

Behavioral Health &
Wellness Program

University of Colorado Anschutz Medical Campus
School of Medicine

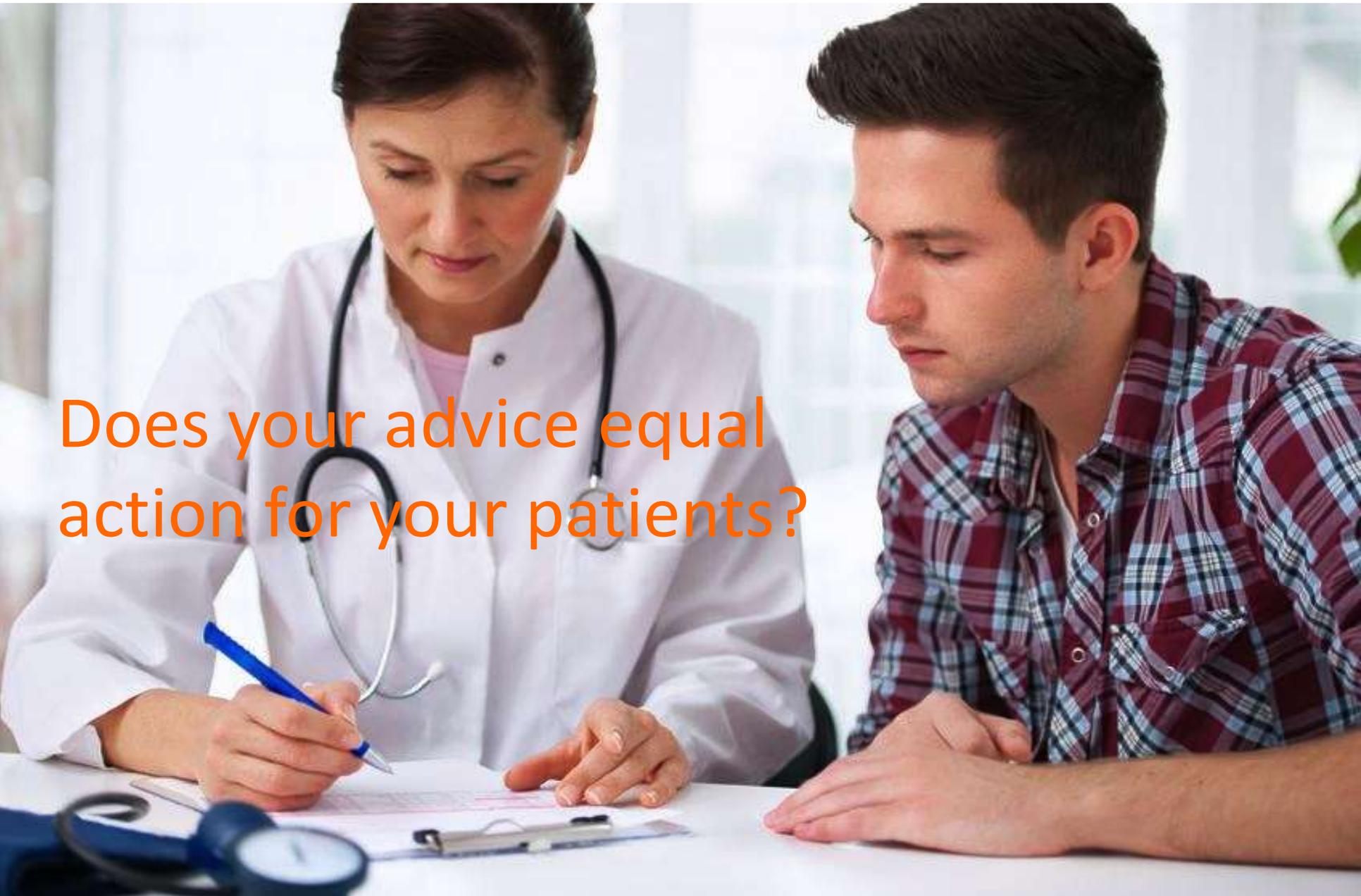
ENHANCING MOTIVATION TO QUIT



Motivational Interviewing Strategies for Physicians and Prescribers
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PBHCI Tobacco Cessation Webinar Series



Does your advice equal
action for your patients?

Motivational Interviewing

Definition:

Client-centered, directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence. A way of being versus doing.



Motivational Interviewing

Definition (cont'd):

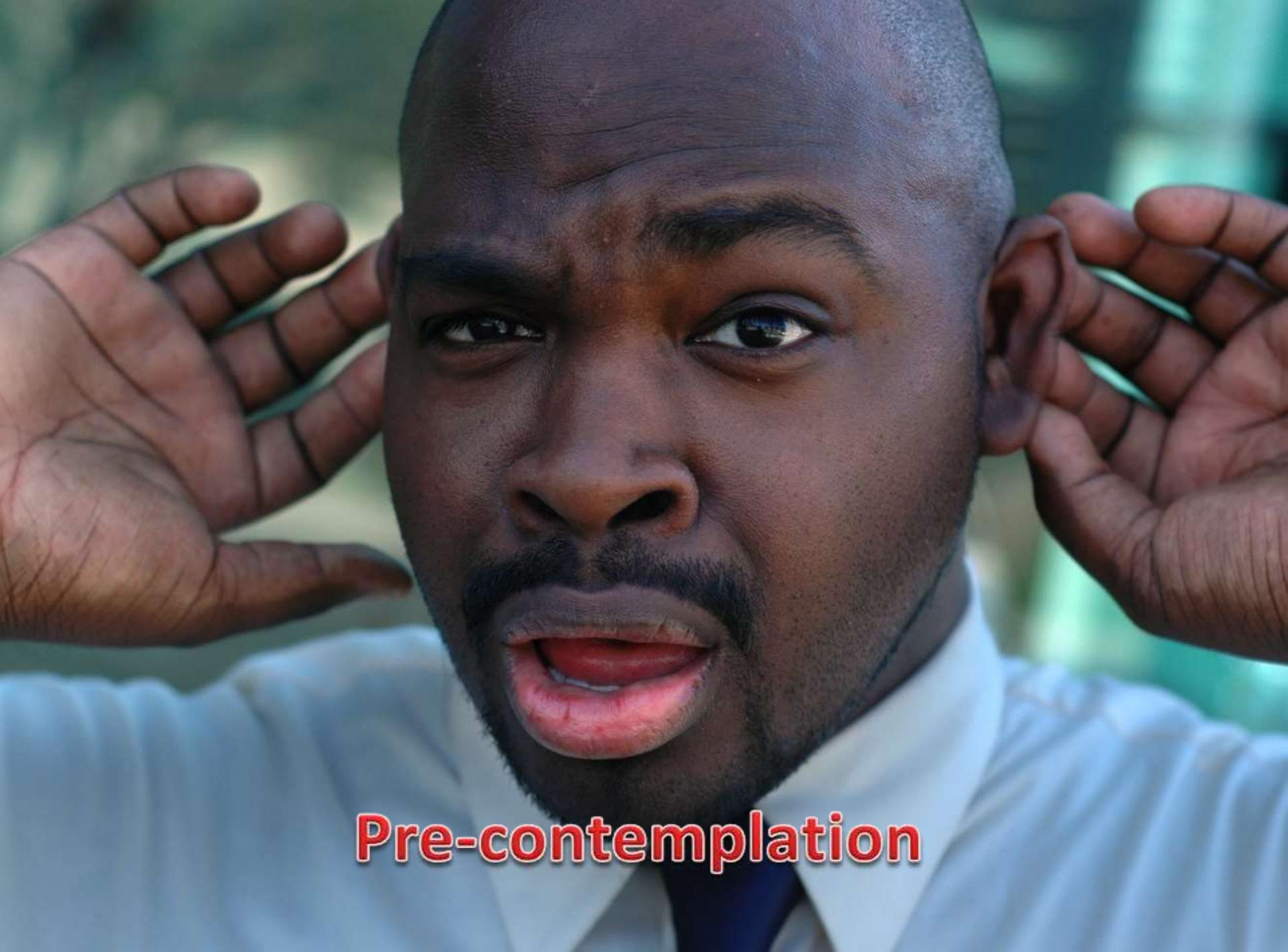
Client-centered – focused on the person's interests and concerns and discrepancies between their experience and values

Directive – directed towards the resolution of ambivalence, encouraging movement towards change

Communication - enhances motivation through a method of communication that evokes natural change

Intrinsic motivation – motivation that is internal to the person

Ambivalence – change arises through its relevance to the person's own values and concern



Pre-contemplation



Contemplation



Preparation



Action



Maintenance



Four Principles of MI

① Express empathy

- Unconditional acceptance
- Reflective listening
- Ambivalence is normal

② Develop discrepancy

- Client presents arguments for change
- Create a change in perception without coercion



Four Principles of MI

③ Roll with resistance

- Avoid arguing for change
- Resistance is not directly opposed
- Change perception through reframing/insight
- Resistance is a signal to respond differently



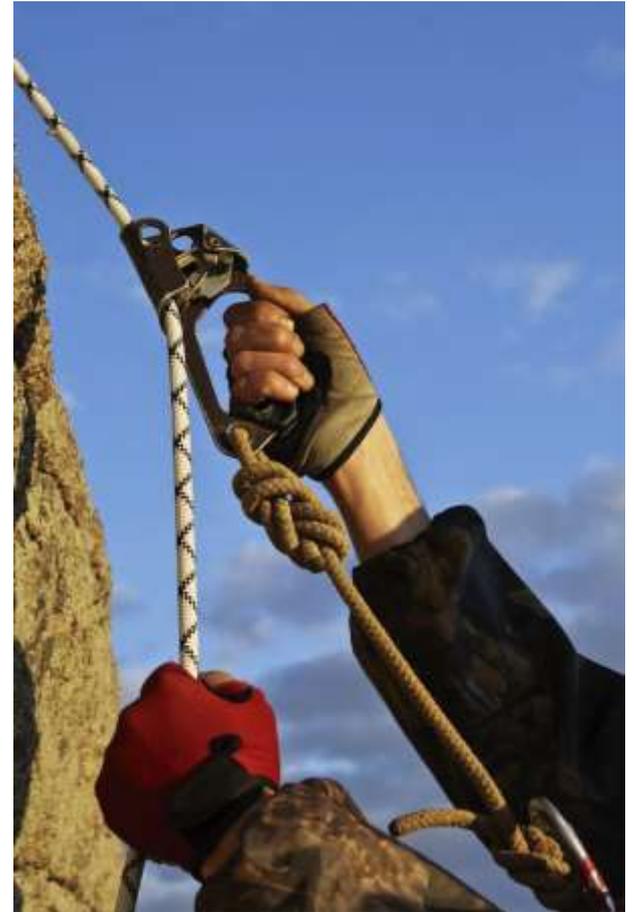


Four Principles of MI

- ④ Support self-efficacy (person's belief in their ability to carry out and succeed with a specific task)
- Belief that change is possible
 - Client carries out change
 - Provider's belief in the person's ability to change becomes a self-fulfilling prophecy

MI Strategies

- ① Ask open questions
- ② Listen reflectively
- ③ Affirm
- ④ Summarize
- ⑤ Elicit change talk





Directing or
Guiding?



Collaboration

Activation



quit today

Autonomy





R

Resist the righting reflex

“How do you feel about your smoking?”



U

Understand your patient's motivation

“Why do you want to change?”



L

Listen to you patient

“What is important to you?”



E

Empower your patient

“What do you want to do?”



3 Core Communication Skills

- ① Ask questions to understand your patient
- ② Check in to make sure you understand
- ③ Convey knowledge



The Words Your Patients Use

Communicate their...

- ① Desire – What do I really want?
- ② Motivation – Why do I want it?
- ③ Confidence – Can I do it?
- ④ Readiness – Am I ready?
- ⑤ Importance – How much do I want it?
- ⑥ Commitment – How committed am I?



The Words You Use

Are very important...

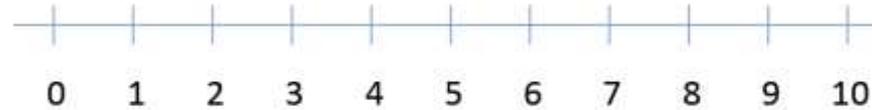
- ① Non-judgmental approach
- ② Positive perspective
- ③ Permission to inform
- ④ Offer choices
- ⑤ Talk about what others do
- ⑥ Check in about understanding



Change Exercise

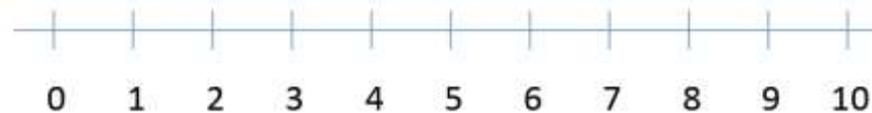
Importance Ruler

On a scale from 0 to 10, how IMPORTANT is it for you to change RIGHT NOW?



Confidence Ruler

On a scale from 0 to 10, how CONFIDENT are you that you can change RIGHT NOW?



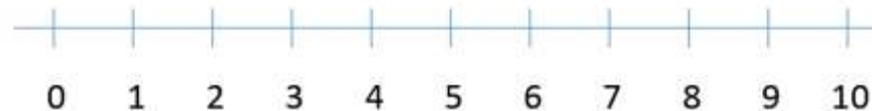
Readiness for Change Ruler

On a scale from 0 to 10, how READY are you to take steps towards change RIGHT NOW?



Control Ruler

On a scale from 0 to 10, how much CONTROL do you have over your ability to make positive change RIGHT NOW?



A blue patterned curtain frames a view of a blue sky with white clouds over a calm blue sea. The text "Role Play" is centered in the middle of the image.

Role Play



Discussion

Motivational Interviewing



Motivational Interviewing in Health Care:
Helping Patients Change Behavior
Rollnick, Miller and Butler (2008)

Motivational Interviewing,
Second Edition: Preparing
People for Change
Miller & Rollnick (2002)

In search of how people
change: Applications to
addictive behaviors
Prochaska et al (1992)



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