

Pandemic Considerations for Court Ordered AOD Clients: A Motivational Interviewing Approach Handout

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- Information on court ordered AOD clients and probation
 - According to SAMHSA “Members of a drug culture often share similar ways of dressing, socialization patterns, language, and style of communication. Some even develop a social hierarchy that gives different status to different members of the culture based of their roles within the culture”.
 - There is regular probation where they will do treatment and still have a felony and a special rehabilitation program within probation, such as ILC and STAR program, where they do treatment to not get a felony.
 - Counselor responsibilities: Helping the client understand how their information is going to be used within counselor communication with the probation, doing treatment letters/special program reports, monthly reports, and when the counselor is obligated to call probation.
 - Client responsibilities: court/probation fees, various treatment depending of severity of illness, and improving way of life, such as getting their GED and a job.
- Motivational Interviewing (MI):
 - Laypersons definition: “a collaborative conversation style for strengthening a person’s own motivation and commitment to change” (Miller, p. 12)
 - MI has been shown to work well with clients experiencing substance use disorders.
 - MI is appropriate for telehealth
 - “Resistance” is often used to describe these clients but is not an MI consistent word due to it implying the client is “being difficult”.
 - The spirit of MI consists of 4 parts: Partnership, Acceptance, Compassion, and Evocation.
 - The 4 processes of MI are:
 - Engaging- Therapeutic engagement is most important to MI and is where you use you OARS+2 skills (Open-ended questions, Affirmations, listening Reflectively, and Summarizing + Advise and Permission and Promoting Autonomy).
 - Focusing- this clarifies what direction to move in a collaborative way, which continues to promote client autonomy.
 - Evoking- you are eliciting the client own motivation to change by focusing on their own ideas and feelings about why and how they want to change. (Remember the scaling question)
 - Planning- this is a conversation about what actions the client says they will take. This does not occur just one time!



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- Pandemic considerations:
 - Telehealth issues with us counselors and clients and client home environment
 - Helping clients understand the need to confidentiality being met on their end as well.
 - The pandemic increased the chances of relapses for all AOD clients, but especially those in early recovery due to lack of structure, everyone going back to bad habits, and over all losses.
 - Probation lost contact with clients causing some to relapse due to not drug testing on a regular basis.
 - Clients still using were at a higher risk for COVID-19