

# Awakening Skills Class: Behavioral Treatment for Substance Abuse in People with Serious Mental Illness

Presented by:

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# Presentation Agenda

- Who is Center for Urban Community Services?
- Overview of substance use among people with serious mental illness (SMI)
- ***Awakening Skills Class*** - Behavioral Treatment for Substance Abuse in People with Serious Mental Illness
- CUCS pilot results and ongoing implementation

# Center for Urban Community Services

CUCS offers a range of programs & services to more than 25,000 individuals and families in NYC.

- Permanent Housing
- Street Outreach
- Housing Consultation
- Transitional Housing
- ACT Team
- Case Management Consultation
- Single Stop
- PPOH

CUCS shares knowledge with several thousand direct care staff annually through Training & Consulting Services.

- Training & Technical Assistance
- Consultation



# CUCS and Evidence Based Practices

Evidence based practices are proven to be effective and designed to be replicable.

- Motivational Interviewing
- Critical Time Intervention
- Supported Employment
- Wellness Self Management

*Illness Management and Recovery*

- Awakening Skills Class

*Behavioral Treatment for Substance Abuse in Severe Mental Illness*

Overview of substance  
use among people with  
serious mental illness  
(SMI)

# Reasons for Substance Use among the SMI Population

- To fit in
- To socialize
- To improve their mood
- Use has become routine
- Use has become a physical addiction
- To manage their psychotic symptoms

# Characteristics of SMI that Make Change *Hard*

- Avolition (lack of drive)
- Anergia (lack of energy)
- Shortened/distorted time horizon
- Cognitive impairments: attention, memory, abstract reasoning, integration of situation/context/experience, sustained attention
- **Problems in memory and attention make it difficult to sustain goal-directed behavior over time**
  - Difficulty connecting past consequences with present behaviors

# Characteristics of SMI that Make Change **Costly**

- Anhedonia (inability to experience pleasure)
- Social impairment
- Limited social networks/alternatives



# Treatment Challenges & Successful Interventions

## Traditional Treatment Challenges

- Heavy reliance on planning and executive function
- Reduction/abstinence is difficult despite client's motivation to change in the presence of cognitive impairments
- Confrontational treatment approaches often interfere with building productive, collaborative helping relationships
- Traditional substance recovery self-help/peer support settings may not feel safe/welcoming/relevant for people also struggling with SMI

## Successful Interventions

- Focus on small, short-term goals requiring minimal planning
- Repeated skills training and practice to facilitate mastering new skills
- Approach that allows participants to experience success and positive reinforcement without confrontation
- Dual diagnosis setting where participants fit in and the challenges they face are understood and addressed by peers and providers

# Awakening Skills Class Evidence-based benefits

## *Decreased*

- Hospitalizations
- Arrests
- Relapses

## *Increased*

- Session attendance
- Periods of sobriety
- Physical safety
- Medication adherence
- Personal money not spent on drugs

**Overall Impact:** Improved quality of life (QOL)

# Awakening Skill Class

# What is Awakening Skills Class (BTSAS)?

The Awakening Skills Class is a **contingency-based** behavioral intervention designed for individuals with **co-occurring disorders of severe mental illness and substance abuse**. Research on **Skills Training** for individuals with mental illness suggests treatment modalities that are less taxing to cognitive abilities was more effective than more traditional models.

Participants are compensated for refraining from using a particular drug and are given the opportunity to practice Drug Refusal Skills.

The BTSAS treatment intervention was developed by Alan Bellack, Melanie Bennett and Jean S. Gearon, researchers at the Baltimore Maryland Veteran's Administration Medical Center in Baltimore MD and uses a curriculum of:

- Social Skills Training
- Drug Refusal Skills Training
- Coping Skills Training
- Relapse Prevention Skills Training

# Awakening Skills Class

## Awakening Skills Class Philosophy

Harm Reduction philosophy (focus on incremental change)

Non-judgmental and accepting

Peer support and positive reinforcement

Self paced learning

Small group format with a structured curriculum

Drug refusal and social skills training

- Tailoring drug refusal scenarios to closely approximate their experiences outside of the classes client centered

Effective use of contingency management

# Awakening Skills Class

## Series Structure

### Approximately

26 weeks / 52 classes per cycle

2 instructors (recommended)

6 to 8 participants

45 minutes to an hour per class

### Class preparation time

- Day before: review class assignments/skills sheet
- Day of: handouts, participant out reach, instructor debrief
- Total time: 1.5 hrs/class; 3 hrs/week

Keep a regular class schedule **with regular day and time**

Classes should be held in a private or semi-private room

Target drug testing begins at the third session

# Awakening Skills Class

## Class Structure

- 1) Welcome
- 2) Drug testing
- 3) Review of materials and skills from the previous session
- 4) Test results
- 5) Contingency payment
- 6) Short-term goal setting
- 7) Skill building instruction
- 8) Practice role-play
- 9) Goal review

# Awakening Skills Class

## Five Core Components

### Motivational Interviewing

- Occurs outside of the group, used to support ASC classes

### Goal Setting & Elaboration

- Developing and supporting the practice of setting and reaching a goal

### Skill Building Instruction

- Over-learning skills until they are executed automatically

### Role Play

- Providing a forum for participants to practice learned skills in a safe environment

### Contingency Management

- Incentive for successful achievement of recovery goals



# Awakening Skills Class

## Motivational Interviewing

### Client centered versus disorder-centered approach

- Motivation is seen as a goal-specific state, not a fixed global trait

### Targets Behavior Change

- Raise discrepancy between what a person wants and what s/he is doing
- Draw out and understand client ambivalence, struggles, goals, and values

# Awakening Skills Class

## Goal Setting & Elaboration

### Issue to be Addressed

- What is the immediate goal?

### Personal Motive

- Participant articulates their motivation for change

### Identify Challenges

- Participant identifies anticipated obstacles to success

### Brainstorm Solutions

- Participant plans specific response to anticipated obstacles

# Awakening Skills Class

## Social Skills Building Instruction

### Modeling

- People learn by observing the behavior of others

### Reinforcement

- Desirable outcomes are encouraged through positive reinforcement

### Overlearning

- Repeated practice of a skill so it becomes automatic

### Shaping

- Successive steps towards a desired goal with gradual increase in self-efficacy

### Limited Generalization

- The process of transferring skills from a specific setting or situation to a closely related setting not explicitly addressed by the training
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# Awakening Skills Class

## Role Play

### Coaching

- Using verbal prompts during role plays to provide guidance about the specific component of a skill

### Prompting

- A form of coaching used when all the person needs is a quick reminder of the skill

### Positive Feedback

- Reinforcing the accomplishment of the practiced skill regardless of the level of success

### Repeated “Real Plays”

- Continuing an effort to practice a new skill in a variety of scenarios

### Homework

- Asking participants to test the practiced skill outside of the class setting

# Awakening Skills Class

## Contingency Payments

- Targeted drug testing begins on or around class 3
- Participants select a target drug at the end of the previous class
- Participants are tested for their target drug at the beginning of each class
- Regardless of test outcome, participants are praised for participating with testing. They receive support in planning their drug refusal role-play.

# Awakening Skills Class

## How the payments work

First negative test	—————>	Zero payment
Second negative test	—————>	\$1.50
Third negative test	—————>	\$1.50
Fourth negative test	—————>	\$2.00
Fifth negative test	—————>	\$2.00
Sixth negative test	—————>	\$2.50
Seventh negative test	—————>	\$2.50

**Participant payments cap at \$3.50**

# Awakening Skills Class

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# CUCS Pilot Results

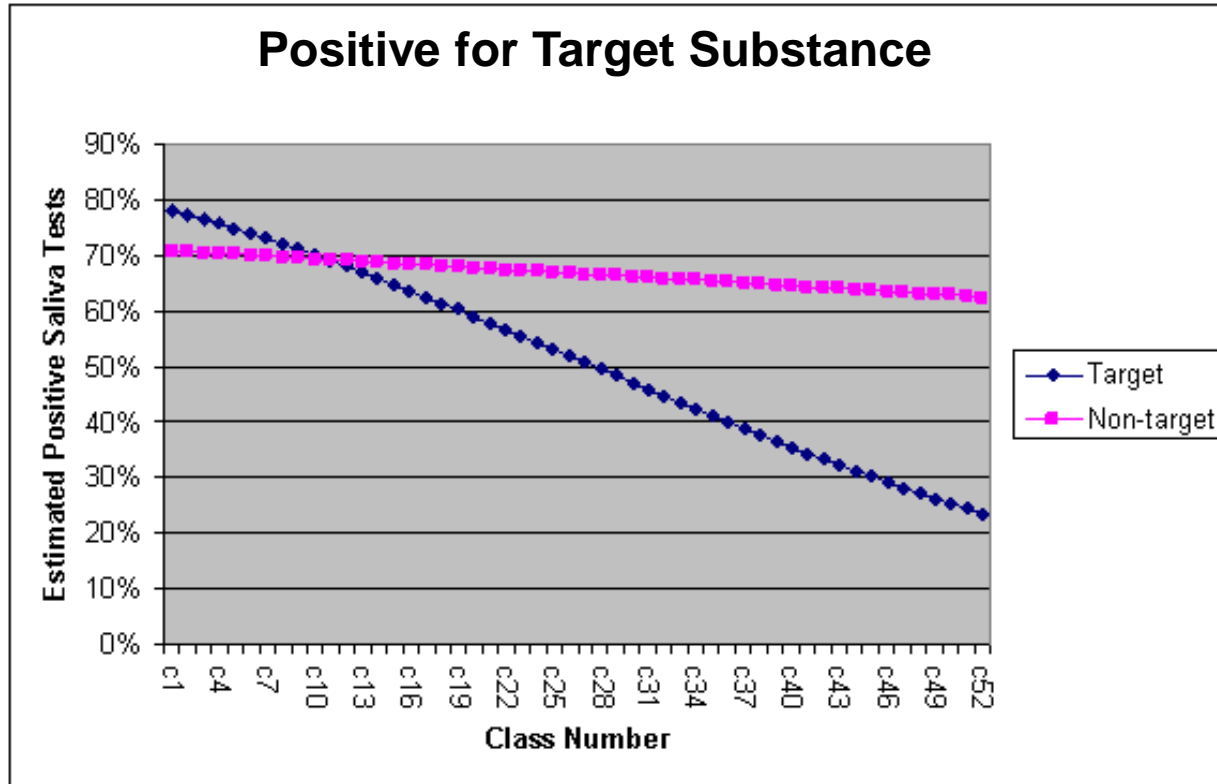


# CUCS Pilot Results

- Approximately 10 total participants with 2 class instructors
- Significant reduction in amount and frequency of use
- Some participants became completely abstinent
- The average participant maintained at least some gains for six months after the group ended

# CUCS Pilot Results

## Change in Use Over Time



# CUCS Pilot Results

## Clients' Anecdotal Reports

### “Ivars”

- I felt comfortable. It is hard for me to be in groups sometimes but I felt very comfortable there.
- I no longer use marijuana. I've got a couple months of sobriety under my belt.
- I loved the scenarios. It brought the honesty out of me.
- I talk about the class all the time.

### “Frannie”

- The classes made me understand the importance of staying away from particular drugs
- Good came out of me not touching my drug of choice
- I slowed down a hell of a lot and I don't pick up as much
- There were times that even though I knew the skills it was still hard to stay clean

# CUCS Pilot Results

## Clients' Anecdotal Reports

### “Sam”

- The role play was most helpful.
- I liked that there was no favoritism.
- The class was too short. I wish I had gotten more time (started class late in the cycle)
- You see yourself in real-life situations.
- I would recommend the class, but I don't have friends. I would say just give it a chance. It's just an hour out of 40 hrs/week. That's not asking a whole lot of a person.

### “Frank”

- I developed skills that I use...my drug refusal skills
- I got in touch with my desire to not use
- The classes ignited my desire to not use anymore

# CUCS Pilot Results

## Class Instructors Anecdotal Reports

### Carol

- “It is satisfying to having clients talk about difficult topics, like their drug use, in a non-threatening environment where they can be honest”
- “Participants begin to see their sense of self shift. Their ego strength improves and they begin to believe in their own successes”
- “Experiencing success lets participants believe they can do it”

# Implementation Across CUCS Programs

## Implementation Sites

- Kelly Transitional Living Community
- Schermerhorn Supportive Housing
- Crotona Park East Extended Stay Residence
- Christopher Supportive Housing
- Times Square Supportive Housing
- Prince George Supportive Housing

# Questions?

# Bibliography

- ❖ Alan S. Bellack, Melanie E. Bennett, Jean S. Gearon, Clayton H. Brown, Ye Yang (2006). A Randomized Clinical Trial of a New Behavioral Treatment for Drug Abuse in People with Severe and Persistent Mental Illness. *Arch Gen Psychiatry*, Vol 63, 426-432
- ❖ Alan S. Bellack, Melanie E. Bennett, Jean S. Gearon (2007). *Behavioral Treatment for Substance Abuse in People with Serious and Persistent Mental Illness: A Handbook for Mental Health Professionals*. Routledge



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