



# CASE STUDY

- **13 Year Old Male**
- **Referred by: School Learning Mentor**
- **Reason for referral: Young person was very anxious and therefore removed himself from socialising and preferred to stay in the safety of his own home.**

Young person was referred due to suffering anxiety. YP had an accident 3 years ago of diarrhoea whilst out with friends. This had never occurred since, however young person was very anxious and therefore removed himself from socialising and preferred to stay in the safety of his own home. This also had an impact on family outings and holidays. YP would refuse to go or refuse to eat for several days, most of his daily eating would be done after school when he felt he was safe in his own home. YP refused to travel by public transport as toilets weren't available.

YP had been referred to hospital over this issue, the outcome was that there is no medical reason for the young person to have an accident. Dad has irritable bowel and young person had convinced himself he was the same.

YP is in mainstream school and is achieving well. He lives with both parents and siblings and seems to have a settled family life. YP has friends who he sees in school but rarely outside of school due to this issue.

Goals were set at the start of intervention and reviewed throughout. Goals increased over time. Work was completed throughout all sessions on confidence and self-esteem.

YP became more relaxed in sessions and began to open up more as we progressed. Short Warwick's was complete and again results showed improvement.

Work was complete on eating, YP developed a list of food he felt safe to eat that wouldn't make him need / think he needed to go the toilet. From this list YP began to eat more and started to introduce breakfast and lunch at school. By eating the foods the YP deemed safe made him feel more relaxed. By eating the YP felt more motivated and energetic, mum noted this had been a great improvement at home.

Over sessions we worked on anxiety calming strategies and techniques as well as how we can distract ourselves when anxiety develops. YP engaged well in this and provided evidence in sessions of how he had used these strategies.

As YP progressed we worked on automatic thoughts and discussed how we can change negative thoughts into positive ones. The YP grew in confidence and began to challenge himself which led to him achieving more. YP had a better food intake, was able to sit with friends at lunch time and eat a pre-planned meal. YP began to socialise more. At the end of sessions YP still feels like there may be a medical problem and has this set in his mind. However YP does recognise his progress and is happy of what he has achieved during the IAG sessions.

**The Short Warwick-Edinburgh Mental Well-being Scale (SWEMWBS)**

**17.0 to 21.0**

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