

Interim report internship

January 2

2015

During the familiarization period I executed four assignments that are included and used to write this report. After the familiarization period I wrote this report which is based on five competences; professionalizing, interdisciplinary cooperation, working with diversity, coaching and guidance to those wishing to make behavioural changes and informing others regarding behavioural issues.

Hope Rehab
Centre
Thailand

Index

Introduction	.....	2
Description organization	.....	3
Competences:		
1. Professionalizing	.....	4
2. Interdisciplinary cooperation	.....	6
3. Working with diversity	.....	9
4. Coaching and guidance to those wishing to make behavioural changes	.....	12
5. Informing others regarding behavioural issues	.....	14
Appendixes:		
1. Je eerste dag je eerste indruk	.....	15
2. Quick scan diversity	.....	17
3. Interview Dylan	.....	19
4. Interview Paul	.....	20
5. Interview Sue	.....	21
6. Suggestions for supporting documents	.....	22

Introduction

This report is written for the purpose of eventually completing a prosperous, productive and successful internship. I have written it after the first ten weeks of my stay, during these weeks the main focus is to integrate and observe how the organization works.

The purpose of this report is to give insight and overview. It is structured to create clarity and focus therefore five competences are used as a base. The competences are: professionalizing, interdisciplinary collaboration and working with diversity are obligated, these are obligated by school. Along with two competences of choice, these are: coaching and guidance to those wishing to make behavioural changes and informing others regarding behavioural issues.

These competences are used to reflect in a professional manner.

I shall be giving a description of Hope Rehab in this report. It contains information about my supervision, my tasks, the disciplines we work with and how I view the first period globally.

In the appendixes you will find four assignments. These are used as input for this report.

The report is written to benefit my internship and can be read by everyone who is interested; in particular, my supervisor here at Hope Rehab Centre and my academic adviser from the *Hogeschool van Amsterdam*.

Description organization

I am currently at Hope Rehab Centre on a six month applied psychology internship. This rehab centre is located in a village in Thailand called Si Racha. The village is less than an hour away from Bangkok.

It is an affordable private treatment centre with a multidisciplinary team and a structured program that consists of two individual counselling sessions, personal training sessions and massage therapy during the week. In our daily programme we have two group meetings that cover CBT, relapse prevention and processing of the clients personal struggles.

Dylan Kerr is the head counsellor and my supervisor and he is always available if I ever need advice. If not there are other staff members around, everyone helps me when I have a question or when I need support.

A big task I have at the moment is to do counselling sessions and my supervisor says he thinks I should be doing more. I feel privileged to be given this responsibility. I am also involved in the group meetings some with me leading and some with me assisting. Besides this I am going to do intake assessments and I may design a training course for the staff but that is yet to be decided.

As a multidisciplinary team we work together with several disciplines; physiotherapists, meditation coaches, clerical advisers and occupational-and medical healthcare.

My first period here was very exciting and I learnt a lot. At first I struggled to keep up with speaking and understanding English in all its different accents, but my vocabulary is improving every day. Right from the start I felt at ease here at Hope Rehab, everyone is friendly and welcoming. Sometimes I find it hard to focus because I am working in such a fast paced environment. There are many interesting things going on. But my focus is getting better now and I have my priorities right at this moment.

Professionalizing

I have the amazing opportunity to contribute to this lovely organization. Hope Rehab Centre Thailand is a relatively small and young rehab centre that officially opened its doors the first of March 2014. It is a growing organization and I consider myself to be very lucky being a part of this process. As you can imagine, there is a lot going on here. People come and go, the builders are building new rooms and the clients and my colleagues are always around. Therefore it is challenging to stay focused in this lively environment.

The manager of this rehab centre allows me to design and take on groups as well as doing one on one session with clients, these are my main tasks. I can do this because of the knowledge and skills Applied Psychology taught, i.e. presentation skills, coaching skills, training skills and conversational skills. Also because of the knowledge I have now as a result of completing classes like criminality and addiction and social psychology. Another big task I have and shows I can work methodically is conducting intake interviews. By doing this I put my knowledge and skills about methodically, practically and realistically working into practice. One thing I might do in the future is train my colleagues on how to use conversational techniques and coaching skills. This is something one of my colleagues mentioned during the interview I did for the assignment 'inspiring conversations'.

I had a positive experience when I arrived; my manager and I did a visualisation with the clients to remember the 12 step program, during a group meeting. The visualisation is inspired by the method of Loci and designed by me with help of colleagues. It shows that I have in-depth knowledge of methods and that I am capable of applying them into practice. Besides big tasks I have smaller tasks to which I think are important. For example I have made a sign that says: "Drink at least four bottles of water a day" and have stuck it on the fridge. The idea came to me during a group meeting when a couple of clients said they only drink one bottle of water a day.

My ability to discuss ethical themes showed too during the first period. I spend a lot of time with one of the clients, she was one of the first persons I met and we were practically roommates. Her room was right next to mine and we shared the bathroom and the balcony. It was great to have her here and it also was a fantastic opportunity to practice my conversational skills and learn about boundaries. After treatment she went to live in Chang Mai and she asked me if I wanted to come over to celebrate New Year's with her. Immediately I decided I was not going to do this. I thought it is not ethically right to celebrate New Year's with an ex client. Admittedly I felt a little sad having to tell her that I was not going to celebrate New Year's with her but with someone else. I was thinking I do want to come to Chang Mai, not for New Year's but another time. I discussed the situation in a staff meeting and afterwards I got positive feedback from a colleague about the way I handled this situation.

My core-qualities are that I am critical by nature and ask critical questions on a regular basis. Another quality is my ability to work methodically, practically and realistically within a professional context. For example we have a mindfulness class every week. I have now been to a lot of classes and I understand

the concept of mindfulness I can see how it affects people and how it works for the individual. Most of the new clients have a hard time understanding the concept and get confused over some of the subjects. I understand that it can be hard to grasp mindfulness. But I know that it is not to be understood it is to be experienced. However I do think it is important to be critical and ask questions and that is what I do. I try to be as professional as I can therefore one thing I do is keeping a diary. This is a method that works very well for me right now. I write in my diary every day, it is a practical way of processing what happened without telling others. By doing this I can make sure if my view is realistic and if I doubt that I can still discuss the issue with my supervisor.

I want to be able to discuss more about ethical dilemmas. In this environment it is sometimes hard to keep my boundaries in place and that is when I am reminded of ethics and what I was taught on the subject. To think twice about a situation is often the wise thing to do before you act out on your thoughts. Recognizing the ethical themes is something I do but I do not always discuss these themes, when I am aware that I should. It is definitely very important to do so because it can save you a lot of drama. I have the opportunity to discuss ethical themes at any time, during handover in the morning is always an appropriate moment. I challenge myself to bring up an ethical theme at least once during the week. If I do this from now on I have accomplished my learning objective.

My strength right now is my ability to reflect on my knowledge, skills and attitude. In the past I had trouble with accepting negative feedback or constructive criticism. In the past I have struggled to accept such feedback. At this moment in time I feel confident taking criticism and I can now see it as a strength and something I can work with to become more competent. I will have to give my education credit for teaching me how to do this. A weakness of mine is reaffirming my ideas with scientific psychological knowledge. This is something I should do more often, but I tend to go with my intuition or with what I have learnt earlier in my education. I am aware of this and from now on I will use scientific articles to

Interdisciplinary cooperation

We have a multidisciplinary team approach and we work together with several disciplines; clerical advisers, physiotherapists, meditation coaches and occupational-and medical healthcare.

Yesterday I went to the hospital with a client to get a five day alcohol-detox. We were dropped off by a colleague for an appointment at three o'clock. This was the first time I got to do this and I felt privileged to have been given the responsibility. We walked up to the counter and asked for the doctor, the made my client fill in a form with basic information. After this we were told to take a seat and wait. A little while later a Thai assistant came to get us and measured the client. After that we waited for the doctor to come and get us. When we got to meet him I was surprised by how well he spoke English. This is probably because none of the Thais in this area speak English. The doctor was very nice and really took his time to sit down with us. He asked all the right questions and informed the client about her alcoholism and her allergies. He even acknowledged her good decision of coming to rehab a couple of times during the visit. To be honest Thai doctors do not know a lot about addiction but he was interested. I wrote down the name of the rehab for him so he could do some research. I explained that we needed a five day detox on diazepam to reduce the risk of seizures. While we were talking with the doctor I figured that he did not know how much diazepam we needed for a five day detox.

Unfortunately I did not know how much diazepam we needed either. In the end we walked away with 10-2 milligram and 10-5 milligram diazepam. I knew the last time someone else went to get an alcohol detox script they did not return with diazepam and the manager was not pleased with the doctor's decision. But I did get diazepam and felt good about my accomplishment.

I felt that I needed to make this as painless as possible, just get the diazepam and get a tuktuk back to the rehab centre. If I am honest I felt a bit insecure about the situation, because I had never been to the hospital to get a detox with a client before and I wanted to give the client a secure feeling. But I guess there is a first time for everything. All I wanted was to make this work and just get the diazepam detox. I wanted to make the client feel secure and make the whole situation work out well. I was asked to go by a colleague and I felt that I would be capable of succeeding. So I said I will go. I tried to prepare myself for this task by asking the right questions before going. Afterwards I realize there was one thing I did not ask. How much diazepam do we need?

In conclusion I felt that I had performed adequately. I did not want to reflect too negatively on the fact that I had not asked for the exact amount of diazepam. I expected that the doctor would have known the correct prescription, but it turned out to be that he did not. So that shows you should never expectations. I already knew that doctors in Thailand did not fully understand the disease of addiction so I guess I could have known.

I have been taught how to ask the right questions so I know I am capable of doing this. One of my qualities is that I am very flexible, sometimes even to flexible. But in this situation I said "It is ok I will go and get the detox, no problem." I know I can cope fine in unfamiliar situations and I did. Another quality

of mine is my ability to connect with people, most people open up to me easily. And I cherish this quality of mine. It helps me, especially working in this field.

Next time I will make sure that I am aware of the correct details for the client's prescription. I will not expect the doctors here to know what we need. They have a lack of knowledge when it comes to addiction. This only happened yesterday so I have not tried any other way. I will definitely do that the next time I am asked to get a detox at the hospital. I am sure that the whole experience will be more professional and will make the client feel more secure.

My core qualities within this competence are; that I am able to focus on both relations and obligations within the various working relationships also that I am able to build rapport with my colleagues and that I can show them the added value of having an applied psychologist as a part of the team. To explain my first core quality I can use the example that I worked out in the part of this report about, going to see the doctor at the hospital. It shows my ability to work together with other disciplines, in a foreign country. This rehab needs a good relationship with the hospital and the doctors that work there. We rely on them for medication for our clients. It feels good that they trust me to maintain this relationship and I am focused on the obligations of both of us. The doctor needs to observe assess and analyze what it is the client needs and he did this very well. He was spot on with the allergies my client has and she was very pleased about that professional observation. My manager told me that the doctors in Thailand know practically nothing about addiction. We need to teach them he said. I was told to ask for a five day alcohol detox and that is what I did. He did not know what to give us; he asked us how much it was we needed. I did not know either so together we decided how much we would need. Now I understand is need to be more specific in my questioning before I leave the site. And next time I will be able to educate the doctor on how we work and what client's needs are. I build rapport with my colleagues continuously. I do this during breakfast, lunch, dinner and any other time. I show my colleagues the value of having an Applied Psychologist by designing new groups, using various conversational techniques and sharing my knowledge and point of view. These are skills that I have been taught in school and most of the staff members have never been taught these skills. During the interviews I did for the assignment 'inspirational conversations' I told all three persons about my capabilities as an applied psychologist and with people in particular is very interested in my knowledge but I know that they are all open to new knowledge.

A skill I can improve is to plan and organize my own activities, and adapt it to other possible disciplines. I am also developing my planning and organizational skills. For example I was supposed to take on a group a couple of days ago the situations at that point was not ideal and I still needed to go over the topic with Dylan who was not there at the time. I think I used that as an excuse to not do it. One other discipline we work with is the mindfulness meditation coach. He is here every Saturday and Wednesday to do a class. Wednesdays we also have the staff meeting and he always joins us. But I do not have to work together with him. I do ask him a lot about mindfulness but that is not directly related to my work. So I could get more out of this professional working relationship.

In the second part of my internship I want to accomplish being able to plan and organize my own activities, and to adapt them to my colleges. I will accomplish this by creating a course for my colleges together with my supervisor. The evidence for that will be the script of the course.

Working with diversity

Here in Hope Rehab Thailand the residence is very diverse. Most of the staff members including the owner are originally from The United Kingdom, but the clients are from all over the world. We treat people from, New-Zealand, Australia, The United States of America, Canada, Norway, England, France, Scotland, Thailand and The Netherlands! They all suffer from addiction and have different 'drugs of choice' like: alcohol, heroin, cocaine, crack-cocaine, methamphetamine, cannabis, prescribed medications and other substances. Another form of addiction is cross addiction for example addiction to shopping or gambling. Most of all I find all these various personalities, cultures, addictions and ascents fascinating to work with.

To reflect on my way of working with diversity I will use the following example. Here at Hope Rehab I had the responsibility to council a local Thai Lady while a colleague was away. The biggest challenge with her is to overcome the language barrier. She does speak English but it is a bit limited, there are a lot of English words she does not understand. Because she grew up in Thailand there also is a cultural barrier. Thai people do not show their angry feelings. If you do lose you temper in public it is considered 'losing face'. Besides this older people and teachers are to be respected therefore Thais will not disagree with them. It is challenging to - say the least - to get her to be honest about her feelings, especially anger. For example as staff we know for a fact that she used to get very angry, but she does not speak about that. During sessions she will never disagree with me like other clients will do. Up until now the sessions went very well. Afterwards I always speak to the staff about the session to make sure my way of working suits her needs. I also ask for feedback and advice.

My main quality within this competence is that I am open to people from different backgrounds. In fact I think that meeting all these people from different backgrounds and have them in one group is very interesting. In rehab, all the clients carry a backpack with them, a backpack filled with past events, memories, feelings and thoughts. For the most part you can view people as a product of their past and it is common clients use their past as an excuse to use. In the past couple of years I have worked on not prejudging people. I realize now that stereotyping is a fast method to scale people, but in reality everyone is unique. First impressions can be lasting but I want to give everyone an honest change by keeping an open mind. For example if I am meeting a client. Like I did last week, by keeping an open mind I get to meet the real person within instead of making judgements. My other quality is being capable to handle individuals and groups of various backgrounds. This is a new realization to me. I have taken on groups and I have done counselling sessions with people of various backgrounds. The feedback afterwards has been positive. All I do now is gain more and more experienced, by taking on more groups and one-on-one sessions. I can see that the people that work here are more experienced, I admire that and want to become as experienced as they are.

In the second part of my internship I want to do at least one group per week. I want to do this to improve my ability to work with diversity. It is very simple, if I do more I will learn more. My personal

learning goal will be: to challenge clients from different backgrounds on their behaviour here at Hope Rehab. That is one thing I find hard to do, challenge clients. Maybe I am afraid clients will get upset with me, I am not sure. All I know is that I need to do this more for the sake of the clients. Their behaviour got them into rehab and is in need of some change. But long learned behaviour is not easy to change in a short period of time so challenging is necessary. I will be reflecting on the groups I am going to be doing. In the end I can review all my reflections and write a report about them.

Coaching and guidance to those wishing to make behavioural changes

During my familiarization period I have learnt a lot about how to coach and guide people that want to make behavioural changes. First of all I have learnt to listen and be patient. Another thing I have learnt is to keep clear boundaries. The last main thing I learned here is to inspire the clients in the developmental process. I think I am pretty good at listening and I know I have a lot of patience. But here in Hope Rehab I am developing these qualities further. Clients have high demands, they want attention and they want to talk. It is important to listen well and make the clients feel heard. You want to give them the feeling they can talk about anything and everything with you. For example yesterday a client told me about a shameful event that she experienced. To have her telling me this is the result of building a trusting and professional relationship by listening and having patients. That professional relationship is there because of the boundaries I have to keep in place. Otherwise I can lose that relationship within moments. For example something I cannot do is talk with a client about another client, it is gossiping, and if they have a problem they can discuss that with their counsellor. This is a difficult boundary but a very important one.

I inspire clients in their developmental process most of all by being enthusiastic about recovery for them. But also by making them feel the support of the group, the counsellors and all the clients. For example today a client walked out of a group meeting and I followed to check in with her. She was upset because she has a nervous twitch that she is very self-conscious about. She is not able to control the twitch and that frustrates her. I listened and told her that the group will always accept her and support her and that that can help her to accept herself. She was upset for a little while but it passed after some time. The possible task within the competence - coaching and guidance to those who wishing to make behavioural changes - is as straight forward as it can be. I have to do one-on-one sessions with clients. But there is also the 'sessions' no one sees. During the day I find myself in conversations with clients about struggles, these conversations are like mini one-on-one sessions. It is a challenge for me to not just talk but make those conversations valuable in a therapeutic way. Try and make them view events differently. Make them take a look through someone else's eyes, put on a different pair of glazes metaphorically speaking. Now that I have worked with clients my supervisor would like to see me do more work, which is a good sign! In these sessions I worked with my client on the material out of the workbook. The workbook is a folder we work with, it is created by Simon Mott, the manager and Dylan Kerr, the head counsellor. The workbook combines the twelve steps with cognitive behaviour therapy. For me this is an easy way to start building confidence having one-on-one sessions with clients and it teaches me a lot.

In the second part of my internship I want to accomplish having the ability to recognize a problem or complication and then provide the client with insight by means of purposeful communication. This is a skill I am continuously working on in every conversation, one-on-one session and group meeting. I want to develop this skill as much as I can because I think, working in a therapeutic environment, this is necessary. All clients have problems and complications. This is a practical skill in the sense that I can apply the skill almost all day long throughout every conversation. I am going to accomplish this skill by

putting it into my goals list that I make every week. It consists of learning, physical and social goals. This skill I will list under social goals. My personal learning goal will be: Contribute to one conversation about a problem or conversation during the day and provide to this conversation with an insight by means of purposeful communication. I will be able to measure it by making one reflection report a week about one of these conversations during the week.

Proof of me working on this competence will be this weekly reflection report. Every Friday at the end of the week I will write this report after we come back from the restaurant. During dinner I will also have a chance to start a conversation about a problem or complication. At the end of this Internship I will have a collection of reflection reports that will prove that I have worked on developing this competence.

Informing others regarding behavioural issues

During my familiarization period I have developed this competence by observing the groups the other staff led. I looked at the different subjects, colleagues their different approaches and ways of dealing with controlling the group and coping with resistance. During and after the groups I have taken notes and I have written observation reports to reflect on the groups they gave. In this way I allow myself to learn from other people's experience. I think this has been a successful way of developing here at hope and because of this approach I have learned a lot. For example; when to let the clients speak and when to interrupt to take back control. The only obvious task within this competence is taking on groups. If I am honest I have not researched other possible tasks. Before I came here I thought the tasks that would fit into this competence would be doing intake assessments. But when I read the competences worked out into three levels which are divided into knowledge, skills, attitude and insight. I came to realize that this task does not fit well into this competence the task; doing one-on-one sessions suits this competence quite well but not as good as the task of doing groups.

I remember the first official group I did; it was a group on how to give feedback. In rehab a lot of feedback is given every day. I figured the quality of the feedback had direct influence on the quality of the rehab. So I informed the group about how to give feedback in an appropriate way. Right from the start there was one client not going to listen to me. In the beginning of the class I asked him to give an example about a time he had to give feedback. His answer showed me he did not pay attention to my explanation about how to give feedback. Later on that day after lunch he came up to me, I was sitting at the dinner table with a colleague. The client shared his opinion with us. Basically he said that he thought I was wasting his time because as according to him I was unprofessional. While the truth is that after doing this group I got a lot of positive feedback from all of the other clients. Everyone that gave me a chance and really listened got a lot out of my class.

At first I was open to the client's opinion and asked him to give me feedback according to the rules I just taught him about. But he never did. He was trying to get his own point across. The client does not speak very clearly and as a result at times I cannot understand him. This time it wasn't any different. When I finally understood him he went on about it and it started to upset me. I felt emotional, criticised, misunderstood, offended and speechless. I wanted to get away from the situation I felt that I got to a point where I could not think clearly anymore and when I got the chance to leave I did. I left the table and walked down to my room.

When I look back on what happened I can conclude that I should not let the words of a disturbed man disturb me. Right now I am able to see why I reacted the way I did. Previously I have struggled receiving criticism, regularly I would get upset. At this moment in time I understand that this client is struggling with his anger and his need to control his surroundings. In class he felt stupid because I explained something and he did not understand while the rest did. He felt humiliated and controlled, manipulated and challenged; as a result he tried to control the situation. He humiliated me and afterwards he came

up to me to 'make up'. So in the end he could feel good about himself again. After this happened I went to the office and spoke about the whole situation with a couple of my colleagues. They were wonderful, they helped me to understand what happened and see it all clearly, and for that I am grateful. This experience taught me to always share my struggles and process it with other people.

Qualities that I have shown I can use to reach the ideal conclusion are assertiveness and self-control. In the future I will shut down the conversation in a professional way. I know I am able to control my emotions and next time I will make sure they will not take the better of me. I will take control of the situation and will not let my feelings be hurt.

Next time something like this happens, where someone tells me I am not professional and a waist of their time. I will tell them that if they have a problem with me being an intern here they can go and have a chat with Simon Mott about their concerns. Because I know I am professional and capable of working here as a member of the staff.

Fortunately this situation has not repeated itself. If it does happen again I will write a reflection about that event. I have learnt to be assertive and take control.

During the second part of my internship I want to gain more knowledge of the formation and change of attitudes and the correlation between attitudes and behaviour. I want to accomplish this because I feel like constantly gaining knowledge about addiction and recovery. I am going to accomplish this by reading a book that Dylan – my supervisor – told me about. The book is called 'Acceptance and commitment therapy'. My learning goal will be to read a chapter out of this book every week until it is finished. I can apply the knowledge I gain immediately because I am working here at Hope Rehab. I can meet this goal at the end of my internship by proving I have read it and putting it into practise. I am going to be able to measure this by writing a review on the book and writing a reflection on the way I apply what I have learnt from working with that knowledge.

Opdracht professionaliseren: 'Je eerste dag, je eerste indruk'

Mijn eerste stagedag zal plaatsnemen in Thailand. Om precies te zijn in Sriracha, dit plaatsje ligt een uur rijden vanaf Bangkok. Ik zal dus in een andere omgeving zijn en in een andere cultuur. Nu realiseer ik mij goed dat ik er goed rekening mee moet houden dat dit het geval is. Eerder dacht ik nog dat loopt wel los zolang ik maar mijn vriendelijke zelf ben. Maar opdrachten van school die ik al eerder moest maken hebben mij met mijn neus op de feiten gedrukt en hebben mij gedwongen rekening te houden met de cultuur waar ik het komende half jaar in leef.

Het lijkt mij het beste om er van uit te gaan dat er geen inwerkprogramma is. Hierdoor zal ik zelf moet nadenken over de manier waarop ik de eerste tijd doorbreng op mijn plaats van bestemming. Ik ga stage lopen in een afkickkliniek genaamd Hope Rehab Centre Thailand. Het stelt mij enigszins gerust dat de eigenaar van de organisatie een engelsman is. Ook is er een nederlandse '*sober coach*' aanwezig en de vrouw van de baas is een originele thaise die goed engels kan. Het zal dus een mengeling zijn van de thaise en westerse cultuur waardoor voor mij de cultuurshok hopelijk minder intens waardoor ik rustiger kan wennen.

Het allereerste wat ik wil doen is een jonge cocosnoot kopen maar ik heb zelfs al een idee over wat ik op die dag voor kleding ga dragen. Zeer zeker weet ik dat ik ga observeren, observe en nog is observeren. Ik wil niet te aanwezig zijn maar ik wil ook geen afwachtende houding aannemen. Het zal een uitdaging zijn om hierin een balans te vinden. Mijn voornaamste doel voor de eerste paar dagen is om aansluiting te vinden bij de mensen die op mijn stageplek directe collegas zullen zijn. Dit zal ik doen door een praatje met iedereen te maken waarbij ik vooral veel vragen stel. Omdat ik in het begin zeker een *overload* aan informatie ga krijgen heb ik een dagboek gekocht en ik ben van plan om daar elke dag in te schrijven. Op deze manier kan ik gemakkelijk reflecteren op mijn ontwikkeling gedurende de periode dat ik daar verblijf en ik heb een aandenken voor wanneer ik terug in Nederland ben. Graag wil ik ook een aantal interviews doen in de eerste paar weken dat ik daar ben zodat ik meer te weten kom over de mensen en de organisatie. Daarnaast denk ik er overna om een van de eerste dagen dat ik daar ben een presentatie over mezelf te houden zodat ze een beetje een beeld hebben van wie ik ben en waar ik vandaan kom. Ook wil ik graag wat lekkers meenemen om uit te delen aan iedereen.

Welke indruk wil ik maken op mijn stage plek? Allereerst wil ik vriendelijk gevonden worden. Ik weet dat dat thaise mensen veel lachen en heel vriendelijk zijn. Hier wil ik mee in gaan, gelukkig zit dit al in mijn persoonlijkheid dus hiermee voorspel ik geen moeilijkheden. Ik ben me heel bewust van het feit dat je maar een kans krijgt voor je eerste indruk en dat deze eerste indruk vaak de toon zet. Enthousiast, professioneel en leergierig zijn termen die ik graag gebruik voor de manier waarop ik wil overkomen.

Natuurlijk ga ik mezelf zijn maar wel de beste versie van mijzelf. Ik wil vooral graag spreken met iedereen, praatjes maken. Ik zal de gesprekstechnieken die ik op school heb geleerd toepassen om contact te leggen met de mensen die ik daar ga ontmoeten. Het geeft mij een gerust gevoel dat ik altijd overal wel aansluiting vind. Dit komt waarschijnlijk omdat ik makkelijk ben in omgang en mensen graag in hun waarde laat.

Liefde gaat door de maag. Voor mij is dit een absolute waarheid. Elke nieuwe sociale situatie waar ik in beland zorg ik altijd dat ik wat lekkers in me tas heb. Als ik eerlijk ben komt het weinig voor dat ik niks lekkers in me tas heb zitten. Maar deze 'techniek' hoort bij mij. Zoals ik al eerder aangaf zal ik zeker lekkere dingen meenemen naar Thailand zoals stroopwafels of chocolade. Dit laatste is misschien niet zo'n heel goed idee in verband met de warmte. Drop is waarschijnlijk een beter idee. Ook zie ik mezelf al helemaal op avontuur naar de markt gaan waar ik dan allemaal lekkere exotische vruchten te koop. Eenmaal terug op locatie zal ik die vrolijk met iedereen delen. Ik kan me voorstellen dat dit niet de enige manier is om initiatief te nemen om een samenwerkingsband op te bouwen. Dus lijkt het me verstandig om oprechte interesse in de mensen om mij heen op te bouwen. Ik zal vragen om feedback en deze zo goed mogelijk verwerken. Want mijn hoofddoel is om te groeien, zowel persoonlijk als professioneel.

Assignment interim report: 'Quick scan diversity'

Diversity is the understanding that every individual is unique and different, which is very important within the environment I work in. This Rehab centre – that is located in Thailand, Si Racha – treats people from all over the world. At this particular moment there are people from England, America, Australia, New Zealand, Thailand, Norway and The Netherlands! It is a multicultural environment with English as the medium of communication.

My colleagues are mostly from England, though there is one person from America and there even is a Dutch person. Every staff member has his speciality. One person has been called 'The king of CBT' (CBT stands for cognitive behavioural therapy) and a lady that works here does a lot of grief counselling. It is both lovely and practical to be able to speak Dutch because whenever I need a translator I can ask this Dutch person if he knows the translation to English. Sometimes it is hard for me to keep up with the level of English spoken here, especially in the beginning it was quite draining. I know my English is pretty good but it is not my first language so it takes extra energy for me to understand everything. For example yesterday there was an Irish person among us. Irish is very different from proper English because of the heavy accent. At some moments my concentration is off and that is where I lose track of the conversation. This is a more extreme example of the language barrier I experience. Mostly it is just words I do not understand and so I just ask what it means. In my opinion this internship is a great opportunity for me to improve my English. It already improved and I am sure it will only get better and better.

Right now a Thai lady is in treatment and she struggles with the English language and the organisation definitely takes her struggles into account. One thing we use is a buddy-system; this means that every new client gets a senior client as a buddy. Another thing is the workbook - that all the clients use - is now being translated to Thai so it will be easier for her to understand the exercises. Just today I did a session with this Thai lady, I just simplified my English and the sessions and she understood me well. On the other hand it is practical to have someone that understands English and speaks Thai. In an area where the Thais do not understand English. There is not a specific policy on cultural differences besides the condition that you have to speak English. I think everything just works out well because it is a relatively small organization that is able to house 13 clients on site.

The members of the team are definitely a reflection of the client population. Most staff members are in recovery themselves (for a longer period of time) even the founder of the organization is in recovery over twelve years now. I think it is very effective to have a mixture of professionals, people who are educated and experts, people who have lived through addiction and have real life experiences.

To me it is in plain sight that this organization copes with diversity in an efficient way. Every morning there is a staff 'handover' for about half an hour, than we discuss what is happening. And every Wednesday we have a staff meeting that is when we talk about everything more excessively. In here there is always someone around to talk to when you are struggling. Coming from the Netherlands to go and work in a rehab in Thailand is as much a culture shock as it can be. But everyone has been great, very supportive. It is a lovely organization who copes with diversity well.

Inspiring conversation Dylan Kerr, 31, England

Dylan lived all over England and lived in London for six years. He started smoking cannabis when he was eleven and is in recovery himself for nine years. In 2006 he started working for the Dodly drug project after that he worked for a project called Aquarius which is CBT based and he worked for another project called WDP. Dylan started off working in health care before he worked in the field of addiction. In 2006 he started studying drugs with a drug course then studied CBT, motivational interviewing, alcohol, dual diagnosis and got a degree in psychology of addiction in 2011. He worked with different target groups; addicts, criminals and psychiatric patients. At this moment he is very interested in acceptance and commitment therapy which originates from Australia.

The benefit of cooperating with various disciplines is to be able to offer a holistic approach according to Dylan. Another benefit is that you can learn from each other. A lot of people working in healthcare for example doctors do not have a lot of knowledge about the disease of addiction. Therefore we teach them what we know.

Working in recovery taught Dylan that sometimes knowledge is not enough. As depressing as it might sound I do think this is the truth. Some clients lack acceptance. Not accepting authority or not accepting being an addict will sabotage treatment. Most addicts are emotionally underdeveloped because they started using substances at a young age. This could be the cause of the lack of acceptance. The first we work with when a new client arrives is the denial and that appears to be impossible sometimes.

Mistakes Dylan made and learned from are underestimating people and becoming friends. It shows how important it is to stay professional in your way of interacting with the clients and that you should never judge someone too.

The tips he gave me are to be aware of boundaries and not disclose too much information about yourself. To be flexible when you work with clients but not to flexible, focus on working the steps. The last tip is not to be overly critical with clients in the beginning so you can build a solid professional relationship.

The last thing he said was: "Be patient, listen and be understanding". He thinks the possibilities for Applied Psychologists in this field are endless. There is always room for improvement.

Inspiring conversations Paul Loftus, 48, England

He is a sober coach and support worker here at Hope Rehab Centre Thailand. He used to be a creak and heroine and is in recovery for over twelve years now and got clean in prison by working the twelve step program. Paul got me from the airport and was the first person I saw!

He takes care of clients need; he does most of the pickups, assessments, attends groups, has one-on-one sessions with clients, leads the group on excursions and intervenes whenever that is needed. It is a dynamic job and he likes that.

Paul is close with Simon Mott, the funder and manager of Hope Rehab. They know each other because they got clean at the same time. Simon's brother got a motorbike and at that time he dreamed of having a motorbike as well, this was something that motivated Paul to get clean. Paul moved to Thailand in 2010 where he met Simon Again for the first time in years. This took place at an AA-meeting during this time Simon's rehab was in its very early stages, Simon offered him to come and work with him and that is what he did. Paul has got a lot of experience in recovery because of his twelve years of sobriety but has never worked in a professional way with this target group. Before he moved to Thailand he had a construction company for eight years. He had not worked for a boss for a long time and now all of a sudden Simon is his boss. He said this was hard for him to cope with, being an employee again.

What inspires him in this Job is helping people. It seems to be a cliché but I believe this is the sincere truth. While working here he learnt a lot about the basic counselling skills and boundaries. In the beginning he had made the mistake to self-disclose information to clients. It can be very useful to do so because you can gain the trust of the client. If clients know that his/her counselor has been through what they are going through right now it makes them feel more understood. And the client can relate to what you have been through as a person. But some stories scared the clients which he did not realize at the time. It is a fine line and disclosure is an interesting topic to discuss about.

He thinks people that have studied Applied Psychology are a good addition to rehabs. One possibility he sees is for me to teach the staff about various skills I learnt in school. As a result of this interview myself and my supervisor are going to put together a course for the rest of the staff.

Assignment interim report: 'Suggestion for supporting documents'

The two competences of choice I choose are:

- coaching and guidance to those wishing to make behavioural changes
- informing others regarding behavioural issues

I want to learn to coach people who have an addiction by reading more about motivational conversation techniques so that I will be able to inspire the client in the development process with a positive, involved and empathic attitude.

I want to get more experienced with running groups by learning about specific themes in addiction and so I can present them with confidence and an integer attitude.

I am already counselling a women and I am going to do more counselling during the coming period. Groups I am doing already and I am going to do more as often as I can.

The evidence of my growth will be recordings, reflections and the group's scripts.

The one-on-one counselling sessions I will be recording from now on. As well as reflecting on them afterwards.

I have been helping out with groups and I have designed and did one group. I have reflected on the experience in a structured way and I will keep doing that.