

Motivational Interviewing Part 2

Developing Discrepancy Rolling with Resistance Supporting Self-Efficacy

The ability of a therapist to identify and build upon existing discrepancy within a client's beliefs is central to Motivational Interviewing. Discrepancy itself serves as a motivational tool. This refers to a client's discrepancy between their current (or problematic) behaviours, and their goals for the future. The idea being that by highlighting this discrepancy in a supportive and reflective way, the client begins to accept the potential for alternative ways of thinking and behaving. The therapist does this by paying close attention to a client's arguments for change, rather than their arguments for sustaining current behaviours. By focussing on these arguments, a therapist can use the client's arguments for change as a way forward from ambivalence.

One way to identify these discrepancies is to be able to identify 2 key types of communication:

- Change talk
- Sustaining talk

Change talk is any statement, or part of a statement that highlights a client's belief, desire, ability, or commitment to change their behaviour.

Sustaining talk on the other hand, is any statement to the contrary. These are statements that seek to sustain the current behaviour, and maintain the status quo.

It is important that we keep a keen ear during a session with a client, as change talk may be subtle, and often interwoven into a broader sentence.

Let's take a closer look at the different types of change talk we should look out for during a Motivational Interviewing conversation. The acronym to remember here is DARN-C:

- **Desire**
 - Statement about PREFERENCE for change
 - "I would like to be able to have fun without drinking"
- **Ability**
 - Statement about SELF-CAPACITY
 - "I could quit if I really put my mind to it"
- **Reasons**
 - Statements that are SPECIFIC ARGUMENTS for change
 - "Every time I quit cannabis, my concentration and focus improve"
- **Need**
 - Statements that outline a FEELING OF OBLIGATION
 - "If I return one more dirty urine sample the judge might breach my parole"
- **Commitment**
 - Statements made about ACTION TO TAKE
 - "I feel good about my plans to quit, Monday is the day"

As we can see, the further down the list we get, the more obvious the change talk becomes, and the stronger the motivation. The reason for the “C” being separate in the acronym DARN-C, is because the C implies an acceptance and pre-existing commitment to change, and thus a different approach would be taken by the therapist (more focussed on planning, and attention to avoiding relapse rather than aiming to increase motivation for initial change).

Let’s look at an example of change talk in action, and how we might respond in conversation:

“Now is definitely not the time for me to try and quit smoking pot. I mean don’t get me wrong, I could quit if I put my mind to it, but with exams coming up, I’d be crazy to try and quit now”.

Embedded within this statement are examples of both change talk and sustaining talk. The client makes clear sustaining statements “Now is definitely not the time for me to try and quit smoking pot”, “...with exams coming up, I’d be crazy to try and quit now”. However, the client also makes a clear statement about their **ability** to change their behaviour by saying “I could quit if I put my mind to it”.

We might then use a reflective statement to focus on this idea of change talk:

“You are anticipating your upcoming exams being a stressful time for you, and you’ve found smoking pot helpful in dealing with this stress. At the same time, you have considered quitting (or reducing) your pot use, and are confident you could do this if you really put your mind to it. I’m wondering if you could tell me hypothetically how this scenario might look if you did put your mind to reducing your pot use. What sort of things might you start doing, or stop doing?”

In this example we have achieved a few key objectives. We have been balanced and unbiased in our reflection (by reflecting back both sides of the discrepancy). We have been fair in reflecting both sides by using a statement like “At the same time...” rather than using the word “But” which would essentially negate the first point, potentially leaving the client feeling invalidated. We have identified the change talk and focused in on this by eliciting further conversation around this point. Essentially, we have guided the client to considering in more depth his/her ability to change, without broadcasting that this is our agenda.

Identifying and developing upon change talk can be very difficult when working with a pre-contemplative client (see Episode 6: Stages of Change). Below are some tips for how to elicit, or draw out potential change talk. NOTE: It is important to vary these strategies up so as not to create a stale, predictable feel about the conversation.

- Scaling questions
- Explore decisional balance
- Look back
- Look forward
- Elaborate
- Explore goals & values

Ask scaling questions

- E.g. “On a scale from 1-10, how confident do you feel that you could reduce your cannabis use?”
- **TIP:** If the person returns a high score (8 or 9) reflect and enquire for further information. If the person returns a low score (2 or 3) you can enquire as to why they didn’t return a score of 1 or 2 marks lower. E.g. “You returned a score of 3/10. I’m curious why not a 2, or a 1/10?” This encourages the client to consider arguments for change. NEVER ask why the client didn’t rate higher, as this will do the opposite, and encourage the client to come up with arguments against changing.

Explore decisional balance

- Similar to a standard Pro's & Con's list, except we are enquiring for both sides of the argument. I.e. Let's say the 'change' in this example is quitting smoking. This exercise would involve exploring the pro's for quitting, and the con's for quitting. We would also explore the pro's for not quitting, as well as the con's for not quitting. Be sure to explore the responses the client gives you in a curious way, rather than trying to use the information to make a point or statement. The power of this exercise is in the process, not the finished result.

	Change	Not Change
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Looking back

- Asking the client to think back to a time when they had achieved their goals, or were engaging in desirable behaviours.
- "Can you tell me about time when you pushed yourself to achieve a goal that made you anxious or nervous?"

Look forward

- Asking the client to consider what their future might look like if they changed their behaviour, and if they did not change their behaviour. It is sometimes best to keep the timeframe relatively short to make the example more meaningful. Young people especially do not connect well with examinations of their life 50 years from now.
- E.g. "Can you tell me a bit about how your life might look at the end of the school term if you decided to stop smoking pot."

Elaborate

- Simply asking the client to elaborate on elements of their story: how/in what ways/can you tell me more about.

Explore goals & values

- Asking the client what their specific goals are in relation to their behaviours. Also enquiring as to their values (e.g. loyalty, family, humour, dedication etc). This can be a valuable way to anchor the person into their motivations.

CORE ELEMENT 4 - ROLLING WITH RESISTANCE

In Motivational Interviewing, resistance to change is not only viewed as a normal and expected part of the change process, but also a valuable source of information about a client's perspective. In this regard, resistance is seen as an opportunity rather than an obstacle. When considering change, clients may experience excitement at the prospect of change. They may also however experience fears or anxieties about change. These can include fears of failure, new responsibilities, coping with stress, or simply fear of the unknown.

As we have discussed in previous sections, it is the therapist's job to accept this apprehension with compassion, balance and curiosity. When resistance to new ideas occurs (including the idea of change) it is met with empathy and understanding. It can be a powerful experience for clients to exhibit resistance, even argue for a problem to persist, and have the therapist respond with compassion and a genuine interest in their point of view. By **rolling** with this resistance, the client is able to move more easily into a place of openness to possible change.

Below are some different forms of resistance a therapist may face when working with a client:

Arguing Challenging Hostility	Interrupting Taking over Cutting off
Ignoring Inattention No response Side-tracking	Denying Blaming Excusing Minimizing Pessimism Reluctance Unwilling to change
Charming Over-agreeableness 'ego massaging'	

Here are some tips for rolling with resistance:

- Using reflective statement
 - Reflecting with the clients thoughts and emotions. Also with the other side of their ambivalence
- Clarification
 - Verify your understanding matches the clients views
- Shift focus
 - Gently shift focus away from sticking point back onto important events
- Emphasize the clients choice and control
 - At the end of the day, it is up to the client what they ultimately choose. You are not there to force them, merely support them to understand themselves and their motivations in clearer ways.

CORE ELEMENT 5 - SUPPORT SELF-EFFICACY

Self-efficacy is the fuel our success feeds off. Influential psychologist Albert Bandura described self-efficacy as an individual's belief in their capacity to execute certain tasks. In the context of motivational interviewing, self-efficacy takes into account confidence and self-belief that can have a significant impact on a person's ability to successfully navigate challenges, including how they cope with setbacks (e.g. drug or alcohol cravings). Self-efficacy is built upon our past experiences with personal success, experience seeing others succeed, the encouragement we receive from others as well as how well we are feeling physically and mentally.

Self-efficacy can be an important building block to strengthening resolve, and ultimate success when it comes to navigating challenges and coping with cravings and lapses.

Essentially, if someone experiences a strong craving and manage this without using, then self-efficacy is strengthened. This gives the person additional support for the next time they experience a craving, as they now have experience and evidence that they can manage a craving without succumbing to it and using. On the other hand, if someone has a strong craving and does use, then self-efficacy may suffer. This isn't to say that if a lapse occurs, it's a disaster. Lapses are a completely normal and expected part of the process. What is important to remember is that with every success (no matter how small), our resolve, and self-efficacy are getting stronger.

ACKNOWLEDGEMENTS:

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