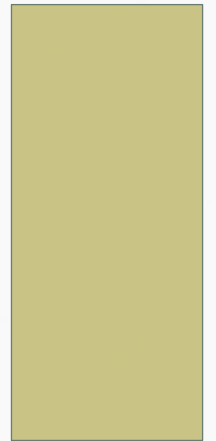


MOTIVATIONAL INTERVIEWING

ELIZABETH MORRISON LCSW, MAC



WHAT WE BRING

BELIEFS

- We have beliefs about change
- We have beliefs about the patient's behavior
- We have an agenda for the patient

WHEN IT CAUSES PROBLEMS

- Squashes curiosity
- Righting reflex
- Can't 'set it aside'
- Impedes empathy
- Can't elicit or pursue patient's agenda



FOUNDATIONAL SKILLS

- Open ended questions
- Reflective listening
- Empathy conveyance strategies



'WRING IT OUT'



- Tell me more about what is helpful about smoking pot'
- What are the benefits of staying in the relationship?
- How does alcohol help with your anxiety?

SCALING

- Not at all
 - Convinced
- 0 1 2 3 4 5 6 7 8 9 10** **Totally convinced**

- *“What led you to say 4 and not zero?”*

DETECT AND HIGHLIGHT 'SLIVERS' OF CHANGE TALK

Statements about:

- minimizing the behavior
- others are bothered by the behavior
- related troubles in the past
- cost
- hiding the behavior from children or others
- values that are inconsistent with the behavior

PROVIDE INFORMATION SKILLFULLY

AATA:

Ask: *“What do you already know....”*

Ask: *“Can I give you some info...”*

Tell: *“Using alcohol with opioids....”*

Ask: *“What are your thoughts...”*

STRENGTHEN THE RELATIONSHIP

- Empathize

- Autonomy

- Appreciate honesty

- Highlight strengths

