

Motivational Interviewing

by William R Miller & Stephen Rollnick

Ch 1 – The Mind and Heart When Helping

“Practiced with a compassionate and accepting spirit, MI is a method for helping people change and grow”

QOTD – “When people experience being accepted as they are, it becomes possible for them to change” – Carl Rogers

MI = A particular way of talking with people about change and growth to strengthen their own motivation and commitment

Eight characteristics of effective therapists: Accurate empathy, Hope, Positive regard, Acceptance, Shared goals, Evocation, Offering information and advice, Congruence or genuineness

Helping should be person-centered

The **guiding spirit** of MI:

- Partnership – professional expertise; people are experts in themselves
- Acceptance – empathic, warm; a healing factor in therapy
- Compassion – give top priority to client
- Empower – help people realize their own strengths

MI changes how people respond to you; less defensive and more willing to pursue common goals

Practice of MI can change you over time; an antidote for burnout

Ch 2 – What is MI?

“Big picture overview of MI as a way of helping people change and grow”

QOTD – MI is not about installing motivation, but evoking it

QOTD2 – It's not immoral to try to make someone change. It is simply not possible.

Definitions:

Motivation = whatever actually gets someone moving

Interviewing = a particular kind of interaction; interview has a different role than client, but this does not imply a balance of power

Ambivalent = people are ambivalent when considering change; they perceive reasons both for and against changing

Evoke = to give rise to; draw forth; produce

Early guidelines to help people quit drinking:

- Change is a process that emerges over time; often through personal interactions
- Ambivalence is a normal experience when considering change
- The client decide whether change is going to happen
- It is important to understand the client's perspective
- The client (not you) should voice the reasons for change
- It matters what you choose to ask, affirm, reflect
- Don't push back against resistance; it strengthens commitment to the status quo
- Foster hope and **optimism** about client's ability to change

Ambivalence is common...simultaneously wanting and not wanting to change

Avoid a **fixing reflex** and the allure of convincing people to change; but the natural reaction is resistance, to push back

Four tasks in MI: Engaging (Ch 4), Focusing (Ch 5), Evoking (Ch 6), Planning (Ch 7)

- Establish a helping relationship...a safe cocoon in which to consider change
- Three aspects of working relationship: 1) Mutual trust and respect, 2) Agreeing on goals, 3) Collaborating on tasks to reach goals
- MI is not directive; it is directional and purposeful
- Shared change goals help form a working alliance
- Evoking differentiates MI from other approaches; evoking task is about tipping the balance toward change

Some traps to avoid: Expert trap, Persuasion trap, Time trap (rushing), Wandering trap

MI is not just being nice; MI is not a technique; MI doesn't emphasize feedback (?!?)

Ch 3 – A Flowing Conversation

“Basically, MI is a fluid conversation about change and growth...MI is less like playing predetermined notes in a musical composition and more like improvising withing a chord progression”

“In skillful hands, MI may be relatively brief”

To client:

- “Do you mind if I ask you: If there were one or two small steps you could take to be healthier, what would they be?”
- “What ideas do you have”
- If an addict asks if you have used drugs: “I will answer your question, but first I want to understand something: What will it mean to you if my answer is ‘Yes,’ and what will it mean if my answer is ‘No’?”

Genuineness: 1) honest, 2) open and responsive, and 3) humility

Self-disclosure: 1) Truthful, 2) Do no harm, 3) Clear reason why it could be helpful

MI at home: If it’s about *their* growth and challenges, MI can be very useful

Ch 4 – Engaging

The underlying question in engaging is, “Can we walk together?”

QOTD – If you learn nothing else about MI, it is worth your while to develop your ability to engage, and that involves skillful listening.

QOTD2 – Before people speak, they are already thinking and feeling

Engaging task is similar to working alliance in therapy

Getting to know a wide variety of people at a personal level is a privilege of helpers

accurate empathy requires: full attention, mirror (reflective listening)

- Simple reflection – statements; stays fairly close to what client said, but not parroting
- Complex reflection – take a small guess about what person really means
- An encouraging aspect of mirroring...you get better at it with practice

Inflection up at the end = question (“You’re angry with your mother?”)

Inflection down at the end = statement (“You’re angry with your mother.”)

OARS = four useful communication skills:

- Open questions – not yes or no questions
- Affirming – noticing something important and commenting on it; usually something positive or a strength
- Reflecting
- Summarizing – collected reflections to affirm you are getting client’s story right

rapid engaging: doing nothing but engaging; maybe the first 20% of your time with client; requires restraint not to interrupt client’s story

Ch 5 – Focusing

In this chapter, we proceed to a second task in helping people to change and grow: **focusing**. The underlying question here is, “Where are we going?”

QOTD – Having clear goals is a fundamental component of human motivation.

Counselor intro: What would you like to talk about today?

One characteristic of more effective counselors is that they have well-defined goals in mind and a coherent plan for reaching them.

Where do goals originate? By far the most common source is the client.

Once you clarify shared goals, you face the further challenge of staying focused on them.

Three focusing scenarios: 1) Straightforward goals, 2) Choosing a path (multiple choice), 3) Clarifying (no clear goal/path)

bubble sheet: draw circles with options on a piece of paper; use it to guide conversation

MI and trauma:

- People with substance abuse disorders are far more likely to have trauma in their past
- PTSI = Post Traumatic Stress Injury (not a disorder)
- MI well suited because of: affirming strengths, respecting choice, evoking hope, listening with accurate empathy

Summary: The focusing task clarifies shared goals, and counselor skill lies in the ability to keep those goals in mind and gently focus on them if you veer off.

Ch 6 – Evoking

“Evoking literally means calling forth what is already present. The evoking aspect of MI is a primary vehicle for empowerment. Why would I go there?”

QOTD – People are easily immobilized by ambivalence

The pro-con balance responds to MI skills.

The language of change:

- **DARN** = Desire, Ability, Reasons, and Need to change

Mobilizing change talk (when people are closer to actually changing):

- **CAT** = Commitment, Activation, Taking steps

Sustain talk: anti-change, opposite of DARN + CAT

Inviting change talk:

- Directional questions – use rules to gauge importance and confidence
- Exploring extremes – exploring best benefits of change and worst consequences of not
- Looking back/forward – recall better days in past, or imagine better days in future
- Exploring goals/values – what is important to this person

Strengthening change talk:

- OARS – Open-ended questions, Affirming, Reflecting, and Summarizing
- Directional reflections/summaries – reflect positive things that advocate change

Ethics and Encouraging specific changes:

- Because the client asked you to
- Purpose of your workplace (smoking cessation program)
- Client’s imminent well-being (suicide hotline)
- Sometimes unethical to be neutral (when behavior causes harm)

Ch 7 – Planning

“Now we turn to the **how** of change, the planning task in MI.”

QOTD – Hope is the belief that change is possible

QOTD2 – Confidence in one’s ability (self-efficacy) is a good predictor of it happening

1. The transition from Why to How

Query readiness for change with **brief action planning (BAP)**:

1. “Would you like to develop a concrete plan?”; like a SMART plan
2. Ask client to restate the plan in their own words
3. Assess client’s level of confidence; try the confidence ruler (smile)
4. “Would you like to build in some accountability?”; then recruit friend or family member

Signs of readiness: People are reluctant/ambivalent when considering change; listen for change talk:

- You start hearing change talk
- Sustain talk decreases
- Notice a feeling of resolve, peace
- Client envisions change; for example, imagining out loud
- Client asks questions about change
- Client talks about taking steps

2. Testing the water

Ready to plan? Test out by summarizing change talk themes you’ve heard

key question: “What’s next?” or “So, what do you think you’ll do?”

Rarely ask “Are you ready?” directly; too pushy, like asking for a commitment

Resist the fixing reflex; easiest mistake is becoming too directive; “fixing reflex can have a powerful pull”; good intentions, but usually misplace compassion

3. Negotiating a change plan

If magnitude of change seems daunting, just settle on a first step

View change plan as an experiment, something to try, a choice among many options

4. Evoking hope and confidence

Sub-sections: a) Confidence talk, b) Confidence ruler, c) Identify and affirm strengths, d) Review past successes, e) Reframing, f) Responding to confidence talk, g) Finding hope

“In essence, self-efficacy is about a person’s belief that change is possible”; self-efficacy is an important motivational element in how people decide whether to take action

reframing: suggest a different perspective; reinterpret past failure

Respond to client’s confident talk with OARS (Open-ended questions, Affirming, Reflecting, Summarizing)

“Human beings are amazingly resourceful”; MI trusts and respects client’s solutions

5. Strengthening confidence: An example

Reflecting is the key skill; “Again the interviewer reflects instead of jumping in with answers”

Interviewer: “I certainly don’t have the answers for you, but I have a lot of confidence that you do and that working together we can find a way out.”

Use **brainstorming** to get client to lead planning talk

Ch 8 – Deeper Listening

“Extensive research shows that positive changes are consistently related to helpers’ skillful expression of empathic understanding, which is what we mean by deep listening”

Continuing the paragraph: a deeper level of reflection; offer next sentence in the client’s paragraph.

Overstating and understating: mirror the intensity of the client

- Understate – give client a chance to say more
- Overstate – give client a chance to back down a bit

Double-sided reflections: include both sides of client’s dilemma; “You enjoy driving yourself around, but you don’t want to injure anyone”

Analogies: can be powerful, if you hit the right tone

“Before we began practicing behavior therapy, however, we were required to complete a year-long course in how to talk to clients.”

Ch 9 – Focusing: A Deeper Dive

Emphasis: “shared decision making”

What if client’s goal is different than the helper?

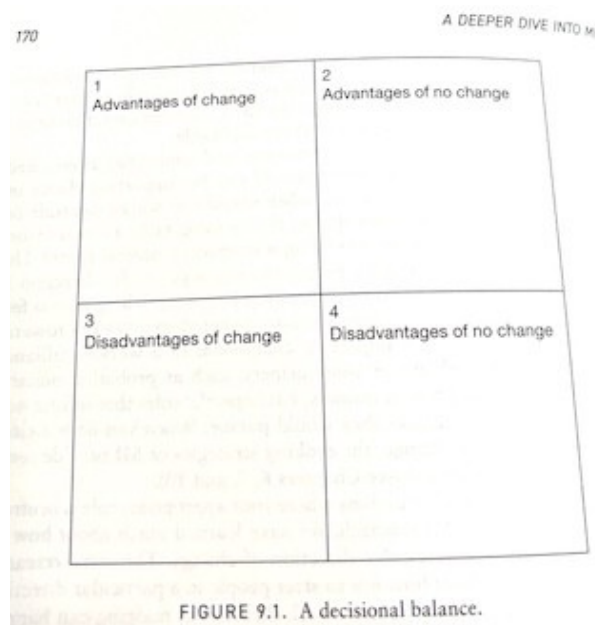
- Pressure from helper leads to advocating for change with people who are hesitant or even averse to it
- Persuading is “virtually the opposite of MI”; don’t respond to the fixing reflex
- It’s not a goal until it is shared and the client accepts it

value-behavior discrepancies: When short-term behavior falls short of or contradicts long-term life values

More structured approach to exploring client values: use deck of “values cards” (see page 164-167) to help client identify his/her values; two ways: 1) sort cards into Not important, Important, Very important piles, 2) pick out 5/10 cards that are most important and rank them

Maintaining neutrality: “During the focusing process, you may identify issues to be resolved without your favoring one choice over another.”

Decision square (page 170): Help client evaluate choices



Ch 10 – Evoking: Cultivating Change Talk

“This chapter offers more depth on how to cultivate change talk.”

cultivating change talk: using specific evoking skills to move toward a clear focus or goal; or responding in a manner that increases depth, strength, or momentum of client’s change talk

QOTD – “In sum, it matters what client language you invite and strengthen.”

Three important aspects of the evoking task: 1) Be able to recognize change talk, 2) Inviting change talk, 3) Respond to change talk (reflect, ask more, affirm)

When you’re hearing change talk, a simple “What else?” may help the client continue

In evoking task, choose to say things likely to evoke change talk rather than sustain talk

experiencing: depth of client’s introspective engagement in therapy; low = talk about themselves in the abstract, past tense; high = more immediate, first-person, present tense

Evoking client’s change talk gives them greater hope to change

Examples of MI is groups: weight loss, diabetes management, reducing alcohol use

“Compared to a didactic approach, an MI group can improve client outcomes.”

vertical ambivalence: client is cognizant of one motivation, but not consciously aware of the other conflicting motive

Ch 11 – Offering Information and Advice

The key: Offer advice without triggering opposition or defensiveness. (not easy)

QOTD – “After all, when you seek advice from someone it’s certainly not because you want them to give it. You just want them to be there while you talk to yourself.” - Terry Pratchett

QOTD2 – Unsolicited advice is the junk mail of life

Ways to offer information or advice to clients:

- Get permission – “Would you be interested in hearing...”; “Can I offer you a couple suggestions?”
- Support autonomy – acknowledge client’s freedom of choice; similar to getting permission
- Offer choices – clients respond better when they can choose among options
- Ask-Offer-Ask – opening ask, then offer a chunk of info/advice, then ask again...rinse and repeat to create a natural back-and-forth rhythm

When a helper is making suggestions, a natural response is sustain talk.

“By listening well both before and after offering information or advice it can be seamlessly woven into MI.”

Ch 12 – Supporting Persistence

This chapter focuses on how the four tasks of MI can continue to be useful once you have arrived at an initial change plan and the person has decided to proceed.

A person-centered approach helps clients stay motivated and complete homework assignments

Many changes require sustained effort over time: weight loss, treating depression

Setback, relapse is a common problem; helpful to catch setbacks early, normalize them, and keep them from derailing client's change plan

When difficulties arise, don't fall into directive style...stick with MI techniques

Revisit MI tasks:

- re-planning – adjust to take small steps in the right direction
- re-evoking – purpose is to review and renew client's intention to pursue the identified goal; “Is this still what you want to do?”; return to change talk with clients
- re-focusing – shifting focus when circumstances change; make choices conscious and explicit
- re-engaging – when client is disengaging, revisit engaging methods with OARS skills

MI style conversations can be part of many treatment methods: CBT, Gestalt, etc

Ch 13 – Planting Seeds

“If someone truly seems to have no ambivalence about what concerns you, you can try planting some seeds that may sprout later...In essence, you are hoping to create some ambivalence.”

QOTD – Confrontation is notoriously ineffective in changing behavior

What if no change talk to evoke? Aka the pre-contemplation stage of change.

Sub-sections:

1. Exploring what the person already knows – encourage change talk about problems the client already aware of
2. Exploring what others know – spouse, friends, etc
3. Offering your own expertise

Be careful not to be thinking **gotcha** in these situations

40 years of MI experience = client in-session behavior can change quickly; resistance and denial can be dialed up/down depending on therapist behavior

Ch 14 – Responding to sustain talk and discord

“Responding well to sustain talk and discord is a key to successful motivational interviewing if you can recognize it for what it is: an opportunity.”

MI has always been a way to approach difficult conversations; listening approach rather than arguing or persuading

Resistance is just sustain talk, a normal part of ambivalence

ambivalence = thinking and feeling two different ways about something at the same time; a universal human experience

psychological reactance = defensiveness when pressures; “When someone holds power over us, the human spirit’s instinct is to rise, resist, and rebel”

discord = negative comments directed at you or your relationship with client

softening sustain talk = don’t push back

DARN = I **don’t** want to; am not **able** to; have no **reason** to; and don’t **need** to

Reflective listening responses: amplified reflection; double-sided reflection

Other strategic responses:

- Emphasize client autonomy – “nobody can decide that for you”
- Reframing – suggest different meaning or interpretation of things
- Shifting attention – move away from a contentious issue
- Apology
- Pendulum approach – explore both sides of ambivalence
- Coming alongside – connect with client’s reluctance; “At this point, repairing your relationship is impossible”

Ch 15 – Practicing Well

MI from three perspectives: Helper, Person (client), Relationship

QOTD – If you're unsure how your relationship is going, ask!

1. The Helper

Guiding is effortful and demanding

Responsibility: The person you are helping could benefit from change

When your intent is to cause (force) people to change, they are likely to resist

You can invite and make change more possible, but you cannot make it happen

Focus on the present, like mindfulness

2. The Person

You need to know what motivates the people you seek to help

Change and growth require a person's active participation

3. The Relationship

Stressing compassion, client autonomy

Ch 16 – Learning MI

“So how can you develop skillfulness in the practice of MI?”

QOTD – It turns out that developing skill in the practice of MI is not as easy as we imagined.

MI training requires: 1) workshop, 2) individual feedback and personal coaching

- MI is learnable
- Learning MI on your own is hard
- Attending a workshop is not enough
- People overestimate their MI proficiency
- Feedback and coaching based on observed practice is best approach
- Empathic listening is a good head start to learning MI

Motivational Interviewing Network of Trainers (MINT): to get certified, trainer must submit a sample demonstrating reasonable skillfulness in MI

1. Engaging skills

Practice in daily life: OARS

2. Beyond engaging skills

“MI is much more than good listening. The vital person-centered skills are then applied in purposeful ways to help people move toward change.”

Focusing task = change goals

- Recognize change talk, sustain talk, discord
- Don't just wait for change talk to happen, “invite” it...using OARS approach
- When evoking, try to strengthen change talk by client

3. Softening sustain talk and discord

Try to decrease intensity of sustain talk and discord; using same overall MI approach

4. Deliberate practice

“Setting aside separate time and special effort to get better at what you do”

“In MI, the interviewer usually is speaking less than half the time.”

“Offer at least as many reflections as questions; better still, twice as many.”

Make audio tape of MI session: Usually helpers are more reluctant than clients

5. Reviewing your skills

How confident are you in your ability to: _____

- Spirit of MI – Affirm client strengths; Beginner’s mind (curious); No fixing reflex
- Engaging – Ask more open-ended questions; Turn a question into a reflective listening statement; Talk less than half the time; Deescalate client discord or anger; OARS
- Focusing – Develop a working alliance; Have clarity in goals
- Evoking – Recognize change talk (DARN CATS); Evoke change talk with directional questions, confidence rulers, double-sided reflection; Ask permission before giving advice; Respond to sustain talk in a way that softens it; Respond to change talk with OARS; Plant seeds when there is little change talk happening; Help client identify his strengths and past successes

Ch 17 – Learning from Conversations about Change

Imagine trying to help singers improve without listening to them...

QOTD – In theory, there is no difference between theory and practice. In practice, there is.

QOTD2 – Quality assurance requires extra effort

1. Listening to practice

When listening to actual practice, you can see the interpersonal processes of MI at work

A 10 min sample is usually sufficient

Be generous with positive feedback

Rating scales: “There is no shortage of MI rating scales”

- inter-rater reliability – different observers have same/similar scores of a session
- MI Training Integrity (MITI) – four 5-point scales: 1) cultivating change talk, 2) softening sustain talk, 3) forming a partnership, 4) showing empathy

Behavior counts: Important to have clear definitions

- Questions – open-ended, closed, evocative, fact-finding
- Reflection – simple and complex (adds emphasis to what client has said)
- Affirming – accentuate something positive about the client
- Giving information – info, education, feedback; without persuading, warning, etc
- Seeking collaboration – seek consensus; asking permission to offer advice
- Emphasize choice – honor client’s autonomy (choices, decisions)
- Persuasion responses – with or without permission
- Persuade without permission – negative count, DON’T do this
- Confront – negative count, DON’T do this

“A simple starting point could be just to count reflections and questions” (Bill: Amen, brother)

2. Quality of MI in practice

“Many more people believe they are delivering MI than actually are”

There is no quality control on the practice of MI (or any other modality) because it is not a trademark or copyright

implementation science: study how interventions are delivered in routing practice

fidelity drift: becoming lax in MI practices over tie

AI in the future: 1) Determine what aspects of MI predict client outcomes, 2) AI does the MI

Author summary: What do humans add that AI can't? Author: “I wonder.” (Bill: Hey now)

Ch 18 – Studying MI

“In this chapter, we provide a summary of what has been learned from thousands of studies of MI.”

1. How well does MI work?

With 2,000 controlled trials...“something beneficial is going on with MI”, “more helpful than doing nothing or just telling people what to do”

About a quarter of MI trials report no significant benefit

2. How does MI work?

relational aspects: person-centered approach to building relationships

technical aspects: evoking and strengthening change talk, softening sustain talk and discord

Helper skills that lead to better outcomes: 1) More MI responses; 2) More MI spirit with warm, empathic style; 3) Focus on clear goal(s)

Efficacy in MI sessions: 1) Lower resistance; 2) More change talk than sustain talk; 3) Greater client self-efficacy for change

3. With what problems is MI effective?

Addiction: Original focus of MI; Effective with problematic drinkers, smokers

Health care: MI used to increase treatment adherence and to promote self-care

Psychosocial applications: MI applied to anxiety and depression; student behavior problems

4. For whom does MI work?

MI is “particularly helpful for people with initially lower motivation for change and higher initial anger or resistance”

However, “more highly motivated individuals fared better without receiving the MI intervention”; MI wastes time with these people

5. Some recommendations for future research with MI

Combination of MI, CBT, and 12-step programs

MI is often combined with other evidence-based treatments

MI efficacy in groups is unclear

Matching Alcoholism Treatments to Client Heterogeneity (MATCH)

Amplifying (positive) additions to MI:

- Affirmation – OARS
- Assessment feedback – frequent (yes!)
- Autonomy support – improve client self-esteem and self-efficacy
- Significant others – include SO in the treatment process
- Values exploration – “values-based MI intervention”
- MI combined with other treatments – MI at the beginning, brief
- Training in MI

Unexpected research findings:

- Why does accurate empathy matter so much?
- Why do clients given a brief intervention and self-help materials improve quickly?
- Why does sustain talk often matter more than change talk in predicting outcomes?
- Why do counselors have such different client outcomes with the same MI approach?