

THE IMPACT ON CHILDREN AND YOUNG PEOPLE OF THE MEDICALISATION OF DISTRESS

- SUE LEWIS



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Resource Guide

About Sue Lewis



Since qualifying as a counsellor in 1998, I have worked with children, young people, and adults in a variety of contexts (including the NHS, Voluntary Sector, Employee Assistance Programmes and Private Practice).

For 9 years, I worked for Relate's young people's counselling service, providing counselling in primary and secondary schools. I currently work on a self-employed basis as a secondary school counsellor, as well as seeing adults, children, and young people in private practice in Derbyshire.

I am senior accredited counsellor and supervisor with BACP. I have been supervising since 2004, both privately and for organisations. This includes offering individual and group supervision to counsellors working with young people. Having previously worked as a primary school teacher; I have worked with children and young people all my working life. Add a little bit of body text



Event Details

Sue has noticed an increase in the number of young clients she sees who use the language of mental health diagnosis (particularly anxiety and depression) to describe their distress. In this event, Sue will share some thoughts on what might be behind this increase.

She will also consider the impact of this way of viewing distress on young people's attitudes to their difficulties and on their expectations of therapy; as well as the wider societal implications and how these might be addressed.



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The Impact on Children and Young People of the Medicalisation of Distress

Sue Lewis



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What might be behind the increase in YP seeking medicalised explanations for their distress?

- Living in a more medicalized society. Many will have parents who have been diagnosed and medicated
- Less stigma attached to Mental Health diagnosis
- Readily available information (internet: self-diagnosis)



The ways in which medicalisation of distress can impact on YP's attitudes to their difficulties and on their expectations of therapy

- An explanation for unusual or troubling things happening to you when you experience distress
- A way of being heard/ taken seriously?
- Allows access to support “Sick Role” – passivity, reduced sense of responsibility for recovery
- May limit expectations of who they can be, what they can achieve, the kind of life they hope to live
- Sharing labels – identity



Wider Societal implications & how these can be addressed

Education: We have basic psychological needs – to feel we belong, feel valued, feel we have a secure future. Our culture isn't meeting those needs for many
If you are depressed and anxious, you are a human being with unmet needs

Acknowledge/ address causes of distress

Increasing access to 'treatment' for 'mental illness' fails to acknowledge the connection between social contexts and distress, and the impact of adversities. There is little consideration of the ways in which inequalities of power influence both the nature of adversities and people's responses to them.



Power Threat Meaning Framework “all societies have procedures whereby the production of discourses is controlled to preserve the structure and convention of that society”

Rather than directing further funding into hypothesised biological causal factors, we need to address the known and extensively documented psychosocial roots of psychological distress in its various presentations

Asks: What has happened to you (How is power operating in your life)

How did it affect you? (what kinds of threat does it pose?)

Relational, emotional, bodily, social, economic, environmental identity, value base

What is the meaning of those situations and experiences to you? (what sense did you make of it?)

Abandoned, hopeless, invaded, empty, overwhelmed, guilty, abnormal, betrayed, trapped

What are your strengths?

What is your story?



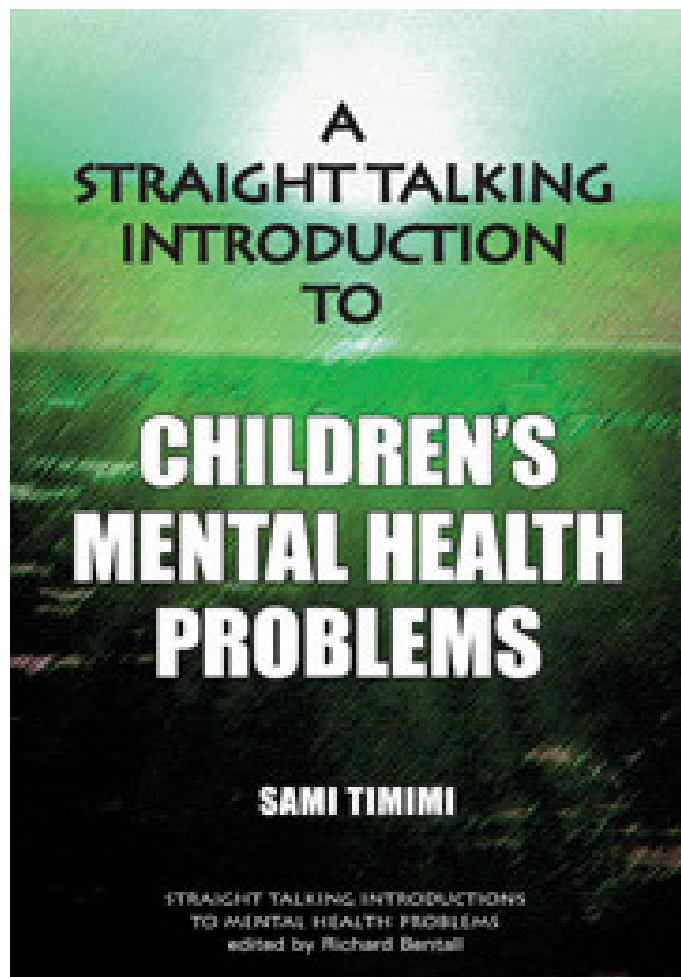
Adverse Childhood Experiences study

Persons who had experienced four or more categories of childhood exposure, compared to those who had experienced none, had 4- to 12-fold increased health risks for alcoholism, drug abuse, depression, and suicide attempt.

Understanding the context for their difficulties and the impact of these factors on their mental health may also help families, schools, communities and society as a whole address the underlying causes of young people's mental health difficulties.



Reading



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Online Resources

CLICK THE LINKS BELOW

[Sue Lewis Counselling](#)

[Group Work with John Wilson](#)

[Person-centred Psychotherapy Training](#)

Additional Resources:

[Introducing the Power Threat Meaning Framework](#)

[The Power Threat Meaning Framework: An Alternative To
Psychiatric Diagnosis – Lucy Johnstone](#)

[ACEs Study](#)



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Resources

Video:

How childhood trauma affects health across a lifetime – Nadine Burke Harris

Crap Life Disorder, Michelle Higgins, Therapy Today March 2018, p 35

Joanna Moncrieff, The Myth of the Chemical Cure: A Critique of Psychiatric Drug Treatment, Palgrave Macmillan , 2008

Ben Goldacre, Bad Pharma: How Medicine is Broken and How We Can Fix It, Fourth Estate, 2012

James Davies, The Deceptions of the Pharmaceutical Industry, Therapy Today October 2012, p18-21



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