

## **Welcome!**

### ***What You Can Expect From Us***

Help for your alcohol and drug problem. Treatment consisting of five sessions, covering a 5 to 8 week period. First you'll have two individual sessions, then three group sessions. The sessions are designed to give you support and information about coping and to help you with substance-related problems. In the group sessions, you'll get a chance to practice some coping skills and get feedback from other program clients.

**Effective treatment.** Delivered by a competent therapist. Your therapist is \_\_\_\_\_.

**Confidential treatment.** What you tell us in treatment is confidential, meaning that we cannot tell anyone what you said without your permission, with the exception of those people described on the consent form. However, if you tell us that you are going to harm yourself or another person, or tell us about child abuse or neglect, we are required by law to inform those who can obtain help for you or for others.

### ***What We Ask From You***

**Attendance.** We ask that you come **on time** to all of your scheduled appointments. If you must cancel, we ask that you call the treatment program number (\_\_\_\_\_-\_\_\_\_\_) so that your therapist can be notified ahead of time and can call you to reschedule.

**A clear head.** We ask that you not use any drugs or alcohol on days when you have an appointment with your therapist. We believe that you will be able to benefit most from this program if you are not under the influence during your sessions.

**Completion of treatment.** We hope that you will come to all of your scheduled sessions. If, however, you ever consider leaving treatment early, we ask that you discuss this with your therapist as soon as possible.

## Personal Goal Worksheet

This is my goal regarding my alcohol and drug use:

---

---

Here are some important reasons for my goal:

---

---

---

The steps I plan to take to achieve my goal are:

---

---

---

---

Name \_\_\_\_\_

Date \_\_\_\_\_

# Sample Knowledge Is Power Form

Example: how the self-monitoring record may look after reviewing a recent episode of use:

## Personal Awareness: What Happens Before and After I Use Alcohol and Drugs?

TRIGGER	THOUGHTS AND Feelings	BEHAVIOR	POSITIVE Results	NEGATIVE Results
(What sets me up to be more likely to use alcohol or drugs?)	(What was I thinking? What was I feeling? What did I tell myself?)	(What did I do then?)	(What good things happened?)	(What bad things happened?)
Friend called and invited me to get high with him. Nothing else to do.	“I want to reward myself.” “I’m bored.” “Felt good about going 15 days w/o using, so felt OK about getting high today.”	Went out with friend and used.	Had fun. Felt good to get high, having gone 15 days without.	Broke the 15-day abstinence (although wasn’t too worried about this). Didn’t get as much done. Didn’t feel as healthy.

# Knowledge Is Power

Personal Awareness: What Happens Before and After I Use Alcohol or Drugs?

TRIGGER	THOUGHTS AND Feelings	BEHAVIOR	POSITIVE Results	NEGATIVE Results
(What sets me up to be more likely to use alcohol or drugs?)	(What was I thinking? What was I feeling? What did I tell myself?)	(What did I do then?)	(What good things happened?)	(What bad things happened?)

## Information and Expectations: Group Sessions

Group sessions will last 75 minutes. Please arrive on time and attend all group meetings.

If you cannot attend a group meeting, please call \_\_\_\_\_ at \_\_\_\_\_ ahead of time. If you miss a group session, you will be asked to make it up before or after the next session.

Your active participation is important to the whole group. All group members are asked to listen to one another without interrupting, to respect the opinions of others, and to offer feedback to other group members.

Each group member's confidentiality is to be respected. What is said in group stays in group; please do not discuss what is said in group.

In order to make the group a safe place with a positive focus, the following behaviors are not allowed in group:

- Coming to group under the influence
- Threatening remarks or gestures
- Excessive profanity
- Wearing gang-related clothing
- Sexually inappropriate comments, gestures, or clothing
- "War stories," bragging about drug and alcohol use
- Exclusive relationships

The above behaviors could result in a client being asked to leave the group.

I have read this information sheet, and I agree to comply with the expectations for positive participation in group.

\_\_\_\_\_  
client

\_\_\_\_\_  
date

\_\_\_\_\_  
therapist

\_\_\_\_\_  
date

# **Assertive Communication & SUBSTANCE REFUSAL SKILLS**

*Why?*

- **Immediate, effective response is needed when someone is pressured to use alcohol or drugs.**
- **One's social circle narrows with increased substance use.**
- **It's best, but not always possible, to avoid high-risk people and situations.**

## SUBSTANCE REFUSAL SKILLS

<b>Response Type</b>	<b>This Kind of Person</b>	<b>Response Example</b>
Passive	Tends to give up his or her own desire in favor of another person’s desire. Doesn’t let others know what he or she is thinking or feeling.	<i>“I didn’t want to smoke pot tonight, but if you want us to, we might as well smoke.”</i>
Aggressive	Acts to protect his or her own rights but runs over others’ rights in the process, which can cause others not to like him or her.	<i>“I’m not smoking weed and I don’t want anyone smoking around me! I’m throwing everyone’s weed away!”</i>
Passive-Aggressive	Is indirect, hints at what he or she wants, possibly causing confusion and/or resentment in others.	<i>“Are you all going to get stoned now? You know I’m in the treatment program. . . .”</i>
Assertive	States his or her position and makes a direct request.	<i>“I’ve quit smoking pot and I’d like it if you would not ask me to smoke with you anymore. I still want to get together with you to do other things, like shooting some hoops, okay?”</i>

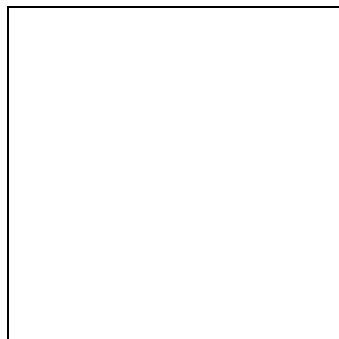
# SKILL GUIDELINES

## **Nonverbal Behaviors:**

- Make eye contact.
- Don't feel guilty about refusing alcohol or drugs.

## **Verbal Behaviors:**

- Speak in a clear, firm voice.
- "No" should be your first word.
- Suggest something fun and safe to do instead.
- Change the subject.
- Avoid excuses or vague answers.
- If pressure continues, ask him or her to stop asking you to use.





## Real Life Practice

Listed below are some examples of people who might offer you alcohol or drugs in the future. Give some thought to how you will respond to them, and write your responses below each item.

Someone close to you who knows about your alcohol or drug problem:

---

---

A school friend:

---

---

A coworker (if you have a job):

---

---

A new acquaintance:

---

---

A person at a party with others present:

---

---

A relative at a family gathering:

---

---

Self talk:

---

---

# Knowledge Is Power

Personal Awareness: What Happens Before and After I Use Alcohol or  
Drugs?

TRIGGER	THOUGHTS AND Feelings	BEHAVIOR	POSITIVE Results
(What sets me up to be more likely to use alcohol or drugs?)	(What was I thinking? What was I feeling? What did I tell myself?)	(What did I do then?)	(What good things happened?)

# ENHANCING ONE'S SOCIAL SUPPORT NETWORK



## **WHY?**

- When people try to quit alcohol or drugs, support helps them succeed.
- People often don't have as much support as they would like.

## **Skill Guidelines**

### **WHO might provide good support?**

- Consider family, friends, acquaintances, others in your community.
- Someone who is usually supportive.
- Someone who is usually neutral.
- Someone who might become supportive.

### **WHAT kinds of support can you ask for?**

- Help with problem solving.
- Information.
- Moral support.
- Sharing the load.
- Emergency help.

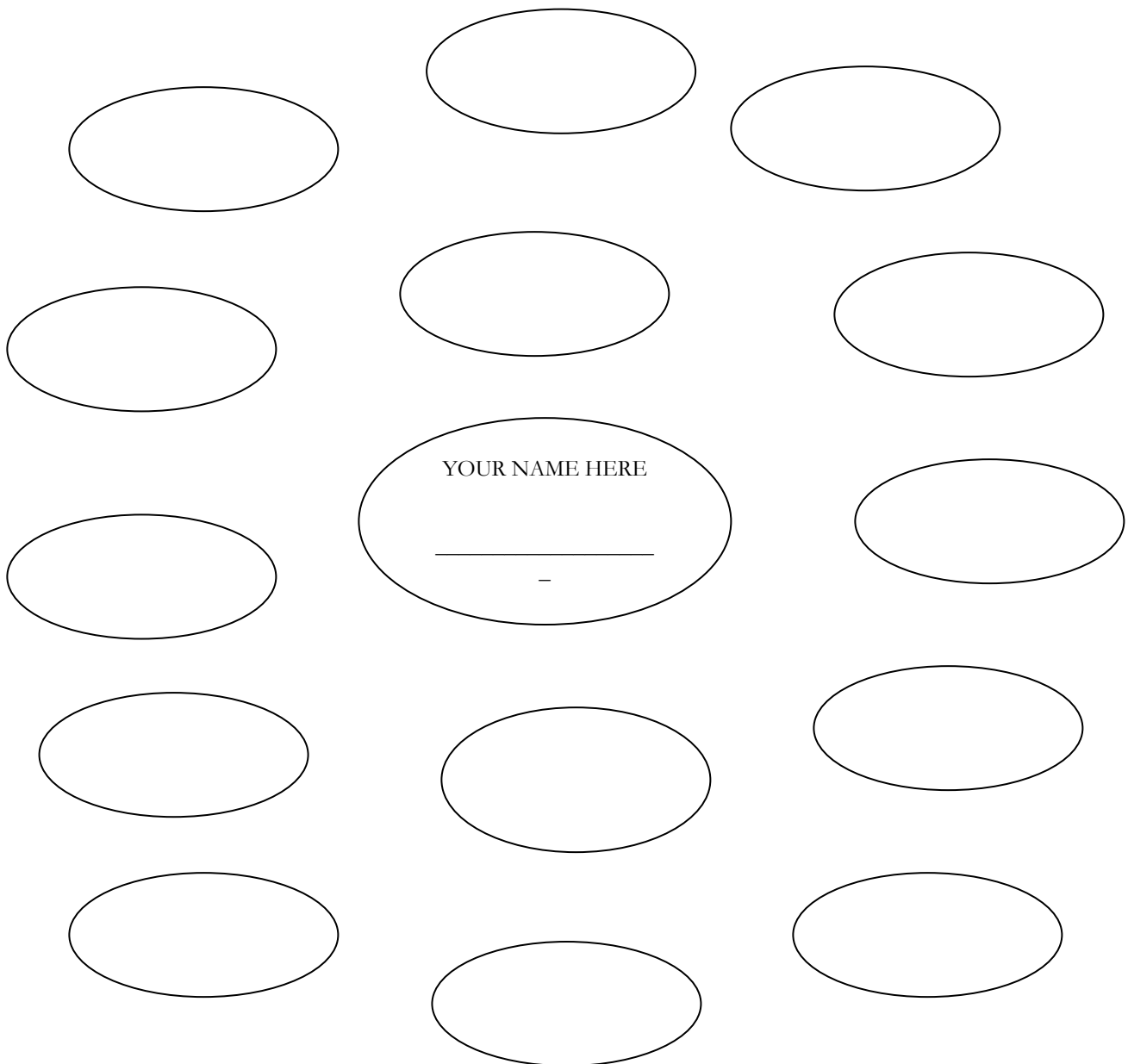
### **HOW can you get the support you need?**

- Ask for what you need.
- Add new supporters.
- Lend your support to others.
- Give your supporters feedback.

## Social Circle Diagram

Use the grid below to diagram your own social support circle, focusing on those who could support you in addressing your alcohol or drug use issue.

Put your name in the center space, then fill in the names of those who do and/or could support you in your goal. Put the people who could be of greatest support to you closest to your space. Fill in as many of the spaces as you can.



The diagram consists of a grid of 15 empty ovals arranged in three columns and five rows. The central oval in the middle row contains the text "YOUR NAME HERE" above a horizontal line, with a small dash centered below the line. This central oval is larger than the other 14 ovals in the grid.

## Enhancing Social Supports Reminder Sheet

**WHO** might be able to support you? Consider people in the past who have been:

- Usually supportive, such as friends, family, acquaintances, or others in your community
- Usually neutral (aren't coming in with a bias against you)
- Not supportive, but might become supportive when they see your effort

**WHAT** types of support will be most helpful?

- Help with problem solving—someone good at thinking of options
- Moral support—offers encouragement and understanding
- Sharing the load—help with getting things done
- Information—about activities, transportation, getting a job, etc.
- Emergency help—for small loans, needed items, a ride, etc.

**HOW** can you get the support or help you need?

Ask for what you need. Be direct and specific.

- **Add new supporters.** As you work on something new, like trying to quit marijuana, you may need new or additional supporters.
- **Lend your support to others.** It allows you to get better at receiving support.
- **Give your supporters feedback.** Let them know when something is or isn't helping.

Adapted from Monti et al., 1989

## Real Life Practice: Seeking and Giving Support

Offer support to someone else.

Name a friend or family member who is currently having a problem and who could use more support from you: \_\_\_\_\_

\_\_\_\_\_

Describe what you could do to lend him or her some support: \_\_\_\_\_

\_\_\_\_\_

Now, choose an appropriate time and setting, and give support to this person. Describe what happened: \_\_\_\_\_

\_\_\_\_\_

Think of a current problem that you would like help with.

Describe the problem: \_\_\_\_\_

\_\_\_\_\_

Who might help you with this problem? \_\_\_\_\_

\_\_\_\_\_

What might he or she do to give you the support you'd like?

\_\_\_\_\_

How can you get this support from him or her? Remember, be direct and specific: \_\_\_\_\_

\_\_\_\_\_

Now, choose the right time and situation, and try to get this person to support you. Describe what happened: \_\_\_\_\_

\_\_\_\_\_

Adapted from Monti et al., 1989

# Knowledge Is Power

Personal Awareness: What Happens Before and After I Use Alcohol or Drugs?

TRIGGER	THOUGHTS AND Feelings	BEHAVIOR	POSITIVE Results	NEGATIVE Results
(What sets me up to be more likely to use alcohol or drugs?)	(What was I thinking? What was I feeling? What did I tell myself?)	(What did I do then?)	(What good things happened?)	(What bad things happened?)



# **PLANNING FOR RISK AND COPING WITH RELAPSE**

Why?

- Preparation for an emergency increases good coping skills.
- Problem solving is a way to cope.
- Emergencies and relapses are learning opportunities.

## **SKILL GUIDELINES**

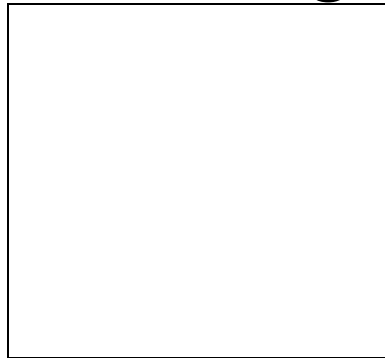
Types of Possible Emergencies:

- An unanticipated substance trigger.
- Separation from an important person in your life.
- School problems.
- Adjustment to a new life situation or new responsibilities.

Practice the Steps for Solving Problems

S.O.L.V.E. – State, Options, Look at Consequences, Vote & Evaluate

# Steps for Problem Solving



## **Recognize that a problem exists.**

1. S = State the problem. Think: What is the problem?
2. O = Consider various options (brainstorm):  
What can I do?
3. L = Look ahead to the good and bad that may come out of each possible approach.
4. V = Vote on one, and do it.
5. E = Evaluate the outcome: Did this work for me?

# Relapse Prevention Plan

Plan for: \_\_\_\_\_  
Name

Here are some possible high risk situations that I want to be prepared for:

---

---

If one of these situations happens, this is how I will help myself cope:

- **DO the following:**

- \_\_\_ Think things through.
- \_\_\_ Cool down by: \_\_\_\_\_
- \_\_\_ Distract myself with:
  - \_\_\_ Physical activity. What kind? \_\_\_\_\_
  - \_\_\_ Doing something relaxing. What? \_\_\_\_\_
  - \_\_\_ Media (music, book, magazine, TV, movies).  
Which media? \_\_\_\_\_
  - \_\_\_ Something creative (writing, art, dance). Which  
one(s)? \_\_\_\_\_
  - \_\_\_ Ask or call someone for help

## Helpful People

Who	Phone Number

- **DON'T DO the following:**

- \_\_\_ Drink alcohol, use drugs.
- \_\_\_ Act without thinking.
- \_\_\_ Get overemotional.
- \_\_\_ Isolate myself and/or stay away from people who care about me.
- \_\_\_ Stay in a high-risk situation.

If the situation involves a relapse to alcohol and drug use, the following steps will help me stop using:

---

---

---