



THE FOLAN TRUST

Counselling for people experiencing homelessness

Scottish Charitable Incorporated Organisation (Reg No: SC050526)

Service Evaluation (April 2020 - August 2021)

Service Overview

The Folan Trust was set up in 2020 to support and enable people affected by homelessness to work through and begin to resolve the severe and unresolved trauma that often underlies their crises. The scarcity of such resources, coupled with the personal and systemic barriers to accessing this type of service, indicate the need for such provision. The Folan Trust gained charitable status in October 2020. Its purpose is to advance the health and well-being of people affected by homelessness in Glasgow and its environs through the provision of Counselling and Psychotherapy that is:



- Free at the point of delivery
- Trauma-informed
- Upholds individuals' right to privacy
- Respects the dignity and autonomy of the individual
- Supports people to develop the psychological capacities and resources necessary to sustain a route out of homelessness and poverty

Service Model and Therapeutic Approach

An attachment-based approach seeking to understand people in the context of their early development and trauma and supporting their capacity to mentalise (to reflect on their thoughts, feelings and relating and those of others) to enable greater impulse control was adopted. Therapists are psychodynamically trained. Consequently, they sought to work with what may have been out of clients' immediate awareness and what they may understandably have come to defend against to survive the traumatic experiences that they have endured. It was our experience that symptoms can begin to gradually lessen as the tensions driving them are resolved.

Staff engaged to deliver the clinical work are fully trained and experienced therapists who are registered and/or accredited with the British Association for Counselling & Psychotherapy. Experienced in working therapeutically with people affected by homelessness and complex trauma, practitioners received regular clinical supervision from highly experienced supervisors in psychotherapy in support of their work and to monitor their practice.



A simple referral process was operated to optimise accessibility and to help to remove some of the barriers that often stand in the way of a non-traditional client group engaging in the therapeutic process. We accepted self-referrals and referrals from relevant providers in the field for adults who are homeless at the point that they are being referred. In keeping with the referral process, assessment was largely dynamic with the intention of optimising access to the service.

Clients were offered weekly sessions of 50 minutes with the same therapist and at the same time and venue each week in support of the therapeutic process. In commencing during a time of severe restrictions being in place, clients were initially offered sessions remotely (usually by telephone and more occasionally through video link). Once permissible and safe to offer sessions in person, clients were provided with the option to have sessions face to face. Situated in a mainstream setting within Glasgow city centre, the venue used for the work was of a very high standard and afforded clients access to an environment that is safe and conducive to process. Importance was attached to ensuring that clients have access to the same type of surroundings as would be afforded to fee paying clients. This was significant as a communication of clients' self-worth but also to ensure safety and peace of mind amid the issues of territoriality and risk that often exist in homelessness settings.

Contracts could be of differing durations though the norm in most cases was to offer medium to long term contracts (at least 18 months) in recognition of the complexity of the work. We did not discontinue with clients when their homelessness status changed (i.e. they secured permanent accommodation). This allowed scope to work at depth in order to attempt to address root problems and enable meaningful and sustainable change. The process involved a sensitive accompaniment of the client in working through the issues that are ultimately responsible for the distress and difficulties that they presented with.

Service Uptake

We supported **15 different individuals** during the period. The service did not run at full capacity on account of having yet to secure premises for longer-term use. Beginning in April, just as the country had entered lockdown, the service was delivered remotely initially before an existing counselling suite was hired for set hours during the week to allow the service to operate a face-to-face delivery.

During the whole period, **648 individual counselling appointments** were offered to clients with **533 (82%) of these being attended**. This rate of attendance compares extremely favourably with corresponding figures for mainstream providers where there is less severity of need indicating the effectiveness of our approach in engaging people who ordinarily do not access this type of service. It greatly exceeded our expectations. It is possible that delivering sessions remotely – where clients engaged from their own surroundings as opposed to having to travel to appointments – may have been a contributory factor to these high attendance rates. However, attendance rates remained broadly similar once we moved to a face-to-face delivery where clients made their way to the venue for their sessions. We understand that the development of the therapeutic relationship between client and counsellor to be of greater significance.

Service Outcomes



Outcomes obtained using the CORE (Clinical Outcomes in Routine Evaluation) outcome measure, showed that **75%** of our clients reported a shift in their level of **psychological distress** from **severe to moderate or mild**. These results were largely replicated across measures for well-being, symptoms, functioning and risk. In addition to CORE self-reporting, clients were also invited to evaluate the service anonymously using a customised questionnaire.

Improvements were reported by:

- **100% of clients in relation to self-understanding**
- **83% of clients in managing their emotions (impulse control)**
- **75% of clients in their use of substances**
- **80% of clients in relation to self-harming**
- **84% of clients in their experiencing of suicidal ideation**
- **33% of clients in their relatedness***
- **20% of clients in engaging in work/activity***

* These more modest gains need to be understood in the context of the pandemic and the barriers to progress during a period where restrictions were in place that severely limited individuals' access to opportunities in these areas.

Comments from Beneficiaries

Remote Delivery

Clients' comments on receiving the service remotely during lockdown included:

- *'I'm grateful... but I missed the (face to face) sessions'*
- *'I was just so glad I had telephone contact as I would have been lost without it'*
- *'(Telephone counselling) was different – definitely better than no counselling but it was difficult to talk about some stuff'*
- *'I feel more comfortable and find the sessions better face to face'*
- *'I prefer having a specific space for counselling, a neutral space I can leave behind'*



Impact of Therapy

Comments on the impact of having undertaken therapy included:

- *'The difference is massive. I feel more strength to live rather than exist.'*
- *'I am finding it easier to accept that I am not a bad person, and I am finding out a lot more about the real me.'*
- *'My everyday life has went from being a real struggle to what I would now call almost manageable...I would not have managed to refrain from self-harm and self-medicating so long.'*
- *'I have built up an extremely good relationship with my counsellor which has helped me to be more trustful of people that I don't know.'*
- *'My counselling has helped me understand all the things that have happened to me. I wouldn't be here any longer if I hadn't engaged'*

Clients' comments occasionally also illustrate that this work takes time and of the need to offer clients the opportunity to work for the medium to long-term:

- *'I still haven't found the reason why I feel in a dark place...I find it hard to communicate at times, I feel pretty anxious'*

We recognise the need to provide the type of consistent accompaniment they have often lacked to enable clients to begin to work through the complexity of what may underlie their homelessness, distress and, sometimes, maladaptive ways of coping.

Conclusions

- Attendance and clients' evaluation comments demonstrate that the service is highly valued by clients who are often described as being 'difficult to engage'.
- The need for a secure holding environment within which clients feel valued and the need for time to develop a trusting relationship with their therapist are fundamental to the therapeutic process.
- With a flexible delivery model that seeks to be understanding of individuals' past trauma and current challenges, excellent outcomes can be achieved in relation to clients' mental health and wellbeing.

For further information about the project, please contact: **Mary Garcia, Service Lead at MGarcia@thefolantrust.org or on 0141 286-4475 or 07394921754.**



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