

## **Suggestions for dealing with clients who drink**

You know your clients the best and how to motivate them but here are some alcohol specific suggestions in case you need a new approach to try. Please read in conjunction with the safer drinking pack.

***"We don't solve problems but outgrow them" (Carl Jung)***

***"Every problem was once a solution."***

### **Insight into addiction**

I'm sure we have all experienced how difficult it is to try and change behaviour, whether it's smoking, eating, snapping or any habit we have got into. Often that's because we are not changing the reason we do it - which leads to us finding another habit to use, or a relapse. Alcohol is the same. The added difficulties that clients face in giving up alcohol are the physical effects (as noted in the safer drinking pack), mainly in that their brains are temporarily damaged so are unable to function fully and make rational decisions (the part of the brain that is responsible for planning for the future is very weak). Although it may seem obvious to us that they should stop drinking, in that moment their thinking means it is difficult for them to do so. It is like they have been programmed to drink (which doesn't mean they have no control, just that it is difficult).

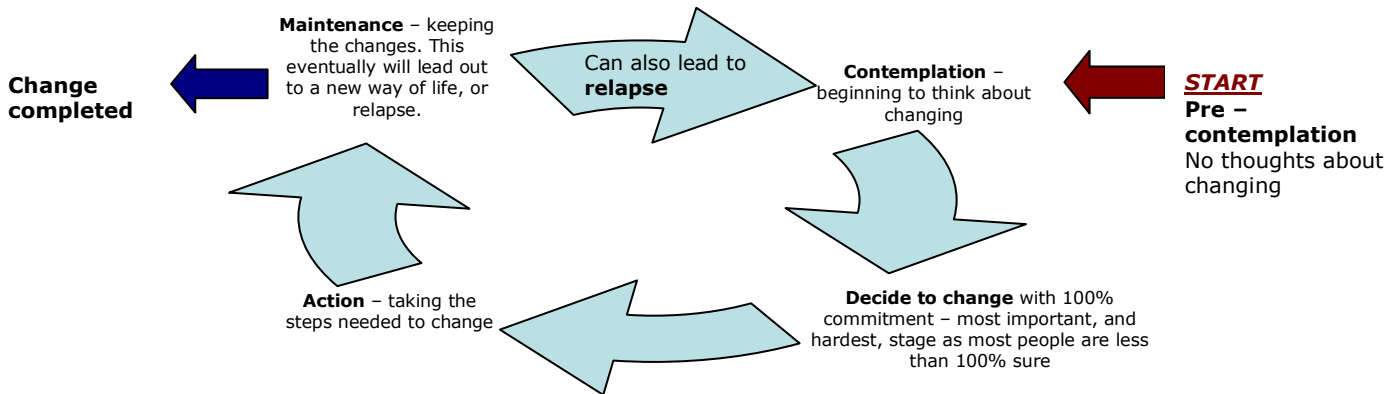
The strongest drive in human beings is also familiarity, we feel safer with what we know even when it is obvious that what we know will kill us. (better to be safe than sorry/ the devil you know etc).

The way to change a habit is to become someone who doesn't need to do that habit any more, so the alcohol project focuses on helping people change into someone who doesn't need to drink, as well as looking at strategies to change. It has nothing to do with will power.

Add to this the factor that most people drink to escape from painful thoughts; they do literally drink to '*get out of their heads*' and away from their own thinking. By convincing them they can learn to deal with the negative thinking and emotions, heal the pain and build a future they love they are more likely to give it a go. The first part of my role is convincing them to believe it is possible and I use stories of people who have achieved that to do it. Most people want to change but because they don't think they can, or don't know how to, they don't even bother to try and then lie to themselves about not wanting to so they do not get upset about it. Sometimes you cannot change that but you can give them something to think about and hope in the future they reconsider.

Also factor in that when they stop drinking they will feel physically unwell, and have to deal with the negative emotions they have been hiding from at the same time, and all the other consequences. Would you gladly face that?

Whenever we change something we go through this cycle:



People can lapse or relapse at any point on the cycle, and then return via the start point. Most people go through the cycle many times before they become stable. This is actually good as each time they will learn something new that they will need in order to change completely. Also some people think they want to change, or feel pressured to change, but aren't quite ready. Starting the cycle will still benefit them though, and they never go backwards completely. It is important to reassure clients that relapse is normal.

**Practically all this means:**

- Show empathy and understanding to clients. Believe they want to change but either don't know how or are scared to. My clients say the biggest factor is that they trust someone. Would you admit what you see as a failure to someone you didn't trust or felt was judging you?
- They have to decide for themselves they want to stop but we can help them along. Sometimes it is just giving them something to think about rather than pressuring them, or giving them the space to talk about it. Even if we think they need to stop now, it is their life and their choice. If we lived inside their heads we probably would resist stopping too.
- Be curious about how they got to where they are. Ask questions. Drinking once solved a problem for them.
- Assure them they can change. I guarantee there is something I teach they haven't tried yet. There is not one way that works for all, they just need to keep trying until they find what works best for them. And what is the alternative?
- Ask them if they could have the benefits without the negative consequences, would they? Then explore what the negative consequences are and suggest they can learn to reduce them.

- You all know never to suggest they just stop drinking if they are drinking heavily. Advise to reduce or see their GP.
- I've added 2 assessment tools (at the end) that you might find helpful to use to get your client to think about their drinking.

**Excuses:**

***I've not got a drinking problem:***

Do they? Or have we judged they have? Some people say that you only have a problem if you want to stop and can't. Not everyone wants to stop.

Ask them about if they could have the benefits etc....

Or if they have ever missed out on anything/ upset anyone due to their drinking. Or drank to change how they feel. Ask open questions.

Say how easy it can be for it to creep up and become a problem, and that the alcohol project can help people learn other strategies so that they always have a choice.

If it's a condition of tenancy, remind them of that and the consequences. No judgement.

***I've tried everything:***

I teach techniques that the majority of places do not and I am happy to meet them so they can challenge me on it! (it's common)

Use the 'what if' question. *What if there is something you haven't tried that could make it easy for you and you just haven't been taught it yet?'*

Remember that it is common for us to reject anything that doesn't fit in with our way of thinking, so people who are scared to face their problem will automatically reject first offers of help.

***They say they want help then do not turn up:***

This is common, have you ever decided to get up early to exercise then not done it? Same thing, plus if they are still drinking it can be hard to keep to appointments. Drinking deadens motivation and the short term relief it gives out weighs the long term negatives in their mind. Plus who wants to come and talk about drinking with a hangover?

Ask them if there is anything we can do to make it easier for them to attend, maybe arrange to meet them during my drop-in. Or I'm hoping to start going out to visit people.

***They don't like groups:***

I'm always astonished that people talk so freely in groups, but everyone gets anxious until they have been and see how relaxed it is. They don't have to talk, and are not forced give up drinking. Give them an intro pack and suggest they come to drop-in first.

***They want to do it on their own:***

They can meet with me just to get some initial ideas and suggestions, and you can give them the safer drinking pack as a guide. Even if they attend group they will still have to do it on their own, but knowing others are going through the same can help.

***They say they will think about it:***

Let them. Keep coming back to it but don't try and force them. Some people may take years to decide to get help, or never. If it's part of their tenancy remind them but say it is OK for them to drink if they choose, just not with us.

***It is possible to be empathic and firm, to be understanding and still push them a little. You know your clients best and what works for them, but hopefully this may have helped to give you more options.***

**Available avenues for help:**

Safer Drinking Pack

1:1 with me

Drop-in and group

**NHS DIRECT** 08454647 More info/  
another pack is on

<http://www.drinking.nhs.uk/>

Counselling  
CAST) External support groups  
AA )  
DAIS  
Residential Rehab  
Internet sites/ support

**The National Alcohol Helpline** - Tel:  
0800 917 8282

**Drinkline** National helpline providing  
counselling, support, advice and  
information. Calls are charged at local  
rates. Tel: 0345 320202

You can also learn more by doing a free online course in Alcohol Identification and  
Brief Advise (IBA) at <http://www.alcohollearningcentre.org.uk/eLearning/IBA/>

Other websites for info include:

[www.drinkaware.com](http://www.drinkaware.com)

<http://www.alcoholconcern.org.uk/>

I have also put some information sheets on R:\Support\EVO\Alcohol Project\info

Let me know if I can be of any other assistance.

*Kathryn*

## **M-SASQ**

Questions	Scoring system					Your score
	0	1	2	3	4	

How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
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**Scoring:**

A total of 0 – 1 indicates lower risk drinkers.

A total of 2 – 4 indicates increasing or higher risk drinkers.

An overall total score of 2 or above is SASQ positive.



**AUDIT – C**

Questions	Scoring system					Your score
	0	1	2	3	4	
How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times per	2 - 3 times per	4+ times per	

			month	week	week	
How many units of alcohol do you drink on a typical day when you are drinking?	1 - 2	3 - 4	5 - 6	7 - 9	10+	
How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

**Scoring:**

A total of 5+ indicates increasing or higher risk drinking.

