

Competency descriptions and abbreviated instructions for standardized role plays

If using standardized role plays, the following descriptions and prompts can be used when eliciting different competencies. For full details on performing standardized role plays see <https://equipcompetency.org/>

1.PSYCHOEDUCATION ON BEHAVIOURAL ACTIVATION

Helper explains principles of behavioural activation and the relationship between activity and mood. Helper explains the cycle of how feelings and mood can affect behaviours and activities in both directions (e.g., inactivity promotes lower mood, contributing to inactivity; low mood promotes low activity, promoting lower mood) and relates the process to how the client has been feeling. Helper describes how finding activities the client enjoys or finds meaningful (including different ways the client can engage in them) may be beneficial. Helper discusses the number of sessions and allows the client to ask questions about the process. If the client finds it helpful, client involves a family member or friend.

SINGLE COMPETENCY ROLE-PLAY

Trainer prompts Helper: “I will act as your client. I’m complaining of constantly feeling tired, staying in bed most days, and have stopped seeing my close friends. Your role is to explain the cycle of behaviours and activities affecting mood and feelings, and how doing more activities that I enjoy may be helpful.”

Trainer or another trained actor should act as the client for this role-play.

Role-play features “client” explaining current bad feelings and unhelpful behaviours.

Role-play should “stop” once competency has been rated OR allotted time has been reached (e.g., 5-15 min).

Should <i>not</i> do	Should do
<ul style="list-style-type: none"> Scold or blame client for feelings and negative behaviours Lecture client to participate in behavioural activation 	<ul style="list-style-type: none"> Explain how behaviours and activities affect mood and feelings; relate the process to how client has been feeling Explore activities the client enjoys and values, and how it might benefit to engage in them proactively Discuss number of sessions for behavioural activation and allow client to ask questions about the process

2.CONNECTING MOOD AND ACTIVITIES

Helper works with the client to identify their behaviours/activities that connect to feelings (“up-down” activities). Different behaviours and activities that help the client feel good (“up activities”) and those that connect to the client feeling bad (“down activities”) are identified, including a mix of personal, social, and physical activities. A visual tool (like a diagram or triangle) may be used to reinforce these connections. Helper explains how mood leads to activity/behaviour and behaviour/activities can also lead to mood. Helper allows the client to come up with the ideas for activities. Helper may give suggestions to help client if they’re having difficulty.

SINGLE COMPETENCY ROLE-PLAY

Trainer prompts helper: “You have just explained to a client the basic principles of behavioural activation and related it to their current behaviours and feelings. Your role is to now identify both positive and negative behaviours the client engages in (“up-down activities”), making connections with these activities and how the client feels. You may start by asking me what I did last week.”

Trainer or another trained actor should act as the client for this role-play.

Role-play features Helper asking about activities the client did last week.

Role-play should “stop” once competency has been rated OR allotted time has been reached (e.g., 5-15 min).

Should <i>not</i> do	Should do
<ul style="list-style-type: none"> Identify only negative/’bad’ activities/behaviours Only identify one type of activity (e.g., only physical, but not social) Lecture client and not allow client input 	<ul style="list-style-type: none"> Connect feelings and activities, both (“up activities”) and (“down activities”) Explain both directions (mood→activity) & (activity→mood) Use a visual tool like a diagram or triangle to reinforce connections Allow client to come up with ideas for activities

3. MOOD AND ACTIVITY MONITORING

Helper works with the client to help them track their moods and activities, beginning with “up/down” moods and activities discussed previously. Helper ensures client understands how to track her/his mood and activities on their own, explaining the importance of doing this at home to self-monitor and better understand how their feelings are related to activities/behaviours throughout the week. Helper may use a visual tool such as a monitoring chart to support home practice. Helper elicits feedback from the client, discussing feelings about tracking moods and feelings at home.

SINGLE COMPETENCY ROLE-PLAY

Trainer prompts helper: “You have just worked with a client to identify “up/down” activities. Your role now is to review/orient the client with an activity monitoring chart and practice in-session. Remember to make sure they know the importance of using this monitoring chart on their own during home practice. You may start by explaining what an activity monitoring chart is.”

Trainer or another trained actor should act as the client for this role-play.

Role-play features Helper explaining about a mood and activity monitoring chart.

Role-play should “stop” once competency has been rated OR allotted time has been reached (e.g., 5-15 min)

Should *not* do

- Fill out chart for client
- Only use client’s negative feelings and behaviours to practice filling chart

Should do

- Ensure client understands how to complete a mood & activity monitoring chart
- Explain importance of using chart at home, self-monitoring throughout the week
- Elicit feedback from client about using chart
- Set up next session for review

4. REVIEWING AT-HOME PRACTICE FOR MOOD AND ACTIVITY MONITORING

In follow-up session to competency #3 Mood and Activity Monitoring, Helper reviews the practice activity with the client. Helper reviews how the client’s home practice for monitoring activities and moods went. Helper discusses how activities were related to rated moods on the chart. Helper praises client for successes, normalises and discusses barriers/ challenges and works with client on ways to overcome barriers. Helper is encouraging and supports daily use of daily, highlighting the taking part in more activities that help the client feel better.

SINGLE COMPETENCY ROLE-PLAY

Trainer prompts Helper: “Last week, you assigned a client at-home practice for using the mood & activity monitoring chart. You are now meeting with the client in a follow-up session to review the assignment and discuss how things went, learning about successes and barriers.”

Trainer or another trained actor should act as the client for this role-play.

Role-play features Helper reminding client about the at-home practice for monitoring chart assigned the previous session.

Role-play should “stop” once competency has been rated OR allotted time has been reached (e.g., 5-15 min)

Should *not* do

- Blame client for not trying/completing monitoring chart
- Tells client what should and shouldn’t have been done

Should do

- Review how client’s home practice for monitoring mood and activities went
- Discuss how activities were related to rated moods on the chart
- Praise client for successes, normalise and discuss barriers/challenges
- Encourage and support use of the chart daily

5. ACTIVITY SCHEDULING/BEHAVIOURAL SCHEDULING

Helper works with the client to develop an activity schedule consistent with client’s goals and values, which are meaningful to the client and support ‘up moods’. Helper works with client to create a list of activities which are

feasible and work towards a goal (e.g., returning home from work early might help to spend more time with family; finishing schoolwork allows more time with friends, etc.). Helper works with client to schedule practicing specific activities in line with goals that help the client feel better including breaking the activity into steps and thinking of times and places for practice to ensure success. Helper reviews with the client any potential challenges or barriers and, when applicable, encourages the client to use the monitoring chart to keep track of moods related to the activities.

SINGLE COMPETENCY ROLE-PLAY

Trainer prompts Helper: “You have worked with a client and reviewed his/her at-home practice using the Mood & Activity Monitoring Chart. Your role now is to develop an activity schedule consistent with the client’s treatment goal (e.g., returning home from work early to spend more time with family). You may use the monitoring chart from home practice to find activities to schedule.”

Trainer or another trained actor should act as the client for this role-play.

Role-play features Helper addressing the monitoring chart from home practice and explains finding activities to schedule.

Role-play should “stop” once competency has been rated OR allotted time has been reached (e.g., 5-15 min)

Should *not* do

- Make activity schedule without client input
- Create vague or unobtainable activities for the short-term

Should do

- Work with client to create list of activities which are feasible and work towards client’s treatment goal
- Work with client to schedule specific activities to practice, including times and places to practice
- Break activity into steps to support success
- Review barriers and challenges to practicing activities

6. REVIEW OF BETWEEN SESSION PRACTICE ACTIVITY/BEHAVIOUR SCHEDULING

In follow-up session of Competency #5, Activity/Behaviour Scheduling, to what extent did the Helper review practice activity with the client. Helper reviews the activity assigned in previous session and discusses with client on how it went. Helper praises client for successes, normalises and discusses barriers/ challenges and work with client on ways to overcome barriers. Helper is encouraging.

SINGLE COMPETENCY ROLE-PLAY

Trainer prompts Helper: “Last week, you assigned the client a practice activity including steps for success and times and places for practice: the client was asked to go for a walk for 25 minutes in the afternoon on Tuesday, Thursday and Saturday and rate mood/feelings before and after the walks. Your role now is to review the assignment and discuss how things went. You may begin by reminding the client of the assigned home practice.”

Trainer or another trained actor should act as the client for this role-play.

Role-play features Helper reminding “client” of assigned home practice from last week to review.

Role-play should “stop” once competency has been rated OR allotted time has been reached (e.g., 5-15 min)

Should *not* do

- Blame client for not trying/completing activities
- Accuses client of lying (e.g., didn’t practice activities)

Should do

- Review the activity assigned in previous session and discuss with client how things went
- Praise client for successes, discuss barriers and reassure client that challenges are typical
- Work with client to find way around any discussed barriers and challenges
- Encourage client to continue practicing

Acknowledgement. These competencies were informed by research described in: Pedersen, G. A., Lakshmin, P., Schafer, A., Watts, S., Carswell, K., Willhoite, A., Ottman, K., van 't Hof, E., & Kohrt, B. A. (2020). Common factors in psychological treatments delivered by non-specialists in low- and middle-income countries: Manual review of competencies. *Journal of behavioral and cognitive therapy*, 30(3), 165–186. <https://doi.org/10.1016/j.jbct.2020.06.001>

The following documents supported development of competency descriptions:

- Anand A, Chowdhary N, Dimijian S, Patel V: Healthy Activity Program. Sangath, London School of Hygiene & Tropical Medicine, 2013. <http://www.sangath.in/premium-manual/>
- Dawson KS, Watts S, Carswell K, et al. Improving access to evidence-based interventions for young adolescents: early adolescent skills for emotions (EASE). *World Psychiatry*. 2019
- Murray L, Dorsey S, Skavenski S, Metz K: Common Elements Treatment Approach (CETA) Counselor Manual (Adult): Lebanon. 2017. <https://www.jhsph.edu/research/centers-andinstitutes/global-mental-health/our-projects/by-intervention/>
- World Health Organization: Problem Management Plus (PM+): Individual psychological help for adults impaired by distress in communities exposed to adversity. Generic field-trial version 1.0. Geneva, 2016. <https://www.who.int/publications/i/item/WHO-MSD-MER-16.2>

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