

Group Eleven

EMOTIONAL AND SPIRITUAL HEALING

Skills to Be Taught

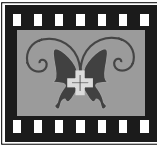
- Understanding the Stages of Grief
- Understanding and Managing Anger and Depression
- Facing and Coping with Fear
- Finding Personal Meaning



COUNSELOR TOOL BOX

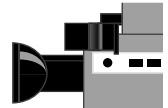
Multi-modal Presentation of Material:

Verbal Didactic presentation of material
Questioning
Group discussion

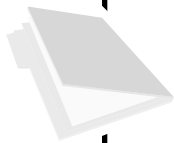


Visual Visual presentation of major points using slides
Group responses written on flipchart by counselor
Written/Pictorial handouts provided in Client Workbook

Experiential “Letting go of fear” individual exercise
Team Game: “Remember me by what I valued”
Post-group quiz
Stress management/relaxation technique



Materials Flipcharts and markers
Overhead projector and slides
Audio tape player and relaxation tape
Clock/timer
Pens/pencils
Prizes
“Loaner” Client Workbooks
Handouts:
Group agenda
Group quiz
“Letting Go of Fear” Worksheet
Amusing Epitaphs
Team Game Worksheet: “Remember Me by What I Valued”
Certificate of Achievement (as warranted)



Reminders Ensure that all material on quiz is covered well during group.
Quiz material is indicated by **QUIZ ITEM** in the text.
Instructions to counselors are provided in **this typeface.**



AGENDA

(2-hour group: Adjust times based on beginning time)

- 0:00 **Begin Group** (5 mins)
 Introductions – Rules – Time keeper assignment
- 0:05 **Introduction to Topic:** Emotional and Spiritual Healing (5 mins)
- 0:10 **Stages of Grief** (10 mins)
- 0:20 **Grief and Recovery from Addiction** (5 mins)
- 0:25 **Identifying Fears** (10 mins)
- 0:35 **Facing Fear and Reclaiming Control** (10 mins)
- 0:45 **Exercise:** “Letting go of fear” (15 mins)
- 0:00** **BREAK** (10 mins)
- 1:10 **Review** (5 mins)
- 1:15 **Spiritual Growth** (5 mins)
- 1:20 **Humor and Healing** (5 mins)
- 1:25 **Game:** Epitaphs (20 mins)
- 1:45 **Quiz and Feedback** (5 mins)
- 1:50 **Relaxation Tape** (10 mins)
- 2:00 **End**

BEGINNING OF EVERY GROUP (5 mins)

- Group members and counselors introduce themselves and welcome new members
- Group rules are reviewed

Visual

HHRP
GROUP RULES RESPECT

R*elaxation* (complete quiet...no talking, shuffling of papers, or walking around during relaxation exercise)

E*ating* (No eating during group)

S*ober* (don't come to group high)

P*unctuality* (come to group on time)

E*veryone can't talk at once* (no crosstalk)

C*onfidentiality* (what's said in group, stays in group)

T*eamwork* (group members work together towards recovery)

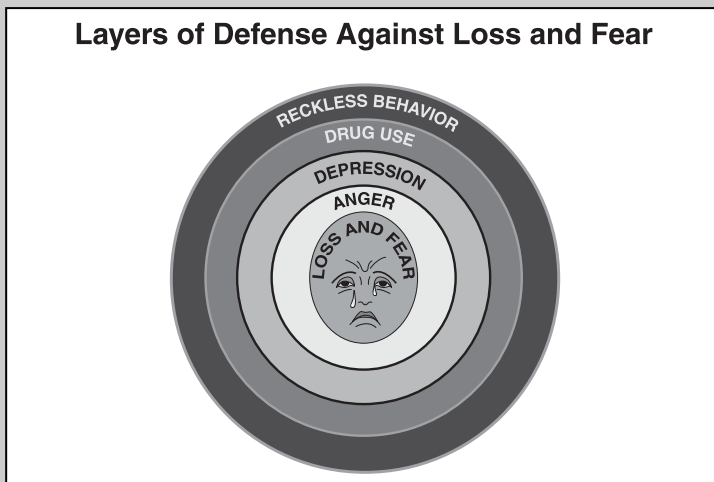
Show Slide 11.1

- Copy of agenda for today's group is distributed to group members
- Ask for a volunteer to serve as time-keeper (to keep group on track and on time)
- Announcement of any graduates from the group today
- Presentation of Certificate of Achievement to those who complete in good standing

Verbal

Counselor provides introduction to today's topic. (5 mins)

Today we are going to be talking about the importance of emotional and spiritual health in recovery. We will begin with emotional health. Working on your emotional health is important for several reasons. Negative emotions, such as anger and depression, are often triggers for drug use and other behaviors that risk your health. Negative emotions serve as barriers to making healthy choices. They interfere with memory, concentration, and problem solving. Today we will try to get beneath the anger and depression and think about these emotions in the context of unresolved grief.



Show Slide 11.2

As shown in the slide, anger and depression are often experienced in response to fear or loss. When fear or loss feel overwhelming, we tend to create a protective layer of emotions around us, such as anger and depression, that we feel we can cope with more easily. Then, if these emotions get too difficult to cope with, we create yet another layer of protection. This may include using drugs or engaging in reckless behavior, such as needle sharing and unsafe sex. The purpose of each layer is to protect us from experiencing the previous layer. In the process, we often completely lose sight of the original experience of loss or overwhelming fear. However, it is still there, festering, beneath all the protective layers we've created. It's like having a wound that is infected. Unless you treat the infection, the wound will never truly heal no matter how many bandages you put on it. Individuals in recovery need to be willing to take on the difficult task of identifying and treating their emotional wounds. This is likely to be difficult at first, but if you don't do it, you will find it extremely difficult to remain abstinent and lead a healthy life.

Let's begin by talking about grief.

When we think about grief we usually think about grieving over the death of a loved one, but grief is actually a normal human response to loss of any kind. **QUIZ ITEM**

Visual

WHAT IS GRIEF?

**A normal
human response
to loss of any kind**

Show Slide 11.3

Grieving is an unavoidable part of living for all of us. No one is immune. We grieve when we lose people and pets who are important to us, we also grieve when we lose things that are important to us (even giving up drugs is a loss that many long-time drug users grieve), and we grieve if we are diagnosed with a potentially debilitating illness that can threaten our lives, impair our functioning, or end a cherished lifestyle.

Verbal/
Didactic

Counselor provides instruction on stages of grief. (10 mins)

According to Elizabeth Kubler–Ross, who wrote several books on grief—grief is a process—that means that people go through various stages when they are faced with a loss. You may not go through all the stages she describes, and you may not go through them exactly in the order she specifies; however, having an understanding of the different stages of grief and being able to identify where you are in the process can be extremely helpful in moving you forward.

Visual

STAGES OF GRIEF

1. **Denial**
"No, this cannot be true"
(may isolate oneself from reality of situation)
2. **Anger**
"This isn't fair. Why me?"
(may take anger out on people or objects to distance oneself from pain)
3. **Bargaining**
"There must be something I can do to change this."
(May promise to be a better person if God fixes everything)
4. **Depression**
"I can't handle this pain and I'm helpless to do anything about it"
(may shut down physically and emotionally; may turn to drug abuse or other unhealthy behavior)
5. **Acceptance**
"I have experienced a painful loss but I can get through it."
(may identify and face fears; identify what is under one's control and act accordingly)
6. **Hope**
"I am ready to learn from this important life experience."
(may seek personal meaning from the loss through spiritual growth)

Show Slide 11.4

This slide shows the six stages of grieving described by Elizabeth Kubler-Ross. They are denial; anger; bargaining; depression; acceptance; and hope.

QUIZ ITEM We'll go over them one at a time, and then discuss how they may relate to your recovery.

STAGE 1. **Denial**

This is the stage when the person thinks, **“No, this just cannot be true.”** We've probably all said this when faced with terrible news. Denying something is true is a common way of initially dealing with a painful situation. At first, one may feel totally unable to accept the bad news. In this stage of denial we might isolate ourselves in an attempt to defend against the reality of the situation.

Although denial is a normal stage of grief, if we remain in this stage too long we will be unable to make necessary and important decisions.

STAGE 2. **Anger**

The next stage is anger. This is the stage in which the person acknowledges the reality of the situation, but is filled with rage at the loss and thinks, **“This isn't fair; why did this have to happen to me?”** When a loved one dies, we may be angry at whatever took our loved one's life, angry at God, even angry at the loved one for leaving us. Although feeling angry is normal, we may displace our anger. This means taking anger out on other people or things. It may feel as if everything and everyone is irritating us and so we lash out and are completely unaware that this is a manifestation of our grief. Although displaced anger may serve to distance us from the pain and reality of the loss, it can create problems in personal relationships, especially if the people around us do not understand that we are grieving. It can even lead to legal problems if we physically act out our anger on people or property.

STAGE 3. **Bargaining**

The next stage is bargaining. This is a stage that people sometimes go through when they are facing the loss of their own life or the life of a loved one. They think **“There must be something I can do to change this.”** We may try to make bargains with God by promising to do something difficult (often something that we are unlikely to be able to do), in exchange for removing the threat of loss. For example, we might pray, “God, if you take this pain away, I promise to never even think about using drugs again.” When feeling powerless, bargaining may provide us with the illusion that we are actually doing something to help, but as with the previous stage, if we remain in this stage too long, it can prevent us from coping realistically with the situation and taking appropriate action.

STAGE 4. **Depression**

The next stage is depression. In this stage, the reality of the loss has really “sunk in.” Denial, anger, and bargaining give way to despair, and we think **“I cannot handle this pain and I’m helpless to do anything about it.”** We may attempt to withdraw from the world and to “shut down our circuits” in an attempt to defend ourselves against the pain of the loss. Although profound sadness in response to loss is normal, it is important not to get stuck in this stage. As you all know, depression can quickly lead to drug use and other unhealthy behavior.

STAGE 5. **Acceptance**

The next stage is acceptance. This is the stage where we move beyond defending ourselves from the pain of the loss with denial, anger, and depression, and begin to accept reality. We may think **“I have experienced a painful loss, but I can get through it.”** When we are in the earlier stages of grieving, it seems that acceptance is an unattainable goal. However, it is important to keep in mind that acceptance is neither unattainable nor is it the ultimate goal. Acceptance is not the end of the process, but rather a necessary step that will move you beyond grief to the next stage which is hope.

STAGE 6. **Hope**

We have reached the final stage—hope—when we reflect upon the loss in search of personal meaning. In this stage we may think **“I am ready to learn from this important life experience.”** As we will discuss later, finding personal meaning in a loss involves being willing to identify and face your fears.

Before we talk about fear, let’s consider how the six stages of grieving can be applied to addiction and recovery.

Questions for group discussion:

Counselor leads discussion about grief by asking the following questions:
(5 mins)

1. Addiction entails forming a very powerful bond with your drug of choice. Have any of you met individuals who experienced a deep sense of loss when they gave up their drug of choice?
2. Did any of you go through these stages when you began addiction treatment?

3. When you are grieving other kinds of losses, does your addiction keep you stuck in any one stage of grief? (For example, does it keep you in the denial stage?)

Let's talk now about what keeps us stuck in any one stage and how to move beyond the stages of grief to hope.

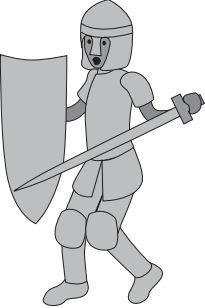
Counselor leads discussion on fears. (10 mins)

We talked about the first four stages of grief as providing temporary protection from the reality of whatever loss you have experienced. In fact, what you are really trying to protect yourselves from is not only the experience of loss, but your fears associated with this loss. Some of your fears may be justified; however, many fears that people have may not accurately reflect reality. **QUIZ ITEM** You've probably all heard the saying: "You have nothing to fear but fear itself." What this means is **fear is our worst enemy** because it can cause more harm than anything else. Let's consider how fear can impede you from finding meaning in your loss and moving beyond grief to hope.

Let's use as an example getting tested for HIV. Some people refuse to be tested because of their fear, however, by not getting tested their fears can become reality. Similarly, if someone tests positive for HIV and is consumed with fear about what lies ahead, he or she will probably make poor decisions that result in those fears being realized.

FEAR IS YOUR WORST ENEMY

FEAR OF:
Death
Suffering
Harm to loved ones
Loss of lifestyle



You have nothing to fear but fear itself

Visual

Show Slide 11.5

As shown on the slide, some common fears associated with testing positive for HIV include:

- Fear of death—this may include fear of the unknown, fear that one’s life had no meaning
- Fear of suffering—this may include fear of pain, medical procedures, loss of physical, mental, social functioning.
- Fear of harm to loved ones—this may include fear of emotional and financial hardship for family and friends, transmission of HIV to others.
- Fear of loss of lifestyle—this is not the same as fear of death. It can include fear of having to give up old routines, habits, style of coping.

As the next slide suggests, it is important to realize that if you are in this situation you can expend a lot of energy trying to defend yourselves against your own fears, putting on layers of armor to protect you from harm, when in fact your fears may not accurately reflect reality. **QUIZ ITEM**

Counselor asks group members if there are any additional fears that they have, and writes these on the board.

Visual

Potential Consequences of Defending Yourself against YOUR FEAR

If you focus on defending yourself from your fears, you may

- *use valuable energy that would be better used to protect your health*
- *prevent yourself from moving beyond grief to hope*

If you become stuck in one of the earlier stages of grief, you may

- *be less likely to protect yourself from further harm*
- *be less likely to follow medical advice*
- *be less likely to be abstinent from illicit drugs*

Show Slide 11.6

As this slide shows, the reality is that focusing on defending yourself from your fears may actually...


- prevent you from taking steps to protect your health **QUIZ ITEM**
- prevent you from moving beyond grief to hope.

If you become stuck in one of the earlier stages of grief, you may...

- be less likely to protect yourself and others from further harm
- be less likely to follow medical advice, including not taking medication as prescribed
- be less likely to be abstinent from illicit drugs.

So, what is the result of all this? The result is a self-fulfilling prophecy. By **responding** to your fears, you can actually turn your fears into reality. Let's see how this could happen. We'll continue to use the example of testing positive for HIV. Remember our friend Pat from previous groups? Let's use Pat again to demonstrate self-fulfilling prophecy.


PAT'S SELF-FULFILLING PROPHECY



I'm afraid HIV will make me unable to function

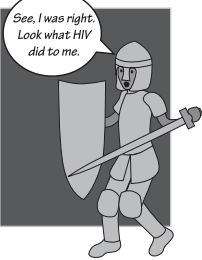
PAT'S FEAR

- HIV disease progression
- impaired functioning



PAT'S DEFENSE AGAINST FEAR

- Pat uses cocaine
- doesn't follow medical advice



See, I was right. Look what HIV did to me.

PAT'S FUTURE

- cocaine use worsens HIV effects
- HIV disease progresses
- functioning is impaired

Show Slide 11.7

Visual

As the slide shows, Pat's fear about HIV is its potential impact on mental, physical, and social functioning. To defend against this fear, Pat begins a cocaine run and stops taking his HIV medications as prescribed. As we have discussed in previous groups, cocaine use itself can hasten HIV disease progression, and can contribute substantially to mental, physical, and social impairment. So Pat's response to fear (use of cocaine) caused Pat's fears to become a reality. Pat's HIV disease quickly progressed to AIDS, and Pat also experienced severe impairment due to physical, neurological, and psychological damage caused by chronic drug use. This is an example of a self-fulfilling prophecy. **QUIZ ITEM** Rather than understanding this, Pat is likely to say "See I told you I was right—look what has happened to me because of HIV." In fact, Pat may not have experienced these negative events if were not for the fact that Pat dealt with fear by using cocaine and by not following medical advice.

So what do you do if you can't defend yourself from your fears?

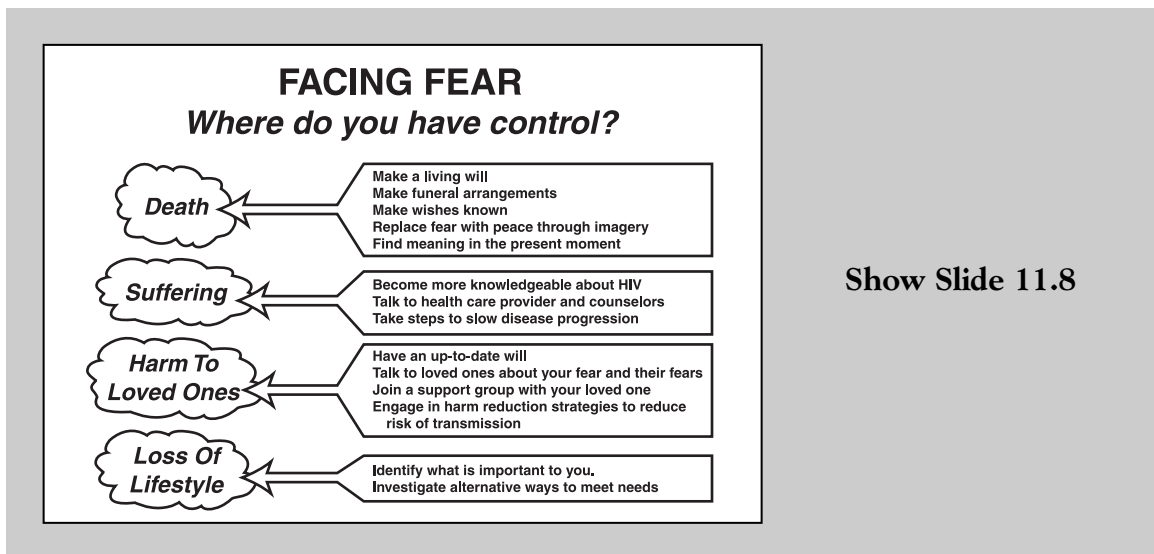
Simply put, you have to have the courage to face your fears in order to reduce the power that these fears have over you and your life.

**Verbal/
Didactic**

Counselor instructs group on facing fear and reclaiming control. (10 mins)

Facing your fears allows you to take control—when you do this you take the power out of the fear so that it no longer rules you. Let's go over the ways Pat could have faced his fears about HIV listed on an earlier slide. Although we are continuing with the example of testing positive for HIV, remember these steps demonstrate how to face any fear that may underlie anger and depression and that may ultimately lead to drug use and other high risk behavior. Fear is an expression of loss of control. When you face your fears you can identify where you have control and where you do not. As a result, your fears are reduced and you no longer need the associated negative emotions and behaviors to protect you from the fear. Let's see how this can work with Pat

Visual



1. If Pat feared **Death** as a result of testing positive for HIV, he would need to face the fact of his death—not because he is infected with HIV, but because he is a human being; therefore his death, like that of all creatures on earth, is inevitable. Most of us don't want to contemplate the inevitable physical death of our bodies. It takes courage, but the alternative is fear and withdrawal which blocks energy needed for living life fully. One way to reduce the fear of death is to take control of those aspects of your death that you can control:

- a. Have a living will that will inform people if you do not wish to be kept alive by any artificial means. If you don't have an attorney, you can obtain a Living Will in many stationery stores.
- b. Make your wishes known about the disposal of your physical remains. Do you wish to be buried or cremated?
- c. Identify someone you can trust to make choices for you if you can no longer make them for yourself and discuss your wishes with this person.
- d. If fear is an automatic response to thoughts of death, replace the fear with an automatic relaxation response. Do the following exercise daily:

Counselor reads the following autogenic relaxation script:

Sit quietly and with your eyes closed begin to think about whatever it is that you fear. Begin slowly. The moment you become aware of feeling fearful, rate your fear on a scale from 0 to 10 (not at all to extremely), and then do one of the relaxation exercises we have discussed in previous groups. For example, tighten and then relax each major muscle group while continuing to think about what you fear. Then re-rate your fear. Were you able to reduce it? With practice, you will be able to think about what you fear for longer periods of time before you experience the fear, and eventually your body will respond to that thought, with a sense of peace and relaxation, rather than with fear. When this happens you will no longer need the negative emotions and behaviors to protect you from experiencing your fear.

- e. Here's another example. If Pat fears death because he worries that his life has had no meaning, he could remind himself that meaning is found in the present moment. Looking to the future for happiness or living in the past is a set-up for disappointment. Ultimately, none of us have any assurance of anything beyond this present moment. There really is no future or past—just a continuous progression of **now** moments. We all need to make the most of each moment.
2. If Pat fears **Suffering**, he could reduce this fear by becoming more knowledgeable about HIV. **QUIZ ITEM** He should talk to his health care provider and counselor and read about HIV. He should also ask about the probability of pain and/or disability due to HIV; ask how pain is controlled; ask about medical procedures. His fears are probably worse than reality. He should find out what steps he can take right now to help slow disease progression, and act on it. This includes abstaining from drugs and following medical regimens. When you become knowledgeable about what you fear, you reduce its power over you.

3. If Pat fears that he will cause **Harm to Loved Ones**, he should take steps now to reduce harm:
 - For example, he should have an up-to-date will and make provisions for the care of loved ones
 - Talk to his loved ones about his fears and their fears
 - Join a support group with his loved one
 - Engage in harm reduction strategies to reduce risk of HIV transmission to others and further harm to himself. Again, this step applies to any fear. When we identify what we do have control over and take action, we again reduce the power of fear in our lives.

4. If he fears **Loss of his current lifestyle**, he should identify what is most important to him about his lifestyle—what does he truly value—he should investigate alternative ways to meet his needs. For example, if he fears loss of sexual intimacy, he could learn how to eroticize safer sexual practices.

Do you notice that every step requires putting your fear in perspective, finding out what you do have control over and what you do not, and taking appropriate action? If Pat does face his fear, he will be less likely to become depressed and use drugs and more likely to be abstinent, follow medical recommendations, and live a healthy lifestyle. Each of these actions will help him to prevent his fears from becoming a reality. Let's see how you can apply this to your own lives.

**Experiential/
Exercise**

Letting go of fear (15 mins)

Counselor provides instruction for the exercise, as follows:

In your Client Workbook you will find a worksheet entitled “Letting go of fear.” The purpose of this exercise is to help you identify and heal any losses that may contribute to your drug use and addictive lifestyle so that you can move forward in your recovery. The Worksheet asks you to identify your most recent loss and write it in the space provided. Select a loss that seems to have the greatest affect on your drug use and one that you have yet to completely accept. Then consider what stage of grieving you are in currently with regard to that loss. Then identify any fears associated with the loss you are currently grieving. Next, identify emotions and behaviors associated with this fear. Finally, select one of the fears you listed and describe just one specific step you can take during the coming week that will help you let go of this fear. Then make a commitment to take this step on a particular day or days during the coming week.

Clearly this is an ongoing process and needs to be done thoughtfully. Today, we'll take just 10–15 minutes to get you started. I encourage you to continue outside of group identifying specific steps to let go of each of your fears.

Counselor directs group members to the appropriate page in their Workbook, (Counselor provides a handout to those group members who did not bring their Workbook), and instructs group members to begin. Counselors walk around the room to offer assistance as needed. Counselor calls time after 10–15 minutes and encourages group members to complete the exercise at home as follows:

Again, I strongly encourage all of you to continue working on this process outside of group. You might even want to involve a loved one so that you can work together on letting go of fear. Commit yourself to getting started right now. You **can** reclaim control. You **can** free yourself from the power your fears have over you. If you do, you **can** begin to live every moment of your life to its fullest potential.

When we get back from break, we'll be lightening things up a bit and talking about how to diffuse fear with humor.

(10 mins)

Break

Counselor reviews material covered before the break. (5 mins)

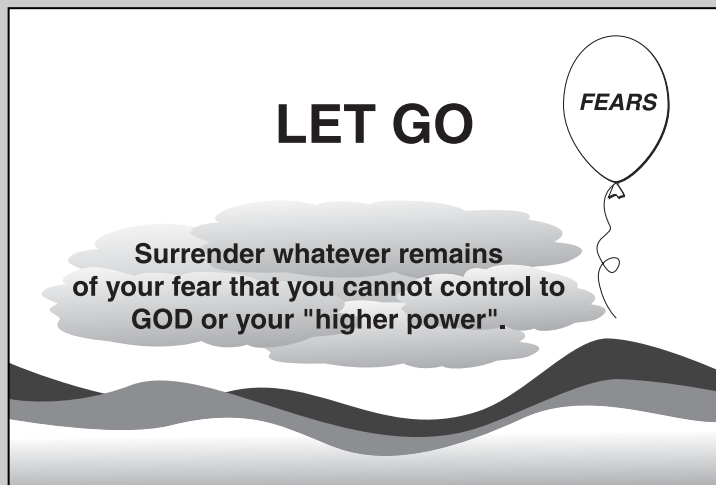
Review

Before the break we talked about grief, which is a normal human response to loss of any kind **QUIZ ITEM** and the 6 stages of grief—denial, anger, bargaining, depression, acceptance, and hope. **QUIZ ITEM** If you get stuck in the first four stages, you cannot move beyond grief to hope. We talked about how fear can keep you stuck in early stages of grief and how it can prevent you from engaging in behavior that can protect your physical, emotional, and social well-being. Fear can prevent you from taking steps to maintain your health. **QUIZ ITEM** In addition, even though fears do not always accurately reflect reality **QUIZ ITEM**, they can lead to behaviors that are unsafe (such as drug use) that can actually cause those fears to become a reality. This is an example of a self-fulfilling prophecy **QUIZ ITEM**, and explains the saying “you have nothing to fear but fear itself”—fear can actually be your worst enemy. Identifying and facing your fears will help you move beyond grief to

hope. This takes courage, and entails identifying what you do, and do not, have control over, and then taking appropriate action. Once you have identified what you can control and have taken appropriate action, you are left with what cannot be controlled. This is when you simply need to let go.

You may have heard the saying, **“Let go and let God.”**

Visual



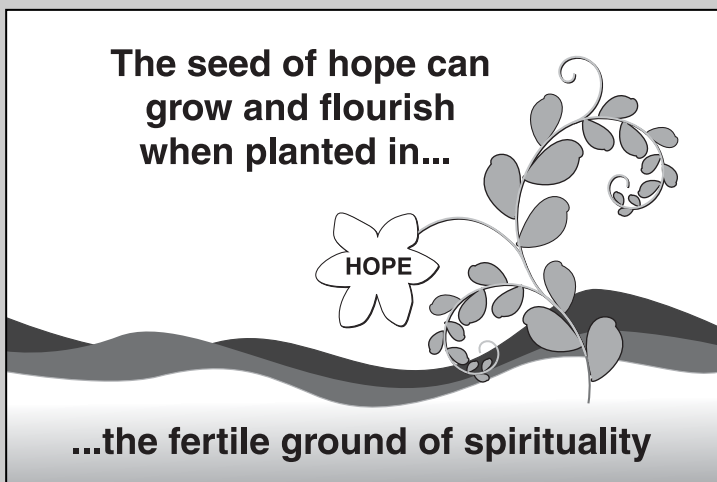
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You can replace the word “God” in this saying with whatever concept is meaningful to you. What you need to do is to “turn over” or “surrender” what you cannot control to your higher power, however you interpret that to be meaningful in your life. Remember from our group on the 12-steps that “higher power” can mean different things to different people. The primary goal is to let go of what you cannot possibly control. As shown in the slide, imagine putting what you cannot control in a balloon and then letting it go, allowing it to drift away. If you can do this, you are more likely to attain serenity. This returns us to the last stage of grief—**Hope**. Let’s talk about that now.

**Verbal/
Discussion**

Counselor leads discussion on spiritual growth. (5 mins)

Mind, body, and spirit are closely interwoven, with each influencing the others. Some people believe that you cannot have healing on the level of the body without healing on the level of the mind and spirit. The word “spiritual” is often confused with religious. However, spirituality is not confined to religion or to one set of beliefs, or doctrines. Spirituality is an essential part of who and what we are and what we value. It is therefore profoundly personal, and means something different for every person. Some people experience their spirituality by believing in a power greater than themselves. For some people, spirituality means feeling a connection with all things in creation. Some people believe that their spirit is the very core of their being and that their body is a shell or temporary home for their spirit.



Show Slide 11.10

As the slide shows, whatever spirituality means to you, getting in touch with and strengthening your own spirit **can provide a fertile place in which hope can be planted and can grow and flourish.**

So, what do spirituality and hope have to do with recovery?

Addiction has been called a sickness of the soul. Addicted individuals often feel an existential void in their lives that they have tried unsuccessfully to fill with drugs. Upon entering treatment they realize that the void still needs to be filled. Those who are successful in their recovery often report that they have filled this void by strengthening their spirit. In fact, there is evidence from research that strong spiritual and/or religious beliefs and optimism are not only associated with recovery from addiction, but also with better physical and psychological health.

So how do you begin if you want to grow spiritually?



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When you are spiritually starved, you need to begin feeding your spirit.

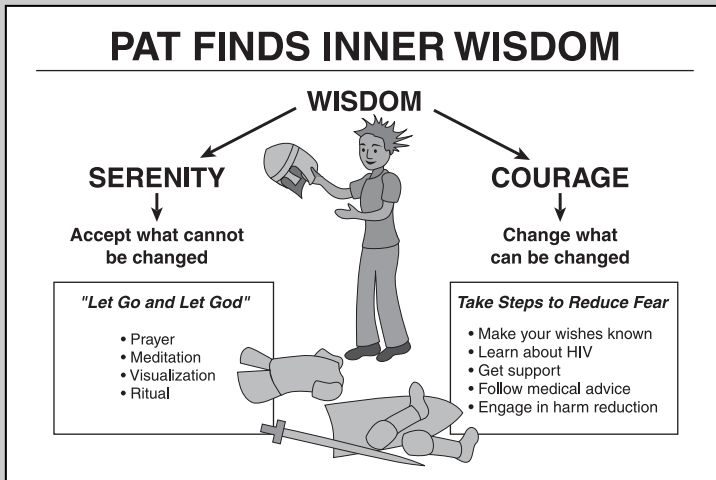
As shown in the slide, there are several steps you can take to promote your spiritual health. These include engaging in daily prayer, meditation, imagery, and ritual. **QUIZ ITEM**

Counselor presents information on the slide, as follows:

- 1. Prayer.** Prayer is any act of communion with God or a higher power. Prayer can take many forms—from recitation of formal litany to an impromptu and brief communication, spoken or unspoken. The content of a prayer may also vary, depending upon the needs of the individual who is praying, and may be a fervent request or the expression of devotion.
- 2. Meditation.** Meditation is the focusing of attention. Like prayer, meditation can take different forms. Some people meditate on a single word or mantra, some chant, some silently become aware of their breathing, or focus on an object, and some simply focus on the present moment. Meditation can be done while seated or lying down, or while engaged in an activity that is repetitive and that limits distractions. By focusing attention, the meditator becomes relaxed, centered, and is able to tap an inner source of wisdom.
- 3. Imagery.** Imagery or visualization is the process of forming a mental image (visual and/or verbal). Through imagery you can give your inner wisdom a voice and persona. You can then use this inner spiritual guide to help direct you along the path of spiritual growth.
- 4. Ritual.** A ritual is a religious or solemn ceremony repeated faithfully and regularly. Rituals have been used in every culture throughout the ages to inter-connect mind, body, and spirit. Identify a ritual that is particularly meaningful to you that is used in your own religion, or create a ritual that you can perform at home, such as lighting a candle or burning incense, hitting a gong, arranging flowers. As you perform this ritual, let it symbolize your spiritual healing, and take a moment to reflect on this.

Choose a special place in your home to set up a meditation or prayer area. You may also want to set aside certain times of the day for spiritual healing, such as morning upon awakening and evening before retiring.

The next slide summarizes what we have covered so far and shows what our friend Pat could have done to cope more effectively with his fears about HIV:



Show Slide 11.12

We refer frequently to the Serenity Prayer in this program. Can you see how it applies to what Pat could have done to cope with testing positive for HIV?

Counselor reads the serenity prayer to the group, as follows:

God grant me the serenity
to accept the things I cannot change,
the courage to change the things I can,
and the wisdom to know the difference.

Now Pat has the **Wisdom** to know the difference between what can and cannot be changed about HIV. Pat has found the **Serenity** to accept what cannot be changed, by “letting go and letting God.” Pat has also found the **Courage** to change what can be changed by taking action. Now our friend Pat is able to work effectively on physical, emotional, and spiritual healing. By strengthening his spirit, Pat’s behavior can be motivated by love instead of by fear and this will help him stay on the road to recovery which leads to improved physical, emotional, and spiritual health.

Counselor presents material on humor and healing. (5 mins)

Didactic/
Discussion

We began this group by focusing on loss and fear, and considered how addictive behavior is motivated by fear. We also talked about spiritual growth and said that growing spiritually can help you make decisions that are motivated by love rather than by fear. When your behavior is motivated by fear you are likely to engage in behaviors that will place your health and welfare

(or the health and welfare of others) at risk. When your behavior is motivated by love, you are likely to want to do everything in your power to protect your health and welfare (and the health and welfare of others). Let's turn now to laughter. Laughter too can promote physical, emotional, and spiritual health along your journey of recovery. We recommend that you make a list of movies, comedians, books, and cartoons that make you laugh. If you have access to the internet you also have access to sites that give you a joke a day and other humorous materials. Humor can also be a healthy way to temporarily defend against fear. You can reduce the power of fear by learning to laugh at yourself and your fears. So, watch, read, or listen to something you find funny every day to bring laughter into your daily life.

Counselor refers group members to the "amusing epitaphs" handout in their Client Workbooks and distributes copies of the "epitaphs" handout to those members who do not have their Workbooks.

In keeping with the theme of this group, we are going to have some fun with a fear we probably all have in common. In your Client Workbook you will find a list of epitaphs found on tombstones in graveyards across the country and around the world.

Let's go around the room, and take it in turn to read one of the epitaphs. I'll start.

Counselor distributes the "Epitaph" handout to those who do not have their Workbooks and begins by reading aloud the first epitaph on the handout. Counselor then asks each group member in turn to read one of the remaining epitaphs aloud to the group until all are read. Counselor encourages group members to have fun with the epitaphs.

Let's play our game now.

Experiential/ Team Game

TEAM GAME: "Remember me by what I valued"
(Total time 20 mins – Part I, 5 mins; Part II, 10 mins; Part III, 5 mins)

Aim:

- To identify what you value
- To get to know others by what they value
- To encourage group sharing, humor, and social interaction

Materials:

- “Remember me by what I valued” team game worksheet (cut into Parts I and II)
- Pencil/pens
- Hats or containers (one for each team)
- Timer
- Prizes (e.g., bubbles, balloons, “spiritual” stickers)

Counselor distributes the top half (Part I) of the worksheet and reads instructions for Part I as follows:

Part I. (total 5 mins)

Instructions:

1. There are three parts to today’s game.
2. The purpose of the first part is to help you reflect on what you value in your life.
3. I want you to pretend that your house is on fire.
4. You have time to save the **three things in the house that are most important to you.** All your loved ones and pets are safe so you don’t have to worry about saving them.
5. You will have 3 minutes to write down on the piece of paper the name of these three things that you want to save. Don’t put your name on the paper. When you have finished, fold the paper in half and then half again, and don’t let anyone see what you wrote. Then wait for further instruction. I will then explain Part II of the game.
6. Okay, begin now: Write the 3 things you would want to save from your burning house.

Counselor starts the timer. At the end of 3 minutes, Counselor calls time, instructs group member to fold their paper in half and then half again. Counselor then reads instructions for Part II, as follows:

Part II. (total 10 minutes)

Instructions:

1. I am going to divide the group into teams and I will provide each team with its own container and a Worksheet.
2. Team members will then place their folded pieces of paper in their own team’s container.

3. One member of each team will then select a piece of paper from the container of one of the other teams, such that each team will have the folded paper belonging to one of the other teams.
4. Each team will then be asked to pretend that the person who wrote the items on that piece of paper actually went into the burning house to get these three things and was presumed to have perished. All that could be found when the fire went out was this folded piece of paper (our pretend “victims” will be relieved to hear that they actually survived the fire and that they also saved their three items).
5. It is the team’s task to work together to write an epitaph for the presumed “victim” of the fire based on what he or she identified as the three most important things to be saved from the burning house.
6. Points will be awarded for the most creative and amusing epitaph and for including some reference to each of the three items in the epitaph. As compensation for being selected from the hat to be the presumed “victim” and subject of the epitaph, a bonus point will be awarded to that person. Another bonus point will be awarded for team participation if the team members work well together and everyone makes some contribution.
7. You will have 10 minutes to write the epitaph and then we’ll take 5 minutes to read the epitaphs and select a winner. Each member of the winning team will get a prize. Have fun with it. Remember humor can be healing on many levels.

Counselor divides the group into small teams (3-4 people per team) and distributes Part II of the worksheet and a container to each team. Counselor instructs the teams to place their folded pieces of paper from Part I in their own container. Counselor then instructs one member of Team#1 to reach into the container of one of the other teams and select one folded piece of paper. Each team does this IN TURN so that only one piece of paper is selected from each of the containers and that no team selects from its own container. Counselor then instructs the teams to begin writing the epitaph.

While the teams write the epitaphs, counselor writes the scoring criteria on the board, as follows:

Scoring Criteria:

	Score												
Did epitaph include a reference to all 3 items? (1 point for each item included, and 1 point bonus for all 3)	_____ (max.4)												
Rate level of creativity on scale from 0 to 4:	_____ (max.4)												
<table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> <td></td> </tr> <tr> <td style="text-align: center;">not at all</td> <td style="text-align: center;">slightly</td> <td style="text-align: center;">moderately</td> <td style="text-align: center;">very</td> <td style="text-align: center;">extremely</td> <td></td> </tr> </table>	0	1	2	3	4		not at all	slightly	moderately	very	extremely		
0	1	2	3	4									
not at all	slightly	moderately	very	extremely									

Emotional and Spiritual Healing

How funny was the epitaph on a scale from 0 to 4? _____
0 1 2 3 4 (max.4)
not at all slightly moderately very extremely

Sub-total: _____
(max.16)

Bonus points: _____
(1 point for participation of team members) (max.1)

Grand Total _____
(max.17)

Part III. (5 mins)

Counselor calls time after 10 minutes and asks each team to read its epitaph. Counselor asks the "victim" on each team to identify him/herself and to participate in scoring the epitaph.

Counselor totals each team's scores and awards prizes to each member of the winning team.

QUIZ WITH IMMEDIATE FEEDBACK (5 mins)

Quiz

As you know, we end each group with a quiz and a 10 minute relaxation exercise. I'm going to pass around the quiz now.

Counselor distributes the quiz (attached), and reads the items aloud, providing sufficient time for group members to mark their answers.

Detailed feedback:

Counselor re-reads each item aloud to the group, providing the correct answer after reading each item.

1. Is grief a normal human response to loss of any kind? The answer is **(a)** true.
2. Which of the items listed is a stage of grief? The answer is **(d)** all of the above—denial and anger, bargaining and depression, acceptance and hope are the 6 stages of grief.

3. Which of the statements listed is true about fear? The answer is **(d)** all of the above—fear can lead to harmful self-fulfilling prophecies; fears may not accurately reflect reality; and fear can prevent you from protecting your health.
4. Which of the items listed describes a healthy way to reduce the power of fear? The answer is **(c)** identify what you do and do not have control over.
5. Which of the items listed is a way to grow spiritually? The answer is **(e)** all of the above—prayer, meditation, imagery, and ritual.

**Stress
Management**

STRESS MANAGEMENT/RELAXATION EXERCISE (10 mins)

We are going to conclude by doing a brief relaxation exercise. I'll be dimming the lights and playing an audiotape. I'd like you to get comfortable in your chair, uncross your legs, and sit quietly with your eyes closed and just follow along with the tape. Remember that learning to relax is a skill that takes practice, so if you feel restless at first, just remind yourself that this is a 10 minute gift of quiet time that you give to yourself and to the other members of the group. As we've discussed in this group, this and similar techniques can be extremely useful to you if you incorporate them into your daily life. Learning to relax and to be at peace can reduce the power that fear has in your life, and help move you beyond grief to hope. With practice, it can help put you in touch with your inner guide—that source of wisdom that is within each of you that can guide you towards better physical, emotional, and spiritual health.

Counselor dims the lights, says "quiet please," and begins the tape.

END SESSION