Motivational Interviewing (MI): Practices from the Heart

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A Word of Informed Consent

This approach is likely to change you!

Motivational Interviewing ,

First edition, 1991 (Preface)

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Quick Perspective

- A show of hands: How familiar are you with Motivational Interviewing (MI)?
  - 1. No familiarity
  - 2. Brief surface-level introduction
  - 3. Intensive training over multiple days
  - 4. Intensive training(s) and broad familiarity with periodic use
  - 5. Extensive familiarity: Use it often; Maybe even train others

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Unanticipated Findings-Therapist Effects-Power of Empathy

Psychology of Addictive Behaviors
2000, Vol. 14, No. 1, 6–18

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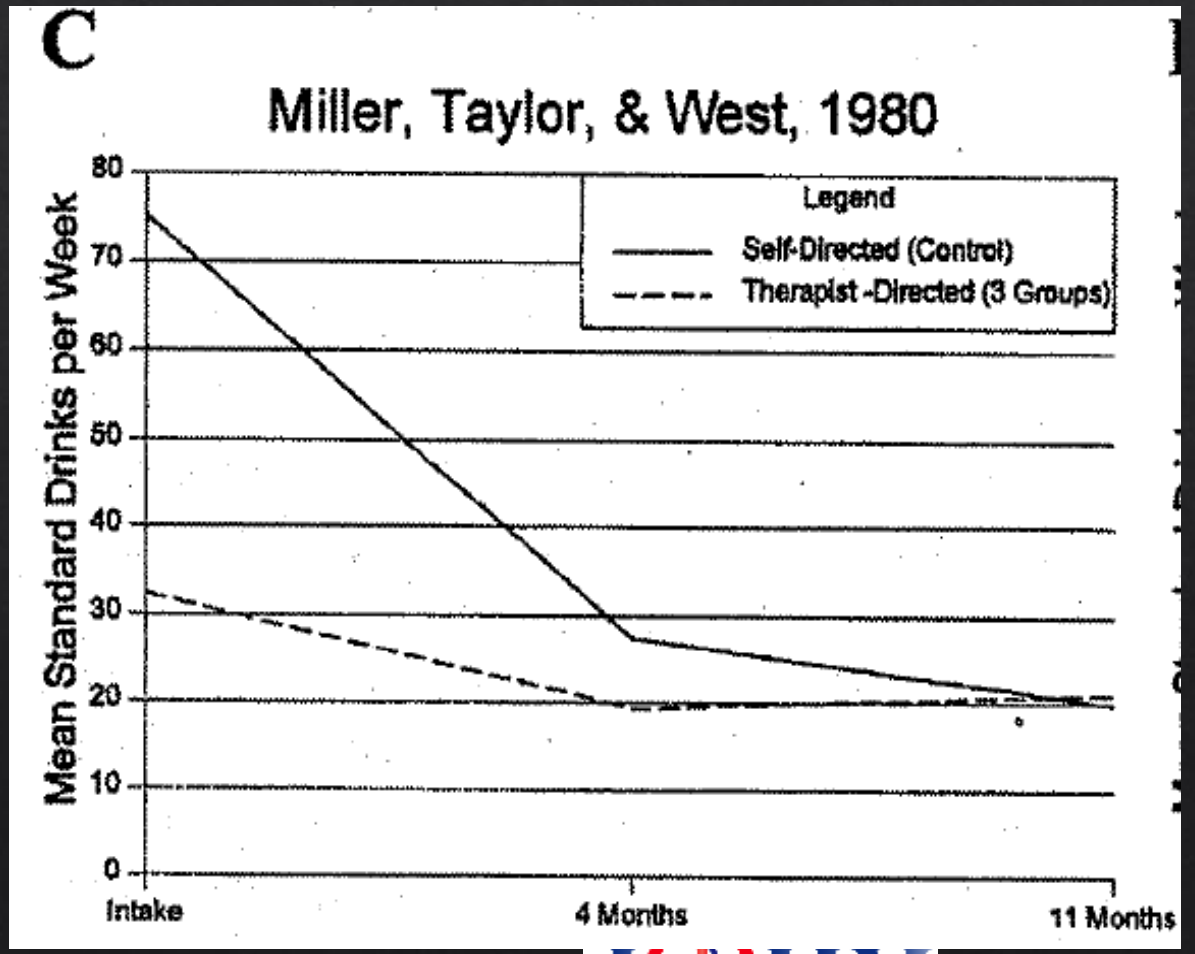
0893-164X/00/$5.00 DOI: 10.1037//0893-164X.14.1.6

Rediscovering Fire: Small Interventions, Large Effects

William R. Miller
University of New Mexico

Unexpected findings are often the spark for new discoveries and theories. A puzzle emerged from a series of unanticipated findings over 3 decades, indicating that for problem drinkers (a) relatively brief interventions can trigger significant change, (b) increasing the intensity of treatment does not consistently improve outcome, (c) therapist empathy can be a potent predictor of client change, and (d) a single empathic counseling session can substantially enhance the outcome of subsequent treatment. These phenomena are considered in light of other findings in the addictions-treatment-outcome literature. There is, at present, no cogent explanation for the efficacy of brief interventions. An ancient construct is explored as one possible factor in how some brief encounters may exert large effects in human change.



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All Nine Therapists

- Delivered same manualized guided behavior therapy
- Trained in behavior therapy and accurate empathy
- Had sessions rated for accurate empathy using Truax & Carkhuff scale
- Ranked-ordered (1-9) for empathic skills while delivering behavior therapy
- 6-month client outcomes measured….

Miller, W. R., Taylor, C. A., & West, J. C. (1980). Focused versus broad spectrum behavior therapy for problem drinkers. *Journal of Consulting and Clinical Psychology, 48*, 590-601.

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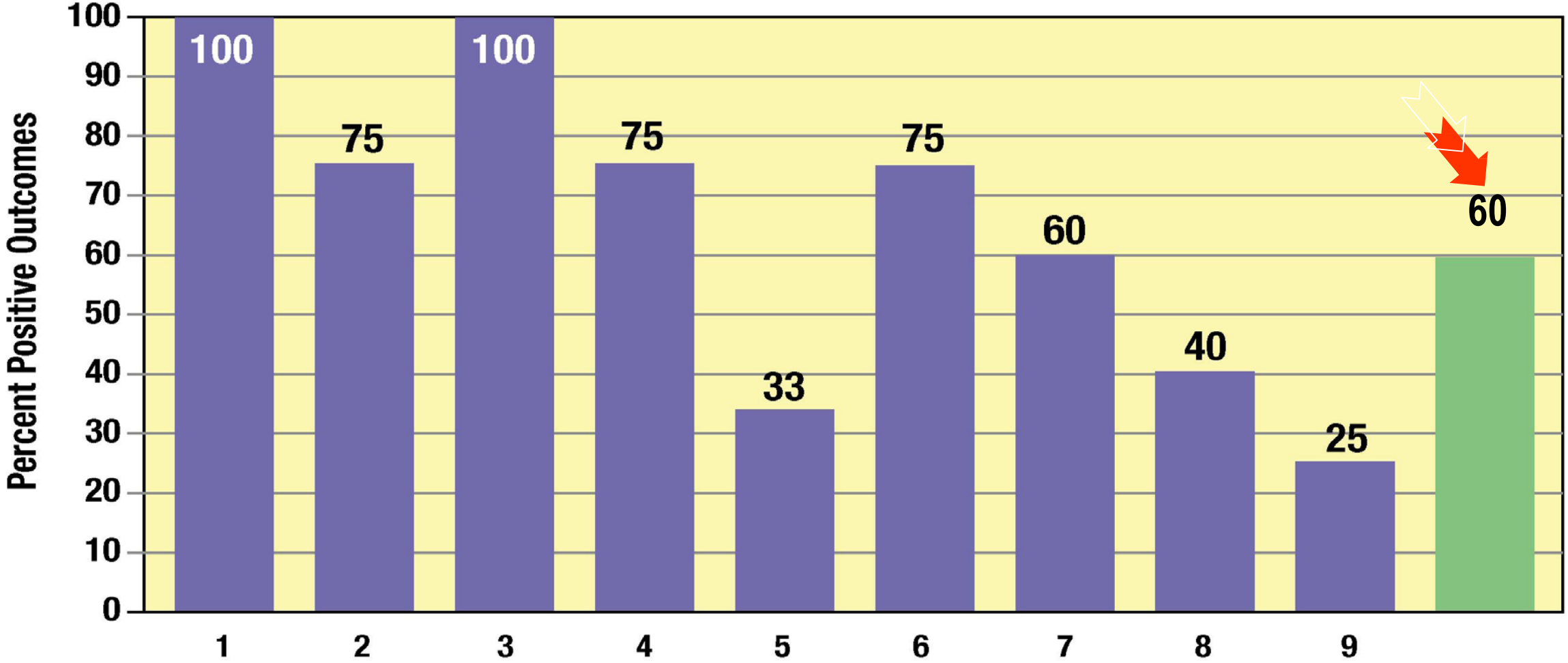
Therapist Empathy



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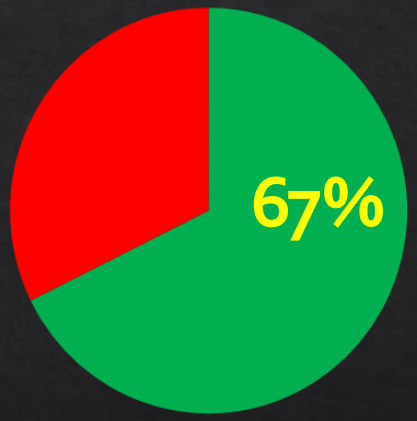
Client Drinking Outcomes Accounted for by Therapist Empathy

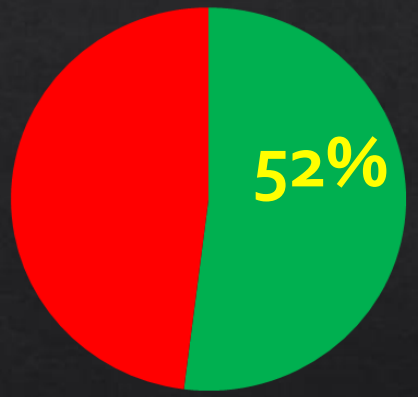
6 months

r = .82



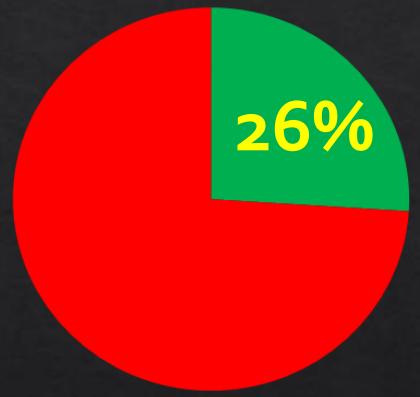
1 year

r = .71



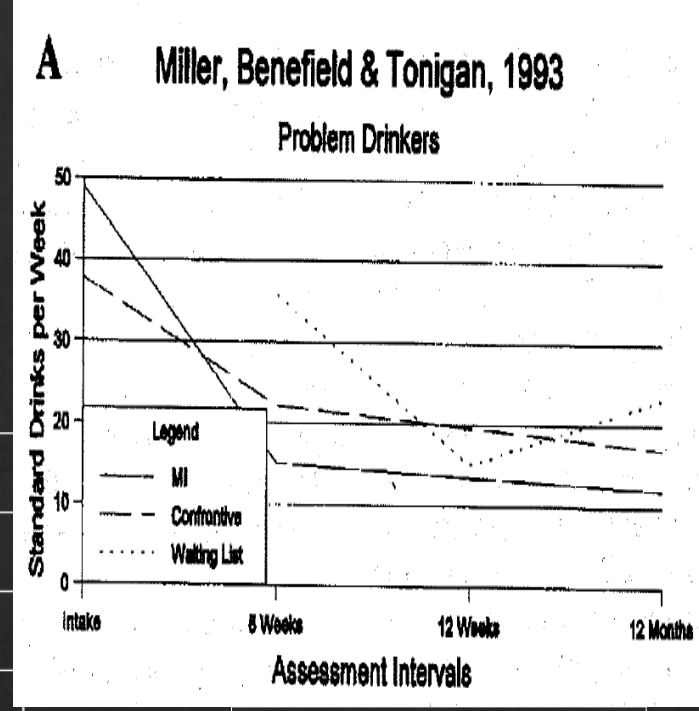
2 years

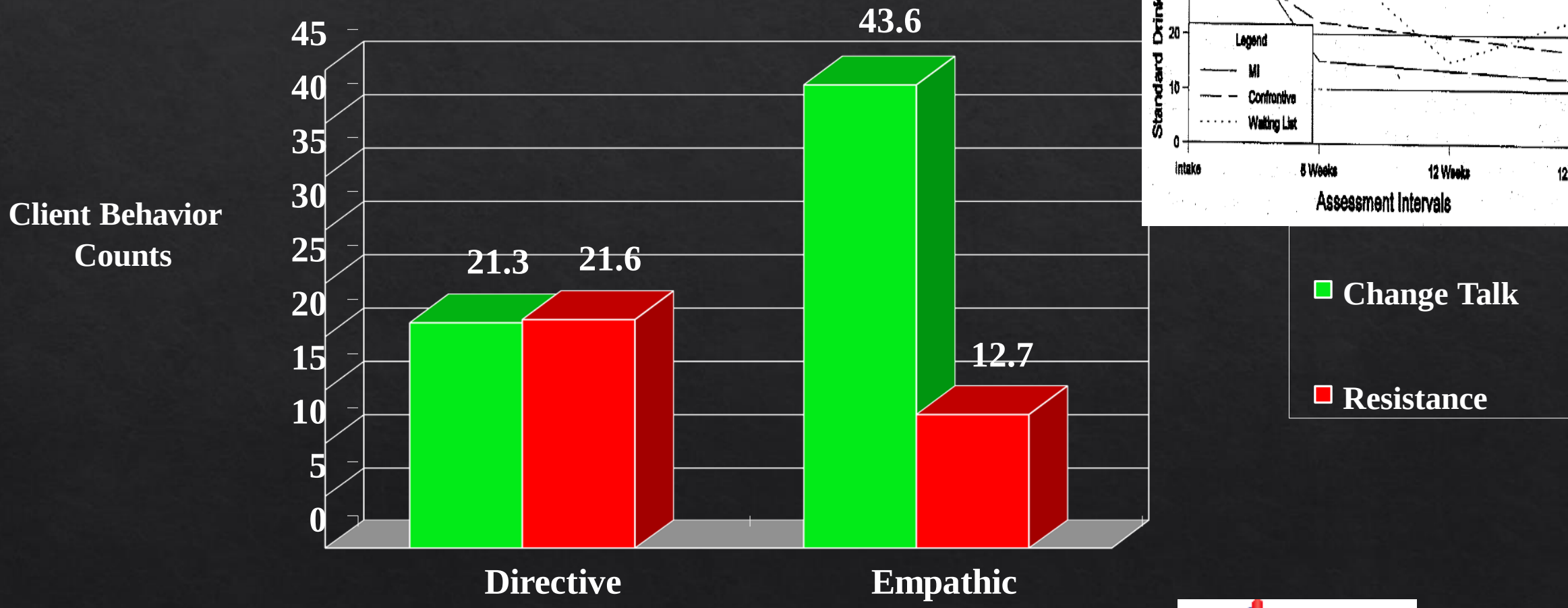
r = .51



Miller & Baca (1983) *BehaviorTherapy 14*: 441-448

Counselor Style (Random Assignment) & Client Response





Miller, W. R., Benefield, R. G., & Tonigan, J. S. (1993). Enhancing motivation for change in problem drinking: A controlled comparison of two therapist styles. *Journal of Consulting and Clinical Psychology, 61, 455-461.*

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How it All Started

CLINICAL SECTION *Behavioural Psychotherapy*, 1983, 11, 147–172

Motivational Interviewing with Problem Drinkers

William R. Miller *University of New Mexico*

Motivational interviewing is an approach based upon principles of experimental social psychology, applying processes such as attribution, cognitive dissonance, and self-efficacy. Motivation is conceptualized not as a personality trait but as an interpersonal process. The model de-emphasizes labeling and places heavy emphasis on individual responsibility and internal attribution of change. Cognitive dissonance is created by contrasting the ongoing problem behavior with salient awareness of the behavior's negative consequences. Empathic processes from the methods of Carl Rogers, social psychological principles of motivation, and objective assessment feedback are employed to channel this dissonance toward a behavior change solution, avoiding the "short circuits" of low self-esteem, low self-efficacy, and denial. This motivational process is understood within a larger developmental model of change in which contemplation and determination are important early steps which can be influenced by therapist interventions. A schematic diagram of the motivational process and a six-step sequence for implementing motivational interviewing are suggested.

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Basic Principles

- A person-centered Rogerian-based counseling style
- The patient should articulate the arguments for change
- Evoke the person's own motivations
- Listen with empathy and unconditional positive regard
- Minimize resistance: don't hit it head on !
- Fosters hope and optimism
- Called it "Motivational Interviewing"
- MI understood as a prelude for treatment
- Not a data paper

Miller, W. R. (1983). Motivational interviewing with problem drinkers. *Behavioural Psychotherapy, 11*, 147-172.

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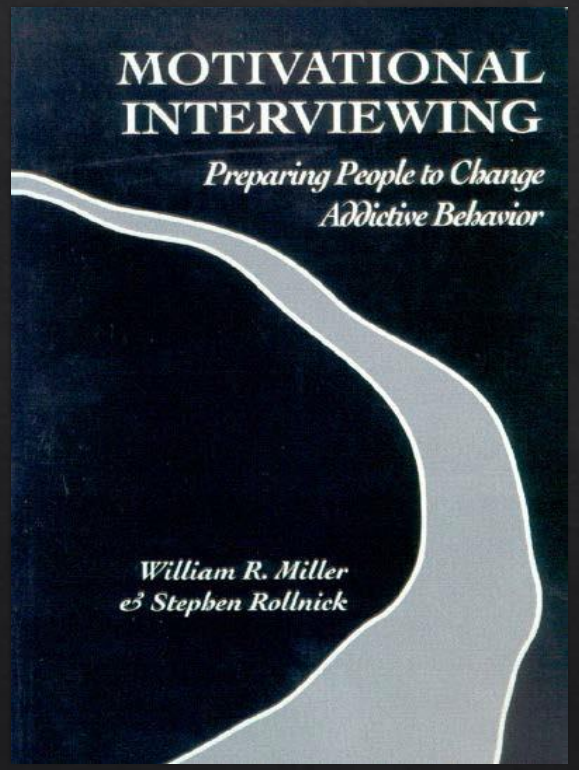
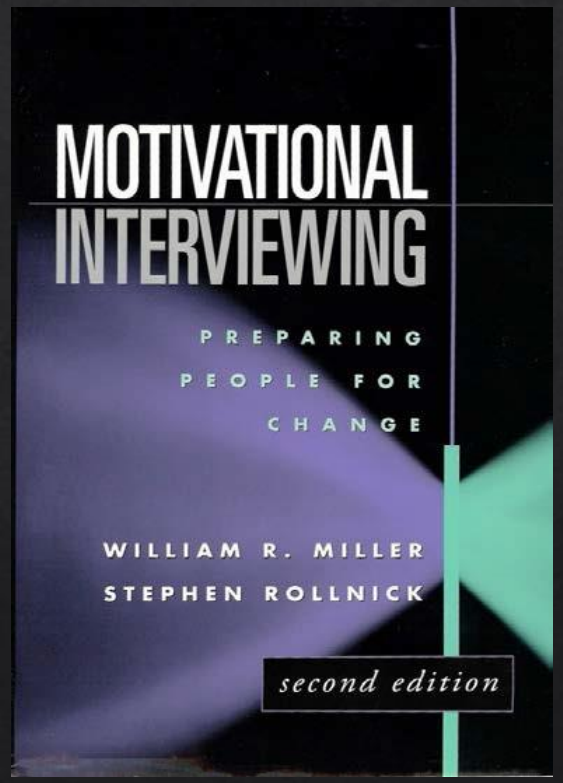
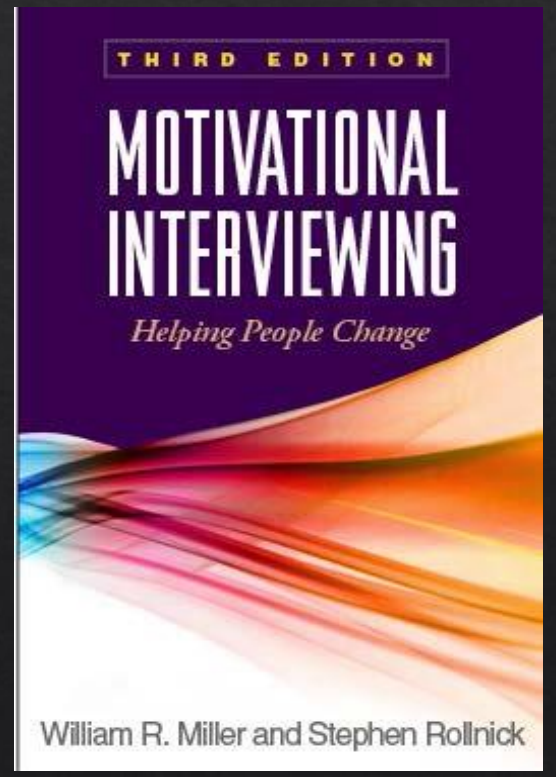
MI has evolved through 3 Editions since 1991







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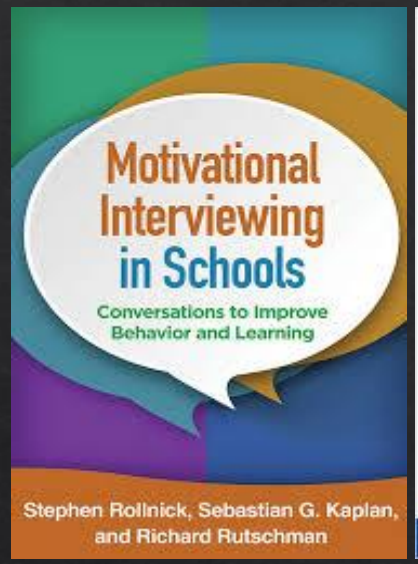
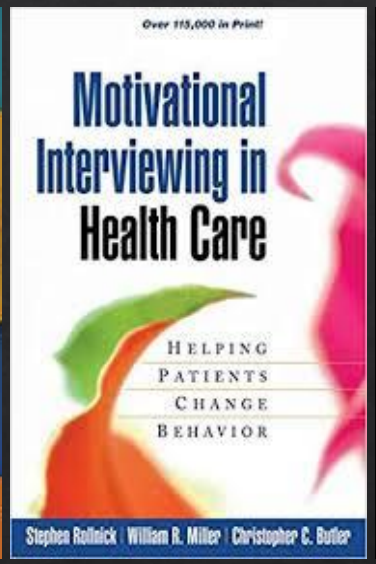
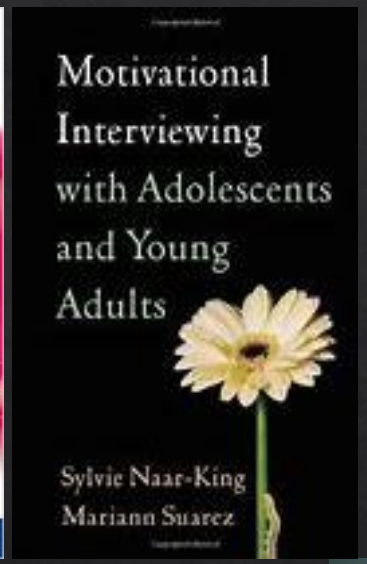
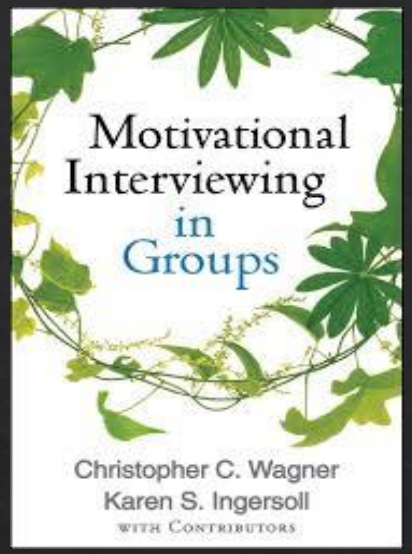
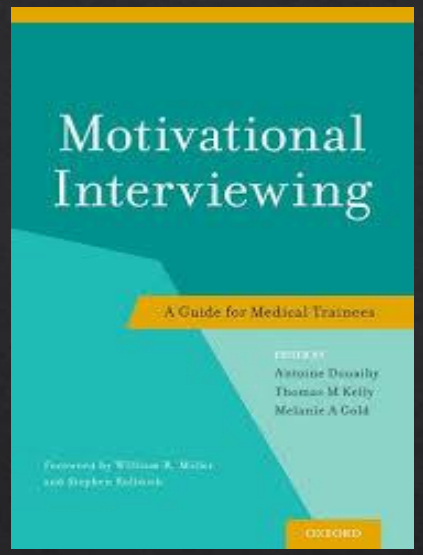
.....And Special Applications

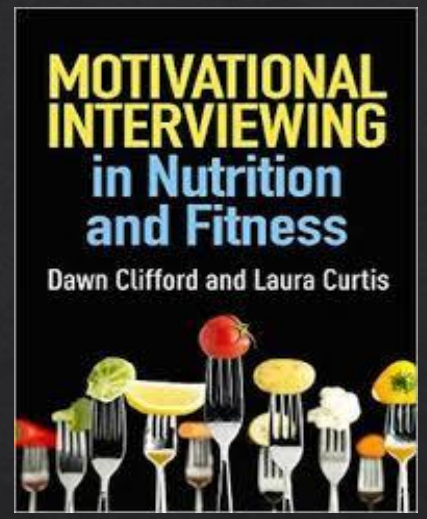


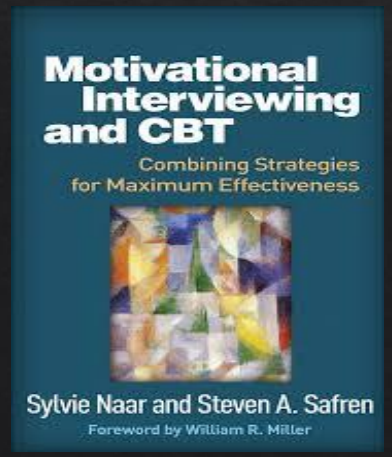


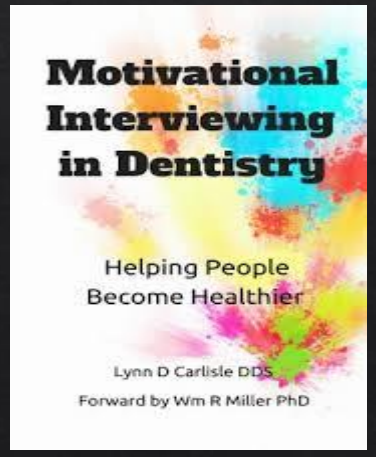


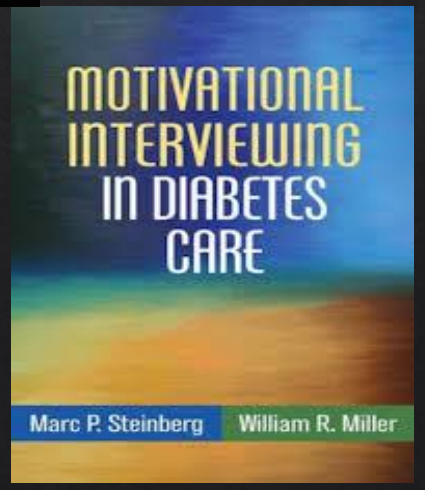


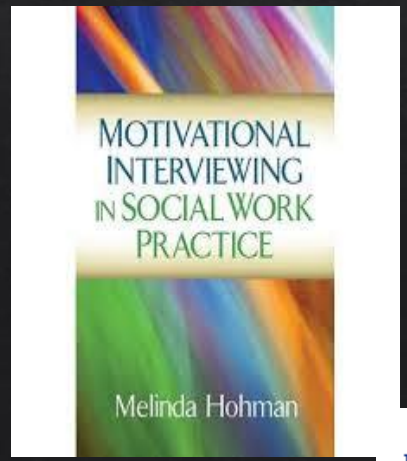


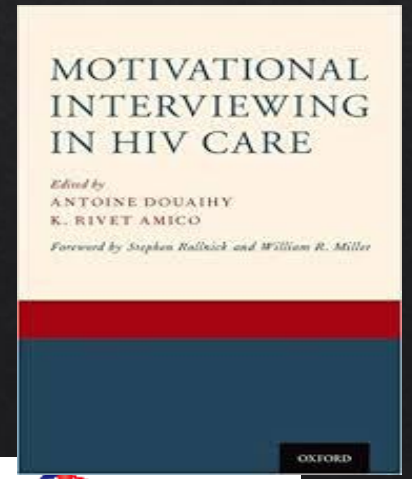












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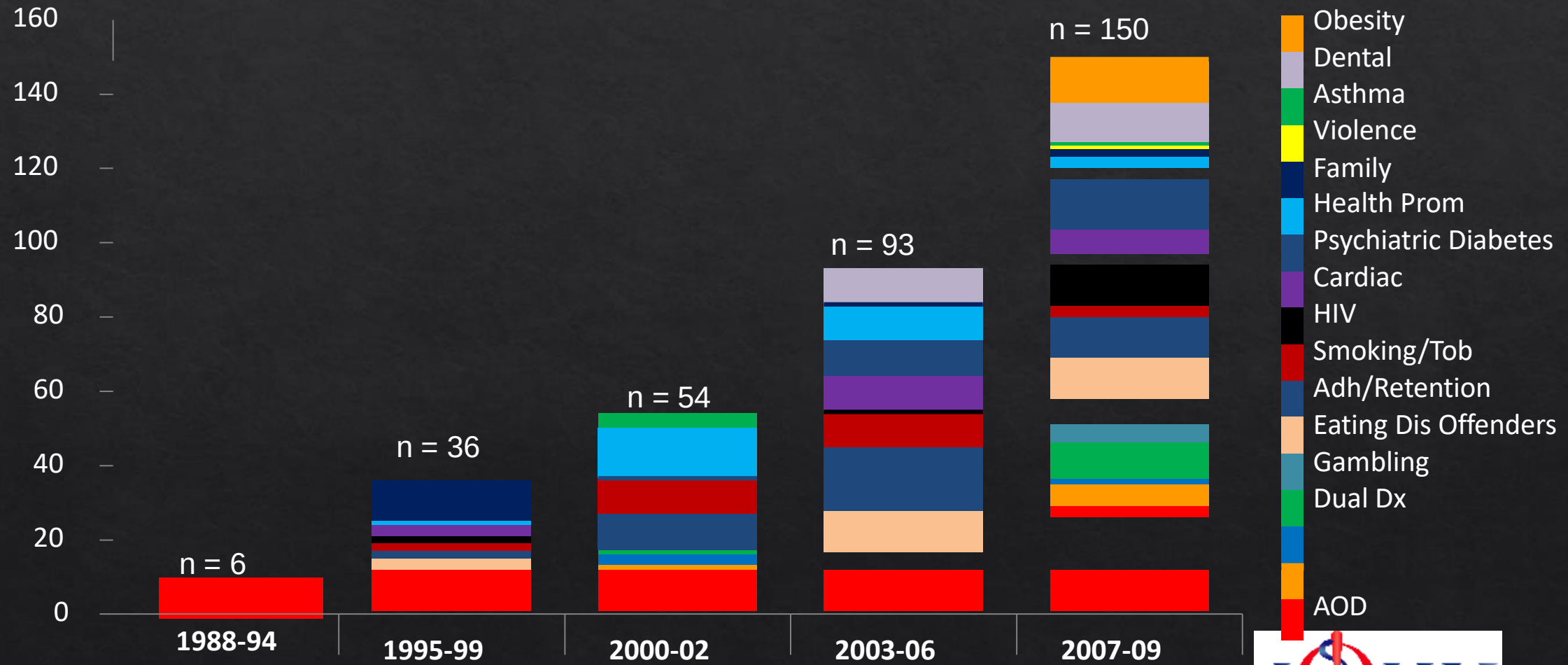
Number of MI Studies by Year, Stopped Counting Longtime Ago!!



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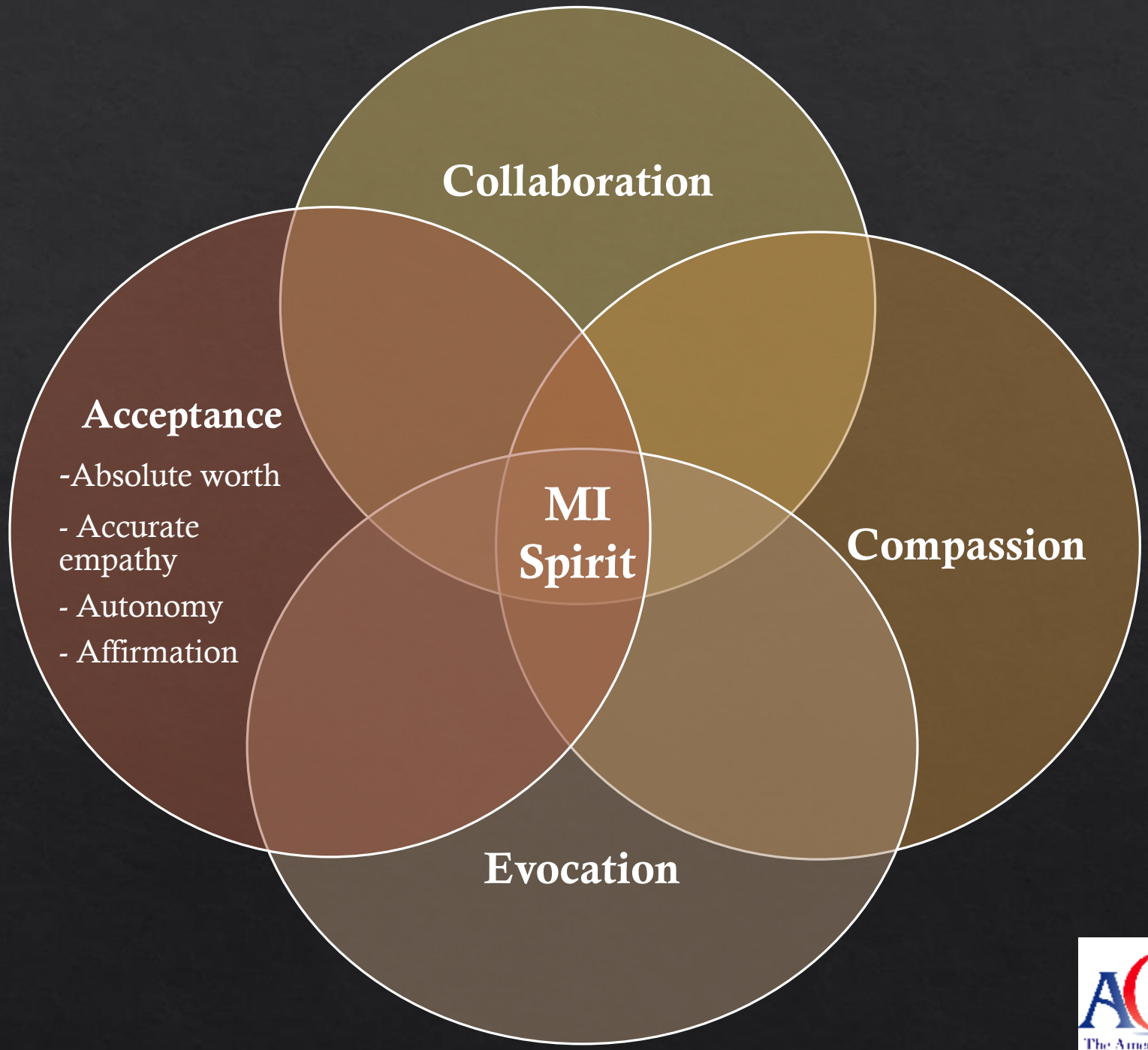
Motivational Interviewing

Layperson's	MI is a collaborative conversation style for strengthening a person's own motivation and commitment to change **(What is it for?)**
Practitioner's	**MI is a person-centered counseling style for addressing the common problem of ambivalence about change (How would I use it?)**
Technical	MI is a collaborative, goal-oriented style of communication with particular emphasis to the language of change. It is designed to strengthen personal motivation for and commitment to a specific behavior by eliciting and exploring the person's own reasons for change within an atmosphere of acceptance and compassion **(How does it work?)**

The Spirit of MI


Collaboration
Acceptance
-Absolute worth
- Accurate empathy
- Autonomy
- Affirmation
MI Spirit
Compassion
Evocation

Four Fundamental Processes

Engaging
Focusing
Evoking
Planning

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Four Foundational Processes

Planning

Evoking

Focusing

Engaging

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Definitions

- Change Talk
  - *Speech that favors movement toward a particular change goal*
- Sustain Talk
  - *Speech that favors status quo rather than movement toward a change goal*

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Flow of Change Talk

*D*esire

*A*bility

*R*easons

*N*eed

(DARN)

+ / -

*C*ommitment

*A*ctivation

*T*aking Steps

(CAT)

Change

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Relative Strengths of Commitment Language

(1) Weakest	(2) Weak	(3) Moderate	(4) Stronger	(5) Strongest
I hope to I will try I think I will I suppose I will I imagine I will I suspect I will I will consider I guess I will I will see (about)	I favor I believe I accept I aim I aspire I am inclined I anticipate I predict I presume	I look forward to I consent to plan to I resolve to I expect to I concede to I declare my intention to I dedicate myself	I am devoted to I pledge to I agree to I am prepared to I intend to I am ready to	I guarantee I will I promise I vow I shall I give my word I assure I know I will

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Four Foundational Skills (OARS)

Open question

Affirmation

Reflective Listening-Remember that the learnable skills of reflective listening is Accurate Empathy-

Summary

Motivational Interviewing

Miller and Rollnick, 2013

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MI is Directional-Practitioner's Tasks

- Recognize change talk
- Proactively elicit it
- Strategically respond to it

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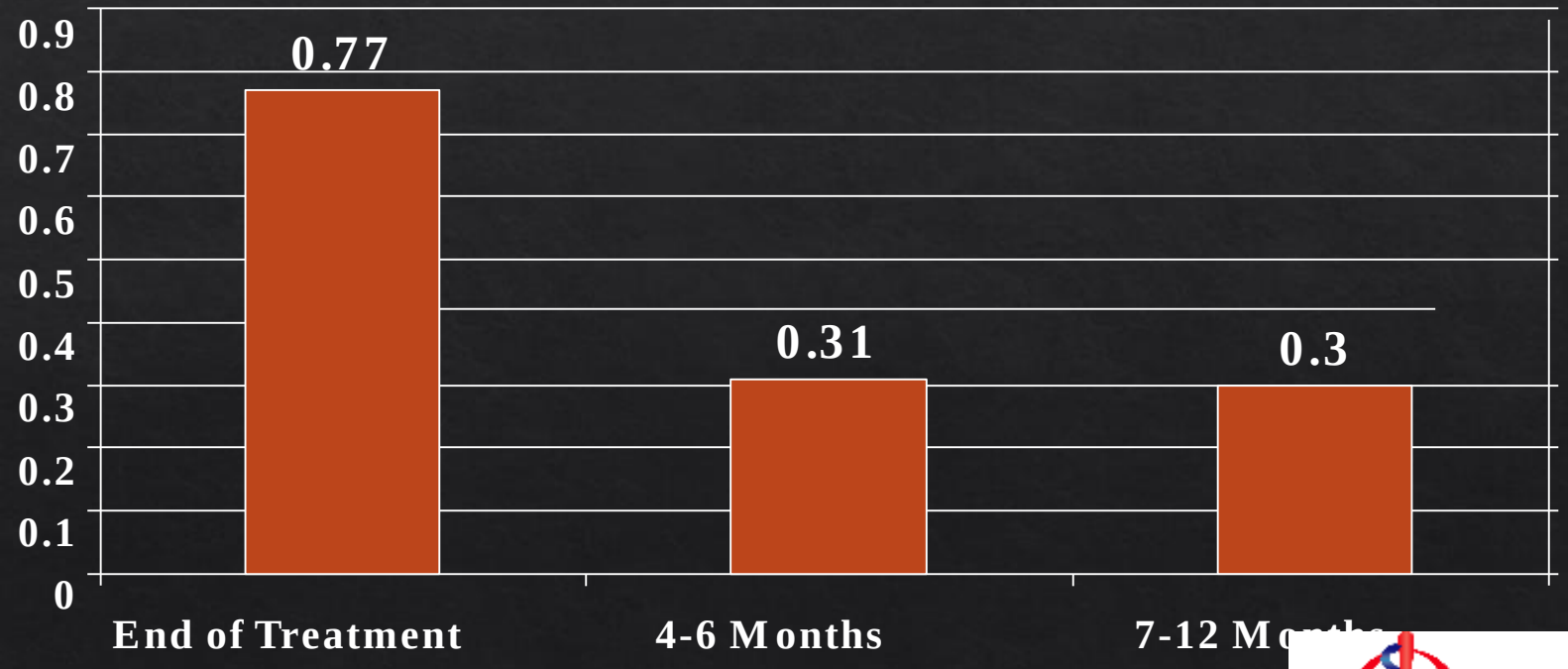
Explosion of MI Outcome Research!
What does the data tell us?

MI can have an impact on a wide variety of behavior problems --Small to medium effect size!



Hettema et al. 2005, *Annual Review of Clinical Psychology, 1*, 91-1

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Efficacy of MI highly variable

- Variability in effect across studies
- Roughly 60% of clinical trials report efficacy
- Large therapist effects
- Site by treatment interactions in multisite clinical trials

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Combining MI to another active treatment can increase efficacy

- Additive effect!!
- Synergistic effects
- Improved effect of the other treatment
- Long-terms effects of MI such as 12 months with this approach

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Predictors of large effects of MI

- Patients characteristics:
  - Low readiness for change
  - Higher state/trait anger
- Study characteristics:
  - Minority populations
  - No treatment manual

MI can be reliably measured

- Therapist-only coding systems (e.g. MITI)
- Client-only coding systems (e.g. CLAMI)
- Therapist and client coding systems (e.g. MISC)
- MI fidelity predicts change talk and behavior change

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Insights from MI training research

- MI is simple, but not easy to learn
- Self-perceived practice doesn't correlate with actual practice
- "One shot" workshops are a good start but do not promote even basic MI proficiency
- Educational attainment, degree, or experience, does not correlate with competent MI practice
- Feedback and in-vivo coaching based on observed practice significantly improves acquisition of and maintenance of MI skills
- You don't have to be a specialist to effectively promote behavior change
- MI Network of Trainers: > 4000 trainers in 50 languages

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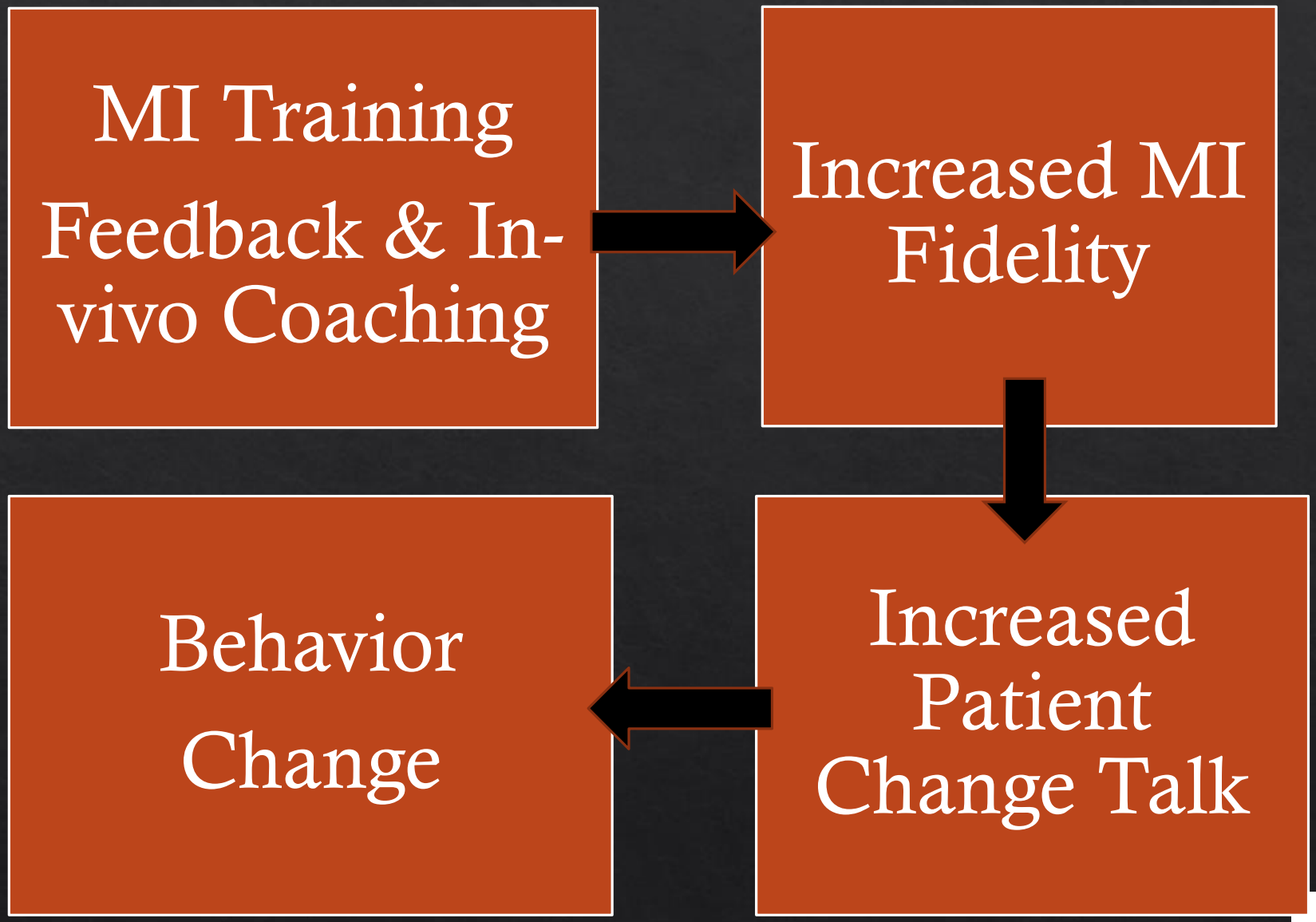
MI Training
Feedback & In-vivo Coaching
Increased MI Fidelity
Increased Patient Change Talk
Behavior Change

MI is:

- Based on four decades of research
- Evidence-based approach
- Relatively brief
- Verifiable
- With specific mechanisms of action
- Generalizable across conditions including psychiatric disorders
- Culturally adaptable
- Complementary and integrates well with other treatment approaches such as CBT, DBT…
- Learnable by a broad range of practitioners

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