Motivational Interviewing

Goals & Key Areas of MI
- The overall goal of MI is to explore and resolve clients’ ambivalence in order to enhance their motivation to change.
- Successful resolution of said ambivalence will occur by facilitating client statements that reflect:
  - Self-Esteem – their belief that they are “OK” (this must happen so they feel powerful enough to change)
  - Concern – concern about their behaviors
  - Competence – their ability to make changes
  - Knowledge of Problem – recognize their problem behavior(s)
  - Knowledge of Strategies – reflect on strategies for change
  - Desire to Change – reflect a desire for things to be different

The FRAMES Acronym
- Feedback
- Responsibility
- Advice
- Menu
- Empathy
- Self-efficacy
F, R, & A
- Feedback – through structure, clients are encouraged to reflect on their lives, their choices, and their behaviors
- Responsibility – all responsibility for change lies on the client
- Advice – counselor takes an active role and gives advice that is clear, simple, and non-authoritative

M, E, & S
- Menu – clients are given a menu of treatment choices (increases ownership)
- Empathy – the active ability to understand, and reflect that understanding, to the client (can include confrontation and challenge)
- Self-efficacy – the clients’ belief that they have the ability to succeed

Helping Tasks to Support FRAMES
- Be empathic – expressing warmth, acceptance, and a nonjudgmental attitude
- Point out discrepancies – between clients’ present behavior and their long-term goals
- Avoid arguments – confrontation leads to resistance, refer back to responsibility
- Roll with resistance – change strategies, allow client to find their own solutions
- Support self-efficacy – the most important aspect of MI
MI Techniques

- Open-ended questions
- Reflective listening
- Give advice
- Remove barriers
- Provide choices
- Decrease desirability
- Actively help the client
- Affirm
- Summarize
- Elicit self-motivational statements
- Explore and set concrete goals

Strategic Questions

Six Phases of Questions

- The positives
- The “not so positives”
- Life goals
- Compare – deploy discrepancy
- Ask for a decision
- Plan a short-term goal

Be sure to summarize each phase

The Positives

Possible questions include:

- “What are some of the good things about ...?”
- “People usually use drugs because they help in some way - how have they helped you?”
- “What do you like about the effects...”
- “What would you miss if you weren’t...”
- “What else...”

Give praise & support self-efficacy
- “You know how to have a good time”
The “Not so Positives”

Possible questions include:
- “Can you tell me about the down side?”
- “What are some aspects you are not so happy about?”
- “What are the things you wouldn’t miss?”
- “If you continued as before, how do you see yourself 3 years from now?”

Give praise and support self-efficacy
- “You’ve done well to have survived all of that...”

You’ll know you’re on the right track

When you hear the client say such things as…
- “I never realized how much drugs have affected my life”
- “I think this is more serious than I thought”
- “It’s not always that much fun”
- “I’m worried that I’ll get into trouble again if I continue to do what I did before...”

Owning Problems

Avoid a lot of “other” talk – redirect the focus
- “But how is this a problem for YOU?”
- “Do you agree with what they say?”
- “Do you think that these things will ever happen to you?”
Life Goals

Possible questions include:

- "What are some of the good things your friends or family say about you?"
- "If things worked out well for you, what would you be doing in one year?"
- "What sort of things are important to you?"

Give praise & support self-efficacy

- "It sounds like you have some important things coming up..."

Deploy Discrepancy

Possible questions include:

- "How does your (drug use) fit in with your goals?"
- "How does the you ‘as a drug user’ fit in with the ‘you as... (their goals or positive self)?’"
- "Is there anything about your drug use you need to change to get the things you want?"
- "How would things be in a year if you stayed the same?"

Give praise & support self-efficacy

- "You recognize that things have to change for you to attain your goals..."

Ask for a Decision

Restate the client’s dilemma or ambivalence

Possible questions/comments include:

- "You were saying that your were trying to decide whether to continue or cut down..."
- "After this discussion, are you more clear about what you would like to do?"
- "So have you made a decision?"

Give praise & support self-efficacy

- "Congratulations, you’ve made an important decision today. How do you feel about that?"
Set a Short-Term Goal

- Possible questions include:
  - "What will be your next (first) step now?"
  - "What will you do in the next one or two days (week)?"*
  - "Have you already been doing things to achieve this? Can you do more of this?"
  - "Who will be helping you on this?"
  - "On a scale of 1-10 how confident are you that you will do this next step?"

- Give praise & support self-efficacy
  - "That sounds like a meaningful goal. What will you need to make sure you achieve it?"

Summarize

- Summarize at the end of Positives
- Summarize at end of Not so Positives
- Summarize when they compare drug use to their life goals
- Summarize, summarize, summarize
- If you get stuck say things like...
  - "So let’s see, so far you’ve said..."

If Client makes “No Decision”

- Accept client’s decision
- Empathize with the difficulty of ambivalence
- Ask if they have a plan to manage not making a decision
- Is there something else (information, time, etc.) which would help him/her to make a decision?
If the Decision is to “Continue Use”

- Accept client’s decision
- “Are there any of the problems mentioned (summarize) that you would like to change?”
- Most people are keen to have less problems and will be willing to work on at least one of these

Then there’s the Involuntary Client

- “I don’t care what you say, I don’t have a problem and I don’t plan on changing!”
- Clear the air
- Identify legitimate client interests
- Identify non-negotiable aspects of the intervention
- Identify the negotiable aspects of intervention
- Negotiate the case plan
- Agree on criteria for change

Do you feel motivated to interview?

“What do you think... should we get started on that motivational interview or not?”