

Helping Your Teenager Beat Depression

Katharina Manassis, Anne Marie Levac
Woodbine House
2004 £19.95 ISBN 1890627496

The authors have written this book based on their practical experiences in counselling parents of depressed children and teenagers. I like the way they have included suggestions from these parents so that the reader can identify with, and benefit from, the experiences of others. The chapters are short and concise which helps to hold your concentration. The key points at the end of each chapter reinforce the reader's thoughts; exercises and checklists help parents monitor progress and be effective in improving their teenager's outlook.

This book models in an effective, practical way the concept of using CBT to enable parents to become effective partners in the treatment of their child's depression. The authors suggest that a minimum of 10-20 minutes a week over a six-week period is enough to see an improvement in a child's mood. I found it encouraging that the authors see problems as very solution-focused rather than laying the blame with either parents or teenagers, which I think is often what happens when conflict occurs. I do question how easy it would be to motivate a depressed teenager to cooperate on a weekly basis and how easy it would be to get the whole family to work in partnership, however. This would require a lot of patience and perseverance!

The chapters begin with an overview of teenage mood problems followed by an explanation of the authors' treatment approach, cleverly known by the acronym LEAP. Parents need first to identify what behaviour or attitude they want to change and then create a plan to:

- Label their own thoughts and emotions related to their teen's behaviour
- Empathise with their teen's perspective; Explore ways to respond
- Apply an alternative way to respond
- Pick a follow-up time to evaluate the result; Plan ahead to the next step.

In the introduction typical case studies of depressed teenagers are used, which helps parents identify and gain insight into their own problems. The progress checks in each chapter were very encouraging and motivating. The chapters can be worked through each week and your individual plan written in the book as

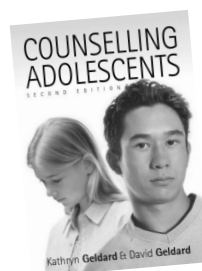
you proceed, or it is possible to photocopy several of these pages if you prefer to keep them in a folder.

Uniquely, this book offers readers a practical approach based on CBT principles. Parent could use it without any previous counselling knowledge to help address minor mood problems and reduce the risk of relapse, or it could be used in conjunction with professional therapy for more serious depressive disorders.

I read this book with two hats on – as a counsellor working with teenage girls in a secondary school and as a parent of three teenage children. I was shocked to discover how common depression can be in teenagers, and that it covers the whole spectrum of experiences ranging from uncomplicated sadness to clinical depression. It does not dismiss the possible need for families to seek urgent professional attention. The knowledge gained from this book is very useful in helping families assess if, and when, further professional help is required.

The chapter on dealing with the school, although written from an American perspective, had useful suggestions on overcoming school avoidance and gave a good explanation of educational plans. I liked the idea suggested by the authors of viewing problems in families from a circular perspective, keeping a focus on relationships between family members, which is less blaming and more understanding. They suggest mapping patterns to generate new ideas and possible solutions to stuck patterns. The concluding chapter gives hope to parents by encouraging them to look to the future, examining the possibilities and improving the odds for their teenager.

This is a very readable book on a topic often too easily dismissed, useful for families, family therapists and those in the medical and caring professions.



Counselling Adolescents (2nd ed)

Kathryn Geldard, David Geldard
Sage Publications
2004 £18.99 ISBN 1412902355

Kathryn Geldard is a child and family therapist working in private practice and David Geldard is a psychologist who specialises in working with children, adolescents and families. They both have extensive experience of running training courses in counselling skills for those who work with children and adolescents. This excellent book draws on much of their own practice.

Kathryn and David Geldard offer stimulating insight into how traditional counselling skills can be enhanced by the use of a proactive approach. This second edition has been fully revised and updated and also includes two new chapters on making use of adolescent communication processes and ways of promoting change in adolescents.

The book is divided into four parts. Part One explains the complex process of understanding the nature of adolescence and the developmental process. I liked the way the authors make very clear the need for a different approach when working with adolescents and remind us to consider the various factors relating to unresolved childhood issues that might impact on the adolescent and their ability to negotiate the developmental tasks of adolescence. A very short summary is given at the end of each chapter in the first section which helps to consolidate the reader's learning.

Part Two deals with the proactive approach, using constructivist philosophy as a frame of reference. Chapter 9 illustrates clearly how difficult it is to engage with adolescents in a way that enables them to talk freely and discusses how counsellors can make use of typical adolescent communication processes such as mutual self-disclosure and digression. Although many may disagree, the authors argue strongly in favour of deliberately making use of counsellor self-disclosure. Basic counselling skills are described under the heading of 'micro-skills'

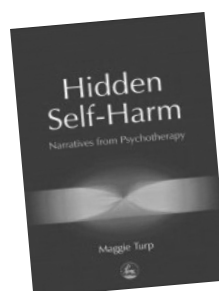
Part Three examines counselling strategies that can be used with adolescents. This section is clearly divided into symbolic strategies, creative strategies, behavioural and cognitive behavioural strategies and psycho-educational strategies. I found this particularly useful as adolescents are often restless and like to do things that maintain their interest and concentration.

Part Four puts the proactive approach into practice by describing two case studies. This section made the whole approach come alive for me!

The book is well referenced and has useful diagrams, some of which can be downloaded from the publisher's website. It is relevant to professionals working with emotionally disturbed adolescents and those in social work, psychology, occupational therapy, mental health and psychiatry, nursing and education.

Counselling Adolescents is a valuable resource which I will often refer to for particular cases and generally to stimulate ideas in my work with adolescents.

Janet Duncan
School Counsellor and Relate Couple Counsellor



Hidden Self-Harm

Maggie Turp
Jessica Kingsley
2003 £16.95 ISBN 1853029017

The outstanding feature of this book is the honesty, compassion and care with which it is written. It is a bold and innovative study of an area which, as the title suggests, is under researched. Yet throughout, the reader is aware of the detailed and sensitive exploration of the matter as it is undertaken by counsellors and therapists in their work with clients who self harm.

The book examines the nature of self harm and challenges the belief that behaviour is only self harming if it is dramatic and obvious, such as cutting. Maggie helps us to consider that there is a wide variety of self-injurious or health-impairing activities that a person may engage in and no one else may be aware that they are hurting themselves. In the therapeutic relationship the self-harm may not be talked about as part of the presenting problem. It may be some while into the work before the client can dare to share this aspect of their distress. Maggie suggests that these hidden forms of self-harm are no different to the more obvious forms, except perhaps in terms of their intensity. In terms of the underlying states of mind that they reveal, they are very similar.

Some forms of self harm will be 'active' and involve a doing something to the self, while others involve 'omission', a failure to take care. Studies by Klein (1952)¹, Winnicott (1956)² and Bion (1962)³ are considered for what they tell us of the value of handling and containment in babyhood. If a child does not grow up believing that they are worthy of respect or care, then the capacity to care for themselves is unlikely to be internalised.

In terms of research Maggie addressed the topic in three ways. First, she worked with a supervision group to consider how practitioners experienced self harm within their work and personal lives. From these discussions a number of vignettes were written and shared with other groups. Practitioners were asked to consider which of the vignettes they would consider examples of self harm. The outcome was that five case studies were selected for the main part of the book. These reflect and portray a 'continuum model' within which experience ranges from 'good enough self care' to 'severe self-harm'. The second part of the research consists of these detailed studies of clients who hurt themselves physically as a way of trying to deal with psychic pain. Thirdly, Maggie draws upon

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her experience of two baby observations, of 'Esther' and 'Emma'. She presents sections of observation material in order to demonstrate how, if things go well, the capacity for self care can develop.

Theoretical concepts are interwoven throughout the book in an enlightening way. Maggie's style of writing enables difficult ideas to be accessible. She links theory with her practice, demonstrating the power of things such as projective identification, as she shares honestly about times when clients' projections have felt paralysing. The point made is that these are forms of communication from the client that can tell us something very important.

This book would be valuable to all counsellors and trainees. Although the focus is on a particular client group, the ideas discussed about the meaning of physical or external 'symptoms' are relevant to our work with most clients. The research methods allow for dialogue and enable experience to be constructed in joint exploration. My only concern is about what it means to clients, with whom such sensitive and 'private' work has taken place, to ask them at the end for permission to publish that work. If, as practitioners, we are to share our research it is something we have to find a way to do and yet I guess that sometimes it might feel like another 'piercing' of the psychic skin that Maggie talks about.

Maggie considers the involvement of these clients with the caring services generally. The client's unconscious communication may contribute to negative feelings that professional carers may experience. If not processed through supervision, such feelings can lead to a vicious circle of further abuse. In 2002 Maggie submitted some of her ideas about self-harm to the National Institute for Clinical Excellence (NICE). This year NICE produced new guidelines for the physical and psychological management of self harm. Among other things the guidelines recommend that people who have self harmed should be treated with the same care, respect and privacy as any patient; that professionals should take full account of the likely distress associated with self harm and that staff undertaking this work should have regular clinical supervision in which the emotional impact upon staff members can be discussed and understood (NICE, 2004⁴).

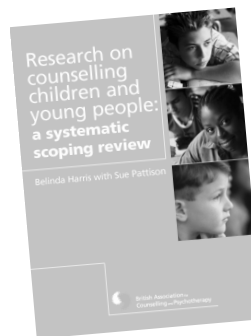
This is a welcome contribution and a step forward, yet there is more to be done. This excellent book will challenge practitioners in many fields to go on thinking. As Maggie says, 'there is no one final "true" version of events'. The challenge is to risk facing up to what in ourselves is self-destructive and perhaps 'hidden' and then to meet with it in our clients.

References

- 1 Klein M. (1952) On observing the behaviour of young infants. Envy and gratitude and other works 1946-1963. London: Hogarth; 1987.
- 2 Winnicott DW. (1956) Primary Maternal Preoccupation. In: Collected papers: through paediatrics to psychoanalysis. London: Tavistock; 1958.
- 3 Bion WR. (1962) Learning from experience. London: Heinemann.
- 4 National Institute for Clinical Excellence (2004) Clinical Guideline 16. Self-harm: the short-term physical and psychological management and secondary prevention of self harm in primary and secondary care. (www.nice.org.uk/CG016NICEguideline)

Barbara Richards, University of Reading

This review first appeared in *Counselling and Psychotherapy Research* and is reprinted with thanks.



Research on counselling children and young people: a systematic scoping search

Belinda Harris, Sue Harrison
British Association for
Counselling and Psychotherapy
2004 £12 (BACP members)
£18 (non-members)
ISBN 0946181993 (available
from www.bacp.co.uk/shop)

This report examines the effects of counselling children and adolescents and assesses the specific contribution counselling makes to the psychological, social and emotional wellbeing of children and young people. In addition, it highlights the key challenges in carrying out research with young people.

The review contains access to the body of research on counselling young people including issues on: behavioural problems and conduct disorders; emotional problems (anxiety and depression); counselling and medical illness; school-related issues; self-harming practices; and sexual abuse. The authors also identify gaps in our knowledge base and offer some practical signposts for future research in counselling children and adolescents.

The review will be of use to counsellors, psychotherapists and supervisors, managers of youth counselling services, counselling and psychotherapy educators, and students. The authors have produced a user-friendly, informative review. It will stimulate and support the thinking, practice and research of counselling practitioners, administrators and child mental health workers.