



A member of the Action
Mental Health Group
Celebrating 25 years of counselling



Annual Report 2018/19

Chair's Foreword

Stephen Robinson



This has been a busy, challenging and enjoyable year for New Life Counselling. As well as celebrating our 25th anniversary in December 2018, we have spent considerable time and effort maintaining and developing our counselling services. This has been a demanding exercise within the context of a challenging funding environment, which is exacerbated by the continued suspension of our devolved government at Stormont. Uncertainty around Brexit and its funding implications brings further complexity to our forward planning. Despite the challenges, we have continued to provide a high quality counselling service in our existing premises in Bloomfield and in Ardoyne as well as starting to deliver our BACP accredited services at 'New Colin Counselling.' In the Colin area we now provide

counselling for adults and children in areas of need, including Poleglass, Twinbrook, Mount eagles and Lagmore. The focus of New Life's work has always been to offer vital support to those in need. We have worked with adults and young people within local community settings since the organisation was established as a youth and parent resource centre in 1993.

In April 2018 we became a wholly owned subsidiary of Action Mental Health (AMH), with a shared mission to further develop our counselling services, so that we can reach more individuals and families in need. During the year, we have continued to work closely with their senior management team and the trustees of both organisations to lay plans for the future that will ensure the continuity and development of New Life Counselling within the AMH group structure. We remain excited about this stage in our development and look forward to a future where we can provide much needed services to greater numbers of people.

Over the years, New Life has built close partnerships with a range of stakeholders, including our funders, both statutory and voluntary. On behalf of our board, I would like to extend gratitude to all of our funders, in particular the PHA and the Health Trusts, as well as to all other parties who have played a role in funding our services in recent years. I would also like to take the opportunity to thank our board members for their commitment to our organisation. During the year two board members have left the organisation, Suzie Hunter and Annie Melaugh-McAteer, but we have welcomed a new boardroom apprentice and have continued to benefit from a reinvigorated board as a result of recruitment during the previous year. I would like to encourage continued engagement from all board members in building a successful team that includes the board, senior management, administrative staff and all of our counsellors.

New Life continues to be led by Norma Patterson, who remained in post after the resignation of our former CEO, Karen Collins. Karen has taken up a new role as CEO at Aware and we wish her and Aware every success in the future. Norma continues to bring a great deal of experience and creativity to her role, and, on behalf of the board, I would like to thank her for the continued energy and commitment. Sincere thanks also to our team leaders and clinical staff and volunteers led by the Head of Clinical Services, Andrew Sutherland, and to our Support Services team led by Bernie McAteer.

As I conclude this foreword, I would like to emphasise the importance of the work of New Life Counselling within local communities. New Life counsellors work with our clients, to support them and to empower them to make changes in their lives. Northern Ireland still faces considerable challenges dealing with adversity, inequality and the legacy of the Troubles and the work that New Life Counselling does is of vital importance. We hope that current trends within the wider society of talking about mental health will continue so that there is less of a stigma and more of an understanding about the reality of mental health issues and how they will affect many of us at some point in our lives. We hope that during the years ahead New Life Counselling can support more individuals and families to improve their mental health and wellbeing, particularly through the opportunities that our partnership with Action Mental Health will bring.

Chief Executive's Foreword

Norma Patterson



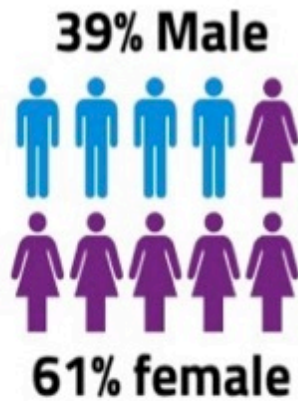
So much has happened with New Life Counselling over the last year. Not only did we become a wholly owned subsidiary of Action Mental Health and celebrate our 25th Birthday, but we also continued to significantly develop our services. The opening of our New Colin Counselling service in late 2018 has proved to be a very positive development with many referrals being seen from this new venue located in the Colin Family Centre and two venues in Lisburn. This year we have delivered more sessions from our East Belfast Office than we have from our North Belfast one. This proves the high level of need from this area, as well as from Ardoyne where our head office is located. As a result of this development, we now have bases in North, East and West Belfast, and we have begun to deliver a small portion of our services from Action Mental Health Offices in Ards.

We were delighted to receive funding from the National Lottery Community Fund to expand our child services to work specifically with children with ACE scores of 4 and above. This work is being evaluated by QUB and we very much look forward to preliminary results for this. The need for us to work closely with CAMHS services and to establish a seamless referral process for children into community based counselling services pre and post CAMHS continues to be vital, as is Trust funding for our work to integrate services in the stepped care model. The absence of a government in Stormont is making progress with these strategic conversations very slow. Our adult work continues to grow and develop in the areas of suicide prevention, victims and survivors support, and postvention, and we have been developing ways of measuring and evaluating this very sensitive and important work. We have also taken part in several research projects, spearheaded by QUB, investigating transgenerational trauma and the impact of ACES in adulthood. Our Family project has continued to progress steadily both through our partnership with Healthy Living Centres in North Belfast as well as our services in Bloomfield and from Aware NI offices in Duncairn. Our Volunteer team has also grown and expanded this year with placements being offered to MSC Art Therapy students, CBT Practitioner students and Youth Counsellor students as well as several Adult Counsellors and a Family Therapy placement being filled this year as well. All-in-all, it has been a year of growth and consolidation for all of our projects.

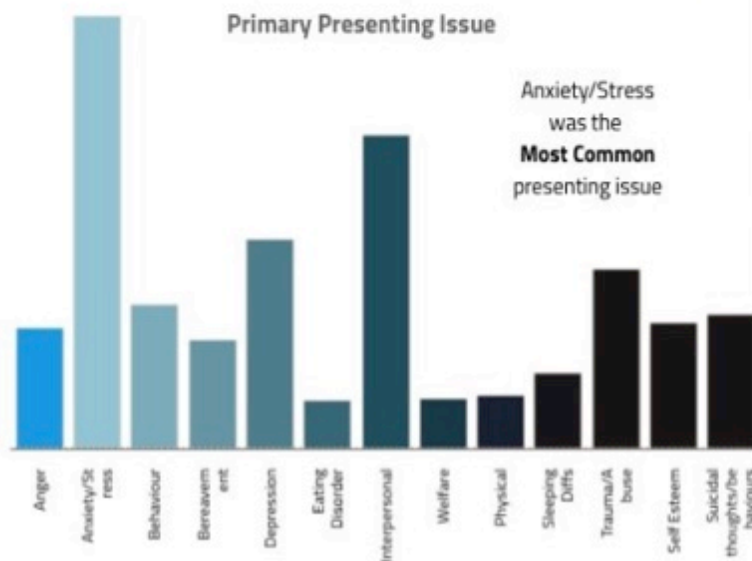
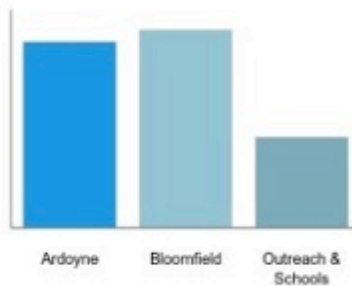
We were sorry to say goodbye to our former CEO, Karen Collins, who did not return to the organisation after the birth of her son but instead took up the post of CEO with Aware. We wish her well and look forward to working together in the future. We have been delighted to welcome a new Board Room Apprentice in 2018-19, as well as two new Board members from Action Mental Health. They have brought a wealth of experience to their roles, and this has significantly strengthened our clinical governance and greatly assisted our resources and risks committee. We also sadly said goodbye to two members of our Board.

Whilst it has been a challenging year with much to do, it has been an honour to work with such a hard-working, positive and robust team who are so totally committed to delivering high quality counselling services to all ages throughout NI. Getting to know our Action Mental Health Colleagues has also been a great adventure and I am very excited for the future of our work together.

2018/19 Impact at a Glance



Delivery by Location



13,065 sessions

2,224 clients

BACP Service Accreditation Maintained

bacp Accredited Service

Ongoing Group Partnership with AMH throughout 2018-19



Breakdown of Client Numbers

Family Therapy

52

586

OKAY

Adult

1586

84

Groupwork sessions

f 2,577
LIKES ON FACEBOOK
facebook.com/newlifecounseling

1,318
FOLLOWERS ON TWITTER
[@NEWLIFE_NI](https://twitter.com/NEWLIFE_NI)



What Our Clients Say



92%

felt we responded well to their needs



99% said "Very Well"

"How well did your therapist listen to and understand your problems?"

Counselling helped me regain the perspective that I had lost over the last year and gave me some new tools to help with my anxiety

Counselling helped me grow strong and work through lots of problems

Brilliant. I feel completely different from when I started. I am in a completely different frame of mind leaving

I really trusted my counsellor. My mood has improved and I no longer have suicidal thoughts

Counselling helped me regain the perspective that I had lost over the last year

My little boy's counsellor was great. She took the time to really listen to him. Through play she got him to open up and to relax

My counsellor helped me to relax and talk openly about my problems and worries

Thank you so much. Counselling has made a very positive impact on my family's life

Thank You!

We would especially like to thank the following funders who make New Life Counselling's work possible:

- Public Health Agency
- Department for Communities (Neighbourhood Renewal)
- Belfast Regeneration Office
- Victims and Survivors Service
- Education Authority
- Belfast Mental Health Hub
- Henry Smith Charity
- Northern Mental Health Hub
- South Eastern Mental Health Hub
- Urban Villages
- BBC Children in Need
- National Lottery Community Fund – Supporting Families
- National Lottery Community Fund – Empowering Young People
- Belfast Health and Social Care Trust
- Cash 4 Kids
- South Eastern Trust
- Belfast City Council



Income and Expenditure

Income (£)		
	2017/18	2018/19
Donations and legacies	42,678	39,452
Revenue Grants	926,932	1,023,622
TOTAL	969,610	1,063,074
Expenditure (£)		
	2017/18	2018/19
Counselling Services	827,621	861,886
Support Costs	136,356	140,795
TOTAL	968,349	1,008,936



Only Kids

and Youth (OKAY) Counselling

The OKAY team are a mix of child and youth therapeutic specialists who use art, music, drama and play to support troubled young people and children to express emotions in healthier ways and to feel better. During this annual year, 586 children and young people were seen by our OKAY team through a number of projects:

- Community work delivered in our premises in North and East Belfast
- Independent Counselling Service in Schools
- Our Families Together partnership Project with Parenting NI
- Our partnership with 4 other Healthy Living Centres in North Belfast through 'Supporting Families North Belfast'
- Children in Need funded work for children who have experienced parental separation.
- Our Urban Villages Youth Access outreach project working with youth groups to teach resilience and stress management.
- Trust funded work for "Looked After" Children.
- Creative Art Therapy Group work based in Windsor Woman's Centre.
- School based counselling in the following Primary schools: Donegal Road P.S, St Anne's P.S, Our Lady's P.S., Fane Street P.S, Braniel P.S, Holy Rosary P.S, St Mary's P.S, St Aloysius P.S.



CASE STUDY

Thanks to all clients who have agreed for us to share anonymised information in relation to their case.

A female client aged 11 years old attended 6 sessions of Play Therapy. The client's referral issues were high levels of anxiety, academic / learning difficulties and some behavioural issues.

During sessions 1-3 the client and therapist worked on rapport building, coping strategies to promote grounding / aid calm and exploration of anxiety. During sessions 4-6 the client explored other fears and directive approaches were offered to enable the client to build upon her skills to manage worry and anxiety.

The client engaged well in sessions and used a range of the play therapy tool-kit to process her emotions and big feelings. The use of creative visualisation, artwork, sand-tray, specific workbooks about worry and talking about the client's feelings and fears were used in a directive and non-directive approach.



By the final session the client felt that her levels of anxiety had reduced significantly. She was also not struggling academically with the same issues that she had been struggling with at the start of the sessions. Behaviours that had caused concerns were now being managed better by the client as she was using the coping strategies on a regular basis. This enabled her to feel empowered and also more in control. The client said she, "Didn't feel worried about things now."

The therapist found it really encouraging to hear that after the client's 4th session she had started to utilise coping strategies and had been able to remain calm on two occasions whilst waiting on a parent returning home when her mum was running late after school. The client was able to talk calmly on the phone to her mother on one occasion and on the second occasion had been able to wait outside her home. Previously, if this had happened the client would have been in extreme distress and found it hard to even talk due to being anxious and upset.

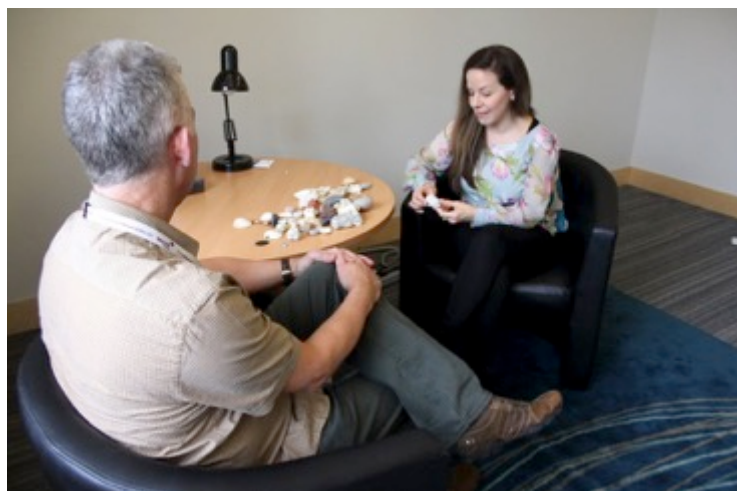
Overall, by the end of the 6 sessions the client and her parents were very happy with the progress she had made and they were able to positively comment on improvements they had also observed in the client's behaviour, such as a reduction in anxiety levels, increased confidence and a clear use of coping strategies.



Counselling for Adults

The Adult team have faced many challenges this year, but more importantly there are also many achievements to be celebrated. As always the service has been extremely busy delivering 7420 sessions to 1586 adult clients. Within the Adult Project, counselling is provided for clients over the age of 18 years. There is no upper age limit and with an aging population there are an increasing number of older adults requesting counselling in the later stage of their lives. This is very welcome.

The world we live in is ever-changing and increasingly challenging. The pressures and stresses individuals and families are experiencing are evident. Anxiety, stress, depression and interpersonal issues remain the most common presenting issues. Adult clients usually present with a variety of issues and often with complicated personal histories relating to their families and communities, some of which are, of course, unique to Northern Ireland. Trauma continues to run through the majority of our work and the intergenerational trauma of the troubles continues to impact. We celebrate difference and diversity and embrace the uniqueness and individuality of our clients. Our team of professional practitioners work from a variety of modalities and approaches. We are client led and so tailor our interventions to the needs of our clients. Many of our clients have complex presentations. Through counselling, many clients find ways to make positive changes and live happier lives despite difficulties. Our service has not only enabled and empowered clients to improve their mental and emotional well-being, but have also helped so many to reduce the risk of self-harm and suicide.



There is a powerful need for psychological therapies within Northern Ireland and an ever increasing demand for our services, which is reflected by our waiting list. Self-referrals remain high but many of our clients are referred through statutory services and considerable contracts remain for the delivery of therapeutic services with numerous organisations within the community and voluntary sector. We are grateful to our many funders who make our work possible. Multiple funding streams ensure that clients are able to access therapy through a variety of referral routes thus reducing barriers to engagement. Through our partnership with Action Mental Health we have also been able to increase our availability further, through developing additional counselling venues allowing more local support to be offered.

Many of our present challenges will remain throughout this next year, for example political uncertainty, the socio-economic climate, and a competitive employment market, but our work will continue with our clients being central to our process. We provide evidence based and research informed practice but the greatest testimonial of our work is the voice of our clients. These are some of their stories:

CASE STUDIES

Self-referral: Conor arrived at work on numerous occasions with bruises on his arms, neck and face. Initially he was able to convince his work colleagues that he received his injuries on the football pitch. He worked as a chef in a local restaurant and began to find it difficult to focus and complete routine tasks, the standard of his work deteriorated and he appeared increasingly distracted, hyper vigilant and socially withdrawn. Challenged by his best friend, he eventually admitted that his wife 'had a temper on her' and would 'fly off the handle at the slightest thing and punch and slap him'. He didn't think this happened to men. His embarrassment, shame and fear of admission silenced him. His friend recognised that Conor needed professional help and having driven past the New Life office suggested that 'he try there'. Conor, accompanied by his best friend, 'dropped in to New Life'. He spoke with one of the counsellors and completed a referral form. Through the relationship with his counsellor he began to feel safe enough to begin talking about his relationship with his wife over the years and work with the associated thoughts and feelings. He was eventually able to name the abuse and begin to work through his experience of domestic violence. Conor chose to end the marriage.

"For years I thought there was something wrong with me, counselling helped me to understand that I wasn't to blame for my wife's behaviour. I came to the realisation that I didn't have to suffer in silence and simply endure the emotional, mental and physical pain of the abuse. I learnt that I have the right to a happy and safe life."

GP referral: Collette had been off sick for 18 months following workplace bullying. She chose to resign but she believed that due to her age she 'may not work again'. Her future felt uncertain. Collette presented for counselling with anxiety, depression, sleeping difficulties and alcohol dependency issues. During her counselling she was able to identify, acknowledge and express feelings of sadness, anger and confusion. Through the time and space of therapy, she was able to grieve the loss of her job, her career and her friendships with her colleagues. She was able to begin to reassess her present situation, and using psychoeducation and some CBT Collette worked with the anxiety, depression and sleeping difficulties. She was able to moderate her drinking and, feeling 'better', she commenced voluntary work. This gave her hope for the future and a connection with the world around her.

"I was so unhappy and felt that my life had no meaning or purpose. I couldn't work out my future. It just seemed empty and pointless. Counselling helped me to understand how losing my job had affected me so deeply. I learnt how to help myself and find a different perspective. I feel that I am regaining control over my life again and it feels really good."

VSS referral: Three years ago while Cathy was watching TV with her three young sons, two masked men walked into her home, smashing up the furniture and terrifying her and her children. They were screaming and shouting abuse and accusing her of things she knew nothing about. Before that day she described herself as happy, confident and full of life. Although those men stole nothing from the house, Cathy described how they had stolen her happiness. She presented with trauma symptoms, including flashbacks, nightmares, high anxiety, eating issues and depression. Cathy worked with a practitioner trained in sensorimotor psychotherapy and was able to work with the trauma held in her body. She improved her self-care and began to use mindfulness, breathing techniques and yoga. Her symptoms reduced and her well-being increased. She was able to integrate the trauma of the past.

"I was so unwell when I first met my counsellor. I was scared all of the time. I couldn't eat, sleep and rarely left the house although I didn't feel safe there either. I felt hopeless and I was so sad. Counselling was really hard at first but my counsellor was so patient and kind. I am now rebuilding my life and am so enjoying being a mum again."

Postvention Service

Sadly, rates of suicide remain high within our communities with many individuals and families deeply impacted by the loss of a loved one through suicide. Through the postvention service we continue to provide bespoke bereavement support. Although grief is a natural and normal process, suicide is sudden and traumatic by its nature. Therefore, the bereavement support provided needs to be specific and timely.

Trust referral: Clara's husband died by suicide 6 months ago. Following an initial contact call we provided a home visit. Clara didn't want any other family members present as there were certain things that she wanted to discuss. Clara disclosed how her husband had been 'unfaithful'. He had admitted this to her and it was not the first time he had an affair and it became apparent that Clara wanted to talk to someone about their marriage. After finding out about the most recent affair she had decided to leave him with the children, she couldn't cope with his behaviour anymore. He threatened to end his life but she never thought he would actually do it. He adored his children and they him. Clara had been offered support immediately after his death but declined. Now she felt ready to talk. She commenced ongoing counselling to help her work through her grief. Clara had many thoughts and feelings. She was angry, sad and confused. She felt blame for her husband's death and was afraid of a future without him. Unable to return to work she had become socially isolated, lonely and depressed, and was finding it increasingly difficult to manage her children and care for them in their grief. Counselling offered a safe place to talk.

"I never felt judged by my counsellor, not once. She helped me to understand that I was not to blame and that my husband made a choice. I loved him and miss him every day. I know that I have a long way to go but I don't feel now that I have to do it on my own".

Deaf Project

Our counselling service for the deaf and hard of hearing is delivered by a counsellor with Level 3 BSL, making it the only service of its kind in Northern Ireland. The service offers counselling to clients who previously may have experienced difficulty accessing support in a safe and confidential relationship. By gaining a clearer understanding of themselves and the world around them, clients are able to make better life choices and decisions.

Self-referral: Charlotte suffered years of abuse by her mother. As an adult she consequentially had difficulties relating to her peers and always felt inferior to those around her. This made her vulnerable to further abuse. She used to self-harm to manage feelings of shame and self-hate. With a signing counsellor she was able to disclose the extent of the abuse and talk about her experience for the first time. She was able to separate herself from her abuser. She had always seen herself as unwanted and unlovable, but through her relationship with her counsellor she began to relate differently to herself and those around her. Her self-care improved together with her self-esteem and confidence, and she gradually made friends and developed a social life.

"I never thought that I would ever be wanted by anyone but now I have friends and a social life. I feel free and am having fun! It's amazing. Counselling was really hard but I am so glad that I did it."

Counselling for Families

All families experience difficulties at one time or another and our team of Family Therapists are here to help when family members are struggling to cope with their situation. We offer systemic family therapy in the understanding that the system that surrounds children, young people and families can influence how people feel and behave. A system can include family members, school, friends, work, community groups, neighbours and/or other professionals. Family Therapy involves family members meeting together to understand each other's views and stories, beliefs and emotions and build on existing strengths. We discuss possible ways to move forward and make constructive changes to bring improvement in family relationships and behaviours.

We work in Family Therapy teams, that is, one to two extra family therapists listen and think whilst our Therapist and family talk with each other. The Team's job is to be helpful through making observations/suggestions either to the Therapist or family; Literally 'two heads are better than one' in understanding difficulties and working with family members to resolve issues.

During 2018/19, we worked with 52 families in North and East Belfast. In our first year of using SCORE evaluation tools, 67% of families showed great improvement in communication and family difficulties, which was further supported by a reduction in reported family stress scores.



CASE STUDY

Family Q were referred for family therapy due to the parents struggling to understand and manage their eldest son's behaviour towards other family members. The parents and grandparents struggled to be compassionate with him due to his behaviour. This was impacting on parental confidence, family functioning and relationships within the wider family circle. Well established routines were in place for meal times and bedtimes, and the son did not meet criteria for Autism diagnosis and was awaiting ADHD assessment.

While working with family Q, we listened to how family members understood their current situation. In taking the time to slow down the stories each family member told, and by asking questions about why people do what they do, we encouraged thinking about how beliefs, physical health and

well-being, family stressors/worries and trauma impact on people's understanding of their situation. It also allowed for the emergence of other stories of what family members used to do and enjoy. This lessened the tension and allowed opportunities for laughter and warmth, introducing other possibilities for relating.



In exploring routines, a new understanding of how the eldest son's behaviour was established in anxiety rather than anger was revealed. This helped family members identify different routines that may increase his confidence to manage anxiety and how parents could support him. Spending individual time with each child eased stresses, as the sons were no longer in competition for mum and/or dad's attention. As mum's confidence increased, the negative stories she held about herself as a parent became diluted, allowing opportunities for her to trust in her ability to contribute to the resolution of family issues. Parents joined in managing issues together, including their financial worries, caring for and being responsible for their sons. The son's aggressive behaviour reduced and the younger son was given space by his brother to develop his interests and hobbies. Both children were able to talk about the difference of playing together in session and at home and this enabled further small changes in responding to difficulties between the sons that resulted in less tension and stress in relationships. Family communication improved significantly, confidence in parenting skills increased and family members held a greater recognition of their ability to work together to create a loving and caring environment for all family members.

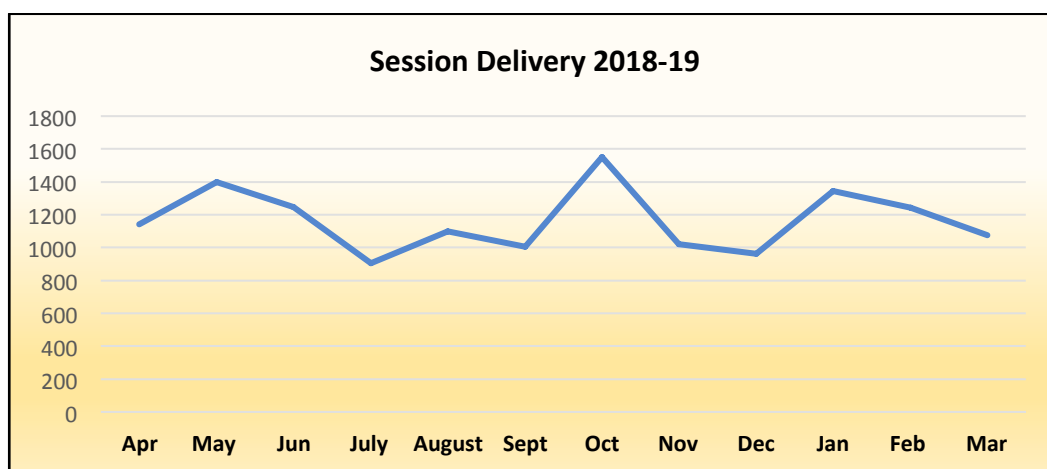
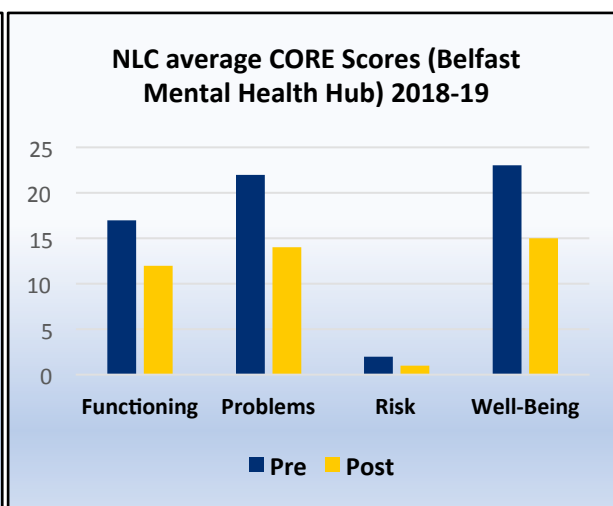
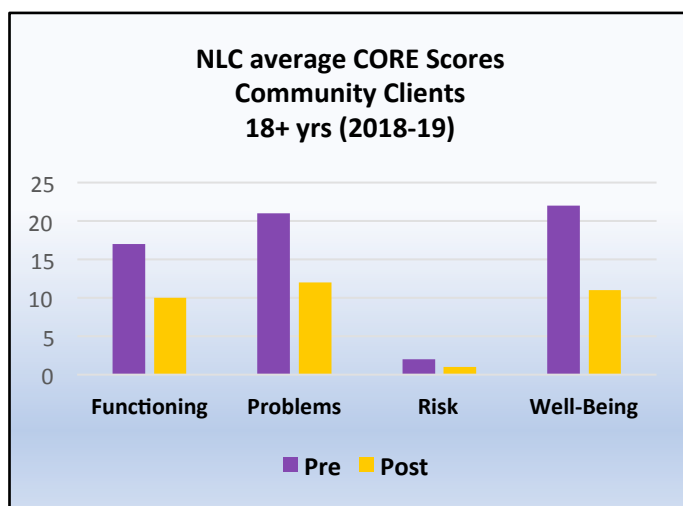
Evaluation Outcomes Summary

Summary of closed cases – planned; Apr 2018 – Mar 2019 (CORE Net evaluation)

*Reliable Improvement means the client has statistically moved by 5 points on the CORE measure. Clinical and Reliable change means the client has moved both from above to below the clinical cut off and has moved a statistical amount.

Client Group (NLC)	Reliable Improvement %		Clinical & Reliable Change %	
	(18/19)	(17/18)	(18/19)	(17/18)
<u>VSS Clients (+18 yrs.)</u> <i>Impacted by the NI conflict. Trauma, Bereavement, Injury primary presenting issues</i>	61	57	31	31
<u>Young People (11- 16 years)</u> <i>Anxiety / Stress & Self Esteem primary presenting issues</i>	57	51	n/a	
<u>Community Clients (All Ages)</u> <i>Anxiety / Stress & Depression primary issues</i>	53	65	39	41
<u>Belfast Wellbeing Hub (+18 yrs.)</u> <i>Step 2-3 mild to moderate mental ill health.</i> <i>Anxiety / Stress primary presenting issue</i>	53	56	33	38
<u>South Eastern Trust Wellbeing Hub (+18 yrs.)</u> <i>Step 2-3 mild to moderate mental ill health.</i> <i>Anxiety / Stress primary presenting issue</i>	62	n/a	37	n/a
<u>Postvention</u> <i>Family members bereaved by suicide</i>	63	n/a	n/a	

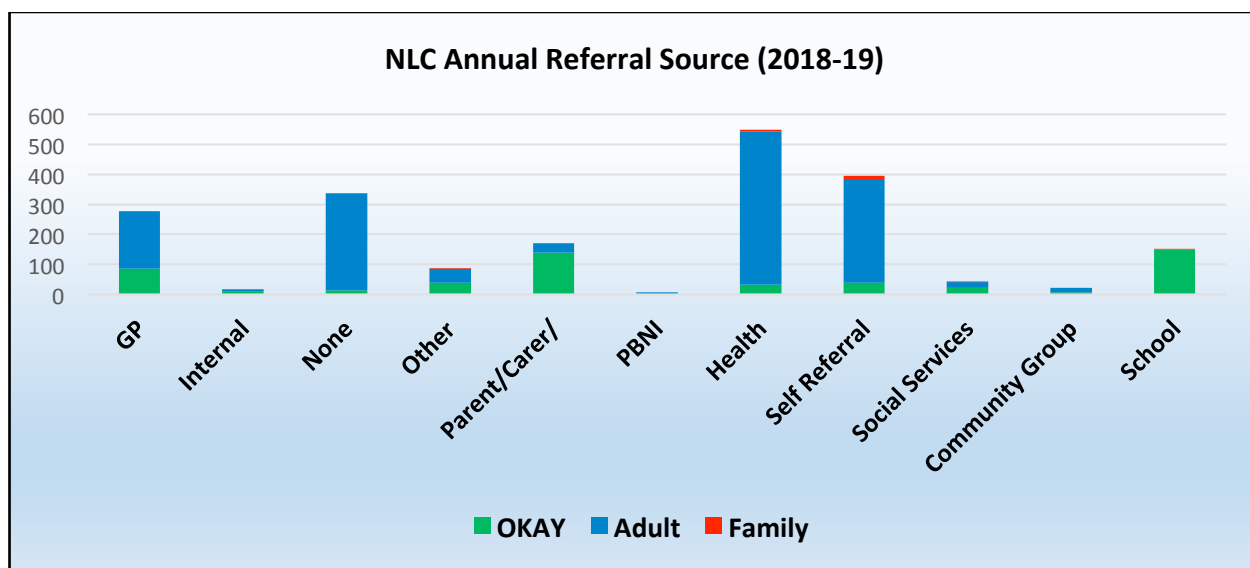
Session delivery 2018-19

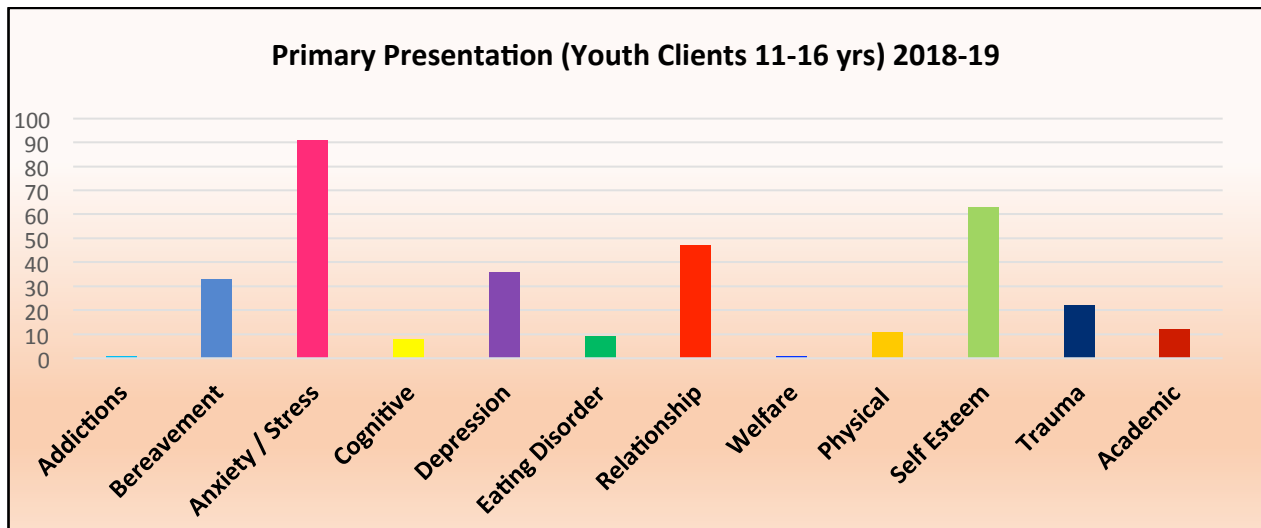


Organisational % DNA rate (including CAN less than 24 hours): 2018-19 (13%)

Apr 2017 – Mar 2018 (19%)

Referrals





Family Therapy

Henry Smith Funded Clients: (Closed Cases: 01/04/2018 – 31/03/2019)

23 Families (67%) demonstrated significant positive progress via decreased scoring (*Overall Average Reduction = 9 points on the SCORE measure*).

This was evident via improved **Family Strengths & Communication**, along with increased perception of **Coping** and related strategies.

Irish Family Functioning Clinical Norm		(Fay et al, 2013)
Average score:	Child/Adolescent	Parent
	1.0 to 2.9	1.0 to 1.9
Significant problems	3.0 and above	2.0 and above
top 10% of study population	4.4 and above	3.0 and above
NLC Parent Average		NLC Child / Youth Average
2.58	(Significant Problems)	2.36 (Average)

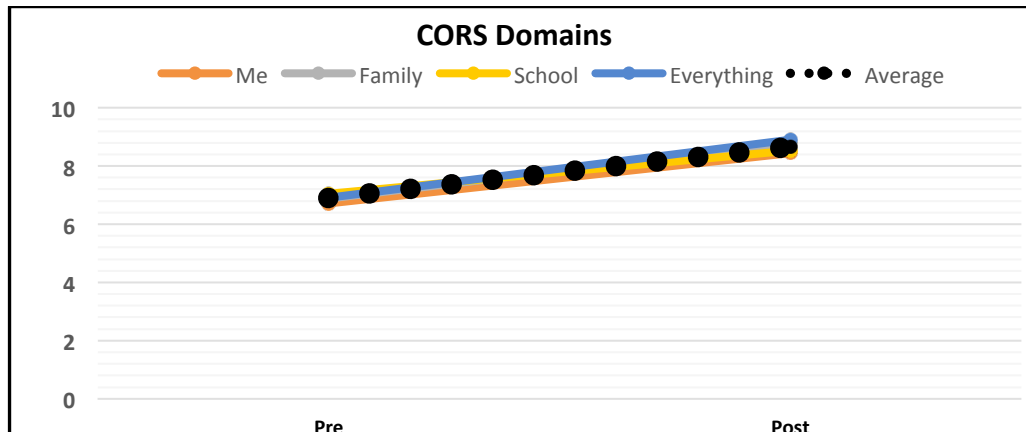
In comparison with Irish Family Functioning Clinical Norms, average parent scoring for New Life Counselling clients was relatively high (Significant Problems), with lower (Average) scoring for child and youth family members.

Child & Youth Therapy

'BBC Children in Need' Funding



CORS Analysis* completed for clients aged 6- 11 years **(Increased scoring reflects positive progress)*



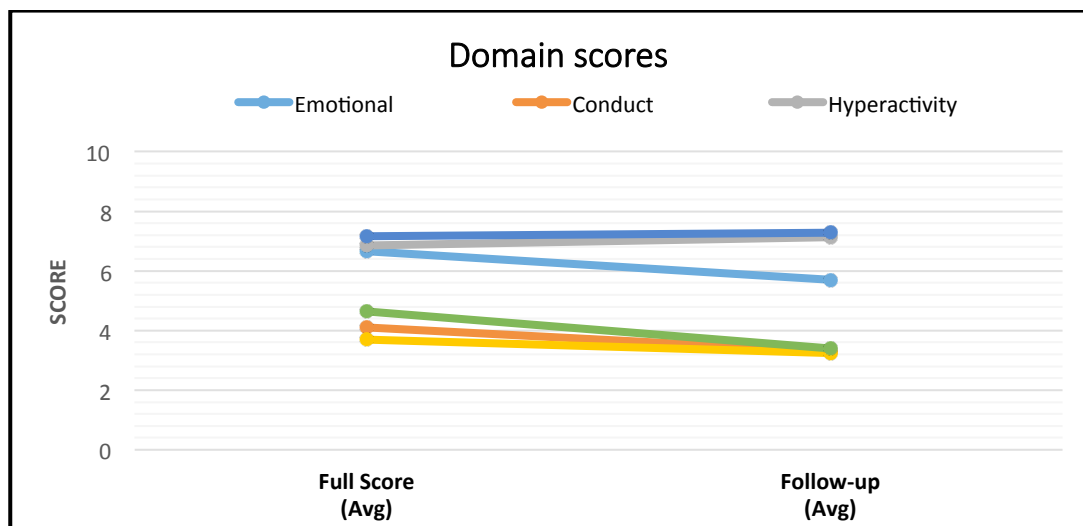
*In summary, there was significant positive progress evident for 'BBC Children in Need' clients.

Reliable Improvement requires movement of 5 points on the CORS scale and this was evident for overall results above.

This overall result is also highlighted by positive results (pre v post) in subscales where clients are reflecting on themselves generally and their feelings about family, school and life in general.

Strengths & Difficulties Questionnaire (SDQ) BBC Children in Need Clients (Parental Responses)

**SDQ – Reduced scoring reflects positive progress*

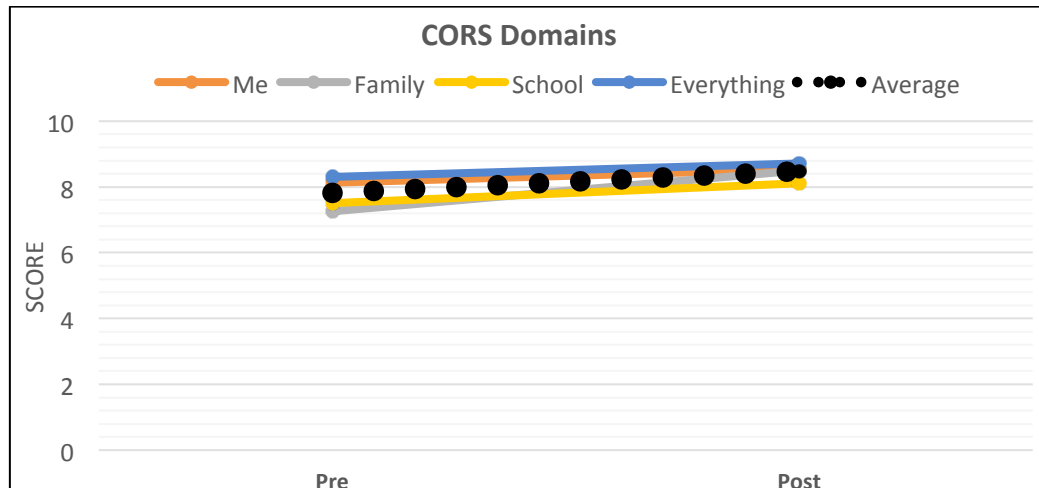


*In summary, there was positive therapeutic progress evident for Children in Need clients, based on Parental responses and reduced scoring overall.

This is evident for Emotional Symptoms, Conduct and Peer Problems.



CORS Analysis* completed for clients aged 6- 11 years **(Increased scoring reflects positive progress)*

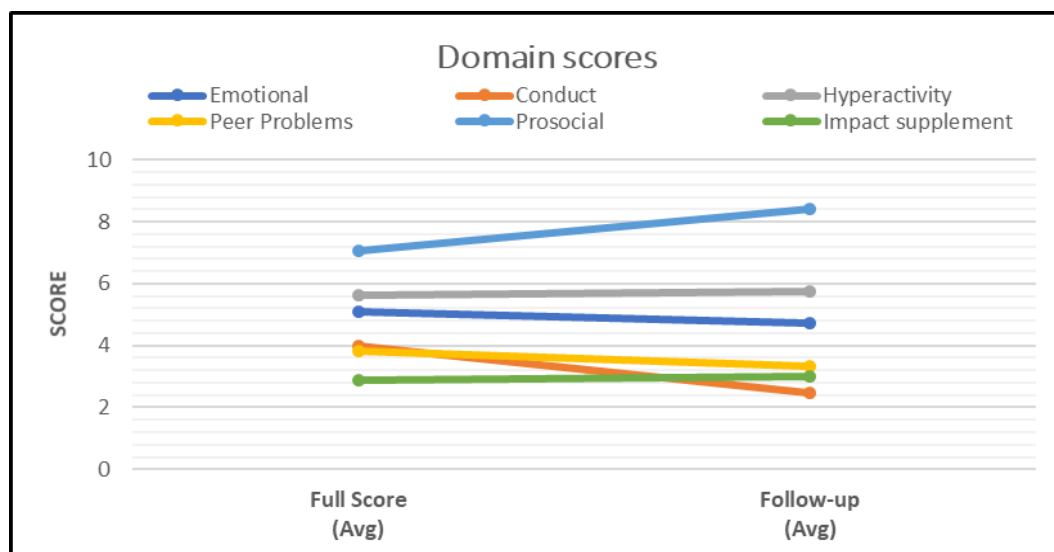


CORS analysis indicates positive progress across all subscales pre and post analysis for children engaged with the Time Together Programme (2018-19).

Supporting Families North Belfast

Strengths & Difficulties Questionnaire (SDQ) SFNB Clients aged 11-17 yrs. (Parental Responses)

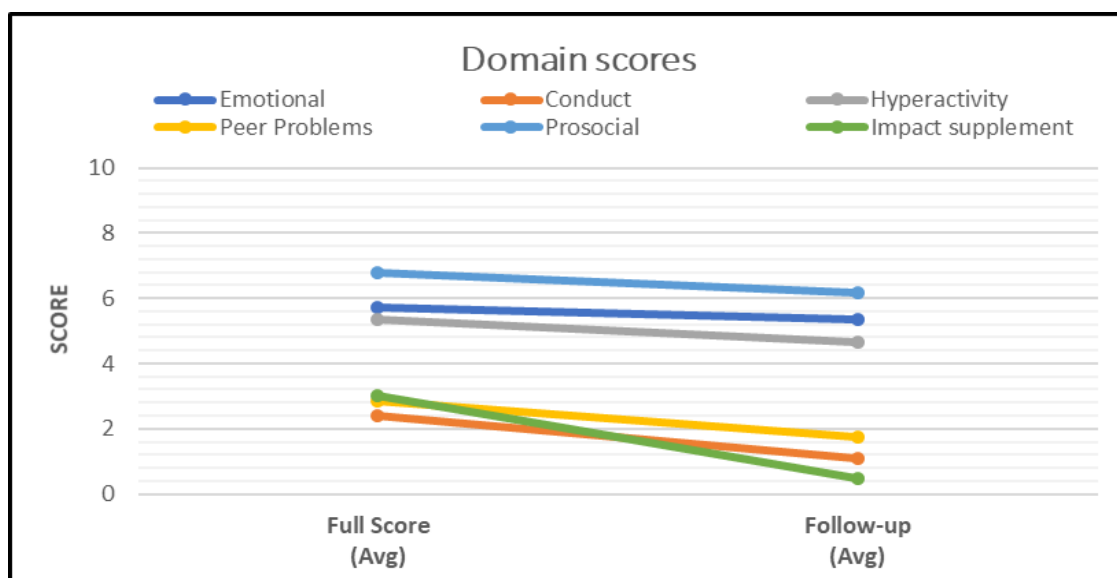
**SDQ – Reduced scoring reflects positive progress, apart from 'Prosocial' where increase reflects progress*



*Results for 2018-19 indicated positive therapeutic progress evident for SFNB clients, based on Parental responses.

Positive therapeutic progress from parental perspective in Conduct, Peer Relationships and Prosocial Behaviour (e.g. Sharing, kindness).

SFNB Clients – SDQ Results (2018-19) Teacher Responses



*Positive therapeutic progress overall for SFNB clients, based on teacher responses. Improvements noted in Peer Problems and Prosocial domains (e.g. sharing).

There is also improvement (Pre vs Post), evident in the 'Impact Supplement', which is a measure highlighting any perceived problems that require further attention.

Board of Directors

Stephen Robinson

Chair

Gabi Morhinweg	Vice Chair
Louise O'Boyle	Treasurer
Susie Hunter	Secretary
Gerard Lynch	
Annie Melaugh McAteer	
Damian McAuley	
Jenny Diamond	Boardroom Apprentice
Angela Craigan	
Susan Cooke	
Jonathan McAdams	

Senior Management Team

Norma Patterson	Chief Executive Officer
Andrew Sutherland	Head of Clinical Services
Sarah Grant-Jones	Adult Team Leader
Mervyn Reid	Adult Team Leader
Alison Templeton	OKAY Team Leader
Wendy Stewart	Family Team Leader
Bernie McAteer	Support Services Co-ordinator

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A member of the Action
Mental Health Group

