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CNS 765

Assignment 7.4

Blow: Case Study of George Jung

Section One: Conceptualization of George Jung

According to the film Blow directed by Ted Demme, George Jung grew up in by all accounts a relatively “normal” household with the exception of parental dynamics. As the film so keenly illustrates throughout George’s childhood there was always tension between Jung’s parents. Jung’s mother, Ermine, would leave George and Jung’s father, Fred, recurrently during his childhood due to financial issues (namely that his mother felt entitled to a higher standard of living than his father could offer). Every time that Ermine would leave she would return home and the cycle would repeat itself; this evidentially left a negative impression on George and strained his relationship with his mother and the women who would play a role in his life in the future. George’s father on the opposite spectrum was presented as being eternally supportive and optimistic about George and his mother. At the lowest point of their family’s financial woes it is shown that George accompanies his father to file bankruptcy after which George expresses concern to his father about how his mother will react when she finds out they are broke and vows that he will never be in a similar situation. When George is old enough to move out on his own he and his best friend, Tuna, relocate to California where they are introduced to marijuana. It is actually Tuna who suggests to George that since they don’t particularly want to work they should just sell marijuana. George’s girlfriend, Barbie, knew a guy who would supply them with the marijuana and the rest was history. George and Tuna’s

operation grew and they were selling on both coasts making a very profitable living. It wasn't until George was arrested for smuggling nearly 700 pounds of marijuana that things took a turn for the worst. As George faced his sentencing he learned his then fiancé had cancer, which led him to skip bail and care for her until she died making him a fugitive. George returned to his parent's house as a fugitive on the run and it wasn't long before the police came to get him because his mother had turned him in. It was in jail that George met his future partner Diego who would introduce him to the Medellin Cartel and the lucrative business of being a cocaine dealer. When George is released from prison he immediately breaks parole to skip down and make his way to Columbia where he is introduced to a lower member of the cartel and begins working for Pablo Escobar.

George quickly connects with his California associate and becomes known to be able to sell large quantities of cocaine in a matter of hours or days and Pablo Escobar gets wind and requests a meeting. Interestingly Pablo requests that George go into business with him personally and leave Diego out because he causes him significant trouble with the local police but George ever loyal states that Diego is his partner and he won't make any deals without him. Over the next several years he and Diego amass millions of dollars each but it is not enough for either of them. Then George meets Mirtha (Penelope Cruz) and his life changes again as they get married and settled down for years they live and party as if there is no tomorrow and then their daughter is born and it changes everything for George. George changes his behavior and his habits because he wants to be a good father like he believes his father was to him. Unfortunately during his 38th birthday party the FBI raids the house and there are a lot of individuals associated with the Medellin cartel and large quantities of cocaine are present. George takes responsibility for all of the

cocaine saying it was for his own personal use to keep everyone else out of trouble and ensure that his wife and daughter are reunited and protected. When he is released George tries to gather his funds that he has amassed in the Panama over the past decade only to find out all of the money is gone. This information does not go over well with Mirtha who is panic stricken about how they will afford to live now that he is out of the business. The relationship becomes so tumultuous between Mirtha and George that she causes him to get arrested by behaving recklessly herself. While in jail this time Mirtha files for divorce and takes sole custody of his daughter. George is released again from jail and sets out to reconnect with his daughter. Mirtha informs George that if he would like to have custodial rights that he needs to start paying child support and instead of looking for a legitimate job he decides to make one last drug run down to Columbia. This drug run is orchestrated by the FBI and DEA though and ends up with George getting arrested and having to serve time well into his old age. The film ends with elderly George delusionally speaking with his daughter while walking through the jail yard.

The presenting tribulations for George in the film are marijuana and cocaine use. Marijuana use is associated with agitation, challenges in problem solving, increase in appetite and paranoia. Cocaine use is associated with increased levels of alertness, attention, energy, intense happiness, irritability, decreased appetite, and paranoia. In the long term cocaine use is associated with headaches, convulsions, heart attack, mood issues, sexual dysfunction, bowel decay (if swallowed), loss of smell/nosebleeds/trouble swallowing (if snorted), and HIV or hepatitis (if injected).

In George's case I believe towards the end of the film treatment would have been voluntary because he came to realize when sober that he had really messed up his life

because he lost his ability to be a part of his daughters life. On the other hand because he was serving time in prison it may have been mandated by the judge for George to seek counseling while in prison and perhaps when released as part of his parole agreement. For the purposes of this conceptualization I am going to elect that George has decided to voluntarily come for treatment because he wants to reestablish a relationship with his daughter.

For George's case I believe it would best to work from the Biopsychosocial model of addiction because in the film there appear to be many aspects that contribute to George's addiction including biological, psychological, and sociocultural factors. Understanding the contributing factors that have led George down the path that he has chosen allows for a more dynamic, holistic treatment plan. Biologically, George at the time of his last arrest in the film had been heavily using cocaine for several years and had developed a tolerance and dependency for the drug. Additionally George's substance use is progressive beginning with smoking a few joints to snorting in excess of five grams of cocaine in one day and showing strong deterioration physically and mentally especially apparent after his daughters birth when he collapses at the hospital; and again when he has delusions that his daughter is visiting him in prison when she is not really there. Psychologically it is apparent that George has an "addictive personality" even when at the top with millions of dollars he always craved more it wasn't simply about the money it was also about the thrill of pulling off a smuggling job successfully. This need to for monetary gain probably related to the struggles he saw between his mother and his father when they had financial issues. Sadly George's analysis of financial strain causing relationship strain was pretty spot on when it came to the demise of his relationship with

Mirtha. Social and environmental factors were very strongly related to George's addiction and decision-making skills surrounding his addiction beginning with his home life. Watching the ups and downs of his parent's life George felt a strong need to ensure that he had "everything" he needed as an adult and drug dealing and smuggling was an "easy" means to an end when it worked out. George's friends all were involved in the drug "world" beginning with his best friend from childhood Tuna, to his first serious partner Barbie, all the way through to the end of his run with the Medellin Cartel and his wife Mirtha.

Section Two: Screening and Assessment

At the peak of his use of cocaine George meet the criteria for Stimulant Use Disorder 304.20 (F14.20) Cocaine specifiers in sustained remission in a controlled environment with severity being severe. He met Criterion A, as a pattern of cocaine use lead to clinically significant impairment or distress as manifested by: (1) the cocaine is often taken in larger amounts over a period of longer than was intended (when George smuggled his first time with cocaine he did a line to sample the product with two other friends and towards the height of his addiction he was snorting nearly 5 grams of cocaine on his own daily), (2) a great deal of time is spent in activities necessary to obtain the stimulant, use the stimulant, or recover from the effects (even when George was not smuggling cocaine he still was carrying around large quantities for him and his wife Mirtha), (3) recurrent cocaine use resulting in a failure to fulfill major role obligations at work, school, or home (due to his cocaine use George neglected his parental roles to his daughter), (4) continued stimulant use despite having persistent or recurrent social or interpersonal problems caused or exasperated by the effects of the cocaine (despite the

harm that cocaine had on his relationship with his daughter George continued to indulge in using cocaine and smuggling), (5) recurrent stimulate use in situations in which it is physically hazardous (in one scene in the film we see that George is shot while meeting with other dealers to make an exchange of cocaine), (6) cocaine use is continued despite knowledge of having persistent physical or psychological problems that is likely to have been caused or exacerbated by cocaine (despite have major physical issues while his wife was pregnant George continued using), (7) tolerance: the need for markedly increased amounts of cocaine to achieve intoxication or desired effect (see marker one). Specifiers include in sustained remission because at the end of the movie none of the qualifiers would be met; in a controlled environment because Jung is in prison, and the severity is severe because he presented with six or more symptoms.

Jung's mental status appears poor at the end of the film it would appear beneficial to screen for mild neurocognitive disorder because he appears to meet the criteria as follows: Criterion A: evidence of modest decline from a pervious level of performance in on or more cognitive domains (learning and memory) based on the (1) difficulty recalling the visitation and/or whereabouts of his daughter and (2) a modest impairment in cognitive performance, Criterion B: the cognitive deficits to not interfere with capacity for independence (although Jung is in jail so independence is limited), Criterion C: cognitive deficits to occur exclusively in the context of delirium, and Criterion D: symptoms are not explained by another mental disorder. Specifier could be due to substance use or multiple etiologies. I would include specifier with behavioral disturbance because he appears to have visual hallucinations of his daughter at the jail. Criterion D is questionable because Jung could have other comorbid disorders.

Comorbid disorders commonly associated with stimulant use disorder include posttraumatic stress disorder, antisocial personality disorder, attention-deficit-hyperactivity disorder, and gambling disorder. Although in the traditional sense George does not meet the criterion for gambling disorder in the DSM-V it is of interest to consider the thrill that George displayed when he successfully pulled off a smuggling job and at the peak of his wealth that he chose to continue to be involved in the world of cocaine despite the clear drawbacks of the lifestyle.

Section Three: Modes of Treatment

Due to the fact that Jung is in a controlled environment at the end of the film and his previous history of engaging in toxic relationships while serving time and level of severity of his disorder it would be my recommendation that Jung engages in residential care. Residential care would take place within the prison system and Jung would attend group twice daily, engage in family counseling (once weekly if his daughter would agree to be involved), meet for individual counseling twice weekly, and attend 12-step meetings. Group counseling and 12 step programs play an integral role in relapse prevention. It has been illustrated that individuals who have substance use disorder have a better prognosis when involved in-group counseling because they are not isolated and they have peer support with similar goals. Family counseling would be beneficial for George because it is clear in the film his major motivating factor for change is to rehabilitate the relationship he desires with his daughter. It is clear that George's daughter has suffered significantly because of the choices that her parents made when she was a child and if she is willing to attend counseling it could be healing for both of them. Individual counseling would be for George to explore and tackle issues related to

motivation of using, motivation for change, obstacles experienced, etc. Referrals to outside sources may be limited due to the fact that George is imprisoned, however, I would recommend that George engage in other secondary approaches to manage symptoms associated with substance use including meditation and yoga if available. Another adjunct service I would recommend would be activity scheduling particularly if he does indeed meet the criterion for a mild neurocognitive disorder this can reduce negative psychological states and also help George keep track of daily tasks associated with treatment.

The length and intensity of treatment would depend on the length of George's sentencing but I would say that at least six months of the treatment as described above would be appropriate due to the level of care that George requires. In leaving jail it would be important to coordinate with the judicial system to know what is legally required of George. It would be my recommendation that George enter into halfway housing to continue providing services while he transitions to independent living.

Section Four: Counseling Approaches and Strategies

In individual therapy sessions I would use a combination of community reinforcement, motivational interviewing, and the developmental model.

Community reinforcement would be beneficial because it incorporates cognitive behavioral therapy, environmental, and communal components. Something that struck me repeatedly during the film was the relationship that George had with his father who was unconditionally supportive and loving toward George even though he didn't like his lifestyle choices. Fred told George several times during the film that "He (George) would have excelled in any profession he had chosen" and George would just shrug it off.

Getting to the core of those negative beliefs about his capabilities and responsibilities would be critical to George's recovery and relapse prevention. George has a history of reverting back to familiar patterns and relationships from the past, creating environmental connections that foster sobriety again would be integral in Georges recovery; some examples of how to do this would be through the residential treatment support of group therapy and 12-step membership. Being around other sober individuals and making connections with those people encourages George to maintain his sobriety, it also gives George an outlet to express frustrations that he has on the road to recovery. The last component of CR is communal in my mind this is similar to environment but has to do with rebuilding the relationship with family members and for George some vocational training and career exploration.

Utilizing motivational interviewing would be another important component of treatment for George. Often addicts are shamed for their choices and George made several deeply "bad" choices in his life that truly led him to lose everything. Exploring what George liked about smuggling and using cocaine is as equally important to finding out his reasons for changing and becoming sober. Motivational interviewing also gives the clinician the opportunity to explore what has worked for the client in periods of sobriety and what hasn't. I also believe affirmations would be key in establishing a strong therapeutic alliance with George because in the film there are several scenes where he is only berated for his choices when he gets 'caught' (specifically by his wife and mother) but when things are going well they were fine with him engaging in illicit activities. For that reason providing George with affirmations for positive choice could make a significant difference in his self-concept.

Lastly using the developmental model seems appropriate to incorporate with George especially in the beginning stages of recovery. Initial focus of treatment has got to be focused on working on himself and maintaining sobriety. The developmental model posits that like a toddler in the early period of sobriety it is important for the client to have extra reassurance and support. Transitioning into ongoing recovery the focus becomes more about relationships with others.

If George's daughter, Kristina, would be willing to participate I would encourage family counseling for the two of them. For Kristina I think this would be a valuable opportunity to express what she thinks about her father's choices as an adult. Part of the recovery process is accepting the mistakes that have been made and hearing Kristina allows George to acknowledge her perceptions. I think using homework and for Kristina and George would be a good start because of the lack of communication that they have had for such a long time. Something as simple as having each of them writing a letter to each other about what has happened and how they feel about each other would be a good place to start.

Relapse prevention would include many of the therapeutic strategies listed above in addition to assessing triggers for use, setting up alternatives to use, and explaining that relapses do happen and that taking those experiences and learning from them is often part of the road to recovery.

Treatment goals for George would include development of coping skills for triggers, awareness of cognitive distortions and ability to replace negative self-talk with positive self-talk, attendance in mutual help group(s), and long term abstinence from illicit drug use. Initially I believe progress would look like authentic interaction in

therapy and though progress may be slow simply attending the meetings and interacting with other peers who are maintain sobriety would seem like progress in my eyes.

Accepting responsibility for the position that he is in is another defining part of progress in my eyes as a clinician because it is important for George to understand how his own behaviors, motivations, and desires contributed to the path that he chose.

References:

American Psychiatric Association (2013). *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.). Washington, DC: Author

Demme, T. (Director). (2001). *Blow*[Motion picture on DVD]. United States: New Line Cinema.