Crosscare Teen Counselling Clondalkin (TCC) 2012

'Teen suicide remains a prevalent concern which is indicated by bereavement being so high in underlying issues identified by the counsellors (16% of new attendees). A high number of teens would be aware of a young person who has completed suicide. (16%) of teens were referred to the service for deliberate self harm, (28%) reporting they had engaged in self injurious behaviour. Suicidal ideation was reported by 28% of teens and suicidal intent by 19%.'

2012 also saw an increase in referrals from local mental health services regarding older teens. Increasingly the issue of drug related violence is presenting itself with regard to teens witnessing street violence or at home regarding family members. Also drug related stressors for teens having an awareness of the movement of drugs in the area. (35%) of new teens attending had issues with drug use and (72%) with alcohol use.

In addition to our frontline services the staff team have worked in collaboration with the following agencies throughout the year:

- Community Action on Suicide providing support for a local film night
- Involvement in an information evening at a local school and giving a talk for parents concerned about teen mental health
- A staff member is on the local Jigsaw Clinical Advisory team and is committed to working collaboratively with Jigsaw with regard to training programmes offered
- The level of marital and separation work provided by the service amounted to 411 hours. Bereavement work, with individuals and families availing of support work (104 counselling hours).

It is the policy of Teen Counselling to value, welcome, respect and protect all children and young people who attend the service. The issue of Child Protection is an integral part of the work. We have developed procedures and guidelines to reflect the importance of this and to guide practice in keeping with the implementation of the National Guidelines for the Protection and Welfare of Children. Where any staff member has cause for concern about the safety, well-being or welfare of the children and young people attending the service, appropriate action is taken.

Siobhan NicCoitir Averil Kelleher and Catherine Fullam

(Siobhan NicCoitir, Psychologist with the TCC for 11 years, finished at the end of 2012. We gratefully acknowledge her work on behalf of young people and their families/carers and wish her the well for the future).
Teen Counselling is funded by:
- the Health Service Executive (HSE)
- the Family Support Agency
- Dept. of Children & Youth Affairs (YPFSF)
- The Charitable Infirmary Charitable Trust
- Blanchardstown LDTF
- as a programme of Crosscare and from voluntary donations

**Referrals made**

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<tr>
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<th>2012</th>
<th>2011</th>
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<tr>
<td>Referrals received</td>
<td>68</td>
<td>(60)</td>
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<tr>
<td>Referrals accepted</td>
<td>67</td>
<td>(59)</td>
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**Profile of 32 new teenage clients**

- Female: 56%
- Male: 44%
- 16+ yrs: 46%
- < 16 yrs: 38%

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<td>Waiting time</td>
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<td>There has been a 13% increase in referrals for this 3 day per week service; the average waiting time was 90 days (75 days in 2011).</td>
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**Drugs and alcohol**

(35%) of new teen attenders used drugs and (72%) used alcohol. The drug of choice for teens was cannabis/hash. Amongst the parents of teen clients addiction to drugs was (12%) and alcohol (15%).

**Education**

(94%) of teens attending were in 2nd level school: 1st, 2nd and 3rd year (66%), while (19%) were transition year. (6%) were not in school.

**Attendance**

There were 58 cases seen (54 cases in 2011) during the year with 314 teen and 266 parent/guardian appointments kept. Despite a very active management of DNA’s and cancellations, there was a combined - attendance level of (72%).

**Reasons for attendance at counselling**

The primary reasons for attending were the management of behavioural problems in home/school/community (56%), mood disturbance & anxiety (34%), and family conflict (8%). (28%) of teens reported they had engaged in self-injurious behaviour. (36% in 2011).

**Cases closed**

36 cases were closed and 22 cases were carried forward into 2013. Cases closed involved 356 counselling hours. The average number of counselling sessions was 10.

**Underlying problems**

Difficult communication patterns within the family (53%), parental separation (38%), interpersonal problems (25%) and coping with parent’s personal problems (19%) were the main underlying problem identified by counsellors. This supports the strong emphasis of the service on working with parents as well as with the teen.

**Client evaluation**

(50%) of families attended a closing session to complete their therapy. (75%) of teens reported improvement/great improvement. Parents noted (86%) improvement with (93%) improvement in coping ability.

**Consultations and advice**

58 consultation/advice calls and emails were responded to, supporting concerned parents & other professionals.

**Teen Counselling** has a family based model of service; is professionally staffed; has well developed clinical policies and procedures; is readily accessible to local communities; can respond to families in a flexible way and is adolescent friendly. Liaising with other services is vital to ensure optimum support for clients and staff. The service can be contacted at the following locations:

- Teen C Drumcondra: 01 837 1892
- Teen C Clondalkin: 01 623 1398
- Teen C Tallaght: 01 462 3083
- Teen C Finglas: 01 864 6014
- Teen C Dun Laoghaire: 01 284 4852
- Teen C Blanchardstown: 01 462 3083

For further information about the service also see: www.crosscare.ie

**Positive Systemic Practice (PSP)** (a unique approach to family therapy) was developed in Ireland over the past 40 years at six Teen Counselling (TC) centres under the auspices of Crosscare. A recent evaluation by Professor Alan Carr and Ciara Casselel, School of Psychology UCD supports the effectiveness of PSP in the treatment of families of adolescents with clinically significant behavioural and emotional problems.