



Adolescent Community Reinforcement Approach

(A-CRA)

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based on the work of

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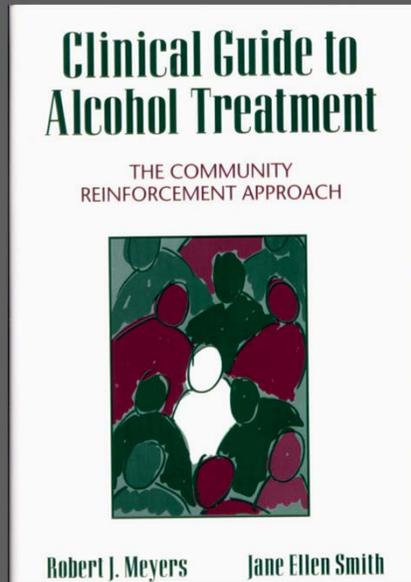


This training is supported by Florida Department of Children and Families
Office of Substance Abuse and Mental Health

Objectives

- ▶ Clinicians will review research related to A-CRA
- ▶ Clinicians will learn several A-CRA procedures and how they are used to guide the treatment process
- ▶ Clinicians will learn what is required for A-CRA certification

First CRA Therapist Manual



CYT

Cannabis Youth Treatment
Experiment

Treatment
Series
Volume 4

Adolescent Community Reinforcement Approach (A-CRA)

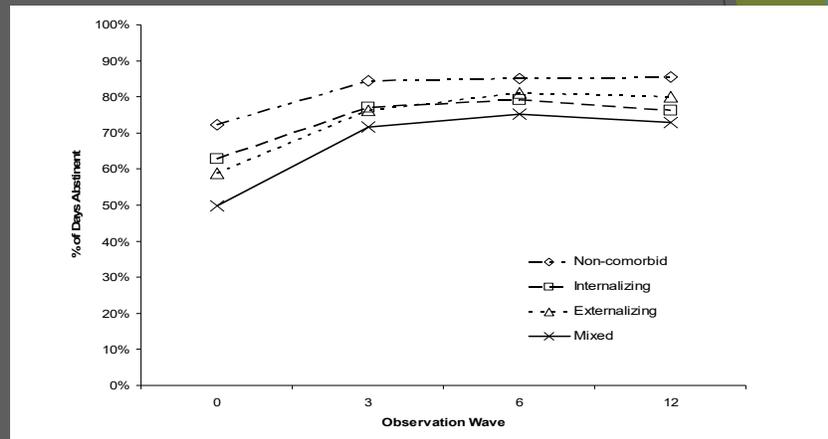
**Godley, S.H., Meyers*, R.J., Smith*,
J.E., Godley, M.D., Titus, J.C.,
Karvinen, T., Dent, G., Passeti, L.L.,
& Kelberg, P. (2001).**

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment
www.samhsa.gov

Percent of Days Abstinent from Alcohol or Other Drugs



Results of HLM (hierarchical linear modeling) growth model analyzing group differences percent of days abstinent

Conclusion: Abstinence

- ▶ Adolescents with COD (Co Occurring Disorders) have greater magnitudes of increase in abstinence than non-comorbid youth
- ▶ Adolescents with COD maintain their treatment gains out to 12 months

Emotional Problems Scale

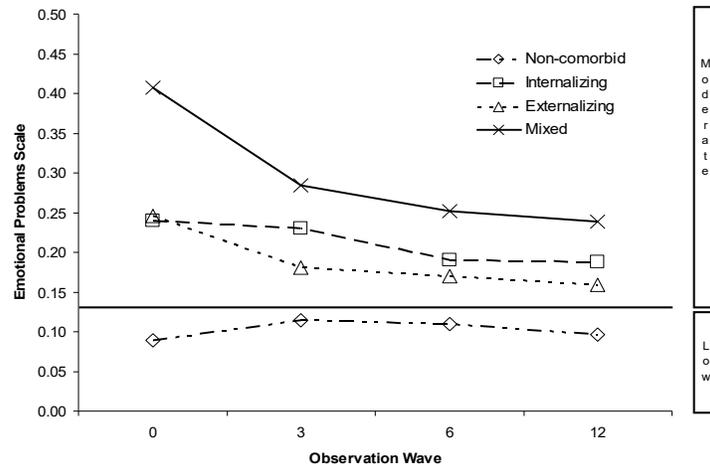


Figure 3. Results of HLM growth models analyzing group differences for the Emotional Problems Scale.

Conclusion: Emotional Problems

- ▶ Adolescents with COD (Co Occurring Disorders) have greater magnitudes of decrease in emotional problems than non-comorbid youth
- ▶ Youth with both externalizing and internalizing MH (Mental Health) problems show the greatest reduction of emotional problems.

CRA (Community Reinforcement Approach) with Homeless Youth Sleznick, Prestopnik, Meyers, & Glassman et al.

- ▶ **Inclusion Criteria:** 14-22, meets criteria for Substance Use or Dependence, plans to remain in area for 6 months.
- ▶ **Data Sources:** Substance Use (Form 90, Posit), Health Risk, Individual functioning, social stability
- ▶ **Follow-up for six months– 86%**



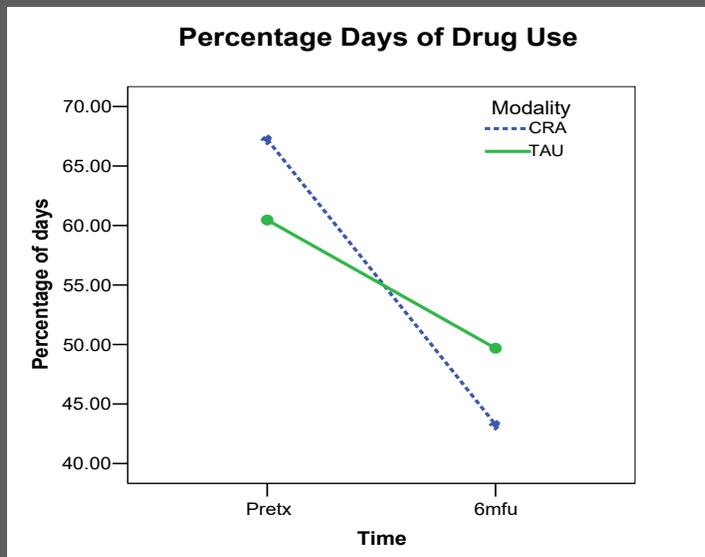
Drug Use

- ▶ 85% marijuana use or dependence
- ▶ 70% alcohol use or dependence
- ▶ 49% other substance use Diagnosis
- ▶ 24% IV (intravenous) drug use

Interventions

- ▶ Treatment As Usual (n=84)
 - ▶ Case Management
 - ▶ Crisis Intervention
 - ▶ Food
 - ▶ Clothing
 - ▶ Mean of 3.4
- ▶ CRA (Community Reinforcement Approach) (n=96)
 - ▶ References Meyers & Smith (1995) & Godley (2001) ACRA manual
 - ▶ Session to establish rapport & provide clear rationale
 - ▶ Treatment plan based on Happiness Scale
 - ▶ Standard set of core CRA procedures

Substance Use Outcome



A-CRA Outcomes at Horizon Behavioral Health

- ▶ Research article: “Effectiveness of A-CRA/ACC in Treating Adolescents with Cannabis-Use Disorder” published in Community Mental Health Journal, November 2012
- ▶ Enrolled 147 adolescents ages 12-18
- ▶ Assessed at baseline, 3, 6, and 12 months
- ▶ More than two-thirds reported quitting marijuana by 12 months
- ▶ Days of marijuana use in the last 90 days decreased significantly from the first follow-up
- ▶ Average days of missing school decreased significantly from baseline to end of treatment

If punishment worked, there would be few, if any, alcoholics or drug addicts...

What is the goal of CRA (Community Reinforcement Approach)?

“...to rearrange the vocational, family, and social reinforcers of the alcoholic such that time-out from these reinforcers would occur if he began to drink.” (Hunt & Azrin, 1973)

A-CRA's General Goals

Goals: Sessions with individuals

- ▶ Abstinence
- ▶ Participation in pro-social activities
- ▶ Positive relationships with family
- ▶ Positive relationships with peers

Goals: Sessions with caregivers

- ▶ Motivate their participation
- ▶ Promote the individual's abstinence
- ▶ Provide information about effective caregiving

A-CRA Session Structure

- ▶ 10 individual sessions with the adolescent
- ▶ 4 sessions with the caregiver
 - ▶ 2 individual sessions with the caregiver
 - ▶ 2 sessions with the caregiver and the adolescent
- ▶ In the office or home and community

General Flow of A-CRA Sessions

Session 1:	Rapport and introduction
Sessions 2-4:	Functional Analysis x 2 Happiness Scale Goals of Counseling
Sessions 5-6:	<i>Begin meeting with caregivers</i>
Sessions 6-13:	Everything else, including finishing the caregiver sessions
Session 14:	Progress review/wrap-up or negotiate with individual for additional time

CRA Induction: First Session

- ▶ Build rapport, build rapport, build rapport
- ▶ Stay focused on the individual you are serving
- ▶ Use positive reinforcement
- ▶ Provide an overview of the basic A-CRA objectives
- ▶ Begin to establish “reinforcers” (motivators)

CRA Induction (cont'd)

- ▶ Set positive expectations (e.g., CRA has scientific backing)
- ▶ Explain that treatment is time limited
- ▶ Discuss several A-CRA procedures relevant to individual's situation (e.g., problem-solving)
- ▶ Emphasize independence/self-reliance
- ▶ Clarify assessment information from GAIN (Global Appraisal of Individual Need) or other assessment tool

Positive Reinforcer

- ▶ What is a reinforcer?
- ▶ How do I find one?
- ▶ Does everyone have reinforcers?
- ▶ How can I use them to help?

Clearing Up Common Misperceptions About A-CRA

- ▶ A-CRA is much more than simply being “nice” to individuals
- ▶ Even though A-CRA therapists do not use “confrontation”, they do:
 - ▶ set limits/boundaries
 - ▶ provide negative consequences for problem behaviors at times

Overview of CRA: Checklist

- ▶ Described basic objective (help find healthy, reinforcing lifestyle...)
- ▶ Outlined several procedures (communication skills, problem solving)
- ▶ Set positive expectations (scientific base)
- ▶ Described duration of treatment (time- limited)
- ▶ Started to identify reinforcers

Functional Analysis (F.A.)

- ▶ An interview that examines the antecedents and consequences of a behavior
- ▶ “Roadmap”
- ▶ F.A.s can be used for 2 kinds of behaviors:
 - ▶ A problem behavior
 - ▶ A healthy, fun behavior

F.A. for Substance Using Behaviors

- ▶ Objective: To work toward decreasing or stopping the problem behavior
- ▶ Outline individual's triggers for substance use
- ▶ Clarify consequences (positive & negative) of substance use for the individual

Functional Analysis of Substance Use: Initial Assessment

- ▶ External triggers
 - ▶ Who, where, when
- ▶ Internal triggers
 - ▶ Thinking, feeling (emotionally, physically)
- ▶ Short-term positive consequences
- ▶ Long-term negative consequences

**Functional Analysis for Substance Use Behavior
(Initial Assessment)**

Triggers			Short-Term Positive Consequences	Long-Term Negative Consequences
External	Internal	Behavior		
1. Whom are you usually with when you use?	1. What are you usually thinking about right before you use?	1. What do you usually use?	1. What do you like about using with _____? (whom)?	1. What are the negative results of (behavior/activity) regarding each of these areas: a. Family members b. Friends c. Physical feelings d. Emotional feelings e. Legal situations f. School situations g. Job situations h. Financial situations i. Other situations
2. Where do you usually use?	2. What are you usually feeling physically right before you use?	2. How much do you usually use?	2. What do you like about using _____? (where)?	
3. When do you usually use?	3. What are you usually feeling emotionally right before you use?	3. Over how long a period do you usually use?	3. What do you like about using _____? (when)?	
			4. What are some of the pleasant thoughts you have while you are using?	
			5. What are some of the pleasant physical feelings you have while you are using?	
			6. What are some of the pleasant emotional feelings you have while you are using?	

Introducing the F. A.

- ▶ Provide a rationale
- ▶ Determine which episode to focus on:
 - ▶ Ask for a description of a common/ typical substance-using episode OR
 - ▶ Ask for a description of a recent or specific episode & make sure it is common/typical
- ▶ Show the individual you are serving the F.A. chart

Case Example

- ▶ A 16-year-old male is on probation and has just started to attend a new alternative high school. He got kicked out of his previous school for possession of marijuana. He has met several guys at the new school who he thinks are cool. These guys smoke a lot of marijuana, so he is conflicted because he might get into more trouble if he hangs out with them. They smoke mostly after school and on the weekends. He has to complete treatment for probation.

External Triggers

Who are you usually with when you smoke?

- *Mike, Jason, and Nick*

Where do you usually smoke?

- *Wherever we feel like it; usually at someone's house when their parents are gone.*

When do you usually smoke?

- *Right after school.*

Internal Triggers

What are you usually thinking about right before you smoke?

- *I feel like having some fun and hanging out with these friends.*

What are you usually feeling physically right before you smoke?

- *Pumped up, excited.*

Internal Triggers (cont'd)

What are you usually feeling emotionally right before you smoke?

- *Happy to be smoking. Maybe a little worried because I know I'm supposed to be staying clean and I don't want my PO (probation officer) to find out.*

Substance Using Behavior

What do you usually use?

- *Weed*

How much do you usually use?

- *It depends on how much weed we have. We pass a blunt around.*

Over how long a period of time do you usually use?

- *Anywhere from 15 minutes to 3 hours.*

Short-Term Positive Consequences

What do you like about smoking weed with (who)?

- *It's fun hanging out with these guys. We goof around. They're really cool and laid back.*

What do you like about smoking (where)?

- *I don't really care where we smoke, but I like to go somewhere where we won't get caught.*

Positive Consequences (cont'd)

What do you like about smoking weed (when)?

- *I just like to unwind and have fun. I keep telling my mom that school is stressful.*

What are the pleasant thoughts you have while smoking weed?

- *This feels good and relaxing.*
- *These guys think I'm cool.*

Positive Consequences (cont'd)

What are the pleasant physical feelings you have while smoking weed?

- *It helps me relax and not worry about school. I'm behind, so I won't graduate on time unless I make up some credits.*

What are the pleasant emotions you have while smoking weed?

- *I feel "high", happy, no worries.*

Long-Term Negative Consequences

What are the negative results of your substance use in each of the following areas:

Interpersonal (Friends, Family): *All the cool people I want to hang out with smoke weed. I haven't tried to find any other friends since I've been at this new school. My mom is upset that I'm on probation but still smoking.*

Negative Consequences (cont'd)

Physical: *I don't have the energy to do my homework sometimes.*

Emotional: *I don't like how I feel when the weed effects wears off*

Legal: *I got caught and now I'm stuck on probation. I know other people have gotten sent away for smoking weed.*

Negative Consequences (cont'd)

School: *I just can't get my homework done and now I'm so far behind I don't know if I can catch up. We leave school sometimes to get high.*

Financial: *Weed doesn't cost me much, but now I have to pay a fine to the court. I guess I'd have more money for music if it didn't smoke so much.*

Other: *n/a*

Summarizing the F.A. & Offering Treatment Implications

- ▶ Ask the individual what he/she makes of the completed F.A. (i.e., noticed or learned anything?)
- ▶ Summarize some additional aspect of the findings
- ▶ Give an example of how the information from the F.A. will be used in treatment

F.A. of Substance Use Checklist

- ▶ Gave rationale
- ▶ Started by asking for description of common episode/behavior
 - ▶ Common problems: selecting a suitable episode, mixing several episodes together
- ▶ Outlined triggers (external, internal)
- ▶ Clarified the using (or non-using) behavior
- ▶ Outlined positive and negative consequences of the behavior
- ▶ Summarized findings & gave examples of how the information would be used
 - ▶ Common problems: forgetting this item altogether, summarizing but not offering examples

Treatment Planning

- ▶ Two parts: Adolescent Happiness Scale and Goals of Counseling
- ▶ Ask the individual what she/he wants
- ▶ Use a positive approach
- ▶ Keep in mind the individual 's reinforcers

Introducing the Happiness Scale

- ▶ Provide rationale:
 - ▶ Allows the individual to see how satisfied he/she is with different areas of life
 - ▶ Identifies areas the individual wants to address in treatment
 - ▶ Monitors progress over time
- ▶ Give instructions (include: circle use or nonuse)
- ▶ Review some ratings

Adolescent Happiness Scale

- ▶ Substance use
- ▶ Relationship w/ girlfriend/boyfriend
- ▶ Relationship w/ friends
- ▶ Relationship w/ caregivers
- ▶ School (work)
- ▶ School activities
- ▶ Social life/recreation
- ▶ Personal habits
- ▶ Legal issues
- ▶ Money management
- ▶ Feelings
- ▶ Communication
- ▶ Job
- ▶ General happiness
- ▶ Other

Adolescent Happiness Scale

This scale is intended to estimate your current happiness with your life on each of the eleven areas listed. You are to circle one of the numbers (1-10) beside each area. Numbers toward the left end of the ten-unit scale indicate various degrees of unhappiness, while numbers toward the right end of the scale reflect increasing levels of happiness. Ask yourself this question as you rate each life area: "How happy am I with this area of my life?" In other words, state according to the numerical scale (1-10) exactly how you feel today. Try to exclude all feelings yesterday and concentrate only on the feelings of today in each of the life area. Also try not to allow one category to influence the results of the other categories.

1 = Completely Unhappy (can't get any worse)
 5 = Neutral (not unhappy, not happy either)
 10 = Completely Happy (can't get any better)

		Unhappy			Neutral				Happy		
Happiness with:											
1.	Alcohol use/nonuse	1	2	3	4	5	6	7	8	9	10
	Marijuana use/nonuse	1	2	3	4	5	6	7	8	9	10
	Other drug use/nonuse	1	2	3	4	5	6	7	8	9	10
2.	Relationship with:										
	Boyfriend or girlfriend	1	2	3	4	5	6	7	8	9	10
	friends	1	2	3	4	5	6	7	8	9	10
3.	Parents or caregiver	1	2	3	4	5	6	7	8	9	10
4.	School	1	2	3	4	5	6	7	8	9	10
5.	Social activities	1	2	3	4	5	6	7	8	9	10
6.	Recreational activities										
7.	Personal habits	1	2	3	4	5	6	7	8	9	10
8.	Legal issues	1	2	3	4	5	6	7	8	9	10
9.	Money Management	1	2	3	4	5	6	7	8	9	10
7.	Emotional Life	1	2	3	4	5	6	7	8	9	10
8.	Communication	1	2	3	4	5	6	7	8	9	10
9.	General Happiness	1	2	3	4	5	6	7	8	9	10
10.	Add specific	1	2	3	4	5	6	7	8	9	10

Name _____ ID _____ Date _____

Goals of Counseling: Setting Goals

- ▶ Goals of Counseling contains the categories on the Happiness Scale
- ▶ Guide the individual's selection of a category
- ▶ In general, set short-term goals that are scheduled to be completed in about a month
- ▶ Develop a step-by-step weekly strategy for reaching each goal
- ▶ Addressed obstacles to completing the goals
- ▶ The strategy = the "homework" for the week

Goals of Counseling

After Happiness Scales

Name: _____

Date: _____

Problem Areas/Goals: "In the area of _____ I would like to"	Intervention	Timeframe
1. Marijuana use/nonuse		
2. Alcohol use/nonuse		
3. Other drug use/nonuse		
4. Relationship with boyfriend or girlfriend		
5. Relationships with friends		
6. Relationships with parents or caregivers		
7. School		
8. Social activities		

Guidelines for Goal Setting

Goals and weekly strategies should be:

- ▶ Brief (uncomplicated)
- ▶ Positive (what *will* be done)
- ▶ Specific behaviors (measurable)
- ▶ Reasonable
- ▶ Under the individual's control
- ▶ Based on skills the individual already has

What's wrong with these goals & strategies?

- ▶ I don't want to drink anymore
- ▶ I'll get my friend to come into treatment
- ▶ I'll apply for 10 jobs tomorrow
- ▶ I'll get a higher-paying job this month
- ▶ I'll try harder to save money this month
- ▶ I'll go out on a date with three different women next week

What's wrong with this strategy?

- ▶ I am going to attend one AA (Alcoholics Anonymous) meeting next week, at St. Agnes Church at 8:00 pm on Tuesday night.

Happiness Scale Checklist

- ▶ Provided rationale
- ▶ Gave instructions
- ▶ Reviewed some ratings

Treatment Plan/Goals of Counseling Checklist

- ▶ Used Happiness Scale to select goal category
- ▶ Set goal/strategy using guidelines (e.g., specific)
 - ▶ Common problems: mostly obstacle-related (forgetting to ask about them, identifying them but not solving them, not probing enough)
- ▶ Checked on progress of goals

Problem Solving

- (1) Define problem narrowly:
 - Help make it very specific (manageable)
- (2) Brainstorm possible solutions:
 - Help the individual you are serving generate them
 - Don't critique them; just encourage lots of ideas
 - Don't skimp – come up with at least 5
- (3) Eliminate undesired suggestions:
 - Have individual cross out any unwanted ones (no explanation)
- (4) Select one potential solution:
 - Have the individual explain step-by-step how it will be done

Problem Solving (cont'd)

- (5) Generate possible obstacles:
 - Assist the individual ; probe for more
- (6) Address each obstacle:
 - If obstacles cannot be addressed - select another solution
- (7) Assign task:
 - Be sure the task and the time for it to be done is clear
- (8) [Next session: Evaluate outcome]:
 - Have the individual describe what was done and how well it worked
 - Determine whether the solution needs to be modified
 - Discuss obstacles again

Problem-Solving Skills Checklist

- ▶ Described/reviewed steps of the procedure
 - ▶ Common problems: not making the specific steps explicit – but instead just demonstrating them
- ▶ Conducted A-CRA problem solving procedure
 - ▶ Common problems: not defining the problem narrowly enough, not generating enough [5] solutions while brainstorming, not addressing obstacles adequately

Functional Analysis for Pro-social (Healthy) Behavior

- ▶ Looks at a pro-social (fun) behavior that's occurred at least once in the last 6 months
- ▶ Objective: Increases the likelihood that the individual will choose this non-using activity over substance use
- ▶ Clarifies negative consequences (barriers to engaging in it) & positive consequences of the healthy behavior for the individual

CRA FUNCTIONAL ANALYSIS FOR NON-DRINKING BEHAVIOR (_____)
(activity)

External Triggers	Internal Triggers	Non-drinking Behavior	Short-Term Negative Consequences	Long-Term Positive Consequences
1. <u>Who</u> are you usually with when you (activity)?	1. What are you usually <u>thinking</u> about right before you (activity)?	1. <u>What</u> is the non-drinking activity?	1. What do you dislike about (activity) with (who)?	1. What are the positive results of (activity) in each of these areas:
			2. What do you dislike about (activity) (where)?	a) Interpersonal:
			3. What do you dislike about (activity) (when)?	b) Physical:
			4. What are the unpleasant <u>thoughts</u> you have while (activity)?	c) Emotional:
2. <u>Where</u> do you usually (activity)?	2. What are you usually <u>feeling physically</u> right before you (activity)?	2. <u>How often</u> do you engage in it?	5. What are the unpleasant <u>physical feelings</u> you have while (activity)?	d) Legal:
			6. What are the unpleasant <u>emotions</u> you have while (activity)?	e) Job:
3. <u>When</u> do you usually (activity)?	3. What are you usually <u>feeling emotionally</u> right before you (activity)?	3. <u>How long</u> does it usually last?		f) Financial:
				g) Other:

Introducing the Pro-Social F.A.

- ▶ Provide a rationale
- ▶ Ask for a description of an enjoyable activity that the individual is:
 - ▶ engaging in currently – but only infrequently OR
 - ▶ *not* engaging in currently, but has done so at least once in the last 6 months
- ▶ Check to be sure that substance use isn't usually a part of the activity

Case Example

- ▶ Same male individual you met earlier (new to the school; smoked marijuana every day after school with his friends, on probation).
- ▶ Occasionally he spends time with a cousin and his cousin's friends. None of them use drugs. His cousin likes to go to a park downtown and shoot hoops. They challenge other young folks to games there.

Functional Analysis for Pro-Social (Healthy) Behavior

What is your non-using activity?

- *Shooting hoops with my cousin and his friends.*

How often do you engage in this activity?

- *About once a month.*

How long does this activity usually last?

- *About 2 hours.*

External Triggers

Who are you usually with when you (activity)?

- *My cousin Justin and his friends.*

Where do you usually (activity)?

- *The park downtown that the city fixed up last year.*

When do you usually (activity)?

- *Either a Friday after school or Saturday afternoon. It's usually the time most people go there. I like to have an audience when I play – especially if they are female...*

Internal Triggers

What are you usually thinking about right before you (activity)?

- *I hope this is fun. Maybe I'll see some new people from school.*

- *I guess my cousin is OK to hang with. I hope he doesn't ask too many questions about being on probation. It's none of his business.*

- *Maybe I'll go over afterwards and talk to one of the girls there this time.*

Internal Triggers (cont'd)

What are you usually feeling right before you (activity)?

- *Huh? OK, I guess. I don't know. Maybe I'm a little up tight because I'm not that great a player - not that I'd admit that to anybody!*

Short-Term Negative Consequences

What do you dislike about (activity) with (who)?

- *If I mess up and get embarrassed, I wish I was with my other friends so we could just leave and get high.*

What do you dislike about (activity, where)?

- *Justin likes to stay too long, but he's my ride.*
- *If you mess up your shots a lot – everybody sees it.*

Negative Consequences (cont'd)

What do you dislike about (activity, when)?

- *It's not as easy to get downtown after school as it is to get to a friend's house.*

What are the unpleasant thoughts you have while (activity)?

- *If I make a really great shot and I look over and nobody is watching, I think they're jerks.*

Negative Consequences (cont'd)

What are the unpleasant physical feelings you have while (activity)?

- *I get really sweaty if it's hot.*

- *I get hungry and thirsty, too.*

Negative Consequences (cont'd)

What are the unpleasant emotions you have while (activity)?

- *Sometimes I think my cousin and his friends are judging me – and that pisses me off.*
- *Frustrated if I'm not playing well.*
- *Pissed if nobody passes me the ball.*

Long-Term Positive Consequences

What are the positive results of (activity) in each of these areas:

Interpersonal (Friends, Family): *I get to meet new people (and I do mean girls).*

My mom seems happy when I head out with my basketball; she doesn't ask me 20 questions.

Positive Consequences (cont'd)

Physical: *It's healthier than smoking weed all afternoon. I feel better in the morning. It feels good to spend a lot of time outside getting exercise.*

Emotional: *I don't worry that I'm going to be caught doing something that will get me into trouble.*

Positive Consequences (cont'd)

Legal: *No chance of a legal problem if I'm playing basketball.*

School: *Some people I meet at the park say hi to me in school.*

Financial: *I don't spend much money shooting hoops – just on energy drinks.*

Summarizing the Pro-Social F.A. & Offering Treatment Implications

- ▶ Give a brief summary of the findings (based on either the triggers or consequences)
- ▶ Give an example of how the information may be used
- ▶ Make sure the homework assignment (i.e., to engage in the pleasant activity just outlined) is explicit
- ▶ Be sure to address obstacles

F.A. for Pro-Social Checklist

- ▶ Give rationale
- ▶ Started by asking for description of common fun/healthy behavior
 - ▶ Common problem: finding a fun behavior that is recent
- ▶ Outlined triggers (external, internal)
- ▶ Clarified the behavior
- ▶ Outlined positive and negative consequences of the behavior
- ▶ Summarized findings & gave examples of how the information would be used
 - ▶ Common problem: forgetting to make the assignment explicit, forgetting to ask about/address obstacles

Skills Training

- ▶ Communications Skills
- ▶ Problem Solving
- ▶ Drink/Drug Refusal
- ▶ Job-Finding Skills
- ▶ Anger Management

Problem-Solving Skills Checklist

- ▶ Described/reviewed steps of the procedure
 - ▶ Common problems: not making the specific steps explicit – but instead just demonstrating them
- ▶ Conducted A-CRA problem solving procedure
 - ▶ Common problems: not defining the problem narrowly enough, not generating enough [5] solutions while brainstorming, not addressing obstacles adequately

Assigning Homework

- ▶ Refer to as “practice exercises”? An experiment?
- ▶ Offer rationale
- ▶ Get individual’s input
- ▶ Describe agreed-upon assignment that is:
 - ▶ positive, specific, measurable, straightforward (not complex), under individual’s control
- ▶ Ask about & address potential obstacles
- ▶ Identify time for completing assignment

Reviewing Homework

- ▶ Start session by reviewing homework
- ▶ Get the details! What did the individual do/not do?
- ▶ Regardless: ask about obstacles faced
- ▶ Address problems (modify if indicated)
- ▶ Reinforce any compliance

Caregiver Session I: Overview, Rapport Building, and Motivation

- ▶ Talk about the benefits of A-CRA
- ▶ Provide information to the caregiver about what he/she can do to keep the individual from relapsing (from research)
- ▶ Assess whether the problem appears serious enough to warrant another referral
- ▶ Get the parent or caregiver to commit to some homework (without calling it homework)

Critical Parenting Practices

- ▶ Good modeling
- ▶ Increase positive communication
- ▶ Monitor the adolescent's whereabouts
- ▶ Involvement in adolescent's life outside the home.

Based on the work of R. Catalano, H. Hops, & B. Bry

Caregiver-Adolescent Relationship Skills (Sessions 3-4):

TO DO List

- ▶ Give session overview
- ▶ Check on homework (briefly!)
- ▶ Ask about new important issues
- ▶ Do the 3 positive things exercise:
 - ▶ Give rationale
 - ▶ Have them speak directly to each other
 - ▶ Have them repeat the positive comments back to each other
- ▶ Give Relationship Happiness Scales
 - ▶ Select & plan out goals for each to work on

TO DO List (cont'd)

- ▶ Review communication skills
- ▶ Review problem-solving procedures
- ▶ Practice (role-play) communication and problem-solving skills
- ▶ Assign homework
- ▶ Give Daily Reminder To Be Nice form:
 - ▶ Give rationale & instructions
 - ▶ Ask them to complete it daily regardless

Relationship Happiness Scale (Caregiver Version)

1. Household responsibilities
2. Communication
3. Affection
4. Job or school
5. Emotional support
6. Time spent with adolescent
7. Home atmosphere
8. General happiness

Relationship Happiness Scale (Adolescent Version)

1. Time spent with me
2. Allowance
3. Communication
4. Affection
5. Support of school/work
6. Emotional support
7. General home activities
8. General happiness

Daily Reminder To Be Nice Did you:

- ▶ Express appreciation to the other person today?
- ▶ Compliment the other person on something?
- ▶ Give the other person a pleasant surprise?
- ▶ Express affection?
- ▶ Initiate a pleasant conversation?
- ▶ Offer to help?

Caregiver Sessions

Things to remember

- ▶ Keep session structured
- ▶ Role of therapist/case manager: coach, shape, model, reinforce, praise, and keep everyone on task
- ▶ Focus on one issue at a time
- ▶ Focus is on skill-building
- ▶ Keep positive tone to session

Caregiver-Adolescent Session Tips

- ▶ Ask participants to speak to each other throughout the session
- ▶ Ask participants to repeat things
- ▶ Recognize and praise when they use the skills naturally
- ▶ If individuals are resistant, decrease procedure jargon

Adolescent-Caregiver Relationship Skills Checklist

- ▶ Check on homework
- ▶ 3 positive things
- ▶ Relationship Happiness Scale
- ▶ Daily Reminder To Be Nice
- ▶ Communication Skills
- ▶ Problem Solving Skills

Treatment Closure

- ▶ Check-in with the individual and provide an overview of the session
- ▶ Review the individual 's progress
- ▶ Discuss any unmet goals on the *Goals of Counseling* form and plans for achieving them
- ▶ Talk with the individual about what he/she has gained from treatment

Treatment Closure (cont'd)

- ▶ Reinforce the individual 's efforts and hard work
- ▶ Discuss options for further contact and/or treatment
- ▶ Other: Compare most recent Happiness Scale with earlier ones

Certification Process

Sample Procedure Rating



Caregiver Overview, Rapport Building, and Motivation:

- 48. _____ Provided an overview of A-CRA
- 49. _____ Set positive expectations
- 50. _____ Reviewed research regarding parenting practices
- 51. _____ Identified caregiver reinforcers for continued work
- 52. _____ Kept discussion (about adolescent) positive

Certification Status		Pending	Date	7/21/2006	7/30/2006	8/7/2006	8/15/2006	8/21/2006	8/28/2006	9/6/2006	9/17/2006										
Therapist Name		Sample Clinician	Client ID	OW	OW	OW	OW	OW	OW	OW	OW										
Therapist ID		9999	Session #	2	3	4	5	6	7	8	10										
Status	Procedures	Item	Short Label	Tape 1	Tape 2	Tape 3	Tape 4	Tape 5	Tape 6	Tape 7	Tape 8	Tape 9	Tape 10	Tape 11	Tape 12	Tape 13	Tape 14	Tape 15			
				Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating	Rating		
	Overview of CRA	1	Describe basic objective	3																	
		2	Outlined several procedures																		
		3	Set positive expectations																		
		4	Described duration of treatment	3																	
		5	Started to identify reinforcers																		
Completed	Functional Analysis of Substance Using Behavior	6	Gave Rationale		3																
		7	Started by asking for description of common episode behavior		3																
		8	Outlined Triggers (external, internal)		3																
		9	Clarified the using (or non-using) behavior		3																
		10	Outlined positive & negative consequences of the behavior		3																
Completed	Functional Analysis for Pro-Social (Non-Using) Behavior	11	Gave examples of how the information would be used		3																
		12	Gave Rationale		3																
		13	Started by asking for description of common episode behavior		3																
		14	Outlined Triggers (external, internal)		3																
		15	Clarified the using (or non-using) behavior		3																
Completed	Happiness Scale	16	Outlined positive & negative consequences of the behavior		3																
		17	Gave examples of how the information would be used		3																
		18	Provided rationale		3				3												
		19	Gave instructions		3				3												

Narrative Comments Are Also Provided

Happiness Scale

Good: You gave a nice rationale for the happiness scale! You explained that he would rate his happiness in different areas of his life and that his ratings would be used to make short-term goals. It was great that you mentioned that he would do several scales and they would be used to assess progress.

Good: You gave good directions for the scale. You explained that he should rate his current happiness for today on a scale from 1-10 (1-low, 10-high)...It's also good to mention that he should rate the categories independently from one another. It was good that you reviewed some of the ratings! For legal issues and emotional life, you asked him why he rated it the way he did. For emotional life, you asked him what could improve his ratings.

A-CRA Clinician Certification Requirements

- ▶ Local training through certified A-CRA Supervisor
- ▶ Recording all A-CRA therapy sessions to be reviewed by supervisor
- ▶ Demonstrate competency on 9 core A-CRA procedures through DSR (digital session recording) reviews

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