



NORTHWEST AIDS EDUCATION AND TRAINING CENTER

Improving Adherence: Motivational Interviewing

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ADHERENCE

Adherence to taking medications as prescribed is a major challenge for many of our patients

- Improving adherence, when possible, is a long term process
- There are many ways to help improve adherence. Motivational interviewing is an essential part of a the toolkit to accomplish this goal.

Why Motivational Interviewing?

Why MI?

- Improving adherence could markedly affect HIV and the healthcare system.
 - Slow the spread of HIV
 - Have healthier patients
 - Spend less on healthcare
- Simple education and a directive to take one's meds does work with some patients, but often the reasons that someone is missing doses is very complex.
- MI is a proven technique for helping those with drug and ETOH addiction, resulting in sustained reduction in use over many years. What can it do for adherence issues?

What is Motivational Interviewing?

MI is a type of conversation which attempts to elicit and strengthen motivation for change

- Developed in 1983 by William Miller and based on his experience with problem drinkers
- MI methodologies have been empirically tested and proven to be effective
- Designed to draw out a patient's ambivalence about an activity, and by highlighting the ambivalence, allow the patient to think through his/her decisions and motivations.
- Based on the premise that a patient's own motivations for change are more powerful than trying to impose the clinician's views and reasons for change on the patient.
- Goal is to guide the conversation in such a way that the client is likely to start talking about change

How Does MI Work?

How does MI work?

EMPATHY

- MI begins with open-ended questions, and ideally come from a place of genuine interest in the patient's situation.
- Goal is to normalize talking about why someone isn't taking their meds so that they feel comfortable opening up to you about this
 - "I wanted to talk to you today about your HIV meds and how you feel about taking them. I've worked with a lot of patients who struggle with taking meds every day, and I know it can be a really difficult thing to do. Some of my patients struggle with remembering to take the pills, or they don't like how it feels to have to take something everyday. What's it like for you?"

How does MI work?

Developing Discrepancy

- Goal is to increase the reasons for making a change from the patient's point of view. Ideally, the question & answer exchange will answer: How does not taking your meds as prescribed fit into your greater value system?
- Accomplished by asking specific types of questions, and by using reflective listening

How does MI work?

Developing Discrepancy, continued

What types of questions should I be asking?

- Open ended
- Ask for pros/cons of not taking meds
- Ask for elaboration and/or examples
- What happens if things continue as they are?
- What would be different if you took your meds?
- Explicitly side with the negative aspects of making a change

How does MI work?

Roll with Resistance

- Come from a place that understands that resistance to change is completely normal, and not rooted in pathology or denial
- Based on the principle that efforts to push someone to change often result in an equal or greater push back to not make that same change.

How does MI work?

Supporting Self-Efficacy

- Patients can feel that making change is not possible for them, either because they have failed in the past, or because they don't see another way to do things.
- By highlighting genuine strengths, MI can rekindle interest in making an attempt and change, and can allow the patient to think differently about themselves and the likelihood of their success.

Things to keep in mind

- MI works best when you hold back on telling the patient why he/she needs to change, no matter how difficult this may be to do. The patient needs to develop his/her own reasons & motivations for changing.
- MI is a process, and many patients may be very reluctant to consider any change at all. This does not mean that your MI techniques are not worth continuing.
- MI does not have to take a huge amount of time.

Resources

Miller W. R., Rollnick, S. (2002). Motivational Interviewing: Preparing people for change. 2nd Edition. New York: Guilford Press.

<http://www.motivationalinterview.org/index.html>

<http://www.ncbi.nlm.nih.gov/books/NBK64964/>