

Motivating Behavior Change and Effective Case Planning

Welcome . . .

- Introduce yourself to a person next to you.
- Share with them one accomplishment or aspect in your life you are most proud of in any domain of your life.

Background Research

In the late 70's, Bob Martinson published a report about what works in corrections, based on research in New York. His work basically concluded that nothing works to rehabilitate offenders. Or at least very little of what we we're doing then either worked or was evaluated to see if it was effective.

Reinterpretation of the Research

- Andrews, Gendreau, and Palmer reinterpreted Martinson's finding and indicated that 40-60% of the studies indicated some treatment effect of rehabilitation programs.
- These studies led to a search of "What Works".
- This resulted in a set of What Works principles:
The Principles of Effective Interventions>

The Risk Principle (Intensity of Intervention)

- Higher levels of service should be allocated to the higher risk cases.
- Effective interventions target factors that relate to the risk behavior that can be changed – the dynamic factors.
- Use objective, standardized, and validated assessments of risk to identify the risks that led to the behaviors.

The Need Principle (Targeted Interventions)

- Youth and families present with a variety of needs. Effective interventions identify and affect change in the need areas that directly contribute to the risky behavior.
- We shouldn't try and fix everything...we should focus our interventions on the intersection of risk and need.

The Responsivity Principle

(Effective Delivery of Service)

- Meet youth and families where they are. Develop a repertoire of interaction strategies.
- Match the interventions to the youth's readiness to make changes in their behaviors.
- Match the people and programs that are delivering interventions to the needs and abilities of the youth.

The Program Integrity Principle

(Evaluate Services)

- Integrate treatment at appropriate intervention points, considering the youth's readiness to change.
- Deliver timely treatment interventions targeted at risk and need to the higher risk youth.
- Evaluate program effectiveness.

Questions we should be asking . . .

- How are risk and needs reflected in case plans?
- How do we structure case plans to reflect the youth's readiness to make changes in their behaviors, and still have effective documents for court?
- How do we ensure that the treatment system can effectively match services to youth's needs and readiness to change?

Motivating Changes in Behavior

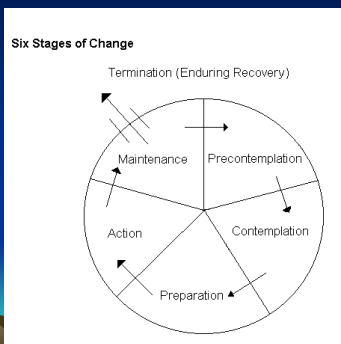
- Assessing motivation as an ongoing part of case management.
- Applying the right interventions at the right times to motivate positive behavior change.
- Supervising social workers to evaluate motivation

Exercise #1

From now on, you have to go to court wearing your pajamas with a state issue bathrobe . . .

- Share with your partner how you feel about this change.
- Rate where you are on the continuum from strongly opposed to making this change (0) to ready and willing to make change (10).

The Transtheoretical Model of Change



Pre-Contemplation

- No intent to change behavior in the near future (the next 6 months).
- Characterized as resistant or unmotivated and tend to avoid information, discussion, or thought with regard to the targeted behavior.
- Lack of awareness that life can be improved by a change in behavior
- “Problem? What problem?”

Contemplation

- Recognition of the problem, initial consideration of behavior change, and information gathering about possible solutions and actions.
- Aware of the benefits of changing, but remain keenly aware of the costs
- Seen as ambivalent to change or as procrastinators.
- “This *may* be a problem I *may* need to do something about.”

Preparation

- Intend to take steps to change, usually within the next month.
- Show introspection about the decision, reaffirmation of the need and desire to change behavior.
- “I need to do something about this problem. I need to change.”

Action

- Taking overt, perceptible steps to change behavior, but for fewer than 6 months.
- This is the stage that most case plans are written and implemented for, regardless of the stage of change the youth is in.
- “Let’s figure out some steps and strategies I can take to change and make a plan.”

Maintenance

- Maintainers are distinguishable from those in other stages of change in that they report the highest levels of self-efficacy and are less frequently tempted to relapse.
- Think back to how you introduced yourself – you were able to share an accomplishment. You demonstrated self-efficacy.
- “I’ve changed a lot, and I’d like it to stay this way.”

Think back to the pajamas exercise

...

- What is your assessment of where your partner was on the wheel in their motivation to change?
- Write a brief 2-3 step case plan to help them make the change to wearing pajamas and the state-issue robe to court.

So . . .

- How do we assess motivation?
- What are the techniques for assessing motivation?
- How do we motivate change...how do we help youth and families move forward on the wheel?

Motivational Interviewing

is a client-centered, directive method for enhancing rapport and creating nonjudgmental conversations around intrinsic motivation to change by exploring and resolving ambivalence.

Motivational Interviewing and Case Planning

- Collaborative: working in partnership and consultation with, negotiating.
- Evocative: listening more than telling; eliciting rather than installing.
- Respectful: honoring the person's autonomy, resourcefulness, ability to choose.

MI 4 Basic Skills - OARS

- Ask Open questions – not short answer, yes/no, or rhetorical questions.
- Affirm the person – comment positively on strengths, effort, intention.
- Reflect what the person says – active listening
- Summarize – draw together the person's own perspectives on change.

Working with Pre-Contemplation

- Don't argue against resistance – pushing against resistance entrenches it.
- Resistance is a cue to modify your approach.
 - Treat ambivalence (mixed feelings) as normal
 - Moving someone from resistance to ambivalence or to a recognition of their mixed feelings is moving someone from Pre-Contemplation to Contemplation.
- Emphasize the person's ability to choose, to have control and autonomy.

MI Techniques for Pre-Contemplators

- Reflection – acknowledge “resistance” by reflecting it back.
- Amplified reflection – overstate it a bit...see what happens.
- Discrepancy analysis

MI Interviewing Strategies for Pre-Contemplators

- If you don't make any change, what do you think will happen?
- How does (the behavior) fit into that? (This is a discrepancy analysis)
- Counsel in a way that invites the person to make arguments for change. "I hear you saying that you don't want to stop (the behavior). OK, so I would guess that it didn't bother you then when..."

Case Planning in the Pre-Contemplation Stage

No written case planning can be done at this stage.

Instead...

- Schedule frequent meetings.
- Meetings need to be in partnership and collaboration with the youth and family.
- Requires lots of negotiation.
- Honor autonomy and ability to make their own choices.
- Complete each meeting with a summary.

End each meeting with ...

- Briefly acknowledge areas of reluctance (and tease out the ambivalence).
- A summary - find strength-based ways to summarize the person's commitment. (As commitment strengthens (contemplation) you will be able to negotiate towards preparation.

Ambivalence

- “the existence of mutually conflicting emotions or thoughts about a person, object, or idea”
- “Am I ready” or “should I change?”
- If so, “Will I be successful and do I know how to do it?”

The Move to Contemplation: Interview Questions

- In what ways would it be good for you to ...?
- What are the good things about ..., what are the not so good things about ...?
- Why would you want to ... ?
- Double-sided reflection – “on the one hand I hear you saying... and on the other hand I hear you saying ...

MI Techniques to Move from Contemplation to Preparation

DARN:

- **D**esire – want, prefer, wish, etc.
- **A**bility – able, can, could, possible, etc.
- **R**easons – specific arguments for change, Why do it? What would be good?
- **N**eed – important, have to, it matters, got to

Questions for the Preparation Stage of Change

- Do you want to know what I would do if I were in your situation?
- I could tell you some things that other people have done that have worked...
- Tell me how you'll feel about this idea, ...
- What do you think gets in the way?... Is it *importance* or *confidence*?

Importance or Confidence

Language that indicates low confidence:

- I'll try
- I wish I could
- I would if I could
- I've tried

Language that indicates low importance:

- It (changing the behavior) won't change anything
- Why would I even want to

MI Skills for the Preparation Stage

Barriers: what gets in the way of change.

- “On a scale of 1 to 10, how confident are you that you could...?”
- “Why are you at (their number) and not at zero?”
- “What gets in the way from your (their number) being a (next number up)?”

More MI Skills for Preparation

Values: Discrepancy analysis


- “How does (the behavior) fit into your goal to ..?”
- “On a scale of 1 to 10, how important is it to you to ...”
- “Why are you at (their number) and not at zero?”
- “If you don’t make any change, what do you think will happen?”

Case Planning at the Preparation Stage

- Case planning for this stage of change focuses on completion of pre-action steps – e.g. removing perceived obstacles to change or moving closer to “values”.
- The focus needs to be on increasing confidence and/or importance.


The "Action" Case Plan

- You know what this plan looks like already
...
e.g.
Goal: Youth remains drug-free and does not engage in illegal behavior
Action Steps: Youth attends SA Tx, etc.




Case Planning for Maintenance

- Discharge plans
- "Relapse" prevention plans.



Take home lessons on motivating behavior change and case planning

- One stage at a time, in the first month can mean double the chance of action in the next six months
- Match engagement to stage of change:
 - Experiential and psychodynamic methods are most successful at the pre-contemplation and contemplation stage
 - Cognitive and behavioral therapies best suited to the stages of action and maintenance



Exercise

- Look at the case plan you wrote for your partner.
- Would you write the case plan the same way, knowing what you know now about the stages of change?
- Rewrite the case plan, if needed.
- Share the case plan with your partner and get feedback on it.

What have you learned?

- Has this prompted any changes in your thinking about working with youth and families?
- What might you do differently in the future?

Thanks
