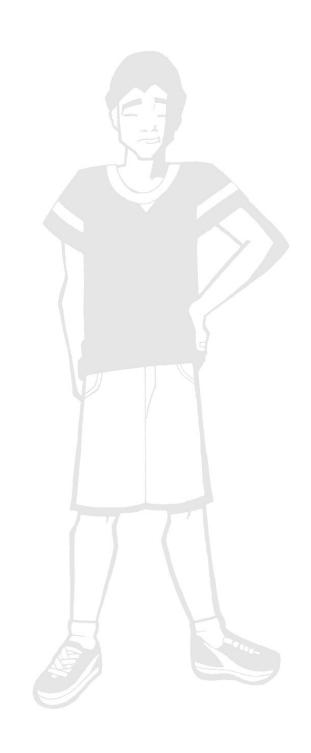


Chapter Five:

Making a Commitment to Change

GOALS OF THIS CHAPTER

- · Begin moving from Phase I to Phase II
- Describe our targets for change
- Think about how far along we are in the change process
- · What do we want from here on?



MIKE'S STORY

I've thought about changing. I really have. I started drinking when I was young, I can't even remember when. I never really thought my drinking was a problem, or something that needed to be changed. But then one night, I was at a party with some friends. We had all ditched school to start drinking early, and by 9 o'clock we were all hammered.



I didn't want to drink anymore. My mom was actually kind of helpful. It was really cool to think that other people were willing to share and help me if I asked.

I had never felt sicker than I had the next morning. As I was sitting in the bathroom, puking my guts out, I started wondering what had happened, how I had gotten home, where the hell my car was and why my fist was all bruised and bloody.



I called the friend who I thought had gotten me home. I guess I had gotten a little too wild at the party, making a fool of myself, and as I was walking past the garage of the house, I guess I punched it. A cop had stopped us and I had a court date for MUI and public intoxication.



But I didn't think anything of it. So I kept drinking. And it kept happening. Almost every weekend was a blur or some non-existent action of my body.



My girlfriend broke up with me. She said she couldn't be with a guy who drank so much and made an ass out of himself and her. My friends avoided me.



So I think I want to stop drinking. In fact, I know I want to stop drinking. Besides, pretty soon, they're going to put me on probation, then I'll have to take tests every couple of days. I don't get the warm and numb feelings anymore, and



SESSION 10: DEVELOPING 400K PLAN FOR CHANCE -- PSC

Objectives

- · Review Chapter 4: Backsliding to Drugs and Crime
- · Discuss the stages of change
- · Discuss which stages of change you are in
- · Learn the tools for changing your thoughts and actions
- · Develop your Self-Portrait and Plan for Change

Mike's Story

I think I want to change. In fact, I know I want to change. Drinking just isn't fun anymore. I drink all day long, even at school because I bring in a pint and sip on it between classes and during lunch. My girlfriend broke up with me. I guess during my blackout periods I make a real ass out of her and myself. My friends don't like drinking with me anymore; I think they are embarrassed to be around me when I drink.

When it got really bad I decided to sit and think about what I get from alcohol, and why I drink so much. I don't know why, but the urge to drink until I can't drink anymore is really strong. My mom has been a lot of help, though. I guess she used to drink a lot, and now she's cut way back. I even asked my ex and my friends about what I do when I drink and how it makes them feel. I never realized there were so many people who were willing to help me.

Relanse/Recidivism: staying clean

Last session we spent some time talking about the *triggers of relapse and recidivism*. To review, a *relapse* is when we participate in the *thinking and actions* that lead to substance reuse. *Recidivism* is the *thoughts and actions* that lead to returning to criminal conduct. Remember, *just the thought itself* is considered part of the process of relapse/recidivism.

We talked about how triggers, usually high-risk situations and HR thinking, can result in urges and cravings to participate in destructive patterns of behavior. These triggers can be anything from *conflict and stress*—or *even good feelings* (like wanting to celebrate)—to being around *old friends and old situations* where we used to participate in the action we are now trying to avoid. Although it may not always be possible to stay away from HR situations, we do have *control over our thoughts*, and that in itself can help prevent relapse/recidivism.

Activity: Taking Charge Of Cravings And Urges

Break into groups of two or three and discuss possible **relapse/recidivism situations** that you have faced in the last month. Take some time to discuss what happened and how it may have been different **depending on your thoughts**. For example, someone may have offered you a drug or suggested doing a crime. The craving was to get high, to get money, to get even... or whatever, but your thought was, "I am already in trouble—been there, done that—and I really want my freedom." Because you have **power over your thoughts**, you resisted the drug or criminal activity and controlled yourself through the craving and urge. With your partner/group, **develop a skit** with the relapse/recidivism situation that you think shows the process the best.

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After performing the skit, discuss in the large group about what was done right in the situation and what may have been done differently to have a better outcome.

RECOGNIZING YOUR STAGE OF CHANGE

In the first session, we discussed the three phases of this program: (*I—Challenge: Deciding What to Change; II—Commitment: Using Tools for Change; and III—Ownership: Calling the Shots for Change);* each of which is related to the stages that people experience when deciding to change a negative habit or destructive pattern of behavior. Now it's time to look at where you are in the process of changing important areas of your life. We will complete a questionnaire to clarify where we stand on changing *AOD abuse and criminal activities.* Remember, you can be at different stages of change for different problem areas. For example, you may be 100% ready to stop criminal activity, but not at all ready to quit smoking cigarettes. We shall now review the stages of change.

WHAT—Challenge: Deciding What to Change

This is the phase where we start thinking about change and looking at ourselves to see where and what changes need to be made. In this phase you are open to getting information about yourself and your problems. The early phase of this stage is about building self-awareness, while the latter part is about taking greater risks in talking about yourself and your problems to others. You have met this challenge when you commit to continued treatment with the desire to learn how to be free of substance use and crime. The basic ideas are thinking, self-awareness, sharing about you, and being willing to commit yourself to further help.

HOW—Commitment: Using Tools for Change

You have made the commitment to work on improving the quality of your life, and are now open to talking about your problems and what changes need to be made. You are now making a *genuine effort* to change your *thoughts, attitudes, and beliefs*, and you have been able to go awhile without using drugs or getting into trouble. You are now involved in *learning and using the skills of thinking and acting* to keep yourself away from using substances and participating in criminal activities. It is in this stage when you begin to assert your *control* and *freedom* over the thoughts and actions that lead to problems.

NOW—Ownership: Calling the Shots for Change

When you reach this stage, you are now making changes because *you want* to and *not* because "they" (the system, parents, or others) want you to. You feel strong about your distance from substances and criminal behavior, and you have *replaced your negative thinking* with positive alternatives. The skills to control your thinking have become an important part of your everyday life. You can recognize when you are on the *road to relapse or re-offending*, but are able to stop the RR progression at the thinking part. You are here because you want to be.

Activity: Mike's Desire To Change

When looking at Mike's story, do you think he wants to change? Why? Is he ready for change? Do you think Mike will be successful in his effort to quit drinking? What **stage of change** is Mike currently in? What are some of the **specific signs** that Mike is ready to change his pattern of drinking? What things can Mike do that will help him to move forward in his effort to change?

SESSION 10: DEVELOPING YOUR PLAN FOR CHANGE -- PFC

THE MOMENT OF DECISION

You are now at the point where you have made a very positive decision—to continue on the road to change. You have learned and worked hard and are now ready to become committed to the action phase of treatment—*Using Tools for Change*.

How do you know if you are ready for change? That is a big question that we all ask ourselves, and we are the only ones who really know the answers. Some of us may still be here mostly because we have to be. That is fine, just be honest about how you feel concerning change. Here are a few signs that may show you that you are ready for change.

- You are open to people telling you (giving you feedback) about your drug use and criminal behaviors.
- You see that you have problems in your behavior and substance use.
- · You talk about what you want to change, and often hear yourself say that you can change.

Change *does not happen all at once* nor does it happen easily. There will be times that you will feel that it's not worth it, or it's just too hard to change. But that is what you will be learning in *Phase II*, the *skills to deal with everyday situations* so that you aren't stressed or worried about what is going to happen and have confidence in dealing with your HR triggers in positive and healthy ways. Of course the first step in targeting and learning how to change is to focus on your thinking.

Activity: Where Am I In The Change Process?

Fill out *Worksheets 11 and 12, Self-Rating on Stages of Change*, to get some ideas on where you stand in the change process for AOD abuse and criminal activities.

A very important indication of your readiness to change is *successful completion* of your *Self-Portrait* and *Plan for Change*, which are to be finished as part of this session.

Activity: Looking At Yourself And Planning For Change

Fill out Worksheet 13, List of Strengths and Problems, on your own and then create your Self-Portrait (Worksheet 14) and Plan for Change (PFC - Worksheet 15) together with your counselor. The PFC will take some time and careful consideration, as it will involve specific problems, needed changes in thoughts and actions, and specific treatment activities that will helpful to you in changing the problem. Try to be complete, and identify as many problems as you want for each main area. Your counselor will give you examples on how to complete the PFC, which will set important guidelines for the next phases of your treatment. Your PFC will change as you discover more information about yourself and will help you to set your goals and change targets for Phases II and III of your program.

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CHALLENCE TO		CHANG	93					
KEY ELEMENTS IN STAGE	Low		Mod	Moderate		ᄪ	High	
Given thought to changing Want information about myself Level of self-awareness Commitment to more treatment		N N N N	m m m m	4 4 4 4	ហហហហ	و و و و	~ ~ ~ ~	8 8 8 8
USING TOOKS A	GOR	步	3	Q)				
KEY ELEMENTS IN STAGE	Low		Mod	Moderate		<u>T</u> 	High	
Pledge to change Open to self-disclosure Efforts to change attitudes Efforts to change thoughts Use relapse prevention skills AOD thought-free for long period Corrected relapse thinking Leamed skills to avoid AOD thought	0000000	N N N N N N N N		4444444	ហហហហហហហហ	م م م م م م م م	~~~~~~	
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KEY ELEMENTS IN STAGE	Low		Mod	Moderate		Ξ	High	
In program because want to be No desire for AOD involvement Long time free of AOD thinking Replace need for AOD use		ע ע ע ע	m m m m	4 4 4 4	0000	0000	<u> </u>	0 0 0 0

Worksheet 12

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Self-Agtine on States of Chance flog criminal thinking & Criminal Conduct

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KEY ELEMENTS IN STAGE	Low			Moderate	rate		壹	High	
Given thought to changing		_	M	Ш	4	Ŋ	9	_	8
Want information about myself		_	M	Ш	4	Ŋ	9	7	8
Level of self-awareness		_	M	М	4	2	9	_	8
Commitment to more treatment		_	Ŋ	m	4	Г	9	^	00/

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KEY ELEMENTS IN STAGE	Low			Moderate	irate		ヹ	면	
Pledge to change Open to self-disclosure	00		\sim	пп	4 4	ப ப	ں ں	<u> </u>	@ @
Efforts to change attitudes		_	N	М	4	Ŋ	О	7	8
Efforts to change thoughts		_	N	М	4	Ŋ	О	7	8
Use relapse prevention skills		_	N	М	4	Ŋ	О	7	00
CC thought-free for long period	_	_	M	М	4	Ŋ	О	7	8
Corrected relapse thinking		_	U	М	4	Ŋ	О	7	ω
Learned skills to avoid CC thought		_	N	М	4	Ŋ	9	7	00/

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YOOK					
CALLING	KEY ELEMENTS IN STAGE	In program because want to be	No desire for CC involvement	Long time free of CC thinking	Replace need for CC use

Worksheet 13

LIST OF STRENSTIES SO PROGLEMS TO WORK ON

List problems that you need to work on for each of the focus areas.

-		
	A. Family issues and problems: 1.	
	2	
	3	
	4	
	B. Emotional and psychological problems:	
	1.	
	2	
	3	
	4	
	C. Involvement with negative and deviant peers:	
	1.	
	2	
	3	
	4	
	D. School achievement and adjustment problems:	
	1.	
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E. Problems with criminal thinking and acting: 1
Z
3.
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F. Problems with alcohol and other drug use and abuse:
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4
G. Community living environment and situations:
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H. Thinking and feeling patterns and errors:
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I. Physical and	d medical health problems:
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J. My strengtl	hs and strong points:
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Worksheet 14

SPIP-POSTRAT 1. Family and Living Environment

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		1			0)	Pro				ern		
	Area of Assessment			ow_			Mod					gh
I _₽ I	Degree Family Disruption Lack of Family Closeness	0	1 1	2	3	4 4	5 5	6 6	7 7	8	9	10 10
Family	Lack of Family Support		1	5	3	4	5	6	7	8	9	10
#	Parents Have Problems	0	1	2	3	4	5	6	7	8	9	~ ~ II
Т	2. Emotional and Psychological Proble	2M5										
	Area of Assessment		Lo	DW		ľ	Moc	lera	ite		Hi	igh
	Anxiety and Fears	0	1	2	3	4	5	6	7	8	9	10
Emotional	Depression		1	2	3	4	5	6	7	8	9	10
품	Impulsive Acting		1	2	3	4	5	6	7	8	9	10
<u>Ĕ</u>	Angry Feelings and Acting		1	2	3	4	5	6	7	8	9	10
لتا	Concern About Self-Harm	0	1	2	3	4	5	6	7	8	9	10\
	3. School Achievement and Adjustme	nt P	rob	olem	15							
Щ	Area of Assessment		Lo	ow		ľ	Moc	lera	ite		Hi	igh
I _ I	Conduct Problems		1	2	3	4	5	6	7	8	9	10
School	Poor and Failing Grades		1	2	3	4	5	6	7	8	9	10
	Negative School Attitude		1	2	3	4	5	6	7	8	9	10
	Skip Classes/Dropped Out	0	1	2	3	4	5	6	7	8	9	10
	4. Relationship with Peers											
Щ	Area of Assessment		La)W		ľ	Mod	lera	ite		Hi	gh
	Negative Peers	0	1	2	3	4	5	6	7	8	9	10
Peers	No Close Friends	0	1	2	3	4	5	6	7	8	9	10
🖁	Criminal Associates		1	2	3	4	5	6	7	8	9	10
	Drug Associates	0	1	2	3	4	5	6	7	8	9	10
	5. Criminal and Antisocial Thinking an	d Co	ond	uct								
	Area of Assessment		Lo)W		Ŋ	Mod	lera	ite		Hi	gh
	Property Offenses		1	2	3	4	5	6	7	8	9	10
법	Person Offenses	0	1	2	3	4	5	6	7	8	9	10
를	Violent Crimes and Conduct	0	1	2	3	4	5	6	, 7	8	9	10
Conduct	Sex Offender Conduct	0	1	2	3		5		7	8	9	10
	AOD Impaired Driving		1	2	3	4	5	6	7	8	9	10
											111111111111111111111111111111111111111	



5. Criminal and Antisocial Thinking and Conduct, Continued

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	Area of Assessment			DW			Moc					igh
Criminal Thinking	Antisocial Peers & Models Impulsive Thinking/Acting Cops Are Out To Get Me Planning Crimes Blame Others For Problems Take Victim Stance Lying And Not Telling Truth Angry/Aggressive Attitude Rebellious/Anti-Authority Seeking Out A Victim Want Revenge Or To Get Back They Deserve It Lack Of Empathy For Others Reckless Thinking		1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		4 4 4 4 4 4 4 4 4 4	5555555555555	666666666666	7 7 7 7 7 7 7 7 7 7	8 8 8 8 8 8 8 8 8 8 8 8	9999999999999	10 10 10 10 10 10 10 10 10 10 10
	6. Alcohol and Other Drug Assessmen Area of Assessment	t	Lr	ow		ŗ	Moc	lera	ite		Н	igh
Drug Choice	Alcohol Involvement Marijuana Involvement Cocaine Involvement Amphetamine Involvement Other Drug Involvement Poly Drug User	0	1 1 1 1 1	2 2 2 2	3 3 3 3 3 3 3	4 4 4 4 4	5 5 5 5 5	6 6 6 6 6	7 7 7 7 7	8 8 8 8	9 9 9 9 9	10 10 10 10 10
	Area of Assessment		Lo)W		ŗ	Moc	lera	ite		Н	igh
Style	With Friends or at Parties Sustained & Continuous Compulsive & Obsessive	0	1 1 1	2	3 3	4 4 4	5 5 5	6 6 6	7 7 7	8 8 8	9 9	10 10 10
	Area of Assessment		Lo)W		Ŋ	Moc	lera	ite		Н	igh
Benefits	Cope with Social Discomfort Cope with Emotional Discomfort Cope with Relationships Cope with Physical Distress		1 1 1	2 2 2	3 3 3	4 4 4 4	5 5 5 5	6 6 6	7 7 7 7	8 8 8	9 9 9	10 10 10

6. Alcohol and Other Drug Assessment, Continued

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	Area of Assessment		Lc)W		ľ	Moc	lera	te		Hi	igh
Results	Behavioral Loss Of Control Emotional Disruption Physical Disruption Social Irresponsibility Overall Disruption	0	1 1 1 1	2 2 2 2	3 3 3 3	4 4 4 4	5 5 5 5	6 6 6 6	7 7 7 7	8 8 8 8	9 9 9 9	10 10 10 10
	Area of Assessment		Lc)W		Ŋ	Mod	lera	te		Hi	igh
Ready	AOD Problem Awareness Treatment Receptiveness Motivation to Change	0	1 1 1	2 2	3 3	4 4 4	5 5 5	6 6 6	7 7 7	8 8 8	9 9	10 10 10
	7. Assessment of Thinking and Feeling	j Pa	tte	rns								
	Area of Assessment		Lo)W		1	Moc	lera	ite		Hi	igh
Thinking and Feelings	Put People Down Narrow-Restricted Thinking Personalizing Responses Seeing Things My Way Self-Defeating Thinking Can't Trust Others Self-Centered Thinking Don't Need Anyone's Help Feel Better Than Others Feel Screwed Over Mountains Out Of Molehills Think In Black and White Terms		1 1 1 1 1 1 1 1 1 1 1 1	222222222	3 3 3 3 3 3 3 3 3 3	4 4 4 4 4 4 4 4	5 5 5 5 5 5 5 5 5 5 5	6666666666	7 7 7 7 7 7 7 7 7	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	9999999999	10 10 10 10 10 10 10 10 10 10
	8. Other Areas Area of Assessment		1.	ow.			Moc	lor-	to		ш	igh.
Other	Health/Physical Problems Job and Employment Problems Gangs In My Neighborhood	0	1 1 1	2 2 2 3 W	3 3	4 4 4	5 5	6 6 6	7 7 7 7	8 8	9 9	10 10 10



9. Motivation and Readiness for Treatment

		Level of Problem Severity											
	Rate Each Stage Separately		Low		Moderate				High				
Readiness	Awareness of AOD/CC Problem Acknowledgement of Need for Help Willingness to Accept Help Other's Perception of Need Other's Perception of Need Has Taken Action to Change	0	1 1 1 1 1	2 2 2 2	3 3 3 3 3	4 4 4 4 4	5 5 5 5 5	6 6 6 6 6	7 7 7 7 7	8 8 8 8	9 9 9 9 9	10 10 10 10 10	
	10. Stage of Change												
	Rate Each Stage Separately	Low				Moderate					High		
Stage	Challenge to Change Using Tools for Change Calling Your Own Shots	0 0 0	1 1 1	2 2 2	3 3 3	4 4 4	5 5 5	6 6 6	7 7 7	8 8 8	9 9 9	10 10 10	
	11. Strengths and Resiliency												
	Strength Areas	Low			Moderate			ŀ	High				
Thinking and Feelings	Relationship With Parents Relationship With Family Emotional and Mental Health Positive Self Thoughts Control Of Anger Have Successful Friends School Adjustment Follow Rules/Regulations Obey Laws Of The Community Respect Rights Of Others Physical/Medical Health Able To Not Use Alcohol Able To Not Use Other Drugs		1 1 1 1 1 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	5 5 5 5 5 5 5 5 5 5	6666666666	7 7 7 7 7 7 7 7 7	8 8 8 8 8 8 8 8 8	99999999999	10 10 10 10 10 10 10 10 10	

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TOOLS LOR CHANCE				
CHANCES NEEDED IN				
problem grea & vectority	1. Family & Parent Relationships	2. Emotional & Relationship Problems	3. School Achievement & Adjustment	4. Criminal Thinking & Conduct

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Ē	6. Thinking & Feeling Patterns	7. Modifications or Other Areas For Change

SESSION 10° DEVELOPING YOUR PLAN FOR CHANGE -- PFC

After you and your counselor have agreed on your *Self-Portrait (Worksheet 14)* and *Plan for Change (Worksheet 15)*, you will *share this information* with the group. When you accomplish this, it means that you have successfully completed *Phase I - Challenge to Change*. You have taken on the challenge of identifying what areas of your life are *specific targets for change* and how you will work on self-improvement for the remainder of this program. You are soon ready to begin *Phase II - Using Tools of Change*—Congratulations!

WAYS TO CHANGE

We have now completed the first steps in change by becoming aware of **WHAT** we would like to change and the **THINKING AND ACTION HABITS** that cause our problems. The most *important person* we talk to is *ourselves*, so now it's time to seriously begin to learn how to use the tools for changing the thoughts that lead us into problematic feelings and actions. These will become your *target thoughts* and *target actions*. These are thoughts and actions that you recognize as causing problems in your behavior, and that *you* want to change. Below are the basic steps for changing target thoughts and behaviors.

- Pick the thoughts that lead to feelings and behaviors that are problematic.
- **Describe attitudes** and beliefs behind the thought.
- Set goals on how you would like to think or act. To set a goal we have to stop and think what we want the new behavior to be. You may feel uncomfortable about changing, and that's okay, but once you have set a goal, live up to it.
- **Pick one or more action methods** you will use to change the thought or behavior. We will cover these next.
- Change the target behavior—if you really want to change, you will.

ACTION METHODS FOR CHANGING NEGATIVE THOUGHTS AND BEHAVIORS

When we talk to ourselves, we are really teaching ourselves new ways to do things. Here are four ways to teach ourselves to change.

Thought stopping

If we have an automatic thought, for example "I don't trust him," then we are able to *stop this thought* by thinking "I can be open to hear what he or she is trying to say ... I am not going to think this way." We may still not completely trust the other person, but we have interrupted our thought and made ourselves think something different.

Their Position

By taking *responsibility for our actions*, and then placing ourselves in the *other person's position*, we can develop respect for the other person and a sense of control over our lives.

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Positive thought

When you begin thinking negatively, replace the thought with something positive. Instead of thinking "I need that jacket," think instead, "I'm ready to graduate this phase of my treatment." If you train yourself to think positively, then your behavior begins to reflect that.

Arguing with yourself

Every time you have a thought that you know will lead you into trouble, argue with yourself. By saying "That's stupid" or "That's not true," you can stop yourself from thinking and then acting on negative thoughts by showing yourself how the negative thought actually doesn't make sense. For example, the thought, "I would like to get high and feel great" can be countered by: "Taking this drug will only make me feel worse in the long run."

Activity: Changing Together

Your counselor will hang some paper on a wall where everyone can see it. Then, as a group, think of one **thinking error** from **Worksheet 3** that is common to the group. Write down the thought on the paper and **underline the common thinking error**. Underneath the thought, separate the paper in thirds, and on one side write down the **attitudes and beliefs** that are behind the thought or behavior that is going to be changed. On the other side of the paper write down a couple of goals and things that you would like to happen or what you would like to think. Then in the middle third, write down a **thinking or action method** that would be helpful in changing the thought or behavior. Use the example below as a model.

Thinking Error

I WANT WHAT I WANT RIGHT NOW

Attitudes and Beliefs	Methods of Change	Goals
"I'm entitled to take things that aren't mine because	Their Position Arguing with yourself	Freedom
I've been abused."	ringuing with yoursen	"I am trustworthy"

Change is promoted by sharing our story (self-disclosure) and listening to feedback

Now that we have reviewed the *stages of change*, decided we *want to change*, and began to cover *general ways* that we can change behavior and thought, let's take a look at how being in this group helps us to grow and change.

We have discussed how *talking* about our thoughts and feelings and the *feedback* we get from others are important parts of learning about ourselves, while they also help us to build *trust*, *friendship and support*. Yet there are many parts of our lives that we have still not shared. The part of our lives that *we know* about, but that *others don't* is called our *Hidden Area*. The part that *others see*, but *we don't* is called our *Blind Area*. The part that *we don't know about ourselves* and *others don't know* either is called the *Unknown Area*. Finally there are things that *we see and know* and that others *also see and know*—this is called our *Free or Open Area*.

The Johari Window in *Figure 14*, gives us a picture of what these areas look like. It is our goal to make the *Free Area larger* and shrink the *Blind and Hidden Areas*.

UNKNOWN AREA 6344 anns LEGRAPHICE SECOLT MASELA SO SHAPPING WITH OTHERS: THE JOHAPPI WINDOW **Understand About Me Asks For Or Receives Feedback** What I Don't Know The Subconscious Unconscious What I Know About What Others Know What I Know About Me But Haven't Shared Me 1285 ARSA **YAWK** 5elf Disclosure 🔥

SECCTION 10° DEVELOPTING YOUR PLAN FOR CHANGE -- PFC

Activity: Building Trust And Freedom By Sharing And Receiving Feedback

On another piece of paper, next to the one used previously, draw a *Johari Window*. As a group write in some of the things that you have **shared with each other** in the *Free Area*. In the *Hidden Area*, think of some general things that people **tend to hide** from other people, and in the *Blind Area* write some general things that **only other people** may see. Then as a group think of ways to be able to move the things from the *Hidden and Blind* areas to the *Free Area* of the window. What about parts of your mind that **nobody is aware of** in the *Unknown Area?* Are the methods you are using realistic for your life? Are there certain things that you have hidden in the past that you would like to be in your *Free Area?*

Putting It Together

- Mike wanted to change, but at first he wasn't sure. What stage of change do you think Mike is in? Do you think he is ready to change?
- The only person who can decide to change is you. What stages of change are you currently in? Which stage would you like to be in? For AOD problems? For criminal activities?
- How have you changed since you started the program? How would you like to change by the time you are done?
- How has participation in the group helped you to grow and change?
- What are your views about entering into the next phase of treatment?

MIKE'S STORY

I've thought about changing. I really have. But sometimes it so hard to think about changing when all I want to do is have fun.

I started drinking when I was young. I can't even remember when. I'm sure I was drinking even before my first memory of drinking, but like I said, I can't remember. So everything was fine for me, I guess. I never really thought my drinking was a problem or something that needed to be changed. I liked how it made me feel, ya know? All warm and numb without a care in the world.

I still didn't think much about it when I started taking pints to school. I would steal them from my mom's liquor cabinet, or get my friend's cousin to get it for me. I kept it in my pocket, and since I preferred schnapps, I didn't really have to worry about the smell ratting me out.

But then one night I was at a party with some friends. We all had ditched school to start drinking early, and by 9 o'clock we were all hammered. All I remember was going to this one girl's house and getting myself a beer from the tap. The next thing I knew, I was stumbling along the sidewalk with one of my friends trying to hold me up. I sat down on the curb and then all the sudden I was home. I had never felt sicker than I had the next morning. As I was sitting in the bathroom, puking my guts out, I started wondering what had happened, how I had gotten home, where the hell my car was, and why my fist was all bruised and bloody. That was just the beginning of my nightmare.

When I called the friend who I thought had gotten me home, I didn't like what he had to tell me. My car was fine, I guess. Someone had driven it to my house while I was stumbling home, and it should be out on the curb. But I guess I had gotten a little too wild at the party, throwing things around and making a fool of myself. It took all my friends to drag me out of the party, which I insisted on not leaving because I wasn't done drinking, and as I was walking past the garage of the house I guess I punched it with all my strength. Mystery of the bloody knuckles solved.

Of course I couldn't remember any of this. But when he told me that a cop had stopped us and that I had a court date for a MUI and public intoxication, I thought he was just messing with me. I thought I would have remembered something like that. Until I reached into my pocket and pulled out a ticket. What a freaking night.

But I didn't think anything of it. I thought maybe I had some bad alcohol or because I hadn't eaten anything or something. So I kept drinking. And it kept happening. I needed to drink more in order to feel buzzed, yet I was still blacking out. Almost every weekend was a blur or some nonexistent action of my body with my mind gone.

My girlfriend broke up with me. She said she couldn't be with a guy who drank so much and made an ass out of himself and her. My friends started avoiding me. I would ask them if they wanted to do something, and they would I ask if I was going to drink. I usually said yes and they usually said no. And the truth was I didn't want to drink anymore. I couldn't remember if I had any fun, or if I met some cool people, or really anything.

I started talking to my friends and my ex about the things I did when I was drinking, just to get an idea of how I looked to other people. Then I spent a lot of time in my room, by myself, thinking about why I liked drinking so much and why I felt the need to drink to the point of blacking out. My mom was actually kind of helpful. I guess she used to drink a lot, that's probably where I got my first drink, but she had cut way back. It was really cool to think that other people were willing to share and help me if I asked.

So I think I want to stop drinking. In fact I know I want to stop drinking. Besides, pretty soon here they're going to put me on probation, and then I'll have to take tests every couple of days, and then I won't be able to drink. It's time anyway. I don't get the warm and numb feelings anymore, and it's just not fun. I don't even know why I started drinking in the first place, even if I could remember my first drink.

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