

## APPENDIX E: SAMPLE PROCESS RECORDING

DATA	YOUR THOUGHTS/FEELINGS	FI'S COMMENTS
<p>ST: Hi</p> <p>AD: Is this the right time and date? (Client is eating his lunch in the waiting area and seems hurried)</p> <p>ST: It is (we walk to office)</p> <p>ST: Do you have an appointment book?</p> <p>AD: I do but it's in my computer</p> <p>ST: It might be helpful for you to write things down in a place that's more accessible. How are you?</p> <p>AD: Better. I can only stay a half an hour. I've gotten a lot of work this week so I'm just on my lunch break right now and have to go back soon. Is that OK?</p> <p>ST: It's OK, but let's try to schedule the next appointment for a more convenient time. So before we begin, I just wanted to follow up with you about the questions you had about your insurance last time. Do you have ADAP or ADAP plus?</p> <p>AD: ADAP Plus</p> <p>ST: That's good. You mentioned that you might be interested in seeing a psychiatrist for an assessment and ADAP plus should definitely cover that if you decide to pursue it.</p>	<p>AD hadn't shown up to the original app't we had made. When I called him to reschedule he said that he had lost the app't card I had given him. It seems that he is ambivalent about coming here.</p> <p>I want to let him know that he has to be more responsible about keeping track of app'ts but I want to do it in a way that's encouraging</p> <p>I'm not sure how to respond to this. It seems like he's trying to test my limits and let me know how resistant he's feeling to come here. I want him to feel comfortable but I also want to convey a sense of structure and let him know that this shouldn't happen on a regular basis.</p> <p>I'm trying to use this opportunity to obtain HIV documentation in an innocuous way. AD seems wary and seems to need reassurance that he can trust me.</p>	<p>You sound a little punitive here; let's talk about other ways to address his ambivalence.</p> <p>Let's talk about normalizing his ambivalence, still engage him and yet establish boundaries.</p> <p>I'd like to discuss your feelings about him having HIV. I'd also like us to consider what it would be like to not tip toe around the subj of him being recently diagnosed w/ HIV.</p>

AD: Yeah, they do. I found that out too.

ST: I also wrote down a few names of your of psychiatrists who are gay-friendly and work on a sliding scale.

AD: Do you think I need to see a psychiatrist? I mean do you think I'm really that messed up?

ST: Seeing a psychiatrist doesn't mean you're crazy. I do think that it might help you manage your anxiety especially since you've just received your HIV diagnosis. Remember we talked about depression being a common reaction at first?

AD: Oh yah ... I remember. (He tears up and looks down)

ST: So what's been going on with you since we last saw each other?

AD: I've been having a lot to problems with my roommate recently and I actually feel like I'm more upset about that than I am about the HIV diagnosis. Maybe because it's so new and my doctor said that I might not have to go on medication for years.

AD had seemed somewhat closed off until this point and visibly relaxes. He seems surprised and grateful that I took the time to write these names down for him

I could see he was really nervous about seeing a psychiatrist so I wanted to normalize it for him

Actually I feel he is depressed and anxious and I think maybe medication might help him but I don't know how to really bring it up since he's so anxious about seeing a psychiatrist.

I think I jumped into the next subject because I was nervous talking about HIV and depression.

Good work; I think you did a good job normalizing his anxiety about seeing a psychiatrist. I think however you could have 'stayed' a little longer with him on this.

How did you feel about him 'tearing up'? Let's discuss. It seems like there was an abrupt change of topic after he became emotional.

I think you did 'bring up the subject of him seeing a psychiatrist' by educating him. Let's talk of other ways to 'bring this up' and then 'stay with it'.

ST: Can you tell me a bit more about what your relationship with your roommate is like?

AD: Well, the main problem is that he's also my landlord, so I'm constantly worried about making enough money to pay the rent. When my brother died - I went to California and had to put all my stuff in storage. Now I'm basically sleeping on a cot in my roommate's apartment.

ST: That sounds difficult. You returned from coping with your loss and now you're worried about where you're going to live.

AD: It is really devastating and now I'm really in debt and can't even get my things from storage.

ST: Tell me what this is like for you on a day to day basis

AD: Oh I never show what I'm feeling. I just let it go. I just try to move on and find a solution instead of dwelling on it.

ST: What about emotions besides anger?

AD: When my brother died and my mother fell apart I just wanted to focus on practical things and move on. I couldn't let myself really feel the pain. I just wanted to let it go.

I'm wondering if his relationship with his roommate fits into the care taking patterns he has with his family. He feels 'responsible' in most of his primary relationships.

The client has had to deal with a lot of different losses in the past few years - his brother, his negative status, his career and his apt and possessions.

The client seems unable to express emotions which may be connected to his tendency to feel responsible for the care of others rather than focusing on his own needs or feelings. I'm trying to find out more about this ...

Why do think you're more curious about his relationship w/ his roommate than what he said about 'his doctor saying he might not have to go on medication for years'.

I think you've done a really good job here; good demonstration of reflective listening.

Good strategy; I like your asking him about what his life is like on a 'day to day' basis. It seems like he's really beginning to relax.

What did you think about him saying that he 'never shows what he's feeling' - is that what you expected?

What was the client's affect when he was talking about his brother dying? If he was flat it's OK to ask him about his lack of emotion,

ST: It sounds like shutting off has become a coping mechanism for you. What would happen if you 'let go' instead of 'letting it go'?

AD: Hmm, that's really interesting. I don't know. I'm afraid that I wouldn't be able to do anything else. Being emotional is something that 13 year olds do, not 30 year olds. I've never had the luxury to dwell on emotions. I don't even have time to read a book. All I read are manuals that tell me how to do things. Feeling things is for people who have time to read books and who can spend all day talking about their feelings.

ST: What you are describing are two poles of existence. One is completely shut off from emotion and the other is excessively emotional. There's also a middle ground.

AD: You're right ... you know when I feel like I'm in the middle? It's when I run; I used to be a long distance runner in high school.

ST: Do you still run now a days?

AD: Hardly ever ...for some reason I stopped when my brother died. I'm just too stressed about everything

His need to repress his feelings rather than express emotion is clearly a major issue to address. I'm also struck by his repetition of the phrase 'let it go'.

I want to find out more about what expressing emotion might mean to him

I think it's interesting that he is thinking about emotions in connection being 13 – this was how old he was when his father left. I wonder if this event precipitated his disconnection to his emotions as a coping response to loss.

He seems to view himself as resilient and tough and may be afraid of a complete loss of control.

I'm interested in what running means to him. I seem significant that he stopped when his brother died. I want to find out more about this.

I like the way you've reflected back to the client by using his own words – it shows you're really listening to him

I think you're doing a good job about trying to get at the reasons as to why he has a hard time expressing himself but it may be at the expense of encouraging him to tell you 'what it was like for him to lose his brother'. Let's discuss.

I agree he does seem to have a lot of resilience; I'd keep looking for opportunities to reinforce those strengths based skills with him.

Instead of trying to find out 'why he stopped running' it might be more helpful to look for ways he can 'keep running'. Let's talk about a strengths perspective versus deficit identification.

ST: Well I think you'd find it an important outlet for you. Maybe you can try to fit it in this week and then you let me know if helped.

(I look at my watch and realize 40 minutes has passed)

ST: You mentioned you could only stay 1/2 hour and it's now 40 minutes. I just wanted to let you know so you can decide whether you need to leave now.

AD: I'm actually really enjoying this but I guess I should go. I only get a short lunch break.

ST: So, should we set up an appointment for next week?

AD: That would be great.

(we make an app't and I give him a card)

ST: Are you going to be able to hang onto this and keep it somewhere safe?

AD: Yes, I'll keep it in my wallet.

ST: Good

AD: You know, I was really scared about coming back here and having to deal with stuff and that's part of why I didn't come back sooner.

ST: Are you feeling that way now?

AD: No, I feel much more relaxed about it now.

I want to encourage him to find ways to express himself and feel concerned that has stopped doing something that provided a significant form of release.

I probably should have kept better track of time but I think I felt that he would tell me when he had to go and that he may have initially set up the 30 minute limit due to resistance.

I want to remind him that it's important for him to keep track of our app'ts and that he should make sure not to 'misplace' the card.

I'm glad that he said this and that he's aware of his resistance rather than simply 'forgetting the app't' and that he feels comfortable enough to tell me.

Let's talk about scaling exercises you could do with him next time i.e. 'on a scale of 1-5 how has running helped his mood'

How do you feel about having to manage the time constraints with this client? It seems like it's an important issue for you too.

I also want to talk again about finding a way to establish boundaries without sounding rigid. Let's talk about using 'humor' with this client.

Let's also talk about the significance of using the word 'resistance' even if it's only in your progress notes

Good job! There's a lot of rich clinical work to talk about when we meet.