

• DR. PATRICIA FOX •
• CLINICAL PSYCHOLOGIST •

GETTING THE MOST FROM THERAPY

1. Change takes time. Research shows that 50% of clients need 13 to 18 sessions to recover from issues and concerns that bring them to therapy.
2. I have a job as a therapist and you have a job as a client. One of my responsibilities is to define our roles and expectations of each other.
3. Help me understand your preferences in our work together. For example:
 - o Do you prefer that I be more directive and structured or more of a listener and less structured?
 - o How ready are you to change?
 - o How do you cope with difficulty, e.g., withdraw (internalize), lash out (externalize), or a combination?
 - o Do you have a preference for a type of therapy?
 - o How might my gender, age, and ethnicity impact your therapy?
 - o How you like me to incorporate your culture, values, and religion/spirituality into therapy?
4. You should leave our first session (called the initial evaluation) feeling that we can work together and that your problems can be solved. You should come away with an understanding about how therapy will help YOUR concerns.
5. You will typically experience improvements in your general sense of well being early in the first few sessions, followed by a later reduction in symptoms and increased functioning. It's important to stick with therapy, even as you begin to feel better.

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6. Sometimes therapy is hard and you will leave a session feeling not so great. Think of this experience as “feeling better vs. getting better.”

7. I will work to gain your trust. This is known as the “therapeutic alliance.” You are more likely to stay in therapy and to recover from your problems if a therapeutic alliance is formed early in the process. If you don’t feel comfortable with me, I am happy to make a referral to another mental health professional.

8. I will regularly monitor your progress. I will ask you to complete objective symptom measures; regularly reviewing the therapy goals; and, by asking you for feedback about your progress.

9. We begin planning for termination when therapy goals are set. Common goals include getting relief from symptoms and handling life problems with greater ease and confidence. Termination is the realistic ending of treatment.

10. Once we agree that the therapy goals have been met, termination occurs. Ending the therapy relationship can be hard and sometimes people avoid this event. I encourage you to stay in treatment and to experience the process.

11. Sometimes, termination happens for other reasons. For example, continuing therapy may not be beneficial to you. Or, therapy gets interrupted due to a change in work schedules; a multiple relationship may occur; or, one of us is moving away. If so, I will provide referrals to another psychologist or mental health professional.

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