

SLIDE 1:

Motivational vs. Manipulative Interviewing: Keeping The Boundaries Real

Maryland Rehabilitation Conference

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SLIDE 2:

Learning Objectives

- Understand and apply the Stages of Change model
- Identify major components of Harm Reduction
- Articulate the elements of Motivational Interviewing
- Demonstrate Harm Reduction and MI strategies in practice

Agenda

- Intros
- Stages of Change
- Harm Reduction
- Elements of MI
- Practice!

SLIDE 3:

The wizard of Oz never gave the Lion, Tin Man, or Scarecrow that which they did not already possess

- America

SLIDE 4:

What do we know about behavior change?

- It is difficult!!!
- It is time consuming

- It happens at an individual pace
- Knowledge alone is insufficient
- Relapse is normal and expected
- “The devil you know is better than the angel you don’t.” - African proverb

SLIDE 5:

“Motivational” Interviewing

- Reflective
- Exploratory
- Supportive

SLIDE 6:

Models of Treatment

- Medical
- Psychodynamic
- Behavioral
- Cognitive
- Humanistic
- Eclectic

SLIDE 7:

Maslow’s Hierarchy of Needs

Graphic: Material is presented in a pyramid. Reading from top to bottom:

- Self-Actualization: achieving one’s full potential, including creative activities (Self-fulfillment needs)
- Esteem needs: prestige and feeling of accomplishment (Psychological needs)
- Belongingness and love needs: intimate relationships, friends (Psychological needs)

- Safety needs: security, safety (Basic needs)
- Physiological needs: food, water, warmth, rest (Basic needs)

SLIDE 8:

Humanistic/Existential Model

- Carl Rogers
- Personal growth leads to self-fulfillment
- Incongruent
- Unconditional positive regard
- Empathy
- Personal responsibility, client/person-centered therapy
- Reflection

SLIDE 9:

Stages of Change

Graphic of the Stages of Change model.

Enter at Pre-contemplation.

- Pre-contemplation
- Contemplation
- Determination
- Action
- Maintenance

Exit & re-enter at any stage.

Relapse is an option between Action and Maintenance.

SLIDE 10:

Motivational Interviewing Defined

- “Arranging conversations so that people talk themselves into change, based on their own values and interests.”
- “A collaborative conversation style for strengthening a person’s own motivation and commitment to change.”

- “Kindness with skill.”

Source: Miller and Rollnick “Motivational Interviewing 3rd Edition”

SLIDE 11:

Culture, Minorities & MI

- Less likely to use mental health services
- More likely to disengage and terminate
- Feel judged and misunderstood
- Research is sparse with mixed findings

SLIDE 12:

Law of Similarity

- Helps draw out and understand participant’s priorities and values
- Is not an instant fix
- Goodness of fit

SLIDE 13:

Culturally Sensitive MI Strategies

- Share personal information (trust)
- Inquire about their ethnic background
- Acknowledge any struggles (shame, resentment)
- Become aware of stigma and stereotypes, intersection
- Strengths based (affirmations)
- Enroll them in their own recovery
- Support circles/groups
- Know your limits

SLIDE 14:

OARS – The “M.I. Toolbox”

- Open-Ended Questions

- Affirmations
- Reflections
- Silence and presence

SLIDE 15:

MI Strategy: Scaling

Helps them chart their own progress

- “On a scale of 1-10, how are you doing with _____”
- “Wow! That’s pretty high! Why isn’t it lower?”
- “On a scale of 1-10, how much do you want to change _____”
- “What would it take to get to _____?”

SLIDE 16:

Open-Ended Questions Practice

Follow up these statements with an open-ended question to find out more about what’s going on:

- I can’t stand my roommate...he’s always pushing me to the edge.
- My landlord is constantly nagging me!
- I don’t even understand why we have to do this.
- When the temp agency didn’t have any work again, I came home and really wanted to drink, but I didn’t.

SLIDE 17:

Open-Ended Questions Practice

Reframe these judgmental statements into open-ended questions:

- You have to tell me now where you are going to live.
- You’re depressed. You really should see your psychiatrist!
- Your time in the program is almost up, so you’ll be on your own.
- I need you to go to the Social Security office and get that document you said you were going to do last week.

SLIDE 18:

Reflections Practice

How would you reflect this statement back to the participant?

- I'm not going to go to the doctor today. I don't feel well, but I always just leave that place feeling even worse. What are they going to do anyway?
- I hate my landlord! He's always yelling at me and trying to take me to court when my rent is one day late, but he never makes any of the repairs I need!
- You: So, what goals do you want to work on this month?
Participant: [silence]

SLIDE 19:

Affirmations Practice

Jan is frequently in trouble with the law and causing problems around her apartment complex due to erratic behavior. She does not take her prescribed medication to manage her bipolar disorder in the morning because it makes her feel too tired to do the things she needs to do. When she remembers, she will take the correct dosage in the evening prior to going to sleep; but she often loses track of this, too, amidst her numerous activities.

SLIDE 20:

Affirmations Practice

Bill has just missed his third scheduled appointment with you. You've tried to call him but his phone is out of minutes. It's 4:45 pm and you are wrapping up for the day and hear a knock on the office door. It's Bill, and he is anxious to complete the Social Security application you agreed to go over with him. Bill apologizes for missing the previous meetings but says he had a doctor's appointment he needed to attend. You specifically asked Bill prior to

scheduling the third meeting whether he had conflicts and he said “No.”

SLIDE 21:
Thank You!

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