



BEST PRACTICES FOR FACILITATION

How to successfully facilitate treatment programs



Facilitators are at the core of supporting participants in behavior change, successful reentry, addiction treatment and beyond. Facilitation skills are key to running successful groups and bringing about the best results for participants. This guide describes some of these foundational skills, including:

- It is helpful to address literacy concerns among your participants prior to starting group sessions. More than 1 in 5 U.S. adults have difficulty understanding written English, so it's helpful to address this concern early and provide alternatives where they're available.
- Research has shown that participants rate their connection with facilitators as most important, even more so than facilitator expertise. To best connect with participants, a facilitative spirit is key. This includes practicing accurate empathy and asking the right questions. Harnessing the power of accurate empathy is, at its core, about understanding what another person means and is experiencing. When it comes to asking the right questions, motivational interviewing can promote change talk and self-efficacy.
- Group programming can have profound benefits for participants. With a host of different personalities, managing group dynamics becomes an important challenge: from building group cohesion to keeping discussions on track.
- Often, a session may not go the way you planned. There are many ways to address resistance in therapy, including reframing that resistance and responding to ambivalence or discord with a focus on the therapeutic alliance.
- Building program culture in your organization can be helpful for distributing responsibility and increasing understanding around facilitation and programs. Once your team is on the same page, you may find a bit more breathing room in your day-to-day work.

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Addressing literacy concerns

More than 43 million Americans have low literacy skills. That means roughly 1 in 5 U.S. adults have difficulty understanding simple written sentences in English.¹ Only 12% have the health literacy skills needed to navigate the American healthcare system.²

It's a good idea for facilitators to assume everyone has some difficulties with health literacy. Learning disorders can contribute to low literacy skills, but there are many other factors that affect reading skills. All individuals can benefit from simple and consistent materials and facilitation.

Literacy concerns also can be addressed through effective facilitation strategies. A participant's reluctance to complete or share assignments is one clue of a potential difficulty with reading or writing. If possible, it can be helpful to assess reading ability in advance of group sessions to avoid embarrassing participants in front of others.

When literacy is an issue, consider these options:

1. Slowly read the page content aloud as a participant follows along. In an individual or group session, discuss their understanding of the content and their responses to the questions. Facilitators can also encourage participants to "teach back" what they've learned by explaining the concepts in their own words.
2. Use a buddy system. Pair the participant with a peer who understands the content. Don't pair the participant with the brightest individual in the group but with someone slightly more proficient. Have them work as a team in reading and talking about the content. Participants can then summarize their work, write down key words or draw their responses.
3. Offer alternatives to written responses:

- A. Participants can use a phone or simple digital recorder to speak out loud and record their responses to the content. Facilitators can also record content and questions for participants to use outside of session.
- B. Drawing activities are another helpful response technique for those with limited reading skills.
- C. The Change Companies also offers digital Interactive Journals, which include the built-in option to have text read aloud and provide the same evidence-based, interactive content as printed Journals.

Adjusting facilitation strategies to match the literacy needs of each participant can improve participant satisfaction and relieve facilitator strain. Each participant can benefit from engaging with materials in the ways that work best for them.

References:

¹ <https://www.ahrq.gov/health-literacy/improve/precautions/index.html>

² <https://nces.ed.gov/pubs2019/2019179/index.asp>

A facilitative spirit: Attitudes for effective facilitation

Your personal style as a facilitator is likely to have a significant impact on participant outcomes. Many studies show that the single largest predictor of positive participant outcomes is empathy: while facilitators tend to consider their professional expertise as most important, participants rate their relationship with the facilitator as most important.

It starts with empathy

Even when using highly structured, guided treatment materials such as Interactive Journals, facilitators differ in their effectiveness. When working with people making life changes, research shows that authoritarian and confrontational approaches are far less

effective than an empathic style. Listening to and reflecting participants' concerns is far more likely to promote change than arguing and challenging. The therapeutic alliance is the relationship between facilitator and participant. The quality of this relationship is related to the facilitator's beliefs and attitudes about counseling — their facilitative spirit. Essentially, it matters what you do and how you do it.

The quality of the therapeutic alliance, especially as perceived by the participant, predicts retention and outcome. Participants might consider:

- Do I feel respected by this facilitator?
- Does this facilitator listen to me and try to understand me?
- Do I trust this facilitator?
- Do I have a say in what happens?
- Is this one size fits all or do I have options?
- Is this a collaborative relationship or am I dictated to?

A facilitative spirit

Motivational interviewing, a foundation of *Interactive Journaling*[®], emphasizes important attitudes for a facilitator to maintain:

Collaboration. Facilitating change is a collaborative process. You have expertise in your field, and participants also have unique expertise about themselves and their lives. No one knows them better than they do. In facilitating change, you need participants' expertise as well as your own. It's not a one-way street of dispensing wisdom and skills, but rather a conversation about what changes participants would like to make and how they could go about it.

Compassion. This is not a feeling so much as an intention to alleviate suffering and promote growth. The purpose of a helping alliance is the other person's well-being.

Acceptance. Participants do not need to prove they deserve your respect. Every human being has inherent worth. An attitude of acceptance works with participants wherever they are in the change process. This means it is important to understand participants' own perspectives and experience. Accepting a person does not mean agreeing with them or approving of any crimes they may have committed.

Autonomy. Like it or not, people do get to make their own choices about how they will live their lives. Accepting and honoring this autonomy makes it possible to have a collaborative conversation about change.

Affirmation. An affirming attitude looks for participants' strengths and talents, and for what they are doing well. Even small steps in the right direction are recognized and affirmed.

Evocation. Given the right facilitative conditions, every person has an inherent tendency to move and change in a positive direction. At least part of each person wants to be healthy and well. That part of the participant is your co-therapist. Instead of installing missing pieces, evocation calls forth that which is already there: the person's own motivations, wisdom and abilities.

Putting that all together, this facilitative spirit departs from an expert model that says, "I have what you need and I'm going to give it to you." Rather, the implicit message is that "You have what you need and together we're going to find it." You do still get to use your own expertise but in respectful collaboration with what participants already experience and know about themselves.

Harnessing the power of accurate empathy

Among the many tools that effective facilitators and clinicians can use in their work is that of *accurate empathy*. In *Motivational Interviewing*, Miller and Rollnick define accurate empathy as “an active interest in, and effort to understand the other’s internal perspective, to see the world through her or his eyes.”

The word *empathy* could suggest having had the same or similar experience: “I’ve been there, and I understand.” Fortunately, that is not what makes a more effective facilitator. You don’t need to have had the same experiences yourself, any more than having had cancer makes an oncologist more effective.

At its core, accurate empathy is about understanding what another person means and is experiencing. This is much more than simply repeating back what a client says. It is an active effort to truly understand the other person. It is the sincere, productive desire to get to the underlying feelings and motivations behind their words.

Accurate empathy is a skill that looks easier than it is. For a variety of reasons – whether the righting reflex, past experiences, biases or otherwise – clinicians can sometimes make inaccurate assumptions about their client’s feelings, their situation or the point they are trying to make. This can happen even with the best of intentions. Using accurate empathy can help facilitators avoid making inaccurate assumptions, build trust and support positive outcomes for clients.

You might try to practice empathy by being quiet and listening carefully to what someone says. But even if you achieved a reasonably good understanding in that way, this is not what accurate empathy means. Your own internal understanding is of little use to clients. The clinical skill of accurate empathy simultaneously helps both you and the client move toward a clearer understanding of their dilemma.

What is added beyond respectful silence is the skill of reflective listening, offering gentle guesses about what the person may mean. This is done not by asking questions

("Do you mean that you...?") but rather by offering your guess as a statement. This can feel strange at first, because you know you're only making a guess that might be wrong, which makes you want to ask a question instead. However, questions tend to be more pressuring or threatening, even though that is not your intention.

Consider the difference between these two responses:

That was really frustrating for you.

That was really frustrating for you?

The difference is an inflection of the voice upward at the end of the question, and doing that can evoke defensiveness. It's a subtle skill, but the good news is that your participant gives you immediate feedback about whether your guess is correct (and whether you posed it in a threatening way). Just a touch of sarcasm in your voice can turn a good reflection into a confrontation.

Based on your client's response, an effective reflection can open up more opportunities for asking questions, evoking motivation and working toward a client-centered therapeutic alliance.

Motivational interviewing: Asking the right questions

Asking the right questions in a counseling setting can help a participant on their journey toward positive behavior change – but asking confrontational questions can have the opposite effect, causing a participant to justify negative behaviors. With a lot on the line, where do you begin?

Motivational interviewing includes using targeted questions to evoke participants' own Desires, Abilities, Reasons and Needs for change (DARN). Asking the right kinds of

questions eases facilitation by helping participants increase their arguments in favor of positive change.

- **Motivational Interviewing (MI)**
An evidence-based counseling method designed to resolve ambivalence and elicit self-efficacy and behavior change.
- **Self-efficacy**
A participant's belief in their ability to achieve their goals.
- **DARN**
An acronym that stands for a participant expressing their Desires, Abilities, Reasons and Needs – also known as “change talk”.

Facilitation is all about asking the right questions. First, beware of the killer questions...

- Why don't you want to?
- Why can't you?
- Why haven't you?
- Why don't you...?
- And the ultimate killer statement... You should!

The goal is to ask questions that participants will likely answer with change talk, or DARN language.

Desire questions:

What do you hope to accomplish in this program?

How do you want your life to be different one year from now?

What is the most important thing in your life today that you want to change?

Ability questions:

What gives you confidence that you will be successful in this program?

If you decided to change, how could you do it?

What are you willing to try in order to make this change?

Reason questions:

Even if you are not ready to make changes today, if you were to change, what would be three reasons for making changes?

Why do you want to change?

What would be some of the advantages of this change?

Need questions:

How important is it for you to make this change? (on a scale of 1 to 10, with 1 being not important and 10 being extremely important)

What needs to happen in order to make this change?

How serious or urgent does this feel to you?

These types of MI questions focus responsibility for decisions about change with each participant, highlighting their sense of autonomy, freedom of choice and control.

Good and bad questions: The dos and don'ts

Dos

- Do ask open-ended questions that encourage the participant to come up with their own solutions and reasons for changing.
You say you never want this to happen again. What are three things you could do beginning today to make sure that wish comes true?

- Do ask questions that encourage participants to find their own reasons for making changes in their behavior.
What would be the worst thing that would happen to you if you continue on your current path?
- Do have a collaborative relationship with your participants, inviting them to take an active role in their behavior change.
*I believe you know what is best for you and what is the correct action to take.
Can we work together to find those solutions?*
- Do be reflective and empathic when speaking with your participants.
It is difficult making life changes, especially changing familiar activities and people you spend time with.
- Do support a participant's self-efficacy.
If you are willing to do the work, I am positive you will be successful in this program.

Don'ts

- Don't provide participants with the solution to their challenges.
If you really want to change, all you need to do is follow the steps of this program.
- Don't ask questions that lead the participant to focus on the status quo.
It sounds like you have a lot of fun on your current path. What else do you enjoy about where you are now?
- Don't be judgmental or confrontational.
I decide whether you pass this program, so if you're smart you'll do what I tell you.

- Don't assume you know what is best for the individual.
I know what you need. You need to stay away from those so-called friends of yours.
- Don't contribute to the participant's anger, fear or discouragement.
I'm pretty good at knowing people, and I doubt you're going to make it in this program.

Group counseling offers a compelling setting for learning, growth and change, but it can also pose challenges for facilitators. Below are some evidence-based ideas for facilitating group counseling and ensuring a positive atmosphere that best meets participants' needs.

Facilitating group cohesion

Building group cohesion and trust is key to beneficial group counseling. While some groups may develop trust easily, some will need a little more help from the facilitator. Consider these tips:

- Learn and use participants' names.
- Validate participant sharing and differing points of view.
- Use icebreakers to help facilitate early conversations and encourage participants to discover shared experiences.
- As they come up, bring the things participants have in common to the group's attention to help build mutual understanding.
- Use activities focused on pairing up two or three participants at a time to share their thoughts and get to know one another.
- Use and encourage appropriate humor.

Each of our Interactive Journals have accompanying Facilitator Guides designed for one-on-one and group counseling. They are full of evidence-based activities, discussion topics and motivational questions — including dyad and triad activities to help form bonds between participants.

Troubleshooting group dynamics

For facilitators, one of the most important tasks (and challenges) is keeping discussions on track. You want to encourage active participation, but you don't want the conversation shifting from the main objective (helping to facilitate positive behavior change). There is no magic formula that works for everyone, and your personal facilitation style will often come into play. Below are a few common challenges, as well as some solutions you might consider:

The group is asleep with their eyes open.

It happens, so don't give up and throw on a movie. Have participants move! Give the group a task they can do in triads or small groups so everyone has a turn talking.

The group is shy.

What do you do if you ask questions and no one answers? Quiet groups can take a lot of group cohesion-building and icebreaker exercises. Do more triads and small group activities to get participants involved. Use brainstorming, ask open-ended questions and solicit opinions and perspectives rather than right or wrong answers.

The group has bonded and is noisy.

It's great when a group gets along, but it's often helpful to set boundaries with group counseling participants. Use the timeout sign as needed and instruct the group to be quiet. Get their attention by sincerely saying, "I need for you to be a bit less noisy and be more thoughtful on this topic. I would hate for you to miss some important information or ideas that might help you."

Managing different personalities

Often, there are a few members of group therapy sessions who can make facilitation more challenging. Using the timeout sign is often an effective way to pause unhelpful group discussions or individual comments. Below are some common examples of challenging personalities and possible solutions:

The dominator

This person often dominates group sessions with their own commentary, leaving little room for others. Ask the person to stay after the session and let them know that they have great responses, but they're letting the rest of the group off easy: "I would like you to help me make the group work harder by refraining from answering right away." During a session, facilitators can also suggest that they'd like to hear some new voices, and "don't want Joe here to do all the work."

The insulter

This person cuts people down, picks on their comments or may even make sexist or racist remarks. Correcting these comments right away will help maintain group cohesion. Ask the person to stay after the session is over: "For this group to be successful, everyone has to feel comfortable talking in group. Your comments shut people down and have to stop." Facilitators can also tell the participant during group that their comments are inappropriate and need to stop.

The comedian

If the humor is appropriate and not mean-spirited, then use that person to generate energy if the group is dragging. If it gets out of hand, use the timeout sign to redirect. Also note that sometimes humor is a way to avoid looking at difficult topics that may hit close to home. In that case, you may want to take the person aside and tell him or her you appreciate the humor but that humor can sometimes aid in avoiding a topic.

Keeping discussions on track

Here are a few additional tips to consider for keeping discussions on track:

Set goals. Being clear on what the group is aiming to accomplish during each session can help refocus attention if they get sidetracked.

Prompt discussions with questions designed to move participants in a direction that matches your objectives. Consider writing key questions on the board to help refocus the group's attention throughout the session.

If participants pose questions and issues that are likely to get the discussion off track, try using the “parking lot” technique. The parking lot is a space where appropriate participant questions can be written. These questions can be addressed if there is time at the end of the session: “Let’s add that to the parking lot. For now, let’s address the topic at hand.”

How to address resistance in therapy

“It soon became apparent that client openness versus defensiveness, change talk versus sustain talk, is very much a product of the therapeutic relationship. ‘Resistance’ and motivation occur in an interpersonal context.”

— William R. Miller, *Motivational Interviewing: Helping People Change*

How do you respond when a session is not going the way you had planned? When a client argues, minimizes, interrupts and ignores, how do you get the therapeutic relationship and treatment plan back on track?

A first step is to reframe the way we understand so-called “resistant clients.” After all, resistance is not a solo activity. No one stands alone on a street corner and resists. There has to be someone to push against. This means both the client and the

counselor can influence this dynamic. The way you respond to such behavior makes all the difference.

Reframing resistance

In *Motivational Interviewing*, Miller and Rollnick describe how labeling individuals as “resistant” was used to justify unhelpful approaches in the past — like confronting, labeling, judging and commanding. Rather than helping people move toward positive change, these approaches actually serve to evoke more resistance — turning the label into a self-fulfilling prophecy.

When you understand that resistance is not a problem with the client, you can see it as an opportunity to use therapeutic skills. As Miller, Zweben and Forcehimes explain in *Treating Addiction*, “Resistance is not a challenge to try to win the argument but an immediate in-session feedback from your client to try something different.”

To adjust your approach effectively, it can be helpful to understand “resistance” as two separate concepts: ambivalence and discord. Each of these dynamics is normal and expected at times. With thoughtful use of your clinical skills, you can respond in ways that diminish defensiveness and strengthen positive motivation.

Responding to ambivalence

People in the process of change are often ambivalent. They can see both reasons to change and reasons to maintain the status quo. You can think of ambivalence as a balanced scale. Participants may recognize benefits of changing, but these don’t yet outweigh their reasons for keeping things the same. If you tell participants why they should change, they are likely to resist and maintain balance by emphasizing arguments against change. This is known as sustain talk.

When participants use sustain talk, it can be tempting to share facts, recommend strategies and remind them of the reasons they “should” or “must” make a change. But remember, participants will listen to themselves more than they will listen to you. If you are presenting arguments and evoking sustain talk, participants are more likely to talk themselves out of change. Instead, you will want to allow individuals to decide for themselves if they are ready to make a change.

A person-centered approach involves a focus on listening and practicing accurate empathy. When you acknowledge that you hear and understand what the person is saying, there is no need for them to resist you. Keep in mind, reflecting their thoughts doesn’t mean you have to agree or approve — it’s just good listening. The more a person seems to be resistant, the more you need to listen well.

You also can respond to sustain talk by acknowledging the person’s autonomy and choice. You might say, “And that really is up to you. No one can decide that for you.” People have the right and ability to make their own choices.

The good news is, you can help participants to increase their self-talk in favor of change — also known as change talk — through motivational interviewing techniques.

Responding to discord

In addition to sustain talk, you may encounter resistance in the form of discord. While sustain talk focuses on a person’s ambivalence to change, discord is about the person’s relationship with you.

For example, discord might sound like, “You don’t know me. You don’t know what I need,” or “I know for a fact this is not going to help me.” If you hear statements like these, you will want to focus on strengthening the therapeutic relationship. Consider how the strategies below might be helpful for you:

1. Engage the client's own problem solving skills. In the examples above, you might say, "You're right. Please, tell me more," or "If that won't work for you, what would you suggest given what you know about yourself?" Remember, it's important to keep your tone free from sarcasm.
2. Be willing to take partial responsibility or even apologize for your contribution to this dynamic. You might say, "I'm sorry — obviously I wasn't listening well enough to you. Tell me what concerns you."
3. Work with the participant to adjust goals. If the person balks at the size of a task or goal, work together to identify one simple step they could take.
4. Consider whether literacy is a challenge. This could be one reason for apparent "resistance" when it comes to writing in a Journal and participating in discussions.

Keep in mind, the therapeutic alliance is the most important factor in predicting treatment success. The client's perception of your therapeutic alliance depends on questions like:

Do I feel respected by this person?

Does this person listen to me and try to understand me?

Do I trust this person?

Do I have a say in what happens?

Is this one size fits all or do I have options?

Is this a collaborative relationship or am I dictated to?

After all, people get to make their own choices about how they will live their lives. Accepting and honoring this autonomy can help you maintain your professional resilience and have effective, collaborative conversations about change.

Facilitation of recovery groups

September is National Recovery Month. This is a month to celebrate the hope and success stories that come with the process of recovery from substance use disorders. It is also an opportunity to highlight some best practices for supporting clients as they navigate the stages of change in recovery. As clinicians, case managers, counselors and treatment specialists, you play a key role in clients' success.

Before facilitating a recovery group, you might start by doing a self-assessment. This includes reflecting on biases you may have toward substance use disorders or aspects of your participants' identities. Then, reflect on your readiness to facilitate this particular group. This self-assessment can identify areas for learning and progress. Familiarize yourself with facts, research and statistics on these areas you identified. This may help you dismantle these biases and maintain the role of an impartial facilitator.

A key component to successful facilitation is active listening, as researched and described by Carl Rogers. Active listening is helpful in informing targeted, productive motivational interviewing questions. It can also help in understanding where an individual is along the stages of change in their recovery. Active listening, combined with motivational interviewing, can help identify key factors to the individual's success together. Factors may include clinical treatment, medication-assisted treatment (MAT) and Interactive Journaling. It can also include peer or family support, community, faith, healthy coping strategies and a self-identified sense of purpose.

Another key component of an individual's successful recovery is their access to resources. While national and digital resources can be helpful to an individual, it is the

facilitator's responsibility to help the individual identify local resources that can support their recovery. These resources may extend beyond those related directly to substance use. This may include access to transportation, healthcare, childcare, housing, employment and financial assistance.

Uncovering factors for success and identifying resources can increase a client's likelihood of a successful recovery. However, as with any person navigating the stages of change, it's possible to take steps backward in this process. Returning to use is common in substance use disorders, with 40-60% of individuals returning to use at some point in recovery. You may be able to successfully identify an individual's risk of relapse before it occurs. This gives you the chance to redirect them on their path to recovery. You might do this by looking for changes in habits, encouraging the development of a recovery safety net and identifying ways the client can increase naturally occurring dopamine. Help the client identify a list of high-risk people, places and things that may influence a decision to return to use. You can also use specialized curricula and help the client develop a workable relapse prevention plan. Clients who share this relapse prevention plan with supportive people are more likely to avoid relapse.

If a client has returned to use, this doesn't mean a failure in treatment. Rather, work together to facilitate a decisional balance. This weighs the client's reasons to continue their use against their reasons to get back on track with their recovery. Targeted motivational interviewing questions can help the client reflect on the lessons they have learned in their recovery journey. You can also help them review and update their list of high-risk people, places and things. They may also benefit from making revisions to their relapse prevention plan.

The work that people like you do in supporting others on their recovery journeys comes with challenges, celebration, hope and resilience. National Recovery Month can be an opportunity for people in this field to take a moment to recognize the facets of recovery they get to play a role in.

Building program culture: Best practices for developing a program-supportive environment in the justice system

You likely already know that program culture has a key influence on participant outcomes. How do you build and implement successful programs – especially when staff are spread thin and employee engagement is a challenge?

To build a program-supportive institution, there are a few essential benchmarks:

- Staff and participants are supportive.
All staff know what programs are available and what the purposes of those programs are. Participants are involved in implementation and value the programs offered to them.
- Programs are considered a priority.
Programs are canceled only as a last resort. Adjustments are made to keep programs running smoothly.
- Decisions are made with programs in mind.
Big changes elsewhere in the institution, including participant movement, are made in conjunction with programming whenever possible.

Three phases to build a healthy program culture:

Preparation stage

Take your time to build a healthy foundation.

- a. Assess need: Consider demographics such as age, gender and education level, as well as time to reentry and criminogenic needs.
- b. Assess resources: Can you ensure your staff have time for programs? Do you have the budget for necessary materials?

- c. Select program/curricula: Select curricula that are in line with both the needs you assessed and the resources available to you.

Pro-tip: Make it a system-wide initiative. A challenge in the early stages of building a program culture is that only select staff are involved in the programming conversation. Just as system-wide decisions should be made with programs in mind, the entire system of staff should be involved in the program conversation.

Implementation stage

You've laid the groundwork – now it's time to get the ball rolling.

- a. Train your staff. Take your time when training to ensure your entire team has time to practice and get comfortable with the material. Overtraining is a good thing — staff move around, so making sure more than your core team are familiar with the program will save you headaches in the long run.
- b. Celebrate an official kick-off. Pick an official launch date and get your staff, leadership and participants involved and excited.
- c. Pilot each program. If you have a large institution, pick one area to focus on first and work out the inevitable kinks of the program. Taking your time with a pilot program can make implementing a system-wide initiative smoother and easier for staff and participants.

Pro Tip: Train the “why” in addition to the “how.” The last thing you want is for programming to become just one more task for your staff to complete. Involve them throughout the process and explain why these programs are important.

Pro Tip: Don't forget to include the end user from the beginning. To avoid participants showing up physically but not committing to the program, give them some say and involvement in the programming process.

Pro Tip: There's always that one person – don't get locked in a power struggle. Sometimes that squeaky wheel just needs to be heard. Give your staff the opportunity to ask: what's in it for me? Once they're able to voice their concerns and have their questions answered, they might just become your program's biggest supporters.

Post-implementation

Building a successful program culture involves regular maintenance.

- a. Conduct regular follow-ups. Catching potential problems early can be essential for the long-term health of your programs.
- b. Utilize hard data. Gather statistics from the very beginning on completion rates, participant satisfaction and other key metrics. Share this data with your team to let them know what they're doing well and where adjustment can be made.
- c. Share anecdotal data. Success stories can be highly motivating for staff and future participants. Satisfied participants are your best advocates!
- d. Celebrate program milestones. Keep the momentum going that you built with the kick-off. Celebrate with staff and participants when curricula are completed and benchmarks are hit.

Pro Tip: It may happen that some areas (shifts, units, complexes) are highly invested while others aren't. Create some healthy competition! Use the hard and anecdotal data to highlight those who are doing well and encourage the whole system.

About The Change Companies

For over 30 years, The Change Companies has delivered cutting-edge behavior change tools to over 26 million individuals in addiction treatment and justice services. We combine the latest change research with end-user feedback to continually improve the design and delivery of our evidence-based practice of *Interactive Journaling*®.

Explore the Fidelity Platform

Facilitator training is a powerful method to improve client outcomes. By using evidence-based practices such as *Interactive Journaling*®, cognitive-behavioral therapy, the transtheoretical model of behavior change, motivational interviewing, and more, facilitators can achieve deeper and more effective interactions with clients. Quality training also enables high-fidelity delivery of *Interactive Journaling*®. Our new Fidelity Platform makes it easy to effectively implement *Interactive Journaling*® and other evidence-based practices while earning CEUs.

Learn more by visiting

<https://changecompanies-20881724.hs-sites.com/fidelity-platform>