

**Rural Communities Initiative  
TANF Technical Assistance Training  
Substance Abuse Case Management Training  
Wolf Point, Montana  
November 17-19, 2009**

Prepared for the U.S. Department of Health and Human Services  
Administration for Children and Families  
Office of Family Assistance





**Rural Communities Initiative**  
TANF Technical Assistance Training  
Montana Substance Abuse Case Management Training  
Wolf Point, Montana



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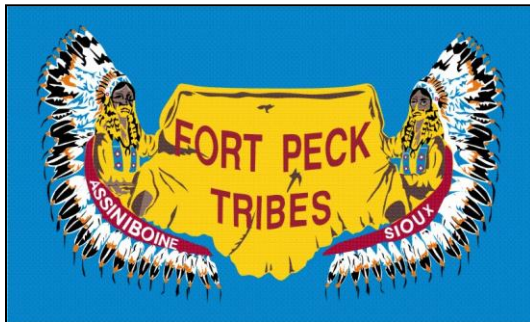


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## **I. Overview**

In recognition of the needs of rural communities and Temporary Assistance to Needy Families (TANF) agencies, the Office of Family Assistance (OFA), Administration for Children and Families (ACF), U.S. Department of Health and Human Services (DHHS) is sponsoring the Rural Communities Initiative. The Rural Communities Initiative provides States, Tribes, and local TANF agencies in 16 nominated rural sites from across the United States the opportunity to share information and promising practices on critical issues affecting the rural areas, and barriers to employment such as education, job skills, transportation, and child care. This Initiative was kicked off with the Rural Communities Academy in Kansas City, Missouri on September 3 - 5, 2008.



After finalizing their Technical Assistance Action Plan during the Rural Communities Academy, the Montana team identified a series of issues of critical importance to the future health and success of their TANF Program. Core among the concerns they faced was the prevalence of substance abuse challenges within their TANF caseload. The site was particularly interested in exploring new techniques that would simultaneously promote work attachment and

higher work participation rates (WPR) along with support participants in overcoming drug and alcohol addiction.

Based on these goals, the Montana team sought to convene a substance abuse case management training where TANF staff from Roosevelt County and the Fort Peck Reservation would be introduced to new and effective case management approaches for participants with substance abuse barriers. The team also requested that the introduction of job development and job placement approaches be included in the training agenda. The University of California-Davis, Center for Human Services (CHS) was identified by ACF Region 8 and the Montana Rural Communities Initiative site as the technical assistance provider for this event based on UC Davis' extensive experience providing technical assistance on the topics of addiction and recovery within the TANF caseload, particularly among participants from Tribal areas.

After a series of planning meetings between OFA, the Montana Team, Rural Communities Initiative staff, and UC Davis, the training was scheduled for November 17-19, 2009.

## **II. Day One – November 17, 2009**

On Tuesday, November 17, training participants met at the Sherman Motor Lodge Inn in Wolf Point, Montana to begin the three day substance abuse case management training. Seventeen



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caseworkers and TANF administrators from Roosevelt County and the Fort Peck Reservation attended the first day of the training.

**Welcome, Introductions, and Goal Setting**

Dr. Geni Cowan, one of UC Davis' lead trainers, began the day by welcoming all attendees to the case management training. Dr. Cowan asked participants for a brief description of their work responsibilities and how long they had been in that position. Following this introductory activity, participants were asked to form small groups and identify five goals they had for the training. Among the goals listed by the participants included:

- Improve handling of case management issues while staying within accepted guidelines and without “enabling” participants;
- Find new strategies for working with hard-to-serve participants, especially those who are continually regressing into alcohol or drug abuse;
- Implement programs that change negative community and family norms;
- Help participants build higher levels of self-esteem, motivation, and feelings of personal responsibility;
- Identify new and promising strategies around job retention and preparing participants to be work ready; and
- Better understand the physiology of addiction.

**Overview of Addiction and Historical Trauma**

After concluding the goal setting and introduction portions of the training, Dr. Cowan proceeded with a general overview of substance abuse and addiction issues within the TANF caseload. The addiction cycle, as framed during the training, was outlined in three stages:

- Stage One: The Emotional Addiction
  - *A change occurs in the participants' thought process and short-term gratification becomes a pervasive need to fulfill. Environmental cues also begin triggering the need to use.*
  - *This stage concludes with the participant experiencing long-term pain and dysfunction.*
- Stage Two: The Mental Addiction
  - *Changes in the brain account for addictive thinking and continued craving.*
  - *Cognitive functioning becomes extremely impaired during this stage.*
- Stage Three: The Physical Addiction
  - *While participants may experience increased tolerance during this stage they also more frequently witness complete loss of control.*



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- *Bio-psycho-social damage is paired with a deep dependence on the substance the participant is abusing.*

In order to break free of this addictive cycle, participants must first come to an awareness and acknowledgement of their addiction. Following this stage, detoxification through medical care and supervision is usually required. While detoxification and self-awareness are both crucial to make these changes sustainable, caseworkers must also implement strategies to change the participants' environment and reliance network, help them create closer ties to the community, and eventually, assist in building self-confidence.

Dr. Cowan's review of two different types of substance abuse assessments (CAGE and TWEAK) ended with a reminder that all such screenings needed to be followed by engaging participants in non-scripted conversation.

Dr. Cowan finished this session by reviewing the stages of recovery in substance abuse and touching on strategies that will help participants stay sober. From her perspective, changing one's lifestyle and avoiding extreme emotions are all helpful during the recovery period, but relying on will power alone does not suffice, caseworkers need to help participants build self-confidence. The remainder of the training was dedicated in a large part to helping case workers accomplish this goal and find ways to build participant self-efficacy and self-reliance.

### ***Introduction to Motivational Interviewing***

During the second part of Day One, Dr. Cowan led workshop participants through a discussion on the basics of motivational interviewing, a case management technique meant to improve self-efficacy and promote healthy decision-making. As Dr. Cowan explained, while motivational interviewing was initially established to help people with substance abuse issues make positive and successful changes in their lives, the skills and practices of motivational interviewing have been effective as tools to assist case managers with engaging TANF participants in making changes to become self-sufficient.

Motivational interviewing is, for all purposes, designed for individuals who do not want to change or are unsure they are capable of making change. Shifting to a change focused mentality only happens when individuals become increasingly uncomfortable with their current situation and lower their resistance for change. What then makes people become motivated to change negative for positive behavior? As Dr. Cowan described, motivation for change is a process that includes:

- Recognizing the problem;
- Finding ways to change the problem;
- Believing that one can change; and



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- Persisting in efforts to change.

The goal of the caseworker in promoting this process is to build relationships with participants that stress the importance of change, support their readiness for change, and build the participant's self-efficacy.

Even if a participant believes he/she is ready to engage in more healthy behavior choices, expressing defensiveness when presented with options and reasons for change are common. To help avoid antagonizing participants and build more obstacles, Dr. Cowan reviewed the types of caseworker behavior that may increase participant defensiveness to change:

- Ordering, directing;
- Warning, threatening;
- Giving advice, making suggestions, providing solutions;
- Persuading with logic, arguing, lecturing;
- Moralizing, preaching;
- Judging, criticizing, blaming;
- Agreeing, approving, praising;
- Shaming, ridiculing, name-calling;
- Interpreting, analyzing;
- Reasoning; sympathizing;
- Questioning, probing; and
- Withdrawing, distracting, humoring, or changing the subject.

To help avoid these behavioral pitfalls, Dr. Cowan introduced an acronym that summarizes the basics of motivational interviewing, referred to as "OARS". This term stands for (1) ask **O**pen-ended questions; (2) **A**ffirm; (3) Listen **R**eflectively, and; (4) **S**ummarize. After a brief overview of these concepts, workshop participants were asked to pair off for a case management role-playing activity. With one individual playing the case manager role and the other taking on the part of the TANF participants, groups practiced asking open-ended questions and avoiding behaviors that encouraged defensiveness.

### **III. Day Two – November 18, 2009**

During the second day of the workshop, Dr. Cowan reviewed some of the concepts of motivational interviewing introduced during Day One and led workshop participants through a number of activities to allow them the chance to practice more advanced motivational interviewing techniques.



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### **Motivational Interviewing – Modeling and Advanced Techniques**

The meeting began with a recap of the motivational interviewing techniques and theories discussed during Day One of the workshop. Participants in the workshop also discussed those strategies from Day One they felt had the most potential impact to enact change within their caseload:

- Encourage participants;
- Talk about how much better things will be after they stop substance abusing;
- When talking to participants, focus on ways to strengthen their resolve;
- Give advice only to people who are ready to listen; and
- Create change is a long and slow process that fluctuates from one time or situation to another.

When using motivational interviewing techniques, caseworkers were reminded that they are asking participants to make major, permanent changes in their lives. As a repeat of Day One's lesson, the change process is slow, arduous, and at times, quite complicated. As a way to help workshop participants envision the steps involved with behavioral change, Dr. Cowan described the five "stages of change" associated with individuals combating (and eventually overcoming) substance abuse:

- Stage One: Precontemplation – Entry state, lack of recognition that current behavior is problematic. Providing advice or referrals would be counter-productive.
- Stage Two: Contemplation – Consideration that there may be a problem, although participant is still relatively ambivalent towards taking steps to address this situation.
- Stage Three: Determination – Commitment to action, though participants' motivation may fluctuate. At this stage, caseworkers should focus primarily on helping the participant find the most appropriate and effective strategies for change.
- Stage Four: Action – Implementing the strategies for change discussed during Stage Three.
- Stage Five: Maintenance – New behavior patterns are initiated and established. New skills that have been developed to maintain positive change must be adopted.

Dr. Cowan emphasized that the path through these five stages is by no means fluid and that, throughout this process, temporary exit from and reentry into substance abusing behavior is common.

During the remainder of Day Two, participants practiced motivational interviewing techniques that encourage attentive listening, empathy, and non-judgmental feedback. The first activity focused on one individual playing the role of TANF participant while their partner practiced providing non-accusatory feedback in the role of caseworker. Groups practiced listening and





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giving feedback that was not solution-focused, but rather a response to the behavior that was being described. Workshop participants also practiced the reflective response approach, which involves repeating the patient's statement in a neutral form. This acknowledges and validates what the patient has said and can elicit a more in-depth and revealing response.

### **III. Day Three – November 19, 2009**

The third day of the workshop began with Dr. Cowan asking participants to list the key strategies, tools, and conversations that emerged during Day Two. Among the ideas mentioned include:

- Maintain a positive outlook when interacting with TANF participants;
- Open communication is crucial;
- Caseworkers need to constantly talk to participants about their belief in them;
- Remove barriers by providing positive alternatives;
- Caseworkers need to be aware of their own emotions;
- Start from where the participant is coming from; and
- Change completed quickly does not get done.

Following this recap, participants continued their work exploring and modeling advanced motivational interviewing techniques.

#### ***Motivational Interviewing – Modeling and Advanced Techniques, cont.***

As previously mentioned, reflective responses are an important aspect of the motivational interviewing process. The final reflective response technique is known as “summarizing”. This approach involves pulling together all the statements that a participant has shared and presenting them back to the participant. The purpose of this technique is to change course or shift focus with a participant or to wrap up a session. An example where a caseworker uses summarizing to relay statements about domestic verbal abuse back to a participant could look like this, “Okay. So let me see if I have got this straight. Your husband’s criticism has become too much, it is affecting your self-esteem, and you are worried that your daughter is learning that it is okay to mistreat women. Where does this leave you now?”

When using the summarizing technique, care must be taken not to read too much into participants’ statements and end up intensifying the situation. Rather, the focus needs to remain on making the participant reveal additional information at a pace that is self-initiated and comfortable.

In cases where the beginning stages of motivational interviewing have shown positive responses from TANF participants, Dr. Cowan offered suggestions for ways to increase the impact of change talk. One such strategy is to ask participants to imagine what might happen if



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he or she acts out extremes in behavior. She also mentioned helping participants to imagine a future without substance abuse and to explore values they have in their life that are inconsistent with drinking/drug use. These approaches help participants examine how they perceive their own substance abuse. Dr. Cowan also reminded workshop participants to let TANF participants fail in their substance abuse recovery if it is needed. In the end, successes or failures belong to the TANF participant, not the caseworker.

Dr. Cowan concluded her presentation of motivational interviewing theory and practice by offering an open forum where participants could ask questions on the behavior change approach. Among the topics that were raised include:

- How to help participants self analyze?
  - *Answer: Ensure that decisions and judgments are the participants' own.*
- How do caseworkers celebrate participant success?
  - *Answer: Tailor/personalize each celebration to the participant and do not over think your strategy.*
- What are ways for administrators to support staff in the MI process?
  - *Answer: Prioritize taking care of caseworkers. Offer annual retreats, barbeques, and similar events to express gratitude. Send out kudos to celebrate success in your office.*
- What are strategies for working with the very hardest to serve?
  - *Answer: Do not immediately speak with participants on TANF issues. Build rapport first by speaking with participant about their family and focus on the positive.*
- How to avoid trying to become a “problem solver” on behalf of participants?
  - *Answer: Work on listening before solving.*
- What is the best way to learn how to ask open ended questions?
  - *Answer: Caseworkers have to practice this technique.*

Following this question and answer session, participants expressed their belief that motivational interviewing had many potential applications in their state, and they inquired if Dr. Cowan would be available for follow-up trainings.



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**Strategy Session around Increasing Workforce Participation Rates (WPR)**

During the last workshop session, Dr. Cowan facilitated a group brainstorming activity around identifying strategies for increasing the WPR, particularly among those individuals faced with substance abuse barriers. Among the strategies discussed during this session include:

- **Promote more countable cultural activities.** Workshop participants recognized that this suggestion was helpful, but as a State TANF program, Montana has less latitude in using cultural activities as countable hours than Tribal TANF programs.
- **Have eligible participants serve as Alcoholics Anonymous (AA) sponsors.** Concerns were raised that the pool of eligible TANF participants for this activity would be quite small. Others questioned the plausibility of verifying this activity, though it was pointed out that a copy of the AA sign-in sheet and/or signature from the meeting organizer would both suffice.
- **Encourage participants to volunteer with Head Start.** Some workshop participants are already implementing this strategy, though they advised that interested TANF participants would first need a thorough criminal background check.
- **Connect participants to job skills classes at Fort Peck Community College.** The local community college has classes in auto mechanics, computer skills, and carpentry which may be of use/interest to TANF participants. Caseworkers also suggested working with TANF participants to write a business plan showing how participation in these education activities will result in better employment opportunities. While the community college has a GED requirement for enrollment, workshop participants felt a strong alternative was training ineligible TANF participants to teach others how to study. The Fort Peck Community College operates such a program and has no GED requirements for participation.
- **Utilize the craft making skills of TANF participants to teach traditional arts and open up business opportunities.** Workshop participants identified that within their caseload, there are a number of TANF participants with sewing, beadwork, painting, and woodworking skills. The idea was suggested to hold classes around teaching these activities, within the cultural context, then to hold a bazaar to sell finished products. Caseworkers believe that sewing resources and other tools could be housed within the TANF agency, but the agency would need dedicated TANF staff acting in a supervisory role in order to sustain this project.
- **Capitalize on participants' strong sense of family tradition by introducing community service opportunities.** Caseworkers believe close family ties and feelings of family



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responsibility common among their TANF participants, a program that tied these values to community service may find success in the community. An idea was proposed to have participants brainstorm around ideas for providing community service to benefit the elderly and/or single mothers.

Introducing new and countable work activities that support TANF participants' self-sufficiency goals can have a two-tier effect – not only are better WPR outcomes achieved, but for those participants facing substance abuse challenges, new opportunities for community service and skills training can result in the replacement of “negative” behaviors (i.e. drug abuse) with “positive” behavior (education and job training). These activities can help TANF participants stay engaged in the program and increase their sense of self worth. In the words of Dr. Cowan, “If you are taking something away, you need to replace it with something else. You have to give people something to do, or they will not be around long.”

#### **IV. Conclusion and Evaluation Results**

During the training, Montana staff was highly engaged, eager to participate, and asked important questions of both the trainer and their peers. Throughout the training, participants commented on the well-balanced training agenda that included a substance abuse overview, in-depth explanations around techniques for motivational interviewing, opportunities to model these approaches, and a brainstorming session around WPR and job creation.

Evaluation data (see **Appendix C** for complete results) and participant feedback from the training were overwhelmingly positive. One hundred percent of all respondents agreed that the training helped improve their professional skills and allowed them to better understand aspects of their jobs dealing with substance abuse case management. Similarly, evaluations indicated that 100 percent of respondents believe that the training was effective and that the course materials would be useful on the job. Participants' suggestions for improving the training were having the model motivational interviewing techniques prior to asking participants to role play these approaches.



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## **Appendix A: Site Visit Agenda**

### **Case Management Training**

November 17-19, 2009

#### **Welcome, Introductions and Opening Blessing**

##### **Day 1**

#### **Addiction and Historical Trauma**

##### **Day 1**

This session will provide a general overview of substance abuse and addiction, as well as aspects of addiction and recovery that are relevant to the path to self-sufficiency. In order to engage participants in a continuous commitment to their sobriety and ultimate self-sufficiency, it is important for case management staff to understand the cycle of addiction, relapse and recovery, and the barriers/obstacles facing the recovering addict who may also be engaged in work participation activities. Finally, the session will address the process of change/recovery and motivational interviewing as a tool to help participants maintain sobriety, and participation in work-related activities, while waiting for treatment opportunities. Topics include:

- Why people get addicted
- Why people get sober
- Symptoms of substance abuse
- Stages of addiction
- Working with clients in recovery
- Codependency
- Role of TANF case management
- Sustaining commitment to sobriety and life changes

As a result of this workshop participants will know how to discuss abuse and its problems in the participant's terms and increase their effectiveness with diverse populations.

#### **Review: Motivational Interviewing**

##### **Day 1 and Day 2**

Motivational interviewing is a powerful approach to helping people make changes in their lives. Initially established to help people with substance abuse issues make positive and successful changes in their lives, the skills and practices of motivational interviewing have been effective as tools to assist case managers with engaging TANF participants in making changes needed in their lives to become self-sufficient. The practical skills and strategies discussed are based on



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principles of self-sufficiency, change and collaboration with others. Workshop attendees will learn to use motivational interviewing strategies to engage participants in making significant life changes, while maintaining their commitment to change while they wait for opportunities to move forward (i.e., waiting for inpatient treatment space, etc.).

This session will review the following knowledge and skill sets as a foundation to their use in intensive case management:

- The cycle of change;
- OARS: principles of motivational interviewing;
- Active and reflective listening practices;
- Recognizing and using change talk;
- Recognizing and responding to resistance;
- Values exploration;
- Providing feedback;
- Eliciting and selectively reinforcing the client's own self motivational statements, expressions of problem recognition, concern, desire, intention to change and ability to change; and
- Monitoring the client's degree of readiness to change.

Practicing the skills and strategies covered during the training period is a necessary and critical component of the training as it creates a safe space for participants to become familiar with motivational interviewing as a tool, and comfortable with its use.

**Intensive Case Management:**

**Working with Substance Abusing TANF Participants**

**Day 2 and Day 3**

This session will focus on the strategies and practices of the intensive case management model as an effective approach to working with substance abusing TANF participants. Specifically, the following will be addressed:

- Models of case management;
- Integrating motivational interviewing with intensive case management;
- Helping participants manage change;
- Helping participants sustain motivation; and
- Discuss case management and work activities.

Workshop attendees will have opportunities to practice utilizing motivational interviewing and intensive case management strategies to case manage participants with addiction issues. Participants will also discuss the use of these skills and practices to assist clients to stay



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motivated to change, remain committed to their recovery, and to engage in work participation activities and meet case plan goals and objectives.

**Review, Evaluation and Closing**  
**Day 3**

**Instructor**

*Geni Cowan, PhD*, has been a trainer with The Center for Human Services since 1992, and has worked extensively with American Indian communities and individuals. Of Choctaw Indian and African American heritage, Geni's areas of expertise include organizational development, leadership and management, cultural diversity, case management, the Indian Child Welfare Act, domestic abuse, substance abuse and HIV/AIDS. Geni has more than 25 years of experience in human services as a counselor, trainer and administrator. She is a professor at California State University, Sacramento.

**Professional Credit**

Workshop participants will earn Continuing Education Units (CEUs). Many employers and re-licensing entities accept CEUs as evidence of a commitment to career advancement and maintenance of professional competence. UC Davis Extension will award 1.8 CEUs to workshop participants.



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## **Appendix B: Contact List**

### **Trainers**

#### **DR. GENI COWAN**

University of California, Davis  
7485 Rush River Drive – Suite 710-116  
Sacramento, California 95831  
916.997.0900  
[gcowan@eagleblue.net](mailto:gcowan@eagleblue.net)

#### **HEATHER REKKEN RUSSELL**

Tribal TANF Programs  
UC Davis Extension  
Davis, California 95618-4860  
530.757.8648  
[hrussell@ucde.ucdavis.edu](mailto:hrussell@ucde.ucdavis.edu)

### **Primary Montana Contacts**

#### **WILMA BROWNLEE**

Department of Labor and Industry  
PO Box 12  
Poplar, Montana 59255  
406.768.3136  
[bbrownlee@mt.gov](mailto:bbrownlee@mt.gov)

#### **LORRIE COFER**

DPHHS/Public Assistance  
48 2nd Ave. – Suite 200  
Havre, Montana 59501  
406.265.5196  
[lcofer@mt.gov](mailto:lcofer@mt.gov)

### **ICF International, Inc.**

#### **PATRICK HEIMAN**

ICF International, Inc.  
10530 Rosehaven Street – Suite 400  
Fairfax, Virginia 22030  
703.383.3326  
[pheiman@icfi.com](mailto:pheiman@icfi.com)





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### Appendix C: Evaluation

	Strongly Agree	Agree	Disagree	Strongly Disagree
I think the course was what I needed with respect to my job performance.	83%	17%	—	—
I now understand things about my job that I did not understand before because of what I learned in this course.	50%	50%	—	—
I believe this course will help me to improve my professional skills.	75%	25%	—	—
I would encourage others with similar job functions as mine to take this course.	83%	17%	—	—
This course made me want to learn more about this topic.	75%	25%	—	—
The course materials were useful to me during the training.	67%	33%	—	—
The course materials are understandable and easy to use.	58%	42%	—	—
I will be able to use the course materials on the job.	42%	58%	—	—
I am able to relate the course materials to the services being provided to eligible customers.	58%	42%	—	—
I feel that this training was effective for me.	92%	8%	—	—



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**Evaluation Comments**

**What area of the training did you feel was most important to you?**

- That it was focused on our program and the participants that we serve.
- All of it!
- The worker/client relationship.
- Listening and changes.
- I feel that learning the “language of change” will be invaluable.
- Getting the client to make the change.
- All of it was important to me.
- I learned to not solve or try to solve their problems but let them solve their own problems. I can help them with that.
- It was good to attend this training with staff for the teambuilding.
- No comment. (3)

**How would you make this training more positive?**

- Not sure.
- If you could share this with law enforcement and the court system.
- Not applicable. I really enjoyed the class.
- Nothing—it was good.
- The room was too cold!
- The training was good.
- I felt it was very positive.
- It would be good to see short videos of the right and wrong way to role play to see it done first, and, then, we could role play ourselves.
- Provide more role playing examples before we role play ourselves.
- No comment. (3)

**Can you identify what specific skills or practices would help you in performing your job to the best of your ability?**

- Motivational interviewing and working with substance abusing clients.
- Thank you!
- Increasing the change talk—the positives versus the negatives.
- The cycle of changing.
- Not yet—let me practice with a few clients.
- Communication.
- I need to ask open ended questions more.
- Better listening skills.
- Listen and reflection.
- No comment. (3)