

## **MSc In Systemic Psychotherapy**

I am very grateful to the FPSA, in granting me financial support which has enabled me to undertake year 4 of my Systemic Family Psychotherapy training at the University of Derby. I am in the final year which will lead, should I be successful, in me completing the accredited Association of Family Therapy professional training to become a qualified Systemic Family Psychotherapist.

The training continues to be both challenging and rewarding. I am gaining further experience working within a live family therapy team which provides supervision as we deliver family therapy intervention to young people and their families referred to CAHMs, living with presenting concerns such as eating disorders, self-harm, coping with suicidal thoughts, depression, anxiety, loss and grief, as well as trauma following a sexual abuse. In total I will have worked with young people and their families for 40 clinical hours as the Lead Practitioner as well as participating in the Live supervision and reflecting team for 300 hours.

I have learned to work as part of a team adopting the Milan model, using a systemic Approach, Method and Technique with families as well as gaining supervision feedback on how to improve my practice. I have found that my skills and confidence have increased, as well as my knowledge of specific models for supporting eating disorders, using the Maudsley model and Non-Violent Resistance, to address aggressive behaviours within the family and Attachment Based family Therapy with depression, suicidal ideation and self-harm with adolescents.

The academic part of the course in this final year is concerned with the Independent scholarship. I am completing a qualitative research study, to evaluate the Service provided by my Agency, by interviewing young people to ascertain their views on the therapeutic experience, both in the form of evaluation of the intervention and a source of feedback to improve the service they receive. The research and reading are already informing my practice for children and young people in Looked After Care; who are the most vulnerable in society, with statistics indicating they are on average 50% more likely to have a mental health condition compared with children who are not in care. They are also less likely to have any say or control over their lives. NICE Guidelines and Department of Health recommend that children and young people have a say about the services they receive, which is the underpinning focus of my study.

Thank you again FPSA, for my funding to help me achieve, learn and impart this knowledge to the families I work with, both here at my Agency and at CAMHs.