



# The Essence of Motivational Interviewing

William R. Miller, Ph.D.  
University of New Mexico

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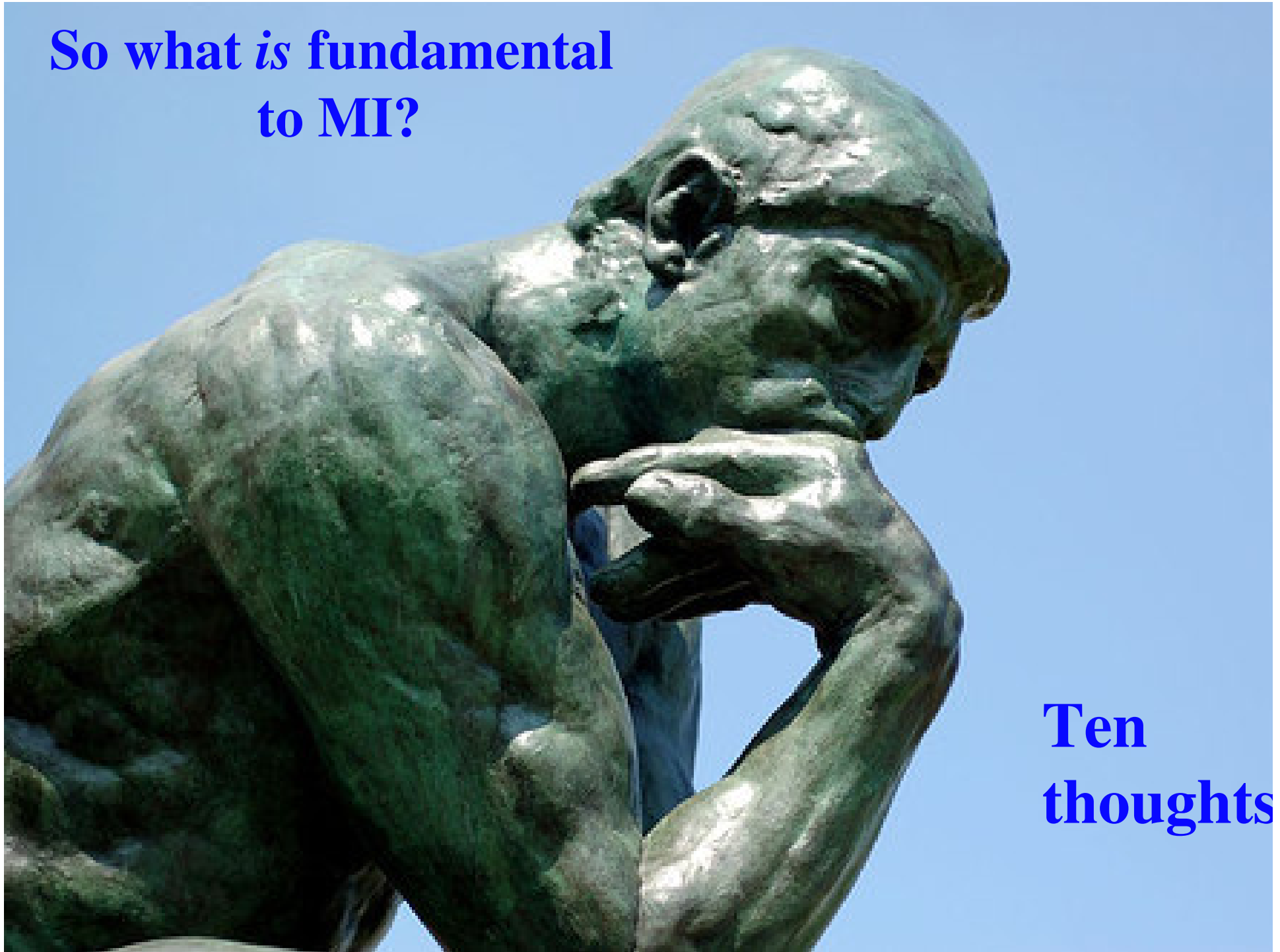
# Ten Things that MI Is Not

Miller & Rollnick (2009)

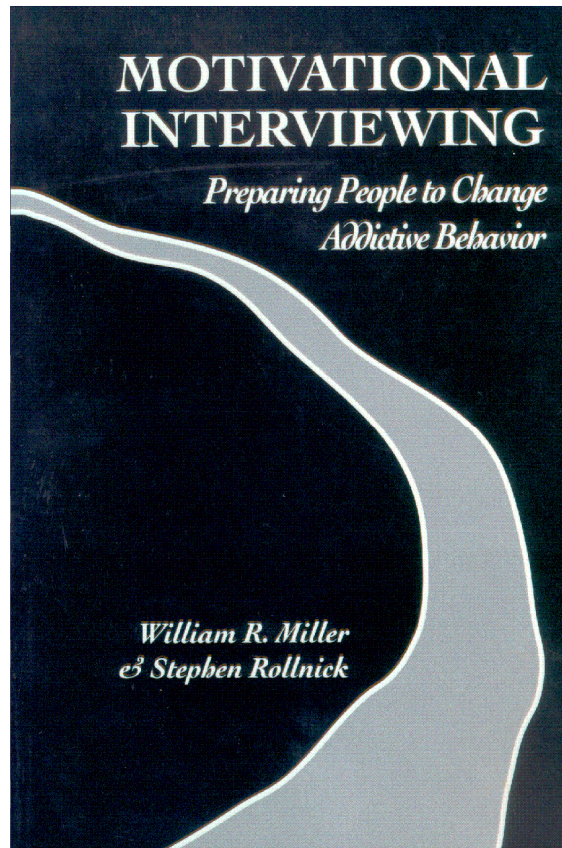
1. Based on the transtheoretical model
2. A trick
3. A technique
4. A decisional balance
5. Assessment feedback
6. A form of cognitive-behavior therapy
7. Just client-centered therapy
8. Easy
9. What you were already doing
10. A panacea

**So what *is* fundamental  
to MI?**

**Ten  
thoughts**

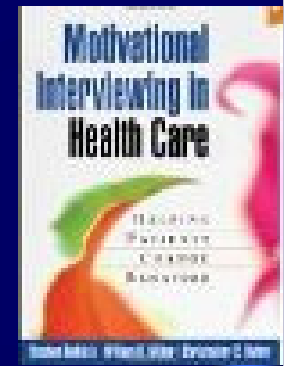




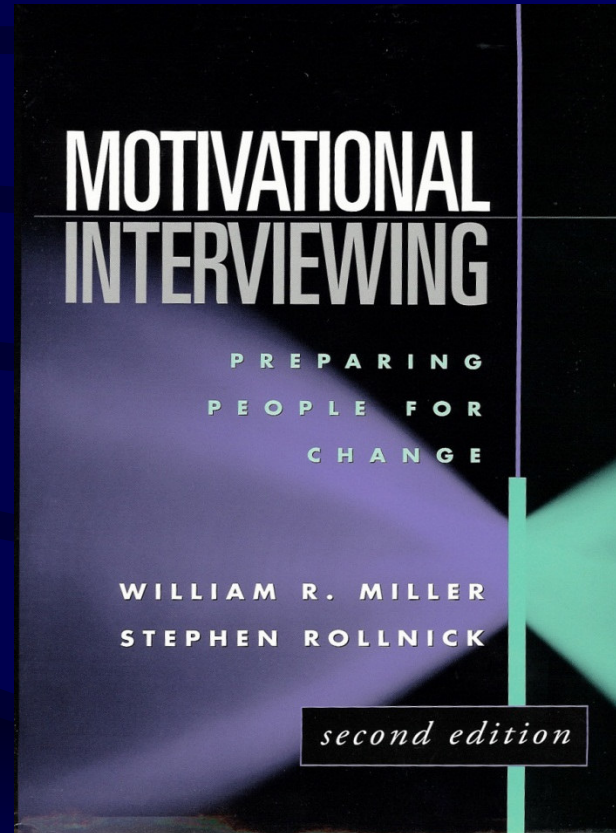


1991

2008



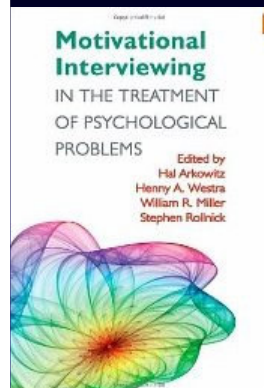
2002



MI-3  
?

2012

2008





# *1. Ambivalence*



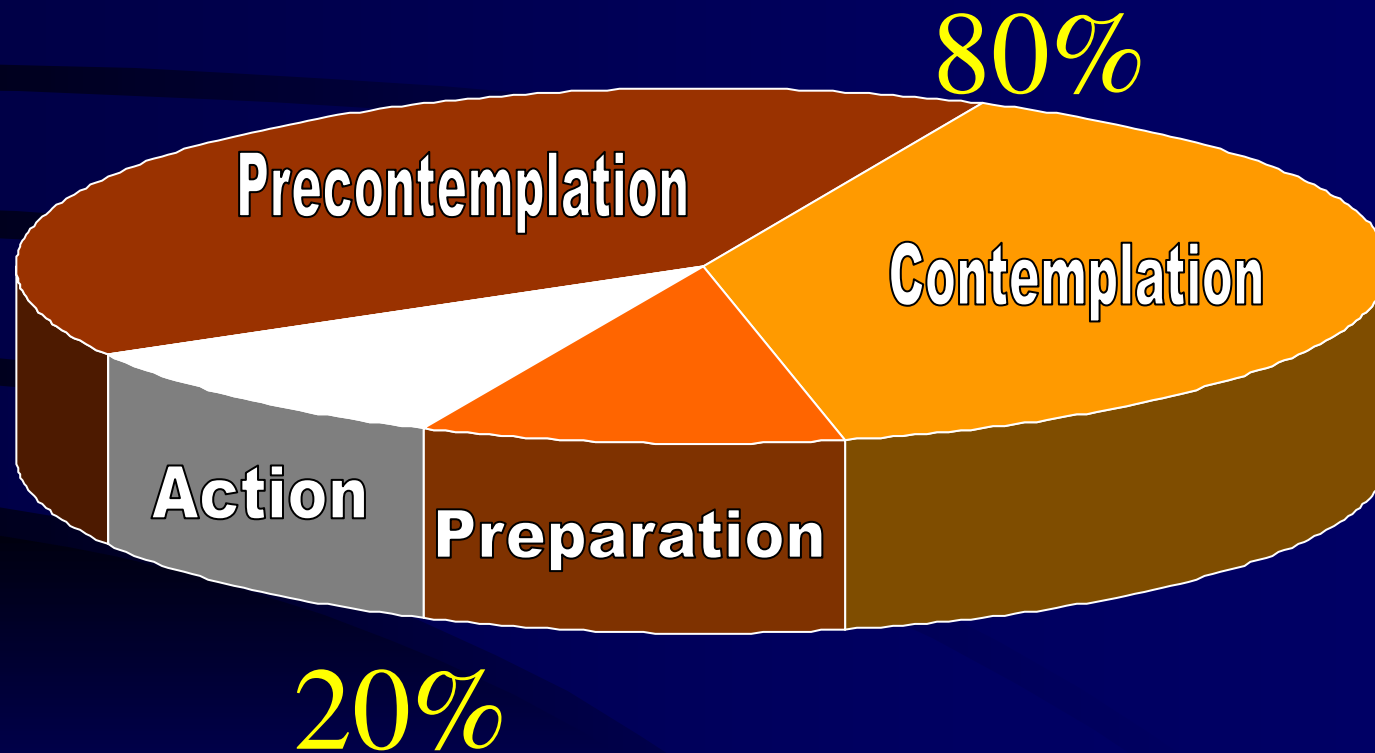
*a normal dilemma where people can  
get stuck in the process of changing*

**Motivational Interviewing was originally designed for  
working with people who are less ready to change . . .**

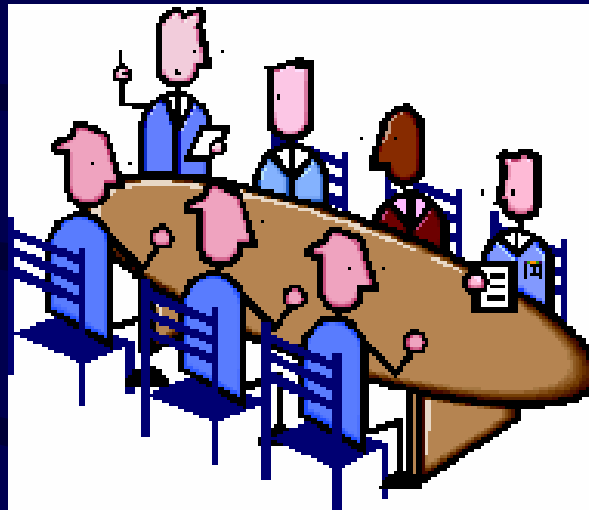




.. which could be most of your clients



# Ambivalence is like a committee



*Voices both for and against change are  
already present within the client*



## 2. The Righting Reflex

In seeking to be helpful, professionals  
often voice the arguments for change:

**Why and how to change**

# When Worlds Collide

The Righting Reflex



Ambivalence





# Normal Human Reactions to the Righting Reflex (Teach/Direct)

## Invalidated

Not respected

Not understood

Not heard

Angry

Ashamed

Uncomfortable

Unable to change

## Resist

Arguing

Discounting

Defensive

Oppositional

Denying

Delaying

Justifying

## Withdraw

Disengaged

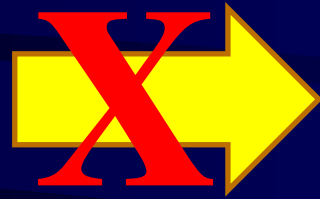
Disliking

Inattentive

Passive

Avoid/leave

Not return



Change

Making people feel bad  
doesn't help them to change





### 3. Reactance

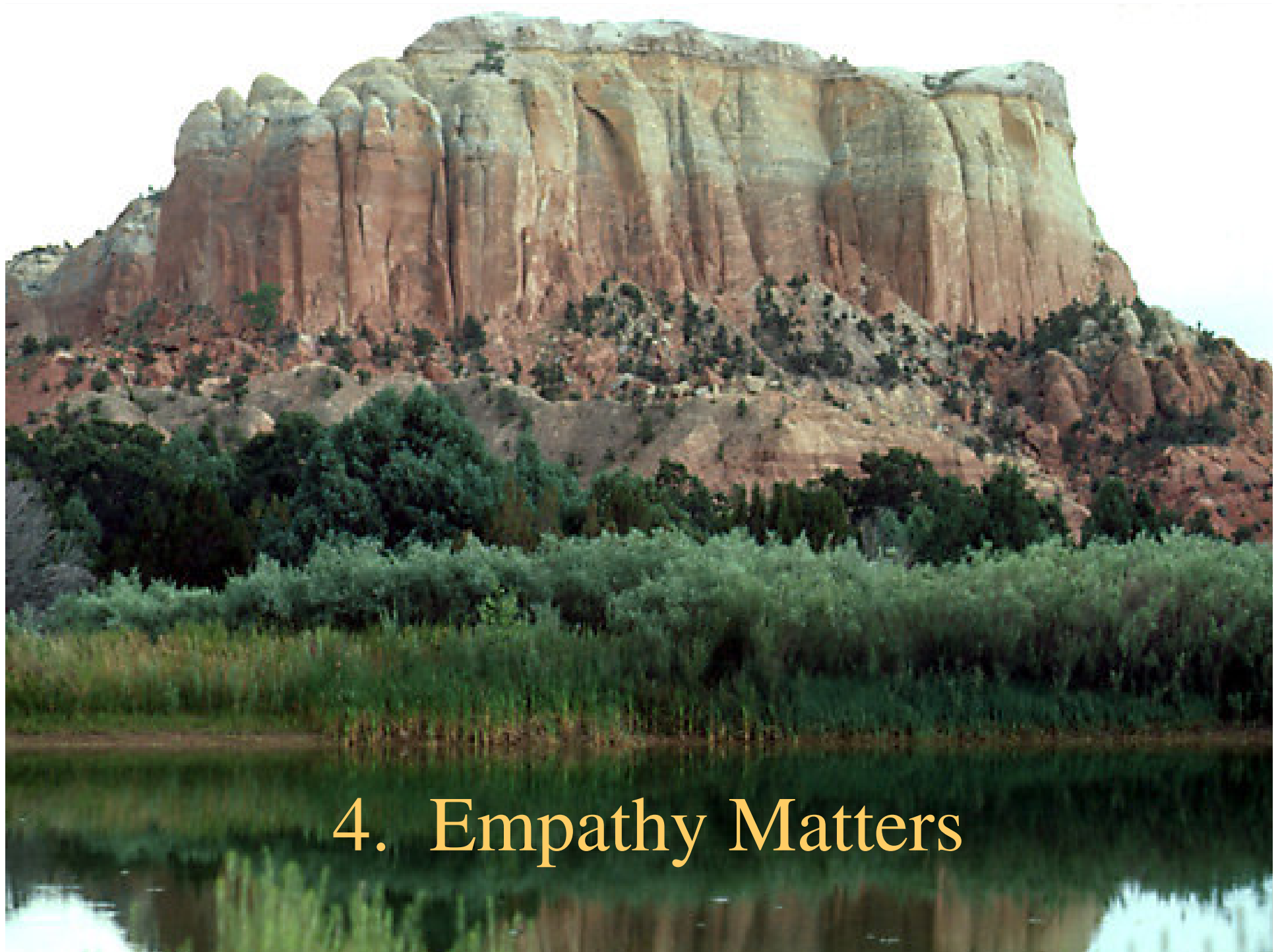
Furthermore,  
causing clients to  
voice arguments  
against change  
*decreases* the  
likelihood that change  
will happen



# **Ironic Process**

In other words:

What people often do  
instinctively when  
trying to motivate  
someone to change can  
actually make change  
*less* likely to occur



## 4. Empathy Matters

# Empathy in Addiction Counseling

- Counselors who show high levels of empathic skill have clients who are:
  - Less resistant
  - More likely to stay in treatment
  - More likely to recover
  - Less likely to relapse
- Empathy is the single best predictor of a higher success rate in addiction counseling



# Empathy is a Clinical Skill

- It is not identification with the client or necessarily experiencing the same emotions
- It is a *learnable* skill
- It can be reliably measured from practice samples
- Originally described and defined by Carl Rogers as “accurate empathy”
- The ability to understand another person’s internal frame of reference and reflect it back like a mirror through “active listening”

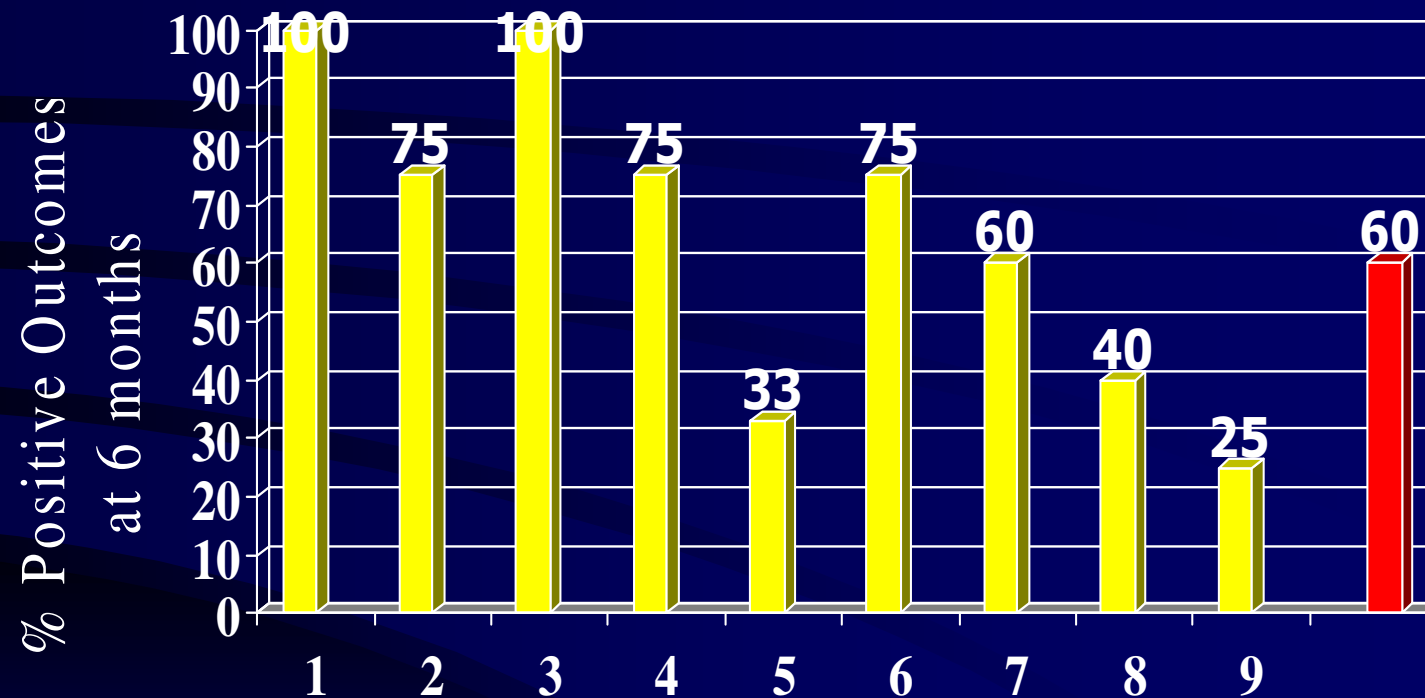


# Miller, Taylor & West, 1980

*Journal of Consulting and Clinical Psychology* 48:590-601

- Problem drinkers were randomly assigned to bibliotherapy or to one of nine outpatient counselors, all delivering the same treatment: behavioral self-control training
- 3 supervisors rated counselors' levels of accurate empathy (Truax & Carkhuff scale) with high inter-rater reliability

# Counselor Empathy and Client Outcomes



Therapist Empathy

■ Therapists ■ Bibliotherapy



# Correlation Between Counselor Empathy and Client Drinking at Follow-up

(standard drinks per week)

Miller & Baca (1983) *Behavior Therapy* 14: 441-448

6 months	$r = .82$	$r^2 = .67$
12 months	$r = .71$	$r^2 = .50$
24 months	$r = .51$	$r^2 = .26$

# **COUNSELORS' INTERPERSONAL SKILL (ROGERS) AND CLIENTS' DRINKING RELAPSE RATES VALLE (1981) *J STUDIES ON ALCOHOL* 42: 783-790**

Patients in treatment for alcoholism were randomly assigned to counselors with:

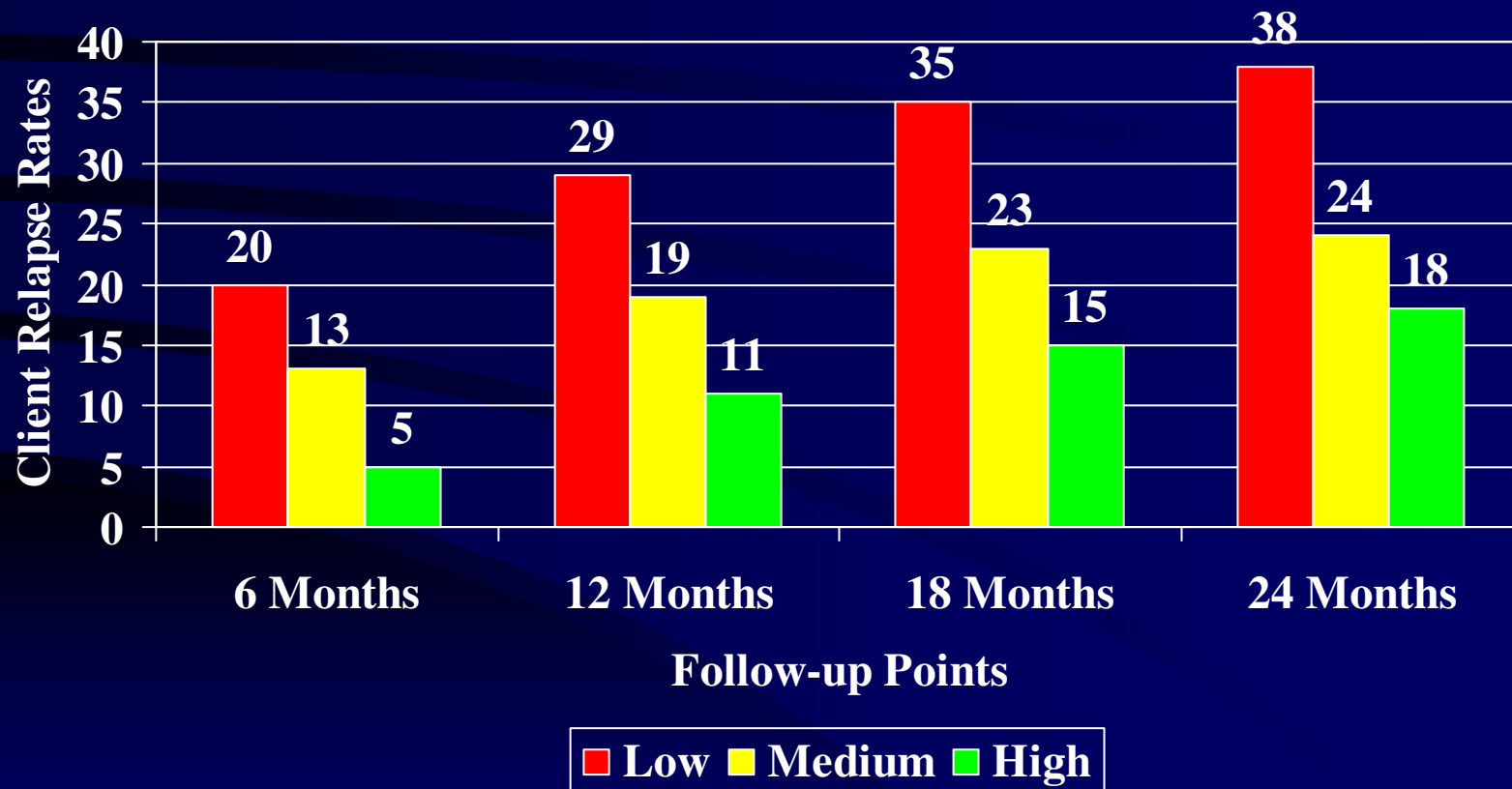
LOW levels of empathy and related interpersonal skills

MEDIUM levels of empathy and related interpersonal skills

Or HIGH levels of empathy and related interpersonal skills

What percentage of patients relapsed?

# Drinking Relapse Rates to 2 Years



# Normal Human Responses to a Listen/Evoke/Empathic Style

## Affirmed

Understood

Accepted

Respected

Heard

Comfortable/safe

Empowered

Hopeful/Able to change

## Accept

Open

Undefensive

Interested

Cooperative

Listening

## Approach

Talk more

Liking

Engaged

Activated

Come back



**In other words, you get to choose  
which clients you want to work with:**

**Open**

**Cooperative**

**Listening**

**Engaged**

**Active**

**Empowered**

**Hopeful**

**Liking**

**Defensive**

**Oppositional**

**Arguing**

**Disengaged**

**Passive**

**Powerless**

**Unable to change**

**Disliking**

# A Change of Role

- You don't have to *make* change happen.

You can't

- You don't have to come up with all the answers

You probably don't have the best ones

- You're not wrestling

You're dancing





5. MI is a refined form of *guiding*

# A Continuum of Styles

Directing

<=>

Guiding

<=>

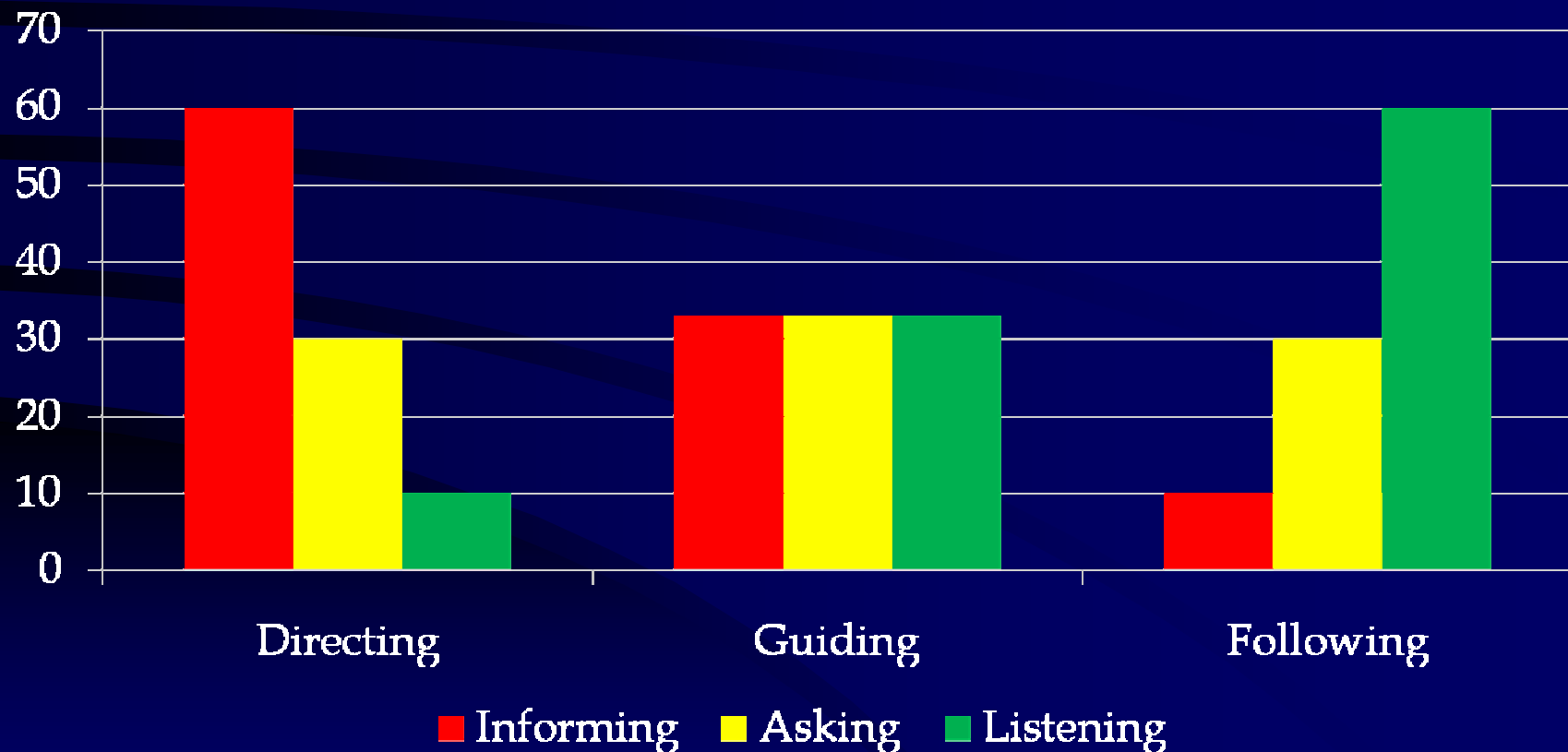
Following





# A Continuum of Styles

Directing  $\Leftrightarrow$  Guiding  $\Leftrightarrow$  Following



## 6. The underlying spirit of MI is important





# The Spirit of MI

- Partnership
- Acceptance
- Compassion
- Evocation

**Absolute Worth**

**Accurate  
Empathy**

**Acceptance**

**Autonomy  
Support**

**Affirmation**

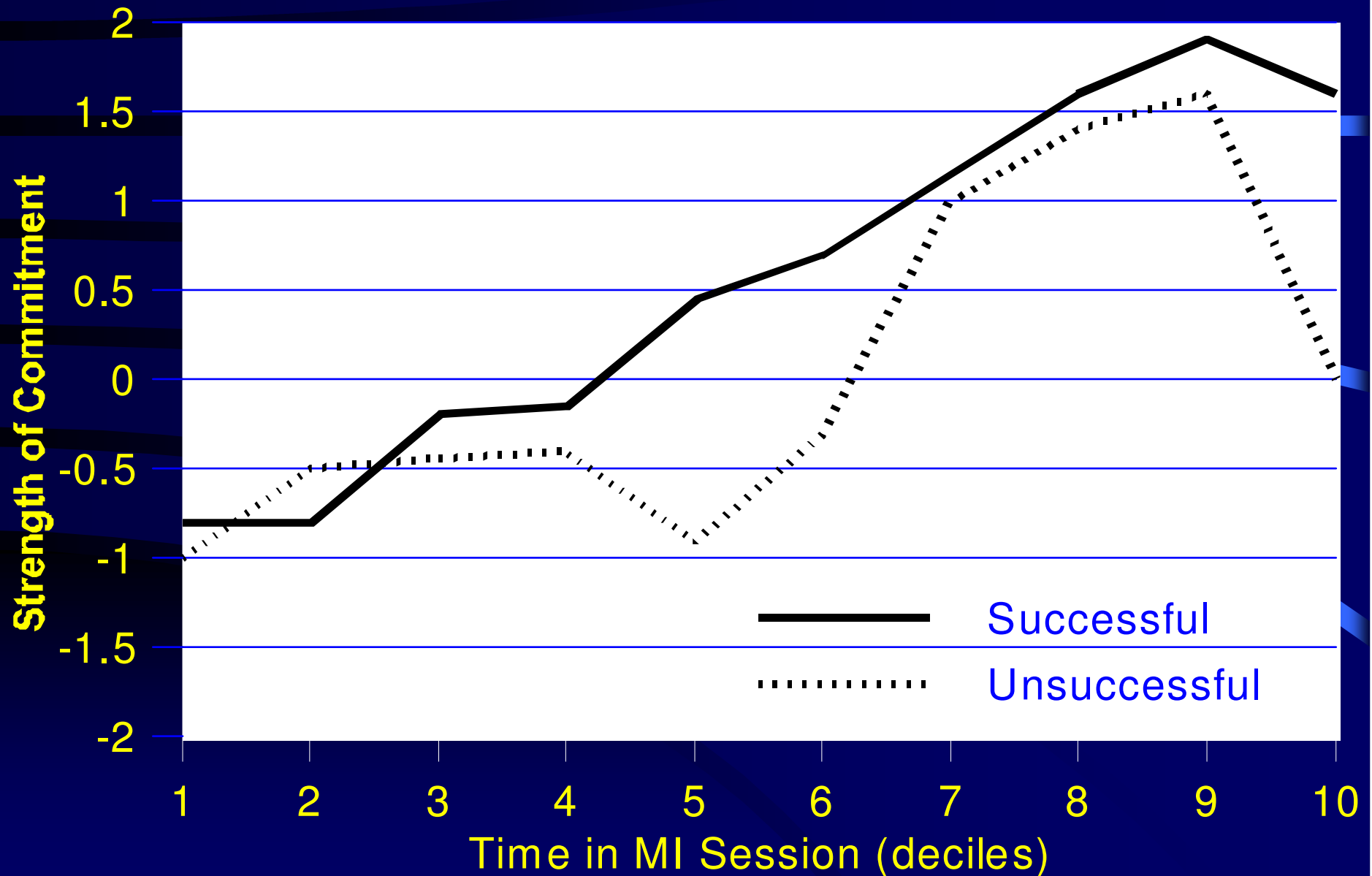


## 7. Psycholinguistics of Change

- “Change talk” predicts change
- Causing a person to voice his or her own arguments for change increases the likelihood of movement in that direction
- Change talk can only be defined in relation to a particular change goal



# Commitment Language in MI



# Change Talk

- Change talk is any patient speech that favors movement in the direction of change
- Think of it as “self-motivational statements” (Miller & Rollnick, 1991)
- Change talk is necessarily linked to a particular change goal

# *Preparatory Change Talk*

## Four Examples

### DARN

- **D**ESIRE to change (want, like, wish . . .)
- **A**BILITY to change (can, could . . .)
- **R**EASONS to change (if . . . then)
- **N**EED to change (need, have to, got to . . .)

# *Mobilizing Change Talk*

reflects resolution of ambivalence

## CATs

- **C**ommitment (intention, decision, promise)
- **A**ctivation (willing, ready, preparing)
- **T**aking **s**teps



# A Path Model of MI

MI



DARN



CATs



Change



# Motivational Hill

Preparatory Change Talk

Mobilizing Change Talk

**Contemplation**

**Preparation**

**Action**



# Change Talk and Sustain Talk

## Opposite Sides of the Same Coin



# Sustain Talk

## The other side of ambivalence

- I really like marijuana (D)
- I don't see how I could give up pot (A)
- I have to smoke to be creative (R)
- I don't think I need to quit (N)
- I'm not willing to quit (A)
- I intend to keep smoking and nobody can stop me (C)



## 8. MI is Goal-directed

MI departs from  
person-centered  
counseling in being  
consciously goal-  
oriented.



# The Relational Foundation for MI

1. Engaging

2. Focusing



# A Change Goal Can be Broader than Behavior Change

- Decision – to make a choice
  - Forgiveness, Leaving or staying
- Attitude - to become a different person
  - To be more Compassionate, Assertive etc.
- Resolution - Acceptance
  - Complicated grief
  - Finding peace regarding a decision
  - Tolerance for anxiety, uncertainty etc.



## 9. Evoking lies at the heart of motivational interviewing

# Four Fundamental Processes in MI

Relational  
Foundation

Motivational  
Interviewing

1. Engaging

2. Focusing

3. Evoking

4. Planning

# Four Foundational Processes

**Planning**

**Evoking**

**Focusing**

**Engaging**





## Evoking involves . .

- Recognizing change talk
- Evoking change talk
- Responding differentially to change talk





**How to get out of a forest**

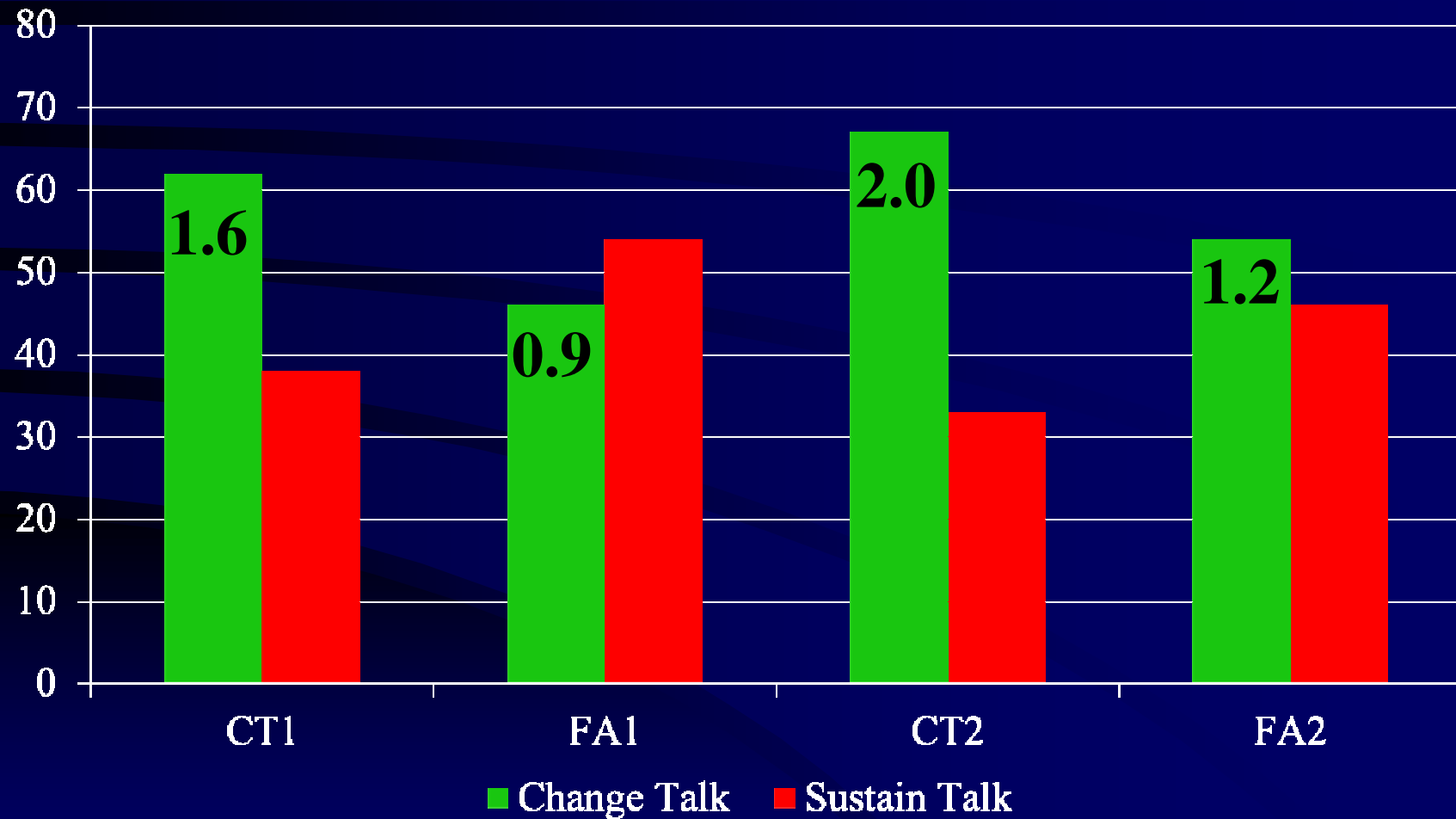


# Counselors *can* evoke change talk

Glynn & Moyers (2010), *Journal of Substance Abuse Treatment* 39: 65-70

- 9 counselors alternated (in 12-minute segments) between
  - CT: Change talk evocation (CT) and
  - FA: Functional analysis of drinking
- in conversations with 47 college students about drinking concerns
- Coded change talk (CT) and sustain talk (ST)
- Dependent measure: % Change Talk defined as frequency of CT  $\div$  CT + ST

# %Change Talk and Sustain Talk



# Two Helping Styles

## Direct

- Give information
- Give advice

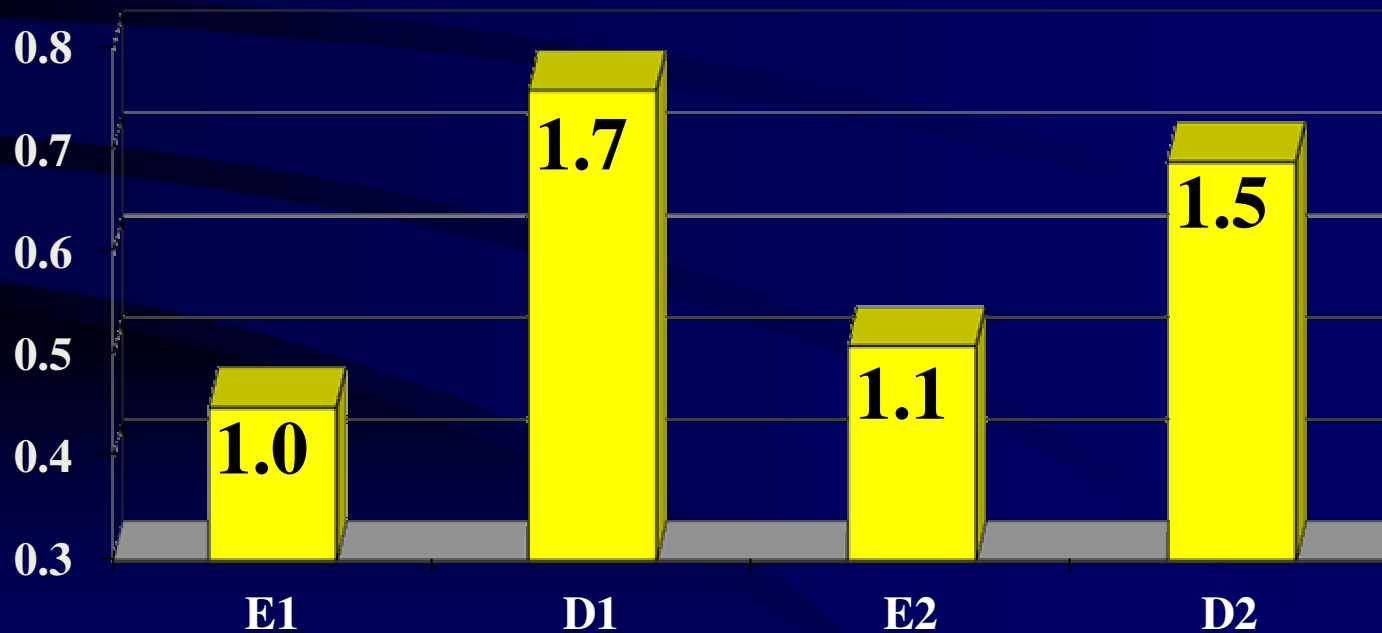
## Follow

- Ask open questions
- Listen reflectively
- Summarize

# Therapist Style and Client Resistance

Patterson & Forgatch, *Journal of Consulting & Clinical Psychology*, 1985, 53: 846-851.

## Resistance Responses per Minute



# What's Become of Resistance?







Resistance



Sustain    Discord  
Talk



## So more fully, MI involves:

- *Differentially* evoking change talk relative to sustain talk
- and responding to sustain talk and discord in a way that does not increase them



# REMOVING THE DAM

Don't worry about taking down the whole thing. Just remove a few rocks (and don't add any more), and then get out of the way. The water will do the rest. - Cleve Sharp, M.D.



# 10. MI includes change planning



# Change Planning in MI

- Not before the person is ready
- Offer information and advice with permission, as needed
- Negotiate a change plan to which the person will agree (could be a small step)
- Implementation intention (specific plan plus stated intent) predicts change

# The Essence of MI

1. Ambivalence
2. Righting Reflex
3. Reactance
4. Empathy
5. Guiding
6. Spirit
7. Change Talk
8. Goal Direction
9. Evoking
10. Planning



