

Motivational Interviewing for Medical Providers: *Preparing People for Change*



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Objectives



- Understand value, effectiveness of MI approach in health care settings
- Learn how to use three basic MI skills – asking, listening, informing – in health care encounters
- Learn about resources to continue developing MI skills

Henry at the ER

MI in a nutshell



Commonly reported problems, frustrations, practical constraints

“I tell them and tell them what to do, but they won’t do it.”

“It’s my job just to give them the facts, and that’s all I can do.”

“These people lead very difficult lives, and I understand why they smoke.”

“I’m not a counselor; I diagnose and manage medical conditions.”

“Some of my patients are in complete denial.”

POP QUIZ

How much time on average does a patient visiting a doctor in the U.S. get for his/her initial statement before the doctor takes the lead?

ANSWER

22 seconds

British Medical Journal 2002;325:682-683 (28 September)

Dedicated to all who are weary...

of trying to educate, advise, entice, convince, coax, cajole, persuade, sweet-talk, smooth-talk, guilt-trip, bribe, manipulate, or otherwise *get* people to change



Changing the conversation

Motivational Interviewing

“A client-centered, goal-oriented method for enhancing intrinsic motivation to change by exploring and resolving ambivalence”

Miller & Rollnick, 2002

Or...

Helping people talk
themselves into changing

Why MI?

- Evidence-based practice
- Effective across populations and cultures
- Applicable to wide range of professional disciplines
- Effective in briefer and longer encounters
- Counters myth of the unmotivated client
- Actively involves individuals in own care

Why MI?

- Consistent with person-centered, trauma-informed, recovery-oriented approach
- Improves adherence and retention in care
- Promotes healthy “helping” role for care providers
- Improves care providers’ retention in caring
- Instills hope and fosters lasting change

The Spirit of Motivational Interviewing

There is no such things as teaching,
only learning.

Monty Roberts

Spirit of Motivational Interviewing

- **Collaborative** - a partnership, honors client's expertise and perspectives
- **Evocative** - resources and motivation presumed to reside within the client
- **Empowering** - affirming of client's right and capacity for self-direction, facilitates informed choice

Four Guiding Principles

R: Resist the righting reflex

U: Understand your patient's motivations

L: Listen to your patient

E: Empower your patient

A paradigm shift

Eliciting

vs.

Imparting

Three communication styles

Style – attitude and approach to helping people

Each style important – used for different purposes – often intermixed

Following

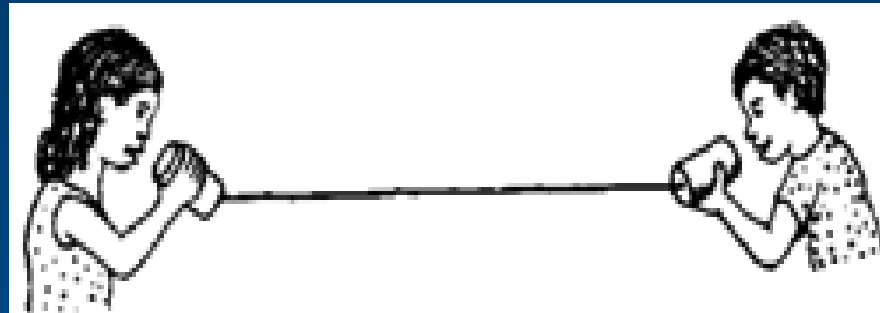
Directing

Guiding

Three core communication skills

Asking

Listening



Informing

OARS: Basic skills of Motivational Interviewing

- Open Questions
- Affirmations
- Reflective Listening
- Summaries



Motivational Interviewing is not a series of techniques for doing therapy but instead is a way of being with patients.

William Miller, Ph.D.

OARS: Open Questions

How have things been going?

What was that like?

What have you noticed about _____?

What are your concerns about taking these pills?

Hmm... Interesting... Tell me more...

When would you be most likely to share needles?

How would you like things to be different?

What will you lose/gain if you give up drinking?

How did you manage that in the past?

What do you want to do next?

How can I help you with that?

OARS: Open Questions

- Be curious, invite story
- Focus on *seeking to understand*
- Keep questions clear and short
- Avoid negating open questions with closed ones – e.g. How is it going? Have you been taking your medications?

OARS: Affirmations

- Statements that recognize individual's strengths, personal qualities, core values
- Build confidence in ability to change
- Must be congruent and genuine
- Not the same as praise

Affirmations sound like...

- You were very kind towards...
- I noticed that you...
- You showed a lot of patience...
- You are a courageous person to...
- You really value being...
- I wonder how you found the strength to...
- That took a lot of persistence to...
- Thank you for...

OARS: Reflective Listening

Reflective listening is the key to this work. The best motivational advice we can give you is to listen carefully to your clients. They will tell you what has worked and what hasn't. What moved them forward and shifted them backward. Whenever you are in doubt about what to do, listen.

Miller & Rollnick, 2002





“What people really need is
a good listening to.”

Mary Lou Casey

Thinking reflectively

- The trouble with words
 - Listener does not hear the words correctly
 - Speaker does not say what is meant
 - Listener gives a different interpretation to what the speaker means
- Reflective listening requires reflective thinking
 - Interest in what person has to say and respect for their inner wisdom
 - A hypothesis-testing approach to listening
 - Essentially asks: “Is this what you mean?”

Forming Reflections

- Appears deceptively easy, but requires practice
- A statement, not a question
- Listener's voice turns down at the end
- Common word is "you"

"So you feel..."

"It sounds like you..."

"You..."

"You're wondering if..."

Levels of Reflection

SIMPLE

Repeating or rephrasing – listener repeats or substitutes words or phrases; stays close to what speaker said

COMPLEX

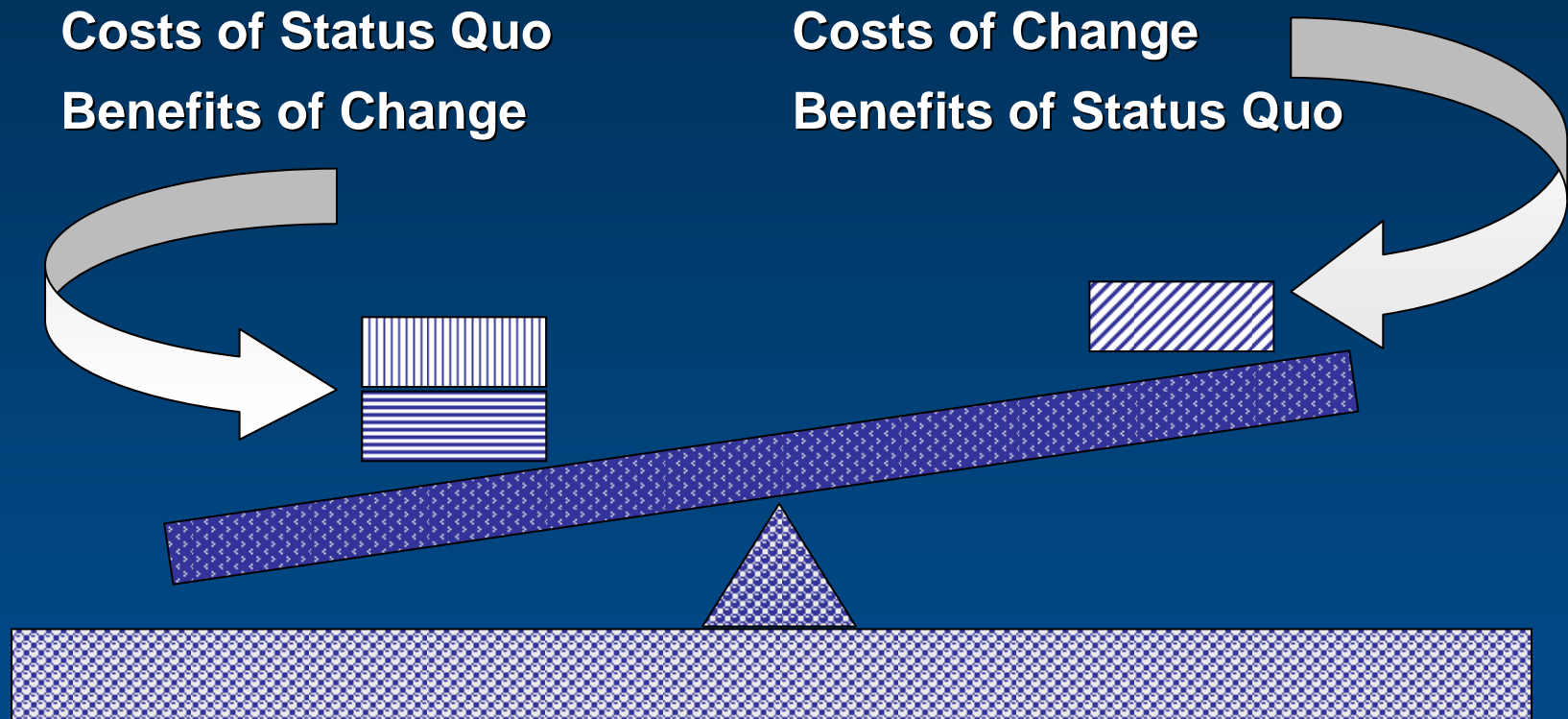
Paraphrasing – listener makes a major restatement that infers or guesses the speaker's meaning

Reflection of feeling – emphasizes the emotional aspects of communication; deepest form of listening

Sounds like...

- I can't figure out what to do about...
- Maybe...
- I think I should get tested, but...
- I can't make up my mind whether to...
- On the one hand...on the other hand...
- It scares me to take all these medicines, but I suppose...
- I know I'd be better off if...
- If only it weren't such a hassle to...
- No way! I will never, ever do that! Nope, not me!

Understanding Ambivalence



Contemplation: cost-benefit balance

Source: Miller and Rollnick 1991

Exploring Ambivalence: Benefits and Costs

	<i>Current Behavior</i>	<i>Changing</i>
<i>Benefits of</i>	1.	4.
<i>Costs of</i>	2.	3.

Exploring Importance

Assess

“On a scale of 1-10, how important is it at this time for you to (change)?”

Explore

“What made you give it a ___ and not a ___ (next lowest number)?”

“What do you think it would take to raise that score from a ___ to a ___ (next highest number)?”

“How might I help you with that?”

Exploring Confidence

Assess

“On a scale of 1-10, how confident are you that you could make that change, if you decided to do so?”

Explore

“What made you give it a ___ and not a ___ (next lowest number)?

“What do you think it would take to raise that score from a ___ to a ___ (next highest number)?

“How might I help you with that?”

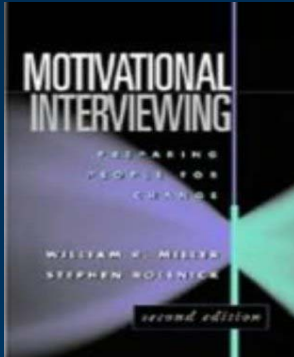
Giving Advice



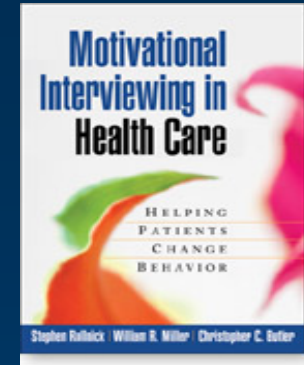
Dilbert

Giving Advice

- Ask permission to discuss concerns
- State concerns clearly and thoughtfully
- Acknowledge the decision is the client's to make
- Inquire what the person thinks
- Help evaluate options
- Provide affirmation and hope



Resources



- TIP # 35 - Enhancing Motivation for Change in Substance Abuse Treatment, CSAT, 1999. 1-800-729-6686 – NCADI
- Motivational Interviewing (2nd Ed.), Miller, WR & Rollnick, S., The Guilford Press, 2002.
- Motivational Interviewing in Health Care, Rollnick, S, Miller, WR and P, & Butler, C. The Guilford Press, 2007.
- Website: www.motivationalinterview.org

Remember...

your clients will teach you!