



RAY KAFFER'S THERAPIST DISCLOSURE STATEMENT

Formal Education and Training: I received my Bachelor's of Science as double major in Psychology and in Interdisciplinary Liberal Studies from Seattle University in 2013. Following graduation, I continued volunteering with my professor doing trauma resiliency trainings domestically and internationally. I received practical and specific training as an employee at Navos Mental Health in Seattle at their youth residential treatment homes as an employee at Seattle Children's Hospital on the Psychiatry and Behavior Medicine Unit. I started graduate school 2018 at the University of Utah where I completed the Clinical Mental Health Counselor Program offered through the College of Education and earned a Master's in Education. I am an Associate Clinical Mental Health Counselor in the State of Utah (12300387-6009) and a Licensed Mental Health Counselor in the State of Washington (LH61482032). My graduate internship and post-graduate associate hours are being completed in Utah in both a private practice and community mental health settings. I participate in continuing education in specialized areas to be able to provide quality treatment for my clients annually and as a condition of my licensure in the state of Washington.

Philosophy and Approach: My theoretical orientation and therapeutic approach come from a type of therapy called Interpersonal Process Therapy. Interpersonal Process is an empirically validated theory which focuses on the client-therapist relationship as the vehicle for understanding and creating change both within the client, and in their life outside of session. I'm also strongly influenced by Cognitive-Behavioral Therapy and Narrative Therapy approaches. These approaches combine in different ratios depending on my client's needs and circumstances, but are always focused on how our emotions, relationships, and physical experiences hinder or lift up our potential for growth and change. Trauma is major disruption in one's life that disconnects us from ourselves and our abilities to create change and growth from within. Learning new skills, creating safety for telling your story, and building mindfulness are ways that Narrative, CBT, and Interpersonal Process all support recovery from the struggles associated with Trauma and other mental health challenges like Depression, Anxiety, Grief, and personality disorders. As the therapeutic relationship grows so

too do the client's and therapist's abilities to recognize unhealthy patterns, challenge negative beliefs about the self, and tell a self-narrative of resiliency, growth, and change. My approach focuses on teaching and learning in a collaborative and reciprocal way where both the client and therapist learn about and teach each other about the challenges in the client's life. And then together we uncover the best ways to move forward and create healing from past hurts and struggles.

Participation: Therapy is a collaborative endeavor by nature, and the client's engagement in the therapy process is crucial to finding meaningful change. Investing in the therapy process through self-reflection, asking questions, voicing concerns or nervousness, and in expressing moments of insight and satisfaction are ways clients can enhance and even quicken the therapy process. This can be especially challenging at the beginning of therapy or when taking on intense or unpleasant emotions or memories. No client will ever be forced to discuss topics they do not want to or are not ready for, and should you wish to discontinue therapy services or find a referral to a new provider you have every right to do so. Speaking with the therapist about the therapy relationship can be as important as discussing the content of what brings people into therapy, and together we can co-create the kind of environment where your participation and engagement in therapy feels natural and productive.

Consultations: I regularly consult with other experienced professionals regarding clients with whom I am working. This is an essential part of maintaining my proficiency and practice standards while also helping me grow as a provider. Consultation is a place where as a therapist I explore new ideas or perspectives on how to support my clients or make sure I am practicing in the safest and most ethical way for my clients' needs. During consultation all discussion of clients is done so in a way that maintains confidentiality and anonymity of the clients being discussed.

Scheduling Appointments: Appointments are generally made on a regular, weekly or bi-weekly basis. Appointment times are not automatically held open for you from week to week. It is your responsibility to reschedule at the end of a session and communicate upcoming changes to your schedule in advance. I will attempt to keep the same appointment time available to you to the best of my ability unless frequent cancellations and reschedules become a hurdle in the therapy process. If it is necessary to change or cancel your appointment, please let me know as soon as possible.

[I will charge you a full session fee for appointments that are canceled less than 24 hours in advance. I will let you know at least 2 weeks in advance if I will be unavailable for a session, excepting emergencies.]

Termination: The length of treatment can vary greatly from client to client depending on many variables, but how therapy is ended is an important and crucial step in the therapy process regardless of length of treatment. Every effort will be made to plan for therapy termination together in order to support you in successfully transitioning out of the therapy space. Rarely, clients wish to end therapy because of a rupture in the therapy relationship, and if is the case I encourage clients to discuss the rupture with the therapist so that if termination is still the best way forward, there is a chance for repair and support in finding care or treatment. Regardless of why, clients may certainly return to therapy at any point in the future.