



# Change Talk MI

# Objective



Discuss how to use patient language cues (change talk and resistance) in the application of MI skills.

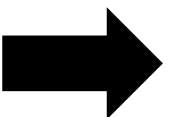


## **Change Talk**

Any patient speech that favors movement toward a particular change goal.

## **Sustain Talk**

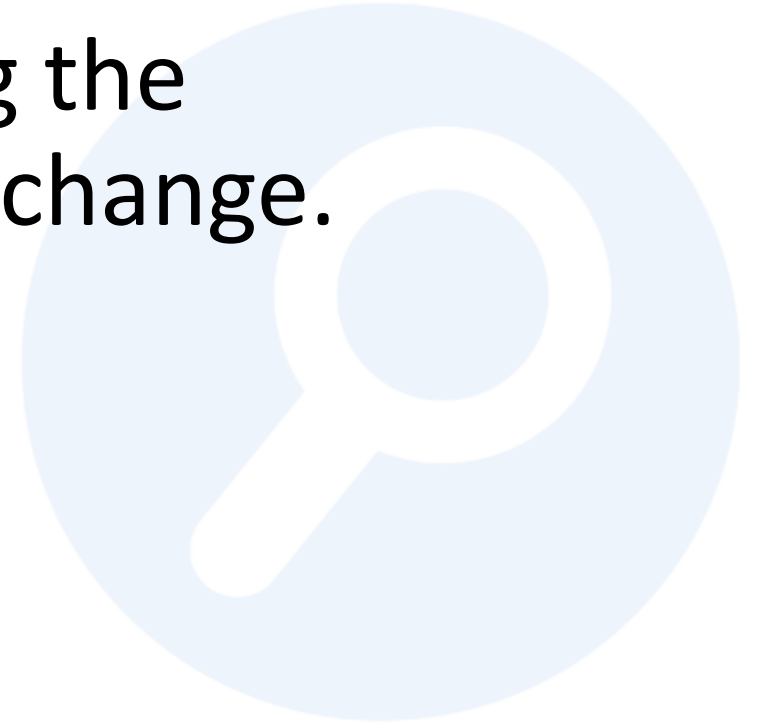
Any patient speech that favors status quo rather than a movement toward a change goal.



# Focusing for Change

Focus on the negative of continuing the status quo and positives of making change.

- **Step back** and ask for input
- **Consider** options
- **Share** information



# Knowing what to listen for



# Preparatory change talk

- Considering change
- Still some ambivalence



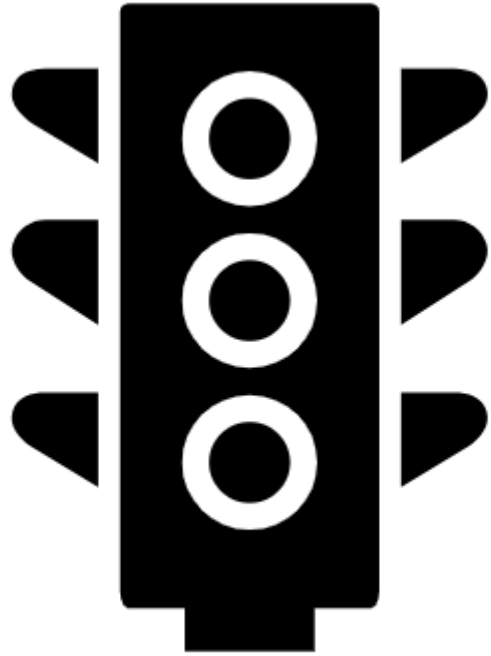
Desire

Ability

Reasons

Need

# Mobilizing Change Talk



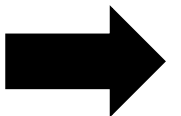
- Resolution of ambivalence
- Intention, decision, readiness

Commitment

Activation

Taking steps

# Elevate Change Talk Minimize Sustain Talk





# Responding to Change Talk

## Reflection

“You don’t like the way this makes you feel sometimes, *and* you’re looking for ways you might change things.”

## Elaboration

“What other concerns have you had about...? What other things have people told you about this? Tell me more about...”

## Summarizing

“Let me see if I’ve got it so far...” (Summarize client statements, including ambivalence).

## Affirming

“That sounds like a good idea.”

## Clarifying Ambivalence

“What do you like about drinking... what is the other side, things you don’t like?” (Explore both sides).

## Clarify Values

“Our children are really important to you”. (Help move beyond ambivalence, important aspects of tipping the decisional balance in favor of change).

# Change Talk

## Using Reflections

### Complex

- Goes beyond what they said
- Aims to capture what they meant
- Deepens understanding
- Forward movement

