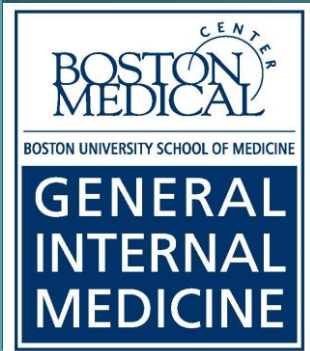# Helping People Change

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Boston Medical Center is the primary teaching affiliate
of the Boston University School of Medicine.

PERSUADE YOUR PARTNER

- They drink, smoke, eat poorly and don't exercise regularly
- Get them to change

- BRAINSTORM

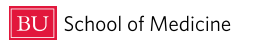# WHAT IS MOTIVATION?
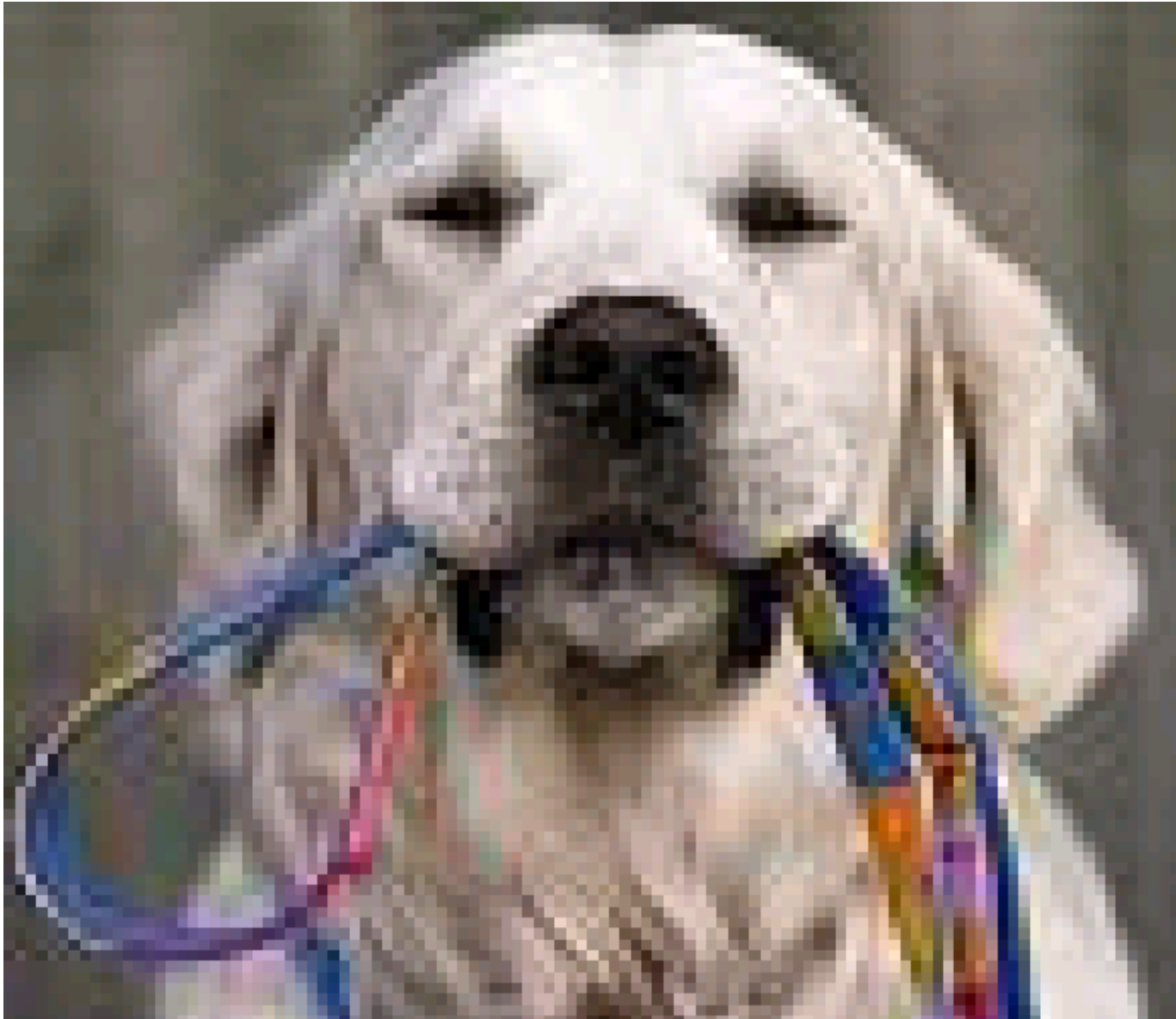# (OR LACK OF MOTIVATION?)

- A personality trait?

WHAT IS MOTIVATION?
(OR LACK OF MOTIVATION?)

- A result of a confrontational counseling style
- Ambivalence is normal
- The probability that a person will enter into, continue, and adhere to a specific change strategy
- A state of readiness to change

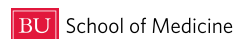# Ready, Willing, and Able

- Willing: The <u>importance</u> of change

- Able: <u>Confidence</u> for change

- <u>Ready</u>: A matter of priorities

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IMPORTANCE AND CONFIDENCE

- Unwilling and Unable   (Low/Low)
- Unwilling though Able   (Low/High)
- Willing but Unable   (High/Low)
- Willing and Able   (High/High)

# Willing, Able but not Ready…

Readiness: A "Quick" Version
"On a scale from 0 to 10…"

- "…How *important* is it for you right now to…?"
  - **"Why did you say 3 and not 0?"**
  - "What would it take to get you from 3 to 6?"
- "If you did decide to change, how *confident* are you that you would succeed?"
- "You've decided to change, and think you could succeed-- when will you do it?"

A WAY TO COUNSEL TO INCREASE MOTIVATION?

- Motivational interviewing is a <u>directive</u>, <u>patient-centered</u> counseling style for eliciting behavior change by helping clients to explore and resolve <u>ambivalence</u>.

- Accurate empathy is a key skill <u>Empathy by Brene Brown</u> <u>https://youtu.be/1Evwgu369Jw</u>

- "Spirit" of MI: collaboration (partnership), evocation (listening and eliciting), autonomy (ability to choose)

Rollnick, S., & Miller, W. R. What is motivational interviewing? Behavioural and Cognitive Psychotherapy. 1995;23:325-334.

CARE BOSTON MEDICAL CENTER EXCEPTIONAL CARE. WITHOUT EXCEPTION. BU School of Medicine
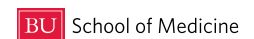
PRINCIPLES OF MOTIVATIONAL INTERVIEWING

- Engage (to connect)(empathy, affirmation)
- Focus (prioritize/agree on topic)
- Evoke (discrepancy and change talk)
- Plan

Miller & Rollnick. Motivational Interviewing 2012 3rd ed

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Empathy

- Acceptance facilitates change
- Skillful reflective listening is fundamental
- Ambivalence is normal

Discrepancy

- Change is motivated by a perceived discrepancy between present behavior and important personal goals or values
- The person rather than the counselor should present the arguments for change

SELF-EFFICACY

- A person's belief in the possibility of change is an important motivator
- The person, not the clinician, is responsible for choosing and carrying out change
- The clinician's own belief in the persons ability to change becomes a self-fulfilling prophecy

ROADMAP OF A MOTIVATIONAL INTERVIEW

- Building motivation for change (Part I)
  - Enhancing alliance and autonomy
- Negotiating change and strengthening commitment (Part II)
  - Providing information while creating dialogue

MI ROADMAP headings (MI is higher level skill)

Brief intervention tasks
(simpler, MI informed)
ASK/ASSESS condition
Feedback with permission

Open-ended questions (include pros and cons (discrepancy), values, goals)

-Pros and cons

Reflective listening (expresses empathy)
    Affirm
    Readiness to change/Elicit change talk   **-Readiness**
    Summarize and ask key question

Information and advice (with permission—
it's up to you [responsibility])

-Advice

Negotiate and commit to goals and a change plan
(if ready)(support self-efficacy)

-Goal setting/Menu/Arrange

Change Talk
Self-Motivating Speech

- Disadvantages of Status Quo

- Advantages of Change

- Optimism for Change

- Intention to Change

CHANGE TALK
DARN-C

- <u>D</u>esire
- <u>A</u>bility
- <u>R</u>easons
- <u>N</u>eed
- **<u>C</u>ommitment**

REFLECTIVE LISTENING

- SIMPLE (repeat, rephrase)
- PARAPHRASE (infers meaning)
- REFLECT FEELING (emphasizes underlying emotion)
- Variations: Amplified, Double-sided

HOW DO I TEACH THIS?

INTEGRATE

- Video, media
  - http://www.motivationalinterviewing.org/
- Demo with patient, interactive wkshp
- NIDA CE online
  - https://www.drugabuse.gov/blending-initiative/cme-ce-simulation

TEACHING POINTS

- Reflective listening microskill
- Consider behavior in context of values
- The patient's reasons are best and most efficient