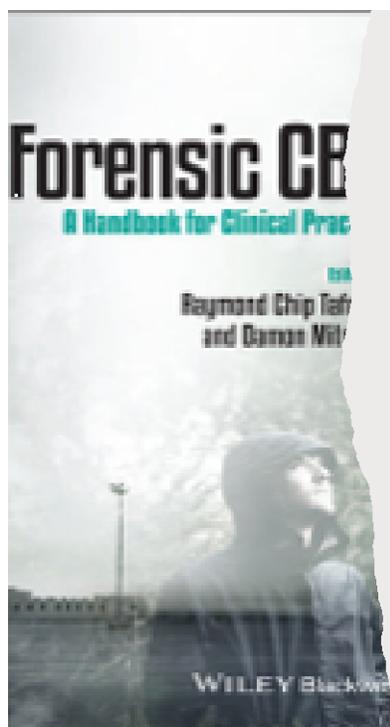


Blending Motivational Interviewing with Risk-Need-Responsivity: What Professionals Need to Know

Supplemental Materials

Raymond Chip Tafrate, Ph.D.
Professor and Clinical Psychologist
Central Connecticut State University
Tafrater@CCSU.edu



Based On ...

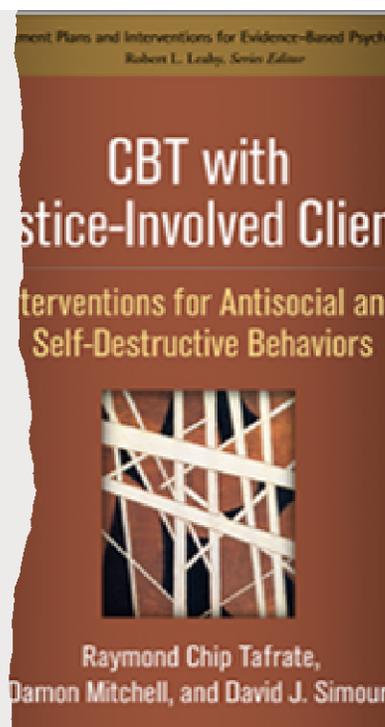
Tafrate, R. C., Hogan, T., & Mitchell, D. (2019). Integrating motivational interviewing with risk-need-responsivity based practice in community corrections: Collaboratively focusing on what matters most. In D. Polaschek, A. Day, and C. Hollin (Eds.), *The Wiley international handbook of correctional psychology* (pp. 603 –622). Wiley Blackwell.

Tafrate, R.C., Mitchell, D., & Simourd, D.J.(2018). *CBT with justice-involved clients: Interventions for antisocial and self-destructive behaviors*. Guilford Press.

Tafrate, R. C., & Luther, J. D. (2014). Integrating Motivational Interviewing with Forensic CBT: Promoting Treatment Engagement and Behavior Change with Justice-Involved Clients. In R. Tafrate and D. Mitchell (eds.), *Forensic CBT: A handbook for clinical practice* (pp. 411 – 435). Wiley Blackwell.

Miller, W.R. & Rollnick, S. (2013). *Motivational interviewing: Helping people change (3rd ed.)*. New York: The Guilford Press.

Rosengren, D.B. (2018). *Building motivational interviewing skills: A practitioner workbook (2nd ed.)*. New York: Guilford Press.



The materials contained in this handout are provided for personal study or use with clients. This presentation is protected by international and U.S. copyright laws. Distribution, electronic displays, file-sharing, re-publishing, and resale of the materials without written permission of the sponsors is prohibited.

Criminal Risk Domains

Risk Domain

Description

History of Criminal/ Antisocial Behavior

A history of criminal/antisocial behavior that persists over time

Criminogenic Thinking/ Antisocial Orientation

Thoughts and beliefs that facilitate criminal, antisocial, and maladaptive behavior; Personal disposition of an antisocial nature

Antisocial Companions

Connection with people involved in, or oriented toward, criminality; Absence of prosocial friends

Dysfunctional Family/ Romantic Relationships

Family or marital relationships that are emotionally detached and/or ignore, reinforce, or model antisocial behavior

Lack of Connection to Work/ School

Lack of success/negative attitudes/low levels of performance and satisfaction related to work/school

Maladaptive Leisure Time

Aimless use of leisure time/lack of structure to daily routines; Low levels of involvement in positive prosocial pursuits; Enjoyment of antisocial and risky activities

Substance Abuse/ Misuse

Misuse of alcohol and/or other drugs (including prescription medications)

Anger Dysregulation

Inability to properly modulate anger (e.g., frequency, intensity, and/or expression); Anger reactions create social, vocational, or interpersonal difficulties

Secondary Domains

Secondary Domains

Description

Intellectual Disability

Deficits in general cognitive abilities, reasoning, and decision-making

Presence of Psychopathology *

Mental health problems (e.g., symptoms of schizophrenia, mood, bipolar, anxiety, & trauma related disorders) and dysfunctional personality issues (e.g., prominent personality disorder features)

Physical Health Concerns

Chronic and acute medical conditions; overall physical health and stature (e.g., energy levels, ability to metabolize intoxicants, and/or tolerate environmental insults)

Problematic Housing

Unstable and/or dangerous housing situations; poor quality living circumstances

* Note. In the current context, psychopathology does not refer to substance use disorders or antisocial personality patterns, which are considered criminal risk domains.

Criminogenic Thinking Patterns and Criminogenic Thoughts

Criminogenic Thinking Pattern	Description of Pattern	Sample Criminogenic Thoughts
-------------------------------	------------------------	------------------------------

Thinking Patterns Related to Self and Others

Identifying with Antisocial Companions	Viewing self as being similar to, and relating best to, antisocial peers; sees relationships with prosocial peers as unimportant	“I don’t have anything in common with people who live a straight life.”
Disregard for Others	Belief that the needs/rights of others are unimportant; antipathy/hostility toward others; lack of empathy and remorse for hurting others	“There’s no point worrying about people you hurt.”
Emotionally Disengaged	Belief that avoiding intimacy and vulnerability is good; lack of trust; fears of being taken advantage of	“I don’t talk about personal issues. If I open up to someone, they will take advantage of me.”
Hostility for Criminal Justice Personnel	Adversarial and suspicious attitude toward police, lawyers, judges, case managers, and so forth	“Probation officers just want to violate you. That’s why they always ask about your address -- so they know where to find you when they want to arrest you.”
Grandiosity & Entitlement	Inflated beliefs about oneself; belief that one is deserving of special treatment	“I won’t go to treatment unless you can find a facilitator smarter than me.”
Power & Control	Seeking dominance over others; seeking to control the behavior of others	“Nobody can tell me what to do. I tell other people what to do.”

Thinking Patterns Related to Interacting with the Environment

Demand for Excitement	Belief that life should be focused on thrill seeking and risk taking; lack of tolerance for boredom	“There is no better feeling than the rush I get when stealing.”
Exploit	General intent to exploit situations or relationships for personal gain when given the opportunity	“Why should I pay child support? She has a rich boyfriend who can support my kid”
Hostility for Law & Order	Hostility toward rules, regulations, and laws	“Laws are there to hurt you, not help you.” “That’s the way I am. I make my own rules.”
Justifying and Minimizing	Justification, rationalization, and minimization of harmful behaviors	“If I don’t sell drugs in my neighborhood, somebody else will.”
Path of Least Resistance	“Easiest way” approach to problem solving; a “no worries” and “no plan needed” and “in the moment” style of life	“Everything will take care of itself.”
Inability to Cope	Giving up in the face of adversity; low frustration tolerance	“When I don’t understand things, I give up.” “All these programs and appointments you’re making me do are stressing me out, I’d rather be back in jail.”
Underestimating	Underrating the negative consequences of risky behaviors; over-confidence in decision-making skills	“What’s the worst thing that could happen to me - nothing!” “I won’t go to jail for selling. I know all my clients.”

Copyright © 2016 Raymond Chip Tafrate and Damon Mitchell. This script was created under the auspices of the Forensic CBT Program, which was developed through federal SMART Supervision grant 2012-SM-BX-0003. Permission to photocopy this script is granted to purchasers of *CBT with Justice-Involved Clients* (The Guilford Press, 2018) for personal use or use with clients (see copyright page for details). Purchasers can download additional copies of this script (see the box at the end of the table of contents).

Focusing Questions

Perhaps the most straightforward strategy is simply to ask, in an open-ended manner, what the person considers the greatest concern or highest priority. Often, when asked directly, a JIC will identify a change that is consistent with a criminal risk domain. The benefit of focusing questions is that JICs themselves highlight the need for change, rather than being told by practitioners what is important. Of course, the disadvantage of this approach is that many JICs come to the table with entrenched thinking patterns that distort and interfere with their ability to accurately assess the long-term effects of their present lifestyles. Nonetheless, a direct approach is usually worth a try and at the very least will provide additional information about a JIC's level of awareness. Examples of focusing questions are provided in Table 7.2.

Be prepared for a wide range of answers to these types of questions. As you listen, your task is to reinforce any change talk that naturally emerges. Your overall strategy will involve matching the JIC's responses to any of the seven modifiable criminal risk domains (criminogenic thinking/antisocial orientation, antisocial companions, dysfunctional family/romantic relationships, lack of connection to work/school, maladaptive leisure time, substance abuse/misuse, and anger dysregulation) previously identified in your assessment and case formulation, and then guiding discussions toward those areas in subsequent meetings. If you try one or two of these questions and elicit change talk related to a criminal risk domain, congratulations! You are establishing a collaborative treatment goal. If not, then try one of the more directive strategies described below.

Focusing Questions

- "What changes would you like to make?"
- "It looks like you are getting a lot of pressure from the court about the conditions of your probation. I would like to hear from you what you think is most important to work on."
- "If you were to make changes in your life once you get out of prison, what do you see as the first change you need to make?"
- "As you look at your life right now, what areas do you need to work on to make things better?"
- "In terms of changing something, what seems most urgent for you right now?"
- "If I were to run into you at the post office after your supervision period has ended, what would you want to tell me has changed in your life?"
- "When you think about your upcoming release date, what are you most worried about?"
- "Even though you feel like you are being forced to come here, what could we focus on that might be helpful for you?"
- "In order to avoid future legal problems, what do you need to do differently?"
- "What puts you most at risk for getting rearrested?"
- "What are the two most important things for you to work on so that you will not end up back in prison?"
- "Let's take a step back and consider together what is most important to focus on. What do you see as the highest priority?"
- "If I were to see you in the community a year after you are released, what kinds of things would you like to tell me are going well?"

Questions Likely to Evoke Change Talk

Change talk subtype Change talk questions

Desire	<i>“Why would you like to work on making better decisions?”</i> <i>“What do you want to get out of this period of supervision?”</i>
Ability	<i>“What gives you confidence that you can avoid your old friends?”</i> <i>“What strengths do you have that will help you to re-invent your future?”</i>
Reasons	<i>“What are the two most important reasons for you to stay out of jail?”</i> <i>“How would _____ * benefit you?”</i> <i>(* keeping this job, attending this program, spending time with positive friends, reducing your drug use, etc.)</i>
Need	<i>“How important is it for you to change course now?”</i> <i>“What is at stake if you do not get a handle on your impulsive decision-making?”</i>
Commitment	<i>“What are your plans for going to the employment program?”</i> <i>“How will you handle the negative influence from your brother?”</i>
Activation	<i>“What might you do to treat your girlfriend better?”</i> <i>“Think about a situation that might pop up over the next day or two that will be risky for you. What would be the best way for you to deal with it?”</i>
Taking Steps	<i>“What have you taken from this whole experience that is already helping you make better decisions?”</i> <i>“What are some things you are doing now that are helping you to maintain your sobriety?”</i>

From: Tafrate, R. C., Hogan, T., & Mitchell, D. (2019). Integrating motivational interviewing with risk-need-responsivity based practice in community corrections: Collaboratively focusing on what matters most. In D. Polaschek, A. Day, and C. Hollin (Eds.), *The Wiley international handbook of correctional psychology* (pp. 603 – 622). Wiley Blackwell.

Sample Opening Statements

OUTPATIENT COUNSELING

“Hello, [JIC’s name]. My name is Mark, and I’m a clinical psychologist. I work with people who are struggling to make changes in their lives. I’d like to spend a bit of time talking about what brought you here, the problems you have been having, and the history of those problems. Tell me, what brought you here?”

PROBATION/PAROLE

“Hello, [JIC’s name]. Thanks for coming in on time today. My name is Meghan. I’ll be your probation [parole] officer. Part of my job is to uphold the expectations of the court and the conditions of probation [parole]. Another part of my job is to provide support and information about community resources, and to help you gain skills and knowledge to successfully complete your probation [parole] and keep you from returning to the court [prison] in the future. We will work together on identifying some of your strengths and some of the things you’ve struggled with. We will also focus on those things you think might put you at risk for having future problems. Before we directly discuss those things, I’d like to know how you think being on probation might be helpful to you.”

CASE MANAGEMENT

“Hello, [JIC’s name]. My name is Denise, and I’m the clinical social worker at this program. People usually get referred here by the court as a condition of probation [parole]. I’ve read over your file and have an understanding of the conditions of your probation [parole], and my job is to help you get through this period successfully. During our meetings, we will work on identifying those factors in your life that might put you at risk for having future problems with the law. We will also talk about resources and skills to help you make changes that you think might be important. What are some things you might want to get out of this program?”

PRISON

“Hello, [JIC’s name]. My name is Ryan. I am the counselor on this unit, and also your primary therapist. On this unit, you will have the opportunity to participate in a variety of individual and group mental health services, in addition to other out-of-cell activities. I heard that you just arrived on the unit, and I would like to learn more about you, so we can decide together what would be most helpful. Tell me about some of the things you have been struggling with.”

Examples of Focusing and Presenting Options

FOCUSING SCRIPT 1

“[JIC’s name], I’ve really appreciated your honesty in the last few meetings about some of the problems you are facing. Let’s take a step back for a moment and figure out together what is the most important issue to focus on first. Based on what you have said, I’ve created a list of areas we might talk about. Let’s review the list, so you can tell me what jumps out as most important. Ready? Here they are: (1) finding work, (2) getting into a program to earn your GED, (3) staying away from your friends who drink, and (4) getting your anger under better control. Which one seems to you like the top priority?”

FOCUSING SCRIPT 2

“Hi, [JIC’s name], we have about 30 minutes for our meeting today. First, I would like to go over some of the areas of your life we might talk about, and then we can decide together where to go from there. We could talk about work—the kinds of jobs you are most interested in, what you see as options for employment, and resources that might be available to assist you. We could talk about your free time—what you see as the most productive ways to spend your time, and how to structure your daily routines so that you can accomplish your goals. Or we could talk about heroin use—the challenges you face in trying to stay clean, and some ways to make it easier. Which one of those things would you most like to talk about? What would you find helpful?”

FOCUSING SCRIPT 3

“[JIC’s name], I have been thinking a lot about your case since we last spoke. I know you are feeling both excited and anxious as you get closer to your release date. Would it be OK if we focused our time today on some of the things that put you most at risk for ending up back in prison? [When they are asked for their permission in this manner, JICs usually say, “Yes.”] OK, great. Here are some of the things you mentioned that could be a challenge: hanging out with your old friends; not having a paycheck and being tempted to sell drugs to get money; and living with your brother, who is still using. When you think about it, which one of these areas are you most concerned about?”

Focusing on Criminal Risk Domains (to Be Used with Bubble Chart)

“The bubbles on this chart contain different life areas that put people at risk for problems with the criminal justice system. If you take a look at the chart, you’ll notice that the most common areas people struggle with are drugs and alcohol; having friends who are negative influences and who tend to get in trouble; having too much free time and a lack of structure; family problems; difficulties with work or school; and problems in managing anger. Based on our discussions, I have also written in _____ and _____ [these are any secondary domains you have identified from your case formulation, such as mental health symptoms, physical health conditions, and problematic housing]. Also, there are a few blank bubbles. In these, I would like you to write in some things related to your life that are not included, but that you think are important. [Allow the JIC some time to review the chart and write in additional factors.]. OK, great. When you look at the bubbles, which of these areas are most important for you to work on? [If the JIC chooses multiple areas, keep track of them, and then ask:] If you had to choose one, which one would you say is most important? OK, why did you pick _____?” [Reinforce change talk, and explore how making changes in the life area would be consistent with the JIC’s values.]

Life Areas That Put Me at Risk

Substance Use

Friends Who Get in Trouble

Too Much Free Time/Lack of Structure

Family Problems

Difficulties with Work or School

Difficulties Managing Anger

(Empty oval)

Focusing on Criminogenic Thinking Patterns

“[JIC’s name], we are all guided by our thinking. As we go through life, we develop rules for how we interpret things, see ourselves, and react to others. With years of repetition, much of our thinking becomes automatic and inflexible, and we become much less aware of how some of our most important thinking patterns guide our everyday decisions. Of course, for all of us, our own thinking seems perfectly normal, because we have repeated many of the same thoughts in our heads for years.

“Unfortunately, some of the ways of thinking that people live by can cause problems for them. Part of our work together will involve creating an awareness of some of the thinking patterns that have developed for you. We will also explore the effect these patterns have had on your life. Only you can decide if a thinking pattern is working or not. Would it be OK if I shared with you one pattern I noticed? [When they are asked for permission in this way, JICs usually say “Yes.”] One pattern that came up for you is a tendency to . . . ” [Describe a specific thinking pattern, using the language provided from the next script. Use some of the following questions to explore the pattern and elicit change talk.]

“Tell me more about this way of thinking and your tendency to_____.”

“How has this way of thinking affected your life overall?”

“Looking back over your life, how has this thinking pattern sometimes worked against you?”

“What kinds of things have you lost in your life when you followed this way of thinking [Ask about areas such as relationships, jobs, money, health, freedom, respect, opportunities]?”

“What will keep happening if you continue to follow this way of thinking?”

“What is at stake if you don’t change this way of thinking?”

“How does this way of thinking interfere with your value of_____ [mention a value the client has previously described as important]?”

“What is a new way of thinking that might work better for your life?”

Describing Criminogenic Thinking Patterns to JICs

The following are suggestions for describing criminogenic thinking patterns to JICs. Try to avoid using the name of a thinking pattern (in bold); instead, highlight the description. The descriptions are meant to be honest, but nonjudgmental. Feel free to adapt these descriptions to emphasize the part of the thinking pattern that fits best for a particular JIC. Use previous script to introduce the conversation (“One pattern that came up for you is a tendency to . . .”).

1. **Identifying with antisocial companions:** “. . . believe that you relate best to others who get into trouble or who have a lifestyle that puts them at risk for getting into trouble.”
2. **Disregard for others:** “. . . look out for yourself and not think about how your actions affect others.”
3. **Emotionally disengaged:** “. . . not show your emotions, because you think people will take advantage of you or it will make you look weak.”
4. **Hostility for criminal justice personnel:** “. . . see all police officers, probation officers, judges, and so forth as enemies.”
5. **Grandiosity and entitlement:** “. . . be overly confident; you expect things to go your way and you become angry when they don’t.”
6. **Power and control:** “. . . want to control other people and situations.”
7. **Demand for excitement:** “. . . crave doing risky things just for the rush or the thrill, even though you know there are probably going to be bad consequences later.”
8. **Exploit:** “. . . look for shortcuts, and have other people take care of things for you, or to use people for your own advantage.”
9. **Hostility for law and order:** “. . . view rules as stupid and believe they don’t apply to you.”
10. **Justifying and minimizing:** “. . . think that even though something is illegal or harmful to others, you have reasons why it’s sometimes OK to do it anyway.”
11. **Path of least resistance:** “. . . believe that problems will take care of themselves.”
12. **Inability to cope:** “. . . get overwhelmed and frustrated and give up when things get hard.”
13. **Underestimating:** “. . . not think through the possible negatives that could result from your decisions, and then they take you by surprise later.”

