

### **Mood Check**

Therapist: So Rebeca, I've had a chance to review the file we went over last week and I'm all caught up. And so I wanted to, uh, explore some of the things that we talked about last week and I see here that you had mentioned that you were feeling as excited as you would have liked about being adopted, and it says here that you were feeling intense sadness. So I just want to start us off with a mood check to see where you're at this week.

On a scale of 1-10, where would you rate your sadness?

**Comment:** Though the opening and mood check went smoothly, I do not think that 'intense sadness' was the right mood to scale. My correction would be:

"I would like to pick up from where we left off on last week's mood check. You mentioned that you were depressed. In the past week, how would you rate your sadness on a scale of 1-10?"

Client: Sadness at a 7. Thought past experience with foster family would ease the transition into permanent home.

Therapist: Last week you said that you were at an 8. So a 7 sounds like an improvement. What does your 7 look like today?

**Comment:** I thought that was a great was to acknowledge the client's progress from the previous week, while also finding out what the 7 meant to them.

Client: 7—trouble getting out of bed and going to school, hard finding motivation to complete day.

Therapist: On your 8 from last week, you also mentioned that you had trouble finding motivation to just do daily tasks, but, I'm glad that you're at a 7. Hopefully with our continued sessions we'll be able to get you down to the 3 that you said that you wanted to be at.

**Comment:** I showed the client what their 8 looked like from last week and affirmed them that this week's 7 was a step in the right direction. I could have been more empathetic toward the client, so my correction would be this:

"I'd like to affirm you, Rebeca, in the progress that you're making. Last week you were at an 8 and this week is a 7. The 3 that you want to be at is getting closer, and that is all due to the hard work and tough conversations we have here. Thank you for being open and honest during our time together."

### **Setting the Agenda**

Therapist: Um, alright, so I'd like to just review with you what we're going to do for this week, and we've already done our mood check, so awesome. And we're going to look over your homework that you had done last week, your thought records, and we're going to see if those, uh, assignments that you had worked on were helpful and what you'd like to change about those. And then we'll see what your highs and lows were from the past week, and then we'll set our new homework assignment and you can just give me feedback on what you think that I can do better for you. Does that sound okay? Is there anything you would like to add?

**Comment:** I could have sounded more confident in setting the agenda. My correction would be to make this section more concise:

"I have an agenda for our session today, and I'd like you to add anything you feel is appropriate for our conversation today. Like last time, I we did a mood check, will review your homework, then, work on one problem today. After that we'll create a new homework assignment for the

following week and end with you giving me feedback on what worked and what did not. Is there anything you'd like to add?"

Client: No.

### **Reviewing Homework**

Therapist: So Rebeca, would you, uh, like to share with me the homework that you brought? – Oh, okay, let's go over it together.

(Reviewing Thought Log) So your situation was that you are getting, um, acclimated to your new family and they don't have any kids, so that was a bit of a learning curve I see. And your automatic thought was, as you were transitioning, it was 'these new people won't like me'. Your emotional reaction to that was you were crying in the bathroom. Was this at school or at your new home?

**Comment:** I could have focused more on the client's emotions rather than the crying spell in the bathroom. There was a lack of empathy. My correction is this:

"I can see that you've had a challenging time dealing with this thought; crying is a completely normal reaction for someone to do when they're overwhelmed. How did you feel in that moment when you were crying in the bathroom?"

Client: School.

Therapist: From your behavioral reaction you said that you were not doing well in school.

**Comment:** This was stated really weird. For a high school student, this should have been put in more colloquial terms, rather than sounding as if I were a robot. The sheet I used had an emotional, behavioral, and physiological component to the thought log. My correction is this:

"You wrote down that you cried and thought about not fitting in with your new family. I see here in your homework that you also mentioned you were not doing well in school. Which one of these problems would you like to focus on today?"

Client: I've been slacking off

Therapist: What does slacking off look like to you?

**Comment:** This was a great question. I asked this to see if the client's bad grades were related to the very stressful situation, or if she was genuinely doing poorly in her classes because she didn't comprehend the material.

Client: Straight A's are now turning into C's.

Therapist: From your physiological portion you mentioned you're cutting yourself off from your friends.

**Comment:** Again, the phrasing was not appropriate for the age of the client. It sounded robotic. I would change it to this:

"While you were in the process of cutting yourself off from your friends, what were the thoughts going on inside your head?"

Client: Finding it hard to keep up with friends.

Therapist: With your automatic thought, your first one it says these new people won't like me; your new family, you're afraid that they won't like you.

**Comment:** This would have been an excellent time to ask about the client's cognitive distortion: mind reading. As I broke down the homework assignment, I should have taken more time to analyze the client's automatic thought. My correction is this:

“We all have a little voice in our head that says others won’t like us or that we’re not loveable. Do you have any evidence that suggests your new family will not like you?”

Client: Doesn’t feel connected to new family; is accustomed to previous families being emotionally distant.

Therapist: Do you have any evidence that your new family is like your old families that you were at?

**Comment:** I think this was a really great question. I asked for evidence that you disprove or strengthen the argument that the client’s situation was similar to a past experience.

Client: When first arriving at house, was shown to room and left alone. Used to the cycle of being left alone, was like this at previous households. Doesn’t feel much will change with new family.

Therapist: Have you had any positive experiences with them?

Client: Family seems nice, bought clothes she would like, even got her a computer.

Therapist: Sounds like they were really paying attention to what you wanted.

**Comment:** I think this was a great instance where I was able to reiterate the positives of the client’s situation.

Client: Families in the past had done that too.

Therapist: Does it change anything for you, Rebeca, that the people are adopting you rather than fostering?

Client: Hopes aren’t high, family in the past tried to do the same.

Therapist: On my calendar I have it down that the next session that we do will be with your adoptive family. How do you feel about that?

**Comment:** My intention for this question was to ask the client if she was still interested in having a conversation with her family about her concerns. The question I had asked put more focus on her feelings rather than her thoughts. My correction would be:

“As we work on processing the feelings you’ve had about your previous families, would you like to include your new family into that conversation?” (additionally) “What are some of the things you would like to discuss with your new family in our group meeting next week?”

Client: Intrigued

Therapist: Uh, this new family, the Santos’ that are adopting you, um, or they have adopted you, um, what... what is a positive that you see coming from this experience?

**Comment:** This question was asked so awkwardly. What I had intended to elicit from the client was a positive report in the past week, rather than the whole experience. What I should have said was this:

“Being adopted is a big step from being fostered. What is something positive that you predict happening with joining the Santos family?”

Client: Learning experience for client as she sets foot in new home. Wants to gain new ways of thinking about situations; doesn’t know what to expect.

Therapist: What to expect (echoing client’s words). That can be really tough. This is... it’s a really interesting time in your life because you’re in high school, getting ready to graduate soon. You’re also getting adopted and get a chance to start again with a new family. Um, with your thought log for this week, did you think that it was very helpful?

**Comment:** I could have used more empathy in this section of the session. My client was expressing a very challenging period in her life and the most I could come up with was if the homework was good. Though it was a relevant question, it was not asked at the right time. What I would have said is this:

“You are incredibly resilient, Rebeca, considering that you have gone through so much in just 16 years. You’re at a major point in your life where you’re integrating into a new family while also gearing up to graduate high school. Was there something about the homework assignment that helped you to resolve some of the depression you’ve been feeling about all of this?”

Client: Part of it was, parts of it was challenging.

Therapist: What ways did you find it unhelpful?

Client: Hard writing down tough emotions.

### **Working on Problem / Automatic Thoughts**

Therapist: Thank you for sharing that with me. So, for our next assignment that we do together we can make a record that is more beneficial to what you want to work on. Let’s... in the past you mentioned that you’ve seen other therapists. Did any of them try doing a ladder approach to your problems?

**Comment:** The way I phrased the following assignment makes it sound like the first assignment I gave was not beneficial. I also randomly reference the client’s previous therapists; I think there is a better way to integrate that into a conversation. How I can correct this is by saying:

“Before we go into our next homework assignment, let’s try something called a ladder. It’s exactly as it sounds: we put our goals at the top of the ladder and work our way up from the bottom...”

Client: No.

Therapist: Okay. Well, today I’m going to show you what um, a ladder is... in cognitive behavioral therapy... and so... We know what ladders do. And usually you’re going from somewhere lower to somewhere higher. Well, with cognitive behavioral therapy, we set our goal at the top—so in this box will be our goal. And right now we’re right down here. Using your thought record from last week, the situation that you’re in is that you’ve been adopted, and you’re having to start again with a new family. So, what would be your goal, out of this thought log that you would want to work toward?

**Comment:** This sounded very confusing, even to my ears as I said it. The instructions for the ladder approach were good, but the example was not the best. Instead of working with the situation from the thought log, I should have used this instead:

“We’re going to use your thought log from this past week to do our first ladder. There are three things that we can work on: your relationship with the Santos, your depression, or isolating yourself from your friends. What is something from here that we can work on today?”

Client: Goal is to try and connect with new family.

Therapist: Okay, so your priority would be to connect with your family. Connect with family... okay. Now these other boxes, these are the steps that we’re going to take together to get from down here where you have the idea, for your automatic thought, is that they won’t like you. And so we have two new boxes to fill in to help us to get to the main goal. What are some steps that we can take from down here, where they won’t like you, to get to up here where you can connect with your family?

**Comment:** I feel as though I was too direct and did not allow the client the autonomy to set her goals. I realize that the client is ultimately the one who set the goal, but it felt a little bit like coercion; the client responded how I wanted her to. There was also an attempt to make the automatic thought homework assignment connect with the work we were doing on the ladder, but the attempt was shoddy at best. I needed to be more intentional with the connection of cognitions with goal formation. My correction is this:

“Do you see how our ladder is coming together? Now let’s look back on the homework you did in the past week and review some of the thoughts you had when you were dealing with the issue of not connecting with your family. What kind of thoughts do you think you might have if the Santos’ were to ask you to join them for a family outing?”

Client: Could make an effort after school to engage with adoptive dad.

Therapist: Take time to ask how day is going. This is a really great first step. I like that! What would be another step that would help us?

**Comment:** Here I am using active listening skills as well as affirming the client. I am eliciting further responses from the client as to how she thinks she can build a relationship with her family. Since there is not much I can see to edit, my new dialogue would be this:

“Let’s explore some other thoughts you may have after thinking, ‘I want to have a meaningful conversation with my dad’ We’ll do the same for your emotions once we’re done with that.”

Client: Going to church with family

Therapist: Okay. So going to church...on Saturday. Just to review our ladder, it’s great. We have: new family won’t like me. So what I would like to do is: to take time to get to know them is by talking to them when they get home, going to church on Saturday, and that will help me, or help you, reach the goal of connecting with the family. Would you like to hold on to this paper, or can I hold on to it in my file?

**Comment:** I thought I did a good job summarizing what the client stated and putting it on our ladder. I could have used more affirming language and asked for the cognitions that the client was having (or would predict to have). I definitely should have asked if the client was religious and if going to church was something she even wanted to do. My correction would have been:

“The ladder that we’re building looks good. Some steps we’ve identified are: talking to dad when he gets home and attending church on Saturday. You’ve said that these would be ways that you can build a relationship with the Santos’. Would you consider yourself a religious person?”

Client: Will keep it.

Therapist: Okay, okay. And with the homework that you finish here, would you like to hang on to this one?

Client: No.

### **Collaboratively Setting Homework**

Therapist: Okay, thank you Rebeca. Um, so for going into this next week, I do have more thought logs that you could do, or we can explore other types of homework. And one of those other homework explorations that we could do is evaluating some of your automatic thoughts. So the snap decisions—or the snap thoughts that you have when a not great situation happens—we can evaluate those. Or, we could use a um, structured approach to um, further explore the negative thoughts that you have around the situation. So which one do you think you would like to explore first?

**Comment:** I should have given the client directions on what we were going to do next, rather than so many options. It's clear that they're in a situation that is taking a lot of emotional energy from them, so by creating so many options I may be overwhelming the client. I should have identified the client's cognition, and then said what the relevant homework would have been. Here's what I would say:

“This week I'm going to ask you to complete another thought log, but we're also going to try something new. You're going to think about a situation this past week that made you upset or sad, and we're going to talk through the thoughts that you had during that episode. Are you ready?”

Client: Automatic thoughts.

Therapist: Okay. Let's practice some of that together while we're here. That way when you go home and you get a chance to look at this on your own, you have some kind of framework to work with. Okay, so Rebeca, what is... so let's explore your automatic thoughts with just a little bit of role play. So I'm going to give you an 'if, then' scenario. So, an example of that would be if you're at school with your friends and they ask you about your new family, then your reaction would be... or response to that would be... and so we can do some of those. Let's start out with: if your adoptive dad comes home from work and he asks how your day was at school, then your response would be to...?

**Comment:** I was already in too deep by the time I realized I was doing the 'if, then' process wrong! I wasn't sure how to fix it at the time, so I rolled with it (which was a bad idea). Throughout the whole segment I am assessing the client's behavioral reaction and modification, rather than her thoughts. My correction to get this back on track would be:

“Let's role play an 'if, then' scenario. What this exercise does is identify your automatic thoughts so we can break them down and help change them. So, our first scenario is this...”

Client: Are we doing reactions in the past or how I should act?

Therapist: Let's do the past, then do a future one.

Client: In the past would barely engage, one word answers

Therapist: Okay. So let's try it again with how you would like to react... respond.

Client: Could tell more specifics about the day

Therapist: Okay, okay. Would you like to try another one with your mom this time?

Client: Sure.

Therapist: So what is something that your mom likes to do?

Client: Gardening

Therapist: Okay. So if mom is gardening and you see her gardening out there and it looks like fun, then your response would be to...?

Client: First time leave her alone.

Therapist: Okay. So let's say mom is gardening again. What would your new response be?

Client: Ask if she needs help.

Therapist: Okay, so you've shown some really great steps based on the ladder homework you're going to be doing this coming week. Um, so you're making efforts, or you will be making efforts to connect by being more specific in your daily act— when your dad asks how school went. And if you see your mom doing one of her hobbies, which is gardening, then you'll ask her if she

needs any help. Now, do you think this will be doable for you in the next coming week or coming months?

**Comment:** Because I had started with a poor ‘if, then’ understanding, I was unable to make the connection between cognitions and actions. This was more relationship building rather than focused on the client’s thoughts. It is hard to do the edits on what I should have said when the whole segment was executed incorrectly. My correction for this is:

“Great work, Rebeca. Based on what we’ve done just now, how likely do you think you will be able to talk to your dad and garden with your mom in the coming week?”

Client: Yeah.

Therapist: You do? Um... I think this automatic thought log will be excellent for you to explore, Rebeca, ‘cause you show so much initiative in taking the steps to um, to establish the relationship that you want with your new family. Alright, now can we talk about... well, we talked about the homework that you’ve done, and set a new homework assignment for this coming week; can we talk about the highs and the lows you that you’ve had in the past week?

Client: Crying was the low. The high was signing up for a ceramics class.

Therapist: Okay. What do you like about ceramics?

Client: Own space to work with hands, requires a lot of patience and discipline

Therapist: Would you say that you benefit from having a structured approach to ceramics? Or homework or anything of that nature?

**Comment:** This was phrased a little weird, so I understand the client’s confusion with the question. Again, I didn’t use age appropriate language for someone who was 16. I could have sprinkled more interest and empathy into the question. It would have read like this:

“Patience and discipline are hard qualities to find in a person, let alone someone who is trying out a new hobby. Do you think patience and discipline help you complete tasks outside of your ceramics class?”

Client: Please clarify.

Therapist: Like you mentioned that you have to have patience and focus when you’re working on ceramics, is this how you typically approach problems in life?

**Comment:** Considering how young the client is, this question would make more sense if I had left off the ‘life’ part. The question is rather broad and doesn’t require much thinking on the client’s part. How this should have sounded was like this:

“It sounds like ceramics takes a lot of concentration in addition to patience. Have you used those skills before in another setting?”

Client: This is how problems are approached that have value; things that are meaningless are not highly regarded.

Therapist: Would you say that when you’re patient and you’re focused on your ceramic project that the result is good?

**Comment:** The way this sentence is structured, it sounds like I’m leading the client to say that her work is good. I should have allowed time for the client to disclose more about ceramics and what kind of thoughts she has when she completes a piece of art she’s proud of. What I should have said was:

“How would you describe the feelings you have when you’ve worked very hard on a project and the result is a beautiful piece?”

Client: Yeah, teacher says there's potential.

Therapist: What kind of things do you make in ceramics?

Client: Gargoyles, other things.

Therapist: I can see the way your face lights up when you talk about ceramics. It looks like it's something you really enjoy. On your automatic thought records for this coming week, I know you said that you don't like homework, but maybe we can think of it as less homework and more like a project that you're working on. Because our end product would be to connect with your family and I think that this homework would be excellent to uh, supplement the relationship building process. And so like ceramics, it's going to take a little bit of patience and a lot of focusing, but I definitely believe that you have the skill to do so.

Well Rebeca, it looks like we're running out of time and our session is coming to a close. So, just to summarize what we covered today: we went over your, your mood check from last week and it looks like you went down a number, so you went from an 8 to a 7. And you said that your 7 was that you were finding it hard to find motivation to get out of bed, you're struggling a little bit with finding tasks to do to keep you busy. And um, we talked about the relationship you would like to have with your new parents and the steps that you would like to take towards doing so. And then we talked about ceramics and the way that um, having patience and focus helps you uh, create beautiful things and how that skill can also be used to create a relationship with your new family. Is there anything that you feel I left out?

Okay, now I'm going to give you the homework for next week and then we'll go over that the following time. And if you feel like doing another thought record, you are more than welcome to do so and we can go over that. Thanks for coming in.

**Comment:** I closed the session out a little weak. I was able to summarize the session well, but I did not touch on a single cognition, what went well during the session, and how the homework will help us shape the next session. I liked that I was able to use ceramics to tie in what the client liked to do, and the homework she did not necessarily want to do. It was my goal to get the client to think about the homework as something positive and beneficial for her. My correction is this:

“Rebeca, as our session draws to a close I'd like to review what we covered today. You said that this week your depression was at a 7 rather than an 8, together we found a goal that you would like to work on during the time you spend in therapy, and then we set homework for next week. We identified steps you could take to achieve this goal and what some of the thoughts you'll be looking out for in next week's thought log. Is there anything you feel that I left out? No? Well, thank you for coming in. I look forward to seeing you next Thursday.”

## Reflections

At the beginning of the semester, I was really anxious to do CBT. I know my skills as a social worker do not lie in therapy—it's just something I've come to understand. However, as the semester progressed and I began to practice with my friends, I realized that though I may not be great at therapy, I thoroughly enjoy learning the skills. I've seen myself ask great scaling questions, as well as give relevant feedback to my peers.

Some of the challenges I've faced as I learned CBT came internally. I kept second guessing my skills, thus leading to multiple cases of double barreled questions, confusion, and cases where I was rambling. I have definitely grown in my confidence, which can be seen in this video when I didn't ask double barreled questions. I gave the client time to think about questions and did not flounder when there were pauses in the conversation. In this final video I definitely saw how far I've come since the beginning of the semester.

I plan on using the skills I've learned from this class to challenge not only my own cognitive distortions, but to identify unhealthy distortions in my friends and family. I do not plan on operating as a clinician in the future, therefore the one-on-one work will not necessarily be applicable to me, but I still look forward to learning more about CBT and its benefits. An area of growth I would like to focus on the following semester is having the confidence to ask challenging questions, such as family history and relational questions.