

Motivational Interviewing

“Motivational Interviewing is a collaborative conversation style for strengthening a person’s own motivation and commitment to change.” – Miller and Rollnick, 2012

Motivational Interviewing

The Four Principles of MI

Express
Empathy

- Building rapport

Develop
Discrepancy

- Heighten ambivalence

Roll with
Resistance

- Respect patient autonomy

Support
Self-
Efficacy

- Affirm patient's capability for change

Motivational Interviewing

The OARS Skills of MI

Open-ended questions

- “What problems have you experienced as a result of your smoking?”

Affirmations

- “You were able to meet your fitness goal despite the pandemic because of your perseverance and determination. Those strengths can help you cut back on your drinking.”

Motivational Interviewing

The OARS Skills of MI

Reflective listening

- (Patient: I'd stop using if I could afford treatment and didn't have to miss work because of it.) "You'd stop using pain pills if there was an affordable, outpatient treatment option."

Summarizing

- "So we've talked today about your vaping and how while you find it relaxing and thought when you switched that it was less harmful than smoking, you're worried now about it increasing your risk during the pandemic and its increasing cost."

Motivational Interviewing

The Spirit of MI: PACE

MI Strives for...

- Partnership
- Acceptance
- Compassion
- Evocation

MI Avoids...

- Paternalism
- Authority
- Confrontation
- Education

Motivational Interviewing

Change Talk: fuel for change “DARN CATs”

Preparatory Change Talk (Pre-contemplation/Contemplation)

- Desire: “I want to...”
- Ability: “I can...”
- Reasons: “Because...”
- Need: “I need to...”

Mobilizing Change Talk (Preparation/Action)

- Commitment: “I do...”
- Actuation: “I’m ready to...”
- Taking steps: Discusses ongoing work toward change

You are seeing a well-established, 68yo patient for follow up of their COPD after a recent hospitalization for COVID-19. He is thankful to have made it through a lengthy hospital stay and is embarrassed to disclose that he started smoking again soon after returning home but wants help to quit and stay quit: "I don't ever want to feel like I can't breathe like that again. That was a really close call. I've got my third grandchild on the way and the rest of my retirement to enjoy." He doesn't remember getting any medication or a nicotine replacement product while hospitalized but didn't notice cravings or withdrawal then either, probably because "I was too sick to notice much of anything". His cravings returned on the car ride home, when he noticed a half-smoked pack in the center console. Other than that, he doesn't know why he resumed smoking as he feels "tired and done with that" and gets more anxious than relaxed when he smokes now. In the past he has tried various nicotine replacement products including patches, gum and lozenges. His longest time quit was 1 year, after the birth of his first grandchild, which motivated that quit attempt. He is smoking half a pack a day now, down from 1 pack a day. Which of the following is a MI congruent statement you could make that would further support this patient's efforts to quit smoking?

- A. "Smoking is not relaxing anymore, and you are worried if you don't quit smoking you won't get to enjoy your retirement or see your grandchildren grow up. You're ready to quit."
- B. "You've been successful quitting for a full year before. I'm confident you can do this."
- C. "What do you think would help you quit and stay quit this time?"
- D. All of the above