

# Motivational Enhancement and Cannabis Use: Implementing a Brief Cannabis Cessation Protocol

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## Background

- In 2020, in the US, 14.2 million individuals were diagnosed with a Cannabis Use Disorder (CUD)<sup>1</sup>
- Few seeking treatment for CUD are able to achieve a substantial reduction or abstain from cannabis use<sup>2</sup>
- Individual and group psychotherapeutic modalities are standard in treating CUD.<sup>3</sup> A combination of motivational enhancement therapy (MET) and cognitive behavior therapy (CBT) may be the most efficacious approaches for treating CUD with improved treatment engagement and outcomes<sup>3,4</sup>

#### **Cannabis Cessation Protocol**

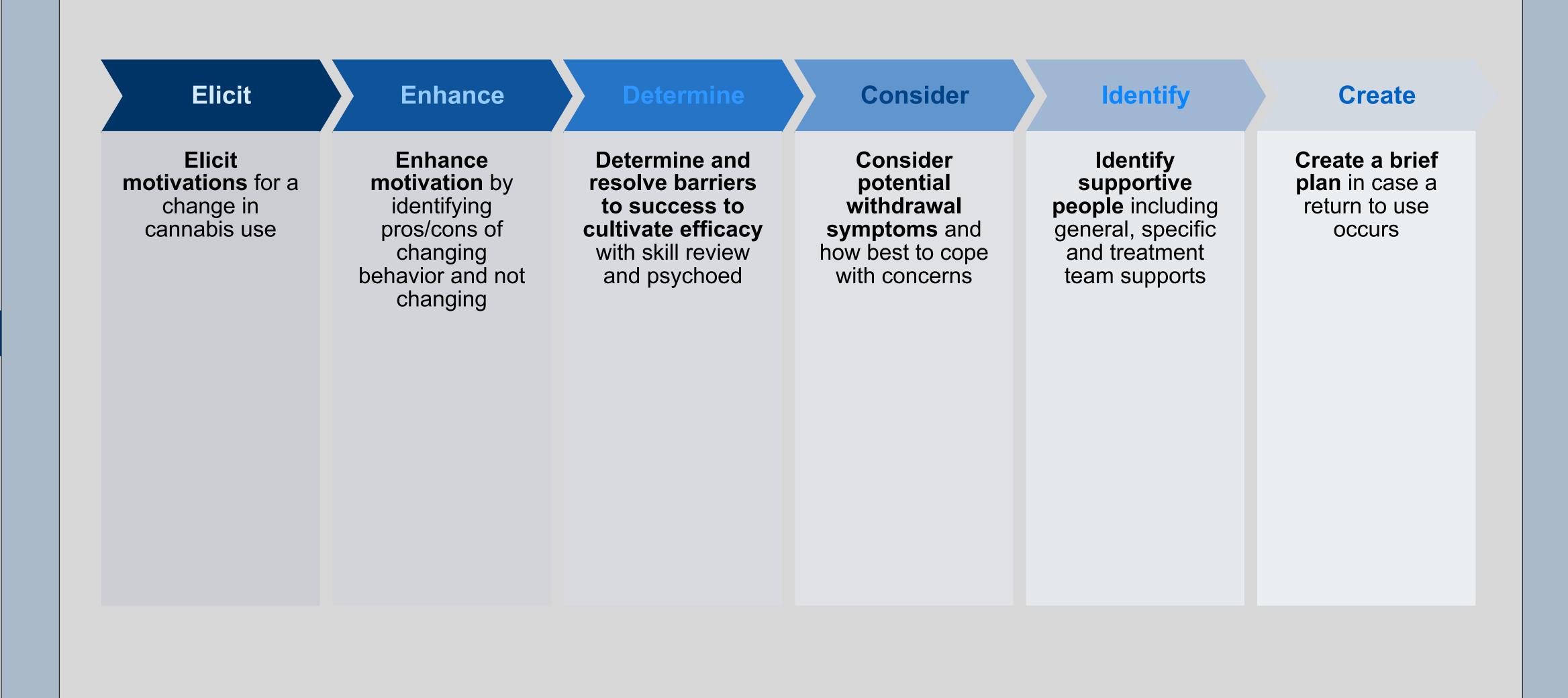
- Effects of cannabis (i.e. decreased learning, attention, memory, motivation)<sup>5</sup>, even problematic use, can negatively impact treatment retention, engagement and outcomes<sup>6</sup>
- Social beliefs suggest cannabis is non-addictive and thus easy to discontinue at will<sup>7</sup>
- → Without medications to reduce cravings or impact of use like with other substances, stopping use for any reason can be difficult without therapeutic intervention
- Goal of brief, MI & CBT-based pre-treatment protocol with clients planning to engage in a period of abstinence is to:
  - 1. Deepen understanding of use and motivation for cessation;
  - 2. Increase awareness of coping skills and strategies; and
  - 3. Enhance self-efficacy in client's ability to successfully stop using cannabis
- Preliminary findings of implementation demonstrate increased LOS and treatment engagement following program completion

### **Applications**

- This protocol:
  - ➤ Was created specifically for those diagnosed with a moderate or severe CUD;
  - ➤ Is based on MI principles with six steps to reinforce motivation and enhance commitment to abstinence and treatment; and
  - ➤ Is provided to patients to utilize as a living document to aid in early change efforts and update relevant information as needed to support goals.

Step One	<b>Step Two</b>	<b>Step Three</b>	<b>Step Four</b>	<b>Step Five</b>	Step Six
Goal Clarification	<b>Decisional Balance</b>	Preparing for Success	Addressing Withdrawal Symptoms	Naming Supports	Plan Ahead
<ul> <li>Tools:</li> <li>Identify substance and treatment goals</li> <li>Explore motivation for change</li> </ul>	<ul> <li>Weigh benefits of consequences of changing and not changing</li> </ul>	<ul> <li>Tools:</li> <li>Skills Review:     Breathing,     Grounding,     DEADS</li> <li>Identify change     areas: People,     Places, Things</li> <li>Assess     Confidence</li> </ul>	<ul> <li>Tools:</li> <li>Elicit withdrawal symptoms</li> <li>Provide psychoed and reassurance</li> <li>Identify coping strategies</li> </ul>	Tools:  • List: Informed,    Distracting and    Treatment    Supports	<ul> <li>Tools:</li> <li>Increase     awareness of     need to cope     ahead</li> <li>Normalize     change is a     process</li> <li>Identify steps to     take if return to     use occurs</li> </ul>

## Cannabis Cessation Protocol Overview



## 6 Step Protocol Step 1: Goals Clarification Step 2: Decisional Step 6: **Planning** Balance Step 5: Step 3: Naming Preparing for Success Supports Step 4: Addressing Withdrawa **Symptoms**

## **Initial Findings**

- The protocol was initiated at CUIMC to target treatment retention due to a pattern of premature termination for clients with CUD. We found positive initial signs that TAU+MET clients had a longer treatment length of stay and were more likely to follow-up with continuing care
- This adds to the literature on utility of pre-treatment commitment and enhancement work to increase treatment attendance and length of stay, two factors beneficial in SUDs treatment outcomes<sup>8,9</sup>
- Future research should explore:
  - Changes in co-occurring mental health symptoms and quality of life with the addition of MET, while assessing longer-term outcome rates
  - Considering severity of CUD as a factor for premature termination and for selecting the type of treatment and type of treatment goals to pursue

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