Stage-Matched Interventions in Substance Use
Webinar Reminders

1. Everyone is muted.
   - Press *7 to **unmute** and *6 to **re-mute** yourself.

2. Remember to chat in questions!

3. Webinar is being recorded and will be sent out via email and posted to the program page.

4. Please give us your feedback by completing a 2-question poll
Objectives

1. Identify strategies to engage people in addiction care
2. Learn approaches to working with patients who have not expressed interest in MAT in order to enhance motivation and facilitate care coordination
3. Discuss strategies for increasing motivation for behavioral intervention in patients who are initially motivated for addiction medicine only
Assessing Severity of Use

• Clarifying confidentiality

• Using normalizing language
  
  • “Many people find it difficult to deal with traumatic events like that without drinking or using. For you, has that been part of the picture?”

• Ask with the assumption of use
  
  • “How much alcohol do you drink a day?”
  
  • “When’s the last time you took a pain pill, nerve pill that were not your own?”
ASAM Criteria

A holistic look at addiction, particularly with regard to treatment planning:

- Acute Intoxication and/or Withdrawal Potential
- Biomedical Conditions and Complications
- Emotional, Behavioral, or Cognitive Conditions and Complications
- **Readiness to Change**
- Relapse, Continued Use, or Continued Problem Potential
- Recovery/Living Environment
ASAM Levels of Care

Note:
Within the five broad levels of care (0.5, 1, 2, 3, 4), decimal numbers are used to further express gradations of intensity of services. The decimals listed here represent benchmarks along a continuum, meaning patients can move up or down in terms of intensity without necessarily being placed in a new benchmark level of care.
Assessing Motivation

“On a scale of 1-10 (10 being the most), how important is it to you to decrease your [substance] use?”
Stages of Change

- Anticontemplation
- Precontemplation
- Contemplation
- Preparation
- Action
- Maintenance

Prochaska and DiClemente (1983)
Severity and motivation are separate constructs that vary independent of one another.
Enhancing Engagement

- Provider’s empathy is significant predictor of treatment outcome
  - Mismatch can occur between intent and our language/non-verbals
- Engagement is the initial target of treatment
  - Use a collaborative style, patient’s language
- Align treatment with patient’s values
- Emphasize personal choice through language
- Elicit-Provide-Elicit
Ambivalence is Expected

- **Change talk** is patient language that strengthens personal motivation and commitment to specific goal
- **Sustain talk** is patient language that protects the status quo; sign of not matching patient’s stage of change
Evoking Change Talk

On a scale of 1-10, how important is it for you to change your drinking?

- Elicit motivation/strengths – “What makes you say 6 rather than, say, a 3?”
- Identify barriers to change – “What would bring that number to an 8?”
Engagement and Healthcare Burden

• Convenient pairing of visits to increase engagement
• Approach care in phases
  • Discuss model of care and expectations early
  • Fluidly adjust treatment plan in response to changes in the severity of symptoms and motivation
• “Resistance” to behavioral health at the 1st visit is not indicative of long-term “resistance” to behavioral health
## Stage Matched Interventions: Anticontemplation

<table>
<thead>
<tr>
<th>Readiness to Change Stages</th>
<th>Brief Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anticontemplation</td>
<td>• Stop, don’t push.</td>
</tr>
<tr>
<td></td>
<td>• Convey readiness to help in the future.</td>
</tr>
<tr>
<td>“I resent your assertion that I have a problem.”</td>
<td>“I respect that you don’t want to talk about ___ today. I’d like to partner with you to improve all aspects of your health. Maybe we could talk about ___ at another time.”</td>
</tr>
</tbody>
</table>
# Stage Matched Interventions: Precontemplation

<table>
<thead>
<tr>
<th>Readiness to Change Stages</th>
<th>Brief Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Precontemplation</td>
<td>• Don’t push.</td>
</tr>
<tr>
<td>“I don’t have a problem.”</td>
<td>• Ask permission and build awareness by providing personalized information.</td>
</tr>
<tr>
<td></td>
<td>“Would it be okay if I told you why I am concerned about your ___?”</td>
</tr>
<tr>
<td></td>
<td>“I worry that your ___ is...”</td>
</tr>
</tbody>
</table>
### Stage Matched Interventions: Contemplation

<table>
<thead>
<tr>
<th>Readiness to Change Stages</th>
<th>Brief Interventions</th>
</tr>
</thead>
</table>
| Contemplation              | • Don’t push too hard.  
                           | • Encourage the patient to talk about his/her perception of the problem and discuss the potential benefits of changing. “Would you tell me why you think your ___ is a problem?” “If you decided you wanted to, can you think of potential benefits of changing?” |

“I know I have a problem, but I have no interest in changing at this time.”
## Stage Matched Interventions: Preparation

<table>
<thead>
<tr>
<th>Readiness to Change Stages</th>
<th>Brief Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparation</td>
<td>• Reinforce desire to change.</td>
</tr>
<tr>
<td>“I’d like to change soon, but need some help determining how to begin.”</td>
<td>“Excellent, we’d like to partner with you to make changes in your __.”</td>
</tr>
<tr>
<td></td>
<td>• Problem-solve barriers and identify small action steps.</td>
</tr>
<tr>
<td></td>
<td>“Are there things that are getting in the way of you starting to make changes?”</td>
</tr>
<tr>
<td></td>
<td>“Patients often find that __, __, or __ are helpful first steps. Would you like to try one of these options?”</td>
</tr>
</tbody>
</table>
## Stage Matched Interventions: Action

<table>
<thead>
<tr>
<th>Readiness to Change Stages</th>
<th>Brief Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action</td>
<td>• Reinforce any progress thus far.</td>
</tr>
<tr>
<td></td>
<td>• Problem-solve barriers and refine action plan.</td>
</tr>
<tr>
<td></td>
<td>“Are there things that are getting in the way of you making more progress?”</td>
</tr>
<tr>
<td></td>
<td>“What have you already tried (or considered trying)?”</td>
</tr>
<tr>
<td></td>
<td>“What has been most helpful so far?”</td>
</tr>
</tbody>
</table>

“I’m starting to make changes, but need help to continue to make progress.”
# Stage Matched Interventions: Maintenance

<table>
<thead>
<tr>
<th>Readiness to Change Stages</th>
<th>Brief Interventions</th>
</tr>
</thead>
</table>
| **Maintenance**           | • Reinforce maintenance of progress.  
                            | • Identify successful strategies and problem-solve ways to continue to employ these.  
                            |   “Can you identify strategies that have helped you manage your __ successfully?”  
                            |   “Can you identify any barriers to continuing these strategies to manage your __?” |
Case #1
Questions?
Your feedback is needed!

• Please complete our 2-question poll.

• If you have any additional comments or suggestions, please fill out our post-session evaluation: [https://www.tfaforms.com/4775736](https://www.tfaforms.com/4775736)

• We value your feedback and will use it to help design future ATSH webinars. Thank you!
Upcoming CCI Webinars

• *Using Technology to Implement MAT in Primary Care* January 31, 12 – 1pm. Katherine Fitzgerald, DO from Heywood Hospital in Massachusetts will lead this webinar. Dr. Fitzgerald will explain how technology can improve patient engagement, increase adherence to treatment plans and reduce program dropouts. [Register here.](#)

• *ATSH:PC Data Webinar:* February 28, 12 – 1pm. Dr. Mark McGovern, ATSH Program Evaluator, will provide an overview analysis of data from the capability assessments and quarterly program measures. Two participating teams from the ATSH:PC cohort will share their experiences behind their data. [Register here.](#)