

Abe Therapy Session #10

MOOD CHECK

Dr. Beck: Hi, Abe. How are you doing?

Abe: Hi. Pretty good.

Dr. Beck: Oh, I'm so pleased to hear that. Can I just take a quick look?

Abe: Sure.

Dr. Beck: Oh, yes. This does look like you're feeling better. Great.

UPDATE

Dr. Beck identifies what went well since the last session. This helps tap into Abe's resilient adaptive mode, which may include anything he does for pleasure, engagement, relationships, meaning, or accomplishment. Abe's report includes several steps he took as part of his Action Plan.

How about if we do an update?

Abe: Okay.

Dr. Beck: So, what was good about the past week?

Abe identifies what he did in accordance with his values of family and accomplishment.

Abe: Well, some of the things that I've doing and working on are still going well. So, like still being in contact with the family. I contacted Charlie. Well, when I saw Charlie, I asked him if I could have some more hours and he said yes. So that made me feel good for a bunch of reasons.

Dr. Beck: Oh, good.

Abe: I called John and he seemed happy to hear from me, so that was good.

Dr. Beck: You know, a couple weeks ago you were even afraid to ask Charlie for any hours at all. Remember that? Because you made a negative prediction about it.

Abe: Because of the way that my last job ended I was afraid that nobody would give me any hours, or hire me, or want me at all.

Dr. Beck: And then Charlie did, so I guess that prediction turned out to be wrong. And then sounds to me as if you did well enough that Charlie is willing to give you a few more hours?

Dr. Beck identifies the result of Abe's behavioral experiment: his negative predictions don't always come true.

Abe: He did give me a few more hours and so far, that's going okay.

Dr. Beck: Great. Do you feel like you've done a reasonable job working for Charlie?

Abe: Oh, yes. It's mostly labor, so it isn't hard mentally, it's just hard physically. But, yes, I'm doing it and I show up on time and things are going well.

Next, Dr. Beck helps Abe draw a positive conclusion from his work experience.

Dr. Beck: So, what was good this week about working for Charlie? What did that mean, the fact that you'd done this?

Abe: Well, the fact that I can get there on time, that I can do a good job. I think it builds my confidence a little bit just being back to work. Because I was really worried after the last job because of the way that ended, whether or not...

Dr. Beck: Something bad might happen this time?

Abe: Yes.

Dr. Beck: Yes. It doesn't sound like it has, is that right?

Abe: Yes. No, not yet.

Dr. Beck accesses the memory of positive feelings, then asks Abe whether the experiences demonstrated his positive personal qualities.

Dr. Beck: Did it feel good to be productive?

Abe: Oh, yes. Yes.

Dr. Beck: And it sounds like you were on time so you were reliable?

Abe: Yes.

Dr. Beck: You did a good job in what you were doing?

Abe: Yes.

Dr. Beck: In fact, such a good job that he's willing to give you some more hours.

Abe: Yes. Well, it's summertime construction, he's got a lot of work. And so, the fact that I wanted some hours he seemed happy that I wanted them.

Dr. Beck: That's great. And you reconnected with John because you'd also made some negative predictions about that, I think.

Abe: Yes. Yes. So, I talked to him and he seemed happy to hear from me.

Dr. Beck again asks the client to draw a conclusion after he provided additional positive information.

Dr. Beck: What do you make of that?

Abe: I don't know. I guess things are okay with him and I was worried that because I hadn't called him or been in contact with him for a long time, I was afraid he'd just sort of written me off.

The client is close to accessing the positive adaptive mode but needs a little more help.

Dr. Beck: Uh-huh (nods "yes"). As we talked about last week, of course, he hadn't called you either.

Abe: Yes.

Dr. Beck: So, it sounds like the two of you just let each other slip a little bit.

Abe: Yes, I guess that's right.

Dr. Beck: And now you're back.

Dr. Beck asks about the negative consequences of believing his negative cognition.

What would have happened if you had really bought into this automatic thought, "He's not going to want to hear from me"?

Abe: I'll probably wouldn't have called him.

Dr. Beck: No, I don't think you would have. So, it's so good that you called him, right?

Abe: Yes.

Dr. Beck: Yes. And it was taking a little bit of a risk there, right, because you really thought that he might not take too kindly to your call?

Abe: Yes.

Dr. Beck: So, you put yourself out there. That's good.

Dr. Beck reinforces his willingness to act counter to his automatic thought as evidence of self-control.

Is this another example of how you took control?

Abe: Yes. Because, well, like you said, I wouldn't have.

Dr. Beck: Yes. That's good. So, did anything else happen this week that I should know about?

Abe: No, not that I can think of right now.

SETTING THE AGENDA

Dr. Beck: So, let's set our agenda, what's the goal for today's session? Did you write something down about that?

Abe: Yes, since I've been writing lots of stuff down... My daughter's having a barbecue and her in-laws are coming and are going to be there.

Dr. Beck: I see.

Abe: And I'm worried about what they're going to think about me because of everything that's happened to me.

Dr. Beck clarifies what Abe's goal is.

Dr. Beck: So, is your goal to reduce your worry about seeing her in-laws? Or is it a different goal?

Abe: Well, it's reducing the worry, but I don't know what to say to them.

Dr. Beck: Oh, okay. So, it's both? I think we can figure out what to say, and if we do that, then that should reduce the worry. Is that right?

Abe: Yes, probably if I knew... I mean, I just don't even have any idea what to say to them.

Dr. Beck: I have some ideas. I think this is a pretty easy one.

Abe: Okay.

Dr. Beck: But an important one. Any other goals for this session?

Abe: No.

Dr. Beck: If you think of anything, let me know.

Abe: No, that's the main thing.

REVIEWING THE ACTION PLAN

Dr. Beck and Abe review the steps he was able to take in the previous week and his therapy notes. In the course of their discussion, Abe mentions two additional potential agenda items.

Dr. Beck: Okay. Can we take a look at your Action Plan?

Abe: My Action Plan? Okay. Okay.

Dr. Beck: Do you want to start reading the Action Plan to me?

Abe starts by reading his therapy notes from the previous session.

Abe: If I think that I should be all better by now...

Dr. Beck: Because that was the thought that you had had last week, right?

Abe: Well, yes. My thought was I shouldn't have been that bad in the first place.

Dr. Beck: First place, right. That's true.

Abe: I remind myself that I am somewhat better.

Dr. Beck: That's true.

Abe: I am somewhat better and I did that.

Dr. Beck: You are.

Abe: I straightened up my apartment.

Dr. Beck: That took quite a while, didn't it?

Abe: Yes.

Dr. Beck: And you got it done.

Abe: Yes. That reminds me of another thing if we have time.

Dr. Beck: What's that?

Abe: I was straightening up my apartment and I put some stuff out in the hallway, and one of my neighbors was upset that I put it there instead of taking it all the way down to the dumpster.

Dr. Beck questions Abe to clarify the goal.

Dr. Beck: So, the goal of this would be what? To talk to your neighbor, to feel better about the situation?

Abe: No, I guess that I can tell you about that, but I don't think we need to spend time on that.

Now Dr. Beck knows that the incident with the neighbor does not need to be an agenda topic.

Dr. Beck: Okay. All right, so back to the Action Plan. So, you said you straightened up your apartment...

Abe: I've worked a couple times in construction, okay? I've done that and that's gone well. I'm doing more with the kids and the family, been doing that.

Dr. Beck: Good.

Abe: I've reconnected with, well, I was already connected with Charlie, but got more with him and reconnected with John.

Dr. Beck: Right.

Abe reads from his therapy notes again.

Abe: I'm doing as well as could be expected for someone who was severely depressed in May.

Dr. Beck wants him to reflect on this idea.

Dr. Beck: What do you think about that?

Abe: I don't know what the expectation would be, but I think I'm doing as well as I can.

Dr. Beck: Good. That's good.

Abe acknowledges his progress.

Abe: I'm doing all the right things. I don't know. The things we talk about here I've tried to do.

Dr. Beck: Excellent.

Abe: But it's still going to take longer until I'm feeling normal again.

Dr. Beck: Yes. Exactly.

Dr. Beck reinforces this therapy note by asking about its helpfulness.

Do you think it was helpful to read this, or it really just didn't make much of a difference?

Abe: Oh, I think it was helpful during the week.

The Action Plan review has enabled Abe to access a more positive state of mind.

Right now, it just sort of seems like it all came and worked out the way it was supposed to.

Dr. Beck: Excellent.

Abe: So, I think it's okay.

Dr. Beck: What else was on your Action Plan?

Abe: Talk to Charlie, I did that.

Dr. Beck: Good.

Abe: Keep looking for customer service jobs.

Dr. Beck: Were you able to do that?

Abe: Well, I did, but that's hard because you're filling out things online and you're not talking to somebody. And I don't really... They ask you for what you have been doing and I don't know how to explain what I've been doing for the past two years.

Dr. Beck proposes a new agenda item: how to explain what he has been doing so he can complete job applications.

Dr. Beck: So, is that something for our agenda?

Abe: Yes, probably.

Dr. Beck summarizes the goals for today's agenda before returning to the Action Plan review.

Dr. Beck: We have the barbecue at your daughter's, and you'll see her in-laws.

Abe: Her in-laws, yes.

Dr. Beck: And then filling out the job applications and what to say about not working.

Abe: Yes.

Dr. Beck: And, let's see, were you able to keep giving yourself credit?

Abe: Yes, I'm doing that.

Dr. Beck: That's good.

Abe: Pretty good.

Dr. Beck: And did you do a Testing Your Thoughts worksheet?

Abe: I did. That was what I started to tell you. That was when I was cleaning my apartment and I put some of the stuff out in the hallway just until I had it all ready to go at the same time. And my neighbor complained to

me. And initially when he started complaining, I thought that I was doing something wrong or should've done it differently, or whatever. But then I went through this and I sort of came to the conclusion, "No, I had a pretty good plan."

Dr. Beck: Yes.

Abe: I was getting the stuff from the apartment to the hallway, and then it was all going to go from the hallway out to the trash bin. And it was in the middle of the day, it wasn't bothering anybody out there.

Dr. Beck: Is this that neighbor who's so picky?

Abe: Yes.

Dr. Beck: Yes. Sounds that way. But how great that you didn't let what he said affect you too strongly, is that right?

Abe: Yes. Well, initially it did, but then I still got this and it reminded me I used this and thought, "Well, let me think this through." And since I had the form, I just went through it and did it.

SETTING A NEW ACTION PLAN

It's often helpful for clients to continue doing some parts of their Action Plan.

Dr. Beck: So, let's see, what from the Action Plan might you want to continue this coming week? I'm not sure you need to keep on reading this thing about, "I should be better by now." Sounds like that's pretty much in your head?

Abe: I'm doing better. I'm doing better and I believe that.

Dr. Beck: Yes. So, you already asked Charlie...

Abe: Talked to Charlie.

Dr. Beck: We're going to talk about the job applications. You're going to still keep the credit list?

Abe: Yes, I'd better. I'd better.

Dr. Beck: And keep on doing some worksheets?

Abe: Yes.

Dr. Beck: When you need to.

Abe: Yes, because there's still, I still have weak moments.

PRIORITIZING THE AGENDA

Dr. Beck: Good. All right. So, we have the barbecue and we have the job applications.

It's important to give clients another opportunity to think through what is most important to them to discuss at the session.

Is there anything that's even more important than those two things?

Abe: No.

Dr. Beck: So, which would you like to... Do you want to make sure we get to both of them, or if there's only time for one, how would you like to spend the time?

Abe: Let's do the job applications because the barbecue is still a couple weeks away.

Dr. Beck: A couple weeks away? Oh, okay. So if we don't get to it, it'll be all right?

Abe: If we don't get to that today, that'd be all right. But the job applications, that's bothering me every day.

Dr. Beck: Good. Let's talk about that then.

GOAL #1: FILLING OUT JOB APPLICATIONS

In this section, Dr. Beck enables Abe to take stock of what he has done in the past two years and to acknowledge his efforts. His tendency to discount positive information has been making it difficult for him to fill out the application.

Dr. Beck: It sounds like you were able to identify at least a couple of jobs, but then you got kind of daunted when you saw the application?

Abe: Well, when it asked for prior employment and they ask you sort of do things by date. And then I've got this big hole, the past two years.

Dr. Beck: Right.

Abe: What do I put in there, you know? Dropped off the end of the earth? I mean, I don't know what to put in there.

Instead of immediately discussing this problem, Dr. Beck needs to gather more information to see whether there is any other difficulty they should also discuss.

Dr. Beck: And are there any other hard parts about the application? Or is that really the one that's bothering you the most?

Abe: Well, I have to explain why I left the last job, but, I mean, I know what to say there. I don't know what they're going to think about it, but I know how to explain it.

Dr. Beck: Right. So you don't need my help with that?

Abe: No.

Dr. Beck: No. So let's talk about how you could fill in the application. Can I ask you some questions about this?

Abe: Sure.

Dr. Beck: If I remember right, when you first lost your job, you looked around a little while for new jobs and didn't find anything.

Dr. Beck needs to collect more information.

And then weren't you helping out Charlie back then?

Abe: Yes, a little bit.

Dr. Beck: So you had a few days of helping with construction then?

Abe: Yes.

Dr. Beck: And you've had a few days recently?

Abe: Yes.

Dr. Beck offers suggestions, acknowledging activities and experiences that the client may be inclined to discount.

Dr. Beck: I wonder whether you could put down that you've been working in construction?

Abe: I can.

Dr. Beck: Do you think Charlie would give you a good reference?

Abe: Yes, I think he would, but I haven't done a lot of work for Charlie. That's the only thing.

Dr. Beck: Well, do you have to put on the application how much work you've done?

Abe: Well...

Dr. Beck: I suppose it could come up in a job interview, but how about just on the application?

Abe: I'd be afraid to say that I'd been working the whole time for Charlie.

Dr. Beck: Yes.

Abe: I mean, because I haven't, and Charlie will tell them that.

Dr. Beck: Yes.

Abe: I mean, that I... So, I don't, I mean, I can tell them that, but I think I need to tell them more.

Dr. Beck: Okay.

Abe: I don't know, maybe?

Dr. Beck: Is there even room on the application to explain like that?

Abe: I don't know.

Dr. Beck: One of the things that you could do is that you could just put down the date for two years ago, and the date of this year, and have one year with nothing. Unless you think that actually did work in that intervening year, you could put that one in, too. So, and if you put them down with commas, I think what that usually means to people is that it wasn't continuous or you would've said this year to that year.

Abe: I think I could also put on there that I've done some volunteer work.

Dr. Beck: Oh, yes. That's good, too.

Abe: So that it won't look like I just sat around the whole time.

Dr. Beck: That you just weren't doing anything. Right. So you're going to put down the work at the homeless shelter?

Abe: The homeless shelter, yes.

Dr. Beck: Yes, that's good.

Abe: And I've done a couple special project things. Well, this was before, well, with the church. I don't know if I can use that or not, but... Well, I can just say I did volunteer work and use the homeless shelter as a place.

Dr. Beck: Right. And you could also say you did do some work at the church?

Abe: Yes.

Dr. Beck: You think that's been in the last two and a half years?

Abe: I kind of dropped off church around that same time.

Dr. Beck: Oh, okay. So just leave it off then. How does that sound?

Abe: Yes. I can say that I've done construction when it was available. I've done some work in the homeless shelter.

Dr. Beck: Good.

Abe: I can say that.

Dr. Beck anticipates that Abe might need to explain why he didn't have a continuous job for those two years.

Dr. Beck: Now, when you get an interview, do you think that the company that you're going to apply to has hired other people in the last couple years?

Abe: Yes, probably.

Dr. Beck: Might be an expanding company, might not be, right? But I'm just wondering whether the job interviewer knows that it's more difficult for people to get jobs when they're in their 50's, than when they're in their 20's, and 30's, and 40's?

Abe: They probably know it because they're the ones not hiring us.

Dr. Beck: Exactly, right. And so I wonder whether, in your interview, you might be able to say honestly that you've been looking for a job, but that it's been difficult?

Abe: Yes.

Dr. Beck: I don't think there's a place for that on the job application, but I thought maybe it'd be good for you start thinking about that.

Abe brings up another potential problem.

Abe: I mean, the other thing about it is that my last, except for the last few months when I was there, I was working as a supervisor and then it makes it hard to go in to a new place and get a job as a supervisor. Nobody wants to hire... they want to hire you at entry level positions. And so, you can't just go over there and... But, if I could get a job in customer service, I mean, even if I had to start at the bottom, I think I'd be okay with that.

Dr. Beck: That's good.

Dr. Beck identifies a potentially challenging situation. She provides the client practice responding to the challenge with an impromptu roleplay.

And do you have something good in mind that you can say if the interviewer says, "But you were a supervisor before and this is an entry level job." What would you say back?

Abe: Well, but this in the area where I like to work and so I'm willing to take an entry level job. The problem that I had at my last job is that they moved me from customer service over to inventory, and I didn't know how to do that. I mean, there were computers and there were spreadsheets and stuff, and I didn't grow up with that stuff. I didn't know how to do that. So, as long as I was working at customer service, I was doing good. It's when they moved me to inventory that I had a problem.

Dr. Beck provides positive feedback about his answer.

Dr. Beck: Yes. Oh, I think that's a great answer if an interviewer says, "What happened with the last job?"

Abe: Okay.

Dr. Beck asks the client for other potential obstacles that could get in the way this week.

Dr. Beck: What could get in the way of filling out the job application now?

Abe identifies an automatic thought that could interfere. But then he answers the thought himself.

Abe: Well, I mean, just that I would have the thought that even if I put down construction and volunteer work, that that won't be enough. But, I mean, I think that that's the best plan I have right now, so I'll just put it down. I mean, I can't get any worse results than what I've already gotten.

Dr. Beck anticipates that the client will be more successful if he remembers his response.

Dr. Beck: Yes. Do you need to write down, "If I think that they won't like my lack of work history, remind myself, 'This is the best plan I have' "?

Abe: Okay.

Dr. Beck: Great. Anything else on job applications?

Abe: No. I don't think so.

Dr. Beck: Can I just ask you one more question?

Abe: Yes.

Dr. Beck: What does it say about you as a person that you're willing to go into an entry level job?

Dr. Beck asks a question to draw out and activate a positive core belief.

Abe: People need to work.

Dr. Beck: So it shows you-

Abe: I mean, I think that work is important. I think that earning money is important.

Dr. Beck suggests several positive conclusions.

Dr. Beck: So you have a good work ethic? Some people would feel themselves too superior to take an entry level job. It doesn't sound like you have that sense about yourself?

Abe: I would just be happy to be working again.

Dr. Beck: Yes. So I think-- does that show that you're humble? That you have good values, that you would put productivity over superiority?

Abe: I don't know if it means that or not but sounds good.

Dr. Beck and Abe make a collaborative decision to move on to the next agenda item.

Dr. Beck: Okay. Anything else on this, or should we talk about the barbecue?

Abe: Talk about the barbecue.

GOAL #2: THE BARBEQUE

First, Dr. Beck collects more information about the situation.

Dr. Beck: Okay. So it's in a couple of weeks?

Abe: Yes.

Dr. Beck asks Abe if he has an image in his mind. Images are automatic thoughts in the form of a picture in the mind and can evoke strong emotion and give clients better access to their verbal automatic thoughts, if there are any.

Dr. Beck: And do you have a picture in your mind about what the barbecue is going to be like?

Abe: Yes. I imagine I'm going to go there and then my wife and her family are sort of going to be talking and stuff.

Dr. Beck: Your ex-wife?

Abe: No, no.

Dr. Beck: No, no. Your daughter?

Abe: My daughter, I'm sorry.

Dr. Beck: Oh, your daughter and her family?

Abe: That my daughter and her family are going to be there and talking, and everything. And then I just sort of imagine that her in-laws are going to be sort of over on the side just talking among themselves.

Dr. Beck: Okay.

Abe: And that's going to be awkward and difficult to break into. And I'm going to walk in, my daughter will be happy to see me, and my son-in-law, too, but-

Dr. Beck wants to work with Abe on what he thinks the most difficult part of the experience will be. Her goal is to help him become confident that he can cope with this part of the experience.

Dr. Beck: What do you think is going to be the most difficult moment for you?

Abe: I think after I say hello to my daughter and her husband, and my grandkids, there's going to be a time when everybody recognizes that I've said hello to everybody, but I haven't done any talking with her in-laws. And I think that that's going to be a difficult moment.

Dr. Beck: Yes.

Dr. Beck continues to collect information so she can conceptualize the problem and figure out where they might start working on it.

So, have you had difficulties in talking to them before? How often have you... Did you only see them at the wedding and not since? Or you've seen them periodically?

Abe: Well, I probably saw them one or two times, but not regularly. It's not like we were ever friends. I mean, part of that was when I was married before we'd only do things with other people together.

Dr. Beck: Right.

Abe: So, I never really saw them or really got to know them that much.

Dr. Beck: And when you did have a little bit of time with them, what was your impression of them?

Abe: They're perfectly nice people. They were okay. They seemed friendly. That was when I was working and when I felt normal. And now I haven't been for such a long time, I don't know what they're going to think about.

Dr. Beck: Yes.

Dr. Beck identifies the emotion, anxiety and a potential distortion (mind reading).

What are you afraid they're going to think about you?

Abe identifies his automatic thought.

Abe: They're going to think that I'm just lazy, irresponsible.

Dr. Beck: Do you have a picture in your head of them believing this about you?

Abe: Yes. Like I'm sitting there, once we get to that moment after I've said hello to everybody, then I sort of look over at them and they look back at me. And they have just this look on their face of disapproval.

Dr. Beck: Yes.

Dr. Beck uses Socratic questioning to evaluate this thought. At this point, she doesn't know to what degree Abe's thoughts and images are likely to be accurate or inaccurate.

And do you have any evidence? Is there something that makes you think that they'll be critical of you? Or do you have any evidence that makes you think that they won't be critical of you? Or do you really just not know?

Abe: I don't know. I just assume that everybody thinks that about me.

Dr. Beck asks questions to elicit evidence that is contrary to Abe's idea.

Dr. Beck: Well, is that what John thought about you when you reconnected with him?

Abe: No.

Dr. Beck: Is that what Charlie thought?

Abe: No.

Dr. Beck: Is it what your kids have thought all along?

Abe: No.

Dr. Beck: No. So, is it what I think of you?

Abe: No, but that's your job.

Dr. Beck: Well, it *is* my job to try to look at things realistically.

Dr. Beck acknowledges that she doesn't know how valid Abe's concern is, and turns Abe's attention to whether he thinks it will be worthwhile to talk to his daughter's in-laws, regardless of how they view him. Then she offers a suggestion about what he can say.

Now, I don't know how to look realistically about your daughter's in-laws. I don't know whether they're going to be critical or not. The question is, is it worth it to you to act *as if* you feel confident? And is it worth it to you to go up to them and if they ask, "What have you been doing lately?" you could say you've been working construction. You could say you're looking for, you'd like to get back into customer service, so you've been applying for jobs in that.

Abe: Yes.

Dr. Beck: So, if you were to say that in kind of an upbeat way, what are the chances, do you think, that they'll be really critical of you?

Dr. Beck asks a question to help Abe reassess how risky the situation now seems.

Abe: Not to my face, anyway.

Dr. Beck: Yes. And after you say that, if you want, you can just very quickly change the subject.

Dr. Beck anticipates that Abe may need practice so he can speak effectively with the in-laws but she gives him a choice about it.

Would you like to do a little role play on this? Do you want to be you or you want me to be you?

Abe: Sure. I should be me.

Dr. Beck: And who am I? The wife or the husband? Who's easier to talk to?

Abe: That's what I'm trying to... Probably the husband is easier for me to talk to because we can talk about sports and stuff.

Dr. Beck: Oh, that's good. What's his name?

Abe: It's a funny name. It's Elias.

Dr. Beck: Elias? Okay.

Abe: Yes.

Dr. Beck: All right. I'm Elias, and do I come up to you or do you come up to me?

Abe: Well, I mean, that's the question. So, I've said hello, I look over, I see them sort of looking. They're settled, so I guess I have to go over to you.

Dr. Beck suggests that Abe use the technique of "acting as if" he is thinking and feeling positively. Then she focuses on his facial expression and body language.

Dr. Beck: Okay. And remember now what I want you to do is to *act as if* you have confidence. *Act as if* you feel good about the fact that you're doing construction, that you're looking for another job. *Act as if* you expect them to be nice to you. So, if you have that attitude, what does your face look like?

Abe: [smiles]

Dr. Beck: Like that, right?

Abe: Yes.

Dr. Beck: That smile, right? Kind of open, the smile. What does your posture look like? You're feeling confident about yourself.

Abe: I guess I'd have to probably sit up straight. Or stand up straight. I'd stand up and go over and...

Dr. Beck: So, you're coming to me, I'm Elias, so you're standing up straight, you're smiling, you come over to me and you say...?

Dr. Beck allows the client to generate the first line in the roleplay.

Abe: Hi, Elias, how you doing?

Dr. Beck [as Elias]: Pretty good.

Abe: Good. It's good to see you.

Dr. Beck: Yes.

Abe: Haven't seen you for a long time.

Dr. Beck: Nice to see you, too. You know I'm retired now and I have to tell you, I'm enjoying retirement. How about you?

Abe: Well, I'm still in the game a little bit. I've been doing a little bit of construction and I'd like to get back into customer service if I could, so I've been looking at jobs with that.

Dr. Beck: That's good. And I know you know even though the economy is booming, it seems hard for people our age to get jobs.

Abe: It's hard, yes. People don't seem to want to talk to me.

Dr. Beck: Yes.

Abe: So, anyway.

Dr. Beck: Oh, that's unfortunate.

Abe: Well...

Dr. Beck interrupts the roleplay to make a suggestion.

Dr. Beck: Okay, how about if you change the subject now? [Getting back into the roleplay as Elias] Well, that's unfortunate.

Abe: What do you think about the Phillies this year?

Dr. Beck: I'm so disappointed. I have to tell you. After last season, I really thought they had a chance, but I don't know. They're not doing too well.

Abe: Well, they've got some expensive players and I thought they'd do better, but...

Dr. Beck: So, you going to any games?

Abe: I haven't. I haven't yet. I'd like to some time, but I'd like to wait to see them do better, too.

Dr. Beck: Yes. I went to see a couple games early on, that's when they were doing well, but I haven't gone for a while either.

Abe: Yes. So, I don't know. Things don't look good for them right now. I don't know, maybe the Eagles have a better chance this year.

Dr. Beck: Yes, I hope so. I don't have to tell you I'm much more of a baseball fan, though, than a football fan.

Abe: Yes.

Dr. Beck comes out of the roleplay to offer feedback on both words and body language. She anticipates the negative response the client might have to feedback and offers compassion and understanding. She sets up another opportunity for practice.

Dr. Beck: Okay. Let's come out of role play. First of all, I thought everything you said was great. Second of all, you looked pretty depressed when you were telling me all this stuff. I'm wondering if we could just try it once more and have you try to feel confident? Let me ask you a couple questions. One of the things that you read about here was that you really have made a fair amount of progress. And that you are right where you should be, given how depressed you were last May. So, you are right on the road where you should be right now, Abe.

Abe: Yes.

Dr. Beck: The second thing is, look at how much more you're doing these days than you did before. And the fact that you're working construction and that you got extra days, boy, that to me shows you're really willing to work hard to get over this depression.

Dr. Beck provides more positive feedback.

Abe: Okay.

Dr. Beck: And the fact that you were able to fill out the Testing Your Thoughts worksheet, and that it worked, and it helped you feel better. The fact that you've gotten your apartment really straightened out. All those things are really great.

Abe: Yes. Okay.

Dr. Beck: Now, let me ask you another question. Does Elias know that you've been depressed?

Abe: I don't know.

Dr. Beck: Yes.

Abe: I don't know what he knows. I don't know what they've told them.

Dr. Beck: Right. But what do you think of trying to do this one more time, but with smiles?

Dr. Beck suggests smiling, so Abe will come across better to Elias. Also, facial feedback may enhance mood, activate a more positive mindset, and even facilitate a shift to a more adaptive mode.

Abe: All right. I'll try it.

Dr. Beck offers a more adaptive mindset.

Dr. Beck: Okay. So I think the attitude you have to have is that you're actually really *glad* to see Elias. You connected with him a little bit in the past, here's an opportunity to connect with him more strongly.

Dr. Beck asks the client to identify the benefits of connecting with Elias, which are linked to his values, then motivates him to push himself.

What would be good if you did connect with him more strongly?

Abe: Well, we might do things more together as a family.

Dr. Beck: That's right.

Abe: That would be, I mean, just make us all closer.

Dr. Beck: Yes. Would it mean something to your daughter, do you think, if you got closer to her in-laws?

Abe: Probably she'd like that.

Dr. Beck: I bet she would like that. Yes. So, is it worth it to really try to put yourself out there and be smiling?

Abe: Okay.

Dr. Beck acknowledges the difficulty of the task.

Dr. Beck: It's hard, though, right?

Abe: Yes.

Dr. Beck: All right. So, you're going to get *triple* credit if you can do this. Okay, so here I am, I'm Elias, I'm sitting here with my wife.

The client begins the roleplay.

Abe: So, I look over and I see you. I just sort of, "Hey, Elias. How you doing?"

Dr. Beck [as Elias]: Pretty good.

Abe: I haven't seen you for a long time. How have *you* been doing?

Dr. Beck: Oh, pretty well. I'm retired now.

Abe: Are you?

Dr. Beck: Yep. Putter a lot around the house and stuff. How about you?

Abe: I'm still trying. I've been doing a little bit of construction, and I'm actually trying to get back into customer service again because I really liked it when I used to do that, and I haven't done that. So, I've been putting in some applications and doing that. In the meantime, I've been doing a little bit of construction work, and volunteering, and things like that.

Dr. Beck: Oh, good for you.

Abe: So, that's... we'll see. We'll see how it all works out. But, anyway, what do you think about the Phillies this year?

Dr. Beck: I'm so disappointed. I had high hopes after last season, but they're not really doing very well.

Abe: Yes.

Dr. Beck: I don't know. What do you think?

Abe: Well, they've spent a lot of money on big-buck players who aren't paying off is mostly what it is. So, I don't know. I'd like to go to a game some time, but I don't want to spend the money on a game if they're just going to be as bad as they've been doing.

Dr. Beck: Yes. I don't blame you.

Abe: I don't know, maybe the Eagles will be better this year.

Dr. Beck: Oh, I think that's wishful thinking, Abe. After last season?

Abe: Yes, well. Well, maybe the quarterback thing straightened out at this point.

Dr. Beck: Yes, I hope so.

Dr. Beck ends the roleplay and provides feedback, emphasizing how much Abe improved.

All right. Let's come out of the role play. You did great. That was such a difference between the first one and the second one.

Abe: It was hard.

Dr. Beck: And it was hard-

Abe: I don't feel like I did that much better, but-

Dr. Beck provides evidence of improvement.

Dr. Beck: Oh, boy, I have to tell you, just looking at your face, your voice was louder. I don't know if you know.

Abe: Yes, it was louder.

Dr. Beck: Right? You sounded as if you weren't afraid of what he was going to think. You sounded, you know, and you were just kind of matter-of-fact talking about construction and applying for new jobs. You weren't negative about it in any way. But you did a really good job.

Dr. Beck checks to see whether Abe needs help generating additional topics of conversation.

Do you have any other topics that you might talk to him with, about?

Abe: I mean, sports.

Dr. Beck: Sports?

Abe: I mean, we can always talk about the grandchildren.

Dr. Beck: Yes, that's a good one.

Abe: That's always easy to talk about. And maybe even talk about going to some of their activities together, maybe.

Dr. Beck: Oh, right. You might see them.

Abe: Or see them there.

Dr. Beck: Yes.

Abe: I don't know how much he goes to.

Dr. Beck: Any other topics?

Abe: Well, our kids, of course, and what they're doing, and how they're getting along, which is good. They're doing really good.

Dr. Beck: Do they have other children, too?

Abe: Yes, they do. I think they have. I think two other daughters.

Dr. Beck: So, you could always ask about them?

Abe: Yes.

Offering another topic.

Dr. Beck: You know what topic I find most people like to talk about is travel. So, have they been any place in the last couple of years? Or, are they planning to go someplace, or what's on their bucket list?

Abe: Yes. I have trouble talking about that because I haven't gone anywhere or done anything.

Dr. Beck: So, if Elias were to say, "Oh, yes, we're going to Mexico in a couple of months," what could you say back to that?

Abe: "Where are you going to go? What are you going to do?" No, that would be okay if he would say that.

Dr. Beck: That's great. And what's on your bucket list, Abe? Where would *you* like to go?

Abe: I guess the thing is that travel hasn't been the thing that's been most important to me. It's just sort of I'm happy to stay close to home and be close with my family. I don't really think about going other places much.

Dr. Beck offers a way he can respond.

Dr. Beck: So, if he asks you, you can say that. You've never really had the travel bug.

Abe: Yes.

Dr. Beck: Yes. Good. All right

Dr. Beck wraps up the discussion by asking the client to summarize key points.

So, what did we talk about in terms of Elias that you'd like to remember?

Abe: Well, I think probably he'll be okay. I mean, he's certainly okay.

Dr. Beck anticipates that Abe may not remember his conclusion.

Dr. Beck: Want to write some of this down?

Abe: Elias will probably be happy to see me.

Dr. Beck: Yes.

Abe: And we have common interests to talk about.

Dr. Beck: That's true.

Abe: Sports, kids, grandchildren.

Dr. Beck: You could ask how he's spending his time in retirement.

Dr. Beck prompts the client to write down something about how he wants to appear to Elias.

Now, you want to say anything about your appearance?

Abe: I don't know what you mean.

Dr. Beck: How your face might look, what your posture might look like?

Abe: Oh. I want to stand up straight, smile, talk loud enough.

Abe adds this to his Action Plan.

Dr. Beck: Talk with enthusiasm? I think it's easier to do when you're talking about your grandchildren.

Abe: Yes. Yes.

Dr. Beck: That's good.

Abe: Much easier than the Phillies.

Dr. Beck motivates Abe to follow the Action Plan.

Dr. Beck: And why is it worth it to do this? What will it mean if you do this?

Abe: I mean, well, I mean it just ties into everything else that we've been talking about. And everything I've been doing. It's going to help me to just kind of be normal, and have a normal life again.

Dr. Beck: Exactly. Do you want to write that down, or do you think that's really in your head now?

Abe: I'll write it down.

Dr. Beck asks for conclusions and key points to remember with regard to the first agenda item.

Dr. Beck: And let's go back to the job application. What do you want to write down about that?

Abe: That since my last job I want to be able to say that I haven't just been sitting around doing nothing.

Dr. Beck: Right. So, when it says, "List what you're doing," what can you list?

Abe: Yes, I've been doing some stuff on construction, been volunteering, and I think the way that I would say that, I just want to get back to customer service because I was happy doing that.

Dr. Beck: The application, do they give you any space to just say why you want the job, or talk about yourself?

Abe: I think it's--different ones are different. Usually, at the end they have a space where you can write something if you want to.

Dr. Beck: So, this would be a great thing to write.

Abe: Get back to customer service.

Dr. Beck: That you really like to do that, you really enjoyed it when you were doing it, you did it so well you got made supervisor. But you're willing to do an entry level job.

Abe: I'd do anything just because it's just important to me to work.

Dr. Beck: Yes. That might be good for you to put in the application, too, then if there's a space.

Dr. Beck realizes that job applications usually ask for references, so she makes a suggestion about that.

You know what, something that just occurred to me, is that Charlie was a... No, not Charlie. Sorry. Joseph was the boss who switched you to inventory, right?

Abe: Yes.

Dr. Beck: But he was new in the job, as I remember, right? Who was your supervisor, or boss, before Joseph?

Abe: That was Dan.

Dr. Beck: Dan. And do you think Dan would give you a good recommendation?

Abe: Yes. I think he probably would.

Dr. Beck: So, there may be a place on the application to say "references," maybe you want to give Dan's name and number? Might be good to call Dan, or email him or something, beforehand so he'll know to expect a call. Would you have any problem doing that?

Abe: Some, but I think I can.

Dr. Beck: You can get yourself to do it? That's great. So we're giving you some hard things to do. And I think the application won't be nearly as hard now that we've figured out what you could say. Might be pretty hard to talk to Elias, might be pretty hard to call Dan. Right?

Abe: Yes.

Dr. Beck acknowledges the difficulty of the tasks and associates completing difficult tasks with client strength.

Dr. Beck: You think you have the strength to be able to do this?

Abe: I'll try.

Dr. Beck expresses her confidence in Abe, based on evidence she cites.

Dr. Beck: I think you do. I think you do. I think it was pretty impressive how you were able to turn your mood around about your picky neighbor. I think it's been pretty impressive how much time you've been spending with your family.

Abe: Picky neighbor was easier for me to figure out, I think.

Dr. Beck: Yes.

Abe: Because he irritates me.

Dr. Beck: And the fact that you're working in construction, you're just doing so many good things now, Abe.

Dr. Beck gives Abe a chance to discuss something else, then asks about the Action Plan.

Is there any last thing you want to talk about? You got your Action Plan firmly in your mind?

Abe: No. I think, I mean, this is helpful.

Dr. Beck checks one last time for potential obstacles.

Dr. Beck: Good. Any problems you think doing this?

Abe: I don't know. I'll find out, but I'm going to do it. I mean, these are the kinds of things that, even though overall I've been doing better, these are the things that I've been stumbling on.

Dr. Beck reminds Abe again about how far he has come.

Dr. Beck: Yes. And I don't think we could have worked on these things, to be honest with you, back in May.

Abe: No.

Dr. Beck provides more positive reinforcement and asks Abe to reflect on what she has said.

Dr. Beck: The fact that we're even working on them now, I think, is really a testament to you of how hard you've worked, to be able to get to this point, even where you could even *think* about doing these things.

Abe: Yes.

Dr. Beck: You think I'm right about that?

Abe: Yes, I couldn't have talked about these in May.

Dr. Beck: Yes. And you're going to continue to give yourself credit because that's our standing thing and continue to do worksheet.

Abe: I find it useful to just keep the rubber band handy-

Dr. Beck: Rubber band? Oh, good. That's good.

Abe: ... To just remind me to, at this point, it's gotten just sort of a reminder to do all of these things.

Dr. Beck thinks of a way to connect the meaning of the rubber band to one of Abe's core values.

Dr. Beck: You know what I think this rubber band is? I think it's a "taking control" rubber band. Good.

ELICITING FEEDBACK

Dr. Beck asks briefly for feedback. Because Abe has been upfront about giving her feedback in the past, she is confident he would let her know if anything had bothered him or if he wanted to do anything different in their next session.

Dr. Beck: Any feedback about the session?

Abe: No. It was good. This was really helpful.

Dr. Beck: Great. All right. Can I take my copy of the Action Plan then?

Abe: Oh, yes.

Dr. Beck: All right. Same time next week.

Abe: Okay.

Dr. Beck: Great. See you then.

Abe: Okay.