

*Kentucky School of Alcohol and Drug Studies*

*Presents*

*15 Strategies for Engaging and Improving  
Recovery Rates for Chemically Dependent  
Clients*

*Presenter*

*Mark Sanders, LCSW, CADDC*



## *22 Engagement Strategies*

- *Make it easy to speak to a live person by phone*
- *A warm phone voice tone matters*
- *Learn from doctor's offices – increase first session attendance by 30%*

## *22 Engagement Strategies Continued*

*Remember the 4 factors that lead to client Engagement.*

*Mega-study "The Heroic Client"*

- *The Clinical Model*
- *Counselor hopefulness*
- *The therapeutic relationship*
- *Client factors*

# *Client Extra-Therapeutic Factors*

- *Success prior to the presenting problem*
- *Individual and family resilience*
- *Cultural strengths and pride*
- *Love*

# *Client Extra-Therapeutic Factors Continued*

- *Employability*
- *A good education*
- *Vocational skills*
- *Hope for the future*
- *Leadership*

# *Client Extra-Therapeutic Factors Continued*

- *Faith*
- *Spirituality*
- *"A praying grandmother"*
- *Extended family orientation*

# *Engagement Strategies*

*Utilize naturally therapeutic qualities*

- *Empathy*
- *Warmth*
- *Genuineness*

# *Engagement Strategies Continued*

## *Engagement in the first 5 minutes*

- *Voice tone*
- *Receptionist greeting*
- *Pictures*
- *Magazines*
- *Waiting Room*
- *Length of wait*
- *A tour*

# *Joining with Adolescents*

- *Shoes*
- *Jerseys and t-shirts*
- *Hats*
- *Hand and arm tattoos*
- *Name*
- *Music*
- *Work*
- *School*
- *Aspirations for the future*

*Minimize Confrontation*

# *Discover the Client's Uniqueness*

- *If you had 3 wishes, what would they be?*
- *When are you happiest?*
- *What do you do on Saturday afternoons?*
- *Who are your heroes?*
- *What is your favorite food?*
- *What kinds of things are funny to you? Do you like to tell jokes or hear jokes?*
- *If you agreed to work with me, what do you think is important for me to know about you in order to be most helpful?*

*Have a Sense of Humor*

# *Use of Incentives*



*Mc Treatment*



*Candy*



*Dunkin' Donuts*



*Fishbowl Technique*



*Flat Screen Tv*

*Be aware of counter-transference reactions.*

*After counseling approaches.*

*Engaging mandated clients.*

*Connect with clients  
cross-culturally*

# *When Working with Clients with Co-occurring Disorders Honor a Variety of Approaches to Recovery*

*Solo recovery*

*Total abstinence*

*Virtual recovery*

*Temporary drug substitution*

*Religious styles*

*Medication assisted*

*12 Step recovery*

*Shifting allegiance*

*"Make a contact: If this  
does not work. . ."*

# *Bonus Strategies*

- *Offer a snack*
- *Avoid desks*
- *Explain counseling*

## *Bonus Strategies Continued*

- *Ask permission to give feedback*
- *Engage in mutual treatment planning*
- *Guard against burnout and compassion fatigue*
- *Sound bites are more effective than long paragraphs when communicating with resistant clients*

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# *Strategies to Increase Recovery Rates*

# *Sharpen Assessment and Treatment Skills*

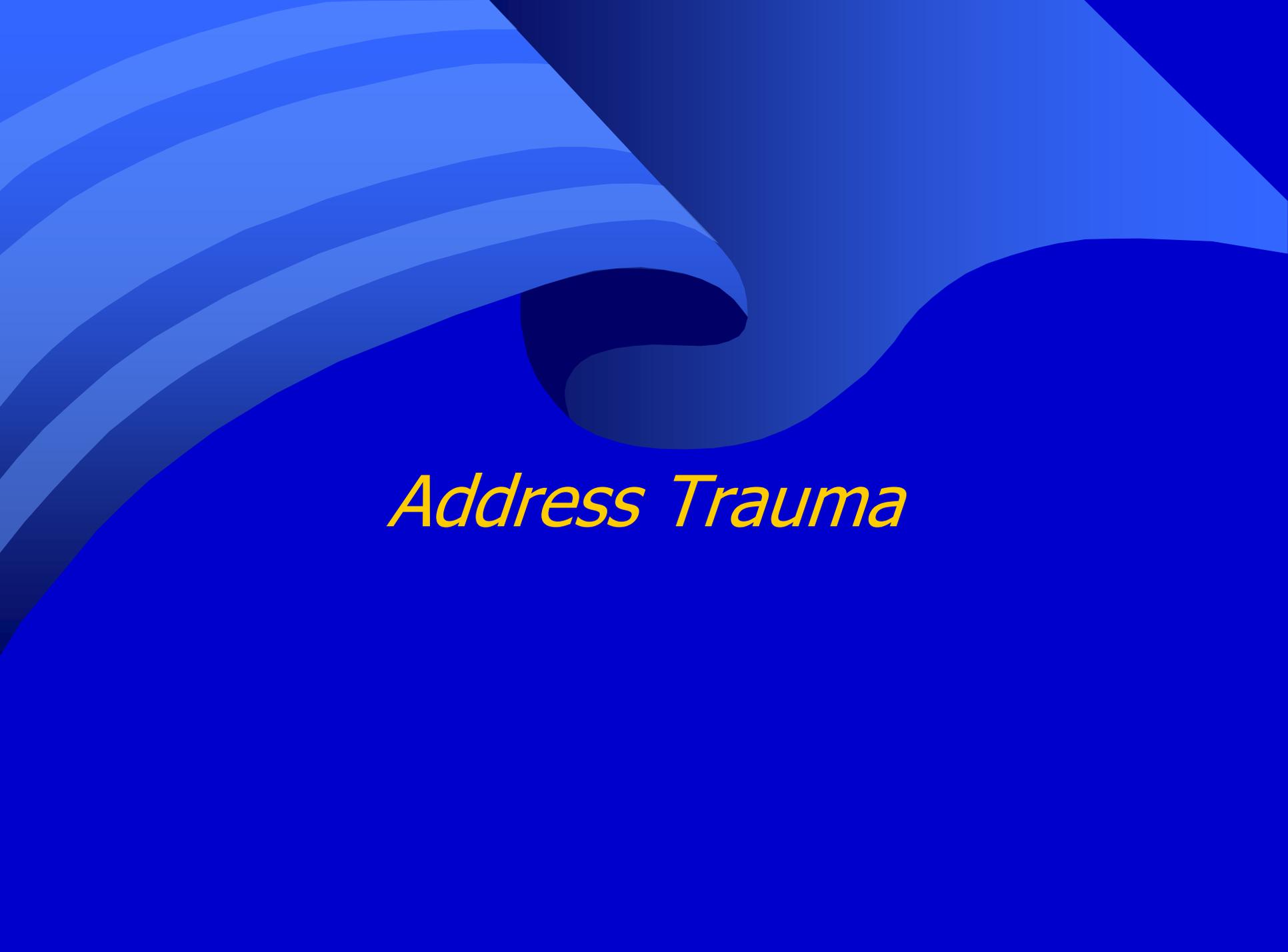
- *Process Addictions*

# *Use Evidence Based Practices*

- *CBT*
- *12 Step facilitation*
- *Family Therapy*
- *Integrated Dual Disorders Treatment*
- *Behavioral Couples Therapy*

# *Try Not To Pack Too Much Into the Treatment Plan*

- *Pre-contemplation*
- *Contemplation*
- *Readiness*
- *Action*
- *Maintenance*



*Address Trauma*

*In the Realm of the Hungry Ghost*  
by  
*Gabor Mate, M.D.*

- *Drugs don't cause addiction any more than a deck of cards causes compulsive gambling*
- *There needs to be a pre-existing vulnerability*
- *For some people, the seeds of addiction is planted years before they use*



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# *Diagnostic Categories*

# *PTSD*

- *The person has been exposed to a traumatic event*
- *Recurrent and intensive distressing recollections of the event*
- *Efforts to avoid conversations, activities, places and people that bring up memories of the event*
- *Difficulty falling or staying asleep, nightmares, flashbacks*

# *PTSD vs. Complex Trauma*

*with complex trauma exposure to a specific traumatic event is not required*

# *Complex Trauma Includes Multiple Layers and Years of Traumatic Experiences*

- *Neglect*
- *Abandonment*
- *Multiple placements*
- *Parental substance abuse*
- *Adult emotional unavailability*
- *Multiple losses*
- *Exposure to domestic violence*
- *Abuse*

# *Most Common Symptoms of Complex Trauma*

- *Difficulty regulating emotions* 65%
- *Difficulty with impulse control* 63%
- *Negative self-image (eating disorder)* 62%
- *Difficulty concentrating (ADHD)* 60%
- *Aggression (Conduct Disorder)* 56%
- *PTSD* 12%
- *Substance Abuse* 10%

*What About the Environment?*

*What is the impact of living under  
constant threat of trauma?*

# *Historical Trauma*

*A cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma*

*- Brave Heart, 2000*

# *Historical Trauma Features*

- *Loss of culture*
- *Survivor guilt*
- *Depression*
- *Traumatic stress symptoms*
- *Numbing*
- *Low self esteem*

# *Historical Trauma Features Continued*

- *Historical unresolved grief*
- *Substance use*
- *Suicidal ideations*
- *Traumatizing others at the micro and macro levels*

# *Sources of Adolescent Trauma*

- *Corporal punishment*
- *Witnessing domestic and community violence*
- *Sexual abuse*
- *Victim of violence*
- *Abandonment/ Divorce*
- *Bullying*

# *Trauma Informed System of Care*

*A trauma informed system of care recognizes and therapeutically responds to the impact of traumatic stress on those who have contact with the system from the initial phone call, through termination and follow-up. In a trauma informed system of care every member of the service team has an awareness of their role in reducing the impact of trauma on those seeking services.*

# *The First 5 Minutes of Contact*

- *A warm greeting*
- *Pictures on the wall*
- *Magazines in the waiting room*
- *A short wait*
- *An inviting waiting room*
- *Positive service energy*

# *Ethics and Trauma Iatrogenic Effect*

*How service providers can inadvertently traumatize clients*

- *Heavy confrontation*
- *Unwelcome touch*
- *Not guarding against burnout and compassion fatigue*

# *Sign of Compassion Fatigue*

- *Loss of energy*
- *Loss of hope*
- *Loss of idealism*
- *Spiritual distress*
- *Shift in your world view*
- *Depersonalization*

# *Depersonalization*

The background features a series of horizontal, wavy bands in various shades of blue, ranging from light to dark. A large, dark blue, curved shape overlaps the lower part of these bands, creating a sense of depth and movement.

# *Compassion Fatigue Protective Factors*

- *Laughter*
- *Feelings of appreciation*
- *Team cohesion*
- *Outlets to discuss traumatic experiences*

# *How Service Providers Can Inadvertently Traumatize Clients Continued*

- *Paternalism*
- *Unhealthy boundaries*
- *Discharge for confirming the diagnosis*
- *Keeping clients in therapy too long*
- *Treating aftercare as an afterthought*
- *Dual relationships*
- *Sexual exploitation*
- *Professional desertion*

The background is a solid blue color with several curved, overlapping bands of varying shades of blue, creating a sense of movement and depth. A dark blue triangle is positioned in the upper right corner, pointing downwards.

*Impact of trauma across  
the life span*

*Center for Disease Control and Prevention*

*The Adverse Childhood Study (ACE)*

*Research with Nearly 18,000 Adults*

*Discovered A Strong Correlation Between  
Early Childhood Trauma and  
Physical and Mental Illness in Adulthood*

# ACE Study

Directions – For each “yes” answer, give yourself one point. For each “no” answer, give yourself zero points.

***When you were growing up in your household, before age 18, did you have any of the following experiences?***

- 1. Often had a parent or someone else in the household who swore at you, yelled at you, and sometimes, or often, acted in a way that made you believe you might be physically hurt. \_\_\_\_\_*
- 2. Sometimes, often, or very often, were you pushed, grabbed, slapped, or had something thrown at you, or hit so hard that you had marks or were injured? \_\_\_\_\_*

# *ACE Study Continued*

- 3. An adult or person at least five years older ever touched you or fondled you in a sexual way, had you touch their body in a sexual way, attempted oral, anal, or vaginal intercourse with you or actually had oral, anal, or vaginal intercourse with you. \_\_\_\_\_*
- 4. Were you ever mad to feel unloved, unprotected, and not special in your home? \_\_\_\_\_*
- 5. Were there times when you did not have food, clean clothes, and a place to live? If you were sick, were there times when an adult did not take care of you consistently? \_\_\_\_\_*

# *ACE Study Continued*

- 6. Did you ever witness your mother or stepmother get pushed, grabbed, slapped, hit, or have something thrown at her? \_\_\_\_\_*
- 7. Was there anyone in your household who was a problem drinker, alcoholic, or who used street drugs? \_\_\_\_\_*
- 8. Did you live with a household member who was depressed, mentally ill, or attempted suicide? \_\_\_\_\_*
- 9. Were your parents ever separated or divorced? \_\_\_\_\_*
- 10. Did you ever have a household member who went to prison? \_\_\_\_\_*

# *Reality*

*"Where there is trauma in the family there is usually a conspiracy of silence. Everyone has to honor the 'no talk' rule. These Dark Secrets if internalized can lead to physical and mental health problems."*

*Judith Herrmann*

# *Good Family Secrets*

- *Santa Claus*
- *The tooth fairy*
- *Surprise birthday party*
- *How you feel about people as people*

# *Follow-up Research on the ACE Study*

*Year*

*2010*

- *link between lung cancer and childhood trauma*

*2009*

- *link between childhood trauma and premature death*
- *prescription drug abuse*

# *Follow-up Studies Continued*

*2008*

- *pulmonary disease and childhood trauma*

*2007*

- *mental illness in adulthood*
- *cigarette smoking*

*2006*

- *early alcohol and drug use*

*2005*

- *homelessness in adulthood*

# *Follow-up Studies Continued*

*2004*

- *depression in adulthood*
- *liver disease*
- *heart disease*
- *teen pregnancy*

*2003*

- *illicit drug use*
- *mental illness*

# *Follow-up Studies Continued*

*2002*

- *alcoholism and depression in adulthood*

*2001*

- *suicide attempts and risky sexual behavior*

*2000*

- *HIV and other sexually transmitted diseases*

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*Approaches to trauma  
treatment and recovery*

# *Three Phases of Trauma Recovery*

## *Judith Hermann*

- *Safety (home, community, counseling)*
- *Remembering and mourning*
- *Reconnection*
  - *Revisiting old hopes and dreams*
  - *Establishing new hopes and dreams*
  - *Finding a survival mission*
  - *Striving to reach your potential*

# *Cognitive Behavioral Approach*

- *Listen to the metaphors and help clients change the metaphors*
- *Validate the client's feelings*
- *Commend the client for his/her symptoms*
- *Help the client re-frame the symptom as survival skills*
- *Help the client explore the usefulness of the survival skills today*
- *Symptom reduction*

# *Other Approaches to Trauma Treatment and Recovery*

- *ARC model-experiential/community based approach*
- *Sanctuary Model*
- *EMDR*
- *Exposure Therapy*
- *Mindfulness Meditation*
- *Yoga Psychotherapy*

# *Other Approaches to Trauma Treatment and Recovery Continued*

- *CBT*
- *DBT*
- *Seeking Safety*

# *Relapse Prevention for Trauma and Addiction*

- *Utilize the 5 senses*
  - *Touch*
  - *Sound*
  - *Sight*
  - *Taste*
  - *Smell*

# Exercise

*Harris' history is full of abuse and trauma. He was born three months premature, his labor was induced by his father kicking his mother in the abdomen. This was an indication of the abuse Harris was about to suffer throughout his childhood and adolescence. At age two he had his jaw broken by his father and was regularly beaten by both parents. He learned not to reach for food during meals without his father's permission; otherwise his father would stab him in the hand with a fork...*

*Harris lived in a constant state of fear; his father would load his gun and tell the children they had thirty minutes to hide outside of the house and that if he found them he would shoot them.*

*Harris' father was later imprisoned for sexually assaulting his daughter. Harris' mother died from smoking and excessive drinking. Harris later shot and killed two teenagers, he is facing the death penalty.*

*-What argument could Harris' attorney use to save Harris' life? What information would the attorney need to share with the court?*

# *Help Clients Successfully Complete Treatment*

- *Place at a level they are motivated for*
- *Keep clients motivated while they wait*
- *Provide gender specific services*
- *Provide services that meet the needs of youth*

# *Help Clients Successfully Complete Treatment Continued*

- *Evaluate the hour the services are provided*
- *Provide an environment where a diversity of clients feel welcome*

# *Increase Self Help Attendance*

- *Escorts*
- *Arrive early*
- *Set up chairs*
- *Volunteer to read*
- *Stay late*
- *Sponsorship*
- *Sober activities*

# *Teach Social Skills*

- *How to dress for success*
- *Public speaking*

*Use successful alumni*

*Develop organizational  
health*

*Increase staff  
competence*

*Celebrate small victories  
and encourage clients to do  
the same*

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