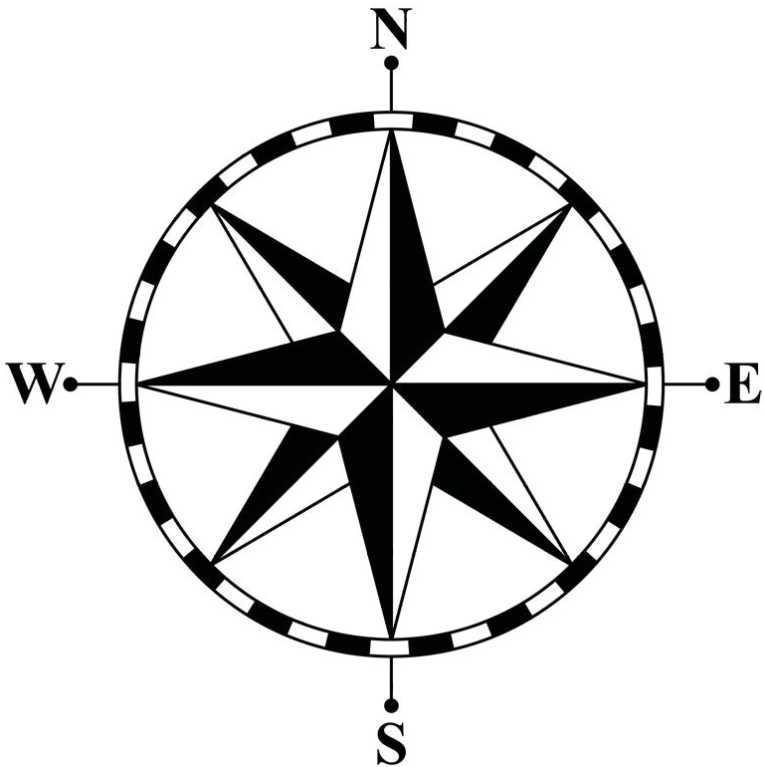


Motivational Interviewing

Unlocking your Goals: Navigating through the Challenges of Change

A Self-help Packet



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Preface

This is a self-help booklet designed to help chaplains in their ministry to service members of the United States Armed Forces. The intended end user of this packet would be any service member who is contemplating change. It is based on the principles of Motivational Interviewing (MI). Service members may work on this packet independently and at their own pace. While the purpose of this packet is to aid chaplains in their ministry, chaplains are discouraged from pressuring any of their service members to use it, for this pressure goes against the overall spirit of MI.² Rather, this is simply a pressure-free resource that service members may choose to use.

The inspiration for this packet comes from Alan Zuckoff's book, *Finding Your Way to Change*. Zuckoff is a long-time trainer for MI and is the only author to date to write a self-help book based on the MI principles. Having read Zuckoff's book and completed his form, I have come to recognize the power that an MI-based self-help packet can have on fostering change. From the initial outset of learning about MI, its principles resonated with me and I was convinced by empirical research that it was a sensible approach. However, it was not until I completed Zuckoff's self-help process that I was able to witness the benefits of MI in practice. I approached the book and form while keeping in mind the issue of my sleeping habits.

Throughout all of my college years I had developed a habit of going to bed late, mostly because I would get caught up in homework, tasks, or simply "unwinding" late into the night. I had the desire to improve my sleep, but this desire rarely affected

my daily routine. After attempting to go to bed earlier several times, but always failing in my efforts, I wondered whether this was a habit I was capable of breaking. By completing Zuckoff's form I was able to take some of the pressure off of myself, while examining what it was that I truly desired. After exploring my values, clarifying my goal, and recruiting my strengths, I began making significant improvements in my sleeping habits. Due to the amount of reading and writing, coupled with a typical busy schedule, this process took several months. In the end, however, I came to recognize that I was much more capable of changing my habits than I had expected. My current sleeping habits are something that I am proud of and believe that they help me in several facets of my life. I attribute much of this successful change to Zuckoff's self-help model of MI.

Finding Your Way to Change is over 250 pages long and includes a corresponding form which is ninety pages long. They are intended to be completed together. The book follows five fictional characters through their personal journeys of change while also allowing the reader to journey alongside them. However, considering the length of Zuckoff's book and form, it would be hard to imagine that busy service members who are ambivalent about change would be willing to engage in such a time-intensive endeavor. For this reason I am developing a self-help packet that also utilizes the principles of MI. While the overall purpose of this packet mirrors Zuckoff's, this packet only includes one fictional character for a case example and it is organized around the four MI processes: engaging, focusing, evoking, and planning. It does not have an accompanying book, but instead contains condensed text in the packet itself.

It is significantly shorter than Zuckoff's form and is meant to offer an abbreviated version of an MI-styled self- help guide. The shorter packet and absence of a book should make it more feasible for chaplains to distribute these packets to any of their service members who would like one.

Chaplains may be as involved or uninvolved in this process as the occasion dictates. For example, if a service member is talking about a New Year's resolution that he will be starting, the chaplain may offer the packet to assist in the service member's endeavor. The only involvement here is giving the packet to someone who is interested. In other cases, however, a chaplain may be visiting with a service member who is in the thick of change for several sessions. This packet may serve as homework and as a reference for talking points during visits. Regardless of the level of involvement that chaplains choose to take, this packet is simply a resource that they are free to use.

As a final disclaimer, this booklet is not intended to teach service members about MI as much as it uses MI tenets as a framework to guide the conversation about change. It may seem strange to call this a "conversation" because the service member may not ever share his responses with anyone besides himself. However, I find conversation to be an appropriate term because the reader will be communicating with his inner self as he maneuvers through the intricacies regarding change.

This self help packet is divided into two parts. The first part provides information about Motivational Interviewing (MI) through a survey of the literature with an explanation for military chaplains about the four processes of MI: engaging, focusing,

evoking, and planning.

The Second part (**Part II**) is a case study that takes the chaplains through various issues. It is designed to help chaplains in their ministry to service members who are contemplating change. The principles in this booklet are based on Motivational Interviewing which will be explained in the first part.

Part I—Introduction

Military chaplains enjoy a history that can trace its roots back to the Continental Army in 1775. They serve as spiritual leaders that are primarily responsible to support commanders and their troops by “providing for the free exercise of religion and providing religious, moral, and ethical leadership.”¹ Chaplains also act as a pastoral counselors for any service member who is seeking support on a confidential basis. Providing pastoral care includes support for issues such as suicidal thoughts, fear, grief, trauma, crisis intervention, spiritual direction, or assisting with making life changes.²

While they are generally not licensed counselors, the pastoral counseling provided by chaplains makes it important for them to be competent in basic counseling skills, as well as possessing openness, empathy, and warmth. Chaplains are involved in major crossroads for service members as they make life changes. This can come as a first sergeant directs one of his troops to see a chaplain when problems are observed, or it could be related to problems with substance abuse, anger management, or something else that leads to poor work performance.³ A chaplain often receives such referrals because they are an effective first line of defense that can assist without negative paperwork that can permanently mar a service member’s record. Even more common than command referrals, service members will often see a

1. Field Manual 1-05 Religious Support (Washington DC: United States Government, 2012), 1-1.

2. *Field Manual* 1-05 Religious Support, 1-05.

3. When referring to genders (i.e., “his” or “her”) this paper will alternate between the two, but in no specific order.

chaplain on their own to simply talk about their struggles or to discuss options for overcoming obstacles.

Information Provided

Motivational Interviewing (MI) is a counseling approach that helps accommodate person-driven change by addressing roadblocks of ambivalence. It is a model and style that fits well with the type of pastoral counseling that chaplains provide. Chaplains are on the forefront of helping people with change, yet they operate in an interfaith environment where it is critical to counsel with neutrality, always respecting the values of service members. Chaplains are expected to evoke the best out of their service members, to facilitate positive changes, and to do so without imposing personal values. This is essentially the spirit of MI.

Provided information aims to inform military chaplains about what MI is and how it can benefit them in their ministry. MI is not cure-all technique or school of practice that promises solutions to all problems that service members face. Rather, it is a “style of being with people, an integration of particular clinical skills to foster motivation for change.”⁴ A chaplain who considers implementing principles of MI need not worry that she would have to forsake her personal model of pastoral care, for MI is generally intended to supplement and enhance already-established models rather than replacing them.⁵ In essence, this project is intended to provide tools to chaplains for helping ser-

4. William R. Miller and Stephen Rollnick, *Motivational Interviewing: Helping People Change*, 3rd ed. (New York: Guilford Press, 2012), 35.

5. Miller and Rollnick, *Motivational Interviewing*, 35.

vice members make positive life changes.

What is Motivational Interviewing

MI first emerged from conversations that took place in Norway in 1982 which led to the first published research article in 1983 by Dr. William (Bill) Miller. A few years later Bill Miller's path crossed with Dr. Stephen Rollnick, an avid follower of MI's rudimentary framework. Together they wrote the first edition of *Motivational Interviewing* in 1991, focusing the model on addictions. After two decades they produced a second edition which differed greatly from the original by expanding the application of MI to "a broad range of problem areas" instead of limiting it to addictions.⁶ The third, and most recent edition of *Motivational Interviewing* was published in 2013 and is as different from the second edition as the second edition was from the first. While the core of MI's style remained the same, the details of its processes were updated so dramatically that "more than 90% of the writing is new."⁷

The first two editions of *Motivational Interviewing* ironically provided no definition of MI. Before the third edition of *Motivational Interviewing*, the best definition came from an article written by Miller and Rollnick which explained that MI is "a directive, client-centered counseling style for eliciting behavior change by helping clients to explore and resolve ambivalence."⁸

One reason why MI lacked a clear definition for so many

6. Miller and Rollnick, *Motivational Interviewing*, vii.

7. Miller and Rollnick, *Motivational Interviewing*, vii.

8. Stephen Rollnick and William Miller, "What Is MI?," *Motivational Interviewing*, May, 2001, accessed December 28, 2015, <http://www.motivationalinterview.net/clinical/whatismi.html>.

years was due to the complexities of not being a rigidly defined practice. With the third edition of *Motivational Interviewing*, Miller and Rollnick attempted to define MI, but could only do so by providing three separate definitions. The first is what they consider to be a layperson's definition that focuses on the purpose of MI. It states that "Motivational Interviewing is a collaborative conversation style for strengthening a person's own motivation and commitment to change."⁹ This definition highlights the fact that MI is a collaborative conversation instead of a directive lecture while also pointing out that the motivation for change always belongs to the client.

The second definition is that "Motivational Interviewing is a collaborative, goal-oriented style for addressing the common problem of ambivalence about change."¹⁰ This is considered the practitioner's definition which focuses on recognizing that ambivalence inhibits change while MI helps resolve ambivalence.

Finally, the third definition is that "Motivational Interviewing is a collaborative, goal-oriented style of communication with particular attention to the language of change. It is designed to strengthen personal motivation for and commitment to a specific goal by eliciting and exploring the person's own reasons for change within an atmosphere of acceptance and compassion."¹¹ This is considered to be the technical definition that includes principles from the first two definitions while also underscoring the power that acceptance, compassion, and change language can have in fostering change.

⁹ Miller and Rollnick, *Motivational Interviewing*, 12.

¹⁰ Miller and Rollnick, *Motivational Interviewing*, 29.

¹¹ Miller and Rollnick, *Motivational Interviewing*, 29.

The Spirit of “MI”

As MI developed from the 1980’s, Miller and Rollnick eventually noticed that something was lacking. They expressed feeling successful in teaching practitioners the methods of MI, but they felt like they were coming up short at getting to the heart and soul of MI. They described this as teaching the “words but not the music.”¹² They felt that without a guiding spirit, MI would be too manipulative, a method to get people to do something they would not normally want to do.

William Miller has been a longtime disciple of Carl Rogers and practiced therapy with a Rogerian style.¹³ Miller borrowed Rogers’ primary tenet that love, as shown through accurate empathy, genuineness, and unconditional positive regard, is critical for positive therapy outcomes. However, he diverges from the person-centered approach that claims this type of love is all that is needed. Instead, he feels that a “both-and rather than ‘nothing but’ perspective” is what is most beneficial.¹⁴ For this purpose, Miller and Rollnick officially coupled the MI model with a Rogerian style in the third edition of *Motivational Interviewing*, creating what they term as the spirit of MI. The spirit of MI is defined as “the underlying set of mind and heart within which MI is practiced, including *partnership, acceptance, compassion, and evocation*.”¹⁵

¹² Miller and Rollnick, *Motivational Interviewing*, 14.

¹³ William R. Miller, “Celebrating Carl Rogers: Motivational Interviewing and the Person-Centered Approach,” MITRIP 4-6, no. 3 (2014): 4-6, 10.5195/mitrip.2014.54.

¹⁴ Miller, “Celebrating Carl Rogers,” 5.

¹⁵ Miller and Rollnick, *Motivational Interviewing*, 413.

Partnership

This first principle is a reminder that MI is not an expert-learner model. Miller and Rollnick emphasize that MI is “not done ‘to’ or ‘on’ someone at all. MI is done ‘for’ and ‘with’ a person.”¹⁶ They compare this relationship to a dance where both partners move together in unison. The expert-learner approach is more like a fight where the movements are against rather than with. It may seem like a lot of time and effort to take off the expert hat and synchronize with a client, but in the end this method simply works better. Miller and Rollnick attest that the “partnership aspect of MI spirit bespeaks a profound respect for the other.”¹⁷ It is this partnership that lays the first stepping stone which leads to an effective alliance.

Acceptance

The concept of acceptance is fundamental to MI and is perhaps the most significant evidence of influence from Carl Rogers’ client-centered therapy. Hal Arkowitz, one of MI’s leading trainers explains that “MI can be thought of as client-centered therapy with a twist. Unlike client-centered therapy, MI has specific goals: to reduce ambivalence about change and to increase intrinsic motivation to change.”¹⁸ The goal of change is owned by the client while the counselor simply maintains an environment where the client’s change can flourish. Rogers called his version of acceptance “unconditional positive regard.” He clar-

¹⁶ Miller and Rollnick, *Motivational Interviewing*, 15.

¹⁷ Miller and Rollnick, *Motivational Interviewing*, 16.

¹⁸ Hal Arkowitz et al., *Motivational Interviewing in the Treatment of Psychological Problems* (New York: Guilford Press, 2008), 4.

ifies this concept by explaining that “there are no conditions of acceptance, no feelings of ‘I like you only if you are thus and so.’”¹⁹ He believes that the acceptance should be freely extended, regardless of what a client does or does not do. The unconditional positive regard is critical for creating an environment that is suitable for change. Rogers notes that just as a plant can grow without any conscious effort as long it has the appropriate environment and nutrients, so can people naturally grow and improve when they are in an accepting and loving environment.

This degree of acceptance requires that a practitioner be able to support a client’s choices regardless of whether their opinions match. In the end, whatever a client does should not influence whether a practitioner is accepting.

Affirmation

Finally, MI’s type of affirmation is different from what many counselors would practice. Often counselors assess clients in order to tell them their deficiencies so they can start fixing them. With MI, the pursuit is to actively provide support and encouragement by verbally affirming strengths. This is meant to increase a person’s self-efficacy which leads to a greater chance of making a positive change.²⁰

Compassion

In Miller and Rollnick’s latest edition of Motivational Interviewing, compassion was added as a fifth concept to the spirit of MI. They note that it is not essential for counselors to literally

19 Carl Rogers, “The Necessary and Sufficient Conditions of Therapeutic Personality Change,” *Journal of Consulting and Clinical Psychology* 60, no. 6 (1992): 829.

20 Miller and Rollnick, *Motivational Interviewing*, 19.

share in the suffering of clients, but they should at least have the service member's best interest at heart.²¹

The Spirit of MI is not a formulaic method that can be practiced by following certain steps. Instead, there are guiding principles that can center MI practitioners to a Rogerian style that promotes an environment of acceptance and love. Miller and Rollnick do not feel that the Spirit of MI is an absolute prerequisite to practice MI, but it is a heart-set that counselors can continually strive for in their journeys to become better helpers.²²

MI's Kissing Cousin

MI is a model for helping people change by overcoming ambivalence, but it is "not meant to be a comprehensive theory of change."²³ Another model that is a comprehensive theory was developed by James Prochaska and Carlo DiClemente called the Transtheoretical Model of Change (TTM). Both TTM and MI were developed around the same time and have evolved with wide acceptance over the years. While these two models have certainly influenced each other, they are separate in scope while being harmonious and complementary.²⁴ Miller and Rollnick describe the relationship between the two models as "kissing cousins who never married."²⁵

Prochaska and DiClemente studied what it is that helps

21 Miller and Rollnick, *Motivational Interviewing*, 19.

22 Miller and Rollnick, *Motivational Interviewing*, 23.

23 Miller and Rollnick, *Motivational Interviewing*, 35.

24 Carlo DiClemente and Mary Velasquez, "Motivational Interviewing and the Stages of Change" in *Motivational Interviewing: Preparing People for Change* (New York: Guilford Press, 2002), 201-216.

25 Miller and Rollnick, *Motivational Interviewing*, 35-36.

people change as well as identifying the common stages of the change spectrum. They outlined five stages for change: precontemplation, contemplation, preparation, action, and maintenance. People in the precontemplation stage are not aware or concerned about any behavior to be changed. The contemplation stage represents those who are beginning to consider change, but have not yet taken any steps. The preparation stage is for those who have decided to change and are about to make initial steps. People in the action stage are in the thick of undergoing a change. Finally, the maintenance stage represents those who have established a desired change and are striving to avoid reverting back to pre-change behaviors.²⁶

At each stage of the change process there are certain attributes that are common as well as certain needs and helps for reaching the next stage. Many of the principles that help people resolve their ambivalence correspond with the TTM principles that help people progress along the stages of change.²⁷

The complementary relationship between MI and TTM was recognized by The Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA is an organization that produces scholarly work aimed at improving the behavioral health of people in the United States. In 2013 they wrote *Enhancing Motivation for Change in Substance Abuse Treatment* where they examined how clinicians can use MI in their prac-

26 James O. Prochaska and Carlo C. DiClemente, "Transtheoretical Therapy: Toward a More Integrative Model of Change," *Psychotherapy: Theory, Research and Practice* 19, no. 3 (1982): 276-288.

27 Diclemente and Velasquez, "Motivational Interviewing and the Stages of Change" 201-204.

tice.²⁸ In this book the authors amalgamated MI and TTM by structuring the book by the five Theoretical Model stages, but then asserted that movement from one stage to the next comes by applying the principles of MI.

Because this is a federally published book that is available to practitioners nationwide for free, it stands as a common reference for many therapists as they learn about MI. While this book is a great resource, it blurs the lines between MI and TTM so much that it becomes difficult for therapists to tell the difference between the two models.

MI Research

There are currently “more than 25,000 articles citing MI and 200 randomized clinical trials of MI” in print.²⁹ Most of this new research has come out in the past ten years and the model as a whole is continuing to gain support. Below is a snapshot of seminal research articles that contributed to the development and support of MI.

Earliest Article

One of the most historically significant articles was the one that started the initial conversation of MI. Miller’s 1983 article titled “Motivational Interviewing with Problem Drinkers” was his first attempt at challenging the commonly-held belief that people are unable to make positive life changes when they are unmotivated. While agreeing that motivation is critical to the

28 Karen Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment: Treatment Improvement Protocol Series (Tip 35)* (Rockville, MD: US Department of Health and Human Services, 2013) vii- xiii.

29 Miller and Rollnick, *Motivational Interviewing*, vii.

change process, Miller claimed that motivation is not a personality trait of clients, but is rather an interpersonal process that a client can engage in with a therapist. Instead of placing the responsibility of motivation wholly upon the shoulders of the client, Miller submitted that therapists can influence how much motivation a client possesses. He explained that motivation could be developed by creating cognitive dissonance within a client so the client recognizes the need or benefit for change.³⁰

Miller was influenced by the concept of cognitive dissonance, a term coined in 1957 by Leon Festinger which holds that a person experiences distress when his values do not match his actions. In order to relieve tension, either the values need to relax to match the behavior or the behavior needs to improve to match the values.³¹ Miller noted that after initially developing motivation from cognitive dissonance, this motivation could be enhanced by helping clients increase their self-efficacy.³²

MI and Referrals

Chaplains see a variety of issues presented by service members. In the same day a chaplain may provide pastoral counseling to people coming in with problems of substance use, anxiety, financial concerns, spiritual distress, grief, or post-traumatic stress. A good chaplain recognizes his scope and limitations, knowing when it is more appropriate to refer to a professional specializing in whatever the service member needs. In a sense,

30 William R. Miller, "Motivational Interviewing with Problem Drinkers," *Behavioral Psychotherapy* 11, no. 2 (April, 1983): 147-72.

31 Sara McCleod, "Cognitive Dissonance," *Simply Psychology*, 2008, accessed January 14, 2016, <http://www.simplypsychology.org/cognitive-dissonance.html>.

32 William R. Miller, "Motivational Interviewing with Problem Drinkers," *Behavioral Psychotherapy* 11, no. 2 (April, 1983): 147.

chaplains can often act as triage specialists as they refer service members out to where they can get the best care. A concern with referring, however, is that service members may not follow through with attending the treatment after being referred.

One study performed in 1999 examined MI's powerful role in increasing adherence to referrals for treatment. A group of researchers from Yale University School of Medicine examined sixty subjects who struggled with substance abuse (e.g., alcohol, marijuana, and cocaine), and were referred to a treatment program.³³ All subjects underwent an intake evaluation, but half of the subjects were randomly assigned to receive an intake evaluation that was enhanced by MI techniques. The MI-enhanced evaluation clinicians collected the same information as the standard evaluation clinicians and both evaluations took the same amount of time (one hour).³⁴

From the standard evaluation group, only 29.6% of the subjects attended a treatment session following the initial evaluation. From the MI-enhanced group, however, 59.3% of the subjects attended at least one treatment session following the evaluation, a result twice as favorable as the standard group. These researchers concluded that MI techniques were effective when making referrals for treatment. They asserted that these techniques "can be taught to and used by 'real world' clinicians,"

33 Kathleen M. Carroll et al., "Motivational Interviewing to Enhance Treatment Initiation in Substance Abusers: An Effectiveness Study," *American Academy of Addiction Psychiatry* 10, no. 5 (2001): 335-39.

34 Carroll et al., "Motivational Interviewing to Enhance Treatment Initiation in Substance Abusers," 336-37.

and can be effective when working with difficult populations.³⁵

MI in Group Counseling

One study from 2010 examined how appropriate MI is in the group counseling environment. The study came by following a substance use intervention program in Santa Barbara where limited funds necessitated group therapy sessions. MI had already gained significant support for helping people that struggle with substance use, but relatively little research existed concerning MI in group settings. This study examined 101 teens from Santa Barbara who were first-time substance abuse offenders. As first time offenders they were all mandated to go to counseling about their substance use. In this case they completed six sessions of MI-styled counseling with the average size of six clients in each group.³⁶ At the end of the therapy they rated it by filling out questionnaires. Each of the responses were based on a scale between one and five, with five being the lowest approval rating and one being the highest. Collectively they rated the helpfulness of the facilitator as a 1.66.³⁷

This study reveals two significant findings. First, MI does not need to be limited to individual counseling environments. The second noteworthy finding is that there is a high approval rating for clients. One would expect that teens enrolled in any drug or alcohol intervention program would have low approval lev-

35 Carroll et al., "Motivational Interviewing to Enhance Treatment Initiation in Substance Abusers," 337-338.

36 Elizabeth J. D'Amico, Karen Chan Osilla, and Sarah B. Hunter, "Developing a Group Motivational Interviewing Intervention for Adolescents At-Risk for Developing an Alcohol or Drug Use Disorder," *National Institutes of Health* (November, 2010): 1-17.

37 D'Amico, Osilla, and Hunter, "Developing a Group Motivational Interviewing Intervention for Adolescents At-Risk for Developing an Alcohol or Drug Use Disorder," 8.

els, but the non-confrontational nature of MI may have relieved some of the teens' discord as they realized that the counselors were not working on or against them.

MI in Gambling

In 2014 a group of Canadian researchers conducted a meta-analysis of MI's efficacy of treating problematic gambling.³⁸ Problematic gambling is defined by the Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5) as "persistent and recurrent problematic gambling behavior leading to clinically significant impairment or distress."³⁹ This team of researchers specifically examined how effective MI was at reducing problematic gambling behavior in comparison to non-MI treatments, or no treatment at all. They found over four hundred articles written about MI in gambling treatment, but only found five which were adequately reliable, internally consistent, and valid. The results from this study showed that the MI treatment groups gambled an average of 1.3 days less and saved 10% more money than the non-MI treatment groups. This represents a significant decrease and suggests that MI is an effective treatment for problematic gambling.⁴⁰

While this meta-analysis chose the most reliable studies it suffered from two drawbacks. First, the control group was fairly

38 A meta-analysis is defined as "a method for systematically combining pertinent qualitative and quantitative study data from several selected studies to develop a single conclusion that has greater statistical power." "Study Design 101," George Washington University, November, 2011, accessed April 5, 2016, <https://himmelfarb.gwu.edu/tutorials/studydesign101/metaanalyses.html>.

39 American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*, 5th Edition: DSM-5, (Arlington, VA: American Psychiatric Publishing, 2013), section 312.31.

40 Igor Yakovenko et al., "The Efficacy of Motivational Interviewing for Disordered Gambling: Systematic Review and Meta-Analysis," *Addictive Behaviors* 43 (2015): 72-82.

ambiguous in that it included several therapeutic modalities and even a non-treatment group. The other drawback is that it drew upon studies operating from the second edition of Motivational Interviewing instead of the third edition.⁴¹ It would be interesting to note what differences, if any, would have emerged from this study had the individual trial based their research off the most recent MI literature.

MI among Criminal Offenders

In another article from 2016, a group of researchers from New York examined the effectiveness of MI in treating substance-using criminal offenders. These researchers cited multiple randomized controlled trials of MI among offenders and inmates, but these studies produced conflicting results.⁴² This study attempted to determine the effectiveness of MI among substance-using offenders while accounting for the variable of psychopathy. It examined 105 adult offenders who self-reported regular use of harmful substances and who were placed in a “pretrial jail diversion program.” Each subject completed the 10-item Drug Abuse Screening Test and their level of psychopathy was also measured by completing the Psychopathy Checklist—Revised (PCL–R).⁴³

By the end of the six-month study, the initial group of 105 subjects decreased to 78 subjects, and revealed a surprising finding. The results showed that MI treatment led to a significant increase

41 Yakovenko et al., “The Efficacy of Motivational Interviewing for Disordered Gambling,” 74.

42 Marc T. Swogger et al., “A Test of Core Psychopathic Traits as a Moderator of the Efficacy of a Brief Motivational Intervention for Substance-Using Offenders,” *Journal of Consulting and Clinical Psychology* 84, no. 3 (2016): 249.

43 Marc T. Swogger et al., “A Test of Core Psychopathic Traits as a Moderator of the Efficacy of a Brief Motivational Intervention for Substance-Using Offenders,” 248.

in substance use among the high psychopathy group in comparison to the control group. However, in the low psychopathy group, MI treatment led to a significant decrease in substance use.⁴⁴ While this study suffers from small sample sizes once the subjects are divided into four groups (high psychopathy with MI, high psychopathy without MI, low psychopathy with MI, and low psychopathy without MI), it reveals a likelihood that MI is effective in treating substance abuse among offenders, but it may not be appropriate if those offenders have high psychopathy.

MI Language

Over the first twenty years of its history, MI gained tremendous popularity because of its effectiveness in helping people make health-promoting changes, especially regarding substance use. Since MI shares many characteristics of other counseling styles it was hard to determine which aspects of MI's model were the key variables accounting for its effectiveness. While all of MI's attributes influence its overall effectiveness, one group of researchers set out to isolate the particularly promising variable of attention to client language. MI operates on the assertion that when clients use change-promoting language (change talk) instead of language in favor of the status-quo (sustain talk), they will be more successful in convincing themselves to make a change.⁴⁵ This team of researchers released a study in 2003

44 Marc T. Swogger et al., "A Test of Core Psychopathic Traits as a Moderator of the Efficacy of a Brief Motivational Intervention for Substance-Using Offenders," 248-258.

45 Miller and Rollnick, *Motivational Interviewing*, 169-166.

that informed MI's foundation and helped explain its efficacy.⁴⁶ In their study they examined eighty-four drug users who were to undergo a rehabilitation program. Their therapy sessions were videotaped and the client responses were coded into several categories. The researchers noted all subject responses in regards to quitting drug use (i.e., statements of wanting to quit, their perceived ability to quit, reasons they felt they should quit, and their commitment to quit). After coding the responses these researchers followed up with the subjects every three months for one year to see whether any correlation existed between subject language and drug abstinence. After the final follow-up the researchers found that the subjects who articulated their desire, ability, or reasons for abstaining were more successful at actually abstaining.⁴⁷

This study also revealed that not all language in favor of change could equally predict change. They found that the commitment language was more indicative of abstinence than other forms of change language. This study verified MI's assertion that change language leads to change, but that if the change language could contain commitments, the likelihood of change could drastically increase.⁴⁸

In 2009, researchers Lisa Glynn and Theresa Moyers worked off of previous findings that change talk leads to actual change. They conducted a research experiment to "test directly the no-

46 Paul C. Amrhein et al., "Client Commitment Language During Motivational Interviewing Predicts Drug Use Outcomes," *Journal of Consulting and Clinical Psychology* 71, no. 5 (2003): 862-878.

47 Paul C. Amrhein et al., "Client Commitment Language during Motivational Interviewing Predicts Drug Use Outcomes," 868.

48 Amrhein et al., "Client Commitment Language," 872.

tion that clinicians can manipulate client change talk.”⁴⁹ In this randomly-controlled trial, nine clinical psychology graduate students participated in workshops for two days where they learned two substance abuse treatment styles. The first was functional analysis (FA) from cognitive- behavioral therapy and the other was change talk evocation (CT) from MI. The clinicians were required to demonstrate adequate proficiency in each of the styles. The FA style focused on “fact-gathering questions” in order to examine the antecedents and consequences of the drinking behavior while the CT style focused on recognizing and evoking change talk.⁵⁰

There were a total of forty-seven subjects who were mostly undergraduate students that self-identified as struggling with their drinking. Each subject underwent an hour-long session with one of the clinicians. Outside the view of the client, the clinician could see a monitor displaying a color that represented whether they would be conducting FA styled therapy or CT styled therapy. The style switched back and forth so that in the end the clinician spent about two 12-minute blocks with FA and two 12-minute blocks with CT.⁵¹

The results of the study showed a significant increase in change talk among the CT group. The FA group yielded about 51% change talk, which means the other half would be sustain talk and would likely promote the status quo. The CT group, however, yielded 64% change talk which shows a notable tip-

49 Lisa H. Glynn and Theresa B. Moyers, “Chasing Change Talk: The Clinician’s Role in Evoking Client Language about Change,” *Journal of Substance Abuse Treatment* 39 (2010): 66.

50 Glynn and Moyers, “Chasing Change Talk,” 67.

51 Glynn and Moyers, “Chasing Change Talk,” 67.

ping of the balance for change.⁵²

Applications of MI

MI was first developed to help with problem drinking, but “has subsequently been used with a variety of other problems, including drug abuse, gambling, eating disorders, anxiety disorders, chronic disease management, and health-related behaviors.”⁵³ Below is a brief list of books which show the wide spectrum to which MI can apply.

Health Care

The most well-known book about MI in health care was written in 2008 by Stephen Rollnick, William Miller, and Christopher Butler. It is titled *Motivational Interviewing in Health Care: Helping Patients Change Behavior*. Since much of the work of health care providers is educating their clients to make better lifestyle choices (e.g., smoking cessation, weight management, exercise, dietary changes, etc.), this book stands as an empirically supported resource for helping patients better adhere to positive lifestyle changes. It is especially helpful for healthcare providers because they are notorious for falling into

the trap of offering unsolicited expert advice. the trap of offering unsolicited expert advice.⁵⁴

Adolescents

In 2011, Sylvie Naar and Mariann Suarez wrote *Motivation-*
52 Glynn and Moyers, “Chasing Change Talk,” 68.

53 Hal Arkowitz et al., *Motivational Interviewing in the Treatment of Psychological Problems*, 4.

54 Stephen Rollnick, William R. Miller, and Christopher C. Butler, *Motivational Interviewing in Health Care: Helping Patients Change Behavior* (New York: Guilford Press, 2008).

al Interviewing with Adolescents and Young Adults. This book is designed to help MI practitioners navigate through the challenges of working with youth. It informs practitioners how to conduct MI in a developmentally appropriate manner so they can more effectively engage with a young population. The principles in the book are applied to common issues facing youth, such as substance abuse, sexual risks, and family relationships.⁵⁵

Education

Also in 2011, Wendy M. Reinke, Keith C. Herman, and Randall S. Sprick applied MI to the classroom in their book titled, *Motivational Interviewing for Effective Classroom Management: The Classroom Check-Up*. In it they provide methods for elementary and secondary education teachers to improve their effectiveness and classroom management. They apply MI principles such as “providing a menu of options” or “overcoming obstacles” in order to foster better classroom performance. They assert that children respond better with more autonomy rather than relying on authoritarian-styled instruction.⁵⁶

Social Work

Social workers work with a wide variety of clients who struggle with finances, substance abuse, child care, and community integration. In 2015 Melinda Hohman wrote *Motivational Interviewing in Social Work Practice* where she introduces practitioners and graduate students to how MI can

⁵⁵ Sylvie Naar and Mariann Suarez, *Motivational Interviewing with Adolescents and Young Adults* (New York: Guilford Press, 2011).

⁵⁶ Wendy M. Reinke, Keith C. Herman, and Randall S. Sprick, *Motivational Interviewing for Effective Classroom Management: The Classroom Check-Up* (New York: Guilford Press, 2011).

improve their work among complex populations. The book details the challenging, but ultimately valuable aspects of integrating MI into social work practice.⁵⁷

Group Counseling

Motivational Interviewing in Groups is a book written in 2012 by Christopher C. Wagner and Karen S. Ingersoll with the help of some other contributors. The book discusses the benefits and challenges of applying MI in a group setting. The authors take the four main processes of MI and discuss how it looks in practice to apply them to psychotherapy groups, educational groups, and support groups.⁵⁸

Psychological Problems

A seminal book for applying MI to a wide spectrum of settings is *Motivational Interviewing in the Treatment of Psychological Problems*. Written by Hal Arkowitz, William Miller, and Stephen Rollnick, this book touches on a variety of psychological disorders like depression, anxiety, posttraumatic stress, and many others. It addresses the nuanced issues surrounding the application of MI to each of these conditions. Having enjoyed much success in the first edition, this second edition stayed current by dramatically updating its content to reflect the significant changes that emerged between the second and third editions of Motivational Interviewing.⁵⁹

57 Melinda Hohman, *Motivational Interviewing in Social Work Practice* (New York: Guilford Press, 2015).

58 Christopher C. Wagner and Karen S. Ingersoll Ingersoll, *Motivational Interviewing in Groups* (New York: Guilford Press, 2012).

59 Hal Arkowitz, William R. Miller, and Stephen Rollnick, eds., *Motivational Interviewing in the Treatment of Psychological Problems*, 2nd ed., ed. Hal Arkowitz PhD, William R. Miller PhD, and Stephen Rollnick PhD (New York: Guilford Press, 2015).

Alcoholism

William Miller and Ricardo Muñoz authored a book called *Controlling Your Drinking: Tools to Make Moderation Work for You*. This book diverges significantly from most other books about MI in that it is not directed toward a practitioner, but rather to problem drinkers. This book does not attempt to convince readers to attain sobriety. Instead, it journeys with readers as they explore how much alcohol is controlling their lives, what alcohol does for them, how it interfaces with their values, and ultimately how they would want alcohol to be a part of their future. It is open to reader goals that could vary from complete sobriety to simply controlled drinking. It provides a menu of options that often work for others that have similar alcohol- related goals.⁶⁰

Nutrition and Fitness

The newest additions to the corpus of MI-related books is *Motivational Interviewing in Nutrition and Fitness*. Completing this book early 2016, Dawn Clifford and Laura Curtis target a wide variety of health professionals like personal trainers, dieticians, and health coaches. They discuss how these professionals can incorporate the principles of MI in order to help their clients succeed in reaching health goals. The book addresses topics like barriers to exercise, shifting away from dietary restrictions, body image, and eating disorders.⁶¹

The above list represents a snapshot of today's literature of the various settings where MI is being utilized. Because of the em-

60 William R. Miller and Ricardo F. Muñoz, *Controlling Your Drinking: Tools to Make Moderation Work for You*, 2nd ed. (New York: Guilford Press, 2013).

61 Dawn Clifford and Laura Curtis, *Motivational Interviewing in Nutrition and Fitness* (New York: The Guilford Press, 2015).

pirical success and wide applicability of MI, its literature has grown exponentially over the recent past.

Spiritual/Religious Application

In reviewing the library of MI-related literature that covers a variety of applications, no significant literature has been produced concerning the use of MI in military chaplaincy.

However, Miller and Rollnick point out that MI may be “useful within religious organizations,” asserting that “most world religions offer a model of what it means to live a good life and encourage people to mature toward certain principles and values.”⁶² In circles where religion is central to an individual’s culture, psychological practices have often stood at odds with religious beliefs. MI respects religious beliefs and stands as a supplement for bridging the gap between valuable spiritual beliefs and empirically-tested psychological research.⁶³

An example of how applicable MI is for religious and spiritual beliefs can be shown by Bill Miller’s work with Native American populations in the American Southwest. Miller was once told by a tribal leader that an effective way to teach Native Americans is to include a prayer, song, and dance. While he failed to craft a song and dance, Miller wrote out a prayer to help him spiritually reach out to where his client was:

*Guide me to be a patient companion, To listen with a heart
as open as the sky. Grant me vision to see through her eyes*

And eager ears to hear her story.

Create a safe and open mesa on which we may walk together.

62 Miller and Rollnick, *Motivational Interviewing*, 346.

63 Miller and Rollnick, *Motivational Interviewing*, 346.

Make me a clear pool in which she may reflect. Guide me to find in her your beauty and wisdom, knowing your desire for her to be in harmony: healthy, loving, and strong.

Let me honor and respect her choosing of her own path, And bless her to walk it freely.

*May I know once again that although she and I are different, Yet there is a peaceful place where we are one.*⁶⁴

The great part of this prayer is that it created an environment of unified ground where Dr. Miller could be with his client without abandoning his own spiritual beliefs. Surely nothing in this prayer goes against Miller's personal theology, but he was able to alter the language and style in order to connect spirit to spirit.⁶⁵

Scott Richards and Allen Bergin have been progressive trailblazers in showing the psychological community the dire need for a theistic spiritual strategy in counseling. They note that polls suggest that over 90% of Americans believe in God, and that one Gallup poll shows that 62% of Americans believe that religion can answer most of the world's problems.⁶⁶ With America's spiritual climate in mind, Richards and Bergin provide sound research suggesting that there is no justification for the common practice of psychotherapists to treat spirituality and religion as taboo subjects. By avoiding spirituality and religion, therapists neglect one of the most fundamental elements to a

64 Miller and Rollnick, *Motivational Interviewing*, 25.

65 Miller and Delaney edited a volume that further addresses religious aspects from a Judeo-Christian Perspective. William R. Miller and Harold D. Delaney, *Judeo-Christian Perspectives On Psychology: Human Nature, Motivation, and Change* (Washington D.C.: American Psychological Association, 2005).

66 P. Scott Richards and Allen E. Bergin, *A Spiritual Strategy for Counseling and Psychotherapy*, 2nd ed. (Washington, DC: American Psychological Association, 2005), 5-6.

person's makeup.⁶⁷

Dr. Agneta Schreurs echoes many of the same findings as Allen and Bergin in asserting that spirituality needs to play an integral part in psychotherapy. She also points out that many people may be spiritual but not religious, or may be part of a religion while holding personal spiritual beliefs that are at odds with the tenets of their own religion.⁶⁸ An important take-away from her book is that the focus should be on the individual person and his beliefs. If his spiritual beliefs parallel the tenets of his religion, that would be important to be sensitive to. If his spiritual beliefs diverge this is also important to respect. Chaplains and MI practitioners are to operate within this structure of respect and acceptance—facilitating for people to draw on their own spiritual beliefs without attempting to change them.

Motivational Interviewing and Military Chaplaincy

The following provides an overview of the MI model while applying its principles (engaging, focusing, eliciting, and planning) specifically to chaplains' ministry to service members.

It does not offer an adequate comprehensive review of MI, but instead focuses on the MI principles which are most pertinent to military chaplaincy. On top of providing an overview, the following contains several case examples of chaplains counseling with service members in order to provide example of how these principles, in practice, can apply.

Process #1: Engaging

67 Richards and Bergin, *A Spiritual Strategy for Counseling and Psychotherapy*, 336.

68 Agneta Schreurs, *Psychotherapy and Spirituality: Integrating the Spiritual Dimension Into Therapeutic Practice* (London: Jessica Kingsley Publishers, 2002), 24-26.

This latest edition of Motivational Interviewing organizes the conversation of change around four key processes. The first process, engaging, is “the process by which both parties establish a helpful connection and a working relationship”⁶⁹ Engaging is similar to other well-known counselling principles of building a relationship of trust, respect, and warmth. For example, Adam Horvath called this effective therapist-client relationship a “working alliance.” He researched the relationship that a working alliance has on client outcomes and found that “if the client experiences a positive working alliance with the therapist early in therapy, success is more likely.”⁷⁰

This research validates a truth that many people already hold. For example, Theodore Roosevelt’s oft-repeated axiom reminds one that “nobody cares how much you know until they know how much you care.”⁷¹ Despite understanding the wisdom of this axiom, many people in the helping profession struggle by falling into the “expert trap.” The expert trap is like what you would see at a doctor’s office when a patient enumerates her symptoms and the doctor simply explains what the problem is and how it should be fixed. Miller and Rollnick point out that “an expert role does not work so well when what is needed is personal change.”⁷² This is because people naturally push back against being told what to do. With some exceptions, people generally know what would be best for them, especially

69 Miller and Rollnick, *Motivational Interviewing*, 26.

70 Adam O. Horvath and Leslie S. Greenberg, *The Working Alliance: Theory, Research, and Practice* (New York: John Wiley & Sons, 1994), 123.

71 Theodore Roosevelt, “Theodore Roosevelt Quotes,” Brainy Quote, accessed January 11, 2016, <http://www.brainyquote.com/quotes/quotes/t/theodorero140484.html>.

72 Miller and Rollnick, *Motivational Interviewing*, 42.

if given the chance to think things through. Also, if the solution is reached on their own, they will be more inclined to act on it.⁷³ Here is an example of how a chaplain might squander an opportunity to help by failing to engage:

SERVICE MEMBER: Chaplain, I don't know why my wife isn't even excited to see me when I come home. It's been tough because our operational tempo at work has been so high lately that I don't get as much time at home. I would think she would appreciate what little time I am home, though.

CHAPLAIN: She's probably feeling neglected by you and resents that you seem to care more about work than you do about her. Are you taking her on dates on the weekends?

SERVICE MEMBER: I guess I haven't.

CHAPLAIN: Well, that would probably be a good start.

It is all too easy for a chaplain to try to solve problems—after all isn't a service member going to the chaplain for advice? The truth is nobody is more of an expert on a service member's needs than the actual service member which is why it is generally more effective to help them discover their own solutions. In this case the chaplain's comments could be interpreted as judging or not listening. It would not be surprising if the chaplain's unsolicited advice was discarded and the service member decided to look elsewhere for support. Imagine how much better a service member would respond if the chaplain were to change his conversation style to try to engage first:

73 James W. McElhaney, "People Like Their Own Ideas," ABA Journal (October 1, 2007): accessed February 13, 2016, http://www.abajournal.com/magazine/article/people_like_their_own_ideas.

SERVICE MEMBER: Chaplain, I don't know why my wife isn't even excited to see me when I come home. It's been tough because our operational tempo at work has been so high lately that I don't get as much time at home. I would think she would appreciate what little time I am home, though.

CHAPLAIN: You're feeling pressures from work and home.

SERVICE MEMBER: Yeah, but my commander wouldn't really care about how my wife feels and my wife doesn't understand that I can't just come home before the job is done.

CHAPLAIN: That has to be tough to balance the conflicting needs.

Listening

One of the most important parts to “engaging” is listening. Miller and Rollnick borrow many of their principles of listening from Carl Rogers who was quoted as saying, “I don't know what it is about listening. I just know when I'm heard, it feels damned good.”⁷⁴ In MI, effective listening is termed “reflective listening.” Reflective listening is where “the counselor seeks to understand the client's subjective experience, offering reflections as guesses about the person's meaning.”⁷⁵ It is similar to the principle of “accurate empathy” that Carl Rogers developed or with the “active listening” that Thomas Gordon, one of Rogers' pupils, advanced.⁷⁶

⁷⁴ Carl Rogers as cited by Clifford and Curtis, *Motivational Interviewing in Nutrition and Fitness*, 66.

⁷⁵ Miller and Rollnick, *Motivational Interviewing*, 412.

⁷⁶ Thomas Gordon, “Origins of the Gordon Model,” Gordon Training International, 2011, accessed February 13, 2016, <http://www.gordontraining.com/thomas-gordon/origins-of-the-gordon-model/>.

The MI model asserts that offering expert advice does not promote healing as much as expert listening does. When done correctly, listening can encourage a person to keep talking and progressing toward insights and healing. This is achieved by non-verbal body language, such as eye contact, that sends a message of genuine concern. However, Bill Matulich, an MI practitioner, asserts that “the most useful tool in MI” comes from reflections.⁷⁷

There are two main types of reflections: simple and complex. A simple reflection basically repeats or rephrases what a person has stated. For example, if a service member were to tell a chaplain, “I’m really upset about what happened,” then a simple reflection could be “that made you mad.” The concept of simple reflections is not difficult to grasp, but they are still effective at encouraging people to continue to talk. It sends a message to clients that they are being heard, and in a way, it offers a green light for them to continue further and deeper. As effective as simple reflections can be, they can stymie progress when overused. Also, their efficacy pales in comparison to their more refined counterpart: the complex reflection.⁷⁸

A complex reflection “adds some meaning or emphasis to what the person has said, making a guess about the unspoken content or what might come next (continuing the paragraph).”⁷⁹ This goes beyond parroting or paraphrasing and seeks to reflect whatever else seems to be part of the message. To “continue

⁷⁷ Bill Matulich, *How to Do Motivational Interviewing: A Guidebook*, 2nd ed. (n.p.: Bill Matulich, 2013), 276, Amazon Kindle edition.

⁷⁸ Miller and Rollnick, *Motivational Interviewing*, 57

⁷⁹ Miller and Rollnick, *Motivational Interviewing*, 57-58.

the paragraph” is to attempt to take a guess at the implied message that was not verbally spoken. However, there is probably a reason why it is not called continuing the story, which would imply offering overly speculative insights that are not sufficiently grounded in what was spoken. Similarly, it is not the same as finishing someone’s sentence which can be seen as interrupting.⁸⁰ Here is an example of how a chaplain might use reflective listening with a service member:

SERVICE MEMBER: I just need someone to talk to before I do something dumb.

CHAPLAIN: You’re worried that you’ll do something you’ll regret. [simple reflection]

SERVICE MEMBER: Yeah, my squad leader is such a jerk. In front of the whole platoon this morning he asked, “Can you ever make it here on time?”

CHAPLAIN: He embarrassed you in front of your peers. [complex reflection]

SERVICE MEMBER: He sure did...I mean, it’s not even like I am late very often. I was only really late once when my car wouldn’t start. I cut it close this morning but I still made it before the first formation was called. But then throughout the entire day today he just wouldn’t let it go. He kept making jabs about how I’m not taking my job seriously.

CHAPLAIN: He’s been unfair and you’ve had enough. [complex reflection]

SERVICE MEMBER: There were a couple times I was on the

⁸⁰ Dawn Clifford and Laura Curtis, *Motivational Interviewing in Nutrition and Fitness*, 160.

verge of decking him right in that mouth that he can't seem to control.

The chaplain in this example did not say very much; he did not need to. By reflecting back what was said, the service member had feedback that he was being heard and was assured that he could continue sharing his story. While the simple reflection helped in moving the story along, the complex reflection got more into how the service member was feeling. It also sent a message that his feelings were valid.

In this case, the service member seemed to agree with the chaplain's complex reflections. It is important to note, however, that it is fine to be wrong in these guesses. A wrong guess is not a sign of poor counseling. If this chaplain tried to continue the paragraph, but did it wrong, the service member would still understand that the chaplain is trying to listen. Additionally, the service member would immediately clarify so that the chaplain would eventually be on the same page anyway. Clifford and Curtis believe that "you can never go wrong with providing a reflection" as long as it is sincere. They hold that "if your reflection doesn't quite represent what the client meant, he or she will correct you and still appreciate your efforts toward listening and understanding."⁸¹

Another aspect of MI-styled reflections is that they are in the form of statements instead of questions. This is because statements are less likely to cause defensiveness or worry, and they

81 Clifford and Curtis, *Motivational Interviewing in Nutrition and Fitness*, 166-167.

are not as demanding on the person.⁸²

For instance, in the above example the chaplain could have reflected with a question instead of a statement by asking, “Did that embarrass you in front of your peers?” This would require the service member to assess whether he feels safe enough to admit feeling embarrassed, whereas the statement reflection automatically sends a message of understanding with a tenor of acceptance.

Using statements as reflections can also keep a person from feeling like she is being interrogated. Reflections are very beneficial for engaging, but when they are in the form of a question they tend to be closed-ended questions that stifle dialogue with yes-or-no responses. It may seem like a subtle nuance to use statement reflections instead of question reflections, but the nuances can collectively add up to a significant difference in the conversation’s tone.

Reflective listening is one of the most significant hallmarks that defines the signature of MI. However, it is only one aspect of a larger part of MI’s unique engagement-promoting communication style. This broad style of communication is known as its “Core Interviewing Skills” and can be remembered by a mnemonic acronym called OARS: “asking Open questions, Affirming, Reflecting, and Summarizing.”⁸³

Open Questions

The concept of open questions is not unique to MI. In fact, in the counseling world open questions are almost universally

⁸² Miller and Rollnick, *Motivational Interviewing*, 52.

⁸³ Miller and Rollnick, *Motivational Interviewing*, 62

preferred over closed questions because they allow clients to express what is on their mind, they prompt thought, and they provide an opportunity for clients to answer in their own ways.

The concept of open questions is not unique to MI. In fact, in the counseling world open questions are almost universally preferred over closed questions because they allow clients to express what is on their mind, they prompt thought, and they provide an opportunity for clients to answer in their own ways.

Conversely, closed questions generally elicit one-word answers that do not encourage people to think deeply about what they are feeling. While generally discouraged, there are still appropriate instances to use closed questions. For example, asking whether someone is thinking about committing suicide is direct and appropriately seeks a yes or no answer. One good way for a chaplain to determine whether she is asking too many closed questions is to pay attention to the conversation. If at any point she feels she is exerting significant effort to maintain the conversation, it is probably because she is asking too many questions, especially closed questions. Artful open questions can go a long way in getting people to speak their mind, even revealing aspects that may not have occurred to a chaplain otherwise.⁸⁴

While open questions are great for stimulating thought and dialogue, they can also be overused. Miller and Rollnick emphasize that most questions should be followed up by a reflection. In fact, they say that a good rhythm for MI is to maintain a 2:1 ratio of questions to reflections—just like a waltz.⁸⁵ This is not meant to be a robotic formula for MI, but the important principle to

⁸⁴ Matulich, *How to Do Motivational Interviewing*, 62.

⁸⁵ Miller and Rollnick, *Motivational Interviewing*, 63.

remember is to try have more reflections than questions.

Affirming

To affirm is to support and encourage as well as to recognize the good of an individual.⁸⁶ Affirmations are powerful tools to help people feel important and respected. It promotes safety within the counseling environment and encourages open communication.

Within MI a notable difference between praise and affirmation exists. Even though offering praise is typically viewed positively, in the counseling session it can hinder progress. For example, a chaplain might be inclined to say to a service member, “I am proud of you for coming to church this last month.” However, this statement puts the chaplain in a “one-up” position where he assumes a parental figure, deciding what is worthy of praise or shame.⁸⁷ It may seem difficult to differentiate between affirming and praising, but one way to remember is that praise statements generally start with “I” whereas affirming statements often start with “you.”⁸⁸

Affirmations can be particularly helpful when someone is experiencing feelings of failure or shame because they help reignite lost hope and optimism. To a service member who is trying to cut down on caffeine consumption a chaplain might say, “I know your New Year’s resolution was to give up energy drinks and that you may think that that you have failed in your goal. What I can’t help but notice, though, is that you said you used to

86 Miller and Rollnick, *Motivational Interviewing*, 64.

87 Miller and Rollnick, *Motivational Interviewing*, 65.

88 Miller and Rollnick, *Motivational Interviewing*, 65.

have two drinks each day last year, whereas over the past three weeks you have only had two total.”

This can help a service member experience a thinking shift where, instead of failing, he is progressing.

Reflecting

As has already been discussed in detail in the above section on listening, reflective listening is a major part of MI that is used extensively throughout all its processes. It has been described by some as “probably the single most important skills in MI.”⁸⁹ It serves many roles such promoting empathy, understanding, and motivation for change.

Summarizing

Summaries have multiple purposes in MI. In essence, they are like a reflection, only they pull together multiple parts of the conversation and present them back to the client. It is amazing what summaries can do in a counseling setting. First, they can help a counselor slow down and ensure that he is absorbing everything that he is hearing. This may be especially important when visiting with someone who talks fast or frantically about several disparate topics. A counselor could get back in sync by saying, “It sounds like you are experiencing a lot. Let me see if I am pulling this all together right...” While it may seem like interrupting, this type of summary can help slow a person down and allow a counselor to again be on the same page.⁹⁰

Not only could a summary help a chaplain, but it would

89 Arkowitz et al., *Motivational Interviewing in the Treatment of Psychological Problems*, 7.

90 Arkowitz et al., *Motivational Interviewing in the Treatment of Psychological Problems*, 7-8.

also be important to a service member. Often a service member can “unload,” sharing tons of thoughts and feelings that may not have been processed yet. As a chaplain summarizes back to the service member, the service member often gains insights in hearing the same information that was simply reorganized and repackaged by the chaplain. This type of summary has been compared to a bouquet of flowers. Each time that a service member shares something, it is like she is handing the chaplain a new flower. When the chaplain summarizes, he is essentially handing back the same flowers—only artfully packaged and rearranged. Clifford and Curtis recommend “choos[ing] summary components strategically as if you are selecting flowers to create a beautiful bouquet for the client. If you were making a bouquet, you wouldn’t include every flower in the field. You would consider the different colors, styles, and condition of the petals. You would only select those that are beautiful and complementary to each other.”⁹¹

In the same way, counselors may pay attention to the parts that they feel a client would benefit from hearing again without ignoring their concerns. Just like there is no rigid formula for creating a bouquet, crafting a summary statement does not have to be perfect in order to be helpful.

Summaries are also appropriate for transitioning to another topic. This may be important if there is limited time which could probably be better spent talking about something else. In a case like this a chaplain could say, “When you came in today it seemed like you were really concerned about your last evaluation report. I want to hear how you are feeling about that, but

91 Dawn Clifford and Laura Curtis, *Motivational Interviewing in Nutrition and Fitness*, 173.

first let me see if I have correctly heard what you have been saying over the past few minutes...”

Other uses for summaries are to accentuate the positive, to clarify ambiguous points, or to reengage. Chess masters will attest that one of the best moves to make when feeling stuck or in doubt is to simply “push a pawn.” This move represents minimal risk and often helps develop the game. In the same way, providing a summary does much to further the conversation and is often a safe bet when a counselor is unsure how to proceed. Below is an example of how a chaplain could effectively engage with a service member using the OARS principles:

CHAPLAIN: SPC Allen, what brings you in today? [Open question]

SERVICE MEMBER: I don’t know, chaplain. I’m at the end of my rope and needed to talk to someone.

CHAPLAIN: You’re overwhelmed and you want help. [Simple reflection]

SERVICE MEMBER: I’m just a mess. I’m not sleeping well. I’m having nightmares. I can’t seem to concentrate at work. It’s getting pretty ugly.

CHAPLAIN: This is affecting several areas of your life. [Complex reflection]

SERVICE MEMBER: That’s right, I feel like I’m totally losing it. What am I supposed to do?

CHAPLAIN: That’s certainly an important question. Can you tell me more about how this started happening to you? [Affirma-

tion, Open question]

SERVICE MEMBER: I first started noticing it when I was deployed. We were in some crazy stuff. There was one week when we were in a few firefights and one of them lasted all day. Three of my good friends didn't come home. We were all on high alert, constantly fearing that one lax move could be our last. That was toward the end of the deployment. I've been back now for over six months but things don't seem to be getting better. I know there's no real threat now, but my mind is always on edge. I just can't get it to stop racing.

CHAPLAIN: Let me see if I've been hearing this right. You were in some scary situations where some of your friends were killed and your life was also in danger. You were extra vigilant while down range which may have helped save your life. However, now that you're back home you can't seem to turn it off. Your life-saving vigilance is now wreaking havoc on you and you want to get better. [Affirmation, Summary]

SERVICE MEMBER: That's right, chaplain. So what now?

This dialogue between a chaplain and service member did not delve right into offering options for treatment. The chaplain likely suspected PTSD early in the conversation. Once he suspected PTSD, he may have been tempted to then jump into expert mode by asking a series of closed questions in order to confirm his suspicions. Instead, however, he stuck with engaging by using reflective listening and other OARS principles. This helped the service member know that he was being heard. With just a couple open questions the service member was able to share what was really important and it did not require the chaplain to make

as many assumptions. It may have seemed like the slow path to go, but in the end it likely saved time.

This conversation would not have ended here, but this offers a snapshot of MI engaging during a brief conversation. Notable aspects of the conversation are that the chaplain used open questions, there were more reflections than questions, and he provided affirmations and a summary. While using OARS to effectively engage may seem somewhat robotic, it is actually a potent way to build rapport while avoiding many counseling traps that can derail an effective working relationship.

Exploring Values and Goals

One of the reasons why MI is so fitting for chaplains is because of the emphasis that it places on values. Chaplains know that their job is not to encourage service members to become their personal idea of an upright individual. Rather, they are there to ensure that service members can worship according to their own faith backgrounds. Instead of promoting good character traits for service members, he should first find out what the service members value, then strive to bring those values within reach.

Exploring values and goals is a fundamental aspect to MI that is diametrically at odds with the expert-pupil dynamics. Most people would actually make fairly good decisions if they fully considered their core values. Poor choices are often made when a person's focus moves away from his core values and instead temporarily focuses on a desire of the moment. For example, a mother who smokes may be aware that her smoking is not healthy, and it may shorten the years that she'll be able to spend

with her kids. At the same time, she may value her family more than anything in life. The problem is not with her values; it is a problem with aligning her actions with her values.

Since the value of her family relationship seems to be at odds with her smoking habit this woman may be experiencing cognitive dissonance: distress stemming from the disconnect between her values and actions.⁹² The way to reduce stress from cognitive dissonance is to either lower values to match actions or to improve actions to match values. If she is not changing her values or actions, thoughts about what her smoking habit is doing to her family may be a strong source of stress.

In MI, understanding the core values and goals of a person is critical to understanding them as individuals. Spending time exploring what makes someone tick, and recognizing their most earnest desires in life is a major part of the engaging process. Furthermore, Miller and Rollnick assert that “when you understand what people value you have a key to what motivates them.”⁹³ Once a person’s major values and goals are revealed, they can often be used as wellsprings for drawing out motivation to change.

While exploring an individual’s values, a chaplain may find it beneficial to provide a list of example values so that service members may scroll through options to see what resonates with them. Bill Miller and a team of other MI trainers assembled a list of values they find useful in presenting to clients. The values can either be presented as a list or as a deck of cards with one value

92 Sara McCleod, “Cognitive Dissonance,” Simply Psychology, 2008, accessed January 14, 2016, <http://www.simplypsychology.org/cognitive-dissonance.html>.

93 Miller and Rollnick, *Motivational Interviewing*, 75

per card.⁹⁴

Table 1. List of Example Values⁹⁵

Acceptance	Accuracy	Achievement	Adventure	Art	Attractiveness
Authority	Autonomy	Beauty	Belonging	Caring	Challenge
Cooperation	Courage	Courtesy	Creativity	Curiosity	Dependability
Diligence	Duty	Ecology	Excitement	Faithfulness	Fame
Family	Fitness	Flexibility	Forgiveness	Freedom	Friendship
Fun	Generosity	Genuineness	God's Will	Gratitude	Growth
Health	Honesty	Hope	Humility	Humor	Imagination
Independence	Industry	Inner Peace	Integrity	Intelligence	Intimacy
Justice	Knowledge	Leadership	Leisure	Loved	Loving
Mastery	Mindfulness	Moderation	Monogamy	Music	Non-comformity
Nurturance	Openness	Order	Passion	Patriotism	Popularity
Power	Practicality	Protect	Provide	Purpose	Rationality

⁹⁴ Miller and Rollnick, *Motivational Interviewing*, 80-83.

⁹⁵ This Table is from *Motivational Interviewing*, 80-83.

Realism	Responsibility	Risk	Romance	Safety	Self-Acceptance
Self Control	Self-Esteem	Self Knowledge	Service	Sexuality	Simplicity
Stability	Tolerance	Tradition	Virtue	Wealth	World Peace

With this list a service member could choose several values that he feels describe him. It might even be helpful to provide him an opportunity to add some of his own values which can be facilitated by including some blank boxes or cards at the end. After the values are chosen he can rank order them to reveal the core values that are most important.

Knowing that values are a key to change, how could a chaplain use this key to unlock a service member's goals? Recognizing discrepancies between values and behavior is a great start, but to directly challenge a service member's discrepancy could likely cause defensiveness. The temptation to point out these discrepancies or faults is known as the righting reflex. Miller and Rollnick describe the righting reflex as "the desire to fix what seems wrong with people and to set them promptly on a better course, relying in particular on directing."⁹⁶ So while it can be helpful for a service member to recognize a discrepancy, it would be best to develop the discrepancy without a provocative challenge.

Imagine how it would be if the mother who smoked was told by her chaplain, "you say that your family is most important to

⁹⁶ Miller and Rollnick, *Motivational Interviewing*, 6.

you, but can't you see that your smoking is hurting them? This response would certainly evoke shame and guilt: unhelpful feelings that she was probably already experiencing. It does not take skill or training to offer unsolicited advice which is why it is so common. Alan Zuckoff, a leading member of Motivational Interviewing Network of Trainers (MINT), speaks firmly on how this type of advice is often more harmful than helpful. Directing his comments toward people struggling to make a desired change, Zuckoff explains,

Unsolicited advice, rational persuasion, threats, or confrontation are all toxic to anyone who is stuck, trying fruitlessly to make or act on a decision. Unwanted efforts to direct your decisions or actions, no matter how well intended, only divert your energy and focus from wrestling with the problem to wrestling with the source of the pressure. They steer you toward avoiding, pretending, denying, or giving up. They leave you feeling deflated, demoralized, and generally worse about yourself than you already did.⁹⁷

So if knowing that challenging people with apparent discrepancies goes against the spirit of MI and is ultimately counterproductive, what is to be done? In the experience of Miller and Rollnick, people generally recognize these discrepancies on their own. An MI-styled challenge would be more of a self-challenge from the service member rather than from the chaplain. When further explored with the OARS tools, service members are able to come face to face with their own discrepancies and evoke their internal motivation to take a significant step for-

⁹⁷ Alan Zuckoff, *Finding Your Way to Change* (New York: Guilford Press, 2015), 6.

ward.⁹⁸

Process #2: Focusing

In terms of MI, focusing is “the second of four fundamental processes of MI, which involves clarifying a particular goal or direction for change.”⁹⁹ MI is a style of communication that is aimed at the process of positive change. With that in mind, it makes sense that focusing would be essential to this process—something that gives purpose and direction to pastoral counseling as a whole. Sometimes the focus is obvious or clearly stated from the beginning.

Other times the chaplain, and maybe even the service member, may be unclear about what the focus should be. Life seems to verify the adage that “when it rains, it pours.” Below is an example of a service member who approaches a chaplain because he is overwhelmed on many fronts and is not sure what his focus is:

CHAPLAIN: You’re in trouble. What happened?

SERVICE MEMBER: This is confidential, right?

CHAPLAIN: One hundred percent. I can’t and won’t say anything to anyone.

SERVICE MEMBER: That’s good, I guess, even if a lot of it will come out soon anyway. The thing is that I like to gamble sometimes. I’d like to say that I can keep things under control most the time, but sometimes I get carried away. Over the weekend I had too much to drink and I blew it all. I drained my sav-

⁹⁸ Zuckoff, *Finding Your Way to Change*, 251

⁹⁹ Miller and Rollnick, *Motivational Interviewing*, 6.

ings and then lost another \$8,000 that I borrowed from a loan shark. I don't know what I was thinking; I guess I was overly optimistic with the alcohol and all. I just don't know what I am going to do now.

CHAPLAIN: You lost all your money in one weekend and you don't know what to do about it.

SERVICE MEMBER: Right, I mean being \$8,000 in the hole is bad, but I'm worried about what this is going to do to my career. I'm in military intelligence and have a top secret security clearance. Having debts like this is one of the main ways people lose their clearances. I'm basically out of a job without my clearance. To make matters worse, though, when my wife found out what I did she blew up on me and took off. She probably went to her mom's, but she's not answering my calls.

CHAPLAIN: Looks like you have a lot of heavy stuff you're dealing with right now, let me see if I'm understanding everything. You gambled away your savings and got into debt. This made your wife mad so she left. You are concerned about her leaving, but you are also concerned about losing your clearance since this would jeopardize job. Is that about right?

SERVICE MEMBER: That's right, chaplain. This whole thing has snowballed so fast I don't even know where to begin.

Here the chaplain is taking in several disastrous aspects to the service member's story. Each of the issues is important and could justify extensive attention alone. With everything that is going on it could be easy for the chaplain to get overwhelmed just by listening to the service member's circumstance and may be con-

fused about what part to focus on first. Bill Matulich points out that in MI it is generally wise to follow the client's agenda.¹⁰⁰ In this case however, the service member may be every bit as confused about where to start as the chaplain is.

In this type of scenario Miller and Rollnick suggest having a "short focusing metaconversation in which you step back with the client to choose a direction from among several options."¹⁰¹ This process of focusing is called agenda mapping. They find that visual aids can be particularly helpful for this process. They suggest using a sheet of paper with several bubbles drawn on it. In each bubble one of the client's issues is written down. In the case of this service member, the chaplain could fill in bubbles with "financial crisis," "marital crisis," "risk of losing job," and "drinking issue." The chaplain could fill in four bubbles with the above labels and then ask if there is anything else that could be added. It would not be surprising if the service member added other answers like "problems sleeping" or "thoughts of suicide."

With all the issues laid before the service member, he would be able to spend time thinking about what issue should be focused on first. It might also be helpful for the chaplain to remind the service member that choosing what to focus on first does not necessarily mean that he has to choose the most important issue. For example, his wife might be most important to him, but he might feel that informing his command of his financial issue might bring hope of not losing his job. This, in turn, could address one of his wife's primary concerns. The chaplain may have

100 Matulich, *How to Do Motivational Interviewing*, 206.

101 Miller and Rollnick, *Motivational Interviewing*, 405

some ideas about what to focus on first, but the final decision ultimately resides with the service member.

It is also important to know how overwhelmed a chaplain may feel in such a complex scenario. A referral would certainly be warranted, and the results from agenda mapping could inform the chaplain what would be the most appropriate referral to start with.

Neutrality

The idea that service members have autonomy over their treatment makes sense in most scenarios, but some cases arise when their goals for treatment do not match the goals of the chaplain. This is especially true for service members who are ambivalent about making changes or who are directed to counseling against their will. For example, a senior non-commissioned officer may notice a service member within his unit who is regularly hostile at work. Wanting to help resolve the issue on a low level without any paperwork, he may send her to see the chaplain. In this case it may seem clear that the focus of the visit should be the hostile behavior—after all, that is why she was sent to the chaplain in the first place. However, the service member may not believe there is a problem with herself and she may resent being “forced” to see the chaplain.

Referencing the work of Beauchamp and Childress on ethics within helping professions, Clara Hill explains that autonomy is a basic ethical principle to which every client is entitled.

She explains that people’s autonomy allows them to determine their own goals and decisions for treatment based on their

personal beliefs.¹⁰²

In MI, Miller and Rollnick take this principle a step further by adding that counseling should be done with neutrality when there is a moral dilemma or major life decision that individuals are trying to resolve. Using a term that has long existed in the medical field, Miller and Rollnick believe maintaining neutrality can be achieved by living the principle of equipoise.¹⁰³ Equipoise is “a conscious intentional decision not to use one’s professional presence and skills to influence a client toward making a specific choice or change.”¹⁰⁴ At times this can be difficult when a counselor has moral stances that differ from those of the client’s.¹⁰⁵

Chaplains in particular should be adept at maintaining “equipoise” because of their special task of advocating the free exercise of religion. Each chaplain is endorsed by one religion yet is an advocate for as many religions as are represented in his unit. A chaplain should never seek to promote his own values at the expense of the ones his service members hold. For example, if a service member who struggled with alcoholism approached a chaplain from the Church of Jesus Christ of Latter-day Saints with the intention of improving his drinking problem, the chaplain would have to make a conscious effort to exercise equipoise. His own faith promotes complete abstinence from alcohol, but this might not be the same goal for the service member. The

102 Clara Hill, *Helping Skills: Facilitating Exploration, Insight, and Action*, 3rd ed. (Washington, DC: American Psychology Association, 2010), 61.

103 Miller and Rollnick, *Motivational Interviewing*, 233

104 While MI has person-centered roots, it is not intended to be completely non-directive. For example, an MI practitioner working at an alcohol rehabilitation center would be expected to be somewhat directive in striving toward improving the problematic drinking. Miller and Rollnick, *Motivational Interviewing*, 121.

105 Miller and Rollnick, *Motivational Interviewing*, 139.

service member may be more interested in drinking moderately, and this goal should be respected by the chaplain.

Elicit-Provide-Elicit

While it is vital in MI to counsel with neutrality, this does not mean that there is no room for providing any insights. The important thing to remember is that the client has complete autonomy over the treatment and goals. For this reason Miller and Rollnick developed a simple strategy called elicit-provide-elicited (EPE) that serves as a reminder that the patient is in charge. With EPE, they suggest that any “meaty” insights or pieces of information should be “sandwiched between two slices of wholesome asking.”¹⁰⁶ In practice it would look like: 1) asking for permission, 2) providing information, and 3) asking for the client’s response to the client’s response to the information.¹⁰⁷ Notice how a chaplain in the following example provides information while making sure that he has permission to do so:

CHAPLAIN: It sounds like you are concerned about your drinking because you frequently drink much more than you think you should. Would it be okay if I suggest a couple directions we could go with this? [Elicit]

SERVICE MEMBER: Yeah, go ahead.

CHAPLAIN: For many people, drinking is important and they do not want to completely give up having some alcohol for special occasions, social events, or to simply unwind. They feel that the best thing for them would be to try strategies to help get their

¹⁰⁶ Miller and Rollnick, *Motivational Interviewing*, 139

¹⁰⁷ Arkowitz et al., *Motivational Interviewing in the Treatment of Psychological Disorders*, 45.

drinking under control without completely giving it up. Other people, however, feel like they would be unable to handle moderation and the only thing that would seem to help is to quit drinking altogether. [Provide] Do either one of these seem to resonate with you? [Elicit]

SERVICE MEMBER: I'm definitely more like the first group you mentioned. I don't want to completely quit drinking, but I've got to be able to manage it better.

CHAPLAIN: Sounds good. Let's talk more about what controlled drinking would look like to you.

This example highlights a few principles of how counselors are to provide information, insights, or even advice. As was already mentioned, offering advice can hinder the working alliance and is often not what someone needs. However, this is not to say that sharing advice is anathema in MI. Advice can be fine when offered sparingly and while ensuring that it does not come across as a "should" or "ought to" statements.¹⁰⁷ By asking for permission before providing advice, the message of autonomy and trust is depicted. In addition to asking permission, it is also a great practice to "offer a menu of options" when providing information. This can be especially powerful because when people feel like a choice for change is of their own choosing, they are more invested in following through with the change.¹⁰⁸

The process of focusing can be compared to an infantryman during a weapons qualification with paper targets. There may be multiple targets for him to choose from on the range. The choice is his about what target he wants to engage first, but the range

108 Miller and Rollnick, *Motivational Interviewing*, 148.

officer will want to make sure that the infantryman understands which targets are in play, how much ammo is available, and the allotted time for the qualification. The range officer may have experience about what often works well for other infantrymen on the range, but he also understands that he will not be doing the shooting. Respecting the autonomy of the infantryman, he may share a couple strategies that often help others achieve higher scores. However, the infantryman's success on the range is largely going to depend on his own confidence and poise. Knowing that he is ultimately responsible for his own score, he considers his personal preferences and abilities as he develops his own plan for which targets he wants to focus on first as well as how much time and ammo he will spend on each one. With a process like this, he would ideally approach the range with greater confidence and greater probability of maximizing his score. These same dynamics play into a chaplain's interactions with service members. These principles should help the service members focus on their own goals in a way that maximizes their chances of reaching them.

Process #3: Evoking

If a counselor has engaged well with a client and they have both agreed upon a focus, they are then in prime position to explore what changes could be made.

Within the evoking process, one of the most distinctive features of MI emerges. Here a chaplain would pay special attention to a service member's ambivalence by tuning in to whether the person's responses represent "change talk" or "sustain talk". "Ambivalence," "change talk," and "sustain talk" are critical as-

pects to be aware of when performing MI.

Ambivalence carries a negative connotation because it is frequently held as the culprit for thwarting many desired changes. While this may be true at times, ambivalence is simply a state of being where someone has conflicting thoughts or feelings. Not only is ambivalence completely normal in the change process, but interpreting it as resistance will crumble the foundations of the therapeutic alliance.¹⁰⁹ It is inherently an uncomfortable place to dwell because here a person experiences the discomfort, as it were, of “being conflicted between two lovers.”¹¹⁰ Because of the discomfort of feeling torn people will often convince themselves which “lover” they will choose. The two main choices are either the status quo or change, and the status quo often wins out because it does not require an active decision.

Any self-rhetoric that favors the status quo is known as “sustain talk.”¹¹¹ Sustain talk rears its head when contemplating change. It wins out when the sacrifices for change are too great and/or the benefits of change are too small. Change talk, however, represents the exact opposite. It is defined as “any self-expressed language that is an argument for change,” and it is also one of the most reliable predictors for change. For this reason, a primary goal for MI is to “evoke” change talk from clients so that they motivate themselves to initiate and sustain a meaningful change.

All change talk increases the likelihood of change occurring,

109 Miller and Rollnick, *Motivational Interviewing*, 149

110 Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment*, 40.

111 Miller and Rollnick, *Motivational Interviewing*, 157.

but some forms of change talk are more effective than others.¹¹² MI is designed to evoke increasingly more powerful expressions of change talk. The types of change talk are divided into two broad categories: preparatory change talk and mobilizing change talk.

Preparatory change talk is represented by expressions for change that lack the same level of commitment as mobilizing change talk. Within the TTM, one would expect to hear plenty of preparatory change talk in the contemplation stage where a change is being considered, but commitments are not being made. It is important to note that even though this type of talk shows less commitment, it is a normal and essential part of the change process. Just like in a marathon, the first few miles are every bit as essential as the last few. The four main types of preparatory change talk are: desire, ability, reasons, and need—which together forms the mnemonic acronym “DARN.”¹¹³

A chaplain listening to a service member express thoughts about attending church services might hear some “DARN” comments like this:

-“I’m thinking that I might actually want to start going back to church now.” [Desire]

-“I stopped going in the past because I didn’t think I had enough time, but my Sunday mornings are pretty free lately.” [Ability]

112 Miller and Rollnick, *Motivational Interviewing*, 413.

113 Paul C. Amrhein et al., “Client Commitment Language during Motivational Interviewing Predicts Drug Use Outcomes,” *Journal of Consulting and Clinical Psychology* 71, no. 5 (2003): 872.

-“My kids are starting to get older and they should have a chance to learn about God.” [Reasons]

-“I have to start going again because I can tell that not going has taken a toll on my spirituality.” [Need]

Any type of mobilizing change talk is a step in the right direction. Service members experiencing ambivalence will express both change talk and sustain talk; the key for change is to simply have the balance tipped in favor of change talk. If the sustain talk dominates, or even if there is an equal ratio, then there is a higher likelihood that no significant change will occur.¹¹⁴

As already mentioned, preparatory change talk is less potent than mobilizing change talk.

Whereas many people engage in preparatory change talk regularly without making any significant changes, any expression of mobilizing change talk is much more telling. However, the preparatory change talk has its place because it is necessary in the preparation phase.

Nonetheless, the problem is that feeble change talk is often counterbalanced with arguments for the status quo instead of being nurtured. If properly cultivated, weaker change talk can grow into mobilizing change talk, and then eventually into actual change.

The elements of mobilizing change talk are commitment, activation, and talking steps. This also forms a mnemonic acronym CATs, or taken together with preparatory change talk: DARN CATs. Commitment represents a resolution for a decision, ac-

114 Miller and Rollnick, *Motivational Interviewing*, 160-161.

tivation is a willingness to accept what that decision would entail, and taking steps means that some action on the decision is already in motion.¹¹⁵ Back to the example of the service member who was expressing interest in attending church, mobilizing change talk might look like this:

“I’ve decided I’m going to start going back to church.”
[Commitment]

“I’m not worried about giving up a couple hours on Sunday mornings.” [Activation] “I already looked online to see when the service starts.” [Taking steps]

One goal of MI is to help someone reach a decision and act on it, but it is important to remember that the decision is the client’s. In the above example, for instance, the service member could have expressed many of the same types of change talk, but the statements could have been in favor of not attending church services. The key is to find out what the client truly wants and to then nurture the desire so that self-efficacy, resolution, and action follow.

Evoking Change Talk

While MI is a model for change, it does not necessarily matter what the change is—so long as it eventually overcomes ambivalence. Ambivalence is an uncomfortable state to be in and it is easy to get sucked into its discouraging eddies. MI’s goal is to help break the cycle of ambivalence, and it largely does so by evoking the client’s own motivation.

This is one of the key aspects that makes MI so effective.

115 Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment*, 86.

Miller and Rollnick strongly maintain that “you can substantially influence how much change talk your clients will voice.”¹¹⁶ This claim is supported by a study conducted by Glynn and Moyers which showed that MI- styled questions and reflections significantly promote change talk.¹¹⁷ Simply put, MI is largely effective because change talk is indicative of change, and counselors can influence how much change talk a person utters. This principle is what makes client language such an important element in MI.

There are infinite ways to evoke change talk, though not all are equally effective. If a chaplain is attuned to recognize what change talk sounds like, he can use it as feedback to know what to continue doing. Some of the most proven methods of evoking change talk are through exploring values and goals, using the importance or readiness rulers, and by simply asking evocative questions.¹¹⁸ This is especially important for chaplains as they help service members explore temporal and spiritual values.

Values and Goals

The idea of exploring values and goals has already been discussed as part of the engaging process. It is something that should come naturally to a chaplain and it is as important to the evoking process as it is to engaging. When someone is asked to share what it is they value most in life, it often creates a stark juxtaposition to current deleterious behaviors. By pulling together the values and behavior, a chaplain could gently develop a discrepancy that the service member could address:

116 Miller and Rollnick, *Motivational Interviewing*, 165.

117 Miller and Rollnick, *Motivational Interviewing*, 168.

118 Glynn and Moyers, “Chasing Change Talk,” 66.

CHAPLAIN: You say that your husband and daughter are the most important things in your life?

How does that affect the decisions you are trying to make right now?

SERVICE MEMBER: Honestly, I try not to think about that too much. I know I drink a

lot and I've always said that it's fine because it's not affecting anyone else. For the most part it doesn't because I'm sober at work and I never drink and drive. But I can't honestly say that it isn't hurting my family. I spend quite a bit of time and money on alcohol that I feel like I should be spending on my family.

Exploring values and goals does not always evoke such strong change talk, but it is often a powerful tool for revealing someone's deeper desires while providing a jolt of motivation. Importance and Readiness Rulers

The importance ruler is an imaginary scale between zero and ten that represents how important it would be for the client to change. Miller and Rollnick provide a simple example of how to pose this question: "On a scale from 0 to 10, where 0 means 'not at all important' and 10 means 'the most important thing for me right now,' how important would you say it is for you to ____?"¹¹⁹ The power that this question has to evoke change is by the follow-up question of "why not a lower number like ____?" So unless the number is zero, which it should never be for someone who is ambivalent, then the counselor can always ask why it is not lower. This essentially asks the client to verbally defend her reason for feeling it is important to change, a defense that would

¹¹⁹ Miller and Rollnick, *Motivational Interviewing*, 174.

be coded as change talk.

The readiness ruler is very similar to the importance ruler, only it targets the client's current readiness to make a change. The same follow-up question of "why not a lower number" will evoke similar change talk as from the importance ruler, only it will be more focused on the timing of the decision and may reveal a change barrier that may be worth exploring. If the service member happens to answer with a high score, this may indicate to the chaplain that he is getting ready to develop an action plan **for change**.¹²⁰

Evocative Questions

Evocative questions allow people to voice their own reasons for change, even if they are ambivalent.¹²¹ These types of questions take practice, but remembering the DARN CATs acronym reminds about what types of questions lead to preparation or mobilizing change talk:

-“How would you like your life to be different than it is now?” [Desire]

-“How confident are you that you'd be able to quit smoking if you really put your mind to it? [Ability]

-“Why is saving money so important to you?” [Reasons]

-“What do you have to sacrifice to succeed?” [Need]

-“How sure are you that this is something you want to do?” [Commitment]

120 Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment*, 139.

121 Clifford and Curtis, *Motivational Interviewing in Nutrition and Fitness*, 75.

-“Tell me about how prepared you are to make this change now?” [Activation]

-“What have you already done to start eating healthier?” [Taking steps]

Questions that evoke responses of commitment, activation, or taking steps should generally be saved until an individual has decided what she wants her change to be, if any change at all. By trying to evoke mobilizing change talk too early clients may feel manipulated or overwhelmed.¹²²

The act of evoking change talk is not intended to be manipulative. Rather, it is like fetching water for someone who is thirsty. Only, in this case, you would draw from that person's own well. He may have multiple wells to choose from, so you would have to know what kind of water he is really wanting and then go to the right well to get it. The water from both wells is already his; you are simply bringing the water he really wants.

Above are examples of how to evoke change talk, but how should a chaplain respond when a service member is already voicing change talk? The answer is to continue doing what worked. The same OARS principles (open questions, affirmations, reflections, summaries) that were vital to the engaging process continue to be important in responding to change talk. Reflections are especially important because, “in general, you will get more of whatever you reflect.”¹²³ This same principle applies to whether a chaplain is reflecting back change talk or sustain talk. The reflection sends a message of wanting to hear

122 Miller and Rollnick, *Motivational Interviewing*, 171.

123 Miller and Rollnick, *Motivational Interviewing*, 188.

more of what was just said. Consider the various ways a chaplain could respond to the following statement of a service member: “I have been meaning to start eating healthier, but I just don’t want to give up my ice cream.”

Here the service member is giving both change talk and sustain talk, something very common for a person stuck in the conflict of ambivalence. Any reflection in this case should help with engaging. If the service member has already decided that he wants to improve his diet then this would be a perfect time to decide what to reflect back. The chaplain’s response could be, “you like ice cream.” This may help the service member know that he is being heard, but it is also going to call for more sustain talk as the service member agrees and explains why he likes ice cream so much.

However, instead of reflecting the part about the ice cream, a chaplain could say, “you’ve already put a lot of thought into improving your diet.” This reflection is focused on the part of the service member’s statement that is change talk. The service member would likely continue by explaining why he has been wanting to improve his diet or when he thinks would be a good time to do it. As the chaplain reflects back the change talk, the service member continues by articulating reasons for change which would eventually increase his motivation, readiness, and self-efficacy. Sometimes focusing on the change talk can be difficult because it can be totally surrounded by conflicting sustain talk. As a chaplain sharpens his ear he will recognize the change talk when it surfaces. He will then be better at “snatching change talk from the jaws of ambivalence.”¹²⁴

124 Miller and Rollnick, *Motivational Interviewing*, 187.

Sometimes, however, a client is not simply expressing both change talk and sustain talk, but is really voicing an honest concern that is standing as a barrier. Avoiding these concerns in order to only reflect back change talk sends a message of not really caring about what the client is thinking or feeling. When the predominant message of the client revolves around these concerns it can come off as being unmotivated or resistant. In the world of counseling and psychology, “resistance” has often been the scapegoat for why therapists are unable to help.

After all, therapists have the training and answers; it just depends on whether the client is motivated enough to apply the counsel. Bill Matulich explains that these views are counterproductive because “they don’t help inform therapists and counselors what to do when faced with resistance.”¹²⁵ In MI, the term resistance is not seen as helpful and is largely avoided. Instead, there is simply sustain talk, which is a normal aspect to ambivalence, or there is discord which is an indication that the counselor is not engaged well.

When MI is done well, there should ideally be very little discord. Discord would be expected more in counseling environments where therapists challenges clients with their “expert” insights. In MI, counselors are not viewed as the experts and are not supposed to face off with their clients. Signs of discord can be detected when clients start having to defend themselves, when they interrupt, or when they challenge the counselor.¹²⁶ When this happens it would be wise to refocus on engaging so the therapeutic alliance can be reestablished. This may require

125 Matulich, *How to Do Motivational Interviewing*, 673.

126 Miller and Rollnick, *Motivational Interviewing*, 204-206.

immediacy, something that Clara Hill sees happen when “helpers disclose personal feelings, reactions, or experiences about the client or relationship.”¹²⁷ By addressing the tension directly and respectfully, appropriate steps can then be taken to overcome it.

As mentioned above, discord should not be a major issue if the spirit of MI is followed correctly. In fact, MI has been shown to be particularly useful for helping ameliorate discord in cases when it is anticipated.¹²⁸

Evoking Confidence

Motivational Interviewing is a conversation about change. As previously discussed, MI works well for helping clients resolve their ambivalence. What is to be done, though, for those who are not ambivalent about making a change, but they lack confidence in their ability to do so? What if they have tried and failed so many times that they have given up hope of ever reaching their goal. This may sound like the common New Year’s resolution that is often broken before January is even over. If past behavior is supposed to be the best indicator of future behavior, how is anyone supposed to maintain enough confidence and hope to change when it seems like failure is the only reliable outcome?

Hope is absolutely critical to successful change and MI seeks to evoke the hope that change calls for. MI takes the perspective that, within a person, “the seeds of hope are already there, wait-

127 Hill, *Helping Skills*, 254.

128 D’Amico, Osilla, Hunter, “Developing a Group Motivational Interviewing Intervention for Adolescents At-Risk for Developing an Alcohol or Drug Use Disorder,” 1-17.

ing to be uncovered and brought into the light.”¹²⁹ Three proven methods for evoking client hope is to: 1) use a confidence ruler, 2) focus on strengths, and 3) review past successes.

The confidence ruler acts is just like the importance or readiness rulers which have already been discussed. When a client is asked why she would not rate her confidence lower than she did, she will likely proceed to explain what her assets for successful change are.¹³⁰

Focusing on strengths can be a great source for bolstering confidence. Everyone has several strengths that they draw upon to cope in life. By spending time listening to a client brainstorm some of his own strengths, realizations are made on how these strengths can be applied to the situation at hand. Even reflecting what the client says about these attributes will elicit several change-talk statements that eventually pay dividends to fortifying confidence.

Reviewing past successes is a technique similar to another therapeutic style called Solution-Focused Brief Therapy (SFBT). SFBT is a goal-oriented approach that examines what has successfully worked in the past that can be applied to the client's current situation. A significant assumption with SFBT is that people are inherently resilient and resourceful, and consequently, they have successfully coped in the past.¹³¹ Given the

129 Miller and Rollnick, *Motivational Interviewing*, 214.

130 Miller and Rollnick, *Motivational Interviewing*, 216-217.

131 Miller and Rollnick, *Motivational Interviewing*, 219.

opportunity to reflect and explore, people can cope with their current problems by applying what has previously worked:

CHAPLAIN: It sounds like you don't want to argue with your wife anymore but you say it just happens no matter what you try.

SERVICE MEMBER: That's right.

CHAPLAIN: Is there a time in the past when you didn't argue?

SERVICE MEMBER: I don't know, it seems like we are always fighting.

CHAPLAIN: So you argue a lot. Can you tell me about a time, even if it was brief, when you were together but not fighting?

SERVICE MEMBER: I guess one thing that comes to mind was last week when we watched a movie. I don't know if that counts because we weren't really talking either.

CHAPLAIN: Actually, that seems like a good start. You watched a movie and didn't argue. You must have also been able to talk cordially enough to agree on the movie in the first place. Tell me more about what happened.

SERVICE MEMBER: I guess you're right; we didn't argue in picking out the movie. I dragged her to see Star Wars when it came out so we both knew that this time we were going to watch one of the romantic flicks that she likes.

CHAPLAIN: Looks like experiences like this make you feel as if this marriage has its positive moments—like you have a fighting chance.

SERVICE MEMBER: I guess it does have its moments; it's

just hard because there are also so many moments when it isn't good.

There is still significant amounts of ambivalence here, but the tone of the conversation has changed. By focusing on past successes, the service member is more open to change because he was reminded of reasons to keep his marriage going. The chaplain could continue to focus on past successes, reflecting the positive aspects of the marriage in order to evoke more change talk. Eventually, this should help resolve the current ambivalence.

Reviewing past successes is an outstanding method to bolster confidence, but it is also an important principle to keep in mind during the final process: planning. When clients create a change plan that is based off successes that they have previously proven, they will generally be confident that it will work again.

Process #4: Planning

Planning represents the final process of MI. This may seem incomplete because of the obvious fact that success comes after execution rather than planning, but it is important to remember that MI is not meant to be a long term treatment. This is fitting for a military chaplaincy environment where chaplains rarely visit with their service members in a pastoral counseling environment more than just a few times. The model of MI does not require many sessions in order to be effective. If each of the four processes are appropriately applied, clients are much more likely to have a clear vision of what they want, a determination to achieve it, and with the help of the final process, a plan to bring it all into fruition.

There is no set time when a client should be ready to develop a plan to change, but if a counselor listens carefully he will hear when the client is ready. While using MI, the client's talk will gradually shift to change talk that increases in frequency and potency. He will also begin to envision himself making the change.¹³² Sometimes this envisioning may come in the form of questions like: "What would I do on the weekends if I didn't go to the bar?" or "What should I wear if I start going to church?"

Once the client seems ready to make a change, the easiest way to be sure is to simply ask. Asking does not need to be forcing the issue of change because if the client is ready it would be more powerful for the decision to come from her own lips. Miller and Rollnick suggest that the key question to ask at this point is simply any variation of "what's next?"¹³³ This gives the client the opportunity to internally decide that they are ready to change (or not change) on their own terms.

When a chaplain works with a service member to help him change, the change belongs to the service member, but the chaplain can help set the service member up for success. For example, he can keep in mind the importance for change goals to be SMART. The concept of SMART goals was developed in 1981 by a business man who researched how to increase productivity from a management perspective.¹³⁴ SMART is an acronym that describes elements of the types of goals that are most successful:

132 Miller and Rollnick, *Motivational Interviewing*, 260-263.

133 Miller and Rollnick, *Motivational Interviewing*, 265.

134 George T. Doran, "There's a Smart Way to Right Management's Goals and Objectives," *Management Review* 70, no. 11 (1981): 35-36.

- Specific—the goal should not be vague like simply trying to be nicer. Specificity would delve into the details of what represents “being nice.”
- Measurable—if the goal can be measured and tracked there is more feedback that helps a person stay on track with achieving the goal.
- Assignable—who it will be that works toward achieving the goal. Generally this will be the person who sets the goal.
- Realistic—the goal must be feasibly attainable, but only with concerted effort (i.e., reachable with stretching).
- Time-bound—time constraints help people maintain a sense of urgency so they do not procrastinate change until the ever-elusive tomorrow.

When it is time to develop a change plan, a chaplain may feel inclined to be directive because he could be aware of what tends to be helpful for other people making similar changes. For example, a chaplain working with a service member who wants to quit drinking may have seen many people who have found success with Alcoholics Anonymous (AA), and would thus recommend it to the service member. While the suggestion may be good, such a directive style is not in accordance with the spirit of MI. The chaplain may have valuable insights and recommendations, but it is helpful when they are offered with permission. Also, offering a menu of options gives the service member more autonomy and allows her to choose a treatment option that resonates with her.¹³⁵ If she can sell herself on the idea from the beginning she will be more confident that she can

135 Allen et al., Enhancing Motivation for Change in Substance Abuse Treatment, 101.

succeed in her change goal. Being able to offer a menu of options makes it important for a chaplain to be familiar with a variety of resources that can be available to service members. An example of options for a service member with a drinking problem could include Alcoholics Anonymous, Calix Society, Moderation Management, Overcomers Outreach, Rational Recovery, Secular Organizations for Sobriety, SMART Recovery, and Women for Sobriety.¹³⁶ After deciding to make a change, motivation is often high, but the truth is that change is difficult and usually entails several slip ups. It might be wise for a counselor to spend time anticipating possible problems that might arise.¹³⁷ The client will often know of settings or triggers that could make maintaining the change difficult. Enacting what to do in these situations could make it easier by having pre-planned decisions of what to do in difficult situations. For example, a service member may want to improve her sleeping habits but admits that browsing social media on her phone often keeps her up late at night. Exploring this scenario could allow the service member to generate ideas on how to remedy the temptation. The service member may even have friends or family that she could include to support her in her change plans.¹³⁸

Finally, it is important to remember that change is not easy and slipping up is normal to the change process. When people do slip up they often view it as reason to quit, thinking they have already failed. If a client can view their setbacks as learning experiences instead of failures they should be able to experience

136 Miller and Muñoz, *Controlling Your Drinking*, 254-55.

137 Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment*, 105.

138 Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment*, 107.

success that comes in the form of several peaks and valleys, but with an overall net gain.

Conclusion

Military chaplains wear several hats as they minister to the men and women within their stewardship. The pastoral counseling they provide every day is tailored to the variety of issues that service members face. Many of these issues relate to change, whether the changes are spiritual, physical, emotional, financial, or relational. MI stands as a tool that chaplains can use to counsel in an empathic and empirically effective manner.

The style and model of MI is effectively being used in a variety of settings, but very little has been done within the military to train their chaplains on how MI can bless their ministry. The need for MI within the chaplaincy is clear for several reasons. First, chaplains are expected to provide counseling that is based off the will and desires of the service member. For example, service members express what they value, how they want to worship, and how they hope to cope with a military lifestyle. A good chaplain listens to the desires of the service member and does his best to accommodate. The person-centered approach of MI fits perfectly into this framework.

Another reason why MI is such an appropriate resource to military chaplains is because chaplains are often the first people that service members see when they are in need of help. Often times the help that chaplains provide comes as they refer service members to those who are more trained and specialized in certain areas. MI works for long term visits with clients, but it is uniquely effective in helping referred clients to adhere to

programs that will help them achieve their desired change. Chaplains rarely have the luxury of seeing service members for several visits, so MI's effectiveness of preparing for referrals or self-change meets a major need that exists within the chaplaincy.

This information represents an effort to provide military chaplains with a resource that they may use to improve their craft in counseling service members who are dealing with change.

Ultimately it is hoped that this counseling approach will serve some part in improving the care that service members receive from their chaplains. If it even helps a single chaplain be more adept at helping with change, it will certainly bless the lives many men and women who choose to wear the uniform.

Section II—Self Help Packet (Motivational Interviewing)

You have likely picked up this packet because there is something in your life that you wish could be different. It may be regarding your health, your spirituality, your family, or your job. While you may wish that some things could be different, you likely also recognize that the answer is not as simple as making a course correction as if it were as easy as exiting off the highway. Significant voluntary changes are difficult and involve sacrifices. These sacrifices may have been the very reasons why you have not already made a desired change; perhaps the tradeoff of what you would lose would not adequately offset what you would gain. Or perhaps you are absolutely set on making a change, but you have failed so many times at trying that you doubt you are even capable of changing despite your desires.

Regardless of what type of change you are contemplating or how capable you think you are, change is possible, and spending time wrestling with the idea of it is a powerful practice.

This packet is simply a vehicle for you to recognize where you are “stuck”¹³⁹ and to work your way at getting “unstuck”. This may mean that you make the very change you are contemplating, but this is not necessarily the purpose of this packet. In the end you may decide that the change is ultimately not worth it to you. This conclusion will come as you after you fully consider your inner desires and values. Whether you decide to change or

139 The concept of being stuck and trying to get unstuck is an overarching theme that Zuckoff focuses on. Zuckoff, *Finding Your Way to Change*, 2.

not change, you should at least be able to reach a point where the pressure from your impasse can subside.

The following examines the four skills learned in motivational interviewing: engaging, focusing, evoking and planning. A case study using these four skills is provided.

Process 1: Engaging

The first part of this process begins by forming a picture of how you arrived at your current situation. You are considering a change right now, but getting stuck did not come all at once. Consider this self-picture as a brief sketch where you choose what parts of your life have led you to your current position. This written sketch may include parts that go back to when you were considerably younger, or it could all be from the recent past. You may include any of your significant events, attributes, talents, fears, or desires. There is little structure in this sketch except for the fact that it all ties back to the issue of change facing you right now.

A case example is included throughout this packet in order to provide you with a partner for your change journey. SGT Johnson's dilemma may share several elements with your situation and he will journey alongside you as he responds to the same questions.

SGT Johnson's life sketch:

When I was in high school my relationship with my parents started going downhill a little. They're pretty devout Christians that were concerned about the friends I made. They are against drinking and they had a hard time accepting me when I picked this habit up. The day after I graduated I went straight to the recruiter's office and enlisted in the Army. There was something about wanting to put on the uniform that appealed to me, but I also knew my parents wouldn't be on my case

about drinking if I moved out and started my own life.

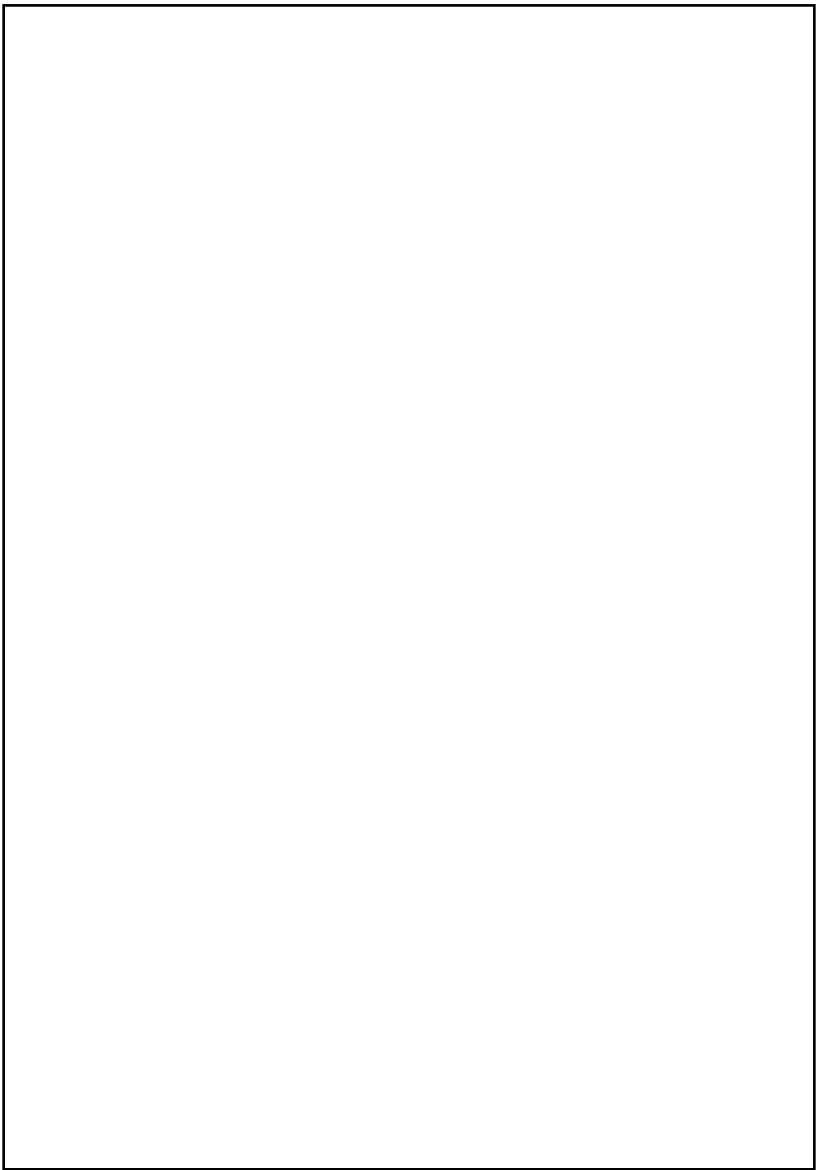
For the first couple years in, I loved it. It took me a while to learn that I couldn't drink too much on nights when I would have early morning physical training the next morning, but weekends were different. I would go every week with a few of the guys in my platoon and we would get wasted. It normally turned into competitions about who could drink the most.

After those first two years the newness of my freedom sort of wore off. I would still go out with friends to get drunk but I wouldn't get quite as drunk. Part of this is because I needed to save up for a car. I started spending about half as much money on alcohol, but it was still quite a bit. I would often feel a little guilty, but I was pretty good at pushing those feelings to the back of my mind.

This all changed last month when my mom unexpectedly died from heart failure. It really tore me up that I wasn't there to say goodbye. I felt awful that we weren't as close as I wanted to be. We would talk every once in a while over the phone, but I knew it was still hard for her to know that I was drinking and smoking. When she died I felt like I had somehow failed her as a son. The interesting thing is that I am

still drinking just as much, but I'm not able to push that guilt to the back of my mind anymore. I keep asking myself whether I should quit or whether that would even make anything better. Part of me wants to say it would help, but I'm just not sure.

Your life sketch:

A large, empty rectangular box with a thin black border, intended for a life sketch. It occupies the majority of the page below the title.

Process 2: Focusing

You may or may not have clearly stated what changes you are contemplating making in your life. Review your sketch as you reflect on your current situation in life, paying particular attention to what you like and what you would like to be different. List any issue that has anything to do with possible change, whether it is big or small. There also may be some things you are considering changing that are not reflected in your sketch. Once you have listed them out think of which issues are most important, most time-sensitive, most complicated, etc. Then rank them in order of what you would like to focus on first. The first-ranked item may be the one that is most important or it may simply be the issue that you know can give you positive momentum. You know best what your initial focus should be.

SGT Johnson's agenda:

- Alcohol (1)
- Relationship with parents (2)
- Going back to church (4)
- Staying in the Army (3)

Your agenda:

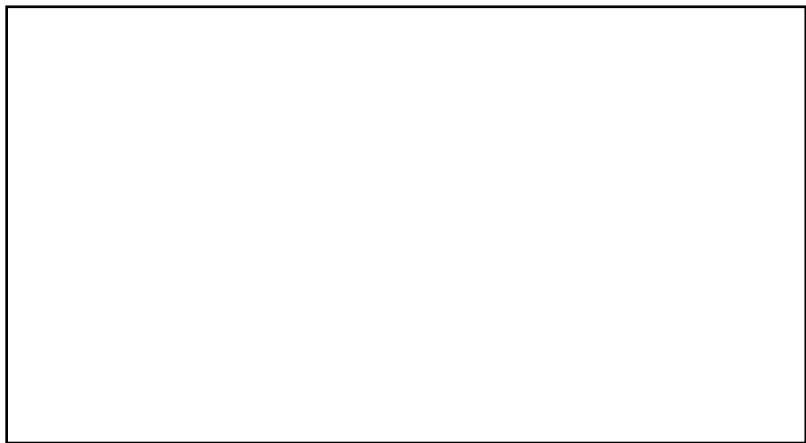
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Why did you choose the items and the order for your agenda?

SGT Johnson's agenda rationale:

I think the issue that I am most concerned about is my drinking. Part of me thinks that if I can figure this out the other items should be easier to solve. My relationship with my parents, whether I should go back to church, and whether I should renew my Army contract again are all decisions that are important, but I just don't feel like they're quite as pressing right now.

Your agenda rationale:



Directly thinking of the top issue on your list may evoke an amalgam of thoughts and emotions. Considering it is the top item on your list, it may be that this issue a significant source of discomfort whether it be from anxiety, fear, disappointment, confusion, or ambivalence.

Ambivalence is particularly common whenever scenarios of change emerge. Ambivalence often acts as the main culprit in keeping people stuck in limbo, being torn between the costs and benefits of changing.¹⁴⁰ When ambivalence wins out, change does not happen, but it offers no relief from discomfort because the status quo is perpetuated without actually being accepted.¹⁴¹ It essentially offers a lose-lose outcome of not changing, and not being comfortable with the status quo. Motivational Interviewing, the background approach of this packet, is an empirically- proven method for helping you resolve your issue of change specifically by targeting your ambivalence.¹⁴²

While ambivalence has a negative reputation for keeping people from making positive changes, it is important to remember that it is completely normal to the change process.¹⁴³ For example, without ambivalence you may not even be aware of a need to make a change. If you had a problem in your life, but were completely oblivious to it, ambivalence would not be present. With ambivalence, however, you are beginning to weigh the benefits against the costs of making a change.¹⁴⁴ While ambivalence has its place in the change process, it can also overstay its welcome. You don't always want to be stuck in the stressful rut of indecision, vacillating between multiple choices. The truth is

140 Karen Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment: Treatment Improvement Protocol Series (Tip 35)* (Rockville, MD: US Department of Health and Human Services, 2013) 40.

141 Karen Allen et al., *Enhancing Motivation for Change in Substance Abuse Treatment: Treatment Improvement Protocol Series (Tip 35)* (Rockville, MD: US Department of Health and Human Services, 2013) 40.

142 Miller and Rollnick, *Motivational Interviewing*, 12.

143 Bill Matulich, *How to Do Motivational Interviewing: A Guidebook*, 2nd ed. (n.p.: Bill Matulich, 2013), 434, Amazon Kindle edition.

144 Zuckoff, *Finding Your Way to Change*, 13-14.

that regardless of how complicated your issue is, you can make a decision. Once that decision is made you can then take steps to successfully achieve it.

In the space below, describe what change you are contemplating in your life. In the second box, list all the reasons why you are considering making this change. Finally, in the third box list the reasons you have not made the change already. Describe what is contributing to you feeling stuck. Be as exhaustive as possible, remembering that there are no right or wrong answers. No matter how silly it might sound to someone else, be true to all the reasons that you experience, whether they are rational or not.

SGT Johnson's change dilemma:

Should I change my drinking habits?

SGT Johnson's reasons for considering this change:

- *I know that drinking too much causes liver damage*
- *I hate the feeling of not being in control of my drinking*
- *I usually spend over \$200 each month on alcohol*
- *A couple of my battle buddies have called me an alcoholic and told me I should quit*
- *My parents never approved of my drinking*
- *Since my mother died, I feel especially guilty*

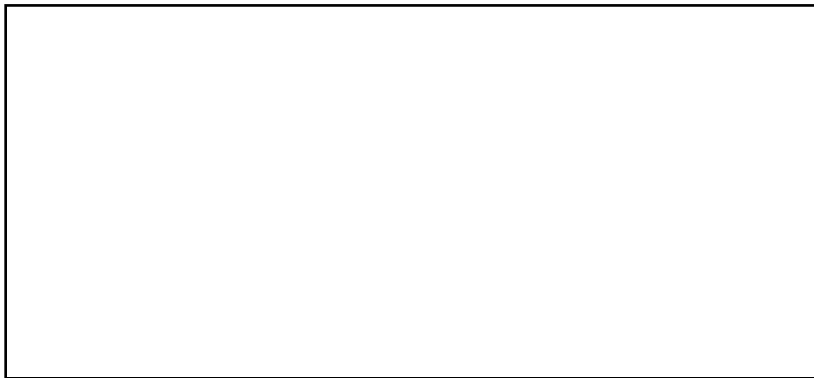
for drinking

- *I have been putting on extra weight*
- *My physical fitness scores have dropped over the last year even though I am exercising just as much*

Reasons why SGT Johnson feels stuck:

- *I enjoy the buzz but dislike hangovers*
- *It's part of my independence, but I don't like losing control when I'm drunk*
- *It's part of Army culture*
- *I use it to unwind after a stressful day or week*
- *Going out to bars with my buddies is the highlight of my week*
- *Part of me thinks that drinking is morally wrong, but the other part thinks it isn't*

Your change dilemma:



Reasons for considering this change:

Reasons for feeling stuck:

Your lists of reasons to change and not change may have several similarities with SGT Johnson's. The first thing to note is that he has been told from friends and family that he should quit. While he may respect his friends, and has already expressed his concern for his parents, their advice has done little to affect SGT Johnson's drinking. You may also have several people freely offering you advice. The last thing you need is someone else telling you what you should do, and that is not the purpose of this book. MI is a person-centered approach where your decisions are respected and supported.

Not only is this approach in line with the spirit of MI, but it is also more effective for you in the end. Think of your natural response when someone tells you what to do. You want to push back and even do the exact opposite. You may not always do the opposite if it is clearly the wrong choice, but it is a natural response that is evident as early as the terrible twos. The choices that have the greatest sticking power are the ones you make on your own: ones where you have weighed the options and convinced yourself of how important it is.

So going back to your lists, look at the reasons that come from other people's suggestions. What are you feeling when you hear their advice?

SGT Johnson's reaction:

When some of the guys in my company call me an alcoholic I usually laugh it off and tell them they are wrong, but I really would like to tell them to shove off and mind their own business. They really don't know anything about me and have

no idea what kind of problem alcohol actually is for me.

I never really appreciated my parents' attempts to get me to stop drinking either. But deep down I knew they were just trying to do their best to help me because they loved me. I just didn't think I needed that kind of help. Now that my mom is gone I feel guilty for ignoring their advice. But I still would like to make my own decisions.

Your reaction:

So whether you ultimately agree or disagree with advice from others, it is your decision to make. You obviously won't make a decision just because someone else tells you that you should, but what they say may influence your personal reasons. For example, if you trust someone's advice or know that going against what they say would affect your relationship with them, you may take that into account for your personal reasons. In the end, if you are going to successfully make a change, it will be because you convinced yourself that it is worth it.

While MI is a model for change, it does not mean that you are required to make any changes. At the very least, the intent of this packet is to help you eliminate the discomfort that comes from ambivalence. If you decide that making your change is not worth what you would have to give up, this model gives you room to feel okay with that. By eliminating some of the pressure that you may be feeling regarding this issue, you may actually find it easier to achieve what you really want.

Sometimes finding out what you really want can be a difficult task itself. This often goes back to the essence of a person's core. You may find it helpful to examine your key values, keeping in mind how they may apply to your decision at hand. Feel free to use the list below from Miller and Rollnick's *Motivational Interviewing*. Simply underline as many attributes as you feel represent your values. If there are values important to you which are not on this list, feel free to add some of your own responses in the blank spaces.

List of Example Values

Acceptance	Accuracy	Achievement	Adventure	Art	Attractiveness
Authority	Autonomy	Beauty	Belonging	Caring	Challenge
Cooperation	Courage	Courtesy	Creativity	Curiosity	Dependability
Diligence	Duty	Ecology	Excitement	Faithfulness	Fame
Family	Fitness	Flexibility	Forgiveness	Freedom	Friendship
Fun	Generosity	Genuineness	God's Will	Gratitude	Growth
Health	Honesty	Hope	Humility	Humor	Imagination
Independence	Industry	Inner Peace	Integrity	Intelligence	Intimacy
Justice	Knowledge	Leadership	Leisure	Loved	Loving
Mastery	Mindfulness	Moderation	Monogamy	Music	Non-comformity
Nurturance	Openness	Order	Passion	Patriotism	Popularity
Power	Practicality	Protect	Provide	Purpose	Rationality
Realism	Responsibility	Risk	Romance	Safety	Self-Acceptance

Looking at the list of values on the other page, which three attributes seem to hit at your core values the most? Sometimes focusing on your key values allows you to put your present situation into proper perspective. Think of your high school science labs where you examined specimens through the lens of a microscope. You were probably amazed at how the magnified image looked so different from the object to the naked eye. In the same way, the decision you currently face may be so magnified in your life that it is difficult to view the entire picture. Reviewing your key values allows you to step back to look at what matters most to you. This, in turn, helps put your current dilemma into an appropriate perspective.

In the spaces provided below list your three values, describing why they are important to you and how they influence your current dilemma.

SGT Johnson's top three values:

Value #1:

Hard Work

Why this value?

Growing up I always saw my dad work hard. He never complained about the long days he'd put in at his job and when he would come home each day he would be willing to do housework even when he was tired. His example helped me develop a powerful appreciation for work. I am proud that I have not received handouts for what I have worked to achieve. Even though I have only been

in the Army for about five years, I have promoted quickly and have developed a reputation of not being afraid of working hard.

How does this influence your decision?

I know that whatever decision I make, I will not allow myself to choose something just because it is easier.

Value #2:

Duty

Why this value?

I joined the Army for a number of different reasons. One of them was to get out on my own, but I could have moved out with any job. I chose the Army partly because I value freedom and feel that it is a duty of mine to spend time defending it.

How does this influence your decision?

It's hard to say how my sense of duty could influence my drinking. I'll admit that I almost feel it is a duty to quit out of respect for my mom's wishes.

Value #3:

Freedom

Why this value?

I've always been proud of the fact that America is a free country. My appreciation for freedom

goes beyond national freedom though. I appreciate that I can make choices for myself and I get very defensive when I see people try to make my choices for me.

How does this influence your decision?

I want the choice of whether I drink to be my own. I don't want to listen to anyone else tell me what I can and cannot do. However, something that I don't like about alcohol is that when I am drunk, I feel like I am giving up some of my control. I don't recognize it in the moment, but when I think back on things I do when I'm drunk, I know that I would never do some of them while sober.

Your top three values:

1.

What do you value?

Why it is important you you?

How does it influence your decision

2.

What do you value?

Why it is important you you?

How does it influence your decision?

3.

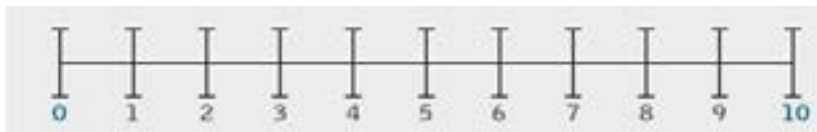
What do you value?

Why it is important you you?

How does it influence your decision?

Process 3: Evoking

Keeping your values in mind is a great practice as you weigh the pros and cons of decisions. People generally make very positive decisions when they are not pressured one way or the other, but are able to act based off of what they think is best. But how important is it to you to make this change in your life right now? If you were to choose on a scale of 0-10, with 0 meaning not important at all, and 10 meaning very important, where would you put yourself?



SGT Johnson's answer: 5

Your Answer:

Assuming that you didn't respond with a zero, explain some of your main reasons why you chose the number that you did instead of a lower number?

SGT Johnson's Justification:

I guess I couldn't justify a lower number because I have already been recognizing how alcohol is putting a significant dent in my wallet and physical fitness scores. Also, now that my mom died I feel like I sort of owe it to her to quit drinking since she wanted me to stop so much. I'm just not convinced that drinking is a bad thing, though.

Your Justification:

Looking at your above response, you may want to reflect on the reasons you are giving that push you toward change as well as the reasons convincing you to not make the change. These opposing voices are known as change talk and sustain talk.¹⁴⁵ Look back at your above statement where you describe why your change option is as important as it is. Highlight any change talk or sustain talk found within your statement.

SGT Johnson's finances, fitness, and relationship with his deceased mother seem to be the big reasons why he would be motivated to quit drinking. However, he doesn't believe that alcohol is necessarily a bad thing which keeps him from wanting to give it up.

After spending a moment reflecting on your previous response and highlights, explain why each of your responses were significant enough to include:

145 Miller and Rollnick, *Motivational Interviewing*, 165.

3. Mother.

My mom tried to encourage me to stop drinking. Even when she stopped bringing it up I could tell it was always hard for her. Before I thought that she would just have to learn to let me be in charge of my own life, especially since I wasn't hurting anyone else. Now that she's gone I am able to see that I was hurting someone else: her. I just don't consider it to be as bad as she always thought it was, but I almost feel like this is one of the only things I could do to show her that I love her now.

Explanation of SGT Johnson's sustain talk:

1. I don't think drinking is that bad.

When I say that I don't think drinking is that bad, what I mean is that I don't think it's evil. I can admit that it's not very healthy, but neither is McDonalds and my parents took me there all the time growing up. I think my parents' religious views have influenced their opinion that drinking is somehow an evil act.

Explanation of SGT Johnson's change talk:

1. Finances.

I'm not a real big spender on most things unless I think it's important to have. I would really like to save up for my future and also get a quality car sometime soon. I just hate thinking about how much money I often spend on alcohol each week. I sometimes feel sick to my stomach when I think about how much I have spent on alcohol over the years.

2. Fitness.

Physical fitness has always been something I prided myself on. I lettered in wrestling for three years in high school and my fitness was something that helped with my promotion to E5 in the Army. I'm starting to see my fitness get away from me, though, and I refuse to accept that.

Explanation of your sustain talk:

Explanation of your change talk:

Your above list of sustain talk and change talk represents your personal reasons to change or not change. There are likely people who try to influence your desires, but in the end the decision about whether you make a change is completely yours. This is appropriate considering you will have to endure the consequences of the change. As you weigh the pros and cons of the status quo versus change, keep in mind that you are the one that has to be comfortable with the choice you make. As much as possible, try to remove the pressure of change that comes when trying to live up to various expectations. Allowing yourself to consider all options as possible may help you to be more comfortable with whatever the outcome of your decision-making turns out to be.

One exercise that may be helpful in making a decision is performing a decisional balance.¹⁴⁶ A decisional balance is a thorough exploration of a situation, examining the pros and cons of each choice.¹⁴⁷ Think of your change talk and sustain talk statements above, but include any others that you think of as well.

SGT Johnson's decisional balance: (next page)

146 Decisional balances are not always used in MI. Miller and Rollnick note their usefulness when choosing to counsel with neutrality rather than proceeding with a particular change. Neutrality is the stance of this packet, especially because your issue of change is unknown to the author. Miller and Rollnick, *Motivational Interviewing*, 36.

147 Miller and Rollnick, *Motivational Interviewing*, 238.

<p>Advantages of quitting drinking</p> <ul style="list-style-type: none"> • Save money (3) • My mom would have liked it (3) • I would be more in control (2) • It could be a sign of maturing (1) 	<p>Disadvantages of quitting drinking</p> <ul style="list-style-type: none"> • I would feel like I am giving up something I want (2) • I could lose my friends (2)
<p>Advantages of drinking less</p> <ul style="list-style-type: none"> • I could still enjoy alcohol without losing control (2) • I would probably still have enough to save up for a car (3) • Moderate drinking probably isn't too unhealthy (2) 	<p>Disadvantages of drinking less</p> <ul style="list-style-type: none"> • I know my mom always wanted me to give up all alcohol (3) • I don't know whether I would actually be able to stop with just a couple drinks (3)

Advantages of
not changing
my drinking

- Drinking is fun (2)
- It's how I unwind on the weekends (3)
- I could still hang out with my buddies when they go to bars (2)
- I don't think drinking is morally wrong (2)
- I never drive drunk (3)

Disadvantages of
not changing my
drinking

- My physical fitness score will get lower (3)
- I would likely put on more weight (2)
- I might damage my liver (1)
- I might not be able to buy a new car (3)
- I would feel guilty because I know my mom really disliked my drinking (3)

SGT Johnson shows several reasons why he should quit drinking as well as reasons why he thinks it would be good to continue drinking. In his case he also provided a third example as an alternative. SGT Johnson could easily ask others to help him extend his list of reasons why he should quit, but regardless of how long the list would be, others' reasons for why he should quit will have little influence on his decision because they are not internally motivated. In SGT Johnson's decisional balance he also weighed each of his answers on a scale of 1-3 (with 3 being the highest) in order to get a better representation about what his matrix was indicating.

SGT Johnson's overall decisional balance scores:

Quitting drinking advantages: 9. Disadvantages: 4.

Drinking Less advantages: 7. Disadvantages: 6.

Status Quo advantages: 12. Disadvantages: 12.

As you reflect on your decisional balance keep in mind your personal motivation. If, like SGT Johnson, you feel like it would be helpful to see how your answers mathematically affect your decisional balance, then you may want to assign weighted values to your responses and then tally the scores at the end.

Your decisional balance:

Advantages of _____	Disadvantages of _____
Advantages of _____	Disadvantages of _____
Advantages of _____	Disadvantages of _____

Your overall decisional balance scores:

- 1.
- 2.
- 3.

As you review the results of your decisional balance you may have one of a few different reactions.¹⁴⁸ One option is that you may feel like you are ready to make a change. Seeing your answers and scores organized and weighed out may have been just what you needed to start making steps toward change. Conversely, these results may have helped you recognize that making a change is not quite worth it to you. This would be the case if the benefits of change are not significant enough to justify the amount of effort, time, money, or discomfort that you would have to invest. If this is the case for you, that is okay. You are the one who makes the decision and you will at least know that you have evaluated your options. Also, whatever decision you make you may later decide to change. At the very least, making an informed decision to not change can help bring more peace and closure than simply not changing out of sheer ambivalence. Finally, your third possible outcome could be that you simply need more time to reach a decision. You may recognize that you need more information to make a calculated decision, or you just need more time to recognize what aspects of your decision are most important.¹⁴⁹

If your decision is to maintain the status quo, your progress

¹⁴⁸ Miller and Rollnick, *Motivational Interviewing*, 240.

¹⁴⁹ Miller and Rollnick, *Motivational Interviewing*, 240.

in this packet is complete. You may commend yourself on reaching a decision and feel accomplished in largely resolving the conflict between opposing choices. Similarly, if you recognize the need for more time you do not need to continue on with this packet until you decide that change is the direction that you want to take. However, you may find it helpful to review your answers up to this point, reflecting on your responses while adding further insights. If your decision is one for change, the following section for planning is an appropriate next step as you work toward achieving your goal.

Process 4: Planning

According to an ancient Chinese proverb, “the journey of a thousand miles commences with a single step.”¹⁵⁰ The first step of a significant undertaking is often the most difficult in many respects because of the conscious decision-making that goes into starting. You have successfully begun your journey and have already taken one of the most difficult steps: deciding to change.

What stands before you now is the opportunity to create a plan which will help you achieve your goal.

The first part of your plan is to recognize your desired end state. This end state would also be known as your change goal. It essentially outlines what success would look like to you by giving a clear picture of what it is you are trying to achieve. In 1981 a business man named George T. Doran researched the principles of goal-setting in an attempt to uncover secrets to increasing productivity from a management perspective. Doran whittled down five elements that he found to be most pertinent in achieving goals. He developed the acronym “SMART” as a mnemonic device to remember each element:¹⁵¹

- Specific—the goal should not be vague like simply trying to be nicer. Specificity would delve into the details of what represents “being nice.”
- Measurable—if the goal can be measured and tracked

¹⁵⁰ Lao-tzu, “Tao Te Ching,” *Sacred Books of the East*, Trans. J. Legge, 39 (1891): under “Chapter 64,” accessed March 21, 2016, <http://www.sacred-texts.com/tao/taote.htm>.

¹⁵¹ George T. Doran, “There’s a Smart Way to Right Management’s Goals and Objectives,” *Management Review* 70, no. 11 (1981): 35-36.

there is more feedback that helps a person stay on track with achieving the goal.

- Assignable—who it will be that works toward achieving the goal. Generally this will be the person who sets the goal.
- Realistic—the goal must be feasibly attainable, but only with concerted effort (i.e., reachable with stretching).
- Time-bound—time constraints help people maintain a sense of urgency so they do not procrastinate change until the ever-elusive tomorrow.

SGT Johnson's goal:

I (assignable) will cut my drinking in half each week until I reach complete abstinence (specific and measurable). I will reach and maintain this abstinence by my mother's birthday which is in four weeks (measurable, realistic, time-bound).

SGT Johnson's goal meets all five SMART criteria. The one category that might be questionable is how realistic it is. Giving up alcohol completely within four weeks is a tall order that may not be realistic for some while being completely reasonable for others. As you set your personal goal, you will have the greatest insight into how realistic it would be to reach. In the space below write your change goal while keeping in mind each SMART element.

Your change goal:

Now that you have written your change goal, look over the goal and reflect about what thoughts and emotions this goal evokes.

SGT Johnson's reaction to his goal:

Now that I have written my goal I feel energized like I am on a mission. I know that when I really put my mind to something nobody can keep me from reaching my goals. It is a little scary, though, to think of completely giving up something that has been such a significant part of my life over the past several years. It's also scary that so many people fail regularly at trying to quit drinking. Luckily I have never failed. Sure, I've never tried to give up alcohol, but at least I don't have a losing record. What I like about my goal is that I have my mom's birthday in the back of my mind as motivation to keep with my goal. I have been thinking about her a lot since she died and she is one of the biggest reasons I want to quit.

There are also a lot of other reasons why I should quit, but my mom was probably the straw that broke the camel's back.

Your reaction to your goal:

Your reaction to your change goal may have been similar to SGT Johnson's expression of excitement and energy to get started. Conversely, it may have contained anxieties or doubts about your ability or motivation to achieve your goal. Regardless of how capable you think you are, change is possible. In some ways you already recognize that, otherwise you would not have bothered to set your goal in the first place. Looking back at your reaction to your goal, pull out your strongest two statements that are most motivating.

SGT Johnson's change talk statements:

1. *I know that when I really put my mind to something nobody can keep me from reaching my goal.*
2. *My mom is the straw that broke the camel's back.*

Your change talk statements

- 1.
- 2.

What is it about this statement/s that gives you confidence in your ability to change?

SGT Johnson's change talk explanation:

1. *I know that when I am determined to do something, it always gets done. I think this might have something to do with my stubborn personality. In fact, it's this same personality trait that was at least partially responsible for me drinking in the first place. I never had to start drinking to be cool or more grown up. I just decided I wanted to because it looked fun and I wanted to assert my freedom. None of the persuasions from my parents could sway that decision. Now my parents are not trying to sway me, but I am starting to become more internally motivated.*
2. *I mentioned my mom as being a major motivator. Right now there seems to be a hole in my*

heart because I didn't get to say goodbye to her before she died. I know that it was hard on her that I drank. I feel like there is not much I can do to show her how much I appreciate her. If I could give up alcohol I could imagine her looking down from heaven with a grateful smile. I just think it's the least I can do after how much she sacrificed for me. Also, giving up the alcohol is going to be healthier for my waistline and wallet so I don't have much to lose.

Your change talk explanation #1:

Your change talk explanation #2:

When it comes to your goals for change, nobody is more of an expert than you are. Change is unavoidable and you have successfully made several significant changes throughout your life. Everyone has different strengths that help them make and keep change commitments. One popular model of therapy for helping people reach goals by drawing on their strengths is called Solution-Focused Brief Therapy (SFBT). SFBT is an effective model that examines what has successfully worked in the past that can be applied to the client's current situation. A significant assumption with SFBT is that people are inherently resilient and resourceful, and consequently, they have successfully coped in the past.¹⁵²

Your current change goal may be one that you have worked on in the past or it may be new goal. If this goal is something you have worked on previously, you have likely experienced some successes and setbacks already. Even if the setbacks greatly

¹⁵² Bill O'Hanlon and Michele Weiner-Davis, *In Search of Solutions* (New York: W.W. Norton & Company, 2003), 34.

eclipse the successes, the small successes still offer key insights to how you succeed in your goals. For example, if someone's goal were to go to bed early, but this person always seemed to go to bed much later than he wanted, he could focus on the few times he did succeed instead of all the times he did not. By focusing on those successful days he could recognize that he does have the power to succeed.

Also, he could try to isolate what was different about those days that made them successful. It could be that he worked exceptionally hard throughout the day, that he ate dinner earlier, or that he turned off his electronic devices once he got in bed. Thinking about what was different on the successful days offers the key to future success.

If this is the first time you are undertaking this change goal you may likely still have relevant experiences that you could apply. Just think of similar goals you have made in the past. What were some of the elements that helped you succeed? These could be considered your assets for change. These assets could be anything like phone reminders, recruiting a significant other, setting up a reward system, or recording your results on a tracking calendar. Look at your past successes that apply most to your current goal. What elements can help you succeed with your goal right now? Try to be creative as you look at these successes from several different angles.

SGT Johnson's past success and assets for change:

Like I have already mentioned, this is the first time I have ever tried to quit drinking so I don't

have direct experience in this arena yet. However, my experience getting in shape for wrestling in high school seems to be pertinent. Because of my competitive nature I was very driven to do everything I could to excel as a wrestler. When I was trying to make weight without losing strength I was very aware of everything that I put in my body. I tried to avoid junk food and focused on fueling my body with the most nutritious foods. I had a sweet tooth and soon realized that I couldn't have sweets sitting around the house if I was going to succeed. This is when I asked my parents if they could help keep the junk food out of the house. They weren't necessarily enthusiastic, but they said they would at least try to keep it to a minimum. They ended up preparing healthier meals and I was able to maintain a better diet than I ever had. That was the season when I was in the best shape of my life and when I took third at state.

The change assets that I can recognize from high school wrestling are:

- I am very competitive
- It helped when I involved my parents
- I did much better when I limited the temptations

Your past success and assets for change:

Now that you have reflected on a similar past success that could be applied to this situation, look at your change assets. You feel that somehow these assets helped you succeed in the past. How might they apply to your current goal to increase your chances for success?

How SGT Johnson's change assets can help him quit drinking:

1. I am definitely a competitive person. If I recognize a challenge that I'm invested in, I feel like I normally come out on top. Ironically, my competitive nature has led to me getting quite intoxicated on a regular basis because I almost always win the drinking games that I play with my friends. Even though I have enjoyed having a buzz, I never really cared for getting too drunk. I would just do it because my competitive drive wouldn't allow me to back down. I never thought that maybe this competitive drive could be harnessed for being sober until now. I think if I can find a group of others who are trying to quit drinking I will be able to feel a bit of friendly competition. I might try going to Alcoholics Anonymous to see if I can ignite some competition within myself. Also, I know that they hand out coins after so many days of being sober so that could be something to work toward.

2. In high school I did a lot better at eating healthy when I asked my parents to support me. I definitely think I'll have my mom's spirit rooting for me

in my corner, but maybe my dad could be a support as well. I will talk to him and tell him about how I want to quit drinking for my mom's sake. I'll ask him if he could check in with me each week to monitor my progress. I think that if I know he'll be checking in with me I will be more motivated to make sure I have good news to share.

3. Just like it was hard for me to eat healthy in high school when there was junk food sitting around, I think I need to limit easy access to alcohol. I can start with doing my grocery shopping at the local market that doesn't sell any of my favorite drinks. I think the hard part is going to be my friends though. They are probably one of the biggest reasons I do drink and I don't know whether I am ready to give them up.

How your change assets can help you with your goal:

You have made tremendous progress on overcoming ambivalence and have decided to make a positive life change. Your SMART goal is now set and you have even reflected on past success to help you identify what can help you succeed with your goal now. Thinking about your goal and change assets, do you feel you are prepared to start taking action? If so, there is nothing holding you back from starting. However, you might also feel like there is something missing with your plan. Perhaps you have other resources available to you that could help, or maybe you have another strength that you could capitalize on to set you up for success. You could always ask for advice from others who are informed in the field related to your goal. This could provide you with a “menu of options” to choose from.¹⁵³ Ultimately you will intuitively recognize which suggestions would be most beneficial because nobody knows you more than yourself.¹⁵⁴ If you decide to search out ideas from others or you have thought of new change assets, you may write those ideas below. Taking a little extra time to think creatively here is often worth the investment.

SGT Johnson’s “what else:”

In thinking about what else I could leverage to help me succeed I kept thinking about how disappointed I was that I might have to part ways with my drinking buddies. After thinking about it for a bit,

¹⁵³ Dawn Clifford and Laura Curtis, *Motivational Interviewing in Nutrition and Fitness* (New York: The Guilford Press, 2015), 67.

¹⁵⁴ Miller and Rollnick feel that “expert advice” can be helpful, but usually when presented with permission and ideally with several choices (i.e., a “menu of options”). When a menu of options is offered, a client’s hunch can then indicate what option would be the best fit. Miller and Rollnick, *Motivational Interviewing*, 276-277.

though, I thought that even though my friends like to drink, they are also very loyal. I know that they would respect my new goal, especially if I told them why I wanted to stop drinking. They might even recruit me to be their designated driver. I have always felt adamant that nobody should drive drunk so I think that I might be able to do well if I went to the bars but only had soda. I believe that involving my friends with my goal could really help keep my motivation up, especially since they would otherwise be one of my biggest temptations to drink.

I also think that I could set up some sort of reward system. Since I would normally spend over \$50 each week on alcohol, I will reward myself with

\$100 for every week that I stay sober. I will put the money away for a down payment on a new car. Just thinking about this reward makes me want to go completely sober now instead of easing into it.

Your “what else:”

Conclusion

You are now prepared to work toward achieving your goal in earnest. The journey of overcoming ambivalence is generally difficult and requires much time. Once you decided on the change you wanted to take, your reflections on your desires and abilities to change strengthened your resolve and increased your chances to succeed. You also developed a SMART goal and reviewed your assets for change that can be applied to your current goal. You may proceed confidently, resting assured that your preparations have significantly set you up for success.

As a final word of caution, making significant life changes is a difficult process that rarely avoids setbacks and slip-ups. Unfortunately, these slip-ups can crumble the foundations of hope and motivation, replacing it with frustration and despair instead.¹⁵⁵ A passage from Samuel Beckett's *Worstward Ho* reads, "Ever tried. Ever failed. No matter. Try again. Fail again. Fail better."¹⁵⁶ Remember that MI is not a linear change process, but instead accounts for, and even expects that setbacks will come.¹⁵⁷ These setbacks offer valuable feedback into what how your plan could be altered or how you might want to revisit any of the four MI processes (engaging, focusing, evoking, or planning).¹⁵⁸ Nothing about your decision to change or how you plan to achieve that change is set in stone. Your life circumstances and desires morph with time so your change plans should be able to as well.

¹⁵⁵ Zuckoff, *Finding Your Way to Change*, 240-241.

¹⁵⁶ Samuel Beckett, *Worstward Ho* (New York City: Grove Press, 2014). Quoted in Zuckoff, *Finding Your Way to Change*, 213.

¹⁵⁷ Miller and Rollnick, *Motivational Interviewing*, 297.

¹⁵⁸ Miller and Rollnick, *Motivational Interviewing*, 297.

In these concluding remarks I would like to wish you the best of success as you continue on your journey with change. I hope that undergoing this process has been a positive experience that has fostered confidence, motivation, and hope. There is something very sacred and fulfilling about making significant life changes. It is my absolute conviction that you have the power to change and that the journey of changing will bring out the best in you.

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