

WALWORTH COUNTY
DEPARTMENT OF HEALTH AND HUMAN SERVICES
BEHAVIORAL HEALTH UNIT

MET/CBT:
A BRIEF INTERVENTION PROGRAM FOR LOW RISK OWI
OFFENDERS

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WALWORTH COUNTY

- Rural County of 103,000
- Walworth County DHHS operates as a certified DHS 34,35, and 75 programs
- WCDHHS serves as:
 - The county's Intoxicated Driver Program provider
 - Treatment provider for the county's OWI and Drug treatment courts

WALWORTH COUNTY OWI ARREST STATS

	1 st	2 nd	3 rd	4 th	5 and up	Total
2013	462	157	64	31	26	740
2014	414	125	69	29	20	657
2015	405	147	50	27	20	649
2016	308	106	41	11	12	478
2017(Jan through Current)	32	5	2	1	0	40

PROGRAMMING FOR LOW RISK 1ST AND 2ND OWI OFFENDERS

- In 2013 the MET/CBT program began as a pilot with a goal:
 - To provide an effective brief evidence based treatment approach, and
 - To reduce recidivism
- Over 213 consumers successfully completing with only 2 reoffending
- Significant shift from “traditional treatment” to evidence based treatment
 - Change being motivated by discomfort
 - If you can make people feel bad enough they can change
 - People have to “hit rock bottom” to be ready to change

PROGRAM DEVELOPMENT

- ◉ With consent from program developer of the MET/CBT5 for adolescents for marijuana use; Walworth County adapted program to be used for adult substance use treatment
- ◉ Research suggests that a brief intervention approach is more cost-effective for those with a substance use disorder than an extended group counseling approach
- ◉ Evidence-Based Treatments indicated for substance use disorders are:
 - Brief Intervention
 - Motivational Interviewing
 - Cognitive Behavioral Therapy

SCREENING AND ELIGIBILITY

- ◉ 1st and 2nd OWI consumers that are recommended for outpatient treatment after completion of their OWI assessment
- ◉ Collaborating with UW Whitewater; Dr. Meg Waracynski and student intern Alissa Zawacki for data gathering and analysis (Alissa will discuss statistics later in today's presentation)
- ◉ Alcohol Use Disorders Identification Test (AUDIT)

AUDIT

PATIENT: Because alcohol use can affect your health and can interfere with certain medications and treatments, it is important that we ask some questions about your use of alcohol. Your answers will remain confidential, so please be honest.

For each question in the chart below, place an X in one box that best describes your answer.

NOTE: In the U.S., a single drink serving contains about 14 grams of ethanol or "pure" alcohol. Although the drinks below are different sizes, each one contains the same amount of pure alcohol and counts as a single drink:



Questions	0	1	2	3	4	
1. How often do you have a drink containing alcohol?	Never	Monthly or less	2 to 4 times a month	2 to 3 times a week	4 or more times a week	
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more	
3. How often do you have 5 or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	No		Yes, but not in the last year		Yes, during the last year	
					Total	

Notes: This questionnaire (the AUDIT) is reprinted with permission from the World Health Organization. To reflect drink serving sizes in the United States (14g of pure alcohol), the number of drinks in question 3 was changed from 6 to 5. A free AUDIT manual with guidelines for use in primary care settings is available online at www.who.org.

WHO IS APPROPRIATE?

- ◉ Have been arrested and/or convicted of a first or second OWI
- ◉ Are low risk however, meets criteria appropriate for brief outpatient treatment
- ◉ Have a Substance Use Disorder - Mild or Moderate and may have minimal mental health concerns
- ◉ Are ambivalent about their substance use
- ◉ Consumers are continuously assessed during the program to determine any additional clinical needs

TREATMENT APPROACH

MET/CBT is a brief model consisting of two individual sessions and three group sessions. The program utilizes motivational enhancement and cognitive behavioral therapies to help the consumer: explore their personal lifestyle and habits, work on strengthening motivation and confidence in their ability to change and develop skills to implement changes.



INDIVIDUAL SESSION #1

- ◉ Welcome consumer and build rapport
- ◉ Elicit and reinforce consumer's readiness to change with MI
- ◉ Using the MI Importance Ruler
 - Evoke and reinforce consumer's readiness to change
 - What would it take to go from an _____ to a _____?
 - Tell my why you're at this number.
- ◉ Explore the Good and Not-so-Good things about their substance use
 - Weighing the good and not-so-good helps people make decisions. For example; while drinking may sometimes help people relax, it could also cause problems with family or work.
- ◉ Overview of High Risk Situations and Coping Skills
- ◉ Change Plan rationale and instructions
 - Goals are like anchors; keeping us on track and also letting us look back at our progress
 - Assign Change Plan homework
- ◉ Summarize and conclude session



***Each week have a High Risk Situation and a Coping Skill that you have encountered ready to share with the group.**

HIGH RISK SITUATIONS

Any experience, setting, thought, emotion, person, or situation that presents an increased risk to engage in negative behaviors.

****Some examples:** Thinking of past trauma, bars/parties/social gatherings, social pressure, negative emotions such as anger, depression, or anxiety, conflicts with others, stress, financial difficulties or abundances, life changes, exes, cravings and urges, celebrations, positive emotional states, boredom, physical and emotional pain, sleeping difficulty, holidays, or testing personal control.

COPING SKILLS

Skills that we used to solve problems or to minimize or tolerate stress or conflict. They can be action (behavioral) skills or thought (cognitive) skills.

****Some examples:** Talking to a therapist or support person, keeping busy with a hobby or chore, exercise, journaling, taking a break, planning ahead, listening to music, taking medications, avoidance, having an alternate beverage, breathing exercises, scripting, using positive self-talk, thought substitution, visualization--negative or positive consequences of behavior.

TWO IS ENOUGH CHANGE PLAN WORKSHEET

Planning for Change: Establishing a Change Plan and Setting Personal Goals

The Goal of this program is to help you learn and practice ways not to drink or use and drive. Setting goals for making or keeping changes is like developing a road map. The map helps you stay focused on what you want in your life and how to get there. Like anchors, they keep you from drifting and on course with living in line with your personal beliefs and values.

This exercise will give you practice in setting goals and making or keeping changes.

- Complete the “Change Plan Worksheet” by following the instructions for each section.
- Include two specific goals one goal should be related to your drinking/using.

The Changes I want to make (or continue making) are:
The 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:
What will I do if the Plan isn't working?

Consumer Signature

Print Name

Date

INDIVIDUAL SESSION #2

- ◉ Welcome consumer and continue to build rapport
- ◉ Review consumer's past week
 - Did he or she experience any high-risk or tempting situations
- ◉ Discuss ambivalence
- ◉ Review change plan
- ◉ Thought Tracking Exercise
 - Assign homework
- ◉ Prepare for Group Sessions
 - Explore consumer's feelings about starting group and answer any questions
- ◉ Review and conclude session





THOUGHT TRACKING: What Happens Before and After I Use?

Thought tracking is slowing yourself down to think about and recognize your thoughts, your feelings, and your behaviors that may have happened in a specific situation. Think of a specific situation that happened to you recently and use the boxes below to describe each aspect of the situation.

HIGH RISK SITUATIONS (People, places, events, situation, objects, feelings, thoughts, or memories.)	THOUGHTS (What was I thinking? What did I tell myself?)	FEELINGS/EMOTIONS (What was I feeling?)	BEHAVIORS/OUTCOMES (What happened?)
<i>EXAMPLE (Complete with Counselor)</i>			
<i>Running into an old using friend at Walmart and being offered drugs.</i>	<i>I can do it once and get away with it. I deserve it. If I use it will help with my pain. I won't have to think about my problems for now.</i>	<i>Anxious Relieved Excited</i>	<i>Went out to vehicle with old using friend and smoked week.</i>
HOMEWORK (Complete Two real-life High Risk Situations)			

Complete before first group session to be shared in group.



GROUP SESSION #1 - COMMUNICATION

- Introductions
 - Facilitators
 - Consumers share name, offense and change plan goals
- OWI & Related Alcohol & Drug Penalties, Statistics
- Review
 - High Risk Situations and Coping Skills handout from individual session
 - Assign high risk/coping skills homework to be shared with group at next session
- Learning New Coping Strategies handout
- Thought Tracking homework reviewed
- Communication Styles Activity
 - Review styles and reasons why being able to communicate clearly and effectively is an important skill
 - Assertive communication will be discussed throughout group sessions
 - Communication Activity & Quiz
 - Homework
- Review homework due at next group session and conclude group



Assertiveness Lifework

Remember the following points in practicing assertiveness:

- ✓ Take a moment to think before you speak.
- ✓ Be specific and direct in what you say.
- ✓ Pay attention to your body language, use direct eye contact, face the person you're addressing.
- ✓ Be willing to compromise.
- ✓ Restate your assertion if you feel that you're not being heard.

Practice Exercise

The following exercises will help you become aware of your style of handling various social situations. The four common response styles are: **passive, aggressive, passive-aggressive, and assertive.**

Pick **two** social situations where different styles were used and write brief descriptions of them and of your responses to them. Then decide which of the four common response styles best describes each response.

Situation 1 (describe):

Your response:

Circle response style: passive, aggressive, passive-aggressive, and assertive.

If your response was not assertive, think of an assertive response and write it down here:

Situation 2 (describe):

Your response:

Circle response style: passive, aggressive, passive-aggressive, and assertive.

If your response was not assertive, think of an assertive response and write it down here:

GROUP SESSION #2 - PLEASANT ACTIVITIES - SOCIAL SUPPORT

- Welcome consumers
 - Share High Risk Situations and Coping Skills used this past week
 - Did consumers use strategies from Learning New Coping Strategies?
- Review Communications Styles homework
- Introduce increasing pleasant activities
 - Explain rationale, risk factors, how our brain chemicals are affected, the reward pathway, dopamine, tolerance
 - Over time, it can be hard to have fun or enjoy oneself without using
 - Finding sober activities that are rewarding, challenging, and stimulating
 - Consumer will commit to engage in 2 activities before next group session
- Increasing social support activity
 - Explain rationale for building consumers' social support networks
 - Have consumer complete the Plan for Seeking Support Handout
 - Assign Social Support Homework - to seek out one support during the next week

Increasing Pleasant Activities

Following is a list of activities that people find pleasurable to engage in. Please check:

- Activities that seem appealing to you either because you know you like them or you imagine you would like them if you tried
- Activities that you were once interested in and may want to start again
- Activities that you're not sure about but might be willing to consider if you had some support or encouragement

There are no grades on this exercise. Check as many as you wish. If there are things that are not listed that you want to include, please add them.

- | | | |
|---|---|--|
| <input type="checkbox"/> Reading a book | <input type="checkbox"/> Going to the movies | <input type="checkbox"/> Going out to a meal |
| <input type="checkbox"/> Exercising | <input type="checkbox"/> Listening to music | <input type="checkbox"/> Writing or journaling |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Singing | <input type="checkbox"/> Computer/Internet |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Drawing | <input type="checkbox"/> Writing or calling a friend |
| <input type="checkbox"/> Making jewelry | <input type="checkbox"/> Baking/cooking | <input type="checkbox"/> Shopping |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Swimming | <input type="checkbox"/> Boating |
| <input type="checkbox"/> Ice Skating | <input type="checkbox"/> Knitting/crocheting/sewing | <input type="checkbox"/> Taking a bath |
| <input type="checkbox"/> Gardening/lawn | <input type="checkbox"/> Fixing things | <input type="checkbox"/> Refinishing furniture |
| <input type="checkbox"/> Going to live theater | <input type="checkbox"/> Library | <input type="checkbox"/> Visiting park/garden |
| <input type="checkbox"/> Skydiving | <input type="checkbox"/> Running | <input type="checkbox"/> Organizing |
| <input type="checkbox"/> Party/social event | <input type="checkbox"/> Hiking | <input type="checkbox"/> Fishing or hunting |
| <input type="checkbox"/> Skiing or snowboarding | <input type="checkbox"/> Playing competitive sports | <input type="checkbox"/> Antiquing |
| <input type="checkbox"/> Time with friends/family | <input type="checkbox"/> Learning a new language | <input type="checkbox"/> Crafts |

Other activities: _____

HOMEWORK: Document two activities that you will commit to engaging in before group next week. The activity can be for pleasure, or one that you get a sense of achievement from. We will check in with you next week to be sure that you have followed through.

Plan for Seeking Support

To be completed in group and be prepared to share at least one example.

Support person & their quality	Benefits from this support	What makes this difficult	How can we improve our social supports

HOMEWORK: Utilize a support person before next group session.

GROUP SESSION #3 - PROBLEM SOLVING

- ◉ Welcome consumers
 - Share High Risk Situations and Coping Skills used this past week
 - Did consumers use strategies from Learning New Coping Strategies?
- ◉ Review Pleasant Activities and Social Support homework
- ◉ Introduce and discuss the importance of solving problems
 - Explain rationale - problem situations may result in high risk situations, knowing how to effectively solve problems is beneficial
 - Problem Solving Practice activity
 - Complete worksheet and share with group
- ◉ Present Personal Emergency for Coping with High-Risk Situations
 - Consumers complete worksheet and share with group
- ◉ Discharge paperwork
 - Discharge Summary
 - AUDIT
 - Informational Handouts

Problem Solving Practice Exercise

Select a problem that does not have an obvious solution. Describe it accurately. Brainstorm a list of possible solutions. Evaluate the possibilities, and select the best solution.

What is the problem or worry?			
How do you know? What are the symptoms? (Physical, Emotional, or Behavioral)			
Brainstorm possible solutions	Advantages of this solution	Disadvantages of this solution	Place a ✓ below on the line of the best solution
What steps do you need to take to put this solution into action?			
1.			
2.			
3.			

Personal Emergency Plan for Coping with High Risk Situations

My Change Plan Goal is: (Example-To cut down on my use of alcohol)

Having a plan to deal with high risk situations can ensure successfulness with goals, help solve problems, or minimize stress and conflict.

List high risk situations that may interfere with meeting my goal: (Examples-It's payday, Feeling depressed, It's football season, My co-workers like to get together after work on Fridays, or my weekends without the kids)	What will I do to effectively cope with these high risk situations: (Examples-Carry only a limited amount of money with me when I go out, talk to my therapist or a support person, keep plenty of alternate beverages stocked, use positive self-talk to help control urges, avoid the gas station that keeps the display of my favorite beer by the register)
1.	
2.	
3.	
4.	
5.	

I can contact the following people for additional support if necessary:

NUMBER OF RE-OFFENSES AND TIME TO RE-OFFENSE

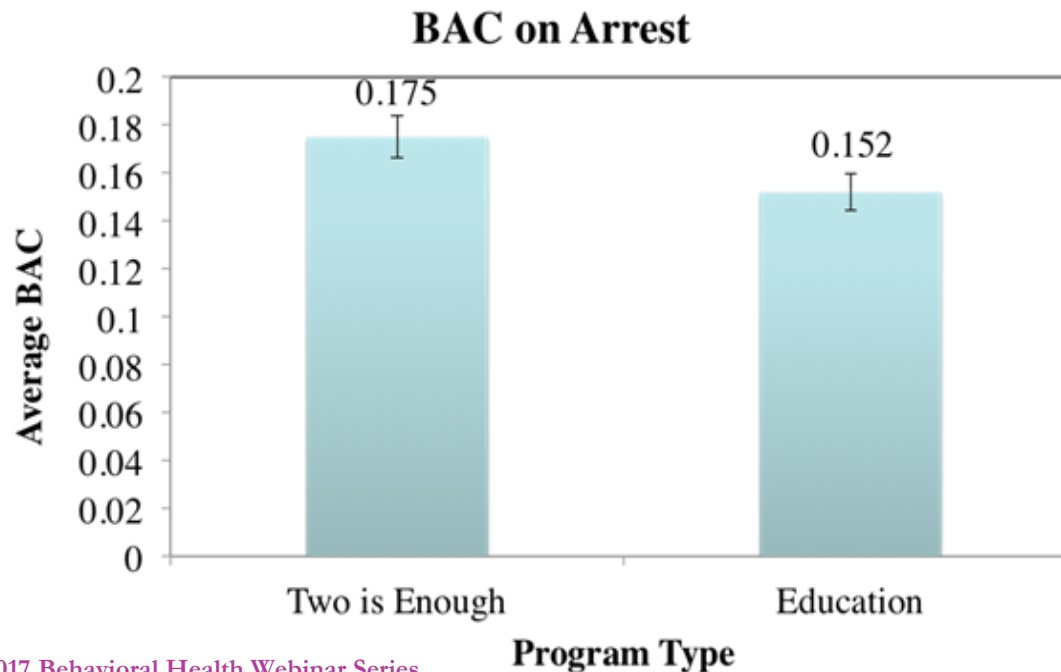
- Re-offense records were observed for participants who completed either program from 2013-present (N=254)
 - Of the 127 participants in Two is Enough, 2 individuals re-offended (1.6%)
 - Of the 127 participants in Education, 7 individuals re-offended (5.6%)
- The average amount of days between completion of program and re-offense:

Two is Enough = 673.5 days

Education = 483.3 days

BLOOD ALCOHOL CONTENT COMPARISON

- There was a significant difference in BAC on arrest, $t_{(208)} = 3.50$, $p = .0006$. Those in Two is Enough ($M=0.175$, $SD=.053$) had a significantly higher BAC than those in Education ($M=0.152$, $SD=.044$).
- The literature shows high BAC as a high risk factor of future re-offense (Impine, et. al, 2009). However, those going into Two is Enough have a higher BAC, yet the preliminary data suggest a lower proportion of re-offense for this group.



HOW DO WE KEEP OUR SKILLS UP?

- Motivational Interviewing Peer Group (longest running in Wisconsin)
 - Required tapings and scoring
 - Working on skills
 - Training with Scott Caldwell, DHS Madison who is a certified MINT (Motivational Interviewing Network of Trainers)
 - Most recent training 4/20/2017

