

Breaking Isolation, Benefits of Laughter & Humor, and Learning to Have Fun

EVIDENCE BASED PRACTICES (EBP): Integrated System of Care; Universal Dual Diagnosis Capabilities; Principles of Empathy and Hope; Motivational Interviewing Approach; Stages of Change Model Design; Strength Based; Skill Building; Solution Focused; Neurochemistry Based Disorders of the Brain; Symptom Identification; Symptom Management; EBP Curriculum Topics, i.e. Nutrition, Stress Management, Cognitive Behavioral, and more...

Consistency in the Group Setting

The importance of *consistency* in a treatment setting can't be overstated. This is especially true when people are placed in vulnerable situations. *Inconsistency* can, at best, increase uncertainty and insecurity for the person receiving services. At worst, unpredictability can create a sense of helplessness while simultaneously decreasing a person's development of self-reliance. In fact, all human beings benefit from a dependable approach in the treatment of chronic disorders. When a person learns they can rely on consistency, they are less stressed and more relaxed. Consistency in the group setting includes the group structure, psychoeducational material, and the approach.

Each agency or facility will have different requirements – such as group receipts or paperwork – however, consistency can still include a structure similar to the following:

1. Group members pick up: a. Clip Board, b. Paper, and c. Pencil/Pen as they enter the room.
2. Group facilitator picks up the group receipts from each person in the group, and/or the group facilitator passes out the sign-in sheet for the group members to sign.
3. Group facilitator provides a Positive Group Beginning, Consistent Psychoeducational Material, Consistent Approach, and a Positive Group Closure.

Psychoeducational Groups and Crisis Event Processing (when requested)

Notes to Facilitator(s):

1. *THE BASICS, Second Edition* meets the definitions and goals of Psychoeducational Groups, Skill Building Groups, and Cognitive Behavioral Groups.
2. Group participants who have become accustomed to Interpersonal Processing Groups – as well as staff who have facilitated them – may find it a challenge to now facilitate Psychoeducational Groups.
3. Likewise, facilitators who may have followed a more lecture-style education presentation, may find it challenging to now devote at least 1/3rd of group time to specific topic discussions and interactions.
4. Both types of groups (Interpersonal Processing Groups and Psychoeducational Groups) are extremely important, yet each has different goals and structure.
5. The structure of Psychoeducational Groups, Skill Building Groups, and/or Cognitive-Behavioral Groups in no way means that there will not be *interaction* – far from it. It just means that the interactions, discussions, and exercises will be about the topic(s) of each group.
6. Facilitators *may* – or not – still want to allow time in each group for the group member(s) to discuss a crisis that may have occurred since the last group.
7. We do know, of course, that *every* person in group is typically experiencing many challenges each and every week; however, most of these incidents are often best resolved in ways other than group time where the event does not pertain to every group member.
8. Suggested responses to a challenge, problem, or crisis can also include suggesting the person contact their primary care provider; schedule a 1:1 appointment; reschedule their next 1:1 to an earlier time; or, meet with the facilitator after group to explore options and develop a plan.
9. A facilitator would, of course, not “*grade*” an event as being worthy or not for group time. If a person requests individual time in the group, then that would be accepted as valid and time allotted at the end of the group.
10. Over time, the group begins to understand the differences between a situation, a challenge, a problem, or a crisis and can make decisions to utilize group time or continue with the current psychoeducational topic.

Prepare Professionals

Suggestions for professionals to prepare themselves for group typically includes:

1. Review all content material, appendices, and/or handouts *prior* to group to avoid a lecturing style.
2. Decide beforehand the *key points* to be covered in each group to produce flexibility for group responses, discussions, or questions.
3. Gain an overall understanding of the content so summarizing is possible in order to create an interactive facilitation style.
4. Determine the group structure to achieve the essential balance between education and discussions.
5. Check group room to be sure there are enough clipboards, pencils or pens, and markers or chalk for the board.
6. Make enough copies of any handouts *before* group.
7. Write any group content on the board *prior* to the beginning of group whenever possible.

Master Guide & Master Tips to Professionals

Note: *The Master Guide* (located at the beginning of Volume I & II) and the *Master Tips to Professionals* (located at the back of Volume I) have many topics to assist in the group process like Master Tip #39: Suggestions For Managing Handouts For Groups (pages Master Tips 64-67). Other tips include:

1. Master Guide: Interactive Style (pages Master Guide 10-11)
2. Master Tip #1: Suggestions for Beginning Group (pages Master Tips 1-4)
3. Master Tip #3: Empathetic Treatment Approach (pages Master Tips 7-9)
4. Master Tip #4: Promoting Hope (page Master Tips 9)
5. Master Tip #5: Maintaining a Consistent, Nonjudgmental, and Positive Attitude (pages Master Tips 10-13)
6. Master Tip #12: Responding to Requests for Copies of APPENDICES (pages Master Tips 27-29)
7. Master Tip #13: Depth of Psychoeducational Content (pages Master Tips 29-30)
8. Master Tip #14: Group Closure Suggestions (pages Master Tips 30-31)
9. Master Tip #16: Motivational Interviewing (pages Master Tips 31-32)

Present Curriculum/Topic

1. It is extremely important that each group participant leave every group with more Psychoeducation than they came in with – which may also include discussing a “familiar topic” yet with a “present-day” focus. Psychoeducational Groups are designed to provide education about all areas related to the management of Substance Use Disorders and Psychiatric Disorders. Psychoeducational Groups are not Interpersonal Processing Groups – even though interaction and processing the particular *psychoeducational topic(s)* is essential to individualizing the topic(s) or skill(s) presented.
2. It is recommended that a minimum of 1/3rd of group time be devoted to interaction (therapeutic counseling *topic* discussions). This can be accomplished – depending on the individual style of the group facilitator(s) – by any “present education-interact/discuss – present education-interact/discuss” combination while still structuring the group to include the curriculum/topic education to be covered.
3. The presentation of material will, of course, be modified by the facilitator to match the functioning skills of group participants. It is important to note, however, that *THE BASICS, Second Edition* was written in a conversational language while taking into consideration a wide-range of symptom acuity and severity. Persons with co-occurring psychiatric and substance disorders benefit from learning about their disorders and how to manage them, as do all individuals with any chronic disorder(s). Each group participant will retain what is meaningful to them at the present time.

Group Beginning Suggestions



A positive group beginning (and ending) is extremely important. There are many ways to begin (and end) a group in a positive way. Suggestions to choose from can include:

1. Reading the Thought For The Day from a meditation book. (Note: Meditation books that also contain an index at the end of the book – such as *Easy Does It* – are helpful in choosing a specific reading that matches the topic(s) presented in group like Self-Esteem.), or
 2. Reading an inspirational or humorous curriculum handout from *THE BASICS, Second Edition*, or
 3. Practicing a deep breathing or a stretching exercise, *or*
 4. Sharing of one thing that each person is grateful for today, *or*
 5. Sharing of one positive thing that he/she did that contributed to their recovery in the past few days, *or*
 6. Reading an AA Slogan with a brief explanation or AA/NA/Dual Recovery inspirational reading.
- * Recommended Beginning: Breathing Exercise (located on page Master Tips 3)

Practice Curriculum/Topic

Practicing subject material is the best way participants can internalize and personalize the curriculum content. Practice includes the group interactions, worksheets, exercises, handouts, and content discussions.

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Based on a 2-Hour group: Two 50 minute segments	Time-Frame
Group Beginning	20 Minutes Total
Positive group beginning (suggestions are located on the previous page).	5 Minutes
<ol style="list-style-type: none"> 1. Brief Group Introductions: (Note: The <i>interactions</i> in a psychoeducational group are discussions about the <i>topics</i>, not interpersonal processing or case management questions which do not apply to the entire group.) <ol style="list-style-type: none"> a. Ask the group members to tell the group their name. b. Welcome any group members who are new to this group or phase. 2. Crisis Processing (when requested and optional): <ol style="list-style-type: none"> a. Ask the group if anyone has experienced a crisis since their last group, and if they need/want additional time in this group to discuss it, i.e. what happened, how they managed the crisis, and/or explore options and develop a plan. b. Let the person(s) know that you will allow time at the end of this group for them to share their experience and receive support from their fellow group members. 	10 Minutes 
<p><u>Summarize Introduction of the Group Topic and Why It's Important:</u></p> <p>Having a social support system and expressing emotions is very important in developing physical and mental wellbeing. In fact, <i>not</i> expressing feelings or emotions keeps them all bottled up inside and can even have a detrimental effect on physical and emotional health. There is a saying: “Share your pain and you cut it in half, share your joy and you double it.”</p> <p>It's completely understandable why it would be uncomfortable or challenging or even difficult to share emotions with others. Substance Use and Psychiatric Disorders often isolate a person or make them feel different from others. And it's always important to learn to share feelings in an appropriate way. Learning and practicing these skills is helpful to <i>any</i> person whether in recovery or not.</p> <p>For people who have a Substance Dependence Disorder and/or a Psychiatric Disorder, learning to have fun and to laugh are also extremely important to the healing process. For individuals who have a Substance Use Disorder – developing ways to have fun and laugh are a very important way in helping to create better choices to experience joy than through substance abuse. Today we will be discussing breaking isolation, benefits of laughter & humor, and learning to have fun.</p>	5 Minutes 

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Psychoeducation Part I: Topics & Focus	Pages & Location	Presentation Suggestions	Time- Frame													
Isolation, The Immune System, Stress, and Physical Health	Subject 4-46	1. Illustrate and describe the cycle shown in the graphic below. 2. Summarize three paragraphs.	30 Minutes													
Effects of Isolation on the Immune System and Physical Health	Subject 4-46 – 4-47	1. Summarize two paragraphs. 2. Summarize the six points in TABLE ONE below using the text for explanations.														
<table border="1"> <tr> <td rowspan="2" style="vertical-align: middle;">TABLE ONE</td> <td style="text-align: center;">1</td> <td style="text-align: center;">ISOLATION IS STRESSFUL</td> <td style="text-align: center;">3</td> <td style="text-align: center;">ISOLATION & PHYSICAL HEALTH</td> <td style="text-align: center;">5</td> <td style="text-align: center;">ISOLATION & RECOVERY FROM ILLNESS</td> </tr> <tr> <td style="text-align: center;">2</td> <td style="text-align: center;">ISOLATION & THE IMMUNE SYSTEM</td> <td style="text-align: center;">4</td> <td style="text-align: center;">ISOLATION & SEVERITY OF AN ILLNESS</td> <td style="text-align: center;">6</td> <td style="text-align: center;">ISOLATION & MENTAL HEALTH</td> </tr> </table>				TABLE ONE	1	ISOLATION IS STRESSFUL	3	ISOLATION & PHYSICAL HEALTH	5	ISOLATION & RECOVERY FROM ILLNESS	2	ISOLATION & THE IMMUNE SYSTEM	4	ISOLATION & SEVERITY OF AN ILLNESS	6	ISOLATION & MENTAL HEALTH
TABLE ONE	1	ISOLATION IS STRESSFUL	3		ISOLATION & PHYSICAL HEALTH	5	ISOLATION & RECOVERY FROM ILLNESS									
	2	ISOLATION & THE IMMUNE SYSTEM	4	ISOLATION & SEVERITY OF AN ILLNESS	6	ISOLATION & MENTAL HEALTH										
Benefits of a Social Support System To Physical Health	Subject 4-47	1. Summarize one paragraph. 2. Summarize the five points in the table located in the text.														
Benefits of Support Groups To Physical Health	Subject 4-48	Summarize the five points of information located in the table in the text.														



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Psychoeducation Part I: Topics & Focus (continued)		Pages & Location	Presentation Suggestions	Time- Frame
The Benefits of Expressing Emotions		Subject 4-48 – 4-49	1. Summarize the seven points in TABLE TWO below. 2. Refer to the text for explanations and information on each.	Continued
TABLE TWO	1	LAUGHTER & THE IMMUNE SYSTEM	5	HUMOR IS A POWERFUL ANTIDOTE TO STRESS
	2	EXPRESSING EMOTIONS BENEFITS HEALTH	6	HUMOR IS AN EFFECTIVE SELF-CARE TOOL
	3	EXPRESSING JOY LEADS TO INTERNAL FOCUS OF CONTROL	7	LAUGHTER IS GOOD FOR THE HEART
	4	EXPRESSING EMOTIONS, BOTH POSITIVE & NEGATIVE, IMPROVES THE IMMUNE SYSTEM		
The Benefits of Laughter on The Immune System and Physical Health		Subject 4-49	Summarize one paragraph.	
<p><u>To the Group:</u></p> <ol style="list-style-type: none"> 1. What comments do you have? 2. What comments do you have about how isolation can be so unhealthy to physical and mental health? 3. Do you have a social support system? 4. Who do you interact with on a social basis? 5. Is it difficult sometimes to share your emotions with others? 6. Is it surprising that laughter can be so beneficial to the immune system? 7. What makes you laugh or what do you find funny? 8. Do you have friends you can laugh with? 9. Do you have a social support group that makes you feel good when you are with them? In a healthy way? 10. Would you like to have more friends or social support or healthier support system in the future? 11. How would you start building that support network? What would you do first? 				
Break				10 Minutes

Psychoeducation Part II: Topics & Focus	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
Learn to Have Fun	Subject 6-51	Summarize one paragraph.	↓	↓
Develop a Sense of Humor	Subject 6-52	1. Summarize three points in TABLE ONE on the following page using the text for explanations. 2. Summarize remaining paragraph after the table.	15 Minutes	20 Minutes

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Psychoeducation Part II: Topics & Focus (continued)		Pages & Location		Presentation Suggestions		Time-Frame with Crisis Processing	Time-Frame without Crisis Processing	
TABLE ONE								
1	INVOLVES THE ENTIRE BRAIN	2	FOSTERS POSITIVE & HOPEFUL ATTITUDE	3	INCREASES PERSONAL EMPOWERMENT			
Learn to Laugh		Subject 6-52 – 6-53		1. Summarize the five points in TABLE TWO below. 2. Refer to the text for explanations.				
TABLE TWO	1	HAVE A SENSE OF HUMOR	3	STAY IN TOUCH WITH YOUR “INNER CLOWN”	5			READ OR EXPOSE YOURSELF TO HUMOROUS MATERIAL
	2	LEARN TO LAUGH	4	LEARN TO PLAY				
Get Some Fresh Air		Subject 6-53		Summarize one paragraph.				
Hang Out With Successful People		Subject 6-53		Summarize one paragraph.				
Live an Active Life		Subject 6-53 – 6-54		Summarize one paragraph.				
Breaking Free of Isolation		Subject 6-54		1. Summarize one paragraph. 2. Read “Jody N’s” real recovery story. 3. Summarize one remaining paragraph.				
Seek Out New Activities		Subject 6-54		Summarize one paragraph.				
Solitude Versus Loneliness		Subject 6-54		Summarize one paragraph.				
Get Active		Subject 6-55		1. Summarize two paragraphs. 2. Read “Jody N’s” second real recovery story. 3. Summarize one remaining paragraph.				
Skill Building Exercise and Discussion - Suggestions for topic discussion:						Time-Frame with Crisis Processing	Time-Frame without Crisis Processing	
EXERCISE: Developing an “Individual Plan to Have Fun”								
1. What do you do for fun? 2. Is it challenging to find ways to have fun <i>without</i> the use of alcohol or other drugs? In what ways? 3. Is it challenging to find ways to have fun when you have been experiencing <i>symptoms</i> of a Psychiatric Disorder? In what ways?								15 Minutes

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Skill Building Exercise and Discussion - Suggestions for topic discussion: (continued)	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
<ol style="list-style-type: none"> 4. Is it challenging to find ways to have fun when you have been <i>isolated</i> from others because of the symptoms of a Psychiatric or Substance Use Disorder? In what ways? 5. Before drinking or using other drugs became so central in your life? What have you done in the past that you really enjoyed? Did you garden? Hobbies? Sports? What? 6. Before symptoms of a Psychiatric Disorder began to isolate you from others? What have you done in the past that you really enjoyed? Did you like to go to the movies? Enjoyed getting together with friends? Doing projects? What? 7. Are there activities that might be fun that you have <i>not tried</i> that you might <i>want to try</i>? 8. Do you have a sense of humor or ability to see the humor in a situation? What are some examples? 9. If you have trouble seeing the humor in situations – what do you think that is about? 10. Would there be ways to change your thinking about situations that might bring humor into your life? 11. How much fresh air do you get? 12. Do you currently hang out with successful people? 13. Do you still isolate quite a bit? 14. How active is your life today? What activities might you add to your life – even if just for a few minutes a day – that will bring pleasure to your life and be more active? 15. Remember, recovery is a <i>process</i> and when things have been so serious – it’s only natural that it will take time to learn have fun. What will you <i>do</i> this week or <i>try</i> this week to add some fun, laughter, and humor? 	<p align="center">continued</p>	<p align="center">continued</p>
Crisis Processing	Time-Frame	
<ol style="list-style-type: none"> 1. Ask the group member(s) to tell the group what happened. 2. Explore options and/or develop an immediate plan for coping. 3. Allow the group to offer support. 	10 Minutes	
Group “Paper Work”	Time-Frame	
Group participants fill out Group Notes.	5 Minutes	
Group Closure	Time-Frame	
<p>The recommended INSPIRATIONAL HANDOUT is “<i>Positively Negative</i>” which is located at the back of Subject Three Presentation suggestions include:</p> <ol style="list-style-type: none"> 1. Read the handout to the group, <i>or</i> 2. Hand a copy to a group member and ask a person to read aloud to the group, <i>or</i> 3. Give a copy of the handout to each group member for them to take home and for a person to read aloud in the group. 	5 Minutes	