

Motivational Interviewing Refresher

Topic 3: Eliciting "Change Talk" and Commitment

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Motivational Interviewing Overview

Two key goals of MI that are directly addressed during a brief intervention are to:

- Help resolve ambivalence
- Encouraging “Change Talk”

Ambivalence: is having positive and negative considerations that have about equal weight and shift back and forth, keeping an individual from making a decision.

“Change talk” – statements said by an client that favor changing unhealthy behaviors and describe the reasons for and advantages of changing.

Eliciting Change Talk

- ❑ It is rare for clients to walk into a clinical encounter ready to change their lives.
- ❑ Clients may not have the insight or motivation to change behaviors that are not seen as a problem such as their use of substances.

The practitioner is like a guide or coach to help them figure out why they want to change and create a plan based on their personal reasons and motivations to change.

Eliciting Change Talk

- ❑ The practitioner **can't** make a client change.
- ❑ You **can** stimulate their internal motivations to modify behavior or initiate new ones.
- ❑ You **can** help a client verbalize the reasons for and advantages of changing behaviors that are unique to them by eliciting “change talk”.
- ❑ Discussing change that may not occur now but could occur in the future is valuable.



Change talk – statements said by a client that favor changing unhealthy behaviors and describe the reasons for and advantages of changing

Eliciting Change Talk: Examples

“I know I have to stop drinking. My grades are suffering, and I don’t want my parents to see me as a drunk.”

“I really thought I had my drinking under control, but I can’t seem to stop this depression I have been in. Maybe I will feel better if I get this drinking under control.”

Eliciting Change Talk (cont.)

Change talk indicates the client is moving forward in the process of change. A practitioner can highlight and encourage change talk by recognizing it when verbalized and appropriately responding. There are several ways to elicit change talk.

1 Ask evocative questions

2 Use readiness rulers

3 Explore the status quo

4 Ask for elaboration

5 Ask about extremes

6 Look backwards

7 Look forwards

8 Explore goals and values

Eliciting Change Talk (cont.)

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Ask Evocative Questions

Evocative questions are open-ended questions that elicit change statements from the client.

5 categories of Evocative Questions (**DARN-C**):

DESIRE TO CHANGE

“Why might you want to make a change?”

ABILITY TO CHANGE

“How might you go about making this change?”

REASONS TO CHANGE

“What are some advantages of stopping use?”

NEED TO CHANGE

“What makes you think you need to do something?”

COMMITMENT TO CHANGE

“When will you take the next step to make this change?”

Ask Evocative Questions: Evoking statements about **DESIRE** to change:

- ❑ *“Why might you want to make a change [quit, cut back] in how much you use marijuana?”*
- ❑ *“What would be some benefits if you cut back on how much you use marijuana?”*
- ❑ *“In what ways has your marijuana use been a problem for you?”*
- ❑ *“I can see that you are feeling stuck, frustrated, and discouraged at the moment. What is going to have to change?”*
- ❑ *“To what extent would you like to make changes in your use of marijuana?”*
- ❑ *“What, if anything, worries you about your current pattern of marijuana use?”*
- ❑ *“If you reduced or stopped using marijuana, what would be better? What would be worse?”*
- ❑ *“How difficult would it be for you to cut back or stop using marijuana?”*
- ❑ *“What do you wish were different about your life/situation right now? How does using marijuana fit into the picture?”*

Ask Evocative Questions: Evoking statements about **ABILITY** to change:

- ❑ *“How might you go about making this change [if you decided to]?”*
- ❑ *“What is the first step you would take to make a change in your use of alcohol?”*
- ❑ *“What encourages you that you can change if you want to?”*
- ❑ *“When else in your life have you made a significant change like this? How did you do it?”*
- ❑ *“What methods would you be willing to try that may work for you to change your drinking?”*
- ❑ *“What plan do you have to make the change happen? What methods can you use?”*
- ❑ *“What personal strengths do you have that will help you succeed?”*
- ❑ *“What gives you confidence that you can stop drinking?”*
- ❑ *“Who could offer you helpful support in making this change? In what ways?”*

Ask Evocative Questions: Evoking statements about **REASONS** to change:

- ❑ *“What are some disadvantages of your substance use staying the same?”*
- ❑ *“What are some of the best reasons you can think of to stop using opioids?”*
- ❑ *“How has your use of oxycodone affected your school performance or other important things in your life?”*
- ❑ *“What are some advantages of stopping using heroin?”*
- ❑ *“How would things be better with your parents if you cut back or stopped using prescription pain relievers?”*

Ask Evocative Questions: Evoking statements about **NEED** to change:

- ❑ *“How will your life be better if you make these changes?”*

- ❑ *“If you cut back or stopped dipping tobacco, how would your life in a year from now be different?”*

- ❑ *“In what ways do you think you or other people have been harmed by your smoking cigarettes?”*

- ❑ *“How is vaping nicotine getting in the way of what matters most to you in your life?”*

- ❑ *“What makes you think you need to do something about your nicotine consumption?”*

- ❑ *“If your current pattern of smoking stayed the same, what negatives might happen? What positives might happen?”*

Ask Evocative Questions: Evoking statements about **COMMITMENT** to change:

- ❑ *“What is the next step you will take to change your Ritalin use?”*
- ❑ *“When will you take the next step to make this change?”*
- ❑ *“How will you know that your plan for change is working?”*
- ❑ *“Who will you ask to support you [help you] as you are making this change?”*
- ❑ *“What approaches [steps] will you use to help keep yourself on track with making this change?”*

Ask Evocative Questions:

For client who **do not think** that change is necessary, try asking:

- ▣ *“Why might someone who cares a lot about you [your mother or father, teacher or pastor...] be concerned about your substance use?”*

- ▣ *“What advice would you give someone in your situation ... for example, another 15-year-old girl who smokes weed every day and got in trouble but also hopes to make the dance team this year?”*

Eliciting Change Talk (cont.)

There are several ways to elicit change talk.

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2 **Use readiness rulers**

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Use Readiness Rulers



A **Readiness Ruler** is a tool that can assist clients in determining how ready they are to change right now, how important it is to make a change, and how confident they feel about making the change.

Using rulers give you and the client visual feedback about progress. They can stimulate reflection about the adolescent's motivation to change and elicit more change talk.

There are 3 types of Readiness Rulers:

Readiness, **Importance**, and **Confidence**.

Readiness

How ready is the client to change?

- *“I’m ready to cut back on my substance use. I can see that it’s affecting my life.”*

The client is expressing they are ready and willing to take steps to reduce their substance use or make a behavior change that reduces their risk.

Importance

How important or what is the current value of the change to the adolescent?

- ▣ *“I want to stop drinking because it’s getting harder to get up and get to school on time, and I could lose my chance at college admission because of it.”*

The client is expressing their desire and reasons to change and is placing importance on changing.

Confidence

How confident is the client in their ability to change?

- ▣ *“I’d like to quit, but I’m not sure I can. Vaping with my friends is kind of fun and when I’ve tried to stop before my friends just hassle me. I’m not sure I could stop even if I wanted to.”*

The client is expressing a desire to change, but unsure of ability to change.

Low confidence is a barrier to changing because many clients may have already privately tried to change and were unsuccessful.

Normalizing how hard it is to change, how many times a person may need to try, and importance of getting help can move them through sense of being a failure.

Readiness Ruler

Ask the adolescent:

- ❑ *“On a scale of 0 to 10, how ready are you to reduce or stop [X], with 0 being not at all ready and 10 being extremely ready?”*
- ❑ *“On a scale of 0 to 10, how ready are you to stop drinking alcohol, with 0 being not at all ready and 10 being extremely ready?”*
- ❑ *“On a scale of 0 to 10, how ready are you to stop vaping [X], with 0 being not at all ready and 10 being extremely ready?”*



Readiness Ruler Exercise

Think of something you want to change.

Then answer:

On a scale of 0 to 10, how ready are you to change [X], with 0 being not at all ready and 10 being extremely ready?



Importance Ruler

Ask the client:

- ❑ *“On a scale of 0 to 10, how **important** would you say it is for you to reduce or stop [x], with 0 being not at all important and 10 being extremely important?”*
- ❑ *“On a scale of 0 to 10, how **important** would you say it is for you to stop using opioids, with 0 being not at all important and 10 being extremely important?”*
- ❑ *“On a scale of 0 to 10, how **important** would you say it is for you to not be hung over and ready to perform your best during your game on Saturday, with 0 being not at all important and 10 being extremely important?”*





Importance Ruler Exercise

Thinking about the thing you want to change, on a scale of 0 to 10, how important would you say it is for you to change [X], with 0 being not at all important and 10 being extremely important?



Confidence Ruler

Ask the adolescent:

- *“On a scale of 0 to 10, how **confident** would you say you are about being able to stop [x], with 0 being not at all confident and 10 being extremely confident?”*
- *“On a scale of 0 to 10, how **confident** would you say you are about being able to stop using cocaine, with 0 being not at all confident and 10 being extremely confident?”*
- *“On a scale of 0 to 10, how **confident** would you say you are about being able to not smoke marijuana with your co-workers after your shift, with 0 being not at all confident and 10 being extremely confident?”*



CBT Strategy



Confidence Ruler Exercise

Thinking about the thing you want to change, on a scale of 0 to 10, how confident would you say you are about being able to change [X], with 0 being not at all ready and 10 being extremely ready?



Explore Ratings



Once the client has answered the question, explore ratings by discussing their choice of numbers.

- Asking why a score was not lower invites the client to generate reasons to change. It gives the client an opportunity to explore their positive motivations to change and negative consequences of staying stuck.
- Asking why a low score was not higher invites the client to generate reasons not to change.
- Clearly, the goal is to help the client to express reasons that motivate them to change and give them confidence that they can be successful.



CBT Strategy

Explore Ratings



Elicit desire, ability, reasons, and/or need to change.

- *“What led you to pick a [6] and not at a lower number like [2]?”*
- *“What led you to choose a [2] and not a [0]?”*

Generate options for a change plan.

- *“What would it take for you to go from a [6] to a [7]?”*
- *“What would it take for you to move from a [2] to a [4]?”*



Explore Ratings



When an client chooses '0':

Acknowledge it.

Affirm autonomy.

- ▣ *“It is totally your decision what to do/whether to change your use of Vyvanse or not; I only want what is best for you.”*

Follow-up with a friendly, inquisitive question.

- ▣ *“What would tell you that smoking weed was becoming a problem for you?”*
- ▣ *“How would you know if the time was right or making a change was a good idea to help you achieve the goals that you have for yourself.”*



CBT Strategy

Eliciting Change Talk (cont.)

There are several ways to elicit change talk.

1 Ask evocative questions

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Explore the Status Quo

- ❑ The practitioner can ask the client to express the **advantages** and **disadvantages** of continuing to use substances and changing substance use patterns.
- ❑ Exploring the status quo helps clients **verbalize the two sides of ambivalence** that keep them stuck in unhealthy behaviors or thoughts.
- ❑ The client may have never verbalized the benefits from not changing. There are advantages and disadvantages to the adolescent's current behavior
- ❑ The practitioner can help the client generate their own values or beliefs that can support positive change, and the values and beliefs that sustain the status quo.

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Ask for Elaboration

Another way to elicit change talk is to ask for elaboration.

- ▣ *“Tell me more about how much you are using [X]. What do you consider ‘too much’?”*
- ▣ *“Describe an example of when you think you used marijuana too much?”*
- ▣ *“Describe an example of when you think you drank too much?”*

Clients are likely to describe negative consequences and reasons they want to change, potentially tilting the decisional balance toward positive action.

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Ask for Extremes

Ask the client to describe the most extreme consequences that might occur and their likelihood.

- ❑ *“What are the worst things you could imagine happening to you if you do not stop using heroin?”*

- ❑ *“What worries you the most about continuing to drink alcohol?”*

- ❑ *“What is the best thing that could happen if you stop drinking?”*

- ❑ *“What are the great things you hope will happen by not smoking marijuana?”*

- ❑ *“Describe to me the most significant things that you would like to do with your life if prescription pain relievers were not a part of it.”*

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Look Backwards

Ask the client to describe and compare a time before they were using substances.

- *“Do you remember a time in your life when your life was going well? Tell me about that time period.”*
- *“Describe to me a memory you have from a time when you were not smoking marijuana heavily.”*
- *“Tell me about a time when your relationship with your parents was going well.”*
- *“Suppose you were someone else describing you before you started using opioids. Tell me what they would say about you.”*

Look Forwards

Asking the client to look into their future can elicit in their own words the likely outcome if they do not change their substance use.

- ❑ *“Where do you think you will be 1 year from now if you continue to drink alcohol at this level?”*

- ❑ *“Where do you think you’ll be in 2 years if you continue daily use of Xanax?”*

- ❑ *“What effects do you think your continuing to use cocaine at these levels will have on your brain in 5 years from now?”*

Look Forwards (cont.)

Asking the client to evaluate their future without using substances can plant seeds of change by inviting them to envision leading a healthy life.

- ❑ *“What do you think your life could look like 10 years from now if you stop drinking the way you do now?”*
- ❑ *“What do you think your relationship with your parents could look like 3 months from now if you stop smoking marijuana?”*
- ❑ *“What do you think your performance in school (or at practice) could look like if you weren’t feeling tired and hungover when you came to school?”*

Look Forwards (cont.)

Asking the client to consider the perspective that others may have about using substances.

- ▣ *“What would your friends say if you increased your use?”*

- ▣ *“What about your parents – what would they think if they knew you are using Adderall?”*



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Explore Goals and Values

Ask the client to identify which goals and values they hold most important.

Helps to highlight the gap between what they want and what they have now.

▣ *“What matters most to you in your life right now?”*

▣ *“What kind of person do you hope to become as you grow into adulthood?”*





Poll Question

Which of these strategies for eliciting change talk can you implement in your work tomorrow? (Mark all that apply.)

- a) Ask evocative questions
- b) Use readiness rulers
- c) Explore the status quo
- d) Ask for elaboration
- e) Explore goals and values

Peer Case Consultation

How's it going doing SBIRT?

What is going well?

Where do you feel stuck and need some assistance?

Have you used any of the “change talk” strategies discussed today?

BRIEF NEGOTIATED INTERVIEW (BNI) ALGORITHM

1) BUILD RAPPORT	Tell me about a typical day in your life. Where does your current [X] use fit in?
2) PROS & CONS Summarize	Help me understand, through your eyes, the good things about using [X]. What are some of the not-so-good things about using [X]? So, on the one hand [PROS], and on the other hand [CONS].
3) INFORMATION & FEEDBACK Elicit Provide Elicit	I have some information on low-risk guidelines for drinking and drug use, would you mind if I shared them with you? We know that drinking... <ul style="list-style-type: none"> • 4 or more (F) / 5 or more (M) drinks in 2 hrs • or more than 7 (F) / 14 (M) drinks in a week • having a BAC of ____ ...and/or use of illicit drugs such as ____ ...can put you at risk for social or legal problems, as well as illness and injury. It can also cause health problems like [insert medical information]. What are your thoughts on that?
4) READINESS RULER Reinforce positives Ask about lower #	This Readiness Ruler is like the Pain Scale we use in the hospital. On a scale from 1-10, with 1 being not ready at all and 10 being completely ready, how ready are you to change your [X] use? You marked ____. That's great. That means you are ____ % ready to make a change. Why did you choose that number and not a lower one like a 1 or a 2?
5) ACTION PLAN Identify strengths & supports Write down steps Offer appropriate resources Thank patient	What are some steps/options that will work for you to stay healthy and safe? What will help you to reduce the things you don't like about using [X]? What supports do you have for making this change? Tell me about a challenge you overcame in the past. How can you use those supports/resources to help you now? Those are great ideas! Is it okay for me to write down your plan, your own prescription for change, to keep with you as a reminder? Will you summarize the steps you'll take to change your [X] use? I have some additional resources that people sometimes find helpful; would you like to hear about them? <ul style="list-style-type: none"> • Primary Care, Outpatient counseling, Mental Health • Suboxone, Methadone clinic, Needle Exchange, AA/NA, Smoking cessation • Shelter, Insurance, Community Programs • Handouts and information Thank you for talking with me today.