



UNIVERSITY OF SOUTH CAROLINA

SCHOOL OF MEDICINE

Motivational Interviewing in Psychiatric
Rehabilitation: What Professionals Need to Know

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Psych Rehab and Motivational Interviewing

Learning Objectives

Overview of the lived experience of psychiatric disabilities

Overview of Motivational Interviewing for use in psychiatric rehabilitation and recovery

Using the Stages of Change in psych rehab

Fundamental processes in MI

Skill building in MI

Psychiatric Rehabilitation and Recovery

▶ *"Psychiatrically disabled adults do not "get rehabilitated" but rather they recover a new and valued sense of self and of purpose. Through the recovery process, they become active and responsible participants in their own rehabilitation project."*

Deegan, P. E. (1988). Recovery: The lived experience of rehabilitation. *Psychosocial Rehabilitation Journal*, 11(4), 11–19. <https://doi.org/10.1037/h0099565>

Lived Experience of Psychiatric Disability

- ▶ People with psychiatric disabilities report several common experiences:
 - Loss of a sense of self
 - Loss of autonomy and sense of self efficacy
 - Loneliness and isolation
 - Loss of hope
 - Loss of a sense of agency
- Fusar-Poli, P., Estradé, A., Stanghellini, G., Venables, J., Onwumere, J., Messas, G., Gilardi, L., Nelson, B., Patel, V., Bonoldi, I., Aragona, M., Cabrera, A., Rico, J., Hoque, A., Otaiku, J., Hunter, N., Tamelini, M. G., Maschião, L. F., Puchivailo, M. C., Piedade, V. L., ... Maj, M. (2022). The lived experience of psychosis: a bottom-up review co-written by experts by experience and academics. *World psychiatry: official journal of the World Psychiatric Association (WPA)*, 21(2), 168–188. <https://doi.org/10.1002/wps.20959>

The Crux

- ▶ *“People with psychiatric disabilities are, because of mental illness, unable to attain age- and culture-appropriate goals for extended periods of time.”*
- ▶ Corrigan, P. W., Rüsçh, N., Watson, A. C., Kosyluk, K., & Sheehan, L. (2024). *Principles and practice of psychiatric rehabilitation: Promoting recovery and self-determination* (4th ed.). [The Guilford Press](#).

Effective Psychiatric Rehabilitation

- ▶ Instills hope
- ▶ Focuses on self determination and empowerment
- ▶ Fosters autonomy
- ▶ Fosters connections of the individual's choice
- ▶ Fosters exploration of the resumption/reclaiming of desired roles
- ▶ Is centered within the goals of the client
- ▶ Is strengths-based
- ▶ Psychiatric Rehabilitation Association (PRA) Core Principles:
<https://www.psychrehabassociation.org/about/core-principles-and-values>

Core Theoretical Foundation: Self Determination Theory

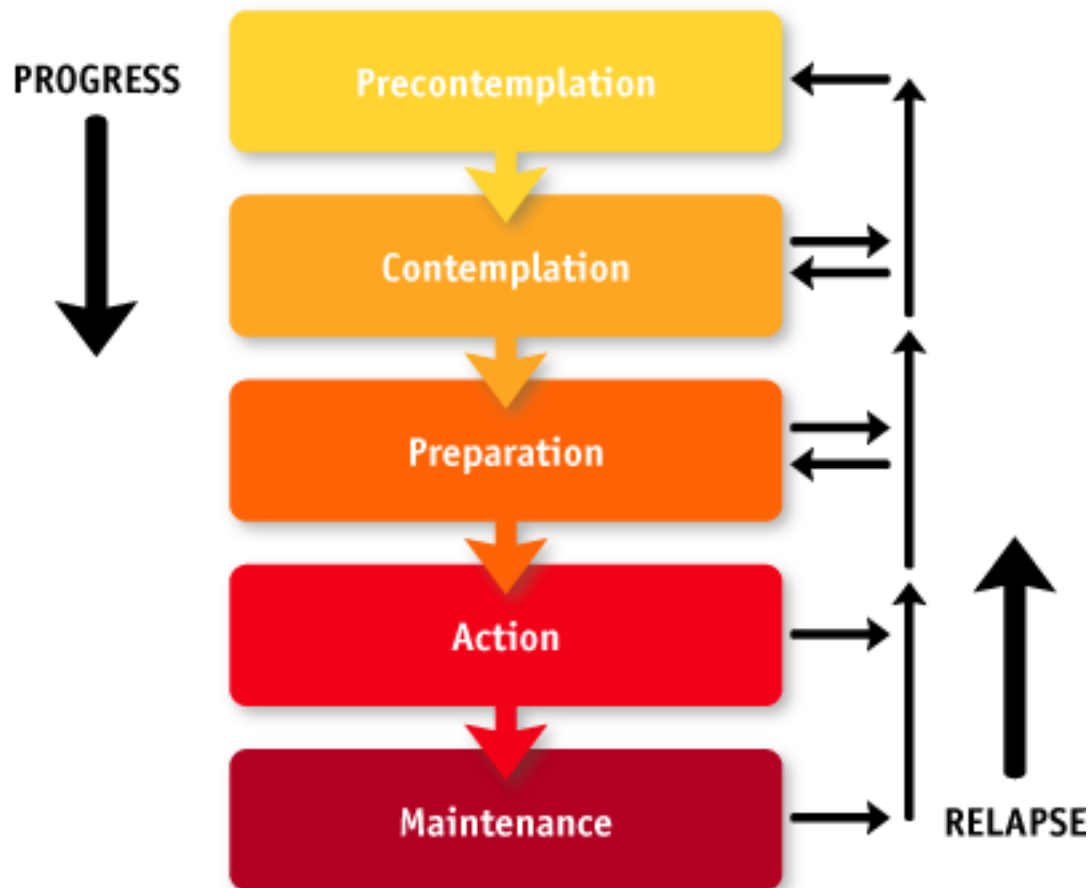
- ▶ Self Determination Theory (SDT):
 - ▶ Intrinsic motivators are more time stable and likely to be embraced than are external motivators.
 - ▶ The client's idea of what is best drives the most successful services and choices.
- ▶ Ryan, R. M., & Deci, E. L. (2020). Intrinsic and extrinsic motivation from a self-determination theory perspective: Definitions, theory, practices, and future directions. *Contemporary Educational Psychology*, 61. <https://doi.org/10.1016/j.cedpsych.2020.101860>

Client Change

“Turn and face the strange...changes...”

In order to be able to help people change, we first have to understand how and why they change...

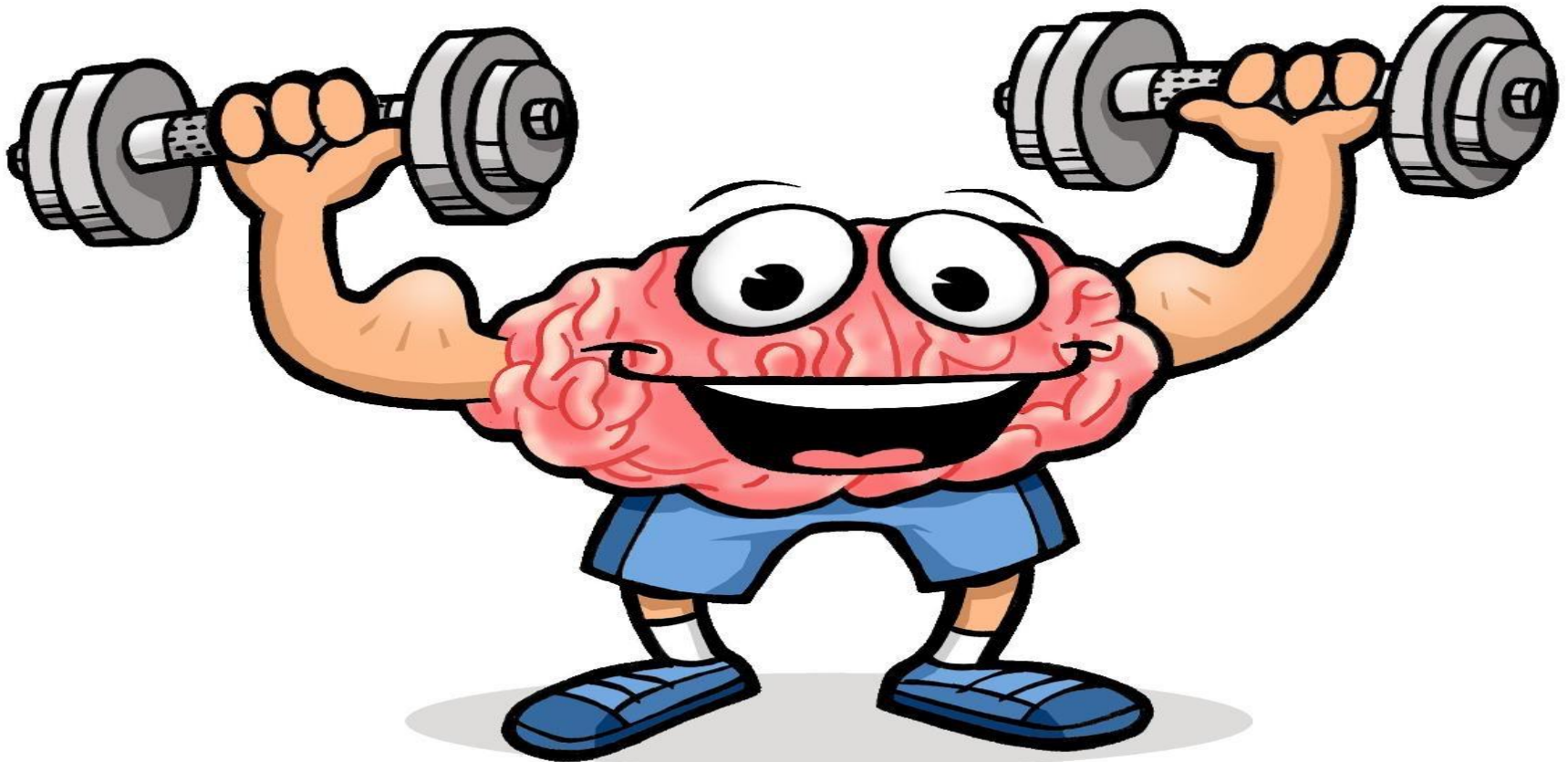
Stages of Change



- ▶ Norcross, J. C., Krebs, P. M., & Prochaska, J. O. (2011). Stages of change. *Journal of Clinical Psychology*, 67(2), 143–154. <https://doi.org/10.1002/jclp.20758>

Recognizing the Stages of Change

- ▶ Stages of Change—Exercise



Beliefs About Motivation

↳ Until a person is motivated to change, there is not much we can do.

➔ A. True

➔ B. False

Beliefs About Motivation

↴ It usually takes a significant crisis ("hitting bottom") to motivate a person to change.

➔ A. True

➔ B. False

Beliefs About Motivation

↳ Motivation is influenced by human connections.

➔ A. True

➔ B. False

Beliefs About Motivation

↴ Resistance to change arises from deep seated defense mechanisms.

➔ A. True

➔ B. False

Beliefs About Motivation

↓ People choose whether or not they will change.

➔ A. True

➔ B. False

Beliefs About Motivation

↵ Readiness for change involves a balancing of “pros” and “cons”.

➔ A. True

➔ B. False

Beliefs About Motivation

↴ Creating motivation for change usually requires confrontation.

➔ A. True

➔ B. False

Beliefs About Motivation

When someone is non-compliant, they have no interest in change.

A. True

B. False

Beliefs About Motivation

Denial is not a client problem, it is a counselor skill problem.

A. True

B. False

You're a failure!
You're wasting
your life!
You'll never
amount to
anything!

It's a motivational
technique I learn-
ed growing up.



SIPRESS

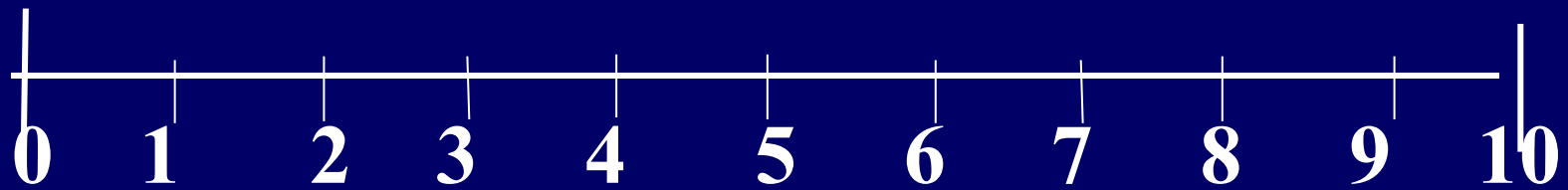
A taste of MI - Round 1

The speaker: Role play a client presenting for services, where there is a clear behavior change goal. You are ambivalent and somewhat resistant to change.

The counselor:

- Explain why the client *should* make this change.
- Give at least three specific *benefits* that would result from making the change.
- Tell the client *how* to change.
- Emphasize how *important* it is for the client to change, and
- Tell the client to do it.

**How willing do you think this client
will be to change his/her behavior as a
result of this conversation?**



Not willing

Very willing

MOTIVATIONAL INTERVIEWING Overview

DEFINITION & SPIRIT

DEFINITION: Motivational interviewing is a client-centered, evidence-



-oriented method

ing intrinsic

to change by

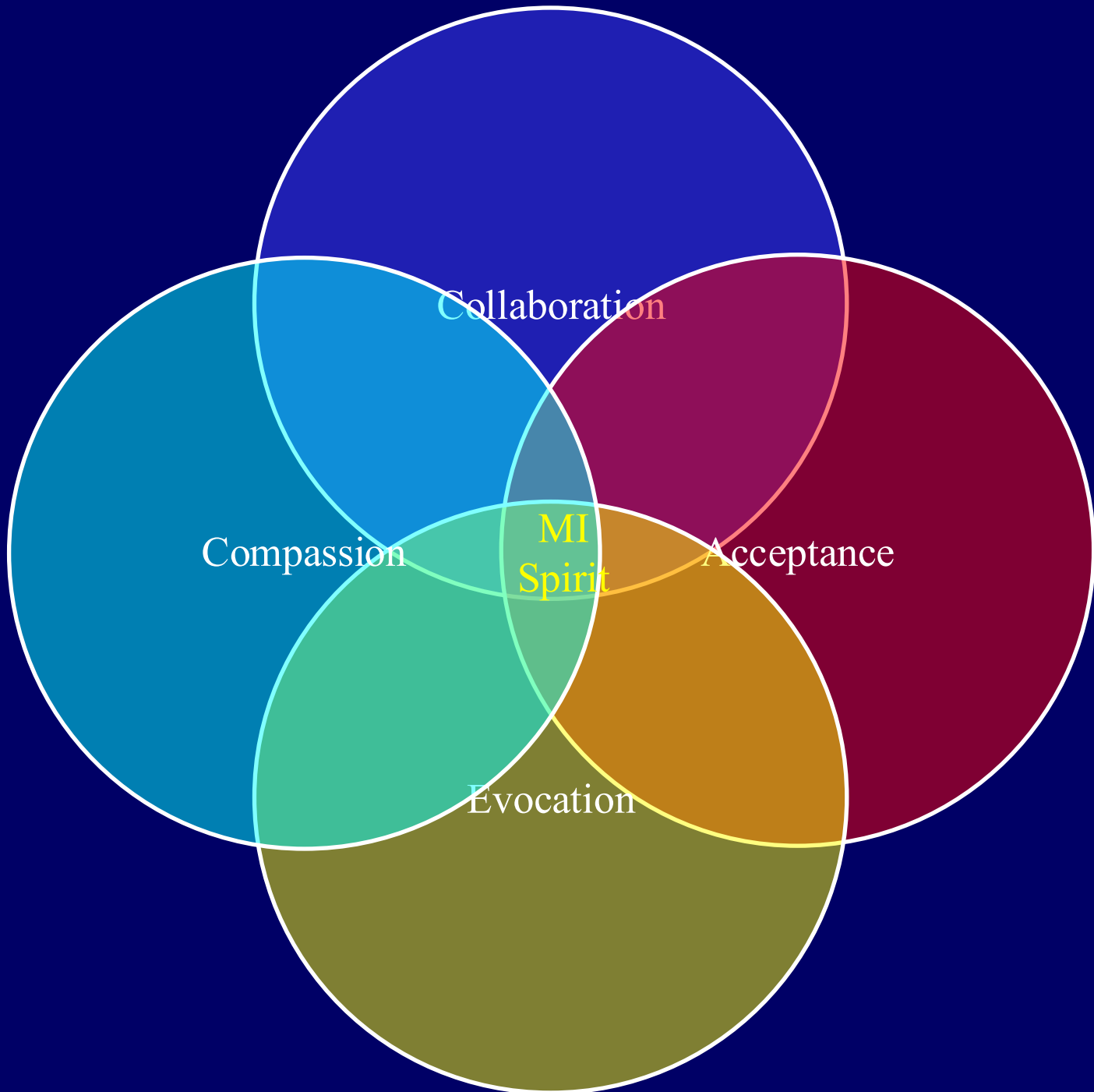
nd resolving

e with the

individual.

SPIRIT:

Collaboration, evocation,
autonomy, respect, compassion



Collaboration

Compassion

MI Spirit

Acceptance

Evocation

Clinical style of MI includes these characteristics

- Collaboration
- Evocation
- Acceptance
- Honors client autonomy

A Way of Being

- ↳ Motivational Interviewing:
- ↳ Not a series of techniques, but a way of being with clients
- ↳ Client value driven
- ↳ Client centered
- ↳ Client driven

The MI Shift

From feeling responsible for changing clients' behavior to supporting them in thinking & talking about their own reasons and means for behavior change.

Four Fundamental MI Processes

Planning

Evoking

Focusing

Engaging

MI: Fundamental Skills

Open Ended Questions

Affirmations

Reflections

Summarizing



Fundamental MI Goal: Increase Change Talk

- ▶ Change Talk is a key component of MI practice.
- ▶ The higher the change talk, the more likely the positive outcome.
- ▶ The higher the confrontation, the lower the change talk.

MI: Fundamental Skills

Open Ended Questions

Affirmations

Reflections

Summarizing



Open questions



- Invite explanation
- Permit and encourage clients to explain their thoughts



Examples

1. What is worrying you most today about your job situation?
2. What are some of the not-so-good things about your job?
3. What things have you tried in the past to keep jobs?

Open or closed?

- If you were to quit, how would you do it?
- Don't you think it's time for a change?
- What do you already know about how to drink safely?
- Is this an open question?

Affirmations focus on the person

- Commenting positively on an attribute
- A statement of appreciation
- Catch the person doing something right
- A compliment
- An expression of hope, caring, or support

Reflective listening

- Requires the HCP to develop hypotheses
- When in doubt, listen and reflect

Reflective Listening - taking a guess and reflecting it back in a short statement

- ↳ Keeps the client thinking & talking about change
- ↳ Shows professional is attempting to understand
- ↳ Emphasizes the clients' positive statements about changing – hear twice
- ↳ Diffuses resistance

Crafting a reflective statement

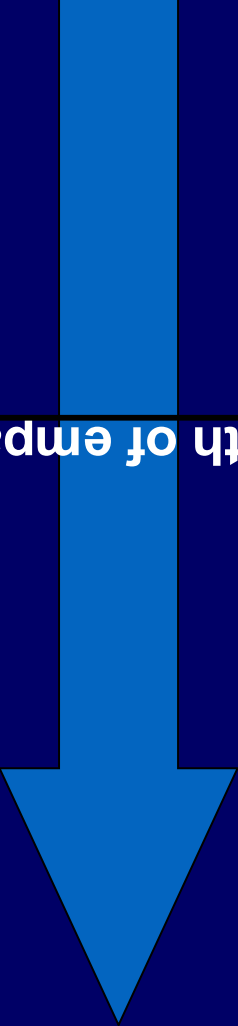
Frame the content as statements rather than questions

Turning inflection down at end, not up

“You are interested in quitting smoking?”

“You are interested in quitting smoking.”

Levels of reflection

- 
- Depth of empathy
- REPEAT - restate
 - REPHRASE – offer a synonym
 - ADD NEW MEANING – demonstrate empathy, use double-sided reflections, reframe, reflect feelings
 - SUMMARIZE – gather client utterances and reflect the underlying meaning

Simple reflection - Repeat

An element of what the client said is repeated; often used to diffuse resistance:

- *Client*: I don't want to quit smoking
- *HCP*: You don't want to quit smoking

Simple reflection - Rephrase

The HCP repeats one element of what was said, changing the order of ideas):

- *Client*: I would like very much to stop smoking
- *HCP*: Stopping smoking is very important to you.

Empathic reflection

The HCP demonstrates understanding of the client:

- *Client*: How would you know what it is like to quit. You've probably never used.
- *HCP*: It's hard to imagine how I could possibly understand your situation.

Reframe

Much as a painting can look completely different depending upon the frame put around it, reframing helps clients think about their situation differently.

- *Client*: I've tried to quit and failed so many times.
- *HCP*: You are persistent, even in the face of discouragement. This change must be really important to you.

Feeling reflection

Includes the emotional undertones of the conversation and is the deepest form of reflection:

- Client: I've been considering quitting for some time now because I know it is bad for my health.
- HCP: You're very worried about your health and how it is affected by smoking.

The **summary** is like a bouquet of flowers that we give to the client.



Effective summaries

- Facilitate and guide
- Are used to continue the conversation
- Are selective and concise
- Reflect ambivalence
- Accentuate “change talk”

MI: Fundamental Skills

Open Ended Questions

Affirmations

Reflections

Summarizing



Ambivalence

- ↴ Ambivalence is a normal and natural part of the change process.
- ↴ Embrace and acknowledge
- ↴ Roll with it, encourage exploration
- ↴ Engage with change talk as the goal

Double-sided reflection

Acknowledge both sides of the client's ambivalence:

- Client: Smoking helps me reduce stress.
- HCP: On the one hand, smoking helps you to reduce stress. On the other hand, you said previously that you are worried about its impact on your health...

Right Vs. Not So Right

Person B talks about what is right and
Person A defends the status quo...





Right Vs. Not So Right

The research is really clear: The more a person argues on behalf of one position, the more he or she becomes committed to that position.

Avoid Questions Like:

Why don't you want to change?

How can you tell me you don't have a problem?

What makes you think you are not at risk?



Common Reactions to Righting Reflex

Angry, agitated

Afraid

Oppositional

Helpless, overwhelmed

Discounting

Ashamed

Defensive

Trapped

Justifying

Disengaged

Not understood

Not coming back –

Not heard

avoidance

Procrastinate

Uncomfortable



Other Responses to Resistance

Reframing- Here we are taking the client's thought and putting a new spin on it for him/her.

For example "*I've tried to change so many times and failed*"

Response "*You're very persistent, even in the face of discouragement. This change must be really important to you.*"

Other Responses to Resistance

Why Does it Work?

You are essentially teaching the client how to think in a way that fosters positive change. You are also communicating a positive message about the client's ability to change. You are building their confidence to pursue change.



Enhancing Confidence

Support Self-Efficacy- This is a fancy way of saying “enhancing confidence”. If a person believes he/she can change, he/she is much more likely to change. Supporting this idea is a good thing!



Enhancing Confidence

Asking the Right Questions- Sometimes a well phrased question can help inspire confidence. Open Questions are usually best.

Examples:

“How might you go about making this change”?

“What would be a good first step”?

“What gives you some confidence that can do this”?



Enhancing Confidence

Exploring Hypothetical Change-

Sometimes if a client is struggling with practical ways to make change, it helps to explore it hypothetically.

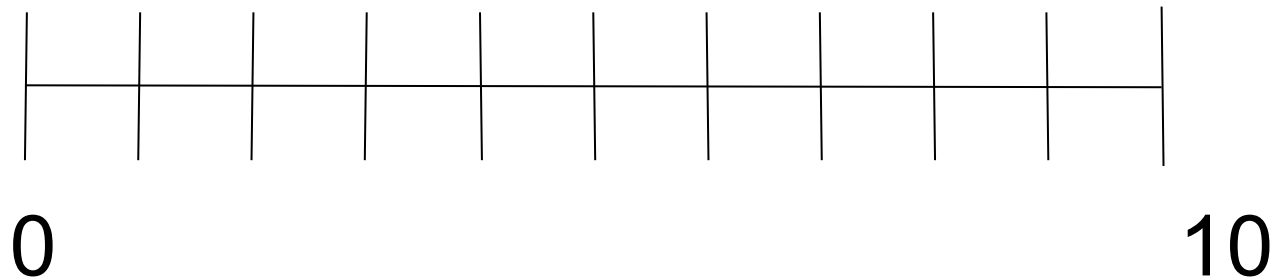
Example:

Suppose you did succeed and are looking back on it now: What most likely is it that worked? How did it happen?

Confidence/Readiness Ruler

How confident are you that if you wanted to change your smoking habit, you could do so?

If 0 was “not confident,” and 10 was “very confident,” what number would you give yourself ?



Building Confidence

I'm curious about your confidence.

What makes it an x and not a w?

Where would you like to be?

What would make you more confident about making these changes?

How could you move up higher, so that your score goes from x to y?

How can I help you succeed?



Building Confidence

Is there anything you found helpful in any previous attempts to change?

What have you learned from the things that went wrong last time you tried?

If you were to decide to change, what might your options be?

Are there any ways you know about that have worked for other people?



Building Confidence

What are some of the practical things you would need to do to achieve this goal? Do any of them sound achievable?

Is there anything you can think of that would help you feel more confident?



Confidence



Extreme Confidence

Change Talk

- ▶ Evoking Change Talk is a key MI Goal
- ▶ Recognizing Change Talk is an important skill
- ▶ Conceptualizing the kind of Change Talk is critical.

DARN CAT



[...\\..\\Desktop\\Alan video\\Why I Love I](#)

Examples of Change Talk – Recognizing the Types of Change Talk

I want to have better relationships. (D)

I think I might be able to do it. (A)

My husband and I hope to have a family. (R)

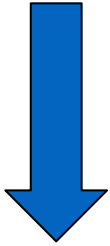
I really need to feel better about me. (N)

I will to make this happen. (C)

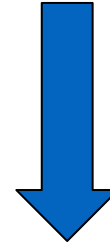
I'm making an appointment with a
counselor. (A)

I went to see a counselor today. (T)

What is resistance?



CHANGE TALK



SUSTAIN TALK





Putting it All Together

Four Basic Steps or Principles of MI:

1. Express Empathy
2. Develop Discrepancy
3. Roll with Resistance
4. Support Self-Efficacy



Putting it All Together

People Change When They Are

Ready

Willing

Able

Where is the nugget of change talk?

- I tried and tried to cut back, but it just hasn't happened.
- I don't like to control what I drink. I suppose I should, but I don't like to feel restricted.
- It is scary to think I might lose my job.
- I used to exercise regularly.

MI Principles

MI Methods

Express Empathy

Open-Ended Questions

Affirmations

Develop Discrepancy

Reflective Listening

Summaries

Roll with Resistance

← Elicit Change Talk

Support Self-Efficacy

OARS- MI Skills

O – Open
questions

A – Affirmations

R – Reflections

S – Summaries



Being Listened to

Understood

Want to talk more

Liking the worker

Open

Accepted

Respected

Engaged

Able to change

Safe

Empowered

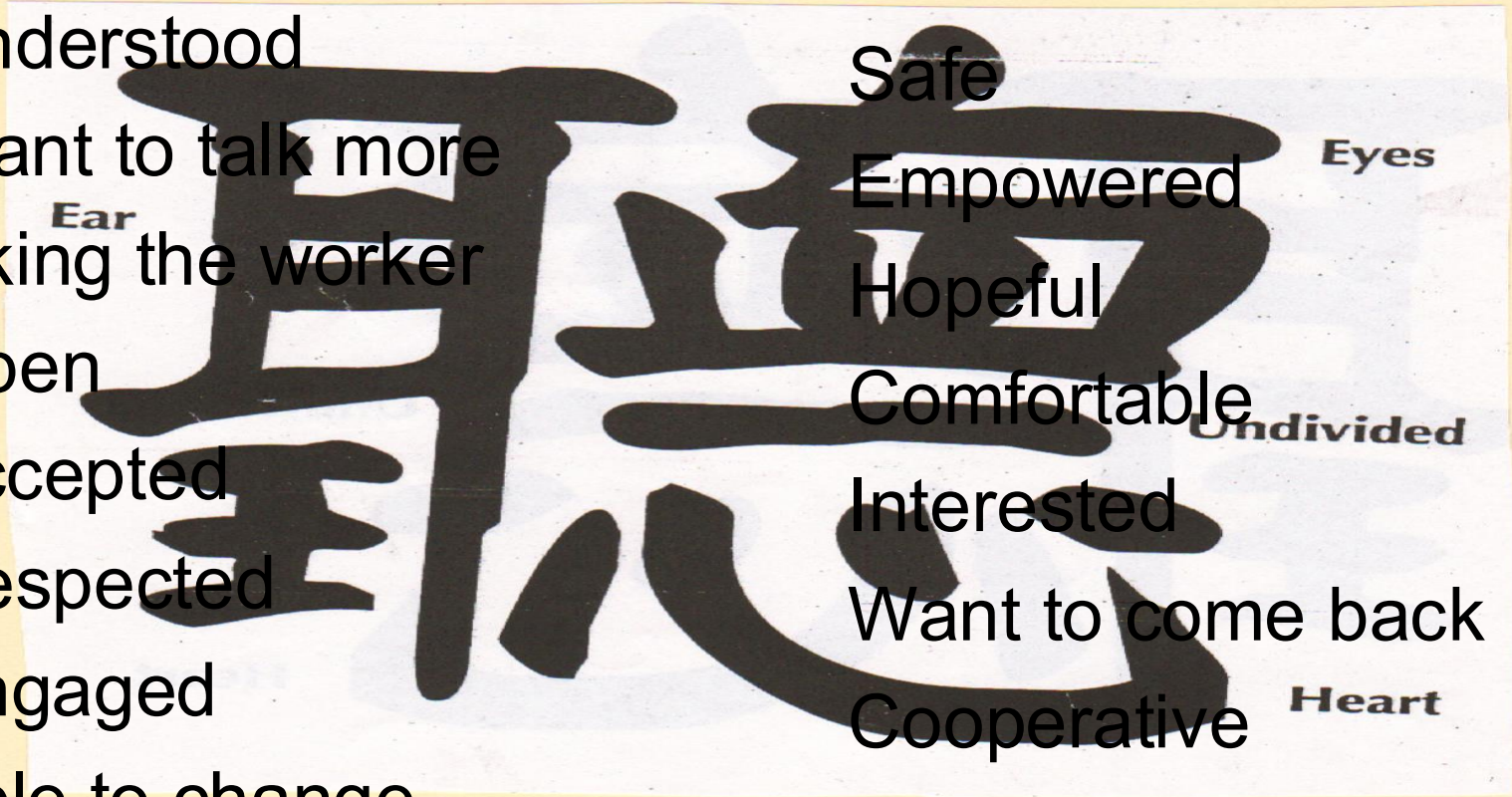
Hopeful

Comfortable

Interested

Want to come back

Cooperative



The Chinese characters that make up the verb "to listen,"

MOTIVATIONAL INTERVIEWING

DEFINITION & SPIRIT

DEFINITION: Motivational interviewing is a client-centered, evidence-based, goal-oriented method for enhancing intrinsic motivation to change by exploring and resolving ambivalence with the individual.



SPIRIT: Collaboration, evocation, autonomy, respect, compassion



One thing I liked
was....

One thing I learned
was....

One thing I am going to
try is....



Where Can I Learn More?

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William Miller and Stephen Rollnick

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Thank You!

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Last Thoughts

Until one is committed, there is hesitancy, the chance to draw back, always ineffectiveness, concerning all acts of initiative and creation. There is one elementary truth, the ignorance of which kills countless ideas and splendid plans: That the moment one definitely commits oneself, then Providence moves too. All sorts of things occur to help one that would never have otherwise occurred. A whole stream of events issues from the decision.

-Johann Wolfgang Von Goethe