

LEAP[®]



Create relationships with people who have serious mental illness that lead to **treatment & recovery**

What's LEAP?

LEAP (Listen–Empathize–Agree–Partner)[®] is an evidence-based communication approach developed by Dr. Xavier Amador, clinical psychologist and forensic expert, that helps participants create therapeutic alliances and trusting relationships with people who have Serious Mental Illness and **Anosognosia** — a neurocognitive symptom that leaves a person unable to understand they are ill, resulting in conflict, isolation and treatment refusal.

Program Overview

Participants will be introduced to (A) critical anosognosia research, and (B) The 7 LEAP Tools, designed to address the obstacles created by anosognosia, and to **develop mutual respect and trust, with the goal of creating collaborative partnerships** that lead to engagement of treatment and services — including medication, psychotherapy, psychosocial programs, peer-support, supervised housing, and to cooperate with people who are trying to help.

Participants Learn To

- Identify Anosognosia vs. “Denial”
- Lower Anger, Resistance & Defensiveness
- Re-establish Broken Relationships
- Quickly Gain Trust & Compliance
- Avoid Relapse & Involuntary Hospitalization

Who should learn LEAP?

- Mental Health Professionals
- Criminal Justice Professionals
- Family Members
- Peer Support Specialists
- *Others involved in the care & safety of people suffering from mental disorders*



HENRY AMADOR
Center on Anosognosia

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“I AM NOT SICK, I Don’t Need Help!”

What is ANOSOGNOSIA?

A **neurocognitive symptom** of serious mental illness (SMI) that prevents a person from recognizing that they’re ill — resulting in isolation, treatment refusal and conflict.

It’s not denial, it’s a brain disorder — **and the #1 reason that people refuse help.**

** See the Diagnostic and Statistical Manual of Mental Disorders – DSM-4-TR pg.304 and DSM-5-TR pg.116*

What is L-E-A-P[®]?

An evidence-based approach designed by Dr.Xavier Amador, to **create trusting and collaborative relationships with people who have SMI and anosognosia, that leads to treatment and recovery.**

Counter-Intuitive – Person Centered – Requires Practice – Independent Tools

The 7 LEAP[®] Communication Tools



TOOL	SKILLSET
(L) LISTEN	<ul style="list-style-type: none">Listen reflectively to delusions, anosognosia, and desires without any judgement and instead communicate genuine respect.
(E) EMPATHIZE	<ul style="list-style-type: none">Strategically express empathy without reality-testing and actively normalize the person’s experience.
(A) AGREE	<ul style="list-style-type: none">Identify areas of agreement; or agree to disagree.
(P) PARTNER	<ul style="list-style-type: none">Quickly form partnerships and move forward to achieve common goals (ultimately linked to acceptance of treatment and services).
Delay	<ul style="list-style-type: none">Respectfully delay giving contrary opinions and redirect conversation.
Opinion — 3 As	<p>Apologize, Acknowledge Fallibility, Agree</p> <ul style="list-style-type: none">Give recommendations and non-judgmental opinions in a manner that communicates respect and results in trust.
Apologize	<ul style="list-style-type: none">Apologize for words and actions that harmed the relationship.



How to “use” LEAP[®] to create trust & collaboration?

GENERAL GUIDELINES

1. Absorb What You Heard
2. Connect Emotionally
3. Problem Solve



(L) Listen Reflectively

- *“What you’re saying is (reflect what they said)... Did I understand you?”*



(E) Empathize & Normalize

- *“I would be (reflect emotion – e.g. scared) too, anyone would be.”*



(A) Agree & Agree to Disagree

- *“Let’s focus on what we can both agree on, if it’s OK with you.”*

(P) Partner on Common Goal

E.g., Staying out of the hospital, not getting arrested / arguing, finding a job, having a relationship.

- *“I’ll help you with (common goal), to do that, can we partner on...”*



Delay Your Opinion & Redirect

- *“I’ll answer your question. First, I’d like to hear more about why (you hate the medicine). Would that be OK?”*



Give Your Opinion & Apologize

- *“I want to apologize because my views may feel hurtful / frustrating.”*

GET TRAINED

Individuals & Organizations • In-Person & Virtual



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