

Motivational Interviewing for Loved Ones

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About Me

- Psychologist (BMC) & faculty (BU)
- My expertise is treating teens and young adults with recent-onset psychosis
- NOT an MI expert
- MI has been the best tool in my toolbox
- I was always trying to explain the concepts to parents, and gradually became convinced... This should be a thing!!!
- Funding from MA Dept of Mental Health and National Institute of Mental Health to develop and pilot this content
- No commercial interest



Insight

- Recognition of one's own illness
- A spectrum – not a switch
- Can fluctuate, though poor insight is a hallmark of acute stages of psychosis

Why would someone with no insight want our help?



Attribution to the brilliant Jason Headley who created this content!

Poll 1: does this woman have “insight”?

Insight is not fixed

- How we talk about the problem can influence insight
- Feeling attacked → worse insight (have to defend point of view)
- Feeling heard and respected → better insight (open to others' input and different interpretations)

What is “Motivational Interviewing”?

- “MI” is a communication style widely used by health professionals to talk about making healthy changes – research shows it works!
- Developed with the goal of increasing motivation for treatment among people with substance use disorders
- MI is based on the idea that the best way to influence another person’s behavior is by respecting their independence and creating space for them to explore their own motivation for change.
- We’ve taken the most important concepts from MI and created “MI for Loved Ones”

Why would families be interested in “MI”?

“Putting your foot down” isn’t getting the result you want.

Though we can’t control others, we can control ourselves – we can try new behaviors to “clean up our side of the street.”

MI for Loved Ones teaches MI basics that are relevant for families



So... let's dive in

- When we see someone we love struggling, we want to help them!
- We try to help by giving them advice or just fixing the problem ourselves
- Or, reassuring them that their “problem” is no big deal

- And for some reason, they don't appreciate us!!!



The Righting Reflex

You might sound like this...



Poll 2: Is Simone signing up for dance class today?

In order to consider a healthy choice or a change, people need to feel:

Understood

“My stepdad never assumes...
he tries to see my point of view”

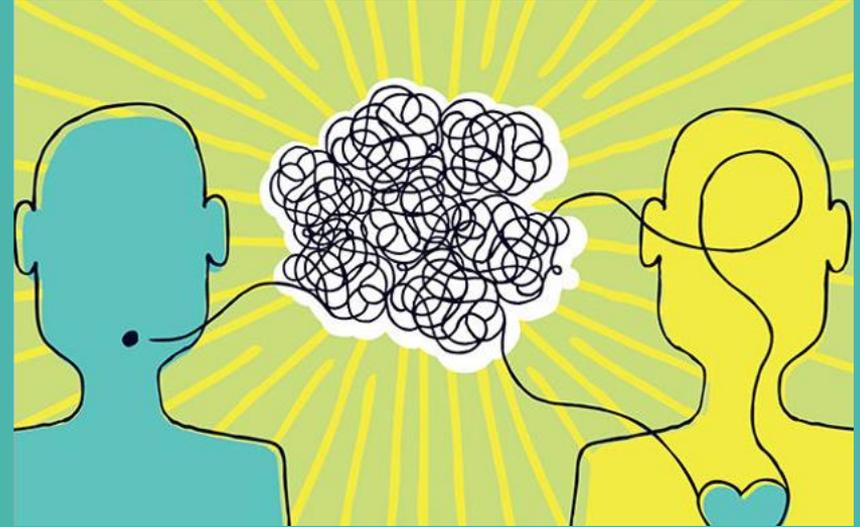
Confident

“I think I can really pass the
math course this time”

In Control

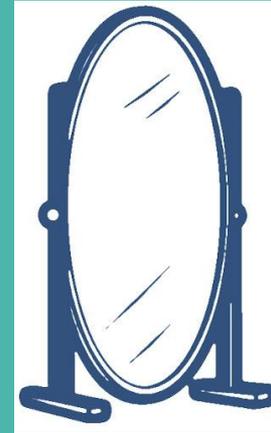
“No one can make me do things
– I’m old enough to decide for
myself”

Building Understanding Confidence & Autonomy



Tool #1: Reflections

Convey empathy and careful
listening



WHAT IS A REFLECTION?

- A Statement, Not a question
- Specific – not generic
- Repeat back what you heard the person say, or guess at the feelings beneath
- Helps the person:
 - Feel understood and accepted,
 - Hear their words think a little deeper about what they meant.



Reflections Don't Judge



- Reflections are different from praise – they don't evaluate whether someone met expectations
- Reflections don't indicate whether you agree/disagree
- As we get older, we like appreciation (“thank you”) more than evaluation (“good job”)

REFLECTION EXAMPLES

All my friends do it. So, it's not a big deal. Just get off my back, okay?

- Smoking weed seems normal to you.
- You feel like I'm making a big deal out of nothing.
- My concerns are annoying to you.

Medication makes me stupid, it's bad for my brain.

- It makes you feel stupid.
- You had problems thinking clearly when you tried it before.
- You don't think medication can help you.

Reflections Practice

Type a reflection for this statement into the chat:

My medications are none of your business!

Tool #2: Asking Curious Questions

Get curious about another's
perspective and values



Question Examples

OPEN ENDED QUESTIONS
get people talking

I'm not going to see that doctor again.

- What happened last time you met with her?
 - Help me understand where you're coming from.
 - What do you see as the pros and cons?
-

Open vs. Closed Questions

Instead of this (Closed)

- Are you feeling better today?
- Did you take your medications?
- Are you going to go to your therapy appointment today?

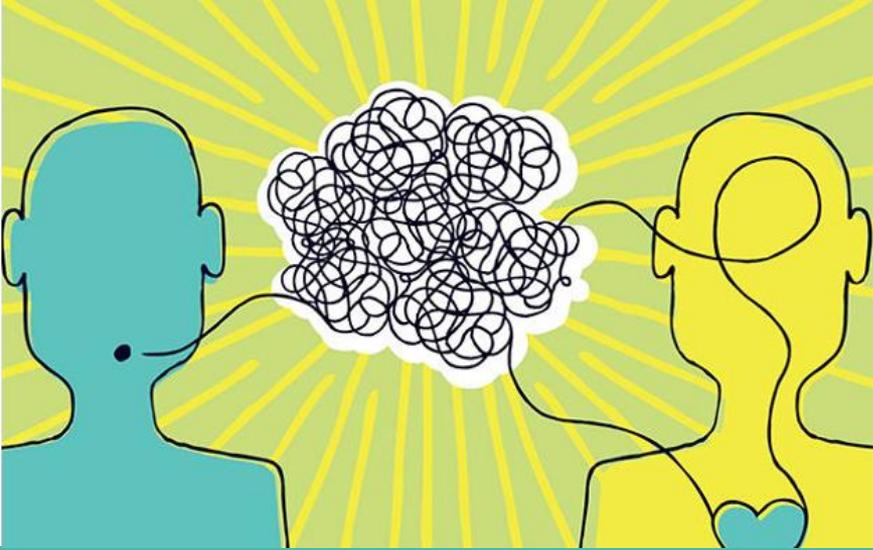
Try THIS (Open)

- What did you do today?
- What's going on with your medications?
- How has therapy been lately?
- What do you see as the pro's and con's of meeting with your therapist today?

Questions Practice

Type a question about the following statement into the chat:

No, I'm not going to Aunt Patty's wedding.

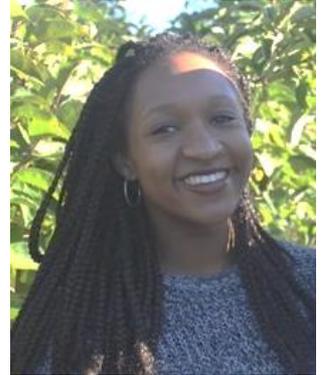


Time to Practice!

Tell me more about why you quit dancing.

Listen as this Parent:

- Reflects key points and values
- Asks an open-ended question
- Listens as Simone finds some unexpected motivation!
- Encourages her to pursue her own idea



Poll 3: Is Simone going to try something new to solve her problem?

MILO Research

- So far, we've only offered MILO in the context of research studies to test whether this intervention is feasible and effective
- I'm going to present some exciting interim research results here!

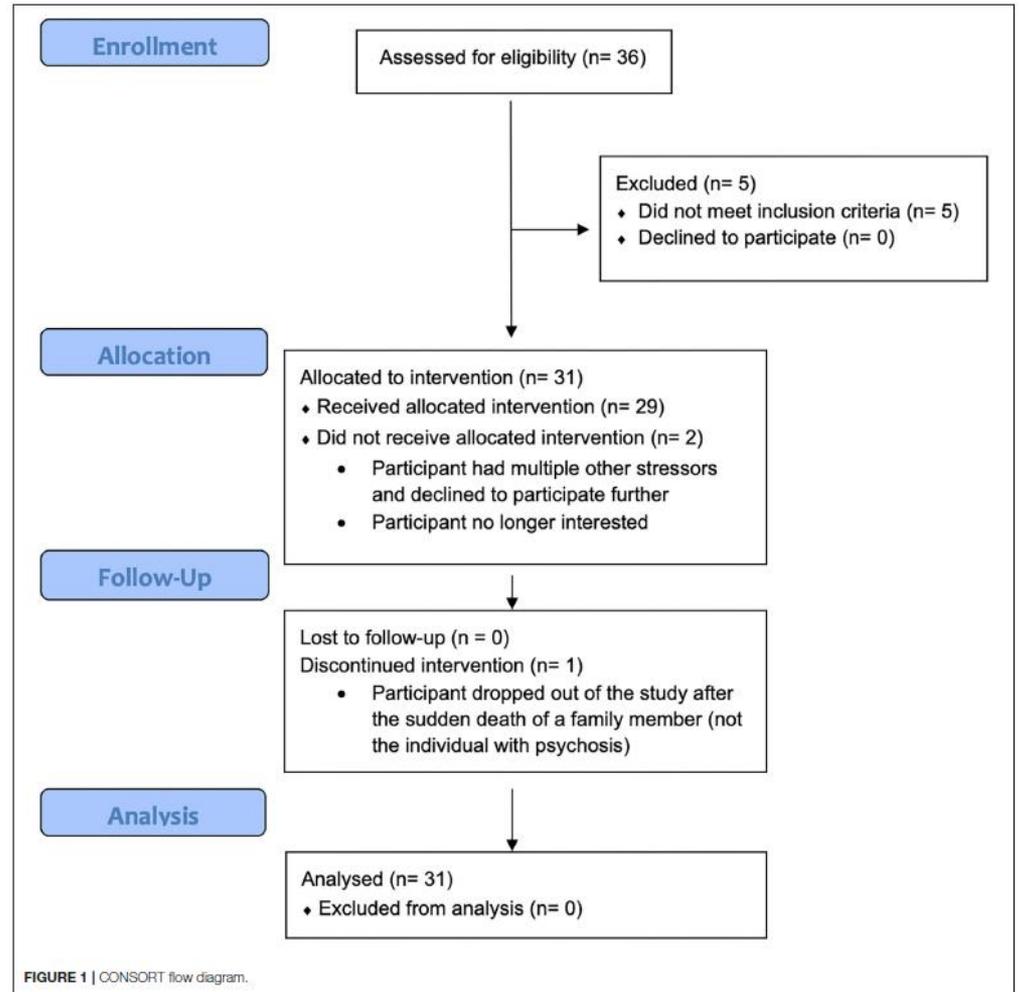
Two Formats: Group & Individual

- Group study (4 x 2-hour sessions. 6-10 parents per group) is finished enrolling
- 1:1 coaching (4-5 x 1-hour sessions) for parents of individuals with recent-onset psychosis still enrolling



Feasibility

- First 30 participants were enrolled in the “feasibility trial”
- Aims: learn whether caregivers would sign up for MILO, attend multiple sessions, find the content relevant and useful, and get their suggestions for improvement



Feasibility

- High interest from parents
- Telehealth expanded accessibility for many
- No one dropped out after 1 session, and almost everyone attended the full course
- Of the 29 participants who did 3+ sessions, 28 did post-MILO assessments

Satisfaction

- Twenty-five of the 28 participants who completed post-intervention assessments reported that they had used the skills they learned
- Twenty-six out of 28 participants who completed post-intervention assessments reported that they would “definitely” recommend the service to a friend in need of similar help
 - And a lot of them did!

What did they get out of MILO?

Prompt	Identified theme (number of responses within this theme)
What have you found most helpful about this program?	MILO skills (22) Motivational interviewing “spirit” (7) Expertise and/or empathy of facilitator (6) Individualized advice about a specific family situation (6) Role plays (6) Convenience of telehealth (1)
What changes would improve this program in the future?	Offer more sessions and practice opportunities (11) Change wording/response options in one or more questionnaire (4) No changes (3) Provide scripts or memory aids to help with skill implementation (3) Improve telehealth platform (2) Offer training in a group format (2) Expand to diagnoses beyond FEP (2) Provide more rationale for motivational interviewing (1)
What barriers to implementing the MILO skills did you experience?	No barriers (9) Limited contact with the individual with psychosis (7) Not enough training/practice (5) IP not responsive to attempts to use skills (4) Difficulty managing own emotions during conversations (3) Not enough time for longer conversations (1)

Quantitative Outcomes: What do we want parents to get out of attending?

- Increased treatment attendance/adherence (IP)
- Reduced stress (parent)
- Higher confidence (parent)
- Less conflict with family (parent)
- Less resentment and “helicopter” attitude toward their children: “Expressed Emotion” (parent)

Expressed Emotion

- Expressed Emotion is a strong predictor of youth mental health outcomes – if parents have **high** EE, youth are more likely to have **persistent** or **more severe** mental health issues



- EE has 2 facets: Emotional Overinvolvement (“helicoptering”) and Criticism

Non-judgmental

“Best
friends”

MI

Over-
Involved

Supports
Autonomy

EE

“Get out of
my house”

Critical

RESEARCH CONCLUSIONS (SO FAR)

- Parents report that MILO has helped them manage their role as caregivers to young adults with psychosis
- Parents can master some basic MI skills that will give them more confidence in handling challenging conversations
- Often the young person is ambivalent about involvement with mental health services – but we (MH providers) can be more creative in finding ways to support those who are motivated (parents, caregivers, partners)

Pop quiz (polls 4, 5, & 6)

Next Steps

- Continue enrolling for MILO – randomization phase
- Analyze results from group feasibility pilot (50 participants)
- Train more providers to offer MILO
- Offer on-demand E-Learning Course
 - Available soon at **WWW.HANDHOLDMA.ORG**

Want to learn more?

Recommended Reading

- I'm not sick I don't need help! (Amador)
 - Motivational Interviewing (Miller & Rollnick)
 - Talking to your kids about psychiatric medications (Kline)
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Get in touch:

WWW.MILOSTUDY.COM

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Thank You!