PM-SB Study MI Webinar Series
Engaging Using Motivational Interviewing (MI): A Practical Approach

Franze de la Calle
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Webinar Housekeeping Refresher

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‘Participants’ tab to see video

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Click the ‘x’ if you want to close the video
Click the ‘hand’ icon to raise your hand and ask questions.

Control Panel on the right side of screen

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NYU School of Medicine
MINT
‘Chat’ tab to open the chat box

Make sure you choose “Send to Presenter” and then type in your chat and press send

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Making the most of this webinar series Refresher

• To make the most of this webinar training, please stay engaged -- no multi-tasking 😊
• Please participate in all exercises, including polls, discussions, and role-plays
• We will also call on you to participate!
2\textsuperscript{nd} Webinar Learning Objectives

✓ Discuss the use of the MI communication skills OARS to bolster older adults’ intrinsic motivation
✓ Recognize roadblocks to effective communication
Checking Your Vital Signs

• What are you confused or want to know more about?
• What are your thoughts about using this approach in your interaction with your participants or with older adults you are engaging to participate
• What would you say are some of the disadvantages, if any, of using MI in your role as RA, CHWs, Exercise Trainers?
• What haven’t we talked about?
Understanding the Flow of MI: 
The Four Processes

Planning
Evoking
Focusing
Engaging

Adapted from Miller and Rollnick, 2013, p. 26
Goals of the Four Processes

1. **Engaging:** The foundation of MI; forming a connection and building a relationship with the person.

2. **Focusing:** Setting the agenda; identifying the behavior and finding a direction

3. **Evoking:** Drawing out person’s internal reasons for changing

4. **Planning:** Setting a goal and making a plan*; strengthening commitment to change
PQ1: If you imagine yourself using MI, which of the four processes do you think would be most helpful to you?

- Engaging
- Focusing
- Evoking
- Planning
The MI Process: An Overview

1. Establish Rapport
2. Set the Agenda
3. Assess and explore importance. Explore barriers and brainstorm solutions
4. Summarize arguments for change and Consider Options
   - Use E-P-E and OARS: Open Questions, Affirmation, Reflective Listening, Summarizing
5. Ask a key question, like “What do you think you would like to do?”
6. Make a plan
7. Assess Commitment to the Plan
8. Support Commitment to the Plan
9. Review and Revise Plan, If Needed

Source: Food for the Hungry: MI for use in HIV
How may of you have had conversations in your role as RAs, CHWs or Exercise trainers where the conversation feels more like...

Wrestling

Dancing

Use your hand icon to share your experience with the group
Sounds nice.....

But, how do we practice it??
The Fundamental Skills of MI

Open the Conversation
✓ Asking Permission
✓ Providing a menu of benefits
✓ E-P-E

The **OARS**
✓ Exploring through **Open-Ended Questions**
✓ **Affirmations**
✓ **Reflective Listening**
✓ **Summarizing**
Asking Permission

• People are much more likely to follow advice when you build collaboration by asking permission to share information instead of telling them what they should do.

• By asking permission, you are showing respect for the older adults life experiences and supporting their ability to make choices about their life.

“Would you be interested in exploring with me some of the ways in which your participation may be beneficial to you and others?”
PQ2: Which of the elements of the MI SPIRIT is honored by asking permission (choose all that apply)?

- Collaboration
- Evocation
- Acceptance
- Compassion
AGENDA SETTING: FIND A SHARED DIRECTION IN THE CONVERSATION

- Ask permission to discuss the topic
  “I wonder if it would be ok with you if we talked about …?”

- Explain you will not insist on immediate action
  “I’d just like to get a better idea of how you feel about…..”
Setting the Agenda

What helps older adult maintain healthy mental health?

- Having Healthy relationships
- Being Physically active
- Being happy
- Coping with stress
- Being positive

YOU CHOOSE/OTHER
Use E-P-E (a.k.a “Ask-Tell-Ask”) Technique to Gather & Give Information

ELICIT-PROVIDE-ELICIT

Step 1  
**Elicit** – ask information from the person about the situation  
  o “What are your thoughts about healthy aging?”

Step 2  
**Provide** – summarize what they said. If appropriate ask permission, and then offer several options for the person to consider  
  o **Example:**  
    • “Research suggests that….”  
    • “Studies have shown…..”  
    • “Others have benefited from….”  
  – Offer a menu of activities and discuss them with the person

Step 3  
**Elicit** – ask the person what they’d like to do or what they think of the information you provided  
  o “What do you think of these benefits?”  
  o “How can we help you?”
Rowing with the O.A.R.S.

The 4 basic skills of MI:

1. Open-ended Questions
2. Affirmations
3. Reflections
4. Summaries
Activity Opening the door to learn more

What’s the difference?

“What are your thoughts about participating?” versus “Do you want to participate?”

Type in your answers.
## Open vs. Closed Starters

<table>
<thead>
<tr>
<th>Open</th>
<th>Closed</th>
</tr>
</thead>
<tbody>
<tr>
<td>To what extent.....</td>
<td>Did You..?</td>
</tr>
<tr>
<td>How Often..</td>
<td>Will You..?</td>
</tr>
<tr>
<td>Why....</td>
<td>Can You..?</td>
</tr>
<tr>
<td>Tell me about.....</td>
<td>Is it...?</td>
</tr>
<tr>
<td>Help me understand.....</td>
<td></td>
</tr>
<tr>
<td>What, if any,.....</td>
<td></td>
</tr>
<tr>
<td>When, if ever,</td>
<td></td>
</tr>
<tr>
<td>How, if at all,</td>
<td></td>
</tr>
<tr>
<td>What else.....</td>
<td></td>
</tr>
</tbody>
</table>
Polling the Group

PQ4: What do you think about the following statements (answer True or False)

1. Open questions produce less biased information because they allow people to “tell their story.”

2. Open-ended questions elicit important information that otherwise might not be asked.

3. Closed-ended questions often damage rapport, decrease empathic connections, and paradoxically end up taking more time.

Source: Community Health Center Association of Connecticut. Sarah Blust, LMSW
Activity Making Open Questions

• Do you want information about the program?
• Are you ready to join the program?
• Do you care about your mental health?

Type in your answers
Affirmations

• Emphasize a strength, successes, and efforts to change
• Acknowledge behavior changes and attempts to change
• Notice and appreciate a positive action
• Should be genuine
• Express respect and caring
• Strengthen relationships
• More than saying, “very good”

Efforts to make changes are acknowledged, no matter how large or small
Affirmations May Include:

• Commenting on a positive quality
  o By the way you described how you have been taking care of yourself; you have shown a lot of determination to maintaining good health.

• A statement of appreciation
  o I appreciate your openness and honesty during this conversation.

• Catch the person doing something right
  o I know you have mentioned foreseeing some hiccups along the way. Your commitment to your health really shows by agreeing to explore this possibility with me today.
Affirmations May Include:

• A compliment
  o You are the kind of person who speaks up when you have a different view on something. That’s a real strength!

• An expression of hope, caring, or support
  o We are here to support you and are committed to working with you. I hope you give what we have discussed some thought and evaluate the potential benefits it can bring to you!
A Taste of MI
Using Motivational Interviewing-based Skills and Strategies with Older Adults at Risk for Falls

https://www.youtube.com/watch?v=IZR4Njufxs4
PQ5: How do you think Ms. Smith felt in this conversation? (answer all that apply)

- Appreciated
- Scolded
- Shame
- Accepted
- Motivated
What did the practitioner do well?

What are some common reactions to being listened to?

Type in your answers
Common Reactions to Being Listened to

- Understood
- Want to talk more
- Liking the counselor
- Open
- Accepted
- Respected
- Engaged
- Able to change
- Safe
- Empowered
- Hopeful
- Comfortable
- Interested
- Want to come back
- Cooperative
Reflective Listening

• It is the most important and challenging skill for responding to patients, and building empathy

• Listen is more than hearing. We listen to:
  ✓ The way the words are said
  ✓ Recognize hidden feelings underlying the words spoken
  ✓ Be aware of what is left unsaid

Reflections target the center of what the person is trying to express.
Reflective Listening

Is a process of:

• **Hearing** what the older adult is saying
• “**Guessing**” , or “**hypothesizing**” what the person meant
• **Verbalizing** the idea in the form as a **statement**
Consider the difference in sound between

You are feeling frustrated?

To,

You are feeling frustrated!
Levels of Reflections

There are 2 levels of reflections: **Simple and Complex**

**Simple reflections** keep you at the surface level—you are just pushing around some dirt but not planting any seeds.

There are 2 ways to do a simple reflection:

1. **Repeating**: Repeats an element or phrase of what the person just stated.
   
   **Older Adult**: “I am not going to participate. What you think doesn’t matter to me.”  
   **Simple Reflection**: “You don’t want to participate and my thinking does not matter to you.”

2. **Rephrasing**: Re-word what was heard without interpretation. Use synonyms
   
   **Older Adult**: "I am not going to participate. What you think doesn’t matter to me.”  
   **Simple Reflection**: “My opinion isn’t going to change your mind.”
Complex reflections or deeper reflections: Draw out what people are feeling – now you are digging deeper to get to the root of the issue

Types of complex reflections:
1. Paraphrasing: different content to what was said. Infer meaning behind the words
2. Reflection of feeling: emphasizes the emotion in the statement
3. Overstate vs. understate: it can be exaggerating or amplifying what was said

When reflecting feeling, it’s best to understate than overstate. Overstating can evoke sustain talk.

4. Continuing the paragraph: anticipating what will be said next
5. Metaphor, Simile and Analogy: create vivid images
Older Adult: “I am not going to participate. What you think doesn’t matter to me.”

Complex Reflections:

• **Paraphrasing**: “It seems to you that I am going to try to persuade you to participate”

• **Feeling**: “You are feeling frustrated that we are asking you to participate”

• **Overstating**: “The way you view it is that there is not anything at all that you can gain from participating”

• **Continuing the paragraph**: “And what really matters here is your opinion, after all you are the one who will be investing time and effort into it.”

• **Metaphor**: “This idea makes no odds to you”

Some of the best complex reflections are short and to the point!
<table>
<thead>
<tr>
<th>Reflection Stems</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sounds like...</td>
</tr>
<tr>
<td>• You’re saying that...</td>
</tr>
<tr>
<td>• You’re feeling like...</td>
</tr>
<tr>
<td>• This has been totally _______ for you.</td>
</tr>
<tr>
<td>• Almost as if...</td>
</tr>
<tr>
<td>• Like a...</td>
</tr>
<tr>
<td>• As if ...</td>
</tr>
<tr>
<td>• For you, it’s a matter of...</td>
</tr>
<tr>
<td>• From your point of view...</td>
</tr>
<tr>
<td>• You...</td>
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<tr>
<td>• You are...</td>
</tr>
<tr>
<td>• Must be...</td>
</tr>
<tr>
<td>• You really ...</td>
</tr>
<tr>
<td>• Through your eyes...</td>
</tr>
<tr>
<td>• You believe...</td>
</tr>
<tr>
<td>• Your concern is that...</td>
</tr>
<tr>
<td>• Your fear is that...</td>
</tr>
<tr>
<td>• It seems that...</td>
</tr>
<tr>
<td>• You’re not terribly excited about...</td>
</tr>
<tr>
<td>• You’re not much concerned about...</td>
</tr>
<tr>
<td>• This really...</td>
</tr>
<tr>
<td>• It is so...</td>
</tr>
<tr>
<td>• You feel so...</td>
</tr>
<tr>
<td>• It’s really important to you that...</td>
</tr>
<tr>
<td>• You’re not really...</td>
</tr>
<tr>
<td>• You feel as though...</td>
</tr>
<tr>
<td>• What I heard you say was...</td>
</tr>
</tbody>
</table>

Source: community care of NC-MI resource guide
Responding Reflectively

https://www.youtube.com/watch?v=SZ-IH-V7oJ4
Example

**Older Adult:** “I live alone and most of the time it’s hard for me to find a ride to the center.”

**Simple Reflection:** “Finding transportation most of the time is challenging”

**Complex Reflection:** “It has been challenging to make sure you can make it the center but being able to do it is really important to you”

Your turn to respond reflectively
Example

Older Adult: “I like to be healthy but I don’t have time to participate in this program”

Complex Reflection: “For you the benefits of participating must outweigh the time invested into it”

Your turn to respond reflectively
Example

Older Adult: “That program might be good at helping some people, but I don’t need it”

Complex Reflection: “You see some of the benefits of the program might have for others but are not sure how it may apply to you”

Your turn to respond reflectively
WHAT LISTENING IS NOT
(ROADBLOCKS, FROM THOMAS GORDON)

1. Ordering, directing, or commanding
2. Warning, cautioning, or threatening
3. Advising, suggesting, providing solutions
4. Arguing, persuading with logic, lecturing
5. Moralizing, telling what they “should” do
6. Disagreeing, judging, criticizing, or blaming
7. Agreeing, approving, or praising
8. Shaming, ridiculing, or labeling
9. Analyzing or interpreting
10. Assuring, sympathizing, or consoling
11. Asking questions, probing
12. Withdrawing, distracting, humoring, or changing the subject
Summaries

• Collect several points and relay them back to the person in a summary fashion
• Demonstrates attention and moves the conversation forward

Four main parts:
1. Introduction
   • Let me see if I understand so far…
   • If it’s ok, let me summarize what we talked about …. 
2. Summarize the barriers the person is facing
3. Summarize the positive things they have accomplished
4. Ask the patient if they would like to add anything and what their next steps are
Key points to remember

• Ask Permission
• Be respectful and flexible
• Focus on behaviors not personalities
• Be neutral and non-judgmental
• “No fixing”
• Listen actively
• Accept
• People are more motivated to change when they are in control and have a choice
Thank you!