

The Handbook of
Counselling Children
and **Young People**

Case Study Kevin

Kevin is 15. He is encouraged by his youth worker to attend counselling provided by a community provider with close links to the youth service and wider community activity. The youth worker has been worried about Kevin self-harming as this previously has been his way of coping with changes or upsets in his life.

Kevin agrees to go for, in his words, 'a checking out meeting with the counsellor'.

It soon becomes obvious during this 'checking out' meeting that Kevin is deeply troubled, and when he rolls up his sleeves because he 'is too warm', cuts are seen on both his arms.

Consider: How should the counsellor proceed?

Particularly consider:

What safeguarding issues are there and how can the counsellor manage them?

What ethical issues are there and how can the counsellor manage them?

Does the counsellor involve the youth worker?

For the counsellor, the young client's welfare is the most important issue in that counselling/therapeutic space. What are the implications for practice?

Joining with the young person is key to ensuring that their issues are allowed to surface in this safe place. What are the implications for practice?

The counsellor has to be aware of their own situation and be conscious of transference and counter-transference taking place. Is this serious self-harming, how often, using what, has the young client thought of suicide, do they have a plan? What are the implications for practice?

What are the implications for practice in relation to Gillick competency, client autonomy, and risk management?

What if the young person walks out, disengages, and what can a counsellor do in these situations?

How might it change implications for practice if the client was being seen in a school context?

How might it change implications for practice if the client was of another age, gender, culture, ability, context, etc.?

Summary

In conclusion, in counselling with children and young people affected by such issues, it is important to:

- Provide a quality therapeutic relationship
- Listen to the young person's story, understandings and feelings

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- Tailor the approach to the individual and contextual needs
 - Adhere to best practice guidance and ethical principles
 - Demonstrate evidence-based practice, showing relational competence and empathic congruence
 - Be informed by specialist training and supervision
 - Engage in ongoing assessment, review, evaluation, quality assurance and continuing professional development
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Reflective Questions

1. In addition to a capacity to communicate respect, understanding and acceptance (Winter et al., 2009), does research identify any other qualities, skills, competencies?
2. Some have suggested that depression might be due to changes in brain development in adolescence. In addition, adolescents (particularly young women) have higher rates of anxiety and depression than younger children, and self-harm is clearly associated with these kinds of mental health problems (Hagell, 2013: 2). Does research identify any other influencing factors?
3. Identify appropriate specialist training; utilise relevant outcome measures; identify relevant legislation; consult recent research; discuss with your supervisor.

Learning Activities

1. Discuss and create a plan to ensure evidence-based practice.
2. Arrange an outreach programme to raise awareness in your community of the prevalence of depression in the child population and the available interventions.
3. It is important to give yourself attention. Explore ways of pacing yourself and your energy output.

Further Reading

- Ainsworth, M.S., Blehar, M.C., Waters, E. and Wall, S. (1978) *Patterns of Attachment*. Hillsdale, NJ: Erlbaum.
- Geldard, K. and Geldard, D. (2009) *Relationship Counselling for Children, Young People and Families*. London: SAGE.

Online Resources

BACP website: www.bacp.co.uk/, especially the BACP Children and Young People Division and the Competences for Working with Children and Young People.
Counselling MindEd: <http://counsellingminded.com>.