

# What to Expect When in Therapy

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## DEDICATION

This book is dedicated to those brave enough to change.



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## INTRODUCTION

It has been said that the journey of a thousand miles starts with one step. The same is true when beginning therapy. You may be at the first step in your journey, or already some ways down the road. Wherever you are along that path, this book is designed to give you a map and an overview of what to expect when entering therapy.

I'm a therapist who owns and operates a network of counseling companies in the Northwest United States. I work closely with a team of counselors, social workers, educational professionals, psychiatrists, and psychologists. I am professionally educated and trained as a counselor and as a school psychologist.

Every day, I work with clients who come into our office seeking to make changes in their life. My clients are smart, capable, and motivated people who are wanting something to be different. My clients come to therapy with a desire to change. Sometimes it is due to problems in their lives and sometimes it is because they want to reach higher goals.

I began seeing a counselor for the first time when I was in my early 30s. I wasn't facing any particular crisis in the moment, but as I learned more about becoming a counselor myself, I thought it would be essential to experience

receiving counseling. I found the process of signing up and knowing what to expect to be more nerve-racking than it should have been.

A few years later, I found myself dealing with depression and stress prompting me to seek therapy again. Because of my previous experience, I found this time around to be much easier to navigate. My therapy journey proved to be beneficial and helped elevate my quality of life. This journey put me on a new path of coping and self-care. I hope that my experience can help you.

When I first started working as a therapist, people often came to me without previous experience working with a therapist, this short book was written with these people in mind. It is designed to address the questions past clients have asked and to help others seeking therapy in our offices and outside our offices around the country.

I sincerely hope you find this book useful as you consider seeking therapy and as you continue your life's journey. This book is for you!

## CHAPTER 1: WHAT IS THERAPY?

*“We may define therapy as a search for value.”  
~ Abraham Maslow*

Bill entered my office for the first time, clearly agitated. Bill stated bluntly, “What am I supposed to do?” as he stood in the middle of my counseling office. I motioned towards a seat and he sat down. Again he exclaimed, “I’m not sure what I’m supposed to do here.” As I probed further, Bill noted that his wife wanted him to go to therapy and I that this wasn’t his idea. He told me that he really didn’t know what to do. I explained to him that our work together would really just be a conversation, and if that worked for him it could continue. If he didn’t feel the conversation helped, then we wouldn’t continue. I began by asking why he thought his wife wanted him to go to therapy.

Bill and I continued working together for about two months, over that time we established some new communication skills and he found that having someone to talk to was helpful. By the end of that time he joined a long term men's group and discontinued individual therapy. Over those months, Bill learned what therapy meant to him and found a version that worked for him.

When I first started going to therapy, I found it intimidating to tell other people. The concept of going to therapy seemed like it was admitting that there was something wrong with me. The concept of seeing a "therapist" felt intimidating, and I didn't even know why. I felt that insecurity and intimidation, even though I had been working in the mental health field for years before seeking help myself. As we begin our journey of helping make this process less intimidating, let's talk about what therapy is.

Therapy can be defined many ways, but, for the purpose of this book, I'm going to say that therapy is simply a change-based process. In the medical world there are a variety of types of therapists including occupational therapists, physical therapists, speech and language therapists, and even massage therapists. The truth is that any change-based process can be considered therapy. For this book I am talking about a change-based process in the realm of the psychological, social, and emotional. A variety of words may be utilized interchangeably with therapy, for example counseling and therapy tend to be interchangeable.

Technically, the term "therapy" that we are talking about

is shortened from the word “psychotherapy.” Psychotherapy is a therapeutic process related to the mind (psyche) and is unique as compared to say physical therapy. In this book, when the term “therapy” is used we are referring to psychotherapy.

Below is a simple definition of the type of therapy this book is about:

**“The process of improving a psychological, emotional, or behavioral aspect of a person’s life. The process is facilitated by a trained professional in a safe environment”**

I want individuals seeking therapy to have a clear picture of what therapy is and what it is not. I think this will help you better understand what exactly you are getting into. In addition to the definition above, it is important to note several key points:

- **Therapy is a process.** In therapy there is seldom a specific event that makes change happen. Instead therapy tends to be a process where change happens through ups and downs. Humans are very complex, and good therapy recognizes these complexities.
- **Therapy is about making improvements.** Beginning therapy does not mean that you are “sick” or that something is “wrong” with you. An individual may seek therapy to improve many areas of their life and it does not necessarily mean that the area of improvement is a “problem.”
- **Therapy requires a trained professional.** Later in this

book there will be a review of professional credentials that are required for “therapists.” Necessary training and education is essential if therapy is going to be successful. Engaging in therapy with an untrained “therapist” can be quite detrimental to a person’s emotional health.

- **Therapy requires a safe environment.** The process of therapy can be emotionally challenging and leave the participant vulnerable at times. Therapy is most successful when completed in a safe environment where the participant feels safe, emotionally and physically.

CHAPTER 2:  
HOW DO I CHOOSE A THERAPIST?  
& WHAT DO ALL THOSE LETTERS  
MEAN?!

*“The task we must set for ourselves is not to feel secure, but to be able to tolerate insecurity.”*

*~ Erich Fromm*

During Sharon’s first session with me, she noted that she had been referred to me by another client that was seeing me for therapy. She then went on to ask if I was able to prescribe medication and whether or not I was a psychiatrist. I told her that “I get that question a lot.” I let her know that I am a counselor, who does outpatient therapy, and that I am not able to prescribe medication but that I could help her connect with someone if that is what

she would like. Sharon noted that she thought all therapists were psychiatrists, but that she didn't think she needed medication. I reiterated that I didn't prescribe medication, and that what we would be working together in counseling, trying to help her with her own goals in life but that I had no agenda that she should take medication. Sharon noted that she appreciated that and we began working together on her therapy journey.

### **How do I pick a therapist? What do all those letters mean?**

The process of picking a therapist is really important, and when I was choosing a therapist to see, I felt like I didn't want to make a mistake. I didn't want to share personal information with someone who couldn't help. Picking the right therapist is important, and I want people to be able to make informed decisions in their choices.

Early in my career, I felt confused about the letters behind a professional's name. I didn't know the difference between a counselor, social worker, psychologist, and psychiatrist. Over the years I have worked with all of these professionals and we'll look at how to evaluate credentials and help you make an informed decision so that you can access therapy and get your best results.

We want to be sure that the therapist is a "fit" for you, to make this decision we will follow this three step process: 1) Find a trained professional 2) Evaluate credentials and 3) Determine if you are a good "fit" with the therapist.



Step 1:

**Finding a trained professional.**

In your local area, there are trained therapists available to help you accomplish the changes you are looking to make. Finding those professionals is the first step. Historically, “word of mouth” was how people found their therapists. Many therapists were also found through randomly looking through the phone book and maybe even trying a few. Now, with the internet, it’s easy to find a provider, read reviews, see therapists’ backgrounds, and even conduct interviews or therapy sessions online. Below is an evaluation of each of these methods:

- **Word of Mouth.** Many therapists are found via “word of mouth.” Often clients have good experience with a therapist and will share that information with you. A personal recommendation from another prior client can be one of the best ways to choose a therapist. If you have a friend who has seen a therapist that they particularly liked and found effective, ask them more about the therapist. Ask, “What did you like about the therapist?” “How long did you see the therapist?”, “What credentials does the therapist have?”, and “Do they take insurance?”
- **Internet.** The internet has made the task of finding a therapist easy—I highly recommend it. The internet allows clients to go straight to a therapist’s website and find out more about the person. Looking for user reviews or profiles created by the therapist may give you some information to help you make an informed decision before meeting with the therapist. Here are some internet resources for searching for therapists:

- [PsychologyToday.com](https://www.psychologytoday.com) PsychologyToday.com is a top rated therapy directory. You can see information about a therapist's name, credentials, philosophy, and contact information.
- [GoodTherapy.org](https://www.goodtherapy.org) GoodTherapy.org is another therapist directory that gives a potential client a perspective on the philosophy of each participating therapist in your area.
- [Healthgrades.com](https://www.healthgrades.com) Healthgrades.com is a website which focuses on client reviews. The website also gives contact info for many different types of health providers in your local area.
- The landscape of the internet is constantly shifting, and the resources of how we search for a therapist is always evolving online. There are now even online services which provide direct therapy via online platforms.

## Step 2:

### **Evaluating credentials.**

Evaluating the credentials of potential therapists can appear to be a daunting task. Professionally trained therapists tend to have a series of letters after their name that indicate their level of training and licensing. These are the types of therapists you want to look at; below is a guide to help you in your evaluation:

**Counselor:** A counselor is a licensed professional who has received at least a master's degree in counseling, has passed a state or national licensing examination, and received supervised training. A counselor is governed by the

[American Counseling Association's](#) code of ethics found at [counseling.org](#). The specific license varies by the state the counselor practices in. However the most typical type of license is a "**Licensed Professional Counselor**," typically denoted by the acronym **LPC**. Other potential acronyms that might indicate this level of licensure include: **LCPC** "Licensed Clinical Professional Counselor," or **MHC** "Mental Health Counselor." These differences in acronyms are usually relative to the state where the counselor works and do not necessarily indicate a different level of training.

**Social Worker:** A social worker is a licensed professional who has received at least a Master's Degree in Social Work, has passed a licensing examination, and received supervision. A social worker is responsible for following the code of ethics set by the [National Association of Social Workers](#) found at [socialworkers.org](#) The two most typical social worker acronyms are **LMSW** "Licensed Master Social Worker" and **LCSW** "Licensed Clinical Social Worker."

**Psychologist:** Psychologists have a doctoral degree, are licensed and certified in the jurisdiction and specific field they choose to practice in, and you may see them with the acronym **LCP** (Licensed Clinical Psychologist) after their name in addition to a **PhD** or a **PsyD**. Psychologists follow the code of ethics set by the [American Psychological Association](#) found at [apa.org](#).

**Psychiatrist:** Psychiatrists are medical doctors who also have additional education in psychology, but differentiate themselves from psychologists because they are **MDs** and have the ability to prescribe medication. Some psychiatrist perform therapy and others focus on prescription of

medication. Psychiatrists are guided by a code of ethics set by the [American Psychiatric Association](http://www.psychiatry.org) found at [psychiatry.org](http://www.psychiatry.org).

A comprehensive list of therapy related credentials is available at: [PsychologyToday.com](http://PsychologyToday.com)

Step 3:

**Determining if the therapist is a good fit for you.**

The final step in choosing a therapist is scheduling an appointment and determining if you are a good “fit” with the individual. Once you are certain the person has the necessary professional qualifications, you can determine if they are someone you feel comfortable with. Remember, finding an individual therapist who works best for you is a completely individual matter.

Research about the dynamics of therapy has shown that the relationship between the client and the therapist is the most important factor for success. If you find a therapist who you can connect with, you will find the most gain in therapy. If you find a therapist who you are unable to trust or become vulnerable with, it is important to consider seeing another therapist.

My recommendation to everyone seeking therapy is that they interview multiple therapists before beginning therapy. During these initial meetings, pay attention to your internal sense of the person’s knowledge and ability to understand you as a person. During these initial meetings, determine if you can have “confidence” that this person could help you meet your goals.

## *What to Expect When in Therapy*

Connecting with a therapist might take some time. Therapy is like other relationships, sometimes the connection is instant and sometimes it takes a little time and effort. Each of us is looking for something different in that relationship. Myself, I am looking for someone who I have confidence that they could be a “guide” for me. I know what other relationships like that have felt like, and that is what I seek.

Other people are looking for a therapist who is very gentle and that they can feel safe in their company. Other people still may be looking for someone who feels highly supportive or even motivating. We each need different things in our personal relationships and the same is true in your relationship with your therapy.

You are always the one who is in-charge in therapy! You are the customer and you are the one who is responsible for having your needs met. If you want your therapist to work with you in a different way, talk about this with your therapist. Perhaps, the therapist would be willing to utilize a different strategy or technique with you, and it will only take you speaking up to make the change. Being a proactive client will help you develop assertiveness and, in the process, get your unique needs met. Similarly, if the relationship with the therapist is “not working out,” then discuss this with them and begin searching for another choice.

As a therapist, I frequently “check in” with my clients and ask how our relationship is currently. When I am feeling conflict or issues between the two of us, I strive to

find a healthy communication on that feeling. I believe the healthy relationship between myself and the client is essential for the success of therapy.

The most important thing to remember when choosing a therapist is that it is your choice. It is that simple. Make a choice that will be best for you. The simple act of owning your decision can improve your therapeutic experience. This is your journey and the therapist is just there as a guide for a short time on that journey.

## CHAPTER 3: WHAT HAPPENS ON THE FIRST VISIT?

*“Begin, be bold, and venture to be wise.”*

*~Horace*

The first visit to a therapist will likely be the most intimidating. I have had clients ask questions like, “How do I start?” or “Where do I sit?” as they nervously enter the room. I have forgotten many of my own sessions as a client, but I still recall walking into the office of a counselor for the first time. I remember pausing on the outside of the building and almost walking away from the session before I started. We’re going to work together to get you started successfully. Your willingness to seek therapy is key, and getting through the door is the first step to an important new beginning.

Therapy begins with the first session. The first session provides the client an opportunity to express what has brought them to therapy. The first session also provides the client an opportunity to meet the therapist and determine if the therapist is an appropriate “fit.” Here is a guide of what to expect in the first session:

What to expect:

- **A safe environment.** Expect to be in a comfortable environment in an office with just you and your therapist.
- **Confidentiality.** Expect the therapist to keep everything that you express confidential between the two of you. There are certain situations where confidentiality must be broken. Those situations include when a client is at risk to hurt themselves or somebody else.
- **Questions.** The therapist will likely ask a variety of questions seeking to understand what has brought you into therapy.
- **Opportunity to ask questions.** The therapist will give you the opportunity to ask questions about whatever you like. Be prepared to ask questions. You might want to ask questions about the therapist, the process, or even the techniques that they use. Asking questions will help you establish more rapport with your therapist.
- **Clarification of goals.** Often in the first therapy session, the therapist will attempt to understand and clarify your goals. The goals discussed during this first session are not “set in stone” but rather a way to understand you and your objectives better.



## *What to Expect When in Therapy*

- **Discomfort.** The process of therapy can make people feel uncomfortable. Expressing your feelings and past history can be intimidating. Understand that the therapist is experienced at helping you through this discomfort and will work to make the experience emotionally safe for you.
- **Relief.** Most people find the process of expressing feelings, thoughts, and past experiences to be intimidating but relieving once put into words. Many clients express feeling “like a weight has been lifted” simply by expressing the reasons they want to begin therapy.
- **Paperwork.** Usually a client will have to sign paperwork before the beginning of the first session. This paperwork will have different components, but usually will contain information about confidentiality, a consent to begin the therapy process, and billing information.

In Summary, the initial therapy meeting is an important first step in the journey of emotional health. This first step will allow you to meet your therapist and clarify your goals. It will also challenge you by giving you an opportunity to express why you are seeking therapy. Most clients report apprehension and some discomfort on this first visit, but most report feelings of relief by the end of the first session.

Remember, there is a reason that you are seeking therapy. Keep this motivation in mind as you prepare for your first therapy session. This motivation will help propel you to follow through with the first meeting.



## CHAPTER 4: WHAT DOES A THERAPY SESSION LOOK LIKE?

*“Peace is a daily, a weekly, a monthly process, gradually changing opinions, slowly eroding old barriers, quietly building new structures.”*

*~ John F. Kennedy*

“I’m not sure that I know what to talk about,” said the young woman who was sitting across from me in my office. Jane noted that she hadn’t been “feeling well” and wasn’t sure if she needed therapy, but she wanted to see if it would help. She then explained that she just doesn’t know what she would talk about, and wondered aloud if she really had to come every week. As I asked a few questions about what had been going on, she spoke easily about her experience. I

then explained that our sessions together might not each be the same, but some common elements would be in each session. I also assured her that I spent my whole week in similar sessions and I could help guide her to talk and if there were times she didn't have anything to say, we could have a shorter session that day.

Jane and I worked together for 12 total sessions spread out over the course of several months. Jane did indeed have sessions where she was more guarded and found talking more difficult. During those sessions, we worked together to find ways to change it up, including doing some therapeutic art projects together. However, during most of the sessions, Jane developed the level of comfort to express her internal thoughts freely. Usually minimal guidance was necessary, and Jane created a therapeutic experience that met her own needs.

A therapeutic mentor early in my career told me that a therapist should not expect any two sessions to be the same. I give you that same advice today. Each therapy session is different, each client comes in with different issues, and each client has different goals. Also, the content of an initial session may be much different than the content of the 30th session. However, there are some general elements that happen and some potentially quite creative elements that might be added to a therapy session.

Most therapy sessions happen between a client and a therapist in a one-on-one setting. This typically consists of a client and a therapist sitting comfortably and facing one another as they talk. This happens in a safe and relaxing

environment where the client's confidentiality is carefully guarded. Note that as the client, you are always in charge of the session. If you are feeling uncomfortable with a specific element or topic, you can always stop the discussion. When in therapy, you should feel safe and supported even when being challenged.

Elements that happen regularly in a therapy session:

- **A beginning.** Therapists typically start a session by helping the client feel comfortable and relaxed. The therapist may ask questions about the client's day to day life and help the individual feel safe. A therapist will not start the session by asking the most difficult or intimidating questions, he or she will allow the client to re-adjust to the setting before the session goes "deeper."
- **Processing.** Processing is a broad term that I will use to mean understanding, exploring, and evaluating events in the client's life. Many times individuals come to therapy because they need to talk about what is going on in their life. Therapists will provide adequate time to process the significant events in the client's life and will encourage them to explore the events as necessary.
- **Skill building.** Many therapists teach skills as a part of a therapy session. These skills might include relaxation skills, stress management techniques, thought changing techniques, or problem solving strategies. Therapists have knowledge regarding specific skills that will help with specific problems. They will help match the skills they know to your personality and current challenges.
- **Relaxation.** Besides simply teaching skills, many therapists will help clients practice specific skills during

a session. These skills may include visualization, mindfulness, or meditation. I have even known therapists to add in specific elements of yoga or meditation to a therapy session when applicable.

- **Assessment.** Assessment refers to asking questions or having the client fill out questionnaires that evaluate elements such as mood, mental state, and progress. Often assessment is completed in the initial sessions but may also be reconsidered later in therapy. Therapists increasingly utilize assessment tools to help clients measure and track their own growth throughout their therapy.
- **Problem-Solving.** Often individuals come to therapy because they feel overwhelmed with the problems in their lives. Although therapists can't solve a client's problems, therapists can teach problem-solving skills and help a client "talk through a problem." Therapists are skilled at helping clients see the issues in their life from multiple perspectives.
- **Homework.** A therapy session is a short amount of time in a client's busy week. The information taught in the therapy session is often more effective if clients take this information into the outside world to practice. This is where homework comes in. Homework is given by therapists to help clients continue to work on themselves during the week. Homework might include: keeping a journal, completing specific writing projects, following through on a task discussed in therapy, organizing a schedule, practicing skills, or attending therapy groups.
- **An ending.** Therapists typically wrap up therapeutic

## *What to Expect When in Therapy*

sessions with the end of the session being more calm or relaxing. Sometimes therapy sessions bring up powerful emotions and the therapist will work to help those emotions be calm at the end of the session as the client heads back into their life. Therapists might re-discuss goals or homework at the end of the session.

### **MOST IMPORTANT:**

You as the client always have the right to end a session or change the direction of therapy. If you are becoming overwhelmed and would like to change topics, you need to express this to the therapist. The therapist's job is to be receptive to the client. Remember, if you go into therapy you are always the boss and you can change the direction of your therapy at any time!





## CHAPTER 6: HOW LONG DOES THERAPY LAST?

*“When you dance, your purpose is not to get to a certain place on the floor. It’s to enjoy each step along the way.”*

*~ Wayne Dyer*

William entered therapy having seen several therapists in the past, he noted that he had moved several times but had found the therapy process to be beneficial for him in the past. He asked me, “How many sessions do you usually do with a person?” My response was that it depends on the person. If I am a good fit for a client, I have seen people in counseling for years at a time. On the other hand, sometimes just a single session to discuss a problem has been beneficial. I asked him what he had experienced in the past, had he seen therapists for long periods of time or

shorter periods of time? He noted that he been with his last therapist for a couple years. I let him know that we would be reevaluating how long we should work together as the process unfolded, and that I would recommend he has enough therapy to be successful but not become dependent on an outside person for his mental wellness.

William and I worked together weekly for the first three months, and then decided to decrease the frequency of sessions to one session every other week. After about six months of working together, William prepared to move to another town. William and I reviewed options for therapy in his new location and he selected a new therapist to transfer to in that new town.

How long does therapy last? That was the first thing I wanted to know, and now this is perhaps the most frequent question I get in my practice. It is also one of the more difficult questions to answer. The therapy that one person receives may need to be quite different in length from another person, even if the clients both have the same base issues. As unique individuals, every client responds in their own way to different therapy styles. Some therapists utilize approaches that are shorter in duration and some therapists use approaches that are longer in duration. The effectiveness is what is most important.

Below are four time frame categories that will give you some information:

- **Single Session Intervention.** (1–2 sessions) Some clients seek therapy to look for a solution to one specific problem. Sometimes this type of therapy is all that is

allowed by EAPs (Employee Assistance Programs). This approach typically consists of either one or two sessions. If two sessions are utilized it is because the first session is to assess the problem.

- **Brief Counseling.** (4–12 sessions) One of the more popular therapeutic approaches is for a therapist and the client to draw out a specific path that extends over 4 to 12 sessions. The plan would have a specific path and specific milestones to determine when therapy will be discontinued. This brief approach is best to help an individual solve one or two life issues.
- **Extended Therapy.** (20–50 sessions) This is a typical amount of therapy for many individuals. The therapy is provided over an extended period and may last up to a year or two. This therapy may be provided initially at a weekly or bi-weekly schedule, and later the therapy may be spread out to wider intervals. This length of therapy allows for clients to make changes in a variety of areas of their life. This length of therapy allows for adequate time to test and see if the therapy is effective. This approach allows for a more natural process to evolve and tends to lead to more lasting changes.
- **Long-Term Therapeutic Support.** (Ongoing therapy for years) Some individuals want or benefit from ongoing therapy for years or even throughout their life. Perhaps a client will start with an intense intervention with a therapist for a period of a year or two and then find that they could use the support of ongoing therapy. This type of therapy might happen as infrequently as once per month depending on the client's needs. This type of therapy can be especially beneficial for

individuals struggling with more long-term issues but also individuals who just find the process highly beneficial in their lives. A significant benefit exists from a long-term relationship with a therapist. This way the therapist can be a sounding board as a client goes through different long-term life changes.

## CHAPTER 7: THERAPEUTIC APPROACHES (WHAT DO THE ACRONYMS MEAN?)

*“Life doesn’t get easier or more forgiving; we get stronger and more resilient.”*

*~ Dr. Steve Maraboli*

Morgan sat comfortably on my office couch during our first session working together. As the session got started, I asked what she was looking for in therapy. She responded that she was told she “needed to do DBT. But I don’t know what that means.” I let her know that therapy jargon can be a little intimidating, but at the core those acronyms are explaining an approach and a body of research behind the approach. I explained to her that I was familiar with DBT, but that I wasn’t a certified DBT practitioner. I spent a few minutes explaining the background of DBT, and the basic

philosophies of the approach. I explained that DBT was based on a specific approach that combined skills of thinking and mindfulness. I also explained the approach I would utilize and I wanted to make sure she fully understood the options.

Morgan decided she was feeling comfortable, and wanted to see if I would be a fit for her needs before deciding if she needed a DBT specific therapist. Morgan's therapy focused on a CBT approach that gave her improved skills in the area of healthy thinking. Morgan was seen for eight sessions over the first eight weeks, and then she had intermittent follow up sessions as necessary when she felt she needed to reinforce the skills.

I don't remember acronyms very well. When people start spouting acronyms, the part of my brain that handles memory seems to turn off. Unfortunately for me, this feature of my brain has not been helpful when trying to remember therapy approaches. It seems that many therapy approaches have been broken down into acronyms. I'm going to break those acronyms down for you real simple, the way I understand and remember them. They are all different therapy techniques and they have subtle differences one from another. A quick review of these techniques will give you some useful information to consider your options when entering therapy.

Every properly licensed therapist is trained to use specific theories and approaches to help their clients. This may be highly specialized or highly generalized depending on the school they attended and their specific focus.

Therapists may also have spent a great deal of additional training after graduate school, learning new approaches and techniques and staying current. These therapeutic techniques are often times advertised on the therapist's website, informational brochure, or even business card. Here is a brief overview of some of the most common current techniques:

### **CBT (Cognitive Behavioral Therapy)**

- Perhaps the most utilized therapeutic technique in modern psychotherapy. Largely based off the work of psychologist Aaron Beck.
- The premise of the theory is that individuals can change their way of thinking to change the way they feel.
- The approach is here-and-now focused. That is, CBT therapy does not typically include a great deal of exploration of the past.
- Strengths of the approach include the specificity of skills that are taught. Clients will learn specific ways to address underlying thinking patterns.
- The approach is highly researched and shows significant gains for a wide range of individuals, including individuals with depression and anxiety.

### **DBT (Dialectical Behavioral Therapy)**

- A popular form of psychotherapy originally developed by Marsha M. Linehan to treat people with borderline personality disorder. The theory has grown over the years and been applied to an

increasing range of challenges.

- DBT has similarities to CBT and shares many of its features. One specific addition that DBT made was the focus on “mindfulness.” Mindfulness is related to physical relaxation and meditation.
- Other key components of DBT include focusing on distress tolerance or being able to manage stress despite ongoing stressful situations.
- Current research does show that DBT can be a beneficial therapeutic approach for a range of issues that a client may have.

### **Psychoanalytic**

- The original “talking cure.” This is the approach developed and championed by Sigmund Freud.
- Psychoanalysis is not nearly as popular as it once was, as only a small percentage of modern therapists are primarily psychoanalytic.
- The therapeutic process is focused on going into the past to uncover events or situations that have happened and helping the client resolve the emotional damage of those past events.
- The approach can take a significant amount of time and can go on for many years.

### **NLP (Neuro Linguistic Programming)**

- NLP is a psychotherapy approach developed by Richard Bandler and John Grinder.
- NLP is an approach to therapy that is highly focused



on going forward rather than backwards.

- NLP utilizes specific visualizations, phrases, and strategies to make changes.
- The approach is focused on the specific strategies that make a difference for an individual and nothing else.
- NLP is widely utilized in industries other than therapy and has become a staple of the self-help industry as a whole.

### **Client-Centered Therapy**

- An approach to therapy developed by Carl Rogers. This approach is focused on the client leading the way in therapy.
- This approach focuses on the therapist creating a highly supportive environment in which the client can grow.
- This approach is the backbone of most modern therapy and develops a high focus on concepts such as empathy and unconditional positive regard.
- This approach is often combined with other approaches in modern therapy.

### **Art Therapy**

- This is a therapeutic approach where a therapist utilizes art as a modality of therapy.
- Approaches can vary widely but utilize artistic therapeutic expression through a medium such as clay, painting, or ceramics.

- Art therapy can be a unique and powerful way to engage in therapy.

### **Dance Therapy**

- Another approach that is different from traditional “talk therapy,” dance therapy utilizes dance as a modality to create change.
- The process of body movement can be powerfully useful to release trapped emotions and help the client increase internal strength.
- Dance therapy and art therapy are significantly different from the other approaches listed in this book, but both provide amazing creative expressions. These approaches may be utilized in conjunction with traditional talk therapy or as stand-alone approaches. Remember, no two people have the same path to health.

### **EMDR (Eye Movement Desensitization and Reprocessing)**

- An approach to therapy which focuses on eye movements to help a person’s brain heal following traumatic events.
- This is a newer method usually utilized to address symptoms associated with PTSD.
- A method developed by Francine Shapiro in the late 1980s, the method focuses on moving a client’s eyes from side to side while recalling traumatic events.
- A therapist must go through specific additional training to be able to utilize this technique. If a

therapist is practicing EMDR, a client should ask the specifics regarding the amount and type of training that led to certification.

- Note that therapies that focus on traumatic events can be more triggering or emotionally challenging. Clients should ensure they have a high level sense of safety with the therapist in this type of work.

### **Integrative Therapy**

1. The majority of therapists today would consider themselves integrative. Integrative simply means that they would utilize a number of different theories and techniques to provide therapeutic support to a client.
2. An integrative therapist may still have a specific strength or specialty in one area, yet utilize a range of theoretical tools to meet your goals.



## CHAPTER 8: PAYING FOR THERAPY

*“Price is what you pay. Value is what you get.”*

*~ Warren Buffet*

Zane came into the first therapy session wearing a shirt and a tie, he quickly sat down in a business-like fashion when he came into the office. Before I could ask him any questions or learn about him, he quickly asked, “I just want to know how much this is going to cost.” As I always offer a free initial consultation, I let him know that today’s session was free regardless so that he can be well-informed of what he is getting into. He followed up by stating, “No, I don’t have insurance and I want to know how much the whole thing is going to cost.” I let him know my hourly session rate is \$120.00 per session and that because of the nature of therapy, sometimes I work with people as few as one or two times, and other times we work together for years.

As the discussion with Zane continued, he let me know that he had been recently divorced. I let him know that many people find the first year after a divorce to be very difficult. I made it clear that every person was different, but in similar situations people had found it beneficial to have the support of a therapist for that first year. I noted that the cost of therapy isn't just what is spent, but what other benefit it brings to someone's life. The price is one thing, but to truly understand the cost a person needs to understand the potential impact of not going to therapy. Zane continued in therapy, he was seen twice a week for three months, once a week for the rest of the first year, and then decreased to monthly for a second year. He discharged from therapy very close to two years into therapy.

As you think about entering therapy, you might be wondering, "Is it worth it?" Therapy costs money, with individual sessions usually costing over \$100.00 per visit, the decision to put out that money is an important decision. While there are many different approaches to paying for therapy, at the end of the session there is going to be a bill. That bill may be inconsequential or may be a very large financial step for you as an individual. The most important thing that I want my clients to get is value for their money. I want clients to see the worth of their psychological and emotional health. As we review how to pay for therapy, consider for yourself how you would know if you are getting the value you need out of therapy.

The value one receives from therapy can be quite a bit different from another. I have worked with clients who could no longer hold a job because of their mental health symptoms. The process of developing mental wellness was

able to get the person back to a point of being able to hold a job and, therefore, was financially advantageous. I have also worked with other clients whose developing mental wellness and improving their relationships or communication skills may not have the same financial advantage, but it made their day-to-day experience that much better. These small improvements to health change over time and may also have unknown financial advantages, as the person may have prevented losing a job or relationship, which otherwise may have a tremendous expense.

Putting a dollar amount on an individual's perception of value is always difficult. If we ask 100 people the same question: "How much would you spend on a pair of shoes?" we might get a wide range of responses. Some would see value in a \$250.00 pair of shoes and others may find \$100.00 to be the absolute max they would pay for shoes. The one common component in the shoe discussion is that each person would be adding a pair of shoes to their wardrobe. When looking at therapy, you are buying a process, a process which also takes work on your part. A process, where the role of the client is just as important as the work of the therapist.

A better comparison is exercise and nutrition, if you spend time and money on exercise today, you will still need to exercise in the future. If you spend money on nutritious food, it will require your expense now but also your investment ongoing. This ongoing investment in exercise and nutrition will lead to a financial value that is not always apparent, but a person may be significantly preventing additional expenses by investing in their physical health.

I challenge you to invest in your mental wellness, whether it is through therapy, counseling, meditation, yoga, or other meaningful activity. This investment may be the best investment you make in yourself.

### **How much does therapy cost?**

- The price of a therapy session can cost as little as \$80.00 in parts of the country, and as much as \$500.00 per session depending on the provider and level of expertise.
- Therapy can vary in cost widely across the United States. At the moment that this book is being written in 2021, it is common to see a therapy session costing between \$100.00 and \$200.00.
- Some therapists will offer discounts if someone pays cash, and some therapists will offer discounts if someone buys a package of therapy sessions.
- There are still therapist who don't take insurance.

### **Insurance:**

- The cost of therapy is often covered by insurance plans. These plans are quite different from one to another in the United States, and typically are applied after a specific deductible is met. When insurance can be applied to therapy, the insurance co-pay by the client may come down to a cost of \$20.00 to \$40.00.
- There are complications that can impact insurance as your insurance provider may require a diagnosis or may limit the number of sessions. Also, while insurance companies are required to cover psychotherapy, they



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might not cover specific credentials that a therapist has.

- It is essential to know the details and limits of your insurance plan. Clients sometimes start therapy assuming that something is covered and then get an unexpected large bill months later. Insurance plans in the United States are quite overly complicated and require customers to be actively engaged to know how to utilize their plan.
- Some insurance companies require a referral by a medical doctor to receive therapy.
- Insurance can be quite helpful to provide affordable therapy, but there can be barriers added through the process.

For some people who are entering therapy, this level of investment in themselves is a new experience. When people do start paying for therapy, they may note that it is expensive. However, I have experienced little “buyer’s remorse” regarding therapy. The process of investing in one’s mental health is a signal to our sub-conscious that we do indeed care about ourselves and don’t want to go down the same path anymore and we’re willing to commit ourselves and our money to wellness.



## CHAPTER 9: WHAT TO EXPECT AFTER THERAPY

*“If you own this story you get to write the ending.”*

*~ Brené Brown*

Fred and I had been working together for a couple of years, Fred had initially come to therapy due to a significant challenge with obsessive thinking and acting. Fred had initially been struggling with obsessively pulling on his hair, to the extent he had lost a significant amount. Fred had worked hard in therapy and made significant changes in our first months together, the following year was largely based on maintaining the thinking and healthy behaviors necessary to support his mental wellness. It was clear that Fred had met his initial goals. During a session together, I let Fred know that we should work towards discharging him from therapy.

Fred seemed surprised and a little shaken when this was initially discussed. I let him know that the discharge didn't need to be immediate, but would happen when he was ready. We reviewed goals of why he had entered therapy and noted the significant progress he had made. Fred and I worked together over the coming weeks to build a discharge plan which included specific guidelines for when he would need to return to therapy. Fred did need to come in for what he called a "tune-up" a couple years later, but he only came in for a couple sessions at that point. Fred had worked through the course of treatment that was necessary for him and he had moved on to manage his own mental wellness.

When you begin therapy, I want you to envision the end of therapy. What will you get out of it? What will have changed in your life and how will you know that it worked? Try to imagine as much as you can about this state, how would you be feeling about yourself? What would you be thinking and what would have changed in your life? Visualization is a powerful tool and envisioning this success can be a driving force through the therapy process, and it will help you know when it is time to end therapy.

The next steps after therapy are just as important as the beginning. The ending of therapy may be more of a break, a time where you continue your mental wellness without therapy being a component. Whether the ending of therapy is a break, or a true ending to therapy, the next steps are still particularly important to ensure continued mental health.

Discharge from therapy should begin with a conversation between you and the therapist, it shouldn't

come as a surprise but an ongoing discussion that reviews completed goals and evaluation of setting new goals. When a therapeutic relationship is done well, the therapist and the client have a clear path to the point where they will discharge, noting that life challenges may present more obstacles than expected and may require a renegotiation of that plan.

As the point of discharging approaches, a therapist and a client will work on a discharge plan together. Elements of that plan will likely consist of community resources, ongoing self-directed goals, and markers for when counseling should resume.

Here are some key points to consider when discharging from therapy:

1. **Community resources.** What community resources will be utilized to support ongoing success? For example, will specific groups or activities be a part of your mental wellness plan moving forward? Also, are specific community groups such as a 12-step meeting helpful in keeping your goals moving forward?
2. **Self-monitoring.** One of the most essential goals following discharge is the need to self-monitor. Throughout therapy, a therapist and a client will often times check in regarding how the last week or days have gone. Without the therapist in the weekly discussion, it's essential to continue to self-monitor how you are feeling about your mental wellness. One simple way to do this may be through journaling.

3. **Warning markers.** When I am working with a client, we setup “warning markers” that let the client know when they should return to therapy. A warning marker is a specific behavior, thought, or action that would be a warning that returning to therapy may be needed. For example, with one client, we noted that therapy would be indicated if he missed work due to feeling depressed. For another client, we set a goal that he would need to return to therapy if he contacted his ex-girlfriend, and for another it was necessary for him to return if he had a drink of alcohol. These warning markers will be different for each person, but can be a key part of a discharge plan.
4. **Agreements.** In a discharge plan, a client may make certain agreements with themselves. These agreements are ways that they are dedicated to doing things differently as they move forward. These agreements could include self-care activities, physical fitness, or relationship goals.
5. **Support systems.** Evaluating support systems will continue throughout therapy, but especially at discharge it is important to discuss what types of support are available to the client as they leave the therapeutic relationship.

Ending therapy will look different for each person. In the therapeutic relationship, it is acknowledged that every client is different. The key to exiting therapy is that it should be done intentionally. Too frequently, clients are feeling better and simply stop going, making the process that much less effective. An ideal outcome of therapy is that clients

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work to set intentional goals and set up intentional processes to meet those goals.

If you are feeling like it is a good idea to move towards discharging from therapy, have that open and honest conversation with your therapist. A quality therapist will be comfortable with that discussion and will be able to serve as a guide as you exit from therapy.





## CHAPTER 10: WHAT TO EXPECT IN THERAPY AND WARNING SIGNS

*“The story of the human race is the story of men and women  
selling themselves short.”*

*~ Abraham Maslow*

I had been working with Brett for a few months, and during one of our sessions he seemed particularly nervous. I noted that he seemed more uncomfortable than usual and I wondered if there was something on his mind. Brett let me know that there was something he was nervous to talk about, and he proceeded to tell me that his past therapist had called him after midnight this past weekend. He went on to say that he had picked up the phone and that the past therapist had seemed drunk on the other side of the phone. He said that the therapist just told him “what a great guy he

was and just wanted to let him know that,” he noted that the call was brief but made him feel awkward.

I explained to Brett that there are limits to the professional nature of our relationship as therapists, and contacts like this are inappropriate. It was clear that Brett was experiencing increased distress because this therapist had blurred the professional and personal relationship. This type of blurring or “dual relationship” can be detrimental to client success. I explained that while a therapist-client relationship can be a powerful connection, it’s important that the relationship stays inside the professional boundaries. Brett and I discussed what he should do next, Brett decided to write an email, with my support, to the past therapist. The email was short, and it assertively re-established the boundaries that Brett wanted to maintain, including no contact outside of therapy sessions. This clarity helped Brett feel better and the past therapist respected the boundary.

Throughout this book, I have lined out the ideal path to individual therapy. We have reviewed how the process would most typically unfold. I would be remiss not to mention that things can go poorly and it is possible to come in contact with an unethical therapist. I want to be sure that you know what to look for and how to react if you come in contact with someone who is unsafe in the therapeutic relationship.

The process of therapy is one where a person gives significant vulnerabilities to a therapist. As in all areas of our society, there are also bad actors in therapy. Bad

therapists are essentially people who are filling their own needs versus working for the client. While those situations are uncommon, it is important that you have the discernment to watch out for warning signs if you were to encounter an unethical therapist. My goal is to leave each client to feel more prepared of what to look for in terms of the good and the bad.

**Warning Signs:**

1. The therapist talks too frequently about himself or herself. This process is about you as the client, and if a therapist is spending a considerable amount of time talking about themselves, that is a concern.
2. The therapist divulges too much deep personal information to the client. Therapists are expected to utilize self-disclosure intentionally; they use it as a part of the client's therapeutic journey. If a therapist is too quick to talk about their own personal life, it is a warning sign.
3. If the therapist asks you to engage in activities with them outside the therapeutic setting, that is a deal breaker. It goes beyond a warning sign, and calls for immediate discharge from the relationship when a therapist asks a client to do something with them outside the therapeutic setting. This does not include an invitation to other therapeutic activities such as group therapy, workshops, or even particular intervention activities. However, if the therapist is inviting you to dinner, out for drinks, or inviting you to come over to their house, then that is a significant violation.
4. The therapist breaks confidentiality. One sacred

boundary in the relationship is that the therapist will keep your personal information confidential from other people. This includes keeping the information private from family members, other organizations, and any personal contacts. A break of confidentiality is grounds to immediately stop working with that therapist and consider reporting an ethical violation.

5. The therapist is someone you already know personally. It's not uncommon for people to ask a person they know to be their therapist. I have frequently had friends either jokingly or seriously ask if I could see them for therapy. I always quickly say that I'm flattered but they need to see someone they don't know and I give them some recommendations. If you know the person in another setting, seeing them as a therapist is not an option.

## CHAPTER 11: BEGIN TODAY

*“If you change nothing, nothing changes.”*

*~ Tony Robbins*

Talk therapy works and I want you to try it. If you haven't ever gone through therapy before, I understand your concerns and potential apprehension. I want you to consider for a moment whether or not you have ever had a significant change in feelings from a meaningful conversation, I bet that you have. I think that there is something innately powerful about the conversations we have with others. When we look at talk therapy, we start a process with a person who is specifically trained on how to make this process meaningful for your individual growth. Working with a trained professional gives you a guide that can be an agent of change as you move forward in life.

When I first considered therapy, I hesitated and delayed calling a therapist. Do you think things got better? No. My internal mental state became worse and moved from a level of high stress to a level that I was clinically depressed. I often wonder what would have happened if I would have entered therapy when I first thought about it. I find that many clients I work with have the same experience, they have looked up a therapist and considered beginning when things were getting bad, but not so bad. Then they put off attending therapy until things become worse emotionally. I would like to help people enter therapy earlier and more frequently, versus waiting until their emotional state has devolved.

Whatever state you are in now, if you are considering therapy, I want you to act. Newton's Law of Motion is that objects at rest will remain at rest. If you stay inactive, you will remain stuck. If you do what you have always done, you will get what you have always gotten. If you change nothing, nothing will change.

Take action today.