Use of Motivational Interviewing Interventions to Move the Client through the Stages of Change

Elizabeth Frei, LCSW
Addiction Services Program Coordinator
High Focus Centers
“Taking a new step, uttering a new word, is what people fear most.”

— Fyodor Dostoyevsky, Crime and Punishment
Objectives

SACs will be able to...

1. identify the stages of change.
2. describe the spirit of Motivation Interviewing.
3. identify the key principles of Motivational Interviewing.
4. recognize specific Motivational Interviewing techniques that can be utilized with students.
The Transtheoretical Model of Change
Stages of Change

• The Transtheoretical Model of Change provides a framework which allows us to understand and intervene within the change process.

• Each stage:
  • represents a point along a full course of changing
  • is well-defined, predictable, and entails a set of thoughts and behaviors.
  • Is *fluid*, with a client moving backwards or forwards at any point.
Precontemplation

Maintenance

Contemplation

Action

Preparation

Relapse
Precontemplation

- Individual is unaware of the problem behavior or they are unwilling, or discouraged, when it comes to changing it
- Tasks for this stage:
  - Establishing rapport
  - Exploring the client’s perceptions
  - Raising doubts and expressing concern
  - Keeping the door open
Contemplation

• The individual acknowledges the problem and beings to think about it, but is ambivalent about changing it

• Tasks for this stage:
  • Normalize the ambivalence
  • Weighing pros and cons
  • Emphasize free choice, self-efficacy and autonomy
Preparation

• The individual is planning to make a change in the near future and is committed to doing so, but is still considering what to do.

• Tasks for this stage:
  • Clarify the client’s goal
  • Consider barriers to change
  • Explore treatment expectations and client’s confidence in making changes
Action

- The individual is actively taking steps to change their behavior. This stage takes the most time and energy commitment.
- Tasks for this stage:
  - Engage the client in treatment
  - Acknowledge difficulties
  - Help the client assess family/social supports
Maintenance

• The individual achieved initial goals and is working on maintaining goals and preventing relapse
• Tasks for this stage:
  • Support lifestyle change
  • Maintain supportive contact
  • Affirm the client’s resolve and self-efficacy
Relapse

• A recurrence of symptoms which can occur at any time.
• Tasks for this stage:
  • Assist the individual with reentering the change cycle
  • Exploring the meaning of the recurrence as a learning opportunity
Motivational Interviewing
What is Motivational Interviewing (MI)?

“It is not something that one does to people; rather, it is fundamentally a way of being with and for people – a facilitative approach to communication that evokes natural changes.”

(Miller & Rollnick, 2002)
What is Motivational Interviewing (MI)?

- William R. Miller and Stephen Rollnick, founders of MI, define it as “a client-centered, reactive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence.”
  - Focus is on the concerns and perspectives of the individual and eliciting the person’s intrinsic motivation to change
  - There is an intentional focus on resolving ambivalence
  - Cannot be used to impose change that is inconsistent with the person’s own values and beliefs

(Miller & Rollnick, 2002)
The Spirit of Motivational Interviewing

“The word that allows yes, the word that makes no possible. The word that puts the free in freedom and takes the obligation out of love. The word that throws a window open after the final door is closed. The word upon which all adventure, all exhilaration, all meaning, all honor depends. The word that fires evolution’s motor of mud. The word that the cocoon whispers to the caterpillar. The word that molecules recite before bonding. The word that separates that which is dead from that which is living. The word no mirror can turn around. CHOICE.”

—Tom Robbins, Still Life with Woodpecker
Autonomy

• One person cannot make another person change. Motivation for change lies within the client and so there must be respect for the client’s autonomy.

• One can provide an environment of “supportive autonomy” by seeking the client’s perspective, providing a menu of options, and emphasizing their personal choice and responsibility. (Naar-King, 2011)
Collaboration

- The spirit is collaborative, meaning the relationships should be partnership-like
- The stance is support over persuasion or argument
- The clinician seeks to create a positive interpersonal atmosphere
Evocation

• Takes a tone of *eliciting* and *drawing* out things from the client rather than the imparting wisdom or advice.

• The goal is to draw on the client’s own perceptions, goals and values rather than seeking to address deficits in knowledge, insight or skills
Motivational Interviewing is NOT...

• Authoritarian or expert in stance
• Argumentative
• When the clinician does most of the talking
• Coercive or punitive
• Offering advice
• A bag of tricks to apply to someone
4 Guiding Principles
Express Empathy

• Empathy is the foundation of MI where one works with an attitude of acceptance
• It is NOT the same as agreement or approval but rather where one has desire to understand another’s perspective
Support Self-Efficacy

- Self-efficacy is the belief in one’s ability to be competent in specific situations and tasks.
- Behavior change occurs when a client deems the behavior important and feels about to make changes. (Miller & Rollnick, 2002)
Roll with Resistance

- Resistance is an interpersonal process and should be met with clarification of the person’s point of view instead of correction (Miller & Rollnick, 2002)
- When sensing resistance of statements against change, stop drop and roll
  - Stop – pause and consider why the client may not want to change
  - Drop – your current approach and try something else. Are you arguing?
  - Roll – with resistance, which means to expressing an understanding of the person’s point of view while emphasizing personal choice
Develop Discrepancy

• Behavior change is more likely to occur when the new behavior is identified as being consistent with an individual’s goals and values.

• This is done by evoking, reflecting and magnifying the discrepancy between the person’s values and goals and their current behaviors.
Motivational Interviewing:

Phase 1 – Building Motivation to Change &
Phase 2 – Strengthening Commitment to Change
Phase 1 - Building Motivation to Change

• Phase 1 is about building intrinsic motivation to change with the overall goal being to resolve ambivalence

• Primarily precontemplation and contemplation stages of change.
## Four Client Profiles

<table>
<thead>
<tr>
<th>Low Importance, Low Confidence</th>
<th>Low Importance, High Confidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neither see change as important nor believe they could succeed in making the change.</td>
<td>Confident they could make the change if they thought it were important to do so, but no persuaded to make the change.</td>
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<table>
<thead>
<tr>
<th>High Importance, Low Confidence</th>
<th>High Importance, High Confidence</th>
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</thead>
<tbody>
<tr>
<td>Willingness to change but low confidence in ability to make the change.</td>
<td>Both see it as important to change and that they could succeed in doing so.</td>
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Change Talk

- Change talk is when we hear a client speak in a way that supports making a positive change.
  - Whether a person will continue to explore change talk or steer away from it depends on how we respond.
DARN

• Desire: want, wish, like
  • I want to stop smoking
  • I would like to follow my parent’s rules so they wouldn’t nag.

• Ability: can, could, able
  • I could cut back on smoking if I wanted to
  • I might be able to stop drinking

  (Naar King, 2011)
DARN

• **Reason: for change**
  - I really don’t’ want to end up on dialysis
  - If I get another dirty urine drug screen, they’ll kick me out of this program

• **Need: have to, important**
  - I need to lose some weight
  - I’ve got to get my grades up to graduate

(Naar King, 2011)
What to do with Change Talk....
Phase 1 Techniques

- **OARS**
  - Open-ended questions
    - Allows the student to speak and give information
  - Affirmation
    - Positive statements of a client’s behavior that deserve recognition.
  - Reflective listening
    - Repeating, rephrasing and/or paraphrasing, as well as, reflecting on feeling statements
  - Summarizing
    - Offering a summary of the student’s statements to ensure clarity and understanding
Phase 1 Techniques

Developing Discrepancy:

- How do you think your life would be different if you were not _____ (drinking, smoking, skipping your medication, getting stressed out, etc)?
- How do you imagine your life to be like if you don’t make changes and continue to _____ (use, cut class, not study, smoke, etc)?
- How does your ______ (risky behavior) fit in with your goals?
- On one hand, you say that your ______ are important to you, yet you continue to ______. Help me to understand...
- What do you feel you need to change to achieve your goals?
- How will things be for you a year from now if you continue to ______ (risk behavior))?
Phase 1 Techniques

- Decisional Matrix

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<tr>
<th>Benefit of changing</th>
<th>Cons of changing</th>
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<table>
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<tr>
<th>Benefit of not changing</th>
<th>Cons of not changing</th>
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</table>
Phase 1 Techniques

• Ruler
  ▫ Ruler (How important would you say it is for you to _____? And how confident would you say you are that if you decided to _____ you could do it?)
  ▫ Why are you a _____ and not lower?
    • This elicits change talk!
Phase 2: Strengthening Commitment to Change

- This phase is about strengthening the commitment to change and developing a plan to actually accomplish it.
- Primarily preparation, action and maintenance stages of change.
Phase 2 Techniques

• Set a goal and change plan
• Menu of options
  ▫ Offer options for the client on what their change plan can look like
• Short reflections
  ▫ Short reflection breaks can be used to maintain rapport, let the patient know that you care what he or she thinks, and avoid information overdose. Techniques to use in such reflection breaks can be similar to the type of reflective listening
“I alone cannot change the world, but I can cast a stone across the waters to create many ripples.”

– Mother Teresa