

# Motivational Interviewing

Building Readiness for Change

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“When given a choice between changing and proving that it is not necessary, most people get busy with the proof”

John Galbraith

“People are generally better persuaded by the reasons they themselves discovered than by those that enter the minds of others”

Pascal

# Motivational Interviewing

- Non-adherence with treatment regimens is common for a variety of chronic illnesses
- Managing an illness often requires complex changes or changes in multiple behaviors
- Motivation is a key issue in the recovery from a variety of illnesses

# Ready, Willing, and Able

- Willing: The importance of change
- Able: Confidence for change
- Ready: A matter of priorities

# Principles of Ambivalence

- Normal and common component of many psychological and behavioral problems
- Important to understand the unique dynamics of ambivalence for a particular individual
- Pressuring produces resistance
- Working through ambivalence is a central goal of Motivational Interviewing

# What is Motivation?

- *Motivation can be thought of not as a client attribute, but as an interpersonal process between therapist and client. Research clearly demonstrates that the interaction between therapist and client powerfully influences client resistance, compliance, and change.*



# What is Motivation?

- *A state of readiness to change*
- *The probability that a person will enter into, continue, and adhere to a specific change strategy*
- *A fluctuating product of interpersonal interaction*

# Research Evidence Suggests:

- A cyclical pattern or movement through specific stages of change
- A common set of processes of change
- A systematic integration of the stages and processes of change (doing the right things at the right times)

# Stages of Change

- Pre-contemplation: No intention to change behavior in the foreseeable future. Individuals in this stage are unaware or under-aware of their problems.
- Contemplation: The individual is aware that a problem exists and is seriously considering changing, but has not yet made a commitment to take action. Contemplators perform a risk-reward analysis.

# Stages of Change (cont.)

- Preparation: The individual intends to take action and develops a change plan.
- Action: The individual modifies his or her behavior, experiences, or environment in order to overcome the problem.
- Maintenance: Individuals in this stage work to prevent relapse and consolidate gains.

# What is Motivational Interviewing?

*A person-centered, directive method of communication for enhancing intrinsic motivation to change by exploring and resolving ambivalence.*

# What is Motivational Interviewing?

- Style:
  - Non-Authoritarian
  - Responsibility for change is ultimately left with the client, but the therapist plays a crucial role.

# What is Motivational Interviewing?

- Strategies:
  - More evocative than coercive
  - More supportive than argumentative
  - Timing plays a crucial role
  - Emphasis on ***why*** to change rather than the ***how***

# What is Motivational Interviewing?

## Goals:

- Develop discrepancy
- Resolve ambivalence
- Increase intrinsic motivation
- Increase the client's self perception regarding the ability to change
- Encourage the client to present the argument to change



# Principles of Motivational Interviewing

## **Express Empathy**

- Acceptance facilitates change
- Reflective listening is crucial
- Ambivalence is normal

# Principles of Motivational Interviewing

## **Develop Discrepancy**

- Awareness of consequences
- Discrepancy between current behavior and goals will motivate change
- The client should present the argument for change

# Principles of Motivational Interviewing

## **Roll with Resistance**

- Resistance is a signal to respond differently
- Resistance is not directly opposed
- Avoid arguing for change
- New perspectives are invited but not imposed
- The client is a primary resource in finding solutions

# Principles of Motivational Interviewing

## **Support Self-Efficacy**

- Belief that one can change is essential
- The client is responsible for choosing and carrying out a personal change plan
- The counselor's own belief in the person's ability to change becomes a self-fulfilling prophecy

# Phase I: Building Motivation to Change

*Avoid at all costs:*

- Question-Answer Trap
- Confrontation-Denial Trap
- Expert Trap
- The Labeling Trap
- Premature-Focus Trap
- The Blaming Trap

# Five Early Strategies

- Ask open-ended questions
- Listen reflectively
- Affirm
- Summarize
- Elicit self-motivational statements
  - problem recognition
  - expression of concern
  - intention to change
  - optimism about change

# Questions that Evoke Self-Motivational Statements

## *Problem Recognition:*

- What difficulties have you had in relation to your behavior?
- In what ways has this been a problem for you?
- How does your behavior interfere with who you want to be?

# Questions that Evoke Self-Motivational Statements

## *Concern:*

- What about your behavior causes you concern?
- What worries you about your behavior?
- What can you imagine happening to you as a result of your behavior?
- In what way does all this concern you?
- What do you think will happen if you don't make a change?



# Questions that Evoke Self-Motivational Statements

- *Intention to change:*
  - What makes you think you need to do something different?
  - What would be the advantage to changing your behavior?
  - What things make you think you should keep behaving the way you do...and on the other side...what makes you think you should change?

# Questions that Evoke Self-Motivational Statements

- *Optimism:*
  - If you decided to change, what do you think would work for you?
  - What makes you think you can change, even if you decided to?
  - What do you see in yourself in terms of ability that might be encouraging, if you decided to change?

# Strategies to Develop Discrepancy

- Ask open-ended questions that pull self-motivational statements
- Reflect back, selectively, the self-motivational aspects of what the client states
- Affirm and reinforce the client for making self-motivational statements

# Resistance

- The client's way of communicating that the therapist and client are at different places

# Strategies for Handling Resistance: Reflective Listening

- Simple reflection (*respond with nonresistance*)
- Amplified reflection (“*my wife nags*”; “*she doesn’t have any reason to worry*”)
- Double-sided reflection (“*on one hand you hate for your kids to witness the abuse, on the other you can’t imagine getting by on your own*”)

# Strategies for Handling Resistance

- Shift focus (*“let’s not worry about calling it depression, maybe we should just focus on your problems with sleep”*)
- Agreement with a twist (*“you’re right, alcohol is probably not the only thing affecting your marriage”*)

# Strategies for Handling Resistance

- Emphasizing personal choice and control (*“it is you who ultimately determines how this turns out”*)
- Reframing (*“Maybe taking care of yourself right now is one of the best ways you can help your family”*)

# Strategies for Handling Resistance

- Therapeutic paradox (*“maybe things are o.k. the way they are now”*)
- The drama of change (*relate to them in ways that they don’t expect*)



# Phase II: Strengthening Commitment to Change

The goal of therapy shifts from building motivation to strengthening commitment

## *Hazards in Phase II*

- Underestimating ambivalence
- Overprescription
- Insufficient direction

# Signs of Readiness to Change

- Decreased resistance
  - the client stops arguing, interrupting, denying, or objecting
- Decreased questions about the problem
  - the client seems to have enough information
- Resolve
  - the client appears to have reached a resolution

# Signs of Readiness to Change

cont.

- Self-motivational statements
  - statements reflect recognition, concern, openness to change, or optimism
- Increased questions about change
  - the client wants to know what they can do about the problem

# Signs of Readiness to Change

cont.

- **Envisioning**
  - talks about how life could be after a change, or discusses advantages of change
- **Experimenting**
  - begins to try different change approaches

# Strategies for Strengthening Commitment

## *Recapitulation*

- a summary of client's own perception of the problem
- a summing up of the ambivalence
- a review of the objective evidence
- a restatement of client offerings of wanting, intending, or planning to change
- your own assessment of client's situation, particularly when it matches the client's

# Strategies for Strengthening Commitment

*Key Questions* to get the client talking and thinking about change:

- what do you think you will do?
- what does all this mean about your behavior?
- what do you think has to change?
- what could you do, what are your options?
- it sounds like things can't stay the same, what can you do?

# Strategies for Strengthening Commitment

## *Key Questions*

How would you like things to turn out for yourself?

- of the things that concern you, what are the most important reasons to change?
- what concerns you about changing?
- what would be some of the benefits of changing?

# Strategies for Strengthening Commitment

## *Negotiating a Plan*

### – **setting goals:**

- \* how would you like things to be different?
- \* what is it you would like to see changed?
- \* if you were completely successful in accomplishing what you want, what would be different?



# Strategies for Strengthening Commitment

## *Considering Change Options*

- presenting a menu
- patient-treatment matching

## *Arriving at a Plan*

- the most important reasons why I want to change
- my main goals for myself, in making a change are...

# Strategies for Strengthening Commitment

## *Arriving at a Plan cont...*

- I plan to do these things in order to reach my goal
- the first steps that I plan to take in changing are...
- other people could help me changing in these ways...
- I hope that my plan will have these positive results...

# Strategies for Strengthening Commitment

## *Eliciting Commitment*

- commitment can be enhanced by making it public

# Appropriate Motivational Strategies for Each Stage of Change

# Pre-contemplation

- Establish rapport, ask permission, and build trust
- Raise doubts or concerns in the client about problem behavior by:
  - Exploring the meaning of events that brought the person to treatment
  - Eliciting the client's perception of the problem
  - Offering factual information about the risks of the behavior
  - Providing personalized feedback about assessment findings
  - Exploring pros and cons of the behavior
  - Helping a significant other intervene
  - Examining discrepancies between the client's and other's perception of the problem
  - Express concern and keep the door open

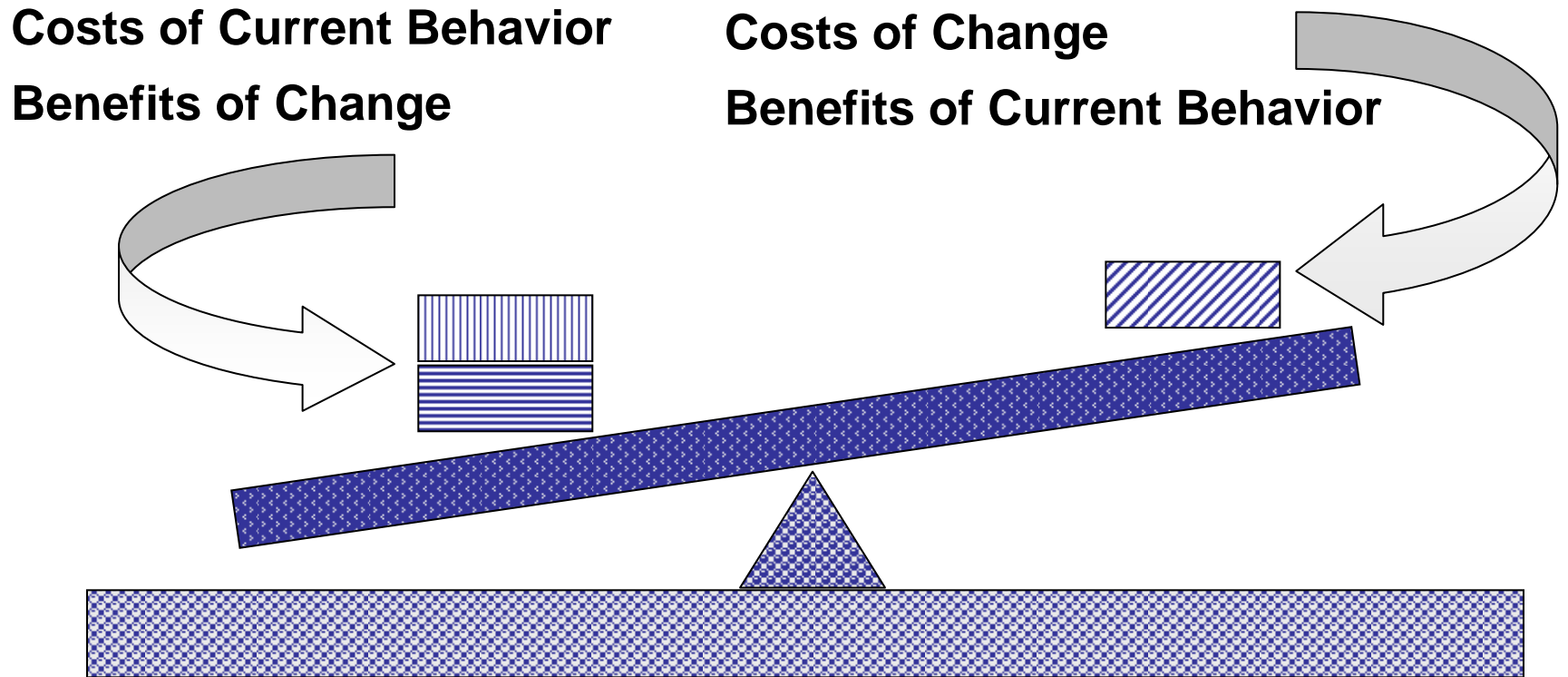
# Contemplation

- Normalize Ambivalence
- Help the client “tip the decisional balance scales” toward change by:
  - Eliciting and weighing pros and cons of continuing the behavior and change
  - Examining the client’s personal values in relation to change
  - Emphasizing the client’s free choice, responsibility, and self-efficacy for change

# Contemplation

- Elicit self-motivational statements of intent and commitment from the client
- Elicit ideas regarding the client's perceived self-efficacy and expectations regarding treatment
- Summarize self-motivational statements.

# Understanding Ambivalence



***Contemplation: cost-benefit balance***

Source: Miller and Rollnick (1991)



# Exploring Ambivalence: Benefits and Costs

Current Behavior

Changing

Benefits of	1.	4.
	2.	3.
Costs of		

# Preparation

- Clarify the client's own goals and strategies for change
- Offer a menu of options for change or treatment
- With permission, offer expertise and advice
- Negotiate a change-or treatment-plan and behavior contract
- Consider and lower barriers to change
- Help the client enlist social support
- Explore treatment expectancies and the client's role

# Preparation cont.

- Elicit from the client what has worked in the past either for them or others they know
- Assist the client to negotiate finances, child care, work, transportation, or other potential barriers
- Have the client publicly announce plans to change

# Action

- Engage the client in treatment and reinforce the importance of remaining in recovery
- Support a realistic view of change through small steps
- Acknowledge difficulties for the client in early stages of change
- Help the client identify high risk situations through a functional analysis and develop appropriate coping strategies to overcome these
- Assist the client in finding new reinforcers of positive change
- Help the client assess whether they have strong family and social support

# Maintenance

- Help the client identify and sample new sources of pleasure (new reinforcers)
- Support lifestyle change
- Affirm the client's resolve and self-efficacy
- Help the client practice and use new coping strategies to avoid a return to problem behavior
- Maintain supportive contact (be available between sessions)
- Develop a “fire escape” plan if the client resumes problem behavior.
- Review long-term goals with the client