Activities Motivational interviewing

Talk 1

Video 1: https://www.youtube.com/watch?v=hB-zchaxlNc

1) Track the following (use tally marks, you can jot down good examples!):

	Open-ended ?s	Closed-ended questions	Reflections
Tally			
1 example			

2) Strategy BINGO!

Can you spot the following during this interaction; jot it down or a few words of it (summary-just describe what she summarizes):

Emotion (affect) level reflection	Summary	1 question she uses to evoke reasons for change	Values Reflection
Clinicians "softening" intro (similar to 'it sounds like')	Hypothetical Strategy	Providing Options (or emphasizing control)	Siding with 'Sustain talk'
Meaning level reflection	Challenging a cognitive or 'thinking error'	Open-ended question	Reframe

- 3) Also pay attention to how much talking time the clinician has compared to the client?
- 4) What strategies did the clinician use to make the client feel understood?
- 5) Did you notice anything else of interest?

Motivational Interviewing Tool: Motivation and Confidence to Quit

Adapted from Miller & Rollnick, 2002

Ask permission:

If it's OK with you, I'd like to talk a bit about how you feel about quitting smoking.

0	1	2	3	4	5	6	7	8	9	10
Not at					Somewhat					Very
all										_

ASSESS IMPORTANCE/MOTIVATION:

"On a scale of 0-10, with 0 being not at all *important* and 10 being very *important*, how important is it for you to quit smoking?"

Evoke reasons for change: "What made you choose a '5' and not a '0'?"

- Do reflective listening; listen for/reinforce change talk; emphasize values
- Follow-up open-ended probes as needed: "What makes it that important? What else would you hope to gain?"

Elicit barriers:

If answer is less than 10: "What would need to happen (change) for this to become more important?"

• Do reflective listening; consider action-level responses: "You would need to find some solutions to help manage stress."

ASSESS CONFIDENCE:

On that same scale, with 0 being not at all confident and 10 being very confident, how confident you are that you will be able to quit smoking?

Build confidence: "What made you a '3' and not a '0'?"

- Do reflective listening; listen for 'DARN-CAT', especially mobilizing talk and reinforce/explore
- "What would help you become more confident maybe put you at a 6 instead of a 3?"

Summary:

Let me see if I understand where you are. Althou	igh you names a few barriers lil	ke <u>you smoke to manage</u>
stress and are concerned about withdrawal), quit	tting is still something that is fa i	rly important to you
because,,,	You have	_ confidence to quit
because However, your plan will	need to include	in order to help you
be more successful. How does that sound?		

With permission, I would love to discuss next steps... How do you feel about setting some type of goal today, even if it's a small one? What would be one thing you would be willing to try to give yourself a start in the right direction?

Video 1: https://www.youtube.com/watch?v=NlnkvHo6uj0 (Stop at 4 minutes-some outdated info after that; 5:13 – summary starts)

What question does the clinician use to elicit "planning steps"?

How does the clinician use the Elicit Provide Elicit model (what information is provided) and how does this lead to commitment language?

Notice how the clinician arranges follow-up.

Part II: Building Motivation Using the 5R's

Relevance Risks Rewards Roadblocks (Repeat)

Potential openers:

- > "I'd like to discuss the risks of continuing to smoke and the roadblocks to trying to quit."
- "If it's all right with you, I'd like to talk with you about your continuing to use tobacco."
- "I know you said you weren't ready to quit, but I'd like you to consider some benefits to you were you to decide to quit down the road."

Relevance: Establish personal relevance during conversation or during summary

• May elicit relevance from patient or reflect/provide as part of health education under rewards, risks or roadblocks or summary

Risk: Elicit or provide at least 1-2 negative consequences, especially *personal* risk factors of continued use of *any* tobacco. General risks may also be provided.

- "Everyone's heard smoking is bad for your health, but what does that mean to you? What worries you the most?"
- "What concerns do you have if you continue to smoke/use tobacco?"
- "Ten years down the road-- if you continue to use tobacco, what do you think your health will look like?"
- > "Tobacco has already taken a lot from you. What else will it take if you continue to use it?"

Rewards: Elicit or provide at least 2 benefits of tobacco cessation, especially those most relevant. Consider providing if client cannot/will not identify any: improved health; feeling better physically (e.g., increased stamina; increased strength; better breathing; able to exercise); saving money; healthier family; being a good role model; improved sense of smell and taste; more attractive; environment will be cleaner and smell better; sense of accomplishment

- "What would you hope to gain if you decided to quit smoking?"
- "What would you look forward to the most if you were able to be tobacco-free?"
- "Quitting tobacco has many benefits: saving money, protecting your health from heart and lung disease, reducing the risk of developing 12 different types of cancer, and making a healthier environment for you and everyone around you. What benefits would mean the most to you?"

Roadblocks: Identify at least 1-2 **personal roadblocks** or barriers to quit **AND elicit/provide potential solutions** to address these barriers.

- "When you think about quitting smoking, what is getting in the way/stopping you?"
- "What challenges would you face if you were thinking about quitting tobacco?"
- "So your greatest challenge will be ____. What do you think you could do to manage ___.?"
- "I hear your concerns... Many of my clients find it helpful to _____."

Summarize/next steps: Summarize risks/rewards/roadblocks. Try to end on 'positives to change.'

- Ask for NEXT STEPS:
- "Where does that leave us?"
- "In light of all of that, what would you be willing to try?"
- "With that in mind, what changes would you be willing to make at this point"

Repeat/Follow-up:

- Treatment plan if indicated.
- Consider linking to medications and behavioral support if applicable and appropriate.
- Arrange Follow-up if possible.
- Otherwise, repeat intervention at next clinical visit.