# CHAPTER 11

**Case 11.1: SMART Recovery Group**

In this group session, the costs and benefits of substance use were discussed.

**Social Work Intern (SWI):**Okay, so I’d like to propose that our agenda this week focus on building motivation to abstain from our addictive behaviors. How do people feel about that? I have a SMART tool that I can pass around that can help with that.

**John:** That sounds like it could be really helpful.

**Sarah:** I agree.

**SWI:** Okay, so what I am going to do is pass around this Cost/Benefit Analysis worksheet, which is to build motivation to abstain from using. In the worksheet you’ll see four boxes. In the upper left square, you’ll see it titled, the “Advantages of Using or Doing.” In the upper right square, the “Disadvantages of Using or Doing.” In the lower left square, it’s titled the “Advantages of NOT Using or Doing,” and the lower right square, the “Disadvantages of NOT Using or Doing.” So, in each square, go ahead and fill out the advantages or disadvantages of using and doing or not using and doing. Think about your addiction. What are the pros and cons of the squares? I’ll give everyone about 10 minutes to fill this out. Does anyone have any questions? No? Great. I’ll check back in, in about 10 minutes.

*(Ten minutes go by)*

**SWI:** Okay, everyone done? Mostly? Great. Now, at this point, we’ll go around the circle and if you feel comfortable talking about what you wrote, please share. If you’re not comfortable, feel free to pass. Does anyone want to start?

**Jessica:** I’ll start. So, the advantages of me using is it makes me feel good. It makes me forget about my problems. In the Disadvantages square, like, it gets me in trouble. It causes problems with my family. It may mess up my probation, and it’s expensive!

**SWI:** Those are all great reasons not to use, Jessica. What else?

**Jessica:** In my Advantages of NOT using, it’s like all the opposites. I don’t get in trouble. My family is happier. I’m safe probably, and I save money. Not to mention, I feel better about myself. I didn’t really have any disadvantages of NOT using.

**SWI:** Was that surprising to you?

**Jessica:** Yeah, it was. I think I would have had more disadvantages a few months ago.

**SWI:** That’s great. Thanks for sharing.

**Steven:** I really focused on the Advantages to not using. I don’t really want to go over all that I wrote down, but the part about making my family happier, I had that one too, Jessica. They really care about me, and I don’t want them to worry about me anymore.

**Jessica:** Yeah, my family definitely worries about me when I use.

**Chris:** Yep.

**SWI:** It sounds like a lot of you have concerns about your families.

**Sarah:** Definitely. I mean, my sister has kids, and she won’t let them near me if I’m drinking. I miss them.

**SWI:** So, I hear that you might want to be sober for them?

**Sarah:** That’s what I put on my sheet. Seeing everything written down, that makes it a lot clearer to me.

**SWI:** That tends to be very helpful for a lot of people in SMART, seeing what they’re thinking and feeling put down on paper.

**John:** Yeah, it’s definitely helped me. I didn’t realize how all this comes together. I’ve done the Cost/Benefit Analysis before, and mine has definitely changed since the last time I did it. I’d recommend you guys keep it so you can compare them the next time you do one.

**SWI:** So, John, what changed in yours?

**John:** A lot less benefits to using. A lot more disadvantages.

* How did this activity of cost and benefit analysis work?

Answer: Weighing the benefits and costs associated with substance misuse brought out answers that were personalized to each group member and seemed to boost motivation. When members summarized these for the group, the social intern noted commonalities in their reasons, thus building group cohesion.

**Case 11.2: Early Recovery Group at VA**

**SWI:** I thought it might be nice to try an activity today instead.

*(SWI hands out 5 ×5 bingo cards, entitled, “Substance Abuse Bingo”; there is laughter from the group members)*

**SWI:** I’ll give you all a moment to look it over.

**Deirdre:** I might get a bingo.

*(Laughter)*

**Sonny:** I already won.

**SWI:** It’s just like regular bingo. I have all the items on your sheet in this coffee cup, and I’ll call them out one by one. When you hear something that applies to you, mark it off on your sheet. When you get five, call out “bingo,” and then we will talk about the ones that gave you a bingo. Are there any questions about how this works?

**Arek:** Are these all associated with alcohol?

**SWI:** They’re associated with the substance of your choice.

**Walter:** I already have bingo.

*(Laughter)*

**Arek:** What’s a black out?

**SWI:** How do you define a black out?

**Arek:** Like, passing out and not remembering anything.

**SWI:** So, if that applies to you, then you’d check that off.

*(SWI proceeds to call out various items, until Sonny calls out, “bingo.” He lists off the five he’s marked off.)*

**SWI:** So out of all of those, which one affected you the most?

**Sonny:** The “screwed up relationships” one. I have six kids, from four different baby mammas.

**Arek:** Wait, how many?

**SWI:** How did alcohol affect those relationships?

**Sonny:** We would get into arguments. The night would start off nice and end terribly. And this other one, the “legal problems” one. I’ve been pulled over four times, but got lucky on three of them. The “debt” one. I spent so much money on alcohol. The “hospitalized” one. I was hospitalized on my 30th birthday. My girlfriend at the time, she threw me into a cold shower as my punishment, but like it didn’t work. I thought I’d been drugged, but it was just alcohol.

**Maria:** Ninety percent of these things have happened to me.

**Deirdre:**Being honest with myself, me, too. Almost all of these pertain to me. Like, “hospitalized.” That’s why I’m here.

**SWI:** That sounds like a wake-up call.

* What do you think of the exercise the social work intern used to get at a discussion of the disadvantages of the problem behavior?
* What stage do the group members appear to be in?

Answer: The Bingo game was a creative way to carry out a decisional balance, weighing the pros and cons of a problem, and allowing group members to speak about consequences they’ve experienced from substance misuse. The light-hearted nature of a “game” through which this was done might have reduced shame. One of the therapeutic properties of groups is that when people share behaviors and learn that others have experienced them, too, their sense of aloneness and shame diminishes.

**Case 11.3: Partial Hospitalization Program Treatment Group**

This is the group highlighted in Case 4.6. As you review the dialog here, this time focus on the stages of change exhibited by each member.

**Julie:** Some of you know what’s going on with my boyfriend. This weekend I finally came close to leaving. I not only packed the bag, but I zipped it. We had a bad weekend together. I’m just tired of him treating me anyway he wants.

**Leader:** Julie, you say this every week! You say he treats you bad and you want to leave, yet you continue to stay! Well, I guess you at least zipped the bag this week . . . looks like you’re making some progress.

**Julie:** I know, I know. Someday, me and the bag will make it out the door for good!

**Mary:** What happened this weekend?

**Julie:** I told him that I wanted to go to a group that was for people with depression, and I needed his car. He told me that I didn’t need to go to the group because I was doing fine. I told him that I would be leaving here soon, and I needed another place to go for support. He refused to let me use his car. Then, I told him I had a family meeting yesterday and I wanted him to come, but he wouldn’t. That’s when things broke out into a big fight and I told him, “I’m tired of you treating me bad. I don’t deserve you head butting me like you did the other weekend, and putting me down all the time.”

**Leader:** Again Julie, you say you shouldn’t stay with him, yet you do. What is making it so difficult for you to leave him?

**Julie:** Well, I know I need to be on my own, but it’s still hard. I just need to break up with him and concentrate on myself.

**Brenda:** I know what you’re going through, and you need to get out of that situation. When my husband and I first got married, he would put me down all the time. Then, he began hitting me and would even lock me in rooms for days at a time. I didn’t get out. You need to.

**Leader:** You see Julie, Brenda was where you were, and she made the decision to stay. You need to decide for yourself if this is what you want. You need to focus on yourself, not on others.

* In what stage of change did the group member appear to be?
* What signs led to your conclusion?
* What strategies could the facilitator use by working within the stages of change model and MI?

Answer: She seems to be at the contemplation stage as she “packs her bags” and doesn’t leave her boyfriend, even though she thinks she should.

Rather than scolding her, the facilitator could ask about what needs are missing from the relationship, such as support. The facilitator could engage the group in the support that is inherent there. Other group members may possibly relate to this discussion; they also may be struggling with decisions about life circumstances or taking steps to put coping skills in action they have used as a result of being in the partial hospitalization.

**Case 11.4: Substance Use Disorders Treatment Group**

In a review of the dialog from Case 10.1, now consider how you might use a simple reflection in the group with “James.”

**James:** I don’t even know why I’m here. I have no plans of stopping my drinking any time soon.

**Dave:** Well, you wouldn’t have even thought of coming, much less come, if you didn’t have plans of ever quitting.

**Matt:** I agree.

**Sam:** Me, too. I was where you were—in denial.

**James:** I’m not in denial. I’m just honest. I’m not like you guys. I have no desire to quit. My dad died a drunk, and he was a good man. So if it was good enough for him, then it’s good enough for me.

**Matt:** Then why are you here?

**James:** I don’t know. This is a waste of time.

**Facilitator:**What do you mean a waste of time?

**James:** Have you not been listening? I don’t plan on quitting. I don’t want to talk about quitting, so this group is a waste of time. I’mgonna leave and go home.

**Matt:** Come back when you’re ready to talk.

**Facilitator:** Why don’t you stay until the end and listen to the others? We also are giving job training information.

**James:** I don’t want to listen to anyone else complain. I can go to my sister’s house for that.

**Facilitator:** Why don’t you go ahead and stay? I think you would really get use out of the job training info.

**James:** You think? You don’t know me. And if I recall, this is an open-ended group, and that means I can come and leave when I want.

*(This exchange went back and forth for about 5 more minutes until James got up and left the group.)*

Answer: Obviously, there is more ambivalence to this picture. Although James announces he doesn’t have a problem, he is at a group for treatment of addiction. This scenario shows how people might "dig in their heels" if they are feeling defensive. Simple reflection allows for the possibility of the other side of ambivalence to emerge.

**Case 11.5: Substance Use Disorders Treatment Group**

In Returning to Case 11.4, now consider how you might use an amplified reflection in the group with “James.”

Answer: “You have no issues with alcohol at all and have no idea why you’re even here.”

**Case 11.6: Substance Use Disorders Treatment Group**

In In reference to Case 11.4, how can you use double-sided reflection with James?

Answer: “You have no issues with alcohol use and you’re in a group for people with addiction problems.”

**Case 11.7: Substance Use Disorders Treatment Group**

How would you use “shifting focus” with James?

Answer: “We’re not talking about you quitting at this point; maybe we can figure out the difference between okay and unhealthy use

**Case 11.8: Substance Use Disorders Treatment Group**

How would you use “agreement with a twist” with James?

Answer:“You may not necessarily have a problem, but being in group may clarify some questions you may have about what is normal drinking and what is not.”

**Case 11.9: Substance Use Disorders Treatment Group**

How would you clarify free choice with James?

Answer: “You’re right, it’s up to you whether you want to stay in this group or not.”