Motivational Interviewing for Primary Care-Mental Health Integration

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Motivational Interviewing (MI) Philosophy

"People are generally better persuaded by the reasons which **they** have themselves discovered than by those which have come in to the mind of others."

~ Blaise Pascal, French mathematician, physicist and religious philosopher

Motivational Interviewing (MI)

Definition:

"A person-centered, goal-oriented approach for facilitating change through exploring and resolving ambivalence."

Miller, W.R. (2006) Motivational factors in Addictive Behaviors. In W.R. Miller & K.M. Carroll (Eds.), *Rethinking substance abuse: what the science shows and what we should do about it* (pp 134–150). New York: Guilford Press.

The Goal of MI

The goal of MI is to facilitate:

- Fully informed,
- Deeply thought out,
- Internally motivated choices,
- Not to change behavior....

Resnicow, et al., 2002

How Is This Done?

- Engage clients in a dialogue and partnership
- Understand what influences clients' behavior
- Help clients bridge gaps between current behaviors and broader values/goals
- Help clients resolve mixed feelings (ambivalence) about behavior change

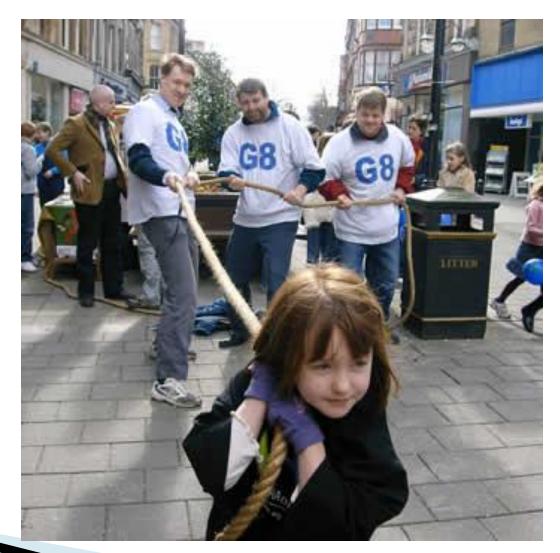
Spirit of Motivational Interviewing

- Autonomy (vs. Authority) Client is responsible for change
- Collaboration (vs. Confrontation) Work in Partnership
- Evocation (vs. Education) Learn from the Client

Communication is a Dance



Not a Tug of War



Brief MI

- Brief MI is used in less intense interactions
- It uses the 'spirit' of MI (respect for the client – shown by listening well and trying to understand the client's view)
- It uses MI techniques to 'know' the client faster (ratings, values assessments)

Why choose MI?

- Brief MI has been found to be effective in addressing health behavior changes
- MI accepts that the behavior change depends on the individual's
 - Interest in making a change
 - Confidence in making this change
 - Ability to add this change to their own life

How can MI be Effective in an IPC Appointment?

- Being client centered does not mean that the topic of conversation is random
- The topic is determined by the reason (e.g., nutritional support) the client is there
- Being client centered means that the conversational focus is on the client's concerns, fears, and lack of knowledge about how to make the change

Client Focus

- MI supports the client in articulating
 - How personally important this change (e.g., dietary) is, as opposed to how important we think it is
 - What stands in the way of making this change (time, money, cultural factors, etc.)
 - Changes that might work in their life
 - How to increase the chances of success

Traditional Approach vs. MI

The "counselor":

-- places importance on importance

the behavior change change

- -- controls the conversation
- -- may direct/select the goals the patient should goals

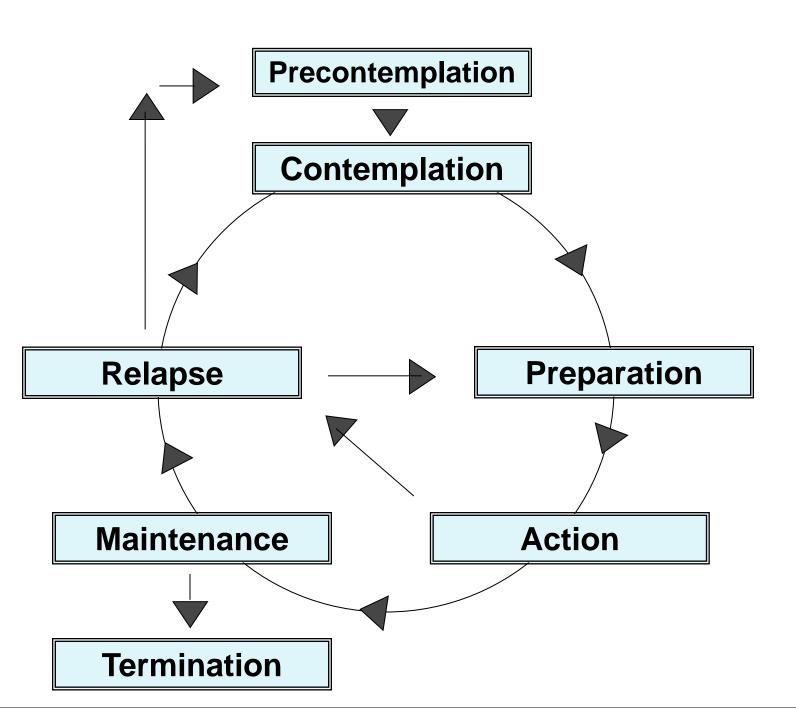
achieve

The patient:

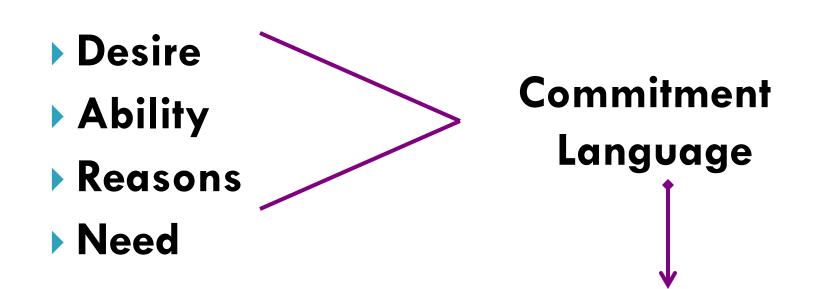
- -- determines
 - of the behavior
- -- is listened to, shares concerns and needs
- -- is supported in decisions about change and

Advantages

- MI techniques of listening and reflecting may improve the trust and openness needed to understand and respond to the change needs of patients
- MI allows quick assessment of who the patient is, what pressures the patient copes with, what degree of change can occur at this point in the Veteran's life



Predictors of Behavior Change



Behavior Change

Commitment Language

"I am going to bring my lunch to work."
"I'm determined to exercise in the morning."
"I have to start planning low calorie meals."

VS.

- "Maybe I could bring my lunch to work."
- "I'll think about exercising in the morning."
- "I will try to plan low calorie meals."

Core MI Communication Skills

 Open Questions
 Reflective Listening
 Building Motivation
 Summarizing

Elicit Positive "Change Talk"

Motivational Interviewing

Skills to Use When Hearing Change Talk: Elaborate (Elicit more information) Affirm (Acknowledge specific strengths) Reflect (To gain deeper understanding; reinforce)

Summarize (To highlight the key elements; steps)

Forming Open Questions

- Do you know that smoking increases your risk for chronic illnesses, such as cancer and heart dx?" "What do you know about the health effects of smoking?"
- "Do you want to quit smoking?"
- "How would you like to change your smoking?" "Are you thinking about quitting smoking?" "How do you feel about your smoking right now?

Open Questions to Promote Change

Problem Recognition

• How do you feel about your drinking?

Expression of Concern

• What worries do you have about your health? Intention to Change

• *What would you like to see happen?* **Optimism**

• What makes you feel that **now** is a good time to try something different?

Reflective Listening

- Is a process of...
 - Hearing what the speaker is saying,
 - Making a "guess" at what he/she means,
 - Verbalizing this "guess" in the form of a statement.

Purpose: To check out and convey your understanding of what the client is trying to communicate.

Forming Reflections

For starters...

- It sounds like you are not ready to.....
- It seems that you are having a problem with....
- It sounds like you are feeling
- So you are saying that you are having trouble......

As you improve, you can shorten the reflection....

- You're not ready to....
- You're having a problem with
- You're feeling that.....
- You are having trouble with....

Struggles with Weight...

"I'm worried that if I keep gaining weight, my diabetes will get worse. I'd like to lose at least 20 pounds, but I don't know where to begin. I don't make my own meals, so I have no control over the food I eat. I know I'd have more energy and feel better if I could lose some weight, but nothing seems to work..."

Finding the Positives...

- "You're worried about your weight gain."
- "You feel like your added weight is slowing you down."
- "You've tried to lose weight, and haven't yet found an approach that works for you."
- "You're looking for things you can do to lose weight, given that you're not preparing your own food."

"You'd feel a lot better if you could lose about 20 pounds."

Building Motivation

Motivation can grow as people talk about:

- Values
- Importance
- Confidence

Values

Letting people talk about their values such as:

- Family
- Health

allows people to see possible connections between their values and making a behavior change

Values Identified By VA Clients

Dependability Family **Compassion** Cooperation Honesty **Achievement** Honor Duty Fitness **Self-Esteem** Courage

Knowledge God's Will Patriotism Loving Health Friendship Discipline Independence Other...

Readiness Indicators

Checking Importance and Confidence

Importance How important is it to you to lose weight? On a scale of 0 to 10, with 0 being not important at all & 10 being very important...

0	1	2	3	4	5	6	7	8	9 10
Not at all							Very		

<u>Confidence</u> How confident are you that you could lose weight, if you decided to? On a scale of 0 to 10, with 0 being not confident at all & 10 being very confident?

0	1	2	3	4	5	6	7	8	9 10
Not at all					Somewhat				Very

Importance and Confidence

- Importance: lets you know what may motivate a person to make this behavioral change – barriers may be apparent when you ask 'what would increase the importance'
- Confidence: lets you know what may stand in the way of making this change – or what may help it to happen

Evaluating Importance/Confidence

- *"What made you answer with a (number client gave) and not a zero?"*
- "What would it take for you to move from a (number client gave) to a (slightly higher number)?"



Summarizing

Helps the other person:

- Recall and reflect upon the conversation
- Think of new ideas
- Understand the importance of these issues
- Plan next steps
- Feel more confident

Wrapping Up

MI helps you work with others:

- in a partnership
- to better understand ambivalence to change
- to build motivation toward realistic goals or plans

In Summary...

"To listen well, is as powerful a means of influence as to talk well, and is as essential to all true conversation."

~ Chinese Proverbs

quotes

Resources

www.motivationalinterview.org

Clinical issues Background Special Populations Group Approaches

> The Library Abstracts Bibliography MINUET Newsletter Links

> > Training Upcoming Training MINT Trainers Training Videos (all sites)

MI Books

- Miller, WR & Rollnick, S (1991). Motivational interviewing: Preparing people to change addictive behavior. New York: Guilford Press.
- Miller, WR & Rollnick, S (2002). Motivational interviewing: Preparing people for change (2nd ed.). New York: Guilford Press.
- Arkowitz, H, Westra, HA, Miller, WR, Rollnick, S (Eds.) (2008). Motivational interviewing in the treatment of psychological problems. New York: Guilford Press.

 Rollnick, S, Miller, WR & Butler, CC (2008).
 Motivational interviewing in health care. New York: Guifford Press.

MI Articles

- Britt, E, Hudson, SM, & Blampied, NM. (2004). Motivational interviewing in health care settings. *Patient Education and Counseling*, 53, 147–155.
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- Resnicow, K, et al. (2001). Motivational interviewing in health promotion: It sounds like something is changing. *Health Psychology*, 21, 444–451.