MOTIVATIONAL INTERVIEWING

Preparing People to Change Addictive Behavior

William R. Miller e³ Stephen Rollnick

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MOTIVATIONAL INTERVIEWING

To my mother, Hazel Marie Reitz Miller, who shared with me by example the kind of love, patience, and faith that can transform lives.

-W. R. M.

To my dear parents, Sonia and Julian Rollnick.

—S. R.

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Preface

People change in many different ways and for a multitude of reasons. The psychology of change is a broad and fascinating subject in its own right. In one sense, in fact, psychology is the science of change.

This book represents one aspect of the larger topic of change. As therapists, we are fascinated by what motivates change in people struggling with personal problems. It is a common problem for people to seem "stuck," to persist in patterns of behavior that clearly harm them and those around them. It is an old complaint: "I do not understand my own actions. For I do not do what I want, but I do the very thing I hate" (Romans 7:15, Revised Standard Version).

Nowhere is this problem more clearly seen than in what have come to be called the "addictive behaviors": alcohol and other drug abuse, eating disorders, pathological gambling, and other compulsions (Miller, 1980; Peele, 1985). They represent what Orford (1985) has called "excessive appetites." A defining characteristic of addictive behaviors is that they involve the pursuit of short-term gratification at the expense of long-term harm. Often the person is quite aware of damaging consequences, and has resolved to control or abandon the addictive behavior, yet time and again returns to the old familiar pattern. The addictive behaviors are chronic relapsing conditions (Brownell, Marlatt, Lichtenstein, & Wilson, 1986; Marlatt & Gordon, 1985).

This problem is by no means restricted to the addictive behaviors. A central characteristic of the neuroses, as Freud and his students described them, is their self-defeating nature. Books and self-help programs abound to help people with motivational problems that are variously described as difficulties of procrastination, self-esteem, self-assertion, positive thinking, and "getting unstuck" (e.g., Simon, 1988). Within religious contexts, conceptions of sin often emphasize the struggle of immediate gratification against higher values. Our colleague Tim Stockwell once quipped that "Life is a chronic relapsing condition."

What we hope to offer in this book is a clear understanding of how people can be trapped by ambivalence, and how those who want to help them can strengthen their motivation for change. The audience to whom we have addressed ourselves here consists of our professional colleagues: counx PREFACE

selors, psychologists, members of the clergy, social workers, physicians, nurses, and any others whose work includes therapeutic engagement with people in need of change. The principles and approaches we describe are more broadly applicable in fields such as business, education, and management, but our focus here is on the therapeutic context. Most of our discussions and examples are explicitly directed to the addictive behaviors, because our own treatment and research have centered in this area, and it was in working with problem drinkers that the concept of motivational interviewing was developed. Nevertheless, we hope that the ideas and approaches we present will be helpful in working with a wide range of clients and problem areas.

Motivational interviewing is an approach designed to help clients build commitment and reach a decision to change. It draws on strategies from client-centered counseling, cognitive therapy, systems theory, and the social psychology of persuasion. The appearance of a motivational interviewing session is quite client-centered; yet the counselor maintains a strong sense of purpose and direction, and actively chooses the right moment to intervene in incisive ways. In this sense, it combines elements of directive and nondirective approaches. It can be integrated with a broad range of strategies, and can also be used to prepare a motivational foundation for other approaches (e.g., behavioral training, cognitive therapy, attending Twelve-Step groups, taking medication).

The theoretical basis of motivational interviewing lies in two broad areas. It draws heavily on the construct of "ambivalence" and the conflict between indulgence and restraint that is so clearly seen in the addictive behaviors (Orford, 1985). Failure to change a behavior that is causing problems is a phenomenon that extends well beyond the addictions, however, and the immobilizing effects of ambivalence can be seen in many spheres. A more general conceptual base, then, is found in theory and research on "self-regulation" (Kanfer, 1987; Miller & Brown, 1991). Strategies of motivational interviewing can be understood within this broad framework; they draw on principles of social, cognitive, and motivational psychology.

A few additional comments are in order. First, we present motivational interviewing as *one* approach, not as the *only* correct and proper way to proceed with clients. Although we have found this approach to be useful with many different types of people and problems, there are surely those for whom a different strategy would be more effective. Nothing works for everyone, and current knowledge of how to match clients with optimal intervention styles is quite imperfect. Similarly, we believe that not all counselors can use this approach well. In teaching motivational interviewing, we have found that trainees vary widely in how readily they can learn, apply, and be comfortable with this approach. It represents something of a

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polar opposite from an authoritarian, confrontational style. Some clinicians seem to "recognize" motivational interviewing and take to it quickly as a natural style for their work. Others perceive it to be a frustrating, slow-paced, ineffectual approach. Such differences are to be expected.

The unusual authorship of this volume deserves comment. We set out only to write a clear explanation of the whys and hows of motivational interviewing. That book is found in the first 12 chapters of this volume, which are our original work. As we wrote, however, we realized that over the years we have had many companions on the journey, and we decided to invite a number of these colleagues to contribute their own perspectives, based on their pioneering work with motivational interviewing. The result is Part III, in which 17 clinicians describe their applications of motivational interviewing in Australia, England, The Netherlands, Scotland, and the United States.

A word of informed consent: This approach is likely to change you. The style that we offer here specifically avoids argumentative persuasion, and instead operationally assumes the validity of clients' subjective experiences and perspectives. This aspect involves listening to, acknowledging, and practicing acceptance of (though not acquiescence to) a broad range of client concerns, opinions, preferences, beliefs, emotions, styles, and motivations. We find that this approach has had the effect, on us and on our students, of opening up a broader range of acceptance of human experiences and choices. This is, we believe, an enriching change, and one that deepens self-acceptance as well. Nevertheless, it can also be disquieting and draining at times to maintain this degree of openness to the validity and integrity of others' perspectives, which carries with it a regular questioning and reevaluation of one's own understanding. One does not emerge unchanged from the practice of motivational interviewing.

Finally, we tender a caution. In what follows, we argue that your personal style can have dramatic effects on people's motivation and change. The principles and strategies that we describe are explicitly intended to help you facilitate change in others. Our research and experience tell us that these are powerful processes. To the extent that this is so, the inherent risks and responsibilities of power must be taken seriously when one sets out on this path. Do not be enchanted by the processes themselves. There is a temptation to become fascinated with the strategies and their influence. When power becomes a focus in itself, energy is channeled into weaponry, influence into control, investment into greed, and healing into self-aggrandizement. Our concern ought not to be with our own power, but with our clients. Therapists have the unique privilege of sharing intimately in many lives at moments of transformation, in a role that blends agent and wide-eyed witness of change. The human processes described in the chapters that follow are change-empowering indeed, as water, air, and sunlight are vital

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elements in photosynthesis. The growth, even the life of plants can be altered by providing or depriving them of such conditions. We wish you the joy of the gardener, whose pleasure and purpose are found in using skill to nourish life and growth for which the gardener is never the source, but ever a vital participant.

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PART ONE

BACKGROUND