

PsychNG Services

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STARTING OUR WORK TOGETHER: THE CLIENT INFORMATION BROCHURE

Welcome to our practice. We appreciate you giving us the opportunity to be of help to you.

This brochure answers questions that clients often ask about therapy. We believe our work will be most helpful to you when you have a clear idea of what we are trying to do.

This brochure contains important information about

- our credentials
- our theoretical approach to therapy
- therapeutic goals
- what our methods of treatment look like
- the risks and benefits of therapy
- appointments and fees
- confidentiality
- and other important areas of our relationship.

This brochure is yours to keep. Please read all of it. Mark any parts that are not clear to you. Write down any questions you may have, and we will discuss them at our next meeting. When you have read and fully understood this brochure, we will ask you to sign it at the end. We will sign it as well as make a copy so we each have one.

CREDENTIALS

PsychNG Services was founded by Olohuntoyin Alatise, a clinical psychologist who holds a Master's degree from the University of Lagos in Clinical Psychology, Health Psychology from the University of Stirling and ongoing PGDip in Cognitive Behavioural Therapy from Queen Margaret University, Edinburgh.

She completed her internship at Federal Neuropsychiatric Hospital, Yaba.

She is a member of the International Society of Substance Use Professionals, Australian & New Zealand Mental Health Association, an Affiliate member of the American Psychological Association and the Nigerian Psychological Association.

OUR THEORETICAL APPROACH

We are a humanistic therapists:

We believe we all have within ourselves the potential to know and trust ourselves more fully; to develop healthier, more mature, and more secure relationships with the important people in our lives; and to develop greater competence in dealing with the world.

We are existential therapists:

We believe we can deepen our capacity for self-awareness, develop the courage needed to make authentic choices, and find productive and creative ways to work within our specific circumstances to create unique, engaged, and meaningful lives.

We are attachment therapists:

We believe we thrive best when we develop secure emotional bonds with those most important to us, bonds characterised by emotional accessibility, responsiveness, and engagement.

And finally, we are integrative therapists:

We continue to study (and teach) the major systems of psychotherapy, and we integrate ideas and procedures from these systems as they are congruent with our humanistic, existential, and attachment base and as they prove useful to the needs of our individual clients.

GOALS AND APPROACH

Working from the values of collaboration, respect, and compassion, we help our clients;

- solve or better manage their problems
- develop their opportunities
- heal from emotional wounds
- develop a stronger, more integrated sense of self
- develop a greater sense of purpose and agency
- strengthen their primary relationships, making them more loving and secure
- realize a greater sense of emotional well-being
- and create a more meaningful, engaged, and vital life.

When working with individual clients, we use an integrative, empirically informed, three-stage model of therapy.

- **Exploration.** In this stage, clients explore their thoughts and feelings about their most important concerns.
- **Insight.** In this stage, clients develop deeper understandings of themselves and more helpful perspectives on their concerns.
- **Action.** At this stage, clients consider acting on their new understandings, exploring the changes they might want to make and developing focus, commitment, and courage.

This is the typical structure of a therapy hour:

- We greet each other.
- We may summarise our last session.
- Together, we determine a focus for our session.
- We work on that focus, structuring our work through the stages of exploration, insight, and action.
- We summarise our work.

- And we may develop an “action step” for the coming week.

When working with couples, we use Emotionally Focused Couple Therapy (EFT). EFT is an integrative therapy that helps couples transform distressed relationships marked by fear, anger, and hurt into secure relationships marked by emotional accessibility, responsiveness, and engagement. It is relatively short-term (14 to 30 sessions), structured, and one of the few couple therapies that are recognised as empirically validated by the American Psychological Association.

For anger management and mood disorders such as depression and anxiety, we use Cognitive Behavioural Therapy (CBT). CBT is a form of talk therapy that can help you manage your problems by changing the way you think and behave. If CBT is recommended, you'll usually have a session with a therapist once a week or once every two weeks. The course of treatment usually lasts for between 6 and 20 sessions, with each session lasting 30 to 50 minutes.

In our first couple of sessions, we will talk about the concerns that brought you into therapy, some of the conditions in your life, the important relationships in your life, your experience with previous therapists (if you have had previous therapy), and your goals for therapy.

After these first several sessions, we will plan our work together. In our treatment plan, we will list the areas to work on, our goals, the methods we will use, and the time and commitments we will make. We expect us to agree on a plan that we will both work hard to follow. From time to time, we will review the plan and make any needed changes.

Psychotherapy is not like visiting a medical doctor. It requires your very active involvement. It requires your best efforts to change thoughts, feelings, and behaviours. For example, we will want you to tell your therapist about important experiences, what they mean to you, what strong feelings they bring up in you, and how you might want to respond to them.

At times, an important part of your therapy may be practicing new skills that you will learn in your sessions. You will be asked to practice outside your meetings, and we will work together to set up assignments or “action steps” for you. You might be asked to do exercises, try out “behavioural experiments,” keep records, and read to deepen your learning. In addition, you will probably have to work on relationships in your life.

Sometimes, change may be easy and quick, but more often it will be slow and frustrating. There are no instant, painless cures and no magic solutions. Lasting change comes from hard, consistent work. We like to think of progress as emerging from taking small steps after small steps.

Most of our clients see therapists weekly for a 50-minute session. When we come near to the end of therapy, many of our clients begin seeing their therapist only once or twice a month.

Ending therapy needs to be done carefully. It is your right to end therapy at any time. If you do wish to end therapy “early,” We will ask that you agree now to meet them for at least one more time. session to review our work together. We will review our goals, the work we have done, the progress we have made, and any future work that needs to be done. If you would like to take a “time out” from therapy, we should discuss this too: Talking about such a “time out” can make it more helpful.

About 6 months after our last session, we will send you a brief set of questions. These questions will ask you to look back at our work together, and sending them to you is part of our duty as a therapist. We ask that you agree, as part of entering therapy with us, to return this follow-up form and to be very honest in what you say in it.

THE BENEFITS AND RISKS OF THERAPY

For 50 years, social scientists have conducted many thousands of studies to examine the question of whether or not psychotherapy works. When they examine the collective outcomes of these studies, they conclude that psychotherapy does indeed work. From these studies, we can confidently say that most people who engage in psychotherapy benefit from it, making lasting changes in the way they think, feel, and act, and achieving valuable and lasting outcomes in their lives.

However, as with any powerful treatment, some risks do exist. You should think about both the benefits and risks when making any treatment decisions. For example, clients can experience such uncomfortable feelings as sadness, fear, anger, guilt, despair, or shame. They may recall unpleasant memories, and these memories may bother them at work or in school. Clients may encounter people in their social circles who mistakenly judge anyone in therapy as weak, seriously disturbed, or perhaps even dangerous. When undergoing therapy, clients may have problems with people close to them, especially people who do not want to see them change or reveal family secrets. Therapy may disrupt a marital relationship and may sometimes even lead to divorce. Sometimes too, after the beginning of treatment, clients’ problems may temporarily worsen. Almost always, psychotherapy involves feeling, thinking, and acting in new ways, ways that may feel quite challenging. Finally, even with our best efforts, there is a risk that therapy may not work out well for you. In fact, about 5-10% of people who enter therapy are worse off after therapy than before.

Yet we know that about 70% of clients truly benefit from therapy. Through therapy, they reduce their feelings of depression, anxiety, anger, and shame; increase their feelings of emotional well-being; resolve or better manage their problems; more fully develop their opportunities; increase their coping skills; develop a stronger and more cohesive sense of self; develop stronger and more resilient relationships; and create a more meaningful, engaged, and vital lives.

Please note that research has found that the best predictor of whether or not therapy will work is

whether the client feels deeply accepted, respected, and understood by his or her therapist. If you feel this with your therapist about your third session, you can both feel hopeful that your work together will indeed prove helpful to you. If you do not feel this from your therapist, we will need to talk about it and perhaps work to find a therapist who may be a better fit for you.

Please realise that we do not take on clients we do not think we can help. Although we cannot offer you guarantees, we anticipate that as we roll up our sleeves and work hard, you too will experience these benefits, and so we enter our relationship with a sense of realistic optimism.

ETHICS AND LAWS

We follow the code of ethics principles and code of conduct developed by the Nigerian Psychological Association.

CONSULTATIONS

If you could benefit from a treatment we cannot provide, we will help you to get it. You have a right to ask about these other treatments, their risks, and their benefits. Based on what we learn about your problems, we may recommend a medical exam or the use of medication. If we do this, we will fully discuss our reasons with you, so that you can make a decision that is right for you. If you are treated by another professional, we will coordinate our services with him or her and with your own medical doctor.

If for some reason, treatment is not going well, we might suggest you see another therapist or another professional for an evaluation. As a responsible organisation with reputable and ethical therapists, we cannot continue to treat you if our treatment is not working for you. If you wish for another professional's opinion at any time or wish to talk with another therapist, we will help you find a qualified person and will provide him or her with all the needed information.

WHAT TO EXPECT FROM OUR RELATIONSHIP

As a professional, we will use our best knowledge and skills to serve you. This includes following the standards of the Nigerian Psychological Association. In your best interests, the NPA puts limits on the relationship between a therapist and a client, and we will abide by these.

A psychologist is trained to practice psychology—not law, medicine, finance, or any other profession. Therefore, we are not able to give you good advice from these other professional viewpoints.

Second, the ethical codes of conduct require us to keep confidential what you tell your therapist confidential. You can trust us not to tell anyone else what you tell us, except in certain limited situations. We explain what those are in the “About Confidentiality” section of this brochure.

As part of confidentiality, your therapist may not say hello or talk to you very much if you meet socially, outside our office. His/her behaviour will not be a personal reaction to you; rather, it is a way to maintain the confidentiality of our relationship.

Third, in your best interests and following the NPA's standards, we can have no other role in your life beyond being your therapist. We cannot be close friends with you or socialise with you at parties, weddings, or family gatherings. Your therapist can never have a sexual or romantic relationship with you, either during or after the course of therapy. And finally, we cannot have a business relationship with you other than our therapy relationship.

Fourth, if you ever become involved in a divorce or custody dispute, we will not provide evaluations or expert testimony in court. You should hire a different mental health professional for any evaluations or testimony you may require. This position is based on two reasons: (a) our statement will be seen as biased in your favour because we have a therapy relationship, and (b) the testimony might affect our therapy relationship, and we must put this relationship first.

Fifth, we ask you to agree to come to therapy sober. If we suspect that you are intoxicated, we will ask you to discuss this with your therapist.

ABOUT OUR APPOINTMENTS

The very first time we meet with you after reserving a time slot via our online appointment schedule page, we will need to give each other some basic information. We will usually meet for a 50-minute session once a week. As we wind down therapy, we may meet less often.

We will tell you at least two weeks in advance of your therapist's vacation or any other time you cannot meet. Please ask about your therapist's schedule when making your own plans.

When we make an appointment, we commit to each other. We agree to meet on a given date and time. If your therapist is ever unable to start on time, we ask for your understanding. We also assure you that you will receive the full-time we agreed to. If you are late, we will probably be unable to meet for the full time, because it is likely that your therapist will have another appointment after yours.

If you need to cancel an appointment, please call at least 24 hours before the appointment, earlier if possible. If you need to cancel a Monday appointment, please do so no later than Thursday morning. The therapist makes a living, in part, by doing therapy, and it is very difficult to fill a missed appointment if given short notice. Refund for cancelled session(s) may attract 20% charge on deposit.

Except for unpredictable emergencies, regular fees are applicable for a missed session, and this is painful for both of us.

Rescheduling or missing therapy session(s) for three consecutive times may require a referral to another therapist and a possible forfeiture of the therapy fee.

When your therapist is on a trip, on vacation, or sick, we will let you know in advance and will give you the name of another therapist whom you can see in an emergency.

FEES

Payment for services is an important part of any professional relationship. This is even more true in therapy: One treatment goal is to clarify relationships and the duties and obligations they involve. Please pay for each session or the whole session ahead of therapy. We have found that this arrangement helps us stay focused on our goals, and so it works best.

Our current fees are as follows. We will give you advanced notice if any fees change.

- *Regular therapy services*: N30,000 for two virtual sessions of 50 minutes/session and six sessions is N150,000 for face-to-face sessions. Other fees can be found on the appointment page <https://www.psychng.com/appointment-schedule>
- *Extended sessions*: Occasionally, we may find it better to continue a session past 50 minutes rather than stop or postpone work. When this extension is more than 10 minutes, we will tell you, because sessions that are extended beyond 10 minutes will be charged on a prorated basis.
- Telephone consultations may be suitable or even needed at times. If so, we will charge you our regular fee prorated over the time needed. If we need to have long telephone consultation with other professionals as part of your treatment, we will bill you for these at the same rate as for regular therapy services. Of course, there is no charge for calls about appointments or similar business.
- *Psychological testing services*: N50,000. Psychological testing fees include the time spent with you, the time needed for scoring and studying the test results, and the time needed to write a report on the findings. The amount of time involved depends on the tests used and the questions the tests are intended to answer.

PROFESSIONAL RECORDS

We keep treatment records, as required by the laws and standards of our profession. Occasionally, patients request to see their records. Because these are professional records, clients can misinterpret them. Therefore, if your records contain information that we believe could be harmful to you, we may summarise the information and give you a copy of the summary. We recommend that you initially review your records with your therapist, so they can give you context and explanation. You also have the right to have your record sent to another mental health provider.

You must read and sign the consent form associated with this notice by our first session.

Other Points about Records

As professional therapists, we naturally want to know more about how therapy helps people. To understand therapy better, we must collect information about clients before, during, and after therapy. Therefore, your therapist may ask you to help fill out some questionnaires about different parts of your life: relationships, changes, concerns, attitudes, and other areas. Your therapist may ask your permission to take what you write on these questionnaires and what it is in the records and use it in research or teaching that they may do in the future. If we ever use the information from your questionnaire, your identity will be made completely anonymous. Your name will never be mentioned, and all personal information will be disguised and changed. After the research, teaching, or publishing project is completed all the data used will be destroyed.

If, as part of our therapy, you create and provide my records, notes, artwork, or any other documents or materials, we will return the originals to you at your written request but will retain copies.

CONFIDENTIALITY AND ITS LIMITS

By law and the ethical code of the Nigerian Psychological Association, we typically keep all information you share with us confidential. However, there are some situations in which we must break confidentiality. Here are some examples of those situations:

- A court orders us to disclose confidential information.
- We believe you are in immediate danger of harming or killing yourself.
- We believe it is likely that you will harm or kill another person.
- Or we learn from you that a child or other vulnerable person has been or will be abused or neglected. This individual could be an individual in your care, an individual you know, or even yourself.

The clear intent of these requirements is that psychologists have both a legal and ethical responsibility to protect individuals from harm, even if they must break confidentiality to do so. Fortunately, these situations rarely occur. If such a situation should arise, we will usually make every effort to talk with you before taking action.

We may keep an extra set of notes about our sessions called “psychotherapy notes.” These notes are different from the progress notes we make after each session. These psychotherapy notes are for the therapist’s benefit: They help remember sessions, think through issues, and note particularly sensitive information that is inappropriate for your medical record. These notes are not intended to be seen by anyone but the therapist, and we keep them separate from your medical record. You do not have access to these notes, although we may choose to let you see them. If you take legal action against your therapist, we may disclose these notes without your authorization.

In the profession’s tradition, we find it helpful to consult and to seek supervision regularly with other professionals about our clients. In these consultations, the therapist will make every effort to keep the identity of the clients confidential. The consultant, too, is legally bound to

confidentiality. If you don't object, we will not tell you about these consultations unless we feel that it is important to our work together.

If you have any questions about anything in this agreement, please ask. It is important that you understand it fully. When you are satisfied with your understanding, please sign the authorization form on the next page.

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AUTHORIZATION FOR THE CLIENT INFORMATION BROCHURE CLIENT'S COPY

When you sign, you indicate that PsychNG Services has given you a copy of his Client-Therapist Agreement, that you have had the opportunity to read and ask questions about this Agreement, and that you agree to its conditions.

Your Signature

Date

Therapist's Signature

Date

PsychNG Services

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AUTHORIZATION FOR THE CLIENT INFORMATION BROCHURE PSYCHNG'S COPY

When you sign, you indicate that PsychNG Services has given you a copy of his Client-Therapist Agreement, that you have had the opportunity to read and ask questions about this Agreement, and that you agree to its conditions.

Your Signature

Date

Therapist's Signature

Date