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For more information, contact:

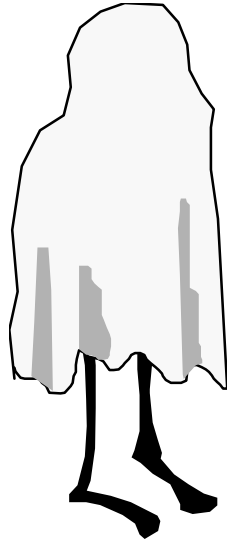
Institute of Behavioral Research
Texas Christian University
P.O. Box 298740
Fort Worth, TX 76129
(817) 257-7226
FAX 257-7290
E-Mail IBR@TCU.EDU
Web site: www.ibr.tcu.edu

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Chapter Four

I have to PLAN for my treatment??

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Time: During first month of treatment

Materials: The "Personal Action List"(15), the "Planning Rocket" (90), the "Treatment Plan" Maps A (15) & B (90) & overhead copies of the maps

Dr. C:

“ As a group we've talked about what you need to do to get the most out of treatment. Now let's make it personal. For "homework," I'm asking you to fill out your own "Personal Action List." Decide what steps you want to take to make treatment more beneficial for you personally and write these down.

Make sure each step, or action, has a concrete aspect, so that you, and somebody else, can tell when it's been done. If your action is "Turn my life over to my Higher Power," you might add "and write in a journal each day 2 concrete and specific behaviors that show I am doing that."

If you can't think of any concrete aspects, then choose another action! You want treatment to work... you want to make changes in your life, to make things happen. But change rarely happens in a flash. It happens as the result of a series of things that you do... steps to the big goal.. to the major change. You need to know that those steps are really happening. ”

A Quick Sketch of the Treatment Planning Maps!

Personal Action List for Treatment

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____


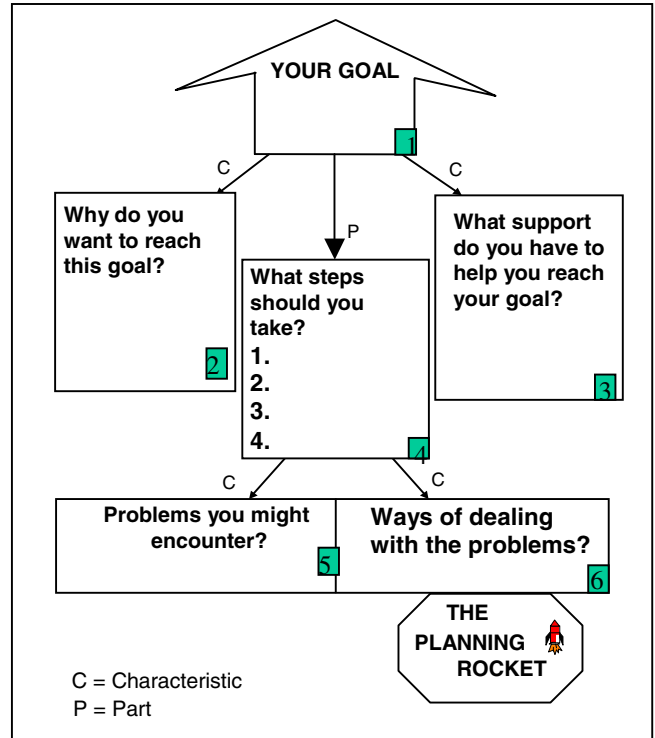
Check it out!

Are these actions that you can really do?

Are the actions stated in positive terms?

Are these actions clear and specific enough so that it is easy to tell when they have happened?

Are these actions important for you to do during treatment?

Treatment Plan Map "A"

Which areas should be treatment targets? Check the 6 most critical areas and then fill in the boxes.

- ___ (a) Employment & Support
- ___ (b) Family Relations
- ___ (c) Peer Relations & Criminality
- ___ (e) Medical & Health
- ___ (f) Psychological & Emotional
- ___ (g) Alcohol Use
- ___ (h) All other drug use
- ___ (i) Gambling
- ___ (j) AIDS-Risky Needle Use
- ___ (k) AIDS-Risky Sex
- ___ (l) Housing & Living Situation
- ___ (m) Academic & Vocational Skills
- ___ (n) Sexual Behavior
- ___ (o) Financial Management

STATE THE PROBLEM!	WHAT'S THE LONG-TERM GOAL?
#1	#1
#2	#2
#3	#3
#4	#4
#5	#5
#6	#6

SEE TREATMENT PLAN "B" MAPS (1-6) FOR MAJOR STEPS TO THE LONG-TERM GOAL.

Treatment Plan Map "B" # _____ Name _____ 2-B

Problem Area _____ Date _____

WHAT'S THE LONG-TERM GOAL?

Here are the actions I will take to get to this goal:

WHAT?		BEGINNING WHEN?
#1		#1
#2		#2
#3		#3
#4		#4



Here is what one client listed for actions that could make treatment more beneficial. On the next page is one of the 6 “planning rockets” done to elaborate on these actions. This 2-part exercise not only defines what the client must do during treatment but also provides a model for future planning.

Personal Action List for Treatment

1. *I will speak up at least 2 times in each of my groups.*
2. *I will write my thoughts in a journal each day.*
3. *I will attend all my meetings.*
4. *I will listen to criticism with an open mind.*
5. *I will “map” my anger problem.*
6. *I will ask the counselor for help when I am confused.*

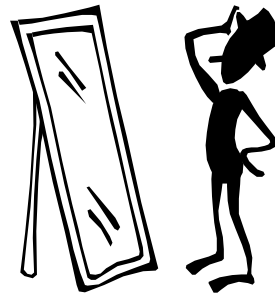
Check it out!

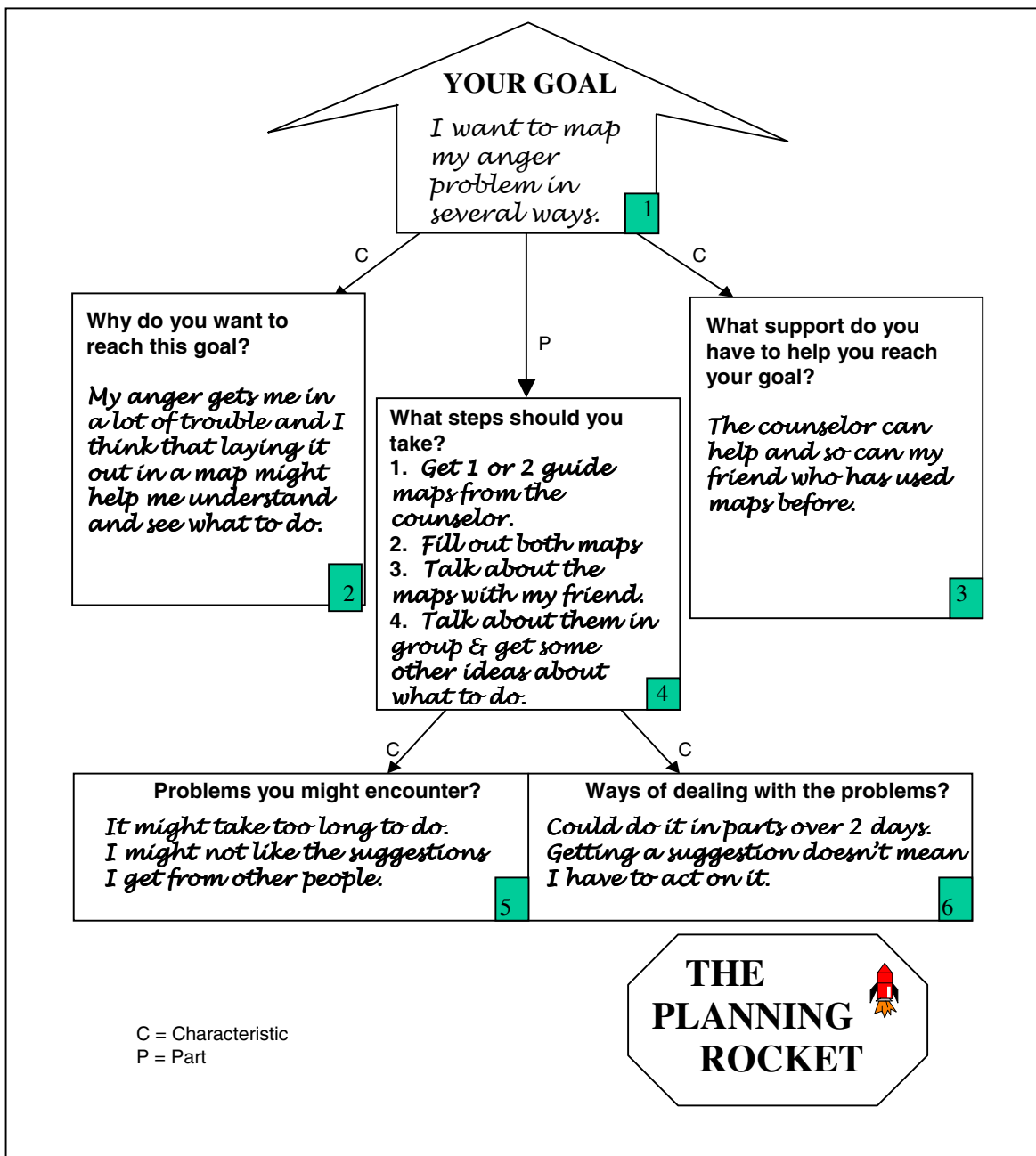
Are these actions that you can really do?

Are the actions stated in positive terms?

Are these actions clear and specific enough so that it is easy to tell when they have happened?

Are these actions important for you to do during treatment?





This sets the stage for taking responsibility for one's own treatment. Using these two exercises, the Critical Action List and Planning Rockets, the counselor and group member can move on to design a treatment plan. Read on.

On the next 2 pages are the Treatment Plan Maps. “Map A” provides a checklist for the major problem areas. Counselor and group member together agree on the problem areas. The group member then uses the map to describe both the specific problems and the long-term goals.

“Map B” is completed for each long-term goal listed on Map A. These are the steps to the goal. The Personal Action List and Planning Rocket should be a good lead-in to this. The idea is to develop concrete and specific statements about what will be done.



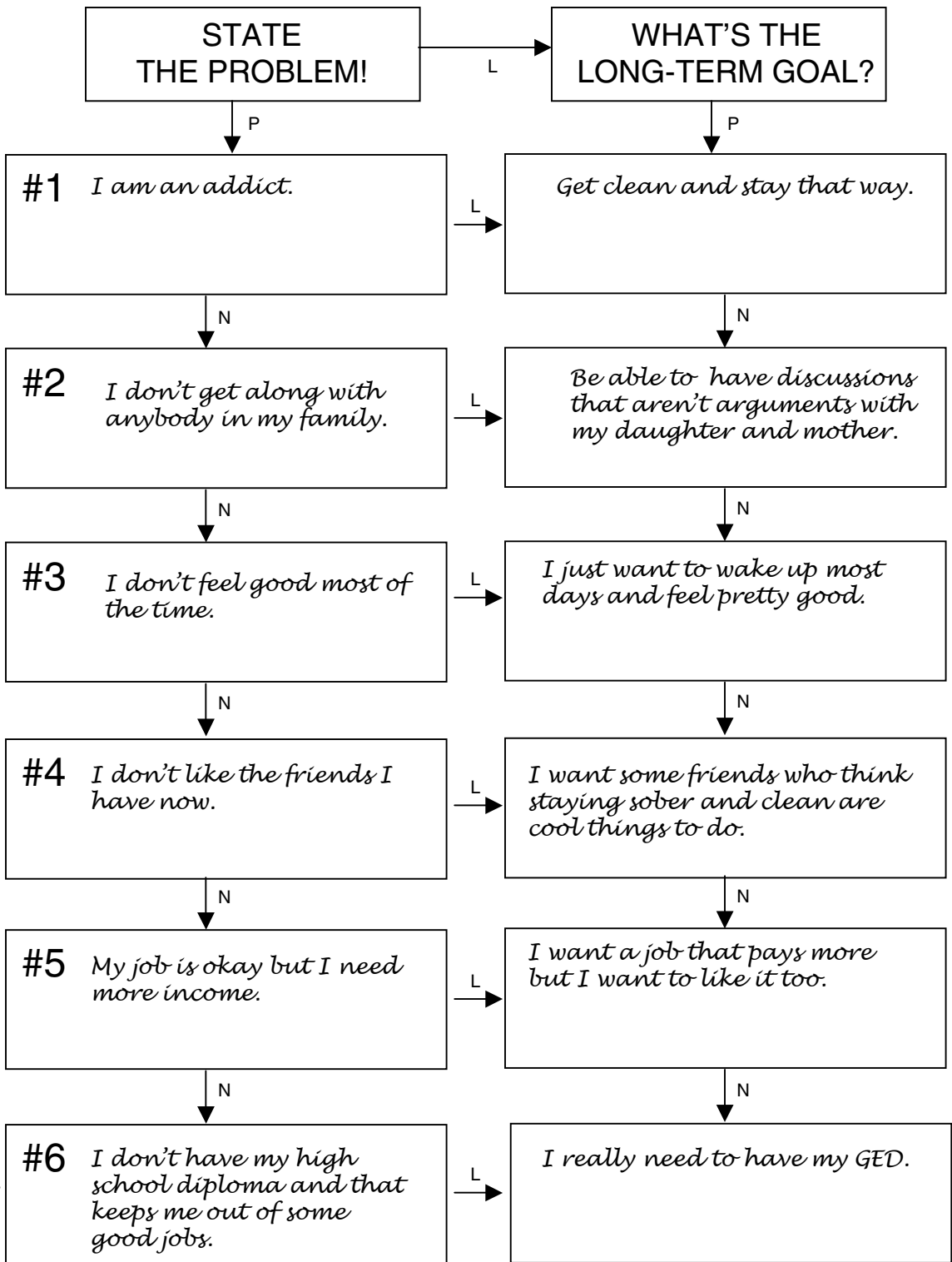
P = Part
 N = Next
 L = Leads to

Treatment Plan Map "A"

Name John H. Date 7-19-99

Which areas should be treatment targets?
 Check the 6 most critical areas and then fill in the boxes.

- (a) Employment & Support
- (b) Family Relations
- (c) Peer Relations
- (d) Legal & Criminality
- (e) Medical & Health
- (f) Psychological & Emotional
- (g) Alcohol Use
- (h) All other drug use
- (i) Gambling
- (j) AIDS-Risky Needle Use
- (k) AIDS-Risky Sex
- (l) Housing & Living Situation
- (m) Academic & Vocational Skills
- (n) Sexual Behavior
- (o) Financial Management



SEE TREATMENT PLAN "B" MAPS (1-6) FOR MAJOR STEPS TO THE LONG-TERM GOAL.

Treatment Plan Map "B" # 2-B

Name John H.

Problem Area B- Family Relations

Date 7-19-99

WHAT'S THE LONG-TERM GOAL?
I want to be able to have discussions that aren't arguments with my mother and daughter.

L

Here are the actions I will take to get to this goal:

WHAT?

P

BEGINNING WHEN?

C

#1 *I will talk about this problem with my counselor for ideas about how to work on it.*

C

After group meeting tomorrow

#2 *I will bring the problem to my process group meeting and see what ideas other people have.*

C

In 2 weeks

#3 *I will write down my ideas about what to do so that we don't argue so much.*

C

As I have them. At least 2 ideas for each week I'm here.

#4 *I'm going to write a letter to let my mother and daughter know that I'm working on this problem and that I really want things to change.*

C

Write the letter tomorrow night.

