

How Can We Reduce Barriers to Connecting?

The art of assessment is to gather the needed information while engaging the person and building rapport. It is also good science: research for concurrent disorder assessment emphasize the process of assessment - the interpersonal and procedural factors.

Expect challenges to engagement

People may see their mental disorders or addiction differently than those who are trying to help them. Many people with substance use disorders may deny or minimize the negative effects of substance use on their lives. Likewise, people with severe mental health challenges may not believe they have an illness or may minimize the extent of their disability.

There may be other challenges as well:

- People may not feel safe enough to disclose illegal drug use.
- People may not remember symptoms or substance use due to memory impairment.
- People may be reluctant to disclose for fear of legal difficulties.
- People may be reluctant to disclose problems with money management in fear that they will lose control of money.
- People may fear losing their children over disclosures.

The opposite is also true - some people may choose to make their use or symptoms sound worse to gain access to supports, treatment and/or housing.

Use a person-centred approach

The person's perceptions of their problems and their goals are central to your assessment and recommendations. It is important to be person-centred to fully motivate and engage people.

Identify strengths and supports

Using a positive approach is more effective than focusing on deficits that need to be corrected. Learn about the person's current strengths, skills and supports. This includes both general life functioning, and their ability to manage mental health or substance use disorders.

Elicit-Provide-Elicit

Many people don't identify with having a mental illness or addiction and may reject labels. Clinicians should seek to understand how people perceive their own difficulties in a language that the person understands. You will need to introduce yourself and the assessment process.

Elicit-Provide-Elicit is an approach to do this:

- ELICIT - Ask the person what they know about the assessment questions, and what will be done with the answers.
- PROVIDE - Give the person results of their tests, assessments and explain next steps.
- ELICIT - Enquire as to the persons understanding of the process and offer support.

Be empathetic

Rogers (1980) defined empathy as "the therapist's sensitive ability and willingness to understand the person's thoughts, feelings and struggles from the person's point of view. It is this ability to see completely through the person's eyes, to adopt his frame of reference...it means entering the private perceptual world of the other."

Empathy is an evidence-based practice and foundational to a good relationship. Unfortunately, it's easy to forget to be empathetic when you are feeling pressured to get paperwork done. A key skill of empathy is **reflective listening** (Rogers, 1980). Assessment is usually a questioning activity. After you ask a question, try to reflect the client's answer (especially the underlying meaning or feeling, in other words, a *complex reflection*). This will communicate that you are trying to understand their point of view, it will clarify misunderstandings and it will encourage clients to say more.

Consider the person's motivation level and treatment readiness

Many people with complex challenges or concurrent disorders face barriers in their treatment, their education, and the workplace. They may be demoralized by financial barriers, or by their own limitations that affect their employment, relationships, or emotional well-being. Assessment and treatment planning should address the person's motivation and readiness. Motivation has been found to be an important predictor of treatment compliance, dropout, and outcome.

Treatment readiness

A consistent recommendation for the assessment of people with concurrent disorders is to evaluate their motivation for change, including the stage of change and/or the person's stage in the treatment process (Health Canada, 2002).

To these recommendations of assessing stage of change and/or stage of treatment motivation, is added the importance of assessing both these intrinsic motivational factors and the more extrinsic pressures to seek help. Tailoring the treatment plan for people with concurrent disorders based on client stage and motivation is one of the key principles of an integrated treatment plan as defined by Mueser and colleagues, and is a good example of how the assessment information must be linked to the treatment plan (Health Canada, 2002).

Be sensitive to cultural needs

Assessment should consider influences of ethnicity, social class, gender, sexual orientation, race, disability status, socioeconomic level, and spiritual affiliation.

Provide trauma informed care

Recognize that trauma may interfere with the person's ability to engage and follow through with treatment recommendations. Trauma informed practice involves understanding, anticipating, and responding to any issues, expectations, and special needs that may arise.

Clinician tips for engagement

- Establish a good rapport before asking for a lot of details.
- Provide a supportive interview setting to promote disclosure of sensitive clinical information.
- Frame questions to normalize different substance use patterns. For example: Many people have experimented with drugs. Have you ever had any experiences with...?
- Expect negative reactions. Rather than confronting the person about them, work to develop a trusting relationship with open, honest dialogue and empathy.
- Compile self-report information in a non-judgmental manner and in a relaxing setting. Provide a supportive interview setting to promote disclosure of sensitive clinical information, and be clear about the limits of confidentiality.
- Examine non-intrusive information first (such as background information). After you have established rapport, you can discuss substance use issues. Gather mental health information last, as this information tends to be the most stigmatizing and difficult to disclose.
- Tell the person when you notice their talents, strengths, or successes, and reinforce it when they acknowledge their own strengths. Reframing is a way to show people that what they see as failures may be strengths. For example: "I've tried so many times and failed" may be reframed as "Even though you haven't succeeded yet, you are really determined!" (Resource: Positive Psychology www.ppc.sas.upenn.edu.)

Suggested activities

With your team, think of ways to make assessment more conversational:

- How can you rephrase closed questions as open questions?
- For what types of assessment information is it more important to be empathetic?
- How can you remain empathetic with all of the people you serve?

By yourself or with your team, think of the people you serve:

- Note their strengths, resources, resiliencies, talents, and knowledge.
- Make a list and add to it when you notice or observe a new strength.
- When you begin to feel discouraged about people, you can look at your list. It's also a good idea to keep it posted where you can see it.