




Motivational Interviewing

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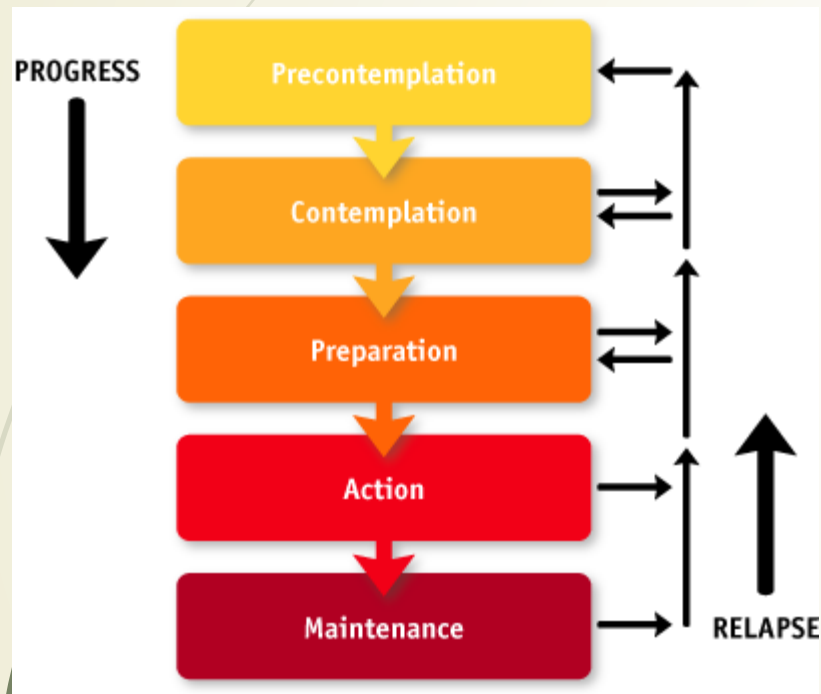
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What is motivational interviewing?

- Motivational interviewing (MI) is a directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence.
 - Designed to enhance the patient's own motivation to change using strategies that are empathic and non-confrontational.
 - A counseling approach in part developed by clinical psychologists Professor William R Miller, Ph.D. and Professor Stephen Rollnick, Ph.D. The concept evolved from experience in the treatment of problem drinkers, and was first described by Miller (1983) in an article published in Behavioural Psychotherapy.
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Stages of Change Model



Stages of Change Model

Precontemplation: No current intention of changing. "Ignorance is bliss"

Contemplation: Recognize a problem. "Know a change needs to be made, but not taking any immediate action."

Preparation: Close to taking action. "Experienced with change. Trying to change." Planning to act within 1 month.


Action: Making plans for behavior change. "Exercising regularly. No longer smoking." New behavior practiced for 3-6 months.

Maintenance: Plan is in place, but it requires vigilance for success. There is a potential for relapses. "Falls off the wagon" or "fails" but starts again.

Termination: New behavior is now firmly in place and part of daily life. Change is complete.




Behavioral Problems Addressed by MI

- ▶ Lifestyle
 - ▶ Chemical dependency
 - ▶ Non-adherence to treatment
 - ▶ Failure to acknowledge a problem exists or the need for change
 - ▶ Various risky or unsafe behaviors
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- ▶ Research demonstrates its effective both in reducing maladaptive behaviors (e.g., problem drinking, gambling, HIV risk behaviors) and in promoting adaptive health behavior change (e.g., exercise, diet, medication adherence).
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What are the mechanisms for change in MI?

- ▶ AMBIVALENCE is the key issue to be resolved for change to occur.
 - ▶ People change when they hear their own discussion of their ambivalence.
 - ▶ Getting patients to engage in “change talk” is critical element of the MI process.
 - ▶ Proficient use of the techniques of MI will increase clients’ in-session change talk and decrease sustain talk, which in turn will predict behavior change.
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How is it different than other styles of nutritional counseling?

- ▶ Collaborative approach vs expert role: encouragement of client's ability to make their own choices
 - ▶ An MI clinician does not argue that the person has a problem and needs to change
 - ▶ Not confrontational: ideas for change come from client not counselor
 - ▶ Resistance is met with reflection, not correction
 - ▶ Can still provide feedback and information
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Commonly-used techniques in Motivational Interviewing

ASKING PERMISSION

- ▶ *Rationale: Communicates respect for clients. Also, clients are more likely to discuss changing when asked, than when being lectured or being told to change.*
- ▶ Examples of Asking Permission
 - ▶ “Do you mind if we talk about [insert behavior]?”
 - ▶ “Can we talk a bit about your [insert behavior]?”



Commonly-used techniques in Motivational Interviewing

ELICITING/EVOKING CHANGE TALK

- ▶ Questions to Elicit/Evoke Change Talk
 - ▶ “What would you like to see different about your current situation?”
 - ▶ “What makes you think you need to change?”
 - ▶ “What will happen if you don’t change?”
 - ▶ “What would be the good things about changing your [insert risky/problem behavior]?”
 - ▶ “What would your life be like 3 years from now if you changed your [insert risky/problem behavior]?”
 - ▶ “Why do you think others are concerned about your [insert risky/problem behavior]?”



Commonly-used techniques in Motivational Interviewing

OPENED-ENDED QUESTIONS

- ▶ Examples of Open-Ended Questions
 - ▶ “Tell me what you like about your [insert risky/problem behavior].”
 - ▶ “What’s happened since we last met?”
 - ▶ “What makes you think it might be time for a change?”
 - ▶ “What brought you here today?”
 - ▶ “What happens when you behave that way?”
 - ▶ “How were you able to not use [insert substance] for [insert time frame]?”
 - ▶ “Tell me more about when this first began.”
 - ▶ “What’s different for you this time?”
 - ▶ “What was that like for you?”
 - ▶ “What’s different about quitting this time?”

Adapted from Sobell & Sobell, 2008



Commonly-used techniques in Motivational Interviewing

REFLECTIVE LISTENING

- ▶ *Rationale: Reflective listening is the primary way of responding to clients and of building empathy.*
- ▶ Examples of Reflective Listening (generic)
 - ▶ “It sounds like....”
 - ▶ “What I hear you saying...”
 - ▶ “So on the one hand it sounds like And, yet on the other hand....”
 - ▶ “It seems as if....”
 - ▶ “I get the sense that....”
 - ▶ “It feels as though....”

Adapted from Sobell & Sobell, 2008



Commonly-used techniques in Motivational Interviewing

AFFIRMATIONS

- ▶ *Affirmative responses or supportive statements by therapists verify and acknowledge clients' behavior changes and attempts to change. When providing an affirmation, therapists should avoid statements that sound overly ingratiating (e.g., "Wow, that's incredible!" or "That's great, I knew you could do it!").*
- ▶ Example of Affirmative Statements
 - ▶ "Your commitment really shows by [insert a reflection about what the client is doing]."
 - ▶ "You showed a lot of [insert what best describes the client's behavior—strength, courage, determination] by doing that."
 - ▶ "It's clear that you're really trying to change your [insert risky/problem behavior]."
 - ▶ "By the way you handled that situation, you showed a lot of [insert what best describes the client's' behavior—strength, courage, determination]."

Commonly-used techniques in Motivational Interviewing

READINESS TO CHANGE RULER

- ▶ *Rationale: Assessing readiness to change is a critical aspect of MI. Motivation, which is considered a state not a trait, is not static and thus can change rapidly from day to day.*
- ▶ Examples of How to Use a Readiness to Change Ruler

Therapist (T): “On the following scale from 1 to 10, where 1 is definitely not ready to change and 10 is definitely ready to change, what number best reflects how ready you are at the present time to change your [insert risky/problem behavior]?”

Client (C): “Seven.”

T: “And where were you 6 months ago?”

C: “Two.”

T: “So it sounds like you went from not being ready to change your [insert risky/problem behavior] to thinking about changing. How did you go from a ‘2’ 6 months ago to a ‘7’ now?”

- “How do you feel about making those changes?”
- “What would it take to move a bit higher on the scale?”



Commonly-used techniques in Motivational Interviewing

ADVICE/FEEDBACK

- ▶ *Rationale: When relevant, new information should be presented in a neutral, nonjudgmental, and sensitive manner that empowers clients to make more informed decisions about quitting or changing a risky/problem behavior.*
- ▶ Examples of How to Provide Advice/Feedback (often this can start by asking permission to talk about the client's behavior)
 - ▶ “Do you mind if we spending a few minutes talking about....? [Followed by] “What do you know about....?” [Followed still by] “Are you interested in learning more about.....?”
 - ▶ “What do you know about how your drinking affects your [insert health problem]?”
 - ▶ “What do you know about the laws and what will happen if you get a second drunk driving arrest?”
 - ▶ “So you said you are concerned about gaining weight if you stop smoking. How much do you think the average person gains in the first year after quitting?”



Commonly-used techniques in Motivational Interviewing

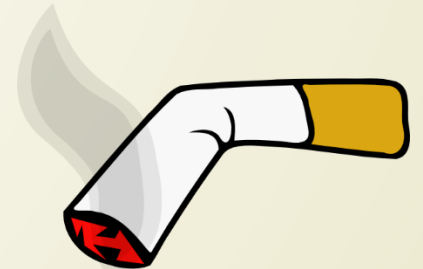
SUMMARIES

- ▶ *Rationale: Summaries are used judiciously to relate or link what clients have already expressed, especially in terms of reflecting ambivalence. Summaries are also a good way to either end a session (i.e., offer a summary of the entire session), or to transition a talkative client to the next topic.*
- ▶ Examples of Summaries:
 - ▶ “It sounds like you are concerned about your cocaine use because it is costing you a lot of money and there is a chance you could end up in jail. You also said quitting will probably mean not associating with your friends any more. That doesn’t sound like an easy choice.”
 - ▶ “Over the past three months you have been talking about losing weight, and it seems that just recently you have started to recognize that your weight is impacting your daily life more and more. That, coupled with your recent diagnosis of pre-diabetes makes it easy to understand why you are now committed to losing some weight”

Vignette 1: Deborah



- Deborah is a 37 year old Latina female. She's 5'4" and 187lbs and a smoker. She is seeking your services because she wants to lose weight for her wedding in 6 months. She tells you that she's been trying to lose weight for at least 10 years through various diets and cleanses but nothing seems to "stick" and she ends up gaining the weight back, and more. She says that she is unable to exercise or quit smoking because of her very busy and stressful job as a film executive so wants to lose weight through diet alone. However, she also notes that she often eats sweets at night as a reward for a long day.



Vignette 2: Tom



- ▶ Tom is a 45 year old White male. He's 5'10" and 220lbs and a non-smoker. He walks about 2 miles daily as a mail carrier but doesn't do any other exercise. Tom came in reluctantly upon referral from his doctor who recently diagnosed him with pre-diabetes and high cholesterol. He says his "wife made him come" and that he doesn't think he has a problem as he eats "fine" and walks 5x/week for work. He notes that he's "always been a burger and fries guy" and drinks 3-4 beers nightly. Tom admits that his dad died of a heart attack at 57 but thinks this is unrelated to his current situation since dad smoked.





Let's Discuss!

- ▶ What was easy? Difficult?
 - ▶ What strategies did you use?
 - ▶ Asking Permission
 - ▶ Eliciting/Evoking Change Talk
 - ▶ Open-ended Questions
 - ▶ Reflective Listening
 - ▶ Affirmations
 - ▶ Ready to change Ruler
 - ▶ Advice/Feedback
 - ▶ Summaries
 - ▶ Any questions about motivational interviewing?
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