

Motivational Interviewing: Preparing People to Change Health Behaviors
TIPS SHEET

Five General Principles of Motivational Interviewing:

1. Express empathy
2. Develop discrepancy
3. Avoid argumentation
4. Roll with resistance
5. Support self-efficacy

Responses that are NOT Reflective Listening:

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

Assumptions to Avoid:

1. This person OUGHT to change
2. This person WANTS to change
3. This person's health is the prime motivating factor for him/her
4. If he or she does not decide to change, the consultation has failed
5. Individuals are either motivated to change, or they're not
6. Now is the right time to consider change
7. A tough approach is always best
8. I'm the expert -- He or she must follow my advice
9. A negotiation approach is always best

Signs of Resistance:

- | | |
|---|---|
| <ul style="list-style-type: none">▪ Arguing<ul style="list-style-type: none">- Challenging- Discounting- Hostility▪ Interrupting<ul style="list-style-type: none">- Talking over- Cutting off▪ Ignoring<ul style="list-style-type: none">- Inattention- Non-answer- No response- Sidetracking | <ul style="list-style-type: none">▪ Denying<ul style="list-style-type: none">- Blaming- Disagreeing- Excusing- Claiming impunity- Minimizing- Pessimism- Reluctance- Unwilling to change |
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Strategies for Handling Resistance:

1. Simple Reflection: simple acknowledgement of the client's disagreement, emotion, or perception
2. Double-sided Reflection: acknowledge what the client has said and add to it the other side of the client's ambivalence
3. Clarification: verify your understanding matches the client's perspective
4. Shifting Focus: shift the client's attention away from what seems to be a stumbling block
5. Emphasizing Personal Choice and Control: assure the person that in the end, it is the client who determines what happens

Specific MI Strategies:

1. Ask open-ended questions
2. Listen reflectively
3. Affirm
4. Summarize
5. Elicit self-motivational statements

Negotiating a Plan:

1. Set Specific (short-term) Goals
2. Consider Your Options
 - a. Discuss with the individual the different choices are for approaches to making changes
 - b. Try to match the individual to the optimal behavior change strategy
 - c. Recognize that the person may not choose the "right" strategy
 - d. Prepare the individual for this possibility
3. Establish a Plan
 - a. Goals/Strategies/Tactics
 - b. Summarize the plan with the patient
 - c. Make sure to assess if the person is now ready to commit to the plan

Specific MI Tools:

1. List of Pros and Cons (Benefits/Costs) for and against behavior change
2. Assess Importance and Confidence – see handout
3. Looking Back – client reflects on effective strategies used with past successes; have them think back to time in life when things were going well -- describe this and what has changed now
4. Looking Forward – have client think about their hopes for the future if they make this change; how would they like things to be different; what are realistic options now – what could you do now; what are the best results you could imagine if you make this change
5. Exploring Goals – assess match between client's current behavior and future goals; explore how realistic goals are (trying to explore and develop discrepancies between current behavior and client's goals for the future)