

Self-Evaluation Final Paper

Greet the client

Therapist: Hi Milkah, how are you?

Client: Hi, I'm okay.

Therapist: You're just okay?

Client: Yeah.

Comment: This question wasn't needed since the client just stated how they were. By asking I am repeating the same thing twice.

Correction:

Client: Hi! I'm okay.

Therapist: I hope by the end of our session you feel a little better.

Therapist: Well, I'm glad you came back to see me.

Client: Yeah.

Therapist: I know you're a little hesitant to do that from our first session, but I'm glad you decided to do it.

Comment: Maybe I should have been more affirming that the client returned to do another session.

Correction:

Therapist: Last session you were undecided about continuing with session. I am proud of you for giving it another try.

Client: Yeah.

Agenda

Therapist: Just to start everything off, I'll kinda remind you about the confidentiality. I won't go through everything, but just a reminder that everything you say is confidential, so I will not be able to share with anyone else. So just feel free to talk openly, honest. It will stay within this room. We will pretty much summarize how your past week has been, since I haven't seen you kind of get an update. And we'll also review the homework. And after that we'll prioritize, work together, you know, decide how we're going to spend the rest of our session, so that it's more beneficial to you, deciding what is most important that you want to talk about. Also, we'll review the cognitive behavioral theory model I mentioned to you last time, which is pretty much, overall, evaluating and assessing how your thoughts that you're having, how those trigger certain emotions, and, then, therefore, bring out certain behaviors. And they are not so helpful and a little more negative. We want to challenge them, and make them a little bit more reality a little more positive, because then those bring out those good emotions that we do want to feel. It's a big model, it's a big theory, and it's a little hard to understand it. Also, just automatically implement and practice in every day life. Today we'll break it down, you know, step by step, talk about your thoughts, what thought are you having, kind of, identify some emotions that you're going through, and then, how are you acting afterwards, to see if we can, you know, redirect those thoughts to be more positive. I'm hoping, also, to bring out some more positive emotions, as well. We'll kind of do that today and hopefully you understand it a little bit better. As I said, you know, it's not what we do, naturally, so this will take time, and hopefully along the way you'll be able to, you know, use it throughout the week as we progress. How's that sound?

Comment: This was lot of information at once. I should not have explained the CBT model at this point, as it was lengthy and not pertinent for this portion of the conversation. I also stumbled over my words quite a bit (five times).

Correction:

Client: Yeah.

Therapist: As a reminder, our conversations are confidential and will stay between the two of us. If you say anything about harming yourself or another person then I will have to report it to the proper authorities to ensure your safety. Today's session we will spend time talking more about the Cognitive Behavior Theory model that I mentioned last week. Before we do that I want you tell me about this past week and then we will prioritize the top areas of concern that you want to spend our time talking about. How does that sound to you?

Client: That's fine.

Mood Check

Therapist: Let's start off, last meeting ... Overall, for this past week, on a scale of one to ten, how would you rate your sadness? One being maybe you didn't feel too sad, to ten, "I was extremely sad," this past week?

Comment: This question was too wordy and I didn't come across confident in what I was asking. I should have also stated that from the previous session sadness was an emotion the client mentioned having.

Correction:

Therapist: Let's do a mood check. Last week you mentioned that you had been feeling sad. Is that still true for you now?

Client: Yes

Therapist: On a scale of one to ten with one being low and ten being extremely high, how sad did you feeling this past week?

Client: Um, eight.

Therapist: Seven, eight?

Client: Yeah

Comment: Too much repetition right here by me asking if the client really experienced that emotion.

Correction:

Client: Um, eight

Therapist: You were really sad this past week. Let's talk more about that.

Update From Previous Session

Therapist: Okay. That was pretty high for you this past week. We can definitely work on that. We can definitely talk about that. We can work with that. Kind of give me a brief update of, you know, what's been going on this week with you?

Comment: Repetition of question seeking clarification, I should have just asked in one short sentence.

Correction:

Therapist: Tell me in a few sentences what was the situation that had you feeling really sad?

Client: I mean, I was looking at my Facebook, and I saw pictures of my friends and I saw, like ... I just realized that I maybe need a change in my body. I was frustrated, 'cause I felt like my

breasts are not big enough, and also my buttocks are not big enough. My buttock is not big enough. So I would like to have some implants, you know, to make them look more beautiful.

Therapist: You're considering, you know, making some physical changes to, you know, look better, and

Client: I hate my body.

Therapist: And change your body. We can definitely talk more about that. When you were going through any of your social media and doing all that, were there any other emotions that you felt other than sadness, or was it primarily sadness?

Comment: To paraphrase what I heard I could have worded it differently as a question to make sure that I understand what the client is saying. There was also unnecessary interruption of the client because they had more to share. Multiple questions in one sentence can confuse a client so I should have just left it with if there were any other emotions that she experienced. This really should have been broken up better.

Correction:

Client: I mean, I was looking at my Facebook, and I saw pictures of my friends and I saw, like ... I just realized that I maybe need a change in my body. I was frustrated, 'cause I felt like my breasts are not big enough, and also my buttocks are not big enough. My buttock is not big enough. So I would like to have some implants, you know, to make them look more beautiful. I hate my body.

Therapist: What I hear you saying are that you were on Facebook and you thought about making physical changes to your body based on what other females looked like. Comparing your body to theirs you had these thoughts and started feeling the emotion of sadness, is that correct?

Client: Yes

Therapist: Did you have any other feelings during this time?

Client: Frustration.

Therapist: Frustration? Going back to that same scale, one being really low and ten being really high, the highest ever, where would you rate your frustration, your emotion of feeling frustrated?

Comment: Acknowledging what I heard instead of asking because that comes across like I wasn't listening or didn't hear her.

Correction:

Client: Frustration

Therapist: This week you were sad but also frustrated. Using the same scale we talked about early where would you rate your emotion of frustration?

Client: Ten.

Therapist: A ten. So that was the top, you were extremely frustrated.

Comment: I should have asked what was going on that caused the client to feel extreme frustration since I have already acknowledged that there was an additional emotion.

Correction:

Client: Ten

Therapist: Was your frustration in relation to what we've just discussed about your thoughts of making changes to your body or something else?

Client: Yeah, cause as a black person, I feel like, you know, we are usually well-shaped, big breasts, you know, nice butt, and I feel I have none of the stuff at all, so.

Therapist: Let me just make sure I understand. You're feeling sad, "I don't have the breasts, I don't look like them." Basically, on social media, so your sadness was still high, but your

frustration, your emotion of feeling frustrated, was extremely high for you, because you didn't feel like you were ... you didn't think that you were looking the way you're supposed to, according to your ethnicity.

Comment: This could have been worded better to accurately summarize what the client just stated.

Correction:

Client: Yeah, cause as a black person, I feel like, you know, we are usually well-shaped, big breasts, you know, nice butt, and I feel I have none of the stuff at all, so.

Therapist: Correct me if I am wrong, Seeing other girls you consider are better looking than you made you feel sad so you've thought about physically changing your body. As an African-American female you don't think your body is the way it is supposed to be and that made you feel frustrated.

Client: Yep.

Review Homework

Therapist: We can definitely talk about that, too. A little bit last week, we talked about doing a thought record, that was part of the homework I assigned to you. Pretty much, just making note of thoughts, Talk about that today. Were you able to do that at all?

Comment: Homework assignment should have been explained better.

Correction:

Therapist: Thank you for sharing what you've been feeling this week. Let's move on to the homework. I had assigned for you to keep a record of the thoughts you had when you were feeling sad. Were you able to complete that?

Client: Yeah.

Therapist: With sadness, and you said you were on your social media, what thoughts were coming to your mind? You mentioned you didn't look like them, and you felt like you weren't living up to who you're supposed to be, according to your ethnicity. Were there any other thoughts that you were having? Were you feeling frustrated or even sadness?

Comment: The client confirmed that the homework was completed so I should have asked for her to share a thought or two she had that hasn't already been discussed.

Correction:

Therapist: Share with me two thoughts you wrote for your homework.

Client: Yeah, I was wondering why I got shaped that way. Why can't I be like everyone else? Why do I have to go through surgery to have a body that is acceptable? Why people won't accept black? Why I wouldn't be attractive because my breasts aren't that big, or my butt is not that huge. You know, all those questions.

Therapist: You're just, kind of, questioning, "Why do I not look the same?" And just questioning yourself, really,

Client: Yeah.

Therapist: As a person, but basically, more so physically, your body image.

Comment: I think this section is fine and no corrections are needed as I have appropriately responded to what the client has stated.

Client: Yeah, am I was also scared, you know, not to find someone, to do my life with, because of my physical appearance. I'm in frustration and sadness, and scared, you know, afraid.

Therapist: You have a lot of ... you have several different emotions coming up. Let's see, you went into feeling sad when you through social media, comparing yourself to other people, what you look like and what they look like.

Client: Yeah.

Therapist: And then frustration, because, for you, personally, you feel like you were not, you know, living up to the standards that society set. But, then, also, along with that, you were, you know, kind of questioning, "What's wrong with me, you know, as a person?" And, then, also with that, also the potential of someone being attracted to you, because they continue to be drawn to a certain type of person, body wise, and you feel like you don't fit that.

Comment: I think I definitely could have summarized everything discussed thus far better than I did. I didn't really distinguish between thoughts and emotions. Not doing this hinders me from moving forward with helping the client understand the CBT model based on what has been discussed. I would have to review everything and then make the connection. This is also a good time to allow for client input to ensure I fully understand what they're conveying before moving on.

Correction:

Therapist: We have talked a lot so far about certain thoughts and feelings you've had so let's summarize everything so we can decide what to spend the rest of our time talking about. We've identified that this past week you have felt really sad and frustrated. You are thinking that your body is not attractive and should look different because there are other females who you perceive to be prettier than you, as well as not fitting the "ideal" image of an African-American female. What he have just done is Cognitive Behavior Theory, identify what you're thinking and then what emotions or feelings you have during those moments. The next step is to

challenge these thoughts to see if there is any truth in them, if not then we need to change them.

Did I miss anything?

Client: Yeah.

Therapist: That's a lot, you had a very intense week, it sounds like.

Client: Yeah.

Therapist: Especially with your high emotion, you know, feeling really frustrated, and then, also, with the sadness.

Client: Yeah.

Comment: This part is somewhat unnecessary based on the previous correction because the client's feelings and thoughts have been acknowledged and explained in great length. I would move on to the next part as stated below for the agenda.

Prioritizing the Agenda

Therapist: Where would you like to spend most of our time talking about? There was several things that we've identified. What's most important to you, that you want to?

Client: Like, talking about the emotions?

Therapist: Yeah, I guess, you know, which part of what we discussed, so far, do you want to focus on? You talked about the social media, and feeling sad. And, also, you know, you're questioning yourself, you know, personally. But, then, also, but then there's the relationship. Maybe my body, my breasts and my butt. That I would like to get some implants. We can definitely talk about that. And you mentioned several things, so if we don't get to everything today, that's perfectly fine. We'll just ... I'll make note where we left off, and we'll just continue talking through all of this as our sessions go on.

Comment: This whole section shows a lack of confidence in transitioning to the next phase of the session because I wasn't clear in asking what the client wanted to talk about next so they had to ask for clarification. Since everything has been summarized up to this point I can simply ask the client what they want to focus on next.

Correction:

Therapist: Now that we have identified several areas of concern such as body image, the possibility of undergoing plastic surgery, and thinking you're not good enough, what would you like to spend the remainder of our time discussing?

Working On One Problem And Teaching Cognitive Skills

Client: Today we'll talk about body image.

Therapist: Now that we've identified emotions that you felt, the sadness and frustration, and you told me some of the thoughts And identified them, everything that I've heard you say.

Client: Yeah.

Comment: Summarization should have been clearer.

Correction:

Client: Today we'll talk about body image.

Therapist: Thus far we have identified emotions you've felt and some thoughts you have had. That right there is the beginning of the Cognitive Behavior Theory model, the relationship between our thoughts and feelings.

Therapist: Okay so, okay so, let's move on. Okay so when you have, when you're thinking you know about getting breast implants and you know butt induction or just making it bigger and other physical changes, kind of tell me what time of day do you primarily have these thoughts?

Comment: This is very wordy and does not flow with the conversation

Correction:

Therapist: Now that your thoughts have been identified now let's move on to challenging the validity of your thoughts.

Client: Usually when I go, when I return from my work.

Therapist: Okay

Client: Then I go on my Facebook

Therapist: Okay. So more so towards the end of the day?

Client: Yeah or early in the morning, you know

Therapist: Okay

Comment: This whole section I used okay repeatedly. To me that was verbally acknowledging that I heard what the client said, but maybe I could have been silent and let the client continue talking without me interjecting every other word.

Correction:

Client: Usually when I go, when I return from my work.

Therapist: Tell me more about that

Client: Then I go on my Facebook. Yeah or early in the morning, you know

Therapist: Okay!

Client: You know sometimes I can wake up with the thoughts but then during the day you know, work, I don't have time. It allow me to take a time out

Therapist: Okay

Client: But then, yeah

Therapist: Okay. So in the morning when you first wake. Okay so, help me understand, so in the morning when you're waking up?

Client: Yeah

Therapist: Is it while you're kinda doing your morning routine or is it like as soon as you wake up, after you're kind of awake?

Client: It depends

Therapist: Okay

Client: How sad I was the evening before when I saw those pictures

Therapist: Okay

Client: Sometimes, but most likely it will happen in the evening.

Therapist: Okay

Client: Yeah

Comment: This section could have been more concise. Again I said, “okay” too many times, which is not professional.

Correction:

Therapist: Walk me through your morning of the thoughts and emotions you have.

Therapist: So sometimes it will carry on from the previous night?

Client: Exactly, til the next day

Therapist: Okay so when you wake up it's like you can remember everything?

Client: Yeah

Therapist: Okay, okay so it can be in the morning, and then kinda go through your day so you're distracted?

Client: Yeah

Therapist: So you're taking care of business and then it will come back up again in the evening.

Client: Yeah

Therapist: Okay, so would you say it's more intense in the evening than in the morning, or does it depend?

Client: Yeah morning

Comment: This section I think the questions and comments are unnecessary and redundant.

Correction:

Therapist: To clarify these thoughts may happen from how you felt the night before or sometimes during the day, but for most often in the morning?

Therapist: Okay, okay so I'm just curious social media, these thoughts start coming through your head and you're feeling sad and getting frustrated. Is there any physical, like bodily physical that you're effect? Like heart ratings, sweating, or is there any physical effects?

Comment: This question is not clear and confusing to understand

Correction:

Therapist: Thank you for helping me to understand your emotions a little more. Do you experience any bodily or physical symptoms when you are extremely frustrate and sad?

Client: Headache

Client: And (pause) like my appetite decrease

Therapist: Okay

Client: I don't wanna eat anymore

Therapist: Okay, okay

Client: And yeah, so basically my, mostly my appetite, headache, yeah

Therapist: Okay, so I guess, just kinda for me for you're, these headaches?

Client: Yeah

Therapist: Are they like normal headaches you usually have or are they like more intense, or A little bit more intense?

Client: Yeah I would say more intense

Therapist: Okay. So let me kinda see, okay so you're at home, it's evening time you just check your Facebook and all social media, trying to catch up on what's going on. And you're looking through pictures, you know, of other people your friends, and others that you don't know And you start thinking, you know of other people, I really wanna go through this You know, with changing my body. You know if I do this then I think guys will find me more attractive and I'll really be a black person. And you start getting, you know you start feeling sad like man she's really pretty, you know, what's wrong with me, how come I can't look this way. And then you're getting frustrated after that. And so as you just told me, your appetite kinda goes away.

Comment: I think I did a pretty okay job with putting into my words what the client has said to show that I was listening and understood what I had been told up until that point. I think this is okay because I don't want to parrot exactly what the client reports. There was not a need to ask if she has headaches again after the client has already stated this. I also could have paraphrased better. I also think that I could have pulled in the CBT as well to help with making the connection.

Correction:

Therapist: Let's tie everything we've discussed so far. You return home after work to and settle down for the evening. You are on social media and that is when you're

thinking these thoughts about changing yourself and feeling inadequate compared to other girls. Because of these thoughts and what you're looking at you start to feel a lot of frustration and sadness. Then you experience intense headaches and don't feel like eating. I asked you about this to show how your body is responding to your intense feelings. All of this is part of the Cognitive Behavioral Theory model we've talked about.

Client: Yeah

Therapist: So what do you tend to do after that? When all of this is going on, what do you then do?

Comment: This would have been a good point to mention or introduce the transition into talking about the behavior portion of the CBT model.

Correction:

Therapist: My next question brings us to the final part of CBT and that's behavior. Let me remind you, CBT is our thoughts, feelings, and then our actions afterwards.

Client: I try to write them down like you asked me to do

Therapist: Okay

Client: And then I try to look for a solution and there really wasn't one

Therapist: Okay. Okay so then you started getting on the internet researching?

Client: Yeah.

Therapist: Okay, so that's good to know. I was just wondering because sometimes our, I was asking that because I just wanna go through the model again. These thoughts you identified. You identified the emotions, and you just told me then you just started to look for some help with this, and that's when you came upon the breast implants. And other things that you can do. And I was

asking you about the body, like how this affects your body. Okay, okay so I was just curious to see how does your body react to that.

Comment: This area was all over the place and seemed as if I didn't know what I was asking, which makes it difficult for the client to follow the conversation. This was also a replica of what I had already summarized about the CBT model. This section was totally unnecessary and not needed. I could have explored her behavior to obtain more information.

Correction:

Therapist: Did you find trying to write them down difficult? While you're searching the web for plastic surgery process how do you feel? Is there anything else that you tend to do?

Therapist: We've gone through the model and talked about a lot. Identified your thought. Your main premise thought if I go through with changing my body then that. And we have identified your emotions as well and what you tend to do after. So now let's try um sometimes more so negative and it may not be true but for you its your reality, you really do believe this and you strongly believe the thought that you're having and the emotion is therefore are really intense. Um but sometimes we like to call them Cognitive Distortions. So they are not they are distorted thinking not justifiable. We don't have any evidence to support it. So the cognitive distortion I've identified for you just by listening it is comparison, you know comparing yourself physically and then just who you are as a person to other people that you see on social media.

Client: Yeah

Therapist: So would you say that is accurate?

Client: Yeah

Therapist: Okay, so then another one possibly maybe is labeling these negative traits to yourself. Oh I'm not as pretty or there is something wrong with me.

Client: Yeah

Therapist: Okay, so again these are not to say this is just to help identify um what kind of thoughts we're having and why they're not so helpful.

Client: Yeah

Comment: I think I have summed up the process of the CBT model well so far. At this point I am informing the client of Cognitive Distortions in a very confusing way even though I did identify them.

Correction:

Therapist: To help identify what kind of negative thoughts we are having they are referred to as Cognitive Distortions and from our conversation I think there are two most applicable. I am going to give a brief explanation of them and you tell me if you agree. The first one is Comparison. Comparing what you look like and who you are to other people with the idea that they are better than you. You don't measure up and something is wrong with you. The second one is Labeling. Associating negative traits and characteristics to yourself such as: I'm not pretty much, no guy will notice me or I'm not good enough. What are your thoughts on what I just said?

Client: Client responds

Therapist: Understand that these cognitive distortions are not to label you but to help with assessing the types of thoughts we have and why they are not helpful and why there is no truth in them. Does that make sense?

Client: Client responds

Therapist: So now lets go into challenging them

Client: Okay

Therapist: Okay, so is there evidence to support um your thought that you know if I do go through with the physical changes then I'll be prettier and people will start liking me? Is there evidence to support that this is true?

Client: Yeah I mean Nicki Minaj did it. Cardi B did it.

Therapist: Okay

Client: Kim Kardashian did it. So a lot of people do it and you can see them in their pictures the way they was and after.

Comment: No correction needed for this firs part of challenging the validity of the client's thoughts. The client was able to provide a response and use something relatable to them.

Therapist: So there are real life examples of these Hollywood stars and there are also pictures to prove that hey it works. So there is evidence to support it. Is there any evidence to say this is not so true? If I do go through this then it's not I'm not going to?

Client: I don't know. Is there evidence?

Therapist: Against it. Yeah. So there is evidence to support it, yeah this is valid and true because of the Hollywood stars and there are pictures to show hey this is what happens to your body, this is the difference before and after. Now, is there evidence against this idea?

Comment: Moving on to asking if there was evidence that is contradictory to her thought was not clear as the client was confused. I could have worded it better.

Correction:

Therapist: You gave me evidence for why it's true that you will be prettier and more likeable if you do undergo plastic surgery because of the pictures of famous people. Now,

is there any evidence against the idea? If I don't change my body then I am pretty and someone will like me for me.

Client: I mean I'm sure there is but I can't think of one right now.

Therapist: Okay. So for you there is proof that this will happen.

Client: Yeah

Therapist: Okay so um if um what would you think would be the fact if you were to think more positive, you know what I to love yourself and accept yourself as you were and knowing that someone else will too? What do you think if you had a more positive realistic thought what do you think would be the affect on your overall life emotions and thoughts wise?

Client: If I had real thoughts?

Therapist: Yeah if you were to change this thinking. Right now its negative so we want to change it more positive. More realistic. How would that affect your life?

Comment: Taking the next step to form a new core belief was also worded in a way the client didn't understand.

Correction:

Therapist: If you were to change your automatic thought to something more positive and realistic such as." I love myself, I accept myself, and one day someone else will too" what impact would that have on your life?

Client: Maybe I would be more peaceful or yeah peace

Therapist: Okay. Is that something that you want?

Client: Yes

Therapist: Okay.

Client: And confidence

Therapist: Okay so do you okay so for you ya know do you think if you were to every time you were to start thinking more negative and you go oh wait and changed it to a new belief?

Client: Um

Therapist: Do you think that would work for you?

Client: Yeah. I'm willing to try. I don't know if its gonna work but I'm willing to try.

Therapist: Okay. You are a little hesitant but you're willing to try it

Client: Yes

Comment: I approve of this section as I think the client was piecing together the difference between her negative thoughts with negative emotions and the opposite affect if she was to think positive then her emotional response would be more positive, which is something she desired to have. I also like how I picked up on that the client was a little uncertain but would attempt to do it, which demonstrates willingness to put into practice what we've discussed. Not sure If I was successful with the ah ha moment.

Therapist: Okay. So if you had a friend in a similar situation what would you tell them? Who just as you told me what's going on, if I was your friend what would you tell me?

Client: Um maybe I would if you were my friend who tells me she wants a breast implant?

Therapist: Yes. I don't like myself. I think I'm ugly. You know I don't look like her.

Comment: A role reversal could have been beneficial at this point to have the client in a different position than their current one so they see it from a different point of view.

Correction:

Therapist: Let's take this a step further and see how much you would believe the new core belief we just discussed, but this time instead of me being the therapist I am going to be

a trusted person in your life. Do you have a friend that you can talk to about anything and they have your best interest at heart?

Client: Client responds

Therapist: Let's say I am that friend and I come to you saying that I have been feeling angry and confused because I have been trying different diets to be thinner so I can be on the cheerleading team but nothing is working so I am considering liposuction. I tell you that I think I am ugly, no guys seem to notice me, and maybe if I tried harder or something then I would get what I want. I am confused because there are mixed reviews and I don't know if I really want to go through with it because I know I can't undo it once it's done. What advice would you give to me?

Client: I would tell that person that no she looks beautiful and also that um maybe to be a different shape. Yeah.

Therapist: So that's the advice you would give your friend.

Client: Yeah and I would tell her to be safe make sure the person who's going to do the operation ya know had a good rate of success ya know.

Therapist: Okay

Client: But I would have tell her the person that she looks beautiful no matter what.

Therapist: Okay.

Client: Ya know support her

Therapist: Okay. So if okay so that's advice you would give a friend. That's really good advice.

Now what if you were to take that advice for yourself? What do you think?

Client: For myself?

Therapist: Yeah. That's advice you would give to a friend. Now if you were to take it and apply it to your life what do you think would happen then? Do you believe it?

Client: Um. If I tell to myself?

Therapist: Yes if you would follow the advice you give to a friend you would follow for yourself.

Comment: I like how I affirmed the client for coming up with a response to further challenge her thoughts and core belief. The client sought clarification twice after that so I my question was confusing.

Correction:

Therapist: This advice you just gave me as your pretend friend, if you were to apply it to your own life would it be impactful? Everything you just told the friend about being beautiful no matter what, would you believe it if you told yourself this same everything time you doubted?

Client: Um I don't know

Therapist: Hmm. Ok

Client: Um. Maybe if I heard it from someone else then maybe I feel better. Maybe if from myself then maybe it could help a little bit.

Therapist: Okay so if you had someone to support you sorta give you reminders?

Client: Yeah

Therapist: Do you have someone like that in your life like that you would be like hey do you mind being my accountability partner to?

Client: Yeah my boyfriend.

Therapist: Boyfriend. Good. Has he kind of. Okay. You think it would. You want to try hey maybe I can try to make my thoughts a little more positive and ya know love myself as I am and follow the advice you would tell a friend. So but it would be more beneficial for you if you had someone such as your boyfriend to kind of

Client: Exactly

Comment: Summarization was all over the place and didn't reflect understanding very well.

Correction:

Therapist: From what I hear you saying, telling yourself these positive affirmations and changing your thinking would potentially work better for you if you had supportive people to help remind you, is that accurate?

Therapist: Okay. Awesome. Well our time is coming to a close but we've covered a lot of. We've evaluated your thoughts and challenged them a little bit and you're still a little hesitant but um we can definitely work with that. Ya know as I said it's not easy. Its not going to happen automatically but it just takes practice. Okay so um so kinda tell me um do you did you find today going through the whole model breaking it down helpful?

Client: Yes definitely

Therapist: Okay. Yeah. And what part of it did you find most was beneficial to you?

Client: Um I guess when you asked me what I would tell to a friend. So I'm sure if I were to tell my friend she was she look beautiful maybe if I tell to myself maybe it would help.

Therapist: Okay. Yeah definitely. Okay.

Client: Or maybe asking other people to remind me how beautiful I am and maybe I wont need it.

Therapist: Gotcha

Client: That part helped a lot.

Comment: I did not demonstrate professionalism in my response to the client nor did I affirm the client for understanding our conversation.

Correction:

Client: Um I guess when you asked me what I would tell a friend. So I'm sure if I were to tell my friend she was she look beautiful maybe if I tell to myself it would help.

Therapist: I am so glad to hear that you were able to find the CBT model easier to understand and found a useful tool from our discussion today. You did a great job making the connection and applying it to your own life.

Client: Or maybe asking other people to remind me how beautiful I am and maybe I won't need it.

Therapist: You definitely have what it takes to make this change in your life one day at a time.

Client: That part helped a lot.

Therapist: Okay so lets kinda go through that. Okay so we identified your thought. You're still considering hey if I do these implants then I will be more attractive and I like myself a bit more. And then we identified your feelings that you're having and then you explained to me what you do afterwards. Okay so that's the cognitive behavioral theory model. So then after that I challenged you to change that thought and could believe it but it wouldn't be easy I would need some help.

Client: Okay

Comment: This was not a good summary of the session. I could have asked the clients to give a brief summary of what we talked about so as to hear it in their own words.

Correction:

Therapist: Let's pull everything together in a summary of what we have talked about today. At the beginning of our session you were considering plastic surgery to make your body more attractive because you thought you were not pretty enough for a guy's attention. You also had high levels of sadness and frustration, which led you to search the web for information. We then challenged your automatic thought by coming up with new positive and realistic things you can think about. You told me advice you would give to a friend in a similar situation and are willing to try to adopt a new core belief every time you these not so helpful thoughts and emotions come. I really like that you knew yourself well enough to know that you would need the help of a supportive person to help you through this process. That shows great self-awareness and willingness to make beneficial changes to your life.

Collaboratively Setting Homework

Therapist: So since we've gone through that that's what I want to see if you can do this next week. Um kind of ya know as you want to have your bf do that for you. Kinda of see if you can at those times in the evening when you're on social media and these negative thoughts start coming up and you're emotions of sadness and frustration and anything else you may be feeling. In that moment remind yourself the advice you give a friend, follow it and I want you, its almost like a thought record but kind of tell me um if that worked for you or not and also implement your boyfriend whenever you two are together or whatever however works our for you to remind you to challenge that core belief.

Client: Yeah

Comment: Homework wasn't explained in an easy to understand way.

Correction:

Therapist: For this weeks assignment I want you to continue doing the thought record of writing down when negative thoughts about yourself and your body image come up and the emotions you have. In those moments I encourage you to practice using the new core belief, positive thoughts, and support of your boyfriend that we talked about today. In our next session we can discuss how practicing this was beneficial or not. How does that sound to you?

Therapist: Then we can discuss it next week and see how that worked for you

Client: That could work

Therapist: So in the long run long term even after you're done seeing me do you think going through this process of I've had this thought its not true let me change it. Do you think that would work for you?

Client: Yeah

Therapist: Okay.

Client: I'm sure

Comment: I think this was a good question to ask to gage the client's level of comfort with the model and its helpfulness. But perhaps it was too soon to ask in a futuristic sense, I could have asked for the present.

Correction:

Client: That could work

Therapist: My last question as we wrap up, do you think as we continue having session that this CBT model is relevant and helpful to you?

Client: I'm sure

Therapist: Okay great. We're off to a good start then.

Providing A Summary and Eliciting Feedback

Therapist: Lets its take it step by step. So I'll have you do that this week. When you have those thoughts remind yourself hey its not true, I am beautiful, my body is perfect the way it is, and have your boyfriend support you, and well discuss it and see how that worked for you in next session.

Client: Yep

Therapist: Alright. Okay. So is there any other feedback or questions that you had?

Client: No

Therapist: Well thanks for coming in, I'll see you next time

Client: Thank you

Comment: An okay ending, there was no need to repeat what I expected her to do. I could have done another mood check to compare her emotions at the end of session from when we first started.

Correction:

Client: Yep

Therapist: Let's do a final mood check. On a scale of one to ten how would you rate your feelings of sadness and frustration?

Client: Client responds

Therapist: Alright. Okay, do you have any feedback or questions?

Client: No

Therapist: Thanks for coming in, I'll see you next time.

Client: Thank You!

CBT Reflection

A. Reflect on your role as an advanced autonomous CBT therapist. How did you demonstrate this role effectively? How might you have strengthened this role?

- Overall I think I did a mediocre job in my role as a CBT therapist. On a scale of one to ten I would rate myself a five. I understand the concept of CBT and I understood how to go through the counseling session, but I wasn't very clear in my explanations. Not giving full explanations in a way that the client will understand makes it difficult to make connections in the model and for the client to understand why it's a relevant model. Other than that I think I did well with demonstrating professionalism and empathy in words and body language.

B. What are the diversity issues that you needed to be aware of during the session? What might have enhanced your cultural competence?

- My client was of Haitian origin even though she was from Canada so that could have been a factor in our session but nothing specific was brought up. I would say that knowing more about my clients history and background would inform me about her mindset and views on life and beliefs. Having this knowledge would have assisted with engagement and building rapport with the client.

C. What are the ethical issues that surfaced (or could have) during the session? If there was nothing apparent, reflect on the ethics that operated well.

- My client mentioned concern about not meeting stereotypical characteristics or attributes of their ethnicity. I didn't really address this at all in session, although I probably should have. I will say that I was not sure how to deal with this or what words to use without being offensive. I thought this could potentially be an area to explore with the client since it was referenced multiple times but I wasn't sure how so I didn't pursue the topic.

D. Were there any social justice issues that surfaced during the session? If so, how could advocacy in larger systems help this client?

- There were not any social justice issues that were disclosed or alluded to.