Motivational Interviewing

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1. Participants will explore the “righting reflex” and determine one situation in which the righting reflex was not effective.

2. Participants will be able to synthesize the spirit of Motivational Interviewing.
The Righting Reflex

- An attempt to verbally, and non-verbally, persuade an individual or group to change behaviors assessed as ineffective or damaging.
Exercise

- Please take a moment to identify a time that you attempted to “right” a client and think about the client’s reaction. From where did that motivation to right arise?
The Spirit of Motivational Interviewing

Part One
Exercise

- Please take a moment to think about a teacher or mentor that positively affected your life. What qualities did that teacher or mentor embody? How did they interact with you? How did that make you feel?
Collaborative-the development of a partnership.
Acceptance-the respect of absolute worth and autonomy. Conveying accurate empathy and affirming the client’s resiliency and positive attributes.
Evocative-Fishing for information rather than imparting it.
Compassion-promoting the welfare of others, without personal benefit.
Motivational Interviewing Spirit Challenges

- Collaborative-How do we do this in hierarchical relationships?

- Evocative-How do we balance the work-related expectations and stressors with the need to have meaningful, and sometimes time-intensive, conversations with clients?

- Acceptance-How do we respect autonomy in infantilizing systems? How do we remain strength based when provided referrals that negatively frame the client?

- Compassion-How do we remain compassionate in the face of systemic failure?
Four Processes of Motivational Interviewing

- Engaging (Shall we?)
- Focusing (Where do we go?)
- Evoking (Why?)
- Planning (How?)
Engaging

- **The key**-understanding the client as multi-faceted.

- **Challenges**:
  1. Assessment trap
  2. The expert trap
  3. Premature Focus/Labeling Trap

- Use of open-ended questions, affirmations, reflections
Focusing

- Agenda Setting—This can include goals or objectives, if the client is ready, but can also include discussions around hopes, fears, expectations, and concerns.
- Three sources of focus: client, setting, clinician.
- Asking permission key.
Evoking

- Eliciting the client’s motivation for change.
- Developing Discrepancy-The difference between the client’s current behavior(s), and experienced impairment, and the goals and values that they hold. MI Values Set helpful.
- Use of DARN questions.
Exercise

- Please review the Values Card Set. Choose two values that you either currently hold, or wish to hold, in your life. Jot down your personal definition of these two values and identify why you find these to be important.
DARN Questions
Taken from: Motivational Interviewing: Helping People Change, Rollnick and Miller, 2013

- **Desire:** How would you like for things to change? What do you hope our work together will accomplish? Tell me about what you don’t like about how things are right now?

- **Ability:** What do you think you might be able to change? If you did decide you really wanted to stop smoking, how would you do that? Of all the concerns you have noted, which seems the most possible to address first?

- **Reason:** Why do you want to start taking insulin? What are the drawbacks to how things are going now? What would be some good things about managing your sugar?

- **Need:** What needs to happen? What do you think has to change? How urgent is this for you?
Planning

- Signs: Increased rate of change talk, move to CAT, diminished sustain talk, questions about change, envisioning a different future (THAT IS BIG!).
- What you can do: Collect a bouquet of change talk, walk the client through the readiness rulers, use general, forward thinking questions...
  1. Where does this leave you?
  2. I am wondering what you might do....
How Does Your Client Feel About Change?

- Willing-Does your client feel motivation to change?
- Able (Perceived Ability)-Has this person attempted and failed to stop the behavior before? Are people in your client’s life questioning the client’s ability to change?
- Ready (Priorities)-Assessment of basic needs is important in engagement when this is the case.
Group Training Objectives-Day 2

1. Participants will apply a strength-based assessment to “problematic” behaviors.

2. Participants will identify 2 OARS skills to be used in the next 30 days.
Motivational Interviewing Tools

Part Two
Open Ended Questions

- 3:1 Reflection to question ratio
- The goal is to elicit/enhance change talk
Evoking/Enhancing Change Talk

- **Evoking:**
  - How would you like your life to be in the future?
  - How has it been better in the past?
  - What do you want in life?
  - What values are important to you?

- **Enhancing:**
  - What are some reasons for making this change?
  - How important is it for you to make this change?
  - How would you know if you were successful with this change?
  - Who could support you in this change?
  - Tell me about the steps in making this change?
  - Scale willing/able/ready
Affirmations

Highlighting behaviors and values that the client holds as important.
Reframing “Problematic” Behaviors

Please take a minute to find the strength or value in the following behavior:

1. A patient that often argues with his doctor or nurse about symptoms and treatment.

2. A patient that has “googled” herbal remedies for the treatment of diabetes, is using chosen herbs, and refuses allopathic medicine support.

3. A patient, who recently completed Hepatitis C treatment, needs labs to indicate whether treatment was effective, but refuses to provide samples because she is concerned the doctor or nurse will see her methamphetamine use.
Reflections
“I want to be healthy but getting to the doctor is really hard. The last time they didn’t have anyone that spoke Spanish. I am tired of this”

Simple Restatements-"You want to be healthy"

Rephrasing-"Your health is important"

Paraphrasing-"You jump through a lot of hoops for your health"

Continuing the Paragraph-"And you need support"

Reflection of Feeling-"…and this is frustrating"

Metaphor-"You feel stuck between a rock and a hard place"

Ambivalence Statements-"On the one hand you feel overwhelmed, on the other, you feel a strong commitment to keeping your health"

Amplified-TBD
Reflections

Overt

Covert
Exercise

- “My wife asked me to come and talk to you about the fact that I am peeing 3-4 times each night”.
- “I hate coming here. Every time I visit the office I am given a new diagnosis and a different medication”.
- “I am now down to 16 ozs or less of beer per day. I got this”.
- “I am not sure how my work stress and blood pressure are related. My dad worked this hard and lived until 90”.
Summaries

- Serves to clarify the provider’s understanding of the client’s narrative.
- Links something just said with something previously said-highlighting a pattern.
- Draws together what has happened and transitions to a new task.

Example: “Your son has stopped eating, lost 40 pounds, isolates himself in his room, and has begun to smoke cigarettes. You say that you want him placed in a psychiatric hospital but have not called the police. Can we discuss what holds you back from calling the police?”

Note that summaries are less about data minutiae and more about themes.
Cocaine Blues-Johnny Cash

- Early one mornin’ while makin’ the rounds
  I took a shot of cocaine and shot my woman down
  I went right home and I went to bed
  I stuck that lovin’ forty-four beneath my head.

- Got up next mornin’ and I grabbed that gun
  Took a shot of cocaine and away I run
  Made a good run but I run too slow
  They overtook me down in Juarez Mexico.

- Laid in the hot joint takin’ the pill
  In walked a sheriff from Jericho Hill
  He said Willy Lee your name is not Jack Brown
  You’re the dirty hack that shot your woman down.

- I said yes sir my name is Willie Lee
  If you’ve got a warrant just read it to me
  Shot her down cause she made me slow
  I thought I was her daddy but she had five more.

- When I was arrested I was dressed in black
  They put me on a train and they took me back
  Had no...

- When I was arrested I was dressed in black
  They put me on a train and they took me back
  Had no friends for to go my bail
  They slapped my dried up carcass in the county jail.

- Early next morning about a half past nine
  I spied a sheriff comin’ down the line
  Coughed and coughed as he cleared his throat
  He said come on you dirty hack into that district court

- Into the court room my trial began
  Where I was handled by twelve honest men
  Just before the jury started out
  I saw that little judge commence to look about.

- In about five minutes in walked a man
  Holding the verdict in his right hand
  The verdict read in the first degree
  I hollered Lordy Lordy have mercy on me

- The judge he smiled as he picked up his pen
  Ninety nine years in the Folsom pen
  Ninety nine years underneath that ground
  I can’t forget the day I shot that bad bitch down
  Come on you gotta listen unto me
  Lay off that whiskey and let that cocaine be
Group Training Objectives-Day Three

1. Participants will be able to differentiate between sustain talk, discord, and change talk.
2. Participants will demonstrate an understanding of the change plan.
Sustain Talk

“I can’t get better”

“Death is a part of life”

“I don’t think I can give up sugar”

“There is no reason to change”

“Medications don’t help”

Death is a part of life
The Symptoms
- Arguing
- Interrupting
- Negating
- Ignoring
- Not arriving for appointments.
- The superficial “yes”

Diffusing
- Avoid arguments for a certain change.
- Do not engage in a power struggle.
- Provide an environment for different perspectives, but do not impose them.
- Allow the client to generate ideas and solutions.
- Understand that “resistance” communicates more than a tendency to want to give you a hard time—it most often indicates a need for the service provider to change tactics.
Change
Talk
DARN
CAT

**Desire-** “I want to feel better”

**Ability-** “Maybe I could test my insulin”

**Reason-** “I want to get my blood sugar under control so that I can live to see my grandchildren grow up”

**Need-** “I need to do this to show myself I can ”

**Commitment-** “I will test my insulin”

**Activation-** “I am going to speak to a doctor about my dislike of needles”

**Taking Steps-** “I made an appointment with that doctor”
Exercise: Please write a statement for each type of change talk.

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What Do We Know About Sustain Talk and Change Talk?

Focus on change talk has been linked to better outcomes in many populations.

Focus on sustain talk has been linked to poor outcomes in some populations.
Exercise

- Please take a minute and write down two examples of sustain talk, two discord statements, and two change talk statements.
Change Plan

- The changes I want to make are:
- The reasons I want to make these changes are:
- The steps I plan to take to change are:
- The ways other people can help me are:
- I will know my plan is working if:
- Some things that could interfere with my plan are:
- What I will do if my plan isn’t working: