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# Motivational Interviewing (MI)

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# Who Am I

- Teri Forst
- Born and raised in Bethel, now live in Juneau
- Licensed Professional Counselor
- BHA Instructor for ANTHC
- Private Practice working with first responders and frontline healthcare providers



# Introductions

- Name?
- What is your job title?
- Where do you live?



# Objectives

After this course you will be able to:

1. Define MI
2. Recognize how MI is used in a counseling setting
3. Recognize the connection between MI and the Stages of Change
4. Identify the 5 points of MI
5. Recognize the 4 basic skills of MI (OARS)
6. Apply self motivational statements in the counseling setting
7. Apply MI skills into your counseling approach





# The Old Approach

If the punishment for using substances is big enough will they stop using?

- Change is motivated by discomfort
- If people feel bad enough, they will change
- People have to hit rock bottom to change
- People won't change if they haven't suffered enough
- People will change if we force them to change
- Someone who continues to use is "in denial"
- The best way to break through denial is confrontation

**NO.**



# Provider/Patient Tug of War

<https://www.youtube.com/watch?v=kElBx2crO74&t=16s>



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**“There is something in human nature that resists being coerced and told what to do.**

**Ironically, it is acknowledging the other person’s right to freedom *not to change* that makes change possible.” -Unknown**



What does this mean?  
How does it apply to our  
roles as BH providers?



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# What is Motivational Interviewing?

“Motivational Interviewing is a collaborative, person-centered form of guiding to elicit and strengthen motivation for change”



Miller & Rollnick, 2009, p. 137.

Motivational Interviewing is a style of communication with particular attention to the language of change. It:

- strengthens personal motivation
- strengthens commitment to a specific goal
- elicits and explores the person's own reasons for change
- provides an atmosphere of acceptance and compassion

**A technique to guide conversation to activate a person's own motivation and resources for change.**



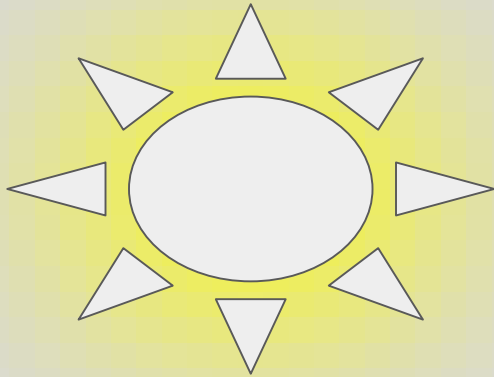
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# Prescriptive vs. Collaborative (MI)

Prescriptive: Experts (us) tell the clients how to change, what they should do, when, and how.

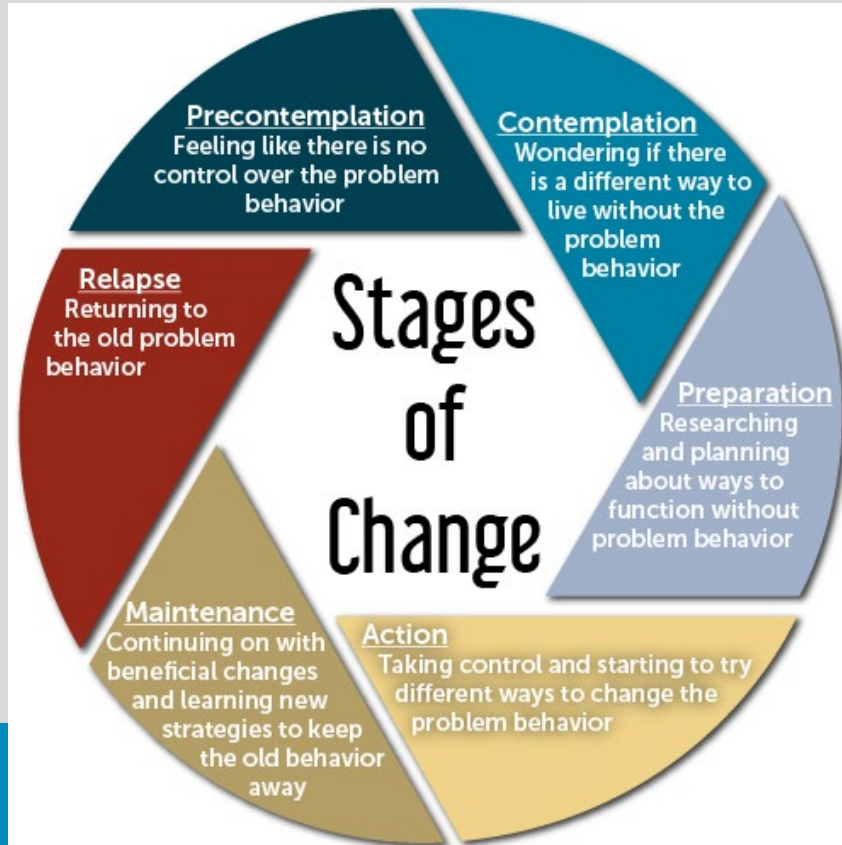
Collaborative (MI): Assumes the client is also an expert (about themselves) and they are an active participant in their care. Both experts (us and them) work together.



1. everyone jot down 3 goals on a piece of paper.
2. everyone pass their goals to the person on their right
3. scribble out 2 of the goals on your partner's list
4. no conversation, no discussion with your partner, just bam - mark off 2 goals
5. hand the modified list back to the other person
6. **how do you feel about your list now**



# Stages of Change

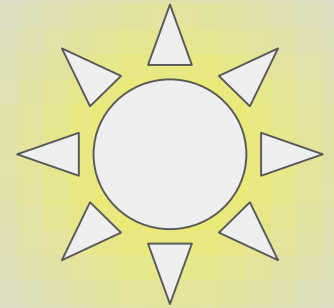


# Stages of Change

| STAGE                   | FEELING                               | EXAMPLE   |
|-------------------------|---------------------------------------|---|
| <b>Precontemplation</b> | Change?<br>Why?                       | "I don't need to stop drinking, it's nobody's business what I do."  |
| <b>Contemplation</b>    | Maybe I'll change                     | "I'm thinking about quitting drinking but it seems so hard to do."  |
| <b>Preparation</b>      | How do I change?                      | "I'm wondering if maybe you can help me learn ways to say no when my friends try to get me to drink."   |
| <b>Action</b>           | I've changed                          | "I've been sober for 1 whole month!"  |
| <b>Maintenance</b>      | I'm going to keep living this new way | "I've been sober for 11 months and I know most of my triggers and can manage them well!"  |
| <b>Relapse</b>          | I am falling into old behaviors       | "My cousin passed away and I had a really hard time, I figured I'd just have one drink to take the edge off and then I ended up on a 2-week binge." |



# Stages of Change-Let's Practice!

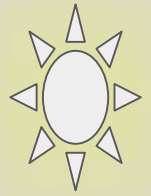


As a group you will decide:

- stage of change this client is in
- how to support them (using what you know already)

Job Aid!





# Steve- Group 1

Steve is a 58-year-old fisherman. One day after a long day of fishing (and drinking beer) on the boat, he was driving home and was stopped by the police. He was arrested for Driving Under the Influence (DUI) and is now court-ordered to get a substance use assessment and follow your treatment recommendations.

During the assessment, you ask Steve if he wants to quit drinking and he says, “No, I don’t have a problem with drinking. I’m not an alcoholic, I just had a few beers with the crew on the boat, and there’s nothing wrong with that. I am not quitting no matter what the judge says.”





## Steve-Answer

Steve is in the precontemplation stage. How would you help him?



- Validate that Steve's not ready to quit
- Discuss the risks of alcohol use
- Talk about how the DUI has impacted his life
- Remind him that the decision to change is his
- Encourage re-evaluation by saying, " If you think about it and change your mind, I'm here"





## Daisy- Group 2



Daisy got married last year and wants to get pregnant. She drinks a lot on Friday evenings with her friends after work. She knows that having alcohol in her system won't help her get pregnant, and if she does get pregnant, it won't be good for her baby. She knows that quitting drinking is a good idea, and is thinking about maybe quitting after New Year's Eve.







## Daisy-Answer

Daisy is in the contemplation stage. How would you help her?

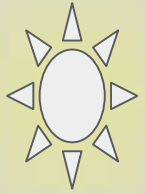


- Validate that Daisy isn't quite ready to quit
- Remind her that the decision is hers
- Encourage evaluation of the pros and cons of changing: "Who in your life would it benefit if you quit drinking alcohol?"
- Identify and promote outcomes that would be positive if Daisy changed: "That would be good for your baby's development when you get pregnant"





## Mike- Group 3



Mike has been smoking pot every day for about five years. He doesn't have a job and doesn't care to get one, so passing the employment drug test wasn't an issue until now.

Recently, a few of his friends moved to Anchorage and got a job, and Mike wanted to join them and work at the same company. He decided he wanted to quit smoking pot a couple of months back, but hasn't quit yet. He is working on finding other small jobs before he quits.





## Mike-Answer

Mike is in the preparation stage. How would you help him?



- Assist Mike in problem solving
- Help Mike identify social supports
- Verify that Mike has the skills needed to change
- Start sharing the skills needed to change
- Encourage small steps towards change





## Susan- Group 4

Susan has been under a lot of stress, taking care of her five children alone. It was brought to her attention that she was yelling at her children a lot and that it was scaring them. She came to see you, set some goals, and is working on adapting her behavior. She feels like she still has a lot of progress ahead of her, but she is learning to manage her stress in a healthier way.





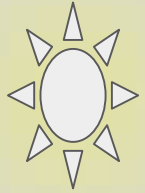
## Susan-Answer

Susan is in the action stage. How would you help her?



- Help Susan focus on avoiding and managing triggers
- Encourage Susan to use social support
- Help Susan improve her confidence in dealing with obstacles
- If appropriate for Susan, work on feelings of loss (of the old behavior)





## Paul-Group 5

Paul had an addiction to alcohol that was causing problems in all areas of his life. After losing his job, he became worried about also losing his family too, and decided to get help. That was about 11 months ago. He hasn't had a drink since going to treatment.





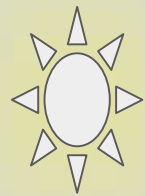
## Paul-Answer

Paul is in the maintenance stage. How would you help him?



- Plan for any follow up support Paul might need
- Reinforce rewards for changing (ex: the fact that his family is happy about his “new life” and he has a good job now)
- Discuss potential for relapse
- Discuss preventing and coping with relapse





## James- Group 6

James came for help about nine months ago because he had been using heroin on a daily basis, was out of money, and experiencing withdrawal symptoms. Additionally, his family had kicked him out of the house because he stole money from them.

He went to residential treatment and started working with you when he came home after graduating from treatment. He has been doing well for a few months now, but unfortunately, his mother was diagnosed with cancer and the stress of that made it difficult for James to remain sober.

When he escorted his mom to Anchorage for chemotherapy he relapsed and used heroin for four days. As result, he wasn't there to support his mom and even forgot to pick her up from the hospital once because he was looking for more heroin.





# James-Answer

James is in the relapse stage. How would you help him?

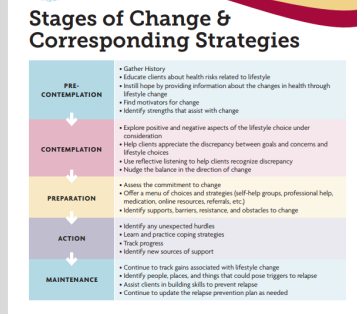


- Evaluate the trigger that caused James to relapse
- Reassess James' motivation and stage of change
- Identify barriers to continue his change
- Teach or remind James of skills for relapse prevention
- Make a stronger relapse prevention plan with James





# Stages of Change and MI Together- SKILL #1



Remember, MI is based on the understanding that clients are in varying stages of readiness for change.

Each of the following slides will show “stage-appropriate” strategies for engaging clients in making healthy changes.

Combine these with what you already identified as ways to support them

Job Aid!

# Pre-Contemplation

- \*Gather History
- \*Educate clients about health risks related to lifestyle
- \*Instill hope by providing information about the changes in health through lifestyle change
- \*Find motivators for change
- \*Identify strengths that assist with change

Examples that you use with clients in this stage in your role?



# Contemplation

- \*Explore positive and negative aspects of the lifestyle choice under consideration
- \*Help clients appreciate the discrepancy between goals and concerns and lifestyle choices
- \*Use reflective listening to help clients recognize discrepancy
- \*Nudge the balance in the direction of change

Examples?



# Preparation

- \*Assess the commitment to change
- \*Offer a menu of choices and strategies (self-help groups, professional help, medication, online resources, referrals, etc.)
- \*Identify supports, barriers, resistance, and obstacles to change

Examples?

# Action

- \*Identify any unexpected hurdles
- \*Learn and practice coping strategies
- \*Track progress
- \*Identify new sources of support
- \*Create a solid relapse prevention plan

Examples?



# Maintenance

- \*Continue to track gains associated with lifestyle change
- \*Identify people, places, and things that could pose triggers to relapse
- \*Assist clients in building skills to prevent relapse
- \*Continue to update the relapse prevention plan as needed

Examples?

# Assess the Importance of Change- SKILL #2

On the scale of 0 to 100, how much do you want to make this change right now? Answer the question by marking 1 if making the change is not at all important and selecting 100 if you are willing to work extremely hard to achieve the desired change.

| 0             | 25   | 50  | 75  | 100                                       |
|---------------|--|---|---|---|
| Not important | Less important than other things I want to achieve | Equally important to other goals in my life | More important than most things I want to achieve | Most important thing in my life right now |





# Reflect On Their Rating

Ask the client to reflect on the reasons for their answers.

## **\*Make sure to ask about the lower number FIRST**

- What led you to choose this specific number on the scale versus a lower number?
- What would it take for you to move to a higher number?

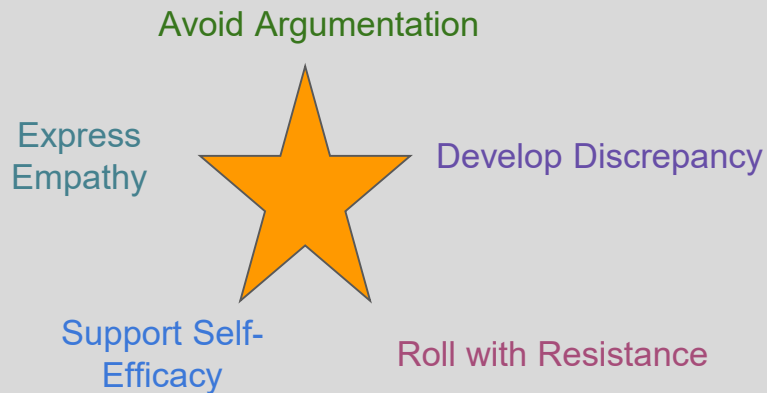




# You've Assessed Their Readiness to Change Now How Do You DO MI?

**D** Desire  
**A** Ability  
**R** Reason  
**N** Need

## 5 Points of MI



## 4 OARS





# Express Empathy- Job Aid!- SKILL #3

## Expressing empathy means:

accepting and respecting  
your clients **unconditionally**

being **non-judgmental**

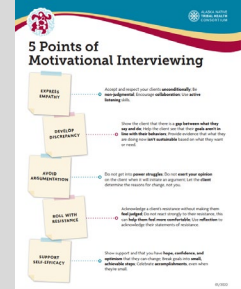
encouraging **collaboration**

using **active listening** skills

EX: Client Sherry: I drink nearly every day and usually black out. Two of my kids got put into foster care, and I'm pregnant now. Not sure what will happen to the baby. It's hard to take care of kids and still have time to hang out with my friends.

Pretend this was something one of your clients said-provide me an example of:

1. **NOT** expressing empathy
2. Expressing empathy



# Expressing Empathy- Example

<https://www.youtube.com/watch?v=dohG9w57t5o&t=108s>



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# Develop Discrepancy- SKILL #4

## Developing discrepancy means:

showing the client that there is a gap between what they say and do

helping the client see that their goals aren't in line with their behaviors

providing evidence that what they are doing now isn't sustainable based on what they want or need

EX: Client Sherry: I wanted this baby, my boyfriend and I really wanted more kids and want to raise this one, not get it taken away. But I'm not going to quit drinking completely, it's fun and I enjoy hanging out with my friends and they all drink too.

**Pretend this was something one of your clients said-provide me an example of:**

- 1. NOT developing discrepancy**
- 2. Developing discrepancy**



# Develop Discrepancy- Example

<https://www.youtube.com/watch?v=UsDHbmRmNKM&t=38s>





# Avoid Argumentation- SKILL #5

## Avoiding Argumentation means:

not getting into power struggles

not exerting your opinion on the client  
when it will initiate an argument

letting the client determine the reasons  
for change, not you

EX: Client Sherry: I'm not quitting  
drinking completely. Sober people are  
so boring, I refuse to be one of them.

**Pretend this was something one of  
your clients said-provide me an  
example of:**

- 1. NOT avoiding argumentation**
- 2. Avoiding argumentation**





# Roll with Resistance- SKILL #6

## Rolling with Resistance means:

acknowledging a client's resistance without making them feel judged

not reacting strongly to their resistance, this can help them feel more comfortable

using reflection to acknowledge their statements of resistance

EX: Client Sherry: I don't have time to go to the groups you're saying I should go to. I have a lot going on, and it probably won't even help me.

**Pretend this was something one of your clients said-provide me an example of:**

- 1. NOT rolling with resistance**
- 2. Rolling with resistance**





# Rolling with Resistance- Example

<https://www.youtube.com/watch?v=WE0OMWhEbTQ>





# Support Self-Efficacy- SKILL #7

## Supporting Self-Efficacy means:

show support and that you have hope, confidence, and optimism that they can change

break goals into small, achievable steps

celebrate accomplishments, even when they're small

EX: Client Sherry: I don't think I'll ever be able to change, this is just who I am.

**Pretend this was something one of your clients said-provide me an example of:**

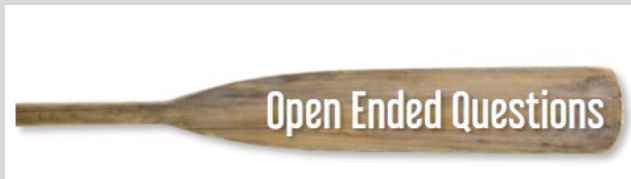
- 1. NOT supporting self-efficacy**
- 2. Supporting self-efficacy**



# Supporting Self-Efficacy- Example

<https://www.youtube.com/watch?v=OfFE57G5kpQ&t=2s>






## Open-Ended Questions -Job Aid! SKILL #8

- cannot be answered with a yes or a no
- keep the conversation flowing
- allow the client to set the direction of the conversation

## EXAMPLES



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### 4 OARS of Motivational Interviewing

**OPEN-ENDED QUESTIONS**

- Cannot be answered with a yes or a no
- Keep the conversation flowing
- Allow the client to set the direction of the conversation

*"I understand you have some concerns about your drinking, can you tell me about them?"*

**AFFIRMATIONS**

- Are a statement about a client's strengths
- Improve self-efficacy
- Build rapport and improve client confidence

*"Sounds like this is really challenging. No wonder you feel overwhelmed. I appreciate that it took a lot of courage for you to discuss your drinking today. You appear to be really resilient to have coped with these difficulties in the past."*

**REFLECTIVE LISTENING**

- Is listening with intention
- Accurately repeats what they've said and how they feel
- Demonstrates your attention
- Makes sure you understand what your client has said or how they feel

*"What I hear you say is..."*

**SUMMARIZE**

- Reinforces what has been said
- Shows you have been listening carefully
- Prepares the client to move on to the next step, session, or topic
- Highlights important parts of a discussion
- Can change the direction of a conversation that is stuck or going in an unhelpful direction

*"If it's okay with you, I'd like to check that I understand everything we've been discussing so far..."*

01/2022





## Affirmations- SKILL #9

- are a statement about a client's strengths
- improve self-efficacy
- build rapport
- improve client confidence

Take note of when your client has been successful, powerful, or used skills and strength. Take these opportunities to provide affirmation.

EXAMPLES 



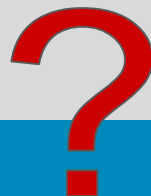
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## Reflective Listening- SKILL #10 is:

- listening with intention
- accurately repeating what they've said
- accurately repeating how they said they feel
- demonstrating your attention
- a way to make sure you understand what your client has said or feels

## EXAMPLES





## Summarizing- SKILL #11

- reinforces what has been said
- shows you have been listening carefully
- prepares the client to move on to the next step, session, or topic
- highlights important parts of a discussion
- can change the direction of a conversation you feel is stuck or going in an unhelpful direction

## EXAMPLES



# DARN

## Job Aid!

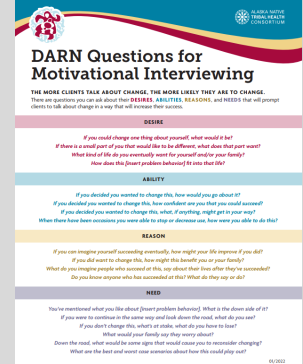
The more clients talk about change- the more likely they are to change.

The more clients talk about reasons not to change, the less likely they are to change.

Self motivation statements tell you the client's:

- consideration of change
- motivation for change
- desire to change

There are questions you can ask about their **DESIRES**, **ABILITIES**, **REASONS**, and **NEEDS** that will prompt clients to talk about change in a way that will increase their success.







# Desire

## SKILL #12

If you could change one thing about yourself, what would it be?

If there is a small part of you that would like to be different, what does that part want?

What kind of life do you eventually want for yourself and/or your family?

How does this (insert problem behavior) fit into that life?





# Ability

## SKILL #13

If you decided you wanted to change this, how would you go about it?

If you decided you wanted to change this, how confident are you that you could succeed?

If you decided you wanted to change this, what, if anything, might get in your way?

When there have been occasions you were able to stop or decrease use, how were you able to do this?





# Reason

## SKILL #14

If you can imagine yourself succeeding eventually, how might your life improve if you did?

If you did want to change this, how might this benefit you or your family?

What do you imagine people who succeed at this, say about their lives after they've succeeded?

Do you know anyone who has succeeded at this? What do they say or do?





# Need

## SKILL #15

You've mentioned what you like about (insert problem behavior). What is the down side of it?

If you were to continue in the same way and look down the road, what do you see?

If you don't change this, what's at stake, what do you have to lose?

What would your family say they worry about?

Down the road, what would be some signs that would cause you to reconsider changing?

What are the best and worst case scenarios about how this could play out?



# MI in Action- Bad and Good



[https://www.youtube.com/watch?v=\\_VlvanBFkvl](https://www.youtube.com/watch?v=_VlvanBFkvl)

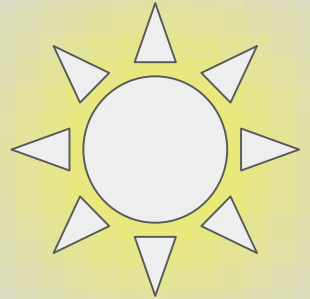


<https://www.youtube.com/watch?v=67l6g1l7Zao>





# Your Turn! Big Group



## **I am the client**

You ALL are the counselors (co-facilitating together)

Get out your job aids, have them with you

Use as many MI skills as you can, in a way that flows in a counseling setting

Then we will discuss how it went!

# Let's Discuss

What went well?

What didn't go so well?

Any of the skills that felt awkward or weird?

Which skills are your favorite, "go-to's"?



# 12 Roadblocks to Listening (Thomas Gordon, Ph.D.)

1. Ordering, directing, or commanding
2. Warning or threatening
3. Giving advice, making suggestions, or providing solutions
4. Persuading with logic, arguing, or lecturing
5. Moralizing, preaching, or telling clients what they "should" do
6. Disagreeing, judging, criticizing, or blaming
7. Agreeing, approving, or praising
8. Shaming, ridiculing, or labeling
9. Interpreting or analyzing
10. Reassuring, sympathizing, or consoling
11. Questioning or probing
12. Withdrawing, distracting, humoring, or changing the subject

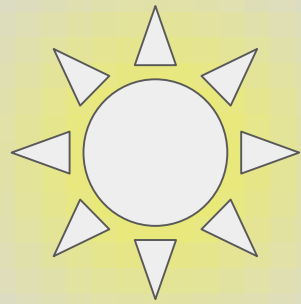
Did you find yourself doing any of these? Which ones will you struggle with?



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# Your Turn! Small Group- Partner up!



You will each have a turn being the client and a turn being the counselor

## Client:

Think of a behavior you'd like to change. -

- exercise more
- work less
- drink more water
- eat healthier
- etc.

Don't be too resistant, or difficult. Give your partner a chance to practice.

(SOMETHING YOU FEEL 2 WAYS ABOUT)

## Counselor:

Think of this as a real life client situation.

- use 5 points of MI
- use OARS
- use DARN

Take this opportunity to practice and get used to using these skills in a counseling setting.



# Let's Discuss

What went well?

What didn't go so well?

Any of the skills that felt awkward or weird?

Which skills are your favorite, "go-to's"?

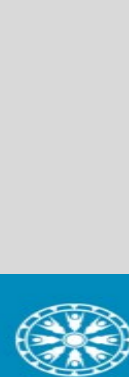




## Encouraging Motivation to Change

# Am I Doing this Right?

- 1. ✓ Do I listen more than I talk?**  
**X** Or am I talking more than I listen?
- 2. ✓ Do I keep myself sensitive and open to this person's issues, whatever they may be?**  
**X** Or am I talking about what I think the problem is?
- 3. ✓ Do I invite this person to talk about and explore his/her own ideas for change?**  
**X** Or am I jumping to conclusions and possible solutions?
- 4. ✓ Do I encourage this person to talk about his/her reasons for *not* changing?**  
**X** Or am I forcing him/her to talk only about change?
- 5. ✓ Do I ask permission to give my feedback?**  
**X** Or am I presuming that my ideas are what he/she really needs to hear?
- 6. ✓ Do I reassure this person that ambivalence to change is normal?**  
**X** Or am I telling him/her to take action and push ahead for a solution?
- 7. ✓ Do I help this person identify successes and challenges from his/her past *and* relate them to present change efforts?**  
**X** Or am I encouraging him/her to ignore or get stuck on old stories?
- 8. ✓ Do I seek to understand this person?**  
**X** Or am I spending a lot of time trying to convince him/her to understand me and my ideas?
- 9. ✓ Do I summarize for this person what I am hearing?**  
**X** Or am I just summarizing what I think?
- 10. ✓ Do I value this person's opinion more than my own?**  
**X** Or am I giving more value to my viewpoint?
- 11. ✓ Do I remind myself that this person is capable of making his/her own choices?**  
**X** Or am I assuming that he/she is not capable of making good choices?





# Your Turn! Group MI

**Need 2 volunteers to be co-facilitators  
(then we'll switch if we have time)**

The rest are clients in a group together

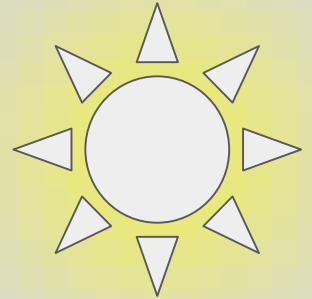
Use your job aids

Use as many MI skills as you can, in a way that flows in a group counseling setting

Then we will discuss how it went!

## Group Topic ideas:

Healthy eating  
Stress management  
Substance abuse  
Exercise  
Quitting smoking  
Medical health  
Pain management  
OTHERS??



# Let's Discuss

What went well?

What didn't go so well?

Any of the skills that felt awkward or weird?

Which skills are your favorite, "go-to's"?



# Questions?

## No question is a bad question!

If I don't know the answer now, I will provide it using Blackboard announcements

### **COURSE EVALUATION**

<https://www.surveymonkey.com/r/forumMI>

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