



# FACT SHEET

## INTERACTIVE COMMUNICATION TECHNOLOGIES

### Overview

Interactive communication technologies (ICTs) are being used more frequently to deliver various health care services, including substance abuse treatment and recovery support. ICTs include tele-counseling, text messaging, recovery-oriented social networking sites, pod/vodcasting, and mobile application software (apps). New media and technology are here to stay and the California Department of Alcohol and Drug Programs (ADP) is finding innovative ways it can be useful and complimentary to services. For example, substance abuse treatment and recovery support providers participating in ADP's California Access to Recovery Effort (CARE) program are utilizing media for two new services provided to youth and young adult clients. These two media solutions, Life:WIRE® and Telephone Monitoring and Adaptive Counseling, are described below.

### Life:WIRE®

Life:WIRE® is an interactive technology that uses text messaging to engage, track and motivate clients. CARE treatment and recovery support providers use Life:WIRE® to remind clients of appointment times, ask questions to evaluate progress or status, and reinforce positive behaviors. Using a computer, counselors or case managers log on to a secure, HIPAA-compliant website to set up the time, frequency and nature of messages for individual or multiple clients in their caseload. Customized questions prompt a single digit reply from the client

from their cell phone, which activates an automated response and/or notifies the counselor if the client's reply is outside a prescribed range. Life:WIRE® generates real-time data so providers can continuously monitor client progress and analyze client responses. This technology is cost-effective and can be easily adapted to meet organizational needs. More importantly, it empowers clients and helps them manage their own recovery, using a technology that appeals to young people and is a major part of their daily lives. The young people in the CARE program appreciate the positive messages and helpful reminders, and providers like how it is an easy way for them to stay in touch with their clients.

To learn more about Life:WIRE®, visit [www.lifewire.ca](http://www.lifewire.ca).

### Telephone Monitoring and Adaptive Counseling (TMAC)

TMAC is a comprehensive continuing care protocol that utilizes the telephone. TMAC is used by substance abuse treatment providers in the CARE program to help transition clients from face-to-face services at the program location to recovery in the community.

TMAC has these advantages:

- Overcomes barriers such as geographic distance, lack of transportation, and school, childcare or work schedules and responsibilities that prohibit face-to-face services;

- Offers a cost-effective mechanism for maintaining client engagement and providing ongoing support in real-world settings;
- Provides a flexible and adaptive approach based on individual needs;
- Promotes a collaborative and consultative relationship between the counselor and client, emphasizing client choice and individual responsibility for his/her recovery.

During a face-to-face orientation, the recovering individual and the counselor develop a framework for tracking ongoing progress toward recovery. Then, during regularly scheduled telephone calls (15-20 minutes), the client and counselor jointly evaluate current risk and protective factors and modify strategies and goals as needed. Clients can be transitioned to bi-weekly and monthly calls on a set or flexible schedule, and the frequency of calls can be adjusted to respond to heightened or reduced risk and protective factors, relapse, or a shift in client needs or priorities.

TMAC was developed by Dr. James McKay of the University of Pennsylvania, and is supported by a clinician manual and client handbook. For more information on TMAC, visit the Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Program and Practices at [www.nrepp.samhsa.gov/ViewIntervention.aspx?id=173](http://www.nrepp.samhsa.gov/ViewIntervention.aspx?id=173)