

# Influencing Health Behaviours When Time is Limited

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*Behaviour Change Training (BCT)*

# Consider Changing Yourself.....

Take a step back from changing patients' behaviours to focus on your own health behaviours, professional roles and assumptions. Learning from your own attempts to change your personal and professional behaviours will help you to empathize and work more effectively with your patients

Dr Rick Botelho

Consider Changing Yourself.....

**What Motivates You?**

# Think of something you would like to change...

How IMPORTANT is it to you?



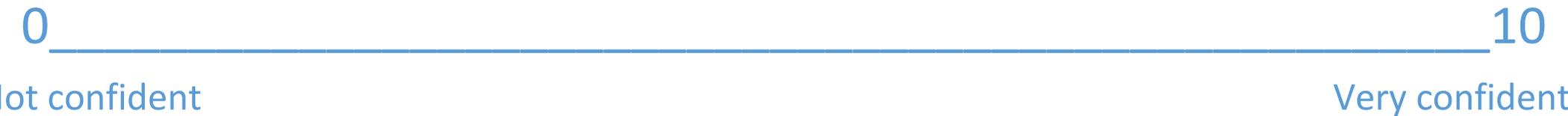
What makes it .... (your reasons)?

If on the lower end, what makes it ... and not zero?

Is there anything that is likely to influence where you have placed yourself that would make it more important?

# If you were to consider change.....

How confident are you?



Is there anything that might get in the way or make it difficult?

What might help?

Is there anything that I can do that would be helpful?

# What Influences Motivation?

## **Values (Links to importance)**

- The more central or core to you the value is, the more long-last-lasting and pervasive the change is likely to be

## **Beliefs (Links to confidence)**

- Your beliefs are more influenced by what you hear yourself say than by what others say to you

## **The Helping Style of the Practitioner**

# What Influences Motivation?

**Importance**



**Confidence**

# Importance

Priority

Want

Willing

Need

Reason

Inspired

Determined

Vision

- Goal
- Belief
- Knowledge
- Timing
- Etc.

# Confidence

Able  
Can do  
Could do  
Self-belief  
Self-esteem  
Mood  
Knowledge  
Skills  
Attitude

- Obstacles
- Barriers
- Difficulties
- Timing
- Optimism
- Support
- Etc

# Basic Skills in MI

## Active Listening Skills

- Non-verbals, questions, reflective listening, summaries

## Affirmations

## Offering Information & Advice

# Key Skills

## Reflective listening skills

- Help build and strengthen motivation
- The person feels heard and understood
- Frees them up to consider change

Be curious – genuinely interested

Be empathic

Be non-judgemental (acceptance)

Pay attention to:

- Pace and tone of voice

# Acceptance

Absolute Worth

Support Autonomy

Affirmation

Accurate Empathy

# Affirmations

Appreciate a strength or positive action

Should be both true and genuine

Express positive regard and caring

Strengthen working alliance

Diminish defensiveness

# Affirmations include:

Commenting positively on an attribute

*'You're a very resilient person'*

A statement of appreciation

*'I appreciate your openness and honesty.'*

Catch the person doing something *right*

*'Thanks for coming in today!'*

A compliment

*'I like that idea.'*

An expression of hope, caring, or support

*'I hope this weekend goes well for you!'*

# What goes wrong?

When 2 worlds collide.....

For Patients:

- The Dilemma of Change - Ambivalence

For Practitioners:

- The Righting Reflex

# What influences motivation?

## The Helping Style of the Practitioner

*'Making people feel bad doesn't help them to change'*

*'If you are told what to do, there is a good chance that you will do the opposite!'*

(Miller & Rollnick 2012)

# Normal Human Reactions To Being Told What To Do

## Feel Invalidated

Not respected  
Not understood  
Not heard  
Angry  
Ashamed  
Uncomfortable  
Unable to change

## Resistant

- Arguing
- Discounting
- Defensive
- Oppositional
- Denying
- Delaying
- Justifying

## Withdraw

- Disengaged
- Disliking
- Inattentive
- Passive
- Avoid/leave
- Do not return

# Normal Human Responses to an Empathic Style

## Accept

- Open
- Undefensive
- Interested
- Cooperative
- Listening

## The Approach

- Talk more
- Engaged
- Activated
- Come back

*Which people would you rather work with?*

# A Change of Role

**You don't have to *make* change happen**

*You can't*

**You don't have to come up with all the answers**

*You probably don't have the best ones*

**You're not wrestling**

*You're dancing*

# Motivational Interviewing

## Definition

**Motivational interviewing is a collaborative conversation style for strengthening a person's own motivation and commitment to change**

Miller & Rollnick 2011

# 10 Things MI is Not

1. Stages of Change
2. A way of tricking people into change
3. A Technique
4. Decisional Balance
5. Assessment Feedback
6. CBT
7. Client-centred therapy
8. Easy to learn
9. What you are doing already
10. A Panacea

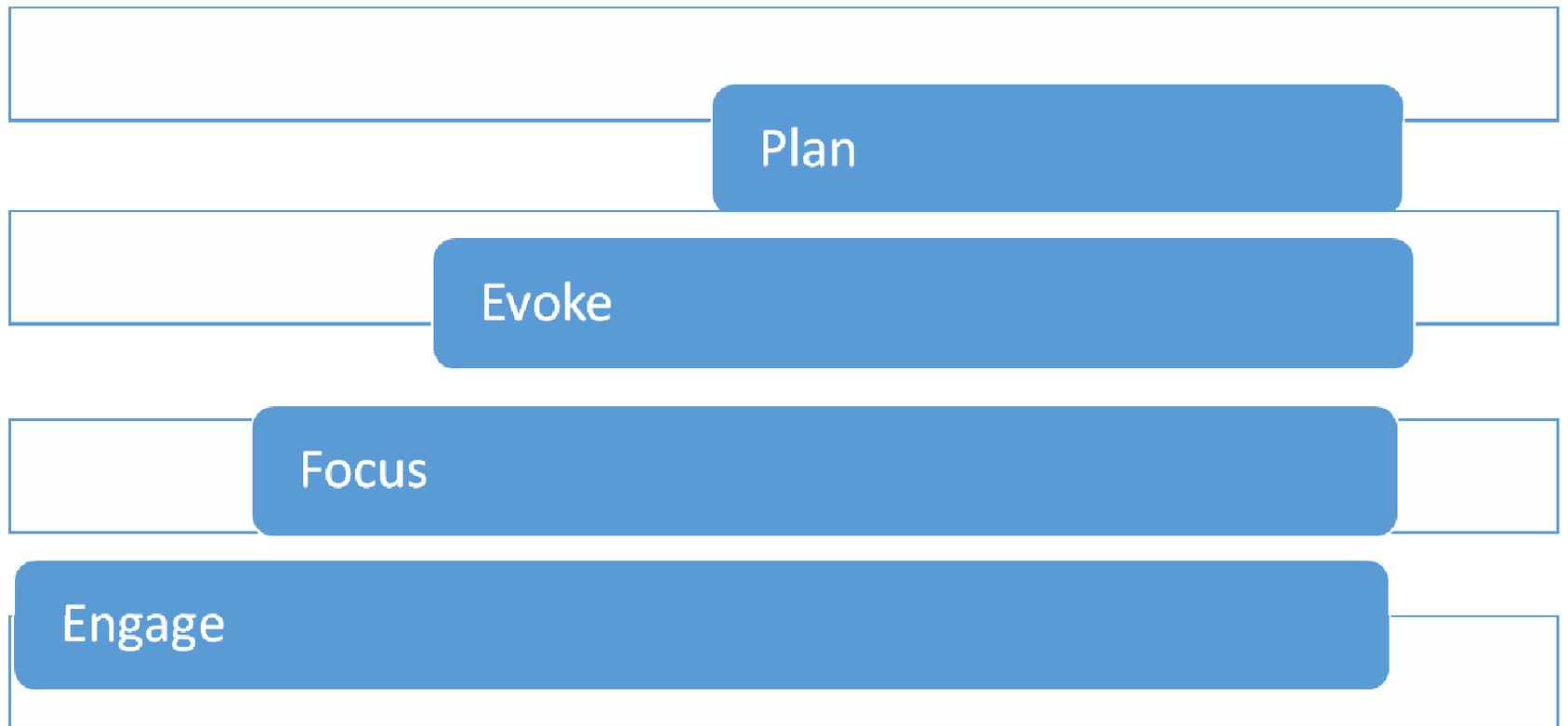
# Commonly held beliefs

*'I'm doing this already'*

*'Some people will never change'*

*'They are just not motivated'*

# Four key processes in MI



# Evidence

The evidence base for motivational interviewing is strong in the areas of addictive and health behaviors. Useful as a brief intervention in itself, MI also appears to improve outcomes when added to other treatment approaches.

Annu. Rev. Clin. Psychol. 2005. 1:91–111

The effectiveness of MI varies widely across counselors, studies and sites within studies

Fidelity of delivery is an important consideration in understanding the outcomes of MI and should be well documented in future studies using reliable observational codes

Miller & Rollnick 2011

# Motivational Strategies

Exchanging information

Explore motivation & readiness to change

Elicit current behaviours (Typical Day)

Self-monitoring

Exploring options/help with decision making

Goal setting (Change Plan)

Explore Ambivalence

# Exchanging Information

- Check what patient already knows
- Ask permission
- Offer information in a neutral way
- Ask for patient's reaction
  - ‘What do you think of that?’

Elicit- Permission-Provide-Elicit

# Rolling with Resistance.....

Resistance = Discord + Sustain Talk

*Avoid:*

Arguing

Confronting

Persuading

Telling the patient what to do

Judging

**Listen/reflect, listen/reflect, listen/reflect.**

# Change Talk

## *Preparatory Change Talk*

**DESIRE** to change (want, like, wish . . .)

**ABILITY** to change (can, could . . .)

**REASONS** to change (if . . . then)

**NEED** to change (need, have to, got to . . .)

# Change Talk

*Mobilizing* Change Talk

COMMITMENT (intention, decision, promise)

ACTIVATION (willing, ready, preparing)

TAKING STEPS

# Goal Setting

## Develop A Plan

What is the overall desired outcome?

What are your reasons for wanting to do this?

What is the first step (or next step)?

How are you going to be achieve that?

- Pay attention to detail

What might get in the way?

How might you get round that?

- Pay attention to detail

WHEN are you going to start?

# Goal Setting

Check confidence

Encourage monitoring

- Explain rationale
- Get patient agreement
- Discuss preferred method of recording
- Don't make the task more onerous than it needs to be

Agree on review

When Time is Limited...

## **2 Minute Exercise**

WHAT and HOW Questions

*Try to avoid 'WHY'*

When Time is Limited...

**2 Minute Exercise**

WHAT and HOW Questions

*Try to avoid 'WHY'*

*NEVER ask 2 questions in a row!*

***Listen & Reflect***

*You are sowing the seeds of change....*

# Becoming More Skilled

Learning these skills requires practice

People learn from each other

Form a learning community

Facilitated by an expert practitioner

Always listen to and discuss work samples

Thank You!

Any questions?

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