



Module 5

Motivational Interviewing as a Counseling Style



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment
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Assumptions of Motivational Interviewing



- Ambivalence is normal **and** an obstacle.
- Ambivalence can be resolved.
- Collaborative partnership—each has expertise.
- An empathic, supportive, yet directive, counseling style facilitates change.
- Direct argument/aggressive confrontation may **increase** defensiveness, **reduce** likelihood of change.



Express Empathy

- The key component of expressing empathy is reflective listening.
- Imposing direction and judgment rather than listening reflectively creates barriers that impair the therapeutic relationship.



Develop Discrepancy

- Clinicians help clients recognize discrepancies by using carefully chosen, strategic reflecting.
- Clients' cultural background affects their perceptions of discrepancy.
- Clinicians must have a good understanding of the clients' cultural values.



Avoid Argument

- Power struggles between clinician and client do not enhance motivation for change.
- When it is the client, not the clinician, who voices arguments for change, progress can be made.



Support Self-Efficacy

- Communicate belief in the client's capacity
- Talk about how others in similar situations have changed
- Provide opportunities for other clients to act as role models
- Provide credible, understandable, accurate information
- Provide information about tools for recovery in a way that instills hope in the client
- Break the change process down into achievable small steps



Roll With Resistance

Resistance is a signal that the clinician needs to change direction with or listen more carefully to the client.