

Jessie O'Brien, NAADAC: Hello everyone and welcome to today's webinar using slow solution focus brief therapy to engage the most challenging clients presented by Terri Picture.

Jessie O'Brien, NAADAC: My name is Jesse O'Brien and I am the director of training and professional development, here at NASDAQ the Association for addiction professionals.

Jessie O'Brien, NAADAC: I will be the facilitator for this training experience and with me today behind the scenes, is our training and customer care specialist Allison White.

Jessie O'Brien, NAADAC: You may have seen in the chat box, you will be addressing any issues or questions you may have that are not specifically for our presenter, in other words you have a lot of support here.

Jessie O'Brien, NAADAC: The permanent homepage for need at webinars is www.nasa.org forward slash webinars so make sure to bookmark this page, and you can stay up to date on the latest in addiction education.

Jessie O'Brien, NAADAC: Today's webinar is sponsored by CEO or less invest in your continued education with CTE for less see for less offers low cost, high quality continued education for mental health professionals.

Jessie O'Brien, NAADAC: Across the United States see for less is approved by the APA as web nayak and bcc and more for continuing education and offers hundreds of online courses with materials and certificates available anytime and anywhere by a computer.

Jessie O'Brien, NAADAC: We are using zoom webinar for today's live event, you will notice the zoom control panel that looks, just like the one on my side at the bottom of your screen.

Jessie O'Brien, NAADAC: There's three main items be aware of, on the menu, the first is the chat box, which I see many of you have found so I'm not really going to go over that but feel free to chat with each other.

Jessie O'Brien, NAADAC: Or just us if you have something you need us to see but probably if you have a question for us, you want to put that in the Q amp a box, which is.

Jessie O'Brien, NAADAC: Number two item on the on the menu that I want to draw your attention to any questions that you have for us at NASDAQ.

Jessie O'Brien, NAADAC: Any questions you have for our presenter make sure to put them in the Q amp a box, because that is where we will look for them oftentimes questions get lost in the chat box and they just fly away.

Jessie O'Brien, NAADAC: And we, and we missed them, but if they're in the q&a box, then we know we can capture them and we will get to them during the Q amp a today with our presenter.

Jessie O'Brien, NAADAC: At Terry will be taking questions through out her presentation, so when you have them they come up just put them in the Q amp a box and we will get to them.

Jessie O'Brien, NAADAC: The third item, I want to draw your attention to is the live transcript button, we will be using zoom webinar.

Jessie O'Brien, NAADAC: For closed captioning today live transcript has been enabled if you would like subtitles just click on the live transcript button and select show subtitles.

Jessie O'Brien, NAADAC: And, and you should be able to see them Lastly, in the chat box.

Jessie O'Brien, NAADAC: There is a link to the PDF if you need any handouts of our slides I think

allison put it in there, but i'm sure she will put it again, so you can access any materials for today's presentation.

Jessie O'Brien, NAADAC: Just a reminder that every webinar has its own web page that houses everything that you need to know about that particular webinar after this.

Jessie O'Brien, NAADAC: webinar is over, you can access the link to the C E quiz from that same webpage that's and the webpage is right there at the top of the screen SF BT.

Jessie O'Brien, NAADAC: dashboard dash challenging dash clients dash webinar with network.org at the beginning.

Jessie O'Brien, NAADAC: If this is your first time going through RC process, please make sure to follow the instruction guides also accessible on the same page.

Jessie O'Brien, NAADAC: That is right underneath the online CE Quisling to guide you to the process, you can also email us at CES need an org if you have any issues, please note.

Jessie O'Brien, NAADAC: And everyone's chatting, but please note, if you need your certificates say live on it, this is very important, because I know many of you do for CA approval, please make sure to complete the SI quiz within the next 24 hours and then download the certificate from your account so for.

Jessie O'Brien, NAADAC: Anyone who wants it to save live on it, make sure you take it in the next 24 hours okay.

Jessie O'Brien, NAADAC: let's meet our presenter therapy show who has over 30 years of experience working with the most challenging clients, including those who struggle with substance misuse.

Jessie O'Brien, NAADAC: Chronic mental illness and domestic violence, she studied solution focus brief therapy therapy under ensue Kimberly and Steve the chaser.

Jessie O'Brien, NAADAC: and their way of working, continues to have a strong influence in her professional life.

Jessie O'Brien, NAADAC: She was the program manager of a cocaine substance use disorder treatment Center for 15 years.

Jessie O'Brien, NAADAC: And was instrumental and shifting the treatment approach from a traditional problem focused model to one based upon solution focused tenants.

Jessie O'Brien, NAADAC: Terry is the founder of the Denver Center for solution focus brief therapy and she provides impact inspiring and educational trainings to professionals around the world.

Jessie O'Brien, NAADAC: on how to use this evidence, based approach, but the most difficult client all right Terry i'm going to stop sharing my screen and turn myself off here, and then you.

Teri Pichot (She/Her): Take it over and pull this up all right well Hello everyone, it is such an honor to be here with all of you, it was super cool to see where all of you are from I think I found almost every state, I can think of.

Teri Pichot (She/Her): In the United States, as well as several countries, and I also saw some names on there that I recognize so hello to everyone.

Teri Pichot (She/Her): And as Jesse said I tend to be more of an informal presenter so My hope is that this is as interaction or as we could possibly imagine so.

Teri Pichot (She/Her): As we're going just pop questions into the Q amp a put comments into the chat Jesse is going to be on that she may jump in and interrupt if it seems like it's a really important.

Teri Pichot (She/Her): question that we should handle right in the moment or I might stop and check in with Jesse as we go.

Teri Pichot (She/Her): To see what she is seeing in the chat box or in the Q amp a box So that is my hope so, right now, I would like.

Teri Pichot (She/Her): Everyone to put into the chat box, the answer to this question, just so I get a sense of everyone is on a scale of one to 10.

Teri Pichot (She/Her): If 10 is you would consider yourself to be an expert at solution focus brief practice you use it with every single client, you know how to word your question, so there are natural and not technique.

Teri Pichot (She/Her): You could use it with someone who's actively intoxicated you could use it with someone who's actively psychotic you would know how to use it with a young child.

Teri Pichot (She/Her): You just think in this way that would be a 10 and a one is that you really don't know much about solution focused practice Okay, no shame in our numbers, but I just want to get a sense, so if everyone could just popping number into that chat box, that would be great and.

Jessie O'Brien, NAADAC: Jesse will they read you some but they're going so fast.

Teri Pichot (She/Her): sure they are.

Jessie O'Brien, NAADAC: dead I but they're everywhere.

Teri Pichot (She/Her): they're everywhere all over.

Jessie O'Brien, NAADAC: The they're all over I don't think I saw him.

Okay.

Jessie O'Brien, NAADAC: A lot of mid range, but every every every number, so far as represented except.

Teri Pichot (She/Her): for that.

Teri Pichot (She/Her): Okay, now as you guys continue to do that my next question is, what do you like about.

Teri Pichot (She/Her): For those of you who are higher on that scale and have a sense of what it is, what are the things that you love about it, what do you like those kinds of things and Jesse as those come in just read off a few that pop in there.

Jessie O'Brien, NAADAC: focuses on the positive empowering to clients.

Jessie O'Brien, NAADAC: The only way I can work respect accuracy ease strengths focus.

Jessie O'Brien, NAADAC: Reducing defensiveness and helps clients highly resist.

Jessie O'Brien, NAADAC: It gets straight to the point.

Teri Pichot (She/Her): Excellent.

Jessie O'Brien, NAADAC: empowerment and positive focused.

Jessie O'Brien, NAADAC: Following the clients lead.

Jessie O'Brien, NAADAC: Nice briefing client centered flexible.

Teri Pichot (She/Her): Nice, and I want everyone to really listen to these, because these are such important concepts about why this way of working with clients.

Teri Pichot (She/Her): is so powerful when we're dealing with people who are struggling with substance misuse, because this population can be known to be challenging can be difficult right.

Teri Pichot (She/Her): And so to find a way that we can work with clients that really empowers that sees the human being, and not just the struggle it's amazing.

Teri Pichot (She/Her): Now Another thing I want you to pop into that chat box is where do you get stuck.

Teri Pichot (She/Her): Maybe things that you worry about using it just because the more I know about those kinds of things, the more I can try to make sure in my brief.

Teri Pichot (She/Her): hour and a half that I have with you guys, to make sure that I really do my best to touch on some of those things as I give the information so feel free to pop that into the box and just see if there's any that are standing out there, feel free to to read them out.

Jessie O'Brien, NAADAC: Like in mind we're.

Jessie O'Brien, NAADAC: tend to go off topic.

Jessie O'Brien, NAADAC: When clients are blaming others externalising blame.

Jessie O'Brien, NAADAC: trauma clients and triggers.

Jessie O'Brien, NAADAC: Someone said it feels repetitive okay and.

Jessie O'Brien, NAADAC: clients have difficulty focusing and are very tangential.

Jessie O'Brien, NAADAC: Okay, extensive trauma history worrying the questions.

Jessie O'Brien, NAADAC: Okay, when they don't see a solution.

Okay.

Teri Pichot (She/Her): All right, so excellent Thank you so much for putting this stuff into the chat box, because this really helps me, be able to point our conversation together in help away.

Teri Pichot (She/Her): Now, one thing I want to just say right at the get go someone mentioned that if the questions feel repetitive I want us to think about.

Teri Pichot (She/Her): The analogy of driving a car, when we think about solution focused practice I don't know how much you guys have thought about driving a car, probably not near as much as I'm going to tell you about it.

Teri Pichot (She/Her): But there really is only five things you do and drive a car, to be quite honest, you go forward you go backwards, you stop your turn right you turn left that's all there is to it, however.

Teri Pichot (She/Her): Most people don't think oh my gosh I can't believe I have to drive the car it so

repetitive because we're looking at the windshield right, if you look out the windshield.

Teri Pichot (She/Her): Even if you turn right seven times in a row it doesn't feel repetitive, because each of those rate turns make perfect sense in the context.

Teri Pichot (She/Her): So I realized the today's webinars really meant, just to be an introduction give you a taste, to make sure all of you can walk away with some tools.

Teri Pichot (She/Her): I want you to really understand this is more like a language or driving a car right that we don't just ask random questions.

Teri Pichot (She/Her): Each one of those questions should be completely matched to the unique human being, that is right in front of us, and when we learn to match those questions to exactly what the client just said.

Teri Pichot (She/Her): It completely takes away being repetitive, and you know, in response to about trauma, this is one of the most empowering ways that I know of working with trauma because it takes it beyond being trauma informed.

Teri Pichot (She/Her): solution focused is human being and we're going to match absolutely everything that we say to the unique human being in front of us.

Teri Pichot (She/Her): So i'm going to keep those things in mind as we get going, but i'm going to jump in I hope that's Okay, because we got a lot of material to go.

Teri Pichot (She/Her): And I trust Jesse that you're going to interrupt if there's something you're like Oh, we got to talk about this one real quick.

Teri Pichot (She/Her): So here's our learning objectives for today that's some basic kind of stuff I want to make sure that everyone really understands the difference.

Teri Pichot (She/Her): Between how we are all traditionally trained in as drug and alcohol counselors in Problem Solving and how that is a radically different way of thinking.

Teri Pichot (She/Her): Then, which is the foundational approach of solution focused practice which is called solution building.

Teri Pichot (She/Her): i'm also going to highlight some research, because, as we all know, research should be the driving force behind everything we do with her clients so i'm going to connect you in with just a little piece of.

Teri Pichot (She/Her): of some of my favorite research that is out there and, most importantly, to me, I want to make sure that each and every one of you leave here being able to identify three.

Teri Pichot (She/Her): tools or skills that you can use immediately with your clients now keep in mind, I am not just giving you three skills it's going to be three.

Teri Pichot (She/Her): That are different for each and every one of you, because not only are all of you, different human beings, but each of you are working in different such situations and with different clients.

Teri Pichot (She/Her): So I know that justin mentioned a little bit about myself, I wanted to tell you just a little bit more, and that was.

Teri Pichot (She/Her): I was originally trained as a drug and alcohol counselor in the 80s and i'm sure that I have many colleagues on this call today.

Teri Pichot (She/Her): That also were in the field in the 80s and so maybe you can reminisce with me a little bit.

Teri Pichot (She/Her): But life was really different in the 80s, everything was very generic you know everything was residential treatment.

Teri Pichot (She/Her): Everyone we just really believed you did have a problem, and if you didn't agree it's because you were in denial and we, as the professionals were right, and you just hadn't figured it out yet.

Teri Pichot (She/Her): Now I'll be honest with you as a young professional in the 80s, I didn't really feel comfortable with this top down I'm right and you're wrong kind of approach.

Teri Pichot (She/Her): And yet that was all that was being done in the 80s now as the years went by motivational interviewing came about that was better.

Teri Pichot (She/Her): It was softer it's still sent the message I'm right, and if you don't agree it's because you're not ready to really take a look at that the language was more compassionate.

Teri Pichot (She/Her): But it still had this hierarchy all top down approach that really was something that I struggled with.

Teri Pichot (She/Her): So by just a stroke of luck, I happen to run into in Zuckerberg and steeplechaser in the early 90s, and I was immediately drawn to this amazing way of working, the client.

Teri Pichot (She/Her): And something that I learned from ensue, is that I don't know that I am right as a professional and I don't know.

Teri Pichot (She/Her): That what is right for the client maybe it's abstinence that's what a lot of the research suggests, but there's also some research out there that says, some people may be able to use in a social way I don't know.

Teri Pichot (She/Her): But what I did know is that me coming into the conversation believing that I was right never was very effective that connecting with people.

Teri Pichot (She/Her): And so solution focused practice became my life saver and a way that I was able to stay in this field, this is an evidence based model.

Teri Pichot (She/Her): And in the early days that was something that we struggled with and.

Teri Pichot (She/Her): The drug and alcohol treatment program that I ran for 15 plus years we had to fight really hard to help regulators understand that this is an evidence based approach, but it is well known to be today.

Teri Pichot (She/Her): So let's jump in with our first polling question so Jesse if you want to bring that up the word brief solution focus brief therapy is defined as take your best guess here.

Jessie O'Brien, NAADAC: Okay I'm gonna give you about five more seconds to get.

Jessie O'Brien, NAADAC: Their vote in.

Jessie O'Brien, NAADAC: All right, I'm gonna go ahead and close the poll and share the results.

Teri Pichot (She/Her): Alright, so we've had guests all over the place, so important to understand the definition of brief and solution focus brief therapy and many people gas that it's less than six sessions.

Teri Pichot (She/Her): And that is a very common gas I see it's right up there with less than 10 sessions and it's really important to understand.

Teri Pichot (She/Her): that the word brief and solution focus brief therapy actually has nothing to do with time, in fact, any approach that is focused on the number of sessions is actually called time limited.

Teri Pichot (She/Her): therapy instead the correct answer is not one more session than is clinically necessary.

Teri Pichot (She/Her): So really important to understand that the word brief and solution focused practice is really about being purposeful.

Teri Pichot (She/Her): With our clients always thinking to ourselves, I don't know if i'm going to have more than today with our clients so research tells us that the majority of our clients set their own discharge date.

Teri Pichot (She/Her): That research goes on to say that the majority of those clients don't give us the courtesy of letting us know when that date was.

Teri Pichot (She/Her): And i'm sure many of you can relate to that, then, many of our clients just disappear, they drop out right so solution focused practice sets.

Teri Pichot (She/Her): Given that the majority of our clients are going to drop out of services.

Teri Pichot (She/Her): Why not act as though every single interaction might be her last because the research shows it very well might be so I want everyone to think for just a moment how would you act differently.

Teri Pichot (She/Her): In your conversations with your clients, if you thought you might never see this person again because that mindset acting as though I might never ever see this human being again.

Teri Pichot (She/Her): Is foundational of this model so feel free to pop into chat of like what might you do differently if you thought that this conversation right now might be your only opportunity.

Teri Pichot (She/Her): Just break those in there and Jesse feel free to share any of them.

Jessie O'Brien, NAADAC: I or a safety.

Jessie O'Brien, NAADAC: hey get to the problem at hand more direct very focused and targeted make sure they leave with real life tools.

Teri Pichot (She/Her): yeah.

Teri Pichot (She/Her): It was.

Jessie O'Brien, NAADAC: Already working develop an immediate plan, give them resources.

Jessie O'Brien, NAADAC: to the point.

Teri Pichot (She/Her): So does everybody.

Teri Pichot (She/Her): See how focus that makes us right because we tend to oftentimes allow our clients to go off topic just sort of verbally wander and that.

Teri Pichot (She/Her): Is oftentimes caused by the idea that time is limitless right, but if we start to think this might be our only conversation we tend to be much more direct in our conversations.

Teri Pichot (She/Her): With our clients still very compassionate I had a really good friend and colleague, they used to always say which would you rather run out of time for understanding what was wrong the client or understanding what they needed or who they were.

Teri Pichot (She/Her): And I don't know about you, but I would much rather our clients always left with what they needed and feeling a sense of connection and that they receive.

Teri Pichot (She/Her): I don't always have to understand exactly everything about their problem okay just something to think about.

Teri Pichot (She/Her): So I know many of you are probably very familiar with this research, right here, but I love this research, so I wanted to share with you.

Teri Pichot (She/Her): That Miller Duncan and hubble did some research many, many years ago that looked out what causes change with our clients, regardless of what theoretical model they use.

Teri Pichot (She/Her): And here's what they found that there was these four main elements The first one is called extra therapeutic factors that means.

Teri Pichot (She/Her): Everything that the person brings into the room it's their way of thinking, their belief system, their culture, their gender, their way of being all of that accounts for 40% of our chance for success with the client.

Teri Pichot (She/Her): relationship in the therapy is 30% and then our techniques only 15 and hope and placebo.

Teri Pichot (She/Her): Is the remaining 15% so we went along for quite some time, believing that this was at the heart of what causes change for clients.

Teri Pichot (She/Her): And then, as it happens in many research they we did it just to double check and make sure that they were still on point and what they discovered was this actually was not correct.

Teri Pichot (She/Her): And here's what they discovered is that when actually causes change with our clients it's not 40% for extra therapeutic factors it's actually 87% of our chance for change.

Teri Pichot (She/Her): is caused by what the client brings into the room and the remaining 13% of our chance for success is everything else from our relationship.

Teri Pichot (She/Her): To our therapeutic model, the alliance all of those kinds of stuff is only 13% of our chance for change.

Teri Pichot (She/Her): So this is sort of a good news bad news kind of situation right, so the good news is that the client is automatically bringing into the room.

Teri Pichot (She/Her): 87% of what we need the bad news is, we have to be very, very skilled, not to mess that up so one of the things.

Teri Pichot (She/Her): Of the many things that I love about solution focused practice is solution focused always build on each unique human being, that it's in front of us.

Teri Pichot (She/Her): And because of that it's well positioned to be one of the best models to be able to not mess up that 87% it's a really hard thing to do is to not try to get in there and change the way the client thinks or change the clients belief system.

Teri Pichot (She/Her): And yet still be effective, and that is exactly what solution focused practice

does is really capitalize on that 87% so let's go on to the next polling question solution focus brief therapy was created by.

Teri Pichot (She/Her): And if you've already been listening i've already given away this answer.

Jessie O'Brien, NAADAC: All right, i'll give about five more seconds for people to get their guesses in.

Teri Pichot (She/Her): All right, I have high expectations of this one.

Teri Pichot (She/Her): And we did it both AMC so into Kimberly and Steve to shay's are they were the original founders, this was a model that was originally.

Teri Pichot (She/Her): created in the late 1970s early 1980s, by both of them, they were both social workers so you're going to see a lot of social work influence in this model, as we go forward here.

Teri Pichot (She/Her): let's go directly to our third question, so the primary motivation for creating solution focus brief therapy was.

Teri Pichot (She/Her): Once a little trickier.

Jessie O'Brien, NAADAC: Alright, about five more seconds.

Teri Pichot (She/Her): Alright, so the correct answers to discover what works in therapy and the second answer that got the highest number or percentage of votes, the effective to effectively work with managed care that's a.

Teri Pichot (She/Her): Very common guess but that's actually not correct, so it happens to be that what happened was ensue and Steve.

Teri Pichot (She/Her): knew that clients primarily dropped out of treatment, regardless of what the presenting problem was, and so they wanted to learn to be more efficient, with the time that they had with clients, so what they decided to do was to observe these sessions with clients permission and.

Teri Pichot (She/Her): Using a one way mirror Steve to share with some other researchers would sit behind that one way mirror.

Teri Pichot (She/Her): And they would observe the sessions, and they would make a list of everything that into asked the clients that really seem to work.

Teri Pichot (She/Her): as defined by became more engaged engaged and more change talk took the information from therapy and applied it into their life.

Teri Pichot (She/Her): And they made a second list of all of the questions that were asked that didn't seem to be helpful, or even made it worse, as defined by maybe they became more resistant, or maybe they shut down.

Teri Pichot (She/Her): Or maybe it didn't result in change and, at the end of these sessions that you both list of questions to ensue and said well these questions really seemed.

Teri Pichot (She/Her): To make a difference let's ask more of these kinds of questions these questions didn't seem to help and even made it worse let's stop asking these questions and let's see what happens there.

Teri Pichot (She/Her): And after doing this for quite some time they ended up with a very short list of questions that always seem to work and they called it solution focus.

Teri Pichot (She/Her): brief therapy now, it turns out that of course managed care loves to be efficient,

they like to do things with the recession so oftentimes.

Teri Pichot (She/Her): They oftentimes will mandate, so you have to use solution focused practice because, quite frankly, and get the same results in shorter time, but that was not their original motivation so really important clarification there.

Teri Pichot (She/Her): So let's talk about what is the difference between Problem Solving and solution focused Okay, because we are all classically trained in problem solving.

Teri Pichot (She/Her): So in Problem Solving we always gather all this information we evaluate the problem we diagnose the problem we apply known information about it.

Teri Pichot (She/Her): And it's also really important to understand that strength based is part of problem solving it is not part of solution focused now.

Teri Pichot (She/Her): I like pictures, I hope that is okay with everybody, I think the more that we take pictures and images, the more it's going to make sense to us.

Teri Pichot (She/Her): So, again Problem Solving we're going to analyze this brick wall, how many bricks.

Teri Pichot (She/Her): Is it made of what's the mortar mean out of how tall is the wall how deep is the foundation, how long is this wall been here and we go on and on and on analyzing this brick wall.

Teri Pichot (She/Her): Now, if we are strength based again that's part of Problem Solving after you analyze the brick wall you turn and you analyze this person.

Teri Pichot (She/Her): How high, can you jump what's your balance like Have you ever been on a pogo stick, would you like to be on a pogo stick.

Teri Pichot (She/Her): As we're trying to find this person strengths and resources that we can use to help this person get up and over this wall.

Teri Pichot (She/Her): Now here's the good news about Problem Solving this model works, really, really good with mechanical things, this is one of the best ways.

Teri Pichot (She/Her): To work when we're dealing with a mechanical problem right but here's the bad news about this is when we apply this to behavior it starts to fall apart.

Teri Pichot (She/Her): So, for example, let's apply this to depression let's say that 20 of us on this call are depressed or be depressed for the same reasons, probably not.

Teri Pichot (She/Her): But now let's say something weird happened wrong same place at the same time, we have the exact same diagnosis is it going to take the same solution.

Teri Pichot (She/Her): Probably not because understanding why we're depressed does not tell us what we need to do.

Teri Pichot (She/Her): Some of us might need medication, some of us might need to change your diet, some of us may need to change our exercise or who we hang out with but all of us as human beings are very.

Teri Pichot (She/Her): Very different The same is true of addiction, when I was originally trained as a drug and alcohol counselor I was trained as though everybody's.

Teri Pichot (She/Her): struggle with addiction was identical, but it's not every single human being recovers differently so now let's take a look at what solution building s and if it's okay i'm going to go

straight to the picture.

Jessie O'Brien, NAADAC: there's a couple there's.

Jessie O'Brien, NAADAC: A couple questions just.

Jessie O'Brien, NAADAC: hit Okay, so one and relations what you're just talking about please differentiate between mechanical versus emotional problem.

Teri Pichot (She/Her): Oh Okay, yes, thank you for asking that we cannibal would be like if somebody says, I don't know who to call to get a resource, or I don't know.

Teri Pichot (She/Her): I need to understand information about something or, for example, HIV prevention is mechanical okay it's the same for everybody, HIV prevention.

Teri Pichot (She/Her): Right, but once you know how to prevent HIV, but then you don't do it that's a behavioral issue okay so some things are just cut and dry and it's usually.

Teri Pichot (She/Her): Health related meaning like preventing HIV.

Teri Pichot (She/Her): resource related how to fill out a form those kinds of things everything else, when it comes to behavior it's the following through with it or let's take diet, for example.

Teri Pichot (She/Her): don't, we all know that the secret to losing weight is eating less and moving more that's a mechanical thing, but I don't know how you guys are but I struggled to implement.

Teri Pichot (She/Her): that's a behavioral issue okay same thing with our clients they know what they should do that's mechanical but getting them to do it is behavioral okay great question anything else there Jesse.

Jessie O'Brien, NAADAC: And nothing.

Jessie O'Brien, NAADAC: Totally related to what you were just so we can hold off till you're ready.

Teri Pichot (She/Her): Okay perfect alright, so now let's take a look at what solution building this, which is the thinking behind solution focused practice so people still come to us with problems okay.

Teri Pichot (She/Her): But instead of analyzing we take the person in their imagination up and over this wall to this place in which everyone in this person system agrees that things are working.

Teri Pichot (She/Her): And then we work backwards to figure out how did they do it, so a key difference between Problem Solving and solution focused Problem Solving is trying to get rid of this wall.

Teri Pichot (She/Her): solution building is actually focused over here is trying to help the person to create a preferred future so let's take this back into substance misuse.

Teri Pichot (She/Her): kind of environment, so instead of trying to figure out why this person is struggling with substance misuse.

Teri Pichot (She/Her): We want to figure out in this future place and which everyone in this person's life, whose opinion matters agrees.

Teri Pichot (She/Her): that things are good substances are no longer an issue for that person, what does that look like so we're going to try to create that future.

Teri Pichot (She/Her): and work backwards now this idea of everyone in this person system whose

opinion matter is absolutely instrumental in making this work and so when we started out, and I said when you getting stuck there was.

Teri Pichot (She/Her): I can't read my own writing here, but something about they don't see it's a problem or something like that.

Teri Pichot (She/Her): And so that's where using the system is going to help resolve that so let's talk a little bit more about the system.

Teri Pichot (She/Her): So here is the clients in front of us, but instead of just looking at that person in isolation.

Teri Pichot (She/Her): We need to look at that person within the context of that person's life, so the next ring here is their immediate family or their friends.

Teri Pichot (She/Her): But keep in mind this doesn't have to be biological family, this can be a family of choice, even people who are struggling.

Teri Pichot (She/Her): With homelessness have this ring because it's, whoever they feel safe enough to fall asleep next to okay that's this right here.

Teri Pichot (She/Her): This ring here is all the formal systems that are not you so this might be probation this might be child welfare if a person is employed this might be their employer.

Teri Pichot (She/Her): If this person if it's a teenager and they're going to school, this might be the educational system if they're struggling with health concerns this might be the medical system but it's all of those formal systems that are not you.

Teri Pichot (She/Her): know the Community that is all of the people, the person runs into day to day kind of stuff that they don't know as well.

Teri Pichot (She/Her): Now they very well may know their names so might be their physical neighbors, but it also might just be the people they bump into.

Teri Pichot (She/Her): As they walk down the street so, for example, when I am driving down the road everyone on the road.

Teri Pichot (She/Her): next to me, is in my Community ring now hopefully I don't meet them because that means that I bumped into them or something like that, but we're we impact each other.

Teri Pichot (She/Her): Also, all of the laws that govern the client are right here hi now all of us, including our clients go through life with this Community ring in work.

Teri Pichot (She/Her): Now, as soon as we get involved in our clients life this last ring forms that I call regulation, this is where all the policies and procedures are that govern us as professionals, this is where our code of ethics is this is where standard of care is all of those kinds of things now.

Teri Pichot (She/Her): One of the most exciting parts of this is we personally are outside of this system now in the literature, this is called neutral or the not knowing stand high now.

Teri Pichot (She/Her): In today's culture with bringing in social justice and things like that which is so important to do.

Teri Pichot (She/Her): They also use the term neutral, but they use the term neutral in a very different way than we historically have used it.

Teri Pichot (She/Her): In solution focus works, I want to clarify that so in social justice, the term

neutral oftentimes has a very negative connotation.

Teri Pichot (She/Her): of turning a blind eye, not using my power and influence to do what's right to fight for those who were in justices happening, that is not what i'm talking about when we talk about neutral.

Teri Pichot (She/Her): Well we're talking about when you talk about neutral is having great respect for someone else's world view to understand that what I might do in my life is not necessarily the correct thing for you in your life.

Teri Pichot (She/Her): And so, because of that we have to go into that not knowing stance and my role as a counselor is to use questions to help the person.

Teri Pichot (She/Her): really think about is something good or bad for that client, is it working for that person, I want to get them to think critically, so instead of me, telling them.

Teri Pichot (She/Her): I want them to turn on their brain and really start to evaluate now, this also is going to get we're going to talk about relationship questions here a little bit, I want to highlight this a little bit.

Teri Pichot (She/Her): Is that when i'm working with my clients if they say something like oh it's totally fine for me to go to the bar and drink and then get in my car and drive home.

Teri Pichot (She/Her): I have to think about who in the system would disagree with that cleans now hopefully it's somebody really close to the client like bb.

Teri Pichot (She/Her): A life partner that is worried about them, or, if nothing else it's definitely going to be the police officers.

Teri Pichot (She/Her): And the other drivers right, but the more I can get close to the client, the more powerful the questions will be, and then I step into that ring.

Teri Pichot (She/Her): And I get curious so, for example, let's say that they say that their partners really worried about them getting home safe, I might say so, what would your partner, see the lets them know.

Teri Pichot (She/Her): I don't need to worry about my partner getting home safe tonight.

Teri Pichot (She/Her): or I might say, what would the other drivers on the road see that would let them know this is a safe sober driver I don't need to worry about driving next to that person.

Teri Pichot (She/Her): So what this does by using the system allows us to really get the client to take off those blinders that addiction oftentimes puts on to our clients.

Teri Pichot (She/Her): to strip them away to get them to think from other people's point of view, so not only does it help us to stay in the not knowing stance, but uses her questions to help turn their brain on as well.

Teri Pichot (She/Her): So another way to think about the same material is by looking at this graph this was something that ensue Kimberly.

Teri Pichot (She/Her): drew on a one of the boards very first time that I went to one of the trainings and I met her, and it has stuck with me, ever since I want us to think of this pink line here.

Teri Pichot (She/Her): Being the ups and downs of a client's life hi the traditional way of working, is we start asking these green circle questions oh my gosh what happened here what caused the slide.

Teri Pichot (She/Her): What happened here what happened that caused that relapse so these questions might be what were your triggers what caused the relapse those kinds of questions.

Teri Pichot (She/Her): Now solution focused is very different, instead of focusing on these green circle questions we're going to focus on the blue circle questions.

Teri Pichot (She/Her): I want to know how did you stop the relapse how did you turn that around to go back up because one of the most important secrets of working with this population is this.

Teri Pichot (She/Her): Every one of our clients stops using as often as they start they are equally skilled at stopping as they are starting now we have to remember physics is alive in our conversations the success, whatever we focus on gets bigger.

Teri Pichot (She/Her): So one of my challenges to you is what do you want to get bigger in your clients life, their ability to stop where their ability to start.

Teri Pichot (She/Her): So this is one of the major shifts in solution focused practice really empowering them to think about how did you stop and call your sponsor how did you get yourself.

Teri Pichot (She/Her): To go to that meeting, how did you stop at six beers instead of going to seven eight or nine or even relapsing on meth as well now keep in mind, this does not justify the relapse at all it's just focusing on the stopping.

Teri Pichot (She/Her): So let's move to the fourth polling question here solution focus brief therapy is basically the same as motivational interviewing, what do you guys think about this.

Jessie O'Brien, NAADAC: Alright i'm going to get about five more seconds and Terry we do have a few questions in the inbox whenever you want to take him.

Teri Pichot (She/Her): Perfect Thank you Jesse.

Jessie O'Brien, NAADAC: and share the results.

All right.

Teri Pichot (She/Her): Excellent most people got the correct answer which is false, these are radically different ways of thinking, however.

Teri Pichot (She/Her): They both have very compassionate and genuine language and so oftentimes they are confused, so I want to just show you a little bit about how these are different.

Teri Pichot (She/Her): And then we're going to pause for a moment and just pick up some of those questions before we move into a handful of tools that I want to make sure that you all leave with so really important to understand.

Teri Pichot (She/Her): that what we do when clients speak as counselors is very different, when we are using motivational interviewing versus solution focused practice.

Teri Pichot (She/Her): So as clients are speaking, we are constantly doing one of three things we are either keeping the claims actual words.

Teri Pichot (She/Her): Over deleting those words or we're changing those words so let's take a look at what happens with motivational interviewing actually with most of the other problem focus models.

Teri Pichot (She/Her): They actually do not keep a lot of the clients actual words, but they do delete out a lot and they definitely change a lot, this is a lot of that.

Teri Pichot (She/Her): Reflection summarizing paraphrasing because there is a belief in motivational interviewing and some of the problem focused models that, if I can repeat back what you just said in my own words that that's a sign that i'm hearing you.

Teri Pichot (She/Her): But now let's take a look at what solution focused practice does, we have a very different pattern.

Teri Pichot (She/Her): We only do one of two things we can either keep the clients words or we delete the clients words but we work really hard not to change.

Teri Pichot (She/Her): clients words because we actually do not believe that if I repeat back what you say in my own words that that is actually a sign.

Teri Pichot (She/Her): That I heard you at all in fact what we believe that is is looking at the client through our world view because.

Teri Pichot (She/Her): My word for something is different than yours and if I repeat back your word it touches on the emotion and the imagery and everything that goes with that word.

Teri Pichot (She/Her): If I substitute it from my work i've just taken the client from an emotional place to a cognitive place and specifically with clients that are already feeling judged and defensive.

Teri Pichot (She/Her): oftentimes that's going to increase resistance, now the kind of words that we keep our any words that is based on what the client wants what's working for them.

Teri Pichot (She/Her): Or what is important if the word that the client says doesn't meet that criteria we're going to just drop that way.

Teri Pichot (She/Her): Right now there's a second part of this, that when clients are talking they're always talking about one of three subjects they're either talking about problems i'm sure we all can recognize when that's happening.

Teri Pichot (She/Her): outcome, or the things that they want and process or the things that they've tried in the past to get to that outcome or things that they think they need to.

Teri Pichot (She/Her): To get to that outcome in the future so again in motivational interviewing and other problem focus models.

Teri Pichot (She/Her): What we typically do is we just follow along if a client is talking about problems we asked about problem right.

Teri Pichot (She/Her): If they're talking about outcome we ask about outcomes same thing about process but solution focused again is radically different.

Teri Pichot (She/Her): solution focused if a client is talking about problems we actually don't ask any questions, however, we don't ignore it.

Teri Pichot (She/Her): As a person is talking about problems we're going to show great respect and great empathy.

Teri Pichot (She/Her): As the talk, but i'm not going to ask questions because remember what physics says happens when you focus on something it gets bigger.

Teri Pichot (She/Her): I want to show compassion and empathy but I don't want to make the problems bigger.

Teri Pichot (She/Her): However, when they talk about outcome or process, I am going to ask

questions about that so, for example, if someone is talking about a relapse and how difficult.

Teri Pichot (She/Her): It has been I might say something like oh my gosh I am so glad you're here wow that sounds really difficult.

Teri Pichot (She/Her): Here, how I didn't ask any questions about it, I just made compassion statements and showed great respect and empathy now when it's my turn to talk.

Teri Pichot (She/Her): My question might be something like to how are you able to even remember you have this appointment, some people may have forgotten how are you able to get here today.

Teri Pichot (She/Her): Does everyone here how i'm focused on those blue circle questions, focusing on how they were able to move forward, how they're able to attend treatment to stop the use to go back to recovery okay.

Teri Pichot (She/Her): All right, Jesse let's just take a moment here for questions before we jump in to some more practical tools, what do we got.

Jessie O'Brien, NAADAC: Well, probably people would have some questions there was one about could it be used at the Gulf solution focus brief therapy is not to help the client change their thought processes can this model be implemented with CB CT and then someone also asked about.

Jessie O'Brien, NAADAC: Useful with EMI.

Jessie O'Brien, NAADAC: As well sounds like their local.

Jessie O'Brien, NAADAC: directory so Those are two.

Teri Pichot (She/Her): let's talk about those this concept in general, so.

Teri Pichot (She/Her): i'm a firm believer in evidence based practice, as I mentioned, this is an evidence based practice so let's think about it, the two models that were mentioned EMI and cvt are also evidence based practice.

Teri Pichot (She/Her): What do you get when you mix to evidence based practice together.

Teri Pichot (She/Her): A non evidence based practice so i'm a firm believer, we should not be mixing models because we're essentially destroying the evidence base.

Teri Pichot (She/Her): Of the models, but it doesn't mean that you can't have several models just step in and out of them, based on your comfort level.

Teri Pichot (She/Her): of using them so again, I like analogy so let's take different pairs of shoes I realize you can't see my feet and I can't see you or your feet.

Teri Pichot (She/Her): But I trust that if you're wearing shoes right now you're probably wearing two shoes that match.

Teri Pichot (She/Her): we've committed to this pair of shoes right and I have done the same thing, but I own a lot of pairs of shoes and I pick this pair of shoes, not because they're better.

Teri Pichot (She/Her): than any other pair of shoes that I own but they work good with the outfit they're comfortable with what i'm doing, but after i'm done teaching this webinar.

Teri Pichot (She/Her): i'm probably going to change my pair of shoes and take my dog out for a walk and i'm still going to wear two shoes that match Okay, so I want us to really be purposeful.

Teri Pichot (She/Her): When you step into solution focused practice step into it with both feet and if you decide, you want to slip onto your cdt shoes take off your solution focus shoes and put on your CV tissues same thing with EMI and that really keeps the validity of these models into.

Teri Pichot (She/Her): Anything else Jessie that we should touch on right now.

Jessie O'Brien, NAADAC: Sure um.

Jessie O'Brien, NAADAC: Someone asked people were asking about the miracle question and the magical question, and if that's sort of the question that's asked on that wall image, but then someone also asked, please share the list of the best questions the researchers distilled from the one way mirror.

Teri Pichot (She/Her): Okay, so really, really important this is one of the biggest miss and it's one of the biggest marketing scams out there anything that says here's a list of solution focus questions.

Teri Pichot (She/Her): be really, really careful when anybody offers you a list of solution focus questions, because there is no such thing as a list of really.

Teri Pichot (She/Her): perfect solution focused questions I want you to think of it this way, if you wanted to have a really good dinner conversation with your family.

Teri Pichot (She/Her): which would make for the better conversation if you made a list of 50 questions you're going to ask your family in advance, or if you really thought about what kind of conversation, you want to have with your family.

Teri Pichot (She/Her): So I say that because we can't just read a list of solution focus questions it's about how we think so, even though, yes, the miracle question.

Teri Pichot (She/Her): was one of the questions that was discovered when people just pull out that question and try to ask it it really works.

Teri Pichot (She/Her): It only works when it's perfectly matched for the person in front of you, so instead of thinking about what are the questions you should ask.

Teri Pichot (She/Her): I want you to instead be thinking about how do I use these ideas these concepts to connect with the unique human being in front of me.

Teri Pichot (She/Her): Okay that's what we want to do just like it's think about this learning a new language we can't say here's the top questions in English, you should ask.

Teri Pichot (She/Her): Instead, you have to learn grammar and how to structure your sentences and then, once you know that you just have a conversation in the language okay.

Teri Pichot (She/Her): And it's a really tough thing for people to grasp but it's so so important, and in a moment here i'm going to go through just a handful of very specific tools.

Teri Pichot (She/Her): And i'm not going to be telling you here is like the miracle question or that i'm going to tell you how do you use this tool, but then I want it to be in your words, your language so you can perfectly match it to each and every client uniquely.

Teri Pichot (She/Her): Alright i'll be good to go forward for a little bit Jesse you think.

Jessie O'Brien, NAADAC: let's see.

Jessie O'Brien, NAADAC: yeah there's there's a couple, we can wait to the end.

Jessie O'Brien, NAADAC: One question, so what is the best way to determine that solution focus brief therapy is the best tool for our client.

Teri Pichot (She/Her): um so here's what the research actually shows this is very, very different than other models to date, they have not yet found a population or presenting problem.

Teri Pichot (She/Her): The solution focus does not work with that's very unique to this model because it's so perfectly matched to each person.

Teri Pichot (She/Her): Other models because it's matched to a problem they're able to say yes don't use this model.

Teri Pichot (She/Her): With this problem, or that but solution focused is very different, that they haven't found a population with which this does not work, so instead it doesn't mean it's going to work with every single person.

Teri Pichot (She/Her): Just like you know I can't connect with every human being right some people may prefer to work with somebody else, but we have to understand if we think of it like a language.

Teri Pichot (She/Her): it's about your skill in applying the language, I am very effective with really tough claims today were 30 years ago, I was not did the model change nope my skill level in using the model changed hi so it's very unique in that way.

Teri Pichot (She/Her): let's talk about these specific tools so keep putting stuff in the question and answer box and we will save time at the end, so I want to talk about curiosity because.

Teri Pichot (She/Her): The role of a therapist really is delete from behind through curious questions it's a posture of curiosity respect non mythologizing you cannot think you know and be curious, at the same time.

Teri Pichot (She/Her): So oftentimes in other models we're so used to giving information we're so used to teaching people.

Teri Pichot (She/Her): hi solution focused we actually want to use our questions to discover it's a radically different way to work so in solution focus we actually don't do a lot of formal education.

Teri Pichot (She/Her): And let me tell you why i'm going to use an example using my therapy dogs if that's okay.

Teri Pichot (She/Her): So, like, I have this wonderful therapy dog named tests that i'm training, she is three years old, she and I have been doing classes for quite some time and again I wouldn't want to think about something, do you think this dog never sat down before I taught her how to sit.

Teri Pichot (She/Her): Do you think she never laid down before I taught her the command down or that she never rolled over before I taught her how to roll over.

Teri Pichot (She/Her): Of course, she did she came to me, knowing all of those kinds of things, so one might wonder what on earth, am I trying to teach her that i'm actually not teaching her how to work, her body i'm actually helping her to really think through.

Teri Pichot (She/Her): What she wants the outcome which, in her mind treats raining from the sky is what she ultimately wants what is she choosing to do when she gets that outcome.

Teri Pichot (She/Her): So let's take an example of a client who is anxious, do you get clients never taken a deep breath before you taught them breathing exercises.

Teri Pichot (She/Her): Do you think they've never taken a timeout before you taught them the school

of course they.

Teri Pichot (She/Her): But they probably never done it in a purposeful way, so what the solution focus questions are really doing is thinking about what is that ultimate outcome that they want maybe they want to feel calm.

Teri Pichot (She/Her): And then, to ask them what kind of thoughts are going on in their pre when they're feeling call What are they doing with their body, how are they breathing in those moments.

Teri Pichot (She/Her): same thing when it comes to substance misuse the think about in this future place what role would alcohol or drugs play, and if they say I wouldn't even want to be thinking about it.

Teri Pichot (She/Her): I just wouldn't want it to be part of my life so then didn't really get them to think about in those moments when alcohol and drugs are just not even part of your life, what kind of thoughts are in your What do you do, who are you hanging out with.

Teri Pichot (She/Her): What kind of activities are you engaged with.

Teri Pichot (She/Her): So, by doing that you're helping them to really discover what they already know about themselves now they're much more likely to follow up with these ideas that came from them they're also much more culturally sound because it came from their worldview.

Teri Pichot (She/Her): hi so some helpful kinds of questions, just to get you going in this direction, remember don't just start reading these questions and quoting them with the client, this is just to get you thinking about.

Teri Pichot (She/Her): How You might ask this what will you have done, to better the odds, that this tool will work for you, or what would be different afterward that will let you know how this was a really good choice for me.

Teri Pichot (She/Her): What would you have done to keep this resource working because again solution focus we don't just give resources with that's the mechanical part we make sure they understand it.

Teri Pichot (She/Her): But the application is the more important thing so once they are aware of something to say how would you have used this in the future hi.

Teri Pichot (She/Her): So when to use this we are so tempted to give concrete resources when it's not urgent, so of course if it's urgent give resources.

Teri Pichot (She/Her): But we don't want to get into this fix that kind of mentality, we want to really empower the clients pull from the clients get curious about what works for that unique human being.

Teri Pichot (She/Her): Again it's this concept of matching to be unique human being, that makes this model work with any type of population.

Teri Pichot (She/Her): Because again it's not expert based So if I was telling you here's what you should do that's what's going to make a model not be effective were appropriate for certain population that's missing.

Teri Pichot (She/Her): All right, let's talk about working from the solution side so someone mentioned the miracle question the miracle question is one of the tools that would go here another miracle question is far too complex and detailed.

Teri Pichot (She/Her): For a 90 minute webinar so that's something that I only introduced when I do the two day classes so we're not going to be talking about the miracle question.

Teri Pichot (She/Her): In detail here, but that is an example of these kinds of questions where we're working from the solution side, so what we're talking about going back to that wall it's about taking the client in their imagination up and over that wall.

Teri Pichot (She/Her): To that place where everyone in that system agrees that things are good now we're going to target here a quality skill or trait that would be different for that client, we always need to define what would be different so, for example.

Teri Pichot (She/Her): If i'm working with someone who is struggling with Bethan fetterman misuse or something like that and they're saying I just I want to be able to manage the cravings I don't want to keep relaxing so I might say so in this future place when you're able to manage those creepy.

Teri Pichot (She/Her): What would that look like, how would you do that now I want everyone to hear i'm talking in past tense language, really, really important what I don't want to do is I don't want to say, what do you need to do.

Teri Pichot (She/Her): Because if I say, what do you need to do you're targeting the logical part of their brain and the person will almost always say I don't know.

Teri Pichot (She/Her): If I knew I would have done it but there's something powerful about talking in past tense language, how would you have done it it's empowering it sends the message of course you can do it, I believe in.

Teri Pichot (She/Her): And then, together we get to think outside of the box to discover how they would have done.

Teri Pichot (She/Her): hey so when to use this tool, quite frankly, anytime you're stuck because we're always stuck with the problem or that brick wall so just go over it, and just help them imagine that they didn't.

Teri Pichot (She/Her): have them describe it to you look backwards, it increases hope increases traction.

Teri Pichot (She/Her): Such a powerful way at work.

Teri Pichot (She/Her): Now this next one verbal pass I love this image of this idea of a fork in the road right, because every single time we're talking to the client, we have a choice, are we going to go down that path.

Teri Pichot (She/Her): About what's wrong with broken what's not working or are we going to go down the path about what the client wants what's working what's important to them.

Teri Pichot (She/Her): Okay, so solution focus is always going to go down this path, about what they want right so really ask yourself every single time you're going to go down that path.

Teri Pichot (She/Her): about the bad choices, the whys of it, what what is their thinking behind that and that's going to him crease that according to physics it's going to make.

Teri Pichot (She/Her): That negative emotion correlated with that increases well but in solution focus we're always going to go down this path.

Teri Pichot (She/Her): About what's helping the client get closer to what they want the successes, the good decisions wise behind the good choices, for example, clients comes in, and they say to me, I just want to stop using math.

Teri Pichot (She/Her): Most people would just go forward and start Problem Solving solution focuses

very different i'm going to ask a why question right there, and this might sound a little weird but i'm going to say what why, why would you want to stop using that.

Teri Pichot (She/Her): I want to push and challenge people under good decision, I can push really hard on good decisions and get away with it, I when I say why do you want to quit using now.

Teri Pichot (She/Her): Most of my clients will say you know what I really don't want to, but I have to does everyone feel how I just got.

Teri Pichot (She/Her): An answer that the client was giving because they thought that was the correct answer, and now I have a genuine answer.

Teri Pichot (She/Her): And then I can say Okay, so why do we need to I gotta get my kids back and i'm going to push on that a little bit further as well, and say you know I haven't met your kids and I, I can only imagine how amazing your kids are, but what is it about your kids that make them worth giving up.

Teri Pichot (She/Her): You see how i'm making them fight for their good decisions it really empowers clients in an amazing way so.

Teri Pichot (She/Her): This is bigger than when to use this as a way of thinking it's a way of working with our clients, but it's also very helpful, specifically when you're becoming overwhelmed and feeling.

Teri Pichot (She/Her): hopeless about the clients problems again stop asking about the green circle questions ask about the blue circle questions.

Teri Pichot (She/Her): Both are always there okay we're anytime another professional is become negative about the client, we want to honor and validate what they're saying and say how so.

Teri Pichot (She/Her): How are they getting themselves even show up for treatment given everything that's going on, so I want to focus on the showing up rather than the negativity hey another time that this is really powerful is anytime someone is discouraged during a conversation.

Teri Pichot (She/Her): And I hope it's okay i'm just gonna power through these last three just because these last two and then we're going to.

Teri Pichot (She/Her): dive deep into all of those questions, I just want to make sure that I don't run out of time, of going through this material.

Teri Pichot (She/Her): So the fast forward i'm going to be honest with you the fast forward is probably my favorite tool in working with clients who are struggling with substance misuse.

Teri Pichot (She/Her): it's oftentimes around a specific event and most are oftentimes our clients have very clear events that they're struggling with.

Teri Pichot (She/Her): But it doesn't have to be around a bit so, for example, a lot of my clients are involved, child welfare, the court hearings probation.

Teri Pichot (She/Her): they're stressed about family visitation all of those kinds of things fast forward really is like hitting the fast forward button on a.

Teri Pichot (She/Her): On netflix or something like that it doesn't change the story it just moves you.

Teri Pichot (She/Her): Through the story, so we want to fast forward, but then define what's different because if you don't define what's different.

Teri Pichot (She/Her): people tend to take their pain and problems and just move them into the future,

so let's say that they're really stressed and wanting their kids back.

Teri Pichot (She/Her): From child welfare, then I might say so let's suppose you were able to convince the courts, your caseworker everybody that wow these children are safe here, for they don't need to worry about substances, what would your caseworker see.

Teri Pichot (She/Her): And now the person is really starting to think in a concrete way again from that systems point of view.

Teri Pichot (She/Her): Right about what would the caseworker see what what the Court see that lets them know that not only did they just get.

Teri Pichot (She/Her): A clean urine screen, but how do they know that that you're in screen can be trusted that this person is really in recovery term what would be different about that.

Teri Pichot (She/Her): Okay, so really, really helpful to get them to really imagine it and to empower them.

Teri Pichot (She/Her): About that now, when it comes to court or something like that we want to keep that outcome, they win it's about something beyond their control.

Teri Pichot (She/Her): So it might be you're walking out of the courthouse and regardless of what the judge ruled you know you did your best you're proud of the evidence that you put forth.

Teri Pichot (She/Her): How would you have handled yourself what evidence, would you have brought hey.

Teri Pichot (She/Her): So this is so powerful anytime there's a specific event like I mentioned, or just someone who's having a hard time seeing into the future there's somebody mentioned.

Teri Pichot (She/Her): Initially, when you said you're getting stuck about people who can't see into the future, I want you to think about sometimes our clients it's like.

Teri Pichot (She/Her): Driving and heavy fog you can't see very far into the future, but you can still drive in heavy fog you just drive very cautiously you can't see very far.

Teri Pichot (She/Her): So some of our clients, especially with trauma was brought up a lot with trauma i'm not going to ask them about six months to a year, I might say, imagine you made it through this hour.

Teri Pichot (She/Her): Imagine you're going to bed tonight, or you know it's dinner, you need it through this is really important, with trauma.

Teri Pichot (She/Her): or with cravings things like that just thinking about imagine it's 15 minutes from now and you're still so her how did you do it does everyone feel that it gives the message of hope that I can do this, even if it's just one day at a time 15 minutes at a time okay.

Teri Pichot (She/Her): Alright scales Now I know people are very familiar with scales been solution focus we're going to use scales, a little bit differently.

Teri Pichot (She/Her): Where problem focus models oftentimes scale problem solution focused is never used to reach problems we only want to scale things we want to get bigger.

Teri Pichot (She/Her): And we always want to clearly define that top of the scale now of course you can use one to 10 or zero to 10 some of my favorite or analogies.

Teri Pichot (She/Her): That really bring things to life i'm thinking about a firefighter I was working with

once and he would come in and we would talk about what percent of containment.

Teri Pichot (She/Her): And you see how that's the language of his profession, it made sense to him, where I was working with a client the love to bake cakes and so we talked about if this.

Teri Pichot (She/Her): This struggle was one of your beautiful cakes that you are so skilled at making where are we in this process.

Teri Pichot (She/Her): Are you just flipping through the recipe book trying to figure out what kind of cake to bake are you putting the finishing touches on that cake and setting your beautiful cake.

Teri Pichot (She/Her): onto the table to be enjoyed Where are you.

Teri Pichot (She/Her): So really think about scales is being a wonderful tool to measuring more versus less those kinds of things okay so anytime your clients are in that black and white all or nothing kind of thinking that's a really good time to use a scale.

Teri Pichot (She/Her): or anytime they're not giving themselves credit because, even if there are two My next question is going to be wired to and not lower so i'm always focused on why are they there, and not even worse so it's a very much a tool of switching it to a glass half full.

Teri Pichot (She/Her): To help them see what is in place, what is working.

Teri Pichot (She/Her): All right, and then lastly relationship questions we've talked some about relationship questions that's when we asked from other people's point of view so.

Teri Pichot (She/Her): Think about some of the most powerful ways we can use relationship questions so if I want to really increase internal motivation let's ask from the kids point of view.

Teri Pichot (She/Her): or a best friends point of view, or if I wanted to increase compliance or accountability i'm going to ask from a probation officers point of view or child welfare.

Teri Pichot (She/Her): person's point of view, high, it also increases empathy and helps them to really keep in mind all of the different aspects of that person's life.

Teri Pichot (She/Her): So we want to use this anytime I want to increase meaning.

Teri Pichot (She/Her): Right sometimes people are so focused on their point of view, if I asked him their kids point of view it's going to connect them to their heart or anytime you want them to develop empathy increase motivation increased critical thinking all of that.

Teri Pichot (She/Her): Now I want to jump into questions and answers really important that we use the rest of the time for that so Jesse what do we got going on.

Jessie O'Brien, NAADAC: Alright i'm going to just do a put your contact information oh great.

Jessie O'Brien, NAADAC: Thank you.

Teri Pichot (She/Her): Perfect you can always shoot me.

Jessie O'Brien, NAADAC: I was gonna make you bigger sorry okay um.

Jessie O'Brien, NAADAC: Okay, our first question that we have get that out of the way how might you respond.

Jessie O'Brien, NAADAC: If their answer to how did you stop is I was incarcerated.

Teri Pichot (She/Her): Yes, so people can always keep using drugs incarcerated I don't know if you guys realize that but being incarcerated does not make people stop.

Teri Pichot (She/Her): At all people can sneak stuff in they've made alcohol in jail all kinds of stuff so we have to really believe that each of our clients have a role in their success, they can always make it worse, so we've got it still good curious, how did they keep it from getting even more worse.

Jessie O'Brien, NAADAC: Okay, how would this therapy work with someone who has boundary issues or tells you they don't know how to set healthy boundaries.

Teri Pichot (She/Her): So, first, I would say, well, what do you mean by bound What would it look like, if you were sitting.

Teri Pichot (She/Her): So we've got a really slow it down we use a lot of terms in our field that, quite frankly, we use it almost generically like I don't know even what you're talking about with boundaries.

Teri Pichot (She/Her): boundaries for each one of our clients are very, very different so anytime a person uses words like that I want to slow it down, I want to do what we call talking normal What do you mean by that let's.

Teri Pichot (She/Her): let's get them to describe it, so we can see it, what would good boundaries for you look like and then we're going to work, our way backwards to discover that.

Jessie O'Brien, NAADAC: I have a client who always presents and sees himself as depressed never really does the coping skills, I suggest, I asked him once, what would the happy version of him look like is that, like solution focus brief therapy.

Teri Pichot (She/Her): Well, we want to keep it that person's words so, for example, this person probably has never viewed themselves as happy and happy probably isn't a good word for this person.

Teri Pichot (She/Her): So a person who viewed themselves as depressed i'm going to use what are called coping questions to get curious about how, how are you keeping yourself from getting even more depressed.

Teri Pichot (She/Her): How are you managing as someone who struggles with depression i'm not going to try to go to happy it's probably a foreign concept to them.

Teri Pichot (She/Her): i'm going to first help them really to identify what is the person doing to keep it from getting worse.

Teri Pichot (She/Her): So often in our field we try to move to better and we have to first start by trying to keep it from getting worse, so, for example, another analogy.

Teri Pichot (She/Her): let's say you're hiking on this really tall mountain and you slip and you fall and you're holding on by your fingernails Do you really want someone to say all right let's keep making I don't I want them to honor the fact that i'm just moving on my heels right.

Teri Pichot (She/Her): Right and so that's what coping questions do is they really help us to shift into how are you keeping it from getting worse and suppose things were just a little bit better and someone who's depressed happy probably won't be that next word.

Jessie O'Brien, NAADAC: So, in terms of someone who's depressed, how do you gauge sometimes asking, even those questions of like what are you doing well, the person may feel dismissed.

Jessie O'Brien, NAADAC: Yes, by not your voice like you're avoiding this thing that they feel so consumed by and not not and I know you could you know reflect back that's really hard you talked

about that, but how do you.

Jessie O'Brien, NAADAC: kind of balance that.

Teri Pichot (She/Her): yeah so again language is everything language is what causes people to feel dismissed I would never say what are you doing well.

Teri Pichot (She/Her): that's a very dismissive kind of thing for someone who's depressed so again coping questions are all about how.

Teri Pichot (She/Her): How are you managing given the things are so hard see how even my language it's validating it saying I see you I hear you I hear the pain, how are you getting through that.

Teri Pichot (She/Her): We don't want to become positive, because if we say wow what are you doing well that's very dismissive so language is everything that's the art of using solution focus practice and matching it, this is a language that takes a lot of time and practice to do well.

Teri Pichot (She/Her): To get that subtlety.

Jessie O'Brien, NAADAC: All right.

Jessie O'Brien, NAADAC: How do you address a client that doesn't want to take accountability.

Teri Pichot (She/Her): i've never met the client and 30 plus years.

Teri Pichot (She/Her): Now we have to remember accountability is like a double sided coin, now we typically try to get people to take accountability for failure.

Teri Pichot (She/Her): I don't know about you guys, but I don't like that feeling when a stranger is trying to push on me about my mistakes.

Teri Pichot (She/Her): But accountability is also there and success so solution focused helps people take accountability for success, I can push really hard to get away with that.

Teri Pichot (She/Her): But it's the same muscle that's getting stronger and that's what I mean about really pushing clients that take accountability for their success.

Teri Pichot (She/Her): Rather than pushing on them to take accountability for failure, they don't have to confess to me their mistakes, they know what they did wrong when they tell me what they did right and other circumstances they know.

Jessie O'Brien, NAADAC: We had a couple questions just about severe using solution focus with severe co crane mental health issues.

yeah.

Teri Pichot (She/Her): Let me.

Jessie O'Brien, NAADAC: Just enjoy oh yeah can you how do you.

Teri Pichot (She/Her): Oh that's like a whole day workshop right there alone it, this is probably one of the most powerful models with chronic persistent mental illness.

Teri Pichot (She/Her): works amazingly well with schizophrenia, and things like that so just a quick little story to tell you what i'm talking about there is a client who was struggling with homelessness.

Teri Pichot (She/Her): And the case managers were really struggling getting her to take resources and

she kept saying.

Teri Pichot (She/Her): i'm good friends with oprah winfrey oprah winfrey promised that she's going to come and give me a million dollars I don't need your resources.

Teri Pichot (She/Her): And they were stuck like we don't know what to do, she clearly as an oprah winfrey's friend and I said to them, I don't know about you guys, but I don't know all of oprah winfrey's friends.

Teri Pichot (She/Her): I know stedman and I know gail and doesn't mean that's all the friendship hats right, so I had to get out of the mindset that this wasn't oprah's friend, because she very well may have been I don't know.

Teri Pichot (She/Her): But instead, what I said to this client was tell me all about i've never met her i've always admired.

Teri Pichot (She/Her): I want to learn about oprah she told me amazing things about oprah winfrey I don't know if they're true or not doesn't matter, but then I said to her.

Teri Pichot (She/Her): You know oprah's clearly running late and from everything you said I can't imagine, she would want to discover that her good friend was cool and hungry.

Teri Pichot (She/Her): So when oprah comes, why would she hear about how we took care of you how we kept to worm how we made sure you had food, what would she learn when she came because clearly she's.

Teri Pichot (She/Her): I have no problem getting that client off the street at all.

Teri Pichot (She/Her): Because again I didn't fake her I stepped into her world I stepped into her reality trying instead of trying to tell her, she was wrong we're going to do the same thing with.

Teri Pichot (She/Her): substance misuse issues, all kinds of stuff it's all about honoring and stepping into a person's worldview, rather than us challenging and seeing that i'm right you're wrong.

Jessie O'Brien, NAADAC: Okay perfect and.

Jessie O'Brien, NAADAC: How would you use this model and family therapy.

Teri Pichot (She/Her): Again that's a whole nother day workshop, these are excellent questions, but this is a very complex thing so.

Teri Pichot (She/Her): The biggest thing I can say is with families or couples, you want to look at the space in between people right you don't want to look at individuals.

Teri Pichot (She/Her): Because individuals are going to have different ideas on how to get where they want to be, but we want instead look at how they want.

Teri Pichot (She/Her): to interact with each other so just to give a very simple example let's say you have a couple.

Teri Pichot (She/Her): And they're trying to figure out one person wants to move out of town for a job, the other person wants to stay, it looks very difficult to figure out how those two can come up with a solution, but if I say imagine that six months from now, and you're both know you made the right decision.

Teri Pichot (She/Her): How would you have decided, regardless if you stay here, or if you move, so you know i'm not getting into the two positions i'm looking at.

Teri Pichot (She/Her): That the space in between them, they both agree, they need the good decision, their relationship, how they want it to be, and then I focus on how did they decide not what did you decide the same thing with a parent or a child.

Teri Pichot (She/Her): So, quick and dirty answer.

Jessie O'Brien, NAADAC: All right, let's see um I gave resources to a client about having survived significant other investments suicide she wanted information about how to handle the grief, how can I help her go through this while she is also trying to stay sober.

Teri Pichot (She/Her): yeah so we want to really listen to how far into the future can this person see in their grief, sometimes with grief people can only see.

Teri Pichot (She/Her): Today, or next week so don't go further than that, but really get curious about how they're getting through the pain, how are they getting through the grief.

Teri Pichot (She/Her): What are they doing what are other people in the system, seeing that lets them know wow this person is handling this well that's going to.

Teri Pichot (She/Her): really prevent answers like like just drink or things like that, but really hold them accountable to other people in the system agrees.

Teri Pichot (She/Her): That they're handling it well, and then just slowly, step by step we're going to go further and further out but don't rush it be to shades are used to always say by going slow you go fast.

Jessie O'Brien, NAADAC: Right we're running out of time, so i'm going to get a few quick answer ones in what's your favorite book on solution focused therapy.

Teri Pichot (She/Her): More than miracles.

Teri Pichot (She/Her): that's the last book that into Kim.

Teri Pichot (She/Her): Bergen see dishes or ever wrote and it's such a wonderful book So yes, more than miracles.

Jessie O'Brien, NAADAC: More than miracles that's the.

Jessie O'Brien, NAADAC: book and then.

Jessie O'Brien, NAADAC: People are interested in the two day workshops.

Jessie O'Brien, NAADAC: Or can they learn more.

Teri Pichot (She/Her): yep So if you go to my website, which is Denver solutions.

Jessie O'Brien, NAADAC: put up here.

Teri Pichot (She/Her): yep I do all kinds of workshops anywhere from a half day workshop to full summer intensive and they're both online and in person, so, however, you learn best, that is what I do for a living, I also travel around the world and work with agencies as well.

Jessie O'Brien, NAADAC: Alright well this there's still a lot of questions but we're not gonna have time to get to them, but what we will do and what we did is we send our presenter other questions from the presentation and then they can bring answers, and then we post them to the webpage where all the.

Jessie O'Brien, NAADAC: receipts, so I will here's terry's contact information for you all to see Thank

you so much Harry this mean I don't know if he had time to see the chat it probably not because I.

Jessie O'Brien, NAADAC: didn't but.

Jessie O'Brien, NAADAC: yeah so many positive.

Jessie O'Brien, NAADAC: Wonderful comments and.

Jessie O'Brien, NAADAC: appreciation extended to you, so thank you Ben from us as well.

Teri Pichot (She/Her): Alright, you so much.

Jessie O'Brien, NAADAC: Thank you.

Jessie O'Brien, NAADAC: and moving on to our announcements see for less would like to thank you for attending using solution focus brief therapy to engage the most challenging clients webinar.

Jessie O'Brien, NAADAC: To access more learning material relevant to counselors you can visit their website at [www dot C E for less](http://www.dotCEforless.com) that's the number for less COM.

Jessie O'Brien, NAADAC: You can also find them on Facebook linkedin and instagram and when you sign up today you'll receive 20% off their one year unlimited subscription.

Jessie O'Brien, NAADAC: Allowing you access to more than 703 see hours, while maintaining your licensure and broadening your knowledge of mental health related topics know allison is going to put that in the chat box, but the promo code is.

Jessie O'Brien, NAADAC: At checkout for the savings so nate X 22 is the promo code.

Jessie O'Brien, NAADAC: We are almost done with this webinar and when it does end, you can go back to the webpage where you signed up for this webinar and you can access the sequence it's a content knowledge quiz 15 questions, based on the content that was reviewed today.

Jessie O'Brien, NAADAC: If this is your first time going through our CEO process, make sure to follow the instructions guide.

Jessie O'Brien, NAADAC: That is right underneath the link for the online sequences to guide you through the process, you can also always email us at [CES need.org](mailto:CESneed.org) if you have any questions reminder that if you need your certificate to say live on it Li ve live.

Jessie O'Brien, NAADAC: Please make sure to complete the SI quiz within the next 24 hours and then download this or two don't forget that step okay.

Jessie O'Brien, NAADAC: All right, wonderful, we hope that you will join us for some exciting content coming up the next webinar we have is actually June 29.

Jessie O'Brien, NAADAC: And that is trauma informed relapse prevention with wunderland family So hopefully, you will be able to join us for that.

Jessie O'Brien, NAADAC: A reminder that NASDAQ our specialty online training series to address specific addiction treatment related education needs we have 1234567 well six current.

Jessie O'Brien, NAADAC: library archived as specialty series they each consists of six to seven webinars on a particular topic.

Jessie O'Brien, NAADAC: And then upon completion of all the webinars and that series, you can apply for the certificate evidencing your accomplishment of taking them on that series.

Jessie O'Brien, NAADAC: We have a specialty series on advances in technology wellness and recovery ethics clinical supervision and addiction, treatment and the military and veteran culture We also now have completed.

Jessie O'Brien, NAADAC: Our women series i'll get to that in a second but coming up, we are opening a new series on adolescence so adolescent treatment and recovery specialty online training series, it is a six part series.

Jessie O'Brien, NAADAC: On adolescence is designed for helping professionals who are dedicated to learning about addiction treatment for adolescent populations, it will kick off on July 1 with part one framing the conversation preventing use substance use in the week of.

Jessie O'Brien, NAADAC: And, as I mentioned, we wrapped up in May part six of our women's series women in recovery recovery specialty online training series if you haven't checked out any of that I encourage you to hire to do that.

Jessie O'Brien, NAADAC: Also there's just so many announcements there so many announcements we launched registration for our nayak.

Jessie O'Brien, NAADAC: Annual Conference and 50th anniversary celebration, it is currently early bird pricing, which means that you can save up to \$151.

Jessie O'Brien, NAADAC: And this price ends August 26 now I don't know about you, but summer goes by very fast and August 26 is going to come before you know, and I don't want you to miss this little price, so you should just sign up plus it's gonna be fun it's in indiana.

Jessie O'Brien, NAADAC: And here's a little more about it, you can earn 45 addiction specific seat ease there's seven keynote session the panel discussion we had a really great pure one last year and they're coming back.

Jessie O'Brien, NAADAC: I won't spoil it, but you can check it out and see what's going to be there, so hopefully you'll find something, and hopefully i'll see you that.

Jessie O'Brien, NAADAC: reminder as a new deck Member a quick review of the benefits of becoming a member.

Jessie O'Brien, NAADAC: Lots of discounts on different items, including our Conference, which I just spoke about also for our free webinar series all the CEOs are free for Members and.

Jessie O'Brien, NAADAC: And we have a whole library of CDs that are available and accessible for free see So if you haven't joined I would strongly encourage you to do so.

Jessie O'Brien, NAADAC: Thank you a short survey is going to pop up at the end of this webinar please take time to give us your feedback share any notes for our presenter we do share those with our presenters as well.

Jessie O'Brien, NAADAC: And just tell us how we can continue to improve your learning experience, please stay connected with us on social media or whatever way you deem appropriate for yourself I hope everyone has a really great day rest of your week and people see you.

Jessie O'Brien, NAADAC: I guess end of June.

Allison White: Just yeah can you repeat the promo code, one more time.

Jessie O'Brien, NAADAC: Oh NASDAQ.

Jessie O'Brien, NAADAC: That the sponsor one.

Jessie O'Brien, NAADAC: Yes.

Jessie O'Brien, NAADAC: It is nate X 22 and a da see 22 for the sea for last.

Allison White: One said it wasn't working but.

Allison White: They may have missed a letter, so thank you all.

Jessie O'Brien, NAADAC: Okay, all right thanks everyone take care, have a good rest of your week.