

Report on the

First Nations Family Counsellor Program

School District #73 (Kamloops/Thompson)

School Year 2014-2015



Prepared by

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Based on Data Compiled by the Counsellors

Report on the First Nations Family Counsellors 2014 -2015

Background: This statistical update has been provided to highlight the caseload and program activities for the First Nations Family Counsellor Program for the school year 2014-15. The update will include comparative data from the 2011-12, 2012-13 and 2013-14 school years. Included in this year’s report are case studies from all of the Counsellors.

Counsellors Involved in the Program for 2014-15 Include:

Peter Michel, B.Ed.

Sharnelle Matthew, MSW

Lynn Duck Chief, BSW

Tara Tribute, Masters in Counselling

Corinna Lampreau, BSW

Amanda Big Sorrel Horse, B.Ed.

Counselling	2011-12	2012-13	2013-14	2014-15
Total Number of Students Referred For Counselling and Prevention Groups	528	562	703	681
Total Number of Students Referred for Individual Counselling	262	281	298	270
Elementary	95	97	108	112
• Males	75	60	55	64
• Females	20	37	53	48
Middle/Secondary	167	184	190	158
• Males	66	83	84	63
• Females	101	101	106	95
Total Number of Males in Individual Counselling	141	143	130	127
Total Number of Females in Individual Counselling	121	138	159	143



Prevention Groups	2011-12	2012-13	2013-14	2014-15
Number of Students Referred for Participation In Prevention Groups	266	281	405	406
• Elementary	129	104	161	161
• Middle/Secondary	137	177	244	245
Total Number of Females in Prevention Groups	n/a	225	315	303
• Elementary	n/a	75	122	115
• Middle/Secondary	n/a	150	193	188
Total Number of Males in Prevention Groups	n/a	56	90	103
• Elementary	n/a	29	39	46
• Middle/Secondary	n/a	27	51	57
Total Number of Groups	22	16	24	32
• Males	n/a	n/a	n/a	12
• Females	n/a	n/a	n/a	20

NOTE: The total number of groups includes only groups facilitated by the Family Counsellors. Eight additional groups were facilitated by the First Nations Education Workers – this is an increase of 4 groups.

Family Composition of Students in Counselling	2011-12	2012-13	2013-14	2014-15
Single Parent	104	115	108	116
Intact	55	49	47	48
MCFD/SCFS	27	35	32	25
Extended	35	41	42	32
Blended	36	38	30	27
Independent Living	5	12	16	20
Transitional*	n/a	n/a	n/a	6

* A “transitional” family situation is when a student has lived in different family situations throughout the school year or for the majority of the school year.



Key Issues Comparison in One to One Counselling

*Key Issue definitions follow on next page

Key Issues	2011-12			% + - 11-12 & 12-13	2012-13			% + - 12-13 & 13-14	2013-14			% + - 13-14 & 14-15	2014-15		
	All	Males	Females		All	Males	Females		All	Males	Females		All	Males	Females
Alcohol & Drugs	104	39	65	-12%	92	34	58	33%	122	55	67	-42%	71	28	43
Anger Management	72	33	39	-22%	56	27	29	-27%	41	27	14	24%	51	30	21
Anxiety	58	29	29	-7%	54	17	37	17%	63	24	39	11%	70	23	47
Cultural Support	134	97	37	4%	139	75	64	-5%	132	54	78	13%	149	78	71
Depression	46	18	28	2%	47	18	29	77%	83	37	46	-28%	60	20	40
Grief & Loss	76	44	32	0%	76	44	32	67%	127	59	68	-4%	122	46	76
Low Motivation	71	29	42	-6%	67	33	34	101%	135	63	72	-47%	72	39	33
Mental Health Diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	32	11	21
Parent/Child Conflict	71	19	52	6%	75	21	54	32%	99	34	65	-40%	59	19	40
Parenting Support	56	23	33	-14%	48	25	23	-6%	45	21	24	96%	88	43	45
Peer Relationship	109	39	70	-22%	85	30	55	91%	162	51	111	-40%	97	20	77
Self-Esteem	125	55	70	3%	129	46	83	47%	190	82	108	-10%	171	55	116
Self-Mutilation	11	3	8	-9%	10	1	9	70%	17	6	11	24%	21	5	16
Sex Education	47	7	40	34%	63	13	50	16%	73	25	48	4%	76	20	56
Sexual Abuse	23	3	20	22%	28	6	22	-14%	24	5	19	0%	24	7	17
Suicide	18	12	6	-28%	13	7	6	23%	16	8	8	38%	22	10	12
Violence	41	13	28	12%	46	20	26	-4%	44	25	19	20%	53	16	37

*Data not collected on Mental Health issues prior to 2014-15

NOTE: The number of key issues far exceeds the caseload data. Students are often dealing with multiple and complex issues when they are referred to or seek counselling services from the Family Counsellors. For example, a student who is struggling in school may have drug and alcohol issues related to grief and loss or depression which would likely impact self-esteem.

Key Issues Analysis

This year for the first time the FNFCs tracked issues related to mental health in an effort to have more data on the rising need for mental health support for students. The FNFCs will continue to track those needing support within the school system as well as those who are referred for support to outside agencies.

It is interesting to note that there was a 40% decrease in *Parent/Child Conflict* but a 96% increase in *Parenting Support*. There is a very distinct difference between these two issues and it is hopeful that by giving more parent support there will be a decrease in *Parent/Child Conflict*.

There was a significant increase in the number of incidences that involved suicide and suicide ideations – 38% increase over the previous year. There will be a change in the suicide protocol that is used in the school district next year that will provide more support and direction for our FNFC in dealing with attempted suicide and suicide ideation.

Referrals for issues related to *Alcohol and Drug* use saw a 42% drop this year and issues relating to *Peer Relationships* also had a significant drop of 40%. It is possible that the support of our Aboriginal Girls and Boys Groups are having a positive impact on peer relationships.

Definitions of Key Issues

Alcohol and Drugs: Use or abuse of alcohol and drugs could be on a continuum from moderate use to serious and frequent use to addiction.

Anger Management: Difficulty in dealing with or controlling anger. E.g. students who push the anger down or have explosions of anger; can become enraged or belligerent with peers or adults in the classroom, on the playground, at home etc.

Anxiety: Feelings of worry, fear, insecurity, apprehension or uncertainty of a realistic or fantasized threatening event or situation; multisystem response to a perceived threat or danger which can impair physical or psychological functioning.

Cultural Support: Cultural support and/or teachings provided by the Counsellor or cultural resources are brought in for the student.

Depression: Feelings of despondency, hopelessness, inadequacy, lack of energy; continuum could be moderate, manageable, short term depression or could be chronic, severe depression requiring ongoing counselling and/or medication.

Grief and Loss: Various kinds of loss including death (or suicide) in the family or a close friend, separation or divorce of parents, death of a companion pet, leaving a community and home and moving to another place.

Low Motivation: Observed in students who are capable but have no or little drive and no goals or aspirations.

Mental Health Diagnosis: Refers to a wide range of mental health conditions — disorders that affect your mood, thinking and behavior. Examples of mental illness include depression, anxiety disorders, schizophrenia, eating disorders and addictive behaviors.

Parent/Child Conflict: Frequent conflicts/disagreements between the student and parents, guardians, caregivers.

Parenting Skills: Suggestions on parenting skills and strategies made by the Counsellor to the parent via home visits, phone calls, emails and/or a referral to community programs that support parents and/or a referral to private counselling for couples or family.

Peer Relationships: Difficulty or conflicts in relationships with friends or dating partners.

Self-Esteem: Having negative self-image of one's abilities, talents, physical attributes, future possibilities etc.

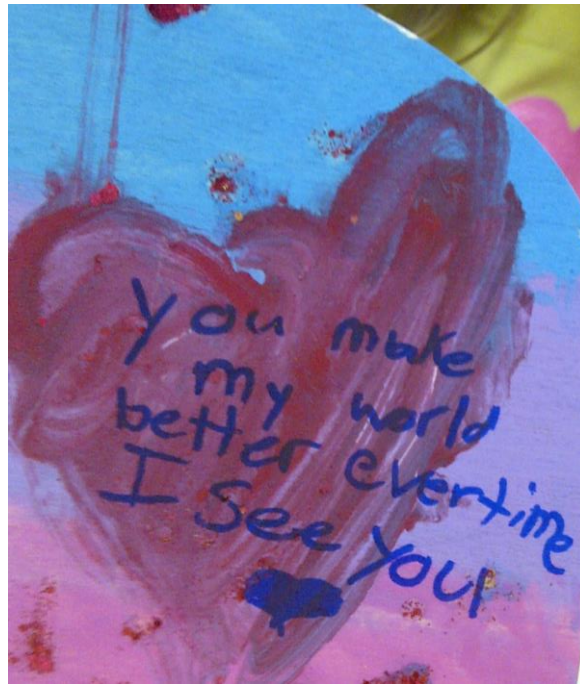
Self-Mutilation: Cutting or other forms of physical self-harm.

Sexual Abuse: Different levels of sexual abuse from inappropriate touching to rape.

Sex Education: Providing support or information regarding safe sex, STD's, sexual relationships, provides support for pregnancy tests.

Suicide: Ideation or attempt.

Violence: Incidents where the student is either the perpetrator or the victim or the witness to violence in the home or in a personal relationship.



CASE STUDIES by the First Nations Family Counsellors

The following case studies will profile specific cases from our 2014-15 counselling caseloads. Each case study will indicate the following: the issues facing the student when they were referred to us, the strategies that were used to improve the situation, and the results/outcomes that were achieved through counseling.

Case Study No. 1- Secondary Student

Presenting Issues:

An elementary school student was referred for counselling on separation issues and to receive cultural support. Separation counselling and cultural support were provided on a bi weekly basis.

The plan for both one-to-one counselling and cultural support was recommended by the First Nations Education Worker (FNFC).

The short term goals for the one-to-one counselling were to get the background of the student's loss and separation. The student was then given support to understand the stages of separation. The seven stages of separation are:

1. shock and denial,
2. pain and guilt
3. anger and bargaining
4. depression and reflection
5. upward turn
6. reconstruction
7. acceptance and hope

The cultural support was to create a safe place to share and interact on subjects that encouraged and supported First Nations teaching and culture.

The long term goals for the one-to-one counselling were to the student support and to provide a solid plan to deal with his emotional education. The long term goals for the group work were to help the student to feel a part of school and to develop positive relationships with his parents, family, peers and school staff. As a result of the cultural support, the student felt safe and secure with his own identity.

Strategies Used:

The FNFC provided a complete understanding of the stages of separation and helped the student to deal with separation issues at home. The FNFC helped the student with culturally relevant strategies and as a result strengthen his cultural understanding. The student was

helped by his FNFC with a solid knowledge of both contemporary counselling ideologies and cultural ideologies – the best of both worlds!

Improvement Results/Outcomes:

The student was helped with his separation issues and with his anxieties from what was happening at home and as result he felt better at school. Counselling helped the student to feel more confident with himself and he is now able cope in elementary school.

The cultural support helped the student to join in the larger Boys Group and drum for the entire school at school events. The student is happier with himself and is now able to deal with his separation issues.

Case Study No. 2 – Secondary Student

Presenting Issues:

I received a phone call from a parent wanting to request services and an appointment was made to obtain more information from the parent.

I discovered the family was a blended family. There were three daughters and the transition of the separation from her previous marriage had a detrimental impact on the family. The two oldest girls were from the previous marriage and were constantly fighting with their mother and she felt they blamed her for failure of the marriage. She indicated her ex-husband struggled with alcohol and would break his promise to the girls by not showing up for visits. When he did visit he would buy them everything and disappear again. The mother was struggling to find balance in her home. I made a referral with a community agency for support for the mother and a referral was put in place for the other daughter to see a First Nations Family Counsellor (FNFC).

I worked with this individual from grade 7 to graduation. The presenting issues were grief and loss, family violence, parent-child conflict, self-esteem, anger and depression. Over the years the focus of our work together was a reflection of her human developmental stages and I was flexible and adaptive in counselling to meet these needs. We worked on coping skills, goal setting, communication, sex education, substance abuse education, depression, anger, anxiety, sex education, healthy relationships, grief and loss, forgiveness, cultural identity, conflict resolutions skills and boundaries.

Strategies Used

The strategies I used throughout the years were: role-playing, journaling, self-expressive art, cognitive behaviour therapy, trauma based practice, and narrative therapy. Significantly, she was a mentor in the girls group over the years and she would lead discussions in the difficult challenges the young women faced and she would be a catalyst to aid in their development of

their individual voices. We had many powerful discussions; utilizing the strength of group by sharing and learning from one another.

The understanding of the unique cultural history of Aboriginal people was significant in a strategy when working with this young woman. We talked about the history of Aboriginal people and why we have challenges today and how multi-generational trauma impacts all families and the plight of our people today. Importantly, the understanding of how legislation and policy impact us today. This aided in the forgiveness of herself and her parents. She also had a better insight into her parents' behavioural patterns in their life journey. She indicated she had a better understanding of family violence and addictions and how this awareness was important in her growth as a person and one day as a mother.

Results/Outcomes:

This young lady had a journey of growth and learning and was open to the process of change. She struggled with addiction and when she had relationships with boyfriends, she struggled with conflict resolution and her family violence history impacted her relationships. We had to learn new patterns of communication and push her out of her comfort level. She was an amazing young lady to work with and the success of the growth and learning was built on a strong foundation of trust and respect in our working relationship. She taught me in our sessions the power of resilience and I helped her to learn how to be gentle with herself and how to forgive herself and others.

She is a strong young woman and she is in control of her own narrative and understands that asking for help is a strength. She will face many life transitions and now understands that we all need help in life's journey!

Case Study No. 3 –Secondary Student

Presenting Issues:

Original referral came from First Nations Education Worker four years ago. During summer 2014, the student had contacted the counsellor to continue counseling services in the fall 2014. Issues and challenges for the student were alcohol and drug abuse, housing, parent/peer/job conflict, low motivation to attend school, and a court case associated with assault charges against her.

Strategies Used:

Student began graduation year with a positive attitude and thought that her attendance and academic success would go well. Unfortunately, housing (roommate conflict), community support (change in social worker-relationship conflict), alcohol and drug abuse, family conflict and conflict in job/school schedule became strong components in her lack of motivation to attend school. Until December 2014, I contacted her weekly and arranged to pick her up at her

home. We would go for coffee and I would take her to appointments. When our visits were early enough in the school day, I would take her to school to connect with school staff, retrieve homework and/or use school space for counselling sessions.

In January 2015, she chose to move back in with her sister (less opportunity to connect with drugs). Shortly after she moved back with her sister, she began attending school 2 or 3 days a week, while continuing to see me once or twice week. In early February, she discovered she had become pregnant during a short term “love romance”.

Results/Outcomes:

Together, we discussed her plan to have a healthy pregnancy (prenatal classes, healthy eating, zero drug, alcohol, or cigarettes), recommit to her academics, youth program and school drum group. I also supported her through her court hearings in where because of her change in lifestyle all of the charges dropped.

My client has followed through with all her commitments and graduated as Valedictorian of her school.

Case Study No. 4 – Secondary Student

Presenting Issues:

During a home visit at the beginning of the school year a secondary male student was referred to me. I was already working with the older sibling and family, and the parent had some concerns regarding this male student. The parent’s main concern was the student’s very low attendance and not being connected to the secondary school. I filled out the referral with the parent and when I brought the referral to the principal and the school support team, they echoed the parent’s concerns.

Strategies Used:

My approach began with building rapport with the student. Since I was already working with the family, I had already established a certain level of trust with the student. I strengthened our relationships by meeting weekly with the student for about 30 minutes. I also continued to meet with the entire family once a month.

After about a month, I found out that the student felt very anxious about riding the city bus and if the bus was late he hated walking into the school or his classes late, and often if the bus was late he would avoid going to school. Our first step was to start positive coping strategies for stress and worries. We practiced positive self-talk for when he thought he might be late, as well as preparing thoughts for when he might have to walk into a classroom late. Another strategy that worked was finding a space and person within the school where he felt safe. He identified the learning assistance room, and the learning assistance teacher is where he felt safe within

the school. A plan was put in place so if the student was late or felt anxious while at school he would go to the learning assistance room and do a check in with the learning assistance teacher. Through practice the student's anxiety level did decrease and his attendance did improve.

Our next step was to build rapport and establish stronger relationships with his teachers, to help him feel comfortable and confident within his classes. This was established by greeting and communicating with them on a regular basis. Attendance slowly started to improve and we continued to meet weekly. By the end of the semester, the student was beginning to attend on a regularly and finished the semester on the Effort Honour Roll. He entered into the second semester continuing to attend regularly.

After spring break in the second semester, through a series of home visits and connecting with the student, he disclosed that he was feeling low and not motivated. One worry was the student would begin to slip back into old patterns. After further discussion with the student, it became clear the feelings being expressed might be medical. Through discussion with the parent it was discovered that the student had not been to the doctor in a very long time and that they did not have a family doctor. A doctor's appointment was made and the appropriate next steps were taken; it was determined that the student was anemic, which was addressed by the doctor and the parent.

Results/Outcomes:

This male secondary student found healthy coping skills for dealing with his anxiety and through practicing them he was able to establish healthy connections to the school staff and the school itself. Then by addressing health concerns, he was able to keep attending school on a regular basis. This student was able to finish the school year in a very positive way achieving both effort and achievement honor roll. I believe this case study shows the importance of the having a strong relationship with the student, parent and school staff.

Case Study No. 5 - Elementary

Presenting Issues:

The student is 9 years old and in grade 4. She was a referral from the school learning assistant and resource teacher (LART).

She was recently placed in care of Ministry for Children and Families on a Voluntary Care Agreement. Her teacher became concerned that the student was becoming defiant and was disengaging in the classroom, behaviors that were out of the norm for the student. The LART contacted the biological mother who agreed and signed the referral for the student to start one-to-one counselling support in school.

Strategies Used:

The student was apprehensive at first, the initial meeting she was very quiet, answered with yes or no, little or no eye contact and remained complacent in facial presentation neither smiling nor frowning.

Trust was established with her once she felt secure in the continuity of weekly visits with the First Nations Family Counsellor (FNFC). The student drew a picture reflecting her family tree. The FNFC initial approach is always gain as much knowledge about the student's family and home life as possible, the best way to gather this information is by a family picture or family diagram depending on the age of the student. She shared that her and her siblings were in a foster home because "mom needs help being a parent".

Collateral contacts later revealed that the student's mother has mental health issues and needed to place her children in care so she could tend to her own needs.

The FNFC prefers a strength-based approach when working with students by guiding the student to discover their inner strengths as they journey through life. Many activities on positive affirmations help to remind them of the good qualities they possess. Art work, such as painting a positive affirmation on a door handle, or on a piece of small canvas to hang nearby, helps to remind students everyday of their worth!

Results/Outcomes:

Once the student understood that she was in a foster home temporarily and regular visits with her mother started to take place, her noncompliant behavior diminished. Trust was established with the FNFC and the student began to explore her feelings through conversation, journaling and art.

The student looked forward to the weekly meetings with the FNFC and she became very social and joined school sports teams.

This is the story of the resiliency of a child. While the FNFC may explain how the methods or the counselling strategies used had impacted the spirit of the child, sometimes it's being at the right place at the right time and living your purpose of what you were placed on this earth to do. Tsuk!

Case Study No. 6 – Secondary Student**Presenting Issues:**

A 17 year old female was referred by school administration (principal and vice principal) and First Nations Education worker. This student had counselling services provided by a FNFC in the

previous school year. This young lady is in Continuing Care with Ministry of Children and Family Development and has been in foster care since she was 4yrs old. There were many concerns brought forward in the referral: frequent drug use, skipping, and falling behind in academics. The biggest concern was a sexual assault incident. Along with all of these issues, the student has a FASD diagnosis.

Strategies Used:

The young lady was very timid, shy, and had extremely low self-esteem and confidence. Immediately referrals were sent the School District's Alcohol and Drug counsellor as well as to the Kamloops Sexual Assault Centre. My main goal for counselling was to increase her self-esteem and confidence. I used the Solutions Focused Therapy strategy because I believe this allows the person to gain confidence in their own decision making rather than being told what to do and how to do it. It also allows the student feel that they are in control of decisions that affect their life. The Solution Focused Therapy strategy had a profound affect in on the student.

Results/Outcomes:

Through the referral to the Alcohol and Drug counsellor, the student engaged less frequently in drug and alcohol use. The student became more comfortable discussing the sexual assault. Most importantly, the actual physical change with this student was beyond fantastic. She makes eye contact more frequently, her hair is pulled away from her face, she smiles more often and she willingly participates in conversations with others. All of these were not part of her normal lifestyle previous to counselling. I believe she gained extreme confidence in herself – and the proof came when she applied to university entrance program and was accepted!

Observations About this Year's First Nations Family Counsellor Update

- There was a large increase in the number of students participating in Groups, both Aboriginal Girls Groups and Boys Groups. Students (and their parents) are seeing the value in what is learned and experienced in the Groups. Schools are also seeing positive school-related results from participants in Groups. The Family Counsellors are the strength of the Groups because of their group facilitation skills and their counselling qualifications and background.
- The number of students referred for individual counselling also increased.
- The Family Composition of students in counselling continues to indicate that Single Family households make up the largest group. 75% of the single family households are headed by females. This statistic has been quite consistent over time. Our statistics indicate that the new concept of “Transitional” family situations is quite evident and poses challenges for the students in that situation.
- There were higher numbers in some of the Key Issues identified by the Counsellors. This is primarily due to the high caseload in our alternate programs this year. Students in those programs have higher numbers of multiple issues such as: alcohol and drugs, depression, self-esteem, peer relationship conflicts and low motivation.
- The key issues that students are dealing with were fairly evenly split between girls and boys in many cases. However, girls outnumbered boys on the issues of Parent/Child Conflict, Peer Relationships, Self Esteem and Sex Education. Boys outnumbered girls on the issues of Anger Management and Violence.