

Major New Development for Willows

In researching and developing approaches to wholeness and recovery, it has become apparent that there are a range of complementary services that are much needed, which Willows can provide.

Willows would like to provide:

1. A Debt Counselling Service

Currently the level of debt in the UK is the equivalent to every man, woman and child being in debt to over £3000 each. (excluding mortgages)

2. Counselling for the needs of Children and Young People

Recent research showed that 63% of young people wanted someone to talk to about their problems.

The Willows has been providing a Christian based Counselling Service to the Swindon community for the past ten years. So successful is the demand for the service that Willows has outgrown its current accommodation at 496, Cricklade Road.

3. Stress Therapy and Relaxation

Stress is now endemic in British culture and accounts for a major demand upon Health Services.

Relaxation techniques and programmes can complement pro-



Willows is moving on

Willows currently needs:

- A separate Waiting Room for clients
- Further Counselling Rooms
- Meeting Rooms
- More Office space
- A Library for Students in Training
- A Counsellors Rest Room

grammes of stress reduction. Massage provides recovery from bodily-held results of trauma and also unresolved insecure attachment, as well as aiding stress relief.

4. Art Therapy and Sand Tray Therapy

These provide effective mediums for recovery, particularly for people who wish to express themselves in other ways than just talking.

5. Facilities for Family Therapy and Groupwork

An increase in referrals for couples and family work highlights the importance of working with 'whole family systems'.

6. Extending and Developing Trauma Based Work with Specific Facilities

Many people are referring to Willows with issues of early life trauma that are not catered for in short-term counselling offered in Health and Work settings.

This is a major new undertaking that may well cost something like £1,000,000. However, it will enable a competent, creative, and comprehensive Christian response to the communities needs.

- Would you support Willows to achieve this, in prayer, with ideas and with financial contribution?
- Would your Church support this exciting and challenging venture?
- There will be a number of new roles in Willows for volunteers to help in bringing this Development about. Might you be willing to provide 4 hours a week to help?

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Untangling Eating Disorders

Why would someone in their right mind starve themselves to death? I walked into the hospital ward to visit a woman in her late twenties - in appearance and mannerism she was merely a child. Jose was lying in a hospital bed having come round from a coma after her weight dropped to 3 stone.

She had survived, but was still 'critical', with possible damage to vital organs. Despite blatantly obvious signs that she was underweight and needed adequate nutrition, Jose could still not see beyond allowing herself anything other than 'diet' products. It was only through the grace of God and the prayers of many that she is alive today.

Jose's experience was extreme; others with eating disorders never reach the point of being given little chance of survival. However, eating disorders do have the highest death rate amongst psychiatric illnesses and many sufferers battle in varying degrees for more than half their adult lives. Some live with the daily torment of anorexia, rigidly controlling the minimum of calories; others battle with bulimia, oscillating between self-starvation and uncontrollable binges, others still camouflage their needs and feelings through being driven to eat compulsively. Whatever the eating disorder, these agonising obsessions take hold of not only young women, but young children and mature adults, male and female alike.

Whilst sufferers themselves are fascinated with, and gripped by, food and body image, the counselling world (and the Western world at large) is equally fascinated with, and gripped by, eating disorders. Many counsellors are drawn to reach into the intriguing mindset of the sufferer; many more are driven away by the enormity of the problem and the overwhelming feeling of trying to tackle such irrational and life-threatening

behaviour.

But eating disorders need not be dreaded in the way they often are. So often what is lacking is a clear understanding of the problem and a comprehensive approach to helping. The term 'eating disorders' suggests that the problem is merely a disorder of eating. Rather, the 'eating' (or not eating as the case may be) is in fact a distraction from, and reaction to, an emotional or psychosocial problem. The 'disorder' aptly describes how the eating has become disordered in response to this problem (or more commonly a collection of problems). Common contributory factors include: bullying, abuse, control, separation, unmet emotional needs, fear of the adult world, lack of life skills, perfectionism, and much more.

The eating disorder becomes the per-



Twin death from anorexia

The real death toll from anorexia could be as high as 50,000 a year.

son's way of coping, but once the eating patterns are used over an extended period they become habitual, resulting in physical, emotional and spiritual 'addictions' that take a strong hold over the person. In addition to addressing the underlying issues, help then needs to be given to combat the addictive and nutritional components.

The complexities and addictive elements of eating disorders sadly mean that many doctors and therapists hold the conviction that full recovery is not possible. This is simply not true! I believe that full recovery is most definitely attainable and that the Christian approach to eating disorders is one offering freedom, without fear of relapse.

Very aware of the need for a Christian approach to eating disorders, I set up Kainos Trust, a Registered Charity, in 1996. This was as a result of working with eating disorder sufferers since

1984, following the publication of "Puppet on a String", my account of my own battle with, and subsequent recovery from, anorexia.

Over the years, the work I have been involved in has focused on prayer, counselling, teaching days, and residential courses incorporating teaching and ministry. However, it has always been my vision to have a house in the country where people can come for periods to receive the help they need, and I believe that the time for this is coming nearer.

My longing is for a truly Christian 'home' where people can be heard and can heal in an atmosphere of the love of God and support of His chosen vessels to facilitate the recovery process. For ultimately it is only God who can bring complete freedom from the entanglement of the physical, emotional and spiritual complexities that trap and hold a person captive to addictive behaviour.

Helena Wilkinson
Director Kainos Trust for Eating Disorders

Helena will be speaking at a Willows Topic Workshop at Harnhill on 14th February 2004 on the subject of 'Understanding and Working With Eating Disorders.'

Cost: £15.
To book: Telephone Harnhill Christian Healing Centre, Cirencester on 01285 850283.

Supervision in Pastoral Care & Counselling

Nick Tyndall reflects on the place of Supervision in caring for others.

N.B In this article 'she' is a Supervisor and 'he' is a counsellor. 'Client' refers to the person a Pastoral carer may be supporting as well as a counsellor/client relationship.

SUPERVISOR - a much used word in the counselling world! Supervisor, for many people, means someone who is OVER, knows better than you, and who you have to obey. That doesn't mean that she is necessarily a tyrant, but it does imply that you have every reason to be a bit scared when you see her coming round the corner!

Well, hopefully, a Supervisor isn't like that. More descriptive words would be facilitator, tutor, enabler or consultant. The Supervision process is a joint enterprise, two heads (or a few, if it is group supervision), bringing light to bear on issues, having time and space to reflect together. It is likely that the supervisor will be the more experienced and therefore have some additional wisdom to bring to the situation, but only so that the counsellor/carer may gain more understanding in working with his client.

A good Supervisor recognises that the essence of counselling comes from the personal relationship between client and counsellor. The 'magic' of healing springs from the counsellor/carer, and the Supervisor merely strengthens him with more insight and perhaps more courage! However, a firm hand may be needed in the velvet glove. Supervisors also have a responsibility to the church and congregation, agency and clients; and so they are required to assess if anyone's performance is not 'good enough' and take any necessary action. But, primarily, supervision is providing support for the counsellor/carer in his lonely and often stressful task of bearing other people's burdens. It is a way of ensuring that he manages the balance between involvement and objectivity with his clients in

their grief, depression, sexual turmoil, marital difficulties or whatever.

Why Supervision?

- Personal time – to get things off his chest and check out what he is doing.
- Necessary resource – to draw on the experience and insight of Supervisor or, in a group, of colleagues.
- Accountability – to ensure good practice in the church or agency and that professional standards in both are being achieved and maintained.

The most helpful definition of this process comes from Inskipp and Proctor's work-book 'Making the Most of Supervision':

"A working alliance between a supervisor and a counsellor in which the counsellor can offer an account or recording of his work; reflect on it, receive feedback and, where appropriate, guidance. The object of this alliance is to enable the counsellor to gain in ethical competence, confidence and creativity so as to give his best possible service to his clients."

The success of this working alliance depends on the active, intelligent and responsible participation of the counsellor/carer. By its nature it is basically collegial – that is, a relationship of colleague to colleague. A new counsellor/carer may want to think of this Supervisor as a highly experienced practitioner who provides a safety net and, to a certain extent, he has a right to expect her to be a safe pair of hands. However, he must guard against over reliance on her. The client is his. He is not acting as the supervisor's agent. It is reassuring to have her support, but in the counselling room he is on his own, as is the Pastoral Carer on their visit.

Together, counsellor/carer and supervisor, have to work out their respective roles, rights and responsibilities. They may be meeting in other roles, in different contexts, so need to be clear about how they relate in this context. The counsellor/carer must play their part in fostering the conditions that encourage the supervisor to give of their best.

This 'working alliance' gives counsellors the opportunity to:

- Explore the way they work.

- Stand back and get different perspectives on their practices.
- Become more aware of how they affect and are affected by clients
- Sound off and recharge energies and ideals.
- Check out what is valid in a Christian counselling setting.
- Feel supported in their confidence and competence.
- Get feedback and challenge about the quality of their work.
- Share and monitor any ethical issues raised in counselling.

Some Tips for Approaching Supervision Sessions

- Plan what you want to bring. Go through your notes before a session. Which clients are causing particular difficulties? Have you any special issues worrying you? Are there any external factors, which are intruding on your counselling? Decide how you would best like to spend time in the session.
- Try to focus on the important information about clients. You may need to 'tell everything' at the beginning, but gradually learn to select essential details - to save time and not overload the supervisor!
- Be open about your own feelings. How does the client make you feel? How honest can you be with him/her? Do you like him/her? Remember that what goes on inside you is a barometer to your relationship in the counselling room.
- Give feedback to the supervisor about how you feel you are getting on with her. In what ways are you finding supervision helpful? Do you consider that the 'alliance' is working out to mutual satisfaction?

Finally, don't forget that supervisors are only human (or most of them are)! They also get satisfaction from a job well done. They thrive on creative 'working alliances' and supervisees who go from strength to strength - and they are always ready to receive genuine expressions of gratitude.



Nick Tyndall

Past Director of both National Marriage Guidance Council and National Trainer for CRUISE Bereavement. Author, Counsellor and Supervisor.

The Healing Ministry of the Church

The last 20 years or so have witnessed a steady development in the growth and acceptance of healing ministry in more and more local churches. This has been backed up by the 'recognition' of such ministry as part of the mainstream work of Christian ministry and mission by all the main denominations – evidenced by the profusion of authorised healing liturgies, along with guidelines for good practice and also a major report within the Anglican Church ('A Time to Heal'). While there are still those within the Church who are not quite sure what 'Christian Healing' is all about, no longer can it legitimately be dismissed as something to be undertaken on the fringes of Church life.

Such development within mainstream Christianity has taken place in the context of a world where, certainly here in the UK, there has been an upsurge of interest in 'spirituality'. This is one key feature of what theologians have called the 'post-modern' world. Society in general has become interested in the 'big' questions of life – why are we here? What is life all about? – and is ready to listen to anyone who proffers answers. One consequence of this trend is the growth of interest in healing, associated with a basic desire to put things right in our lives when they are out of order. This has led to a wide growth in different

activities relating to ways of healing: an upsurge in complementary and alternative therapies, the appearance of many healing centres in our towns, cities and out into the countryside. The Church has not really begun to take stock of such developments, although some involved in Christian healing are now 'claiming' some complementary and even alternative healing practices for Christian ministry.

At the same time, there is much evidence of the coming together of Church and Medicine in ways that would have been exceptional in the early 1980's. Since the publication of the Department of Health's Patient's Charter in 1992, the importance of affirming and meeting people's spiritual needs has been recognised by the UK Government as a vital part of good health-care delivery. This commitment is now being taken further forward as the Department of Health anticipates the publication of a new set of guidelines for meeting the spiritual needs of patients and staff. There are some stimulating examples around of practical ways in which Church and Medicine are co-operating in the pursuit of better patient care. For example, the traditional Chaplains' Department has developed into a vital feature of patient care in many hospital trusts. Within the field of Primary Care there are good examples of Healthy Living Centres where Primary Health Care providers are entering or exploring entering into partnerships with local churches and others. The new buildings that are being built to house all involved show evidence to the level of commitment in such partnerships.

There is a vitality and a confidence evident today undergirding Christian Healing. This must be good. Gradually it seems the Church is rediscovering the truth of the Gospel; that healing (in its widest biblical sense of dealing with dis-ease of body, mind, spirit and relationships with neighbour and God himself) is the Good News in action. We do well to remember that Jesus, when he sent out

the twelve disciples on mission, told them to 'proclaim the Kingdom of God and to heal' (Luke 9.2).

Article by the Revd Ward Jones, Chairman, Bristol Methodist District and formerly Advisor to the Methodist Church on Health and



Healing (and sometime Free Church chaplain at Princess Margaret Hospital in Swindon)

1. 'Guidelines for Good Practice for those involved in the Christian Healing ministry' available from, Methodist Publishing house, 4 John Wesley Road, Werrington, Peterborough PE4 6ZP (£1-75 plus p+p)
2. 'A Time to Heal' from Church House Publishing, Church House, Great Smith Street, London SW1P 3NZ (£9-95 plus p+p)

The Willows arose out of research that Revd Ward Jones undertook in the 1980's into GP Attitude to Clergy involvement in patient care. A Conference on the Research for Medical staff and Church leaders called for the Churches in Swindon to provide a Counselling Service. This was supported by the District GP Committee and The Council of Churches.

The Dream

Willows is on the move...

Willows needs to:

- Move to larger premises.
- Provide better facilities.
- Provide a wider range of services.
- Provide enhanced training and administrative facilities for our staff and students

Since opening its doors in 1995, Willows has reached out into the community providing help and support to over 1,000 clients with issues including stress, work related problems, relationships, childhood sexual abuse, Post Traumatic Stress Disorder, anxiety, bereavement and many others.

Where are these new premises to be? The answer to this question, so far, is "I don't know". The task of the newly formed Development Group is to find a way to meet those future needs as best we can. Our primary task is to find an appropriate property.

We will need to:

- Raise the necessary capital to fund the development and build from scratch, or convert an existing building.

Secondary tasks include:

- To undertake detailed planning
- To put in place a comprehensive 'revenue-funding' project to ensure that we receive a continual inflow of money to support the day-to-day running of a much larger Willows?

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Recovery From Insecure Attachment

Many people, (up to 50% of the population), grow up in life with a sense of insecurity, with doubts about who they are, or feel unresolved and cautious in intimate relationships.

(See PCN November 2002 and May 2003)

The results of such insecurity can range from experiencing anxiety and depression, through to more serious difficulties in relationships. For example, always feeling rejected and being defensive. Addiction problems, mental health difficulties and even criminal behaviour can also be as a result of insecure attachment.

The question for many people is "How do I recover from the effects of insecure attachment? The following is offered as a guide to the ways that can help indi-

viduals to recover. It should be noted that Churches and Church communities can play a significant part in providing for some of these elements.

The eight key areas that can be worked on and changed are:

1. Developing a sense of security and trust within a relationship with another person. - This means in a relationship that is reliable, consistent, responsive, warm and supportive. The relationship will need to be honest, open and clear and without fear of ridicule or rejection, one in which you are able to take risks both to trust and risk intimacy.

2. Learning to develop 'self-soothing', that is doing safe things that are comforting, relaxing and resting i.e. listening to music, taking a warm bath, hugs from friends, enjoyable food and learning to give and receive appropriate touch and eye contact.

3. Engaging in activities that are fun and enjoyable, perhaps taking a few risks and trying something new, learning to explore life and developing new opportunities. Using the senses more and appreciating sensual experiences, taste of food, touch, sound etc.

4. Learning to grieve losses in life, rather than avoid them. During a time of

bereavement allowing time and space to grieve the pain of lost opportunities and other life losses.

5. Expressing anger, appropriately, rather than suppressing anger and hurt feelings or getting into a rage.

6. Learning to identify the things that trigger strong emotional responses. Most strong responses that are triggered are related to unresolved early life experiences.

7. Learning to stand back from a situation and reflect upon it, rather than just reacting. Particularly looking at what may be affecting us from our own past.

8. Arranging for some counselling so that issues, and progress, can be talked through with someone who is outside of the situation.

Remember to also get prayer support and encouragement from your local Church. The consequences of dealing with our insecure attachment experiences can only be good, and result in fulfilled and satisfactory relationships with God and others and the enjoyment of life for ourselves.

Mike Fisher

We plan to make use of a professional fund-raising organisation. This will cost us a percentage premium, but these companies have the expertise that we need and we believe that this will be by far the most cost (and time) effective way forward. We believe that this is part of God's plan and that Willows will expand regardless of setbacks. The search is on for suitable premises, balanced by the knowledge that we need to have funding securely in place before we commit ourselves too far.

Forty years ago Dr Martin Luther King proclaimed – "I have a dream..."

A dream is not just a picture in the mind of a sleeping person; it is also defined as an ideal, an aspiration or an ambition; and the dream of Willows is to be able to provide an improved and enhanced Christian counselling service to better assist those who are suffering from the strain of living in today's world.

When Peter addressed the crowd after the events of Pentecost, he quoted the prophet Joel - "...your young men will see visions... your old men will dream dreams" as he proclaimed to them the bestowing of the Spirit upon all people irrespective of their age, sex or rank. Martin Luther had his dream and we have a dream for the future of Willows.

So what is the need? Much thought and prayer has been given to the future needs of the service and our aspirations have been listed in Mike's article, "Major New Development". The work of Willows has become severely limited by the physical constraints of our current premises.

During the last Management 'Away-day', prayer for the movement forward of Willows was answered with affirmation and the identification of some clear roles that emerged.

What is your 'dream' for Willows?

What is your aspiration?

- Do you have a part to play in the planning?
- Do you have ideas or inspiration for the project?
- Do you know of a source of funding or an appropriate property?
- Could you provide prayer support for the Development Team?



Malcolm Ward - Development Co-ordinator

Training

Are you the kind of person who friends turn to when they need help?

- When a friend wants someone to listen, are you the person they feel able to confide in?
- Perhaps you feel that you don't always know how to listen attentively.
- Do you sometimes feel out of your depth when friends are telling you confidential details about their life?
- Are you involved in Pastoral Care within your Church situation or feel that this is an area you would be interested in?
- Do you care about people?

Have you ever thought about becoming a counsellor and thus enabling others to look at areas in their lives that are causing them concern and to help them to move forward?

At Willows we are able to offer training to people who are seeking to build on the natural skills they already have and to acquire new ones,

and to help those who have no formal experience of helping others but would like the confidence to be more effective. Our training not only enables people to help others, but also helps students grow in their own spiritual and life journey and in self-awareness.

We are holding an "Introduction to Pastoral Counselling Course" on 8th January 2004, which will take place over twelve evenings plus Saturday 10th January. This is a Level 1 Course in Christian Counselling (CTi/NOCN Introduction to Counselling Units) and is recognised by the Association of Christian Counsellors (recognition number T153-L1). The Course is intended as preparation for those who may wish to pursue Level 2 training (and higher) and also for those involved in pastoral work who wish to develop basic listening skills.

After completing the Level 1 course, or other similar training you would be able to attend our Level 2 Course "Certificate Course in Integrative Christian Counselling" (CTi/NOCN Advanced Certificate in Counselling Skills) which will commence in September 2004. This is an ACC recognised course, number T135-L2. No academic qualifications are required for these courses.

If you would like further details of the training that Willows can offer, please contact: Avril Fray, Training Manager.

The Willows
COUNSELLING SERVICE



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