

Case Conceptualization (No. 2)

Demographics

Name: Nicholas Sheff

Age: 18

Gender: male

Residence: he lives with his father intermittently and has spent some time living with his mother.

Status (in school/working/in treatment): graduated high school and college, in treatment, has a sponsor

Health: Normal/good health until drug use, regular use of many drugs (mostly crystal meth)

Reason for Referral (why might the character be referred for therapy)

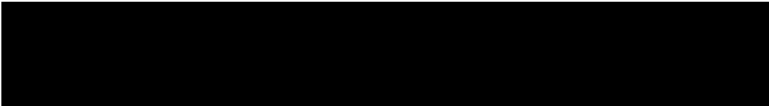
- Crystal meth addiction (and other drugs and alcohol)
- Desire to heal from addiction after two occasions of O.D., second O.D. was recent and occurred after 14 months of being sober.

Background Information (write out as much background info as you can gather from the movie)

- Parents divorced, mom lives far away in L.A., dad remarried Carolyn and had they had two kids together.
- Still visits his mom but mostly lives with his dad (when not on the streets)
- Good loving, caring, and supportive parents.
- Started using drugs in high school, tried many kinds (marijuana, LSD...) uses crystal meth regularly.
- Dad brought him to a 28-day rehab centre, finished the 28 days, and stayed longer in a halfway house for more help but ended up leaving early to go to college.
- Relapses in college, then moves in with mom for help, is clean for 14 months, and relapses again.

Observations & Impressions (use your knowledge you learned from this unit in this section. ex. what are the signs of trauma that you see? what is the trigger?)

- When not using, experiences withdrawal (sweating, lying, fearful, need to sleep, vomiting, denial, irritability, anger, jittery, desire to use drugs again)
- Many cycles of relapse and remission, therefore, possible low levels of dopamine receptors and nerve and brain damage
- History of 4 components of addiction: compulsive engagement, impaired control, relapse, and dissatisfaction when drugs are not available

- 
- Addiction appears to be psychological and social, with no biological family ties.
 - Should take time to ask about early childhood before parents were divorced (possible area for trauma and biological ties pending bond with parents as infant and toddler)
 - Difficult situations: has stolen from people to pay for drugs, taken dad's car, raided medicine cabinets, left home, left rehab, quit college, left hospital early after an O.D., experienced 2 O.D.s himself and witnessed girlfriend O.D.
 - Has the desire to heal, keeps returning to drugs, longest time sober 14 months
 - Triggers: old girlfriend, being in hometown, stress
 - Signs he is struggling: lying, stealing, not answering his phone, missing scheduled events, not coming home at night, irritable, easily angered
 - Both parents and stepmother want to help and are supportive, dad and stepmother are seeking additional help through group work, "3 C's"

Treatment Recommendations (What would you recommend for this client? Where would you send them? What course of therapy would you use and why?)

- EFFT: Nick's family is supportive and wants to take an active role; equipping them with how to respond well to Nick and how to support him could help speed up his recovery.
- Contingency Management: could be used alongside other therapy modalities. It is a reward/punishment method where clients are rewarded for positive behaviour and disciplined for negative behaviour. It is often used with clients who struggle with addictions.
- Dialectical Behaviour Therapy: will help the client regulate thoughts and feelings and gain more control to prepare them for when temptations arise.