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Instructor’s Manual for Core Concepts in Motivational Interviewing with Cathy Cole, LCSW

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Instructor’s Manual for

CORE CONCEPTS IN
MOTIVATIONAL INTERVIEWING
WITH CATHY COLE, LCSW

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Tips for Making the Best Use of the DVD

1. USE THE TRANSCRIPTS
Make notes in the video Transcript for future reference; the next time you show the video you will have them available. Highlight or notate key moments in the video to better facilitate discussion during and after the video.

2. FACILITATE DISCUSSION
Pause the video at different points to elicit viewers’ observations and reactions to the concepts presented. The Discussion Questions section provides ideas about key points that can stimulate rich discussions and learning.

3. ENCOURAGE SHARING OF OPINIONS
Encourage viewers to voice their opinions; no therapy is perfect! What are viewers’ impressions of what works and does not work in the sessions? We learn as much from our mistakes as our successes; it is crucial for students and therapists to develop the ability to effectively critique this work as well as their own.

4. ASSIGN A REACTION PAPER
See suggestions in the Reaction Paper section.

5. CONDUCT A ROLE-PLAY
The Role-Play section guides you through exercises you can assign to your students in the classroom or training session.

6. SUGGEST READINGS TO ENRICH VIDEO MATERIAL
Assign readings from Related Websites, Videos, and Further Reading prior to or after viewing.
PERSPECTIVE ON VIDEOS AND THE PERSONALITY OF THE THERAPIST

Psychotherapy portrayed in videos is less off-the-cuff than therapy in practice. Therapists may feel put on the spot to offer a good demonstration, and clients can be self-conscious in front of a camera. Therapists often move more quickly than they would in everyday practice to demonstrate a particular technique. Despite these factors, therapists and clients on video can engage in a realistic session that conveys a wealth of information not contained in books or therapy transcripts: body language, tone of voice, facial expression, rhythm of the interaction, quality of the alliance—all aspects of the therapeutic relationship that are unique to an interpersonal encounter.

Psychotherapy is an intensely private matter. Unlike the training in other professions, students and practitioners rarely have an opportunity to see their mentors at work. But watching therapy on video is the next best thing.

One more note: The personal style of therapists is often as important as their techniques and theories. Therapists are usually drawn to approaches that mesh well with their own personality. Thus, while we can certainly pick up ideas from master therapists, students and trainees must make the best use of relevant theory, technique and research that fits their own personal style and the needs of their clients.
Summary of Motivational Interviewing*

Motivational Interviewing (MI) was developed by William R. Miller and Stephen Rollnick, and is defined as a collaborative, person-centered directive counseling method for addressing the common problem of ambivalence about behavior 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.

The concept of Motivational Interviewing evolved from experiences with problem drinkers and now is applied to a wide range of concerns such as healthcare improvement, high-risk sexual behaviors, diabetes management, and mental health problems.

MI recognizes and accepts the fact that clients who need to make changes in their lives approach counseling at different levels of readiness to change their behavior. If the counseling is mandated, they may never have thought of changing the behavior in question. Some may have thought about it but not taken steps to change it. Others, especially those voluntarily seeking counseling, may be actively trying to change their behavior and may have been doing so unsuccessfully for years.

MI involves collaboration rather than confrontation, evocation rather than education, autonomy rather than authority, and exploration rather than explanation. Effective processes for positive change focus on goals that are small, important to the client, specific, realistic, and oriented in the present and/or future.

SPIRIT OF MOTIVATIONAL INTERVIEWING

While there are as many variations in technique as there are clinical encounters, the spirit of the method, however, is more enduring and can be characterized in a few key points:

1. Motivation to change is elicited from the client, and is not imposed from outside forces.
2. It is the client’s task, not the counselor’s, to articulate and resolve his or her ambivalence.
3. Direct persuasion is not an effective method for resolving ambivalence.
4. The counseling style is generally quiet and elicits information from the client.

5. The counselor is directive, in that they help the client to examine and resolve ambivalence.

6. Readiness to change is not a trait of the client, but a fluctuating result of interpersonal interaction.

7. The therapeutic relationship resembles a partnership or companionship.

The style of the therapist using MI is nonjudgmental, nonconfrontational, and nonadversarial. The approach attempts to increase the client’s awareness of the potential problems caused, consequences experienced, and risks faced as a result of the behavior in question. Therapists help clients envision a better future, and become increasingly motivated to achieve it. The MI approach seeks to help clients think differently about their behavior and ultimately to consider what might be gained through change. It is critical to meet clients where they are, and to refrain from forcing clients toward change when they have not expressed a desire to do so.

**FOUR PRINCIPLES OF MOTIVATIONAL INTERVIEWING**

Four key aspects of the MI approach are:

1) **Express empathy:**

   Empathy involves seeing the world through the client’s eyes, thinking about things as the client thinks about them, feeling things as the client feels them, and sharing in the client’s experiences. Expression of empathy is critical to the MI approach. When clients feel that they are understood, they are more able to open up to their own experiences and share those experiences with others. In short, the counselor’s accurate understanding of the client’s experience facilitates change.

2) **Develop discrepancy:**

   This guides therapists to help clients appreciate the value of change by exploring the discrepancy between how clients want their lives to be versus how they currently are (or between their deeply held values and their day-to-day behavior). MI counselors work to develop this situation through helping clients examine the discrepancies between
their current behavior and future goals. When clients perceive that their current behaviors are not leading toward some important future goal, they become more motivated to make important life changes.

3) **Roll with resistance/reflect discord:**
An evolving concept in MI has to do with resistance. Whereas MI used to talk about “rolling with resistance,” which refers to not challenging client resistance, the concept of resistance is being reframed in terms of discord. From this new perspective, discord is a disturbance in the relationship and is the responsibility of the counselor to address, frequently by the use of a reflection. Discord often occurs when a client feels pushed in some way, and often stems from the “righting reflex” on the part of the counselor. The righting reflex is the natural inclination most people have to want to make things better, which often is characterized by an assumption that we have the answer and know what is right for the person we’re trying to help. Therefore, discord often occurs when clients are lectured to, given unsolicited advice, asked to move toward change before indicating readiness/willingness, blamed, shamed, etc. At times, a person is already in a state of discord before entering the counseling session, because the idea for the encounter was not entirely theirs. The person was “pushed” in some way and anticipates that the counselor will continue to push. The goal when discord arises is to establish or re-establish a collaborative partnership with the client, remembering the spirit of MI. Reflecting the client’s experience is a primary way to do this.

4) **Support self-efficacy:**
This guides therapists to explicitly embrace client autonomy (even when clients choose to not change) and help clients move toward change successfully and with confidence. As clients are held responsible for choosing and carrying out actions to change in the MI approach, counselors focus their efforts on helping the clients stay motivated, and supporting clients’ sense of self-efficacy is one way to do that. One source of hope for clients using the MI approach is that there is no “right way” to change, and if a given plan for change does not work, clients are only limited by their own creativity as to the number of other plans that might be tried.
LISTENING FOR CHANGE TALK

Change talk is defined as statements by the client revealing consideration of, motivation for, or commitment to change. In MI, the therapist listens for these expressions of importance, confidence, and readiness/commitment and seeks to guide the client to elaborate on these expressions of change talk as the pathway to change. Research shows that the more someone talks about change, the more likely they are to change. Different types of change talk can be described using the mnemonic DARN-CATS:

Preparatory Change Talk
Desire (I want to change)
Ability (I can change)
Reason (It’s important to change)
Need (I should change)

Implementing Change Talk
Commitment (I will make changes)
Activation (I am ready, prepared, willing to change)
Taking Steps (I am taking specific actions to change)

MI INTERVIEWING SKILLS AND STRATEGIES

The practice of MI involves the skillful use of certain techniques for bringing to life the “MI spirit,” demonstrating the MI principles, and guiding the process toward eliciting client change talk and commitment for change.

OARS

OARS is a brief way to remember the basic approach used in MI. Open-ended questions, Affirmations, Reflections, and Summaries are core strategies used to move the process forward by establishing a therapeutic alliance and eliciting discussion about change.

Open-ended questions are those that are not easily answered with a “yes/no” or short answer containing only a specific, limited piece of information. Open-ended questions invite elaboration and thinking more deeply about an issue. Open-ended questions create forward momentum used to help the client explore the reasons for and possibility of change.
Affirmations are statements that recognize client strengths. They help build rapport and encourage clients to see themselves in a different, more positive light. To be effective, they must be congruent and genuine. Affirmations can help clients feel that change is possible even when previous efforts have been unsuccessful. Affirmations often involve reframing behaviors or concerns as evidence of positive client qualities.

Reflections or reflective listening is perhaps the most crucial skill in MI. It has two primary purposes. First is to bring to life the principle of Expressing Empathy. When the counselor utilizes careful listening and reflective responses, the client comes to feel that the counselor understands the issues from their perspective. Beyond this, strategic use of reflective listening is a core intervention toward guiding the client toward change, supporting the goal-directed aspect of MI. In this use of reflections, the therapist guides the client towards resolving ambivalence by a focus on the negative aspects of the status quo and the positives of making change. There are several levels of reflection ranging from simple to more complex. Different types of reflections are skillfully used as clients demonstrate different levels of readiness for change.

Summaries are a special type of reflection where the therapist recaps all or part of a counseling session. Summaries communicate interest and understanding, and call attention to important elements of the discussion. They may be used to shift attention or direction and prepare the client to “move on.” Summaries can highlight both sides of a client’s ambivalence about change and promote the development of discrepancy by strategically selecting what information should be included and what can be minimized or excluded.

When clients do express change talk, it is important to remember to stay in the stance of eliciting from clients how they want to go about changing, where they want to start, what that will look like for them, what barriers there might be, and how they need to work on addressing those barriers. A counselor might provide some information for clients to consider that would help them with their choice, but ultimately the client is going to make the decision about what they’re going to do.

Discussion Questions

Professors, training directors, and facilitators may use some or all of these discussion questions, depending on what aspects of the video are most relevant to the audience.

DEFINITION AND SPIRIT

1. **The righting reflex:** Cole talks about the righting reflex—the natural inclination in helping professionals to want to make a situation better for another person, which leads them to tell their clients what to do. Do you recognize this tendency in yourself? If so, what helps you work with the righting reflex when it arises in your work with clients? What helps you trust the process and remain patient? Are there particular clients with whom it is especially tempting for you to share your ideas? What is it about these particular clients that leads to an increase in your righting reflex? Is it challenging for you to put your own ideas aside and evoke your clients’ ideas for what might help? Do you agree that following this reflex with people who are ambivalent tends to lead them to argue against change? Can you recall a case when you shared your ideas or pushed for change and it backfired? Conversely, are there times when you have given advice to your client and it has been helpful?

2. **Spirit of Motivational Interviewing:** What do you think about working in partnership with clients as opposed to being the expert who tells people what to do? What do you think about the emphasis in MI on honoring the person’s autonomy, that each person gets to ultimately decide for themselves whether to change or not? How is it for you to work with people who don’t seem to want to change when you strongly believe they need to? What helps you to honor people’s autonomy in such cases?

THE CHALLENGE OF CHANGE

3. **Change:** What do you think helps people change? In your personal experience, what has helped you make changes in your own life? What do you think gets in the way of you making changes, such as New Year’s resolutions? In your work with clients, what do you see has helped them make changes in their lives and gotten in the way of them making changes? Why do you think it can be so hard for people to change? Do
you think Motivational Interviewing is an effective way to help people make changes in their lives? Why or why not?

4. **Importance:** What do you think of MI’s focus on addressing the issue of importance first when someone is considering making a change? What do you think of the way Cole worked with Victor as he played a patient who is ambivalent about taking antidepressants? If you were in her shoes, do you think you would guide him in an exploration of his own perspective on the importance of addressing his mood, like she did, or would you be more likely to go down a symptom list and reinforce the doctor’s recommendation? Can you recall a time when you spoke to a client about their ambivalence about taking medication? How did you handle it and what was challenging for you?

5. **Confidence:** What are your thoughts on focusing on confidence as the second area of attention, after clients have decided that making a change is important to them? What did you like and dislike about the way Cole worked with Victor during this stage of the role-play when the patient wants to start exercising? If you were in her shoes, do you think you would be tempted to play more of a problem-solver role? What did you observe Cole say that specifically addressed the patient’s confidence? How do you help build the confidence of clients with whom you work?

6. **Commitment:** How did you react when Cole talked about the difference between confidence and commitment, and the common mistake helping professionals make of assuming that just because someone wants to change and is confident they can, that they are actually going to do it? Do you agree with her that without importance, confidence, and commitment, people are unlikely to follow through with change? How do you help clients identify their own level of commitment to change?

7. **Values:** What do you think of focusing on personal values when people are considering making a change? Does it make sense to you why this would be helpful? Do you incorporate a focus on your clients or patients’ values in your work? If so, how?

**THE LANGUAGE OF CHANGE**

8. **Sustain and change talk:** What are your reactions to the MI concepts of
sustain talk and change talk? Does the emphasis on listening for change talk and responding differently to it make sense to you? Do you agree with Cole that if a clinician does not reinforce a client’s change talk, the client will return to sustain talk? How do you tend to respond when your client expresses a desire to stay the same? How is this different from how you respond when they express a desire to change? Do you think you fall into the trap of exploring obstacles rather than focusing on making changes?

9. **Subtle and strategic:** Does it seem contradictory to you that the approach emphasizes the right of each person to make their own decision, while also teaching counselors to strategically guide clients in the direction of change? Do you think it is possible to be neutral and also favor change? What is your understanding of the strategic aspect of MI and how does it fit with your style of counseling? How do you feel about being subtly strategic with your clients?

10. **DARN CATS:** What reactions do you have to the DARN CATS mnemonic, which describes the ingredients of change: desire, ability, reasons, need, commitment, activation, and taking steps? Do you agree that these are the key ingredients for change? Are there other ingredients for change that you think should be included, or ingredients listed that you think are not completely necessary for change? How can you see yourself incorporating this understanding of ingredients for change into your work with clients or patients?

**USING MI IN SESSIONS**

11. **Engaging:** What do you think about the engaging phase that Cole discussed? How important is it to you to attend to the relationship with your clients or patients? While some therapists get a lot of training in attending to the therapeutic relationship, this focus may be less emphasized with physicians, parole officers, nurses, nutritionists, and other helping professionals. How do you feel about this emphasis on the relationship? Do you agree with Cole that it is very important to demonstrate to your clients that you are really interested in them? Why or why not? How much emphasis do you put into attending to the relationship?

12. **Focusing:** What are your thoughts about the focusing phase that Cole
described? How important do you think it is to establish an agenda with your clients before moving forward? In what circumstances do you think this is crucial, and in what cases perhaps less important? How much emphasis do you tend to put on establishing an agreement about what you and your clients intend to discuss in their sessions? What do you think the pros and cons are to establishing an agenda?

13. **Asking permission:** What do you think of the emphasis in MI on asking for permission to provide information to a client before simply offering it? Why do you think this is an important aspect of the MI approach? Can you see yourself doing this, or are you more likely to offer information without asking permission first?

14. **Evoking before planning:** Cole discussed the importance of fully engaging clients in conversations about importance, confidence, and commitment before guiding them into the planning phase. Why do you think this is so important? Can you recall a case where you moved too quickly into planning and it backfired? How do you determine when a client is ready to make a plan and when it might be premature? Were you surprised to hear Cole say that there doesn’t have to be planning for it to be considered Motivational Interviewing, but that the other three phases—engaging, focusing, and evoking—are required? Why do you think this is the case?

15. **Autonomy:** What reactions did you have when Cole stated that technically Motivational Interviewing is designed to help the client make a decision that is right for them? In what cases might you be less comfortable supporting a client’s autonomy? How is it for you when your clients or patients make decisions that you believe are dangerous or unwise? Are there times when you think this kind of approach would be too hands-off, such as when someone is engaging in self-destructive behavior? Do you have any concerns that you would be condoning certain behaviors if you didn’t tell the person they should stop?

16. **Discord:** What do you think about the concept of “discord,” and how this is used in MI rather than “resistance”? Do you agree with Cole that when there is discord, the client is seeking understanding, and do you like her recommendation of offering a reflection? Can you recall a case in which you pushed your client in some way and this created
a disturbance in the relationship? How did you handle it? What do you think of Cole’s statement that it is the counselor’s responsibility to return to partnership? What other factors do you think might contribute to discord, other than the counselor not honoring the client’s autonomy or the client not feeling understood?

**MI CORE TECHNIQUES**

17. **OARS:** What do you think of the core MI techniques of open questions, affirmations, reflections, and summaries? Is it clear to you when to offer each of these? What reactions did you have to the clips of Bill Miller demonstrating these techniques? Which of these techniques feel most natural to you and which feel more awkward or unfamiliar to you?

18. **Ruler exercise:** What do you think of the ruler exercise used in MI to help guide the conversation? Why do you think it is so important to measure importance, confidence, and commitment when working with someone who is considering making a change? What do you like and dislike about the ruler exercise as an assessment tool? If you don’t use this tool or something similar, how do you determine where to put your energy in a session?

19. **Reflections:** What are your thoughts on the four kinds of reflections in MI: simple reflections, complex reflections, double-sided reflections, and summaries? What do you like and dislike about being on the receiving end of a reflection? What do you like and dislike about giving reflections? Is it challenging for you to stay really present with someone and simply reflect back what you’re hearing someone say, without adding your own thoughts or perspective? What helps you stay fully tuned in to another person? Why do you think reflections are such an important technique in Motivational Interviewing?

20. **Ratio:** Cole states that in MI “we are striving for more reflections than questions, generally by a two-to-one ratio.” What is your understanding of the rationale for this rule of thumb? Does it make sense to you how asking question after question allows the client to take a more passive role in the relationship, while reflections invite the client to be more proactive? In your work with clients, what would you say is the general ratio you employ of reflections to questions?
21. **Complex reflections:** Cole stated that making complex reflections is difficult for many people. Have you found complex reflections challenging? If so, in what ways? If not, what makes them easy for you? Do you like Cole’s suggestion to practice by imagining what other people might be experiencing as you go about your day and thinking about how you could reflect their experience? What other ideas for practicing complex reflections do you have?

**EXERCISES**

22. **Exercises:** What was your experience of doing the exercises on the video? Which techniques were easy for you and which were more challenging? Of the MI skills you learned on this video, which of them can you see yourself utilizing in your work immediately? Which skills would you like to practice more? Are there any techniques you don’t think are helpful and are likely not to use?

23. **Julie:** What did you like and dislike about the way Cole conducted the session with Julie? Which of her interventions do you think were particularly helpful? Were there any times when your intervention was significantly different from Cole’s? How confident did you feel by the end of the session that Julie was going to follow through with her cooking plan?

**GENERAL DISCUSSION QUESTIONS**

24. **The model:** What are your overall thoughts about Motivational Interviewing? What aspects of this approach can you see yourself incorporating into your work? Are there some components of MI that seem incompatible with how you work? Are there certain people you think MI wouldn’t work with?

25. **Personal reactions to therapists:** How do you think you would you feel about having Cole or Miller as your therapist? Do you think they could build a solid alliance with you? Would they be effective with you? Why or why not?
Reaction Paper for Classes and Training

Video: Core Concepts in Motivational Interviewing

- **Assignment:** Complete this reaction paper and return it by the date noted by the facilitator.

- **Suggestions for Viewers:** Take notes on these questions while viewing the video and complete the reaction paper afterwards. Respond to each question below.

- **Length and Style:** 2-4 pages double-spaced. Be concise. Do NOT provide a full synopsis of the video. This is meant to be a brief paper that you write soon after watching the video—we want your ideas and reactions.

**What to Write:** Respond to the following questions in your reaction paper:

1. **Key points:** What important points did you learn about the core concepts of Motivational Interviewing? What stands out to you about how Cole works?

2. **What I found most helpful:** What was most beneficial to you about the model presented? What tools or perspectives did you find helpful and might you use in your own work? What challenged you to think about something in a new way?

3. **What does not make sense:** What principles/techniques/interventions did not make sense to you? Did anything push your buttons or bring about a sense of resistance in you, or just not fit with your own style of working?

4. **How I would do it differently:** What might you do differently from Cole when working with clients? Be specific about what different approaches, interventions and techniques you would apply.

5. **Other questions/reactions:** What questions or reactions did you have as you viewed the sessions with Cole? Other comments, thoughts or feelings?
Role-Plays

After watching the video and reviewing *Summary of Motivational Interviewing Approach* in this manual, break participants into groups of three and have them role-play two different sessions so they can get a feel for the difference between the MI approach and a more confrontational approach. This is also an opportunity to practice some of the key techniques in Motivational Interviewing. In each triad, one person will play a client, one will play a counselor, and one will observe. Instructions for each role follow. To enhance learning, allow each student to play each role, time-permitting.

**ROLE-PLAY ONE: Non-MI approach**

*Instructions for clients:* In both sessions, clients will role-play someone who is ambivalent about making a specific change in their lives. Clients should choose a specific behavior to focus on, such as drinking, smoking, diet, or exercise. Students can play a client they have worked with or someone they know personally; they can also base their character on one of the vignettes from the video, or completely make it up. Avoid the tendency to overact; try to make this as realistic as possible.

*Instructions for counselors:* Begin by embodying a non-MI approach; that is, one characterized by confrontation, persuasion, explanation, and authority. Counselors should ask a lot of questions, offer their opinions, give advice, and provide information without asking permission. Avoid the tendency to overact; try to make this as realistic as possible. For example, when counselors notice their inclination to give advice, they should give it freely.

*Instructions for observers:* Observers can pay particular attention to the “righting reflex” in themselves and note when counselors follow this impulse. Observers can also stay attuned to the counselor-client relationship and notice what seems to be helpful and unhelpful in terms of creating and maintaining an alliance. Notice the impact of the counselor’s questions, opinions, and advice on the client?

Then have the triad debrief the experience: How did clients, counselors, and observers feel during this exchange? What did they
ROLE-PLAY TWO: MI approach

*Instructions for clients:* Follow the instruction in role-play one.

*Instructions for counselors:* Have counselors practice both the techniques and spirit of Motivational Interviewing. The MI counselor should focus first on establishing a relationship characterized by acceptance, respect, and partnership with the client, remembering the importance of honoring the client’s autonomy. Counselors should pay particular attention to the “righting reflex” in themselves—the tendency to want to give advice or lecture the client, and, as much as possible, to offer a reflection instead of following that impulse. Remember that the counselor’s role is not to try to influence the client in a particular direction, but to guide them through an exploration of all the important aspects of the issue. Focus the session by utilizing the ruler exercise to assess where the client is in terms of importance, confidence, and commitment (e.g. by asking, “On a scale of zero to ten, where zero is not at all important/confident/committed and ten is totally important/confident/committed, where would you put yourself?”). Use the information that you get from the ruler exercise to help pinpoint where the client is stuck and to help set the focus for the session.

Then, practice evoking the client’s ambivalence, making room for all sides of their dilemma. When the client gives reasons for not wanting to change (sustain talk), invite them to explore their barriers to change, including low importance, low confidence, or low commitment (depending on what you uncover from the ruler exercise). The focus here is on making space for the client to explore their sustain talk, as opposed to trying to convince them to change. Use open questions to learn more from the client about why they don’t want to change and use reflections to mirror back what you’re hearing. Keep an ear out for any change talk that arises, and be sure to reinforce this through reflections and open questions such as, “If you were going to do this what might this look like? Where might you start? What might you need?” Use affirmations to support any efforts you hear the client is making and any strengths that the client has revealed.
Throughout the session, pay particular attention to practicing the key MI technique of reflections to let the client know that you’re understanding what they’re saying and also to try to deepen what they’re sharing, picking up on any feelings and meaning that might be there for them (complex reflections), and reflecting both sides of their ambivalence (double-sided reflections). Offer a periodic summary to pull all of what you’ve heard together. (See the Summary of Motivational Interviewing Approach in this manual for a more detailed description of these tools.)

Instructions for observers: Observers should pay attention to the counselor’s interventions and also listen for sustain talk and change talk from the client. One suggestion is to have a piece of paper with OARS written on it, and put a tally mark next to each item when you hear the counselor use an open question, affirmation, reflection, or summary. Observers should also jot down a few examples of sustain talk and change talk that they hear from the client. Observers can also pay particular attention to the “righting reflex” in themselves and note when counselors follow this impulse and when they stay in partnership with the client. Observers should stay attuned to the client-counselor relationship and notice what seems to be helpful and unhelpful for moving the session forward.

After the session, have the triad debrief the experience: How did clients, counselors, and observers feel during this exchange? What did they notice?

After both sessions are complete, have participants switch roles, so that each gets to try out being the counselor, the client, and the observer.

After the role-plays, have the groups come together to discuss their experiences. First, have the clients talk about what each session was like for them. What differences did they notice between the two approaches? Do they feel they got to fully explore their concerns? Did they feel understood and respected? Did they feel any pressure from the counselor to make a particular decision? How did they experience the counselor—as a partner, guide, expert, authority? Were the ruler exercise questions helpful? What do they think are the
benefits and risks of an MI approach and a non-MI approach? Then have the counselors talk about their experiences. Which approach felt more natural for them? What do they like and dislike about the MI approach? Do they have the sense that they helped the client explore their concerns and make a decision? How was it to work with the client at whatever level of importance, confidence, and commitment they were at? Did they ever feel impatient or frustrated? Did they notice the “righting reflex” coming up at all? How did they handle this? What did they like and dislike about the techniques they tried? Finally, have the observers talk about their experiences. What did they notice in terms of OARS, sustain and change talk, the righting reflex, and the counselor-client relationship? When and why might they have done something differently from the counselor? Finally, open up a general discussion of the strengths and the challenges in employing a Motivational Interviewing approach.

**ALTERNATIVE ROLE-PLAY**

An alternative is to do these role-plays in front of the whole group with one counselor and one client; the entire group can observe, acting as the advising team to the counselor. Every observer can have a piece of paper with OARS written on it, and put a tally mark next to each item when they hear the counselor use an open question, affirmation, reflection, or summary. Observers should also jot down a few examples of sustain talk and change talk that they hear from the client. Observers can also pay particular attention to the “righting reflex” in themselves and note when the counselor follows this impulse and when they stay in partnership with the client. Observers should stay attuned to the client-counselor relationship and notice what seems to be helpful and unhelpful for moving the session forward. Before the end of each session, have the counselor take a break, get feedback from the observation team, and bring it back into the session with the client. Other observers might jump in if the counselor gets stuck. After the session, invite observers to share what they noticed. Follow up with a discussion on what participants learned about using Motivational Interviewing.
Related Websites, Videos and Further Reading

**WEB RESOURCES**

Website of Cathy Cole Training, Inc.
www.cathycoletraining.com

Motivational Interviewing
www.motivationalinterview.org

William R. Miller’s website
www.williamrmiller.net

Stephen Rollnick
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Complete Transcript of Core Concepts in Motivational Interviewing

Victor Yalom: Hello, I’m Victor Yalom, and I’m pleased to be here today with Cathy Cole. She’s been training professionals in Motivational Interviewing for over 15 years. And we’re fortunate to have her as our guide into the theory and practice of Motivational Interviewing, both in this video on the core concepts, and throughout this series, Motivational Interviewing Step by Step. Welcome, Cathy.

Cathy Cole: Thank you, Victor.

MI: DEFINITION AND SPIRIT

Yalom: I think many of our viewers have heard the term “Motivational Interviewing,” but many of them also don’t know exactly what it is. So I think that’s a good place to start. What exactly is Motivational Interviewing?

Cole: I like to talk about Motivational Interviewing, first, we always call it a counseling approach. But more specifically, I like to talk about it as a conversational method. And that particular conversational method is designed to allow people who are struggling with the possibility of making change—it’s designed to let them consider their own reasons for making change, and to make their own unique decisions about change, and decide how they might go about it. So Motivational Interviewing is a way to help people guide their way through this matrix of change.

Yalom: And we know that helping people to change is not easy.

Cole: That’s right, it’s not easy. Exactly.

Yalom: What’s hard about it?

Cole: From a counselor’s approach, one of the challenges, and particularly the challenge that we think about in Motivational Interviewing, is we hear a person talk about their struggles about making change. Let’s say we hear a person struggling with whether or not they can maintain a regular exercise program. And we immediately, as professionals, start to have ideas about what we think they should do, and we move into telling them what do, which in Motivational Interviewing is called “the righting reflex.”
**Yalom:** What does that mean, the “righting reflex”?

**Cole:** The righting reflex is the natural inclination that all of us who are in the helping professions have to want to make it better for another person. So when we get caught in the righting reflex, we assume that we know what’s best for another person, and we go about telling them what to do. And this immediately bypasses the person being able to explore that for themselves and decide what might work for them. That, to me, is one of the biggest challenges about helping people, is basically getting out of the way.

**Yalom:** And when we tell them what to do, how do they tend to respond?

**Cole:** There is this natural inclination that most of us, as humans, have. When someone tells us what we should do, even if it’s something that we have already thought that we would do, we argue against or we push away. It just seems to be this natural inclination we have as humans, to do that. So right there, we’re creating an obstacle, a barrier for folks that really is not necessary for them.

**Yalom:** Later in this video, we’re going to get into the nitty gritty, the details, the techniques, but just on a broad-brush level, what is the approach of Motivational Interviewing and what’s the guiding philosophy? I’ve heard it referred to as the spirit.

**Cole:** Right. The spirit, to me, is actually the most important part of Motivational Interviewing—how we go about it, or the details that we’ll talk about later. In spirit, we really are paying attention to working in partnership with the client. We’re there, as best we can, to not be in this hierarchical relationship with them, but we’re there to partner, to say, “I’m in this with you and I want to help guide you through this forest of your decision about making a change.” So we work in partnership in them. We’re really collaborating to learn from them, what are their ideas about why they might make a change, how they might go about it, are they able to go about it? So we really want to guide them through it.

And we are definitely working to reinforce that the client is always the one in charge, that they are the ones that are going to make the final decision about whether they will make change, how they’ll go about it. So we’re reinforcing client autonomy all the way through.

**Yalom:** And I understand one of the roots of MI, as Motivational
Interviewing is referred, is Rogerian—person-centered.

Cole: Absolutely. It’s a client-centered way of working with people. And by “client-centered,” we mean that the client is the important person in the room, that I’m there to help navigate the course with them. I’m there to help keep them on course, to be a guide. The client-centered part means that we are focused on exactly what it is that they are thinking, what they’re believing, what it is that they want to do.

Yalom: And whether they’re coming in voluntarily or mandated, it’s ultimately their decision.

Cole: It’s ultimately their decision.

Yalom: One of the things I know is that it’s been used widely. It started in addictions, but it spread to healthcare, criminal justice system. Where else is it used?

Cole: You’re right. It is used very, very broadly now. It’s really used in almost every aspect of healthcare now, so that it’s used now in situations of chronic disease management, where people are talking with clients, patients, about their ability and their desire to manage their health behaviors around things like diabetes and hypertension, weight management, those kinds of things. It’s used with parents who are being encouraged to take a look at the weight issues for their children around the childhood obesity kinds of things. It’s used with teens to help them address issues like their smoking, their own weight issues, their use of drugs. It’s used broadly. I can’t really think of any area now that Motivational Interviewing is not being applied.

Yalom: Now, some of these are one-time sessions, ten minutes in a doctor’s office.

Cole: Could be.

Yalom: Other times, it might be used within the course of addictions counseling, or even general counseling or therapy.

Cole: Absolutely. We talk about it as “MI moments.” When I think of an MI moment, what I’m thinking about is, here is this opportunity where a person is struggling with making a change. So to me, that’s an MI moment because I don’t really understand what’s going on, that that person is not able to embrace this change. So from that extent, I would then move into
using Motivational Interviewing. As you said, it could be a 10-minute
counseling session in the doctor’s office where the person comes in, and let’s
say the person has been doing well, managing their hypertension. A person
comes in, the doctor looks, or the nurse, perhaps, who’s doing the intake,
looks at the person’s records for using their hypertensive medication and
also for checking their blood pressure. And they see that, all of a sudden, the
blood pressure, which has always been in control, is now out of control. So at
that point, rather than making an assumption that the person has suddenly
decided that taking care of their blood pressure is no longer an issue, which
sometimes can happen, the person who’s doing the interview just becomes
curious. They want to know what’s changed. So they might say, “Well, Mr.
So-and-So, your blood pressure’s been really in control and, all of a sudden,
I noticed that there’s been a change. Help me understand what’s happened.”
And he might say, “Over the last month, my wife became very ill and I had
to put her in a nursing home. I haven’t really paid much attention to things
going on with me and my health.”

Yalom: So that would start the process, rather just saying, “You really need
to keep taking your meds.”

Cole: Absolutely. Rather than saying, “You need to keep taking your
meds,” or the doctor assuming the medication is not working and, perhaps,
prescribing more. That’s just one example of an MI moment.

Yalom: That’s helpful to think of it as a moment. It’s not necessarily a
general counseling theory.

Cole: Well, there’s a lot of theory behind it, which we’re not going really
going to be talking about a lot, I think, in terms of the underpinnings
of Motivational Interviewing. I think that’s covered nicely in the text.
However, it is something that can be used throughout the course of contact
with a particular client.

Yalom: Say you’re a general therapist or counselor, and you’re working with
a client who’s depressed. And we know one of the best things for depression
is exercise. So you might use MI to help them, if they want, develop more of
an exercise program.

Cole: So in the context of working with people in general psychotherapy,
the first thing that I’m going to be exploring is their own understanding of
their depression and in what ways that depression affects them. Then we’re going to talk together about the various ways that a person can go about addressing their depression.

It could be that a person comes in, and they have been told by their doctor or psychiatrist that taking an antidepressant would be good for them. And the person is not certain about that. So the MI moment there would be to explore what is that uncertainty about, and help that person speak out loud, and then come to their own conclusion about whether or not they want to take medication. Or perhaps they’ve been told they should exercise or they should go to a mindfulness course, things like that, and they’re just not doing that. So it’s, again, to explore what do they think would be helpful to them around working with their depression, and together, coming up with a plan that would be something that they’re willing to buy into, because we know if people don’t buy into the plan, they’re not going to do it.

**THE CHALLENGE OF CHANGE**

**Yalom:** That brings us to the whole idea of change. And change is hard. We know that personally. All of us have things we want to change, certainly, at some points in our life, certainly. Everyone has New Year’s resolutions or many people do. And whether it’s losing weight or not procrastinating, whatever it is, we know that we may think we want to change, but actually making it happen is not always easy.

**Cole:** Exactly.

**Yalom:** So what gets in the way of anyone making changes?

**Cole:** In Motivational Interviewing, we think about needing to address change in three kinds of areas. We first look at, does the person even think that it’s important to make a change? Have we made a New Year’s resolution because all of our friends did and we think that, “If I don’t make one, I’ll look kind of bad,” so we just say, “I’m going to exercise more this year,” but we really don’t think it’s all that important? So we look at it in terms of, “Do I even think that this change is important? Am I now confident that I can actually do it? And am I committed to do it?” Those are the three main components that we take a look at.

So when I’m speaking to somebody and I’m using Motivational Interviewing, I first want to determine if they even think this is an
important thing to do. And if so, why would it be important for them to go about this? That’s the first thing I need to explore, because unless I bought into importance, I’m not going to do anything.

Yalom: So if we go back to, say, the client and the antidepressant medication, for example, how do you start? How does that fit there?

Cole: Is that something you’d be willing to just play out with me for a little bit?

Yalom: Sure.

Cole: Okay, great. Let’s just assume that you’re the client, and you’ve now been told by your general practitioner that you’re depressed, and that they want to start an antidepressant. And you said, “I really don’t want to do that.” The doctor says, “Well, we have this other person in our office that I’d like you to speak to.” So you’re now in my office and we’re talking about that.

Yalom: All right. I’ve been feeling down, but that’s just part of life. And the doctor says I should take this medication. But I’ve been reading they have some side effects. I don’t know if I should take that.

Cole: I hear two things here. I hear that you would be concerned about taking medication because of side effects. On the other hand, you also think that the way you feel is just how it is, that you don’t know if that’s all that important, if something being different there is all that important.

Yalom: Yeah. I don’t know what that means. Everyone’s bandying around these term these days, “depression” or “anxiety.”

Cole: That’s become the fashionable thing and you don’t know if you really want to say, “I’ve got that, and I need to do something about it.”

Yalom: Mm-hmm. I think these drug companies are really pushing it a lot.

Cole: Yeah. Let’s not get caught up right now in the whole idea of the medication, because clearly, that’s something that only you can decide. But what I’d like to learn is, what is your perspective on how things have been going for you, how you’ve been feeling and functioning? Just so we can understand if this is something that you think you need to address.

Yalom: Okay. So that’s how you would start into it?
Cole: That’s how I would start the interview, rather than going down a symptom checklist, trying to convince you that what the doctor told you you need to do is what you need to do. That doesn’t mean that we won’t eventually, perhaps, talk more about specific symptoms, because I do want to help you understand your particular situation and how this is affecting your life so that you can now make a decision about whether or not you think it is important.

Yalom: All right. So you said “importance.” What was the next one?

Cole: Confidence.

Yalom: Confidence.

Cole: Right. Confidence has to do with one’s belief that they are actually able to make a change. So let’s say that this same client has now decided that how they’ve been feeling, that their mood really is an issue, that’s it’s been getting in the way enough that they now want to do something about it. And now, they’ve decided that rather than go with the recommendation of the antidepressant, they would like to try a lifestyle change. Perhaps that lifestyle change would be getting more exercise, which is something typically recommended with depression. So now, we’re going to be talking about their confidence in their ability to do that. If you want to keep going with that conversation, we could show how that works just a little bit.

Yalom: Sure.

Cole: Okay. Let’s just assume that that’s where we’ve gotten. So, Victor, after we’ve talked about it, you realized that the mood is a little more problematic for you than you had really considered. And now you’d like to do something about it, but you really don’t want to do the medication. You feel pretty strongly about that. But you’d like to take the other recommendation from the doctor, which is that you bring in a regular physical activity program into your life.

Yalom: Mm-hmm.

Cole: I want to get a sense of how confident you are that you could do something like that.

Yalom: Well, I know that going to the gym is not going to work for me. Pay money to go lift weight? They should pay you to do that. It seems crazy.
Cole: It doesn’t seem like a lot of fun.

Yalom: For me, in the past, if I’m doing something I enjoy, like playing tennis or something. But it’s hard to find a partner that I enjoy playing with and that fits into my schedule. But I know it has to be something like that, that I enjoy doing.

Cole: So there are barriers that you would have to address in that, one of which would be certainly doing something that you enjoy and being able to put all the components of that together. So that’s one thing. At the same time, though, you’re saying trying to exercise, trying physical activity to deal with this mood issue is something that I’d like to go that direction.

Yalom: Yeah. I know when I’ve done it in the past, I enjoy it. It’s just, I don’t know. Something comes up and then I get out of—with tennis, it’s been hard. And then in the winter, it’s raining now. But yeah. I would like to figure out a way to do that.

Cole: Okay. So the confidence is undermined, not so much based on your ability to actually do some form of exercise or physical activity. The confidence is undermined by, again, getting all the pieces of it together. And when it doesn’t all exactly line up, like the weather’s not exactly conducive, or you don’t have the right partner, it’s how you would stay consistent with something to be able to pull this off to deal with whatever barriers might come up.

Yalom: Yeah. I think that’s true.

Cole: So what are some of your thoughts about how you would go about that? I think, for you to decide first what you would to do, it has to be something that you decide that you want to do. I don’t have any agenda about what that is. So what you think you might do, and what would be helpful to you to be able to start something that would be consistent for you. That’s what we would do in terms of beginning to address the confidence. As you can see, I was very careful not to tell you what you had to do. I could have easily gone into problem-solving for you, telling you how to do this or how to do that, but that’s not going to do you any good. It has to be something that you’ve decided for yourself.

Yalom: And just role-playing it, I felt engaged in the conversation. I felt, “Okay, this is my issue I’ve got to deal with.”
**Cole:** Right. It belongs to you, and I’m here just to help you navigate that.

**Yalom:** And then the third piece is commitment?

**Cole:** The third piece is the commitment. I’m not speaking just about you, this is all of us—all of us can say, “Oh, it’s really important for me to exercise. And sure, I can pull that off.” But the third piece of commitment is, “Am I really going to do it?”

**Yalom:** So there’s a difference between confidence that you can do it and committing to do it?

**Cole:** Absolutely. If I said that I wanted to get in shape again to be able to run a 10K, I’m totally confident that I can do that. Am I committed to doing it? Nowhere close to it. I think that’s a mistake that sometimes we make as counselors or when we’re in these helping relationships with people. We hear people talking about the importance and their confidence, but we often mistake that for them saying that they’re actually going to do it. But it’s that commitment piece that moves us across the line.

**Yalom:** That’s the final step.

**Cole:** Exactly. It’s saying, “Yes, I’m going to go about doing this,” and now we start to put in the details—what’s that going to look like? Exactly. Until we have all three pieces, generally people are not going to do anything.

**Yalom:** Shall we just role-play that for a minute?

**Cole:** Sure, absolutely.

**Yalom:** Just to get a sense of how that conversation goes.

**Cole:** So let’s say, Victor, now that you’ve put this together. Tell me again what your plan is.

Yeah, I’m putting you on the hot seat, here.

**Yalom:** Yeah. So it’s actually—am I going to do it?

**Cole:** Right. You’ve put together this very detailed, well-thought-out plan. So the question I would have for you now is how likely is it that you’re actually going to do this, that you’re going to begin?

**Yalom:** Well, I think, through these conversations, the doc trying to give me antidepressants, and it became pretty clear I don’t want to do that. So somehow that helped me to think, “Yeah, I do want to tackle this mood.” So
I would like to do it.

**Cole:** So you’re really feeling committed to trying the exercise as a way to deal with your mood, and you’ve put together a very specific plan on that.

**Yalom:** Yeah. Well.

**Cole:** You’re seeming a little iffy, there, now.

**Yalom:** Yeah. I said I’d like to do it, but I know I’ve felt that way before. I guess what I need to do is I need to get a couple—I’ve had one partner in the past, tennis partner, but then our schedules don’t always work out. So then I end up only playing once a week. And then I might be on vacation, he’s on vacation. I have at least one guy I know I can hit with. But I think I need to find a second partner. And then, at least in the winter, when it’s raining, if it’s raining, I need to do some other—go out for a hike. I don’t mind going for a little walk when it’s not raining too hard. I need to commit to doing something else.

**Cole:** So you need to have more components to your plan. You need to have some backups to your plan.

**Yalom:** Right.

**Cole:** That would help you feel more confident about doing it. So that brings us back again to this commitment question of, how likely are you to get started on doing something with this? When might you do that?

**Yalom:** I think I’m ready.

**Cole:** Okay.

**Yalom:** I think I’m going to do it. Why not?

**Cole:** Why not? Great. Well, I’d be happy to hear how that’s going for you. You’ve worked really hard here to address this issue. You’ve come a long ways from where we started today, where you were thinking the mood was not that big a deal. And now you’ve explored that for yourself and you’ve actually looked at finding a way that’s going to work for you, and you’re ready to commit yourself to trying that out.

**Yalom:** Yeah. That feels good.

**Cole:** Great. Anything else?
Yalom: No.

Cole: Super.

Yalom: So you could work through all of those in a short session?

Cole: Actually, I have an example from my own practice a number of years ago where, within a 30-minute interview with a young woman who had been referred to me with the exact same kind of reason around taking antidepressants, that within the 30-minute period of time, she had actually explored that issue. And she actually decided to go on antidepressants at the end of it. But she was able to fully explore that issue in 30 minutes. And she made her decision to go on antidepressants based on a values issue. She still, at the end, did not want to do it, but because of her values around her parenting and being a good parent, she decided that she needed to do this. So one of the things I’d like to say about people making a change is that—and I keep saying “we,” because we’re all in this together. That’s one of the things that I really like about Motivational Interviewing. It’s not just us and them.

Yalom: It’s not just clients.

Cole: Exactly. We all have to think about our struggle with these kinds of things. We don’t have to really like what it is that we’re going to do. We just have to be committed to it. Many people who stop smoking don’t like it at all, but they’ve made the decision because they’ve explored why it would be important for them to do it. So they’re willing to commit to making a change.

Yalom: Say more, because I’ve heard the word “values” used a lot in Motivational Interviewing.

Cole: Absolutely.

Yalom: Say a little bit more about that.

Cole: Yeah. One of the things that we like to explore with people, particularly in the area of importance, is, in what ways does this change really connect to things that are important to them in their lives? Again, let’s just go to a specific example like smoking. Let’s say that I’m a person who has smoked a very long time. I’ve grown up in a state where tobacco is king, and I helped pick and do it, everything. So I’ve been smoking at a very, very young age. And I like smoking, and I don’t really want to stop smoking.
However, I have just recently found out that I’m pregnant. And I am now learning, through my visits to my doctor for my prenatal care, that smoking can really have an effect on my unborn child, and can actually set my child up for ongoing health issues after they’re born. Well, suddenly the issue of stopping smoking shifts a bit for me. And it now may become important to me. Even though every fiber of my being has no desire to do it, I become more willing to do this because I don’t want to hurt my child. So it shifts. And that’s a value issue for me. Now it shifts from just me to my value of being a good mom and having a healthy pregnancy. So that’s one example of values.

Someone who is retiring, who has grandchildren, who wants to stay active with those grandchildren, and who, perhaps, has been a little sketchy on working with their diabetic care, all of a sudden realizing that if they want to have the energy to keep up with this five-year-old grandchild that they’ve agreed to take care of a couple of days a week, they have to really be addressing all aspects of health and their diabetic management is going to be something that’s really important to them.

So it’s tied into what’s important to us in life, because, as you said earlier, making change is not easy. We have to really understand, “Why am I going to go about all this work? Why not just stay the same?” It’s a lot easier to do that. It’s very familiar.

**Yalom:** It’s different than desire or commitment, but it reinforces both.

**Cole:** Absolutely.

**THE LANGUAGE OF CHANGE**

**Yalom:** One of the things that I’ve read about with Motivational Interviewing is that you pay a lot of attention to the client’s language, and you have a whole language of change.

**Cole:** Exactly.

**Yalom:** Can you tell me about that?

**Cole:** Actually, in Motivational Interviewing, what the client is saying and how they’re saying it is really what we’re paying attention to all the way through. So it really requires always listening to the client and following what the client is saying. When we’re listening and we talk about the language of change, we think about the client speaking in two ways. We
think about what we call “sustain talk,” and we think about what we call “change talk.”

Sustain talk is the person saying, “How it is is okay. There’s no reason for me to make any change. I’m fine, thanks very much, and see you later.”

Yalom: “Yeah, I’m feeling a little down, but why should you be cheerful in this word?”

Cole: Exactly. And as we explore that, you just stay in that position of, “Thanks very much, but no thanks.” So that’s sustain talk.

Change talk is when the client begins to shift, and they begin to talk about, “Well, possibly, maybe things could be different, or should be different. Or maybe I would like for them to be different.” So that’s what we’re listening for. They’re two different things.

Yalom: And it sounds like there’s degrees of it. “Maybe things should be different,” or, “I really want things to be different.”

Cole: Absolutely. There definitely are degrees of that. So the same thing is, there will be degrees of sustain talk, as well. You can get some pretty entrenched sustain talk, like, “Absolutely, there’s no way I’m considering this. Thank you very much. I think I’ll just go through the door right now,” kind of sustain talk, to kind of lukewarm, “Well, I think it’s kind of okay, but I don’t know that I really want to do anything about it,” or, “What difference would it make?” Things like that. And change talk is the same. “Maybe I’m considering this,” and, “Maybe I want to do something about it.” But that is a significant shift. And in Motivational Interviewing, we are listening for what the client is saying. And when they begin to shift to change talk, we’re going to shift with them.

Yalom: So do you respond differently to sustain talk versus change talk?

Cole: We certainly do. In Motivational Interviewing, there are core techniques that we use called our “OARS,” using Open-ended Questions, Affirmations, Reflections, and Summaries. Those are utilized throughout the course of Motivational Interviewing. With sustain talk, I want to use open questions to try to understand what it is that is comprising the person’s reluctance to address change. I want to reflect back what I’m hearing them say, and I certainly want to affirm them for their willingness to speak about this. But I’m going to use open questions to give them the opportunity to
determine whether there’s any, what we call, “discrepancy,” a difference between how things are now and how they would like things to be. So I would use specific open questions, which we’re going to talk about later when we go into the more specific methods.

I would use specific open questions, followed by reflections, to make sure that I understand it, to deal with sustain talk. And then, when the client shifts and begins to move into change talk—and when I talk about the moving into change talk, I’m listening for anything that’s a shift from, “No, thank you very much,” to “Maybe I’ll consider.”

**Yalom:** You’re really tuning into that.

**Cole:** I’m really tuning into that. And we’ll see that on one of the later DVDs as I pick up on change talk. So the moment that the person moves to change talk, then I’m going to shift with them, and I am strategically going to start reflecting that change talk, toward the goal of that person hearing that change talk and having the opportunity to add to it. So now I’m going to be still using my open questions, but my open questions are going to shift in the direction of helping them explore where they’re going with this possibility of change. So it’s a very strategic way of working with people, and it really involves paying absolute attention to what the client is saying and following that and helping the client continue to extend their exploration.

**Yalom:** I know one of the principles is neutrality, not pushing them for one thing or the other.

**Cole:** Right.

**Yalom:** But you are subtly, or not so subtly, I don’t know, reinforcing the change talk.

**Cole:** Exactly. I like to think of it as, the client has shown me the direction to go, and now I’m helping them stay on course with that, so that, when the client shifts over and says, “I think I might want to do something about this,” as you did in the interview that we did the role-play in, now I’m staying with you on that and helping you explore that part of it. But if I don’t pay attention to your change talk, and I just keep exploring sustain talk, eventually, you’re going to move away from change talk and you’re going to go back to sustain talk. So once you’re on the path, I’m going to stay on that path with you.
Yalom: So you have to be careful not to jump back in with, what was that called? The righting reflex?

Cole: Exactly. So the moment a person moves into change talk, it can be very seductive to say, “Ah. Now the person’s willing to do this, so now I can tell them what to do.” So we have to always be on alert because I’m never going to move out of partnership and collaboration and autonomy. I’m never going to move out of spirit with the folks that I’m working with. It’s always going to be them considering what they want to do, how they want to do it, what’s going to work for them, whether they want to do it. It’s always going to be the client’s decision around this.

Yalom: On one hand, it’s subtle, but it’s very, as you said, strategic.


Yalom: Let’s break down further the ingredients of change.

Cole: When we talk about the ingredients of change, we have another acronym, DARNCATS. And you’ll hear MI people, people who trained in Motivational Interviewing, you’ll hear them talk about DARNCATS all the time.

What we’re talking about here are these ingredients of change. We’re looking at the “DARN” part, which we consider the preparatory language around change. That means that, first, the person is saying, “I desire to do something different.’

Yalom: That’s the “D.”

Cole: That’s the “D.” The “A” stands for ability. “I believe I can do this.” The “R” stands for reasons. And when we think of reasons, we think about objective reasons that the person might make a change. Let’s say, around exercise, almost all of us can give at least three objective reasons why it’s good to exercise. That’s the data, so to speak.

Now, we need to move that into, “Why do I personally need to exercise?” That’s the “N” part. “I need to do this for these kinds of reasons. I need to exercise because I want to stay with good stamina so that I can go on this hiking vacation that I would like to do. So that’s why I need to be doing a better physical activity program.”

Yalom: Or I want to lose weight.
Cole: Lose weight, whatever it needs to be. So we have to personalize that. Then, moving from there, we move into the commitment part. Again, until we have committed to make a change, we’re going nowhere. But often, as we explore with people, we realize that they have started to do some of this “A” part, which is that maybe they started activating steps already. They’re not fully committed. You’ll hear this with people who have started to consider making a change in smoking behavior: They have decided to cut back some, they’ve started to smoke a different kind of brand. So they’re on the path, but they’re not necessarily fully committed. But that is behavior that we can certainly support. We would affirm that behavior.

Then we’re looking at, what are the steps that the person is going to take? So that’s the full range. The first part is preparatory, and the second part is activation.

Yalom: So it’s the commitment, activation, is there a “T?”

Cole: The “T” is the taking steps.

Yalom: Taking steps.

Cole: Taking steps, exactly.

Yalom: And the “S” was?

Cole: That’s the taking steps. “T” and “S.” DARNCATS. Taking steps. So that’s what we’re looking for in the ingredients of change. And we’re always listening for that. And sometimes, I’ve actually guided clients through the conversation just by using those elements.

I’m going to start with the “D.” I’ve even said to people, “We know that for a person to make a change, we have to think first, do we even desire to do that?” And I’ll just guide them through a conversation using those particular elements.

Yalom: So that last part is, as you did with me in the role play, helping me actually make a plan of what I’m going to do.

Cole: Exactly. That’s the second part, which is the commitment, the activation part. Exactly. And again, that’s a place where we have to be very careful not fall into the righting reflex. What can happen is that the counselor is very committed to exploring the first part, the sustain talk and the change talk. And the client finally says, “Yes, I need to do something
different.” And the person doing the interview says, “Okay, great. Now I can stop this Motivational Interviewing stuff and I can tell them what to do.” Because somehow we have this burning desire to share our ideas with people. So, one more time, we have to be very careful to avoid the righting reflex. We stay in the same stance with the client, where we’re exploring with them what do they think they want to do, how should it look, all of those elements, and help them put together a change plan that’s unique for them.

And, of course, later on as we’re talking again about some of the specific techniques, we’ll talk about the importance of bringing in information or other kinds of guidance that the client might need. But basically, the decision to make a change and how the client is going about it always rests with the client.

**USING MI IN SESSIONS**

**Yalom:** How does this fit together in an actual session? Are there different phases? Is it structured?

**Cole:** There are phases that we talk about in Motivational Interviewing. They don’t follow in a linear fashion, but there is a certain order that we have to proceed in some way. First is engaging, which basically means that we’re attending to the relationship with the other person. And that’s a little hard to define. I think that’s very situation-specific. But it basically means that I am demonstrating to you that I’m really interested in you and that you’re the most important person in the room. So that engaging phase. But the next part is the focusing phase. And focusing is where we are working to establish the agenda, so to speak, with the client.

We call this “Agenda Mapping” some of the time, in some of the text. But it basically means where I am understanding what it is that the client really wants to speak about. Let’s say that I’m in the position of a healthcare professional and I need to bring something to the client’s attention. I’m bringing that to the table. “I’ve been reviewing your blood sugars over the last month and they’ve gotten beyond the range that I’m comfortable with. And that’s what I’d like to talk with you about today if that’s okay with you.”

**Yalom:** That’s important—“if that’s okay with you.”

**Cole:** Exactly. That permission asking piece is very, very important. So we need to get the focus, because if we don’t know what we’re talking about,
I can use Motivational Interviewing, I can use every method out there, quite well, but if you think we’re talking about one thing and I think we’re talking about another, we’re not going anywhere. So focusing is very, very important.

**Yalom:** You talked before about an MI moment, and that’s part of the moment, is having an agreement on what you’re talking about.

**Cole:** Exactly. We have an agreement, as you and I did when we did our small role play. We agreed on what we were going to talk about, why your doctor had referred you to me. We got on the same page about that.

Once we have focused, now I’m going to move into the evoking part, as we talk about it. And that’s basically where I want to really understand this issue as it applies to you, the same as we did around the mood issue for you. I’m now going to engage you in a conversation to understand where you are in terms of whether you think this important, how confident you are about this, where you are in a commitment. We’re going to now move into that conversation.

Only when I get a clear “yes” from you about this being something that you want to work on or that you want to make a plan on, will we move to planning. But this not done in a linear—”Okay, I’ve satisfied that step, I’ve satisfied that step.” I clearly have to satisfy the focus step. But once we’re focused, now we’re into evoking, and that means that we’re engaging because I’m paying attention to you and staying very client-centered.

And then, when you get to the place, as you did, again, in that role play where you said, “Yes, I definitely want to do something about this,” now we move into planning. Those are the phases of Motivational Interviewing.

**Yalom:** You talked before about the OARS. Are there different techniques you tend to use more in the different phases?

**Cole:** Particularly in the focusing phase, I’m going to be using, again, a combination of open questions and reflections to help this person decide. Let’s say that a person comes in and there are multiple issues. The person says, “My life feels really out of control, and my goal is to feel more in control.” That is an incredibly worthy goal to work on.

**Yalom:** But it’s too broad.
Cole: It’s very, very broad. How are we going to know what that is? So from there, I’m going to be asking an open question, which is, “What feels out of control?” And I’m going to work on understanding that. Let’s say that the person says, “I can’t seem to follow a schedule that meets the needs of my family and myself. I’m not doing the right things to take care of myself. I’m not getting the appropriate rest or exercise. And I’m also really feeling, at work, that I’m just not on target.” Well, we now have three things out there that says, “I’m out of control.” So out of that, I’m going to be wondering, where should we start?

At that point, we start to figure out, what are we going to focus on here? How might we start to focus on that? Then I’m going to work in understanding, why is this important to you? What thoughts have you have about what you’re going to do? We’re going to start moving into exploring that territory, and then we’re going to move into what the person wants to do about it, if they want to do something.

So when we look at the phases of Motivational Interviewing, in order for it to be Motivational Interviewing, there has to be the engaging, there has to be the focusing, there has to be the evoking. The planning frequently happens, but we don’t have to have the planning for it to be Motivational Interviewing.

Some people come in, and they just explore something that they’ve been uncertain about. And just the exploration, itself, is what they’re looking for. Then they go out and make their own decision about what they’re going to do, independent of us.

Yalom: So you don’t always end on planning or a change plan?

Cole: Not necessarily. I think in health behavior change work, we frequently do. We’re always focused on what that next step might be. For some clients, that might mean that, let’s say a person is considering adding physical activity. It could be that you have 10 minutes with that person, and all you can really do in that 10 minutes is have them consider why this might be important.

Then, from there, you begin to talk about what they might do. And the plan could be at the end of that session that they read some literature that you’ve given them, and that, on the next visit with you or someone else in your
office, perhaps, they look more at what they might do about that. So there’s actually a next step, but it may be not be that complete plan about what they’re going to do.

**Yalom:** And again, it’s very different if you have a 10-minute session in a doctor’s office than if you’re working with an addiction counselor over time. The first session or five sessions with an addiction counselor, you may still be working on whether the person thinks it’s a problem.

**Cole:** Absolutely. You still could be exploring whether or not this is something they really want to do something about. Exactly. So the final part of that might be that the person continues to say, “No. While it might be problematic for me, I’m not really going to do anything about it.” So you’ve used Motivational Interviewing—technically, Motivational Interviewing is designed for the client to make a decision, yes or no. I think about it as informed consent. They’re allowed to fully explore the issue and make the decision that’s the right decision for them.

**Yalom:** And that’s challenging.

**Cole:** Very challenging.

**Victor:** Say, again, in the addiction field, many addiction counselors are convinced the solution is to stop drinking or using drugs.

**Cole:** That’s right. It could be that appears to be what might be best for this client. And that’s perfectly okay. And the counselor is certainly able to bring in their professional point of view, at the same time reinforcing client autonomy. That’s a very tricky thing to do, but, ultimately, we do have to go back to reinforcing client choice. You’re right. But when we have very strong feelings about how something should be, or we have many years of experience in the field and we have been able to see what appears to be the best outcome for people given what we’re seeing, it’s very, very hard to stay in this position of supporting client autonomy. It can be very challenging, and we certainly recognize that as people go about trying to use Motivational Interviewing. We understand that that’s a challenge.

**Yalom:** Right. And when you don’t stay in that position, that can create what you call discord?

**Cole:** Absolutely. Discord is considered a disturbance in the relationship, basically. It’s what we used to refer to as “resistance.” But now, we’re
beginning to look at it as discord because, again, Motivational Interviewing, as you can understand, as we’ve talked about this, it’s very relationship-based. The strength of the relationship is very, very important to the work. And that comes with the client really understanding that I’m there to collaborate, to be a partner. So discord occurs when I do something that starts to push the client in some way. I’m pushing them in that I’m just not hearing what they’re saying. I’m disregarding it. Or I’ve decided what’s right and I’ve started to prescribe that. So that’s going to push the client away from me. It’s going to create a disturbance in the relationship.

Yalom: So again, if you keep saying, “You’ve got to stop drinking. This counseling is not going to work if you don’t stop drinking”?

Cole: Exactly. “If you don’t stop drinking, if you don’t do it the way that we think is the right way, then you’re not going to be successful. It has to be our way, or you’re just not going to be successful.” Well, almost everyone would respond back to that by saying, “Who are you? What are you telling me?”

Yalom: “Well, but you’ve come here because your finances are a mess and your wife’s about to divorce you. And I think it’s pretty clear that drinking is a big part of that. So if you don’t want to work on your drinking, what are you doing here?”

Cole: Exactly. And I might say, “Look, all those things might be true but, look, I like to drink and I’m just going to keep on doing it. I don’t care what you say.” Because you’ve pushed me, at that point. You’ve not really engaged me. So if I want to deal with that discord—let’s say that I have created that by taking that kind of a stance. As a counselor, it’s my job to get us back into the balance, back in partnership. What I would do at that point is a reflection. I would say, “You know, I need to just stop here, because I realize I’ve moved into telling you what to do, and clearly, that’s just going to push you to probably have to argue back with me. But it certainly says that I’m not respecting you and your thoughts about what’s the best for you. So I’d like to back up and see if we can talk about this in a different kind of way.” So I just respect the client, at that point, to get us back on track.

Yalom: So as counselors and therapists, we’re human. We’re going to fall into that trap sometimes.

Cole: Exactly. We’re going to fall into that trap sometimes. I need to
recognize it because I’ve created it, and I now need to go back and try to get us back on track. And you will find that clients really do pay attention to that because it shows I’m paying attention, that I’m not just here rotely going through my script with you. Go ahead.

Yalom: And other times, discord could be created from just the situation, right?

Cole: Absolutely. I talk about it as, sometimes you’re sitting there innocently, as the counselor and whatever your role is, be it doctor, nurse, dietician, whatever your role might be.

Yalom: Parole officer.

Cole: Parole officer, whatever. And you’re sitting there just innocently waiting for your client to show up so you can just do your job. And the client comes in and they are already in discord because somebody else has been pushing them already. So here I am and I’m a person who is—

Yalom: And they’re projecting that onto you.

Cole: They’re projecting this onto me. They’re dumping it over here onto me. So they come in the door assuming that I’m going to be telling them what to do. So they come in and they say, “I’m coming in to talk to you because I’m in this job now and they’ve got this new insurance company. And the insurance company is saying that, in order for me to have the best rate on my health insurance, I have to stop smoking. And if I don’t, they’re actually going to raise my rates. So they told me I have to come over here and talk to you about not smoking. And I really think that that’s, I mean, how un-American is that? It’s kind of communistic.” And now, I’m just sitting there, little counselor, trying to do smoking cessation, and you’re come in the door and you are really in a huff.

Yalom: Yeah.

Cole: Well, that’s still my problem, because, in order for us to get on the same page to go anywhere, I’ve got to deal with that. So when people are coming in that way, what they’re saying is, “No one understands me and my point of view.” I need to understand them so, I’m going to come right in—

Yalom: “And no one’s going to tell me what to do.”

Cole: “And no one’s going to tell me what to do.” So I’m going to respond
back as a counselor with a reflection to say, “I hear it. You’re really feeling pushed around, treated in a way that’s kind of un-American. I got it. And really, wherever you’re coming from, it’s perfectly okay. But since you’ve gotten as far as my office, and there is this thing that’s going with the insurance company, how can we best use our time around this issue of smoking?” I’ve acknowledged the person, I said I get it, but then I’m bringing us back to focus, so that we can have some direction where we’re going in our conversation. And then I’m just going to move into exploring with the person.

Yalom: That’s how you would handle it?

Cole: That’s how I would handle it.

Yalom: Different counselors have different styles.

Yalom: Everybody has a different style, absolutely. That’s one thing about Motivational Interviewing. It doesn’t say that you’re not going to bring your own personal style in. And I have a tendency to be pretty relaxed and even a little provocative and playful with clients. That’s my personal style. But everyone doesn’t have that. But the core concept here is that, when there is discord, the client is saying, “You and other people do not understand,” so you have to do something. And I always recommend a reflection here that lets the person know that you do understand and that you are also reinforcing their autonomy. That’s critical.

Yalom: That wraps up a lot of the theory of MI. Now we’re going to have a chance to some examples of what it looks like in practice.

Cole: Great.

**MI CORE TECHNIQUES**

Yalom: Now we’re going to go in more detail about some of the core techniques, the OARS—open-ended affirmation, reflection, and summary. And we’re fortunate that we have some actual video clips of Bill Miller working with real clients.

Cole: Great.

Yalom: So we can learn from those. Let’s start with open questions. It sounds obvious, but what exactly does that mean?

Cole: The first thing we should talk about is that an open question is
something that can’t be answered with a “yes” or “no.” And open questions are designed to give the client the opportunity to speak more about the issue. So it’s just a way to flesh out the issue.

**Yalom:** In the first clip, we’re going to see an 84-year-old woman, although she looks much younger, named Rosina. She’s struggling with wanting to let go of some of the responsibilities she has in her life, enjoy herself more, and actually thinking about moving to Italy. We’re going to see Bill Miller ask her an open question, but it’s an open question looking forward. Can you say a bit about the significance of those kind of questions?

**Cole:** Sure. Questions that are open questions about looking forward come after the client has decided that making this change is important. And looking ahead allows the client to think out to the future and begin to envision what it might look like to actually make, say, this move to Italy or whatever it might be. It takes us out of the current moment and lets out into the future of our lives.

**William Miller:** You’ve been through some pretty remarkable things in your life. You’re really a survivor. I’m trying to get hold now of what it is that you’re looking for in your future, how you’d like things to be different for you in a few years.

**Yalom:** Now, let’s take a look at another open question. Linda is struggling with wanting to lose weight, and the open question takes the format of an importance ruler. What’s an importance ruler?

**Cole:** The importance ruler is where we use a specific question and ask the person to gauge where they might be on a scale, is one way of using it. So we might say to the person, “On a scale of zero to ten, how important to you to be losing weight?” The art of using this is to hear what the client says. They choose a number, and it’s just a number. It’s where they put themselves on the scale. Let’s say that Linda says a “5.” Now, I’m going to, as the counselor, say, “Why a 5 and not a lower number?”

I’m asking why not a lower number because causes Linda to actually have to think about that. She’s going to have to go into her own mind, her own reasoning, and decide, why has she chosen a 5? It gets her actually talking out loud about that. It also is different from what we typically hear people say, which is usually, “Why a 5 and not a 10?” And in doing that, we have really moved away from a nonjudgmental stance, which is a huge part of
Motivational Interviewing. The number is just the number. My goal is to have Linda think about why is it that number, and then be able to build on that. Typically, then, once she’s answered why she’s a 5 and not a lower number, I’m going to ask her then, “How high does that number need to be for you to see that losing weight is important to you? What does that number need to be? And what would it take to get you there?” So it’s a vehicle to develop the conversation.

**Yalom:** Okay. Let’s take a look.

**Miller:** Let me ask you what may seem like a silly question. If you imagine a scale from zero to ten, how important is it for you to eat more vegetables and less carbohydrates, to make that change? Zero is not at all important, and ten is, “It’s the most important thing in my life right now.” Where would you put yourself on that scale?

**Linda:** Seven and a half.

**Miller:** That’s pretty high.

**Linda:** That’s why I’m sitting here. I want to get inspired.

**Miller:** Yeah. Why so high? How come you’re up at seven and not down at three or four?

**Linda:** I just am.

**Miller:** Yeah? For no particular reason?

**Linda:** I want to be more proud of myself.

**Yalom:** One thing I noticed is that he asked her, “Why not a 3 or 4?” And she said, “Because I am.” And he paused, and he really gave her a chance to reflect further.

**Cole:** Exactly. Again, that’s part of the art of Motivational Interviewing, is giving it some space, being comfortable with some silence. Not having to fill every moment with conversation, and allowing the client to think. And then Bill did come back. She just said, “Just because I am.” So he gave that some room, then she didn’t really say anything. And he said, “For no particular reason.” And again, that was just a very small reflection and he gave it some space. And what I found very intriguing in Linda’s response, is that when she responded back, she said that it was important to her, and she turned toward a value issue.
She talked about it in terms of, “Because this is how I want to see myself. It’s what I want to think about me.” So she had actually started to deepen her connection to making this change just beyond the, “Because I’d lose weight to look better.” Deepened it. So that is a lovely way to allow her to explore that. And we never quite know what the client is going to say. And really, whatever the client’s motivation is, it belongs to them. It doesn’t have to be what I want it to be. It’s what their motivation is. It doesn’t even have to make sense to me. As long as it makes sense to the client, I’m good with it.

Yalom: And are there other types of rulers?

Cole: Yes. Actually, in the ruler exercise, we have three questions that we ask. And often, when I’m working with a client, I may use all three of those, particularly if I don’t know where the client stands on the issue. Let’s say that we have somebody and they are considering not smoking, or they’ve been sent to me because somebody wants them to deal with their smoking. I might use the ruler questions this way. I might say, “I’m going to ask you three questions, and I’m going to go through all three first. You don’t have to remember them. I’ll take you back through them. But the three questions are: On a scale of zero to ten, where zero is the bottom of the scale, not at all, and ten is absolutely the top of the scale, how important is it to you to take a look at your smoking? How confident are you that you could do something to change if you wanted to? And, in this current moment, how committed are you to doing that?” And the person comes back. I take each question in turn, I find out what the number is on importance, confidence, and readiness or commitment, and then I guide the conversation around that. And I flesh out each one.

Let’s say that someone says to me that they’re a 9 on importance. Well, I know importance is probably not an area we need to spend a lot of time in, but I am going to ask them why a 9 and not a lower number, because I want to understand their motivation. Let’s say they’ve given me a 2 on confidence and they’ve given me a 1 on commitment. Well, I know now where we need to spend our time. So it’s a great way for me to know what direction to go in. It’s very practical, and clients really get it.

Yalom: Sure. Know where to put your energy.

Cole: Exactly, where to put the emphasis.
Yalom: And over time, it might be useful data to have.

Cole: It certainly can be.

Yalom: To say, “Three weeks ago, you were at a 2, now you’re at an 8.”

Cole: Absolutely. Exactly. That’s one of the things that people can use, actually, if they want to track, in an office, where a client might be in terms to relating to these scales. They could ask those questions each time, if they like to.

Yalom: I know there are also some sequences of open questions—”chunk, check, chunk,” if I can say it. What is that?

Cole: That’s right. “Chunk, check, chunk” is where a client comes in, let’s say, to see me. And I’m going to take an example of where a client has come in, and they have done a health screening questionnaire. I have the information from that. I now want to start my conversation with them by giving them a summary of that. I would start it by saying, “I’d like to go over the answers that you gave me from the screening questionnaire. These are the things that stood out to me.” And I’m going to say, your weight, or exercise, whatever it might be. That’s a chunk of information I have provided to the client. The check is now where I’m going to stop and say, “As you hear that information, how does that strike you, or what does that bring to mind for you?” So now, I’m checking in with the client. Because we’re always going back to that partnership collaboration piece.

Yalom: With an open question.

Cole: With an open question. The client then says whatever they’re going to say. Let’s say the client might say something like, “Well, my cholesterol is really, really high and I’ve heard that’s a really bad thing. What should I do about that?” Now they’ve asked me directly for another chunk of information. So first, I’m going to capture this. “Okay. So you feel pretty alarmed about that. Well, let me tell you the way we normally give people some ideas about how to work with that. Let me give that information and I’ll see what you think about that.” Now, we’re into chunk, check, chunk. That can very typically be used in a medical kind of setting.

Yalom: And there’s another one—”elicit, provide, elicit”?

Cole: Exactly. In some ways, elicit, provide, elicit, and chunk, check, chunk,
which I can actually say twice, are very similar. But elicit, provide, elicit is slightly different in that I am starting with the client and I’m asking them what they know already. Let’s say that the client has learned, just from getting some results, perhaps, from the nurse, that their cholesterol level is high. So they come in, and we have agreed in our focus that we’re going to talk about that. And the client says, “I really want my numbers to be better.” My elicit is, “Tell me what you already know about ways to approach this.” I find out from them, what do you know already?

They come back and they say, “Well, I’ve heard that maybe if I change the way I eat or maybe if I change the way I eat and I exercise, that that would work. Or, sometimes, people say you have to go on medication. That’s what I know already.”

Now I’ve out what they know already, I can now come in and provide information that’s very pertinent to this particular client. Then I go back and elicit from them, “What do you think about that?” It’s just a different direction that we take.

Yalom: And of course, the type of information you might provide depends a lot, of course, on their problem, but also on what your role is.

Cole: Absolutely.

Yalom: If you’re a health educator, you have professional expertise about that, whereas if you’re an addiction counselor, you might have some expertise about that.

Cole: Exactly. And that brings up an interesting point, because we do have expertise. All of us, in our area of work, we have expertise. So we have this tendency when we get ready to either give a chunk of information or provide some information, we have a tendency to say a lot of information. So I like to coach people that they should think about two or three pertinent pieces of information that they would provide to the client, using understandable language, giving it in sound bullets. And be concise, not punch the button on the lecture that you know about this area, that you could talk about for 30 minutes. Because clients are not going to hear that much information. So providing very specific, short information, and checking in with the client again.

Yalom: You have expertise in the subject matter.
Cole: You have expertise, but you’re using it judiciously. You’re not overwhelming the person with information.

Yalom: And you’re not the expert.

Cole: I’m not the expert on what’s going to be the right thing for that person. I’m just there to tell them what the possibilities are, and then they can decide what’s going to work for them. Exactly.

Yalom: Now we’re going to go on to affirmations. What are they?

Cole: Affirmations are a way of recognizing the client. One colleague I have talks about a way of lifting the client up. To me, affirmations apply in our collaborative partnership with this person, the client-centered part, which says, “I’m really paying attention to you.”

An affirmation can be recognition of a personal strength or trait that they’re bringing to the table. It could be a recognition of effort that they’re already making toward change, or even their willingness to explore the issue. Again, a way of recognizing and lifting up, supporting.

Yalom: And you tend to use that more with change talk than sustain talk?

Cole: Not really. It utilized all the way through. Particularly if I have somebody who’s been very reluctant to come in and speak with me and they are actually willing to explore the issue, I want to affirm that. I’m going to say, “Despite your reluctance, you’re really putting a lot of effort into this. You’re willing to talk about this in a way that you weren’t so willing to talk about in the beginning.” I’m going to recognize that. Just think about how often people don’t recognize our efforts. Generally, we’re told what we’ve done wrong. So for our client to actually be affirmed, to be supported, is a very valuable part of what we do in Motivational Interviewing.

Yalom: Who doesn’t want that?

Cole: Absolutely.

Yalom: In the next scene, we’re going to see Bill Miller with Craig, who’s a man who’s struggling with some pretty significant depression. And we’ll see an example of an affirmation.

Craig: My place is kind of decrepit. I’ve, with help from friends and family, gotten started fixing it up. Lot of paint. Paint, doorknobs, making doors that didn’t shut work. But lately, a bit more ambitious project is doing a tile
surround in the tub.

**Miller:** Wow.

**Craig:** Which, you add all that stuff up, and it doesn’t sound like I’m a depressed person.

**Miller:** You’re not acting like one.

**Craig:** Yeah. I am a very good impersonator.

**Yalom:** Any reactions to that? Very simple affirmation.

**Cole:** Very simple affirmation. Actually, Bill did two affirmations. The first one is what we might often do, just a “wow.” Sometimes with a client, we just go, “Great, good for you.” It’s a recognition of that person. It really has nothing to do with us. Then he also came back and he affirmed him. “Yeah, those are not the actions of a depressed person.” He came in and really supported that Craig is doing something different in his world that he might have not normally done in his depression. So Bill is just recognizing that, really supporting it.

**Yalom:** And it has to be genuine.

**Cole:** It has to be genuine. When we do an affirmation, the affirmation has to be based on something that’s real. We’re not just going to pull this out of thin air. And it’s done in this spontaneous, genuine way. It just arises out of the context of the interview.

**Yalom:** Because if not, the client will feel that it’s phony.

**Cole:** Oh, absolutely. So it’s very genuine, very warm.

**Yalom:** Now, we’re going to see Rosina again, in another example of an affirmation.

**Rosina:** When I left the children’s father, my parents didn’t talk to me for over a year. People crossed streets so they didn’t have to talk to me.

**Miller:** They just closed you out.

**Rosina:** No support. Yeah. I was closed out of everything. And I didn’t have any support. And I struggled with the lack of education I had. My children were my support. They helped me to graduate and pass and be able to get my real estate license. Without their help, I couldn’t have done any of it. I didn’t have anyone I could turn to. When I left their dad, I stepped into an
American world that I didn’t know anything about. The business world.

**Miller:** All alone.

**Rosina:** And I would be so depressed that I would come home and close the door, and sleep. I so often thought about, what am I doing? If it weren’t for the kids, I probably would not have survived. I would have taken my life. There was nothing to do.

**Miller:** You’ve been through some pretty remarkable things in your life. You’re really a survivor.

**Yalom:** With Craig, he affirmed more his behavior, and in that one, he really affirmed her as a person. “You’re a survivor.”

**Cole:** Absolutely. He listened to what Rosina said, a very compelling story of hardship and determination. And he cut through all of that he said, “You’re a survivor.” He really recognized something about her that’s enduring, that she owns that. Just to notice that, and again, in a very supportive, gentle, genuine style. Yes.

**Yalom:** Now, we’re going to move onto reflections, which is a really commonly used technique in Motivational Interviewing. What are they and why are they helpful?

**Cole:** Definitely, Motivational Interviewing is known for the use of reflections, and we really emphasize the use of reflections. Reflections are the counselor’s attempt to understand what is that they’re hearing from the client. The first part of a reflection is just to make sure that I’m getting it. If I’m speaking with a client and the client says something to me, I’m then taking it in, I’m hearing it, and I’m trying to make sense of it. What does that mean? What does the client mean when they say that? So I take that in, run it around my brain and my thinking, and then I respond back to the client, sometimes just simply saying back to them what they’ve said to me, and just changing a few words. You don’t want to say exactly what they’ve said because you sound like a parrot. But you just change a few words. At other times, when I’m doing that reflection, I’m not only listening to the words, the content, but I’m paying attention to how the client is saying it, the tone of voice, the way they look when they’re saying it. And I’m beginning to think about, what is the client actually experiencing when they’re talking about this? What is the experience? And that guides me to do what we call a
more complex reflection, where I come back in and I add meaning, so that the person may—

**Yalom:** Implied meaning.

**Cole:** Yes, exactly. It’s my hypothesis about what the client is experiencing, and I say that back. The value of these reflections is, again, to make sure that I’m understanding it. But more importantly, the client has to consider what they’ve said, which means they have to be thinking again, and they have to then clarify if that’s what they meant. So the whole goal of this in Motivational Interviewing is to help the client determine what they’re thinking already. We use simple reflections, we use complex reflections, and then, in Motivational Interviewing, when there is change talk, we strategically begin to reflect that change talk. Now, one of the values —

**Yalom:** You also use double-sided reflections?

**Cole:** Right. Double-sided reflections are designed to capture both sides of the ambivalence. “On the one hand this, on the other hand, that.” That means that the client has been able to talk about the argument of both sides of change. And in doing a double-sided reflection, we again want to be strategic and we want to end on the side of change.

“On the one hand, stopping smoking would really be a hassle for you. And on the other hand, you’re beginning to take a look at the health benefits in facing this challenge.” I’ve ended on the direction of change.

**Yalom:** I wanted just to go back. You said you don’t just want to repeat it word for word, because it can sound like parroting.

**Cole:** Exactly.

**Yalom:** I know client-centered, Rogerian therapy often is misunderstood as just some mechanical repeating back. I’ve seen videos of him work, and what really stands out is how much he is present, he is there. It’s not the words that you say but it’s really being there and the client experiencing you’re really interested and you’re listening.

**Cole:** Absolutely.

**Yalom:** And your openness to having them correct you if you misunderstand.

**Cole:** Absolutely. That’s where we really are engaged and we are fully
present. And the client realizes that we are really listening. And if you think about how often in conversations with people, they’re not really listening, they’re thinking about what’s for lunch or, what am I going to tell you to do, or how can I tell you about my own experience?

Yalom: They’re busy listening to what you’re saying and preparing a counterargument.

Cole: Preparing the counterargument or preparing for the next thing they are going to say. So in Motivational Interviewing, it is really is quite an active process. I have to both be listening to what you’re saying, I have to be really working to hear that accurately, and at the same time, to start considering, where am I going next? But I have to stay fully tuned into you. I’m not checking out.

Yalom: Yeah. If the client experiences that he’s talking about his addiction and he experiences that you’re just collecting data to convince him why his thinking is wrong—

Cole: Why should he want to keep talking to me? Exactly. He’s only going to see me, I’m playing a game with him. Whereas reflections are really designed to pick up on, “What am I getting from you?” Also, when I reflect back to a client what they’ve said to me, it allows the client to let me know where we’re going next, rather than my always deciding.

There’s always a time and place for me coming in with an open question to help us with the direction of where we’re going or to flesh out an issue. But if I reflect back to the client, let’s say that the client says to me, “Smoking is just a part of my life. I just don’t know that doing something about is something I really want to do. I know the doctor’s telling me I’m starting to have some emphysema, but I just can’t imagine what my life would be like without smoking.”

And if I reflect that back, to say, “This is a tough place for you to be. You’re learning some health difficulties, and at the same time, it’s a part of your being,” and I just say that back and I just wait, then the client is going to tell me where to go. So the client might continue with sustain talk, or the client might suddenly say, “I really need to do something about it. Why would I want emphysema?” Ah, now I have change talk.

Yalom: And then you’ll pick up on that.
Cole: I’ll pick up on that. “So you’re really considering this. Although you might not want to do it, you’re beginning to see that it can have some benefits for you.”

Yalom: And that would be a double-sided reflection ending on the change talk.

Cole: Ending on the change talk. Exactly.

Yalom: And I know, also, you think about what’s the ratio of open questions to reflections. Tell me about that.

Cole: Exactly. When a person is learning Motivational Interviewing and they’re starting to develop what we call proficiency in using Motivational Interviewing, we’re looking for a 2:1 ratio. We’re looking at two reflections for every question, never more than three questions in a row, followed by some summary, which is also a reflection. But two reflections to every question.

Yalom: It sounds very technical. What is that? Where did you come with that ratio?

Cole: I don’t know exactly the science behind that. I can’t say that I can speak to the science of that. But what we are really looking at is staying in this partnership collaborative relationship, so that the more we’re reflecting and giving the client the opportunity to take us in the direction that they want to go, the more we’re staying in the relationship and the collaboration and reinforcing client autonomy. If I’m just asking you question after question after question, as a client, you don’t have to do anything other than sit back and wait. If I do a reflection, you have to think, and you have to tell me where we’re going.

Yalom: I hadn’t thought of it that way. So with a reflection, it’s up to them to figure out what to say next, whereas, if it’s a question, you’re more in the driver’s seat.

Cole: I’m in charge. Exactly.

Yalom: Now we’re going to see an example of a reflection. And this is going to be a reflection of change talk. And, again, it’s with Rosina.

**REFLECTION ON CHANGE TALK**

Rosina: First of all, I want to go live in Italy. I’m Sicilian. I want to live in a
country that lives differently than our custom. They know how to play there.

**Miller:** Very relaxed.

**Rosina:** Yeah. And change my method of living, because I’m so entrenched in being a doer and a completer, and taking care of everybody. I want to change that. That’s what I did when I moved to Hawaii. I just dropped doing anything. And I’m back to working.

**Miller:** So maybe it would take that big a change, going to a whole different place where the lifestyle is different, to get you to just settle down a little bit.

**Cole:** So that was an excellent example of Bill picking up Rosina’s change talk, thinking about the measures that she would have to take to pull off this change in her life.

**Yalom:** We’re going to see another clip of the two of them, and this time, he’s going to do a double-sided reflection.

**Miller:** It seems like that life that you want, there’s no way to do it here. No way to work for a while and then have your siesta.

**Rosina:** I created in my home in Lahaina, which means “unrelenting sun.” So to plant anything in Lahaina. And I have a high-maintenance garden. I’m a gardener. It looks incredible, but it takes all your time, which I love doing, but on the other hand, it’s all I do. I take care of my home, I take care of my kids, I take care of my business. I take care. And I have pets, I have cats, I have dogs. I have ponds, fountains that all need maintenance. I don’t know how to live otherwise. I think that if I leave and I go away, which I did when I moved to Hawaii—

**Miller:** I was going to say, you have lived other ways in the past.

**Rosina:** I know how to live other ways. But to do that, I can’t be responsible for anything or anyone. And that’s hard for me, because I’m a giver. I’m a doer. I’m a Cancer. I love to take care of people. I love to do gardening, all of that. On the other hand, when I didn’t have that, when I lived in Maui, I took care of a garden. I had an acre that I landscaped with meditation places and ponds. But I could leave it. I opened my house to a communal household, and I gave them all a chore. “Take care of this fountain, take care of this part of the grounds. You have to sweep.” And then I’d go. But I don’t do that when I’m responsible for it. It wasn’t my place. It was someone else’s
place. I didn’t have any debts, I didn’t have any rental. I didn’t have anything. All I did was play.

**Miller:** You have two different kinds of life that you love.

**Rosina:** Yes.

**Miller:** Obviously you have loved and given yourself to this life of taking care of others and working and gardening and so forth. That’s been something you’ve loved. And you’ve also loved not being responsible. And those two don’t fit together very well.

**Rosina:** I don’t know how to blend the two.

**Yalom:** That seemed a very good example of a double-sided reflection.

**Cole:** Excellent example. And what I liked particularly about it, and I think this shows one of the things that we focus on in Motivational Interviewing, is being concise. Bill listens to Rosina, and she talks a great deal about the dilemma of her life. And he comes in and he does a double-side reflection that just really captures the essence of the dilemma. He doesn’t repeat back to her everything that she said. He just comes and he really goes to the essence. And to me, that’s the art of doing a reflection, as well. It was a lovely double-side reflection. This is her dilemma.

**Yalom:** As we said before, it’s back to her.

**Cole:** It’s back to her.

**Yalom:** He doesn’t try to solve it for her.

**Cole:** Exactly, but he really captures the dilemma for her.

**Yalom:** In the next clip, we’re going to see Craig again, the depressed man, and we’re going to see an example of a complex reflection, which, as you discussed a minute ago, is adding some implied meaning into the reflection.

**COMPLEX REFLECTION WITH ADDED MEANING**

**Craig:** It’s also, there’s some kind of failure to take the plunge at various points, I feel like. And maybe still a fear of taking various plunges.

**Miller:** Missed a train somewhere. “If only I had made that train.”

**Craig:** Yeah. Or, given that I didn’t make that train, should I get on the local? For me, of course, it’s still possible to be a dad. And maybe one of the
most easy ways would be to date a single mom. And then I’d have a lot of
that. We shall see. That may still happen. But it would be another big plunge,
and not an easy one.

**Miller:** Something that you imagine would bring you a special kind of joy,
and also it’s a lot of work.

**Yalom:** So in that reflection, he does add what he thinks he hears the client
saying.

**Cole:** Right. Actually, as I listen to that, there are two complex reflections.
The first one is what’s really called a metaphor. Complex in that he says,
“missed the train.” So he’s taken what the client’s talking about what hasn’t
happened thus far for him in his life. He’s shifted away again from the exact
words, and he cast in more of a picture we can see. “There’s that train going
by and I want to get on it but I missed it.” So “missed the train.” And Craig
actually responded to that, his energy actually kicked up a little bit about
that. So again, that’s saying, “I’m getting it.” And in the last part of it, he’s
really capturing, again, what Craig would experience from this. He uses
the word, “joy.” But he also is capturing the challenge that it would be for
him. So again, he’s adding meaning there. Actually, two forms of complex
reflections in that.

**Yalom:** My sense is, when you do that in any form of counseling, it lets
the client know that you’re not only hearing what they’re saying, but
you’re reading between the lines. Then it also helps them continue their
exploration.

**Cole:** Absolutely. It shows that I’m really, really getting it. I’m right here
with you. I’m getting it. I’m not judging you. And anyway, you can hear the
quality of the reflections. They’re provided in a caring, but a very objective
kind of manner. He doesn’t say, “Missed the train,” which is judgmental. He
says, “Missed the train.” And again, we can visualize that. It helps us deepen
our recognition of our personal dilemmas.

**Yalom:** And now, we’re going to one more with Craig and another complex
reflection. But in this case, he’s adding in his awareness to Craig’s body
language.

**COMPLEX REFLECTION ON BODY LANGUAGE**

**Miller:** Simply having a cup of tea and reading a trashy novel is all right,
huh?

**Craig:** Yeach, which I just don’t settle down and do that often.

**Miller:** If you do, then the critic starts getting nasty.

**Craig:** Yeah, or I just don’t take pleasure in it. But maybe I don’t take pleasure because the critic’s nasty.

**Miller:** Because when you talked about it, it looked like there was a little twinkle in your eye about that. It was pretty enjoyable to sit and have a cup of tea and have a book.

**Craig:** It’s more like I wish I could be that way.

**Yalom:** I thought that was a really interesting example because Bill read between the lines, observed his body language, and picked up on the twinkle in his eye, and reflected that back to him, hypothesized about the meaning of that. And the client heard that but corrected him and said, “Well, this is my experience of that.”

**Cole:** Exactly. And that’s what happens when we do a complex reflection. We pick up on what we’re observing, what we’re hearing, how we’re hearing it. And we do, we make that hypothesis and then we send that back. And then, the client has to consider that for accuracy. And the way that Craig responded back is both interest in this, but also saying “I still have a ways to go on this,” which of course would just continue to guide the conversation.

**Yalom:** Yeah, so it seems like a couple points. One, you offer it back, but not as a definitive statement, more as an offering.

**Cole:** That’s right, exactly. “This is my observation. This is what I’m getting,” offered in that way. Then the client has to take that in and consider if that’s really it. And Craig could have responded back by saying, “Yeah, when I let myself do that, I really do like it.” But he just says, “No, it’s what I wish.” So it lets us know where he is. He’s still struggling.

**Yalom:** He could have said, “I don’t know what you’re talking about. It’s just the light coming through the window.”

**Cole:** Well, right.

**Yalom:** So with that, one of the skills, it seems to me, to do that is really to be attending to the client’s process. By that, I mean not the content of the
words, but other process variables— their tone of voice, their body language. And that’s a really difficult skill for many therapists, many counselors to get.

**Cole:** It is a difficult skill. Helping people start to make complex reflections is certainly one of the training tasks that we attend to when we’re teaching people Motivational Interviewing. And sometimes counselors are afraid to do a complex reflection. “What if I get it wrong? What if the client thinks I’m interpreting them? Am I leading them?” They have all kinds of worries about it. And if we lose track of the goal of the reflection, which is, “Am I getting it? Am I understanding it?” and also helping to deepen what we are getting from the client, helping the client deepen their own understanding of their dilemma, of what they’re exploring. Those are the opportunities that we really want to use in terms of forming complex reflections. But it is something that is very difficult for many people to do. So one of the things that we often do in training, or encourage people to do, is to walk around during the day and see and hear what people are experiencing and begin to think, “What would I be going through if I were experiencing that? How would it make sense to me?” And to begin to play around with what a reflection might be with that.

**Yalom:** And, I imagine, also having them practice doing it.

**Cole:** Having them practice that. Exactly. Find a friend. Have a conversation. Listen to what the person’s saying and, rather than reflecting back the words that they say, which we often do, try to reflect back, what is the experience that you’re having? “You’re really excited that your daughter is doing so well in school.” Those kinds of things.

**Yalom:** Now we’re onto the final technique that we’re going to be covering here, which is summaries. Can you say a bit about summaries? What are they? What are they used for?

**Cole:** Sure. Summaries are done when we have heard the client say a certain amount of information. Let’s say they’re exploring the issue of confidence. They’ve said a bit about that, and we’re now going to pull that all together and reflect that back to them. And a summary is a reflection. We reflect that back to them to be able to hear what they’ve said, thus far, again, toward the goal of them continuing on either just by virtue of our summary, or continue on based on our now asking a strategic key question for the client to let us know where to go next. Summaries can be both simple,
they can also be complex. They’re complex when you capture the added meaning. They’re simple when we just reflect back the content of the person has said.

**Yalom:** Okay. So they’re a type of reflection, but they’re more getting a larger swath of what they’re saying and reflecting it back to them.

**Cole:** Exactly, that’s right. You’re kind of bundling up what the person has said. Bill Miller likes to talk about it as, particularly around change talk, gathering up the flowers that the client has given you in relationship to change talk. Pulling that together in the form of a bouquet and handing them back to the client. It’s a lovely thought.

**Yalom:** That’s nice. You mentioned a key question in there, so what is that?

**Cole:** Yes. A key question would be, say, something like, “We’ve talked about four or five reasons that you really want to about making change. And now you’ve actually talked about why you personally need to make those changes. And you’re wanting to really move along that path. So I’m wondering, where should we go next? What would be a good place to start?” Because now I want the client to continue to tell me where we’re going, rather than me falling into the righting reflex and starting to tell them what to do, or me deciding what direction we’re going in. The client needs to tell me. So it’s a part of my guiding to have them let me know where we’ll be going next.

**Yalom:** Okay. A key question.

**Cole:** A key question.

**Yalom:** It’s kind of a process question. “What do you want to do now?”

**Cole:** “What do you want to do now?” Exactly.

**Yalom:** Getting back to summaries, now we’re going to see two examples of Miller working with Barbara, who is a woman who’s struggling with drug addiction.

**Barbara:** I was thinking about going to church and start a new life.

**Miller:** Do you have some background with church? Is that something you did when you were younger?

**Barbara:** Yeah, I used to go to church. I used to be real close to God. And
then I started getting high, and I didn’t go to church no more.

**Miller:** So it was almost like getting high pulled you away from that.

**Barbara:** Yeah. The Devil probably got into me.

**Miller:** Yeah. So what was church like for you? What was good about that?

**Barbara:** I felt good. I felt like a new person. I didn’t get high for about four years. I would just go out and visit my family and visit new friends that went to church. And I didn’t get high. And then one day I was at church, and I got up and left, and I started getting high. And I didn’t know what to do about it.

**Miller:** You didn’t think there was anyone you could talk to?

**Barbara:** I didn’t want nobody to know.

**Miller:** Yeah. You have a secret. Your kids don’t know and you kept it to yourself.

**Barbara:** Yeah, because I’m trying to stop getting high, because when I moved up here on the North side, I got caught four times by the police, and I went to jail.

**Miller:** That must have been a shock.

**Barbara:** That was the first time I’d ever been in jail.

**Miller:** So that was kind of—

**Barbara:** Dangerous.

**Miller:** Yeah. Very dangerous. Wakes you up.

**Barbara:** Yeah.

**Miller:** You sound like church is a good resource for you because it’s another set of people that you liked, and who will help you pull away from the drugs, and give you some other things to do. And you also said it was very important, it felt important to be close to God, and you really felt that. And that kind of went away as you got into using. And you’d like to get back there again.

**Barbara:** Yeah. Because I don’t want my kids to grow up thinking I don’t care about them or anything like that.
Yalom: Any reactions to that?

Cole: When Bill did the summary with her, again, noticing that Bill doesn’t summarize everything she had said, but he comes in and he summarizes those things that she has talked about that will be helpful for her, should she decide to try to get off drugs, which she wants to do.

Yalom: Let’s take a look at one more example.

Barbara: I need partnership.

Miller: The loneliness again.

Barbara: Yeah. Because when I do drugs, it’s like a friend. There won’t be nothing to do, and it would be like a friend. But I want to get my life together and start a new beginning, because I love my kids and my mother and my father and my sisters and my brothers. And my kid’s father, that’s my boyfriend, he gets high too.

Miller: So there’s another obstacle, maybe, that he’s somebody very important in your life.

Barbara: So he can’t help me either because he gets high himself.

Miller: So you need friends who aren’t using to be there for you.

Barbara: Yeah.

Miller: And when you don’t have friends, or when you feel lonely or all alone, that’s when the drug seems like a friend for a while.

Barbara: Yeah.

Yalom: So in this particular summary, Bill summarized her dilemma. He summarized what she needed for herself, in terms of support. He also noted the barriers that came. And he also summarized the real crux of the issue that the she had brought up, which is the lure back into using drugs when she’s lonely. So that was a reflection that was very deep. And it just gives Barbara, then, the opportunity really to examine the issue of loneliness in her life. But again, what I like about it is that Bill is not afraid to say those things. He’s just saying back to Barbara what she has said. But some counselors are very timid about that. And Bill just puts it out there like it is.

Yalom: Puts it out there.

Cole: Exactly. That’s what she’s saying, and that’s where the tension is,
here—for Barbara to consider what it’s going to take for her to make a change.

**Yalom:** She’s obviously in a real difficult situation. He doesn’t shy away from that.

**Cole:** That’s right. We don’t do our clients any favors if we shy away from their difficulties.

**Yalom:** But he also doesn’t, as we see, tell her, “You’d really better quit drugs because your life is going nowhere fast.”

**Cole:** Exactly. You can see in this that Bill’s reflections, his whole interaction with her, has no quality of shaming, blaming, putting her down. There’s no judgment in this whatsoever. But it, again, is very straightforward.

**Yalom:** Right. Well, we can see just from those little samples and from our discussion how complex this whole process is. We’ve covered kind of the basic theory and we’ve seen some examples. But putting it all together in a single session, or a course of treatment, I have a sense that it’s quite a complex practice, even an art.

**Cole:** It is. Well, on the one hand, Motivational Interviewing, to me, is straightforward, in terms of understanding what we’re doing. It is by no means easy to do. And it’s not necessarily easy to learn. It really does require a lot of practice, and it requires a lot of feedback from people who are able to recognize how well a person is doing in learning Motivational Interviewing.

**Yalom:** What are the things that are hardest for people to learn? You’ve mentioned some of them—the righting reflex and complex reflections are difficult. What else?

**Cole:** Many counselors are far more comfortable asking a series of questions. And even when I’ve done training and I have people who are experienced counselors, when they are starting to learn Motivational Interviewing, they recognize how much they rely on questions. And they’re very shocked to learn how many closed questions they actually use. So we’re just not naturally given to doing reflections. That is one of the most challenging pieces for people in learning Motivational Interviewing. It’s also very challenging for people when they’re in roles where they have been taught that they are the expert, that they are to tell the client what to do, like a nutritionist or a dietician, some nursing roles. Many times, people are
taught, “You are to tell the client what to do. You are to dictate a plan.” So it’s quite a shift.

Yalom: It makes sense.

Cole: It makes sense, and it also doesn’t work. If a client comes to me and says, “Okay. I’m ready. Tell me exactly what I need to do,” I’m first going to elicit their ideas. I will come in and I will talk about a recommended course of action, perhaps. But I’m always going to come to the client and ask, “What do you think about that? How’s that going to work for you, and what ways do you need to work with this for it to actually be yours?” I’m always going to stay in that partnering stance. My expertise never has to go away. It’s how I use it.

Yalom: And how about learning to listen to change talk and sustain talk? How are people at learning that, and what challenges does that present?

Cole: I find that that really is a challenge for people. I don’t have any scientific data or studies to back this up, but it seems that when we listen, that we can hear the sustain talk, and we respond to that. But somehow when the change talk starts coming, it’s harder for us to hear that and harder for us to reinforce it. I don’t know if that’s because we’re listening for very dramatic change talk or what it is. But it seems to be harder for people to hear the change talk and to shift strategically and start to reinforce and explore the change talk. So that’s always a challenge in training, always.

Yalom: What would you recommend for people who have watched this and want to really take it a step further and learn more about how to do Motivational Interviewing?

Cole: It’s a great question. I think that it’s important to read the main texts that have been written on Motivational Interviewing and all of those texts are published through Guilford. They have been handling all of the works that have been written about Motivational Interviewing for us. And then, I think people need to do actual training with somebody who has been trained to teach Motivational Interviewing, and going to workshops where they actually learn more about the concepts and, more importantly, are given the opportunity to practice the concepts, get direct feedback about their practice. So you can go to an introductory workshop and what we find is people can do this, can do some practice, and they might increase
some of their skills, such as reflections, listening, capturing that accurately. And if they don’t continue with some continued practice and getting some supervision and coaching and feedback on their practice, that they actually go back to baseline in three to six months. So it’s learning and then it’s practice, practice, practice, and getting feedback. And that’s what allows people to develop proficiency in Motivational Interviewing.

**Yalom:** People are going to have a chance to at least started on that in the next, final chapter of this video. There are some practice exercises, but I want to thank you for taking the time. It’s been a pleasure talking with you. I keep learning about this, and I hope this will be informative to our viewers.

**Cole:** Fantastic. I’ve really enjoyed it.

**EXERCISES**

This sequence will allow you to practice some of the techniques that have been covered previously. You’ll be asked to pause the video, practice what you would say next, and then listen to what the counselor says.

**EXERCISE 1: OPEN QUESTION WITH ENVISIONING**

**Cole:** In this first exercise, we would like for you to practice open questions with the use of envisioning. “Envisioning” means that you’re allowing the client to consider what making this change would be like.

**Miller:** Where do you see the road going?

**Craig:** I don’t know.

**Miller:** That’s part of it, huh? You’re not, not sure where this goes.

**Craig:** I’m still not sure where it goes. It’s not building towards something substantial.

**PAUSE VIDEO AND PRACTICE OPEN QUESTION WITH ENVISIONING.**

**Miller:** How would you like it to be, then? If your life could be more like you would wish it to be five years from now, what would that look like?

**Craig:** Well, I would be much more enthusiastic about what I’m doing.
EXERCISE 2: AFFIRMATION

Cole: Next, we’ll hear Craig continue to talk. And, at the end, we want you to practice an affirmation.

Miller: What other things have you tried?

Craig: Well, I organized a very small, very small Thanksgiving dinner. And in past years I’ve managed to put on pretty good-sized events like for friends at Thanksgiving or Christmas, and done a lot of cooking. And this year I just did something very small, very modest goals. I’m glad I did it.

Miller: And? Yeah?

Craig: And I’m glad I did because, well, the various alternatives are not as attractive.

Miller: Yeah. You do know that, too—that even when you’re in the trench and don’t feel like doing things, to do things that are enjoyable is important, even though it’s not what you feel like doing at the moment.

Craig: Yeah. I went to Yosemite with my parents.

Miller: Ah.

Craig: I was—this was earlier on in the depression—literally like curled up in the fetal position at times. But I pressed on. And now I’m, of course, glad I did.

Miller: Yes.

PAUSE VIDEO AND PRACTICE AFFIRMATION.

Miller: You’re a fighter in that sense.

EXERCISE 3: SIMPLE REFLECTION

Cole: Now, let’s practice some reflections. Reflections are one of the most commonly used techniques in Motivational Interviewing. We’re going to practice a simple reflection. A simple reflection says back to the client what the client has said to you, not repeating the exact words, but shifting them, paraphrasing them, but pretty much capturing exactly what the client has said. We’ll continue to listen to the interview with Craig.

Craig: So anyway. So the sort of acute grief is wearing off and then we’re back to—eventually, I think I’ll be back to my steady state, which is not as
good as I’d like it to be. And I think that’s why these breakups get sort of abnormally hard. Yeah.

**PAUSE VIDEO AND PRACTICE A SIMPLE REFLECTION.**

*Miller:* So if the steady state were a little better, and a little more stable, it might not hit you so hard.

*Craig:* If the steady state were better, if I was enjoying life more.

*Miller:* Yeah.

*Craig:* If life was more meeting expectations, then, then I definitely wouldn’t be as hard hit.

**EXERCISE 4: DOUBLE-SIDED REFLECTION**

*Cole:* Now we’re going to practice double-sided reflections. Let me just remind you what a double-sided reflection is. A double-sided reflection is when we capture both sides of the client’s ambivalence about make change—on the one hand this, and on the other hand that—wanting to end with the side that is in the momentum toward change. We’re going to listen to an interview with Linda, and then we’re going to practice a double-sided reflection.

*Miller:* And life on your own is OK?

*Linda:* Pretty amazing.

*Miller:* Pretty amazing. It’s actually pretty good.

*Linda:* It’s very good.

*Miller:* So I can see asking, “Why would I want to put all this effort into trying to create a relationship here? It may be a lot of work, and it may not work out so well, and my life is pretty good as it is.”

*Linda:* I know, but I miss kisses.

**PAUSE VIDEO AND PRACTICE A DOUBLE-SIDED REFLECTION.**

*Miller:* Wanting two things at the same time.

*Cole:* In this case, Bill was very succinct with his double-sided reflection, just saying, “Wanting two things at once.” Another possibility would have been to say, “On the one hand, you love the benefits of living alone, and on the other hand, you miss some of the rewards of companionship—kisses.”
EXERCISE 5: COMPLEX REFLECTION

Cole: In this exercise, practice making a complex reflection. A complex reflection captures the meaning of the client’s words.

Rosina: When you see your children with the issues that you carry and they’re dealing with and they don’t know, all I know is I’ve been to enough therapy and enough work for twenty-some years, to try to first get them to trust me again and love me, and second, to assist them to see, without judgment, how my daughter functions, my older daughter. How they judge her. And I didn’t sleep all night. I was so depressed that I couldn’t sleep.

Miller: You were seeing yourself in her?

Rosina: I think it’s more not seeing them loving her. Understanding that a parent loves their children no matter what.

PAUSE VIDEO AND PRACTICE A COMPLEX REFLECTION.

Miller: That’s what you’d like to see—acceptance of children as they are.

EXERCISE 6: COMPLEX REFLECTION INCORPORATING VALUES

Cole: Now, practice a complex reflection that picks up on Rosina’s values.

Rosina: There’s never been a divorce in my family. In my era, there wasn’t divorce.

Miller: That was a big deal.

Rosina: My friends that were church people that I’d known all my life, across the street, not to talk to me because the father said I had been excommunicated from the church. My parents didn’t talk to me for a year. I had no one to fall back on except someone I could trust that I would survive, because this was where I was supposed to go. The direction I took was right for me. If it was right for me, it was the hardest thing I’ve ever done. After that, it was easy. And then I faced the life that I didn’t know anything about, the American world, the business world. I had no idea. So I trusted. And so I began to search. I began to read all kinds of books on different religions and psychology, just trying to find a place that I fit. And it’s not the spirituality. I’ve been to retreats and seminars and ten-day retreats. I looked at different therapies, different ways of religion, Buddhist, Jewish, you name it, I explored all of those avenues.
**PAUSE VIDEO AND PRACTICE A COMPLEX REFLECTION OF VALUES.**

**Miller:** There’s something very important for you there.

**Rosina:** Oh, very.

**Miller:** That doesn’t seem to live in any particular religion, but lives in you.

**Rosina:** I believe there’s a higher something that runs our whole world.

**Miller:** That was quite important to you during that difficult time when everyone was shutting you out. That’s all you had.

**Rosina:** That’s what I turned to.

**Miller:** All that you had left, yeah.

**EXERCISE 7: DRAWING ON PAST SUCCESSES**

**Cole:** Now we’re going to shift gears just a bit. In this segment, we’re going to pay attention to the value of probing a client’s past successes to shore up their confidence in be able to make a change. I’d like for you to consider what open question you would ask Linda to help her identify past successes that could be helpful to her with this current challenge.

**Miller:** How confident are you that you could make that change in your eating habits, if you really decided to? That same zero-to-ten scale?

**Linda:** I’m pretty good about other kinds of commitments.

**Miller:** Right. So when you decide to do something—

**Linda:** Pretty much everybody knows it’s going to get done.

**Miller:** It gets done. It’s pretty important, and you’re pretty sure that you could do it if you really made up your mind to do it.

**Linda:** Right.

**Miller:** It’s the making up the mind to do it that’s uncertain.

**Linda:** Right.

**Miller:** I wish I could do that for you, but I can’t.

**Linda:** I know.

**PAUSE VIDEO AND PRACTICE WHAT YOU MIGHT SAY NEXT,**
**DRAWING ON LINDA’S PAST SUCCESSES.**

**Miller:** What helps you to make a change like that? What others changes have you made in your life—there have probably been quite a few—where you put your mind to something and said, “I’m going to do this,” and you did it?

**Linda:** I think a lot of times it’s encouragement and support from another person.

**EXERCISE 8: CREATING MOMENTUM TOWARD CHANGE**

**Cole:** In this next segment, we’re going to give you the opportunity to practice reflections. However, they’re going to be reflections that are of a specific nature. We’re going to practice reflections that pick up on change talk. As you know, in Motivational Interviewing, when the client moves from sustain to change talk, we want to have our reflections pick on that and head out in what we call our forward momentum toward change. You’ll be hearing a number of client statements. You’ll have the opportunity to respond. And finally, we’re going to move into doing what we call a “transitional summary.” In a transitional summary, we pull together what the client has said thus far. We send that back to them in the form of a reflection, which is also a summary, and then we wait just a moment, giving them the opportunity to respond, if they desire. And then we follow up with asking a key question, which is generally a broad, open question that allows the client to tell us where to go next.

**Cole:** Hey, Julie. It’s really good to see you again. We’ve been talking about you managing your blood sugars for your diabetes, and I wanted to follow up on that again today if that’s OK with you.

**Julie:** Yeah. It really hasn’t been going that well. It’s harder than I thought it would be. I know that it’s really important that I do this, and I know that I need to be getting on this program, but I’ve been struggling this week.

**Cole:** It’s a real challenge to make this kind of change in your life, and at the same time, you’re very committed to it.

**Commentary:** Notice how this particular reflection has a sense of moving ahead. It is very different from saying, “This is hard,” which would not have been wrong, but it really doesn’t take us anywhere.
Julie: Yeah. Well, I’ve set an alarm to remind myself to check it every day, multiple times a day, but it seems like every time the alarm goes off, I’m in the middle of something, I don’t want to stop. And by the time I’m done, I’ve forgotten again. And the other thing is that when I’m at work—I haven’t told any of my coworkers that I’ve been diagnosed, and I don’t really want them to find out. So then it becomes this sneaking off to the bathroom and then hiding in the stall to do it. It just feels gross to me. I’d rather not think about it at all.

Cole: This is very complex. There are many parts to it, some of which are just the practicalities of how you get it done, and then there’s the change that you’re having to deal with in terms of who you are and how people might see you. You have some really important concerns for us to work on.

Commentary: Notice how I’m using a reflection that moves the conversation forward, rather than saying, “There are some things that get in the way,” which is not inaccurate, but it really does not help us reinforce the change momentum that Julie has.

Julie: Yeah. I guess so. The other thing is that I’ve never been good at keeping up with routines like this in the first place.

Cole: You’re likely hoping that I have some ideas here.

Commentary: On this, a reflection that would have not really moved us ahead would be to say something like, “You are not certain.” However, I really wanted to pick up on her change talk and help her move ahead.

Julie: It seems like everyone has ideas about what I should be doing here. It seems like every person I talk to about my diagnosis immediately launches into this list of things that I need to be doing, things I shouldn’t be doing, things I’m doing wrong. Suddenly I’ve become this child that doesn’t know how to take care of herself. It’s getting really old.

Cole: Clearly, you don’t need other people pushing you around. You sure don’t need me pushing you around. You need to find ideas that are going to work for you.

Commentary: I could have just said, “You feel pushed around,” which is not wrong, but Julie is telling me that people have been constantly telling her what to do, and I want to make certain that she understands that I’m not going to do that with her as well, that I want to partner with her and help her find
ideas that are her own.

Julie: Well, you are an expert, right? I’m hope that you might have some ideas that might work for me.

Cole: Surely, I’m not going to leave you hanging. I do have some ideas that might work for you. What I can do is talk with you about those ideas, and then we can come back and brainstorm together what you think will uniquely work for you, because it has to be a plan that you can own, that’s going to work for you.

Commentary: The reflection, “You need something from me,” is really one that does not move us in any direction toward change. Instead, I want to emphasize Julie’s change talk, and I particularly want to reinforce her autonomy in making decisions that are going to work for her.

Julie: That sounds good.

Commentary: Now you’re going to practice pulling together this conversation by doing a summary, and then following that with a key question that will allow Julie to tell us the direction that we’re moving in next, thereby reinforcing her autonomy.

[Vignette thus far is repeated.]

Cole: Let me see if I have it right. You’re very committed to being on top of your diabetes, to doing the things you need to do. There are lots of parts to keep up with. You have a very busy schedule, and you also have the concerns about others learning this about you. So there’s clearly a lot for you to take into account in this particular change in your life. So I’m wondering, where do you think we should start?

Commentary: The value of doing a summary first is to pull together what Julie has told us thus far, pull together what the dilemma is, but also to reinforce her momentum, her desire to make a change. The key question allows Julie to tell us what is the most important place to start, so that we’re not making that decision for her. She’s the one that’s directing where we will go next.

EXERCISE 9: PHASES OF MOTIVATIONAL INTERVIEWING

Cole: In this final exercise, you’re going to have the opportunity in this very brief interview to see the four phases of motivational interviewing:
engaging, focusing, evoking, and planning. You’ll have the opportunity to practice all the skills you’ve learned thus far: open-ended questions, affirmations, reflections, and summary. As you work with helping the client with focusing, evoking, and planning. So engaging is really the client-centered process of our work in Motivational Interviewing with clients, and it is basically embedded in the way that we interact and engage and demonstrate interest in the client. So in essence, you’ll be practicing engaging as you practice all of the other phases of Motivational Interviewing.

Thus far, Julie has just been outlining the three things that she’s considering as goals for herself over the next few months. Next, I would like you to practice what you would do to help Julie focus and make a decision about which of these goals is the most important one for her to work on.

Cole: So Julie, I appreciate you being willing to talk for a few minutes today. I thought that we might talk for a few minutes and have you give some thought to two to three of the goals that you might be setting for yourself over the next three to four months, talk about that for a few minutes, and then let’s just see where that conversation might lead us. So I’ll just start by letting you begin.

Julie: Okay. Well, there are a few things that I have been meaning to work on for a while now. One is definitely exercising more. I’m very lazy. And it’s hard to motivate. So that’s one. The other is eating better. I’m aware that I should be cooking more, and I have joined a CSA so I’ve got all these great vegetables that come every week. But I just can’t motivate to cook. I’d rather eat mac and cheese. So that’s another one. And then, let’s see. I should probably be watching a lot less TV. Once I turn the TV on, it’s pretty much impossible to turn it off until I’m wanting to go to sleep. And I’ve got all kinds of other things that I’d like to be doing with my time. But I sit down in my living room and the TV’s right there, and it feels weird not to have it on. It seems all these problems are discipline-related, but it’s hard to just get myself to do the right thing.

**Pause video and practice focusing: help Julie decide which goal is most important for her.**

Commentary: Thus far, Julie has just been outlining the three things that she’s considering as goals for herself over the next few months. Next, I would like
for you to practice what you would do to help Julie focus and make a decision about which of these goals is the most important one for her to work on.

Cole: Actually, you just used an interesting observational word for yourself, that these are all discipline related. You’re talking about doing better with exercise, actually cooking those vegetables that you get, doing more cooking for yourself, and not spending the time on the TV. And all of that goes toward what overall goal for yourself? What would you be hoping to come out with for this? What’s the overall “I’m shooting for this out in the distance for myself”?

Julie: Let’s see. I guess I have this vision of my life as being more intentional. I want to be more in touch with what’s good for me and more in touch with my body. I think that’s been a struggle. I want to feel like I’m taking care of myself better.

Cole: So a value issue for you that has to do with you and your own well being. Focused on that, not any specific problem, so to speak, but what’s valuable to you and how you want to see yourself.

Julie: And there isn’t an actual problem, like a pressing problem. That makes it harder to make any changes, because there’s no gun at my back. I’m not having any health problems or anything. I just have a boyfriend who eats much better than me, exercises, and so he’s always on my case, which doesn’t seem to help.

Cole: Yeah, having somebody else push you can sometimes get in the way. And at the same time, it’s also raising this up to a higher level of awareness for you. And like you say, there’s no smoking gun here, no fate that’s facing you. It’s really something for you to grapple with for yourself.

Julie: Yeah.

Cole: So if you were going to, say, select one of those three areas as a place to start, out of those three, which one would you think that you’d actually want to pay some attention to?

Julie: That’s a good question. I think—They all seem to have equal weight in my mind, which makes it even harder, because then it feels like I should be doing all of them at once. But I guess I would say, maybe, I could see a reason to say cooking better, because I have this food in my house that’s going bad. I don’t like that feeling of wasting, either.
COMMENTARY: Now I would like you to think of one reflection that you would do to summarize what Julie has said thus far, and then I would like for you to think of one open question you would use to help Julie discuss her values in doing this cooking.

Cole: So again, an often common dilemma for us, that everything seems to have equal weight and it’s really hard to decide where to start. But as you’re looking at this, a practical consideration is this great food, not wanting it to go to waste, so that you might actually begin there. So let’s just talk a little bit more about that area, and what your thoughts are about that. Why do you even think it’s important to be eating these vegetables rather than just hanging out with your mac and cheese? What goes into that?

Julie: Well, part of it is definitely I have become aware of the environmental concerns of buying a lot of prepackaged food, creating waste just from buying all that packaging. That concerns me. There’s the fact that that food has all kinds of chemicals in it that I don’t want to be putting into my body, and I don’t want to be encouraging companies to be making food like that. So there are some political concerns. There’s also the fact that it costs more money to be buying unhealthy food, actually, than if I were just cooking healthy food on my own. So definitely the financial consideration is there.

Cole: So I hear the financial consideration, and once again I hear the focus on values, personal values, not wanting to support things that aren’t good for the environment, not wanting to support things that aren’t healthy for you and your body. Those are the considerations that have you taking what might actually be a path that requires more work and more effort in it.

COMMENTARY: I’ve just done a summary. Now I would like you to practice what you would do to help Julie move forward into planning.

Cole: I’m wondering, if you were going to move ahead and try to work more with the healthy eating part using those things that you’re getting from the CSA, where might you start? What might you begin to think about doing to actually get you on that path? What’s reasonable for you?

Julie: Maybe it would be good to start—I can see two options here. One
would be to commit to cooking a certain number of times a week to begin with. Maybe not try to do it every night, but definitely one or two nights, I’m spending a little while cooking. Or I could try just cooking on the weekends and cooking a lot of food that I could eat throughout the week. Both of those sound like they would be good ideas.

**Cole:** Right, you can certainly generate those ideas. So how might you decide which of those two might be the more workable one for you?

**Julie:** I guess you could almost see how they would converge. I could commit to spending a certain number of hours cooking on Sundays and try to make three or four things that then are ready. Then I’m committing to just spending one chunk of time per week cooking, but I get the benefit of it throughout the week. So that’s the lower-energy way to start things, just by committing to one day a week.

**Cole:** Yeah, something that’s going to have value for you, but doesn’t take up the same kind of time of doing it more during the week. That appeals to you.

**Julie:** Yeah. The problem, I guess, that I run into is that I’ll get on kicks where I get really interested in cooking, and I do it for a while, and then I end up making a couple of not-very-good things in a row. And then I just lose all motivation. I’m like, “I really don’t want to eat this.” And I don’t want to spend all this time trying this again when I could be eating something I know I’m going to like.

**Cole:** So having a failure, having a misstep in the recipe or whatever it is, can throw you off track. So let’s just say, again, and we’re going to talk just a bit longer about this, to get some ideas kickstarted for you. Let’s just say that you’d head down that path and you’re doing okay with that, and then you cook something and it just bombs. What might be helpful to you to have that not be the thing that just gets you completely off track?

**Julie:** Well, I think maybe if I had a couple of recipes I know I can do well, that I enjoy eating, I can have those in my back pocket at all times, so it doesn’t have to be—because I get really interested in trying new recipes, and that’s where I veer off track, is when that doesn’t work out. So maybe just nailing down a couple of recipes that I’m already pretty good at would help.

**Cole:** So increasing your competence in a couple of surefire things, and that might help you surf through the things that don’t go quite so well. Okay. So
just as the final question, what do you think you might do next?

Julie: I think maybe I’ll—It’s Friday today, so maybe I’ll spend a little bit of time in the next couple of days planning out a couple of recipes that I’m going to make on Sunday and make sure I have all the ingredients so I can just dive in on Sunday and see how it goes.

Cole: Great. Well, thanks very much for talking. I really appreciate it.

Julie: Thank you.

Cole: You’re welcome.

We hope that you have enjoyed the opportunity to learn more about the core concepts of Motivational Interviewing, and that you’ve enjoyed doing some initial practice of motivational interviewing in these exercises. You may want to go back and practice the exercises again after you’ve learned more about Motivational Interviewing. If you find yourself interested in learning more about Motivational Interviewing, we hope you’ll take the opportunity to watch the remaining videos in this series. You’ll hear more about the methods and the concepts used in working with importance, ambivalence, and confidence.
Video Credits

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Arnold Lazarus
Peter Levine
Rollo May
…..and more

Therapeutic Issues
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Anger Management
Alcoholism
ADD/ADHD
Anxiety
Beginning Therapists
Child Abuse
Culture & Diversity
Death & Dying
Depression
Dissociation
Divorce
Domestic Violence
Grief/Loss
Happiness
Infertility
Intellectualizing
Law & Ethics
Medical Illness
Parenting
PTSD
Relationships
Sexuality
Suicidality
Trauma
Weight Management

Population
Adolescents
African-American
Children
Couples
Families
GLBT
Inpatient Clients
Men
Military/Veterans
Parents
Prisoners
Step Families
Therapeutic Communities
Women