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SCHOOL MENTAL HEALTH

Adolescent Community Reinforcement Approach (A-CRA)

—Tier 3—

Overview: Adolescent Community Reinforcement Approach uses cognitive-behavioral therapy (CBT) to reinforce substance-free lifestyles in adolescents.

Modality	Intended Audience	Staffing Requirements	Additional Materials Needed
10-14 sessions (10 individual sessions with adolescent, 4 sessions with caregiver)	12 to 24 years old	Master-level clinicians	Assessment forms and handouts for parents and caregivers. *The National Center for School Mental Health will provide training manuals to all trainees.*

Target Outcomes

- Promote abstinence from alcohol, marijuana, and other drugs
- Increase positive social activity and peer relationships, while also improving relationships with family
- Foster effective parenting practices
- Promote adolescent problem-solving and effective communication skill development

Training Requirements and Important Considerations

Type of Training: Two-day virtual training (6.5 hours per day)

Continuing Education Units: Participants can receive up to 10 credits

Expectations for full participation and certificate of attendance: To be considered trained, the expectation is that trainees complete the full training, demonstrate engagement (e.g., on-time, stay for the full session, camera on, participation in role-plays, practice activities). ==If you miss key components of the training, you may not receive CEUs or a certificate of attendance and will need to reregister and complete the full training if spots are available.==

Important Considerations: A-CRA implementors need to be Master level clinicians or supervisors, have experience working with adolescents, and complete the two-day, virtual A-CRA training.

Ongoing Engagement and Expectations

POC/Supervisor Expectations:

- **Attend Kick-off Meeting:** Meet with the EBP team to discuss the training and implementation plan at the beginning of the grant period. We recommend inviting trainees to this meeting.

- **Attend M&D Meeting:** Meet with the Evaluation and EBP team to discuss metrics and deliverables for the grant including reach and target demographics, service offerings, and outcome expectations. Please see the Outcome Measure Menu included in the RFA documents for sample tools/measures to be used with each EBP.

- **Maintain regular communication** with coordinator(s) from the National Center for School Mental Health to ensure progress toward training and implementation goals including review of a monthly newsletter containing training and evaluation updates for your organization, and action items.

- **Provide administrative and supervisory support** to staff, including, but not limited to:
  o Share important dates (e.g. training dates, implementation support call dates), registration links, training evaluation completion reminders, and other important information with staff.
  o Ensure that providers in your organization attend the selected EBPs for which they are registered. If staff register for training and do not show up, there is not a guarantee they can train at a future date, which may impact implementation plans outlined in your grant application.
  o Please provide ongoing communication with your organization's providers about training attendance and expectations. Consider providing funding for staff time to attend training and implementation calls as appropriate.
  o Ensure staff completion of all training, evaluation, and implementation tasks.

Providers/Trainees Expectations:

- **Commit to attending the training once registered**
- **Complete the post-training evaluation** survey for each selected EBP
- **Attend quarterly implementation support** meetings offered over the year for each EBP you are implementing

*For more information on this evidence-based practice, please visit the [Adolescent Community Reinforcement Approach](#) website. For questions pertaining to the RFA or to expectations and requirements, please contact: Lorianne Moss, the CHRC Program Manager at Lorianne.moss@maryland.gov.