

Phase 1 History Taking (For Clinical Use)

Background: Intake information already used in your clinical setting, initial rapport building, obtaining client's understanding of trauma and basic psychoeducation on trauma:

What are some of your strengths, assets, and resources?

**An alternate way to ask is "What are the things you have going for you, both internal and external?"*

What do you want to work on during this practicum?

**Specific memories or general themes are both workable for practicum*

What would you like to get out of doing this work? (e.g, goals and outcomes)

Target Selection

It is not important that we go through a detailed, chronological history. For many people, recounting a detailed history may be impossible until you've processed certain memories or you may not feel ready for it right now. Are there any **themes** you can identify related to your presenting issue(s) that seem to be keeping you stuck right now?

Presenting Issue:

A. Theme:

1. *Negative Cognition:*

- First floatback memory:
- Worst floatback memory:
- Most recent floatback memory:

2. *Negative Cognition:*

- a. First floatback memory:
 - Worst floatback memory:
 - Most recent floatback memory:

3. *Negative Cognition:*

- a. First floatback memory:
- b. Worst floatback memory:
- c. Most recent floatback memory:

B. Theme:

1. Negative Cognition:

- a. First floatback memory:
- b. Worst floatback memory:
- c. Most recent floatback memory:

2. Negative Cognition:

- a. First floatback memory:
- b. Worst floatback memory:
- c. Most recent floatback memory:

3. Negative Cognition:

- a. First floatback memory:
- d. Worst floatback memory:
- e. Most recent floatback memory:

- Use the .docx file provided in the supplementary electronic handouts to add as many themes as you need under a particular presenting issue (C, D, E, etc.)
- You may also use the worksheet to correspond with each new presenting issue

The “Greatest Hits” List of Problematic Beliefs (Negative Cognitions)

Developed by Jamie Marich, Ph.D. (May be duplicated for use in clinical settings)

Responsibility

I should have known better.
I should have done something.
I did something wrong.
I am to blame.
I cannot be trusted.

Safety

I cannot trust myself.
I cannot trust anyone.
I am in danger.
I am not safe.
I cannot show my emotions.

Choice

I am not in control.
I have to be perfect/please everyone.
I am weak.
I am trapped.
I have no options.

Power

I cannot get what I want.
I cannot handle it/stand it.
I cannot succeed.
I cannot stand up for myself.
I cannot let it out.
I am powerless/helpless.

Value

I am a bad person./ I am terrible.
I am permanently damaged.
I am defective.
I am worthless/inadequate.
I am insignificant.
I am not important.
I deserve to die.
I deserve only bad things.
I am stupid.
I do not belong.
I am different.
I am a failure.
I am ugly.
My body is ugly.
I am alone.

How to Use:

- Have your client check off any negative beliefs that they may still hold in the present, especially those that go along with the presenting issue they have chosen.
- If more than 3 are checked, have them go over the list again and see if they can rank (1, 2, 3) the “hottest” or “most charged” beliefs.
- Once identified, ask them three floatback questions and document on facing page (use this wording):

*a. Looking back over the course of your life, when is the **first** time you believed... (e.g., I am...; I cannot...; I do not...)*

*b. Looking back over the course of your life, when is the **worst** time you believed...*

*c. Looking back over the course of your life, when is the **most recent** time you believed...*