

## MI Techniques

### Shared agenda-setting

- How often do we impose our agenda on the family with statements like, “We need to talk about your weight”? Perhaps if we **ask about the family’s concerns and priorities**, we might be more successful in engaging them in the discussion.
- A simple way to share agenda-setting is to ask a question along the lines of, “We could talk about your diet, activity, or screen time. Which of these things would you prefer to discuss?”

#### ✗ Ineffective:

**PROVIDER:** It sounds like your son is getting more screen time than recommended for a boy his age. We need to talk about reducing that.

**PARENT:** I don’t know... How else am I going to keep him busy while I take care of chores and make dinner?

#### ✓ Effective:

**PROVIDER:** We could talk about fast food, physical activity, or screen time. Which would you prefer to discuss?

**PARENT:** I think we eat pretty well, and TV is important family time... so maybe we could talk about his activity.

### Affirmations

- Establishing a supportive, non-judgmental relationship with the family is critical to building their motivation for change. Affirmations, or **calling attention to genuine strengths** in the patient or family member, are a way to build that rapport.
- An affirmation takes the form of a simple observation, without judgment, opinion, or even personal approval. For example, if a parent expressed that she got her child to drink unsweetened iced tea instead of soda, you might say, “You really care about making healthier choices for your family.”

#### ✗ Ineffective:

**PARENT:** Look, I’m doing everything I can. I make sure to cook healthy meals for the family, which is more than I can say for most moms I know.

**PROVIDER:** That’s great, but there are other areas where you could make some improvements, like in exercise and screen time.

**PARENT:** (sighs) I don’t have time! I’m already working so hard!

#### ✓ Effective:

**PARENT:** Look, I’m doing everything I can. I make sure to cook healthy meals for the family, which is more than I can say for most moms I know.

**PROVIDER:** You’re really going the extra mile to take care of your family.

**PARENT:** Right. I want to make sure we eat right so we can stay healthy.

**PROVIDER:** And there may be other areas where you could make small changes to help keep your family

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healthy... would it be okay if we talked about that?

**PARENT:** Okay, we could talk about it. If it wouldn't be too hard, I guess I could do a little more.

### Open-ended questions

- Open-ended questions **encourage the family to open up and tell their story**, and they yield more information and a broader understanding of the family's perspective. They are phrased in such a way that they **cannot be answered in one word** (yes or no), and they are **not biased, leading, or judgmental**.
- Open-ended questions typically begin with a phrase like,
  - “What do you think about...”
  - “How do you feel about...”
  - “Tell me about...”
  - “To what extent...”
  - “Why do you think...”

#### ✗ Ineffective:

**PROVIDER:** Does Norah eat healthy?

**PARENT:** Yeah, she eats better than most kids her age.

#### ✓ Effective:

**PROVIDER:** What does Norah eat on a typical day? You can start as soon as she gets up and walk me through what she eats until bedtime.

**PARENT:** Well... she'll have a bowl of cereal for breakfast, and then whatever they serve for lunch at school. When she gets home, she has a little snack—cookies or a pop-tart or something, plus a soda—and then I make sure to cook healthy family dinners as often as I can. We hardly ever get fast food.

### Reflective Listening

- Reflective listening is the core skill of MI. On a simple level it is **rephrasing what the family said**, and it shows that you have been listening. But, on a deeper level, reflections help **clarify the meaning of what the family told you** and are used to reinforce self-motivational statements about behavior change.
- Reflections can be **simple paraphrases of the information or emotions** the family is communicating. For example, if a parent was talking about how the family watches a few hours of TV every night, you might reflect, “It's common for your family to watch three or four hours of TV each night.” Simple reflections can be plain statements without preamble, and they can also begin with a phrase like,
  - “So...”
  - “It sounds like...”
  - “What I'm hearing is...”
- Reflections can also be more complex. For example, double-sided reflections use the family member's own words to highlight his or her ambivalence about change. For example, if a parent was talking about how fast food is a convenient dinner option, but wishes they had more time to cook healthy meals, you might reflect, “Your kids like fast food and it saves you time, but you also want your kids to eat nutritious meals so they stay healthy.” Be careful to always end the double-sided reflection with the family member's reasons for change. Double-sided reflections can use phrases like,
  - “On one hand... on the other hand...”
  - “X is true... and also Y is true...”

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“You feel like... and at the same time...”

**✘ Ineffective:**

**PARENT:** Sam tried team sports and didn't like them. He didn't feel like he was very good at them.

**PROVIDER:** What about martial arts?

**PARENT:** Maybe. But, if he really doesn't want to do it, it would be pretty hard to make him go to classes. It might not be worth the trouble if we have to constantly fight about it.

**✔ Effective:**

**PARENT:** Sam tried team sports and didn't like them, and he didn't feel like he was very good at them.

**PROVIDER:** So it sounds like, if Sam were going to be more active, he would want it to be some kind of activity that wasn't a team sport.

**PARENT:** Right. It would be good for him to get more activity, but I don't want to push him to do something he's not good at, where he might get teased.

**PROVIDER:** So on one hand, you don't want Sam's confidence to take a hit, and on the other hand, you feel it's important for him to get more activity.

**PARENT:** Yeah. Maybe he could ride his bike more, or we could go on walks.

## Discussing pros and cons

- Helping families **weigh the advantages and disadvantages of making a change** can help them resolve their ambivalence.
- Start by asking about the benefits of continuing the current behavior. For example, if you wanted to find out about the family's fast food consumption, you could start by asking, “What do you like about fast food?”
- Then ask about the consequences or disadvantages of fast food. You could ask, “What are some things that are not so good about eating a lot of fast food?”
- End by asking, “What might happen if you don't make a change in the amount of fast food your family eats?” This question may lead to change talk where the patient makes the argument for change. This may also be a good opportunity to use a reflective statement (see the “Reflective listening” skill).

**✘ Ineffective:**

**PROVIDER:** I know that Ben likes video games, but getting more than two hours of screen time a day can lead to weight gain, which leads to health risks. I think the potential health problems outweigh the benefits of video games, don't you?

**PARENT:** I don't know... I don't think you understand how much video games mean to Ben. What kind of risk are we talking about? Because I'd hate to deprive him of something he loves so much when it might not even be a problem.

**✔ Effective:**

**PROVIDER:** What do you both like about video games?

**CHILD:** They're fun!

**PARENT:** They make him happy, which is great. And I think they're a great way for him to socialize and

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hang out with friends online.

**PROVIDER:** So they make him happy and they're a chance for him to connect with friends.

**PARENT:** Right.

**PROVIDER:** **And what are some things that might not be so good about video games?**

**CHILD:** Sometimes I get so into them that I lose track of time, and then I have to hurry to finish my homework.

**PARENT:** Yeah, sometimes he just completely zones out, and it's hard to get him to do anything else.

**PROVIDER:** **So it sounds like he likes video games and they let him socialize, but they also take up a lot of time he could be using to do other things, which could have an impact on his health or on his schoolwork.**

**PARENT:** Exactly. Sometimes they distract him from more important things, like homework.

### Elicit-provide-elicited

- Sometimes you need to share information with a family. Elicit-provide-elicited is a method of sharing that information while still reinforcing the family's autonomy.
- **ELICIT: Start by asking permission to share your information.** Asking permission reinforces the family's autonomy, lowers resistance, and makes the family more likely to listen to your information.
- **PROVIDE: Then give the information, providing nothing but the facts, without judgment or opinion.**
- **ELICIT: Then ask the family an open-ended question**, such as, "What does this mean for you?" or, "What do you make of that?" Allowing families to reach their own conclusions is another way to reinforce their autonomy, and any conclusions they reach will be much more powerful than opinions you provide.

#### ✘ Ineffective:

**PROVIDER:** I know you cook healthy dinners, but there are other places where Norah's diet could use some improvement. For example, she's eating a snack every day when she comes home from school. Just one chocolate chip cookie can have 100 calories or more. If she has three cookies, that's 300 calories. These extra calories are probably a big factor in her weight gain, and we need to cut them out of her diet.

**PARENT:** So if she's hungry when he comes home, I should just let her be hungry? At her age, I don't want her starving herself or going on some diet.

#### ✔ Effective:

**PROVIDER:** You talked a little bit about Norah's diet. Would it be okay if I shared some information about what she's getting on a typical day.

**PARENT:** Sure.

**PROVIDER:** Okay. You mentioned she's eating a snack each day when she gets home—cookies are a typical snack food for her. One cookie can have 100 calories or more, and to put that in perspective, if she ate three cookies, she would have to ride her bike for at least 45 minutes to burn those calories off. **What do you make of that?**

**PARENT:** Wow. Well... she definitely doesn't hop on her bike after eating cookies, I can tell you that! So

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what happens if she doesn't burn those calories off?

### Importance and confidence scales

- People are not ready to change until they think it is important and have confidence that they can do it. Asking how important the change is to the family and how confident they are that they can make the change is a good predictor of success.
- A simple way to do this is to ask a question like, "On a scale from 0-10, how important is it to you to make a change? And on the same scale, if you wanted to change, how confident are you that you could make that change?"
- Discussing the family's answers can elicit a number of responses, including benefits of change, barriers to change, and possible solutions. Typical probes include: "Why didn't you pick a lower number...?" (allows patient to state benefits of change) "Why didn't you pick a higher number...?" (identifies barriers) "What would it take to get you to a higher number...?" (identifies possible solutions)

#### ✘ Ineffective:

**PROVIDER:** Great. So the plan is to make sure Ben rides his bike and plays outside for an hour before he gets to play video games.

**PARENT:** Yeah... we can try. We'll see how it goes, I guess.

**PROVIDER:** Okay, bring me a report next visit.

#### ✔ Effective:

**PROVIDER:** So you'd like Ben to ride his bike and play outside for an hour before he gets to play video games.

**PARENT:** Right.

**PROVIDER:** On a scale from 0-10, with zero being "not important," and 10 being "very important," how important is it to both of you to make this change?

**PARENT:** I would say a seven.

**CHILD:** Maybe a five.

**PROVIDER:** So you picked a 7 and a 5. Why didn't you pick a lower number?

**PARENT:** Well, I do think it will help him stay healthy, so... that's pretty important to me.

**CHILD:** (shrugs) I don't know.

**PROVIDER:** Okay. And on the same scale, if you wanted to make this change, how confident are both of you that you could make the change?

**PARENT:** Maybe a four.

**CHILD:** I dunno. A four, I guess.

**PROVIDER:** You both picked a four for confidence. What would it take to get you to a higher number?

**PARENT:** Well, we would have to fix his bike. But we could probably do that next week. And he's never been that excited about riding his bike, so maybe if we made it more exciting for him, I would be more

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confident. Maybe we could go on rides with him, or see if some of his friends would ride with him.

### Summarizing and closure

- Summarizing means synthesizing what the family told you. It allows the family to hear their own words again, which can be very powerful, since people believe more in what they say themselves than in what they are told. After summarizing, the interaction can be closed by asking the family, “What do you think might be a first step?” or “Where do we go from here?”
- If the family is not ready for change, accept their decision and let them know that you are there for them if they change their mind. You might say, “It sounds like this is not the right time to talk about change. Perhaps we can return to this topic another time.”
- As an additional step when families are not ready for change, it can be helpful to discuss the circumstances under which they would consider making changes. You might say, “What might his weight or overall health look like that would signal to you that it was time to make a change?” Helping them think about what “a problem” would look like and set benchmarks can increase their awareness of the behavior and encourage them to monitor it. If they are willing to monitor the behavior, for example, by making weekly records of weight, make sure to ask about it during their next visit.
- Another question you could ask is, “I know you are not ready to make a change at this time, but if you were to make a change, what might be a health benefit for your child and perhaps your entire family?”

#### ✗ Ineffective:

**PROVIDER:** Here's what I would like you to do. Get his bike fixed and make him ride at least 30 minutes 5 days a week.

**PARENT:** Okay. We can give it a try.

#### ✓ Effective:

**PROVIDER:** So, to summarize what we talked about, you want him to play outside for an hour before he gets to play video games, because that will help him get to a healthier weight. You'll fix his bike, and you'll try to go on bike rides with him whenever you can. Does that sound right?

**PARENT:** Yes. Exactly.

**PROVIDER:** Okay. **When do you think you can start?**

**PARENT:** I think the bike should be ready in a week. And I guess I'll fix up my bike, too! So we'll all be ready to hit the road.

**PROVIDER:** Sounds great.