DIVERSITY

THE ISSUES FOR AND WITHIN FAMILIES

By
Rina Bajaj: Family Support Counsellor
Sonya Anjari: Young Person’s Counsellor
This session will cover:

- What do we mean by *Diversity*
- The issues for and within families
- Case Studies:
  - Family Support Service
  - Young Person’s Service 11-25
- Services offered to address the particular needs of family members
About EACH

- Developed to work with BME communities who were under-represented in services and treatment
- Specialises in providing a culturally appropriate service
- Counselling for:
  - Alcohol
  - Drugs
  - Relatives of drugs and alcohol
  - Domestic violence
  - Young people (Aged 11-25 Years)
- Outreach and keyworking
- Offer services in different languages
- Advice and Information
- Relapse Prevention, Reiki, Women’s Group, holding group for substance misuse
- Home visits, where appropriate
- Harm reduction education
- Detox Referral
- Satellite Provision in schools, GP surgeries
- Counselling (21 sessions)
- Aftercare programme
What do we mean by *Diversity*

For EACH as a service provider *diversity* means

**D**ifferent
**I**ndividuals
**V**aluing
**E**ach other
**R**egardless of
**S**kin, sexuality, sex
**I**ntellect
**T**alents or
**Y**ears

It is about improving equality of access and quality of outcome for all.
BME COMMUNITIES

The issues for and within families include

- BME families/users are not a homogenous group
- Differences arise from culture, age gender, faith, values and inter-generational life experiences
- Important to work with BME communities as 45% of ethnic groups live in London (Alcohol Concern, 2005)
Global issues around Diversity

- **Culture** - generational differences, cultural norms, expectations, culture conflicts, view on drug and alcohol use

- **Age** – concealed drinking by men and women, increased levels of drinking in young people

- **Language barriers** – first generation being able to communicate in their mother tongue in order to establish trust, acceptance and understanding
Gender - myths around women drinking, denial of use, izzat/honour, gender norms/expectations, complex needs of women (e.g. mental health and domestic violence)

Religion - informs thinking and choices people may make, drinking and drug taking may be prohibited, religious stigma associated with drug and alcohol use
Lack of knowledge of substances, their effects and treatment

Understanding of:

☐ Addiction
☐ Relapse
☐ Detox
☐ Rehab
☐ Exploring fears and misconceptions
☐ Not understanding social systems in the UK, such as the law, education, child protection, domestic violence
This affects attitudes to:

- drinking and drug use
- Where people access services
- How people use services
CASE STUDY: The family service

☐ 43 year old Sri-Lankan woman
☐ 3 children aged 18, 14 and 12
☐ Moved to England 6 years ago
☐ Restricted use of English
☐ Accessed support for helping her to cope with her eldest son who was using heroin
Family members

- What issues related to diversity might arise?

- How would you support this client?
Presenting Issues

- Blame
- Shame and stigma-standing in the community
- Anger
- Language barrier
- Fear
- Trust
- Denial
- Fear of being seen at EACH
- Feelings of depression and anxiety
- Low self-esteem
- Lack of knowledge about substances
- Confusion about what to do
- Generational and cultural differences
- Not understanding addiction
Support Offered

- Drugs education, signposted client onto other organisations, such as carers support
- Challenging the cultural belief of what counsellors can do- “waving the magic wand”
- Going with the client’s flow
- Reassuring client about confidentiality
Creating trust through providing a non-judgemental environment.
Adapted session to suit the changing needs of the client
Challenging the client’s thinking
Addressed the client’s needs
- Explored difficult feelings of anger, guilt and shame
- Challenging co-dependency- “tough love”
- Changes in client led to changes in son as he accessed support for his drug use
Young people aged 11-25

- What might be some of the issues faced by young people?
- How would you support young people?
Young People 11-25

- Fear of getting parent into trouble
- Embarrassed to bring friends home
- Curious to try the substance to see what the attraction is
- Fear to leave parent/carer alone
- Poor concentration
- It’s my fault
- Anger
- Low self-esteem
- “Will I have a problem with alcohol too?”
CASE STUDY: Young people
Support offered

- Building a therapeutic relationship is KEY
- Confidentiality
- Flexibility and consistency
- Home visits where appropriate
- One to one support and counselling
- Information on substance use
- Gestalt and Person Centred Approach
- Work with ‘unfinished business’
- Help to explore fixed patterns and how to modify them if they are not helpful
- Integrative, humanistic approach to work at the clients’ pace and with the client’s agenda
IN SUMMARY

- There are significant differences that arise from culture, age, gender, religion, values and beliefs and lifestyle choices.
- Treatment providers need to identify the particular needs that BME families present with.
- Interventions need to be culturally appropriate, gender specific and supportive.
- Services need to be accessible and reach out to families.
In particular, excluded groups from mainstream provision may present with a range of issues such as unemployment and lack of knowledge of mainstream services. Building a relationship of trust is crucial. Education on drugs and alcohol and their effect is important. Involving the family member is key to recovery.
PERSONAL ACCOUNT

- Emma Spiegler
- “What would have helped me as a teenager...”
 COMMENTS AND QUESTIONS