

Effectively Communicating with Patients Using Motivational Interviewing

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Agenda

01

WHY CHANGE DOES
NOT OCCUR

02

STAGES OF CHANGE

03

TECHNIQUES FOR
MOTIVATING
CHANGE

Reasons why behavior change does not occur

Advantages outweigh the disadvantages

Shame

Low self-esteem

Low confidence

Previous failure

Mental Health

Lack of information

Modeled for them by family

Lack of Resources

Do not know where to acquire the necessary resources

Struggle with problem solving

Nagging/Harassment from others

Behavior Change

Stages of Change



Precontemplation

Not yet considering change



Contemplation

Thinking about making a change



Preparation

Planning the change



Action

Actively making the change



Maintenance

Sustaining the change



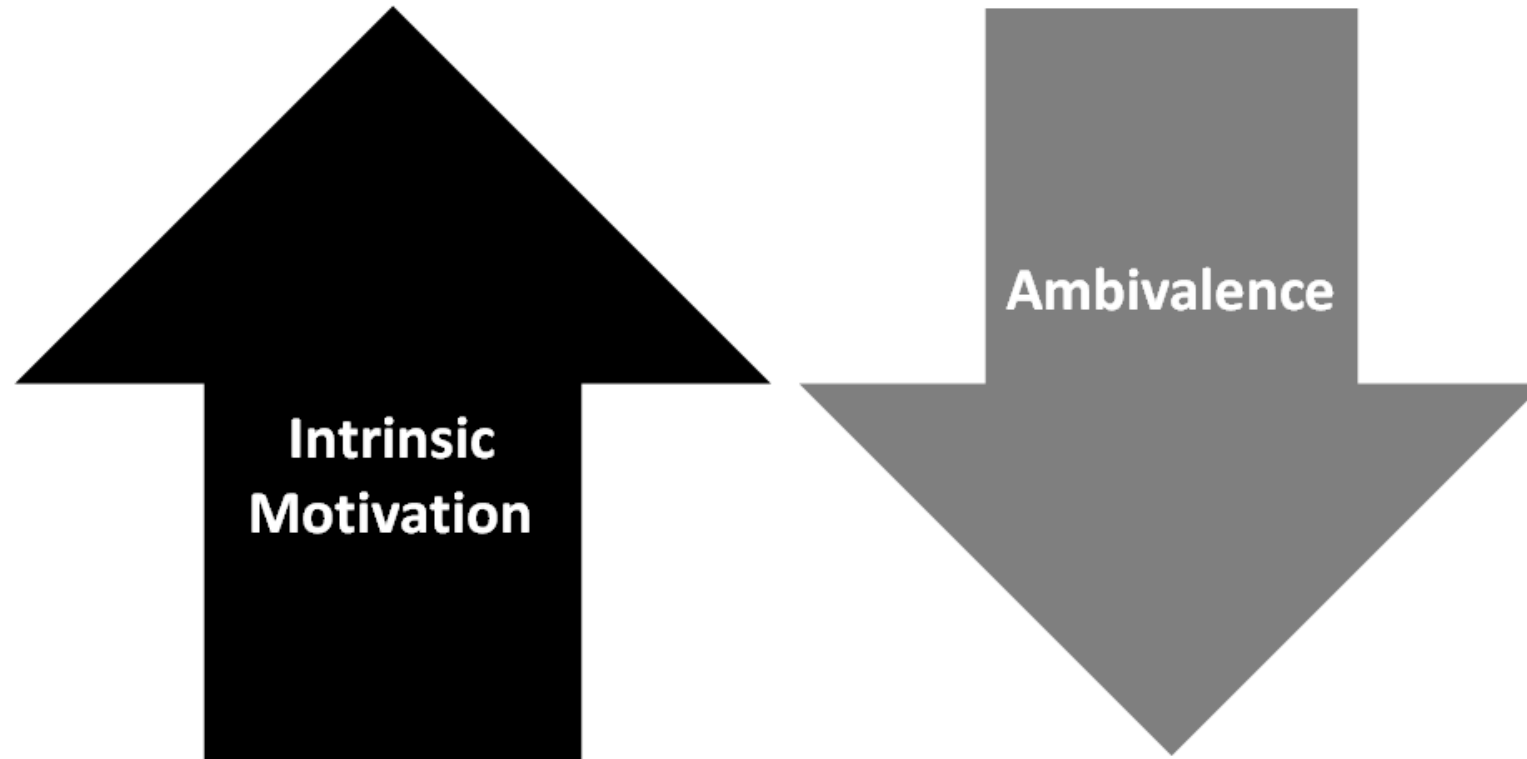
Relapse

Discontinuing the change

(Prochaska & DiClemente, 1983; Prochaska et al., 1992)

Motivational Interviewing

The Spirit



Motivational Interviewing



Collaborative Relationship



Dual-Expertise Relationship



Respecting Patient Autonomy

Provider-Patient Relationship

Motivational Interviewing

MI Skills



When a provider's approach does not match the patient's stage of change, the product is RESISTANCE

Corresponding Tasks



Precontemplation

Show understanding and raise awareness



Contemplation

Resolve ambivalence



Preparation

Identify Change Strategies



Action

Increase self-efficacy and reinforce



Maintenance

Reinforce & develop new strategies



Relapse

Empathize, normalize, problem solve

(Prochaska & DiClemente, 1983; Prochaska et al., 1992)

Communication Skills



Open-Ended Questions



Personal Affirmations

Demonstrate appreciation for client's beliefs/viewpoint/effort



Listen & Engage in Reflections

Re-iterate their thoughts and feelings



Provide Summaries



Respect Patient Autonomy

Resist Righting Reflex



Provide Factual Information

Review Recommended Limits



Explore Events that Brought Patient to Appointment

Pre-Contemplation

Roll with Resistance

Resistance is a signal for you to

- Change the direction you are taking
- Listen more closely to what the patient is saying and provide reflections
- Shift focus to what is important to the patient at their appointment



Listen for Change Talk

I wish...

I would like...

It would be better...



Use Screening Measure to Begin the Conversation

"I noticed you marked a five for question three. Would you mind telling me more about that?"



Ask Permission

"Would you mind if we discussed how you feel about [behavior]?"



Use Readiness Ruler/Decisional Balance

To assess motivation and barriers

Contemplation

Readiness Ruler

Thinking About Change										
What change(s) are you considering?										
How important is it that you make this change?										
How confident are you that you are able to make this change?										
How ready are you to make this change?										

Readiness Ruler

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

Tell me about how you chose a 6 and not a 3?

What would it take to for you to respond an 8 instead of a 6?



Decisional Balance

1. PROS to not taking medication
2. CONS to not taking medication
3. CONS to taking medication
4. PROS to taking medication



Offer Menu of Options



Identify and Lower Barriers



Help with Goal Setting

*Specific, Measurable, Attainable,
Realistic, Timely*

Preparation



Provide Positive Reinforcement



Identify New Strategies (if need be)

Action & Maintenance



Frame Reoccurrence as Learning Opportunity & Normalize



Explore Antecedents



Instill Hope



Maintain Supportive Contact

Relapse

Summary

Motivational Interviewing is a set of skills and spirit of how you interact with patients

- Respect patient choice
- Meet the patient where they are at
- Gently and respectfully try to highlight patient's own motivations to change
- Do what we can to help them be successful in the planning, execution, and maintenance of their behavior change

References

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Thank You

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