

## CHALLENGES WITH THE CLIENT: INCLUDING ADMINISTERING THE SCI

Dear Prof. Shapiro,

I have a question about administering the SCI, or in some cases, not administering it. If a clinician is working with a client over the phone (understandably far from ideal, but in this case, probably necessary), it would be very difficult to go through all the data and results over the phone. I know for myself, if someone were administering the test or reading me the results and interpretation, I would have a hard time being focused. Under such circumstances, is it reasonable to rely on other ways of assessing the client? Thanks for your guidance and wisdom! Sincerely, Josh

Hi Josh, Thanks for your update question. I understand the difficulty, challenges of working with someone over the phone, and your concern about their focus. I agree that you want to make it as simple as possible. Let me suggest that it would still be a very good idea to have your client (and yourself!) take the SCI. Here is how I would present it (to her and to you!)

1) Explain to the client that you understand, hear her concerns regarding her situation and how out of control that must feel to her. Suggest that the way you work (control therapy) is that we all want a positive sense of control in our lives. CT is a way to help individual gain, regain, and maintain a positive sense of control. The goal is to help people reduce their suffering and lack of control feelings and increase contentment, peace, and a positive sense of control. Generally over eight weeks, the following are the 4 parts of CT. All of these are done within a compassionate, caring listening by the therapist in working cooperatively with the client to assess the client's concerns

2) UNDERSTANDING THE CLIENT'S CONTROL PROFILE. The best way I can help you is to understand your control profile, and then, based on that and your concerns, to match strategies to your unique profile and situation.

Then have her take the SCI (about twenty minutes to complete). There is no charge to take the SCI, and all material is free of charge.

Once she has done that, there is a one-page summary table listing her profile and areas which are "of potential clinical concern. She should NOT receive the 20-page document, as I agree with you that would be too much. But you should. Then you can explain in clear, simple terms

3) WHAT YOU SHOULD LOOK FOR. The control profile will give you her overall sense of control; what current areas (domains) she is feeling too little control, and where there are concerns.

, What is her current "mode profile: ASSERTIVE CHANGE (POSITIVE AND Negative; yielding accepting (positive and negative; (the four quadrants) Agency of control: self, other/Other.

Once you have this control profile, you can see where there are areas that may need addressing, in light of her goal(s). Then you can match control enhancing interventions from her profile to her goal (e.g. where does she need to learn to be more assertive, more positive yielding; where more self-agency, etc.

Hope this makes sense and helps. I admire your efforts to bring healing toward those who are suffering. A step at a time we can make this a happier, more peaceful joyful world:!)

Namaste Dr S (Ps I have a son named Josh:)

## ADDITIONAL COMMENTS ON THIS CLIENT AND WORKING ON SELF

—As far as the client is concerned, it has been challenging, and here are my excuses for not achieving what I had hoped for (completely unrealistically!). First of all, it is over the phone only, so that itself is a barrier of sorts. UNDERSTAND... Also, she's dealing with a lot practically, so anything not done in session, so far has not been done. She may not even believe it is possible to attain control, when her whole life, at least a very significant chunk of it has been completely out of her control in a

very painful and disempowering way. OUCH. EMPATHY. WE ALL UNDERSTAND THAT TO A DEGREE, SO YOU MIGHT BE A HELPFUL HEALER FOR HER And sometimes in session she's busy taking care of her son, so it can be tough. I spoke with her about control stories, I tried to get her to take the SCI, but it couldn't be done in our session. WHEN SHE'S READY... We spoke about self monitoring, self observation, control speech, and long story short, she was motivated about gaining a sense of control, EXCELLENT SEE YOU'RE NOT GIVING YOURSELF ENOUGH CREDIT!!! but all the things she needed to do, between sessions, she wasn't. HMM, HAS THAT EVER HAPPENED WITH ANY OTHER CLIENTS; YOURSELF?!?! WELCOME TO THE HUMAN RACE:!) PATIENCE, TRY AGAIN, OMMM...To be clear, I don't blame the client at all. GOOD TO NOT BE JUDGMENTAL BUT ALSO TO BE ENCOURAGING, YOU CAN DO THIS, TRY AGAIN, PRACTICE, IT TAKES TIME... I myself am dealing with a fair amount personally, so it is hard for me to do all the things that would be beneficial for me.AH, PART OF THE HUMAN RACE:!! I don't really do any self care, or many of the other things I know would help me. REALLY; SOUNDS PRETTY BLACK AND WHITE EITHER /OR YOU DON'T DO ANYTHING FOR SELF-CARE. JOSH, MAYBE A LITTLE HARD ON YOURSELF:) MAYBE I DO A FEW THINGS, WOULD LIKE TO DO MORE?!?! And I know I must put on my own mask before trying to help someone else, but it is something I have to figure out (assertive positive or negative, to be determined) NOT SURE I AGREE TOTALLY; TO SHARE YOUR OWN VULNERABILITY CAN BE HELPFUL SOMETIMES; THESE ARE HARD TO DO; I ALSO FIND THEM HARD TO DO; WE'RE ALL TRYING; BE GENTLE WITH YOURSELF, ETC... IT'S A COMBINATION OF COURAGE TO CHANGE WHAT YOU CAN, AND BEING KIND GENTLE, ACCEPTING OF THOSE PATS YOU ARE NOT YET ABLE TO CHANGE(POSITIVE So I myself am not certain enough in what I am doing, ARE YOU SAYING HARD TO FIND "THE WISDOM TO KNOW THE DIFFERENCE" BETWEEN POSITIVE ASSERTIVE AND POSITIVE YIELDING WITH YOUR CLIENT: WHEN TO PUSH, WHEN PUSHING TOO HARD? WHEN TO YIELD? WHEN YIELDING IS POSITIVE AND WHEN PASSIVITY (READ THE STORY OF THE PERSON GOING TO THE WISE MASTER IN THE HIMALAYAS ABOUT GOOD AND BAD CHOICES AND EXPERIENCE (MODULE TWO) ALSO READ THROUGH THE STORY OF THE PERSON WHO HITS THE ROCK 499 TIMES, FEELS HOPELESS, HELPLESS, BUT ON 500TH TIME IT BREAKS APART; SOMETIMES OUR EFFORTS DO HAVE AN EFFECT, IF WE DO THEM GENTLY, PATIENTLY, CHANGE MAY BE OCCURRING (BUT BE CAREFUL OH HITTING YOUR HEAD AGAINST A WALL, TOO!:)So I made a tactical retreat. POSITIVE YIELDING THAT MAKES SENSE I surrendered the SCI, at least for now, and much of the formal assessment. FAIR. I UNDERSTAND. I shmoozed with her about control in general so I could get a feel and hear from her her initial thoughts about what she would like to achieve in the realm of control. PERFECT. JOSH, RELATIONSHIP AND CONTEXT IS SO IMPORTANT. VERY GOOD. (is SCHMOOZE A TECHNICAL PSYCHOLOGICAL WORD?!?!Now I am researching interventions and trying to plan execution, so I can be more certain when doing it with her. GOOD, KEEP DOING THE WORK, KEEP LEARNING, BE PATIENT WITH BOTH OF YOU! I am trying to do everything myself first, since I can use plenty of help in my own life with positive yielding. WISE MAN! I think that maybe some quick victories would be motivating. So I guess my retreat has been to expedite the assessment and goal setting, to get a decent goal of gaining the skill (or more accurately, growing in the area) of positive yielding. GOTCHA. BUT ALSO ARE THERE TIMES WHEN SHE NEEDS TO FEEL WHEN IT'S OK TO STAND UP FOR HERSELF (POSITIVE ASSERTIVE)

So that is where I am holding right now. GOT IT; KEEP ON THE PATH:) YOU'RE DOING FINE:) NAMASTE, DR.S Thanks again for reaching out, all the best.Josh