In the therapy session video, the client was portrayed as Tia Mowry. She was an Afghanistan war veteran who was suffering from Post-Traumatic Stress Disorder. This was the first therapy session. She was referred to this therapist by Jackson Psych Ward. She had been admitted for alcohol poisoning. She has been experiencing frequent flashbacks about the war, which drove her to frequent alcohol abuse. She admitted she did not feel like she had a strong support system within her family and her only source of support was from a roommate and her brother.

Skills this therapist focused on and seemed to work were deep breathing mindfulness, the identification of triggered behaviors, the false belief that drinking alcohol would get rid of the flashbacks for the client, and discussion of the consequences if the client were to continue drinking to drown out her flashbacks. This therapist also implemented a homework assignment for the client to utilize at home in between sessions. The client was receptive to the deep breathing techniques and follow-up appointments. She was willing to take steps towards changing her behavior.

Since this student has not had much previous experience with role-playing, it felt a little awkward to have to create a scenario and figure out how to effectively address the client issues that were brought up. This scenario was not scripted, therefore, this therapist found herself at a loss for words at times during the session. Something that this therapist should consider doing differently, if faced with the same task in the future, would be possibly writing out a script or scenario prior to recording a video of the session. Planning ahead would have been a better idea in this case. This therapist felt a little nervous while recording the scenario since it was not scripted and she had to go with the flow of the conversation during the recording.

HC

This student chose Cognitive Behavioral Therapy (CBT) as the theory of intervention in this session with Tia. This approach is based on the view that problems can be looked at in a behavioral context, and negative behaviors can be changed to more positive behaviors (Turner, 2011). CBT focuses on targeting problems, and then creates behavioral goals to solve these problems. One type of program that appears promising in regards to enhanced functionality and quality of life among multiple domains of health is teaching mindfulness (Follette, Briere, Rozelle, Hopper, & Rome, 2015). Since Tia reported having flashbacks, this therapist wanted to teach Tia mindfulness breathing exercises when she felt a flashback coming on, in order to change this maladaptive negative behavior into a positive. The primary goal of mindful breathing is simply a calm, non-judging awareness, allowing thoughts and feelings to come and go without getting caught up in them ("Get Self Help", n.d.). This therapist wanted Tia to learn to interact with more people that were in similar situations as she was; therefore, this therapist mentioned attending Alcoholics Anonymous meeting to Tia. This therapist felt the self-help group would empower Tia to be in control of her alcohol abuse and become in control of her life once again. The group is a means of support to help Tia get through tough times. This therapist also encouraged Tia as she progresses in treatment, that possibly the sessions could involve her mother as a method to possibly mend the relationship she longs for with her mother. This therapist could have recommended another method of detox; however, at this point, since Tia had just recently been discharged for alcohol poisoning, the therapist felt that Tia would benefit more from attending Alcoholics Anonymous meetings. This therapist felt that by providing the opportunity for Tia's mother to attend the sessions, the therapist could provide necessary communication skills for Tia and her mother to learn to effectively communicate with each other and be a means of support for each other.

This therapist did not have any emotions towards the client in this session. The therapist felt comfortable approaching Tia about the reason for her referral, and wanted to listen effectively to Tia about her problems in order for the therapist to be able to respond to Tia's needs in an effective manner. The fact that Tia had abused alcohol reminded this therapist of a family member who was a former alcoholic after the session concluded; however, there were no forms of countertransference whatsoever. This student's family member no longer had problems with alcohol and was able to work through the addiction. This therapist did not even think of any countertransference with Tia in relation to the therapist's family member. The therapist wanted to assist Tia with her problems. The therapist felt comfortable providing support for Tia and feels empowered to address Tia's goals for future sessions.

The reality is that social workers have been working with trauma survivors from the first day the profession began ("Trauma-Informed", n.d.). In the session, this therapist reflected on what the client stated was the problem by restating how it made her feel or what the therapist heard. The therapist interacted with the client by meeting the client where she was. The therapist asked open-ended questions about different aspects of the client's life that allowed the therapist to paint an idea of the type of environment and ecosystem in which the client lives. Tia was practicing maladaptive behaviors and responses to deal with her problems. Learning new, more adaptive behaviors will lead to more rewarding behaviors (Turner, 2011). The therapist wanted to focus on the present problems that the client was experiencing, and therefore utilized CBT to address Tia's problems. In CBT, the focus of clinical treatment is on the present. The mindfulness breathing exercises seemed to help Tia be able to relax more and become calm. The therapist assigned this exercise as homework as a method to practice when Tia felt she was going to have a flashback or felt stressed as a means to calm herself.

This therapist would continue having weekly sessions with Tia to monitor the progress made by achieving the goals that were made in the first session. This therapist would continue to ask open-ended questions in order to gauge an understanding of Tia's progress, reflect on Tia's previous problems, and measure the effectiveness of the mindfulness breathing exercises. The therapist might incorporate some self-monitoring exercises, or diary work, to give Tia the ability to express her feelings through journaling. Self-monitoring is possibly the single most important mechanism in changing any thought or behavior ("Self-Monitoring", n.d.). The therapist might also look at teaching reframing mechanisms to Tia as a way to begin to change her negative thinking into positive. Reframing is a way of changing the way you look at something and, thus, changing your experience of it ("Cognitive Reframing", n.d.). This therapist could implement both self-monitoring and reframing techniques into future sessions with Tia.

This student would like to further develop her public speaking skills and work on not feeling pressed for time. The therapist could do this by practicing more role-playing or in presenting class presentations. The student could also improve her skills at teaching the client demonstrations of exercises that she wishes for the client to practice. One way to develop these skills further is to attend training seminars that are specific to the type of treatment the student wishes to utilize in therapy sessions. The student could benefit from attending continuing education conferences and other social work field training seminars. This student plans to continue her education at Barry University for the remainder of her program and possibly attend school for her PhD one day. This could help the student to master her public speaking skills if she were to have to teach other students. Also, learning how to manage time a little more effectively would be beneficial to this student. This student could also benefit from taking the licensure exam and learning through supervision hours about appropriate and effective approach

Chopping Charles

References

- Cognitive Reframing For Stress Management. (n.d.). Retrieved from https://www.verywell.com/cognitive-reframing-for-stress-management-3144872
- Follette, V. M., Briere, J., Rozelle, D., Hopper, J. W., & Rome, D. I. (2015). *Mindfulness-oriented interventions for trauma: Integrating contemplative practices*.
- Get Self Help. (n.d.). Mindfulness. Retrieved from http://www.getselfhelp.co.uk/mindfulness.htm
- Self-Monitoring Made Easy | *Psychology Today*. (n.d.). Retrieved from https://www.psychologytoday.com/blog/more-tech-support/201009/self-monitoring-made-easy
- Trauma-Informed Social Work Practice: What Is It and Why Should We Care? | Virtual Connections. (n.d.). Retrieved from https://njsmyth.wordpress.com/2013/04/19/trauma-informed-social-work-practice/
- Turner, F. J. (2011). Social work treatment: Interlocking theoretical approaches. New York, NY: Oxford University Press.