

Bobby, 25

Station: Symptom retraining (functional symptoms)
Bobby, 25 (they/them) · 15 min reading · 20 min session · reflection

Progressive Muscle Relaxation

Competing Response Practice

Attentional Pendulation

Attention Experiment

Attention Practice Log

1 · 0–2'

2 · 2–5'

3 · 5–10' · Explain why

4 · 10–15' · Intervene

5 · 15–18'

6 · 18–20'

Session segment	Example prompt (say it your way)	Rubric line it evidences
1. Open and agree A shared goal 0–2 min	Agree the focus "Does that sound like a useful way to use today?" They and them "(Use they and them every time.)"	C3 Agreed a shared goal out loud C3 Used they/them throughout
2. Their picture Pattern and what they do 2–5 min	Skip 'it's real' "(They accept the diagnosis. Don't re-explain it.)" Early warning signs "What do you notice just before one starts?" What they do "What do you do when you feel it building?"	C2 Did not re-explain a diagnosis they already accept C1 Elicited early warning signs and the build-up C1 Asked what they currently do about it
3. Explain why Attention and holding in 5–10 min	The spotlight "Attention works like a spotlight. What we watch gets louder." Holding in turns it up "The harder you try to hold it in, the louder it gets." Not about control "This isn't about controlling it. It's a different response."	C1 Explained attention as a spotlight C1 Explained that suppression amplifies C1 Distinguished retraining from control
4. Intervene Trial two or three techniques, properly 10–15 min	Target and techniques "Which one would you like to start with?" Name the fear "Is there any worry about letting go, or losing control?" Practise now "Shall we try it right now, together?" Respond to what happens "What do you notice? Stay with that."	C2 Agreed a target and trialled two or three techniques C2 Surfaced the fear of losing control C2 Practised it in session C2 Responded to what happened during practice
5. Plan and task Home practice 15–18 min	Home practice "Try it at home when it's quiet, and note it in the log."	C1 Home practice starts when the symptom is absent or mild
6. Close Their words last 18–20 min	One take-away "What's the one thing you're taking from today?"	C3 Closed with a take-away

Bobby

- 25-year-old non-binary person (they/them)
- Lives with one housemate
- Close to family in a regional town
- Café counter work, now 4 hours a week

Diagnosis and team

- Functional tics and functional motor symptoms
- Clinic with physiotherapy, neurology and psychiatry
- Accepts the symptoms are genuine and involuntary

When symptoms are more likely

- Began during a period of significant stress
- Build-up before some movements, brief relief after
- Tired, stressed or overwhelmed

Their goals

- Stop arranging life around the symptoms
- Back to the climbing gym, friends and live music
- Respond differently to the movements
- Confidence moving and functioning with symptoms present

Referral

- Psychiatrist in the FND team, after diagnosis four months ago

Symptoms

- About 18 months of involuntary movements and sounds
- Shoulder and neck jerks, facial movements, limb jerks, left-hand tremor
- Throat clearing, brief sounds
- Leg shaking, weakness, trouble starting movement
- Getting more frequent

Assessment ratings

- Symptom monitoring and attention: moderate to severe
- Fear of symptoms and embarrassment: moderate to severe
- Avoidance: moderate
- Low mood: mild to moderate
- Activity restriction: moderate
- Readiness for retraining: moderate, worried about losing control

People

- Active social life before (friends, gigs, climbing); pulling back now