

COVID-19 Anxiety:
How Can Motivational
Interviewing (MI) help?

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Conflicts of Interest

My presentation/discussion: **DOES NOT** include discussion of an unlabeled use of a commercial product, or an investigational use not yet approved for any purpose.

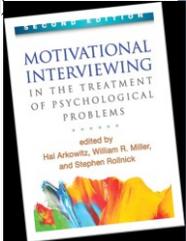
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Learning Objectives

- > Define Motivational Interviewing (MI)
- > Describe the goal of MI
- > Explain the Spirit of MI
- > List the Processes of MI



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Welcome

- > Be here now
- > Say Yes
- > It's not about me
- > It's in there
- > We're in this together
- > Slow is fast
- > Mistakes are a gift
- > Less is More



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Meet Bob

- > Bob has learned to manage his Type 1 Diabetes and has cut down on eating sweets.
- > With everything happening, he feels anxious and wants to binge on brownies and sweets.
- > What would you say to Bob to help him continue to eat healthier?



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Standard Traditional Counseling Approach

- > Explain why Bob should eat healthier
- > List the specific benefits of eating healthier
- > Tell how you did it and how he could do it too
- > Emphasize how important it is to eat healthy
- > Persuade with logic or warn them - what will happen if they don't eat better (scare)
- > Diagnose, inform or educate them

P.S. This is *NOT* motivational interviewing



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Meet Bob

- › The all-to-common results of the “Standard Patient Counseling Approaches!”



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Why does this happen?

- › Traditional health education consists of giving patients’ advice and using persuasive approaches (Weinstein, Harrison, & Benton, 2004)
- › Although this approach may have a positive effect on knowledge it does not help patients *make decisions* about changing behaviors



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How MI Began

- › Founded in early 80s: Dr. William Miller and Dr. Stephen Rollnick
- › Clinical trial of BT for problem drinking discovered that *therapist empathy* predicted two-thirds of the variance in client drinking 6 months later
- › Worker style matters



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Why Use MI for Anxiety

- › Being motivated is fundamental to change
- › Re-defines client resistance and nonadherence to treatment recommendations for anxiety
- › Evidence Base – 1346 randomized control trials and 219 systematic reviews

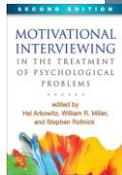
Source: <https://pubmed.ncbi.nlm.nih.gov/?term=motivational+interviewing>

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Motivational Interviewing (MI) Defined

“...a particular way of having a conversation about change so it is that the client rather than the clinician who voices the arguments for change.”

(Arkowitz, Miller and Rollnick, 2015; p.3)



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The Goal of Motivational Interviewing

- › Help people resolve their mixed feelings or thoughts (good and bad) about change and make a decision
- › When a person thinks of one side, they naturally think of the other side, keeping them stuck



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MI differs from Traditional Approaches

- > Having mixed feelings/thoughts at the same time (ambivalence) about anxiety is not labeled as resistance or pathological
- > If/when we take up the “good” side of ambivalence, people naturally voice their “bad” side (psychological reactance)

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The Goal of Motivational Interviewing

Instead of being the expert and telling the client what to do, we ASK QUESTIONS and EXPLORE change talk

People are more likely to do what THEY say instead of what they are TOLD to do



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Change Talk – DARN CAT

- > **D**esire: “I want, would like to, wish..”
- > **A**bility: “I could, I can, I’ll try, I might be able to...”
- > **R**easons: specific reasons for
- > **N**eed: “I must, I have to, I should, I need...”



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Change Talk – DARN CAT

- › Commitment language: “I will, I promise...”
- › Activation: I’m ready, I’m going to “almost there”
- › Taking steps: any step, however small is reason to explore more



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Five Core MI Skills

- › Open Questions
- › Affirmations
- › Reflections
- › Summaries
- › Providing information and advice permission



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Remember Bob?

- › He feels two ways- he wants to eat healthier to better manage his diabetes AND Bob *loves* brownies and sweets
- › What would you ask Bob to help him eat healthier?
- › DARN-CAT!



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Meet Edna

- › Edna lives alone and is mostly able to care for herself
- › She is experiencing a lot of anxiety about how to get more groceries
- › How would you help Edna figure this out and empower her at the same time?



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Spirit of MI (or how we do MI)

- › Partnership
- › Acceptance
- › Compassion
- › Evocation



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Spirit of MI

Partnership

- › people know themselves in ways we never will
- › fully capable of making decisions and change
- › goal is to create a safe environment that enables clients to activate their strengths/resources
- › the helper acts as a consultant or guide



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Spirit of MI

Acceptance

- At moments of disharmony, suspend judgment, and seek to understand the other's perspective
- AND hold the conviction that it's worthwhile to do so



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Spirit of MI

Acceptance

- freedom from coercion: people make their own decisions on the what/how/when/or even if to change
- commit to commenting on their strengths and resources (affirmation)



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Spirit of MI

Compassion

- Working in harmony
- Avoid "expert" stance
- Act as a confident companion or guide



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Spirit of MI

Evocation

- Drawing out the ideas and solutions from the person by asking OPEN questions and listening instead of TELLING



People are more likely to do what THEY say instead of what they are TOLD to do

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Remember Edna?

- › Edna lives alone and is mostly able to care for herself
- › She is experiencing a lot of anxiety about how to get more groceries



Partnership Acceptance
Compassion Evocation

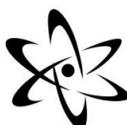
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Meet Angela

- › Angela has six months of sobriety from using opioids
- › She has just been laid off from her job and is overwhelmed
- › How would you approach Angela to help empower her to not relapse?

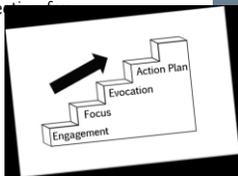


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Four Processes of MI

- › Engagement -forming a working alliance
- › Focus –clarifies and provides direction of the discussion
- › Evocation exploring and evoking the person's own motivations for change
- › Action Plan when and how to make a change



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Engagement

- › Process of establishing a helping relationship
- › It means connecting with the person and ensuring they feel understood
- › Start with listening more than talking
- › To encourage talking, minimize questions
- › How does the person think you might help?
- › Look for and comment on strengths- what's already right

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Focus and Evocation

- › Once **engagement** and a **focus** have been established, the goal is to evoke and enhance the person's own motivation for change



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How to Get Change Talk-Ask for it!

- > What do you think might need to change?
- > What did you do in the past to be successful at this?
- > What are the 3 best reasons to make this change?
- > What's the downside of how things are now?
- > What needs to happen?
- > How important is it for you to ____?
- > What do you think might be the first step?
- > Where do we go from here?

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Remember Angela?

- > Angela has six months of sobriety from using opioids.
- > She has just been laid off from her job and is overwhelmed.
- > Engagement
- > Focus
- > Evocation
- > Action Plan



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Final Thoughts and Questions

- > What did you learn/relearn about MI?
- > How will you apply that to your professional work or your personal life?



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Thank You!

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