

*Based on*  
**TCU Mapping-Enhanced Counseling  
Manuals for Adaptive Treatment**

*As Included in NREPP*



# **MAPPING THE JOURNEY: A TREATMENT GUIDEBOOK**

**A collection of materials for exploring needs and planning  
treatment, improving communication, and reviewing  
treatment progress**

**D. F. Dansereau and D. D. Simpson, Editors**  
**TCU Institute of Behavioral Research**  
(August 2005)

*TCU Mapping-Enhanced Counseling* manuals provide evidence-based guides for adaptive treatment services (included in National Registry of Evidence-based Programs and Practices, NREPP, 2008). They are derived from cognitive-behavioral models designed particularly for counselors and group facilitators working in substance abuse treatment programs. Although best suited for group work, the concepts and exercises can be directly adapted to individual settings.

When accompanied by user-friendly information about client assessments that measure risks, needs, and progress over time, *TCU Mapping-Enhanced Counseling* manuals represent focused, time-limited strategies for engaging clients in discussions and activities on important recovery topics. These materials and related scientific reports are available as Adobe PDF® files for free download at <http://www.ibr.tcu.edu>.

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**TCU MAPPING-ENHANCED COUNSELING MANUALS  
FOR ADAPTIVE TREATMENT  
Mapping the Journey: A Treatment Guidebook**

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# *Introduction and Overview*

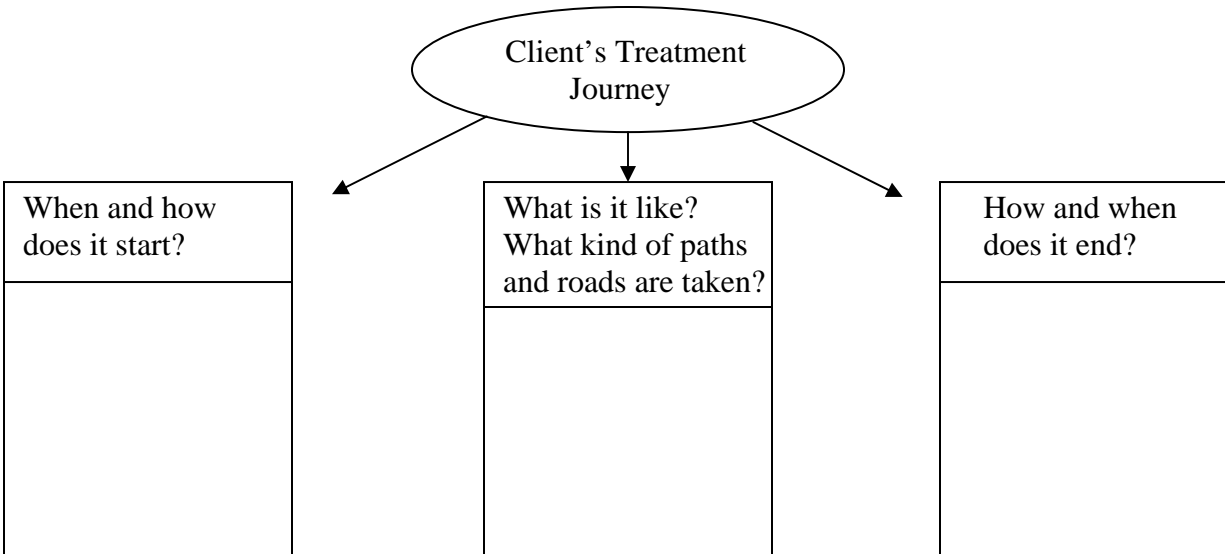
This guidebook can be used by counselors and clients to enrich and improve the treatment journey. “Mapping the Journey” is like a typical holiday travel guide where recommended tours and trips are chosen and changed to fit the traveler’s needs and desires.

In order to allow this to happen, the guidebook is divided into 8 brief guides for exploring important parts of the treatment journey. They are recommendations but can be used in any way the counselor and client choose. The order and amount of their use will surely vary from client to client. The bottom line is they are guides not prescriptions.

As with most travel books, these guides rely on maps to show the way. In this case, special maps have been developed for suggested roads on the treatment journey. They are based on materials published in two manuals – *Mapping new roads to recovery: Cognitive enhancements to counseling* (Dansereau, D.F., Dees, S.M., Chatham, L.R., Boatler, J.F., & Simpson, D.D., 1993) and *TCU guide maps: A resource for counselors* (Dees, S.M. & Dansereau, D.F., 2000) – which are available for free downloading at our website ([www.ibr.tcu.edu](http://www.ibr.tcu.edu)).

## What are treatment maps?

There are generally two kinds of maps that can be used in treatment. The first is a “fill-in-the-blank” map that looks like this one:



The counselor and/or client write personal answers in the blanks and then think about or discuss what they mean and how they can be used to reach goals. In this case, a completed copy might be given to the client and a copy filed for future reference. The writing in the blanks does not have to be good or complete - it is intended to stimulate thoughts and feelings rather than good penmanship. Sometimes writing may not be necessary because the map can be discussed orally.

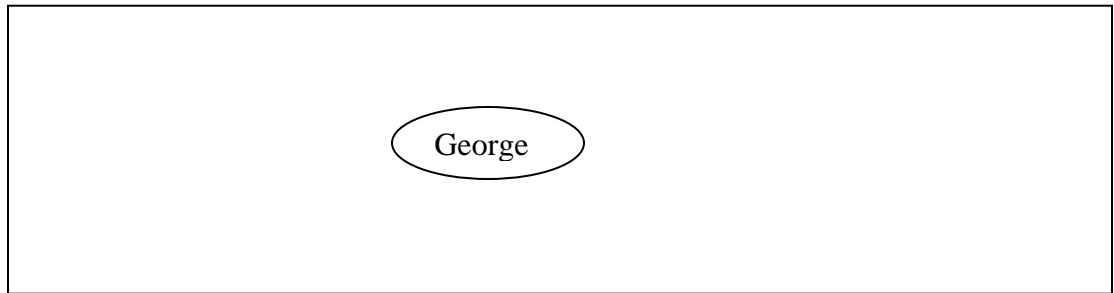
The guides in the rest of this book contain small sets of these “fill-in-the-blank” maps. However, counselors and clients are encouraged to create their own fill-in-the-blank maps to better meet needs of the treatment journey.

Another type of map is the “free” map (see Guide 8). This type is built from scratch by the counselor and/or client. It usually starts with a key idea and then other ideas are attached as the thinking and discussion proceed.

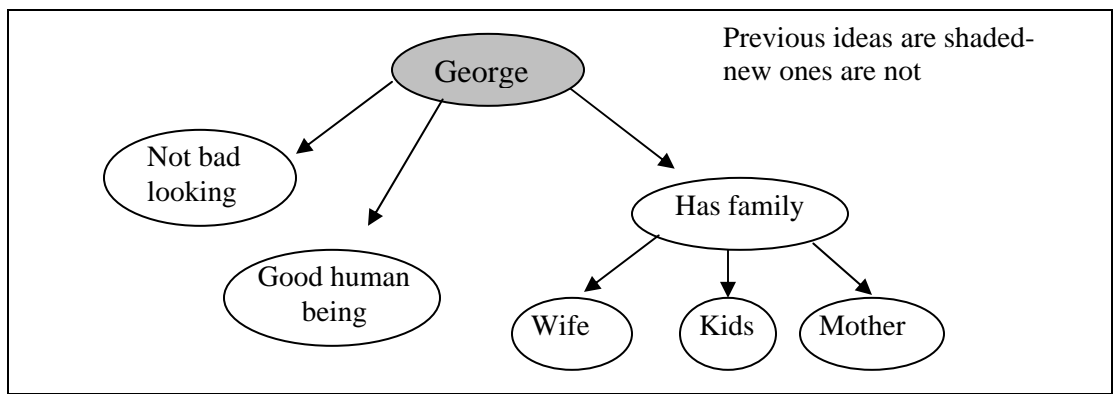
Free maps can be especially useful in exploring specific issues that are not easily covered by a fill-in-the-blank map. Free maps can be sketched out anytime during treatment. As with the fill-in-the-blank maps, neatness and completeness do not matter. They are thinking and talking guides, not artworks.

Here is a simple example of a free map. It starts with core issues in the center, then “grows” during discussion to include relevant issues connected to it.

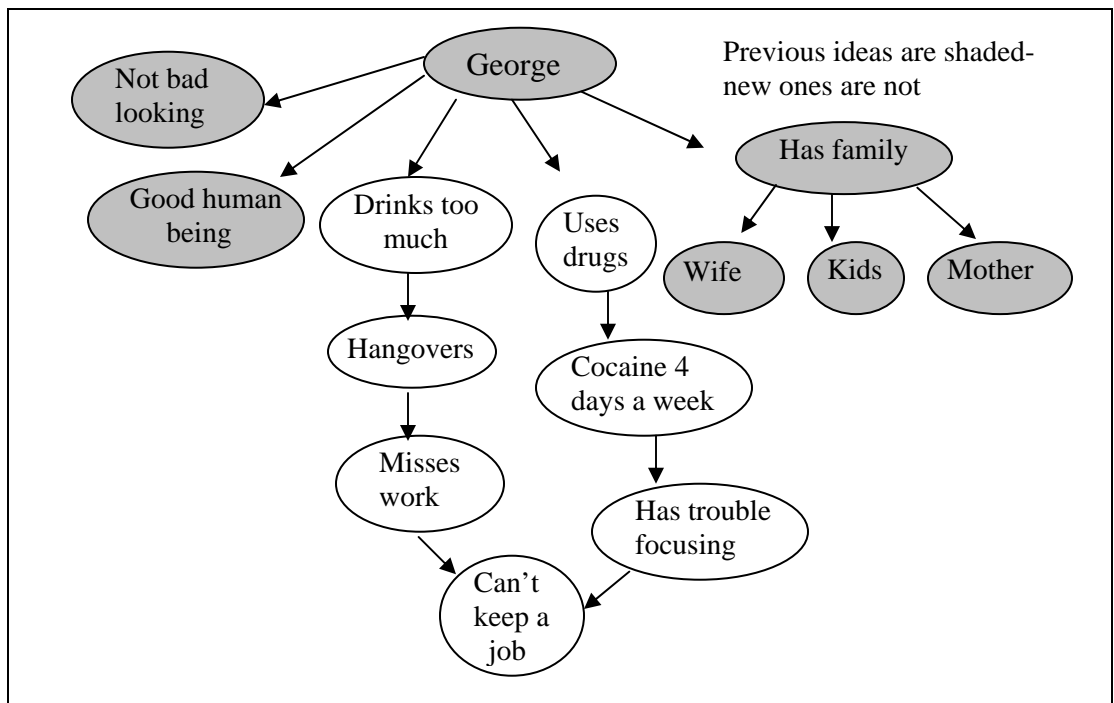
Stage 1



Stage 2



Stage 3



## **Why use “fill-in-the-blanks” and “free” maps?**

Simply put, over 35 published articles show these maps can significantly improve the treatment journey. If you are interested in details of this scientific evidence, see the Appendix.

## **Who benefits from maps?**

Studies show that most clients benefit from maps, but those with communication and attention problems benefit most (again, see Appendix for details). Counselors often say they too benefit by gaining a deeper understanding of their client and by having a systematic approach to guiding their interactions with clients.

## **When to use maps?**

Maps in this guidebook can be used at any point during treatment. They work for discussing problems and needs, planning treatment, reviewing progress during counseling sessions, or as “homework” for a client or the counselor. Although their numbering reflects a popular sequence, they can be taken in any order and can be repeated over the journey as needed.

## **How to use maps?**

Probably the best way to start using maps is to just jump in. They are easy to understand and as long as you treat them as just guides to thinking rather than prescriptions, there should be little problem getting started. The guides that make up the bulk of this book are to explore parts of the treatment journey. Once again they are:

- Mapping Guide 1: Exploring Self
- Mapping Guide 2: Social Improvement
- Mapping Guide 3: Decision Making
- Mapping Guide 4: Taking Control
- Mapping Guide 5: Monitoring Progress
- Mapping Guide 6: Relapse and Disease
- Mapping Guide 7: General Planning
- Mapping Guide 8: Free Mapping

Make working copies of selected maps or make overheads for viewing. They can be used in individual sessions, in groups, or as homework. You might find new uses for them or design your own. We would like to see your ideas and creations so that we can share them with others (contact [D.Dansereau@tcu.edu](mailto:D.Dansereau@tcu.edu) with your thoughts or questions about using maps).

If you would like to see examples of the “completed maps” go to the Case Study section of this guide book.

## **What difficulties will you encounter?**

You will likely not encounter major problems along the way if you use the maps merely as suggested guides to give you ideas. If they are not helping in a particular situation, they can be modified or not used at all. We hope you can find a set of maps will become a valuable tool in helping clients identify and reach their treatment goals.





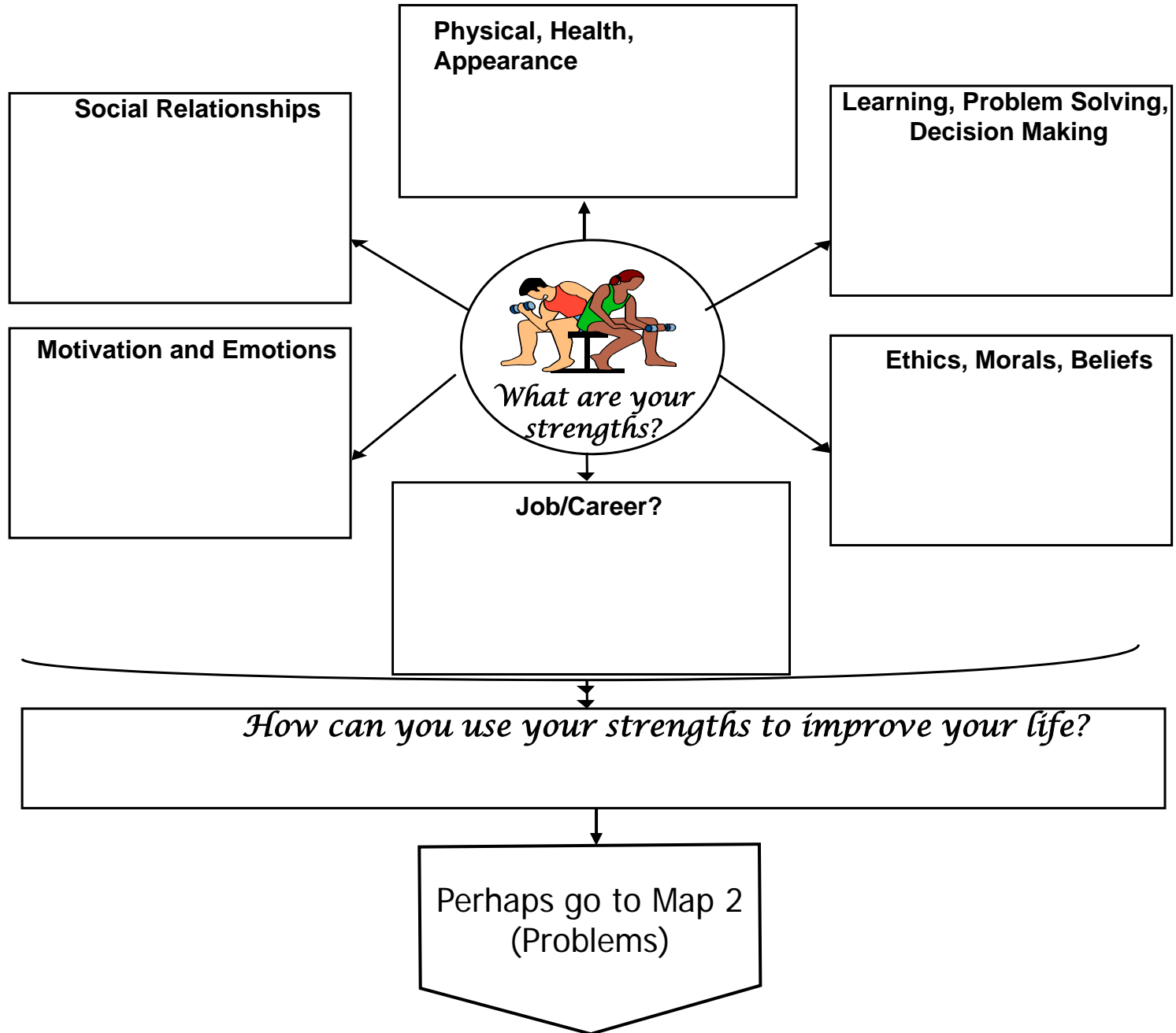
# MAPPING GUIDE 1: EXPLORING SELF MAPS

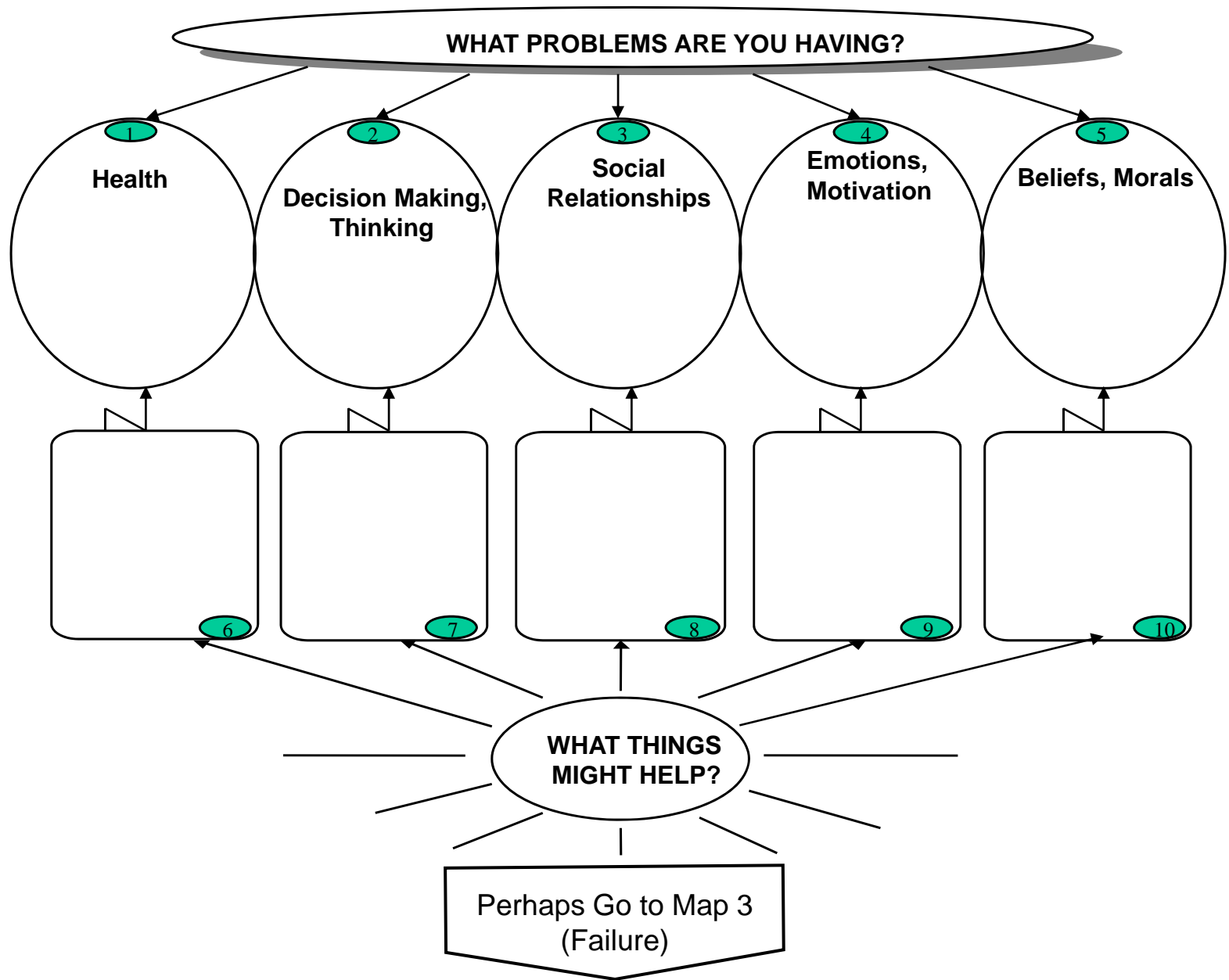
Purpose: These maps can help a person better understand their strengths and weaknesses, and how they can be used in a positive way. The maps will also help a person to develop a more accurate level of self esteem.

Method: Use Exploring Self Maps 1-4 to guide thinking. Use “Free” Mapping as needed (see Mapping Guide 8, page 36).

**There are no rules; use these anyway you like!**

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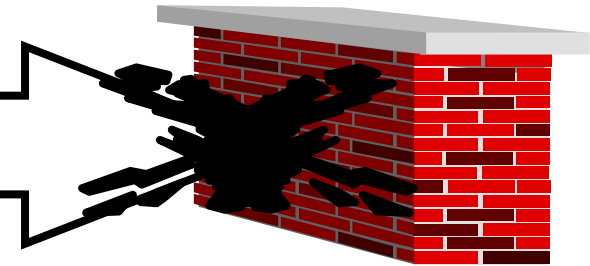


**RUNNING INTO A BRICK WALL**

What was the unsuccessful attempt?



1



C = Characteristic  
I = Influence  
L = Leads to  
P = Part

**WHY WAS IT UNSUCCESSFUL?**

P

P

P

Your role?

Other people?

Describe how this has happened to you before?

2

3

4

L

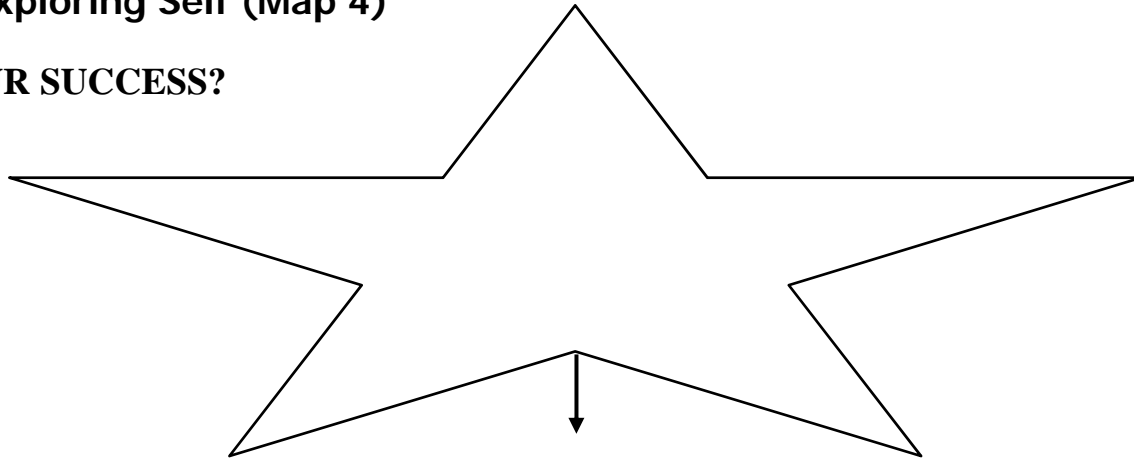
What can you do differently next time?



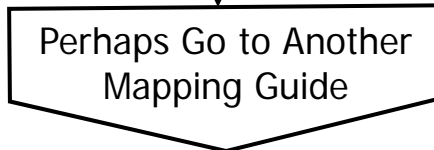
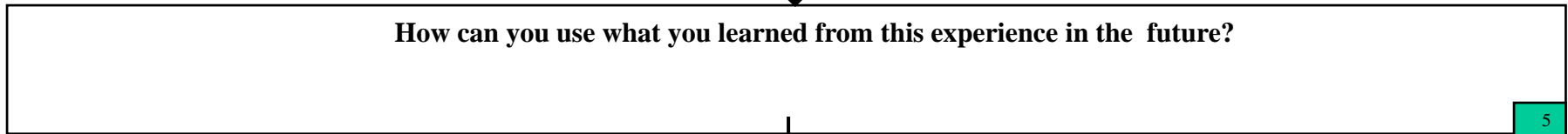
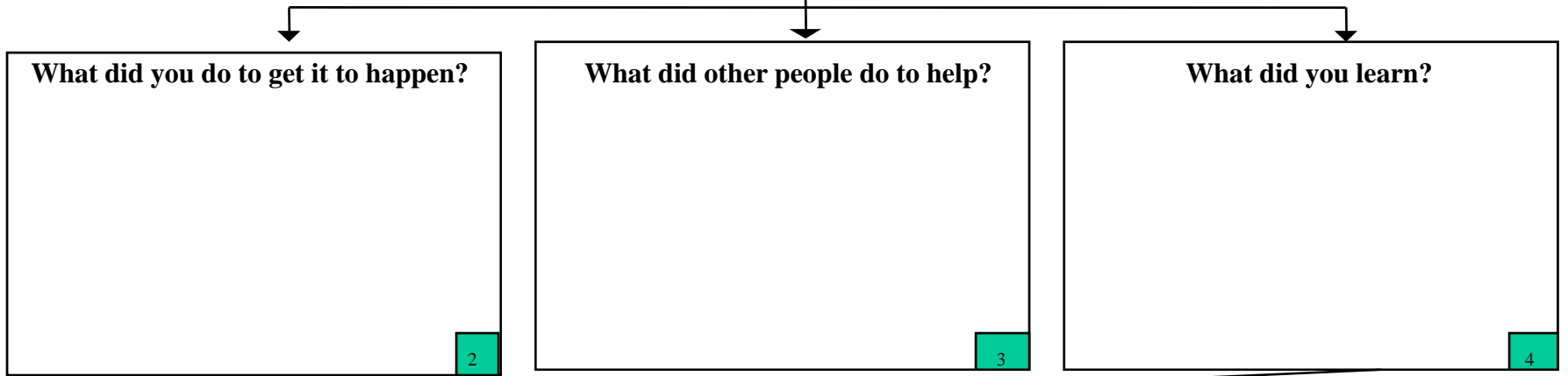
5

Perhaps Go to Map 4  
(Success)

**WHAT WAS YOUR SUCCESS?**



**HOW / WHY DID IT HAPPEN?**



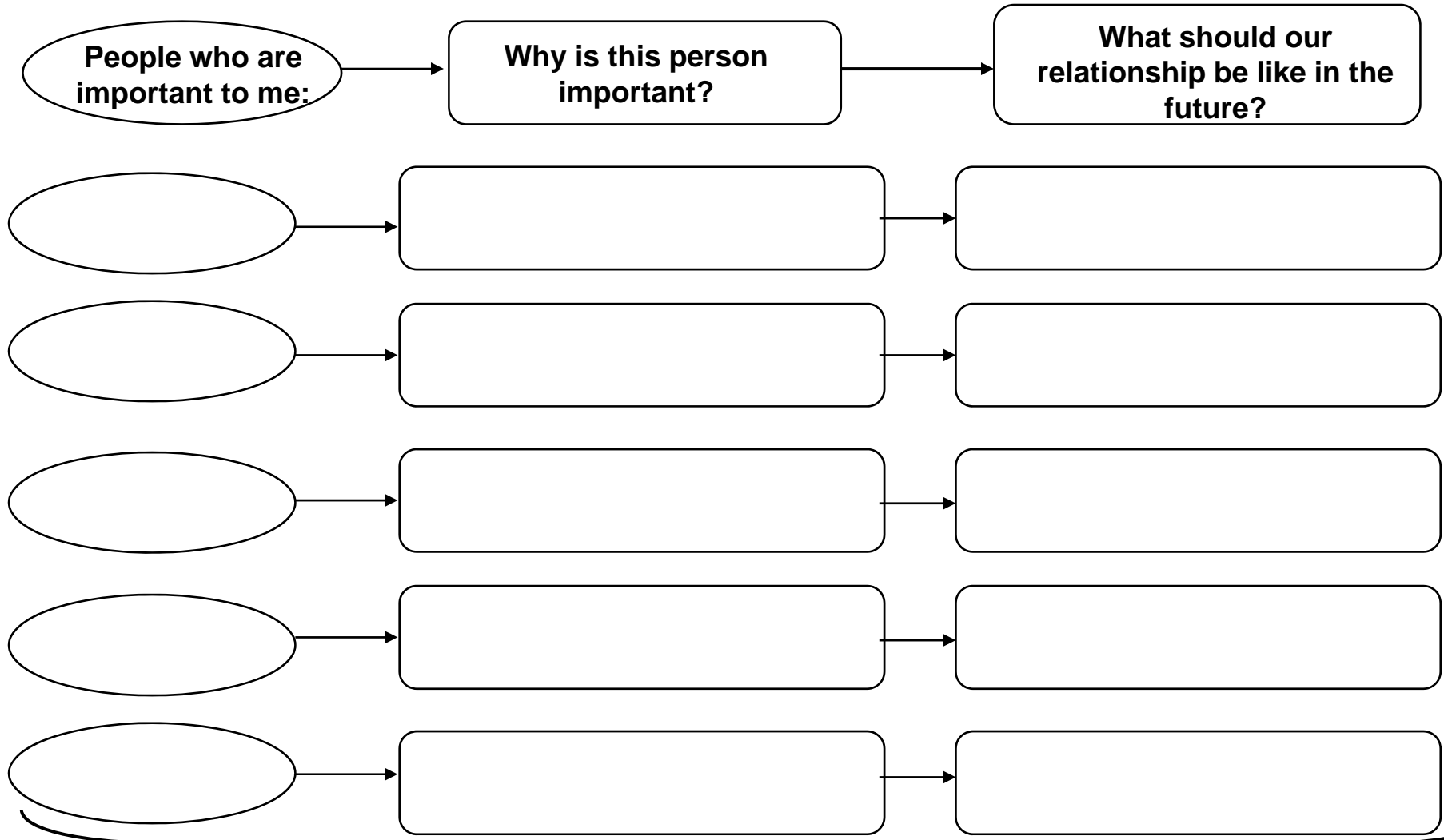
# MAPPING GUIDE 2: SOCIAL IMPROVEMENT MAPS

Purpose: These maps can help a person better understand and relate to others.

Method: Use Social Improvement Maps 1 – 4 to guide thinking. Use “Free” Mapping as needed (see Mapping Guide 8, page 36).

**There are no rules; use them anyway you like!**

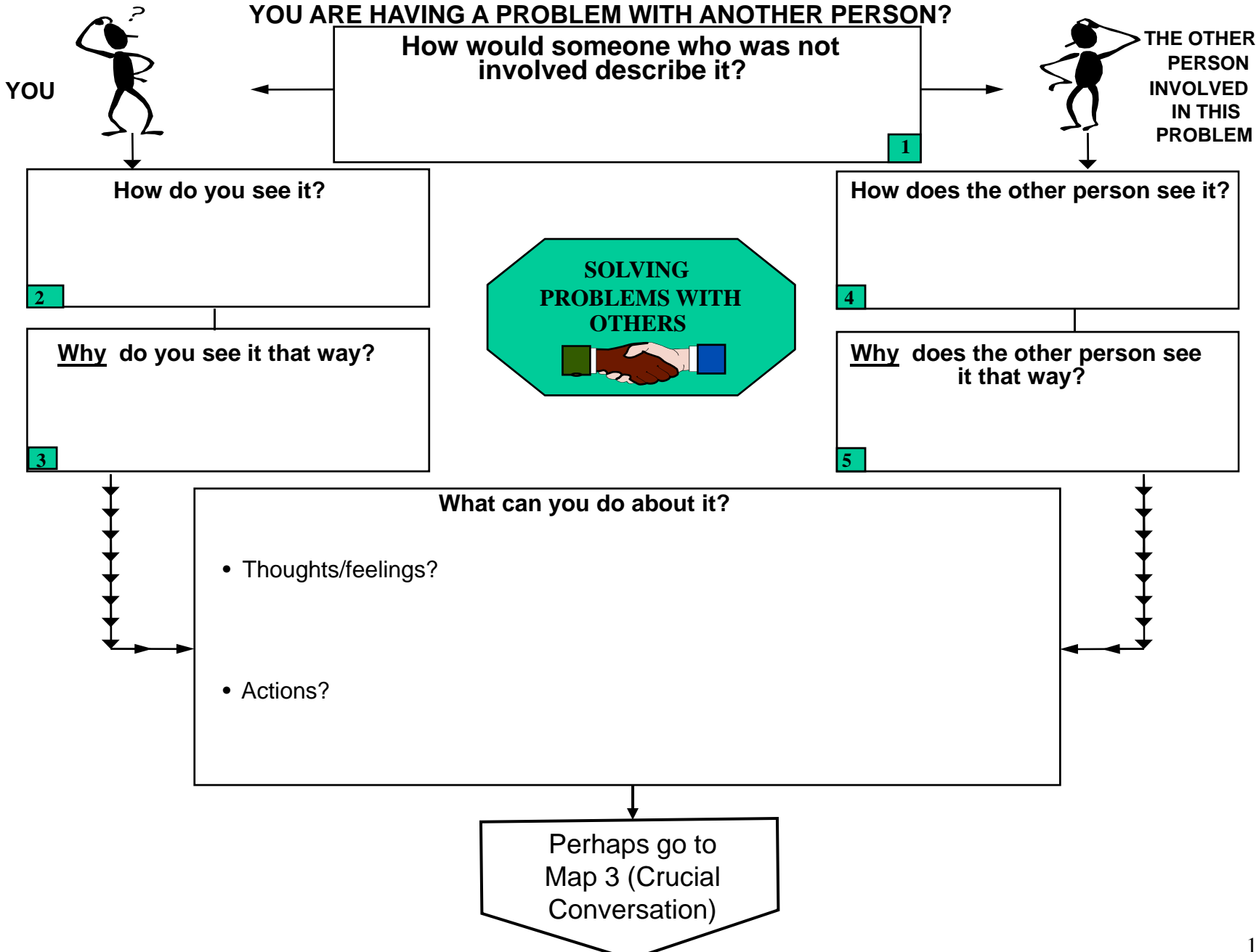
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Perhaps go on to Map 2  
(Relationship Problem Map)

# Mapping Guide 2: Social improvement (Map 2)

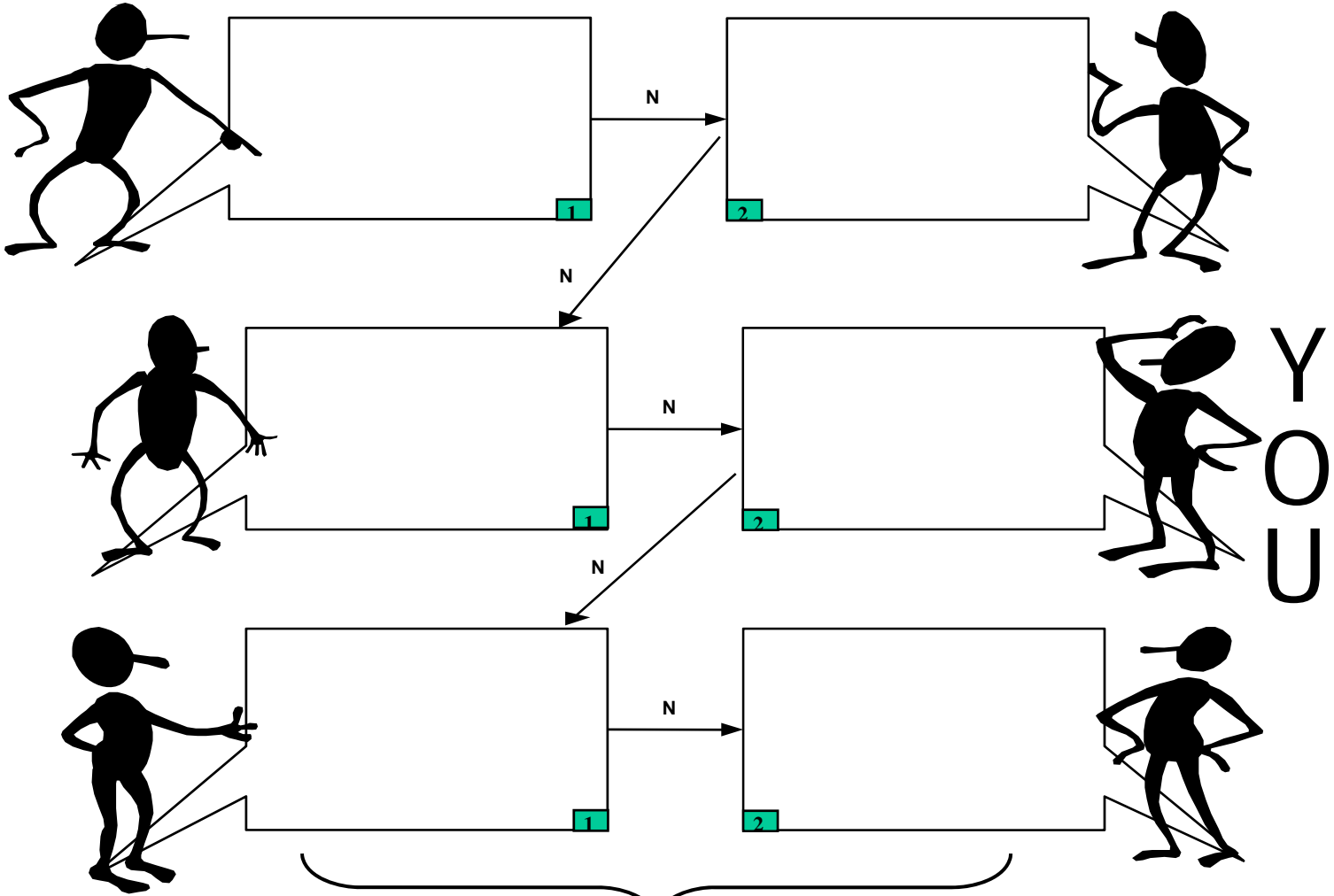
# Relationship Problem





AN IMPORTANT CONVERSATION

OTHER PERSON



YOU

N = Next

Perhaps go to  
another Map Guide

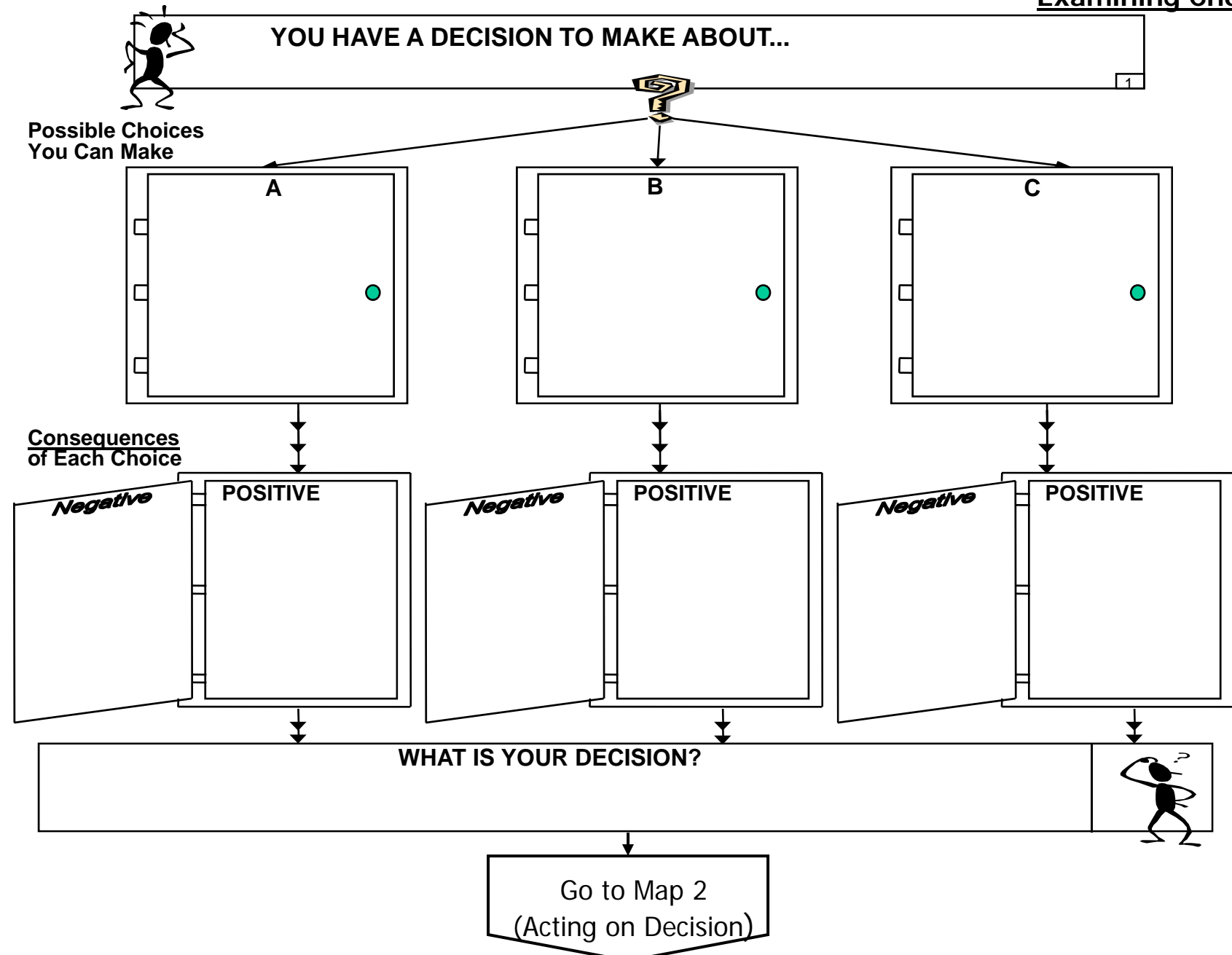
# MAPPING GUIDE 3: DECISION-MAKING MAPS

Purpose: These maps can help a person think through an important decision.

Method: Use Decision Making Maps 1-3 to guide thinking. Use “Free” Mapping as needed (see Mapping Guide 8, page 36).

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What is the Specific Decision?

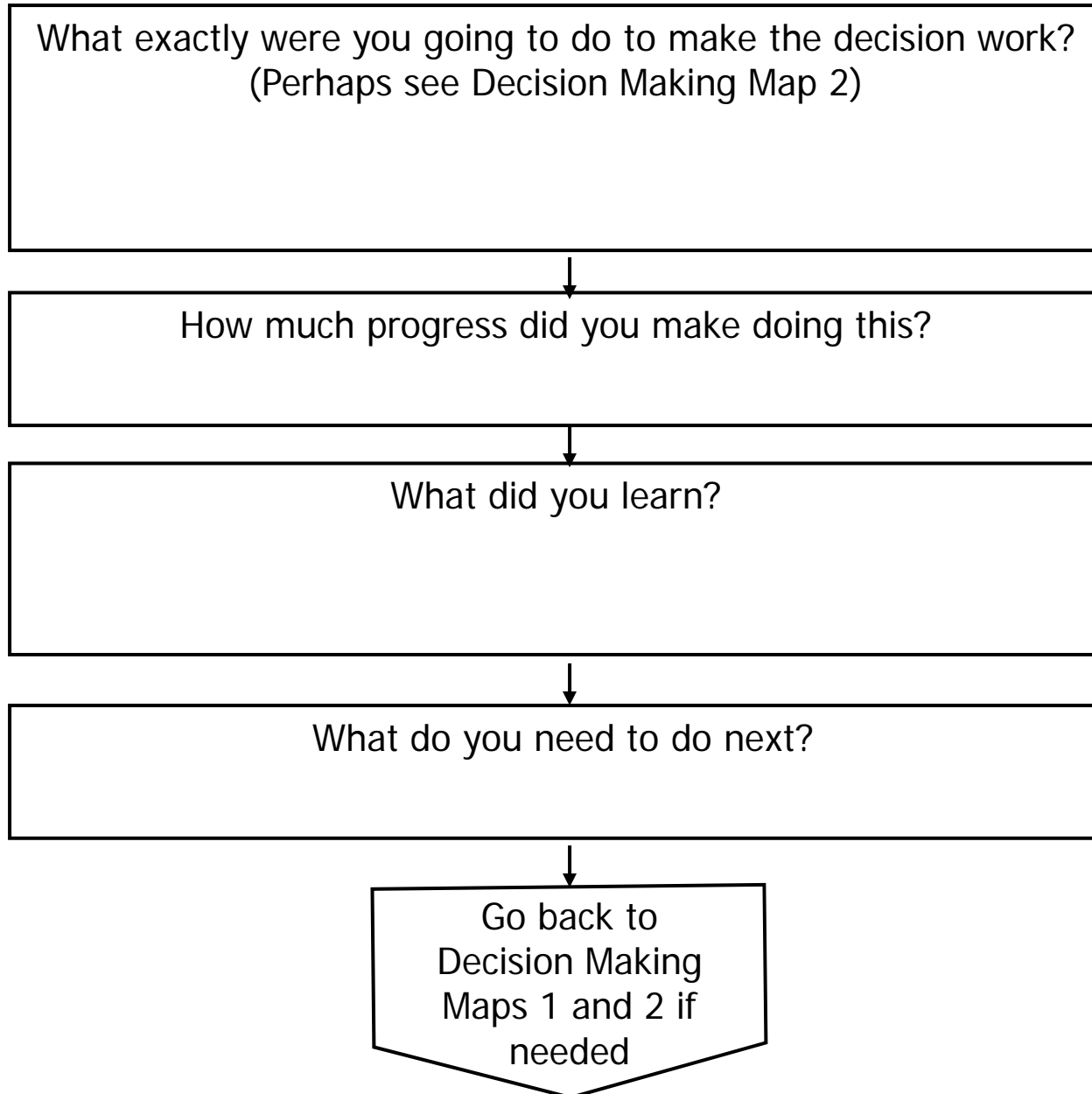
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What actions will you take to make this decision work?

What will you do?

When?

Go to Map 3  
(Decision Progress)  
When appropriate



# MAPPING GUIDE 4: TAKING CONTROL MAPS

Purpose: These maps can help a person cope with LEEPS:

Life

Events (e.g., a relapse, argument with a family member, losing a job)

Emotions (e.g., anger, anxiety, depression)

Problems (e.g., a problem with transportation, eating disorder, money problems)

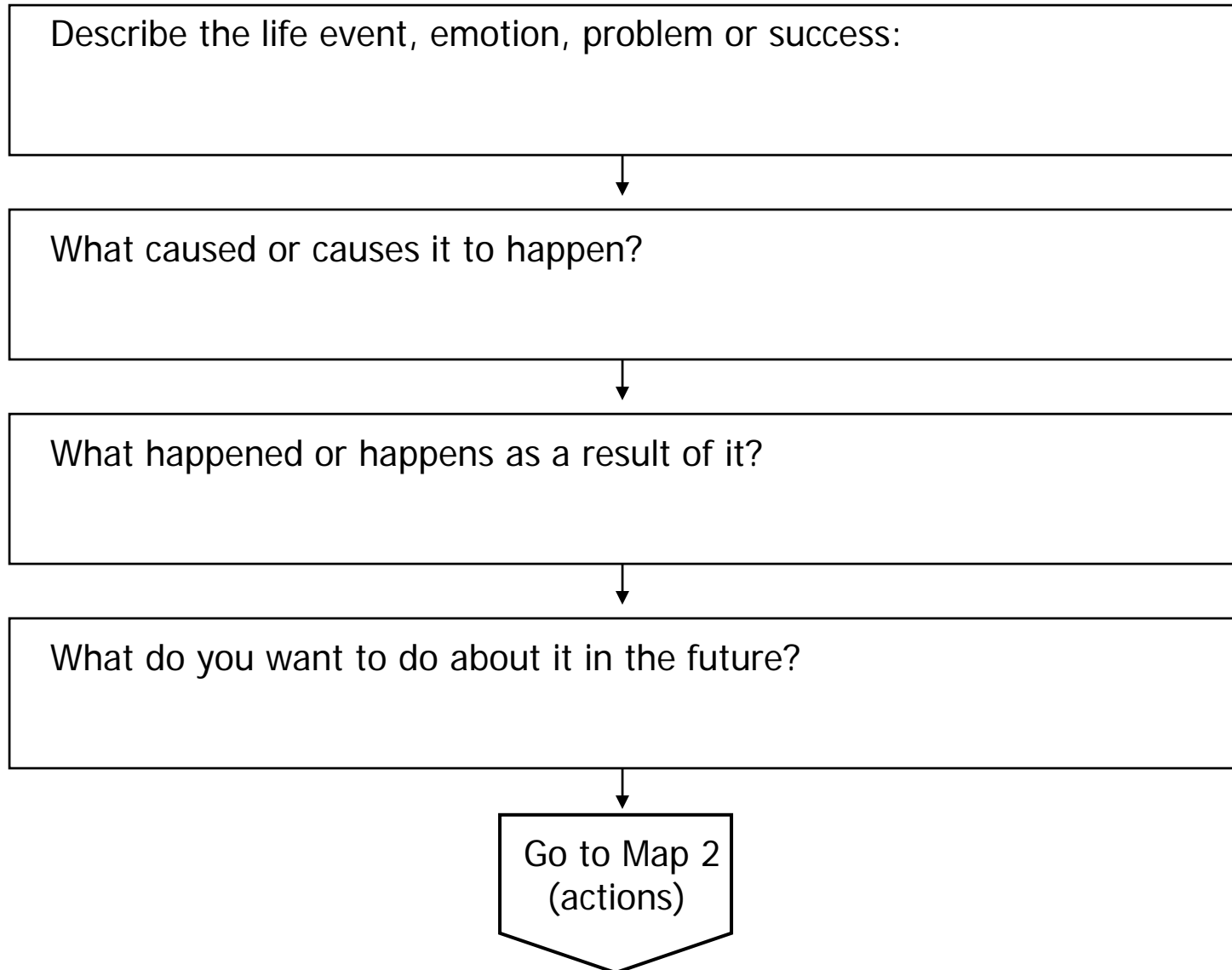
\***S**uccesses (e.g., getting a job, resisting drugs, getting along with a friend)

\*These are things that a person  
would like to have happen again  
in the future.

Method: Use Taking Control Maps 1 thru 3 to guide thinking. Use “Free” Mapping as needed (see Mapping Guide 8, page 36).

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# Mapping Guide 4: Taking Control (Map 2)

**LEEPS** (Life Events,  
Emotions,  
Problems, Successes)  
**ACTIONS**

What is your specific goal for the future?
What actions will you take to get this goal?

What will you do?

When?

--

--

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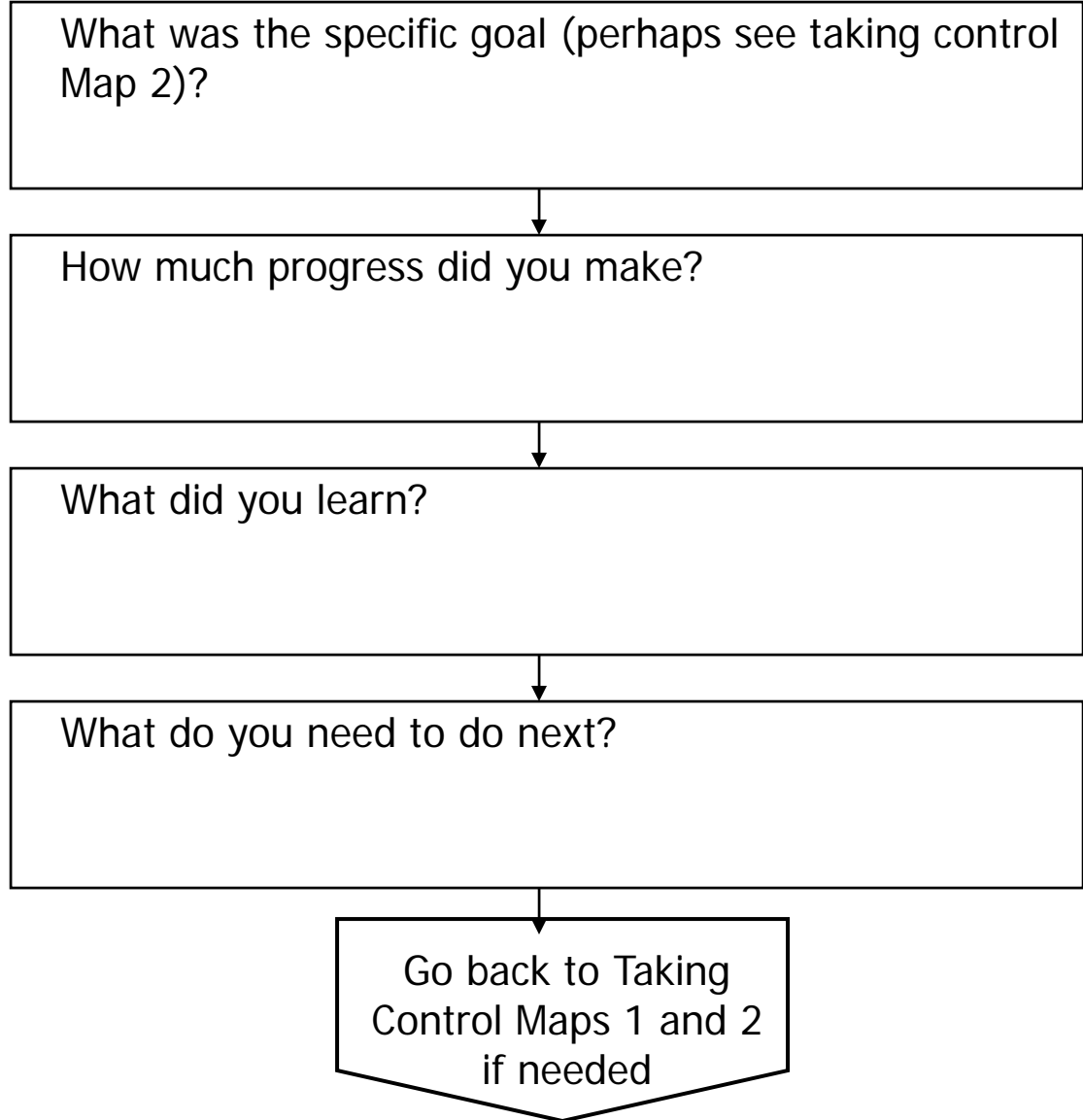
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Go to Map 3  
(Progress)  
When appropriate





# MAPPING GUIDE 5: MONITORING PROGRESS

**Purpose:** These maps are designed as a guide to help clients understand, evaluate, and explain progress across key stages of change, as represented in the *TCU Treatment Process Model*. They also are tools for planning therapeutic activities that will sustain or increase future progress.

**Method:** The first map serves as an orientation and overall review of “how treatment works” and the program expectations for clients in treatment.

In Monitoring Progress Map 2, the client fills in the barometer for each stage indicating strength of commitment and progress. The client explains the ratings and describes what will be done so progress will be maintained or improved in the future. Ratings can be made as homework, or during sessions with counselor assistance. They can be repeated as needed to review progress.

Because these client functioning categories also are measured by the CEST assessment, comparisons can be made between client ratings on these “gauges” and scale scores.

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# How Treatment "Works"

Client Evaluation of Self & Treatment (CEST) ratings can be used to monitor client status & progress in treatment



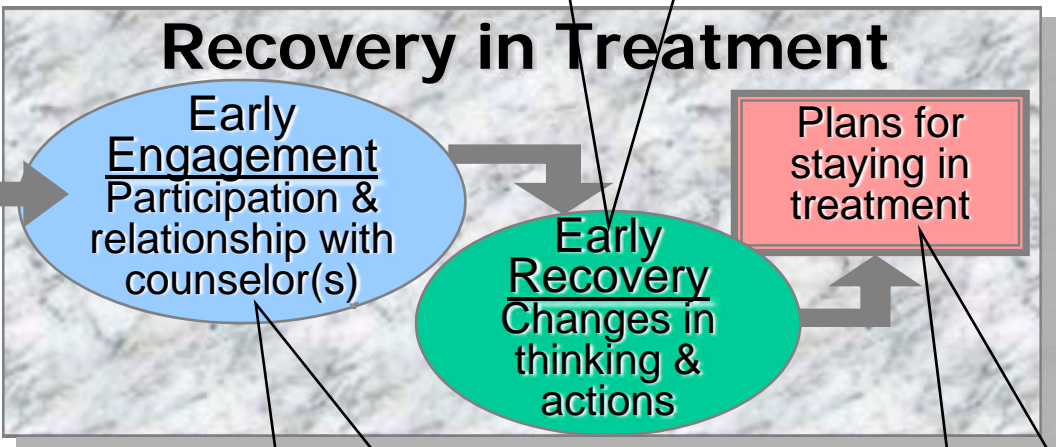
**Mapping Guide 5: Monitoring Progress (Map 2)**

**Explain:**  
What will you do?

**Explain:**  
What will you do?

**Explain:**  
What will you do?

Readiness for treatment & change



**Mark your Progress Gauges!**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Explain:**  
What will you do?

**Explain:**  
What will you do?

Question:  
How well do these ratings compare with CEST scores??

Mapping Guide 5: Monitoring Progress (Map 2 example)

**Explain:** I am very motivated to get my life straight..

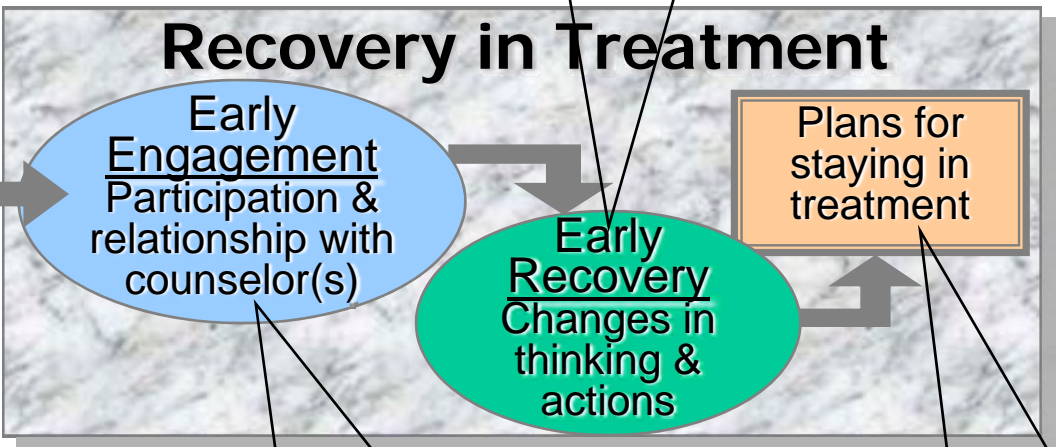
**What will you do?**  
I plan to keep trying even if I have setbacks.

**Explain:** I'm doing much better with my daughter, but I still argue with mom.

**What will you do?**  
I will try to see my mom's side of things when we talk.

**Explain:** I slipped last week.

**What will you do?**  
I'm going to stop hanging out with friends who do "coke."



**Mark your Progress Gauges!**

Name:

Chris

Date:

7/27/05

**Explain:** I missed a meeting, but I really like my counselor.

**What will you do?**  
I will keep a calendar so I won't miss anymore sessions.

**Explain:** I'm thinking I can do this on my own but my counselor doesn't.

**What will you do?**  
I really need to listen to my counselor since he has seen people like me before.

**Question:**  
How well do these ratings compare with CEST scores??

# MAPPING GUIDE 6: RELAPSE AND DISEASE MAPS

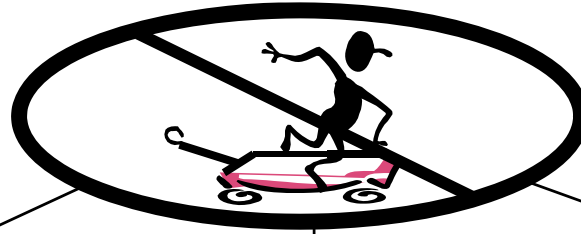
Purpose: These maps will help a person understand and manage relapse and serious diseases.

Method: Use Managing Relapse and Disease Maps to guide thinking. Use “Free” Mapping as needed (see Mapping Guide 8, page 36).

**There are no rules; use these anyway you like!**

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# KEEPING MYSELF FROM RELAPSING



**This is how I will deal with PEOPLE who might lead me to relapse.**

(a) These are the warning signs I will look for:

(b) This is what I will do:

**This is how I will deal with SITUATIONS that might lead me to relapse.**

(a) These are the warning signs I will look for:

(b) This is what I will do:

**This is how I will deal with FEELINGS, THOUGHTS, AND NEEDS that might lead me to relapse.**

(a) These are the warning signs I will look for:

(b) This is what I will do:

Perhaps Go to Map 2  
(Recovery from relapse)

Mapping Guide 6:  
Relapse and Disease (Map 2)

**IF I DO RELAPSE, THIS IS WHAT I WILL DO**



This is what I will do to get the help I need from other people.

This is what I will do to minimize the damage to myself.

This is what I will say to myself to keep from slipping again.

Perhaps Go to Map 3  
(Avoiding serious disease)



**WAYS TO AVOID GETTING  
OR GIVING SERIOUS DISEASE  
(such as HIV/AIDS, HEP B and C)**

SEXUAL BEHAVIOR  
What do you say to your sexual partner(s) to avoid a serious disease such as HIV/AIDS, HEP B and C?

What do you do to avoid serious diseases?

NEEDLE USE  
What do you say to your drug partner(s) to avoid a serious disease such as HIV/AIDS, HEP B and C?

What do you do to avoid serious diseases?

How can you know you have a serious disease like HIV/AIDS, and HEP B and C? What do you have to do?

If you are afraid of being tested, what can you do to overcome that fear?

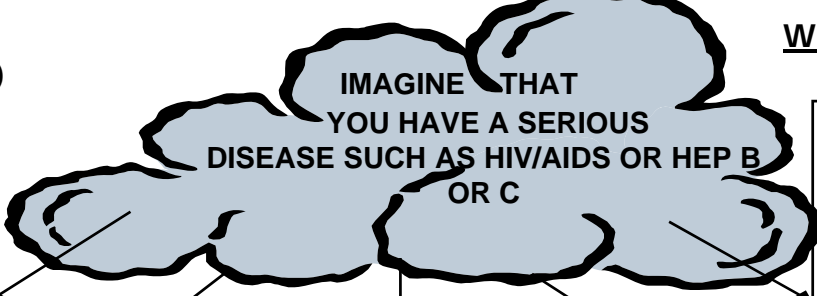
Perhaps go to Map 4  
(What if you have a serious disease)

# Mapping Guide 6: Relapse and Disease (Map 4)

## What if you have a serious disease

How can you know you have a serious disease?

1



What does this disease do to you and when does it do it?

2

How can you keep from giving it to other people?

3

What can you do to help yourself if you have it?

4

**FEARS ABOUT A SERIOUS DISEASE**

What fears do you have about receiving test results about a serious disease?

5

What fears have kept you from being tested?

6

If you have no fear about serious disease, explain why.

7

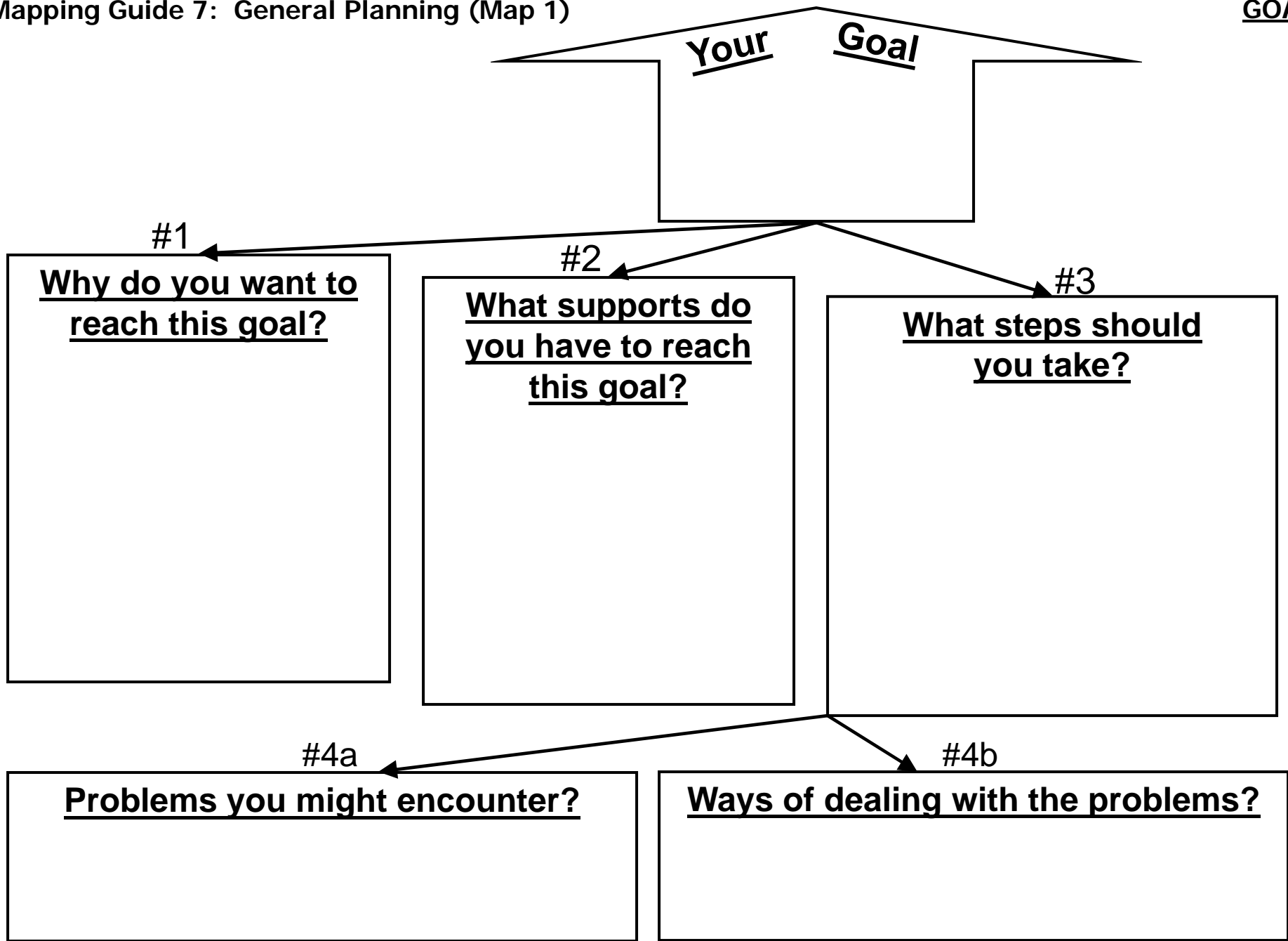
Perhaps go to Other Mapping Guides

# MAPPING GUIDE 7: GENERAL PLANNING

Purpose: To help a person examine a goal and create an action plan. It is similar to Care Planning but can be used with any goal.

Method: Use General Planning Maps 1 thru 3 to guide thinking. Use Free Mapping as needed (see Mapping Guide 8, page 36).

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**Mapping Guide 7:  
General Planning (Map 2)**

What is your specific goal for the future?
What actions will you take to get this goal?

What will you do?

When?

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--

--

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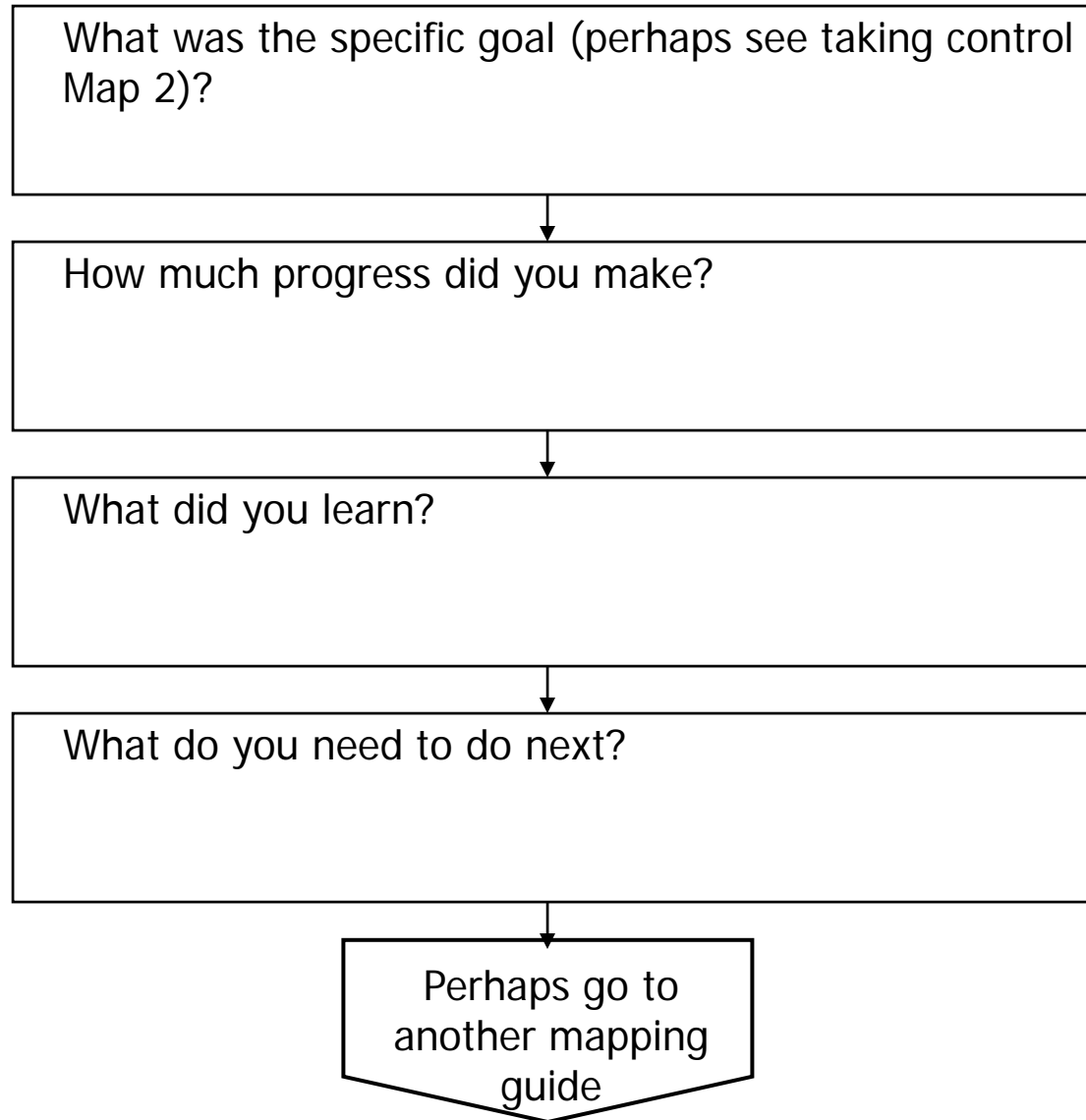
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Perhaps Go to  
Map 3 (Progress)  
when appropriate



# MAPPING GUIDE 8: FREE MAPPING

Purpose: To help a person create Free Maps.

Method: Use the Free Map Guide to create maps on important thoughts, feelings, and actions. These Free Maps can be used by themselves or together with any of the Mapping Guides.

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## Mapping Guide 8: Free Mapping (Guide)

### Instructions for Growing a Free Map:

1. Put your main thought, feeling, or action in a box in the center of the sheet or near the top.
2. Ask a question about the thought, feeling, or action. Put the answer in a box and connect it to the main box with a line.  
Here are some good questions, but you may come up with better ones.
  - a. What things lead to it or cause it?
  - b. What does it lead to or cause?
  - c. What influences it?
  - d. What is it like? What is it similar to?
  - e. What happens at the same time?
3. Repeat 2 as much as needed then do the same thing with some of the other boxes you created (i.e., ask questions and correct answers).
4. Once you have made some progress on the map, ask what could you change or look at differently in order to improve things in your life.
5. Neatness is not important. Return to the map as often as you like.





## Case Study of CHRIS: *A Sample of Maps*

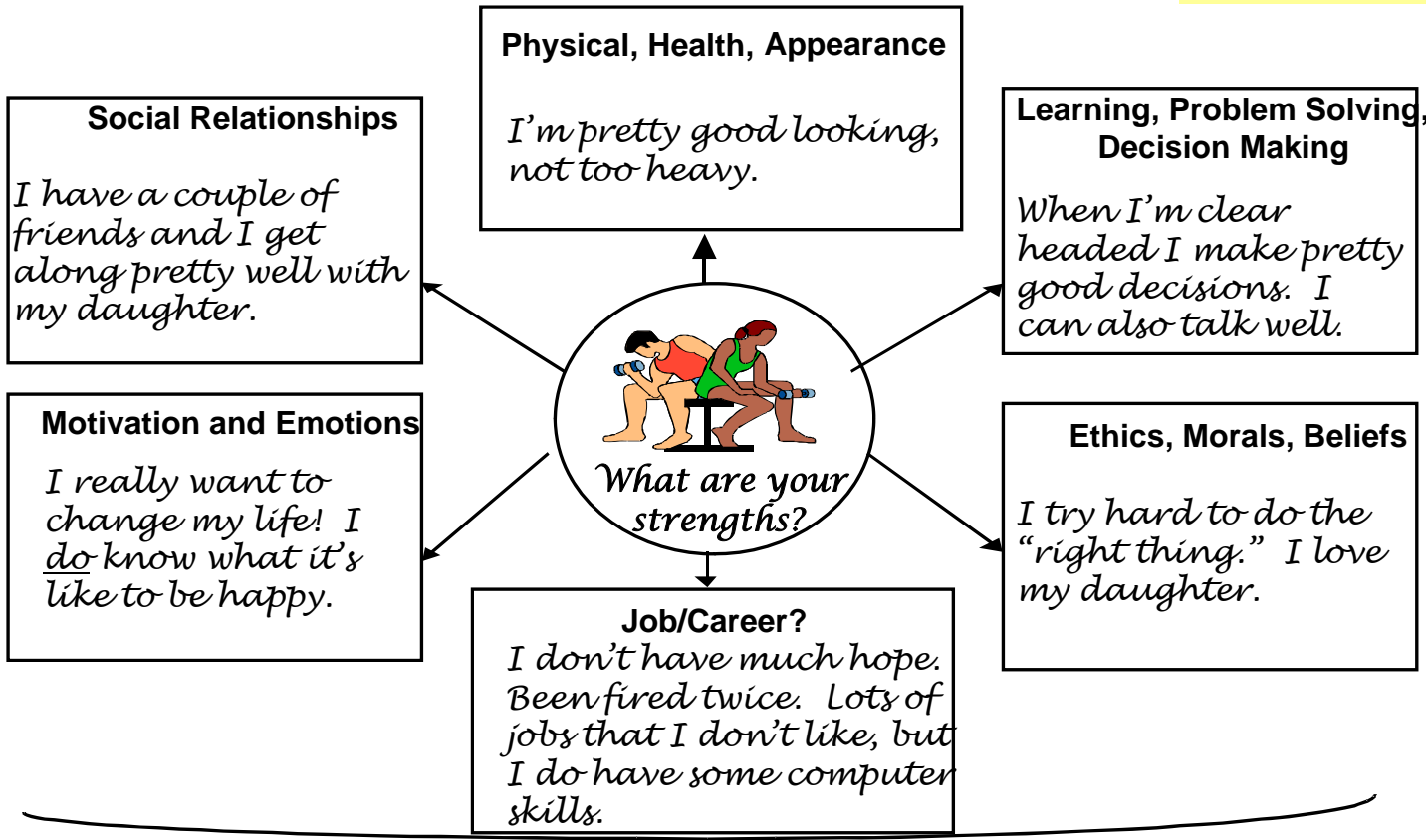
“Chris” is a fictional client who has problems with alcohol and cocaine use, as well as some interpersonal and career dilemmas that need attention.

In this case study example for using guide maps, Chris and the counselor focus on some of the interpersonal issues and begin to work on improving career opportunities.

Not all the maps presented earlier in this guidebook are completed here, and some maps are used “out of sequence” in order to illustrate the flexibility in their applications. In other situations, a different collection might be used – and some could be used more than once.

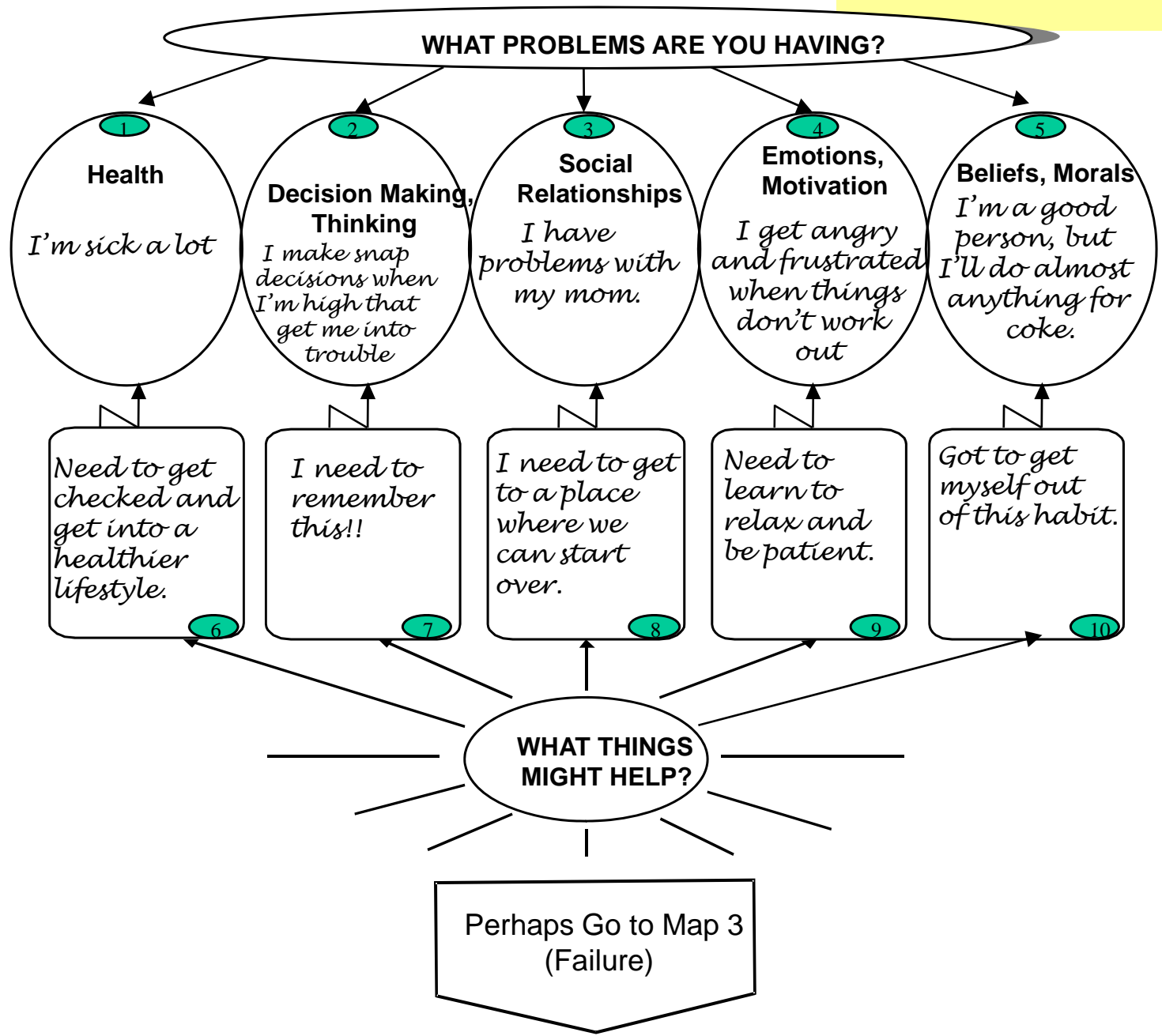
The goal of this case study is to give a simple example for how mapping tools can be used during counseling.

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*How can you use your strengths to improve your life?*  
*Once I get control of my drug habit, maybe I can use my skills and looks to go into computer sales.*

Perhaps go to Map 2  
(Problems)

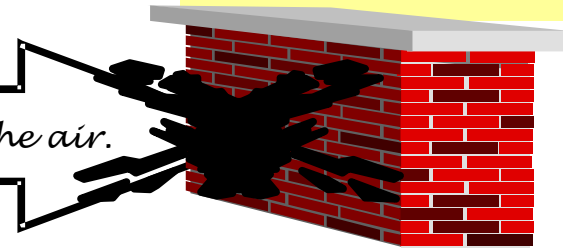


**RUNNING INTO A BRICK WALL**

What was the unsuccessful attempt?

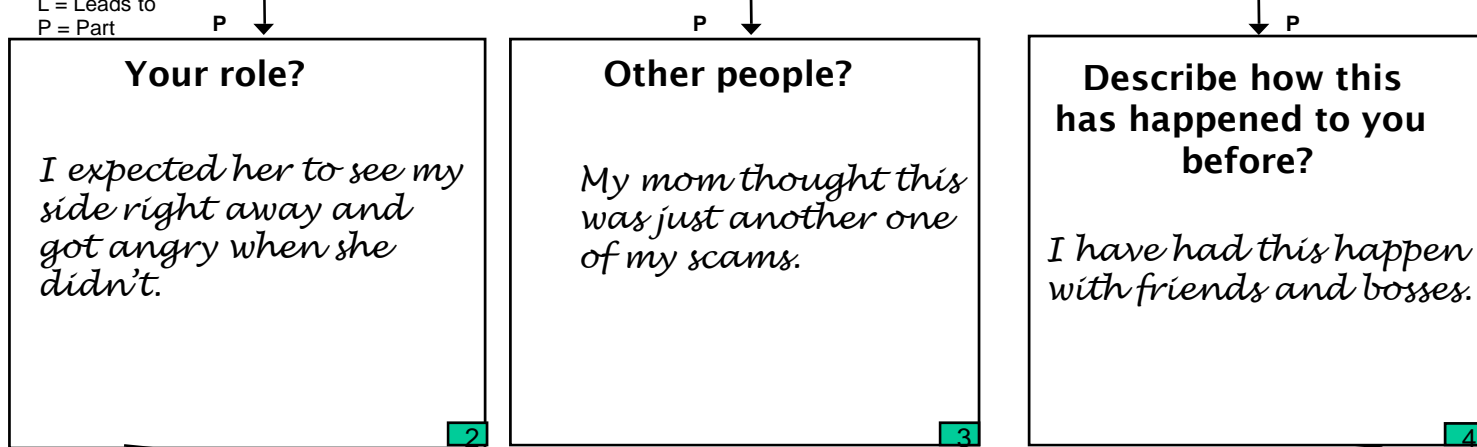


1 I tried to talk to my mom and clear the air.




C = Characteristic  
I = Influence  
L = Leads to  
P = Part

**WHY WAS IT UNSUCCESSFUL?**

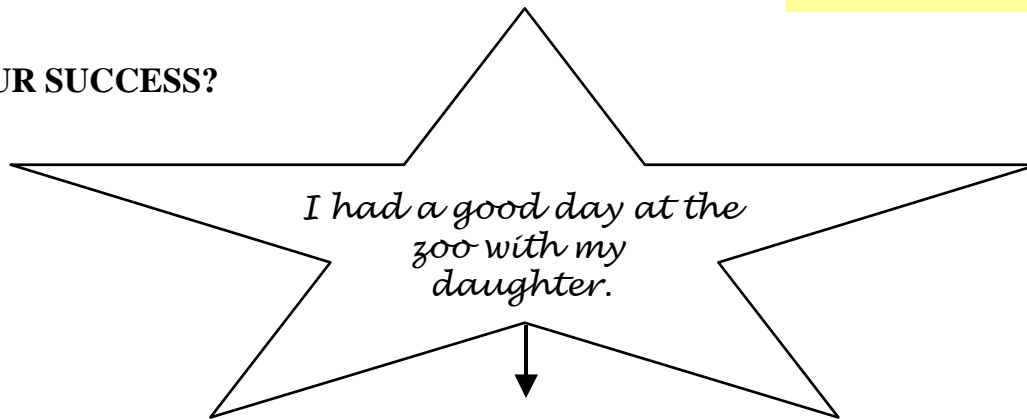


What can you do differently next time?

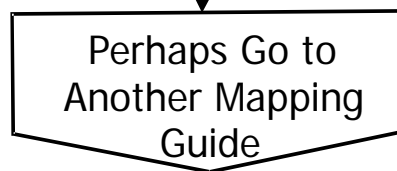
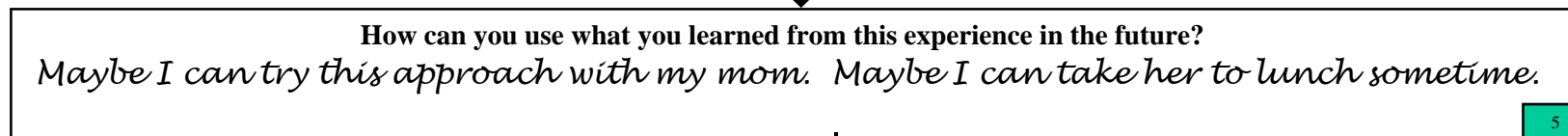
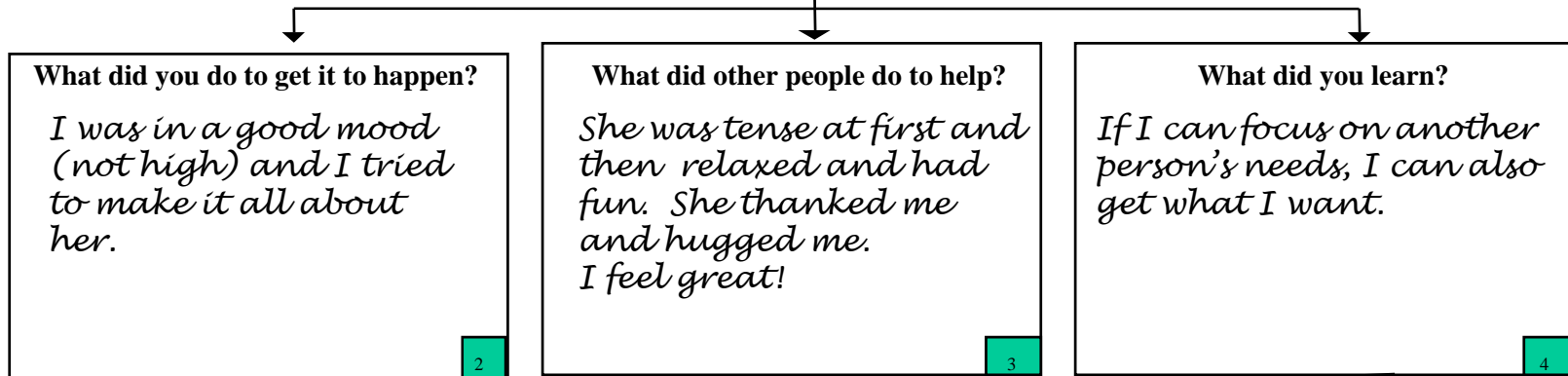
5  I need to be more patient and try to see where they are coming from.  
I need to prove myself to them.

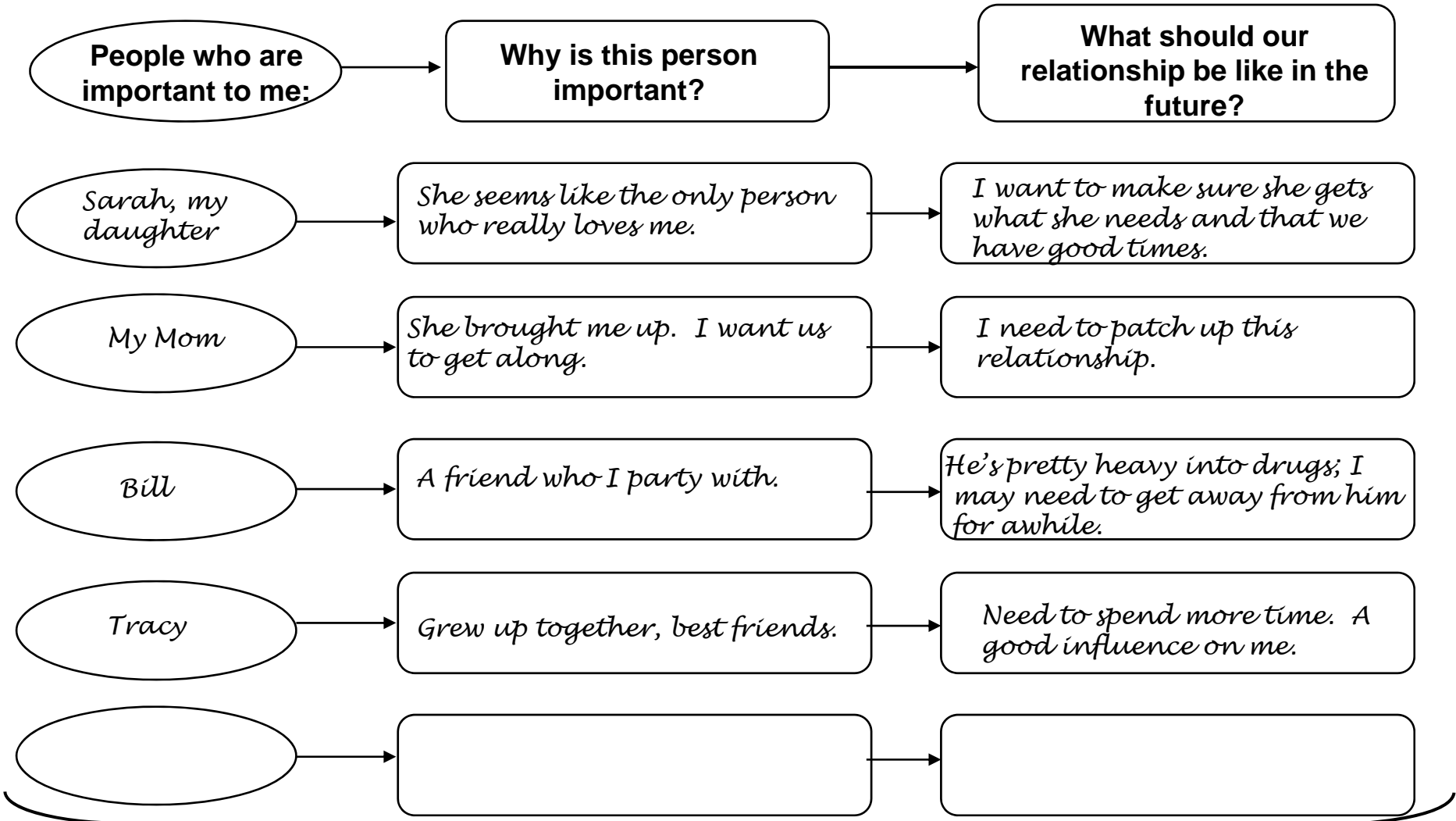
Perhaps Go to Map 4 (Success)

**WHAT WAS YOUR SUCCESS?**

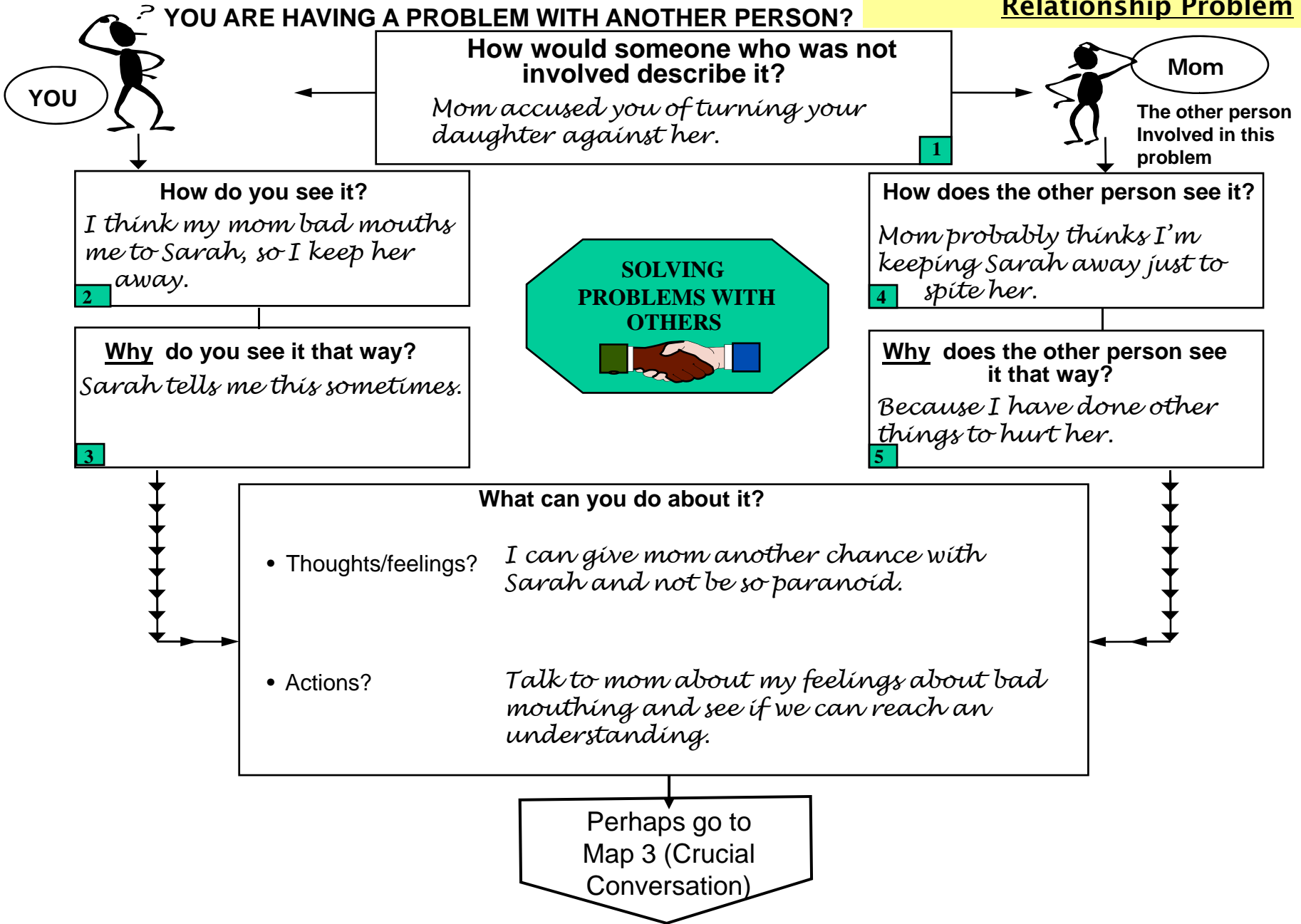


**HOW / WHY DID IT HAPPEN?**

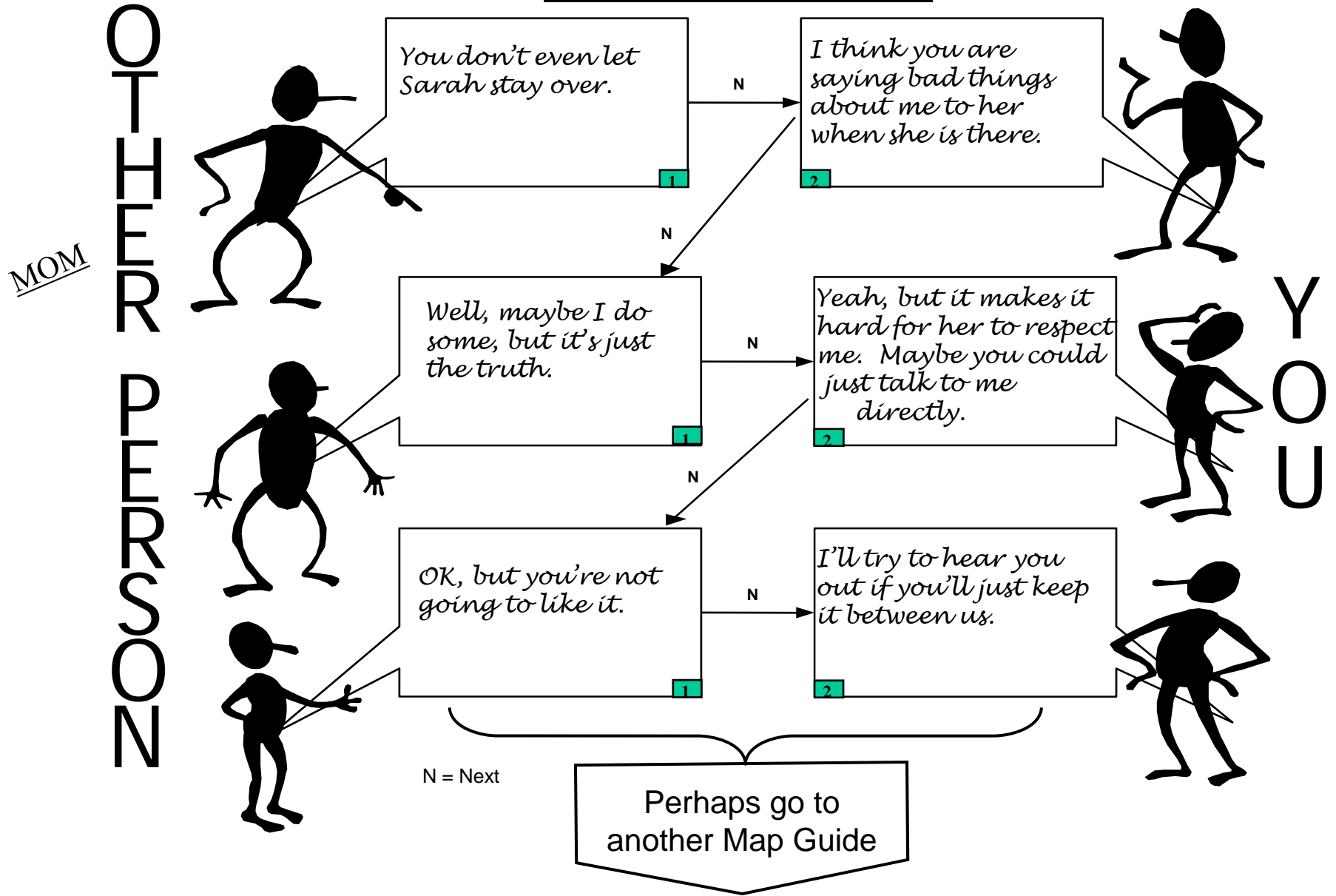




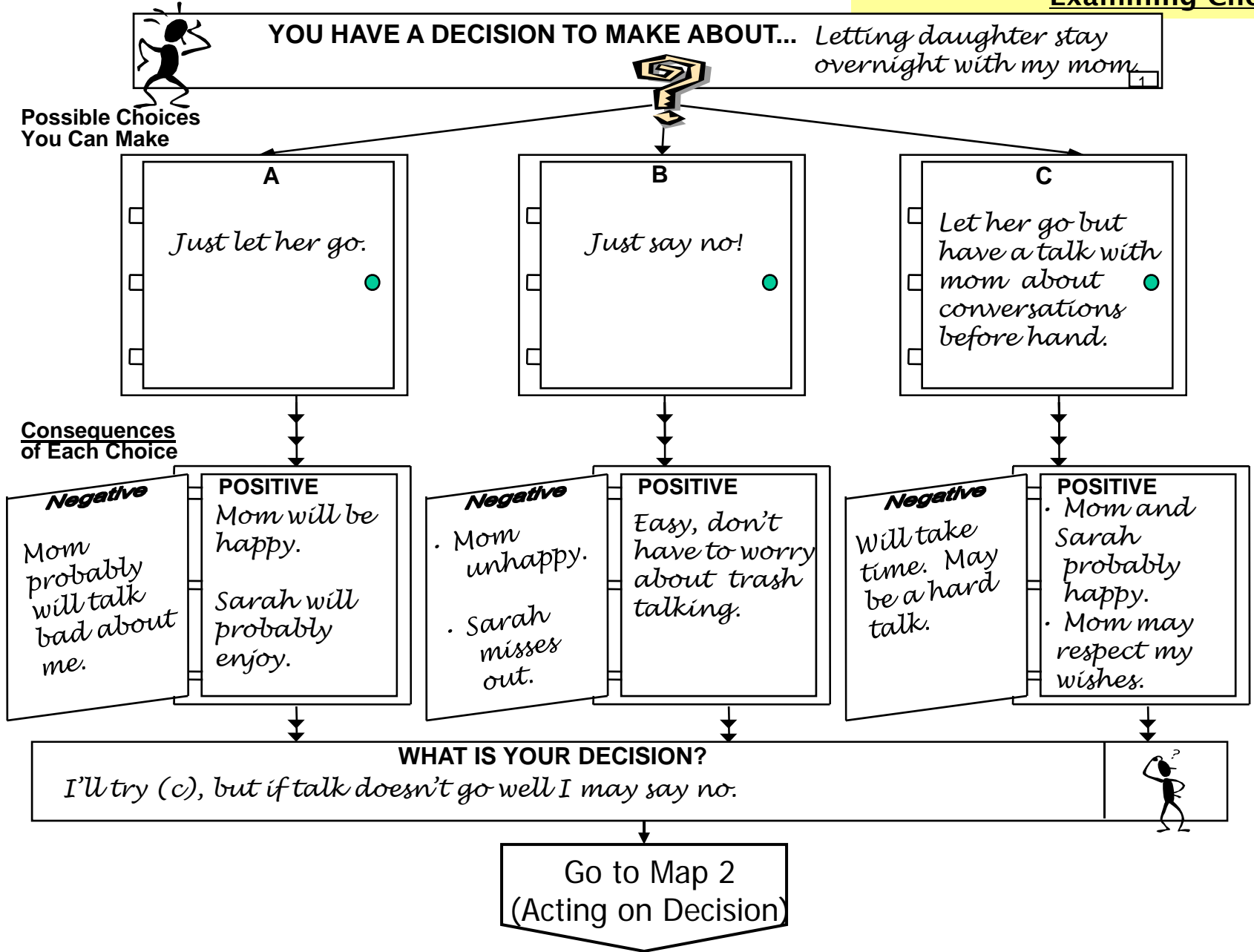
Perhaps go on to Map 2  
(Relationship Problem Map)



**AN IMPORTANT CONVERSATION**







What is the Specific Decision?  
*Let daughter go but talk to mom about talking bad about me.*

---

What actions will you take to make this decision work?

What will you do?

When?

*Figure out what I'm going to say to mom and what I will do to stay cool.*

*Today*

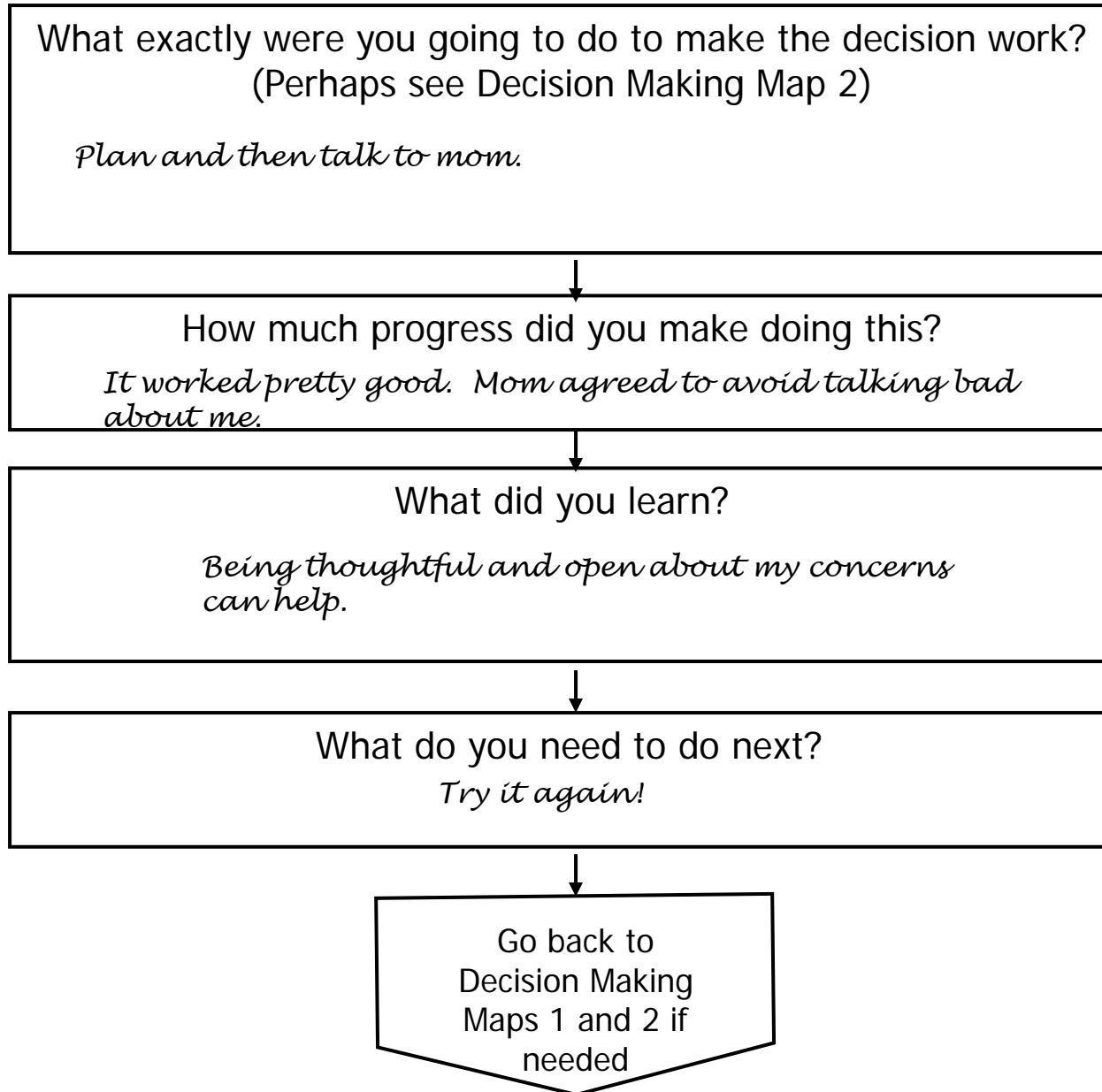
*Call mom and talk to her about letting Sarah come over.*

*Tomorrow morning*

*If it goes OK, bring her over.*

*Tomorrow night*

Go to Map 3  
 (Decision Progress)  
 When appropriate

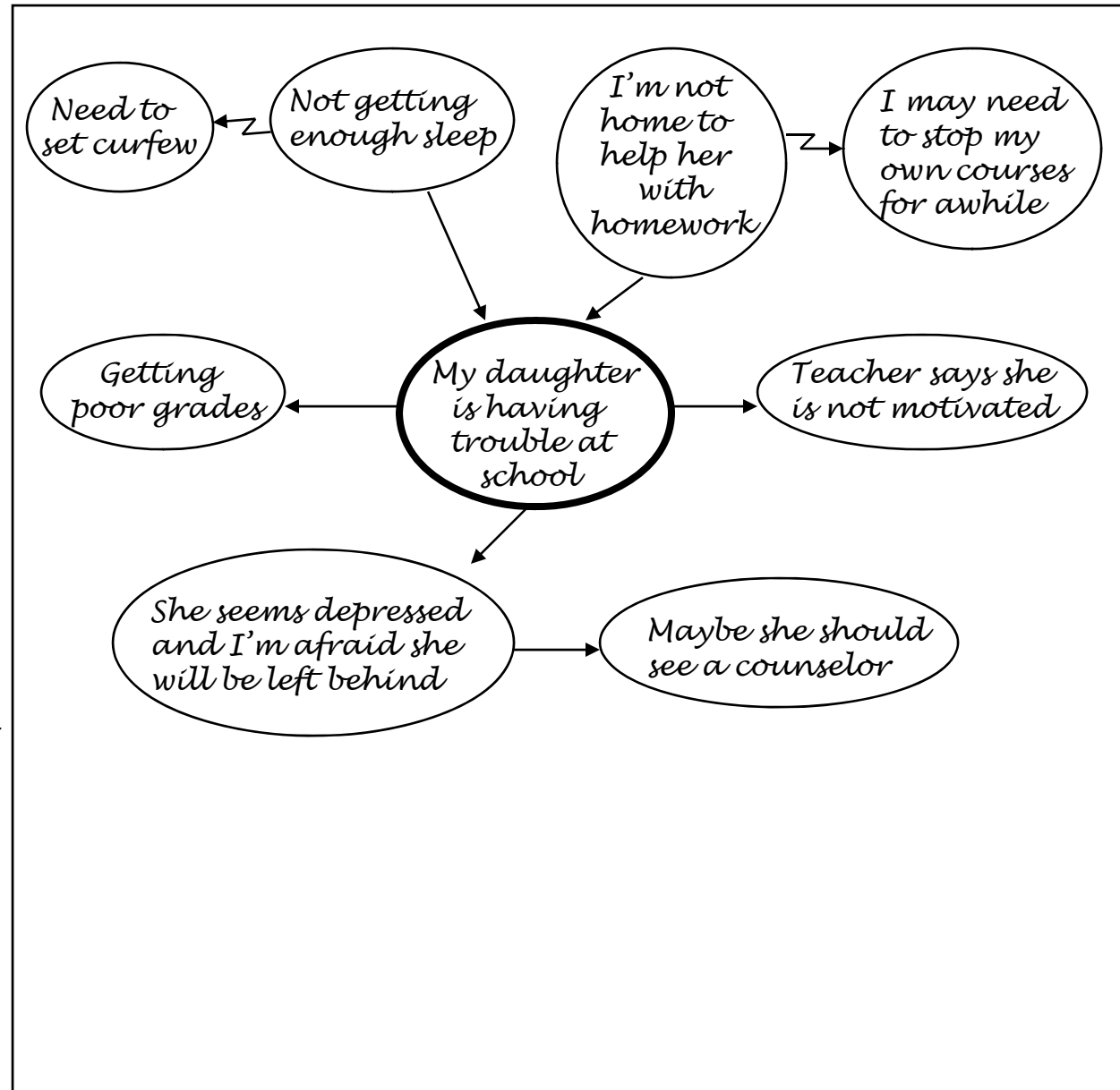


## Instructions for Growing a Free Map:

1. Put your main thought, feeling, or action in a box in the center of the sheet or near the top.
2. Ask a question about the thought, feeling, or action. Put the answer in a box and connect it to the main box with a line.
 

Here are some good questions, but you may come up with better ones.

  - a. What things lead to it or cause it?
  - b. What does it lead to or cause?
  - c. What influences it?
  - d. What is it like? What is it similar to?
  - e. What happens at the same time?
3. Repeat 2 as much as needed then do the same thing with some of the other boxes you created (i.e., ask questions and correct answers).
4. Once you have made some progress on the map, ask what could you change or look at differently in order to improve things in your life.
5. Neatness is not important. Return to the map as often as you like.

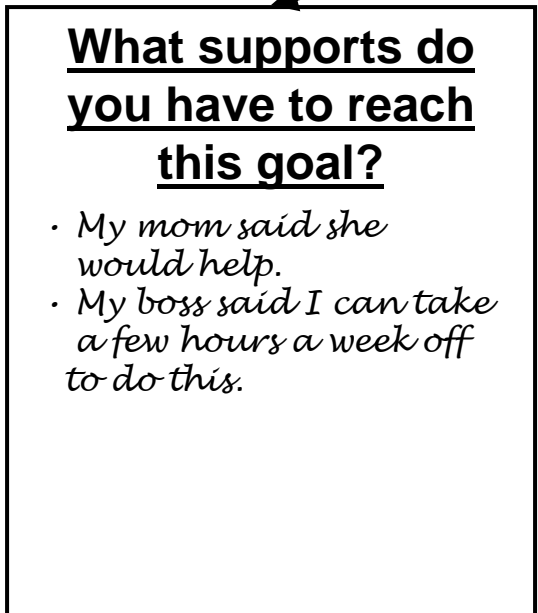




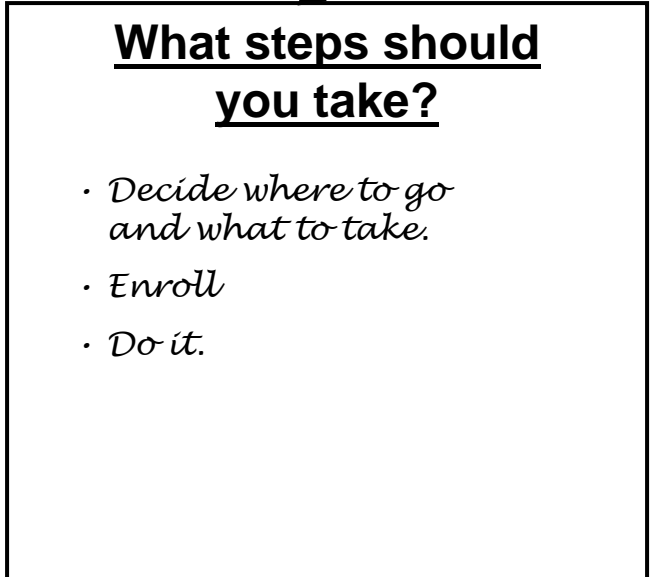
#1



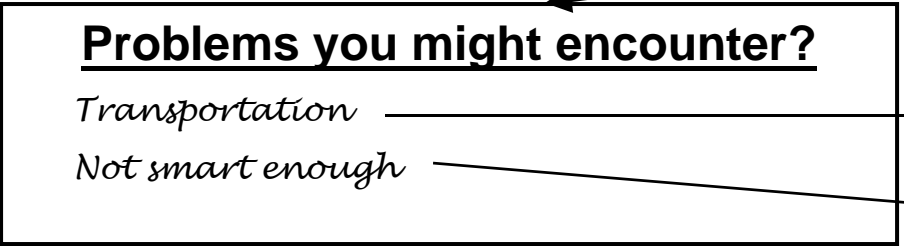
#2



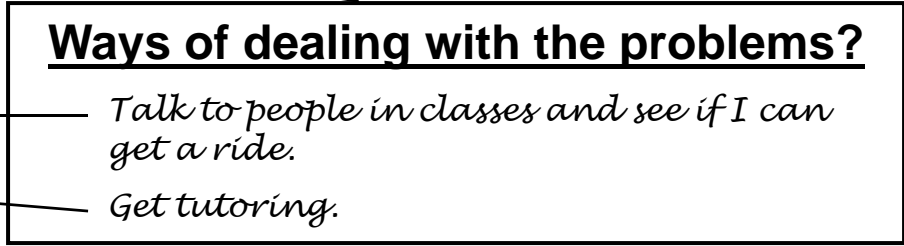
#3



#4a



#4b



Mapping Guide 7: General Planning (Map 2)

*Chris: A fictional case study (13):*  
**Action Plans**

What is your specific goal for the future?  
*Take 2 courses this fall.*

What actions will you take to get this goal?

What will you do?

When?

*Decide on courses by talking to a counselor.*

*July 1*

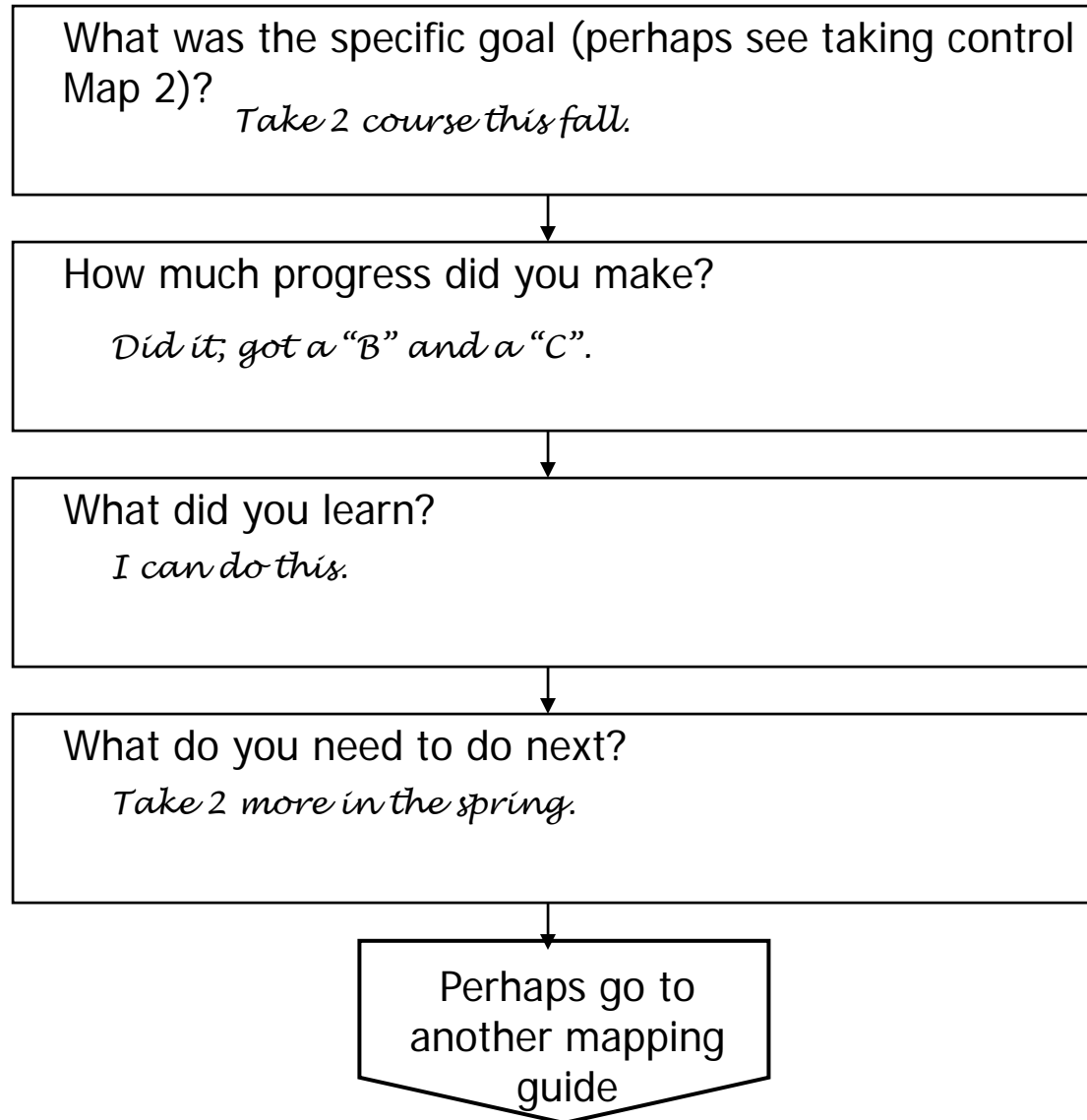
*Enroll.*

*August 31*

*Do it.*

*Sept. 1 - Dec. 15*

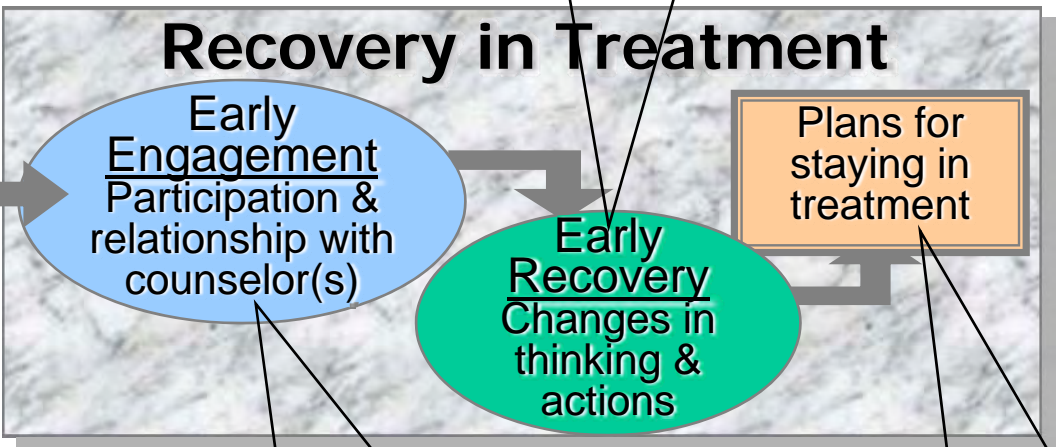
Perhaps Go to  
Map 3 (Progress)  
when appropriate



**Explain:** *I am very motivated to get my life straight..*  
**What will you do?**  
*I plan to keep trying even if I have setbacks.*

**Explain:** *I'm doing much better with my daughter, but I still argue with mom.*  
**What will you do?**  
*I will try to see my mom's side of things when we talk.*

**Explain:** *I slipped last week.*  
**What will you do?**  
*I'm going to stop hanging out with friends who do "coke."*



**Mark your Progress Gauges!**

Name:

*Chris*

Date:

*7/27/05*

**Explain:** *I missed a meeting, but I really like my counselor.*  
**What will you do?**  
*I will keep a calendar so I won't miss anymore sessions.*

**Explain:** *I'm thinking I can do this on my own but my counselor doesn't.*  
**What will you do?**  
*I really need to listen to my counselor since he has seen people like me before.*

**Question:**  
 How well do these ratings compare with CEST scores??



## Appendix

# What Research Reveals About the Impact of Mapping: A Quick Summary



◆ **Memory for the Session:** Maps make treatment discussions more memorable.

- ◆ K. Knight, Simpson, & Dansereau, 1994
- ◆ Czuchry & Dansereau, 1998

◆ **Focus:** Maps increase on-task performance in group sessions and are especially helpful for clients who have attentional problems.

- ◆ Dansereau, Joe, & Simpson, 1993
- ◆ D. Knight, Dansereau, Joe, & Simpson, 1994
- ◆ Joe, Dansereau, & Simpson, 1994
- ◆ Dansereau, Dees, Greener, & Simpson, 1995
- ◆ Czuchry, Dansereau, Dees, & Simpson, 1995
- ◆ Dansereau, Joe, & Simpson, 1995
- ◆ Newbern, Dansereau, Czuchry, & Simpson, 2005

◆ **Communication:** Maps give clients greater confidence in their ability to communicate. This is especially so for non-Anglo clients and clients with limited education.

- ◆ Pitre, Dansereau, & Joe, 1996
- ◆ Dansereau, Joe, Dees, & Simpson, 1996
- ◆ Newbern, Dansereau, & Pitre, 1999

◆ **Ideas:** Maps facilitate the production of insights and ideas. Maps:

**Stimulate greater session depth**

- ◆ Dansereau, Dees, Greener, & Simpson, 1995
- ◆ Newbern, Dansereau, & Dees, 1997

**Identify gaps in thinking**

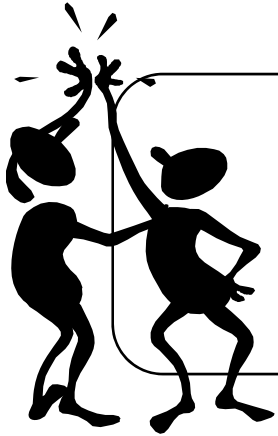
- ◆ Pitre, Dansereau, & Simpson, 1997

**Uncover psychological issues**

- ◆ Dansereau, Joe, & Simpson, 1993
- ◆ Czuchry & Dansereau, 1999

**Can provide greater breadth**

- ◆ Dansereau, Joe, & Simpson, 1993



**Quality of the Client  
& Counselor  
Relationship**

**◆ Rapport: Mapping facilitates the counselor-client therapeutic alliance.**

- ◆ Dansereau, Joe, & Simpson, 1993
- ◆ Dansereau, Joe, & Simpson, 1995
- ◆ Simpson, Joe, Rowan-Szal, & Greener, 1995
- ◆ Dansereau, Joe, Dees, & Simpson, 1996



**During  
Treatment  
Outcomes**  
(e.g., issue  
resolution &  
more effective  
life skills)

**◆ Positive Feelings Toward Self & Treatment: Maps facilitate self-confidence, self-efficacy & problem solving. They can foster positive feelings about personal progress in treatment and positive perceptions of treatment process.**

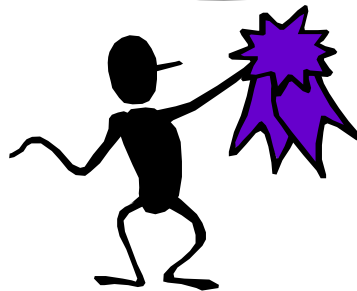
- ◆ Dansereau, Joe, & Simpson, 1993
- ◆ Joe, Dansereau, & Simpson, 1994
- ◆ D. Knight, Dansereau, Joe, & Simpson, 1994
- ◆ Joe, Dansereau, & Simpson, 1995
- ◆ Czuchry, Dansereau, Dees, & Simpson, 1995
- ◆ Dansereau, Joe, Dees, & Simpson, 1996
- ◆ Pitre, Dees, Dansereau, & Simpson, 1997
- ◆ Pitre, Dansereau, Newbern, & Simpson, 1997
- ◆ Newbern, Dansereau, & Pitre, 1999

**◆ Show Up “Clean”: Clients who map miss fewer sessions and have fewer positive urinalysis tests for opiates or cocaine.**

- ◆ Dansereau, Joe, & Simpson, 1993
- ◆ Joe, Dansereau, & Simpson, 1994
- ◆ Dansereau, Joe, & Simpson, 1995
- ◆ Czuchry, Dansereau, Dees, & Simpson, 1995
- ◆ Dansereau, Joe, Dees, & Simpson, 1996
- ◆ Dees, Dansereau, & Simpson, 1997

## **APPENDIX (What Research Reveals About the Impact of Mapping, continued)**

**After  
Treatment  
Outcomes**  
(e.g., sober/clean,  
no arrests)



◆ **“Clean” & Free: Clients who have mapped during treatment have fewer positive urinalysis tests for opiates, less needle use, and less criminal activity.**

- ◆ Pitre, Dansereau, & Joe, 1996
- ◆ Joe, Dansereau, Pitre, & Simpson, 1997

**Adolescent Treatment: effects similar to adult findings**

- ◆ Collier, Czuchry, Dansereau, & Pitre, 2001

### **“Mapping” as Intervention in Integrated Treatment Process Models**

- ◆ Czuchry & Dansereau, 2003
- ◆ Simpson, Joe, Rowan-Szal, & Greener, 1997
- ◆ Simpson, 2004
- ◆ Simpson & Joe, 2004

### **Conceptual Overviews of Mapping Research**

- ◆ Dansereau, Dees, & Simpson, 1994
- ◆ Dansereau, Dees, Bartholomew, & Simpson, 2002
- ◆ Dansereau & Dees, 2002
- ◆ Dansereau (in press – 2005)

**Manuals for Counselors (at [www.ibr.tcu.edu](http://www.ibr.tcu.edu))**

- ◆ Dansereau, Dees, Chatham, Boatler, & Simpson, 1993
- ◆ Dees & Dansereau, 2000
- ◆ Sia, Dansereau, & Dees, 2001
- ◆ Czuchry, Sia & Dansereau, 2002

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