Applied PAT

PRESENTED BY

CODY CALLON, MSW ZACHARY WALSH, PHD MODULE 5: SUBSTANCE USE DISORDERS

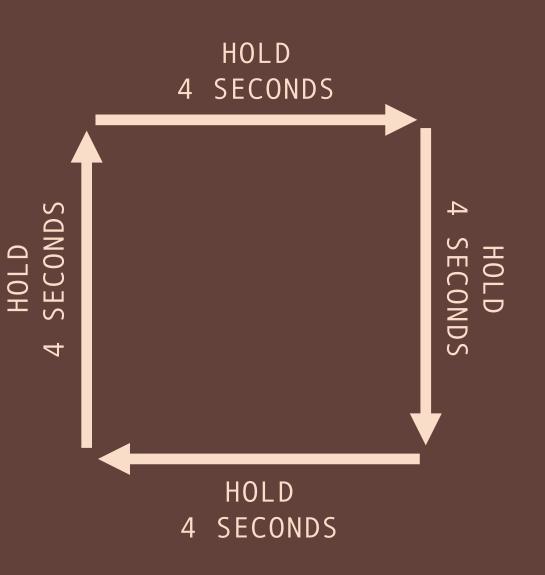
Introductions



LAND ACKNOWLEDGEMENT



BOX BREATHING



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AGENDA

Welcome, agreements, L.A.	01
Discussing Substance Use with Motivational Interviewing	02
Introduction to normative feedback	03
How to provide normative feedback	04
Introduction to readiness rulers and change plans	05
Incorporating relapse prevention skills	06
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GROUP AGREEMENTS

CENTRE



Confidentiality

Engagement

Non-judgmental listening

GROUP AGREEMENTS

CENTRE

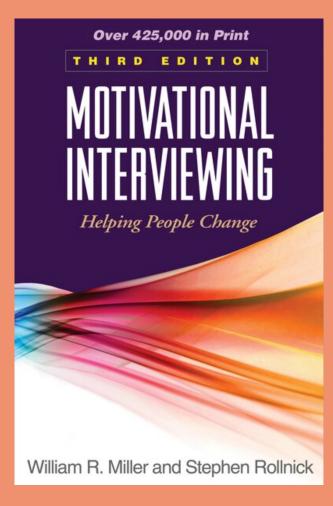


Timeliness

Right to pass

Equity

Discussing Substance Use with Open Motivational Interviewing



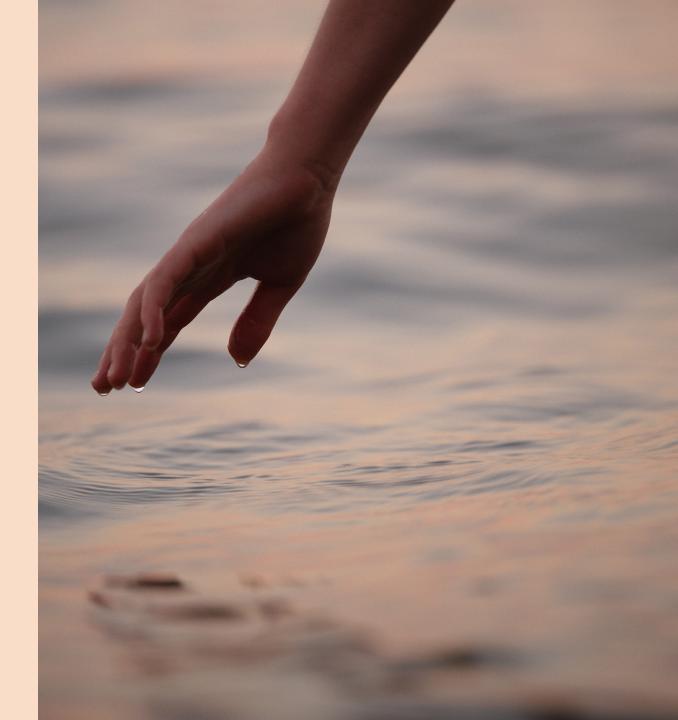
Core Skills - Oars



Open questions
Affirming
Reflecting
Summarizing

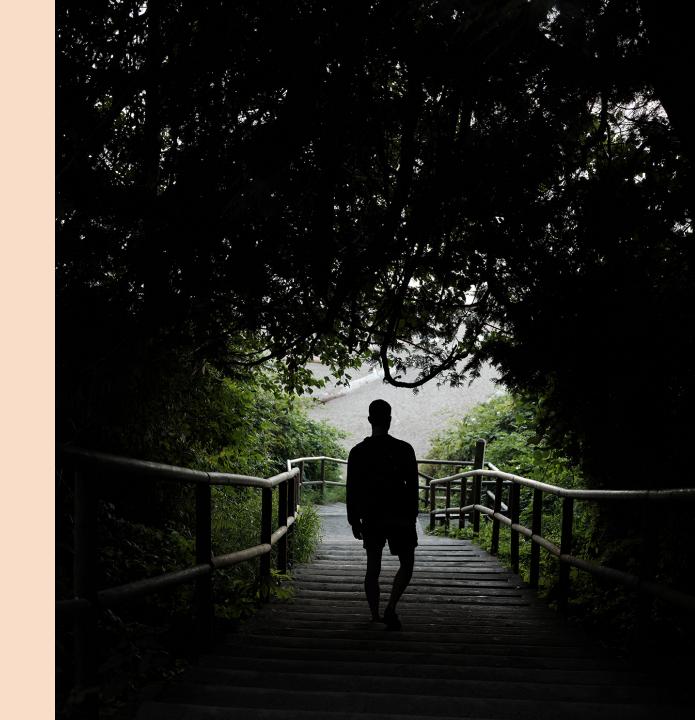
core skills Open Questions

Ask an open question and then reflect (X2) Avoid closed and multiple choice



core skills Affirming

- Recognize and acknowledge that which is good
- Support & encourage
- Must be true
- Facilitates retention
- Reduce defensiveness
- Ask clients to describe their own strengths
- Avoid affirmations that begin with the word "I"



CORE SKILLS Reflections

- Simple reflections add little
- Complex reflection adds some meaning or emphasis
- Understate > overstate
- Briefer > longer

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- Direction Differential reinforcement
- Curious > Clever
- MI = 2-3 reflections per question
- 50% of responses are reflections
- Other approaches questions outnumber reflections 10 to 1

core skills Summarizing

- Reflections that pull together several things
- Collecting summary
 - series of interrelated items
 - affirmations
- Linking summary
 - reflect and link it to prior conversation
- transitional summary
 - pulling together what's important to shift to something new
- allows people to hear various aspects simultaneously
 - Vs reflections 1 @ time
- Summarize ambivalence

Listening -Roadblocks

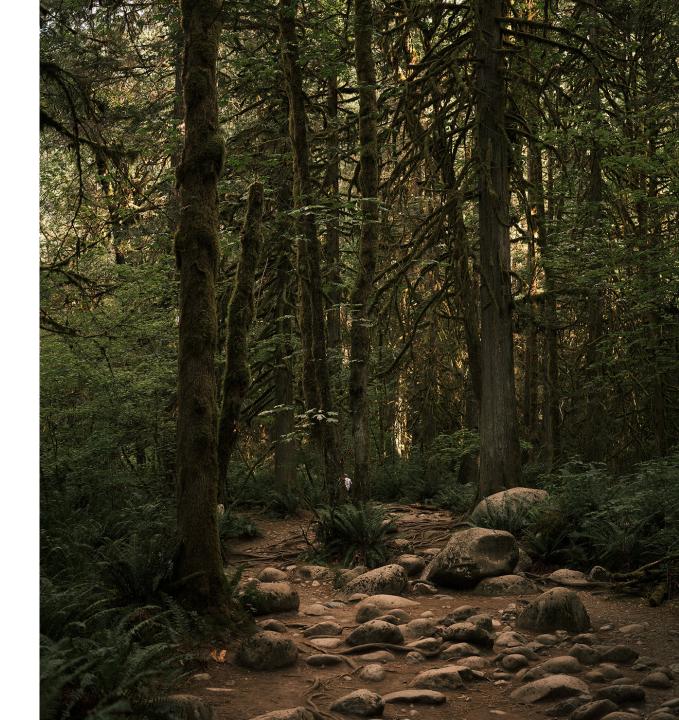
- Ordering, directing, or commanding
 Warning, cautioning, or threatening
 Giving advice, making suggestions, or providing solutions
 Persuading with logic, arguing, or lecturing
- 5. Telling people what they should do; moralizing6. Disagreeing, judging, criticizing, or blaming
- 7. Agreeing, approving, or praising 8. Shaming, ridiculing, or labelling 9. Interpreting or analyzing 10. Reassuring, sympathizing, or consoling 11. Questioning or probing 12. Withdrawing, distracting, humouring, or changing the subject

Values & Goals

- When you understand what people value you have a key to what motivates them.
 - longer-term goals
 - Bow will life be different 1, 5, 10 years from now?
- Understanding values & goals promotes engagement
- Value-behaviour discrepancies
- . Convey acceptance and respect
- Question values and follow with reflection

Discrepancy

- When people are invited to reflect on their values and actions within a safe, nonjudgmental atmosphere they are usually well aware of discrepancies
 - The counsellor's task is to help the person continue attending to and reflecting on them without reverting to defensiveness In MI, the confrontation is with oneself.
- There is no need to "get in their face" to make it happen.



Intervention RAPPORT BUILDING & INTRODUCTION

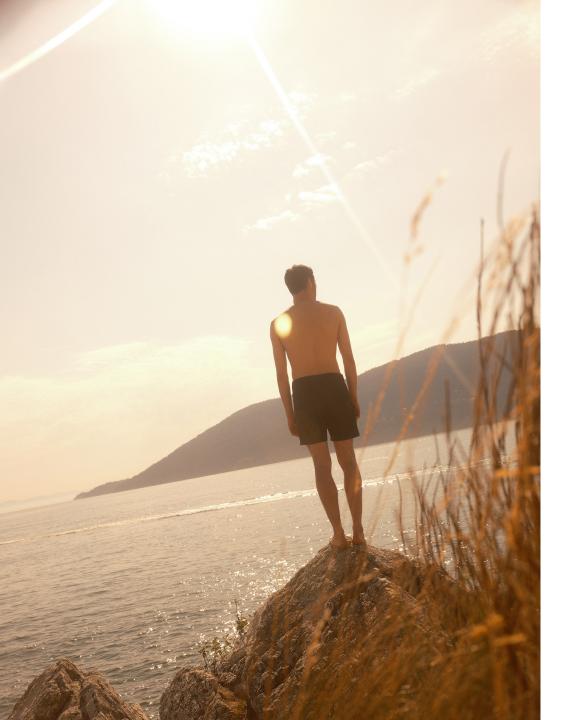
Set tone

- Express empathy and respect
- Introduce intervention
- Clarify motivational stance

Pros & cons of substance use

- E.g. Pros Alcohol: Relaxing, social context
- E.g. Cons Alcohol: Expensive, leads to conflicts





Demonstration

DISCUSSING SUBSTANCE USE WITH OPEN MOTIVATIONAL INTERVIEWING

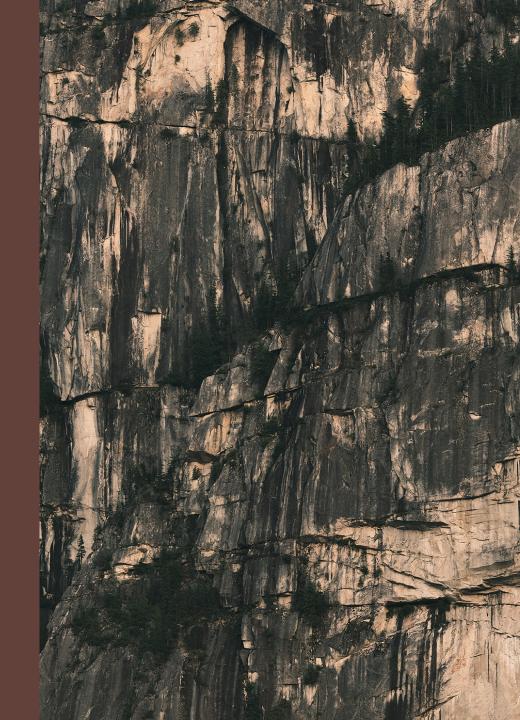
Practice

DISCUSSING SUBSTANCE USE WITH MOTIVATIONAL INTERVIEWING (30 MINS)

- Dyad practice (15 mis each role)
 - One person as therapist and other as "client"
 - "Client" may choose to use own substance use or role play a person with substance use disorder
 - Therapist practices discussing the "client's" substance use with Motivational Interviewing for 10 minutes
 - Therapist aims to try to apply each of the OARS skills
 - 5-minute debrief (focus on application of OARS skills)
- Switch roles

BREAK

Introduction to Normative Feedback



Normative Feedback

Facilitating a conversation in which aspects of a client's substance use and risk factors are shared with the client to elicit reflection

Common categories of exploration when providing normative feedback:

- Substance use patterns / abnormality of substance use
- Finances / cost of substance use
- Reasons for using substance(s)
- Negative consequences associated with substance use
- Risk factors for substance use problems (e.g., depression, anxiety, adverse childhood events)

Normative Feedback

Feedback provided is specific to the client's experience and the goal of the conversation is understanding:

- The client's feelings about their substance use
- Their thoughts about making changes
- Where barriers to change may arise

Normative Feedback

- Provision of personalized feedback is
 integral component of Motivational
 Enhancement Therapy
- Provided during the preparation phase of psychedelic-assisted therapy
- May be provided using a formal
 Personalized Feedback Report or collected
 and discussed via conversation with client



HOW TO BUILD A FORMAL PERSONALIZED FEEDBACK REPORT

Personalized Feedback Report Components VARIABLE DOMAIN **MEASURE** Drinking Stimulant use Substance use patterns / Substance use patterns Opioid use abnormality questions or TLFB Other substance use Risk from other drug use Risk from depression PHQ-9 **Risk factors** Risk from generalized anxiety -GAD-7 Risk for adverse Adverse childhood childhood experiences experiences questionnaire Clinical substance use Reasons for using Motives for use drugs/alcohol motives questionnaire Negative effects of Short inventory of Negative consequences problems - revised substance use of use

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A62 \clubsuit \times \checkmark f_X Physical Health	(items 2+10+12)	
A	В	C D E F G H
1 Personal Feedback Report Scoring Instruct		
2 DO NOT AT ANYTIME HIT THE DELETE KEY	- THIS WILL ERASE FORMULAS	
3 4		
4 5 6		
7 1a. Your drinking (Substance Use Pattern	s Questions)	
	# of drinking days /30 (Question 1a)	Enter amount
9	# of drinks on a normal drinking day (Question 1b)	
10 11	# of drinks on a heavy drinking day (Question 1d) # of days of heavy drinking /30 (Question 1e)	
12 1	# of drinks on heaviest drinking day /30 days (Question 1f)	
	\$ spent/month	
14		6048 \$ spend/year (Will automically change)
	Percentile compared to same sex adults	
16		

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A62 \clubsuit \times \checkmark f_x Physical Health (it	tems 2+10+12)		
A	В	C D	E
45			• • • • • • • • • • • • • • • • • • • •
	(Clinical Substance Use Motives Questionnaire)		
7 Social/Enhancement (mean of items 1-10)		Enter score for each	
B Other Substance Use (mean of items 11&12)	1		
9 Coping with Anxiety (mean of items 13-15)	5		
0 Withdrawal (mean of items 16&17)	4	+	
1 Loneliness (mean of items 18-21)	5	i	
2 Pain/Sleep (mean of items 22-25)	2		
3 Coping with Depression (mean of items 26-31)	2	2	
4 Relieving Boredom/Getting Energy (mean of items 32-34) 5	4	•	

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A62 \clubsuit \times \checkmark f_x Physical Health	i (items 2+10+12)	
A	В	C D
68 69 4. Risks from other Drug Use (Substance 70	e Use Patterns Questions)	
71 72	Low Medium	Place a capital X
72 73 X	High	
74		
75		
76 5. Risk from Depression (Patient Health C	Juestionnaire)	
77		
78	None - minimal symptoms	Place a capital X
79 X 80	Mild symptoms	
80	Moderately severe symptoms	
82	Severe symptoms	
83		
84 6. Risk from General Anxiety (General Anx	xiety Disorder - 7)	
85		
86	Minimal symptoms	Place a capital X
87	Mild symptoms	
88 X	Moderate symptoms	
89	Severe symptoms	
90		
	es (Adverse Childhood Experiences Questionnaire)	
92		(10)
93 Total Score: 94	4	/10 (max score)

4. Risk From Other Drug Use

Low 0 Medium 0 High X

5. Risk From Depression

None - minimal Mild X Moderate Mod Severe Severe 0

6. Risk From Generalized Anxiety

Minimal		
Mild		
Moderate	Х	
Severe	0	

7. Risk from Adverse Childhood Experiences

Total Score: 4 /10 (max)

Providing General / Normative Feedback

Demonstration



Reflection

Please take 5 minutes to reflect on what part(s) of this feedback process would have the greatest impact on you if you were a client and why.

Be prepared to share you reflections.



Sharing Reflections



Introduction to Readiness Rulers & Change Plan

Readiness Rulers

On a scale from 1 to 10, with 10 being very ready to change, how ready or willing are you to make a change in your [substance use or addictive behaviour]?

On a scale from 1 to 10, with 10 being very confident, how confident or capable do you think you are in making a change?

1 – NOT	10 -	VERY
CONFIDENT	CONF	IDENT

Why is it a ____ and not a ____ [lower number]? What would it take to go from a ____ to a ____ [higher number]? What would you be willing to try?

Change Plan Worksheet Prompts:

- The changes I want to make are..
- The most important reasons why I want to make these changes are...
- The steps I plan to take in changing are...
- The ways other people can help me are...
- I will know that my plan is working if...
- Some things that could interfere with my plan are...

The Change Plan Worksheet

The changes I want to make are:

The most important reasons why I want to make these changes are:

The steps I plan to take in changing are:

The ways other people can help me are: Person Possible ways to help

I will know that my plan is working if:

Some things that could interfere with my plan are:

Incorporating Relapse Prevention Skills

CBT for Substance Over 150,000 in Print SIXTH EDITION CLINICAL HANDBOOK OF Misuse PSYCHOLOGICAL DISORDERS 14. Alcohol Use Disorders 555 Barbara S. McCrady and Elizabeth E. Epstein **15.** Substance Use Disorders 612 A Step-by-Step Treatment Manual Stephen T. Higgins, Sarah H. Heil, and Kelly R. Peck edited by DAVID H. BARLOW

cognitive behavioural therapy (CBT) Substance Misuse

"...drug use is considered learned behavior that is maintained, at least in part, by the reinforcing effects of the pharmacological actions of drugs in conjunction with social and other nonpharmacological reinforcement,,, (Higgins, Heil, & Lussier, 2004).

The reliable empirical observation that abused drugs function as reinforcers in humans and laboratory animals provides sound scientific support for that position (Griffiths, Bigelow, & Henningfield, 1980; Higgins et al., 2004)."



CBT Substance Misuse

Cognitive-behavioral/ relapse prevention therapy includes:

- Functional analysis training to identify environmental antecedents and consequences that influence their drug use.
- Skills training on how to rearrange one's environment to avoid or manage high-risk settings.
- Identify and modify unrealistic expectations about drug use & cope with craving and thinking patterns that increase risk
- Social skills training to cope with social anxiety & skills deficits limit clients' access to healthier reinforcement

CBT Coping Skills

- Reducing barriers to action
- Enlisting social support
- Initiating the plan on a specific date
- Preparing social support action



CBT Activities

A specific daily schedule:

- Enhances your client's selfefficacy
- Provides an opportunity to consider potential obstacles
- Helps in considering the likely outcomes of each change strategy



Triggers and Consequences

WHAT IS A TRIGGER?

Trigger \rightarrow Thoughts \rightarrow Feelings \rightarrow Behavior \rightarrow Consequences

TYPES OF TRIGGERS

- Person
- Place
- Thing/Time

STRATEGIES FOR DEALING WITH TRIGGERS

- Avoid
- Alter
- Substitute

Assertiveness & Drink/Drug Refusal

- 1. Make no first word
- 2. Offer a one-line explanation (ok to lie?)
- 3. Request an alternative
- 4. Confront broken record
- 5. Leave (have you put yourself in a position to do this?)

Life Enhancement Strategies & Relapse Prevention

WHAT TYPES OF ALTERNATIVES ARE THERE?

Long-term goals/life areas/values

- Family
- Social
- Intimate
- Education/training
- Employment/career

- Hobbies/recreation
- Volunteer work/charity
- Physical/health issues
- Spirituality
- Psychological/emotional issues

Life Enhancement Strategies & Relapse Prevention

Focus on activities w/ immediate & certain small rewards

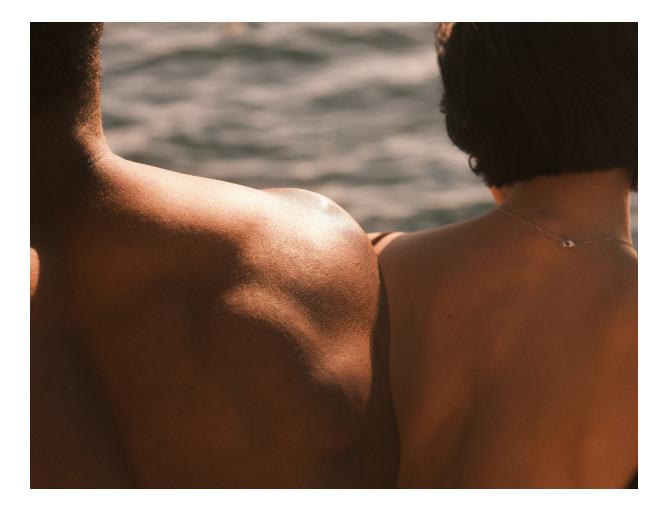
Over time these activities lead to completion of larger goals

Generate examples of short-term activities

- Don't get frustrated, this is unfamiliar
- If alternatives were obvious, you'd be doing them
- Ask others what they do

Sharing & Discussion

Please share a relapse prevention skill or strategy that you like to use or have used in the past.



NUMINUS

Closing



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