

Nutrition and Dual Disorders & Developing Healthy Nutritional Habits

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

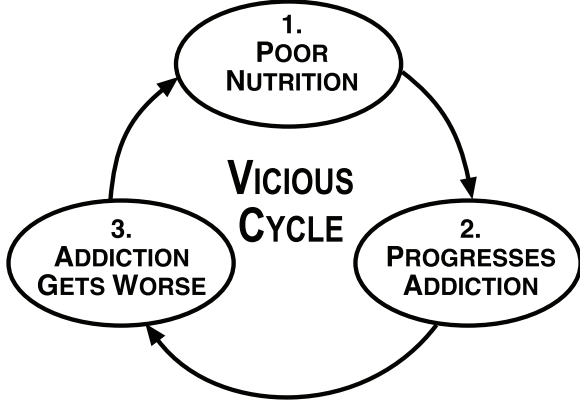

Practicing subject material is the best way participants can internalize and personalize the curriculum content. Practice includes the group interactions, worksheets, exercises, handouts, and content discussions.

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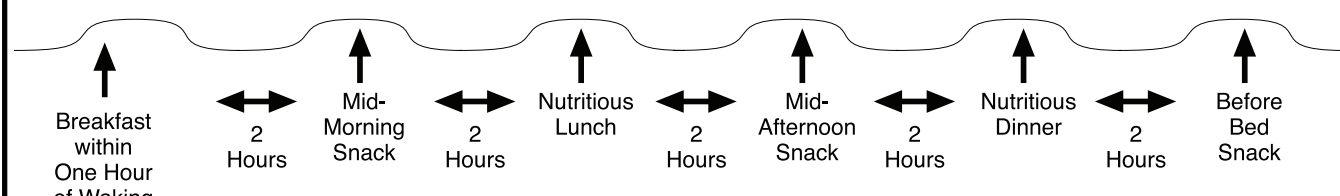
Volume II; Subject Six; Pages: Subject 6-32 - 6-34; 6-36 – 6-39

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																		
<div>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.)<div>a. Ask the group members to tell the group their name.</div>b. Welcome any group members who are new to this group or phase.</div> <div>2. Crisis Processing (when requested and optional):<div>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.</div>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.</div>		10 Minutes <div>↓</div>																		
<div><u>Summarize Introduction of the Group Topic and Why It's Important (page Subject 6-33):</u> The vast majority of people with Psychiatric Substance Disorders don't eat regularly or healthily. A sound nutritional program is essential to the successful treatment of these disorders. This means eating healthy food, in appropriate amounts of the basic food groups, and at regular intervals.</div> <div>Proper nutrition gives your body the vitamins,minerals, carbohydrates, and protein needed to improve physical and mental health, cope with stress, and reduce the physical cravings for alcohol and other drugs. Today we will talk about developing healthy nutritional habits.</div> <div>Self-care is a part of the foundation of recovery. It's well known that specific things can go a long way in returning the brain and body to good health, which includes:</div> <table><tr><td>1</td><td>DEVELOP NUTRITIONAL HABITS</td><td>4</td><td>GET MEDICAL & DENTAL CARE</td><td>7</td><td>LIVE A POSITIVE LIFE</td></tr><tr><td>2</td><td>GET PLENTY OF REST & SLEEP</td><td>5</td><td>PRACTICE GOOD GROOMING</td><td>8</td><td>LIVE AN ACTIVE LIFE</td></tr><tr><td>3</td><td>EXERCISE REGULARLY</td><td>6</td><td>STRIVE FOR BALANCE</td><td>9</td><td>LIVE IN THE PRESENT</td></tr></table> <div>Today we will focus on Developing Healthy Nutritional Habits.</div>		1	DEVELOP NUTRITIONAL HABITS	4	GET MEDICAL & DENTAL CARE	7	LIVE A POSITIVE LIFE	2	GET PLENTY OF REST & SLEEP	5	PRACTICE GOOD GROOMING	8	LIVE AN ACTIVE LIFE	3	EXERCISE REGULARLY	6	STRIVE FOR BALANCE	9	LIVE IN THE PRESENT	5 Minutes <div>↓</div>
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Psychoeducation Part I: Topics & Focus	Pages & Location	Presentation Suggestions	Time- Frame
Dual Disorders and Nutrition	Subject 6-33 – 6-34	1. Summarize two paragraphs. 2. Illustrate and explain the vicious cycle below:	30 Minutes
			
Addictions Interrupt Nutritional Balance – Cause Malnutrition	Subject 6-34	Summarize four paragraphs.	
Important Fuel Source Through High Calories	Subject 6-34	Summarize one paragraph.	
Blood Sugar and Recovery	Subject 6-36 – 6-37	Summarize one paragraph.	
Poor Nutrition and Cravings	Subject 6-37	Summarize one paragraph.	
Nutrition and Relapse	Subject 6-37	Summarize one paragraph.	
Weight Concerns and Nutrition	Subject 6-37	Summarize two paragraphs.	
Digestion and Nutrition in Early Recovery	Subject 6-37	Summarize one paragraph.	
Break			10 Minutes

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Psychoeducation Part II: Topics & Focus		Pages & Location	Presentation Suggestions			Time-Frame with Crisis Processing	Time-Frame without Crisis Processing			
Importance of Good Nutrition		Subject 6-38	Summarize one paragraph.			10 Minutes	15 Minutes			
Benefits of Eating Properly		Subject 6-38	1. Discuss the three positive effects found in the table below. 2. Give examples of each located in the text.							
1	HEALS THE BODY		2	HEALS THE MIND				3	PROMOTES RECOVERY	
Purpose of Eating Right		Subject 6-38	1. Illustrate and discuss the table below for stabilizing blood sugar. 2. This information is covered more fully in another group lesson plan.							
<div><div>GOAL: Stable Blood Sugar Levels Throughout the Day</div><div><div>CONSISTENT NUTRITION STABILIZES BLOOD SUGAR</div></div></div>										
Skill Building Exercise and Discussion - Suggestions for topic discussion:						Time-Frame with Crisis Processing	Time-Frame without Crisis Processing			
Nutritional Planning		Subject 6-38 – 6-39	1. Summarize one paragraph. 2. Summarize and discuss the eight nutritional planning tips that lead to improved health found in the table below. 3. Give examples from the text as time allows.			20 Minutes	25 Minutes			
To the Group: 1. Developing healthy nutritional habits is essential. 2. It may not be easy to get into the habit of eating three meals a day if you’ve been skipping meals, living primarily on junk foods, eating at irregular times, or getting most of your calories from alcohol.										

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Skill Building Exercise and Discussion - Suggestions for topic discussion:						Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
To the Group: (continued)							
3. It's essential and you can develop these habits with practice – the same way poor nutritional habits were formed – these goals include pages 6-38 – 6-39:							
1	EAT THREE GOOD MEALS A DAY	4	CUT BACK ON SWEETS OR AVOID THEM ALTOGETHER	7	REBUILD CALCIUM LEVELS		
2	EAT THREE NUTRITIOUS SNACKS	5	AVOID STRESS WHENEVER POSSIBLE	8	TAKE DAILY VITAMIN SUPPLEMENTS		
3	CUT BACK ON CAFFEINE OR AVOID IT ALTOGETHER	6	INCREASE FLUID INTAKE TO KEEP YOUR BODY HYDRATED				
4. If it sounds challenging to implement nutritional planning, it might be helpful to remember that individuals who have substance dependence disorders have really <i>excellent</i> planning skills.							
5. It actually takes great planning to keep an addiction going – buying, using, withdrawing, hiding, etc. all take individual planning.							
6. Developing healthy nutritional habits is just taking the good planning skills that the reward pathway developed to keep the brain using; and, then putting those same planning skills in an active addiction to work in recovery!							
7. What healthy nutritional habits (from the table on the previous page) do you already practice?							
8. What area(s) of healthy nutrition could use some improvement in your nutrition planning?							
9. Which area(s) will you become more aware of in the future?							
10. How will you begin to implement your nutritional planning skills in one or more of these areas?							
Crisis Processing						Time-Frame	
1. Ask the group member(s) to tell the group what happened.						10 Minutes	
2. Explore options and/or develop an immediate plan for coping.							
3. Allow the group to offer support.							
“Paper Work”						Time- Frame	
Group participants fill out Group Notes.						5 Minutes	
Group Closure						Time- Frame	
1. Read a daily brief meditation for the day, <i>or</i>						5 Minutes	
2. What new nutritional habit will you begin to practice this week? <i>or</i>							
3. Ask a group member to read aloud an inspirational reading of your choice.							