



There are several important elements of the philosophy behind motivational interviewing.

### **1. Client resistance typically is a behavior evoked by environmental conditions.**

MI views denial and resistance as behaviors evoked by environmental conditions, not as traits characteristic of substance abusers. Resistance is primarily viewed as a reaction to the in-session behavior of the counselor. A client's resistance may also be raised before meeting the counselor by other elements of the situation, such as directives from a spouse, employer or judge to seek treatment. In any case, the counselor is advised to disengage from the emotional pulls of the client's negative communications (e.g. anger, silence); continue to communicate respect and empathy for the client; and ultimately judge the client's motivation level, not by what he or she says to the counselor, but instead by what behavior is performed over the course of treatment.

Additionally, the client's behavior over the course of treatment is affected in part by the counselor's reactions to the early, negative communications of the client. It is important for the counselor using the MI approach to remember that agreeing with the counselor's views does not indicate motivation on the client's part, and, more importantly, disagreeing with the counselor's views does not indicate a lack of motivation on the client's part.

### **2. The client/counselor relationship should be collaborative and friendly.**

The MI framework fits best with a view that client change is best enhanced through positive reinforcement. Through positive reinforcement, a client's environment rewards him or her for trying new things, such as opening up to another person about his or her difficulties, or trying new behaviors that fit with the client's long term goals rather than continuing behaviors that provide short-term gain at the cost of long-term loss, etc.

Recognizing that a client's fears and sense of comfort with current habits and surroundings create strong ambivalent feelings about change, the MI model contends that ambivalence must be fully addressed and truly resolved in order to achieve long-term success. Essentially, the willingness of a client to open up and express concerns, hesitations, fears, frustrations, anger, and feelings of loss, is likely to be increased by a positive, friendly, collaborative relationship and to be decreased by an evaluative, hierarchical, or coercive relationship. In the MI model, the counselor remains a friendly consultant, never criticizing the client's effort or difficulties, always attempting to provide empathy and support, yet also willing and able to provide feedback and helpful suggestions to the client as the client becomes ready to consider them. The MI counselor is persuasive, but not coercive; at times challenging, but never argumentative.

### **3. Motivational Interviewing gives priority to resolving ambivalence.**

As mentioned above, in the MI approach, clients are generally viewed as feeling highly ambivalent about changing. Miller and Rollnick believe that resolving clients' ambivalence generally has been given less attention in traditional approaches than is optimal. They see most traditional SA treatment approaches as being too action-oriented, or at least too quick to press clients into focusing primarily on making changes in their lives. The concern about this is that clients often have mixed feelings about making changes, and counselor who presses a client to make changes immediately risks (a) evoking client resistance, (b) promoting premature termination from counseling, and (c) encouraging clients to overlook the internal and external factors that may promote relapse even following initial success in change attempts.

### **4. The counselor does not prescribe specific methods or techniques.**



MI counselors educate clients about the variety of therapeutic options available to them and, at times, the research support for particular options. These include treatment options, as well as other means of support. Clients are free to choose the elements that they believe will be most helpful to them in their efforts. Miller and Rollnick remind us that, despite our best attempts to convince clients to do as we wish, they are always free to make their own choices and we shouldn't get too obsessed with the idea that we are "letting" clients do things we believe are not in their best interests. They believe that allowing clients to pursue their own means of change increases the likelihood of long-term success, even if clients choose goals or means that do not lead to immediate success.

**5. Clients are responsible for their progress.**

Although MI counselors help clients make positive changes in their lives, counselors never assume responsibility for their clients' change. Just as MI counselors emphasize the freedom clients have to choose their behaviors, MI/MET counselors also emphasize the responsibility that lies with clients to make those changes.

**6. MI focuses on clients' sense of self-efficacy.**

The MI approach increases the clients' hope that they can make substantial changes related to their substance abuse. Clients who perceive that they have substance problems in need of change may still "resist" change if they believe they cannot successfully complete the change process. The Project MATCH MET manual cautions counselors that, without a sense of self-efficacy regarding change, clients are likely to use defense mechanisms such as rationalization or denial in order to protect themselves from emotional pain.