## **Conversations on Jesuit Higher Education**

Volume 11 Article 7

4-1-1997

## Another View of the Problem-Drinker

Joseph J. Hayden, S.J.

Follow this and additional works at: http://epublications.marquette.edu/conversations

#### Recommended Citation

 $Hayden, S.J., Joseph J. \ (1997) \ "Another View of the Problem-Drinker," \textit{Conversations on Jesuit Higher Education:} \ Vol.\ 11, Article\ 7.$   $Available\ at: \ http://epublications.marquette.edu/conversations/vol11/iss1/7$ 

# An Alternate Approach to Problem Drinking

JOSEPH J. HAYDEN, S.J. WHEELING JESUIT UNIVERSITY

While Sue Weitz's observations in this issue about the increased binge drinking of college students clearly identify an important problem, her hope that colleges can change their drinking cultures needs more careful consideration, in light of our larger culture's promotion of and dependence upon alcoholic beverages. How do you teach restraint in a culture that regards drinking as a proper response to success and failure alike, and that frequently seems to equate celebration and intoxication? Because binge drinking is a problem much deeper and more intractable than can be solved by classroom lectures, student development programs, or admission policies, Jesuit colleges and universities should focus on treating this problem on the level of the individual student.

Students resent the traditional inpatient twenty-eight-day treatment. They complain that they are being coerced with no regard for the seriousness of their problem or the disruption of their academic schedule. They see such programs as leaving them no room to make their own decisions. Rehabilitation programs present another obstacle to inpatient treatment for traditional college students because they are designed primarily for older people with histories of alcohol dependence. Also, twenty years of research by the Addiction Research Foundation of Toronto, Canada, concluded that non-intensive, outpatient treatment is as successful as intensive, inpatient treatment programs.

The Guided Self-Change Treatment, developed by Mark and Linda Sobell (1993), employs an extensive assessment accompanied by outpatient treatment. Developed during twenty years of teaching and counseling in university and clinical settings in Toronto, the Sobells' program focuses upon a motivational intervention, guiding and supporting the efforts of problem drinkers to solve their own problems. The therapist helps the problem drinker set goals of reducing or elim-

HOW DO YOU TEACH
RESTRAINT IN A CULTURE
THAT REGARDS DRINKING AS
A PROPER RESPONSE TO
SUCCESS AND FAILURE
ALIKE, AND THAT
FREQUENTLY SEEMS TO
EQUATE CELEBRATION
AND INTOXICATION?

Conversations/Spring 1997

inating his or her drinking, using homework assignments to extend the treatment between therapy sessions. If a client chooses the goal of moderate drinking but cannot attain it, he or she can choose total abstinence. While this treatment, like all treatments, is not perfect, studies have shown clients reducing their drinking by 54% with an increase in the number of abstinent days and a decrease in the number of heavy drinking days.

The Guided Self-Change Treatment bears remarkable similarities to some main tenets of Ignatian spirituality. For example, it uses the cognitive powers of the problem-drinker to motivate and sustain a positive change. The use of self-monitoring, as in the Particular Examen of Ignatius, encourages individuals to assume responsibility for their drinking or abstinence. Influencing the Sobells' cognitive-behavioral approach is the work of Miller and Rollnick, Motivational Interviewing: Preparing People to Change Addictive Behavior (1991), which uses a text from St. Paul as its compass: "I do not understand my own actions. For I do not do what I want, but I do the very thing I hate" (Romans 7:15). The approach is reminiscent of the First Principle and Foundation of the Spiritual Exercises, which calls retreatants to free themselves from addictions through meditation, in order to advance their spiritual development. The same psychologists note that concepts of sin frequently focus upon immediate gratification of desires instead of achievement of higher values.

In the light of research reports that better-educated persons prefer setting their own treatment goals, Jesuit colleges and universities might initiate less threatening, more cognitive approaches that stress the responsibility of the students who abuse alcohol. Such treatment promises real help to college students who are binge drinkers and occasional drinkers, as opposed to those who are physiologically dependent upon alcohol. While Weitz's goal of changing the campus culture that approves binge drinking is worthwhile, a more immediately achievable and necessary goal is the appropriate treatment of students with drinking problems.

### Works Cited

Miller, W.R., and Rollnick, S. Motivational Interviewing: Preparing People to Change Addictive Behavior. New York: Guilford, 1991.

Sobell, M.B., & Sobell, L.C. Problem Drinkers: Guided Self-Change Treatment. New York: Guilford, 1993.