

Problem History

1. What has been bothering or concerning you?

2. What significant events have (or might have) led to this problem?

3. When did you first notice the problem?

4. Who else is affected by the problem?

5. What has made things this way for you?

6. What does having the problem stop you doing?

7. How have you made the problem worse?

8. What underlying causes might there be?

9. What do you avoid because you have had the problem?

10. What other factors have contributed to the problem being the way it is?

11. What would you like to be different?

12. Do you want to think differently, feel differently or act differently?

13. How will you know when you have achieved the change you want?

14. Is this something that is in your control or influence?

15. In what areas of your life do you want the change?



16. What areas of life do you want to stay the same after you have changed?

17. What have you done so far to help solve the problem?

18. How would you describe your general attitude and mindset?

19. Are you taking any medication for or related to the problem? (What and how much?)

20. Have you ever felt like or tried harming yourself or others?

No (no thoughts or feelings) – **Low** (some thoughts but I wouldn't do it / I haven't made any plans)

Moderate (I think about it and have rehearsed it) – **Yes** (I have harmed myself or others)

21. Who can you turn to for support?

22. What experience do you have of making changes or achieving challenges?

23. How do you think I may be able to help? Why now?

24. How will things be different in the long term when the problem is solved?

25. What could happen if you didn't change?

26. Is making a change worth it?

27. Do you believe you can make the change you want?

28. Are you ready to make the change you want?

29. How might you sabotage your own success?

30. What else would you like me know?