sense of identity and autonomy, particularly as separate from mother/caretaker
-difficulty in the expression of anger and a sense of guilt and ambivalence associated with this emotion
-a sense of events/experiences being out of control leading to a need to exert control (as in abuse or parental/family break-ups and loss in general)
-a lack of self-esteem.

It is noted that these conflicts could be seen in much of our work as counsellors. What makes our eating distress is the way in which thoughts about food dominate as well as a preoccupation with weight (gain or loss) and powerful feelings and projections onto the whole activity of eating.

The difficulty for counsellors is the secretive nature of much eating distress so that many sufferers do not come forward (it may be their friends or family who come instead) and the fact that counsellors are offering a kind of nourishment and this is likely to be seen as a threat.

The central paradox of working with an anorexic client in particular was identified as the client being offered nourishment while refusing to take it in (as with food). It was emphasised that, as when working with eating distress in general, food should not be the focus of the sessions since this could be perceived by the client as too threatening and reminiscent of a medical model which may have proved unhelpful in the past. However, to avoid the subject altogether could be collusive and potentially destructive. Stress was placed on sensitive timing and staying with the client as far as possible. Sometimes the counsellor could usefully play an educative role in terms of explaining with the client what a healthy eating pattern could be since this is often lost sight of. This is likely to be useful in the later stages of the counselling stage and only for some clients and the implications in terms of the transference and how the counsellor is then perceived carefully considered. The counsellor's own weight and body image could also be a subject to consider and whether this should be aired with the client if it were likely to sabotage the work if unspoken.

We then looked at bulimia and identified both its negative connotations in being perceived as messy and wasteful and the need for the counsellor to have worked out his/her feelings about such behaviour. The number of sessions offered could also be an issue since too many could be seen as a response to the client being greedy and over-demanding. The secretive nature of this eating distress was also highlighted and how the subject of eating may take some time to emerge unlike with anorexia where the signs are more obvious, though the same ambivalence may be present in wanting (or not) to talk about it. A bulimic client is likely to be in touch with his/her needs, while viewing them as undesirable and frightening, whereas an anorexic client is in a sense seeking to transcend needs and be independent while paradoxically becoming more dependent in the process with the ultimate point being force-feeding.

The challenge for the counsellor is to build up and establish trust and to create a safe space or container for feelings to be expressed. Boundaries are important, particularly for a bulimic client whose background often reflects a lack of boundaries as in experiences of abuse and family break-up. Sexuality is often an area of conflict and reference was made to the importance for a woman to have had her developing sexuality affirmed by her father and having received what Andrew Samuels terms 'erotic playback' without any boundaries being over-stepped, a bulimic client is likely to be involved in a sexual relationship unlike an anorexic client who more usually denies such needs. The trigger for a binge, which is part of the counselling process to discover and identify, may be a person leaving the ensuing feeling of abandonment and emptiness (or the opposite issue of engulfment) can trigger a binge. The body is perceived as in the experience of abuse, as a bad object which needs to be split off and punished or comforted as is more often the case in compulsive eating.

Compulsive eating also raises issues of sexuality and how weight can be used in a protective way. Feelings, particularly of anger, are pushed down and covered over and the aim of the counselling process is again to help the client gradually get in touch with feelings and allow them to surface, a core process for all counselling and therapy. When food becomes less of a repository for a range of feelings and the underlying emotional issues are recognised, the counselling work is becoming effective. The hope is for the client to invest in life and to work towards reducing the powerful grip that food and eating distress exert. In the words of Winnicott, which can apply to all of us, "it is joy to be hidden but disaster not to be found".

Workshop: Journeys and Transitions

Rosie Jeffries and Phil Topham, University of West of England, Bristol.

Further and higher education offers students a period of challenges and opportunities usually ending with a change in academic status and social identity. The aim of the workshop was to help people explore how such transitions may be understood as a story or journey, using illustrations from casework and personal experience. The theoretical basis for this notion comes from Campbell (1973) and derivatives (e.g. Vogler 1992): that myths, classic stories and successful films possess a common structure and characters that appeals to and reflects universal and archetypical experiences. In other words, there are only a few basic stories in the world - or in counselling.

To consider whether this idea was applicable to counselling and psychotherapy, workshop participants were initially asked to consider and discuss a significant time in their life as if it were a play, book or film, then to name it, the acts or chapters, and the central theme of this period. A brief input on models of transition followed: "A change from one coherent sense of identity to another" which were clearly familiar to most people (e.g. Erikson 1959).

Participants were then asked to work in groups to elaborate their own experience, above, particularly to consider the role of key events and characters and the eventual outcomes for themselves, this links the psychosocial nature of personal development with the more elaborated model of development as a story that involves changes of scene and character, it reminds us, as counsellors, that we are not the only agent of change and that the period of counselling is not the only act to play.

The stages of the "Hero journey" (Vogler, ibid) were given as an example of a narrative model, together with some suggestions for common archetypal characters that we might find in our own experience or that of our clients, the herald, mentor, allies and shadow self for example.

In the final exercise, people were asked to return to their groups and consider how the narrative model applies to their own personal and clinical experiences. A plenary session ended with people being given a paper on the narrative structure of four well-known films.

References

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Erikson, E.H. (1959) Identity and the Lifecycle, Psychological Issues, 1, (1) 1-171.

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Workshop: W(h)ither Counselling?

Michael Burton
Director of Counselling and Psychotherapy, University of Sussex.

The theme of this presentation was that counselling services have enjoyed a considerable expansion in the 80's and 90's and have as a result become a substantial item in most university's budgets. In a time of reduced funding the prospect of the savings that might result from privatising counselling services are likely to figure in any proposed retrenchment in higher education. The presentation took the form of a negotiated role play in which members of the University of Lanchester Student Counselling Service were asked to consider the effects of a ten per cent cut in the university's budget and to negotiate with 'management' as to the form and nature of this cut in the counselling service. A variety of costings were explored to show how an hours' therapy delivered 'in house' can be costed at anywhere between £25 to £76, this was contrasted with the costs of buying in therapy from outside agencies at £25 per hour. As ever in such negotiations counsellors demonstrated a talent for dissent when acting as the 'Counsellors' and found it difficult to locate a single voice or even a single speaker. It is suggested that the differences within the field of therapy that are often denied in our search for an ecumenical understanding, best exemplified by the struggle within and around UKCP, are all too often made manifest when major change threatens our services. As a result, at a time when we need to be most united we end up most divided. This perhaps also relates to the equally remarkable talent for vicious, hard-nosed venality demonstrated when acting as 'Managers' (it makes one believe in reaction formation as a basis for choosing a therapeutic career, it also suggested that our fantasies of management may lead us to act confrontationally rather than working together to cope with the confusions of reality). In the game the 'Managers' decided to implement a 20% cut and eventually to close the service and replace it with a single university based co-ordinater acting to liaise with a Local Council counselling franchise organisation.

The game stimulated debate (still ongoing) between those who felt counselling services will best protect themselves by developing a clear identity based on the delivery of therapy, perhaps of a singular school or model (such as psychodynamic), within clear boundaries (what might be termed the 'psychotherapeutic' model) and those who felt that the best way to survive was to market the service as offering psychological skills that might address a range of community based problems from offering therapy, study support, training, to issues of disability, community health or alcoholism ('psychological model').

The development at Sussex University of a unit with a mixed teaching, counselling and study support function showed some of the advantages (flexibility, job diversity, budgetary control) and difficulties (staffing, difficulties, loss of boundaries, failure to deliver any service properly) that were inherent in the 'psychology' model. A joint development with the local NHS clinical and counselling psychology department in opening a 'low cost' clinic staffed by interns studying with the unit was described. Although these developments reflect particular conditions at Sussex they threw up a considerable contrast in philosophies between the approaches of, say counselling psychology and more psychotherapeutically oriented counselling.

The question that the workshop attempted to explore was the extent to which elements of these two approaches were understood, by, and appealed to, university administrators. It was argued that units offering time-limited brief counselling might find it more difficult to demonstrate the advantages of 'in house' over 'brought in' if both were offering a six session model. Equally the pluralist argument might end up being 'all things to all men' such that the service lost any discernible identity.

What is uncontroversial is that the financial situation is unlikely to improve and that there is an increasingly active professional commercial counselling sector appearing against who we may well one day be asked to tender. It is unclear to this author that the concepts of boundaries and transference (to take but two key concepts of the psychotherapeutic model) are sufficiently researched or explicated as to make it easy to defend services based on these principles in the face of more pragmatic philosophies such as those of Counselling Psychology. This is not to make a value judgement of relative worth but rather to emphasis the task of communication and public relations that confronts all of us who wish to see university counselling services continue as integral parts of the university experience and as an appropriate part of, and response, to the experience of higher education. One element of the negotiation that seemed less contentious was a general agreement that the task of public relations within the community would be a critical aspect of the survival of counselling units and this had to be seen as long term proactive activity. The importance of good intelligence and contacts was emphasised to enable services to locate difficulties before they occurred and to thus approach management with solutions rather than problems.

Understanding Experiences - War and Refugeeism

DR DEREK SUMMERFIELD - SPECIAL ADDRESS
Psychiatrist of the Medical Foundation for the Care of Victims of Torture

I would like to sketch out some of the framework that I think arguably we need to try and capture, that people are experiencing and will continue to experience in relation to the destruction of worlds- which is the business of modern conflict. Not just some kind of personal injury but in the sense of witnessing people around you killed, and being wounded or mutilated yourself, but the way the people have to watch the destruction of their social and cultural institutions, the living values that they are encompassed and carried by those with a sense of history and all that goes with it. Later we'll focus down a bit and actually look at the business of refugee students and some of the queries about that group which have come to the Medical Foundation. Most of all I would like to look at some of the assumptions examined or unexamined which we are carrying as a prelude to trying to understand what someone sitting over there who comes from another culture, with a completely different sense of history and identity and has gone through a series of events which may be construed negatively, but in some ways sometimes can be construed positively. To minimise the mismatch between what we think might be going on before we've even begun to speak to the person and what they may or may not be carrying.

Obviously, no knowledge is ideology free, even science. From the moment we walk into the room and sit down with someone we are carrying values, an attitude, to which may or may not have come through our professional training but certainly come through ourselves as carriers of our own culture and upbringing. I just thought I would show you some slides and leave you to think to yourself what this flashes up for you, do you have any impressions about this kind of person, what they might be carrying if you were likely to meet them. Obviously most of them aren't students you are likely to see in the west but I would like you to shine a light on some of the assumptions that all of us have about what it is like to go through an experience or an atrocity, maybe one or two of you have, certainly your parents will have done, but what is it like, what are people carrying and what do they or don't they want to say about it and what happens over time, or even over generations.

I am going to flash through some pictures. This is a woman who was a survivor of the attack on the hamlet of Mi Li in Vietnam in March 1968 by US Marines when they came there and they killed about 800 people, women and children, and ordinary men in the space of about half hour or so. She is holding a picture of her family as they were photographed lying in a ditch where they were left by the US soldiers. This picture was taken a year ago. 17 years have elapsed since that occasion. Do you have any thoughts on what that's about?

This is a British woman. This is taken two years ago. For the first time she had gone back to the River Kwai in Thailand where her husband had died building the Japanese death railways. As you know, about 10 or 20,000 British soldiers died there in the course of the war. She is held on the spot where I think she feels that her husband's buried. This is some 50 years later.

The following picture is a famous picture taken on June 16th 1976 in Soweto, South Africa. This boy here is 14 years, the first child shot dead by the South African police in the Sowetan riots which took 500 lives. I think this picture here is his brother and sister, certainly close family. They must have witnessed that and are carrying his dead body back to their home. That was taken about five minutes after it happened. I would like you to think about those two. What do you think about them, what do you think they are left with, and what do you think we have to offer and what do you think they might ask of us?

These are very brave people indeed. Guatemala a wonderful culture. More of that later. One of the most advanced civilisations of the last 2000 years. They have been persecuted for 500 years by military elites and land owners. These people in Guatemala City did a very brave thing and that is that they carried pictures of their relatives who have 'disappeared'. Guatemala invented the term, The Disappeared, which is a passive not an active verb. You don't disappear you are disappeared. These people have been gone maybe ten years, sometimes 15 years. They have heard nothing about them. These relatives obviously don't know whether they are alive or dead. They know intellectually that they were likely to be tortured and killed fairly soon after but they don't know for sure. I would like you to think about what it is it about those people, what do you think they need, what does that picture say about their interests and priorities?

This is Iranian Kurdistan. This is a woman who is grieving over the body of her brother who was slain by the Iranian Army fighting for the Kurdish struggle for the commune or some kind of separateness.

This lecture was transcribed from a taped recording. Dr Summerfield spoke without notes.

This is a picture of a woman I know. This is a 17-year old mother in a village in Nicaragua. She had a brother fighting for the Sandanista army and she had another brother who was being paid by the US to be a part of the terrorist force trying to destroy the aims of a social struggle of which I was very much an admirer. She has survived at least two atrocities. Members of her family have been killed in front of her. They have been displaced several times from their rural subsistence life in the hills of East Nicaragua. These are illiterate peasants and now they were down in a safer area near the main road where I lived for a few weeks in one of their huts trying to talk to them and document things. I didn't have to do anything. I had to get something from them for me. I am not trying to bring anything other than some sort of vague idea that their stories constitute a human rights testimony. She gave birth to this baby, she had a boyfriend who was beating her, lots of things going on. She'd lost several members of her family, they had lost everything, they were destitute, refugees and they were trying to rebuild a life on some land the Sandanista government had given them. What do you see there? A victim, a survivor? Who is that?

These are drawings of Palestinian children taken during the Intifada which was the Palestinian uprising against Israeli rule. Israel had ruled their territories since the 1967 war since this so-called uprising when children started to throw stones at soldiers and there was a crisis and there was a blast of bullets in return. In 1989 about 1200 Palestinians were killed or shot by the Israeli army including about 250 children. Some of these children would be wounded, and all of them would have witnessed someone shot dead in the street, or witnessed the raids on their homes in the middle of the night, terrifying raids by the soldiers, witnessed their fathers humiliated and beaten, taken away and the soldiers smashing their furniture, often blowing up their house, invading the school, shooting children in the school grounds, with no refuge in the classroom itself.

Israeli soldiers arrested a teacher in the middle of the lesson, there was no refuge for five years. What we see in these drawings - these are the men and children, the Israeli soldiers here, there are children staring at the soldiers, one child has been shot. Here we see another scene in which cars are burning and flags are being waved and here we see the dove of peace. We can put the children in at least three roles that we might think about, and that is as of active citizen with social ideas and causes, that of victim (and that is the only role we tend to talk about when talking of children,) and that of peace lover, again given a child who can connect his/her ideas to the social mainstream, to a collective cause.

I suppose a question we might ask about is how war makes them 'lose their childhood' and which impinges on their innocence. This is some idea we have (and it is a wholesome idea) of childhood as a pristine time where children are protected and where nothing bad should intrude on them. 150 years ago we had children in the mines in this country.

Another picture of children - children in war zones have in their talk, in their play, in their drawings about 90% of war related deeds. 10% of other things and 90% of war related deeds. These are children in Somalia war with objets d'art. This is a bazooka carved in wood. He has made a hand held bazooka, beautifully made and he is playing with it in front of the other kids. How do you see that? What do you think that kid needs?

This is a cellist playing on a Waterloo bridge' 18 months ago. He is the last survivor of a Sarajevan string quartet. All the other three (the violinists and double bass player) were killed by Serb artillery firing shells. Sarajevo - it has a history of 500 years of multi-ethnic tolerance. It was destroyed in front of our eyes. He is the last survivor and he is also a kind of victim. He came to London and is playing a solo on his cello on Waterloo Bridge to make that point.

Lastly, this is a picture taken in front of a Japanese Embassy taken in Korea about two years ago. This woman is Korean, she was one of 200,000 so-called 'comfort women' as the Japanese army called them. 80% from Korea who were adopted to serve as sexual slaves for the Japanese army as part of their normal rations throughout the war and whose experiences were not even acknowledged by the allies and world crimes tribunals in 1945. That is the price paid by Third World women.

And 50 years later there she is, she is not very happy. She has clenched her teeth, she looks like she is in some sort of frenzied rage and she is protesting outside the Japanese Embassy. She was raped thousands of times 50 years before. How has she lived in those fifty years, she has made it to the age of 72 or so, and now she is in a frenzied rage outside the Embassy - and what do you think she needs?

What it is of course, is that Japan have never apologised for anything done in the second world war at all, let alone paid one penny in reparation. That has put victims of Japanese atrocities on a slightly different trajectory from that of victims of German atrocities - terrible though they were in so far as Germany got back to normal after about 10-15 years and most Nazi convicted criminals got their jobs back and their pension. But certainly from the '60s when my generation started to say to their fathers What Did You Do In The War, I think that Germany has honoured what it did in the war and has tried to say sorry to the people and paid an enormous amount of reparation and above all has lodged what it did in the history books and the school books read by German children and the rest of the world. Japanese children have nothing of this in their school books at all. They know virtually nothing about what the Japanese did throughout South East Asia from the invasion of China in 1938.

It's uncomfortable for me, a white western professional, who has never had his head stood on, to be speaking for these millions of people. There is something dodgy. I want to introduce this by way of assumptions. I work for the Medical Foundation for the Care of Victims of Torture. There are some key words in there. A culture construction for the experiences of war.

We have Medical in the title, does that need to be there? It's got Care - Is that not a problematic word? Does that suggest that it's something to do with asylums, institutions, and warehousing? And it's got Victims in the title, not survivors. The fact that it's got Torture in the title and it's a free standing institution seems to say that torture is a thing apart. That tortured victims are a people apart, an entity apart, an exquisite group that need some sort of different handling. A lot of queries we get from health professionals and health councils around Britain with students and others they encounter are to do with "I don't feel sufficiently skilled to deal with someone who has been tortured, I think we should send them to you as specialists". Suffice to say I have a problem with all these assumptions in our title.

Very briefly there are 50 active conflicts in the world at the moment. 90% of all victims are civilians whereas in the 1st World War only 5% of all those that died were not soldiers. 95% of all those that died in the 1st World War were soldiers in uniform. The 2nd World War was 50%. In Vietnam it was 80% or 90% were civilians. When we try to understand what people are carrying, we understand they witnessed someone close to them have died, or they themselves have been tortured or shot, they've lost their homes. Because people today are carrying something much more complicated, in that is having witnessed the destruction of a social and cultural space which carries what it means to be what they are, their identity.

And since 90% of these people come from non-western cultures and since 95% of the things that have been written about them (especially in Health Literature) come from white western health professionals writing in English and major European languages, isn't there some sort of gulf? Are we sure there is some sort of match?

Briefly one thinks of people who came out of Auschwitz who were not directed to psychological services. People did not think about them like that. It was understood that they had horrific experiences. They were expected to and they wanted to put on weight again. They wanted to return to what remained of their communities and rebuild personal, communal and family lives where possible and most of them did. And most people in Auschwitz and places comparable with that in the 2nd World War have never come into the psychological services in all of their lives. That was 1945. In other words social constructions of a traumatic event like Auschwitz did not automatically embody the idea that they had carried some deep seated psychological injury which required post traumatic therapy. What has happened since 1945?

I think the central theme that is the soil which we can stand on and have a debate about what these experiences mean, is the growth of the dominant psychological idioms within western culture especially in the last 50 years. And it is within the language of psychology and the language of medicine that we draw terms and formulations and meanings that once were provided by religion in the middle ages. Religion provided all the meaning. The dominant language of distress is coded in terms of the medical and psychological vocabulary.

The social constructions and trauma have moved on from 1945 when they weren't particularly psychological to what we have now. Where, never mind Auschwitz and Sarajevo, a lot of other arguably less extreme events such as violent muggings, rape in London or bullying at school, all of these are events that increasingly as a cultural assumption we hold to have the potential for life long psychological effects and alterations of personality.

Once a culture takes this up and makes it familiar then these things require a natural and self evident quality. You don't need to examine them all the time. I have no judgement to make on that. I'm just saying that in the last 50 years we have seen as substantial and one of the major themes of the 20th century has been this growth of this dominant psychological idiom to understanding what people are really about, foregoing what we think is the bottom line in human beings, and the shift of a new kind of vocabulary. You only have to think about your grandparents. What was the kind of cultural coding around for your grandparents in terms of getting through adverse events? It was on the whole something to do with gritting your teeth and getting on. It certainly wasn't to do with talking a lot. It's not for us to make value judgements on whether this is better or worse or more civilised. It's what we do now and counselling has been an area of tremendous growth since 1945 within Europe. Counselling of all kinds and a whole range of experiences which were once handled by your friends and family, and colleagues, are now seen to be the realm of professionals. In some American cities if policemen are involved in shooting incidents, it is now mandatory to go through psychological debriefing. As you know in Britain, if teachers or pupils are killed violently, the next day a team of counsellors arrive. This is the soil - a western soil, our soil.

So now we have a refugee who may or may not be a student from another culture. Coming into our territory he has been stripped of identity. Most of the points of reference which were not only to do with how he was living his life but actually to do with how he defined himself, and he is coming into our culture and looking around to find new points of reference, new allies, new ways of understanding us. It seems important to him or her to understand what we're about and how he

can make himself attractive and intelligible to us in order that we can take an interest in him and help him because he has few other allies. So he has a considerable interest in where we are coming from. If he picks up that, because he has been through atrocities in Somalia we think as professionals, people with clout, people he looks to as figures of respect, that 'though he's doing quite well and wants to study', that we think that because he has been tortured he must have some other more real problem underneath, then already we have influenced the discourse.

That's what I mean by unexamined assumptions. None of this is humanitarianism. I wish to be as fair minded and open as possible. We have carried an assumption about him into the room with him, and some of those assumptions or their opposites I wanted to illuminate by showing you survivors and victims of atrocities from around the world with non-western cultures. They are coming from another place. The debate about torture rates is predicted on western assumptions about individuation; about the individual citizen being the building block of society, and our ideas of identity, are based or expressed in terms of ourselves, and we see an individual as somehow being a separate envelope of feelings and aspirations, and emotions, conflicts, hopes and talents. A separate thing. Much that is written in psychological literature about rape or torture as some sort of exquisite injury to an individual's integrity or individuality. I don't think that serves us very well. Many non-western cultures define identity in terms very much as attachment to something collective rather than I'm a separate individual. In terms of mental life, those sort of things are deemed appropriate and social behaviour is coded much more in terms of the group rather than the individual.

From experience many of the survivors of torture do not start from a standpoint which we can easily identify as individually psychological. They start from the standpoint of their horror and their perplexity about the destruction of their social world. That does not mean that in their own terms they do not have a psychological view. The question is about their psychological norms rooted in their cultural background and how they touch ours. This is an exquisite thing, a power problem. We would hate to put our words into their mouths at the very time when they may be speechless about what's been done to their worlds. And we would see the opposite of what they had been, we are intact, we're in power, we're salaried, we are whole.

What is the person sitting opposite you? Do we see someone who is the opposite of all those things? They have lost their world, they are statistics, they are a marginal person in Britain, they are facing deportation, they have lost touch with a culture in the year within which they knew who they were. I say that because I have become increasingly worried in the last years about the predominance of the kind of trauma debate and the way it has been getting into programmes across the world, in Bosnia and Rwanda. Which is predicated on the idea that at the end of the day there is only one psychology. Surprise, surprise, it is ours. We can take it to Rwanda or Cambodia or wherever you go, and because we assume there is a universal response to stress and - surprise, surprise - our morals capture it. We know better than the Rwandans what is going on in their hearts. I think that this is problematic at every possible level as well as not being able to start where they are and to address the priorities they have. One reason that is often hidden is because, if you are Rwandan you have nowhere else to turn and the only show in town, one of the only services available is the counselling service, you will go to it. Are you necessarily buying into the idea that you have a psychological trauma that requires the expertise of a western professional that has come from 5000 miles away?

In Sarajevo there have been all manner of counselling projects, such as Marie Stopes, tremendous stress projects for women who have been raped. A lot of women spoke to a colleague of mine and said that they went there because it was a warm place, they could meet other human beings, and they could talk about all the things they wanted to talk about. They could even forget about the war and talk about things that were not about the war such as 'is the man the boss?' It is very interesting isn't it. They weren't just talking about the war, but all the men were away in the militias and training camps and the war brought about a different way of how women see themselves and the way they see their relationship with men. So they weren't in there being debriefed from their traumatic stress. They had come for other reasons. So the way that they may be interpreting the word counselling while they were in the room in this counselling project paid for by yourselves is not necessarily what the project thinks they are doing there.

We have to think of their position in a social world which has been impoverished. They have a dynamic and very unstable relationship, particularly in the war zones, between those injured and society. The idea that a war is an extension of the Hillsborough disaster that could be appropriate for a football disaster, you could take Rwanda or Bosnia is just not true. This is a preposterous thing. A single peacetime disaster in a western country leaves the society intact. There is a clear cut event and a clear cut aftermath. They may have been accidents, but they were not intended.

In war zones it is the social world which is impoverished and therefore one of the ways of destroying people, the social world people, their institutions, their valued leaders are targeted. That's why health professionals are targeted for elimination because like that the regime can demonstrate to ordinary people that there are no limits, there is nothing they wouldn't do. 'We will take your nurse and we will cut off her dress and we will carve EM (which is Spanish for death squad) on her body and we will leave it in the middle of the village for you to find in the morning'. This is a statement, this is the political theatre which is intended to render the whole of society in paralysed awe.

At the end of the day this and the effect of trauma is at the heart of it and why I am stressing this cross-cultural inter-exchange is because our culture doesn't necessarily prepare us to get at what the meanings for them and, unless we prime ourselves a little, unless we think about the power problem, we might impose unwittingly and place on them and there is a kind of mismatch about what people can and should do.

Many of these survivors will turn up in western cities, many will become students and the question is what do you feel your position is to assume about what they are carrying and the ways they might think about us. I feel we must be cautious about psychological discourse which we can measure to be universal. I personally think there isn't such a thing as a universal response to students' stressful events. I think every culture has its school house of psychological norms and traditions, and histories and loads of assumptions and where possible, through working with people from other cultures, to have some basic knowledge of some of that must inevitably enrich that kind of understanding.

Can we make assumptions of some of these projects and war zones, can we comfortably re-label all suffering as traumatisation? I think words like stress, trauma, torture are being used in most indiscriminate ways. Sometimes to describe the provoking events and other times to describe the real and putrid psychological events. I think that traumatisation is lost indiscriminately. Sometimes it is being used merely as a synonym for suffering. It's part of the language of distress that somehow words like suffering seem to drop out. When you want to make a point, you reach into the psychological and medical vocabulary, but there are costs attached to that because we then begin a kind of clinical discourse that may not serve the majority of survivors and because it brings with it assumptions of sick roles, about automatic assumptions for the need for invention of various kinds which may or may not turn out to be valid.

The way I suppose I see this, (this is my metaphor), I see this as fish swimming in the sea. What does the sea mean? The sea is where people get biological survival, as the fish do. But is that all the sea means to fish? Obviously the sea means more than that. It is their history, their geography, it is their whole world. It is what it means to be a fish. You can't really say what it needs to be a fish is encompassed by a fish. It is the fish in the sea, it is the whole thing. What it seems to do is to blow the fish out of the sea. A lot of them die - those that survive, especially refugees, are the kind of people you are likely to meet. They have come to rest in a goldfish bowl filled with tap water. The tap water keeps them alive. The goldfish bowl is a kind of environment but it is not much of a world, and they experience it initially as a subsistence. At the widest level, that this is a recovery from war or seems to me to be to do with it, those fish turn the tap water into something that more resembles sea water. And to that extent they can rebuild a social world, each citizen will draw from it his or her resilience, their psychological capacity - their capacity to problem solving and activity and aspiration.

That said, there are clearly going to be a minority - some, certainly in education institutions who need more than that. My basic assumption is that we cannot assume that because you have been through these extreme events, that you should talk about it. I don't even think we can make an assumption about westerners, even though the idea that you should go and talk about it has become something of an orthodoxy and whilst some of these things aren't culturally invented, that is what people do. How do you decide what has happened to you? Say you were raped in Camberwell. Your society on the whole tells you that you ought to go and get counselling for that and if you don't do that, then you might carry a psychological injury even further. For longer than otherwise. On the whole that is what all rape victims in Camberwell will do because those are the socially prescribed courses.

In Ethiopia they describe forgetting in terms of rebuilding their life. Ethiopians call it the act of forgetting. That said, people from all sorts of cultures, do come to the Medical Foundation and a minority do seem to separate some sort of psychological need from their other needs. Most refugees are often concerned about rebuilding a social world. As students they are going to be concerned as other students. They are going to be concerned about their asylum application, they are going to be concerned about housing in London. They know they are competing with other refugees and with various sections of the British population. It's a race. And they are going to have a point of view on us like we have on them. And they are looking (and it's for survival sake) to see how they can attract our attention. How they may get us to act not just as therapists or something, but as advocates for their lives with us. That is important. It doesn't mean I can write a medical report for every application for housing but I know why they are imagining that if a doctor can write a medical report for them they may be more likely to get housing.

So a minority do come through, and I would say only a minority, presenting some sort of clear cut way for some sort of psychological work (counselling) separate from social welfare help. The Medical Foundation addresses people's practical problems on top of which comes implicitly psychological support and recognition, some sort of validation of what they have been through, some sort of recognition that they are having difficulties, and that these things are not forgotten.

If we are looking for something that is universal, it is the absence of societal recognition and validation of something massive and man-made which costs people more. I would like to believe that. I would like to believe that it somehow costs people more than when there has been some validation. That is why I think that in some ways the survivors of the Japanese atrocities have been at a worse advantage than the German ones.

Let me just say that I supposedly see at the Medical Foundation the disturbing end of the spectrum of people who have endured torture, and multiple other kinds of blows, and they are refugees. And I would say (don't draw any strength from this) that serious psychological problems in people who have suffered torture are surprisingly uncommon. I have seen about 400 in my 4 years. Out of the 400 I have admitted 10 to psychiatric hospital for a crisis admission. Just a short term. I have had no suicides. I have had one near suicide. And of the other 390 I suppose I have seen only 30 or 40 on an ongoing basis for a while - more than 6 months. Many of them just really wanted an opinion on college or they were worried about this or that.

So what I am speaking for is for their business of psychological injury or trauma. I am not speaking for their suffering. I think there is a kind of neurosis in the business that if you talk about survival, but not the victim, you are somehow playing down their suffering, but if you talk about the fact, we can't assume that British women raped do have a lifelong psychological injury. I do think that is terribly problematic. To say that somehow says that rape in Camberwell isn't so bad. I think it is philosophical of us, of course, how we assign degrees of badness to events of this kind. And I think we are in a psychological discourse which seems to recognise victimhood more than survivorhood. That puts the refugees in a particular kind of situation.

Just to finish, recently you may remember, there was a woman who was held up as a hostage in a vicarage in Ealing. A prolonged brutal scene, in which she was raped, and there was a lot of threatening behaviour by two men who broke in, because they were burglars. They got longer sentences for the burglary than they got for the rape. And why was that? It was because the judge said that she had recovered so well. And I am only saying that as a rare example in which a system, for better or worse was recognising people doing well, as a mitigating thing when normally there is everything to gain for victims, quite understandably, to present themselves as damaged and hapless as possible. In the issue of compensation, you are more likely to get a psychiatric report if you are a refugee student, and you were a torture case. I think it is a very complicated discourse and the business of how we as health professionals intervene and what we offer is a difficult one. I would plead for us to look to the survivor as much as to the victim. I don't think we need to assume that people who have been tortured are some kind of exquisite porcelain vase and that if you say the wrong word they are going to fall apart. I don't even see that they need to be referred to any kind of specialist centre. As I said the idea of a specialist centre for torture for something that is itself problematic. I see it existing for other reasons.

Above all, don't feel disempowered in relation to people who tell you they have survived atrocities, such as seeing their parents killed. I think that the skills you have acquired over your years of training and experience and that which you would apply naturally to other kinds of problems which students bring you, are precisely the ones that you will need for the refugee group who you know have been through an atrocity. I think actually, that their interests lie in the main attached to and making sense of a social world, they need to be in survivor mode. You must tell them that you expect them to recover., and not offering them only a victim identity. I have just been in Bosnia and their health professionals are saying that of Bosnian women, 1 in 3 will have life long suffering problems. There is no scientific literature on that. We can't just offer people a victim identity. You are in a position to somehow frame it, that you recognise what they have been through, but at the same time you may have some sense of a social and cultural awareness which shapes the way that they may bring it, including the way they look at you, and that the survivor has to be acknowledged as well. You don't have to feel there is something different about that encounter that you wouldn't have with some other troubled student.

A Counsellor's observations on working in an Intra-European context

Craig McDevitt, Counsellor, University of Edinburgh

ABSTRACT. **This paper focused on cross-cultural issues that arise in the context of encounters between people of different European cultures. It suggests that it is not necessary to have knowledge of other cultures but often some theoretical frameworks which the author has found useful for understanding some of the dynamics which arise in the process of the encounter and which help to maintain a state of cultural awareness during the encounter.**

The opportunities to work with counsellors in our own specialist field have increased enormously in the space of little more than eight years. Eight years ago I was invited to represent ASC at a conference on student guidance in Athens. I recall Elsa Bell and myself putting up a notice describing our work and asking to meet people who were also involved in similar work in other parts of Europe. The organisation FEDORA was born at this conference and in response to our notice a small group of student counsellors from various parts of Europe met, networked and finally formed a sub-group within FEDORA. This sub-group was called PSYCHE (Psychological Counselling in Higher Education in Europe) and many of the delegates from other European Union states present at this year's annual conference are members of FEDORA and the PSYCHE sub-group.

This I see as a reflection of some of the great changes in Europe which are sometimes exciting and sometimes difficult and provide us with the increased opportunity of multi-cultural working relationships between the citizens of Europe. In the move towards ever closer political and economic union and the desire to establish and nurture a European identity through providing opportunities for working contacts, the wide diversity of European cultures and the strength of nationalism which continues to be a powerful force in the thoughts and feelings of Europe, is thrown into sharp focus. Although we live in close proximity to each other with frequent contact, it is mistaken to imagine we understand each others' cultures and dangerous to assume that we are not so very different. Unfortunately such assumptions can lead us into a false sense of security and perhaps paradoxically creates anxiety as our own cultural identity is impinged upon.

The diversity of European cultures is great and their effects on the formation of the current identities of the European population are also great and complex. Using the words "current identities" also serves as a reminder that to add to this complexity is our shared history which has caused major trauma and a dramatic reformulation of our national identities during the past 90 years alone. That is a very brief time span. Indeed there are still people alive today who were alive at the turn of the century. Indeed, there will be nobody in this room today, European or non-European, who have been unaffected by these traumatic events in 20th century Europe. These events have shaped not only our national and cultural identities but also our individual identities.

It is not completely fanciful to claim that the historic bullet fired, from the gun of a Serbian nationalist, having impacted fatally on the Austrian Archduke Franz Ferdinand in Sarajevo, continued to have a trajectory which not only combusted the dry tinder of nationalist feeling that was dangerously abundant in that fateful summer of 1914 but continues to impact and reverberate 81 years and 8 months later. It certainly impacted cruelly on my grandmother almost exactly three years after the trigger was pulled thus, rendering my mother fatherless before she was born and leaving her to be brought up by a mother who in grief, despair and desperate need married a man who, psychologically damaged by four years at the front, swung between depression and rage for the rest of his life. The bullet impacted on me 34 years and 10 months into its trajectory and shaped my world view for both good and ill. How has this same bullet impacted on you? How does it affect your view in Europe?

In all cross-cultural encounters the interplay between the individual, society, culture and history is dynamic and complex, each shaping the other and like icebergs most of this happens below the surface, invisibly, subtly. To illustrate this complexity, I pose a simple question. If I were to describe myself as "European", then "British", then "Scottish", a "citizen of Edinburgh", then a "McDevitt, then "Craig" and finally "me", at which point would these descriptions of my identity begin to lose significance to anybody but me in this meeting? Within a group of Europeans, I would guess that the significance would begin to disappear somewhere between European and British. (There may already be some confusion about what European actually means). Many of you might broadly share my concept of "British" but when we come to "Scottish" important differences and confusions may emerge between my self-perception and how you see me. Yet they are all different aspects of my identity and are alive in any encounter I have with other people. They imply the existence of differences which distinguish me from others and these differences have potentially positive and negative consequences for others and myself when I am involved in working relationships with people from other parts of Europe and consequently I have to be aware of them.

To illustrate how this and the power of events in Europe impact on individuals, I offer you the following anecdote. A few years ago I was involved in co-editing a publication which contained a report of a conference of student counsellors in Italy in 1992. On the week that we met, both Italy and the U.K had been forced to withdraw from the European Exchange Rate Mechanism, arousing feelings of betrayal in both countries. France had just narrowly voted to accept the Maastricht Treaty in a referendum. Ambivalence about closer political and monetary union was present in the media and the individual. National feelings consequently ran high. Some English delegates had been mistaken for Germans and had been shouted at in the street. None of the delegates at this event were immune to those external events and our mood was affected. Although this did not prevent us from doing good work together, it did make our task more difficult.

The mood of that time was still affecting us the following year when we were editing the publication. One of the characteristics of Scots (some of us have it, some of us do not) is that we like to speak plainly and directly. Fancy circumlocutions, which are necessary in some cultures, are considered suspect and possibly insincere. I felt that we should mention in the publication the events surrounding the meeting and their effects on the participants because it was interesting and illustrated the reality of some of the difficulties we had successfully overcome. My German co-editor was reluctant to include this, feeling that it went against the spirit of unity at the conference which had indeed been present. My Italian co-editor whose university had hosted the meeting feared that it would give offence to his compatriots who had offered us generous hospitality. During the discussion that followed I felt aware of the cultural attitudes that were involved: a German need for concensus and unity, an Italian need for honouring hospitality and a Scottish need for honesty. My German colleague who is always the peace-maker suggested an acceptable compromise but what made the compromise acceptable to me was that I was able to identify with my Italian colleague's need to avoid insulting the hosts. Honouring hospitality is also important in Scotland where traditionally one was culturally obliged to offer hospitality to the traveller or the stranger. Every Scottish child learns his history books of the infamy of some members of the Clan Campbell who having accepted the hospitality of the Clan MacDonald, got up in the night and slaughtered the whole community of MacDonalds living in Glencoe. The horror of the situation communicated to us is not so much the killing of men, women and children, nor the politics which brought about the whole event but the breaking of the rules of hospitality. It was bad manners, a terrible breach of rules.

Perhaps what I am attempting to illustrate here is the importance of knowing one's own cultural values and attitudes, the importance of valuing them for their uniqueness, congruence and coherence before entering a cross-cultural encounter. Only then can one be prepared to let go a bit, negotiate a bit. This is as important as the value of having done one's own personal therapy when working therapeutically with clients. Right here and now we are involved in a gathering in which most people are Europeans. I would guess that much of this week's activity will be focused on attempting to find areas of commonality. Confluence will be the dominant dynamic. Our capacity for confluence is natural and necessary for the formation of relationships. It brings about cohesion which seeks to ensure the survival of the individual, groups and organisations. We sniff each other for familiar and therefore safe smells like many other animals. If we perceive ourselves as being too different, we become anxious, disturbed, threatened and may wish to withdraw from the encounter with each other. On the other hand, if we ignore the inevitable differences, we will begin to enter an unreal world where we do not really see each other and once we become aware of the incongruence of our perceptions we will also become anxious, disturbed and threatened. If we are too similar, not only will we be barren with little to learn from each other, we will also become anxious, frightened and not a little frustrated as our individuality disappears into some un-differentiated mass. It is important, therefore, that differences do emerge and we seek not only to tolerate and understand them but that we also use these differences creatively.

Toleration and understanding are not easily achieved. Yet they lie at the centre of all therapeutic work. They are vital! Empathy is central to the development of understanding. To understand and to be understood is an important human need. Without the capacity to understand we find ourselves in a state of disorganisation chaos, even madness. We also need to be understood because it is a reassuring confirmation of our identity, that our wholeness is perceived, our internal coherence recognised, understood and reflected back by others. Indeed this interactive process helps form our identity throughout our lives. Naturally, we will not always understand or be understood but we must be aware of the depth of disturbance non-understanding generates. To a greater or lesser degree, when a disturbance occurs to the individual's status quo, it causes the sensation of a disintegration of a carefully constructed world and is accompanied by feelings of anxiety, anger and grief. I expect that some of us will experience a degree of such disturbance during the course of this week.

As I have said, we do not always understand and we are not always understood and the possibility of this occurrence increases when we enter a cross-cultural encounter. Our capacity to contain and tolerate the anxieties which can be aroused in a cross-cultural situation varies from context to context, individual to individual and depends on how secure we feel in our individual identity. Certainly, it is helpful if one can maintain a sense of optimism that sufficient understanding will eventually come. However most useful of all, in my experience, is the knowledge that one is involved in an identifiable process. This can be sufficient to reduce the sense of confusion chaos and attendant anxiety and helps me to remain engaged despite the apparent absence of cause and resolution.

This is not to deny that my experience of and learning from working with people from European and non-European cultures has helped me greatly in working with people from different parts of Europe but I cannot claim that I have an encyclopaedic knowledge of all the cultures I have encountered. Indeed, I believe that although having knowledge of cultures is useful, it is not always necessary. Having knowledge also carries its own dangers because an imperfect knowledge can lead to stereotyping, the development of assumptions which obscure the uniqueness of the individual in relation to their cultures and the world. In other words, the individual may be of their culture, influenced by their culture, but is not their culture personified.

More useful than the knowledge of culture, is the possession of a set of theoretical frameworks which provide me with a map to help me understand where I am in the unexplored territory of cross-cultural encounters. These frameworks help me to maintain a state of cultural awareness and limit the possibility of being overwhelmed by the differences. Such a map may be of use to you or it might help you to identify some landmarks so that you can draw up or modify a map which resonates with you.

Firstly, the discipline of phenomenological/existential analysis, essentially a humanistic approach, helps me to perceive the individual and his relationship to his culture as a whole and validates looking at it as a whole, rather than focusing on the person's inner world alone or the culture alone. Thus, the person is seen as an individual who has a private world and is a member of a social world, which is culturally defined, and these two worlds are perpetually interactive. The individual is influenced by the social world and to some extent influences it. The person also occupies and is interactive with a physical world, the environment. These configurations help me to recognise that external stimuli influence our lives but only in the way we interpret them, according to our subjective relationship to them. This way of conceptualising the development of the individual within their context, helps me when I am confronted with something that I perceive as being too alien and that I might wish to reject as being crazy, stupid, wrong because it disturbs my sense of order, because it disturbs me. Instead I can ask questions, stemming from my curiosity which might lead me along the lines of wondering how a particular individual or group of people have come to think or feel in a certain way.

Secondly, I find a knowledge of psycho-dynamic, object relations theories useful when I am aware of the presence of powerful, unconscious feelings and processes in my interaction with people from other cultures when the potential for the genesis of heightened feelings of anxiety, confusion and conflict are great. I attempt to hold onto the knowledge that I am involved in a process and hold onto a faith that the process will develop and reach resolution if I and others can stay with the process. I remind myself that the anxiety and frustration I am experiencing occurs because something is upsetting my status quo, that something new is confronting me because I am entering the unknown.

I know that the more I enter the unknown, the greater I will sense threat. I understand that fear disorganises our perceptions of the external world and gives rise to fantasies which lead us into a paranoid state in which our internal world begins to be disorganised and the personality, identity, the ego begins to fragment. Thus in extremis, we enter the regressed, primitive state, described by Melanie Klein as the paranoid-schizoid position where the primitive defences are activated to protect an increasingly threatened ego by splitting-off frightening, uncomfortable thoughts and feelings and projecting them into other people, thus turning the recipients into bad objects which, in turn, we must annihilate in order to protect ourselves from their badness. I know that the process of splitting off the bad, and projecting it into others, always works most easily when the recipient is relatively ill-defined, unknown and consequently threatening and I strongly believe this is the central dynamic in the development of racism. Kleinian/Object Relations theory, therefore helps me to identify my own process and other people's. If this defensive, splitting mechanism is not operating strongly in me, identifying the process is sufficient to lessen my anxiety and help me to stay in the difficult situation or help me to decide that the situation is too difficult and that I must disengage, hopefully with grace, in order to reflect before any further engagement.

Lastly, I always find Bowlby's theories on the genesis of separation anxiety very helpful, particularly in times of change with the accompaniment of regression, when I see the re-emergence, in myself or others of the frightened infant who can be activated within us all and who evokes compassion. At the earlier stage in my life, I used to teach English as a foreign language to post-graduate students. Many of these students already had high status careers in their own countries and were generally self-confident and successful people. Unfortunately, their English language skills were often very poor. Within days of their arrival, I would see their confident, rational adult behaviour deteriorate and in the extreme stress of losing their familiar environments, their areas of competence and a language in which they could communicate effectively, the students would begin to manifest the behaviour of infants in their terrible twos.

Bowlby identified that infants are programmed to seek proximity to an attachment figure who supplies comfort and protection from danger at times of distress, illness and fatigue. If a secure base is offered the infant can begin to explore his environment both physically and emotionally. Even so, when we are parted from our secure base, a separation protest occurs. This process does not end in infancy but continues in a latent form and is activated at times of stress and distress. The fear of separation is not only activated when we are faced with the loss or feared loss of the ones we love but is also activated when we encounter change in our environment and implied loss of material objects, beliefs and hopes.

When we encounter people from other cultures we are faced with difference. If we remain open to that difference we will be changed and sometimes that is an unadulterated benefit, sometimes a mixed loss and gain, but sometimes it can also be more of a loss than a gain.

Attachment is also central to nationalistic, patriotic parochial feelings. It is no coincidence that we talk of motherlands and fatherlands, that we personify nations, landscapes and cities and attribute and values to them. They are powerful attachment figures to which we react positively, negatively or ambivalently. Whether we are talking about nations, beliefs, ideals, theories and people to whom we are attached, if there is a threat to the familiar loved object, fear and anger are aroused. If the loved object is perceived as being damaged or destroyed there will be grief.

Currently, there is a great deal of change taking place in Europe. The familiar post-war, cold-war shape and order in which most of us reached adulthood has gone. The economy is unstable. The demand of autonomy of minority ethnic groups is the loudest it has been since 1919. At the same time, the drive towards closer union is also strong. There is disorder, uncertainty and unfamiliarity throughout and how that is experienced and perceived depends on one's geographical, historical, cultural, and personal vantage point. None of us are unaffected by the influence of the changes. The need to pay attention to and stay with the demands, wishes, hopes, fear, beliefs and aspirations of the many cultures within Europe is imperative.

If this year's conference is successful it will be because we have created to some degree a microcosm of Europe thus giving ourselves a European Experience here in Sussex. We will be faced with models and concepts of counselling and student counselling provision which are different from our own, developed from a different basis, a different world view. Some of these models will be attractive, some will challenge or confound our own concepts. Some might even threaten our carefully constructed models which we seek to preserve in the current harsh European economic climate in which personal and financial resources are fully stretched and threatened. However, despite the difficulties of our local contexts, I hope that we will be sufficiently free from anxiety so that we can play creatively and thus learn.

Some Factors That Limit the Effective Counselling of Overseas Students:
Implications for Cross-Cultural Counselling.

Eunice Okorocha, B, Ed (Hons) M.Ed. (Guidance and Counselling), University of Surrey.

Introduction

This paper explores cultural, communication and religious factors that limit the effective counselling of overseas students. It is based on some of the issues emerging from my on-going PhD research project on Counselling and Working with International Students. The research involves interviews and surveys of overseas students and counsellors in selected Universities and Theological Institutions in the UK. This mixed paradigm approach is designed to provide multiple perspectives and cross-data validity checks.

The presence of Overseas Students

The terms 'overseas', 'international' and 'foreign' will be used interchangeably in this paper to refer to students from non-western countries, especially Asia, Africa and the Middle East. The number of overseas students coming to study in the UK continues to be on the increase. Overseas students are now regarded as an important sector of the consumer market on which universities in the United Kingdom of the 1990s are increasingly dependent. According to Allen & Higgins (1994) there is evidence that the market for foreign students is increasingly competitive. The foreign earnings from these students are estimated as several millions per annum. They argue that a satisfied international student is an institution's best advert and therefore the process of recruiting and caring for international students should be seen as a co-ordinated policy.

Some characteristics of overseas students

Transition. Overseas students are people in transition. They have come to accomplish an educational goal with a view to returning home after a successful completion of their studies.
Multi-cultural, multi-ethnic and multi-religious. Overseas students are not a homogeneous group. They come from a variety of cultural, ethnic and religious backgrounds.
Adjustment problems. As sojourners, many experience specific adjustment problems which home students do not encounter e.g. adjusting to a new cultural, a new academic system and new communication style. Very often these difficulties lead to cultural shock, status shock, isolation, loneliness, and homesickness.
Social support systems. Many overseas students are far from home and, therefore unlike domestic students, do not have the social support like family, friends and the community.

Counselling and Advisory Service

Many universities provide counselling and advisory services as a support system to assist all their students. Findings from my interviews and surveys indicate that when confronted with difficulties, overseas students would first turn to their 'friends' who are often fellow foreign students. Very few indicated that they have been to see a counsellor, and even then that has been a result of having been referred by their personal tutors or supervisors.

Factors that limit the effective counselling of overseas students

Overseas students and counsellors' responses indicate that there are issues that create difficulties in cross-cultural counselling. These issues will be discussed under cultural, communication and religion.

1) Cultural Issues
One view of culture focuses on values, beliefs, norms, symbols and as such the total way of life (Pedersen 1996)
On the part of the students these include:
a) Overseas students' *adherence of their own cultural value orientations.* In the family and community oriented cultures of students from Asia, Africa and the Middle East there are established traditional ways of handling personal distresses by meeting with elders. Personal and especially emotional matters are rarely ever discussed with an 'outsider'.

b) *Stigma attached to seeing a professional counsellor.* There is stigma attached to seeing a professional counsellor whose role is often confused with that of a psychiatrist. Such a visit will lead to loss of face among fellow nationals.

c) *Lack of awareness of the role of the counsellor.* As overseas students whose basic assumptions and values are different they do not share the counsellors' conception of the helpers role. Many say they expect guidance to be given in counselling and regard outcome as unsuccessful otherwise.

On the part of the counsellors:

a) Counsellors' adherence to western cultural orientations. Counsellors are trained in the western-oriented models of counselling. Often these approaches are not applicable when counselling students from other cultures. For example the western culture is individualistic and action-oriented but most non-western cultures are collective and religious-oriented . Leong & Elayne (1996) suggest that counsellors should not underestimate the power of the professional socialisation to which they have been subjected in their training. They emphasise that:

The mindless application of the western models without taking into account cultural variables for international students will be doomed with failure, and perhaps cause harm to the international student clients. (p.229)

b) Counsellors' lack of awareness and sensitivity to other cultures. Overseas students indicate that counsellors seem to lack awareness and sensitivity to other cultures. They say they do not expect to be effectively assisted by someone who does not understand them. For example students will not be adequately assisted by a counsellor who does not appreciate the collectivist and family approach to problem solving but will encourage them to be individualistic, assert themselves and take sole responsibility for their own decisions.

c) Counsellors' own culture: Megder (1983) suggests that in order to understand another culture especially in the area of values and attitudes, it is imperative that counsellors understand clearly the values, attitudes and behaviour of their own culture. She recommends that it is only when counsellors begin to understand themselves and the values of their world can they begin to understand and appreciate others and the values they have.

d) Generalisation and stereotypes. It is important to state that some of the issues referred to in this paper as typical of non-western cultures are generalisations. Individual differences do exist depending on some of these variables: length of stay in the UK, age, course of study, backgrounds and where the student is on the continuum between functional adjustment to the host culture and assimilation.

Sue & Sue (1990) point out that although it is crucial for western cultures to have a basic understanding of counselling characteristics of non-western life values, there is the ever-present danger of over generalisation and stereotyping. They maintain that generalisations are necessary, for without them we would become inefficient. However, generic ideas should be regarded as guidelines for our behaviours, to be tentatively applied in new situations, and should be open to challenge. If held creatively generalisations are useful if they do not become stereotypes which can be destructive to relationships. They define stereotypes as rigid preconceptions we hold about people who are members of a particular group, whether it be defined along racial, religious, sexual or other lines. They stress that the danger of stereotypes is that it is impervious to logic or experience because all incoming information is distorted to fit our preconceived notion.

Stereotyping can multiply the effect of transference and countertransference between clients and counsellors.

2) Communication Issues
Verbal.

Overseas students have indicated that the difference in communicative style often limit the effective help a counsellor can give them. For most, English is a second or third language. Although some are fluent in English yet they find local terminology and figures of speech difficult to understand. This may lead to inappropriate use of language because they are not fully aware of social conventions. (Okorocha, 1995).

The western counselling approach presupposes that clients will talk about their feelings and express their emotions. For the international student there is the cultural inhibition of not expressing one's feelings to a non-family member which is compounded by the added handicap of expressing one's deeply held feeling adequately in a foreign language.

Non-Verbal.

Various cultures provide specific interpretations for variations in speech, facial expression and other non-verbal cues. This means that the non-verbal communication patterns of overseas students can be grossly misinterpreted by counsellors who do not know them. I have often used eye-contact as the commonest illustration to show that while physical communication may occur in all cultures, meanings of certain gestures and physical behaviours may vary considerably or even opposites (Okorocha, 1996). African and Asian students, (especially new arrivals) will avoid looking at someone they consider older or professionally superior straight in the eye during a conversation. Although this is a mark of respect in their culture, it has the opposite effect in the UK because in the British culture avoidance of eye contact is regarded as shiftiness, dishonesty or insincerity.

The Chinese hand gesture of signalling to come closer is the same as the western hand gesture to get away! (Ho, 1973).

3) Religious Issues.

UK universities are undoubtedly multi-faith environments and people's beliefs will have some bearing on their behaviour and values. It is important to note that there are varying degrees of commitment to an individual faith and members of the same faith do have different levels of devotedness. One view is however common:

> For many overseas students, there is a sense of disappointment or even shock that England appears to be a highly secularised rather that a 'Christian' country where religion is not now given much attention. (Nacosa 1988: 33).

Religious beliefs can create barriers. For example, a Muslim lady will not shake hands with any male and a Muslim male will be reluctant to see a female counsellor. A committed Christian will not be happy to see a counsellor who will not take his/her personal faith into consideration in a helping situation. As Augsburger (1986) pointed out, *Faith issues, faith values and the practice of faith are central in healing and wholeness.*

Factors that will enhance effective counselling of overseas students.

i) Given the population of overseas students in the UK, it is impossible for a counsellor to know everything about every culture represented by overseas students. What I advocate is a sensitivity to a range of cultures. (Okorocha, 1995). This means that counsellors need to *acknowledge cultural differences,* develop a sound understanding of their own cultural values and the way their own cultures affect people from other countries.

ii) Counsellors need to *bracket off their assumptions*, preconceived ideas and stereotypes and enter the helping relationship with an open mind. It is important that overseas students be treated as individuals because they are not a homogenous group. To gain a better understanding of individuals it is important to adopt a holistic frame of reference and explore the unique and simultaneous influence of cultural specificity, and human universality (Cox, 1982) This means a creative combination of universalist and culture specific approaches.

iii) It is essential for counsellors to *broaden their knowledge* of other cultures through reading books, structured training workshops, and in-service programmes. By enlisting students as 'teachers' counsellors can 'learn' about specific cultural and religious issues from their overseas student clients. For instance, informal group sessions where cultures are discussed could be educative to all and enable overseas students to overcome passive deference to counsellors and help build up their self-esteem.

iv) *Flexible approach.* To enhance effectiveness in the counselling of international students would imply that counsellors are able to adapt approaches to suit their clients. For instance while some overseas students may prefer a problem solving/directive approach others who have had a longer interaction with the host culture may prefer a client-centred/non-directive approach. According to Pedersen (1991) if counsellors seek to translate counselling to the culturally different, they need to understand the relative importance of each formal or informal combination of helping alternatives.

v) Counsellors also need to modify their communicative style to accommodate their clients' because English is a foreign language to most overseas students. It is important to clarify verbal and non-verbal issues to avoid gross misinterpretations. There is also the need to modify client expectations of the counselling process, and develop their social skills to enable them to cope better with the cultural adjustment process.

Conclusion.

The main thrust of this paper is to raise awareness and, hopefully, sensitivity to some understandings of cultural, communication and religious issues that often limit effectiveness in the process of counselling overseas students. Attempt has also been made to recommend factors that will assist in enhancing the help given to students studying in a different cultures. This calls for cultural effectiveness as Augsburger (1986) aptly points out: *to be culturally effective is a gift, a gift received through learning from other cultures, through being teachable in encounters with those who differ, and through coming to esteem other world-views equally with one's own.*

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Counselling Students From Other Countries
Based on the findings from Hofstede's Research

Colin Lago
University of Sheffield

It is not enough to say "the Italians are....." or the Germans are ...."

Counselling is interaction. Where does cultural difference impact?
In each of the participants? and/or in the space between?

First of all we have to say what we are! it is important that we have a conscious knowledge of who we are, culturally speaking.

Exercise: "the British are ...."

Notes of Caution

Descriptions of other cultures might say as much about the describers as the described!

Descriptions of other cultures always run the risk of being too simple, too reductionist, not accurate enough ... too stereotyped.

Culture is complex .....
Embrace complexity, it is your friend!
(Paul Pedersen)

From Hill, R. (1993)

"Heaven is where the police are British, the chefs French, the mechanics German, the lovers Italian and it is all organised by the Swiss".

"Hell is where the chefs are British, the mechanics French, the lovers, Swiss, the police German and it is all organised by the Italians".

Comments on National Cultures:

The British. "Heavy fog over channel, continent cut off".
Times Headline

The French. "How can one be expected to govern a country that has two hundred and forty six kinds of cheese?"
Charles De Gaulle

The Germans. "The Germans always buy platform tickets, before they storm on railway stations."

The Belgians. "Belgianisation - the abandonment of natural responsibility in favour of totally commercial values".
Leon Trotsky

The Swiss. "The Swiss are not a people so much as a neat clean quite solvent business".
William Faulkner

The Austrians. "We're clever people. We turned Hitler into a German and Beethoven into a Austrian".
Austrian Joke

The Finns. "In Finland, as in other peripheral places like Britain and Portugal, people refer to Europe as if it were somewhere else"
The Economist

Understanding Cultural Metaphors

From *Understanding Global Cultures* by Martin J. Gannon and Associates.

Geert Hofstede (1980a, 1980b) completed a questionnaire study at IBM Corporation involving both its managers and employers in 40 countries in which he demonstrated that national cultures explained 50% of the differences in attitudes; after additional data were collected, the study included 67 countries and 117,000 respondents. In fact, culture explained more of the difference than did professional, role, age, gender, or race. A comparable but earlier study of 3,600 managers in 14 countries places this figure at 30% (Haire, Ghiselli & Porter, 1966). Given such studies it seems that culture influences between 25% and 50% of our attitudes, whereas other aspects of workforce diversity such as social class, ethnicity, race, sex and age account for the remainder of these attitudinal differences.

Culture operates subtly, often on the unconscious or semiconscious level, and it has been aptly compared to a computer programme that, once activated by a few commands or stimuli, begins to operate automatically and seemingly in an independent manner (Fisher, 1988, Hofstede, 1991).

Today, approximately 800 million individuals speak English, which has become the international language, thus creating both opportunities and pitfalls for native of English-speaking countries.

However, knowing a country's language, although clearly helpful, is no guarantee of understanding its cultural mindset and some of the most difficult problems have been created by individuals who have a high level of fluency but a low level of cultural understanding.

The man conclusions of Hofstede's study were as follows:

(1) Individualism can be correlated to a large extent with national wealth. Understandably the northern European countries lie at the 'individualistic' end of the scale with, perhaps surprisingly, Austria and, not so surprisingly at the time, Spain trailing behind Portugal even further to the back of the pack.

(2) Power Distance, which means the extent to which a society accepts the fact that power in organisations is unevenly distributed, is low in northern European countries (Scandanavia, the UK and Germany) and relatively high in France, Belgium, Italy, Spain, Portugal and Greece. Fortunately the extreme attitude quoted in the section on the Belgians (chapter 3), namely "the boss is out and no decisions are taken in his absence", is hardly true any longer of Belgium, German, French or other continental industries although there are still some examples around.

(3) Uncertainty Avoidance, the extent to which a society feels threatened by unsure and ambiguous situations, is lowest in Denmark and higher in Germany, Austria, Switzerland and Finland, as well as in the High Power Distance countries of the Mediterranean.

(4) Masculinity versus femininity, which represent opposing poles in social attitudes (showing off, 'performing', achieving, 'big is beautiful' versus putting personal relationships, respect for quality of life etc. before money) rates the German-speaking countries as relatively 'masculine' and the Netherlands and Scandanavia as 'feminine'. The record in the case of the Mediterranean countries is mixed: Italy and Greece turn out to be very 'masculine' while Spain, contrary to the macho folklore, proves to be 'feminine'.

Figure 1
The Power Distance Dimension

Small Power Distance	**Large Power Distance**
Inequality in Society should be minimized.	There should be an order of Inequality in this world in which everybody has a rightful place, high and low are protected by this order
All people should be interdependent.	A few people should be independent, most should be dependent.
Hierarchy means an inequality of roles, established for convenience.	Hierarchy means existential inequality.
Superiors consider subordinates to be 'people like me'.	Subordinates consider superiors as a different kind of people,
Superiors are accessible.	Superiors are inaccessible.
The use of power should be legitimate and is subject to the judgement as to whether it is good or evil.	Power is a basic fact of society that antedates good or evil. Its legitimacy is irrelevant.
All should have equal rights.	Power holders are entitled to privileges.
Those in power should try to look less powerful than they are.	Those in power should try to look as powerful as possible.
The system is to blame.	The underdog is to blame.
The way to change a social system is to redistribute power.	The way to change a social system is to dethrone those in power.
People at various power levels feel less threatened and more prepared to trust people.	Other people are a potential threat to one's power and can rarely be trusted.
Latent harmony exists between the powerful and the powerless.	Latent conflict exists between the powerful and the powerless.
Co-operation among the powerless can be based on solidarity.	Co-operation among the powerless is difficult to attain because of their low-faith-in-people norm.

Figure 2
The Uncertainty Avoidance Dimension

Weak Uncertainty Avoidance	**Strong Uncertainty Avoidance**
The uncertainty inherent in life is more easily accepted and each day is taken as it comes.	The uncertainty inherent in life is felt as a continuous threat that must be fought.
Ease and lower stress are experienced.	Higher anxiety and stress are experienced.
Time is free.	Time is money.
Hard work, as such, is not a virtue.	There is an inner urge to work hard.
Aggressive behaviour is frowned upon.	Aggressive behaviour of self and others is accepted.
Less showing of emotions is preferred.	More showing of emotions is preferred.
Conflict and competition can be contained on the level of fair play and used constructively.	Conflict and competition can unleash aggression and should therefore be avoided.
More acceptance of dissent is entailed.	A strong need for consensus is involved.
Deviation is not considered threatening, greater tolerance is shown.	Deviant persons and ideas are dangerous, intolerance holds sway.
The ambiance is one of less nationalism.	Nationalism is pervasive.
More positive feelings towards younger people are seen.	Younger people are suspect.
There is more willingness to take risks in life.	There is great concern with security in life.
The accent is on relativism, empiricism.	The search is for ultimate, absolute truths and values.
There should be as few rules as possible.	There is a need for written rules and regulations.
If rules cannot be kept, we should change them.	If rules cannot be kept, we are sinners and should repent.
Belief is placed in generalists and common sense.	Belief is placed in experts and their knowledge.
The authorities are there to serve the citizens.	Ordinary citizens are incompetent compared with the authorities.

Figure 3

The Individualism Collectivism Dimension

Collectivist	**Individualist**
In society, people are born into extended families or clans who protect them in exchange for loyalty.	In society, everybody is supposed to take care of himself/herself and his/her immediate family.
'We' consciousness holds sway.	''I' consciousness holds sway.
Identity is based in the social system.	Identity is based in the individual.
There is emotional dependence of individuals on organisations and institutions.	There is emotional independence of the individuals from organisations or institutions.
The involvement with organisations is moral.	The involvement with organisations is calculative.
The emphasis is on belonging to organisations, membership is the idea.	The emphasis is on individual initiative and achievement, leadership is the idea.
Private life is invaded by organisations and clans to which one belongs, opinions and predetermined.	Everybody has a right to a private life and opinion.
Expertise, order, duty and security are provided by organisation or clan.	Autonomy, variety, pleasure and individual financial security are sought in the system.
Friendships are predetermined by stable social relationships, but there is need for prestige within these relationships.	The need is for specific friendships.
Belief is placed in group decisions.	Belief is placed in individual decisions.
Value standards differ for in-groups and out-groups (particularism)	Value standards should apply to all (universalism).

Figure 4
The Masculinity Dimension

Feminine

Men needn't be assertive, but can also assume nurturing roles.

Sex roles in society are more fluid.

There should be equality between the sexes.

Quality of life is important.

You work in order to live.

People and environment are important.

Interdependence is the ideal.

Service provides the motivation.

One sympathises with the unfortunate.

Small and slow are beautiful.

Unisex and androgyny are ideal.

Masculine

Men should be assertive. Women should be nurturing.

Sex roles in society are clearly differentiated.

Men should dominate in society.

Performance is what counts.

You live in order to work.

Money and things are important.

Independence is the ideal.

Ambition provides the drive.

One admires the successful achiever.

Big and fast are beautiful.

Ostentatious manliness ('machismo')is appreciated.

It is not possible to reproduce the three diagrams which were shown at this point to illustrate (1) Power Distance and Uncertainty Avoidance Scales, (2) Power Distance and Individualism Scales and (3) Uncertainty Avoidance and Masculinity Scales in relation to 40 countries.

The German Symphony
from *Understanding Global Cultures* by Martin J. Gannon and Associates

Germans tend to have a deep longing for unity.

The essence of Germany can be experienced through the eyes and ears of the symphony. Symphonic music was created as an art form in Germany in the 16th century.

The music and their performers are brought together by the conductor.

So that they perform as one, at the literal level of the meaning of the term in concert.

West Germany with its population of 62 million boasts approximately 80 symphony orchestras.

Germany music is not only integral but also serious, it is not generally an outlet for emotion and craziness as it is in the United States and other societies.

The Germans

... "are a philosophically inclined people" Hill, R. (1993) (p.79)

... German thinkers "created the core of European humanism". Hill, R. (1993) (p.80)

... "The Germans are the most conservative and cautious people in Europe".(p.81)

... "The underlying motive is insecurity"... (p.81)

... Essentially the German's mind is supportive whereas the British mind is disruptive.(p.81)

... Insecurity catalysed into a highly developed sense of social conformity, a particularly German version of what will the neighbours think? (p.83)

... Rules are there to be obeyed... (p.84)

... The Germans fear society without order and organisation and so defer to older systems of guidance.... addiction to civic virtues... (p.86)

... Like the Japanese the Germans have both a work ethic and the patience to find the right answer... (p.88)

Traditional British House
from *Understanding Global Cultures* by Martin J.Gannon and Associates

We shape our dwellings, and afterwards our dwellings shape us.
Winston Churchill (speech on Rebuilding the House, October 28, 1944).

A traditional British house is built to stand the test of time. It is almost always brick but can be made of stone or concrete.

A British person could find his or her way around a three bedroomed semi (a semi-detached house or duplex) anywhere in the country.

Without the presence of the royal family, some of the mortar that holds the traditional British house together would surely decay.

Britain had always been a jealous guardian of its freedom of action, proud of its solitude. The British preferred at all times to be victims of their own mistakes rather than to trust the judgement of other people. (Barzini, 1983, p.61)

We have taken a look at the British character as exemplified in the traditional rigid, but long lasting brick houses, and suggested that the strong sense of history is the foundation on which society rests today.

For the most part, there is only one "right' way to do just about anything,

This emphasis on manners and knowing your place continues as one grows. A result of this restraint is the well known British reserve in adults. Most, if not all, Britons have at least one thing in common: A respect and a strong desire for privacy.

Britain is about half the size of California, but its population of 57 million people exceeds that of California by some 30 million. In the European community, the average population density of 146 people per kilometre, but in Britain it is 235.

Because physical distance is not possible, the only available protection of personal space is psychological distance.

Orderliness, patience, and unexcitability are hallmarks of British behaviour.

In a 1992 survey, 29% said they were middle class and 65% working class ("Turning in", 1992).

One is born into a class, and it is difficult to move from one class to another.

The British tend to think highly of anyone who suffers set-backs and perseveres, whether success comes is less important.

British heart tends to go to the underdog.

The British have a basic aversion to seriousness and prefer to lighten most events with humour.

Perhaps this love of humour comes directly from the British culture, in which a direct display of feelings is suppressed.

One should be right on time or up to several minutes late, but never early.

They avoid being direct for fear of offending someone.

Further, in Hofstede's (1980a) cross-cultural study of 40 nations, the British clustered with those countries that seek to avoid uncertainty.

Paradoxically, the average Briton, will obey any rules that are spelled out or stated, in exacting detail. Their strong sense of order and tradition dictates that they do what is right.

The most important abilities of managers are seen as conducting meetings efficiently and having good relations with subordinates. It is a convention that instructions should be disguised as polite requests. Combined with British reserve, this makes for a distant relationship in which both sides are constantly on their guard. Fairness is the most important arbiter of management style.

Ideas and opinions are normally encouraged, but their value to the group depends heavily on the status or seniority of the person stating them.

In addition, Hofstede's (1980a) study points out that the British accept only small power distances between individuals and that all people should have equal rights. However, because there is a great emphasis on status and deference, subordinates are fairly comfortable being told what to do and are less likely to think of questioning an order from a superior of any type than are their American counterparts. For example, few people would consider questioning a doctor's advice or a teacher's wisdom.

Although the British are seen as being more individualistic than collectivist in Hofstede's study "individualism" in the British sense tend to find its form in eccentricity and nonconformism rather than self-initiative and competition. They also are often uncomfortable and unwilling to take a stand unless they know the group consensus will support them. A concern to avoid disharmony among group members will smooth over all but the most fundamental disagreement.

Britons also normally prefer to work in the security of a group within an established order with which they can identify. Motivation comes when they see the work as useful to themselves and others and that it strives toward to common goal. The basis of social control in Britain as in most Western nations is persuasion and appeal to the individual sense of guild at transgressing social norms and laws.

Most British will identify hard work, education, ambition, ability and knowing the right people as the methods of getting ahead.

The Italian Opera
from *Understanding Global Cultures* by Martin J. Gannon and Associates

Using the metaphor, we focus on four distinctive characteristics of opera and demonstrate how they illustrate Italian life:

1. The spectacle and pageantry itself and the manner in which the opera-like activities are performed in Italian daily life.

2. The use and importance of voice to express words in a musical fashion

3. Exteriority, which refers specifically to the belief that emotions are so powerful that an individual cannot keep them within and must express them to others, and

4. The importance of both the chorus and the soloists, which reflects the unity of Italian culture (chorus) but also regional variations, particularly between North and South,.

French Wine
from *Understanding Global Cultures* by Martin J. Gannon and Associates

Just as there are 5,000 varieties of French wine, so too there is a wide variety of French idiosyncrasies and personalities.

To focus this discussion within the metaphor of French wine, five principle elements of wine will serve as a guide: (a) purity, (b) classification, (c) composition, (d)suitability.

The French, much like Americans, have a romantic view of their country as special and unique. Like a flawless bottle of vintage wine, it is as if God had decreed that there be perfection in the land and people of France. They have mentally messaged the image of their borders into a hexagon that is perfectly situated midway between the Equator and the North Pole, balanced in soil and climate, symmetry, balance and harmony.

Classification
Similarly, French society is also clearly stratified and divided into four principal and generally non-overlapping classes, The haute bourgeoisie, which comprises the few remaining aristocrats along with top business and government professionals, the petite bourgeoisie, or owners of small companies and top managers, classes moyennes, or the middle class - that is, teachers, shopkeepers and artisans, and classes popularise, or workers.

To the consternation of Americans trying to do business in France, the French tend to tolerate disruptions for the sake of human interactions, because, to them, it is all part of an interrelated process. This toleration makes planning difficult, even for the French. After all, given life's uncertainties, one never knows what obstacles may prevent promises from being kept.

The French tend to work hard and prefer to be their own bosses.

Geert Hofstede's (1980a) analysis of 40 nations in terms of four cultural dimensions tends to confirm the profile of the French and its apparent contradictions that emerge with the use of the wine metaphor. It is no surprise that the French tend to accept a high degree of power distance between individuals and groups in society and to dislike uncertainty, preferring to be in familiar situations and working with long-term colleagues. But they also tend to be individualistic and even iconoclastic, and so France clusters with other nations that value a high degree of individualism.

Still Hofstede shows that France is a "feminine society" in which aggressiveness, and the desire for material possessions are of much less importance than the quality and pace of life. The French have deep-seated needs of security and getting along with insiders, colleagues, and family members. In short, the French accept centralization and bureaucracy, but only insofar as it allows them to be individualistic and buffers them from life's uncertainty so that a high quality of life can be maintained.

An integral part of maintaining this high quality of life in France is conversation.

There is an innate restlessness in the French to explore every conceivable issue or topic through lengthy and lively conversation.

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Workshop: Affirming Diversity
Working affirmatively with clients from sexual minorities

Charles Neal, Psychotherapist and Founding Chair of The U.K. Association for Lesbian, Gay and Bisexual Psychologies.

Are counsellors reinforcing bipolar notions of sex and gender? Are we pathologising clients from sexual minorities? Is this particularly damaging when working with clients' in transition', as younger students are in relation to establishing identity? How can we ensure that we affirm diversity and value the sexuality and personhood of each client equally? These questions brought participants to this interactive and exploratory workshop for diverse reasons.

Goals were to heighten awareness, dispel myths and prejudices, share personal and factual information, support efforts to affirm diversity and to learn in an enjoyable way. Working assumptions were that homophobia and heterosexism are devastating forms of oppression which harm individuals and our whole culture; that these pervasive oppressions are not our fault though we must accept responsibility for them within ourselves; that individuals, organisations and cultures can and do grow and change for the better; that working to end sexism, heterosexism and homophobia are lifelong processes and that a community in which all people are equally respected, valued and supported is worth working hard to achieve. We agreed to keep shared personal information confidential, to be non-assumptive, non-blaming and respectful towards one another, to personalise knowledge and to take care of our own needs while we worked.

Life is always diverse in its manifestations. Maintaining status quo is a human activity borne of anxiety and fear of change. As counsellors privileged to work with clients on their life process we know this. 'Failure' (a revealing concept in itself) of any sort can be traced not to lack of ability, but to our tendency to maintain that condition with which we have learned to feel most at home at the expense of all else. In this sense we deny the process of life itself, for it is essentially fluid, never still, never the same hour upon hour. Culture and psyche are, therefore always in transition.

Transitional living

My own life is diverse and transitional: for example, I have done a wide range of things for work and enjoyed a wide variety of relationships with myself and others, including a range of sexual relationships. I have no certain ideas about what my life will be like in future, if it goes on, though I have dreams. For the time being, in my busy London psychotherapy, training and supervision practice, I have particular interests in working affirmatively with lesbian, gay and bisexual clients and with creative artists and performers, with individuals, partners or 'families' and ongoing groups and in workshops on issues of diversity.

I founded the Association for Lesbian, Gay and Bisexual Psychologies in the UK. and am a founder member of its European counterpart, ALGP-Europe. With my friend, Dominic Davies, I have recently co-edited **'Pink Therapy- a guide for therapists and counsellors working with lesbian, gay and bisexual clients'.** I feel proud of this important book, the first British one to address these issues comprehensively and make a considerable contribution to a long overdue debate about challenging oppressive practices in therapy and counselling training, supervision and practice. The ideas discussed here will be found thoroughly elaborated there and I'm very grateful to Dominic and the other contributors for all I've learnt from their expertise.(1)

I am also proud of my part in creating an enduring, loving gay male partnership, in which we have co-parented two delightful young men since infancy: this is a real achievement (one shared by the very many people of goodwill involved) in a homophobic culture.

Sexuality is always in transition, too. Identities are historically and socially located. Sub-cultures grow and decline. It is useful to subvert bipolar, divisive ideas and attitudes about supposed differences between genders, sexes and persons of different sexual orientations with pictures of a continuum of human sexual experience, from totally 'heterosexual' to totally 'homosexual' with many, many stages between and the idea that some people always stay in one place and others move as their circumstances or personal process allows. 'Coming out' then attains much wider connotations of gradual exploration, validation and celebration of the whole self without splitting off sexuality. We also challenge damaging notions of 'us' and 'them' and affirm instead the uniqueness of individuals, the diversity of experience and the links between people.(2)

Talking about love

There are inadequacies in our language for talking about the subtleties of sexual feelings and experience and we try, in this culture, to control by naming. We talk, for example, of a person as 'a lesbian', as if her sexuality made her a thing. Rather, it is a process: might 'lesbianing' be more accurate perhaps ? We identify ourselves as 'gay', or 'a man', as if we are our sexuality or our gender, rather than as if these were expressions of ourselves through feelings, thoughts, desires and behaviours. Our language for feelings and relating is impoverished compared to some others. Sanskrit, for instance, has ninety-six terms for 'love', Ancient Persian has eighty and we have one: this is revealing of our different concerns as cultures.(3)

In order to proceed, we need to share a language and some definitions of the terms we will all be working with(4):

'Gay' and 'lesbian' and 'bi'

have for some time been adopted, (in preference to the pseudo-scientific term, 'homosexual'). as a description of their sexual orientation, by people who desire and love their own gender. A great deal of time and energy has been wasted trying to find 'causes' for these diversions (previously, inaccurately, called perversions) from the majority forms. One has only to glance at the natural world to notice that all creatures, all human characteristics, all expressions of life, are diverse. A more interesting question is why human sexuality should be otherwise.

Nowadays some lesbians and gay men refer to themselves as 'queer', 'dykes', 'fags', 'queens', 'marys' (thus defusing some of the insults used against us) or use other terms. It is important for practitioners not to impose their own preferred terms on clients but to *encourage clients to self-identify and to use the client language*. 'Gay' is sometimes used as a shorthand for lesbian women, gay men and bisexual people and applied to working with those from other sexual minorities such as transsexual or asexual people. It can, however, be seen as oppressive in itself to be incorporative in this way, as these different experiences demand acknowledgement for themselves.

Defining the terrain

Bipolar (two poles) refers to theories, attitudes and beliefs which hold, assume or imply that there are just two sexualities. Sometimes these are attached to two supposedly 'opposite' genders (male and female) or types (masculine and feminine) and at other times to oppositional notions of 'gay' and 'straight' (homosexual and heterosexual). *These ideas have no basis whatever in biology or in human experience of the complex sexual continuum.*

Oppression is the *systematic subjugation of a disempowered social group by a group with access to social power*, i.e. the availability of resources to get what they want and to influence others.

Heterosexism is the *institutionalising of the prejudice that heterosexuality is a superior, or more moral or natural, form of sexual identity than other forms, and the only acceptable or viable life option*. Society oppresses people from sexual minorities in complex ways through its institutions, including education and training, religions, work and cultural forms. Many people from sexual minorities will experience multiple oppression: for example, as a black woman *and* as a lesbian, or as a gay man *and* as someone with a physical disability. Heterosexism is a system of advantages for one sexuality only which excludes the needs, concerns and life experiences of all others.

Homophobia refers to *feelings of anxiety, disgust, aversion, anger, discomfort, fear and even hatred* which some heterosexual people experience around lesbians, gay men and sometimes bisexuals. Homophobia has its roots in sexism and includes prejudice, discrimination, harassment and acts of intimidation or violence brought on by that fear and hatred. It can be subtle or obvious.

Anti-gay prejudice is more of a cultural or socialised manifestation of such fear, *arising from faulty and inflexible generalisations applied to whole groups of people*. Often based in ignorance, this is closely bound up with sexism and heterosexism in our cultural forms and norms.

Biphobia is a fear of, and prejudice towards, bisexuals. It is sometimes used to describe *anti-bisexual* sentiments of some lesbians and gay men, as the objections of heterosexuals are directed towards the homosexual component of a bisexual identity and so are homophobic. Probably more often a prejudice or bigotry than a real phobia.

A heterosexual ally is a heterosexual who *honours sexual diversity and acts accordingly* to interrupt and challenge heterosexist and homophobic words and actions and is willing to explore these forms of bias within him-, or her-, self.

Internalised homophobia is a concept meaning the fear, loathing or anxiety experienced by a person towards their own homosexual feelings, thoughts or behaviours. Since these are responses to external systems of prejudice this *should more properly be referred to as 'internalised oppression'*. A range of clinical manifestations have been identified including rationalisation, self-harm, erotophobia, rigidity, denial, projection, introjection and identification with the oppressor.

Working with goodwill

The purpose of the 'gay affirmative' guidelines set out in 'Pink Therapy' (5) is to augment and challenge the deficits and heterosexist assumptions built in to most theoretical models and practices. We assumed goodwill from practitioner readers and believed most people not familiar with minority sub-cultures needed information, not blame. Growing up heterosexual within a heterosexist culture makes it difficult to know adequately about, and appreciate, sexual minorities.

Practitioners may be presumed heterosexist, or become the object of client projections, and some clients or supervises will self-censor or operate forms of 'passing' as a result. Where practitioners demonstrate willingness to work through their own biases, along with openness to diversity and knowledge of subcultures, their heterosexuality has *not* been experienced as a barrier by clients and trainees.

Growing and living from infancy with a stigmatised identity means, however, that lesbian, gay and bisexual experience *is different* from heterosexual experience in some key respects. Let us now turn to some of the issues which may be central for clients.

Key issues:

(I) 'Coming Out' is probably the most distinctive issue for sexual minorities. Coming out is a complex and gradual, often lifelong, process of intrapsychic and interpersonal development extending well into adulthood with a range of different outcomes, *not a once-and-for-all event.* Moving from discomfort or distress with the vague experience of 'difference', through acknowledgement, self identification and acceptance, the person comes to appreciate and value their sexuality and to integrate it into their life and identity. The developmental goal is the *full and healthy integration of a formerly stigmatised identity*. This process is crucially inter-related to the development of personal and social identity, self esteem and authentic, satisfying relations with others. Clients will be working on several developmental tasks at once since the phases are not linear or sequential, but inter-dependent, each with tasks requiring resolution.(6)

Young people who have sex with their own gender may not identify as gay, lesbian or bisexual then or ever. Evidence shows that most people experiment. Those who do so identify may encounter verbal or physical abuse, ostracism or rejection in their homes, schools, colleges, workplaces and communities. Shame and secrecy over emergent sexuality is a major cause of stress, illness and self-harming behaviour, including suicide, in young adults.(7)

'Passing' is a way of describing *over adaptive behaviours* of people from minority sexualities in circumstances where being' out' is felt not to be viable. It results from oppression and stigma, and operates to inhibit dress, language, bodily postures, actions, behaviours, social contacts, cultural references, conversation, disclosure of thoughts or feelings, or of personal circumstances in order to enhance safety and privacy and reduce exposure to harm. It refers to an elaborate set of signs, codes and structures, censors and sensors built up over a person's life, as well as over generations of the history of the sexual minority.(8)

(II) Finding a place in a 'community' While the idea of separate sexualities is culturally based, these minorities have a long history and identity, which has strengthened in response to oppression so that recently, in Western industrialised societies, there has been an unprecedented growth of sub-cultural 'community'. There is *no single entity* called the gay (or the lesbian or bisexual) community.

Rather, there exist *diverse communities* based around a huge variety of interests: individuals may be 'members' of one or many or none (9). Opportunities for meeting other lesbian, gay or bisexual people outside major urban centres are often extremely limited and this will probably inhibit disclosure of sexual identity. All facilities for networking depend on confidence, information, economics and kindly geography. Lack of these can result in relationships for men located entirely in sexual contact and, for women, in a closed circle of lovers and friends.

Don't under-estimate the difficulties for those in the process of developing a minority sexual identity when they have been taught nothing about these sub-cultures, their rules and mores, traditions and manifestations. The young bisexual, gay man or lesbian is far more familiar with the culture of the sexual majority than with their "own". Alternatively, some find a certain attraction to the ease of 'ghetto' living: that is, living almost exclusively within a subculture, consuming its artifacts, using its services and regarding 'straights' (heterosexuals) as pathological in return.

It has been clearly demonstrated that friendly contact with a *supportive, open network of other people who are 'out' is critical to psychological well-being* and the healthy development of lesbians, gays and bisexuals. (10) Practitioners need to interrogate their own attitudes and assumptions and how these affect the working relationship: they will want to inform themselves as much as possible as to the cultural and experiential contexts in which their clients live, as well as those which are available for support and growth.

(III) Building intimate relationships

Do not assume that the issues and problems for people from sexual minorities are the same as those confronting heterosexuals. Education and training can be a hostile and damaging experience leading to withdrawal from peers and early leaving with inadequate qualifications, followed by low paid, undemanding employment in less hostile jobs. The continued criminalisation of male same sex love has profound implications for mental health, self esteem, bullying, isolation, lack of advice and guidance, unsafe sexual practices, self harm, HIV and suicide. The role of the informed and ethical counsellor could not be more vital than here.

Same-sex relational and courtship skills will not been acquired through heterosexual socialisation; fear of the body-self and all its feelings, including sexual ones, will have been experienced growing up in a heterosexist culture: so the development of friendship and intimacy may be difficult, especially for men. Women find sexist assumptions about their relational styles equally unhelpful. With so *few visible models* of same sex relationships, we need to redescribe them, and our beliefs about them, in ways which are free from notions of pathology or problem.

Practitioners need to be alert to generalisations about couples and about same sex relationships, wherever they come from. Comparisons between heterosexual and same sex relationships are usually unhelpful and rarely take account of the 'pioneering' element of the latter.(11)

Same sex partners may avoid disclosing difficulties and fail to find support for working them through fear of 'failing' their community. Some will experience pressure to maintain ideal, unrealistic standards. Issues of safety, ethnic identity, family and opportunity will make being 'out' or not highly significant within relationships. Clients can attempt 'passing' in various ways so as not to discomfort practitioners this, of course, will decontextualise and individualise difficulties and lead to an inauthentic counselling relationship.

(IV) 'Dispiritation'

Lesbian and gay young people have much higher rates of suicide, parasuicide and self harm than their peers. They suffer more persistent bullying, physical and sexual assault, often with lifelong effects in terms of lack of trust, intimacy and self esteem. Over-compensation leads many to struggle always to be the best in the world, work too hard, give too much, neglect themselves and lose their identity.

Lesbians are more frequently labelled and treated as schizophrenic than men or other women. Lesbians and gay men report more problems with their use of mood altering substances such as narcotics, stimulants, hallucinogens and alcohol. These groups form a lower proportion of those benefiting from appropriate professional help. Homophobia (external and internalised) can be a factor in partner abuse in same sex relationships and in self abuse.

Pressure to emulate certain idealised body images may additionally lower self esteem and, of course, further disadvantage those from ethnic minorities and those with disabilities or illnesses, and possibly lead to eating disorders. Lesbians and gay men have distinct body image issues as well as sharing some with their heterosexual peers. Lesbians suffer multiple oppressions in terms of body image and research shows gay men suffer more physical and psychological ill-effects of body-image pressures than other men.(12)

In many cultures 'third sex' people have been highly prized as healers, teachers, innovators, creators and interpreters for the tribe. In the industrialised West, despite their disproportionate representation in related areas of work, people from sexual minorities have been devalued and persecuted in all sorts of ways. This impoverishes the whole culture.(13)

The impact of organised religions has been unhelpful or damaging towards the spiritual development of these groups. No mainstream churches yet fully validate the expression of same sex love. This denies the godliness and goodness of people from sexual minorities and leads to 'dispiritation' (4) and has led many to dissociate from their spiritual self and this is a very great loss. Offering a humanist alternative is inadequate. The *search for spiritual insight is closely allied with the search for authentic identity and is of great significance to the therapeutic (healing) endeavour*.

How can an ethical practitioner ensure they do not re-oppress clients?

Affirming sexual diversity, in this context, means *holding and operating beliefs and values which appreciate minority sexualities as valid, rich orientations in their own right and equal with heterosexuality, and perceiving homophobia, and not diverse sexualities, as pathological.* Counsellors have an invaluable role in workplaces and wider society as advocates, advisors and educators, challenging bigotry and building a healthier, safer climate for all. Affirmative practitioners offer all their clients the core condition of 'respect' including respect for the client's sexual orientation, personal integrity, lifestyle and culture.(15) They will not assume that self-identified lesbian, gay or bisexual clients have any 'problems' or difficulties' arising from sexual identity or sexuality, although they will acknowledge that homophobia and heterosexism surrounding such clients will have negative impact on their lives.['Guidelines for Helping', summarising the ideas of Don Clark, (from 'The New Loving Someone Gay', pub. Celestial Arts, Berkeley, Ca., USA, 1987) were circulated for discussion.]

They will appreciate the value of retraining to work with diverse client groups to explore and validate the range of their own sexual feelings, to examine and address their own attitudes, to increase awareness and understanding and to evaluate their own use of power in re-oppressing or healing. They will use supervision and therapy to monitor their responses to sexual diversity.

It is the responsibility of each practitioner to decide whether they can provide a respectful, informed and useful setting in which clients can obtain the help they need and to be clear about their own attitudes, prejudices, limitations and responsibilities before seeking consultation, retraining, referring on, or accepting a client.

We are in an exceptional position to be able to liberate, or to re-oppress those who seek our support in their struggles to find their true selves and to come out and celebrate all of who they are. Let us each ensure that, our work with the 'sons and daughters of Life's longing for itself.. be for gladness'
(Kahlil Gibran 'The Prophet' 1934)

Refernces

1   *Pink Therapy- a handbook for therapists and counsellors working with lesbian gay and bisexual clients* **Open University Press. 1996**

2. see Neal, C., 'Queer in the Head' in 'Self and Society', Vol 21, No. 1, 1993 pps 4-5

3. R. Johnson, 'Feminity in a Man's Life' in 'Caduceus 'magazine, Issue 28, Jan. 1995

4. Gratitude to Warren Blumenfeld"s definitions in his excellent book ,'Homophobia
    - How we **all** pay the price "Beacon Press, Boston, USA, 1992

5. Dominic Davies, "Towards a Model of Gay Affirmative Therapy'
    -Chapter 2 of "Pink Therapy", op.cit.

6. Modern developmental psychological theories by, for example, Cass (1987),
    Isay (1994) Hopcke (1989) provides new ideas about these processes.

7. Ian Rivers' work at The University of Luton and the work of LYSIS (Lesbian Youth Support and Information Service) in Todmorden are invaluable here.

8. see, for example, Jeffrey Weeks 'Coming Out", (Quartet,1983) and Alan Sinfield's
    "The Wilde Century' (Cassell, 1994).

9. Look in 'Gay Times' magazine or 'The Pink Paper' for listings showing huge range

10. Adrian Coyle's published research 1993, 1994

11. Gail Simon, "Working with people in relationships'
    -Chapter 6 of "PinkTherapy' op. cit.
    Also Neal, C. and Veecock, L.:'Same Sex Love Stories' Workshop series.

12. See lesbian and gay magazines, videos, fashions, club publicity etc. for ideas

13. Thompson, Mark, (ed.) 'Gay Soul' Harper paperback, San Francisco, USA, 1995

14. The evocative word, 'Dispiritation', coined by Jourard,1971.

15. Based on Dominic Davies, in Chapter 2 of 'Pink Therapy', op.cit.

**I would like to acknowledge again all contributors to 'Pink Therapy' for ideas
and information and stimulus provided in my thinking around this article.**

Guidlines for Helping

1. It is essential that you have developed a **comfortable and appreciative** orientation to your own homosexual feelings
    before you work with gay clients.

2. Willingness to enter into contracts to eliminate homosexual feelings and behaviour is unethical as it implies
    homosexuality is pathological and undesirable.

3. All gay people have experienced some forms of oppression related to their sexuality. The subjective reality of that
    experience must be brought into consciousness so that it can be worked with.

4. Help your client identify incorporated stereotypes of gay people and begin de-programming and undoing the negative
    conditioning associated with these.

5. While working toward expanding the range and depth of awareness of feelings, be particularly alert to facilitate
    identification and expression of anger. It is helpful for anger to be constructively channelled and for affection to be
    openly given.

6. Actively support appreciation of the body-self and body impulses. Don't be afraid to touch your client to demonstrate
    that you value and trust physical contact.

7. Encourage your client to develop their own support system, a half dozen or so gay lesbian or bisexual people with
    mutual personal caring and respect.

8. Support consciousness raising efforts such as discussion groups, pro-gay reading and involvement in gay community
    activities.

9. Work towards a peer relationship with your client. The message: you are not a second class or inferior person.

10. Encourage your client to question basic assumptions about being gay and to develop a personally relevant value system
    as a basis for self-assessment. Point out the dangers of relying on society's value system for self-validation.

11. De-sensitise shame and guilt surrounding homosexual thoughts, feelings and behaviours, thus attempting to remove
    some of the power attached to these.

12. Use the weight of your authority to affirm homosexual thoughts, feelings and behaviours when reported by your client.

**(Adapted from Don Clark's 'Groundrules for Helping' in his book, 'The New Loving Someone Gay', pub. Celestial
Arts, Berkeley, Ca., USA, 1987)**

The Happiest Days... The Loneliest Days

Dominic Davies
Senior Lecturer in Counselling
The Nottingham Trent University

Introduction

The purpose of this paper is to present an overview of the social and psychological issues involved in working with lesbian, gay and bisexual students. Taking the theme of this conference, we will see that lesbian, gay and bisexual students are a cultural minority in transition, en route for a place within a sub-culture which is in itself in transition. We will, by the end of this presentation have a clearer understanding of some of the psychological issues facing lesbian, gay and bisexual students in this journey.

Childhood

There has been much research into the nature vs. nurture debate - are lesbians and gay men born or made homosexual? The research evidence is highly contradictory, much of it dubious and none of it conclusive. Whether people are born gay or become gay later what is fairly certain is that sexual orientation seems to be determined by the time gender identity is established at around three years of age. There is considerable agreement about this and I think we can accept this as fairly reliable. People therefore have the potential to be lesbian, gay, bisexual or heterosexual in early childhood. Some will be bisexual, yet never have an opportunity or desire to act upon all of their feelings. This can be as true of those who might 'politically' identify as lesbian as much as people who would identify as heterosexual.

The implication of this knowledge about orientation is that people cannot be seduced into a sexuality they do not have. Sexual orientation is not some malleable thing - you can't make someone gay (or straight), nor can you change someone's sexual orientation - it is precisely that - an orientation. An individual might change their 'identity', and those homosexuals 'cured' by either therapy or religion may have changed their identity to heterosexual, but this is often at tremendous cost to their self-esteem, their ego strength, their feelings of self worth. Such 'cures' almost always result in great damage.

My second point is that the lesbian, gay or bisexual person has probably had an awareness of their difference from their earliest memories. This difference may bring with it a sense of alienation and loneliness. They may have not felt like other children, or enjoyed playing with their peers, they may have been interested in toys and games considered by their parents (and society) as more suitable for those of the other gender.

Little Johnny may prefer the company of girls, be interested in dance, or prefer to read books or play on his computer rather than spend time rough-housing with the other boys or climbing trees. It is surprising how many lesbian and gay adults have memories of enjoying gender atypical activities and exhibiting gender atypical behaviour. Indeed there is some research by, amongst others, Green (1992), to show that it might be possible to identify homosexuals in their childhood based on their gender atypical interests and, by offering appropriate support to their parents, help raise young lesbians and gay men with higher self-esteem.

American psychoanalyst Richard Isay, in his remarkable book, *Being Homosexual* demonstrates how the traditional understanding of Freud's Oedipus Complex is flawed. Isay suggests an alternative understanding of the development of 'effeminacy' in some gay men. He states that the young child recognises their attraction for males early on, that the man in their life at that age is their father and they desire his love and to be close to him. They see how much father demonstrates his love for his wife and so the child tries to emulate his mother, in order to win father's love. He begins to move like her, talk like her, become interested in her hobbies and activities. Father sees his son exhibiting 'effeminate' behaviours and, through his own internalised shame about homosexuality, that *he* could have bred *this*, withdraws from the child and becomes more distant and hostile. The confused child, may try harder to imitate his mother, which reinforces father's disgust. Mother overcompensates for father's withdrawal and a strong bond between mother and son develop. This new theory, based on years of clinical practice analysing the unconscious dreams and fantasies of his gay patients, offers powerful insights into gay male psychology. Isay does not propose a reverse theory for masculinised behaviour in lesbians, but one could wonder whether there maybe some truth in this.

I contend that this sense of 'difference' (isolation, alienation, gender atypicism) is more applicable to young people who are exclusively or predominantly lesbian or gay. I suggest that those with a bisexual orientation, during childhood at least, may not be aware of much of a sense of difference, since they are more likely to be able to fit in with peers in mainstream activities. This sense of difference, which is in fact same gender attraction, would come about in late childhood and early adolescence and then work in a similar way as for those who have a predominant same sex attraction.

I am aware that I have made a link with gender atypical behaviour and homosexual orientation. Some people who engage in gender atypical activities have a heterosexual orientation and there will be many lesbians and gays who had no interest outside those of their same gender peers. However, I believe the majority of people who are lesbian or gay will have some experience of feeling different which comes to them during their childhood or adolescence. This may or may not be actively expressed (through gender atypical behaviour), but may live as a dread of being 'found out.'

One consequence of this fear is a lack of spontaneity which results from having to self-censor one's thoughts, feelings and behaviour. I have come to think of this as analogous to learning a language. The person's 'mother tongue' is homosexual, they think, feel and dream in that language. They are however fluent, even bicultural, in their ability to think and speak in heterosexual. It is, however, not their native tongue and so there may be a delay in translation. There is also a need to be able to associate with natives from their own culture in order to relax and unwind fully. Think about your own experiences of returning home from a holiday abroad, or of being able to 'phone home and speak with your friends and family, and how different that is from the strain of living within a culture which is not your own even though you might be enjoying this other culture.

Adolescence

It is when adolescence approaches that the lesbian, gay or bisexual person might suspect the difference they have felt all those years is based on a different sexual orientation. An orientation they have been taught is wrong or in the words of Oscar Wilde, "'Mad, bad and dangerous to know." This growing awareness that they are "queer,' 'perverted' and 'sick' has immense consequences for their self-esteem. Their damaged self esteem has in turn, an effect on their ability to form intimate relationships, to work effectively, to choose an appropriate career path etc.
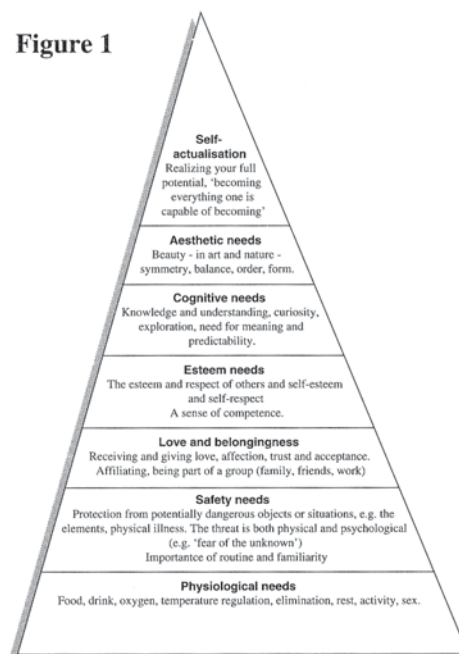
Erikson (1965) tells us that the central task of adolescence is the establishment of identity. Sexual identity is clearly a principal consideration here. Our students are discovering answers to the questions "Who am I?" What am I?" "What do I want to do with my life?" For the lesbian, gay or bisexual student these questions have additional meanings:
• If I 'come out' about my sexuality - will my parents disown me?
• If I act on my attraction for my best friend and tell her I'm a lesbian, will she reject me and tell everyone else about me
• I can't be gay - I still like playing football
• I can't be gay and be: a teacher, soldier, police officer, senior civil servant, nursery worker.
• I can't be gay as I want to have children of my own

These are just a small sample of the concerns that might be running around in the head of the average lesbian or gay student. Fears of rejection, violence, alienation, limitations in terms of career and parenting.

The psychologist Maslow also has something to offer us when we consider the developmental needs of our lesbian, gay and bisexual students. If we consider his seminal work on the hierarchy of needs then we can see that sexuality is considered a basic need for survival. Before we can expect our students to concentrate on higher issues, their requirement for safety and shelter (to be able to live free of physical or psychological threat), and acknowledgement and affirmation of their sexual aspirations need to be taken account of.

Figure 1

Self-actualisation
Realizing your full potential, 'becoming everything one is capable of becoming'

Aesthetic needs
Beauty - in art and nature - symmetry, balance, order, form.

Cognitive needs
Knowledge and understanding, curiosity, exploration, need for meaning and predictability.

Esteem needs
The esteem and respect of others and self-esteem and self-respect
A sense of competence.

Love and belongingness
Receiving and giving love, affection, trust and acceptance.
Affiliating, being part of a group (family, friends, work)

Safety needs
Protection from potentially dangerous objects or situations, e.g. the elements, physical illness. The threat is both physical and psychological (e.g. 'fear of the unknown')
Importance of routine and familiarity

Physiological needs
Food, drink, oxygen, temperature regulation, elimination, rest, activity, sex.

Banyard (1994: 361)
© Dominic Davies

'he following extract from *Unchartered Lives* gives a vivid insight into the experience of an early realisation of being gay nd the dread of parental rejection:

I never will forget the first time someone called me a fag.
I was at a party. I must have been in sixth or seventh grade. I hung out with a clique of kids with whom I felt fairly comfortable, all of them pretty smart academically, none of them terribly athletic or rebellious. Any one of them could have blended in comfortably with any of the splinter groups that were just beginning to take shape, as if in preparation for the social divisions of high school, which in those years and for the next three or four that would matter most to me included three main subdivisions: the "greasers," dressed in pegged pants and pointy-toed Italian shoes; opposite them, the "collegiates," who wore madras shirts, khaki pants with a buckle in the back, and penny loafers, often without socks; and, somewhere in between, the "surfers," who, though their ranks contained elements of each extreme, managed to look down upon both of the other two groups, as if on top of being cool, athletic, sexy, tall, and handsome, they also knew some poetically intellectual secret of the universe.

The party occupied the kitchen, the screened-in patio, and the backyard of a house in suburban Westbury, Long Island. I thought I would be vaguely familiar with everybody present, or at least that they would be familiar with me. My crowd had been attending school together long enough for our individual idiosyncrasies to have blended with our personalities in such a way that they were, if not unnoticed, at least rendered unremarkable by our group familiarity. Nobody ever had made any remarks, anyway. None that I had heard.

But kids had been invited to the party who were not classmates of ours and who clearly were surveying the field of personalities for the first time, taking scrupulous note of such distinctions as indicated strengths, both admirable and avoidable kinds; and weaknesses, both the insignificant and the exploitable kinds. I had barely stepped out onto the patio, my waxed-paper cup of Coca-Cola in hand, when a snide-looking fourteen year old simply said, "Hey, faggot. Are you a real faggot faggot or just a regular mama's boy faggot?"

The suddenness of so unprovoked an attack to an unsuspecting ego must compare analogously to the physical effects of being picked off by a sniper. I remember the feeling of instant heat in my neck and ears as I realised and then accepted that he was referring to me. I felt I was supposed to say, "Fuck you," or "Your mother," or one of the other more generic retorts of the day, but my systems had stopped working, and I could barely raise my head to look at my unsolicited tormentor. I also knew without looking that his friends now were looking at me and were on the verge of laughing out loud. My chest tightened, my mouth dried up. I probably paled, just to make matters worse. If I had fallen down, as if shot, I might have converted the moment to humour, but humour was not my weapon in the first place, and falling down was a manoeuvre my involuntary musculature already was contemplating.

"Faggot" was an idea I had not had about myself, but the word and the acid soaking it must have exposed a raw, emotional nerve ending of mine, a sort of a visceral suspicion. I knew I was different, but I did not know that the difference might be that I was a faggot.

I left the patio for the yard, hearing the older boy's laughter echo above the din of the party no matter where I stepped, and in so doing I felt as if I had attached a sandwich board to myself and that everybody at the party was stopping to read it. As if suddenly I remembered something I had left in my car - though I had no car, of course - I retreated to the house first, and then lingered in the kitchen, where I realised that there was not enough room at the party for me and my shame. I sneaked out of the front door as quietly and unobtrusively as I could. I didn't have a ride home, but I couldn't bear to ask for one or ask to use the phone so early in the festivities. I walked home, about two miles. When I got far enough away from the party house, I stepped into the leafy sanctuary of a vacant lot and cried. I walked, crying, for what seems in my memory like an entire evening, though I am sure it was no more than fifteen minutes or so. I do not remember any moment in my childhood as devastating or humiliating. I wanted never to see any of them again, the strangers or my friends. I felt bathed in shame, tarred by it, my chest tightened by it. I remember thinking, "Is that it? Is that what I am?" as I tried in vain to pull myself together.

Obviously, there would be no returning to the party, maybe not even to the crowd, or to school, if I could have gotten away with it; and I could not think of any other place to go but home. When I arrived, I still was so innocent about the idea of being a faggot that I told my mother what had happened. Her response made me feel as if the very floor beneath me was collapsing. Out of nowhere, out of no reference I could uncover or recall, she asked, with the bluntness of a hammer to the forehead: "Well, are you?"

Her tone seemed to have been marinated in anticipatory suspicion. A kick to the groin would have been less of a surprise to me and would have offered me more hope for recuperation. And, Jesus, *was* I a fag?

And then, why was she asking *me*? Does your mom ask you what you are? She had been my mother since before I was born. Wouldn't she of all people know what I was? Was she, of all people, asking me if I was this apparent aberration? I didn't know what a fag was, really. I had not conceptually put it all together yet, I suppose that night marked the beginning of my beginning to know who I was. I had so far learned mainly that the derision so palpable in the other boy's condemnation of me was in some profound and ugly way reflected almost equally in my mother's partly accusatory, partly resigned tone, when she had converted his declarative statement to her interrogative "Well, are you?"

It felt as if I had just learned that I was adopted and, worse, that at some crucial time in my future my adoptive parents might disavow any knowledge of me, might say: "Him? No, he's not really one of us. He's, you know, a fag."

As far as I was concerned, "Well, are you?" was a question about me from a stranger. Would her allegiance fall more sympathetically with my tormentor than with me? It was as if she had been waiting for me to confess a crime of which, I so far was merely totally ignorant. (Siegal & Lowe, 1994:47-50)

This extract illustrates just how scared a young person can feel about rejection from their parents and how these difficulties can lead to psychological distress, including suicidal ideation and parasuicide.

Suicidal Ideation

As a result of the stresses experienced by young people facing up to the prejudice and hostility of having a different sexual orientation our clients may be tempted to take their own lives. Suicidal ideation is common amongst lesbian, gay and bisexual youth as indeed is parasuicide. Research has repeatedly indicated one in five lesbian, gay and bisexual young people attempt to take their own lives (Trenchard & Warren (1984), Hetrick & Martin (1987))

HIV infections amongst young gay men are also rising. One can postulate that if these young men felt better about themselves, they might feel more willing to protect themselves. Such figures are a damning indictment of our society failing to protect, and take care of, a section of our young. In my most paranoid moments I get to thinking that society sees lesbian, gay and bisexual youth as expendable!

Coming Out

There is another developmental process occurring for our lesbian, gay and bisexual, students during adolescence and early adulthood: the gradual facing up to their sexual orientation and disclosing this to others.

Models of Coming Out

Cass (1987)	**Coleman (1981)**	**Woodman & Lenna (1980)**
Identity Confusion	Pre-coming Out	Denial
Identity Comparison	Coming Out (acknowledgement)	Identity Confusion
Identity Tolerance	Exploration	Bargaining
Identity Acceptance	First Relationships	Depression
Identity Synthesis	Identity Integration	'Resolution'

Various models of 'coming out' have been developed (Cass (1987), Coleman (1981), Woodman and Lenna (1980). These models are addressed in detail in *Pink Therapy* (Davies and Neal 1996). The models should not be considered to be linear: people do not go through each stage in a discrete one directional progression. Often people are accomplishing tasks of more than one stage at once, and the tasks themselves are not clearly defined. However, their use to both therapist and client is to show there is a progression to the process of coming out, which can be fraught with psychological and emotional difficulties and they can help to describe and make sense of, what happens. It would, of course, be foolish to try to predict what is likely to happen next.

Indeed the whole coming out process varies so much from one individual to another that some of the variables have been charted and described, by (amongst others) Hanley Hackenbruck, (1989) who describes seven: gender, race or ethnic group, locale (especially urban vs. rural), extent of sexual variation, values and attitudes of society at the time, individual variation, (including the individual's psychological make-up, family circumstances etc.), and physical ability or sensory impairment.

Going to University

Dependency on Parents

Going away to university is often the best way for a person to break away from family life and achieve independence. Many students in further and higher education seek to leave their home towns in order to come out, choosing their university not just for its academic record, but also for its ability to support them in their burgeoning gay identity,

Our students are still largely dependent on their parents for emotional, and often for financial, support. This economic dependence can have big implications for whether a young person feels ready to tell their parents. I have known cases where parents have refused to support their education after the young person came out as gay. We may therefore see a protracted adolescence, with someone hiding their sexuality well into their twenties.

Cultures and Climates In Colleges

The psychological health of our students is affected by the cultures and climates created by the institutions they are living and studying within. Often this culture is dictated by the College Principal or Vice Chancellor. Their attitudes to young people being sexually active will inform the college policy on whether condom machines are to be found in the toilets and how the college deals with abusive graffiti: I have found I can learn a lot about the culture of our institutions by looking at the toilet walls!

The activity of the Student's Union also contributes to the climate. Is the Union active in supporting its Lesbian and Gay Society (should one exist)? Does the Union fund a help line for gay students? Does the Union have a lesbian and gay rights officer - as a sabbatical, or a non-executive, officer?

How oppressive are the religious groups at your college? Many colleges are breeding grounds for fundamentalist religious groups, be they evangelical Christians working through groups like *The Navigators* and the *Christian Union* or Islamic Fundamentalists like *Hizb-ut-Tahrir*. These can profoundly affect the culture of the college. Insecure and vulnerable young people may be drawn in by the apparent confidence and clarity of views offered by the group leaders. However these groups have profoundly disturbing views on homosexuality. Young lesbian and gay students particularly when feeling shameful and ambivalent about their sexuality may well be drawn to the 'fellowship' and quasi-intimacy of the group. There is also a need to be watchful for these vulnerable students falling into the hands of 'conversion' therapists or the 'ex-gay' movement which is especially prevalent in certain areas, and actively recruiting amongst the young.

Bullying

While there has been some helpful research into bullying and violence, I could find little directly relevant to students in further and higher education. A British psychologist, Ian Rivers, has just published some retrospective studies into bullying of lesbian and gay people in schools. Adults replying to his questionnaires attributed depression, under achievement, social and emotional withdrawal, isolation and depression in later life to having been bullied at school.

The Hetrick-Martin Institute in New York (also known as the Institute for the Protection of Lesbian and Gay Youth) found 17% of the young people visiting their centre in its first year reported being physically attacked - often at the hands of family members! (Hetrick and Martin 1987).

The political lobby group Stonewall, in its survey of discrimination against lesbian and gay people in employment, found 48% of the respondents reporting harassment and bullying.

We know the cultures of our own institutions. Who of us can say that lesbian, gay and bisexual students in our colleges and universities are free from being harassed for their sexuality, and not discriminated against by any member of staff or fellow student?

A Brief History of the Modern Lesbian, Gay and Bisexual Communities

The theme of this conference is 'Culture and Psyche in Transition'. I have demonstrated how lesbian, gay and bisexual students are in transition into adulthood, and their gay and bisexual identities. I now want to explore with you how they are also entering into communities which are themselves in transition. The lesbian, gay and bisexual communities have undergone considerable changes over the past three decades. It seems helpful to try and describe some key historical events which have shaped these communities. The use of the plural is important as there isn't a single community, but communities of diverse interests. Nor is it a physical community, although a few cities have begun to develop streets or areas where gay businesses, mainly bars, are located.

The Stonewall Riots and the Gay Liberation Front - 1970

The most significant event in modern gay history was the Stonewall Riots in 1969. The police in New York decided to raid a small gay bar in the Christopher Street area of New York. This was one of many raids, as part of harassment of this gay community. This time the communities fought back. Led initially by 'drag queens', there were riots on the streets and around the bar for three days and nights. It was the final straw and gave birth to a gay rights movement which, by 1970, led to the formation of the Gay Liberation Front which held is inaugural meeting in London School of Economics. Lesbian, gay and bisexual students were therefore, at the heart of the gay rights movement. GLF followed the non-violent direct action model of political activism and took to visible demonstrations of gay identity and gay pride. In Britain the anniversary of the Stonewall Riots is celebrated each year with a march through central London and a festival in a London Park. This event (known as 'Pride') is now attracting between 150,000 and 180,000 people. It is the most important event in the Lesbian. Gay and Bisexual Communities and civil rights calendar.

The HIV Epidemic - 1984

The next key event in my potted history lesson is the mobilisation of lesbian, gay and bisexual communities around the HIV epidemic. In 1984 friends of a gay man who died of AIDS set up the Terrence Higgins Trust, the first British self help support group and education service for anyone wanting help around HIV and AIDS. I will speak later about the impact HIV has had on the lesbian, gay and bisexual communities. For now, though it is important to record that this single event brought the gay communities together to educate and care for each other. Gay men, became involved in physically caring for their friends and lovers who were sick and dying. In the early days, the organisations set up around the country were staffed by volunteers almost exclusively comprising gay men and their heterosexual women friends.

Safer Sex education materials were produced by gay men for gay men. Widely distributed, and often ending up in places that weren't exclusively gay, these materials took the form of homoerotic posters and leaflets featuring gay men preparing for or having sex. They were designed to eroticise safer sexual practices and through peer pressure to encourage gay men to protect each other against HIV infection. In many cases these materials upset heterosexual sensibilities.

Section 28- 1988

The increased visibility of positive images or lesbians and gay men during the 80's including the growth in gay publishing and an ever growing commercial gay scene, led to a hate campaign by the press resulting in a number of distorted and spurious stories about local council library stocks including books about gay life and teachers incorporating mention of homosexuality into sex education classes when talking about HIV. The Government tried to curb these 'excesses' by adding a new clause to the Local Government Act and this came to be known as Section 28.
(1) A local authority shall not
(a) intentionally promote homosexuality or publish material with the intention of promoting homosexuality;
(b) promote the teaching in any maintained school of the acceptability of homosexuality as a pretended family relationship.

The lesbian and gay communities mobilised themselves against the clause and, despite the Bill being passed, the gains in terms of activism were considerable. The numbers of people attending the annual gay pride march through Central London rose from a few thousand to tens of thousands. Few cases have been brought before the courts as breaches of Section 28: mostly its effect has been in self censorship or local authorities being afraid to take the risk of testing out the Act.

The Age of Consent - 1994

The next major event in our recent history was the campaign to lower the age of consent for gay males from 21 years to parity with the heterosexual age of consent at 16. A massive campaign was launched by the lesbian and gay communities with parliamentary support from Edwina Currie, amongst others . The motion was narrowly lost and 18 was the compromise figure.

What messages does this give to young men who fall in love with their own sex? You are not equal; you are too young to know your own mind; you need to be protected; you are prone to be preyed upon by older homosexuals. What effects might there be on the psychological well being of young sexually active gay men of the knowledge that they are 'sex criminals', that they or their lover could be prosecuted and, perhaps most disturbing of all of how the unequal age of consent makes it practically impossible to conduct safer sex campaigns and protect young gay men from HIV infection. There is still no age of consent for lesbian sex.

Bicon and Bi Pride

During the last few years there has also been a quieter revolution going on. On a much smaller scale, there has been increasing visibility and activism around people identifying as bisexual. Bicon is a national conference for bisexuals annually and earlier this year, the members of the Pride Trust (the group that organises the national Gay Pride march through London)voted to change their name to Lesbian, Gay, Bisexual and Transgender Pride to reflect a more contemporary sexual politic. There is the beginning of a bisexual community which is parallel to and partially independent of the lesbian and gay communities.

Bisexual students may feel alienated from GaySoc's where there may be an emphasis on coming out and proclaiming one's gay identity. They may be accused by lesbian and gay students of 'sitting on the fence' and enjoying the 'luxury' of 'passing for straight'. These views portray biphobia and show little understanding of a bisexual's experience. "Some folks say that bisexuals are not oppressed because at least we are accepted by mainstream society when we are involved with members of the opposite sex. Agreed, society may like us when we show that piece of who we are. But conditional acceptance is not really acceptance at all. When we show our other side, our gay side, we suffer the same discrimination as other gay men and lesbians. We don't lose only half our children in custody battles. When homophobia hits, we don't get just half-fired from our jobs (put on half time perhaps?). We don't get just half gay bashed when we are out with our same sex lovers ("oh please, only hit me on my left side. You see, I'm bisexual"). We, too, get discriminated against because we are gay." (Ochs, 1990:2)

Alienation from Adult Gay Culture

One of the most insidious myths about lesbians and gay men is the myth of seduction and child abuse. One of the consequences of this is the self censoring that lesbians and gay men do around supporting young people who are coming out. Fear of being labelled, even by members of their own communities, as motivated by sexual interest means that wisdom and support, invaluable to the mental health of young lesbian, gay and bisexual people does not get shared.

When the age of consent for gay men was 21 years, older gay men were often wary of being seen to be supportive of teenagers for fear of being labelled 'child molesters' or having a visit from the police. It is still very difficult for lesbian and gay teachers and social workers to be open about their sexuality to their students or clients for genuine fear of losing their jobs. This makes offering support extremely difficult.

You may well have experienced the policing of your support for lesbian, gay and bisexual students by people questioning your interest in this group and an assumption being made that you too must be gay. Guilt by association! Beware, it might affect your promotion prospects!

The Impact of HIV on the Lesbian, Gay and Bisexual Communities

Improved Resources, Increased Visibility

Some people argue that gay communities have benefited enormously from the AIDS epidemic. There has been a public acknowledgement of our sexuality by the State and funding from Health Authorities to promote safer sexual practices and encourage the development of positive self esteem. A number of Health Authorities now have *Men Who Have Sex With Men* projects and are actively working to promote gay men's health.

Others argue that it was only the threat of the heterosexual population becoming infected that attracted Government resourcing of gay communities in this way and that lesbians and gay men have long been contributing to a health service and the wider society without any specialist health care provision ever being made (lesbians have a higher than average risk of breast cancer).

Increased Violence

This increased visibility has brought an increase in hate crimes against lesbians and gay men. Few people can have failed to be aware of the recent spate of serial killers of gay men and a number of Police Authorities have begun formally monitoring hate crimes and violence against lesbians and gay men.

The implications for non-campus based Universities, particularly those who run their own lesbian, gay and bisexual social events might be that local queer bashers target these events when people are going home and it may be difficult to get University Security or the police to respond quickly enough.

Club Drug Use and Young People

Recent research indicates that one in three gay men have used recreational drugs. We seem to use drugs (including alcohol) more regularly and for longer periods. It may be little co-incidence that the increasing use of Ecstasy as a club and dance drug has come about at a time when many young people have become fearful of having sex. Ecstasy helps people feel loving and sensual, but with most people takes away the ability to have erections or orgasms. In this way young people can be sensual and loving without much risk of having sex. There are, however, other drugs available which do not impair performance in this way and which lower inhibitions, therefore making the user susceptible to abandoning safer sex precautions.

Health Promotion Materials for Young People

The Terrence Higgins Trust (amongst others), have developed a number of materials to educate young people about safer sex. One of their most popular resources are the photo-love-stories developed for young gay men.

The Culture Within Further Education Colleges

Oftentimes FE Colleges see themselves as 'in loco parentis', holding the responsibilities of the parents. This can be used as a justification for why a college won't allow a GaySoc to meet, or why it might have difficulties with making condoms available, or actively supporting its lesbian and gay students. Colleges would do well to consider that they could see their role as being in loco of a loving, affirmative parent just as easily and that they don't have to be a punitive, disapproving parent!

Students in FE, though, often feel 'Free at Last' to explore and experiment. Away from the repressive regimes of school, they want to invent themselves and exciting new identities for themselves.

This inventing might be done in a climate of fear as different departments or campuses of a college may have conflicting 'micro climates' where, for example, arts students might be rushing around dying their hair purple and wearing gay identified T shirts while building students are daubing anti-gay slogans on their toilet walls and harassing GaySoc meetings. One can only wonder at the fear a gay building student might feel when witnessing the actions of his fellow students and, quite possibly lecturers!

The position of the Student Unions in FE colleges is also quite tenuous. With a less stable population, they are rarely as pro-active as in some Universities and this means that gay students' needs often get ignored through the heterosexism and homophobia of the other students' fears and prejudices as they discover themselves, and may be frightened through (guilt by association) to lobby for the gay cause.

The Culture Within Higher Education

The climate here is more liberal. This is partly because of the age of students being a few critical years older, but also a 'liberal tradition' underpinning the academic freedom of University life. Staff are perhaps more likely to adopt the attitude of "I don't care what he is so long as he's bright." There may even be an expectation of homosexuality within some faculties, and some colleges.

There are also many mature students returning to education, I have met a number of these people who not only see it as a second chance at education, but a second chance at having the adolescence they missed out on when they were younger. The implications for those coming out as lesbian, gay or bisexual later in life deserve a paper of their own.

Arguably it is much harder to survive University now. The fraught financial situation in which most students find themselves, the competition for work at the end of their courses and the pain, isolation and 'driveness' of Higher Education establishments has led many students to suicide. Dealing with one's sexual development in this climate could be hell!

The Role of the Student Counsellor

There are a number of ways counsellors can have a powerful role within their institutions to influence policy and support the psychological health of their lesbian, gay and bisexual students.

- Acting as advocates for the students' expressed and unexpressed needs - if there are reports of queer bashing or harassment counsellors can make sure the college knows about this.

- Educating management and academic colleagues as part of the college fulfilling its pastoral and equal opportunities policies. Counsellors could participate in running heterosexism awareness training, assuming they have the right skills and attitudes themselves (if they haven't then this should be addressed as a matter of urgency!)

- Counsellors can facilitate workshops for the GaySoc around relationship skills, coping with internalised homophobia, coming out and self esteem issues.

- They could collaborate with the student newspaper on enlightened articles about gay issues showing themselves to be gay friendly and setting a positive tone for students approaching the counselling service to explore sexuality issues without fear of condemnation.

- Think about the information on display in reception area and the counsellors own room. Are there positive images of lesbians and gay men? Do you have any posters reflecting gay issues or relationships? Do you have appropriate books on your bookshelves, and are you able to loan or recommend relevant books to lesbian, gay and bisexual students?

Conclusion

This paper has sought to demonstrate that lesbian, gay and bisexual students have specific psychosocial needs. They are in transition from adolescence to adulthood and from being presumed to be heterosexual, to defining their own identity as lesbian, gay or bisexual. They are entering into the lesbian, gay and bisexual communities, themselves in transition from being rnarginalised and discriminated against and now occupying a more central role in our culture.

Student Counsellors have a vital role to play in this process: with individual students and within their institutions as well as wider society. To neglect this duty will result in more lesbian, gay and bisexual students at best underachieving their full potential and taking an active part in society and at worst committing suicide.

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Acknowledgement:

Workshop: The Student counsellor's Personal Psychographic Map of Europe - a tool to elucidate interconnectedness in cross-cultural counselling settings

Gerhart Rott
Head of the Counselling Services at the Bergische Universitat - Gesamthochule, Wuppertal, Germany

The aim of this structured experiential workshop was to emphasise the importance of, and increase awareness and understanding of our individual relationships towards Europe as a whole and to its various countries as well as to specific aspects such as language, cultural influence and history.

Such awareness can have a positive impact on counselling interventions with overseas students as well as improving our own professional network and communications on a European scale. In a more general way it can help counsellors to clarify relations to his/her world.

The workshop had a *thematic focus*. To my mind with personal supervision and further training of counsellors and psychotherapists, the following three aspects should interlink:

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personal biography,

relationships and interpersonal contact,

themes.

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There is a kind of figure and background relation among these three aspects: if one of them perceptually constructs the figure and has form and shape the others are still in the background but quite unshaped. A reverse may take place from the background to the figure and vice versa.

After a short introduction and an outline about its structure the workshop started with a *guided fantasy journey* which lasted about half an hour. Participants relaxed and went in their mind to a comfortable place at home. They then started a dream journey. In a train they went to a European country which they had liked going to for some time. Different environments, past, present and future time, encounters with people, languages and cultures flowed by. There was a space for the views of people's families. European history and more generally the past, the present and the future played a role. The journey also paid attention to the relations of Europe as a part of the wider world.

Though I guided the participants through this fantasy journey with concrete impulses, I selected these in such a way that there was a clear space for personal experiences. I left the processes very open and just underlined the need to become aware of emerging thoughts and underlying emotions.

The participants mentally arrived back in their home and then after opening their eyes they came back into our group. They then started to draw their *personal psychographic map of Europe*. This task lasted more than half an hour. I instructed the participants that they could use either the realities of European geography in one way or the other or create their own kind of 'geography'. The group members could employ words, colours, representational objects or abstract patterns to express themselves.

The production of this psychographic map turned the group into a very active workshop in the literal sense of the word. There was a creative and supportive atmosphere. While working at tables or on the floor the participants made some contact with their neighbours - especially at the very beginning and at the middle of the creation of the maps and of course after finishing. Without discouraging these contacts I underlined the need to stay with one's own ideas, while each group member was producing her/his map and encouraged them to follow their thoughts, awareness and expressions.

After the production of these maps, which took about forty minutes, I asked the participants to *exchange their ideas with two other colleagues*. After some time I accentuated the aspect of *professional relevance* in the insights gained for work with *clients from other countries* as well as for *professional relations*. I asked the small groups to pick those aspects up in their discussions.

Finally we *all shared together* some aspects of our experiences. Some emotions which arose during the process were mentioned. They included frustrations and excitement. Group members brought up how some quite forgotten experiences came back to their minds and how they related to the thematic context in new ways. Personal feelings and symbolism hinted at the vast scope which exists within the evaluations of the Europeanization of our social contexts. The national, cultural, and geographical starting point seems to have some importance. For example a colleague who had grown up in another continent had a very different attitude towards Europe than all those who were born there. She had a very special way to present Europe, using a colour-scheme closer to her own continent.

Finally we saw that the workshop had brought up quite a few of the difficulties present in European contact but had also shown some new aspects of possible encounter and self-exploration. At the end of the conference some colleagues remarked that it was good to do this workshop on the first day. With this 'introduction' they had been more open for the experiences at the conference.

The final sharing was limited because of the constraints of time. *In other settings* one could enlarge this sharing. One could also intensify the element of personal supervision using the psychographic map. For example counsellors could enlarge their insights into how the map relates with more general personal emotions towards the matter of open boundaries. Details of form and colour could be looked at more closely and one could see what kind of meanings might arise from them.

One could have a look at the relationships represented in the map and enhance their personal psychological meaning as well as their implications for work with clients.

These focuses could reverse the above mentioned figure-background relation. The more personal dimensions of the supervising process would then be the figure. Afterwards one could go back again to the European context and the work of counselling students from abroad.

It would also be challenging to this kind of workshop with a more heterogeneous combination of nationalities to have a closer look at common, national and personal differences.

However, the *personal psychographic map of Europe* proved to be *a useful tool* to clarify personal implications for counsellors working in cross-cultural counselling settings.

Workshop: Welcoming Diversity and Prejudice Reduction

Val Carpenter, National Coalition Building Institute

Summary

The NCBI prejudice reduction workshop is an introduction to a unique training programme which empowers individuals to welcome and to work with diversity in ways in which combat various forms of discrimination. The workshop can stand alone as a powerful one-day experience. It can also be followed at a later date with a train-the-trainer workshop which teaches participants all the skills necessary to lead similar prejudice reduction programmes.

Goals

The goals of the prejudice reduction workshop include the following:

Learning how to welcome diversity

Developing an overall understanding of diversity issues

Developing hands-on pragmatic leadership skills in reducing and eliminating prejudicial attitudes and behaviours

Demonstrating a model that uses tools of healing and compassion to reduce prejudice, whilst simultaneously increasing responsibility, activism and intergroup co-operation.

The training event aimed to:

introduce a consistent theoretical basis for comprehending the sources of bigotry and the impact of group mistreatment

expose participants to a range of discrimination issues through an experiential format which provides information and presents issues in an interactive and personal way.

This inspires participants to build relationships which reach beyond their usual daily interactions.

teach participants how to handle oppressive jokes, comments and slurs

Methodology

This training grew out of an understanding that at the root of prejudicial attitudes is misinformation, or lack of information, about other groups. These stereotypes can best be reduced with activities, which demonstrate that <u>everyone</u> is good (whites, blacks, men, women, etc.) The NCBI prejudice reduction workshop teaches an inclusive approach - training community leaders to be advocates on behalf of all groups. Our NCBI slogan is "All for one and one for all". The workshop addresses a wide range of diversity issues including: race, gender, age, class, religion, sexual orientation, physical ability, job and life circumstance. NCBI has found that the most powerful way to gain new information about others and to build unity across group lines involves sharing together personal stories of mistreatment making sure to include stories from <u>many</u> different groups. As the stories are shared, participants gain new insight and become powerful allies on behalf of one another.

The sharing of stories was followed by a series of skills training activities to ensure that participants backed up their newly gained insights with concrete day-to-day leadership skills and actions. The model used participatory activities which included: pair and small group activities, discussion and experience sharing in the large group, demonstration of new techniques, skill practice.

We created an upbeat, joyous tone that increase safety and participation. Participants were invited to share - but were never coerced or required to speak in the group.

Student Psychological Health and the Development of Higher Education in a Changing Cultural and Political European Environment:

Reviewing the Conference and looking forward to the Future. - Closing Address.

Gerhart Rott.

During these past few days we have carried out good work which has helped us to discover insights and to acquire new knowledge.

We have taken a further step towards a professional European perspective on student counselling. It has been the first time we have worked so intensively on the topic of psychological health on a European level. I want to take the opportunity to express my gratitude and to say thank you. I want to thank the ASC. You have put quite an effort into organising this European conference and inviting colleagues from the continent to participate in it. I also want to thank the ASC for the achievement in representing so much competence in the field of psychological counselling in further and higher education. I have personally used this experience already from the ASC conference on evaluation in Edinburgh and from the comparative outlook on counselling approaches in Sheffield. You have demonstrated your professionalism during these days again.

I personally want to thank ASC members Elsa Bell and Craig McDevitt, and David Acres, Pat Bizley, Ann Heyno, Colin Lago, Barbara Rickinson and Jennifer Wilson who have played an important role in establishing a dialogue on student counselling in Europe and helping to found the working group Psychological Counselling in Higher Education (PSYCHE) inside the Forum Europeen de l'Orientation Academique (FEDORA). Quite a number of British colleagues from FEDORA have again supported this event here with their outstanding experiences within the European counselling context.

I want to thank you all for the high commitment during the past days and our colleagues whose native language is English for their patience in listening to a language which has had only similarities with the language to which they are used.

I want to thank all invited guests and especially the great number of FEDORA-PSYCHE colleagues who came from the continent to Brighton and overcame financial difficulties. They contributed to the European dimension of the conference and tried their best like myself, to get along with the difficulty of expressing themselves in a foreign language.

I want to thank you all for your readiness to exchange new ideas and to develop them in your work here during this week. I personally want to thank Shirley Meredeen for her co-operation. Though we have made contact only by phone and by fax her calm and clear way of organising things has always inspired confidence and trust. I want to thank you and your colleagues who have provided us with such genuine hospitality and good environment in which to learn and communicate.

A starting point of communication: experience

We have been involved in quite a bit of work that has been enjoyable but also demanding. Before we relax and leave this active meeting of exchange and understanding let us review what we have done and put the results into the perspective of future co-operation.

The experiences we keep in mind and the consequences we draw out of them will be very different for each of us. The transfer and influence of such a conference into our daily contexts relies on those manifold personal insights which each of us has gained here while communicating. So before I put forward some ideas to outline the results of the conference I suggest that you consider your own experiences during the past days.

Think for two minutes about what has become important for you during the past four days. Perhaps you remember the time when you arrived here. The first people you met. How you got used to the surroundings. The first lecture you visited. The workshops you participated in. How you got acquainted with people you did not know before. How you spent your days and the evenings. You remember the situations which surprised you, which you perhaps disliked, which you enjoyed. What thoughts came into your mind? What kind of feelings arose? Perhaps your thoughts about your work at home and compared that with what was discussed here. Maybe you thought about the future. Just let all these situations go through your mind and take some time to define what was important to you, and then think about this morning and this room.

These are the personal feelings and ideas and they determine the personal outcome of such a conference. Though the experiences are very personal there also exists the wish to communicate, to identify common ground, to exchange ideas and knowledge. During these days in Sussex University we have put quite a bit of effort into the task to understand the sense of what has been reported and to generate new knowledge. We have more or less overcome language difficulties. We have shared our experiences with each other and compared them on the European level.

To underline this interactive character of this meeting today I suggest that you now tell your neighbour about your own impressions of this conference. While doing it keep in mind your own feelings and watch how they differ from those of your partner. Find out which are completely alien to you. But also check whether what your neighbour says is important to you. Try also to identify similarities between your experiences and find some common interest - for each person 2 minutes.

A tool to communicate within transitions inside complex social and cross-cultural environments: conceptual networks

To my mind what you have just done and what has often spontaneously taken place during the conference is an important activity. I call these processes conceptual networks. What do I mean by that?

Nowadays we hear a lot about networks in the context of computerised information. At first sight computerised information has a fascinating global dimension. The Internet and the data highways have obtained a vast recognition in my country during the past year. A month ago, our service in Wuppertal joined the Internet and we will use it actively in the future. This kind of network might be sometimes useful. It might support long distance communication and access a high amount of data. However this is not the kind of network I mean when I talk about a conceptual network. On the contrary I want implicitly to oppose some assumptions of the extreme proponents of computerised communication. I agree with those who warn us of wasting a lot of time in the Internet if one does not have useful criteria (Stoll, 1996). Conceptual network, as I understand it, means the creation of a new form of contact. It emphasises the interaction between human beings and their ideas and environment. It is a development of consciousness, which does imply holistic dimensions. People are aware of their personal experiences and use them. But they also want to find out whether there are possibilities of co-operation with the other people. This co-operation gives way to new knowledge. It might help them better to understand their own self. They respect the conditions that there are different cultural backgrounds but may identify actions of common interest. They enlarge their self-efficacy and accept in these *agentic transactions* as in Bandura's terms, that people are producers as well as products of social systems (Bandura, 1995, p.21).

While people build conceptual networks they do not ignore obvious differences in the languages and the ways of thinking as well as expressing and even experiencing emotions and behaviour. Conceptual network is a constructive process within a mutual respect of differences. If we talk with the Rogerian person-centred criteria there is empathy, self-congruence and - perhaps not unconditional - regard and respect. Conceptual network in this sense is a human activity to create new human knowledge.

It is a way to relate to oneself to a complex human environment in which it is neither possible nor perhaps desirable to understand everything. To respect differences and to accept the unknown is an important feature of this network. With quite different backgrounds Okorocha spoke about counselling with international students, Colin Lago made cross-cultural research relevant for counselling, and Lucia Moja Strosser presented her concepts of working with dreams in an existential perspective. These have shown us how helpful it can be deeply to understand the basic kinship of being a human and how important it is to be explicit about cultural differences or, to put in other words, to learn from the client. Nevertheless there is the wish for a common language to interpret experience and knowledge. It is a way to facilitate positive integration of contradictory poles in life. It is also a search for common activity.

I feel that conceptual network is a hopeful way to identify European perspectives. Conceptual network might help to support meaningful links in the spheres of science and humanities. Perhaps it may even show some ways out of technological, economical and environmental impasses. In his intellectually exciting book *Marvellous Possessions* (Greenblatt, 1994) the Jewish American academic Stephen Greenblatt who works in the field of literature, history and anthropology shows us the beginning of the modern European civilisation: the discovery and the domination of the New World by Europeans.

At that time the unknown was described as a wonder. But in the context of the time this idea led to subordination and domination of the alien. Greenblatt shows how this interrelation was part of the core of the European civilisation emerging out of the Middle Ages. In the end of his book in a small footnote Greenblatt mentions his personal question which guides his thinking: how in a time of xenophobia and possessiveness it is possible to prevent the ability to wonder from being poisoned (retranslated from the German translation) (ibid., p.286).

My emphasis on conceptual network may formulate it perhaps slightly differently: How can the ability to wonder encourage constructive relations and avoid disorientation, xenophobia and possessiveness towards others?

It is possible to understand how the idea of conceptual networks relates to our processes, to establish European perspectives, and to consider cross-cultural dimensions. It is also reasonable to suppose that the term *conceptual network* describes adequately some of the processes in our European exchange of professional experience. Is there also a relationship between conceptual network and student psychological health? If yes, then which one?

Conceptual networks on student health in a European perspective

Students' developmental processes may be exciting but also may be accompanied by grief and difficult emotional crises. We have carefully looked at some of the transitions during these days. My hypothesis is that if we understand the processes of conceptual networks and their tasks in coping with the cultural and social demands of our European countries we can obtain an even more accurate understanding of students' psychological health and their period of transformation (Lago, 1995, p.15) during their life at university.

Rosie Jeffries referring to classical and contemporary stories and storytelling has pointed out that people in Higher and Further Education are by definition 'in transition'. We could understand what is happening in this way rather than by using a deficit model or seeing our work as remedial. Student transitions can be interpreted as a kind of training to learn to balance the inner and outer world. The outcome of these transitions are of course important. However it is at least as substantial to understand the quality of the psychological processes which enable them to pass through emotional problems and to adapt successfully to new demands. The readiness to stand on their own two feet is not so much defined by the ability to take over well defined roles. The areas in which identity develops: the body, the relationship, the profession, the social and ecological environments, the values and spirituality stay important. [1]However it is not so much the content of the aim which becomes important but the process of getting there. It is more the self-confidence to handle those kind of processes which allow self-esteem to grow. The ability to react flexibly which means to be able to participate in conceptual network becomes more and more a criteria of a fully mature person. Social changes in our environment require a change in our concept of maturity and identity. It cannot be predominately described as a process of integrating social norms and clearly defined patterns. To integrate outer demands with the self does not so much result in the outcome to have identity but to be able to experience continuity and self-awareness in responding creatively to ever changing demands or, to put it in other words, it is a process to arrive at home by passing through ever new transitions which balance the inner and outer world.

What are those social and environmental conditions I have in mind?

To look at them I want to report some analysis related to my country. I am using material presented at the conference "XXV. Soester Weiterbildungsforum" which analysed megatrends in further education in December 1995 (Schneider-Wohlfart, 1996). Similar tendencies arise in all European countries but with some differences of course.

Social scientists analyse social 'megatrends' which are characterised by an increase of unforeseen events and uncertainty. Eclecticism is trying to respond to a world which is becoming more and more a contradictory puzzle, in which the paradoxes flourish (Horx, 1993).

The loss of a linear time continuum in the sense of a progression from the darker past to a lighter future results in a perspective which incorporates not the future by the 'futures' (Bolz, 1996). The development of research in forecasting itself is understood as a necessity to produce an adequate complexity of thinking and analysis. The development of a new value structure is foreseen as an evolutionary necessity to encounter the economical, political and environmental threats as well as the information and media orientated risks and educational tasks. Educational training cannot any longer impart definite knowledge to acquire a certain standard. For life-long learning people *have to learn how to learn* and how to acquire *the ability to learn just in time*. (ibid). Increasingly individuals retreat from public affairs into a personal *cocoon* as a means of surviving

[1]These areas relate to some extend to the 'five columns of support' developed by H.Petzold and his school of integrative therapy. (Petzold, 1980). Also compare with the 5 sources of support and stress in personal change put forward by A.Clare (1996).

(Popcorn, 1992). On the other side there is a growing demand to encourage individual responsibility. The reduced time to care for the very young and for the very old which accompanies the process of women's emancipation demands that the new *social contract* of the generation is accompanied by a new *social contract* between man and woman, in which caring responsibilities are shared more (Beck-Gernsheim, 1996). Last but not least, globalisation and the economical social and human interconnectedness are tendencies of a future in which we already live. One of the leading European forecasting institutes identifies the following human - social prerequisites to cope with future challenges:

Challenge

Human - social prerequisites
1. **Initiative and courage to resolve everyday problems to search for new ways**
2. **Patience and foresight in dealing with uncertainty in the developing of new structures**
3. **Solidarity with people who need help and orientation**

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Last year during the FEDORA - summer school in Dublin the British educational sociologist Tony Watts pointed out that these general and global tendencies of uncertainty may influence the student and guidance in a more specific way. He argues that while European countries are moving into post-industrial societies "the old concept of 'career' - as an orderly progression of (sic) up-graded hierarchical steps within an organisation or profession - is dying" (Watts, 1995). Tony Watts states that the concept has to be redefined in the sense of "an individual lifetime of progression in learning and work" (ibid). A student who looks into this kind of future has to cope with this complex task. It means that he or she acquires what Tony Watts calls the ability of *planned serendipity*. In the discussion of his paper I asked Tony Watts a question concerning the psychological and counselling implications of such a tendency, especially for human demands and resources. He agreed with me that the psychological impact of these tremendous changes has to be thoroughly considered and that guidance cannot any longer be perceived without psychological counselling resources. It is of course difficult to show how these very global tendencies influence student life and further and higher education in detail. But they may help us to put some of our findings during the last days in a perspective.

Students' transitions as field of developing training

We looked at students' psychological health, transitions, and the way to cope with storms in the psyche as our French colleagues Sylvette Gendre-Dusuzeau and Christine Pradel-Pavesi have put it. We can see here how students, when they live through those conflicts, actually are in an intensive and almost constant training to create new balances between the inner and outer world. We related students' transitions to further and higher education itself. And we looked at the impact culture has on students' transitions.

Last year I described these processed in a lecture where I drew the attention to the piagetian epistemological concepts, which helped me to clarify the interplay between emotion, cognition and behaviour in higher education. The cultural dimension was missed there. One could introduce the adaptation into culture differences as a fourth aspect.

Interaction between Emotion, Cognition and Action in Higher Education

Cognition
Acquiring knowledge
Genetic circle - constructing patterns - individual differences - connection with affective life - ego decentration
Process of studying and daily social life
Decision making
Affiliations - Achievement

Emotion
Emotions in everyday students life
Emotions as keys to understanding scemata of affects
Emotions and the self

Action
Delaying action
Students' action as meaningful
Thinking as internalised action - Acquiring and applying methodological knowledge - Self-management in the academic world - Personal development in successful action

My main idea there was to show how the acquiring of knowledge is connected with the affective life. I pointed out how these processes reactivated former learning experiences and how they related not only to cognitions but also to emotions which students had experienced in the past. And finally how this interplay resulted in specific actions of student life. One basic idea in this concept is that students never learn completely something new but they transform existing cognitive structures and emotional schemata into new forms. An individual student acquires new knowledge in the form of an interactive process, constructing patterns that relate his/her inner and outer worlds to each other. It was very interesting to discover that similar epistemological ideas were put forward into the theories and the practice of teaching and learning of foreign languages. Whereas in the 1980s the communicative and authentic approaches were considered the appropriate methods (Little, 1994) nowadays the concepts of learner autonomy are proposed.

"Terms like 'personal agenda', 'initiative' and 'self-evaluation' inevitably emphasise the individuality of each learner as regards need, purposes, capacities, and ultimate achievement" (ibid., p.431). In fact with their inclination towards radical cognitive constructivism these modern concepts of learning languages draw on Piaget's epistemological approaches (Wolff, D., 1994). With their careful consideration of interactive processes in supporting the individual student they come very close to the perspectives which are well known to counsellors. In another way looking at transitional affects of culture for students who have had a break-down, Karin Brutin has emphasised the importance of the experience to study. What students learn moves them deeply and involves their own personality.

Now I will turn back to my hypothesis and my idea of conceptual networks. In the above mentioned lecture I noted the transformations from the past into the present and now I want to underline the perspective from the present to the future.

To create new forms out of old ones means to reintegrate emotions, cognitions and actions in students lives, that is his/her personal and academic development. Psychologically similar processes will be needed to cope with constantly changing social demands predicted by social scientists for the professional life and social life in general. When we think about the problems which the students manage to solve, a lot of examples come into our mind. I like the way our British colleagues Helen Henry (1994) and Colin Lago (1994) as well as our Irish colleague Declan Aherne (1995) have described them. These problems are: to overcome homesickness, to cope with the cultural shock when starting to study at university, to find personal boundaries to develop sexual identity, to develop interpersonal skills, to reintegrate past traumatic defended experiences like severe parental conflicts or sexual abuse or to reintegrate learning experiences or personal experiences to cope with eating disorders, to cope with academic stress to nourish self-esteem, to live with conflicts and break-down of relationships, to develop self adequacy, to cope with exam anxiety and procrastination, to find decisions within conflicting interest. In all these more or less severe problems and all the daily conflicts students sometimes reintegrate extreme past experiences into a present life. While managing these situations they prepare themselves for the future. They learn to balance the inner and outer world and in this sense to manage conflicts. This is a starting point for *lifelong learning* or - to put it into terminology I suggest here - for the developing of the ability to contribute to conceptual network in whatever environment students might later live in.

Challenges to student counselling and student counsellors

What does such a view imply for us as student counsellors? I want to point out some implications for three basic areas. The first two topics are closely connected. To what extent can student counsellors focus the therapeutic sessions? How do we constructively co-operate with the changing health and freelance psychotherapeutic systems? To explain what I mean by this, I want to read some sentences from a letter which the chairman of our Dutch colleagues has written to me: "But in fact each client needs his/her own specific approach: as short as possible, as long as needed. This may be different for each student. As a consequence of new developments in the Netherlands concerning psychotherapy (cost control) and higher education (reduced financial support for study duration), the priority is in finding various forms of help for student and student -related problems, which are of short duration and have a low threshold. However, care should be taken not to do injustice to the problems of the students: help can only be effective if the objectives can be attained to a satisfactory degree. This means that, which ever approach to the students is chosen, the psychologists for students will have to learn to cope with the contradictory tendencies of quality, effectiveness and cost control". I feel that the question of how far we reactivate dilemmas and how far we support the student to find new ways in his/her conflicts and transitions needs more clarification. More research and evaluation could be helpful. We should develop the idea of focused student counselling further. During our research on the German system we found out that most services offered approximately ten sessions to their students. We have to compare this number with the minimum 25 sessions of which clients usually take advantage in freelance psychological counselling and psychotherapy. The general development of comparative and evaluative research on psychotherapy might be a positive resource to clarify some questions. The question connects closely to the question of *multi-modal procedures: differential psychotherapeutic interventions* (Bastine, 1992, p.271) or integrative eclecticism (Revenstorf, 1992, p.360) or the combination and integration of different methods and techniques (Huber, 1993, p.336), integrative therapy (Petzold, 1993) or the idea of three dimensional general psychotherapy (Grawe, Donati & Bernauer, 1994, p.784) are some of the concepts which are proposed in the psychotherapeutic community.

Helga Knigge-Illner in her presentation about counselling with exam anxiety has shown us how helpful it can be not only to integrate various approaches but also to define borders and the necessity of further research. Trine Fredtoft has stressed that it is fruitful to work therapeutically with issues of separations, dependency, procrastination and fear of graduating - within a 15 session - time limited group therapy. The discussion after the presentation at the conference proved this method to be inspiring.

In all these professional issues it seems to me useful to add the perspective given above. What kind of demands and resources will students meet in their future and how will they influence students' conflicts? Especially in which way can student counselling give support to strengthen students ability to cope with future demands? This might raise questions about how psychological student health should be looked at within the more general concepts of health psychology (Schwarzer, 1990, Dlugosch, Schmidt, 1993). The question of how the further development of the health system, and specifically the development of psychotherapy inside the health system or other freelance systems, influences the development of psychological student counselling becomes an issue at least in some European countries. For the UK Michael Burton has introduced the idea of the necessity of 'productive intelligence' to cope with the demands of constructive co-operation which are put on the agenda. Finally there are direct questions arising around the fact of the European integration of study and exchange systems. We started to discuss the cross-cultural issues inside FEDORA at the Barcelona Conference and at the Athens Symposium.

During the past days we added many insights in cross-cultural encounter and counselling. If one looks at all these three fields one can identify tasks, challenging tasks. Co-operation beyond one's own culture and system seems to be very promising. The comparative outlook across various cultures and systems may deliver new ideas and approaches. There are points at which we could develop new ideas. Also the outlook on more general developments which influence our work might become clearer.

Co-operation in higher education

Student counselling means to do counselling in context, that is in higher or further education. It seems to me important that we might have a constructive and conscious relation to the institution in which we are working. The question which Elsa Bell raised in her paper "Inside, outside or on the edge? A place for therapeutic counselling in the university community" presented in Barcelona demonstrated some of the dilemmas we are living with: sometimes the possibilities of psychological counselling are seen as all powerful and sometimes completely useless.

Elsa Bell has shown ways that traps and impasses inside the institution might be overcome. To get into the main stream of higher education it may also be useful to be connected with other ideas and persons. For example, the policy statement of the European Commission "To teach and to learn- Towards a society of knowledge" contains some interesting aspects to which perhaps psychological counselling can relate actively.

However we judge these possibilities it would be myopic not to look out for co-operation. We have to consider the tremendous intellectual and personal resources related to higher and further education. Higher and further education becomes a part and a target of social change as we have all noticed in our countries. Financial restrictions, new forms of academic management, new demands on the student and on the university express some of the social changes mentioned above. Colin Lago points out that change is stressful for the student. In the same way social change might be stressful for student counsellors. We all know stress is also a chance to relax and to revise coping mechanisms and to engage actively to solve difficult situations. Interactions can help to do so. In this sense our co-operation on a European level can enhance our ability to contribute actively to the processes of change in higher and further education. I feel that we as student counsellors have a higher response ability to contribute to higher education in times of change.

Of course we cannot all promote things in the sense of administrative influence. Yet we are able to support the creation of new insights into the processes of higher and further education specifically concerning the needs and the psychological health of students. Sylvette Gendre-Dusuzeau and Christine Pradel-Pavesi have pointed out the importance of the specific conditions in the various countries to answer the question how to make university boards aware of the needs of psychological counselling. They closely connect this question with the other two questions: how to make a network with other correspondents? what importance each country attaches to 'mental; or 'self' aspects of difficulties going along with studying? The conceptual network which took place here in Sussex University had been a useful step to find courage and ideas and personal contacts to do so.

I want to thank our British colleagues and ASC for organising this meeting.

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Index

Author Index. Alphabetical by Surname

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