



Annual Report 2021-2022

Program Overview







- New Horizons Family Counseling Center (NHFCC) offers family counseling services to K-12 students and their families in the surrounding communities and provides educational opportunities to counselors in training. The mission of NHFCC is to serve the community through collaboration with public school systems and other community services in the provision of free couples and family counseling. This mission would not be possible without the ongoing partnership of the New Horizons Regional Education Centers (NHREC) and the surrounding school districts.
- The NHFCC is within the Flanagan Counselor Education Clinic that is housed at the William & Mary (W&M) School of Education. The clinic is run primarily by the doctoral and master students who serve as the counseling interns, supervisors, and directors. The clinic also includes involvement from the faculty in the W&M Counselor Education program as clinical and administrative supervisors.

Program Overview

- In the NHFCC, counselors help their clients by facilitating personal and interpersonal growth across the lifespan with a focus on emotional, social, vocational, educational, developmental, and mental health concerns. Through the integration of theory, research and practice, and with sensitivity to multicultural concerns, they help people improve clients' wellbeing, alleviate distress, and resolve crises.
- NHFCC provided counseling services to 129 families (over 300 people in sessions) based on 253 referrals and 7,132 hours of service in 2021- 2022. This report provides a summary of various aspects of the services provided by the NHFCC during the 2021-2022 school year including referral sources, reasons for referral, school districts served, family configurations, and new initiatives.









Staff and Leadership in the Clinic

Leadership Changes

- In March of 2022, Dr. Rebecca Sheffield departed her role as Clinic Director.
- Faculty in the counselor education stepped in to filled the role in various ways. These faculty included:
 - Dr. Patrick Mullen, Interim Director
 - prmullen@wm.edu
 - 757-221-6071
 - Dr. Elizabeth Burgin
 - Dr. Bianca Augustine (new faculty member)
 - Dr. Amber Pope (new faculty member)
 - Dr. Daniel Gutierrez (no longer at W&M)
 - Dr. Craig Cashwell
- An active search is underway for a permanent faculty director for the clinic.













Our Current Counselors and Supervisors

Masters-Level Counseling Interns

Mabel Amara



Lucas Bishop



Audrey Hardianto Zaria Hardy

Vicky Arriola





Aya Henry

Doctoral Student Leaders

Philippa Chin, MEd



Tamika Jackson, MEd









Jonathan Adams, MEd

* Not all staff were included.

Service Delivery Updates

Continuing to provide support through uncertain times



Service Delivery Updates

During the academic year 2021-2022, the NHFCC continued to provide counseling services through a HIPAA compliant telehealth platform. As families participated in counseling via telehealth, we continued to note several benefits that included:

- Improved cost-efficiency without needing to travel to remote in-person sites.
- Feedback from families suggested a high level of comfort with the counseling process and reduced stigma associated with mental health care utilizing this platform.
- Families reported fewer barriers to consistent attendance such as transportation, extracurricular activities, or work schedule problems.
- Family members who resided in different locations, such as in the case of blended or co-parenting families, were able to participate from their locations consistently, thus adding value to the change process.

The clinic started to welcome clients back into the School of Education counseling offices during the Summer of 2022. During the 2022 fall and going forward, both Telehealth and in-person options exist. While the clinic has not resumed remote in-person services, this is a goal for the near future with the aim to reduce barriers for families to receive services.

Program Summary

Synthesis of programs and populations served



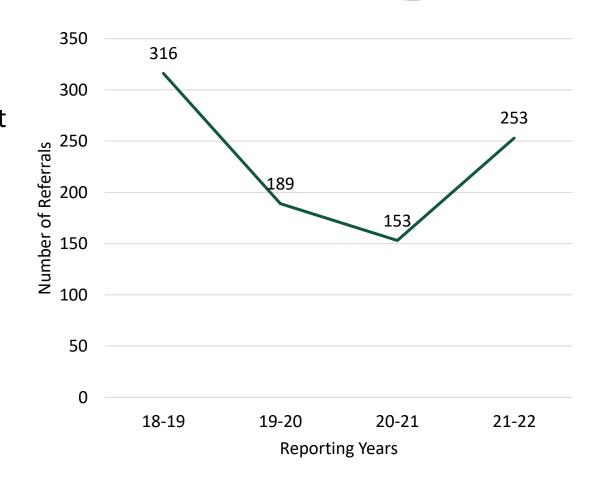
Executive Summary

- 253 Families were referred for counseling.
- School counselors and staff continued to be a primary referral source (46%).
- Family self-referrals remained a common source of referrals (19%).
- Reasons for referral have changed to focus primarily on depression, personal social support, and family communication. We attribute this the challenges associated with recovering from the pandemic and return to school/work.
- School Districts: Referrals from Williamsburg-James City County remain the largest source followed by York County and Newport News. Other areas remained consistent.
- Single-parent headed families represented the largest number of families referred (37%), followed by two-parent (33%) and separated/divorced families (18%).
- The largest percentage of children referred for counseling were 14 (11%), 11 (9%), 13 (9%), 17 (9%), and 7 (9%) years of age. The mean age of IPs was 15 with a median of 13. These are slightly older ages than the IPs in prior years.



Number of Referrals and Trends

- A total of **253 referrals** were received.
 - Includes Fall 2021-Summer 2022
- The referral rate is up compared to the last two reporting years (189 and 153). These lower referral rates occurred during the years the COVID-19 Pandemic with impacting the schools and communities.
- The pre-pandemic referral rate was 316, slightly higher than the referrals received this past year.



Community Impact

- The NHREC provided the NHFCC \$78,600 during 2021-2022 to support the services provided to the local communities.
- The NHFCC in the 2021-2022 year provided a total of **2,590** clinical hours (billable hours, time with clients) and 4,543 indirect services to the community. Using standard rates for family counseling (\$100 an hour), this translates to \$258,925 worth of direct clinical services offered at **no cost to the residents** in the service area.
- Using these data, for every \$1 that the NHREC provided the NHFCC, the NHFCC delivered \$3.29 of free services to the community.
- That is a 329% return on investment.

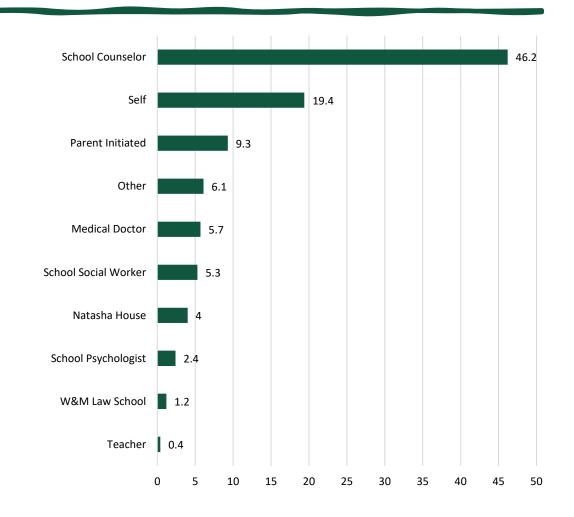


People who make the Referrals

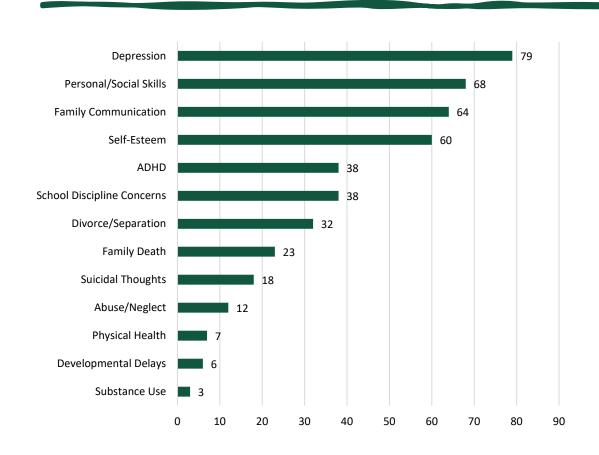
Most of our referrals throughout the year came from:

- School counselors (46%)
- Self-Referrals (19%)
- Parent Initiated (9%)

Other common referral sources include school social workers and other community partners.



Reasons for Referral



When referred to the NHFCC, referrers and clients identify their reason for seeking counseling. The most common reasons for the referrals include:

- Depression (79%)
- Personal/Social Skills (68%)
- Family Communication (64%)
- Self-Esteem (60%)
- ADHD (38%)
- Discipline Concerns at School (38%)

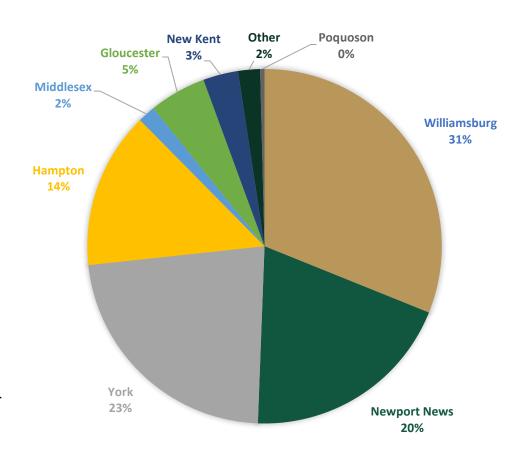
^{*} Most clients select more than one referral reason, which is why the % adds up to more than 100%

School Divisions Served

The NHFCC receives referrals from the consortium of school divisions served by NHREC. Of these districts:

- 31% Williamsburg James City
- 23% from York
- 20% from Newport News
- 14% from Hampton
- 5% from Gloucester
- 3% from New Kent
- 2% from other areas (telehealth)
- 2% from Middlesex
- < 1% from Poquoson

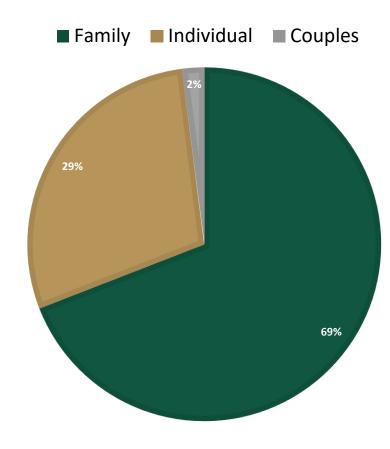
The percentage of referrals from each school district are consistent year over year and correspond with population density in each district.



Type of Services

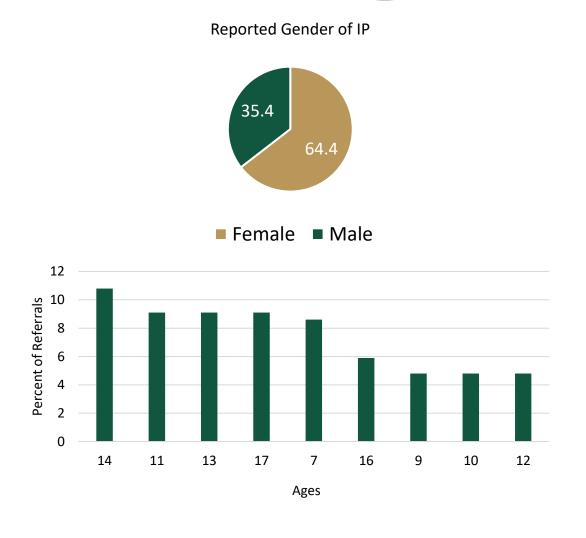
The NHFCC provides Family Counseling as a primary approach to counseling. It also offers individual and couples counseling based on the needs of the family. The breakdown of service types includes:

- 69% of clients received family counseling services
- 29% of clients received individual counseling services
- 2% of clients received couples counseling

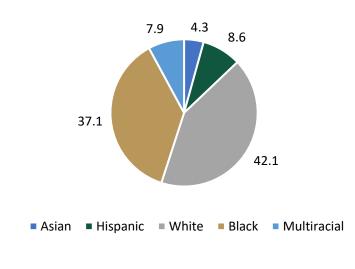


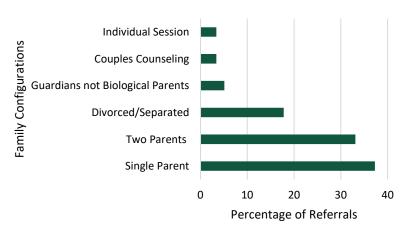
Demographic Information

- The Flanagan Counselor Education Clinic served a total of 129 Identified Patients (IP).
 An IP is the key person needing support/services. The total number of people (IP + other family members) attending session exceeds 300 people.
- Most IPs referred to counseling were identified as Female (64%)
- The average referred IP age was 15 years old
 - Median = 13
 - Mode = 14
 - Range of 5 to 79 years old



Demographic Information





- The race/ethnicity of IPs referred to counseling included the following:
 - White/Caucasian (42%)
 - Black/African American (37%)
 - Hispanic (9%)
 - Multiracial (8%)
 - Asian (4%)
- The family constellation of IPs referred to counseling included the following:
 - Single parent (37%)
 - Two parents (33%)
 - Separated/Divorced (18%)
 - Guardians not Biological Parents (5%)
 - Couples Counseling (3%)
 - Individual Session (3%)

^{*} Siblings in family varied



Research and New Program Initiatives

Flexing to the needs of the community

New Program Initiatives

In recognition of a growing need in our community, counseling interns under faculty supervision, provided individual and group counseling to parents, teachers, and adolescents:

- Offering SSPARK group for parents and youth
- A partnership was developed with Williamsburg Landing's to offers support to the senior population
- A partnership was formed to offer clinical and training support with the W&M Law School's immigration clinic
- Offered Community Reinforcement And Family Training (CRAFT) groups to support families have someone with an addiction

The Flanagan Counselor Education Clinic is also forging ahead with several new initiatives:

- Partnership with local Head Start programs to support in school services and develop therapeutic schools
- Building capacity to offer Play Therapy in the clinic
- Offering Parent-Child Relationship Therapy, starting in the Spring 2022. This
 evidence-based approach is designed to help youth with social/emotional
 concerns by enhancing their relationship with their parents
- Offering couples counseling to the community



SSPARK brings parents in the Greater Williamsburg area together for weekly group to discuss child development and positive communication, offer and receive support from other parents, and learn about skills and strategies to support children's resilience and overall family cohesion.

Free pizza and refreshments will be offered at 5:30; groups start at 6 pm. Childcare will be provided; kids aged 5+ can enroll in Student Success Skills Groups during SSPARK! Please scan the QR code or visit linktr.ee/wmfcec to register and receive additional information!

Final progress report for the 2021-2022 goals.



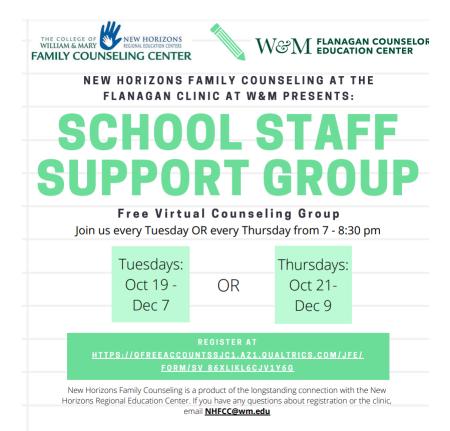
Impact of leadership changes on School Improvement Plan Goals

The former Clinic Director abruptly departed their role in Spring 2022. Their sudden departure resulted in a lack of communication between the former Director and the interim Clinic leadership team, whereas the interim leadership were not made aware of the 2021-2022 School Improvement Plan Goals. While some progress was made towards achieving the goals prior to the Director's departure, not all goals were met.

Upon learning of the 2021-2022 goals, the Clinic leadership team moved quickly to ensure action was taken to achieve the goals as soon as possible. For the goals that are not fully met, the leadership team is taking action to meet these goals by the end of Spring 2023.

Goal 1: Increase the scope of the clinic by offering additional wraparound services to meet the specific needs of our catchment area, to include three additional group counseling offerings per year. (Strategic Priority #4)

• Goal 1 was met. The NHFCC offered a number of group counseling opportunities through the 2021-2022 year. This includes offering youth and family groups via telehealth where parents learned about strategies to enhance their parenting skills. These groups were offered during the summer, fall, and spring semesters. In addition to offering youth and family groups, the NHFCC offer support groups for local teachers as they rebounded from COVID-19 and the stress related to returning to education.



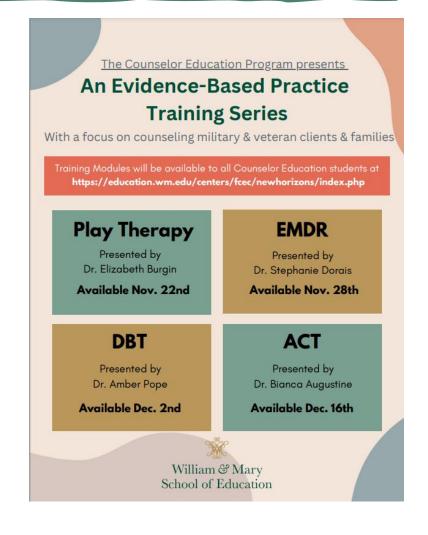
Goal 2: Maintain and enhance our online resource center for families. The resources currently include strategies for enhanced family communication, parenting interventions, school/family collaboration approaches, and connection to area agencies for additional support. At least three videos and comprehensive mental health services resources will be added. (Strategic Priority #3)

 Goal 2 was met. The online resource center for families has been maintained and improved, providing resources for community members. The website will be updated to include video-based resources and psychoeducational materials for community members.



Goal 3: NHFCC will further enhance services by offering specialized, competent, and evidence-based training for our staff on working with military and veteran families. (Strategic Priority #4)

• Goal 3 will be met. While goal three was not initially met, the NHFCC leadership team scheduled a series of trainings for Clinic staff that will occur within the next 6 weeks. The trainings will highlight evidence-based practices for counseling in military and veteran clients and families. The trainings will also be recorded and shared for community members on the NHFCC website.



Goal 4: Clinic leadership and a doctoral team of researchers will examine impacts on area families of the global COVID-19 pandemic. Research to include strategies for mitigating pandemic-related stressors and resulting mental health challenges in family life. (Strategic Priority #3 and #4)

• Goal 4 was not met. This goal was created by the former Clinic Director, but due to their abrupt departure in the 2022 spring semester, they did not initiate the work to achieve this goal.

Related to Goal 4, the interim Clinic leadership team is developing methods of evaluating the effectiveness of Clinic services through client assessments at intake, during (i.e., every 4-6 weeks while clients are receiving counseling), and termination, staring in the 2023-2024 academic year. As this data is gathered, Clinic staff can analyze assessment scores across time to determine how clients are improving upon receipt of counseling. The results will be used to assist the Clinic staff with tailoring future services to more effectively serve families in mitigating stressors and mental health challenges.

Thank you for continuing to support our families!

