

# CASE STUDY EXAMPLE

The case study example below is based on this (shortened) assignment question:

*Watch a film which features the impact of drug and/or alcohol abuse. Choose one of the characters from your chosen film who is using or abusing alcohol and/or other drugs as the basis for your client and case study. Provide an assessment and case formulation of the client, their psychosocial needs, and their use or abuse of alcohol and/or other drugs. Briefly describe the substance abuse counselling model you would draw on and its usefulness for the client. Identify ethical issues likely to be faced in counselling the client, referring to relevant codes of ethics.*

Note: Always use the current assignment question provided in your unit material, as the assignment question above has been altered for the purposes of this example.

The example below shows three sections of a case study written by Lynsey Ward, a Graduate Diploma of Counselling student at ACAP. Many thanks to Lynsey for sharing this work with us and contributing to the development of other academic writers. Note that there have been some slight amendments made to the original text by Student Learning Support staff.

## Introduction

Every substance abuse case is individual and as such requires a unique assessment and intervention plan to best help a client. Different drugs require varying degrees of medical assistance, detox and long-term planning in order to provide a client with an environment conducive to recovery. Heroin is an illicit drug with hasty addiction and many side effects. Here, a case study of a woman, Candy, from the film *Candy* (Fink et al., 2006) is examined in order to create an appropriate intervention plan based on alcohol and other drug [AOD] use theory, research and Candy's assessment. Candy's social and behavioural influences are her major reasons for taking heroin and as such, treatment plans are formed accordingly to

**Commented [SLS1]:** Here the writer introduces the 'case' – the character Candy from the film of the same name.

provide a comprehensive treatment and relapse prevention plan based on empirically tested techniques.

### Case Formulation and Assessment

Candy's treatment needs to be sensitive to her needs as a woman and client. Candy has built a tolerance to heroin and subsequently has withdrawal symptoms if not using, and is unable to reduce her heroin use on her own. As such, she fulfils the substance dependence criteria identified by Stevens and Smith (2013). Heroin is an opiate whose repeated use causes tolerance and addiction "enhanced by intravenous administration" (Stevens & Smith, 2013, p. 7). During this film, Candy appears to go through the three phases of substance abuse that Stevens and Smith (2013) have advanced namely, the prodromal, crucial and chronic phases, which phases parallel the film's heaven, earth, and hell themes. This journey from "controlled use to being controlled by the use is the nature of addiction" (Stevens & Smith, 2013, p. 128). This dependence despite its consequences is a "result of linking learned associations between drug effects and environmental cues" (Stevens & Smith, 2013, p. 70) and thus is a behaviourally influenced phenomenon. Just as in Candy's case, "the majority of ... cohabiting female substance abusing patients who enter treatment are involved with substance abusing partners" (Winters et al., 2002, p. 352).

Initially in therapy, the process of assessment and ethical considerations would be discussed, as well as building rapport with Candy. Assessment would be used to determine my fit with Candy, the relationship issues of the client, and Candy's coping strategies and outside support resources. Later, assessment will be used again to evaluate progress and follow up with Candy's outcomes. In order to determine if a behavioural approach to therapy is appropriate for Candy, a diagnostic interview would be used to identify her habits, family issues, readiness for change and the influences on her use with assistance from *The Diagnostic and Statistical Manual of Mental Disorders* (5th ed.; DSM-5; American

**Commented [SLS2]:** This is an example of where the writer links information about the 'case' (Candy) to theory. Note that there is a reference for the theory.

**Commented [SLS3]:** Another example of linking the case to theory, with referencing.

Psychiatric Association [APA], 2013). I would also use The Addiction Severity Index [ASI] (McLellan et al., 1980) to ensure I was obtaining a comprehensive picture of Candy's use.

Candy's relationship situations seem to be a large influence on her use. To ensure that these same relationships don't create a potential relapse, her parents and partner should be involved in therapy. Additionally, any mental health issues will need to be addressed because for many women using substances, depression is a factor (Stevens & Smith, 2013). Candy does appear to have co-morbid depression and substance use, however this would need to be carefully assessed to ensure the origin of her presenting symptoms.

According to Stevens and Smith (2013) pre-contemplation is a stage where users are not thinking about behaviour change, or that their behaviour is a problem. It's very likely that once Candy's addiction becomes serious, and she has no intention of undertaking any behaviour changes, that she is in the pre-contemplation stage. Stevens and Smith (2013) describe the action stage as a time when users are aware that a problem exists and are actively trying to change their behaviour, concomitant with making changes to their environment and experiences. During her methadone maintenance program, Candy has moved into the action stage, however this quickly has negative effects on her relationship with Dan, her partner. Often, maintaining significant change can falter due to there being no psychological supports in place (Kouimtsidis et al., 2007). Candy has two potential intervention points in this film where her love of drugs no longer outweighs the pain they are causing her. The first is during her pharmacotherapy, the second is when Candy has a drug induced psychosis and ends up in hospital. Major intervention points will require a diagnostic basis for treatment with behavioural awareness, individual goal identification and treatment contracts (Stevens & Smith, 2013).

### **Ethical Issues**

Throughout treatment a number of ethical considerations need to be addressed, particularly regarding Candy's admission to the inpatient facility, and her family/Dan's group treatments. "Each member of the couple should be adequately prepared, including individual

**Commented [SLS4]:** Here the writer is using first person 'I' when explaining what she or he would do as the counsellor in this situation. **Always read your assignment question and marking criteria to check if this style of first person writing is required.**

consultation if needed, and free to promote informed consent” (Stevens & Smith, 2013, p. 230) to maintain best practice. Welfel (2013) maintains that it is the clinician’s responsibility to be aware of ethical codes, laws and regulations in place for the treatment of clients. Furthermore, Stevens and Smith (2013) stress that the nature of Behavioural Couples Therapy or the potential use of multi-family therapy will need a comprehensive explanation of confidentiality limits, and how a group setting might function. Often a dilemma may arise due to the illegal nature of drug use and related activities. Should this occur, I will reflect on the dilemma, apply the code of ethics and legal limitations I am subject to, generate a potential course of action, consider its consequences and discuss it with Candy before implementing it. In the case of past crimes, unless still causing harm, I would not inform the authorities. If Candy was unable to make an informed decision to enter an inpatient facility due to her psychotic symptoms, I would seek her parent’s informed consent. Throughout treatment, I would ensure proper communication with Candy and her involved family members in order to create an ethical treatment environment.

**Commented [SLS5]:** Here the writer is explaining an ethical aspect of the case.

**Commented [CF6]:** Here the writer is explaining what the his or her process would involve when faced with a dilemma, hence the use of the first person 'I'.

## References

- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5<sup>th</sup> ed.). Author.
- Fink, M., & Sherman, E. (Producers), & Armfield, N. (Director). (2006). *Candy* [DVD]. Madman Entertainment.
- Kouimtsidis, C., Davis, P., Reynolds, M., Drummond, C., & Tarrier, N. (2007). *Cognitive-behavioural therapy in the treatment of addiction: A treatment planner for clinicians*. John Wiley & Sons.
- McLellan, A.T., Luborsky, L., O'Brien, C.P., & Woody, G.E. (1980). An improved diagnostic instrument for substance abuse patients: The Addiction Severity Index. *Journal of Nervous & Mental Diseases*, 168(1), 26-33.  
<https://journals.lww.com/jonmd/pages/default.aspx>
- Stevens, P., & Smith, R. L. (2013). *Substance abuse counseling: Theory and practice*. (4<sup>th</sup> ed.). Pearson Education.
- Welfel, E. R. (2013). *Ethics in counseling and psychotherapy: Standards, research, and issues* (5<sup>th</sup> edition). Cengage Learning.
- Winters, J., Fals-Stewart, W., O'Farrell, T. J., Birchler, G. R., & Kelley, M. L. (2002). Behavioral couples' therapy for female substance-abusing patients: Effects on substance use and relationship adjustment. *Journal of Consulting and Clinical Psychology*, 70(2), 344. <http://doi.org/10.1037/0022-006X.70.2.344>