

AZCEH May 21, 2015

motivational interviewing

applications for homeless populations

Adrienne Lindsey, MA, DBH



part I: helping styles overview



group discussion

Think of a favorite teacher or mentor you had in the past....

- What were some of the characteristics they embodied that were helpful to you?
- How did they interact with you?
- What would you want to emulate from them?

**What is the primary
predictor of clinical
success?**

YOU

(the “therapeutic alliance”)

(the “therapeutic relationship”)

helping styles

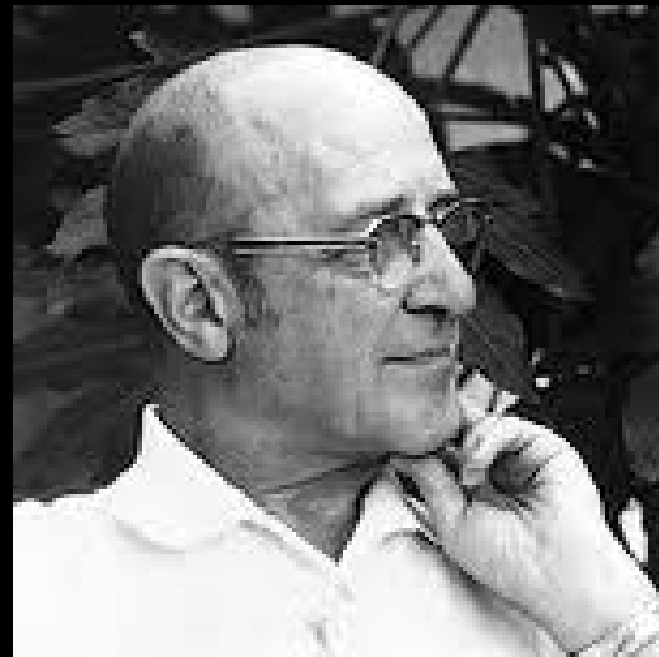
- following
- directing
- guiding



following helping style



Think Carl Rogers....



directing helping style



Think Bob Newhart....



“righting reflex”



- our innate tendency to ‘correct’ other people’s behavior
- premise: “*I have the answer, if you just do things this way, things will get better for you.*”
- this is well-intended, the intent is to help
- in MI we try to repress this reflex



disengagement

**breakdown
in relationship**

pessimism

defensiveness

hostility

tension

**directing helping
style results in**

hostility

anger

frustration

no-shows

guiding helping style



Think Bill Miller....



likelihood of returning

optimism

empowerment

engagement

trust

**guiding helping
style results in**

talkative client

receptiveness

good rapport

part II: **ML introduction**

MI definition....



“person-centered counseling method for addressing the common problem of ambivalence about behavior change.”

(Miller & Rollnick, 2010)



“MI Spirit”

- accepting the client without judgment (without condoning their behavior)
- avoiding confrontation

Acceptance

- ≠ sympathy
- advocating for the client
- empathizing with the client

Compassion

- collaborating
- working as equals
- remaining outside of the ‘expert’ role

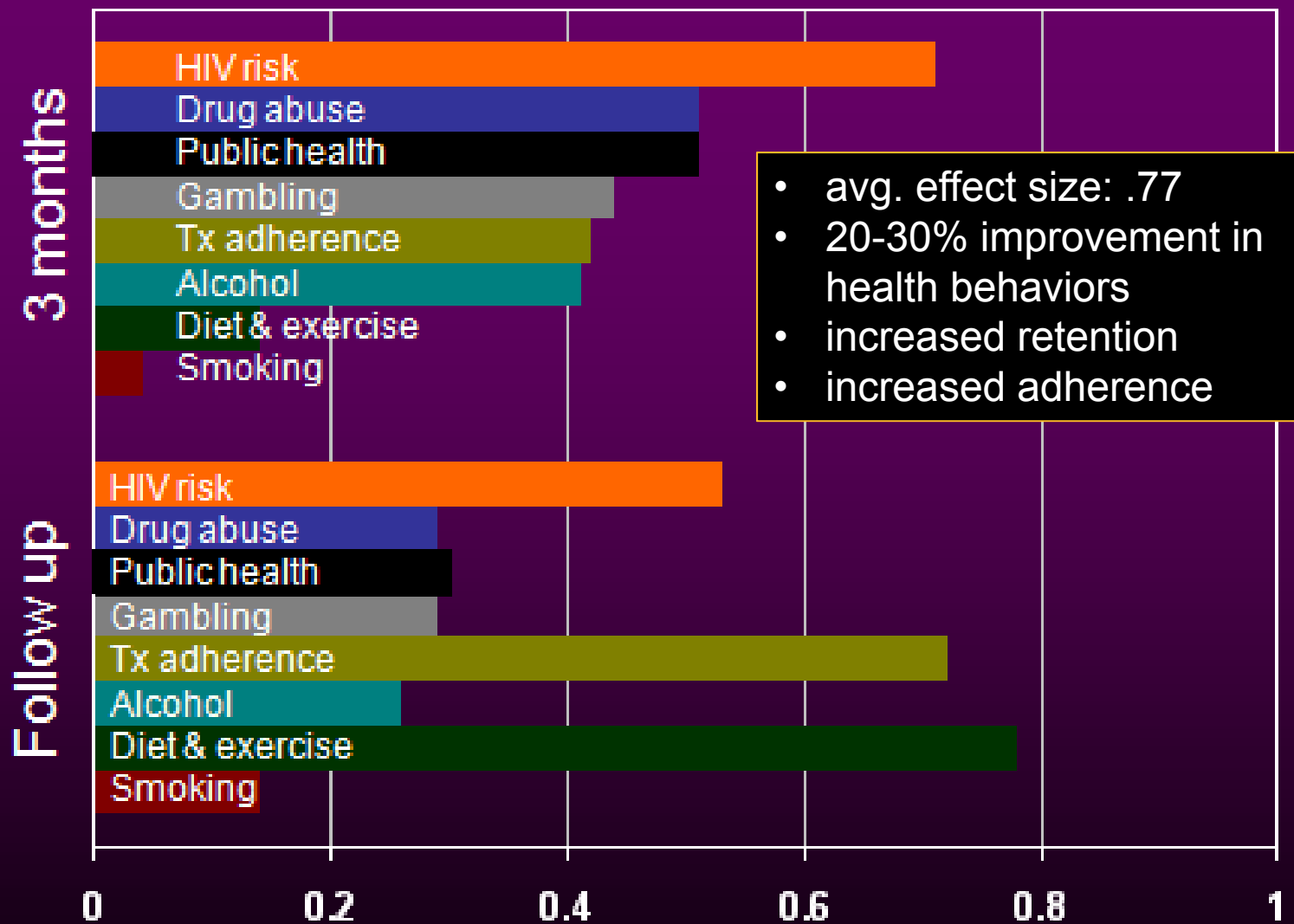
Partnership

- evoking change talk
- eliciting the client’s reasons for change

Evocation



is MI effective...?



Hettema, J., Steele, J. & Miller, W. (2005). A meta-analysis of research on motivational interviewing treatment effectiveness (MARMITE). *Annual Review of Clinical Psychology*, 1, 91-111.

**MI is 2-3 times as
effective with ethnic
minorities**

the evidence (cont'd)



- large meta-analysis of 119 MI studies
- results:
 - 3/4's of the sample (75%) demonstrated improvement
 - resulted in improvement across many target behaviors (treatment retention, reduced substance use, etc.)
 - MI took less time, but produced equivalent results to CBT, 12-Step, etc.
 - MI improved one's intention to change
 - effects often maintained over time (up to two years after intervention)

(Lundahl, Kunz, Brownell, Tollefson, & Burke, 2010)

exercise: A Taste of MI vs. Persuasion



Persuasion Exercise:

- 2 volunteers (1 client; 1 helper)
- client: choose something in your life you would like to change
- helper: attempt to persuade them to change
 - offer advice or suggestions
 - warn them about the consequences of *not* changing
 - seek suggestions from the group when necessary

exercise: A Taste of MI vs. Persuasion



A Taste of MI:

- 2 volunteers (1 client; 1 helper)
- client: choose something in your life you would like to change
- helper: ask them the following....

Why would you want to make this change?

If you decide to make this change, how might you go about it in order to succeed?

What are the 3 best reasons to do it?

How important is it to you to make this change, on a scale from 1 to 10 (10=most important)?

What do you think you'll do?

goal is for clients to
talk *themselves*
into changing

part III: managing change & sustain talk

target behaviors



how do we get to the target behavior?



1. increasing *Change Talk*
2. decreasing *Sustain Talk*

change talk can be increased by using
open questions and reflections

change talk



anything the client says that indicates they're moving toward the behavior we want them to engage in...

examples:

- I don't want to use anymore.
- I can't go back to prison.
- I might be able to get a job.
- I could probably manage to take my meds for the next 2 weeks.

sustain talk



anything the client says that indicates they're moving away from the target behavior...

examples:

- This is so hard. Everyone expects too much out of me.
- I don't know why I can't do it.
- I haven't succeeded at anything in the past.
- No one will hire me.

**ambivalence
+ righting reflex
= sustain talk**

reducing sustain talk



reducing sustain talk makes your job easier!

you can avoid **power struggles** and reduce **burnout** by reducing sustain talk



the key to MI



- we believe what we say, not what we hear
- our job is to arrange conversations so that clients talk themselves into changing
- we do this by bringing out more “change talk” and cutting out “sustain talk”

there is evidence
that **reflective**
listening alone is
insufficient to
produce change

part IV: **core skills**

core components of MI



- **O**-open-ended questions
- **A**-affirmations
- **R**-reflections
- **S**-summaries



**open-ended
questions**

open vs. closed questions



closed questions = those that can be answered “yes,” “no,” or in a few words

- Ex: Where are you from?
- Ex: What is your drug of choice?
- Ex: How old are you?

open questions = those that require a longer answer

- Ex: Tell me about your hometown.
- Ex: What is your family like?
- Ex: Tell me about your drinking.

the impact of closed-ended questions

- leave the client waiting for the next question
- feel more like an interrogation
- don't expand the conversation
- if you don't ask the right question, you might miss something



open-ended questions practice

affirmations

affirmations



- praising or affirming the client
- support autonomy & empathy
- build the therapeutic relationship

examples:

- “You’ve been working really hard to cut back.”
- “I just want to commend you in taking the first step in getting a job.”
- “You feel like you have a ways to go, but you’ve come a long way so far.”



affirmation thought exercise



- think of an affirmation that you received in the past
- write it down
- what about the affirmation was particularly **impactful**? why do you recall it months or years later?
- share with the larger group if you wish

group exercise: generating affirmations



- work in pairs
- think of your most challenging client
- generate 3 genuine affirmations about them; speak them aloud to your partner as you would to your client
- switch
- share with the larger group (if you wish)

reflections

group exercise

The Power of Reflections

- need 1 volunteer
- give the group one sentence about an issue you have been struggling with
- leave the room; continue to reflect on this struggle, writing down a summary of the problem
- larger group: generate reflections
- volunteer re-enters; compare and contrast volunteer's write-up with group's reflections

simple reflections - defined



- responding to resistance with non-resistance
 - acknowledge and validate
 - can elicit opposite response
-
- emphasize change talk
 - encourage more change talk - client opens up
 - enhance collaboration, trust, and rapport
 - clarifies points of confusion

simple reflections (cont'd)



Client says: *“I’ve been out here a long time.”*

Helper says: *“You’ve been on the street a number of years.”*

complex reflections



complex reflections



Client says: *“I’ve been out here a long time.”*

Helper says: *“This has been a way of life for a long time, but you’re starting to think you don’t want this to be your legacy.”*

complex reflections (cont'd)



Client says: “*I’ve been smoking for a long time.*”

Helper says: “*It’s become a part of who you are now, but you don’t want it to be.*”

double-sided reflections



- to explore ambivalence
- “So on the one hand you...but on the other you want...”
- work off of previously supplied information
- end on the change talk

double-sided reflections



Client: *“I know I need to quit smoking for my health, but it’s so hard to stop.”*

Helper: *“So on the one hand you are worried about withdrawal from nicotine, but on the other hand you don’t want to die from smoking.”*

double-sided reflections



Client: *“I don’t smoke anymore than anyone else I know. What is wrong with a joint or two a week?”*

Helper: *“On the one hand, it seems like you are not using any more than your peers; on the other hand you have told me you’re concerned about your marijuana use and how it effects you.”*

amplified reflections



- exaggerate what the client says
- turn up the volume on what the client says or downplay what the client says
- may elicit the other side of their ambivalence
- *goal*: they come back with change talk
- useful when the client is engaging in a lot of sustain talk

the key: to deliver without sarcasm

amplified reflections



Client: “*I really can’t do this anymore.*”

Helper: “*There’s a few things you don’t like about being without a home.*”


ruined reflections




ruined reflections

- meant to be a reflection, however, inflection at end sounds like question
- example: “You’re seeing that your drinking is having some real consequences now, right?”





We want **twice** as
many reflections as
questions in an ML
style



We want at least **half**
of our reflections to be
complex versus
simple reflections

reflections practice

summaries

summaries & key questions



- summarize key points (snippets of change talk) from the conversation (this is akin to a long reflection)
- use the summary to direct the session toward the target behavior or transition
- end with a key question (open) that evokes change talk and moves the client into a planning phase

example: “Most of your life you’ve dealt with frustration through getting physical. You’re really frustrated with all the legal troubles you’ve had because of your fighting, and all the ways it’s limiting your activities. And you sometimes feel bad after you hurt somebody. What might it take for you to learn a new way of venting your anger?”

part V: **goal setting**

**MI is *less*
effective when
manualized**

**timing will be
largely based on
clinical judgment**

going for a change
plan **too early** may
impede the client's
engagement

if you get **sustain
talk** when striving
for a change plan,
go back to evoking
& engagement

temptation: reverting
to a **directing**
helping style during
the planning stage

hints the client is ready



- ↑ change talk
- ↓ sustain talk
- categories of change talk: steps, commitment
- “resolve”
- imagining the future with the change enacted
- asking questions about the change or methods for change



proceeding with the change plan



- 1) ask permission/gauge readiness
- 2) recapitulation
 - long reflection of all of the change talk you've heard up to that point
 - avoid summarizing all of the sustain talk you've heard
- 3) key question
 - e.g. "How do you think you might move forward from here?"
- 4) allow for silence/allow client to process their response