

COGNITIVE BEHAVIORAL THERAPY

A Training Agenda for Supervisors and Line Staff

Day One:

SECTION 1: INTRODUCTION

08:00 - 08:30 Registration

08:30 - 08:50 Welcome

Introduction

- Introductions of Faculty and Participants
- Housekeeping Rules
- Learning Objectives
- Parking Lot

Organization of the Training

- Training Segments

SECTION 2: OVERVIEW

08:50 - 09:10 Eight Principles of Recidivism Reduction/Tie-in

- Definition of CBT

SECTION 3: CRIMINAL THINKING/ANTI-SOCIAL LOGIC

09:10 - 10:10 Introduction

- Learning Objectives
- Overview

Criminal Thinking Continuum

Common Thinking Errors

10:10 - 10:25 Break

SECTION 4: COGNITIVE BEHAVIORAL THERAPY

10:25 - 11:00 Introduction

- Learning Objectives

Difference Between CBT and Traditional Therapy

Underlying Principles of CBT

Five (5) Basic Rules of CBT

Two Categories of CBT: Cognitive Restructuring and Cognitive Skills

SECTION 5: COGNITIVE RESTRUCTURING, Part 1

11:00 -12:00 Four Steps of Cognitive Self-Change

Thinking Reports

Five Parts of a Thinking Report

12:00 - 1:00 Lunch

1:00 - 2:30 Facilitating Thinking Reports

2:30 - 2:45 Break

2:45 - 4:00 Thinking Reports

Day Two:

08:30 - 08:45 Review of Day 1 and Overview of Day 2

08:45 - 10:00 Thinking Reports (cont'd)

10:00 - 10:15 Break

SECTION 10: COGNITIVE RESTRUCTURING, PART 2

10:15 - 11:45 Interventions

- Defining Interventions
- Intervening Techniques
- Intervention Musts

Relapse Prevention

- Definitions
- Four Common Triggers/High Risk Situations
- Learning Activity

11:45 - 12:45 Lunch

SECTION 6: COGNITIVE SKILLS

12:45 - 1:00 Overview

- Learning Objectives
- Various Cognitive Skills

SECTION 7: COGNITIVE SKILLS - MANAGING EMOTIONS AND IMPULSIVITY

1:00 - 2:30 Managing Emotions and Impulsivity

2:30 - 2:45 Break

SECTION 8: COGNITIVE SKILLS - ASSERTIVENESS SKILLS DEVELOPMENT

2:45 - 4:00 Assertiveness Skills Development

Day Three:

08:30 - 08:45 Review of Day Two and Overview of Day Three

SECTION 9: COGNITIVE SKILLS - PROBLEM SOLVING

08:45 - 10:15 Problem Solving

10:15 - 10:30 Break

**SECTION 11: INTEGRATING PRINCIPLES OF RISK/RECIDIVISM
REDUCTION INTO PRACTICE**

10:30 - 12:00 Introduction

- Learning Objectives

Case Planning

12:00 - 1:00 Lunch

1:00 - 2:30 Case Planning (cont'd)

2:30 - 2:45 Break

2:45 - 3:45 Case Planning (cont'd)

SECTION 12: CONCLUSION

3:45 - 4:00 Application

Training Evaluation

COGNITIVE BEHAVIORAL THERAPY AND CASE PLANNING

A Training Curriculum for Supervisors and Line Staff

GOALS AND OBJECTIVES:

The primary goal of this curriculum is to address the fourth principle for risk/recidivism reduction by changing offender behavior through cognitive behavioral interventions and case planning activities.

Objectives include:

- To integrate assessment information into strategies for self-improvement and change
- To learn cognitive behavioral models for change (cognitive skills, such as relapse prevention, assertiveness training, etc.) and apply them in relationship to the offender's criminogenic needs.
- To provide therapeutic support to offenders throughout their supervision terms
- To provide supervisors with knowledge and skills in cognitive behavioral therapy in order to provide support training for staff.

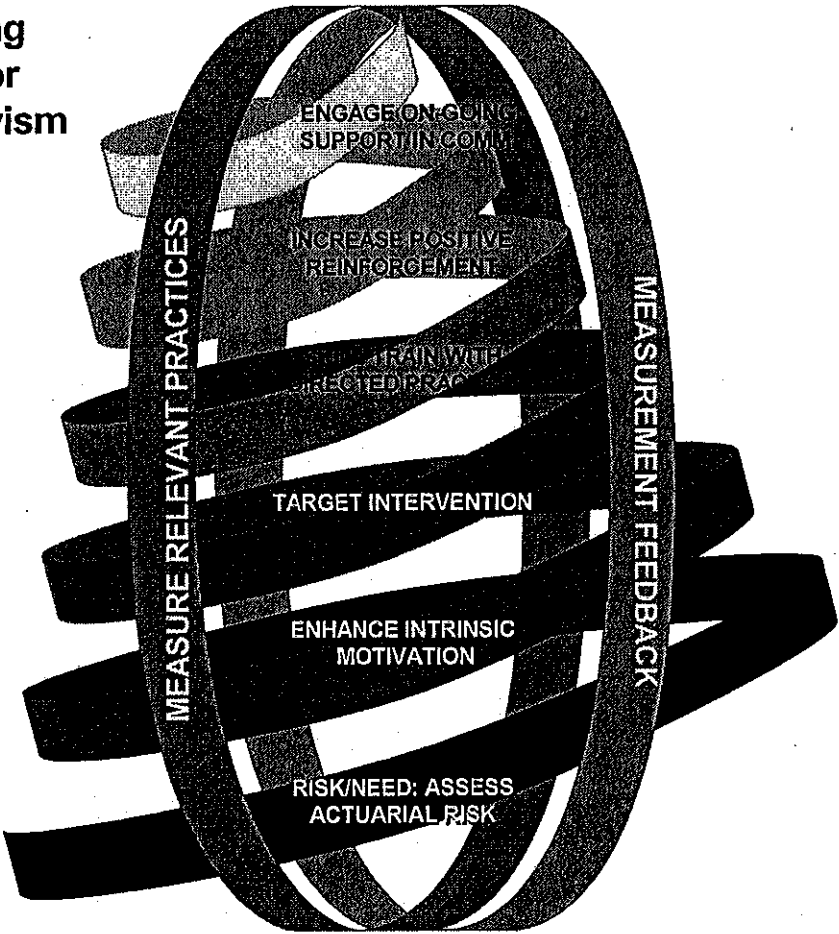
SECTION 2 Overview

Participant Objectives:

- Understand the overall concept of reducing risk and recidivism through best practices
- Learn about the eight guiding principles of reducing risk and recidivism
- Understand Hawaii's effort in utilizing the principles in reducing risk and recidivism
- Learn about the history of cognitive therapy and behavioral therapy
- Learn about the convergence of both therapies
- Learn about its current application in effecting change

EIGHT GUIDING PRINCIPLES FOR RISK/RECIDIVISM REDUCTION

Eight Guiding Principles for Risk/Recidivism Reduction



EXERCISE ON THE EIGHT GUIDING PRINCIPLES FOR RISK/RECIDIVISM REDUCTION

Below are brief descriptions of the Eight Guiding Principles in practice. Identify which principle corresponds with each description.

Principle # _____ Offender is matched to the appropriate level of services.

Principle # _____ The officer supports the offender's progress with positive reinforcement. This is done by offering rewards for favorable behaviors at an ideal ratio of 4 reinforcers to 1 punishment.

Principle # _____ The officer keeps the offender's information on electronic database such as Prober and Cyzap. This ensures accountability and allows for measurement of outcomes.

Principle # _____ After identifying the top three criminogenic needs, the officer then works with the offender to determine his readiness for change. The officer uses skills that lower resistance, explore ambivalence, and direct the offender towards change.

Principle # _____ The officer's work with the offender is electronically stored and allows for feedback which can be readily shared amongst the agency. This feedback is necessary to determine if the agency is meeting desired outcomes.

Principle # _____ The officer assists the client in obtaining support in the community, such as by being involved in support groups, vocational trainings, and/or educational pursuits.

Principle # _____ The officer first triages the case by applying a Proxy. The LSI-R, ASUS and trailer instruments are administered for those scoring above a cutoff level. Data gathered from the instruments include, among others: 1) Risk, 2) Protective Factors, 3) Recommended Treatment, 4) Classification Level, 5) Recidivism Percentage, 6) Stage of Change, and 7) Criminogenic Needs.

Principle # _____ The officer teaches the offender cognitive restructuring and cognitive skills to address criminogenic need areas through the tell, show, try model.

SECTION 3

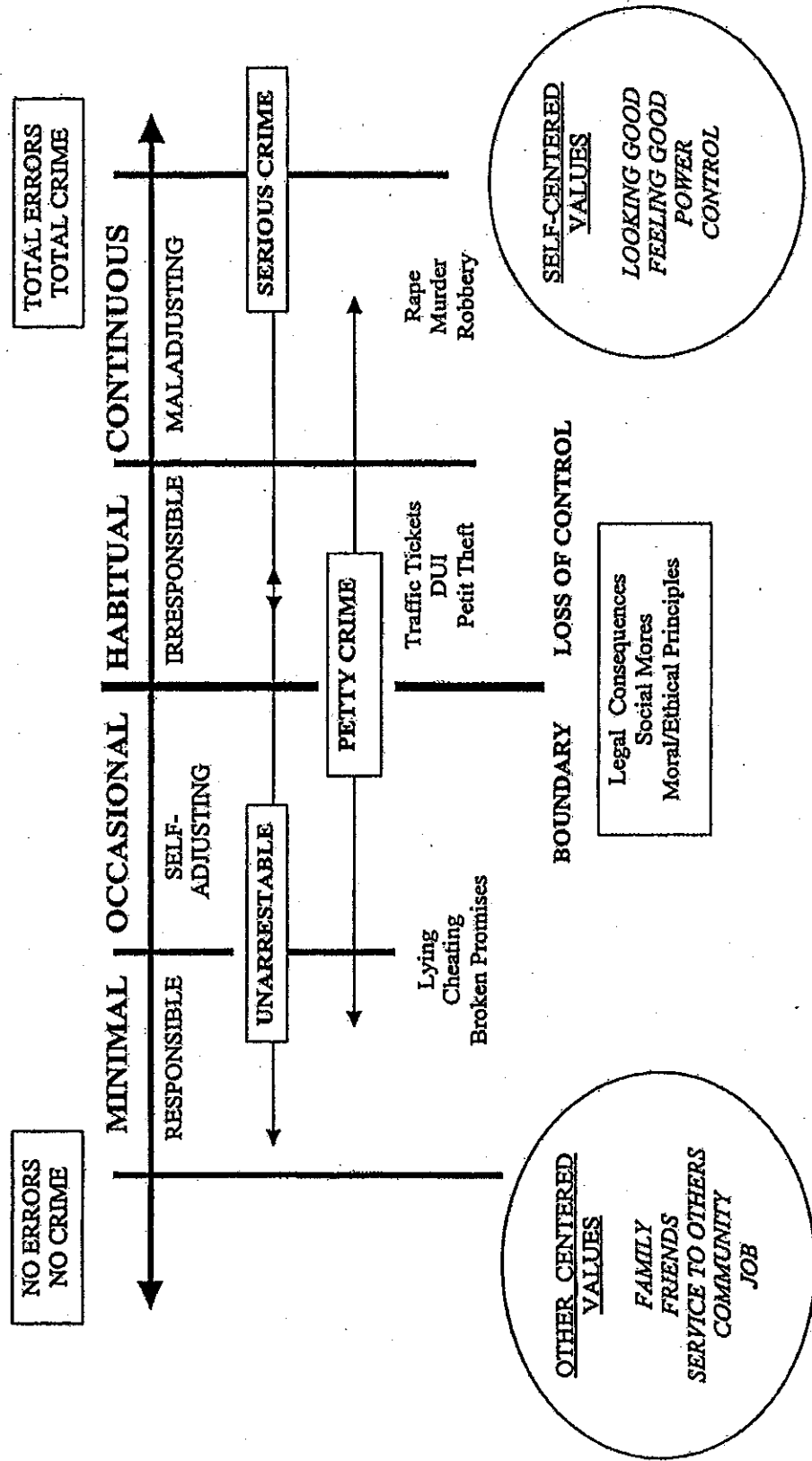
Criminal Thinking/Anti-Social Logic

Participant Objectives:

- Learn the “logic” of criminal thinking and how it produces criminal behaviors, and how it is associated with criminogenic risk factors
- Understand how criminal logic limits the offender’s ability to perceive the world
- See the correlation between thoughts and behaviors that are not criminal but may cause problems or hurtful behaviors

CRIMINAL CONTINUUM

CRIME -- Anything that infringes on the rights, dignity, or property of another.



LEARNING THE REWARDS OF CRIMINAL THINKING

"X?11?!"
(Dehumanize)

"My Interests
come first."

"No one is going
to control me."

"I can do what I
want."

"Everyone is
selfish."

Self-
Centered
Thinking

Power
Struggle

REINFORCEMENT

WIN

LOSE

Detection,
Punishment

Belittled
Threatened

Crime,
Irresponsibility,
Violence

Victim Stance
Righteous Anger

License

Thinking Error Characteristics of the Criminal
(from Yochelson and Samenow "The Criminal Personality")

- Error 1 **Energy** - The criminal is extremely energetic. His/her high level of mental activity is directed to a flow of ideas as to what would make life more interesting and exciting.
- Little energy for routine tasks. Lots of energy for excitement.**
Example: "I'm too tired to work today, I was out all night."
- Error 2 **Fear** - Fears in the criminal are widespread, persistent, and intense; especially fears of being caught for something, fear of injury or death, and fear of putdown.
- I will lose respect if I don't act.**
Example: "I'm not going to let him get away with that. I'm not weak."
- Error 3 **Zero State** - This is the periodic experience of oneself as being nothing, "a zero"; a feeling of absolute worthlessness, helplessness, and futility.
- The thought that I'm worthless.**
Example: "I'm just another piece of shit inmate."
- Error 4 **Anger** - Anger is a basic part of the criminal's way of life. (S)He responds angrily to anything (s)he interprets as opposing what (s)he wants for himself/herself. Anger is, for the criminal, a major way of controlling people and situations.
- Use of threat to control others.**
Example: "Pay me by Tuesday or else."
- Error 5 **Pride** - Criminal pride is an extreme high evaluation of oneself. It is the idea that one is better than others, even when this is clearly not the case. Criminal pride preserves his/her rigid self-image as a powerful, totally self-determining person.
- Glorifies his/her criminality.**
Example: "Yes, I shot him. So what do you want to do about it, punks?"
- Error 6 **The Power Thrust** - The criminal needs control and power over others. His/Her greatest power excitement is in doing the forbidden and getting away with it. His/Her need for power, control, and dominance show in all areas of his/her life. The occasions when the criminal appears to show an interest in a responsible activity are generally opportunities for the criminal to exercise power and control.
- Elevate one's self at the expense of others.**
Example: "He's just a sniveling punk."
- Error 7 **Sentimentality** - Criminals are often excessively sentimental: about their mothers, old people, invalids, animals, babies, their love attachments, plans for the future, etc.
- Commits criminal acts to express caring.**
Example: "I only stole to get money for my mom's operation."

- Error 8 **Religion** - The criminal uses religion to support his/her way of thinking and his/her criminality. His/Her religious ideas are usually over literal and concrete. Religion (like sentimentality) does not consistently deter his/her criminal thinking or actions, but does support his/her self-image as a good and decent person.
- Beliefs make it all right to do something wrong.**
Example: "God forgives me. I don't care what you think."
- Error 9 **Concrete Thinking** - Criminal tend to think in terms of particular objects and events, rather than general and abstract concepts.
- Considers an object as all good or all bad.**
Example: "He never leaves me alone."
- Error 10 **Fragmentation** - This is a very basic feature of the criminal personality. It refers to radical fluctuations in the criminal's mental state that occur within relatively short periods of time. There is a pattern of starting something, and then changing his/her mind. (S)He will make commitments with sincerity and great feeling, and break these commitments within the hour. (S)He may feel sentimental love for his/her children, and steal their money to buy drugs. His/Her personality is a collection of distinct, isolated, and contradictory fragments.
- Makes commitments then breaks them.**
Example: Promises to buy groceries but stops at the bar instead.
- Error 11 **Uniqueness** - The criminal emphasized his/her total difference from other people. (S)He feels himself/herself to be special, "one of a kind."
- I'm special, one of a kind.**
Example: "Why did they give me so much time. I was only driving."
- Error 12 **Perfectionism** - The criminal has extreme standards of perfection, although (s)he applies these standards sporadically and inconsistently.
- Extreme standards of perfectionism.**
Example: "The work won't be done right, so I'll destroy it to collect the insurance."
- Error 13 **Suggestibility** - The criminal is (1) very suggestible with respect to any behavior that leads to what (s)he wants; (2) very resistant to suggestion toward responsible thinking and behavior.
- Open to suggestions to act irresponsibly.**
Example: "Yah, I'll go, no one will notice if I'm late."
- Error 14 **The Loner** - The criminal leads a private, secretive life; one against the world (including fellow criminals). (S)He feels himself/herself to be apart from others, even if outwardly (s)he is active and gregarious.
- One against the world**
Example: "I'm going to do what I want to do to survive whether it's right or wrong. I'm a convict."

- Error 15 **Sexuality** - Criminals have plenty of sexual experience, but little in the way of sensual gratification or competence in performance. Conquest is essential, and a partner is regarded as a possession.
- Conquest is essential, partner is my possession.**
Example: "She looks like she'd be good for one night."
- Error 16 **Lying** - For the criminal, lying is a way of life. Lying is incorporated into his/her basic make up, and feeds other criminal patterns. More common than premeditated lying is a habitual lying, which becomes automatic. The criminal defines reality with his/her lies, and so maintains control.
- Use of lies to maintain control.**
Example: "I had to say that's what happened."
- Error 17 **The Closed Channel** - In treatment, an open channel of communication requires disclosure, receptivity, and self-criticism. Instead, the unchanged criminal is secretive, has a closed mind, and is self-righteous. If therapy for the criminal is to be effective, an open channel between the criminal and his/her therapist must be established.
- Closed minded.**
Example: "I don't care what he thinks."
- Error 18 **"I Can't"** - The criminal says "I can't" to express his/her refusal to act responsibly. (At the same time, (s)he believes there is nothing (s)he can't do that (s)he wants to do.) The criminal says "I can't" to escape accountability for what (s)he does.
- "I can't" is used to escape accountability.**
Example: "I can't get up on the morning."
- Error 19 **The Victim Stance** - When the criminal is held accountable for his/her irresponsible actions, (s)he blames others and portrays himself/herself as a victim. The world does not give him/her what (s)he is entitled to, so (s)he views himself/herself as poorly treated and thus a victim.
- Blames others, sees self as a victim.**
Example: "I wouldn't be here if my partner hadn't given me up."
- Error 20 **Lack of Time Perspective** - Even more than wanting what (s)he wants when (s)he wants it, the criminal demands immediate possession and success. (S)He must be the best have the best, right now.
- Demands immediate possession and success.**
Example: "I had to get to the coast right away so I stole a car."
- Error 21 **Failure to Put Oneself in Another's Position** - The criminal demands every consideration and every break for himself/herself, but rarely stops to think about what other people think, feel, and expect.
- Not stopping to think what other people think.**
Example: "They can't ever do anything right."

Error 22 **Failure to Consider Injury to Others** - The criminal's life involves extensive injury to those around him/her. However (s)he does not view himself/herself as injuring others. When held accountable, (s)he regards himself/herself as the injured party.

Sees self as the victim while causing injury to others.

Example: "They were only paying me 50 cents a day. I had to take his/her canteen."

Error 23 **Failure to Assume Obligation** - The concept of obligation is foreign to the criminal's thinking. Obligations interfere with what (s)he wants to do. Obligation is viewed as a position of weakness and vulnerability to others' control. Obligations are irritating to the criminal, and if pressed, (s)he will respond with resentment and anger.

Obligations are irritating.

Example: "I can't believe I got a ticket for a bad tail light."

Error 24 **Failure to Assume Responsible Initiatives** - The criminal declines to take responsible initiatives because (1) responsible initiatives fail to provide the excitement and power thrust of forbidden activities, (2) they do not provide a guarantee of success and triumph, and (3) (s)he is often afraid that accepting responsible tasks will expose his/her lack of knowledge and ineptness.

Does not take on responsible tasks.

Example: "Working five days a week is too boring."

Error 25 **Ownership** - When a criminal wants something that belongs to someone else, it is as good as his/hers. "Belonging" is established in his/her mind, in the sense that (s)he feels perfectly justified in getting his/her way. The criminal considers himself/herself a decent person with the right to do whatever suits his/her purposes and views the world as his/her oyster. (S)He views people as pawns or checkers, waiting to be dealt with as (s)he wishes. This thinking is habitual and without malice.

Everything (s)he wants belongs to him/her.

Example: "The door was open. If they didn't want someone else to have it, they should have locked the door."

Error 26 **Fear of Fear** - The criminal is fearful of fear and contemptuous of fear. When (s)he discerns fear in others, (s)he points it out, scorns it, and exploits it. When fear occurs in himself/herself, it is a put-down, destroying his/her self-esteem. This applies also to the many states that denote degrees of fear - doubt, concern, apprehension, anxiety. (S)He denies these in himself/herself. When they occur in others, the criminal is ready to pounce.

Denies fear in self, scorns fear in others.

Examples: "I'm not chicken. I'll do it."

Error 27 **Lack of Trust** - Although the criminal does not trust others, (s)he demands that others trust him/her.

Demands trust by not trusting.

Example: "She has no right to ask where I was, but she'd better be there."

Error 28

Refusal to Be Dependent - Like anyone else, the criminal is dependent on other people for some things in life. However, (s)he does not see himself/herself this way. (S)He fails to believe that a degree of interdependence is a necessary part of existence. To him/her, dependence is a weakness; it would render him/her vulnerable.

Does not need anybody else.

Example: "I can't work with others, they're always getting in my way."

Error 29

Lack of Interest in Responsible Performance - The criminal is not interested in responsible tasks that don't offer immediate excitement. (S)He finds responsibility boring. When (s)he does become interested in a responsible project, his/her interest is short-lived, unless (s)he feels the excitement of being a conspicuous success.

Responsibility is boring.

Example: "I don't feel like buckling up my seatbelt every time I get into the car."

Error 30

Pretentiousness - Criminals do little to achieve, but carry tremendously inflated ideas about their capabilities. They are or will be the best (never that they will do their best). They are right and others are wrong – "When I know something is right and someone tells me it's wrong, I usually get mad . . . If I hear somebody say anything wrong, I usually try to set them right." When confined, (s)he regards himself/herself as more knowledgeable than the staff and seizes every opportunity to teach others.

Inflated ideas about capabilities.

Example: "I know what's right. They don't know what they're talking about."

Error 31

Failure to Make an Effort or Endure Adversity - "Effort" refers to doing things that are contrary to what one prefers to do. In this sense the criminal expends little effort, though he expends tremendous energy doing what (s)he wants to do. (S)He refuses to endure the adversity of responsible living. The main adversity to the criminal is failure to control, failure to be a big shot. Adversity is anything that is not going his/her way. The criminal escapes from this "adversity" into criminal thought and action, which is exciting.

Acts irresponsibly when not getting his/her own way.

Example: "No way I'm going to work hard, they cut my pay."

Error 32

Poor Decision-Making for Responsible Living - In important personal decisions, there is no sound reasoning, fact finding, consideration of costs or options. (S)He is reluctant to ask a question about non-criminal activities, because (s)he views it as a put down to reveal his/her ignorance. If his/her pretensions and expectations are controverted by the facts, (s)he does not want to hear them.

No fact finding for legal options.

Example: "I had to do a burglary to get the money for my rent."

Error 33

Corrosion and Cutoff - A criminal may be deterred from criminal activity by a sense of conscience, a sincere wish to change, and by sentimental, religious, or humanitarian feelings . . . as well as a fear of getting caught. The criminal overcomes these deterrents to his/her criminality by the processes of corrosion and cutoff.

Corrosion is a mental process in which deterrents are slowly eliminated until the desire to commit a criminal act outweighs the deterrent factors. This is criminal scheming. In this process, the criminal's sentiments and ideals and fears gradually give way to the desire for a criminal activity.

Cutoff is the mental process that eliminates deterrents from consideration completely and instantaneously. The gradual process of corrosion is completed by the final cutoff of fear and other deterrents to crime. Cutoff is a mental process that produces fragmentation (Error 10). The criminal moves instantaneously from one mental state to another, radically different states.

Deterrents (something that prevents or discourages from acting, as by means of fear or doubt) are eliminated.

Example: "If I plan this right, I won't get caught."

Error 34

Building Up the Opinion of Oneself as a Good Person - The criminal believes that (s)he is a good and decent person. (S)He rejects the thought that (s)he is a criminal. Performing kind or sentimental acts towards others enhances the criminal's view of himself/herself as good. The image of himself/herself as a good person gives him/her, in turn, a license for more crime, and postpones the recurrence of the zero state.

Rejects negative feedback, supports oneself as good.

Example: "I never hurt anybody, I only robbed businesses."

Error 35

Deferment - The criminal defers or "put things off" in three distinct areas: (1) (S)He carries with him/her the idea of an ultimate crime, the "big score," but defers enacting it; (2) (S)He has the idea that one day (s)he will quit crime, go straight and settle down, but that day is constantly deferred; and (3) (S)He has a habit of deferring the minor and routine responsibilities of life – paying a bill, writing a letter, filing a tax return.

Puts things off.

Example: "I'll take care of it when I get on the street."

Error 36

Superoptimism - The criminal's mind works in such a way that a possibility or an assumption is an accomplished fact; an idea is a reality. If someone tells him/her "maybe" (s)he regards it as a promise. Anything that (s)he decides to do is as good as done. The criminal uses cutoff to eliminate fear and doubt. The result is that as (s)he approaches a criminal activity, (s)he reaches a state of absolute confidence. Superoptimistic, there is not a doubt in his/her mind. Similarly, if (s)he does decide to become a responsible person, (s)he is superoptimistic of his/her success. Once (s)he decides, (s)he will believe that the chance has occurred.

Any idea is as good as done.

Example: "I can get away with that, no problem."

4 MAJOR THINKING ERRORS

- **ANGER (Error 4)**
- **VICTIM STANCE (Error 19)**
- **FAILURE TO PUT ONESELF IN ANOTHER'S POSITION (Error 21)**
- **OWNERSHIP (OR ENTITLEMENT) (Error 25)**

SECTION 4

Cognitive Behavioral Therapy

Participant Objectives:

- Know the two categories of Cognitive Behavioral Therapy
- Be familiar with the five rules of Cognitive Behavioral Therapy
- Recognize how Cognitive Behavioral Therapy addresses the interaction between thoughts, feelings, attitude and behavior
- Understand that changes in behavior and emotions occur through changes in thinking

COMMON FEATURES AND UNDERLYING PRINCIPLES OF THE CBT APPROACH

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

- ✓ Individuals are actively involved in the construction of their realities.
- ✓ Individuals can know about and get in touch with their mental and cognitive world.
- ✓ People respond to their mental interpretation of the environment rather than the environment itself.
- ✓ Feelings, thoughts and behaviors are interactive and interrelated.
- ✓ Learning is mediated by cognitive processes.
- ✓ Disturbances in emotions and behaviors are a result and function of disturbances in the thinking, seeing and feeling processes.
- ✓ Changes in behavior and emotions occur through changes in thinking.
- ✓ Assessment of psychological and emotional problems is based on the identification of attitudes, expectancies and attributions.
- ✓ Treatment initially places emphasis on the present and the here and now.
- ✓ The counselor and client work together in a partnership in evaluating, assessing and developing solutions to problems; CBT is based on a sound therapeutic alliance;
- ✓ There is a strong focus on relapse prevention.
- ✓ There is an emphasis on changing overt behaviors as well as thinking patterns.
- ✓ There is an emphasis on identifying and changing dysfunctional beliefs and thoughts.
- ✓ Changes in thinking and action need to be reinforced with self-reinforcement as the most powerful determinant of maintaining change.
- ✓ It is an educational process.
- ✓ Counselors and treatment providers fulfill the roles of evaluator, educator and consultant in understanding disturbed and maladaptive thought processes and in developing, with the client, life-response changes.

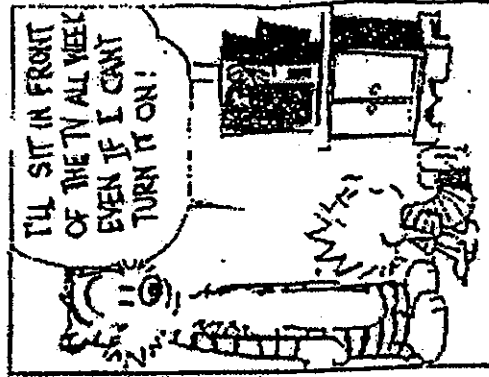
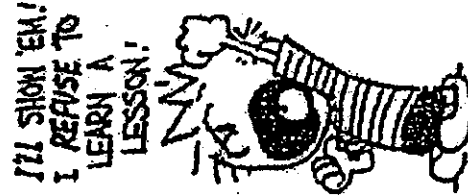
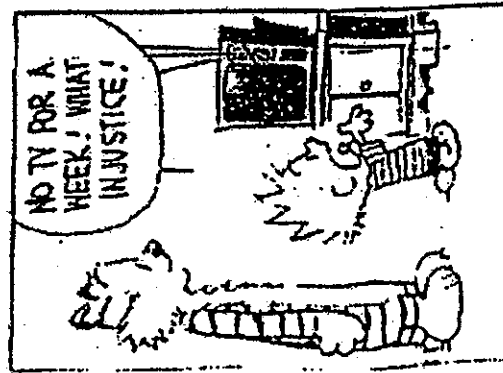
Reprinted with permission of the authors of *Criminal Conduct and Substance Abuse Treatment*, Kenneth W. Wanberg and Harvey B. Milkman (1998).

5 RULES TO THE COGNITIVE & BEHAVIORAL PROCESS

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

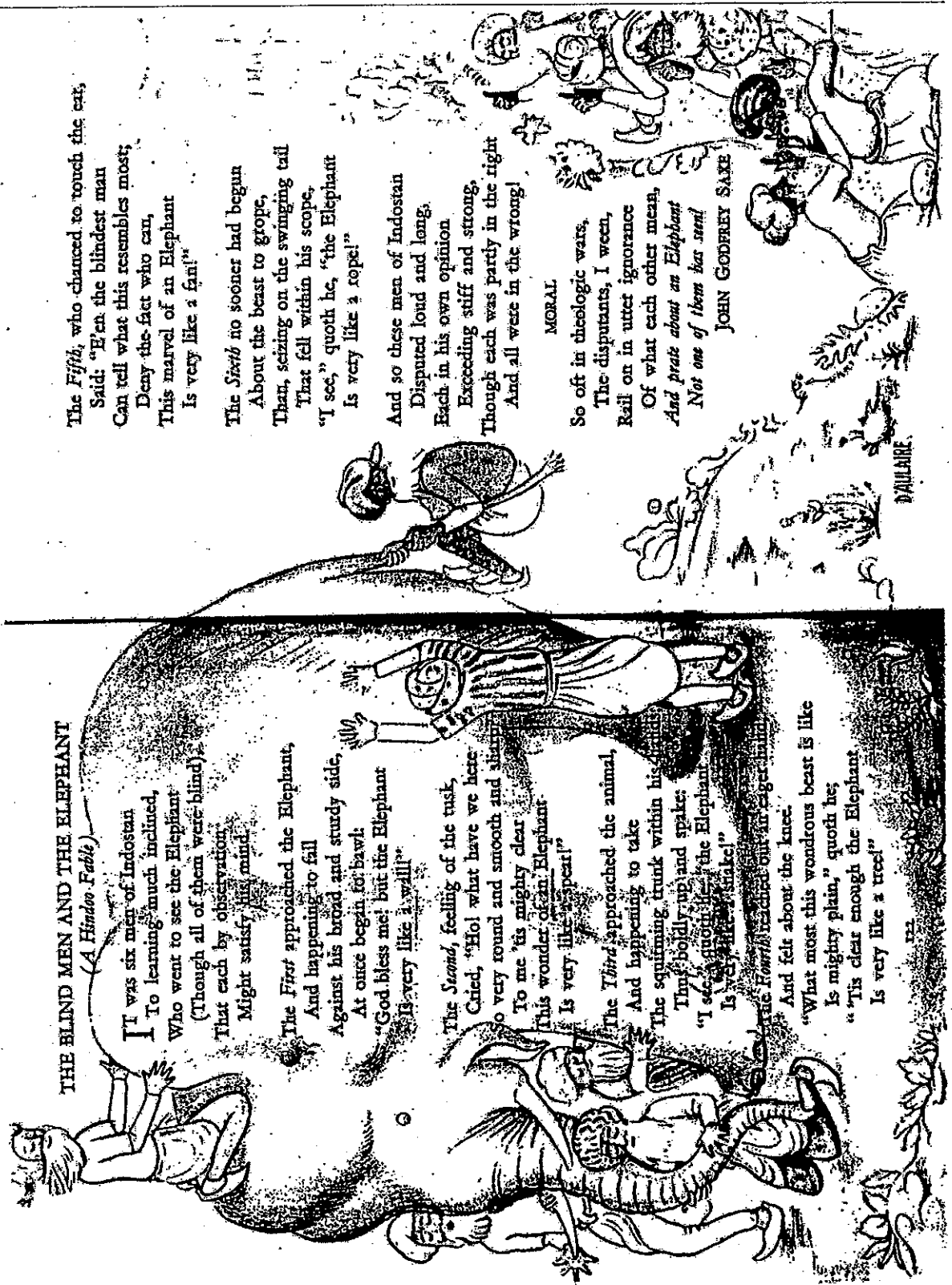
1. Cognitive self improvement is based on the simple idea that your beliefs, attitudes, and thoughts--not what happens outside of yourself--determine and control much of your actions, your emotions, and relationships with people.
2. Each person sees the world and themselves differently and how we see the world and ourselves is set by our attitudes and beliefs.
3. Our thought patterns can become twisted and distorted as a result of our experiences in the outside world.
4. Thoughts, emotions, and actions interact and affect each other.
5. What happens outside of you will bring on certain thoughts based on your beliefs and attitudes. These automatic thoughts can bring on certain feelings, and possibly an overt behavior or action response.

Calvin & Hobbes



Horse or Frog?
Turn the picture sideways and you decide.





THE BLIND MEN AND THE ELEPHANT
(A Hindoo Fable)

IT was six men of Indostan
To learning much inclined,
Who went to see the Elephant
(Though all of them were blind)
That each by observation
Might satisfy his mind.

The First approached the Elephant,
And happening to fall
Against his broad and sturdy side,
At once began to bawl:
"God bless me! but the Elephant
Is very like a wall!"

The Second, feeling of the tusk,
Cried, "Hol! what have we here
So very round and smooth and sharp
To me 'tis mighty clear
This wonder of an Elephant
Is very like a spear!"

The Third approached the animal,
And happening to take
The squirming trunk within his hands,
Thus boldly up and spake:
"I see," quoth he, "the Elephant
Is very like a snake!"

The Fourth stretched out his eager hand
And felt about the knee.
"What most this wondrous beast is like
Is mighty plain," quoth he;
"Tis clear enough the Elephant
Is very like a tree!"

The Fifth, who chanced to touch the ear,
Said: "Even the blindest man
Can tell what this resembles most;
Deny the fact who can,
This marvel of an Elephant
Is very like a fan!"

The Sixth no sooner had begun
About the beast to grope,
Than, seizing on the swinging tail
That fell within his scope,
"I see," quoth he, "the Elephant
Is very like a rope!"

And so these men of Indostan
Disputed loud and long,
Each in his own opinion
Exceeding stiff and strong,
Though each was partly in the right
And all were in the wrong!

MORAL
So oft in theologic wars,
The disputants, I ween,
Rail on in utter ignorance
Of what each other mean,
And prate about an Elephant
Not one of them has seen!

JOHN GODFREY Saxe

PAUL HARRIS

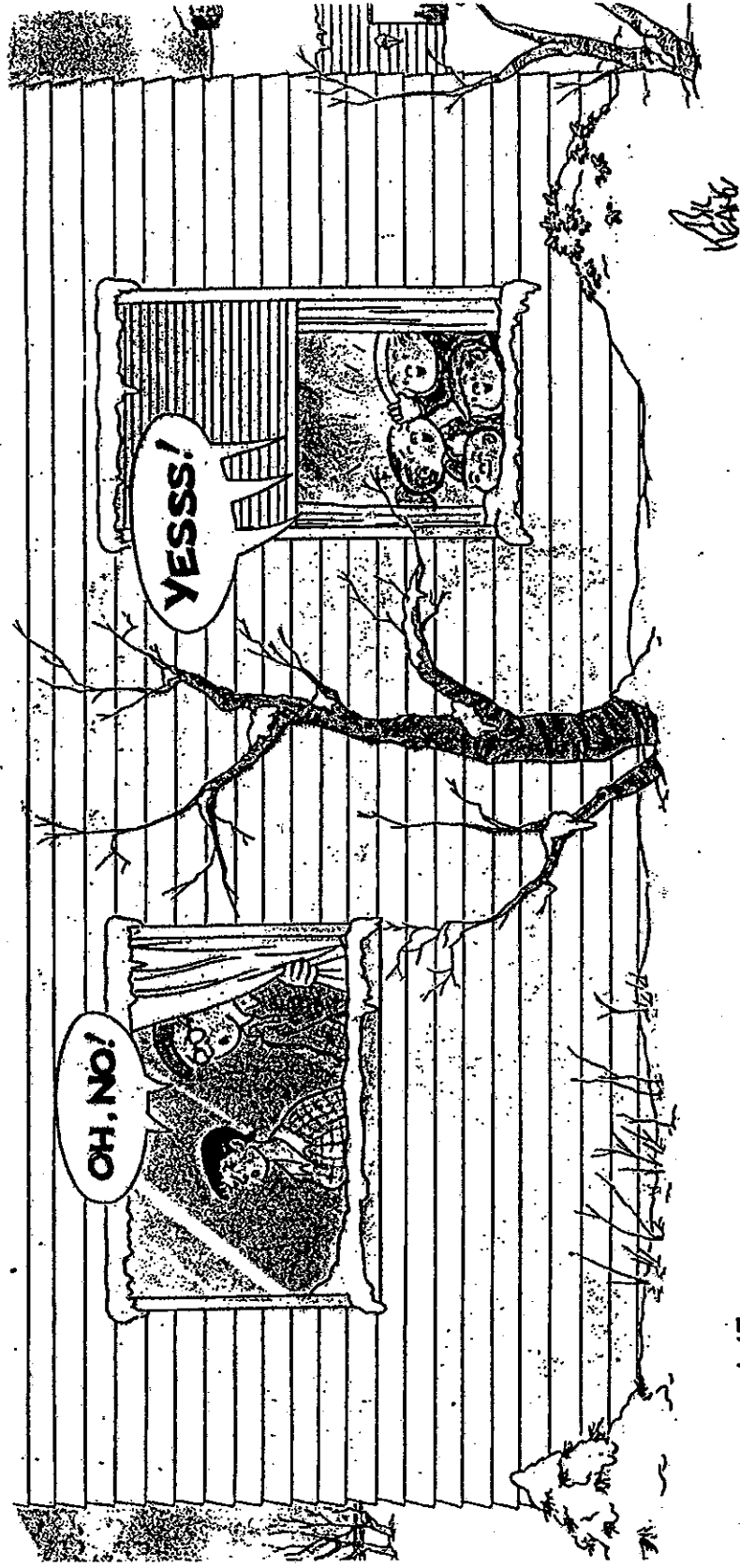
Dennis the Menace



"I CAN SLEEP WITHOUT TEDDY, BUT HE
CAN'T SLEEP WITHOUT ME!"

THE FAMILY CIRCUS.

154 B1



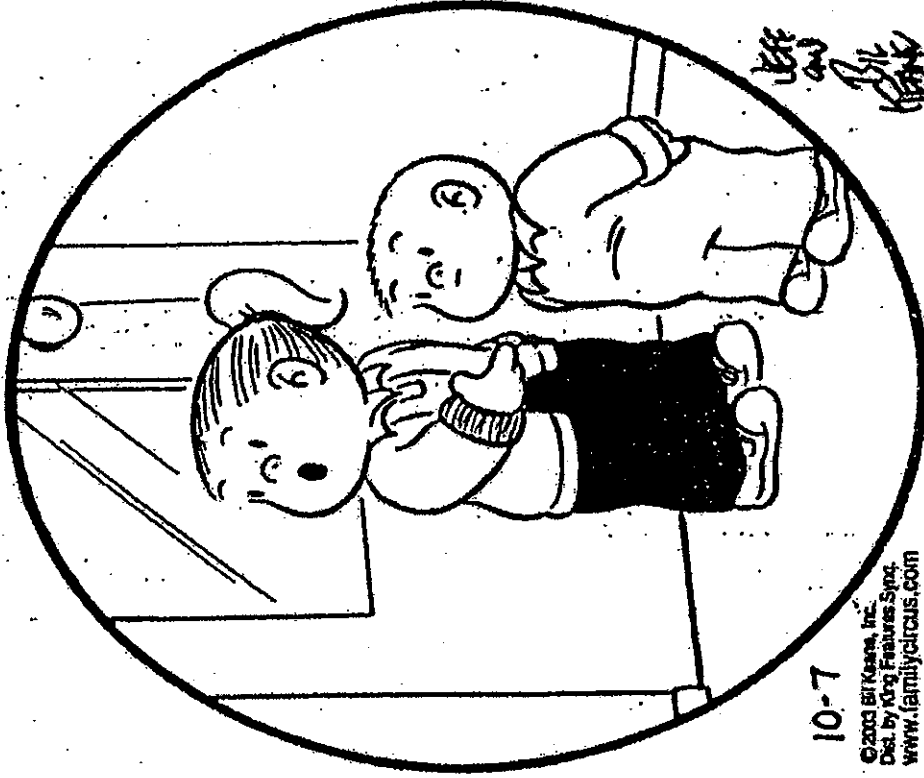
154 B1

Dennis the Menace



"WHAT DID WE DO TO
DESERVE DENNIS
LIVING NEXT DOOR?"

Family Circus

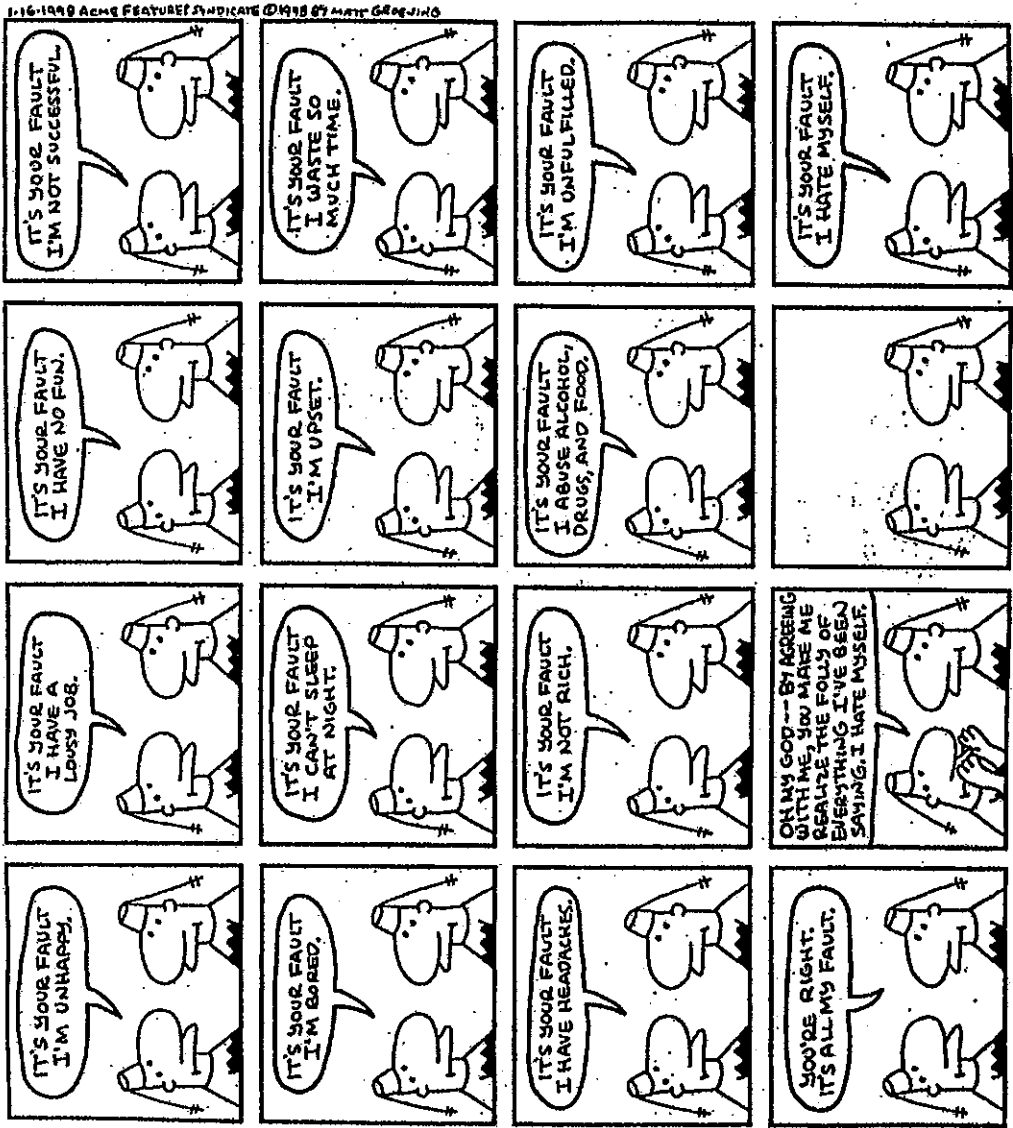


10-7
©2003 Bill Keane, Inc.
Dist. by King Features Synd.
www.familycircus.com

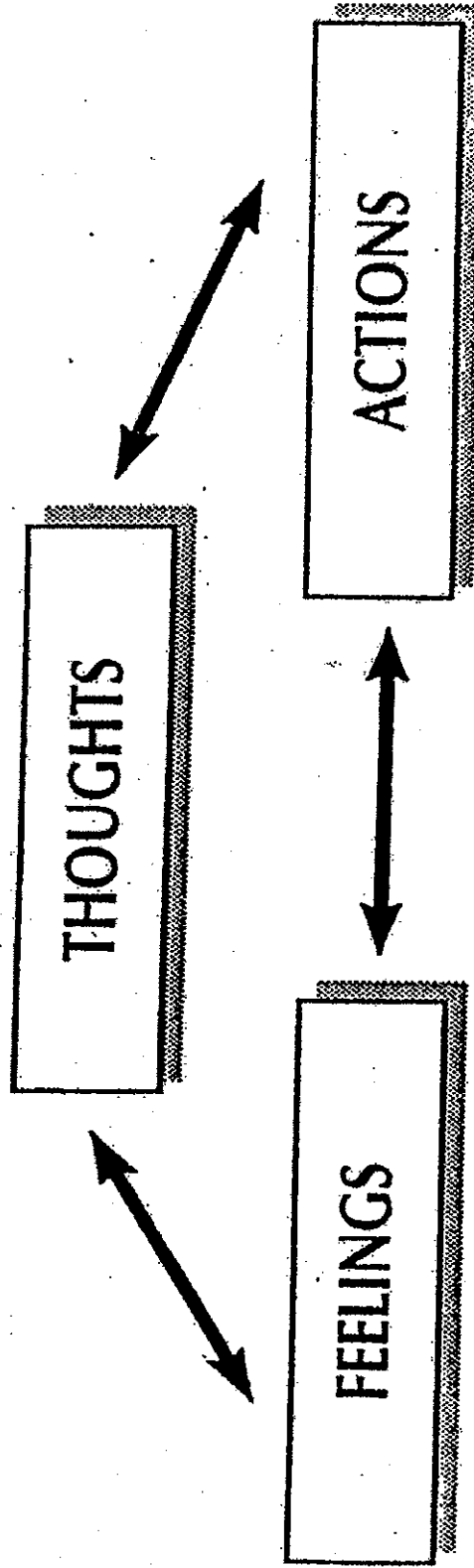
"PJ seems cuter to other people than
to us 'cause we're used to him."

©1998
BY MATT
GREENING

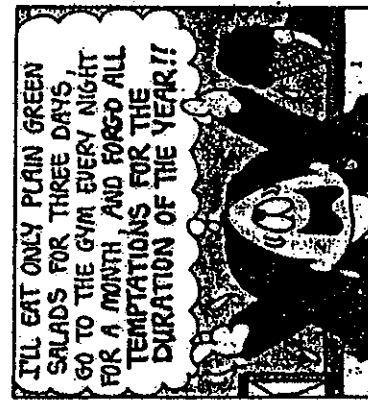
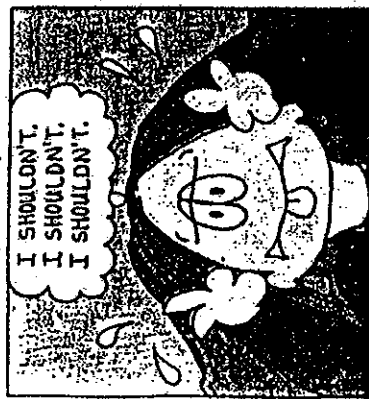
LIFE IN
HELL



Interaction of Thoughts, Feelings and Actions

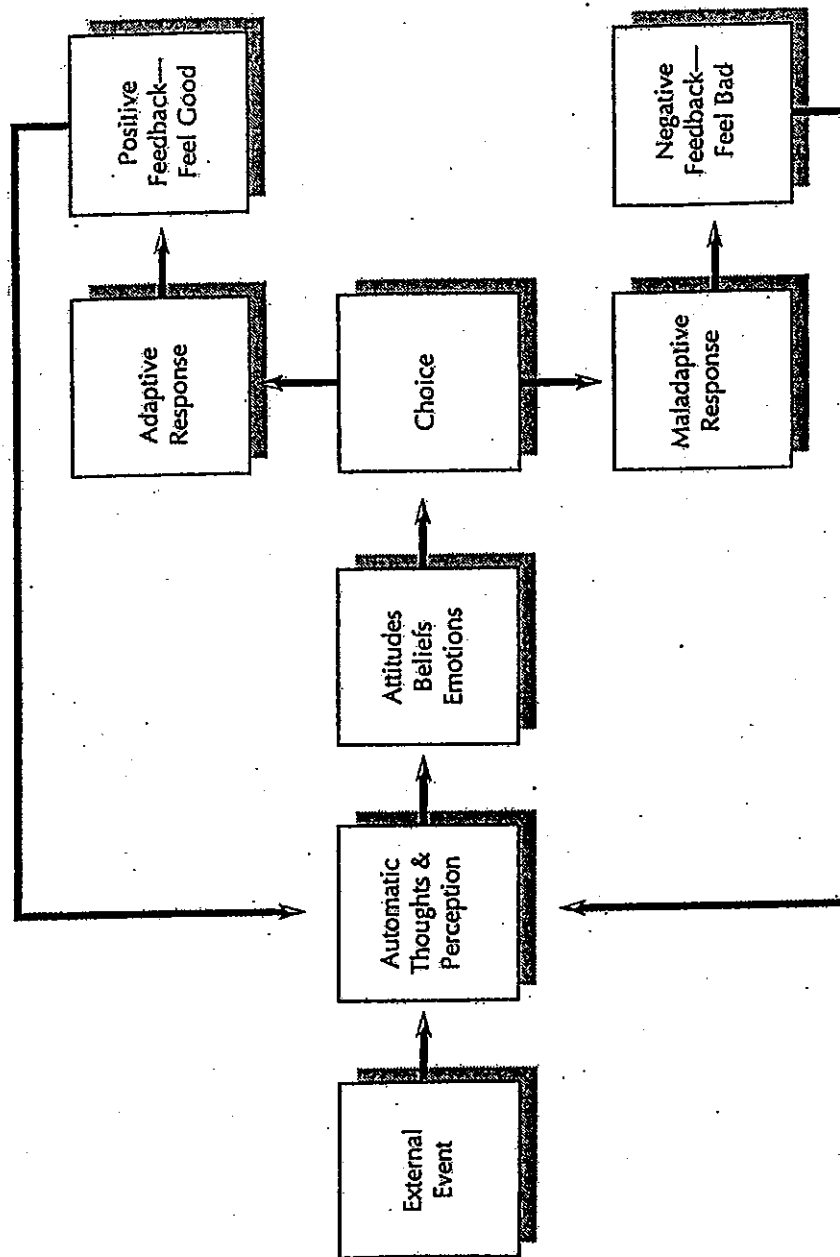


CATHY/ by Cathy Guisewite



© 1982 CATHY GUISEWITE distributed by Universal Press Syndicate

The Process of Cognitive Learning and Change



Wife found a life through Inte

Dear Ann Landers: Today is my wife's 44th birthday, but she is not around to celebrate it. I took her life because of an affair that started on the Internet.

We had been married for 22 years and had four children. I worked hard all my life and lived up to my responsibilities. My most recent job was for the U.S. Postal Service, where I was employed for 19 years. In all our married years, I was never unfaithful to my wife.

I suspected something unusual was going on when I saw \$1,000 phone bills and \$1,500 credit card charges. When I asked about these charges, she said that they were for the PTA and that she would be reimbursed.

I decided to take a trip to the Holy Land to clear my head and perhaps get some divine guidance. When I returned on Valentine's Day, I found a note.



I am in the Montgomery County Jail and will probably be behind bars for the rest of my life. I am happy to say that the kind people in my hometown have taken our children to their hearts, and for that, I am grateful.

I am writing in the hope that you will let your readers know the Internet can be a dangerous place to meet people. — M.K., CHRISTIANSBURG, VA.

Dear M.K.: Several months ago, when I warned my readers that the Internet could lead to "trouble," I never imagined a letter like yours.

While the Internet may increase the opportunities for an affair, the danger to your wife came from YOU, not the computer. Blaming the Internet is a cop-out. You killed your wife because she left you. How she met her lover doesn't matter.

Read on for another letter

It simply said she had left for good and her lawyer would be in touch with me.

After checking with a lawyer myself, I had all the facts. Did you know a woman can leave her home and take her children without giving any specific reason? Well, she can — and she did. The court ordered me to give her \$410 every two weeks. I thought about how unjust this was and decided to kill her.

As you can see from the postmark on this envelope, I

SECTION 5

Cognitive Restructuring

Participant Objectives:

- **Learn the Four Steps of Cognitive Self Change**
- **Be introduced to different tools for implementing Cognitive Self Change/Restructuring through Thinking Reports**
- **Be able to present the parts and basic techniques of a Thinking Report**
- **Be able to model and demonstrate the presentation and facilitation of Thinking Reports**

4 STEPS OF COGNITIVE SELF CHANGE

1. Pay attention to your thoughts and feelings.
2. Recognize when your thoughts/feelings are at risk for leading you to do something hurtful/harmful to yourself or others.
3. Use new interventions (i.e., thinking) to reduce the risk of doing something hurtful/harmful.
4. Practice until it becomes automatic and you get good at it.

5 PARTS OF A THINKING REPORT

1. EVENT (SITUATION)	Write a brief and <i>objective</i> description of the situation: <ul style="list-style-type: none">• short sentence• no blaming statement• don't include feelings & thoughts
2. THOUGHTS	List as many thoughts that you can remember about the situation <ul style="list-style-type: none">• tape recording in your head• without censorship (i.e., swearing)• without interpretation or explanation• without criticism
3. FEELINGS	List all the feelings you have attached to the situation
4. ATTITUDES/BELIEFS	List all the attitudes/beliefs that are relevant to the thoughts
5. OUTCOME	Write the outcome that came out of this event

FEELING LIST

afraid	useless	weary	wonderful
alive	forgiving	worthwhile	hurt
amused	concerned	uncertain	vulnerable
angry	worried	remorseful	disappointed
annoyed	sorry	victimized	loving
bitter	warm	safe	friendly
cheerful	eager	humiliated	enraged
courageous	timid	scared	desperate
devastated	dejected	rejected	isolated
discouraged	tired	happy	competent
excited	valued	supported	understood
fearful	delighted	distrustful	exasperated
fulfilled	apprehensive	frantic	trapped
furious	uncomfortable	unappreciated	depressed
guilty	miserable	affectionate	comfortable
hateful	content	tender	peaceful
helpless	funny	understanding	desirable
hopeless	unhappy	put down	restless
hostile	agitated	frustrated	defeated
impatient	uptight	tense	indifferent
inadequate	pissed	sleepy	ecstatic
insecure	numb	stuck	trapped
irked	harassed	shocked	stunned
irritated	nervous	righteous	confident
joyful	giddy	silly	embarrassed
kind	shameful	proud	content
lonely	satisfied	powerful	worthless
lost	devalued	short-changed	passionate
pessimistic	playful	pleased	relaxed
relieved	resentful	sad	shy
strong	terrified	threatened	insignificant

IRRATIONAL BELIEFS AND NEGATIVE THOUGHTS

Page 1

- People must love me or I'm not ok
- It's not ok to make mistakes
- I must never show never show my weakness
- Strong people don't ask for help
- I should be better than others
- You can't tell me anything I already don't know
- The world revolves around me
- Image is everything
- People should do what I want
- People shouldn't get away with things
- The only person I can trust is myself
- Everybody is out to get me
- I can't help how I feel
- I can't forgive myself
- It's terrible when things go wrong
- I need others to take care of me
- Others are responsible for my problems

IRRATIONAL BELIEFS AND NEGATIVE THOUGHTS (cont'd)

Page 2

- My past keeps bringing me down
- The way people act makes me mad
- I am inferior to others
- No one listens to me
- What I say doesn't count
- No one cares, so why try
- I have to make people like me in order to be ok
- People don't take me seriously
- I'm not strong enough to stand up for my rights
- It's better to be quiet than to risk getting laughed at
- If others criticize me then something is wrong with me
- I don't deserve to be treated well
- I need to be happy all the time
- I should help everyone who needs it
- No one should have to suffer
- I should never hurt anyone

AN OFFENDER'S THINKING REPORT

SITUATION: PO informs client that he has to enter residential treatment after three positive UAs.

THOUGHTS:

Fuck you!
I only used three times.
Why you doing this to me?
The hell with that!
They don't know what I'm going through.
They want me to work and pay for court fees.
Shit! Can't even pay my rent!
They think it's easy.
Might as well go jail already.
I'm trying my best.
It's hard to pay bills with cheap pay.
My family gives me stress.
Nobody cares about me.
I only use when I'm stressed.
No sense I try.

FEELINGS:

defiant, pissed
victimized
self-righteous anger
self-pity
stressed, frustrated
self-pity
short-changed
unappreciated
defeated

ATTITUDES/ BELIEFS:

Nobody tells me what to do.
Everybody tells me what to do.
Poor me.
Bad things always happens to me.
What I say doesn't count.
No one cares, so why try.
Life sucks.

BEHAVIOR/ OUTCOME:

Reinforced belief that he is a victim.

FRANKLIN REALITY MODEL DESCRIBES FOUR (4) BASIC NEEDS: 1) LOVE AND BE LOVED; 2) FEEL IMPORTANT; 3) SURVIVAL; 4) VARIETY

WILL THE RESULTS OF YOUR BEHAVIOR MEET YOUR NEEDS OVER TIME?

STAGES OF THINKING REPORTS (Probing Question List)

QUESTIONS TO ASK:

STAGE 1: Identify Thoughts and Feelings

And then you thought/felt _____?
How did that thought make you feel?
Were there any thoughts when you felt that way?
I'm not sure I understand.
Were there any thoughts after _____?
Any thoughts between _____ and _____?
Was there another time when you thought/felt like that?
What else were you thinking/feeling?
What was the rest of that thought?
If that were me, I would be thinking _____. Did you think that?
What else?

STAGE II: Distortions

Why do you call _____ a mistake/misunderstanding?
Why do you call _____ an error for you?
Why don't you see _____ as a fact?
How does that meet your needs over time?

STAGE III: Identify Beliefs/Attitudes/Thinking Patterns

What does that thought mean?
What's up with that?
What do you believe about that?
What made you feel/think _____?
Help me understand _____.
How does that work for you?
Can you explain _____?
How has this pattern of thinking affected your life and others?
How has this pattern of thinking caused you problems in the past?

SECTION 6 Cognitive Skills Overview

Participant Objectives:

- Learn a basic definition of Cognitive Skills
- Understand the difference between Cognitive Restructuring and Cognitive Skills ("the what" vs. "the how") and how they interact together
- Gain a familiarity of the different Cognitive Skills
- Identify 3 Cognitive Skills that offenders are frequently deficient in (Managing Emotions; Problem Solving; and Assertiveness)

COGNITIVE SKILLS

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

Basic Skills for Self-Improvement and Change

Objective

Coping and Social Skills Training

Active Sharing and Active Listening

Teaches offenders the basic skills of self-oriented communication (active sharing) and other-oriented communication (active listening) and how one uses these skills in everyday conversations.

Starting Conversations

Helps offenders improve communication skills and develop the ability to communicate in unfamiliar situations by learning basic techniques in starting a conversation.

Compliments (Giving and Accepting)

Teaches offenders the skills involved in giving sincere compliments, and accepting compliments in a gracious and appropriate manner.

Recognizing and Being Aware of Negative Thoughts and Negative Thinking

Teaches offenders to recognize negative thought patterns and how these patterns contribute to problem behaviors.

Managing and Changing Negative Thoughts

Teaches the offender to identify specific negative thoughts that lead to AOD use and abuse, and helps the offender to understand and own the notion that each person is in control of his or her own behavior, and can choose to respond in a positive or negative manner.

Errors in Logic and Thinking

Helps offenders understand how certain thinking patterns (thought habits) and the attitudes and beliefs that accompany them can underlie behavior or habits that get them into trouble. Helps offenders recognize their distorted thinking patterns and begin to rectify that thinking.

Errors in Thinking and the Entitlement Trap

Helps offenders understand and change the concept of entitlement as a distortion in criminal thinking and replace the attitude with a more prosocial stance.

Recognizing High Risk Situations for AOD Use and Criminal Conduct and Refusal Training

Teaches offenders about Relapse Prevention and helps identify their own high risk situations for AOD use and criminal conduct. Teaches refusal skills to cope with high risk situations and high risk thinking.

Managing Cravings and Urges About Criminal Conduct and AOD Use

Teaches offenders how to insulate or avoid things around them that are high risk for setting off cravings for drugs or the desire to take part in criminal activities. Develops skills to cope with cravings and urges when high risk situations that trigger these internal states cannot be avoided.

Assertiveness Skills Development

Teaches offenders the four ways people handle conflict and get their needs met (aggressive, passive, passive-aggressive and assertive) and teaches assertiveness skills.

Deeper Problem Solving

Helps offenders expand skills in identifying and solving problems and analyzing their needs in different situations. Teaches offenders to consider alternative solutions and select the most promising way to solve the problem. Teaches cooperation or compromise when neither party can agree completely with the other's solution to a problem.

Handling Feelings, Anger Management

Teaches offenders to recognize angry thoughts and feelings and understand that anger is usually caused by, or part of, some problem, and that alternatives are needed for successful problem solving. Helps offenders become aware of the events that normally trigger anger for them and of the physiological and psychological signals they experience when angry. Teaches social skills and self-control techniques that will help them manage anger and avoid the destructive effects of anger.

Preventing Aggression and Violence

Helps offenders understand the different types of aggression and which type of aggression each offender may be more prone to become involved in. Helps offenders become aware of the situations in which they are most likely to respond to arousal in an aggressive manner. Teaches necessary skills to maintain the offender's self-control in circumstances that could lead to aggressive behavior and violence.

Managing Guilt, Anger and Depression: The Emotional Cycles of Rehabilitation

Helps offenders become aware of the signs of depressed, angry or guilty automatic negative thoughts and take action to change their thinking patterns. Teaches offenders to more effectively manage negative feeling states of anger, guilt and depression by changing the thoughts and behaviors that promote them. Teaches offenders the guilty-anger cycle and how it relates to them.

Developing and Keeping Intimate and Close Relationships

Helps offenders improve awareness of the importance of good communication in intimate and close relationships, and improve communication skills that will enhance intimacy and satisfaction from close relationships.

Understanding Values and Moral Development

Helps offenders understand prosocial values, their own values and morals, and the morals and rules of their community and of society. Helps offenders to make comparisons between their morals and those of the community.

Understanding and Practicing Empathy

Teaches offenders the difference between sympathy and empathy. Helps the offender consider the position of others. Provides a moral dilemma exercise so offenders can experience the difficulty in making moral decisions.

Responsibility Toward the Community: Reflection and Review, and Driving Attitudes and Patterns

Focuses on issues of community responsibility, such as driving a car.

Skills to Strengthen Ownership of Change

Objective

Critical Reasoning: Decision Making and Creativity

Teaches critical reasoning skills, the importance of listening to what is being said and implied, how to adequately assess the validity of what is being said and to distinguish fact from opinion.

Resolving Conflicts: Negotiation and Social Skills Development

Teaches offenders that it is possible for two people to be both partly right in a discussion and that an open-minded approach to problems can be the most fruitful way to reach a solution. Strengthens the offender's ability to identify problems and their consequences, and to find alternative ways to solve those problems.

Reprinted with permission of the authors of *Criminal Conduct and Substance Abuse Treatment*, Kenneth W. Wanberg and Harvey B. Milkman (1998).

THREE COMMON COGNITIVE SKILLS

- MANAGING EMOTIONS (AND IMPULSIVITY)
- PROBLEM SOLVING
- ASSERTIVENESS

THE BASIC STEPS OF TEACHING

The basic steps of teaching is based on the **TELL, SHOW, TRY** model:

1. Explain what you are going to teach
2. Model the skill to the client
3. Practice with the client in a role play
4. Give the client some independent practice
5. Review with the client his/her progress in using the skill
6. Repeat any steps as needed

SECTION 7 - COGNITIVE SKILLS

Managing Emotions and Impulsivity

Participant Objectives:

- Identify the emotions that commonly lead to a loss of self control
- Identify thinking errors and irrational beliefs behind some of these emotions
- Recognize the common physiological symptoms that accompany anger and other emotions
- Learn simple techniques for managing and controlling anger
- Identify and define impulsive behaviors including cravings and urges
- Explore different coping strategies for managing impulsive behavior
- Identify clients who might benefit from this skill and learn ways to teach it using the Probation/Parole Planner and handouts.

COMMON PHYSICAL CHARACTERISTICS OF

Anger, Stress, Anxiety, Fear, and Guilt

- **Tight Tummy / Indigestion / Nausea**
- **Clenched fists**
- **Increased heart rate**
- **Increased blood pressure**
- **Flushed Face**
- **Faster, shallow breathing**
- **Grind teeth**
- **Dry mouth**
- **Headache (pounding head)**
- **Shaking / Tremors**
- **Perspiration**
- **Clenched jaw**

WAYS TO IDENTIFY ANGER

- **Physical Characteristics**
- **Use self-talk (Say to yourself I am angry)**
- **Be aware of the difference between angry thoughts (jealousy, rejection, guilt) which are internal and events that cause anger (threatened by someone; rights were violated, etc) which are external**
- **Identify situations or triggers that have caused you to become angry in the past**

8 STEPS TO MANAGING YOUR ANGER

1. **Know the difference between feeling angry and the event that caused you to be angry (We can't always control what happens to us but we can control our reaction.)**
2. **Recognize destructive anger (which results in aggression or violence) vs constructive anger (which can be used as motivator or impetus to change)**
3. **Employ self-controlling techniques (deep breathing, self talk, thought stopping, counting to ten, counting backwards from twenty, leaving the situation, etc.)**
4. **Express your anger calmly and constructively (use "I" messages)**
5. **Explore what you are really angry about...Is it rational?**
6. **Move your anger into problem solving; apply the problem solving skills (covered in next section)**
7. **Realize you can't always resolve the situation or fix everything. When this happens, try to let it go**
8. **If you are successful in managing and resolving your anger constructively, congratulate and reward yourself**

ANGER

Behavioral Definitions:

- History of explosive, aggressive outbursts out of proportion to any precipitating stressors leading to assaultive acts or destruction of property.
- Overreaction of hostility to insignificant irritants.
- Swift and harsh judgment statements made to or about others.
- Body language of tense muscles (e.g., clenched fist or jaw, glaring looks, or refusal to make eye contact).
- Use of passive-aggressive patterns (e.g., social withdrawal due to anger, lack of complete or timely compliance in following directions or rules, complaining about authority figures behind their backs, or nonparticipation in meeting expected behavioral norms).
- Anger intensity that leads to mental confusion (e.g., all or nothing thinking, progressive use of abusive language expressed to self or others).
- Hypersensitivity to perceived disapproval, rejection, or criticism that causes angry communication breakdowns.
- Passive avoidance of conflict and irritations that contribute ultimately to a rapid (and often inappropriate), intense expression of anger.
- Uses aggression as a means to achieve needed power and control.

Goals:

- Decrease frequency and intensity of expression of angry feelings.
- Increase ability for coping with angry feelings in a constructive way that enhances daily functioning.
- Improve awareness and understanding of anger: How it is triggered and its consequences.
- Access and accept a greater range of emotions with more flexibility and ability to express these emotions constructively.

Objectives	Interventions
<p>1. Describe history of what triggers anger and how it is expressed.</p>	<ul style="list-style-type: none"> Explore the client's history of situations that trigger anger and how anger is expressed (e.g., verbal, threats of violence, assaults, damage to property). Use CR Handout 5: <i>Recording Your History - Your Autobiography</i> Use CS Managing Emotions Handout 2: <i>Looking at Your Anger and Angry Thoughts</i> Use CS Managing Emotions Handout 3: <i>Identifying Triggers and Symptoms of Anger</i> Confront the client's attempts to minimize his/her poor management of anger to project blame onto others, or to discount the harmful consequences. Use CR Handout 1: <i>Thinking Report</i> Use CR Handout 7: <i>Errors in Thinking Checklist</i>
<p>2. Verbalize where anger comes from (antecedents), how it manifests (behavior), and what results (consequences) are likely to be produced by it.</p>	<ul style="list-style-type: none"> Teach the client a basic objective perspective on anger that minimally includes instruction on the Antecedents of anger, Behavior and physical features associated with anger, and Consequences of anger (i.e., the ABCs of anger). Use CR Handout 2: <i>The ABC Method of Rational Thinking</i> Use CS Managing Emotions Handout 4: <i>ABC's of Anger</i>
<p>3. Attend anger management or assertiveness training sessions.</p>	<ul style="list-style-type: none"> Refer the client to anger management or assertiveness training classes. Teach the client the fundamental skills of active listening (e.g., asking open-ended questions, affirming the speaker with eye contact and nodding, reflecting the feelings behind the communication, summarizing the content, and eliciting self-motivating statements) and how to implement these skills in everyday communication. Use CS Assertiveness Skills Handout 4: <i>Active Listening</i> Process principles the client has learned in anger management or assertiveness training classes; apply these principles to his/her daily life through role-playing or modeling. Use CS Managing Emotions Handout 7: <i>8 Steps to Managing Your Anger</i> Use CS Managing Emotions Handout 10: <i>Role Playing Exercises for Anger and Impulsivity</i>

<p>4. Verbalize common triggers people experience that provoke anger.</p>	<ul style="list-style-type: none"> • Teach and explore with the client how anger may be used to displace other feelings (e.g., pain, guilt) and reinforce ignorance through projection. Use CR Handout 1: <i>Thinking Report</i> • Guide the client in a brainstorming session that identifies common triggers that instigate anger in people; ask the client to compile a written list of potential triggers.
<p>5. Sort generic anger issues into those that are internal versus external.</p>	<ul style="list-style-type: none"> • Guide the client in a brainstorming session that identifies common triggers that instigate anger in people; ask the client to compile a written list of potential triggers. Use CS Managing Emotions Handout 3: <i>Identifying Triggers and Symptoms of Anger</i> Use CR Handout 4: <i>Journaling</i> • Ask the client to sort potential triggers into those that are internal or originate from within the client (e.g., jealousy, perceived rejection, guilt) and those that are external or originate from the environment (e.g., threatened, rights trampled on). Use CS Managing Emotions Handout 6: <i>Internal/External Triggers of Anger</i>
<p>6. List common cues for identifying arousal and the process for how angry feelings generally emerge for people.</p>	<ul style="list-style-type: none"> • Guide the client in a brainstorming session that identifies common cues that can potentially alert people to when they are becoming angry (e.g., tight tummy, dry mouth, heart rate increases, blood pressure increases, shallower breathing, clenched fists, perceived threats). Use CS Managing Emotions Handout 1: <i>Common Physical Characteristics of Anger, Stress, Anxiety, Fear, and Guilt</i>

<p>7. Sort anger cues into those that occur in the early, middle, and late stage of escalation.</p>	<ul style="list-style-type: none"> • Guide the client in a brainstorming session that identifies common cues that can potentially alert people to when they are becoming angry (e.g., tight tummy, dry mouth, heart rate increases, blood pressure increases, shallower breathing, clenched fists, perceived threats). Use CS Managing Emotions Handout 1: Common Physical Characteristics of Anger, Stress, Anxiety, Fear, and Guilt • Ask the client to organize a generic list of anger cues into logical, chronological order as they would be apt to occur in a typical experience with anger (e.g., early stage: perceive a threat, shallower breathing; middle: heart rate increases, dry mouth; late: blood pressure increases, tight tummy, fists clenched). Use CS Managing Emotions Handout 1: Common Physical Characteristics of Anger, Stress, Anxiety, Fear, and Guilt
<p>8. List five of the best personal consequences for anger expression and the five worst personal consequences.</p>	<ul style="list-style-type: none"> • Ask the client to list the five best and worst consequences for himself/herself that have resulted from his/her expression of anger; process these consequences. Use CS Managing Emotions Handout 5: Consequences of My Anger (5 Best/5 Worst)
<p>9. Monitor and record anger episodes, degree of escalation, and the related context and time of day they occurred.</p>	<ul style="list-style-type: none"> • Assign the client to do a recording of his/her episodes with anger that notes the situation or trigger, the rating of the degree of anger felt, how anger was expressed, the outcome, assessment of how he/she responded, and date/time. Use CR Handout 1: Thinking Report Use CR Handout 2: The ABC Method of Rational Thinking Use CS Managing Emotions Handout 4: ABC's of Anger
<p>10. Share the results of monitoring anger and verbalize lessons learned from the data.</p>	<ul style="list-style-type: none"> • Assign the client to do a recording of his/her episodes with anger that notes the situation or trigger, the rating of the degree of anger felt, how anger was expressed, the outcome, assessment of how he/she responded, and date/time. Use CR Handout 1: Thinking Report Use CR Handout 2: The ABC Method of Rational Thinking Use CS Managing Emotions Handout 4: ABC's of Anger • Process with the client the results of his/her anger monitoring, concentrating on what can be learned from that personal behavior information.

<p>11. List several techniques that could be used to reduce anger quickly.</p>	<ul style="list-style-type: none"> Instruct the client in a technique for progressive muscle relaxation that enables him/her to relax his/her entire body within 5 to 10 minutes and have him/her practice this technique daily for at least one week. Use CS Managing Emotions Handout 13: Deep Relaxation Teach the client simple, quick techniques (e.g., deep breathing, counting backward, engaging in pleasant imagery, using a worry stone) to immediately help reduce anger elevations in a variety of situations.
<p>12. Write an inventory of personal triggers (external and internal) for anger and prioritize them in terms of strength and frequency.</p>	<ul style="list-style-type: none"> Guide the client in a brainstorming session that identifies common triggers that instigate anger. Ask the client to sort potential triggers into those that are internal or originate from within the client (e.g., jealousy, perceived rejection, guilt) and those that are external or originate from the environment (e.g., threatened, rights trampled on). Use CS Managing Emotions Handout 6: Internal/External Triggers of Anger Review and help the client inventory and prioritize his/her own personal anger triggers. Use CS Managing Emotions Handout 2: Looking at Your Anger and Angry Thoughts
<p>13. Verbalize the importance of self-statements and the role they play in either escalating or reducing anger.</p>	<ul style="list-style-type: none"> Explain the role of self-talk and how it can lead to either negative or positive reaction to anger triggers; demonstrate how this mental process modifies the Antecedent condition, Behavioral reaction, and Consequences model by the interjection of a subjective element between Antecedents and Behavior (thus, the A-M-B-C model). Use CR Handout 11: Ways to Change Thinking and Behavior Use CS Managing Emotions Handout 4: ABC's of Anger Use CS Managing Emotions Handout 11: Self-Talk During an Angry Situation

<p>14. Identify instances of engaging distorted self-talk and the consequences of this on anger management.</p>	<ul style="list-style-type: none"> Assist the client in identifying and inventorying his/her distorted self-talk in response to recent triggers and cues. <i>Use CR Handout 7: Errors in Thinking Checklist</i> <i>Use CR Handout 6: Negative Thoughts and Thinking Errors</i> <i>Use CR Handout 18: Irrational Beliefs and Negative Thoughts</i> Process what the consequences might be for the client reacting to his/her most common distorted self-talk statements. <i>Use CS Managing Emotions Handout 5: Consequences of My Anger (5 Best/5 Worst)</i>
<p>15. List and implement alternative, positive, realistic self-talk in response to internal and external anger trigger situations.</p>	<ul style="list-style-type: none"> Facilitate a brainstorming inventory of alternative positive and realistic self-statements to the cues and trigger situations that the client finds most frequently (or intensively) associated with his/her anger experiences. <i>Use CR Handout 12: Positive Thought Arming</i> Teach the client how to substitute positive and realistic self-statements in response to triggers. <i>Use CR Handout 11: Ways to Change Thinking and Behavior</i>
<p>16. Implement a self-evaluation process for assessing anger management.</p>	<ul style="list-style-type: none"> Process what the consequences might be for the client reacting to his/her most common distorted self-talk statements. <i>Use CR Handout 15: Loss of Joys and Pleasure</i> Instruct the client in a basic self-evaluation process that is simple, but geared to increase his/her objectivity in assessing his/her anger expression and its consequences surveying antecedents, behavioral expressions of anger, and consequences. <i>Use CR Handout 2: The ABC Method of Rational Thinking</i> <i>Use CR Handout 3: Using the ABC Rational Thinking Approach</i> <i>Use CS Managing Emotions Handout 4: ABC's of Anger</i>

<p>17. Implement new alternative skills for altering interpersonal expressions of anger.</p>	<ul style="list-style-type: none"> • Teach the client a thought-stopping technique (e.g., thinking of a stop sign and then a pleasant scene, or snapping a rubber band on the wrist) that cognitively interferes with distorted cognitive messages that fuel anger; monitor and encourage the client's use of this technique in daily life between sessions. Use CS Managing Emotions Handout 12: <i>Stop and Think</i> Use CR Handout 10: <i>Practicing Thought Stopping</i> Use CR Handout 11: <i>Ways to Change Thinking and Behavior</i> Use CR Handout 12: <i>Positive Thought Arming</i> • Use role-playing, modeling, and empty chair techniques to teach the client interpersonal expressions of anger that are constructive and assertive, rather than alienating and aggressive. Use CS Managing Emotions Handout 10: <i>Role Playing Exercises for Anger and Impulsivity</i>
<p>18. Write an inventory of resentments and old anger targets that continue to recycle and facilitate engaging current triggers.</p>	<ul style="list-style-type: none"> • Review and help the client inventory and prioritize his/her own personal anger triggers. Use CS Managing Emotions Handout 3: <i>Identifying Triggers and Symptoms of Anger</i> • Assign the client the task of listing all the resentments he/she experiences, especially those that recycle over time in his/her life. Use CS Managing Emotions Handout 2: <i>Looking at Your Anger and Angry Thoughts</i>
<p>19. Verbalize how resentments lead to negative expressions of anger.</p>	<ul style="list-style-type: none"> • Assign the client the task of listing all the resentments he/she experiences, especially those that recycle over time in his/her life. Use CS Managing Emotions Handout 2: <i>Looking at Your Anger and Angry Thoughts</i> • Show the client how to dissect resentments he/she has identified according to either a 12-step model or a cognitive/behavioral (A-M-B-C) model and encourage him/her to apply these principles to his/her resentment. Use CR Handout 1: <i>Thinking Report</i>

<p>20. Verbalize an action plan for coping with and resolving old resentments.</p>	<ul style="list-style-type: none"> Assign the client to write an action plan for each of his/her recurring resentments that addresses the triggers, cues, anger reducers, self-statements, and self-evaluation. Use CR Handout 1: <i>Thinking Report</i> Use CS Managing Emotions Handout 11: <i>Self-Talk During an Angry Situation</i> Ask the client to write a letter of forgiveness to each individual associated with significant resentments.
<p>21. Verbalize how influential people in growing up have modeled anger expressions.</p>	<ul style="list-style-type: none"> Assist the client in identifying ways key life figures (e.g., father, mother, and teachers) have expressed angry feelings and how positively or negatively these experiences have influenced the way he/she handles anger. Use CR Handouts 1: <i>Thinking Report</i>, Use CR Handout 4: <i>Journaling</i> Use CR Handout 5: <i>Recording Your History - Your Autobiography</i>
<p>22. Identify pain and hurt of past or current life that fuels anger.</p>	<ul style="list-style-type: none"> Assign the client to list the experiences of life that have hurt and led to anger. Use CR Handout 4: <i>Journaling</i> Use CR Handout 5: <i>Recording Your History - Your Autobiography</i> Empathize and clarify feelings of hurt and anger tied to traumas of the past. Use CR Handout 4: <i>Journaling</i> Use CR Handout 5: <i>Recording Your History - Your Autobiography</i>

(Excerpts taken from *The Probation and Parole Treatment Planner, 2003*)

COMMON SITUATIONS THAT TRIGGER CRAVINGS AND URGES

- Exposure to drugs/alcohol
- Seeing other people using drugs/alcohol or committing crimes
- Associating with people who use drugs or are involved in criminal conduct
- Certain Emotions, including fatigue, stress, self-doubt, nostalgia, boredom, anger, guilt, frustration, excitement, or accomplishment

WAYS TO COPE WITH CRAVINGS AND URGES

1. **Finding Another Activity** - This will distract you from the craving or urge. Doing something may help (e.g. taking a shower); sometimes eating will suffice. With time, other behaviors will feel more natural and you will need to use fewer replacements.
2. **Talking to Family/Friends** about the cravings/urges - This may help identify what triggered the craving; it may also help restore some honor to a relationship that may have been previously damaged.
3. **“Toughing It Out” or “Urge Surfing”** - Gain control of the situation by simply bearing the discomfort; it will go away with time. Here’s how you do it:
 - a. Pay attention to how you experience the craving. What are your thoughts and feelings about the craving? Is it in your stomach?
 - b. Is it still a craving? Or is it now an urge? If you feel it in your body and you are now taking action to fulfill the craving-like going to the liquor store or calling an old crime buddy—it is an urge.
Remember: Cravings are mental; Urges have body senses and move you to action.
 - c. When you feel the craving moving to an urge, focus on your physical responses. Talk down the urge with self-talk. *Turn the corner* by talking to a non-using friend instead of continuing to the liquor store. The urge will go away faster than you think. But you have to **TURN THE CORNER**.

WAYS TO COPE WITH CRAVINGS AND URGES (cont'd)

4. **Remember the Bad Things That Can Happen** - What are the negative outcomes that result from using drugs or committing a crime? What are the rewards of being drug-free or of engaging in positive or pro-social behavior in the community?
 - a. Make a list of *bad* things that have happened to you because of drug/alcohol use or criminal behavior (i.e. pain, jail, loss of money, family, friends, etc.)
 - b. Make a list of the *positive* things that come with sobriety and pro-social behavior (i.e. freedom, better physical/mental health, improved family relations, etc.)
 - c. Talk to yourself about goals. What is it you are trying to accomplish? Remind yourself of your accomplishments thus far.
 - d. Identify perceptions or statements that make you uncomfortable. When you find one, challenge the thought. Convince yourself that you will get better and you can survive the discomfort.

5. **Stop and Think**
 - a. What are the joys and pleasures you have to lose by giving in to the urge to use?
 - b. What are the joys and pleasures you have to lose by doing a crime?

IMPULSIVITY

Behavioral Definitions:

- History of impulsive, aggressive outbursts out of proportion to any precipitating stressors leading to assaultive acts or destruction of property.
- Fails to control impulsive, irrational, and /or emotional behavior regardless of consequences.
- Loss of personal freedoms due to presence in criminal justice system as a result of impulsive behavior.
- Remorse for the consequences of acting without thought.
- Easily distracted from focusing or concentrating on an activity at hand, rarely completing anything that was started.
- Failure to maintain meaningful employment due to capricious and cavalier lack of regard for performance outcomes.
- Loss of meaningful relationships as a result of impulsive, aggressive, and/or thoughtless behavior.
- Impulsive behavior related to use of drugs and alcohol, gambling, sex, or other self-defeating patterns that result in diminished quality of life.

Goals:

- Decrease frequency of impulsive behavior.
- Acquire skills and techniques for delaying acting on impulsive thoughts.
- Cope with impulses in a constructive way that enhances daily functioning.
- Experience progressively better health-related, financial, and social outcomes as a result of engaging in more thoughtful behavior.

Objectives	Interventions
<p>1. Describe the nature and history of impulsive behavior and how it is triggered.</p>	<ul style="list-style-type: none"> • Explore the client's history of situations that trigger impulsive behavior and how his/her impulsive thoughts, decisions, and actions (e.g., always reacting to every situation with hostility, doing the first thing that comes to mind, using drugs/alcohol, engaging in drugs/alcohol, engaging in gambling or sex). Use CR Handout 5: <i>Recording Your History - Your Autobiography</i> Use CR Handout 8: <i>Urges and Impulse Log</i> Use CR Handout 1: <i>Thinking Report</i> • Confront the client's attempts to minimize his/her poor management of impulsive behavior, to project blame onto others, or to discount the harmful consequences. Use CR Handout 7: <i>Errors in Thinking Checklist</i> Use CR Handout 16: <i>Stages of Change Worksheet</i> Use CR Handout 6: <i>Negative Thoughts and Thinking Errors</i>
<p>2. Participate in a biopsychosocial evaluation.</p>	<ul style="list-style-type: none"> • Refer the client for a complete biopsychosocial evaluation to assess for chemical dependence, eating disorder or other psychiatric disorder. • Refer the client to a physician for psychotropic medication.
<p>3. Verbalize a deeper understanding of the nature of impulsivity and possible means of impulse control.</p>	<ul style="list-style-type: none"> • Teach the client a basic objective perspective on impulsive behavior that minimally includes instruction on the Antecedents of behavior, Behavioral features associated with impulsivity, and Consequences of impulsivity (i.e., the ABCs of impulsivity). Use CR Handout 2: <i>The ABC Method of Rational Thinking</i> Use CR Handout 3: <i>Using the ABC Rational Thinking Approach</i>

<p>4. Identify and replace dysfunctional thoughts or beliefs that trigger impulsive behavior.</p>	<ul style="list-style-type: none"> Brainstorm with the client his/her thoughts or beliefs that trigger impulsive behavior (e.g., "Everyone is out to get me," "It's cool to respond quickly to someone in my face," "The easiest way to get out of a situation with my probation officer is to say something immediately even if it is a lie"). Use CR Handout 19: Negative Thoughts that Lead to AOD Use and Criminal Conduct Use CR Handout 8: Urges and Impulse Log Use CR Handout 1: Thinking Report Facilitate a brainstorming inventory of alternative positive and realistic self-statements to the thoughts and beliefs that the client finds most frequently (or intensively) associated with his/her impulsive behavior. Use CR Handout 9: Triggers, and Alternative Thoughts and Beliefs Use CR Handout 12: Positive Thought Arming Use CR Handout 10: Practicing Thought Stopping
<p>5. List and implement alternative, positive, realistic self-talk in response to feelings that trigger impulsive behavior.</p>	<ul style="list-style-type: none"> Assist the client in identifying feelings that trigger his/her impulsive behavior. Use CR Handout 20: Feeling List Use CR Handout 1: Thinking Report Facilitate a brainstorming inventory of alternative positive and realistic self-statements to counteract the feelings that the client finds most frequently (or intensively) associated with his/her impulsive behavior; encourage and reinforce implementation of positive self-talk. Use CR Handout 12: Positive Thought Arming Use CS Managing Emotions Handout 14: Beliefs of a Positive Realist
<p>6. Brainstorm the pros and cons of impulsively making a decision without thinking through the consequence.</p>	<ul style="list-style-type: none"> Brainstorm with the client the pros (e.g., decisions are made quickly) and cons (e.g., loss of opportunities, monetary costs) of impulsively making a decision without thinking through the consequence. Use CR Handout 15: Loss of Joys and Pleasure Use CR Handout 1: Thinking Report Use CR Handout 3: Using the ABC Rational Thinking Approach Use CR Handout 14: Decisional Balance of Present Behavior vs Changed Behavior

<p>7. Verbalize an understanding of how strong emotions can trigger impulsivity.</p>	<ul style="list-style-type: none"> • Assist the client in exploring the role of anger and aggression in increasing the risk of impulsive behavior. Use CR Handout 1: <i>Thinking Report</i> Use CR Handout 4: <i>Journaling</i> Use CS Managing Emotions Handout 5: <i>Consequences of My Anger (5 Best/5 Worst)</i> • Assist the client in exploring the role of anxiety in increasing the potential for impulsive behavior in an attempt to reduce the anxious feelings. Use CR Handout 1: <i>Thinking Report</i> Use CR Handout 4: <i>Journaling</i> • Guide the client in a brainstorming session that identifies common cues that can potentially alert him/her to when he/she is becoming angry or anxious (e.g., tight tummy, dry mouth, heart rate increases, blood pressure increases, shallower breathing, clenched fists, perceived threats). Use CS Managing Emotions Handout 1: <i>Common Physical Characteristics of Anger, Stress, Anxiety, Fear, and Guilt</i>
<p>8. Learn and utilize physiological, thinking, and behavioral tools of anger and anxiety management.</p>	<ul style="list-style-type: none"> • Teach the client tools of anger management. Use CR Handout 4: <i>Journaling</i> Use CS Managing Emotions Handout 1: <i>Common Physical Characteristics of Anger, Stress, Anxiety, Fear, and Guilt</i> Use CS Managing Emotions Handout 2: <i>Looking at Your Anger and Angry Thoughts</i> • Teach the client simple, quick techniques to immediately help reduce anger or anxiety elevations in a variety of situations (e.g., deep breathing, counting backwards, engaging in pleasant imagery, using a worry stone). Use CS Managing Emotions Handout 12: <i>Stop and Think</i> Use CS Managing Emotions Handout 13: <i>Deep Relaxation</i> Use CR Handout 10: <i>Practicing Thought Stopping</i>

<p>9. Identify and accept responsibility for the negative consequences of past impulsive behavior.</p>	<ul style="list-style-type: none"> Assist the client in identifying some of the negative consequences his/her impulsive behavior; encourage and support the client in taking responsibility for consequences of his/her past behavior. Use CR Handout 2: The ABC Method of Rational Thinking Use CR Handout 3: Using the ABC Rational Thinking Approach
<p>10. Identify cognitive steps that would aid in preventing impulsive behavior.</p>	<ul style="list-style-type: none"> Teach the client steps that would aid in preventing impulsive behavior (e.g., pausing-to-think; implementing thought stopping; taking thoughts or feelings to court; using a problem-solving approach of stating the situation clearly, stating the desired outcome, listing the alternative ways of achieving the desired outcome, sorting out the pros and cons for each alternative). Use CR Handout 10: Practicing Thought Stopping Use CR Handout 12: Positive Thought Arming Use CR Handout 11: Ways to Change Thinking and Behavior Use CS Managing Emotions Handout 15: Dealing with Cravings Instruct the client to describe in writing the role pausing-to-think has in preventing impulsive actions (e.g., increases the space between the incident and action taken, allows for consideration of consequences, allows for consideration of alternative actions).
<p>11. Implement the cognitive steps that aid in preventing impulsive behavior.</p>	<ul style="list-style-type: none"> Role-play with the client the cognitive steps that can prevent impulsivity (e.g., pausing-to-think; implementing thought stopping; taking thoughts or feelings to court; using a problem-solving approach of stating the situation clearly, stating the desired outcome, listing the alternative ways of achieving the desired outcome, sorting out the pros and cons for each alternative); provide the client with supportive feedback on his/her performance on the role-play, encouraging any attempt to think before acting. Use CR Handout 11: Ways to Change Thinking and Behavior Use CS Managing Emotions Handout 10: Role Playing Exercises for Anger and Impulsivity Assign the client to implement in his/her daily life and journal the steps to prevent impulsive behavior. Use CR Handout 4: Journaling

<p>12. Practice decision-making skills in recreational situations.</p>	<ul style="list-style-type: none"> Use physical exercises or games (e.g., rock climbing, Mastermind, model building) to allow the client to practice decision-making skills and emphasize the potential harmful consequences of impulsive actions; ask the client to identify real-life situations in which he/she could apply these skills.
<p>13. Identify the difference between fact and opinion.</p>	<ul style="list-style-type: none"> Explore with the client the difference between fact and opinion, and how assuming an opinion is fact can lead to impulsive behavior.
<p>14. Keep a journal of impulsive thoughts/feelings and triggers that arise daily.</p>	<ul style="list-style-type: none"> Instruct the client to keep a journal of impulsive thoughts/feelings and triggers that arise daily, recording how they were handled, the outcome of the situation, the desired outcome, and the alternate courses of action that could have been taken to achieve the desired outcome. Use CR Handout 4: <i>Journaling</i> Process with the client any material in his/her journal of impulsive thoughts, feelings, and triggers that led to negative outcomes.
<p>15. Contact those who have been affected/hurt by impulsive behavior to gain feedback and/or make amends.</p>	<ul style="list-style-type: none"> Instruct the client to list the people who have been negatively affected or hurt by his/her irresponsible behavior and record what actions hurt them and why it was hurtful. Use CR Handout 4: <i>Journaling</i> Use CR Handout 5: <i>Recording Your History - Your Autobiography</i> Encourage the client to contact, if appropriate, those who have been affected or hurt by his/her thoughtless behavior to gain feedback as to the pain caused and/or make amends. Debrief with the client any contact he/she made with those affected or hurt by his/her irresponsible behavior and support or redirect him/her as necessary.

<p>16. Implement new conflict communication skills and receive feedback.</p>	<ul style="list-style-type: none"> Describe and model for the client several conflict communication skills (e.g., double-sided reflections, partially agreeing, agreeing with a twist, "I" statements) that could improve his/her communication and prevent impulsive responses. Use CS Managing Emotions Handout 17: Communication Skills Facilitate the client's skill rehearsals for three new communication skills, utilizing his/her own recent situations where better communication skills would have improved the outcome. Review the client's implementation of new conflict communication skills in daily life, reinforce success and redirect for failure.
<p>17. Implement new alternative skills for altering interpersonal expressions of anger.</p>	<ul style="list-style-type: none"> Teach the client a thought-stopping technique (e.g., thinking of a stop sign and then a pleasant scene, or snapping a rubber band on the wrist) that cognitively interferes with distorted cognitive messages that fuel anger; monitor and encourage the client's use of this technique in daily life between sessions. Use CS Managing Emotions Handout 12: Stop and Think Use CR Handout 10: Practicing Thought Stopping Use role-playing, modeling, and empty chair techniques to teach the client interpersonal expressions of anger that are constructive and assertive, rather than alienating and aggressive.
<p>18. Write an inventory of resentments and old anger targets that continue to recycle and facilitate engaging current triggers.</p>	<ul style="list-style-type: none"> Review and help the client inventory and prioritize his/her own personal anger triggers. Use CS Managing Emotions Handout 3: Identifying Triggers and Symptoms of Anger Assign the client the task of listing all the resentments he/she experiences, especially those that recycle over time in his/her life. Use CS Managing Emotions Handout 2: Looking at Your Anger and Angry Thoughts

<p>19. Verbalize how resentments lead to negative expressions of anger.</p>	<ul style="list-style-type: none"> • Assign the client the task of listing all the resentments he/she experiences, especially those that recycle over time in his/her life. Use CS Managing Emotions Handout 2: Looking at Your Anger and Angry Thoughts • Show the client how to dissect resentments. he/she has identified according to either a 12-step model or a cognitive/behavioral (A-M-B-C) model and encourage him/her to apply these principles to his/her resentment. Use CR Handout 2: The ABC Method of Rational Thinking Use CR Handout 3: Using the ABC Rational Thinking Approach
<p>20. Verbalize an action plan for coping with and resolving old resentments.</p>	<ul style="list-style-type: none"> • Assign the client to write an action plan for each of his/her recurring resentments that addresses the triggers, cues, anger reducers, self-statements, and self-evaluation. Use CS Managing Emotions Handout 16: Cognitive Steps for Impulsivity • As the client to write a letter of forgiveness to each individual associated with significant resentments.
<p>21. Verbalize how influential people in growing up have modeled anger expressions.</p>	<ul style="list-style-type: none"> • Assist the client in identifying ways key life figures (e.g., father, mother, and teachers) have expressed angry feelings and how positively or negatively these experiences have influenced the way he/she handles anger. Use CR Handout 4: Journaling Use CR Handout 5: Recording Your History - Your Autobiography
<p>22. Identify pain and hurt of past or current life that fuels anger.</p>	<ul style="list-style-type: none"> • Assign the client to list the experiences of life that have hurt and led to anger. Use CR Handout 4: Journaling Use CR Handout 5: Recording Your History - Your Autobiography • Empathize and clarify feelings of hurt and anger tied to traumas of the past. Use CR Handout 1: Thinking Report

(Excerpts taken from *The Probation and Parole Treatment Planner, 2003*)

SECTION 8 - COGNITIVE SKILLS

Assertiveness Skills Development

Participant Objectives:

- Learn the four ways people handle conflict and get their needs met: being aggressive, being passive, being passive-aggressive and being assertive
- Learn and practice assertiveness skills
- Identify clients who might benefit from this skill and learn ways to teach it using the Probation/Parole Planner and handouts

THREE WAYS TO DEAL WITH CONFLICT OR PROBLEMS

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

1. FLIGHT (avoids the problem or is passive)

- Gives up his or her rights when there is any conflict with what someone else wants.
- Doesn't get what he or she wants at his or her own expense.

2. FIGHT (attacks others or gets aggressive)

- The aggressive person protects his/her own rights but gets what he or she wants at the *expense* of others.
- With the aggressive person, others pay.

3. FAKE (passive-aggressive)

- Fake falls between avoiding and being aggressive.
- Person is not direct in approaching problems.
- Fails to express needs in a way that other people can respond to them.
- Passive-aggressive people don't get what they want at the expense of themselves and others.
- Both others and the person pays.

THE FOURTH WAY TO DEAL WITH CONFLICT OR PROBLEMS

(The Healthy Choice)

4. FAIR (being assertive)

- **The healthy choice is to learn and practice the skills of being assertive.**
- **The assertive person does not compromise his or her rights.**
- **The assertive person does not get something at the expense of others.**

THE ART OF BEING ASSERTIVE - 10 KEY WAYS

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

1. Recognize your rights in a situation without trespassing on the rights of others.
2. Know how to clearly state your opinions and what it is you want from others.
(This is not a guarantee that we will get our very own way every time, but it does improve our chances.)
3. Consider the needs of others as you get your own needs met.
4. Be flexible and give, yet at the same time continue to make your position clear.
5. Avoid blaming; avoid using "you."
6. State how you feel and think; use "I" messages.
7. Have your goals clearly in mind; know what you want.
8. Confront the issues head on. Attack the problem and not the person.
9. Become part of the solution and not part of the problem.
10. Once you make a decision, stick with what you have decided. Don't relive or continually rehash *what might have been*.

Reprinted with permission of the authors of *Criminal Conduct and Substance Abuse Treatment*, Kenneth W. Wanberg and Harvey B. Milkman (1998).

ASSERTIVENESS DEFICITS	
<p>Behavioral Definitions:</p> <ul style="list-style-type: none"> • Reluctant to express dissatisfaction or verbalize unmet needs or desires. • Frequently fails to refuse a request to do something undesirable for or with someone. • Avoids expressing views that are in conflict with others' opinions. • Expresses thoughts aggressively. • Utilizes a passive-aggressive or indirect style of communication that alienates others. • Excessive tolerance of unpleasant situations. • Inability to directly express feelings appropriately to others. • Overly anxious in social situations. • Pattern of suppressing bad feelings until one single event triggers explosion of resentment. 	
<p>Goals:</p> <ul style="list-style-type: none"> • Improve ability to effectively express personal opinions, desires, and feelings without antagonizing or alienating others. • Maintain a clearer perception and appreciation for the rights and boundaries of self and others. • Increase sense of ease and confidence in different social situations. • Learn to differentiate and exhibit assertive communication from that which is passive and aggressive. 	
Objectives	Interventions
<p>1. Describe situations in which it has been difficult to express thoughts or feelings assertively.</p>	<ul style="list-style-type: none"> • Explore the client's history of lack of assertiveness, noting the early development of this pattern and current situations that trigger assertiveness anxiety.
<p>2. Verbalize the different ways of dealing with conflict and problems.</p>	<ul style="list-style-type: none"> • Teach the client the differences between passive, aggressive, passive-aggressive, and assertive styles of interpersonal communication. Use CS Assertiveness Handout 1: Different Ways to Handle Conflict, Use CS Assertiveness Handout 2: 10 Keys, Use CS Assertiveness Handout 3: Role-Playing Exercises

<p>3. Implement active listening.</p>	<ul style="list-style-type: none"> • Teach the client the fundamental skills of active listening (e.g., asking open-ended questions, affirming the speaker with eye contact and nodding, reflecting the feelings behind the communication, summarizing the content, and eliciting self-motivating statements) and how to implement these skills in everyday communication. Use CS Assertiveness Handout 4: Active Listening • Model active listening skills showing how they are apt to vary within the four classic interpersonal styles (e.g., passive, aggressive, passive-aggressive, and assertive). Use CS Assertiveness Handout 1: Ways to Deal with Conflict or Problems and role play
<p>4. Identify own interpersonal communication style and techniques.</p>	<ul style="list-style-type: none"> • Explore the client's history of lack of assertiveness, noting the early development of this pattern and current situations that trigger assertiveness anxiety. • Assist the client in identifying the composition of the various communication styles he/she tends to use in routine interactions Use CS Assertiveness Handout 5: Non-Assertive Situations
<p>5. List specific situations in which assertiveness skills may have been helpful.</p>	<ul style="list-style-type: none"> • Review with the client recent situations in which he/she could have benefitted from more assertive communication skills. Use CS Assertiveness Handout 5: Non-Assertive Situations
<p>6. List two situations in which assertiveness skills were used and describe the outcome.</p>	<ul style="list-style-type: none"> • Review with the client his/her use of assertiveness skills. Use CS Assertiveness Handout 6: Assertive Situations Activity Log
<p>7. Identify the benefits of assertive communication.</p>	<ul style="list-style-type: none"> • Guide the client in a brainstorming session that identifies the common benefits resulting from assertive communication skills (e.g., get needs or desires met, promotes understanding, clarifies feelings to others, establishes boundaries for self and others).

<p>8. Describe specific personal goals for improving interpersonal communication skills and why they are important.</p>	<ul style="list-style-type: none"> Assist the client in identifying and prioritizing specific goals for improving his/her interpersonal communication skills. Use CS Assertiveness Handout 7: Goals for Assertiveness Development Process with the client the decisional balance (e.g., pros and cons) of the payoffs for his/her present interpersonal communication style versus implementing a healthier, more assertive style. Use CS Assertiveness Handout 8: Decisional Balance/DARN Rating
<p>9. Verbalize and implement the essential steps for effectively expressing criticism or complaint to another person.</p>	<ul style="list-style-type: none"> Instruct the client in a technique for expressing a complaint or providing another criticism (e.g., specifically decide what the issue is; decide if he/she should express anything; when, to whom, and what should be done; state complaint and suggested solution in a friendly manner; ask for reaction; indicate he/she understand others' view; discuss alternative solutions; reach agreement). Use CS Assertiveness Handout 9: Expressing Complaints/Criticism Use role-playing, modeling, and behavioral rehearsal to apply the effective, assertive technique for expressing complaints and criticism to real-life situations. Use CS Assertiveness Handout 9: Expressing Complaints/Criticism
<p>10. Verbalize and implement the essential steps for effectively receiving a complaint or criticism from another person</p>	<ul style="list-style-type: none"> Instruct the client in a technique for responding to complaints or criticism (e.g., listen carefully to the complaints, ask for more information, decide if the complaint is justified, decide if he/she should accept or deny responsibility and what should be done, express his/her view and suggested solution, ask for other person's view). Use CS Assertiveness Handout 10: Receiving Complaints/Criticism Use role-playing, modeling, and behavioral rehearsal to apply the assertive technique for responding to complaints and criticism to real-life situations. Use CS Assertiveness Handout 10: Receiving Complaints/Criticism

<p>11. Report success at giving and receiving complaints and criticism.</p>	<ul style="list-style-type: none"> Review the client's implementation of giving and receiving complaints and criticism; reinforce success and redirect for failure experiences. Use CS Assertiveness Handout 11: Expressing a Complaint/Criticism Exercise Use CS Assertiveness Handout 12: Receiving a Complaint/Criticism Exercise
<p>12. Identify three new conflict communication skills that would improve interpersonal communications.</p>	<ul style="list-style-type: none"> Describe and model for the client several conflict communication skills (e.g., double-sided reflections, partially agreeing, agreeing with a twist, "I" statements) that could improve his/her communication. Use CS Assertiveness Handout 13: Communication Skills
<p>13. Describe how new communication skills could have been employed in recent situations.</p>	<ul style="list-style-type: none"> Describe and model for the client several conflict communication skills (e.g., double-sided reflections, partially agreeing, agreeing with a twist, "I" statements) that could improve his/her communication. Use CS Assertiveness Handout 13: Communication Skills Assign the client to list specifically how three new communication skills could have been employed in recent situations where he/she experienced a need for a better communication outcome.
<p>14. Implement new conflict communication skills and receive feedback.</p>	<ul style="list-style-type: none"> Describe and model for the client several conflict communication skills (e.g., double-sided reflections, partially agreeing, agreeing with a twist, "I" statements) that could improve his/her communication. Use CS Assertiveness Handout 13: Communication Skills Facilitate client skill rehearsals for three new communication skills, utilizing his/her own recent situations where better communication skills would have improved the outcome. Review the client's implementation of new conflict communication skills in daily life; reinforce success and redirect for failure.
<p>15. Implement positive self-talk relative to new assertive communication skills.</p>	<ul style="list-style-type: none"> Assist the client in reviewing and inventorying some of the self-statements he/she recently made in response to implementing communication skills and provide helpful reframing of distorted, disparaging self-talk.

<p>16. Attend an assertiveness training group.</p>	<ul style="list-style-type: none"> • Assign the client to attend assertiveness training or interpersonal communication classes. • Process the content the client has learned from attending an assertiveness group and reinforce implementation of new assertiveness skills.
<p>17. Identify the fears associated with being assertive versus passive.</p>	<ul style="list-style-type: none"> • Assist the client in reviewing and inventorying some of the self-statements he/she made recently in response to implementing communication skills and provide helpful reframing of distorted, disparaging self-talk. • Explore the client's fears associated with being assertive and the origin of these fears in early development.
<p>18. Identify aggressive role models.</p>	<ul style="list-style-type: none"> • Ask the client to identify aggressive role models that have been influential in his/her life and may have led to his/her adoption of any aggressive communication style.
<p>19. Identify the negative impact on others of communicating in an aggressive manner.</p>	<ul style="list-style-type: none"> • Teach the client the differences between passive, aggressive, passive-aggressive, and assertive styles of interpersonal communication. Use CS Assertiveness Handout 1: Ways to Deal with Conflict or Problems Use CS Assertiveness Handout 2: The Art of Being Assertive - 10 Key Ways Use CS Assertiveness Handout 3: Exercises for Assertiveness Skills Development • Assist the client in generating a list of personal consequences most likely to result from passive, aggressive, passive-aggressive, and assertive interpersonal communication styles. • Ask the client to explore his/her feelings when he/she was the target of aggressive communication; relate these feelings to others who have been the target of the client's aggressive communication. • Confront the client's insensitivity to the feelings of others who are the targets of his/her aggression.

(Excerpts taken from *The Probation and Parole Treatment Planner, 2003*)

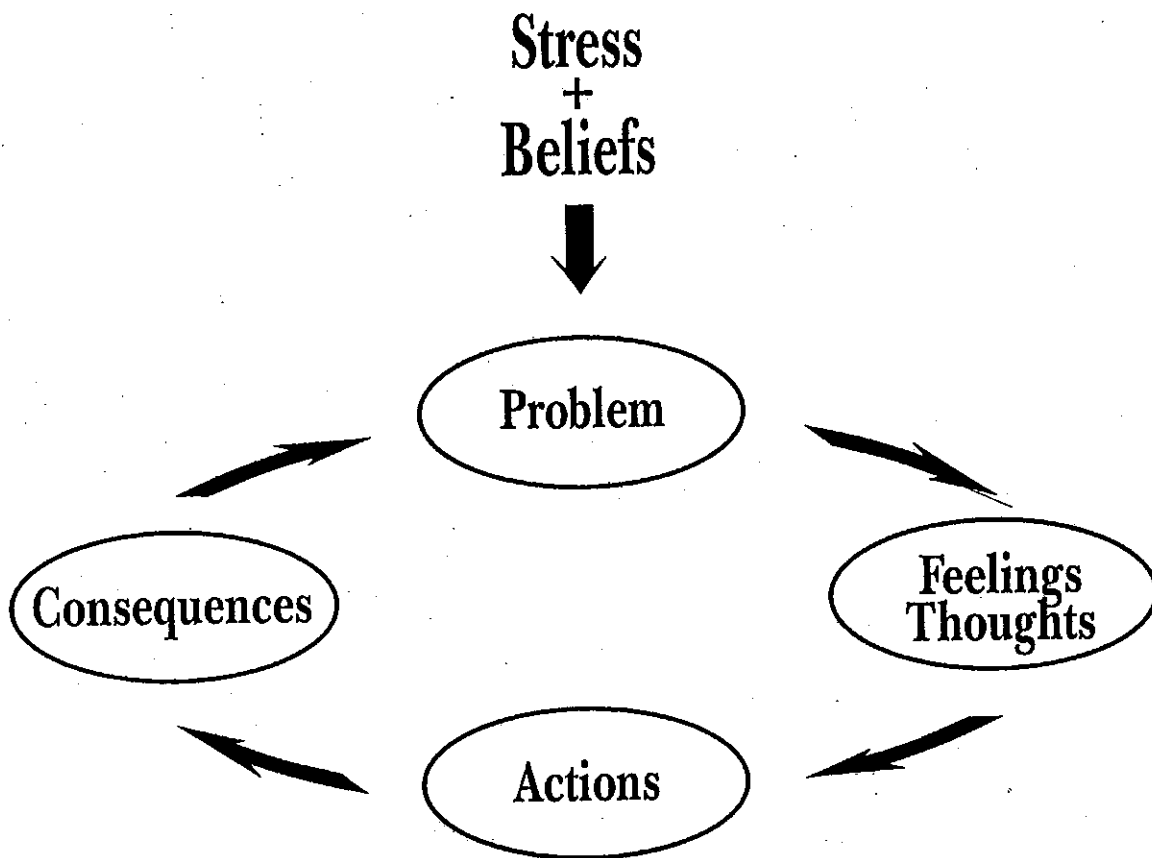
SECTION 9 - COGNITIVE SKILLS Problem Solving

Participant Objectives:

- To understand the conflict cycle
- To learn and practice the six steps to problem solving
- To learn the HALT intervention
- To identify clients who might benefit from this skill and learn ways to teach it using the Probation/Parole Planner and handouts.

THE CONFLICT CYCLE

Conflict Cycle



SIX STEPS TO PROBLEM SOLVING

Step 1: Identify the Problem

- Specifically state the facts.
- Remove emotions and/or blame.

Step 2: Identify the Goal

- State what you would like the outcome to be.
- The goal should be realistic.

Step 3: Identify Different Solutions

- Get the facts you need to come up with for good solutions.
- Determine what actions are within your power.

Step 4: Identify the Consequences

- Evaluate each solution and select 2 to 3 solutions that are most beneficial to solving the problem
- For each solution that you chose, identify positive and negative consequences.

Step 5: Make the Best Choice and Implement

- Select the solution that is most beneficial to the situation.
- Develop an action plan.

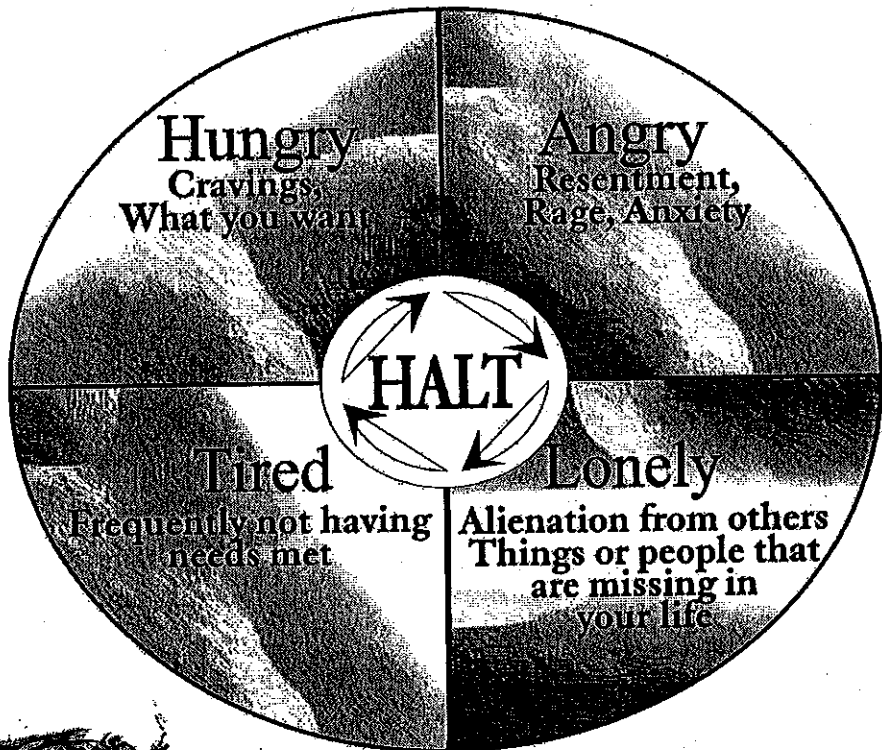
Step 6: Evaluate the Outcome

- What was the result?
- Could you have done something different?
- What will you do next?

HALT



HALT

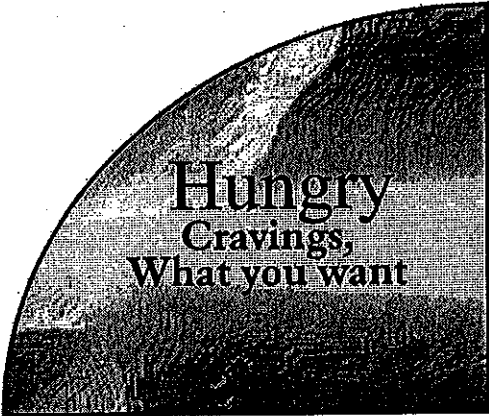


"H" in HALT



HALT

What do you need or what do you want?





What happens when you don't get what you want or need?

"A" in HALT

HALT

What feelings or situations make you angry?



Angry
Resentment
Rage, Anxiety

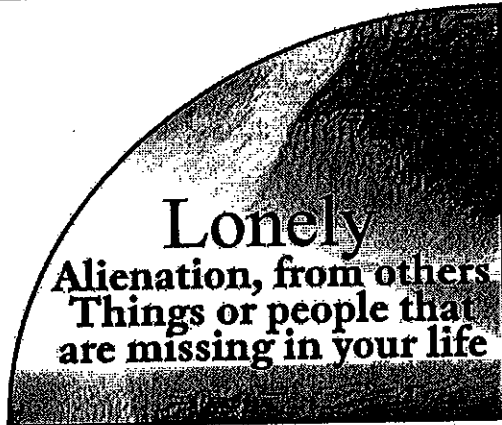
What happens when you are angry?

"L" in HALT



HALT

What is missing in your life?



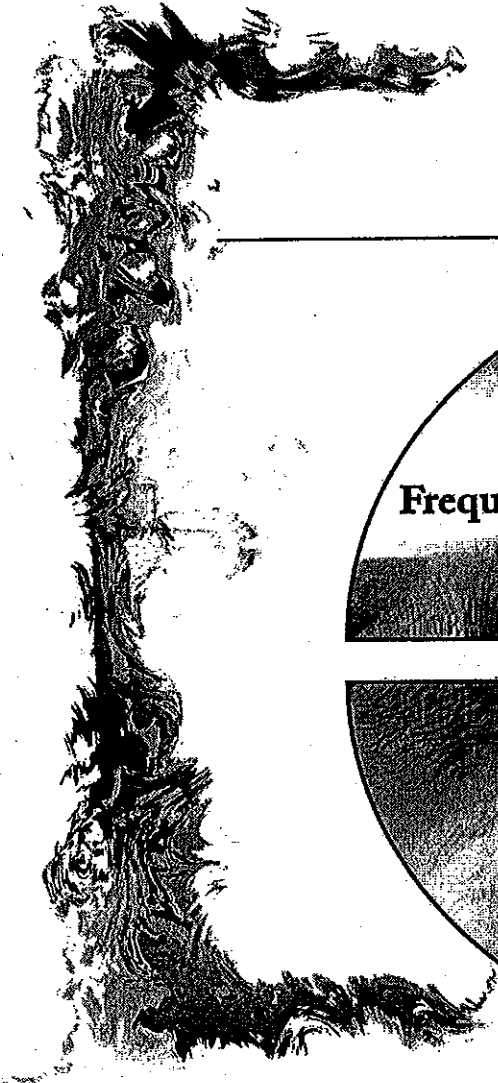


What happens when you feel lonely?

"T" in HALT

HALT

What situations make you feel like you can never win?



Tired
Frequently not having
needs met

What happens when you are tired of trying or helpless?

PROBLEM-SOLVING SKILL DEFICITS

Behavioral Definitions:

- Routinely overlooks and fails to consider all the important factors when responding to problems.
- Inability to adequately problem solve creates or adds to the problems that significant others must deal with.
- Often resorts to criminal behavior (e.g., assault, burglary, embezzling) to solve interpersonal, economic, or other problems.
- Frequently unable to recognize or define problems in sufficient time to avoid having problems evolve into pernicious and seemingly out-of-control situations.
- Unrealistically relies on magical or wishful thinking to resolve real-life problems.
- Frequently opts to deliberately avoid addressing problems and critical decisions.
- Limited decision-making abilities result in frequent self-disapproval and diminished self-concept.
- Unable to make personal decisions and stick to them.
- Pattern of personal decision making that results in loss of freedom, income, and social opportunities.

Goals:

- Adhere to a proven sequential step process for making good problem-solving decisions.
- Recognize and appropriately classify problems at the earliest possible stage.
- Thoroughly investigate problems so that subsequent decisions are based on the best available information.
- Clearly define and state the essential factors constituting a given problem.
- Experience progressively better health-related, financial, and social outcomes as a result of better problem solving.

Objectives	Interventions
<p>1. Describe conflicts that have developed because of ineffective problem solving.</p>	<ul style="list-style-type: none"> Explore the client's history of problem recognition, attempts at problem solving, and consequences of ineffective problem solving. Use CR Handout 5: <i>Recording Your History - Your Autobiography</i> Assist the client in identifying his/her ineffective problem-solving approaches (e.g., ignoring or avoiding confronting a problem, becoming aggressive). Use CS Assertiveness Skills Handout 1: <i>Ways to Deal with Conflict or Problems</i> Use CS Assertiveness Skills Handout 3: <i>Exercises for Assertiveness Skills Development</i> Use CS Assertiveness Skills Handout 7: <i>Goals for Improving My Interpersonal Communication Skills</i>
<p>2. List the consequences of effective versus ineffective problem solving.</p>	<ul style="list-style-type: none"> Explore the client's history of problem recognition, attempts at problem solving, and consequences of ineffective problem solving. Use CS Problem Solving Handout 1: <i>Problem Examples</i> Use CS Problem Solving Handout 2: <i>Choose...Plan...Do</i> Use CS Problem Solving Handout 3: <i>Consequences of My Problem Solving Methods (5 Best/5 Worst)</i> Discuss with the client what some of the consequences are for effective versus ineffective problem solving (e.g., ineffective problem solving leads to: the problem getting worse, lack of control over outcomes, wasting time solving an ill-defined problem, neglecting pertinent information). Use CS Problem Solving Handout 4: <i>Evaluate</i> Use CS Problem Solving Handout 5: <i>Explore Alternatives and Consequences</i> Use CS Problem Solving Handout 15: <i>Benefits for Using Effective Problem Solving Skills</i>

<p>3. Formulate a definition of problems that makes it obvious how commonplace they are in everyday experience.</p>	<ul style="list-style-type: none"> • Discuss and explore with the client a definition for problems that is both comprehensive and concrete (e.g., problems continuously arise out of everyday life dealings with other people and one's own thoughts and emotions). • Teach the client that problems have many nuances, consequences, and demands (e.g., problems are varied in duration, intensity, and malignancy; problems cause stress; problems create difficult feelings and thoughts; problems sometimes require action; action is driven by thoughts and feelings; problems often require dealing with other people; problems can create other problems). <p>Use CR Handout 1: Thinking Report Use CS Problem Solving Handout 6: Hit or Quit</p>
<p>4. Identify methods that have been used to determine that a problem exists.</p>	<ul style="list-style-type: none"> • Ask the client to list all the different methods he/she has used for recognizing and determining when he/she has a problem on his/her hands (e.g., increased amounts of stress, feedback from others, a feeling of gloom). <p>Use CS Problem Solving Handout 7: Personal Warning Signs Activity</p>
<p>5. Sort methods of problem determination into those that arise from internal versus external indicators.</p>	<ul style="list-style-type: none"> • Assist the client in sorting internal (e.g., feelings, physical sensations) from external (e.g., signals or messages from outside of your body) problem indicators. <p>Use CS Managing Emotions Handout 1: Common Physical Characteristics of Anger, Stress, Anxiety, Fear and Guilt Use CS Problem Solving Handout 8: Internal/External Problem Indicators</p>
<p>6. List the pros and cons of identifying a problem sooner rather than later.</p>	<ul style="list-style-type: none"> • Discuss with the client what some of the consequences are for effective versus ineffective problem solving (e.g., ineffective problem solving leads to: the problem getting worse, lack of control over outcomes, wasting time solving an ill-defined problem, neglecting pertinent information). • Assign the client to list the pros and cons of identifying a problem sooner versus later.

<p>7. Write out the common steps for problem solving that most often assure success.</p>	<ul style="list-style-type: none"> • Ask the client to list the ideal steps (e.g., define the problem, identify alternative solutions, list the pros and cons of each alternative through information gathering, decide on the best course, implement a solution, evaluate the outcome) involved in successful problem solving. Use CS Problem Solving Handout 2: Choose...Plan...Do Use CS Problem Solving Handout 9: Problem Solving Worksheet Use CS Problem Solving Handout 10: Stop and Think. Do the Three-Step! Use CS Problem Solving Handout 11: Goal Examples
<p>8. Describe the difference between fact and opinion.</p>	<ul style="list-style-type: none"> • Teach the client the difference between fact and opinion (e.g., in order to solve a problem it needs to be defined clearly to avoid confusion regarding what I <i>think</i> the problem is [opinion] versus what the problem really is [fact]. Often when presenting a problem, we confuse fact and opinion, or present opinion as fact. Use CS Problem Solving Handout 1: Problem Examples Use CS Problem Solving Handout 12: Identify Problem and Goal • Assign the client to identify and record at least three recent occasions when he/she directly observed people having trouble sorting fact from opinion.
<p>9. Identify a set of skills that contribute to good fact finding.</p>	<ul style="list-style-type: none"> • Discuss primary fact finding skills that contribute to good fact-finding (e.g., Observation or using the senses to take in what the problem is; Information Gathering or asking questions [Who, What, When, Where, Why] to increase the information we have about a problem to aid in formulating a complete definition of the problem; Remembering or using different techniques to store all the information gathered [mnemonics, taking notes]; Evaluation of sorting the information collected for relevancy, fact, and opinion).
<p>10. Identify personal strengths and weaknesses in fact findings.</p>	<ul style="list-style-type: none"> • Assist the client in identifying his/her fact-finding strengths and weaknesses (i.e., which skills are utilized and which are ignored).

<p>11. Describe the impact that pausing to think has on each of the fact-finding skills.</p>	<ul style="list-style-type: none"> • Ask the client to write a description for the effect(s) pausing to think would likely have on his/her fact-finding skills (e.g., allows for more complete observation, allows for farther more information regarding the problems and possible solutions, allows time to recall previous similar problems and successful solutions, allows time for evaluating facts versus opinions).
<p>12. Describe how open questions and closed questions are different and what terms tend to prompt or activate one versus the other type of question.</p>	<ul style="list-style-type: none"> • Explain the dynamics and differences between open (e.g., leads the other person to give more complete answers that may express his/her thoughts, feelings, and opinions) and closed (e.g., leads the other person to give brief answers without room for feelings and opinions) questions. Use CS Problem Solving Handout 13: Closed and Open-Ended Questions • Teach the client how open and closed questions have common "stems" that instigate an open (e.g., "Tell me about...," "Describe ...," "What ...") or closed question (e.g., "Did you ...?" "When did...?") Use CS Problem Solving Handout 13: Closed and Open-Ended Questions
<p>13. Demonstrate the use of open versus closed questions when probing for more information on several different topics.</p>	<ul style="list-style-type: none"> • Teach the client how open and closed questions have common "stems" that instigate an open (e.g., "Tell me about...," "Describe ...," "What ...") or closed question (e.g., "Did you ...?" "When did...?") Use CS Problem Solving Handout 13: Closed and Open-Ended Questions • Use modeling and role-playing to teach the client how to use open and closed questions in various situations to gather information.
<p>14. Demonstrate an understanding of the steps in effective problem solving and implement these steps in daily life.</p>	<ul style="list-style-type: none"> • Use role-playing, modeling, and behavior rehearsal to teach the client how to implement the sequence of phases or steps for problem solving. Use CS Problem Solving Handout 9: Problem Solving Worksheet • Clarify with the client which of the steps in effective problem solving are action steps and which are thinking steps. • Assign the client to a group that teaches skills in problem solving.

<p>15. List preconditions that can improve the success rate of problem solving.</p>	<ul style="list-style-type: none"> • Discuss and explore with the client various helpful preconditions for problem solving (e.g., willingness to take responsibility, seek help or learn from mistakes).
<p>16. Demonstrate an understanding of the HALT technique and what influence practicing this technique might have on problem-solving abilities.</p>	<ul style="list-style-type: none"> • Teach the client the HALT technique (i.e., if ever Hungry, Angry, Lonely, or Tired, stop and remedy the situation before trying to solve a problem) as an example of a helpful precondition technique for improving problem solving. Use CS Problem Solving Handout 14: HALT Exercise • Review with the client two or three scenarios for each of the four components of HALT (e.g., "what if one was too hungry or had too low blood sugar to concentrate," "What if someone's anger prevented them from identifying a broader range of options) and how each might influence problem solving or decision making. • Ask the client to write a brief, four paragraph paper on how implementing the HALT technique might have a positive impact on problem solving.
<p>17. Maintain a daily log for two weeks that identifies various problems that arise that are challenging.</p>	<ul style="list-style-type: none"> • Ask the client to maintain a daily log that identifies the various problems he/she confronts on a day-to-day basis. Use CR Handout 4: Journaling • Review the client's problem log each week and provide him/her with constructive feedback as to implementing effective steps for problem solving.
<p>18. List the potential short- and long-term benefits as well as the potential short-and long-term costs of a decision.</p>	<ul style="list-style-type: none"> • Demonstrate how a typical client problem can be analyzed using a decision balance process (e.g., identifying short- and long-term costs versus benefits for a plan of action). Use CR Handout 14: Decisional Balance of Present Behavior vs Changed Behavior (includes DARN rating)
<p>19. Enlist trustworthy friends or family members to act as sounding boards regarding decisions once a week for one month.</p>	<ul style="list-style-type: none"> • Ask the client to identify two or three friends or family members whom he/she trusts that could give him/her reasonable feedback on decision making and instruct him/her to review at least one personal decision with each of these friends once a week for a month.

<p>20. Acknowledge using antisocial behaviors to solve problems and describe the negative consequences associated with this pattern.</p>	<ul style="list-style-type: none"> Assist the client in identifying his/her ineffective problem-solving approaches (e.g., ignoring or avoiding confronting a problem, becoming aggressive). Use CS Assertiveness Skills Handout 1: Ways to Deal with Conflict or Problems Use CS Assertiveness Skills Handout 3: Exercises for Assertiveness Skills Development Use CS Assertiveness Skills Handout 7: Goals for Improving My Interpersonal Communication Skills Explore the client's pattern of using criminal behavior to "solve" problems rather than using a more effective and adaptive process. Review with the client the significant negative consequences of using antisocial means to solve problems (e.g., legal entanglements, loss of freedom, pain to self and others).
<p>21. List pro-social behaviors that evolve from implementing effective problem solving steps as an alternative to criminal behavior.</p>	<ul style="list-style-type: none"> Review incidents in which the client used antisocial behavior in response to a problem; assist him/her in listing pro-social behaviors that result from implementing the steps for effective problem solving.
<p>22. Solve a classic puzzle and write out the steps for problem solving that were used.</p>	<ul style="list-style-type: none"> Assign the client to list which of the ideal steps (e.g., define the problem; identify alternative solutions, list the pros and cons of each alternative through information gathering; decide on the best course; implement a solution; evaluate the outcome) involved in successful problem solving were used in solving the mental puzzle. Use CS Problem Solving Handout 9: Problem Solving Steps
<p>23. Set some concrete goals that can be met within two months regarding improving personal problem-solving skills.</p>	<ul style="list-style-type: none"> Assist the client in setting some reasonable goals for improving problem-solving abilities and skills. Recommend some self-help reading materials for building better problem-solving abilities (e.g., <i>Step-By-Step Problem Solving</i> by Chang and Kelly or <i>Yes or No: The Guide to Better Decisions</i> by Johnson).

(Excerpts taken from *The Probation and Parole Treatment Planner, 2003*)

SECTION 10

Cognitive Restructuring, Part 2

Participant Objectives:

- Learn about cognitive interventions and how they relate to thinking reports and outcome/behavior.
- Learn about different ways that thinking reports, and other CBT tools (e.g., Urges and Impulse Log, Triggers and Alternative Thoughts and Beliefs, Relapse Plan, etc.) can be used in daily supervision contacts with clients.

4 STEPS OF COGNITIVE SELF CHANGE

1. Pay attention to your thoughts and feelings.
2. Recognize when your thoughts/feelings are at risk for leading you to do something hurtful/harmful to yourself or others.
3. Use new interventions (i.e., thinking) to reduce the risk of doing something hurtful/harmful.
4. Practice until it becomes automatic and you get good at it.

AN OFFENDER'S THINKING REPORT USING COGNITIVE INTERVENTIONS

SITUATION: PO informs client that he has to enter residential treatment after three positive UAs.

THOUGHTS:

Fuck you!
I only used three times.
Why you doing this to me?

Oh, no! I should've known better.

What a dumb ass! It wasn't worth it.

The hell with that!

What I going do? Who going take care the bills now?

They don't know what I'm going through.
They want me to work and pay for court fees.
Shit! Can't even pay my rent!
No sense I try.

Should've listened to her [PO]. She tried to help me.

Maybe this is the only thing going help me quit.

FEELINGS:

defiant, pissed
victimized

surprised, guilty

regretful

self-righteous anger

concerned

self-pity
stressed, frustrated
defeated

humble

hopeful/optimistic

ATTITUDES/ BELIEFS:

Nobody tells me what to do.

When I'm wrong, I'm wrong.

Crime doesn't pay.

Poor me.
Everybody tells me what to do.
No one cares, so why try.

My way is not always the highway.

This is not the end of the world...things can get better.

BEHAVIOR/ OUTCOME:

Reinforced belief that he is a victim.

Client took responsibility and was willing to enter

INTERVENTIONS

Thought Switching Tool for Cognitive Self-Change

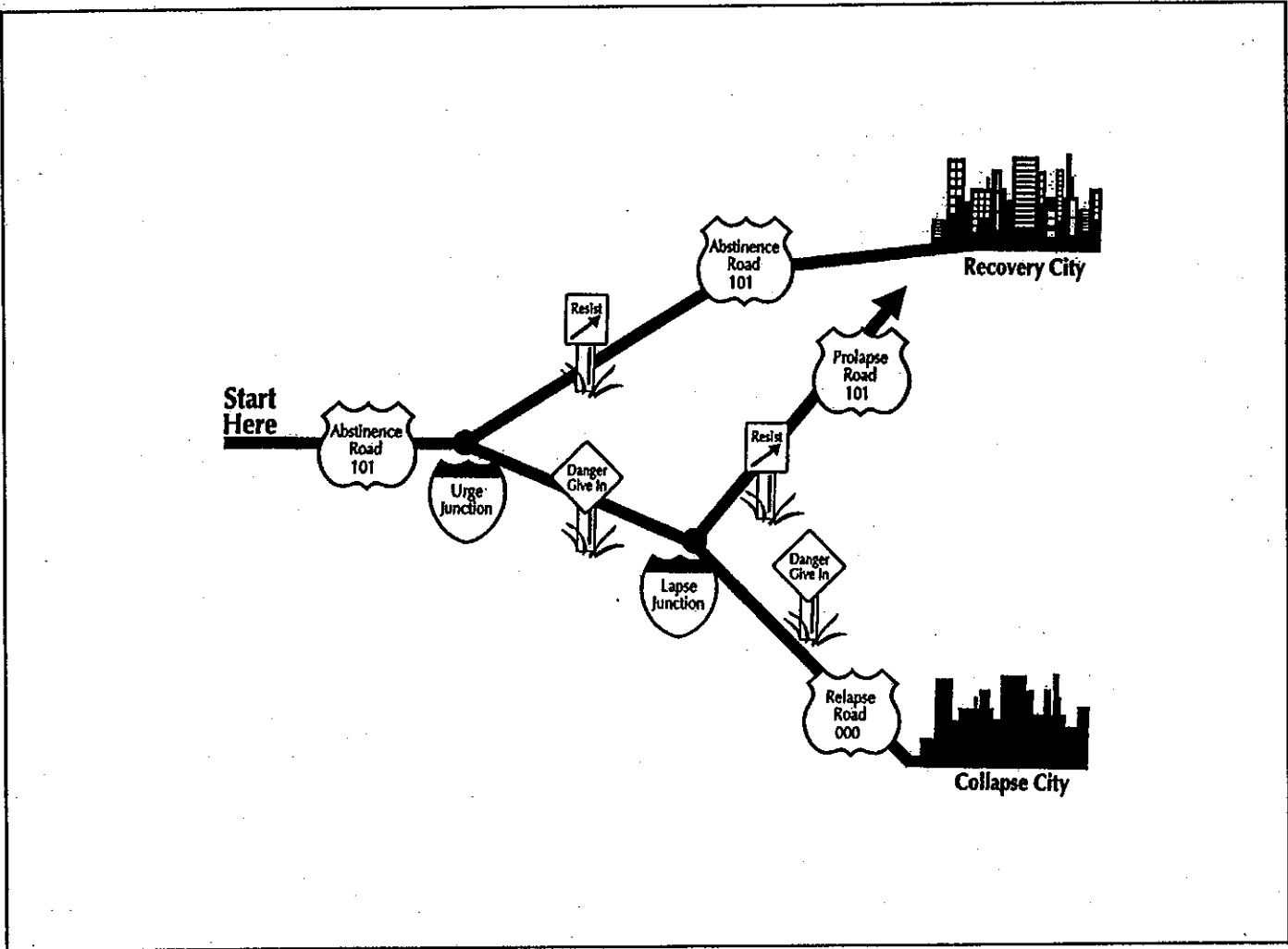
MY PART:	Find one part of the situation that you are responsible for.
THEIR SHOES:	Imagine what the other person is thinking.
RESPECT:	Find a positive thought about the other person.
CONSEQUENCES:	Identify a negative consequence that has occurred in the past as a result of your negative thought or behavior; <i>or</i> Identify a positive consequence that can occur as a result of a changed thought or behavior.
NEW PERSON:	Remind yourself of the new person you want to become.
DECENT SENTIMENTS:	Train yourself to look for the good in others.

INTERVENTION MUSTS

INTERVENTIONS MUST:

- ▶ Stop the target pattern of thinking in its tracks
- ▶ Provide a bearable way of coping with emotional stress and emotional pain
- ▶ Include new thinking skills for dealing with people and situations
- ▶ Make irresponsibility an aversive experience
- ▶ Make responsibility a rewarding experience

FORKS IN THE ROAD TO RECOVERY



From the authors of Keeping "What Works" Working: Cognitive Behavioral Relapse Prevention with Substance-Abusing Offenders, G.A. Marlatt, In What Works: Critical Issues Research and Best Practices in Community Corrections (p.15).

TRIGGERS FOR RELAPSE

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

Trigger

Behavioral Example

CONFLICT WITH ANOTHER PERSON

You feel frustration and anger resulting from your interactions with another person. You don't feel competent to handle the conflict without drugs or alcohol.

SOCIAL OR PEER PRESSURE OR ASSOCIATING WITH CRIMINAL PEERS

You witness others enjoying themselves or having a good time during a party or other festive occasion. You may be offered a drink or a drug or challenged to explain why you are not joining in the fun.

AN UNPLEASANT FEELING (STRESS, DEPRESSION, INTENSE ANGER)

You feel depressed, anxious, bored or lonely. The prospect of getting away from the uncomfortable feelings state by taking a drug or drinking is too much to resist.

A CHANGE IN SELF-IMAGE

This involves change in seeing the self as an abstainer to again being a user; change from the image of living a straight, crime-free life to one who does criminal acts. When we take a drink or use a drug after a period of abstinence, we may continue to drink because of a change in how we view ourselves—we now see ourselves not as abstainers, but as users.

Reprinted with permission of the authors of *Criminal Conduct and Substance Abuse Treatment*, Kenneth W. Wanberg and Harvey B. Milkman (1998).

WARNING SIGNS FOR RELAPSE AND RECIDIVISM

1. Changes in **attitudes**: from positive to negative.
2. Changes in **thoughts**: from self-confidence to weakness.
3. Changes in **emotions and moods**: from an up and hopeful mood to depressed mood, from a calm to an anxious mood.
4. Changes in **actions**: from activities not involving alcohol and drugs and criminal conduct.

SECTION 11

Integrating Principles of Risk/Recidivism Reduction Into Practice

Participant Objectives:

- Understand how LSI, MI, and CBT can be tied in together in moving clients through stages of change and reducing recidivism.
- Understand the process of developing a case plan to address an offender's criminogenic needs.
- Know how to organize the information for a case plan by using the "case plan worksheet."

LSI/ASUS RESULTS

Age: Gender: Female Race: Hawaiian/Part Hawaii Rept Date: 6/8/2005 Case #: 01-1-1256	Offense: Offense Group: Offense Type: Drug Class C Assessment Status: Post-Sentence Disposition: Probation	County: Oahu
---	---	---------------------

Scale	Score	Low 0-18	Moderate 19-28	High 29-54	Risk Score: Moderate
Total	22				
Protective	19				

LSI	Score	1	2	3	4	5	6	7	8	9	10	LSI: DOCH-LSI-2424 Date: 9/8/2004 Assessor: vborja@oahu ASUS: DOCH-ASUS-5615 Date: 9/9/2004 Assessor: vborja@oahu
1. Crime History	0.50											
2. Emp/Edu	0.60											
3. Financial	0.50											
4. Family/Marital	0.25											
5. Accommodation	0.00											
6. Leisure	0.00											
7. Companions	0.20											
8. Alcohol/Drug	0.50											
9. Emotional	0.60											
10. Attitudes	0.00											

ASUS	Score	Low	Medium	High Medium	High	NORM SET 2542 adult probationers screened for potential alcohol or drug problem 688 IP & IOP Tx Clients
1. Involvement1	10					
2. Disruption1	47					
3. Social	6					
4. Mood	1					
5. Global	64					
6. Six Month	2					
7. Defensive	19					
8. Motivation	11					
9. ASUS Rater	9					
10. Involvement2	10					
11. Disruption2	47					

Treatment Guidelines (based on ASUS Involvement and Disruption Score)			
Involvement Score	Disruption Score	Level of Use & Problem Description	Tx Level
10	47	Medium involvement, high AOD disruption and high needs	5
Referral Guidelines: Comprehensive assessment. Moderate intensity outpatient (3-6 hrs wk); high intensity outpatient (7-10 hrs wk) and aftercare. 6-12 months duration. Consider short term residential. UAs if drug use.			

Description: 35-year-old female, convicted and placed on probation 2 years ago for Promoting a Dangerous Drug 3 and Unlawful Use of Paraphernalia. Her criminal record consists of several bench warrants, two Theft 4, Trespass and a Disorderly Conduct. There are no pending or outstanding legal matters. Currently resides in a care home and attends a community based mental health services program. She sees her psychiatrist regularly and is compliant with her medication. Her diagnosis is Substance Abuse Induced Schizophrenia. Her boyfriend is an active drug user. She is in an IOP drug program and recently tested positive for "ice." She has been warned by her counselor that further drug use will result in termination from the program and recommendation for residential treatment. She voiced her unwillingness to enter a residential program.

1. Risk Management Classification as related to treatment outcomes due to the LSI-R/ASUS and other related issues. (6.24.05)

Levels and Standards		Classification Instruments							
Classification	Contact Standards	Proxy Screen	DVSI Screen	LSI-R	ASUS	SARA	Static 99	Wiscon	
Adm	Annual	<5	<6	<19					
Adm (Bw, Jail)	six month review	<5	<6	<19					
Low	1 ov every 3 months		6	19-20			0-1	R<12 N<14	
Medium	1 ov every month		7-8	21-25			2	R 12-20 N 15-35	
High	2 contact a month 1 field contact 1 home visit 3 months		9-17	26-35			3-4	R>21 N>36	
Surveillance	3 contacts a month 1 field visit		>17	>36			5+	Zero Tolerance	
CR	1 ov a month 1 collateral MH								
Intensive Specialized Services	8 ov a month 1 field contact 1 home visit			>25				R>21 N>36	

Case classification is determined by the highest level as determined by the applicable instruments and procedures used.

The Recommended Treatment Level can be obtained by converting the total LSI-R and ASUS scores into a single-digit numerical value for each, and then adding them together (LSI-R + ASUS = Recommended treatment level). However, we may need to add a table for the LSI-R protective score for cases in which the protective score is high, thereby reducing treatment levels given the presence of community based supports. Basically the treatment level is dosage if we look at the chart below. The more severe the problem, the higher the dosage.

LSI Raw Score +	ASUS Disrupt Score	TREATMENT REFERRAL GUIDELINES (TREATMENT LEVEL = LSI-R Raw Score + ASUS Disrupt Score)
0-13 = 1	0-20 = 0	1 = No treatment 5 = Intensive residential
14-20 = 2	21-40 = 1	2 = UA's, AOD Education 6 = Therapeutic community
21-27 = 3	41-40 = 2	3 = Weekly Outpatient 7 = Assess for Psychopathy
28-54 = 4	61-80 = 3	4 = Intensive Outpatient

2. Case Planning Guidelines (as related to treatment interventions based on LSI-R/ASUS & the use of motivational interviewing)

Key Terms:

1. LSI-R - Level of Service Inventory - Revised: An abbreviated risk assessment instrument used to determine the level of service, both treatment and supervision services to be provided an offender. Focus for Case Management will be LSI-R total score to determine Classification Level and Supervision Contact levels.

What to look for with LSI-R:

- The "Big Six" criminogenic factors:
 - Criminal history / callous personality; attitudes/values; emotional/self-regulation; alcohol/drug; companions/criminal peers; and dysfunctional family relations.
- Total LSI-R score for:
 - Classification
 - Supervision

2. ASUS: The ASUS is a differential screening instrument related to substance use. It focuses on frequency of use, consequences of use, looking at signs of rebellious or antisocial attitudes/behaviors or emotional distress, defensiveness, and motivation/readiness for change. The use of the LSI-R/ASUS together shall give the supervising officer a treatment outcome score to determine level of treatment.

What to look for with ASUS:

- Both the Disruption and Involvement Scores in terms of a percentile ranking.
- Medium/High to High are to be evaluated for treatment intervention.
- Look at other scales such as the motivational/defensive scales for responsiveness to treatment.
- Determining if further assessments are needed for treatment of AOD.

3. Motivational Interviewing:

- Begin where your client is at to determine level of responsiveness to change or treatment.
- If client is not ready for change, begin to speculate with client about looking at identified problem areas per the LSI-R/ASUS, using the COG model, and identify which areas the client may have an interest in. The officer should also consider whether the information provided by the client is based on a strong self defensive position. If the barriers are too large to work within the LSI-R, address the barriers that currently exist.

Putting it all together for case planning:

Step One – Assessment Results (Selecting and Defining Problem Areas):

- Review the outcomes of the LSI-R/ASUS with the client.
- Select the three (3) highest Criminogenic factors of the Bix Six.

Step Two – Ranking Need Areas:

- Rank the Top Three (3) Priority Areas. Priority is determined by:
 - The numeric value of the criminogenic need area.
 - Where the client is at regarding change.
 - What can reasonably be changed.
 - Go from most intrinsic (internal or personal) to the most extrinsic (least under the proximal control of the individual).
 - You may, but are not mandated to, access the corresponding page numbers from the Probation and Parole Treatment Planner as a reference for specific criminogenic priority areas:
- Use *Assessment Summary for Case Planning Worksheet* for assistance, if needed (located in appendix 1).

Rank Order of Values		
Most Intrinsic	Criminal History (callous personality)	Planner - pg. 52, 95, 172,182,203,210, 224, 246
	Attitudes (values)	Planner - pg. 52,95,172,182,203,210, 224, 246
	Emotional (self-regulation problems)	Planner - pg. 17, 78, 101,135,147, 193,233,239,253
	Alcohol or drug problems	Planner - pg. 60, 110
	Companions (peers)	Planner - pg. 86, 155, 32
Most Extrinsic	Dysfunctional family relations (family)	Planner - pg. 43, 71, 119, 127, 141,163

Step Three – Identifying Stage of Change

- After ranking criminogenic need items (Step 2), try to get agreement with your client regarding the identified areas of change.
- Refer to one of the following worksheets for assistance: *Change Plan Worksheet*; *Stages of Change Worksheet*; or *the Decision Balance of Present Behavior vs. Changed Behavior*.
- To engage the client in this process, work with them in the office to complete this form.
- One form is used per area of change.

Step Four – Develop a Case Plan for the Client

- Use information from the top criminogenic need areas and the appropriate worksheet to develop a case plan for the client (Worksheet, Attachment 2). You may need to complete more than one case plan worksheet.
- You may, but do not need to, develop the case plan using the *Probation and Parole Treatment Planner* – this can assist the officer in identifying specific problem areas, as well as objectives and interventions.
- This plan should be considered a work plan that is reflective of the immediate needs of the client.
 - Note: these immediate needs may not be of an assessed criminogenic nature. In other words, you may need to first address basic life needs, such as housing and employment, before you can begin to work on the top criminogenic needs as assessed via the LSI-R.
 - If the client's stage of change is not appropriate to begin working on the criminogenic need areas, start the case planning efforts with a focus on the barriers to working on these top criminogenic need areas.
- This plan may change at each reassessment stage, and will be signed by both the client and officer. It is intended that clients continue their case plans until completed, even if they are deemed less than high risk at a reassessment stage.
- On rare occasions (i.e., no more than 10% of total caseload), the officer's professional judgment may dictate treatment that does not coincide with the assessment outcome. In these cases, note on the case planning worksheet that the case plan is a deviation from the LSI-R and ASUS assessment information, and why this is deemed necessary.

Top 3 Assessment Needs/P/C	Client Stage of Change	ASIS and Other Trailing Indicators
1		
2		
3		
Specify Goal		
Indicate objectives & tasks (actions) designed to meet this goal		
OBJECTIVE 1 & TASK(S)	OBJECTIVE 2 & TASK(S)	OBJECTIVE 3 & TASK(S)
List name of program if referred out	List name of program if referred out	List name of program if referred out
Notes to track progress		
Note if & why professional judgment indicates treatment (level or type) that differs from the assessment		

Supervision Officer Signature: _____ Client Signature: _____

Date Signed: _____ Date Signed: _____

Appendix One: Assessment Summary for Case Planning Worksheet (Optional)

Assessment Summary for Case Planning Worksheet

Date: _____

Client: _____

Officer: _____

Risk Classification Level: <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Surveillance <input type="checkbox"/> CR <input type="checkbox"/> Intensive Services	Classification Based on: <input type="checkbox"/> LSI <input type="checkbox"/> DVSI <input type="checkbox"/> SARA <input type="checkbox"/> Static99 <input type="checkbox"/> SONAR <input type="checkbox"/> Override	LSI Risk Total: LSI Protective Total ASUS Treatment Level: SARA Total Score: Static99: Other:
--	---	--

	LSI Big Six Criminogenic Risk						
	Intrinsic	→			→		Extrinsic
LSI/ Tx Planner*	Crim History/ Callous Perso	Attitudes/ Values	Emotional/ Self Regulate	Alcohol/Drug/	Companions/ Crim Peers	Family/Marita Dysfun Family	
LSI %							
Stage of Change**							

* Tx Planner is reference for The Probation and Parole Treatment Planner by Brad Bogue (LSI to treatment planner equivalence is marked by slash marker).

** Stage of Change is reference to Motivation to Change in Motivational Interviewing or TIP 35 (1-Precontemplation, 2-Contemplation, 3-Preparation, 4-Action, 5-Maintenance, 6-Recurrence) You may insert the stage name or numerical value as to the stage the client is in at the time of this assessment for the high three or four LSI risks domains.

Officer Consideration and Notes for Case planning:
 LSI Criminogenic Target areas and motivation notation:

ASUS Notes

Treatment Level (Tx) =	Involvement 1 Score =	Disruption 1 Score =
------------------------	-----------------------	----------------------

Other Recommendations in ASUS Review

Check the drug table to see if monodrug user and single drug item score = 4, If so, then this is a high monodrug involvement.

1. If MOOD is 9-13, consider further mental health assessment. If MOOD > 13, definite mental health referral.
2. If DEFENSIVE raw score > 9 and the profile is flat (e.g. low across all scales) then consider client defensive and needs motivational enhancement group particularly if collateral reports like blood alcohol level indicates drinking problem. If DEFENSIVE > 9, suggest enhance DISRUPTION score by two decile scores (two numbers up).
3. INVOLVEMENT 2 and DISRUPTION 2 are based on inpatient, residential drug abuse patients. A raw score of 30 on DISRUPTION2 indicates that client is scoring higher than 30% of patients hospitalized for AOD abuse and problems.
4. Short or long term inpatient care may be needed at any levels of 4 through 6 if the client condition is acute and unable to establish AOD abstinence.
5. Some clients may have scores of level 4,5 and 6 but do not indicate high levels of life disruption due to AOD use. This may reduce treatment level. Evaluator should use all sources. (Comment: LSI protective factors might indicate influence this consideration.)
6. Evaluator should use all sources of data and may override the suggested guidelines based on data sources other than ASUS scales scores.

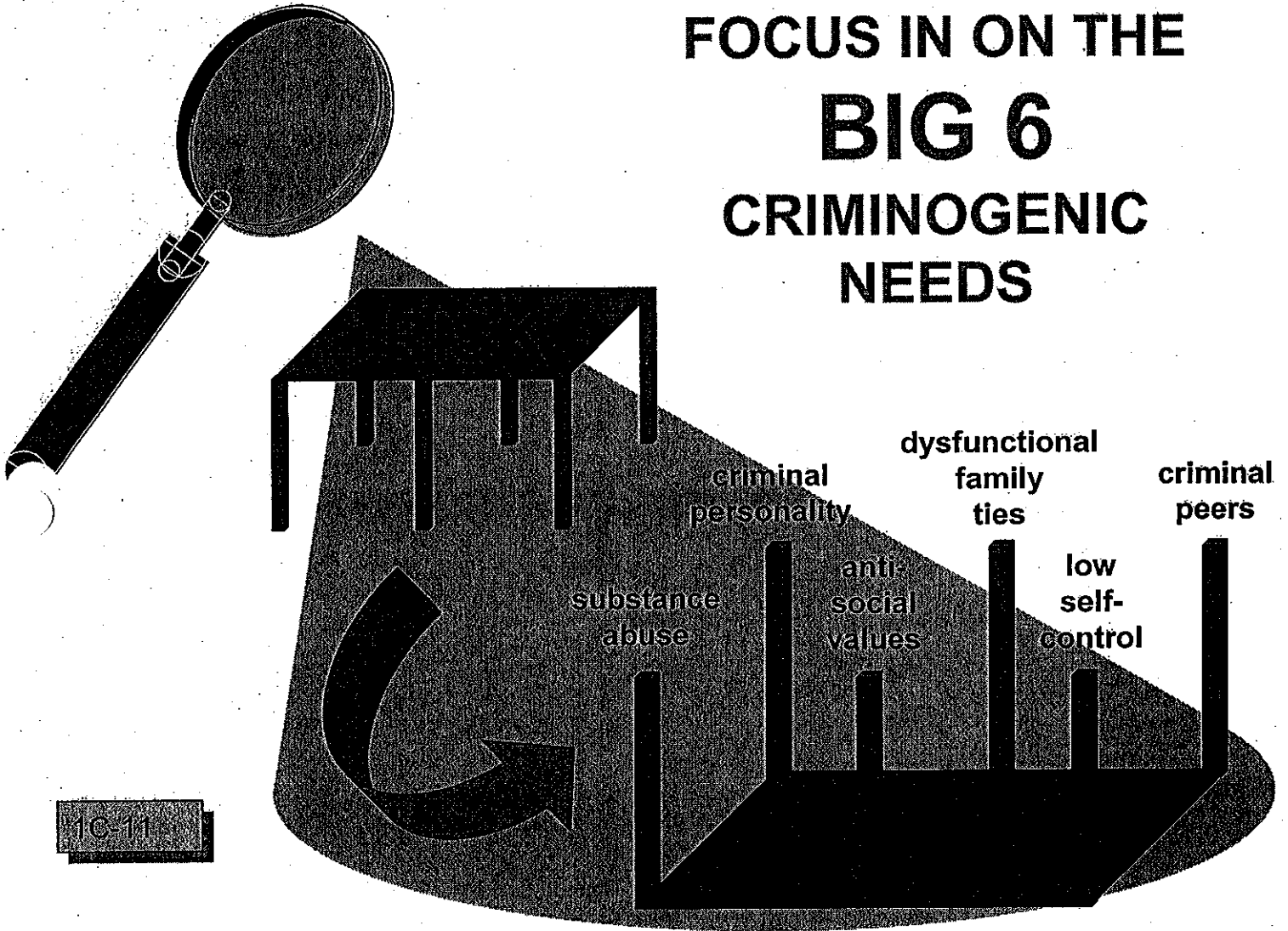
Other

ASUS Summary and Recommended Treatment	
Treatment Level (Tx) =	Involvement 1 Score = Disruption 1 Score =
Tx=0	No Referral for Substance Abuse treatment and Intervention
Tx=1	Early Intervention, Enhanced assessment, 8 -10 hours of AOD education, UAs if drug use
Tx=2	Comprehensive assessment, 12 -18 hrs AOD education, Outpatient 1-2 hrs/wk, UAs if drug use
Tx=3	Comprehensive assessment, Outpatient 1-2 hrs/wk for 4 to 6 months duration, UAs if drug use
Tx=4	Comprehensive assessment, Moderate intensity outpatient 3-6 hrs/wk for 5-9 months duration, UAs if drug use
Tx=5	Comprehensive assessment, Moderate intensity outpatient 3 -6 hrs/wk; high intensity outpatient 7 -10 hrs and aftercare 6-12 duration. Consider short term residential, UAs if drug use
Tx=6	Comprehensive assessment, High intensity outpatient 7-10 hrs/wk or intensive outpatient 9-20 hrs/wk and aftercare. May require inpatient if cannot maintain abstinence, UAs
	If Involvement1=0 and Disruption1=>4, Possible invalid profile, check client response, Re-evaluate. If Involvement1>21 and Disruption= 0, Possible invalid profile, check client response, Re-evaluate.

TX 4 to 6, please note comments under Other Recommendations items 4 to 6 for guidance.

THE BIG SIX

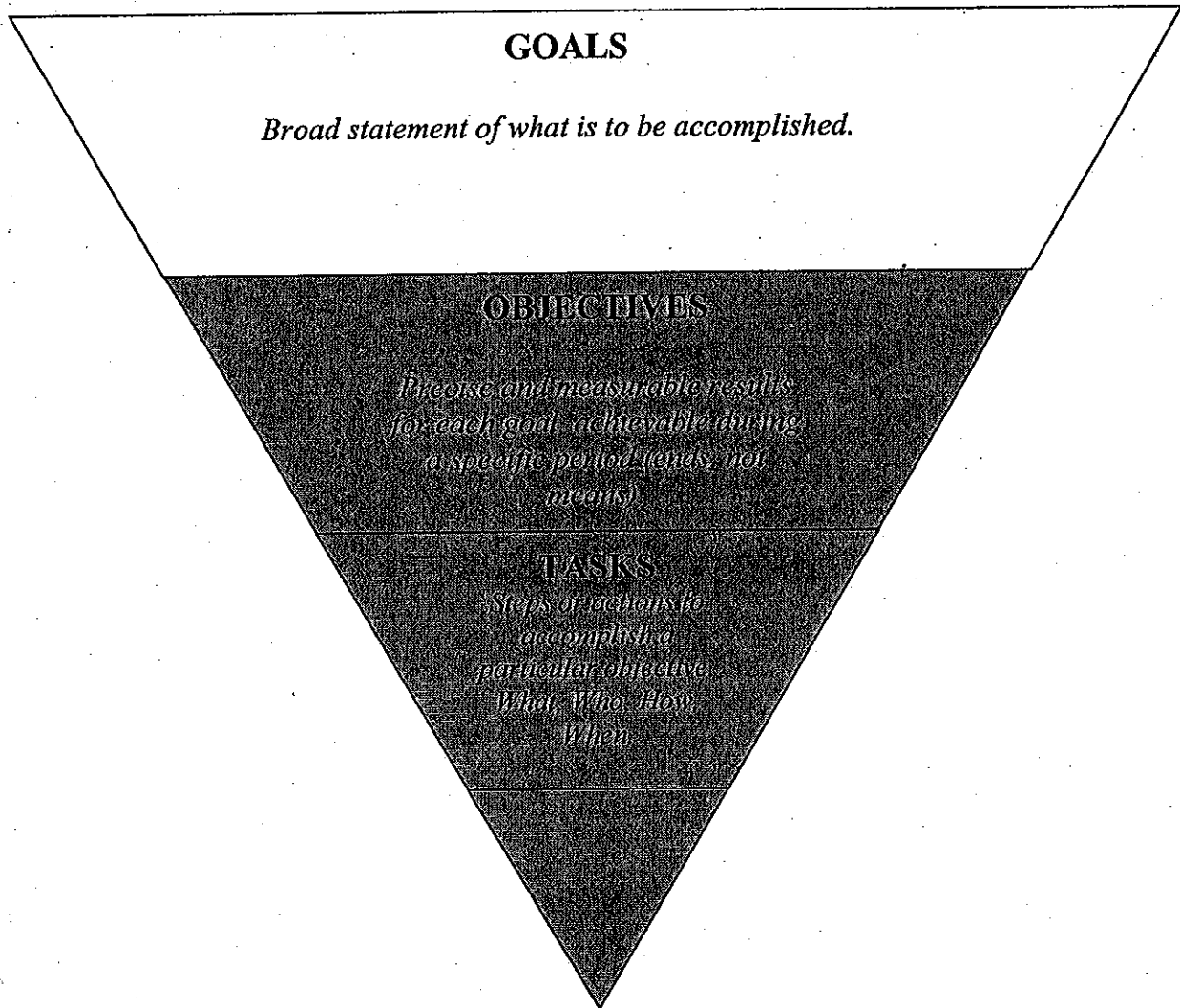
FOCUS IN ON THE BIG 6 CRIMINOGENIC NEEDS



INTRINSIC VS EXTRINSIC

Rank Order of Values	
	Planner - pg. 52, 95, 172, 182, 203, 210, 224, 246
	Planner - pg. 52, 95, 172, 182, 203, 210, 224, 246
	Planner - pg. 17, 78, 101, 135, 147, 193, 233, 239, 253
	Planner - pg. 60, 110
	Planner - pg. 86, 155, 32
Most Intrinsic	Criminal History (callous personality) Attitudes (values) Emotional (self-regulation problems) Alcohol or drug problems Companions (peers)
Most Extrinsic	Dysfunctional family relations (family)
	Planner - pg. 43, 71, 119, 127, 141, 163

GOALS, OBJECTIVES, AND TASKS



Top 3 Assessed Needs %	Client Stage of Change	ASUS and Other Trailing Indicators
1.		
2.		
3.		
Specify Goal:		
Indicate objectives & tasks (actions) designed to meet this goal:		
OBJECTIVE 1 & TASK(S)	OBJECTIVE 2 & TASK(S)	OBJECTIVE 3 & TASK(S)
List name of program if referred out:	List name of program if referred out:	List name of program if referred out:
Notes to track progress:		

Supervision Officer Signature: _____ Client Signature: _____

Date Signed: _____ Date Signed: _____

Indicate if and why professional judgment necessitates treatment other than the assessment dictates

**CHANGE PLAN WORKSHEET SAMPLE
for Emotional/Personal**

1. The changes I want to make are:
To think before acting.
2. The most important reasons I want to make these changes are:
Not to get into trouble with the law, friends, and people who are trying to help me.
3. My main goals for myself in making these changes are:
Avoid trouble.
4. These may be barriers to reaching my goals:
Other people.
5. These are the strengths to help me reach my goals:
None
6. I plan to do these things to reach my goals:
 - a. Plan of action:
Think before speaking or acting. Examine my thoughts.
 - b. When I will get it done by:
Practice every day.
7. The first steps I plan to take in changing are:
Being patient and not acting out.
8. Other people could help me in changing these ways:
 - a. Person:
Boyfriend, family, support group
 - b. Possible ways to help:
Tell me when I'm not listening to them.
9. I hope that my plan will have these positive results:
I will not have conflict with friends and family.
10. I will know that my plan is working if:
I don't have problems with people and the law.

SKILL APPLICATION FOR CLASSIFICATION LEVELS

Low Risk Offenders

If problem arises, teach the offender how thinking drives behavior using the ABC model and MI skills.

Medium Risk Offenders

Teach the offender how to complete a Thinking Report and apply to the highest criminogenic factor using MI skills.

Surveillance/High Risk Offenders

Complete a Case Plan on the offender's top three criminogenic needs using MI Skills.

Apply Cognitive Restructuring concepts to the criminogenic needs.

Assess for and address cognitive skills deficits.

LIST OF HANDOUTS

COGNITIVE RESTRUCTURING

1. Thinking Report
2. The ABC Method of Rational Thinking
3. Using the ABC Rational Thinking Approach
4. Journaling
5. Recording Your History - Your Autobiography
6. Negative Thoughts and Thinking Errors
7. Errors in Thinking Checklist
8. Urges and Impulse Log
9. Triggers, and Alternative Thoughts and Beliefs
10. Practicing Thought Stopping
11. Ways to Change Thinking and Behavior
12. Positive Thought Arming
13. Identifying High Risk Situations
14. Decisional Balance of Present Behavior vs Changed Behavior (Includes DARN rating)
15. Loss of Joys and Pleasure
16. Stages of Change Worksheet
17. My Personal Emergency Relapse Plan
18. Irrational Beliefs and Negative Thoughts
19. Negative Thoughts that Lead to AOD Use and Criminal Conduct
20. Feeling List

COGNITIVE SKILLS - MANAGING EMOTIONS AND IMPULSIVITY

1. Common Physical Characteristics of Anger, Stress, Anxiety, Fear, and Guilt
2. Looking at Your Anger and Angry Thoughts
3. Identifying Triggers and Symptoms of Anger
4. ABC's of Anger
5. Consequences of My Anger (5 Best/5Worst)
6. Internal/External Triggers of Anger
7. 8 Steps to Managing Your Anger
8. Common Situations that Trigger Cravings and Urges
9. Ways to Cope with Cravings and Urges
10. Role-playing Exercises for Anger and Impulsivity
11. Self-Talk During an Angry Situation
12. Stop and Think
13. Deep Relaxation
14. Beliefs of a Positive Realist
15. Dealing with Cravings
16. Cognitive Steps for Impulsivity
17. Communication Skills

COGNITIVE SKILLS - ASSERTIVENESS

1. Ways to Deal with Conflict or Problems
2. The Art of Being Assertive - 10 Key Ways
3. Exercises for Assertiveness Skills Development
4. Active Listening Skills
5. Situations When Needs Were Unmet
6. Assertive Situations Activity Log
7. Goals for Improving My Interpersonal Communication Skills
8. Decisional Balance of Present Style vs Assertive Style (includes DARN rating)
9. Expressing a Complaint or Criticism
10. Receiving a Complaint or Criticism
11. Expressing a Complaint or Criticism Exercise
12. Receiving Complaints/Criticism Exercise
13. Communication Skills

COGNITIVE SKILLS - PROBLEM SOLVING

1. Problem Examples
2. Choose . . . Plan . . . Do!
3. Consequence of My Problem Solving Methods (5 Best/5 Worst)
4. Evaluate
5. Explore Alternatives and Consequences
6. Hit or Quit
7. Personal Warning Signs Activity
8. Internal/External Problem Indicators
9. Problem Solving Worksheet (6 steps)
10. Stop and Think. Do the Three-Step!
11. Goal Examples
12. Identify Problem and Goal
13. Closed and Open-Ended Questions
14. HALT Exercise
15. Benefits for Using Effective Problem Solving Skills

SUPERVISION PLANNING

1. Supervision Plan Form
2. Change Plan Worksheet

DESCRIPTION OF HANDOUTS

Cognitive Restructuring		Description
1	Thinking Report	Looks at thoughts, feelings, attitudes arising from situation and connects to behavior.
2	The ABC Method of Rational Thinking	Description of the model that explains that changing irrational thoughts and beliefs, can lead to positive outcomes (instructional handout).
3	Using the ABC Rational Thinking Approach	Worksheet for client to list an antecedent (event), negative thoughts and beliefs about the antecedent, and describe the consequences in response to the antecedent.
4	Journaling	Explanation of how to complete a journal entry and what to include in the content of the journal.
5	Recording Your History - Your Autobiography	Outline and worksheet of the content of an autobiography to include: family history, childhood, adult years, education, employment, relationships, criminal and substance abuse history, and etc. It also identifies thoughts, beliefs and attitudes that bring about change.
6	Negative Thoughts and Thinking Errors	Log of negative thoughts and the corresponding thinking error.
7	Errors in Thinking Checklist	Checklist of 32 Thinking Errors and scale of measuring the frequency of its use.
8	Urges and Impulse Log	Log for undesired behaviors (date/time, place, and circumstance). Helps to identify frequency and high risk situations when undesired behavior is likely to occur.
9	Triggers, and Alternative Thoughts and Beliefs	Identifies thoughts and beliefs that trigger impulsive behavior and requires client to identify alternative thoughts and beliefs (reframing and restructuring)
10	Practicing Thought Stopping	Worksheet with an exercise to replace negative thoughts with positive thoughts.
11	Ways to Change Thinking and Behavior	Techniques on how to switch negative or irrational thinking to positive or rational thinking.
12	Positive Thought Arming	Exercise to list positive self-talk.
13	Identifying High Risk Behaviors	Client identifies high risk situations and describes how s/he coped with the situation
14	Decisional Balance of Present Behavior vs Changed Behavior	Weighs the pros and cons of status quo vs changing the undesired behavior; client rates his/her desire, ability, reasons, and need to change
15	Loss of Joys and Pleasure	Exercise that lists life pleasures and identifies whether it will be lost by reoffending.
16	Stages of Change Worksheet	Identifies behavioral changes that is desired, resistance to change and the stage of change client is in.

Cognitive Restructuring		Description
17	My Personal Emergency Relapse Plan	Plan that identifies who in client's support system s/he will call for help, places s/he can go for help, thought stopping techniques that will be used, and what the client would be willing to do if these measures are not taken.
18	Irrational Beliefs and Negative Thoughts	List of common irrational beliefs and negative thoughts.
19	Negative Thoughts that Lead to AOD Use and Criminal Conduct	Worksheet to list negative thoughts that lead to substance abuse use or criminal behavior.
20	Feeling List	List of feeling adjectives to help client identify an array of feelings that they may have difficulty articulating.

Cognitive Skills - Managing Emotions and Impulsivity		Description
1	Common Physical Characteristics of Anger, Stress, Anxiety, Fear, and Guilt	List of physical responses to help client be aware of when experiencing these emotions.
2	Looking at Your Anger and Angry Thoughts	Worksheet to list what causes anger and the thoughts associated with that anger.
3	Identifying Triggers and Symptoms of Anger	Worksheet to describe triggers to an angry situation and how it was handled.
4	ABC's of Anger	Worksheet to identify the antecedents, behavior and consequences of anger. Then rate the level of anger in that situation.
5	Consequences of My Anger (5 Best/5Worst)	Worksheet to identify both the best and worst consequences of anger.
6	Internal/External Triggers of Anger	Rating sheet to identify both internal and external triggers of anger.
7	8 Steps to Managing Your Anger	Handout that lists steps to manage (i.e., awareness of anger, self-talk, and simple techniques).
8	Common Situations that Trigger Cravings and Urges	List of situations to help client identify trigger cravings and urges.
9	Ways to Cope with Cravings and Urges	Handout that gives practical tips for client to cope with cravings and urges.
10	Role-playing Exercises for Anger and Impulsivity	Exercises to use with clients in dealing with anger and impulsivity.
11	Self-Talk During an Angry Situation	Log for client to use to list the thoughts, feelings, behavior, outcome prior to intervening thoughts and behavior and outcome after using an intervening thought. (Modified Thinking Report)
12	Stop and Think	Handout with technique to calm down when client angered.
13	Deep Relaxation	Handout with technique to reduce tension and anger by imagery, breathing, and massage.
14	Beliefs of a Positive Realist	List of beliefs to help the client feel empowered and in control of self.
15	Dealing with Cravings	A plan for the client to develop to deal with cravings.
16	Cognitive Steps for Impulsivity	Worksheet for client to describe a situation in which there was a negative outcome as a result of impulsive behavior and alternatives to achieve a desired outcome.
17	Communication Skills	Describes double-sided reflections, agreement with a twist and "I" statements.

Cognitive Skills - Assertiveness Skills Development		Description
1	Ways to Deal with Conflict or Problems	Educational handout that describes the differences between passive, aggressive, passive-aggressive and assertive ways of dealing with conflict; gives examples of each style and consequences
2	The Art of Being Assertive - 10 Key Ways	Educational handout that identifies 10 keys to being assertive.
3	Exercises for Assertiveness Skills Development	Role playing exercises where the client differentiates between the 4 styles of dealing with conflict, applies the 10 keys, and attempts to get what s/he wants using assertive techniques
4	Active Listening Skills	Educational handout with role play exercises. Teaches client to pay attention to words, tone, body language and own listening skills.
5	Situations When Needs Were Unmet	Client describes a situation in which his/her needs were unmet, describes his/her response and identifies the type of response; client is tasked with identifying alternative response using assertiveness skills
6	Assertive Situations Activity Log	Client reports on situations in which s/he was assertive (describes circumstances, what was said or done, and what was the outcome)
7	Goals for Improving My Interpersonal Communication Skills	Client identifies pattern of dealing with conflict and sets goals from a checklist for being more assertive, develops plan for meeting goal
8	Decisional Balance of Present Style vs Assertive Style	Same as #5 above except specific to the undesired behavior being passive, aggressive or passive-aggressive
9	Expressing a Complaint or Criticism	Educational handout with role play exercises. Gives tips on expressing a complaint without offending the other person, and provides role playing exercises for client to practice
10	Receiving a Complaint or Criticism	Educational handout with role play exercises. Gives tips on receiving a complaint/criticism without being defensive or angry, and provides role playing exercises for client to practice
11	Expressing a Complaint or Criticism Exercise	Worksheet for the client to describe an incident in which s/he expressed a complaint/criticism (what was the issue, what was said/solutions offered, how did the person respond, how did client respond to the other's view, how did client feel, anything would have done differently)
12	Receiving a Complaint or Criticism Exercise	Worksheet for the client to describe what happened when a complain/criticism was received (what was the complaint/criticism, words used, how did client feel, how did client express own view, what was solution offered, anything would have done differently)
13	Communication Skills	Describes double-sided reflections, agreement with a twist and "I" statements.

Cognitive Skills - Problem Solving		Description
1	Problem Examples	Worksheet for the client to identify whether is problem statement is good (objective) or bad (subjective).
2	Choose...Plan...Do	Handout on simple steps to problem solving.
3	Consequences of My Problem Solving Methods (5 Best/5 Worst)	Worksheet for the client to list the best and worst consequences of the problem-solving method used.
4	Evaluate	Handout on evaluating outcome of the way a goal was met.
5	Explore Alternatives and Consequences	Handout on exploring other options to make better decisions.
6	Hit or Quit	Worksheet for the client to identify their response to problems.
7	Personal Warning Signs Activity	Worksheet for the client to identify precursors and consequences of conflict with another person.
8	Internal/External Problem Indicators	Worksheet for the client to identify internal (physical sensations) and external (messages from outside the body) indicators when experiencing a problem.
9	Problem Solving Worksheet	Worksheet for the client to identify steps to problem-solving specific problems.
10	Stop and Think. Do the Three Step!	Handout with a technique for the client to stop before reacting to situations involving anger or sudden stress.
11	Goal Examples	Worksheet with instructions on how to write a goal statement for a problem.
12	Identify Problem and Goal	Description of an objective problem and an objective goal statement.
13	Closed and Open-Ended Questions	Description of closed and open questions, and how "stems" are used to elicit closed or open questions.
14	HALT Exercise	Exercise using the HALT process.
15	Benefits for Using Effective Problem Solving Skills	Instructional handout that lists 4 benefits

Supervision Planning		Description
1	Supervision Plan Form	Captures case plan information on the 3 highest domain areas to be addressed.
2	Change Plan Worksheet	Worksheet that examines the client's level of motivation in addressing a domain area, strengths and barriers, and support in that area.

THINKING REPORT

SITUATION:

THOUGHTS:

FEELINGS:

**ATTITUDES/
BELIEFS:**

**BEHAVIOR/
OUTCOME:**

FRANKLIN REALITY MODEL DESCRIBES FOUR (4) BASIC NEEDS: 1) LOVE AND BE LOVED; 2) FEEL IMPORTANT; 3) SURVIVAL; 4) VARIETY
WILL THE RESULTS OF YOUR BEHAVIOR MEET YOUR NEEDS OVER TIME?

THE ABC METHOD OF RATIONAL THINKING

A famous psychologist, Dr. Albert Ellis, gave us what he calls the ABC method of rational (logical) thinking. This method also helps us understand how negative thoughts lead to negative feelings and behavior.

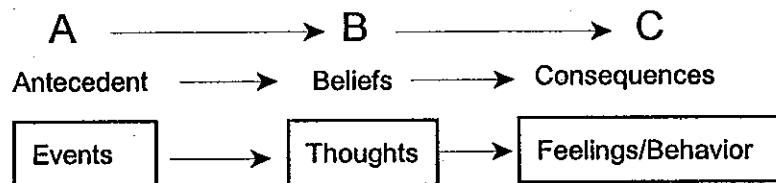
A = the **Antecedent** or the event (the forerunner)

B = our **Beliefs** and thoughts

C = the **Consequences** or our actions

Antecedents or events can lead to **B**eliefs or automatic thoughts. Often, these thoughts are irrational, unsound, or just plain crazy (thinking errors). Such beliefs and thoughts can lead to automatic behaviors or habits (**C**onsequences).

However, **WE** have the power to change our irrational thoughts to rational ones. By choosing rational and sensible thoughts, we will be on the path to making rational decisions and taking sensible action. We may not be in control of the **A**, but we are always in control of the **B** and **C**. Here is the ABC method as suggested:



USING THE ABC RATIONAL THINKING APPROACH

Sometimes it seems the behaviors triggered by an event happen so fast that we don't have time to think. It may be easier to describe your reaction to the event before you describe the thoughts you had. Even if you don't remember your exact thoughts, you should be able to think of the things you probably said to yourself. Look mainly at the negative thoughts. Using the ABC rational thinking approach, do the following:

1. Describe an **EVENT** or the **ANTECEDENT (A)** that seemed to make you want to drink, use drugs, or engage in other negative behavior (such as _____).

2. List as many of the things or **BELIEFS (B)** that you might have been thinking that would help explain why the event upset you so much. Show which of these thoughts are negative thoughts. Do these fit a pattern of negative thoughts or negative thinking?

3. Describe the **CONSEQUENCES (C)** or your feelings or behaviors in response to the event.

JOURNALING

Use your journal to write down your thoughts, feelings, and actions on a *daily* or *weekly* basis. It is a way for you to pay attention and look at how you think and feel over a period of time. When making an entry into your journal, it is helpful to include the following: the date and time, the situation, your feelings and thoughts, and what you did in the situation. Did you handle it well? How would you have done it differently? It is also helpful to view your journal as a friend or as someone to talk to.

Although some journal entries may be as simple as "*I had a good day at work.*", you may be asked from time to time to focus on a particular topic. These might include:

1. Drug and alcohol cravings and urges;
2. Interactions and experiences with friends, family members, and co-workers;
3. Patterns and cycles of your thinking and feelings;
4. Identifying high risk situations and triggers for relapse/recidivism;
5. What you are getting out of being on probation/parole;
6. Daily thoughts, moods, and feelings;
7. Changes you are trying to make in your life.

RECORDING YOUR HISTORY – YOUR AUTOBIOGRAPHY

Your autobiography is a written documentation of your history. It describes your roots and past experiences. A tree stands on its roots and its trunk—that is its history. Like a tree, we cannot stand in the present in any meaningful way without our roots—our history.

Unfortunately, not all of our history is pleasant. That is why writing your autobiography is not easy. But it is vital to look at both the unpleasant and the pleasant, the positive and the negative to effectively identify your thoughts, attitudes, and beliefs, and bring about self-correction and change.

The following is an outline for you to follow when writing your autobiography, but the exact length and extent of your autobiography is up to you. (*Note: A good rule would be to allot yourself approximately 3-4 weeks to work on each section.*)

- Describe the family you grew up in;
- Describe your childhood from your first memories through your teen years;
- Describe your adult years including your education, jobs, marriage(s), and interests;
- Write a history of your criminal conduct, beginning with your first offense;
- Write a history of your alcohol or drug use, beginning with your first use of alcohol or other drugs;
- Describe past high risk situations or triggers and things you would like to change.

ERRORS IN THINKING CHECKLIST
 (Page 1)

THINKING ERROR	NEVER	SOME TIMES	A LOT OF THE TIME	ALL THE TIME
Power thrust; Put people down; must dominate				
Closed Channel; See things only your way				
Victim stance; Blaming others				
Pride; Feel superior to others				
Don't Care; Lack of concern for others				
Inability to trust; Can't trust anyone				
Won't meet obligations; irresponsible				
Want it now; Problem of Immediate Gratification "PIG"				
Entitlement; "I want it so I'll take it."				
Don't need anyone; can't ask for help				
Catastrophizing; Mountains out of molehills				
Procrastinate				
Superiority; "I don't have to do that."				
Stubborn; won't change ideas				
Rigid thinking; black and white thinking				
Feel picked on; singled out				
They deserve it; people have it coming				
Feeling screwed over; mistreated				
Lying; lies almost automatically				
Demand from others but won't give				
Anger; irrational/illogical anger				

ERRORS IN THINKING CHECKLIST
 (Page 2)

THINKING ERROR	NEVER	SOME TIMES	A LOT OF THE TIME	ALL THE TIME
Criminal Thinking; frequent thoughts of criminal things; doing crimes				
Loner; separated and isolated from others				
Selective Hearing; Tune out what you don't want to hear				
Fair Desserts; "I deserve more; I've been cheated."				
No empathy; Can't put yourself in another's position				
Failure to consider harm to others; lack of concern for how others are affected				
See yourself as good - in spite of having harmed others				
No effort; won't exert energy to achieve goal; do what comes easy; easy way out				
Fickle; change your mind and goals all the time				
Sexual Power; using sex as a way to increase your self-image				
Zero State; feeling of no value; worthy of nothing; "Why bother?"				

TRIGGERS, AND ALTERNATIVE THOUGHTS AND BELIEFS

Thoughts and Beliefs that Trigger Impulsive Behavior	Alternative Thoughts and Beliefs

PRACTICING THOUGHT STOPPING

Practice thought stopping following the steps we learned using the planting positive thought method. Do two situations. Write down the situation. Then spot the negative thoughts. Then replace your negative thoughts with positive thoughts.

SITUATION 1:

NEGATIVE THOUGHT

STOP!
POSITIVE THOUGHT

SITUATION 2:

NEGATIVE THOUGHT

STOP!
POSITIVE THOUGHT

WAYS TO CHANGE THINKING AND BEHAVIOR (Page 1)

1. **"Self-Talk"** This is teaching ourselves. We talk to ourselves. Here are some "self-talk" methods:
 - a. **Thought Stopping:** Stopping the negative or irrational thought. For example, say I have a problem with trusting people. When I meet someone new, my automatic thought may be "I can't trust this stranger," I can stop this automatic thinking by saying, "I'm feeling distrustful, I'm not going to think this way." I may still feel slightly distrustful, but I have interrupted my automatic thinking and made myself think new thoughts.
 - b. **Thinking "Responsibility" and "Their Position":** What if I were in THEIR POSITION? What are they thinking? RESPECT the other person as a human being. Think of THE PERSON YOU WANT TO BE. "Responsibility" and "Their Position" are cures for anti-social behavior and criminal conduct. "Responsibility" makes us accept the blame for our own behavior; "Their Position" makes us place ourselves in the other person's position.
 - c. **Planting a Positive Thought:** When you find yourself thinking negatively, replace the negative thought with a positive one. Do this every time you have a negative thought. For example, if the negative thought is "I will never be able to stop using drugs." The positive thought might be: "I can do anything I set my mind to." or "I am a worthwhile person who deserves to have a life free of addiction." Also train yourself to have positive thoughts towards others. "My Probation Officer is here to support me in my efforts toward sobriety
 - d. **Countering or Going Against a Thought:** The idea here is that when consistently argue against an irrational thought, that thought becomes weaker. A counter can be a short phrase or sentence like "That's stupid." "Not true.", or "Cancel-Cancel". Sometimes the counter is a coping statement: "I can do it." Or it can even be a joking statement: "It's terrible to make mistakes. Babe Ruth 714 home runs but struck out 1,330 times."
2. **Shifting the view (perceptual shifting):** This is a method of changing our mental views. It is based on how we see things inside and outside ourselves. Getting caught up in destructive and damaging ideas, beliefs, and thoughts will often lead us into substance abuse and criminal conduct. These are errors of how we can see the world. But if we can change our view, or at least shift our view, we can often see the other side of the belief or thought. The brains can then change what it brings in. (Remember the picture of Old or Young Woman)
3. **Exaggerate or Overstate the Thought:** When Victor Frankl, a famous psychiatrist, was in a German concentration camp, he found people wanted to give up. He would say "Go ahead and give up. See if I care. Do it right now. Give up." He found that in almost every case, this forced the person back to reality and they did just the opposite. We can also use this method of "reverse psychology" on ourselves. When you find yourself worrying about something in an irrational way, say to yourself, "Okay, I'm going to worry about this for the next ten hours. I'll show you how much I can worry about this." This method forces us to look at the thinking error or the irrational belief.
4. **Conditioning - Making our thoughts weaker or stronger:** This is when you reward the positive thoughts and make the negative thoughts weaker. For example, if you are thinking about drinking alcohol, then think about all the bad things that happened when you drank in the past. Replace the thought with a positive activity. If you want to drink but don't, reward yourself. Buy something, etc.

WAYS TO CHANGE THINKING AND BEHAVIOR (Page 2)

5. **Logical (sensible) study - "Going to Court with your Thoughts":** This technique involves your errors in thinking with logic or sensible thinking. For example, you have a thought about stealing something. Think: How much sense does this make? In the long run, is it worth it? Three simple rules to follow when using this method are: State your thought; get your evidence; make your verdict. This gives you time to think it through.
6. **Relaxation Skills:** When we are tired, stressed, or tense, our mental control is reduced and we are more likely to let our automatic thoughts and habits take over. Learning to relax will help us regain control. The following are some basic relaxation techniques:
 - Muscle relaxation; learning to tense and then relax your muscles one at a time;
 - Imagining calm scenes; learning to put yourself in a very calm and relaxing place such as near the ocean or by a mountain stream;
 - Mentally relaxing parts of your body; Closing your eyes and saying to yourself—"my arms are heavy and relaxed; my forehead is cool";
 - Deep Breathing: This is a powerful relaxation skill that you can do at any time. You take in your breath deeply and let it out; we do this almost naturally when we give a sigh of relief.

POSITIVE THOUGHT ARMING

Make a list of positive thoughts that you can use. This is arming yourself with positive thoughts. They are there ready to use. Repeat these thoughts to yourself. Use self-talk in practicing these positive thoughts. Each time this week you get into a negative thought, pull out one of these positive thoughts on your list.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

IDENTIFYING HIGH RISK SITUATIONS

List what you feel are high risk situations and triggers for you. Include people, places and things. Then indicate how you coped with the situation.

High Risk Situations Thoughts, Feelings, Triggers People, Places, Things	Coping with the High Risk Situation

DECISIONAL BALANCE OF PRESENT BEHAVIOR VS. CHANGED BEHAVIOR

PRESENT BEHAVIOR:		CHANGED BEHAVIOR	
___ Continue to use and abuse alcohol and other drugs ___ Continue to commit crimes and offend ___ Continue other behavior: _____		___ Live an alcohol- and drug-free life ___ Live a law abiding life ___ Live a life free of _____	
PRO	CON	PRO	CON

CIRCLE the number that best describes how you feel.

1. I would rate my **DESIRE** to change as:

1 2 3 4 5 6 7 8 9 10
 Low High

2. I would rate my **ABILITY** to change as:

1 2 3 4 5 6 7 8 9 10
 Low High

3. I would rate my **REASONS** to change as:

1 2 3 4 5 6 7 8 9 10
 Low High

4. I would rate my **NEED** to change as:

1 2 3 4 5 6 7 8 9 10
 Low High

LOSS OF JOYS AND PLEASURES

What are your joys and pleasures and would you lose them if you committed another crime or relapsed back into full AOD use?

List ten pleasures and joys that you have in your life. Make these your top pleasures and joys.	Would you lose them if you reoffended or relapsed?	
	Yes	No

STAGES OF CHANGE WORKSHEET

- Pre-Contemplation** - Denial; Inability or unwillingness to acknowledge or change behavior
- Contemplation** - Acknowledges problem and would like to change it; considering options for doing so
- Determination** - Coming up with a specific plan for addressing or changing behavior
- Action** - Implementing plan to change behavior
- Maintenance** - Sustaining the changed behavior

BEHAVIOR YOU WANT TO CHANGE	WAYS IN WHICH YOU RESIST CHANGE	STAGE OF CHANGE
Unhealthy eating habits / lifestyle	1) Keep unhealthy food in the house 2) Skip meals 3) Eat a lot of fast food 4) Don't make exercise a priority 5) Emotional/Stress Eating	Contemplation; Thought about joining a gym or a weight loss program

MY PERSONAL EMERGENCY RELAPSE PLAN

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

Complete and give copies of your plan to family and recovering friends so you know you'll receive appropriate care.

A. The people I can call and ask for help are:

1. _____
Name Phone Number
2. _____
Name Phone Number
3. _____
Name Phone Number

B. The places I can go for help are:

1. _____
2. _____
3. _____

C. Thoughts that will motivate me to stop the relapse are:

1. _____
2. _____
3. _____

D. If I am unable or unwilling to take these measures, I agree that I will:

Signature

IRRATIONAL BELIEFS AND NEGATIVE THOUGHTS

Page 1

- People must love me or I'm not ok
- It's not ok to make mistakes
- I must never show never show my weakness
- Strong people don't ask for help
- I should be better than others
- You can't tell me anything I already don't know
- The world revolves around me
- Image is everything
- People should do what I want
- People shouldn't get away with things
- The only person I can trust is myself
- Everybody is out to get me
- I can't help how I feel
- I can't forgive myself
- It's terrible when things go wrong
- I need others to take care of me
- Others are responsible for my problems

IRRATIONAL BELIEFS AND NEGATIVE THOUGHTS (cont'd)

Page 2

- My past keeps bringing me down mad
- The way people act makes me
- I am inferior to others
- No one listens to me
- What I say doesn't count
- No one cares, so why try
- I have to make people like me in order to be ok
- People don't take me seriously
- I'm not strong enough to stand up for my rights
- It's better to be quiet than to risk getting laughed at
- If others criticize me then something is wrong with me
- I don't deserve to be treated well
- I need to be happy all the time
- I should help everyone who needs it
- No one should have to suffer
- I should never hurt anyone

NEGATIVE THOUGHTS THAT LEAD TO AOD USE AND CRIMINAL CONDUCT

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

Negative Thoughts That Lead to Alcohol and Other Drug Abuse	Negative Thoughts That Lead to Criminal Behavior/Conduct

Reprinted with permission of the authors of *Criminal Conduct and Substance Abuse Treatment*, Kenneth W. Wanberg and Harvey B. Milkman (1998).

FEELING LIST

afraid	useless	weary	wonderful
alive	forgiving	worthwhile	hurt
amused	concerned	uncertain	vulnerable
angry	worried	remorseful	disappointed
annoyed	sorry	victimized	loving
bitter	warm	safe	friendly
cheerful	eager	humiliated	enraged
courageous	timid	scared	desperate
devastated	dejected	rejected	isolated
discouraged	tired	happy	competent
excited	valued	supported	understood
fearful	delighted	distrustful	exasperated
fulfilled	apprehensive	frantic	trapped
furious	uncomfortable	unappreciated	depressed
guilty	miserable	affectionate	comfortable
hateful	content	tender	peaceful
helpless	funny	understanding	desirable
hopeless	unhappy	put down	restless
hostile	agitated	frustrated	defeated
impatient	uptight	tense	indifferent
inadequate	pissed	sleepy	ecstatic
insecure	numb	stuck	trapped
irked	harassed	shocked	stunned
irritated	nervous	righteous	confident
joyful	giddy	silly	embarrassed
kind	shameful	proud	content
lonely	satisfied	powerful	worthless
lost	devalued	short-changed	passionate
pessimistic	playful	pleased	rejected
relaxed	relieved	resentful	sad
shy	strong	terrified	threatened
useless	weary	insignificant	terrified

**COMMON PHYSICAL CHARACTERISTICS OF
Anger, Stress, Anxiety, Fear, and Guilt**

- **Tight Tummy / Indigestion / Nausea**
- **Clenched fists**
- **Increased heart rate**
- **Increased blood pressure**
- **Flushed Face**
- **Faster, shallow breathing**
- **Grind teeth**
- **Dry mouth**
- **Headache (pounding head)**
- **Shaking / Tremors**
- **Perspiration**
- **Clenched jaw**
- _____
- _____
- _____

IDENTIFYING TRIGGERS AND SYMPTOMS OF ANGER

Describe a situation in which you became angry and identify what triggered that anger. Describe what you felt during the episode.

1. Describe the situation in which you got angry.

2. How did you handle it?

What specifically made you angry in this situation?

How did you handle the situation?

Describe your physical and emotional response.

CONSEQUENCES OF MY ANGER

Five Best/Five Worst Consequences

List the five best consequences of your anger, then list the five worst consequences.

5 BEST CONSEQUENCES OF MY ANGER	5 WORST CONSEQUENCES OF MY ANGER

8 STEPS TO MANAGING YOUR ANGER

- 1. Know the difference between feeling angry and the event that caused use to be angry (We can't always control what happens to us but we can control our reaction.)**
- 2. Recognize destructive anger (which results in aggression or violence) vs constructive anger (which can be used as motivator or impetus to change)**
- 3. Employ self-controlling techniques (deep breathing, self talk, thought stopping, counting to ten, counting backwards from twenty, leaving the situation, etc)**
- 4. Express your anger calmly and constructively (use "I" messages)**
- 5. Explore what you are really angry about...Is it rational?**
- 6. Move your anger into problem solving; apply the problem solving skills (covered in next section)**
- 7. Realize you can't always resolve the situation or fix everything. When this happens, try to let it go**
- 8. If you are successful in managing and resolving your anger constructively, congratulate and reward yourself**

COMMON SITUATIONS THAT TRIGGER CRAVINGS AND URGES

- Exposure to drugs/alcohol
- Seeing other people using drugs/alcohol or committing crimes
- Associating with people who use drugs or are involved in criminal conduct
- Certain Emotions, including fatigue, stress, self-doubt, nostalgia, boredom, anger, guilt, frustration, excitement, or accomplishment

WAYS TO COPE WITH CRAVINGS AND URGES

1. **Finding Another Activity** - This will distract you from the craving or urge. Doing something may help (e.g. taking a shower); sometimes eating will suffice. With time, other behaviors will feel more natural and you will need to use fewer replacements.
2. **Talking to Family/Friends** about the cravings/urges - This may help identify what triggered the craving; it may also help restore some honor to a relationship that may have been previously damaged.
3. **"Toughing It Out" or "Urge Surfing"** - Gain control of the situation by simply bearing the discomfort; it will go away with time. Here's how you do it:
 - a. Pay attention to how you experience the craving. What are your thoughts and feelings about the craving? Is it in your stomach?
 - b. Is it still a craving? Or is it now an urge? If you feel it in your body and you are now taking action to fulfill the craving-like going to the liquor store or calling an old crime buddy-it is an urge.
Remember: Cravings are mental; Urges have body senses and move you to action.
 - c. When you feel the craving moving to an urge, focus on your physical responses. Talk down the urge with self-talk. *Turn the corner* by talking to a non-using friend instead of continuing to the liquor store. The urge will go away faster than you think. But you have to **TURN THE CORNER.**

WAYS TO COPE WITH CRAVINGS AND URGES (cont'd)

4. **Remember the Bad Things That Can Happen** - What are the negative outcomes that result from using drugs or committing a crime? What are the rewards of being drug-free or of engaging in positive or pro-social behavior in the community?
 - a. Make a list of *bad* things that have happened to you because of drug/alcohol use or criminal behavior (i.e. pain, jail, loss of money, family, friends, etc.)
 - b. Make a list of the *positive* things that come with sobriety and pro-social behavior (i.e. freedom, better physical/mental health, improved family relations, etc.)
 - c. Talk to yourself about goals. What is it you are trying to accomplish? Remind yourself of your accomplishments thus far.
 - d. Identify perceptions or statements that make you uncomfortable. When you find one, challenge the thought. Convince yourself that you will get better and you can survive the discomfort.

5. **Stop and Think**
 - a. What are the joys and pleasures you have to lose by giving in to the urge to use?
 - b. What are the joys and pleasures you have to lose by doing a crime?

ROLE PLAYING EXERCISES FOR ANGER AND IMPULSIVITY

Page 1

1. Role play this scenario: Your probation/parole/corrections officer has denied you privileges for two weeks. How are you going to react to this? Do you have any choices in the situation? What can you do to resolve the problem? [Note: Problem Solving Exercises can be used.]
2. Describe what things make you angry most often and how you feel at the time. Think about situations when you are driving, at home, at work, or with friends. Make a list of those feelings. What were the *physical* reactions (e.g. pounding heart, tension in the muscles, etc.) and *psychological* reactions (e.g. feeling blamed, guilty, tired, or depressed) [Note: You can use worksheets under Managing Emotions and the Feelings List under Cognitive Restructuring for this exercise.]
3. What kind of things do you say to yourself when you are getting angry? What do you do to try and control your anger? Does it work? Make a list of things people do to control their anger.
4. Discuss or write about a situation in which you demonstrated a constructive response to anger (e.g. stay cool; use soothing self-talk; think about options; communicate clearly; listen to other person's perspective; and accept the conflict gracefully if it cannot be resolved).
5. Share examples of the following: A situation when you were so angry that you wouldn't talk to another person; A situation when another person was so angry with you that they wouldn't listen to what you had to say; A situation when you were so angry that you couldn't express your position and reacted with violence. In each of these instances, what could/should you have done?
6. Imagine a scene that arouses your anger. Now practice a relaxation technique in dealing with that anger. Facilitator should say, "Take slow, deep breaths. Now take a deep breath. Hold your breath. Hold it, hold it, hold it. Now, let it go slowly through your mouth. Slowly blow out the air in your lungs. Clear your mind of thoughts as you let go of the air. Now tell yourself, 'I am relaxed, I feel calm, I am relaxed.'" Repeat this three times and try to do it on your own.

ROLE PLAYING EXERCISES FOR ANGER AND IMPULSIVITY

Page 2

7. Imagine this scenario and use these words:

"Imagine you are in a line for tickets that you really want. There are only so many tickets for sale and you have been in line for 30 minutes. The line is moving very slowly."

Wait for 30 seconds

"Picture the people ahead of you and behind you."

Wait for 30 seconds

"Your feet hurt, you are hungry, it is hot, and you are tired. Imagine this feeling."

Wait for 30 seconds

"All of a sudden a guy in a 3-piece suit barges up and gets in line ahead of you. Can you picture it clearly?"

Wait 30 seconds

"You tell him politely but firmly, 'There is a line here.' He turns around says, 'Go to hell.' Think about this. Focus your thoughts on this. What are your thoughts? Now write them down as you think of them."

Allow 1 minute for this

"What you just wrote down is your 'self-talk.' The thoughts we say to ourselves. Our self-talk can be things that make us more angry and aroused or things that allow us to clam down and consider the alternatives in the situation."

Most of the thoughts will be angry thoughts. This is *destructive self-talk* and will probably increase your anger. They are to be expected but will not diffuse the situation. See if there are any thoughts that work toward reducing anger and helping you to calm down. **UNDERLINE THESE.** These are called *control self-talk*. If there isn't any control self-talk, can you think of some? Do the same exercise but this time practicing the Relaxation Technique of Deep Breathing in Exercise 6.

8. Remember, Self-Control is the key. Use the following techniques:

- **Deep Breathe** - Close your eyes and think of a calm scene; feel your hands get heavy;
- **Use Self-Talk** - Hear your voice calm yourself. Hear the angry thought and use thought-stopping. Think of the long-term consequences;
- **Use Thought Replacement** - Replace the angry thoughts with positive ones;
- **Problem Solve** - Ask yourself what are my angry thoughts; What is the problem that is bringing the thought; What is my goal?; and choose an action—the action should replace the angry thought; and
- **Be aware** that the other person may also be angry and not reasoning well.

SELF-TALK DURING AN ANGRY SITUATION

Describe a situation in which you were angry:

Thinking	Feeling	Action	Outcome	Self-talk/ Intervening Thoughts	Action	Outcome

STOP AND THINK

These are different techniques you can use to help you stay calm when you're feeling angered. Practice different techniques and see which ones work best for you.

1. **Be Quiet**

When you're upset and your mouth is working faster than your brain, you've got to get it under control. To calm yourself down, you first have to **stop talking**, at least for a little while.

2. **Back Off**

Give yourself some **physical space** if you can. A step back, a slight turn to the side, an excuse to call back later. Any of these can take you physically or mentally away from the scene and give you a moment to calm down.

3. **Deep Breathe**

One deep, deep breath can **release** a lot of the tension built up by sudden stress.

DEEP RELAXATION

These are different relaxation techniques you can use to reduce tension and anger. Practice different techniques and see which ones work best for you.

1. Close your eyes and imagine you are in a beautiful place you would like to be.
2. Listen to music and fully hear and feel it.
3. Breathe in slowly through your nose. Exhale slowly through your mouth.
4. Clench and release your muscles. Tense and relax each part of your body.
5. Massage the tense muscles in your body.

BELIEFS OF A POSITIVE REALIST

(Reneau Peurifoy)

These beliefs offer a different way of viewing your situation in a positive way. It empowers you to create your own view of the situation by reminding you of the control you have over how you think and feel.

1. People and events don't cause me to feel things; it is the interpretation I give to events that generates my emotions.
2. Pain is inevitable, suffering is optional - - my choice.
3. Today is my point of power - - make choices that bring what I want based on the realities present here and now.
4. Humans can be very tough critters. I can, if I choose, tolerate frustration and loss. I don't have to let it defeat me.

DEALING WITH CRAVINGS

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

Make up a plan to deal with an episode of craving. Pick two or three strategies to deal with the craving and detail how you would use them when you feel tempted to lapse.

1. List your craving or urge.

2. What activities would you choose to distract you?

3. Who might you call for help?

4. What mental skills did you use? Thought stopping? Shifting the View?

COGNITIVE STEPS FOR IMPULSIVITY

Describe a situation in which a negative outcome occurred as a result of your being impulsive: _____

Desired Outcome	Alternative to Achieve Outcome	Pros	Cons

COMMUNICATION SKILLS

<p>Double-Sided Reflection</p>	<p>Double-Sided Reflection is a communication skill that a listener uses to highlight two sides of a statement. It has a stem of, "On one hand....and on the other hand....." If a speaker is making two different points, the listener can respond for clarity by restating back to the speaker one point on one hand and the other point on the other hand.</p> <p>For example, a speaker could say, " I want to lose weight by exercising but due to my long work hours, I can't find the time." The listener could respond with, "<i>On one hand</i> you want to lose weight and <i>on the other hand</i> you're having difficulty finding time to work out."</p>
<p>Agreement with a Twist</p>	<p>Agreement with a Twist is a communication skill that a listener uses to re-frame a statement that the listener may not totally agree with. Agreement with a Twist starts off by the listener agreeing with the speaker and then offers a different point of view or opinion to the speaker's own.</p> <p>For example, a speaker could say, " I like to eat a lot and I like to work out, but because they cancel each other out, I can't lose weight." The listener could respond with, "Yeah, starving yourself to lose weight is not healthy; I think you could eat healthier by substituting with fruits and vegetables. In that way, you could still eat as much and not be counterproductive to exercising."</p>
<p>"I" Statements</p>	<p>"I" Statements. This communication skill is used when the speaker does not want to fall into the "blaming" trap. Rather than getting into a blaming argument by using "you did this" and "you did that," "I" statements concentrate on how a person is hurt or impacted by the words or actions of another.</p> <p>For example, if a person was yelling at you, you could respond by saying, "I do not appreciate it when I'm spoken to in that tone of voice," or " I feel disrespected when I'm yelled at." Using "I" statements does not make the other person defensive and thus provides an opportunity to dialogue rather than perpetuate an argument.</p>

WAYS TO DEAL WITH CONFLICT OR PROBLEMS

Ways People Handle Conflict	General Characteristic	Example	Consequences
FLIGHT	Avoids the problem or is passive	Storms out of the boss' office after being told he needed to work on Super Bowl Sunday. He's upset because plans had already been made.	<ul style="list-style-type: none"> • Gives up his or her rights when there is any conflict with what someone else wants. • Doesn't get what he or she wants at his or her own expense.
FIGHT	Attacks others or gets aggressive	Argues with the boss that he's put in more time than anyone else and demands the time off.	<ul style="list-style-type: none"> • The aggressive person protects his/her own rights but gets what he or she wants at the <i>expense</i> of others. • With the aggressive person, others pay.
FAKE Fake falls between avoiding and being aggressive.	Passive-aggressive	Agrees to work on Super Bowl Sunday, but calls in sick that day so he can stay home to watch the game on TV.	<ul style="list-style-type: none"> • Person is not direct in approaching problems. • Fails to express needs in a way that other people can respond to them. • Passive-aggressive people don't get what they want at the expense of themselves and others. • Both others and the person pays.
FAIR The healthy choice is to learn and practice the skills of being assertive.	Being assertive	Get an understanding of the total situation and think of alternative solutions. Explain to the boss that plans had already been made for that day and state how you feel. Offer alternative solutions.	<ul style="list-style-type: none"> • The assertive person does not compromise his or her rights. • The assertive person does not get something at the expense of others.

THE ART OF BEING ASSERTIVE - 10 KEY WAYS

(from *Criminal Conduct and Substance Abuse Treatment* by Wanberg and Milkman, 1998)

1. Recognize your rights in a situation without trespassing on the rights of others.
2. Know how to clearly state your opinions and what it is you want from others. (This is not a guarantee that we will get our very own way every time, but it does improve our chances.)
3. Consider the needs of others as you get your own needs met.
4. Be flexible and give, yet at the same time continue to make your position clear.
5. Avoid blaming; avoid using "you."
6. State how you feel and think; use "I" messages.
7. Have your goals clearly in mind; know what you want.
8. Confront the issues head on. Attack the problem and not the person.
9. Become part of the solution and not part of the problem.
10. Once you make a decision, stick with what you have decide. Don't relive or continually rehash *what might have been*.

EXERCISES FOR ASSERTIVENESS SKILLS DEVELOPMENT

Role-Playing Exercises

1. Your best friend invites you to a concert but you always end up paying for the tickets. This is a concert you don't want to miss.
 - a. Give a statement to illustrate each of these four ways to handle the problem:
 - Flight (avoiding)
 - Fight (aggressive)
 - Fake (passive-aggressive)
 - Fair (assertiveness)
 - b. Now, apply the 10 keys to being assertive in this situation (use Handout 2). Come up with several assertive statements you can use with your friend.
2. Role-play the following scenario.

An employee's boss promised you a bonus for working on the weekend. The extra money does not appear on your paycheck. Role-play various styles of handling this situation: avoiding, aggressive, passive-aggressive and assertive. The goal is to get the bonus without offending your boss. After each situation, identify the personality type that was depicted and tell whether your goals would be met.
3. Other exercises to role-play:
 - You have paid all your bills, but a department store says your bill is delinquent.
 - You buy an appliance for full price and a day later see it advertised for one-third off.
 - A friend wants to borrow money so he can purchase some drugs that he can sell at a very high profit.
 - A friend wants to borrow money for drugs. You know he has been trying to stay clean.

ACTIVE LISTENING SKILLS

Active listening requires that we really listen to what other people are saying and try to understand what they are saying and feeling.

This is what we pay attention to:

1. Their words.
2. The tone of their voice.
3. Their body talk.
 - Posture
 - Facial expression
 - Tone of voice
 - Personal space
 - Hand, face and feet gestures
4. Your own listening skills.
 - Look at the person you are talking with. Establish eye contact.
 - Watch the person's body language.
 - Pay attention to what is being said. If you don't understand, ask an open question.
 - When you do understand, nod your head to encourage the speaker.
 - Reflect back on what you have heard.
 - Invite people to share by using open questions.

Exercises:

1. **MODEL:** A client misses an appointment with his/her probation officer. Role-play the conversation in which he/she tries to explain what happened. [Roles are same: PO plays the PO; client plays the client]
2. **PRACTICE:** You've just received a last warning that the telephone bill hadn't been paid. Role-play the conversation in which your husband/wife explains what happened. [PO plays the husband/wife; client listens and practices active listening]

SITUATIONS WHEN NEEDS WERE UNMET

Choose a few situations when you did not have your needs met. State what your response was and identify whether it was a FLIGHT, FIGHT, FAKE or FAIR response. Then state what you might have done differently by using assertiveness skills.

Situation	Response	Type of Response	Alternative Response Using Assertiveness Skills

ASSERTIVE SITUATIONS ACTIVITY LOG

Choose two situations in which you had an opportunity to be assertive and report on them. These may be simple instances in everyday life.

SITUATION #1

Describe the circumstances.

What did you do/say?

What was the outcome?

SITUATION #2

Describe the circumstances.

What did you do/say?

What was the outcome?

GOALS FOR IMPROVING MY INTERPERSONAL COMMUNICATION SKILLS

1. My tendency to deal with conflict is to be: (circle one)

PASSIVE

AGGRESSIVE

PASSIVE-AGGRESSIVE

2. I want to practice the art of being assertive by: (circle all that apply)

- A. Recognizing my rights in a situation without trespassing on the rights of others.
- B. Knowing how to clearly state my opinions and what it is I want from others. (This is not a guarantee that I will get my very own way every time, but it does improve my chances.)
- C. Considering the needs of others as I get my own needs met.
- D. Being flexible and giving, yet at the same time continuing to make my position clear.
- E. Avoiding blaming; avoiding using "you."
- F. Stating how I feel and think; use "I" messages.
- G. Having my goals clearly in mind; knowing what I want.
- H. Confronting the issues head on. Attack the problem and not the person.
- I. Becoming part of the solution and not part of the problem.
- J. Sticking with what I've decided, once I've made a decision; don't relive or continually rehash *what might have been*.

3. Of the circled items above, I want to focus on item(s) _____.

4. This is my plan:

EXPRESSING A COMPLAINT OR CRITICISM

There are techniques you can use for expressing a complaint or providing criticism without offending the other person.

Here are a few pointers:

1. Specifically decide what the issue is.
2. Decide if you should express anything.
3. Decide when, to whom, and what should be done.
4. State your complaint and suggested solution in a friendly manner
5. Ask for the person's reaction.
6. State your understanding of the other person's view.
7. Discuss alternative solutions.
8. Reach an agreement.

Exercises:

1. **MODEL:** A client is dissatisfied with his/her (haircut, car repair, food order, etc.). Role-play the conversation in which the client tries to explain what happened. [Client role plays the client; the PO responds to the complaint.]
2. **PRACTICE:** You've just received a last warning that the telephone bill hadn't been paid. Role-play the conversation in which your husband/wife explains why he/she did not pay the bill. [Client role plays the person who received the last warning; PO plays the spouse and explains why the bill was not paid.]

RECEIVING A COMPLAINT OR CRITICISM

There are techniques you can use for responding to complaints or criticism without being defensive or angry.

Here are a few pointers:

1. Listen carefully to the complaint or criticism.
2. Ask for more information.
3. Decide if the complaint is justified.
4. Decide if you should accept or deny responsibility and what should be done.
5. Express your view and suggested solution.
6. Ask for the person's reaction.

Exercises:

1. **MODEL:** A boss says the car you just detailed was not up to standard. Role-play the conversation and respond to the criticism. [PO role plays the detailer; client role plays the boss.]
2. **PRACTICE:** Your partner tells you that you're not taking care of your appearance. Role-play the conversation in which you respond to the criticism. [PO role plays the client's partner; client practices responding to the criticism.]

EXPRESSING A COMPLAINT OR CRITICISM EXERCISE

Practice expressing a complaint or criticism. Use this worksheet to tell what happened.

1. What was the issue for the complaint or criticism?

2. What were the specific words you said? What solutions did you offer?

3. How did the person respond?

4. How did you respond to the person's viewpoint? How was an agreement reached?

5. How did you feel about expressing your complaint or criticism?

6. Is there anything you would do differently?

RECEIVING COMPLAINTS/CRITICISM EXERCISE

Practice receiving a complaint/criticism. Use this worksheet to tell what happened.

1. What was the complaint/criticism the person gave you?

2. What were the specific words you said in response to the complaint/criticism?

3. How did you feel about the complaint/criticism? Did you feel it was justified?

4. How did you express your view?

5. Did you offer a solution? What was it?

6. Is there anything you would do differently?

COMMUNICATION SKILLS

<p>Double-Sided Reflection</p>	<p>Double-Sided Reflection is a communication skill that a listener uses to highlight two sides of a statement. It has a stem of, "On one hand....and on the other hand....." If a speaker is making two different points, the listener can respond for clarity by restating back to the speaker one point on one hand and the other point on the other hand.</p> <p>For example, a speaker could say, " I want to lose weight by exercising but due to my long work hours, I can't find the time." The listener could respond with, "<i>On one hand</i> you want to lose weight and <i>on the other hand</i> you're having difficulty finding time to work out."</p>
<p>Agreement with a Twist</p>	<p>Agreement with a Twist is a communication skill that a listener uses to re-frame a statement that the listener may not totally agree with. Agreement with a Twist starts off by the listener agreeing with the speaker and then offers a different point of view or opinion to the speaker's own.</p> <p>For example, a speaker could say, " I like to eat a lot and I like to work out, but because they cancel each other out, I can't lose weight." The listener could respond with, "Yeah, starving yourself to lose weight is not healthy; I think you could eat healthier by substituting with fruits and vegetables. In that way, you could still eat as much and not be counterproductive to exercising."</p>
<p>"I" Statements</p>	<p>"I" Statements. This communication skill is used when the speaker does not want to fall into the "blaming" trap. Rather than getting into a blaming argument by using "you did this" and "you did that," "I" statements concentrate on how a person is hurt or impacted by the words or actions of another.</p> <p>For example, if a person was yelling at you, you could respond by saying, "I do not appreciate it when I'm spoken to in that tone of voice," or " I feel disrespected when I'm yelled at." Using "I" statements does not make the other person defensive and thus provides an opportunity to dialogue rather than perpetuate an argument.</p>

PROBLEM EXAMPLES

PROBLEM EXAMPLES

Read each statement aloud and use the criteria below to determine whether they are good or bad problem statements.
*If they are good, write GOOD.
If they are bad, restate correctly.*

A GOOD PROBLEM STATEMENT SHOULD:

1. Make you the focus of your problem by stating what you think, how you feel, or what you did
2. Be specific about the who, what and when of the problem

a. "My husband/wife is about to leave me, and I feel like I can't do a thing about it!"

a. _____

b. "My kids don't care about me anymore--they've got a new mommy /daddy!"

b. _____

c. "Nobody can tell me what to do!"

c. _____

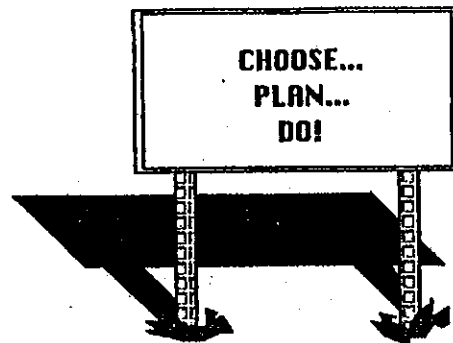
d. "I'm attracted to someone at my new job, but I'm afraid she won't like me if she knows I'm an ex-con."

d. _____

e. "I just can't take these stupid job interviews anymore."

e. _____

CHOOSE... PLAN... DO!



1. CHOOSING THE BEST OPTION

Does this choice:

- * cause more problems than it solves?
- * get you no closer to what you want?
- * cause harm to others?

(If so, ditch it!)

2. PLANNING FOR SUCCESS

- A. What are your resources?
- B. What are your restraints?
- C. What's your plan? Specifically, what will you do, and when?
- D. What is "Plan B" if your first plan fails?

3. DOING IT RIGHT

- A. What is the right time and place to put your plan in action?

CONSEQUENCES OF MY PROBLEM SOLVING METHODS

Five Best/Five Worst Consequences

List the five best consequences of your current methods of problem solving, then list the five worst consequences.

5 BEST CONSEQUENCES OF MY PROBLEM SOLVING METHODS	5 WORST CONSEQUENCES OF MY PROBLEM SOLVING METHODS

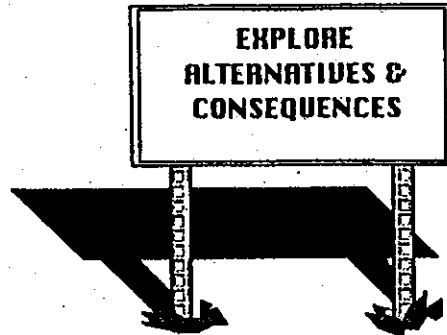
EVALUATE



- 1. WHAT WAS YOUR ORIGINAL GOAL?**
- 2. ARE THINGS BETTER OR WORSE?**
(Did you get what you wanted?)
- 3. WHAT HAVE YOU LEARNED?**
(Why did you succeed or fail?)

EXPLORE ALTERNATIVES AND CONSEQUENCES

Problem Solving Skills



The more choices you can come up with, the better your final decision will be.

1. WHAT ARE THE CHOICES ?

What could you do if you had to?

2. WHAT ARE THE CONSEQUENCES

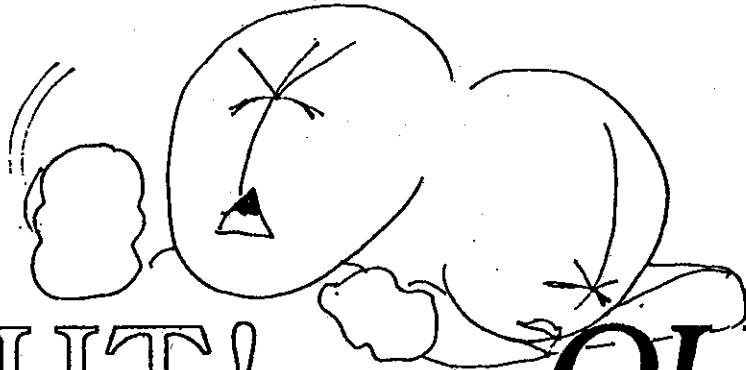
- to you?
- to others?

What's the best and worse that could happen?

HIT OR QUIT

"HIT OR QUIT"

When faced with sudden stress, poor problem solvers have two gut reactions:



HIT! **OR** **QUIT...**

List other ways that you can HIT

List other ways that you can QUIT

Think of a time that you got **really** worked up. It may have been something big, or just a bunch of little things that added up. It might have been with your spouse or children, at a staff member or fellow resident, or just at yourself over "something stupid". Think about how it all built up, who was involved, where it happened, ... all those details. The more specifically you can recall it, the more you'll get out of this next activity.

Just before you started going over the edge.....

What was happening? _____

What were you feeling? _____

What were you thinking? _____

Did you HIT or QUIT or neither? _____

PERSONAL WARNING SIGNS ACTIVITY

Personal Warning Signs Activity

Take a minute to think about how you are when you get into a personal problem with someone else. Answer honestly.

"I know a real problem is brewing when I start feeling

----- or -----
and start saying things like

----- 'to myself."

"When I start feeling or thinking that way, I usually start

----- ing or ----- ing."

**"----- and end up ----- , which only
makes my problem worse."**

Example: "I know a real problem is brewing when I start feeling picked on or put down, and saying things like, "They're taking advantage of me" to myself. When I start feeling or thinking that way, I usually start complaining or arguing, and end up pissing people off, which only makes my problem worse."

feeling:

thoughts:

Now take your **feeling** words and write them onto a [red] label.
Write your **thoughts** onto a [green] label.

Peel them off and stick them onto the left side of your chest. These are your **Personal Panic Buttons**, your cues to distress. You know, and we know, that if you start to feel and think like this, you're getting on the edge. **Knowing your personal warning signs is an important step in self awareness that leads to self control in crisis.**

PROBLEM SOLVING WORKSHEET

1) My problem is:

Specifically state the facts (who, what, where, when)
Focus on yourself

2) My goal is:

What I want the outcome to be
My goal is achievable - don't overestimate how much or what you can do
Be positive - state what you will do, not what you won't do

3) Possible solutions to my problem are:

Be open to all options

4) The consequences are:

Identify positive and negative consequences
What is the best and worst thing that could happen
Include consequences to others involved

My Different Solutions	Positive Consequences	Negative Consequences
Solution A		
Solution B		
Solution C		

5) The best choice:

Select the solution that is most beneficial.

Double check your choice.



Does this choice cause more problems than it solves?



Does this choice cause harm to others?

My Choice is: _____

Action Plan:

Who is involved? _____

What needs to be done? _____

What are my limitations? _____

When will I do it? _____

6) Evaluation

What was the result?

How was I successful at meeting my goal? _____

Why was I unsuccessful at meeting my goal? _____

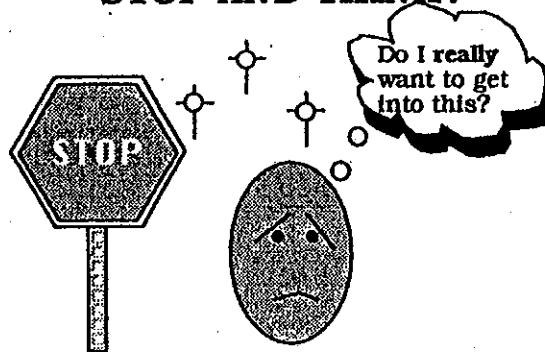
What did I learn from this? _____

What will I do next? _____

STOP AND THINK. DO THE THREE-STEP!

Problem Solving Skills

How do you
STOP AND THINK?



Do the Three-step!

1. BE QUIET-

When you're upset and your mouth is working faster than your brain, you've got to get it under control. To calm yourself down, you first have to **stop talking**, at least for a little while.

2. BACK OFF-

Give yourself some **physical space** if you can. A step back, a slight turn to the side, an excuse to call back later. Any of these can take you physically or mentally away from the scene and give you a moment to calm down.

3. DEEP BREATH-

One deep, deep breath can release a lot of the tension built up by **sudden stress**.

GOAL EXAMPLES

GOAL EXAMPLES

Write out positive Goal Statements for each of the Problem Statement on the previous handout.

A GOOD GOAL STATEMENT SHOULD BE:

- 1. Simple:** Deal with only one thing at a time.
- 2. Realistic:** Don't overestimate how much you can do.
- 3. Positive:** State what you will do rather than what you won't do.

1 _____

2 _____

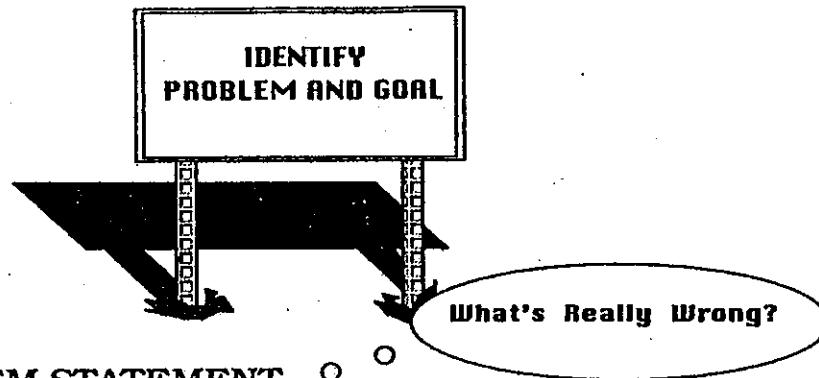
3 _____

4 _____

5 _____

IDENTIFY PROBLEM AND GOAL

Problem Solving Skills



PROBLEM STATEMENT

1. Make **yourself** the focus of your problem by stating what **you** think, how **you** feel, or what **you** did
2. Be specific about the **who, what** and **when** of the problem

GOAL STATEMENT

What do I really want?

Your goal should be:

1. **Simple:** Deal with only one thing at a time.
2. **Realistic:** Don't overestimate how much you can do.
3. **Positive:** State what you **will** do rather than what you **won't** do.

CLOSED AND OPEN-ENDED QUESTIONS

Close-Ended Questions: A question that leads the other person to give brief answers (i.e., yes, no, one word or short phrase) and does not allow room for feelings and/or opinions.

Stems: The first word, or “stem,” that starts the question can help determine if it is a closed question:

When did you turn in your report?

Do (Did) you like hip-hop music?

Can (could) you speak German?

Where do you work?

How many cars do you own?

Is (are) your foot swollen?

Have (had) you ever ran a marathon?

Will (would) you pass me the milk?

Open-Ended Questions: A question/statement that leads the other person to give more complete answers that express more thoughts, feelings and/or opinions.

Stems: These stems usually will begin an open-ended question:

What do you plan to do about that?

How are you able to keep going?

Why did you make that choice?

Describe what your childhood was like.

Explain how you managed to stay clean during the holidays.

Tell me about your most painful experience.

List for me the pros and cons of using drugs.

HALT EXERCISE

H stands for hungry. Hungry not only refers to food appetite, diet, or eating habits, but more importantly, a craving or wanting something. Needing to be satisfied immediately.

A stands for angry. Anger refers to the resentment, rage or anxiety of not getting what we want.

L stands for lonely. Loneliness refers to the things or people that are missing in our lives: feelings of alienation in relationships, conflict, being uncomfortable (i.e. not fitting in), and being comfortable with the "self."

T stands for tired. Fatigue. Tired of not having needs met.

Exercise:

Hungry Identify (3) of your present needs

Angry Identify other feelings that you have in situations where your needs are not being met.

Lonely Identify prosocial people in your life that can support you, by giving you ideas or feedback that will help you meet your needs.

Tired Identify possible reactions that you may have, when your needs are persistently not met.

BENEFITS FOR USING EFFECTIVE PROBLEM SOLVING SKILLS

1. Input into how we want the problem to be solved, rather than others making the decision for us.
2. Choosing the best solution by thinking before we act, rather than taking the first that comes to mind.
3. Relationships are positive and productive.
4. Control over what happens to you.

Top 3 Assessed Needs%	Client Stage of Change	ASUS and Other Learner Indicators
1.		
2.		
3.		
Specify Goal		
Indicate objectives & tasks (actions) designed to meet this goal:		
OBJECTIVE 1 & TASK(S)	OBJECTIVE 2 & TASK(S)	OBJECTIVE 3 & TASK(S)
List name of program referred out:	List name of program if referred out:	List name of program if referred out:
Notes to track progress:		
Indicate if and why professional judgment necessitates treatment other than the assessment dictates.		

Supervision Officer Signature: _____ Client Signature: _____

Date Signed: _____ Date Signed: _____

CHANGE PLAN WORKSHEET

1. The changes I want to make are:
2. The most important reasons I want to make these changes are:
3. My main goals for myself in making these changes are:
4. These may be barriers to reaching my goals:
5. These are the strengths to help me reach my goals:
6. I plan to do these things to reach my goals:
 - a. Plan of action:
 - b. When I will get it done by:
7. The first steps I plan to take in changing are:
8. Other people could help me in changing these ways:
 - a. Person:
 - b. Possible ways to help:
9. I hope that my plan will have these positive results:
10. I will know that my plan is working if: