

Welcome to Motivational Interviewing





Introduction



Jim Tillman, D.Min.
Certified Integrative Health
Coach
Presently working with HTN
patients in Lenoir Co.

Acknowledgement

Material contained within this training was largely based on the work of William R. Miller and Stephen Rollnick in their book titled,

Motivational Interviewing: Preparing People for Change, 3rd Edition

Published by Guilford Press, 2013



The Propose Training

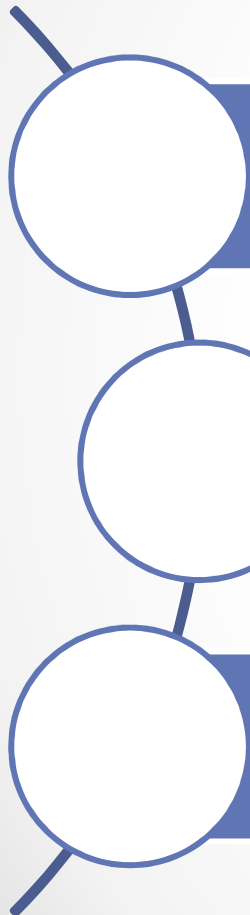


3 one hour training sessions on MI

Record and get feedback on an actual session with a patient

Provide individual feedback over the next three months.

My Goals Today

- 
- Give you a baseline understanding of the Spirit and Process of MI
 - Give you an introduction to the OARS of MI
 - Give you some practice with the Elicit-Provide-Elicit and providing information

Motivational Interviewing

A Collaborative Conversation Style
for Strengthening a Person's Own
Motivation and Commitment to
Change

**Motivational Interviewing: Preparing People for Change (3rd
edition)**

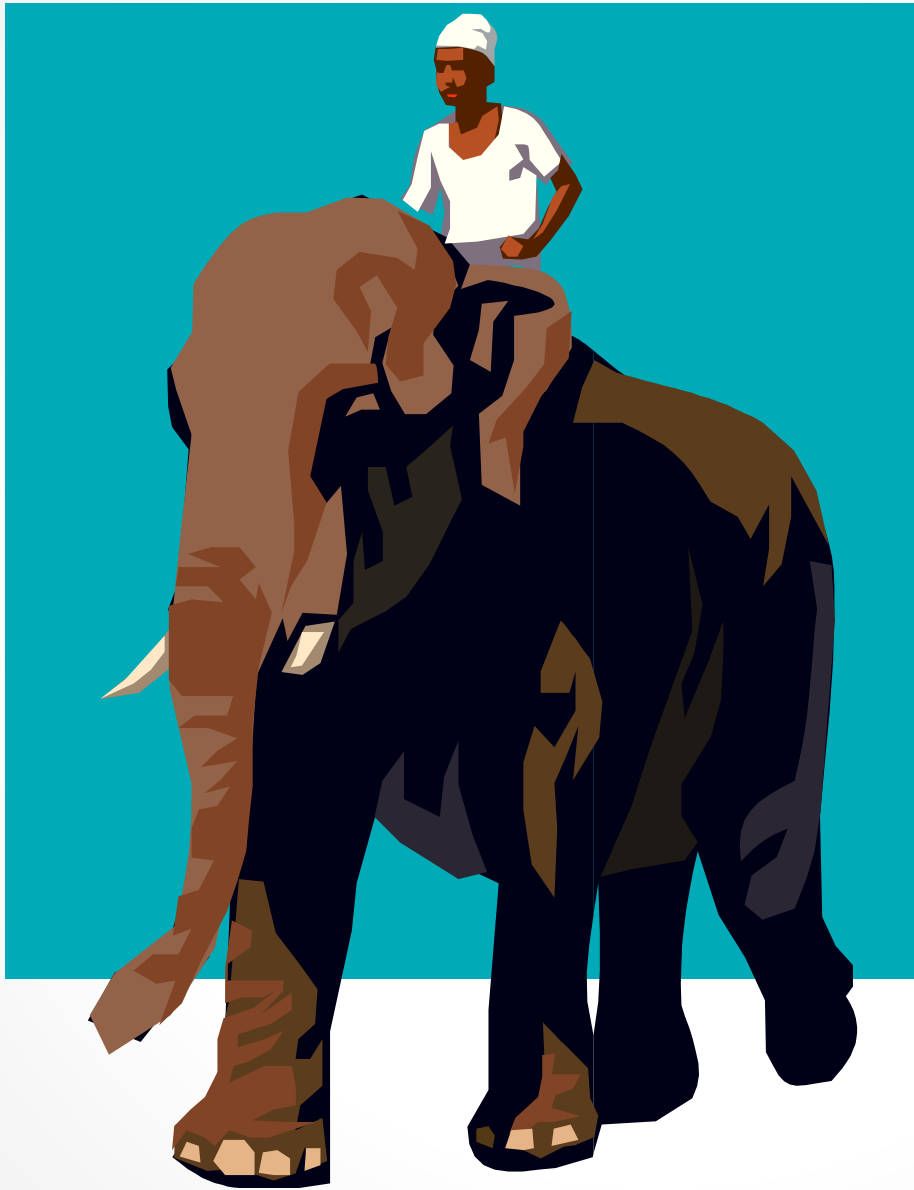
William R. Miller & Stephen Rollnick

Question of the day:

What does it take to get
people to make a
Change?

*Education can stimulate change
but it cannot sustain change*

J. Prochaska



**Switch: How to
Change Things When
Change Is Hard**
Chip and Dan Heath

One Goal for MI
is to help people to “talk
Themselves into Change,
based on their own values
and interests.”

A thought...

*"People are not resistant
to change; they resist
being changed."*

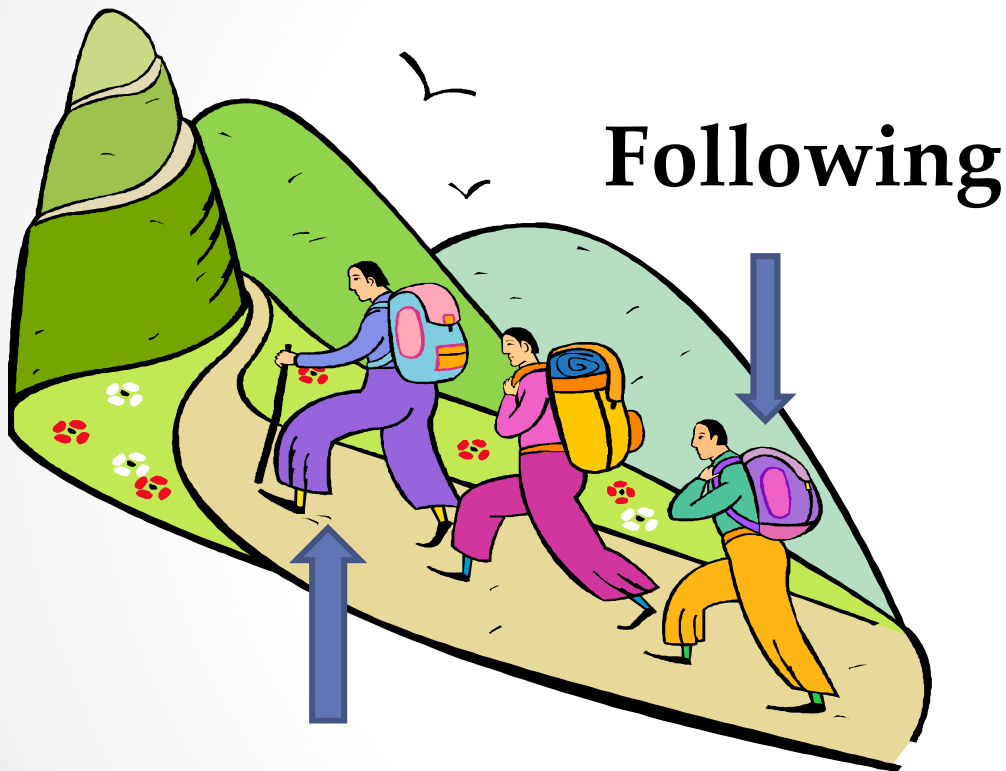
Kevin Eikenberry

Reflections And Questions

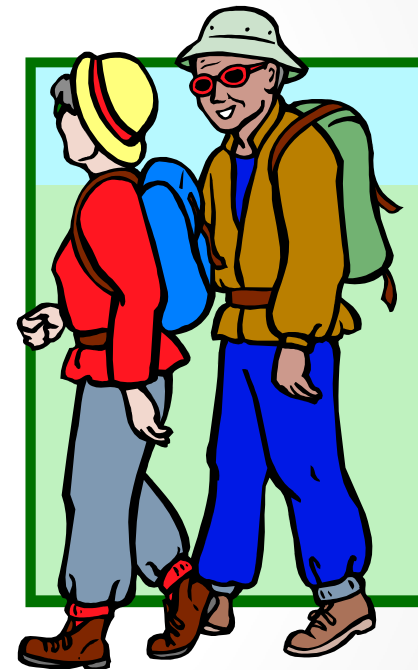


How do “I” get people to
make a Change?

3 Conversational Styles



Directing



Guiding

Sound Familiar?

I give people my BEST ADVICE, but they won't listen.

I EDUCATE and GIVE OPTIONS; what else can I do?

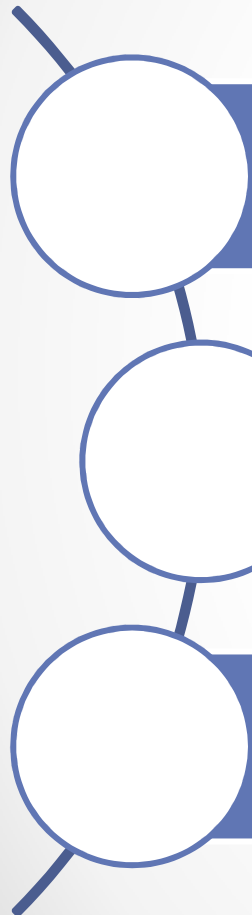
She RESISTS everything I suggest.

Some folks just DON'T WANT TO BE HELPED.

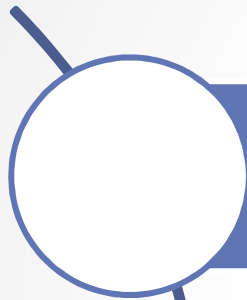
He's in TOTAL DENIAL about his problems.

Some people just need A GOOD TALKING TO!

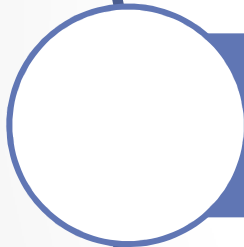
When Do We Need MI

- 
- When a Conversation About Change is Needed
 - When the Patient is Ambivalent or Resistant
 - When Motivation is a Needed (Patient is Stuck)

When Do We Need MI



When you feel you are working harder than the patient.

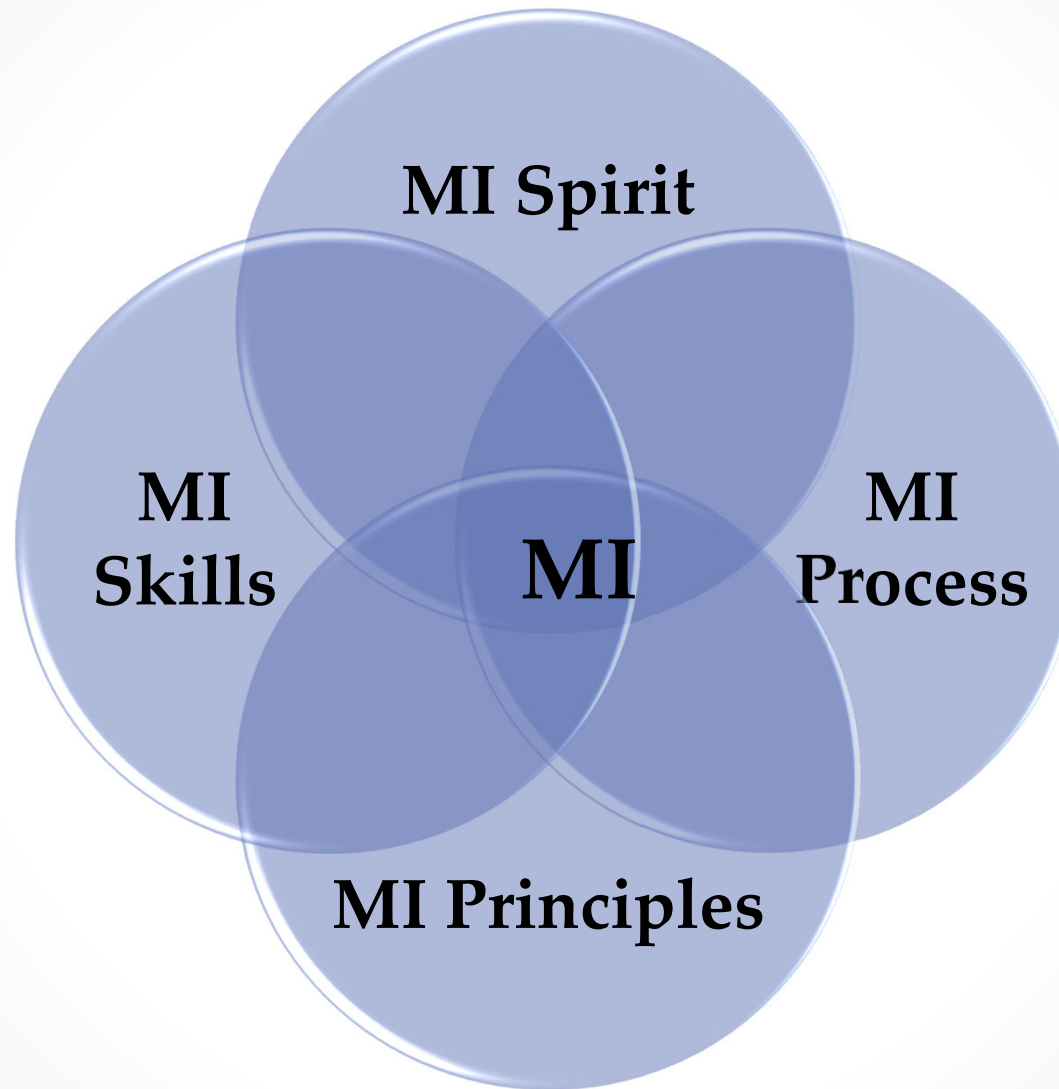


When you feel the subject is more important to you than to the patient.

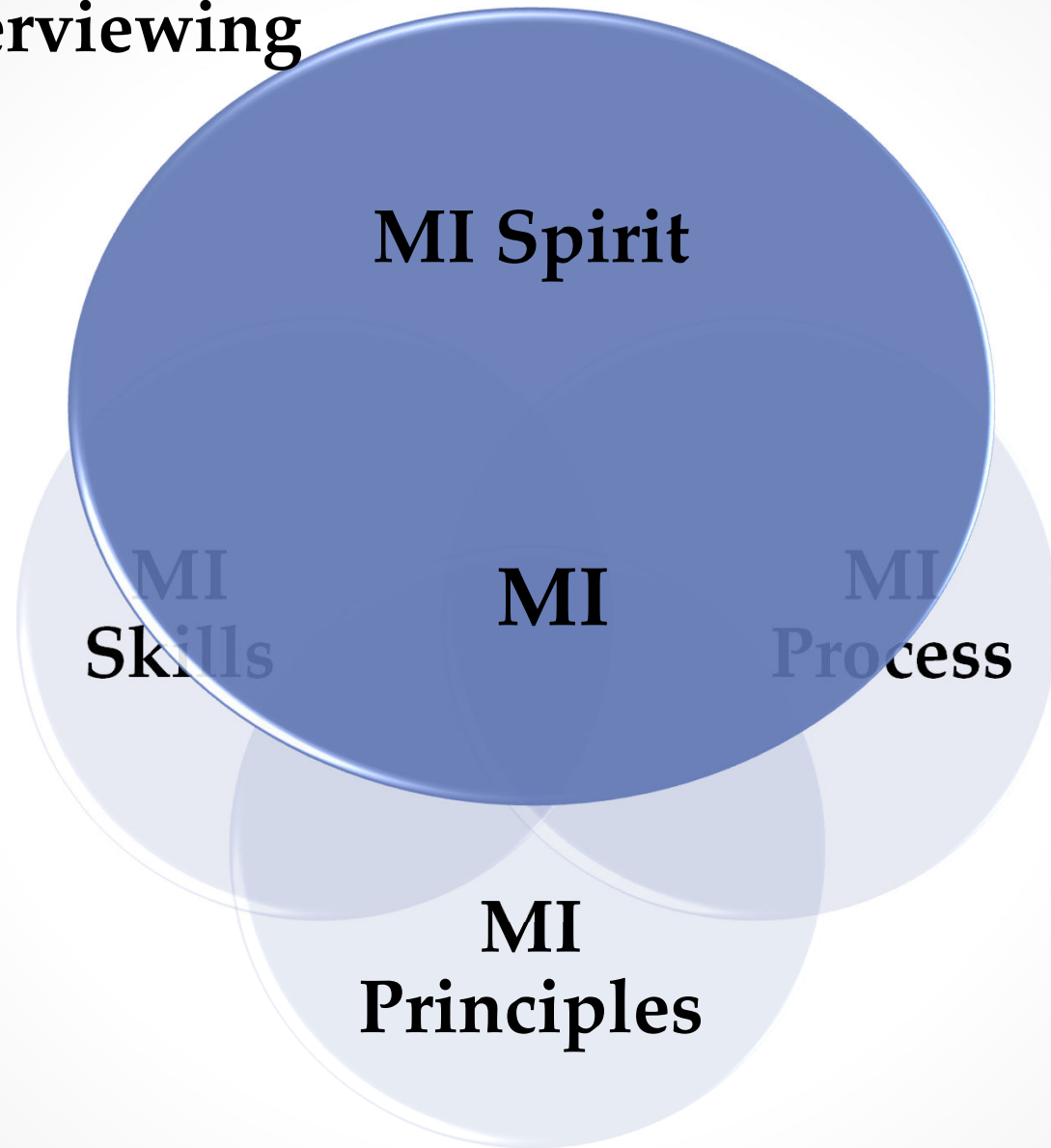


When you feel the only one talking about changing is you and they are talking about staying the same.

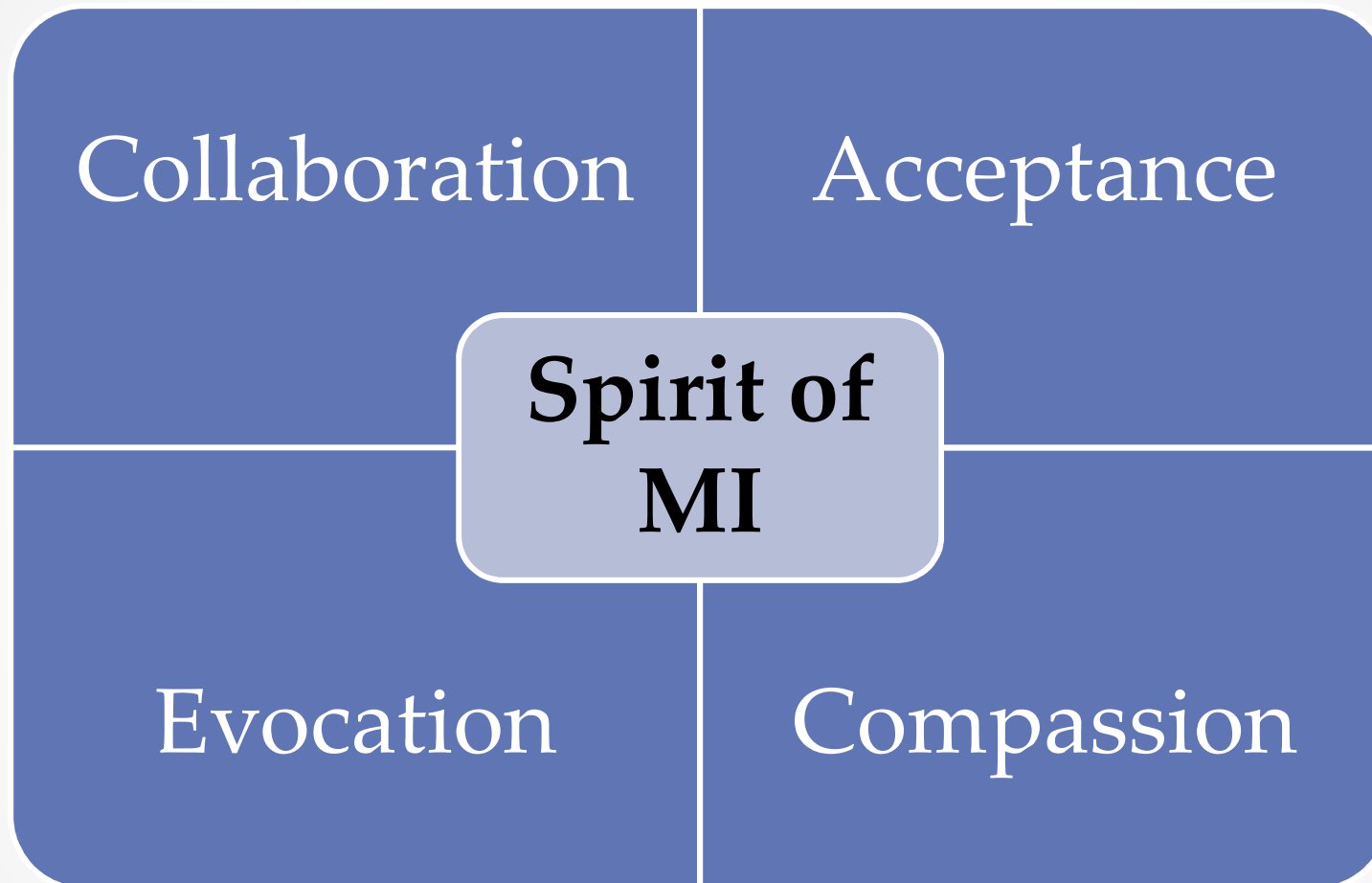
The Elements of Motivational Interviewing



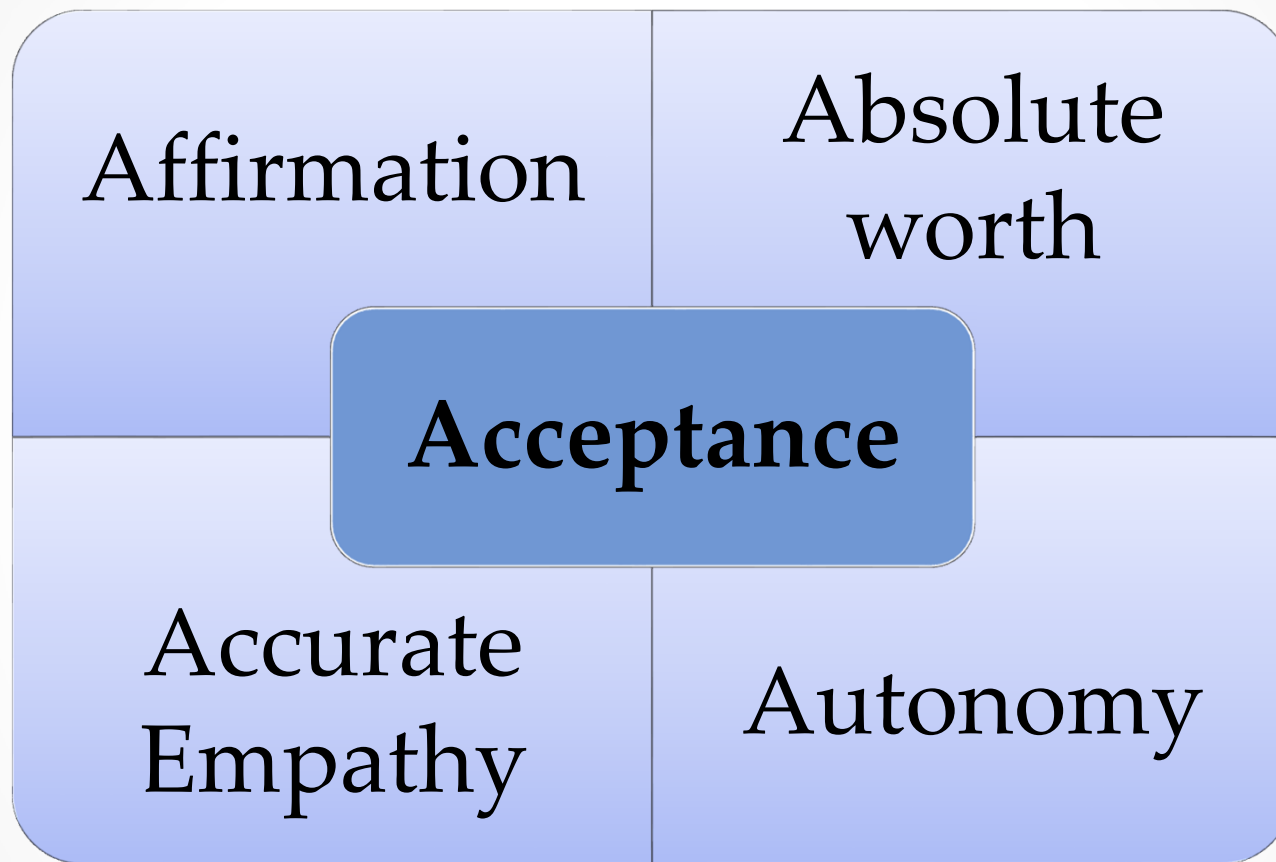
The Elements of Motivational Interviewing



From "Building Motivational Interviewing Skills" by David Rosengren, pg 9



Miller, W. R. & Rollnick, S. (2013) *Motivational Interviewing: Helping People to Change*. New York, Guilford Press, pg. 22.



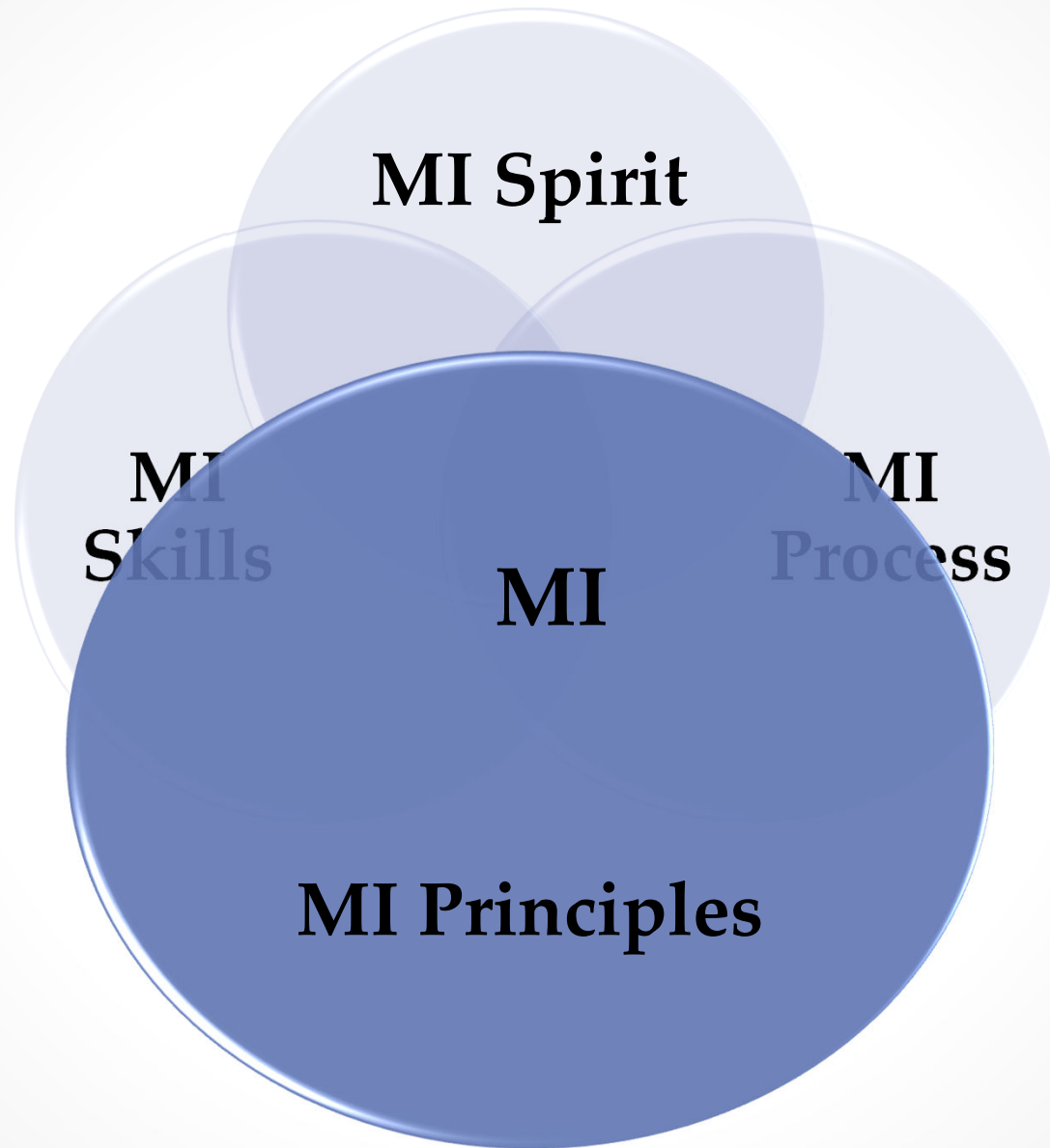
Miller, W. R. & Rollnick, S. (2013) *Motivational Interviewing: Helping People to Change*. New York, Guilford Press, pg. 17.

The Spirit of Motivational Interviewing “ACE”

- **A**utonomy not Authority
 - It is the client who is in charge of his or her change process and whether or not he or she will make any change at all.
- **C**ollaboration not Confrontation
 - Partnership that supports the self-efficacy of the patient
- **E**vocation not Education
 - The patient is the expert and we elicit insight rather than impart information and “wisdom”.

Problem with resistance is
that patients begin to
make a case for why they
cannot change and begin
to argue themselves out of
changing

The Elements of Motivational Interviewing



• From "Building Motivational Interviewing Skills", David Rosengren,
The Guilford Press 2009 no 9 •

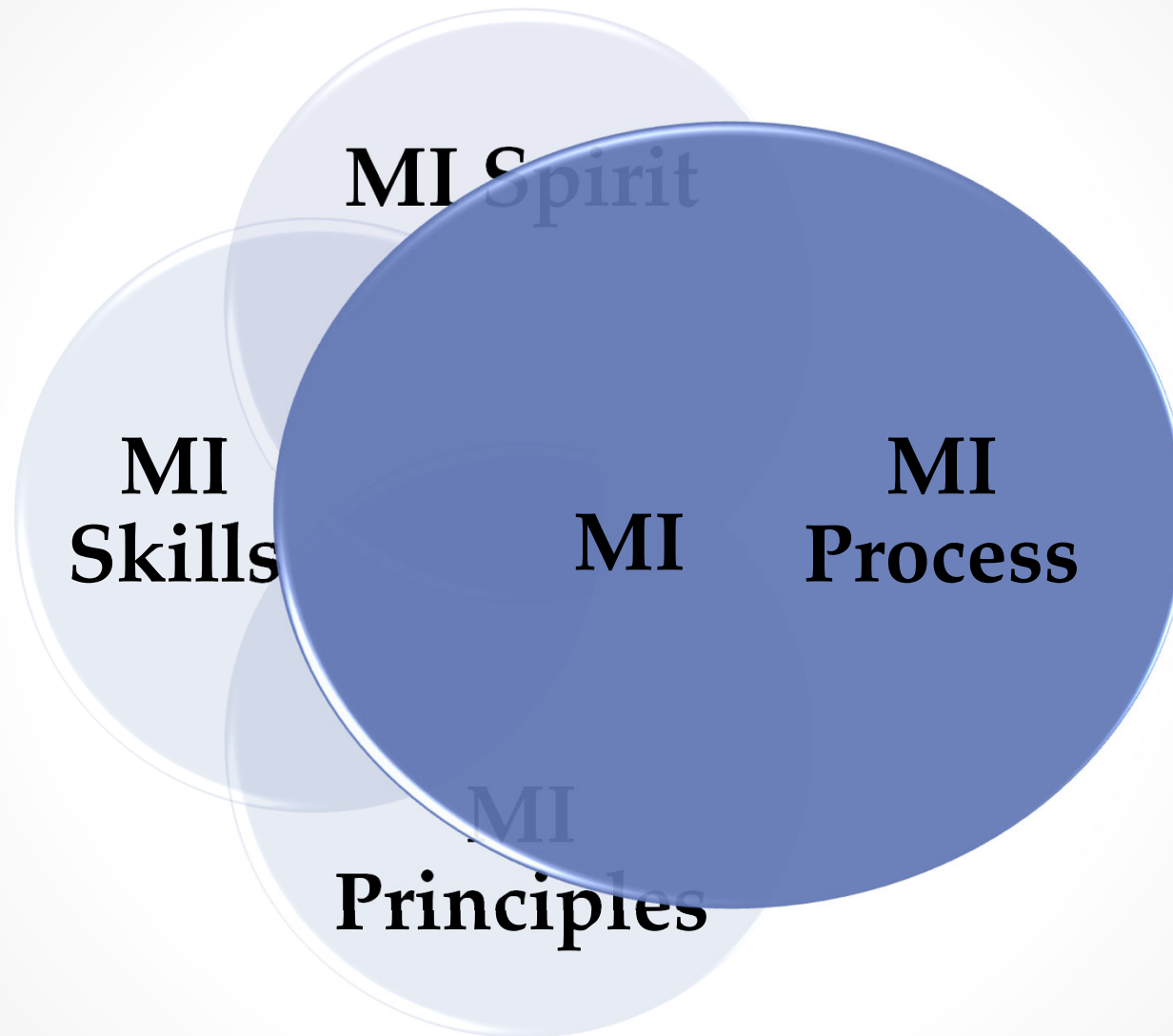
The Principles of Motivational Interviewing “RULE” Self Management

- R** – Resist the “Righting Reflex”
- U** – Understand your Patient’s Motivations
- L** – Listen to Your Patient
- E** – Empower Your Patient

Reflections And Questions

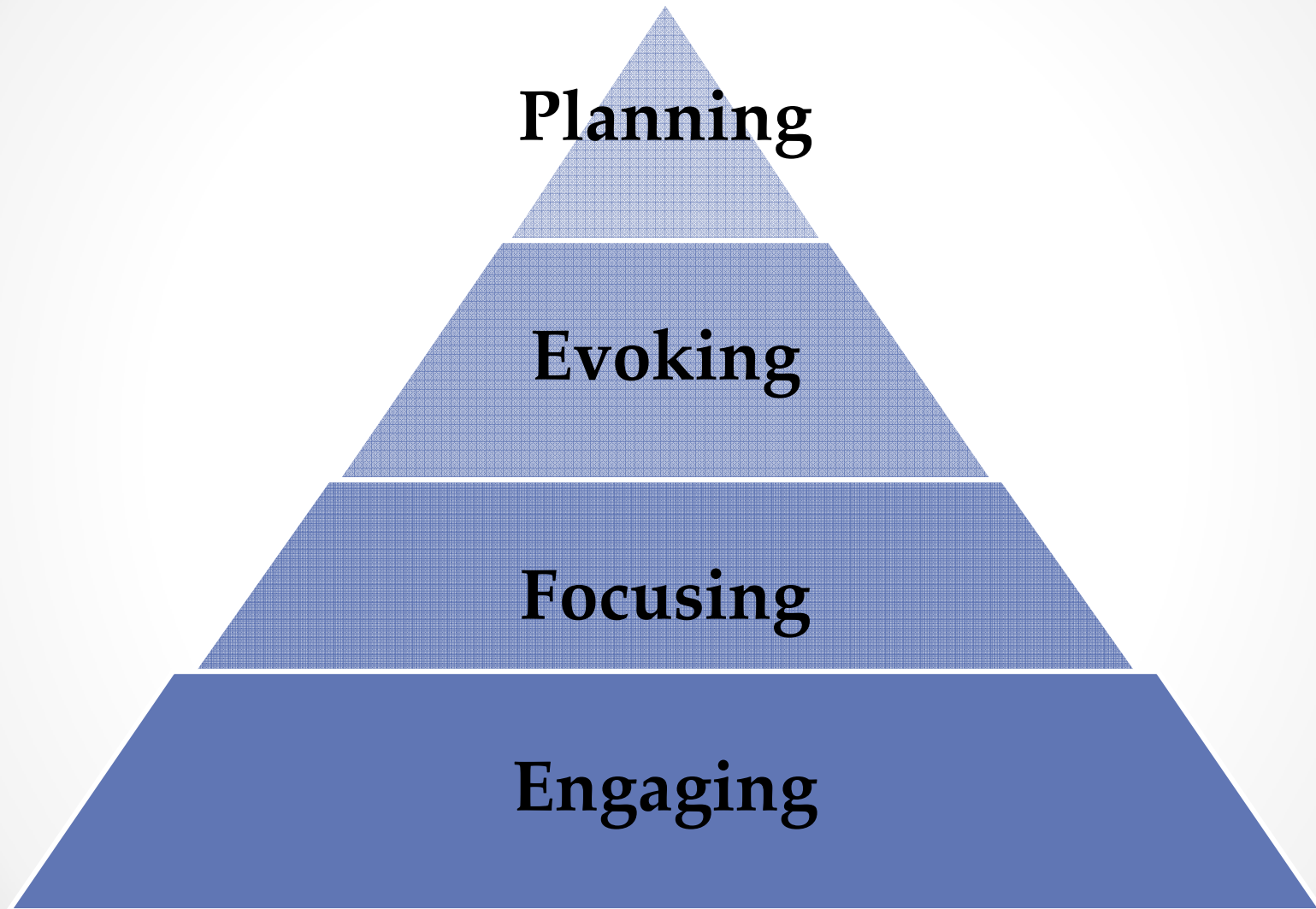


The Elements of Motivational Interviewing

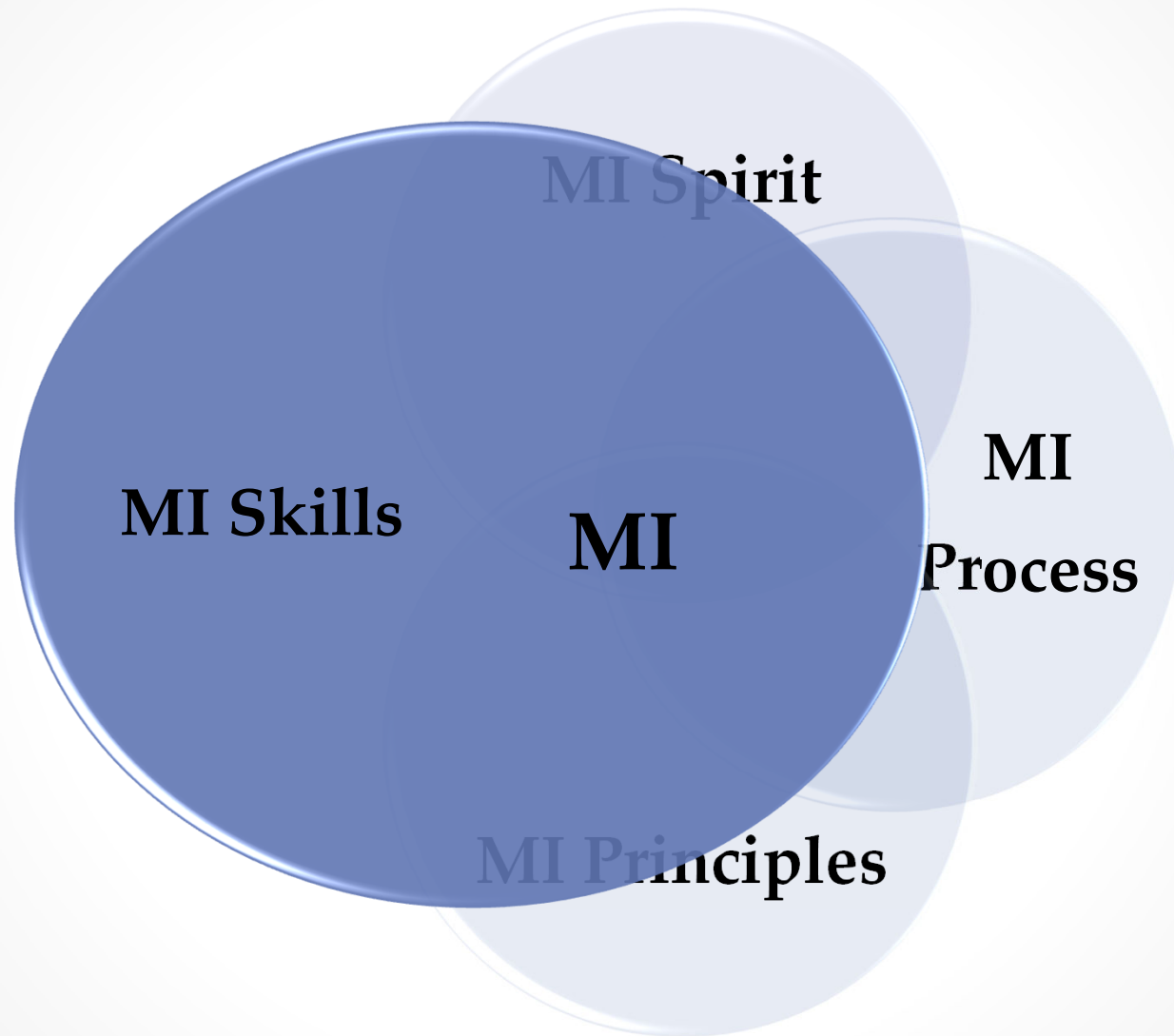


From "Building Motivational Interviewing Skills" by David
Rosenoren no 9

4 Processes of MI



The Elements of Motivational Interviewing



From "Building Motivational Interviewing Skills" by David
Rosenoren no 9

OARS: Basic Skills of Motivational Interviewing

- Open Questions
- Affirmations
- Reflective Listening
- Summaries



Motivational Interviewing
for doing things
patients.

Techniques
dealing with

William Miller, Ph.D.

Giving Information and Advice

- **F**irst Ask Permission
- **O**ffer Ideas
- **C**oncise
- **U**se the Menu Method
- **S**olicit what the client thinks



How can you provide information and respect “ACE”?

- **A**utonomy not Authority
 - It is the client who is in charge of his or her change process and whether or not he or she will make any change at all.
- **C**ollaboration not Confrontation
 - Partnership that supports the self-efficacy of the patient
- **E**vocation not Education
 - The patient is the expert and we elicit insight rather than impart information and “wisdom”.

MI Non-Adherent

Learning to practice MI begins with learning what not to do:

- Do not advise about behavior change without permission
- Do not confront the patient
- Do not give the patient orders

There are times and places you might try these things, but these behaviors are not consistent with an MI approach.

BOX 11.1. MI-Consistent and MI-Inconsistent Assumptions Underlying Information Exchange

MI-inconsistent information exchange

*I am the expert on why and how
clients should change.*

I collect information about problems.

I rectify gaps in knowledge.

Frightening information is helpful.

*I just need to tell them clearly what
to do.*

MI-consistent information exchange

*I have some expertise, and clients
are the experts on themselves.*

*I find out what information clients
want and need.*

*I match information to client needs
and strengths.*

*Clients can tell me what kind of
information is helpful.*

*Advice that champions client needs
and autonomy can be helpful.*

Miller, W. R. & Rollnick, S. (2013) *Motivational Interviewing: Helping People to Change*.
New York, Guilford Press, p.138.

Why Ask Permission to Advise?

Asking permission:

- promotes collaboration
 - communicates respect for the patient's expertise
 - encourages patient to voice his or her perspective
 - focuses the patient's attention on your advice
-
- It is best to ask permission to educate or advise the patient AFTER you have elicited the patient's own thoughts and feelings about a subject

Examples of Asking Permission

“I have an idea here that may or may not be relevant. Do you want to hear it?”

“I think I understand your perspective on this. I wonder if it would be OK for me to tell you a few things that occur to me as I listen to you, which you might want to consider.”

“I don’t know if this will matter to you, or even make sense, but I am a little worried about your plan. Would you mind if I explained why?”

Elicit-Provide-Elicit Technique

E: Elicit patient's ideas first

"Tell me about your experiences with monitoring your blood pressure?"

P: Provide your information/advice next

"Some people have found taking their blood pressure at different times of the day to be useful".

E: Elicit patient's reaction/commitment

"What do think about that?...Is that something you would be willing to try?"

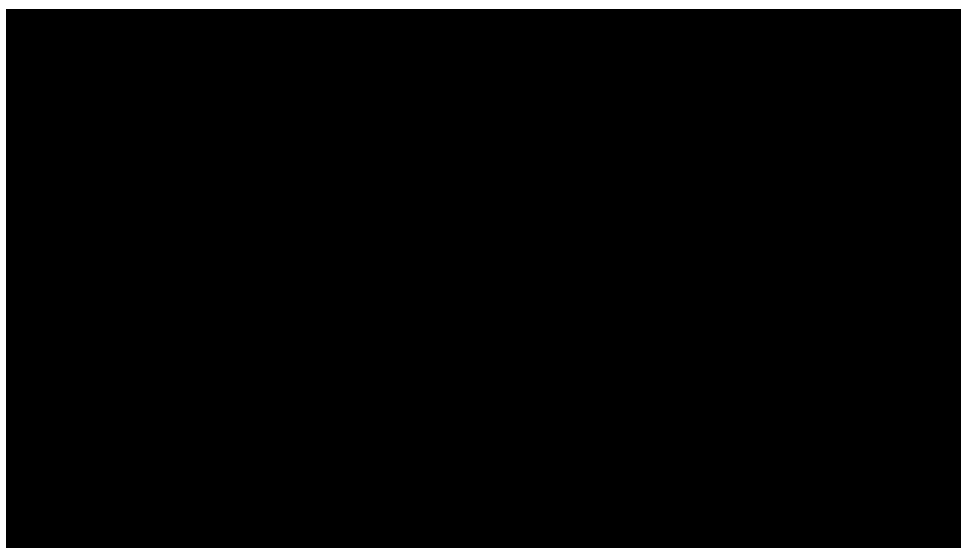
BOX 11.2. Elicit–Provide–Elicit

	Tasks	In practice
ELICIT	<ul style="list-style-type: none">• Ask permission.• Clarify information needs and gaps.	<ul style="list-style-type: none">• <i>May I . . . ? or Would you like to know about . . . ?</i>• <i>What do you know about . . . ?</i>• <i>What would you like to know about?</i>• <i>Is there any information I can help you with?</i>
PROVIDE	<ul style="list-style-type: none">• Prioritize.• Be clear.• Elicit–provide–elicit.• Support autonomy.• Don't prescribe the person's response.	<ul style="list-style-type: none">• What does the person most want/need to know?• Avoid jargon; use everyday language.• Offer small amounts with time to reflect.• Acknowledge freedom to disagree or ignore.• Present what you know without interpreting its meaning for the client.
ELICIT	<ul style="list-style-type: none">• Ask for the client's interpretation, understanding, or response.	<ul style="list-style-type: none">• Ask open questions.• Reflect reactions that you see.• Allow time to process and respond to the information.

Miller, W. R. & Rollnick, S. (2013) *Motivational Interviewing: Helping People to Change*. New York, Guilford Press, p.139.

DEMO





Reflections And Questions



Contact Information

Jim Tillman

openwater@embarqmail.com

252-560-2533