"Why Do I Have to be Here?" Person- Centered Interventions for Consumers who are Mandated to Attend Treatment

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1

Overview & Agenda

- Introduction
- Person-First Language
- Agenda:
 - Discuss philosophy/ assumptions about mandated treatment
 - Person-Centered Strategies
 - Measuring Success
 - Discussion/ Questions



2

What are common reasons that consumers may be mandated to attend treatment?



Referral Sources that may be Mandating consumers to attend treatment

- Probation/Parole Agents
- Department of Transportation
- Treatment/Diversion Court Programs
- Child Protective Services
- Attorneys
- Judges
- Other legal or social service related agencies



4

Potential Challenges when working with Consumers who are Mandated to Attend Treatment

- Less motivation
- Challenges in building rapport
- Concerns about efficacy of services
- Concerns related to confidentiality
- Concerns about consumer honestly



5

MANDATED TREATMENT WORKS Patients logally mandated to treatment reported better outcomes than normandated offenders and nonoffenders I year after residential treatment for alcohol and drug problems. Five-year outcomes were similar among the three groups. | Commission of the commis

What is the Goal of Treatment?



- Who decides if treatment was successful?
- What is the provider's goal?
- What is the consumer's goal?
- What is the referring source's goal?

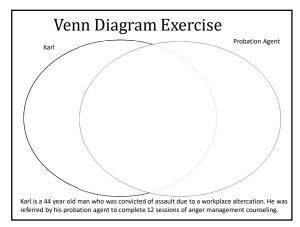
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Balancing Ethical Responsibilities

- Pressure to do what we "should" be doing.
- Different parties may have differing perspectives.
- Issues of systemic racism and bias in the criminal justice system.
- Your ultimate ethical duty is to the consumer!



8



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Person-Centered strategies for the First Session



- Talk explicitly about why the person is here.
- Validate any concerns they have.
- How is mandated treatment like a reality show?

10

Person-Centered strategies for the First Session

- · Avoid debates
- Direct the locus of control back to therapy.
- Express hope that the consumer gets some benefit from the services.



11

Person-Centered strategies for the First Session

- Comprehensive assessment, done conversationally
- Spend time where the consumer wants to spend time!



Person- Centered Strategies for Later Sessions

- Continue to build rapport, convey warmth.
 - As opportunities arise, bring the conversation back to the referring issue.
 - Use motivational interviewing
 - Remain curious



13

Person- Centered Strategies for Later Sessions

- Continue to keep the consumer informed on progress towards completing requirements.
 - Do not move the goalposts!
 - Offer the chance to continue treatment if they find it helpful



14

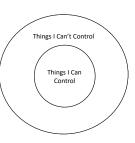
Person- Centered Strategies-Concluding Treatment

- Collaborative documentation
 - Seek input from the consumer.
 - Get the consumer's consent for anything going in the official record.



Person- Centered Strategies

- Understand your limited locus of control.
 - You can control the environment in session
 - The consumer's actions outside of session are in their locus of control.
 - The goal is not to "fix" the consumer, it is to create a space for growth.



16

How Do We Measure Success?

- Completion of sessions
- · Reduction in symptoms
 - Use of substances
 - PHQ-9 or GAD-7
- Increase in motivation to change (URICA)



17

Conclusion/Questions

- The consumer's opinion matters most!
- The skilled provider is able to hold multiple things to be true.
- Know that treatment still can be extremely effective even if the consumer did not initially desire treatment!



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