

a day in the life of a SSP School Counsellor...



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I was a 'brand new' school counsellor when I landed at Rowland Hassall School (RHS) in 2008. The learning curve was so steep that at times I wondered if leaving behind my role as a secondary school trained Dance and Drama teacher was a wise move. My task was and still is, to support 40 students enrolled from grades 3 to 12, all of whom have mild/moderate intellectual disabilities as well as multiple mental health diagnoses. Additionally school counsellors who work in special settings such as Schools for Specific Purposes (SSPs), Tutorial Centres or in schools with support classes have the additional challenge of meeting the needs of the several other schools to which they have been allocated.

In spite of all this I truly enjoy working in such a ridiculously busy and exceptionally challenging environment. I am inspired by the level of commitment, care, compassion and positivity the teaching and support staff display, despite the physical and psychological risks that their work can sometimes involve. It is evident that the relationships staff build with each student is significantly protective against the many risk factors often present in the lives of students. The students have such significantly diverse support needs considering their varying levels of cognitive ability, as well as multiple diagno-

ses including Autism, Fragile X, Attention Deficit Hyperactivity Disorder, Oppositional Defiant Disorder, Conduct Disorder, Reactive Attachment Disorder, Anxiety and Depression which are all managed 'under the one roof'. Behaviour management strategies require daily review in efforts to minimise triggers and preventing difficult behaviours and negative interactions. Additionally, the learning styles of students are so vastly different requiring flexibility and adaptability in promoting safe and respectful behaviour and learning.

At Rowland Hassall School I provide two and a half counsellor days a week have been allocated to assist 40 students with highly complex needs. External agencies are vital in providing counselling and support for students and their families. Therefore the majority of school counsellor time at Rowland Hassall School is spent following up on referrals, liaising with caseworkers and paediatricians, meeting with teachers, executive and regional personnel, parents and carers to co-ordinate DET and external supports. Additionally, every student's educational needs and diagnoses must be regularly reviewed. Despite significant efforts to plan my days and to work proactively, I often find myself in a reactionary mode and my best laid plans must be changed, requiring flexibility and patience.

Providing counselling for students with an intellectual disability and mental health diagnoses can be a great challenge. Nearly every student at RHS has a severe language delay or disorder. Consequently talk-based therapies can be frustrating for some students (and the counsellor!). Generally speaking, getting back to basics has proved most useful. The important work of building therapeutic alliances and relationships with students can be difficult due to attachment and trust issues. However if a relationship can be built, its therapeutic value is substantial. Spending time in the playground with students and joining their activities is a great way to begin this process.

Basic reflective listening techniques can be particularly helpful for students with an intellectual disability because they are often limited in their ability to accurately recall, express, summarise and reflect upon their experiences and to understand their feelings. These basics are utilised often and anywhere, including the playground, to promote emotional literacy. Motivational Interviewing skills are valuable in assessing the likelihood of behaviour change and in working with ambivalence. Some Cognitive Behaviour Therapy strategies when simplified, adjusted and supported by visual aids can be useful for some students. Skills in play therapy are also very useful. Counselling sessions can usually be sustained for about 20 minutes depending upon the student's ability to maintain concentration.

Counsellors working in these types of environments need to work collaboratively to find support not just for students but for themselves. Further relevant research and professional development in the areas of intellectual disability and mental health will continue to enhance the skills of counsellors. Establishing a network of SSP counsellors could provide opportunities to share information, experience and debrief with colleagues in similar circumstances. Further, working in partnership with a mentor in the Health sector could provide invaluable support for counsellors in SSPs, particularly if the counsellor is inexperienced.

Improving outcomes for students with an intellectual disability and mental health diagnoses and for those who support them is a challenging and worthwhile endeavour. I am continually learning and feel truly thankful for the opportunity. ●

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