

Motivational Interviewing

A Taste of MI



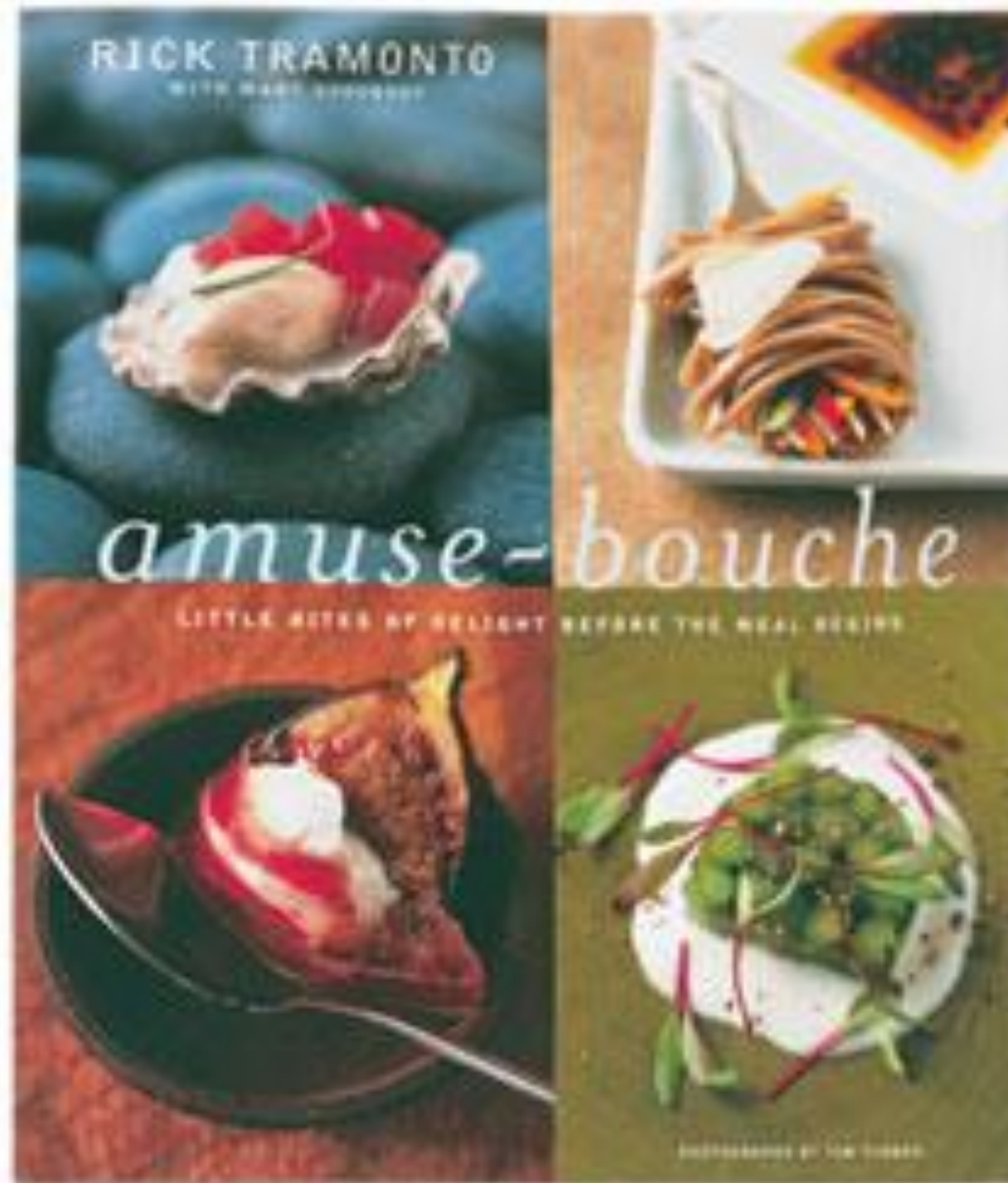
Mia Croyle, MA



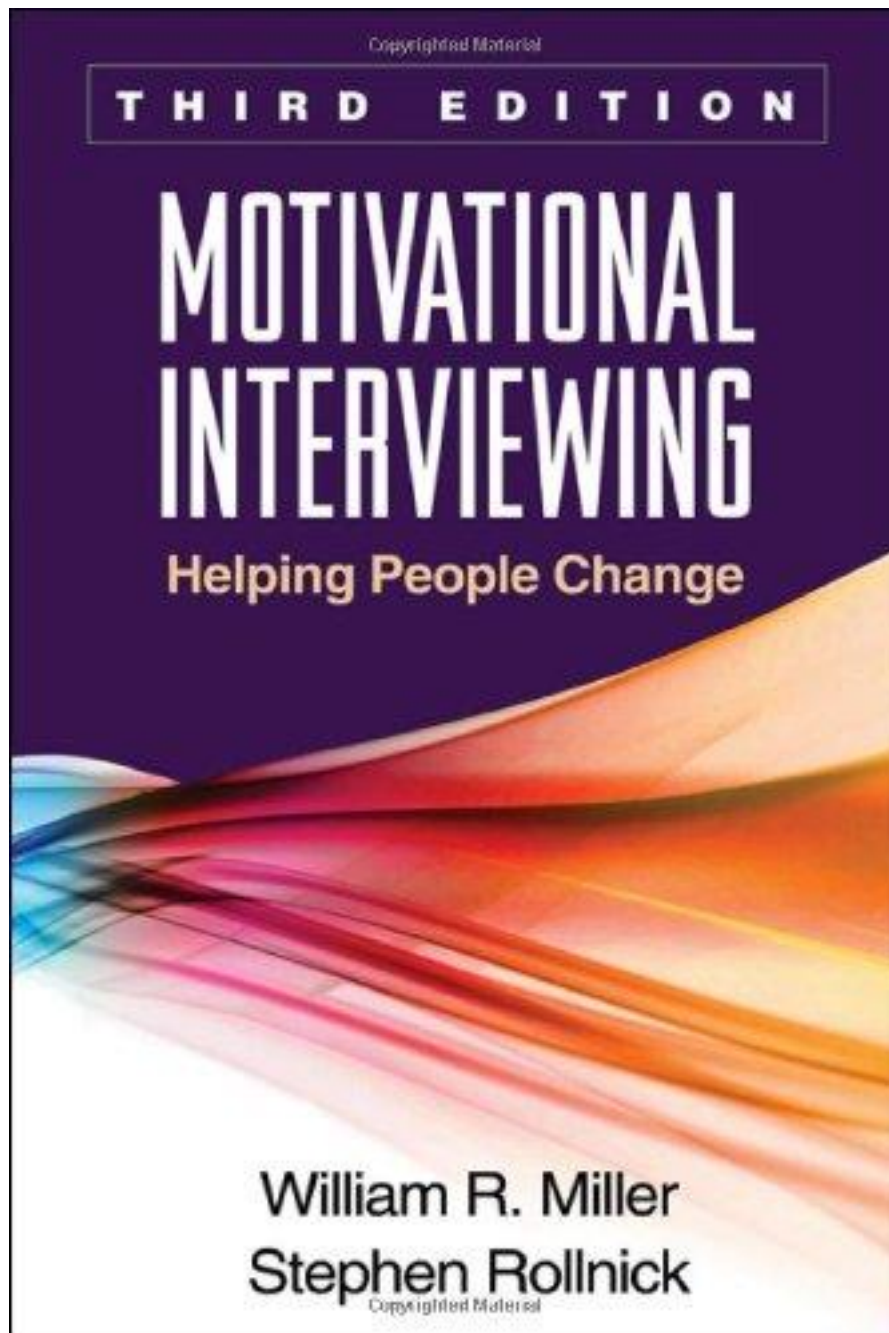
Objectives

- Acquaint attendees with basic concepts and methods of MI
- Establish an understanding and an interest in learning more about MI in the PCP setting
- Application of basic MI skills
- Review basics of MI and application within the PCP setting

Just a taste...



MI-3

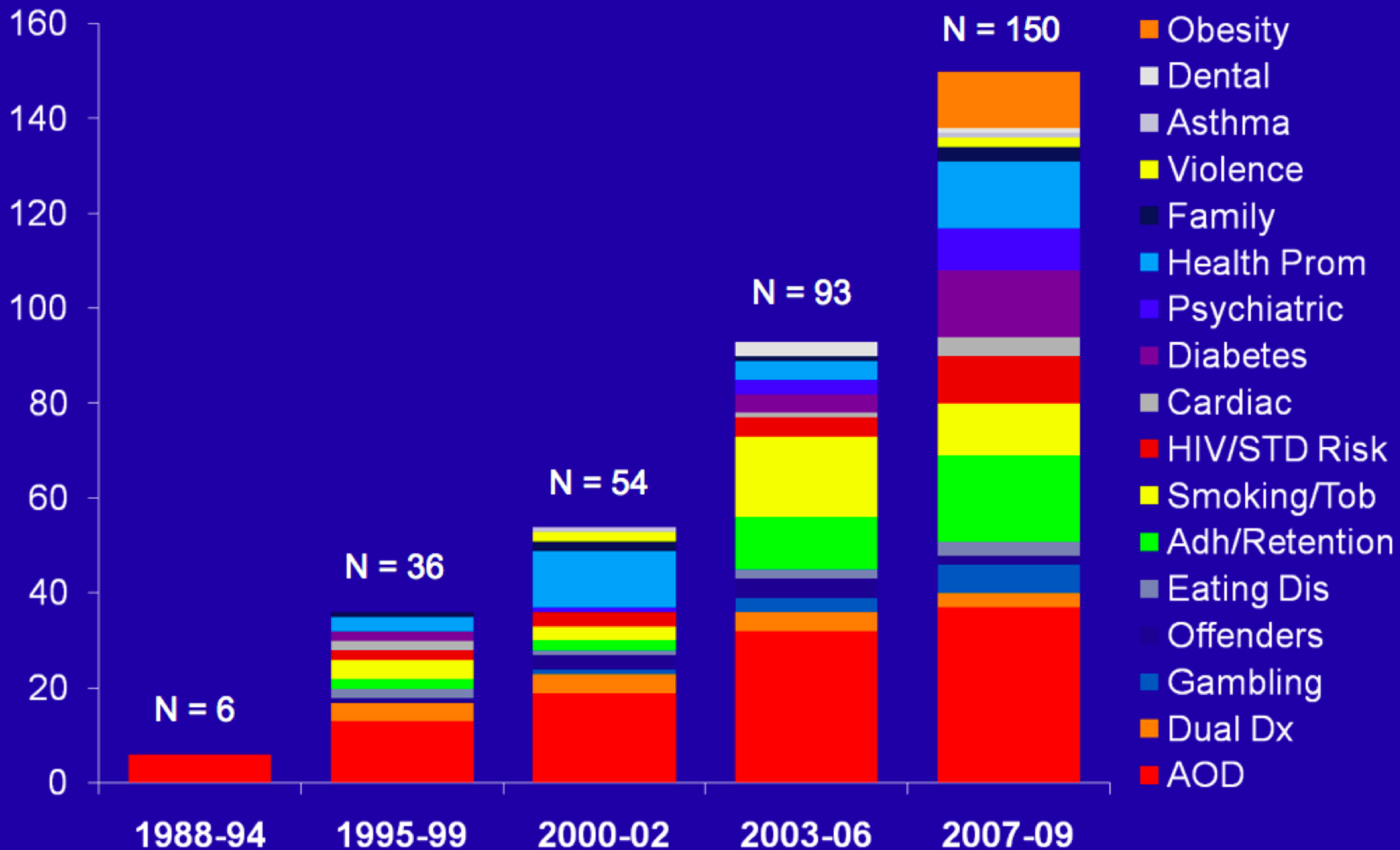


- 30 years after MI first emerged
- 1st edition 1991
- 2nd edition 2002
- 25,000 articles cite MI
- 200 RCT

Definition

Motivational interviewing is a
collaborative,
person-centered,
guiding method designed to
elicit and strengthen
motivation for change

Number of MI studies by year



What do we know?

- Improves retention, adherence, and outcomes across a range of behaviors
- Generalizes fairly well across cultures
- Relationship matters
- Change talk, sustain talk, and discord matter – and they are in our control!
- It is learnable
- Proficiency is reliably measurable and predicts better outcomes

Does MI work?

75%

improved

Source: Lundahl, 2010

MI in Medical Settings

- MI showed particular promise in areas such as HIV viral load, dental outcomes, death rate, body weight, alcohol and tobacco use, sedentary behavior, self-monitoring, confidence in change, and approach to treatment.
- MI was robust across moderators such as delivery location and patient characteristics, and appears efficacious when delivered in brief consultations.
- The emerging evidence for MI in medical care settings suggests it provides a moderate advantage over comparison interventions and could be used for a wide range of behavioral issues in health care.

MI in Primary Care

- “MI appears to be useful in clinical settings and as few as one MI session may be effective in enhancing readiness to change and action directed towards reaching health behavior-change goals.”

Vanbuskirk KA, Wetherell JL. J Behav Med. 2013 Aug 11. Motivational interviewing with primary care populations: a systematic review and meta-analysis.

MI facilitates change

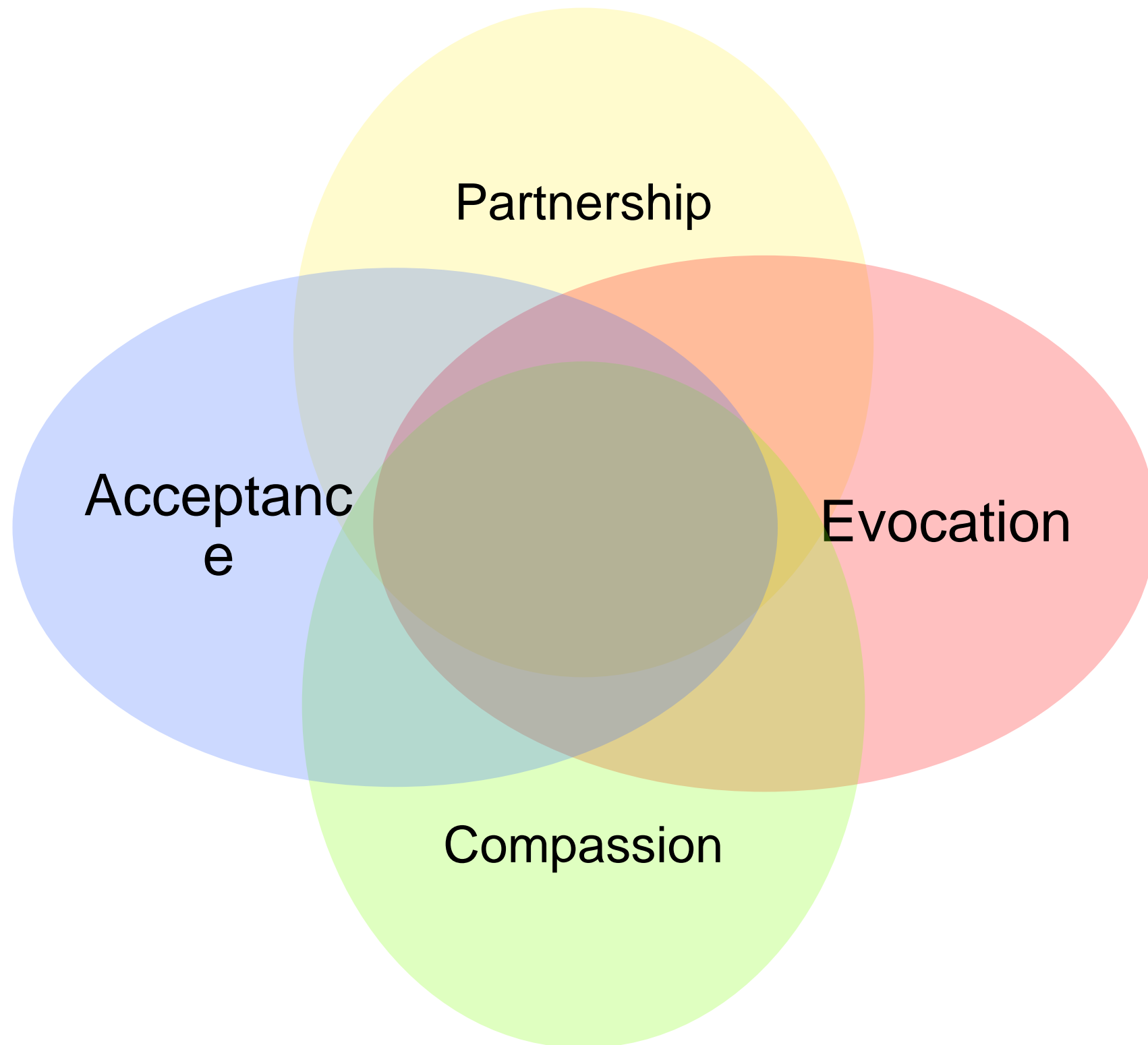
Helping a person identify, consolidate, strengthen, and act upon their intrinsic motivation



The MI Spirit

- People are competent
- We assume that they have self-knowledge, attitudes, and capabilities that can effect change
- Our main focus is on being present in a way that supports change

Spirit of MI



Four Processes

PLANNING

EVOKING

FOCUSING

ENGAGING

Engaging

- Relational foundation
- Objective: establish a collaborative working relationship with the other person

Focusing

- Develop and maintain a specific agenda
- Discover what is important to the other person
- Unfolding and evolving process

Evoking

- Differential eliciting of change talk
- Change talk = the other person's arguments for change

Planning*

- Ongoing process – not the end
- Begin with the end in mind
- Use the other person's expertise as your PRIMARY resource

*not necessary for it to be MI

Key MI Skills

- Open-Ended, Evocative Questions
- Affirmation
- Reflective Listening
- Summaries

Key MI Skills: Change Talk

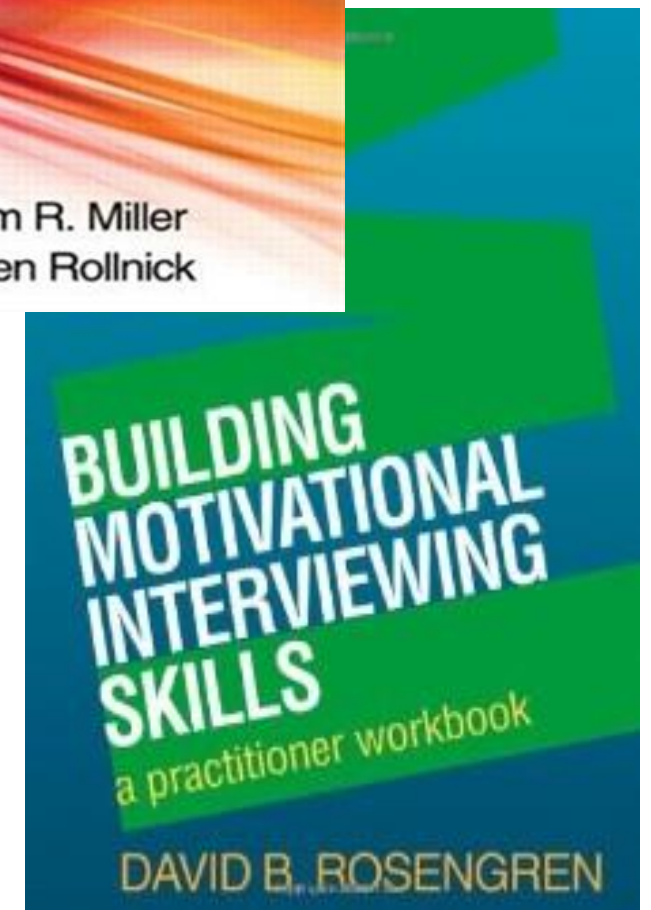
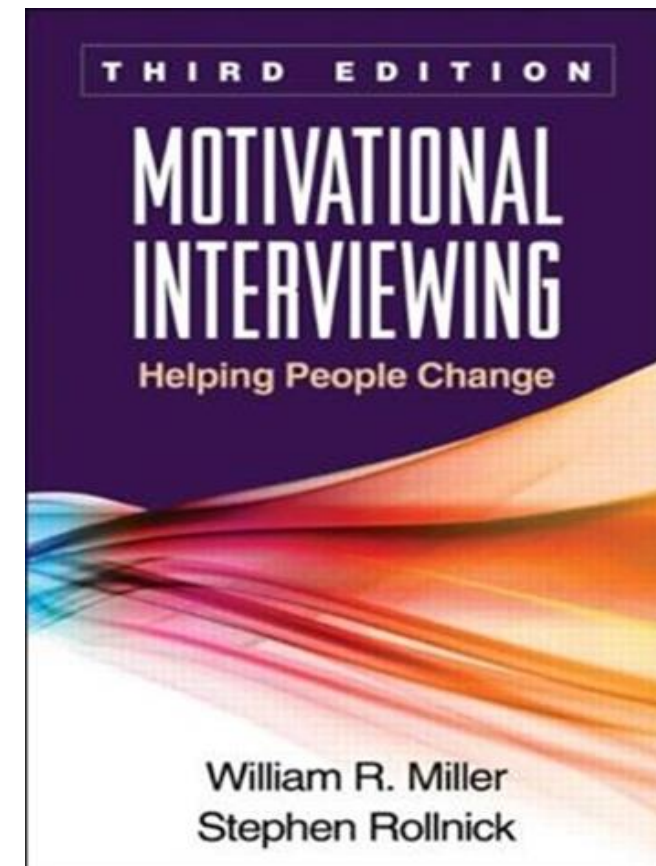
- Recognizing Change Talk
- Responding to Change Talk
- Eliciting Change Talk

Continuing to Learn MI

- “One-shot” trainings don’t promote competent practice (Miller & Mount, 2001; Walters et al., 2005)
- Initial training with follow-up coaching based on direct observation of practice is “gold-standard”
- Peer-learning groups have shown some usefulness
- You will learn from your patients if you know what to look for!

Resources for Learning MI

- Motivational Interviewing Network of Trainers
www.motivationalinterviewing.org
- Guilford Press – Applications of Motivational Interviewing Series





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