

Bruce A. Berger Ph.D

Health Behavior Change: Effectively Using Motivational Interviewing

Description: The purpose of this program is to assist participants in developing a dialogue with patients that assesses patients' understanding of their illness and its treatment and their readiness to adopt behaviors necessary for changes associated with treatment adherence, lifestyle changes, nutritional support, healthy choices, and disease management. A very specific and validated method for accomplishing this, motivational interviewing, will be taught and demonstrated. Motivational interviewing is a patient-centered process of interpersonal skills used to understand patients' and caregivers' representations of illnesses and treatment and healthy behaviors to bring patients to making a commitment to change. The basic idea behind motivational interviewing is that patients and caregivers are often ambivalent or resistant about change. Ambivalence and resistance affects motivation to change and the development of appropriate coping strategies. Motivational interviewing is extremely useful because it teaches the health care provider to explore the patient's ambivalence, resistance, and concerns. It focuses its attention on dealing with resistance and assisting patients in moving through the necessary stages of change.

Objectives: After attending this workshop participants will be able to:

- ❖ Explain the spirit of motivational interviewing.
- ❖ Identify key factors in assessing a patient's motivation to adhere to a medication regimen.
- ❖ Explain why the principle mode of health care provider-patient communication is often ineffective.
- ❖ Understand readiness for change, ambivalence and dissonance and their role in motivation.
- ❖ Discuss the principles of motivational interviewing.
- ❖ Distinguish between arguing, rolling with resistance, and developing discrepancies.
- ❖ Incorporate principles of motivational interviewing into their practices (and their daily lives).

Post – Test Questions

1. Persuasive communication is particularly ineffective in patients who?
 - a. Are taking action.
 - b. Not ready to take action**
 - c. Ask for encouragement
 - d. All of the above

2. Which of the following are skills used in motivational interviewing?
 - a. Express empathy
 - b. Avoid argumentation
 - c. Support self-efficacy
 - d. All of the above ARE skills that are used.**

3. Motivational interviewing is used to:
 - a. Assess a patient readiness to engage in a behavior.**
 - b. Convince people to engage in healthy behaviors.
 - c. Motivate patients to change.
 - d. All of the above.

4. A patient says, “I am so sick of taking so much medicine. First my arthritis, then high blood pressure...then what? Which of the following responses is NOT empathic?
 - a. Mrs. Jones, it’s going to be all right.**
 - b. I know you feel overwhelmed. I will work with you on your blood pressure, just like I did on your arthritis.
 - c. You have had a lot happen at one time.
 - d. You must feel like it’s been one thing after another for you.

5. Which of the following is true of decisional balance?
 - a. The benefits must outweigh the downside for a patient to engage in a behavior.
 - b. It is qualitative and quantitative.
 - c. Telling a patient the benefits of a behavior does not work if he/she is not ready to change.
 - d. All of the above are true.**

Resource List

Berger, Bruce A., and Hudmon, Karen S., "Readiness to Change: Implications for Patient Care," Journal of the American Pharmaceutical Association, May/June, 1997, pp. 321-329.

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Rollnick S, Heather N, Bell A. Negotiating behaviour change in medical settings: The development of brief motivational interviewing. *Journal of Mental Health*. 1992;1:25-37.

Rollnick, S., Mason, P, and Butler, C., **Health Behavior Change**, Churchill Livingstone, London, 2003.

Rollnick, S., Miller, W.R., Butler, C.C. **Motivational Interviewing in Health Care**, Guilford Press, New York, NY, 2008.