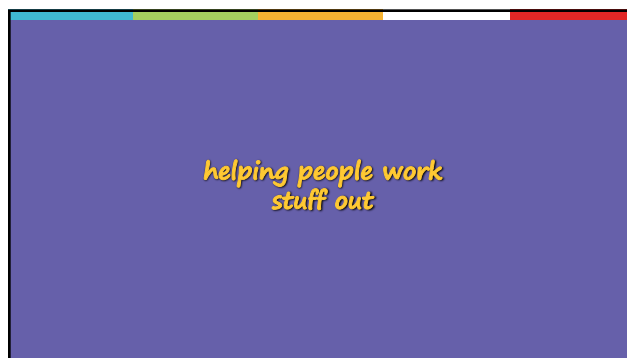


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Learning Objectives

As a result of this training, you will be able to:

- Explain two reasons why MI is relevant for your work
- Describe the perils of using your "righting reflex"
- Describe the four elements of the mindset and heart-set of MI

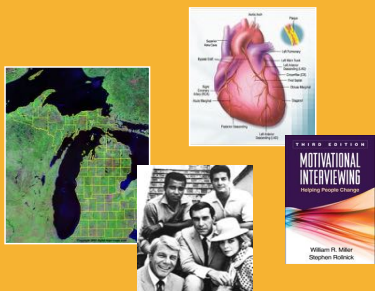


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Is this MI?

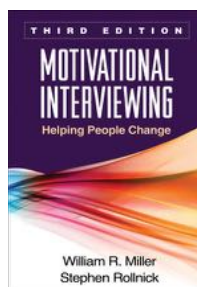


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What do you already know about MI (motivational conversations)?



6



A brief history of MI

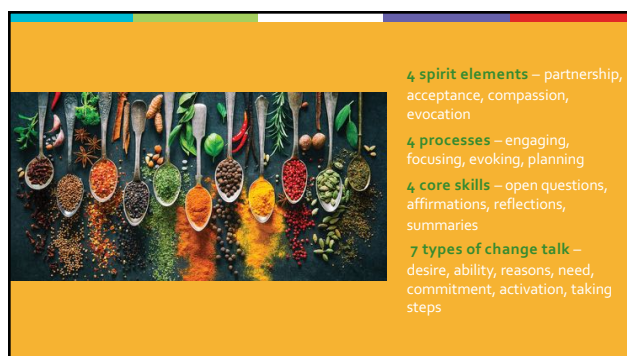
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9



10

Video Demos

11



12

How NOT to do Motivational Interviewing in Dental Practice Addressing Tobacco Use

- What are her hopes for the patient?
- What are her methods?
- What is the outcome?
- What was less than helpful?

13

Motivational Interviewing in Dental Practice Addressing Tobacco Use



14

Motivational Interviewing in Dental Practice Addressing Tobacco Use

- What are her hopes for the patient?
- What are her methods?
- What is the outcome?
- What was helpful?

15

What is Motivational Interviewing?



Dr William R. Miller
Motivational Interviewing Founder

16

A personal taste of MI

Think of a dilemma, concern, attitude, or behavior that you've been thinking about changing but haven't changed yet.



17

Possible Behaviors for Change

- Accepting what I cannot change
- Alcohol/drug use
- Allowing others to take advantage of me
- Anger/frustration management (e.g., cursing)
- Always late
- Avoiding action on issues such as the environment or social justice
- Avoiding conflict
- Apathy; making "mountains out of molehills"
- Behavior regarding rules/policy
- Behaviors with my supervisor or managers
- Blaming
- Bossy, pushy
- Bored, lack of energy
- Can't say no—take on too much responsibility
- Co-dependent behaviors
- Computer games
- Controlling others
- Creating drama
- Criticizing others
- Criticizing others to third parties
- Diet, food choices
- Disorganization
- Demeaning conversations
- Driving behaviors (e.g., speeding, road rage)
- Exercise, under-exercising
- Failure to set priorities, goals
- Failure to take risks
- Failure to reconcile breached relationships
- Failure to volunteer, always volunteering
- Fear of speaking up
- Fighting lost causes
- Getting even
- Giving unsolicited advice
- Gossiping
- Hard to admit I'm wrong
- Health issues
- Holding grudges
- Impulsive spending
- Interpersonal control issues
- It's all about me
- Judgmental attitudes/behaviors
- Jumping to conclusions
- Keeping up with the Jones's
- Know it all
- Lack of assertiveness
- Lack of confidence
- Lack of generosity (e.g., giving to charity)
- Lack empathy
- Lack of tolerance
- Leaving undesirable tasks to others
- Listening to spouse, partner, teenage child
- Materialistic
- Meddling
- Money management
- Neglecting time with family or friends
- Not sticking to goals (e.g., furthering education)
- Not doing my part
- Not letting go—"beating dead horses"
- Neglecting my needs for sake of others
- Opinionated
- Perfectionism
- Perfectionistic
- Picking fights
- Pre-occupation
- Smoking
- Solving other people's problems
- Spending emotional energy on issues over which I have no control
- Spiritual or religious disciplines (e.g., church attendance, meditation, study)
- Strong up conflict
- Taking medications
- Taking offense easily
- Tactless
- Take things too personally
- Too critical of myself
- Too much TV/screen time
- Time management
- Too outspoken
- Too neat, too messy
- Undergoing
- Wasting time
- Whining
- Worry too much
- Over-eating, under-eating
- Overly concerned about what others think of me
- Overly confident
- Passive-aggressive behaviors

18

Sample questions to elicit and strengthen motivation

Why might you want to make this change?

What could be at stake if you don't change?

How might you go about it, in order to succeed?

What are your three best reasons to change?

Who could support you?

What next step(s) could you take?



19

Common responses to experiencing MI

Safe	Empowered
Feel understood	Hopeful
Want to talk more	Comfortable
Like the counselor	Collaborative
Accepted	Interested
Respected	Open to change
Engaged	Want to come back

20

When practicing MI "you don't need to be clever and complex, just interested and curious. An uncluttered mind helps."

Miller & Rollnick, 2003



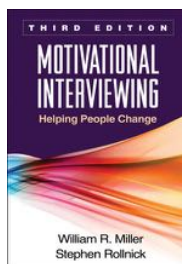
21

MI is about facing forward...
coming alongside
someone and facing
the person's future
together

Steven Rollnick

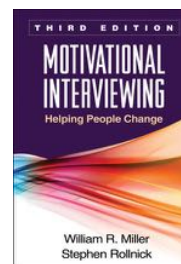


22



A collaborative conversation style for strengthening a person's own motivation and commitment to change.
Lay definition

23




A person-centered counseling style for addressing the common problem of ambivalence about change.
Practitioner's definition

24

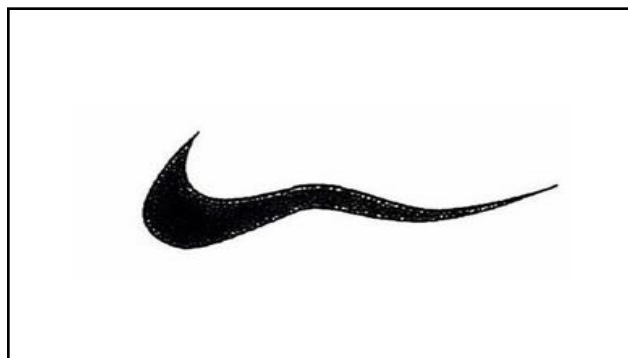
ambivalence

n.1. the simultaneous existence of contradictory feelings and attitudes, such as pleasantness and unpleasantness or friendliness and hostility, toward the same person, object, event, or situation.
2. uncertainty or indecisiveness about a course of action. —ambivalent adj.

—American Psychological Association



25




26

**WHEN YOU KINDA
WANNA JUST DO IT
BUT NOT REALLY**



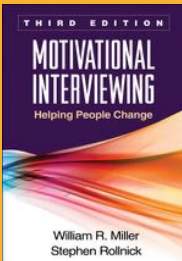
27

Video:
Ambivalence
and the
Righting Reflex



William R. Miller, Ph.D.
Senior Advisor to The Change Companies®

28



**MOTIVATIONAL
INTERVIEWING**
Helping People Change

William R. Miller
Stephen Rollnick

A way of helping people talk
themselves into changing

29

“Talking oneself into changing”

Examining your behavior/attitudes through the lens
of your hopes, fears, values, priorities

➡

Preparatory change talk – statements of desire,
reasons, ability, importance

➡

Mobilizing change talk – next steps,
commitment to action


30



Ever met this girl?

Negative characteristics?
Deficits?

31




stubborn
pouty
uncooperative
oppositional
disobedient
obstinate
inflexible
spoiled
"ain't gonna"
difficult
noncompliant
nonadherent

32



Positive characteristics?
Strengths?

33



assertive
self-assured
feisty
confident
courageous
spirited
bold
fearless
clear
unwavering
gutsy
speaks her truth

34



"If you change the way you look at things, the things you look at change."
Wayne Dyer

35



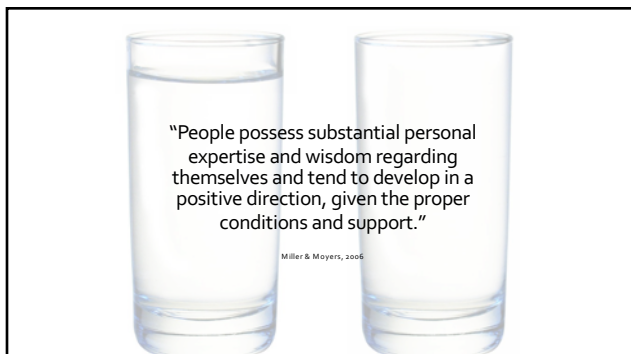
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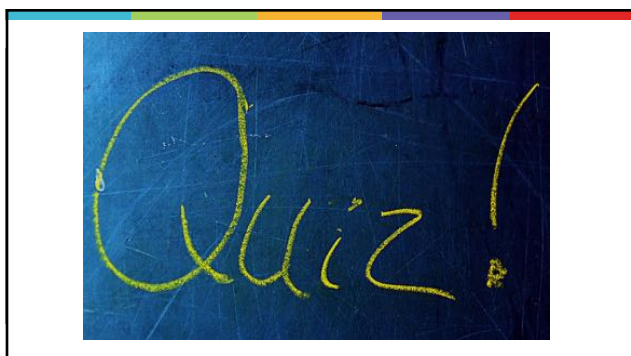
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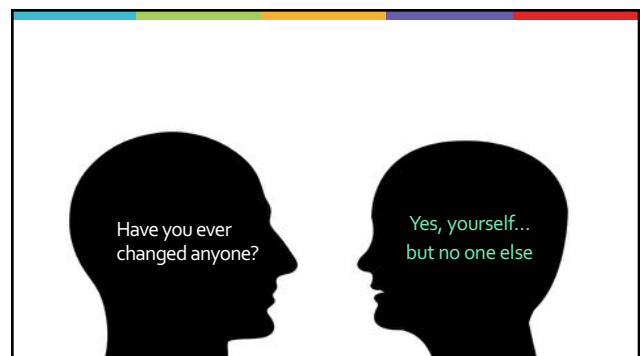
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40



41



42

"They say you can lead a horse to water,
but you can't make him drink. But I say,
you can salt the oats."

Madeline Hunter, author

Can you make a
difference?

For sure!

43

Relevance for our work

- Evidence-based practice
- Kindness with skill
- Effective across populations and cultures
- Applicable to range of professional disciplines
- Effective in briefer encounters



44

Relevance for our work

- Outperforms traditional advice-giving
- Actively involves people in own care
- Improves adherence and retention in care
- Promotes healthy "helping" role for providers
- Instills hope and fosters lasting change



45

What MI is not

- Just being nice to people
- A way of tricking people into what you want them to do
- A technique
- A solution to all clinical problems
- The same as stages of change (TTM)
- Easy to learn



46

Video: Lifting the Burden in Motivational Interviewing



47

Listening Activity



SPEAKER INSTRUCTIONS

Talk about a change you're considering making

LISTENER INSTRUCTIONS

1. Invite learning partner to talk about a change they're considering making.
2. Listen carefully with *goal of understanding* your partner's situation/dilemma.
3. Give *no advice* – let your partner be their own expert.
4. Ask these 3 questions and listen with interest to each response:
 - Why would you want to make this change?
 - How might you go about it, in order to succeed?
 - What are your 3 best reasons to do it?
5. Give a *short summary* of what you heard the speaker say about their motivations for change
6. Then ask: "So what, if anything, do you think you might do?" (just listen)

48

The Spirit of Motivational Interviewing



A mindset and heart-set

49

"When we began teaching MI in the 1980s we tended to focus on technique, on how to do it. Over time we found, however, that something important was missing.

As we watched trainees practicing MI, it was as though we **had taught them the words but not the music...** This is when we began writing about the underlying spirit of MI, its mindset and heart-set."

Motivational Interviewing, 3rd edition



50

Elements of MI spirit

- P**artnership
- A**cceptance
- C**ompassion
- E**vocation



51

PARTNERSHIP – a collaboration; demonstrating profound respect for the person; both parties have expertise; dancing rather than wrestling; best practices are not done on or to people, but with and for them

52

What partnership looks like...



53

What partnership sounds like...

- Would it be all right if we took a look at...?
- How do you feel about...?
- What is your understanding of...?
- I look forward to working together...
- How can I support you in this process?



54

ACCEPTANCE

- Prizing person's inherent worth and potential
- Providing accurate empathy
- Supporting autonomy
- Affirming strengths



55

What acceptance sounds like...

Prizing person's inherent worth and potential

You are welcome here just as you are.

"There's nothing about a caterpillar..."

What would you like to be different?

In looking ahead at your life...



56



57

What acceptance sounds like

Providing accurate empathy

That sounds really complicated.

You're feeling hurt and confused.

Part of you isn't sure you could improve your diet and part of you thinks it would be good for you.

You're hoping for a better result this time.



58

Empathy: The Human Connection to Patient Care



59

What acceptance sounds like...

Supporting autonomy

You know what is best for you

You like to weigh things carefully before making any changes.

This is a decision only you can make.



60



What acceptance sounds like...

Affirming strengths


You showed a lot of courage in the way...

That took a lot of patience to...

You're the kind of person who values loyalty.


61

COMPASSION – coming alongside someone in their suffering; actively promoting the other's welfare; giving priority to the person's needs



62

Practicing with Compassionate Detachment




"Compassionate detachment is respecting our guest's power enough to not rescue them while extending loving compassion to them in the present moment.

Simultaneously, compassionate detachment is also respecting ourselves enough to not take the person's challenges on as our own and realizing that to do so serves good purpose for no one."

Michael Arloski, Wellness Psychologist


63



"Here is what we seek: a compassion that can stand in awe at what (people) have to carry rather than stand in judgment about how they carry it."

Fr. Greg Boyle, Tattoos on the Heart

64



What compassion sounds like...

[no words at all]

I'm so sorry...

May I just sit here/stay with you for awhile?

I would like to be helpful...

Is it all right if we check in again...?

What would be most helpful to you...?


65

Practicing with Compassionate Detachment

"Compassionate detachment is respecting our guest's power enough to not rescue them while extending loving compassion to them in the present moment.

Simultaneously, compassionate detachment is also respecting ourselves enough to not take the person's challenges on as our own and realizing that to do so serves good purpose for no one."

Michael Arloski, Wellness Psychologist



66

Compassion



67

EVOCATION –
eliciting the person's
own knowledge,
wisdom, strengths,
and motivation

68

"You already have what
you need, and together
we will find it."

William R. Miller

69

What evocation sounds like...

What would you like me to know
about yourself?

Tell me about...

What concerns, if any, do you have
about...?

You want to be a better friend.

If you were to change, what would
be your reasons to do so?

70

Review: MI spirit

Partnership
Acceptance
Compassion
Evocation



71

4 processes of MI



72

OARS:

Core Motivational
Conversational Skills

Open questions
Affirmations
Reflections
Summaries



73

Change Talk: DARN CAT

Preparatory change talk

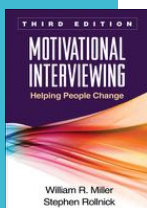
- Desire (I want, like, wish)
- Ability (I can, could)
- Reasons (If...then...)
- Need (I have to, got to)

Mobilizing change talk

- Commitment (I will, I promise)
- Activation (I'm willing, am ready to)
- Taking steps (I made an appointment)



74



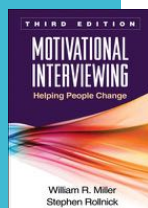
Key ideas

The helping relationship takes the form of a partnership, not an expert-recipient stance

Acceptance and compassion are at the heart of the conversation

Motivation to change is elicited from individuals, not imposed on them from without

75



Key ideas

Direct persuasion is not effective to resolve ambivalence or promote change

The worker uses primarily a guiding style

It is the task of clients to resolve their own ambivalence and determine their own reasons for change

76

Thank you!

Please visit www.website.url for further info.



77