

Combining CBT and MI Workshop

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Agenda

- MI as precursor to treatment
- Break
- Combining MI with a CBT module
- Raising concerns with client
(time permitting)

MI as a Precursor to CBT

- Increase motivation for treatment engagement
 - Attendance
 - Participation / Exploration
 - Completion of homework
- Relatively brief
- Same or different provider

A Model for MI as Precursor

1. Briefly discuss treatment
2. Elicit client's reasons for treatment
3. Elicit client's concerns and barriers
4. Elicit client's confidence and strengths
5. Summarize 2, 3, and 4
6. Assess for, and elicit commitment from, client

1. Briefly discuss treatment/program

Elicit - Provide – Elicit

Elicit client's knowledge of treatment

“What do you already know about the program?”

Provide more info about treatment if appropriate

“Can I tell you some other things that may be of interest to you? [Wait] Ok, ...”

Elicit client's reaction to new info

“What are your thoughts about that?”

2. Elicit client's reasons for treatment

- **Open-ended questions**

“Why did you decide to check out this program?”

“What else do you hope to get out of this treatment?”

“How would you know if the treatment was successful for you?”

“What may happen if you don't get what you need from the treatment?”

- **Prompts for elaboration**

“That's interesting. Tell me more about that.”

Repeat or paraphrase client strengths (reflections)

3. Elicit client's concerns and barriers

- **Open-ended questions**

“What do you think will be difficult for you?”

“What concerns do you have about making this treatment work for you?”

- **Validate ideas and feelings**
- **Do not dismiss or promise to fix**
- **Agree to support client's efforts**



4. Elicit client confidence and strengths

- **Open-end questions**

“What gives you the courage to start this treatment?”

“Tell me about something in the past you have succeeded at and how you did it.”

“What are you good at that will help you get the most out of this treatment?”

“How will you be able to make this program work for you?”

- **Prompts for Elaboration**

“That’s interesting. Tell me more about that.”

Repeat or paraphrase client reason (reflections)

5. Summarize client's reasons, concerns, and strengths

“Ok. Let me summarize what we’ve talked about so far. When you came in today, you weren’t really too sure what to expect, but you felt like you had to come here or else you would lose your wife and your home. You are also hoping that if you succeed at treatment, you may be still be able to get your job back. The biggest concern you have about starting the program is making sure we work with you to manage your diabetes while you go through withdrawal. Right now, your faith in God is giving you courage to move forward, and when you’ve followed this in the past, things have worked out for you. It also seems like you know a lot about your diabetes and how to talk to the nurses about what you will need. As I said, when we finish, I’ll introduce you to the charge nurse and you can talk with her about working out a game plan.”

6. Assess for and elicit commitment

- **Ask Key Question to gauge readiness**
“What are you willing to commit to at this point?”
- **If ready to make commitment, help client articulate:**
 - Specific – What exactly willing to do?
 - Measurable – Something that can verify yes/no that doing.
 - Achievable – Goal fits with treatment program.
 - Realistic – Help client make goal realistic.
 - Time-Bound – Specify for how long or when done by
- **If not ready to make commitment...**
 - Reflect and validate (do not confront, argue, or intimidate)
 - Move forward from where client is
“So what is the next step for you then?”

Demonstration

1. Briefly discuss treatment
2. Elicit client's reasons for treatment
3. Elicit client's concerns and barriers
4. Elicit client's confidence and strengths
5. Summarize 2, 3, and 4
6. Assess for, and elicit commitment from, client

MI as Precursor Exercise

<u>Task</u>	<u>Time</u>
Independent worksheet	5 min
Participant 1 Role Play	20 min
Participant 2 Role Play	20 min
Group Processing	15 min

** Note: If not a clinician, alter exercise as if you are motivating a newly hired employee.

MI as Precursor Role Play Exercise

- Work in pairs
- Introduce self as representative of specific treatment/program
- Complete 6 steps with focus on motivating client to engage in your treatment/program
- Partner role plays person starting treatment
- Switch roles

Combining MI with a CBT Module

- Review CBT module as group
- Independent preparation for CBT module
- Small group exercise
 - Real play of CBT module
 - Other group members are practicing providing MI skills
- Goals
 - To experience how process feels as client
 - Develop some good 'MI habits' while processing CBT

CBT Module: DEESC Scripting for Assertive Communication

- Describe situation
- Express feeling
- Empathize with other's point of view
- Specifics of what I would like
- Consequences
 - “If you treat me this way, then ...”
 - “If you don't treat me this way, then...”

DEESC Worksheet

- Recent social interaction in which you felt:
 - Frustrated
 - Unheard
 - Treated unfairly
 - Upset or bothered
- 5 minutes to complete worksheet
- Be willing to share script in small group

Small Group Exercise

- 1 person selected to read script
- Other group members have prompts
- Take turns

Order of Task for Exercise:

1. Open question
2. Speaker reads script
3. Affirmations
4. Summary
5. Open question

Situations for Raising Concerns

- Avoiding treatment
- Ill-advised goal
- Risky behaviors

Strategy for Raising Concerns

1. Reflect: client's goal, plan, or intention
2. Ask permission to express concern
3. State your concern
4. Ask for client's response

Source: COMBINE Manual

1. Reflect: client's goal, plan, or intention

- Repeat or paraphrase what you heard
- Avoid tone of sarcasm or judgment

“You’ve been missing the excitement of the nightlife and you decided to look for a job in a bar.”

2. Ask permission to express concern

- Simple step to encourage listening

“Would it be alright if I told you a concern I have about your plan?”

“I think I understand what you want to do, and why. I wonder if it would be okay for me to say some things that occur to me.”

“I’m a little worried. Would you mind if I explained why?”

3. State your concern

- Clear and concise
- Avoid being judgmental
- “I” message

“I’m concerned that working in a bar may trigger your desire to start drinking again, even if it doesn’t seem risky to you now.”

4. Ask for client's response

- Open the door to further discussion
- Allow for disagreement and avoid argument

“What part of that, if any, makes sense to you?”

“What are your thoughts about my concern?”

Small Group Discussion

- One thing I found interesting...
- One thing I could use...
- A question I still have is...
- Another way of looking at this...