

MAP Direct Services Training Series

Workshop Day 3

The MAP System: Managing and Adapting Practice



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Q&A and Homework Review

- Anxiety Dashboard Review

WELCOME BACK!

Practice Delivery: Trauma and Depression

Trauma Focus

Practice Delivery

Agenda

- Day 2 Review
- Practice delivery: Trauma focus
 - Introduce and rehearse practice elements
- Practice delivery: Depression focus
 - Introduce and rehearse practice elements
 - Continue practicing clinical dashboard skills

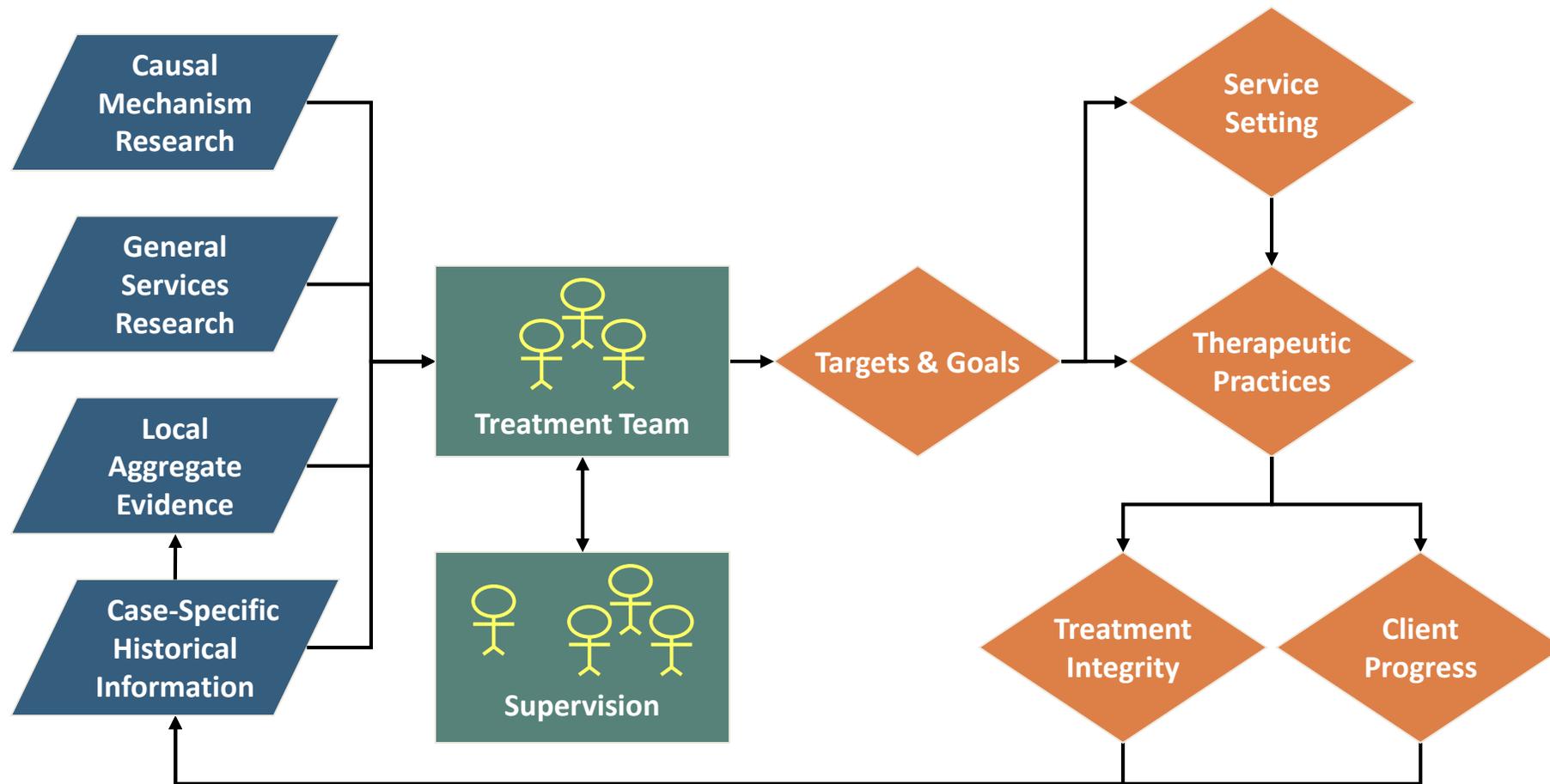
Day 2 Review

What Did We Learn Yesterday?

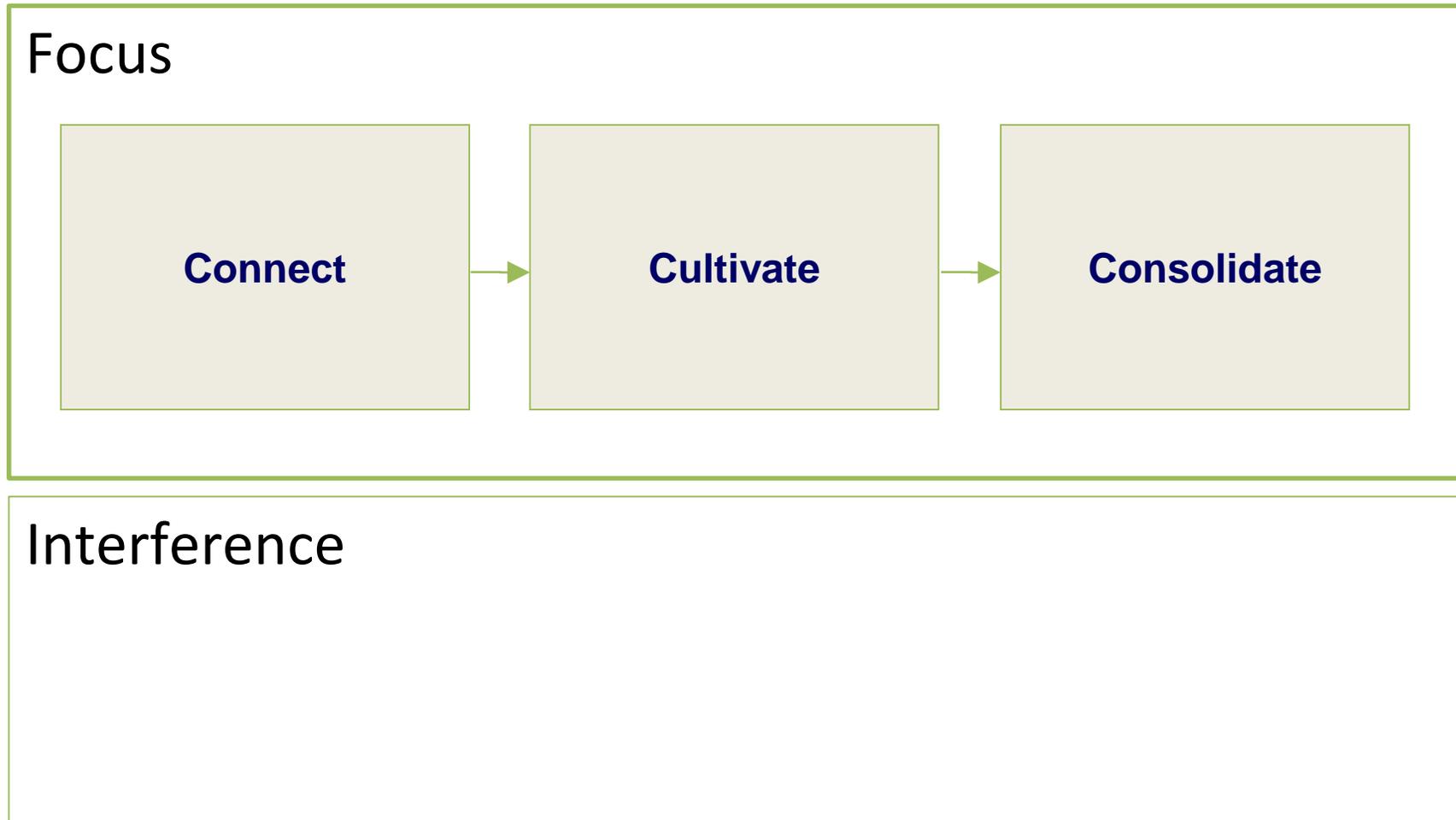
- Psychoeducation for Anxiety
- Self-monitoring and the fear ladder
- Exposure

Let's talk about how these are adapted for Trauma.

EBS System Model



Treatment Planner



Psychoeducation: Trauma

Caregiver and Youth



Group Discussion



- ▣ Youth you see who have experienced trauma
 - ▣ Age
 - ▣ Gender
 - ▣ Presenting symptoms
 - ▣ Anything that could get in the way of treatment? Possible interferences?

Psychoeducation: Trauma

- ❑ Define “trauma;” build a shared vocabulary
- ❑ Gauge the youth’s current understanding of trauma
- ❑ Provide factual information about type(s) of trauma the youth experienced:
 - ❑ Sexual assault/sexual abuse
 - ❑ Physical or emotional/verbal abuse
 - ❑ Neglect
 - ❑ Other (e.g., community violence, assault, car accident)

Psychoeducation: Trauma

- Describe and normalize symptoms of traumatic stress
 - Hyper-arousal
 - Re-experiencing
 - Avoidance
 - Pervasive changes in mood or thinking (e.g., anxiety, guilt, shame)

Psychoeducation: Trauma

- Validate previous responses to the trauma
 - Praise efforts to stay safe in the situation
- Explain the role of avoidance in maintaining traumatic stress
 - Discuss alarm metaphor as it relates to traumatic stress (alarm is perpetually going off)

Information About Treatment

- ❑ Discuss typical treatment course, for example:
 - ❑ Psychoeducation
 - ❑ Skills (e.g., self-monitoring, relaxation, personal safety)
 - ❑ Exposure and trauma narrative (“tell your story”)
 - ❑ Cognitive reprocessing
- ❑ Describe a typical response to treatment
 - ❑ Symptoms could temporarily worsen before getting better
 - ❑ Consider illustrating with a metaphor, such as “cleaning out an infected wound”

Information About Treatment

- Describe a typical response to treatment
 - Symptoms could temporarily worsen before getting better
 - Consider illustrating with a metaphor
 - “Cleaning out an infected wound”

Ideas for Monitoring with Trauma

- ❑ What are some examples of symptoms, behaviors, events, etc., to monitor when the focus is Trauma?
- ❑ How would you measure each of these examples?

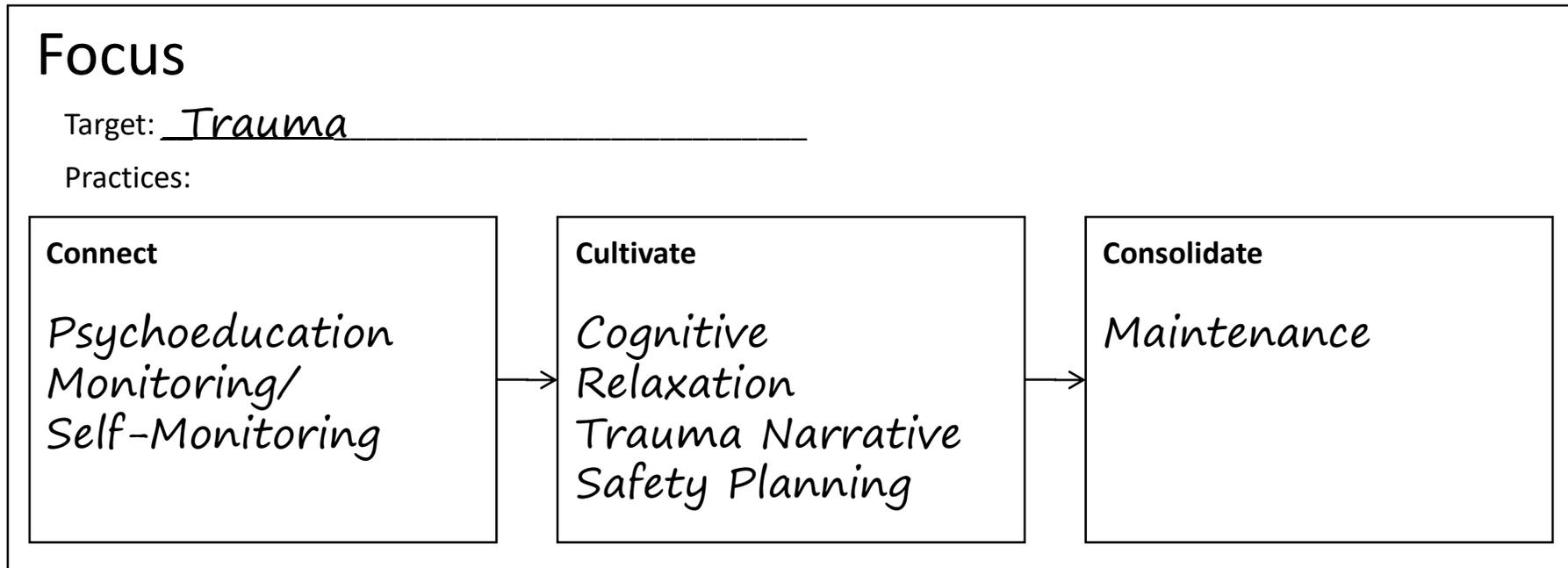
Fear Ladder Within Trauma

- ❑ Fear ladder composed of "trauma reminder" items
 - ❑ Inaccurately associated with traumatic event, not reminders that are dangerous
 - E.g., all playgrounds for a youth abused on a playground
 - E.g., all men for a youth whose assailant was male
- ❑ Actual people and places involved in the traumatic event that may be dangerous are not included
- ❑ Generally done after completion of the trauma narrative

Trauma Practice Elements

- Let's look in PWEBS to find the most common practice elements for Trauma

Trauma Practice Elements



Trauma Narrative

I found out who my true friends are.

I found out how strong I was.



Narrative: Trauma Essentials

Tell the Story

- Select format

Narrative: Trauma Essentials

Tell the Story

- Select format
- Recount the story – easy to hard

Narrative: Trauma Essentials

Tell the Story

- Select format
- Recount the story – easy to hard
- Worst moment

Decide Format

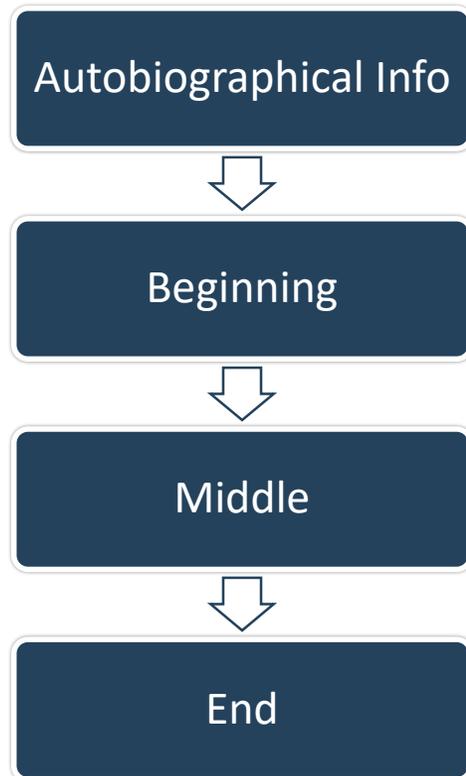
Single Traumatic Event

- Poem/song
- Drawing
- Written story
- Comic strip

Chronic/Multiple Traumatic Events

- Timeline
- Series of drawings
- Comic book
- Chapter book

Example Chapters



Chapter	Rating
Me and My Family	1
Mom and Dad Fighting	3
The Worst Fight	8
The Worst Part	10
When the Police Came	8
What Life is Like Now	4

Throughout the Narrative

- Take ratings
 - Come up with a rating scale for the distress
 - Practice with sample anchors
 - Make sure the youth can use the full range of the scale
- Encourage self-monitoring and use of coping skills
- Praise bravery and effort
- Remember pace will vary by youth
- Stay quiet; do not distract or 'rescue' the youth

Narrative: Trauma Essentials

Tell the Story

- Select format
- Recount the story – easy to hard
- Worst moment

Retell the Story

- Add thoughts, feelings, sensations

Narrative: Trauma Essentials

Tell the Story

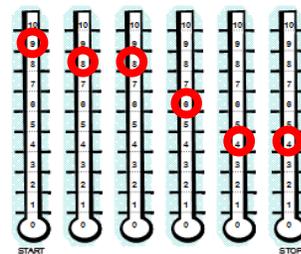
- Select format
- Recount the story – easy to hard
- Worst moment

Retell the Story

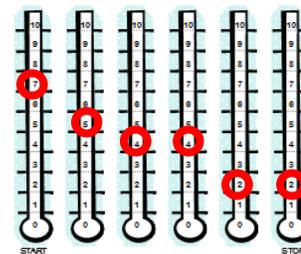
- Add thoughts, feelings, sensations
- Continue until distress lessens

Retell the Story

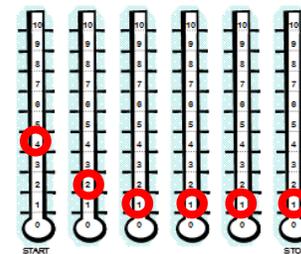
- Continue retelling until distress lessens
 - May take multiple sessions
- Habituation
 - Help youth get used to the upsetting memories
 - Downward trend in ratings



Date: 7/8/15; trial 1
Item: Read Story



Date: 7/8/15; trial 2
Item: Re-read Story



Date: 7/8/15; trial 3
Item: Re-read Story

Narrative: Trauma Essentials

Tell the Story

- Select format
- Recount the story – easy to hard
- Worst moment

Retell the Story

- Add thoughts, feelings, sensations
- Continue until distress lessens

Cognitive Processing

- Directly address unhelpful thoughts

Narrative: Trauma Essentials

Tell the Story

- Select format
- Recount the story – easy to hard
- Worst moment

Retell the Story

- Add thoughts, feelings, sensations
- Continue until distress lessens

Cognitive Processing

- Directly address unhelpful thoughts
- Make meaning

Narrative: Trauma Essentials

Tell the Story

- Select format
- Recount the story – easy to hard
- Worst moment

Retell the Story

- Add thoughts, feelings, sensations
- Continue until distress lessens

Cognitive Processing

- Directly address unhelpful thoughts
- Make meaning
- Share with a supportive adult

Narrative: Trauma Essentials

Tell the Story

- Select format
- Recount the story – easy to hard
- Worst moment

Retell the Story

- Add thoughts, feelings, sensations
- Continue until distress lessens

Cognitive Processing

- Directly address unhelpful thoughts
- Make meaning
- Share with a supportive adult

Cognitive Processing

- Ensure youth understands difference between helpful and unhelpful thoughts
- Find unhelpful thoughts in the story
- Encourage the youth to replace the unhelpful thought with a helpful thought
 - Self-blame
 - Probability overestimation
- Use proper vocabulary and terms

Making Meaning

What is life like now?

What are some things you learned after the traumatic event?

What would you tell another youth who was in a similar situation as you?

Who are some of the people who really supported you after the traumatic event?

What are some things you found to be helpful in therapy?

Share with a Supportive Adult

- ❑ Collaboratively pick an adult
- ❑ Discuss what will be shared
- ❑ Prepare the adult ahead of time
- ❑ Prepare a list of questions and responses
- ❑ Share with adult together in session

Model: Trauma Narrative

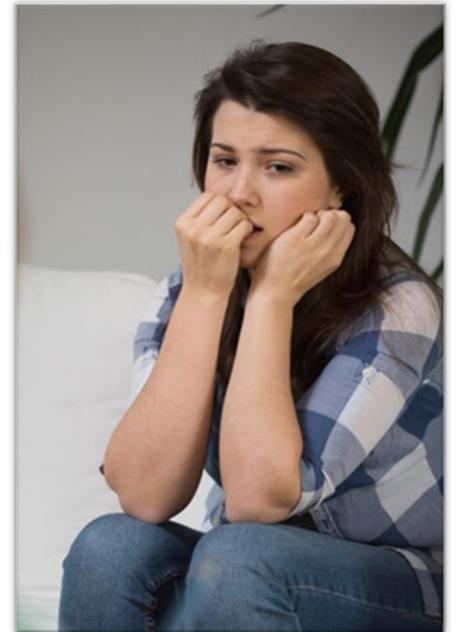
- ❑ 10-year-old boy with history of witnessing domestic violence
 - ❑ Caregiver reports that client has nightmares and has become physically aggressive with her since witnessing the event
- ❑ Have provided psychoeducation and worked on relaxation
- ❑ 6th session, working phase of the meeting
- ❑ Our task
 - ❑ Begin describing the traumatic event at the focus of the narrative
 - ❑ Incorporate scale for self-monitoring (take ratings)
 - ❑ Avoid challenging concerning cognitions (e.g., self-blame)

Role Play: Trauma Narrative

- 10-year-old boy with history of witnessing domestic violence
 - Caregiver reports that client has nightmares and has become physically aggressive with her since witnessing the event
- Child has completed first chapter of narrative
- 6th session, working phase of the meeting
- Your task
 - Client continues describing the event
 - Continue to take ratings for self-monitoring
 - Do not challenge concerning cognitions (e.g., self-blame)

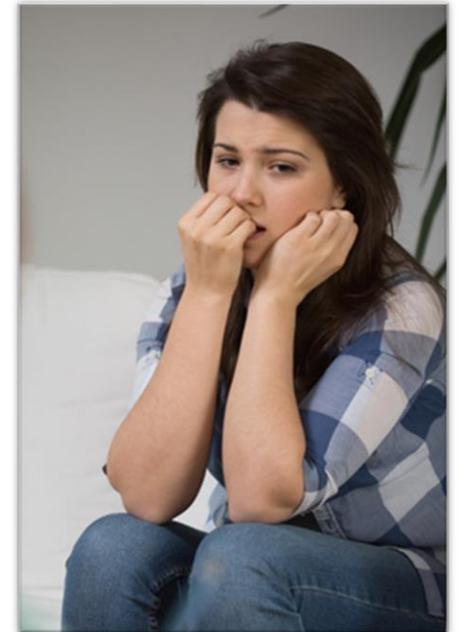
Concerns and Challenges

- Will it re-traumatize the youth?



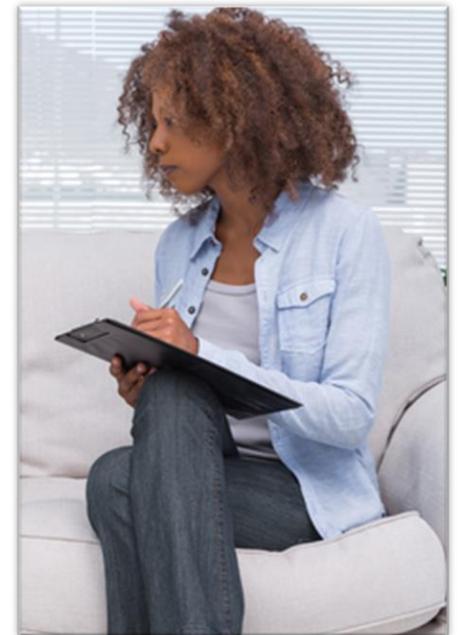
Concerns and Challenges

- ❑ Will it re-traumatize the youth?
 - ❑ You are not creating memories; the memories are already there and getting in the way
 - ❑ Emphasis is on gradual retelling so as NOT to overwhelm the youth – start low and go slow!



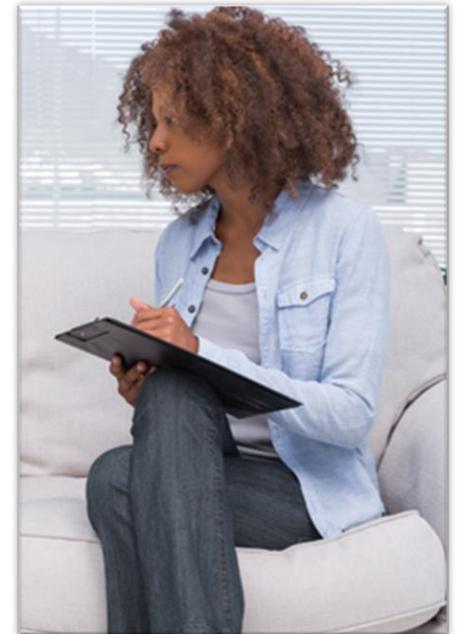
Concerns and Challenges

- What if I find it too upsetting?



Concerns and Challenges

- What if I find it too upsetting?
 - Seek consultation
 - Focus on how you are helping the youth to learn that memories are not dangerous



Concerns and Challenges

- Will I appear to be tampering with a witness?



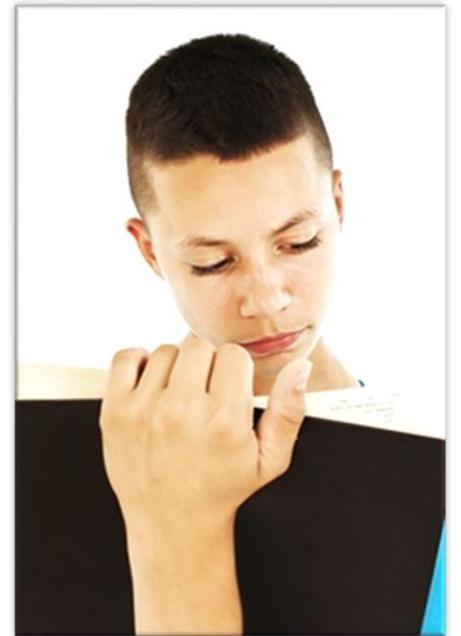
Concerns and Challenges

- ❑ Will I appear to be tampering with a witness?
 - ❑ Relates to the forensic process, more so than treatment
 - ❑ Do not lead youths or suggest details about their experiences
 - ❑ Document clearly



Concerns and Challenges

- What should I do with the narrative once it is finished?



Concerns and Challenges

- ❑ What should I do with the narrative once it is finished?
 - ❑ Do not let it leave your custody; it could be shared inappropriately
 - ❑ Could offer to let the youth destroy it in a symbolic or meaningful way



Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
Psychoed: Trauma- Child	✓		✓			
Trauma Narrative	✓	✓	✓			

DIRECT SERVICE LEARNING RECORD

CONCEPTS	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
EBS System Model	<input type="checkbox"/>					
CARE Process	<input type="checkbox"/>					
The MAP	<input type="checkbox"/>					
Connect-Cultivate-Consolidate	<input type="checkbox"/>					
Focus-Interference	<input type="checkbox"/>					
Clinical Event Structure	<input type="checkbox"/>					
Embracing Diversity	<input type="checkbox"/>					
RESOURCES	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
PWEBS	<input type="checkbox"/>					
Practitioner Guides	<input type="checkbox"/>					
Clinical Dashboard	<input type="checkbox"/>					
Treatment Pathways						
Focus Area 1: _____	<input type="checkbox"/>					
Focus Area 2: _____	<input type="checkbox"/>					
APPLICATIONS	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
Assessment	<input type="checkbox"/>					
Monitoring	<input type="checkbox"/>					
Planning	<input type="checkbox"/>					
Practice Delivery						
Practice 1: _____	<input type="checkbox"/>					
Practice 2: _____	<input type="checkbox"/>					
Practice 3: _____	<input type="checkbox"/>					
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Practice 14: _____	<input type="checkbox"/>					
Practice 15: _____	<input type="checkbox"/>					
Practice 16: _____	<input type="checkbox"/>					
Practice 17: _____	<input type="checkbox"/>					
Practice 18: _____	<input type="checkbox"/>					

Personal Safety Skills



Personal Safety Skills

- Can be used in context of trauma, but also can be useful in other contexts
 - Examples?
- Important to identify current safety issues
 - If youth experienced traumatic event, normalize and validate previous response to keep oneself safe

Personal Safety Skills Essentials



Personal Safety Skills

- ❑ Validate previous attempts to keep oneself safe
- ❑ Provide information specific to safety concern
 - ❑ E.g., abuse, domestic violence, fire-setting, self-harm
- ❑ Address cues signaling unsafe situations
 - ❑ Draw on Psychoeducation for Anxiety
 - ❑ If no external cues, focus on feelings as cues



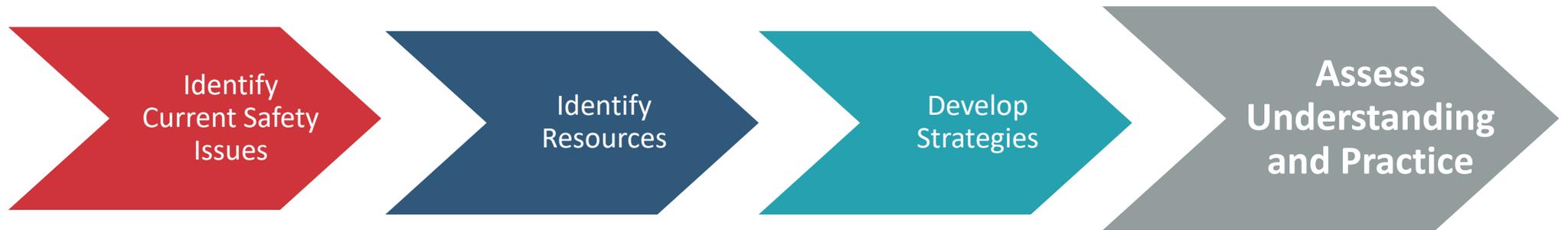
Personal Safety Skills Essentials



Personal Safety Skills Essentials



Personal Safety Skills Essentials



Personal Safety Skills Essentials



Types of Personal Safety Skills

Abuse

- Setting boundaries
- Okay and not okay touch
- Not keeping secrets

Risky Behaviors

- Monitoring
- Preventing access to dangerous materials or substances

Violence

- Safe people and places
- Avoid being alone
- Locking doors

Learning Record Update

MAP Therapist Portfolio

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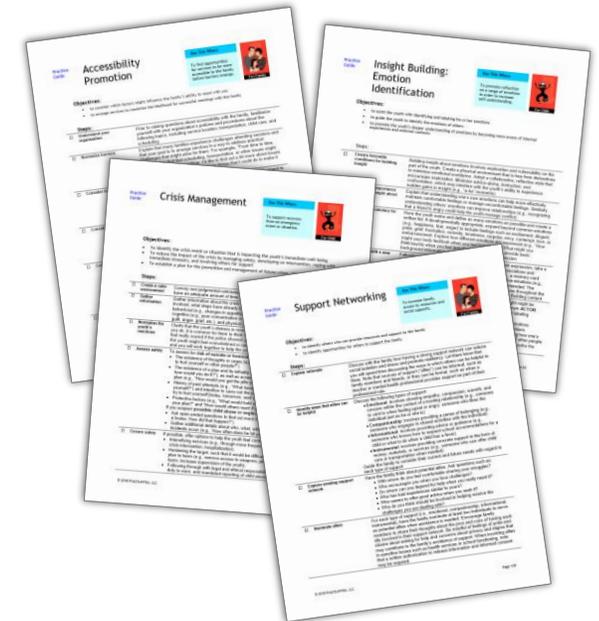
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Personal Safety	✓		✓			

DIRECT SERVICE LEARNING RECORD

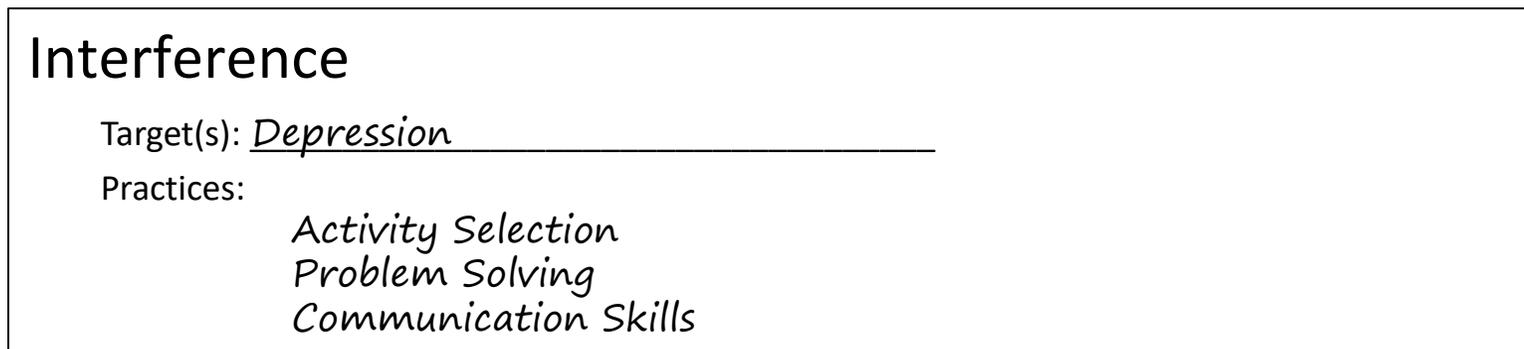
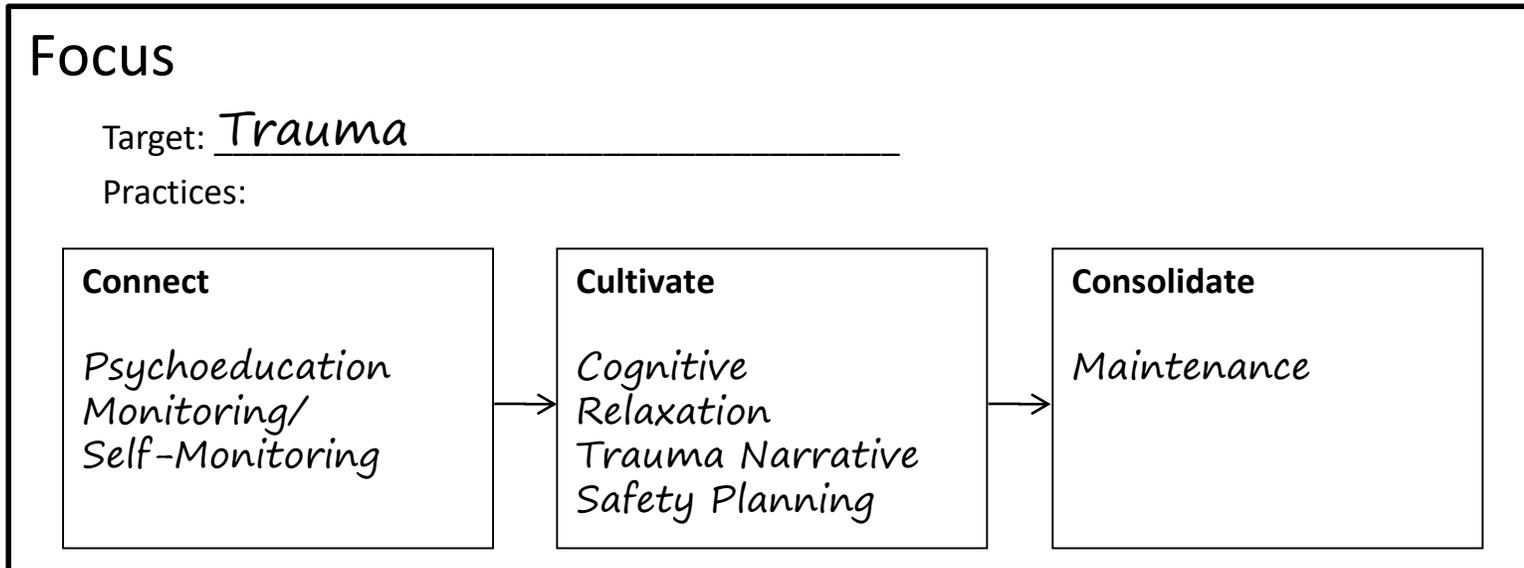
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Related Practices

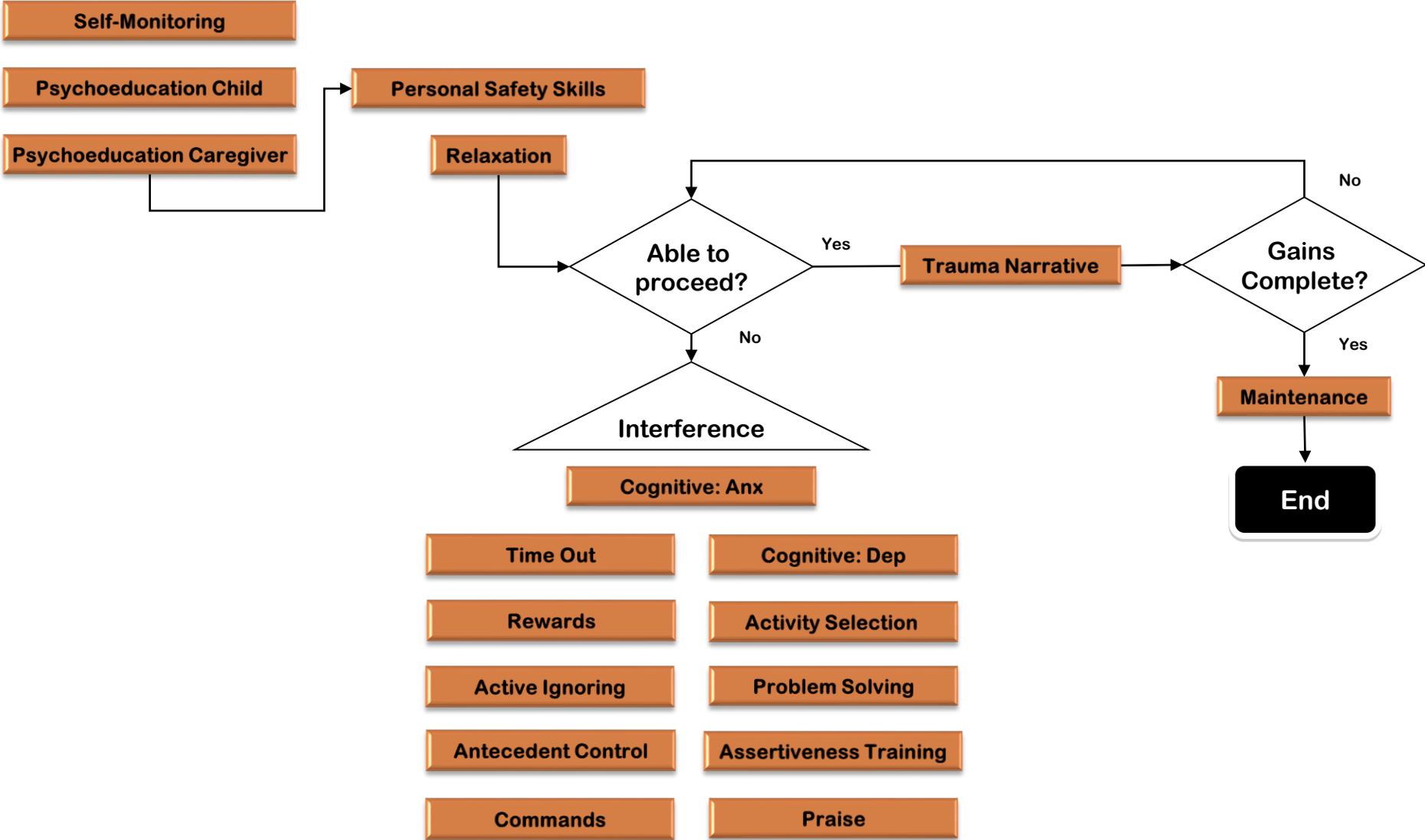
PWEBS	Practice Guide
Crisis Management	Crisis Management
Support Networking	Support Networking
Insight Building	Insight Building: Emotion Identification
Accessibility Promotion	Accessibility Promotion



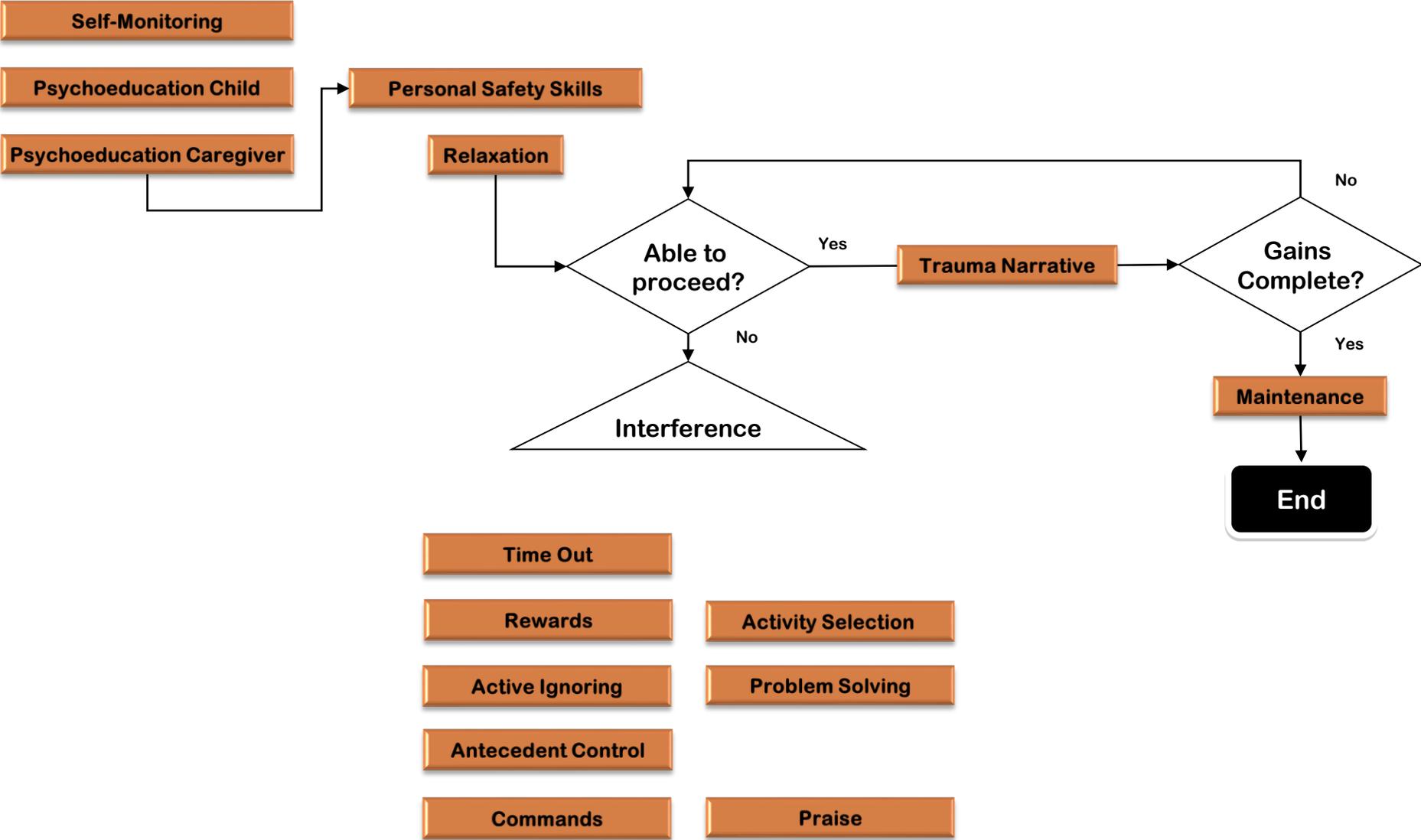
Treatment Planner



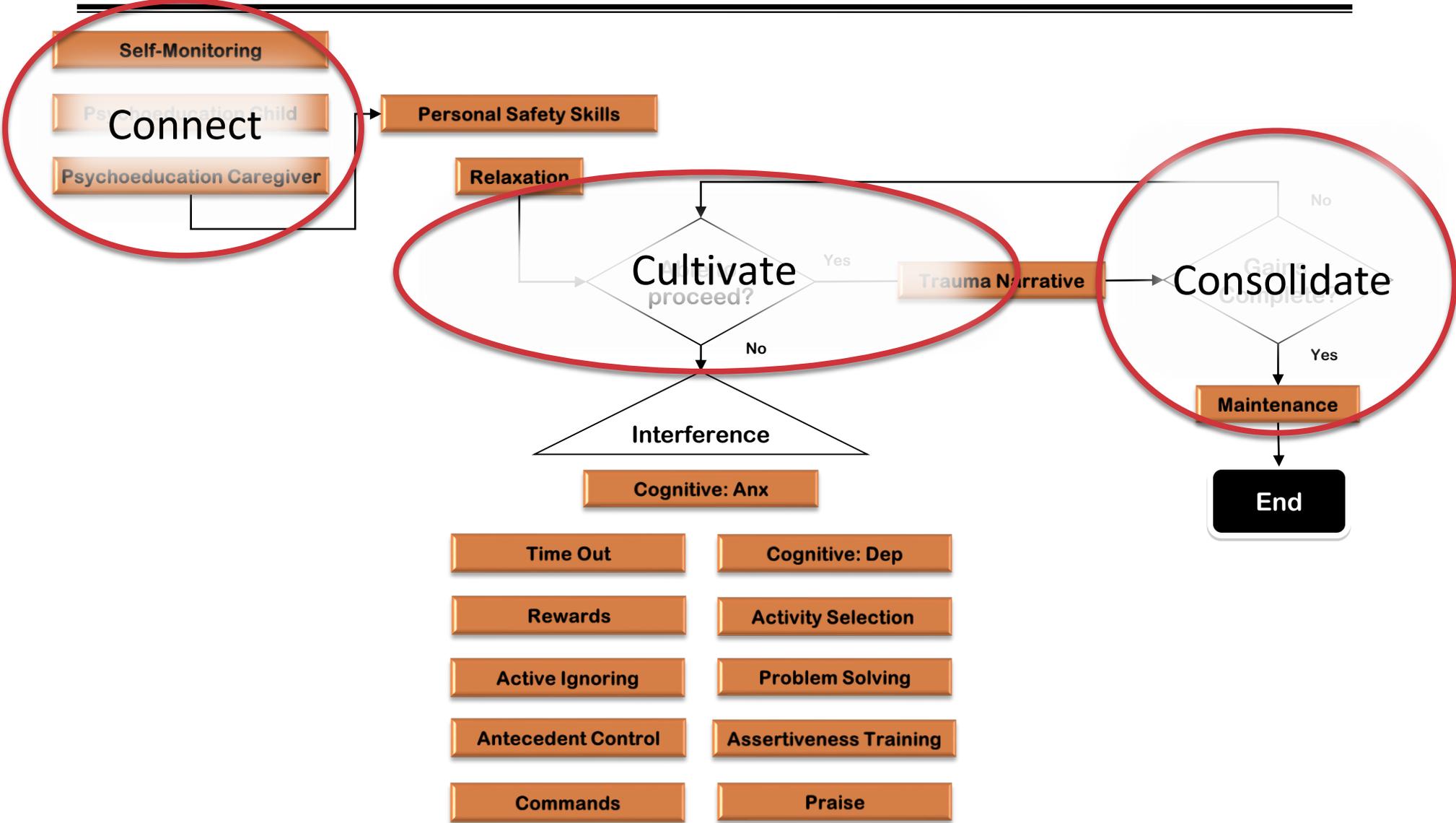
Treatment Pathway: Trauma



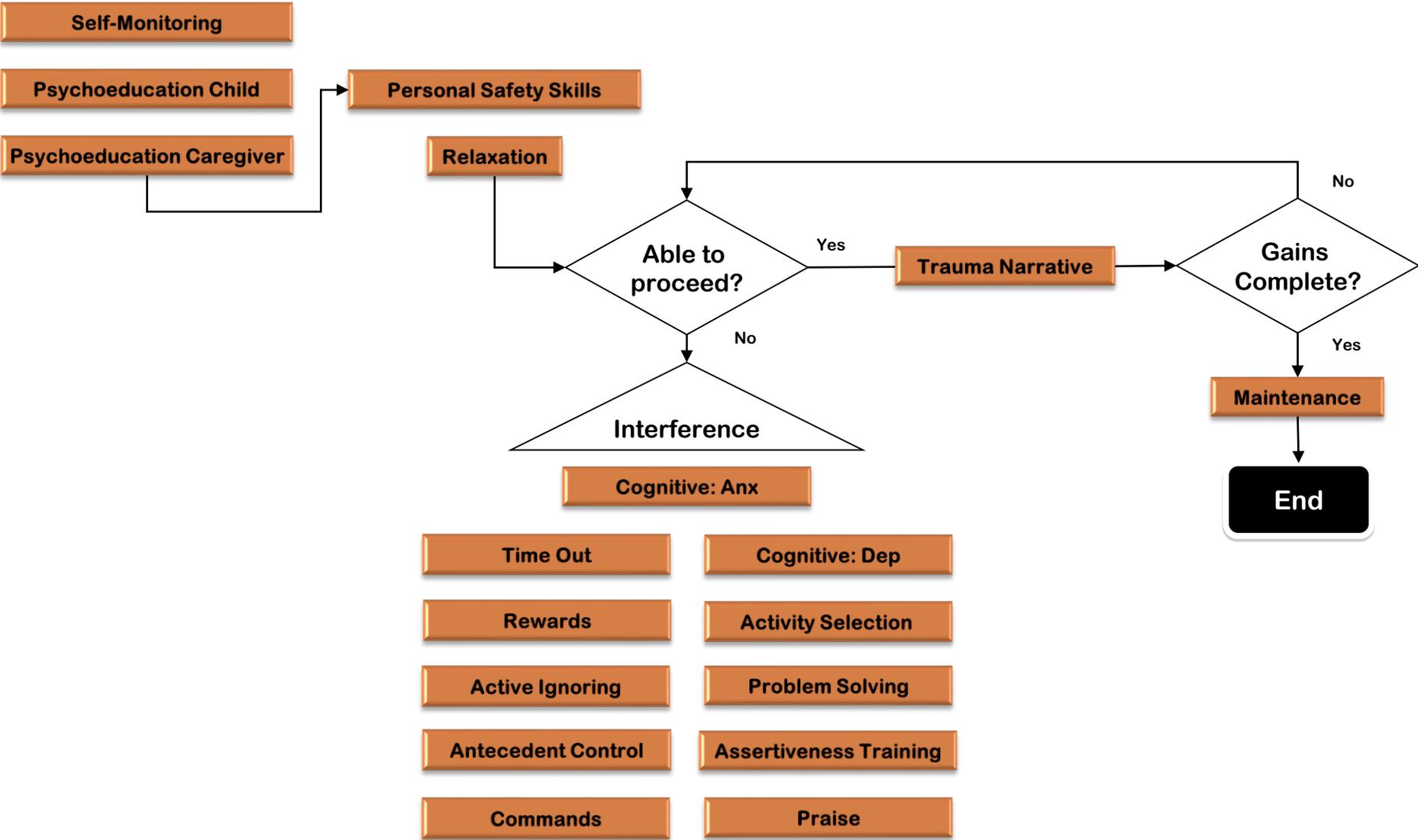
Treatment Pathway: Trauma (Younger)



Treatment Pathway: Trauma



Treatment Pathway: Trauma



Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

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Trauma	✓		✓			

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Practice 18: _____	<input type="checkbox"/>					

Practice Delivery: Depression Focus

Check Your Learning

- ❑ Go to your training event page
- ❑ Click on the Knowledge Tests link in the upper left corner
- ❑ Scroll down to Problem-Solving True-False **PRE**-Test

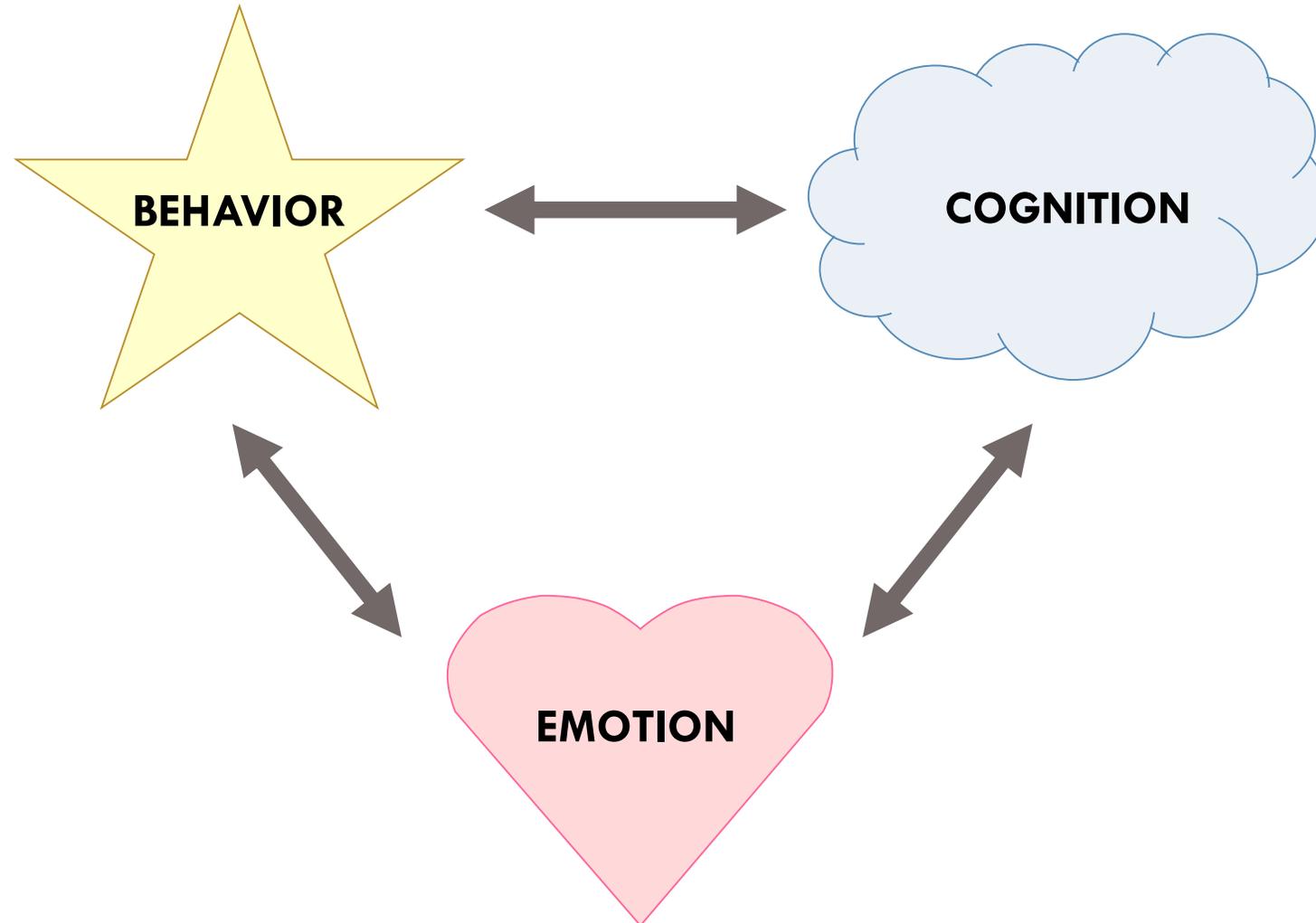
Think of a Case (10 minutes)



- ❑ Identify a case from one of your caseloads that has a focus problem of Depression
- ❑ Discuss case history with group
- ❑ Download a Clinical Dashboard and save out as:
 - ❑ YOUR LAST NAME_CLIENT ID_TODAY'S DATE
- ❑ Write down:
 - ❑ Client “fake name”
 - ❑ Age, gender, ethnicity
 - ❑ Diagnoses/presenting problem(s)
 - ❑ Psychosocial/family history

Depression Practice Elements: Background

The CBT Model: Revisited



Primary-Secondary Coping Model

- Primary control
 - **Influence** objective conditions
 - Targets are people, objects, events, circumstances, problems
- Secondary control
 - **Adapt to** objective conditions, so as to influence their subjective impact
 - Targets are our wishes, expectations, goals, beliefs, attitudes

Treatment Rationale: Skill Deficits in Youth Depression

- ❑ Poor problem-solving
- ❑ Poor activity selection
- ❑ Tension and poorly-developed self-soothing
- ❑ Unengaging social style
- ❑ Underdeveloped peer-valued skills

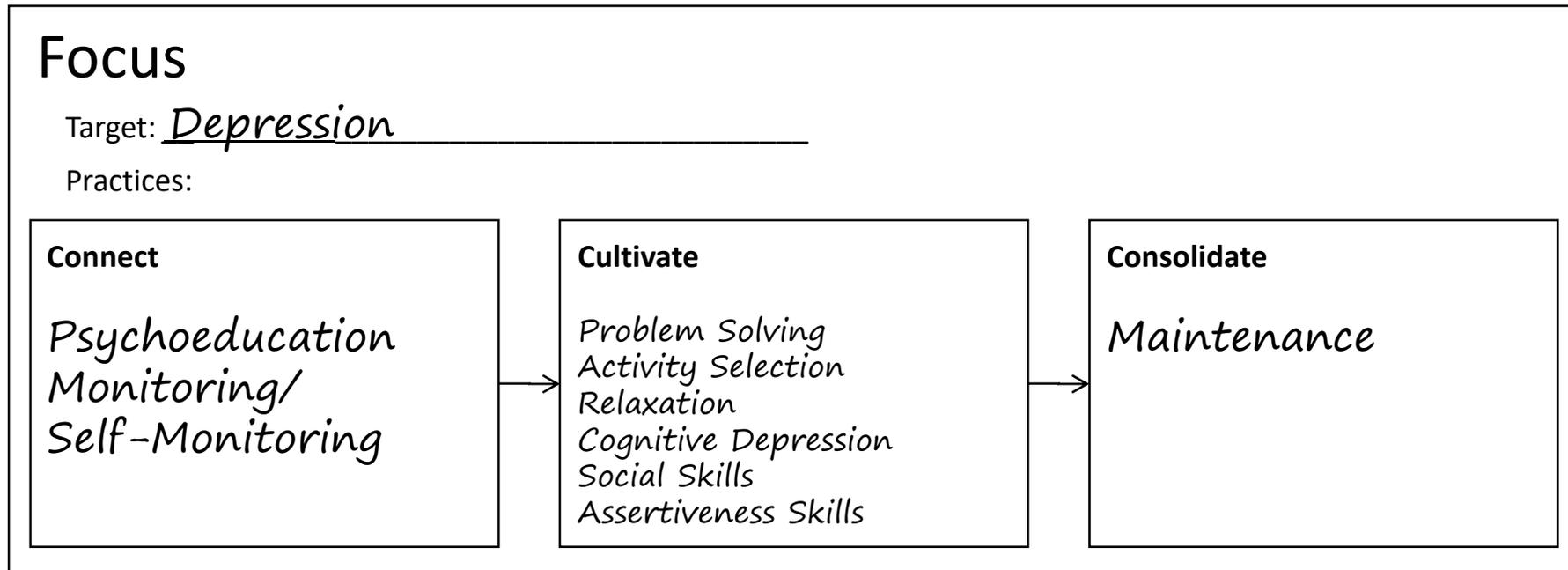
Treatment Rationale: Habits of Thought in Youth Depression

- ❑ Negative (depressogenic?) cognitions
- ❑ Rumination over adverse events
- ❑ Perceived helplessness
 - ❑ Low-level perseverance in coping

Depression Practice Elements

- Let's look in PWEBS to find the most common practice elements for Depression

Depression Practice Elements



Psychoeducation: Depression

Caregiver and Child



Psychoeducation for Depression

- Normalize sad feelings
- Discuss factors contributing to sadness
- Depression is episodic problem
- Outline treatment model for depression
 - Things we can do
 - Ways we can think
- Introduce monitoring mood

Information About Treatment Process

- Describe structure and flow of treatment
 - How many sessions?
 - What will meetings be like?
- Emphasize importance of practice use of skills
 - Homework
- Discuss parent involvement

Ideas for Monitoring Within Depression

- ❑ Self-rating of level of “sadness” or “depressed mood”
 - ❑ Knowing youth’s experience of depression important for defining the points on this scale
 - ❑ What does a 10 look or feel like to this youth?
 - ❑ May have them describe their “best” vs. “worst” moods or days
- ❑ Caregiver may monitor
 - ❑ Episodes of “depressive” behaviors such as:
 - Crying
 - “Shutting down”
 - Irritability
 - Time spent in isolation

Ideas for Monitoring Within Depression

- Caregiver may monitor
 - Episodes of “depressive” behaviors such as:
 - Crying
 - “Shutting down”
 - Irritability
 - Time spent in isolation

Activity: Goals to Measures

Large Group Activity

Goals to Measures



- ❑ Pull up your Clinical Dashboard
 - ❑ Go to the Notes page
- ❑ Write down three treatment goals relevant to your client's depression
- ❑ Translate the goal to an idiographic measure
- ❑ Select one or two measures that will be monitored
- ❑ Which objective (standardized) measure(s) will you want to add?

Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

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Psychoed: Depression- Child	✓		✓			

DIRECT SERVICE LEARNING RECORD

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Embracing Diversity	<input type="checkbox"/>					
RESOURCES	Experience		Expertise Achieved			
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Practice 16: _____	<input type="checkbox"/>					
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Practice 18: _____	<input type="checkbox"/>					

Problem Solving



Pre-Role Play: Problem Solving

- 14 year old depressed girl

“My mom and dad won’t let me go out and be with my friends. Things have been bad for me since we moved here from New Jersey.”

- 4th session, working phase of the meeting

- Your task

- Without using the PG, do 10 minutes of problem solving

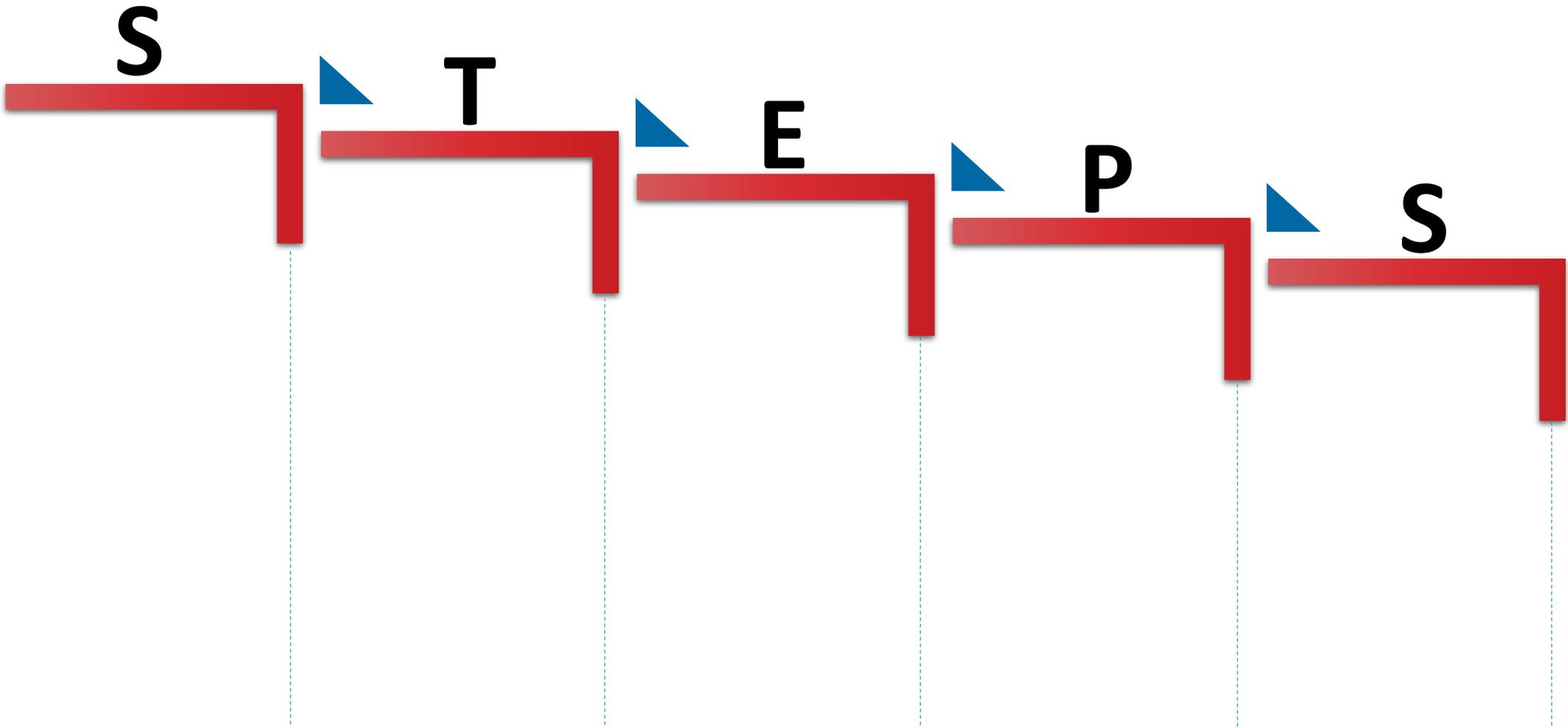
Debrief Yourself

- Now look at the PG and see which items in the checklist you did

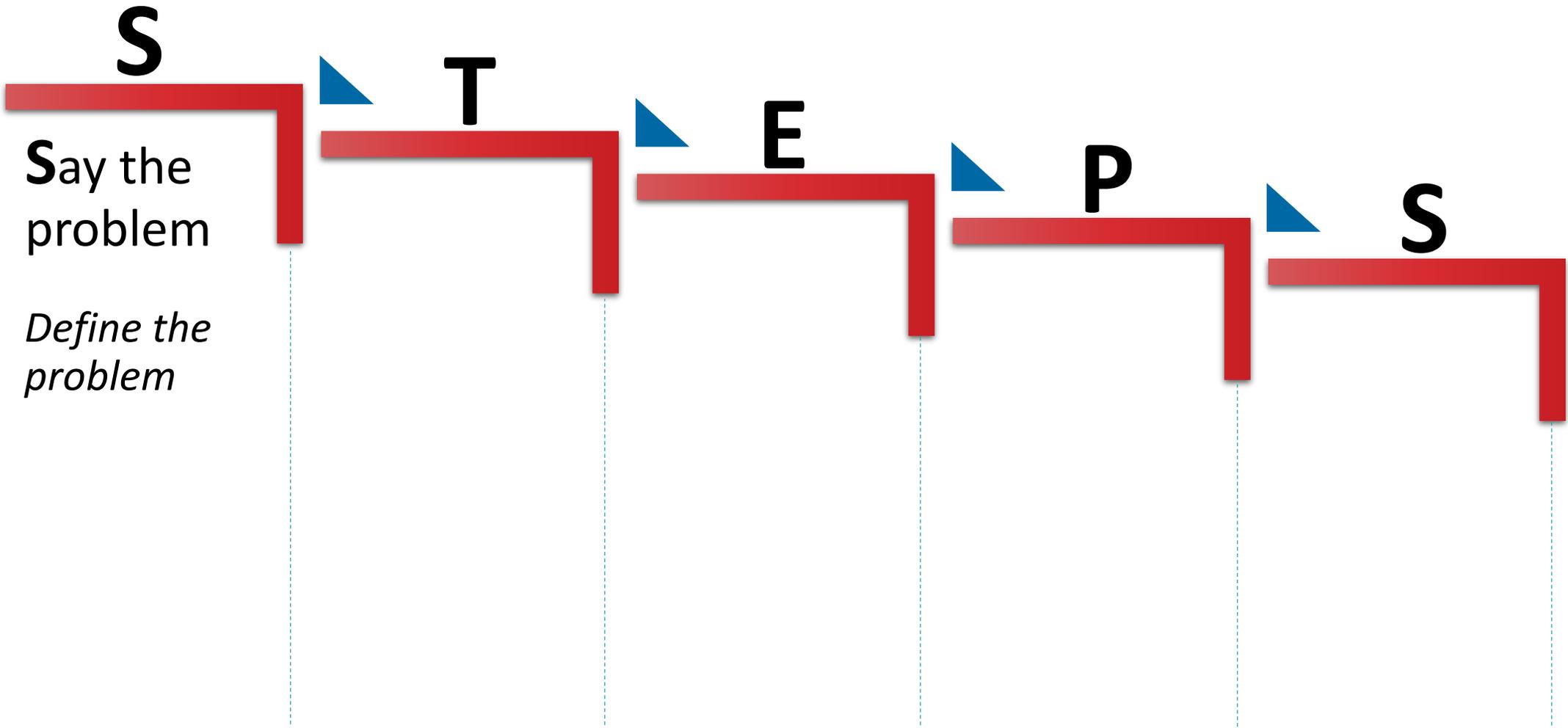
Why Use Problem Solving?

- ❑ Decreases helplessness
- ❑ Increases sense of control and likelihood of positive action
 - ❑ Eliminate short-circuited solutions
 - ❑ Try new solutions (not just first that comes to mind)
 - ❑ Encourage perseverance – have a Plan B, C, and D
- ❑ Can be used with variety of clinical targets
- ❑ Problems can be broken down into small steps

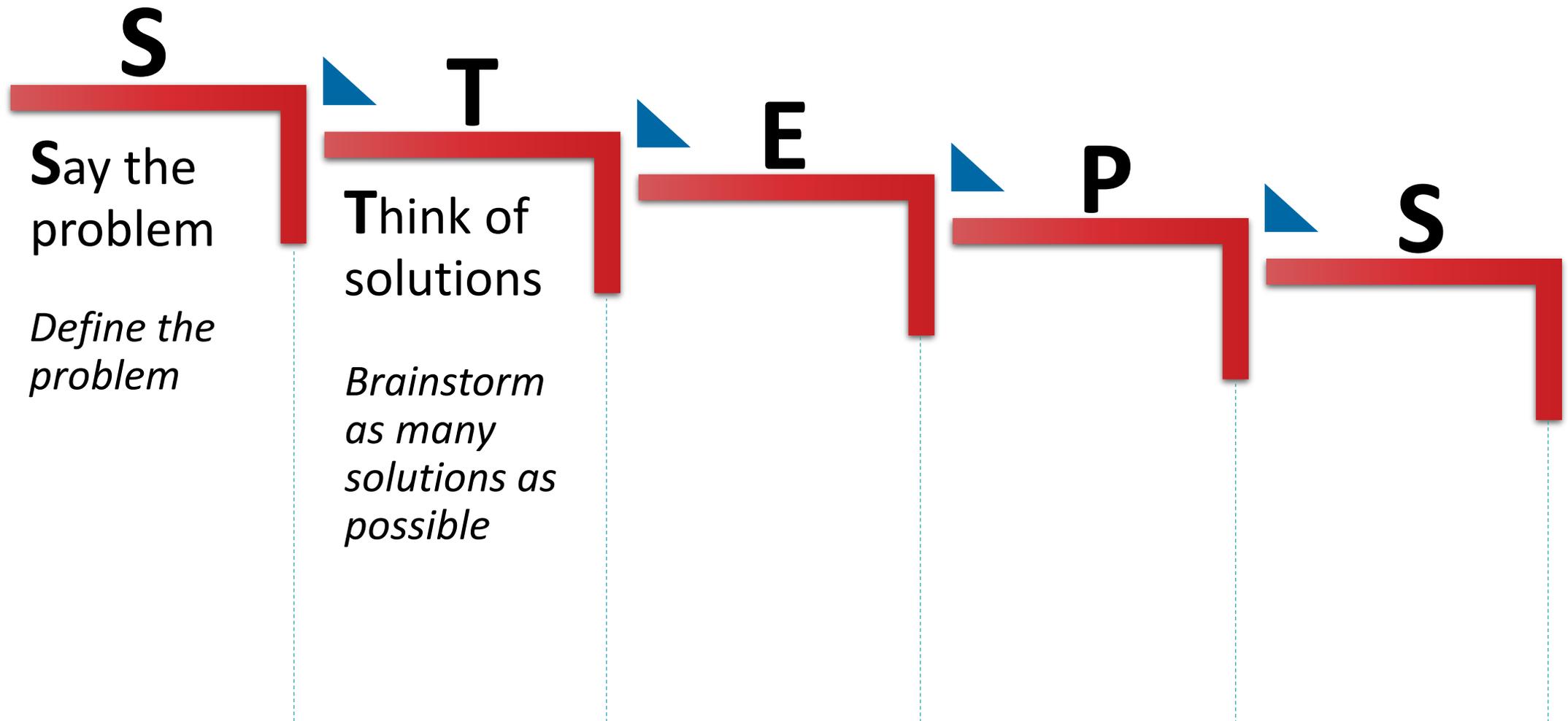
Problem Solving Essentials



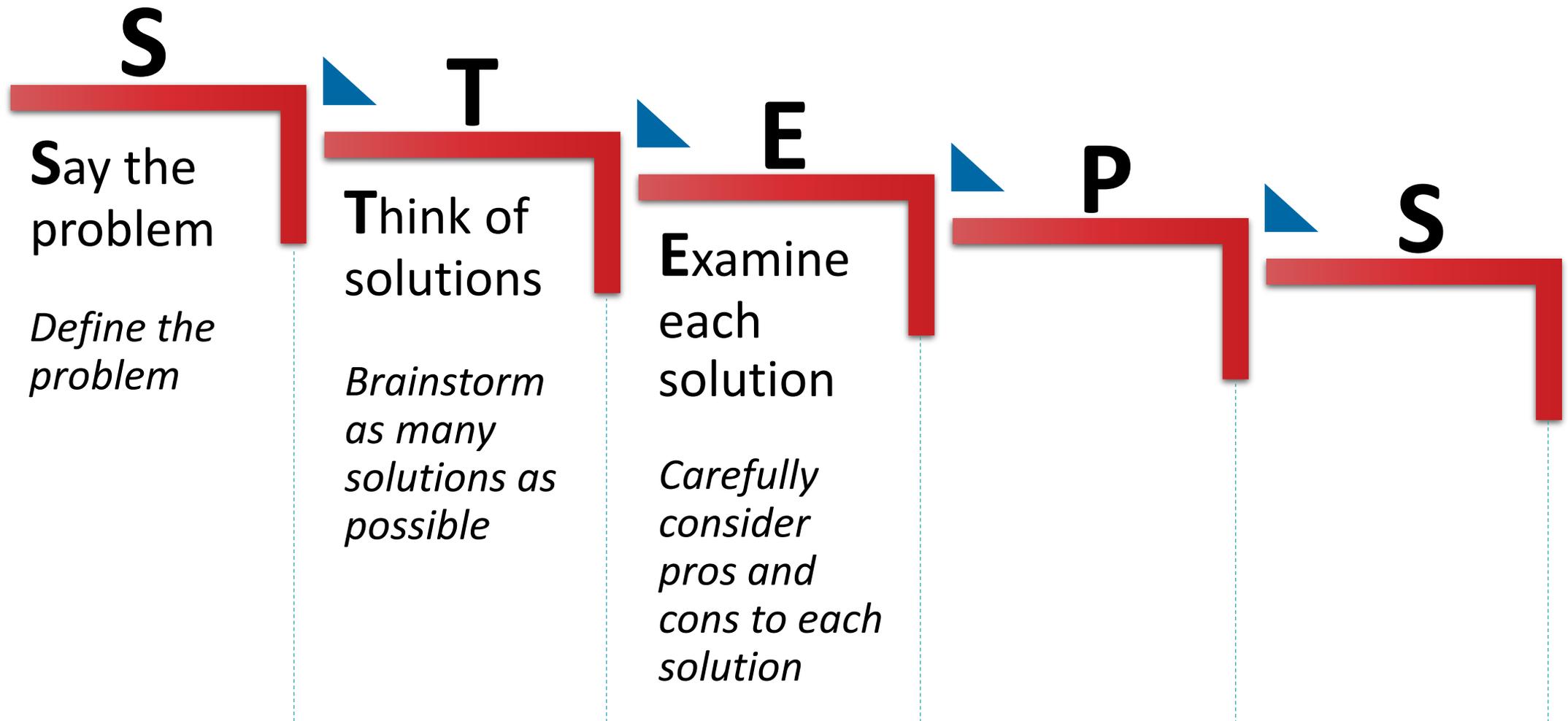
Problem Solving Essentials



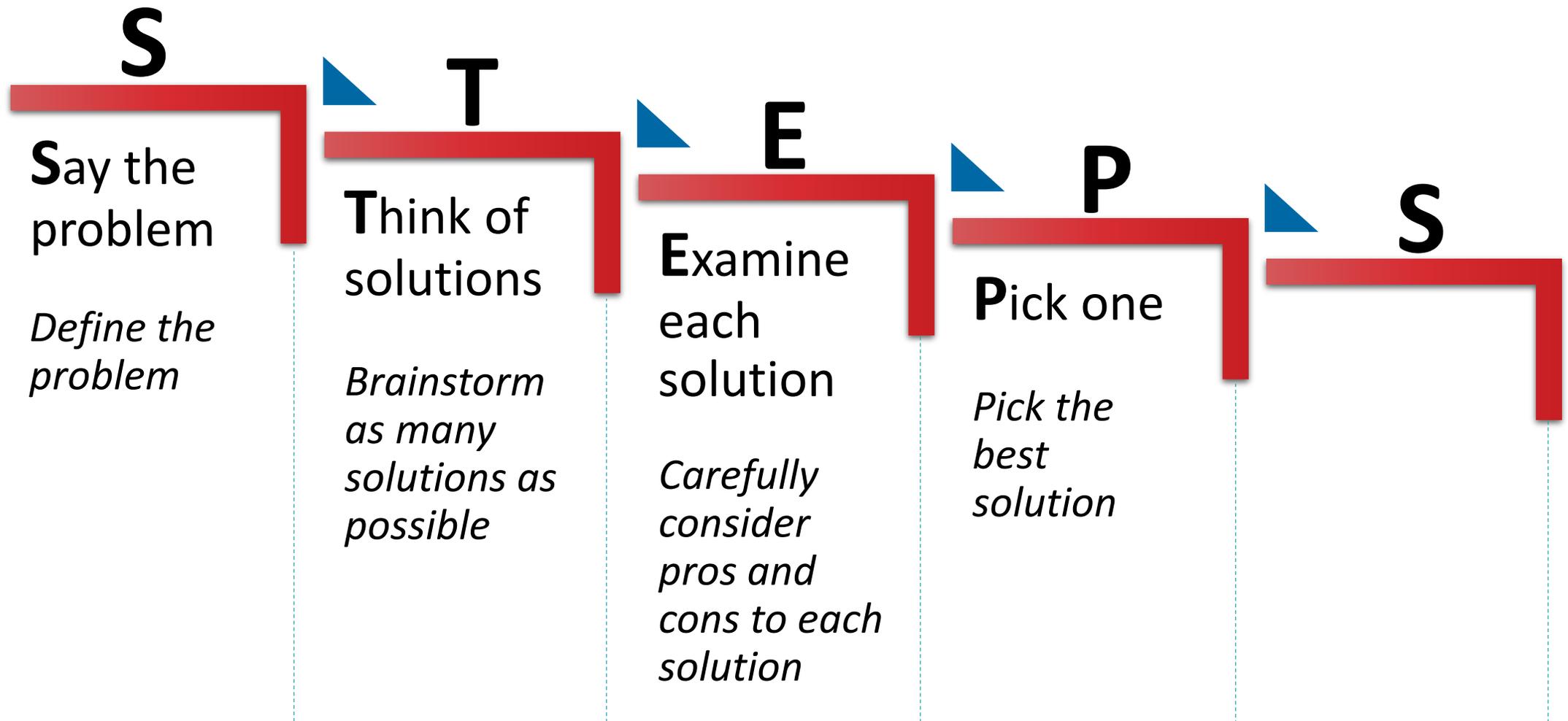
Problem Solving Essentials



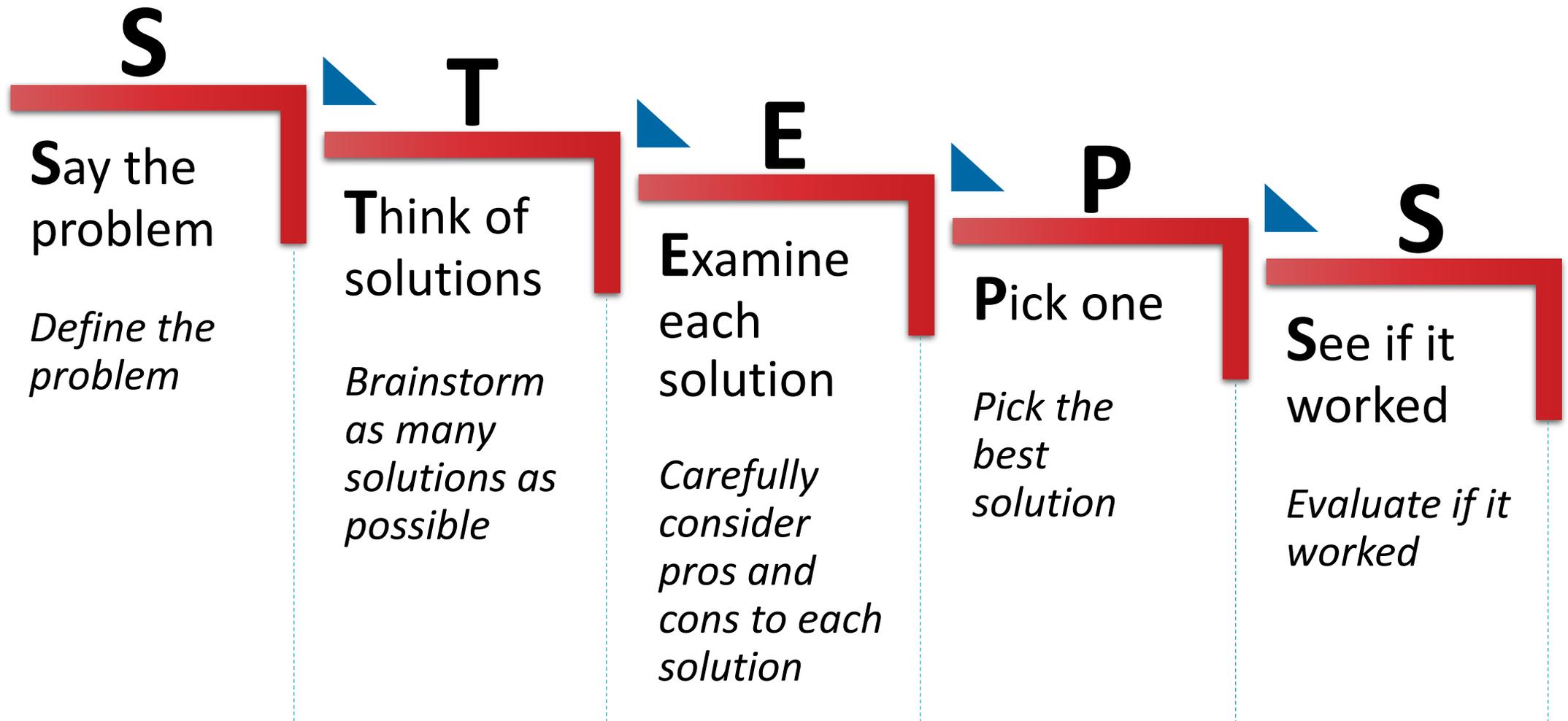
Problem Solving Essentials



Problem Solving Essentials



Problem Solving Essentials



Practice

- Practice with a neutral example
 - E.g., “I’ve lost my keys...what can I do?”
- Practice with a problem from the youth’s life
- Assign practice homework

Model: Problem Solving

- 14 year old depressed girl

“My mom and dad won’t let me go out and be with my friends. Things have been bad for me since we moved here from New Jersey.”

- 4th session, working phase of the meeting
- Our task:
 - Identify the discrete problem
 - Generate 3 possible solutions, avoid evaluation

Role Play: Problem Solving

- 14 year old depressed girl

“My mom and dad won’t let me go out and be with my friends. Things have been bad for me since we moved here from New Jersey.”

- 4th session, working phase of the meeting
- Your task:
 - Move through the checklist during the time

Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
Problem Solving	✓	✓	✓			

DIRECT SERVICE LEARNING RECORD

CONCEPTS	Experience		Expertise Achieved			
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Activity Selection



Overview

- ❑ Doing activities increases chances of improving mood
- ❑ Inactivity is both a cause and effect of depression
 - ❑ Spontaneous activities unlikely without support
 - ❑ Goal is to get youth to notice when mood is low and do a “feel good” activity to address it
- ❑ Activities bring meaning and purpose to life, and counter the hopeless and helpless nature of depression

Activity Selection Essentials

Connect doing
and feeling



Activity Selection Essentials



Connect doing
and feeling

Make a list



Make a List

- ❑ Generate a menu of 10 or more activities that are:
 - ❑ Enjoyable
 - ❑ Social
 - ❑ Free
 - ❑ Outdoors
 - ❑ Helpful
 - ❑ Active
 - ❑ Easy to access



Activity Selection Essentials



Connect doing
and feeling



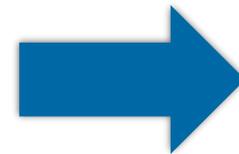
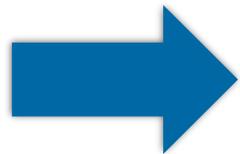
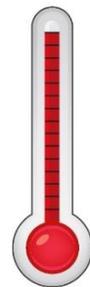
Make a list

Pick things and
try them



Pick Things and Try Them

- Pick one and try it out in session
 - Mood Rating before and after
- Assign Practice at home



Option for Older Youth

- Hour-by-hour daily schedule
 - Pleasant activities
 - Necessary activities
 - E.g., homework, chores

	Saturday
10:00am	Breakfast
	Screen time (e.g., tv)
11:00am	Get ready for the day
	Chores
12:00pm	Lunch
	Walk or bike to the park
2:00pm	Homework
	Hang out with friends
6:00pm	Supper
	Wash dishes
7:00pm	Movie with family or friends
10:00pm	Get ready for bed

Anticipate challenges

- ❑ Caregiver reservations
- ❑ Difficulty generating activities
- ❑ Only listing passive activities
- ❑ Activity not improving mood



Group Activity: Create Activity Schedule

- Case:
 - 9-year-old boy who says the only thing he enjoys doing is playing video games
- Your task:
 - As a group, take 1 minute to come up with as many ideas as you can for an activity menu
 - Try to find things that are NOT video games
 - Make sure the list contains:
 - Things we enjoy
 - Social activities
 - Staying busy
 - Helping others

Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

Activity Selection	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
Activity Selection	✓	✓	✓			

DIRECT SERVICE LEARNING RECORD

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Relaxation



Variations

- ❑ Progressive muscle relaxation
- ❑ Breathing exercises
- ❑ Pleasant imagery
- ❑ Combinations
- ❑ Can provide for child via online apps



Steps

- ❑ Identify when you are feeling bad
- ❑ Get in a comfortable position
- ❑ Breath deeply
- ❑ Tense/relax muscles or imagine a relaxing place

Resource

- We have a resource for you that includes audio files for progressive muscle relaxation and guided imagery
- Go to: **relax.practicewise.com**

Group Exercise

- Your relaxation examples

Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
Relaxation	✓		✓			

DIRECT SERVICE LEARNING RECORD

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Cognitive: Depression



Types of Thoughts That Increase Depression

- ❑ Self-blame
 - ❑ “Guesses” that involve you being at fault for something
- ❑ Selectively attending to the negative
 - ❑ “Guesses” that involve you only noticing some of the clues (the bad ones)
- ❑ Negative assumptions based on minimal evidence
 - ❑ “Guesses” that involve you predicting bad outcomes for future events
- ❑ Catastrophic thinking
 - ❑ “Guesses” that tend to imagine very bad things happening

Activity: BLUE to NEW

Materials

- Two decks of cards
 - One deck contains negative thoughts
 - Other deck contains cards that say SAME or NEW

Directions

- ❑ First person in the row picks a card, labels the thought, and comes up with a new, adaptive thought
- ❑ Next person down the row selects a card from the SAME or NEW stack
 - ❑ If it says “SAME” → generate a new, adaptive thought
 - ❑ If it says “NEW” → select a new thought from the deck, label the thought, and come up with a new, adaptive thought
- ❑ Repeat steps
- ❑ If you can beat the clock, the team wins!

Double Bubble

Negative Thoughts

Nobody cares
what happens
to me!

Adaptive Thoughts

Even though my
mom can't be with
me right now, she
still loves me.

- ✓ What's the evidence?
- ✓ Is there another way to look at this situation?
- ✓ What would you tell a friend?
- ✓ What if it is true—how bad would it be?



Cognitive Continued

- ❑ Cognitive will appear in searches for other target areas
- ❑ Other Cognitive practice guides
 - ❑ Cognitive: Anxiety
 - ❑ Cognitive: Anxiety (STOP)
 - ❑ Cognitive: Disruptive
- ❑ Adaptations for Cognitive
 - ❑ Cognitive: Trauma

Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

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Cognitive: Depression	✓	✓	✓			

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Social Skills



Teaching Specific Social Skills

- Verbal communication skills
 - Introducing self
 - Maintaining a conversation
 - Ending a conversation
- Nonverbal communication skills
 - Eye contact
 - Posture
 - Talking distance

Self-Presentation Skills

- ❑ Use of video tape or pictures
- ❑ Positive self vs. negative self

Negative Self



- ❑ Poor eye contact
- ❑ Hunched over posture
- ❑ Negative facial expression
- ❑ Sad or irritable tone of voice
- ❑ Focused on the negative

Positive Self



- ❑ Good eye contact
- ❑ Straight posture
- ❑ Positive facial expression
- ❑ Clear, pleasant tone of voice
- ❑ Focused on the positive

Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

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Social Skills	✓		✓			

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Maintenance



Maintenance Essentials

Illustrate Treatment Gains

- Highlight skills learned
- Emphasize improvement
- Discuss impact of skills on improvement

Maintenance Essentials

Illustrate Treatment Gains

- Highlight skills learned
- Emphasize improvement
- Discuss impact of skills on improvement

Encourage Practice

- Rationale for continued practice in daily life
- Discuss benefit of “overlearning”
- Identify future stressors and practice them

Maintenance Essentials

Illustrate Treatment Gains

- Highlight skills learned
- Emphasize improvement
- Discuss impact of skills on improvement

Encourage Practice

- Rationale for continued practice in daily life
- Discuss benefit of “overlearning”
- Identify future stressors and practice them

Protect Against Disappointment

- Develop realistic expectations
- Distinguish between a “lapse” and a “relapse”

Maintenance Strategies

Across Time

Decrease
session
frequency

Continued
practice in
everyday life

Foster
perseverance

Expect lapses

Across Situations

Vary difficulty
and intensity

Involve
caregiver

Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

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Maintenance	✓		✓			

DIRECT SERVICE LEARNING RECORD

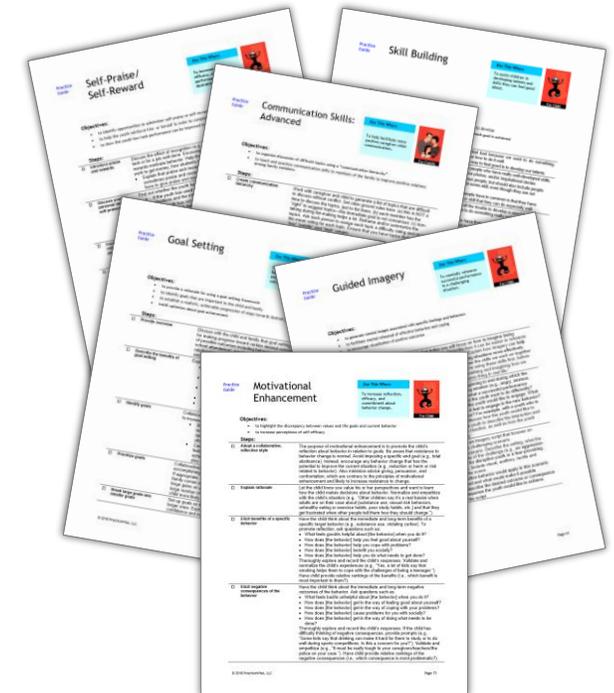
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Check Your Learning

- ❑ Go to your training event page
- ❑ Click on the Knowledge Tests link in the upper left corner
- ❑ Scroll down to Problem-Solving True-False **POST**-Test

Related Practices

PWEBS	Practice Guide
Talent or Skills Building	Skill Building
Communication Skills	Communication Skills: Advanced
Goal Setting	Goal Setting
Self-Reward/Self-Praise	Self-Praise/Self-Reward
Motivational Enhancement	Motivational Enhancement
Guided Imagery	Guided Imagery



Treatment Planner

Focus

Target: Depression

Practices:

Connect

Engagement
Psychoeducation
Monitoring



Cultivate

Problem Solving
Activity Selection
Cognitive
Social Skills



Consolidate

Maintenance

Interference

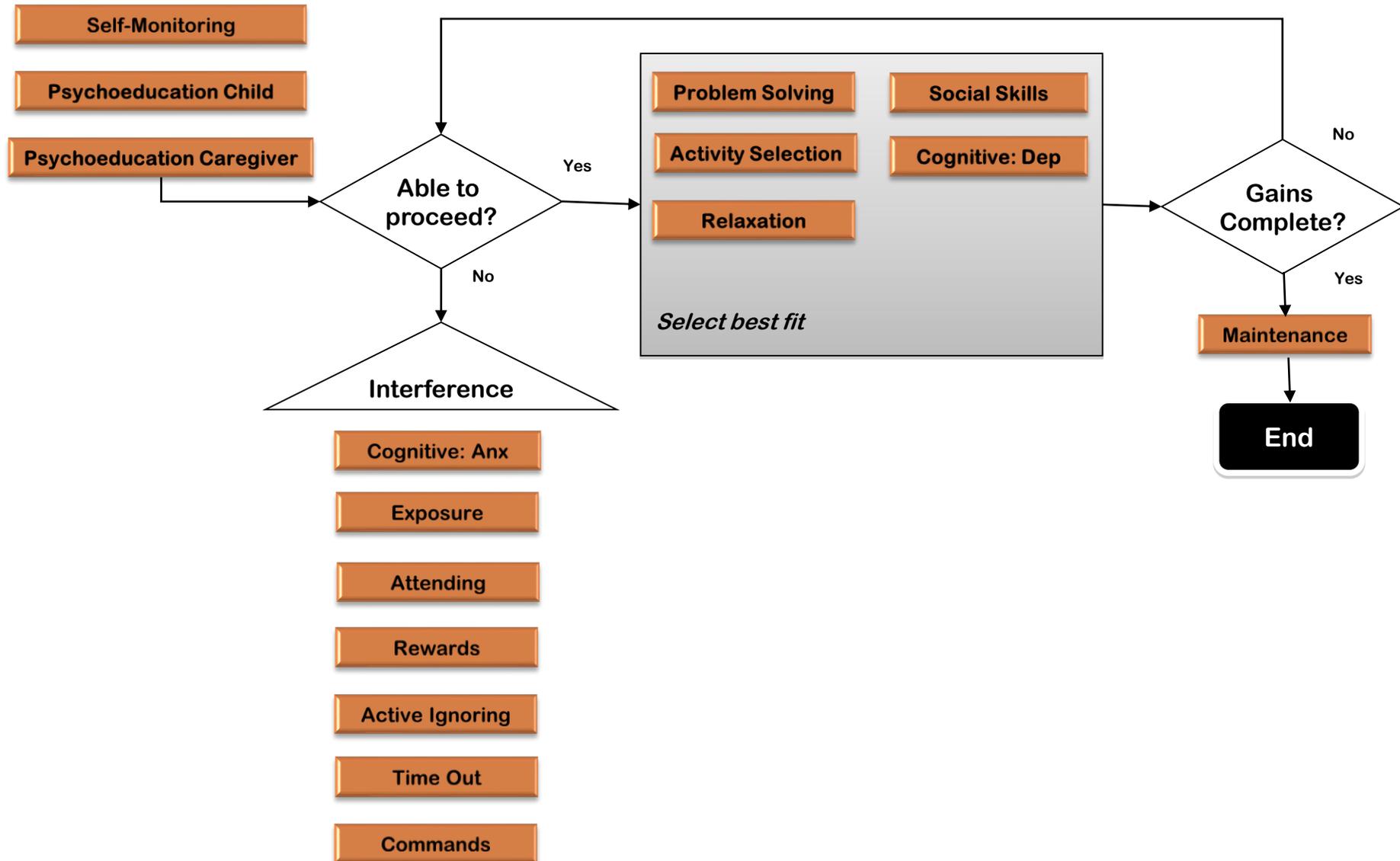
Target(s): Anxiety

Practices:

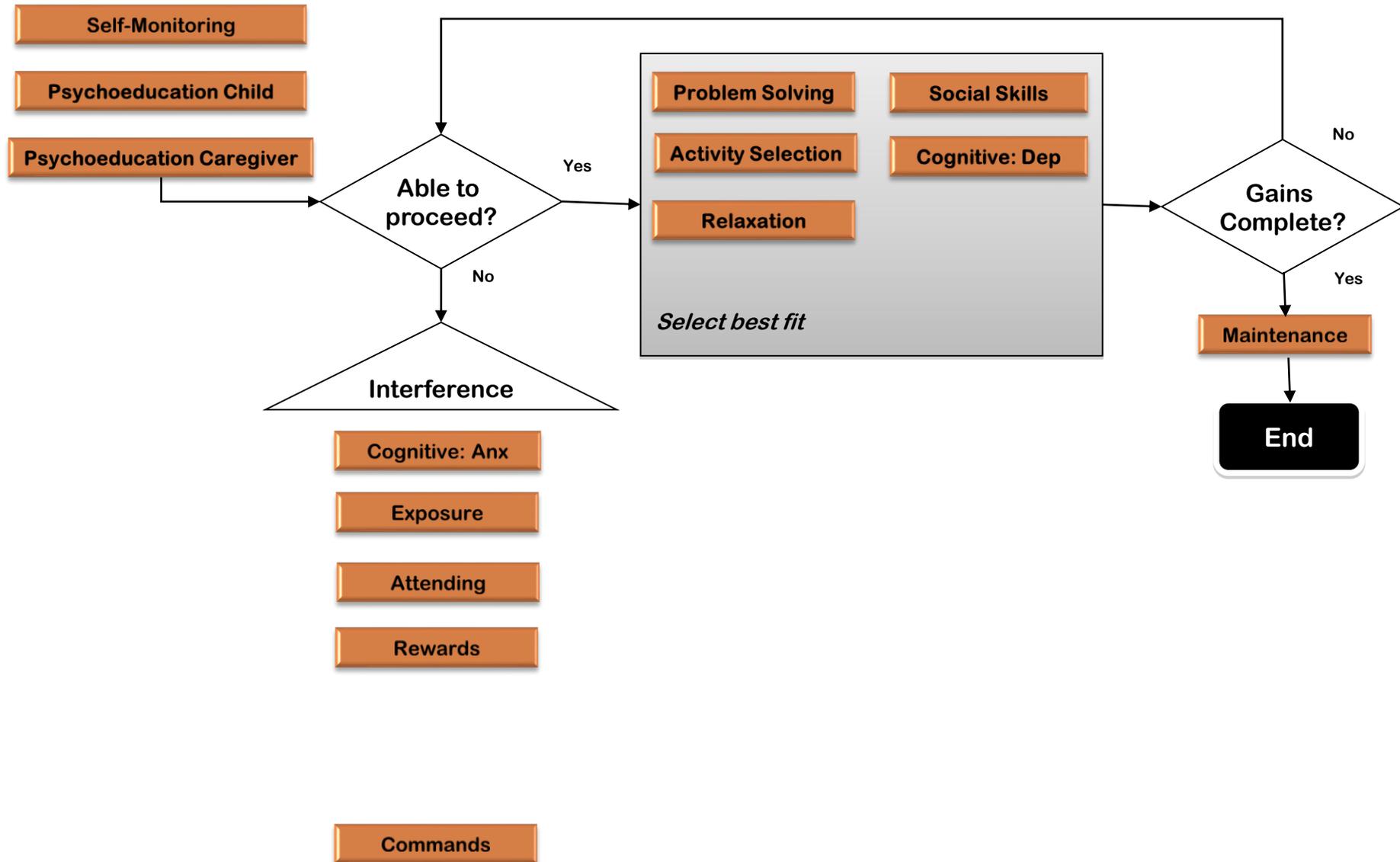
Cognitive: Anxiety
Exposure
Active Ignoring

Treatment Pathway: Depression

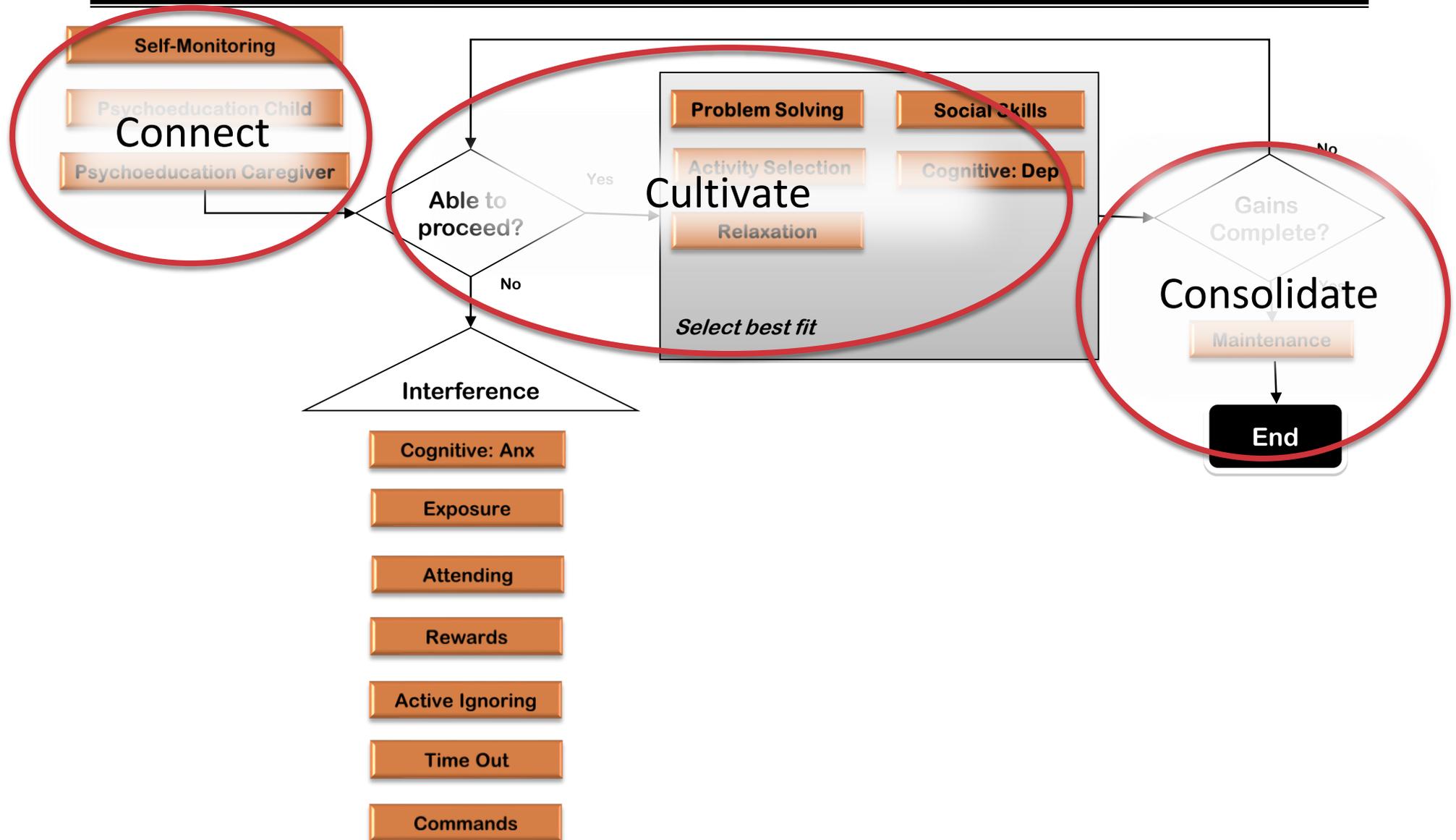
Process Guide



Treatment Pathway: Depression (Older)

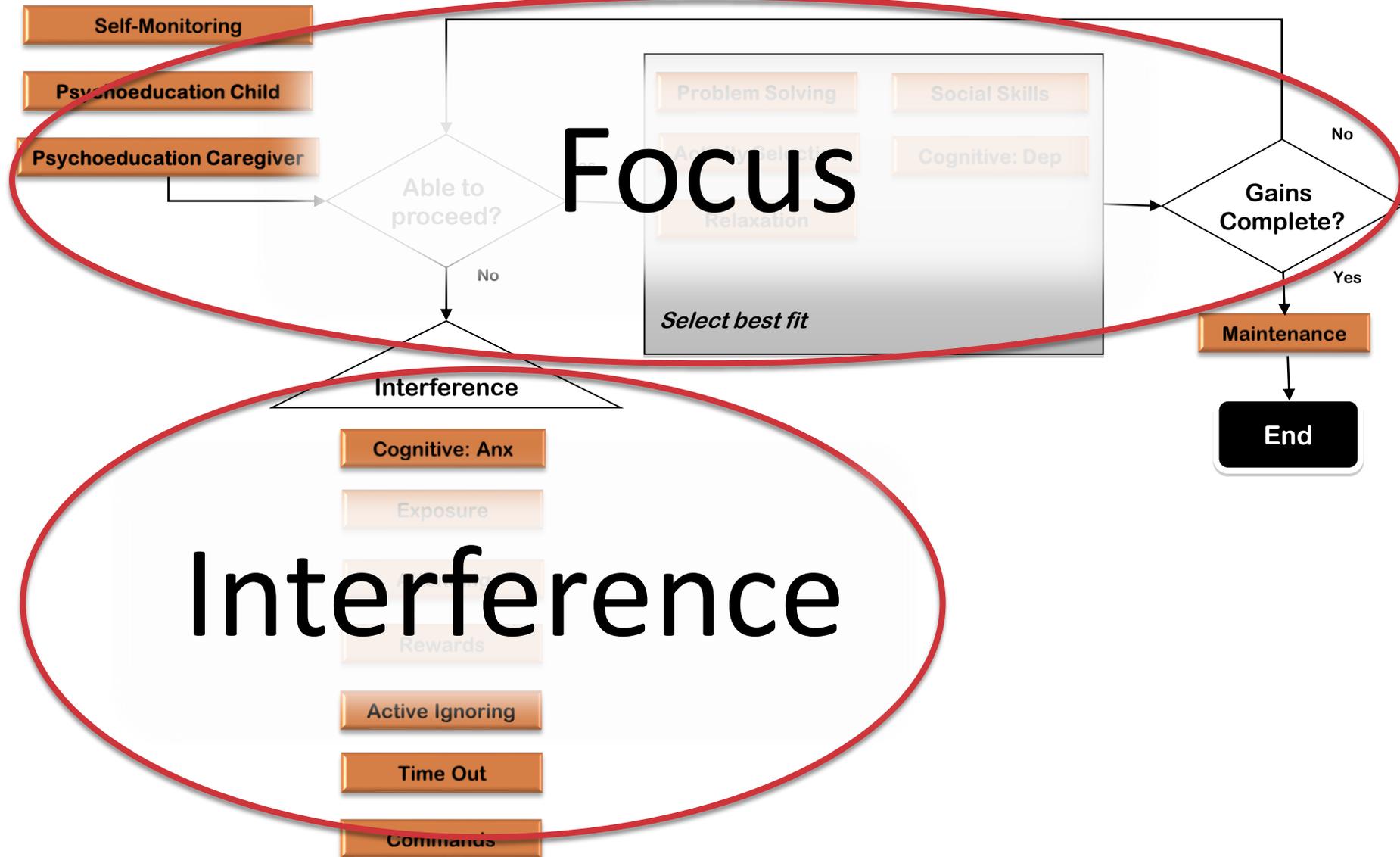


Treatment Pathway: Depression



Treatment Pathway: Depression

Process Guide



Learning Record Update

MAP Therapist Portfolio

Direct Service Learning Record

Check off:

	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
Depression	✓		✓			

DIRECT SERVICE LEARNING RECORD

CONCEPTS	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
EBS System Model	<input type="checkbox"/>					
CARE Process	<input type="checkbox"/>					
The MAP	<input type="checkbox"/>					
Connect-Cultivate-Consolidate	<input type="checkbox"/>					
Focus-Interference	<input type="checkbox"/>					
Clinical Event Structure	<input type="checkbox"/>					
Embracing Diversity	<input type="checkbox"/>					
RESOURCES	Experience		Expertise Achieved			
	Reviewed	Rehearsed	Knowledge	Production	Skill	Habit
PWEBS	<input type="checkbox"/>					
Practitioner Guides	<input type="checkbox"/>					
Clinical Dashboard	<input type="checkbox"/>					
Treatment Pathways						
Focus Area 1: _____	<input type="checkbox"/>					
Focus Area 2: _____	<input type="checkbox"/>					
APPLICATIONS	Experience		Expertise Achieved			
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Assessment	<input type="checkbox"/>					
Monitoring	<input type="checkbox"/>					
Planning	<input type="checkbox"/>					
Practice Delivery						
Practice 1: _____	<input type="checkbox"/>					
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Practice 3: _____	<input type="checkbox"/>					
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Practice 11: _____	<input type="checkbox"/>					
Practice 12: _____	<input type="checkbox"/>					
Practice 13: _____	<input type="checkbox"/>					
Practice 14: _____	<input type="checkbox"/>					
Practice 15: _____	<input type="checkbox"/>					
Practice 16: _____	<input type="checkbox"/>					
Practice 17: _____	<input type="checkbox"/>					
Practice 18: _____	<input type="checkbox"/>					

Dashboard Example: Depression

Depression Dashboard Example

Activity: MAP in Action

Small Group Exercise

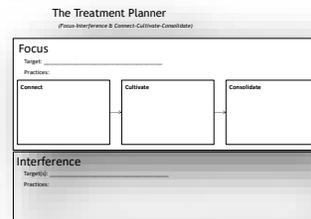
MAP Quick Start Guide

1 PWEB Search



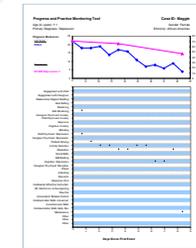
Use PWEB to identify practices that match your case.

2 Treatment Planner



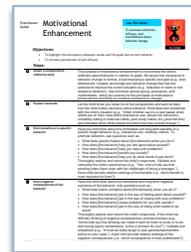
Use the Treatment Planner to arrange the practices.

3 Clinical Dashboard



Pick measures and goals and set up your Dashboard.

4 Practice Guide



Consult the Practice Guide you will use for your next session.

5 Session Planner



Use the Session Planner to structure your session.

Quick Start Guide Step 1: PWEBS Search (5-10 minutes)

- ❑ Did you conduct a PWEBS search for your client?
 - ❑ If you have already completed the PWEBS search for the focus problem, search for interference targets
- ❑ Search tips
 - ❑ Level 2 Support
 - ❑ Start with least restrictive search (maybe just age and problem area)
 - ❑ Remember to search one problem area at a time
 - ❑ Add in more demographics to see how the results change

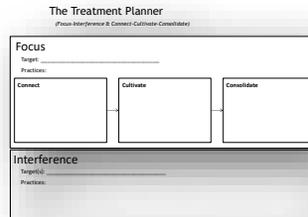
MAP Quick Start Guide

1 PWEB Search



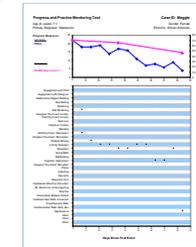
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2 Treatment Planner



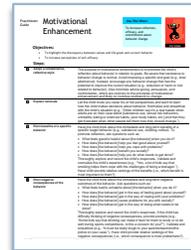
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3 Clinical Dashboard



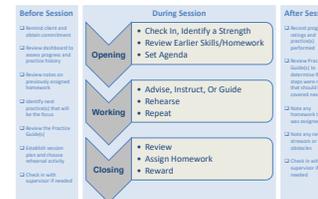
Pick measures and goals and set up your Dashboard.

4 Practice Guide



Consult the Practice Guide you will use for your next session.

5 Session Planner



Use the Session Planner to structure your session.

Step 2: Treatment Planner (10 minutes)

- Look at the Treatment Pathway for Depression
- Complete a Treatment Planner for your case
 - What Practice Elements will you use to Connect?
 - What Practice Elements will you use in Cultivate?
 - What Practice Elements fit into Consolidate?
 - What other practices might you use to target the interference problem?

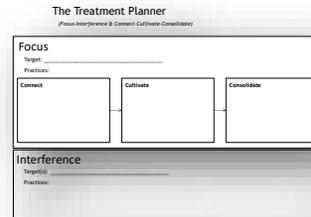
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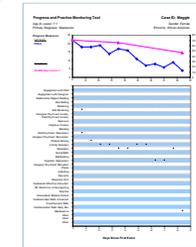
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2 Treatment Planner



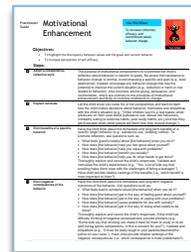
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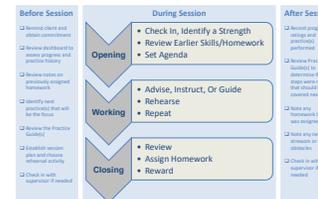
Pick measures and goals and set up your Dashboard.

4 Practice Guide



Consult the Practice Guide you will use for your next session.

5 Session Planner



Use the Session Planner to structure your session.

Step 3: Develop a Dashboard (15 Minutes)

- Now create a dashboard for your client
 - Fill in: Data-ClientInfo sheet
 - Come up with:
 - 2 standardized measures to be given 3-4 months
 - 3 idiographic measures (personalized) that line up with your treatment goals
 - For example:
 - Treatment goal: Reduce tantrums from 3x to 1x daily
 - Dashboard measure: Average # tantrums/day

Learning Record Update

MAP Therapist Portfolio

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Practice 18: _____	<input type="checkbox"/>					

Homework: Day 3

- Identify a pleasant activity you can do tonight
- Collect pre- and post-activity mood ratings

Agenda Recap

- Reviewed practice elements for Anxiety and discussed in the context of Trauma
 - And learned some additional practice elements for Trauma
- Introduced and rehearsed Depression practice elements within the MAP system
- Continued cultivating clinical dashboard skills

Workshop Mid-Week Evaluation

- Go to Training Event Page

