

By Chandler Scott McMillin

Part Eight: Creating the “Win-Win”

In any two-party negotiation, there are four possible outcomes:

	Party A	Party B
Outcome 1	Wins	Loses
Outcome 2	Loses	Wins
Outcome 3	Loses	Loses
Outcome 4	Wins	Wins

The preferred result is the ‘win-win’ because it’s the one most likely to produce a lasting positive outcome. There’s no disappointed loser involved.

In the context of Court-ordered treatment, a ‘win-win’ occurs when there are no further alcohol or drug-related arrests.

Unfortunately, it’s easy to lose sight of that simple truth. Here’s an example:

Ben T. has been sent to treatment by the Court with a stern order to abstain from alcohol and marijuana, his drugs of choice. Mindy is his newly-assigned counselor. Ben faces a jail sentence if he doesn’t comply, so you’d expect him to be motivated.

He’s motivated to attend sessions. But as far as abstinence goes, he doesn’t want it, and he certainly doesn’t believe he needs it. From Ben’s perspective, he wins if he can continue to drink and smoke pot without getting caught.

So for Ben to win, Mindy must ‘lose’. And for Ben, abstinence would represent failure. One that he’s going to work hard to prevent.

This agenda on the client’s part can easily overwhelm treatment efforts. We’re more likely to see the dreaded ‘lose-lose’ – where Ben keeps drinking (covertly) and Mindy wastes time and energy trying to prevent it.

Meanwhile, the real issue goes unaddressed. Like so many alcoholics, Ben is determined to *reassert control* over alcohol. Odds are he won’t be able to, but he doesn’t see it that way. His mind is full of strategies and tactics for drinking without problems.



In 12 Step groups, this is sometimes called ‘joining the research department’. It’s as if the alcoholic is a scientist conducting a radically unpopular experiment. The more others doubt him, the harder he works to prove himself right.

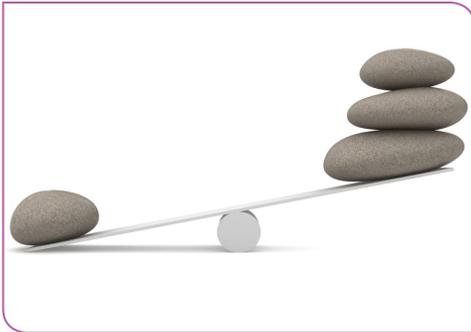
AA members will tell him to come back later if control doesn’t work. They know the odds are they’ll see the drinker again, and soon. But when the Court has ordered someone to abstain, the program is put in the position of being responsible for that – initiating a conflict between counselor and client that can overwhelm the rest of treatment.

It’s difficult to contain in the best of circumstances. One approach is to attempt to refocus the client’s attention to a different goal. That goal is *the need to avoid another arrest*.

Counselors know the only sure way for most alcoholics to avoid more alcohol-related problems is to stop drinking and stay stopped. Yet for the alcoholic, it’s an insight that’s slow to come. And until it does, the drinker may actively fight change.

In 12 Step groups, this is sometimes called ‘joining the research department’.

Using Leverage in Counseling the Court-Referred Client



Yet even the most recalcitrant drinker can appreciate the desirability of avoiding still more consequences. It's a side door around some of the alcoholic's denial. You're not forced to confront his heavily defended need for control – instead, you're simply pointing out a motive for change.

It's a useful motivator when others fail.

The offender may continue to *deny* that he should have been arrested in the first place, or *minimize* its importance. He may *rationalize* or offer excuses, or blame his behavior on circumstances outside himself. He may delight in staging intellectual arguments about the merits of the drunk driving laws. He may remain angry about his arrest for weeks or even months.

But he'll probably acknowledge that it would be good to avoid another one.

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Summary

The only real 'Win-Win' for Court-ordered treatment is the absence of future arrests. Client and program succeed when both understand that and work towards the same goal. It's not enough that the counselor grasps this, if the client is still fighting it. Re-frame the discussion to help the client 'get it', too.

Next:

Part Nine: The Anti-Social Client



Chandler Scott McMillin, Principal of Recovery Systems Institute, has created and operated successful addiction treatment programs for more than thirty years. He has written countless articles and co-authored seven books on addiction treatment and helped hundreds of families with successful interventions.