Motivational Interviewing 101
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WHAT IS MOTIVATIONAL INTERVIEWING?

- "A client-centered, directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence" (Miller & Rollnick, 2002)
- An evidence-based approach
- A method of communication; a therapeutic or counseling style vs. a therapy
- Used to address a number of health issues that have behavioral components
- Values autonomy: The client is responsible for change
Clients with problematic alcohol use who participated in 4 Motivational Enhancement Therapy (MET-a structured, manualized therapy utilizing motivational interviewing approach) sessions spread over 12 weeks had similar reductions in alcohol use 1 year post-treatment as clients who participated in 12 weekly sessions of Cognitive Behavioral Therapy and 12 weekly sessions of 12 step group facilitation (TSF).

Clients with lower incidence of psychiatric problems fared slightly better with TSF vs. CBT approach.

Clients with higher anger levels fared better with MET.

Clients reporting a social network that encouraged drinking at intake fared somewhat better with TSF than MET.
PART ONE: MI PHILOSOPHY
Change occurs naturally (w/ or w/o counseling).
...Yet even brief interventions can trigger, speed, or facilitate change.
The likelihood that change will occur is strongly influenced by interpersonal interactions.
When behavioral change occurs in the course of treatment, much of it tends to happen in the first few sessions.
The clinician one is matched with is a significant determinant of treatment outcome.
An empathic counseling styles seems to facilitate vs. deter change (confrontational styles are associated with poorer outcomes).
What people SAY about change is important.
“We are suggesting quite a different understanding of motivation...Humiliation, shame, guilt, and angst are not the primary engines of change. Ironically, such experiences can even immobilize the person, rendering change more remote. Instead, constructive behavior change seems to arise when the person connects it with something of intrinsic value, something important, something cherished. ..”
“...Intrinsic motivation for change arises in an accepting, empowering atmosphere that makes it safe for the person to explore the possibly painful present in relation to what is wanted and valued. 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. The way out of that forest has to do with exploring and following what the person is experiencing and what, from his or her perspective, truly matters.”

(Miller & Rollnick, 2002; p. 12)
“The more you tighten your grip, Tarkin, the more star systems will slip through your fingers.” -Princess Leia
"As the right of each sentient species to live in accordance with its normal cultural evolution is considered sacred, no Star Fleet personnel may interfere with the healthy development of alien life and culture...this directive takes precedence over any and all other considerations, and carries with it the highest moral obligation."
Aikido vs. Tae Kwon Do

- Designed as self defense that protects the attacker from injury
- Translation: “The Way of unifying with life energy” or “the Way of harmonious spirit”
- Blending with the motion of the attacker and redirecting the force of the attack rather than opposing it head-on
- Requires very little physical strength

- Designed as a competitive sport of combat techniques
- Translation: “The way to strike or break with foot or fist”
- Emphasizes kicks from a distance for greater power, closed fist punches, open-hand strikes
- Strength and speed are considered a competitive advantage
STAGES OF CHANGE MODEL

(Prochaska, Norcross, & DiClemente, 1994)
Motivational Interviewing

- Collaboration: Partnership between client and counselor
- Evocation: The client is the source of resources and motivation for change
- Autonomy: Affirms client’s right and capacity for self-direction; informed choice
- Confrontation: Over-riding client’s perspectives; imposing “reality” as counselor sees it
- Education: Client lacks knowledge, insight, skills necessary for change
- Authority: Counselors tells client what to do and how to do it
FOUR GENERAL PRINCIPLES OF MI

- Express Empathy
- Develop Discrepancy
- Roll with Resistance
- Support Self-Efficacy
Consonance (dancing) and Dissonance (wrestling): Two poles of a continuum for how a counseling session is going

Causes of Dissonance:

- Two people have different agendas, or aspirations.
- Mismatch of counselor strategy to client readiness level.
- Client or counselor enters the session with an elevated level of anger or frustration.
- Lack of agreement about roles in the relationship.
Arguing: Challenging, Discounting, Hostility
Interrupting: Talking Over, Cutting Off
Negating: Blaming, Disagreeing, Excusing, Claiming Impunity, Minimizing, Pessimism, Reluctance, Unwillingness to Change
Ignoring: Inattention, Non-Answer, No Response, Sidetracking
Observe Client and Counselor Talk in Session

- Resistance Talk (Client)
- Advocacy Responses (Counselor)
CHANGE TALK AND RESISTANCE

- Disadvantages of Status Quo
- Advantages of Change
- Intention to Change
- Optimism About Change

- Advantages of Status Quo
- Disadvantages of Change
- Intention Not to Change
- Pessimism about Change
Six Types of Counselor Advocacy Responses

- Arguing for Change
- Assuming the Expert Role
- Criticizing, Shaming, Blaming
- Labeling
- Being in a Hurry
- Claiming Preeminence
"Yea, though I walk through the valley of the shadow of death, I will fear no evil" Psalm 23
PART TWO: MI IMPLEMENTATION
TWO PHASES OF MI

- Phase I: Building Motivation for Change
  - Stresses roles of importance of change and confidence in ability to change
- Phase II: Strengthening Commitment to Change
PHASE I: BUILDING MOTIVATION FOR CHANGE
To better understand the client’s ambivalence, learn more about his or her perception of both importance of the change and confidence in ability to change.

Example: “How important would you say it is for you to _______? On a scale from 0 to 10, where 0 is not at all important and 10 is extremely important, where would you say you are?”

“And how confident would you say you are, that if you decided to _____, you could do it? ON the same scale from 0 to 10, where 0 is not at all confident and 10 is extremely confident, where would you say you are?” (Miller & Rollnick, 2002; p. 53)
## Four Client Profiles

<table>
<thead>
<tr>
<th>Group A: Low Importance, Low Confidence</th>
<th>Group B: Low Importance, High Confidence</th>
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<tbody>
<tr>
<td>Neither see change as important nor believe that they could succeed in making such a change if they tried.</td>
<td>Confident that they could make the change if they thought it were important to do so but are not persuaded that they want to change.</td>
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<tr>
<th>Group C: High Importance, Low Confidence</th>
<th>Group D: High Importance, High Confidence</th>
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<tr>
<td>Express the desire/willingness to change, but low confidence that they could succeed if they tried.</td>
<td>See it as important to change and also believe that they could succeed.</td>
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EARLY TRAPS TO AVOID (IMPORTANCE TRAPS)

- Question-Answer Trap
- Taking Sides
- Expert Trap
- Labeling Trap
- Premature-Focus Trap
- Blaming Trap

Case Study: Sheldon’s Obsessive Compulsive Personality treatment experience
OPENING STRUCTURE

- Put the client’s mind at ease with an opening statement:
  - The amount of time you have available.
  - Explain your role and goals.
  - A description of the client’s role.
  - A mention of details that must be attended to.
  - An open-ended question.
FIVE EARLY METHODS
FIRST 4 = “OARS METHOD”

- Ask Open-Ended Questions
- Listen Reflectively
- Affirm
- Summarize
- Eliciting Change Talk
12 Kinds of Responses That Are Not Listening (Roadblocks)

- Ordering, directing, or commanding
- Warning, cautioning, or threatening
- Giving advice, making suggestions, providing solutions
- Persuading with logic, arguing, lecturing
- Telling people what they should do; moralizing
- Disagreeing, judging, criticizing, blaming
- Agreeing, approving, praising
- Shaming, ridiculing, labeling
- Interpreting or analyzing
- Reassuring, sympathizing, consoling
- Questioning or probing
- Withdrawing, distracting, humoring, changing the subject (Gordon, 1970)
Simple Reflection: A simple acknowledgement of the person’s disagreement, feeling, or perception

Amplified Reflection: Reflect back what the person has said in an amplified or exaggerated form (can be paradoxical)

Double-Sided Reflection: Capture both sides of ambivalence
RESPONSES BEYOND REFLECTION

- Shifting Focus
- Reframing
- Agreeing With a Twist (essentially a reflection followed by a reframe)
- Emphasizing Personal Choice and Control
- Coming Alongside (paradoxical)
METHODS FOR ELICITING CHANGE TALK

- Asking Evocative Questions
- Using the Importance Ruler
- Elaborating
- Querying the Extremes
- Looking Back
- Looking Forward
- Exploring Goals and Values
### 1. Disadvantages of the Status Quo
- What worries you about your current situation?
- What makes you think you need to do something about ____? What tells you that?
- What is it about your drinking that concerns your wife?

### 2. Advantages of Change
- How would you like for things to be different?
- The Miracle Question (e.g. If a miracle happened overnight such that you woke up in the morning and _____ was no longer an issue, what would be different throughout the day? What would be different if you lost weight?)

### 3. Optimism about Change
- What do you think would work for you if you decided to change?
- What personal strengths do you have that could help you succeed?
- What tells you that you can change if you want to?

### 4. Intention to Change
- What do you think about your _____ at this point?
- What are your options?
- What would you be willing to try?
- What do you intend to do?
Examples:

- Why are you at _____ and not a zero?
- What would it take for you to go from _____ to [a higher number]?
EXPLORING THE DECISIONAL BALANCE

- Ask client to tell you about or write down the pros and cons of making the change vs. not making the change
- Ask them what they notice.
- (See handout)
MORE ON METHODS FOR CHANGE TALK...

- **Elaborating**
  - When a reason for a change has been named, ask for elaboration vs. move on. Ask for clarification (In what ways?), a specific example, a description of the last time it occurred, and “What else?”

- **Querying Extremes**
  - What concerns you the most about...?
  - If you changed ____ , what do you think would the best that could happen?
MORE ON METHODS FOR CHANGE TALK...

- Looking Back/Forward
  - Do you remember a time when things were going well? What has changed?
  - What was different in your life before you started using?
  - If you decide to change ____ , what do you hope will be different in the future?
  - Two stories (narratives)

- Exploring Goals and Values
  - (Borrowing from ACT: Epitaph, valued directions inventory, life reflection statement)
CONFIDENCE TRAPS

- “I’ll Take Over Now, Thank You”—temptation to abandon MI approach once person seems to perceive importance of change
- “There, there, you’ll be fine”—not taking confidence issue seriously enough (i.e. “I’m sure you can do it”)
- Gloom a Deux—sharing the client’s perception of helplessness or hopelessness
  - “At least one person in the room needs to be optimistic, focused on problem solving rather than despair. Of course, there are things that genuinely cannot be changed, and we are not advocating delusional optimism. Most often, however, some form of change is feasible, and client need to be able to borrow hope from the counselor until they have their own. Trust that the client has inner resources and creativity to draw on in pursuing change” (Miller & Rollnick, 2002; p. 113).
Eliciting & Strengthening Confidence Talk

- Evocative Questions
- Confidence Ruler
- Reviewing Past Successes
- Personal Strengths and Supports
- Brainstorming
- Giving Information and Advice (ask permission, don’t fall into “Taking Sides” trap)
- Reframing
- Hypothetical Change
- Responding to Confidence Talk (e.g. “What might you do if...”)
- Radical Change
PHASE II: STRENGTHENING COMMITMENT TO CHANGE
SIGNS OF READINESS FOR CHANGE

- Decreased resistance
- Decreased discussion about the problem
- Resolve
- Change talk
- Questions about change
- Envisioning
- Experimenting
Underestimating ambivalence
Overprescription
Insufficient discretion
Recapitulation: Summarize once again the client's current situation, as reflected in your conversations thus far (drawing Phase 1 to a close)

Could include:
- Summary of client’s own perceptions about the problem as reflected in his or her change talk
- Summing up client’s ambivalence, including acknowledgment of what remains positive or attractive about status quo
- Review of objective evidence relevant to importance of change
- Restatement of indications client has offered of wanting to change and/or confidence talk
- Your own assessment of client’s situation, especially at points where it converges with client’s resources
Key Questions (e.g. What do you think you will do?)

Giving Information & Advice

Negotiating a Change Plan
- Setting Goals
- Considering Change Options
- Arriving at a Plan (tool: Change Plan Worksheet)
- Eliciting Commitment
- Transition: “The commitment to a change plan completes the formal cycle of motivational interviewing. Sometimes people proceed with change on their own from here. It can also work well, however, to transition from this initial motivational consultation into action-focused counseling if the person so chooses. Furthermore, the general style of motivational interviewing can be used to facilitate change throughout the process of counseling. Ambivalence, after all, rarely disappears on the first step of a journey” (Miller & Rollnick, 2002; p.139)
LIMITATIONS TO MI

- While there is evidence that MI is effective, we don’t fully understand how and why.
- It is not “the answer to most or all counseling and behavior change problems. It is one method that can be used in concert with others. Neither do we believe that it is the best or only way to enhance motivation for change with everyone” (Miller & Rollnick, 2002; p.26)

- Institutional barriers
- Funding/payer barriers
- Legal & ethical considerations
REFERENCE LIST


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