

# Navigating Self-Help & Support Groups

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# The Gifts Peer Supports Bring to Recovery

"If I can use the debris of my outrageous misfortune and turn it into something positive, then none of what happened to me occurred without rhyme or reason."

(Recovery:AcoA)

# Understanding the Community of Addiction



**“For addicts, addiction meets a multiplicity of needs and the culture of addiction provides a valued cocoon where these needs can be, and historically have been, met. No treatment can be successful if it doesn’t offer a pathway to meet those same needs and provide an alternative social world that has perceived value and meaning.”**

Pathways from the Culture of Addiction to the Culture of Recovery  
William L. White.

**“The culture of addiction offers, as does its drug-specific subcultures, identification with symbols, rituals, relationships and lifestyles that meet significant personal needs of the newcomer.”**

**-William L. White**

**“The culture of addiction, like any culture, is a context for human needs to be met...people participate in this culture and its rituals (drug use) to address the needs all humans share. The culture of addiction provides an alternative for people who, for whatever reason, are unable to get such needs met through the society at large....The culture of addiction gives purpose and order to daily life...”**

**-William L. White**

# Eric Erikson's 8 Stages of Development

- Trust vs. Mistrust
- Autonomy vs. Shame
- Initiative vs. Guilt
- Industry vs. Inferiority
- Identity vs. Role Confusion
- Intimacy/Solidarity vs. Isolation
- Generativity vs. Self Absorption/Stagnation
- Integrity vs. Despair

# Trust

- You trust your friend when they say “try it”
- You trust the dealer to provide consistent product
- You trust in the drugs effect & desired outcome
- You trust in the common bond with other addicts in your drug sub-culture



# Autonomy

- The culture provides its members an illusion of normalcy along with the illusion of controlled use
- Helps them deny their addiction

# Initiative

- “Addiction becomes one’s religion, drugs become one’s God and rituals of use become the rites of worship.”
- “There is no yesterday and no tomorrow. There is only today and what one must do to maintain supply, sustain use, postpone or medicate sickness and avoid consequences of use.”

-William L. White

# Industry

- How to purchase and identify the quality and quantity of drugs
- Mastery of technique and etiquette
- Maximize drug effects and reduce drug risks and consequences
- How to hustle to get your drugs or drug \$
- How to deal with ‘bad trips’
- How to spot a snitch or law enforcement

# Identity

- Sub-culture identification is often based on the drug of choice
- Many addicts like the title “addict” because it sets them apart from the general society
- Provides them with a sense of both social and personal values
- Dealers, High Priests, Story Tellers, Medicine Men/Women, Jailhouse Lawyers and the Ambassadors

# Intimacy/Solidarity

- Affiliation and loyalty to one's addiction identity increases with the duration of one's involvement with drug use
- The culture of addiction becomes a surrogate family and provides a safety net within their sub-culture
- Being with others whose drug use mirrors one's own helps normalize their use and maintain the illusion of control over the drug

# Generativity

- Groups of addicts protect each other
- Groups collaborate on hustles and share the spoils
- Access to Jailhouse Lawyers and known “get you off on a technicality” lawyers; show you how to beat your rap
- Providing “shooting galleries” and safe houses to use and purchase drugs or come down off a trip
- Passing on information to perpetuate the culture and transmit the values and etiquette of that culture

# Integrity

- Dealers, High Priests, Storytellers, Medicine Men, Jailhouse Lawyers and Ambassadors all impart their wisdom on addicts in their sub-culture
- Learning to be a successful addict and the etiquette of the culture
- You know what drug you want for what effect
- Learning how to obtain the drug that will give you the high you want

# Community of Recovery



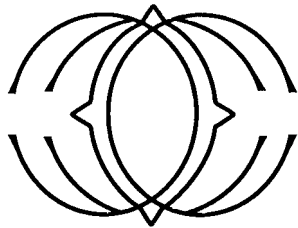


# Early treatment relationships should convey:

- You are in the right place
- You are with others like yourself
- We understand you and the world you come from
- We accept who you are and who you can become
- This is a place where magic (change) can happen

# 12 Step Groups

## Differences and Similarities



**DTR**

# Understanding 12 Step Meetings

- Open –vs- Closed Meetings
- Types of 12 Step Meetings
- Pass the Hat
- Attendance Sheets
- “Any new comers”
- Closing prayer
- Meeting before the meeting & after the meeting
- Sponsorship

# Traditional 12 Steps

- 1) We admitted we were powerless over \_\_\_\_\_ that our lives had become unmanageable.
- 2) Came to believe that a Power greater than ourselves could restore us to sanity.
- 3) Made a decision to turn our will and our lives over to the care of God as we understood Him.
- 4) Made a searching and fearless moral inventory of ourselves.
- 5) Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
- 6) Were entirely ready to have God remove all these defects of character.
- 7) Humbly asked Him to remove our shortcomings.
- 8) Made a list of all persons we had harmed, and became willing to make amends to them all.
- 9) Made direct amends to such people wherever possible, except when to do so would injure them or others.
- 10) Continued to take personal inventory and when we were wrong promptly admitted it.
- 11) Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
- 12) Having had a spiritual awakening as the result of these steps, we tried to carry this message to \_\_\_\_\_, and to practice these principles in all our affairs.

# Obstacles with 12 Step Groups for Clients with Dual Disorders

- These groups focus on abstinence from the start
- The groups have a strong spiritual orientation
- Clients may have difficulty relating to the losses experienced by other group members.
- Some members of self-help groups are hostile to psychiatric medications.
- Clients may experience anxiety in large groups.
- Clients may have difficulty assimilating with other group members due to social skill deficits.
- Admitting Powerlessness
- 13<sup>th</sup> Stepping.

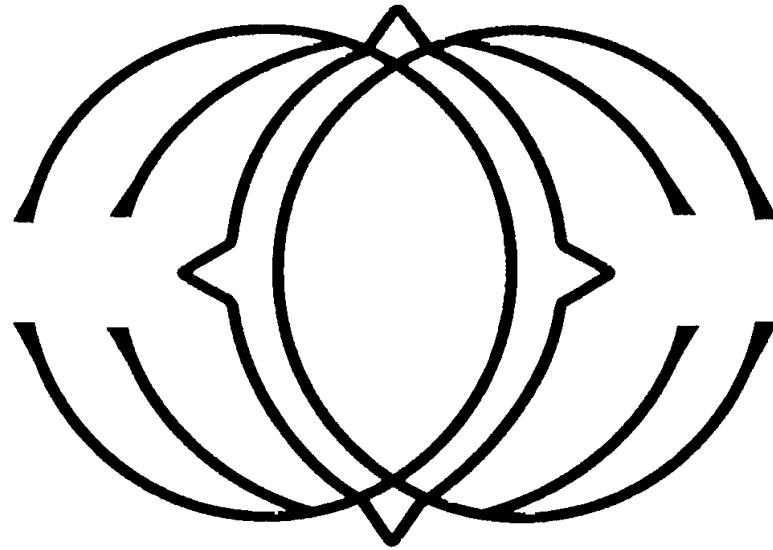
# Groups for Dually Diagnosed Individuals

- Dual Recovery Anonymous
- Double Trouble

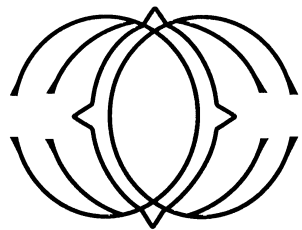
# 12 Steps of Double Trouble

- 1) We admitted we were powerless over mental disorders and substance abuse-- that our lives had become unmanageable.
- 2) Came to believe that a Power greater than ourselves could restore us to sanity.
- 3) Made a decision to turn our will and our lives over to the care of God as we understood Him.
- 4) Made a searching and fearless moral inventory of ourselves.
- 5) Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
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- 11) Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
- 12) Having had a spiritual awakening as the result of these steps, we tried to carry this message to other dually-diagnosed people and to practice these principles in all our affairs.

# DUAL RECOVERY ANONYMOUS







# DRA Meetings Provide

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Emotional Acceptance,  
Support, Empowerment  
(E.A.S.E.)

An opportunity to learn how to  
be guided by our DRA Steps  
in our personal program for  
dual recovery

Members Discuss Recovery Issues

Related to Both:

Chemical Dependency and  
Emotional or Psychiatric illness

A Connection With Others Who are  
in Dual Recovery

- We are not alone
- Others have experienced the challenges of dual disorders
- There is Hope:
  - Dual recovery is Believable
  - Dual recovery is Achievable

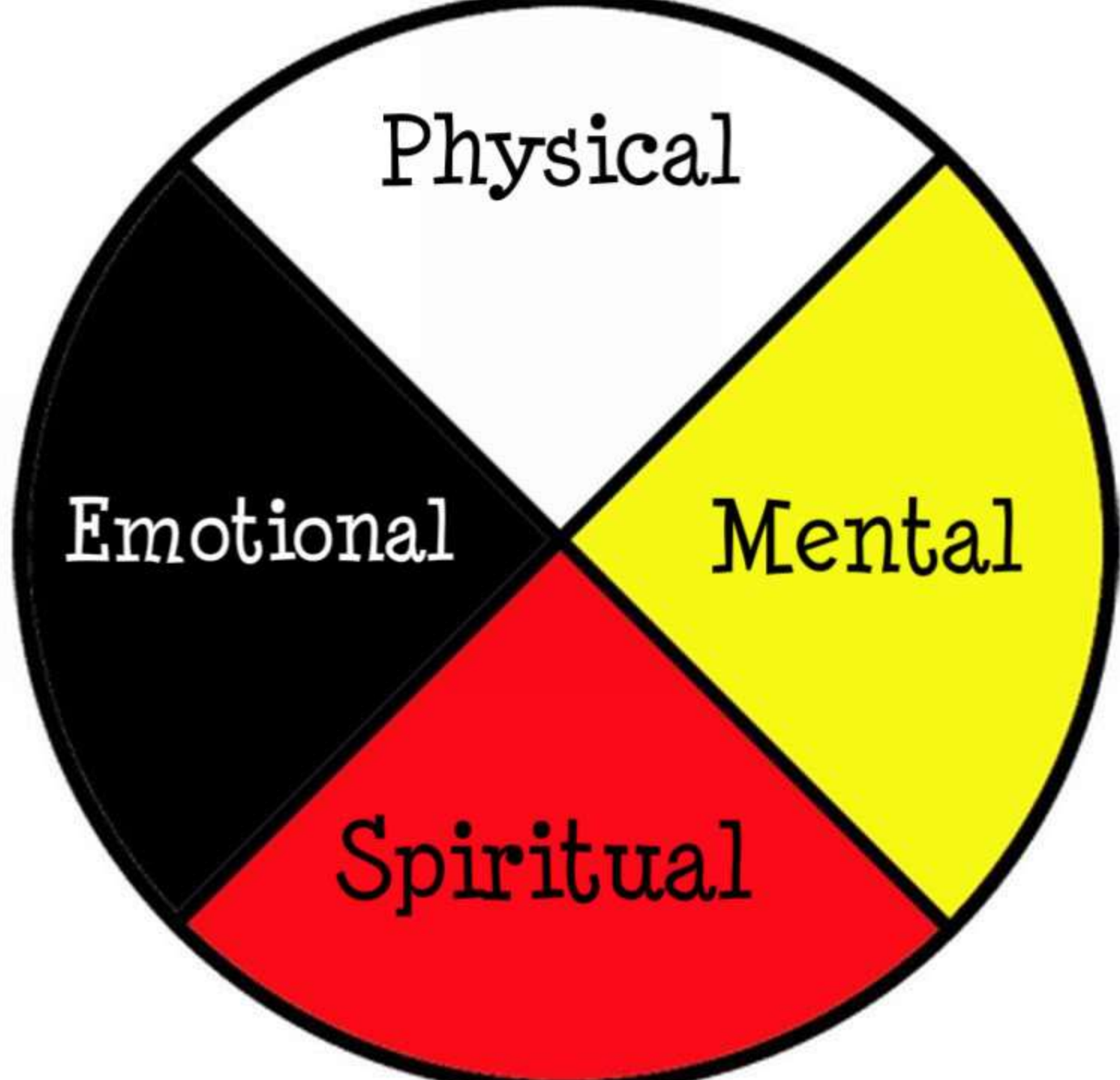
# 12 Steps of Dual Recovery Anonymous.

- 1) We admitted we were powerless over *our dual illness of chemical dependency and emotional or psychiatric illness* that our lives had become unmanageable.
- 2) Came to believe that a *Higher Power of our understanding* could restore us to sanity.
- 3) Made a decision to turn our will and our lives over to the care of *our Higher Power, to help us to rebuild our lives in a positive and caring way.*
- 4) Made a searching and fearless moral inventory of ourselves.
- 5) Admitted to *our Higher Power*, to ourselves, and to another human being the exact nature of our *liabilities and our assets.*
- 6) Were entirely ready to have our *Higher Power* remove all our *liabilities.*
- 7) Humbly asked *our Higher Power* to remove *these liabilities and to help us to strengthen our assets for recovery.*
- 8) Made a list of all persons we had harmed, and became willing to make amends to them all.
- 9) Made direct amends to such people wherever possible, except when to do so would injure them or others.
- 10) Continued to take personal inventory and when we were wrong promptly admitted it *while continuing to recognize our progress in dual recovery.*
- 11) Sought through prayer and meditation to improve our conscious contact with our *Higher Power*, praying only for knowledge of *our Higher Power's* will for us and the power to carry that out.
- 12) Having had a spiritual awakening as the result of these steps, we tried to carry this message to *others who experience dual disorders* and to practice these principles in all our affairs.

**The Red Road  
to Wellbriety**



**In The  
Native American Way**



Physical

Emotional

Mental

Spiritual

# 12 Step Group Summary

The 12 step “culture of recovery is an informal social network in which group norms (prescribed patterns of perceiving, thinking, feeling and behaving) reinforce long–term recovery from addiction.”

- William L. White

# **Non 12 Step Groups**

Smart Recovery

Rational Recovery

# SMART Recovery

**S**elf  
**M**anagement  
**A**nd  
**R**ecovery  
**T**raining

# SMART Recovery 4-Point Program

- Enhancing and Maintaining Motivation to Abstain
- Coping with Urges
- Problem Solving
- Lifestyle Balance



# SMART Recovery Tools

- Stages of Change
- Cost/Benefit Analysis
- Change Plan
- ABC's of REBT for urge control and emotional upsets
- DISARM= Destructive Images and Self-Talk Awareness and Refusal Method
- USA= Unconditional Self Acceptance

# Cost Benefit Analysis

## Using or Doing

\* What do I enjoy about my addiction?

\* What will I like about giving up my addiction?

\* What does it do for me?

\* What good things might happen when I stop?

## NOT Using or NOT Doing

\* What do I hate about my addiction?

\* What will I not like about giving up my addiction?

\* What bad things does it do to others and me?

\* What am I going to hate, dread or dislike about living without my addiction?

# SMART Recovery Tools

- Stages of Change
- Cost/Benefit Analysis
- Change Plan
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- DISARM= Destructive Images and Self-Talk Awareness and Refusal Method
- USA= Unconditional Self Acceptance

# ABC's of REBT

- A) Activating event: What is the Activating event? What happened? What did I do? What did others do? What idea occurred to me? What emotions was I feeling?
- C) Consequence: Am I feeling anger, depression, anxiety, frustration, self pity, etc? Am I behaving in a way that doesn't work for me? (drinking, attacking, moping)
- B) Beliefs: (irrational/dysfunctional) What do I believe about the Activating event? Which of my beliefs are my helpful/self-enhancing beliefs and which are my dysfunctional/self-defeating beliefs?
- D) Dispute: Dispute the Beliefs to find which are dysfunctional – What is the evidence that my belief is true? In what ways is my belief helpful or unhelpful? What helpful/self-enhancing belief can I use to replace each self-defeating or dysfunctional belief?
- E) Effective New Belief and Emotional Consequence: What helpful/self-enhancing new belief can I use to replace each self-defeating or dysfunctional belief? What are my new feelings?

# SMART Recovery Tools

- Stages of Change
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# Erik Erikson's Strengths of Developmental Outcome

- Trust = Drive and Hope
- Autonomy = Self-Control, Courage & Will
- Initiative = Purpose
- Industry = Method & Competence
- Identity = Devotion & Fidelity
- Intimacy/Solidarity = Affiliation & Love
- Generativity = Protection & Care
- Integrity = Wisdom

“Involvement in self-help groups must be voluntary!”



# Stage Wise

- Pre-engagement= The person does not have contact with a dual-disorder clinician
- Engagement= The person has had irregular contact with a clinician, but doesn't have regular contact
- Early Persuasion= The person has regular contacts with a clinician, but has not reduced substance use
- Late Persuasion= The person shows evidence of reducing substance use over the past several weeks
- Early Active Treatment= The client has reduced substance use for more than 1 month, but still experiences some substance abuse
- Late Active Treatment= The client has not met criteria for substance abuse of the past 1-5 months
- Relapse Prevention= The client has not met criteria for substance abuse for the past 6-12 months
- In Recovery or Remission= The client has not met criteria for substance abuse for over 1 year

# Keep it Simple

Engagement = “nothing needs to change”

Persuasion = “I am thinking about changing”

Active Treatment = “I am making the changes I want”

Relapse Prevention = “I made the changes I want. I will maintain my gains”

# Engagement Stage

- Provide information that the client wants, while not overwhelming them with excess and un-requested information or prematurely trying to persuade them that they have substance use problems.
- If there is no evidence that the client wants to stop using substances a referral to a self-help group is inappropriate.

# Persuasion Stage

- Client should be educated about all available treatment options
- A great time to educate clients about self-help groups
- Speaker meetings are great for hope and validation “you are not alone”
- Use Peer Supports to go with the client to provide support.

# Active Treatment Stage

- Try to engage clients in the discussion of the potential benefits of attending self-help groups.
- Go to meetings with the client
- Help them develop a social network within that self-help group.
- Discuss sponsorship
- Incorporate the steps in clients recovery plan

# Relapse Prevention Stage

- Support client in going to meetings.
- Support client in developing a social network within the self-help group.
- Support the client in working the program.
- Support the client in working with their sponsor.
- Work with client on a Relapse Prevention Plan.

# Summary

- It is possible to transition from a culture of addiction to a culture of recovery.
- It is possible to match our clients with community self-help/support groups.
- It is possible for self-help/support groups to meet the needs of our clients
- It is possible to RECOVER!

# Kristen G. Steffen, CPSS

- Dual Recovery Anonymous State of Michigan Representative
- Pathways to Recovery Facilitator
- Certified Peer Support Specialist
- MIFAST Reviewer

Kris has been with Manistee-Benzie Community Mental Health for 4 years as a Certified Peer Support Specialist. Kris is part of the COD-IDDT team and recently received recognition as an outstanding individual from Wayne State University and is now a MIFAST reviewer. Kris is also part of the Peer Support team winning the Partnership in Recovery Award of Excellence in 2007.

Please feel free to contact me at (231) 309-1805



# **JIMHO**

## **Justice in Mental Health Organization**

Contact:

Kathy Bennett

(517) 371-4661 ext 310

### **JIMHO will assist with:**

- Teaching leadership skills
- Teaching how to facilitate a self-help group
- Teaching how to start and maintain a self-help group
- Ongoing support

# Reaching DRA

Online at:

[draonline.org](http://draonline.org)

Call:

1-877-883-2332

Write: Dual Recovery Anonymous  
World Services Central Office  
P.O. Box 8107  
Prairie Village, KS 66208

# Reaching SMART Recovery

Smart Recovery

7304 Mentor Ave. #F

Mentor, OH 44060

(440) 951-5357

[www.smartrecovery.org](http://www.smartrecovery.org)