

Jerry Garcia, Addiction, and Intervention

OVERVIEW

ESSENTIAL QUESTION

How can you help someone struggling with addiction?

OVERVIEW

Musical artists have dreamed of many things: a No. 1 album, a continuously expanding fanbase, and an impact on the ever-changing cultural landscape. But how many aspire to having an addiction that could affect all of these dreams?

It is no secret that many celebrated musicians have struggled with drug addiction throughout their careers. While some have been able to overcome these battles, others, tragically, have not. These addictions not only impact the health of these individuals, but can also affect the relationships they have with fellow band members, loved ones, and their fans.

Jerry Garcia was one of many musicians who, despite resounding success, succumbed to addiction. As one of the singers and lead guitarist of the Grateful Dead, a large portion of Garcia's career involved handling the demands of a growing fanbase and supporting the sound engineers, technical staff, stagehands, and tour drivers that made the band's performances possible. In coping with these stresses, Garcia often turned to self-medication, which towards the end of his life started to affect his relationship with his family and closest friends. In 1995, Garcia died at a drug rehabilitation center. He was 53 years old.

In this lesson, students reflect upon drug addiction. By viewing and discussing clips from Long Strange Trip, students learn how Jerry Garcia's drug addictions impacted his relationship with the Grateful Dead band members and loved ones. In addition, students consider how outside factors created a "weight" that likely led to Garcia's drug addiction, and learn about effective measures that can be taken towards addiction intervention.



OBJECTIVES

Upon completion of this lesson, students will:

1. KNOW (KNOWLEDGE):

- How Jerry Garcia's healthy lifestyle had a positive impact on the Grateful Dead
- How the "weight" of the Grateful Dead contributed to Jerry Garcia's drug addiction
- How Garcia's drug addiction had an impact on his relationship with his band and loved ones
- Basic intervention steps that can be implemented for people struggling with addiction

2. MASTERY OBJECTIVE

- Students will be able to effectively construct an addiction intervention plan by examining clips from *Long Strange Trip*, reading information about addiction from the Mayo Clinic, and designing a Public Service Announcement on proper ways to respond to a person's drug addiction.

ACTIVITIES

MOTIVATIONAL ACTIVITY

1. Ask students:

- What do you think it means to have an addiction? At what point might a hobby, pastime, or "bad habit" become an addiction?
- What are some possible reasons people might become addicted to something?
- Do any particular musicians or celebrities come to mind who have struggled with addiction? Were they able to overcome this addiction?
- What might be some of the results of an addiction? How might someone's addiction affect other people?

PROCEDURE:

1. Show **Image 1, Grateful Dead Logos**. Ask students:

- Do you recognize these logos?
- Have you seen these logos before? If so, where?

2. Show **Image 2, Jerry Garcia Mural**. Explain to students that Garcia was one of the lead singers and guitarists of the Grateful Dead,

and struggled throughout his life with drug addiction.

3. Play **Clip 1, Jerry Garcia's Healthy Renaissance**. Ask students:

- What were some of the choices Jerry Garcia took at this moment in his life to create a healthy lifestyle?
- By choosing a healthy lifestyle, how did that impact Garcia's musical productivity?

- How might have Garcia's new lifestyle potentially affected the rest of the members of the band?
4. Play **Clip 2, The "Weight" of the Grateful Dead**. Ask students:
 - Dennis McNally describes the "weight" that Garcia carried with the Grateful Dead. What examples does he give of this "weight"?
 - What other "weights" might a musician or band have placed on them throughout their career? What sort of "weights" or pressures do you experience in life?
 - Why do you feel that Garcia may have resorted to using drugs again to cope with these "weights"?
 - How does Barbara Meier describe Garcia's personality changed after he began using drugs?
 - How did the views and attitudes of the road manager versus Barbara Meier's differ in regards to Garcia's drug use?
 5. Show **Image 3, Most Common Addictions**. Ask students:
 - In what ways might someone become addicted to one of these substances? (*Note to teacher—Consider these ideas to help navigate the students - home environment, mental health, peer, genetics.*)
 - Out of the ten items listed, which ones are legal and illegal to obtain? What do you notice about the ones that are legal to obtain versus the ones that are not?
 - How might someone help a family member or loved one who is struggling with addiction?
 6. Play **Clip 3, Reflections**. Ask students:
 - What conflicts could arise if confronting a family member or loved one about their addiction?
 - Why might have Garcia ended his relationship with Meier?
 - How did the band and road crew describe Garcia during this time period?
 - What were some of the reasons the band gave to describe why they were hesitant to approach Garcia about his addiction?
 - In the clip, Dennis McNally notes that the band held interventions for Garcia. What is an intervention? Have you heard this word before? What are positive and negative notions that come to mind when you hear this word?
 7. Organize students into five groups, and display **Image 4, Public Service Campaign Activity**. Explain to the class that each group will be receiving a different document, and their job is to read the information and brainstorm how to translate it onto a single poster that would be displayed to the public. Posters could be created using pencils, markers, etc. on poster board, or with the aid of computer image and design software.
 8. Pass out to each group 1 page of **Handout 1 - "Intervention: Help a Loved One Overcome Addiction" (Mayo Clinic)**
 9. Upon completion, have students share with the class their poster and discuss the information found within their handout.

SUMMARY ACTIVITY

1. Ask the students:
 - Based on what you learned from the class's presentations, what are some of the ways that you can be active in helping a loved one seek help for addiction?
 - What are some basic steps you can take to help them? Who can help you to setup the intervention process?
2. Share students' intervention posters by sending them to info@teachrock.org

EXTENSION ACTIVITY

1. Choose one of the substances mentioned in **Image 3, Most Common Addictions**, and research programs that address the addiction to that substance. Summarize the program and the approach it takes to fighting addiction.

NATIONAL HEALTH EDUCATION STANDARDS

S1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

S2: Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.

S4: Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

S8: Students will demonstrate the ability to advocate for personal, family, and community health

COMMON CORE STATE STANDARDS

College and Career Readiness Anchor Standards for Reading

Reading 1: Read closely to determine what the text says explicitly and to make logical inferences from it; cite specific textual evidence when writing or speaking to support conclusions drawn from the text.

Reading 2: Determine central ideas or themes of a text and analyze their development; summarize the key supporting details and ideas.

Craft and Structure 4: Interpret words and phrases as they are used in a text, including determining technical, connotative, and figurative meanings, and analyze how specific word choices shape meaning or tone

Integration of Knowledge and Ideas 7: Integrate and evaluate content presented in diverse media and formats, including visually and quantitatively, as well as in words.

Range of Reading and Level of Text Complexity 10: Read and comprehend complex literary and informational texts independently and proficiently.

College and Career Readiness Anchor Standards for Writing

Text Types and Purposes 2: Write informative/explanatory texts to examine and convey complex ideas and information clearly and accurately through the effective selection, organization, and analysis of content.

Production and Distribution of Writing 4: Produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience.

Production and Distribution of Writing 6: Use technology, including the Internet, to produce and publish writing and to interact and collaborate with others.

Research to Build and Present Knowledge 7: Conduct short as well as more sustained research projects based on focused questions, demonstrating understanding of the subject under investigation.

Research to Build and Present Knowledge 8: Gather relevant information from multiple print and digital sources, assess the credibility and accuracy of each source, and integrate the information while avoiding plagiarism.

Research to Build and Present Knowledge 9: Draw evidence from literary or informational texts to support analysis, reflection, and research.

College and Career Readiness Anchor Standards for Language

Language 1: Demonstrate command of the conventions of standard English grammar and usage when writing or speaking.

Language 2: Demonstrate command of the conventions of standard English capitalization, punctuation, and spelling when writing.

Language 3: Apply knowledge of language to understand how language functions in different contexts, to make effective choices for meaning or style, and to comprehend more fully when reading or listening.

Vocabulary Acquisition and Use 4: Determine or clarify the meaning of unknown and multiple-meaning words and phrases by using context clues, analyzing meaningful word parts, and consulting general and specialized reference materials, as appropriate.

Vocabulary Acquisition and Use 5: Demonstrate understanding of figurative language, word relationships, and nuances in a word meaning.

Vocabulary Acquisition and Use 6: Acquire and use accurately a range of general academic and domain-specific words and phrases sufficient for reading, writing, speaking, and listening at the college and career readiness level; demonstrate independence in gathering vocabulary knowledge when encountering an unknown term important to comprehension or expression.

College and Career Readiness Anchor Standards for Speaking and Listening (K-12)

Comprehension & Collaboration 1: Prepare for and participate effectively in a range of conversations and collaborations with diverse partners, building on others' ideas and expressing their own clearly and persuasively.

Comprehension & Collaboration 2: Integrate and evaluate information presented in diverse media and formats, including visually, quantitatively, and orally.

Presentation of Knowledge 4: Present information, findings, and supporting evidence such that listeners can follow the line of reasoning and the organization, development, and style are appropriate to task, purpose, and audience.

NATIONAL CURRICULUM STANDARDS FOR SOCIAL STUDIES – NATIONAL COUNCIL FOR THE SOCIAL STUDIES (NCSS)

Theme 1: Culture

Theme 2: Time, Continuity, and Change

Theme 3: People, Place, and Environments

Theme 5: Individuals, Groups, and Institutions

Theme 6: Power, Authority, and Governance

Theme 10: Civic Ideals and Practices

NATIONAL STANDARDS FOR MUSIC EDUCATION – NATIONAL ASSOCIATION FOR MUSIC EDUCATION (NAFME)

Core Music Standard: Responding

Interpret: Support interpretations of musical works that reflect creators' and/or performers' expressive intent.

Evaluate: Support evaluations of musical works and performances based on analysis, interpretation, and established criteria.

Core Music Standard: Connecting

Connecting 11: Relate musical ideas and works to varied contexts and daily life to deepen understanding.

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NATIONAL CURRICULUM STANDARDS FOR SOCIAL STUDIES—NATIONAL COUNCIL FOR THE SOCIAL STUDIES (NCSS)

Theme 1: Culture

Theme 3: People, Place, and Environments

Theme 5: Individuals, Groups, and Institutions

Theme 7: Production, Distributions, and Consumption



RESOURCES

VIDEO RESOURCES

- *Long Strange Trip* - Jerry Garcia's Healthy Renaissance
- *Long Strange Trip* - The "Weight" of the Grateful Dead
- *Long Strange Trip* - Reflections

HANDOUTS

- Handout 1 - "Intervention: Help a Loved One Overcome Addiction" (Mayo Clinic)

Lesson Materials



Image 1, Grateful Dead Logos



Image 2, Jerry Garcia Mural



Image 3, Most Common Addictions

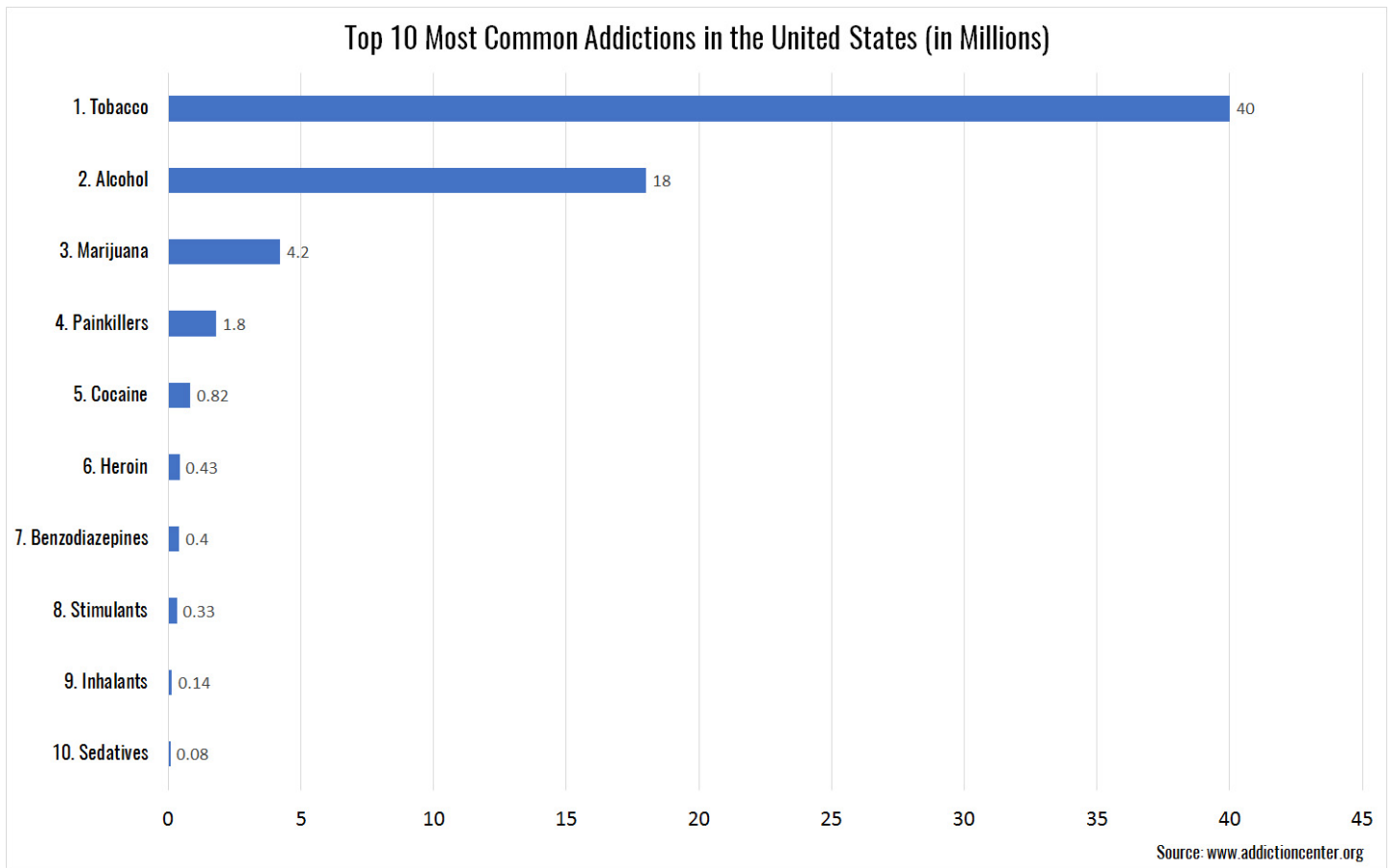




Image 4, Public Service Campaign Activity

Scenario: The Mayo Clinic, an academic medical center from Minnesota, has hired you to create a public service campaign that explains the effective ways to hold an intervention for someone suffering from addiction.

You will be given expert medical information on the topic of interventions, and it will be your task to simplify the information onto a single sheet of paper, which will be used to create posters that will be displayed across the country. You are free to use illustrations, photographs, and other design elements to make the information more interesting or engaging.



Handout 1 - “Intervention: Help a Loved One Overcome Addiction” (Mayo Clinic)

What is an intervention?

People who struggle with addiction are often in denial about their situation and unwilling to seek treatment. They may not recognize the negative effects their behavior has on themselves and others.

Examples of addictions that may warrant an intervention include:

- Alcoholism
- Prescription drug abuse
- Street drug abuse
- Compulsive eating
- Compulsive gambling

An intervention presents your loved one with a structured opportunity to make changes before things get even worse, and it can motivate him or her to seek or accept help.

An intervention is a carefully planned process that may be done by family and friends, in consultation with a doctor or professional such as a licensed alcohol and drug counselor or directed by an intervention professional (interventionist). It sometimes involves a member of your loved one’s faith or others who care about the person struggling with addiction.

During the intervention, these people gather together to confront your loved one about the consequences of addiction and ask him or her to accept treatment. The intervention:

- Provides specific examples of destructive behaviors and their impact on your loved one with the addiction and family and friends
- Offers a prearranged treatment plan with clear steps, goals and guidelines
- Spells out what each person will do if your loved one refuses to accept treatment

How does a typical intervention work?

An intervention usually includes the following steps:

- 1. Make a plan.** A family member or friend proposes an intervention and forms a planning group. It's best if you consult with a qualified professional counselor, an addiction professional, a psychologist, a mental health counselor, a social worker or an interventionist to help you organize an effective intervention. An intervention is a highly charged situation with the potential to cause anger, resentment or a sense of betrayal.
- 2. Gather information.** The group members find out about the extent of your loved one's problem and research the condition and treatment programs. The group may initiate arrangements to enroll your loved one in a specific treatment program.
- 3. Form the intervention team.** The planning group forms a team that will personally participate in the intervention. Team members set a date and location and work together to present a consistent, rehearsed message and a structured plan. Often, nonfamily members of the team help keep the discussion focused on the facts of the problem and shared solutions rather than strong emotional responses. Don't let your loved one know what you're doing until the day of the intervention.
- 4. Decide on specific consequences.** If your loved one doesn't accept treatment, each person on the team needs to decide what action he or she will take. For example, you may decide to ask your loved one to move out.
- 5. Make notes on what to say.** Each team member describes specific incidents where the addiction caused problems, such as emotional or financial issues. Discuss the toll of your loved one's behavior while still expressing care and the expectation that he or she can change. Your loved one can't argue with facts or with your emotional response to the problem. For example begin by saying "I was upset and hurt when you drank ..."
- 6. Hold the intervention meeting.** Without revealing the reason, your loved one with the addiction is asked to the intervention site. Members of the team then take turns expressing their concerns and feelings. Your loved one is presented with a treatment option and asked to accept that option on the spot. Each team member will say what specific changes he or she will make if your loved one doesn't accept the plan. Don't threaten a consequence unless you're ready to follow through with it.
- 7. Follow up.** Involving a spouse, family members or others is critical to help someone with an addiction stay in treatment and avoid relapsing. This can include changing patterns of everyday living to make it easier to avoid destructive behavior, offering to participate in counseling with your loved one, seeking your own therapist and recovery support, and knowing what to do if relapse occurs.

A successful intervention must be planned carefully to work as intended. A poorly planned intervention can worsen the situation — your loved one may feel attacked and become isolated or more resistant to treatment.



Who should be on the intervention team?

Consulting an addiction professional, such as a licensed alcohol and drug counselor, a social worker, a psychologist, a psychiatrist, or an interventionist, can help you organize an effective intervention. An addiction professional will take into account your loved one's particular circumstances, suggest the best approach, and help guide you in what type of treatment and follow-up plan is likely to work best.

Often interventions are conducted without an intervention professional, but having expert help may be preferable. Sometimes the intervention occurs at the professional's office. It may be especially important to have the professional attend the actual intervention to help you stay on track if your loved one:

- Has a history of serious mental illness
- Has a history of violence
- Has shown suicidal behavior or recently talked about suicide
- May be taking several mood-altering substances

It's very important to consult an intervention professional if you suspect your loved one may react violently or self-destructively.

An intervention team usually includes four to six people who are important in the life of your loved one — people he or she loves, likes, respects or depends on. This may include, for example, a best friend, adult relatives or a member of your loved one's faith. Your intervention professional can help you determine appropriate members of your team.

Don't include anyone who:

- Your loved one dislikes
- Has an unmanaged mental health issue or substance abuse problem
- May not be able to limit what he or she says to what you agreed on during the planning meeting
- Might sabotage the intervention

If you think it's important to have someone involved but worry that it may create a problem during the intervention, consider having that person write a short letter that someone else can read at the intervention.



How do you find a treatment program to offer at the intervention?

An evaluation by an addiction professional helps determine the extent of the problem and identifies appropriate treatment options.

Treatment options can vary in intensity and scope and occur in a variety of settings. Options can include brief early intervention, outpatient treatment or day treatment programs. More severe problems may require admittance into a structured program, treatment facility or hospital.

Treatment may include counseling, education, vocational services, family services and life skills training. For example, Mayo Clinic offers a variety of addiction services and has a comprehensive team approach to treating addiction.

If a treatment program is necessary, it may help to initiate arrangements in advance. Do some research, keeping these points in mind:

- Ask a trusted addiction professional, doctor or mental health professional about the best treatment approach for your loved one and recommendations about programs.
- Contact national organizations, trusted online support groups or local clinics for treatment programs or advice.
- Find out if your insurance plan will cover the treatment you're considering.
- Find out what steps are required for admission, such as an evaluation appointment, insurance pre-certification and whether there's a waiting list.
- Be wary of treatment centers promising quick fixes, and avoid programs that use uncommon methods or treatments that seem potentially harmful.
- If the program requires travel, make arrangements ahead of time — consider having a packed suitcase ready for your loved one.

It also may be appropriate to ask your loved one to seek support from a group such as Alcoholics Anonymous.

If your loved one refuses help

Unfortunately, not all interventions are successful. In some cases, your loved one with an addiction may refuse the treatment plan. He or she may erupt in anger or insist that help is not needed or may be resentful and accuse you of betrayal or being a hypocrite.

Emotionally prepare yourself for these situations, while remaining hopeful for positive change. If your loved one doesn't accept treatment, be prepared to follow through with the changes you presented.

Often, children, partners, siblings and parents are subjected to abuse, violence, threats and emotional upheaval because of alcohol and drug problems. You don't have control over the behavior of your loved one with the addiction. However, you do have the ability to remove yourself — and any children — from a destructive situation.

Even if an intervention doesn't work, you and others involved in your loved one's life can make changes that may help. Ask other people involved to avoid enabling the destructive cycle of behavior and take active steps to encourage positive change.