

## Chapter 2

## What Is MI and Why Use It?

## Opening

I was sitting in the back of a training room, watching as one of our trainers led a continuing education session, when Sarah, one of the training participants, piped up.

"Well, I let people know it's okay to challenge me, but I also tell them I'm going to challenge them right back. If they're wrong, I'm going to let 'em know. They also need to know I'm in charge." Sarah was hitting a refrain she'd sung before.

Some heads nodded in agreement. Others looked down, disengaging from a conversation they'd also heard before from this participant. Some shook their heads in disagreement. The trainer, standing at the head of the class, mentally ticked through her considerations:

- Respond to the statement in a manner consistent with MI, since we train MI as we practice it.
- Shape the response so we can support the participant, and provide a new perspective on her concerns.
- Attend to the rest of the participants, as this behavior was dividing the room.
- Offer an alternative view for the participant's consideration, one that is more consistent with MI.
- Avoid bogging down a conversation that will lead away from the session's focus.

I sat in the back thinking how some things have changed over the past 20 years, whereas others have not. This person, chatty and opinionated, had been a thorn in several trainers' sides during this training day. Sarah struggled to embrace and apply the concepts and skills being taught. She offered differing views frequently and also cared deeply about her clients. But she was irritating, and I could see the trainer struggling to respond and could feel my own desire to confront her and show she was wrong! The trainer opened her mouth and said. . . .

We are at a crossroads: a situation that often arises in treatment, consultations, and training in which a person raises objections and we would rather not deal with them. In fact, we may be annoyed, irritated, or frustrated, just as I was (and suspect this trainer was). So, we have a choice. Do we offer facts? Counter the arguments? Ignore the objections? Dismiss the concerns because of the messenger? Use the group to address Sarah? Weigh in with our expertise? Or do we respond in a manner that focuses on her reasons for concern? Do we try to understand what is driving this behavior? The choice we make lies at the heart of MI.

## A Deeper Look

## Conversations about Change

At its most basic, MI is a conversation about change. There are many ways to have this conversation. Rollnick, Miller, and Butler (2008) suggest these can be thought of as conversational styles that share three primary communication tools (asking, listening, and informing), but fall along different parts of a circle. Each of the three styles—directing, following, and guiding—is well suited to some situations and a mismatch with others. The goal is not for practitioners to use only one style but rather to move flexibly and skillfully among them as the situation dictates.

The practitioner using a *directing style* provides expertise, often in the form of advice or a plan of action. There is a problem-solving quality to this process. The person directing is typically in charge. Before surgeons insert a pacemaker/defibrillator, they communicate to patients the problem, the solution, and how they will accomplish this task. The technical expertise the practitioner brings to the encounter may be quite helpful to the client, but there is also an implication of an uneven relationship as a result. The client depends on the practitioner for decisions, advice, and action. This approach may save lives. For example, a child runs into a street and the parent responds quickly with a command to stop to prevent harm. The implicit message in this style is, "I have ideas about how to solve this situation."

In contrast, in a *following style* the practitioner, not surprisingly, follows the client's lead as the client explores an area. The following style is an approach wherein the client is primarily in charge. The practitioner's goal is to listen well and to understand the situation. The practitioner sets aside concerns and focuses on how the client sees the problem. For example, a woman considers either staying in a stable job where she is valued but not entirely fulfilled, or leaving for self-employment that might be more fulfilling but also has significant financial risk. There is generally no correct choice, so the practitioner helps the client understand her situation more clearly, primarily through listening and avoiding the temptation to give advice. This style may be particularly helpful in situations in which the client has received some powerful news or is overwhelmed by emotion. The conversation moves at the client's pace and direction. The practitioner's implicit message is, "I accept and trust your wisdom about what is needed."

A *guiding style* involves an approach in which a practitioner and client work as a team. The practitioner and client "walk" together, but this time the practitioner points out routes and options, serving as a resource about what is possible, what others have done, and the possible risks and benefits of each approach. As the practitioner points out possible paths,

the client receives assistance in choosing the direction that fits best for him or her. However, it is the client who must ultimately choose the way. In this style the implicit message is, "I'll help you solve this yourself." MI is a refined form of this guiding style.

Within each of these styles, practitioners might listen, ask questions, or share information, though some skills may predominate within a particular style. Each of these styles can be enacted in a manner that is either consistent or inconsistent with MI principles. Finally, although the distinction of the styles makes intuitive sense, it may be difficult to draw clear boundaries between them as one moves from following to guiding to directing. In practice, this boundary is only of minor importance because the goal is not to apply only one style, but rather to move fluidly between all three and decide at which point a particular style is likely to be the most effective. A beginning definition of MI flows from these ideas.

### *A Beginning Definition of MI: What Is MI?*

MI is a collaborative conversational style for strengthening a person's own motivation for commitment and change.

It is easy to see how one style—guiding—fits this definition more than the others. MI is a conversational style marked by both people contributing expertise to the discussion. There is a partnership. Yet, there is a second part to this definition that asks the practitioner to consider an essential question: "Does my style assist clients in strengthening their reasons for change?" To understand how a style may aid or detract in this process, we need to explore how conversations about change work.

### *Readiness to Change*

Our partners in these conversations differ in their readiness to change. This statement is not a revelation to most of you. In fact, your desire to influence your clients' readiness may have prompted you to purchase this book. Let's review a few basic concepts about readiness and change, many of which originate in writings about the transtheoretical model by Prochaska and DiClemente (1984, 1998).

- *Ambivalence about change is normal.* If changes were so obviously needed and so easily accomplished, they would've already happened; clients wouldn't need our assistance. But because change is tough, people have mixed thoughts and feelings about it. Instead of viewing this uncertainty as a problem, MI practitioners view it as part of the process. Indeed, ambivalence occurs throughout the change process, even after clients are well under way in their change efforts (Engle & Arkowitz, 2006). It is this ongoing quality of ambivalence that has led us away from the idea of resolving ambivalence to instead focusing the client on working through it enough to tip the balance in favor of change. Once tipped, the job becomes maintaining and enhancing that tilt toward change.

- *Change is often nonlinear.* That is, clients often do not move in straight lines from no change to change. In some instances, there are initial steps, setbacks, and sometimes a

return to old behaviors before change is accomplished. Often, clients will have attempted to effect changes without our assistance, with more or less success.

- *Readiness is not static.* We return to this concept repeatedly. Whereas clients may differ in their starting points, it has also become increasingly clear that change efforts are something we, as practitioners, can influence either positively or negatively. One can imagine many different paths Sarah's response might take based on what happens next in the opening example.

- *Attend to readiness in your work.* Some MI trainers refer to readiness as a vital sign, just as blood pressure, temperature, and pulse are vital signs in health care settings. By attending to readiness levels, the practitioner can direct sessions more effectively. For example, when clients are high in their confidence about making a change but low in their perceived importance of making that change, attention and energy can be directed to exploring the issue of importance.

### *The Righting Reflex*

The *righting reflex* refers to the tendency of practitioners to actively attempt to fix problems in their clients' lives and, by doing so, reduce the likelihood of client change. It begins with our desire to help others. It is a positive motivation that leads us to address problems when we see them. We want to help clients change a situation and thereby lead a happier, healthier, more productive life. There is nothing wrong with wanting these outcomes for people. The difficulty of the righting reflex is that it fails to consider the possibility of ambivalence.

Since clients are naturally ambivalent, there are times when they do not view change as either necessary or possible. This situation is simply the flip side of the coin of change. There may be costs associated with change, including fear and uncertainty, changes to relationships, and monetary and time demands, which all argue for maintaining the status quo. All of these costs or factors influence the client to stay with the current behavior.

When we actively press for change, we place this ambivalence under pressure and the result is predictable—clients push back! Miller and Rollnick (2013) previously called this pushback *resistance* but, upon further consideration, saw the interpersonal aspects of this process were not adequately represented. As a result, the term *discord* is now used. Research supports this conceptualization. Practitioner behavior directly influences client behavior, either positively or negatively (Barnett, Moyers, et al., 2014; Miller & Sovereign, 1989; Moyers et al., 2007; Patterson & Forgatch, 1985). Practitioner behavior that increases discord includes (1) trying to convince clients that they have a problem, (2) arguing for the benefits of change, (3) telling clients how to change, and (4) warning them of the consequences of not changing. The righting reflex also tends to slip in when we feel there is information a client really needs. This may be particularly pernicious because it doesn't seem to fit any of the four conditions previously listed. Its soft character may reduce our awareness of its occurrence. Yet, the result is the same—clients push back.

Our arguments in favor of change increase discord, which then reduces the likelihood that any change will occur. In this perspective, discord is a form of energy that practitioners can either intensify or lessen, depending on their behavior. Intensification of discord is then

a signal to practitioners that a change in their behavior is needed. The practitioner's goal is to be aware of this natural and well-meaning tendency, to avoid engendering it by trying to fix problems, and to minimize discord by not actively fighting against it. Instead, we will use a style and behaviors designed to elicit reasons for change from the client.

### *A Practitioner Definition of MI: Why Would I Use It?*

These ideas not only help fill in the picture for the beginning definition of MI, but they also lead us to a second definition of MI, which addresses why a busy practitioner might invest the time and effort to learn this method.

MI is a person-centered counseling style for addressing the common problem of ambivalence about change.

Within this definition the elements begin to converge. This is a conversation that has a particular quality. It is collaborative in nature; we're in this conversation together. It does not involve either telling people what to do or why to do it, but rather eliciting their reasons for change. It does so because it recognizes the centrality of ambivalence about change for most clients and notes that telling people what to do often has the unintended consequence of increasing resolve not to change. Moreover, MI provides a method for responding to ambivalence built on client-centered traditions. It is this influence of client-centered traditions to which we turn next.

### *MI Spirit*

There is a guiding philosophy that informs how we interact with clients and it originates with the client-centered writing of Carl Rogers (1980). However, in the context of MI, there is an evolution of Rogers's ideas. Miller and Rollnick (2013) describe this philosophy as a heart set and mindset that falls within four domains: partnership, acceptance, compassion, and evocation. Moreover, each of these domains contains not only an experiential component, but also a behavioral one. Finally, these domains are overlapping, and it is at the center of this overlap that we find the core of MI spirit.

Although *partnership* may seem an obvious footing for MI, it can be easily missed as we feel pressure to help clients change. This domain recognizes that to be most effective, we must view the client as an active partner. Although the practitioner brings significant expertise to this relationship, a partnership stance embraces clients' expertise on themselves, their histories and circumstances, and their prior efforts at change. The practitioner's respect for the client's expertise is the experiential element of partnership. The behavioral expression involves actively eliciting the client's aspirations and goals (as well as maintaining awareness of our own), and creating a positive environment within which change is possible. For example, as practitioners we avoid prescriptive and proscriptive advice, even though we offer concerns about certain client decisions.

*Acceptance* both contains elements of this partnership and moves beyond. Miller and Rollnick (2013) describe it as comprised of four components: absolute worth, autonomy,

accurate empathy, and affirmation. In these components, the Rogerian traditions are clearly evident.

*Absolute worth* reflects the belief that each person not only has value, but also has a potential to become more than he or she is. Thus, we accept and esteem people, even when they engage in behavior with which we have profound disagreements. This component of the MI spirit can be especially challenging for practitioners when clients choose paths that negatively affect others who may have few or no options (e.g., children). MI practitioners share this concern and recognize they cannot force clients to change. Even within coerced circumstances where we control freedom and reinforcers, clients must choose change.

*Autonomy* reflects the belief that people must make their own decisions about their life direction. It's important to make a distinction here between *influence* and *control*. The work we do with clients can influence their decisions, but it is ultimately their decision, even (and perhaps especially) when they're incarcerated. This knowledge is contained in the modified adage that although we can lead a person to water, we can't make the person drink. With regard to MI, this statement would be more accurate if the following were added, "... but we can help the person become aware of his or her thirst so that he or she might choose to drink." Notice this addition is not the same as making the person thirsty, which seeks to simply impose our will on another. Instead, we are helping the person identify a process that already exists within him or her.

To help clients recognize their thirst, we must first understand the world from their perspective (Moyers & Miller, 2013). Such an understanding requires that we have *accurate empathy*: that is, the ability and desire to see the world as the client does while retaining our ability to not become lost in it. It is the intermingling of these two qualities that helps clients and us to notice and work toward other possibilities for their lives.

Finally, if clients are to be successful in making changes, they must first see that change is possible. Hope is essential to any change effort, and thus we must nurture that possibility within clients (and within ourselves). We assist in this process not by looking for problems and weaknesses, but instead by looking for and identifying the strengths and resources that lie within the individual. Miller and Rollnick (2013) call this process *affirmation* and again note there is both a *mindset* of looking for these things within clients and then the *behavioral component* of actively calling their attention to those strengths and resources.

Taken together, these four elements—absolute worth, autonomy, accurate empathy, and affirmation—comprise *acceptance*. They form the bedrock of what Rogers taught us more than 60 years ago: If we accept clients as they are, they feel less need to defend themselves and thus are more open to the possibility for change.

The domain of *compassion* may seem like nothing more than common sense, but it is far more: It is the antidote to the practitioner (or salesperson) who would manipulate people into taking actions that serve the practitioner. In this sense, compassion extends beyond the usual definition of experiencing caring and concern for another's suffering, to one that includes working on behalf of that individual's welfare. Indeed, Miller and Rollnick describe compassion as "a deliberate commitment to pursue the welfare and best interests of the other" (2013, p. 20).

*Evocation* involves drawing out ideas and solutions from within clients. As experts on themselves, clients have experience with their challenges and the things that help and hin-

der them in attempting to change. As experts in our fields, we generally know something about clients with these issues and although we have educated guesses, we don't know what this specific client will need or want. Our goal is to evoke from clients their reasons and potential methods for changing and to offer, as appropriate, ideas for clients' consideration. We also acknowledge there are multiple ways to enact change and motivation for change comes from within the client.

This guiding philosophy is not unique to MI. Indeed, the elements of MI spirit have appeared in a variety of categories (e.g., religious teachings, psychological treatises). Research (Moyers, Miller, & Hendrickson, 2005) indicates this spirit is an important predictor of practitioner skill with MI, which, in turn, predicts client behavior and treatment outcome. Indeed, Miller and Moyers (2006) place such importance on this context that in describing eight tasks for learning MI, they make this the first element for practitioners to learn.

### Core Skills

MI contains counseling skills and methods found in many therapeutic approaches. Within these skills, we find the tools that help build rapport with clients, explore concerns, and convey empathy. The acronym OARS+I (open-ended questions, affirmations, reflective listening, summaries, and information exchange<sup>1</sup>) conveys these core skills. Although these skills are basic to many approaches, this should not be taken to mean they are easy or simple. Each of these skills can be done well or poorly, and training is needed to achieve clinical expertise using them. For some types of counseling, they are all that is ever used. Chapters 4 and 5 discuss these skills in greater depth.

### Eliciting Client Change Talk

A third element represents what is unique to MI: an emphasis on eliciting specific kinds of speech from clients—what we call “change talk.” Many of the interventions used in MI are specifically designed to evoke this kind of language and reinforce it when it occurs. This approach is based on the idea that clients will be more likely to do what they have genuinely spoken in favor of doing during a session. Research by Amrhein, Miller, Yahne, Palmer, and Fulcher (2003) suggests that the trajectory and strength of this change talk predicts commitment, which in turn predicts behavior. Research also indicates that frequency of occurrence is important (Barnett, Spruijt-Metz, et al., 2014; Moyers, Martin, Houck, Christopher, & Tonigan, 2009)—and might be a little easier for us to notice when it's occurring than the other two factors. A central goal of MI is to help clients articulate their reasons for changing, increase the frequency in which they engage in this talk, and, in so doing, strengthen their intention to change.

<sup>1</sup> In their most recent text, Miller and Rollnick (2013) emphasize the active nature of these skills by using the gerund form: *asking, affirming, listening, summarizing, and exchanging* information. This emphasis is a useful way to think of these things. However, for the purposes of learning and recalling the skills, the acronym OARS+I has a “stickiness” that makes retention easier, and so it is the convention used here.

Having clients (rather than us) make the arguments for a particular change is *most* important when a client is ambivalent. As already noted, client ambivalence creates a special dilemma: whatever the practitioner argues *for*, the client may argue *against*. The unfortunate result of this ambivalence dilemma is that well-meaning counselors often try to convince clients to move in the direction of a useful change (the righting reflex in action), only to be met with a “yes, but . . .” response. If this dynamic goes on long enough, clients will actually *talk themselves out of changing*, leaving dispirited practitioners behind (or ones who are convinced that clients did not want to change, anyway). Chapter 9 provides more information about change and sustain talk, and Chapters 10 and 11 provide exercises in responding to each.

These three elements—MI spirit, OARS+I, and change talk—are essential for MI. Figure 2.1 provides one way of thinking about how these components fit together and combine to form MI. Again, many pieces of MI have been present in other systems of therapy, as well as in religious and philosophical thinking throughout the ages. Unique to MI is how these elements are combined, the timing of how they're used, and their application to evoke change talk. These also lead us to our third definition of MI.

### A Technical Definition of MI: How Does It Work?

This is the definition for folks who like to know how things work—that is, for those who don't just want to put gas in the car and occasionally change the oil, but who also want to raise the hood and understand how the parts of the engine work together.

MI is a collaborative, goal-oriented style of communication with particular attention to the language of change. It is designed to strengthen personal motivation for and commitment to a specific goal by eliciting and exploring the person's own reasons for change within an atmosphere of acceptance and compassion.

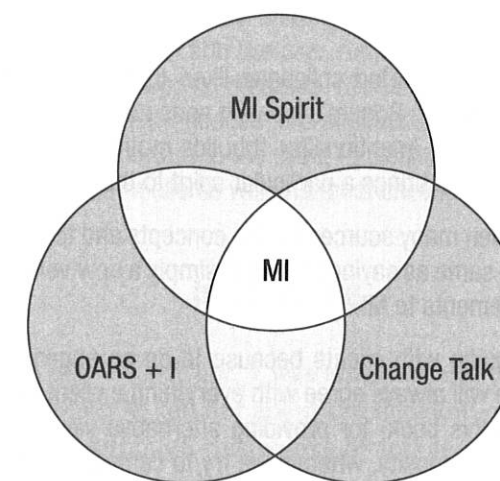


FIGURE 2.1. MI elements.

Within this definition, we see the expression of the MI spirit, OARS+I, and change talk. Partnership and conversational style are still evident, but now another layer of goal orientation is present. The aim is still to elicit client reasons for change, but now toward a *specific* goal. There is also a causal relationship noted for how motivation and commitment are strengthened. Finally, there is a context within which this process occurs and includes not only acceptance but also working in the client's interest. Again, for some of us, this is more information than we want, but for others it will provide the links we want to see. As with MI, it's up to you to decide which definition is the most useful for your circumstance.

### Concept Quiz—Test Yourself!

True or false:

1. T F MI really is just Carl Rogers with an attitude.
2. T F Many MI concepts are drawn from others' theories, writing, and research.
3. T F Within MI, practitioners avoid arguing with clients.
4. T F Reflective listening is MI.
5. T F *Evocation* means you're drawing out motivation and resources from within the client.
6. T F In MI, how you say something is just as important as what you say.
7. T F Ambivalence is a sign of denial.
8. T F Discord is an interpersonal process.
9. T F Being directional is a key concept in MI.
10. T F Autonomy means we don't have goals for clients' behaviors.

### Answers

1. F A dear and now departed colleague liked to describe MI in this joking reference. Although MI builds on Rogers's ideas, it adds more than attitude. MI is a combination of directionality and intentionality. It builds motivation, dances with discord, attends to change talk, and brings a particular spirit to the encounter.
2. T There have been many sources for the concepts and techniques used in MI. However, this is not the same as saying that MI is simply a new version of an old concept. There are unique elements to MI.
3. T We avoid arguing with clients because to do so engenders discord. This does not mean that we will always agree with everything a client says. MI uses many methods (described in this book) for providing alternative views. However, we begin with a basic stance of curiosity, wherein we try to comprehend how the client understands the world.

4. F Reflective listening is a critical skill in MI, but it is *not* MI. Indeed, I have observed practitioners forming very accurate, but MI-inconsistent, reflective listening statements. However, as is noted in Chapter 5, I do not believe that you can do MI well without being able to do reflective listening well.
5. T *Evocation*, a component of MI spirit, refers to a stance of constantly trying to draw out information, wisdom, solutions, etc., from clients. We also use evocation to draw out motivation and then hold this information, as in a mirror, for the client's consideration.
6. T The attitude and intent of the practitioner are critical in terms of how communications are received and used. For example, a sarcastic question that asks "And how is that working for you?" has a very different impact than a question that comes from a genuine attitude of curiosity using the exact same words.
7. F Although ambivalence can keep people stuck and its resolution is a central aim of MI, it is not the same as denial. Nor is it a problem. It is a normal part of any change process and should be expected and respected.
8. T Discord is not something inherent in a particular disease or disorder. Rather, it is part of an interpersonal process that can be influenced—for better or worse—by the practitioner and should be used as a cue for the practitioner to change strategies.
9. T Directionality, a key concept in MI, has two elements: paying attention to parts of conversation that support client change and steering the conversation in productive directions. We will attend to some things and not to others. The practitioner works to build motivation, diminish discord, and elicit change talk through careful attention to the client's words and steering the conversation.
10. F Recognizing client autonomy does not negate practitioner goals. Within MI, there are targets for change. However, early in the engaging process, these aspirations for clients are set aside as we create a safe environment for the clients to explore their circumstances and decide whether we're trustworthy guides. Within the MI framework, we (as practitioners) may have an aim we think is important: for example, deciding whether to donate a kidney, shifting attitudes, increasing sexual safety, reducing recidivism, improving diet and exercise, reducing authoritarian and enhancing authoritative parenting, or stopping drug use. Clients will also have goals. We work actively to bring these different agendas into alignment, though this happens only after we discover what is important to the client (typically in the *focusing* process) and all the while recognizing that clients will and must choose the destination for any change.

### In Practice

Let us return to Sarah. When we left her, I was annoyed and the trainer was considering options. Remember, I was ready to tell her about the data and, in effect, argue for why she was wrong (and I was right). Although this course of action may have felt good to me, it is not consistent with MI—nor would it have benefited Sarah or the other trainees who felt likewise. Her statements were a form of discord. So, what the room needed was a more

MI-consistent way of responding to it. As is often the case, the easiest route to a more MI-consistent spirit was to focus on the partnership and to do this by really listening and reflecting. Here is a subsequent dialogue between the trainer and Sarah, with commentary.

| <i>Statement</i>                                                                                                             | <i>Commentary</i>                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| TR: You want to have an open dialogue with your clients.                                                                     | Resists the righting reflex and attempts to communicate understanding of the practitioner's motivation through a reflection. |
| S: Yeah. I think they should tell me what's on their mind, but they also need to know when they're wrong.                    | Sarah responds positively and reasserts her goal.                                                                            |
| TR: You don't want them to leave with the wrong impression.                                                                  | Listening.                                                                                                                   |
| S: Yeah. That it's okay—what they're doing.                                                                                  | Discord begins to drop.                                                                                                      |
| TR: And you challenge them so they don't walk away with incorrect information.                                               | Nonjudgmental stance; trying to communicate understanding of her motivation.                                                 |
| S: Exactly. That's my job.                                                                                                   | Sarah feels understood and reinforces her point.                                                                             |
| TR: And you're doing that in the best way you know how, as I'm guessing is true for the rest of the people in the room . . . | Attempt to build a little motivation and to broaden comments to other trainees.                                              |
| S: Exactly.                                                                                                                  | Sarah feels understood and affirmed, but did not move much in terms of motivation.                                           |
| TR: Sometimes it works really well.                                                                                          | Affirms trainee's perspective and opens the door for developing discrepancy.                                                 |
| S: Yeah.                                                                                                                     | Discord lowers.                                                                                                              |
| TR: But not always . . .                                                                                                     | This is taking a risk to build motivation, though it is a reasonable guess about what might be true.                         |
| S: No. Not every time. Some people aren't ready to change.                                                                   | Discord drops. The relationship feels more collaborative and less adversarial.                                               |
| TR: And you'd like them to be . . .                                                                                          | This reflection joins with Sarah and her positive motivation for helping clients.                                            |

| <i>Statement</i>                                                                                                                                                | <i>Commentary</i>                                                                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| S: Yeah, it's why I got into this business. I want to help.                                                                                                     | Sarah taps into her hopes and values.                                                                                                                                                |
| TR: And it's that desire to help that brings you to training like this—to add tools to your tool belt.                                                          | Listens to trainee and emphasizes Sarah's proactive stance in learning something new. The relationship feels more like a partnership, while respecting her autonomy to choose.       |
| S: That and ( <i>laughs</i> ) the CE [continuing education] credit.                                                                                             | Sarah feels understood, and the joking suggests a shift in her feelings.                                                                                                             |
| TR: ( <i>Laughs.</i> ) I'm guessing CE credit is important to a lot of people in the room, as well as finding ways to help with those clients who challenge us. | Engages with Sarah and the room and links their agendas together in a reasonable guess.                                                                                              |
| S: ( <i>Trainees laugh and nod heads.</i> )                                                                                                                     | There is agreement and engagement.                                                                                                                                                   |
| TR: So, the question becomes, "How do we know if something we are doing is working with clients?"                                                               | With the participants and Sarah reengaged, the trainer directs the conversation in a manner that will lead the trainees to identify when things are and are not working for clients. |

This interchange illustrates the components discussed previously, though it's not a perfect interaction. The interchange flows from Sarah's dug-in stance to one that is more open to the possibility of change. This shift may be less than what we would want and yet it creates the conditions under which change can occur. Creating those conditions is the goal of engaging.

Rather than attempt to persuade Sarah, the trainer built the partnership by listening well to her and valuing her desire to be helpful with clients. There was also a clear directionality and intentionality in the encounter. The trainer's reflections did not simply repeat what Sarah had said, but instead took some guesses about what might lay below the surface in her statements. This approach allowed Sarah to consider her deeper motivations and to be open to the possibility of what this training might offer her.

The trainer was attentive not only to Sarah's needs but also to those of others in the room. This stance led the trainer to identify common elements across trainees and to choose a method—a well-timed and well-crafted question—that asked the group members to begin a self-evaluative process. This approach laid the groundwork for change talk, as well as moved the group back on target for the purposes of the training session. To reinforce something noted earlier in the chapter, reflective listening statements were the primary tool throughout this encounter.

## Favorite Mentor (p. 2 of 2)

*How I responded:* I tried things I would never have attempted otherwise. I made mistakes, but I also made discoveries and was not afraid of appearing foolish because I did not know how to do something. When I encountered problems, I didn't hide my inadequacies. I learned what I could overcome and what I could not. Perhaps most importantly, I looked forward to that class and always felt welcome.

Now it's your turn. Think about your favorite teacher or supervisor. Consider, especially, what characteristics he or she had or what he or she did that inspired you to learn and excel. Then answer these questions.

What's his or her name?

What characteristics did he or she have?

What inspired you to do or be your best?

How did you respond to his or her efforts?

After you've completed this exercise, examine the characteristics of this important person and compare them to the MI spirit characteristics of partnership, acceptance, compassion, and evocation. "Partnership" is the proclivity to work in harmony with others to solve a problem, address an issue, or pursue an idea. Each person may have separate roles, but the process is mutually supportive. "Acceptance" recognizes the absolute worth of others, their ability and need to choose their life paths, and their ability to choose wisely. "Compassion" is not only sharing care and concern for the well-being of another, but also acting on behalf of the other's welfare. "Evocation" is the action of one party bringing out the best in the other. How do these four elements reflect the person you identified?

## EXERCISE 2.2. Is It MI Spirit?

Here are examples of short client statements and practitioner responses. Review these exchanges and then decide if the practitioner's response is consistent with the spirit of MI (thumbs up) or not (thumbs down). You might want to jot down a few notes as to why you rated each sample as you did. Then look at the discussion for each example at the end of this exercise.

1. *Richard (Sarah's husband):* I'm just furious that Sarah lied to me and had this affair behind my back. I can't believe I didn't see it! I feel like such an idiot.

*Practitioner:* In retrospect, what signs did you overlook?

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

2. *Arthur:* I know my dad told you I'm depressed, but I'm not. Just because I don't want to play football doesn't mean I'm depressed.

*Practitioner:* Your father is worrying needlessly. What do you think he's seeing that makes him worry this way?

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

3. *Tanya:* I need to come up with some sort of plan to help myself get back on track now. This health crisis has thrown me for a loop. I can't think about anything else. What do you think I should do?

*Practitioner:* Well, I have some ideas about what might help, but first let me hear what you've already considered.

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

(cont.)

From *Building Motivational Interviewing Skills: A Practitioner Workbook, Second Edition*, by David B. Rosengren. Copyright © 2018 The Guilford Press. Permission to photocopy this material is granted to purchasers of this book for personal use or use with individual clients (see copyright page for details). Purchasers can download a version of this material (see the box at the end of the table of contents).

4. *Arthur*: I'm not going to keep that stupid thought journal. How does it help me to monitor my "loser" thinking? I'm coming here to feel better, and paying attention to all that makes me feel worse.

*Practitioner*: Okay, Arthur, you might be right. This works for many folks, but not everyone. Maybe we need to try a different way to approach this. We've talked about other ways to address this issue. What makes sense to you to practice instead?

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

5. *Tanya*: They told me I have to have this surgery right away. But I don't trust them, so I haven't scheduled it yet.

*Practitioner*: Why take the chance? They're the experts, after all. Let's call from this phone right now—maybe you can get in this week.

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

6. *Sarah (Richard's wife)*: I've had it with Richard's guilt mongering. Okay, so I had an affair. I'm ready to end it and start working on our marriage, but I don't think he's ever going to let me forget it. Maybe we should just get a divorce.

*Practitioner*: Sarah, you are the only one who can decide if you should stay in this marriage or leave it. I wonder what signs you would need to feel more optimistic about working on things with Richard.

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

7. *Peggy (Arthur's mother)*: They had a little "surprise party" for me. Everyone showed up when I wasn't looking and then spent the next 2 hours telling me how my drinking hurt them. They think I'm an alcoholic! I might have a drinking problem, but I'm damn sure not an alcoholic.

*Practitioner*: (gently) Peggy, if it walks like a duck and quacks like a duck, it's probably a duck. I think if all those people are telling you you're an alcoholic, that is probably something to pay attention to. You might be in denial, don't you think?

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

8. *Lloyd (Arthur's father)*: I think Arthur is taking over too many of the household responsibilities. A boy his age ought to be playing sports and chasing girls. Instead, he's worrying about his younger brother and how the house looks. He even does laundry. I can tell you I never did that at his age. But when I try to push him toward more normal things, like football, he just gets mad at me and says I don't understand him. What am I supposed to do?

*Practitioner*: In families where alcohol has been a problem, it often works like this. What if you tried the chess club or the school newspaper instead of pushing him toward football? I think he'd be more receptive to that. I don't think you recognize how smart Arthur is. It could be that he will never be all that interested in football.

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

9. *Tanya*: My doctor gave me a long list of all the things I have to do to manage my care. It's overwhelming. I have to take medication three times a day. I can't even remember to feed my dog every single day. I just can't do it. But I'm afraid I'll die if I don't.

*Practitioner*: (encouraging) You can do this. You have to.

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?

10. *Richard (Sarah's husband)*: I don't know what to do here. I feel stuck. I don't want to live this way anymore. What should we do, Doc?

*Practitioner*: Well, how about if you invest in a couple's workshop? I'm offering one this weekend. It is expensive, but I think it would be really good for you two. It could help you two rediscover why you wanted to be with each other in the first place.

Thumbs up \_\_\_\_\_ Thumbs down \_\_\_\_\_

Why?