



COMMON LANGUAGE for PSYCHOTHERAPY (clp) PROCEDURES
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MOTIVATIONAL INTERVIEWING (MI)

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Definition: A way of enhancing motivation to change by exploring and resolving ambivalence about it without the therapist advocating, or directly influencing, the client to change.

Elements: MI is a way of relating to clients to increase their motivation by:

- 1) *Expressing empathy through reflection* (e.g.: Client: “I feel nervous about seeing my father again after all these years”; Therapist: “You’re afraid you’ll be disappointed by the reunion”);
- 2) *Developing discrepancies between clients’ present maladaptive behaviors and their values and goals* (e.g.: Therapist: “While it seems important to you to be a good mother to your son, your depression often makes you unavailable to him when he needs you”);
- 3) *Rolling with clients’ resistance, seeing it as information about perceived pros and cons of change to be respected and worked with, not an obstacle to overcome* (e.g. Therapist: “It seems you’d like to stop drinking because it causes problems in your marriage, but you’re afraid stopping would leave you without friends and a way of handling stress”).
- 4) *Supporting client’s beliefs that they can help themselves* (e.g. asking about past successful change attempts in other areas).

Related procedures: *Analysing secondary gain, motivational enhancement therapy, client-centered therapy.*

Application: MI has mostly been used to treat addictions and included giving clients feedback about their substance use and how it relates to norms of such use, though such feedback is not a defining feature of MI nor usually used with MI for other disorders.

1st Use? Miller WR (1983)

References:

1. Arkowitz H, Westra H (2004) Integrating motivational interviewing and CBT in the treatment of depression and anxiety, *J Cognitive Psychotherapy*, 18: 337-350
2. Burke B, Arkowitz H, Menchola H (2003) The efficacy of motivational interviewing: A meta-analysis of controlled clinical trials. *J Consulting & Clinical Psychology*, 71, 843-861.
3. Miller WR (1983) Motivational interviewing with problem drinkers. *Behav Psychother*, 11, 147-172.
4. Miller WR, Rollnick S (2003) *Motivational interviewing: Preparing people to change*, 2nd edition. New York: Guilford.

Case Illustration (Arkowitz, unpublished)

Brad sought help for depression and anxiety. Initial sessions explored his ambivalence about change in a supportive non-judgmental manner by discussing pros (*analysing secondary gain*) and cons of his depression. He said disadvantages of being depressed were his suffering and inability to do enjoyable things and its adverse effects on family and friends. He described secondary gains that depression and anxiety

postponed having to make difficult decisions on his college major and career as he felt he couldn't decide those while depressed, and that he felt less pressure from his parents about these issues while he was depressed. He thought concerns about school and his future may have partly precipitated his depression.

When asked what activities might improve his mood (*behavioural activation, homework*), Brad proposed doing more outside home such as playing his guitar, seeing friends, and attending a meeting he usually enjoyed. By the next session he hadn't done any of these and felt less hopeful that anything would help. The therapist helped him explore pros and cons of doing these things. He concluded he expected too much of himself even in these activities. Discussion led to his reducing their extent and he agreed to try doing one (unspecified) thing outside the house which he otherwise wouldn't do. The next week he said he'd gone out to lunch with a friend and felt good about that. Over the next few weeks his activities increased and included some of the others above. Doing more and becoming less demanding of himself about school coincided with marked improvement in his depression.