



Adolescent Community Reinforcement Approach (A-CRA)

Part of the Cannabis Youth Treatment (CYT) Series

Description:

The Adolescent Community Reinforcement Approach (A-CRA) is based on the assumption that environmental factors have an effect on the encouragement or discouragement of drug use. A-CRA is a behavioral intervention that a clinician uses to help the adolescent learn to replace environmental contingencies that have supported alcohol or drug use with prosocial activities and behaviors that support recovery.

Therapists choose from 15 A-CRA procedures that address the adolescent's needs and self-assessment of happiness in multiple areas of functioning. Some of these procedures include problem-solving skills to cope with day-to-day stressors, communication skills, and active participation in prosocial activities with the goal of improving life satisfaction and eliminating alcohol and substance use. Role-playing/behavioral rehearsal is a critical component of the skills training used in A-CRA, particularly for the acquisition of better communication and relapse prevention skills. Homework between sessions consists of practicing skills learned during sessions and participating in prosocial leisure activities.

The A-CRA manual provides guidelines for adolescent sessions, individual caregiver sessions, and combined adolescent and caregiver sessions. The goals of each section of the treatment are as follows:

Adolescent Sessions

- Promote abstinence
- Promote positive social activities
- Promote positive peer relationships
- Promote improved familial relationships

Caregiver Sessions

- Encourage participation in the recovery process
- Promote the adolescent's abstinence
- Provide information on effective parenting

Treatment Logistics:

Appropriate Age Range: 12-18

Participants: Adolescent, Caregivers

of Sessions: The minimum recommended contact would be 14 60 minute sessions over a 3 month period, 10 individual sessions with the adolescent, 2 individual sessions with the caregiver, and 2 joint sessions. Community contact is added on a case by case basis.

There are 12 standard procedures and 3 optional ones. The delivery of the intervention is flexible based on individual adolescent needs, although the manual provides some general guidelines regarding the general order of procedures. Optional procedures are Dealing with Failure to Attend, Job-Seeking Skills, and Anger Management. Standard procedures include:

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| 1: Functional Analysis of Substance Use | 5: Relapse Prevention Skills | 9: Caregiver Overview, Rapport Building, and Motivation |
| 2: Analysis of Prosocial Behavior | 6: Communication Skills | 10: Caregiver Communication Skills |
| 3: Happiness Scale & Goals | 7: Problem-Solving Skills | 11: Caregiver-Adolescent Relationship |
| 4: Increasing Prosocial Recreation | 8: Urine Testing | 12: Treatment Closure |

A-CRA was manualized in 2001 as part of the Cannabis Youth Treatment Series (CYT) and was tested in that study (Dennis et al., 2004) and more recently, with homeless youth (Slesnick, et al., 2007). It was also adapted for use with another manual for Assertive Continuing Care following residential treatment (Godley et al., 2001).

Evidence-Base:

Refer to Appendix B for a matrix that lists the organizations that have approved A-CRA as an EBP or go to <http://www.uncg.edu/csr/asatp/ebpmatrix.pdf> to view it online.

Reference to Treatment Manual:

Godley, S.H., Meyers, R.J., Smith, J.E., Karvinen, T., Titus, J.C., Godley, M.D., et al. (2001). *The adolescent community reinforcement approach for adolescent cannabis users: CYT series, volume 4.* (BKD387). Rockville, MD: CSAT, SAMHSA. <http://kap.samhsa.gov/products/manuals/cyt/>



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