



# Responding to Addiction: Blending Motivational Interviewing and Acceptance Commitment Therapy

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College of Social Work

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[www.kaizencenter.org](http://www.kaizencenter.org)



May 1, 2020



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# Agenda

**Introductions**

**5 min overview of  
Motivational Interviewing**

**Acceptance Commitment Therapy**



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**Who am I? Brad Lundahl, PhD**

**PhD in Clinical Psychology  
Northern Illinois University**

**Tenured Associate Professor:  
University of Utah**

**Clinician, Business Owner  
[www.cccslc.com](http://www.cccslc.com)**

**MINT Trainer**



- **Research MI**
- **Practice MI**
- **Supervise MI**
- **Train on MI**
- **Trying to enhance learning MI via**

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**Who am I?**  
Chase Wickersham, LCSW


**Masters in Social Work**  
University of Utah

I am in long-term recovery from active addiction

**Experience:**  
10+ years addiction recovery:


- Inpatient & outpatient treatment
- MI/ACT training
- Supervise/train other therapists.

**Business Owner, Trainer**



**Specialize in:**

- Addictions, Anxiety
- ACT
- MI
- Mind-Body Bridging




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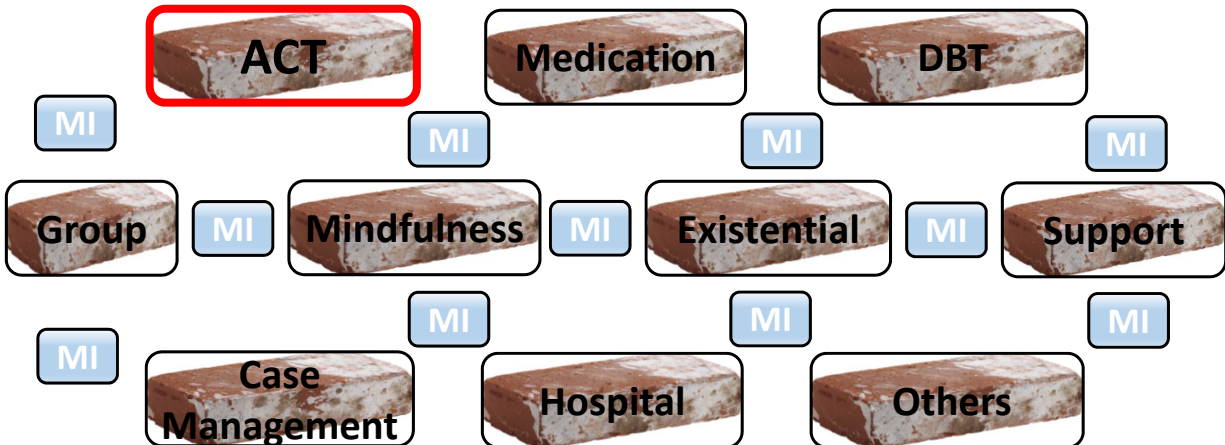
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## Blending Treatments to Promote Recovery



### Brick (treatment approaches) & Mortar (MI)




The diagram illustrates the concept of blending treatments to promote recovery. It features a grid of bricks representing various treatment approaches, with small blue squares labeled 'MI' (Motivational Interviewing) acting as mortar between them. The bricks are arranged in three rows:

- Row 1: ACT (highlighted with a red border), Medication, DBT
- Row 2: Group, Mindfulness, Existential, Support
- Row 3: Case Management, Hospital, Others

MI bricks are placed between the treatment bricks to show how they are blended together.

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## Evidence for ACT & MI in Addiction

Bahrami, S., & Asghari, F. (2017). A controlled trial of **acceptance and commitment therapy** for addiction severity in methamphetamine users: Preliminary study. *Archives of Psychiatry and Psychotherapy*, 19(2), 49–55. <https://doi.org/10.12740/APP/68159>

### Methamphetamine


### Alcohol

Kohler, S., & Hofmann, A. (2015). Can **motivational interviewing** in emergency care reduce alcohol consumption in young people? A systematic review and meta-analysis. *Alcohol and Alcoholism*, 50(2), 107–117. <https://doi.org/10.1093/alcalc/agu098>


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## Addiction ... Wreck-a-diction



### Addiction's Impact

#### Individuals

#### Families


#### Society

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MI's View of how to help in addiction



Motivation Matters


If there is a **WILL**,  
there is a **WAY**

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MI's View of how to help in addiction



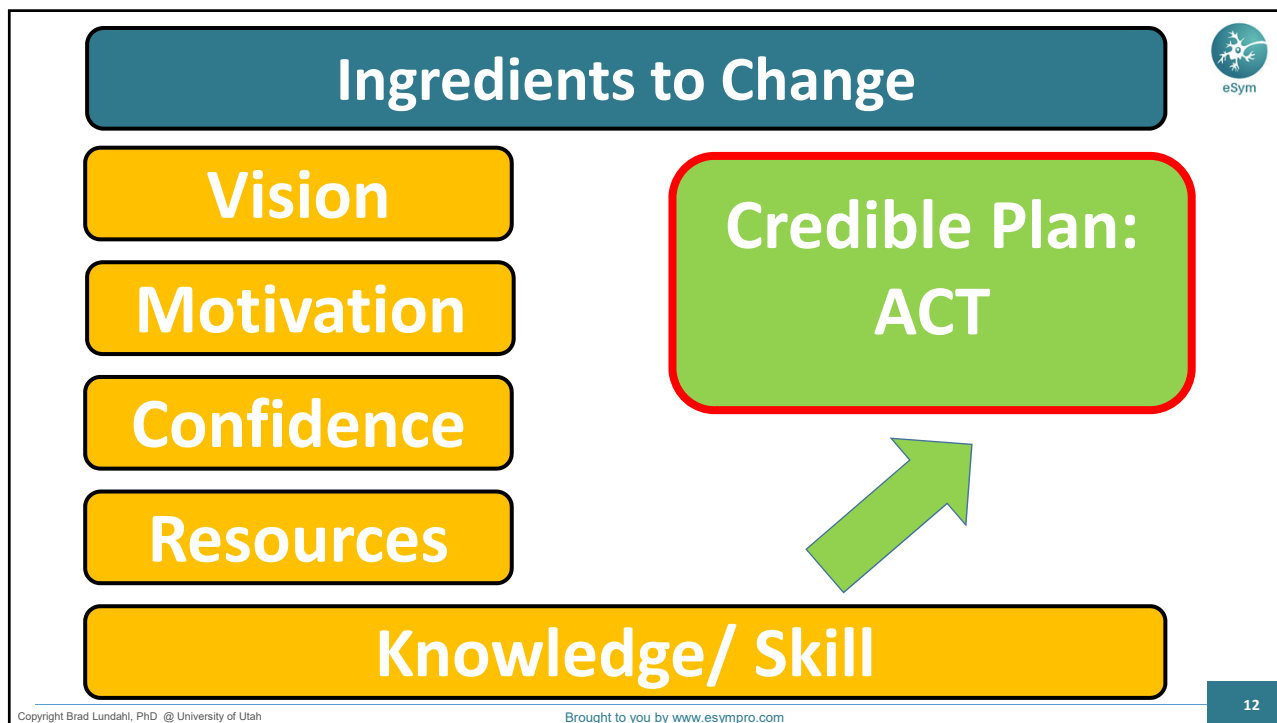
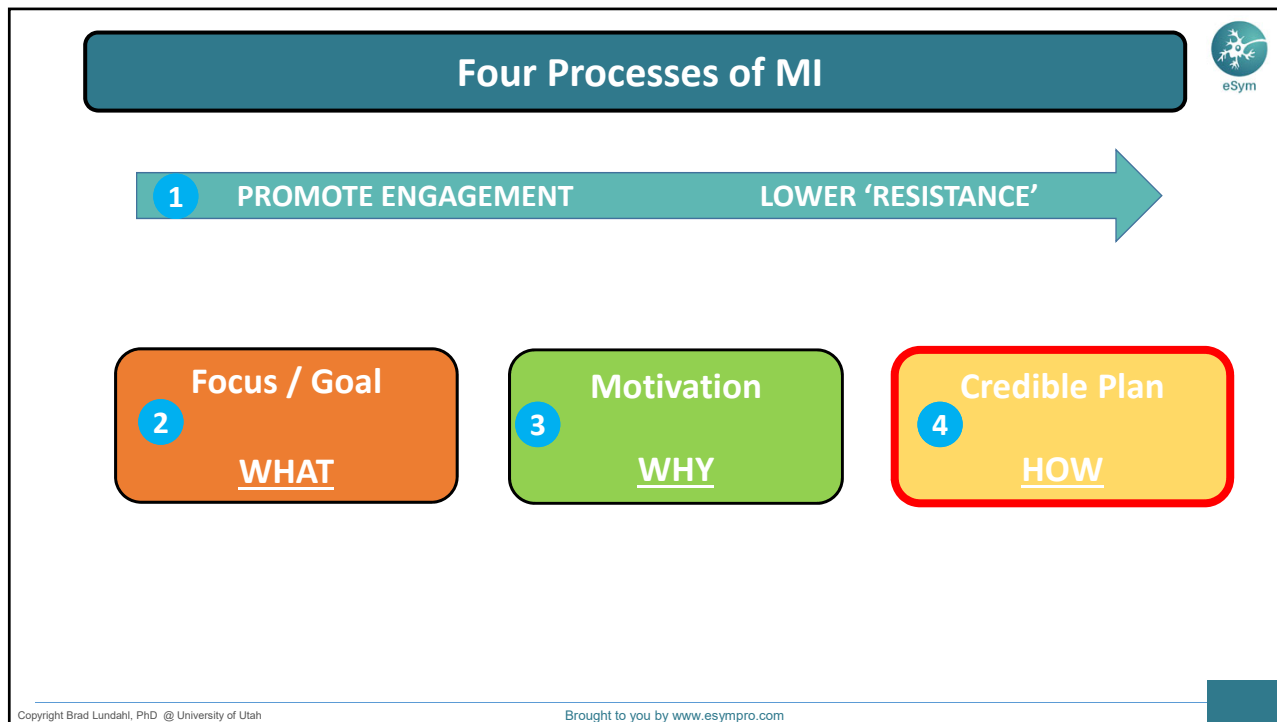
Motivation Matters

You can lead a **HORSE**  
to water,  
but you can't make it  
**DRINK**

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# Thank you for Attending

I hope this information helps in your important work

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Future Webinars

- Sleep
- Supervision
- What clients really want ... how to engage clients

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Presented by:  
Brad Lundahl, PhD  
&  
Chase Wickersham, LCSW  
May 1, 2020

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801-416-0862

Training created with Brad Lundahl, PhD, and adapted from Steven C. Hayes, PhD, Kevin Polk PhD

Assumption:  
Suffering is  
ubiquitous  
and normal

"Throughout our lifetime, we all have a 50/50 chance of struggling with suicidal thoughts at a moderate to severe level for at least two weeks." Steven C. Hayes PhD  
- Chiles and Strosahl, 2004

It is *abnormal*  
**NOT**  
to experience significant psychological struggles.

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Some  
of our  
responses  
to suffering  
are harmful

(context  
matters)

- Escape and avoid our experience
  - (novocain at the dentist vs. a DUI)
- Lose contact with the present
  - (texting while driving)
- Defend stories about ourselves
  - (get caught up in “what” or “who” we are ... “I am an alcoholic” or “I am not an alcoholic”)
- Generate reasons why or why not and this may get in the way of changing
  - (FUNCTIONAL VS. LITERAL TRUTH)

Moving “Toward” or “Away” from a life worth living?



Struggling to avoid unavoidable suffering leads to inflexibility.

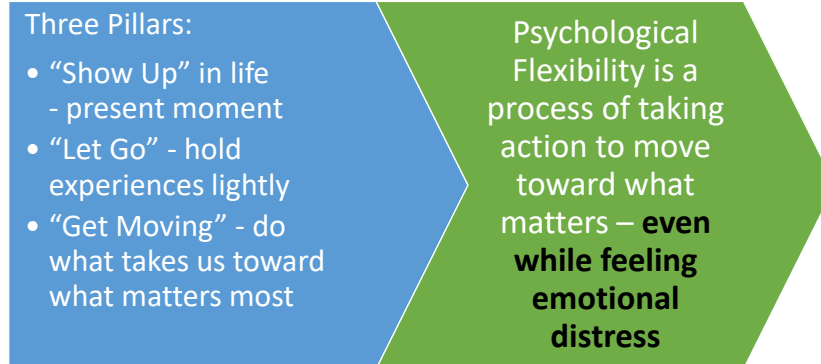


Inflexibility leads to less living.

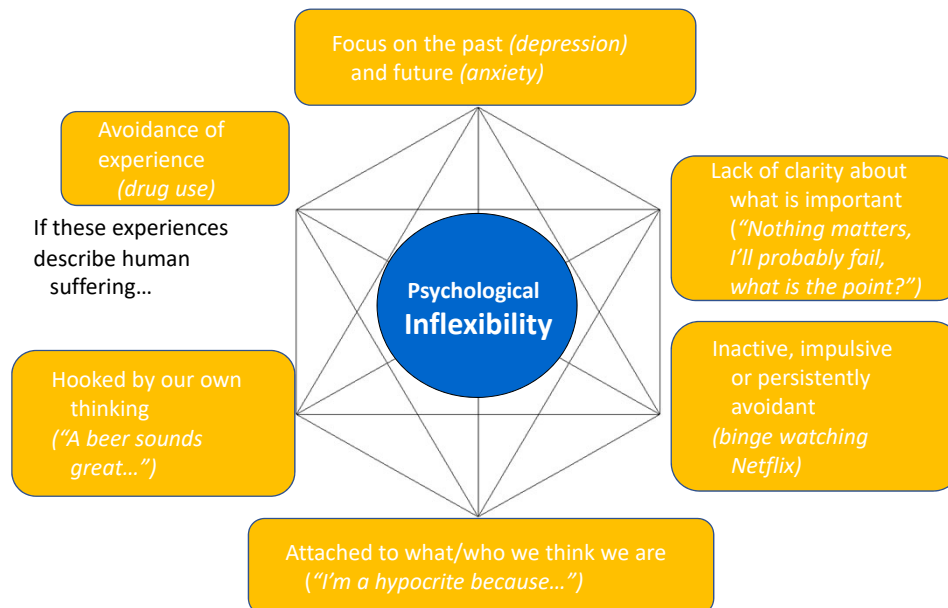


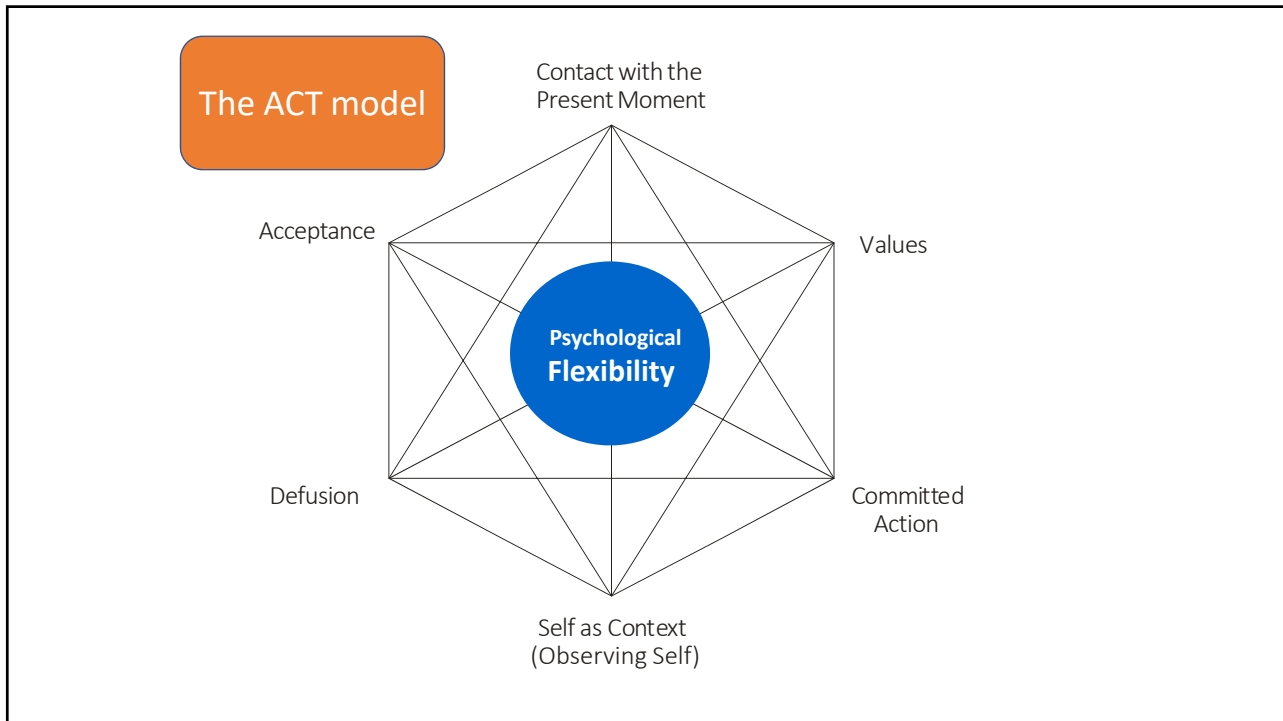
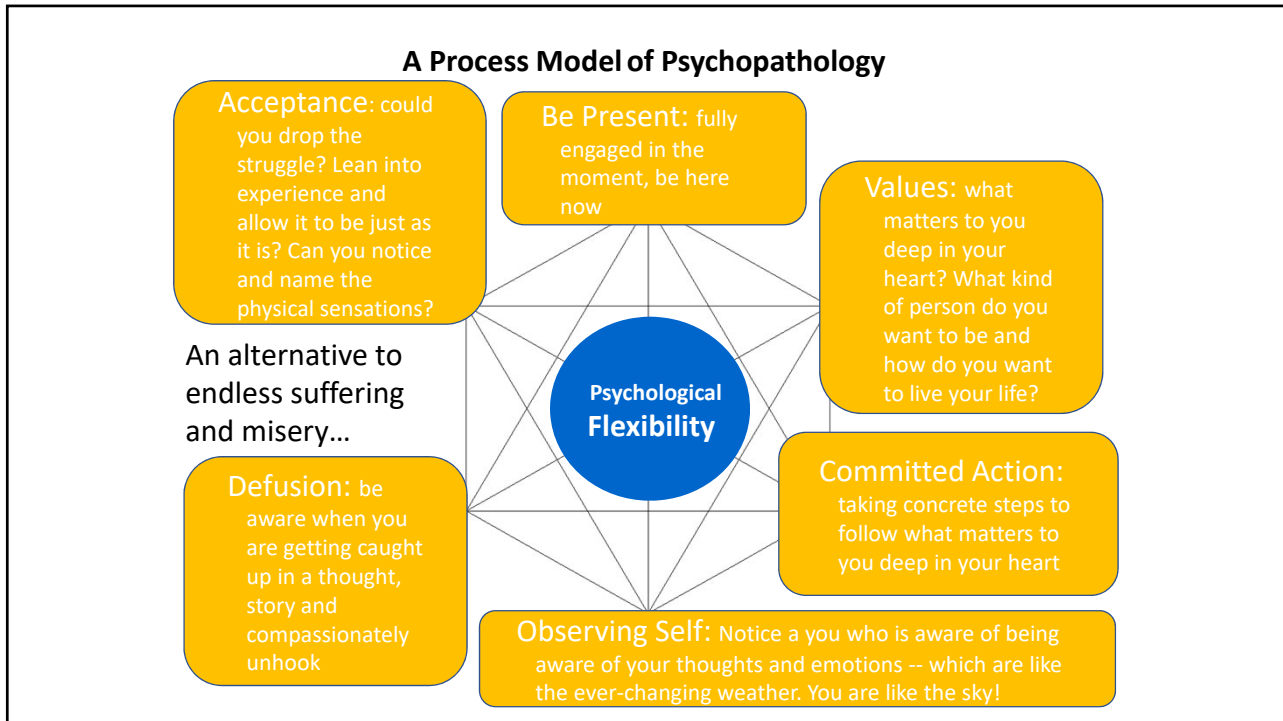
Examples: The more we overthink, distract, drink alcohol, take drugs, avoid pain, the less we engage with ourselves, our relationships and the world.

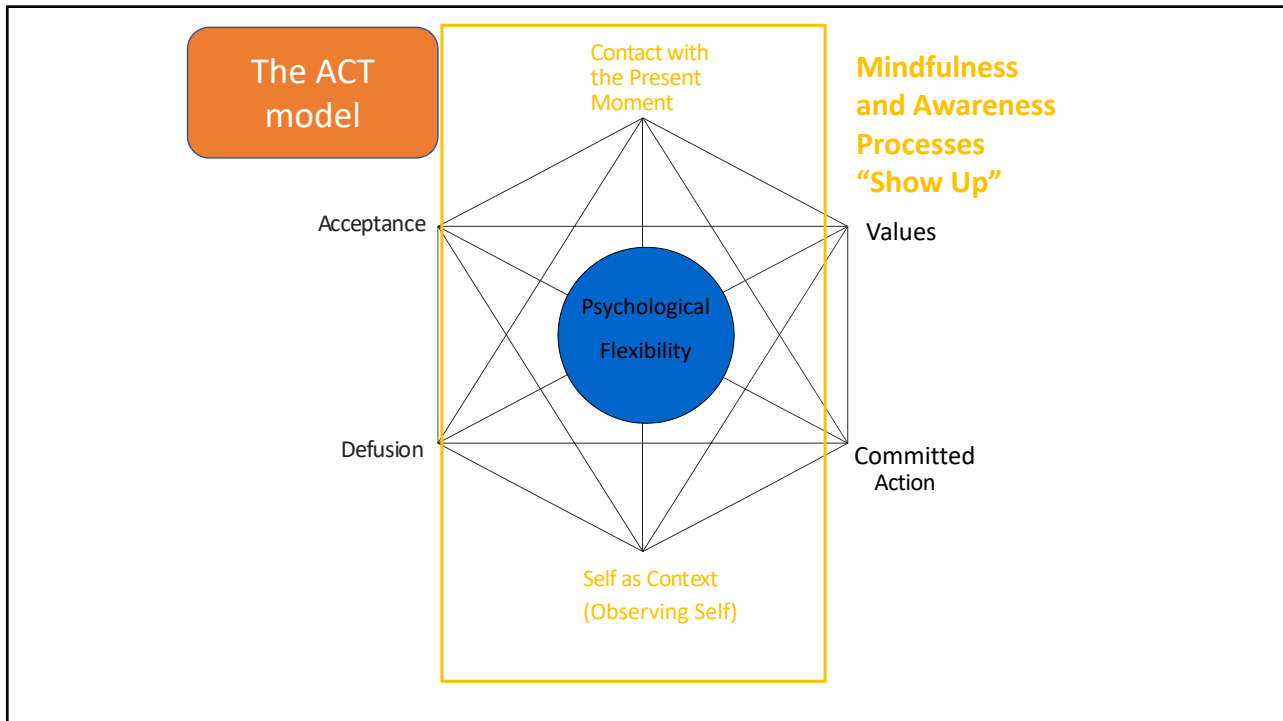
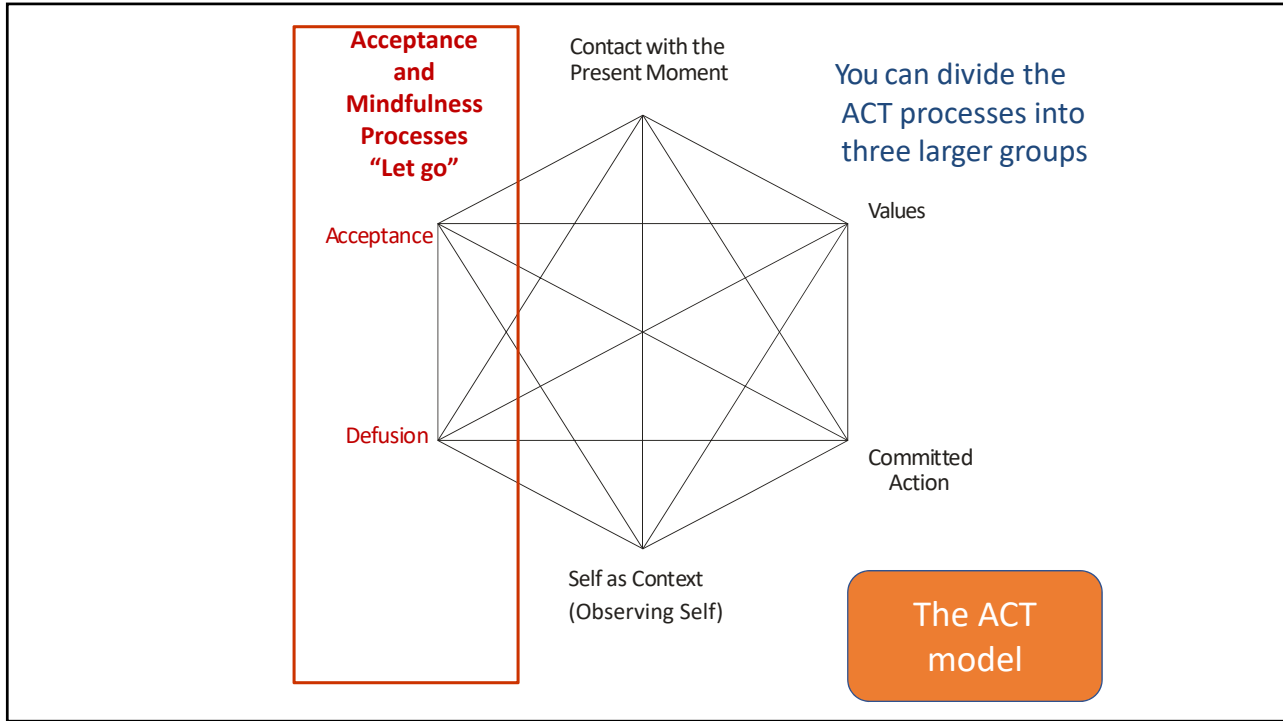
## ACT's purpose: Increase psychological flexibility

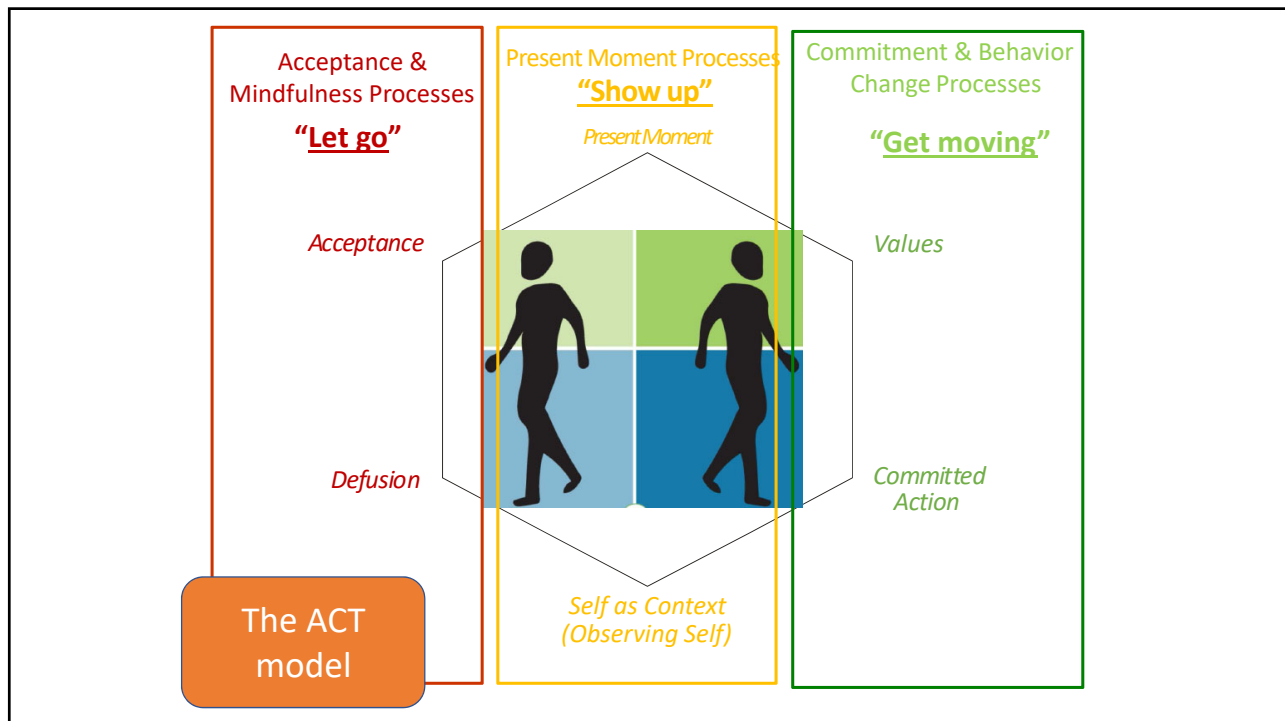
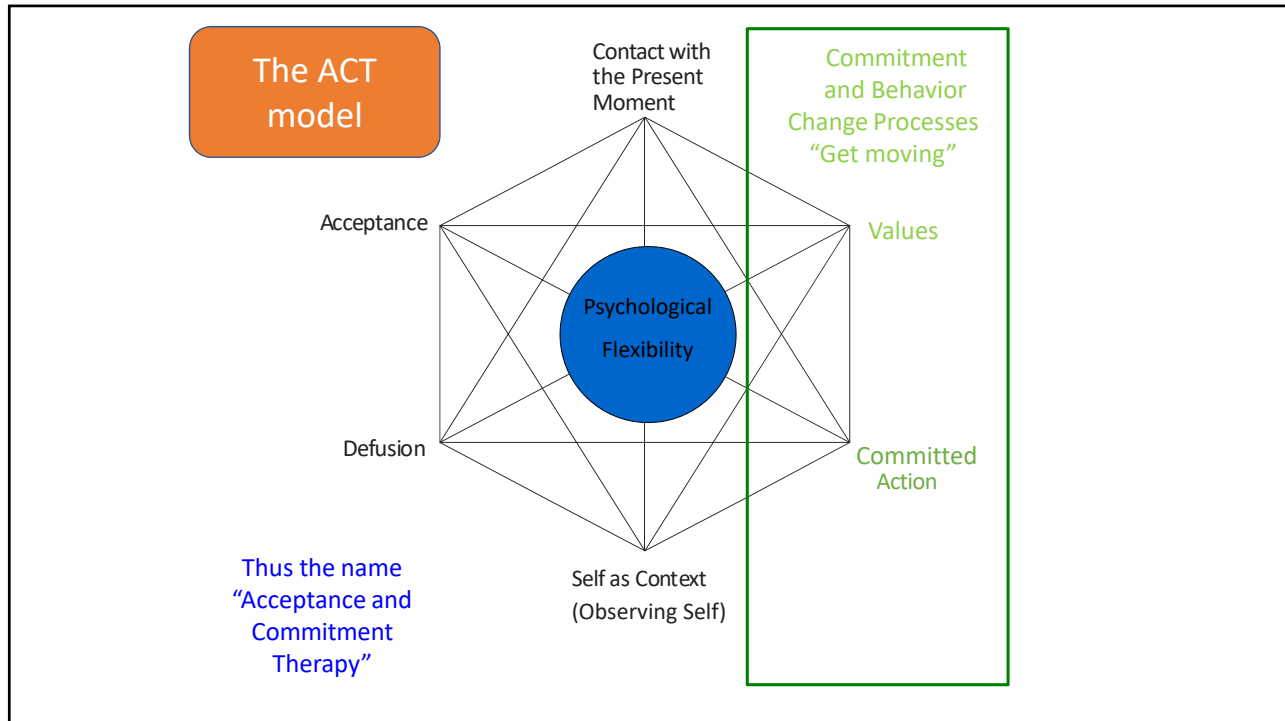


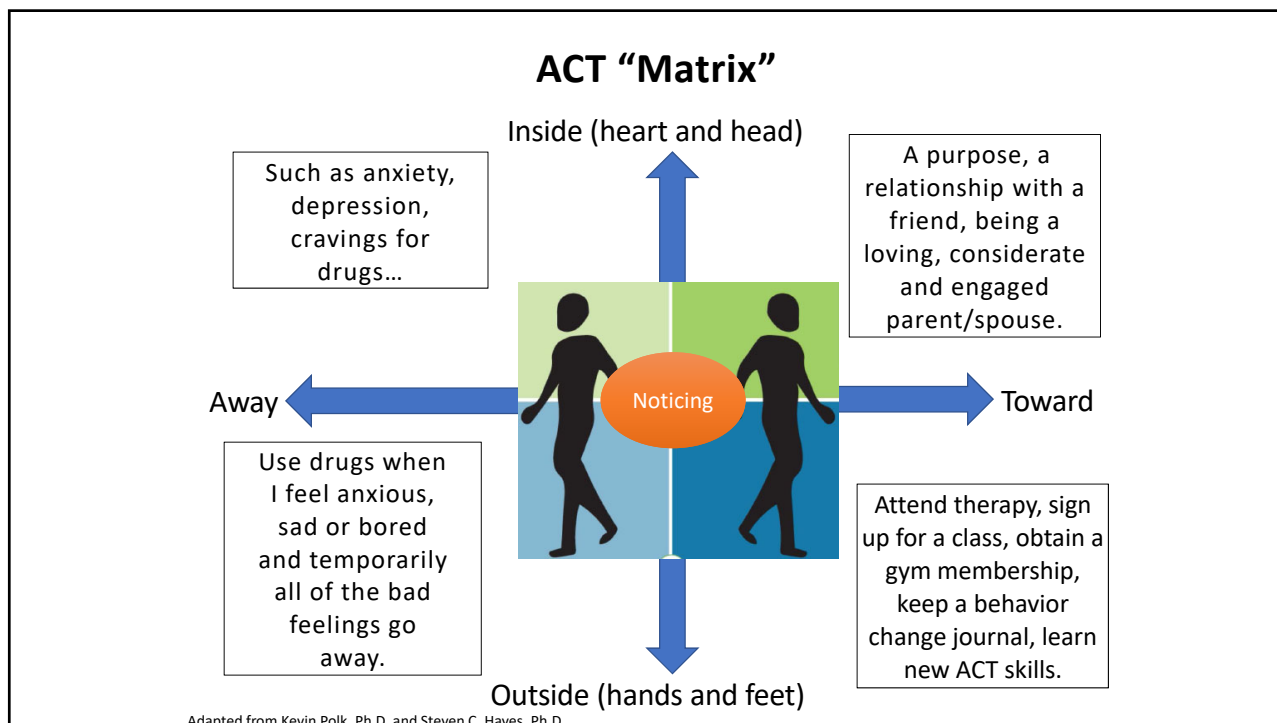
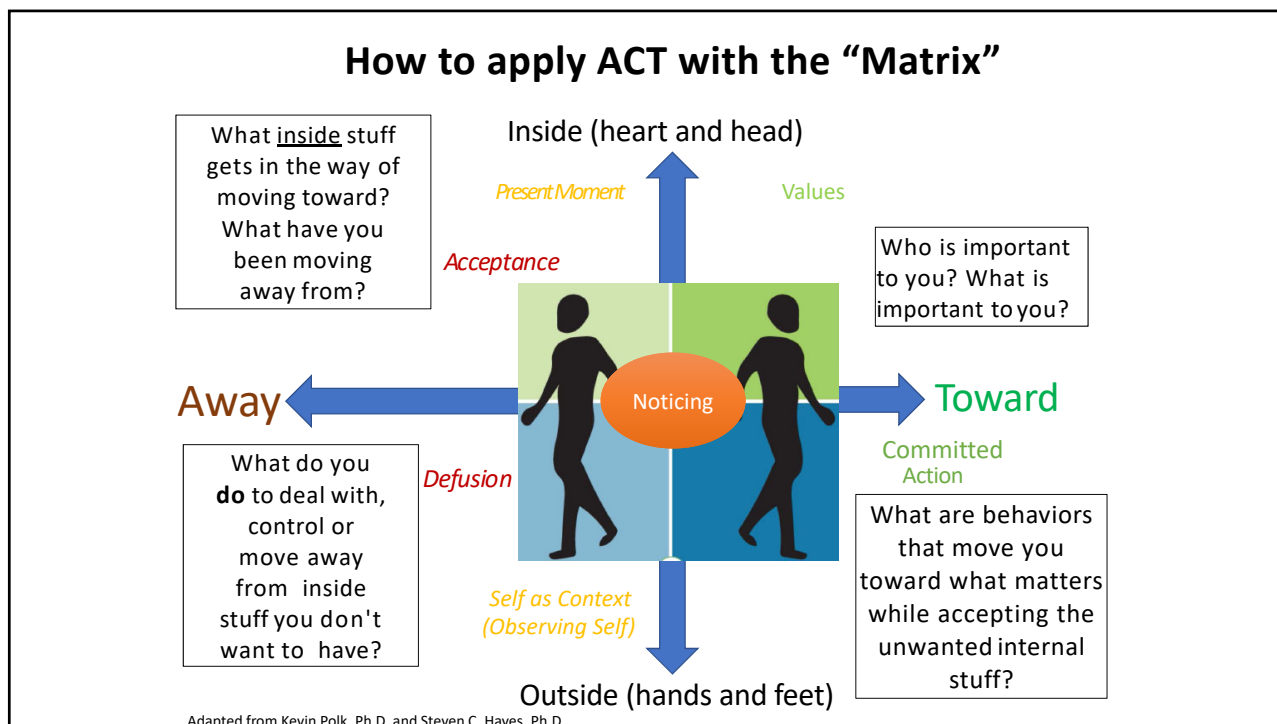
## A Process Model of Psychopathology











## Key takeaways

- Please keep in mind that you can start at any point on the quadrant depending on what information you already have.
- Where you place the emphasis as a clinician depends on what you are looking for – is there a lack of contact with values or with avoidance of unwanted feelings?

For example:

- More behaviors which move toward values (bottom right)
- More examples of behaviors “away” from values (bottom left)
- Poor connection with what matters most to you in life (top right)
- More examples of the painful experience that come up and stop you from living (top left)

Thank you for attending

We hope this information helps you in your important work.

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### Future Webinars

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- Supervision
- What clients really want ... how to engage clients

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