Therapist: Joseph, the last time we met you completed a questionnaire. Do you remember?

Joseph: Yeah.

Therapist: I'm a bit concerned about the results of the questionnaire. You reported quite high some depressive symptoms. For example, you said that you're sleeping much less than you were in the past and you're not playing hockey, which, I know, is something you really like doing.

Joseph: Yeah. Yeah. Doesn't feel the same. I dunno, it's not as...I dunno, uh, I can't describe it, really, I just...stopped.

Therapist: So, if I understand correctly, you can't really put your finger on what's going on, but you do notice that there have been some changes.

Joseph: Yeah, yeah.

Therapist: Okay. That's maybe where it could be helpful to have somebody else give us some information on what's happening with you. We have a psychiatrist who works on our team, and she does evaluations that can help give us some information about what's going on and also give us some recommendations on what might work to get things to a better place. What do you think?

Joseph: I dunno, I...I dunno if I need to see a psychiatrist. You know I'm...I'm not a loser or anything, I...It's uncomfortable.

Therapist: So it's not something that you are very comfortable with and perhaps there is some stigma associated with a psychiatrist for a psychiatric assessment. Not unusual. There have been many people in our program who have had psychiatric assessments who also had some worries before having the assessment but actually found that it was quite helpful. I'd like to better understand: what are some of your fears around having an assessment?

Joseph: I just...I don't, I don't think there's anything wrong with me. I, I don't know what kind of benefit I'd get from it.

Therapist: So you think having a psychiatric assessment would mean that there's something wrong, and you're wondering also how that can actually help.

Joseph: Yeah.
Therapist: Okay. Well it's not something I can tell you that.... We can proceed with the assessment if you're in agreement with that, but you're not obligated to continue after that. You're also not obligated to follow any of the recommendations that the psychiatrist will give. The way that it would work is that she would see you, she would do an assessment, she would have some recommendations, you'll have a chance to discuss them with her, to ask questions, and then you'll also have a chance to discuss them with me. And you can take all of them, some of them, or none of them. You're not obligated to follow exactly what the psychiatrist has told you. Does that help ease, kind of, a bit of the discomfort around that?

Joseph: Yeah. Yeah. Just gives me a bit more, sort of, say. Just makes me feel a little more in control, I guess.

Therapist: Great. So, if you're in agreement, what I can do is I can make a referral to our psychiatrist. She'll let me know when her next available appointment is. I'll let you know, and in the meantime--because there could be a bit of a delay, like maybe about two months or so. In the meantime, if there is something then you can always ask me questions in the meantime. If something appears to be an emergency in the meantime, we can also reassess and see if we can follow any other alternatives.

Joseph: Sure.

Therapist: That sound okay?

Joseph: Yeah.