Youth Family Behavior Therapy
Agenda

Theory
Evidence
Overview
Therapeutic Style
Performance Interventions
Introductions

1. Name
2. What is your position/role at the agency?
3. What experiences do you have that are likely to help you learn FBT?
4. What are you looking forward to in training?
Theoretical Basis

Problem behaviors, such as drug abuse, are conceptualized to occur through positive & negative reinforcement enhanced by:

- Modeling
- Encouragement & guidance
- Physiological & situational prompts
- Insufficient reinforcement for non-problem activities
- Remoteness/uncertainty of neg. consequences of problem behavior
FBT Derived from Community Reinforcement Approach

The environment or community contributes to development and maintenance of problem behaviors, and therefore treatment should incorporate community influences, such as family, friends, teachers, employers, and so on (Hunt & Azrin, 1973).
Evidence for CRA

Examples of Controlled CRA Alcohol Studies

Examples of Controlled CRA Drug Studies
Abbott, Wellner et al., 1998; Bickel, Amass et al., 1997; Dennis, Godley et al. 2001; Godley, S. H., Garner, B. R., Smith, J. E., Meyers, R. J., & Godley, M. D., 2011; Higgins, Budney, & Bickel, 1994; Higgens, Budney et al., 1995; Higgins, Budney et al., 1997; Higgins, Wong et al., 2000; Higgins, Sigmon et al., 2003; Garner et al., 2016; Garner et al., 2009; McGarvey et al., 2014
Evidence for FBT Engagement

- Donohue et al., 2008; Donohue et al., In Press; Donohue et al., 2016; Lefforge, Donohue & Strada, 2007
Evidence for FBT in Mental Health/Substance Abuse

Controlled Trials
Azrin, Acierno et al., 1996; Azrin, Donohue et al., 2001; Azrin, Donohue et al., 1994; Azrin, McMahon et al., 1994; Donohue, Azrin et al., 1998; Donohue, Azrin et al., 2015; Chow et al., 2015

Uncontrolled Trials
Donohue, Romero et al., 2010; Donohue & Azrin, 2002; LaPota, Donohue, Warren, & Allen, 2011; Romero, Donohue, Allen, 2010; Romero, Donohue et al., 2010; Donohue, Chow et al., 2015; Pitts et al., 2015; Gavrilova et al., 2016
Mechanisms of Change in FBT

Performance interventions aimed at rewarding desired healthy behaviors, & preventing antecedent conditions that facilitate problem behavior by:

• enhancing motivation to eliminate problem behavior.

• developing skills that establish & maintain social relationships that compete with problem behavior.

• developing skills that prevent urges & impulsive behaviors that lead to problem behavior.

• allowing or facilitating negative consequences for problem behavior to occur.
Appropriate Targets

- Drug and alcohol abuse
- Mood disorders
- Family dysfunction
- Conduct
- Unemployment/school truancy
- Child Maltreatment
- PTSD
- HIV risk behaviors
- Poor Sport Performance
Appropriate Settings for FBT

• Outcome studies of FBT in adolescent samples have been conducted in outpatient mental health facilities – so this is the preferred setting.

• Some community-based agencies have been funded to implement FBT in home and inpatient mental health settings.
Appropriate Settings for FBT

Factors to consider when implementing FBT in inpatient facilities

1. Significant others must be able to visit the facility
2. Patients must have enough time in facility to learn FBT
3. Must have outpatient care after discharge.
4. Need opportunities to practice learned skill sets during brief excursions from facility.
5. Outcomes have yet to be formally examined within the context of inpatient therapeutic milieus.
6. FBT is not appropriate for peer group, multi-family, or exclusive individual applications.
Assessment

- Administered before, during & after FBT program
- Specific to performance intervention targets & agency requirements
- Person administering and interpreting assessment measures needs to be legally, competently, & ethically qualified

  - Broad-screen urinalysis testing/breathalyzers
  - Timeline Follow-back (e.g., drug use, school/work attendance)
  - Measures of psychiatric symptoms & mental health diagnoses
  - Child Behavior Problem Checklist
  - Caregiver Satisfaction w/ Youth Scale (0 to 100; % happy)
  - Youth Satisfaction w/ Caregiver Scale (0 to 100; % happy)
  - Life Satisfaction Scales (0 to 100, % happy)
Therapeutic Style & Approach

- Differential reinforcement (shaping)
- Descriptive praise
- State how desired actions reflect positive characteristics
- Eliminate blame (blame situation or environment)
- Learn by doing (role-playing)
Role-Playing

- Role-plays are used to assess scenarios & teach skills.
  - Responding to upset or criticism
  - Being assertive in soliciting reinforcement
  - Refusing prompts from others to do problem behavior.
Therapy Assignments

- Strategies to increase homework completion:
  1. Do role-plays until clients can do skills in difficult scenarios (start w/ easy scenarios & get more difficult).
  2. Role-play how family will review assignments at home.
  3. Establish where recording form will be kept & when it will be reviewed.
  4. When reviewing homework during meetings, instruct family to provide form, don’t ask for it.
  5. Blame homework failure on external event.
  6. Instruct family to complete missed assignments in retrospect based on memory or what they would have liked to have done.
Significant Other Support

- Identified client
- Primary sig. others = usually partner/family/close friend(s)
- 2ndry sig. others = other family/friends
- Sig. others are ideally:
  - sober or desire sobriety and be relatively adjusted
  - have an interest in client’s well-being
- Sig. others help client:
  - attend therapy
  - complete homework assignments
  - provide encouragement & rewards
  - model skills
  - provide insights
- Role of small children is limited (review of scheduled family activities, appreciation exchanges; non-problem behavior conversation)
Take Out Your Youth & SO Contact Form and SO Acknowledgment Form!
Phone Contact to Enhance Attendance & Participation

• Initial engagement call (client & primary significant other separately)
  • Solicit reasons for referral.
  • Empathize w/ concerns.
  • Query goals & express importance of such desires.
  • Briefly express desires will be targeted in FBT.
  • Have repeat scheduled session time & how to get to clinic.
  • Tell to come 5-mins. early to beat traffic.
  • Review obstacles to session attendance and review solutions.

• Between session calls (right after 1st visit; 2 or 3 days prior to sessions; client & significant other separately)
  • Review things done well in past.
  • Review therapy assignments.
  • Review what looking forward to in next session.
Take Out Your Initial Engagement Protocol and Let’s Practice!
How To Manage Upset During Performance Intervention Sessions?

- Establish communication guidelines early in therapy
- Empathize with all involved parties.
- Instruct all involved parties to explain something in environment that may have contributed to undesired behavior that is beyond control.
- Instruct all involved parties to use Positive Request handout.
- **Hear, Empathize, Alternatives, Review, Decide (HEARD)**
Number of Sessions

• Usually 12 to 16 performance meetings.
• 60 to 90 minute meetings
• Program usually lasts 4 to 6 months.
• Sessions fade in frequency with goal accomplishment.
Prompting Checklists Guide
Providers During Sessions

General content of initial intervention meeting prompting checklists:

1. materials required
2. rationale for performance intervention
3. steps necessary to do intervention
4. ratings of helpfulness & youth compliance

General format of future intervention meeting prompting checklists:

1. materials required
2. steps necessary in reviewing assignment
3. steps necessary in giving new assignment
4. ratings of helpfulness & youth compliance

- Glance at checklist, look up, and proceed to implement.
- Free to do whatever clinically indicated between prompts.
Consumer Satisfaction Scores

- After each performance intervention
- Opportunity for family to provide feedback
- Opportunity for therapist to provide feedback

___ a. Solicit how helpful youth thought intervention was using 7-pt. scale.

**Record Client’s Score Here:**______

___ b. Solicit how rating was derived, and methods of optimizing intervention in future.

___ c. Disclose provider’s optimization score for youth (& family’s) participation using 0 to 100 scale.

Factors that contribute to optimization score’s:
  - Attendance
  - Effort
  - Conduct
  - Homework completion

**Record Provider’s Score Here:**______

___ b. Solicit how rating was derived, and methods of optimizing intervention in future.
FBT Performance Interventions for Youth

1. **Preparatory:**
   - Program Orientation
   - Structured Agendas

2. **Motivation-Focused:**
   - Consequence Review
   - Performance Planning
   - Contingency Management (Level System)

3. **Skill-Based Modules:**
   - Stimulus Control
   - Self-Control
   - Job Getting Skills Training
   - Positive Request
   - Reciprocity Awareness
Format of Performance Interventions

• Each performance intervention includes:

  • **Manual**
    • Detailed explanation of how to implement each intervention

  • **Initial Session Protocol**
    • Step by step checklist used the first time an intervention is implemented

  • **Future Session Protocol**
    • Step by step checklist used for interventions in subsequent sessions

  • **Worksheets**
    • Layout the steps of the specific intervention in simplified terms

  • **Practice Assignments**
    • Homework assignment for client/family to practice skills outside of sessions
Orientation Session

- Tailor to fit culture of agency & its needs:
  - Intervention structure & approach (e.g., number of sessions, duration)
  - Solicit feelings about referral
  - Review feedback about assessment findings (to clarify accuracy and establish goals)
    - Satisfaction Scales (life satisfaction, parent satisfaction with youth, youth satisfaction with parent)
      - 0 = completely unhappy, 100 = completely happy
      - Assess how 100% satisfaction can occur in areas that are low.
Time to Practice Orientation!
Preparing Initial Drafts for Session Agendas

- Agendas are determined by performance plan & progress in therapy components.
- Review interventions planned.
- Review time needed for each intervention.
- Solicit potential modifications.

Exhibit 4.1. Session Agenda Therapist Prompting Checklist.

SESSION AGENDA
THERAPIST PROMPTING CHECKLIST

Client ID: ___________________________ Clinician: ___________________________ Session #: ___________________________ Session Date: ___________________________

Begin Time: _______

Establishing the Session Agenda (Usually the Youth and Adult Significant Others)

___ 1. State/solicit outstanding efforts and/or accomplishments occurring during last session.
___ 2. State planned interventions to be implemented in session & how long each will take.

<table>
<thead>
<tr>
<th>Scheduled Interventions</th>
<th>Estimated Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<tr>
<td>2.</td>
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<tr>
<td>3.</td>
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<tr>
<td>4.</td>
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<tr>
<td>5.</td>
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<tr>
<td>6.</td>
<td></td>
</tr>
</tbody>
</table>

Note: Complete aforementioned table prior to session.

___ 3. Provide opportunity for youth/significant others to modify proposed agenda.

End Time: _______

Exhibit 4.1. Session Agenda Therapist Prompting Checklist.
Time to Practice
Creating an Agenda!
Consequence Review Rationale

- Youth are more likely to discontinue problem behaviors when their aversive consequences are perceived to be greater than their reinforcing aspects.

- Getting youth to be motivated to eliminate their problem behaviors is difficult because they don’t truly appreciate the extent of their negative consequences.

- Consequence Review designed to increase awareness of negative consequences of problem behavior.
Consequence Review

- Provide Rationale
- Solicit at least one drug and up to several problem behaviors
- Obtain unpleasantness ratings (0 = not at all, 100 = couldn’t get more unpleasant).
- Obtain initial neg. consequences
- Prompt additional neg. consequences.
  - List of Annoyances Worksheet may be helpful (See Exhibit. 5.3 p. 101; also in next slide)
- Review Positive consequences
- Obtain final rating.

Exhibit 5.2. Consequence Review Worksheet.

<table>
<thead>
<tr>
<th>TARGET BEHAVIORS</th>
<th>INITIAL RATING</th>
<th>INITIAL UNPLEASANT CONSEQUENCES</th>
<th>PROMPTED CONSEQUENCES</th>
<th>FINAL RATING</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>
Consequence Review
Continued

- Obtain ratings of unpleasantness and likelihood.

- Provider must use discretion in using consequences with high ratings in both domains as prompted consequences to review in Consequence Review Worksheet (see Exhibit 5.2)

Exhibit 5.3. Consequence Review List of Annoyances Worksheet.

<table>
<thead>
<tr>
<th>ANNOYANCES</th>
<th>RATING OF UNPLEASANTNESS (0–100)</th>
<th>RATING OF LIKELIHOOD (0–100)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Jail or detention center (attacked while sleeping, beaten up, raped)</td>
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<tr>
<td>2. Poor health</td>
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<tr>
<td>3. Negative relationships with others (Screamed at or insulted by adults)</td>
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<td></td>
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<tr>
<td>4. Hurting/upsetting others</td>
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<tr>
<td>5. Arguments with others</td>
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<tr>
<td>6. Disrespect from others</td>
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<tr>
<td>7. Doing bad in school</td>
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<td></td>
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<tr>
<td>8. Getting in fights</td>
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<td></td>
</tr>
<tr>
<td>9. Suspensions and detentions</td>
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<td></td>
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<tr>
<td>10. Get in trouble at home</td>
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<tr>
<td>11. Not being able to get a job (having no money)</td>
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</tbody>
</table>
Time to Practice
Consequence Review!
Performance Planning Rationale

- Performance Planning is determined by youth & caregivers.

- Youth and caregivers determine the extent to which 6 skill-based performance interventions will be emphasized in therapy.
Performance Planning

• Read intervention summaries in the Intervention Summary Worksheet

• Solicit how each intervention might be helpful

• Agree or empathize with responses.

I. Managing the Environment to be Substance and Trouble Free (Environmental Control)
   Restructuring the environment to avoid and manage people, places, and situations that increase risk of using drugs and getting into trouble, and spending more enjoyable time with people, places and situations that are not associated with drug use or trouble.

II. Managing Self to Stay Free of Drugs and Trouble (Self-Control)
   Learning to identify circumstances that may lead to substance use or trouble, increase motivation to avoid substance use and trouble, assure calmness while generating and evaluating appropriate alternatives to drug use and trouble, and being able to choose the right solutions.

III. Improving Family Relationships (Reciprocity Awareness)
   Family members exchange what is appreciated about each other.

IV. Improving Communication (Positive Request)
   Making positive requests so people are more likely to do what asked, and disagreements are settled with mutual satisfaction.

V. Job-Getting Skills Training
   Learning strategies to obtain satisfying jobs at higher wages.

V1. Level System
   Establishing systems in which avoidance of substance use and trouble are rewarded by parents.
Performance Planning

- Solicit youth & caregiver rankings of interventions using Intervention Priority Worksheet for Adolescents.

- Sum youth & caregiver intervention rankings.

- Rank summative rankings from lowest to highest priority.

- Interventions will be administered in the order to which they are prioritized (highest to lowest), which emphasizes them in therapy.
Time to Practice
Performance Planning!
A family-supported Level System (LS) is implemented to reward youth when they achieve therapeutic goals.

LS involves developing a contract in which the youth client receives desired rewards for completion of target behaviors.
Level System

• Provide Rationale

• Obtain Rewards from Youth & Verify w/ Caregiver Using Rewards Worksheet.

Exhibit 6.2. Rewards Worksheet.

<table>
<thead>
<tr>
<th>Type of Reward</th>
<th>Currently Receiving</th>
<th>Ideally Desired</th>
<th>Caregiver 1st-Level Reward</th>
<th>Caregiver 2nd-Level Reward</th>
<th>Caregiver 3rd-Level Reward</th>
</tr>
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<tbody>
<tr>
<td>Potential Daily Rewards</td>
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<tr>
<td>Money</td>
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<td>Transportation</td>
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<td>Type of meal/dessert</td>
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<td>Cell phone use</td>
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<td>TV/Video/Games/Wii</td>
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<tr>
<td>Time w/friends and activities</td>
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<tr>
<td>Privacy time</td>
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<tr>
<td>Other Potential Daily Rewards</td>
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</table>
Level System

- Obtain 3 levels of target behavior from sig. other using Goals Worksheet.

- Note: We’ll now review forms to assist in goal development.
“Record of Chores” may assist in obtaining & monitoring chores for each level.
Level System

- Daily School Progress Report can assist in managing conduct & achievement in school w/ teachers


<table>
<thead>
<tr>
<th>Course</th>
<th>Conduct and Achievement (Satisfactory/Unsatisfactory)</th>
<th>Signature</th>
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Dear Teachers:
Please refer to the class in which you are this youth’s teacher (e.g., Social Studies), and indicate if this youth attended class, and if this youth’s conduct and achievement were “satisfactory” or “unsatisfactory” for the day. Please also record your signature.

*NOTES: ___________________________________________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________
___________________________________________________________
Level System

- Level System Recording Form assists in managing contingencies.
- Goals should ideally be made more specific in this form to reduce misunderstandings.
Take Out Your Level System Protocol and Let’s Practice!
Relationship Enhancement
Rationale

• Healthy relationships marked by equitable exchange of reinforcement.
• Family members express appreciation for one another.
• Implemented early in FBT, & when tension is present in family.
Relationship Enhancement

• Provide rationale
• Instruct members to record things that are appreciated about one another.
• Exchange appreciations.
• Encourage recipient to indicate these things will continue.

Exhibit 8.3. Things I Appreciate About My Family Worksheet.
Relationship Enhancement

- Provide form to assign homework.
- Assist family in recording family members.
- Assign 1 appreciation for each family member each day.
- Get commitment from each member to complete assignment.
- Remind family each positive statement should be reciprocated!
Take Out Your Reciprocity Awareness Protocol and Let’s Practice!
Positive Request

- Poorly stated requests result in less reinforcement, leading to upset/dissatisfaction.
- Negative emotional states lead to undesired behaviors.
  - Stealing to obtain reinforcement that is difficult otherwise.
  - Arguments to intensify importance of what is desired.
  - Drug use to eliminate negative emotional states.
- Positive Request is designed to improve positive communication.
Positive Request: Worksheet

- Distribute PR Handout.

- Indicate all listed steps will be attempted for practice, but all are not necessary in real-life situations.

- Solicit example of something desired by 1 member.

- Role-play PR w/ family.

**Exhibit 9.2. Positive Request Handout.**

**POSITIVE REQUEST HANDOUT**

1. Briefly state what exactly is wanted and when it is wanted (use "please").

2. State how you think it might be difficult for the person to do the request.

3. State how it might be good for other person if the request gets done.

4. State how it would be good for you if the request gets done.

5. Tell how you could help the other person to do the request.

6. Tell how you will reward the person if the request gets done.

7. Tell the person you’d appreciate the request being done.

8. Suggest an acceptable alternative if the person can’t do what is being asked.

9. Ask what was liked about your request, and ask person to suggest an acceptable alternative if the person can’t do request.
Positive Request: Worksheet

• Assign homework for review in future session.
Time to Practice
Positive Request!
Environmental/Stimulus Control

• Triggers in the environment lead to drug use and problem behaviors.

• In this intervention, client & family members are taught to identify “at-risk” and “safe” triggers for client.

• The team then works to restructure the environment to minimize time with “at-risk” items.
Obtain items with client & family separately to generate a comprehensive list of “safe” and “at-risk” items to drug use/problem behavior.

Exhibit 10.3. Safe and At-Risk Associations List.
Environmental/Stimulus Control

Exhibit 10.4. Things to Do and Places I Like to Visit.

<table>
<thead>
<tr>
<th>Youth ID:</th>
<th>Clinician:</th>
<th>Session #:</th>
<th>Session Date:</th>
</tr>
</thead>
</table>

Instructions: Put an “X” next to each thing you like to do and place you like to visit that does not involve drug use and/or benefits your family.

- Attending sporting events, football, baseball, hockey, etc.
- Community center activities
- City-sponsored activities, visit museum or historical site
- Read paper for community events or jobs
- Attending school/clubs (choir, band, sport leagues, bowling, yoga, photography, sewing/knitting, school clubs)
- Participating in outdoor events (hiking, picnicking, swimming, camping, skiing/sledding, fishing, hunting, gardening)
- Attending church, temple, mosque, etc.
- Computer games
- Practicing a musical instrument, dancing
- Playing board and card games
- Talking on the phone
- Cooking
- Write/videotape a play
- Volunteer at the animal shelter or charitable organization
- Read stories to/entertain children
- Start a club (book club, poetry club/party)
- Keep a journal and write every week
- Work on photo album, writing stories about the pictures
- Painting/artwork, drawing
- Doing repair work (carpentry, landscaping, fixing car)
- Family gatherings (invite friends to spend time w/family)
- Organize a family reunion
- Employment/work
- Volunteering (for community or school)
- Libraries (check out books, movies, games)

• Use the “Things to Do and Places I Like to Visit Worksheet” to generate additional “Safe” items.
Environmental/Stimulus Control

Exhibit 10.5. Things That May Lead to Drug Use and Other Problem Behaviors.

Use “Things That May Lead to Drug Use and Other Problem Behaviors” Worksheet to generate additional “At-risk” items.

- Youth ID: ___________ Clinician: ___________ Session #: ___________ Session Date: ___________

Instructions: If you have used illicit drugs/alcohol, or gotten in trouble, with any of the following risk factors, please indicate this with a check.

People
- Friends/Peers/Aquaintence
- Coworkers
- Family

Places and Situations
- Attending parties or get-togethers
- Smoking cigarettes
- Drinking alcohol
- Being angry or sad
- Stress
- Being bored
- Being alone
- Experiencing tension
- Having lots of cash available
- Car
- Specific times of day
- Excitement/anxiety
- Celebrations
- Being in places where you have used before (e.g., parks, casinos, people’s homes)
Environmental/Stimulus Control

- Solicit family activity

Exhibit 10.6. Family Invitation for Fun.

Family Invitation for Fun

What are we going to do?

When are we going to do the fun activity?

Who is going to attend the fun activity?

We can’t wait to have fun!
• Environmental/Stimulus Control

• Future sessions involve:
  • Reviewing assigned family activity, & assign another activity.
  • Meeting w/ youth & caregiver to review Safe Items.
  • Meeting w/ youth & caregivers individually to review At-Risk items.
  • Solicit things youth did (or can do) to stay clean & out of trouble.
  • Solicit things caregiver did (or can do) to assist youth in staying clean & out of trouble.
Time to Practice Environmental Control!
Self Control

• Drug use & troublesome behavior are associated with impulse control problems.

• Self Control designed to teach clients to identify antecedents to problem behavior, and generate and rehearse non-problem behaviors.
Self Control

- Solicit trigger situation.

- Role-play self control trials.

Exhibit 11.2. Self-Control Rating Form.

<table>
<thead>
<tr>
<th>SELF CONTROL RATING FORM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Record details to describe each step</td>
</tr>
<tr>
<td>Trial # 1</td>
</tr>
<tr>
<td>Date:</td>
</tr>
<tr>
<td>Word to describe situation</td>
</tr>
</tbody>
</table>

1. Stop! | Forgot to Perfect (0 to 100) | Forgot to Perfect (0 to 100) |
2. One bad thing for self | Forgot to Perfect (0 to 100) | Forgot to Perfect (0 to 100) |
3. One bad thing for others | Forgot to Perfect (0 to 100) | Forgot to Perfect (0 to 100) |
4. Take a deep breath & relax | Forgot to Perfect (0 to 100) | Forgot to Perfect (0 to 100) |
5. State 4 solutions | 1. | 1. |
 | 2. | 2. |
 | 3. | 3. |
 | 4. | 4. |
 | Forgot to Perfect (0 to 100) | Forgot to Perfect (0 to 100) |
6. Briefly evaluate some of the pros & cons for significant incompatible behaviors | 1. | 1. |
 | 2. | 2. |
 | 3. | 3. |
 | 4. | 4. |
 | Forgot to Perfect (0 to 100) | Forgot to Perfect (0 to 100) |
7. Imagine doing 1 or more solution(s) | Performance (0 to 100) | Performance (0 to 100) |
8. Imagine telling someone about using the solution brainstormed | Performance (0 to 100) | Performance (0 to 100) |
9. State positive things that will happen as a result of using the solution | Performance (0 to 100) | Performance (0 to 100) |
| Pre-Likelihood rating | Not aware to using or doing problem (0 to 100) |
| Post-Likelihood rating | Not aware to using or doing problem (0 to 100) |
| Step that helps the most & why it helped the most | |
Take Out Your Self Control Protocol and Let’s Practice!

Woo-hoo!
Job-Getting Skills Training

• Employment is usually incompatible with drug use/problem behavior because it raises self-worth and provides learning opportunities.

• Job-Getting Skills Training may be used to assist youth in getting job interviews, and doing well in these interviews.
Gaining Employment

• Review how a job would be helpful.

• Determine 3 strengths of client in gaining employment.

• Determine potential employers.

• Use Job Interviewing Skills Worksheet to role-play job-interview solicitation and later do on telephone.

• Role-play preparation of job interview using Job Interviewing Skills Worksheet.

• Assist youth in making phone calls to potential employers.

Exhibit 12.2. Job Interviewing Skills Worksheet.

Instructions: Follow these steps when attempting to set up an interview with an employer over the phone.

1. Introduce yourself.
2. Ask the name of the manager on shift.
3. Ask to speak with the manager. If asked why or what call is regarding, answer “it’s personal.” If manager is unavailable, state that “you’ll call back.”

4. When manager answers, do the following: Introduce self. Thank manager for taking call (state if someone referred you). State a few qualifications or personal strengths:
   a. 
   b. 
   c. 

Ask to schedule an in-person interview to further discuss qualifications.
   a. If scheduled: state you’re looking forward to the interview.
   b. If manager can’t arrange interview: attempt to schedule a later time.
   c. If manager can’t schedule later time: ask for referral.

Prepare for Common Interview Questions

1. Tell me about yourself.
2. Why do you want to work here?
3. What are some of your strengths and weaknesses?
4. Why did you leave your last job?
5. Why should we hire you?
Time to Practice Job-Getting Skills Training!
Future Directions

- Effectiveness trials specific to evaluating training models.

- Continuing to build website & training materials to assist dissemination.
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