LITTLE SEED COUNSELING

Adapting Your Modality

A quick reference: same goal, different route

MI

Instead of: “You say you want to stop drinking, but you keep drinking. How ready are you to change?”

Try: “You want to drink less. What tends to happen between making that decision and the moment you actually drink?”

Keep in mind: Explore executive functioning, regulation and environmental barriers rather than assuming ambivalence.

CBT

Instead of: “Is there evidence that everyone at the meeting is judging you?”

Try: “Some people may judge you. What happens when you notice that possibility and what would help you feel safer participating anyway?”

Keep in mind: Don't automatically label realistic experiences of stigma or social difficulty as distorted.

DBT

Instead of: Give a client several distress-tolerance skills to practice independently when they have an urge to use.

Try: Pick one skill, practice it together and identify exactly when and how they'll use it. “When you notice your urge hit a 6, what's the first thing you'll do?”

Keep in mind: Fewer skills, practiced in session, tied to a specific moment.

ACT

Instead of: “What do you value about sobriety?”

Try: “If we took away what your family, treatment program or recovery community thinks you should want, what would you want your relationship with substances to look like?”

Keep in mind: Separate personal values from social expectations.

Somatic

Instead of: “Close your eyes, sit still and notice what's happening inside your body.”

Try: “You can keep your eyes open, move around or focus on something outside your body. Which feels most accessible?”

Keep in mind: Don't assume stillness or interoceptive attention is regulating. Notice if it is increasing distress.

Accessibility changes how treatment is delivered. It does not require abandoning the treatment goal.

© Little Seed Counseling, PLLC 2026