

# **Motivational Interviewing & the Five R's: Helping Clients Who Aren't Ready to Quit**

**The New York State Cessation Center  
Collaborative Statewide Conference Call**

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# Disclosure

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**I have no real or perceived vested interests that relate to this presentation nor do I have any relationships with pharmaceutical companies, biomedical device manufacturers, and/or other corporations whose products or services are related to pertinent therapeutic areas.**

# Training Objectives

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- Understand the applications of the Principles & Practice of Motivational Interviewing in assisting tobacco-users to quit.
- Learn strategies to integrate motivational enhancement interventions into the 5 R framework.
- Explore how to stay motivated as a provider when addressing tobacco use cessation.

# Important Theorists

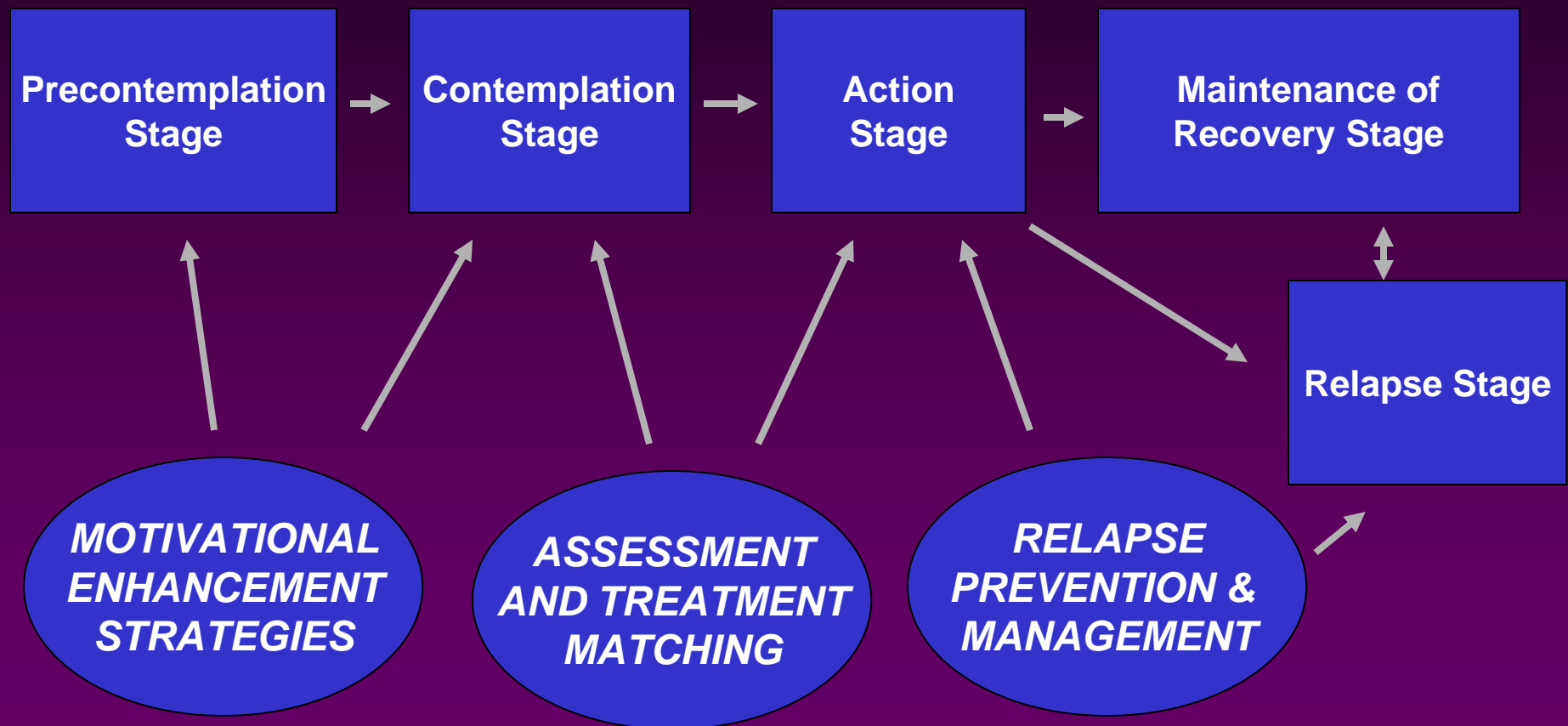
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“Named must be your fear before  
banish it you can.”

Yoda



# Stages of Change in Substance Abuse and Dependence: Intervention Strategies



# Brief Interventions

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- Motivational Enhancement Therapy (Motivational Interviewing) Miller and Rollnick, 1991

Client-centered, directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence.

# Motivational Interventions

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## Guiding Principals

- **F**eedback on personal risks
- Taking personal **R**esponsibility for changing
- **A**dvice to change when appropriate
- **M**enu of options for change
- Relaying **E**mpathy
- Eliciting sense of **S**elf-efficacy

# Motivational Interventions

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- Core Components in English
  - Try not to argue or be “pushy”.
  - Show client you understand their perspective.
  - Be optimistic, supportive and hopeful.
  - Explore inconsistencies between the “problem” behavior and the client’s goals and values.

Adapted from Jeff Allison 2006



# OARS

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- Open-Ended Questions
- Affirmations
- Reflective Listening
- Summaries

# “Spirit of MI”

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Too much focus on the techniques of MI results in a loss of its essential style, “spirit” or way of being

- Motivation elicited from the client, not imposed from without.
- Client's task to articulate + resolve ambivalence.
- Persuasion is not an effective method for resolving ambivalence.
- Readiness to change not a client trait, but a fluctuating product of interpersonal interaction.
- The therapeutic relationship is a partnership rather than expert/recipient roles.

# Motivational Interviewing

Behaving

## Techniques

Open-ended  
Questions

Reflective  
Listening

Affirm

Summarize

Elicit  
Change Talk

## Core Components

Express  
Empathy

Avoid  
Argumentation

Roll with  
Resistance

Develop  
Discrepancy

Support  
Self-efficacy

Being

## Spirit

Collaboration

Evocation

Autonomy

# Integrating MI with other Approaches?



# The 5 R Model

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- Relevance
- Risk
- Rewards
- Roadblocks
- Repetition

# The 5 R Model

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- Relevance

- Find out why the patient wants to quit
- Allow for the possibility they don't!

- What reasons do you have for wanting to quit?
- Let's say you decided to quit tomorrow, what do you think would be your main reasons for doing so?

# The 5 R Model

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- Risks
  - Find out which risks are most important to the client to avoid.
    - What do you make of the health risks we discussed?
    - Of all the negative things you know about smoking, what worries you the most?

# The 5 R Model

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- Rewards
  - Understand what positive benefits of quitting are most valuable to the client.
    - What would be the most important things you will gain by quitting?



# The 5 R Model

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- Roadblocks
  - Identify with the client the most significant barriers to their successful quitting.
    - What are the things that make it difficult to you to quit?

# The 5 R Model

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- Repetition
  - Revisit any of the previous steps when there is a relapse or any resistance. Also an opportunity to affirm client and normalize difficulties.

To cease smoking is the easiest thing I ever did.  
I ought to know because I've done it a thousand times.

~Mark Twain

# Change Talk v. Sustain Talk

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- Change talk is client speech that favors movement in the direction of change (Why I should quit smoking).
- Sustain talk is client speech that favors the status quo (Why I should continue smoking).

I smoke 10 to 15 cigars a day, at my age I  
have to hold on to something.

-George Burns

# Change Talk v. Sustain Talk

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# Change Talk v. Sustain Talk

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The FedEx logo is displayed in a white rectangular box. The word "FedEx" is written in a bold, sans-serif font. The letters "Fed" are blue, and the letters "Ex" are orange. The "E" and "x" are connected.

## Case # 1

I've been smoking for 17 years. Basically since high school. Smoking is a double edged sword. On one hand it's the only way I know how to relax, on the other, I know its bad for me. My kid is five and he even tells me to quit. Its just hard, you know? After all these years some habits are hard to break. I have had a cough that isn't going away and that stresses me out. I mean... you never know. But I don't see myself without a smoke here and there.





# Case # 1



## Possible Hooks

- Relationship with Son
- Health concerns: Cough

# Case # 1

## Change Talk

“I know its bad for me.”

“My kid is five and he even tells me to quit.”

“I have had a cough that isn’t going away and that stresses me out.”

“You never know.”

# Affirmations

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- Acknowledgement of...
  - Struggles or difficulties
  - Successes
  - Skills and/or strengths
  - Goals and values
  - Notice and appreciate a positive action—  
“Catch them being good”

# Affirmation Examples

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- “It takes courage to face such difficult problems.”
- “This is hard work you’re doing.”
- “You really care a lot about your family.”
- “Your anger is understandable.”
- “It must have taken a lot of courage to come in today knowing we were going to talk about you ‘slipping up’ and having a few cigarettes.”

**If I don't have a cigarette I may get angry...  
You wouldn't like me when I'm angry....**

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# Strategies For Staying Motivated

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- Challenging & resistant clients can be exhausting
- May frustrate, confuse and anger
- Self-Care and mindfulness

# Strategies For Staying Motivated

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- Excuse yourself and go for a quick walk.
- Go to the bathroom or other protected space.
- Ask yourself, “What do I want to do now?”

# Mindfulness to Go

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- Before you see/call a difficult client
  - Take 3 deep breaths and smile
- Before you see each patient
  - Take a minute to focus
  - Ritual?
    - Imagine that this is the *first* client you have ever seen.
    - Imagine that this is the *last* client you are going to see.
  - Attempt to put everything out of your mind
  - “Full Stop”
- Meditate for a designated time everyday
  - Ideally 20-30 minutes



# Guided Mindfulness Meditation



1. Breathing in, I know I am breathing in. Breathing out, I know I am breathing out.
2. Breathing in, my breath grows deep. Breathing out, my breath goes slowly.
3. Aware of my body, I breathe in. Relaxing my body, I breathe out.
4. Calming my body, I breathe in. Caring for my body, I breathe out.
5. Smiling to my body, I breathe in. Easing my body, I breathe out.
6. Smiling to my body, I breathe in. Releasing the tensions in my body, I breathe out.
7. Feeling the joy of being alive, I breathe in. Feeling happy, I breathe out.
8. Dwelling in the now, I breathe in. Enjoying the present moment, I breathe out.
9. Aware of my stable posture, I breathe in. Enjoying the stability, I breathe out.

**Excerpted from *The Blooming of a Lotus* by Thich Nhat Hanh**

# Ways to Keep Learning MI

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- Be willing to try it.
- Further reading:
  - MI 2<sup>nd</sup> Edition
  - [www.motivationalinterviewing.org](http://www.motivationalinterviewing.org)
- Seek supervision/coaching.
- Form a peer discussion group.
- Attend more trainings.
- [www.jonathanfader.com](http://www.jonathanfader.com)

# Questions?



[www.jonathanfader.com](http://www.jonathanfader.com)