

Motivational Interviewing

"The behavior of human beings is influenced not only by the past and current environment, but also by our images of the future." –AI

Lisa Stockwell, M.Ed.



The biggest communication problem is we do not listen to understand.
We listen to reply.

There are three levels of listening:

Half Listening



Sound Listening

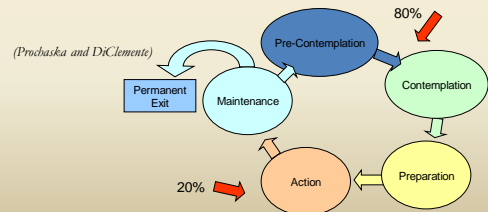


Active Listening!



STAGES OF CHANGE

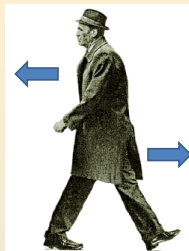
- No intention:** Do I need to think/talk about this?
- Ambivalence:** Which way do I go with this?
- Possibility:** Why and how might I change?
- Commitment:** How and when will I change?
- Action:** Do I keep change going and how?



Ambivalence is Normal

"People often get stuck, not because they fail to appreciate the down side of their situation, but because they feel at least *two* ways about it."

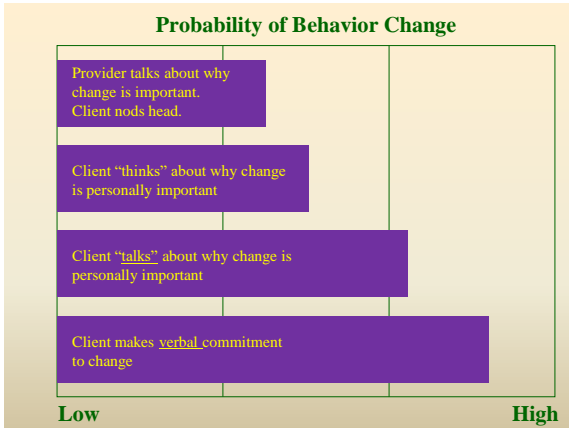
Miller & Rollnick



The nature of the conversation is critical

What we say - and how we say it—largely determines what the client says and what happens next...

What we say matters!



MOTIVATIONAL INTERVIEWING

A collaborative, person-centered communication style to strengthen a person's own motivation for change.

By paying attention to the **language of change**, MI is designed to strengthen personal motivation for commitment to a specific goal by eliciting and exploring a person's own reasons for change within an atmosphere of acceptance and compassion. (Miller & Rollnick, 2013)

- ### Benefits of Learning about Motivational Interviewing
- Evidence-based practice
 - Reduces resistance
 - Kindness with skill
 - Effective across populations and cultures
 - Applicable to range of professional disciplines
 - Effective in briefer encounters
 - Actively involves people in own care (elicits change-talk)
 - Improves adherence and retention in care
 - Promotes healthy "helping" role for providers (less frustration and burnout)
 - Instills hope and fosters lasting change

- ### Five things MI is not
- William R. Miller
- Not...**
- 1) A way of tricking people into doing what you want them to do
 - 2) A technique
 - 3) Easy to learn
 - 4) Practice as usual
 - 5) The solution to all client issues and worker headaches

MI: Spirit

Δ Compassion Δ Collaboration Δ Evocation Δ Autonomy

Honoring the client's absolute worth and potential; recognize client's autonomy to choose his or her own way; use accurate empathy to understand the client's perspective; affirm clients strengths and efforts!

"...not a series of techniques ... but a way of being with clients"

A Helper Who Uses a Confrontational Approach Often...

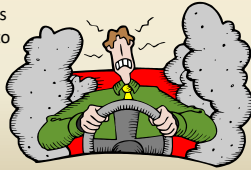
- argues for change
- offers direct advice without being asked
- generates solutions ahead of the client
- takes an authoritative/expert stance
- does most of the talking
- imposes a diagnostic label
- behaves in a punitive or coercive manner

And can create *Discord*

The "Righting Reflex" is the worker's signal to set things right for this person

Resisting the Righting Reflex

- Humans have a built-in desire to set things right.
- People in helping professions are probably more inclined to have a righting reflex.
- It's important to inhibit the righting reflex.
- Analogy: snow driving



PARADOX OF CHANGE

"When people feel accepted for who they are and what they do (regardless of how unhealthy) it allows them the freedom to consider change, rather than needing to defend against it"
(Miller and Rollnick, 2010)

Communication Styles

Directing ↔ Guiding ↔ Following



MI is a refined form of guiding, which finds a middle road between directing and following.

Motivational Interviewing Communication Style: *That of a Guide!*

Listen – Collaborate - Elicit - Encourage - Motivate - Draw out

Elicit...Provide...Elicit



Guiding Style: Elicit – Provide – Elicit

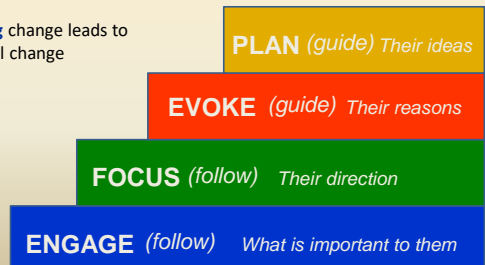
Listen – Collaborate - Elicit - Encourage - Motivate - Draw out



Elicit	Provide	Elicit
-What would you like to work on? -What's going well or not so well? -What makes this important to you? -What ideas they have?	-Ask permission to Share options or ideas -Reflect your understanding of their ideas, thoughts, reasons, needs, desires	-Clarification if needed -Interpretation -Their thoughts, feelings, concerns -What's next? -What else?

Four Fundamental Processes

- Engaging** our clients helps focus on *what is important to them*
- Focusing** on what is important to them may evoke a discussion about *their own reasons for change*
- Evoking** their own reasons for change *may lead to them planning change*
- Planning** change leads to potential change



MI Skills/Strategies

OARS

- **O:** open-ended questions
- **A:** affirmations
- **R:** reflections, simple and complex
- **S:** summarize

**Open-ended Questions**

- Can't be answered "yes" or "no"
- Seek to UNDERSTAND and GUIDE the conversation
- Ask MORE open questions than closed ones
- Keep questions CLEAR and BRIEF
- AVOID NEGATING open questions with closed ones – e.g. How is it going? Do you smoke?
- ♥ “How can I help you?”
- ♥ “Would you tell me about ___?”
- ♥ “How would you like things to be different?”
- ♥ “What would you like to do next?”
- ♥ “What are the good things about...?”

OARS: Affirmations

- Recognize individual's strengths, personal qualities, core values
- Build confidence in ability to change
- Must be congruent and genuine
- Different from praise

-You are really working hard at...

-It's important for you to...

-I appreciate your ideas on this

ACTIVE REFLECTIVE LISTENING

A way of...

- Showing acceptance, understanding
- Checking, rather than assuming, what someone means
- Guiding, deepening the conversation
- ❖ Serves as a partner to open-ended questions
- ❖ Reinforces and encourages patient's verbalization and internal reflection
- ❖ **Empathic Reflection It's the curious and sensitive exploration of What does the person's message mean to the them?**

Reflective Listening

Simple/Content reflections are short summaries

“What did she say”

Complex/Meaning reflections add the next sentence to the story

“What did she mean”

CONSULTATION example of reflections

- **You:** Would you mind if we talked about your smoking?
- **Patient:** Well, OK.
- **You:** How do you really feel about it?
- **Patient:** I'm trying to cut back, but I cant say its easy with my job, you know its very stressful.
- **You:** **Its not easy for you yet you'd like to smoke less.**
- **Patient:** Oh if I could, definitely, I know its not good for my chest for a start.
- **You:** **You can feel the effect for yourself and its not pleasant.**
- **Patient:** That right, but its such a stress reliever its hard to let go.
- **You:** **Its difficult for you to imagine being without smoking.**
- **Patient:** yes, that's exactly right, you got me.

Summarizing collection of utterances

Special form of reflective listening

- Allows individual to hear him/herself a second time
- Use at transitions in conversation
- Ensures clear communication and your understanding of the person's story

Listener Elicit—Listen and provide reflections on your understanding

-What makes this change important?

-What are the best reasons to do it if you wanted to?

-How would you go about it in order to succeed?

-How confident are you, on a scale of 0 – 10, 0 not confident and 10 very confident that you could make this change when the time was right?

What made you pick that number and not one or two lower?

What would have to happen for that number you pick to increase by one more?

-What would be the first step, if anyway, that you would be willing to make?



BE A GOOD GUIDE

- Focus on client goals & priorities
- Follow the client's pace
- Communicate high levels of empathy

Use MI to increase motivation and help move towards outcomes

Thank you!

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WWW.motivationalinterview.org