

group sessions where sharon is getting positive feedback and feel support from her group may make her feel autonomous.

## Treatment Plan

She should have 30 sessions

Her Coping style:

She is an introvert, she is a little shy, withdrawn and has internal dialogue of stuff. She has low passive reactions and cooperates well w/ direction.

\* she needs more cognitive therapy  
# family counseling as a further social support and in which Sharon receive positive feedback

She has distal features of past trauma (symbolic conflict w/ proximal features).

she has symptom distress <sup>w/ proximal p. tree</sup> due to present problem at work.

## Treatment Plan

Behavioural and cognitive interventions such as DBT or chain analysis, modeling, cognitive restructuring and self-monitoring.

She needs direct, ~~system~~ symptom based methods. Gestalt two-chairwork.

Systematic Remediation by implementing emotion-regulation in DBT.

She needs 9 sessions <sup>↳ frequent sessions</sup>

Individual therapy; family therapy

↳ Briefly to establish working alliance,

\* possible visit to doctor because of insomnia  
# level of resistance is low and is in preparation stage of change

INTAKE

Client Name Sharina Watson Date 2/28/23

PRESENTING PROBLEM

What made you decide to come for services at this time?  
I needed to talk to someone to vent

SYMPTOMS

What kind of symptoms are you having?  
Fatigue, Insomnia, Headaches, Foggy, Anxiety, Anger  
How have these symptoms changed from how you were previously feeling or how you were functioning?  
More energy before but now I'm in a slump, Draining through the day,

HISTORY of PROBLEM

Tell me about the history of your problem. Please include onset, how it has changed, how you have been affected by this problem.  
Overthinking, work stress, Coming to terms w/ things that I can't control. Family dynamics work stressors

What things have you tried to do to make this problem better? What worked for you and what didn't work for you?  
Acknowledging that I don't have control over the situation. Reaching out to the person acknowledging it works for a moment, when no problem progress has been made it subside, Dad.

RECENT TRIGGER

What has happened recently that caused this situation to be a problem for you today?  
When I start work coming down from 9 hours of anxiety. I come home and try to calm my nerves but I am so tired.

FAMILY HISTORY

Where were you born and raised?  
Born Upper Manhattan, Part of my life I lived in Bronx, Florida

Are your parents still married, divorced or deceased? If remarried, how many marriages and divorces for each parent? If divorced, what was the reason for their divorce?  
My parents never married, my are no longer together, My dad got remarried to after my mom, and divorced ones. Mom never got married.

What kind of work did your parents do?  
My dad is a business owner Carpet cleaning bus. My mom is an office manager for medical billings.

Do you have brothers or sisters? How many of each? What number child are you?  
I have 2 sisters and 2 brother. Second oldest middle child

Client's a little resistant she was giving yes and no answers in the beginning however she relaxed somewhat.

She besides her development transition she had moving from place to place and school to school.

What are the antecedents here? Fear, worry, some flashbacks, Antisocial

Such a work environment and family issues

## Developmental stage

Sharinas is in the developmental stage of adulthood (mature adult age)

Her past childhood traumas have affected her perspective on forming intimate relationships w/ others (avoidance, isolation, withdrawal) to a small extent.

Microsystem for Mrs Wilmot was dysfunctional. Dad was violent/dra... did not interact w/ her much. Mom was working over... she was caring for older siblings most of the time.

Tell me about your family as a child. Were there any problems or circumstances that you feel may contribute to your current circumstances? My dad was domestic to my mom. He cheated on her numerous times. It has affected the way I respond to when people yell at me. I shut down.

Do you recall being told that you had developmental problems as a child, such as delayed walking or talking, or extended bedwetting? NO

Did you have to attend special education or IEP classes? If so, why? NO

Did you have any learning disabilities? If so, please describe. NO

Did you have any emotional or behavioral problems in school? Please describe. I definitely had some emotional issue like suicidal thoughts. On a scale of 1-5, she rated a 3.

STRENGTHS AND RESOURCES IN THE FAMILY

What strengths do you think exist in your family of origin? Please describe. When things get hard, I persevere and am consistent. Coping skills, Good rebound, Courage, speak these things in therapy.

Do you have extended family or other friends that might be supportive of you during this time? (Use relationship, not proper names, i.e., cousin, coworker, etc.)? I have a tight knit support system. My mom, my sister, my husband.

MARITAL/RELATIONSHIP HISTORY

Describe each marriage. Include age at marriage, how long it lasted and why it ended. My dad was 20 when he married. From the outside looking in, my dad was a big provider but she did not work. Towards the end of divorce, he smacked her around. She started putting the children before him, then she tried to run him over with a car.

How many children do you have from each marriage? NO children

If never married, please describe your significant relationships. Include age at the beginning of the relationship, how long it lasted and why it ended. N/A

How many children do you have from each relationship?

(She has been married 8 mths. I'm learning to manage work, writing, ministry. He is understanding)

Antecedents: Family violence; Trauma of dad cheating on mom and vice versa. Constantly having to move from state to state, stress at work, conflict w/ co-workers and parents of other students, unresolved trauma. Behaviors: ~~panic~~ anxiety, anger, fear, worry. Consequences: Fatigue, headaches, brain fog.

## Cognition

Mrs. Wilmet says she withdraws from people sometimes.

She says, I don't trust that person and I don't want to speak to anyone right now since ~~they~~ I might be wasting their time.

Internal dialogue is that she does not want to lose control or have people take advantage of her kindness.

\* Feelings of apprehension and not motivated to socialize and fear.

Support system - Her mother, siblings and grandfather as well as her husband!

## Present Problem

\* Antecedents: Conflicts w/ co-workers causes fatigue, headaches, anxiety.

Stimulus events - Job, her dad trying to reach out to her by phone.  
Setting events - If she spends time w/ her mom, she may have flashbacks and fear.

Antecedents that are positive - Feeling relaxed when she is watching t.v w/ spouse  
She feels good and confident when she dates her husband.  
She is hopeful to be able to attend more social events and be able to cope well when at work.

Consequences - She tried to avoid meeting people in social events so that autonomy (hers) is not affected. She does not like to discuss past events w/ family (relational) to avoid feeling fear, anxiety, etc. Reading helps her to have a decrease in these behaviors.

## Anxiety

1. Insomnia frequent

2. Brain fog / lack of concentration

3. Worry, fear / strengths (support from spouse, ~~mom~~ sister, grandfather.)

Antecedents: Anxiety because of work environment or social events.

Consequences: Insomnia due to internal worry and her beliefs of wasting people's time or lack of autonomy.

Behaviors: withdrawal, ~~feeling~~ <sup>avoidant</sup>

Strengths: She is hopeful; ~~avoidant~~ she seeks help and especially from her support system.

DOMESTIC VIOLENCE (use only if applicable to your client's issues and always for END)

Describe the event that resulted in your arrest and being ordered to attend the END program.

Just DV on the dad's part  
she is not in relationship w/ her dad. she  
is estranged from him because of violent behavior.

Who called the police in this incident?

NO ONE

What is your relationship to the victim?

I'm the daughter

How long have you been involved with your victim?

If this is an intimate relationship, how and where did you meet?

N/A

Please describe your first abusive relationship, where you were the victimizer.

N/A

Please describe your first relationship where you were the victim.

What is the most violent thing that has occurred between you and anyone else?

my brother's dad took out a gun on my mom,  
because we were moving.

How many times have the police been called to your location for a domestic violence event that you were either involved in or that you witnessed? Please explain each situation in detail.

my mom just went to precinct for restraining  
order.

What issues do you and your victim argue about or fight about most?

How do you typically end a romantic relationship?

How does your victim typically end relationships?

Have family, friends, coworkers, or neighbors expressed concern about you being in this relationship, or expressed concern to your victim about being in a relationship with you. Please explain.

What is your response to their concern?

Are you ever afraid of your partner? Please explain.

NO

Is your partner ever afraid of you? Please explain.

NO

#### FAMILY OF ORIGIN ISSUES

Were there any issues in your family of origin? (i.e., alcoholism, infidelity, abuse issues, etc.)

asked  
to  
clarify

Infidelity & abuse, My dad was a functional alcohol.

Did your family engage in any ethnic or cultural activities? If so, please explain.

Sure, we do Christmas events, distro to old school Merengue.

#### EDUCATION and VOCATION

(Socioeconomic)

Where do you currently work?

I work at Brilla Caritas elementary school.

Are you fulltime, part time or a contract worker?

Fulltime

How long have you been employed there?

One year and seven months.

What types of jobs have you held in the past?

Worked as a secretary in doctor, office, Supermarkets as well as selling magazines.

Have you ever been fired from a job? If so, please explain.

NO

What is current household income? Please include ALL sources of income, including child support, TANIFF, disability, trust funds, etc.

Wages from job as well as my husband.

What is your highest level of education?

Bachelor's & Half a master degree.

Have you ever attended college? (Include type of degree earned, major and if currently attending.)

yes, Liberal Arts, Second major - childhood education.

Did you enjoy school? Please explain.

yes, I love to write papers. I like to learn new things.

Are you renting or buying your home? If you are living with someone, who are you living with? How long have you lived at your current residence?

Rent, yes my husband. We've lived here 7 months.

Are you disabled? Please explain.

NO

Are you currently in bankruptcy or a debt management program? If so, how long do you have remaining in the program?

NO

Do you get food stamps, TANIF or any other government assistance? Please explain.

NO

#### PERSONAL STRENGTHS

What strengths do you think you possess that might help you manage this problem? Please explain.

To want to get help, Admitting when I need extra support.

What strengths are noted by the therapist?

- Creativity (originality, ingenuity)
- Curiosity (Interest, novelty-seeking, openness to new experiences)
- Open-mindedness (Judgment, critical thinking)
- Love of learning
- Perspective (Wisdom)
- Bravery (Valor)
- Persistence (Perseverance, industriousness)
- Integrity, (Authenticity, honesty)
- Vitality (Zest, enthusiasm, vigor, energy)
- Love
- Kindness (generosity, nurturance, care, compassion, altruistic love)
- Social intelligence (emotional intelligence, personal intelligence)
- Citizenship (social responsibility, loyalty, teamwork)
- Fairness
- Leadership
- Forgiveness and mercy
- Humility and modesty
- Prudence
- Self-regulation (self-control)
- Appreciation of beauty and excellence (Awe, wonder, elevation)
- Gratitude
- Hope (Optimism, future-mindedness, future orientation)
- Humor (playfulness)
- Spirituality (religiousness, faith, purpose)

#### MILITARY HISTORY and VOCATIONAL CONCERNS

Have you ever been in the military? Please list branch, length of career, job duties.

NO

Were you honorably discharged? If no, please explain.

N/A

Are there any job-related issues that you feel may be contributing to your current circumstances. If so, please explain.

I manage 31 small human beings

LEISURE ACTIVITIES AND DAILY FUNCTIONING

What do you do for relaxation/recreation?

I love to take bubble baths.

Do you have any hobbies? If so, please explain.

Reading

Please describe a typical day when you are not working.

watch T.V, catch up on sleep, food shopping, go on a date w/ Jeremy.

Have you recreational/relaxation activities decreased? Please explain.

Yes. I'm just too tired to do activities.

LEGAL ISSUES

Have you ever been arrested for any charge at all? Please explain each charge and the outcome of the charge (probations, fines, jail time)

NO

Do you have any current charges pending at this time? Please explain.

NO

MEDICAL, HEALTH, NUTRITIONAL CONCERNS

Who is your primary care doctor, or what medical agency do you use?

Dr. Stanley B. Cohen

When is the last time you were seen by any doctor and for what reason?

By my GYN in November for heavy bleeding.

Are you currently being treated for any medical conditions? If so, please list them.

NO.

Have you had any surgeries? Please list them.

NO

Have you had any broken bones? Please list them and how they were broken.

NO

Have you been involved in any car accidents, experienced a natural disaster, or a serious fall, resulting in injury. Please explain.

I had a car accident in 2010, I suffered w/ back issue (slipped disks)

Have you ever been diagnosed with anorexia, bulimia, or any other eating disorder?

NO.

Do you eat strange food items, such as flour, cornstarch, etc? If so, how long have you been doing this?

NO.

SUBSTANCE ABUSE/COMPULSIVE BEHAVIOR HISTORY

Do you believe that you have a problem with alcohol or drugs? If so, why?

NO.

Antecedent  
Car accident  
resulting  
in back  
issues.

Has anyone ever complained to you of having a substance abuse problem or of your using behaviors?  
Please explain.

NO.

Substance abuse history. Please include age of first use, what was used, how much was used, when it was used, progression of use, last use, and withdrawal symptoms that have been experienced.

Alcohol

NO

Cannabis

NO

Crack/cocaine

NO

Valium

NO

Xanax

NO

Amphetamines (include Adderall, Ritalin, etc.)

NO

Crystal methamphetamines (include ICE, mollies)

NO

Loritabs

NO

Oxycontin

NO

Other

opiates

NO

Heroin

NO

Methadone

NO

Hallucinogenics (acid, LSD, XTC, mushrooms)

Spice

NO

Syrup

NO

Any other drug not noted here

N/A

Where and where are you most likely to use drugs?

N/A

Have you ever been in a treatment program for substance abuse? Please list each one and how long you stayed in each one?

N/A

How long did you stay clean after each episode?

N/A

Is there a history of substance abuse in your family or origin? Please explain and describe the effects of their using behaviors on you.

cherdin use)  
All my uncles from where my mom's paternal side and my dad. It was sad to see them like that.

Are you currently living with anyone who is actively using alcohol or drugs? Please describe the impact of their behaviors on you.

NO

Do you think that your children, spouse, partner or other family members have been affected by your drug use? Please describe.

N/A

Do you have any legal charges related to alcohol or drugs, such as DUI's or arrests? Please explain.

N/A

Have there been any inappropriate sexual behaviors, such as excessive porn, internet porn, or excessive masturbation? Please explain.

yes both. I was exposed to porn by my older sister

Has anyone complained to you about your sexual behaviors? Please explain.

NO

Have you made efforts to limit your sexual behaviors by spending more time engaging in sexually risky behaviors, or recovering from sexual behaviors? Please explain.

Are you engaged in multiple sexual relationships at this time? Please explain.

N/A

Have you ever engaged in sexual behaviors for money? Please explain.

N/A

What is your sexual orientation?

straight

Has anyone ever expressed concern that you might have a gambling problem? Please explain.

NO

Have you spent excessive money on gambling behaviors, including borrowing money, using payday loans or title loans to offset gambling behaviors? Please explain.

Has there been an effort to limit gambling behaviors, taking more risks when gambling, or spending excessive amounts of time gambling? Please explain.

NO

#### MENTAL STATUS

Please assess general behavior, attire, gait, motor activity, stream of thought (productivity, progression, language), emotional tone and reactions (mood, affect), mental trend/content of thoughts (Orientation, memory general knowledge), insight, and intelligence and add any comments at the end of the history narrative. Otherwise, you will use check-off boxes in therapy charts.

#### PSYCHOLOGICAL HISTORY

Are you currently, or have you ever been in any kind of counseling or been engaged in any mental health treatment? Please explain.

yes. ~~AT~~ I saw a psychotherapist for a year and half. she recommended me to see a psychiatrist because the therapy by itself

Were you diagnosed with any disorder? Please explain.

major depressive disorder / <sup>I was not improving,</sup> generalized anxiety.

Did you complete treatment with your provider? If no, please explain.

yes

How long did you work with your therapist? July 2020 - June 2022

Do you think that your previous therapy helped you? Why or why not?

I believe so, she gave me tools when I feel down such as learning how to identify the emotions I feel.

Has anyone in your family been diagnosed with a mental illness? Please explain.

yes, a cousin who is bipolar, my older sister has ADHD and my mom has depression.

Have you been hospitalized for any kind of emotional or behavioral problems? If so, please describe each admission, length of stay and the outcome of that stay.

N/A

Have you ever thought about or attempted suicide or homicide? Please describe each experience.

Include precipitating factors, means, method, how the attempt was prevented from being successful.

as young (13 years old) such as suicidal ideations. I attempted ones and I cut myself in a bathroom w/ a knife.

If having thoughts of imminent harm, please respond to the following questions:

- What do you hope to achieve by your death?

N/A

- Do you have the means to end your life? (PAY CLOSE ATTENTION TO DETAILS)

N/A

- How do you feel now if death is obtained? (if client says peaceful or calm, pay close attention)

- What would keep you from dying?

N/A

- If suicidal, ask: would you be willing to let us get you some help?

N/A

Have you ever taken any kind of psychotropic medications? Are you taking any now? Please state the name, dose, and how many times per day you take them.

Yes I've only had anti-depressants. I'm not taking any now. Wellbutin 150mg once a day

Are you sleeping more, less, or about the same as is normal for you? Please explain.

I'm sleeping less because my body feels like it's on fighter flight mode.

Are you eating more, less or about the same as is normal for you? Please explain.

Same

Have you had any traumatic experiences in your life, such as the death of someone important to you, someone you know committed suicide, you have raped or experienced any other abuse that has been traumatic for you? Have to been shot, stabbed, or in any other way felt your life has been in danger? Please explain.

Seeing my mom abused.

Do you feel you have been physically, emotionally, or sexually abused? If so, how is this abuse affecting you today?

No.

Treatment plan  
① No resistance at this point; Able to direct and guide, allowing for client to give feedback on goals + plan for her  
# Relaxation techniques! # (stress management) To help her at work  
"imaginal exposure" therapy (evidence-based) to help anxiety, worry, fear. (~~long~~) (6 mths)  
# Get client feedback #

Are you now, or have you ever experienced any flashbacks, nightmares, extreme irritability, being hyper-vigilant, or being jumpy more than usual? Please explain. (be sure to get details to support your dx)

I seem to have more energy at night.

Do you feel disconnected from your surroundings? Please describe. (Be sure to get details)

NO

In general, do you have difficulty trusting others? Please explain.

yes. It's based on my past relationships w/ people because of being hurt

Do you feel that you have been betrayed in such a way that you have been detrimentally affected by the betrayal? Please explain.

NO.