## **Motivational Interviewing Techniques**

## **Paraphrasing Options**

Simple reflection: demonstrating that you understand the meaning of the patient's statements

**Amplified reflection:** reflecting back what the patient has said in a more intense or extreme form so as to facilitate the patient taking the other side of the argument

**Double-sided reflection:** reflecting back what the patient is saying now and some other things the individual has said previously that might highlight the other side of the ambivalence

**Shifting focus:** moving away from an issue about which the patient has said a number of words that seem to indicate little possibility of changing now, and focusing on something about which you & patient already agree or are more likely to agree

**Agreement with a twist:** expressing your agreement with a part of what the patient has said, creating the appearance of being in the same place, however, you emphasize a different aspect of the meaning

**Emphasizing personal choice & control:** explicitly and implicitly stating that the patient is responsible, the one to make & carry out decisions, and that you are available to provide guidance or opinion but not the "truth" or the "answer"

**Reframing:** using the same observations the patient has described to provide a meaning you want the individual to use

## **Developing Discrepancy**

Using patient's language to highlight and uncover the incongruity between what (s)he is doing and his/her goals or values creates the patient's motivation to change.

- 1) Open-ended questions about specific events or concerns
- 2) Open-ended questions about what the patient might be imagining
- 3) Facilitating patient recalling how things were before behavior was a problem
- 4) Facilitating patient to imagine future, both with and without the behavior
- 5) Connecting things patient values w/ the behavior
- 6) Scaling:
  - how patient would like to be (10 being how you would like to be, where are you now?)
  - concerns over present behavior (10 being most concerned, how would you rate your concern over present behavior now?)
  - likelihood of making the change you need to better your life now (10 being I'll do anything)
- 7) Decision analysis: what patient likes/does not like about behavior

Funded by an SBIRT grant from SAMHSA and is available for use as a training tool without restriction. For additional information, visit University of New England's page on SBIRT.