VOLUME B

Elements of Psychological Treatment
Module 2

Motivating clients for treatment and addressing resistance

1. Approaches to change
2. Principles of Motivational Interviewing
3. How to use motivational skills in clinical settings
Workshop 3

How to use motivational skills in clinical settings
Training objectives

At the end of this workshop, you will be able to:

► Identify the four core interviewing skills and the overall purpose of the OARS
► Explain open-ended questions, their goal and the difference between open and closed questions
► Explain the importance of reflective listening in working with clients
► Practice reflecting, enhance your OARS skills and micro skills
Training objectives

At the end of this workshop, you will be able to:

► Explain and discuss three types of reflection: a “repetition,” “simple” and “complex” reflection

► Identify a minimum of 3 situations to avoid when using motivational strategies

► Avoid clinician traps

► Recognise Gordon’s 12 roadblocks
Core interviewing skills
OARS provides individuals a space to talk about listen to and talk about positive behaviour change
Open-ended questions are ones that keep the conversation going.

They offer the person a broad latitude & choice in how to respond compared with a closed question.

A closed question is one where the response would be one word like “yes” or “no”.

An open question is a question that typically can’t be answered in one word.

They give the person a chance to talk more and expand on their answer.
OARS: Open-ended questions

► A gentle warning here: even the best open questions can begin to feel like “Motivational Interrogation” not Motivational Interviewing!

► So be sure to balance these with lots of reflections
OARS: Open-ended questions

Open-ended questions:

- “What are the good things about your substance use?”
- “Tell me about the not-so-good things about using”
- “You seem to have some concerns about your substance use. Tell me more about them.”
- “What most concerns you about that?”

vs.

- “Are there good things about using?”
- “Are there bad things about using?”
- “Do you have concerns about your substance use?”
- “Do you worry a lot about using substances?”
OARS: Open-ended question examples

The possibilities for Open Questions are endless. Here are a few more ideas to get you started:

► What’s been happening since we last met?
► So, what makes you think it might be time for a change?
► How can we/I help you today?
► Tell me about the time when this problem began.
► What’s different for you this time?
► Tell me more about this.
Let’s practice!

Open-ended questions

What type of questions are these? Please suggest the ending to each question:
► What do you like about _____?
► Would you be interested in learning about _____?
► What consequences do you think might happen if you ___________?
► Tell me about your ___________?
► What if you choose to continue_____?
► What if you choose to decrease/stop_____?
OARS: Affirmation

- Latin affirmer: “to make firm” strategic reinforcing
- Accentuates the positive, seeking & acknowledging a person’s strengths & efforts
- Strengths
- Healthy coping skills
- Pro-social
- Thoughts, beliefs, values, behaviours
“Thanks for coming today.”

“I appreciate that you are willing to talk to me about your substance use.”

“You are obviously a resourceful person to have coped with those difficulties.”

“That’s a good idea.”

“It’s hard to talk about....I really appreciate your keeping on with this.”
Let’s practice!

Interviewing your Chief-of-State

Write 10 open-ended questions and 10 affirmations for one leader of your country (president, prime minister, king, other leaders, etc.)
“Reflective listening is the key to this work.”

“The best motivational advice we can give you is to listen carefully. The person will tell you what has worked and what hasn’t. What moved them forward and shifted them backward. Whenever you are in doubt about what to do, listen.”

*(Miller & Rollnick, 1991)*
Reflective listening is used to:

► Check out whether you really understood the client

► Highlight the client’s own motivation for change about substance use

► Steer the client towards a greater recognition of her or his problems and concerns

► Reinforce statements indicating that the client is thinking about change
OARS: Reflections

- Statement intended to mirror meaning (explicit or implicit) of preceding person’s speech
- Seeks to understand the person’s subjective experience, offering reflections as guesses about the person’s meaning
- Checking rather than assuming that you know what is meant
- Listening not only to what the person says, but also for what the person means
Avoiding judging, criticizing or blaming

Creating environment of unconditional positive regard & acceptance

Person & health care provider do not have to agree

Being aware of intonation

Tells the person you are interested in understanding the world from their eyes

A simple acknowledgment of the person’s disagreement, feelings or perceptions
Let’s practice!

Reflection

*One thing about myself I’d like to change is ________.*

► Work in groups of three (speaker, listener and observer)

► Speaker talks about the issue (3-5 min)

► Listener can only reflect

► Observer checks to make sure no questions are asked – only reflections are made, which are statements
OARS: Summarising

Summarising is an important way of gathering together what has already been said, making sure you understood correctly and preparing the client to move on. Summarising is putting together a group of reflections.
Reflection that draws together content from two or more prior person’s statements

Provider chooses what to include and emphasize:
- person’s concerns about change
- problem recognition
- optimism about change
- ambivalence

Let the person know you are listening
Let’s see how it works!

OARS

Observe the clinician and the client:

► Pay special attention to the use of OARS skills

► Take notes and count the number of times that you observed any of these skills

► Using the OARS form, take notes on the clinician’s behaviour as he/she displays OARS
Change talk: An indication that you are successfully using motivational interviewing. If you are using MI successfully, you will hear statements that indicate the client’s:

- Desire to change
- Ability to change
- Reasons to change
- Need to change
- Commitment to change
Helping to elicit “change talk”

► Ask open-ended questions, the answer to which is change talk

► Ask clients to clarify their statements or elaborate the following:
  – “Describe the last time this happened,”
  – “Give me an example of that,” or “Tell me more about that.”
Helping to elicit “change talk”

Ask the client to imagine the worst consequences of not changing and the best consequences of changing.
Helping to elicit “change talk”

Explore the client’s goals and values to identify discrepancies between the client’s values and their current substance use.

“What are the most important things in your life?”
Where are we so far?

- What is OARS?
- What are open-ended questions and why use them?
- What is affirmation and how to use it in MI?
- What is reflective listening? Can you give an example?
- What should a clinician emphasise when summarising?
Break
Three ways to reflect

► **Repetition:**
Repeats a key word or phrase

► **Simple:**
Rephrase or restates in new words, adds meaning to what was said

► **Complex:**
States content and emotion that the person seems to be feeling
Repeat a key word or phrase

It’s just no use, I’ll never quit drinking.

You’ll never quit drinking.

I won’t make it, I can’t go to treatment.

So you aren’t going to go to treatment.
Rephrase - restate in new words, add meaning to what was said

It’s just no use, I’ll never quit drinking.

Whatever you do doesn’t work.

I won’t make it, I can’t go to treatment.

Considering the time away, going to treatment isn’t an option.
Complex reflection

States content and emotion that the person seems to be feeling

- It’s just no use, I’ll never quit drinking.
- I won’t make it, I can’t go to treatment.
- You feel hopeless, everything is stacked up against you.
- You’re scared about the idea and need to find an alternative.
Let’s practice!

Reflection

Client/patient says:
- “It’s just no use, I’ll never lose weight.”
- “I won’t take insulin, I can’t take shots.”

Counsellor should reply with:
▶ Repetition
▶ Simple reflection
▶ Complex reflection
Sentence stems to form reflections

- Sounds like…
- What I’m hearing is…
- Must be…
- I would think you…
- Like a…
- Almost as if…
- You…
- You are…
- Your belief is that…
- Your fear is that…
- You’re thinking…

- So you’re saying…
- You’re feeling that…
- For you, it’s a matter of…
- I would imagine you…
- It seems to you…
- Through your eyes…
- From your point of view…
- The thing that bothers you is…
- You’re not terribly happy about…
- You’re not much concerned about…
Let’s reflect!

Personal behaviour change

► Is it easy to change?
► What was the most difficult change that you had to make in your life?
► How much time did it take you to move from considering that change to actually taking action?
Strategies to avoid
What techniques should I avoid?

Techniques to avoid when motivating clients:

► Confrontation/denial
► Closed questions
► Clinician traps
► Roadblocks to reflective listening
Clinician traps

- Question-Answer Trap
- Confrontation-Denial Trap
- Expert Trap
- Labelling Trap
- Premature-Focus Trap
- Blaming Trap
Roadblocks 1

- Ordering, directing or commanding
- Warning or threatening
- Giving advice, making suggestions, providing solutions
- Persuading with logic, arguing, lecturing
- Moralising, preaching, telling them their duty
- Judging, criticising, disagreeing, blaming
Roadblocks 2

- Agreeing, approving, praising
- Shaming, ridiculing, labelling, name-calling
- Interpreting, analysing
- Reassuring, sympathising, consoling
- Questioning, probing
- Withdrawing, distracting, humouring, changing the subject
Some questions to ask yourself when in conversation with a client...

► What am I doing?
► Where are we going and who’s deciding?
► What am I saying and to what end?
► Am I actively listening?
► Are we dancing or wrestling?
Let’s practice!

The 3 Chairs exercise

3 chairs:

► Defensive/resistant
► Neutral
► Motivated/cooperative
Any Questions
Wrap-up

► What are the three ways to express reflection?
► What is “change talk”?
► What are the techniques to avoid when motivating clients?
► What clinician traps do you know?
► What questions can you ask yourself when in conversation with a client to make sure you are on a right track?
Sources

► William R. Miller & Stephan Rollnick. THIRD EDITION MOTIVATIONAL INTERVIEWING Helping People Change, 2013; Guilford Press; New York, NY


Post-assessment
Thank you for your time!
End of module 2