One of the biggest challenges for programs is transfer of the skills learned in structured interventions to natural environments. Hence, it is recommended, particularly for higher risk/need individuals, that practice of similar skills not be avoided, but rather used as an opportunity to teach participants that there are multiple applications to core cognitive, social, coping, and problem-solving skills. Application of the skills in this curriculum is specific to managing risky situations as they relate to substance abuse.

Programs that offer multiple curricula will need to decide whether each module in *Cognitive Behavioral Interventions for Substance Abuse* will be retained for the substance abuse portion of their programming. Considerations for the program include length of stay, participant risk and need level, and intervention dosage needs.

Group Facilitation Skills

In order to set the tone and understand the delivery of this curriculum, a few important components will be addressed in this introduction section. The facilitator will assist participants in identifying intervention needs and skill deficits; the curriculum incorporates specific assessments and exercises to assist in this process. While identifying needs is an important treatment strategy, it is also important to view group participants through a strength-based perspective, which involves minimizing their weaknesses and maximizing their strengths. As a facilitator, you will be modeling pro-social, empathetic behavior. Though your personal belief that each participant you encounter has something of value to offer, you have the potential to greatly enhance your work and overall effectiveness.

A) Setting up the Group:

Group dynamics are a construct of each member and his relationship with other members and the group leaders. Several factors can affect the group dynamics. What follows is a review of elements to consider when designing an effective program environment. A u-shape seating arrangement works best for charting during the group.

The Space: The arrangement and shape of the room have an effect on the tone and effectiveness of the group. It works best to have chairs arranged in a circle or u-shape. This allows everyone to see each other and adds to the feeling that everyone in the group is on equal terms.

Facilitator Seating: During the first few sessions, you'll want to sit near the front of the room; however, once the group begins to feel comfortable and members are actively involved, you can sit in different places each time you meet, rotating around the circle. If you are co-facilitating the group with another person, sit together during the first two to three sessions, then sit separately thereafter. In this way you will communicate unity at the beginning and individuality as the group forms.

Participant Seating: Allowing participants to choose their own seats empowers them and reinforces the element of choice. If, however, you become aware that two of the participants are having a conflict or tension of some kind, pay close attention to where they are sitting. If they are

seated next to each other, you may want to place yourself between them. Situations can escalate quickly and quietly, so stay alert.

In addition, sometimes you'll have one or two participants who regularly engage in side talking. In this case, ask to speak with them individually after group. Let them know that you want to help them get the most out of the group, and you'd like others to be able to gain as much as possible as well. Ask them to come up with a plan for how to best address the issue. If they are having difficulty thinking of ideas, suggest that they sit in a different place in the group.

B) Ask, Listen, Reflect and Affirm

Ask: Whenever presenting a new topic, attempt to evoke from the participants as much of the information you wish to communicate as possible. If the message comes from them, rather than you, they will be more engaged and apt to understand and implement the concepts. Ask questions that you think they can answer correctly. As much as you can, use open-ended questions to draw out longer more thoughtful answers.

Listen: While the clients are talking, try to imagine what they're saying under the surface of their words. What is the deeper meaning of their words? Try to refrain from formulating a response while clients are still speaking. Instead, fully focus on their words and become very curious about them. By employing curiosity, empathy, and attention, you will be able to gather a lot of information while empowering the participants.

Reflect: When the other person is <u>completely</u> finished talking, give yourself a moment to consider what that person has said, and then make a reflective listening statement. Reflective listening is a technique that further promotes empowerment and allows staff to communicate in an empathetic style. When clients hear their message echoed back, they have an opportunity to clarify their thoughts and move past ambivalence. In addition, by selectively choosing what to reflect, the facilitator provides direction to the process.

Because effective reflective listening means suspending the urge to think about your response while the person is still speaking, and because you may have to think for a few seconds about how to respond, it is important to learn the art of the pause. Learn to accept and become comfortable with short silences in the group setting. Often clients will speak during times when you are gathering your thoughts in preparation for a reflective statement; welcome these comments, even if it means you miss out on a chance to reflect on what someone else has said. Remember that you can always direct the conversation back to something that was said earlier, especially if you have a meaningful reflective statement that you weren't able to share at the time.

Affirm: Once you have provided a reflective listening statement, clients likely will let you know whether you captured their meaning accurately or inaccurately. If you captured it accurately, you may want to affirm them for sharing. If they state that you did not quite capture their meaning, you will want to continue reflecting until you have captured their meaning accurately. Affirmations are most powerful when they are specific, individualized and timely. By affirming desirable behavior, you reinforce it and improve the likelihood the behavior will increase.

C) Talking Time and Tone of Voice

In motivational approaches like MI, facilitators should aim to speak approximately 30% or less of the time. Group members should therefore speak 70% or more of the time (Miller and Rollnick, 2012). By speaking the majority of the time, participants move into the role of active and expert individuals. Another benchmark to strive for is to keep each utterance (or uninterrupted time talking) to two minutes or less. After approximately two minutes, listeners tend to stop paying attention and zone out.

Pay attention to your body language and tone of voice throughout the program. They communicate much more than most people might guess. The appropriate tone for effective interventions is non-judgmental, non-confrontational, inquisitive, supportive, and directive. The overall intent is to provide a setting that allows for exploration of discrepancy between behaviors and goals without increasing defensiveness in the individual participants.

D) Traps and Pitfalls

When working with group participants, there are a number of "traps and pitfalls" that can prevent a facilitator from fully engaging in a motivational style. Here are a few of the most common traps into which facilitators can fall (Miller & Rollnick, 2002).

- 1. Question-Answer Trap: Setting the expectation that the facilitator will ask questions and the individual group members will then answer fosters passivity. You can fall into this trap inadvertently by asking too many specific closed-ended questions early in the process. Asking open-ended questions, letting the group members talk, and using reflective listening are several ways to avoid this trap.
- 2. Labeling Trap: Diagnostic and other labels represent a common obstacle to change. There is no persuasive reason to insist that your client identify with a certain label, e.g. admit that he is an alcoholic. Positive change is not dependent upon acceptance of a label, and it is therefore often best to avoid the topic of labels altogether.
- 3. Premature Focus Trap: When a facilitator persists in talking about his or her own perception of "the problem" and the group participant has different concerns, the facilitator risks losing touch with the individual member. The group member can become defensive and engage in a struggle to be understood. To avoid getting trapped, address the group member's concern, rather than your own assessment of the problem. Later on, the group member's concerns may lead back to your original assessment of the situation.
- 4. Taking Sides Trap: When you detect some information indicating the presence of a problem/challenge and begin to tell the group about how serious it is and what to do about it, you have taken sides. This may elicit oppositional arguments from group members who don't view the problem as being "that bad." As you argue your view, the individual(s) may defend the other side. In this situation you can literally talk the individual(s) out of changing. You will want to avoid taking sides.

- 5. Blaming Trap: Some participants show defensiveness by blaming others for their situation. It is useful to diffuse blaming by explaining that the placing of blame is not helpful. When using reflective listening and reframing, you might say, "Who is to blame is not as important as what your concerns are about the situation."
- 6. Expert Trap: When you give the impression that you have all the answers, you draw the group members into a passive role. The client is the expert about his/her situation, values, goals, concerns, and skills. In motivational style interactions, you seek collaboration and give group members the opportunity to explore and resolve ambivalence for themselves.

E) Roadblocks to Communication

The way we communicate and the words we use impact how our message is received. Some communication behaviors have hidden messages that are not likely to promote change and may damage relationships. These roadblocks to listening were grouped into categories by Thomas Gordon, the developer of the client-centered psychotherapy methods. Each of them tends to slow or stop change processes (Gordon, 1980).

1. Ordering, commanding, directing.

Example: "Show up for group and stay out trouble."

2. Warning, threatening.

Example: "You had better get your act together if you expect to succeed in this program."

3. Moralizing, preaching, giving "should" and "ought-to".

Example: "You should have learned from your past mistakes."

4. Advising, offering solutions or suggestions.

Example: "I think you need to say you're sorry and make amends."

5. Teaching, lecturing, giving logical arguments.

Example: "You say you don't like to be bullied and yet you're trying to intimidate everyone around you."

6. Judging, criticizing, disagreeing, blaming.

Example: "You are completely unreliable."

7. Name-calling, stereotyping, labeling.

Example: "I see this problem a lot among druggies."

8. Interpreting, analyzing, diagnosing.

Example: "Acting out like this is your way of trying to forget about all of the pain in your life."

9. Questioning, probing, interrogating, cross-examining.

Example: "Why did you wait so long to ask for assistance? Don't you remember me telling you to let me know if you needed help?"

10. Withdrawing, distracting, being sarcastic, humoring, diverting. Example: "Seems like you got up on the wrong side of the bed today."

Remember that you will be presenting social skills. The most powerful way to transfer such information is through modeling. If you model pro-social attitudes and behaviors in the presence of group members, those behaviors will be further reinforced.

Contingency Management—Setting up Expectations and Responding to Adherence or Non-Adherence

There is a long tradition of contingency management programming in efforts to extend days of abstinence, number of sessions attended, and progress on change plan goals (Carroll, et al, 2006, Higgins and Silverman, 1999). In addition, the Petry study (2006) demonstrated efficacy with lower cost incentives and a fishbowl method for reinforcers. Also important is the disapproval of anti-social and/or harmful behaviors. A contingency management system can be designed for the group that incorporates both reinforcement and disapproval strategies. For some users of this curriculum, this will be a group that you add to a continuum of intervention groups in order to address substance abuse needs. Here, it is likely that a general contingency management system exists that outlines program expectations and consequences when these expectations are either met (what reinforcers are in place) or not met (what sanctions are in place). Here, contingency management for Cognitive Behavioral Interventions for Substance Abuse should be similar to that of the other group interventions.

If, however, you are using this curriculum as a freestanding group in an outpatient or community supervision setting, then you may want to consider how behavior such as group attendance, timeliness to group sessions, completion of homework, and group participation will be handled. An example of the contingency management system is described below.

Before even exploring how these behaviors are managed, it is important to begin with setting clear group expectations. These expectations might include factors such as the following:

- Attend each session
- Be on time
- Come to group sober (outpatient settings)
- Be respectful to fellow members (i.e. refraining from side-talk or put downs, listening to member contributions, staying alert)
- Come to group prepared (with material and completed homework)
- Participate in practice activities (e.g. everyone engages in role plays)
- Hold group member contributions with confidentiality

Group expectations should be posted and quickly reviewed by participants at the beginning of each session, especially if the group is semi-open-ended. When these expectations are not followed, the program should have clear action steps. Effective use of authority and effective

disapproval should be part of the action steps and appropriate punishers should be applied as necessary. Appropriate punishers include loss of points, extra assignments, etc. In appropriate punishers include singing songs, wearing signs, and other demeaning techniques.

When anti-social behaviors occur regularly, facilitators do well to ask themselves, "Is this a construct of our therapeutic alliance or is something else happening with this individual?" Understanding the underlying motivations for the person's choices will assist facilitators in designing the most appropriate course of action. In any case, beginning with a brief conversation with the individual outside of the group format may assist facilitators in identifying the barrier to participant success. During such a conversation, using motivational interviewing can help ensure the conversation moves in a productive direction.

Behavior contracts are a tool that can be used for participants that engage in a repeated pattern of breaking group expectation(s), such as lack of participation. This document lays out a target behavior that the facilitator has identified and the negative consequence that will be imposed if that behavior is not met within a specific timeframe (along with what reinforcer will be earned if the behavior is met).

One sure way to encourage positive group behavior is to reinforce it. Verbal praise should be used at a high frequency during the group sessions. A point system is another way to systematically reinforce those participants who are following the group expectations. A tangible, social or group activity is typically redeemed for the points earned. For example, a participant may be awarded a \$5 gift card for so many points, or if the participant is in a residential setting, he may redeem an extra phone call or visit. The points also serve as a reminder for the facilitator to provide specific reinforcement to those participants who are meeting the program expectations. If a point system is used, it should be established during the first session or module of the group, or explained during the pre-treatment session if the group is open. Below is an example of a point system that could be instituted:

The point system should represent the expectations upon which the group has agreed. The points can be communicated to members in one of two ways. With the permission of the program and participants, a master list can be posted on the wall in the group meeting room. Another option is to make a small point card and give one to each of the group members. Whatever mechanism is used, it is important to give participants feedback of what points they earned that session. This is how behavior is most effectively shaped. A sample of a point system is provided below:

Master List:

On a poster board, write the names of each group member, followed by a chart with session dates.

First	Name	- 4- Jan		13- ' Jan				etc.
Participant	1			,	,			
Participant	2						·	
Participant	3				•			
Participant	4							
Participant	5							

Participant	6					
Participant	7					
Participant	8					
Participant	9					
Participant	10					

Point Card:

Point Card		
Attended & On Time	1	Arrived on time
		Completed (2), Partial points for partial
Practice Work	1-2	completion (1), Failed to complete (0)
Following Group Expectations	1	Followed group expectations
Participation	0-2	Excellent (2), Acceptable=(1), Minimal = (0)

Ultimately, it is up to the facilitator and the group members to agree upon exceptions and how they will be reflected within the group contingency management system. It is okay to amend your group contingency management system if issues or challenges arise. Participants tend to respond well to having expectations clearly laid out, and getting the immediate feedback and reinforcement that a point system provides.

Completion Criteria

It is also important to clearly outline criteria for successful completion of the curriculum. Successful completion should be measured objectively and consider acquisition of prosocial behaviors, attitudes, and beliefs. The point system can support this process by providing regular measures. To use the point system to guide completion, it may be helpful to set a requirement of a certain percentage of points required for successful completion (e.g. 90%).

Dealing with Challenging Group Dynamics

Group dynamics can be thought of as two separate forces occurring simultaneously. For one, there are one-on-one relationships between the individuals in the group, such as the relationship between a facilitator and a single group member. In addition to the one-on-one relationships, there is the personality of the group, which is experienced as a holistic and separate entity. Each group has its own unique characteristics. In order to facilitate an effective group, the facilitator should always be thinking about the various one-on-one relationships as well as the group as a whole. This can be a challenge. Below are some different types of group challenges and possible solutions to deal with each one.

Challenge: Domination by a Highly Verbal Group Member

Facilitators often try to control this person. "Excuse me, participant X, do you mind if I let someone else take a turn?" Or, even worse, "Excuse me, participant X, you're taking up a lot of the group's time." When one person is overparticipating, everyone else is under-participating.

Solution: Focus your efforts on the passive majority. Encourage them to participate more, for example, "Let's hear from someone who hasn't shared yet today." Trying to change the dominant person merely gives that person more attention.

Challenge: Goofing Around During a Discussion

It's tempting to try to "organize" people by asserting power. "Okay everybody, let's get refocused." This only tends to work when the problem is not very serious.

Solution: Transition to a more engaging approach or activity as soon as possible. Participants often become undisciplined because they are overloaded, worn out or bored. After a breather, they will be much better able to focus.

Challenge: Low Participation by the Entire Group

Low participation can lead a facilitator to hurry through modules, creating the impression that a lot of work is being done quickly. This leads to one of the worst errors a facilitator can make—to assume that silence means consent, and to do nothing to encourage more participation.

Solution: Switch from large-group open discussion to a different format that lowers the anxiety level or increases motivation for involvement. Offer group members some choices, such as, "We could split up into pairs or groups of three to talk about this topic. Which do you prefer?" Small group activities are very important and add to the learning process.

Challenge: Two People Locking Horns

You can waste a lot of time trying to "resolve a conflict" between two people who have no intention of reaching agreement. People often use one another as sparring partners to clarify their own ideas.

Solution: Reach out to other members and say, "Who else has an opinion on this issue?" or, "Let's step back for a minute—are there any other issues that need to be discussed?" Remember: do not focus your attention on the dominant minority, focus on the passive majority. In addition, you can use your reflective listening skills to focus on the ways in which the two participants agree. For example: "Let me see if I understand. On the one hand, participant X is saying ______. On the other hand, participant Y is saying ______, and yet, what I hear you both saying is ______. So even though you have different perspectives on some of these issues, in some ways you really agree."

Challenge: One or Two Silent Group Members

"Participant Z, you haven't talked much today. Is there anything you'd like to add?" This may work when a shy member has non-verbally indicated a wish to speak. But all too often, the quiet person feels put on the spot and withdraws further.

Solution: There are a variety of ways to address this issue. If the same group member is consistently not participating, you will want to request a brief conversation with them after group. It's important that this conversation not happen in front of other group members. The person may have valid personal reasons for not participating, such as social anxiety. Begin such conversations with something such as, "I noticed that you don't really participate in group even though that is one of the expectations that we all agreed to. Is there something I should know that would help me understand this?" Give the participant a chance to explain. You may want to request that the participant sit outside the circle until he or she decides to participate. If this solution is mutually agreeable, then inform the participant that you will continue to make eye contact and non-verbally include the participant in each session. If at any time they want to comment or join, they can decide to do so at that time. Make sure this conversation has a nonpunitive tone. You are making this request because sitting in the circle means participating in the group. Let the participant know that fairness is important to you, and you wouldn't want others to think that breaking the group expectations is okay. People are very focused on fairness, so this strategy usually garners respect. Another option is to shift to small group work. Small groups allow shy members to speak up without the pressure of talking in front of the entire group.

Challenge: Whispering and Side Jokes

Facilitators commonly ignore this behavior in the hope that it will go away. Sometimes it does, but frequently it gets worse.

Solution: With warmth and humor, make an appeal, "As you know, those who don't hear the joke often wonder if someone is laughing at them." If the problem persists, assume there is a reason. Has the topic become boring and stale? Do people need a break? Or maybe it's a good time to break into small groups for discussion.

Challenge: Lack of Topic Interest Leading to Low Participation

Act as though silence signifies agreement with what's been said. Ignore them and be thankful they're not making trouble.

Solution: Look for an opportunity to have a discussion on, "What's important to me about this topic?" Have people break into small groups to begin the discussion. This gives everyone time to explore their own stake in the outcome.

Challenge: Poor Follow-Through on Assignments

Give an ineffective pep talk. Ignore it. "We didn't really need that information anyway." Put most of the responsibility on one or two people.

Solution: Have people do assignments in teams. Build in a report-back process at a midpoint before the assignment is due. This gives anyone having trouble a chance to get help. Be sure to provide reinforcement for assignment completion.

Challenge: Failure to Start and End on Time

Wait for the arrival of all the "people who count." This obviously means starting late, but hey, what else can you do? When it's time to end, go overtime without asking. If anyone has to leave, they should tiptoe out.

Solution: Start when you say you're going to start. Waiting encourages lateness. If you must go overtime, ask permission from the group and identify any scheduling conflicts before proceeding. If going overtime is recurrent, improve your agenda planning.

Challenge: Quibbling about Trivial Procedures

Lecture the group about wasting time and "spinning our wheels." Space out, doodle and think to yourself, "It's their fault we're not getting anything done."

Solution: Have the group step back from the content of the issue and talk about the process. Ask the group, "What is really going on here?"

Challenge: Someone Becomes Loud and Repetitive

Tell the person to calm down, that there's no need to get excited. Or confront the person during a break. Then, when the meeting resumes, raise your eyebrows or shake your head whenever she or he misbehaves.

Solution: People repeat themselves because they don't feel heard. Summarize the person's point of view until she or he feels understood. Encourage participants to state the views of group members whose views are different from their own.

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Challenge: Someone Discovers a Completely New Problem/Issue

Try to come up with reasons why the group would not need to focus on that issue. Pretend not to hear the person's comments.

Solution: This may be what you've been waiting for—the doorway into a new way of thinking about the whole situation. Listen to that person and give him or her affirmations for the insight. If you need more time to think about a solution, tell the group you will revisit the issue next time. Be sure to abide by your word. It will engender trust.

Finally, when dealing with group dynamics it's important to remember that each group has its own style and characteristics that represent a union of all the individuals within the group and how they interact. All groups are different, just as all individuals are unique. By recognizing such diversity, facilitators can withhold judgment and embrace their group's individual style.

Substance Abuse Specific Considerations

Cognitive Behavioral Interventions for Substance Abuse is designed to target substance abuse. This curriculum is appropriate to be used with offenders that do have a substance use disorder. The National Institute on Drug Abuse (NIDA) has provided the following chart to guide the intervention approaches used for drug abusing offenders:

	Interventions for Drug A	busing Offenders (2006)		
Not Effective Effective		Promising	Research Needed	
Boot Camp	Residential Substance Abuse Treatment	Drug Courts	Reentry	
Intensive Supervision	Cognitive Behavioral	Break the Cycle	Serious Violent Offender Reentry	
Generic Case Management	Treatment	Diversion to Treatment	Initiative (SVORI)	
_	Contingency Management	Moral Reasoning	Strength-Based Case Management	
	Medications	Motivational Interviewing		

The use of a cognitive behavioral approach is highly effective with both criminal behavior and substance abuse, making it the ideal choice for this population. There is clear evidence that those with substance dependence have a brain disorder. As such, it is important that providers