

Definition: Adolescent and Family Counselling

Counselling is working with and helping heal the internal emotional world of an individual. It involves assisting someone to identify problems and changing behaviour, to move on, dealing with and understanding their emotional world.

Counselling means being able to :

- engage with someone, and listen to what they are and are not saying.
- important to stay in the place that they are and be able to reflect on and feedback what is happening for them.
- The counsellor needs to
 - be able to focus all their attention on an individual with care and concern.
 - provide a rock-solid support in an often chaotic world.
 - help someone stay with or hold difficult traumatic emotions, and can provide structure and support at critical times.

The difference between counselling and casework is that casework is about dealing with the young person's external world needs and counselling is about the internal world. (cite South Sydney Youth Services 2002, Our Place publication)

Counselling Adolescents Gellard and Gellard 2004, suggest that Existential counselling philosophy is very appropriate when counselling young people as it parallels much of adolescent thinking, encourages the client to accept anxiety as a reality and moves the client towards taking responsibility for making decisions within a realistic sense of freedom. **The emphasis is on the clients feeling comfortable with themselves and modelling authentic behaviour. The counsellor encourages the client to examine their personal experiences**

Gellard and Gellard (2004) continue in that there is no doubt that counselling adolescents requires special skills and abilities. We believe that all counsellors working with young people require continuing supervision from suitable professionals, who are themselves experienced in counselling adolescents.

Adolescents seek professional help generally when life has become very difficult because of serious problems where previous attempts at resolution have failed. Unfortunately, though, many adolescents will not seek help for problems on their own. This is particularly the case for young adolescents who have more immature cognitive patterns than their older counterparts. These adolescents may have to rely on their parents to recognise when they might need help and to find out where they can get help.

The research finding that whether or not a young person seeks help depends on the perceived benefits of seeking help and also the perceived threat of negative consequences, which might results from seeking help. Clearly, seeking counselling help can be threatening for many adolescent because counselling requires self-disclosure about personal feelings, thoughts and problems.

The assumption of freedom of choice in existential philosophy matches the adolescent's new found sense of freedom. Adolescents generally have the opportunity to make choices and decisions about life but only within the limits of boundaries inherent in their social environment. Emphasizing freedom to choose within the inevitable constraints of the real world help the adolescent to focus on acceptance of personal responsibility.

It is a search for the meaning of life, freedom and responsibility, on creating one's personal identity and establishing meaningful relationships with others.

Anxiety is a condition of living, with awareness of death as a major cause of that anxiety (Corey, 1996). All of these fit very closely with the fundamental tasks and conditions of adolescents.

Under CSGP Funding our Target Group is Adolescents 12 – 18 years and their Family

The years of adolescent and young adulthood are a critical developmental period, particularly in terms of social and emotional wellbeing, as young people decrease their dependence on families and school and move towards independence and autonomy (DOHA,2000a). Adolescence is also a time when any mental health disorders have their first onset and most of the major disorders of adult life begin to escalate during this period (DOHA, 1999). Cite 2010; *Nicolle Fabrier, Intercultural Clinical psychologist, suggests that ' there is now evidence of early onset of anxiety and depression etc also in primary aged children within our community'.*

There can be significant negative and long-term effects of even mild mental health issues in adolescence as they can cause social, emotional and cognitive changes into later adult life. Mental health problems in late adolescence can impede a young person's growth, erode quality of life, affect levels of confidence and self-esteem, create unwanted dependence on families, strain social and family relationships, disrupt education and career prospects and hinder social development (DOHA,2000a)

Child and adolescents who live in low-income families are at an increased risk of developing mental health problems, compared to those in higher-income families (ABS,1998).

Of young people aged 12-17 years, 14% will experience a mental health problem in any 12-month period (DOHA,2000b). This rises to 19 percent when using self report measures.

Service usage by young people

Community Health (CH) counselling data collected between 2004 and 2007 indicate that only 8% of CH counselling consumers were aged 18-24 years even though 27% of people in this age group report having mental health problems. Similarly, only 5.4% were aged 12-17 years even though 14% of people in this age group reported having mental health problems.

Although there is clear evidence that many young Australian experience mental health problems that will have significant long-term negative impacts if not addressed, the majority receive no professional help. Only 25% of adolescents with mental health problems received professional help, increasing to 38% of adults (DOHA,2000a).

Barriers to accessing service for young people include:

- a. High cost
- b. Inaccessibility
- c. Lack of knowledge of available services**
- d. Lack of recognition of mental health problems**
- e. Long waiting lists
- f. Concerns about confidentiality**
- g. Perception that professional services will not help**
- h. General lack of engagement with services (DOHA,2000a)

Strategies that may overcome some of these barriers include :

- a. Offering counselling services to families
- b. Flexible outreach services to actively engage young people
- c. Timely interventions and a reduction in waiting times
- d. Using suitable written material and media to orient young people to counselling
- e. Better promotion of services to combat lack of knowledge of services
- f. Partnerships with youth centres, community houses, shopping complexes, schools and sport and recreation agencies to provide counselling and groups offsite.

Family-based approaches can be helpful to the whole family as well as the young person, strengthening protective factors within the family environment.

[Counselling] therapy helps consumers to understand their thoughts and feelings and to identify strategies to manage or resolve them.

Group work : Advanced therapeutic interventions can be used not only in individual work but also in group work, an important aspect of CH counselling. In both settings, advanced therapeutic interventions can be used in tandem

with supportive counselling. The nature of group work can also assist in creating supportive settings for consumers that enhancing social supports.

Reference : Community Health Counselling: Policy framework and program Standards 2009

Case Management is there to help the client and all others on the scene to achieve an agreed goal that is possible for the client in their current circumstances,. It might include organising some counselling for the client. It provides advice, access to information, advocacy, and it negotiates and arranges services. **Counselling** is there to help the client to reach a point where they can help themselves. It might offer information, but rarely negotiates with others nor arranges other services.

<http://www.healthymindsatwork.org.uk/media/pdf/Counselling-and-Case-Management.pdf>.

Nicolle Fabrier (2010) states '*counselling may seek to resolve grief & loss issues, experiences of trauma and abandonment as well as more day to day problems at home and at work or school.*'