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**Profile**

• Age & Gender: Female, 29 years old  
• Profession: Nurse  
• Context: History of school bullying, body dysmorphia, eating restriction, emotional overload linked to work, need for identity restoration.

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**Summary of Main Issues**

**1. Body Image Disorder**

• Persistent feeling of being 'too fat' despite a body deemed normal by others.  
• Control strategies: deprivation, exercise, food avoidance.  
• Established dysmorphia rooted in self-judgment and hyper-control.

**2. Internalized School Bullying**

• Active and passive bullying from middle school to 9th grade (threats, isolation, emotional manipulation).  
• Residual fear, withdrawal, and social mistrust.  
• Association between external judgment and relational danger.

**3. Restrictive Family Legacy**

• Parental model focused on weight control (obese brother, early imposed restrictions).  
• Repeated messages: 'it's not his fault', reinforcing guilt and comparison.  
• Moralized relationship with food.

**4. Professional Fatigue and Psychological Saturation**

• Gradual emotional disengagement in nursing ('I do what I have to do').  
• Exhaustion despite professionalism and patient recognition.  
• Attempted career change hindered by ineffective administrative support.

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**Dominant Emotions**

• Frustration, guilt, shame, residual fear, internalized anger, disillusionment.

**Limiting Beliefs**

• 'If I enjoy myself, I gain weight.'  
• 'My body is a problem to solve.'  
• 'I must not be weak, I must keep functioning.'  
• 'I’m too different to be accepted.'  
• 'If I don’t control everything, I fall apart.'

**Identified Triggers**

• Situations involving food-related pleasure (immediate blockage).  
• Comments about appearance.  
• Feeling excluded or unheard.  
• Administrative or hierarchical dysfunctions (increase sense of powerlessness).

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**Therapeutic Goals**

• Deactivate emotional anchors linked to school bullying.  
• Restore a kind and realistic body image.  
• Reconcile body and pleasure without guilt.  
• Build self-confidence and identity projection.  
• Reduce emotional overload linked to the nursing profession.

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**Proposed Solutions**

**1. Immediate Solutions**

• Food deconditioning exercise: observe a food purchase situation, note automatic thoughts → reframe.  
• Guided self-compassion (3 min/day): speak to oneself as to a friend ('You’re doing your best, and that’s already a lot.').  
• Positive body anchoring exercise: 1 minute of body gratitude each morning ('Thank you, legs', etc.).

**2. Intermediate Solutions**

• EMDR sessions focused on:  
 – Daily threats during school.  
 – Repeated restrictive phrases heard at home.  
 – Gazes on the body in changing rooms, stores, etc.  
• Therapeutic writing: letters to key figures of the past (unsent), especially 'Cynthia' from school.

**3. Long-Term Solutions**

• Reconnecting with body-pleasure (hypnosis + sensory work).  
• Gentle career redirection: coaching around meaning/values before any career change.  
• Restore inner safety by integrating old wounds, without rejection or overadaptation.

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**Personalized Hypnosis Session**

Theme: 'Loving my body, despite yesterday’s gazes'

Objectives:  
• Deactivate shame-related body anchors.  
• Reintegrate sensory pleasure.  
• Transform fear of judgment into inner strength.

Immersive induction excerpt:  
  
'...And in that memory, you were there, younger... walking fast... to protect yourself. And today, you slow down that walk. Because this body, the one you sometimes wanted to flee, it is still with you... it never abandoned you. It carried you, it endured, it lived. And in that breath, you can thank it... You no longer need to run...'

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**Follow-Up and Progress Indicators**

• Subjective body scale: weekly rating of 'how I feel in my body.'  
• Emotional journal: one sentence per day with 'Today, I was kind to myself when...'  
• Professional energy indicator: '0 to 10, how much did I want to go to work today?'

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**Final Motivation Statement**

*“You no longer have to earn your body. It’s already yours. You no longer have to earn your space. It belongs to you.”*