



Winnipeg Regional
Health Authority
Caring for Health

Office régional de la
santé de Winnipeg
À l'écoute de notre santé

Health Behaviour Change

Part 2: In Person Practical Workshop



Welcome!

- Introductions
- Housekeeping notes





Today's Topics

- Stages of Change
- Change Talk
- DARN-CAT
- Reflective Listening, Open Ended Questions
- Scaling Questions
- Decisional Balance
- Rolling with Resistance
- Giving Advice



Live Audit

Experience : how many years have you been in your current position?

<1 yr

<5 yr

>5yr

Frequency : what % of your work day is spent with people on HBC?

30%

60%

90%

Confidence: what is your level of confidence in talking about behaviour change with people?

low

med

high

Training : have you ever had specific training in HBC?

no

yes

Resistance: have you ever encountered a person who is resistant to your attempt at HBC?

no

yes

After attending today's session the participant will:

- Review the Trans-theoretical Stages of Change and identify a person's stage of change.
- Acquire knowledge regarding stage matched strategies that support change.
- Identify the language of change.
- Apply Motivational Interviewing strategies such as reflective listening and open ended questioning to elicit change talk.

Spirit of Motivational Interviewing

Collaboration - genuine interaction between a person and a care provider.

Evocation - eliciting a person's own motivation or reasons for change.

Supporting Autonomy - it is the person's decision whether they will make change, not the care providers'.

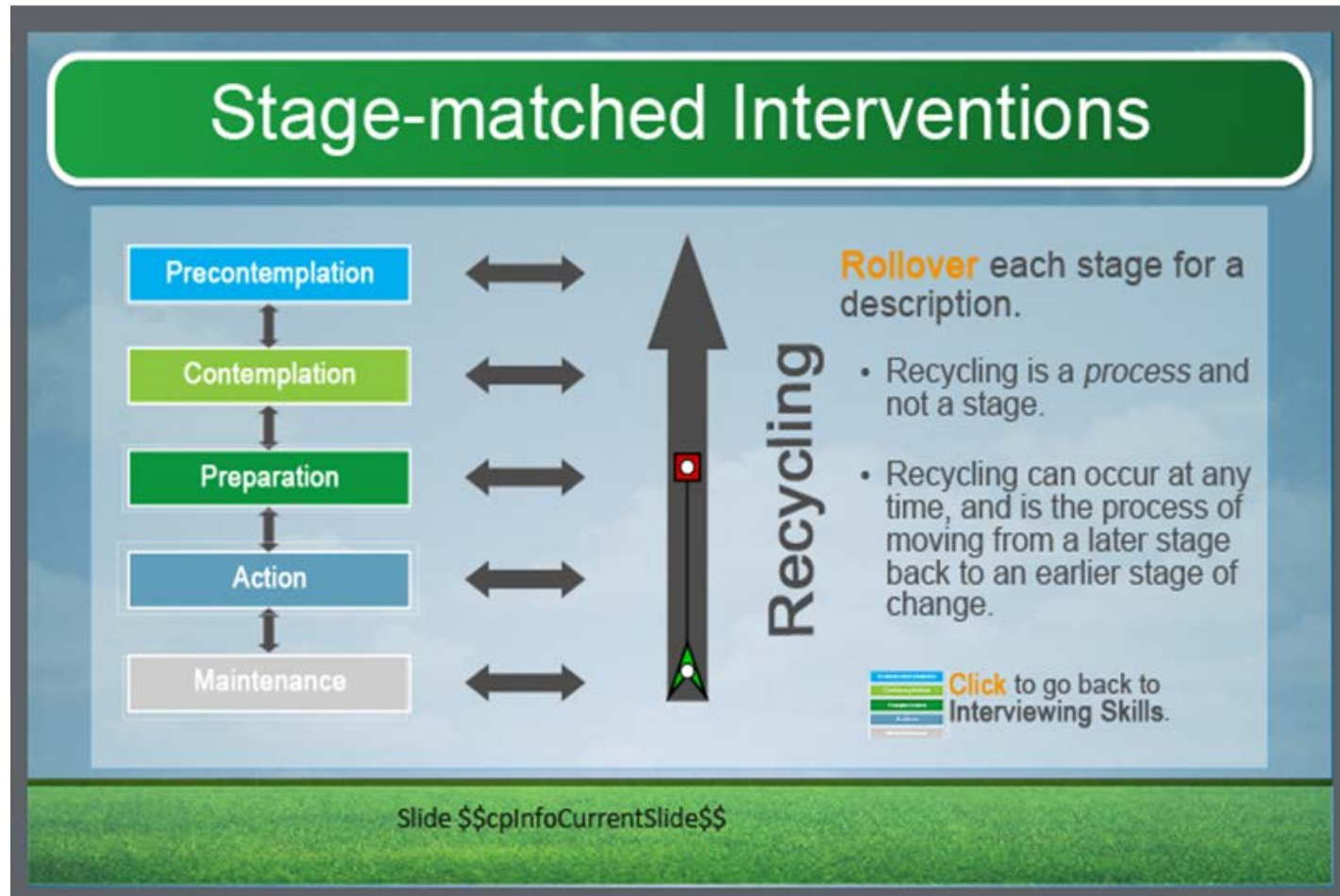


Click key to go back to Key Concepts of MI.

Empathy - 3 Minute Video

<https://www.youtube.com/watch?v=1Evwgu369Jw>

Stages of Change





Exercise: Transtheoretical Model of Change

Eliminate red meat from your diet and double the number of fruits and vegetables that you eat?

- I Don't Need to Change
- I Might Change
- I Will Change, Just Not Now
- I Am Changing
- I Have Already Changed



Responding to Different Stages of Change



Pre-contemplation



| State of Readiness | Client Goal | DO | DON'T |
|------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| I can't/won't/not interested | Think about reasons for change | <p>Engage in conversation that stimulates:</p> <ul style="list-style-type: none"> • Consciousness raising • Emotional arousal <p>Decisional Balance: Good/Not so Good things of current behaviour only</p> | <p>Argue for change</p> <p>Give advice</p> <p>Use the “Expert Card”</p> |

Contemplation



| State of Readiness | Client Goal | DO | DON'T |
|--------------------|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| I might | Reflect on the discrepancy between long term goals and present behaviour | <p>Focus on short term results</p> <p>Make comments on the small changes or markers of success at every session</p> <p>Decisional Balance: Good/Not so Good things about changed behaviour</p> | <p>Give advice</p> <p>Bring in your own experience</p> <p>Try to teach a new skill</p> <p>Ignore the down side of change</p> |

Preparation



| State of Readiness | Client Goal | DO | DON'T |
|----------------------|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| I will, not just now | See change as possible Create a plan of action | Clarify goals Explore options (and consequences) Encourage small steps Problem solve around the barriers | Rush to action Assume ambivalence is gone Solve the problems for them Talk about your own experience |

Action



| State of Readiness | Client Goal | DO | DON'T |
|--------------------|-------------------|-----------------------------------------------------|----------------------------------------------------------------|
| I am | Skill acquisition | Monitor small steps | Assume it is solved |
| | Social support | Provide specific feedback Celebrate success! | Provide all the solutions Rely only on external rewards |

Maintenance



| State of Readiness | Client Goal | DO | DON'T |
|--------------------|----------------------------------------------------------------|------------------------------------------------------|------------------------------------------------------------------------------|
| I am changed | Problem-solving skills Social and environmental support | Plan for a lapse Re-enforce longer-term goals | Assume initial action means permanent change Judge a lapse or relapse |

Recycling



| State of Readiness | Client Goal | DO | DON'T |
|--------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| | Return to Contemplation Stage | <p>Frame as learning</p> <p>Explore how the lapse occurred and strategies for next time</p> <p>Express empathy</p> <p>Explore ambivalence</p> | <p>Label as their failure</p> <p>See your work as failed</p> <p>Lecture, criticize, blame</p> <p>Give advice</p> <p>Give up hope</p> |

Talking about Change

- When talking about potential changes to health behaviour, people will use language that both argues for and against making the change. They often experience both desire to change and stay the same.
- Depending where they are on the stages of change regarding a particular behaviour will influence the type of language they use.

Change Talk

- Client Statements that indicate an inclination or a reason for change.
 - I quit for a few months a while back
 - I need to stop smoking
 - I would feel so much better if I watched my blood sugar
 - I know that I should eat better



Sustain Talk

- The client's words or statements that argue against change
 - I can't do it
 - I've failed so many times
 - It's hard to stop
 - I don't think it is that much of a problem



Change Talk

- Guiding principle is to have the person, rather than the helper voice the arguments for change. (Miller & Rose, 2009)
- Arguing for change = Arguing against change
- More knowledge may not be the answer



Identifying Change Talk

Reflect when the client indicates:

- **D**esire
- **A**bility
- **R**eason
- **N**eed
- **C**ommitment
- **A**ctivating
- **T**aking Steps



DARN - CAT

Desire = indicates want/desire to change, but stops short of commitment

Ability = indicates client feels they can make changes, if they make up their mind to do it.

Reason = client sees a specific advantage to making behaviour change.

DARN – CAT

Need = necessity to change, problems with the status quo

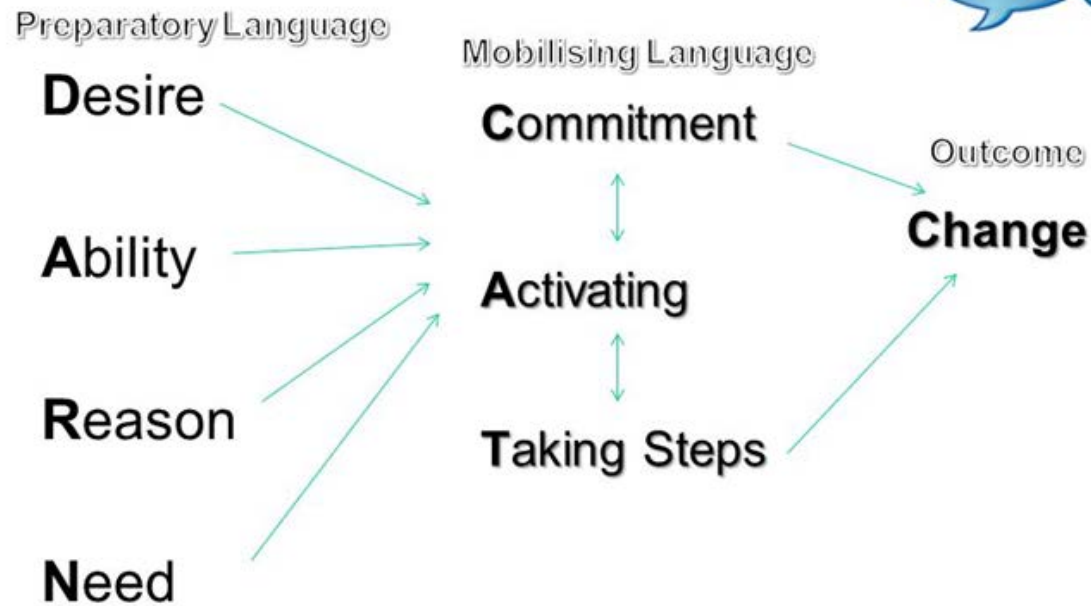
Commitment = action words that communicate intention to take steps

Activating=getting ready, gathering resources

Taking steps = client describes steps already being taken in support of a specific goal



Change Talk





Identifying Change Talk

Drumming for Change Talk Exercise





Eliciting and Reflecting Change Talk: OARS

Open Ended Questions

Affirmations

Reflective Listening

Summaries





Reflective Listening

- The most important skill in HBC.
- Saying back what they have said, briefly waiting to hear their response
- People don't always express what they really mean (fear, judged, lack of awareness, still formulating their thoughts, can't put thoughts into words)

Reflections

- Reflections help person and listener to understand what they really mean
- They are a guess/a hypothesis about the underlying meaning and feelings – it's okay to be wrong, people will clarify for you.
- Can help express accurate empathy, reduce resistance, support self-efficacy, evoke change talk, and be person centered.



Reflections

- Reflections are directive and are based in value judgment/a choice.
- Reflections are intentional – consciously choosing what to reflect to emphasize focus on change talk.

How to offer reflections:

- Repeating – saying what they said
- Rephrasing – using a few different words
- Paraphrasing – using entirely different words, inferring meaning
- Reflection of feeling – entirely different words reflecting underlying feeling

Reflections Example

“I don’t think I can quit smoking”

Possible reflections:

- “You don’t think you can quit smoking.”
- “You feel overwhelmed with the idea of quitting.”
- “Quitting does not seem possible right now”
 - “You’re considering quitting, but are not yet sure if you will be successful”



Reflections - Exercise

“I would love to eat better, but I’ve tried cutting out sugar before and it has never worked.”

- Repeat
- Rephrase
- Paraphrase – meaning
- Reflection of Feeling



Reflections

Double Sided Reflections

On one hand.....

AND

On the other hand.....



Reflections Exercise

- In pairs – take turns
- The talker – take turns talking about something from the “Real Life Subjects for Enactments” handout.
- The listener - attempt to respond using reflections when possible to reflect/elicit change talk. You can use questions, but try reflections when you can
- Discuss your experience in each role



Eliciting Change Talk

- Open Ended Questions
 - Questions that cannot be answered with a simple yes or no.
 - Let's Practice using the Handout.



Scaling Questions

On a scale of 1-10...

- ...How important is it for you to make this change.
- ...How confident are you that you can make this change.
 - How come it is not lower than that?
 - What would need to happen for it to move to a higher number?
 - 7 is the magic number.



Scaling Questions Exercise

- Partner off
- Take turns practicing the use of scaling questions with each other



Eliciting Change Talk

- Explore the Good Things and Less Good (Not so good) things about present behaviour.
- Language can reduce resistance. People do not always view a behaviour as “bad”, but can acknowledge “not so good things” about it.
- Explores what sustains a behaviour and then shifts to eliciting change talk (DARN-CAT)

Decisional Balance

- Good things + Less Good things - staying the same
- Good things + Less Good things - making a change
- Caution – pros and cons must be theirs not ours

| | Good Things... | Less Good Things |
|-----------|----------------|------------------|
| No Change | start here | |
| Change | end here | |

- Try it for yourself! Take a moment in pairs to complete a worksheet regarding a change you are contemplating.



Eliciting Change Talk

- Ask for elaboration of change talk
- Ask about extremes – What's the worst outcomes if things stay the same, What may be the best outcomes of making a change.
- Looking back and Look forward



Rolling with Resistance

- If presented with reasons to change, they will tend to argue to stay the same
- Don't take it personally, but do...
- More education does not equal change – there are other factors at play



Rolling with Resistance

- Simple Reflection
- Double Sided Reflection
- Shifting Focus – away from the barrier
- Emphasizing Personal Control
- Siding with the negative



Giving Advice

- Only in three situations:
 - 1) If they ask for it
 - 2) If you ask permission to give it
 - 3) If their life or safety is in significant danger



Giving Advice

- Let them know they have choice to take or leave your advice
- Whenever possible give a “menu of options”





Giving Advice

- Before giving advice, first ask yourself:
- “Have I elicited the person’s own ideas and knowledge on this subject?”
- “Is what I am going to convey important to their safety, or likely to enhance their motivation to change”.



Video

- Youtube video – The effective physician
- <https://www.youtube.com/watch?v=URiKA7CKtfc>



What's Next?

- What benefits might the population you work with experience as you use Motivational Interviewing?
- Notice any ambivalence you might be feeling about taking next steps.
- What is one thing you would like to integrate into your practice starting today?
- How will you start the process of integration?
- What's the next step in cultivating a deeper Motivational Interviewing practice?

Questions or Comments?



Feedback

- You will all receive a request to fill out an online survey about your feedback for today's session. Please fill that out as your feedback is very valuable in the ongoing development of both trainers and content.

Acknowledgments

This in-person workshop was developed by:

Chris Hildebrand, BA(Hons.), BSW, MSW, RSW

With important contributions from members of the HBC Training Working Group:

Colleen Einarson, Caitlin Keyzer, Rebecca Neto, Joanne Kilgour, Tanya Kozera, Joanne Klassen, and Pat Garbutt.

References and Resources

- Motivational Interviewing Website: <http://www.motivationalinterviewing.org/>
Website has reference material, video, useful links.
- Miller, W., and Rollnick, S. (2002). *Motivational Interviewing: Preparing people for change* (2nd Edition). New York: Guilford Press.
- Miller, W.R. & Rollnick, S. (2009) *Ten things that Motivational Interviewing is Not* *Behavioural and Cognitive Psychotherapy*, 2009, 37, 129-140.
- Miller, W.R. & Rose, G. S. (2009) *Toward a Theory of Motivational Interviewing* *American Psychologist*, 2009.
- Rollnick, S., Miller, W.R., & Butler, C.C. (2008). *Motivational Interviewing in health care*. New York: Guilford Press.