

Training Curriculum on Drug Addiction Counseling



Chapter 7

Managing Intoxication and Hostility

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TRAINING CURRICULUM ON DRUG ADDICTION COUNSELING

TRAINER MANUAL



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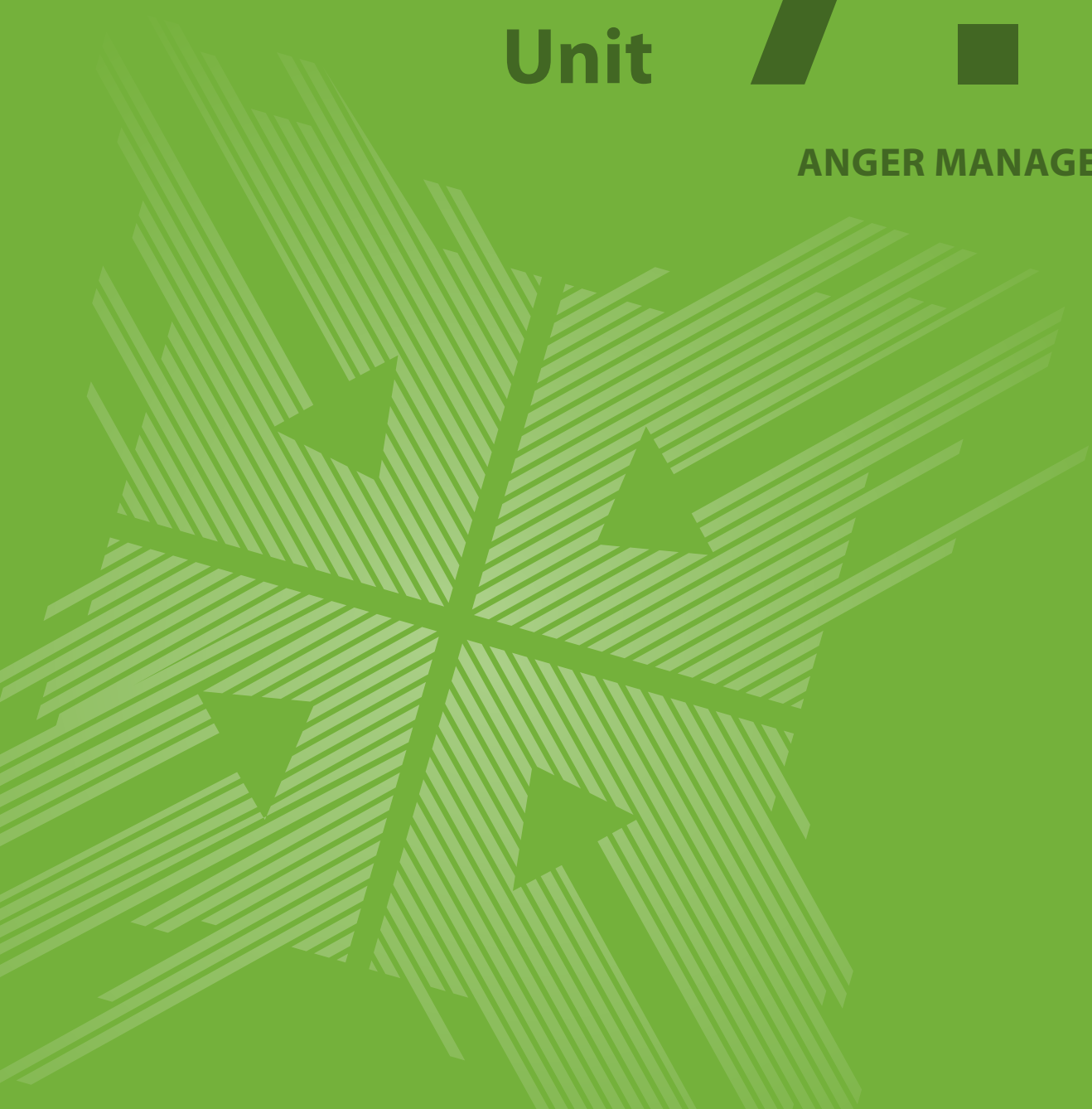
CHAPTER 7

MANAGING INTOXICATION AND HOSTILITY

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Unit 7.1

ANGER MANAGEMENT



OVERVIEW

I. Introduction

2 Min

Introduce the unit by explaining that you will discuss the basic concepts of anger management.

II. Presentation

45 Min

Use the PowerPoint slides and small group discussions to train on anger management.

III. Conclusion

8 Min

Review the key points of this unit and answer participants' questions (if any).

Unit 7.1: Anger Management

Goal: To help participants understand the basic concepts of anger management.

Time: 55 minutes

Objectives: At the end of this unit, participants will:

- understand the differences between anger and aggression
- understand what triggers anger or aggression
- know strategies to deal with anger and aggression

Methodology:


- Presentation
- Small-group discussion
- Handouts

Teaching aids:

- PowerPoint slides
- LCD projector
- Flipchart and paper
- Markers

Slide 1



 **Say:** Anger is a normal part of life and we all should know ways to control it. This is true for everyone.

Drug users often act impulsively due to the effects of alcohol or drugs. People who are addicted to drugs often lose perspective of the consequences of their impulsive behavior. They often use anger to intimidate other people to get what they want. This can be a problem when the person is no longer using drugs, as his/her methods of managing interpersonal relationships may be limited to this type of approach. People who use drugs may have limited insight into the effects their behavior has on others. Finally, negative emotional states, such as anger, also have the potential to increase the risk of relapse.

This module aims to teach you how to teach your clients to manage their own anger and separate it from aggression.

Slide 2

LEARNING OBJECTIVES

By the end of this session, participants will:


- understand the difference between anger and aggression
- understand the triggers for anger and aggression
- know strategies to deal with anger and aggression

Teaching instructions: Use the bullets on the slide to present directly.

Slide 3

ANGER MANAGEMENT

- Know the difference between **anger** and **aggression**
- Anger is an emotion - it is alright to be angry
- Aggression is intentionally trying to hurt someone, either physically or emotionally, and is unacceptable

 **Say:** *To provide a client with the skills he/she needs to manage his/her anger, your will need to help your clients to:*

- *know the difference between anger and other emotions*
- *identify when they are becoming aggressive, and the difference between aggression and anger*
- *understand the consequences of aggressive acts on other people and on themselves*

FYI: These three components are essential for effective anger management. Counselors need to talk to their clients and identify the feelings inside that have lead them to become angry, and to identify the differences between being angry and being aggressive. We can teach clients how to control anger, but we need to emphasize that aggression needs to be eliminated.

Anger is just an emotion; it is internal. Counselors can help people to understand how to control their anger. Conversely, aggression includes thoughts or behaviors that intentionally attempt to harm somebody, physically or emotionally. It is critical to emphasize the word “intentionally”. Sometimes people do things by accident, but not intentionally. That is not really aggression. But once one intentionally does something to hurt someone physically or emotionally, it is aggression.

Anger is acceptable because people need to express what they feel inside so that others know how they feel. Aggression, however, is unacceptable.

Clients need to know that anger is a normal emotion, but aggressive behavior is destructive, creates problems and is not a solution. Often, they do not know when they are changing from anger to aggression. To help them understand when this happens, you might want

Slide 3 (cont.)


to analyze past events to find out the cues and signals for when they become aggressive. By knowing what happened before an aggressive outbreak, your clients can learn how to control their anger in the future. It is also important that they know constructive ways to express feelings of anger. This will be covered in this unit.

Clients also need to be aware of the differences between anger and aggressive behavior. Some aggressive behavior is explicit, and some is not so explicit. Shouting and kicking are explicit. Giving someone a dirty look and intentionally making others feel uncomfortable are also aggressive behaviors. Spreading rumors is an aggressive behavior, though not all people recognize it as such. If you are in conflict with somebody and you refuse to talk to him/her because you intentionally want to make him/her feel really bad, that is aggression.


Slide 4

WHEN AN ANGRY EPISODE OCCURS, ALL OF THE FOLLOWING ARE INVOLVED

- Cognition – our thoughts
- Emotions – the physiological arousal that anger produces
- Communication – the way we display our anger to others
- Behaviors – the way we behave
- Effect on others from our anger – fear, hostility

 **Say:** *When we get angry, many these things happen. The language we use, the way we act, the thoughts we have and the emotions we feel combine to effect others. People who do not know the difference between anger and aggression may not recognize the significant problems created and how others perceive and react to this.*

Teaching instructions: Ask the participants if they have experienced people being aggressive towards them. Ask them how they reacted.

 **Say:** *Clients might not recognize all of the feelings they have inside when they are angry. We need to help them to recognize their feelings, so they start to recognize the internal cues when they get angry. The next step is to recognize when they become aggressive. Ask your clients about the last time they were angry, and ask what they were feeling inside.*

Slide 5

SMALL-GROUP EXERCISE

- Identify the steps in controlling anger and avoiding aggressive behavior

Teaching instructions: Divide the participants into small groups, and ask them to write the following questions onto flipchart paper. Each group should then take about 5 minutes to discuss answers to the questions, and write them down.

How do we:


- control anger?
- avoid developing aggressive behavior?

After the groups have brainstormed and recorded their answers, ask a member from each group to present their results.

Slide 6

SKILLS NEEDED TO DEAL WITH ANGER


1. Identify aggressive acts by self and others
2. Identify the range of feelings, including anger, and differentiate anger from the list of others
3. Identify potential consequences to self and others from aggressive acts
4. Identify self-destructive behavior
5. Identify thoughts prior to aggressive acts
6. Identify internal cues to feelings of anger
7. Develop coping mechanisms for dealing with anger
8. Express anger without loss of control

 **Say:** *There are eight skills that people need to help them manage anger in a constructive way. These skills will be helpful in preventing anger from becoming aggressive behavior. We will discuss each of them in detail.*

Slide 7

ANGER MANAGEMENT

- Identify aggressive acts shown by self and others:
- Throwing something
- Kicking someone or something
- Getting in someone's face
- Shoving, grabbing, hitting
- Breaking something
- Calling someone names
- Giving someone a dirty look
- Giving the silent treatment
- Getting others to "gang up"
- Spreading rumors

 **Say:** *Some people confuse anger and aggression. All of the actions on the slide are aggressive and unacceptable. As discussed earlier, some are obvious, while others are more subtle.*

Teaching instructions: Facilitate a large-group discussion about these actions and ask the participants whether they agree with them. It is not uncommon for some participants to feel that some of the actions on the slide do not exemplify aggressive behavior. Use the information below to go into more depth in your discussion.

FYI: The key to understanding aggression is to figure out whether the person intends to hurt another person, either physically or emotionally. These acts shouldn't happen if the person is able to control his/her anger.

It may be helpful to assist clients to identify bullying behavior as aggressive behavior. Bullies tend to rationalize their behavior. They may think to themselves: "I'll show you. I'm better than you. I'm stronger than you. I'm smarter than you, and you deserved it..." If your clients are thinking these thoughts, it may help them to recognize that these thoughts are not as rational as they may seem. This may help them to understand that they are not being angry, but are being aggressive. Bullies often crave attention and recognition.

Unfortunately, some clients may have exhibited aggressive behavior since childhood. Bullies learn that if they are aggressive, they get what they want because other people don't know how to deal with bullying behavior. The aggressive behavior is reinforced and continues. In fact, bullying is actually ineffective because bullies will never receive the response they want most: respect from other people. A bully may be able to command fear, but what he/she wants is respect. Aggression never brings respect.

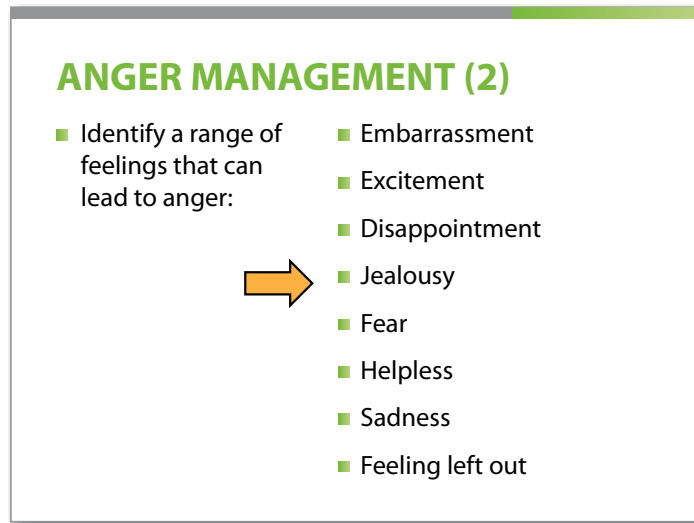
Slide 7 (cont.)


Even though bullying never works, bullies will continue to do it because they do not know how to uncouple anger and aggression. They do not know how to manage anger or the other options they may have. They respond the same way each time - with aggression.

Many of the aggressive people you counsel will secretly tell you that they feel guilty about their behavior. They find it difficult to tell their friends about it, because people expect them to act like a bully and they continue to do so, even though they do not want to. This is called the “expectancy effect”: when people expect you to act in a particular way, it actually encourages you to act that way. The first thing for the client to understand is the difference between anger and aggression. Whether it is physical aggression or psychological aggression, he/she needs to understand that aggression is an unacceptable behavior and does not need to be linked with anger.

To control anger more easily, one needs to be able to recognize when one is getting angry. This unit will address a variety of emotions that are often confused with anger.

Slide 8



 **Say:** *All of these emotions are common. However, some people are confused by these emotions and think they are all the same. It may be helpful for your client to separate out each emotion and discuss them in detail, so that he/she is clear about the differences. Some people may link these feelings to anger, and may not be able to separate them. For instance, some people associate embarrassment with anger, or jealousy with anger and so on. Clients need to recognize that there are other ways of dealing with these emotions, other than with anger.*

Every time your clients experience one of these emotions, they also likely experience anger. There are a variety of reasons that this can happen, but the tendency to pair emotions is strong. Some clients find it difficult to understand that these emotions do not necessarily need to be associated with anger.


It is hard to control anger if you do not know what anger is. We have now separated out the differences between anger and aggression. We have also separated out other common emotions that clients may link to anger.

Now let's take a look at why it is important to think through the consequences of aggressive behavior.

Slide 9

ANGER MANAGEMENT (3)

- Identify potential consequences of aggression to others and yourself...what can that mean for you?
- Physical harm to someone or self
- Destruction of property
- Loss of family/friends
- Loss of job
- Loss of social privileges
- Going to jail
- Getting a bad reputation

 **Say:** People who become aggressive do not usually think through the short- and long-term consequences of their aggression. It can be helpful to discuss the potential consequences of aggressive behavior with your client, as these can have a moderating effect on aggressiveness. The list in the slide includes some examples, but not all of the possibilities.


When discussing aggression with your clients, you may want to use the decision matrix, because clients may be ambivalent about changing their aggressive behaviors. They may not have thought about the short-term and long-term negative consequences, as the short-term, positive consequences of getting what they want may “blind” them to the negative consequences of aggression.

Be sure to help clarify the things that lead to aggressive behavior. Early intervention can minimize the risk of escalation and things getting out of control. You should begin by clarifying the thoughts, behaviors and internal cues that occur prior to aggression. We are going to discuss these in more detail now.

Slide 10

ANGER MANAGEMENT (4)

- Identify self-destructive behavior - this can lead to aggression:
- Negative self-talk
- Blaming everyone else
- Taking everything personally
- Assuming intentions of others
- Drinking too much
- Taking drugs
- Looking for fights

 **Say:** *It is important to understand the antecedents that lead to aggressive behavior. The list in this slide includes some of the common reasons that people become aggressive.*

- *Feeling bad about yourself can lead to frustration and anger; people may strike out against others in an aggressive way.*
- *Feeling that you are always the victim and that everybody else is against you can create internal feelings of hostility.*
- *Taking things out of proportion and taking things personally can also create feelings of hostility and rage.*
- *Assuming the intentions of others' actions, thoughts or behaviors may lead to aggression.*
- *Intoxication from alcohol and other drugs distorts the way we think, and also lowers the minimum threshold of provocation for becoming aggressive.*
- *Finally, some people have a condition called antisocial personality disorder where their capacity to control impulses is poor, and they often react violently with minimal provocation.*

Teaching instructions: Facilitate a brief large-group discussion about each of these points. See whether the group is in general agreement with all of the points, or whether or not there is disagreement.


Slide 11

ANGER MANAGEMENT (5)

- Identify thoughts prior to aggressive acts:



- You did that on purpose...
- You wanted to hurt me...
- You deserve this...
- You never even asked me...
- You're being unreasonable...
- You think you're so good...
- I'll show you...
- You started it...
- There's no justice...

 **Say:** *You may want to help your client identify the thoughts that precede an aggressive act. You can see that, in many of these examples, the person externalizes responsibility for the aggression. It is important to identify the cognitive triggers of aggression as a step toward modifying them and preventing them from recurring in the future.*

Slide 12

ANGER MANAGEMENT (6)

- Identify internal cues to feelings of anger:
 - Stomach gets tight/upset
 - Heart beats faster
 - Clenching fists
 - Feel myself getting flushed
 - Pressure on my temples
 - Sweaty palms
 - Clenched jaw




Say: *There is a series of internal physiological cues that tell us when we are becoming angry. Recognizing these early-warning symptoms can help us control anger and prevent us from progressing on to an aggressive outburst. Often, people who become aggressive do not recognize these internal cues; working through the list and discussing them with your client can be quite helpful. Once your client recognizes these cues, it provides an opportunity to discuss alternative actions that he/she can try when he/she feels these symptoms coming on.*

Teaching instructions: Ask the participants if they recognize any of these symptoms when they become angry, and how they react to them.

Slide 13

GENERAL COPING MECHANISMS FOR DEALING WITH ANGER (1)

1. Exercise everyday
2. Eat well
3. Get enough sleep
4. Find fun distractions
5. Make good decisions about what you see and hear
6. Learn to relax
 - Slowly repeat a calm word or phrase, for example “take it easy”,
 - Non-strenuous, slow yoga-like exercises

 **Say:** *Balance in life is essential. Not all of these options are right for everyone. It depends on an individual's needs. This and the next slide cover general mechanisms for coping with life to reduce the frequency of angry episodes and to prevent anger from turning into aggression.*


- *Exercise is an excellent way to reduce stress. People who are stress-free are less likely to become angry.*
- *Diet and nutrition are also important. A good, balanced diet reduces the likelihood that those internal physiological cues will exist. For instance, some people who have low blood-sugar levels will develop feelings similar to some of the physiological cues that are associated with anger. This is an example of how people may confuse those cues and become angry without purpose.*
- *People who are overtired are prone to stress, jumping to the wrong conclusions, and other antecedents that are likely to lead to anger.*

Teaching instructions: The mechanisms continue on the next page.

Slide 14


GENERAL COPING MECHANISMS TO DEAL WITH ANGER (2)

7. Take time out
8. Choose friends who make you feel good
9. Learn to forgive and forget
10. Know your feelings
11. Write about those feelings

 **Say:** *These are some additional mechanisms for coping. Taking time out does not mean locking yourself in a room. It means spending some time by yourself to calm down when you feel angry. Taking time out will be most effective if it is voluntary.*

SPECIFIC COPING MECHANISMS FOR DEALING WITH ANGER (1)

- Find your anger triggers
 - develop strategies for those triggers
- Develop better communication skills
- Admit you have a problem and be willing to change
- Get assertiveness training

 **Say:** *Specific mechanisms for coping depend upon the individual antecedents of anger. Taking a detailed history of the client's triggers will help you to identify and develop specific strategies to prevent and intervene early. Remember that in the stages of change, not everybody is committed to action. Some clients will still be in the contemplation or pre-contemplation phase.*

As mentioned earlier, aggression is an unacceptable form of communication. Teaching people how to communicate more effectively and negotiate may prevent aggression from occurring. We will also cover conflict resolution and assertiveness in this unit. It is critical to differentiate between being assertive and being aggressive to prevent people from using aggression to control others' behaviors. People who are aggressive or angry often confuse assertiveness, aggression and anger.


We will discuss and rehearse refusal skills in this unit as well. Refusal skills are used to resist somebody's will. Refusing is distinct from being angry or aggressive. Assertiveness is not used to hurt another person, physically or psychologically.

Slide 16

SPECIFIC COPING MECHANISMS FOR DEALING WITH ANGER (2)

- Express angry feelings in ways that are fair to others and yourself
- Use fair words (e.g. "I feel X when you...")




 **Say:** Have a look at the face in this slide. It is obvious that this person is unhappy. While his face shows anger, this man might also become aggressive at any moment.

Anger management is not about telling someone he/she cannot get angry. It is about controlling the quantity and expression of one's anger so that it is communicated to people in a fair and safe way. You should never let yourself become too angry. It can be very difficult to communicate with others in a fair way when you are too wound up.

It is a skill to express anger in a way that you do not lose control. This means being fair towards others and not intentionally trying to hurt them physically or emotionally. By constructing feelings around sentences such as, "I feel X when you Y", you will be able to change your behaviors and communicate reasonably.

SPECIFIC COPING MECHANISMS FOR DEALING WITH ANGER (3) ANGER MANAGEMENT STEPS

- Calm down
- Show mutual respect
- Identify the problem
- Find solutions
- Choose the best solution
- Congratulate yourself
- Review the solution that was selected

 **Say:** *Responding to an angry situation requires forward planning. The slide lists helpful steps that clients can use to manage situations where they feel emerging anger.*

Teaching instructions: Discuss each step in detail with the participants. Ask the participants to think about how they would apply some of these tactics on their own. Use the information below to fill gaps in the discussion.


FYI: The first step is to take the heat out of the emotion and to calm down. By showing respect for the other individual's point of view, you can defuse the situation. Name the problem to help clarify what has caused the anger, as the other person may not even be aware that it is an issue. Brainstorming solutions and working co-operatively together can help clarify both of you want to solve the problem. Once you have defused the situation, you should take some time to congratulate yourself for overcoming anger and averting aggression.

Slide 18

SUMMARY

Help the client to control anger and prevent aggression:

- Know the difference between anger and aggression
- Differentiate anger from other feelings that are often confused or linked
- Identify self-destructive behaviors and thoughts prior to aggression
- Identify internal cues for anger
- Develop coping mechanisms for dealing with anger
- Express anger without loss of control

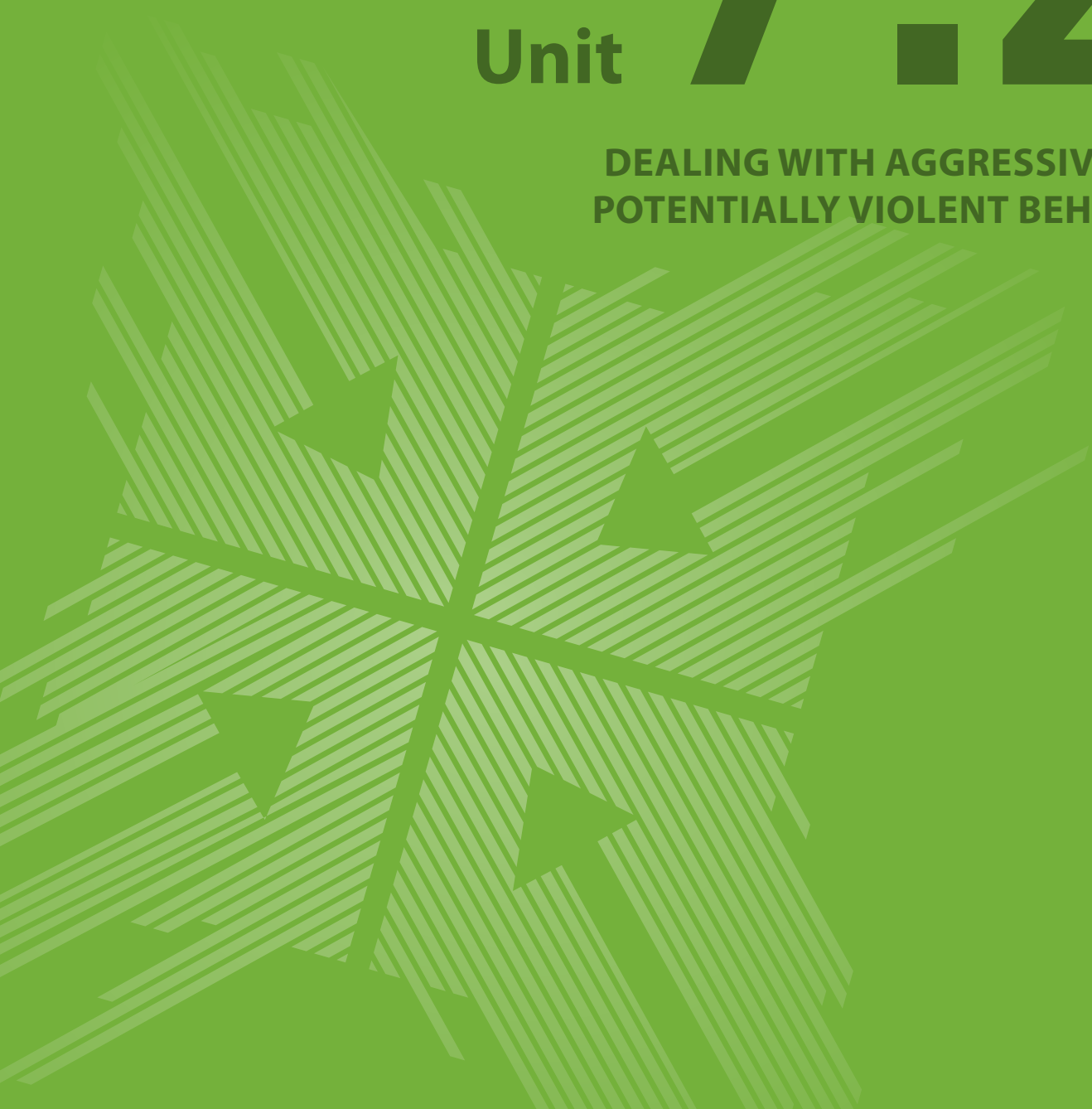
 **Say:** *In summary, there are a number of steps you can take to help your clients control their anger and prevent aggressive outburst.*

Teaching instructions: Review the key point of this unit. Use the bullets on the slide to present on useful steps for controlling aggression.

Thank the participants for their participation in the discussions and ask them if they have any questions. Answer the questions that pertain to this or previous units. If participants ask questions about material that will be covered in a later unit, request that they save their questions for that unit.

Unit 7.2

DEALING WITH AGGRESSIVE AND
POTENTIALLY VIOLENT BEHAVIOR



OVERVIEW

I. Introduction

2 Min

Introduce the unit by explaining that you will discuss the key concepts in dealing with aggressive and potentially violent behavior.

II. Presentation

110 Min

Use the PowerPoint slides and small-group exercises to train on how to deal with aggressive and potentially violent behavior.

III. Conclusion

8 Min

Review the key points of this unit and answer participants' questions (if any).

Unit 7.2: Dealing with Aggressive and Potentially Violent Behavior

Goal: To help participants understand how to deal with aggressive and potentially violent behavior.

Time: 120 minutes

Objectives: At the end of this unit, participants will be able to:

- identify aggressive and potentially violent behavior
- identify ways to defuse and avoid potentially violent confrontations
- develop strategies to manage intimidation, verbal abuse and threats
- explain when and how to exit a scene
- identify the necessary personal safety steps to avoid or reduce physical injury
- assess and manage a range of risky or dangerous situations

Methodology:


- Presentation
- Small-group discussions
- Role-play

Teaching aids:

- PowerPoint slides
- LCD projector
- Flipchart and papers
- Markers

Slide 1



 **Say:** *Today we will discuss methods and skills for dealing with aggressive and potentially violent behavior. These methods and skills will not only benefit your future work with clients, but will also help you when dealing with other angry people.*

While you may not have to deal with violent situation very often, you should anticipate clients who are potentially violent. They can harm you physically or make you angry, which will influence your psychology. Clients can also threaten other people or clients who are waiting for their turn to meet you, which may increase the chances of additional violence and/or aggression.

Slide 2

LEARNING OBJECTIVES

At the end of this unit, participants will be able to:

- identify aggressive and potentially violent behavior
- identify ways to defuse and avoid potentially violent confrontations
- develop strategies to manage intimidation, verbal abuse and threats
- explain when and how to exit a scene
- identify the necessary personal safety steps to avoid or reduce physical injury
- assess and manage a range of risky or dangerous situations

Teaching instructions: Use the bullets on the slide to present directly.


Slide 3

IDENTIFYING AGGRESSIVE AND POTENTIALLY VIOLENT BEHAVIOR

Small-Group Exercise:

- What is your definition of aggressive behavior?
- What is the difference between angry and aggressive behavior?
- Describe a situation you have had with a person being aggressive
 - What behavior did he/she display?
 - Were there warning signs? If so, what were they?
 - What was your response to the situation?

Teaching instructions: Divide the participants into small groups of 5, and ask them to write the following questions from the slide onto flipchart paper and work through them as a group. Allow the groups 10 minutes to work together, and then ask a member from each group to present their results.

 **Say:** *It is important to be clear that there are differences between anger and aggression. It can be very helpful to assist clients to understand that it is normal to get angry, but there is no place for aggressive behavior. Aggressive behavior is unacceptable.*

Anger is a normal emotion, but aggressive behavior is destructive, creates problems and is not a solution. People become aggressive with the intention of either physically or psychologically harming another person. Aggressive behavior can be explicit or implicit. Shouting and kicking are explicit, but giving someone a dirty look is also aggressive. Aggressive behavior also includes invasion of someone's personal space to make someone feel uncomfortable, and spreading rumors (though not everyone recognizes the latter as aggressive).

When we get angry, there are multiple elements of that anger, which include:

- *cognitive*
- *emotional*
- *vocal (the language we use)*
- *behavioral*

Anger is usually focused on an issue. However, aggression is directed away from the issue, either towards others, the environment or the self.

Slide 4

3 STEP APPROACH TO MANAGING AGGRESSION

Step 1 – Defuse aggressive behavior


- **C**lear calm communication
- **E**mpathetic listening, acknowledgement and clarification

Step 2 – Control aggression

- **N**egotiate assertively and clearly
- **T**ake safety steps, space and scan

Step 3 – Terminate the interaction

- **R**emove yourself or ask client to leave
- **E**vade injury and call for assistance
- **D**efend yourself

 **Say:** *There are three main steps to managing aggression which can be remembered by the acronym CENTRED, which utilizes the British and Australian spelling of the word “centered”.*


Teaching instructions: Read through the steps in Slide 5.

Slide 5

Staying **CENTERED** and in **CONTROL** is one of the most important steps in dealing with aggressive and potentially violent clients.

Competing and/or engaging with aggressive people will only escalate the situation.

**YOU MAY NOT BE ABLE TO MAINTAIN
COMPLETE CONTROL OF THE SITUATION**

 **Say:** *We will discuss each of the steps and components to maintain control of potentially aggressive situations. It may not be possible to stay completely in control of the situation and you may need to leave, but if you follow each of the steps, it will help to defuse the situation and prevent any further escalation.*

Slide 6

STEP 1- DEFUSING AGGRESSIVE BEHAVIOR

Small-Group Exercise:

- What are some of the reasons why people become aggressive (work-specific and in general)?
- What are some of the things that we do that might escalate or inflame the situation?
- How should we communicate with aggressive people (voice tone, body language, words that help)?
- What are the key steps in the listening process? How do people know that you are listening to them?
- What other techniques you could use to help calm an aggressive person?

Teaching instructions: Divide the participants into small groups, and ask each group to choose 1 question from Slide 7. Ask the groups to write their answers on flipchart paper and report their findings back to the main group. Allow 5 minutes for small-group discussion, and about 5 minutes for report-backs (total).

Ask a member from each group to present their group's results. Use the following slides to expand upon the points raised in the group discussions and to clarify any misunderstandings.


Slide 7

STEP 1 – DEFUSING AGGRESSIVE BEHAVIOR

CENTRED model

Clear calm communication

- Voice tone should be calm and confident – slightly deeper
- Speak clearly and a little slower
- Project a confident, neutral posture
- Use simple words and sentences – keep it simple
- Avoid any blaming/derogatory statements – keep to the problem

 **Say:** *Stay calm and show your professionalism. When clients are angry, you should recognize that this is because the client is having trouble. You should not get angry with them, as this will only escalate the situation. Remind them of the expectations of behavior in the clinic and your previous meetings. Remind them of the good relationship that you have established. Remember to stay calm.*

Do not approach aggressive clients. You should stand still and talk calmly. If he/she is carrying weapons, you should call the police. Remember to maintain the appropriate distance between counselors and clients: not too far, not too close. You should remain at arm's length to avoid being struck by the client.

You should face the client and mind the way you speak. Even if a client shouts, your voice must be soft. Do not use any body language that the client may perceive as intimidating (such as rolling up your sleeves).

Slide 8


STEP 1 – DEFUSING AGGRESSIVE BEHAVIOR (continued)

CENTRED model

Empathetic listening, acknowledgement and clarification


- Be patient, allow people time to tell their story – attentive silence
- Acknowledge and follow the conversation by using obvious verbal and non-verbal indicators
- Clarify main themes and obvious feelings when reflecting content
- Use neutral wording, e.g. "I can see that you are angry"
- Use questioning techniques to help clarify or control the interaction

Treat people as you would like to be treated - Respect

 **Say:** Ask aggressive clients why they are angry. Give them a chance to express their feelings and concerns. Some clients will calm down if they start talking about the reasons why they are angry.

Slide 9


NEUTRAL WORDING	
Escalator	Neutral
■ You didn't do this right	■ I can see there are a few areas we need to look at
■ You're wrong	■ I can see there has been some miscommunication
■ You haven't done this properly	■ A lot of people have problems with this

 **Say:** *Your words will influence the intensity of your client's anger. You can defuse your client's aggression with a soft warning such as, "I can see you're angry, but this isn't going to help." Finish on the issue on which you need to focus. Take a look at some of the language on the slide. The "escalator" language is likely to anger the client further, while the neutral language is more likely to calm, or at least not further anger the client.*

Slide 10

TECHNICAL SKILLS

- Avoid using absolutes
- Partly agree with people (as needed)
- Provide options
- Distract or divert attention
- Suggest talking again when calmer
- Refreshment
- Ask permission to take notes
- Get a second opinion
- Change the environment

 **Say:** *If the client is still aggressive, you will need to apply your counseling skills to improve the situation. Don't forget that you are not forced to counsel. If necessary, you can stop the counseling session.*

Try to give the client choices and let him/her make the most appropriate choice.

If the client is still aggressive and other clients are present, you should take him/her away from the other people to make sure he/she calms down and does not harm anyone else. Removing the client from others can also defuse the situation.

Slide 11

STEP 2 – CONTROLLING AGGRESSIVE BEHAVIOR

Small-Group Exercise


- What should you do in a situation where someone is verbally abusing you?
- What should you do if someone is threatening you?
- What are the key things to avoid when people are being abusive or aggressive?
- What are the important things to consider when negotiating with aggressive people (e.g. body language, voice tone, words, etc.)?

Teaching instructions: Divide the participants into 4 small groups. Ask each group to concentrate on one of the questions on Slide 12 for 5 minutes. They should write their findings on flipchart paper. Then ask a member of each group to report back to the larger group. Allow about 10-12 minutes for reporting back. Use the following slides to expand upon the points raised in the group discussions and to clarify any misunderstandings.

Slide 12

RECOGNIZING THE SIGNS OF VIOLENCE: READING BODY LANGUAGE

- No 100% guaranteed way to predict violence
- Raised voice threats clenched fists shaking aunts load breathing skin flushed rapid speech dramatic behavior change look away from you a lot flaring nostrils.
- Listen to your “gut feelings”

 **Say:** *You can increase the likelihood of predicting when an aggressive person will become violent by observing his/her body language. There is no perfect way of identifying this, but you will typically see an escalation in the tone and volume of his/her voice. The person may look away and perhaps clench his/her fists. The skin around his/her neck and face may be flushed and the person could begin shaking. If you feel that he/she is about to become violent, you are probably right.*


Slide 13

STEP 2- CONTROLLING AGGRESSIVE BEHAVIOR

CENTRED model

Negotiate assertively and clearly

- Stay calm and look confident
- Use neutral, confident body language
- Use gestures to strengthen the message
- Use simple, concise messages that focus on the outcome
- Use "I" statements
- Use repetition
- Set boundaries

 **Say:** Use neutral, confident body language. Stand upright and appear confident. Try the following:

- Look like you mean what you're saying
- Use gestures to strengthen the message
- Use simple, concise messages that focus on the outcome
- Use "I" statements: "I will need to terminate the interview if you continue to speak to me that way"
- Use repetition: repetition is a good way to reinforce your intentions. It is also helpful for clients who may not be listening because they are focused on what they are saying
- Set boundaries

You may also need to use some crisis communication strategies:

- Control aggression: give formal, firm warnings
- Negotiate assertively and clearly: give firm warnings such as, "I will have to ask you to leave if you don't stop abusing me"
- In cases of extreme aggression, you may need to take control and not use soft warnings
- Take safety steps, keep space and scan around you


Slide 14

STEP 2- CONTROLLING AGGRESSIVE BEHAVIOR (cont)

CENTRED model

Take safety steps, keep space and scan around you

- Some situations require you to withdraw from the situation immediately and not put yourself at risk
- Other strategies
 - Seek assistance from a colleague, supervisor or manager

 **Say:** *You may need to move gracefully around the client. While looking at the client, move towards the exit so you can leave the situation quickly. Do not face him/her front on, but turn your body to one side to make it more difficult for him/her to strike you, if he/she does become violent. Stay close to the exit.*


Don't get too close, stay at arm's length.

Look for obstacles that may prevent a speedy exit.

STEP 3 - TERMINATE THE INTERACTION

CENTRED model


- **R**emove yourself or ask client to leave
- **E**vade injury and call for assistance
- **D**efend yourself

 **Say:** *Leave, walk quickly away, run, do whatever you need to do to avoid injury.*

Slide 16

LEAVING A THREATENING SITUATION

- Agree with your partner when you will leave before you go out to see the client
- Have a plan and identify exits before you start
- Create a safety zone (2-3 meters) if possible before turning your back
- Always turn to your side before turning your back completely on someone
- When you decide to back off, do so without delay
- Make positive assertive movements

 **Say:** *It is important that counseling center staff discuss exit strategies before a potentially violent situation happens. It is much easier to respond to difficult situations if you have a plan and are clear on what to do. If one staff member decides to leave the situation, then all staff should go at the same time. You should not leave anyone in a vulnerable position.*

CRISIS COMMUNICATION STRATEGIES

- 1. Defusing aggression** – informal soft warning
 - Clear, calm, communication
 - Empathetic listening, acknowledgement and clarification
- 2. Controlling aggression** – formal firm warning
 - Negotiate assertively and clearly
 - Take safety steps, keep space and scan around you
- 3. Terminate the interaction** – leave or hang up
 - Remove yourself or ask client to leave
 - Evade injury and call for assistance
 - Defend yourself

Teaching instructions: Review the lessons learned to this point using the information on the slide and below.

FYI: Crisis communication strategies

1. Defuse aggression - informal soft warnings

- Finish on the issue you need to focus on
- Use soft warnings such as, “I can see you’re angry but this isn’t going to help”

2. Control aggression - formal, firm warnings

- Negotiate assertively and clearly
- Use firm warnings such as, “I will have to ask you to leave if you don’t stop abusing me”
- With extreme aggression, you may need to take control and not use soft warnings
- Take safety steps, keep space and scan around you

3. Terminate the interaction - leave or hang up

- Ask them to leave
- Use a strong warning such as, “I don’t want to call the police; please leave now.”
- Avoid threatening language
- Seek assistance if needed

Slide 18

DEVELOPING SELF-CONTROL

Small-Group Exercise


- What can you do if you feel you are losing control/patience/tolerance and a client is getting angry with you?
- What can you do if you feel your team member is being aggressive with a client?
- What are some of the physical symptoms people experience when they get scared?
- What can people do to help manage fear?

Teaching instructions: Divide the participants into 4 small groups. Ask each group to concentrate on 1 topic on the slide for 5 minutes. Ask them to write their findings on flipchart paper, and then ask 1 member from each group to report back to the larger group. Allow about 10-12 minutes for reporting back. Use the remaining slides to expand on the points raised in the group discussions and to clarify any misunderstandings or disagreements.

Slide 19

What to do if you lose control

- Take a deep breath
- Tell yourself:
 - Stay calm
 - Stay focused
 - Focus on what you SHOULD do, not what you SHOULD NOT do
- Take time out
 - Move away
 - Take notes


 **Say:** *In situations where you think you may lose control or do lose control, follow the steps in this slide*

Teaching instructions: Use the bullets on the slide to present directly.

Slide 20

What to do if a team member loses control

- Remove him/her from the situation
 - “You have a phone call.”
 - Team members should leave without losing face
 - Clients should not feel like they have material to use against the team member or service center later
- May have to ask client to leave if the staff member refuses to leave
- Step in and ask the client to explain what happened
 - Gives other staff member time to refocus
 - Stay calm
 - Stay focused
 - Focus on what you SHOULD do, not what you SHOULD NOT do

 **Say:** *In situations where another staff member loses control, follow the steps in this slide.*

Teaching instructions: Use the bullets on the slide to present directly

Slide 21

OVERCOMING FEAR AND DEVELOPING SELF CONTROL


STOP – losing control

Self-talk

Think rationally

One step at a time

Problem solve actions

 **Say:** *In order to overcome fears you may have and to develop and maintain self-control, remember the STOP method.*

Self-talk

- *Use positive sentences and breathing techniques to stay calm*

Think rationally

- *Concentrate on what is happening*
- *Challenge irrational thoughts*

One step at a time

- *Focus on the actual behavior*

Problem solve actions

- *What do I do now?*
- *Problem solve and keep thinking*

People who are scared may feel their heart racing, sick in the stomach, and/or their faces flush. Their voices may stammer. It is possible to manage fear through self-talking and deep breathing. Having a plan to deal with a potentially difficult situation also helps to create a sense of control. However, you may need to get support or backup if things get out of control.

Slide 22

SUMMARY: 3-STEP APPROACH

Step 1 - Defuse aggressive behavior

- Clear calm communication
- Empathetic listening, acknowledgement and clarification


Step 2 - Control aggression

- Negotiate assertively and clearly
- Take safety steps, space and scan

Step 3 - Terminate the interaction

- Remove yourself or ask client to leave
- Evade injury and call for assistance
- Defend yourself

Teaching instructions: Review the key points of this unit.

 **Say:** *In this unit, we have discussed ways to manage aggression. Each of these three steps has individual components that are important in gauging the danger of a situation and defusing the situation. The soft warning in Step 1 helps to remind the person of normal behavior between adults. The formal, firm warning in Step 2 helps to identify consequences if the aggressive behavior continues. The harsh warning of Step 3 helps to terminate the interaction and to ensure you are kept in a position of safety.*

Sometimes you will need to go directly to Step 3 because of the degree of danger in the situation. By implementing these steps in order, you may never need to get to Step 3.

Teaching instructions: Thank the participants for their participation in the discussions and ask them if they have any questions. Answer the questions that pertain to this or previous units. If participants ask questions about material that will be covered in a later unit, request that they save their questions for that unit.

Unit 7.3

CONFLICT RESOLUTION



OVERVIEW

I. Introduction

2 Min

Introduce the unit by explaining that you will discuss the key concepts of conflict resolution.

II. Presentation

80 Min

Use the PowerPoint slides, case study and small-group exercises to train on conflict resolution.

III. Conclusion

8 Min

Review the key points of this unit and answer participants' questions (if any).

Unit 7.3: Conflict Resolution

Goal: To help participants gain a basic understanding of the tools available to resolve conflict between two individuals or groups.

Time: 90 minutes

Objectives: At the end of this unit, participants will be able to:

- define conflict
- identify conflict resolution styles
- identify conflict resolution steps
- demonstrate an understanding of the principles through practical exercises and resolution of potential conflicts

Methodology:


- Presentation
- Situational case study
- Small-group exercises

Teaching aids:

- PowerPoint slides
- LCD projector
- Flipchart and paper
- Markers
- Handout #7.1 Case Study: Conflict resolution
- Case Study: Possible answers (located after Handout 7.1)

Slide 1



 **Say:** *Conflict between the individuals or groups you work with can destroy your attempts to change client behavior, or at least make it much more difficult. Conflict resolution techniques are extremely valuable and can serve you in your personal life and when assisting your clients to deal with their relationships.*

Conflict resolution is a technique that can be learned through reading and a great deal of practice. The goal of resolution should be to end the conflict through a win/win situation whenever possible — however, outcomes will always depend on a number of factors.

Slide 2

LEARNING OBJECTIVES

At the end of this session, participants will be able to:

- define conflict
- identify conflict resolution styles
- identify conflict resolution steps
- demonstrate an understanding of the principles through practical exercises and resolution of potential conflicts


Teaching instructions: Use the bullets on the slide to present directly.

Slide 3

WHAT IS CONFLICT?

- Conflict
 - Disagreement, struggle or fight
- Conflicts are unavoidable in human relations
 - Although conflicts are a normal part of relationships, not knowing how to handle them can cause major relationship and health problems


Teaching instructions: Show only the title of this slide and proceed with the text below.

 **Say:** *Everyone has to deal with conflict. While conflict is unavoidable in human relations, not knowing how to handle it can cause major problems in your relationships and health.*

There are many different conflict-resolution strategies that one can choose to deal with a disagreement, and each of them has its own consequences. Some people choose to tackle uncomfortable situations with aggressive language and insults; others take a more diplomatic approach, while some disagree in a passive way and attempt to compromise politely.

Before we proceed, we should define conflict.

Teaching instructions: Ask the participants to define conflict. Allow the participants to provide some answers and record them on the flipchart paper. Then reveal the bullets on the slide.

 **Say:** *Conflict is generally a disagreement, struggle or fight (either physical or verbal). However, you and your friend might have different perceptions about an issue. This might not qualify as a conflict unless it prevents you from reaching a common goal, or it affects one of your interests.*

Slide 4

SITUATIONAL CASE STUDY: IDENTIFYING CONFLICT RESPONSE STYLES

How would you respond (behaviorally) to this conflict?

Teaching instructions: Give each participant a copy of Handout #7.1 Case Study: Conflict resolution (at the end of this unit) and provide them with 10 minutes to read it through and think about how they might respond to the example. Encourage them to analyze the case study more closely by asking them a range of questions. Ask them questions about what happened and why it might have happened. Then provide them with an additional 5 minutes to write down what they might do in response.

Facilitate a large-group discussion by asking the participants to talk about their responses, and while recording them on flipchart paper, group their responses in the following categories:


- conflict avoidance
- conflict confrontation
- conflict resolution

Note: Possible answers to the Case Study are provided just following Handout #7.1 Case Study: Conflict resolution

Slide 5

CONFLICT RESPONSE STYLES

- **Avoidance (Lose - Lose) - (I don't care situation)**
 - Person avoids disagreements at all costs
 - Does not tell others when disagrees
 - Does not tell others about feelings
- **Confrontation (Win – Lose Situation)**
 - Person is hostile, defiant and aggressive in disagreement
 - Confronts others
 - His/her view is the only one worth considering
- **Resolution (Win – Win Situation)**
 - Uses conflict resolution skills
 - Settles disagreements in a responsible way
 - Remains in control
 - Allows for a win-win situation

 **Say:** When you use a **conflict-avoiding** style, you avoid bringing up possible differences, or perhaps deny that a conflict even exists. There is often limited communication or avoidance of contact, and the issues fester unresolved. (Lose-Lose).

When you use a **confrontational** style, you move directly to meet your needs in the situation, with less regard for the needs of the others. This style is often characterized by aggressive communication and little listening. (Win-Lose) or (Lose-Lose).

When you use a collaborating, **resolution** style, you assert your needs and interests clearly and specifically, while hearing and respecting those of the other person. You try to consider the big picture and maximize relationships. (Win-Win).

There is no right or wrong style. Each conflict management style has its own strengths and weaknesses. The goal is simply to use the right style for your situation.

Slide 6

CONFLICT IS MOST LIKELY TO OCCUR WHEN...

- There is a high level of interdependence
- There are different beliefs
- Resources/rewards are scarce
- The situation is stressful
- There is uncertainty
- **Communication is not clear**

Teaching instructions: Ask the participants why there was a conflict between the two brothers in the case study. Allow a few minutes for participants to respond.


Say: *These are some of the most likely reasons for conflicts to occur. Notice that unclear communication is in red — this is often the major conflict culprit. This is because miscommunication, or the lack of communication, often leads us to misperceptions. It is not always easy to communicate, even between people who have a background and shared values and experiences. Couples who have lived with each other for 30 years still have misunderstandings. Therefore, it is not surprising to find poor communication between people who do not know each other well and who may feel hostile and suspicious towards each other. Whatever you say, you should expect that the other side will almost always hear something different.*

CONFLICT: A TOUGH JOB

Perceptions of possible outcomes:

- Win-Lose
- Both partially satisfied
- Irresolvable
- BUT, conflict may have positive effects
 - Increased team effort
 - Better understanding of two parties
 - Impetus for change

NOTE: Still not a good reason to seek conflict!

 **Say:** *It can be difficult to resolve conflict. There may also be a variety of perceptions of the outcomes of a resolved conflict. People often perceive that conflict resolution will end with one or the other party losing (and that is sometimes the case). Many people feel that negotiation will result in no winner, but two partially satisfied parties (zero sum). Others may feel their situation is totally irresolvable. Although this may be the case, it is important that you do not assume this to be true without going through the process of investigation and mediation. It is always worth the effort.*

Some conflict may actually be healthy for your organization. People often work harder in competitive environments. In addition, we may not always say what we feel until we face conflict. Conflict is also often an impetus for change, and sometimes change is needed. However, none of these is a good enough reason to seek conflict! It is a risky business to induce conflict in hopes of a positive outcome.

Slide 8

CONFLICT RESOLUTION STEPS

1. Prepare: mentally/physically, time and place; take time to think
2. Keep people and problem separated
3. Explain both sides: define the conflict
4. Put yourself in their shoes
5. Share concerns and needs
6. Brainstorm solutions for compromise: active listening
7. Start with what's doable
8. Develop forgiveness skills
9. Agree on a win-win solution

COMMUNICATION


Teaching instructions: Show only the title of this slide and facilitate a brainstorming session with the participants by asking them what steps they think are important for successful conflict resolution. Record their responses on flipchart paper. Then reveal the bullets on the slide and compare them to the list on the flipchart. Fill in any gaps as needed.

FYI:

- **Prepare:** Be sure to prepare mentally and physically and take time to think. Start by choosing a suitable location and seating arrangement that places all parties on an equal footing. It is also important to be mentally prepared by knowing the facts. (It will be obvious whether or not you have done your homework).
- **Keep the people and the problem separated:** Everyone knows how hard it is to deal with a problem without people misunderstanding each other, getting angry or upset, and/or taking things personally. Keep the discussion focused on the process — not the people. This is not to say that people cannot be wrong, but focus on statements and actions, not the person. Try to think strategically — what will be the result if you remove this person from the scene? Is there a chance that another person would do the same thing? Is there a safeguard that can be put in place to prevent someone else from making the same mistakes? This kind of thinking will help focus on repairing a process in the present and for the long-term.
- **Explain both sides:** Define the conflict. It also shows you understand their positions and if you have misunderstood, it gives them a chance to correct any misunderstandings.

Slide 8 (cont.)


- **Put yourself in their shoes:** Considering the implications for someone else's feelings will help you move toward compromise.
- **List shared concerns and need:** It will help if your counterparts understand your motivations.
- **Brainstorm solutions for compromise:** Be sure to use active listening.
- **Start with what is doable:** Success builds success and future cooperation.
- **Develop forgiveness skills:** We all make mistakes in life. To forgive and forget is a sign of maturity.
- **Agree on a win/win solution:** Always seek a win-win solution whenever it is possible (time, resources, and significance of the conflict may influence).

 **Say:** *It is important to note that we earlier identified communication as the most common cause of conflict. The key to conflict resolution is solid communication.*

Slide 9

CHOOSE A PLACE TO RESOLVE THE CONFLICT FAR FROM THE BATTLEGROUND

- Armies tend to sign treaties far from war zones
 - Too many emotions are rooted in the place where the conflict took/takes place


 **Say:** *You should choose a place far away from the locus of the problem to resolve the conflict. Armies tend to sign treaties far from war zones, because there are too many emotions there. Anyone who has been fighting should go to a different place to resolve the conflict. Neutral territory is critical. The other person should not feel you have chosen that place to give you an unfair advantage.*

For example, some married couples will go to coffee shops to discuss and disentangle their problems and misunderstandings: This kind of place is more relaxing and it is more difficult for them to raise their voices, even if they want to, because they are worried about what other people in the coffee shop will think.

IT IS NOT 'YOU AGAINST ME'

It is 'you and me against the problem'

- The problem is the problem
 - Focusing on the problem, and not the person with the problem, will enhance cooperation


 **Say:** *The problem is the problem. Most people and nations go into battle convinced, "I'm right, you're wrong; I'm good, you're evil; I'm wise, you're foolish; I'm going to win, you're going to lose." Even if one side does win, the first reaction of the loser is, "I want a rematch; I'll come back with meaner words, harder fists and bigger bombs. Then you'll learn, then you'll be good and then we'll have peace forever."*

This is an illusion, but few can give it up. By focusing on the problem, and not the person with the problem, you will increase the likelihood of cooperating in the end.

Slide 11

DEFINE THE CONFLICT

- Define the conflict objectively
 - If both sides can define what they are fighting about, the chances are increased that misperceptions will be clarified

 **Say:** *If you define the conflict objectively, rather than subjectively — which is how most of us do it — you should be able to agree amongst all parties that there needs to be a new way of doing things.*

Sociologists report that in as many as 75% of husband-wife fights, the combatants are battling over different issues. The husband may be enraged over what his wife said or did that morning. The wife will be angry about what her husband said or did 10 weeks ago. They cannot settle their conflict because they do not have agreement on what the conflict about. "It's this to him, and that to her."

Slide 12

WORK ON ACTIVE LISTENING, NOT PASSIVE HEARING

- Conflicts escalate when you try to talk more than listen
- Listening well is an act of caring
- If you are a good listener, you have many friends
- If you are a poor listener, you have many acquaintances
- Anatomically, we are made to listen more than speak, which is why we have two ears and one mouth


 **Say:** Listen actively and acknowledge what is being said.

The need to listen is obvious, but it is difficult to listen well, especially under the stress of an ongoing negotiation or conflict. Listening enables you to understand the other party's perception and understand their emotions. Active listening improves not only what you hear, but also what your counterpart is trying to say. If you pay attention and occasionally say, "Did I understand correctly that you are saying that...?" your counterpart will realize that you really care about what he/she is saying. He/she will feel the satisfaction of being heard and understood.

Slide 13


PUT YOURSELF IN THEIR SHOES

- How you see the world depends on where you sit. People tend to see what they want to see.
- The ability to see the situation as the other side sees it, as difficult as it may be, is one of the most important skills a negotiator can possess.

 **Say:** *The way you see the world depends on where you sit. People tend to see what they want to see. The ability to see the situation as the other side sees it, as difficult as it may be, is one of the most important skills a negotiator can possess. Therefore, it is important that you put yourself into the position of the other party and try to understand their perspective of the problem, their feelings and emotions, and their needs and concerns.*

LIST SHARED CONCERNS AND NEEDS

- Collaboration will increase if the strengths of the relationship - the shared concerns and needs - are given more attention than the unshared views.
 - Agree on what you agree on and focus on these


 **Say:** *It is important to recognize that each side has multiple interests, concerns and needs. This is the case in almost every negotiation. One party's needs might be very different from the other. Therefore, it is critical for both parties to discuss and identify each other's concerns and needs to see if they have any in common. The collaboration will increase if it is strengthened by shared concerns and needs, and if these are given more attention than unshared views.*

Make a list to sort out the various interests of each side. It helps to write them down as they occur to you. This will not only help you remember them, it will also enable you to improve the quality of your assessment as you learn new information and prioritize interests. Furthermore, it may stimulate ideas about how you can meet these needs and interests.

Slide 15

START WITH WHAT IS DOABLE

- Restoration of peace cannot be done quickly.
- If it took a long time for the dispute to begin, it will take time to end it.
- Work on one small, doable thing rather than many large undoable things.


 **Say:** *You cannot restore peace quickly. If it took a long time for the dispute to begin, it will take time to end it. Work on one small, doable thing rather than many large tasks that are complicated and difficult to achieve.*

It is almost always a considerably small wound that causes the first hurt in a relationship. However, ignoring even a small problem may make it worse. It may make it bigger than the original problem.

Slide 16

DEVELOP FORGIVENESS SKILLS

- Forgiveness looks forward; vengeance looks backward.


 **Say:** *After a conflict, many people walk away feeling angry and vengeful.*

Forgiveness looks forward; vengeance looks backward. Try to keep focused on the future, rather than dwelling on the past.

Slide 17

DO THESE CONFLICT RESOLUTION STEPS ALWAYS WORK?

- No!
- Sometimes conflicting parties are so emotionally wounded or ideologically bound that nothing can stop the conflict.
- But many conflicts can be resolved provided these strategies are used appropriately.


 **Say:** *These conflict resolution steps do not always work because sometimes the conflicting partners are so emotionally wounded or ideologically dogmatic that nothing can stop the conflict. However, it is possible to resolve most conflicts if the parties involved know appropriate strategies for dealing with them.*

Slide 18

SUMMARY

- Define the conflict
 - Consider appropriate conflict styles
 - Consider appropriate conflict resolution steps
- Practice
 - Conflict resolution is situational
 - Your counseling skills tie into conflict resolution

Teaching instructions: Review the key points of this unit.

 **Say:** *You can see from the case study that conflict resolution is no easy task. In this unit, we began by defining conflict and we addressed three conflict-resolution styles, and steps towards effective negotiation. We also discussed the fact there is no single path that will suite every situation — the strategy needs to be tailored to fit the situation. Finally, we tied this lesson to some of the other lessons in this course (counseling skills). This unit is only a primer for further education in the field of conflict resolution — it will help to spend time researching the subject, but more importantly, apply what you learn along the way.*

Teaching instructions: Thank the participants for their participation in the discussions and ask them if they have any questions. Answer the questions that pertain to this or previous units. If participants ask questions about material that will be covered in a later unit, request that they save their questions for that unit.

Handout 7.1

Case Study: Conflict resolution

You are the second child of a family of three brothers. Your older brother is married and has two kids. Due to financial difficulties, your older brother's family is living with your family, comprised of your parents, your older brother's family, yourself and your younger brother. You all share your daily life activities in the same home. Your older brother and his wife have very demanding jobs with an import-export company. You used to work at a big local hotel. Your younger brother still goes to school and your parents are old and fragile. Your family has a tradition of love and caring of each other. An unfortunate thing happened to you about three months ago when the hotel you were working for went out of business. You have been looking for a job since then.

Since your older brother's second child was born, your older brother has sometimes asked you to help with housework: doing the laundry, cleaning, grocery shopping and cooking. You think that his wife should be the one who does these household chores. During the time you have stayed at home, your older brother has reminded you that he expects you to do this work every day. One day, you had a lot of work to attend to and had to be out of the house for the whole day. You did not get home until 7PM. Your older brother's family also came home late. As a result, no one had prepared dinner or done any cleaning. Your older brother became irritated and very loud. He said things that implied that because you were not sharing the costs of living, you were supposed to do the housework in return, regardless of whether you might have some other things to do.

How would you respond to this conflict? (Please be as realistic as you can!)

Write your answers on index cards.

Case Study: Possible Responses

Note: Please do not show the below to the participants. These responses serve as a guide for the trainer to prepare and lead the discussions in a logical way.

After the participants have finished writing their responses on index cards, ask them to stick the cards on the board for review, and classify them into three categories: confronting, avoiding and collaborating (as elaborated below).

- A.** You think you have been biting your tongue for too long time, and it is now time to let your brother know what you really think. You say, “The housework is supposed to be done by my sister-in-law, not by me. If you do not feel comfortable, then your family can rent another place.” If you choose this response, you are using a confronting style. You move directly to meet your needs in the situation, with less regard for the needs of others. This style is often characterized by aggressive communication and little listening. (Win-Lose).
- B.** You quietly start to prepare dinner. Deep inside, you wish you had the nerve to tell your brother that everyone in the house has to take some responsibility to do some household work, and not just you. After you have finished cooking dinner, you go to your room without having dinner. Over the next few days, you constantly avoid facing your brother. If you choose this response, you are using an avoiding style. You avoid bringing up possible differences, or perhaps deny that a conflict even exists. Because of the limited communication or avoidance of contact, the issues fester unresolved. (Lose-Lose).
- C.** You quickly start to prepare dinner. The next day, you ask your brother and your sister-in-law to have a talk and express your wish to maintain a loving and caring relationship among all family members. You tell your brother about your plan to find a job in the near future. You also listen to your brother and sister-in-law’s needs and concerns. You then agree that when you have free time, you will be willing to help your sister-in-law to do some of the housework and babysitting of the two kids. However, when your brother and his wife have free time, they should share the work as well. In the end, you agree to develop a weekly schedule together so that both you and your sister-in-law can attend all of the household chores, even in the distant future when you have a new job.

If you choose this response, you are using a collaborating style. You assert your needs and interests clearly, while hearing and respecting those of the other person. You try to consider the big picture and maximize relationships. (Win-Win).

Unit 7.4

MANAGING INTOXICATED CLIENTS



OVERVIEW

I. Introduction

5 Min

Introduce the unit by explaining that you will discuss how to manage intoxicated clients.

II. Presentation

65 Min

Use the PowerPoint slides and role-plays to train on the basics of management of intoxicated behavior.

II. Conclusion

10 Min

Review the key points of this unit and answer participants' questions (if any).

Unit 7.4: Managing intoxicated clients

Goal: To help participants understand the basics of intoxication, and to train participants to recognize levels of intoxication and manage intoxicated behavior.

Time: 80 minutes

Objectives: At the end of this unit, participants will be able to:

- define intoxication and know its effects
- recognize evidence of intoxication at different levels
- know the principles of managing intoxicated clients
- practice managing an intoxicated client

Methodology:

- Presentation
- Role-play


Teaching aids:

- PowerPoint slides
- LCD projector
- Flipchart and paper
- Markers

Slide 1



Teaching instructions: Ask the participants whether any of them has ever had to work with an intoxicated client. If so, what did they do? Allow some time for participants to respond.

 **Say:** *Now we will discuss ways that you can manage an intoxicated client.*

Slide 2

LEARNING OBJECTIVES

At the end of this unit, participants will be able to:


- define intoxication and know its effects
- recognize evidence of intoxication at different levels
- know the principles of managing intoxicated clients
- practice managing an intoxicated client

Teaching instructions: Use the bullets on the slide to present directly.

Slide 3

INTOXICATION

- Altered mental state of intoxication may lead to injuries or accidents
- Also affects behavior, mood and thinking
- Attempts to discuss matters in depth may make the situation worse
- An intoxicated person may not be able to make logical and informed decisions
 - Counseling at this stage may be a total waste of time

 **Say:** *It is common for drug users to be intoxicated with drugs and/or alcohol when they arrive for counseling. The symptoms of intoxication include a change in cognition, behavior, feelings, perception, emotions and/or the thoughts. For these reasons, it is difficult to try to discuss anything, especially complex issues, with clients who are intoxicated.*

The effects of intoxication include:

- *an altered mental state, which may lead to injuries or accidents*
- *changes to behavior, mood and thinking*
- *potential danger for the drug users themselves and people around them*
- *an inability to make logical and informed decisions*

Your attempts to discuss anything in depth may make the situation worse. Intoxicated clients may get very annoyed if you try to insist on anything. Think back to when you have tried discussing something with someone who was drunk. Can you remember how their thinking was distorted because they were drunk?


Counseling an intoxicated client may be a total waste of time. Therefore, it is advisable that you find out which drug caused the intoxication, as well as how intoxicated your client is, to cope with the client accordingly.

Slide 4

EVIDENCE OF MODERATE LEVELS OF INTOXICATION

- Speaking loudly or in an agitated manner
- Making demands
- Invading your personal space
- Not following or ignoring directions
- Acting threateningly
- Becoming physically violent
- Attempting suicide or threatening self-harm
- Glazed eyes

Teaching instructions: Show only the title of Slide 3. Ask the participants whether any of them has ever had an intoxicated client. Ask if they can describe the signs of a moderately intoxicated client. Write down their answers on flipchart paper, and then reveal the bullets on the slide.

 **Say:** *You can determine how intoxicated the client is through his/her behavior. He/she may:*


- *speak loudly or in an agitated manner*
- *make demands*
- *act threateningly*
- *invade your personal space (your personal space is usually an arm's length). When a client is intoxicated, he/she tends to invade your personal space and make you feel uncomfortable.*
- *not follow directions or ignore them, regardless of how clearly, slowly, or often you repeat them*
- *have glazed-over eyes*
- *become physically violent*
- *attempt suicide or threaten self-harm*

Slide 5

EVIDENCE OF HIGHER-LEVEL INTOXICATED BEHAVIOR

- Confusion
- Disorientation
- Slurred or incoherent speech
- Inappropriate emotional and behavioral responses
- Altered state of consciousness
- Poor muscle coordination

Teaching instructions: Show only the title of Slide 5. Ask the participants whether any of them has experienced a very intoxicated client. Ask them to describe the signs of a very intoxicated client. Record their answers, then reveal the bullets on the slide.

 **Say:** *A very drunk person will often demonstrate high levels of intoxicated behavior. This behavior includes:*

- *confusion*
- *disorientation*
- *slurred or incoherent speech*
- *inappropriate emotional and behavioral responses*
- *altered state of consciousness*
- *poor muscle coordination*

When dealing with a highly intoxicated client, your main concerns should be potential aggression, overdose/toxicity, and the client's safety and well-being.

The following symptoms are caused by these major drugs:

Alcohol intoxication

- *inappropriate behavior or change in psychology:*
 - *Less inhibited sexual behavior*
 - *Aggressiveness*
 - *Poor reasoning*

Slide 5 (cont.)

- *Other symptoms:*

- *Tongue-tied*
- *Unsteady walking*
- *Lack of attention*
- *"Shaking" pupils, glassy eyes or unconsciousness*
- *Alcohol smell*

Opiate intoxication (including heroin)

- *"On the nod"*

- *Snoring*

- *Drooping eyelids*

- *Slurred words*

- *Other symptoms:*

- *Pinpoint pupils*
- *Sleepiness or unconsciousness*
- *Tongue-tied*
- *Lack of attention*
- *Loss of memory*

Amphetamine intoxication

- *Aggressive behavior*

- *Anxiety*

- *Excitable*

- *Emotional*

- *Paranoia*

- *Other symptoms*

- *Increased heart rate*
- *Increased blood pressure*
- *Enlarged pupils*

Cannabis intoxication

- *Inappropriate behavior or slow thinking*

- *Apparent pleasure*

- *Anxiety*

- *Time passes slowly*

- *Other signs:*

- *Red eyes*

Slide 5 (cont.)

Intoxication by sleeping pills and depressants


- *Inappropriate behavior or personality change*
- *Mentally slow*
- *Unstable emotions*
- *Other signs:*
 - *Drawling voice*
 - *Loss of coordination*
 - *Poor attention*

Slide 6

FACTORS THAT CAN INFLUENCE BEHAVIOR IN AN INTOXICATED CLIENT (1)

In addition to the dis-inhibiting effects of alcohol or other drugs, other factors can include:

- Fear
- Anger
- Physical pain
- Emotional hurt
- Your attitude towards them

 **Say:** *Drugs and alcohol are not the only factors that can affect your client's behavior.*

While the dis-inhibiting effects of alcohol or other drugs include greater impulsivity, the other factors that can influence an intoxicated client's behavior are:


- *fear*
- *anger*
- *physical pain*
- *emotional hurt*
- *your attitude towards them*

Teaching instructions: Additional factors are included on the next slide.

Slide 7

FACTORS THAT CAN INFLUENCE BEHAVIOR IN AN INTOXICATED CLIENT (2)

- Seeking attention
- Psychosis
- Social and individual expectations about behavior while intoxicated


 **Say:** *Some of the other factors include:*

- *attention seeking*
- *drug withdrawal*
- *psychosis*
- *social and individual expectations about behavior while intoxicated*

Slide 8

MANAGEMENT OF INTOXICATED BEHAVIOR (1)

- Introduce yourself using your first name and ask the person's name
- Offer to shake his/her hand
- Speak in a calm and level voice
- If you are alarmed, do not display anxiety
- Do not use words the person may not understand
- Do not speak in a loud or authoritarian voice

 **Say:** *When you encounter an intoxicated client, introduce yourself using your first name and ask the person's name.*

Speak in a calm and level voice. Drug users who are intoxicated are easily confused, so counselors should use a calm, slow voice to help the client feel safe. If the client sees that a counselor is embarrassed and worried, he/she is more likely to show intimidating behavior.

Even if you do feel threatened, do not let your anxiety show.


Do not use words that the client may not understand. Use simple words.

You will make the situation worse if you speak loudly or in an authoritarian voice.

Slide 9

MANAGEMENT OF INTOXICATED BEHAVIOR (2)

- Stay calm, relaxed and attentive
- Do not physically intimidate the person (i.e. standing while he/she is sitting)
- Be aware of how you appear to the person
 - Try to appear as someone who can be trusted and who is interested
- If possible, attend to him/her in a quiet environment
 - Can have a calming effect

 **Say:** *Be sure to use as calm and low a voice as possible. Speak slowly and clearly.*

Stay calm, relaxed and attentive. Do not physically intimidate the person, for example by standing while he/she is sitting. Make sure there is a safe distance between you and the client.


Be aware of how you appear to the person. It is important to appear as someone who can be trusted, and who is interested in the client and his/her situation. It might improve the situation.

If your counseling center is noisy, you should ask your client to move to a quieter place to limit his/her confusion. This can have a calming effect on an intoxicated person. However, you should make sure someone watches you if you take the client to a quiet place.

Slide 10

MANAGEMENT OF INTOXICATED BEHAVIOR (3)

- Avoid offering hot drinks such as coffee
- If the person appears very intoxicated, only obtain relevant details
- Don't be judgmental or moralistic when dealing with intoxicated people
- Patronizing attitudes may anger them


 **Say:** *Avoid offering the client hot drinks such as hot tea or coffee, which he/she might throw at you or spill on him/herself.*

If the person appears to be very intoxicated, only ask the most relevant and essential questions.

Don't be judgmental or moralistic when dealing with intoxicated people, or they could become very angry. If you see signs that a client is very intoxicated, then only tell him/her what is necessary. If the client is confused, you may have to say it again many times for him/her to understand. Try not to act superior and do not treat the client as inferior.

MANAGEMENT OF INTOXICATED BEHAVIOR (4)

- Be consistent when giving information
 - You may need to repeat information several times
 - Try to avoid giving contradictory advice
- Do not make promises that you do not intend to keep

 **Say:** *Be consistent when you give the client information. You may need to repeat information several times.*


Try to avoid giving contradictory advice and do not make promises that you do not intend to keep.

You might ask your client if he/she can come back in the afternoon or the next day, when he/she is less intoxicated and is ready for the counseling session

Slide 12

INTERVIEWER SKILLS (1)

- Explain why the questions need to be asked
- Maintain an empathic and non-judgmental attitude
- Give basic information and answer questions accurately and honestly
- Determine level of intoxication
 - Overestimate his/her alcohol or drug use
 - This will enable your client to provide a lower assessment of his/her level of intake

 **Say:** *Intoxicated clients can be confused as to why you ask so many questions. Therefore, it is easier to tell your client why you are asking for the information.*


One good question you can ask is how much of the drug he/she has taken, to help you assess whether the level of intoxication matches the amount he/she took.

Information on reasons for intoxication assessment

- *Assess whether intoxication level is consistent with amount of drug consumed*
- *Seek medical advice if intoxication is excessively high compared to reported consumption*

INTERVIEWER SKILLS (2)


- When estimating drug use it may be useful to interview family members
- Only use reflective listening techniques and open-ended questions if possible
- Summarize the content you have discussed with the client
- Check what the client wants to do or is prepared to do
- Limit time of interview if very intoxicated
- Make time to see client when not intoxicated
- Discuss his/her behavior when not intoxicated

 **Say:** *Be sure to use open-ended questions and apply your listening and reflecting skills in a counseling session with intoxicated clients when possible. In some cases, you may need to use closed questions and finish the session quickly.*

Slide 14

OTHER CONSIDERATIONS

- Violent behavior should not be tolerated
 - Individuals are still responsible for their behavior while intoxicated
 - Police should be called if necessary
- Consider other reasons for intoxication symptoms
 - Consider possibility of injury, trauma or illness: these issues may complicate appearances

 **Say:** *Violent behavior is unacceptable. You should state this clearly. If an intoxicated client fights with another person, the counselor should tell him/her clearly that it is unacceptable for him/her to harm other people, and that the clinic will call the police.*

It is possible that someone may appear intoxicated, but not because of drugs. The appearance of a drugged stupor could also be caused by a health problem such as a head injury, trauma or medicine. In this case, counselors should send the client to a doctor or medical center.

You can look at the size of the client's pupils to see whether their size is consistent with the drug he/she has taken. Are they enlarged, small, or somewhere between? If the pupils are different sizes, the client may have had a serious head injury and will need to be seen by a doctor.

One important take-home message is that dealing with an intoxicated client is exactly the same as dealing with an aggressive client. Remember to speak slowly, clearly, calmly, and in a low tone of voice, so the intoxicated client can understand you.

Slide 15

ROLE-PLAY

Groups of 3

- **Role 1:** Intoxicated drug user arrives confused and agitated
- **Role 2:** Counselor undertakes an assessment of needs and course of action
- **Role 3:** Observer (look at behavior and responses)

Teaching instructions: Divide the participants into groups of 3. Refer to the slide, and have the groups assign each member accordingly. One person will be an intoxicated drug user, the second person will be a counselor, and the third will be an observer. The drug user will need to pretend to be confused and agitated, while the counselor assesses the client's needs and develops a course of action. The observer should take note of behaviors and responses.

Allow the groups to role-play for about 5 minutes, then have a member from each group report back to the larger group. Allow about 10 minutes for reporting back.

Slide 16

SUMMARY

- Drug intoxication influences capacity to understand and retain information
- Attempts to discuss in too much detail may make the situation worse
- Signs and symptoms can help identify level of intoxication
- Other factors can influence behavior (other than intoxication)
 - these need to be considered and eliminated
- There are verbal and non-verbal approaches to diffuse the situation
 - This allows you to discuss future options with your client
- Counselors should provide clients with an offer to meet again later to avoid negative responses
- Violent behavior should not be tolerated

Teaching instructions: Review the key concepts covered in this unit. Use the bullets on the slide to present directly.

Thank the participants for their participation in the discussions and ask them if they have any questions. Answer the questions that pertain to this or previous units. If participants ask questions about material that will be covered in a later unit, request that they save their questions for that unit.

FHI Addictions Counseling Training Manual -

Glossary of Terms

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
abstract thinking	thinking that is not based on a particular instance; theoretical	the ability to think about something from a range of different perspectives
addiction		the overpowering physical or emotional urge to continue alcohol/drug use in spite of an awareness of adverse consequences; there is an increase in tolerance for the drug and withdrawal symptoms sometimes occur if the drug is discontinued; the drug becomes the central focus of life
addiction counseling		professional and ethical application of basic tasks and responsibilities which include clinical evaluation; treatment planning; referral; service coordination; client, family, and community education; client, family, and group counseling; and documentation
affirmation	the act of stating something as a fact; asserting strongly	agreeing with what a client is saying in a supportive way
ambivalence	the state of having mixed feelings or contradictory ideas about something or someone	
arguing	exchanging or expressive diverging or opposite views, typically in a heated or angry way	
attending		listening to verbal content, observing non-verbal cues, and providing feedback that assures you are listening
autonomy	freedom from external control; independence	respecting a client’s ability to think, act and make decisions for him/herself
behavior modification	the application of conditioning techniques (rewards or punishments) to reduce or eliminate problematic behavior, or to teach people new responses	

FHI Addictions Counseling Training Manual - Glossary of Terms (cont.)

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
behavioral counseling	counseling that is based on the premise that primary learning comes from experience	an approach that views counseling and therapy in learning terms and focuses on altering specific behaviors
big deep moments		moments in a conversation that have significant impact on a person's thinking and commitment for change
burnout	physical or mental collapse caused by overwork or mental stress	depletion of motivation, interest, energy, resilience and often effectiveness of counselors caused by overwork or mental stress
case conferencing		a structured meeting between professionals to discuss relevant clinical aspects of a client
cliché	a phrase or expression that is overused and betrays a lack of original thought	
client		individuals, significant others, or community agents who present for alcohol and drug use education, prevention, intervention, treatment, and consultation service
client-centered	conducted in an interactive manner responsive to individual client needs	an approach to counseling that allows clients to retain ownership of their issues and building on their abilities to change behavior
closed question	question with more than one possible answer from which one or more answers must be selected	
cognitive counseling	counseling that is based on the belief that our thoughts are directly connected to how we feel	an approach to counseling which focuses on improving clients' ability to test the accuracy and reality of their perceptions
collusion	secret or illegal cooperation or conspiracy	clinical collusion: conspiring with another individual against a client's interest; remaining silent/not intervening when a client says or does something that (the counselor) knows is morally/legally wrong
competency		the requisite knowledge, skills, and attitudes to perform tasks and responsibilities essential to addiction counseling
confidential	intended to be kept secret	intended to be kept secret for the protection and safety of the client

FHI Addictions Counseling Training Manual - Glossary of Terms (cont.)

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
confronting	compelling (someone) to face or consider something	expanding (or challenging) a client's awareness via reflections and questions focused on actual and potential inconsistent and illogical ways of thinking and communicating
continuum of care		the full array of alcohol and drug use services responsive to the unique needs of clients throughout the course of treatment and recovery
corrective feedback	information about reactions to a person's performance/ behavior intended to modify or improve the behavior	
counseling	provision of advice, especially formally	an interactive exchange process between counselor and clients to help clients condentially explore their problems and enhance their capacity to solve their own problems
counselor	a person trained to give guidance on personal, social or psychological problems	counselors are similar to therapists in that they use a variety of techniques to help clients achieve stronger mental health. (one of the most commonly understood methods involves a one-on-one exploration of a client's inner beliefs and background (psychotherapy) or a similar exploration in a group setting (group therapy).)
craving	a powerful desire for something	
denial	the action of declaring something to be untrue	failure to accept an unacceptable truth or emotion or to admit it into consciousness; used as a defense mechanism
directive	involving the management or guidance of something	
disagreeing	having or expressing a different opinion	
discrimination	the unjust or prejudcial treatment of different categories of people or things, usually based on race, sex, gender...etc	
double-sided reflection		reflecting both the current, resistant statement, and a previous, contradictory statement that the client has made

FHI Addictions Counseling Training Manual - Glossary of Terms (cont.)

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
empathy	the ability to understand and share the feelings of another	
exploration	thorough analysis of a subject or theme	
extrinsic	not part of the essential nature of someone or something; coming or operating from outside	something that comes from the outside; an outside feeling or point of view
goal	the object of a person's ambition or effort; an aim or desired result	
goal-centered	based on the short-, intermediate- and/or long-term goals of an individual or group	working toward achieving specific implicit or explicit objectives of counseling
harm	physical injury (especially that which is deliberately inflicted)	any event or stimulus that causes a negative outcome
harmful use		patterns of use of alcohol or other drugs for non-medical reasons that result in health consequences and some degree of impairment in social, psychological, and occupational functioning for the user
interpreting	understanding an action, mood or way of behaving as having a particular meaning or significance	
intervention	action taken to improve a situation	
intoxication	of alcohol or a drug, the state of losing one's control over one's faculties/ behaviors	
jargon	special words or expressions that are used by a particular profession or group and are difficult for others to understand	
judging	forming an opinion or conclusion about something	forming an opinion about something and projecting it on to other people

FHI Addictions Counseling Training Manual - Glossary of Terms (cont.)

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
lapse	a temporary failure of concentration, memory or judgement	the reuse of drugs after a period of stopping
moaralizing	commenting on issues of right and wrong, typically with an unfounded air of superiority	
motivational interviewing	a client-centered, semi-directive method of engaging intrinsic motivation to change behavior by developing discrepancy and exploring and resolving ambivalence within the client	
nonjudgmental	avoidal moral arguments	
open-ended question	question whose answers have no determined limit or boundary	
ordering	commanding or giving instruction authoritatively	
over interpreting		placing too much emphasis on a specific client response (verbal or nonverbal)
paraphrasing	expressing the meaning of something someone has written/said using different words, especially to achieve greater clarity	
personal resilience	ability to withstand or recover from difficult situations on one's own	
prevention		the theory and means for delaying or denying uptake of drug use in specific populations. prevention objectives are to protect individuals prior to signs or symptoms of substance use problems; to identify persons in the early stages of substance abuse and intervene; and to end compulsive use of psychoactive substances through treatment
principle	a fundamental source or basis of something	

FHI Addictions Counseling Training Manual - Glossary of Terms (cont.)

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
probing		asking for more information and/or clarification about a point that you think is important
procedure	an established or official way of doing something	
psychoactive substance		a pharmacological agent that can change mood, behavior, and cognition process
rapport	a close and harmonious relationship in which the people or groups concerned understand each others feelings or ideas and communicate well	
reflective listening		to listen carefully to what the client has said and repeat back what was said in a directive way
reframing	framing or expressing words, concepts or plans differently	
relapse	to suffer deterioration after a period of improvement	the return to the pattern of substance abuse as well as the process during which indicators appear prior to the client’s resumption of substance use
reliability	the degree to which something is consistently good in quality or performance	
resistance	the refusal to accept or comply with something	any feeling thought and communications on part of the clients that prevent them from participating effectively in counseling.
resourcefulness	having the ability to find quick and clever ways to overcome difficulties	
respect	a feeling of deep admiration for someone or something elicited by their qualities, abilities or achievements	
risk	a situation involving exposure to danger	
rolling with resistance		meeting resistance to change from a client by moving in the direction he/she is headed with a response that is intended to diffuse the resistance

FHI Addictions Counseling Training Manual - Glossary of Terms (cont.)

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
self-efficacy		belief in a client's own ability to undertake a task(s) and/or fulfill goals
self-responsibility	(responsibility for one's self) - the state or fact of having the duty to deal with one's self	
significant others		sexual partner, family member, or others on whom an individual is dependent for meeting all or part of his or her needs
simple reflection		to repeat or rephrase what the client has said
skill	the ability to do something well; expertise	
sobriety		the quality or condition of abstinence from psychoactive substance abuse
stage of change theory	a theory that espouses that behavior change does not happen in one step, rather, people tend to progress through different stages on their way to successful change; each progresses through the stages at his/her own rate	
substance use		consumption of low and/or infrequent doses of alcohol and other drugs, sometimes called "experimental," "casual," or "social" use, such that damaging consequences may be rare or minor
summarizing	giving a brief statement of the main points of (something)	
supervision	observation and direction execution of a task, project or activity	the administrative, clinical, and evaluative process of monitoring, assessing, and enhancing counselor performance
sympathizing	agreeing with a sentiment or opinion	
sympathy	understanding between people; a common feeling because you have experienced the same or similar event.	

FHI Addictions Counseling Training Manual - Glossary of Terms (cont.)

TERM	DICTIONARY DEFINITION	ADDICTIONS COUNSELING DEFINITION
technique	a way of carrying out a particular task	
therapeutic alliance		the relationship between a mental health professional and a client it is the means by which the professional hopes to engage with, and effect change in, a client
threatening	causing someone to be vulnerable or at risk	
voluntary	done, given or acting of one's own free will	

