

## Case Study

### Identifying Data:

- Date: June 15, 2021
- Name: Susie
- Address: 20 Cooper Square, New York, NY 10003, USA
- Telephone Number: 212-675-9085
- Sex, Birthdate, Religious Affiliation, Race: Female,
- Father's age/occupation: N/A
- Mother's age/occupation: N/A
- Educational: 10th Grade Student
- Occupation: N/A

### Informant/Source of information:

The patient herself provided all the information during her intake interview.

### Problem Statement:

Susie has been experiencing vivid flashbacks that are accompanied by physical pain and intruding thoughts. She is experiencing flashbacks every week. According to her intake form, she is concerned that she will not be able to manage her sudden flashbacks, which create feelings of constant fear. She reported that she experiences negative emotions such as aggression and irritability more often.

### Family and Home Background:

Susie reported that she has never met her father as her parents never married. Her mother is an addict. Her mother has always been careless towards Susie and her siblings, which led to the involvement of the social services. She also reported that she had been physically and mentally abused by her mother and her live-in boyfriends since the age of 3. She reported that she has been placed in numerous home placements and has a history of running away. She had also spent eight months in a correctional facility when she was 13 years old.

### **Educational History:**

Susie is in 10<sup>th</sup> grade. Her IQ test showed that she has an IQ of 115. However, Susie shared during her intake interview that her academic performance has been poor for the past three years. She has a negative attitude toward education and school.

### **Physical and Mental Health:**

Susie reported a history of self-injurious behaviors and had attempted suicide multiple times when she was seven years old. She also reported excessive feelings of hopelessness. She is taking anti-depressants on her doctor's prescription.

### **Occupational History:**

Susie is 15 years old. She reported that she was involved in prostitution to earn some money.

### **Sexual Adjustment:**

Susie reported that she is heterosexual and is single. She shared that she had been raped by her adult neighbor at the age of six. She reported that sexual abuse continued for seven years.

### **Substance Use History:**

Susie reported addiction to marijuana and cocaine.

### **Mental Status Examination:**

During the intake interview, Susie reported experiencing excessive nervousness, loss of attention, and difficulty in focusing on tasks. Based on this information, it can be inferred that she appeared to be nervous during her interview and faced difficulty in focusing her attention on questions that were being asked. Susie also reported that she faces difficulty in stating the day and time and is often feels out of touch with the world.

### **Diagnosis**

Susie meets the diagnostic criteria of Posttraumatic Stress Disorder (F43.10). In DSM-V, Posttraumatic Stress Disorder (PTSD) is categorized as a trauma and stress-related disorder. Symptoms of PTSD are likely to develop as a result of experiencing severe traumatic events, e.g., natural disasters, sexual abuse, war. According to Morrison (2014), individuals with a history of experiencing such traumatic events are likely to develop PTSD (p. 219). The primary symptoms or features of PTSD are developed as a result of exposure to traumatizing events (American Psychological Association, 2013). Susie has been sexually abused and raped for seven years by her neighbor.

Susie meets the A, B, D, and E criteria of the PTSD diagnosis. Criteria that Susie met are mentioned below with supporting evidence.

- Criteria A - Exposure to actual or threatened death, serious injury, or sexual violence in one. Susie shared a history of sexual abuse as she was raped by her neighbor for seven years.

- Criteria B - Dissociative reactions (e.g., flashbacks). Susie reported that she has been experiencing flashbacks.
- Criteria D - Negative alterations in cognitions and mood associated with the traumatic event. Susie shared that she has been experiencing persistent negative emotions such as aggression and irritability. Negative alterations are also evident by her diminished interests in activities, such as no interest in school.
- Criteria E - Marked alterations in arousal and reactivity associated with the traumatic event. Such symptoms are evident in her self-injurious behaviors difficulty in focusing her attention.

#### **Other Diagnosis:**

Major depressive disorder was also considered as Susie reported hopelessness and a history of suicide attempts. However, due to a lack of other symptoms to meet the criteria of major depressive disorder, Susie was not given the diagnosis of major depressive disorder.

#### **Treatment Plan**

1. Susie will learn about trauma related to sexual abuse/rape and common responses to rape trauma as measured by her self-reports.
- **Objective 1:** Susie will learn what rape is and how it impacts one's life during her first session.

**Intervention:** The psychologist will provide accurate and relevant information related to rape and trauma in a manner that is sensitive and understandable for the client.

- **Objective 2:** Susie will learn about what PTSD is and its symptoms during her first session.

**Intervention:** The psychologist will provide accurate information related to the symptoms of PTSD and its impact on one's life in a sensitive and easy-to-understand manner.

- **Objective 3:** Susie will learn about trauma-related CBT in her first session.

**Intervention:** The psychologist will provide information related to the TF-CBT for Susie to understand the process of future therapeutic sessions.

2. Susie will experience a reduction in her physical and mental arousal during flashbacks as measured by the clinician and her own reports.

- **Objective 1:** Susie will learn exercises to control her breathing during flashbacks.

**Intervention:** The psychologist will teach Susie a number of controlled breathing exercises during the second session.

- **Objective 2:** Susie will learn techniques of muscle relaxation to reduce physiological arousal during flashbacks.

**Intervention:** The psychologist will help Susie learn techniques of muscle relaxation.

- **Objective 3:** Susie will learn techniques of thought-stopping such as scattered counting and auditory distraction.

**Intervention:** The psychologist will teach Susie how to use thought-stopping techniques when she is having intrusive thoughts.

## References

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders*

(5th ed.). <https://doi.org/10.1176/appi.books.9780890425596>

Morrison, J. (2014). *DSM-5 made easy: The clinician's guide to diagnosis*. Guilford Press.



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