

Name: _____

COUNSELOR SELF-EVALUATION

Please provide a summary in each of the content areas of your personal and professional development as a treatment provider for adolescents with sexual behavior problems and their families.

Knowledge of Treatment Phases

In which of the treatment phases do you feel most familiar and confident?

What specific skills do you think you do well? Please give an example.

Which phase of treatment do you need to study more?

What issues and areas within the phase need more practice or clarification?

What are your plans to increase your knowledge in the above area?

Knowledge of Treatment Modalities

In which of the treatment modalities do you feel most familiar and confident?

What specific skills do you think you do well? Please give an example.

Which modality of treatment do you need to study more?

What issues and areas within that modality need more practice or clarification?

What are your plans to increase your knowledge in the above area?

Professional Issues

How satisfied are you with your personal self-care plan?

What seems to be helping the most?

Have you had any surprises in the area?

Do you anticipate any changes in your self-care plan?

How would you assess your success in establishing a network within your program and community?

What steps do you need to take to further enhance your network?

How would you assess your efforts at providing in-service training for staff?

As an educator, what are your strengths?

What is your plan to enhance your skills in staff education?

Summary

Please give your overall assessment of your progress towards reaching your goals as a professional working with adolescents with sexual behavior problems and their families.