



ENGAGEMENT SESSION CHECKLIST

Eliciting her Story

- Health Concerns:** *“What main problem brought you to the clinic? How long have you had this problem? Have you seen a doctor for this before? Are you worried something serious might be causing the problem? What do you think might be causing the problem?”*
“What are you hoping the doctor might do about your problem?”
 - explain what is causing the problem
 - tell me how long my problem is likely to last
 - prescribe a medicine
 - order lab tests or x-rays
 - refer me to another clinic or specialist
 - give me a note to stay home from work
 - other _____
- Mood:** understanding of her depression, its contributors, how it interferes with her life
- Context:** social context of depression, pregnancy, chronic and time-limited problems, impact on mood
- Summary:** combine your reflections, offer an affirmation, highlight change talk

Eliciting Treatment History and Hopes for Treatment

- Depression History:** previous depressions, past/current coping efforts, affirm strengths
- Treatment History:** self/others’ experience with and ideas about treatment? Positive/negative? Social agencies?
- Treatment Hopes/Expectations:** treatment hopes/fears, therapist hopes/fears, looking forward – what would she like to be doing 2 months from now?
- Summarize:** combine reflections, capture ambivalence with double-sided reflection, highlight change talk

Feedback and Psychoeducation

- Feedback:** (elicit... provide... elicit) *“Would it be okay if I shared results from the questionnaire you filled out?”* Provide probable diagnosis, symptom severity. Ask *“What do you make of this?”* or *“How does this sound to you?”*
- Psychoeducation:** (elicit... provide... elicit) *“What do you know about depression?”* or *“May I provide some information about depression and treatment options?”* Provide/discuss depression as illness, affects problem-solving, creates difficulty managing chronic stress or pregnancy, can be effectively treated, educate about antidepressants or PST-PC. Ask, *“What are your thoughts about depression and/or treatment options?”* Summarize her pros and cons.

Continued



Barriers to Treatment Seeking

- Practical:** *“What might make it hard for you to come, even if you wanted and intended to?”*
Transportation? Scheduling? Childcare? Financial concerns?
- Psychological:** *“Beyond these practical concerns, what else might keep you from coming?”*
Attitudes/beliefs about treatment? Personal or others’ negative experiences with treatment? Negative experiences with other social agencies? Symptoms? Guilt about taking time away from children/family? Difficulty “putting self first”? CPS concerns?
- Cultural:** Stigma? Therapist race/culture/gender? Alternate community-centered approaches?

Eliciting Commitment

- Grand Summary:** highlight her “story:” ambivalence, change talk, barriers and solutions
- Change Plan:** outline next steps, discuss expectations about timing/scheduling of treatment, etc.
- Leave Door Open:** anticipate adherence setbacks, convey non-punitive stance. *“Some patients, despite best intentions, find it hard to follow through. We’d like to talk with you if that happens to see if we can help.” “We can offer treatment over the phone.”*
- Instill Hope:** affirm participation, recall session positives, express optimism. *“Depression is treatable.” “This treatment has worked for others like you.”*

Post Session Evaluation by Depression Care Manager: Did you?

- Use more reflections than open-ended questions?
- Use affirmations?
- Use summaries?
- Use double sided reflections?
- Highlight change talk?
- Emphasize personal choice and control?