

Client Change Interview Protocol (CSEP, 9/99)

Instructions

Preparation: Give client a copy of the interview schedule the week before, so that s/he can think about it beforehand.

Materials:

- This protocol, including Change Interview Record
- Release of Recordings (first mid-treatment and posttreatment interviews)
- Screening PQ data (posttreatment & follow-up interviews) or posttreatment PQ (follow-up interviews)
- audiotape

Label notes & tape: Please label your notes and the interview tape with the following information: Client initials and case number; date of interview; your name; whether this is a midtreatment or posttreatment interview (including how many previous sessions the client has had).

Interview Strategy: This interview works best as a relatively unstructured empathic exploration of the client's experience of therapy. Think of yourself as primarily trying to help the client tell you the story of his or her therapy so far. It is best if you adopt an attitude of curiosity about the topics raised in the interview, using the suggested open-ended questions plus empathic understanding responses to help the client elaborate on his/her experiences. Thus, for each question, start out in a relatively unstructured manner and only impose structure as needed. For each question, a number of alternative wordings have been suggested, but keep in mind that these may not be needed.

- Ask client to provide as many details as possible
 - Use the "anything else" probe (e.g., "Are there any other changes that you have noticed?"): inquire in a nondemanding way until the client runs out of things to say

Introduction for Client. Do some simpler version of the introduction given at the top of the Interview Schedule to introduce the interview.

Change Interview Record (7/99)

Client Initials _____ Case ID _____

Interviewer _____ Date _____

Assessment (circle one): mid post follow-up/6mo follow-up/18mo

Number of previous sessions (circle one): 10 20 30 40 other: _____

Psychopharmacological Medication Record (incl. herbal remedies)

<u>Medication Name</u>	<u>For what symptoms?</u>	<u>Dose/ Frequency</u>	<u>How long?</u>	<u>Last Adjustment?</u>

Change List

<u>Change</u>	<u>Change was:</u> 1 - <u>expected</u> 3 - <u>neither</u> 5 - <u>surprised</u> by	<u>Without therapy:</u> 1 - <u>unlikely</u> 3 - <u>neither</u> 5 - <u>likely</u>	<u>Importance:</u> 1-not at all 2-slightly 3-moderately 4-very 5-extremely
1.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
2.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
3.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
4.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
5.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
6.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
7.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
8.	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5

Client Change Interview Schedule (9/99)

After each phase of treatment, clients are asked to come in for an hour-long semi-structured interview. The major topics of this interview are any changes you have noticed since therapy began, what you believe may have brought about these changes, and helpful and unhelpful aspects of the therapy. The main purpose of this interview is to allow you to tell us about the therapy and the research in your own words. This information will help us to understand better how the therapy works; it will also help us to improve the therapy. This interview is tape-recorded for later transcription. Please provide as much detail as possible.

2. General Questions:

- 1a. What medication on you currently on?** (researcher records on form, including dose, how long, last adjustment, herbal remedies)
- 1b. Review Release of Recordings form**
- 1c. What has therapy been like for you so far? How has it felt to be in therapy?**
- 1d. How are you doing now in general?**

2. Self-Description:

- 2a. How would you describe yourself?** (If role, describe what kind of ____? If brief/general, can you give me an example? For more: How else would you describe yourself?)
- 2b. How would others who know you well describe you?** (How else?)
- 2c. If you could change something about yourself, what would it be?**

3. Changes:

- 3a. What changes, if any, have you noticed in yourself since therapy started?** (For example, Are you doing, feeling, or thinking differently from the way you did before? What specific ideas, if any, have you gotten from therapy so far, including ideas about yourself or other people? Have any changes been brought to your attention by other people?) [*Interviewer: Jot changes down for later.*]
- 3b. Has anything changed for the worse for you since therapy started?**
- 3c. Is there anything that you wanted to change that hasn't since since therapy started?**

4. Change Ratings: (Go through each change and rate it on the following three three scales:)

4a. For each change, please rate how much you expected it vs. were surprised by it? (Use this rating scale:)

- (1) Very much expected it
- (2) Somewhat expected it
- (3) Neither expected nor surprised by the change
- (4) Somewhat surprised by it
- (5) Very much surprised by it

4b. For each change, please rate how likely you think it would have been if you hadn't been in therapy? (Use this rating scale:)

- (1) Very unlikely without therapy (clearly would not have happened)
- (2) Somewhat unlikely without therapy (probably would not have happened)
- (3) Neither likely nor unlikely (no way of telling)
- (4) Somewhat likely without therapy (probably would have happened)
- (5) Very likely without therapy (clearly would have happened anyway)

4c. How important or significant to you personally do you consider this change to be? (Use this rating scale:)

- (1) Not at all important
- (2) Slightly important
- (3) Moderately important
- (4) Very important
- (5) Extremely important

5. Attributions: In general, what do you think has caused these various changes? In other words, what do you think might have brought them about? (Including things both outside of therapy and in therapy)

6. Helpful Aspects: Can you sum up what has been helpful about your therapy so far? Please give examples. (For example, general aspects, specific events)

7. Problematic Aspects:

7a. What kinds of things about the therapy have been hindering, unhelpful, negative or disappointing for you? (For example, general aspects, specific events)

7b. Were there things in the therapy which were difficult or painful but still OK or perhaps helpful? What were they?

7c. Has anything been missing from your treatment? (What would make/have made your therapy more effective or helpful?)

8. Suggestions. Do you have any suggestions for us, regarding the research or the therapy? Do you have anything else that you want to tell me?

9. Review Personal Questionnaire (PQ)

Instructions: Compare pre-therapy (screening) and post-therapy to current PQ ratings with client, noting number of points changed for each problem. Tell client: We are trying to understand how clients use the PQ, and what their ratings mean.

9a. In general, do you think that your ratings mean the same thing now that they did before therapy? If not, how has their meaning changed? (Sometimes clients change how they use the PQ rating scale; did that happen for you?)

9b. Identify each problem that has changed 2+ points:

- (1) Compare each PQ problem change (2+ points) to the changes listed earlier in the interview.
- (2) If the PQ problem change is not covered on the change list, ask: **Do you want to add this change to the list that you gave me earlier?**
 - If yes -> go back to question 5 and obtain change ratings for this change.
 - If no -> go on:
- (3) For each PQ problem change (2+ points), ask: **Tell me about this change: What do you think it means? Do you feel that this change in PQ ratings is accurate?**

10. Review Pretherapy Self-description (only if pre-treatment self-description has been obtained)

- Show client self-description summary from screening; ask:
 - How does this compare with how you see yourself now?** (What is similar? What is different? How do you understand these similarities and differences?)