Reaching Out to People "Where They Are"

vs.

"Where We Think They Should Be"

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A Chinese Folk Tale

Cultivating Change Possibilities in Outreach

- Stages of Change

- Motivational Interviewing

- Harm Reduction

Realities of Homelessness/Living in Extreme Poverty

Structural Barriers

- Lack of a **livable wage/income**
- Lack of appropriate affordable **housing**
- Lack of access to **health/mental health care**
- Inadequate **social supports**

Personal Vulnerabilities

- Physical health problems
- Mental disorders
- Substance use disorders
- History of abuse/domestic violence
- Low self-efficacy
- Hopelessness

CHANGE …

It Don't Come Easy

"Given a choice between changing and proving that it is not necessary, most people get busy with the proof."

John Galbraith

Stage Model of Change
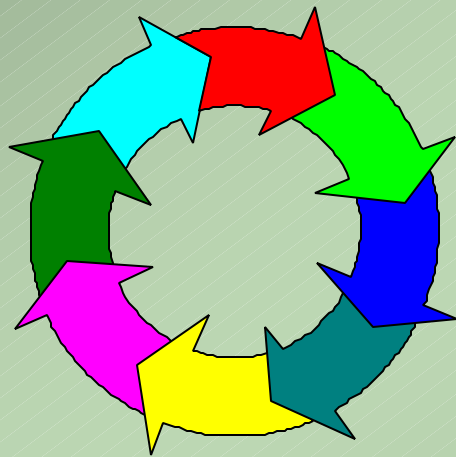
Precontemplation

Contemplation

Preparation

Action

Maintenance

Termination

(Relapse)

(From Prochaska, Norcross and DiClemente's *Changing for Good, 1995)*

Precontemplation

Unaware or barely aware of a problem ("Who, me?")

No intent to change behavior in the foreseeable future

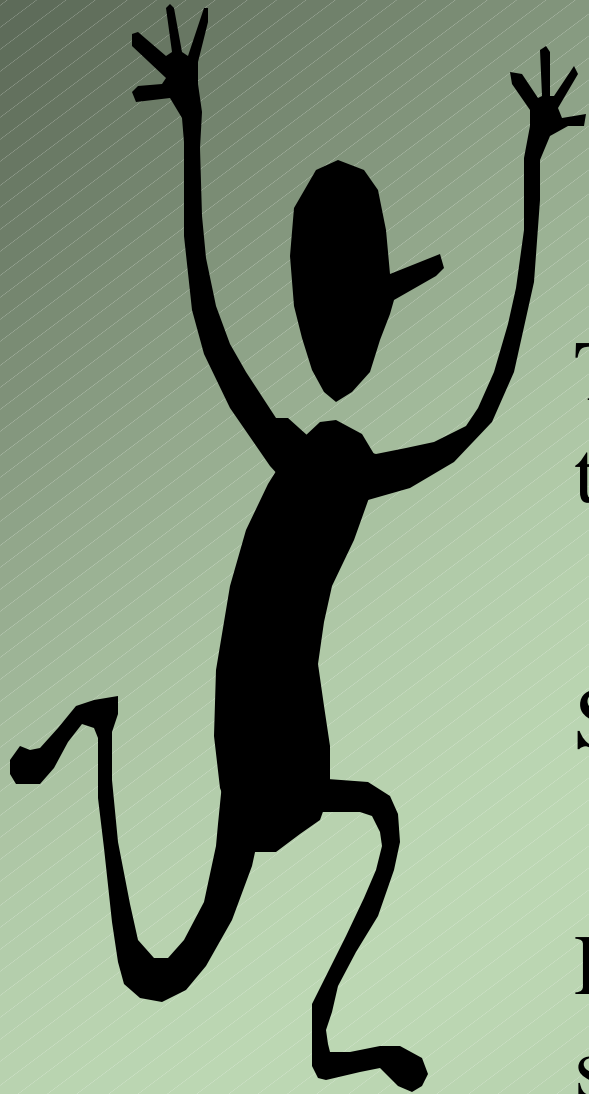Might *wish* to change but not seriously considering it

Contemplation

Acknowledges problem

Considering change, but not yet ready ("Yes, but …")

Dealing with ambivalence, weighing pros and cons

Preparation

Turns ambivalence into intention to take action

Sets achievable goals

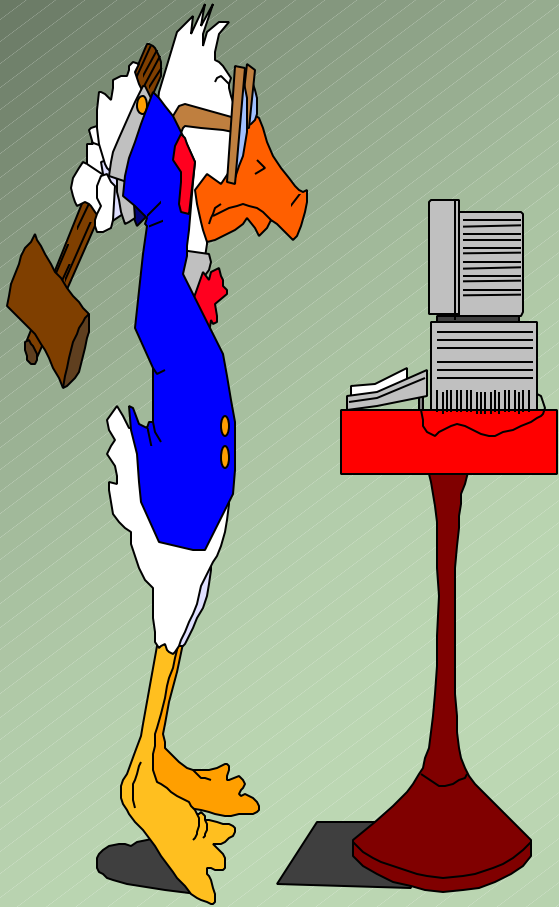Develops effective plans and strategies

Action

Makes significant overt efforts to make changes in one's behavior, experiences or environment

Reaches a particular goal for a specified period of time

(Relapse)

Relapse happens!

Learning opportunity ("What didn't work?")

Back to the drawing board

Maintenance

Continues and stabilizes behavioral changes

Implements plans to prevent relapse

Termination

Motivational Interviewing
(*Motivational Interviewing*. Miller and Rollnick, 1991)

- A counseling/therapeutic approach that assumes motivation is fluid and can be influenced

- Motivation is influenced in the context of a relationship

- Principle tasks -- to work with ambivalence and resistance

- Goal -- to influence change *in the direction of* health

The Five General Principles of Motivational Interviewing

- **Express empathy**
- **Develop discrepancy**
- **Avoid argumentation**
- **Roll with resistance**
- **Support self-efficacy**

Principles of Motivational Interviewing: *Express Empathy*

- **Identify with the perceptual and feeling state of another (vs. their actual experience)**

- **Identify and understand reasons for unhealthy behaviors**

- **Create a climate for change by building a bond of trust**

Principles of Motivational Interviewing: *Develop Discrepancy*

- **Acknowledge the positives <u>and</u> negatives of behavioral change**

- **Create dissonance, throw the current system out of kilter**

- **Restate the discrepancies you glean from the client**

Principles of Motivational Interviewing: *Avoid Argumentation*

- **Keep on your client's side**
- **Argumentation promotes resistance - causes people to defend the behavior they might change**
- **Confront with care**

Principles of Motivational Interviewing: *Roll With Resistance*

- **Seek to clarify, understand**
- **Invite consideration of new perspectives**
- **Reinforce person's role as a problem-solver**

Principles of Motivational Interviewing:
Support Self-Efficacy

- **Increase client's perception of self as a capable person**
- **Affirm person's positive statements and behaviors**
- **Offer options, instill hope**
- **Encourage consideration of role models, past successes**

What is Harm Reduction?

" … a client-centered approach to working with people 'where they are' rather than 'where they should be' as dictated by treatment providers."

- G. Alan Marlatt, Ph.D.

Harm Reduction

... an approach that establishes a hierarchy of goals, with the more immediate and realistic ones to be achieved as first steps toward risk-free behavior or, if appropriate, abstinence.

(Adapted from The Harm Reduction Model: Pragmatic Approaches to Drug Use from the Area between Intolerance and Neglect. Dr. Diane Riley, Canadian Centre on Substance Abuse)

Harm Reduction

A set of strategies and tactics that encourage individuals to reduce harm done to themselves and their communities by their licit and illicit behaviors
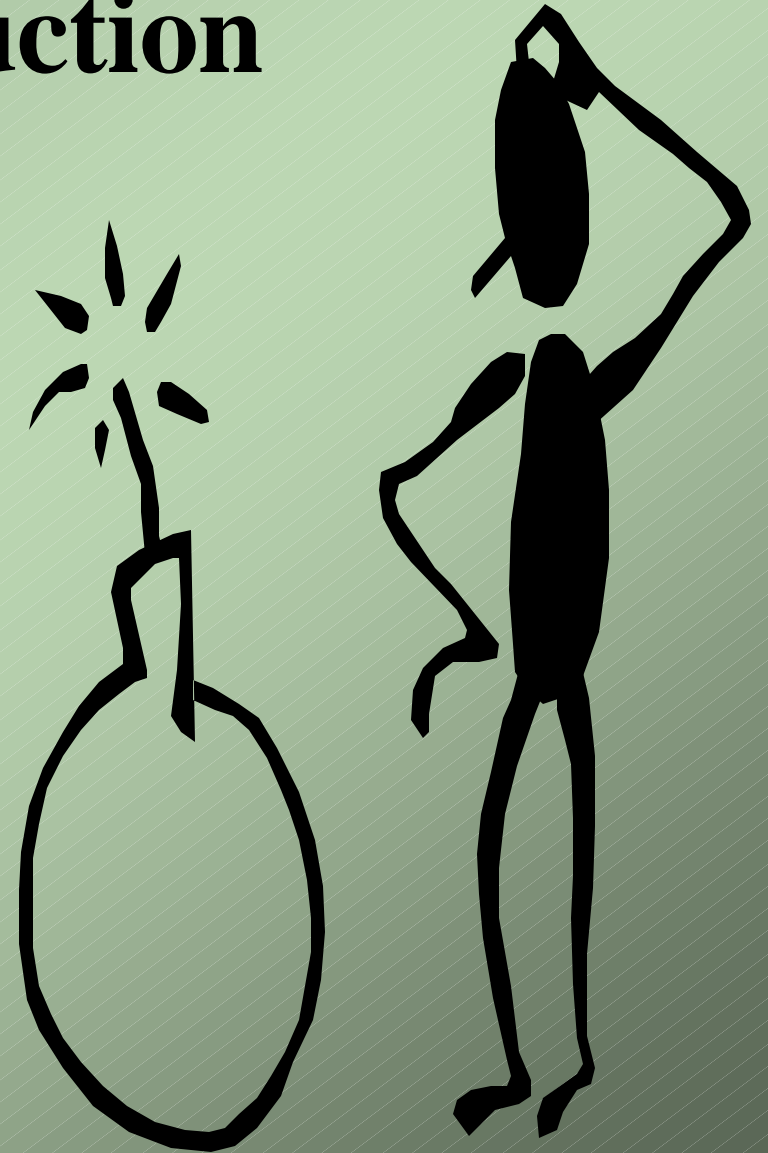
Harm Reduction

Goal

To educate the individual to become more conscious of the risks of their behavior <u>and</u> provide them with the tools and resources with which they can reduce their risk

Harm Reduction

Principles

- Humanistic, individualistic approach
- Deals with whole person with complex needs
- Alternative to disease and moral models
- Accepts risk as natural part of living
- Places risky behavior on a continuum
- Looks at person's relationship to behavior as defined by him/herself

Harm Reduction

Principles (continued)

- Accepts that change is often incremental
- <u>Any positive change</u> is seen as significant
- Interventions innovative, not rigid
- Works best if communities most affected are involved in organizing interventions/programs
- Applicable not only to individuals, but to any social welfare or public health issue

Harm Reduction Applications for People Experiencing Homelessness

Outreach and Engagement

- "Street corner" assessment
- Engagement, building trust
- Food, blankets, clothing
- Hygiene supplies
- Relationship

- Crisis intervention
- Shelter, housing
- Money management
- Case management
- Advising/counseling

Harm Reduction Applications for People Experiencing Homelessness

Psychiatric Medications

- psychiatrist/NP "hanging out"
- starting with extremely low dose
- time-limited trial
- permitting prn dosing
- IM meds
- medication monitoring

Alcohol/drugs

- decreasing frequency of use
- decreasing amount of use
- altering timing of use
- methadone maintenance
- needle exchange

Harm Reduction Applications for People Experiencing Homelessness

Systems Advocacy

- Develop relationships with community providers, public safety personnel, shopkeepers

- Provide education and training re: homelessness within own agency and to other organizations

- Serve on committees, coalitions

- Write letters, editorials

- Speak at public hearings

- Educate public officials and policy-makers

Suggested Reading
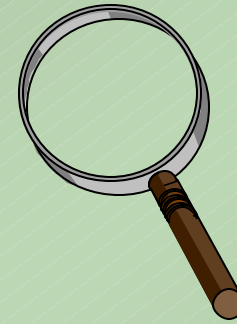
- *Changing for Good* by J.Prochaska, Norcross & DiClemente, 1994

- *Motivational Interviewing* by W.R.Miller & Rollnick, 1991

- *Practicing Harm Reduction Psychotherapy* by Patt Denning, 2000

- Browse the web for: *stages of change, harm reduction, motivational interviewing*