

COMMUNITY COUNSELLING – PROCESS AND CASE

ANALYSIS

Community counsellors work with a wide variety of groups and help the common people to solve their problems. They provide their services directly in the community. Women and children are the most socially and economically marginalized people in the community. This make them more vulnerable to abuse and harassment. The community counsellors of Kudumbashree thus focus on the women and children more.

As a part of Kudumbashree Gender self learning programme, 320 community counsellors were selected from 14 districts across the state. Community counsellors are selected women from Kudumbashree network as well as professional counsellors from the community. All of them are trained persons in counselling techniques, types and process. They received a three day training based on the module developed by counselling experts. These counsellors work in collaboration with gender resource centres of Kudumbashree and Snehitha gender help desk all over the state.

Community counselling and support services primarily aim to give premarital counselling, counselling services to the parents of BUDS/BRC children, old age people and adolescent students. Other than these focussed areas, community counsellors target group includes young couples, children, women who are victims of violence in family and workplace, people with psychiatric problems etc.

Services Provided

Community counsellors are involved with gender self learning activities by providing psycho social support, case study and analysis, legal support, crisis management, home visit, family risk assessment and risk management, gender based violence, domestic violence, sexual abuse, harassment, human trafficking, educational issues of children, referral services, awareness classes, counselling support to women in need, counselling support to the cases registered in block level community counselling centre, Gender Resource Centre and Snehitha Gender help desk.

Apart from taking group counselling sessions, community counsellors deal with a number of individual cases too. Over these years, community counsellors in the state dealt with a wide variety of cases and given them adequate support needed. The cases can be broadly classified in to five categories

1. Family issues
2. Adolescent issues
3. Mental health problems
4. Kudumbashree issues
5. Other problems

Community counsellors use various techniques such as case study, mental status examination, behaviour therapy, positive reinforcement etc.

Process of case analysis

The community counsellors are given the training for case study analysis. It includes

1. Personal details of the client, family background, current status : it includes age, sex, marital status, family tree, socio economic status of the client as well as the family.
2. History taking : it includes taking the family history, health status of family members (if needed) and details illness
3. Problem statement : the counsellor states the problem as mentioned by the client
4. Identifying underlying key issues and persons involved : counsellor analysis the problem and identify the key issues and persons involved in the issue
5. Contact with key persons (client and other persons involved, professional support if needed): counsellor contacts all the key personals and government authorities (if needed) and dates for sessions will be fixed.
6. Session wise details : number of sessions varies with each case
7. Possible solutions : counsellor helps the clients to reach possible solutions
8. Outcome : the outcome of the counselling
9. Referral (if needed)
10. Follow up
11. Case summary

Some of the brief case analysis details

The names and address of the client (and family members) are hypothetical considering their privacy and ethical standards of the profession.

Case study I

Background details

Ms. X, age 16 shows decreased academic performance and her family expects her to over perform all other students.

She wanted to study well and started going for extra coaching classes. But she started to feel dull at times. She could not understand what she read and used to sleep on the study table. She started getting angry easily. As per the instruction by one of her teacher, parents brought her for counselling.

Session 1

Counsellor talked to her normally with general things and daily routine. She talked about the studies and other problems.

Interventions

The counsellor teaches her some techniques for concentration. Counsellor taught her about relaxation techniques and meditation. Counsellor advised her to take proper sleep and participate in recreational activities.

Session 2

She brought the prepared timetable for study and the counsellor encouraged and appreciated her efforts. She started to sleep well and getting up early in the morning. Counsellor encouraged her to spent time with her family members more.

The counsellor talked to her parents as well regarding not to give too much stress on the child.

Outcome

The client accepted and followed most of the suggestions and she showed major improvement in her academics and life as well.

Case study II

Background details

Mrs. Y is a 44 year old female living in a socio – economically high class family. Her issues were decreased sleep, decreased talk, low self esteem, fatigue and emotional instability.

She approached the community counsellor because of the problems faced in the family. The family members used to tease her because of the altered behaviour of hers in certain times. As the community counsellor was a known person to her, it was easy for her to open up for support.

History

The patient was living with the family for the last 16 years. She has a major financial crisis in the family and her own parents and siblings didn't help her during that time. Her husband is also not in a good relationship with her because of this reason.

History of past illness

She had a past history of depression at the age of 28 and did undergo medication at that time. No other person in her family is affected with any psychiatric illness.

Motor behaviour: Appropriate

Attention and concentration: easy to arise but not sustained

Orientation: present to place, person and time

Memory: normal

Thought process: disturbed

Mood: anxious and fearful

Interventions

She has given counselling sessions and suggested for family therapy (3 sessions) And MBCT.

Give referrals in case of need

Case study III

Mr. X, 24 years, female

She approached the counsellor after a year of her marriage. After her marriage, she was not able to live happily. Her mother in law was harassing her without any reason. Sometimes it went to the extent of physical abuse. She left the matrimonial home and started to live with her parents.

Session 1

Counsellor talked to the client in detail. She talked about the issues with the mother in law and her husband was always supporting his mother.

Session 2

Counsellor contacted her husband and mother in law. They organized a meeting at the Panchayat office. Counsellor talked to them in detail.

Four counselling sessions were given to them.

The mother in law took the client back to the home.

For a few months, follow-up was done.

Now they are living happily and have a one year old child.

Outcomes of community counselling programme

- Community counsellors can be provided services in a range of ways. Rather than defining counselling or group work, community counsellors are powerful tool in the society to make interventions
- They try to decrease the trauma of people exposed to violence and negligence
- They have the ability to challenge the power, and rise of up common peoples rights
- They are able to provide improved emotional support.
- They could serve people with available resources and support systems of the society.
- They are capable of giving support to adults, parents of specially abled children and old age people etc

