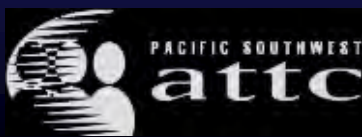


Motivational Interviewing: *Helping People Change*

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What is Motivational Interviewing?

A style of talking with people constructively about reducing their health risks and changing their behavior.

What is Motivational Interviewing?

It is designed to:

Enhance the client's own motivation to change using strategies that are empathic and non-confrontational.

Traditional Approach

- Change is motivated by discomfort
- If you can make people feel bad enough, they will change.
- People have to “hit bottom” to be ready for change
- People don’t change if they haven’t suffered enough
- Someone who continues to use is “in denial.”
- The best way to “break through” the denial is direct confrontation.

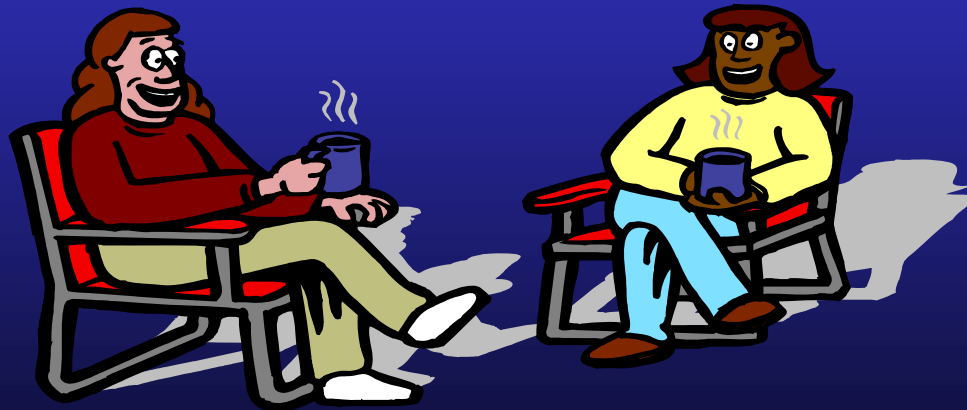
What is Motivational Interviewing?

It can be defined as:

A client-centered directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence.

How does MI differ from traditional or typical traditional counseling?

1. Client and practitioner are equal partners in relationship (collaborative effort between two experts)



How does MI differ from traditional counseling?

- **People are almost always ambivalent about change – ambivalence is normal**
- **Lack of motivation can be viewed as unresolved ambivalence.**



How does MI differ from traditional counseling?

- AMBIVALENCE is the key issue to be resolved for change to occur.
- People are more likely to change when they hear their own discussion of their ambivalence.
- This discussion is called “*change talk*” in MI.
- Getting clients to engage in “change talk” is a critical element of the MI process.

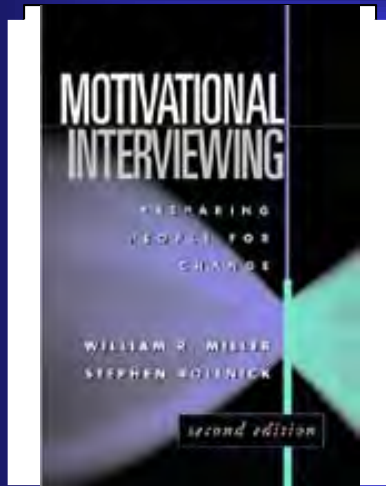


*Glovsky and Rose, 2008

How do we decide if a person is “Motivated”



- The person agrees with us
- Is willing to comply with our recommendations and treatment prescriptions
- States desire for help
- Shows distress, acknowledges helplessness
- Has a successful outcome



Motivational Interviewing, 2nd Edition. Miller and Rollnick

- This second edition of the book, Motivational Interviewing, deals with changing health-related behaviors in general.
- Another useful resource is TIP 35, (Enhancing Motivation for Change in Substance Abuse Treatment) published by the Center for Substance Abuse Treatment (CSAT) and available online at <http://text.nlm.nih.gov>

Four Principles of Motivational Interviewing (What you are actually doing)



1. Expressing empathy
2. Developing discrepancy
3. Avoiding argumentation
4. Supporting self-efficacy

1. Express Empathy

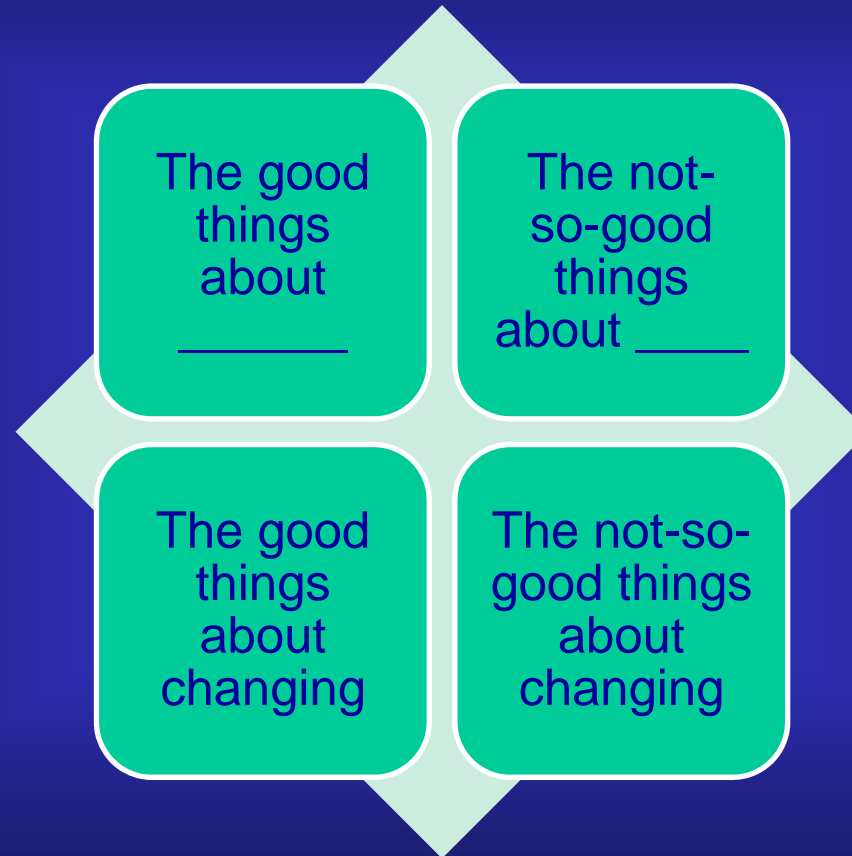
- Acceptance facilitates change
- Skillful reflective listening is fundamental
- Ambivalence is normal



2. Develop Discrepancy

- Discrepancy between present behaviors and important goals or values motivates change
- Awareness of consequences is important
- Goal is to have the PERSON present reasons for change

Decisional Balance



3. Avoid Argumentation

- Resistance is signal to change strategies
- Labeling is unnecessary
- Shift perceptions
- Peoples' attitudes shaped by **their** words,
not yours



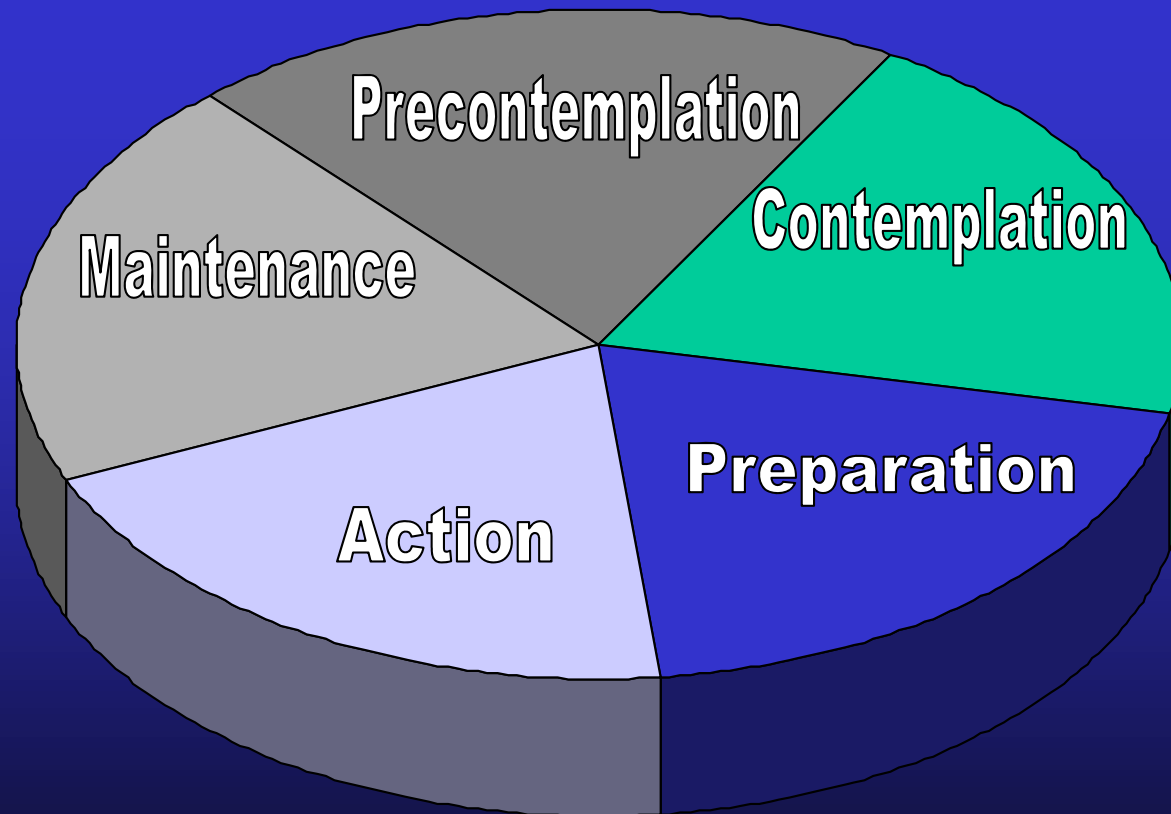
4. Support Self-Efficacy

- Belief that change is possible is important motivator
- Person is responsible for choosing and carrying out actions to change
- There is hope in the range of alternative approaches available



Stages of Change

Prochaska & DiClemente



Precontemplation Stage

- Definition

Not yet considering change or is unwilling or unable to change

- Primary task

Raising Awareness

Some Ways to Raise Awareness in the Precontemplation Stage

- Offer **factual** information
- Explore the **meaning of events** that brought the person in and the **results of previous efforts**
- Explore **pros and cons** of targeted behaviors

Contemplation Stage

- In this stage the client sees the possibility of change but is **ambivalent and uncertain** about beginning the process
- Primary task
Resolving ambivalence and helping the client choose to make the change

Possible Ways to Help the Patient in the Contemplation Stage

- Talk about the person's **sense of self-efficacy** and **expectations** regarding what the change will entail
- **Summarize** self-motivational statements
- Continue exploration of pros and cons

Preparation Stage

- In this stage the client is **committed to changing** but is still considering exactly what to do and how to do
- Primary task
Help client identify appropriate change strategies

Possible Ways to Help the Patient in the Preparation Stage

- Offer a **menu of options** for change or treatment
- Help client identify **pros and cons** of various treatment or change options
- Identify and **lower barriers** to change
- Help person **enlist social support**
- Encourage person to **publicly announce plans** to change

Action Stage

- In this stage the client is **taking steps toward change** but hasn't stabilized in the process
- Primary task
Help implement the change strategies and learn to limit or eliminate potential relapses

Possible Ways to Help the Client in the Action Stage

- Support a **realistic view** of change through **small steps**
- Help person **identify high-risk situations** and develop appropriate **coping strategies**
- Assist person in **finding new reinforcers** of positive change
- Help access family and social **support**

How Can I Help Client's Move through This Change Process?

- Use the **microskills**
 - Open-ended questions
 - Affirmations
 - Reflections
 - Summariesto elicit and reinforce **self-motivational statements** (Change Talk)

Building Motivation using OARS (the microskills)

- Open-ended questioning
- Affirming
- Reflective listening
- Summarizing





Open-ended Questions

- An open-ended question is one with more than a yes or no response
- Helps person elaborate own view of the problem and brainstorm possible solutions

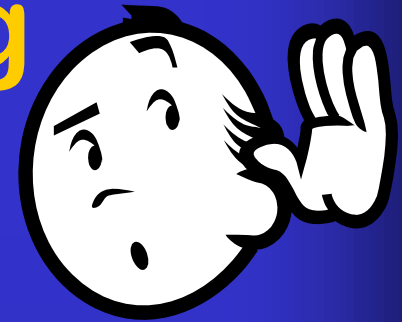


Affirmations

- Focused on achievements of individual
- Intended to:
 - Support person's persistence
 - Encourage continued efforts
 - Assist person in seeing positives
 - Support individual's proven strengths

Reflective Listening

Key-concepts



- Listen to both what the person says and to what the person means
- Check out assumptions
- Create an environment of empathy (nonjudgmental)
- You do not have to agree
- Be aware of intonation (statement, not question)

Levels of Reflection

- Level 1: Repeat
- These reflections add nothing at all to what the client had said, but simply repeat or restate using some of all of the same words.

Levels of Reflection (cont)

- Level 2: Rephrase
- This reflection stays close to what the client had said, but slightly rephrases it, usually by substituting a synonym. It is the same thing said by the client, but in a slightly different way.

Levels of Reflection - (cont)

- Level 3: Paraphrase
- These reflections change or add to what the client has said in a significant way, to infer the client's meaning. The therapist is saying something that the client has not yet stated directly.

Level 3: Paraphrase -(cont)

- **Continuing the Paragraph** – the therapist anticipates the next statement that has not yet been expressed by the client.
- **Amplified Reflection** – the content offered by the client is exaggerated, increased in intensity, overstated, or otherwise reflected in a manner that amplifies it.

Level 3: Paraphrase - (cont)

- **Double-Sided Reflection** – both sides of ambivalence are contained in a single reflective response.
- **Metaphor and Simile** – can be used as a reflection.
- **Reflection of Feelings** – reflecting a feeling that was not specifically verbalized by the client.

SUMMARIZING



- Summaries capture both sides of the ambivalence

(You say that _____ but you also mentioned that _____.)

- Summaries also prompt clarification and further elaboration from the person.

Four Foundational Processes

ENGAGE the client

FOCUS on specific change
to be made

EVOKE change talk
(DARN C)

PLAN steps for
change

Focusing

- Developing a clear direction and goal(s)
- Sometimes the goal is clear; often it is not.



Evoke

- Pulling for Change Talk
- Happens after engaging the client and making the determination re: what exact change will be the focus.
- Continues to happen during the planning stage.

What is Change Talk?

DARN - C

A statement that indicates a person's

Desire to
change

Ability to
change

Reasons to
change

Need for
change

Commitment Language is stronger than Change Talk
Indicates an intention to change. (I will, I am going to, etc.)

Change Talk also looks like this

Problem
Recognition

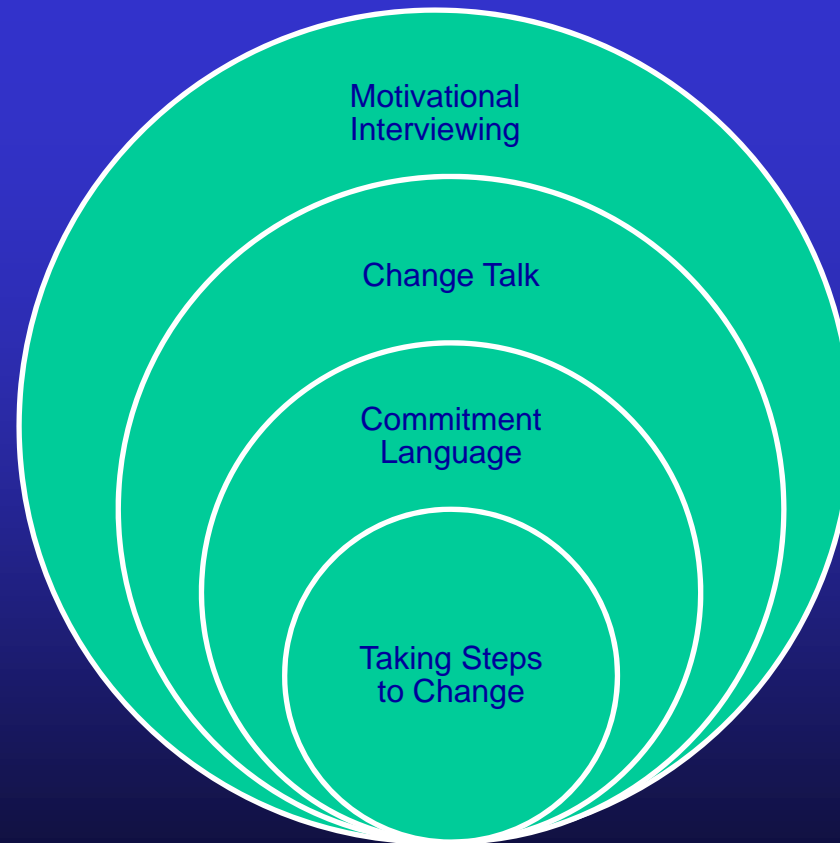
Concern
about the
Problem

Awareness
of the
Problem

Potential
Benefits of
Change

Costs of Not
Changing

The Objective





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www.matrixinstitute.org

www.uclaisap.org

<http://motivationalinterview.org>

Miller, W.R., & Rollnick, S. (2002). Motivational Interviewing: Preparing People for Change (2nd Ed). New York: Guilford Press.

