

## Lesson 1 – Case Study – Initial Intake Interview

**TLO:** Recognize techniques that contribute to a successful intake interview.

**ELOs:** Identify basic attending skills.

Identify the principles of confidential communication.

Determine if a given conversation is protected by the principles of confidential communication.

T = Therapist/Counselor

C = Client

Before the session starts, the chaplain assistant has the client, a married 27-year-old E-5, fill out a basic intake sheet that gathers a page of personal and family data and has a list of possible issues he might want to address. The client has also signed an informed consent form that explains the basic elements of a chaplain's "total confidentiality." The chaplain has reviewed the paperwork briefly so he has an idea who he is about to meet. The chaplain goes out to the chaplain assistant's office to greet the Soldier.

T: It's Steve, right?

C: Yes, sir.

T: I'm Chaplain David Johnson. You work down in the motor pool, right?

C: Right now I do. That's part of the problem.

T: Okay, well, come on into my office and have a seat there. [Chaplain closes the door.]

T: I see you signed the privacy act statement, which is the first thing we need to go over. This is the most confidential place you can get counseling; you have total confidentiality. I won't report anything you say here to anybody. Having said that, if you want information to be released from this session, the only way we can do it is with a written release. That includes informing people that you are coming to see me for counseling, such as another counselor or an individual in the chain of command. For any of that, I would need your written permission. You are good with that?

C: Yep.

T: Great. I see you are married, and your wife is from Germany. Is she German by birth?

C: She was born in Austria, actually. But her family is German.

T: And I see that you are both Catholic.

C: I was born and baptized Catholic. My stepdad insisted on it. But I don't really practice any religion.

T: Well, I am a Christian pastoral counselor, and we will only bring as much religion into this as you want. I like to pray in our sessions, but I'll leave that up to you.

C: I don't really practice religion.

T: You just want help with these issues.

C: Yes. My platoon sergeant and I were talking about stuff and he recommended you.

T: I'm glad you are here. It's a big step to getting healthy and addressing these situations affecting you and your relationships. What brings you in to see me?

C: Well, my wife is pregnant, due in June with a little boy, and we're very excited. But it's brought back some feelings and emotions from my childhood history, and I've felt pretty depressed. I am also frozen in my rank and position, so that's weighing on me as well. I went to Mental Health for some evaluations and they also referred me to you.

T: How are you and your wife getting along?

C: Very well, actually. We got married five years ago and we get along great. She works, has a great job, and we have almost no arguments. Except she is pretty picky about some things now that she is pregnant.

T: Pregnancy can be a tough time for some.

C: She's doing OK.

T: What would make this session go well for you?

C: I guess I am here for information.

T: Counseling can be a hard process, especially initially, as you deal with issues that may be hard. I want to help you deal with your issues, but the improvement will rely mostly from within you. You recognize that you've got some issues at work and some things scaring you about expecting the baby, re-opening some wounds from childhood. I want to help and give you some skills and encouragement to help you, but you'll do all the hard work. How long have you been feeling this way?

C: Really just recently. When I found out I might get the job I wanted, and then it closed, and then I got moved to a new section with some incompetent people. So now I'm working a job I don't like, I'm trying to deal with problem Soldiers and a boss who is worthless, doesn't know what the hell he is doing, and now I'm stuck here for at least a year. It's very frustrating.

T: So you feel like your life is on hold right now.

C: My life *is* on hold, there's no feeling involved. With all that, it is really hard.

T: Have you thought about hurting anybody?

C: No, I'm a pretty relaxed and calm person. I've never hurt anybody, ever.

T: Well, uh, you put on your form that you are dealing with issues with your parents.

C: It's my mom actually. She's been on drugs a lot of her life and burned most of her relationships. She was really hard to make happy and spanked the hell out of us as kids.

T: She abused you?

C: Well, once she threw a butcher knife at me and it stuck in the wall. She also liked to throw shoes, big clog heels, but she never left marks. She told me a lot that I wasn't worth anything.

T: And you believed her?

C: No, not really. I did well in school, made good scores, and spent most of my childhood trying to prove her wrong. Or I'd lie to cover up anything I messed up. I didn't buy that one. But "you'll never amount to anything" stuck with me for awhile. That was hard. [Pause.] I guess that's why I joined the Army.

T: Wow [pause] that hurts a lot. [Pause.] How do you think that impacts your relationship now with your wife?

C: [Pause.] I don't think too much, but my wife might say different.

**Case Study Discussion Questions:**

1. What did you like about how this brief interaction went?
2. What did the chaplain say or do that might have helped the Soldier to identify that this was a place he could receive help?
3. What was "pastoral" about this interaction?
4. Looking at this brief interaction, what do you think the Soldier is most likely to remember?
5. If you were this chaplain's supervisor and were reviewing this interaction, what is one thing you would encourage the chaplain to say or do that would make this even more meaningful for the Soldier, or would better help him to take the next step in accessing help?
6. Is there a particular passage of scripture or wisdom that comes to your mind after reading this?
7. Looking at this interaction, what is one thing that you want to take away to guide your future care for Soldiers and family members?