

ECHO IDAHO



ECHO Idaho: Opioid Addiction and Treatment

Motivating the Unmotivated Patient: Motivational
Interviewing

6/13/19

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ECHO Idaho is led by the University of Idaho and WWAMI. ECHO Idaho's Opioid Addiction and Treatment program is also supported by an Opioid Resource Grant from the AmerisourceBergen Foundation and by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U77HP03022, for the WWAMI Area Health Education (WWAMI AHEC) Program Office and its five regional Centers in the total amount of \$639,012 for the 2018-19 fiscal year (with a 1:1 total match of \$639,012 from non-federally funded governmental sources). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government

The speaker has no significant financial conflicts of interest to disclose.

What is Motivational Interviewing?

- “Motivational Interviewing is a collaborative conversation style for strengthening a person’s own motivation and commitment to change.” (Miller & Rollnick 2012)
- “People are generally better persuaded by the reasons which they have themselves discovered than by those which have come into the mind of others.” - Blaise Pascal

Motivational Interviewing Spirit

DO	DO NOT
COLLABORATION	CONFRONTATION
EVOCATION	EDUCATION
CLIENT AUTONOMY	PROVIDER AUTHORITY

Keys to Motivation and Change

Multidimensional

Dynamic and fluctuating

Influenced by social interactions

Influenced by the providers style

More of a process than an outcome (circular not linear)

Person must be ready, willing and able to change

**Pull is better than a
push into change**

Express Empathy

- Safe and open environment

- Communicate respect for person

- Be non-judgmental & collaborative

- Be a supportive & knowledgeable consultant

Develop Discrepancy

- Amplify ambivalence

- Focus attention between current situation and hope for the future.

Roll with Resistance

- Avoid arguments or power struggles

- See resistance as a signal to change strategies

Support Self-Efficacy

- Recognize person's strength and bring to the forefront

- Focus on small steps

- Provider must belief in person's capacity to reach their goals

Stages of Change

- Precontemplation -not yet considering change and is unwilling or unable to change
- Contemplation –acknowledges concerns and is considering the possibility of change but is ambivalent and uncertain.
- Preparation – committed to and planning to make a change in the near future but is still considering what to do
- Action – actively taking steps to change but has not yet reached a stable state
- Maintenance – has achieved initial goals such as abstinence and is now working to maintain goals
- Recurrence – has experienced a recurrence of symptoms or lapse/relapse and must now cope with consequences and decide what to do next

Provider Role in Change Process

- One approach does not work for everyone
- You must be adaptable and resilient and have a powerful presence that oozes “you can change and be successful” as the HOPEFULLNESS DRUG
- You need to listen for and see the language of the client that says you are going to fast.

Four Types of Patient Resistance

- Arguing
 - Challenging accuracy of what you have to say
 - Discounting by questioning your expertise
 - Direct hostility
- Interrupting
 - Talking over, cutting off
- Denying
 - Blaming other, disagreeing, excuse making, minimizing
 - Reluctance about information or advice given
- Ignoring
 - Inattention, nonanswer –response not related to your question
 - Side tracking, circular story telling

“Stories” that Person Tells Them self

- Barriers occur from the Stories the Person tells them self
- These stories/self talk are powerful and create inertia.
 - “I have always disappointed everyone.”
 - “I never stick with anything.”
 - “It isn’t that bad.”
 - “I’m okay this way.”
 - “A little longer this way won’t hurt.”
 - “ I can change tomorrow.”

Key Questions

- What do you think you will do to change?
- It must be uncomfortable for you right now, what is your next step?
- What do you think has to change?
- What are your options?
- How are you going to do it?
- When are you doing to do that?
- What would be some of the good things about making a change?

Build Your Skills in Change Talk

PULLING language is better than PUSHING language.

“don't get too close to the edge you will fall”

PULLING (MI) example – focus on meaningful event that you want to accomplish associated with a pleasant past experience

“What do you want more than you are currently doing or having?”

Build Your Skills in Change Talk

- Open-Ended Questions
 - Invite person to reflect and elaborate
 - Helps evoke motivation and planning towards the future
- Affirmations
 - General respect and acceptance of the person as a person of worth
 - Recognize and comment on specific strengths, abilities, good intentions and efforts
- Reflections
 - Mirrors what the client is saying
 - Helps deepen the conversation
- Summaries
 - Reflects a larger collection of what has been said
 - Gives a sense of the big picture

Desire

How would you like for things to change?

Tell me about what you don't like about how things are now?

How would you like your life to be different a month, two months, a year from now?

Ability

What do you think you might be able to change?

How confident are you that you could....?

What seems most possible?

Reason

Why would you want to...?

What might be the three best reasons for...?

Finish this sentence: things can't go on the way they have because...

Need

What do you think has to change?

How serious or important does this feel to you?

Commitment

Identify specific things they are willing to do.

Rate importance and confidence of making the change.

Explore what would increase importance and confidence.

Am I doing this Right?

- Do I listen more than I talk?
- Do I keep myself sensitive and open to this person's issues, whatever they may be?
- Do I invite this person to talk about and explore his/her own ideas for change?
- Do I encourage this person to talk about his/her reason for not changing?
- Do I ask permission to give feedback?
- Do I reassure this person that ambivalence to change is normal?
- Do I help this person identify successes and challenges from his/her past and relate them to present change efforts?
- Do I seek to understand this person?
- Do I summarize for this person what I am hearing?
- Do I value this person's opinion more than my own?
- Do I remind myself that this person is capable of making his/her own choices?

RESOURCES

Center for Substance Abuse Treatment. *Enhancing Motivation For Change in Substance Abuse Treatment*. Treatment Improvement Protocol (TIP) Series, NO. 35. HHS Publication No. (SMA) 13-4212. Rockville, MD. 2013.

Miller, William R. and Rollnick, Stephen. *Motivational Interviewing: Helping People Change. Third Edition* The Guilford Press. New York, NY.

Center for Evidenced-Based Practices. Case Western Reserve www.centerforebp.case.edu