

Motivational Interviewing and The Community Reinforcement Approach

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Treatment Planning – Goals of Counseling

- Two Components
 - ✓ Happiness Scale
 - ✓ Goals of Counseling
- Goals of Counseling Approach
 - ✓ Ask the client what she/he wants to work on first
 - ✓ Be positive
 - ✓ Keep client's reinforcers in mind
 - ✓ Tie the reinforcers to the goals

Goals of Counseling: Setting Goals

- Goals of Counseling contains the categories on the Happiness Scale
- Guide the client's selection of a category
- In general, set short-term goals that are scheduled to be completed in about a month
- Develop a step-by-step weekly strategy for reaching each goal
- Address obstacles to completing the goals
- The strategy = the "homework" for the week

Goals of Counseling

Name: _____

Date: _____

Problem Areas/Goals “In the area of ____ I would like:”	Intervention	Time Frame
1. Marijuana use/nonuse		
2. Alcohol use/nonuse		
3. Other drug use/nonuse		
4. Relationship with boyfriend/girlfriend		
5. Relationships with friends		
6. Relationships with parents/caregivers		
7. School		
8. Social activities		

Guidelines for Goal Setting

Goals and weekly strategies should be:

- Brief (uncomplicated)
- Positive (what *will* be done)
- Specific behaviors (measurable)
- Reasonable
- Under the client's control
- Based on skills the client already has

What's wrong with these goals & strategies?

- I don't want to drink anymore
- I'll get my friend to come into treatment
- I'll apply for 10 jobs tomorrow
- I'll get a higher-paying job this month
- I'll try harder to save money this month
- I'll go out on a date with four different women next week

Goals of Counseling - Sample

Goals of Counseling

NOTE: These would not be all assigned at once!

Name: _____

Date: _____

Problem Areas/Goals “In the area of I would like:”	Intervention (Weekly)	Time Frame (Goal)
1. Marijuana use/nonuse Stay clean for 30 days.	1. Play video games after school with my two non-using friends (Sam and Pete). 2. Use drug-refusal skills whenever offered drugs.	1 month
2. Alcohol use/nonuse Stay sober for 30 days.	1. Go to an alcohol-free party on Saturday night (Ted's).	1 month
3. Other drug use/nonuse N/A	N/A	N/A
4. Relationship with boyfriend/girlfriend Do two non-drug-related activities each week outside of home (both agree).	1. Use problem-solving procedure with girlfriend to identify an enjoyable activity they both like. 2. Try the activity once.	1 month
5. Relationships with friends Make one new non-using friend.	1. Attend church youth group this week.	1 month
6. Relationships with parents/caregivers Spend two hours per week doing a fun activity together (movie, shop, dinner).	1. Sit down and have a glass of juice with my parents at breakfast time before rushing out the door (do two times per week).	1 month
7. School Get passing grades on my math and history midterms.	1. Finish my math and history homework every night this week.	1 month
8. Social activities Identify one new fun social activity that I want to do weekly and begin doing it.	1. Ask my non-using cousin what he does for fun with other people. 2. Look through newspaper to get ideas; check on the internet.	1 month

Assigning Homework

- Frame as “practice exercises” or “trying an experiment”
- Offer rationale
- Get client’s input
- Describe agreed-upon assignment that is:
 - positive, specific, measurable, straightforward (not complex), under client’s control
- Ask about & address potential obstacles
- Identify time for completing assignment

Reviewing Homework

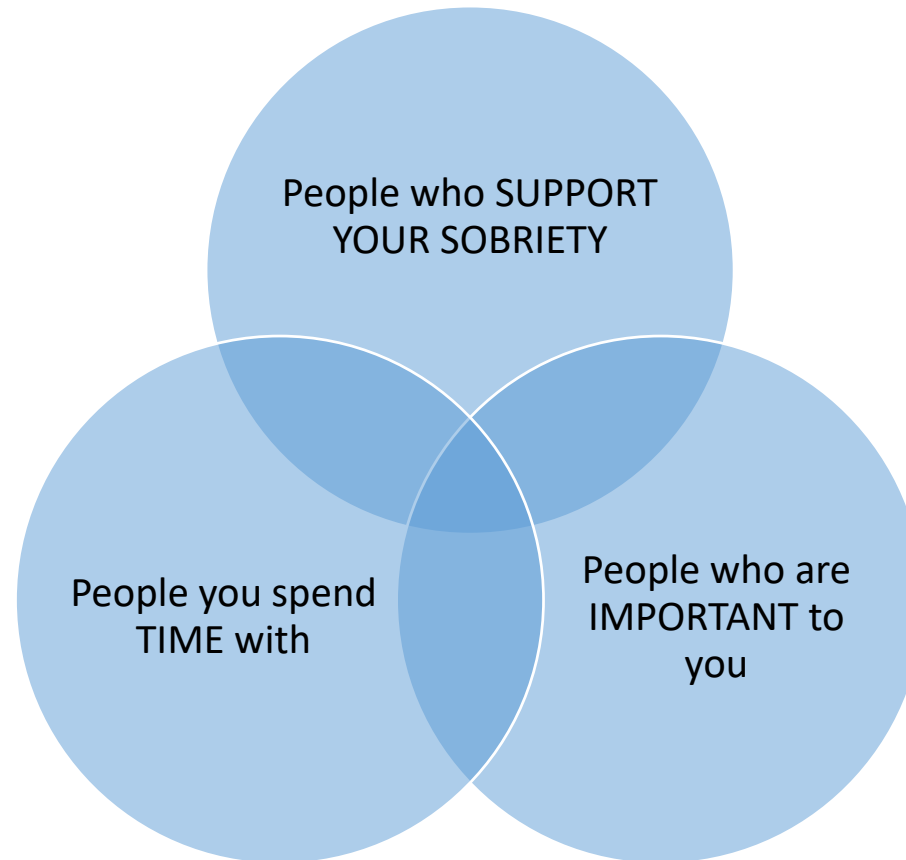
- Start session by reviewing homework
- Get the details! What did the client do/not do?
- Regardless: ask about obstacles faced
- Address problems (modify if indicated)
- Reinforce any compliance

CSO Involvement: Why and How

Role of Supportive Significant Others in MICRA

- To offer helpful ideas and input
- To give encouragement
- To support and reward the client's efforts to change drinking
- Giving specific help – as the client asks- to carry out specific plans (i.e. turning down drinks at holiday parties)

Someone who is important to you
Someone whom you see and spend time with regularly
Someone who cares about you and understands and listens to you
Someone who has been helpful to you in the past
Someone who would help support your sobriety
Someone who would be willing to come with you to sessions



Recruiting SSO

- Open ended questions about support for change in drinking in the client's current environment

Limited social resources (e.g., social isolation, homelessness).

- May not be feasible
- Postpone

The client does not feel his/her social network is emotionally supportive.

- Reflect the client's realities
- Explore possibilities
- Postpone until later

The client believes a potential SSO will be reluctant to participate.

- Ask what the client thinks will be involved for the SSO
- How has the SSO been supportive in the past?
- Reframe the act of asking the SSO to participate as giving the SSO an opportunity to be supportive in yet another way.
- Negotiate with the client around having either the client
- Ask for permission to invite the SSO yourself

The client has negative feelings around SSO participation (e.g., not to burden people, embarrassment, or wants to “make it” on his/her own).

- Normalize the client’s feeling
- Frame as independence or something
- Increase client’s sense of control by negotiating as much involvement as they choose (even one session!)

Three strikes rule

- If client refuses to have SSO involved, ask if you can bring this up later
- You can repeat this twice
- After three attempts on your part - quit

But what does the SSO do?

What **should not** be happening with SSO's in MI-CRA blends

- Martial therapy
- Supportive therapy for the SSO
- Sex therapy, parenting skills training, coping with SSO depression
- Encouraging SSO to stay in relationship with client

When an SSO is helpful, it will look like this:

- SSO rewards positive behaviors (i.e. client returns home from office party without being intoxicated)
- SSO ignores “old” behaviors (i.e. refuses to “call in sick” for the client or tell children their mother is ill)
- SSO practices new skills that client is learning (i.e. assertive communication or “I” statements)
- SSO notices and comments on positive changes in client and relationship

Choice Points to Negotiate with Care

- Care is needed in selecting an SSO
- Counselor may need to manage unhelpful SSO behaviors in the session
- Possible that SSO should be asked to return only at certain times (or not at all)
- Remember: SSO's can do more harm than good if they are chosen without care

Is this the same as Behavioral Couples Therapy?

- Also an evidence-based treatment for substance use disorders (particularly alcohol)
- Couple relationship is the focus of the treatment (unlike CRA)
- The theory is that if the relationship gets better, the client's drinking will get better
- Lots of evidence to support this
- Different from CRA – the SSO (not necessarily partner) is there to help change client's environment

CRA Within a Relationship

- Points to remember
 - ✓ Substance abuse always impacts relationships
 - ✓ Partners are typically invited to be involved in treatment
 - ✓ Goal is to make the relationship more reinforcing for both individuals
- Specific Skills Training
 - ✓ Problem-solving
 - ✓ Communication
 - ✓ Disulfiram (or other therapeutic drug) Monitor Training
 - ✓ Relationship Happiness Scale
 - ✓ Perfect Relationship Worksheet
 - ✓ Daily Reminder to Be Nice

RELATIONSHIP HAPPINESS SCALE

This scale is intended to estimate your current happiness with your relationship in each of the ten areas listed below. Ask yourself the following question as you rate each area:

"How happy am I today with my partner in this area?"

Then circle the number that applies. Numbers toward the left indicate various degrees of unhappiness, while numbers toward the right reflect various levels of happiness.

In other words, by using the proper number you will be indicating just how happy you are with that particular relationship area.

Remember: You are indicating your current happiness, that is, how you feel today. Also, try not let your feelings in one area influence the ratings in another area.

	Completely Unhappy										Completely Happy	
	1	2	3	4	5	6	7	8	9	10		
Household Responsibilities												
Raising the Children												
Social Activities												
Money Management												
Communication												
Sex & Affection												
Job or School												
Emotional Support												
Partner's Independence												
General Happiness												

Name: _____

Date: _____

PERFECT RELATIONSHIP

Under each area listed below, write down what activities would occur in what would be for you an ideal relationship. Be brief, be positive, and state in a specific and measurable what you would like to occur.

- 1. In Household Responsibilities I would like my partner to:

- 2. In Raising the Children I would like my partner to:

- 3. In Social Activities I would like my partner to:

- 4. In Money Management I would like my partner to:

- 5. In Communication I would like my partner to:

- 6. In Sex and Affection I would like my partner to:

- 7. In Job or School I would like my partner to:

- 8. In Emotional Support I would like my partner to:

- 9. In Partner's Independence I would like my partner to:

- 10. In General Happiness I would like my partner to:

DAILY REMINDER TO BE NICE

Name: _____

Week Starting: _____

Day of Week							
Did you express appreciation to your partner today?							
Did you compliment your partner today?							
Did you give your partner any pleasant surprises today?							
Did you visibly express affection to your partner today?							
Did you spend some time devoting your complete attention to pleasant conversation with your partner?							
Did you initiate any of the pleasant conversations?							
Did you make any offer to help before being asked?							

CRA Within a Relationship

Practice: Working with Partners

- Play roles (therapist, client, significant other, observer)
- Don't play your "worst client ever"!
- Stay positive and upbeat
- Have clients be specific in requests of each other
- Incorporate your own style

Building Confidence

What happens if...

- A person recognizes a problem
- And decides that change is important?
- But lacks confidence?

Building self-efficacy in blended treatments

- Usually occurs once the treatment plan is complete
- Can query strengths directly and can use input from SSO
- Also use the Characteristics of Successful Changers

Accepting	Committed	Flexible	Persevering	Stubborn
Active	Competent	Focused	Persistent	Thankful
Adaptable	Concerned	Forgiving	Positive	Thorough
Adventuresome	Confident	Forward-looking	Powerful	Thoughtful
Affectionate	Considerate	Free	Prayerful	Tough
Affirmative	Courageous	Happy	Quick	Trusting
Alert	Creative	Healthy	Reasonable	Trustworthy
Alive	Decisive	Hopeful	Receptive	Truthful
Ambitious	Dedicated	Imaginative	Relaxed	Understanding
Anchored	Determined	Ingenious	Reliable	Unique
Assertive	Die-hard	Intelligent	Resourceful	Unstoppable
Assured	Diligent	Knowledgeable	Responsible	Vigorous
Attentive	Doer	Loving	Sensible	Visionary
Bold	Eager	Mature	Skillful	Whole
Brave	Earnest	Open	Solid	Willing
Bright	Effective	Optimistic	Spiritual	Winning
Capable	Energetic	Orderly	Stable	Wise
Careful	Experienced	Organized	Steady	Worthy
Cheerful	Faithful	Patient	Straight	Zealous
Clever	Fearless	Perceptive	strong	Zestful

CRA: Behavioral Skills Training

- Communications Skills
- Problem Solving
- Drink/Drug Refusal
- Sobriety Sampling
- Relapse Prevention
- Anger Management
- Job-Finding Skills

COMMUNICATION SKILLS

The goal of using communication skills is to be able to get your message across to another person to help you get what you want. Using these communication skills should enable individuals to compromise or agree on a solution to a problem. When everyone agrees on a solution, compliance by both sides and contentment with the solution are more likely. It is important to stay positive during the communication skills training and avoid blaming.

Understanding statement. The goal of the understanding statement is to open up communication and show that you are aware of another person's thoughts on a problem. That is:

- ❑ **Come from the other person's perspective.**
Example: "Mom, I understand you would like my room cleaned because it is a real mess, and you would like the house to be clean when friends come over."
- ❑ **Come from your perspective.**
Example: "But Jimmy is having a birthday party at his house, and I have not seen Jimmy for awhile, so I would really like to go."
- ❑ **Make a request (a request should be brief, positive, and specific).**
Example: "I would really appreciate it if you would let me clean my room later tonight, maybe around 8pm when I get home."

Partial responsibility. The goal of the statement of partial responsibility is to avoid blaming the other person. Remember to state how you or the other person see yourselves fitting into the problem or solution. That is:

- ❑ **How do you fit into the problem?**
Example: "I know I made a real mess by not putting my clothes away, and I have not always followed through with cleaning my room, and I am sorry about that."
- ❑ **Repeat the request (optional).**
Example: "But I would really appreciate if you would let me clean my room around 8pm tonight after I get home from Jimmy's party."

Offer to help. The offer to help is used to show that you are willing to work on a solution that works for everyone and that you would like input from others on possible solutions. That is:

- ❑ **Offer several possible solutions.**
Example: "If there is anything I can do to help make that happen – help out with another chore around the house, help out with dinner, or just do a quick 10-minute cleaning for now and do the rest later – I would really appreciate it."
- ❑ **State your openness to listen to and consider the other person's ideas.**
Example: "Or if there is anything that you can think of, I would be willing to listen."

Following the offer to help, individuals may try to compromise on a solution or do some problem solving. It may be necessary to go through the communication skills again to state your point.

Community Reinforcement and Family Training: CRAFT

- CRAFT: Underlying Premises

- ✓ Substance abuse is disruptive to family systems
- ✓ “Family” members play an important role in treatment
- ✓ Changing reinforcers can facilitate behavioral change
- ✓ Possible to impact change even in treatment resistant substance users
- ✓ Does not require detachment from the substance user
- ✓ Direct confrontation of the substance user is not required
- ✓ Significant others can be taught skills to improve their own self-esteem and self-efficacy regardless of whether substance user enters treatment

Community Reinforcement and Family Training: CRAFT

- CRAFT: A Brief Review of the Research
 - ✓ Sisson & Azrin (1986): First randomized clinical trial comparing early version of CRAFT versus Al-Anon approach
 - ✓ Miller, Meyers, & Tonigan (1999): Larger randomized trial funded by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) comparing 1) Al-Anon Facilitation Therapy; 2) Johnson Institute Intervention; 3) CRAFT approach teaching behavioral change skills
 - ✓ Meyers & Smith (1997): Replication of NIAAA study with illicit-drug using clients funded by the National Institute on Drug Abuse (NIDA)

Community Reinforcement and Family Training: CRAFT

- CRAFT: The Findings

- ✓ In the original study (1986), 6 of 7 treatment resistant alcohol abusers entered into treatment after their significant others engaged in CRAFT, while none from the other groups sought help.
- ✓ Also from that study, prior to entering treatment the drinkers whose significant others were in the CRAFT group had already decreased consumption by more than half even before entering treatment.
- ✓ In the NIAAA study, the CRAFT approach saw a rate of engaging treatment resistant drinkers of 64% versus only 13% for the Al Anon condition or 30% for the Johnson Intervention group.
- ✓ In the NIDA study, similar findings were obtained for engaging treatment resistant illicit-drug abusers.

Community Reinforcement and Family Training: CRAFT

- CRAFT: The Procedures
 - ✓ Establishment of trusting therapeutic relationship between concerned significant other (CSO) and CRAFT therapist
 - ✓ Enhance safety of CSO in relationship with substance user
 - ✓ Functional Analyses of both substance user's using and non-using behavior
 - ✓ Enhancing communication between CSO and substance user
 - ✓ Educating CSO about positive and negative reinforcers and how to use them to elicit change in the loved one
 - ✓ Skills training in stress reduction for CSO
 - ✓ Rehearsal of effective ways to suggest treatment
 - ✓ Adequate preparation for immediately available treatment should substance user commit to therapy engagement

CRA: Behavioral Skills Training

- Communications Skills
- Problem Solving
- Drink/Drug Refusal
- Sobriety Sampling
- Relapse Prevention
- Anger Management
- Job-Finding Skills

Problem Solving

(1) Define problem narrowly:

- Help make it very specific (manageable)

(2) Brainstorm possible solutions:

- Help client generate them
- Don't critique them; just encourage lots of ideas
- Don't skimp – come up with at least 5

(3) Eliminate undesired suggestions:

- Have client cross out any unwanted ones (no explanation)

(4) Select one potential solution:

- Have client explain step-by-step how it will be done

Problem Solving (cont'd)

(5) Generate possible obstacles:

- Assist client; probe for more

(6) Address each obstacle:

- If obstacles cannot be addressed - select another solution

(7) Assign task:

- Be sure the task and the time for it to be done is clear

(8) [Next session: Evaluate outcome]:

- Have client describe what was done and how well it worked
- Determine whether the solution needs to be modified
- Discuss obstacles again

Problem Solving Worksheet

1. **Define your problem.** [Just one. Keep it real specific. Write it below.]
2. **Brainstorm possible solutions.** [The more the better! List below.]
3. **Eliminate unwanted suggestions.** [Cross out any that you can't imagine doing yourself.]
4. **Select one potential solution.** [Which one can you imagine yourself doing this week? Circle it.]
5. **Generate possible obstacles.** [What might get in the way of this working? List below.]
6. **Address each obstacle.** [If you can't solve each obstacle, pick a new solution and go through the steps again.]
7. **Make the selected solution for your assignment this week.** [List below exactly when and how you'll do it.]
8. **Evaluate the outcome.** [Did it work? If some changes are needed, list them below and commit to trying it again.]

Drink/Drug Refusal Training

- Review high-risk situations:
 - Discuss upcoming high-risk situations
 - Identify triggers for use
- Enlist social support:
 - Discuss importance of support for abstinence
 - Identify at least one supportive person for the situation being discussed
 - Plan how to ask person for support; practice

Drink/Drug Refusal Training

- Refuse drinks/drugs assertively:
 - Present several (at least 3) options
(examples on next slide)
 - Ask client to put them in his/her own words
 - Role-play (praise, give CRA-specific feedback, shape the response, repeat)

Assertive Drink/Drug Refusal

- [Always watch body language!]
- Say, “No, thanks” (without guilt!)
- Suggest alternatives
- Change the subject
- Hold a non-alcoholic drink in hand
- Address the “aggressor” directly
- Leave

Sobriety Sampling: The Rationale

Select the ones that are most relevant to your client when offering the rationale and make the link to the client's specific situation:

- Enables client to set reasonable and attainable goals
- Teaches self-efficacy when goals are reached

Sobriety Sampling: The Rationale (cont'd)

- Provides “time-out” from drinking/using so client can experience sensation of being clean/sober
- Disrupts old habits, giving chance to replace with new positive coping skills
- Builds family support and trust
- Identifies relapse-prone areas

Sobriety Sampling: The Negotiation

- Suggest a LONG period (90 days?)
- Tie in reasons for such a period (high relapse time; client's reinforcers?)
- Expect that the client will negotiate downward
- Settle on a period of time:
 - be sure it extends at least to the time of the next session
 - but don't make it unreasonably long!

Sobriety Sampling: The Plan for Time-Limited Sobriety

- IS A WITHDRAWAL PLAN NEEDED?
- Load up sessions in the 1st few weeks
- Don't rely on past unsuccessful methods
- Identify biggest threats to sobriety
- Develop a specific plan for maintaining sobriety
- Identify and address obstacles
- Develop a back-up plan
- Remind client of reinforcers for achieving sobriety
- Use positive reinforcement

Sobriety Sampling Checklist

- Gave rationale for sampling sobriety (e.g., forces use of other coping strategies)
- Negotiated a reasonable period of sobriety
 - Common problems: no real negotiation, final period of time settled upon was too long
- Developed a specific plan for maintaining sobriety at least until next session
 - Common problem: obstacles not addressed
- Developed a back-up plan as well
- Reminded client of reinforcers for sobriety

Relapse Techniques

- CRA Functional Analysis for Relapse
- Behavioral “chain” of events
- Early warning monitoring system

Functional Analysis for Relapse

- Separate relapse form is available (but not necessary)
- Focus specifically on the relapse episode (instead of asking about typical using pattern)

A-CRA FUNCTIONAL ANALYSIS - RELAPSE VERSION

Relapse is not an event, it is a process.

External Triggers	Internal Triggers	Behavior	Short-Term Positive Consequences	Long-Term Negative Consequences
<u>Who</u> were you with when you drank/used?	What were you <u>thinking</u> about right before you drank/used?	<u>What</u> did you drink/use? (specifically)	What did you like about drinking/using with _____ (who)?	What were the negative results of your drinking/using in each of these areas:
		<u>How much</u> did you drink/use?	What did you like about drinking/using at _____ (where)?	A) Interpersonal B) Physical
<u>Where</u> did you drink/use?	What did you <u>feel physically</u> right before you drank/used?	<u>How often</u> did you drink/use?	What did you like about drinking/using _____ (when)?	C) Emotional
			What were some of the good <u>thoughts and emotions</u> you had while drinking/using?	D) Legal E) Job
<u>When</u> did you drink/use? (What time of day)	What did you <u>feel emotionally</u> right before you drank/used?	Over <u>how long</u> a period of time did you drink/use?	What were some of the good <u>physical feelings</u> you had while drinking/using?	F) Financial G) Other

Behavioral Chain

- A relapse often “starts” much earlier than the point at which the client actually uses
- Mapping out the chain of events that leads to the relapse will allow for planning for:
 - different small decisions along the way
 - better coping strategies

Behavioral Chain

Bored → need a walk →

Go towards the park → go into park →

Go near friend's house → go into house →

Friend asks you to get high → give in

Using Behavioral Chain Information

- Develop a strategy for addressing 1 or more of the problematic links in the chain
- Don't forget to address the obstacles!

Early Warning Monitoring System

- Explain early warning system and encourage client to set one up
- Help client identify reasonable “monitor”
- Plan the monitor’s desired role
- Role-play making the request to the monitor
- Have the client call the monitor:
 - Invite the monitor to a session, or
 - Set up the system over the phone

Anger Management

- Identify reasons to manage anger better:
 - How has the client's current way of expressing anger created problems for him/her?
- Explain *why* it is valuable to recognize the earliest signs of anger
- Help recognize anger building up:
 - Identify high-risk situations and/or triggers for getting angry
 - Help identify early signs of anger coming on
 - Physical signs (clenched jaw)
 - Behaviors (pacing, sarcastic remarks)

Anger Management (cont'd)

- Find relevant “cool down” activities:
 - Help client come up with a “cool down” phrase
 - Have client leave situation briefly (if possible) & engage in a planned activity
 - Have client explain when he/she will return to talk
- Practice communication skills in the process
- Focus on empathy:
 - Ask client to imagine situation from other person’s point of view (reverse role-play?)
 - Ask client what he/she thinks the other person was thinking & feeling in that situation
- Give Anger Management handout to take home

ANGER MANAGEMENT

Remember, it's okay to get angry. What is important is how your emotions are expressed. Below are some tips for anger management.

- **How has anger interfered with your life?** What would you like to change?

- **How do you know when you are getting angry?** (Typical signs are an upset stomach, clenched jaw, tightened fist.) If you feel you are beginning to get angry, you can do something before the situation becomes too tense and leads to negative consequences.

Write your typical signs here: _____

- **Take time to cool down.** Find an activity or spend time away from the situation so you are able to calm down and handle the situation in a way that does not have negative consequences.

- **Remember to use communication skills to help express how you feel, while trying to see how the other person feels.** Try to come to a common solution instead of forcing your decisions on someone else. See the *Communications Skills* sheet.

- **Try to come from the other person's perspective.** Why does the person feel the way he or she does?

Anger Management Checklist

- Identify reinforcers to manage anger
- Assist in recognizing anger
 - Common problem: forgetting to ask about the advantage of knowing the *earliest* signs of anger
- Teach taking time to “cool down”
- Teach fostering empathy
 - Common problem: not probing sufficiently when asking about the other person’s thoughts/feelings
- Gave client “Anger Management” handout

CRA FUNCTIONAL ANALYSIS FOR NONDRINKING BEHAVIOR (_____)
(behavior/activity)

Triggers		Behavior	Short-Term Positive Consequences	Long-Term Positive Consequences
External	Internal			
<p>1. <u>Who</u> are you usually with when you _____? (behavior/activity)</p> <p>2. <u>Where</u> do you usually _____?</p>	<p>1. What are you usually <u>thinking</u> about right before you _____? (behavior/activity)</p> <p>2. What are you usually <u>feeling physically</u> right before you _____?</p>	<p>1. <u>What</u> is the nondrinking behavior/activity?</p> <p>2. <u>How often</u> do you usually _____?</p>	<p>1. What do you dislike about _____ (behavior/activity) with _____? (who)</p> <p>2. What do you dislike about _____? (where)</p> <p>3. What do you dislike about _____? (when)</p>	<p>1. What are the negative results of your drinking in each of these areas:</p> <p>a) Interpersonal:</p> <p>b) Physical:</p> <p>c) Emotional:</p>

(behavior/activity)

External

Internal

Behavior

Long-Term Positive Consequences

<p>3. <u>When</u> do you usually _____?</p>	<p>3. What are you usually <u>feeling emotionally</u> right before you _____?</p>	<p>3. <u>How long</u> _____ usually last?</p>	<p>4. What are some of the unpleasant <u>thoughts</u> you usually have while you are _____?</p> <p>5. What are some of the unpleasant <u>physical feelings</u> you have while you are _____?</p> <p>6. What are some of the unpleasant <u>emotional feelings</u> you have while you are _____?</p>	<p>d) Legal:</p> <p>e) Job:</p> <p>f) Financial:</p> <p>g) Other:</p>
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CRA References

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