

THE GARNET CLINICAL MODEL

From Addiction to Joy

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I. GARNET Philosophy

GARNET treatment protocols incorporate understanding of addiction informed by science, medicine, outcomes measurement and experience from around the world. Core scientific foundations include recent brain research and study findings by the [American] National Institutes of Health (NIH) and the World Health Organization (WHO) that show addiction to be a complex but treatable disease that affects brain function and behavior. This research provides the visual evidence of clinical diagnoses showing drugs of abuse [alcohol and prescription/illegal drugs] alter the brain's structure and function. These brain changes affect the very areas of the brain a person needs in order to 'think straight,' process emotions and act responsibly, and explain, in part, why treatment and recovery can be challenging and why relapses can occur. *GARNET takes on addiction as a brain disease.*

GARNET further understands the confrontation and acknowledgement of addiction by a person to be a traumatic event and regards therapy advised by trauma and post trauma stress management to be important in understanding, treating and managing the disease of addiction. *GARNET aggressively treats addiction as trauma.*

Recognizing addiction as a chronic relapsing brain disease infuses every aspect of GARNET's treatment programming, as does the recognition that addiction is 'caused by' a combination of risk factors, including: genetics, childhood trauma, early use, social environment, mental illness and preceding substance abuse. As such, GARNET provides multi-faceted, internationally integrated treatment modalities targeted to the individual's varied needs – not just his or her substance abuse - and which assimilate the individual's national and cultural background and context. *Treatment is profoundly culture specific.*

GARNET recognizes that recovery must enable the individual to assume, sometimes for the first time, productive functioning in the family, workplace or classroom and society. As such, GARNET follows its initial comprehensive, individualized treatment programs with long-term, personalized progression plans and assessments, and incorporates similarly grounded educational offerings for families, persons concerned about their substance use and communities as a whole.

GARNET's experts understand addiction recovery in an international context with the inherent opportunities for program development in a cross cultural and cross disciplinary environment. Garnet's *Operating System for Global Recovery™* transcends traditional techniques and incorporates and adapts trauma management, traditional 12-step methods, cognitive behavioral therapy, existing and new psychology practices and lessons from international treatment experience. Programs keep the focus on guiding patients toward transformative growth as an essential component of long term recovery and establish lasting connection with joyful, fulfilled, societally productive living.

GARNET programs support the following essential principles

- The need for education and awareness of the psychology and physiology of substance addiction
- An understanding that all human beings have the capacity for transformation and that addiction recovery is most successful when patients find their personal path toward this growth

- The importance of addressing the trauma associated with confronting addiction and the development of long-term personal growth strategies.
- Active use of experiential learning modeling joy, fulfillment, and fully engaged, self-giving lifestyles.
- Establishing a reachable goal of a joyful and meaningful life as an engaged, mindful and healthy individual.

Transformative growth transcends specific cultural or religious practices. Garnet does not endorse any dogma. Garnet does recognize and believe that transformative growth is a key indicator of addiction recovery success. Leading patients toward this goal is a primary objective of Garnet programs.

II. GARNET Core Program Components

GARNET programs are regularly informed by and updated to include international scientific developments consistent with its core recovery principles. Further, programs are in every case acculturated to the local conditions to which patients will return and within which recovery will progress.

With this in mind Core Components of GARNET *OSGR 1.0* are as follows

12 Month Treatment period: GARNET treatment programs are defined as “II” – Initial Intensive treatment” (28-90 days/typically inpatient) followed by “CI” - Continuing Initial care (balance of the first 12 months)

Intake and CI Integration: liaison between intake assessments and CI treatment planning to assure an holistic understanding of the patient and the development of treatment plans that integrate Initial Intensive and Continuing Initial care and inform development of CI services such as continuing therapy and recovery activities, telephone counseling, recovery coaching, life skills development and alumni community support

Family Therapy: early and continuing integration of the family in the treatment and recovery process to develop understanding, healing and mutual support for recovery

Trauma Treatment: incorporation of trauma treatment protocols acknowledging the traumatic nature of the acknowledgement of addiction

Transformative Growth: emphasis on the importance of transformative growth in recovery and the development of tools to support the process

Experiential Learning of healthy and joyful living practices

Education and disease awareness

Outcomes Measurement: independent outcomes measurement to enable knowledgeable treatment assessment and improvement

Global Acculturation: treatment protocols which are globally and culturally adaptable to treatment requirements anywhere in the world

III. GARNET Core Program Outcomes:

Abstinence: recognition of addiction as a chronic relapsing brain disease and understanding of the importance of remaining substance free in order to allow brain recovery and avoid life diminishing, substance-abuse induced behaviors

Commitment: mutual commitment to an ongoing therapeutic alliance for one year

Emotional Health: recognition that healthy processing of feelings and emotions was interrupted by substance abuse and that engaging in individual or group counseling and behavioral therapies such as 12-step programs, psycho-education groups, peer-to-peer counseling programs as well as engagement and life skills practices, will be central to enjoying a healthy, joyful and fulfilling life and engendering the opportunity and developing the tools necessary for transformative personal growth

Healing: Recognition that substance abuse has interrupted crucial family and community bonds and that a commitment to ongoing therapy, dialogue, healing and re-engagement will be necessary to establishing authentic sustainable relationships

Life Skills: recognition that substance abuse has interrupted interpersonal relationships and the normal functioning of life skills and that the continuing development of life skills and appreciation for life through, as appropriate, experiential learning opportunities, financial planning, creative arts modalities, spiritual, meditation or meditative practices will be necessary to sustained growth in recovery

Engagement: recognition that substance abuse has interrupted advancement in work or school and other social interactions and that involvement in vocational, community, volunteer, educational and interpersonal opportunities will be necessary to regaining confidence in engaging in life and enabling personal growth

Physical Health: recognition of the brain research showing the positive impacts of exercise and nutrition on brain health and that understanding and following basic nutrition guidelines and engaging in regular exercise can have profound impacts on brain recovery and ongoing brain health

Confidence: that a GARNET-trained professional or volunteer will be there every step of the way to assist with lifelong recovery

IV. GARNET Clinical Procedures and Protocols

The following are the core treatment procedures and protocols supported by GARNET to meet the GARNET treatment philosophy, guide design of treatment plans and engender the targeted outcomes. In every case GARNET will provide guidance to local clinical staff and, as necessary, training. All treatment protocols are subject to acculturation to meet the needs of local treatment and community and cultural contexts

Intake Assessment and Outcomes Centre

The GARNET IAOC is designed to

- assess the person's medical and psychological condition and ascertain the level of treatment appropriate
- gather information which will enable accurate measurement of the person's treatment plan
- provide the context in which the person's Continuing Initial care is planned
- coordinate implementation of the person's continuing initial care

GARNET will provide, or work with partner treatment centers to provide, a 24 hour a day, seven day a week telephone response to treatment enquiries staffed by trained, knowledgeable and empathetic staff who will

- answer person's questions and discuss their goals
- discuss and obtain initial personal information (see outcomes data worksheets and also for information below)
- obtain information regarding person's medical history and condition

- conduct initial psycho-social evaluation
- coordinate and schedule in person medical and psycho-social evaluation if necessary
- coordinate and schedule medical detoxification if necessary
- coordinate with Centre clinical staff and on-site admissions personnel
- coordinate persons admission to treatment and travel arrangements
- manage outcomes measurement data, process and outcome coordination with centre
- coordinate implement and supervise the Continuing Initial care program

Final Intake, Assessment and Outcomes Data procedures is conducted at the treatment centre by onsite centre staff who monitor treatment with the clinical staff throughout the treatment period and who provide liaison with IAO centre for coordination of the Continuing Initial care.

Initial Intensive Treatment

GARNET treatment protocols are focused to support four core pillars of treatment and recovery in the Initial Intensive care period. These treatment pillars guide the Continuing Initial care treatment plan which follows Intensive care treatment.

The treatment pillars are:

1. Education, Understanding and Acknowledgement – *what is the disease and what are its implications*

Supported procedures include:

- Psychology and physiology of substance addiction
- Recovery and the brain
- Addiction is a brain disease
- Understanding of co-morbid conditions
- Emotional and physiological realities of addiction
- Stress and stress management
- Emotional and affect regulation
- Understanding of relapse
- Stages of change
- Mindfulness techniques
- Recovery models
- 12 step program education or cultural equivalents
- nutrition education

2. Disease Management and Relapse Prevention – *how to live with it*

Supported procedures include:

- Individual therapy (Cognitive Behavioral therapy, Client Centered, Trauma focused treatment/resilience training)
- Dynamically oriented group therapy
- Trauma therapy (CBT and experiential therapies e.g. Psychodrama, Art, Movement, EMDR, IFS) and management
- Stress management and coping strategies
- DBT (dialectic behavioral therapy when possible)
- Milieu therapy
- Motivational Interviewing practices
- Relapse risk identification and prevention tools
- Exercise and wellness
- Good nutrition practices
- Mindfulness and Meditative practices such as
 - Mindfulness practices
 - yoga
 - meditation
 - Qui Gong
 - Tai Chi
- Art, music, and movement therapy

3. Family and Relationships – *understanding and rebuilding personal relationships and family integration in treatment*

Supported procedures include:

- Family systems approach
- Dynamically oriented group therapy
- Family and relationship education
- Experiential therapies
- Family and relationship counseling
 - Integration of family members into treatment
 - Healing and compassion

- Communication
 - Boundaries
 - Co-dependency
 - Family continuing care
- Relapse risk identification and prevention tools
 - Community service and volunteerism
 - Wellness practices: nutrition, exercise
 - Mindful and Meditative practices

4. Recovery and Transformative Growth – *the good news*

Supported procedures include:

- Individual therapy
- Dynamically oriented group therapy
- Resilience training and coping strategies
- Wellness practices integrated into programs
 - Personal training and exercise for multi dimensional fitness (e.g. aerobic, balance, core strength, endurance) and programmed to be fun and functional
 - Good nutrition practices
 - Mindful practices
 - Activities involving altruism, community awareness, volunteerism
 - Group experiential activities e.g.ropes and initiatives
 - equine therapy
 - hiking, kayaking, etc, as available
- Introduction to Neurospirituality (as appropriate) and meditative practices
 - yoga
 - meditation
 - mindfulness
 - Qui Gong/Tai Chi

GARNET guidelines emphasize use of experiential techniques wherever possible and the use of treatment in an integrative (mind, body and spirit) context

Continuing Initial Care

After completing the period of Initial Intensive care patients in GARNET/Partner programs transition to Continuing Initial care coordinated through the GARNET/Partner IAOC. This period of care is through one year from initial intake date.

GARNET supported treatment procedures during Continuing Initial care are as follows:

- Weekly case management
- Medical supervision with addiction care specialty
- Continuing disease education
- Trauma and post traumatic stress management
- Continuing group and individual therapy
- Meditative practices
- Family and relationships counseling
- Alumni support
- 12 step programs or cultural equivalents
- Recovery coaching
- Community service and volunteerism
- Life skills training
- Financial planning
- Legal assistance
- Vocational and job training
- Entrepreneurialism/micro lending programs
- Exercise programs and team sports
- Nutrition management
- Music and arts
- Use monitoring as appropriate

V. Treatment Plan Design and Implementation Process

This document is a guide for Clinical Directors as to the treatment philosophy and supported protocols in GARNET and GARNET partnered facilities. In each case GARNET works with local facilities to create individually designed treatment plans in accordance with the mutually agreed protocols, patient population, local cultural and community requirements. GARNET programs are regularly updated to include worldwide developments in treatment.

Once operational agreement is reached between GARNET and the GARNET partner facility, procedures for clinical implementation are as follows:

- Introduction of GARNET and PARTNER clinical staff
- Review of guideline philosophy and clinical protocols
- Agreement of protocols to govern local treatment
- Acculturation of protocols to local cultural and community requirements
- Drafting and agreement of local treatment program and schedules
- Assessment of local clinical and supporting staff necessary to program implementation
- Approval and hiring of staff
- Staff training as necessary
- Periodic – as agreed – training follow up and phased program integration

GARNET commits to provide seamless integration of globally derived, locally acculturated treatment protocols anywhere in the world

**The core value
The end point
The measure of success
Is the Recovering Person's journey
Into
Joy**