

Mindful Continuing Education

Group Therapy for Substance Abuse Treatment

Executive Summary

1. One reason groups work so well in substance abuse treatment is that they engage therapeutic forces, such as affiliation, support, and peer confrontation, and these characteristics enable clients to bond with a culture of recovery.

- A. True
 - B. False
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Groups Commonly Used in Substance Abuse Treatment

2. Groups which delve into major developmental issues that contribute to addiction or interfere with recovery are known as:

- A. Person-centered skills groups
 - B. Experiential growth groups
 - C. Humanistic practice groups
 - D. Interpersonal process groups
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3. During the early phase of substance abuse treatment, the biggest challenge generally is helping clients overcome the feelings of comfort they have received from substances which may increase their potential for relapse.

- A. True
 - B. False
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Groups and Substance Abuse Treatment - Introduction

4. According to the authors, in the hands of a well-trained, skilled group leader, the curative forces inherent in a group can be harnessed and directed to foster each of the following EXCEPT:

- A. Healthy achievements
 - B. Positive reinforcement and a forum for self-expression
 - C. Practice in learning to trust others and to respect confidentiality
 - D. The ability to teach new social skills
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Figure 1.1: Differences Between 12-Step Self Help Groups and Interpersonal Process Groups

5. Organizational processes common to self-help groups include mutual identification, education, catharsis, and use of group pressure to encourage abstinence and retention of group membership.

- A. True
 - B. False
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6. Groups can provide useful information to clients who are new to recovery, such as:

- A. How to avoid certain triggers for use
 - B. The importance of abstinence as a priority
 - C. How to identify as a person recovering from substances
 - D. All of the above
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Modifying Group Therapy to Treat Substance Abuse

7. In order to improve group therapy and to make it applicable and effective for clients who abuse substances, therapists must receive specific training and education so that they understand therapeutic group work and the special characteristics of clients with substance use disorders.

- A. True
 - B. False
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8. Any group leader who intends to help people who have addictions benefit from treatment should have a clear understanding of each group member's defensive process and:

- A. Character dynamics
 - B. Recovery successes and failures
 - C. Problem solving skills and limitations
 - D. Overall psychological functioning
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9. One reason that substance abuse treatment professionals may be hesitant to use group practices is because the individual techniques and strategies that usually work with the general psychiatric population often work well with people abusing substances, while group therapy methods are more risky.

- A. True
 - B. False
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Types of Groups Used in Substance Abuse Treatment-Introduction

10. Theoretical orientations have a strong impact on the tasks a substance abuse group is trying to accomplish, what the group leader observes and responds to, and the types of interventions that the group leader will initiate.

- A. True
 - B. False
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11. Specialized types of groups that function as unique entities in the substance abuse treatment field include expressive groups, communal and culturally specific treatment groups, and relapse prevention treatment groups.

- A. True
 - B. False
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12. During the "contemplation" stage of behavioral change, substance abusing clients intend to stop since they have recognized the advantages of quitting and the undesirable consequences of continued use, and planning for change begins.

- A. True
 - B. False
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Psychoeducational Groups

13. In addition to informing clients about psychological issues, a primary function of psychoeducational groups is to promote intrapsychic change by promoting personal adjustments in behavior and emotions.

- A. True
 - B. False
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Characteristics of Five Group Models Used in Substance Abuse Treatment

14. Psychoeducational groups are highly structured, often follow a manual or pre-planned curriculum, and:

- A. Are preferably heterogeneous
 - B. Include an instructor who typically takes an active role when leading the discussion
 - C. Are generally open-ended
 - D. Often change the format of how the group is organized
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15. Above all, the major purpose of psychoeducational groups is the expansion of awareness about the behavioral, medical, and psychological consequences of substance abuse.

- A. True
 - B. False
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Skills Development Groups

16. Each of the following is an accurate statement about skills development groups EXCEPT:

- A. Most skills development groups operate from a cognitive-behavioral orientation, although counselors and therapists from a variety of orientations apply skills development skills in their practices
 - B. Skills development groups usually run for a limited amount of sessions, and the size of the group needs to be limited
 - C. While skills development groups often incorporate elements of psychoeducation and support, the primary goal is on building or strengthening behavioral or cognitive resources to cope better in the environment
 - D. Stress-management and problem-solving skills training groups are the most common type of skills development groups
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Cognitive-Behavioral Therapy

17. Cognitive-behavioral groups conceptualize dependency as a learned behavior that is subject to change through various interventions which include identifying conditioned stimuli associated with addictive behaviors and avoiding that stimuli, developing enhanced contingency management strategies, and incorporating response desensitization.

- A. True
 - B. False
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18. A primary purpose of support groups is to bolster members' efforts to develop and strengthen the ability to manage their thinking and emotions and to develop better interpersonal skills as they recover from substance abuse.

- A. True
 - B. False
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19. Compared to other groups, specific group techniques are much less important for the leader of a support group since he or she is generally less active in direction and initiative.

- A. True

B. False

Interpersonally Focused Groups

20. The psychodynamic group therapy approach recognizes that a person's behavior, whether healthy or unhealthy, is determined by:

- A. Conflicting forces in the mind
 - B. Reactions to upsetting, angering, or distressing events
 - C. Reactions to upsetting, angering, or distressing events
 - D. Our ability to self-forgive and forgive others
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Individually Focused Groups

21. While the individually focused group concentrates on individual members of the group and their distinctive internal cognitive and emotional processes, in interpersonally focused groups, emphasis is placed primarily on current interactions between and among group members.

- A. True
 - B. False
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Specialized Groups in Substance Abuse Treatment-Relapse Prevention

22. Relapse prevention groups focus on helping a client maintain abstinence or recover from relapse, and their main purposes include each of the following EXCEPT:

- A. Assistance in maintaining sobriety
 - B. Helping those who, prior to recent struggles, had established a proven track record indicating they have all the skills to maintain a drug free life
 - C. Providing the client with the skills and knowledge to anticipate, identify, and manage high-risk situations that lead into substance use
 - D. Helping to make security preparations for clients'™ futures by striving for a broader life balance
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Communal and Culturally Specific Groups

23. Risk factors such as cultural displacement or discrimination may cause substance abuse rates to rise for a given population, so communal and culturally specific wellness activities and groups may be very beneficial for certain populations.

- A. True
 - B. False
-

Expressive Groups

24. Expressive can improve socialization and the development of creative interests and may help clients explore:

- A. Their substance abuse and its origin
 - B. The impact it has on their lives
 - C. New options for coping
 - D. All of the above
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Criteria for the Placement of Clients in Groups-Matching Clients With Groups

25. Prior to placing a client in a particular group the provider should consider the nature of the group or groups available, the program's resources, and the characteristics, needs, preferences and:

- A. Stage of recovery
 - B. Support network
 - C. Past treatment experiences
 - D. None of the above
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Assessing Client Readiness for Group

26. When working with substance abusing clients, careful attention must be paid to the relationships clients can manage at their current stage of recovery because this capacity has everything to do with how able the client is to participate in a group.

- A. True
 - B. False
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27. People in the throes of a life crisis are excellent candidates for group therapy because they can benefit from group cohesiveness and from being with others who have had similar experiences.

- A. True
 - B. False
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Primary Placement Considerations

28. Recent studies have shown that women typically do better overall and improve retention in mixed gender group therapy groups compared to women only groups.

- A. True
 - B. False
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29. A poor match between group and client is not always apparent in the beginning, so monitoring should be used to ensure that clients are in groups in which they can learn and grow, without interfering with the learning and growth of others.

- A. True
 - B. False
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Figure 3.2-Client Placement by Stage of Recovery

30. For clients who are in the late and maintenance stages of recovery, the most necessary and important group interactions are those that focus on:

- A. Psychoeducation and culture specific skills
 - B. Skill building and overall support
 - C. Expressive skills and relapse prevention
 - D. Cognitive-behavioral and interpersonal processing skills
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Placing Clients From Racial or Ethnic Minorities-Diversity in a Broad Sense

31. Primary characteristics include permanent attributes such as age, race, sexual orientation, and gender, and these tend to be much more important to an individual's core than secondary characteristics such as religion, socioeconomic class, education level, and marital/parental status.

- A. True
 - B. False
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32. In real world situations, members of groups tend to act in similar ways when with people from their own group as they do in a heterogeneous group.

- A. True
 - B. False
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Diversity and Placement

33. Clinicians must remember that each culture incorporates beliefs and values that guide the behavior of everyone identified with the culture and that govern experiences related to substance use.

- A. True
 - B. False
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Ethnic and Cultural Matching

34. If less acculturated people with limited language skills are treated in groups, clinicians should focus on problem-oriented, short-term treatment and consider implementing a therapeutic style that is:

- A. Client-centered
 - B. Proactive
 - C. Non-confrontational
 - D. Holistic
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Other Considerations for Practice

35. For those who participate in therapeutic group processes, individual and group experiences will be impacted by differences in their expectations of leaders, understanding of gender roles, families, and community, values, and experience in:

- A. Trusting and tolerating others
 - B. Communication and problem-solving
 - C. Decision-making and conflict resolution
 - D. Treatment readiness and acceptance
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