

# Balancing Autonomy and Care: Engaging Non-Voluntary Individuals

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## About us

**Katie Robbins, LICSW**


Social worker, therapist, educator, supervisor, mom, curious

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Social work student, (almost) therapist, animal mom, eager to learn

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## Who is a Non-Voluntary Client?



**Court Mandated**

Drug and alcohol, anger management, parenting classes



**Involuntary Hospitalizations**

Mental health crisis, suicide ideation or attempt



**Child Protective Custody**

Children and out of home placements, foster parents, or biological parents

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## Barriers to Engagement



**Distrust**

Past negative experiences, systemic oppression



**Trauma**

Defense mechanisms, survival instincts



**Lack of Control**

A mismatch on goals and outcomes



**Consequences**

Legal, financial, and emotional considerations

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## Power Dynamics

<p><b>Defensive</b></p> <p>Receiving end of client frustration</p>	<p><b>Manipulation</b></p> <p>Always on guard for deception</p>
<p><b>Respect</b></p> <p>Offering grace to clients while setting empathetic boundaries</p>	<p><b>Joining</b></p> <p>Meeting clients where they are to achieve goals</p>

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## Cultural Considerations

- Systemic Oppression
- Cultural Mismatch
- Owning Our Position of Power

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Environmental Impacts

- Rural vs. Urban
- Access to Resources

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Techniques of Engagement

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# Motivational Interviewing

*Guiding* style of communication

*Empower* people to change

*Respectful* and *Curious* approach

## Core Skills: OARS

<b>O</b> pen questions	→	Tell me more about... What happened when... Catch me up on...
<b>A</b> ffirmation	→	Build skills, behaviors, beliefs, etc. into your affirmation
<b>R</b> eflections	→	What I am hearing is... It sounds like you have tried "xyz"...
<b>S</b> ummarizing	→	We have talked about 1, 2, and 3. Is there anything I'm missing, misunderstanding, or we didn't cover?

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## Strengths Based & Trauma Informed Care

Meeting people where they're at

Understanding the client's experiences and how they guide their current behavior

Recognizing people are doing the best they can!  
**(and so are you)**

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## Case Study

A 10-year-old (Jay) with cystic fibrosis has been in the hospital for about 1 week and it is anticipated he will need to stay for a few more weeks due to complications. He has been in foster care with his paternal grandmother, Judy, however, his mother, Kayla, gained full custody again last month. During this stay, Kayla has only been up every other day for about an hour at a time. Judy visits regularly and states she has not been getting along with Kayla since she regained custody because she does not approve of her parenting. Kayla is also on probation from a drug charge and has to meet their requirements and maintain sobriety.

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## What does care look like in this case?

### Choice

#### What does Kayla have control over?

- "Avoiding the situation may actually be giving you less control."
- "What is important to you as a parent?"

#### Appropriate boundaries with family?

- "Tell me more about how you advocate for yourself and Jay."
- "How would you feel successful in this transition home?"

### Taking Sides

#### Judy may have some good points and is feeling (naturally) protective.

- "Our goal is to make sure Jay's needs are met. You have done a great job caring for him and it's clear you want to make sure that continues."
- "It sounds like it has been difficult for you in this transition of Jay going back with Kayla. What do you think is going well so far?"

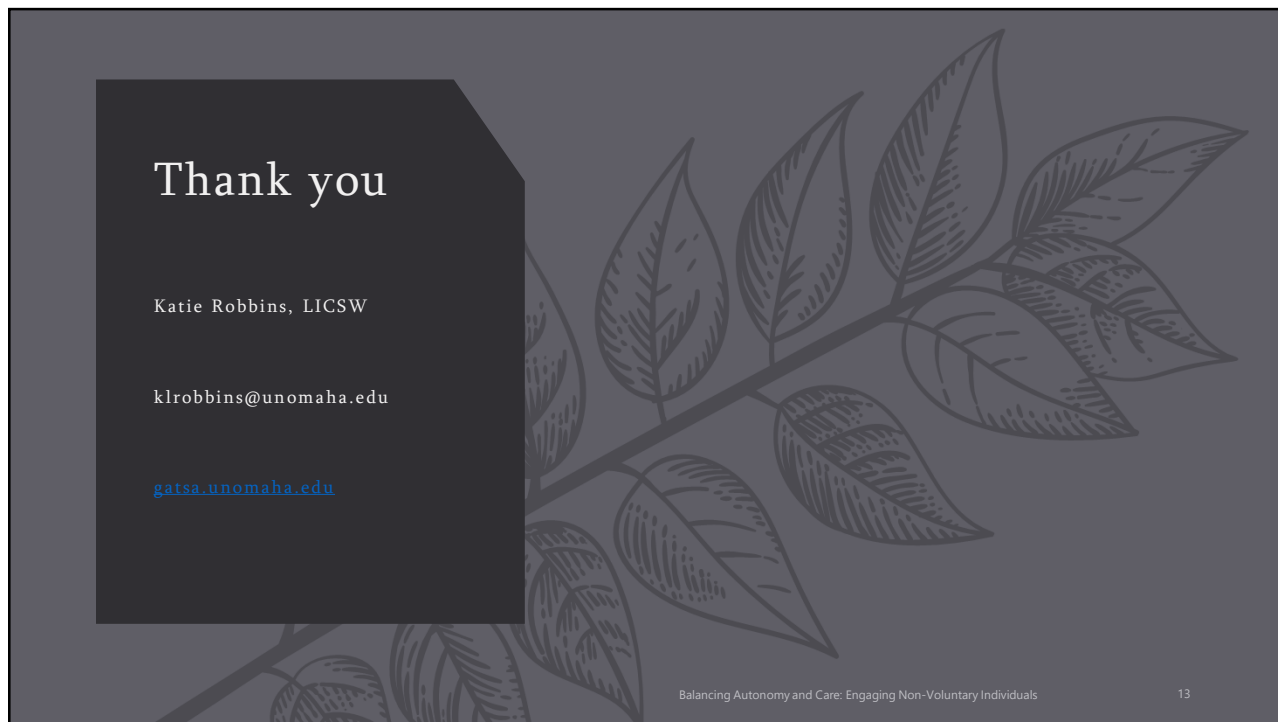
#### Setting Jay up for Success

- "Both of you are so important for Jay's happiness and health. Keeping that in mind, when would you feel comfortable asking or offering help?"

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Thank you

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# Motivational Interviewing

## Core Elements

- Partnership (Collaboration/Engaging)
  - People are the experts of their lives; we can help support and guide change
- Evocation (Empowerment)
  - People have the resources for change within themselves; we help find the 'why' and support success
- Acceptance (Nonjudgmental)
  - We seek to understand and respect the right to self-determination
- Compassion (Advocate)
  - We promote and prioritize the welfare and wellbeing of those we work with

## Core Processes

- Engaging
  - Listening, reflecting, celebrating strengths, self-determination
- Focusing
  - Shared purpose, goal setting, direct conversations about change
- Evoking
  - The 'why' of change, identifying the 'change talk'
- Planning
  - Develop a plan, the 'how' of change

## Core Skills (OARS)

- Open Questions
  - Seek to understand what the person already knows
- Affirmation
  - Recognize strengths, efforts, and successes
- Reflections
  - Active listening, rephrasing, repeating, showing empathy
- Summarizing
  - Shared understanding, highlighting key points



# Motivational Interviewing

## Praise vs Affirmation

- It's great you made it to your appointment (Praise)
- You being here today shows your commitment to your child and their health (affirmation)

## Supporting Change Talk

- What would you be willing to do?
- How could you improve...?
- What worries do you have about...?
- How would you like things to be different?
- Tell me why this feels possible for you now.

## Decisional Balance

- Barriers and Benefits of current practice/behavior and new practice/behavior
  - Can offer educational insight as appropriate

## Importance and Confidence Rulers

- On a scale of 1-10, how important is your (change goal) to you?
- On a scale of 1-10, how confident are you in yourself to follow through with (change goal)?
  
- Why are you at \_\_\_\_ and not zero?
- What might happen that could move you from \_\_\_\_ to a higher score?