

Extending our Reach.

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Veronica Rosello veronicamrosello@gmail.com

Extending Our Reach

Why, when and how to include parents and/or family members in supporting issues around resilience and selfesteem in children and young people.

It's my aim that you leave today feeling that you have the confidence.....

To begin to include parents/families in your interventions with children and young people

To know where and when it might be appropriate and

To know where to seek/develop the necessary skills to do so

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Rationale

- Explosion, both actual cases and awareness of mental health issues amongst children/YP, and a desire by all parties to 'do' something about it.
- Systems and the Family First approach
- Development of the F in CYPF and professional dialogue in this area
- Your own question/case
- Mindful that it may not actually be an appropriate way to support the child/YP in the counselling space

Family First Principles

- "Stronger Together"
- "Can do" approach
- Thinking differently, delivering services differently
- Working with the whole family
- Empowering, focus on resilience and strengths
- Flexible and promote personal responsibility

The Family Systems Perspectiv

(can also read 'organisations')

- Individuals are best understood through assessing the interactions within an entire family
- Symptoms -an expression of a dysfunction within a family
- Problematic behaviours
 - serve a purpose 'to help stabilise' equilibrium.
 - -are a function of the family's ability to operate productively in the here and now
 - often symptomatic patterns handed down across generations

A family is an interactional unit and a change in one member affects all members

Recent professional dialogue

Working within the family Dynamic - bacp CYP&F
 June 2018

A major part of the work is encouraging the parents to shift form seeing the child as 'the problem' to understanding the child within the context of his development, his history and his family"

Opinion- bacp CYP&F June 2019

Lyn Martin discusses " a move towards collaboration becoming the norm rather than the exception"

Fears Challenges Barriers

 Discussion in small group of 3, thinking in particular about the therapeutic alliance, challenges for the client and counsellor....

Some suggestions...

- Readiness or not of child/YP
- Our philosophy on what counselling is or isn't, may come from training but also from....
- Own story about parents', authority, family in any support/struggles as a child or adolescent
- Trust and extending the therapeutic relationship beyond the two of you
- Lack of knowledge/skill base
- Confidence in managing the dynamic, balance of power
- Conflicts with Service model you work in
- Boundary setting
- Overload too much information can cloud the initial relationship building

My professional journey/experiences

- School Counsellor Primary, Secondary, State, Independent, International, Boarding.
- Local Authority CMH provision, Agency, Children's Centre, Charity (disabilities)
- Researcher small Action Research projects
- Counsellor Supervisor
- Lecturer FE and HE
- Small amount of private practice with children/YP
- UK and abroad most recently Australia
- Teacher
- Mother

Continuum of depth, reach and timing

- The child/YP's needs must always be at the heart of any decision making. Likewise the pace and depth of work with others will depend on the needs of the child/YP
- Build the relationship with the child or young person before introducing anyone else into the mix
- Balance of power / locus of control
- Contracting at the start for safeguarding exclusions otherwise, as far as possible, the child/YP to be in the front passenger seat

Continuums

In isolation

Involvement of others

Bringing together

'Including in conversation'

'bringing in' family members

Exploring TA incl scripts

BSFT miracle

practising conversations with

discussions with
strengths-based
training/support for
sharing session tools
case meetings

no surprises

advocate

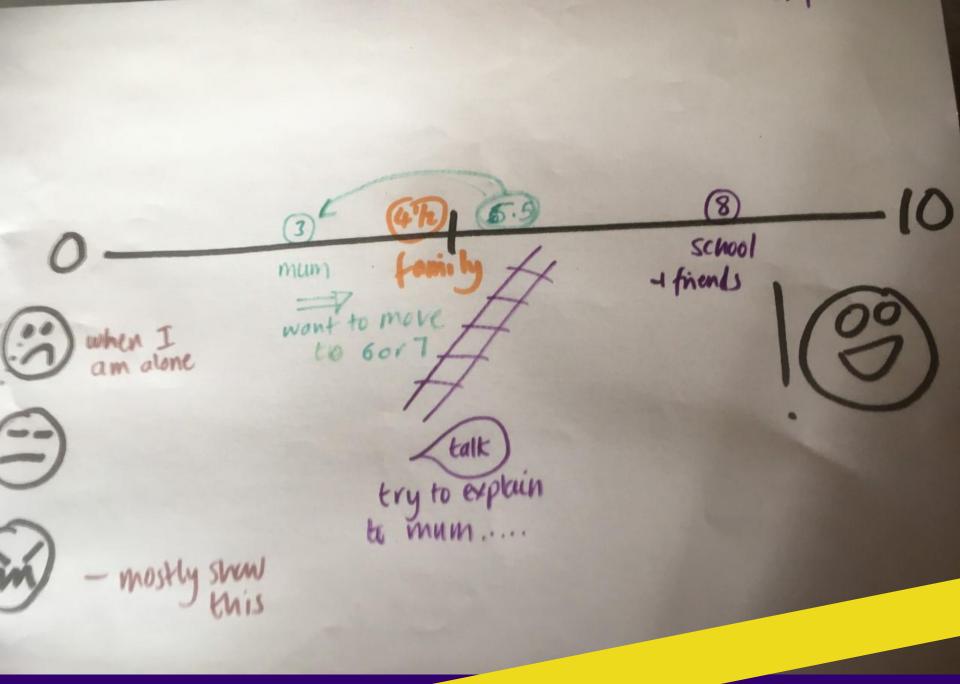
using session tools

online tools

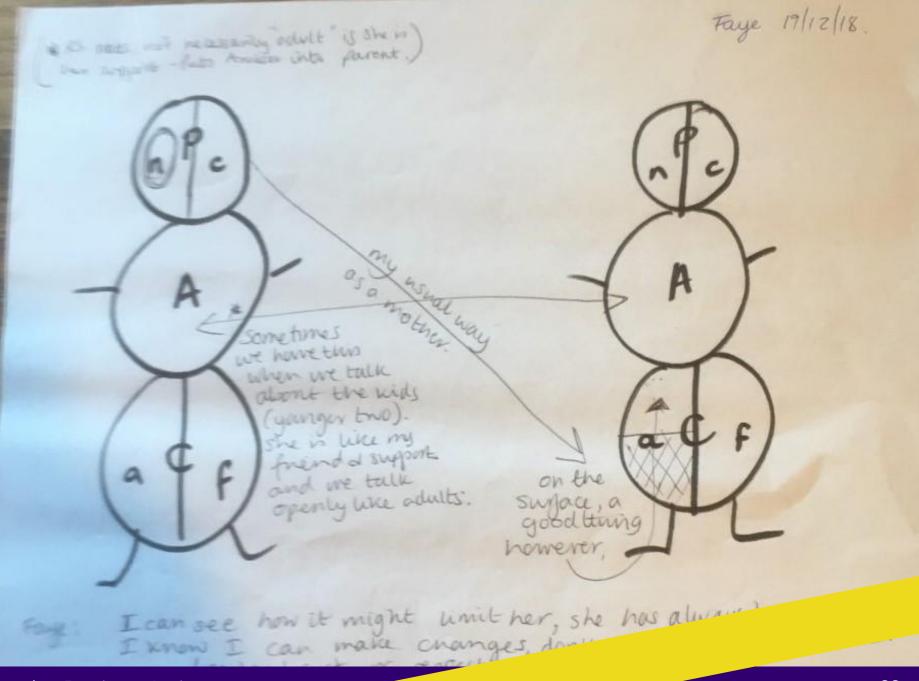
session together - timeline

Approaches and Tools

- Child/YP at the centre
- Possibly the same tools and programs you already use
- Protecting the therapeutic relationship no surprises
- Your role advocate, mediator, facilitator
- Bridging Tools





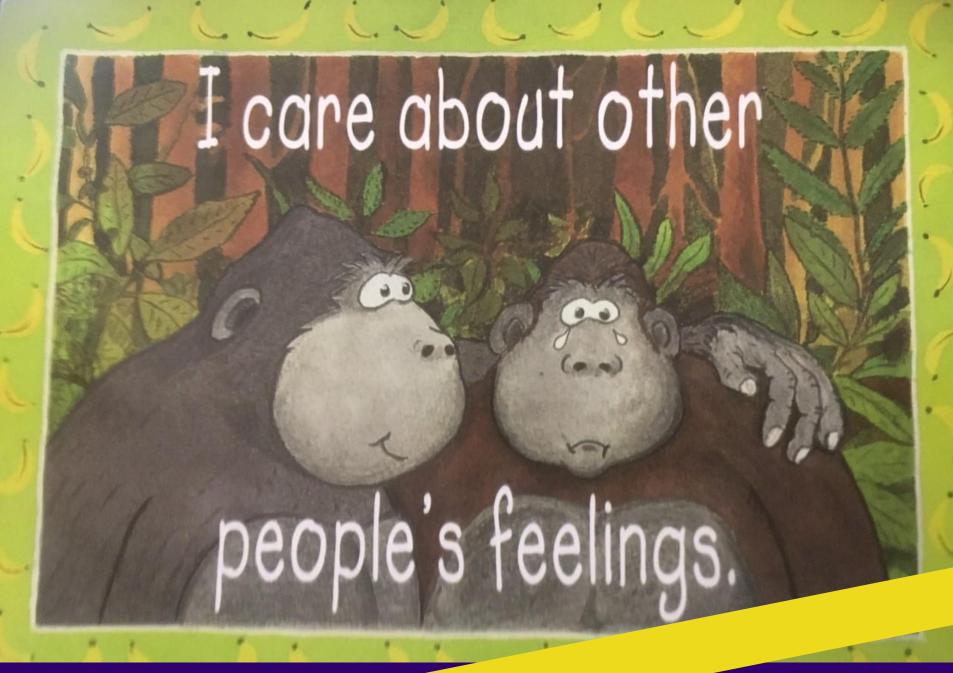


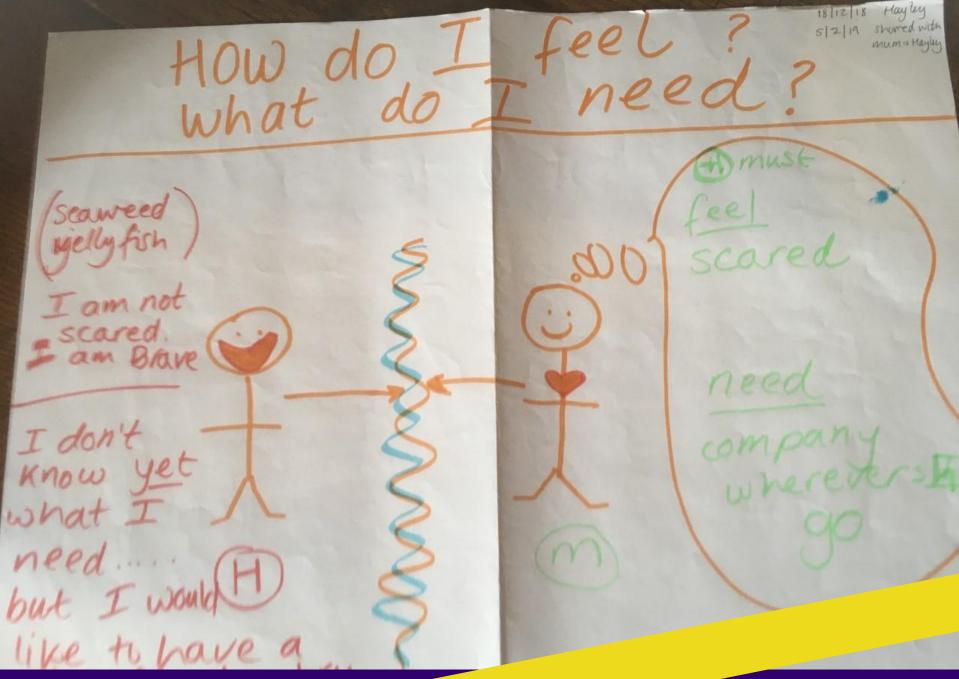


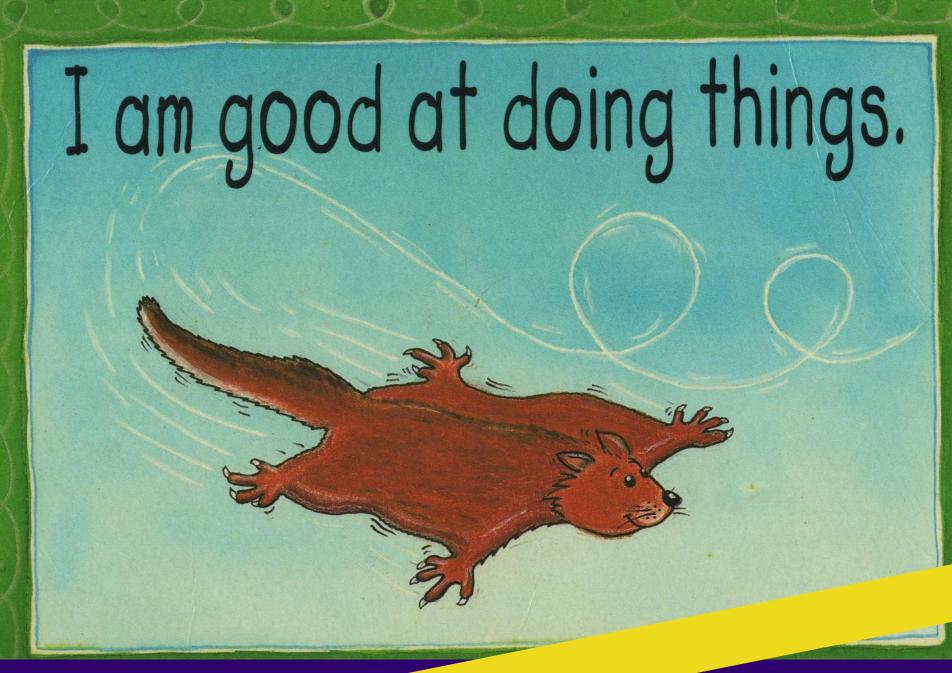


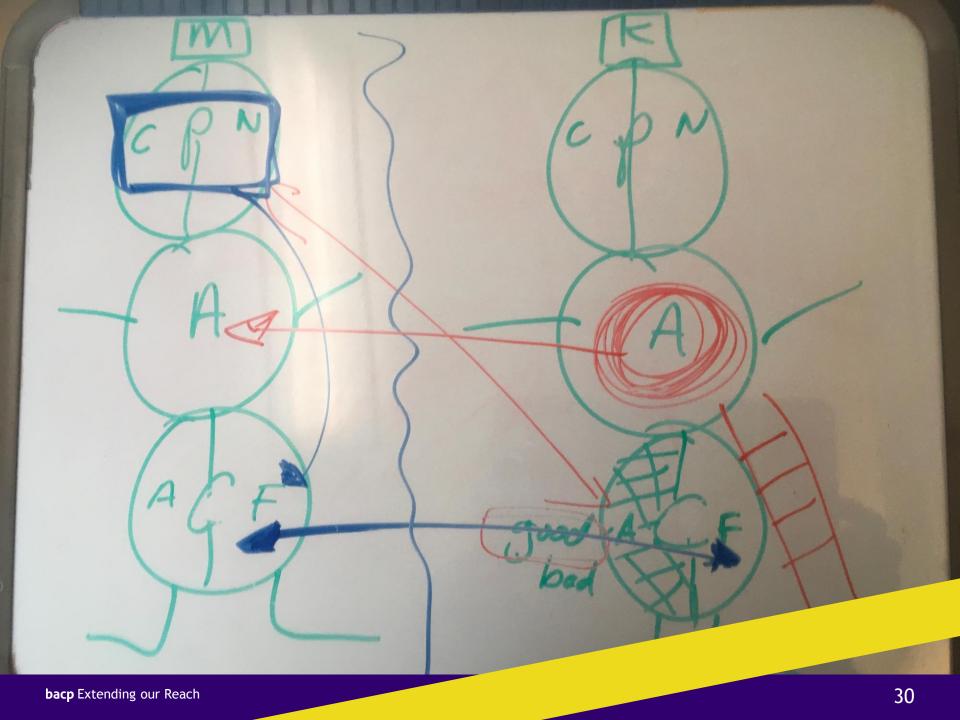


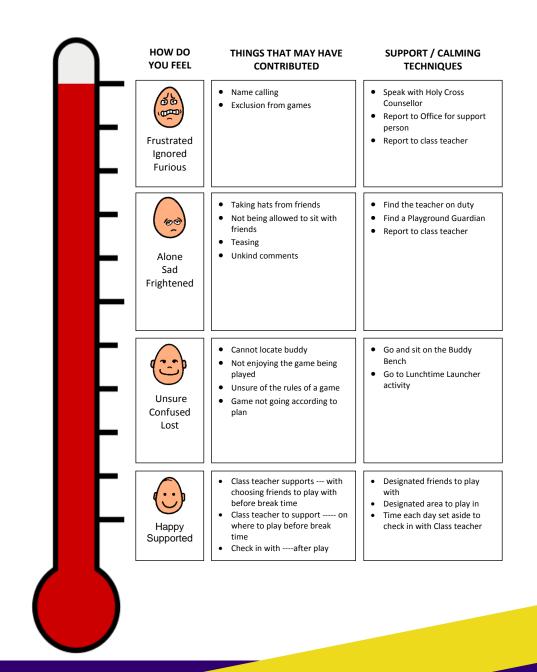












Case Study approach to your own context - cohort/setting

 Working with one or two others who work in a similar setting to you. Decide whether to extend the reach, with whom and which interventions might be best suited.

Context exercise

- Age/stage of client group
- Type of setting
- Accessibility/practical considerations
- Your honest feelings/confidence/philosophy on working with parents/other adults

Thoughts.....



Resources References

- Massie H. (2003) Lives Across Time Holt Co, New York a 30 yr. study on the relationship between parent-infant interaction Child Trauma and subsequent mental health.
- Murray, L. (1988) Effects of Post Natal depression on Infant Development in Motherhood and Mental Illness 2 Causes and Consequences, Wright, London/Boston, pp159-90
- Thurwell. K. et al (2013) randomised controlled trial "Treatment of anxiety disorders via guided parent delivered CBT" British Journal of Psychiatry 203, 436-444
- Van Fleet,R. and Guerney, LF. (2003) Casebook of Filial Therapy. Boiling Springs PA Play Therapy press Coping Cat 8-13 plus adolescence - parents https://www.cebc4cw.org/program/coping-cat/detailed
- 'Friends for Life' CBT based program for 8-11 teachers <u>https://www.nbss.ie/interventions-and-projects/wellbeing/friends-for-life</u>

Questions?

Thank you

Veronica Rosello

Counsellor Supervisor Lecturer 07951252415 veronicamrosello@gmail.com