

16 Psychoeducation Topic Process Groups

Curriculum Division Examples

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Suggestions to the Facilitator(s) of a Psychoeducation TOPIC PROCESS GROUP

Psychoeducation Topic Process Group Format & Presentation Suggestions (Based on 1½ hour group time or modify to meet your group time)

Group Opening Suggestions

5 minutes

1. A positive group beginning is extremely important.
2. Choices of positive beginnings can include:
 - a. Reading the Thought for the Day from a meditation book.
 - b. AA Slogan with brief explanation or AA inspirational reading.
 - c. Inspirational or humorous curriculum handout reading from THE BASICS.
 - d. Deep breathing or stretching exercise.
 - e. Ask participants to mention one thing they are grateful for.
 - f. Ask each group member to mention one positive thing they did this past week that contributed to their recovery.

Educational Material or Group "Topic" Presentation Suggestions

10 Minutes

1. A "Psychoeducation Topic Process Group" gives the group facilitator(s) an opportunity to present psychoeducational material that is relevant to the recovery process.
2. Group participants then have the opportunity to "process" or discuss the topic.
3. Depending on the individual style or preference of the group facilitator, the facilitator may: (1) First, present the psychoeducational topic and second ask participants to discuss the curriculum material, or (2) Present segments of the topic for 5 minutes followed by 35 minutes of discussion and then introduce another segment or any combination of presentation/process - presentation/process.
4. The main point about the "psychoeducation topic process group" is for the facilitator to present a recommended ratio of approximately $\frac{1}{4}$ psychoeducation topic presentation and $\frac{3}{4}$ psychoeducation topic process time.
6. A component of any group is the importance of *support*. Group members are encouraged to *ask* for support or *feedback from* other participants. Group members are encouraged to *give* support or *feedback to* other participants.
7. Each of the Eight Subjects in THE BASICS, Second Edition has literally hundreds of potential topics for a Psychoeducation Topic Process Group. In this particular example of a Curriculum Division I have chosen two topics from each of the Eight Subjects.
8. Professionals may also choose to substitute or add other topic(s) found in THE BASICS, Second Edition as the foundation of a Psychoeducation Topic Process Group.
9. Ample material is referenced in this Curriculum Division Example for each of the topics. In order to accomplish a *brief overview* of the material, the facilitator(s) will need to *summarize* the material. This allows for the majority of the group time to be devoted to the group processing.

Psychoeducation Topic Processing Suggestions

1 hour 10 minutes

1. The group is opened up for discussion or comments regarding the topic information.
2. I have provided suggestions with each topic. Additional Topic Processing Suggestions are included here.
3. Processing can include many questions and areas to explore. For instance, if the psychoeducation topic was "ANGER" then the following could be discussed:
 - a. How does each group member relate to the topic of "ANGER?"
 - b. What are your personal experiences when you are "angry?"
 - c. What *works* for you to manage your anger? What has *not* worked well?
 - d. What have you learned about yourself and how you express "anger?"
 - e. What have been your struggles? What have been your successes or solutions?
 - f. Are you okay with how you express your "anger?" If you were to make some changes in managing your "anger" - what would the changes be?
 - g. What would be your first goal in improving your "anger management?" What specific situation/person will you start practicing your new "anger management" goal, etc.?
4. You may also choose to put a few points on the board each week for topic processing hints, such as:
 - a. Topic Experiences?
 - b. Struggles?
 - c. Successes/solutions?
 - d. Goal(s)?
 - e. First *step* toward goal?
5. Group participants are encouraged to talk about whatever they want during their processing time, while keeping the discussion as close to how the topic relates to them personally.
6. Little if any redirection may be necessary from the facilitator as group participants discuss their personal experience and goals regarding a topic. This is especially true once the group understands the weekly format. This is another reason why putting a format like "Personal Experiences" on the board each week will facilitate discussions.
7. "Topic" processing is a way of individualizing and internalizing the psychoeducational material, while creating an atmosphere where change and insight can flourish.

Group Closing Suggestions

5 minutes

1. A positive group closing is also very important.
2. You may choose - given the nature of this particular group format - to ask each group member to share what they will "practice" in this next week regarding the topic.
3. If time permits, you can also close the group by reading a positive thought for the day, asking each group member to share one thing they are grateful for today, or any number of brief ways to close a group in a positive manner.

GROUP ONE: Psychoeducation TOPIC PROCESS

TOPIC	Bio-Psycho-Socio-Cultural-Environmental-Spiritual
SUBJECT OF THE BASICS, SECOND EDITION	Subject One: The Link Between Psychiatric and Substance Disorders, An Integrated Treatment Approach
REFERENCE MATERIAL & LOCATION	<p><i>Causes of Psychiatric and Substance Disorders: Addictive Disorders and Biochemistry</i> Page: Subject 1-6</p> <p><i>Psychiatric Disorders and Biochemistry</i> Page: Subject 1-6</p> <p>“Psycho” or Psychological Component Page: Subject 1-7</p> <p>“Socio” or Social-Cultural-Environmental Components Page: Subject 1-7 – 1-8</p> <p>Spiritual Component Page: Subject 1-8</p> <p><i>Bio-Psycho-Socio-Cultural-Environmental-Spiritual Recovery</i> Pages: Subject 1-8 – 1-9</p> <p>Biological Wellness Page: Subject 1-9</p> <p>Psychological Wellness Page: Subject 1-9</p> <p>Socio-Cultural-Environmental Wellness Page: Subject 1-9</p> <p>Spiritual Wellness Page: Subject 1-10</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. The “Tips to Professionals” on page: Subject 1-10 gives suggestions for using an “Alcohol/Drug Wheel” and a “Recovery Wheel.” 2. You can certainly put less spokes to the wheel or modify it in any way. <p>To the Group:</p> <ol style="list-style-type: none"> 1. How do or how will <i>untreated</i> Co-Occurring Disorders adversely affect specific areas of your life or may cause problems in specific areas? 2. How can these areas improve or have improved or what strengths have you found in yourself in each of these areas from recovery?

GROUP TWO: Psychoeducation TOPIC PROCESS

TOPIC	Communication Styles
SUBJECT OF THE BASICS, SECOND EDITION	Subject One: The Link Between Psychiatric and Substance Disorders, An Integrated Treatment Approach
REFERENCE MATERIAL & LOCATION	Passive Communication Style Table – Pages: Subject 1-51 – 1-52 Aggressive Communication Style Table - Pages: Subject 1-52 – 1-53 Passive-Aggressive Communication Style Table - Pages: Subject 1-53 – 1-54 Assertive Communication Style Table - Page: Subject 1-54
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p><u>To the Facilitator(s):</u></p> <ol style="list-style-type: none"> 1. The material referenced will be too lengthy to cover in detail in 10 minutes. 2. Being familiar with the content prior to the group process will be helpful in summarizing enough of the information to allow participants to identify their most frequently used communication style. 3. For example, in your summary you may choose to highlight only one or two of the techniques related to each communication style. <p><u>To the Group:</u></p> <ol style="list-style-type: none"> 1. What communication style do you identify with the most? 2. Is this style productive or healthy or helpful? 3. Is it nonproductive or unhealthy or unhelpful? 4. What goal(s) would you set for your communication style in the future? 5. Where would you start? Who would you practice with first?

GROUP THREE: Psychoeducation TOPIC PROCESS

TOPIC	Symptom Management
SUBJECT OF THE BASICS, SECOND EDITION	Subject Two: Psychiatric Disorders Within a Co-Occurring Diagnosis
REFERENCE MATERIAL & LOCATION	Symptoms of Major Depression or Bipolar Depressive Episode Table – Page: Subject 2-11
	Manic Episode Defined Table – Page: Subject 2-15
	Symptoms of Manic Episode Table - Page: Subject 2-16
	Symptoms of Generalized Anxiety Disorder Table – Page: Subject 2-24
	Symptoms of Panic Attacks Table – Page: Subject 2-25
	Symptoms of Posttraumatic Stress Disorder Table – Page: Subject 2-28
	Symptoms of Schizophrenia Table – Page: 2-35
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<u>To the Facilitator(s):</u> <ol style="list-style-type: none"> 1. This section is <i>not</i> intended for specific or lengthy coverage of symptoms. 2. It is recommended that you only name the symptoms that are highlighted and underlined in each of the tables like: a. Significant Changes in Appetite or Weight; b. Persistent Depressed Mood, etc. (see page Subject 2-17) 3. These symptoms will be common among all psychiatric disorders. It is helpful for group members to realize they share common symptoms and struggles (like sleep disturbance) with their fellow group participants. 4. You may also choose to <i>not</i> mention all of the disorders listed. For example, if you do <i>not</i> have a person in your group who is diagnosed with Schizophrenia, then skip this particular disorder and the relevant symptom list, etc. 5. You may also decide to more fully cover only one disorder, such as Mood Disorders, etc.
	<u>To the Group:</u> <ol style="list-style-type: none"> 1. What symptoms of mental health do you struggle with the most? 2. What activities or thoughts have you found that are helpful in managing these symptoms? 3. What are some symptom management techniques that you find to be personally helpful since other members may find them helpful as well?

GROUP FOUR: Psychoeducation TOPIC PROCESS

TOPIC	Positive “Self-Talk”
SUBJECT OF THE BASICS, SECOND EDITION	Subject Two: Psychiatric Disorders Within a Co-Occurring Diagnosis
REFERENCE MATERIAL & LOCATION	<p>Changing Negative Thinking to Positive Thinking (first three paragraphs only) Page: Subject 2-63</p> <p>Negative Thoughts Adversely Affect Physical and Mental Health Page: Subject 2-64</p> <p>Positive Thoughts Contribute to Good Physical and Mental Health Page: Subject 2-64</p> <p>Co-Occurring Disorders and Negative Thinking Patterns Subject 2-65</p> <p>Negative Thinking Patterns Become Habits Page: Subject 2-66</p> <p>Changing Non-Helpful Patterns and Habits Table – Page: Subject 2-67</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p><u>To the Facilitator(s):</u></p> <ol style="list-style-type: none"> 1. You may choose to use the “Changing Non-Helpful Patterns and Habits” Table – Page: Subject 2-67. (note: you can leave out the middle column of this table (“Action Taken in Place of Defense”). That section may get in the way of easy processing for this particular group topic. 2. Facilitators can list examples from the left side of the table “Negative Self-Talk Messages” and the group can brainstorm “Positive Self-Talk Messages.” <p><u>To the Group:</u></p> <ol style="list-style-type: none"> 1. What are some negative thoughts or self-talk messages you have from time to time that are <i>not</i> positive or <i>not</i> helpful (i.e. I’m no good. I will never get any better. I will always be depressed. I won’t ever be able to stop using drugs.)? 2. What are some positive thoughts do you have that are helpful when you have these negative thoughts? 3. What thoughts do the group or any individuals have to offer (brainstorm) as some suggestions or replacement thoughts that are positive or more helpful? 4. Discuss how negative self-talk may get in the way of symptom management or recovery. 5. How can positive thoughts help with managing symptoms and strengthen recovery? 6. What positive thought will you choose to begin to practice? (i.e. I can do this. I have been through a lot, I am strong.)

GROUP FIVE: Psychoeducation TOPIC PROCESS

TOPIC	The Benefits and Costs
SUBJECT OF THE BASICS, SECOND EDITION	Subject Three: Substance Disorders Within a Co-Occurring Diagnosis
REFERENCE MATERIAL & LOCATION	Identifying Problems By Weighing The Pros and Cons Table – Page: Subject 3-63
	Analyzing the Benefits of Using and Costs of Not Using Page: Subject 3-64
	Benefits of Using – Important Questions to Ask Table – Page: Subject 3-64
	Costs of Not Using – Important Questions to Ask Table – Page: Subject 3-64 - 3-65
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p><u>To the Facilitator(s):</u></p> <ol style="list-style-type: none"> 1. You may choose to put the grid on the board: <ol style="list-style-type: none"> a. On the left: Benefits of Drinking and Drugging and Costs of Not Using b. On the right: Benefits of Not Drinking or Drugging and Costs of Using Substances 2. You may wish to put two other columns on the board: <ol style="list-style-type: none"> a. Benefits of Using b. Cost of Not Using <p><u>To the Group:</u></p> <ol style="list-style-type: none"> 1. What are the benefits of drinking or drugging? 2. What are the costs of not using substances? 3. What are the benefits of not drinking or drugging? 4. What are the costs of using substances? 5. As you look at the benefits of using a little closer are these <i>really</i> benefits? Like does drinking and or drugging <i>always</i> make me feel better? 6. As you think about the costs of not using a little more, are these really costs? Like will I <i>really</i> lose all my friends? Are they <i>true</i> friends?

GROUP SIX: Psychoeducation TOPIC PROCESS

TOPIC	Acknowledging Defenses and Areas of Recovery
SUBJECT OF THE BASICS, SECOND EDITION	Subject Three: Substance Disorders Within a Co-Occurring Diagnosis
REFERENCE MATERIAL & LOCATION	<p>De-nial Is Not a River in Egypt Page: Subject 3-60</p> <p>The Basics of Denial – A Protection From a Painful Reality Table - Page: Subject 3-59</p> <p>De-fenses Are “Fences” Used to Keep People “In” or Others “Out” Page: Subject 3-60</p> <p>Denial or Defenses Come in Many Forms Table - Page: Subject 3-60</p> <p>Areas of Recovery Page: Subject 3-72</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. You will find additional information in Appendix III on page Appendix III-91 – Appendix III-92: <ol style="list-style-type: none"> a. Recognizing The Many “Faces” of Denial Table b. This table may help you quickly define specific areas of denial. c. You may choose to only briefly cover about 6 of these. 2. You will find additional information in Appendix III on pages Appendix III-101 – Appendix III-102: <ol style="list-style-type: none"> a. Recovery Happens in All Areas of a Person’s Life Table. b. This table may help you quickly elaborate on specific areas of recovery. c. You may choose to only use a few descriptors from some of the sections since some areas like “family recovery” are self-explanatory. <p>To the Group:</p> <ol style="list-style-type: none"> 1. What specific defenses or examples of denial do you relate to? 2. What did you tell yourself or others when you were defending your use or protecting your abuse or denying a mental health problem to yourself? 3. As you continue in the recovery process and shine a light on defenses, what recovery areas would you like to see improvement in? 4. What areas of the recovery process have you already experienced benefits? In what ways?

GROUP SEVEN: Psychoeducation TOPIC PROCESS

TOPIC	Stress Reactions and Management
SUBJECT OF THE BASICS, SECOND EDITION	Subject Four: The Physiological Effects of Co-Occurring Psychiatric and Substance Disorders on Physical Health
REFERENCE MATERIAL & LOCATION	<p>Untreated Psychiatric or Substance Disorders Produce Unmanaged Stress; Graphic – Page: Subject 4-2</p> <p>Stress Defined; Page: Subject 4-2</p> <p>Stressors; Page: Subject 4-4</p> <p>Stress Reactions Pages: Subject 4-4 – 4-5</p> <p>Co-Occurring Disorders and Stress Pages: Subject 4-5 - 4-6</p> <p>The Effects of Chronic Stress on Physical Health Page: Subject 4-10</p> <p>Physical Signs and Illnesses Associated With Stress Page: Subject 4-10</p> <p>Depression, Anxiety, Isolation, and The Immune System Page: Subject 4-23</p> <p>Untreated Psychiatric or Substance Disorders Produce Chronic Unmanaged Stress and Escalate or Worsen Substance Disorders and Leads to Greater Stress Table - Page: Subject 4-28</p> <p>Effects of Substance Disorders on Physical Health Page: Subject 4-29</p> <p>Stress Management Techniques; Tables – Page: Subject 4-6</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. While there may appear to be quite a lot of psychoeducational material, it is not intended to be discussed fully. 2. The material is referred to simply as a way of paraphrasing the effects of these disorders on physical health as they worsen stress reactions. 3. It is recommended that you become familiar with the content so you can summarize the main points. 4. There are many sections in the book on ways to manage stress. 5. In this particular topic-process group, you may highlight an overall stress management plan found on Page: 4-6. That way participants can then discuss their own ways of managing stress and share those with others. <p>To the Group:</p> <ol style="list-style-type: none"> 1. How do you know when you are under stress? 2. What are the signs you notice? 3. How does your specific disorder(s) affect your stress level? 4. What <i>stressors</i> in your life cause you the most stress <i>reactions</i>? 5. What healthy stress reduction techniques have you found work the best for you personally? 6. What additional or new stress reduction skill(s) would you like to add to your stress management plan? 7. When will you begin? How?

GROUP EIGHT: Psychoeducation TOPIC PROCESS

TOPIC	Craving Triggers and Action Plans
SUBJECT OF THE BASICS, SECOND EDITION	Subject Four: The Physiological Effects of Co-Occurring Psychiatric and Substance Disorders on Physical Health
REFERENCE MATERIAL & LOCATION	<p>Cravings to Use Alcohol and Drugs Page: Subject 4-31</p> <p>Denying a Craving Is a Mistake Pages: Subject 4-31 – 4-32</p> <p>Cravings Are The Result of Brain Chemistry; Page: Subject – 4-32</p> <p>Conditioned Response Leads To a Craving Pages & Table: Subject 4-32 – 4-33</p> <p>Physical Response To a Craving or Urge to Use Pages & Table: Subject 4-33</p> <p>Taking Responsibility For The <i>Response</i> To The Craving Page: Subject 4-33</p> <p>Managing Cravings Is a Healthy Choice Table & Page: Subject 4-34</p> <p>Managing Cravings With The Three Ds Table & Page: Subject 4-34</p> <p>Distracting” Takes the Power Out of a Craving Table & Page: Subject 4-35</p> <p>Refusal Skills; Table & Page: Subject 4-35</p> <p>Urges To Use and The Intensity of Cravings Lessen Over Time Page: Subject 4-35</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. The five pages listed as reference for this topic are meant to be <i>summarized</i> in no more than 10 minutes. 2. As with other groups, the material is meant to give enough you information so the group can talk about how it relates to them. <p>To the Group:</p> <ol style="list-style-type: none"> 1. When you experience an urge or craving what physical symptoms do you notice? 2. If you were to name one, which one do you notice first? 3. Many people have extinguished the discomfort of a craving by using. Can you relate to that? 4. When you have stopped or lessened a craving in a way <i>other than using</i> what did you do? 5. What are other things that help when you are experiencing a craving? What do you tell yourself to make it better? What do you do? 6. What other activities might you try in the future? 7. How difficult is it to refuse alcohol and drugs? Is there a person who is harder to refuse than others? What have you said that has helped them back off? What might you say next time they offer or try to convince you to use?

GROUP NINE: Psychoeducation TOPIC PROCESS

TOPIC	Anger
SUBJECT OF THE BASICS, SECOND EDITION	Subject Five: Coping With Stress and Emotions With Healthy Alternatives to Alcohol and Other Drug Abuse
REFERENCE MATERIAL & LOCATION	<p>Anger Page: Subject 5-32</p> <p>Anger Helps Us Survive Pages: Subject 5-32 – 5-33</p> <p>Intensity of Anger Page & Table: Subject 5-33</p> <p>Situations That Trigger Anger Page & Table: Subject 5-33</p> <p>Anger Cycle Page: Subject 5-33 – 5-34</p> <p>Mismanagement of Anger Leads to Problems Page: Subject 5-37</p> <p>Inappropriate Expressions of Anger Page & Table: Subject 5-37</p> <p>Managing Personal Anger Page: Subject 5-39 – 5-40</p> <p>Anger Management Strategies Page & Table: Subject 5-42</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p><u>To the Facilitator(s):</u></p> <ol style="list-style-type: none"> 1. The material referenced will be too lengthy to cover in 10 minutes. 2. Notice, however, that some sections have been skipped and are not included in this lesson plan. 3. Between the skipped sections and skilled pages – this lesson plan discusses less than 5 pages of curriculum <p><u>To the Group:</u></p> <ol style="list-style-type: none"> 1. How do you express anger? Do you express it in a healthy way? 2. Do you suppress your anger? Build resentments? Act out your anger in unhealthy or unproductive ways? 3. Would you like to learn to express your anger in a healthier or more productive way? 4. How would you prefer to express your anger? 5. What anger management techniques will you use in the future? 6. What person will you practice your new skill with first?

GROUP TEN: Psychoeducation TOPIC PROCESS

TOPIC	Depression and Anxiety
SUBJECT OF THE BASICS, SECOND EDITION	Subject Five: Coping With Stress and Emotions With Healthy Alternatives to Alcohol and Other Drug Abuse
REFERENCE MATERIAL & LOCATION	Depression; Page: Subject 5-42
	Co-Occurring Disorders and Depression; Pages: Subject 5-42 – 5-43
	Reasons For Sadness and Depression Table and Pages: Subject 5-43 – 5-44 – 5-45
	Coping With Depression; Page: Subject 5-46
	Get Busy and Take Action; Pages & Table: Subject 5-47 – 5-48
	Anxiety Disorders; Page: Subject 5-58
	Co-Occurring Disorders and Anxiety; Pages: Subject 5-59 – 5-60
	Anxiety Is Difficult to Work Through; Page: 5-60
	Managing Anxiety; Table & Pages: 5-61 – 5-62
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<u>To the Facilitator(s):</u> <ol style="list-style-type: none"> 1. This is an excellent example of becoming familiar with the topic material prior to facilitating a group. 2. While the material referenced will be too lengthy to cover in 10 minutes and will need to be summarized. There is another reason to look at the recommended lesson plan before group. 3. Initially it may look like this material presents 20 pages...it does not. 4. There are a number of sections that are skipped. In fact, ten pages Subject 5-48 – 5-58 are not discussed in this lesson plan. 5. There are also several sections skipped within the discussion on depression and the one on anxiety. That means less than 10 pages are the content in this group. 6. Additionally, the 8 ways to “Get Busy and Take Action” in the table on Pages: Subject 5-47 – 5-48 can simply be named and not described.
	<u>To the Group:</u> <ol style="list-style-type: none"> 1. Do you experience depression? 2. What symptoms do you struggle with when depressed? 3. What are some of the ways you cope with depression? 4. What would life be like if your depression was better managed? What would you do? What would life look like if your depression was better? 5. What are some techniques you will try to further manage your depression? 6. Do you experience anxiety? 7. What symptoms do you struggle with when anxious? 8. What are some of the ways you cope with anxiety? 9. What would life be like if your anxiety was better managed? What would you do? How would life be different? 10. What are some techniques you will try to further manage your anxiety?

GROUP ELEVEN: Psychoeducation TOPIC PROCESS

TOPIC	Self-Care
SUBJECT OF THE BASICS, SECOND EDITION	Subject Six: The Foundations of The Recovery Process
REFERENCE MATERIAL & LOCATION	<p>Self-Care Table & Page: Subject 6-32</p> <p>Develop Nutritional Habits Page: Subject 6-33</p> <p>Dual Disorders and Nutrition Page: Subject 6-33</p> <p>Nutritional Planning Pages and Table: Subject 6-38 – 6-39</p> <p>Getting a Good Night’s Sleep Table & Pages: Subject 6-45 – 6-46</p> <p>Exercise Regularly Table & Pages: Subject 6-47 – 6-48</p> <p>Medical and Dental Care Table and Page: Subject 6-48</p> <p>Good Grooming Table & Page: Subject 6-48</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. You may want to put the 8 topics of the table of Page: Subject 6-33 on the board for referral by the participants during the processing time. 2. You may choose to make brief comments on these main topics instead of covering the material in the additional tables listed <i>or</i> you may decide to only discuss a couple of the main topics or just one in more depth like nutrition. 3. In the tables mentioned in this section, it is recommended that you only list the main points in each of the tables, i.e. Eat Three Good Meals a Day; Eat Three Nutritional Snacks, etc. It would be the only way to allow time for processing. <p>To the Group:</p> <ol style="list-style-type: none"> 1. How are you doing in the areas of “Self-Care?” 2. How are your nutritional habits? 3. How about your sleep? Exercise or movement? Good grooming? 4. What areas are working the best for you? 5. How does that help your symptoms of a substance and/or psychiatric disorder? Like nutrition helping with cravings or grooming helping with depression, etc. 6. What areas would you want to make improvement in? 7. Where would you start? What would you do?

GROUP TWELVE: Psychoeducation TOPIC PROCESS

TOPIC	Support Network
SUBJECT OF THE BASICS, SECOND EDITION	Subject Six: The Foundations of The Recovery Process
REFERENCE MATERIAL & LOCATION	<p>Support Network Pages: Subject 6-56 – 6-57</p> <p>Support Through Self-Help Groups Page: Subject 6-57</p> <p>Support Through Treatment Team Page: Subject 6-57</p> <p>Benefits of Self-Help Groups Pages & Table: Subject 6-57 – 6-58</p> <p>Building a Support Network Page: Subject 6-58</p> <p>Qualities of a Good Support Person Table & Page 6-59</p> <p>Identify Your Support Network Page & Table: Subject 6-59</p>
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. You may choose to briefly summarize the information on pages: Subject 6-56 – 6-58. 2. The tables on page Subject 6-59 of “Qualities of a Good Support System” and “Identify Your Support Network” can be read and then transferred into a group exercise by adding: <ol style="list-style-type: none"> a. What do you personally consider a quality of a good support person? b. Who would you personally consider a support network person...you don’t have to actually name the person, you can say “my neighbor” “my best friend” “my sister” etc. <p>To the Group:</p> <ol style="list-style-type: none"> 1. Do you have a support network? 2. How do they support you? What are the benefits? 3. Are you able to easily reach them? 4. Have you asked the person to be your support person?” 5. Do they know specifically what you need? For example: To talk to them? To give you a ride to therapy, the grocery store, etc.? 6. How could you expand your support network? 7. Who would you ask? 8. How would the person specifically help you? 9. What is the first step you would take in building or strengthening your support network?

GROUP THIRTEEN: Psychoeducation TOPIC PROCESS

TOPIC	Automatic Thinking Processes and Emotions
SUBJECT OF THE BASICS, SECOND EDITION	Subject Seven: The Process of Recovery
REFERENCE MATERIAL & LOCATION	Ongoing Mental Health Recovery: Changing Thinking Pages: Subject 7-15 – 7-16
	Automatic Thinking Patterns Page: Subject 7-16
	Becoming Willing to Change Thought Processes Pages: Subject 7-16 – 7-17
	Noticing Thought Patterns Page: Subject 7-17
	Patterns of Thoughts Produce Patterns of Emotions Pages & Table: Subject 7-18 – 7-19
	Thinking Increases or Decreases Emotional Intensity Pages & Table: Subject 7-19 – 7-20
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p><u>To the Facilitator(s):</u></p> <ol style="list-style-type: none"> 1. You may choose to put the squares (without the words) from the graphics found on Page: Subject 7-19 – 7-20 on the board. 2. The graphics can give a visual of how emotions are pushed up or down with thoughts as you verbally give examples for the squares to the group. 3. Group members can refer to this during their processing if they wish. <p><u>To the Group:</u></p> <ol style="list-style-type: none"> 1. What are some <i>positive</i> thoughts that help you when you are feeling depressed, anxious, or upset? 2. Can you identify your automatic thoughts that contribute to you being upset? Do you have later thoughts that contribute to <i>reducing</i> your distress? <ol style="list-style-type: none"> a. First Thought: “I know this is hopeless” b. Second Thought: “This may be very difficult but it isn’t hopeless – I need to keep moving forward to change things.” c. First Thought: “I am all alone” d. Second Thought: “I am so miserable there is no one to count on.” e. Third Thought: “Well, there is one person who is there for me but I have not called them in a long time...perhaps that is why I feel so alone...I will call them right now.” 3. What thoughts do you have that can push your depression, anxiety, anger, or being upset to an even <i>higher</i> level of intensity? 4. What are some alternate thoughts that might <i>reduce</i> your distress, depression, anxiety, or anger? 5. What helpful thoughts will you practice more in the future?

GROUP FOURTEEN: Psychoeducation TOPIC PROCESS

TOPIC	Character Defects and Self-Defeating Behaviors
SUBJECT OF THE BASICS, SECOND EDITION	Subject Seven: The Process of Recovery
REFERENCE MATERIAL & LOCATION	Character Defects Page: Subject 7-24 Identifying Character Defects Table & Pages: Subject 7-25 – 7-26 – 7-27 Working Through Character Defects Table: Subject 7-27 Self-Defeating Behaviors Page: Subject 7-32 The Familiar Becomes a Habit Pages: Subject 7-32 – 7-33 Obvious and Not So Obvious Self-Defeating Behaviors Page: Subject 7-33 Identifying Self-Defeating Behaviors Pages & Table: Subject 7-33 – 7-34 Changing Self-Destructive Behaviors Page & Table: Subject 7-34
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. Again, the material referenced will be too lengthy to cover in 10 minutes. 2. You may choose to only list the 7 mentioned self-destructive behaviors with only a word or two of explanation. 3. Other material will need to be summarized. <p>To the Group:</p> <ol style="list-style-type: none"> 1. What self-destructive behaviors have you worked through or corrected before? 2. What strengths did you use to make these successful changes? 3. What are the self-defeating behaviors you currently struggle with changing? 4. What behavior would you begin to make changes on? 5. Where would you start?

GROUP FIFTEEN: Psychoeducation TOPIC PROCESS

TOPIC	Crisis
SUBJECT OF THE BASICS, SECOND EDITION	Subject Eight: Coping With Crisis, Preventing Relapse, and Maintaining Recovery
REFERENCE MATERIAL & LOCATION	Coping With Crisis Page: Subject 8-1
	“Crisis Making” Process Table & Page: Subject 8-1
	Unmanaged Crisis Table & Pages: Subject 8-2 – 8-3
	Physical Response to a Crisis Graphic, Table & Page: 8-3
	Self-instruction to Cope With an Event Table & Page: Subject 8-5
	Evaluating Crisis Event Table & Page: Subject 8-5
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. You may choose to summarize Stage I, Stage II, and Stage III with the help of the graphic to highlight the point that a person has choices and can move out of the crisis cycle through changes in cognitive/thinking/perceptions. 2. Summarizing the physical response to a crisis can involve simply listing the cascading response of the brain to a crisis. 3. You might highlight or even put on the board – <i>challenge</i> to be mastered – <i>problem</i> to be solved – <i>crisis</i> to be managed – and how the person has the ability to determine which one the event represents (challenge, problem, crisis) and then act accordingly. Otherwise, as we know, most events can mistakenly be labeled a crisis. <p>To the Group:</p> <ol style="list-style-type: none"> 1. Have you ever taken a <i>challenge</i> or a <i>problem</i> and made it into a <i>crisis</i> by thinking about the event in a certain way? 2. What happens physically when you are in crisis? 3. How does that make it more difficult to not abuse alcohol and other drugs? 4. Does a crisis worsen psychiatric symptoms? 5. What things do you often tell yourself that can make a problem turn into a crisis? 6. What are some things you could tell or say to yourself that might <i>lessen</i> the chance of going into crisis? 7. What will you do next time you experience a “potential” crisis? 8. If the event is a crisis, how will you manage the crisis? 9. What will you do – who will you call – where will you go for safety?

GROUP SIXTEEN: Psychoeducation TOPIC PROCESS

TOPIC	Relapse or Recurrence of Symptoms
SUBJECT OF THE BASICS, SECOND EDITION	Subject Eight: Coping With Crisis, Preventing Relapse, and Maintaining Recovery
REFERENCE MATERIAL & LOCATION	Co-Occurring Disorders and Relapse Pages: Subject 8-8 – 8-9
	Degrees of a Relapse or The Return of Symptoms Page: Subject 8-9
	Relapse or Recurrence of Symptoms and Chronic Illnesses Page: Subject 8-12
	Relapse Is a <i>Process</i> Not an Event Page: Subject 8-12
	Changes Signal The Risk of Relapse Table & Page: Subject 8-13
	Mapping The Danger Points Graphic & Page: Subject 8-16
SUGGESTIONS FOR PROCESS AND/OR PRESENTATION	<p>To the Facilitator(s):</p> <ol style="list-style-type: none"> 1. You may choose to put the graphic “Mapping Your Relapse Danger Points” with blank signs on the board for reference during the group process. 2. Group members can identify their personal danger zones as well as what they <i>would</i> do or <i>are</i> doing to cope with those zones. <p>To the Group:</p> <ol style="list-style-type: none"> 1. What behavior changes tend to put you at risk of a return of psychiatric symptoms or relapse/setback with alcohol and other drugs? 2. What <i>attitude</i> changes are risky for you? 3. What <i>thought</i> changes are risky? 4. How about changes in mood or <i>feelings</i>? 5. If you were to picture your danger points in behavior, attitude, thought, or feelings as construction signs to be warned of – what would those signs say? 6. What steps would you take to avoid the danger zones or help you get back on track when you notice each warning sign?

From Rhonda McKillip:

You may use this format to develop a program to discuss any of the hundreds of topics found throughout the curriculum. For instance, if the needs of your treatment participants would benefit from focusing particularly on *Preventing Relapse* then pick approximately 5-10 pages from Subject Eight and develop as many sessions that meet the needs of your program. There is no limit to the group topics you can choose to develop a Psychoeducation Topic and Process group divided into as many or as few group sessions as you choose.

Best wishes, Rhonda