Starting Conversations with Parents: An Introduction to Motivational Interviewing (MI)

James Carter, Ph.D.
Specialty Behavioral Health
UCSD – Dept. of Psychiatry

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What is MI?

• Counseling approach
  – Both person-centered & directive
  – Collaborative
  – Expecting, exploring, and resolving ambivalence
  – Elicits and builds person’s motivation

• “…it is fundamentally a way of being with and for people--a facilitative approach to communication that evokes natural change.”
  --Miller & Rollnick, 2002
History of Motivational Interviewing (MI)

- Since the 1980s with alcohol abuse
- Alternative to confrontational approach
- Combined with other strategies
  - Education
  - CBT
  - Medication
- Based on multiple theories
  - Focus on person’s unique motivations
  - Internal responsibility for change
  - Reduce reactance
Does MI improve outcomes?

Research showing improved outcomes with:

– Addictions
– Gambling, diet, & exercise
– Medication adherence
– Co-occurring mental disorders
– Homeless teens
– Correctional settings
– Dental programs
  • 100s of controlled trials in scientific journals
Other Reasons for Use of MI

• Can be brief
• Works well with other approaches
  – Menu of options
  – CBT
  – Education
• Strategies for persons:
  – Higher levels of resistance
  – Higher levels of anger
  – Entrenched in patterns
• Reduces staff burnout
MI in Dentistry - Rationale

• Improve patient adherence
  – Brushing
  – Flossing
  – Fluoride varnish
  – Reduce sugary beverages (soda, milk bottle)
  – Use orthodontia (rubber bands, head gear)
  – Stop smoking

• Increase patient satisfaction
  – Patients feel respected and appreciated
  – Invested in care
Dental MI References


MI in Pediatric Dentistry – Example of a Single Study

• MI to Prevent Caries for High Risk Infants
  – 240 infants aged 6-18 months from Head Start Program
  – Stratified and randomized into 2 groups
  – Compared Health Ed. vs. MI (+ Health Ed.) Groups
  – Staff received 10 hour MI workshop + coaching
  – Two year follow-up differences
    • New caries
      – 35% in MI Group
      – 52% in Health Ed. Group
    • Fluoride varnishes
      – $x = 4.1$ in MI Group
      – $x = 0.3$ in Health Ed. Group

1. ($\chi^2 = 5.67$, $p < .02$)

Weinstein et al. (2006) Motivating Mothers to Prevent Caries JADA, 137(6), 789-793.
MI in Pediatrics - Rationale

• Improve parent adherence
  – Med compliance
  – Avoid second hand smoke
  – Nutrition
  – Safety-related behaviors
  – Sun exposure

• Increase patient satisfaction
  – Patients feel respected and appreciated
  – Invested in care
MI in Pediatrics - Reviews


MI in Pediatrics – Example of a Single Study

• MI to prevent passive smoke inhalation
  – 291 parents with children < 3 yo at PCPs
  – Randomized into 2 groups – MI vs. Self-Help
  – Evaluated outcomes at baseline, 3 & 6 months
  • Time x group interaction significant
  • MI group lower nicotine levels at 6 months

Elements of MI

- MI Principles
- MI Spirit
- Elicit Change Talk
- Guiding / Directive Towards Change

OARS

Person-Centered Communication
Person/Parent-Centered Communication (OARS)

- Open-ended questions
- Affirmations
- Reflective listening
- Summaries
Barriers to Person-Centered Communication

- Interpreting, analyzing
- Warning or threatening
- Giving advice prematurely
- Agreeing, approving, praising
- Shaming, ridiculing, name calling
- Ordering, directing, or commanding
- Persuading with logic, arguing, lecturing
- Judging, criticizing, disagreeing, blaming
- Moralizing, preaching, telling patients their duty
Eliciting “Why,” “How,” and “Now”

Open-Ended Questions

– **Why** is this change important to you?
  • And why is that important to you?
  • What else (other reasons)?
– **How** would you go about this change to be successful?
  • What do you see as your options?
  • Tell me more about that.
  • What is the next step for you?
  • Looking at these choices, which seems best to you and why?
– Why is **now** a good time for you to make this change happen?
  • What do you see as the down side of waiting?
  • Any other reasons now is a good time?
  • What are you willing to commit to at this point?
Using OARS with Menu of Options

Menu of Options

• You really care about your son and want the best possible care for his asthma. Which strategies should we talk more about today?
• Can I tell you something else about X? Infections in the mouth and heart are also less likely with X. What do you think about that?
• You know your child best. What do you think the next step should be?
Raising Concerns - RASA

Reflect concerning statement or plan back to patient
Ask permission to share your concern
State your concern using an “I” statement
Ask for patient’s response to your concern

Source:
NIAAA COMBINE Manual
Example of Raising a Concern using RASA Model

**Hygienist**

You don’t check his brushing every time because baby teeth aren’t really that big of a deal in your book.

Can I share my concern about this situation?

I’m concerned that these infections in his baby teeth will place him at risk for more infections for his whole life.

What have you heard about that?

**Patient**

Yeah. It’s been a battle to get him to brush.

Sure.

Silent.

I was worried I may be starting bad habits, but I didn’t know baby cavities could cause adult cavities. How does that happen?
Giving Unsolicited Advice or Information:
Ask, Ask, Tell, Ask

Ask – What do you already know about…?  
Ask – Can I tell you something else?  
Tell – I wanted to let you know that …  
Ask – What do you make of that?

Source: NIC OERS Manual
Example of Giving Advice Using AATA Model

**Dentist**
- What is your plan so far for increasing your daughter’s flossing?
- That’s a really great commitment. Can I add a suggestion to your plan?
- I recommend that you create a reward system for her for the first month to get the habit started.
- What do you think about that idea?

**Patient**
- I plan on telling her that she has to do it every night. I’ll be checking her.
- Of course.
- Silent.
- I think she would like it. But what have you found that works…I mean what should I reward her with?
How do you guide or direct parents using parent-centered communication strategies?
When using MI, you selectively respond to parents to elicit and strengthen change talk.
## Change Talk:
**Patient Speech that Favors Change**

**D-A-R-N C-A-T**

<table>
<thead>
<tr>
<th>Category</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desires</td>
<td>“I want my daughter to be healthy.”</td>
</tr>
<tr>
<td>Abilities</td>
<td>“I can be very stubborn.”</td>
</tr>
<tr>
<td>Reasons</td>
<td>“Diabetes runs in our family.”</td>
</tr>
<tr>
<td>Needs</td>
<td>“I need to find an affordable way.”</td>
</tr>
<tr>
<td>Commitments</td>
<td>“I promise to smoke outside when she is home.”</td>
</tr>
<tr>
<td>Activation</td>
<td>“I got her some new shoes.”</td>
</tr>
<tr>
<td>Taking steps</td>
<td>“I asked my friends about their kids.”</td>
</tr>
</tbody>
</table>
“We’ve been taking the weight issue more seriously since the last time we were here. But he doesn’t like changing what he eats and he fusses over the healthy foods we give him. It’s a constant battle. And it’s kind of the same thing with the exercise. He is involved in some sports now, but as soon as he gets home, he goes right to the couch and watches TV. I’m not sure he can get any thinner – it may be in his genes.”
Eliciting “Why,” “How,” and “Now”

Scaling Techniques - Importance

- “On a scale of 0 to 10, with 10 being the most, how important is it for you to floss?”

0 1 2 3 4 5 6 7 8 9 10

- “Why did you choose X and not (X – 3)”?
- Repeat back reasons and then ask – Any other reasons?
Eliciting “Why,” “How,” and “Now”

Scaling Technique - Abilities

• “On a scale of 0 to 10, with 10 being the most, how confident are you that you could floss every day if you really wanted to do it?

0 1 2 3 4 5 6 7 8 9 10

• “Why did you choose X and not (X – 3)”?
• Repeat back reasons and then ask – Any other reasons?
Eliciting “Why,” “How,” and “Now”

Scaling Technique - Readiness

• “On a scale of 0 to 10, with 10 being the most, how ready are you to start your new flossing routine today?

  0 1 2 3 4 5 6 7 8 9 10

• “Why did you choose X and not (X – 3)”?
• Repeat back reasons and then ask – Any other reasons?
Spirit of MI

• Autonomy .............. vs. Authority

• Collaboration ..... vs. Confrontation

• Evocation ............... vs. Education
Audience check in

• What was difficult about maintaining MI Spirit?
General MI References


– Slides online at www.SpecialtyBehavioralHealth.com