

# INTRODUCTION TO MOTIVATIONAL INTERVIEW

Adolescent wellbeing: cross cultural comparisons

Lincoln, UK, 2019



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# In the roots of motivational interview...

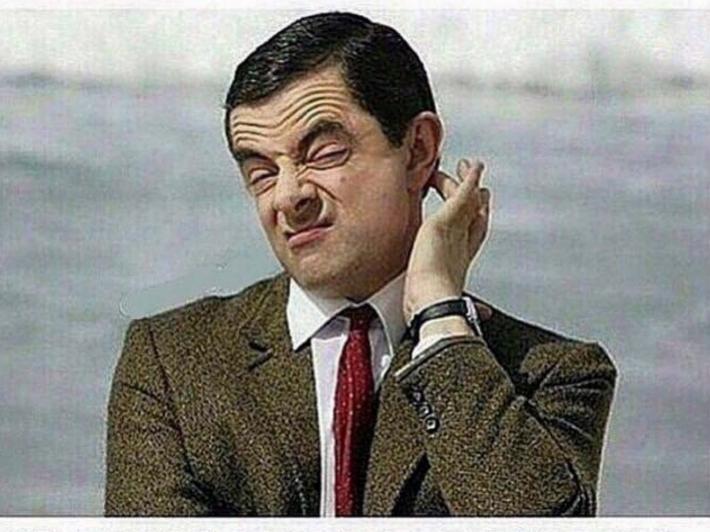
- Motivational interview was born in the beginning tof 1980's through conversations which an American psychologist William Miller had during his sabattical year in Bergen Norway at the Hjellestad clinic for young people with alcoholic problems.
- The problems which the therapists at that clinic presented to Miller led to new solutions which Miller presented first in 1983.



## Basics...

- Everyone is basically motivated to live a healthy life
- ► Healthy habits may be hard to keep up → it requires breaking of routines which is not always easy
- Through skilled communication motivation can be awakened, grew and streghtened
- Most important thing is to figure out the person's
   Own values, goals, the meaning of possible change and resources, because these guide motivation

# **SHOULD I DRINK TODAY...**

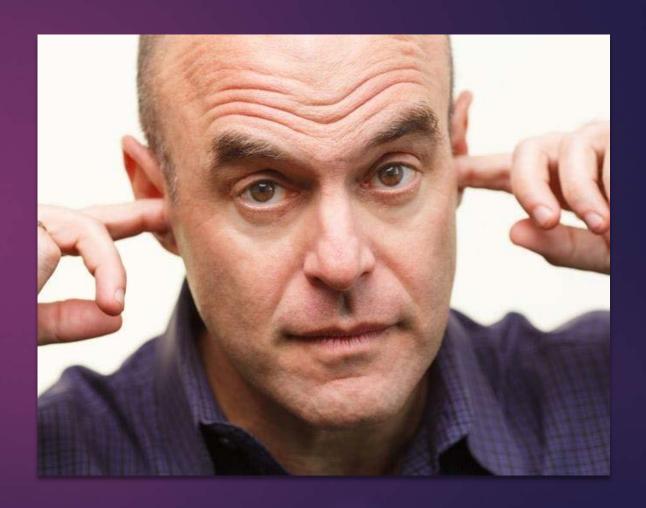


OR DRINK TODAY & TOMORROW...
I'M CONFUSED

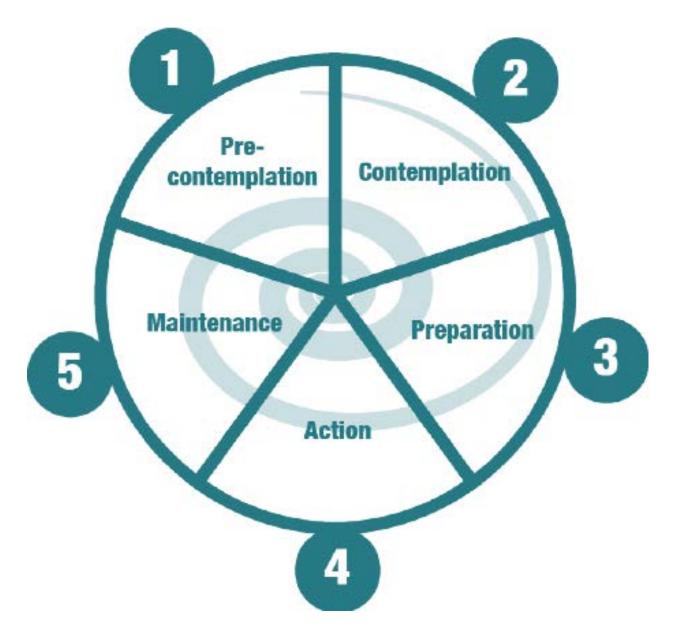
# Motivation can be destroyed...

- In general, no one wants to be told how to live their life
- Therefore direct orders such as "you should drink less" will make people resist change rather than want to change
- Sweet talk and persuasion will only make the situation worse, because the more good reasons your client gives you to carry on drinking, the more they will believe it themselves

Paternalistic approach is not part of motivational interview



28.11.2019



# Stages of change

80% of clients entering counseling are in stages 1-3

## Professional – client relationships:

PROFESSIONAL ORIENTED

Accordance

Adherence

Self-management

Compliance

**CLIENT ORIENTED** 

AUTHORITY BASED RELATIONSHIP

COMPANIONSHIP

COACHING

# Basic principles of motivational interview

# Basic principles

### **AVOID GIVING INSTRUCTIONS**

- The reflex of giving instructions is very typical to all healthcare personnel we like to tell our clients what they should do and how to live their life
- This will only lead to a frustrated client, if they are not committed to lifestyle changes

- Avoid persuasion: instead of handing out advice, ask about their wishes or readiness towards change
- conversation. Give advice only if asked.
- ► DO NOT JUDGE (words, facial expression, etc...)



# Basic principles

### **ASK OPEN QUESTIONS**

- Have your client do most of the talking
- The goal is to have your client think actively and figure out what they are thinking
- Try to figure out the personal reasons for not committing to lifestyle changes



Käypähoito –suositus 2014 (viitattu 11.2.2018) www.kaypahoito.fi, McCarley P (2009), Rollnick ym. (2008),

Your client has been caught on smoking cannabis repeatedly.

How would you start a conversation?



# Basic principles

# UNDERSTAND AND IDENTIFY MOTIVATION

- Motivation is totally dependent on the phase of change they currently are in
- Motivational interview happends in between of two experts: the client and the health-care professional



- What motivates your client? Accept and respect their view
- Ask open questions: "how would you feel to cut down smoking?"
- Ask them in what phase of change are they in?

# Kirsi Myllykangas, MHSc, RN, Oulu UAS 28.11.2019

# Signs of change talk

### 1) IDENTIFYING THE PROBLEM

"I didn't think how much I really drink"

"I might have taken stupid riskis with cannabis"

### 2) WORRYING

"I am worried about..."

"I don't feel as good as I used to"

# 3) DIRECT OR INDIRECT INTENTIONS TO CHANGE

"I shoud do smething about this"

"How do others cope in this situation?"

# 4) CHANGE OPTIMISM / COMMITMENT

"Maybe I could do it"

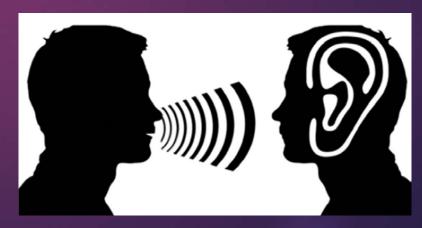
"When I decide something, it holds!"

# Basic principles...

### LISTEN AND REFLECT

- Being an empathic listener means that you really recognize what the client is trying to tell you
- Try to see things through your client's eyes

- Reflect on your client's feelings and thoughts: "do I understand correctly..." "Do you mean..." "So you feel like..."
- Remember to stay quiet at times: give your client the possibility to resist the change



# Basic principles

**ROLL WITH RESISTANCE** 

- Being resistant means that your client is not ready for change
- Conforming the resistance will prevent any conflict between you and your client. This will help your client to stay within the process of change



- ▶ DO NOT JUDGE
- DO NOT ARGUE
- ► ENCOURAGE YOUR PATIENT TO TALK AND TELL WHAT THEY HONESTLY THINK
- DO NOT GIVE ADVICE IF NOT ASKED
- ► THE GOAL IS THAT THE CLIENT WILL THINK OF ANY SOLUTION BY THEMSELF!

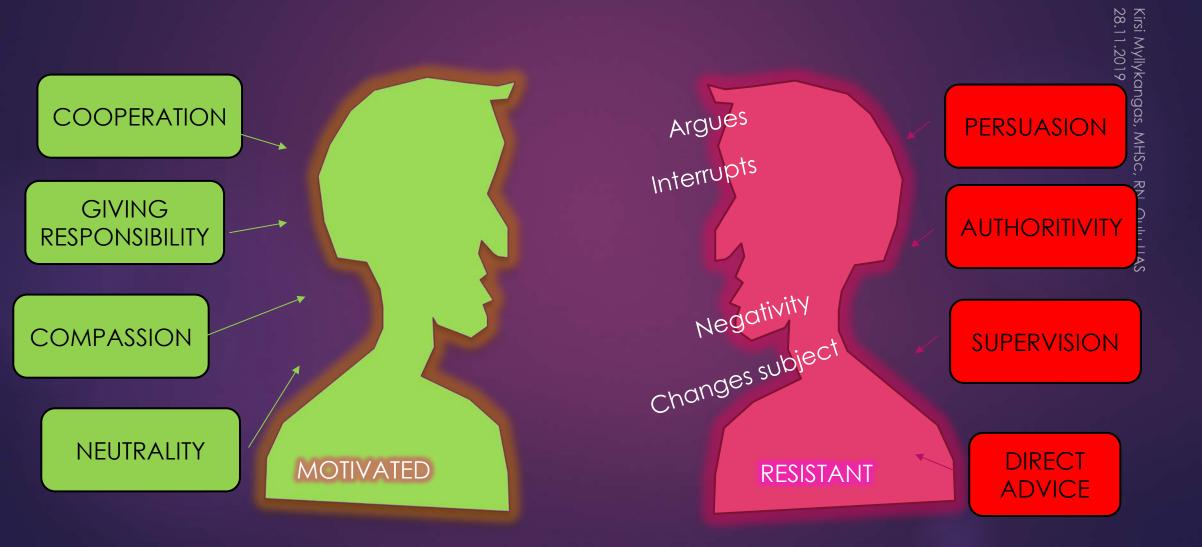
Sc, RN, Oulu UA

"Drinking is the only joy I have in my miserable life! I am not giving that up!"

What would you say, how would you continue the conversation?



# MOTIVATION vs RESISTANCE



# Basic principles...

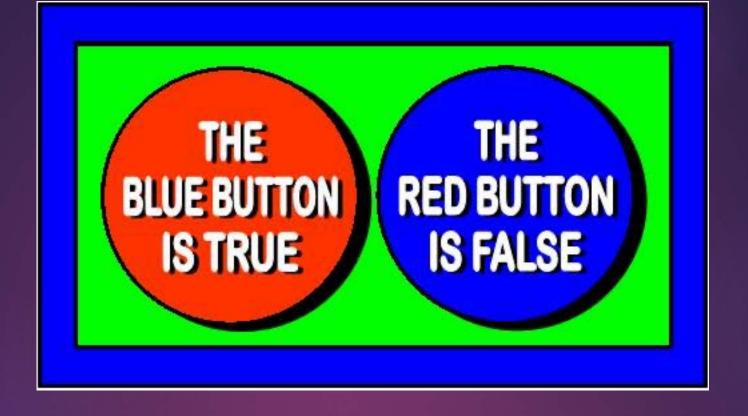
### **ENHANCE ANY CONTRADICTION**

- Enhancing the contradiction between current and hoped situation
- When one realises the contradiction between current and hoped situation, it will motivate to lifestyle changes



- Listen and acknowledge wishes which are contradictory, as well as challenges and problems brought by current choices
- Try to bring out the contradiction and help the client talk in behalf of change by themselves





Have you got any examples of contradictory talk concerning drugs or alcohol?

# Basic principles...

SUPPORT CLIENT'S RESOURCES

- Aim to support any resources on behalf of actualizing any lifestyle changes
- Understand and accept relapses

- Be optimistic and hopeful
- Encourage and give support to active selfmanagement and care
- In cooperation with the client make an action plan, with which is possible for the client to stay on the road of success



RN, Oulu UA:

## Motivational interview:

- Be on the side of your client
- The client will decide what to do
- Acknowledge wishes to change and support optimism towards changing

# REPEATED FAILURE WILL MAKE YOU PASSIVE = LEARNED HELPLESNESS

By the end of the conversation the client will have thought of a plan of how to start changes in his/her life

Self-made plan will suite the client's personal values, needs, goals and resources and therefore is possible to carry out.

Käypähoito –suositus 2014 (viitattu 11.2.2018) www.kaypahoito.fi,

Clients will be motivated only with the pace that is possible for them.

You cannot hurry it.

Sometimes motivational interview will give the client only a little glimpse of wishful thinking, sometimes it will turn into a huge change in life.

No matter which, you will be continuing the conversation the next time you meet.

Do keep in mind, that not all clients are capable of making their own decisions.

As a professional you are required to be able to evaluate your clients abilities, and if needed to take a more active role in patience education and guidance.



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# LET'S TRY IT OUT!

- 1. Choose a pair
- 2. Together you will do 2 excersices; the other one being a nurse and the other one being an adolescent client
- 3. You will get a patient identity
- 4. Simulate a whole conversation that follows up the principles of motivational interview
- 5. Switch roles after every case



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## Client 1

- You are a teenager at the age of 16 and you have been caught on smoking tobacco and cannabis several times
- Smoking is so nice! It makes you feel so good and relaxed!
- ► All your friends smoke too!
- ► You are a bit worried about money though, smoking is really expensive...

# Reflection:

- ► What principles of MI were you able to follow?
- ▶ Did you miss some? What?
- ► What was easy? What was hard?
- ► Client: How did you feel honestly?
- Is there something you would do differently if you did it again?



- You are a teenager at the age of 15 and been caught on binge drinking on several occasions
- When you get drunk, you are able to forget all the worries in the world!
- ▶ Besides you love to dance at the bars and all your friends do it too!
- Last time you were drunk you ended up having sex with two guys/girls at the same time and now everyone knows about it. Someone posted pics of it online.
- Now you feel really ashamed even though it's a hard to admit it...

# Reflection:

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- ► What was easy? What was hard?
- ► Client: How did you feel honestly?
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# EXPLORING CULTURAL COMPARISONS OF DRUG AND ALCOHOL HEALTH PROVISION IN EACH COUNTRY

- Form groups of 3-4 students (try to have people from all the countries)
- Discuss following topics and write your thoughts to Padlet
- What is different, why?
- Could we something different in our country?



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