

# Major areas of life to explore in counseling

(Developed from Randy Patten's outline at GFC's Advanced CDT, September 13, 2025)

## 1. Life History

- a. Where were you born?
- b. Describe your school years.
- c. What was it like growing up in your home?
- d. Did you have any fears when you were young?
- e. Tell me about significant people or events that impacted your life.
- f. Can you tell me about a couple of accomplishments that were happy memories?
- g. Can you tell me about a couple of sad or hurtful events that have impacted your life?

## 2. Religious background/spiritual life

- a. When did you come to put your trust in Jesus as your Savior?
- b. What was your life like before you trusted Jesus?
- c. What was your life like after you trusted Jesus?
- d. Is there anyone you look to for spiritual guidance (mentor) or encouragement?
- e. Have you experienced much change in your life since you trusted Jesus as Savior?

## 3. Marriage

- a. How long have you been married?
- b. How long did you know your spouse before you were married?
- c. What drew you to your spouse?
- d. Have you been married before?
- e. What was your dating life like?

## 4. Parents/Family

- a. Are your parents still living and married?
- b. Are your parents followers of Christ?
- c. Did you get along well with your parents?
- d. How many siblings do you have and what order are you?

## 5. Work

- a. What do you do for work?
- b. Do you like what you do?
- c. Do you like the people you work with?
- d. How many hours do you work each week?

- e. How long is your commute and what do you do with that time?
- f. Why did you get into this line of work?

#### 6. Finances

- a. Do you ever worry about money?
- b. Have you struggled to pay your bills, anytime in the last six months?
- c. If married, do you two agree on how to handle your money?
- d. Do you have a budget?
- e. Do you have separate bank accounts? Why?
- f. Do you have a savings plan?

#### 7. Health

- a. Do you have any physical problems?
- b. How long have these been going on?
- c. Have you seen a Dr. about these?
- d. Are you on medication? For what?
- e. Do you have any trouble sleeping?
- f. Have you had any major surgeries?

#### 8. Influencers

- a. What news or podcasts do you listen to?
- b. Do you like to read books?
- c. How much time do you spend watching TV?
  - i. What do you watch?
- d. How many streaming services do you subscribe to?
- e. What sort of music do you listen to?
  - i. How often do you listen?
- f. What social media platforms do you check regularly?
  - i. Do you post things?
- g. Who are your best friends?
  - i. How long have you been friends?
- h. Who did you turn to for help when things were difficult?
- i. What are your hobbies?
  - i. How much time do you spend on them each week?
- j. When was the last time you looked at pornography? (Romance novels?)
  - i. Was it soft core or hard core?
  - ii. Can you please describe soft core porn to me?