

# Impulsive Lifestyle Counselling

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## **Short-term psychoeducation for antisocial personality disorder**

*Adapted from “Criminal Lifestyles Curriculum” by Matthew D. Geyer, Psy.D.*

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## **Preface**

### **Why develop treatments for antisocial personality disorder?**

Antisocial personality disorder [ASPD] is a pervasive disorder in emotional life, interpersonal relationships, thinking and impulse control, and has been shown to be associated with poor functioning, both in terms of quality of life and social functioning.

These are people who “get into trouble”, who have conflicts with their family members, neighbors, employers, teachers, who break the law, and who have trouble keeping their appointments, and obligations. It is this pattern of “getting into trouble” that may result in the loss of educational and job possibilities, family and friends, or in accumulating debts, ending in prison, or becoming a victim of violence and other crimes.

It is not easy for others to want to lend a hand to people with antisocial personality disorder. When someone does try to lend a hand, he or she may find that the help offered is being misused, or find a frustrating lack of gratitude for all the help. In some instances, the person offering help may even experience being lied to, manipulated, or threatened.

### **The challenge of helping people with antisocial personality disorder**

Against this background, it is not surprising that helping systems, such as mental health services, employment programs, rehabilitation programs, and family treatment programs may sometimes exclude people who are likely to have antisocial personality disorder. Many of our colleagues tell us that communicating a diagnosis of antisocial personality disorder to other services is likely to lead to rejection of the person.

As understandable as that may be, given the challenges involved, it is also very unfortunate for two principal reasons. The first is that antisocial personality disorder is in fact associated with substantial distress. People with antisocial personality disorder may not be aware that much of their distress is the result of behavioral problems, but the high level of family conflict and the many losses and failures that they experience over the course of a lifetime does take its toll on the person with antisocial personality disorder. The level of distress increases when the person reaches mid-life, often becomes socially isolated, and sees more clearly his limited opportunities in life. The second reason that the lack of treatments for antisocial personality disorder is unfortunate is that the disorder is costly. People who offend, who cannot work consistently, who cannot take responsibility for their

children, incur costs on society. Victims of violence need hospitalization, or they cannot fulfil their obligations for a while after they have been victimized, police investigations and prisons costs money, failure to work means less productivity and less tax revenue, and caring for neglected children cost money.

### **What needs to be done for people with antisocial personality disorder?**

All of this means that we cannot ignore the problem either on a personal or a societal level. We need relevant treatments and interventions for antisocial personality disorder. In fact, we need a whole range of treatments and interventions, some intensive and costly, others in the form of low cost add-ons to other support systems, and even some in the form of minor adjustments to service systems that make them better adapted to work with people with antisocial personality disorder. Other important methods include anger management, case management, and cognitive skills programs, interventions that are frequently used in criminal justice and forensic psychiatric settings, and several of which have considerable empirical support. Other innovative approaches are currently being tested, such as a specially adapted version of mentalization-based therapy in the United Kingdom (Bateman and Fonagy, 2008). Our aim with this workbook is to make a small contribution toward the development of such interventions.

### **About the Impulsive Lifestyle Counselling workbook<sup>1</sup>**

Impulsive Lifestyle Counselling is a brief psychoeducational program developed for people with coexisting antisocial personality disorder and substance use disorders. The program is offered in six one-hour sessions, and was tested as an add-on in outpatient substance abuse treatment, where it was found to improve retention in treatment and reduce substance use compared with treatment as usual. With Impulsive Lifestyle Counselling, it is our hope to help support a process in which antisocial personality disorder gradually stops being a diagnosis of exclusion and increasingly becomes a diagnosis that is used to identify helpful programs and interventions.

The aim of Impulsive Lifestyle Counselling is to support the need to offer a psychoeducational intervention for persons with antisocial personality disorder that makes a difference in their lives, by offering a low-cost intervention that can be conducted by the existing staff at a range of services,

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<sup>1</sup> We refer to this text as a workbook rather than a manual, to stress the fact that this intervention is not like an expert psychotherapy that can only be delivered by clinicians with long experience and substantial training.

including homeless shelters, outpatient community substance abuse treatment centers, mental health facilities, social service centers, and within the criminal justice system.

To sum up, we hope that this workbook can be useful for professionals who work with people who keep getting in trouble.

Finally, we hope that the workbook will contribute to the development and testing of other innovative interventions for antisocial personality disorder.

The workbook can be used for both individual and group interventions. Also, the workbook can be used more flexibly to individuals and groups, for example by going through the program several times with the same person over time, or by conducting some of the sessions only. The workbook is developed for interventions that involve a counsellor, but it may also be used as a self-help book. It has been tested in substance abuse treatment, and has also been used in prisons, where in some cases it has been adapted to a group format.

We invite you to share your experiences on working with the Impulsive Lifestyle Counselling workbook with us.

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## Introduction to Impulsive Lifestyle Counselling

### The aim of Impulsive Lifestyle Counselling

The aim of Impulsive Lifestyle Counselling program is to offer clients with antisocial behavior an opportunity to talk about the problems that they are facing in their daily lives, and support them in awareness raising and reflection on whether it makes sense to find other strategies for behaving and thinking, which will lead to fewer problems for themselves and others. In simple terms, through this program they will learn how to “keep it together”.

### The target group for Impulsive Lifestyle Counselling: Formulation of a Case

*Jeremy was a 22-year old man who had been homeless on and off, since he was 14 and ran away from his foster parents. He had been born from a drug using mother and been placed in custody throughout his childhood. At 22, he is homeless, smoking cannabis most of the day, but has managed to get a monthly welfare check. Jeremy is sleeping rough most nights, stealing things that he can sell to obtain extra money, and will occasionally also steal things he needs. Most of his friendships quickly turn sour, either because he will borrow money from them and not repay the money, or because he will get angry with them. He has been diagnosed with ADHD, but does not take medication. Instead, he sells his medications. His interactions with social services and mental health were nearly always negative, and he repeatedly finds himself bewildered over, why his requests are not granted at the time or in the manner in which he desires.*

Jeremy is a huge challenge for social and mental health services. He obviously is in need of help, yet it is very difficult for him to collaborate with the professionals that are trying to help him. Jeremy clearly has resources: he is able to organize places to sleep rough, has managed to get welfare benefits from the state, and to get a diagnosis of ADHD. However, his attempts at getting his life back on track never last very long.

Although Jeremy has been diagnosed with ADHD, his problems go much further than the difficulties in attention and impulsivity that are related to ADHD. He has very significant difficulties with regulating his anger; he is consistently dishonest and does not fulfil obligations; he has interpersonal problems and difficulties following social norms. These difficulties lead him into actions that end in arguments, offending others, violence, and arrests. In short, he has antisocial personality disorder, and providing him with medications that could help him if ADHD was his core problem has done little to solve his problems.

How many do we meet who face some of the same problems as Jeremy? Studies show that app. 1-3 % of persons in the general population suffer from antisocial personality disorder (Coid et al., 2006, Goldstein et al., 2016), compared to about. 20 % persons with an alcohol dependence, about 40 % with drug dependence (Colpaert et al., 2012, Goldstein et al., 2007), and is common among prison

inmates (e.g. Maccio et al., 2015). Aside from poor quality of life, unemployment, and homelessness, persons with coexisting antisocial personality disorder and substance use disorder commit a great deal of the crime and violence in many societies. These problems present serious challenges to society, as well as social and health services that often serve these persons. For social and health services, significant challenges are that the antisocial behavior often results in poor retention and low engagement in treatment.

### **The point of contact**


Treatment and service systems may come into contact with clients who are struggling with antisocial personality disorder, when their problems become too overwhelming. Usually this involves more than one factor, as illustrated in the case example below:

*Johnny was in residential rehabilitation for cocaine and heroin use at a small treatment facility that was serving no more than a handful of clients at a time. He arrived and was detoxified within a week, and seemed to settle in very well for the first couple of weeks. However, during the third week he became sulky and started to withdraw to his room, refusing to participate in meals. A urine test turned out positive for cocaine, and at the same time, Johnny completed a personality self-report test that indicated the presence of antisocial personality disorder. Johnny left the facility after another month, remarking that he no longer had “anything to fear in his home town.”*

For professionals working with people with antisocial personality disorder, the story of Johnny has some familiar features: although Johnny is in treatment and complies somewhat, what he tells the people who provide treatment to him is not always entirely true, and his reasons for being in treatment are not quite what the clinicians think. Behavior like Johnny’s tends to trigger negative reactions in clinicians and caseworkers, and he erodes their trust when he continuously lies to them and acts in ways that violate their expectations.

Like many people with antisocial personality disorder, Johnny’s reasons for being in treatment are multiple and complicated, and the complaints that he has do not always correspond to the problems that actually lead him to treatment. While he sought treatment because of his drug use, a significant factor in getting him to do so, and what motivated him to remain in treatment, was the fact that someone in his hometown was on the lookout for him. He owed a significant amount of money, and showing up in his town without having the money would likely mean that he would become assaulted, or possibly even killed.

As antisocial personality disorder characterizes a behavior where conduct disorder has been a precursor, it also explains why people with antisocial personality disorder often realize that they have had a long history of negative interactions with others. Studies show that when children display aggressive and disruptive behaviors, their peers will tend to reject them. The isolated child will then seek the company of others who are similarly isolated, often others that are also “troublemakers”. And when the child reaches adolescence, a pattern of rule breaking is established that forms the basis for the development of antisocial behavior in life (Ettetal and Ladd, 2015).



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Over the course of childhood and youth, repeated experiences with rejection and being expelled from schools or institutions form the young person's view of him or herself, of others, and of society. The world is seen as a place with very limited opportunities, others are seen as critical and aggressive, and the self is seen as the "troublemaker" who has to fight or be fought. As a young person reaches adulthood, many social interactions will confirm the views, and as the young person expects that little will come out of making an extra effort, failures are likely to occur in education and employment, and deviant peers are likely to support the bleak views of the value of work. After engaging in crime, the young person will meet the police and the criminal justice system, and interactions with these systems are likely to be critical and hostile. With rejections from the outside and pull from deviant peers, the antisocial lifestyle becomes increasingly difficult to break free from (Walters, 2014). This is where Impulsive Lifestyle Counselling may play a role.



## **Criteria for antisocial personality disorder**

Impulsive Lifestyle Counselling has been developed for persons who fulfill the criteria for antisocial personality disorder. If the patient has been screened or assessed positive for antisocial personality disorder by a psychiatrist or psychologist, Impulsive Lifestyle Counselling may be a relevant offer. If it is uncertain whether a client meets the criteria, but there is reason to believe that he or she may benefit from the intervention, we strongly recommend that the professional who will conduct the intervention determines whether the intervention remains relevant when working with Impulsive Lifestyle Counselling and talk about it with the individual client.

The *Diagnostic and Statistical Manual, Fifth Edition* describes antisocial personality disorder as a personality disorder characterized by a pervasive pattern of disregard for, or violation of, the rights of others (APA, 2013).

## **Conduct disorder**

Conduct disorder is characterized by behavior that violates either the rights of others or major societal norms, and is diagnosed in childhood. At least 3 symptoms must be present in the past 12 months with one symptom having been present in the past 6 months. To be diagnosed with conduct disorder, the symptoms must cause significant impairment in social, academic or occupational functioning.

### *Symptoms and criteria for Conduct Disorder*

#### Aggression toward people and animals:

1. Often bullies, threatens, or intimidates others
2. Often initiates physical fights
3. Has used a weapon that can cause serious physical harm to others (e.g. a bat, brick, broken bottle, knife, gun)
4. Has been physically cruel to people
5. Has been physically cruel to animals
6. Has stolen while confronting a victim (e.g, mugging, purse snatching, extortion, armed robbery)
7. Has forced someone into sexual activity

#### Destruction of property:

8. Has deliberately engaged in fire setting with the intention of causing serious damage
9. Has deliberately destroyed others' property (other than by fire setting)

#### Deceitfulness or theft:

10. Has broken into someone else's house, building, or car
11. Often lies to obtain goods or favors or to avoid obligations (i.e. "cons" others)

12. Has stolen items of nontrivial value without confronting a victim (e.g. shoplifting, but without breaking and entering; forgery)

Serious violations of rules:

13. Often stays out at night despite parental prohibitions, beginning before age 13 years
14. Has run away from home overnight at least twice while living in the parental or parental surrogate home, or once without returning for a lengthy period
15. Is often truant from school, beginning before age 13 years (American Psychiatric Association, 2013)

If a person meets at least three of the criteria from conduct disorder, it indicates that the current behavioral problems describe a more general behavioral phenomenon.

*Symptoms & criteria for Antisocial Personality Disorder*

According to the DSM-5, there are four diagnostic criteria, of which Criterion A has seven sub-features. To be screened positive for antisocial personality disorder, the behavioral problems that characterizes conduct disorder in adolescence must also be present in adulthood, as indicated in at least three of the following seven sub-features:

A. Disregard for and violation of others rights since age 15:

1. Failure to obey laws and norms by engaging in behavior which results in criminal arrest, or would warrant criminal arrest
2. Lying, deception, and manipulation, for profit or self-amusement,
3. Impulsive behavior
4. Irritability and aggression, manifested as frequently assaults others, or engages in fighting
5. Blatantly disregards safety of self and others,
6. A pattern of irresponsibility and
7. Lack of remorse for actions

The other diagnostic criteria are:

B. The person is at least age 18,

C. Conduct disorder was present by history before age 15 (as described above)

D. The antisocial behavior does not occur exclusively in the context of schizophrenia or bipolar disorder.

### **A comment on specific target groups**

We recommend that using the workbook with persons with severe mental health problems and brain damages only takes place after careful evaluation by the professional treatment staff, and only is conducted by professionals who have adequate competencies and skills in working in understanding and handling the co-existing mental health problem and brain damage.

We wish to emphasize that persons with high levels of anxiety and depression had a lower retention rate in our study. For this reason we recommend that clients with anxiety and depression, and possibly also other problems that may interfere with treatment, such as attentive-hypoactive-disorder, receive an integrated offer which may involve medical treatment or other means of short or long-term support parallel to the Impulsive Lifestyle Counselling program, in order to improve their retention rate.

### **Other potential target groups**

The Impulsive Lifestyle Counselling program has been developed to clients who fulfill the criteria for antisocial personality disorder. Some of the themes in Impulsive Lifestyle Counselling may be relevant for clients with other mental health problems. Indeed, people with borderline clientality disorder, narcissistic clientality disorder, or other disorders, such as gambling disorder, may find some themes useful. However, the workbook focuses on impulsive and risk taking behavior, and on destructive and offending behavior. Accordingly, a large bulk of themes in the workbook will not be relevant for people who do not have antisocial personality disorder, or will only be relevant by analogy.

Therefore, the content of this workbook should not be mindlessly reproduced with patients who do not have antisocial personality disorder, although they may exhibit impulsive behavior, or may have committed serious crimes. As a case in point, the Impulsive Lifestyle Counselling workbook was used in a high security prison for offenders without psychoses but with indication for psychological treatment. For some offenders, such as compulsive arsonists and people who had murdered their partners in a fit of rage, the content was not appropriate, leading to aimless discussions and loss of motivation.

### **Approach**

The Impulsive Lifestyle Counselling program is a psychoeducational program, which is heavily inspired by the Lifestyle Issues and Lifestyle Change Program. These approaches are outlined below.

### **A psychoeducational approach**

Psychoeducation refers to the education offered to clients diagnosed with a mental health condition or to their families to help empower them and deal with their condition in an optimal way. Often psychoeducational interventions are offered to people with schizophrenia, mood and anxiety disorders, psychotic illnesses, eating disorders, and personality disorders, as well as patient training courses in the context of the treatment of physical illnesses.

One goal in the psychoeducational approach is to help the client to understand and be better able to deal with the presented illness. Ideally, through psychoeducation, the client's own capabilities, resources and coping skills are strengthened, and used to contribute to their own health and well-being on a long-term basis. The psychoeducational approach in the Impulsive Lifestyle Counselling means that the program aims at supporting the client with antisocial behavior in awareness raising and understanding his or her own challenges, and to consider what can be done to meet these challenges.

What characterizes the psychoeducational approach is the aim of supporting an increased awareness and self-understanding by involving and activating the client in the intervention. Sufficient self-understanding is an essential starting point for acting appropriately in response to the symptoms and problems that people face, and for being able to accept and engage in relevant services that target these symptoms and problems, whether it is in the form of medication, behavioral changes, or other interventions. An improved self-understanding may for example help a person with an autism spectrum disorder in understanding that the symptoms and problems related to this disorder may result in him or her unintentionally insulting or offending others, or that the stress that they experience may be caused by spending too much time with many people without having sufficient rest and protection prior to the interaction.

All psychoeducation interventions involve elements of learning about the symptoms and problems related to the definition of the condition, and relating this to personal experiences from everyday life situations. Frequently, the intervention will also involve elements of talking about how the person best may cope with his or her condition, and which support and interventions are necessary in order to do that.

### **Inspiration from the Lifestyle Change Program**

The Impulsive Lifestyle Counselling program (ILC) is strongly inspired by the Lifestyle Change Program (LCP) developed by Glenn D. Walters and manualized by Matthew D. Geyer. The Lifestyle Change Program targets criminal behavior and thinking from a lifestyle perspective where crime is seen as the product of the interaction between personal and external factors, expressed in four behavioral styles: irresponsibility, self-indulgence, interpersonal intrusiveness, and social rule breaking (Walters, 1995).

The Lifestyle Change Program was developed for prison inmates within a group session format, and has been found to support a change in attitudes to crime and reduce recidivism to crime. In order to reach a wider group of people with antisocial personality disorder outside prison settings, the Impulsive Lifestyle Counselling has been adapted to an outpatient format, where treatment retention is poor, or many people do not turn up regularly. When we began the work that eventually led to the development of the Impulsive Lifestyle Counselling program, our intention was to adapt the Lifestyle Change Program into a brief outpatient format that could function as an add-on to other treatment offers within outpatient substance abuse treatment services and other services that work with clients who meet the screening criteria for antisocial personality disorder. However, in order to adapt it into an offer that was realistic to conduct in terms of requirements to economic resources and staff resources, we abbreviated the program considerably. The end result is a program that is not as ambitious in its objectives as the Lifestyle Change Program. There are three significant characteristics that differentiate between the two programs:

One original approach of the Impulsive Lifestyle Counselling program concerns individual counselling. It is not that we believe that individual counselling is superior to group treatment, but simply that we found it more practical to offer and test an individual counselling program. However, the difference between individual and group counselling makes a difference when using a workbook. In a group setting, the group leader presents the program for the session in the manner of a teacher, often standing by a whiteboard. In individual counselling, the counsellor works more in the manner of an instructor, and collaborates with the individual client on the program content throughout the program.

The second difference is that Impulsive Lifestyle Counselling does not aim to apply cognitive restructuring, and does not provide continuous support for the development and practice of new skills. The Lifestyle Change Program uses the Antecedents-Beliefs-Consequences approach,

originally developed by Albert Ellis in his Rational-Emotive Therapy to help patients understand the link between cognitions, circumstances and actions. In Impulsive Lifestyle Counselling, we use the simpler Triggers-Actions-Consequences model, a model which leaves out any reference to beliefs or cognitions; the objective of the TAC model is to simply help the client place his or her own actions in the content of specific circumstances, and to understand that it is the client who chooses which action to take, and that the actions have consequences for them and those around them.

The third significant difference is that we have added a session about social networks. Outside prison settings, people have more of a choice as to who they socialize with and choose to have in their lives. Research has established that antisocial personality disorder is often associated with factors related to family and upbringing, such as family dysfunction and antisocial parents (erratic discipline, and poor parental supervision), as well as antisocial peer relations. As a result, we consider it to be important to address how the individual is actively involved in selecting their social environment, and how this may support or challenge their desire for lifestyle changes.

### **Session content and structure**

The objective of the six sessions in the Impulsive Lifestyle Counselling program is to support clients with co-existing antisocial behavior and substance misuse in awareness raising, identification, and possible change of their impulsive and addictive lifestyles which create problems for themselves and others.

The six sessions address the following themes:

1. Introduction, goals, and the 4 areas
2. The TAC model
3. “Streetwise pride”
4. Values that break with an antisocial/impulsive lifestyle
5. Social network
6. Booster session (six weeks after Session 5)

Each session should last 40-60 minutes. Keeping sessions at a similar length of time helps you and the client develop routines during the course of the program and adds to the predictability of the sessions. In our experience, most counsellors are able to maintain sessions within this timeframe with most clients.

### **Structure**

All sessions are built up around the same structure, inspired by the Lifestyle Change Program, and from research articles on how manuals work best for professionals in clinical practice (e.g. Najavits et al., 2000).

**Title:** Describes the main focus of the session.

**Name, date, counsellor:** Information on who is involved and when.

**Overview:** Describes the main content that you will be working with during the session:

1. Resources (materials that may be used during the session, such as white board, pencils).
2. Objectives (description of the objectives of the session).
3. Activities (description of the activities during the session.).
4. Handouts (underlined focus areas to be handed out during the session).
5. Homework (for the client to work with in between sessions).
6. Counsellor's session checklist (your check off of completed session activities).

**Mood check:** Each session starts off with a mood check. Doing a mood check both functions as: (1) A reminder to be attentive to the state that the client is in before you begin the session, so that you do not make your own assumptions, but rather find out the what mood the client is in, and are able to remain aware of this in the way you conduct the session. This can be how the client is feeling, whether the client is affected by or upset about something that has happened since you last talked (arguments, changes in other treatment interventions, alterations in medication, or has experienced an urgent crisis that draws away attention from what is about to take place in the session. (2) To train the client to stop and ask him or herself how he or she is feeling. (3) To train the client to formulate how he or she is feeling to others.

**Summarize the last session:** In all sessions, except for the first and last, the client is asked to tell what he or she can remember from the last session. This is to serve as: 1) A link between the sessions and the themes and activities they address. 2) A reminder of what has taken place in the previous session. 3) A means of support for the client to pay attention to the process that the Impulsive Lifestyle Counselling program aims to facilitate.

**Objective for the session and session activities:** States the overall objective with the session and of the specific activity. This also includes brief descriptions of some main attention areas concerning the rationale behind the objective of the specific theme and activity. In certain cases, there will also be some comments on what responses the theme or activity may elicit, and what you need to pay extra attention to.

**Text boxes:** The text boxes is what you should say when you are working with the workbook. You do not have to read the text aloud word for word. You can express the content of the text in your own style, and in a way that best suits the individual client. But be sure to include all of the elements in the text. This is important for how the client is led from one working point to the next during the session. Pay attention to descriptions before the text boxes – often they will give you a good idea about what you need to address in the text.

**Session notes:** Many of the conversations and activities that are facilitated in the workbook involve taking notes on the client's response to your question or as part of the activity. Taking notes both functions as: 1) Symbol of transparency, so that the client can follow and comment on what you chose to note. 2) Symbol of collaboration, so that you both know what is going on, and what the focus of the conversations or activities is for the session that day. 3) A pause that gives you time to process how you will comment and act on the client's response to the question or to the activity.

**Handouts:** Many of the conversation topics and activities that are facilitated in the manual also involve handouts. Giving handouts both function as: 1) A psychoeducational approach to underline and inform about important themes and terms in the Impulsive Lifestyle Counselling program. 2) Involving the client in active participation in the themes and activities that are brought up in the sessions. 3) Involving the client in paying attention to his or her own learning in everyday life.

**Homework:** All sessions except for the first and last session involve homework which addresses main themes that have been raised during the session. The homework both function as: 1) Support of continued focus on what has been worked with in the session. 2) A symbol of that working with awareness raising and lifestyle changes not only takes place in the Impulsive Lifestyle Counselling sessions, but also in the client's everyday life. Some clients will be able to do the homework on their own, others may need help remembering to do it, and some will bring the worksheet home to think about their process, but are not able to fill it out on their own. In the beginning of each session, there is time set aside to go through the homework from the previous session. Depending on what has been





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done, talk about what the client got out of doing the homework or do some of the unfinished homework during the session.

**New appointment:** It is important to underline that the Impulsive Lifestyle Counselling program supports a process. To do this, each session ends with making a new appointment. Of course the booster session is not followed up by a new appointment in the workbook. However, depending on how the workbook is used, there may be good reason to set up a new appointment, possibly with other professionals, who will be involved in further treatment.

**Counsellor's notes:** The note section at the end of each session is for you. You might find it helpful to take notes on your experiences from the session (how was the interaction with the client, what did you find challenging or fruitful in the session, themes to remember in next section etc.). Your notes may also be valuable when you share your thoughts and reflections on the intervention with a colleague or supervisor.

## **Conducting the sessions**

A workbook does not make your professional experience and contribution obsolete. It is a tool that supports working with relevant problems and challenges related to antisocial personality disorder. Like all other tools, the Impulsive Lifestyle Counselling workbook has to be used correctly in order to get the desired results. The following section describes what you need to know before you start conducting the Impulsive Lifestyle Counselling sessions, and what you need to pay attention to during the sessions.


### **Reading and practicing the workbook before use**

Before you conduct your first session, we recommend that you read the workbook in its entirety. Reading the whole workbook will give you an idea of the overall process that the sessions aim to support, and an idea of how the themes and activities in each session are connected. It is our experience that this helps the individual counsellor to anticipate how much can be addressed during one session, and how some of the core issues will be addressed continuously during the program. In other words: you do not have to worry if important talks ‘slip’, or whether you do not manage to cover all relevant issues, or address relevant topics in one session. Most likely, the next session will offer an opportunity to follow up on this. Do however use the possibility to write what you want to bring to the next session under ‘Notes’.

It is our experience that practicing the flow in each session and how you want to present it to the clients that you will be working with gives a much better impression of how to best work with the workbook before meeting the clients. This will give you a better idea of how you can use the workbook, what challenges you might meet when addressing the themes in the workbook, and how you can meet these challenges in the best way possible. We recommend that you role play the sessions with a colleague, and that you act out the role play with some of the clients that you think you will be working with.

### **Supervision**

Using the workbook supports you in addressing problems and challenges related to antisocial behavior. However, addressing this also elicit reactions that are not always easy to deal with. When you engage in working with antisocial behavior, you may experience that some parts of the workbook will be easy and simple to present and work with. You may also experience that other sections in the workbook may elicit strong reactions from the client, and that this can be very challenging for you! As in most other interventions, not all sessions will go smoothly, and you may



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feel insecure, uneasy, or that you have lost your focus. These are not signs of failure, but rather indications that you are engaged in a conversation with a client about some very sensitive issues, that the client may be more or less able to respond to and work with. We would like to emphasize here that we do not consider strong reactions to engaging in conversations that address antisocial behavior as something negative. Reacting by being on guard or feeling rejected by a client who is manipulating or lying is a healthy and normal reaction, as is reacting with feelings of helpfulness to a client who needs comfort and support. As such, reactions may be a reasonable reflection of what is taking place during the sessions, and may give you an opportunity to remain authentic and realistic while you are in contact with the client. However, it is important to make diagnostic and therapeutic use of your reactions during sessions or while working with a specific client. To support the quality of the interventions, we strongly recommend that you establish a professional forum where you can reflect on what took place during each session, how you feel about it, and possible ways to handle this in your future work.

### **Your role – tips and tricks**

Your task in conducting the program is simply to follow the workbook and keep the client on track. The aim of the Impulsive Lifestyle Counselling program is communicated on two levels: in the workbook and in the way you communicate the approach in the Impulsive Lifestyle Counselling program. In other words: follow the workbook; communicate it; perform it.

### **Facilitating the sessions**

The aim of the Impulsive Lifestyle Counselling program is to support the client in awareness raising and finding the motivation to make lifestyle changes. The aim is also to support you in doing this. In order for this to succeed, it is important that the client understands the themes and activities that are addressed, and is able to relate to his or her own life. Therefore, avoid getting sidetracked and engaging in irrelevant discussions, but do answer any questions from the client in order to clarify and to improve the client's understanding of what the focus and intent of the session is that day.

Try to be as specific as possible. If the themes are too abstract, it is difficult to come up with material that you can work with. Try to elicit and address specific examples from the client's everyday life before you continue to the next step in the session. Simple examples also serve as good work assignments in later session activities and homework.

### **Staying within the time frame**

All of the sessions last for one hour. To manage this, you must adhere to the outline of each session as described in the workbook. If it is not possible to complete the session within one hour, it is better to spend ten more minutes rather than rushing through the session. If this is not possible, then it is better to split the topic of conversation into two sessions.

Some people with behavioral difficulties are very talkative, and some will digress continuously. While the counsellor should always remain polite and respectful, the responsibility of the counsellor to the client is not to be a conversation partner or to provide psychotherapy, but to assist the client in working through the exercises in the workbook.

### **Matching the individual client**

Although the criteria for antisocial personality disorder describes behavioral characteristic, people with this disorder are not a heterogeneous group. They differ in antisocial behavioral characteristics and the levels of severity that these characteristics have.

It is important to be aware that the clients that you work with may differ in personality in other ways. Maybe they suffer from another comorbid disorder, such as anxiety, depression, ADHD, or other personality disorders. Maybe they differ in level of everyday life functioning, and in cognitive abilities. Your role is to follow the workbook, and make sure that you communicate it in a way that suits the individual, so that he or she understands what is taking place, and can identify with the themes that are targeted in the sessions. Remember to be sure that the client understands before you move on to the next part of the session. You might ask, “Are you ready for us to move on?” or “Is it okay if we continue?”

### **Resistance**

It is not always easy to engage in awareness raising and change processes. Many clients with antisocial personality disorder will react during the session and exhibit resistance in different ways. If the client starts to digress, go off on a tangent, or put the blame on others, direct the client’s attention to the fact that it is the client who is important, and that the objective of Impulsive Lifestyle Counselling is to support awareness of counterproductive behaviors and consider changing them in order to improve his or her life situation. We cannot change the world, but we can change ourselves.

### **Crisis intervention**

Sometimes, if the client is facing an urgent crisis, you may find that it is not realistic to work on the designated topic during the entire session. In such cases, we recommend that you spend the hour on crisis management and facilitate motivation for continuing in the program, and set a new time for the next meeting. It is possible that aspects of the approach and tools presented in the Impulsive Lifestyle Counselling program may be of use in the approach to the crisis management and facilitation of motivation to continue working with the impulsive lifestyle. However, even in such instances, it may be useful to have a brief and polite talk with the client about the role of impulsivity and poor decision making in the current crisis, or in relation to preventing future crises. However, it is crucial that the client is allowed to determine whether or not he or she will conclude that impulsivity played a role in the current situation, and that the talk aims to clarify the issue, not to convince the client of the counsellor’s viewpoint.

### **Homework**

Homework must not be a stress factor. Many people with antisocial personality disorder have a history of problems with school, including school performance and school assignments. Therefore, it should not be presented as a chore or exam, but as a possibility for the client to keep the focus on what he or she has stated as important reasons for participating in the program. If the client expresses

reservations about doing the homework, ask why, and try to accommodate the client, that is, to find a way to work on the homework that suits the individual client. Remember also to emphasize what the idea behind doing the homework is to pay attention in the client's everyday life and not during the sessions only. You might ask whether he or she has had any previous experience doing homework, such as at school experiences, and what would be the best way to do the homework in the program.

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## Session 1. Introduction, goals and the four areas

Name \_\_\_\_\_ Date \_\_\_\_\_

### Resources

White board or paper, writing instruments, handouts, worksheets, homework assignments

### Objective

1. Present an introduction to the Impulsive Lifestyle Counselling program
2. To talk about an impulsive and problematic lifestyle
3. To formulate client goals

### Activities

1. Introduction of the counsellor and the client
2. Talking about hopes and dreams
3. Objectives of the program
4. Work with the four areas related to an impulsive lifestyle
5. Talk about the client's goals
6. Closing the session
5. Homework assignment
6. New appointment

### Introduction of the counsellor

The objective of the first part of this session is simply to introduce yourself to the client. Try to keep this on the brief side, and of course you should not introduce yourself if the client already knows who you are. Some ideas would be to mention the following:

- Your name
- How long you have been working at your current workplace, and who you typically work with (e.g., homeless youth, people who use drugs or alcohol, people on parole or probation).

*Hello. Welcome to the first session of the program called Impulsive Lifestyle Counselling.*

*My name is ..... and I work as a .....here at .....*

*I have been working with people who have problems with impulses for the last..... years, and have learned about Impulsive Lifestyle Counselling so I can guide these sessions.*



## Mood check

Each session starts with a mood check. This is done for two reasons: (1) To draw attention to the client's mood before the session so that you do not presume to know how the client is feeling. (2) To train the client to stop to ask him or herself how he or she is feeling.

*How do you feel about having to talk with me?*

Listen to the client with an open mind. If he or she expresses strong reservations, make it clear that the client is welcome to leave the program at any time, and ask permission to tell about what will be the focus for this session.

Explain the objective of the Impulsive Lifestyle Counselling program. Do not enter into a discussion, but inform the client of the objective.

*You have decided to participate in the Impulsive Lifestyle Counselling program. You have probably already heard a bit about what the program is about, but I would like to tell you briefly about the objective of the program.*

*In the Impulsive Lifestyle Counselling program, we will talk about what you can do when you have problems with impulsive thinking and behaviors. We think that if you can better understand your impulsive lifestyle, there will be a better chance that you will experience fewer problems in your life. This could be for example problems with drugs, family, friends, and crime. It can also be problems with completing things that are important to you, or problems with trying to take short cuts that end up becoming annoying detours.*

*There are six sessions in Impulsive Lifestyle Counselling program. Each session lasts for about one hour. The first five sessions take place once a week over the next five weeks, and then there is a follow-up session six weeks later.*

*In order for you to get the most out of the program, it is important that we both try to work within this framework. Of course unexpected things may happen, such as illness, which means that we have to postpone one of the sessions, then we will have to try to set up a new appointment as soon as possible.*

## Talking about hopes and dreams

The objective of this part of the session is to give the client the opportunity to present him/herself and his or her hopes and dreams. This gives you an understanding of what is important to the client, and also gives you an idea of what motivates him/her, and how you can work with this information in the sessions.

*First we are going to talk about your dreams for your life.*

*People's dreams are important! What you dream of is what drives you. Even though dreams cannot always be realized, they show something about what is important to you.*

*Please tell me about two things that you have dreamed of in your life, or that you are still dreaming of now. It does not matter if it is realistic or unrealistic.*

For each dream: Ask why that particular thing is a dream. What is it that makes it valuable?

**Counsellor's notes.**

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

**Objective of Session 1: relevance of the program**

The objective of the program is to help the client to identify the impulsive thinking and behavior that are causing problems. Before you explain the objective of the Impulsive Lifestyle Counselling program, ask the client why it makes sense to him/her to work with an impulsive lifestyle.

*Let's talk about why it is important to work on changing an impulsive lifestyle.*

*Before I explain the objective of this program, I would like to hear your ideas. Why do you think it is important to work with your impulsive lifestyle?*

Take notes and remember to encourage the client's participation by saying "yes", "good", etc.

**Counsellor's notes:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Show the client Handout 1 which states the objective of the program (see the next page).**

*Here is a handout that tells about the objective of the Impulsive Lifestyle Counselling program.*

**"The objective of Impulsive Lifestyle Counselling is to help you identify the behaviors that get you into trouble with drugs, alcohol, other people, and the law, and help you decide if you want to change your behavior so that you get less into trouble."**



## Impulsive Lifestyle Counselling

Being impulsive means doing things or tending to do things suddenly, without careful thought and without considering the consequences. Being impulsive can be a good thing, such as when you can get things done without too much hesitation and thinking repetitively. Sometimes, you can enjoy living in the moment and being spontaneous. However, impulsivity can be a bad thing if you realize afterwards that you should have thought through the situation before acting. Too much impulsivity can get you into trouble – when you find yourself arrested, thrown out of your house, or without any money left at the end of the month.

*By becoming aware of your impulsive ways of thinking and acting, you will be able to address how your impulse lifestyle can create problems for you, and how you can work on changing it.*

## **Handout 1. Objective of Impulsive Lifestyle Counselling**

**The objective of Impulsive Lifestyle Counselling is to help you identify the behaviors that get you into trouble with drugs, alcohol, other people, and the law, and help you decide if you want to change your behavior so that you get less into trouble.**

## The four areas

Go through the four areas in the worksheet on the next page, and ask the client to come up with examples from each area. Remember to give positive responses to the client's attempts. If the client hesitates or shows resistance, then ask which of the areas he or she is most familiar with, or which creates the most problems in his or her daily life. If the client does not recognize himself in one of the areas: do not force an answer, but name some examples for each area (see below) and see if this helps the client come up with something. You may also name some specific examples that are close to the client's real life situations. It often helps to be as specific as possible.

Write the client's examples down in each square. Again, try to make them as specific as possible.

**Show the client Worksheet 1 with the table of the four areas (see next page).**

*Now we are going to work with four areas that are important for people usually have trouble with impulsive actions. I would like you to tell me if you can recognize yourself in some of these areas and come up with examples from your daily life.*

- 1. Self-indulgence** – Acting to meet your own needs without any sort of moderation (drug abuse, gambling, relationships, being impatient and aggressive when you have to wait for your turn, such as in a supermarket or when medicine is dispensed).
- 2. Breaking rules** – Breaking the rules of conduct or law in a given environment (harming or offending others by not following common social rules, deviant behavior, and criminal violations).
- 3. Interpersonal intrusiveness** – Acting in a way that does not respect the rights of others (injuring or offending others, for example hurting or taking advantage of others, abusing family, friends, or others, and using or threatening to use a weapon).
- 4. Irresponsibility** – Failing to keep your commitments to yourself and others in a socially acceptable way (not paying child support, finishing high school or other forms of education or training, not finishing projects, not keeping appointments with others, not holding a steady job, and not being a responsible employee).

**Worksheet 1. The four areas**

**Self-indulgence –**

Acting to meet your own needs without any sort of moderation

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**Interpersonal**

**intrusiveness** – Acting in a way that does not respect the rights of others

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**Breaking rules** - Breaking the rules of conduct or law in a given environment

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**Irresponsibility** – Failing to keep your commitments to yourself and others

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### Setting personal goals

The objective of the last part of session one is that the client sets some clear goals for him/herself. Emphasize that the goals should be:

- SPECIFIC (TIME BOUND)
- CLEAR (WELL-DEFINED)
- REALISTIC (SENSIBLE)

*In this first part of this session we have been talking about your dreams and the four areas that people often have trouble with when they have an impulsive lifestyle.*

*In the last part of the session, we are going to talk about goals that you can have for yourself and your life. Goals like this are important, because they influence our thinking and behavior, and the way we plan our lives.*

*I would like to ask you to give me some examples of goals that you would like to set for yourself. Try to make them specific, clear and realistic.*

Ask the client to tell about his or her goals, and note whether they are specific, clear, and realistic. Perhaps you can give an example of goals that do not meet these criteria, for example: “Someday I would like to (*not specific or time bound*) turn into an airplane (*not realistic or sensible*) and just fly away from it all (*not clear or well-defined*).

**Counsellor’s notes:** Write down the client’s goals here. Make intermediate goals if this helps the client in making more realistic and specific goals):

### Goals

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### Possible intermediate goals

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## Closing the session

### Homework

Present the homework. Remember to answer any questions from the client if there is something about the homework that is hard to understand. If the client does not think that he or she can answer all of the questions, then ask the client to prioritize the first three questions.

If the client expresses reservations about doing the homework, ask why and try to accommodate the client, that is, to find a way to work on the homework that suits the client. As is written in the introduction, homework should not be a stress factor, but should support the change process and the client's progress. So try to find a method that is suitable for the individual client. You might ask about the client's previous experience with doing homework, such as from attending school. Be aware that some clients may be good at doing the homework, others will need help remembering to do it, and some will take the handout home in order to think through the process, but will first fill out the form completely at the next session.

*Today we have talked about the goals we have for our lives and the behaviors and attitudes that are related to an impulsive lifestyle.*

*You have some homework to do for the next session. Doing the homework can give you a better sense of how you can work toward the goals you have set for yourself that can improve your life.*

*In the Impulsive Lifestyle Counselling program, doing the homework is important. It supports us as we work on making positive changes in our lives in between these sessions. The effort to make changes in your lifestyle happens as you are living your life, and not just while we are sitting here having a conversation.*

### New appointment

Offer a new appointment in about one week. Try to find a time when it is most convenient for the client to come.

## Complete counsellor's session checklist



**Homework: Goals**

Name \_\_\_\_\_ Date \_\_\_\_\_

**Question 1:**

In the first Impulsive Lifestyle Counselling session we have talked about setting personal goals. We have also talked about how goals that are clear, specific, clear and reachable are easier to achieve. Write three goals that you have for your life. They can be the same ones that we have talked about during the session.

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_

**Question 2:**

Write at least three things that can make it difficult for you to reach your goals.

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_

**Question 3:**

Write at least three things that you can do to deal with the things that make it hard for you to reach your goals.

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_

### **Counsellor's session checklist**

(Check off the items you have completed)

- “Mood check” – you have asked how the client is feeling here and now
- Introduced yourself
- Been introduced to the client
- Talked about the objective of this program
- Talked about dreams
- Gone through the four areas
- Talked about personal goals
- Closed the session
- Homework
- New appointment

**Your notes for this session:**

## Session 2. Introducing the Trigger-Action-Consequence model (TAC model)

Name \_\_\_\_\_ Date \_\_\_\_\_

### Resources

White board or paper, writing instruments, handouts, worksheets, homework assignments

### Objectives

1. Introduce the TAC model
2. Work with the TAC model
3. Reinforce the client's experience of personal responsibility for his or her own actions

### Activities

1. Review of the homework
2. Introduce the TAC model
3. Work with the TAC model
4. Closing the session
5. Homework assignment
6. New appointment

### Mood check

Start the session with a mood check. This is done for two reasons: (1) To draw attention to the client's mood before the session so that you do not presume to know how the client is feeling. (2) To train the client to stop and ask him or herself how he or she is feeling.

*Hello. Welcome. How are you feeling right now?*

Let the client explain and show interest, but do not start problem solving.

### Summarize the first session

Ask the client whether he or she can remember any of what you talked about at the last session. If not, then mention the following key points:

- Reasons for working with an impulsive lifestyle
- Dreams

## Impulsive Lifestyle Counselling

- The objective of Impulsive Lifestyle Counselling is to help identify behaviors that get you into trouble with drugs, alcohol, other people, and the law, and help you decide if you want to change your behavior so that you get less into trouble
- The four areas: “Self-indulgence”, “Interpersonal intrusiveness”, “Breaking social rules” and “Irresponsibility”
- Goals – clear, time-specific, and realistic

### **Homework from the first session**

Let the client tell you about the homework. Ask what the client thought about doing it, and what he or she got out of coming up with the answers. Keep it short and simple.

If the client has not done it, then have a brief talk about the homework and emphasize that the client will get more out of the program (both during and afterwards), when they spend time doing the homework. Mention that there are about 112 waking hours in a week, and that the client is only at the session for one hour. The Impulsive Lifestyle Counselling will not have much effect if the client only works on it during the sessions!

Go through the questions (or do part of the homework now). Talk with the client about how an impulsive lifestyle can challenge the goals that the client wish to reach (the goals that you talked about during the first session), and how these challenges can be met.

### **Objective for Session 2: The TAC model**

The TAC model – trigger, action, consequence – is the model that the client uses to work more specifically with how the impulsive lifestyle affects his or her everyday life, and practices how to use it to make changes in his or her daily life.

*Today we will be focusing on how problems arise when you have an impulsive lifestyle.*

### **Show the client Worksheet 2 with the TAC model.**

*This is what we call the TAC model. This model can be used to make the consequences of our actions clearer.*

*This is how the model works. A bomb has a trigger (T for trigger). When the trigger mechanism is activated, the bomb explodes (A for action), and then there is trouble (C for consequence). T-A-C!*

*You can use the TAC model to look at your impulsive actions and the problems that they have led to. And then you can think about whether it is possible to stop, and count to ten, and see if you can react in a way that causes less stress and fewer problems. That is what we are going to work on today.*

- **T stands for Trigger – What was it that set off the bomb? It can be a situation from the past, the present, or something you think will happen in the future.**
- **A stands for Action – How did the bomb explode? How did you act in the situation? How did you act impulsively?**
- **C stands for Consequence – What happened after the bomb exploded? What was the consequence of the way you acted? What did it cost you or others?**

### **Working with the TAC model**

The objective of working with the TAC model is that the client understands how the model works and how to make use of it in his or her daily life.

First, explain how the model works. This is done by going through one or two of the examples already written in the model, and writing the TACs for each situation. Go through one or two of the written examples that resemble the client's own problem areas. Make sure that the client has understood the TAC model before you start working on examples from his or her daily life.

#### **Show the client Handout 2 with the exercises on the TAC model.**

*Now we are going to work with a situation that demonstrates how you can use the TAC model.*

*As I said, you can use the TAC model to make the consequences of your actions clearer. In this way, you can work on making choices that are better for you in the long term. Let's work on some examples together.*

Next, work with some examples from the client's daily life. At this point, there are often several examples from the client's life that you can draw on based on what you have talked about in this and the previous session. It does not matter whether you start off by referring to the previous examples, or whether you choose to work with the new examples that come up during today's session; the main objective is to focus on supporting the client in working with particular problematic themes for clients with an impulsive lifestyle:

- Relationship with partner
- Parenthood
- Misuse
- Gambling
- Theft
- Offending others
- Violation of the law
- Lying

*Now try to give some examples from your own daily life.*

## Handout 2. TAC model



### **TAC!**

**T = Trigger:** What set off the bomb? It can be a situation from the past, present, or something you think will happen in the future.

**A = Action:** How did the bomb explode? How did you act in the situation? How did you act impulsively?

**C = Consequence:** What happened when the bomb exploded? What was the consequence of the way you acted? What did it cost you or others?

## Worksheet 2. Exercises with the TAC model

### TAC!

**T = Trigger:** What set off the bomb? It can be a situation from the past, present, or in the future.

**A = Action:** How did the bomb explode? How did you act in the situation? How did you act impulsively?

**C = Consequence:** What happened when the bomb exploded? What was the consequence of the way you acted? What did it cost you or others?



| Situation   | Trigger   | Action                     | Consequence   |
|---|---|----------------------------|---|
| Mike finds out from his case worker that there is no money left for him this month. Mike shouts and threatens the case worker before he leaves.                             | Gets no for an answer, is turned down, no more money. | Shouts, threatens, leaves. | No money, bad mood, conflict with caseworker, frightens others. |
| Stephen has just been released from prison. On the way home, he stops and buys some drugs and alcohol, and comes home to the family under the influence.                    |   |                            |   |
| Joan has an appointment with her best friend Ann. Ann does not show up. Joan yells and blames Ann over the phone. Ann stops answering Joan's calls and starts to avoid her. |   |                            |   |

**Write your own examples.**

| Situation | Trigger | Action | Consequence |
|-----------|---------|--------|-------------|
|           |         |        |             |
|           |         |        |             |

## After the TAC model exercise

*To sum up, you can use the TAC model to review your actions and take an honest look at the problems and consequences that they have resulted in.*

### Having a choice

In the next part of this session, focus in on looking more closely at the client's options and responsibility for making choices that are not as impulsive and destructive.

*A lot of the time people with an impulsive lifestyle justify offending others or committing offenses by saying that they had no other choice. They might also say that they were in the wrong place at the wrong time. Again, the explanation is that they had no other choice in the situation.*

*In the next part of the session, we are going to talk about the options you have to make another choice – a choice that is not so impulsive, and which does not have the same negative consequences for you and those around you.*

*I would like you to think about this example: If you are driving your car and see a red traffic light ahead, you have two options: to run the red light or to stop.*

*How do you decide what you should do?*

Talk about the client's answer for a while. If the client does not have a driving license, then ask the client to imagine what he or she would do.

#### Counsellor's notes:

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Some people will say that you decide for yourself whether to drive through a red light or not, while others will not admit that the individual has a choice in the given situation. In both cases, continue by summing up the individual's choice:

*Part of the answer to what determines what we do when we decide whether to run the right light or stop is that we decide what action we will take.*

*This means that we decide whether we are willing to risk getting involved in an accident. And we also risk that others could be involved – that is, the people we hit with the car.*

*But that is only part of the answer. Now I would like to hear your thoughts about what can influence your decision to run a red light, even if you had already decided not to?*

#### Counsellor's notes:



If it is difficult for the client to answer, use one of the following examples. Choose the one that makes the most sense in the situation.

Running a red light depends on:

- How busy the driver is.
- Whether the driver has seen the red light or was too intoxicated or under the influence of drugs to notice it.
- Whether the driver thinks about it at all, or it is just something that he or she does spontaneously.
- Whether the driver has become impatient at having to wait for the light to turn green.
- Whether the driver thinks that nobody can see him/her running a red light anyhow.
- Whether the driver has loud music pounding in the headphones or speakers – in such cases, one might feel tempted to ‘slip’ through a red light.

Emphasize what all of these examples have in common when a driver suddenly decides to step on the accelerator and run through a red light.

*What is important here is that in all of the examples, it is the driver who steps on the accelerator. It is the driver who decides whether to run a red light, or whether to stop and wait for the green light. It is the driver who reacts to whatever triggers him/her and decides how to act.*

*The example also shows that if you do not know what triggers you, there is a greater probability of reacting impulsively and ‘running through red lights’ without having control over the consequences.*

Write the examples in the TAC model if you think it might help the client.

| <b>Situation</b>     | <b>Trigger</b>  | <b>Action</b>                    | <b>Consequences</b>  |
|----------------------|---|----------------------------------|--|
| There is a red light | You get stressed, because you are in a rush to get to an appointment. | You drive through the red light. | You fail to notice another driver and run into him. He is injured. The hospital and police are involved. You do not make your appointment. |

### Typical triggers in everyday life

In the next part of the session the focus is on talking about typical triggers in the client's own life.

#### Show the client Handout 3 with typical triggers for acting impulsively

*Next, we will look at triggers that have nothing to do with driving through a red light, but deal with the situations from your everyday life.*

*On this handout there are some examples of such triggers. The examples are what other people with impulsive lifestyles have said that they are familiar with. Are you familiar with any of these?*

- Thirst for revenge
- Testing whether a rule applies
- Jealousy
- Holding someone in contempt for being too stupid
- A rule is stupid
- Thinking that I need the money/object
- Thinking that I can get away with it without being discovered
- Someone is trying to tell me what to do
- Boredom
- Others do not respect me
- Others underestimate me
- Having to wait in line, for example, or for someone who is delayed

Mark the examples that the client is familiar with, and with more detail, if possible:

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**Handout 3. Typical triggers for acting impulsively**

**Thirst for revenge**

**Testing whether a rule applies**

**Jealousy**

**Holding someone in contempt for behaving in a stupid way**

**A rule is stupid**

**Thinking that I need the money/object**

**Thinking that I can get away with it without being discovered**

**Someone is trying to tell me what to do**

**Boredom**

**Others do not respect me**

**Others underestimate me**

**Having to wait in line, for example, or for someone who is delayed**

## Telling the trigger from the action

In the next section, focus is on explaining why it is important to make a distinction between the impulsive action and the trigger.

*If you have an impulsive lifestyle, you often act without thinking about possible negative consequences. When you have to explain your actions, you say, for example: "I took the object/thing, because it was just lying there." Or: "I hit him, because he provoked me." Does this seem familiar to you?*

Next, talk about whether the client has experienced situations, in which the triggers and actions seem to be one single incident. That is, it feels as if there is no time to make a choice - things just happen. Refer to an example that the client gave when you introduced the TAC model, or in your conversations at previous sessions.

*In order to have the opportunity to choose differently and reduce the negative consequences of our actions, we need to be able to make a distinction between the trigger and our action. Using the examples from past sessions, we need to be able to say: "The object was just lying there, AND I took it." Or, "He provoked me. AND I hit him."*

*When you make a distinction between the trigger and your action, you realize that you have a choice. You can choose whether you will take the object or not. Or you can choose whether you will hit someone or not.*

*In both examples, it is important to realize that it is **your choice**. And the choice that you make is a choice that you have more control over, and that gives you more influence on the consequences.*

## Closing the session

### Homework

Present the homework. Remember to answer any questions from the client if there is something about the homework that is hard to understand. If the client does not think that he or she can answer all of the questions, then ask the client to prioritize the first three questions.

If the client expresses reservations about doing the homework, ask why and try to accommodate the client, that is, to find a way to work on the homework that suits the client. As is written in the introduction, homework should not be a stress factor, but should support the change process and the client's progress. So try to find a method that is suitable for the individual client. You might ask about the client's previous experience with doing homework, such as from attending school. Be aware that some clients may be good at doing the homework, others will need help remembering to do it, and some will take the handout home in order to think through the process, but will first fill out the form completely at the next session.

*We are going to finish up for today. Today we have been working on what can trigger you in a situation, and what consequences your actions can have for you and for others. We have also looked a bit at why it is necessary to distinguish between the trigger and the action, which is to give you a choice. You have some homework to do for next time. The homework is to continue working with the TAC model. You should come up with some ideas as to how you can act differently, so that the consequence of your actions creates fewer problems for yourself and others.*

Give an example of a different action in the same situation, so that he or she starts thinking of alternative ways of reacting in response to triggers and remembering to 'keep it together').

*Let's come up with an example together. Then you can continue working on the assignment at home. At the next session we will talk about what you have thought about and written for the homework assignment. I am looking forward to seeing what you have done!*

### **New appointment**

Offer a new appointment in about one week. Try to find a time when it is most convenient for the client to come.

### **Complete counsellor's session checklist**



**Homework: The TAC model**

Name \_\_\_\_\_ Date \_\_\_\_\_

**T = Trigger:** What set off the bomb? It can be a situation from the past, present, or in the future.

**A = Action:** How did the bomb explode? How did you act in the situation? How did you act impulsively?

**C = Consequence:** What happened when the bomb exploded? What was the consequence of the way you acted? What did it cost you or others?

| Situation   | Trigger   | Action                     | Consequence   |
|---|---|----------------------------|---|
| Mike finds out from his case worker that there is no money left for him this month. Mike shouts and threatens the case worker before he leaves. | Gets no for an answer, is turned down, no more money. | Shouts, threatens, leaves. | No money, bad mood, conflict with caseworker, frightens others. |

**Examples from your own life**

| Situation | Trigger | Action | Consequences |
|-----------|---------|--------|--------------|
|           |         |        |              |
|           |         |        |              |

**How can I react differently? How can you tell yourself to “keep it together”? Use the same situations as those you have listed above.**

| Situation | Trigger | Action | Consequences |
|-----------|---------|--------|--------------|
| (Same)    | (Same)  | (New)  | (New)        |
|           |         |        |              |
| (Same)    | (Same)  | (New)  | (New)        |
|           |         |        |              |

### **Counsellor's session checklist**

(Check off the items you have completed)

- “Mood check” – you have asked how the client is feeling here and now
- Summarized the last session
- Reviewed homework
- Introduced the TAC model
- Worked with the TAC model
- Talked about having a choice
- Talked about typical triggers
- Talked about telling the trigger from the action
- Closed the session
- Homework
- New appointment

**Your notes for this session:**

## Session 3. Streetwise Pride

Name \_\_\_\_\_ Date \_\_\_\_\_

### Resources

White board or paper, writing instruments, handouts, worksheets, homework assignments

### Objectives

1. Talk about previous impulsive and antisocial actions
2. Increase understanding of offences related to streetwise pride
3. Increase understanding of how streetwise pride is related to self-esteem
4. Present ways to change streetwise pride and related self-esteem

### Activities

1. Review the homework from the second session
2. Talk about previous impulsive and antisocial behaviors.
3. Talk about streetwise pride and self-esteem
4. Closing the session
5. Homework assignment
6. New appointment

### Mood check

Start the session with a mood check. This is done for two reasons: (1) To draw attention to the client's mood before the session so that you do not presume to know how the client is feeling. (2) To train the client to stop to ask him or herself how he or she is feeling.

*Hello. Welcome. How are you feeling right now?*

Let the client explain and show interest, but do not start problem solving.

### Summarize the second session

Ask the client whether he or she can remember any of what you talked about at the last session. If not, then mention the following key points:

- Introduction to the TAC model
- Going through premade examples and working with examples from the client's daily life using the TAC model



- Typical triggers in daily life
- Differentiating between the trigger and the action

**Homework from the second session**

Let the client tell you about the homework. Ask what the client thought about doing it, and what he or she got out of coming up with the answers. Keep it short and simple.

If the client has not done it, then have a brief talk about doing the homework and emphasize that the client will get more out of the program (both during and afterwards), when they spend time doing the homework. Mention that there are about 112 waking hours in a week, and that the client is only at the session for one hour. The Impulsive Lifestyle Counselling will not have much effect if the client only works on it during the sessions!

Go through the questions (or do part of the homework now). Talk with the client about how the client could react more appropriately to the situations from daily life that he or she has given.

When you have reviewed the homework or gone through some examples at the start of this session, then you can continue working with them during rest the session. If the client has already suggested some other actions and consequences, start with those. If appropriate, use the TAC table below.

**How could I act differently in the same situation? How could I keep it together?**

| <b>Situation</b> | <b>Trigger</b> | <b>Action</b> | <b>Consequenses</b> |
|------------------|----------------|---------------|---------------------|
| (Same)           | (Same)         | (New)         | (New)               |
| (Same)           | (Same)         | (New)         | (New)               |

**Objective of Session 3: Honesty and responsibility for behavior and consequences**

The objective of this session is to support the client in talking honestly about previous behavior and activities, and for him or her to acknowledge that others have been offended by his or her actions.

## Impulsive Lifestyle Counselling

Another objective is to talk about how pride related to this kind of behavior is also related to self-esteem. In treatment terminology, it is referred to as taking ownership of one's own behavior.

When working with people with antisocial personality disorder who have an impulsive lifestyle, one of the greatest challenges is to support them in being honest about their behavior. Some people like to boast about their earlier actions; sometimes they do this in order to avoid feeling shame or other unpleasant feelings, or to maintain a feeling of positive self-esteem. Below are some examples of why people with antisocial behavior are not willing to look at and accept ownership of their behavior:

- It is painful to think that you have injured someone else
- The client has lied so many times that lying comes automatically
- Fear of accepting responsibility
- Loss of image of oneself as being a 'good person'

When you talk about impulsive or antisocial behavior, it is important that you maintain focus on the client, and do not enter into a conversation about whether the client acted just like others would have done under similar circumstances. If you downplay the client's responsibility, he or she will find it more difficult to take responsibility for his or her behaviors and to change them.

This session can provoke the client, because it focuses on self-image and self-confidence, which make him or her feel highly vulnerable. It is very possible that some strong reactions come up during the session. If the client begins sidetrack, go off on a tangent, or place blame on others, make the client aware that Impulsive Lifestyle Counselling is a way of supporting awareness of counterproductive behaviors and encouraging the client to change the behavior in order to improve his or her life situation. We cannot change the world, but we *can* change ourselves.

*Today we are going to talk about how to solve your problems, and how you act when you are together with other people. These are some areas that can be difficult when you behave very impulsively.*

*First I would like to ask about how you handle your problems.*

- 1. Have you ever defended your actions by blaming others or society? For example, by saying: "I would not have acted like I did if I had not been unemployed." or "I only did what I've learned from my friends."*
- 2. Do you react with anger when you run into a difficult situation?*
- 3. Have you used drugs or alcohol to deal with frustration or anger?*

Ask the client to answer each of these questions. Write key words here, and use your previous work using the TAC model if you find that it supports you:

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

*Now I would like to ask about your relationships with other people.*

- 1. Do you look at them as enemies or competitors that you have to defend yourself against?*
- 2. Do you think that you can 'lose face' in front of them, if you do not make sure to be the one who is in charge or is proven right?*
- 3. Have you ever tried to gain power and control over others by thinking "I like to get a lot of attention, and when I have drugs on me or am under the influence, then I get that attention." or "Fuck that. I don't care", and continue with what you are doing, even if you know that you will offend others?*

Ask the client to answer these questions. Write key words here, and use your previous work using the TAC model if you find that it supports you:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### **Streetwise pride**

Focus in this part of the session is on the kind of pride that can create problems for the client. Within Lifestyle Theory, this pride is not a 'wrong' way of thinking, but is a useful way of working with the reasons for the client's objections or resistance to awareness raising and engaging in lifestyle changes – resistance that can turn up in treatment or outside of treatment. We have chosen to call this kind of pride "streetwise pride". Examples of what we call streetwise pride are when an individual

engages in fighting, brags, refuses to admit ignorance, deals with drugs, boasts of criminal achievements, or denies to have offended others, and maintains that his or her actions are justified and/or better than those of others. One of the key terms associated with streetwise pride is “respect” – that is, the focus on and expectation of gaining respect from others through impulsive behavior and also by not being shown disrespect, regardless of whether this behavior offends others.

**NOTE!** It is important to be aware that streetwise pride can vary from client to client. For example, clients who have been members of a gang, and have perhaps had a higher position in the gang’s hierarchy, associate streetwise pride with not bragging about their achievements. Therefore, spend some time examining the individual client’s experience of what streetwise pride means to him or her. If the client begins sidetrack, go off on a tangent, or place blame on others, make the client aware that Impulsive Lifestyle Counselling is a way of supporting awareness of counterproductive behaviors and encouraging the client to change the behavior in order to improve his or her life situation. We cannot change the world, but we *can* change ourselves.

**Show the client Handout 4 about streetwise pride.**

*I would like to tell you about a way of thinking about yourself that can make it difficult to change the habits and behaviors that are a part of an impulsive lifestyle. What I am talking about is something called ‘streetwise pride’. (Go through the handout)*

*So, streetwise pride can be described as a way of looking at yourself that helps to give you self-confidence.*

*You might think that this is a strange way to describe it, but it illustrates that the way of thinking exists whether or not you get into trouble, are arrested, tried, and convicted, or not. You may also call it something else, such as..... (Replace with another word with the same meaning, if this makes more sense to the client), as long as it refers to the same definition.*

**Streetwise pride is a way of thinking that gives self-confidence through actions that break rules and do not respect the rights of others, regardless of whether you are caught doing it or not.**

**Streetwise pride can also be thinking that you are smarter, better, or more skilled than others, because you are not afraid of committing crimes, cheating the system, or manipulating others.**

**Some people show their streetwise pride to the outside world - others keep their streetwise pride to themselves.**

## Handout 4. Streetwise pride

**Streetwise pride is a way of thinking that gives self-confidence through actions that break rules and do not respect the rights of others, regardless of whether you are caught doing it or not.**

**Streetwise pride can also be thinking that you are smarter, better, or more skilled than others, because you are not afraid of committing crimes, cheating the system, or manipulating others.**

**Some people show their streetwise pride to the outside world - others keep their pride to themselves**

### Working with streetwise pride

In the next part of the session, your task is to support the client as he or she examines how streetwise pride can show up in daily life, and how it can counteract his or her goal of changing the impulsive lifestyle.

When you ask whether the client is familiar with streetwise pride, go through one example at a time from the box below.

*If streetwise pride is important to you, it can interfere with your goal of having a better life with less stress, fewer problems, and less substance use. This means that you continue with the impulsive behavior that you are already familiar with and feel comfortable with.*

*Here are some examples of how streetwise pride can show up in your daily life:*

*- That you brag about your 'cool' actions and achievements or compare them with others (theft, dealing drugs, fighting, having a 'good rush', etc.)*

*- That you speak about 'respect' in a way that shows that you expect others to respect you, even if you do not respect them or you offend them.*

*- That you say that one kind of offence is acceptable compared to other offences. For example, stealing is fine, but offending others sexually is not. In reality, 'stealing' other people's rights is also an offence.*

*- That you secretly think that you are better than others, because you believe that you are smarter than them, or because you think that you are able to scheme against or cheat them.*

*Do any of these examples seem familiar? Or do you have some other examples?*

Write the client's answer below. If the client is not familiar with these behaviors, then spend some time asking about what the client associates with streetwise pride, and how he or she demonstrates this form of streetwise pride. For example it may be that not boasting about theft is associated with pride for this particular client:

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Next, use the TAC model to support working with specific everyday life examples of the client's streetwise pride. In the box where the trigger is, you this time both describe the trigger and the streetwise pride that played a major part on the trigger. If it makes sense and helps you, you can refer to the typical triggers for acting impulsively that you worked with in Session 2.

### Show Worksheet 3 about streetwise pride and the TAC model.

*Now we are going to use the TAC model again to work with streetwise pride.*



## Impulsive Lifestyle Counselling

*Can you remember a situation when someone did not respect you? How did you react? What was the consequence? Based on the examples you have given from your own everyday life situations, would you say that you acted out of streetwise pride?*

Let the client explain and show interest, but do not start problem solving.

**Worksheet 3. Streetwise pride and the TAC model**

| <b>Situation</b>   | <b>Trigger</b>  | <b>Action</b>                     | <b>Consequence</b>   |
|--|---|-----------------------------------|--|
| <p>Mike finds out from his case worker that there is no money left for him this month. Mike shouts and threatens the case worker before he leaves.</p>                             | <p>Gets no for an answer, rejection, no more money.</p> <p><b><u>Streetwise pride:</u></b> Felt that he did not get the respect and treatment that he deserved.</p> | <p>Shouts, threatens, leaves.</p> | <p>No money, bad mood, conflict with case worker, scares others.</p> |
| <p>Joan has an appointment with her best friend Ann. Ann does not show up. Joan yells and blames Ann over the phone. Ann stops answering Joan's calls and starts to avoid her.</p> |   |                                   |  |
|  |   |                                   |  |
|  |   |                                   |  |



Next, ask which of the following reasons is the most relevant for the client.

*Can you name three reasons why having streetwise pride has appealed to you?*

Write the answers here:

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Streetwise pride and self-confidence**

In the last part of the session, the objective is to talk about how the client's self-confidence is connected with his or her streetwise pride. People with antisocial personality disorder often have a completely different view of what self-confidence is compared with most others. The problem here is that they base much of their self-esteem and positive feelings on behavior that offends and violates the rights of others, and on behaviors which can cause them more hurt than good.

Self-esteem is a term that is often misunderstood as a term for 'feeling good about oneself'. Note that in this context, self-confidence should *not* be understood as an inner feeling, such as self-worth, but as a sense of being of value on account of one's behavior: self-esteem is based on the individual's past behavior and beliefs about those behaviors. So, self-esteem comes from doing, not from an innate feeling.

The focus in the following is to support the client to talk about their sources for self-esteem, and how they derive a personal sense of pride. That is, start relating to which actions and behaviors are associated with his or her streetwise pride and self-esteem.

*Streetwise pride is closely associated with self-esteem and the experience of being of value because of one's behavior.*

*Self-esteem is based on actions that we are proud of. We gain self-esteem through things that we think we are good at. Therefore, if you are proud of your impulsive lifestyle, you will gain self-esteem through actions that are associated with an impulsive lifestyle.*

*At the same time, the impulsive lifestyle plays a big part in maintaining the problems that you are experiencing in your life.*

## Impulsive Lifestyle Counselling

In the next part, focus is on supporting the client in becoming aware of how self-esteem can build on actions that *are* socially acceptable or that *are not* socially acceptable. If applicable, make a reference to the client's own examples of illegal or offensive actions that he or she gains self-esteem from. Maybe examples from 'the four areas' in Session 1 or from the TAC model in Session 2 can be of use here.

*Here is an example. A person works as a plumber and feels proud when he or she does a good job and earns his or her own money. But the feeling of self-esteem can also come from making money illegally, such as being good at stealing or selling drugs.*

*In both situations, the person feels good about what he or she does and gains more self-esteem. Can you see the problem here?*

*In the first case, the person who works as a plumber gains self-esteem from earning money in a legal way. In the second case, the person gains self-esteem from making money in an illegal way.*

*Having self-esteem is important for us all! It is also important that the self-esteem is based on something that does not offend others. That is, in something other than streetwise pride and behaviors related to impulsive lifestyle. We could call this positive self-esteem. Are you familiar with that? What do you do to experience positive self-esteem?*

Write some key words here:

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**If there is time left in the session, ask the client:**

*Can you give me some examples of what you think of streetwise pride and self-esteem?  
For example, do you think you that streetwise pride is so important to you that it presents a problem for the changes that you would like to make in your life? Why or why not?*

*Another example is, if you think that you can change the connection between your streetwise pride and self-esteem. Why or why not?*

Write key words here:

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## Closing the session

### Homework

Present the homework. Remember to answer any questions from the client if there is something about the homework that is hard to understand. If the client does not think that he or she can answer all of the questions, then ask the client to prioritize the first three questions.

If the client expresses reservations about doing the homework, ask why and try to accommodate the client, that is, to find a way to work on the homework that suits the client. As is written in the introduction, homework should not be a stress factor, but should support the change process and the client's progress. So try to find a method that is suitable for the individual client. You might ask about the client's previous experience with doing homework, such as from attending school. Be aware that some clients may be good at doing the homework, others will need help remembering to do it, and some will take the handout home in order to think through the process, but will first fill out the form completely at the next session.

*Today we have talked about streetwise pride and self-confidence. The homework from this session has to do with the themes we have already covered in today's session. I am looking forward to seeing what you write!*

### New appointment

Offer a new appointment in about one week. Try to find a time that is most convenient for the client to come.

## Complete counsellor's session checklist

**Homework: Streetwise pride**

Name \_\_\_\_\_ Date \_\_\_\_\_

**Question 1:**

Write about three situations in your life when your streetwise pride was involved.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**Question 2:**

Write three things that you do every day that do not have anything to do with streetwise pride, but with positive self-esteem (self-esteem that is not based on streetwise pride).

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**Question 3:**

Write three actions that you could do daily which are related to positive self-esteem. These should be actions that you do not do now, and that are not related to streetwise pride, but to positive self-esteem.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**Extra question:**

Write at least three sentences about what you think of streetwise pride and the self-esteem that you associate with it. For example, do you think that it can present a problem for you? Why or why not? Or whether you think that you can change your streetwise pride or self-esteem. Why or why not?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

### **Counsellor's session checklist**

(Check off the items you have completed)

- “Mood check” – you have asked how the client is feeling here and now
- Summarized the last session
- Reviewed homework
- Talked about past impulsive and antisocial actions
- Talked about honesty and responsibility for behavior and consequences
- Talked about streetwise pride
- Talked about self-esteem
- Closed the session
- Homework
- New appointment

**Your notes for this session:**

## Session 4. Values that break with the impulsive lifestyle

Name \_\_\_\_\_ Date \_\_\_\_\_ Counsellor \_\_\_\_\_

### Resources

White board or paper, writing instruments, handouts, worksheets, homework assignments

### Objectives

1. Presentation of the 8 values consistent with the impulsive lifestyle
2. Presentation of the 8 values inconsistent with the impulsive lifestyle

### Activities

1. Review of homework.
2. Introduction of the 8 impulsive values
3. Introduction of the 8 positive values
4. Discussion of values
5. Closing the session
6. Homework assignment
7. New appointment

### Mood check

Start the session with a mood check. This is done for two reasons: (1) To draw attention to the client's mood before the session so that you do not presume to know how the client is feeling. (2) To train the client to stop and ask him or herself how he or she is feeling.

*Hello. Welcome. How are you feeling right now?*

Let the client explain and show interest, but do not start problem solving.

### Summarize the third session

Ask the client whether he or she can remember any of what you talked about at the last session. If not, then mention the following key points:

- Streetwise pride
- Overt and covert streetwise pride
- What makes streetwise pride attractive?

### **Homework from the third session**

Let the client tell you about the homework. Ask what the client thought about doing it, and what he or she got out of coming up with the answers. Keep it short and simple.

If the client has not done it, then have a brief talk about the homework and emphasize that the client will get more out of the program (both during and afterwards), when they spend time doing the homework. Mention that there are about 112 waking hours in a week, and that the client is only at the session for one hour. The Impulsive Lifestyle Counselling will not have much effect if the client only works on it during the sessions!

Go through the questions (or do part of the homework now). Talk with the client about how streetwise pride is involved in their life, what he or she does every day that do not have anything to do with streetwise pride, but with positive self-esteem, and new actions that he or she could do daily which are related to positive self-esteem.

### **Objective of Session 4: Values**

The goal of this session is to talk about life values that can challenge or support a change of lifestyle. People with antisocial characteristics often neglect to think about the underlying values behind their actions. Other times they do not have alternatives to the underlying values that motivate an impulsive lifestyle. In this session the focus will be on being aware of what values the client has and which kind of values can be a good support in changing a lifestyle.

### **Eight impulsive values**

In the first part of this session, focus is on the 8 values that often influence thinking and behaviors related to an impulsive lifestyle.

*Today we are going to talk about values.*

### **Show Handout 5 about values.**

*A value can be described as a principle or a quality that we feel is very valuable or desirable for us to have in our lives.*

*A value is something that we think is very important in our lives, and guides our actions, and affects our relationships to other people.*

An example of a value is being healthy. If someone values being healthy, he may think a lot about what he eats, and how much exercise he gets. He may respect others who have a healthy lifestyle.

Another example is valuing fairness. A client who values fairness may be very alert as to whether or not he or others are being treated fairly, and become very upset if he thinks someone is being treated unfairly.

**Handout 5. Values**

**A value is a principle or a quality that is very valuable or desirable for us to have.**

**Values guide our actions and affect our relationships to other people.**



## Impulsive Lifestyle Counselling

The next step is to focus on questions that aim at getting the client to consider whether there are values or principles in his or her life that have created problems for him or her in the past. This is introduced before the principles concerning the impulsive values and principles are introduced, in order to allow the client to think freely first.

*There are values or principles that are more useful or appropriate and some are less.*

*Let's start by talking about the values or principles in your life that are creating problems for you right now. What do you think they are?*

If it is difficult for the client to come up with examples, then use a specific example from something that the client has told about his or her impulsive lifestyle at a previous session. Use these examples to talk about which values that may have guided those actions.

Write key words here:

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### Impulsive values

**Show Handout 6 with a list of impulsive values.**

Take up one value or principle at a time. If the client does not recognize any of the eight impulsive values, ask which of the values seem most familiar, and use that as a starting point. If necessary, refer to the negative values/principles that could be behind examples from the client's daily life which you have already talked about. You may also use an example from your own life in order to make it easier to relate to.

*I am going to read aloud the eight impulsive values or principles that can be associated with having an impulsive lifestyle.*

*I will read one value at a time, and ask you to think about whether you recognize this value, and whether you are living by it at this time. I will also ask how these impulsive values create problems for you.*

Mark each value that the client recognizes and explore what this value means to the client.



## Impulsive Lifestyle Counselling

Write here:

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- **Dishonesty** when it is to my advantage
- Relationships that are **exploitative** for my selfish purposes
- **Keeping things to myself**; hiding who I really am
- **Inability to accept responsibility** for my own behavior
- **Being lazy**, not working to my best potential
- **Ignorance of self** (e.g. not knowing when I'm stressed); denial of a need for change
- **Not wanting** to better myself; denial of a need for increased awareness

**Handout 6. Impulsive values**

**Dishonesty** when it is to my advantage

Relationships that are **exploitative** for my selfish purposes

**Keeping things to myself**; hiding who I really am

**Inability to accept responsibility** for my own behavior

**Being lazy**, not working to my best potential

**Ignorance of self** (e.g. not knowing when I'm stressed); denial of a need for change

**Not wanting** to better myself; denial of a need for increased awareness

## **Eight values that are inconsistent with an impulsive lifestyle**

The goal of this next part is to get the client to relate to the 8 positive values and to consider whether he or she can use some or all of these in order to avoid falling back to the impulsive lifestyle.

*Now I would like to tell you about eight values that can support you and your goal of having fewer problems and reducing your drug use.*

*These eight values are also good to use when you have to judge your own thoughts and actions as well as those of others.*

**Show the client Handout 7 that lists the positive values.**

- **Honesty** - Total truthfulness; no lies of omission or commission; honesty in interaction with others
- **Relatedness (prosocial relationships)** - Relationships with others that do not have a criminal or drug related element; basic polite interactions; non-intrusive relationships
- **Self-Disclosure** - Discussing self-talk and feelings with others; negotiating win-win situations; ability to share “secret thoughts” with others
- **Responsibility** - Accountability for actions
- **Work Ethic (Industriousness)** - Value of legitimate hard work in meeting needs/wants; able to relate healthy psychological states to hard work; pride in legitimate work
- **Self-Awareness (Sentience)** - Able to understand psychological processes; understanding of thoughts and feelings as they relate to behavior
- **Flexibility/Adaptability (Concurrence)** - Ability to evaluate and adjust to the demands of a situation; willingness to receive all information before judging; cognitive flexibility
- **Knowledge seeking (Erudition)** - Enjoyment of self-directed learning; seeking new information for its own sake; expanding perspectives and relationships

## Handout 7. Values inconsistent with an impulsive lifestyle

**Honesty** - Total truthfulness; no lies of omission or commission; honesty in interaction with others

**Relatedness (prosocial relationships)** - Relationships with others that do not have a criminal or drug related element; basic polite interactions; non-intrusive relationships

**Self-Disclosure** - Discussing self-talk and feelings with others; negotiating win-win situations; ability to share “secret thoughts” with others

**Responsibility** - Accountability for actions

**Work Ethic (Industriousness)** - Value of legitimate hard work in meeting needs/wants; able to relate healthy psychological states to hard work; pride in legitimate work

**Self-Awareness (Sentience)** - Able to understand psychological processes; understanding of thoughts and feelings as they relate to behavior

**Flexibility/Adaptability (Concurrence)** - Ability to evaluate and adjust to the demands of a situation; willingness to receive all information before judging; cognitive flexibility

**Knowledge seeking (Erudition)** - Enjoyment of self-directed learning; seeking new information for its own sake; expanding perspectives and relationships

*Which of these values mean something to you?*

If the client does not identify any of the values, ask which one of them seems most familiar and use it as a point of departure. If necessary, refer to values that may have been underlying in specific situations that the client has talked about in the past.

Write down the client's answer. Ask the client to elaborate on what the individual value means to him/her:

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### **Values cannot be ignored whenever it suits you**

Talk with the client about how values need to be applied all of the time and not just sometimes; if we allow ourselves to shift back and forth between values, they can be ignored when we find it convenient in a particular situation.

*Remember that when we talk about values, we are talking about values that are stable. That is to say, that they serve as guidelines that we follow in our actions. We cannot live by our values only when it suits us.*

*How can you use the eight values in your daily life, so that they support you in changing your lifestyle and having less stress and fewer problems?*

Write down the client's answers and try to make them as simple and specific as possible. You can use material from the TAC model for support.

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*Like all new habits, you have to practice how you can apply these positive values in your everyday life. Over time they will become important values for you, and can help you to live your life with fewer problems.*

## Closing the session

### Homework

Present the homework. Remember to answer any questions from the client if there is something about the homework that is hard to understand. If the client does not think that he or she can answer all of the questions, then ask the client to prioritize the first three questions.

If the client expresses reservations about doing the homework, ask why and try to accommodate the client, that is, to find a way to work on the homework that suits the client. As is written in the introduction, homework should not be a stress factor, but should support the change process and the client's progress. So try to find a method that is suitable for the individual client. You might ask about the client's previous experience with doing homework, such as from attending school. Be aware that some clients may be good at doing the homework, others will need help remembering to do it, and some will take the handout home in order to think through the process, but will first fill out the form completely at the next session.

*Today we have talked about values. The focus of the homework for this session is to continue working with the TAC model, and how you can use the positive values that we talked about in this session to react differently in situations from your daily life. If you like, we can go through an example together before you get started.*  
*I am looking forward to seeing your work with the model when we meet next time!*

If the client does not think that he/she can answer all of the questions, then ask the client to prioritize the first three questions.

### New appointment

Offer a new appointment in about one week. Try to find a time when it is most convenient for the client to come.

## Complete counsellor's session checklist

**Homework: Positive values and the TAC model**

Name \_\_\_\_\_ Date \_\_\_\_\_

*T = Trigger (What was it that set off the bomb? It can be a situation from the past, the present, or something you think will happen in the future.)*

*A = Action (How did you act impulsively?)*

*C = Consequence (What did it cost you or others?)*

**Example**

| <b>Situation</b>   | <b>Trigger</b>                                   | <b>Action</b>              | <b>Consequences</b>   |
|--|--|----------------------------|---|
| Mike is told by his caseworker that there is no money left for this month. Mike shouts and threatens the caseworker until he leaves. | Gets no for an answer, rejection, no more money. | Shouts, threatens, leaves. | No money, bad mood, conflict with case worker, scares others. |

**Examples from your daily life. It can be examples that you have already worked with.**

| <b>Situation</b> | <b>Trigger</b> | <b>Action</b> | <b>Consequences</b> |
|------------------|----------------|---------------|---------------------|
|                  |                |               |                     |
|                  |                |               |                     |

**How can I use the positive values to think and react differently? Use the same situations as above.**

| <b>Situation</b> | <b>Trigger</b> | <b>Action</b>                          | <b>Consequences</b> |
|------------------|----------------|--|---------------------|
| (Same)           | (Same)         | <b>(Positive value and new action)</b> | <b>(New)</b>        |
| (Samme)          | (Samme)        | <b>(Positive value and new action)</b> | <b>(New)</b>        |



### **Counsellor's session checklist**

(Check off the items you have completed)

- “Mood check” – you have asked how the client is feeling here and now
- Summarized the last session
- Reviewed homework
- Presented the 8 impulsive values
- Presented the 8 positive values
- Worked with the 8 impulsive values
- Worked with the 8 positive values
- Talked about how to use the 8 positive values in the TAC model
- Closed the session
- Homework
- New appointment

**Your notes for this session:**

## Session 5. Social networks

Name \_\_\_\_\_ Date \_\_\_\_\_

### Resources

White board or paper, writing instruments (two colors)\*, handouts, worksheets, homework assignments

### Objective

1. Presentation of social network
2. Talking about the client's social network

### Activities

1. Reviewing the homework
2. Social network
3. The social network map
4. Working with the client's social network map
5. Closing the session
6. Homework assignment
7. New appointment

### Mood check

Start off the session with a mood check. This is done for two reasons: (1) To draw attention to the client's mood before the session so that you do not presume to know how the client is feeling. (2) To train the client to stop and ask him or herself how he or she is feeling.

*How are you feeling right now?*

*What do you think about this being the last of the five sessions in the Impulsive Lifestyle Counselling program, besides the booster session we will have in six weeks?*

Let the client explain and show interest, but do not start problem solving.

### Summarize the last session

Ask the client whether he or she can remember any of what you talked about at the last session. If not, then mention the following key points:

- Introduction and working with the 8 impulsive values

- Introduction and working with the 8 positive values
- Talk about values and how they are stable

### **Homework from the fourth session**

Let the client tell you about the homework. Ask what the client thought about doing it, and what he or she got out of coming up with the answers. Keep it short and simple.

If the client has not done it, then have a brief talk about the homework and emphasize that the client will get more out of the program (both during and afterwards), when they spend time doing the homework. Mention that there are about 112 waking hours in a week, and that the client is only at the session for one hour. The Impulsive Lifestyle Counselling will not have much effect if the client only works on it during the sessions!

Go through the questions (or do part of the homework now). Talk with the client about how he or she may use positive values to react differently to situations from daily life, using the TAC model.

### **Objective for Session 5: working with social networks**

Research shows that your social network has a large impact on whether or not you return to former behavior and substance use. Consequently, the objective of this session is to work with the client's social network.

People with antisocial personality disorder often face significant challenges when it comes to ending friendships and affiliation with the peers and peer groups that are related to the impulsive lifestyle, and they face significant challenges when it comes to building up relationships that are based on the positive values presented in Session 4. The objective of this session is therefore to support the client in reflecting on how his or her social network may support or challenge the lifestyle changes that he/she aims to achieve.

When working on the subject of social networks, it is important to emphasize that it is not the size of the network that is important or that shows whether the client is a "success". What is important is what kind of people are part of the network, and the quality of the contact with these people. Ideally the client will have contact with people who do not have an impulsive lifestyle or use drugs in order to best support a change of lifestyle.

*In this session we will talk about social networks.*

### **Show Handout 8**

**“A social network is a network of people around you - your family, friends, acquaintances, and professionals. People in a social network may be valuable to you, because they care about you or you care about them, because they support you and give you advice, or because they help you with practical issues.”**

**Handout 8. Social network**

**A social network is a network of people around you - your family, friends, acquaintances, and professionals.**

**People in a social network may be valuable to you, because they care about you or you care about them, because they support you and give you advice, or because they help you with practical issues.**

State briefly and clearly how the client's social network affect his or her lifestyle and wish for change. If possible, refer to the parts of the client's life that he or she has stated a wish for change in.

*You are responsible for how you live your life. But have greater chances for changing parts of your life, for example your substance use, family relations, criminal behavior, when you have a social network that supports you in making these changes.*

*This goes for all of us. We all have a better chance of changing our lives in a more positive direction when we choose to spend time with people who are also moving in a positive direction.*

*We can do this by becoming more aware of which people we are close to, who we see often, and whether these people in fact support us when it comes to making the changes we hope for.*

*We can look at whether these people use drugs/alcohol, have an impulsive lifestyle, engage in criminal activities, and value streetwise pride.*

## Working with the social network map

### Show Worksheet 4 - the social network map

*Let us look at the social network map. This is a map that you can use to get an overview of what your network looks like. You can also use it as a way to work with how to build up a network that is more supportive of the lifestyle changes you wish to make, big or small.*

Describe the circles and how they refer to different levels of contact.

*Then inner circle refers to the people that you see on an almost daily basis.*

*The middle circle refers to the people that you see about once a week.*

*The outer circle refers to the people that you see less often than once a week.*

*Do you understand this?*

Next, describe the different social relations that can be placed in the circles.

*There are different kinds of social relations that we can place in the circle.*

*FRIENDS are the people that you feel close to.*

*AQUAINTANCES are the people that you see without feeling very close to them.*

*FAMILY are the people that you are related to, like parents, brothers and sisters, children, grandparents, aunts, uncles, and cousins. You might feel that you have close relationships with some*

## Impulsive Lifestyle Counselling

*of your relatives, and you make not feel as close to others, but they are all your members of your family.*

*PARTNER/WIFE/GIRLFRIEND refers to people who are not quite family.*

*'PROFESSIONALS' refers to professionals in your social network that you find are important to you.*

*As you see, there are many possibilities for placing people in your social network map. You may not need to use all of the categories. Let us see when we get to that point.*

Finally, describe the categories of people that the client can place into the social network map

*The last thing that we need to go through before starting with filling in the social network map is the four sections that the circle is divided into.*

*The top left is where you place people who do not use drugs, who do not commit crime, and who do not drink large quantities of alcohol. That is, people who are not engaged in activities related to impulsive lifestyle.*

*The bottom left is where you place people who do use drugs, who do commit crime, or who do drink large quantities of alcohol.*

*The top right is where you place people who do not use drugs, who do not drink large quantities of alcohol, but who do commit crime.*

*The bottom right is where you place people who do use drugs, who do drink large quantities of alcohol, and who do commit crime.*

When you have explained the social network map, it is time to fill it out. But before you begin, make sure that the client has understood how to do it.

*Do you see how the social network map works?*

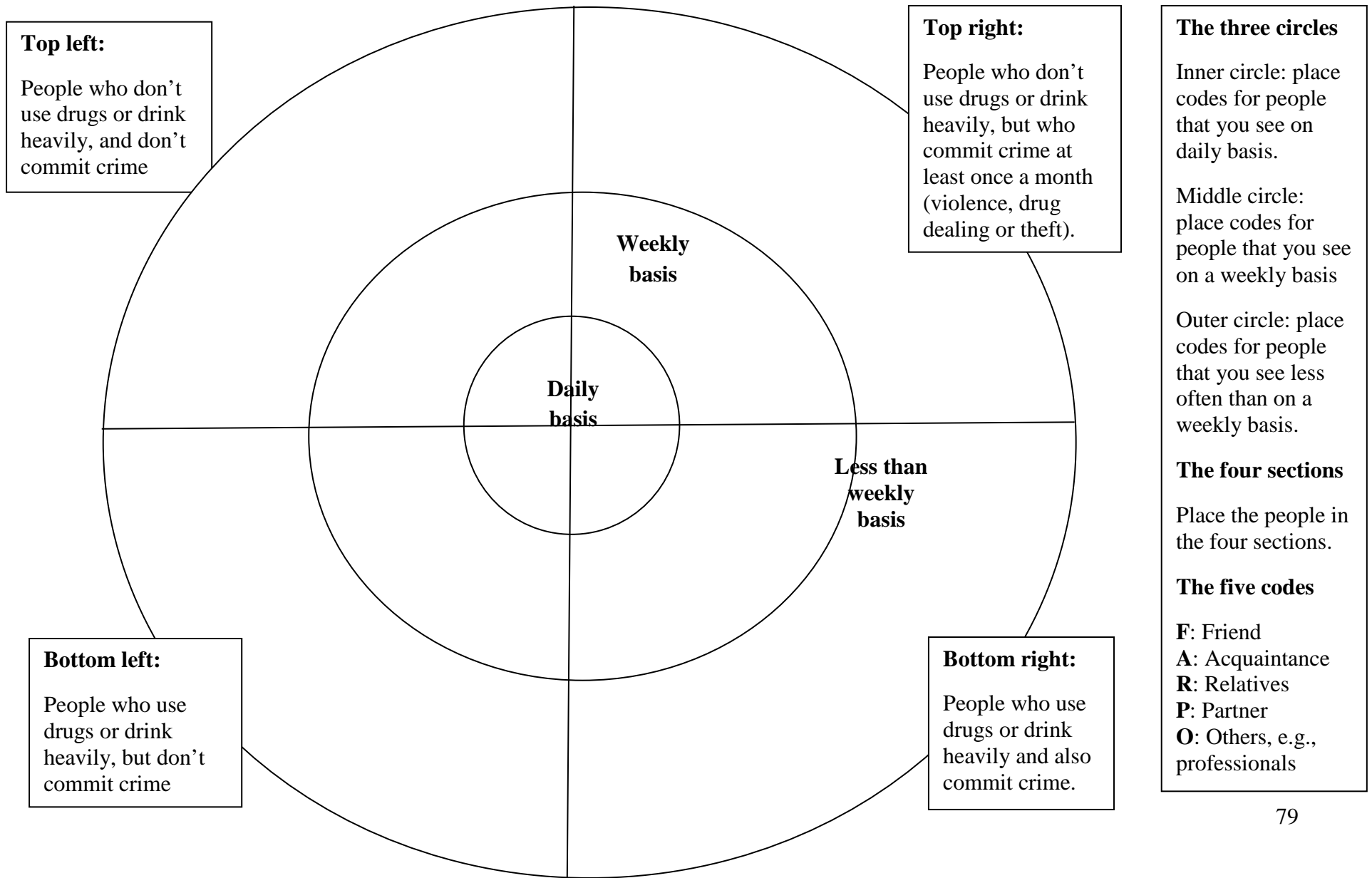
If the client does not understand it, take the time to ask what it is he or she do not understand, and explain it again. The focus in this session is that the client works with his or her social network, and reflects on how it may support or challenge the lifestyle changes that he or she wish to make. Consequently, it is important that the client experiences the social network map as a practical tool similar to the TAC model.

*Now I would like to ask you to fill out the social network map with the names of the people, who are part of your life.*

*We will take the time we need to do this.*

Take your time, and support the client in remembering the people that are part of his or her social network.

**Worksheet 4. Social network map**



**Talking about the map of social support systems**

Focus for the last part of this session is to talk with the client about how his or her social network looks: How big or small is it? Who is part of it? How close are they to the client? Also, talk about how the people in the current social network may support or challenge the lifestyle changes that the client wishes to make. For example, it may be better for some people to be moved to the outer circle, or for some people to be moved to the inner circle, in order to best support the change process.

*What do you think of what your social network looks like?*

*Who is especially important to you? Why?*

*Who are you especially important to? Why?*

*Is there anyone who may challenge the changes that you want to make? Who? How?*

*Is there anyone who may support the changes that you want to make? Who? How?*

Write key words:

Importance: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Challenges: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Support: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you think it helps the process with the client, you can circle the people that challenge change with red, and people who support change with green.



**Supporting positive lifestyle changes**

The last part concerns talking about what the client can do to get more support for making lifestyle changes.

*Let's look at how your social network best may be able to support you in making the lifestyle changes that you would like to make. Are there any people you would like to have a closer relationship with? How could you help that happen? What could you do to get closer to them?*

*Write here:*

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*Are there any people who should be moved further out? How could you make that happen? What could you do to distance yourself from them?*

*Write here:*

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*Are there any new people that you would like to have in your social network? What could you do to make that happen? What could you do to get closer to them?*

*Write here:*

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## Closing the session

### Homework

Present the homework. Remember to answer any questions from the client if there is something about the homework that is hard to understand. If the client does not think that he or she can answer all of the questions, then ask the client to prioritize the first three questions.

If the client expresses reservations about doing the homework, ask why and try to accommodate the client, that is, to find a way to work on the homework that suits the client. As is written in the introduction, homework should not be a stress factor, but should support the change process and the client's progress. So try to find a method that is suitable for the individual client. You might ask about the client's previous experience with doing homework, such as from attending school. Be aware that some clients may be good at doing the homework, others will need help remembering to do it, and some will take the handout home in order to think through the process, but will first fill out the form completely at the next session.

**REMEMBER!!!** Make a copy of the social network map for the client, so that he or she can refer to it while doing the homework.

*Today we have talked about social networks. The homework for next time is to continue this work, and think about how you can best support the lifestyle changes you want to make.*

*I will give you a copy of the social network map you have done today so you can take it home with you.*

*I look forward to see what you have done!*

### New appointment

Offer a new appointment in about six weeks. Try to find a time when it is most convenient for the client to come.

*We have one session left of the Impulsive Lifestyle counselling program. That will take place about six weeks from now. Let's set up a time for this now.*

*One way that you could support your wish for lifestyle changes is to take some of the worksheets and homework that you have done in the sessions, and continue working with this material together with a relevant professional.*

*Are you interested in this?*

*You can also think about this until we meet next time.*

## Complete counsellor's session checklist

**Homework: My social network (include copy of the social network map)**

Name \_\_\_\_\_ Date \_\_\_\_\_

**How can I work on my social network?**

| My social network        | More contact | Less contact | New contacts |
|--------------------------|--------------|--------------|--------------|
| <b>Who?</b>              |              |              |              |
| <b>Why?</b>              |              |              |              |
| <b>How?</b>              |              |              |              |
| <b>What can I do?</b>    |              |              |              |
| <b>What have I done:</b> |              |              |              |

### **Counsellor's session checklist**

(Check off the items you have completed)

- “Mood check” – you have asked how the client is feeling here and now
- Reviewed homework
- Presented social networks
- Filled in the social network map
- Talked about the client's social network
- Talked about who supports and who challenges positive lifestyle changes
- Closed the session
- Homework
- New appointment

**Your notes for this session:**

## Session 6. Booster session

Name \_\_\_\_\_ Date \_\_\_\_\_

### Resources

White board or paper, writing instruments, handouts, worksheets, homework assignments

### Objective

1. Review the objectives of Impulsive Lifestyle Counselling
2. Talk about working further on lifestyle changes

### Activities

1. Review of the homework
2. Objectives of Impulsive Lifestyle Counselling
3. Client's reasons for changing his or her lifestyle
4. Client's choice of work
5. Closing the session and thank you for time spent in the Impulsive Lifestyle Counselling program

### Mood check

Start the session with a mood check. This is done for two reasons: (1) To draw attention to the client's mood before the session so that you do not presume to know how the client is feeling. (2) To train the client to stop to ask him or herself how he or she is feeling.

*Hello. Welcome. How are you feeling right now? How what do you think about this being the last of our sessions?*

Let the client explain and show interest, but do not start problem solving.

### Homework from the fifth session

Let the client tell you about the homework. Ask what the client thought about doing it, and what he or she got out of coming up with the answers. Keep it short and simple.

If the client has not done it, then have a brief talk about the homework and emphasize that the client will get more out of the program (both during and afterwards), when they spend time doing the homework. Mention that there are about 112 waking hours in a week, and that the client is only at the session for one hour. The Impulsive Lifestyle Counselling will not have much effect if the client only works on it during the sessions!

Go through the questions (or do part of the homework now). Talk with the client about what he or she thought about doing it and what he or she got out of answering. Keep it short and simple. If the

client has not done the homework, then ask why not and then talk briefly about what the client thinks in general about his or her social network.

**Objective of Session 6: working with lifestyle issues**

The objective of this conversation is to review what has happened during the ILC course and to determine which areas the client thinks are important for the continued effort to change the impulsive lifestyle. At this session it is important that you remember to emphasize that changing a lifestyle requires an ongoing effort that must continue after the Impulsive Lifestyle Counselling course is completed. It is also important to support the client in being clear about how he or she will make further efforts after the ILC conversations have ended. Let the client explain and show interest, but to not enter into problem solving.

Ask the client if he or she can remember any of what you talked about at Session 5.

*In the first five conversations we had in the Impulsive Lifestyle Counselling program, you have been introduced to the concept of having an impulsive lifestyle and the kinds of problems that it can present. Your participation in Impulsive Lifestyle Counselling has given you the opportunity to understand how your problems are associated with an impulsive lifestyle.*

*Can you explain in your own words what the conversations have been about?*

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If not, then briefly mention the following:

- Reasons for working to change an impulsive lifestyle
- Your dreams
- The four areas - Self-indulgence, Breaking rules, Interpersonal intrusiveness and Irresponsibility
- Your goals and intermediate goals
- The TAC model
- Streetwise pride
- Impulsive and positive values
- Social network

*You have also been presented to some tools that you can use to better handle your challenges and problems, and which you can use to support your wish to make lifestyle changes.*

*Have there been any periods when things were going better since you started in the Impulsive Lifestyle Counselling program? (If the client responds negatively – ask if there have been a few good days or a few good situations)*

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*How can you explain that these periods/days/situations have gone better for you?*

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*Have our conversations at the Impulsive Lifestyle Counselling sessions had any relation to this improvement?*

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*Have you been able to use anything from our conversations or any of the tools from the Impulsive Lifestyle Counselling program, for example the TAC model or the social network map?*

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### **Continued work with the impulsive lifestyle**

Next, ask the client to give you three good reasons to continue with working on change changing the impulsive lifestyle. This is a way of supporting the client in keeping focus on the positive aspects of continuing to make an effort to make lifestyle changes. In the remaining time take a theme that he or she finds relevant to work with and focus on that.

*Can you give me three good reasons as to why it would be good for you to continue working with lifestyle changes?*

Write here:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

*Now tell me, what you may need to do so you can handle the challenges and problems that you have in a better way? This can be something you need from professionals or in your private life.*

Write here:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### **Client's choice of topic**

Now it is time to find out what the client wants to work with during the time that remains in the last session. How can the client best be supported in the ongoing effort to make positive lifestyle changes? Remember – although it is the client who chooses the topic, it is important that you relate it to what has served the client well in the previous sessions, in order to support the awareness and change process that has occurred while participating in the Impulsive Lifestyle Counselling program. This means that when the client chooses a topic, you can use material that you have already worked with during previous sessions to support the work in theme selected for this part of the session.

*It is important to be aware that the knowledge you have gained and the work you have done in the Impulsive Lifestyle Counselling program is a good start for your wish to improve your life. It is also important to recognize that it is only a start.*

*Making lasting changes that takes time.*

*Your wish to make lasting changes means that you have to make a continuous effort. The good news is that it is possible to change your lifestyle, and that you have already started!*

*The rest of this session is yours. This means that what we work with now is up to you.*

*Which subject that you have worked on during the Impulsive Lifestyle Counselling program would be useful for you to work with today?*

*The eight positive values? The TAC model? Streetwise pride? Social networks? Something else?*

Work with whatever subject the client brings up.



## **Thank you for the time spent on the Impulsive Lifestyle Counselling program**

You may or may not meet the client again. No matter what, it is important that you take the time to thank him or her for the time you spent together in the Impulsive Lifestyle Counselling program. Thank the client for his or her willingness to invest time and effort in the program. No matter whether not enough time was spent, or improvements were only slight, the participation is important. Therefore, acknowledge him or her for spending energy doing something difficult – relating to his or her impulsive lifestyle and considering whether it makes sense to change, and how to best go about it.

*Before we say good-bye, I would like to thank you for your contributions during the six Impulsive Lifestyle Counseling sessions that we have had.*

*It is very positive that you have chosen to work on changing your impulsive lifestyle, and I would like to acknowledge you for doing that.*

*As I have said earlier, if you are interested, I can pass on what we have worked with during the Impulsive Lifestyle Counselling program to another relevant professional. Or I can inform him or her about what you would like to continue working on. This is a way to support your wish to make changes and reaching your goals.*

If the client responds positively, then decide how to go about this. Make sure that the client gives his or her approval of what you pass on. If the client responds negatively, acknowledge that.

## **Complete counsellor's session checklist**

### **Counsellor's session checklist**

(Check off the items you have completed)

- Mood check
- Summarized key points in sessions in the Impulsive Lifestyle Counselling program
- Talked about continued work with the impulsive lifestyle
- Talked about the client's choice of topic
- Talked about if other relevant professionals should be involved in what has taken place in the Impulsive Lifestyle Counselling sessions
- Closed the session and thanking the client for the time spent on the Impulsive Lifestyle Counselling program

**Your notes for this session:**