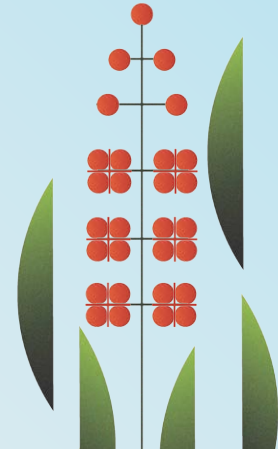


Offering Walk-in Counselling as a Low-Barrier and Accessible Service for Youth



HIGHLIGHTS*

Walk-in counselling is an accessible, responsive and youth centred service and a key component within a comprehensive continuum of care. By eliminating waitlists and structuring each visit as a distinct therapeutic intervention, **this approach ensures that more young people can promptly access evidence-based, solution-focused support when they need it.**

Walk-in counselling is a low-barrier service that allows for early intervention, helping prevent problems from getting worse. **Nearly 50% of youth accessing Foundry's walk-in counselling are accessing Foundry for the first time.**

Offering walk-in counselling in an integrated setting facilitates easy access to other services and supports aligned with a youth's goals and needs. **More than one in three youth accessing walk-in counselling use another Foundry service in the same visit.**

BACKGROUND

A Struggle to Access Youth-Centred, Timely and Integrated Care

Across Canada, youth are experiencing the highest rates of mental illness of any age group.¹ The COVID-19 pandemic, drug toxicity crisis, climate change and rise in anti-2SLGBTQIA+ hate are just a few of the many challenges youth are facing in British Columbia (BC) and across the country. Drug toxicity and suicide are the first and third leading causes of death in young British Columbians, with youth also reporting the highest rates of worsened mental health of any age group throughout the pandemic.² Despite all this, many young people are unable to access the support they need. More than half of youth ages 12–24 with early mental health needs report that mental health services are not easy to access.³

Services often require referrals, have strict eligibility criteria, operate siloed from other care professionals or pathways, or have long waitlists, and private options are expensive.⁴ Youth and young adults face the additional barrier of navigating services targeted towards either children or adults, ill-suited for their unique developmental stage. These challenges are further compounded by stigma and health care related trauma, systemic racism and discrimination, making services feel unwelcoming and unsafe.⁴

The initial decision to seek out counselling can be difficult. Youth may have fear of judgment around accessing care, of not being 'sick enough' to require services or support, or delay reaching out in the hopes that the issue(s) will resolve. Long waits may result in service disengagement,⁴ leaving issues unresolved and, over time, worsening without support. The barriers to accessing services directly contradict the evidence on the importance of early and timely interventions for youth mental health and substance use (MHSU) concerns.

The lack of accessible MHSU supports for youth highlights the need to focus on innovative solutions to support young people. As one response to these system challenges, Foundry offers no cost walk-in counselling to support young people ages 12–24 in BC.

“Even before the pandemic, a lot of people were suffering. But now we’ve all kind of gone through this collective trauma and so many people are seeking services now and just not able to afford it.”

Youth

PURPOSE

This policy brief highlights key learnings around the evidence, opportunities and challenges in developing and delivering walk-in counselling within an integrated youth services (IYS) setting.

ABOUT US

Foundry is a provincial IYS initiative in British Columbia that offers a range of low-barrier and youth-friendly services for youth ages 12–24 in the areas of mental health, substance use support, peer support, physical and sexual health, and social services, including inclusive employment supports.

A NOTE ABOUT LANGUAGE

In this brief we use the term ‘walk-in counselling’ to describe our approach. However, you may have heard other language to describe similar sounding services, such as drop-in, same-day, single session or open-access, among others. We continue to review our terminology for clarity and appropriateness. Just like language is constantly evolving, Foundry will also continue to grow and evolve.

Understanding Foundry’s Walk-in Counselling Approach

Foundry’s approach blends three core, evidence-informed components.

Walk-in mode of service delivery

‘Walk-in’ counselling is the term most often found in academic literature, although it is sometimes referred to as ‘same-day’ or ‘drop-in’ counselling. The priority of walk-in service delivery is timely access, so youth can have a counselling appointment on the same day requested when they feel most willing and motivated to seek support. There are no waitlists; youth can go directly into a centre and sign up for a session without the pressures of planning and keeping appointments. More recently, based on virtual innovations during the COVID-19 pandemic, some centres have introduced an option for youth to book an appointment for later the same day.

A one-at-a-time (‘OAAT’ or single session therapy) method

With an OAAT (also referred to as single session) method, or mindset, each counselling session is seen as a complete therapeutic service. Youth are not required to follow-up or book another appointment unless they choose — many report receiving practical benefit from one session and feel it is sufficient for their needs at that time. Others may choose to return for future sessions or for another issue. The OAAT method can be used with a variety of therapies.

Solution-Focused Brief Therapy (SFBT) as the therapeutic modality

At Foundry, SFBT is the primary therapeutic modality used in walk-in counselling. SFBT is a strengths-based, pragmatic and future-focused approach that uses a therapeutic orientation and question set that centres youth as the experts of their own lives. A youth’s presenting concerns, goals and desires are prioritized to develop a forward action plan as opposed to exploring historical antecedents.

Although the literature is still growing, existing evidence indicates that walk-in counselling as a whole is acceptable and beneficial for youth, leading to quicker improvements in psychosocial symptoms as well as higher rates of client satisfaction compared to traditional counselling models.⁵ Studies have found a single session intervention to be effective in reducing symptoms of anxiety, depression and conduct problems, among others.⁶ Youth can also experience improved awareness of their own skills and strengths after a single session, providing long-term benefits.⁷

a This policy brief utilizes internal administrative data collected from youth accessing walk-counselling within the fiscal year from April 2022 to March 2023. Demographic information is provided by youth on a voluntary basis. Quotes were obtained through focus groups and interviews with youth and Foundry clinicians.

Walk-in Counselling at Foundry: Learnings and Analysis

Walk-in Counselling as a Point of Entry and First Line Intervention

“I personally did not know how to access [other services]. I feel like they’re kind of hard to access. Sometimes you need [private] parental insurance. And then for that, you don’t want to tell your parents that you’re accessing those things.”

Youth

“I found it really helpful for those times where I just felt like I had too much emotion and I needed to talk to someone about it.”

Youth

Between April 2022 and March 2023, Foundry’s walk-in counselling services saw 5,807 youth and over 12,000 visits. Nearly 50% of those youth were accessing Foundry services for the first time, indicating the success of having intentional, easy access points of care in helping young people take the first step of seeking support. Almost a third of those youth also reported that if Foundry services were not available, they wouldn’t have sought help at all.

By empowering youth to access care when they want, walk-in counselling allows both the client and counsellor to capitalize on “in the moment” therapeutic motivation for support and change. When individuals seek out and access counselling at the time that they are facing problems, it has been found that there is more willingness to implement positive shifts in their lives.⁸ Indeed, research

across mental health and substance use contexts has consistently found that those who are motivated to bring about change in their lives are more likely to seek out support and experience better treatment outcomes overall.^{9,10}

By adopting this approach, a greater number of young people can access the associated benefits without the need for multiple sessions. Too often, longer term or more traditional ‘caseload’ counselling results in attendance drop-off or service disengagement.¹¹ In contrast, the structure of each session acting as a distinct therapeutic intervention ensures that even one visit can offer valuable support. As a result, more young people seeking care can receive timely, effective, solution-focused assistance.

FIGURE A: CHARACTERISTICS OF YOUTH ACCESSING FOUNDRY’S WALK-IN COUNSELLING



“Meeting youth where they’re at. To be able to tell somebody you’re struggling today and you need something imminently and being able to offer that is so powerful.”

Foundry Clinician

The responsiveness of this service is crucial as the vast majority (90%) of youth accessing walk-in counselling at Foundry reported being in high or very high distress. Although not structured as a crisis intervention service, walk-in counselling is nonetheless able to provide support for multiple ranges of distress, levels of acuity and symptom types. Ensuring youth can access therapy without having to submit to lengthy diagnostic assessments also offers an alternative approach to a Western medicalized model that many young people, especially those from equity-denied^b communities, can experience as aloof, alienating and an additional barrier. It is well documented that mental health challenges in childhood and adolescence can predict persistent psychiatric challenges into adulthood such as depression, anxiety and substance use disorders^{12,13} in addition to impacting other social determinants of health.¹⁴ Easy access to early intervention

services, such as walk-in counselling, is crucial in intercepting these trajectories and preventing mental health symptoms from worsening over time.

Walk-in counselling is also an important opportunity to intervene early and provide youth with the supports they need while reducing overall burden on the broader health system. Excess wait times not only prolong the suffering youth may be experiencing but also result in significant mental health deterioration and increased psychological distress.^{15,16} Other jurisdictions in Canada are seeing system-level benefits of this service. Since the implementation of a new mental health model including single session walk-in counselling, Newfoundland and Labrador and the Northwest Territories have reduced wait times by 68% and 79%, respectively, with some communities in these regions now reporting no wait times at all.^{17,18}

An Adaptable and Youth-Centred Approach

“Another thing that I noticed was their kind of language. They weren’t using clinical terms like PTSD or something. It was really youth friendly language, something that everyone can understand.”

Youth

Ensuring services are accessible for youth goes beyond removing waitlists. It means ensuring services are flexible, appealing (and non-pathologizing) and that youth feel respected to “express themselves authentically, without fear of discrimination,” among a number of other elements.¹⁹ While these elements align with Foundry’s overall approach of co-design with and for youth, it is also reflected in the choice of SFBT as the therapeutic modality, which has been shown to be clinically effective in a variety of populations, including youth.^{20,21}

While other forms of counselling tend to focus on problems and weaknesses, SFBT draws on a young person’s existing strengths and skills to explore and co-create potential solutions and overcome challenges. The ‘right’ way to conduct a session is based on the values, cultural beliefs and worldviews of the young person. Thus far, Foundry’s internal evaluation of walk-in counselling found that youth had an overall positive experience and reported improvements in their self-rated functioning two weeks after the session.²²

“I think a lot of youth find it liberating in that this is often the one professional experience that they have where their opinions are actually honestly asked.”

Foundry Clinician

^b The term “equity-denied” in this brief is used to describe individuals and communities who face barriers that hinder them from having access to resources and opportunities due to systemic discrimination and oppression. For more details on this and other terms relating to equity, diversity and inclusion, please see this resource: [Guide on Equity, Diversity and Inclusion Terminology](https://www24.international.gc.ca/equity-diversity-inclusion-equity-diversity-inclusion-eng). Government of Canada; 2023. [Available from noslangues-ourlanguages.gc.ca/en/publications/equite-diversite-inclusion-equity-diversity-inclusion-eng]

Another critical aspect to a youth-centred approach is offering supports through flexible service delivery platforms, including virtual services. Statistics Canada has reported that nearly 100% of youth ages 15–24 use the internet daily or have their own smartphone, and other studies have found that most youth are interested in accessing MHSU services virtually.^{23,24} Virtual services can address hurdles experienced by youth with a range of accessibility barriers, whether geographic, transportation-related or otherwise, including those who feel safer or more comfortable accessing services from their own space. A recent (2022) meta-analysis found remotely delivered counselling to be effective for a range of mental health concerns in youth including anxiety and conduct problems.²⁵ As Foundry and other health care services have launched virtual walk-in counselling, there are several considerations that warrant further investigation, from the logistics of a virtual ‘drop-in,’ therapeutic impacts of seeing a counsellor virtually rather than in-person and integration considerations around other, typically in-person, Foundry services.

“It’s very easy. It’s on your phone. So, I feel like there are so many barriers removed on the app.”

Youth

Emerging research has also indicated that the walk-in counselling approach is both effective and highly acceptable for diverse populations, including 2SLGBTQIA+^{26,27} youth and can be tailored for a variety of youth contexts. For example, a mental health program in the Northwest Territories that includes walk-in counselling explored the acceptability of services among Indigenous and non-Indigenous clients. Acceptability was high among both groups, with 93% of non-Indigenous clients reporting feeling safe and culturally respected, and 82% of Indigenous clients reporting the same.¹⁸ Of particular note, SFBT has also emerged as a promising and adaptable trauma-informed approach to support youth in a variety of settings, including in disasters and crisis situations.²⁸ A recent study conducted during the COVID-19 pandemic found a reduction in depressive and anxiety symptoms and an increase in problem-solving skills among youth in China participating in an online SFBT intervention.²⁹ These examples demonstrate how approaches like walk-in counselling and SFBT can be adapted to centre diverse experiences and backgrounds.

It should be noted that in much of the research exploring psychotherapeutic interventions, equity-denied youth are excluded or unreported from the study population. Additionally, many counselling methods do not adequately speak to youths’ diverse experiences, identities and cultural and familial backgrounds. As a result, equity-denied populations often experience lower satisfaction with counselling services that are not culturally informed or responsive. Emerging research indicates that culturally adapted, including family-based, interventions may be better suited for equity-denied populations, signalling a need to prioritize a youth’s unique community and familial context when offering support.

A Team-based Bridge to Other Services and Supports

Foundry's walk-in counselling is offered through a community-based IYS model, with numerous services co-located and integrated with an interprofessional care team. Walk-in counselling hours are planned to coincide with other drop-in services, such as physical and sexual health and peer support. This overlap promotes 'warm' internal referrals to other Foundry services and vice versa. These intentional steps are paying off, with current data showing that more than 1 in 3 youth who access walk-in counselling services access other Foundry services during the same visit. In other words, walk-in counselling not only acts as a low-barrier entry point but can also be an effective bridge to other health and wellness services. For example, youth accessing walk-in counselling may be struggling with symptoms related to depression, anxiety, substance use or attention deficit hyperactivity disorder. Through easy, often same-day referrals to other Foundry services, youth can receive prescriber medication supports from physicians and nurses, connect to a peer support worker with lived experience or more.

Walk-in counselling can also facilitate access to other care types, including specialized or higher levels of care such as psychiatric services, as well as acting as a 'step-down' from more intensive levels of care. More intensive services are traditionally difficult to access through community-based organizations, and youth may feel reluctant to seek out these services due to stigma, shame and accessibility barriers. By starting from a low-barrier service, counsellors can support and encourage youth to access services that they may not have sought out otherwise.

The team-based environment supports clinicians in addition to youth. Foundry's walk-in counselling sessions often involve a short session break where the counsellor will briefly pause the session and consult with another service provider. The session break allows counsellors to draw from other clinicians' areas of expertise and brainstorm the most appropriate next steps for the young person. For early career counsellors, the session break acts as a useful form of supervision, learning and skill building. It also provides youth with a chance to pause and reflect during the counselling session and to receive input from multiple perspectives.

“It’s really quite rich for the clinician to come back, summarize a client case and also be able to process during the session break to know where they might want to go next. Sometimes somebody in that room says, ‘I have a great idea for something you could try,’ so I’ve approached it as a unique opportunity for consultation and supervision that you often don’t get in any other counselling realm.”

Foundry Clinician

Although this approach, and in particular the OAT method, can be a practice shift for those who are accustomed to traditional caseload counselling over a longer period, it can also be quite liberating for many. Foundry practitioners have noted they can build a good level of rapport in a short time, due in part to the transparency and urgency that making the most of one session requires. In addition, there is also a sense of freedom for counsellors by not having to guide a session based on previous conversations and instead allowing the client to take the lead.

ACKNOWLEDGMENTS

We acknowledge, with much gratitude, that our work takes place on land steeped in rich Indigenous history and home to many First Nations, Inuit and Métis peoples today. We recognize that Foundry centres are situated on the traditional and ancestral territories of many First Nations communities, and we are humbled and thankful to be able to carry our work forward with Indigenous Peoples who have been stewards of this land since time immemorial.

We wish to acknowledge the Foundry Central Office (FCO) and Foundry network team members for their invaluable contributions throughout the development of this policy brief. We would also like to thank Foundry's partners and funders, Lead Agencies, advisory committees and the youth and families/caregivers who are centred in everything we do. Importantly, we also want to thank the youth participants who contributed their insights, experiences and feedback for this policy brief—their voices were invaluable throughout this process.

Recommendations

In response to emerging and ongoing challenges within the youth health and wellness sector, Foundry has incorporated walk-in counselling as a cornerstone of its mental health and substance use service offerings. Current data and feedback from youth and clinicians showcase this as a valuable, low-barrier service. At the same time, there is a need for continued learning as a relatively novel service within the continuum of care. Based on these learnings, we highlight the following recommendations for youth-serving and IYS organizations, policymakers and researchers.

1. Continue to expand access to a range of timely, publicly funded and accessible counselling options for young people.

Too often, there are too many barriers to accessing care. Walk-in counselling allows youth to access care in a moment where they are motivated to seek support, without requiring diagnostic assessment, being placed on waitlists or expecting multiple visits. Each of these elements can result in frustration, discouragement and, eventually, service disengagement. Low-barrier counselling options that allow youth to address their concerns before their symptoms worsen are key to an early intervention approach for addressing a variety of MHSU concerns and are an important component within a broader continuum of care for young people.

2. Pursue further research and exploration into youth outcomes and experiences of walk-in counselling, including implications of virtual service delivery formats.

As a newer model of service delivery, current learnings and evidence about walk-in counselling are promising. We support a continued call for more research and evaluation looking at youth outcomes and experiences with walk-in counselling, as well as system impacts. More published

evaluations of services are needed to contribute to the evidence base for this approach to service delivery and to speak to its utility in a variety of MHSU settings and contexts. This also includes exploring the efficacy and impacts of walk-in counselling in a virtual setting. This practice change has model and operational implications, including ensuring clear communication of the service name and approach to youth and providers as well as assessing model fidelity. Further exploration of these impacts is needed.

3. Build on knowledge around culturally safer approaches to counselling to ensure adaptable, inclusive and appropriate services for youth from equity-denied groups.

There is an ongoing need to ensure that counselling models account for the diverse community, cultural and societal contexts that shape individuals' experiences and overall well-being. Walk-in counselling is an example of a flexible and adaptable approach that prioritizes centring the experiences and worldviews of the person accessing care and has been shown to be adaptable to multiple diverse audiences. Regardless, further work must be done to improve new and existing mental health supports and ensure that they are safe and acceptable for youth from all backgrounds, especially those from equity-denied communities.

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