



**SUPPORTIVE HOUSING
PROVIDERS ASSOCIATION**

Working Together, We Can Accomplish Anything

INTEGRATING CORE COMPETENCIES IN PRACTICE

Motivational Interviewing Fundamentals Overview

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Midwest Harm Reduction Institute

Illinois Co-occurring Center for Excellence

Heartland Center for Systems Change

Heartland Alliance Health

Acknowledgement & Gratitude



this is uniquely difficult work – and must be

“This work hurts on a core fundamental level” Dr Joshua Bamberger

Heartland Center for Systems Change

Integrating Our 4 Core Competencies in Practice

- ❖ PERSON CENTERED
- ❖ TRAUMA & RESILIENCE AWARENESS
- ❖ HARM REDUCTION
- ❖ MOTIVATIONAL INTERVIEWING

Interrelated, intuitively flow from each other and are integrated –
Pull on one and the rest follow

one thought system

Not limited to work – truly life skills and approaches

What else do we need to be successful?

Our Essential Abilities

- ❖ **Self reflection:** self-awareness & sensitivity to those around us
 - ❖ **Empathy:** being present & caring; with admiration
 - ❖ **Welcome feedback** & input on how we're doing; adjust

Within ...

- **Work Culture:** **mutual** *respect*, **mutual** *trust*, **mutual** *accountability*, **mutual** *ownership*
- **Personal Qualities:** *personal integrity*; act with *intelligence* (the ability to think through a process, connect dots with understanding in a progressive positive way, present a pathway toward a desired outcome, and to make adjustments as new information is received – to articulate this); and participate with an *active level of energy*.

Motivational Interviewing can be ...

Incredibly detailed, intricate, multi-layered & complex and entail a great amount of practice to become proficient with

- *MINT certified*

And we can appreciate & use it also as a simple conversational framework to our everyday interactions

Practice is key

Some homework from today



Knowledge & Confidence

Where are you with your understanding & practice of MI?

- 1 – new to MI
- 2 – have a few ideas about MI
- 3 – can explain OARS, SOC, DARNCAT
- 4 – well integrated in my daily practice
- 5 – MINT certified and/or can mentor & train on

Our objectives are ...

Being able to identify, **describe**, and **make use of**

- ❖ What **Motivational Interviewing** is
- ❖ The **Spirit** of Motivational Interviewing
- ❖ The **4 Languages**
- ❖ The **4 Processes**
- ❖ Primary Tools – **OARS**, SOC
- ❖ Avoiding our **Righting Reflex** & Rolling with **Resistance**

... conversationally

What is

Motivational Interviewing

Motivational Interviewing (MI) is an evidence-based treatment that addresses **ambivalence** to change. MI is a **conversational** approach designed to help people with the following:

- Center of Evidence-Based Practices at Case Western Reserve University

Motivational Interviewing

- **Discover their own interest** in considering and/or making a change in their life
 - (e.g., diet, exercise, gaining employment, going to school, acquire a car, managing symptoms of physical or mental illness, reducing and eliminating the use of alcohol, tobacco, and other drugs)
- **Express in their own words** their desire for change (i.e., "change-talk")
- **Examine their ambivalence** about the change
- **Plan** for and begin *the process of change*
- **Elicit and strengthen change-talk**
- Enhance their **confidence** in taking action and noticing that even small, incremental changes are important
- Strengthen their **commitment** to change

- Center of Evidence-Based Practices at Case Western Reserve University

MI Basic Basics

- Motivational interviewing is *not* trying to talk someone into doing something they don't want to do
- Motivational interviewing *is* supporting someone in **sorting through** what they want to do
- It's to assist with finding **clarity** (inner voice/internal guide)
- It's to encourage **courage, exploration, and attempts** at new ways (brave space)
- Person centered and partnered collaboration are essential

Keeping ourselves true ...



... for all of us

Think about a behavior, habit, practice, attitude you've wanted to *change*.

- When in your life did first think this might be a *problem*?
- At what age did you *first think about changing* the behavior?
- When did you make your *first attempt/effort to change* the behavior? (or maybe you haven't)
- At what point did you successfully make *a permanent change*? Or... have you?
- Any *'slips'*?

Keeping ourselves

true

CHANGE IS

HARD

Why is change *so* difficult?

- ❖ The *familiar* is preferable to the unknown
- ❖ Brain & neural pathways 'programming'
- ❖ Behaviors *always* serve a purpose



Why is change **so** difficult?

- Attachment & loss
- Past failures or disappointments color perception about change
- Fear of 'success' or wellness
- Lowered 'recovery capital'
- Motivation is fluctuating and variable
- Energy is transient and finite
- **Ambivalence is normal**-**NOT** pathological
- Hopelessness extinguishes motivation



So... how **do** we help people change???



First

THE *Spirit* OF
MOTIVATIONAL INTERVIEWING

the grounding context for MI
application & practice

Self reflection exercise ...

- Imagine that you had to tell someone **your deepest secrets**.
- What **qualities** would you want that person to have?
- Which of these **qualities** are **easy for you** to express?
- Which are **difficult**?

The person asks themselves...

- Do I feel **respected** by this practitioner?
- Does they **listen** to and **understand** me?
- Do I **trust** this person?
- Do I **have a say** in what happens in this **consultation**?
- Am I being offered **options** vs. one-size-fits-all approach?
- Does they **negotiate** rather than dictate to me?

- How would participants describe you?
- How would your co-workers describe you?
- How would your supervisor describe you?
- How would friends & family describe you?
- How would you describe you?
- How do you want to be described?
- How do these descriptions impact the work you do?

Practitioner **empathy** may be the **most important nonspecific factor** influencing treatment outcome, and it is **absolutely critical** to the technically correct employment of motivational interviewing...

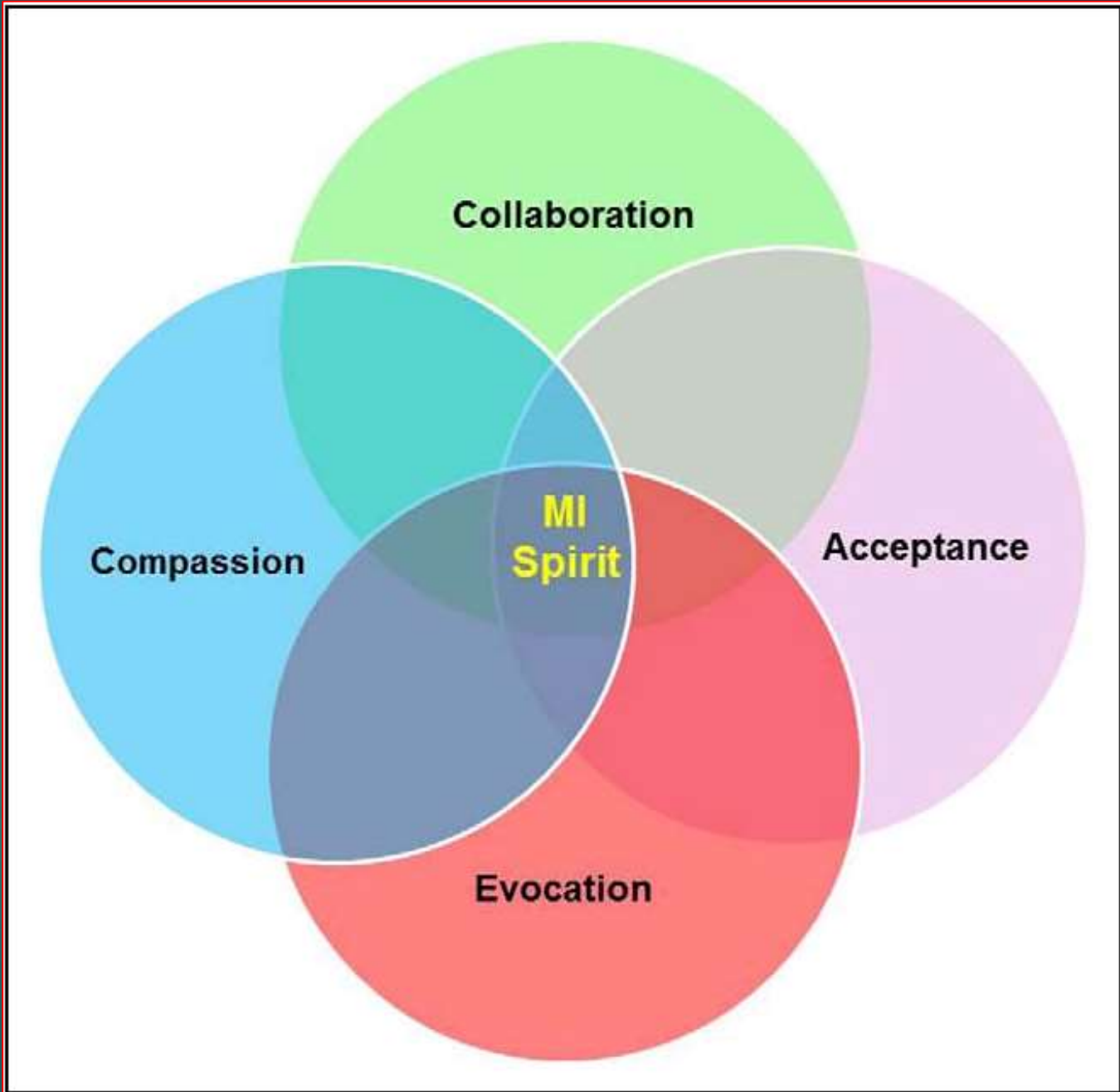
Wallace, 2005, p. 144

Motivational Interviewing: Spirit vs. Technique

We believe each person possesses a powerful potential for change.
The counselor's task is to release that potential and to facilitate the natural change processes already inherent in the individual.

(Miller & Rollnick, 2002, p. 41)

The *Spirit* of Motivational Interviewing



THE SPIRIT OF MI

PARTNERSHIP

An active collaboration between experts

Let go of the idea that you are supposed to have and provide all the right answers

Dancing not wrestling – someone is still leading the dance, without tripping or stepping on toes

ACCEPTANCE

Acceptance facilitates change.

Absolute worth – prizing the inherent worth and potential of every human being

Accurate empathy - to understand the life before you, to see the world through this person's eyes

Autonomy support – honoring and respecting the person's irrevocable right and capacity of self-direction

Affirmation – to seek and acknowledge the person's strengths and efforts

COMPASSION

Actively promote the other's welfare

Give priority to the other's needs

To work with a spirit of compassion is to have your heart in the right place so that the trust you engender will be deserved.

EVOCAION

People already have within them much of what is needed, and your task is to evoke it, to call it forth.

Strength-based rather than deficit focused

The Spirit of Motivational Interviewing

(Miller & Rollnick, 2002)

Motivational Interviewing

- Collaboration
- Evocation
- Autonomy
- “Dancing”

Opposite Approach

- Confrontation
- Education
- Authority
- “Wrestling”

Predictable Effects of **Confrontation**

- **Resistance:** Non-cooperation
- **Reversal:** Eliciting the opposite in ambivalence
- **Reactance:** Assertion of autonomy

So, our challenge again is ...

**in our building relationship
& establishing safe space**

Staff: **YOU!**

You are uniquely & profoundly
the vital tool for doing this
work.

*The importance of this, of **YOU**
cannot be overstated.*



- **The purpose of us – our primary function:
building a relationship
creating safe space**

THE *KEY INGREDIENT* is the quality of our relationships

**The most valued ability & skill then is that of
engaging, building, sustaining and nurturing
relationships in which people thrive.**

What do we want to accomplish with each other?

This determines that.

- * Presence of Empathy
- * Building Trust

**Could a greater miracle take place
than for us to look through each other's eyes
for an instant?**

Henry David Thoreau

Empathy that Heals ... / see you

- Empathy is:

- the ability to **accurately** understand the person's meaning & experience
- the ability to reflect that **accurate understanding** back to the person, verbally & non-verbally

- Being wholly present

- honoring the occasion to be present
- with admiration & respect
- with no agenda, no fixing, no changing, filtering judgment
- sharing in the feelings & thoughts of that moment

Empathy

- ❖ **Being on the same side of the chess board**
- ❖ **Walk a mile in their shoes**
- ❖ **See & feel life through their eyes (their brain)**
 - **appreciate neurodiversity**

Building Trust

- **Safety in your presence** – your aura holds no judgment, expectation, anxiety. With you people experience: Respect & admiration. Care & invitation.
 - Remember ... 3 aspects to meeting someone where they are
- **Provide a tangible response to a need** – give something wanted, valued
- **Consistency, constancy**

Building Trust

- Patience
- Distrust is learned and to be respected
- Own your mistakes, acknowledge them
- Understand there is a power differential
- Again, being on the same side of the chess board
- Setting thoughtful, inclusive, fair, consistent & mutual expectations with our participants

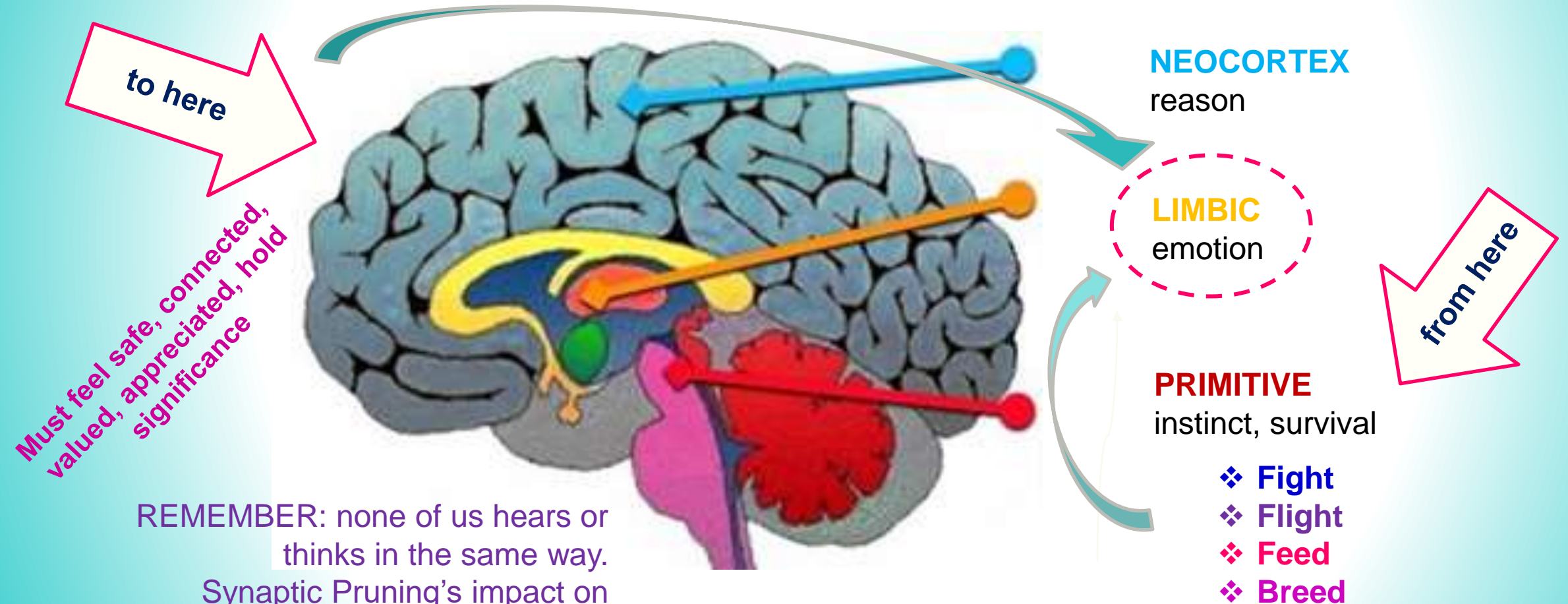
Why so important?

TRAUMA AWARENESS & CARE: what happens inside of us

Between **feeling a threat**, rather than reactive **defense response**, **build in a pause**

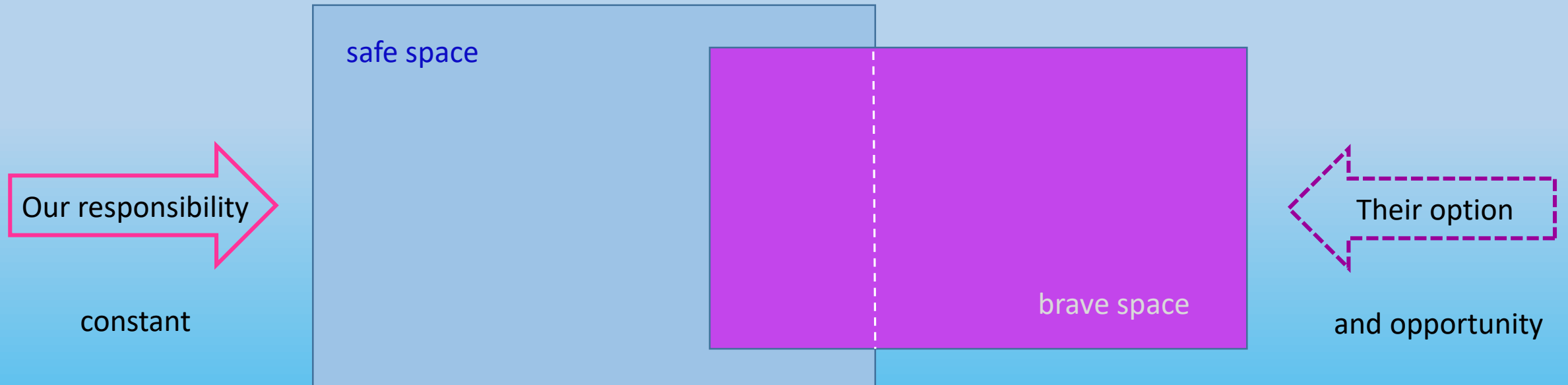
For the prefrontal cortex thinking brain to begin moderating the primitive brain reactivity

❖ **Bring the prefrontal cortex thinking “back online”**



REMEMBER: none of us hears or thinks in the same way.
Synaptic Pruning's impact on cognitive dexterity.
And mental illness, substance use

safe space brave space fluidity: the growth zone



Safe space fosters & supports the **courage** to try brave new ways and appreciates fear & the need to be defensive

How does our relationship building reflect and uphold this?

That space may enable a person to

- Examine, *without fear of censure*, what's working and not working in their lives.
- Consider the possibilities and *options for change* available to them
- *Take the risk to imagine* a different, better life
- Develop *meaningful goals* designed to achieve a life worth living.
- Take the *first steps*, no matter how small, towards change and recovery

Create a safe space



Building safe space requires



Critical to M9

Activates different neural pathways & NTs

Building safe space requires

KINDNESS also as UNDERSTANDING TRAUMA

- ❖ POWER DYNAMICS
- ❖ THE PROCESS OF HEALING
- ❖ TRAUMA ARMOR & DEFENSES

Learning how to really listen...

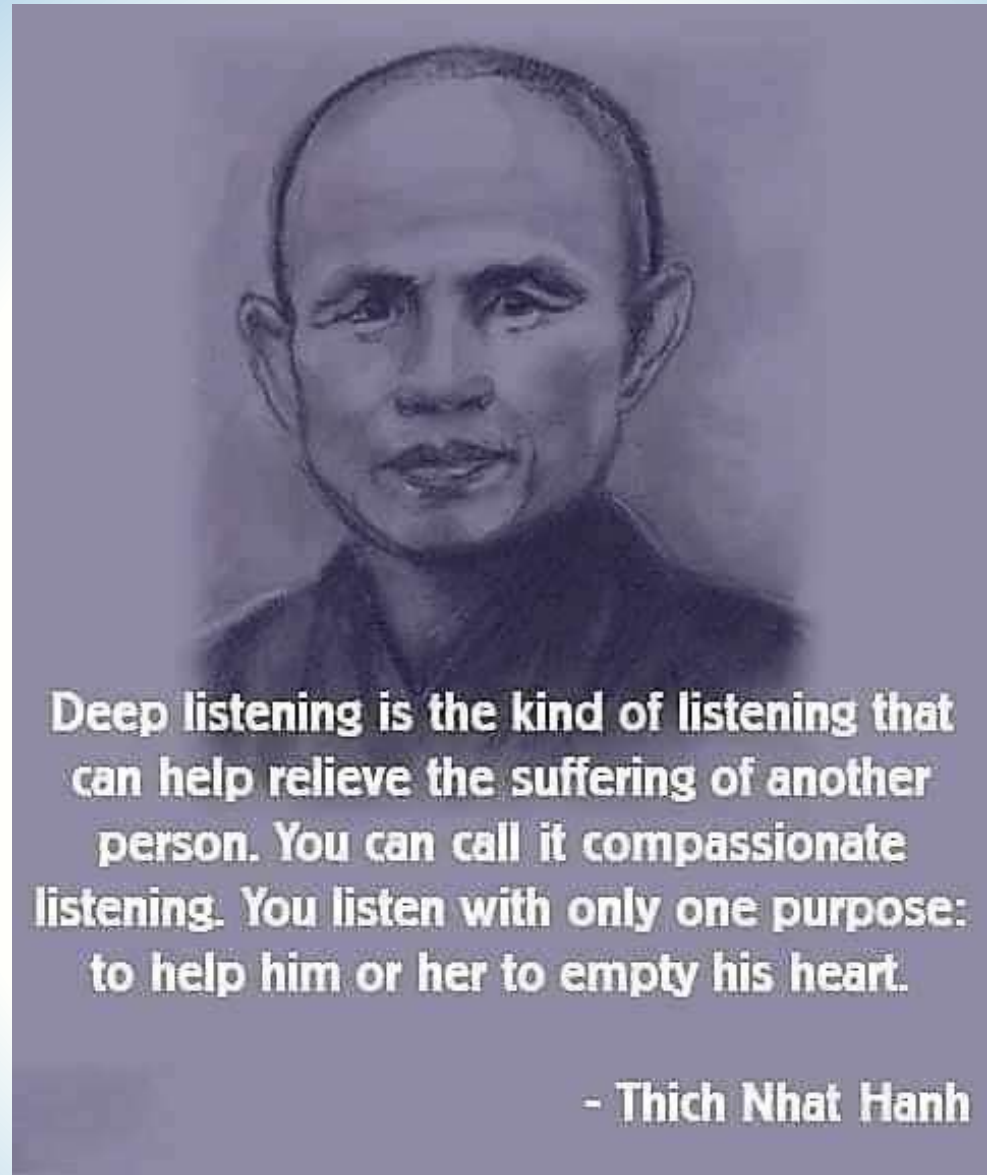
Knowing what they mean.
Taking that in.



Not prepping our
response back.



**being listened to is so
close to being loved that
most people cannot tell the
difference.**



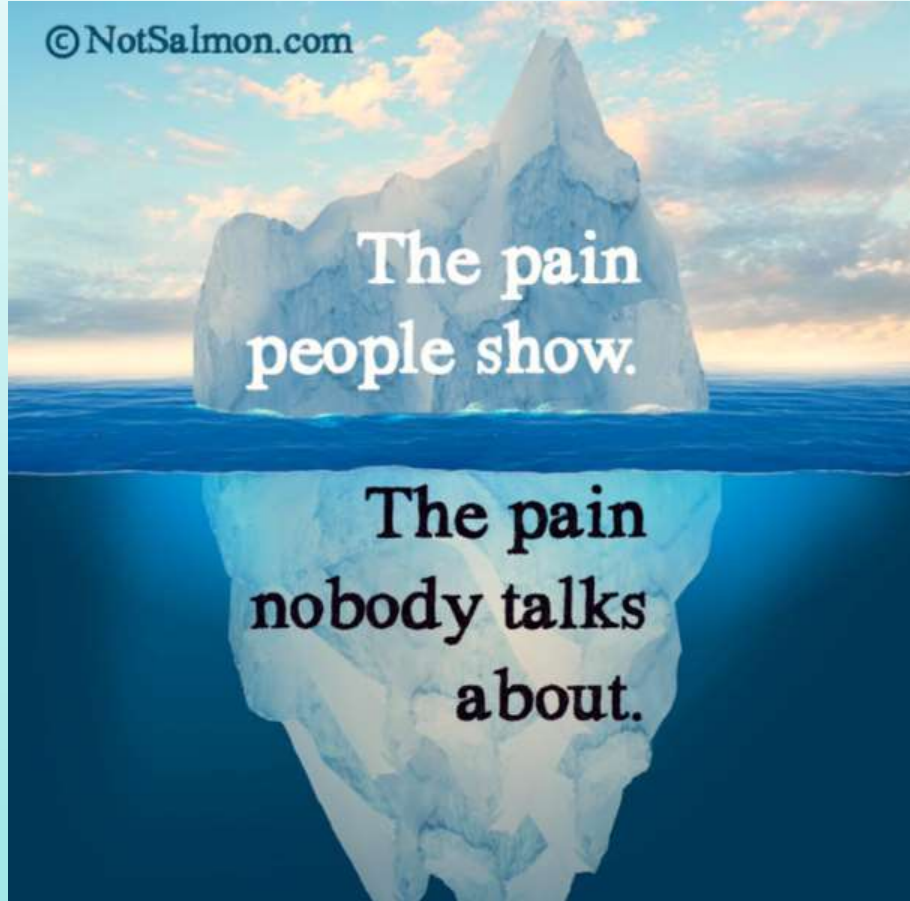
listening
inner voice to inner voice

to really listen...

LIVED 'GOALS'
survival

PROTECTED
GOALS / DREAMS

inner voice
internal guide



train our sensitivity & awareness to all sensory signals, including energy & aura

What Good Listening is *Not*



Remember to always *First* ... Listen

Before the talking begins:

Deep breath. Clear thoughts. Center. Just listen.

Then ...

- What is the person saying?
- What do you hear?
- What stands out for you? Why?
- What do you feel?
- Where do your thoughts go?
- What is the point of this communication?
- When do you/did you begin to think about your response?
- Is your primary objective to understand?
- **Which side of the chess board are you on?**
- How do you know the answers to these questions?

Listening (love)

- Understand words, meaning to this person, all their feelings (enriched) – stop there
- Able to repeat back in a way that affirms 100% understanding & empathy
- Listening does not equal fixing
- Fixing is our affirming our ability as fixers
 - And our discomfort of not fixing
 - Being in sacred spaces (even when one is using, high, intoxicated) and not have to fix it
- Listening = full and pure presence
- No judgments
- Hearing (partially) and wanting to fix (reply) is a judgment
- **Responding** is a separate step – (compassion being the action part of empathy) how might I assist? What would you like to have happen next? (OARS) When unable to tell me or limited in what can be shared, how would this person want me to support them?

Want to be a better listener?

DO:

- Tune in to what the other person is saying.
- Stay curious.
- Make understanding a goal.
- Confirm what you heard with the speaker to see if you have it right.
- Repair if you interrupt, get distracted, become defensive, or misunderstand.
- Ask clarifying questions.
- Inhabit the role of a passenger on the speaker's train of thought. Follow their journey, at their pace.
- Be aware of how much time you spend talking in the conversation.

DON'T:

- ✗ Spend your time planning what you are going to say next/ waiting for your turn to speak.
- ✗ Try to "fix" things or offer unsolicited advice.
- ✗ Split your focus between the speaker and something else.
- ✗ Try to finish or anticipate what the speaker is saying.
- ✗ Take what the other person is saying so personally that you become defensive and unable to hear their side.
- ✗ Completely shut down your own reaction to what the other person is saying.

The Gottman Institute

WORDS ARE SINGULARLY THE MOST POWERFUL FORCE AVAILABLE TO HUMANITY.

WE CAN **CHOOSE** TO USE THIS FORCE **CONSTRUCTIVELY** WITH WORDS OF ENCOURAGEMENT, OR **DESTRUCTIVELY** USING WORDS OF DESPAIR.

WORDS HAVE **ENERGY AND POWER** WITH THE ABILITY TO HELP, TO HEAL, TO HINDER, TO HURT, TO HARM, TO HUMILIATE AND TO HUMBLE.

– YEHUDA BERG

*Also the **WORDS** of our body language
and to **FEEL** words*

A cautionary point for consideration ...

Parentalism

❖ In **Motivational Interviewing** ...

- Think we know what's best
- Push the person to change to what we think they need to be doing
- Tell them what to do
- Listening to our own brain chatter instead of inner voice – ours and theirs
- Other indicators?

To know how to guide another
First know our own change process.

Part of authenticity, credibility,
knowledge. Walk the Talk.

Otherwise we get lost. Have little
credibility. Why follow you?



The heart of motivational interviewing is its spirit

- The skills are a **map**
- The map doesn't get you there
- The **relationship** is the journey

The Spirit of MI is embedded within ...

- a **PERSON CENTERED** foundation
- with **TRAUMA & RESILIENCE AWARENESS**
 - constantly establishing safe space

What are my judgments?
What goals do I impose?



Person Centered

- Every one has within them an inner voice, an internal guide, an internal compass
- Every **recovery encounter** reflects *“something within me came to life when I met this person”*
- **Motivational Interviewing** as **listening** for and to that inner voice



Be curious, not judgmental

–Walt Whitman

Got it?
Ready?
Let's go!



CORE COMPETENCY

Motivational Interviewing

**our conversational thread
of listening for an inner voice**

**Midwest Harm Reduction Institute
Heartland Center for Systems Change**

Why do Motivational Interviewing?

To listen for **INNER VOICE** guidance
AND connect to use of **POWER**

Why do Motivational Interviewing?

- No one size fits all in life
- Person centered = person informs us
- Highly individualized
- Inner voice replaced, buried, forgotten, traumatized
- Find one's own way within who they are
- How best to provide conditions for this to occur & succeed
- No goal of our own in mind – they find their goal
- Encouraging, facilitating a person 'thinking out loud'

A great everyday skill set to have and become adept with. Truly a life skill.

Eight Stages in Learning MI

(Miller & Moyers, 2006)



1. Getting the **spirit** of MI
2. Using client-centered **skills** (OARS)
3. **Recognizing** change talk
4. **Eliciting** and **reinforcing** change talk
5. Rolling with **resistance**
6. Developing a **change plan**
7. Consolidating client **commitment**
8. **Integrating** MI with other intervention methods

MOTIVATIONAL INTERVIEWING

- **SPIRIT of MI**
 - Partnership, Acceptance, Compassion, Evoking (PACE)
 - Engagement & Empathy
- **3 Styles**
 - Following, Guiding, Directing
- **3 Communication Skills**
 - Asking, Informing, Listening
- **4 PROCESSES**
 - Engaging, Focusing, Evoking, Planning
- **4 TYPES OF LANGUAGE**
 - Resistance/Discord, Change, Sustain, Commitment
- Temptations & Traps
- Righting Reflex
- **OARS**
 - Reflections:
 - Simple
 - Complex (5)
- **STAGES OF CHANGE (SOC)**
 - SOC and 4 Processes
 - Recognizing and Responding to Stages
- **CHANGE TALK**
 - **DARN/CAT**
 - Resistance
 - Readiness Ruler

MOTIVATIONAL INTERVIEWING

- **SPIRIT of MI**

- Partnership, Acceptance, Compassion, Evoking (PACE)
- Engagement & Empathy

- **3 Styles**

- Following, Guiding, Directing

- **3 Communication Skills**

- Asking, Informing, Listening

- **4 Processes**

- Engaging, Focusing, Evoking, Planning
- *Premature focus*

- **4 Types of Language**

- Resistance/Discord, Change, Sustain, Commitment

- **Temptations & Traps**

- **Righting Reflex**



- **OARS**

Reflections:

- Simple
- Complex (5)

- **STAGES OF CHANGE (SOC)**

SOC and 4 Processes

Recognizing and Responding to Stages

- **CHANGE TALK**

- **DARN/CAT**

Resistance

Readiness Ruler

MOTIVATIONAL INTERVIEWING

❖ LISTENING

❖ ASKING THE BEST QUESTIONS

❖ GIVING REFLECTED HELPFUL FEEDBACK

Training ourselves to do these well

Motivation & The Change Process

Clients are not “unmotivated.” (“non-compliant” or “tx resistant”)

They are motivated to engage in behaviors which

- others consider harmful and problematic,
- have been useful on some level as coping – goal achieving strategies,
- or are not ready to begin behaviors which others think would be helpful.
- may have multiple and conflicting goals.
- may have cognitive and emotional changes related to trauma, illness, life conditions, drug use, aging.

The proper question is not,

“Why isn’t this person motivated?”

but rather,

“For what is this person motivated?”

Individuals Change When They...

- Become interested and concerned about the need for change
- Become convinced that the change is *in their best interest** and decide the *benefit* is greater than the cost
- Organize a plan of action & commit to it
- Take the steps necessary to make & sustain the change
- *Have a need to change (importance) + ability (confidence) to change*

“When people are ready to, they change. They never do it before then, and sometimes they die before they get around to it. You can't make them change if they don't want to, just like when they do want to, you can't stop them.”

- Andy Warhol

Remember

Readiness

In general people cannot be ready to change *until* they perceive **BOTH**:

- that they *want* to (**importance**)
- and are *able* to do so (**confidence**)



Readiness Ruler

- **Willing**
 - importance
- **Able**
 - confidence

Willing



Importance + Confidence Rulers

*On a scale of 1-10, how confident are you that you could
..... if you chose to?*

Where?



“Not Important”

1

**“Not
Confident”**

.....

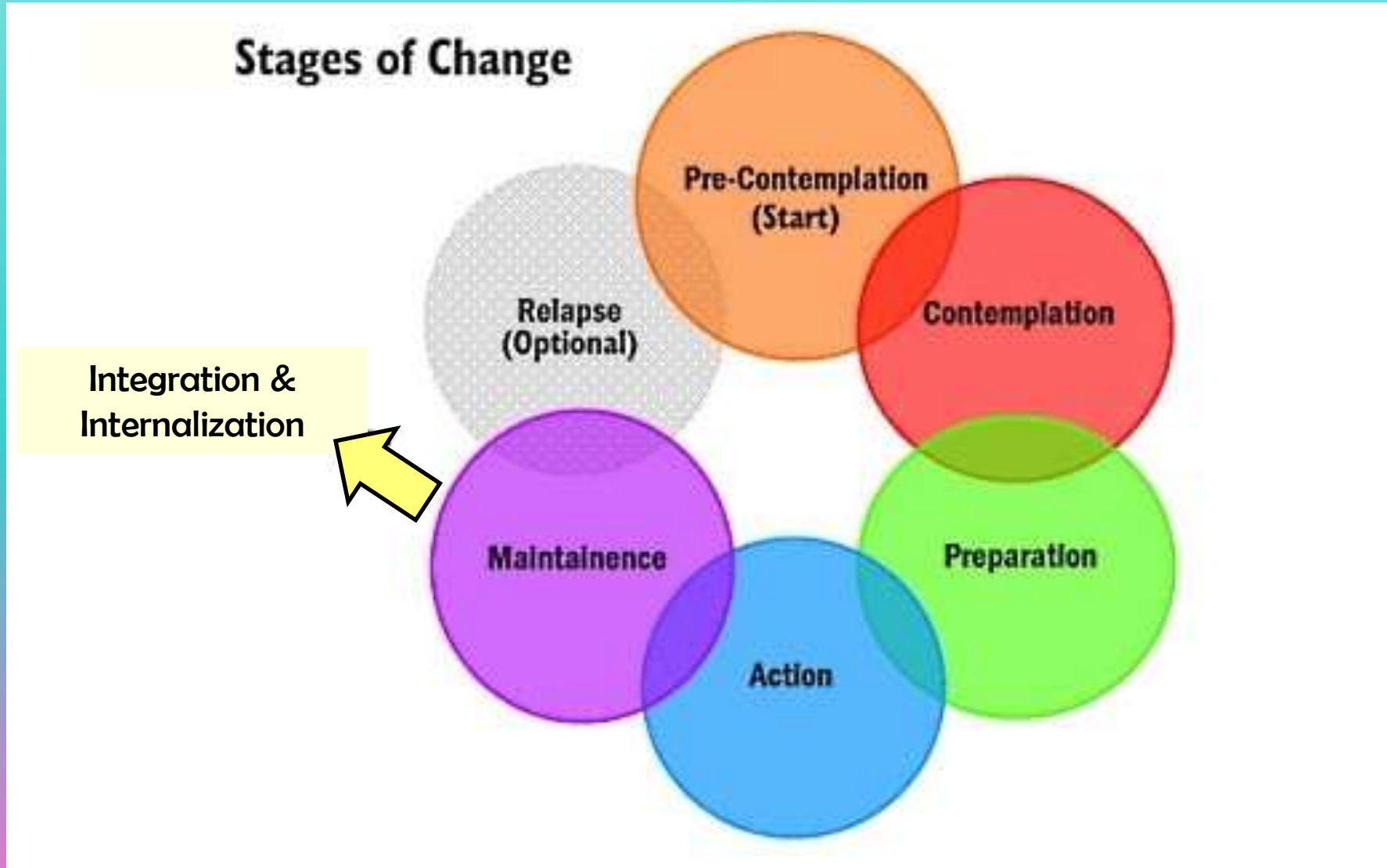
10

**“Very
Confident”**

“Very Important”

- What makes you that confident?*
- What keeps you at a xx and not a 1?*
- What would it take to raise your score to a xx?*
- How can I help you get there?*

MOTIVATIONAL INTERVIEWING FUNDAMENTALS



'stages of change'

(*Changing for Good*, Prochaska and DiClemente, 1995)

- ❖ Central premise: **most** people approach significant behavioral change in **stages, not all at once**

Further developed by Miller and Rollnick (*Motivational Interviewing: Preparing People for Change*) to assist helpers with encouraging and building motivation for change in persons served.



Stages of Change

- **Precontemplation** *I don't have a problem*
- **Contemplation** *maybe this is a bit of a problem but...*
- **Preparation** *I need to do something about this problem*
- **Action** *I'm doing it!*
- **Maintenance** *I'm still doing it!*
- **Remission** *I have a life I'm achieving my dreams with!*



MI is not based on stages of change. Stages of Change are a tool to map out common experiences and behaviors on the path toward and around change, which helps inform us in terms of how we use MI to elicit change.

Therefore, we try to **match our MI interventions to the observed Stage of Change** because interventions are most effective when they are appropriately timed and delivered.

Doing the right thing
at the right time

Coordinating SOC Map with MI

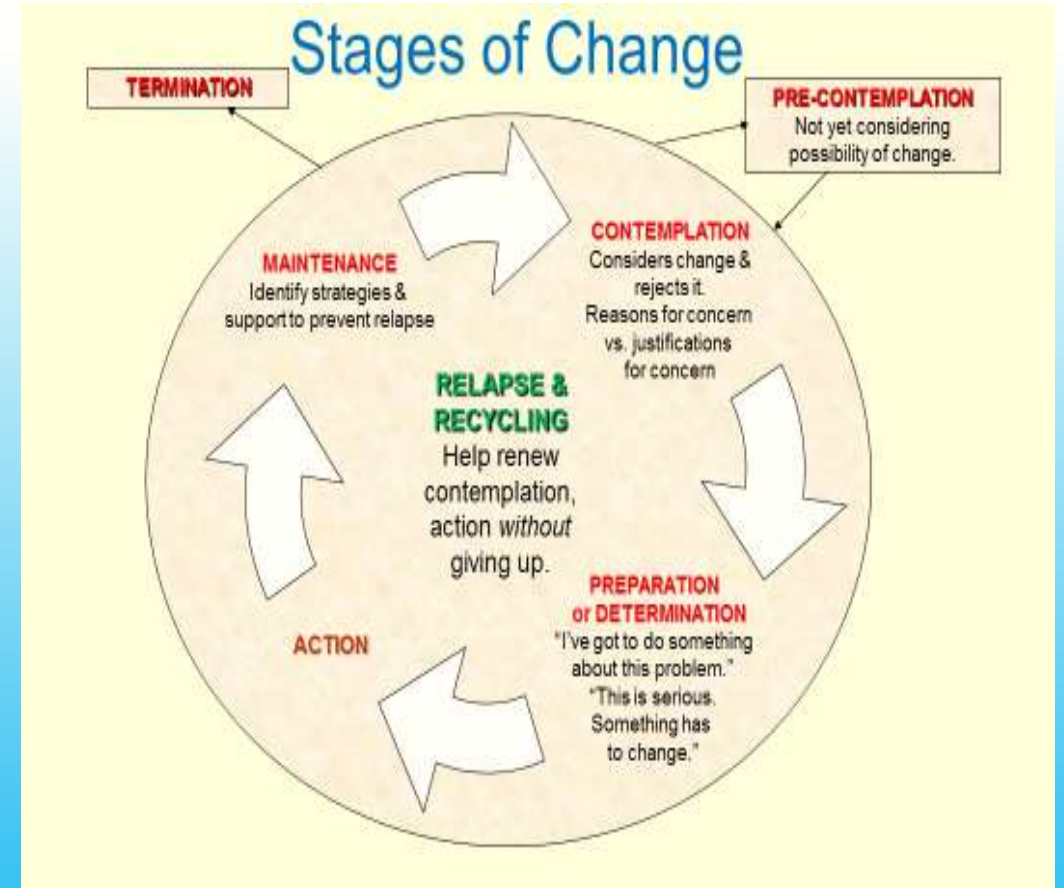
- Imperative to **accurately assess** stage of change so you don't get ahead of participant
- **Match** your interventions to their **current** stage of change
- Their response will tell you if you got it right or wrong

SOC Guide

STAGES OF CHANGE & HELPER TASKS

PRECONTEMPLATION	Gently raise doubt - Increase the participant's perception of risks and problems with current behavior
CONTEMPLATION	Tip the decisional balance - Evoke reasons for change, risks of not changing; Strengthen self-efficacy for behavior change
PREPARATION	Help to determine the best course of action to take in seeking change; Develop a plan
ACTION	Help implement the plan; Use skills; Problem solve; Support self-efficacy
MAINTENANCE	Help identify and use strategies to prevent lapse/relapse; Resolve associated problems
RELAPSE*	Help recycle through the stages of contemplation, preparation, and action, without becoming stuck or demoralized because of relapse

*Not a stage but part of the process of change, recycling into one of the other stages



“It's not that some people have willpower and some don't... It's that some people are ready to change and others are not.”

~James Gordon



"People don't resist change. They resist
being changed"

~Peter Senge

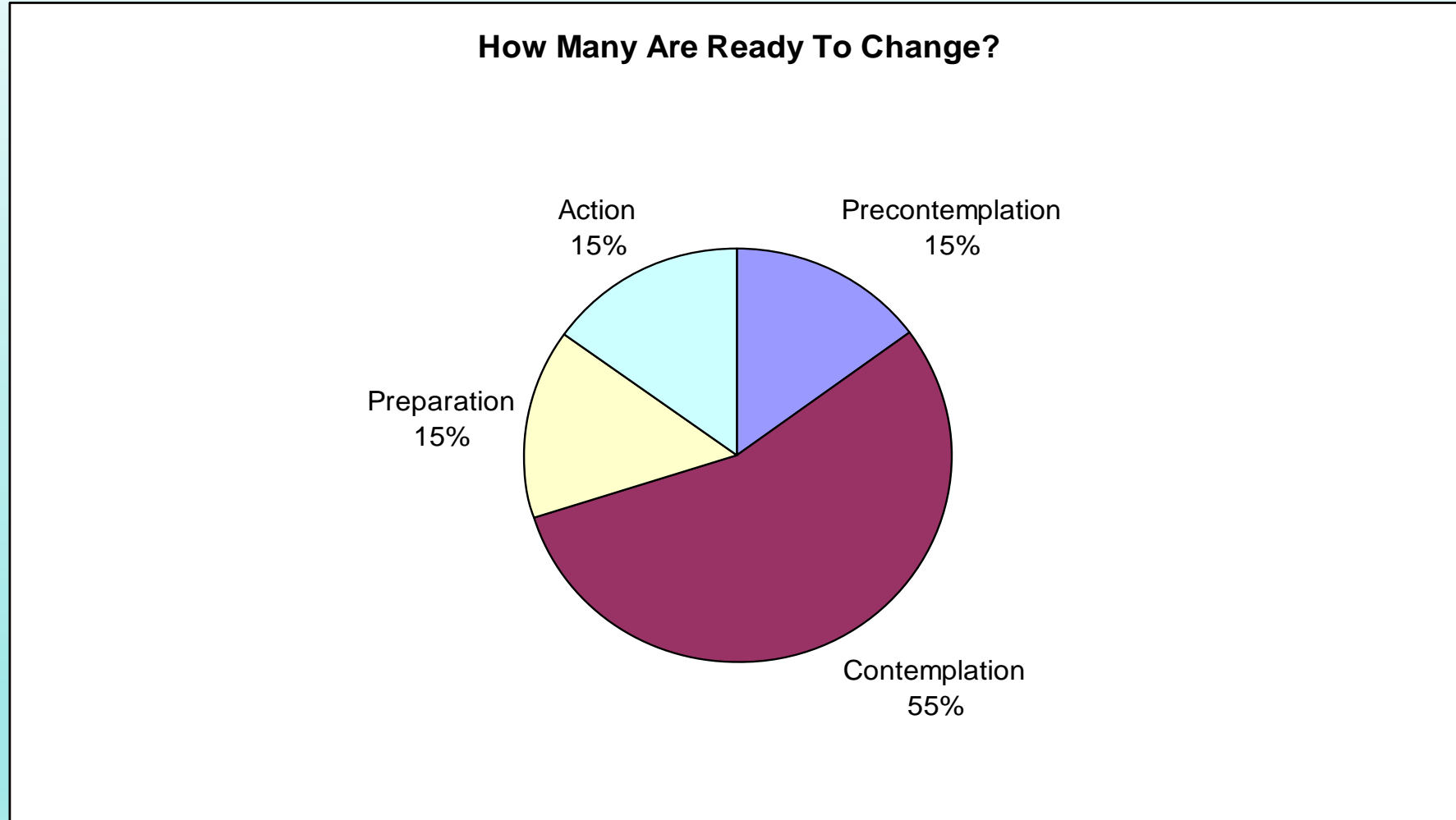


“And the time came when the risk to remain tight
in a bud was more painful than the risk it took to
blossom.”

~Anais Nin



How Many Are Ready To Change?



MOTIVATIONAL INTERVIEWING

4 Languages

Listening for Resistance & Change Talk

4 TYPES OF LANGUAGE

- **Resistance / Discord Talk**
 - Emotionally Based, Relationship Oriented
- **Sustain Talk**
 - The No Change Side of Ambivalence
- **Change Talk**
 - The Change Side of Ambivalence
- **Commitment Talk**
 - Resolve & Readiness

Resistance

aka “being difficult” or “in denial” – *our* judgments



The client’s way of communicating that they and the practitioner are at different places.

Recognize power struggles push and pull force



resistance & discord = you as the practitioner are going too fast, too soon
You're missing something.

Be on the same side of the chess board – see it through their eyes and experience

Roll with Resistance (Discord)

- Resistance is *caused by counselor behavior*
- Avoid arguing for change
- Resistance is not directly opposed or challenged
- Resistance is a signal to respond differently
- New perspectives are invited but not imposed
- The participant is the primary resource in finding solutions
- **It's how you respond to resistance that makes a difference**, and that distinguishes MI from other approaches

remember parentalism

What is the Righting Reflex?

- The reflex that people have to correct someone or something
- To give unsolicited advice or direction
- Assuming that the other person does not have their own solutions and needs to be given guidance
- Needing to fix it

Overriding a person's inner voice
Attempting to replace theirs with ours

The Righting Reflex Reveals Our Belief ...

- This person should change
- Now is the time to change
- A tough/honest approach is best
- Person should follow my expert advice
- If person doesn't change, session failed
- If a person isn't motivated, there's nothing we can do

The importance of suspending our judgements and opinions
– just listen and truly get what's being said and felt

Common Reactions to 'Righting Reflex'

- Angry, agitated
- Oppositional
- Discounting
- Defensive
- Justifying
- Not understood
- Not heard
- Procrastinate
- Afraid
- Helpless, overwhelmed
- Ashamed
- Trapped
- Disengaged
- Not come back – avoid
- Uncomfortable



If you suggest a step towards change and you get **'push back'** you can always:

- **Apologize** for moving forward too quickly
- **Reflect and normalize** member's ambivalence or resistance
- Ask more **open-ended** questions about the change
- **Reassure** people that they are in charge of how quickly or slowly the change process occurs
- Move to a **different topic**

And remember...



MBK Associates / HCSC

MOTIVATIONAL INTERVIEWING

Change Talk

DARN CAT

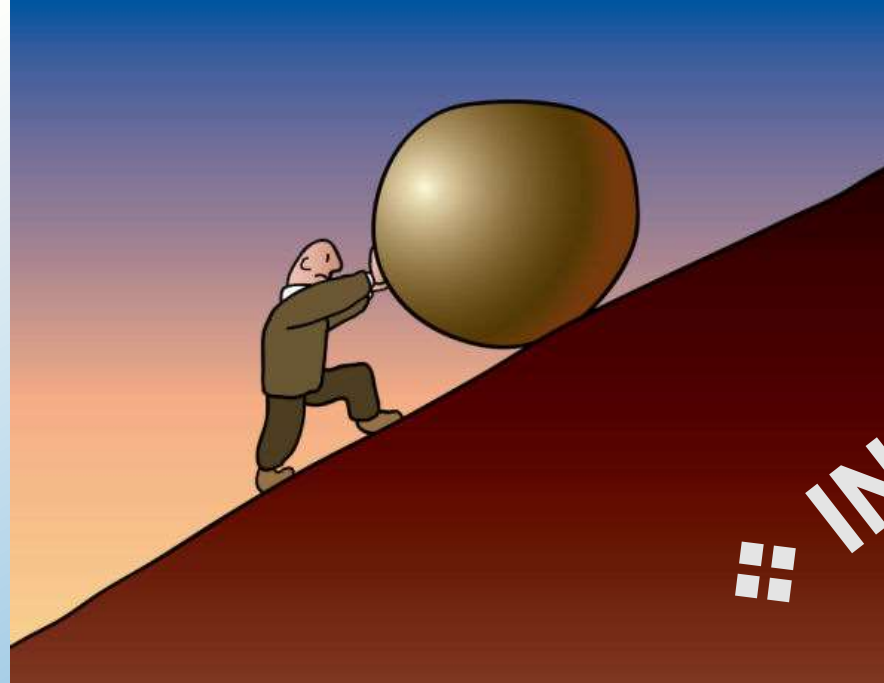
CHANGE TALK

Self-expressed language which argues for change

Appreciate



Ambivalence



INNER VOICE

SUSTAIN TALK

Self-expressed language which argues against change

AMBIVALENCE

Sustain Talk

Disinterest
Unwillingness
Lack of motivation
No perceived benefit
Fear of loss
Desire to maintain
status quo
Hopelessness



Change Talk

Interest
Curiosity
Motivation
Need
Perceived
benefit(s)
Dissatisfaction
with status quo
Hopefulness

Two sides of the same coin!

Change Talk is often intertwined with sustain talk ... that is the nature of *ambivalence*

The key is *intentionally* and *preferentially reinforcing* change talk when you hear it



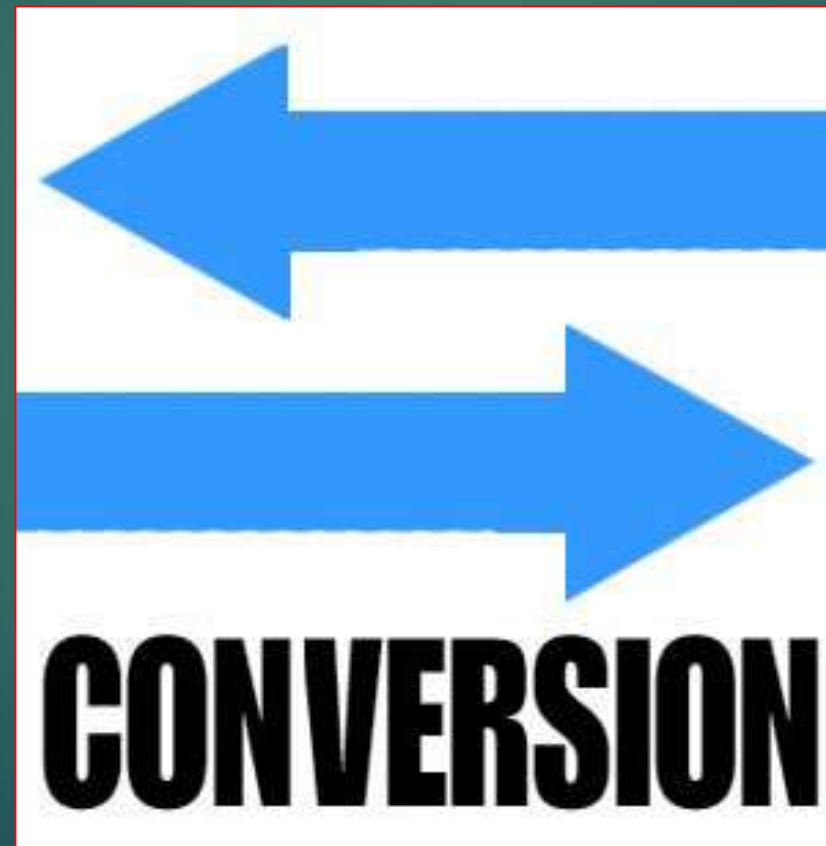
- Change talk is often the first step towards change *behavior*.
- Change talk indicates a presence of some *hopefulness*.
- Change talk can highlight and illuminate *ambivalence*.
- Change talk allows client to “*try on*” the idea of change and see how it feels
- ❖ Change talk can be your cue to *examine and be curious about* *but not push* someone towards a commitment to change.

Change Talk



Counselors may *inadvertently* convert
client ambivalence to resistance

"



Ambivalence

- A **normal, acceptable and understandable** part of the process of change
- Must be **resolved to move forward** with change and reduce the probability of relapse
- Important to **understand the *unique dynamics*** of ambivalence for a particular individual



Clarifying Ambivalence

- Thoroughly **explore each side** of the ambivalent conflict
- Make it **clear we** are **exploring together one option at a time**
- Explore **good things** and **not so good things** about each option

Emphasizing Personal Choice & Responsibility

In a motivational approach to counseling, it is not your task to *give* a participant a choice - it is not yours to give.

You do not *allow* a participant to choose because the choice already and always belongs with the consumer.

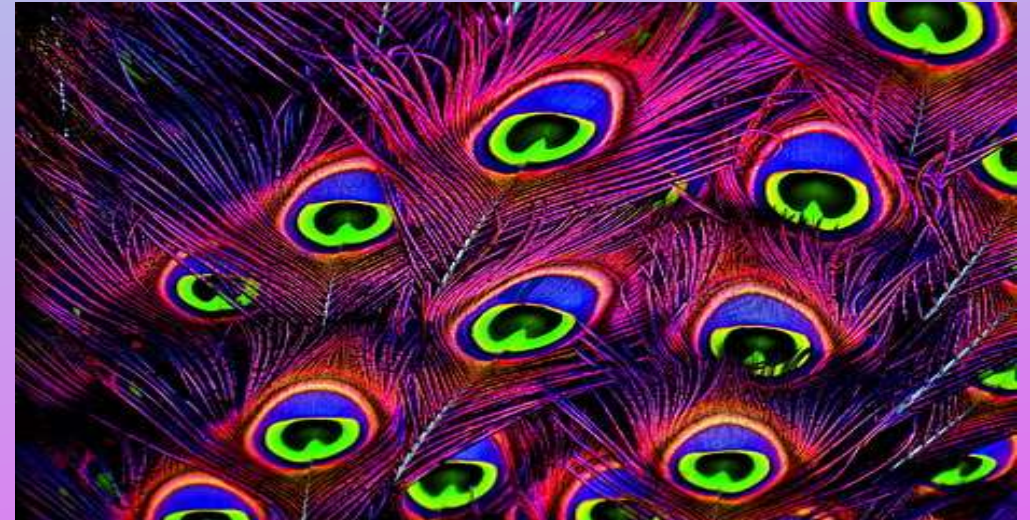
The participant *chooses*.

Our task is to help participants make choices they see are in their best interests. To find & hear *their* inner voice.

Miller, William R. Consensus Panel Chair. (1999). *Enhancing Motivation for Change in Substance Abuse Treatment. Treatment Improvement Protocol (TIP) Series 35*. Rockville, MD: Substance Abuse and Mental Health Services Administration.

Change Talk

- Any speech that ***favors movement toward change***
- Building motivation for change
- Distinctive to MI
- DARN CAT



Preparatory Change Talk

4 Kinds

DARN

Reflects interest, concern, hope

- **D****ESIRE** to change (want, like, wish . . .)
- **A****BILITY** to change (can, could . . .)
- **R****EASONS** to change (if . . . then)
- **N****EED** to change (need, have to, got to . . .)

Mobilizing Change Talk

3 Kinds

CAT

Reflects moving past ambivalence

- **C**OMMITMENT (intention, decision, readiness)
- **A**CTIVATION (ready, prepared, willing)
- **T**AKING STEPS

“I’d be less paranoid if I quit using, but I’m afraid I’d lose all my friends.”

Where is the change talk?

“I know he might’ve infected me and I have to get tested. I’ve just been putting it off because it’s too scary to think about.”

Where is the change talk?

“A few people at the meeting were okay, but some of those people get on my nerves. I don’t know if I’m gonna go back.”

Where is the change talk?

“I want to work there, but I’m worried I’ll fail the drug test.”

Where is the change talk?

“All I hear about are those horrible side effects. I will quit taking that medication if I have those crazy things happen to me. Do you really think it will help?”

Where is the change talk?

Often people speak of a hope
And then take it back
Talk themselves out of it

**An opportunity to spotlight the hope
Increase the hope, the dream**

What kind of change talk are each of these?

(DARNCAT)

Desire
Ability
Reason
Need

Commitment
Activation
Taking steps

- “I think I could quit.”
- “I’ve got to do something about my drinking.”
- “I’m probably going to quit.”
- “I want to get my kids back, and I can’t do that unless I quit using.”
- “I’d like to have better control of my voices, but I don’t know if I can.”
- “When I see my sister tomorrow, I’ll ask her about that group.”

PAYOFF MATRIX

	Pro	Con
Stay The Same		
Make a Change		

Decisional Balance Worksheet

	Good things	Not such good things
Current Behavior	1. 2. 3. 4.	1. 2. 3. 4.
Change	1. 2. 3. 4.	1. 2. 3. 4.

Contemplation Tool: Decisional Balance

Pros of **continuing**
drinking, drug use
or other behaviors

Cons of **continuing**
drinking, drug use
or other behaviors

Pros of **changing**
drinking, drug use
or other behaviors

Cons of **changing**
drinking, drug use
or other behaviors

Conducting a Decisional Balance Discussion

- **Accept all answers.** (Avoid arguing with or disputing answers given by participant)
- **Explore answers**
- Be sure to note **both** the benefits and costs of current behavior and change
- Explore costs/benefits with respect to **participant's goals and values**
- Review the costs and benefits

Plucking Change Talk from the Jaws of Ambivalence

“I really don’t want to stop using, but know that I should. I’ve tried before and it’s really hard.”

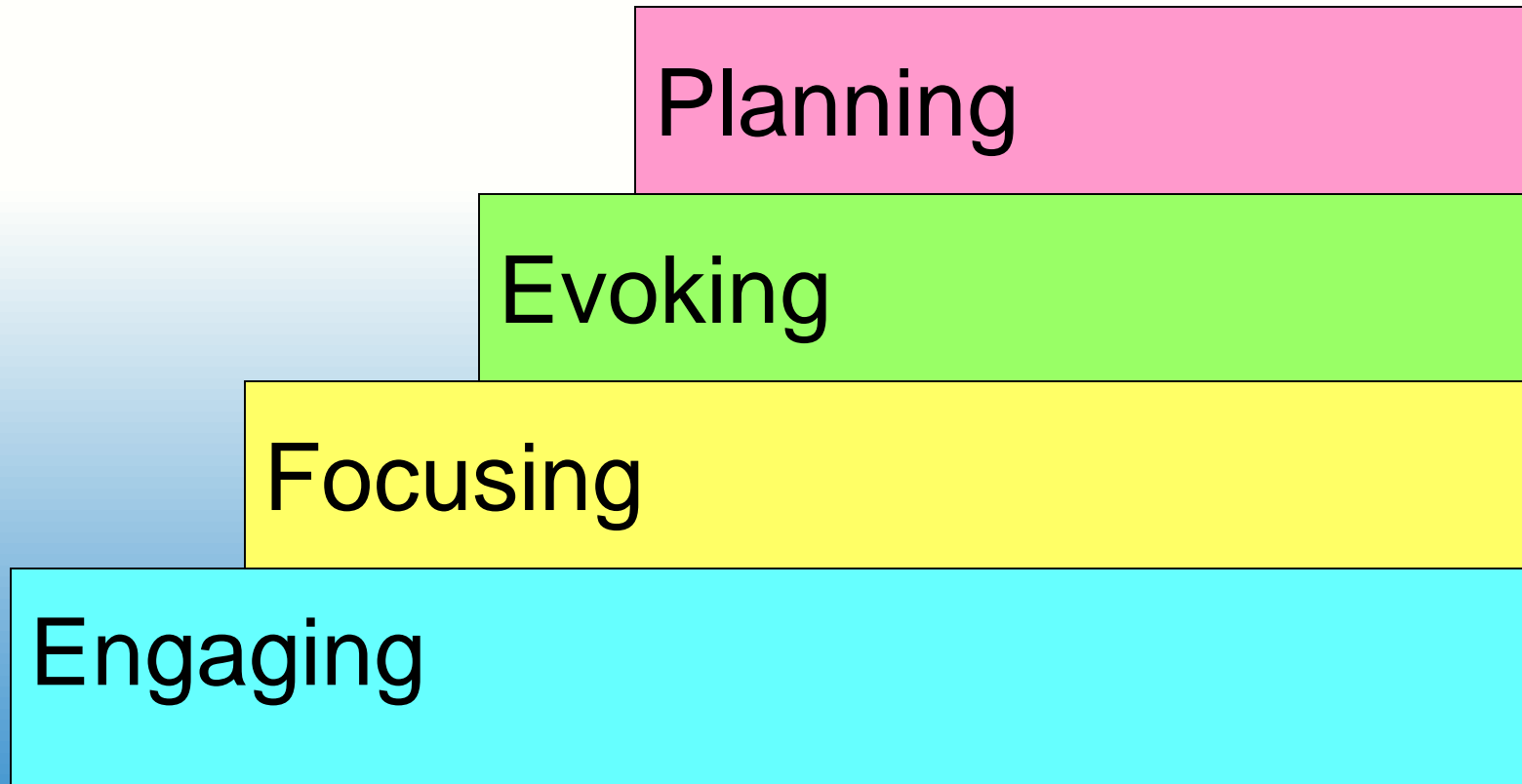
What would you **reflect**?

1. “You really don’t want to quit.”
2. “It’s pretty clear to you that you ought to quit.”
3. “You’re not sure if you *can* quit.”

MOTIVATIONAL INTERVIEWING FUNDAMENTALS

4 PROCESSES

Four Processes in MI



Motivational interviewing involves moving up and down the staircase!



Overlapping Processes

- Therapeutic **Engagement** is a prerequisite for everything that follows
- The process of engagement leads to **Focus** on a particular agenda
- **Evoking** involves eliciting the client's own motivations for change
- **Planning** occurs when the balance *tips* toward the when and how rather than the **whether** and **why** of change

What does the person ultimately want
out of life?



fulfillment

MOTIVATIONAL INTERVIEWING

PROCESS 1

Engaging

ENGAGEMENT PROCESS

The overarching **goal** is:

To understand the person's
underlying concern

What are the goals in the Engaging Process?

- Relationship and rapport building
 - Comfort
 - Safety
 - Empathy
- ❖ Begin to learn what the participant wants and hopes for



ENGAGING

- Ask about and listen to **desires or goals**
- Find out how **important** they are to them
- Be welcoming. Look for what you can genuinely appreciate and comment **positively** about.
- Provide the client with some sense of what to **expect**
- Offer **hope**
- Keeping communication open, ongoing

What things should you be mindful of when you are working on engaging?

- How comfortable is this person in talking to me?
- How supportive and helpful am I being?
- Do I understand this person's perspective and concerns?
- How comfortable am I feeling in this conversation?
- Does this feel like a collaborative partnership?

MOTIVATIONAL INTERVIEWING

PROCESS 2

Focusing

FOCUSING PROCESS

The overarching **goal** is:

To identify the agenda and
target behavior(s)

What is a target behavior and why is having one important?

A target behavior is something that the client wants to or needs to change but is still ambivalent to change. This is the “goal-oriented” piece of MI. Without a target behavior that we are focused on, we may just be having a nice conversation with OARS but not moving in the direction of change.

What is a target behavior and why is having one important?

- In MI it helps if it's something they are in Pre-Contemplation or Contemplation of
- Needs to be clear
- Should be specific enough
- Is not terms and conditions
- Needs to be relevant
- Has to be something that they can control
- Needs to focus on one at a time

What are the goals in the Focusing Process?

- Exploring the target behavior
- Honing in on a target behavior
- Clarifying the target behavior
- Exploring ambivalence
- Exploring barriers
- Developing discrepancy

Some things to consider in the Focusing Process:

- What goals for change does this person really have?
- Do I have different aspirations for change for this person?
- Are we working together with a common purpose?
- Does it feel like we are moving together, not in different directions?
- Do I have a clear sense of where we are going?
- Where is this person at with this change? (stage of change)

What is the premature focus trap?

Sometimes we go into conversations with clients and have our own agenda that we focus on. Other times, we hear a target behavior right away and spend the rest of the conversation focused on that even if it may not be the best one to talk about. The questions we should be asking ourselves are:

- Have we focused too soon?
- Am I focused on my own agenda?
- Are there other target behaviors that may be more important to talk about?
- What else does the person want to talk about, filter through, think out loud?

MOTIVATIONAL INTERVIEWING

PROCESS 3

Evoking

EVOKE

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[Missions](#)

[Quests](#)

[Evidence](#)

[Agents](#)

[Leaders](#)

MISSIONS

BRIEF 1 2 3 4 5 6 7 8 9 10



MISSION BRIEF

[← Back to All Missions](#)

EVOKING PROCESS

The overarching **goal** is:

To differentially elicit change
language

- To bring to mind or recollection
- To call forth a thought to the conscious mind
- To arouse interest or emotion
- To elicit, evince, illuminate, draw upon, add dimension to
- For the counselor, to draw a client out about a particular subject, *to demonstrate a desire to know or learn more...*

Evocation

Curiosity



What are the goals in the Evoking Process?

- ❖ Eliciting and reinforcing change talk
- ❖ Increasing the amount and strength of change talk
- ❖ Get curious about their motivation
- ❖ Develop internal motivation

Some things to consider in the Evoking Process:

- What are this person's own reasons for change?
- Is the reluctance more about confidence or importance of change?
- What change talk am I hearing?
- Am I steering too far or too fast in a particular direction?
- Is the righting reflex pulling me to be the one arguing for change?

Clinician High in Evocation

- Are curious about clients' ideas on why change may or may not be good for them
- Actively seeks to learn about these ideas
- May provide information, but don't rely on it as a means of "helping" the client to change
- Actively create opportunities for the client to use their own language in favor of change

Clinicians Low in Evocation

- Have only superficial interest in the clients' ambivalence or reasons for change and miss opportunities to explore these reasons in detail
- May make assumptions about clients' intent to change or not to change
- May rely on persistent fact-gathering or information-giving and convey distrust of the clients' own knowledge about the problem
- Provides clients with reasons to change rather than eliciting them

Primary Tools:

- Evocative questions
- Confidence Ruler
- Affirming strengths and supports
- Looking Back (Reviewing Past Success)
- Elicit Provide Elicit
- Menu of Options
- Brainstorming
- Reframing
- Hypothetical Change

MOTIVATIONAL INTERVIEWING

PROCESS 4

Planning

PLANNING PROCESS

The overarching **goal** is:

Consolidate commitment and
begin planning small steps

which can fairly easily be enacted to build
confidence towards the ability to change

Agenda Setting

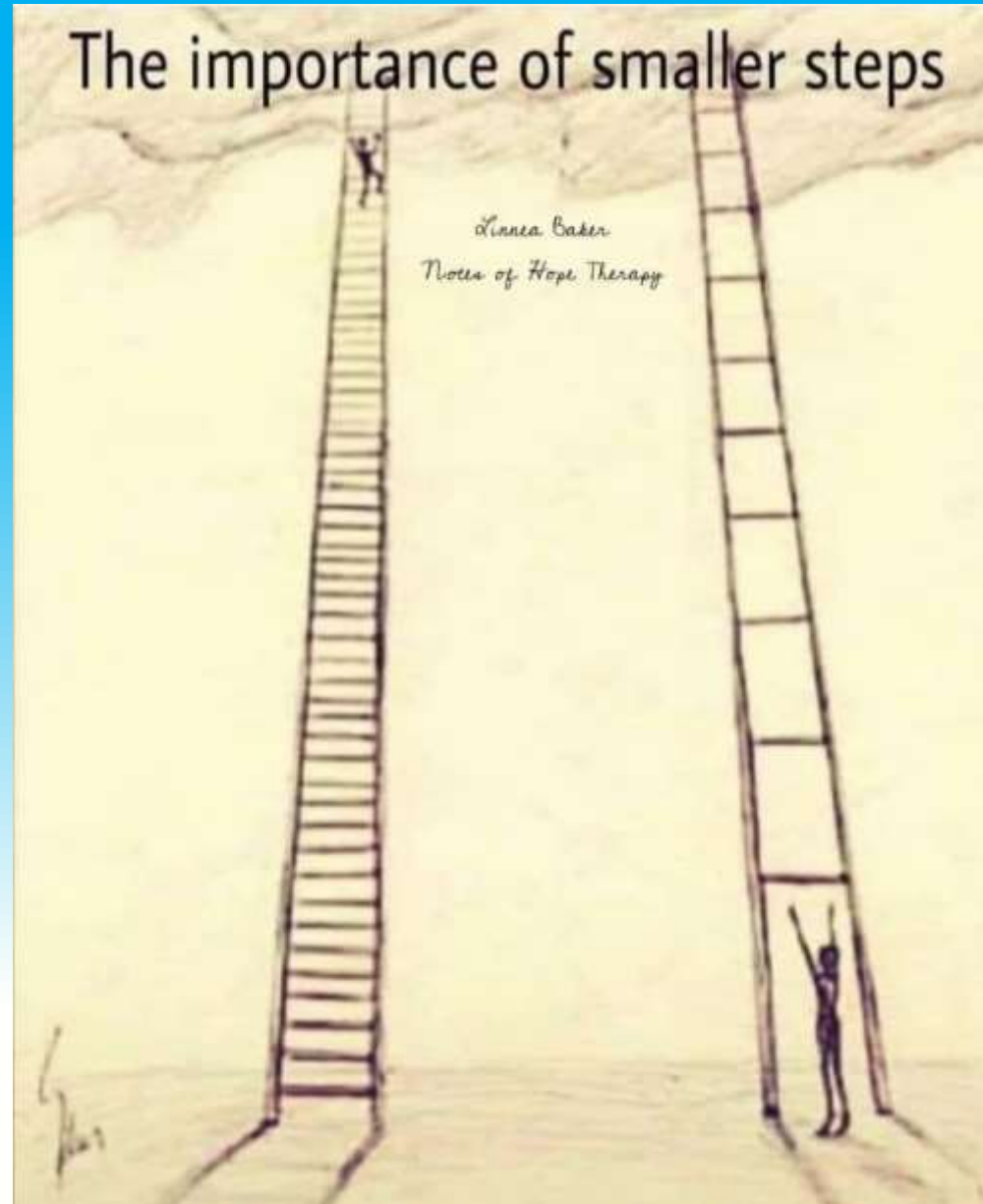
- The changes I want to make (or continue making) are:
- The reasons why I want to make these changes are:
- The steps I plan to take in changing are:
- The ways other people can help me are:
- I will know that my plan is working if:
- Some things that could interfere with my plan are:
- What I will do if the plan isn't working:

Small Steps

- ◎ Helps to create opportunities for success
- ◎ Small successes create momentum
- ◎ Individuals re-evaluate their self-image.



The importance of smaller steps



MOTIVATIONAL INTERVIEWING FUNDAMENTALS

OARS

OARS: a way of propelling into and through conversations on a pond of exploration and discovery together



Where can we begin?

A Fundamental MI Tool (OARS)



- Ask **O**pen-ended questions
- **A**ffirm
- Listen **R**eflectively
- **S**ummarize

A utilitarian skill set to have & become adept with. Surpasses solely a MI application.

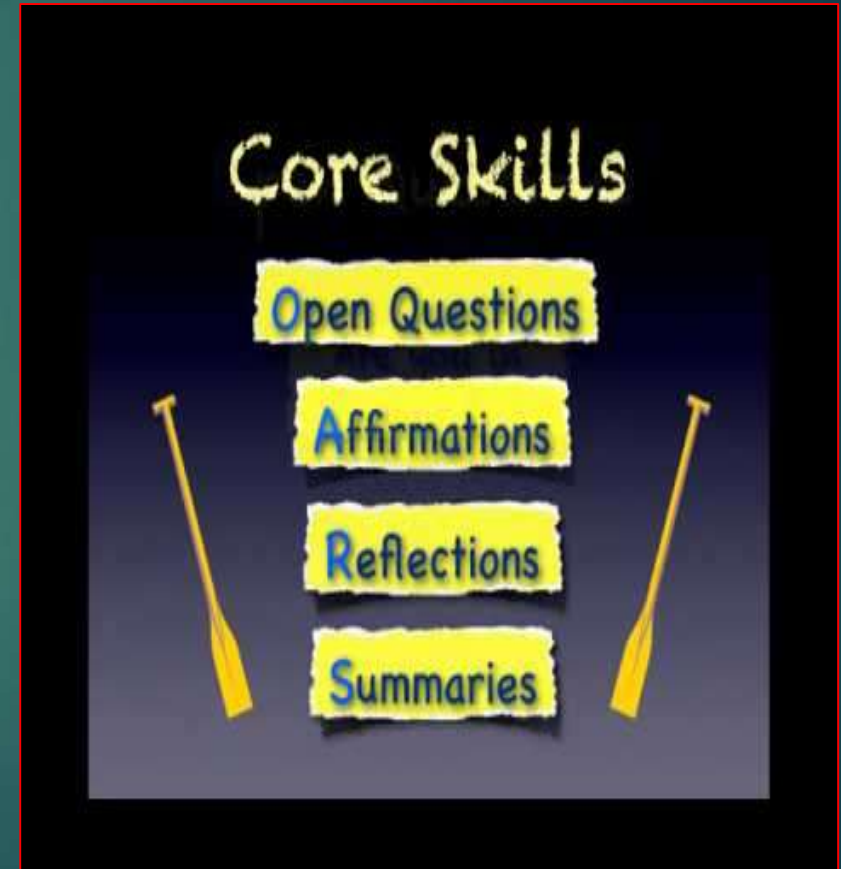
O ask open-ended questions to elicit information and story-telling

A affirm and validate the client's experience

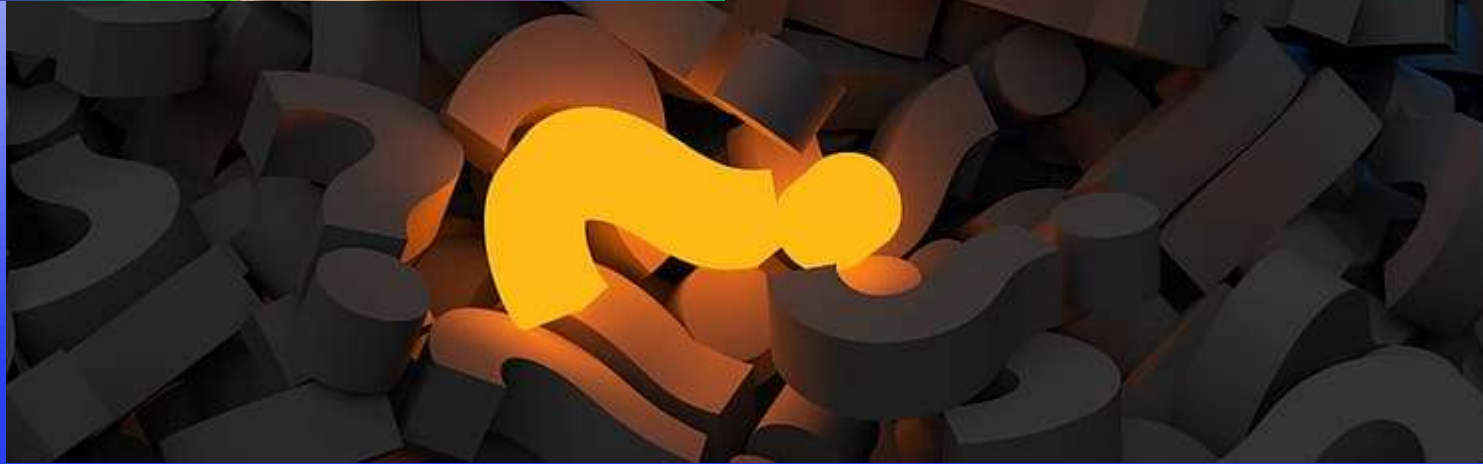
R Reflections to deepen your understanding of client's thoughts and feelings

S summarize periodically to "connect the dots"

OARS



OPEN-ENDED QUESTIONS



Open-Ended Questions

- ❖ Open the door, encourage the client to talk
- ❖ Do not invite a short answer
- ❖ Leave broad latitude for how person can respond



Closed Questions

- Have a short answer (like yes or no)

Did you take your medication?

- Ask for specific information

What drugs are you using?

- Might be multiple choice

What do you plan to do: quit, cut back, or keep smoking?

- They limit the client's answer options
- They have a time and place



What's your intent in your question?

Intent is strategic and directional.

What path are you heading down?

Why and how?

Open Ended Questions



- Demonstrate your ***committed*** and ***genuine*** interest in the person
- Deepen your understanding of “what makes this person tick”
- Create a ***safe, relaxed*** atmosphere in which dialogue can evolve
- Facilitate ***rapport and trust*** in the relationship
- Generally ***elicit self-motivational statements or change talk***

Open vs. Closed Questions

- Are you alright?
- Do you use drugs?
- Are you happy in your relationship?
- Do you think therapy could be useful to you?
- How are you doing?
- Tell me about your drug use
- I'm interested in hearing more about your relationship
- How do you see this as being of the most use to you?

**What's
your intent
in your
question?**

Intent is
strategic
and
directional.

What path
are you
heading
down?
Why and
how?

Do you want a **single word**
or **simple phrase** answer?

Or do you want *more* information
and more to **build from**?

What do you want to learn?

How does your questions accomplish that?

GUIDELINES FOR QUESTIONS

- ❖ Clients should be doing more than half the talking
- ❖ Ask fewer questions! Avoid asking three questions in a row
- ❖ Ask more open than closed questions, questions that invite elaboration, rather than brief answers
- ❖ Offer two reflections for each question asked



Practice open-ended questions

HOW TO ASK
open-ended
QUESTIONS

Think of some **open-ended questions** you may ask ...

- Remember to focus on the **'what'** and **'how'** rather than the 'why' or 'when'
- What are you **curious** about?
- What would you **like to know more** about?
- Listen for **ambivalence**
- Seek to **clarify and comprehend**
- **Invite** to have a dialogue with you

Closed into Open Ended Exercise

Closed-Ended Questions > Change These Into Open-Ended Questions

1. Do you believe good luck charms work?
2. Who is/was your favorite teacher in school?
3. What social media platform do you use most often?
4. Do you like where you live?
5. Whose company do you despise most?
6. Do you like Chinese food?
7. Have you ever flown on a plane?
8. What hobby do you spend the most time on?
9. How often do you brush your teeth?

Closed into Open Ended Exercise

Do you have some favorite childhood memories?	What are your favorite childhood memories?
Did you live in Morocco for a long time?	What is it like to live in Morocco?
Did you like the college you attended?	What was the most beneficial part of your college experience?
Did you enjoy high school?	What was your high school experience like?
Do you have any hobbies?	What are your favorite hobbies?

Do you really want to work here?	Why are you interested in working here?
Do you think we should hire you?	Why should we hire you?
Do you have the right skills and abilities for this job?	What skills and abilities uniquely qualify you for this job?
Would your last boss recommend you?	How would your last boss describe you as an employee?
What is your best quality as an employee?	How can your top qualities help our company to thrive and

Can I help you with that?	How can I assist you with that?
May I be of service?	How may I be of service?
Can I help you find something?	What can I help you find?
Do you want a car or an SUV?	What features are most important to you in a car?
Do you like our products?	Which of our products are your favorites?

Closed into Open Ended Exercise

Does your arm hurt?	How would you describe the way your arm feels?
Do you feel sick?	What symptoms are you having?
Do you get enough sleep?	What are your sleep habits like?
Does your tummy hurt?	How does your tummy feel right now?
On a scale of one to 10, how tired are you?	How would you describe your level of exhaustion?

Do you like vanilla ice cream?	What's your favorite ice cream flavor?
Do you like rain?	How do you feel about rainy days?
Is math your favorite subject?	What do you like about math?
Do you prefer hot weather or cold?	What is your favorite kind of weather?
Do you like to spend time outdoors?	What's your favorite outdoor activity?

Homework: Closed into Open Ended Exercise

- Go to list of 100 closed ended questions & convert to open ended

Closed into Open Ended Exercise

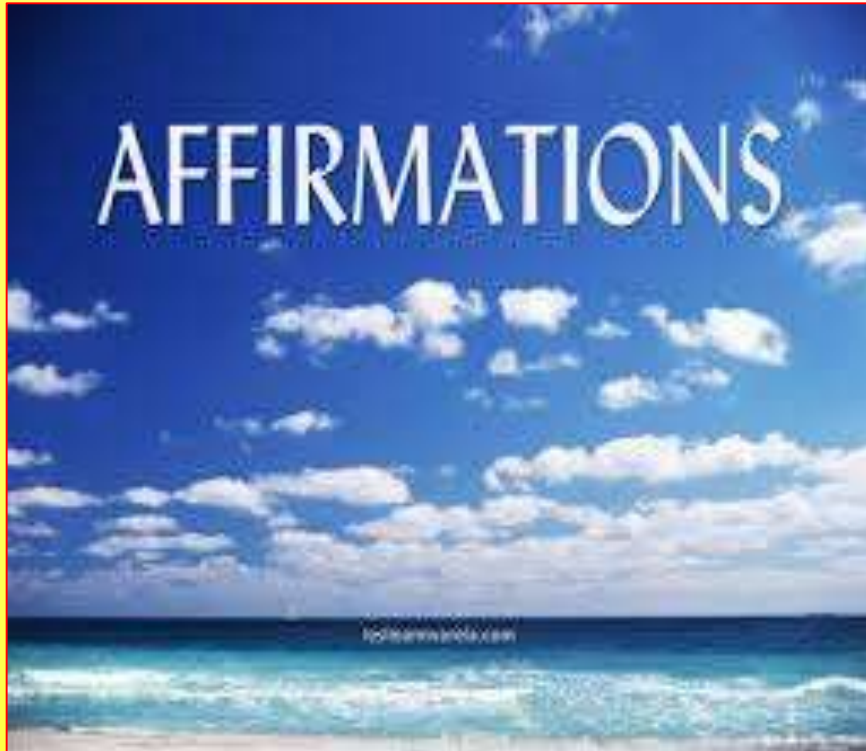
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<https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fexamples.yourdictionary.com%2fexamples-of-open-ended-and-closed-ended-questions.html&c=E,1,HhbWEAaW-z0KoqmggQL6hZ02sCRGRUDzRn9BKfbYnsDSV4jeVxpQOfP631FB79HjEYHXi-pS5hJ1QrRLDdzaBbzee9-DnmUo88D4dJy9JDHvz0KqS2GywIE2&typo=1>

AFFIRMATIONS



Affirmations and validations



Affirmations are comments or observations we make to the person that asserts something **positive or strong or resilient** about the person

- Acknowledging a positive attribute
- A statement of appreciation or thanks
- An expression of hope, caring, or support
- A statement supporting self-efficacy, self determination or mastery

Validations legitimize and confirm the merit of a person's experience and feelings.

Affirm

- Statements of **appreciation** and **understanding**
- Emphasize a **strength**
- Notice, appreciate **positive** action
- Should be *genuine*
- Express positive **regard and caring**
- Nurture a **competent** instead of a deficit worldview of clients

Affirmations may include:

- Commenting *positively* on an attribute
 - You're really been resourceful through some difficult times..
- A statement of *appreciation*
 - I appreciate your openness and honesty today.
- Catch the person doing *something right*
 - Thanks for coming in today!
- A *compliment*
 - I like the way you said that.
- An expression of *hope, caring, or support*
 - I hope this weekend goes well for you!

KINDNESS

/'kɪn(d)nəs/ **noun**

1. Lending someone
your strength **of seeing THEIR strengths**
instead of reminding them
of their weakness.

!TheMindsJournal



Critical to M9

Activates different neural pathways & NTs

Think of some of the **strengths** your clients possess.

- How does the client express this strength?
- How is the strength helpful to your client?
- What could you say to affirm this strength in your client?

Rosengren, 2009

The importance of admiration and respect

Practice affirmations and validations



- Think about responses that are **affirming or validating**, i.e. that demonstrate **empathy and understanding**
- Imagine yourself in their shoes
- Remember to keep your statements **brief!**

For your person

- What are some affirming or validating statements you might say to them?
- How might you communicate to them that you 'get it'?
- Imagine yourself in their shoes
- What would you want to hear someone say to you?
- Remember to keep your statements brief!

Practice affirmations and validations





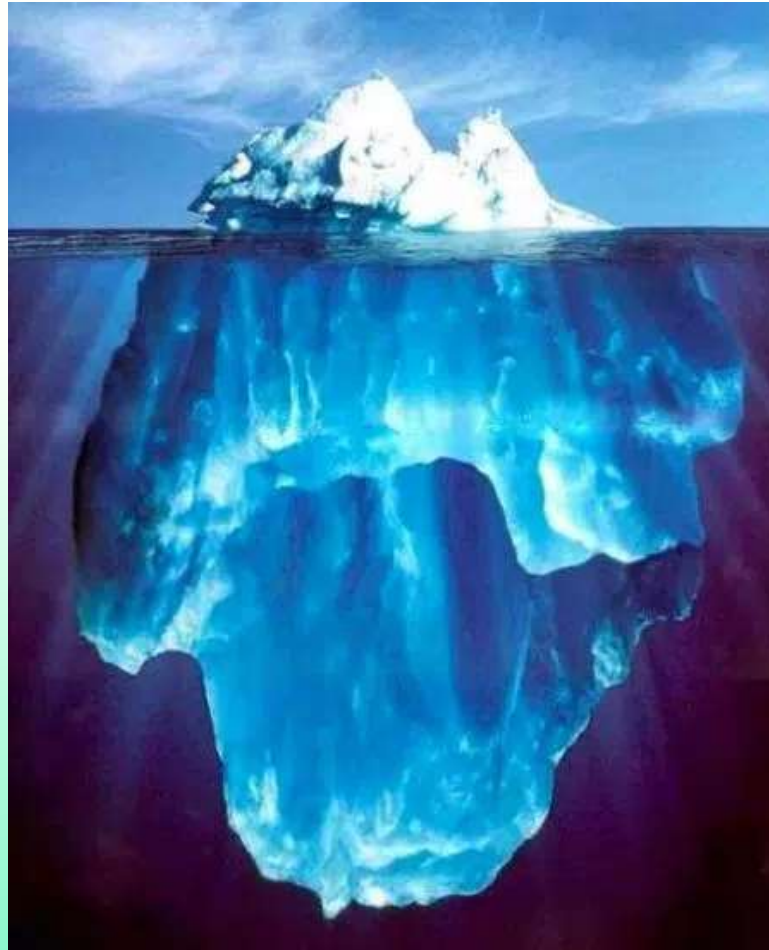
Reflective Listening

- A good way to follow up on a client's response to an open-ended question...
- Allows client to **"hear"** what they have said like holding up a mirror (reflecting ... thinking out loud)
- Allows client to **hear and explore** their own ambivalence
- Allows helper to make a guess about what the client means or feels
- Demonstrates **focused and committed** interest in client
- Enhances helper's **empathy** for client



When people
are mirrored,
they feel
understood.

Tip of the Iceberg



- Inner voice
Internal guide
- Under layers & layers
 - Other voices
 - Trauma
 - Life

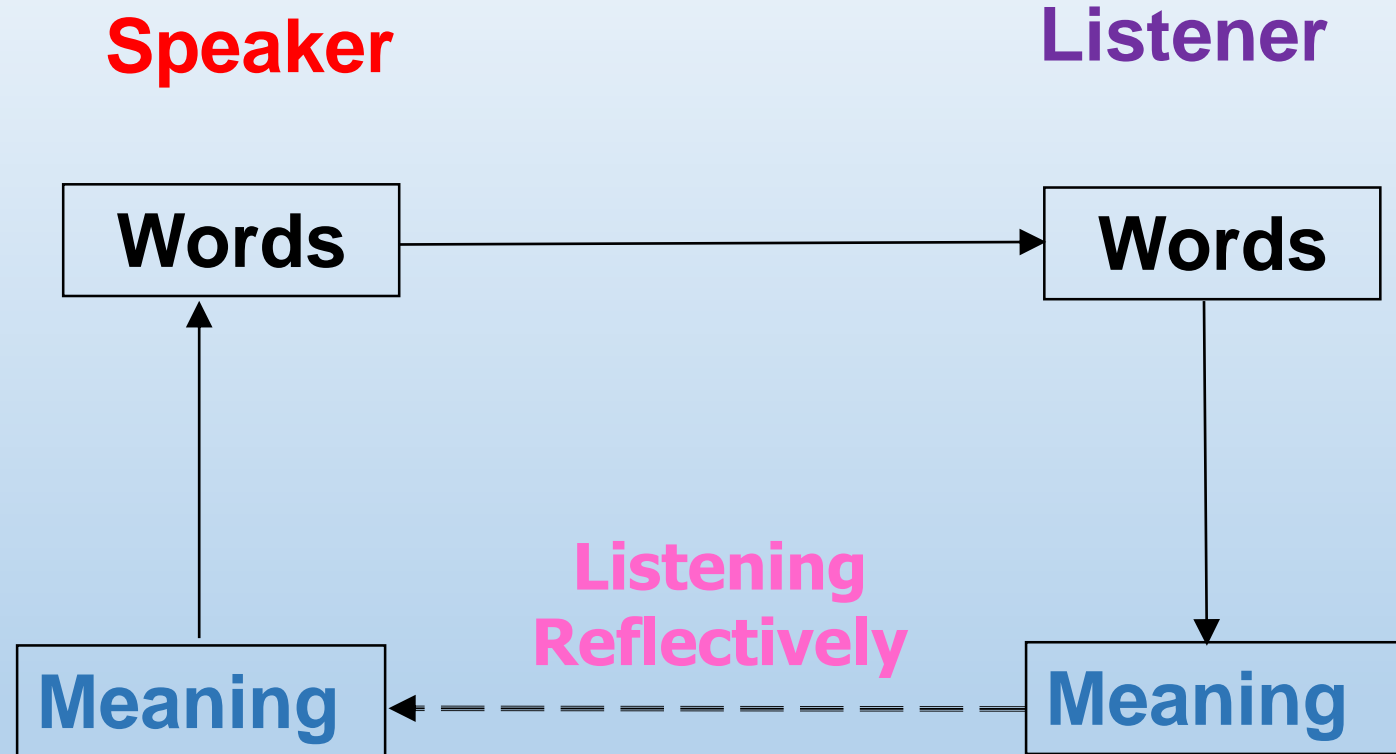
What a person **says**

How they are **feeling**

What they are **thinking**

What they **mean**

Reflection Clarifies Meaning



Listening Reflectively

- Listen to what the person is saying, **use reflections to make sure you understand**
- The person feels like you **“get them”**
- Accurate reflections ***take the place of questions*** because if you have enough info to ask a question, you have enough to float out a reflection.

Reflective listening – repeating to client **your *best guess* at to what they mean.**

Demonstrates to client you **understand**, and/or gives them the **chance to clarify** what they means.

Can begin with:

“It sounds like you...”

“You’re feeling...”

“It seems that you...”

“So you...”

Again, should be at least twice as many reflections as questions.

This is the grounding of MI — when in doubt, reflect.

Forming Reflections

- ❖ A reflection states a hypothesis or makes a guess about what the person means
- ❖ Form a **statement** instead of a question
 - Think of your question: *Do you mean you...?* and remove the question part.
 - Inflect your voice down at the end
- ❖ There's no penalty for missing
- ❖ In general, a reflection should not be longer than the client's statement

Simple Reflections... *think 'face value'*

- **Repeat**: verbatim reiteration of all or a part of what's been said
- **Restate**: close approximation of what's been said with a few slight changes

Complex Reflections... *think 'value added'*

- **Paraphrase**: using your own words to infer or hypothesize about what was said
- **Metaphor**: an image or symbol that represents how someone is feeling

Types of Reflections



Practice reflections

- This time, you are *reflecting* back to them what you hear.
- Think about what was said and what it may *mean* to them
- Formulate your reflection with the goal of *eliciting more* information from them.
- Remember... it's okay to be wrong— as long as you're humble; *it's an invitation to be corrected* or 'set straight' which **builds alliance and equity**



REFLECT

Remember...

- Talk less than the person
- On average, reflect twice for each question you ask
- When you reflect, use complex reflections more than half the time
- When you do ask questions, ask mostly open questions
- **Avoid getting ahead of your person's *readiness*** (warning, confronting, giving unwelcome advice or direction, taking the “good” side of an argument)



SUMMARIZE

Summary Reflections

- A summary demonstrates how well you have listened and understood the client
- Summaries call attention to important elements of the discussion.



Summarize

- Reinforces what's been said
- Shows you've been listening carefully
- Prepares the person to elaborate further
- Allows person to *hear* their own change talk for a second or third time – organizes client's experience from their *thinking out loud*

Summarization

summarize

Summary: *“So... Let me be sure I heard you correctly...”*

- **condenses** what has been said into key points or issues
- allows you to determine whether you have **“gotten”** everything
 - *“What have I missed?”*
- **illuminates contradictions or ambivalence** in what client has said
- allows you to **“connect the dots”** for the client
- allows **time** for the client and you to **regroup** before moving on to the next topic

- They can *intentionally* or *preferentially* reflect parts of what was said. They may...
- **Collect:** the information already offered
- **Link:** something just said with something discussed earlier
- **Transition:** Draw together what has happened and transition to a new task

Summaries should be *selective*

The logo for 'collect.it' is displayed in a white, rounded, sans-serif font on a dark blue background. The letters 'i' and 't' in '.it' are stylized with vertical bars in red, blue, and green. The entire logo is enclosed in a thin red rectangular border.

collect.it

Summarizing examples

- **Collecting** - “So you feel meth has affected your health, made you lose jobs, and strained your relationships with your family.”
- **Linking** - “You don’t see your alcohol use as a problem, and your mother has told you she thinks it is.”
- **Transitioning** - “So you’ve been through SUDP before, and you don’t think it was the right program for you. What are you looking for in a treatment program?”

Martino, 2007



“I’d be less paranoid if I quit using, but I’m afraid I’d lose all my friends.”

Apply OARS

“I know he might’ve infected me and I have to get tested. I’ve just been putting it off because it’s too scary to think about.”

Apply OARS

“A few people at the meeting were okay, but some of those people get on my nerves. I don’t know if I’m gonna go back.”

Apply OARS

“I want to work there, but I’m worried I’ll fail the drug test.”

Apply OARS

“All I hear about are those horrible side effects. I will quit taking that medication if I have those crazy things happen to me. Do you really think it will help?”

Apply OARS

OARS Exercise

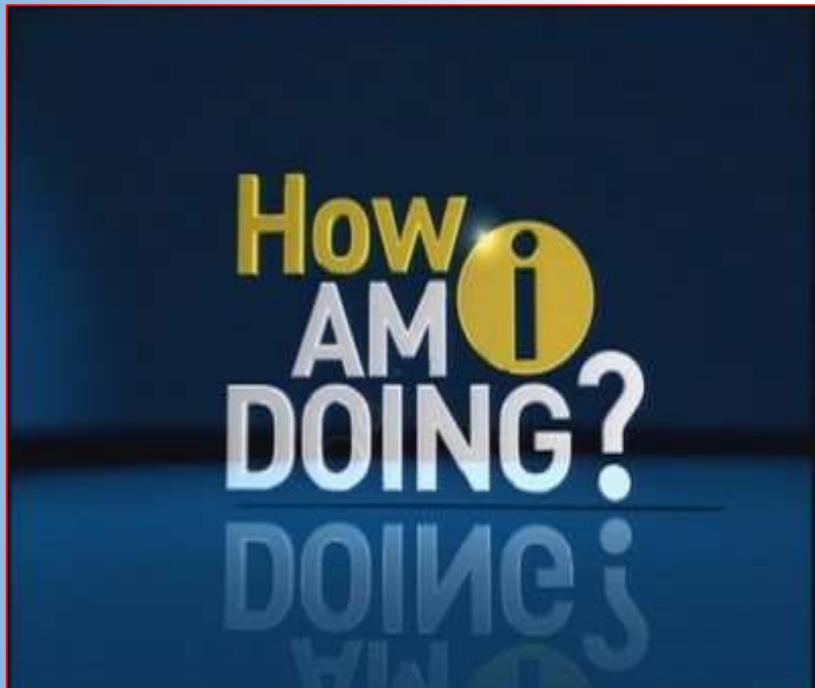
Practice responding to these statements with OARS. Also, think about whether you are hearing sustain or change talk ...

1. I know my mom is only trying to help but I wish she would get off my back. It's not helping me!
2. I know it's not the best option, but smoking weed is the only thing that makes me feel better.
3. Sobriety may be ok for other people but I've tried it before and it's not for me.
4. It seems like everything I try turns to crap! Nothing is ever good enough for you people!
5. I like some things about the program but there are way too many rules.
6. Living on the street isn't easy but it may be where I end up.
7. The medications make me feel awful but every time I quit taking them I wind up in the hospital.
8. If it weren't for other people tempting me, I'd still be sober.
9. I don't want to go back to jail but if I keep hanging around with the same people, that's where I'll probably end up.
10. You wouldn't like it either if people were in your business all the time.
11. I know you don't believe me but drinking isn't the problem; my life is.
12. Yes, I have diabetes but after quitting drugs and alcohol, now I have to cut out sweets?!
13. Maybe I'll quit smoking next year.
14. Yeah, I'd like my own place but it's never gonna happen.
15. If I drop dirty, they'll take my kids but they're probably better off somewhere else anyway
16. What's the point of taking a shower and shaving? I'll never have a girlfriend.

**How are we doing?
How do we know?**



Am I doing this right?



1. Do I *listen* more than I talk?
2. Do I keep myself *sensitive and open* to this person's issues?
3. Do I *invite* this person to talk about him/her/themselves?
4. Do I *encourage* this person to talk about whatever is on their mind?
5. Do I *ask permission* to give my feedback?
6. Do I *reassure* this person ambivalence is normal?

Am I doing this right?

AM I DOING IT RIGHT?

7. Do I help this person identify *successes and challenges* from his/her past that may be brought to bear on current situation?
8. Do I *seek to understand* this person?
9. Do I *summarize* what I'm hearing to ensure clarity?
10. Do I *value* this person's opinion more than my own?
11. Do I remind myself that this person is *capable* of making his/her own choices?

Exploring Motivation to Change with Residents

It's not just about behavior.

- 1.** ✓ **Do I pause and notice my reaction to this person and situation?**
✗ Or am I letting my emotions get the best of me?
- 2.** ✓ **Do I think about this person's thoughts and feelings?**
✗ Or am I just focusing on his/her behavior?
- 3.** ✓ **Do I stay curious and try to understand where the person is coming from?**
✗ Or am I making my own meaning?
- 4.** ✓ **Do I listen and genuinely try to understand the person.**
✗ Or am I just waiting for a chance to restate my position?
- 5.** ✓ **Do I consider what stage of change this person is in?**
✗ Or am I just telling him/her what I want?
- 6.** ✓ **Do I adjust my perspective and meet the person where he/she is?**
✗ Or am I staying focused on my own feelings or experiences of the situation?
- 7.** ✓ **Do I explore the other person's thoughts and exchange ideas about what to do next?**
✗ Or am I stuck on my own ideas?
- 8.** ✓ **Do I remain open about how we might move forward together? Do I consider next steps that *each* of us can take?**
✗ Or am I insisting that my way is the only way?
- 9.** ✓ **Do I recognize small steps as progress and acknowledge that change is hard?**
✗ Or am I expecting a big change or full resolution right away?

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Tips for the Listening



There,
I Fixed
It.

- Try to avoid your natural *“righting reflex”* as you attempt to engage. Remember: *it’s not your place to fix or solve the problem – more to develop an understanding of the issue as the person sees it and to build rapport.*
- Try to achieve the best possible sense of **how the experience feels to** them.
- Invite *them* to make arguments for change by probing about past experiences, but *avoid problem-solving or advising* unless expressly asked.
- Be *intentional* in your questions and responses.
- Not ours to give or allow **choices**. *Clients sets those, not us.* We assist clients in defining what choices they have and explore with them which is in their better/best interest.

Connection and Curiosity

- **Engage** by listening with genuine interest and acceptance
- **Ask** open-ended, non-threatening questions
- **Listen** to understand
- **Reflect** what you've heard
- **Validate and normalize** the person's experience
- **Summarize** periodically; connect the dots
- **Collaborate** with the person around their goals and dreams
- **Thank** the person for sharing

MakeAConnection

PRACTICE

PRACTICE

PRACTICE

Use OARS in daily life

Watch for power struggles

Listen for change talk

MI POCKET GUIDE

Processes, OARS, SOC, Change Talk (DARN-CAT) ...

- Engagement
- Focus
- Evocation
- Planning
- Open ended questions
- Affirmations
- Reflections
- Summarization
- Pre-Contemplation
- Contemplation
- Preparation
- Action
- Maintenance
- {Relapse}
- Desire
- Ability
- Reason
- Needs
- Commitment Language
- Activation
- Taking Steps Towards Change

Objective: elicit change talk with intentionality

- Ask **evocative** questions.
- Ask for **elaboration**.
- Ask for **examples**.
- The **readiness** ruler.
- Look forward or backward.
- Query extremes.
- Explore goals and values.

Primary Source

Miller, W. R. & Rollnick, S. (2013).
Motivational interviewing: Helping people change, Third Edition. New York: The Guilford Press.

Want to find out more?

- MINT www.motivationalinterview.org
- TIP 35 available FREE from <http://www.ncbi.nlm.nih.gov/books/NBK14856/>
- *Motivational Interviewing in Health Care: Helping Patients Change Behavior*. Stephen Rollnick, William R. Miller, & Christopher Butler, 2008. Guilford Press. *MIA:STEP – Motivational Interviewing Assessment: Supervisory Tools for Enhancing Proficiency*
<http://www.motivationalinterview.org/Documents/MIA-STEP.pdf>

for follow up & additional information ...

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Pronouns: he/him/his

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