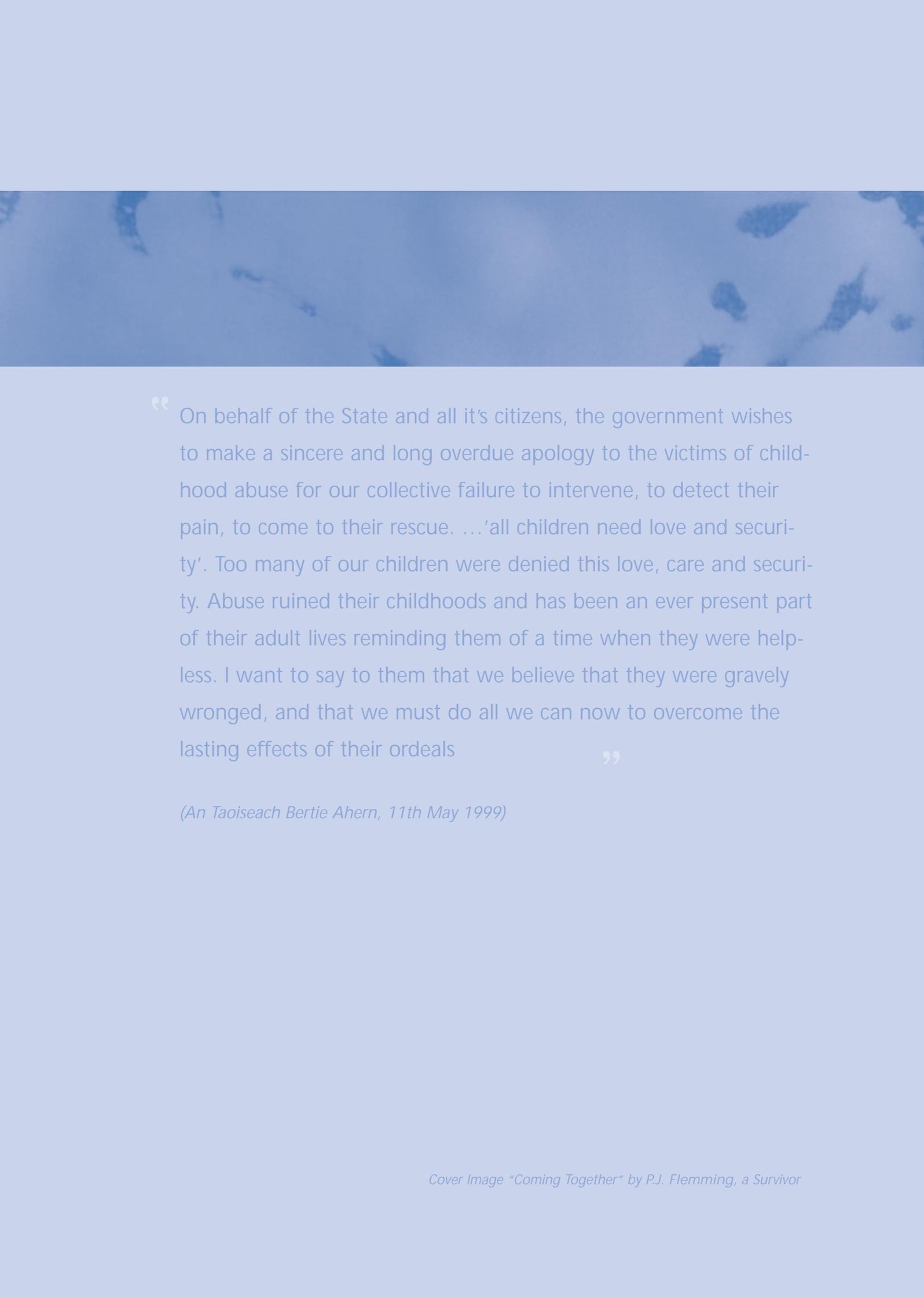


The National Counselling Service for adults who have experienced childhood abuse

# First Report Executive Summary



The Health Boards Executive  
Working Together for Health



“ On behalf of the State and all its citizens, the government wishes to make a sincere and long overdue apology to the victims of childhood abuse for our collective failure to intervene, to detect their pain, to come to their rescue. ... ‘all children need love and security’. Too many of our children were denied this love, care and security. Abuse ruined their childhoods and has been an ever present part of their adult lives reminding them of a time when they were helpless. I want to say to them that we believe that they were gravely wronged, and that we must do all we can now to overcome the lasting effects of their ordeals ”

*(An Taoiseach Bertie Ahern, 11th May 1999)*

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# Foreword

Welcome to the first report on the National Counselling Service (NCS) for adults who have experienced childhood abuse. This report outlines the development of the service and the range of activities it has undertaken. It also has activity figures for the first year, covering the period from its establishment in September 2000 to September 2001.

The National Counselling Service was established in response to the recognition that a large number of adults had been abused as children while in care in institutions in Ireland and following the public apology by An Taoiseach Bertie Ahern T.D. in May 1999, and the announcement of measures to address the needs of those who have been abused as children in institutions.

One of the Government's primary concerns in developing a counselling service for survivors of abuse was to establish a dedicated professional service in all regions of the Country and to ensure co-ordination and equity in the provision of such services across the regions. The Government's decision to assist victims of abuse by provision of a national counselling service presented a unique opportunity to develop a broad based counselling service for adults with a wide range of current needs and problems. The importance of working together across Health Boards was essential to ensure a coherent response to what is a national issue for providing appropriate and quality services to those who have experienced abuse in childhood.

It was agreed that the best way to achieve this was in the context of working together across all 10 Health Boards in the country. This work has included development of partnerships with non statutory agencies and private providers at local level. While health boards regularly work together on various issues, the NCS is the first national service that all ten health boards have worked together to develop. Such working together has been ongoing and is set to increase and become a standard feature now that the Health Boards Executive (HeBE) has been formerly established on a statutory basis.

As this report indicates, the NCS for adult survivors of childhood abuse has been successful in that it has been set up in all 10 Health Boards, each having a Director, a number of counsellors and support staff providing accessible and user-friendly counselling services to survivors. In addition, each health board has a freephone contact line and at the end of September 2001 more than 3,000 calls had been received by the NCS. The service during this period provided counselling to over 2,000 survivors nationally with Counsellors providing up to 782 hours of counselling. The services are delivered from up to 57 centres across the country. During the year the service worked closely with the Commission to Inquire into Child Abuse receiving referrals from the Commission and also with the National Office for Victims of Abuse (NOVA) since its establishment in February 2001.

# Foreword

This report clearly indicates that significant progress in the development of the NCS was achieved in the first year and that a high quality user-friendly service has been developed throughout the country. The NCS serves as a useful model for working together on future projects given what has been achieved in terms of service development, shared policy and practice. The success of the National Counselling Service is also evidenced in the growing demand for counselling across the country and in order to ensure that we are in a position to respond to this, we are working closely with the Department of Health and Children and other agencies to further develop and enhance the service.

The NCS would not have been established or indeed the success to date recorded without the hard work and dedication of many people. In this regard I would like to begin by thanking each member of the working group for their advice, support and guidance throughout the development of this national service. I also want to thank all the agencies and bodies that we worked with in the development of the service and to express our gratitude to them for their contribution, support and help. I would like to acknowledge and thank all of the management and staff of the Health Boards for their support and their guidance in establishing the NCS in each local area.

I would like to thank the staff of the Nova Office, the Aisling Centre and Right of Place who contributed to this report and a special word of thanks to Mr. P.J. Fleming for allowing the use of his painting for the cover of the report. Most importantly, I would like to pay tribute and thanks to the survivors who have assisted us both locally and nationally in the development of the NCS and who are ensuring that we deliver a service that best meets their needs.

I would like to express our thanks to the Minister for Health and Children Michéal Martin T.D. and the Secretary General of the Department, Mr. Michael Kelly, the Assistant Secretaries and the staff in the Department who worked with us in developing the National Counselling Service.

The service is fortunate to have very skilled, dedicated and committed staff who have worked extremely hard together to develop and deliver a high quality counselling service as is evident from this report and in this regard I would like to register our thanks to all of them.

In conclusion, I have no doubt that with all of us working together, Health Boards, staff, survivors and support groups we will build on our achievements to date so that we continue to deliver a service that will meet the needs of survivors both now and in the future.

Pat Donnelly  
*Chairperson  
NCS Working Group.*

# 1

## Why a National Counselling Service?

### 1.1 Recognition of Abuse of Children in Institutions

The National Counselling Service was established in September 2000 in response to the recognition that a large number of adults had been abused as children whilst in care in State institutions in Ireland. This followed the public apology by An Taoiseach in May 1999 and announcement of measures to address the needs of those who had been abused as children in institutions, including the Commission to Inquire into Child Abuse.

One of the Government's primary concerns was to establish a dedicated professional counselling service in all regions of the country for people who were victims of Institutional childhood abuse and to ensure co-ordination and equity in the provision of such services across the regions. Four million pounds (€5,080,000) was subsequently allocated for the development of a National Counselling Service.

The establishment of the NCS is significant for a number of reasons:

- It signals a recognition of the abuse experienced by many adults living in Ireland in particular those who were abused in institutions as children
- It acknowledges the long term impact of such abuse
- It is a recognition of the therapeutic potential of counselling for alleviating the impact of abuse.

Ireland has recently had to deal with an unprecedented level of disclosure of abuse of children, by members of their families, by the religious and particularly within institutions such as industrial schools and orphanages.

The acknowledgement of abuse of children within institutions can be seen as a measure of Irish Society's increased willingness to listen to the experiences of those raised in institutional care and to face up to its past. The National Counselling Service strives to contribute to this process and to reflect on what lessons can be learnt from the past.

## 1.2 The Impact of Abuse

Abuse in childhood can significantly effect a person's ability to cope and their quality of life. Research has shown that lasting problems are more likely:

- If there was multiple and chronic abuse over an extended period of time
- Where abuse began at an early age
- In the absence of an adequate family experience.

Shared amongst most people who report abuse as children, are feelings of powerlessness and betrayal, a deep sense of injustice, and a belief that the world and other people cannot be trusted. These feelings may occur whether physical, sexual, emotional abuse or neglect has been experienced.

Damage to a person's sense of self and identity effecting every aspect of their life and inhibiting potential for growth can significantly impact on quality of life and relationships. In stating this it must also be recognised that not all adults perceive themselves to be effected by abuse, individual resilience and capacity to cope with adversity must be acknowledged.

## 1.3 The Role of Counselling

Counselling has the potential to facilitate considerable positive changes for adults who were abused as children and can help to make a positive difference in the lives of many adults. Research has shown that *the client is central to the change process* in counselling. Counselling must therefore build on client strengths and resources to achieve change.

As a dedicated counselling service for adults who experienced abuse as children, the NCS facilitates explicit recognition of the needs of such adults and provides a voice for those who in the past have been unable to speak about their experiences. Counselling can therefore be in a very real sense a breaking of the silence that often surrounds childhood abuse.

# 2

## The National Counselling Service Purpose & Ethos

### 2.1 Core Purpose of the National Counselling Service

The National Counselling Service exists to listen to, value and understand those who have been abused in childhood, in particular those abused in institutional care. The National Counselling Service aims to assist clients to live more satisfying lives and in learning from their experiences, strives to prevent further abuse in Ireland.

The National Counselling Service was established by the ten Health Boards in Ireland in September 2000, with the objective of achieving a consistent and equitable service in all regions of the country. Working together across health boards was identified as essential to ensure a coherent response to what is a national issue of providing appropriate and quality services to those who have experienced abuse in childhood.

While the Health Boards regularly work together in relation to specific initiatives, the NCS is the first national service that all ten health boards have developed together and as such serves as a useful model for future projects.

The National Counselling Service is committed to working together so that the needs of our clients can be more effectively met in the future. The establishment of the Health Board's Executive (HeBE) is welcomed as it will provide an essential support structure for the Health Board's to work together.

### 2.2 NCS Model of Service - Survivor Priorities

Based on the priorities identified by survivor groups during the planning phase of the National Counselling Service it was identified that the NCS should have the following characteristics:

- Be community based
- Ensure direct, free access to counselling
- Take a holistic approach
- Be client centred and respectful of personal choice
- Work closely with support groups and survivor networks
- Ensure high quality services
- Be staffed by highly qualified, professional counselling/therapy staff
- Evaluate effectiveness and impact of the service



Counselling locations are chosen to ensure they provide clients with a private, comfortable and secure place to engage in counselling. In addition counselling is provided on site at the NOVA [National Office for Victims of Abuse] offices, Dublin, to facilitate those clients who prefer to receive counselling in the familiar surroundings of NOVA.

### 3.1.2 National Counselling Service Staff

Almost 80 staff have been recruited to work in the National Counselling Service including ten Directors of Counselling, two Social Workers (based in the Western and Southern Health Boards) administrative support staff and almost 60 counsellor/therapists.

All counsellor/therapists have a health care background in nursing, psychology or social work, an accredited counselling/therapy qualification and at least two years professional work experience.

A Social Worker has been employed directly as part of the Counselling Service teams in the Southern and Western Health Boards. Almost a hundred clients had availed of the social work services in the WHB and SHB by September 2001. Reasons for seeking a social work service related to Housing issues such as, homelessness and housing applications; family issues; financial or tracing issues.

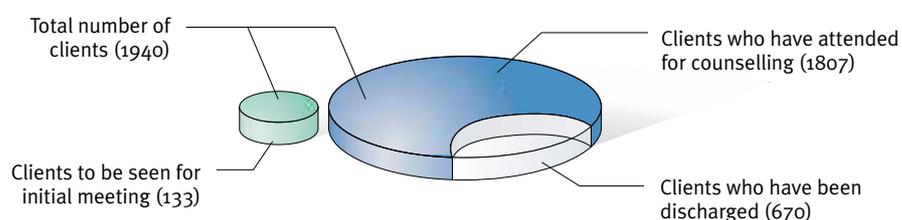
## 3.2 Profile of Clients Attending the National Counselling Service

### 3.2.1 Who Attends the National Counselling Service and Why?

The National Counselling Service offers counselling to any adult (over 18 years of age) who has experienced abuse in childhood, whether that was emotional, sexual, physical abuse or neglect.

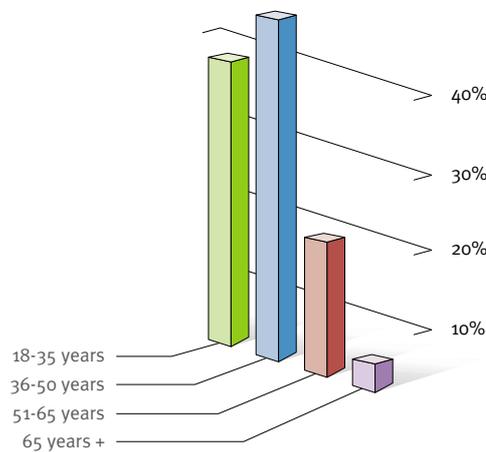
Between September 2000 and September 2001 almost 2,000 people from all over Ireland attended the National Counselling Service. 93% of all clients referred had been seen by the end September 2001. The NCS achieved an 80% success rate nationally for seeing all clients within 4 weeks of referral to the service. By September 2001 The National Counselling Service offered 782 counselling hours per week.

Figure 1 Summary of NCS Service Activity 2000-2001



It is important to highlight that abuse respects no boundaries, it effects men and women of all ages and at all levels in society. A very significant proportion (36%) of clients who attend the NCS are men. This high rate of attendance is welcomed as men generally find it more difficult to seek help and in particular to access counselling services. The majority of clients attending for counselling with the NCS are aged between 30 and 50 years. However it is also important to highlight that 3% of all clients referred for counselling are 65 years of age and older. This is a group of clients who do not traditionally use counselling services and who can find it more difficult to report abuse and seek help.

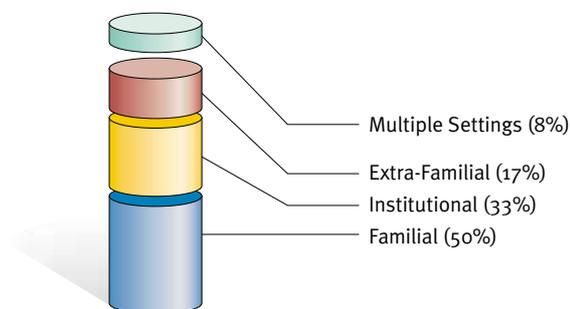
Figure II Age Range of Clients Attending NCS



### 3.2.2 Context of Abuse

Half of all clients (50%) referred to the NCS identify that they were abused within their own families. A significant number of clients (8%) experienced abuse in multiple settings such as within the family or by someone from their community. In total 647 (33%) individuals identified they had experienced abuse whilst in an institution as a child.

Figure III Context in which Abuse Occurred



### 3.2.3 Clients Who Experienced Institutional Abuse

Clients who identify that they were abused in an institution receive the greatest level of priority in the National Counselling Service. One third, that is 33%, of all clients who attended NCS between September 2000 and 2001 reported abuse while resident in an institution. Such clients identify a broad range of current difficulties in their lives including relationship problems and emotional difficulties such as depression or anxiety.

Clients abused as children in institutions identify abuse experiences of every form, some describe extreme deprivation and neglect, others refer to experiences of sexual abuse by those employed to care for them. Many clients report being subject to severe physical punishment and abuse. A significant number of clients say they were abused in multiple ways. The disconnection from and disruption of family relationships, which severely impact on a person's sense of identity and belonging, is highlighted by many clients as continuing to impact them to present day.

NCS Figures indicate that 51% of all clients reporting institutional abuse had applied to the Commission to Inquire into Child Abuse. NCS provides support to clients attending the Commission through:

- Accompaniment to hearings
- Information
- Preparation work in advance of hearings
- Counselling after the client has attended for their hearing

#### [The Importance of Survivor Support Groups](#)

The relationship between the NCS and groups representing institutional survivors is very important as a mechanism for communication and feedback and a link for clients to the National Counselling Service. Formal links have been established with the National Office for Victims of Abuse (NOVA) and the survivor groups affiliated to the NOVA office including Right of Place, Aislinn Centre, SOCA UK, Alliance as well as other support groups for survivors which operate independently.

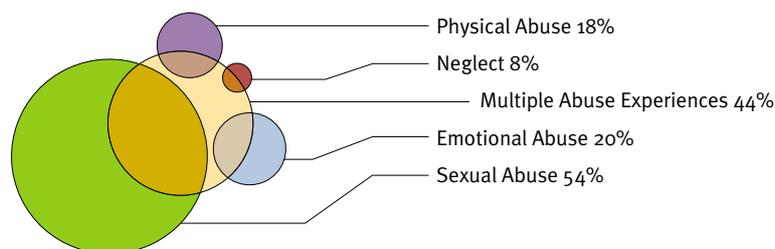
#### [Improving Access to Counselling for Clients Abused in Institutions](#)

For many clients primary needs such as the need for secure housing can mean additional difficulties accessing counselling. The development of a Social Work Service in the Southern and Western Health Boards has been useful for survivors of institutional abuse in meeting wider needs including housing, financial entitlements and records tracing and have been very positively received by survivors.

### 3.2.4 Nature of Abuse Experienced

Child maltreatment is generally categorised as neglect, emotional abuse, physical abuse and sexual abuse. These forms of abuse are not mutually exclusive, one person may experience some or all forms. A large percentage of NCS clients (44%) identify multiple abuse i.e. that they experienced two or more forms of abuse or neglect during childhood. The most common form of abuse identified by clients at initial contact with a counsellor was sexual abuse, (54%), whilst 18% of clients identified that they were physically abused (see Figure IV).

Figure IV Nature of Abuse Experienced as Reported by Client



These figures demonstrate that people are seeking counselling as a result of all forms of abuse and neglect. Clinical experience suggests that individuals who report child sexual abuse at initial contact may also have experienced other forms of abuse which have contributed to current difficulties in their lives, in particular neglect of their basic needs in childhood. Recognition of these experiences generally emerges over time in the context of the counselling relationship. Neglect is the most predominant form of child maltreatment and research has shown neglect to be associated with the most severe long term impacts on quality of life, relationships and mental health in adulthood.

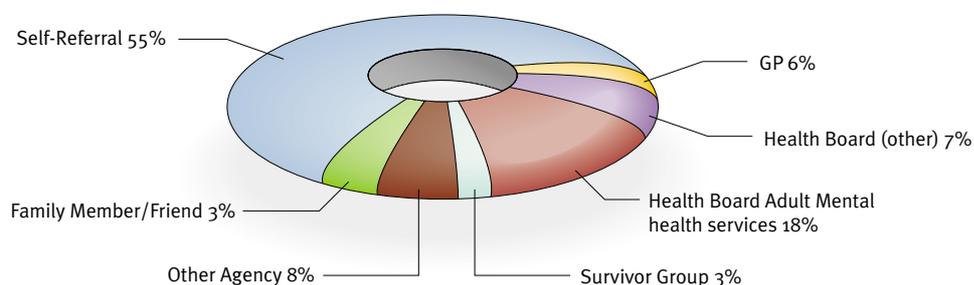
#### Current Child Protection Concerns

Up to September 2001 eighty-one reports were made to child protection services by the National Counselling Service. 88% of all reports related to sexual abuse, 11% to physical abuse and 1% were concerned with neglect. The majority of reports made related to abuse that had occurred in the past where there was concern that an alleged perpetrator could pose a current risk.

#### 3.2.5 How Do Clients Access Counselling?

The majority of clients attending NCS (55%) make contact with the counselling service in their area and request counselling directly. Direct referral is seen as essential to ensuring equality of access and is encouraged through provision of a Free-phone contact number in each health board. (Figure V details client patterns of referral).

Figure V Pattern of Referral to NCS 2000-2001

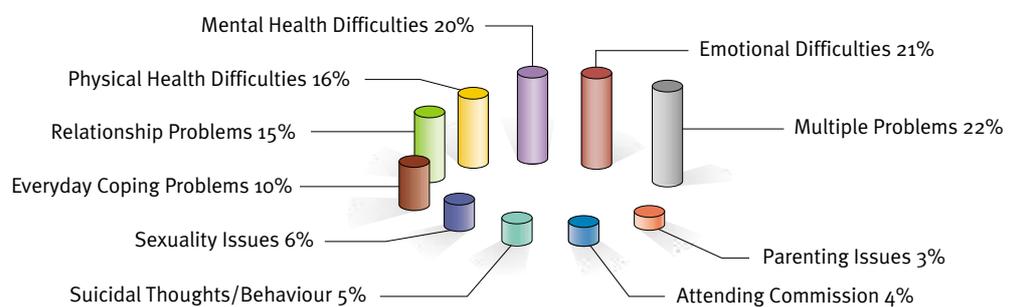


### 3.2.6 Reason for Seeking Counselling

Clients identify many reasons for seeking counselling. The most commonly reported problems include feelings of depression and anxiety, relationship difficulties, worries about parenting their own children or problems coping with every day life. Almost a quarter of NCS clients (22%) identified that they were experiencing multiple difficulties at the time of seeking counselling.

4% of clients sought counselling specifically for support relating to their attendance at the Commission to Inquire into Child Abuse.

Figure VI Reason for Seeking Counselling



### 3.2.7 Length of Attendance for Counselling

Length of time in counselling varies depending on the individual needs and experiences of each client. The majority of clients attend for counselling on a weekly basis. Of clients with counselling contracts at the end of September 2001, 38% had attended for between 2 and 5 months (7-20 sessions) and 15% of current clients were identified as requiring long term counselling contracts of one year or more.

### 3.2.8 Increasing Demand for Service

The NCS is cognisant of increasing numbers of clients seeking counselling. The increased attention to the issue of abuse in the media and greater awareness of abuse and its effects is resulting in more people coming forward to seek counselling. This places increased pressure on existing services. The NCS is in discussion with the Department of Health and Children with a view to increasing staffing levels and service development in 2002 and the years ahead so as to ensure that the quality and standards already established can be maintained and clients continue to receive the service to which they are entitled.

## 3.3 NCS Policy

National policies on Supervision, Confidentiality and reporting of child protection concerns have been developed and implemented by the National Counselling Service.

### 3.3.1 Supervision Policy

In counselling work with adults who were abused as children, supervision provides an essential support structure for work that can be intensive, complex and challenging. Supervision has benefits for counselling staff and most importantly for clients as it helps to prevent staff burn-out, maintain client-focused practice and to improve the quality of counselling. A comprehensive supervision and support structure has been developed in the NCS. All counselling/therapy staff as well as the Directors of Counselling attend for supervision of their work on an ongoing and regular basis.

### 3.3.2 NCS Policy on Confidentiality

NCS recognises confidentiality as essential to the development of trust between the client and the counsellor. NCS policy, Confidentiality, Risk Management and Reporting Procedures developed in line with *Children First, National Guidelines*, recognises the centrality of confidentiality to the counselling relationship as well as our role in child protection and prevention of abuse. NCS Policy addresses three specific areas:

Where there is a concern about:

- A potential risk to a client
- A potential risk by clients to other people
- A potential risk of abuse to children.

Issues relating to confidentiality and NCS policy are discussed with all clients when they first attend the service.

## 3.4 National Projects

### 3.4.1 Consultation Project with Survivors

In order to ensure that the National Counselling Service remains a responsive service, it was identified that an independent mechanism for obtaining the views of clients was required. An Independent Consultation Project with service users and potential users of the NCS has therefore been commissioned which will provide an opportunity to reflect on and listen to the experiences of survivors.

The Health Services Research Centre, Royal College of Surgeons, were selected to carry out this project which will begin in 2002. A Steering Committee, membership of which will include representatives of survivors, will be established to oversee the project and monitor progress. The consultation project will explore perceptions and experiences of the National Counselling Service and will provide crucial information for future planning and improvement of the NCS.

#### 3.4.2 NCS Database

During the development of the NCS survivor groups identified the importance of learning from the experiences of those who had been abused so as to highlight the reality of what people suffered and prevent further abuse in the future. A national database was seen as a way to gather information which would help to achieve this objective by providing:

- An understanding of how people are effected by abuse experienced as children
- Increased understanding about how people cope with the impact of abuse
- Evaluation of how counselling is helpful to clients

Client rights and welfare have been central to the design of the database and are protected by:

- Ensuring that information on the database is confidential (client's names are not used)
- Participation is voluntary
- An information leaflet for clients provides information about the database
- A National Monitoring committee will be established with representation from survivor groups to further safeguard client rights.

#### 3.4.3 NCS Research Project on Counsellor Stress and Burnout

Research has identified that working in the area of child abuse, given the nature of traumatic material being addressed, is associated with stress and burnout in workers. Consequences of burnout are potentially serious for workers and, more significantly, their clients, as quality of care/service provided can deteriorate as a result of burnout. The NCS is studying the effects of working with child abuse issues and will investigate levels of stress and burnout in the counsellor/therapist role. It is hoped this will help to prevent staff burnout and to ensure appropriate support structures are in place.

# 4

## Is the National Counselling Service Making A Difference?

### 4.1 Client Perspectives

Clients currently attending the National Counselling Service were asked for their views about coming for counselling and their perceptions of the counselling process. Significantly, many clients commented positively that they felt the State is finally responding to and recognising their needs.

In addition clients have commented about:

- The importance of a respectful and professional response  
*"You're all so friendly here"*
- The importance of being believed. Clients have expressed their relief at being able to talk to someone who really listens to their experiences.  
*"I can talk about things here (in counselling) that I can't anywhere else"*
- How counselling has helped them  
*"Counselling for me is like having another 'bite at the cherry', by that I mean a second chance with life"*
- Their desire to prevent others being hurt or abused  
*"I hope that by telling you what happened to me, it won't happen to anybody ever again"\**

### 4.2 Right of Place – Cork [Right of Place Committee]

Right of Place is a centre for victims of institutional abuse, run by former victims of abuse in partnership with Cork V.E.C. Located at Crawford Commercial Park, Bishop St. Cork, the centre supports clients attending the Commission to Inquire into Child Abuse and provides advice and assistance in an impartial and fair manner.

The centre offers the following services to victims of institutional abuse:

Confidential Freephone line; Assistance to persons wishing to trace their records; Family Tracing; Reading and Writing tutorial by trained former victims; Referral to persons wishing to avail of Health Services, Counselling, Education, Repatriation, housing and other appropriate services.

Many of those who contact Right of Place are referred to the National Counselling Service and attend Harbour Counselling Service in Cork. Recently Right of Place surveyed some of its members who are attending for counselling with the National Counselling Service.

Members reported that:

The offices are comfortable and administrative staff are understanding and caring. In particular members have commented that the social work, back up service is superb. Our members have found the counselling provided very beneficial and report that counsellors are very professional in their approach. Our members now accept confidentiality as the norm.

Some negatives were also identified in particular that the waiting time after the initial interview can be too long. For some the waiting time between sessions is too long, especially for members who are living outside the city or major towns and who are more isolated.

Members find the after hours service helpful but believe it should be extended.

The Right of Place Centre extends its personal thanks to Harbour Counselling for the sensitive and professional manner in which they responded to requests for help in dealing with two major incidents during the course of last year:

1. The aggression counselling arranged for the Committee of Right of Place in the Harbour Centre
2. The emergency counselling service arranged for the staff of Right of Place after the suicide of one of our members.

### 4.3 The Aislinn Centre, Dublin [Christine Buckley, Aislinn Centre]

“What is counselling? How will it help me? It will not bring back my lost childhood and furthermore, how could these counsellors understand when they weren't in care? Who's to say that these people would even believe me?”

These were some of the reservations that survivors felt about counselling when Aislinn first opened almost two years ago. They could not comprehend how counselling had allowed me the space to speak about the abuse in a safe and secure atmosphere, where to look at things differently, and to realise that what we had endured in those institutions at the hands of so-called carers was totally and absolutely unacceptable. Often I wanted to scream when fellow survivors told me in those early days in Aislinn that I survived because I was “different”. Counselling had made the difference. It enabled me to move on with my life.

Now two years on, thankfully, Aislinn survivors no longer see me as different. They too are changing. Because once they saw how counselling was helping other fellow survivors they decided on their own initiative to commence counselling. They too, have begun to look at life in a different way. They now recognise that they were innocent vulnerable children who never deserved such ill-treatment.

This is why the Taoiseach's apology on behalf of the State on the 11th May 1999 was so important to all of us. Finally after years of trying to tell our stories and seeking justice through counselling we were treated with dignity, listened to and believed. The establishment of a nation-wide counselling service for victims of abuse must be commended. The counsellors that I have met are dedicated, humane and deeply committed. I would like to see more staff and further reductions in the time victims of abuse have to wait for counselling. The issue of counselling for victims of institutional abuse who are in prison or who are in long-term care needs to be developed and more widely available.

Survivors find it extremely painful reliving their painful past. In these institutions friendships were forbidden, siblings suffered loss and separation and children were violated, exploited and destroyed. In other words our childhood's were blighted and stunted to the core. Abuse, secrecy, terror and extreme deprivation were the daily diet. It is often said that "The past is ourselves".

When one considers the years and indeed decades that some survivors spent in such abnormal environments then it must be understood that the healing process can take decades to resolve too. I hope that when Justice Mary Laffoy's Inquiry is complete that it will help all of us to come to terms with our past and move on. We need to know the Commission's findings in order to confirm that justice has finally been achieved. Justice is very important in our healing process too.

#### 4.4 NCS - What We Have Learnt

Reflecting on the first year of the NCS, a key message has been how important it is that those who come to the National Counselling Service feel listened to and believed. Many clients have spoken of not being acknowledged or heard despite telling of abuse as children and as adults. The destructive impact of this failure to respond to their distress is striking. The importance of understanding the secrecy and shattered trust that many survivors experience as a result of abuse has been highlighted by NCS clients. The need for the NCS up to live up to the high expectations of the service, to develop strong working relationships with survivors and other services and to work together so as to achieve positive changes is clear.

This learning has highlighted the priorities which will guide the work of the National Counselling Service in 2002.

# 5

## National Counselling Service Priorities for 2002

### 5.1 To Continue to Listen and Respond to Client Experiences

This will be achieved by:

- A national consultation project which will be undertaken with survivors in 2002.
- Implementation of the findings of the Independent Consultation Process
- Development of an ongoing framework for client feedback and participation in the development of the service.
- Hosting a joint national conference with Survivors of Institutional Abuse as a mechanism for the sharing of learning and experiences to date.
- A qualitative exploration of men's views of how their abuse experiences in childhood have effected their lives and relationships, and for men who are parents, their relationships with their children.
- Support for the establishment of a National Help-line for Survivors.

### 5.2 Continued Support to the Commission to Inquire into Child Abuse

NCS will continue to support those clients attending the Commission to Inquire into Child Abuse through:

- Accompaniment
- Outreach service to clients attending hearings at the Commission
- Regular liaison meetings with the counselling sub-group of the Commission

### 5.3 Child Protection, Prevention of Abuse and Family Support

This will be achieved by:

- Further development of linkages with child protection services and practice protocols in 2002.
- Linking with family support services across the country to facilitate ease of access to counselling for parents who have experienced abuse

### 5.4 Maintaining Quality – Ensuring Service Development

This will be achieved by:

- Review and evaluation of established standards of accessibility and quality and the impact of these standards on the service received by NCS clients
- Establishment of a national forum for counsellor/therapists

- NCS annual conference
- Development of research initiatives
- Establishment of a National Database Monitoring Committee
- Working to establish permanent positions within the counselling service to ensure service stability and retention of key staff
- Working to facilitate expansion of NCS social work service to other health board areas
- Discussion with the Department of Health and Children regarding resources required to ensure continued provision of a quality and effective service to clients given the increasing demand for counselling.

## 5.5 Implementing The National Health Strategy

- The National Counselling Service aims to integrate the principles of National Health Strategy into the operation and delivery of service.
- The development of a primary care strategy is welcomed and the NCS sees a valuable role in making a contribution to the development of integrated primary care services.

## 5.6 Identifying And Responding To Need

This will be achieved through:

- Working together with others to develop a comprehensive, coordinated, national service for those who have perpetrated abuse.
- NCS recommends the development of therapeutic services dedicated to meeting the needs of children and adolescents who have experienced abuse.

## 5.7 Sharing the Learning

- The National Counselling Service is committed to working collaboratively with the newly established Information and Tracing Service for Adults Raised in Residential Institutional Care service and hopes to establish formal links in 2002.
- In order to contribute to the prevention of further abuse of children in care the National Counselling Service looks forward to developing links and working in partnership with those groups representing young people in care in order to share learning from our clients.
- The National Counselling Service will contribute to information and awareness raising regarding the impact of childhood abuse in adulthood at local and national levels.

## 5.8 Working Together

- The NCS acknowledges the challenges of working together across health boards as well as the demonstrated benefits of working together for our clients. The NCS remains committed to a working together approach.
- As a joint health board project the NCS welcomes the establishment of the Health Board Executive (HeBE) and looks forward to the support of HeBE in the future work and development of the NCS.

# Appendix 1

## National Counselling Service - Regional Profiles

The National Counselling Service has been developed in every health board in the country, each of these services is described in the following section.

### NORTH WESTERN HEALTH BOARD – North West Regional Counselling Service

The North West Regional Counselling Service covers the counties of Donegal, Sligo and Leitrim with an overall population in excess of 212,000 people. In its first year of development the service has established service bases in Letterkenny Co. Donegal, Sligo Town and Carrick-on-Shannon Co. Leitrim. Outlying clinics have been established in Bunrana, Lifford and Dungloe, Co. Donegal with plans to develop further clinics in Ballyshannon, Co. Donegal and Manorhamilton, Co. Leitrim.

The Donegal Gaelteacht area is covered from clinics in Dungloe and Letterkenny. There is a native Irish speaker on the counselling team who is available to provide counselling to clients through the medium of Irish if required. We have also made good use of this resource to do promotional work on behalf of the new service on Radio Na Gaelteachta. Six counsellor/therapists joined the service in its first year of operation, some working full-time and others working part-time

#### Developing Links

As part of our commitment to work closely with other services and agencies the North West Regional Counselling Service has worked hard throughout the year to develop relationships with other relevant services including the adult mental health services, social work and psychology services as well as networking with community groups and victim support groups. Some Members of the counselling team are active members of RESTORE which is a regional trauma response group and they have contributed to the ongoing development of this group in the areas of critical incident responses, training and policy development. Contacts have also been established with the local community-based treatment programmes for those who sexually offend – COSC (adult programme) and ATHRÚ (adolescent programme) - plans are in place to further develop this

relationship in the coming year. In addition Cross border contacts have been made with voluntary and statutory services in Derry and Fermanagh. Services in Northern Ireland have shown strong interest in the establishment of the National Counselling Service in the Republic and there is a lot of scope for further co-operation and liaison in the coming year.

The North Western Regional Counselling Service has been working locally with the Sligo Rape Crisis Centre who from the beginning have shown a keen interest in the development of the new statutory service and in making a contribution to the provision of services locally.

### MIDLAND HEALTH BOARD - "The Arches" Adult Counselling Service

The Midland Health Board adult counselling service, "The Arches", is based in Tullamore, Co. Offaly. The service covers the four counties of Laois, Offaly, Longford and Westmeath covering a population of approximately 205,542 people. Counselling is provided from Tullamore, Athlone, Banagher, Birr, Portlaoise, Mullingar and Longford. Plans are in place to establish an additional centre in Edenderry in order to meet the needs of our clients in that area.

Access to the service is a priority for the Arches Adult Counselling Service, counselling is currently provided to clients who are currently in Portlaoise prison on a needs basis.

Since the service was formally established in September 2000 the Arches Counselling Service has worked to establish local policies and procedures regarding client files, record keeping and confidentiality. A locally specific information leaflet has been produced and distributed in the region. An information campaign with local GPs was conducted in order to promote awareness of the service across the region.

#### Challenges

A key area of work currently being addressed within the counselling team is the challenge of providing a wide level of access to counselling by working in several centres across the region whilst ensuring counsellor/therapists have access to the team support they need to overcome the sense of isolation which can result from working on an outreach basis.

# Appendix 1

In 2002 The Midland Health Board Counselling Service aims to:

- Promote the availability of the Counselling service both within the Midland Health Board and to outside agencies
- To develop awareness of counselling work within the Midland Health Board region
- To provide education, information and training workshops for other health care professionals. on the counselling process and the specific needs and issues for adults who have experienced abuse as children.

## WESTERN HEALTH BOARD

The Woodquay Centre, Galway is the regional base for the Western Health Board Adult Counselling Service for adult survivors of childhood abuse living in Counties Galway, Mayo and Roscommon serving a population of approximately 351,874. The region is large and predominantly rural with a number of urban areas.

Counselling is available in four designated centres:

- Woodquay, Galway. Outreach to Galway clients who are unable to access the Woodquay centre will be provided as required.
- Roscommon town. The Roscommon counselling staff travel to see clients in Castlerea and Boyle.
- Claremorris and Ballina in Co Mayo. In addition an outreach service is provided for clients in Castlebar.

The Western Health Board Counselling Service Staff Along with the Director of Counselling Services, the Western Health Board Counselling Service employs 6 counsellor/therapists and a social worker. Two counsellor/therapists are based in each community care area.

### Integrated Social Work Service

The Western Health Board Counselling Service has an integrated social work service for its clients. Since May 2001 the regional social worker has provided a social work and support service for any clients who use the service and their families., some of whom are receiving ongoing counselling from a counsellor/therapist in the team. A key area of her work has been the provision of a much-needed tracing service for survivors of institutional abuse.

Outreach Service to Castlerea Prison, The Homeless and The Travelling Community

One counsellor therapist has a particular interest in outreach work. She and the team social worker have achieved excellent progress in liaising with Castlerea prison, the travelling community and the various agencies for the homeless in Galway. The concern being to reach survivors who would have particular difficulty in accessing the service.

It is known that many survivors of institutions experience homelessness and there is a need for this group to be informed both about the service, but also about the counselling process itself. The Counselling Service is currently liaising with the Galway Travellers Support Group and aims to further develop links with traveller groups to ensure this client group have equitable access to the service.

The Western Health Board Counselling Service was asked to provide counselling help to those effected by a number public concerns throughout the year.

The counselling service was ready to assist:

- Any families effected by the revelations about organ retention in some hospitals in the WHB area
- Any family members of those killed in the recent USA disaster, who were living in the Western Health Board area
- As the counselling service is experienced in dealing with psychological trauma several requests to the service for de-briefing after traumatic incidents – the majority from staff groups- have been made.

## EAST COAST AREA HEALTH BOARD – Avoca Counselling Service

The East Coast Area Counselling Service is located at Baggot Street Community Hospital, 18 Upper Baggot Street, Dublin 4. The service is called AVOCA Counselling – to represent the Adult Voices Of Childhood Abuse. The service covers Community Care Areas 1, 2 and 10 extending south from Ringsend in Dublin to Carnew in South Wicklow and from the East Coast of Wicklow over to the borders of West Wicklow and Carnew. The population of the ECAHB is approximately 325,000 people.

# Appendix 1

Clients are currently seen for counselling at offices in Baggot Street Community Hospital and in Wicklow Town. Along with the other counselling services in the Eastern region, AVOCA offers counselling two days a week at the National Office for Victims of Abuse (NOVA).

## AVOCA Counselling Service Staff

All the Counsellor/Therapists currently working with AVOCA are Counselling Psychologists with experience of working in private practice, the voluntary and corporate sectors. AVOCA has experience of working in critical incident response services, forensic services, drugs/Aids services and community mental health both in Ireland, the UK as well as internationally. The Counselling Team share an active interest in the area of trauma and a commitment to working with adult survivors of childhood trauma.

## The Development of a Counselling Service for Adult Survivors of Childhood Abuse in the ECAHB

- In August 2000, the ECAHB employed a Consultant to begin the work of providing a counselling service to adult survivors of institutional abuse. This person is a Counselling Psychologist with a special interest in this client group. She has provided a counselling and welfare service throughout the Health Board Area.
- In January 2001 with the appointment of the Director of Counselling, the ECAHB refurbished dedicated counselling rooms at Baggot Street Community Hospital to accommodate the National Counselling Service. Counselling to clients from Baggot Street began in March 2001.
- In May 2001 AVOCA Counselling Service was extended to Wicklow Town with the appointment of a part-time Counsellor/Therapist for that area.

## NORTHERN AREA HEALTH BOARD - LARAGH Counselling Service

LARAGH Counselling Service, was established in 1993, following the recommendations of the Report of the Kilkenny Incest Investigation in recognition of the long-standing suffering caused by sexual abuse in childhood. Since then, the service has provided an extensive therapeutic programme to male and female adults who have been sexually abused in their childhood or youth.

At present, a team of 7 counsellors with the Director of Counselling and assisted by 2 secretaries provide counselling to adults in the Northern Area Health Board which covers the North inner city and North County Dublin. The Service is community-based, with two counselling bases at Clontarf and the North Circular Road; a third office base has recently been secured in the North Inner City area of Dublin. Clients choose the location they find easiest to access. Clients with physical disabilities are facilitated in our North Circular Road office.

In the seven years of its existence, more than 1200 clients have availed of counselling with LARAGH and since 1999, more than 80 clients who experienced abuse in institutions, have attended for counselling.

Groups are also facilitated for clients who have previously attended for individual counselling and who would benefit from working in a group setting with other survivors of abuse. At present two therapy groups are operating, one for female clients at the Clontarf office and a second for men and women based at Park House, Phippsborough. In the last year, more than 20 clients have benefited from group therapy.

## Key Role in the Development of the National Counselling Service

In May 1999, LARAGH expanded its service to include survivors who had experienced any form of childhood abuse (i.e. sexual, physical, emotional abuse and/or neglect) in institutions and became part of the National Counselling Service.

LARAGH Counselling Service made a significant contribution to the development of the National Counselling Service as it was the only dedicated service of its kind in the Republic prior to the establishment of the National Counselling Service.

## Collaboration and Links

LARAGH's work also involves providing information, training, supervision and consultancy to the public and other services. During the last year LARAGH has been involved in:

- On-going collaboration with Our Lady's Hospital for Sick Children, Crumlin, in provision of a support group for parents of sexually abused children

# Appendix 1

- Individual and Group Supervision for Health Care Personnel, including Psychiatric Nurses and Social Workers
- Provision of an Adult Sexual Abuse Training Programme for the Staff of the Glenmalure Day Centre, Psychiatric Service
- Involvement in training of counselling and clinical psychology Postgraduate students of Trinity College Dublin
- Providing regular inputs into the training programme at St. Vincent's Hospital Fairview for Occupational Therapists and Psychiatric Nurses

## Challenges

Due to the cost and demand for accommodation in the Dublin area, finding appropriate counselling accommodation has been an ongoing challenge.

## MID WESTERN HEALTH BOARD

The Adult Counselling Service of the Mid-Western Health Board covers Counties Limerick, Clare and North Tipperary which has a population of over 317,000 of which 68% (216,178) is over the age of 18.

The service base is in Limerick City and currently counselling is also available in Rathkeale, Co. Limerick, Ennis and Ennistymon, Co. Clare, Nenagh and Thurles, Co. Tipperary.

## Collaboration and links

An important link for the service is with the Mental Health Services of the Mid-Western Health Board. This vital contact helps ensure that clients have seamless service when necessary. Other valued connections are with Childcare and other Health Board Services.

A counselling service is available to survivors of institutional abuse in Limerick prison by arrangement with the prison authorities. Clients are also seen as needed at the acute psychiatric unit of the Regional Hospital, and the long stay psychiatric hospitals in Limerick and Clare. To date, any disabled client requesting to be seen at home, has been facilitated.

Clients are not restricted geographically and may be seen at the location of their choice wherever possible.

As a result, many clients living on the Limerick borders of Clare and Tipperary have chosen to attend for counselling in Limerick City.

## Mid Western Health Board Counselling Service Staff

At present there are 5 Counsellors/Therapists and a Director of Counselling employed with the Service. Two additional counsellors/therapists have been recruited and are due to take up post in next few months.

## Challenges

The most significant development relating to the Service is the provision of outreach services throughout the region as clients demand. To date the Service has responded to demand according to geographical area. It has also been a challenge to manage the extent of demand for counselling

Working with survivors of institutional abuse has been identified by the team as one of the most challenging aspects of the work as this group of survivors have specific needs not generally observed in counselling those who experienced childhood abuse who did not have to leave their families.

Over the next 12 months the Mid Western Health Board Adult Counselling Service aims to extend its outreach services further according to demand. With additional staff due to come on board it is expected that the Service will be in a position to commence group-work and to engage in educational and prevention work throughout the region.

## SOUTH WESTERN AREA HEALTH BOARD - ALBA Counselling Service

Alba Counselling Service covers the South Western Health Board Area and is responsible for delivery of counselling services to adults living in the South Inner City of Dublin, South County Dublin, Co. Kildare and West Wicklow, a region with a population in excess of half a million people. 'ALBA' is Italian for dawn and was chosen as the name for the counselling service in the South Western Area in order to signify the beginning of new possibilities which can be engendered by the counselling process.

Together with a Director of Counselling 5 counsellor/therapists provide counselling in three counselling centres obtained in response to the expressed need of potential clients. Alba's offices are located at:

# Appendix 1

- 5 Lord Edward Court, Bride Street, Dublin 8,
- 66 Old Bawn Road, Tallaght, Dublin 24
- 2 McElwain Terrace, Newbridge, Co. Kildare.

Each centre is discreet, accessible and community based

Alba is currently in the process of developing a psychodrama group at the Tallaght office with the aim of offering a creative and diverse approach to people attending the service.

#### Outreach work

In response to requests from our clients, Alba Counselling now offers a Counselling Service one day each week from the National Office for Victims of Abuse (NOVA)

#### Collaboration and Links

Since January 2001 Alba has established links with other service providers within the South Western Area Health Board. The aim is to increase awareness about counselling and therapy, to increase accessibility to the service and to develop knowledge within our service of other supports, which may be of benefit to our clients.

#### Challenges

A current challenge for Alba counselling service is to recruit additional counsellor/therapists in order to meet service demand. It is proposed to further develop group work initiatives currently available in Tallaght to the rest of the region.

#### SOUTH EASTERN HEALTH BOARD – Comhar Adult Counselling Service

Comhar is the South Eastern Health Board part of the National Counselling Service serving counties Carlow, Kilkenny, Tipperary South Riding, Waterford and Wexford and covers a population of over 400,000 people. Comhar is located at two bases, Waterford City and Kilkenny City. From these two bases counselling is provided to Co. Wexford through locations in Wexford town and Enniscorthy, West Waterford through locations in Dungarvan and Lismore. The base in Waterford serves as a single access point for the service and this has proved popular with clients with over 70% of referrals accessing the service through the freephone.

From the Kilkenny City office base counselling is provided from Carlow town, as well as Carrick-on-Suir and Clonmel in Tipperary S.R.

Along with the Director of Counselling five counsellor/therapists work with Comhar. Two bases for the counselling service have been established and it has been possible to plan and implement the counselling service around the region in a systematic and comprehensive manner.

#### Collaboration and Links

The creation of a new counselling service within the Health Board requires linking with other Health Board services. An additional development has been the establishment of the Protocol Development Group for Counselling Practice. This meeting provides a forum where counselling and psychotherapy service providers within and outside of the South Eastern Health Board can collaboratively work towards identifying best professional practice and quality standards. The initial priority for the group is the liaison between Comhar and the five Rape Crisis Centres within the South Eastern Health Board area, this process is already underway.

#### Challenges

Building a team identity where individual members come from different disciplines and have differing theoretical perspectives and therapeutic styles is one of the exciting challenges for Comhar counselling service. The diversity of the team enhances the service available to our clients. A healthy supportive team is an important counterbalance to this stress that can be felt in working in the area of abuse and can also help to avoid professional burnout. An ongoing challenge is ensuring that the service is responsive to the needs of our clients. Feedback from ongoing dialogue with the three survivor support groups within the region and the emerging learning from clinical experience to date indicate a demand for one to one counselling. Feedback and experience has also emphasised the importance of maintaining the anonymity and accessibility of the service as service development continues.

#### SOUTHERN HEALTH BOARD - Harbour Counselling Service

Harbour Counselling Service covers the Southern Health Board region of Cork and Kerry. Harbour's main office base is on the quays in Cork City close to Cork harbour. The Southern Health Board, comprising large urban and rural populations, covers the second largest geographical area of any health board in Ireland with a population in excess of 555,000.

# Appendix 1

At Harbour we aim to provide accessible services and in order to cover the large geographical area it has been necessary to base the service in many regional locations. The counselling service is coordinated from our main base at Penrose Wharf in Cork City. The majority of referrals/contacts to the service are from people living in the North Lee/South Lee catchment areas. A second busy Cork City base in Ballincollig provides an alternative location for people living in the city. Counselling is also provided in North Cork from Mallow, Charleville and Fermoy, while the people of West Cork can access counselling from Bandon, Skibbereen and Bantry. In Kerry the service is available in both Tralee and Killarney. Harbour also incorporates a dedicated Social work service available to all clients who attend the service.

Promotion of the service in order to reach those clients not receiving existing services so as to enable them directly to access counselling was the a primary goal in a comprehensive advertising campaign which was undertaken at the outset of the service. This involved local media, radio advertising and interviews. A significant aspect of Harbour's work to date has been its link with the survivor groups in Cork in particular Right of Place. This has facilitated greater access for clients to counselling and collaborative work to meet the needs of clients who experienced abuse in institutional care.

## [NORTH EASTERN HEALTH BOARD – Rian Counselling Service](#)

The North Eastern Health Board covers Counties Louth, Meath, Cavan and Monaghan. There is an acknowledged increasing population in Counties Meath and Louth, with a total estimated population in the North Eastern Health Board region of almost 320,000. A team of 5 counsellor/therapists and one Director of Counselling supported by two administrative staff deliver the National Counselling Service in the North Eastern Health Board area. One third of clients attending Rian Counselling Service are male, this figure is higher than that generally reported for similar services and is a positive indication of service use by men in the North Eastern region.

Rian Counselling Service aims to ensure that the service it provides is integrated across the region with existing health board services. Service integration is also facilitated by Rian Counselling Services' participation on a number of cross-agency/cross-disciplinary committees including the North Eastern Women's Health Implementation Committee, North Eastern Regional Planning Committee on Violence Against Women and Regional Family Support Working Group.

Throughout the first year of its operation Rian Counselling Service has worked to develop links with key agencies in its board area including:

Social Work Services; Family Support Services ; Aftercare Development Officers; Adult Mental Health Services and Voluntary Agencies such as ,Women's Refuges throughout the region, the VEC the Dundalk Institute of Technology and services for the homeless.

The North Eastern Health Board borders four health board and three Northern Ireland Local Authority areas. Cross border links are being developed specifically the Nexus Institute, which provides counselling to adults in Northern Ireland who have experienced sexual abuse. It is hoped to hold a joint training initiative with Nexus in 2002.

In 2002

- Rian Counselling Service has established links with NOVA in order to develop a support network for clients who have experienced institutional abuse in the North Eastern Region.
- Rian Counselling Service hopes to develop its group work initiatives in 2002 with the onset of a therapeutic group for women and the establishment of a men's support group.
- Information evenings for clients are in the final planning stages and it is hoped that these sessions will provide clients with additional support and information.

## Appendix 2 - Survivor Support Groups

### Contact Details Survivor Support Groups

National Office for Victims of Abuse (NOVA)  
Manager: Kevin Brady,  
19 Upper Ormonde Quay,  
Dublin 7,  
Freephone: 1800 25-25-24  
Tel: 01 8728482, Fax: 01 8728488

*The National Office for Victims of Abuse was established by the Government in February 2001 to support survivors of Institutional Abuse. It provides information and advice regarding issues such as tracing records, the commission to Inquire into Child Abuse and the Residential Redress Board and offers a drop in service.*

Right of Place  
Unit 4, Crawford Commercial Park,  
Bishop Street, Cork.

*Office Hours are 9:15 am to 5:15 pm Monday to Thursday, 9:15 am to 4:00 pm Friday.  
Closed for lunch 1- 2 pm.*

Freephone line: 1800 200 709  
Fax: (021) 4975740  
E-mail: [upton.stp](mailto:upton.stp)  
Web Site: [www.RightOfPlace.com](http://www.RightOfPlace.com)

Aislinn Centre  
Christine Buckley  
Ormonde House, Ormonde Quay  
Dublin 7  
Tel: 01-872-5771

Justice and Healing for Institutionally Abused (JHFIA)  
Victor Hackett  
Dublin  
Tel: 01-867-1006

Right of Peace/Clonmel Group  
Michael O'Brien  
Co. Tipperary  
Tel: 052 80880(w), 087 645 4298

SOCA UK  
Mick Waters  
18 King Edward Rd, Hillfields,  
Coventry, CV1 5BT  
United Kingdom  
Tel: 0044 2476 551952

Organisation for Recovery from  
Institutional Abuse  
Jo Baker  
Co. Meath  
01 825 2353

Alliance  
Tom Hayes  
Co. Armagh  
Tel: 04838 871 708  
Fax: 04838 871 676

IRISH S.O.C.A.  
John Kelly  
Dublin  
Tel: 01 455 0413, 087 247 5591

Irish Deaf Society  
*(for those who experienced institutional abuse who have a hearing impairment)*  
30 Blessington St,  
Dublin 4,  
Contact: Sinead Braiden, Social Worker  
Tel: 01 8601878, Email: [ids@indigo.ie](mailto:ids@indigo.ie)  
Fax No: 01-8601960

## Appendix 3 - NCS Contact Details

- 1** **NORTHERN AREA HEALTH BOARD**  
Laragh counselling service covers North Co Dublin as far as Balbriggan and including Swords and extends to Blanchardstown and into the North Inner City.

Ms. Isolde Blau,  
Director of Counselling,  
Laragh Counselling Service,  
Northern Area Health Board,  
1 Prospect House, Prospect Road,  
Glasnevin, Dublin 9.  
FREEPHONE 1800 234 110  
Tel: 01-8335044, Fax: 01-8334243

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- 2** **EAST COAST AREA HEALTH BOARD**  
Avoca counselling service covers Dublin 1, 2& 10 extending south from Ringsend, Dublin to Carnew, South Wicklow and from the East Coast of Wicklow over to the borders of West Wicklow and Carnew.

Ms. Rachel Mooney,  
Director of Counselling,  
AVOCA Counselling Service  
East Coast Area Health Board,  
Baggot Street Hospital,  
Baggot Street, Dublin 2.  
FREEPHONE 1800 234 111  
Tel: 01 6681742, Fax: 01-6681750  
avoca.counselling@erha.ie

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- 3** **SOUTH WESTERN AREA HEALTH BOARD**  
Alba counselling service covers South Inner City Dublin, South County Dublin, Co Kildare & West Wicklow.

Ms. Fiona McCarthy,  
Director of Counselling,  
ALBA Counselling Service  
South Western Area Health Board,  
2 McElwain Terrace, Newbridge,  
Co. Kildare.  
FREEPHONE 1800 234 112  
Tel: 045-448176/7, Fax: 045-448179  
albacounselling@erha.ie

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- 4** **MIDLAND HEALTH BOARD**  
The Arches regional counselling service covers counties Offaly, West Meath, Laois & Longford

Mr. Jonathan Egan,  
Director of Counselling,  
The Arches Adult Counselling Service,  
Midland Health Board,  
21 Church Street, Tullamore, Co. Offaly.  
FREEPHONE 1800 234 113  
Tel: 0506-27141, Fax: 0506-27617  
thearches.counselling@mhb.ie

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- 5** **WESTERN HEALTH BOARD**  
Woodquay counselling service covers counties Mayo, Galway & Roscommon.

Theresa Flacke.  
Director of Counselling,  
Woodquay Centre Counselling Service,  
Western Health Board, 7 Daly's Lane,  
Woodquay, Galway.  
FREEPHONE 1800 234 114  
Tel: 091-561336/8, Fax: No 091-561174  
woodquay.counselling@whb.ie

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- 6** **MID WESTERN HEALTH BOARD**  
Adult counselling service covers counties Limerick, Clare & Tipperary North.

Ms. Noreen Harrington,  
Director of Counselling,  
Mid-Western Health Board,  
Adult Counselling Service,  
106 O'Connell Street, Limerick.  
FREEPHONE 1800 234 115  
Tel: 061-411900, Fax: 061-411566  
josullivan@mwwhb.ie

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## Appendix 3 - NCS Contact Details

- 7 SOUTHERN HEALTH BOARD  
Harbour counselling service covers counties Cork & Kerry.

Dr. Philip Moore,  
Director of Counselling,  
Harbour Counselling Service,  
Southern Health Board, Penrose Wharf,  
Penrose Quay, Cork.  
FREEPHONE 1800 234 116  
Tel: 021-4861360, Fax: 021-4861368  
harbour@shb.ie

- 9 SOUTH EASTERN HEALTH BOARD  
Comhar counselling service covers Waterford, Kilkenny, Wexford, Carlow & Tipperary South.

Mr. Gerard O'Neill,  
Director of Counselling,  
Comhar Counselling Service  
South Eastern Health Board,  
49-50 O'Connell Street, Waterford.  
FREEPHONE 1800 234 118  
Tel: 051-852122, Fax: 051-852129  
lenihanm@sehb.ie

- 8 NORTH EASTERN HEALTH BOARD  
Rian counselling service covers counties Meath, Louth, Cavan & Monaghan.

Ms. Fiona Ward,  
Director of Counselling,  
North Eastern Health Board,  
Rian Counselling Service,  
34 Brews Hill, Navan, Co. Meath.  
FREEPHONE 1800 234 117  
Tel: 046-67010, Fax: 046-67016  
rian@nehb.ie

- 10 NORTH WESTERN HEALTH BOARD  
North West regional counselling service covers counties Donegal, Leitrim & Sligo.

Mr. Tom McGrath,  
Director of Counselling,  
North Western Health Board,  
North West Regional Counselling Service,  
1 St. Eunan's Court, Letterkenny, Co. Donegal  
FREEPHONE 1800 234 119  
Letterkenny: (Tel) 074-67250, (Fax) 074-67252  
Sligo: (Tel) 071 42161, (Fax) 07142691

# The National Counselling Service - Geographical locations



**LEGEND OF MAP**

- Main Office
- Out Reach Centre

HeBE comprises the ten Health Boards and the Eastern Regional Health Authority



ERHA



MIDLAND HEALTH BOARD



Southern Health Board  
Bord Sláinte An Deiscirt



North Western Health Board  
*Bórd Sláinte an Iar-Thuaiscirt*



EAST  
COAST  
AREA  
HEALTH  
BOARD  
Bord Sláinte  
Uimistear an  
Chosta Thoir



Western Health Board  
Bord Sláinte an Iarthair



northern area  
health board  
bord sláinte an  
limistéir thuaidh



North  
Eastern  
Health  
Board



MID-WESTERN  
HEALTH BOARD