Based on

TCU Mapping-Enhanced Counseling Manuals for Adaptive Treatment

As Included in NREPP

NREPP SAMHSA's National Registry of Evidence-based Programs and Practices http://nrepp.samhsa.gov

MAPPING THE JOURNEY: A TREATMENT GUIDEBOOK

A collection of materials for exploring needs and planning treatment, improving communication, and reviewing treatment progress

D. F. Dansereau and D. D. Simpson, Editors
TCU Institute of Behavioral Research
(August 2005)

TCU Mapping-Enhanced Counseling manuals provide evidence-based guides for adaptive treatment services (included in National Registry of Evidence-based Programs and Practices, NREPP, 2008). They are derived from cognitive-behavioral models designed particularly for counselors and group facilitators working in substance abuse treatment programs. Although best suited for group work, the concepts and exercises can be directly adapted to individual settings.

When accompanied by user-friendly information about client assessments that measure risks, needs, and progress over time, *TCU Mapping-Enhanced Counseling* manuals represent focused, time-limited strategies for engaging clients in discussions and activities on important recovery topics. These materials and related scientific reports are available as Adobe PDF® files for free download at http://www.ibr.tcu.edu.

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TCU MAPPING-ENHANCED COUNSELING MANUALS FOR ADAPTIVE TREATMENT

Mapping the Journey: A Treatment Guidebook

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Introduction and Overview

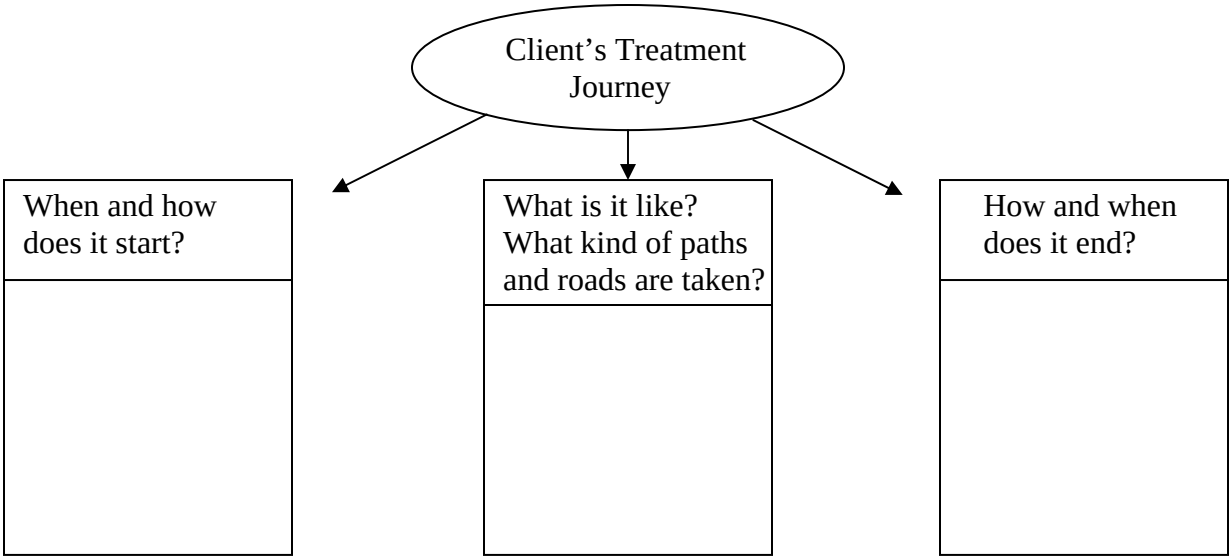
This guidebook can be used by counselors and clients to enrich and improve the treatment journey. "Mapping the Journey" is like a typical holiday travel guide where recommended tours and trips are chosen and changed to fit the traveler's needs and desires.

In order to allow this to happen, the guidebook is divided into 8 brief guides for exploring important parts of the treatment journey. They are recommendations but can be used in any way the counselor and client choose. The order and amount of their use will surely vary from client to client. The bottom line is they are guides not prescriptions.

As with most travel books, these guides rely on maps to show the way. In this case, special maps have been developed for suggested roads on the treatment journey. They are based on materials published in two manuals – *Mapping new roads to recovery: Cognitive enhancements to counseling* (Dansereau, D.F., Dees, S.M., Chatham, L.R., Boatler, J.F., & Simpson, D.D., 1993) and *TCU guide maps: A resource for counselors* (Dees, S.M. & Dansereau, D.F., 2000) – which are available for free downloading at our website (www.ibr.tcu.edu).

What are treatment maps?

There are generally two kinds of maps that can be used in treatment. The first is a "fill-in-the-blank" map that looks like this one:



The counselor and/or client write personal answers in the blanks and then think about or discuss what they mean and how they can be used to reach goals. In this case, a completed copy might be given to the client and a copy filed for future reference. The writing in the blanks does not have to be good or complete - it is intended to stimulate thoughts and feelings rather than good penmanship. Sometimes writing may not be necessary because the map can be discussed orally.

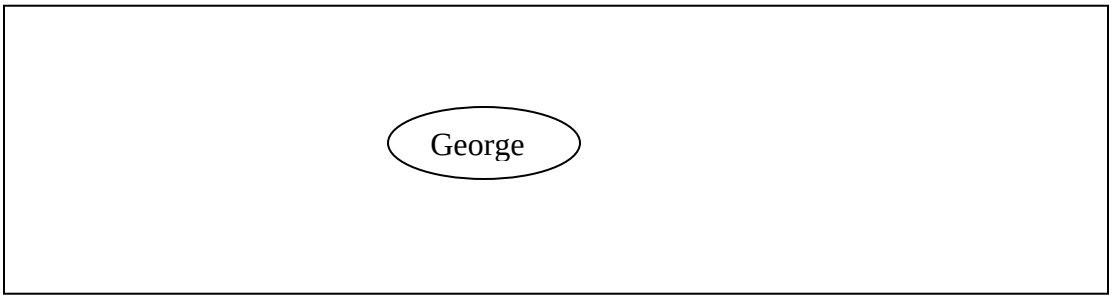
The guides in the rest of this book contain small sets of these "fill-in-the-blank" maps. However, counselors and clients are encouraged to create their own fill-in-the-blank maps to better meet needs of the treatment journey.

Another type of map is the "free" map (see Guide 8). This type is built from scratch by the counselor and/or client. It usually starts with a key idea and then other ideas are attached as the thinking and discussion proceed.

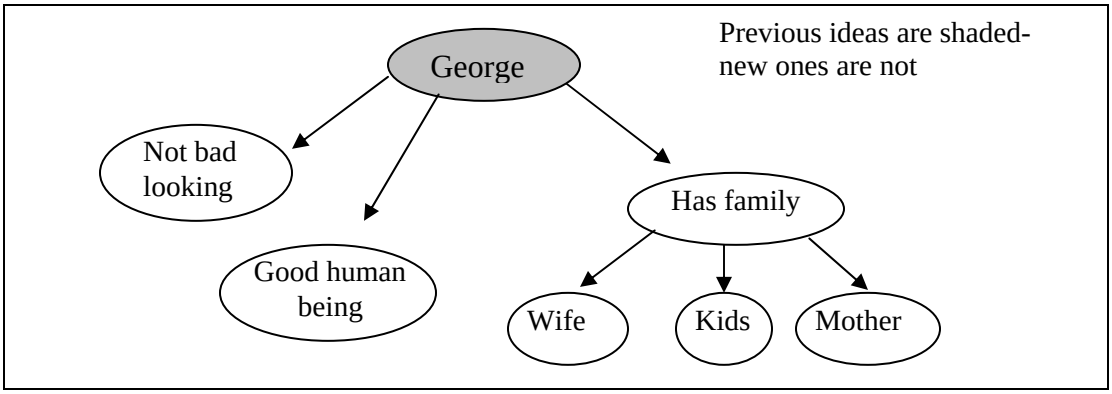
Free maps can be especially useful in exploring specific issues that are not easily covered by a fill-in-the-blank map. Free maps can be sketched out anytime during treatment. As with the fill-in-the-blank maps, neatness and completeness do not matter. They are thinking and talking guides, not artworks.

Here is a simple example of a free map. It starts with core issues in the center, then "grows" during discussion to include relevant issues connected to it.

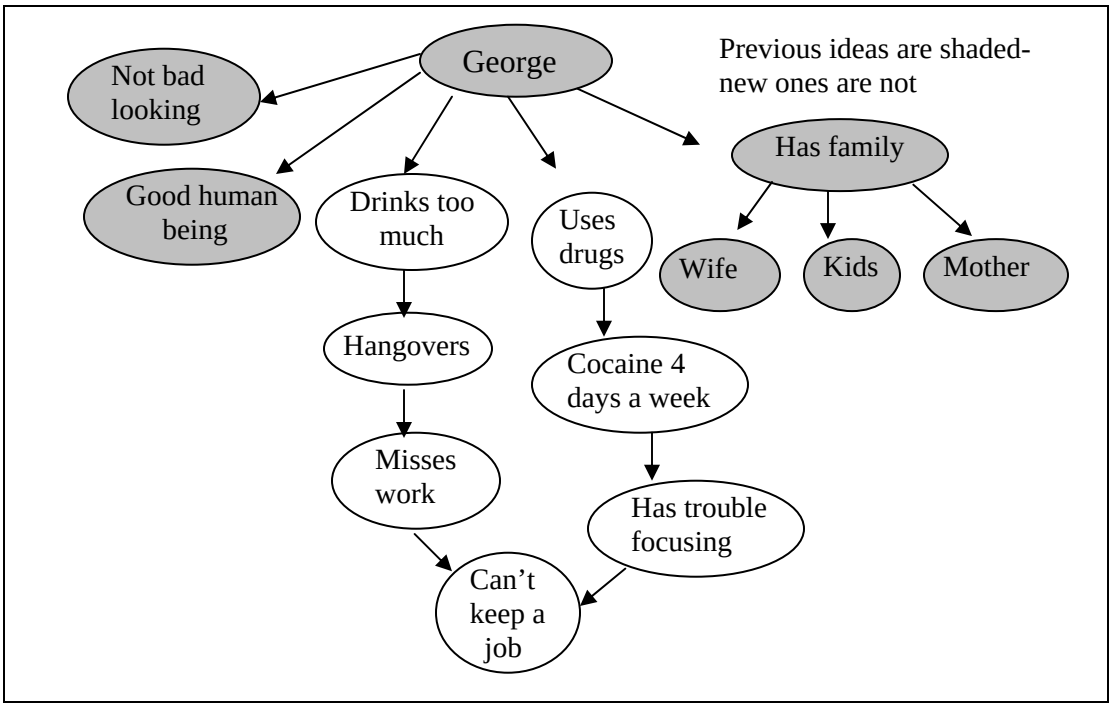
Stage 1



Stage 2



Stage 3



Why use "fill-in-the-blanks" and "free" maps?

Simply put, over 35 published articles show these maps can significantly improve the treatment journey. If you are interested in details of this scientific evidence, see the Appendix.

Who benefits from maps?

Studies show that most clients benefit from maps, but those with communication and attention problems benefit most (again, see Appendix for details). Counselors often say they too benefit by gaining a deeper understanding of their client and by having a systematic approach to guiding their interactions with clients.

When to use maps?

Maps in this guidebook can be used at any point during treatment. They work for discussing problems and needs, planning treatment, reviewing progress during counseling sessions, or as "homework" for a client or the counselor. Although their numbering reflects a popular sequence, they can be taken in any order and can be repeated over the journey as needed.

How to use maps?

Probably the best way to start using maps is to just jump in. They are easy to understand and as long as you treat them as just guides to thinking rather than prescriptions, there should be little problem getting started. The guides that make up the bulk of this book are to explore parts of the treatment journey. Once again they are:

Mapping Guide 1: Exploring Self
Mapping Guide 2: Social Improvement
Mapping Guide 3: Decision Making
Mapping Guide 4: Taking Control
Mapping Guide 5: Monitoring Progress
Mapping Guide 6: Relapse and Disease
Mapping Guide 7: General Planning
Mapping Guide 8: Free Mapping

Make working copies of selected maps or make overheads for viewing. They can be used in individual sessions, in groups, or as homework. You might find new uses for them or design your own. We would like to see your ideas and creations so that we can share them with others (contact D.Dansereau@tcu.edu with your thoughts or questions about using maps).

If you would like to see examples of the "completed maps" go to the Case Study section of this guide book.

What difficulties will you encounter?

You will likely not encounter major problems along the way if you use the maps merely as suggested guides to give you ideas. If they are not helping in a particular situation, they can be modified or not used at all. We hope you can find a set of maps will become a valuable tool in helping clients identify and reach their treatment goals.

MAPPING GUIDE 1: EXPLORING SELF MAPS

Purpose: These maps can help a person better understand their strengths and weaknesses, and how they can be used in a positive way. The maps will also help a person to develop a more accurate level of self esteem.

Method: Use Exploring Self Maps 1-4 to guide thinking. Use "Free" Mapping as needed (see Mapping Guide 8, page 36).

There are no rules; use these anyway you like!

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Mapping Guide 1: Exploring Self (Map 1)

Physical, Health, Appearance

Social Relationships

Learning, Problem Solving, Decision Making

Motivation and Emotions

What are your strengths?

Ethics, Morals, Beliefs

Job/Career?

How can you use your strengths to improve your life?

Perhaps go to Map 2 (Problems)

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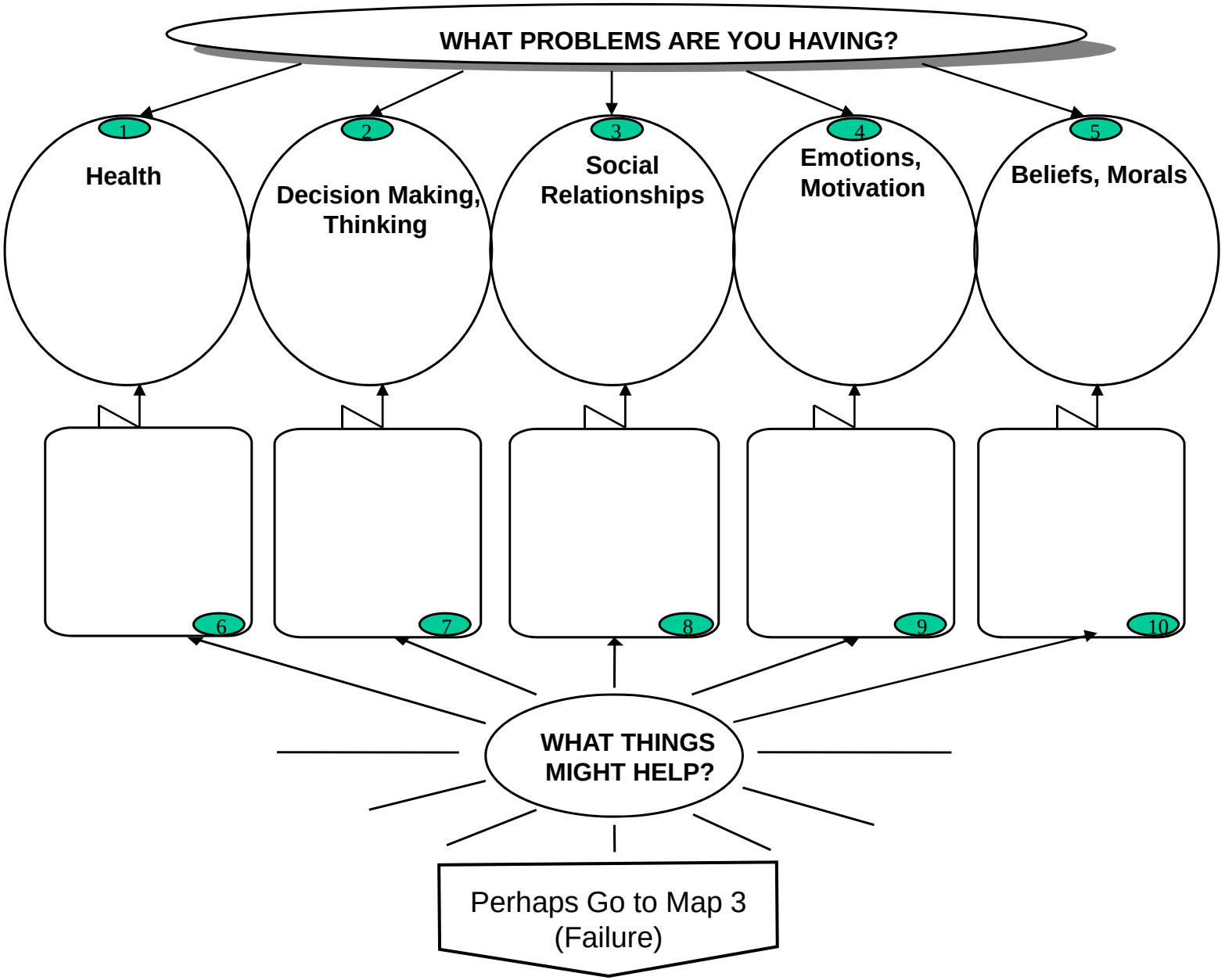

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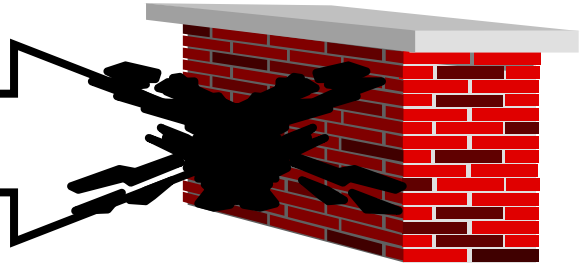
Mapping Guide 1: Exploring Self (Map 3)

RUNNING INTO A BRICK WALL

What was the unsuccessful attempt?

1



C = Characteristic
I = Influence
L = Leads to
P = Part

WHY WAS IT UNSUCCESSFUL?

P

Your role?

2

P

Other people?

3

P

Describe how this has happened to you before?

4

L

What can you do differently next time?

5

Perhaps Go to Map 4 (Success)

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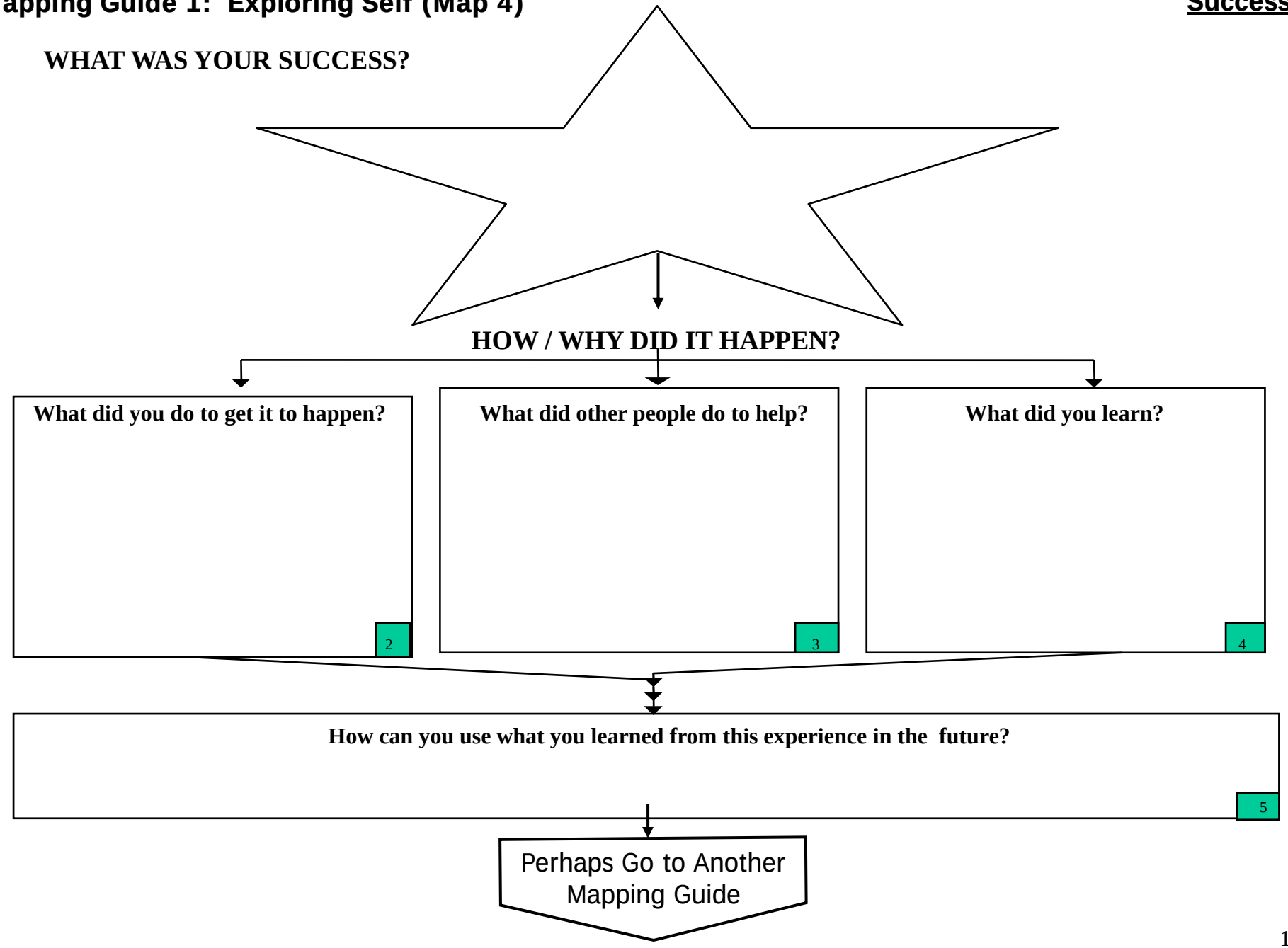
Mapping Guide 1: Exploring Self (Map 4)

Success



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MAPPING GUIDE 2: SOCIAL IMPROVEMENT MAPS

Purpose: These maps can help a person better understand and relate to others.

Method: Use Social Improvement Maps 1 – 4 to guide thinking. Use "Free" Mapping as needed (see Mapping Guide 8, page 36).

There are no rules; use them anyway you like!

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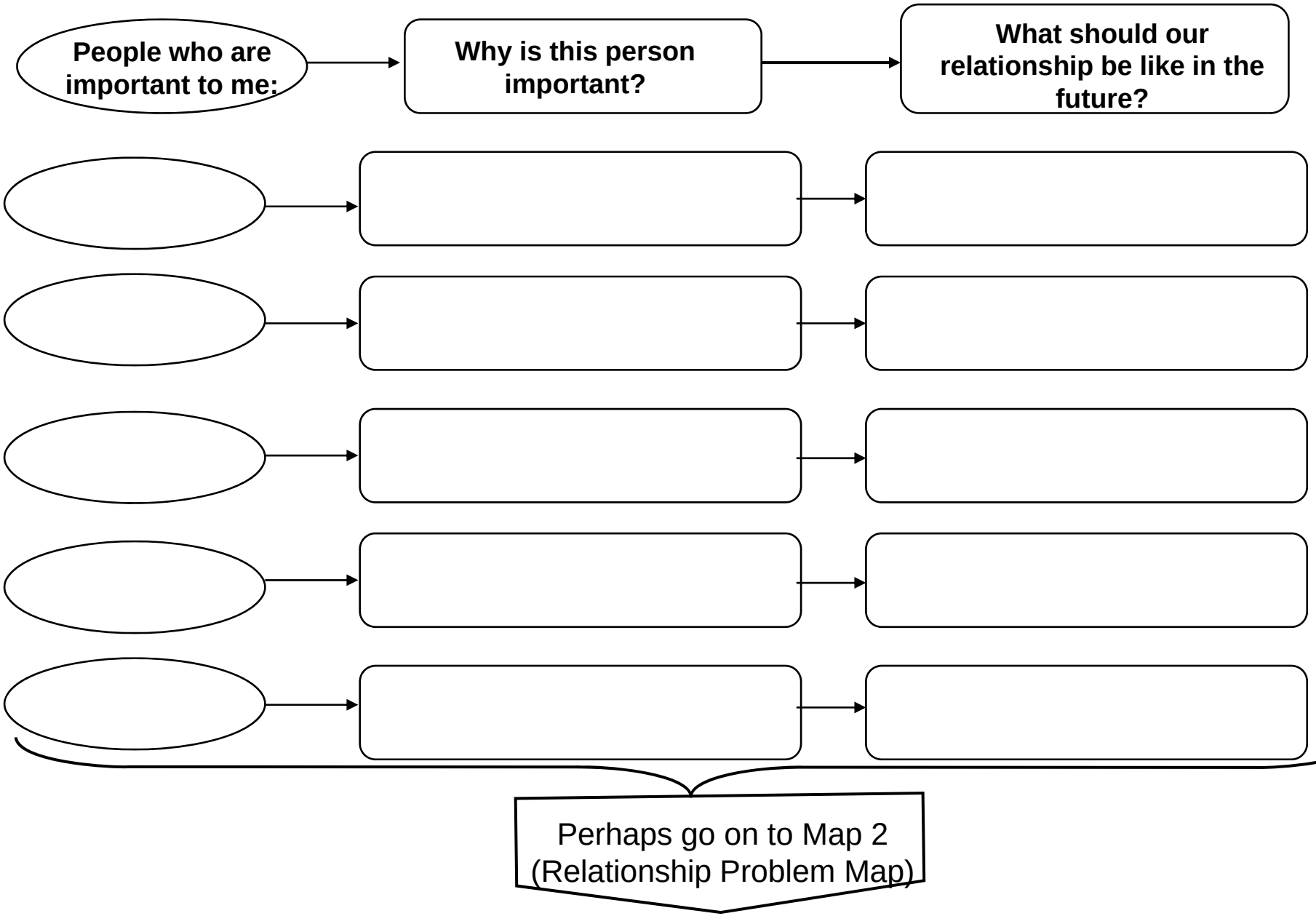
Mapping Guide 2: Social Improvement (Map 1)

Important People



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Mapping Guide 2: Social improvement (Map 2)

Relationship Problem

YOU ARE HAVING A PROBLEM WITH ANOTHER PERSON?

How would someone who was not involved describe it? 1

YOU

THE OTHER PERSON INVOLVED IN THIS PROBLEM

How do you see it? 2

Why do you see it that way? 3

SOLVING PROBLEMS WITH OTHERS

How does the other person see it? 4

Why does the other person see it that way? 5

What can you do about it?

- Thoughts/feelings?
- Actions?

Perhaps go to Map 3 (Crucial Conversation)

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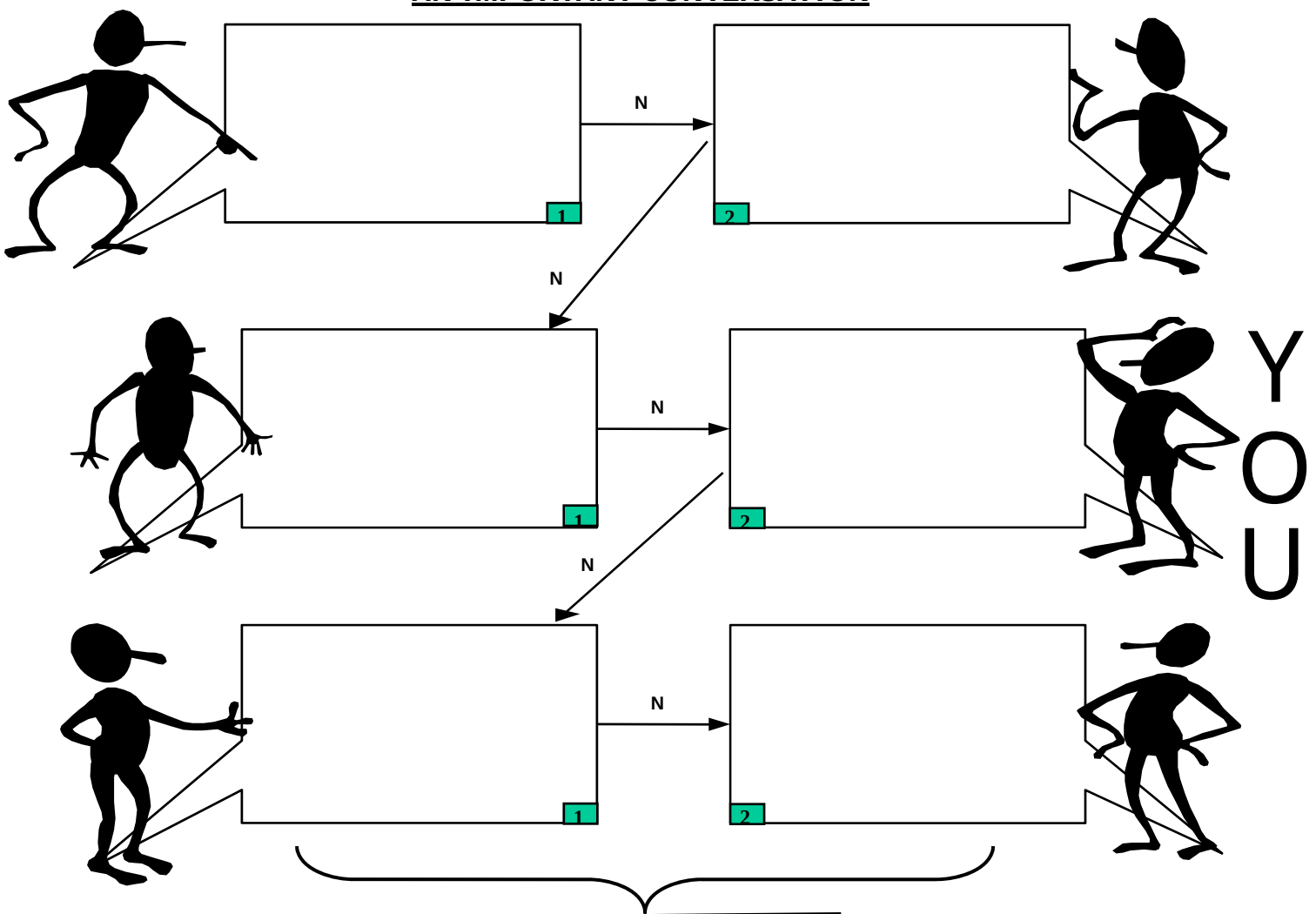
AN IMPORTANT CONVERSATION

OTHER PERSON

YOU



N = Next

Perhaps go to another Map Guide

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MAPPING GUIDE 3: DECISION-MAKING MAPS

Purpose: These maps can help a person think through an important decision.

Method: Use Decision Making Maps 1-3 to guide thinking. Use "Free" Mapping as needed (see Mapping Guide 8, page 36).

There are no rules; use them anyway you like!

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Mapping Guide 3: Decision Making (Map 1)

Examining Choices

YOU HAVE A DECISION TO MAKE ABOUT...

Possible Choices You Can Make

A

B

C

Consequences of Each Choice

A	B	C
Negative	Negative	Negative
POSITIVE	POSITIVE	POSITIVE

WHAT IS YOUR DECISION?

Go to Map 2
(Acting on Decision)

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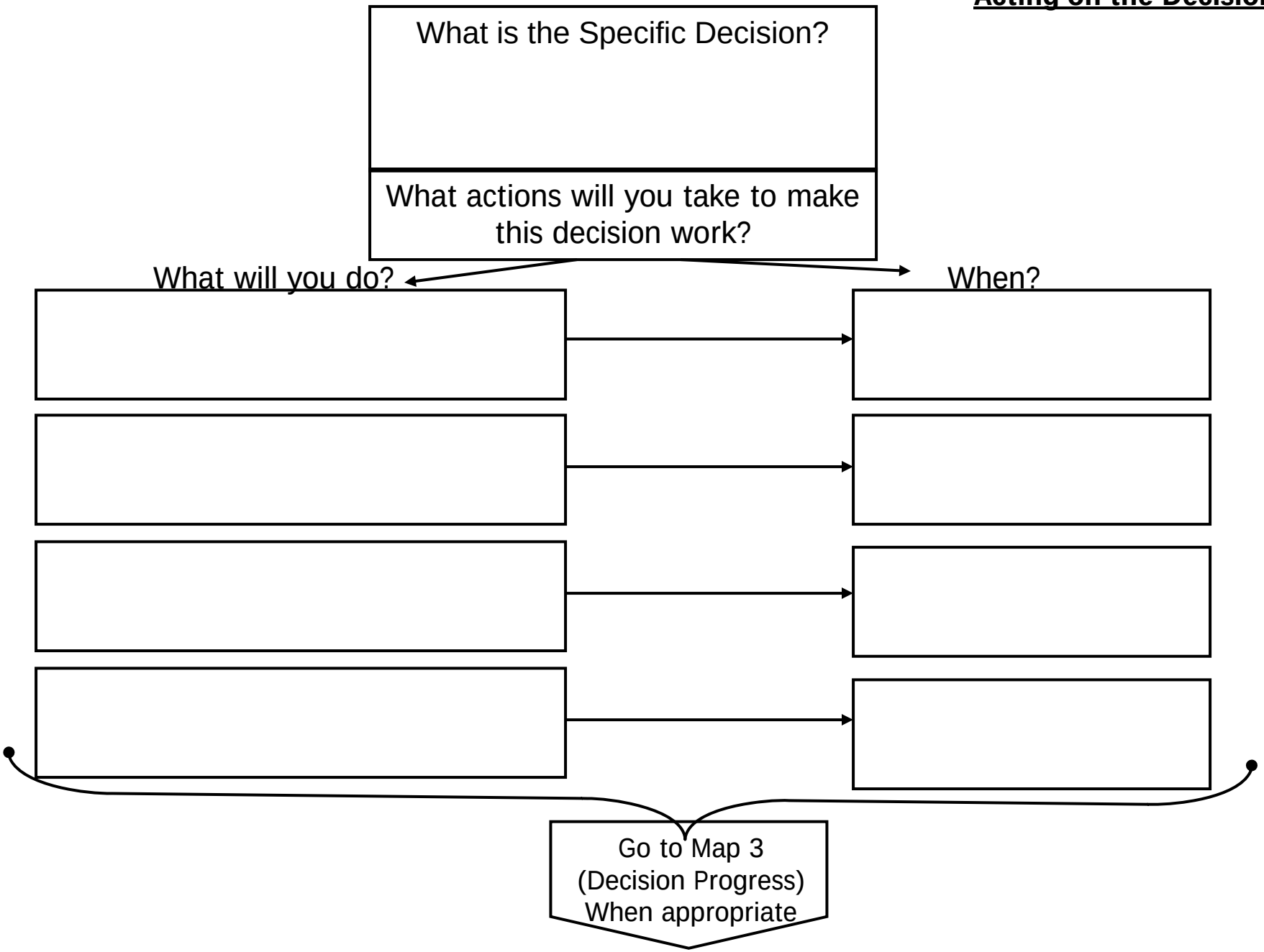
Mapping Guide 3: Decision Making (Map 2)

Acting on the Decision



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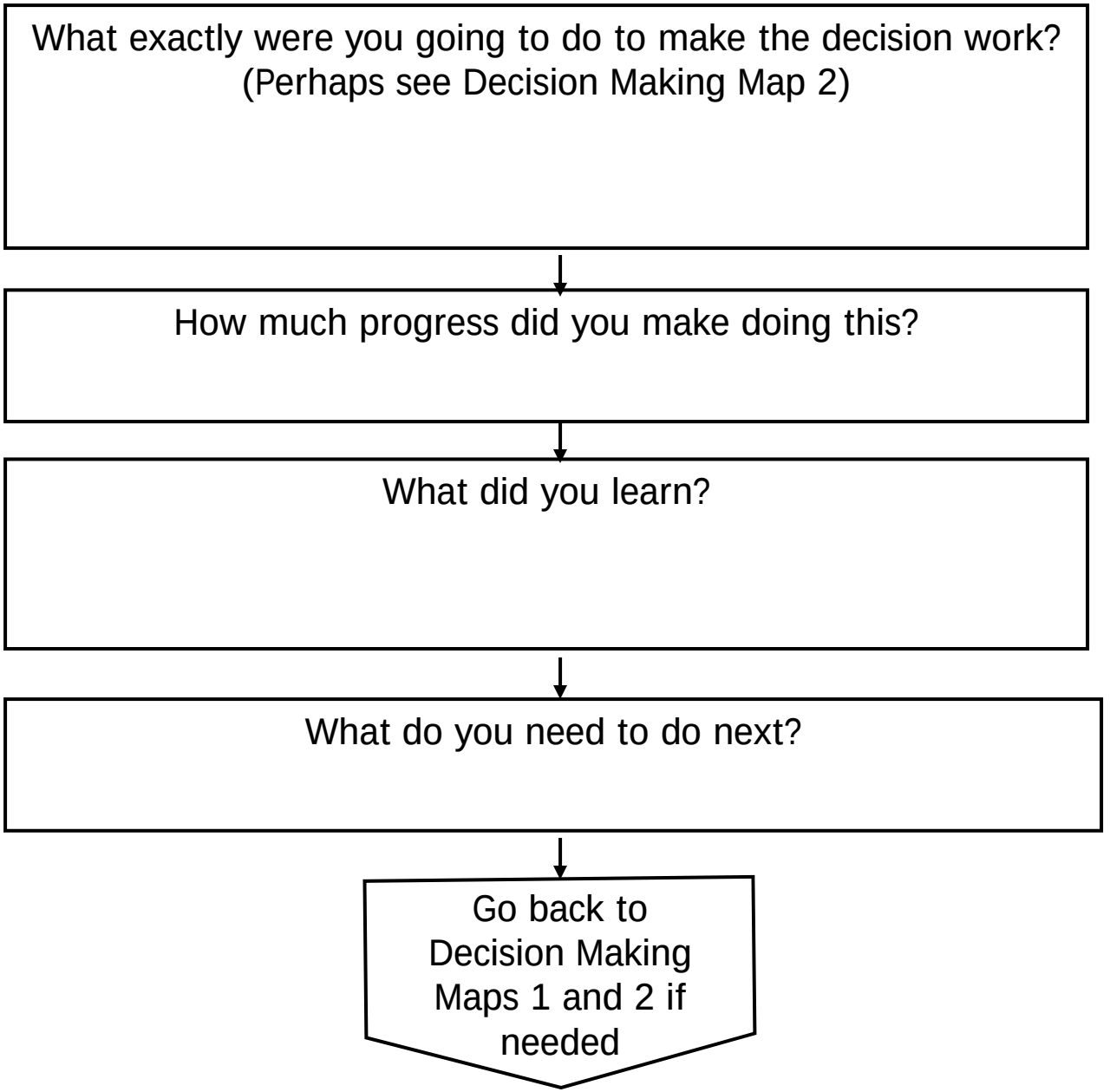
Decision Progress



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MAPPING GUIDE 4: TAKING CONTROL MAPS

Purpose: These maps can help a person cope with LEEPS:

Life

Events (e.g., a relapse, argument with a family member, losing a job)
Emotions (e.g., anger, anxiety, depression)
Problems (e.g., a problem with transportation, eating disorder, money problems)
***S**uccesses (e.g., getting a job, resisting drugs, getting along with a friend)

***** These are things that a person would like to have happen again in the future.

Method: Use Taking Control Maps 1 thru 3 to guide thinking. Use "Free" Mapping as needed (see Mapping Guide 8, page 36).

There are no rules; use them anyway you like.

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Mapping Guide 4: Taking Control (Map 1)

LEEPS (Life Events, Emotions, Problems, Successes)
UNDERSTANDING

Describe the life event, emotion, problem or success:

↓

What caused or causes it to happen?

↓

What happened or happens as a result of it?

↓

What do you want to do about it in the future?

↓

Go to Map 2 (actions)

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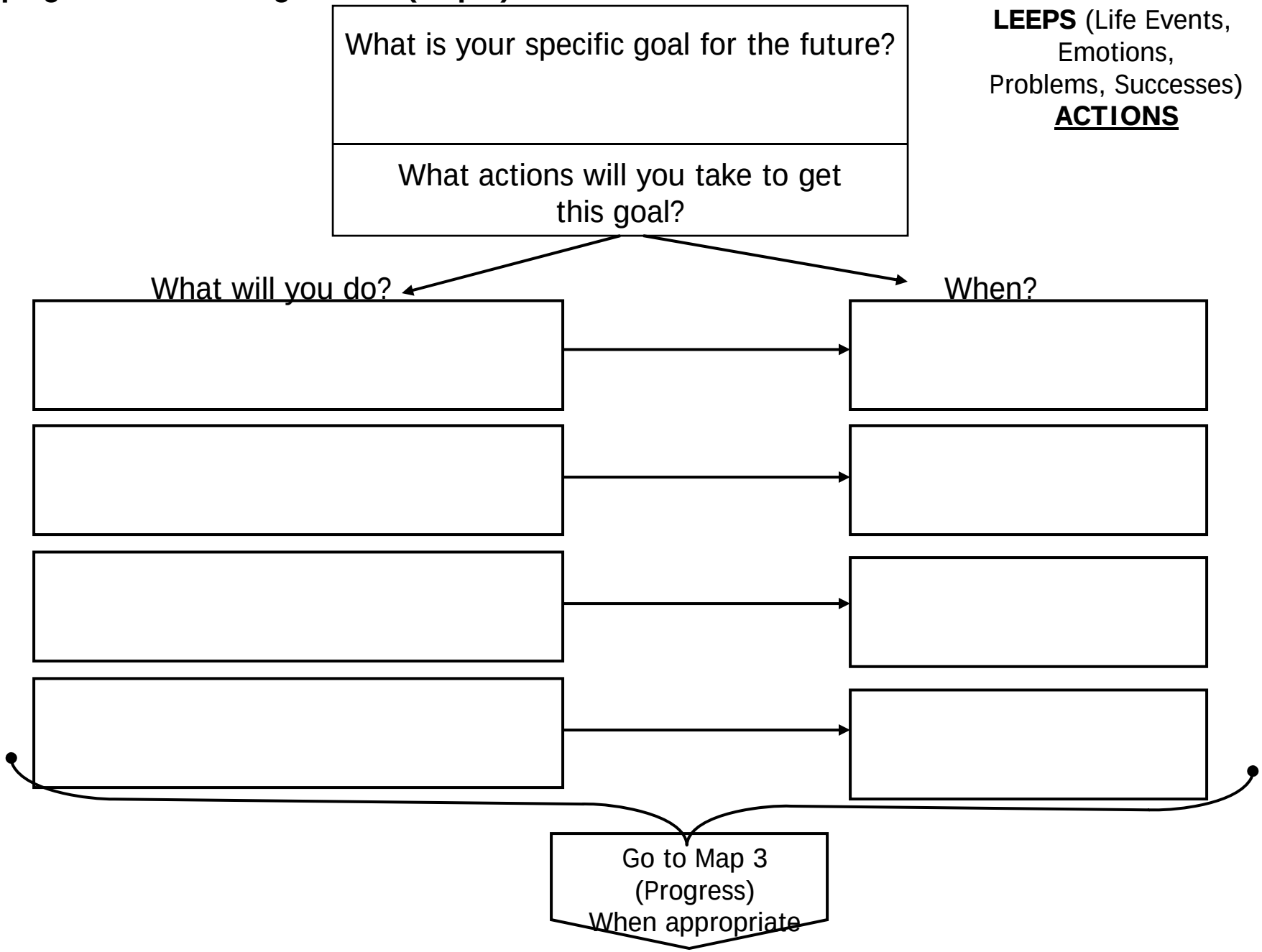
Mapping Guide 4: Taking Control (Map 2)



LEEPS (Life Events, Emotions, Problems, Successes)
ACTIONS

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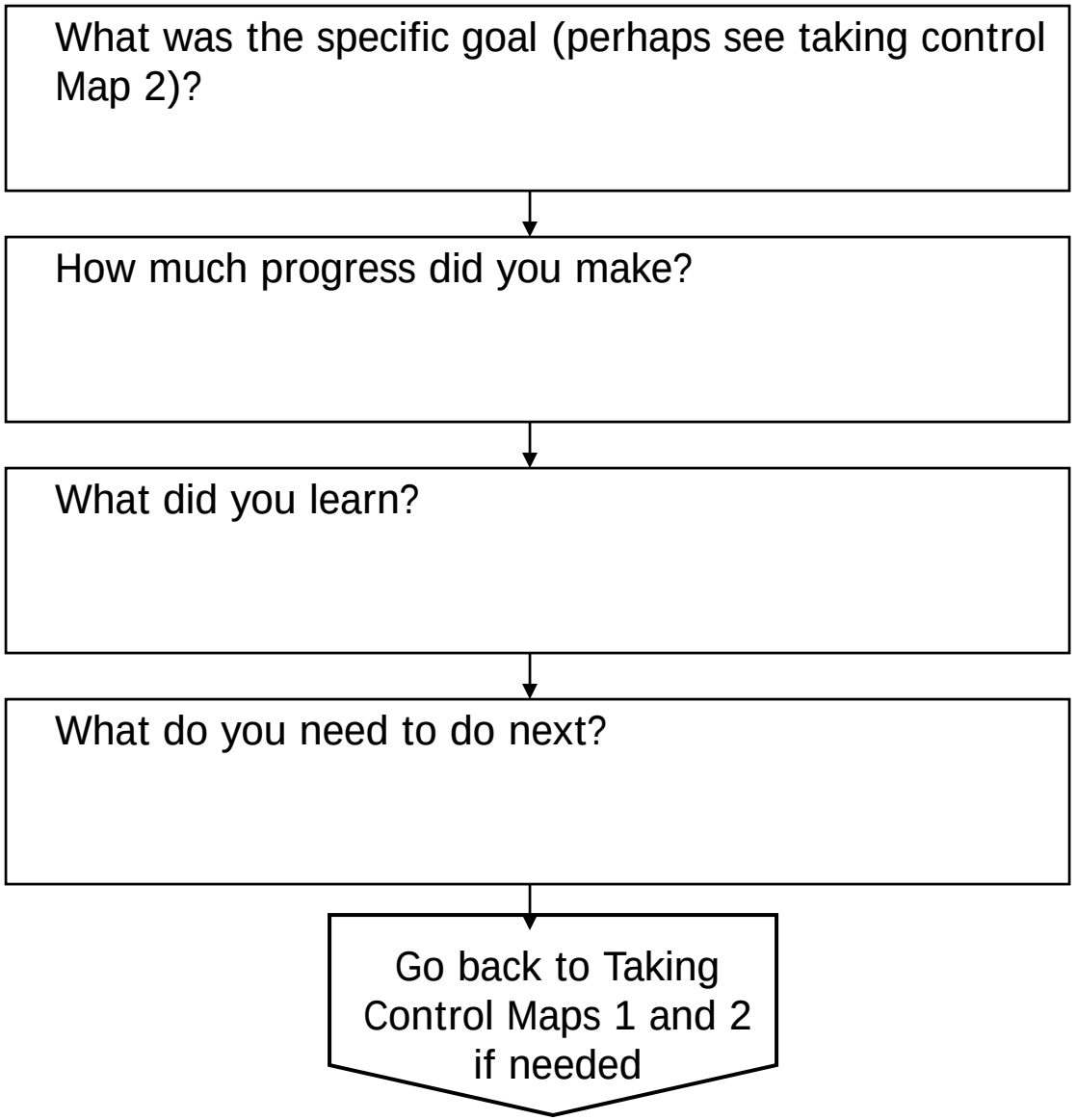
Mapping Guide 4: Taking Control (Map 3)

LEEPS (Life Events, Emotions, Problems, Successes)
PROGRESS



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MAPPING GUIDE 5: MONITORING PROGRESS

Purpose: These maps are designed as a guide to help clients understand, evaluate, and explain progress across key stages of change, as represented in the *TCU Treatment Process Model*. They also are tools for planning therapeutic activities that will sustain or increase future progress.

Method: The first map serves as an orientation and overall review of "how treatment works" and the program expectations for clients in treatment.

In Monitoring Progress Map 2, the client fills in the barometer for each stage indicating strength of commitment and progress. The client explains the ratings and describes what will be done so progress will be maintained or improved in the future. Ratings can be made as homework, or during sessions with counselor assistance. They can be repeated as needed to review progress.

Because these client functioning categories also are measured by the CEST assessment, comparisons can be made between client ratings on these "gauges" and scale scores.

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How Treatment "Works"

Client Evaluation of Self & Treatment (CEST) ratings can be used to monitor client status & progress in treatment

Expectations of Clients:

1. Be ready to change
2. Face your problems
3. Make realistic plans
4. Follow recovery steps
5. Own **your** treatment

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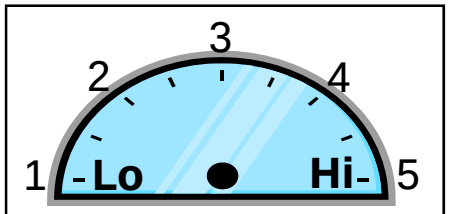
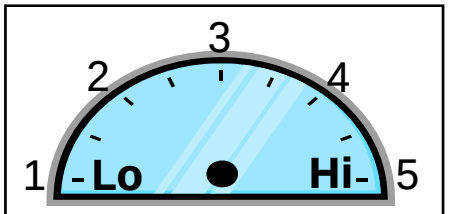
Mapping Guide 5: Monitoring Progress (Map 2)



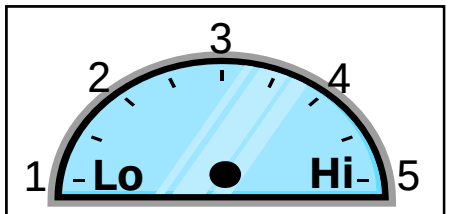
Explain:

What will you do?



Explain:

What will you do?



Explain:

What will you do?

Recovery in Treatment

Readiness for treatment & change

Early Engagement
Participation & relationship with counselor(s)

Early Recovery
Changes in thinking & actions

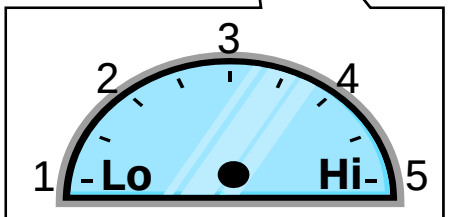
Plans for staying in treatment

Progress Towards Recovery

Mark your Progress Gauges!

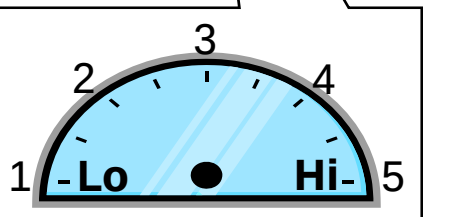
Name: _____

Date: _____



Explain:

What will you do?



Explain:

What will you do?

Question: How well do these ratings compare with CEST scores??

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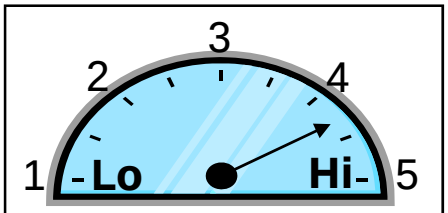
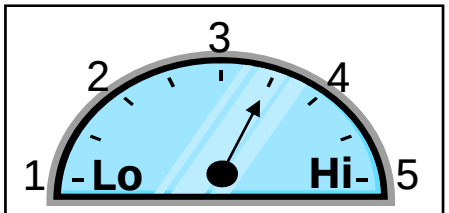
Mapping Guide 5: Monitoring Progress (Map 2 example**)**



Explain: *I am very motivated to get my life straight..*

What will you do?

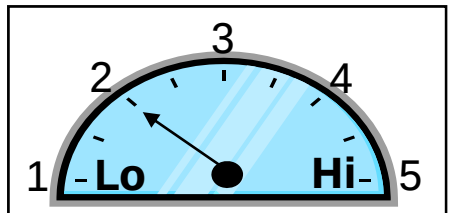
I plan to keep trying even if I have setbacks.



Explain: *I'm doing much better with my daughter, but I still argue with mom.*

What will you do?

I will try to see my mom's side of things when we talk.



Explain: *I slipped last week.*

What will you do?

I'm going to stop hanging out with friends who do "coke."

Recovery in Treatment

Readiness for treatment & change

Early Engagement Participation & relationship with counselor(s)

Early Recovery Changes in thinking & actions

Plans for staying in treatment

Progress Towards Recovery

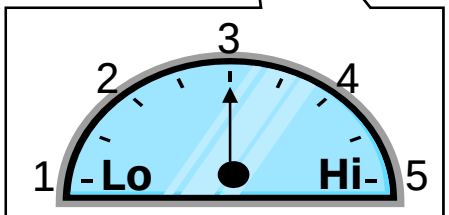
Mark your **Progress Gauges!**

Name:

Chris

Date:

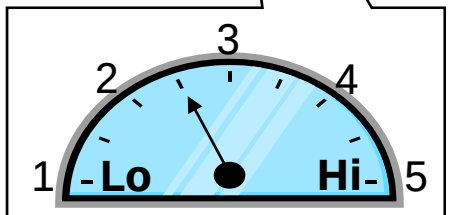
7/27/05



Explain: *I missed a meeting , but I really like my counselor.*

What will you do?

I will keep a calendar so I won't miss anymore sessions.



Explain: *I'm thinking I can do this on my own but my counselor doesn't.*

What will you do?

I really need to listen to my counselor since he has seen people like me before.

Question: How well do these ratings compare with CEST scores??

MAPPING GUIDE 6: RELAPSE AND DISEASE MAPS

Purpose: These maps will help a person understand and manage relapse and serious diseases.

Method: Use Managing Relapse and Disease Maps to guide thinking. Use "Free" Mapping as needed (see Mapping Guide 8, page 36).

There are no rules; use these anyway you like!

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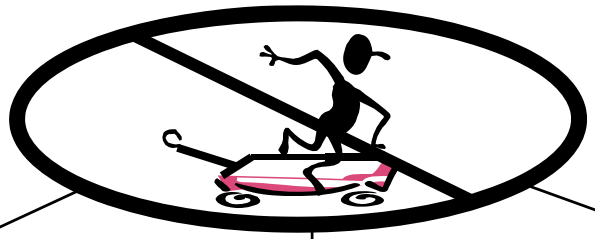
Mapping Guide 6:
Relapse and Disease (Map 1)

KEEPING MYSELF FROM RELAPSING

Avoiding Relapse



This is how I will deal with PEOPLE who might lead me to relapse.	This is how I will deal with SITUATIONS that might lead me to relapse.	This is how I will deal with FEELINGS, THOUGHTS, AND NEEDS that might lead me to relapse.
(a) These are the warning signs I will look for:	**(a) These are the warning signs I will look for:**	**(a) These are the warning signs I will look for:**
(b) This is what I will do:	**(b) This is what I will do:**	**(b) This is what I will do:**

Perhaps Go to Map 2
(Recovery from relapse)

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Mapping Guide 6:
Relapse and Disease (Map 2)

IF I DO RELAPSE, THIS IS WHAT I WILL DO

Recovery from relapse

This is what I will do to get the help I need from other people.

This is what I will do to minimize the damage to myself.

This is what I will say to myself to keep from slipping again.

Perhaps Go to Map 3
(Avoiding serious disease)

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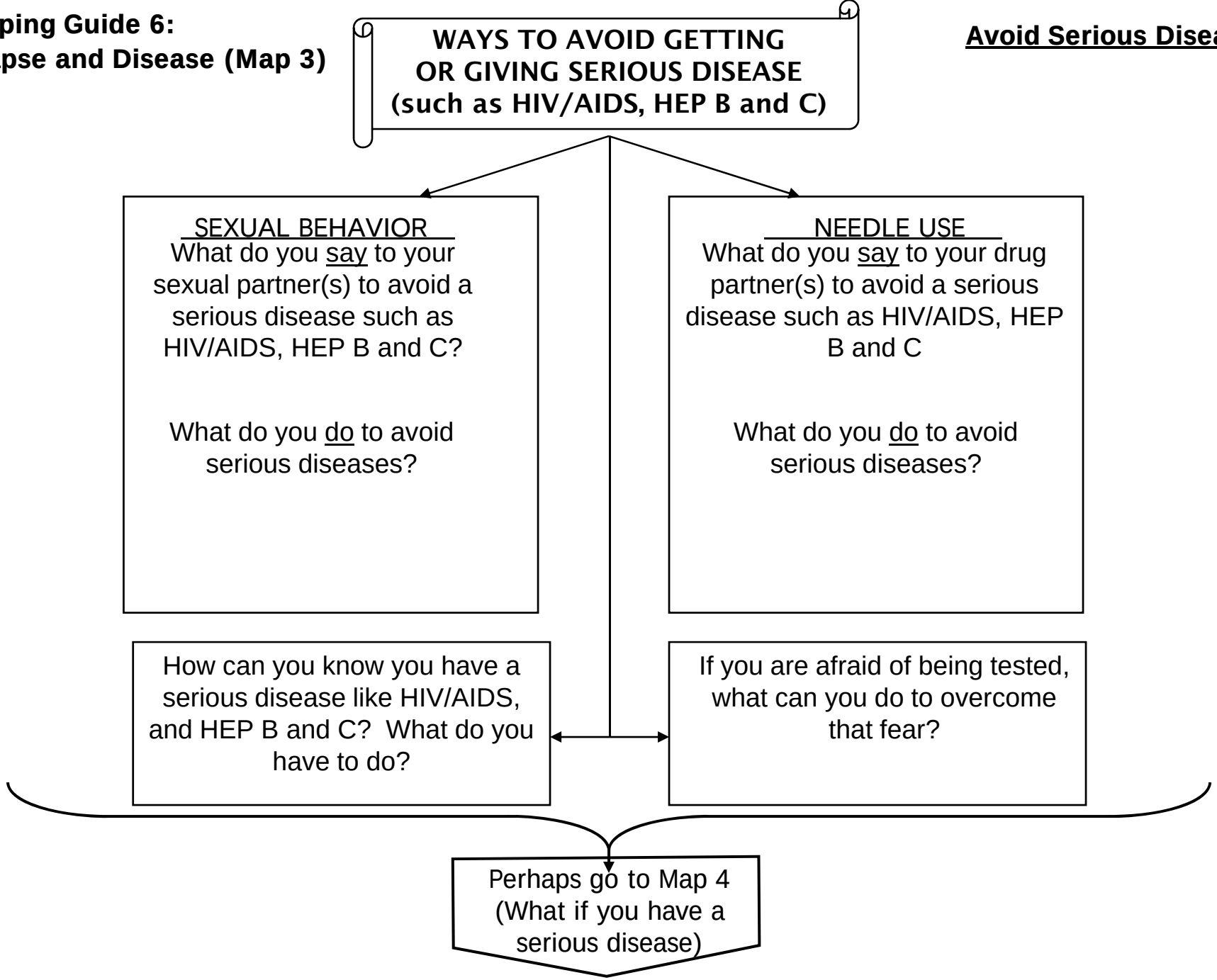
Mapping Guide 6:
Relapse and Disease (Map 3)

Avoid Serious Disease



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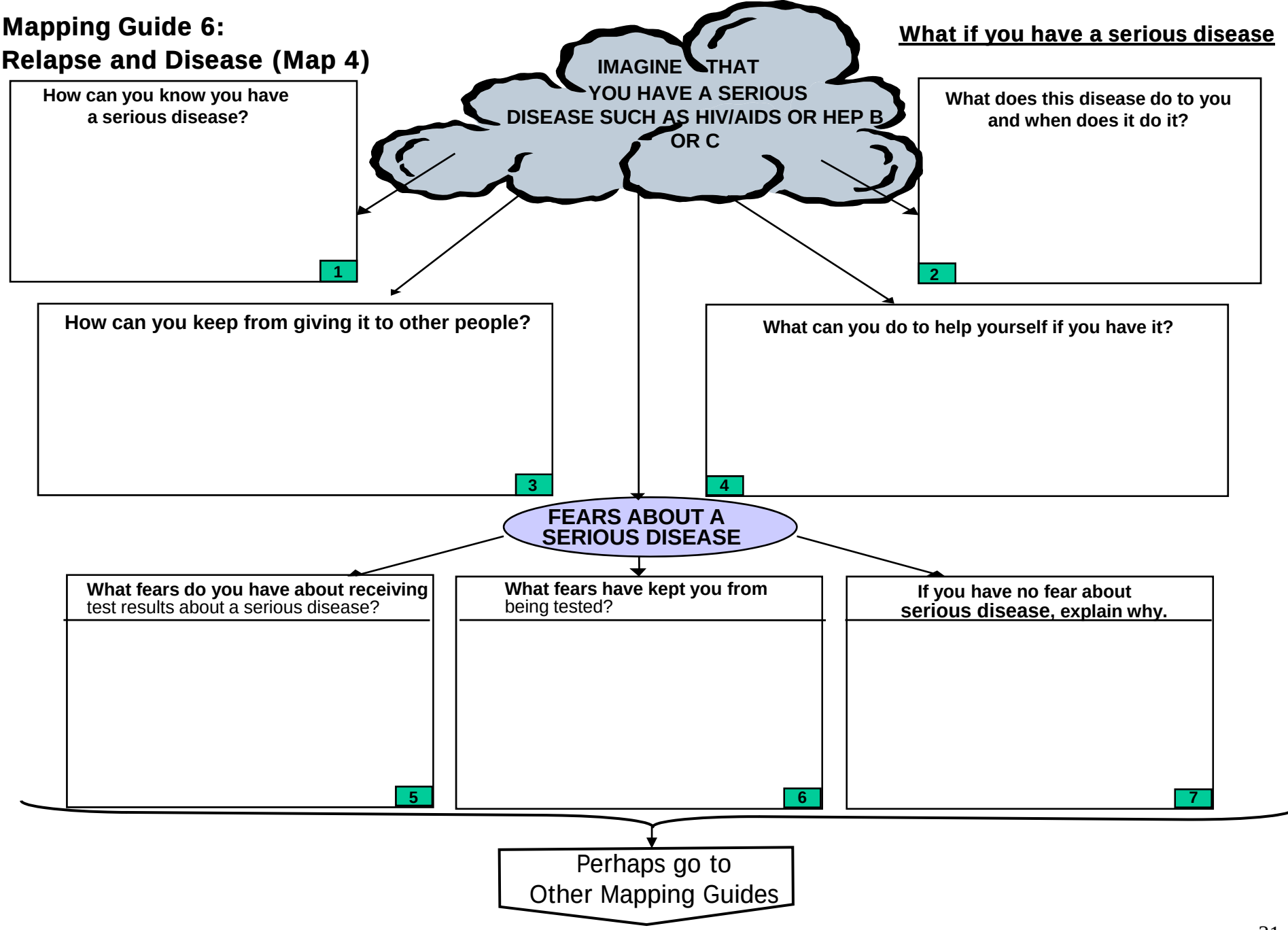
Mapping Guide 6:
Relapse and Disease (Map 4)

What if you have a serious disease



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MAPPING GUIDE 7: GENERAL PLANNING

Purpose: To help a person examine a goal and create an action plan. It is similar to Care Planning but can be used with any goal.

Method: Use General Planning Maps 1 thru 3 to guide thinking. Use Free Mapping as needed (see Mapping Guide 8, page 36).

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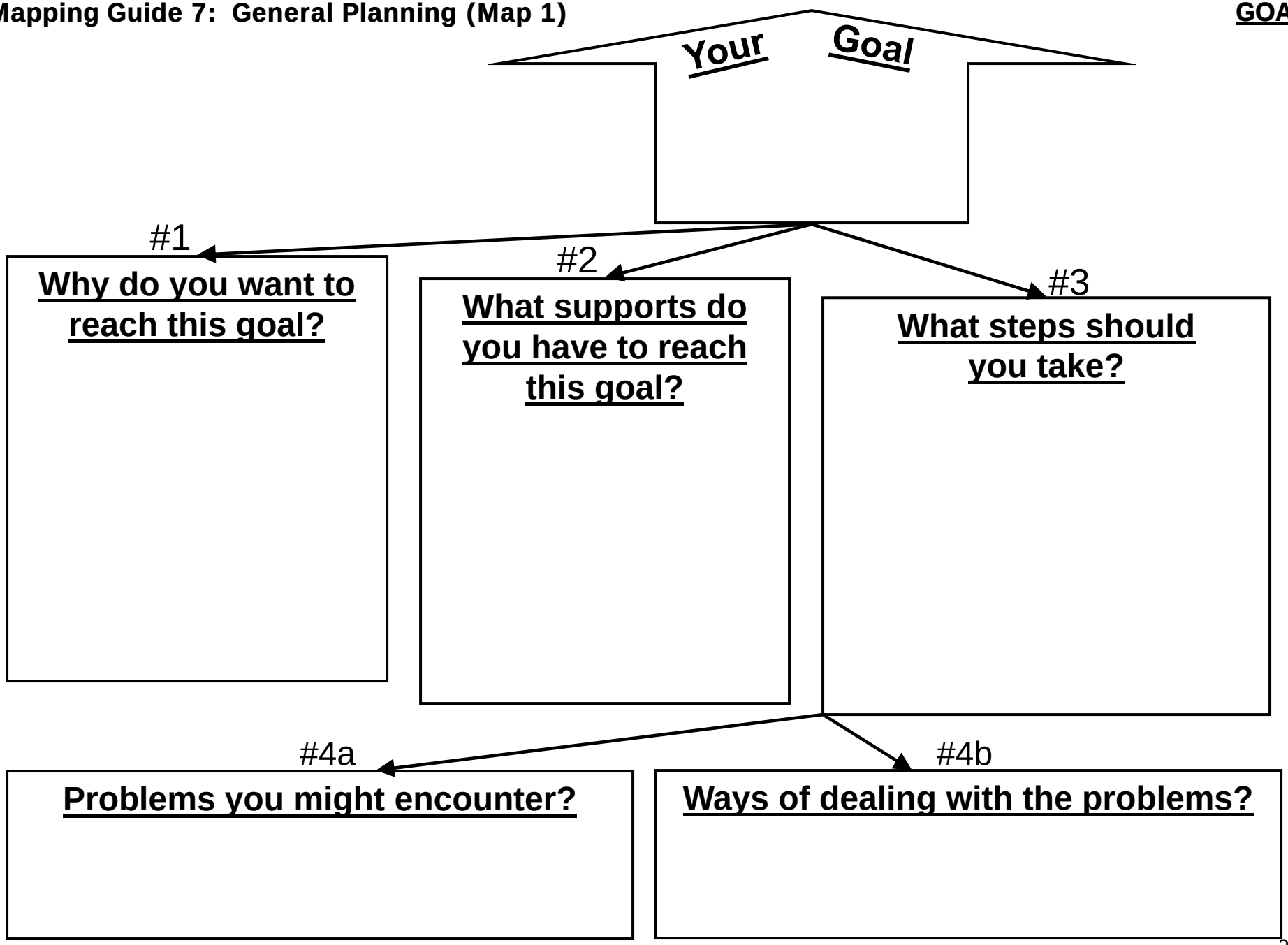
Mapping Guide 7: General Planning (Map 1)

GOAL



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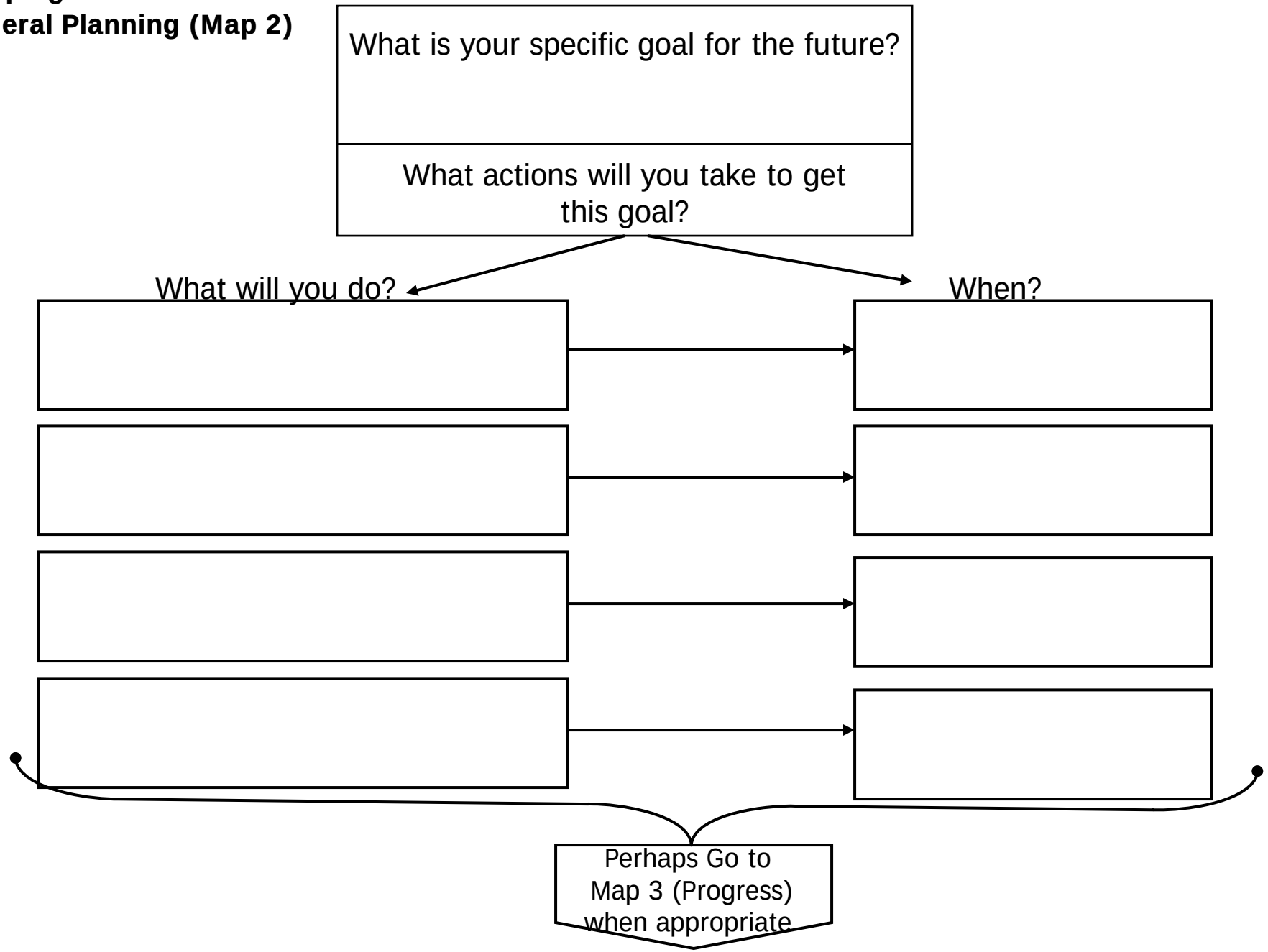
Mapping Guide 7:
General Planning (Map 2)

ACTION PLANS



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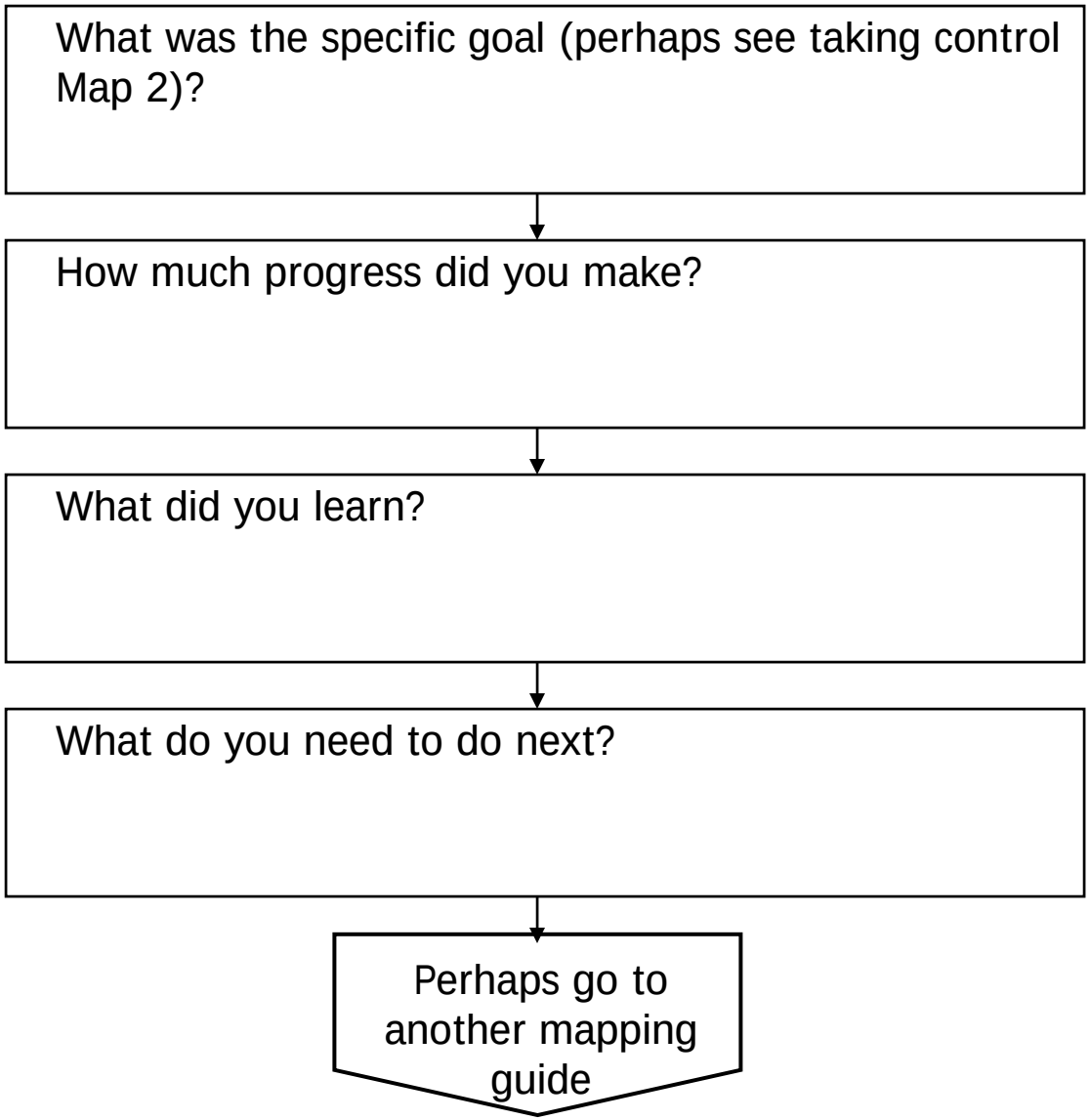

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MAPPING GUIDE 8: FREE MAPPING

Purpose: To help a person create Free Maps.

Method: Use the Free Map Guide to create maps on important thoughts, feelings, and actions. These Free Maps can be used by themselves or together with any of the Mapping Guides.

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Mapping Guide 8: Free Mapping (Guide)

Instructions for Growing a Free Map:

1. Put your main thought, feeling, or action in a box in the center of the sheet or near the top.
2. Ask a question about the thought, feeling, or action. Put the answer in a box and connect it to the main box with a line.
   Here are some good questions, but you may come up with better ones.
   a. What things lead to it or cause it?
   b. What does it lead to or cause?
   c. What influences it?
   d. What is it like? What is it similar to?
   e. What happens at the same time?
3. Repeat 2 as much as needed then do the same thing with some of the other boxes you created (i.e., ask questions and correct answers).
4. Once you have made some progress on the map, ask what could you change or look at differently in order to improve things in your life.
5. Neatness is not important. Return to the map as often as you like.

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Case Study of CHRIS: *A Sample of Maps*

"Chris" is a fictional client who has problems with alcohol and cocaine use, as well as some interpersonal and career dilemmas that need attention.

In this case study example for using guide maps, Chris and the counselor focus on some of the interpersonal issues and begin to work on improving career opportunities.

Not all the maps presented earlier in this guidebook are completed here, and some maps are used "out of sequence" in order to illustrate the flexibility in their applications. In other situations, a different collection might be used – and some could be used more than once.

The goal of this case study is to give a simple example for how mapping tools can be used during counseling.

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Mapping Guide 1: Exploring Self (Map 1)

Chris: A fictional case study **(1): Strengths**

Physical, Health, Appearance

I'm pretty good looking, not too heavy.

Social Relationships

I have a couple of friends and I get along pretty well with my daughter.

Learning, Problem Solving, Decision Making

When I'm clear headed I make pretty good decisions. I can also talk well.

What are your strengths?

Motivation and Emotions

I really want to change my life! I do know what it's like to be happy.

Ethics, Morals, Beliefs

I try hard to do the "right thing." I love my daughter.

Job/Career?

I don't have much hope. Been fired twice. Lots of jobs that I don't like, but I do have some computer skills.

How can you use your strengths to improve your life?

Once I get control of my drug habit, maybe I can use my skills and looks to go into computer sales.

Perhaps go to Map 2 (Problems)

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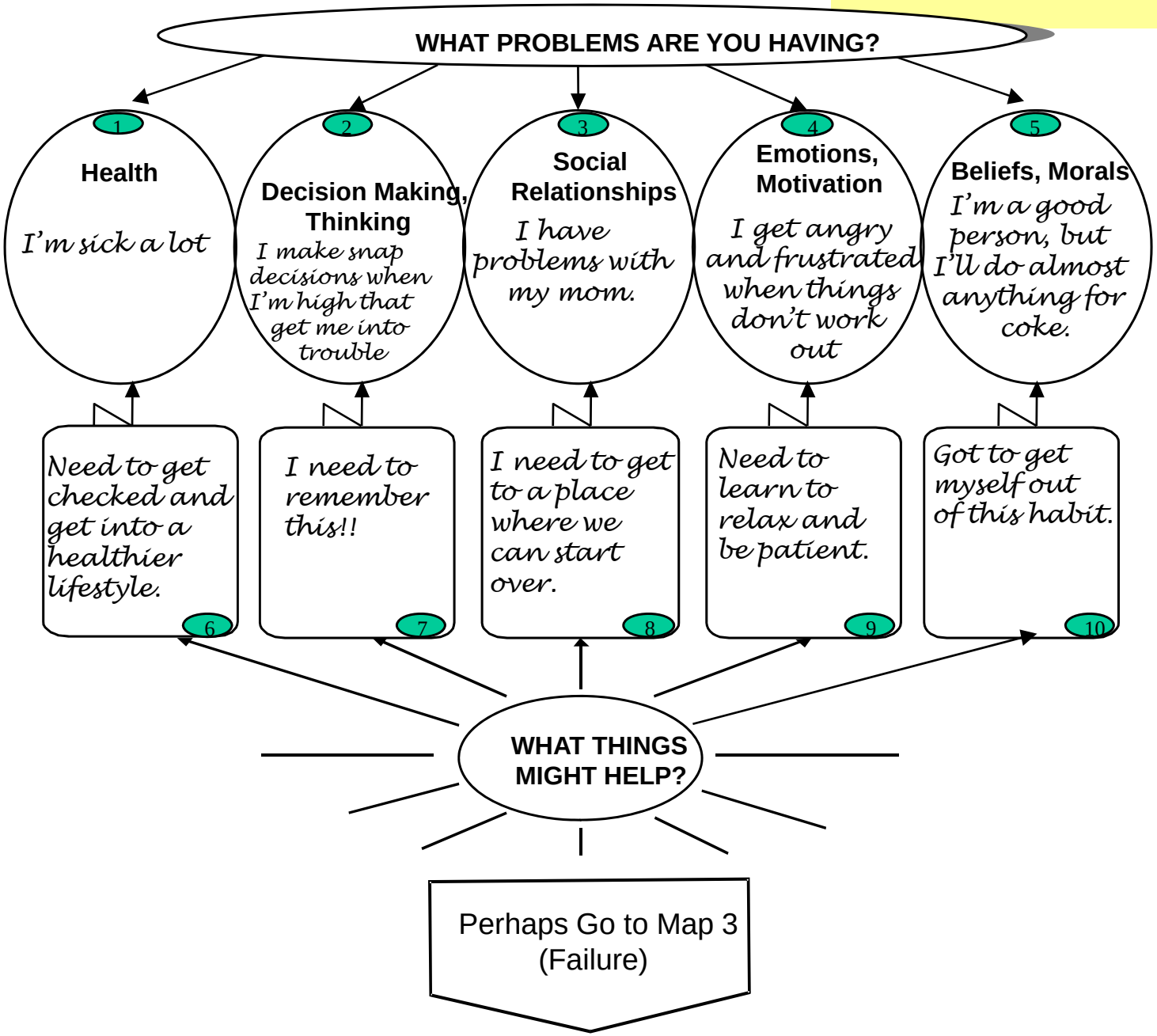
CHRIS: A fictional case study **(2): Problems**



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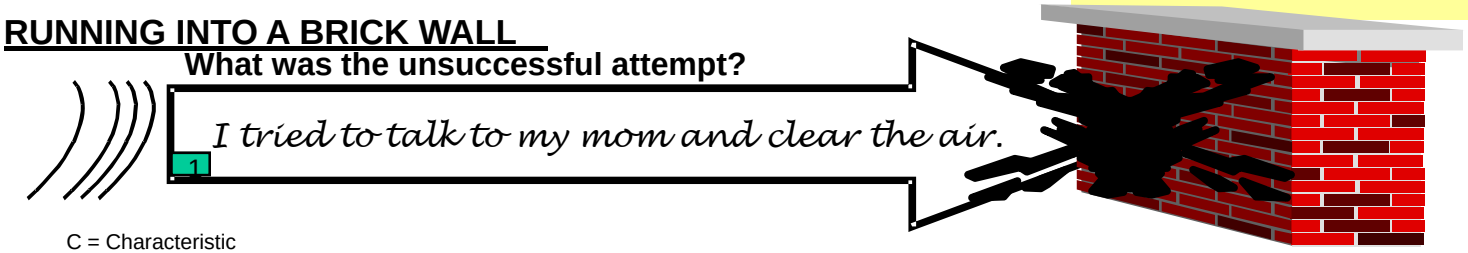
CHRIS: A fictional case study **(3): Failure**

RUNNING INTO A BRICK WALL

What was the unsuccessful attempt?

I tried to talk to my mom and clear the air. 1



C = Characteristic
I = Influence
L = Leads to
P = Part

WHY WAS IT UNSUCCESSFUL?

P

Your role?

I expected her to see my side right away and got angry when she didn't. 2

P

Other people?

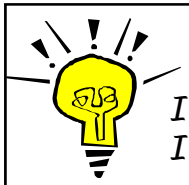
My mom thought this was just another one of my scams. 3

P

Describe how this has happened to you before?

I have had this happen with friends and bosses. 4

L



What can you do differently next time?

I need to be more patient and try to see where they are coming from.
I need to prove myself to them. 5

Perhaps Go to Map 4 (Success)

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CHRIS: A fictional case study **(4): Success**

WHAT WAS YOUR SUCCESS?

I had a good day at the zoo with my daughter.

HOW / WHY DID IT HAPPEN?

What did you do to get it to happen?

I was in a good mood (not high) and I tried to make it all about her.

2

What did other people do to help?

She was tense at first and then relaxed and had fun. She thanked me and hugged me. I feel great!

3

What did you learn?

If I can focus on another person's needs, I can also get what I want.

4

How can you use what you learned from this experience in the future?

Maybe I can try this approach with my mom. Maybe I can take her to lunch sometime.

5

Perhaps Go to Another Mapping Guide

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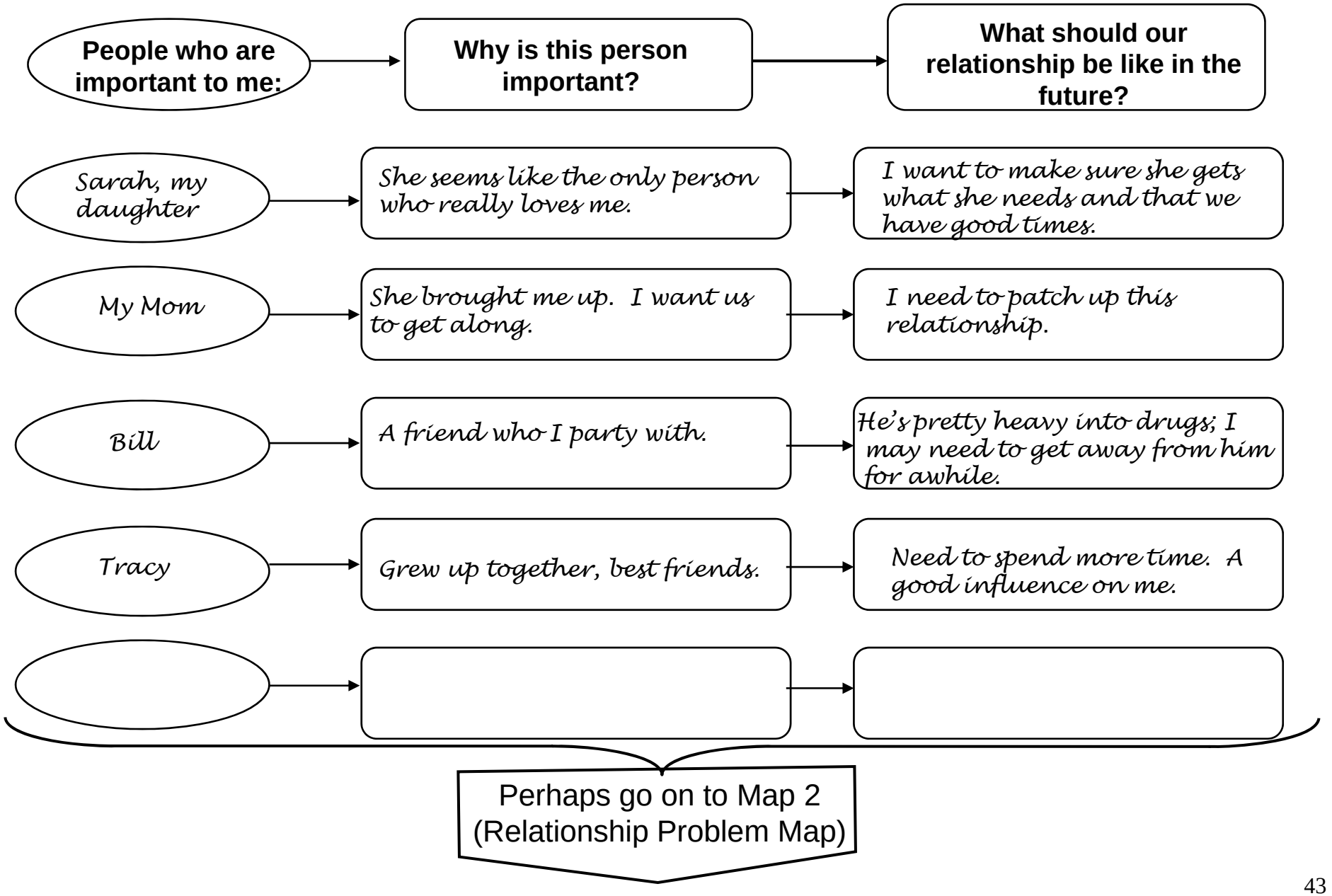
Mapping Guide 2: Social Improvement (Map 1)

Chris: A fictional case study **(5): Important People**



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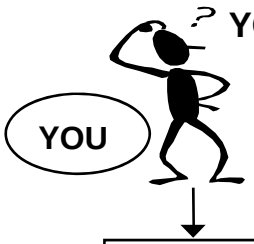
Mapping Guide 2: Social Improvement (Map 2)

Chris: A fictional case study **(6): Relationship Problem**

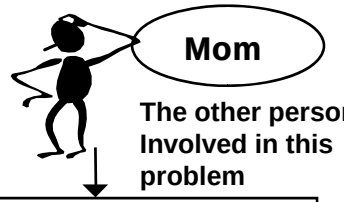
YOU ARE HAVING A PROBLEM WITH ANOTHER PERSON?



How would someone who was not involved describe it?

Mom accused you of turning your daughter against her.

1



The other person Involved in this problem

How do you see it?

I think my mom bad mouths me to Sarah, so I keep her away.

2

SOLVING PROBLEMS WITH OTHERS

How does the other person see it?

Mom probably thinks I'm keeping Sarah away just to spite her.

4

Why do you see it that way?

Sarah tells me this sometimes.

3

Why does the other person see it that way?

Because I have done other things to hurt her.

5

What can you do about it?

- Thoughts/feelings? *I can give mom another chance with Sarah and not be so paranoid.*
- Actions? *Talk to mom about my feelings about bad mouthing and see if we can reach an understanding.*

Perhaps go to Map 3 (Crucial Conversation)

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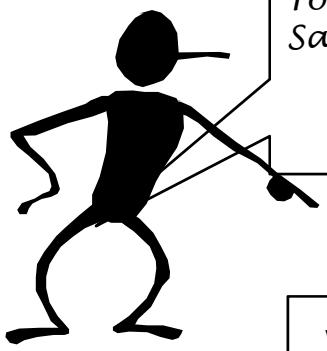
Chris: A fictional case study **(7):**
Crucial Conversation

AN IMPORTANT CONVERSATION

OTHER PERSON

MOM



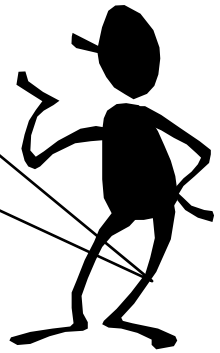
You don't even let Sarah stay over.

1

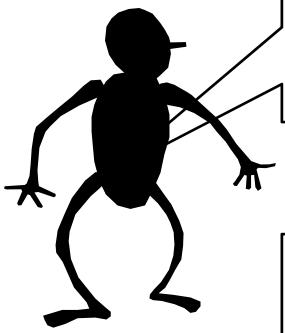
N

I think you are saying bad things about me to her when she is there.

2



N



Well, maybe I do some, but it's just the truth.

1

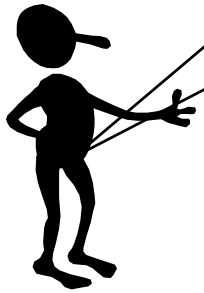
N

Yeah, but it makes it hard for her to respect me. Maybe you could just talk to me directly.

2

YOU

N



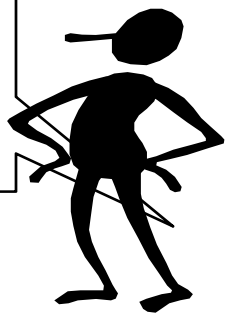
OK, but you're not going to like it.

1

N

I'll try to hear you out if you'll just keep it between us.

2



N = Next

Perhaps go to another Map Guide

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Chris: A fictional case study **(8): Examining Choices**

YOU HAVE A DECISION TO MAKE ABOUT... *Letting daughter stay overnight with my mom.*

Possible Choices You Can Make

A

Just let her go.

B

Just say no!

C

Let her go but have a talk with mom about conversations before hand.

Consequences of Each Choice

A	B	C
Negative *Mom probably will talk bad about me.*	**Negative** *. Mom unhappy.* *. Sarah misses out.*	**Negative** *Will take time. May be a hard talk.*
POSITIVE *Mom will be happy.* *Sarah will probably enjoy.*	**POSITIVE** *Easy, don't have to worry about trash talking.*	**POSITIVE** *. Mom and Sarah probably happy.* *. Mom may respect my wishes.*

WHAT IS YOUR DECISION?

I'll try (c), but if talk doesn't go well I may say no.

Go to Map 2 (Acting on Decision)

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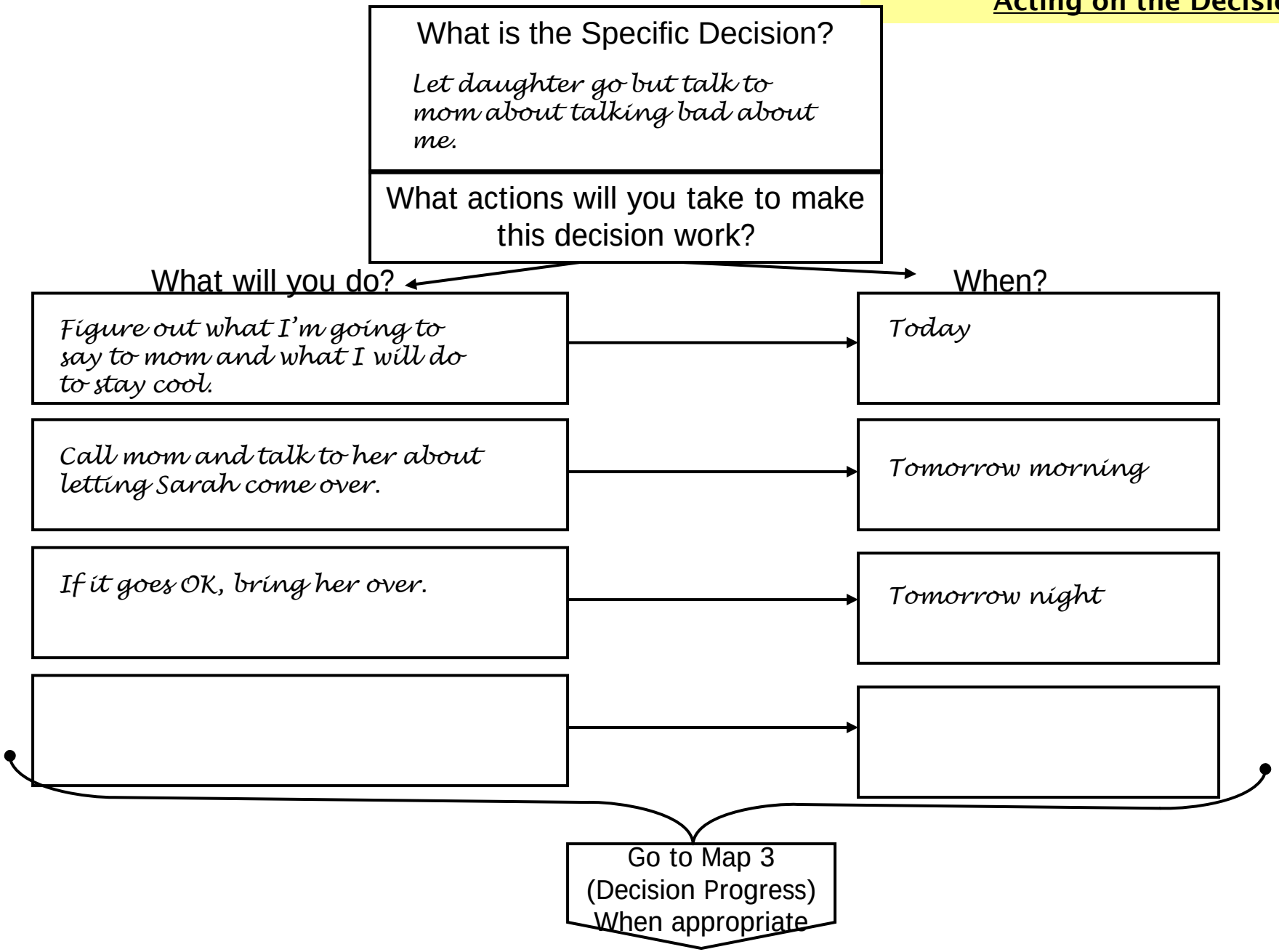

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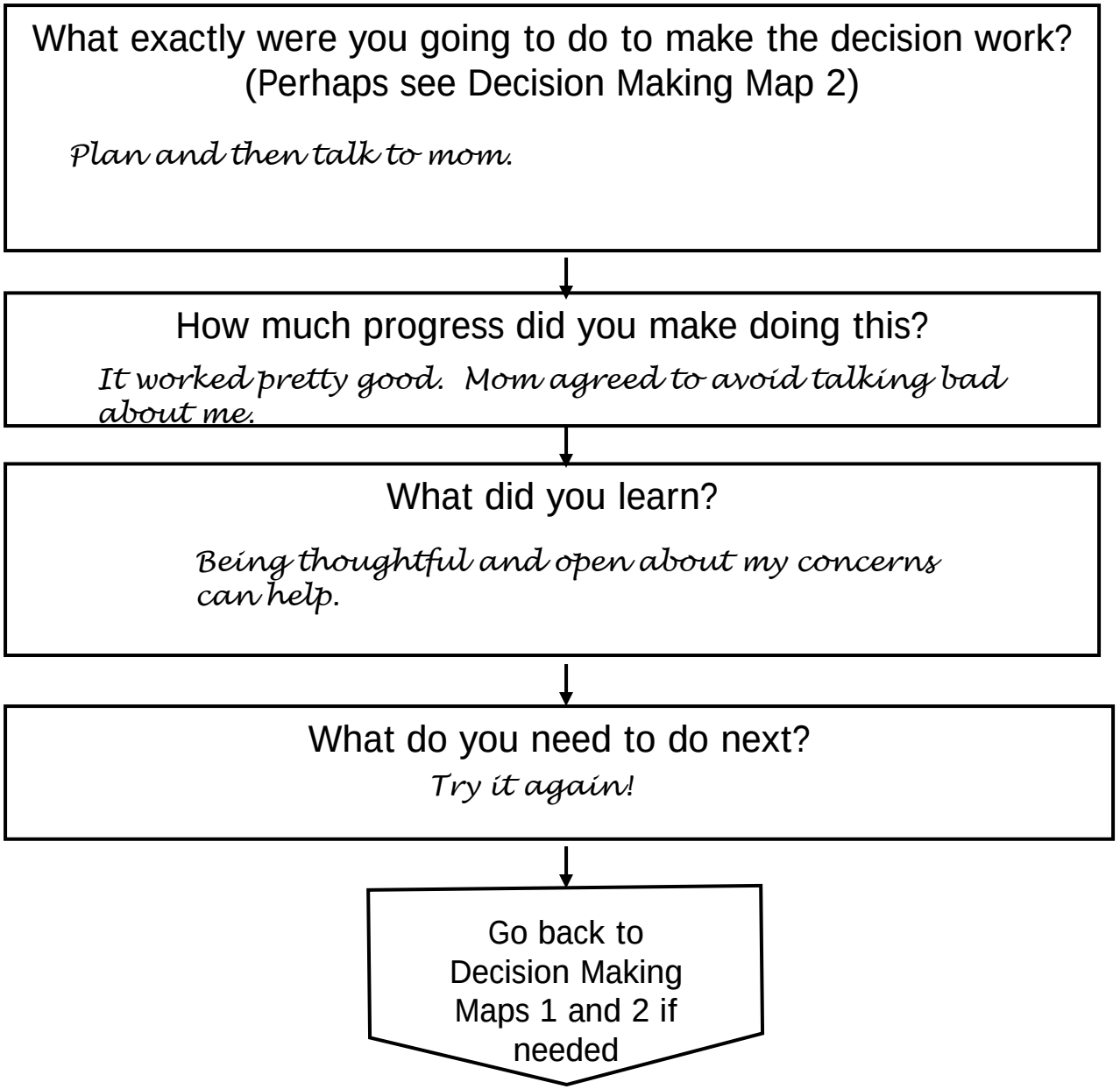
Chris: A fictional case study **(10): Decision Progress**



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Chris: A fictional case study **(11):**
Free Map Guide

Instructions for Growing a Free Map:

1. Put your main thought, feeling, or action in a box in the center of the sheet or near the top.
2. Ask a question about the thought, feeling, or action. Put the answer in a box and connect it to the main box with a line.
   Here are some good questions, but you may come up with better ones.
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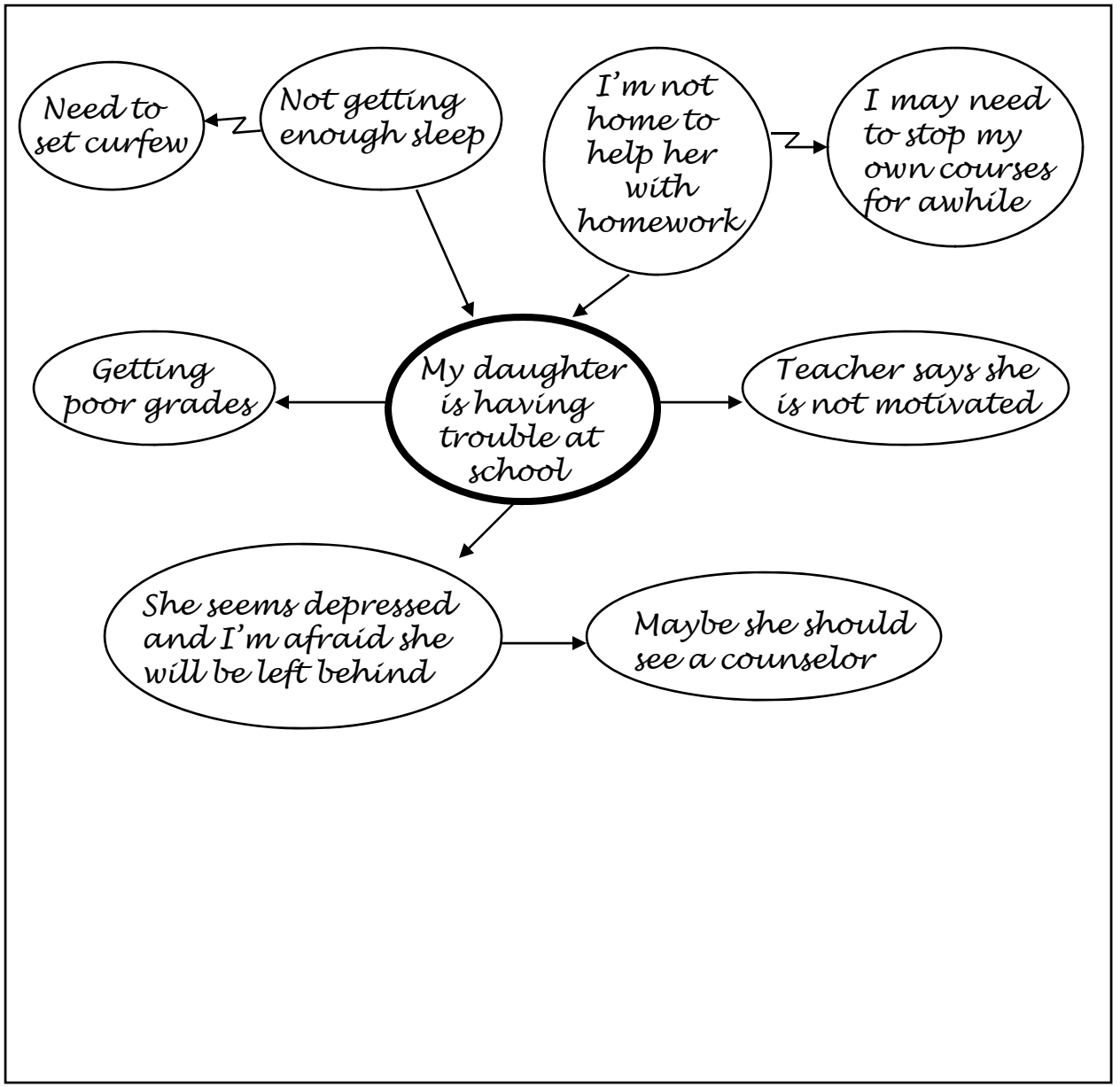
   b. What does it lead to or cause?
   c. What influences it?
   d. What is it like? What is it similar to?
   e. What happens at the same time?
3. Repeat 2 as much as needed then do the same thing with some of the other boxes you created (i.e., ask questions and correct answers).
4. Once you have made some progress on the map, ask what could you change or look at differently in order to improve things in your life.
5. Neatness is not important. Return to the map as often as you like.



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Chris: A fictional case study (12): **Goal**

Your Goal

Take some college courses.

#1

Why do you want to reach this goal?

- *Help me advance in my job.*
- *Make my daughter proud of me.*

#2

What supports do you have to reach this goal?

- *My mom said she would help.*
- *My boss said I can take a few hours a week off to do this.*

#3

What steps should you take?

- *Decide where to go and what to take.*
- *Enroll*
- *Do it.*

#4a

Problems you might encounter?

Transportation

Not smart enough

#4b

Ways of dealing with the problems?

Talk to people in classes and see if I can get a ride.

Get tutoring.

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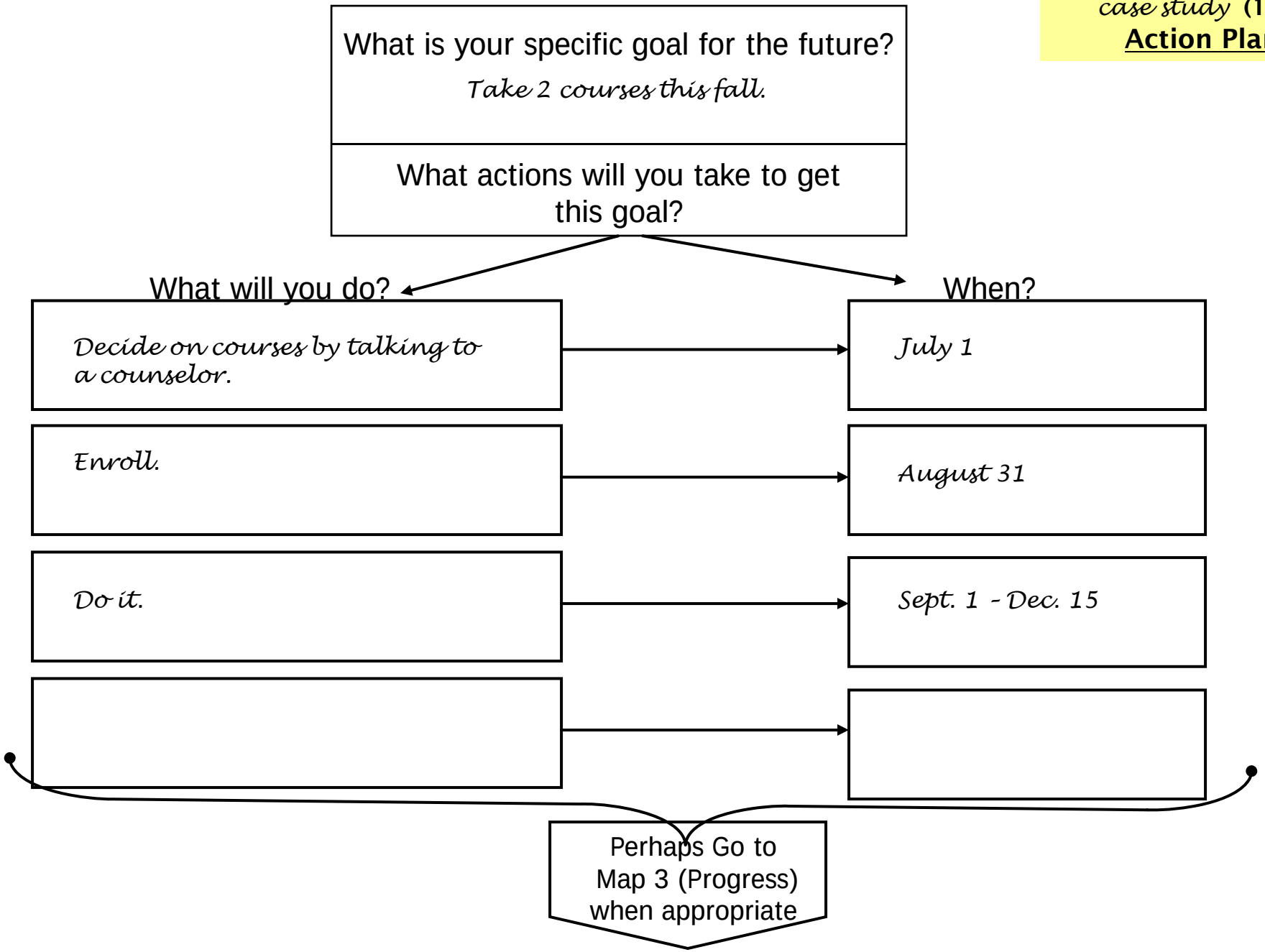
Mapping Guide 7: General Planning (Map 2)

Chris: A fictional case study **(13): Action Plans**



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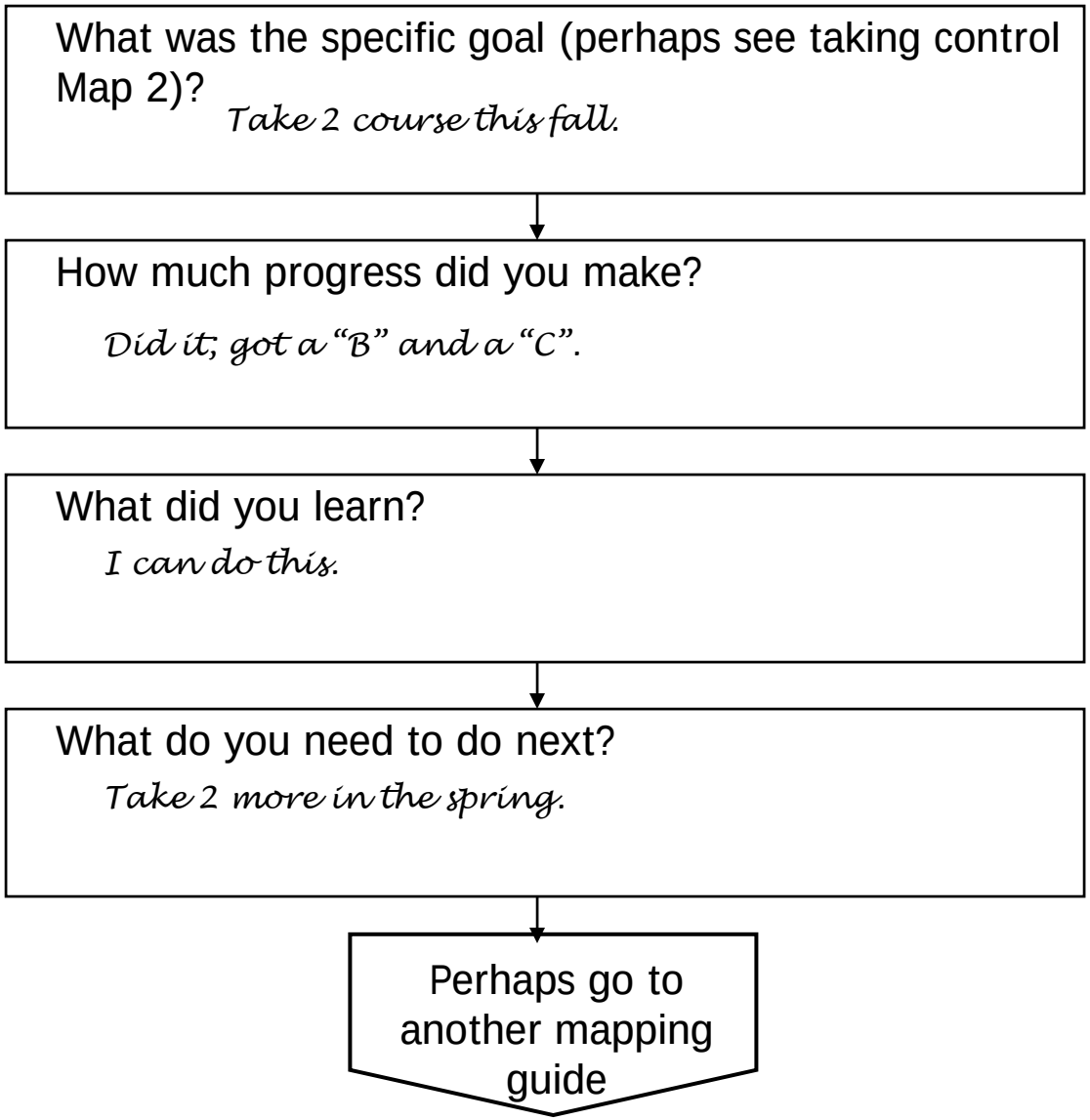
Chris: A fictional case study **(14): Progress**



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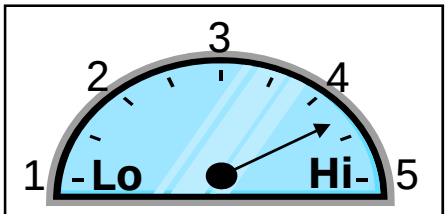
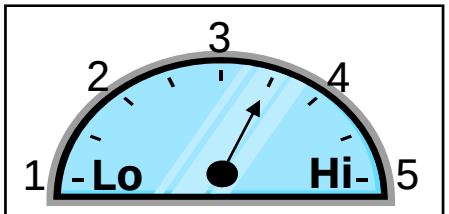


Explain: *I am very motivated to get my life straight..*

What will you do?

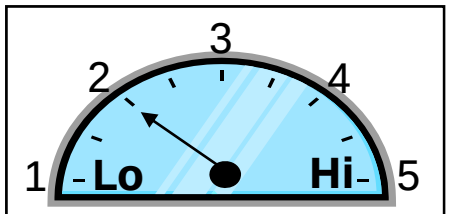
I plan to keep trying even if I have setbacks.



Explain: *I'm doing much better with my daughter, but I still argue with mom.*

What will you do?

I will try to see my mom's side of things when we talk.



Explain: *I slipped last week.*

What will you do?

I'm going to stop hanging out with friends who do "coke."

Recovery in Treatment

- Readiness for treatment & change
- Early Engagement — Participation & relationship with counselor(s)
- Early Recovery — Changes in thinking & actions
- Plans for staying in treatment
- Progress Towards Recovery

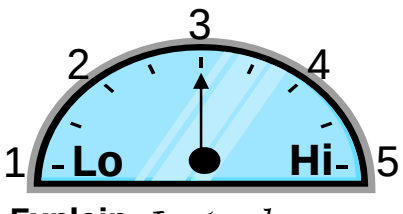
Mark your Progress Gauges!

Name:

Chris

Date:

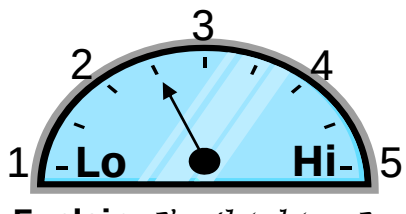
7/27/05



Explain: *I missed a meeting , but I really like my counselor.*

What will you do?

I will keep a calendar so I won't miss anymore sessions.



Explain: *I'm thinking I can do this on my own but my counselor doesn't.*

What will you do?

I really need to listen to my counselor since he has seen people like me before.

Question: How well do these ratings compare with CEST scores??

Appendix

What Research Reveals About the Impact of Mapping: A Quick Summary

- ***Memory for the Session:*** **Maps make treatment discussions more memorable.**
  - K. Knight, Simpson, & Dansereau, 1994
  - Czuchry & Dansereau, 1998

- ***Focus:*** ***Maps increase on-task performance in group sessions and are especially helpful for clients who have attentional problems.***
  - Dansereau, Joe, & Simpson, 1993
  - D. Knight, Dansereau, Joe, & Simpson, 1994
  - Joe, Dansereau, & Simpson, 1994
  - Dansereau, Dees, Greener, & Simpson, 1995
  - Czuchry, Dansereau, Dees, & Simpson, 1995
  - Dansereau, Joe, & Simpson, 1995
  - Newbern, Dansereau, Czuchry, & Simpson, 2005

- ***Communication****: Maps give clients greater confidence in their ability to communicate. This is especially so for non-Anglo clients and clients with limited education.*
  - Pitre, Dansereau, & Joe, 1996
  - Dansereau, Joe, Dees, & Simpson, 1996
  - Newbern, Dansereau, & Pitre, 1999

- ***Ideas:*** ***Maps facilitate the production of insights and ideas. Maps:***

  Stimulate greater session depth
  - Dansereau, Dees, Greener, & Simpson, 1995
  - Newbern, Dansereau, & Dees, 1997

  Identify gaps in thinking
  - Pitre, Dansereau, & Simpson, 1997

  Uncover psychological issues
  - Dansereau, Joe, & Simpson 1993
  - Czuchry & Dansereau, 1999

  Can provide greater breadth
  - Dansereau, Joe, & Simpson, 1993

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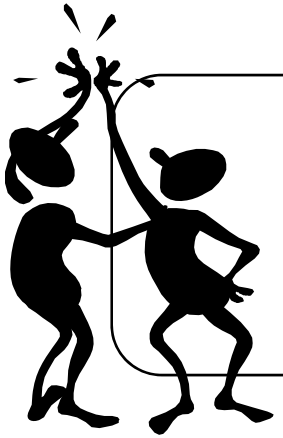

Quality of the Client & Counselor Relationship

◆***Rapport*: *Mapping facilitates the counselor-client therapeutic alliance.***

- ◆Dansereau, Joe, & Simpson, 1993
- ◆Dansereau, Joe, & Simpson, 1995
- ◆Simpson, Joe, Rowan-Szal, & Greener, 1995
- ◆Dansereau, Joe, Dees, & Simpson, 1996

During Treatment Outcomes

(e.g., issue resolution & more effective life skills)

◆***Positive Feelings Toward Self & Treatment*: *Maps facilitate self-confidence, self-efficacy & problem solving. They can foster positive feelings about personal progress in treatment and positive perceptions of treatment process.***

- ◆Dansereau, Joe, & Simpson, 1993
- ◆Joe, Dansereau, & Simpson, 1994
- ◆D. Knight, Dansereau, Joe,& Simpson, 1994
- ◆Joe, Dansereau, & Simpson, 1995
- ◆Czuchry, Dansereau, Dees, & Simpson, 1995
- ◆Dansereau, Joe, Dees, & Simpson, 1996
- ◆Pitre, Dees, Dansereau, & Simpson, 1997
- ◆Pitre, Dansereau, Newbern, & Simpson, 1997
- ◆Newbern, Dansereau, & Pitre, 1999

◆***Show Up "Clean": Clients who map miss fewer sessions and have fewer positive urinalysis tests for opiates or cocaine.***

- ◆Dansereau, Joe, & Simpson, 1993
- ◆Joe, Dansereau, & Simpson, 1994
- ◆Dansereau, Joe, & Simpson, 1995
- ◆Czuchry, Dansereau, Dees, & Simpson,1995
- ◆Dansereau, Joe, Dees, & Simpson, 1996
- ◆Dees, Dansereau, & Simpson, 1997

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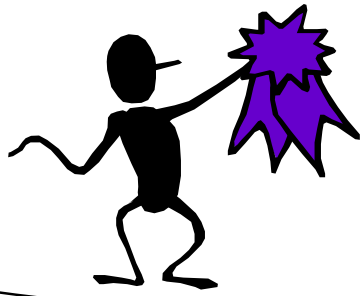
After Treatment Outcomes
(e.g., sober/clean, no arrests)



◆***"Clean" & Free:*** ***Clients who have mapped during treatment have fewer positive urinalysis tests for opiates, less needle use, and less criminal activity.***
- ◆Pitre, Dansereau, & Joe, 1996
- ◆Joe, Dansereau, Pitre, & Simpson, 1997

Adolescent Treatment: *effects similar to adult findings*
- ◆Collier, Czuchry, Dansereau, & Pitre, 2001

"Mapping" as Intervention in Integrated Treatment Process Models
- ◆Czuchry & Dansereau, 2003
- ◆Simpson, Joe, Rowan-Szal, & Greener, 1997
- ◆Simpson, 2004
- ◆Simpson & Joe, 2004

Conceptual Overviews of Mapping Research
- ◆Dansereau, Dees, & Simpson, 1994
- ◆Dansereau, Dees, Bartholomew, & Simpson, 2002
- ◆Dansereau & Dees, 2002
- ◆Dansereau (in press – 2005)

Manuals for Counselors (at www.ibr.tcu.edu)
- ◆ Dansereau, Dees, Chatham, Boatler, & Simpson, 1993
- ◆ Dees & Dansereau, 2000
- ◆ Sia, Dansereau, & Dees, 2001
- ◆ Czuchry, Sia & Dansereau, 2002

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