

The Utilization of Motivational Interviewing Techniques with Consumers of Color

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- What is MI?
- “...a collaborative, person-centered form of guiding to elicit and strengthen motivation for change” Miller (2009)
- A Style
- A set of tools or techniques to work alongside a Client as he or she moves through the stages of change
- Stages of Change
- Precontemplation
 - “I don’t have a problem”
- Contemplation

- “I’ve thought about it, but I don’t think I need to change right now.”
- Preparation
 - “I’ve got to do something!”
- Action
 - “I am doing something!”
- Maintenance
 - Gains and Strategies
- Stages of Change
- The Spirit of MI
- Characterized by the Clinician’s words and actions during session.
- 3 Elements
 - Collaboration
 - Evocation
 - Autonomy
- Collaboration vs Confrontation
- Partnership
 - Not assuming the expert role
 - Builds rapport, facilitates trust
 - Mutual understanding
- Collaboration vs Confrontation in Practice
- Role of children and adolescents
- Youth are often “mandated”

- Role of rapport
- Evocation (Drawing Out)
- Therapist draws out Clients thoughts
- Does not impose opinions
- More durable and lasting
- Allows Client to discover own reasons and motivation
- Evocation in Practice
- Role of Therapist
- Empowering to Youth
- Locus of Control
- Importance of Lasting Change
- Autonomy vs Authority
- Power for change does not reside in therapist
- Increased responsibility
- No “right way”
- Clients take the lead
 - Menu/Toolbox
- Autonomy vs Authority in Practice
- <https://www.youtube.com/watch?v=rLhmKkpzUA0>
- <https://www.youtube.com/watch?v=J7VS8MIotC>
- Catch Client off guard

- Partnership
- Example 1
- Quintin is a 15 year old African American male. He is an active gang member. You are the third counselor he has been assigned. He tells you in the first session that his previous counselor was the best he had ever met, you cannot possibly be as good of a counselor as her, and that counseling is useless. Dad has brought Quintin to counseling due to a reported disrespectful attitude in home and school towards authority figures and aggressive and defiant outbursts. How can you begin to build rapport using the Spirit of MI?
- Principles of MI
- Express Empathy
- Support Self-Efficacy
- Roll With Resistance
- Develop Discrepancies
- Expressing Empathy
- Allows Youth to feel heard
 - Evocation
- Allows Therapist to share in Youth's experiences
 - Collaboration

- Support Self-Efficacy
- Strengths-based approach
 - Youth needs to believe change is possible
 - Instill Hope
- Previously unable to achieve or maintain change
 - Possible doubt, poor self-concept, external locus of control
- Therapist focuses on previous successes
- Youth wishing to establish autonomy
 - Making independent decisions
 - Governing own behaviors
- Roll with Resistance
- Resistance is conflict
 - Therapist's roll in resistance
- Based in ambivalence
 - Meet Youth where he/she is
- "Dancing not Wrestling"
 - May manifest as rebellion
 - Avoid the "righting reflex"
 - Youth must make the decision to change
- Stop, Drop, and Roll
 - Stop; consider the situation
 - Drop current approach; try something different
 - Roll with the resistance
- Developing Discrepancies

- Where Youth is vs where he/she wants to be
 - Motivation to change
- Allow Youth to recognize current behaviors conflict with goals or values
 - Move with Youth through stages of change
- Gradual process
 - Not at the expense of other principles
 - Gradual awareness of how behaviors effect goals

Techniques, Strategies, & Tips

- OARS
- Open Ended Questions
 - Invite elaboration
 - Create forward momentum
 - Avoid “machine gun questioning”
- Affirmations
 - Strengths-based approach
 - Reframing
 - Support Self-Efficacy
- Reflections

- Expresses empathy
- Guides Youth toward change
- NOT parroting
- Summaries
 - Recap
 - Highlight important aspects, develop discrepancies
- Open Ended Questions
- Encourage Youth to do most of the talking
- Feels like a conversation
- Promotes dialogue that can be reflected upon
- Allows Youth to tell his/her story
 - “Tell me what you like about...”
 - “What has happened since...”
 - “What happens when you feel/think/behave that way?”
 - “What was that like for you?”
- Asking Permission
- Communicates respect towards Youth
- Gives Youth feeling of control over session
- Feels like a discussion, not a lecture
- Able to use “Yes or No” wording
 - “Do you mind if we talk about...”
 - “Can we discuss your...”
 - “I’ve noticed...do you mind if we discuss that today?”
- Affirmations

- Made by Therapist in response to what Youth had said to recognize Youth's strengths, successes, and efforts
- Sound affirmative, without being over the top
- In some environments, may be the only affirmation the youth receives
 - "By the way you handled that situation, I can see you're really committed to change."
 - "With everything you have going on right now, it's impressive/amazing you have been able to refrain from fighting/talking back/sleeping in school."
- Support Self-Efficacy
- Youth is the voice of change
- Increase self-confidence
- Readiness Ruler
 - Scaling questions: "1 being not likely to change, 10 being definitely ready"
 - More concrete
 - Increase ability to gauge Youth's readiness to change, commitment to change process, stage of change
 - "Last week, you weren't sure you could go more than a few days without fighting. How have you been able to avoid fights for a whole week?" ... "How do you feel about that?"
- Reflective Listening
- Primary response to build empathy
- Reasonable guess as to what Youth is trying to convey

- Paraphrasing
- Youth argues for change
 - Either respond affirmatively towards therapist's hypothesis or will quickly disconfirm hypothesis
- Validates Youth's feelings
 - Communicates understanding
- Reflective Listening
 - "It sounds like..."
 - "What I hear you saying..."
 - "On one hand...and, yet, on the other hand..."
 - "It seems as if..."
 - "It feels as though..."
 - "Correct me if I'm wrong, but I get the sense that..."
 - Combine asking permission with reflective listening to work towards developing discrepancies, collaborative problem solving, while continuing to build/strengthen rapport
- <https://www.youtube.com/watch?v=pZiv8vkxMaC>
- "Deploying Discrepancies"
- Allows Therapist to explore discrepancies without assigning blame or judgement
- Avoids defensiveness and resistance
- Try to end with a reflection on the side of change
 - "Help me understand; on the one hand I hear you saying you are worried about your grades and how they will effect your ability to play sports. Yet, on the other hand, your telling me you are refusing to complete assignments because

you feel the teacher is being disrespectful. I'm wondering, is there a way you can show your teacher you feel disrespected that does not effect your ability to play sports?"

- Summaries
- To be used often
- Can highlight ambivalence, move to another topic, expand discussion
- Ending a session
 - "Over the past 2 months, we have been talking about stopping throwing things when you're angry, and it seems like you are recently realizing that less good things come from throwing than not good things. That, along with you being asked not to participate in basketball due to your behaviors, really help me understand why you are now committed to not throwing things anymore."

•When It's Working

- Change Talk
- Statements revealing movement towards change
 - Consideration of, motivation for, commitment to
- More a Youth talks about change, the more likely change is to occur
- DARN-CAT
- Preparatory Change Talk
- Desire

- I want...
- Ability
 - I can...
- Reason
 - It's important to...
- Need
 - I should/have to...
- Implementing Change Talk
- Commitment
 - I will...
- Activation
 - I am ready/prepared/willing to...
- Taking Steps
 - I am doing X, Y, Z...
- Evoking Change Talk
- Ask the right questions
 - Evocative, open-ended
 - "What would you like to see different?"
 - "What could happen if you don't change?"
- Explore balance
 - Pros and Cons
 - "If you don't change, what is the worst case scenario? Now, what is the best thing that could come from changing?"
- Elaboration
 - Ask for examples, details
 - "In what ways..."

- “Tell me more about that”
- Evoking Change Talk
- Look back
 - Ask about experiences before the behaviors emerged
 - “Tell me about what things were like before you noticed...”
- Look forward
 - What may happen if behaviors continue
 - Miracle Question
 - “If you change, how would your life be different? What would things look like in 2 weeks? 2 months? 2 years?”
 - Increased difficulty with adolescents
- Come alongside
 - Therapist siding with ambivalence, against change
 - “I wonder if this is so important to you that you won’t give it up, no matter what the cost.”
- Example 2
- Ginny is a 17 year old female who has been diagnosed with Depressive D/O NOS, Anxiety NOS, and appears to show features of Borderline Personality D/O. You have been her clinician for approx 1 month, but she continues to report to you that she “can’t” trust you, and states that speaking with you makes things worse.

•It's a Trap!

- Pitfalls to Avoid
- Discourse markers and conjunctions
 - “So...”
 - “But...”
- Developing discrepancies too early
 - Can be seen as challenging, increasing resistance
- Forcing change
 - Allow the Youth to be the voice of change
 - Listen for Change Talk
 - Ambivalence is normal
- Moving too quickly
 - Allow Youth to identify past successes
 - Listen to his/her story to learn strengths, seek to understand
- Pitfalls to Avoid
- Summarizing what you *think*
 - Summarize what you hear
 - Refrain from judgement
- Tone of voice
 - Be aware of the possibility of sounding sarcastic
- Talking about the problem

- Therapist should remain open to the Youth's issues, not attempting to find and fix the problem
- Talking
 - Listen

•Questions, Comments, Concerns?

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