

Accelerating Practice Transformation: Using Motivational Interviewing to Promote Behavior Change

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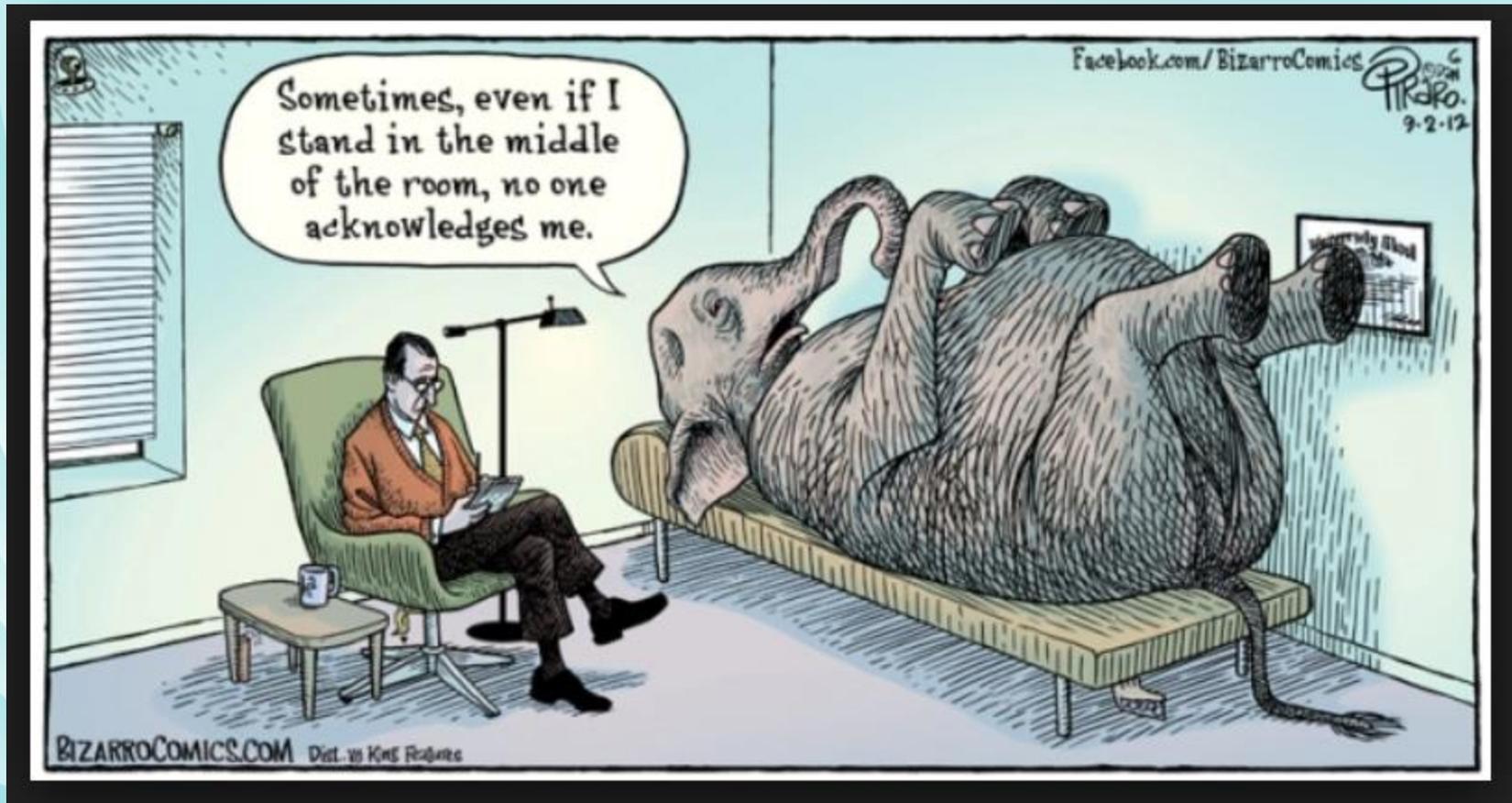
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Learning Objectives

- By the end of the workshop, the learner will:
 - Understand motivational interviewing theory and principles
 - Identify what behaviors may occur throughout the stages of change
 - Describe the tools and strategies used in motivational interviewing

Elephant in the Room



Let's hear from you

- Scenarios or examples of resistance in the practice
- Challenges of when practices are stuck

Working through Ambivalence

- This is natural as people navigate their behavior change journeys.
- It is important to understand and accept your client's ambivalence because it is often the central problem--and lack of motivation can be a manifestation of this ambivalence ([Miller and Rollnick, 1991](#)).
- If you interpret ambivalence as denial or resistance, friction between you and your client tends to occur.

“I see the importance of this but I just don’t have the time for this.”

“My practice tried this before but we didn’t have success with this in the past”

When teams get stuck

- **Just Do It:** this approach works when you know the problem and the answer(s) to the problem. (Lean concept)
- When a practice is stuck in ambivalence, using an MI approach at the beginning of a change effort can facilitate change.

What is Motivational Interviewing?

- An ***evidence-based*** approach to overcoming the ambivalence that keeps many people from making desired changes in their lives, even after being referred to professional treatment.
- Motivational Interviewing is a client-centered counseling style that strategically directs clients to examine, explore, and resolve ambivalence to change certain behaviors.

Motivational Interviewing: Preparing People for Change
William R. Miller and Stephen. Rollnick

Goal of Motivational Interviewing

To elicit self-motivational statements from the client about change and to direct these statements towards change.

The change the client wants to make!

Motivational interviewing is a successful tool to use in practice transformation!

Why Use Motivational Interviewing?

- MI recognizes the importance of the fact that staff are the ones who articulate the need to change and are able to attribute the change to themselves.
- Create a safe space to have an in-depth conversation about change where they can express concerns, challenges, failures, successes, motivations, etc.
- Allows staff to work through conflicting emotions and thoughts about making behavior change. ***This is known as ambivalence.***
- MI utilizes a guiding style in which the colleagues are steering the conversation as opposed to directing or following styles.



Let's dive right in!



The Spirit of Motivational Interviewing

Autonomy: *affirms the client's right & capacity for self-direction*

Collaboration: *counseling involves a counselor-client partnership*

Evocation: *resources & motivation for change reside within the client*

Authority: counselor tells the client what to do

Confrontation: involves overriding the client's impaired perspectives

Education: client is presumed to lack knowledge and/or skills

Trauma Informed Care and MI – What's the Connection?

- Trauma Informed Care
 - Safety
 - Trust
 - Choice
 - Activation
 - Collaboration
- Motivational Interviewing
 - Collaboration
 - Acceptance
 - Absolute Worth
 - Autonomy
 - Compassion
 - Evocation

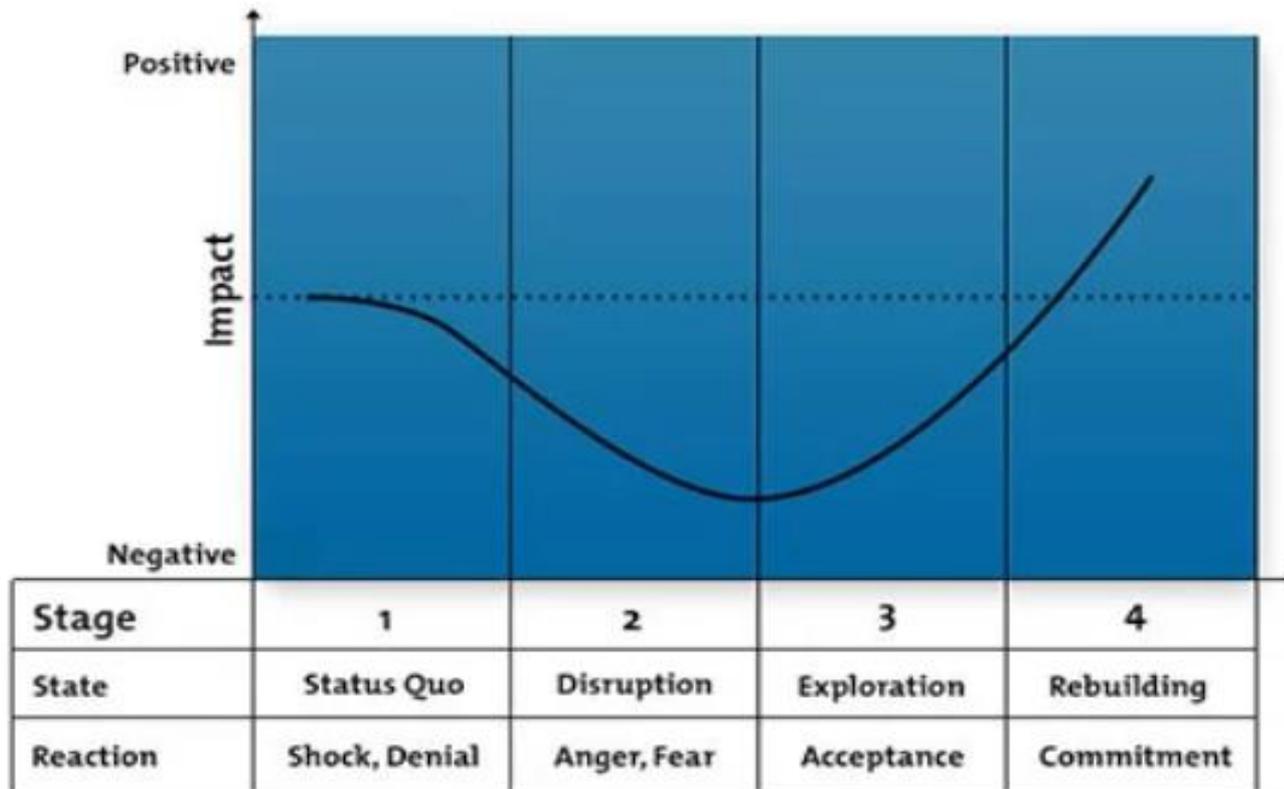
Five Clinical Principles

1. Express Empathy
2. Develop Discrepancy
3. Avoid Argumentation
4. Roll with Resistance
5. Support Self-Efficacy



Stages of Change

Figure 1 – The Change Curve

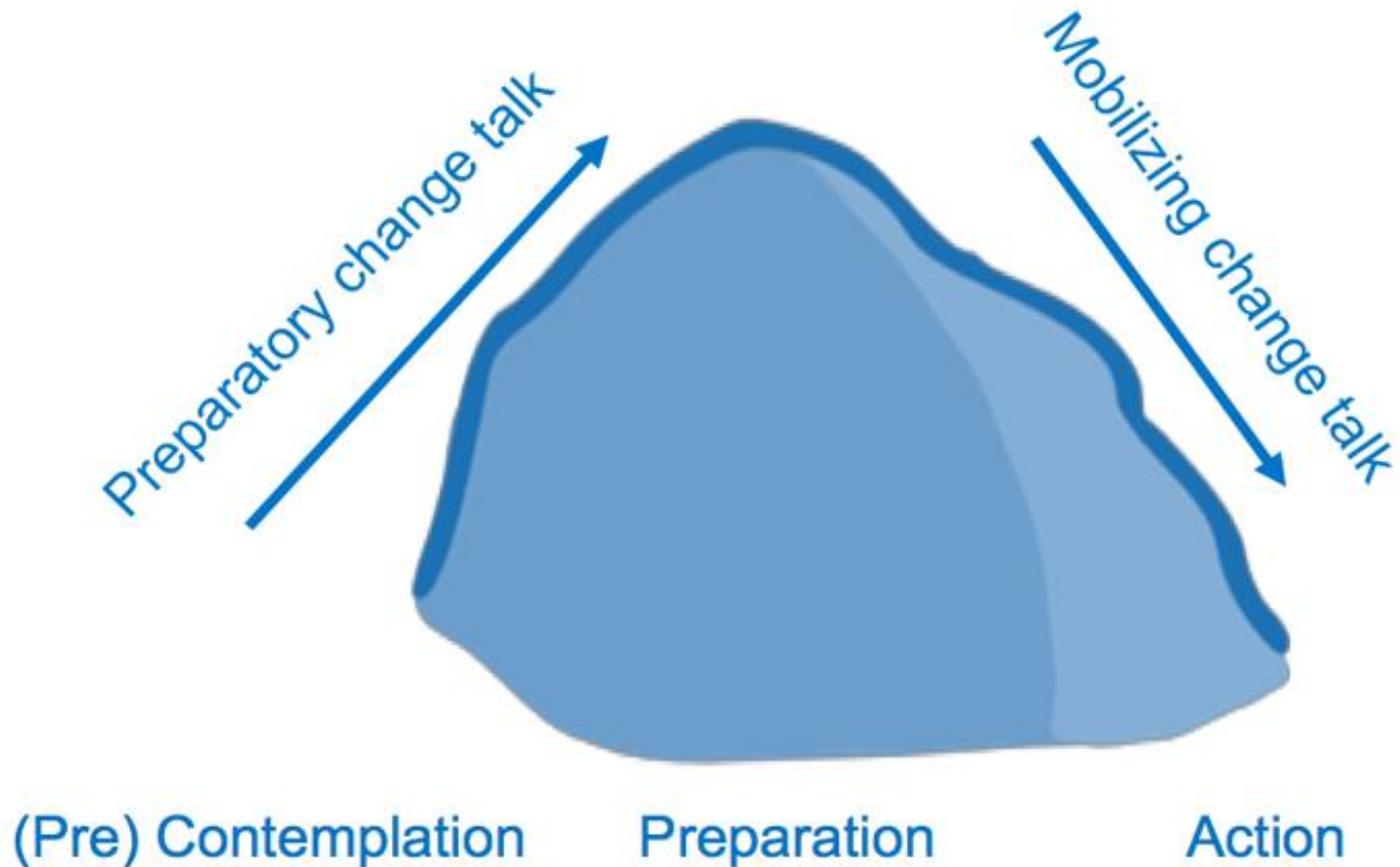


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Support through the Stages of Change (Prochaska & DiClemente)

Stage	What to do
Precontemplation	Increase perception of risks and problems with current behavior; listen; identify barriers; and, focus benefits
Contemplation	Tip the balance – evoke reasons for change and risks of not changing; help with barriers; emotional support
Preparation	Help staff determine best course of action; goal-setting; praising readiness; enlisting support
Action	Reinforce positive behaviors; appropriate resources; provide stimulus control (identify triggers for relapse)
Maintenance	Help identify and use strategies to prevent relapse; emotional support; discuss risks and barriers
Relapse	Acknowledge that returning to a previous stage is a normal and natural; extinguish feelings of failure or inadequacy; remind them of successes

The MI Hill



Micro Skills: Using OARS to move ahead!

- Open-ended questions
- Affirmations
- Reflective listening
- Summaries



Using OARS to move ahead!

- **Open-ended questions**
 - Open-ended questions facilitate dialog; they cannot be answered with a single word or phrase and do not require any particular response. They are a means to solicit additional information in a neutral way.

- **Affirmations**
 - When it is done sincerely, affirming your client supports and promotes self-efficacy. More broadly, your affirmation acknowledges the difficulties the client has experienced. By affirming, you are saying, "I hear; I understand," and validating the client's experiences and feelings. Affirming helps clients feel confident about pulling together their inner resources to take action and change behavior.

Using OARS to move ahead!

- Reflective listening
 - Reflective listening is a challenging skill in which you demonstrate that you have accurately heard and understood a client's communication by restating its meaning. "Reflective listening is a way of checking rather than assuming that you *know* what is meant" (Miller and Rollnick, 1991, p. 75).

- Summaries
 - Summarizing consists of distilling the essence of what a client has expressed and communicating it back. "Summaries reinforce what has been said, show that you have been listening carefully, and prepare the client to move on" (Miller and Rollnick, 1991, p. 78). A summary that links the client's positive and negative feelings about substance use can facilitate an understanding of initial ambivalence and promote the perception of discrepancy.

Demonstration



Additional Resources for Your Toolbox



Gordon's Twelve Roadblocks to Listening

- First 5 categories take away a person's autonomy
- Roadblocks 6-8 point inadequacies and faults
- Messages in 9 & 10 try to make a person feel better or deny there's a problem
- Roadblock 11 tries to solve the problem for the person
- The last one diverts the person or avoids it



Using Ruler – Readiness, Willingness, Importance, and Confidence

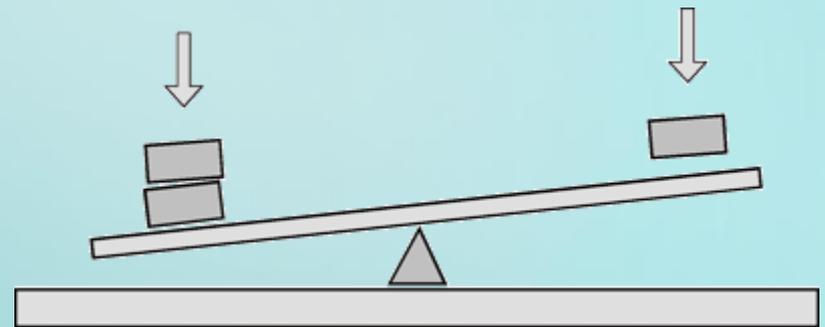
- Why are you at the number you selected and not lower (at zero)?
 - This approach identifies what resources, knowledge, skills, etc. they already have
- What would have to change for you to be higher on this scale (at 10)?
 - This approach identifies the needs of the client



The Decisional Balance: A Review

- Weighing the ‘pros’ and ‘cons’ of behavior
- Elicit and discuss perceived consequences of Action and Inaction
- Write a list of “pros” and “cons” – POWERFUL!
- Develop discrepancy

Note: MI aims to increase the Pros of changing and the Cons of not changing the behavior.



Giving Information and Advice

- Get permission
 - Person asks for advice
 - You ask permission to give advice
- Qualify, honoring autonomy
- Ask – Provide – Ask
- For suggestions, offer several, not one

Mapping out Practice Facilitation

- Motivational interviewing approach is most powerful during the initial phases of working with a practice.



Phase 1: Engaging

- This is the relational foundation
- *Listen* to understand the client's dilemma
- *OARS* core skills – learn these first!
- Values exploration may occur here

***MI is always person-centered in style
but not all person-centered coaching is MI***

Phase 2: Guiding

- The strategic (directional) focus of MI
- Finding a direction (change goal)
- Agenda setting
- Giving information and advice

***MI is a guiding style, but not all guiding is MI
Engaging and Guiding are MI-consistent practice***

A little bit of MI goes a long way...



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Questions?

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The Five Principles of Motivational Interviewing

Motivational interviewing is a technique in which you become a helper in the change process and express acceptance of your client. It builds on Carl Rogers' optimistic and humanistic theories about people's capabilities for exercising free choice and changing through a process of self-actualization. Your role in motivational interviewing is directive, with a goal of eliciting self-motivational statements and behavioral change from the client in addition to creating client discrepancy to enhance motivation for positive change ([Davidson, 1994](#); [Miller and Rollnick, 1991](#)). Essentially, motivational interviewing activates the capability for beneficial change that everyone possesses ([Rollnick and Miller, 1995](#)).

1. Express empathy through reflective listening.

Empathy "is a specifiable and learnable skill for *understanding* another's meaning through the use of reflective listening. It requires sharp attention to each new client statement, and the continual generation of hypotheses as to the underlying meaning" ([Miller and Rollnick, 1991, p. 20](#)).

An empathic style...

- Communicates respect for and acceptance of clients and their feelings
- Encourages a nonjudgmental, collaborative relationship
- Allows you to be a supportive and knowledgeable consultant
- Sincerely compliments rather than denigrates
- Listens rather than tells
- Gently persuades, with the understanding that the decision to change is the client's
- Provides support throughout the recovery process

2. Develop discrepancy between clients' goals or values and their current behavior.

Motivation for change is enhanced when clients perceive discrepancies between their current situation and their hopes for the future. Your task is to help focus your client's attention on how current behavior differs from ideal or desired behavior. Discrepancy is initially highlighted by raising your clients' awareness of the negative personal, familial, or community consequences of a problem behavior and helping them confront the behavior that contributed to the consequences. Although helping a client perceive discrepancy can be difficult, carefully chosen and strategic reflecting can underscore incongruities.

Things to keep in mind to develop discrepancy...

- Developing awareness of consequences helps clients examine their behavior.
- A discrepancy between present behavior and important goals motivates change.
- The client should present the arguments for change.
- Try to the Columbo approach..."help me understand..."

3. Avoid argument and direct confrontation.

You may occasionally be tempted to argue with a client who is unsure about changing or unwilling to change, especially if the client is hostile, defiant, or provocative. However, trying to convince a client that a problem exists or that change is needed could precipitate even more resistance. If you try to prove a point, the client predictably takes the opposite side.

- Arguments are counterproductive.
- Defending breeds defensiveness.
- Resistance is a signal to change strategies.
- Labeling is unnecessary.

4. Roll with resistance - Adjust to client resistance rather than opposing it directly.

Resistance is a legitimate concern for the clinician because it is predictive of poor treatment outcomes and lack of involvement in the therapeutic process. One view of resistance is that the client is behaving defiantly. Another, perhaps more constructive, viewpoint is that resistance is a signal that the client views the situation differently. This requires you to understand your client's perspective and proceed from there. Resistance is a signal to you to change direction or listen more carefully. Resistance actually offers you an opportunity to respond in a new, perhaps surprising, way and to take advantage of the situation without being confrontational.

- Momentum can be used to good advantage.
- Perceptions can be shifted.
- New perspectives are invited but not imposed.
- The client is a valuable resource in finding solutions to problems

5. Support self-efficacy and optimism.

Many clients do not have a well-developed sense of self-efficacy and find it difficult to believe that they can begin or maintain behavioral change. Improving self-efficacy requires eliciting and supporting hope, optimism, and the feasibility of accomplishing change. This requires you to recognize the client's strengths and bring these to the forefront whenever possible. Unless a client believes change is possible, the perceived discrepancy between the desire for change and feelings of hopelessness about accomplishing change is likely to result in rationalizations or denial in order to reduce discomfort. Because self-efficacy is a critical component of behavior change, it is crucial that you as the clinician also believe in your clients' capacity to reach their goals.

- Belief in the possibility of change is an important motivator.
- The client is responsible for choosing and carrying out personal change.
- There is hope in the range of alternative approaches available.