TIPS FROM MOTIVATIONAL INTERVIEWING
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Motivational Interviewing is "a collaborative conversation style for strengthening a person’s own motivation and commitment to change." [Miller & Rollnick, 2013]. For most people, change means giving up a behavior that is woven into the fabric of the person’s life and very identity.

Trying to convince, persuade, advise, cajole, confront people about the importance of changing will usually result in responses that sound defensive or resistant, even when the change seems like the right thing to do.

A fundamental belief of the motivational interviewing method is that it is possible to engage with people in such a way as to encourage them to express their own reasons for moving toward change.

**The Spirit of Motivational Interviewing**

Approaching conversations and counseling in a way that is consistent with the ‘Spirit of MI’ enhances rapport and strengthens the patient’s ability to build upon their own strengths and motivations.

*Partnership:* This is demonstrated when the power in the relationship is balanced and the expertise of both you and the client is overtly recognized. An attitude and demonstration of “we are in this together” is critical to establishing a collaborative relationship.

*Acceptance:* The absence of judgment is at the heart of acceptance. It encompasses four qualities: 1) supporting the client’s autonomy in making decisions about changing, 2) recognizing their absolute worth as a human being, 3) providing affirmations that reinforce inherent strengths and efforts, and 4) demonstrating accurate empathy – the ability and effort at putting yourself in the other’s shoes.

*Compassion:* A sincere concern for the client’s wellbeing helps keep the conversation focused on the client’s needs.

*Evocation:* Your role is to set the stage and use strategies that allow the client to explore and express thoughts and feelings about quitting and, when ready, describe potential plans regarding how to quit.

**Guiding Principles of Motivational Interviewing**

These principles help the clinician effectively implement a motivational interviewing style.

*Resist the Righting Reflex:* It is the natural tendency of helpers to jump right to the solution of a problem. It also is the natural tendency for most of us to resist being told what to do and how to do it. When you resist the urge to persuade the client about the need and the methods to change a behavior (the ‘righting reflex’) it allows you and the client to truly collaborate.

*Understand Motivation:* Reasons to make a behavior change vary widely. What you think is important may not make sense to the client. Identifying the values that guide your client’s life will help to uncover their motivations to change.

*Listen:* ...and listen more. All of the spirit and principles described here rely on good listening skills. Focus on increasing the amount of time the client spends talking.

*Empower the client:* Belief in the ability to change is essential to success. Help identify other successes and personal resources, reinforce autonomy in decision making and affirm strengths to help build self-efficacy.
Evoking and Responding to Change Talk:
Words matter. What we say predicts what we will do.

Sustain Talk: This focuses on all the reasons not to change and fears about changing. Evoking sustain talk early in an interaction can help build rapport, especially with someone is not at all ready to change. Shifting to Change Talk as early as possible will help the client get closer to making a change.

Change Talk: This will focus on willingness, ability and reasons to change. Looking for opportunities to elicit and expand upon change talk is a key strategy in motivational interviewing. Use open-ended questions and reflective statements to direct the conversation in this direction.

Here are some examples of open-ended questions that can get at change talk.

- Desire (level of interest in changing)
  - “What are your thoughts about …..?”
  - “What are you thinking about …….. at this point?”

- Ability (self-efficacy)
  - “What do you think you would need to successfully ……..?”
  - “If you were to …….. how might you go about it?”
  - “What encourages you to think that you could change if you want to?”
  - “What makes you think that if you did decide to ………, you could do it?”

- Reasons (benefits of changing)
  - “What are some of the things about the way things are now that are not so good?”
  - “What do you see as some of the benefits of ……..?”
  - “What do you imagine it will be like if you ……..?”

- Need (disadvantages of not changing)
  - “What are your concerns about the way things are right now?”
  - “What makes you think it might be a good idea to ……..?”
  - “What do you worry about if you continue to ………?”
  - “What do you think will happen if you don’t ……..?”

- Commitment (necessary for change to occur)
  - “What do you think you will do?”

Use reflective statements to respond to change talk, communicate that you are listening and encourage more discussion.

- Repetition: repeating, as a statement, what the client has said to you. This may be something you want the client to know you heard, or something you want to “underline.”
- Paraphrasing: restating what the client has said, possibly linking several ideas together: “What I hear you saying is…” “Let me see if I’ve got this right…”
- Reflecting feelings: naming the feeling that you think is being expressed: “It sounds like that worries you.” “You feel frustrated.” “That must have (upset you, made you happy, annoyed you).”

Affirmation is a wonderful way to enhance self-efficacy. It is a way of reflecting the client’s strengths as they are in the midst of talking about problems and difficulties.

- “What hard work!”
- “That took a lot of courage.”
- “That was a really impressive way of handling that.”
- “You put a lot of thought into that.”
- “The fact that you’re willing to talk about this shows that you take your health seriously”
Summarizing what you have heard from the client puts a framework around the discussion, and works well to identify the discrepancy between what they do and what they want. It helps the client to simultaneously experience both sides of their ambivalence. The key to summarizing is relating back the client’s own pros and cons of smoking.

- “So on the one hand, ..., while on the other hand, ...”

**Tools for Initiating a Conversation**

*Scaling questions* can help to begin a conversation in a non-judgmental way and demonstrates sincere curiosity by the client’s views on quitting. You can also ask about readiness to quit in the same way. Be sure to question *downward* in the follow-up question in order to get at change talk.

1. How IMPORTANT is it for you right now to ........ ? On a scale from 0 to 10, what number would you give yourself?

   0-----------------------------------------------------------------------------------------------------------------10
   Not at All Important                     Extremely Important
   a. Why are you at X and not at 0?
      {Asking about a lower number elicits change talk – respond with “what else” and reflective statements before moving to the next question}
   b. What would need to happen for you to get from X to Y?
      {Continue the conversation with more reflective statements focused on change talk}

2. If you did decide to quit smoking how CONFIDENT are you that you could do it?

   0-----------------------------------------------------------------------------------------------------------------10
   Not at All Confident                     Extremely Confident
   a. Why are you at X and not at 0?
   b. What would need to happen for you to get from X to Y?
Resources: Readings

This third edition has enhanced the descriptions of all aspects of motivational interviewing and is very easy to understand. It includes many examples and case studies to illustrate the material.

Written especially for health care provides this book helps to blend MI with traditional roles of health care providers. It includes many relevant examples from clinical settings and is quick to read.

In addition to descriptions of motivational interview this workbook uses exercises in each chapter to help with practice and skill development. It can be a wonderful tool for staff working together to learn this skill.

Resources: Training

Center for Integrated Primary Care: http://www.umassmed.edu/CIPC

Certificate of Intensive Training in Motivational Interviewing: The Center for Integrated Primary Care is proud to offer a course in Motivational Interviewing designed for healthcare professionals working in the Patient Centered Medical Home. Participants who complete the course are awarded a Certificate of Intensive Training in Motivational Interviewing. The curriculum is grounded in the literature describing effective Motivational Interviewing training and is tailored to practitioners working in primary care.

Motivational Interviewing Network of Trainers (MINT): http://www.motivationalinterviewing.org/
MINT provides links to trainers and resources for individuals and organizations wishing to integrate motivational interviewing into their practice. Members of MINT have all completed a MINT sponsored train the trainer program.