Chapter One Study Guide - Help for Alcoholics

This Key Study Guide is to be used as study guide for Course 414: “Help for Alcoholics.” Use this guide to take chapter and submit to your instructor as directed. Use this Key Study Guide as a study tool for your midterm and final exams.

Chapter 1: Recognizing Alcohol Problems (pages 1 – 32)

1. It is estimated that approximately 50% of clients who present for treatment of a mental health disorder (i.e. depression, anxiety, or bi-polar disorder) also have a co-occurring substance abuse disorder (i.e. alcoholism, drug addiction) and approximately 50% of clients who present for treatment of a substance abuse disorder have a co-occurring mental health disorder. Think about that statistic. Are you surprised? Why or why not?

2. If you currently are a counselor or are in a helping profession, think about your clients or patients. Do you suspect any have a problem with substance use or dependence? Do you think you would recognize if your client had problems with substance use/abuse?

3. What do little red spider lines called spider angiomas signify if you see them on your clients’ cheeks?

4. ____________ of alcoholics die of their addiction.

5. The average alcoholic dies _______________ years earlier than he or she would otherwise.

6. It is said that alcoholic patients have two sides. What are they?

7. What does the Big Book of Alcoholics Anonymous say about the disease of alcoholism?

8. If the disease of alcoholism is “cunning, baffling, and powerful,” how can you best prepare to treat people with alcoholism?

9. What are the three pertinent ideas that are read aloud from Chapter Five of the Big Book at every AA meeting?

The Motivational Interview

10. It does no good to argue with the patient who is alcoholic. Why is that?

11. When working with the alcoholic client, what is your job?

12. What gift have you been given as a healer? What evidence have you noticed that has confirmed that gift in you?

13. If patients are going with you, you feel ________________. When they are going against you, you feel ____________________.
14. What do all drugs of abuse tell the brain?

15. Why can't the patient tell you the truth regarding his or her addictions?

**Developing the Therapeutic Alliance**

16. From the first contact, your patients are learning some important things about you. Name those important things listed in your text.

17. Look at the above list you just made. Do you see yourself in that list? How do you feel about being the type of counselor that list describes?

18. How can you ensure the client will not feel alone during treatment?

19. Perkinson states that your patient must develop a trust in you and know that you are committed to their recovery. Why do you believe that is important?

**Conducting a Motivational Interview**

20. In the first interview, you begin to ____________ patients to see the ____________ about their problem.

21. During the interview, how should questions be asked?

22. Perkinson states that a motivational interview should be "patient-centered" and not "professional-centered." What is the difference between these two?

23. Read the example of a Motivational Interview on pages 5 through 8. What is your reaction to the interview?

24. Would you be comfortable at this point conducting a motivational interview? Why or why not? If you do not feel comfortable, what steps can you take to get yourself to the place where you would be able to conduct the motivational interview with ease?

**Questions for the Adult Patient**

25. What low risk drinking guidelines has the National Institute on Alcohol Abuse and Alcoholism developed?

26. Since most patients who have alcohol problems are evasive or deny their alcohol abuse, to whom should you ask questions?

27. What questions does the American Society of Addiction Medicine suggest should be asked?

28. How many questions must be answered “yes” to the above questions to raise a red flag for alcoholism?
29. How many questions must be answered “yes” to indicate probable alcoholism?
30. What must you advise the patient if there are one or more red flags?

**Natural History of Alcoholism**

31. True or false. Alcoholism develops quickly over the patient's lifetime.
32. True or false. Alcoholism starts when the patient is a teenager.
33. There are 11 risk factors for alcoholism listed in your text. Name those risk factors:

**Diagnosing an Alcohol Problem**

*Please note that only trained and licensed professional counselors are able to diagnose an individual with a mental health or substance use disorder.*

34. What questions must you ask to determine if the patient fits into your range of experience and care?
35. What questions do you need to ask yourself?
36. For the benefit of third-party payers, it is important to use assessment instruments to properly document the following:
37. What are two quick screening tests for alcoholism that have been developed?
38. Briefly describe the above-mentioned quick screening tests. How do they differ and how are they alike?
39. The Substance Abuse Subtle Screening Inventory is difficult to fake and can be completed in 10 to 15 minutes. It accurately identifies ____________ of patients who need residential treatment, ____________ of nonusers, and 87% of early-stage abusers.
40. If assessment so indicates, intervention may be necessary. Briefly describe the interventions listed in your text for the following severity of usage:
   - Nonproblem usage.
   - Problem drinking/drug usage.
   - Alcohol or other drug dependence.

**Assessing Motivation**

41. Briefly describe the stages of motivation listed below and in your text on page 15.
   - Precontemplation.
   - Contemplation.
   - Preparation.
42. Why would it be necessary to know how motivated your client is?

Motivating Strategies

43. True or false. Patients at different stages of motivation need different motivating strategies to keep them moving toward recovery.

44. Patient awareness about the causes, consequences, and possible treatments for particular problems are crucial in recovery. What interventions can help a patient increase their awareness?

45. What are the six principles of Change for the Patient in Precontemplation Stage listed in table 1.7 on page 17?
   1. 
   2. 
   3. 
   4. 
   5. 
   6.

American Society of Addiction Medicine (ASAM)
Patient Placement Criteria

46. ASAM lists Six Dimensions of Assessment for addictive patients. What are the six dimensions listed and the questions you need to ask in Table 1.9 on page 19?
   1. 
   2. 
   3. 
   4. 
   5. 
   6.

Diagnostic and Statistical Manual of Mental Disorder, Fourth Edition, Text Revision (DSM-IV-TR)

Diagnosing mental health and substance abuse disorders is both a science and an art. There are 297 different diagnosable disorders in the DSM so many disorders have signs and symptoms in common with each other. A DSM diagnosis is made based upon the information that you gathered during the biopsychosocial interview and upon your knowledge of mental health and substance abuse disorders. As you become more experienced and more skilled, assigning a diagnostic code will become easier.
Please note that only trained and licensed professional counselors are able to diagnose an individual with a mental health or substance use disorder.

47. How does the DSM describe the diagnosis of Substance Abuse?

48. How does the DSM describe the diagnosis of Substance Dependence?

49. Name three ways in which the diagnoses of Substance Abuse and Substance Dependence differ.

50. What should you explain to your patients about their diagnosis?

Determining the Level of Care Needed

51. What are the four levels of care generally offered across the United States? Briefly describe each level.

- Level I: Outpatient Treatment.
- Level II: Intensive Outpatient/Partial Hospitalization
  - Level II .1:
  - Level II .5:
- Level III: Residential/Inpatient Services
  - Level III .1
  - Level III .3
  - Level III .5
  - Level III .7
- Level IV: Medically Managed Intensive Inpatient Treatment

Criteria for Early Intervention (Adults)

52. What is Early Intervention?

Criteria for Outpatient Treatment (Adults)

53. When does an adult patient qualify for outpatient treatment?

Criteria for Inpatient Treatment (Adults)

54. When does an adult patient qualify for inpatient treatment?

Sharing The Diagnosis

55. With whom should you share your diagnosis and findings?
Conducting a Crisis Intervention

56. What is a crisis intervention? Who may be in need of a crisis intervention?

57. Look at the example of an Intervention Letter Listed in Figure 1.1 on Page 30. What is your reaction to reading that letter?

58. Where should the intervention be held?

59. What three behaviors should participants show to the patient?

60. True or false. Interventions and treatment are going to take time.

61. True or false. All addiction treatment is a short journey toward the truth, and this journey is quick and relatively painless.

62. True or false. Alcoholism is an acute physiological disease.

63. What percentage of patients who work the program stay clean and sober?

64. How many years does a person have to maintain sobriety for their relapse rate to drop around zero?