

PSYCHOLOGICAL COUNSELLING  
IN  
HIGHER EDUCATION

A European Overview

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LA CITTÀ DEL SOLE  
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Foreword  
by  
The Chairman, Liaison Committee of Rectors  
Conferences

The present overview is the result of a study undertaken by PSYCHE, the Psychological Counselling in Higher Education working group, established by the Forum Européen de l'Orientation Académique (FE-DORA). The work started in 1989 and PSYCHE have collected information from almost all EU Member States and have undertaken three case studies to go into further depth with problems and solutions in the field of psychological counselling. The result of this is now available and is greatly to be welcomed.

In a medieval Irish poem entitled *Beatha an Scoláire* - The Student's Life, we read "Aoibhinn beatha an scoláire bhíos ag déanamh léighinn - The student's life is pleasant, and pleasant is his labour". However, this report informs us that not all is pleasant - today's students suffer from stress which impedes their study and overall academic performance, and leads to their being awarded grades in examinations which do not reflect their abilities. Stress management by students is essential for their health, happiness and ability to study. At the same time it must be recognised that stress is a normal, healthy element of every student's life. It is only when stress becomes excessive that students, with the help of their counsellors, need to identify causes and address them.

This publication identifies problems amenable to psychological counselling which are common to students

in all EU Member States; it will assist those of us who have a responsibility for student welfare to give better service in the future.

COLM O'H EOGHA  
President  
University College Galway, Ireland

## Foreword

The President, Forum Européen de l'Orientation  
Académique (FEDORA)

Psychologists, like everyone else involved in university guidance, feel the need to exchange experience, to examine their professional practices and to assure themselves that they are meeting the expectations and new needs of young European university students as well as possible.

The preparation of a report which describes the practices of psychological guidance at university level across the different Member States of the European Community seemed to them the first step to be taken.

The project might appear simple but the complexity of carrying it out because of the numerous national differences in vocabulary and methods, was apparent from the first working meetings.

The achievement of our colleagues is to have overcome these obstacles in order to present to us, a little more than a year after the working meeting at Naples, a substantial first report.

If this objective has largely been met, it is nevertheless only the first stage in the carrying out of a more ambitious working programme which the FEDORA Psyche group has adopted. Its wish is now to extend the debate and, in light of this report, to undertake a deeper consideration in order to enrich the practices of guidance psychologists at the trans-national level; to make available for European university guidance a network of increasingly competent

professionals, a network which has the will to improve continuously the quality and efficacy of wider university guidance, and which will present and press our common programmes of action and research at the European Community level and in the university world.

The reasons for optimism are well founded because of the very clear intention of our Members who are guidance psychologists to take the initiative in looking for concrete solutions to important problems.

The Fifth European Congress on Guidance, which FEDORA is organising in April 1994 at Barcelona, will continue the theme of this work. It will give the opportunity to all professionals who are interested in making their contribution to the work of this Group.

JEAN-MARIE BURNET

## INTRODUCTION

### THE BACKGROUND

These reports are the outcome of a project of a work-group called Psychological Counselling in Higher Education (PSYCHE) which is in itself a sub-group within an organisation called (Forum Européen de l'Orientation Académique (FEDORA). It is important to describe the history of FEDORA and its role in the creation of the PSYCHE work-group. FEDORA is concerned with the provision of orientation services in higher education in Europe and provides a forum in which information and issues arising about orientation in Europe can be exchanged, compared and discussed with the intention that a good standard of provision can be developed within the European Union. One of the exciting features about FEDORA is that it handles a wide range of aspects of academic orientation problems within the European framework. FEDORA accepts the simple truth that for a student as well as for the university as an institution, orientational challenges exist in a complex way: there is information to be gathered and put into a useful context; educational support and qualities have to be checked; current and future career aspects have to be considered and the students' academic development as well as their development as people have to be given attention.

This wide scope of tasks may be fulfilled by our universities but the extent to which this is done varies

not only between European countries but sometimes within each country and the ways of offering services may also differ. Our ability to state this with certainty is the result of work already done by FEDORA, since before the organisation was created there was no central pool of information from which to draw.

With all the complex fields within which the organisation is involved, FEDORA was aware of the risk that communication might become too general and diffuse to be meaningful and useful. Consequently it had to manage the conflict between the challenge to incorporate the broad range of the aspects of orientation it covers and the necessity to have a specific framework to establish a thorough professionalism within FEDORA. Its decision in 1992 to establish work groups in six of the major themes on its agenda was a useful way of managing this conflict. It was at this time that the PSYCHE work-group was formally established.

However the impetus to establish the PSYCHE work-group actually came about at an earlier time during the "Third European Conference on University Guidance" in 1988 at which FEDORA also had its birth. These conferences on guidance were on the theme of student orientation services in higher education in the European Union and their role in easing the transition of students studying in countries other than their own through exchange schemes such as Erasmus. In the inspiring atmosphere of that conference and of its location in Athens and Delphi, participants formulated ambitious aims as to what guidance and orientation should achieve for students in Europe. With those aims in mind, some participants felt the necessity to have a closer comparative look at the ways those aims could be realised in guidance and counselling relationships. It was also felt to be important to include in the professional exchange the contributions

of psychological counselling. Indeed, it was at that conference that the first encounters took place between people who identified their role as being a discrete activity within guidance i. e. psychological counselling which focuses on the emotional and psychological difficulties of students rather than on study advice, career choice and the general dissemination of information and advice. They described themselves variously as psychologists, social workers, counsellors, psychiatrists, etc., but as they entered into dialogue they began to identify that they were involved in a similar field of work.

Tony Raban who became the first president of FEDORA was perhaps the catalyst that made these encounters happen by making the deliberate decision to invite Elsa Bell (then Head of the student counselling service at Hatfield Polytechnic) who was at that time the Chairperson of The Association for Student Counselling in Britain and Criag McDevitt (Head of the student counselling service at the University of Edinburgh) the Deputy Chair of the Association for Student Counselling. In this way a step was made towards integrating the British student counsellors as members of FEDORA and providing a way for them to contribute their tremendous experience in the field of psychological and therapeutic counselling. It was Elsa Bell and Craig McDevitt who put up a poster at Delphi describing the nature of their work and inviting others who did something similar to an informal meeting. Hearing of the ideas emerging from this group Tony Raban suggested there was room within the development of FEDORA for attention to be paid to this specialised area of work. Thus as members of the international preparatory group for the "Fourth European Conference on University Guidance", Elsa Bell and Dr. Gerhart Rott, Head of the counselling service at Bergische-Universität—Gesamthochschule Wuppertal, had charge of

the preparation of the conference section entitled "Counselling Methods and Concepts". In order to enlarge contacts with colleagues who could make valuable contributions, they organised a meeting of 11 representatives of student counsellors in Europe with the help of Adrian Becks in Amsterdam in 1990. Drs. Henk van der Poll and Carren Tromp-Sypkens, student counsellors in Utrecht and Groningen, did the local organisational work. Seven E.U. countries were represented by at least one expert in the field. This was an important step in getting to know one another and the work each did. In the beginning the group had to clarify at least to some extent the differences between the educational systems and the counselling services operating within these systems. At the same time this group was able to touch on very specialised problems. All the participants had a psychotherapeutic training and this helped to identify common professional issues and facilitate communication. They found a basis on which to talk about possible ways of exchanging their knowledge and developing some perspectives on participating in the European dialogue about academic orientation. This group decided to seek to establish itself as a work group within FEDORA and gave itself the name PSYCHE—Psychological Counselling in Higher Education.

With all the contacts established it was easier for Elsa Bell and Gerhart Rott to encourage contributions for the section on counselling methods and concepts at the Fourth Conference in Berlin in 1991. During the Berlin Conference many ideas arose which inspired enthusiasm for continued co-operation by colleagues who had newly discovered or identified each other. After the General Assembly of FEDORA had accepted PSYCHE as one of its work groups, the PSYCHE colleagues decided to work on a detailed report on services offering psychological/psychothe-

rapeutic help in European universities. It seemed to be a necessary prerequisite to establish what the ground was before beginning any attempt to evaluate standards and methods of practice on a Europe-wide scale. To that end it was decided to hold a forum entitled "Psychological Counselling in Higher Education in the European Community: establishing the common ground and exploring the differences with a view towards future developments". The Italian psychotherapists Professor Paolo Valerio and Dr. Simonetta Adamo, who teach clinical psychology to students of medicine and who are responsible for the service for psychological help which they founded fourteen years ago at the University of Naples, invited PSYCHE to do this comparative study in Naples and the forum was duly held there in September 1992. The European Commission decided to support this development by designating it a formal project within the framework of the ERASMUS programme and agreed that it should be administered by Gerhart Rott in close cooperation with the Bergische Universität - Gesamthochschule Wuppertal. In addition the local university gave its support by providing the location and hospitality and the Istituto Italiano per gli Studi Filosofici gave specific aid by facilitating the production of the final report.

There were 21 participants who had close working connections with clinical psychology and psychotherapeutic counselling. Prior to the conference, they had prepared preliminary national reports. Other than Spain, Portugal, Luxembourg and Eire, all the European Union countries were represented. In the case of Eire, there had been the involvement of Annette McGee, student counsellor at City University, Dublin, from the very beginning but she was not able to undertake the tremendous volume of work entailed by the national report and neither she nor PSYCHE could find a replacement who could afford the time to be-

come involved with the task. Both before and after the forum PSYCHE tried to obtain reports from the three missing countries with little success but eventually contacts were made with Spain and Portugal and the illuminating correspondence that ensued has been included in the reports.

Discussing the reports and giving recommendations for revision was intended to be the most important part of the forum but there was a late decision made to include four clinical case studies presented by Dr. Simonetta Adamo (I), Jette Rytke (DK), Ann Heyno (GB) and Dr. Helga Knigge-Illner (D). The group discussions on those papers had an impressive standard of professional communication and better than any other activity, helped the participants to identify their common ground. Three of these case studies have been published in this report.

## COMMENTARY ON THE REPORTS

At the outset of this project in Berlin in 1991 when it was decided to obtain national reports, the editorial team were already aware that there was a wide diversity of provision of psychological counselling in higher education both within individual European Union States and between States. The team formed a rudimentary hypothesis that the roots of this lay within the different cultures and might also have an economic component. This hypothesis was reached on the basis that the most obvious disparity seemed to form a North/South divide with provision being the most widespread and established in northern European States whereas they seemed to be virtually non-existent in Spain and Portugal, relatively neonate in Italy and new-born in Greece. However, the editors were also aware that there were discrepancies in

this rudimentary hypothesis. The economies of some of the northern and southern E. U. States were not so very different and the practice of psychological counselling or psychotherapy in the public domain was wide-spread in all the States. The hope was that by undertaking this project we might find more definite answers.

It was felt that the survey should do more than offer a picture of just what exists but should also seek to offer some analysis of why things are the way they are. In order to elicit more information about cultural and attitudinal differences the contributors were asked to address the educational tradition (the educational context) within their states and the educational and institutional attitudes towards the provision of psychological counselling. The editors felt that institutional attitudes would give a great deal of information about culture given that institutions, by their nature and size tend towards conservatism and tend to embody the majority values of the nations in which they are located.

On looking at educational contexts, the main differences that emerged were the varying degrees of selectivity for higher education (from mere possession of the basic qualifications to highly selective and competitive entry requirements created by the institutions themselves); the ages at which students begin their higher education and the length of time students take to complete their degrees; the cost of enrolment fees and the number of students enrolled; some countries seemed to have many more vocationally oriented courses. However none of the information elicited gave much of a clue as to why there was such a variance in provision although it indicated that some conditions would create their own peculiar problems for students.

Issues surrounding institutional attitudes towards the provision of psychological counselling were perhaps more



indicative of why there were great variations of provision of psychological counselling but these variations were local so that even in states where psychological counselling was well established, insitutional attitudes were varied.

The overall impression is that even where psychological counselling is well established it is still a poorly recognised profession and its role is not easily understood as a necessary or useful adjunct to the educational process. This is not surprising given that the concept of psychological counselling in higher education is relatively new in Europe, at most only thirty years old, which is relatively no time at all in the context of universities which have been established for seven or eight hundred years and in the context of the concept of student-centred learning being a post-war development. The centuries-long tradition in universities has been that students come to them to be recipients of knowledge or the participants in research and that as long as universities provide the facilities and the tools for these activities, they have honoured their obligations to the students. Anything else might be considered to be a luxury and counselling services, themselves, originated in a time of great economic optimism and expansion. In the current climate of recession where higher education institutions throughout Europe are experiencing financial difficulties and are required to make economies whilst increasing the number of students, it would seem completely logical that the direct teaching and research components of universities are given highest priority for funding and that psychological counselling is perceived as an unaffordable luxury.

Institutions often tend to see counselling as a part of its welfare provision, almost as if it were a kindness offered to students. It is often perceived as a process of giving information and advice which is an understandable confusion given that linguistically the term "counselling"

carries the meaning of giving advice and the translation of the word from its American sense into European languages has been literal and direct e.g. *conseiller*, *beraten*, *rådgivning*, *consigliere d'orientamento*, thus continuing to give the sense of it being a process of advice giving in each of those languages and thus creating a misunderstanding. In addition, psychological counselling provision often began within services that were offering advice and which recognised in that process that some psychological component was involved in many of the students' problems which rendered them incapable of using the advice offered and also left them in continuing distress. Some psychological counselling services continue to be located in advice centres which can obscure the fact that it is a different activity and can cause further confusion to the institution.

Unfortunately, as a consequence, in such circumstances it is difficult to redefine the institution's notion of what counselling is when it already has a comfortable and easy definition which is practical and straight-forward. What has to replace the misconceived definition is much more complex and implies a rather different philosophy of education and the method of its delivery to its recipients. When the traditional view is that the major responsibility of the institution is confined to supplying the teaching and research facilities for students, it is very easy to believe that the psychological and emotional difficulties of students are somewhat external to the remit of institutions and as a consequence should be dealt with elsewhere. Unfortunately this ignores the fact that such emotional and psychological disturbances are either a direct response to the learning process or cause sufficient disturbance which impairs the student's capacity to learn. It also ignores the fact that psychological counsellors in higher educational institutions carry an additional expertise in educational psychology

which is not readily available in the external mental health services. It could be argued that the lack of such expertise within higher education institutions is a loss not only to the students but also to the institution itself. This refers to the fact that counsellors in the course of their work learn what practices within the institution are beneficial or detrimental to the well-being of students and this information can be made available to the institution to help inform its policy and practice. It must be said that recognition of the value of psychological counselling services does not come easily and that in the absence of government regulations anywhere in the European Union making the provision of psychological counselling in higher education institutions mandatory, it can take many years to establish a counselling service, to prove its efficacy, to demonstrate its value to such an extent that the institution readily accepts its presence as an integral part of the structure.

Returning to the editors' original hypothesis that the differences in provision might have its origins in cultural differences, some of the responses given and the dialogues which took place at the forum in Naples in 1992, either hinted at or indicated many cultural differences in values and philosophies. Many of them were anecdotal but our Greek contributors had carried out research into what they felt was an important issues for Greek students (Kalantzi-Aziz 1987, ref. Greek national paper). They recognised that the majority of Greek students continue to live at home and as a result many of the emotional difficulties experienced by such students are a consequence of frustration of the impulse to become separate and autonomous individuals. Paralleling this is a report by our Italian colleagues of a judgement by the Constitutional Court in Italy compelling parents to ensure their children's financial support until they are twenty-six. Whilst this may seem fair, it ultimately makes it more difficult for young people to car-

ry through the process of being separate from and independent of their family when the State holds the latter responsible for providing full educational opportunities. It is only in recent times that with the introduction of personal educational loans young people have been allowed to begin the process of growing up, becoming more self-reliant and aware of their responsibilities. This forms an interesting contrast to many of the emotional problems experienced by northern European students for whom entry into higher education is their first experience of living separately from their families. In their case disturbance can be caused by feelings of loss and uncertainty. It seems that the Greek contributors chose to research this area not only out of clinical interest but also to refute an argument from Greek higher education institutions against the necessity of the existence of psychological counselling services for students. The argument is that they are unnecessary because Greek students live at home and they have their families to turn to if they have problems.

To turn to professional issues, the survey sought to determine whether the participants did indeed share the same profession. The language difficulties apart, it seemed that individuals themselves were still in a process of defining their profession for themselves which seems to be the result of being involved in a set of activities which were relatively new. The newness of the profession is reflected in the lack of uniformity of qualifications. Most people working within this field come from a wide variety of backgrounds: medicine, psychiatry, psychology, social work, teaching. Some countries show a marked preference for people with a clinical psychology training whilst in others it is essential within the country's laws to have a degree in psychology. It is only in the U.K. where there is a specific training in student counselling. There are also several theoretical orientations which form the basis of the counsel-

lors' practice and some practitioners work wholly in one particular mode and others are more eclectic in their response to students' problems. Nevertheless, it seems that despite the variety of training backgrounds there was a broadly shared understanding of the aims and objectives of the work and that the major working tool was their capacity to enter into the psychological processes of their clients and to use their understanding of each individual's psychological process to help bring about beneficial changes in such disturbance and loss of good functioning. This was the common factor although the kinds of interventions made to bring about those beneficial changes might be different and when this was so that those differences were most frequently created by varying theoretical models.

Part of our survey method was to bring representatives from each E.U. state to a forum to make their national presentations and to open their presentations to discussion. The general note of these discussions was a feeling of great confusion and frustration as the participants struggled with the differences in provision and contexts and there was a fair degree of challenging people's professional qualifications to such a level that it hardly seemed possible to discover common ground. Fortunately, the other activity included in the forum was, as noted earlier, the presentation of the clinical work done in four of the European Union States through the medium of case-study presentations. It was in that activity that the common ground was discovered. In these clinical discussions there was an expected disagreement based on theoretical grounds about the kinds of interventions used but there was a common understanding of the causes, effects and implications of the problems i.e. there was a sense that regardless of how these problems were dealt with, the participants were very much discussing the daily bread and butter of their professional lives. It was here that there was displayed a shared

sense of mission, a recognition of common concerns. First and foremost they were committed to enabling the psychological and emotional well-being of students. They recognised that students are involved in a transitional experience which is upsetting to the individual's sense of the status quo and that learning involves the student in a process that creates change and that these changes are disturbing to varying degrees. As well as being exposed to new ways of perceiving the world, either directly through academic learning or changes in life-style, the majority of students are already involved in the later stages of adolescence, which research demonstrates is often prolonged beyond the maturational norm, so that an additional stress is placed on the individual. These factors make students particularly vulnerable to disturbance. The counsellors also recognised that other stresses affect students, e.g. competition and pressure to achieve high levels of performance, fear of failure, making course and career choices, financial insecurity, which are all part and parcel of academic life. Over and above all that there are difficulties which can arise in any life, e.g. unhappy relationships with parents, partners or peers, bereavement, physical or mental illness, trauma from accidents, physical or emotional abuse. Indeed the list of all the ills that can befall students can seem endless. The counsellors recognised that all these cause emotional disturbance which can affect the students' capacity to learn. However sombre these lists might seem, the counsellors demonstrated their pleasure and satisfaction in their shared profession by their enthusiastic participation in the discussion of clinical matters.

Naturally this was a very reassuring outcome for all participants at the Naples Forum but it is important not to overlook the real difficulties of communication that this particular group experienced when they met together. The most obvious difficulty was language. However this was

not merely confined to our different native tongues but also the language of our differing theoretical orientations. Between the two it was a slow and painstaking task to determine whether we shared a common ground. Meanings had to be double checked or even triple checked and those who had facility with language and self-confidence had to be held in check so that the less expressive of the participants could make their own contribution. National pride also contributed to our difficulties of communication. It was painful to be challenged and to acknowledge areas of weakness in our own national systems and it was, as a consequence, a difficult struggle to maintain honesty, report reality and avoid a recitation of what would be the ideal in terms of provision. It should also be said that feelings of national pride or perhaps hurt were running high during the conference because it took place during the week that the European Exchange Rate Mechanism came near to collapse and Britain and Italy had had to withdraw. Despite the warmth and outstanding generosity of our hosts and other Neopolitans whom we encountered, at one point some of the delegates were challenged in the street because they were identified as German and hopes for European Unity were in shreds as unpleasant national stereotypes seemed to emerge in the newspapers. These external events created uncomfortable undercurrents from time to time in the conference. As a working group we were also aware that our national differences affected the way in which we approached the task of working together. To describe these differences puts us at risk of creating stereotypes but perhaps it is important to recognise the difficulties that affect working on an inter-European dimension.

Beyond the time of the Forum and during the time of pulling together and ordering the reports for publication, we made fresh realisations about the difficulties of

working on a European-wide scale. Much of that was financial in origin. The bulk of the funding we were given towards this report went towards the costs of the Forum, specifically to support participants' travel costs and the printing of the reports. Because of the very high costs of travel within the European Union and the heavy workload of individuals within their services, meetings of the editorial team had to be kept to a minimum and were usually squeezed into spare moments at other conferences when at least some of the team, not all, were present in the same place at the same time. All other communications had to be by letter, telephone or fax which was slow and left room for miscommunication. In other words the team became isolated individuals and it was difficult to maintain the momentum of the whole endeavour. For future projects it would seem essential to budget adequately for both human and financial resources.

#### LOOKING FORWARD TO FUTURE DEVELOPMENTS

The publishing of this report will give us a solid common foundation of mutual understanding about the framework of counselling in each of our countries. The next step might be to look at the counselling services in a more systematic way and exchange ideas about special methodological problems. PSYCHE may also contribute to a process of defining standards and qualifications for psychological and psychotherapeutic counselling in higher education alongside more general discussions which are already taking place within the European Union viz. The European Association for Counselling and The European Association for Psychotherapy. FEDORA-PSYCHE might feel it has a specific expertise in orientational needs of

students to lend to these discussions. The result of our co-operation is that there now exists a network of psychological counsellors who can draw upon each other's expertise for training events on a European-wide scale. PSYCHE's work can be broadened with strong links with other FEDORA work groups where there can be a fruitful integration of ideas and concepts.

However we are aware that a continuous task awaits us and that is to promote in academic institutions of all European countries the idea that successful academic learning is not only a process of acquiring knowledge but also implies personal growth and development. An increasingly more complex educational environment which is created by the increased facility for students to study in European countries other than their own will facilitate and widen the opportunity for such personal growth. We know from cross-cultural research that the impact of European student exchange is enormous both positively and negatively for the students involved and that orientation, guidance and psychological counselling will have a very strong role in supporting students through the difficulties that might arise.

ELSA BELL, CRAIG McDEVITT,  
GERHART ROTT, PAOLO VALERIO

*Notes on papers:*

Throughout we have tried not to edit out the essential characteristics of the style of each national paper as we believe this, as much as anything, conveys a sense of context. Therefore there is no uniform format for presentation. However we believe and hope that readers will discover that the information we requested can be located within the papers.

Our thanks are due to the many counsellors and their secretaries who have given their time and energy to the project and particularly to Lenore Humphreys, Office Manager of Oxford University Counselling Service, who has shown unfailing patience in her negotiations with the editors and contributors as she took responsibility for the production of the final manuscript.

We would also like to thank Beth Crutch of the Oxford University Computing Service for her support and advice. We discovered during this process that her task was not unlike that of counsellors. Computer disks that were supposed to be compatible clearly were not. She helped them to talk to each other and thus contributed greatly to the eventual unity of the project.

NATIONAL PAPERS

**BELGIUM**

JEAN PAUL BROONEN, University of Liege  
JEAN PIERRE PIREAUX, Free University of Brussels  
RITA WALGRAFFE, Catholic University at Louvain

This report is the summary of an inquiry made in almost every university in Belgium. Eight universities (4 Flemish speaking, 4 French speaking) replied to this inquiry.

*The higher education system in Belgium*

After secondary education which can be general, technical, or vocational and which lasts for 6 years, following primary school (also of 6 years duration), students have access to higher education provided they choose general or technical subjects.

Three possibilities are offered:

- Short-term higher education: this consists of a single cycle spread over at least three years.  
The “diplôme d’aptitude à l’enseignement supérieur” - DAES (The Diploma of Aptitude for Higher Education) is often required.  
This kind of education addresses practical aspects of a profession. For example, it trains middle managers in the execution of scientific and technical tasks.

- Long-term higher education at university level. This consists of two cycles (minimum 4 years). DAES is required.

In this type of education, the focus is on applying theories to practice and trains technical managers for tasks of transposition and applied research.

Sometimes, admission for some short-term or long-term education requires that students pass an entrance examination (education in Art for example).

- University education (at least two cycles) requires DAES too. Otherwise only students who choose Civil Engineering as a subject have to sit a very selective entrance examination. This type of education attaches great importance to abstract and theoretical learning. It trains, for example, people who will become senior managers for research, conceptualising and/or the application of new scientific knowledge. Entry age to university is 18. Even though the school population is unevenly spread according to their social origin, university is accessible to everyone with a DAES.

On the other hand, the academic courses are very selective: the average success rate for the first year varies around 40% except for engineering students (where there is a 65 % success rate perhaps because of the entrance selection).

Besides, statutes stipulate the prohibition of failing three times. Students can sit twice for the same exam in the year and in some universities, they can only fail once in each cycle (once in candidatures, once in licences). The average age for leaving university is 22-23 in the case of those students undertaking courses which require 4 to 5 years, only Medicine requires at least 7 years of study.

Successful completion of these two cycles (candidatures,

licences and memoirs) makes it possible to further complete the training with a complementary diploma with specialisation or with a third cycle, a doctorate.

### *Counselling and advice provision*

All Belgian universities (either state or independent) have Services to assist students. Among these, the provision of vocational guidance and/or psychological help varies according to individual universities.

In one university the service offering vocational guidance and psychological help is independent of other Services (social help, medical help, information on education and on professions); in another university the same people give different kinds of help (vocational guidance, information, pedagogical guidance, psychological help).

The size of the university and the origin of financial resources also determine the kind of consultation which can be offered. One middle-sized university (with a restricted choice of faculties) limits its helping task to information on various educational choices at the rate of 38 hours a week. Another university, a larger one, has staff representing the equivalent of 480 hours a week (N.B. full time work equals 38 hours a week).

Financial resources often originate from state subsidies, university administration or from the Health Ministry and when the latter is the case, the service is likely to take a psychotherapeutic approach.

In other services the main role is the provision of vocational guidance which is geared towards helping future students to identify a profession which attracts them and to choose the appropriate type of education. Once students are in higher education, these services coach



students who have difficulties during their courses or who feel uncomfortable.

Most students refer themselves to Services but sometimes they go as a result of following the advice of a parent (particularly in the case of future students), a teacher or another helping services practitioner.

Generally all university guidance Services give information on studies and professions and participate in "open door" or information sessions. Accordingly with regard to guidance or orientation (in individual consultations) they help students to get to know themselves and to explore all possible choices and their implications based on personal taste and abilities. The objective is for the person to achieve a "sense of fulfilment" through developing a way of life which takes into account his private life, the family context, his interests and motivations, the university requirements and a realistic knowledge of the professional world.

According to their size, Services receive annually between 75 and 2000 students. The number of consultations for a student varies from 1 to 4 and a consultation normally lasts one hour. Of course, if it is a simple information session, ten minutes are sometimes sufficient but one consultation can last two hours if it deals with a complex inquiry.

Methods used by psychologists are essentially a non-directive and semi-directive dialogue. They can also choose to use psychological testing tools such as an interests inventory, projective techniques especially those focused on professional aspirations. Tests focusing on psychometric aptitude, whether computerised or not, are not often used.

Such consultation services also offer psychological support but less so than for vocational guidance, with the exception of one Service where psychotherapeutic help has a very important position. Without any doubt, the

origin of financial resources and the attitude of academic authorities explains the history of this situation. We have to note that restrictions in budget and waiting lists set up priorities.

However, emotional problems specific to this age group and to the process of adapting to student life are more and more taken into account. Psychological help is a moral support rather than a therapeutic one. When psychotherapeutic help is needed, the Service links with other Services or with private psychotherapists. Interviews are generally non-directive and psychoanalytic, rarely systemic. It seems that in the Flemish part of the country, psychologists frequently use behaviour therapy.

The number of students asking for psychological help varies between 34 and 240 per year and 100 - 5000 consultations per year according to the university and size of the service. It is noticeable that psychological help generally requires long term intervention, which is not the case for vocational work. Meetings are often on a weekly basis and last for a few weeks or months.

The issues are generally related to family conflicts (separation from parents), adaptation to social life at university, relationship difficulties (couple, separation), sex problems, concentration problems, eating disorders, depression, inter al.

Essentially, university students and final year school pupils use these Services but some Services also see younger high school pupils and adults who want to change their career.

Half of the universities ask for a financial contribution from their users: prices vary between 100 to 400 FB (3 to 10 ECU).

The links between different services e.g. vocational, psychological, social, medical, vary according to local conditions. Sometimes the same Service co-ordinates the

final outcome in dealing with the multiple aspects of a demand by referring a student to the appropriate Services relevant to each aspect of the problem.

Students experiencing difficulties in orientation can be seen as the consequence of a lack of information, ignorance of one's own motivations, choice of courses at school, personal development, family crises, or existential problems. In other words, according to the way Services work, requests from students are perceived from different angles. One can say that in some universities, problems can be attributed to a lack of information for students when in others, students are perceived as having psychological problems.

Requests can be classified into three main categories: requests for information, requests for advice, and requests for psychological support. Distinction is more difficult to establish between the last two categories: difficulties in choosing courses, difficulties in relationships, a family crisis, and other personal problems are often mixed up with a need for information or indeed a request for information might also include a hidden request for psychological help.

As mentioned earlier, all universities in Belgium offer to students help in vocational guidance; counsellors can be deployed in a specialist service distinct from other kinds of help or can be integrated in larger Services which encompasses all aspects of student support needs.

#### *Training qualifications of counsellors.*

Most counsellors have graduated in psychology (5 years of study). Sometimes they have a post-graduate doctorate in psychology and occasionally we find medical practitioners as well as teachers and philosophers working as counsellors.

All trained for their specific discipline by working in their Services, by participating in seminars since there is no post-graduate training in counselling as such in Belgium. Training in psychotherapy is found in organisations outside universities grouped according to their theoretical orientation (behavioural, systemic, psychoanalytic orientations). This type of training involves a personal commitment of many years.

#### *Prospects*

How are the future developments of counselling in universities seen?

Most Advisory Services expect a development of their activities which will produce an increase in the volume of the dissemination of information and an evolution in counselling training. Units are also preparing for more co-operation between counsellors, greater exchange of information, an increase of provision of pedagogical or psychological help. There are also plans to begin to involve parents in the process of supporting students who are experiencing difficulties in adjusting to university life.

With regard to the impact of "europeanisation" on higher education—Advisory Services emphasise that europeanisation will open more possibilities of choice in terms of students' personal development. As a consequence, counsellors will have to prepare for this not only by improving information about study networks, but also by developing new specialisations to allow for the exploration of cultural identity and characteristics as there will be more demand from students from other countries and home-based students who intend to or have spent a period of time studying in other countries.

## GERMANY

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*1. Educational context*

## 1.1. General Outline

The Basic Law (Grundgesetz), which came into force in 1949, provides the Federal Republic of Germany with a federal constitution. Today, most schools and universities are state institutions. They receive financial support from the federal states (Länder) which control education within the framework of a federal law (Hochschul-Rahmengesetz) which empowers the federal government to lay down general principles for higher education. There are no study fees in Germany.

The respective state laws treat the universities as autonomous institutions, which means they have the right of academic self-administration. Federal and state authorities cooperate on educational planning and funding in joint commissions such as the Bund-Länder-Commission or the Standing Conference of the Secretaries of Education and Cultural Affairs of the Länder.

## 1.2. Admission to Higher Education

Secondary schools lead to higher education. After 13 years (or 12 in some new Länder) of school the general or subject-restricted higher education qualification (allgemeine or fachgebundene Hochschulreife) is obtained by passing the necessary final examinations. A distinction is to be made between different types of qualifications for admission to higher education:

- The general higher education entrance qualification (allgemeine Hochschulreife) qualifies to study at all institutions of higher education without restrictions.
- The subject-restricted higher education entrance qualification (fachgebundene Hochschulreife) gives the holder the right to study specific programmes at universities or Fachhochschulen.
- The entrance qualification for the Fachhochschulen entitles the holder to study at Fachhochschulen or in the majority of courses at comprehensive universities (Universitäten - Gesamthochschulen).

This qualification is obtained after 12 years of school at Fachoberschulen (technical secondary schools) or through supplementary programmes at Berufsschulen and Fachschulen. Additional possibilities to acquire the general higher education qualification are Abendgymnasium (night schools for employed adults) and Kolleg (institutions offering programmes for adults to obtain higher education qualification).

More detailed information is given in the special chapter about Germany by the report "Structures of the educational and initial training systems in the member states of the European community" jointly prepared by "The Education Information Network in the European

Community" (EURYDICE) and the "European Centre for the Vocational Training" (CEDEFOP) (1990, p. 40-55).

After the reunification in 1991 there were in total 315 institutions of higher education according to the statistical report by the Federal Ministry of education (BMBW, 1992, p. 154 f.) including 26 special Fachhochschulen (specific type of colleges offering practically oriented degree courses) for the administration. After the reunification in East Germany the higher educational system was reorganized. Some institutions were combined to one institution and some were dissolved. As was reported to us by the Higher Education Rectors' Conference by the 1st of October there will be 281 institutions of Higher Education, if one excludes the special Fachhochschulen for administrations which are not open to the general public. The number given includes Universities, Technical Universities, Teacher Training Colleges, Theological Seminaries, Art and Music Academies and 110 Fachhochschulen.

The total number of students now has reached about 1.8 m.

## 2. *The development of counselling in higher education - a chronology*

Early attempts in the 1950's to establish counselling services for students at German universities (e.g. Hamburg, Munich) were based on American and British traditions. Most of the projects came into being through the individual initiative and commitment of interested university members. The status of these institutions was fragile, having as they did to rely on scarce donations and/or small expense accounts from their universities.

It was not until the end of the 1960's that psychological/psychotherapeutic counselling was formally

institutionalized on a larger scale. On the one hand Psychotherapeutic Advisory Centres (Psychosoziale Beratungsstelle - PBS) were set up as counselling centres within the local frameworks of the German National Association for Student Affairs (Deutsches Studentenwerk - DSW).

This national body is an inter-regional union of local organizations for student welfare. It is non-profit making and mainly responsible for educational grants, accommodation and student canteens. Although structurally independent, it traditionally contains representatives of the students, professors and other university members on all its committees.

Counselling services within the "Studentenwerk" had been institutionalized for the most part by the local initiative of student representatives. But students had also urged the universities to establish their own services for counselling. At the same time there was strong pressure from within some parts, at least, of the university administration, the professorial body and the political establishment to reform higher education. A system which could provide sufficient orientation for students before and during their period of higher education was understood by some as an essential step towards making institutions of higher education more efficient. Thus, on the other hand, as part of the university reforms following the student movement after 1968, central student counselling services were created as an integral part of the university. They were named Central Study Counselling, this being the literal translation of Zentrale Studienberatung (ZSB).

Against the background of the reform movement, these new structures brought with them several extensive practical and professional projects aimed at defining concepts of counselling in higher education, judging the extent of its activities and evaluating its effects. To this

end working models (Modellversuche) were set up in the following areas:

- organizational forms of counselling within one university, across several institutions of higher education or in an entire region or state
- forms of cooperation within the field of educational information and pre study counselling
- forms of cooperation with the services for vocational guidance (Federal Employment Institute)
- study counselling and personal problems affecting study
- staff structure of counselling institutions
- concepts and forms of counselling
- evaluation of the effects of counselling

These projects considerably influenced the way in which university counselling services were institutionalized and extended and their results were partly reflected in the legal framework of those institutions. The function and tasks of counselling in higher education were defined by a general federal law (Hochschulrahmengesetz-HRG) and, Germany being a political federation, by various state (Länder) laws. Since the states have cultural sovereignty, the specific political and financial framework may differ widely from state to state. According to these laws institutions of higher education have to provide for General Study Counselling (ZSB) as well as for Specific Study-Course Counselling (Studienfachberatung - SFB).

General counselling includes information about university studies in general, about potential areas of study, academic aptitude, subject matter and requirements of the various areas of study; degrees, eligibility and selection criteria for admissions and the overall academic and social environment. General counselling may also be directed towards professional perspectives after university studies

and may include aspects of continuing education. In some states the relevant laws include a passage saying that psychological counselling should be offered or arranged for students with personal problems and crises. The Specific Study-Course Counselling comprises counselling within the individual courses of study and is offered by faculty members of the various university departments.

In the 1980's the development of student counselling faced mounting problems. At the very beginning of the decade some German states increased the personnel of their counselling services. The activities of the counselling institutions were in growing demand from university applicants and students, and this demand corresponded with a developing professionalization in the service. Yet no further extension of the services took place and since then some services have faced cut-backs in personnel due to changed financial priorities and severe overall restrictions to the financing of higher education. Contemporary debate and structural reform plans to increase the efficiency of university studies began to call with ever greater frequency on the counselling services to provide systematic information and counselling on courses of study as a safeguard against undesirable changes in students' decisions and with the underlying intention that students should pursue and complete their studies without unnecessary loss of time. It was in other words suggested that counselling services should become instruments to influence individual, educational and vocational planning, and in some concepts this was closely connected with official planning along political education and labour guidelines. Though occasionally mentioned, student counselling as such no longer played an important role in structural and political debates about higher education, despite the improving professionalization of the service, a fact that was reflected in the above-mentioned financial cutbacks.

Some of those counselling centres (Central Study Counselling-ZSB) which continued to provide psychological or psychotherapeutic counselling found increasingly that they had to justify these services alongside their more general study-counselling activities. At the same time, however, several important attempts were being made to establish thorough professional concepts of study counselling which included the importance of the perspective on the student as a person and on his or her personal development (Hochschulrektorenkonferenz 1991).

In 1991 the Higher Education Rectors Conference (Hochschulrektorenkonferenz - HRK) suggested a framework for counselling services at universities in the new German states. These recommendations were based on the experience with counselling in higher education in the "old" states. They were laid down in order to adjust counselling standards on a nationwide basis.

The following excerpts, taken from the 1991 recommendations of the Higher Education Rectors Conference for the development of counselling services in the new German states, describe a standard of service aspired to rather than one which actually exists in the German university system. The report presents the accumulated experience of several decades of counselling and offers guidelines for future consolidation and development. The outlined principles found widespread consent and thus represent a basis for institutional planning and organization.

a. The duties of study counselling comprise presentation of information for university applicants and students about possible courses of study with particular reference to structure and content and including psychosocial counselling should be available throughout the student's career. Additional psychotherapeutic help can be arranged for,

but this should as a rule be offered by the Organization for Student Affairs or other institutions.

b. Counselling, considered as help in the process of decision-making, will be sought voluntarily and is therefore in all its aspects to be treated confidentially and to be governed by the interests of the individual client. It is not to be misused as a directive instrument in regard to study decisions or the employment market. Counsellors should make this plain to their clients. Study counselling has the further task of establishing contacts with schools and giving information prior to university application and enrolment.

c. General Study Counselling is to be institutionalized as a central organ of the university under the direct responsibility of the university head or of the competent self-administrative board. Specific study-course counselling is the responsibility of the university faculties or departments in close cooperation with the Central Study Counselling Service, which will also cooperate with the local Organization for Student Affairs and with other counselling services in the field of secondary education and employment.

d. Counsellors in the institutions for General Study Counselling must possess a university degree, and should, if possible, have completed further training or have experience.

e. Irrespective of the number of enrolled students, the personnel of counselling institutions must consist of a permanent post for at least one counsellor and one administrative secretary.

Staffing levels should take into account the number of enrolled students, the tasks of the particular counselling service, the number of potential university applicants in

the catchment area and the number and variety of courses taught at the university. The following quotas should be attained: one counsellor per 3,000 enrolled students, one administrative position per four counsellors and one secretarial position per five counsellors.

f. A sufficient number of suitably furnished rooms must be provided, according to the size and guiding concept of the institution. The confidentiality of all aspects of counselling and the security of individual counselling material must be guaranteed.

g. Financial resources must be provided to cover the essential ancillary costs of a counselling institution, in particular: printing costs, counselling materials and literature, locum staff, academic and student assistants, travel expenses for pre-university counselling in schools.

h. In order to ensure and improve the quality of counselling as well as to increase their counselling competence, counsellors should continually participate in further training and education in concepts and methods of counselling and supervision.

i. Feedback of experiences gained in counselling should be institutionalized between counselling centres, the university administration and the various university departments through e.g. regular reports to the representative organs of the university.

### 3. *Psychological counselling - an empirical study*

#### 3.1. Conception

The catalogue of aims and perspectives mentioned above does not reflect the reality of counselling in Ger-

many. In order to describe the difference between the ideal model and the real situation in all its complexity, we decided to conduct a specific study for this purpose. Previous studies<sup>1</sup> had been conducted years ago and their research dimensions are not specific or wide enough to answer the questions that have arisen within the framework of this European report.

We have developed a differentiated questionnaire and distributed it to all German institutions of higher education, including all Central Study Counselling Services (ZSB) and all Counselling Centres inside the local organizations of student affairs. We can assume with some probability that our questionnaire reached all existing services.

Apart from our main perspective in being able to describe the status quo of counselling at institutions of higher education in Germany, one of the assumptions for our research has been that difference in the institutional context may help to explain the different procedures and methods adopted by the various services. On a macro-structural level this is true of the federal system in which each state has cultural autonomy. At the other end of the spectrum we are concerned with the way in which counselling services are embedded in their own educational institution.

Our particular interest regards the fields of activity in which services operate, the methods used and their distribution among staff members, and finally the qualification of staff for the different tasks. We have differentiated between the following fields of activity:

- A. Informative orientation
- B. Person-oriented counselling (from a psychological perspective)
- C. Psychological counselling / Psychotherapy
- D. Psychiatric-psychotherapeutic treatment

62% of the counselling institutions in Germany (N=184 of the original 296) have answered our questionnaire. 69% (N=131) of the Central Study Counselling Services (ZSB) and 56% (N=38) of the Counselling Centres inside the local organizations of student affairs participated in the study. We regard these percentages as a sufficient empirical basis for interpretation of our data. An extensive German report has been published (Figge, Kaiphaz, Knigge-Illner, Rott 1992).

Due to the limitations of this actual contribution only few of the findings can be presented here. For further and more detailed information the original report should be consulted.

### 3.2. Forms of institutionalization

Student (General Study) Counselling takes place in central university institutions (Zentrale Studienberatungsstellen - ZSB). These are organized either as independent university sections with their own financial budget or they are integrated into the university administration.

Specific Study Course Counselling is offered by university lecturers as part of their permanent duties. They are supported by other members of the faculty. There is no additional institutional structure, study course counselling being offered in the various university departments.

The central counselling institution cooperates with the different services of the Department of Labour (vocational guidance, placement services). Information is shared and mutual recommendations are made.



Table 1  
Organizational form and concept of counselling

	in total		Counselling Centre							
			ZSB	Studenten werk	university hospital	others				
In total	184	100.0%	131	100.0%	38	100.0%	5	100.0%	10	100.0%
counselling concept										
general counselling	99	53.8%	92	70.2%	3	7.9%			4	40.0%
psychol. counselling	40	21.7%	7	5.3%	23	60.5%	5	100.0%	5	50.0%
general/psychol. counselling	37	20.1%	32	24.4%	4	10.5%			1	10.0%
social counselling	8	4.3%			8	21.2%				

Due to the federal structure of the country, different organizational forms of psychological counselling can be found in different states. Looking closer at the institutional context, 71% of the counselling institutions in this study consist of Central Study Counselling Services (ZSB) mostly in some form integrated into the university administration. 21% of the institutions are Counselling Centres inside the local Organization for Student Affairs (Studentenwerk). The remainder consists of counselling institutions of specific status being attached to university clinics, to the faculty of psychology, etc.

As seen in Table 1 most Counselling Centres inside the local Organizations of Student Affairs define themselves as psychological counselling services, then usually being a "Psychosoziale Beratungsstelle (PBS)". Even though about forty percent of the Central Counselling Services (ZSB) offer various forms of psychological and therapeutic

counselling, only one fifth of these institutions define themselves as being based on an integrated approach, study counselling and psychological counselling /psychotherapy constituting the tasks of the service.

Other organizational forms also exist, for instance institutions of psychological/ psychotherapeutic counselling organized as subsections within the local university clinic or as part of an institute of psychology.

### 3.3. Fields of activity

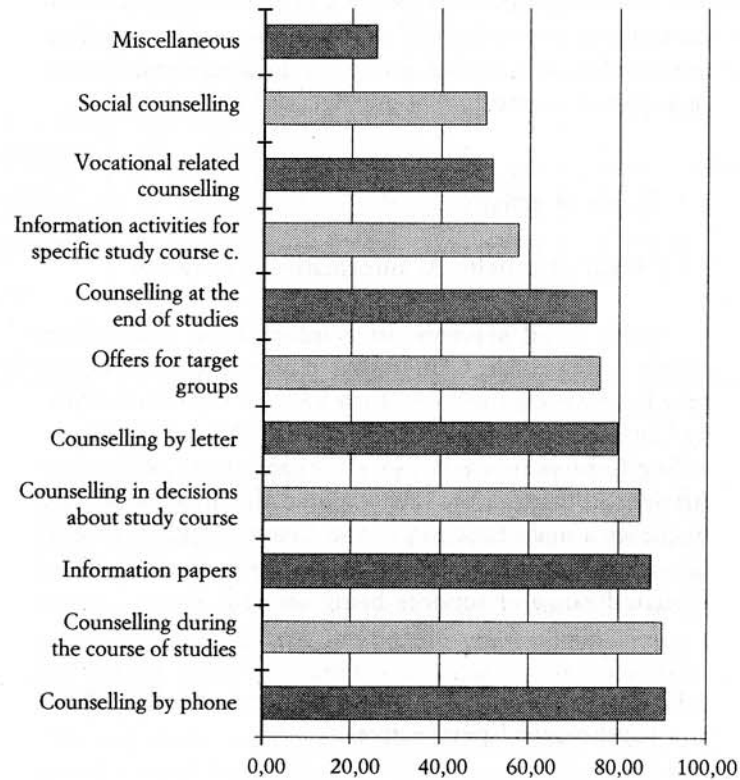
#### 3.3.1 Field of activity A: Informative orientation

83% of all services offer informative counselling mostly to non-students interested in taking up studies once they have finished school. With 95% of the Central Study Counselling Services (ZSB) against 61% of the Counselling Centres inside the local Organizations of Student Affairs (Studentenwerk) represented this field of activity -includes a main function of the Central Study Counselling institutions. Figure 1 gives an impression of a differentiated range of services being offered.

#### 3.3.2 Field of activity B: Person-oriented counselling (from a psychological perspective)

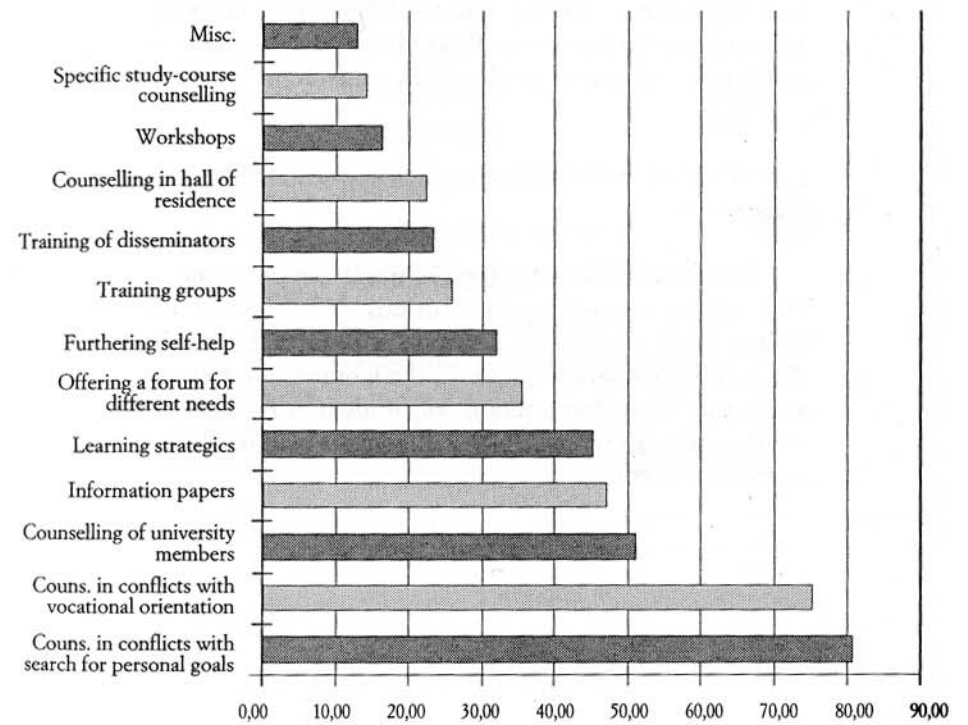
In addition to information-giving, person-oriented counselling accentuates the understanding of the individual significance of information. It focuses on the person of the client, taking into account individual dispositions and needs while working with the advice-seeking person. The activities are directed towards students as well as non-students.

Figure 1  
Activities in Field A: Informative Orientation



81% of all institutions offer personal counselling, the percentage in Counselling Centres inside the local Organizations of Student Affairs (Studentenwerk) (89%) is only slightly higher than in the Central Study Counselling Services (ZSB) (80%). As Figure 2 shows the different services are not represented in similar frequency with personal and vocational orientation topping the list.

Figure 2  
Activities in Field B: Person oriented Counselling



### 3.3.3 Field of activity C: Psychological counselling/ psychotherapy

In about 51% of the counselling institutions psychological counselling/ psychotherapy constitutes an essential part of the institution's service. Again the specific functions of the Counselling Centres inside the local Organizations of Student Affairs are reflected in a percentage of 74% of the institutions which offer psychological counselling, whereas in the Central Study Counselling Services (ZSB) only 41% render these services.

Fig. 3 shows that activities of limited duration are over represented. Mostly due to limited staff capacity, different psychotherapeutical activities (such as single or group psychotherapy) are less frequently represented.

### 3.3.4 Field of activity D: Psychiatric-psychotherapeutic treatment

This field of activity (see Figure 4) can be found in 13% of the counselling institutions. Very few of the Central Study Counselling Services (ZSB) offer this service (5%), it is represented rather in the Counselling Centres inside the local Organizations of Student Affairs (26%) and the university clinics (60%). It consists mainly of crisis intervention work.

Figure 3  
Activities in Field C: Psychological  
Counselling/Psychotherapy

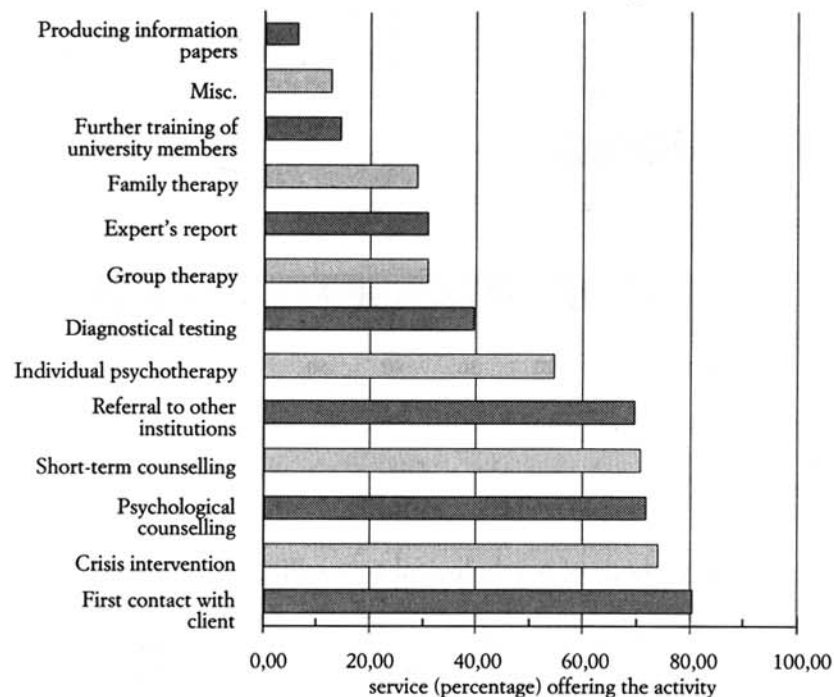
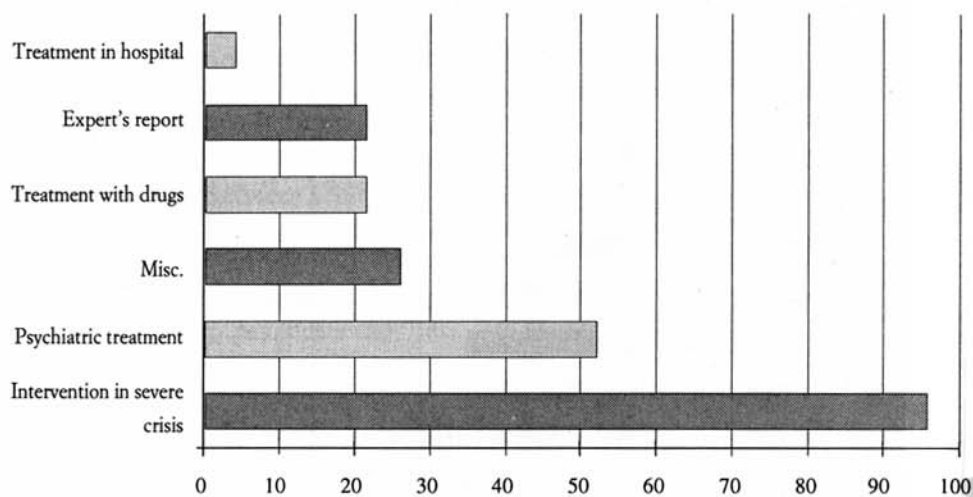


Figure 4

Activities in Field D: Psychiatric-psychotherapeutic treatment



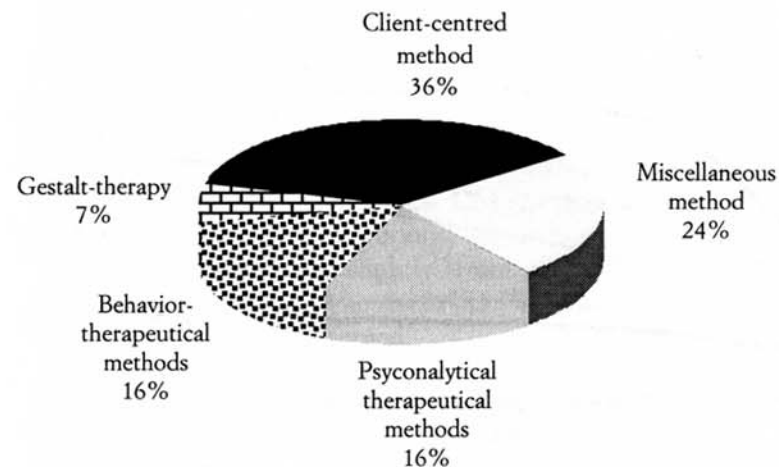
### 3.4 Methods of psychological counselling/ psychotherapy

In a majority of counselling institutions different psychotherapy schools are represented within one institution, even though some institutions are based on a single methodic conception.

Client-centred Psychotherapy (Rogerian Therapy) can be considered as the most widely used psychotherapeutic approach, followed by Behavioural Therapy and Psychoanalysis (see Figure 5).

Figure 5

General description: Therapeutical methods in psychological counselling (area C and D)



In those institutions with preference for a single psychological approach, client-centred psychotherapy and psychoanalysis are the predominant methods chosen. However there are some institutions which are mainly oriented towards either Behavioural Therapy, Gestalt or Family therapy.

### 3.5. Personnel - status and qualification

Figures 6 and 7 show the development of counselling institutions and their academic and non-academic staff relative to the number of students at German institutions

Figure 6

Central Study Counselling (Zentrale Studienberatung - ZSB):  
Development of personnel and positions 1975 - 1992  
(Western Germany)

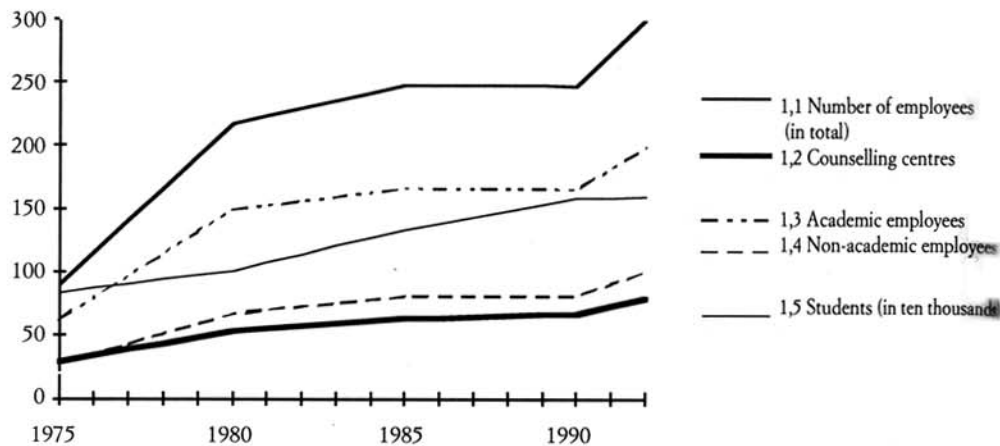
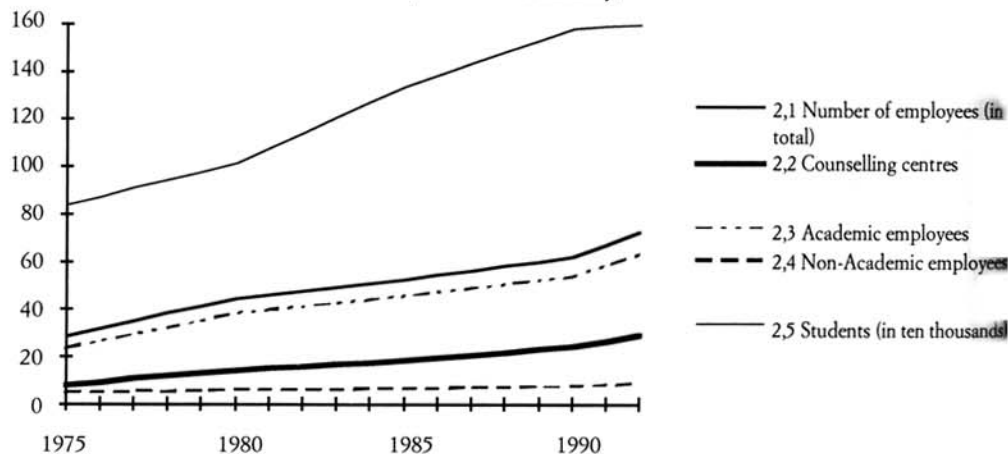


Figure 7

Counselling centres of the local organizations for study affairs  
(Beratungsstellen der Studentenwerke):  
Development of personnel and positions 1975 - 1992  
(Western Germany)



of higher education. It should be noted however that this comparison does not include non-students usually representing the largest group looking for general study counselling. The following findings can be emphasized based on the analysis of long-term development for West German institutions.

A general increase of counselling institutions can be noted. With regard to the size of staff more than 90% of the West German counselling institutions employ the same number of staff in 1992 as in 1980 regardless of the ever-increasing number of students. Disregarding remarkable differences between institutions, the average size of staff in ZSB increases only slightly (from 3.1 to 3.8) during this period (1980-92) whereas in the PSB a decrease (from 3.6 to 2.5) can be observed.

There is a high degree of institutionalized professionalism as overall 83% of the staff are in permanent employment. By comparison, temporary employment on the basis of hourly payment are higher in the Counselling Centres inside the local Organizations of Student Affairs than in the Central Study Counselling Services (ZSB).

It should be especially noted however that the above mentioned recommended quota of one academic counsellor per 3,000 students is far from being reached. Instead more than 6% of the counsellors do this work as well as other duties in a non-institutionalized background.

Student counsellors can be regarded as a group with high professional qualifications. All of them have completed a four or five year university education, about 20% even possessing two university degrees. The percentage of psychologists within the academic staff is related to the psychological/psychotherapeutic orientation of the counselling services. They are mostly represented in the Counselling Centres inside the local Organizations of Student Affairs (Studentenwerk) whereas half of the staff

of the Central Study Counselling (ZSB) consist of persons with degrees other than psychology, education, social sciences, and medicine (Table. 2).

A remarkable deficit can be seen however in the fact, that a considerable proportion of staff in the counselling institutions (43%) have not completed specific counselling training or hold a degree as psychotherapist on completion of their academic education (Table. 3). A specific need for further training is apparent.

Table 2  
First qualification of counsellors with respect to organizational form

	in total		Counselling Centre			
			ZSB	Studentenwerk	university hospital	others
In total	473	100%	302	120	24	27
university degree in:						
no answer given	28	5,9%	20	5	2	1
psychology	168	36%	66	74	11	17
education	57	12%	41	14	1	1
social science	29	6,1%	24	3		2
medical science	17	3,6%		7	10	
others	174	37%	151	17		6

Table 3  
Further psychotherapeutic/counselling training with respect to organizational form

	in total		Counselling Centre			
			ZSB	Studentenwerk	university hospital	others
In total	498	100.0%	326	120	24	28
no training	216	43.4%	177	22	3	14
counselling skills	81	16.3%	71	8		2
psychotherapeutic training	152	30.5%	44	79	21	8
both trainings	49	9.8%	34	11		4

#### 4. Summary of findings

However different the general concept or organizational context - counselling centres for students have become an integral part of German universities.

The results of the study indicate a high degree of resemblance between counselling centres regarding their fields of activity but also some essential differences. Central Study Counselling Centres (ZSB) focus on activities in field A (Information) whereas Counselling Centres inside the local Organizations of Student Affairs are mainly concerned with activities in field C (Psychological counselling/ Psychotherapy).

Person-oriented counselling (field of activity B) constitutes the field of counselling which is performed by all different counselling centres to a high proportion. It seems to be the connecting link between separately existing fields of counselling A and C. The organizational equivalence of this integration of different fields of

counselling can be seen in counselling centres which are able to combine all fields of activity within the institutional and legal framework of their service.

This diversification in the sense that psychological counselling/psychotherapy constitutes another necessary and integral field of activity within a counselling institution causes an interdependent influencing of the different fields of activity.

The information-related part of counselling is broadened by the psychological perspective. Within person-oriented counselling a wide range of services are offered due to the psychotherapeutic qualification of counsellors. Finally psychological counselling/ psychotherapy has adopted an additional focus on short term counselling and psychotherapy.

It has been found that the existence of psychological counselling/psychotherapy as yet another field of activity within a counselling institution does not lead to a neglect of other fields of activity. To the contrary, the integration of psychological counselling may be seen as an enrichment to other fields, at the same time profiting by gaining a sharper focus.

#### *Concluding remarks*

Study counselling at universities, including psychological counselling, has succeeded in developing into a well-established institution with a clear-cut profile during the last two decades. But it has to be noted that at some universities, independent counselling centres have yet to be institutionalized. Furthermore the present quota between the number of students and number of counsellors is highly inappropriate with regard to the demand made upon the counselling services.

Study counselling is based upon a high degree of psychological professionalization. A large proportion of counsellors have completed training in psychotherapy or counselling. But the proportion of counsellors with no special training in counselling - especially in the Central Study Counselling Centres are cause for concern. Consequently it is demanded that continuing training in counselling should be instituted.

Psychological counselling/psychotherapy should either be integrated as a field of activity in counselling institutions or special efforts should be made to establish effective forms of cooperation between general study counselling and psychological counselling services within one university. The lack of a psychological counselling/ psychotherapy services for students is considered as a serious shortcoming. It has to be pointed out that special efforts have to be made in order to reflect the reality of psychological counselling/psychotherapy within the respective legal and institutional provisions of the counselling institutions.

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## DENMARK

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The Student Counselling System (Studenterrådgivningen) in Denmark is available to all students attending higher education. The object of Studenterrådgivningen is to provide social, psychological and psychiatric counselling to students in higher education.

In Denmark, all higher education is free, and a rate of around 50% of a birth cohort attend higher education, i.e. education of at least three years duration after high school. This rate has increased in the last ten years. Due to unemployment, young people generally tend to feel more secure by staying in the educational system. This is also due to the wider-access educational policy during the sixties and the seventies, which aimed at qualifying the workforce by professional education. Because of this a large number of students are first generation.

During the late seventies and eighties, the budgets of the educational institutions have been cut noticeably and cost benefit analysis has been used more frequently and radically in the public funding of the educational institutions, i.e. universities and different types of colleges. Because of this, the situation at the various educational institutions is generally under pressure. There are more students and fewer resources than before. Educational institutions are generally more dependent on the in-take and pass

rates of the students. In addition the whole structure has been changed considerably regarding funding, assessment, recruitment, the job description of the teachers etc.

At the same time, the amount of unemployment among people with academic and professional skills has risen. Very often students must foresee unemployment and other kinds of social and personal insecurity as an integral part of their everyday life and future. The necessity of early planning of a professional career has become more evident. But at the same time, changes in the employment structure and state of the job market have made it more difficult to cope and the usual strategies are less reliable.

The higher educational institutions are generally geared to receive students aged about 19 i.e. just after high school. However, many students are much older - up to the age of 30 - when they start. Although the rate of young starters is expected to increase, there is still a big variation of age in the student population. This means that some students are very young, other students live a family life with children, mortgages etc.

Until the late seventies, Denmark followed a continental tradition of long term studies with little regard to vocational qualifications and professional careers. Except for the education of medical doctors, dentists, lawyers and similar professions, higher education was generally based on curiosity and ambition rather than on narrow professional expectations. During the eighties, several professional educations (such as nursing, school teaching) were integrated into the system of higher education. Consequently the system now not only contains long term academic studies, but also vocational studies. An increasing number of students now attend higher education for purely career reasons.

### *Cultural changes within the institutions*

The Danish educational system has recently experienced changes inspired by the American and English system, characterized by a bachelor degree of three years succeeded by two-year postgraduate courses combined with a thesis, of normally two years. This has on the one hand shortened the time span of study for the students, making it possible for them to leave the system after three years. On the other hand, there is still no tradition in the labour market for hiring those with Bachelor degrees. Because the transition from bachelor studies to the postgraduate courses is still unclear and uncertain, many students are rather confused about their future and the planning of this.

### *Entry requirements*

The entry requirements for universities and other higher educational establishments generally demand very high marks from high school. The entry level is defined by the relation between the amount of applicants and the amount of money available and thus changes every year. However, a certain number (from 15% to 25%) of study places are offered to students with qualifications other than excellence in academic studies, e.g. work experience etc.

Although the Danish educational system is traditionally not very competitive, the entrance to the higher educational system is based on comparison of qualifications, because the demand is greater than the supply. This often places the students in unaccustomed situations, because their recruitment is dependent not only on their own qualifications, gained in cooperation with

others, but also in comparison with others. Students often have to wait a year or two with little and unreliable information on how to improve their chances of entrance. Very often students are admitted to their second or third choice of education only. This means that a number of students do not really identify with their studies.

*Who takes responsibility for the psychological needs of students?*

Studenterrådgivningen (The Student Counselling System) is a network of counselling centres placed in the four university cities. In Copenhagen there is one large centre and two smaller centres. The two smaller centres are the only centres in Denmark directly placed on campus. Together the three Studenterrådgivnings in the capital cover a student population of approximately 70,000. There are three university cities in the rest of Denmark, Odense, Århus and Ålborg. In total these Studenterrådgivnings cover approximately 50,000 students. Each of the centres has a staff of at least one psychologist and one social worker and one secretary all of whom work part-time. In total a staff of 6.3 full-time psychologists, and a staff of 6.0 full-time social workers cover a population of 120,000 students. In other words there is one full-time psychologist per 19,000 students. Besides this there is a psychiatric consultant connected to most of the Studenterrådgivnings. Depending on local resources, each centre opens from three to five days a week.

The very first Studenterrådgivning was founded in 1965, and funded by private means. Since then, the system has expanded to six centres funded by the Danish state, viz. The Ministry of Education, and has a governing board. In principle, the single university or professional school

has no direct influence on the work of the centres, although The Assembly of Chancellors and Principals is represented by two members on the governing boards of Studenterrådgivningen. Furthermore there are five representatives from the Danish Union of Students (DSF) and one of these is always the chairman. Finally there are representatives of the Union of Psychologists (1), the Union of Social Workers (1), and the Institute of Psychiatrists (1).

The object of Studenterrådgivningen is to provide social, psychological and psychiatric counselling to students in higher education. The services are free of charge but unfortunately the resources at the disposal of each of the Studenterrådgivnings are not sufficient. Many students are placed on waiting lists and several requests for help have to be denied because of lack of time.

As a consequence of the Danish Health System Services there are free social advisory services at the disposal of all Danish citizens. In addition everybody can consult a General Practitioner free of charge. One might guess this is why it is not a tradition to have medical doctors in the Studenterrådgivningen in Denmark. Nevertheless, the social, legal and funding arrangements concerning the students are so specialised and rapidly changing, that there is an evident and recognized need for social workers in the Studenterrådgivningen, providing special social advice based on special knowledge.

In spite of the rather tightly drawn medical and social security network in Denmark, there is quite restricted admission to free psychological treatment.

Schools and high schools do offer free psychological help to pupils, *mainly* to those with learning problems. In combination with the free medical system in Denmark there are scattered possibilities for psychological help, mainly in hospitals. Therefore the psychological needs of

the student in higher education are referred to the psychologists in the Studenterrådgivnings. They provide psychological counselling on personal difficulties and psychological problems faced by students. Some of the bigger higher educational institutions have a chaplain, who also deals with more existential problems. However, the general religious inclination among students is not great.

*The institutional attitude to the work of Studenterrådgivningen*

In general, the awareness of the existence of Studenterrådgivningen among teachers, tutors and educational planners is very different, depending on the local situation. Students know about them either from introductory seminars, tutors, handbooks, other students, their general medical practitioner, student organisations or individual teachers. (As to the economic links, some of the institutions are supported by special funding to resolve particular difficulties). Until now, Studenterrådgivningen has been directly funded by the Ministry of Education, but some efforts have been made to decentralize the system, giving each educational institution a certain amount of money to use either on counselling, teaching, equipment, etc. It is the general view, that such a decentralization might very well obliterate the counselling system as such and leave some educational institutions without the option of free psychological treatment for the students.

Generally the senior management level of the institutions is in very little contact with the students and their more personal needs. The inclination to support Studenterrådgivningen is therefore rather ambiguous and more dependent on individual attitudes. However, the institutions on the whole regard the counselling work as

important and beneficial when it contributes to raising the pass rate. At institutions where the contact between the senior managers and the students is closer, there seems to be more inclination to offer support.

In a recently published book: "Economic and Social Support for Students in the Countries of the European Community" (Stuttgart: Raabe, 1993), the insufficient resources placed at the disposal of the Studenterrådgivnings are commented on:

"Furthermore, the state institutions are of the opinion that students are adults who must consequently organise their lives themselves. Therefore, only a limited number of special advisory services are offered in and around the university. Rather, the students are expected to make use of the advisory services which are placed at the disposal of all Danish citizens." (pp. 90 - 91).

*Range of services offered, their environment and location*

At each faculty and institute at the university and at other higher educational institutions there is a tutorial and guidance institution, related specifically to study, called Studievejledningen. The staff here are mostly older students.

On a more *central* level, students can get advice and general study counselling concerning admission, potential areas of study, changes in study programmes etc. This central advisory institution ("Den Centrale Studievejledning") is part of the central admission administration within higher education, and the staff here are always academic staff. There are no psychologists or social workers in these institutions.

The Studenterrådgivningen cooperates to some extent with the local tutorial and guidance institutions (Stu-

dievejledningen) and the central advisory institution (Den Centrale Studievejledning). The cooperation between this institutional counselling and the Student Counselling Centre is closest in the smaller centres. It varies from supervision and education of the student-advisors on the one hand, to the social worker dealing with the more complicated problems concerned with grant refusal appeals on the other hand. The centres invite the student advisors and the central advisors to meetings twice a year in order to exchange information about problems in specific areas of the educational system or changes in criteria for following different courses etc.

In Denmark we have very complicated rules for obtaining grants from the government. Most of the efforts of the social workers are intended to help the students to interpret their formal rights in financial matters. They help the students apply for grants and help them to appeal against refusals for grants. Besides this legal and financial counselling the social worker gives supportive consultations about study problems, choice of study, problems with examinations, and as mentioned before, to some extent they take part in group treatment as well.

Apart from the therapeutic and counselling work the psychologists as well as the social workers take part in informative preventative work outside the centre. Within the general introduction to student life performed by the tutorial organisations psychologists give information about typical problems in the every day life of a student, and what kind of help they can expect from the Studenterrådgivningen. Besides this psychologists write articles in the local newspapers and in university newsletters in order to inform about the work being done or in order to inform about new opportunities available to the students.

### *Choice of methods and frame of reference*

In Denmark staff are free to choose their own methods and frame of reference. This means that there are no specific methods connected to the therapeutic work, and the staff can - within ethically and professionally acceptable frameworks - freely discuss and develop methods suitable for the kind of problems brought by the students.

The main difference in the treatment given by the different centres in the country is the weight of individual therapy in relation to group-therapy. The general picture is that the larger centres in Copenhagen and Århus primarily offer group-therapy compared with the smaller centres where the main treatment is focused on different kinds of individual therapy and to some extent couple-therapy (divorce problems, sexual problems etc.).

Due to the relatively smaller population serviced by the smaller centres the organisation of groups with similar problems can be difficult. Despite this even the smaller centres offer group-treatment. Usually at least two groups per year, especially group-treatment pertaining to the increasing problems of exam anxiety are held. The amount of group-therapy offered by the Copenhagen Centre is about 12 groups per year with 5 different themes.

The duration of the group-sessions varies considerably. Analytic therapy groups are ongoing but most of the members leave the group within the first year, so the group changes constantly. The group meets typically for one and a half hour per week. Bereavement-groups meet for two hours once or twice a week. Topic focussed groups (exam anxiety, dependency etc) are typically organized as short-term group-therapy lasting 8 to 16 sessions. The Danish study year is divided into two terms of 5 or 6 months and this means that the work in the group-therapy can be

followed continuously by the students. The duration of individual therapy also varies, from 1 to 5 sessions up to weekly sessions for about six months.

#### *Recurrent problems in students using services*

The students seen in the Studenterrådgivningen have a wide range of problems. Although staff can meet students who are about 30, most of the clients are young people from 19 to 25. They are still concerned with identity problems. They have difficulty with dependency on and separation from their parents. They are experimenting with their sexuality and relationships and they are confronted with great intellectual challenges, which often cause them achievement problems.

We can list the problems in the following order, going from the more focal to the more widespread personality disorders.

#### 1) EXAM ANXIETY

This is not just a question of being nervous of sitting examinations, but a blocking of intellectual activity in spite of being well-prepared—a blocking which might appear as a kind of panic attack. Exam anxiety is an increasing problem amongst students.

#### 2) THESIS OR WRITING BLOCKS

This means losing self-confidence, losing an intellectual overview, being tormented by feelings of not being able to fulfill one's educational potential etc. Because of increasing unemployment for academics, exam anxiety and thesis blocking problems are increasing correspondingly.

#### 3) PROBLEMS WITH ADAPTATION

This might be problems concerning the transition from country life to town life, from one social class to another or from one country to another.

#### 4) ISOLATION

Many students feel lonely and isolated and they do not know how to make or maintain contact.

#### 5) BEREAVEMENT PROBLEMS

Losing a parent at a young age may be a very overwhelming experience, which might cause a complete inability to work intellectually. In Copenhagen and Århus they continuously work with such problems in "grief groups". Students with severe divorce problems often attend these groups too.

#### 6) SEXUAL PROBLEMS

This covers different problems with sexuality e.g. homosexuality or disturbance caused by sexual assault or abuse, difficulty from a broken relationship or sustaining a relationship.

#### 7) EATING DISORDERS

Different problems with eating disorders are covered, e.g. anorexia and bulimia - acute or historical. Severe acute problems are not dealt with. Instead they are referred to hospitals or clinics dealing with such problems. In Aalborg group therapy for bulimic girls is offered in order not to hospitalize the young students.

#### 8) DEPENDENCY - SEPARATION PROBLEMS

Many students have dependency-separation problems with their parents and their changing partners. The de-

pendency-separation aspect is a fundamental theme for this age group, therefore it might manifest itself in many different kinds of problems.

#### 9) MORE SPECIFIC NEUROSIS

Especially anxiety neurosis and different kinds of phobic problems.

#### 10) DEPRESSION / SADNESS / LOW SELF-ESTEEM

Many students feel very sad and have low self-esteem, without being really depressive in the clinical sense of the word.

#### 11) EARLY DEPRIVATION

Borderline and narcissistic problems are often the consequence of early deprivation. Severe cases are always referred to psychiatric hospitals. This, of course, is also the case for psychotic students. But still deprivation problems might turn up in many kinds of disguises, and if good contact is established sometimes work can be done with these problems over a period of a whole year or even more.

Different kinds of lack of self-confidence, anxiety, separation and isolation problems are typically recurrent problems. Generally speaking these are the problems of the greatest number of students seeing staff in the Studenterrådgivning.

#### *Training: current training and qualifications of counsellors*

The minimum qualification for a psychologist employed at the Studenterrådgivningen is an academic education in psychology which takes a minimum of five and a

half years. Most of the psychologists have an additional postgraduate clinical training of at least two years based upon supervised therapy and theoretical studies. Expenses for postgraduate clinical training or for any other specialised trainee programme are paid by the psychologists themselves.

The mainstream in therapeutic methods used by the psychologist is of psychodynamic character. Six of the psychologists have undergone a 3 year group-psychanalytic trainee programme. Another example of specialised training is "grief-therapy", for students who need help in different kind of bereavement problems. In some of the centres both social workers and psychologists work together in the "grief-groups".

Apart from that, as a rule, psychologists participate in shorter courses and workshops concerning short-term therapy, borderline problems, couple therapy, dream therapy, etc.

In general the Studenterrådgivning in Denmark has seen a remarkable increase in the number of students in need of psychological treatment. Therefore we are still negotiating with the Ministry of Education in order to receive more resources, as well as paid supervision, in order to improve the offer of the treatment for the students in higher education.

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## FRANCE

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1. *Higher education in France*

France's university system which is public, holds the monopoly in the conferring of national degrees; French universities admit a large number of students and offer an education divided equally between teaching the basics and offering a more practical orientation linked to research and its applications, which is directly related to the needs of regional development.

France's "Grandes Ecoles" (leading establishments of Higher Education), to the contrary, admit their students on the basis of a highly selective competitive examination, and thus have lower enrollments. They offer a high level of specialised vocational training: for teachers, engineers, and top level business administrators.

Entrance to university and other systems of Higher Education depends upon obtaining the Baccalaureat (GCE

“A” Levels). This qualification marks the end of secondary school studies.

Generally speaking, university studies are divided into three successive cycles, each lasting two years and culminating in national diplomas.

The first cycle covers general training and has general objectives and is open to holders of the Baccalaureat. This cycle is two years long and leads to the Diploma Of General University Studies (DEUG). This diploma is perceived as a preparatory cycle leading to the second cycle.

The second cycle is more advanced and offers a high level of general training and training in science and technology, preparing the student to take on professional responsibility. This cycle is two to three years long after the DEUG. Various types of training are offered:

- professional and/or specialised basic training leading to a degree: a Bachelor’s degree (DEUG plus one further year of study), a Master’s degree (Bachelor’s degree plus one further year of study)
- vocational training offered as a single two year course, leading to either a Master of Science and Technology (MST), or a Master of Business Administration (MSG), or a Master of Computing Methods applied to Management (MIAGE)
- university training leading to the qualification of engineer, offered as a single three year block
- university training offered as a single three year block and leading to a diploma: the “magistère”

The third cycle offers a high degree of specialisation leading to research. It requires one or more years of preparation and entrance to this cycle is selective. Two types of training are offered:

- a one year vocational training requiring industrial placement leading to a degree in Higher Specialised Studies (DESS)
- training leading to and being acquired by research, the first year of which culminates in the diploma of Advanced Studies (DEA), the three to four years of subsequent study leading to the Ph. D. (Source: Ministère de l’Education Nationale. Direction des Enseignements Supérieurs. 1991)

## 2. *Psychological counselling: introduction*

The situation concerning psychological counselling is rather complex in France due to the diversification of the services offered to students.

Psychological counselling in universities is different from the service offered by the Career Guidance departments. The latter, which were created in 1973 and defined in 1986 by a decree which named them “Services Communs Universitaires d’Information, d’Orientation et d’Insertion Professionnelle” (S.C.U.I.O) were established in universities soon after the war in 1948. Their function is to offer information, career guidance and job placement for students. This is carried out by Career Guidance Counsellors who nowadays have the qualification of Career Guidance Psychologists.

Psychological counselling at each university falls within the domain of the Medical and Health Promotion Services (Services de Médecine et de Promotion de la Santé: S.M.P.U), which work in conjunction with the Career Guidance Services. Psychologists in the S.M.P.U offer a psycho-analytically-oriented approach in listening to students.

The other Public Health workers in this field work for the B.A.P.U (University Bureau of Psychological Aid:

Bureau d'Aide Psychologique Universitaire), where they offer introductory and psychoanalytic treatment sessions to non-hospitalised students and also for the clinics of the F.S.E.F (Health Foundation for Students in France: Fondation Santé des Etudiants de France), directed at students who require either hospitalisation or care of a more substantial nature.

Psychological aid for students thus comes from three major sectors, namely the S.M.P.U, B.A.P.U and F.S.E.F. Each sector functions in its own distinct way and has its own objectives. The professional activity of each sector will be described by specialists operating in each domain.

In the first part of this paper, a group of psychologists from the University's Service of Preventative Medicine in the Paris area will present the work carried out by psychologists in Preventative Medicine. In the second part, Doctor Laurent Levaguereŕe, Chief Medical Officer of the Montparnasse B.A.P.U will present the B.A.P.Us. Finally, in the third part, the authors of this report will describe the care and services available to students within the Health Foundation for Students of France (F.S.E.F) specifically in its psychiatric clinics.

### *3. The psychologist in the university's service of preventative medicine*

(This section was contributed by the psychologists of the Service of Preventative Medicine, Paris area)

#### THE UNIVERSITY'S SERVICE OF PREVENTATIVE MEDICINE AND THE PROMOTION OF HEALTH:

In each of the universities of the Paris area, there is a team of preventative medicine specialists to which a psychologist is generally attached.

The preventative medical service for students was founded in 1945, at the end of the Second World War. Its aim was to treat and diagnose tuberculosis and venereal diseases. At that time, the University of Paris had come to an agreement with the International Hospital of The University of Paris. This was the only place in which a compulsory and standardised medical visit took place for each student.

Given that the needs of public health have changed, the whole concept of prevention has allowed for the development of new approaches. Between 1986 and 1988, student preventative medicine became the University's Service of Preventative Medicine and Promotion of Health. A decree ordered each university to provide a framework and the means to allow a team to establish itself. These multidisciplinary teams consist of doctors, psychologists, nurses and sometimes a social worker. Working alone or with other members of the team, each of the above can, from the place in which they are set up, consider the needs of the students and put a plan into action when necessary.

#### THE ROLE AND FUNCTION OF THE PSYCHOLOGIST:

These psychologists, namely clinicians with a psychoanalytic orientation and training, are not limited to one to one work with the students. They participate in the consideration and putting into action of projects and tasks that the Service offers. Apart from consultancy work, the other major themes are:

- Research on major themes such as preventative medicine, health promotion, AIDS, addiction, sleeping disorders, academic failure, handicaps, etc.

- Putting into action a health promotion plan targeted to the needs and interests of students and/or on the problems of public health.
- Working with professionals not involved with the S.I.U.M.P teams (Inter University Preventative Medicine Service) . This involves identifying and building up functional networks peculiar to each service. The members of these networks may or may not belong to the university. These may include a teacher involved in the reception of handicapped students, or a professional practising in the field of preventative medicine in general, or mental health in particular.

Allowing for their individual capacities for getting in touch with levels of self knowledge, the psychologist is most useful to individuals when helping them to form questions and articulate their understanding. This work, which takes place with external collaborators, allows us to be situated and identified by various colleagues within the university, e.g. teachers or administrators, and the students. Our role is perceived as offering "psychological counselling" rather than as offering treatment in mental pathology. This playing down of the severity of disturbance makes it less difficult for students to address or take advantage of our consultations.

Attention must be drawn to the team work that takes place within our services. The framework of the compulsory medical examination can therefore serve to pave the way to the students' awareness of the psychological nature of certain somatic problems (such as weariness or sleeping disorders) or of behavioural problems (aggression, tearfulness or problems with punctuality).

Details of how students can contact and take advantage of the service are described in information pamph-

lets about our service, by posters, or by word of mouth. From this point on, the student is well on the road to having a consultation. Within a week at most, the student is able to meet us at the university campus. Our daily experience has taught us that the above factors contribute to facilitating a meeting with us. And it is precisely here that the preventative aspect of our work lies.

#### THE PSYCHOLOGICAL COUNSELLING CONSULTATION:

The possibility of consulting a psychologist either offers the student the expectation (concrete or not) of modifying an unsatisfactory or distressing state or, more rarely, involves the manifestation of an acute mental state.

The first case takes place at the end of a particular period, of development, adolescence, which is often marked by inhibited communication and a feeling of distrust towards society, sometimes leading to anti-social rebellion. The student finds him or herself at the crossroads of life which is signposted by a choice: university studies. In making this choice, s/he obviously takes into account parental ideals but is, at the same time, personally involved in the decision and, from this point on, can feel that s/he is taking the future in his or her own hands.

The difficulties met concerning the various issues involved in such a reorganisation of life, such as concern about the choice of subjects, fear of failure or loneliness, can lead the student to consult a psychologist. Our role consists in trying to create the awareness that there is another logic behind these questions.

It is our view that it would be unsuitable to look for the characteristics of the request for counselling in the light of a psychopathology of student life. Even when arti-

culating the real problems of student life, s/he is in fact speaking of him or herself only, of personal history, that is to say of earlier problems. The present anxieties, even the panic s/he feels which is linked to indicators of worth and social status, (professional success, competitiveness, the future, plans, integration, etc.) only serve to reveal the presence of these earlier problems.

The answer to these questionings will draw out what each student considers s/he could be and could achieve in future life. The psychological consultation, often a first step, must therefore pay great attention to distinguishing what exactly is the object of the demand.

When listening to students via a psychoanalytically orientated approach, we can sustain the dynamics of the unconscious "desire" attached to each subject, and help to find a socialised form of expression, whereas until these expressions are worked through with the psychologist these may be presented in the form of symptoms, or inhibitions and appear as a form of discomfort that cannot yet be verbalised.

### *Conclusion*

If the psychologist of the University's Preventative Medicine Service is a clinician and as such offers a consultation in psychological counselling, s/he also plays a role in terms of health care in general at the university.

Our experience has shown us that it is less important to identify a psychopathology via its symptoms than to back up the offer of counselling which is made from the moment a student starts at the university. For many students, this is the first time that an easily available consultation without connotations of mental illness is within reach. Whatever the case, once the first question has been asked

by the student, s/he begins a discussion concerning his or her mental suffering. In doing so, s/he initiates a verbal experience previously unknown, and in which it is possible to express more than s/he could ever have imagined, and in a way s/he could never have imagined.

The numerical data available nationally at the moment for the Preventative Medicine Service is drawn from an article by Doctor Danon-Boileau: "For the year 1983-84, of 1,005,000 enrolled students, 465,355 were given compulsory medical examinations. 316,099 students presented themselves voluntarily for various types of consultations. The number of psychological consultations cannot be stated exactly.

The entire personnel consists of 44 services which bring together 823 members of staff, of which 426 are doctors; there is one nurse for every 4950 students, and one social worker for every 10690 students, all of which provide 100,000 hours of medical intervention. 13 services have a psychologist on the team." (cf Danon-Boileau Henri, "L'aide psychologique en faveur des étudiants: Intérêt d'une prise en charge médico-psychologiques et pédagogique", *REVUE DE NEUROPSYCHIATRIE DE L'ENFANCE ET DE L'ADOLESCENCE*, n° 12, December 1989.)

#### 4. *The B.A.P.U.s in France (University Bureau of Psychological Counselling)*

(contributed by Dr. L. de Vaguerese, Chief Medical Officer, B.A.P.U. (F.S.E.F.) Paris)

The first B.A.P.U was created in Paris, and still continues to function. It was founded on the recommendation of the M.N.E.F (Social Security for Students in France), which was also the case for the subsequent ones. The Paris B.A.P.U has recently been taken over by the Health Foun-

dation for Students in France (F.S.E.F). Its statute is in the process of being redefined.

### 1. *History.*

The B.A.P.U.s have been active in France since 1956. In 1952, the National University Committee for Mental Health brought together numerous organisations which focused on the policy of preventative medicine. Until then, the fight against TB had dominated the scene.

The B.A.P.U. framework was successful and became a point of reference in the university milieu thanks to certain psychoanalysts who agreed, at the beginning, to work without a fee.

The initial impetus came first from student structures which were linked to the unions and subsequently from the psychoanalysts and university teachers who took on the project and carried it through.

A legal basis was given to this type of organisation during the 1960's and the B.A.P.U.s multiplied in France until 1972.

### 2. *Functioning.*

The B.A.P.U.s offer students direct consultations with psychoanalysts and a follow-up period of varying length without any financial or administrative obstacles, since the introductory sessions and the treatment are covered by the Social Security and the D.A.S.S. (A public organisation which covers the cost of preventative interventions in the health sector). Some students come to the B.A.P.U. only once, others come a few times, others will be treated for an indefinite length of time. However, it is the intro-

ductory sessions which have always been emphasized and consequently short term treatment is favoured.

The psychoanalysts, who may be medical practitioners or psychologists, belong to various analytical groups (Freudians and Lacanians). They used to be paid on the basis of equality in terms of salary.

### 3. *The Paris Example.*

The Paris B.A.P.U. team carried out its work until 1991 with 13 part-time analysts: 6 doctors and 7 psychologists. The number of hours on duty varied considerably from one analyst to another, ranging from 6 hours sessional work per week to permanent contracted part-time employment. On average, the psychologists worked longer hours than the doctors. The latter rarely worked more than 8 hours per week. In 1991, the Paris B.A.P.U. carried out 7000 interventions on the basis of 550 students on their register.

The team also included a full time secretary who was responsible for administrative duties and two part-time secretaries. The B.A.P.U. opened early in the morning until late in the evening (9am-9pm). This allowed students who were in paid employment to visit the centre in the evening and on Saturday mornings. A social worker was planned for.

### 4. *The gradual disappearance of the B.A.P.U.s.*

Many B.A.P.U.s have closed down since 1972. The causes are numerous: expenses which were too high for some B.A.P.U.s, local conflicts, a lack of contact within the university context, a lack of purpose and the absence of a health policy by the M.N.E.F. which, although it has

remained the main financial organisation of the B.A.P.U.s, has greatly altered its orientation in the past ten years.

Today, apart from 2 B.A.P.U.s in Paris and three others in the provinces (Lille, Rennes, Marseille), there are a certain number of C.M.P.P.s (Centers for the academically challenged). These centers take in children with psycho-pedagogical difficulties and also possess B.A.P.U. extensions which allow them to deal with those young people when they attain the status of legal adults.

### 5. Conclusion.

Generally speaking, it should be emphasised that up to now, these very original B.A.P.U. experiences have never been the subject of serious study in terms of how they function, the problems they have met, nor the conditions which led to the gradual disappearance of most of them. The university, political and psychoanalytic context has greatly changed since the creation of these organisations more than 35 years ago.

For many years, the B.A.P.U.s fully belonged to the university scene holding the same importance as the Campus restaurant or the annual medical visit. Nowadays, the student milieu is much more heterogeneous. Frameworks have changed and the B.A.P.U.s certainly need to evolve. Nonetheless, we would be unable today to draw up a policy of preventative medicine and mental health care in the student community, without taking into account the immense experience which the B.A.P.U.s have accumulated in this field.

### 5. *The university medico-pedagogical clinics of the Health Foundation for Students in France (F.S.E.F.): various types of hospital admittance linking treatment to university studies*

#### 1. History

The Health Foundation for Students in France resulted from an initiative taken by the French National Students' Union (U.N.E.F) in 1923. At that time, TB was a daunting plague and was to remain so until the 1950's. Consequently, it occurred to the students to set up a sanatorium where their classmates could be cured and at the same time continue their studies. In fact, the interruption of their studies due to illness was likely to have a detrimental effect on their past academic work and to put their whole future in the balance. Among others, Roland Barthes took advantage of this service. The Foundation was recognised as a public service in 1925. It was called The Sanatorium Foundation for Students in France and created a Board of Administrators.

To meet the students' needs, the Foundation (S.E.F), with the backing of the State, then created many other centres which all aimed at linking treatment and studies.

In the mid fifties, advances in early screening and in the treatment of TB resulted in a spectacular reduction in the number of patients. The S.E.F centres were consequently completely reconverted, and applied their newly acquired structures to taking in new pathologies, whether somatic or psychological, including serious mental pathologies.

In 1972, the S.E.F Foundation was renamed "Fondation Santé des Etudiants de France" (Health Foundation for Students in France: F.S.E.F).

Today, the F.S.E.F clinics provide an extremely valuable source of help for students with psychological disorders who are obliged to go to psychiatric hospital and consequently to interrupt their studies. The Foundation clinics offer different types of care which allow the students to be treated and to resume their studies. Thus the slogan of the Foundation reads: "Study nonetheless".

## 2. Statistical description of the care available

### a) Number of clinics.

The Foundation manages 13 clinics, of which six take in young people suffering from serious psychological disorders. All the centres take in secondary school pupils. Three of them also take in university students: the Dupré clinic in Sceaux in the Paris area, the Georges Dumas clinic in Grenoble, and the Georges Heuyer clinic in Paris.

These 3 clinics together offer 448 beds for in-patients, 25 beds for sleeping-in patients only and facilities for 85 out-patients. Of the total number of registered patients, 33.1 % are students in higher education. (F.S.E.F, 1993).

### b) Intake.

49% of the clinic's intake is made up of young people suffering from psychotic disorders. The others suffer from neuropathic states which reveal severe personality disorders, of which 15 % are border-line cases.

### c) Different types of hospitalisation.

These centres are not found on the university campus, but form part of the university network. Besides in-patient care, the centres offer part-time hospitalisation, night-care, day-care, a follow-up service and out-patient care.

### d) Length of hospitalisation.

It is not unusual for a student to be in full-time hospitalisation for one or two academic years. However, in 1992, the average length of hospitalisation was for 6 months.

## 3. The framework for linking a student's treatment to the continuation of his/her studies

The special feature of these centres is that there is the existence of teachers occupying posts, called "profile posts" (B. Officiel, 10 mars 1988), who are placed at the disposal of the Foundation by the Ministry of Education. These teachers work closely with the medical teams.

### a) The medical framework.

Each clinic has at least one psychiatric team, consisting of psychiatrists, clinical psychologists, nursing staff, social workers, secretaries and part-time psychotherapists-psychoanalysts (Danon-Boileau Henri, Pradel-Lanson Christine, "EDUCATIONAL THERAPY: THE BEST OF BOTH WORLDS, 1991).

A diverse range of treatment is offered to the students: apart from drug-therapy, there is psychotherapy based on psychoanalytical techniques such as individual therapy, psychodrama, family-oriented therapy and relaxation techniques. These therapies are part and parcel of the daily care assured by the nursing staff, and of the use of social skills and occupational therapy. The fact that a student goes back to college, and that there is the presence of a pedagogical support system aiming at the student's participation in university and cultural activities within the framework of the development of a project, are two essential elements in the therapeutic action.



b) The educational framework.

The aim of this framework is to give the students the possibility of resuming their studies and to come to terms with their illness without ever losing sight of a future in society. Going back to college and assuming a professional role are the goals the teams work towards. After a severe nervous breakdown and a period of time in which links with society have been broken, often marked by a stay in a psychiatric hospital, the sheer fact of enrolling as a student again constitutes an important stage in the dynamics of an individual re-formulation and a re-entry into society.

In practical terms, the aid offered to the student takes the form of individual support (tutoring and coaching), administered by one or more teachers employed at the clinic.

Since 1987, at the G. Heuyer Clinic for example, there has been a success rate of between 70%-88% in university exams. This figure is calculated on the basis of the number of students who actually present themselves for examinations.

c) The link between undergoing treatment and resuming studies.

A weekly meeting takes place between the medical team and the teaching team, sometimes in the presence of the student and, in certain cases, in the presence of the student's family. These meetings permit the team to follow the progress of the student's project in relation to his state of health.

At the same time, the student's project is drawn up within the clinic in collaboration with his/her clinical psychologists, the teaching team and the Information Service. The teams within the clinic work closely with

external colleagues and organisations that the student can also consult, for example, the S.C.U.I.O. (University Information and Guidance Service), the University Relay Service for the Handicapped and the S.M.P.U. (University Service for Preventative Medicine).

In the case of very disturbed students, psychological counselling cannot depend on just one person, and consequently rests on a network of people (outlined above) who work together both inside and outside the institution. Psychological counselling cannot be separated from career guidance in this context because with these students unconscious factors and the social/family context are particularly inter-related in terms of career choice.

d) Follow-up after discharge from hospital.

Students can use our services for a number of years after their discharge. These services include medical, psychological, psychotherapeutic and pedagogical follow-up and advice. We have ascertained that most of them obtain their degrees, albeit over a prolonged period of time in some cases.

#### 4. *The Foundation's Projects.*

A number of clinics within the Foundation have drawn up projects on the basis of the study/treatment framework. This will allow an even greater number of students who are confronted with psychological problems, to take advantage of a multidisciplinary consultation service.

Another project which fits into the more global framework of the F.S.E.F. venture (defined below), is the creation of a lighter-weight structure of prevention, and of assessed follow-up, namely the U.P.S.E (Centres for secondary prevention and assessed evaluation):

“The Foundation’s psychiatric units are so sought-after that there are nine-month awaiting lists. During this waiting period, the illness may take a turn for the worse and require even more intensive treatment when the time comes.

There are other sources which are well adapted to taking on the basic prevention of illness, particularly through screening. These include school-based medical care, university-based preventative medicine, health-care centres such as the M.N.E.F’s, as well as the private medical sector and the psychiatric sector.

The idea was then put forward of creating a network capable of promoting a logical and operational link between these services. This resulted in the U.P.S.E’s, which are meant to operate along two lines: prevention and screening. The line of action to take is precisely stated: establishing diagnostic and prognostic evaluations; giving advice and guiding adolescents and young people towards re-establishing themselves in society in a manner most suitable for them; and preventing the risk of dropping out which could be provoked or aggravated by illness; ensuring a follow up and evaluation of the medical, social and pedagogical action put into practice.”These units could “serve as a link and as a meeting place for all the people and associations concerned by these problems: doctors, families, teachers, students’ families.”

(F.S.E.F. *Projet d’entreprise*. Sept. 1992).

At the moment, these units provide a general model of intervention which has to be adapted to individual situations.

### *Conclusion*

Psychological counselling in Higher Education in France at the moment is diverse and complex because it has to be adapted to a number of different situations which reflect the history of the system of higher education and the system of student insurance. It is also marked by the students struggle for the protection of their health.

This report can give but an incomplete picture of the whole field, since the professionals working in it do not always agree on the concepts which guide the action or on the range of answers to the problems and demands of the students. At the moment, furthermore, the network of participants is being reshaped first by economic pressure and second by the evolution of pathologies and an increase in the diversity of demands. We must also take into account the increasing number of enrollments every year in the universities.

The responses to this situation are being progressively put into place in the various institutions. The new orientation taken by preventative medicine in 1986-1987 is now bearing the fruit of the change of policy and of its integration in the university context. The other people involved, while continuing with work which has proved itself to be relevant to the needs and demands of students also allow their modes of intervention to evolve according to social and economic changes and the effect the latter have on the student population.

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## GREECE

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*Brief Description of the Greek Educational System (age groups, kinds of degrees, selection requirements, etc.)*

The Greek educational system can be divided into three units: elementary, secondary and higher education. Elementary education comprises two years of pre-school or kindergarten which are non-compulsory and six years of primary or Demotico which are compulsory.

Secondary education comprises the Gymnasio and the Lykeio: The Gymnasium (first cycle of secondary education) lasts three years and is compulsory for all students who have graduated from the six-year primary education system. Upon graduation, students are awarded the Apolítirio Gymnasium (Gymnasium Diploma). Holders of this diploma may continue into the Lykeio which lasts three years and is not compulsory.

Several different types of Lykeia exist:

- a. Genika Lykeia (General Lykeia)
- b. Technika - Epaggelmatika Lykeia (Technical-Vocational Lykeia)
- c. Eniaía Polikladika Lykeia (Unified Multidisciplinary Lykeia)
- d. Klassika Lykeia (Classical Lykeia)

- e. Ekklesiastika Lykeia (Lykeia for Religious Studies)
- f. Athlitikar Lykeia (Lykeia for Athletics)
- g. Mousika Lykeia (Lykeia for Musical Studies)

In addition to the Lykeia, there exist Technical Vocational Colleges [Technikes Epaggelmatikes Scholes (TES)] offering two years of technical and vocational knowledge to Gymnasium graduates. Students at the TES may continue their studies by entering the second year of a Technical-Vocational Lykeio.

Normally, the students of all types of Lykeia follow the same course of studies during the first two years. In the third year of the Lykeia students follow a common core of general interest courses amounting to ten hours per week followed by approximately twenty hours of teaching in one of four different types of preparatory streams leading to higher education, which they may select themselves. Upon successful completion of the Lykeion students are awarded the Apolitirio or Ptychio Lykeiou (Lykeio Diploma or Certificate), which allows them to participate in the national entry examinations for the institutions of higher education.

The route into higher education in Greece is through general national examinations which are held each year in the second half of June. Greece applies a quota policy throughout the higher education system. In 1991 for instance, out of 128,295 candidates who participated in the national examinations, 42,384 were admitted into the higher education institutions; and, in 1992 out of 140,515 candidates 42,614 were finally admitted, that is, about 30%.

In addition to the quota entrants, each department or faculty accepts a number of foreign students, Greeks living abroad, scholarship recipients etc. Candidates' entry into the institutions of higher education - up to fulfillment

of the quota - is decided on the basis of their grades and their stated preference with regard to the faculties in which they wish to enrol.

There are 17 universities existing presently in Greece and they all act under the supervision of the State, are financially supported by it, and operate under laws which determine their statutes. The greek higher education institutions may be classified as follows: Panepistimia (Universities), Polytechnia (Polytechnics), and Anotati Scholi Kalon Technon (Academy of Fine Arts). The duration of studies at the Universities is four years (five years for Veterinary and Agricultural Studies, six years for Medicine) and at the Polytechnics and the Academy of Fine Arts, five years.

Higher education institutions consist of faculties (scholes). These faculties are subdivided into departments (tmimata). The department is the basic academic unit and is concerned with a specific scientific field. The departments in turn consist of sections (tomis). Each section coordinates the teaching of part of the department's subject of interest, which in turn relates to a specific scientific activity. (Petrakis, 1992).

Each higher education institution awards a Ptychio (or a Diploma for the faculties of engineering). Either degree entitles its holder to exercise their profession. Graduate studies exist but are not fully developed. They consist of two levels of studies corresponding to

- the Postgraduate Diploma of Specialization
- the Doctoral Degree

In order to give a brief indication of how the student population in Greece is distributed throughout all educational levels, we will refer to the year 1986 - 1987 for which we have some provisional figures. During that academic year the student enrolment was as follows:

<i>Level of Education Students</i>	<i>Number of</i>	<i>%</i>	<i>Ages</i>
1. Kindergarten	155.527	8	3-6
2. Dimotiko (Elementary School)	865.660	42	5-15
3. Gymnasio-Lykeio (Secondary education)	717.408	35	11-20
4. Technical-Vocational	118.437	5	11-27
5. Higher Education		10	
a. general education	4.929		17-29
b. technical education	63.684		17-29
c. vocational and religious education	3.760		17-29
d. universities	115.795		18-30+
TOTAL	2.045.200		100

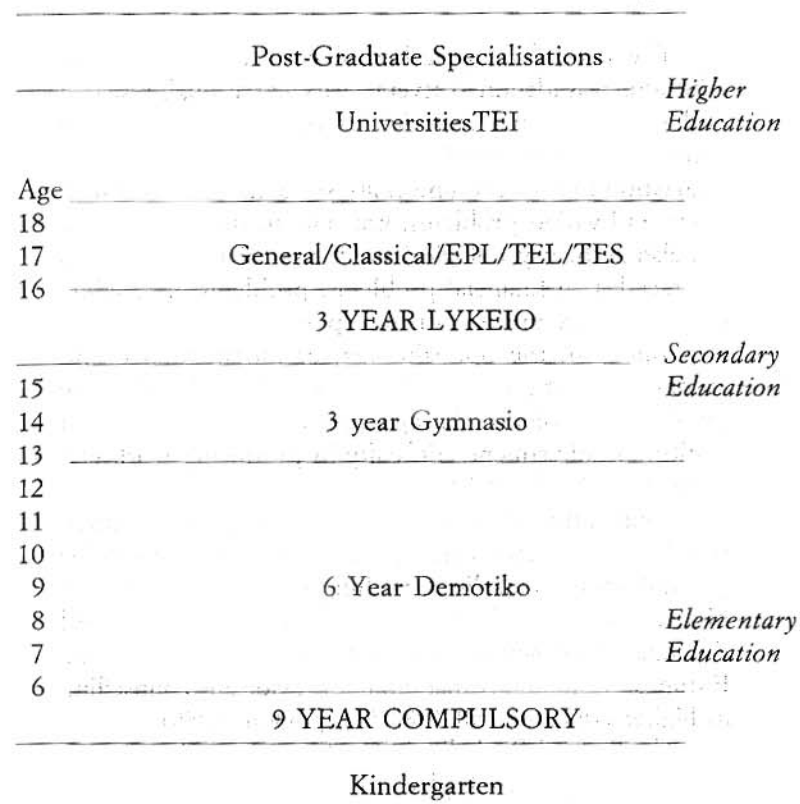
(Source: National Statistical Service of Greece)

These figures, show that approximately 10% of our student population is enrolled in higher education and their ages vary from 17 to over 30. This is something to be expected considering that:

a) our students may be examined on the same subject several times until they pass it and

b) the fact that there is no age-limit for higher education students. Although the Greek system is highly selective at entry, the number of students completing their course of study is also high. It is hard to get into the University but once you are in it is most probable that you will leave with a degree.

## DIAGRAM OF THE GREEK EDUCATIONAL SYSTEM



(Source: Petrakis, 1992)

*Who takes responsibility for psychological needs of students?*

The need for psychological counselling in higher education was identified several years ago through research and some personal experiences of psychology faculty members. More specifically, we have come to the realization that Greek university students are faced with many and varied problems, not only in the educational, but also in the psychological and the social areas. Students are faced with financial problems, problems of lodging, of social recognition, of interpersonal relations and relations with the opposite sex, of independence and autonomy. In the area of education and learning they are faced with problems relating to exam anxiety, course and institution adjustment, difficulty in producing work etc. (Kalantzi - Azizi, 1987).

But, although there was empirical proof of these problem areas and consequently an urgent need for psychological counselling, nothing existed in the Greek higher education institutions till 1989. Greece and Portugal were actually the only two countries of the European Community that did not provide any counselling in higher education till 1989 (Tzepoglou, 1989).

The Second Panhellenic Conference on Counselling and Guidance that took place in Athens in 1988, focused upon counselling and guidance needs in higher education. It was pointed out that Greek higher education students are faced with numerous problems -psychological, sociological and educational (Malikiosi-Loizos, 1989) - that are not being officially met. Counselling and guidance, it was pointed out, was provided unofficially by parents, friends and/or relatives, and occasionally by professors. When interviewed, 67% of the students said that they had never received any information and/or guidance from

their professors to help them face their problems (Tzepoglou, 1989; Malikiosi-Loizos, 1992). During that conference it was estimated that there was an urgent need to establish counselling and career guidance centers in all higher education institutions.

One first effort was made at the University of Salonica late in 1988 to establish a Counselling Centre. But it was founded by the Psychiatry Department and its emphasis was definitely psychiatric.

In 1989, following a proposal from its Psychology Department, the University of Ioannina started operating a counselling centre under the heavy pressure of some urgent student needs.

Finally, in 1990, following the proposal of the Psychology Department, the University of Athens, established its own counselling centre:

Since 1991 a counselling and vocational guidance centre started operating in the department of Pedagogics of the University of Athens which collaborates closely with the counselling centre of the psychology department of the same university.

At the University of Crete the psychology department provides help to the students in need in an unorganized and unofficial way.

At the Technological Educational Institutions (Technologika Ekpaideftika Idrimata-TEI) -which form part of higher education just like the universities and the polytechnics - there is genuine concern over students' problems in that psychological counselling is being offered unofficially to students by psychology faculty members and social workers. This is especially true for the TEI of Athens, Patras and Rethymnon, Crete.

Also, the Economic University of Piraeus offers unofficially counselling and guidance via psychology and sociology faculty members.



It is worth noticing in this context that psychological counselling is being offered in a more organized way to the students of the Vocational and Technical Teacher Training Academy (SELETE - Scholi Ekpaideftikon Leitourgon Epaggelmatikis kai Teknikis Ekpaidefsis) since 1979. SELETE is a higher non-university level education offering training to those destined to serve as teaching staff in technical-vocational training schools. SELETE has created its own counselling centre in which psychological counselling and vocational guidance are being offered.

In all other higher education institutions students in need are obliged to address themselves to private psychologists or psychiatrists or to Mental Health Clinics. This limits the percentage who will seek help because there are financial problems that arise plus the fact that if they visit a Mental Health Clinic or a University psychiatric clinic they fear that a different label may be attached to their problem.

Officially, these are about the only counselling services available to students up to now. They are the ones who assume responsibility for the Greek students' psychological needs. Unofficially many faculty members are interested and help in that direction by providing some individual guidance and/or counselling when asked. But this is sporadic and these people definitely do not assume responsibility for students' needs.

*What are the institutional attitudes to this kind of work?*

The General Faculties Council of the University of Athens has shown a great interest and concern for this kind of work and has looked seriously into the possibility of offering sound professional counselling services to the

students. For that purpose they allot each year some money to keep the counselling centre going (that is, they pay for furniture, maintenance, etc. but cannot cover salaries). The interest is sincere but the university is constantly faced with a shortage of finances and therefore, cannot commit itself to permanent financial support of its counselling centre.

Practically all psychology and other faculty members think very positively and support the idea of a counselling centre that will help provide educational, psychological, and social support to Greek university students and will help them overcome adaptation difficulties, as well as solve their post-adolescence quests. Many of them help already toward that direction by offering unofficial help themselves, as already mentioned. Therefore, the attitude, at least in the University of Athens, is very positive and supportive to this kind of work.

However, this is not true for all Greek universities. At the University of Ioannina, for instance, the counselling centre that started operating in 1989 has ceased all of its activities since last September because of lack of support - both moral and financial - from the General Faculties Councils.

*Range of services offered and their environment and location - range of provision*

#### 1. University of Salonica Counselling Centre

It is a branch of the Community Centre of Mental Health and is being supervised by and collaborates with it directly. It was founded in 1986 and started operating in 1988. It was created to face primarily the psychological needs of psychiatry majors.

There is a strong emphasis on psychiatric treatment and its staff consists primarily of psychiatrists who are trained in psychotherapy and seniors majoring in psychiatry. However, they collaborate with psychologists and social workers.

The main objectives of this counselling centre are:

- . To provide psychological support through psychotherapy
- . Crisis intervention
- . Prevention through information and advice
- . Diagnosis

During a 30-month period of operation 118 students came for psychiatric help in a total of 386 meetings. 42% of them had already undergone some psychotherapy and 6.1% had been hospitalized; 34% were under pharmaceutical treatment and 31.2% were taking some other sort of tranquilizers. The major problems or concerns of these students included disturbances in the following areas: disposition, anxiety, psychosis, schizophrenia, adjustment and personality. 74.6% of them were referred to the Community Centre of Mental Health and 25.4% were treated at the Counselling Centre (Vassiliades, P., Manos, N., et al, 1989).

## 2. University of Ioannina Counselling Centre

It was founded and started operating in 1989, following a proposal from the Psychology Department of the University of Ioannina. Its staff consists of 3 psychologists and 2 psychology supervisors.

Its main objectives are:

- . to provide psychological support through psychotherapy

- . student information and sensitivity to various psychosocial issues (prevention)
- . research
- . referral

The major concerns of their student population seem to centre around: Family, social relations and relations with the opposite sex, student life, communication and contact with the teaching staff, and problems related to their studies. During the 4 first months of its operation there were 13 cases between the ages of 18 to 24. Their main concerns centered around relationship difficulties (with family, peers, dates) psychosomatic symptoms, anxiety, and difficulties with their studies. Only one case was referred to the psychiatric clinic; all the others were treated at the Counselling Centre. (Naurides, Dragona, et al, 1990).

The Counselling Centre of the University of Ioannina is presently facing financial problems which affect its normal operation.

## 3. University of Athens Counselling Centre

It was founded and started operating in 1990 following the proposal of the Psychology Department of the University of Athens (Kalantzi-Azizi, 1991).

At the beginning its staff consisted of 2 part-time clinical psychologists, some graduate students in counselling, developmental and clinical psychology, and research assistants. Last year the staff was reduced to one part-time clinical psychologist and some graduate students who assist in research and counselling.

Its main objectives are:

- . to provide psychosocial support

- . research and assessment of students' psychological problems
- . development of intervention models
- . training and education of psychology majors

The major concerns of this student population centre around family issues, interpersonal relations and relations with the opposite sex, autonomy and independence, as well as issues related to their studies.

During a 14-month period of operation (1/92 - 3/93) there were 94 cases who visited the centre in a total of 253 meetings. Out of these 94 cases only 4 were referred to the psychiatric clinic.

Other activities of the University of Athens Counselling Centre:

Within the framework of its activities to provide psychological support to the student population, the Counselling Centre of the University of Athens started recently a new programme aimed at helping and supporting the student with special needs. It should be pointed out that this programme exists for the first time in Greece. One of the major objectives of this programme is to offer some practical help to the students with special needs. In addition, psychological counselling is aiming primarily at their better adjustment at the university environment. (e.g. HORIZON - Program).

Another group training programme aimed at students with problems in organising study and difficulties with concentration was introduced through the counselling centre of the University of Athens and has produced some interesting results (Kalantzi-Azizi, A. and I. Matsaka, 1992). The students acquired some special skills that could help them overcome other kinds of difficulties as well, leading, therefore, to their better inter-personal post-adolescence adaptation.

Other activities of the University of Athens counselling centre include exchange of ideas and experiences with other universities in Greece or abroad. The teaching and the counselling staff participate at conferences and conventions. Last year, during the 3rd Panhellenic Psychology Convention there was a round table that dealt with the topic: "Student Counselling". Early this Spring, the Psychology Department of the University of Athens organized a 2-day meeting on "Counselling in Higher Education" with the participation of FEDORA and more specifically P. Benedetto and Jean-Marie Burnet.

No other counselling centre has started operating at the other Greek universities up to this moment.

### *Funding*

As mentioned earlier, higher education institutions act under the supervision of the State, are financially supported by it and operate under laws which determine their statutes. Since they are legal persons under Public Law (Nomika Prosopa Dimosiou Dikaiou -NPDD), the institutions of higher education fall under the provisions for public accounting.

However, for the operation of the counselling centres, funding can be provided by other sources as well. For instance, some ministry other than that of Education, or the General Secretariat of Youth or some EEC programme can provide funding upon application for the better operation of the counselling centres and this has happened sometimes in the past. But the type of funding is occasional and does not guarantee the continuous and effective functioning of these counselling centres.

All higher education institutions first, and the State secondly, have to be convinced of the necessity and im-

portance of counselling centres in order to include in their annual budget for higher education the necessary financial amount that will help cover the essential costs of these counselling centres.

#### *Links between Student Services*

In the Greek universities the health, counselling and career services tend to be run independently co-operating together on a voluntary basis. For instance, the Student Union, which unites all student services, has its own health service which students may use or may be referred to by the counselling staff and vice versa.

#### *Qualitative differences between the services*

Student services aim at the improvement of students' living conditions, their entertainment and their social and intellectual education and offer the following:

- . foreign language institutes
- . medical health care
- . libraries
- . physical education
- . music education  
(participation in choirs, concerts, provision of a musical record library, etc)
- . room and board facilities
- . career guidance and placement office
- . cinematographic and theatrical clubs
- . financial assistance

These different activities and services may be run independently or in collaboration, depending on mutual interests and needs.

#### *Recurrent problems in students using services*

The major problem facing the students who want to use all these different kinds of services is that the ratios of students-services personnel are very low. There are too many students who want to profit from the few services being offered and there is limited personnel to assist them. As a result, there are long waiting lists which discourage the students.

Focusing on the counselling centres per se there is a major problem attached to them: It is the prejudice that still exists among Greek people regarding psychological help which hinder many students from coming for help. The public needs to be informed and sensitized to the usefulness and the help counselling centres may offer to a great number of people before it will be convinced to actively support them.

#### *The national picture - an overview of provision*

In summary then, the national picture of Greece regarding its counselling services is still very pessimistic. The few efforts that have been being made with a lot of enthusiasm on the part of their organizers, are being met with suspicion from the general public.

The University authorities although holding a very positive attitude and wish to support this effort, have no way of finding the finances that will guarantee the counselling centres' survival. The State has to be convinced of the usefulness of such services, not only for college students but for all kinds of ages and categories of people, in order to allot money towards that direction.

### *Training and practice in psychological counselling in higher education*

As far as preparation of student counsellors goes, nothing much exists up to now at the Greek universities. However, some departments have included counselling courses in their curriculum. Psychological counselling courses are being taught at the psychology department, the department of preschool education, the department of primary education and at the nursing department of the University of Athens. The psychology and preschool education departments have also included a training video film in their practicum course.

At certain other Greek universities there exist communication courses and courses in psychology where in some counselling principles may be included, but this is an unofficial guess. A 2 1/2 year graduate programme in Counselling and Vocational Guidance is being planned and will probably start next year at the University of Athens.

### *Future developments*

Unfortunately the Greek higher education system has not yet realized or is just starting to realize the tremendous importance of counselling services for its student population. This is why such programmes are not being financed. Therefore, we strongly feel that our first and most important future target should aim at informing and sensitizing the university community to student counselling needs.

A second major future objective should be the foundation of more student counselling centres so that all Greek universities will be in a position to offer such a service.

A third objective should be the creation and development of graduate programmes in counselling. There are presently two state scholarship graduate students at the Psychology Department of the University of Athens who receive training in counselling.

Some effort should be made for more cooperation with other counselling centres so that our graduate assistants can visit and get updated in this area.

A fifth objective will aim at the exchange of staff visits between counselling centres of the EEC member countries.

Research should also be advanced in the areas of: student needs, training models, intervention strategies, methodology, cross-cultural comparisons, etc. Part of a recent research project deals directly with the question of student counselling needs and the importance of student counselling centres at the higher education institutions (Malikiosi -Loizos, 1992).

Finally, we would like to stress the importance of a close and essential collaboration of the different countries at European level which will help achieve the above-mentioned objectives and promote the different counselling methods. The creation of PSYCHE at this point is of outmost importance because the close collaboration of its members will definitely help improve the existing psychological counselling services and will also help establish new ones where they are lacking.

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## UNITED KINGDOM

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### *The British higher education system*

Until 1992, Britain has had a structure in Higher Education, consisting of universities and polytechnics offering degree courses. Recent legislation has been brought in to abolish the historical differences between polytechnics and universities. Polytechnics are now able to rename themselves "universities", but the hallmarks which made polytechnics distinct will remain for some considerable time. Polytechnics sprang up in Britain in the 1970s and were originally intended to provide a more vocational element in their range of courses than universities, but gradually they have become more similar with the main difference being people's attitude towards them. What is meant by this is that universities are still able to attract more money and often the more highly achieving students than polytechnics.

The route into Higher Education in Britain is via a national clearing system. In the Autumn before entry the following year, students apply centrally, naming the subject and institutions of their choice in order of preference. Only in August, when the school leaving examination results are published and institutions have a clear picture

of where the vacancies are, can students apply directly to any one polytechnic or university to take up spare places.

To qualify for university, in England, Wales and Northern Ireland, students have to have a minimum of two Grade E's at the Advanced level of the General Certificate of Education, known as "A Level". In Scotland, which has its own separate educational system, the minimum requirement is two A's and two B's at the Higher Grade Certificate of Education known as "Highers". However, individual courses and individual institutions, where demand for places is high, can require higher entry qualifications. For example, to get into medical school, someone might need to have reached the top grade in at least two subjects and have done well in any other. Most universities will also accept overseas and international qualifications such as the International Baccalaureate or the Irish Leaving Certificate.

In England, Wales and Northern Ireland, students are required to specialise very early in school. They usually study up to ten subjects until they are 16. They are then required to choose between two and four subjects in which to specialise. This means that the direction they will take in higher education is decided when they are very young and it is difficult to get a place doing an arts subject at university if they have specialised in science at "A Level". However, the Scottish education system encourages a broad-based education and specialisation does not occur until university.

Having once acquired a place at university, students usually complete this course in three or four years. Trends in Britain are slowly changing so that students of the future will be able to study in a more flexible way, but the three to four year course is still very much the norm, despite an encouragement to move towards accelerated degree courses of two years duration. Most students lea-

ve university by the age of 21. However, the trend and Government policy is moving towards encouraging more non-traditional students into Higher Education. These are normally mature students (those over 21) or those without formal entry qualifications and are usually extremely successful academically. They also make good use of counselling services.

Overall more and more students are entering higher education in the U.K. every year and numbers have been rising by roughly 10% a year for the past two or three years. However, we are still behind most other European countries in the numbers of students entering higher education. In 1993, the figure increased to over one million. Clearly the British system is still highly selective at entry but the numbers completing courses is also relatively high. It is hard to get into University but most students who start a course leave with a degree.

After completion of the first degree the majority of students enter their career but some will do postgraduate training geared towards attainment of a certificate or diploma in a vocational subject e.g. teaching, social-work or law. Such courses are usually of one or two year's duration. A minority of students continue with academic studies after completion of their first degrees. The courses they undertake lead to higher degrees such as masters and doctorate degrees. Entry to such courses is highly competitive and funding is difficult to obtain. Consequently, students need to have attained high levels of performance in their first degrees in order to attain both entry and funding.

#### *Counselling and advice provision*

There is no statutory requirement for the provision of counselling in British Universities. Although there are

examples of counselling in specific universities in the 1950s counselling provision really began to develop in the 1960s and these services were installed, in many instances, as a direct response to anxieties about the increased level of student dropout even though many of the instigators of these services perceived a wider task for counselling than the retention of students. The early services existed in a somewhat ad hoc way and largely were responsible for their own creation and development. They then had to convince institutions of their value. Thirty years later there are still some institutions which have somewhat rudimentary services but increasingly institutions feel that the existence of counselling services on their campuses, enhance their attractiveness to potential students and their parents. (In recent years universities have had to become competitive in recruitment of students as central funding from government public spending has declined.) The earlier academic culture was antipathetic to the notion of enterprise but now students are increasingly perceived as consumers who should be provided with clearly defined services. Psychological counselling has become much more acceptable and understood as an activity by the general public and is frequently mentioned in the media particularly after some disaster or traumatic event when psychological counselling is routinely offered to survivors, victims and their families. Consequently it is the general expectation of students that there will be counselling available on the campus.

Although there is a general acceptance of the value of counselling as an adjunct to the learning task, and the maxim that an unhappy student does not learn is readily understood, counselling services in universities remain chronically understaffed with demand for counselling permanently outstripping provision. There remains a sense that counselling is a luxury and in times of financial

restraint services are vulnerable to spending reduction regimes. It still feels that it will be a long time yet before the provision of one full-time counsellor per 2,000 students recommended by the Association for Student Counselling (the professional body for student counsellors) becomes the staffing norm.

As previously stated, almost all universities have counsellors but provision varies enormously from institution to institution. All student counselling in Britain is psychological counselling and most institutions have careers advisers as well as student counsellors. Most institutions also have welfare advisers and accommodation advisers and many either have their own health service or a local doctor who visits the institution on a regular basis. In some institutions the services offered to students tend to be gathered together in one department, known as student services, with a head of service who coordinates provision. In other institutions, the health, counselling and careers services tend to be run independently, co-operating together on a voluntary basis. In some institutions, the counselling service is in the same building as the teaching. In others, it is housed separately.

Student counselling services, particularly in the older universities, are usually part of the administrative wing of the institution rather than the academic one. Most counsellors consider this to be unfortunate as they see counselling as being tied closely to supporting the academic functioning of the student. In the new universities (formerly polytechnics) services have been more often linked with the academic wing with counsellors being paid on lecturer salary scales. Whether the counselling service is perceived as an academic function or administrative function, it is imperative that lines of management provide access to the academic wing. This is often achieved by participation of the services on committees which deal



with academic issues. Such committees usually report back to the governing bodies of the institution such as Senate or Court. In this way counsellors can comment on and influence institutional policy and practices which benefit or hinder student needs.

It would be useful at this point to describe one particular counselling service in Britain - the University of Westminster - because although structures are different throughout Britain and some services are better resourced than others, professionally there are very many similarities both in the practice and the provision.

At the University of Westminster, there are two part-time and three full-time counsellors for approximately 13,096 full time equivalent students. The counsellors are part of a Counselling and Advisory Service, which consists of two full-time equivalent advisers, an international student officer, a receptionist and a secretary. The Counselling and Advisory Service is part of a wider Student Services, consisting of an Accommodation Service, a Careers Service, a Health Service and a Chaplaincy.

*The Accommodation Service* looks after and allocates places to students who live in halls of residence. The University has several halls of residence and has some flats which it lets to students. The Service also compiles lists of rented accommodation to students and helps them to find somewhere to live when they arrive in London for the first time or when they need to move. It also advises students on problems they may have with landlords or tenancy agreements.

*The Careers Service* which has two advisers and five assistants sees students at any stage in their time at the University, although most attend towards the end of their course. The careers advisers see students for one or more

one hour interviews and help them think what career or job they would like to do when they leave. Sometimes students also consult them when they feel they have made the wrong subject choice and need guidance on changing course. As well as seeing students individually, they work closely with academic staff, teaching groups of students to identify their skills and apply them to the work market. The Service has an extensive information library, which students use alongside personal careers counselling.

*The Health Service* has three part-time nurses who work every day during term time. The nurses and a part-time (3 days a week) doctor come from a local doctors' surgery paid for by the university. They offer emergency medical advice and treatment, contraception advice, and advice and immunisation for students travelling abroad. A proportion of their work is in the area of emotional problems and it is with that Service that the counsellors are most closely linked.

The Counselling and Advisory Service meets regularly with the other services, partly to discuss joint concerns to do with the institution and partly to talk about professional issues. Because the Services are housed in the same building, communication is greatly eased.

The counselling offered is psychological. Most students refer themselves to the Service but many are recommended by their lecturers, tutors and other Student Services staff. The Service works closely with the academic staff, who also have a pastoral role in the institution. If a student has a personal or practical problem, the first person they usually consult is their tutor. Each member of the academic staff is allocated a number of tutees. The frequency and quality of contact varies from department to department and person to person. The counsellors meet regularly with the senior tutors to discuss student issues

and to offer them support in their role. If a tutor wants to refer a student for counselling, they will often telephone first to discuss this.

The counselling work is based on the thinking of Psycho-analysis/Psycho-dynamic psycho-therapy but this is not true of all student counsellors in Britain. Many are humanistic, basing their work on Rogers, Gestalt, Transactional Analysis and others. In addition some are cognitive/behavioural. The work is mostly with individuals but there is also a weekly therapy group for up to eight students. With individuals the work is either on a long or short term basis. Long term work can last for up to three years, but increasingly students are being seen in the shorter term. This varies from a few weeks to a few months. Students are also seen less frequently than once a week over a longer period. Students are normally seen for fifty minutes. As well as working with individuals and groups, the Service puts on various workshops on topics such as study skills, exam anxiety, eating problems and being a mature student (i.e. a student commencing study at 21 or over). For professional development and to raise money, conferences and courses are run for other counsellors and academic staff.

A student who wants to see a counsellor is initially asked to fill in a form and unless the problem is very urgent, he or she is asked to wait to receive a letter inviting them for an initial assessment interview. All students asking for counselling are seen or spoken to on the telephone by the receptionist or secretary who assess the urgency of the request. Those who are in immediate need of help can usually be seen briefly at once or within a couple of days.

In recent years, there has been a waiting list for counselling from as early as November (one month after the beginning of the academic year) and some students have had to wait up to six weeks to be seen. This is a

trend common to most U.K. services. After an initial assessment, a student will be offered the appropriate help or referred outside the University if this is more appropriate. However, outside referral is unusual because most counselling agencies are over subscribed and charge fees.

The kind of personal difficulties students present are many and varied. Some are caused by things which happen to them such as bereavement, unexpected traumatic experiences, broken relationships, homelessness, financial difficulties, etc. Other problems they bring with them from their earlier experiences of education and their relationship to learning, for example exam anxiety, a history of under-achievement, difficulty in producing work on time and writing blocks. Sometimes students have difficulties related to settling into their courses. They may suffer from homesickness or feel disorientated at being in a large institution after the security of school. They may also have anxieties at the end of their course about growing up and leaving education for the adult world. This may cause an unexpected drop in their usual performance, exam failure or sudden dropout. Increasingly Asian students are coming with family conflicts resulting from their parents' wishes for them to have arranged marriages. Additionally there may be more complex psychological reasons why some students present themselves for counselling. Sometimes they do not know what the problem is except that things do not feel right for them. They may complain of feeling anxious or depressed, of being unable to sleep, of suffering from physical symptoms or feeling unsure of their sexual identity. They may complain of being unable to make or sustain relationships; suffering from panic attacks; eating disorders; suicidal thoughts; disturbance caused by sexual abuse; psychiatric illnesses.

Each counsellor has individual non-managerial supervision for their work from a psychotherapist outside the

structure of the staff team. This individual supervision is a requirement of the Association for Student Counselling in Britain. When counsellors talk of supervision this is not in the management sense, necessary though that is in any counselling unit, but refers to the consultative support which is required of professional counsellors. The use of "supervision" is very specific to the counselling world. It is the context where casework and other professional issues are brought regularly to another experienced counsellor, external to the institution and outside the management structure, so that the work can be monitored and evaluated in a systematic way. Since the focus is normally the counsellor's interaction with the client, ensuring that supervision is happening is the single most effective way that institutions have of establishing that counsellors are operating in a fully professional and responsible manner.

The counsellors deal exclusively with emotional or psychological problems but there are also student advisers, who deal with practical problems, such as financial, legal, immigration, etc. Although the advice and the counselling role are divided at the University of Westminster, in a few institutions the counsellors are also involved in giving students practical help on welfare issues. There is also an International Student Officer who provides a support system for students from abroad. This includes an orientation programme to help students settle into life in Britain, a social and cultural programme and a regular newsletter.

#### *Training and qualifications of student counsellors*

It is important to recognise that throughout the education system in Britain most professional qualifications are taken after the completion of a first degree or equivalent and are in many cases quite different from the

subject studied to degree level. Thus, student counsellors will come from a variety of backgrounds. There are those with initial qualifications in Education, Social Work and Psychology as one might expect, but there are also Scientists, Musicians, Historians, Mathematicians, etc. who have chosen to enter the world of student counselling. What matters is their post-graduate training in counselling.

The Association for Student Counselling in its "Guide to Training Courses in Counselling" identifies three major areas of expertise of a professional student counsellor.

1. *Counselling Work* where a student counsellor would be expected to be able to work with a wide range of personal, social, emotional and educational problems. In order to be competent in this area the counsellor would have studied a variety of theoretical approaches to individual and group counselling in sufficient detail to enable comparison and contrast of different theoretical structures. One of these approaches would have been pursued in depth during the course, so that upon qualifying, the counsellor would be well grounded in an approach that is "demonstrably relevant to, and able to encompass, the wide range of problems presented to student counsellors".

As well as the thorough theoretical framework, students on a counselling course would expect to have experience of:

- (i) practical experience of individual counselling under regular supervision;
- (ii) casework discussions in groups;
- (iii) regular tutorials with a course staff member;

(iv) attention to issues such as:

*Assessment skills:* taking a history, making an assessment, preparing a referral, recognising kinds of potential disturbance in clients, deciding between alternative therapies/treatment;

*Ethical/Professional considerations:* establishing a counselling contract, confidentiality, breaks, separations and termination, relationships with other disciplines, eg. medical and teaching;

*Learning Problems:* study skills training, learning theory.

*Context of the client:* cultural, family, social and economic background.

2. *Training in Institutional Work:* It is accepted that student counsellors have a role within their institutions, which is preventative and developmental, as well as remedial. For this reason, it is considered essential to introduce those in training to theoretical concepts about institutional structures and dynamics, training methods and management skills, so that by the end of the course they feel confident enough to act as consultant or trainer within their own institutions and to take an active role in commenting upon and helping to develop the wider academic task within their universities.
3. *Work with self:* The nature of counselling work creates a significant pressure on counsellors, in part because it demands a very disciplined personal response to clients. It is, therefore, considered important that

student counsellors have a high degree of self-awareness, to be able to work with their own problems and, when appropriate, to be able to use other professional help in facilitating this work through personal therapy and supervision. It would be expected that the various course learning settings would be used to enable students to distinguish the appropriate use of their own experience and feelings in their counselling work.

At the end of their formal training, graduates of these various courses are expected to be competent to take up posts within educational settings. It is on taking up these posts that the consolidation of the learning takes place and it is at this point that the professional student counsellor would begin to think about preparing him/herself for the process of accreditation.

#### *The Association for Student Counselling and The British Association for Counselling*

The Association for Student Counselling was founded in 1970 and since then its membership has grown to over 500, the majority of whom are practising counsellors in further and higher education (i.e. non-statutory education), working with students over 16 years of age.

The Association's primary objective is to promote student counselling as an integral part of the educational process. It does not have mandatory or legislative powers but is widely regarded as having authority.

The Association for Student Counselling (ASC) is a Division of the British Association for Counselling and is closely tied to that body. To become a member of ASC it is first necessary to become a member of BAC and to agree to abide by the BAC Codes of Ethics and Practice (see appendix). ASC is accountable to BAC for the cor-

rect use of monies raised through membership subscriptions, sale of literature, etc. and in the event of a complaint against the ASC Executive Council, any of its sub-committees or against an individual member, it is the BAC complaints procedure which is invoked.

ASC has its own constitution which may be changed only through the wish of the membership and by agreement with BAC. There is a democratically elected Executive Council and a number of working sub-committees including the Accreditation Sub-Committee. Other sub-committees have responsibility for liaison with the media, for research, and the organisation of the annual conference, etc. ASC also provides an advisory service to institutions which aims to aid in the setting up of services in colleges and universities as well as promoting good practice.

The Association believes that professional training for counselling work as defined in the BAC Code of Practice is essential and that counselling *skills* training is not enough. While it does not itself offer counselling training, ASC publishes a guide to appropriate and relevant training courses.

Services offered to ASC members are:

An Annual Training Conference (open to non-members)

Accreditation of members meeting the requirements  
Advisory service to institutions setting up counselling services

Regular newsletter

Publications and research

Advisory service booklet

Guide to training courses

Membership list

Annual national statistical survey of student counselling services

#### ASC Accreditation:

The Accreditation Committee is a sub-committee of the Association's Executive Council and the Chairperson is always a member of the Executive. Membership of the committee also includes the Membership Secretary of ASC and the Chairperson of the Advisory Service to Institutions. Other members of ASC may be co-opted in order to ensure representation from all areas of further and higher education. The Association's Accreditation papers are appended and are self-explanatory.

Accredited members are required to apply for re-accreditation every five years. Accreditation automatically lapses if the individual ceases to work in further/higher education or ceases to be a member of ASC.

Historically, ASC has used the accreditation process to promote basic professional standards of training, supervision and ongoing professional development. This has proved to be highly successful and almost all advertisements for student counselling jobs will now carry a requirement for eligibility for ASC (or BAC) accreditation. This has encouraged counsellors to put pressure on their employers to pay for supervision and for attendance at training events in order to fulfil the requirements.

Where members of the ASC are refused accreditation or re-accreditation, there is an Appeals System administered by the Chairperson of the Executive Council.

The ASC Executive Council is now re-appraising its accreditation process and recognising that the system requires extending and developing. In order to do this, it is highly likely that ASC will relinquish its accreditation process in favour of the BAC accreditation with an endorsement by ASC for counsellors in post compulsory education.

APPENDIX 1

BRITISH ASSOCIATION FOR COUNSELLING

1 Regent Place, Rugby, CV21 2PJ  
tel 0788 578328 (information line)  
tel 0788 550899 (office)  
fax 0788 562189



CODE OF ETHICS AND PRACTICE  
FOR COUNSELLORS

1. *Status of this code*
  - 1.1 In response to the experience of members of BAC, this code is a revision of the 1992 code.
2. *Introduction*
  - 2.1 The purpose of this code is to establish and maintain standards for counsellors who are members of BAC and to inform and protect members of the public seeking and using their services.
  - 2.2 All members of the Association are required to abide by existing codes appropriate to them. They thereby accept a common frame of reference within which to manage their responsibilities to clients, colleagues, members of this Association and the

wide community. Whilst this code cannot resolve all ethical and practice related issues, it aims to provide a framework for addressing ethical issues and to encourage optimum levels of practice. Counsellors will need to judge which parts of this code apply to particular situations. They may have to decide between conflicting responsibilities.

2.3 This Association has a Complaints Procedure which can lead to the expulsion of members for breaches of its Codes of Ethics and Practice.

### 3. *The Nature of Counselling*

3.1 The overall aim of counselling is to provide an opportunity for the client to work towards living in a more satisfying and resourceful way. The term “counselling” includes work with individuals, pairs or groups of people often, but not always, referred to as “clients”. The objectives of particular counselling relationships will vary according to the client’s needs. Counselling may be concerned with developmental issues, addressing and resolving specific problems, making decisions, coping with crisis, developing personal insight and knowledge, working through feelings of inner conflict or improving relationships with others. The counsellor’s role is to facilitate the client’s work in ways which respect the client’s values, personal resources and capacity for self-determination.

3.2 Only when both the user and the recipient explicitly agree to enter into a counselling relationship does it become “counselling” rather than the use of “counselling skills”.

3.3 It is not possible to make a generally accepted distinction between counselling and psychotherapy. There are well founded traditions which use the terms interchangeable and others which distinguish them. Regardless of the theoretical approaches preferred by individual counsellors, there are ethical issues which are common to all counselling situations.

### 4. *The Structure of this Code*

This code has been divided into two parts. The Code of Ethics outlines the fundamental values of counselling and a number of general principles arising from these. The Code of Practice applies these principles to the counselling situation.

#### A. CODE OF ETHICS

A.1 Counselling is a non-exploitative activity. Its basic values are integrity, impartiality, and respect. Counsellors should take the same degree of care to work ethically whether the counselling is paid or voluntary.

#### A.2 *Client Safety:*

All reasonable steps should be taken to ensure the client’s safety during counselling.

#### A.3 *Clear Contracts:*

The terms on which counselling is being offered should be made clear to clients before counselling commences. Subsequent revisions of these terms should be agreed in advance of any change.

A.4 *Competence:*

Counsellors shall take all reasonable steps to monitor and develop their own competence and to work within the limits of that competence. This includes having appropriate and ongoing counselling supervision/consultative support.

B. CODE OF PRACTICE

B.1 *Introduction:*

This code applies these values and ethical principles to more specific situations which may arise in the practice of counselling.

B.2 *Issues of Responsibility:*

B.2.1 The counsellor-client relationship is the foremost ethical concern, but it does not exist in social isolation. For this reason, the counsellor's responsibilities to the client, to themselves, colleagues, other members of the Association and members of the wider community are listed under separate headings.

B.2.2. *To the Client:*

*Client Safety*

2.2.1 Counsellors should take all reasonable steps to ensure that the client suffers neither physical nor psychological harm during the counselling.

2.2.2 Counsellors do not normally give advice.

*Client Autonomy*

2.2.3 Counsellors are responsible for working in ways which promote the client's control over his/her own life, and respects the client's ability to make decisions and change in the light of his/her own beliefs and values.

2.2.4 Counsellors do not normally act on behalf of their clients. If they do, it will be only at the express request of the client, or else in the exceptional circumstances detailed in B.4.

2.2.5 Counsellors are responsible for setting and monitoring boundaries between the counselling relationship and any other kind of relationship, and making this explicit to the client.

2.2.6 Counsellors must not exploit their clients financially, sexually, emotionally, or in any other way. Engaging in sexual activity with the client is unethical.

2.2.7 Clients should be offered privacy for counselling session. The client should not be observed by anyone other than their counsellor(s) without having given his/her informed consent. This also applies to audio/video taping of counselling sessions.

*Pre-Counselling Information*

2.2.8 Any publicity material and all written and oral information should reflect accurately the nature of the service on offer, and the training, qualifications and relevant experience of the counsellor (see also B. 6).

2.2.9 Counsellors should take all reasonable steps to honour undertakings offered in their precounselling information.



### *Contracting*

- 2.2.10 Clear contracting enhances and shows respect for the client's autonomy.
- 2.2.11 Counsellors are responsible for communicating the terms on which counselling is being offered, and their expectations of clients regarding fees, cancelled appointments and any other significant matters. The communication of terms and any negotiations over these should be concluded before the client incurs any financial liability.
- 2.2.12 It is the client's choice whether or not to participate in counselling. Reasonable steps should be taken in the course of the counselling relationship to ensure that the client is given an opportunity to review the terms on which counselling is being offered and the methods of counselling being used.
- 2.2.13 Counsellors should avoid unnecessary conflicts of interest and are expected to make explicit to the client any relevant conflicts of interest.
- 2.2.14 If records of counselling sessions are kept, clients should be made aware of this. At the client's request information should be given about access to these records, their availability to other people, and the degree of security with which they are kept (see B. 4).
- 2.2.15 Counsellors have a responsibility to establish with clients what other therapeutic or helping relationships are current. Counsellors should gain the client's permission before conferring with other professional workers.
- 2.2.16 Counsellors should be aware that computer-based records are subject to statutory regulations under the Data Protection Act 1984. From time to time the government introduces changes in the regulations concerning the client's right of access to

his/her own records. Current regulations have implications for counsellors working in social service and health care settings.

### *Counsellor Competence*

- 2.2.17 Counsellors should monitor actively the limitations of their own competence through counselling supervision/consultative support, and by seeking the views of their clients and other counsellors. Counsellors should work within their own known limits.
- 2.2.18 Counsellors should not counsel when their functioning is impaired due to personal or emotional difficulties, illness, disability, alcohol, drugs or for any other reason.
- 2.2.19 It is an indication of the competence of counsellors when they recognise their inability to counsel a client or clients and make appropriate referrals.

### *B.2.3 To Former Clients:*

- 2.3.1 Counsellors remain accountable for relationships with former clients and must exercise caution over entering into friendships, business relationships, sexual relationships, training and other relationships. Any changes in relationship must be discussed in counselling supervision. The decision about any change(s) in relationships with former clients should take into account whether the issues and power dynamics present during the counselling relationship have been resolved and properly ended.
- 2.3.2 Counsellors who belong to organisations which prohibit sex with all former clients are bound by that commitment.

B.2.4 *To Self as Counsellor:*

- 2.4.1 Counsellors have a responsibility to themselves and to their clients to maintain their own effectiveness, resilience and ability to help clients. They are expected to monitor their own personal functioning and to seek help and/or withdraw from counselling, whether temporarily or permanently, when their personal resources are sufficiently depleted to require this (see also B. 3)
- 2.4.2 Counsellors should have received adequate basic training before commencing counselling, and should maintain ongoing professional development.
- 2.4.3 Counsellors are encouraged to review periodically their need for professional indemnity insurance and to take out such a policy when appropriate.
- 2.4.4 Counsellors should take all reasonable steps to ensure their own physical safety.

B.2.5 *To other Counsellors:*

- 2.5.1 Counsellors should not conduct themselves in their counselling-related activities in ways which undermine public confidence in either their role as a counsellor or in the work of other counsellors.
- 2.5.2 If a counsellor suspects misconduct by another counsellor which cannot be resolved or remedied after discussion with the counsellor concerned, they should implement the Complaints Procedure, doing so without breaches of confidentiality other than those necessary for investigating the complaint (see B. 9).

B.2.6 *To Colleagues and Members of the Caring Professions:*

- 2.6.1 Counsellors should be accountable for their services to colleagues, employers and funding bodies as appropriate. The means of achieving this should be consistent with respecting the needs of the client outlines in B. 2.7, B. 2.2.13 and B. 4.
- 2.6.2 Counsellors are encouraged to increase their colleagues' understanding of the counselling role. No colleague or significant member of the caring professions should be led to believe that a service is being offered by the counsellor which is not, as this may deprive the client of the offer of such a service from elsewhere.
- 2.6.3 Counsellors should accept their part in exploring and resolving conflicts of interest between themselves and their agencies, especially where this has implications for the client (see also B. 2.2.13).

B.2.7 *To the Wider Community: Law*

- 2.7.1 Counsellors should work within the law.
- 2.7.2 Counsellors should take all reasonable steps to be aware of current law affecting the work of the counsellor. A counsellor's ignorance of the law is no defence against legal liability or penalty including inciting or "counselling" which has a specific legal sense, the commission of offences by clients.

*Social Context*

- 2.7.3 Counsellors will take all reasonable steps to take account of the client's social context.

B.3 *Counselling Supervision/Consultative Support:*

- B.3.1 It is a breach of the ethical requirement for counsellors to practise without regular counselling supervision/consultative support.

B.3.2 Counselling supervision/consultative support refers to a formal arrangement which enables counsellors to discuss their counselling regularly with one or more people who have an understanding of counselling and counselling supervision/consultative support. Its purpose is to ensure the efficacy of the counsellor-client relationship. It is a confidential relationship (see also B. 4).

B.3.3 Counsellors who have line managers owe them appropriate managerial accountability for their work. The counselling supervisor role should be independent of the line manager role. However where the counselling supervisor is also the line manager, the counsellor should also have access to independent consultative support.

B.3.4 The volume of supervision should be in proportion to the volume of counselling work undertaken and the experience of the counsellor.

B.3.5 Whenever possible, the discussion of cases within supervision/consultative support should take place without revealing the personal identity of the client.

B.3.6 The ethics and practice of counselling supervision/consultative support are outlined further in their own specific code: the Code of Ethics and Practice for the Supervision of Counsellors (see also B. 9).

#### B.4 *Confidentiality: Clients, Colleagues and Others:*

B.4.1 Confidentiality is a means of providing the client with safety and privacy. For this reason any limitation on the degree of confidentiality offered is likely to diminish the usefulness of counselling.

B.4.2 Counsellors treat with confidence personal information about clients, whether obtained directly or indirectly or by inference. Such information includes name, address, biographical details, and other descriptions of the client's life and circumstances which might result in identification of the client.

B.4.3 Counsellors should work within the current agreement with their client about confidentiality.

B.4.4 Exceptional circumstances may arise which give the counsellor good grounds for believing that the client will cause serious physical harm to others or themselves, or have harm caused to him/her. In such circumstances the client's consent to a change in the agreement about confidentiality should be sought whenever possible unless there are also good grounds for believing the client is no longer able to take responsibility for his/her own actions. Whenever possible, the decision to break confidentiality agreed between a counsellor and client should be made only after consultation with a counselling supervisor or an experienced counsellor.

B.4.5 Any breaking of confidentiality should be minimised both by restricting the information conveyed to that which is pertinent to the immediate situation and to those persons who can provide the help required by the client. The ethical considerations involve balancing between acting in the best interests of the client and in ways which enable clients to resume taking responsibility for their actions, a very high priority for counsellors, and the counsellor's

responsibilities to the wider community (see B. 2.7 and B. 4.4).

- B.4.6 Counsellors should take all reasonable steps to communicate clearly the extent of the confidentiality they are offering to clients. This should normally be made clear in the pre-counselling information or initial contracting.
- B.4.7 If counsellors include consultations with colleagues and others within the confidential relationship, this should be stated to the client at the beginning of the counselling.
- B.4.8 Care must be taken to ensure that personally identifiable information is not transmitted through overlapping networks of confidential relationships. For this reason, it is good practice to avoid identifying specific clients during counselling supervision/consultative support and other consultations, unless there are sound reasons for doing so (see also B. 2.2.14 and B. 4.2).
- B.4.9 Any agreement between the counsellor and client about confidentiality may be reviewed and changed by joint negotiations.
- B.4.10 Agreements about confidentiality continue after the client's death unless there are overriding legal or ethical considerations.
- B.4.11 Counsellors hold different views about whether or not a client expressing serious suicidal intentions forms sufficient grounds for breaking confidentiality. Counsellors should consider their own views

and practice and communicate them to clients and any significant others where appropriate (see also B. 2.6.2).

- B.4.12 Special care is required when writing about specific counselling situations for case studies, reports or publication. It is important that the author either has the client's informed consent, or effectively disguises the client's identity.
- B.4.13 Any discussion between the counsellor and others should be purposeful and not trivialising.

#### B.5 *Confidentiality in the Legal Process:*

- B.5.1 Generally speaking, there is no legal duty to give information spontaneously or on request until instructed to do so by a court. Refusal to answer police questions is not an offence, although lying could be. In general terms, the only circumstances in which the police can require an answer about a client, and when refusal to answer would be an offence, related to the prevention of terrorism. It is good practice to ask police personnel to clarify their legal right to an answer before refusing to give one.
- B.5.2 Withholding information about a crime that one knows has been committed or is about to be committed is not an offence, save exceptionally. Anyone hearing of terrorist activities should immediately take legal advice.
- B.5.3 There is no legal obligation to answer a solicitor's enquiry or to make a statement for the purpose of

legal proceedings, unless ordered to do so by a court.

B.5.4 There is no legal obligation to attend court at the request of parties involved in a case, or at the request of their lawyers, until a witness summons or a subpoena is issued to require attendance to answer questions or produce documents.

B.5.5 Once in the witness box, there is a duty to answer questions when instructed to do so by the court. Refusal to answer could be punished as contempt of court unless there are legal grounds for not doing so. (It has been held that communications between the counsellor and client during an attempt at "reconciliation" in matrimonial cases are privileged and thus do not require disclosure unless the client waives this privilege. This does not seem to apply to other kinds of cases).

B.5.6 The police have powers to seize confidential files if they have obtained a warrant from a circuit judge. Obstructing the police from taking them in these circumstances may be an offence.

B.5.7 Counsellors should seek legal advice and/or contact this Association if they are in any doubt about their legal rights and obligations before acting in ways which conflict with their agreement with clients who are directly affected (see also B. 2.7.1).

B.6. *Advertising/Public Statements:*

B.6.1 When announcing counselling services, counsellors should limit the information to name, relevant

qualifications, address, telephone number, hours available and a brief listing of the services offered.

B.6.2 All such announcements should be accurate in every particular.

B.6.3 Counsellors should distinguish between membership of this Association and accredited practitioner status in their public statements. In particular, the former should not be used to imply the latter.

B.6.4 Counsellors should not display an affiliation with an organisation in a manner which falsely implies the sponsorship or verification of that organisation.

B.7. *Research:*

B.7.1 The use of personally identifiable material gained from clients or by the observation of counselling should be used only after the client has given consent, usually in writing, and care has been taken to ensure that consent was given freely.

B.7.2 Counsellors conducting research should use their data accurately and restrict their conclusions to those compatible with their methodology.

B.8. *Resolving Conflicts between Ethical Priorities:*

B.8.1 Counsellors will, from time to time, find themselves caught between conflicting ethical principles. In these circumstances, they are urged to consider the particular situation in which they find themselves and to discuss the situation with their counselling supervisor and/or other experienced counsellors.

Even after conscientious consideration of the salient issues, some ethical dilemmas cannot be resolved easily or wholly satisfactorily.

B.8.2 Ethical issues may arise which have not yet been given full consideration. The Standards and Ethics Sub-Committee of this Association is interested in hearing of the ethical difficulties of counsellors, as this helps to inform discussion regarding good practice.

B.9 *The Availability of other Codes and Guidelines Relating to Counselling:*

B.9.1 The following codes and procedures have been passed by the Annual General Meetings of the British Association for Counselling.

*Code of Ethics and Practice for Counselling Skills* applies to members who would not regard themselves as counsellors, but who use counselling skills to support other roles.

*Code of Ethics and Practice for the Supervision of Counsellors* exists to guide members offering supervision to counsellors and to help counsellors seeking supervision.

*Code of Ethics and Practice for Trainersexists* to guide members offering training to counsellors and to help members of the public seeking counselling training.

*Complaints Procedure* exists to guide members of BAC and their clients resolving complaints about breaches of the Codes of Ethics and Practice.

Copies and other guidelines and information sheets relevant to maintaining ethical standards of practice

can be obtained from the BAC office, 1 Regent Place, Rugby, CV21 2PJ.

Guidelines also available:

*Telephone Helplines: Guidelines for Good Practice* is intended to establish standards for people working on telephone helplines (sponsored by British Telecom). Single copies available from BSS, PO Box 7, London W3 6XJ.

APPENDIX 2

ASSOCIATION FOR STUDENT COUNSELLING  
A Division of the British Association for Counselling

GUIDELINES AND REQUIREMENTS FOR MEMBERS SEEKING ACCREDITATION

*Guidelines*

The Executive Council sees it as important that members should be free to choose the supervision that they feel is appropriate. The Council is nonetheless concerned that whatever supervision arrangements are made, particular attention should be paid to:

- (a) Case discussion focusing particularly on the working relationship between counsellor and client.
- (b) Consideration of the nature of each case and its impact on the counsellor, the caseload and caseload management.
- (c) Recognising and assessing the overall impact on the counsellor, the caseload and caseload management.
- (d) Helping in the understanding of the location of counselling work within institutional dynamics.

### *Requirements for Accreditation*

- 1.1 Current membership of ASC.
- 1.2 The Applicant should be employed as a designated Student Counsellor for not less than 8 hours per week.
- 1.3 *Either* completion of an extensive counselling training course *and* the equivalent of one year's full-time work as a student counsellor. Such training is likely to have been on full-time counselling courses of at least one year (or comparable part-time courses) or on courses in related fields such as clinical psychology or psychotherapy.
- 1.4 *Or* completion of three years work, full-time or equivalent, as a student counsellor and involvement in activities designed to promote professional and personal development.
- 1.5 Regular and continuing consultative support, usually designated "supervision", which has been in effect for at least six months prior to this application. (See also 2.3).
- 1.6 Attendance at conferences, courses, training events and workshops as part of on-going professional education. This may include personal therapy/counselling.

### *Requirements for consultative support*

- 2.1 It is a requirement that members choose for their supervisor an experienced practitioner in their own or related field. (e.g. clinical psychologists,

psychiatrists, psychotherapists). This person must not be an immediate colleague or a line manager, but someone from outside the counsellor's institution (see B.3.3 of BAC Code of Ethics for Counsellors). It is important that supervisors are sensitive to the institutional aspects of the counsellor's work.

- 2.2 It is crucial that supervision is both regular and readily available.
  - (a) Individual supervision of one hour should take place preferably once a week but at least once a fortnight for counsellors seeing 12 or more clients each week and at least once a month for those counsellors seeing fewer than 12 clients each week.
  - (b) Group supervision for counsellors should be weekly for at least one and a half hours and preferably in a group of no more than four, so that each counsellor can present casework once a fortnight. Each applicant should describe in detail the organisation and structure of the group supervision process and should also include the number in the group, frequency of presentation, etc.
- 2.3 Supervision arrangements should have been in effect for at least six months prior to this application. If supervision arrangements have recently changed, then information from both supervisors should be supplied.
- 2.4 Interruption of supervision may be acceptable without loss of accredited practitioner status under certain circumstances. Anyone wishing to request



this should submit plans to the accreditation committee specifying reasons and the period of time envisaged

### *Requirements of Accredited Members*

Accredited members are required to:

- (a) Conform to the BAC Code of Ethics and to have read the BAC Code of Ethics and Practice for the Supervision of Counsellors
- (b) Have access to medical and psychiatric consultancy for their clients.

*Note:* Accredited members are *strongly recommended* to have professional insurance cover, or a letter of indemnity, provided by their employers or through some other service. Members should make sure that this insurance or indemnity is sufficient for their particular needs. Accreditation does not imply acceptance of liability by this Association or by its sub-committee for claims against its members.

### *How to apply for Accreditation*

- 3.1 Complete the form "Application for Accredited Practitioner Membership".
- 3.2 Ask your supervisor to complete the counsellor's "Supervisor's Report".
- 3.3 Please ensure that you give your supervisor a copy of the BAC Code of Ethics for Counsellors, the

BAC Code of Ethics for Supervisors, the ASC Guidelines and Requirements for Accreditation and the ASC Supervisor's form.

PLEASE MAKE SURE THAT YOU AND YOUR SUPERVISOR SIGN BOTH FORMS.

After you have signed both forms, please return five copies of them to the Secretary of the Accreditation Sub-Committee.

### *Right of Appeal*

- 4.1 A member whose application for accredited membership is rejected has the right of appeal to the Chair of the Association, who will then set up an Appeals Panel to advise the Executive Council, drawn from accredited members who are not members of the Executive Council. Re-application for accredited membership may be made at any time after six months had elapsed from the date of the letter advising of the Panel's decision.

### *Notes*

- 5.1 Duration and cost: Accreditation lasts for five years, during the course of which members are required to notify the Secretary of changes of address, supervision arrangements and work. The charge for Accreditation is £ 7.00 to cover administration costs.
- 5.2 The ASC Advisory Service is available for consultation on any issues arising from these documents.

- 5.3 If your membership of ASC lapses, then your accreditation also lapses.
- 5.4 If you cease to hold a designated counselling post in an institution of post-compulsory education, your accreditation will lapse.

March 1992

## ITALY

S.M.G. ADAMO, University of Naples "FEDERICO II"

M. BOSINELLI, University of Bologna

P. VALERIO, University of Naples "FEDERICO II "

1. *The Italian educational context*

In Italy the educational system provides compulsory schooling for all students aged 6 to 13 (primary and secondary school). Having finished secondary school, students may choose one of three main curricula: the "liceo classico", the "liceo scientifico" or a technical or vocational school that takes 5 years to complete. Though such curricula favour learning specific and differentiated disciplines, they also provide the student with a general cultural background. The pattern that shapes higher education in Italy derives from Napoleon's and Humboldt's models, both having been devised to fulfill the needs of society's upper classes.

Once a student has passed the secondary school-leaving examination (meaningfully called "esame di maturità", i.e. "maturity examination") which usually occurs at about 18 years of age, under a law enacted at the end of the 1960s, the student can have access, regardless of the kind of studies carried out, to any University Faculty whatsoever, without having to pass an entrance examination, with the sole exception of the Faculty of Medicine which does require an entrance exam.

Therefore, the choice of academic career, which, as Noonan points out, constitutes "a crucial aspect in the definition of oneself as an adult" (Noonan, 1988), is dealt with in Italy by young people only at the time of their enrollment in the University. Psychologically, this factor has several consequences in terms of the timing and range of available further options. It allows young people, as far as the positive implications are concerned, to prolong their "breathing space" for thinking about a final decision but, on the other hand, it implies some risks, specifically because the choice the students are confronted with remains totally "open-ended", having no parallels in the external world which can be used by them as indicators and limits in the positive sense of the terms.

The openness and flexibility of the Italian University system are also enhanced by other factors like, for example, the very low cost of enrollment fees and the possibility for youngsters to keep their status as university students for a period of 8 years, without passing any exam. Thus access to university in Italy has been very easy in the last 20 years, particularly for lower-class students and for those coming from further afield (in Italy it is normal for students to attend the nearest available university, usually that of their own town). Since the number of professors has increased only slightly, the typical Italian student will study in a very large and overcrowded university (the Universities of Rome, Milan and Naples each have more than 100,000 enrolled students), where students are taught in large groups and relationships with professors are relatively impersonal.

In the Italian university students are left alone to cope with their academic lives (the tutorial activity, supported by a recent law, is actually being performed in a few universities on an experimental basis). Personal tutors who could help students see all possibilities, give academic

guidance, and advise them in the event of any difficulties which might affect their work while they are at university, simply do not exist. This is one of the reasons why the "state of health" of the Italian university system is not that sound.

In fact, if we take into consideration the relationship between the number of students who annually enroll in the university, which is relatively high and corresponds to approximately 73% of secondary school graduates, and the number of university students who actually complete their university studies and are thus conferred a degree, the figures are rather discouraging. For every student who manages to graduate from the university system in Italy, there are, on an average, 14.2 students who never complete the programme. These figures are even more disheartening when confronted with studies from other European countries like, for example, Great Britain and Norway, in which the ratio is 1 to 4 (Valerio et al. 1993).

Moreover, the data regarding the duration of the average university student's academic career reveal that only 13% actually manage to complete their studies within the officially established number of years. The figures, however, vary substantially from faculty to faculty. In the attempt to deal with these problems and to reorganize the Italian system of higher education, a Ministry was established in 1989, delegated with the specific task of evaluating and dealing with the problems related to the university and to the fields of scientific and technological research. One of the Ministry's specific functions is the programming and co-ordination of both scientific research and the development of higher education. This has been carried out almost exclusively within the public universities because, compared to other countries, the phenomena of private universities in Italy is quite marginal.

Following the introduction of recent reforms by this Ministry, the Italian institutions of higher education have been authorized to confer the following academic qualifying titles: Short Course University Diplomas, University Degrees, Post-graduate Diplomas and Doctoral Degrees (Table I).

- The short course university diploma (known as *Laurea breve*) corresponds to the first level of university education and has a duration of 2 to 3 years. The purpose of this degree programme is to provide students with the knowledge and methodology related to specific professional fields. Recently initiated in 1992, access to this programme is restricted to a limited number of students, who must pass the required entrance examination. All students who have completed their high school education and passed their school-leaving examinations are eligible to take the short course university entrance examination.

- The "diploma di laurea" (University Degree) corresponds to the second level of university education and the duration of the programmes varies, according to the Faculty selected, from a minimum of 4 years for the Faculties of Arts and Philosophy, Law, and 5 years for the Faculties of Engineering, Architecture and Psychology to a maximum of 6 years for the Faculty of Medicine.

As already noted, there is no entrance examination requirement for enrollment in the various faculties with exception of the Faculty of Medicine which establishes, on an annual basis, the number of students that can be accepted into the faculty on the basis of examination results and the resources available.

TABLE 1

ITALIAN UNIVERSITY EDUCATIONAL PROGRAMMES	
<i>Level</i>	<i>Typology</i>
I	Short course university diplomas
II	University degrees a) Doctorate programmes
III	b) Post-graduate Schools c) Short post-graduate courses

- The third level of university studies, that is the postgraduate schools (particularly predominant in the field of medicine) and the doctorate programmes, have an average duration of 4 to 5 years. All of them have very rigid entrance examination requirements, in part owing to the fact that there is a disproportionately high number of students competing for a limited number of available places.

The Post-graduate Schools offer advanced post-graduate professional training and the diplomas conferred after the completion of these programmes qualify the participants as specialists in their selected fields of professional practice. Students participating in these programmes receive remuneration.

The Doctorate programmes are finalized towards the training of future researchers for private research laboratories or for the university itself. Short post-graduate courses, which generally do not exceed one year in duration, are also considered to be part of level III of

university programmes. These courses respond to specific needs such as in-depth studies in a particular field, professional refresher courses designed to bring one's past studies up-to-date, and professional requalification programmes. Once the doctoral candidates have passed the entrance examinations, not only are they not required to pay any enrollment or tuition fees, but they receive remuneration for the entire duration of the programme.

#### *Psychological services for university students*

In the last few years the problematically high rate of University students who either are very behind or have dropped-out, has fostered great interest, especially by academic psychologists. Thanks mainly to their initiatives, some services have been set up in Italy for the specific purpose of giving psychological help to students with emotional problems and/or difficulties in pursuing their course of study. However, these services are rather different from the psychotherapy or counselling services organized within the American or Anglo-Saxon universities, as they have no formal organization and professionals working in them are clinical psychologists who are also part of the academic staff. Therefore it is not a very easy task to give an idea of the present situation of the counselling services for university students in Italy. The development of these services in Italy started, in fact, just recently and this means there is much interest in this field, but also that it is constantly evolving, therefore the situation is unsettled and incomplete.

There follows some general information about: a) the history and b) the organization of the Italian services. We will later describe some of them more in detail, before ending with some concluding remarks.

a) History of the psychological counselling services for university students in Italy

At present in Italy there are only ten or so universities in which students can find Psychological Counselling Services, and only a few of them have been operating for several years and are formally recognized. Italian law (no. 390 of 2.12.1991) quite unequivocally talks about tutoring and guidance activities and even supports, for the latter, a specific professional figure, i.e. the "consigliere d'orientamento" (career adviser), but it does not mention the psychological counselling activities for university students. The legislators tend to recognize only the need for removing "economic and social hindrances for the concrete realization of the right to university studies", and this is reflected by a similar carelessness of the academic institution for the psychological welfare of university students.

Unlike the Anglo-Saxon countries, for instance, Italian universities have not promoted any of the existing Counselling Services. Perhaps the non-residential structure of most of our universities plays an important role in this, as the young person's discomfort still has repercussions mainly on his/her family and not on the academic community (Adamo, Valerio, 1990). It has also to be considered that the economic and competitive motivations (Noonan, 1988) - which in Great Britain forced many universities, at least at the beginning, to establish counselling services for students, in order to hold back the phenomenon of academic failures and drop-outs with the subsequent loss in prestige and money - are absolutely missing in Italy. As we have already mentioned, most Italian universities are public, and a great number of "delayed" students, that is students who are far behind in their course of studies, are generally so isolated and depressed that they do not attend

their classes anymore nor do they sit their exams. This situation, paradoxically, may not affect the academic institution at all. These students are, in fact, a sort of invisible, non-demanding multitude that may, "swell the crowd" for academic authorities when it comes to requests for new space or for more teaching staff.

In addition to this, there are social motivations: in our country - like in others - youth unemployment is a major problem, and often university becomes a sort of unlimited parking area for young people.

In Italy, on the other hand, the students' initiative of promoting counselling services could not be undertaken directly by them - as happened, for instance, in other European countries - for here they are very much scattered and isolated, and are used to living their academic difficulties as a personal failure about which they feel guilt and shame.

The existing services, therefore, have been established on the initiative of individuals or groups of clinical academic psychologists who, conscious of the deep emotional dynamics that are often at the root of the academic failure, have tried to create counselling services for students in their Faculties.

Sometimes, as we will see, these Services originate from a widening, change or division of previously existing Careers Advisory Centres<sup>1</sup>. These centres, however, do not in any way resemble their counterparts in the Anglo-Saxon countries or in the other EEC countries owing to the fact that there is no organized, uniform guidance model. Furthermore, these activities are usually

<sup>1</sup> For a more detailed comparative analysis of the typology, organization and legislation pertaining to guidance counselling in Italy and other EEC countries, see AA.VV. (1982): *L'orientamento ed il Counselling nelle Università della comunità europea*, (Guidance and Counselling in the EEC Universities), Fratelli Palombi Ed., Rome.

carried out by university professors because, according to the law (D.P.R. nr. 382 passed 11/07/80), these activities fall within the realm of their official institutional duties. University guidance counselling services, run by the local Opera Universitaria and staffed with psychologists, social workers and guidance counsellors are very rare indeed and exist only in Parma, Pavia, and Milan.

In most cases, however, the existing services started to operate as Psychological Counselling Services and support no guidance activity within themselves.

#### b) Organizational models

As far the Italian situation is concerned, the organizational models adoptable by the counselling services vary among the following possibilities:

1) Fully private service, which benefits from its autonomy, but runs the risk of becoming a direct payment service for the clients;

2) Service having an arrangement with city or regional boards for the promotion of University studies (EDISU, Ente per il Diritto allo Studio Universitario, ISU Istituto per il Diritto allo Studio Universitario), whose main inconvenience is of being limited in time, though the arrangement can be renewed;

3) Service managed and directed by the University. This benefits from the involvement of the board in charge. Despite this, it is not easily possible in light of the present situation of Italian universities;

4) Service included in the national health service. This may seem, from one side, the most "natural" solution; from the other it involves the risk of an uncontrolled medicalization.

As far as we know, the last two solutions are not being adopted in any of the existing services.

Besides the funding and managing, the other crucial aspects for identifying the specificity of the Italian Counselling Centres for University students are, according to us, the following: the location, the training and role of the staff and the kind of the services provided.

We shall therefore discuss this issues more in details.

- Unlike other countries, counselling services are generally located within the university, in rooms made temporarily available by the Departments of Psychology and also used for scientific, didactic or other activities.

- The origin of counselling services for university students in Italy very much affects the qualification and the professional identity of the staff working in them. In most cases the staff is composed of academic (professors, researchers) and non-academic personnel with post-graduate training in Clinical Psychology, Systemic, Psychoanalytic Psychotherapy and so on. The professionals identify themselves as clinical psychologists, psychoanalytic psychotherapists and not as counsellors. Only recently (in 1989) a law was approved in Italy, which recognizes psychologists and psychotherapists as professional figures, and meanwhile the relevant professional registers have been established. Therefore at the moment the introduction, in our country, of a new professional figure, the counsellor, is unlikely to be considered, while it seems much more likely to work so that young graduates in Psychology acquire, during their 1 year compulsory post-graduate training, and above all during the post-graduate schools in various psychological disciplines, the necessary knowledge and skills for practising psychological counselling.

The provisions offered in the different services, even

if they vary in a few respects, have some elements in common:

a) access to the Centre is generally based on self-referral and the communication about the intervention results to third parties (family, medical doctors, academic community) is not supported;

b) a trend to emphasize typically "psychological" intervention and therefore to avoid any possibility of interpreting the service in medical, especially psychiatric terms;

c) the choice of adopting brief or very brief therapeutic interventions, which seem more suitable to the needs and defences of late-adolescents and young adults, and more realistic, due to the scarcity of professional resources;

d) in most foreign programmes, as well as in the scientific literature, the role of the counselling services for university students is not only identified through therapeutic interventions with individual students, but also in a preventive function of advice to the institution. From this point of view, the solutions adopted in the Italian Services are quite different, as in some of them this problem has been completely left out, while others took it on through an activity of academic awakening.

In all the cases we know of, however, the Counselling Service always plays a very marginal role within the academic institution, as it is often ignored or invested with negative projections (see Noonan, 1988), and the persons in charge of it never participates on any Faculty Committee nor are they consulted when it comes to making decisions regarding faculty life (unlike most US and UK programmes).



### *The national picture*

Following are some details on the Counselling Centres of the University of Bologna, Naples, Palermo, Pavia, Salerno and Rome that may, despite their specificity, be considered as exemplifying particular paths and general characteristics. What is more, they give a quite complete picture of the Italian situation with respect to the three regional areas (Northern, Central, Southern Italy), which are very different from one another. The authors would like to thank Professors L. Sarno, M. Spairani, G. Boggi Cavallo, M. Malagoli Togliatti for providing information about the University Counselling Services of Palermo, Pavia, Salerno, and Rome.

We think the crucial points to look at are the following:

- 1) year the activity started;
- 2) institutions involved;
- 3) staff qualification;
- 4) range of provisions.

Azienda Comunale per il Diritto allo Studio Universitario

UNIVERSITY OF BOLOGNA Psychological Help Service for University Students

*(Servizio di Aiuto Psicologico per Studenti Universitari)*

(Because the term "Counselling" cannot be easily translated into Italian, the Italian names for the Services have been included next to their English translations.)

The Psychological Help Service for University Students has been informally operating since the '60s and officially since 1985, after an arrangement with the local

Students' Affairs Agency. In this Service researchers of the Department of Psychology, as well as free-lancers, work on a part-time basis, most of them also carry out scientific, didactic and clinical activities.

Since 1985, 700 cases have been examined. Not less than 80% of them made use of a psychotherapeutic intervention. The setting is such that every student is interviewed three times by a therapist and then the case is discussed at the staff weekly meeting.

In a few cases the three interviews were sufficient to clarify practical and contingent problems, or to decide whether the case was to be treated within the service or outside it (e.g. psychiatric disorders, need for intensive psychoanalysis, etc.). Most of the cases have been handled with therapies of medium-long term, except for a few students who have experienced a short/focal therapy, and others who have attended group therapy or individual relaxation training sessions.

The future of the Psychological Help Service depends on a number of possible choices:

a) whether or not an activity of brief consultation, short treatments and referral is to predominate. This would allow for provision of help to a larger amount of students;

b) whether or not a specific clinical activity is to be made possible: this would probably imply the inclusion of drug prescription and more long-term psychotherapies; such an option could result in transforming a service of psychological help into a psychiatric centre;

c) whether or not more attention is to be given to the improvement of the socio-cultural conditions of the students: this could be obtained by means of offering strict

collaboration to the University administrators and to the City Committee for Students' Rights with a view to formulating a students' assistance reform programme. In the last few months such a programme has been tentatively initiated.

Ente per il Diritto allo Studio Universitario (EDISU Napoli I)

UNIVERSITY OF NAPLES "FEDERICO II"  
Psychological Counselling Service for University Students  
(*Centro di Consulazione Psicologica per Studenti Universitari*)

The psychological counselling service for university students was initiated about 10 years ago by the Chair of Psychology of the Naples University "Federico II" Medical School.

At the beginning the activity was carried out within the Psychological Help Service of the University Hospital, with no formal recognition. In 1991 this activity was formally recognized by EDISU, Naples I (Students' Affairs Office), which made an arrangement with the Psychology Divisions of the Department of Science of Human Communications and the Department of Relational Sciences. Its aim was to provide - every year - psychological help for 150 students of the 12 Faculties (where 100.000 young people are enrolled).

At present the Service is divided into three branches, which make reference to the two Chairs of Psychology of the two Faculties of Medicine and of the Faculty of Arts and Philosophy of the University of Naples.

The professionals are clinical psychologists, psychoanalysts and child psychotherapists psychoanalytically oriented. They work at the Service on a part-time basis, since they are professors and researchers of the University

of Naples, while free-lancers work at the Service once a week.

The Service has no proper seat, but uses the rooms and part-time administrative personnel of the Chairs of Psychology. Students come to the Service on their own initiative. When they register they are given information about the setting: the person in charge explains that they will be allowed up to four free sessions, after each one of which they must only sign a receipt for service.

The procedure and aims of the intervention are similar to those described by psychotherapists of the Tavistock Clinic (Copley, 1976, Salzberger-Wittenberg, 1977).

The technique is an adjustment of the psychoanalytic one and the aim of the therapist is to offer careful listening to the student's verbal and not verbal communications.

The main requirement of the intervention is to enter into an alliance with the adult parts of the client, in order to examine together his/her personal difficulties.

Other than clinical interventions, different initiatives are in progress at the Service for promoting its activities within the academic and the students' community, e.g. seminars held by experts on the emotional problems of university students and on the Counselling Service purposes. The main reasons the students came to the Service are: difficulty in studying or in interpersonal relationships, and psychosomatic disorders. Almost all students have attended the four sessions. Most of them, though, showed settled difficulties, and this - in some cases - made the operators suggest a follow-up in a few months time or, if necessary, they suggested psychotherapy (Adamo, Bacchini et al, 1992, Adamo, Valerio, Giusti, 1992). This is also the reason why at the moment, the operators of the Centre have started a collaboration with some professionals working in psychotherapy services within the University Hospital. The aim of this initiative is to provide to a number of students

a brief (individual or group) psychotherapy and to carry out research on the problems and possibilities of offering such interventions to University students.

Department of Psychology  
UNIVERSITY OF PALERMO Guidance Service  
(*Servizio di Orientamento*)

About three years ago, an experimental programme of training and requalification for "Guidance Service" psychologists started at the Psychology Department of the University of Palermo.

At the beginning this Service was intended for students who had passed their school-leaving examinations and were in need of guidance in their choice of faculty, on the basis of an aptitude test and with the support of information on the labour market.

The Service later extended its guidance activities to students who were still attending the last year of high school, and a similar project for compulsory education students is currently being studied. Such activity causes an enlargement of the operating range and an increase in the amount of services, but the intervention method as well as its philosophy remains unchanged.

Lately, however, the Service has been attended by students who, during the course of their university studies, have had troubles related to what they consider to be a mistaken choice of Faculty and who, therefore, seek for some help in order to revise the choice they had previously made.

In the development of this work there is evidence of problems which press for an accurate re-evaluation of both the requests and the actual counselling activities of Guidance Service professionals.

On this basis the Service professionals' training re-qualification was necessary, mainly in order to enable

them to acquire the assessment and clinical skills required by the changes in the nature and aims of the intervention proposed. This caused a progressive redefinition of the Service itself, which allowed it to expand beyond the limitations of a guidance activity meant to evaluate aptitudes, and made it turn more into a consultation centre for students.

The coordinators of the service activity and of the training project have progressively revised, in the course of this programme, the setting co-ordinates (contract, goals and intervention times), and structured a supervision activity related to the diagnostic tools and to the clinical relationship, in the course of which much attention is paid to the analysis of the counter-transference related to identify questions the "request" presses for, both in institutional (identity and extension of the service competence), and professional terms (technical-scientific identity) of the operators (psychologist, clinical psychologist, psychotherapist).

Istituto per il Diritto Universitario (ISU Pavia)  
UNIVERSITY OF PAVIA Students Counselling  
Centre (*Servizio di Orientamento*)

The counselling service for students who are going to enroll, or are already enrolled, in the University of Pavia was established in the early '60s in the university itself through guidance, so to say pioneer, programmes within the Institute of Psychology, with the financial support of the "Opera Universitaria", as it was then called.

In this primitive stage, a rigid psychometric/aptitude concept prevailed, integrated and supported, however, by the "interview" which made the most of the "relational" contact with the person to which "guidance advice" had finally to be given.

For students suffering from particular emotional problems (even with psychopathological symptoms) a specific mental health service was provided for at the Students' health service (belonging to the Opera Universitaria), with the twice-weekly presence of a psychiatrist, who continued his service even after the suspension of the Students' health service, which disappeared when it was absorbed by the National health service.

In the late '70s the Opera Universitaria (which then took the name of I.S.U.) passed into the framework of the regional "Ente per il Diritto allo Studio" (City Committee for Students' Rights/Students' Affairs Agency): the guidance, removed from the university institution, fell, to all intents and purposes, within the services supplied by this new institution.

In the meantime (early '80s) the guidance activity became more general, impersonal, greatly influenced by information under multi-media aspects, and aimed to reach virtually the entire student population in order to fight against the risks of the "intellectual unemployment". In the Pavia area, on the other hand, the individual counselling service has always been kept alive and active, in order to enable an approach based on psychological variables and aiming for the optimization of the ability and of the motivation of the individual student, both in completing the university experience and for the acceptability in the labour market.

Other than the guidance counselling, students can apply for a free psychological consultation with two Service professionals (psychologists - guidance experts, employed full-time by I.S.U.). By the mid-'80s, psychological counselling gained a particular value, in relation to the growing phenomenon of university drop-outs and failures.

As a result of accurate research made by the Service, in part relating to the Anglo-Saxon models (study skills),

and in part coinciding with experimental surveys on the student population, a series of techniques, methods and strategies (mostly inspired by cognitive psychology) were fixed: their aim was to help the student focus on his/her "studying method", and then bring it to perfection or adjust it to the academic system requirements.

This offer, designed, above all, for those who have difficulties and blocks in learning and usually fail exams, still today represents a resource of the I.S.U. Guidance Service of Pavia, and can meet the demand of 60-70 students per year.

On the other hand, it's impossible not to infer the existence of a much greater "underwater" need for help, which would be useful to bring to light and which would be necessary to work on. This is inapplicable within I.S.U., as the burden of the psychological consultation for study method (together with the massive job for guidance) is on the only psychologist currently employed and in charge of the Guidance Service.

What is generally missing, in the entire national sphere, both at public and private level, is a rational policy that supports the needs and problems of young people, and aims not only to buffer peculiar and dramatic situations of marginality, but must also be able to comprehend the right of the "normal" young person to be cognitively and emotionally helped in the search of his/her identity and in the optimization of him/her self.

Department of Educational Sciences  
UNIVERSITY OF SALERNO Psychological Help  
Service (*Servizio di Aiuto Psicologico*)

This Service, established in 1989, is a multidisciplinary team in which psychiatrists and psychologists with different theoretical and methodological approaches work. This

peculiarity represents - at this initial stage - an enrichment as well as an incentive for the professionals working in the counselling activity to confront themselves, without jeopardizing the basic agreement on the aims the Service sets with respect to the clients' psychological needs.

The Service is currently operating on the basis of an arrangement between the Department of Educational Sciences and the local Opera Universitaria (Students' Affairs Agency). The professionals, working on a part-time basis, are professors and researchers of the Chair of Psychology, as well as free-lancers. The aim of this Service is to provide the students, within the university, with a "space" to which they can turn, in critical moments of their lives, and find qualified people willing to listen to them.

The activities of this Service presently consist in cycles of 20 psychotherapeutic weekly sessions over a period of 5 to 6 months, and is provided at absolutely no expense to the students. Those cases which require either more prolonged treatment or medication are generally referred to other non-university organizations, where more appropriate and specific treatment is available.

Faculty of Psychology  
UNIVERSITY OF ROME "LA SAPIENZA" Clinical  
Centre (*Centro Clinico*)

The psychological counselling activity for students of the University of Rome is now being carried out in a very informal way among the activities of the Clinical Centre of the Faculty of Psychology. This Centre was established in 1986 to provide a series of psychological interventions not only to single clients, but also to various professionals (medical doctors, paramedicals, teachers, social workers), working in activities related to drug addiction, learning problems, or psycho-social distress.

In retrospect we saw that many of the clients who came to the Clinical Centre were university students, enrolled in the Faculty of Psychology or in other Faculties. The Centre is one of the few services in Rome that can provide psychological help that is not aimed at meeting the demands of people suffering from serious psycho-pathological problems, and therefore does not subject "normal" clients to the subsequent stigmas associated with centres where those kinds of mental disorders are treated.

The spontaneous referral of so many university students made the Centre professionals think of the possibility of creating a Service specifically designed for them. In this Centre psychoanalytic or systemic psychotherapists are employed, as well as trainees of the Faculty who collaborate on a part-time basis. Due to the peculiar milieu of the Faculty of Psychology, students attend sessions only with personnel not involved in academic activities, in order to avoid confusion and superimpositions between training and discomfort with personal training and offer the student a place to develop their emotional life.

As far as their problems are concerned, it is interesting to stress that, while Psychology students ask for psychological help for problems primarily connected with difficulties they face in the course of their studies - and only after several sessions they show also emotional, relational and affective problems - students from other Faculties come to the Centre clearly showing emotional problems, to which difficulties in studying are subsequently connected.

### *Conclusion*

As we have described, psychological Counselling Services for University students have been established very recently in our country. With the exception of the centres

of Bologna, where this service informally started in the '60s, and Naples, which has been operating for the last 12 years, the other Counselling Services have been established within the last 3 or 4 years and some of them are now on their way to their formal recognition.

From this point of view, the experience of Rome represents a much wider reality; in fact we receive requests with increasing frequency for information and exchange of views from colleagues who are working in different universities and wish to establish Counselling Services for their students.

The centres of Pavia and Palermo exemplify a different situation for they were established in the '60s as Guidance Counselling Services but, further to an internal evolution and/or to the pressure of the students' demand, their activity range has been extended, in fact, to psychological counselling interventions.

As far as staff and services are concerned, uniformity rules among the Services we have described. In almost all of them very qualified - from the training point of view - personnel work.

These professionals, however, do not identify themselves with the role of counsellors, but in that of clinical psychologist, psychotherapist, etc., even if they are aware that it is necessary to adjust their traditional tools and techniques to the institutional context, to the clients' age and problems, and to the brevity of the relationship.

Psychodynamic prevails over all theoretical orientations, even if others are used as well (systemic, cognitive, behavioural). Some centres are homogeneous, as far the theoretical orientation is concerned, while in others professionals have different backgrounds and confront themselves with the problems and potentialities caused by the variety of approaches and offers.

Almost all the services described are financed by city or regional boards for the promotion of university studies (ISU, EDISU). This permits, as we have seen, a certain autonomy from the academic institution, and also prevents the Service from taking on an excessively medical approach, but on the other hand these arrangements must generally be renewed every single year.

We would like to conclude with an optimistic comment: psychological counselling for university students has been the main subject of several scientific congresses and meetings held in Italy in the past few years and that testifies to the growing interest in our country for this area of work and research but there is much left to do.

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## NETHERLANDS

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*1. Educational context*

Student psychologists are mainly attached to Universities. As yet this facility is scarcely available at Schools of Higher Vocational Education (HBO institutes). The description below is therefore concerned with the situation at universities. Most universities in the Netherlands consist of various faculties and offer an extensive choice of courses. Some universities confine themselves to a number of specific subjects, e.g. medicine or economics. There are also a number of Technical Universities.

*2. Age groups/kinds of degrees/entry requirements*

In order to be admitted to university, a student must have completed pre-university education at advanced level (in Dutch, the so-called 'VWO'), through six years of secondary education following primary education. Other educational 'routes' are also possible: five years Higher General Secondary Education (in Dutch: 'HAVO') and one year HBO education may also give entry to university education.

It is also possible to go to university by taking a so-called 'colloquium doctum', a special entrance examination.



A student beginning his or her studies is usually 18 or 19 years old. Recently the study programmes have been reduced to a four-year curricula. In general a student may receive a grant for five years at most in order to complete his or her studies. Most students therefore graduate when they are about 24.

Besides a VWO diploma each study programme has its own supplementary requirements concerning the subjects chosen at VWO.

Within a study programme two examinations are possible: the 'propaedeutic' examination, i.e. the first year examination, and the Master's exam.

Several studies offer the possibility of a so-called 'second phase', in which the emphasis is on acquiring professional skills.

### *3. Responsibility for psychological needs of students*

Student psychologists are mainly responsible for these needs.

Yet in a wider context this responsibility also lies with lecturers, tutors (officials attached to their own particular study programme to whom the student may turn with various questions about his or her study (progress), and ombudspersons (external officials who act as independent advisers concerning particular practical/material problems). Contact and referrals between these services are possible.

For a more detailed description, see paragraph 8.

### *4. Institutional attitudes*

The attitude of the governing bodies towards this work differs slightly from institution to institution, but

all institutions have this facility. However, the nature of the service available per number of students varies and in the last few years budgets have been reduced considerably.

From time to time the student psychologists are under review in each institution. The Board of Governors of the universities are especially very critical at this time. Various sections within the university (e.g. lecturers or tutors) often react against this criticism. It always turns out that the facility is indispensable. Generally speaking it can be said that thoughts of reducing the provision or discontinuing the service are always based upon financial reasons, whereas the arguments for maintaining the service are in relation to content and practice.

### *5. Range of services/environment/location*

As well as a student psychologist service each institution has an office of ombudspersons, a study information centre, and often a study skills training service. These are often central facilities that operate separately from the Faculties.

Accommodation is often shared with other central facilities.

Most bureaux have their own secretariat/administrative staff.

### *6. Range of provision*

In the Fifties the students' psychologist was described as 'a counsellor for self-selection', self-selection meaning 'choice of study'.

According to this line of thought psychological counselling was embedded in the study environment. Gradually the field of activity has extended to all kinds

of problems that are connected with the student's studies and social environment.

The student psychologist mainly has a primary function. Visiting a student psychologist is always free. The fact that this kind of counselling is offered within the student's study and social environment means that students decide more easily and of their own accord to go to a student psychologist. Long term assistance is not within a student psychologist's remit.

### *Responsibilities*

Not all student psychologist services have the same set of responsibilities. For example, at some universities other facilities are responsible for psychological testing or this is referred to other non-academic institutions in the area. The same goes for study skills: they are not always within the responsibilities of a student psychologist service.

These differences in responsibilities are a result of local developments.

### *Procedures*

At some student psychologist services, students call in at any time during office hours. At others the first counselling takes place by appointment.

Most student psychologist services use a clear-cut registration procedure. This means there is a clearly recognizable phase of intake. The resulting decision whether or not to treat someone is first discussed with the client before a final decision is made.

Some services use a more open procedure in which the difference between intake and treatment is clearly less defined. Nevertheless this method also means that any referrals are discussed with the client.

Reports mainly serve as a reflection on the psychologist's own thinking, and as a mnemonic device.

Reports concerning advice or decisions as regards referral only are presented to the internal (registration) staff. It is only with the student's knowledge and permission that consultations regarding content can take place with a third party.

Most clients are treated individually. The number of consultations usually lies between three and seven. Many consultations are of an advising, guiding, or supporting kind. In addition there may be a short therapy which focuses on one particular problem. Long-term individual treatment takes place in only five percent of the cases. In such cases, long-term work is mostly concerned with the strong connection between study environment and neurotic problems.

Group therapy takes place in thematic groups based on one common problem, such as fear of exams, assertiveness, or choice of study.

Internal referrals frequently take place between student psychologists, ombudspersons, tutors, student pastors, and student doctors. This enables an optimal service to students. The regional institute for mental welfare (in Dutch: the RIAGG), outpatients' clinics of psychiatry in hospitals, and other forms of outpatient mental welfare are most appropriate in cases of external referrals.

Psychological testing takes place especially to verify the correctness of the proposed choice of study. Test results are not used to compel someone to follow a certain direction. Tests are also held to determine what is the most suitable kind of therapy.

In some departments student psychologists supervise trainees from Social Science faculties. There is also the possibility of post-graduate supervision in the case of young and less experienced colleagues. The expertise of

student psychologists is also called upon outside their own department, but within the university. This is particularly the case in matters concerning training and consultation with regard to faculty counselling. Student psychologists often offer ombudspersons and teachers/tutors a kind of *in-service-training* on the subject of counselling techniques and problems with adolescents.

### 7. Funding

All departments are paid for by the university: accommodation, salaries, assistants/secretariat, running costs. Some activities sometimes involve a small contribution by the student.

### 8. Links and qualitative differences between the services

Within his or her department the student usually has two advisers he can approach:

- The *lecturer*: for information and problems concerning his or her subject, and for choices and progress within his/her field of study.
- The *tutor*: for information on studies, timetabling, study progress, options (specialities), special circumstances.

Outside his or her department, in addition to the student psychology service, usually a number of other services are active on a central level:

- The *ombudspersons*: independent advisers in cases of complaints, matters concerning enrolment, financial problems, consequences of switching, work load, and suchlike.

- A *study information centre* or a *vocational bureau*: offers information on studies in higher education, the possibility of taking tests as regarding choice of career and to consult a careers adviser.
- A *study skills service*: offers courses in the field of studying effectively, writing (extended) essays, study planning, reading papers, and suchlike.

The institutions differ with regard to any cooperation between the services, chiefly because of local conditions, e.g. whether or not they are accommodated in the same building.

In any case, the possibility remains of referral between the parties, and sometimes they even pursue the same policy or information.

### 9. Links between different activities

From the list of the activities that offer direct assistance to students, the following three may be highlighted:

#### *Prevention:*

By paying attention to, and observing, trends which develop in the academic environment, one tries to prevent or change negative circumstances in the study situation. Preventative activities by student psychologists include:

- (1) registering,
- (2) observing,
- (3) advising,
- (4) equipping and supporting students/ombudspersons/lecturers,
- (5) carrying out research,
- (6) publishing.

#### *Research and publication:*

Various problems among students are being researched (e.g. fear of failure, procrastination) which often result in publications.

#### *Policy*

Student psychologists take part in policymaking by advising the authorities about students' study situation and their way of life, or by taking part in the activities of advising bodies.

#### 10. *Recurrent problems in students using services*

Student psychologists are mainly involved with the following problems: choice of course, studying, graduation, fear of exams, separation (from parents/guardians), making contact, and questions concerning identity and meaning (of life).

As well as emotional and relationship problems, those concerning studying and choice of course are the most frequent within all services. Psychosomatic complaints are also common. Asking for help appears to be difficult for many people. Although the barrier is not as high compared with non-academic counselling, many people still experience an initial hesitation.

#### 11. *The national picture*

There are 13 universities in the Netherlands which nearly all have a student psychologist department.

However, the provision per number of students is rather different for each service, viz. 1 psychologist per 2,000 to 1 psychologist per 5,000 students.

Roughly speaking, about five to ten percent of all students register at a student psychologist service at some time during their studies.

The relatively short time of treatment (mostly less than ten consultations) again shows the primary function.

In order to draw a picture of student psychologists in 1993 it is also important to mention various changes that have taken place in the last decade.

A number of revisions of the law in the Eighties have caused important shifts in various areas. Shortening the curricula of study programmes, changing the function of the first year's 'propaedeuse', organization of much changed study programmes, and faculties and departments becoming more responsible for students' study progress have undoubtedly influenced various fields of activity for the student psychologist.

This influence has shown itself in some shifts of emphasis. The most striking trend is the emphasis on the educational and study-oriented nature of the student psychologist function. It can be said that assisting the student in his process of 'self-selection' is emphasized more than it was. More attention is being paid also to study skills: as a result of the reduced study programmes' curricula there is less time for the student to master his other subject matter. More attention is being paid to a uniform registration system of clients so that clear overall (national) pictures may arise. In this way more opportunities are created for research and publication.

The role of the tutors within the faculties has become more important. To support these tutors, the student psychologist departments offer them an increasing number of training courses.

As regards treatment there is a clear emphasis on short-term treatment. In addition more and more groups are being formed which focus on one particular subject,

like choice of studies, fear of exams, procrastination, or assertiveness. In order to lead these thematic groups it is essential to have knowledge of the functioning of groups. The ability to lead discussions, knowledge of the ins and outs of the processes that are involved in making choices, understanding the contradictory inner needs of young people, and last but not least experience in handling principles concerning behaviour therapy and interaction are equally important.

Important new ways of dealing with problems which student psychologists offer, are information leaflets and computer-controlled assistance programmes which focus on specific issues.

#### 12. *Training: current training and qualification of counselors*

The professionalism of student psychologists is first of all seen in the fact that a completed university education is required involving certain specialities which focus on assisting young adults. It is desirable to have completed an advanced study which leads to being registered as a psychotherapist. The professionalism of student psychologists is furthermore seen in the fact that they follow or have completed post-graduate therapy trainings. The most common trainings are Behavioural, Rogerian, Group, and Psychoanalytic therapy. For all these trainings students' psychologists at nearly all universities get (limited) facilities. The outstanding characteristic of student psychologists compared with other psychologists is that they have a relationship to the *educational process* in which the students participate. Where interventions are concerned, they can take into account the student's particular context, e.g. a specific study programme.

## SPAIN - PORTUGAL - IRELAND

### Spain and Portugal

Despite many efforts we were unable to find representatives from Spain and Portugal to attend our meeting in Naples. Since then we have made contact with individuals in these countries and what follows is their response to our request for information about the practice of psychological counselling. It is good that we have now made contact and will be able to include these people in any future work.

### PORTUGAL

GRACA FIGUEIREDO DIAS, New University of Lisbon

I sent a questionnaire to all universities but only received two answers, which did not cover the points you wanted to know about. Nevertheless I decided to inform you of the "picture" I know about Portugal.

There are only two universities in Portugal with psychological counselling for university students. One is at Porto University where there is one psychologist working in the context of the University Medical and Social Services, the other is the Service where I work, which is located at the Faculty of Science and Technology at the New University of Lisbon and is directed only to its students.

There are several other Psychological Services which are linked to the various faculties of Psychology, but who are not particularly directed towards university students. Their services are open to the local communities as well

as students. The counselling is mainly done by the senior psychology students as part of their training and they are supervised by psychology faculty teachers.

There are no institutional links between the services I have mentioned.

With this poor overall view I don't think it is worthwhile to give much detail about my own service. The faculty has around 3000 students (mostly of the traditional age range). I am the only full time psychologist in the service and answer directly to the Dean of the Faculty.

The general attitude of the academic staff towards the service is, as I think is usual, ambivalent.

I do mostly psychological counselling within a psychodynamic frame of reference and a little vocational and educational counselling. The recurrent problems of students (those students who are not ill) are mostly linked to insecurity, autonomy and relationships.

Concerning the future I don't think it will become better as with the economic recession even some medical services for students have been closed.

## SPAIN

FRANCISCO RIVAS, University of Valencia

ELENA DEL CAMPO, (National Distance Learning University of Spain) U.N.E.D.

### *Psychological and vocational counselling services in higher education: normative laws*

Since 1970, Counselling and Guidance activities for different educational levels have been cited in the Education Reform Law (Ley General de Educacion). This includes Higher Education (Article 9. 4, 125. 2 to 127).

In the COU (Curso de Orientacion Universitaria) which co-incides with the final part of the secondary school syllabus and forms the preparation for entering university, some vocational studies are included. The provision of the COU is the individual responsibility of the universities and, consequently, each institution organises conferences providing information for students; publishes guide books and prepares and administers attainment tests for university entrance. The COUs are provided by the universities' administrative services and do not offer any educational psychology or welfare help to students. For students participating in the COU in 1972 (RD, August 1972), there was the experimental provision of educational and vocational services. There was one counsellor provided for every 300 students. There were no positive outcomes and the experiment was discontinued.

Some other universities implemented the Ley General 1970 (D/1678/69) and supported educational reform by

establishing Institutes of Educational Science (ICE) which perform a large role in assessment and guidance programmes. Each ICE is allowed to take different approaches. For instance, since 1971 the ICE at the Polytechnic University of Valencia has put into operation counselling services for its university students. Other institutes such as the one at the University of Zaragoza operate a vocational programme for COU students entering the University. In general, services operate in secondary school programmes but not in higher education.

In the University Law of 1982 (Ley de Autonomia Universitaria) there are no references made to counselling services for university students. In practice, the attention paid to the needs of students depends on different departments or "Vice-rectorats", student teaching etc. but there are no psycho-educational services.

Only 12 out of 42 universities have an information and guidance centre (COIE) dedicated to job seeking, academic information and so on. The staff of these centres deal with administrative issues but do not offer individual psycho-educational treatment or guidance programmes.

To sum up, there are no established counselling or vocational services in higher education in Spain. At this educational level there are very few services and the expenditure on any academic support services is very low. This is very much the "Mediterranean model" described by Mora et al. in his 1993 publication on the funding of the University of Valencia. It was commented on in an earlier publication in 1989 that there were some specific initiatives in this area but with no permanent services emerging even though there was a high level of research in vocational psychology being carried out by various departments in some of the universities.

The Universities of Valencia:

We will describe briefly attempts to create vocational and personal guidance services. The following are based on investigations carried out in the universities in Valencia.

Polytechnic University of Valencia:

In 1971, and subsequently, The Departamento de Orientacion (Guidance Department) supported by the ICE has been offering university counselling for engineering students. Psycho-educational professionals work with students in higher education in this service. Individual psychological assessment of attitude, aptitude and interests are carried out and technical reports are made for the university administration. The service was supported by the results of investigations carried out by Rivas in 1976 and later studies by Zaragoza in 1981 and Fernandez in 1987. The service has survived and continues to operate as an individual and vocational service.

University of Valencia (Studi General):

During the academic year of 1983-84, The Educational Psychology Department (see Rivas 1984) created a university advice programme (Programa de Asesoramiento Universitario) (PAU-84) which was directed towards the needs of students entering university in that particular academic year. The experience of this experiment made possible the completion of six doctoral dissertations on vocational psychology and the Vocational Assessment System was created. The level of satisfaction with the service, which was evaluated by nearly one thousand students, was 8.5 on a scale of 0 to 10. However, this programme existed for that year only and no other vocational services have been created subsequently.

(As a footnote to the above, there is, at the moment, another vocational programme - the SAV-90 - which has

been in operation in most secondary schools in Spain and is used as a means of disseminating information.)

University Jaime I of Castellon:

Since its creation in 1991-92, the university has had a Department of Academic and Vocational Advice. This department offers psycho-educational services, vocational information, and job search for students.

National Distance Learning University of Spain (U.N.E.D.):

The special characteristics and organisation of UNED, i.e. those characteristics of distance-learning, require different teaching methods from those of a traditional university. As a result, the helping services for students are basically in academic counselling but do not employ a psycho-educational perspective.

The General Education Law 1970 (Article 47.1) allowed The Educational Bureaux (MEC) to regulate the various forms of teaching used in correspondence, radio and TV courses. The 1971 Normative Law (Article 1.106) created a management committee to establish teaching methods and goals for distance learning, including in higher education. The Normative Law of 18-08-1972 (Article 2.310) created UNED and, in this law's preamble, the need to develop one of the basic principles in educational reform is underlined i.e. that in order to ensure equality of opportunity in education it is imperative that means are developed to ease entry to university education for all people with impediments such as work commitments, geographic distance from university centres or anything else which makes it impossible to come to university classrooms.

Academic counselling is provided by UNED in 71 associated centres in different cities within Spain and a further 9 in foreign countries. The counselling is done by teachers and focuses on academic difficulties and gives information on the different courses available. There are no psycho-educative or vocational services for UNED students.

It is our opinion that there should be cooperation between national and international UNED organisations which have counselling services and support services. This would make possible an enhancement of relationships and the development of financial help for both Spanish students and counsellors as well as students and counsellors of different countries. This cooperation would allow us to have a homogeneous profile of all European counsellors and their function and, as a result, European counsellors would have a valuable store of knowledge, especially in the areas of academic and cultural differences.

The compilation of papers, such as the ones included in this publication, and the setting up of conferences by FEDORA all help towards creating favourable conditions for the fruition of ideas such as the one we have put forward above.



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## SPAIN

ROSA MO. Raich, Autonomous University of Barcelona (UAB)

### 1. *Short paragraph on the Educational Context*

The UAB is one of five universities in Barcelona. This year is the 25th anniversary of its foundation. The number of students is 30,000 and there are 3,000 staff including teachers working in the UAB. We have one Faculty of Psychology with approximately 2,300 students.

The "Servei de Psicologia Aplicada al Campus de Bel-laterra" is has as its focus student needs both in terms of orientation and psychological intervention as appropriate.

### 2. *Age groups, kinds of degrees*

Our students have under-graduate and post-graduate degrees (Master and PhD). The mean age at entrance is 18 and most students will finish by the time they are 23. However we have also some students of 25 years of age and upwards.

### 3. *How selective are universities, i.e. are there entry requirements?*

All university students in Spain need to pass an exam to enter in the university (Selectivitat). The mark of this exam plus the marks of the high school play an important

role in the entry requirements for different faculties. Some of them expect a higher level than others.

4. *Who takes responsibility for psychological needs of students?*

At the moment we have no institution which takes responsibility for the psychological needs of the students, but in the future we hope that our centre will play this role.

5. *What are the institutional attitudes to this kind of work?*

At the moment the authorities in our University are very interested in having this psychological centre.

6. *Range of services offered and their environment and location*

The services we propose to offer:

- a. Orientation and Counselling
- b. Intervention in problems like stress, sleep problems, eating disorders, depression, anxiety, drug abuse
- c. Preventative activities especially on drug abuse
- d. Special attention to activities for handicapped students

7. *Funding*

We hope that we will have the help of our government to establish this Psychological Centre.

8. *Links between student services if counselling is a separate activity*

We will establish links with the University Health Service.

9. *Training—current training and qualification of counsellors*

Initially the counsellors will be teachers from within the faculty and the Faculty of Medicine. In addition the postgraduate students will have practice placements in this centre under the supervision of the teacher practitioners.

10. *The Following are all under discussion*

- Range of provision
- Qualitative difference between the services
- Links between different activities
- Recurrent problems in students using services
- The national picture—an overview of provision

## IRELAND

Annette McGee from City University in Dublin was an enthusiastic member of our first meeting in Amsterdam. Unfortunately she was, at the last moment, unable to attend our meeting in Naples. Since then we have had difficulty in finding someone from Ireland who was willing to prepare a paper describing the system there. Understandably people who were not part of the development of this project were reluctant to commit time and energy to it in the final stages. We thank Collette Aungier, Vice President of FEDORA, who attempted to persuade her Irish colleagues on our behalf. We trust that, in the absence of a paper, Irish counsellors will accept the following comments.

Although the context of the Irish education differs in many respects from that of the United Kingdom there has been a long tradition of students crossing the Irish Sea (in both directions) to enter university. It will be seen, therefore, that although school education, examination systems and the structure of higher education may differ in the two countries, the similarities are such that the two systems are compatible.

Similarities can also be found in the practice of student counselling. In some universities in Ireland there is an integrated student services provision and in some the Counselling Service will be a separate department.

Training for Irish Counsellors would in the main parallel that of their British counterparts and it is not unknown for Irish counsellors to be members of the Association for Student Counselling in Britain in addition to their own Irish Association.

Whilst allowing for the differences in cultural experience anecdotal evidence would indicate that the range of problems presented by Irish students, the strategies used to deal with them and the theoretical orientations on which these strategies are based would echo those described in the British paper.

## CASE STUDIES

## SHORT-TERM GROUP THERAPY USED FOR STUDENTS WITH EATING DISORDERS (Bulimia)

JETTE RYTKE, University of Aalborg, Denmark

The following case is a description of a short-term group therapy practised with 4 female students with severe symptoms of eating disorders. It is important to emphasize that the students all suffered from bingeing/vomiting cycles, and not anorexia nervosa, as we believe this kind of short-time group therapy cannot be used as a treatment for students with anorexia nervosa.

The planning and the implementation of the group therapy was inspired by the results of M. Boskind-White and W.C. White developed at the Cornell University Clinic in New York dealing with university students with bulimia. ("Bulimia. The Binge/Purge Cycle", New York, 1983). This case should be regarded as an experimental effort to find alternative treatment to an increasing problem amongst female students seen in student counselling.

### *Description of the participants:*

The female students (ages between 23 and 25 years old) had suffered from eating disorders for 1 to 5 years. Some of them only suffered from the bingeing/vomiting cycles in periods of stress with daily eating orgies. Some of them had had eating orgies several times a day. The eating pattern had a continuously restrictive influence on their social life and their ability to study, at the time when they consulted the Student Counselling Service.

The achievement level of these students was very high. They all struggled for A-marks, and receiving a B-mark could start a new period of a daily eating/vomiting pattern. They were all very intelligent girls, with very high ambitions concerning success-rate, and thereby every single unfortunate incident and every defeat suffered was very painful. The feeling of loss of control during the eating orgies was typically transformed into a general feeling of not being responsible for their own actions, as if another person was doing the overwhelming eating for them. All of them were very ashamed of their abnormal eating and were often very lonely, knowing well that an apology sent to a party would be a direct opportunity for a lonely, secret evening of eating. The self-confidence of the girls was very low. Because of the unrealistic goals which they had set in their lives, in relation to performance and appearance in social situations, they were never satisfied with whatever they were involved in.

#### *Preparation for group therapy*

To prepare the students for group-treatment they were given between 2 and 6 individual interviews before starting in the group. This meant they were eager, anxious and motivated to give it a good try. The therapist put forward the view that group therapy was *the* treatment to solve eating problems, and as a result a fifth student chose to reject the treatment offered to her. Motivation and a strong will to change the eating pattern is important, as emphasized by Boskind-White and White (p. 119, the Danish translation).

Each of the students had been informed that the treatment would last 8 sessions (one and a half hour each time) with an interval of a fortnight between the group-sessions.

#### *Introduction of the group therapy*

The group therapy was introduced by the two therapists (a psychiatrist and a psychologist) with firm and careful instruction as to the main idea behind the short-term model. It was introduced as a treatment of a finite number of sessions, i.e. 8. We emphasized that it was an experimental treatment, and that focusing on alternative behaviour and reactions would be important. It was rather anxiety-provoking to offer alternative coping mechanisms in order to break the painful eating disorders, but the principles of the group therapy were presented as an option, not as a must. Each student in the group was asked to give it a try. The students already had their well-established eating-patterns to lean on, if all else failed. It was a rather harsh introduction, but the idea behind this clear instruction was that each student should take the responsibility to promise only to give it a try. The notion of emphasising personal responsibility was very important as a general objective in the group therapy because of the advantages derived from regaining self-control and developing a belief in their own decision making capacity. Dealing with decision making was always a major topic and was sustained throughout the group process.

#### *Individual therapy within the group:*

On starting the group therapy it was very important to obtain a feeling of being in contact with each others' eating problems, resulting in a feeling within the group that, "We *do* have something in common". The extent of the individual's disorder is especially the subject of a great deal of curiosity in the first sessions, how and when, and in what amount etc. These were very competitive students, and therefore, not surprisingly, they were also interested

in reaching good and quick results in getting better. This is a serious pitfall for the therapist to get caught in, because a sudden recovery can often turn out to be a repetition of the pattern: "Tomorrow I will start my new life!"

In order to avoid the competition for quick results between the students, it was very important that each of the students found her own personal strategy for reinforcing her struggle to break the destructive eating-pattern. The therapists had to support every single effort by each student to find a more realistic strategy in her life, not by living in the past and not by living in the future, e.g. "If I could only lose weight, my life would be better", or for the past, "If I had had a happier childhood, with loving parents, I would never have messed up my life like this".

An important factor in this short-term model is that there is no point in searching for profound reasons in one's childhood for explanations of the actual eating behaviour. A point that has been empirically proved by more than 2000 women with bulimia, is that "It is destructive, especially for bulimic women, to use all their energy in the past" (P. 54 Boskind-White and White.). One of the main reasons why this short-term model is effective is in the refusal to use energy in the search for profound reasons in childhood, but in the dealing with the actual life-strategy and behaviour.

During the ensuing group-sessions a topic of increasing importance was the avoidance of the dangerous pitfalls of occasional lapses in the eating pattern. Students needed to know that if they had been caught in the web sometimes, they need not continue this pattern for the rest of their life, i.e. an occasional relapse is manageable if it can be halted and is not the end of the world. This is a most difficult experience, because one single failure, as mentioned before, can potentially cause a series of re-

lapses. The first time the student experiences the victory of not falling apart is definitely great progress.

The ability to choose one topic, knowing that other possibilities have to be given up, is a very difficult process for a bulimic student. The picture of a big meal with a lot of different dishes, is a really hard trial, as it requires not eating it all in one mouthful but instead, tasting some of the dishes, and leaving the rest on the table. The picture of the table, with different kinds of dishes placed on it is, in fact, a graphic depiction of the bulimic life, not being able to separate, to choose, and to split things up into small and clear portions. Studying and eating at the same time often means that the eating is the winner and the homework for the next day will grow to immense heights.

Students are helped to understand that eating-patterns are a behaviour which they themselves have learned to develop, and this pattern can be stopped by learning something else, by some other activities, that give more self-confidence and self-control: "Eating disorders are an acquired behaviour, not a habit, therefore you can change your behaviour" (p. 151).

The prescription which Boskind-White and White outline in their book seems quite simple, but it is an extremely hard struggle for students to realize new possibilities for activities and behaviour.

#### *Mid-therapy sessions:*

The approach of the middle of the group sessions is the time to make quite clear that this group therapy has its ending. The awareness of the time limitation is used as a therapeutical tool. Always knowing the number of the sessions left, reinforces the fact that every single participant is conscious of what has been achieved as well as

having an awareness of what personal change in behaviour she might feel needs to be achieved.

By this time 3 of the 4 students had dropped the eating/vomiting pattern to some degree, and were very eager to use the new energy released from the developing progress. However it was very important to concentrate on small tasks and realistic goals only, in order to obtain the feeling of regaining control of their own reactions. An example of small tasks might have been, bringing up some personal points in a working-group in class, expressing anger to a good friend without losing her, receiving a critical comment without feeling caught in a trap of restrained anger, etc.. All the tasks that were attempted within the group and transformed into life outside had the possibility of being new steps for further progress.

The group participants made a very strong connection with each other - being honest with each other, maybe for the first time-feeling a positive reaction from each other in the common struggle for progress.

The role of the therapists was at this point diminished to being neutral, only providing the room and space for the individual work of the participants and making sure that every single student in the group was listened to sincerely when she did her individual work.

At the end of the group therapy 3 of the 4 students were all very satisfied with their results, e.g. 'I can make more decisions. I can speak out frankly, without feeling that I hurt my friends. I can handle my private studies, when I only take it step by step.'

#### *Follow-up session:*

Before the students left the last group-session, they were invited to a follow-up meeting a month after the ending of the group and to a further follow-up after a

period of two months, i.e. three months after the group had stopped.

With the exception of one student, the others reported that in spite of the period of examination just finished, they had maintained their recovery without relapses in their eating-behavior, and had still the energy and strength to sustain the progress developed within the group therapy. They reported new activities during the summer which they had never experienced before, and felt themselves to have a great deal of energy for the start of a new term.

Although we have no further evidence of the continuing success of these particular students, the results of Boskind-White and White support the fact that a short-term model is effective for female students suffering from bulimia.

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The process of psychological counselling an example of student counselling at German universities



THE PROCESS OF PSYCHOLOGICAL  
COUNSELLING AN EXAMPLE OF STUDENT  
COUNSELLING AT GERMAN UNIVERSITIES

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Before I start my speech on psychological counselling at German universities, I would like to give you some basic information on the context in which it takes place. I don't think that there is a typical German way of providing psychological student counselling. Counselling varies, in my opinion, dependent on the psychological orientation of the counsellors and on the local and institutional conditions. So it is necessary to give you some basic information about our institution at the "Freie Universität" in Berlin.

*Psychological Counselling at the "Freie Universität" in  
Berlin*

I work at a student counselling centre called "Zentraleinrichtung Studienberatung und Psychologische Beratung", which is integrated into the university. We have the status of a central unit with service functions; other central units are the language laboratory or the department of sports.

Our organization has two departments: one for general student counselling and one for psychological counselling. A team of four psychologists is responsible for clients with psychological problems. However the psychological service is, in spite of its status as a separate domain, very closely related to academic or study problems.

Our psychological orientation is based on Rogerian client centred psychotherapy and influenced by cognitive behaviour therapy. Besides these basic qualifications our staff members have had additional trainings in other approaches of Humanistic psychology, as Gestalt Therapy and psychodrama; one colleague is a trained psychoanalyst.

With regard to the frequency of different kinds of problems, presented by our clients, the following problems occupy the first two positions of our ranking list (our statistics of 1990):

- learning and achievement problems and
- problems concerning motivation, orientation and decision making about subjects of studying.

Table 1 represents the whole list of problems.

Table 1  
Kind of Problems Presented  
(ranking list, statistics of 1989/90)

- 
1. Learning and achievement problems
  2. Problems concerning motivation, orientation and decision making (especially about subjects of study)
  3. Demand for psychotherapy
  4. Depression
  5. Examination Anxiety
  6. Relationship problems
  7. Anxieties, phobias, compulsions

Ego-centred problems like depression and identity problems rank lower.

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Many students come to see us for just one session. They usually expect the counsellor to give rather concrete and immediate help, perhaps by providing hints on how to manage their problem or by providing new insights into their behaviour and emotions. Or they sometimes need a person to give them some emotional support.

The main part of our counselling consists of *individual counselling*:

55 percent of our clients receive individual appointments, most of them (about 80 percent) one or two sessions.

40 percent of our students take part in *groups and workshops*, also offered by our department.

Only 5 percent of them undergo *psychotherapy* (twenty sessions or more) in our institution.

As our ranking list shows, there is a great demand for psychotherapy, which we can satisfy only to a very small degree. In this respect we have a special counselling function: to give information and recommendation about finding a therapist in the big and sometimes confusing psycho-market of Berlin.

We have to assume that the structure of our clients' expectations has influenced the character of our counselling services. On the other hand we certainly do have to expect a parallel effect on students' demands from the structure of our counselling programme. Having this in mind it has to be realised that it is typical of our counselling that we follow a *problem-oriented pragmatic approach*. This means, we are focusing on concrete problems — this includes critical behaviour and crucial emotional experiences — in order to try to build up, to strengthen and to reinforce the capability of managing these problems.

This orientation can be found particularly in our workshops and groups, which deal with objectives like *preparing for examination* or *training to overcome the fear of speaking in public*. Diagram 2 represents a part of the programme of groups for the present winter term.

Table 2:  
Part of the Programme of Groups and Workshops  
(winter term 1992/93)

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1.	Time management for students Economy of mental work, time planning, organization of studies (four sessions, three hours each)
2.	Training in public speaking (ten sessions, two hours each)
3.	Writing, thinking, feeling—workshop on writer's blocks (four sessions, four hours each)
4.	Autogenic training for advanced participants (eight sessions, two hours each)
5.	Begin ending procrastination! (one session, four hours)
6.	Self experiential group (encounter group) for foreign students—achievement aspirations, anxieties and problems of communication (ten sessions, two hours each)
7.	Training for student tutors, who lead introductory courses for students (one weekend)

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The concept of these groups may be identified as a combination of psychological and educational group work. That means, on the one hand we support the clients in coming into contact with emotions and inner conflicts; on the other hand, we teach them cognitive strategies and offer them the opportunity of learning new behaviour. Besides this our general orientation is characterized by the goal to support students in developing their personal potential and to further their self esteem which I think are typical goals of psychological counselling in general.

The institutional context of university, particularly the interrelationships with other counselling services (e.g. the specific study course counselling of the faculties and the vocational guidance of the Department of Labour and, as well as our personal contacts with members of the teaching staff) have affected some of what our service offers so that they correspond to the special needs of the university: e.g. our *training workshop "How to find a job"*, or our project which offers *workshops about strategies for studying and learning* for students in certain faculties during their basic course, which is focused on *preventative objectives*.

In the next step I shall describe the process of individual counselling.

#### *The process of individual psychological counselling*

Table 3 represents the process of clarifying the problem and finding ways of managing it. The basic objective of the first interview with the client is to build up a constructive relationship, characterized by empathy and acceptance. The client centred approach seems to be an adequate general foundation for psychological counselling. For some clients it is an optimal and sufficient intervention for encouraging them to cope with their problem. But in

general it is more helpful to combine it with a strategy for interviewing and eliciting relevant information.

Table 3:  
Process of psychological counselling

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1.	<i>Preliminary orientation and problem definition</i>
1.1	Developing a relationship with the student
1.2	Preliminary view of the problem
1.3	Preliminary ideas of treatment
2.	<i>Collecting information about the problem</i>
2.1	Conditions of the subject
2.2	Environmental conditions
2.3	Interaction between counsellor and student
3.	<i>Further Analysis: etiology of the problem</i>
3.1	Personal history
3.2	Specification of psychological intervention
4.	<i>Working on the problem</i>
4.1	Finding solutions
4.2	Working on experiences

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Individual counselling is determined by a process of eliciting information and making decisions: decisions about what aspects of the problem are most important; what further information is needed; decisions about the focus of the dialogue; about the kind of intervention and about the point at which the process of information getting should stop and work on the problem should start.

During the phase of the *preliminary orientation and problem definition* (Table 4) tests are required to get a pre-

liminary view of the problem, to develop first hypotheses about the problem, to explore the client's expectations and get an idea of possible forms of intervention. So it is possible, for instance, that in the beginning of the interview the counsellor has already come to the judgement that the client's problem is exam anxiety and that the best way of handling it, is to take part in a special workshop on "how to prepare for examination". If the counsellor is not quite sure, s/he would try to check first the necessary subjective preconditions for participation in a group with other students and try to get some further information about the ego strength or the affiliative needs of the client.

Table 4:

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1.	<i>Preliminary orientation and problem definition</i>
1.1	<i>Offering a relationship to client</i>
	– getting into contact
	– exploring expectations
	– creating the ground for a working alliance
1.2	<i>Preliminary View of the problem</i>
	– presentation of problem
	– symptoms
	– hypotheses about problem
	– first idea of further investigation
1.3	<i>Preliminary ideas of treatment</i>
	– idea of possible intervention
	– desired support/motivation
	Decision about further procedure

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## 2. *Collecting information about the problem*

### 2.1 *Conditions of the subject with respect to problem*

- history of dealing with problem
- problem-solving capabilities and deficits

#### *personal background*

- stressful experiences
- motional and neurotic disturbances
- state of mental health/ego stability

### 2.2 *Environmental conditions*

- life situation (housing, money, social)
- stressors (e.g. exams)
- protective factors (social support)

### 2.3 *Interaction between C and S*

- communicative behaviour
- relationship and reactions of transference
- motivation for counselling
- cooperativeness

Decision about intervention or further investigation

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In other cases it will be necessary to start with an exploration of the core of anxiety and to get more information about the personal background of the client, his other psychodynamics, unknown motives and inner conflicts, as it is presented in the second phase of *collecting (specific) information about the problem*.

In this phase the counsellor tries to get an impression of the environmental conditions as well; the life situation of the client (e.g. housing, social relations), the crucial stresses, e.g. examinations on the one hand and the protective factors on the other hand. A special interest is directed to determining the status of the problem

solving capabilities, coping behaviour, and particularly their deficits.

In most cases the exploration of personality is rather restricted to observations of communicative behaviour and interaction, indicating the central tendencies of motivating forces of the client.

The next step to *further analysis of the etiology of the problem* (Table 5), particularly to exploration of personal history, will be taken only, if the problem seems to be rooted in personality structure and psychotherapy is being considered.

Table 5

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## 3. *Further analysis: etiology of the problem*

### 3.1 *Personal history*

- family background
- development of personality
- crucial experiences/life events

### 3.2 *Specification of intervention*

- motivation for therapeutical intervention
- need of support
- aspects of indication

Decision about kind and focus of intervention

## 4. *Working on the problem*

- giving information
  - offering special groups
  - finding solutions for defined problem
  - working on stressful experiences
  - giving support for a crucial period of time
  - starting with therapy
-

When the process of exploration is finished, the counsellor goes on to make his or her decision about the focus of intervention and starts *working on the problem—phase 4*. The following case study will illustrate the process of psychological counselling in detail.

### CASE STUDY BARBARA (3 sessions)

Barbara is 27 years old and has completed 14 semesters in a German Studies course. She has been working on her master's thesis (Magisterarbeit) for one year, but hasn't finished.

#### Problems presented:

Achievement, especially writing problems, separation from boyfriend and relationship problem.

#### *First session (client centred and exploratory interview)*

#### Achievement problem:

She has not made any progress with her master's thesis. She feels blocked in her writing. She complains about having lost her motivation and at certain times she suffers from fear of failure. She feels considerably stressed by a speech she has to give on the subject of her master's thesis in two months' time at a conference.

#### Relationship:

She is very sad and depressed in the face of a threatening separation from her boyfriend, who is about to withdraw from her. She has discovered that there is a

certain pattern in all of her relationships: they are rather short-lasting, they usually start with an overwhelming state of being in love, but soon change to disappointment. When the partner begins to withdraw she is left feeling depressed. She has decided to undergo psychotherapy and has already made an agreement with a psychoanalyst. She feels quite uncertain about when to start the therapy. Should it be immediately or after she has finished her exams. She feels discouraged, lacking self-confidence.

#### Impression from interaction with the client:

She seems to be subdued and depressed. She offers a lot of interpretations: the result of her self analysis. In contact with me she seems cautious and distant. She is anxious to present herself as competent and, in spite of her emotional stress, as strong. She tries to control the situation by offering her own interpretations. She seems to expect me to adopt the role of a motherly listener, giving emotional support and some advice for managing the problem.

She evokes my sympathy and interest, but also caution and gentleness. I accept her offer of a relationship.

Clarifying her desire for counselling and coming to a decision about further procedure:

As she regards her problem of relationship as a topic for her intended psychotherapy, I do not take the initiative to explore it any further. I decide against an exploration of her biography and her former relationships with her family members. However, I remain open to her initiative in this direction.

Her central desire for counselling is directed towards overcoming the emotional stress of separation and to manage her problem with her Master's thesis.

My impression of her state of mind is that she needs some support to stabilize again, but that basically she is

capable of managing her problems herself. We agree that we should start with an analysis of her achievement problems.

*Analysis of the achievement problem—finding ways of managing the problem (behaviour oriented)*

She has finished much preparatory work for her master's thesis, having collected a lot of excerpts and index cards, but she hasn't succeeded with writing her text. She shrinks back from writing especially from bringing it to an end. Her anxiety is reinforced by the uncertain job prospects with a master's degree in literature. The work on her master's thesis has become tremendously important to her, absorbing her completely, so that she appears to live in a closed world, that separates her from other people. She makes great demands for scientific standards and suffers from doubts about her intellectual ability. In this respect she does not have enough contact with reality.

She is highly motivated and rather ambitious. She criticizes her professor's *laissez-faire* attitude, she wants him to push her. She definitely needs more communication with other students.

We discuss the principles of improving her strategies of time management.

I recommend one of our workshops, which fits perfectly to her needs, entitled "Writing Extended Essays".

This workshop deals with writer's blocks, including interesting exercises for creative writing, recommends methods of time management and offers the opportunity of talking about motivation problems. The workshop is restricted to a small group. Covering one week, four hours every day, it allows for intensive communication.

*The second counselling session: client centred, giving emotional support*

She felt relieved after the first session. She seemed to be glad of the sympathy and interest I had shown her. She felt more self confident than before.

Although her boyfriend had left her in the meantime, she was able to work with concentration and remained open for other things. She felt less depressed. She began to understand that her boyfriend refused to be engaged in a close and almost symbiotic relationship, the way she desired it to be.

Then she started to remember her former relationship with her aunt, a very dominant person, whom she loved very much. She tends to idealize her. Although she plans to deal with her relationship problem as part of her future psychotherapy, she is still uncertain about when to start it.

*Reflections on further procedure*

I didn't try to deepen the topic of relationship, because I didn't want to start therapy with her. She decided that the intention of proceeding with her essay has some priority and that she preferred to start with psychoanalysis after having finished her examination. She fears that psychoanalysis will require too much of her energy, so that there won't be enough left for her studies. I reinforce her decision, thinking that it is more important for her at this moment to have more concrete relations with her present reality than with her past. Therefore I decided to support her building up her capacity for problem managing.

She wanted to have a third session.

*Third session—client centred*

She had participated in the workshop and had gained considerable profit from it. She seemed very lively and open-minded. She told me that she had got some insight into her involvement in extremely high self demands. She had freed herself a little, having given up her hostile opposition to the idealized scientific standard.

Her aspirations had become more realistic. She was now looking forward to her work.

She had discovered a parallel to her self demands with respect to her relationship.

She was glad about the result of counselling and wanted to finish it there.

PSYCHO-DYNAMIC COUNSELLING  
IN PRACTICE

ANN HEYNO, University of Westminster, United Kingdom

The following case example has been chosen to illustrate one way in which psycho-dynamic counselling is practised within a university counselling service in Britain. The student described in the case is not a real one but an amalgamation of several students I have seen with similar problems.

It was chosen because it demonstrates how psycho-dynamic thinking (counselling based on the work of psycho-analysts such as Freud, Klein, Bion and Winnicott) can be applied in a brief intervention, with a student in crisis, during the exam period. It is a good example of the way in which emotional problems, in this case unresolved bereavement, can interfere with the learning process and get in the way of academic achievement. It shows how insights were useful to the student in reducing her panic and enabling her to achieve her academic potential. It also shows how a brief counselling intervention can bring to light areas of conflict, which a student does not want to work on and the counsellor leaves alone.

Not all counselling in Britain is short-term focused work but longer term work is largely dependent on the motivation of the client and the availability of resources. In this case the student presented in a crisis and it was appropriate to work with her in the short-term. She was also brought to the counselling service by a member of



the academic staff and therefore the case illustrates how essential the links are between academic staff and counsellors working within a university setting.

The student, whom I will call Lucy, was first known to the counselling service when a member of the academic staff phoned to say she had walked out of an exam. The tutor had spent some time with her and felt she needed help. She arrived half an hour later, agitated and upset. She looked tired and unhappy. It was some time before she was able to talk but eventually she said she couldn't understand what had happened. Her mind had gone blank in the middle of her best paper and she had felt compelled to walk out of the exam. Initially, I saw Lucy only briefly to try to help make sense of what happened and to identify whether she needed to see a doctor. I then arranged a longer, fifty minute appointment for two days later. I saw her four times in all, including the initial session.

Lucy was a fashionably dressed student, tall and thin with a crop of curly dark hair, which she wore loose. When she sat down in my office, she was shaking. She kept telling me she was so embarrassed about what had happened. She said she was also very ashamed. She couldn't understand what had gone wrong and kept wanting to cry. She told me she had felt so lonely in the exam hall that she hadn't been able to stand it any longer. As she talked, the whole incident seemed a total mystery to her and to me. She explained that it would have been her best paper, that she loved the course and was doing extremely well on it. In terms of everyday, ordinary logic what had happened made no sense at all. A student who was doing well on a course she enjoyed, suddenly blanking out in the middle of her best paper.

As the student talked, her story unfolded. Between the self reproaches and the anxiety, she mentioned that she hadn't slept very well the previous night. She had

dreamt about her dead aunt. In the dream she and her aunt were travelling together in a car. Suddenly the car stopped and the aunt got out without saying goodbye. She told me the dream was a recurring one which she found extremely upsetting. It further emerged that the day of the exam was the 5th anniversary of the aunt's death and that she had also been doing an exam on the day her aunt was killed in a road accident. Not only that but her parents had refused to allow her to go to the funeral, insisting that she sat an exam on that day as well. She told me she was very worried that her parents would be angry when they heard she had walked out of the exam this time. They would say she was making excuses to cover up for not doing enough work.

At this point, it was becoming increasingly clear to me that there was a connection between her feelings about her aunt's death and the current exam incident. The question in my mind was why now when she was doing so well? So far she'd been successful on the course. At a conscious level, she wasn't thinking about her aunt, who had been very special to her and had lived with the family and looked after her when she was small. Indeed she felt that five years on she should have been over the death. But clearly she wasn't. Consciously she wasn't aware of a problem but her unconscious, first in the form of a dream and later in the blanking out in the exam, was a communication that something was seriously wrong. What she was unable to express consciously was expressing itself in action - in a symptom, exam anxiety. This conversion of anxiety into action is commonly referred to as "acting out" - the self destructive act of spoiling her achievements in her best exam. Her conscious wish was to pass the exam, her unconscious wish was to say "Hey, something is wrong. I am still deeply upset by my aunt's death and I am very angry that I wasn't allowed to go to the funeral

and have the opportunity of saying goodbye". Remember that in the dream, the aunt leaves without saying goodbye, which in reality was what happened through her sudden death.

My client's unresolved grief about her aunt's death and her anger with her parents for not acknowledging this, was being acted out as exam panic. Exams and bereavement had somehow become connected in her unconscious mind. A tentative comment linking the aunt's death and exam panic brought my client great relief.

In the subsequent session, it emerged that my client had never done well in exams since the death of her aunt. She had always underachieved in public exams but had never walked out on an exam before. In the past, her unconscious feelings had not interfered so dramatically with her performance, so why now? My guess is that it was *because* she was doing well on the course that the incident happened. In subsequent sessions she talked more about her aunt, whom she felt was the only person in the family who had understood and valued her and believed she would do well in the future. When at last she was doing well, it was even more upsetting that her aunt was not there to see it. Because she could not express this directly, she has to "act out" her feelings.

At our third meeting, Lucy told me she had telephoned her mother who hadn't really understood why she had walked out of the exam but had agreed to take her to the crematorium where her aunt had been cremated. In this session she talked more about her aunt and once again about how alone she had felt in the exam hall. She said she had never felt so aggressive in her life. The anger she felt with her aunt for leaving her and with her parents for not allowing her to go to the funeral was now being expressed more consciously. Until then it had been acted out in underachievement in exams. In her course

work at school, her teachers had always predicted that she would get "A" and "B" grades in the exams. However she always came out with C's.

By the final session, my client had visited the crematorium. While she was there she had imagined her aunt telling her she was doing OK. "It's such a relief" she told me.

In the course of my very brief contact with this student, I observed that she had a difficult relationship with her mother who had not gone to university. I had a strong sense of her rivalry with her mother and her guilt about feeling she was doing better than her. This may also have accounted for why Lucy's unresolved grief about her aunt had come out at a time when she was doing so well. But a tentative comment from me that this might be an issue for her was met without enthusiasm. This led me to believe that even if there were issues surrounding parental conflict, she did not want to consider them and I let it drop. She had come for understanding about why she had walked out of an exam, not for help resolving other anxieties in relation to her mother. She was not asking for on-going counselling.

It was also important that in this case the exam invigilator recognised the student's need for help and brought her to the counselling service. I later learnt that she had completed her course successfully.

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