

CHAPTER 24

Learning Motivational Interviewing

You need knowledge and you need skill. Knowledge you can even get just from reading a book. Skill you cannot get from a book—you need to practice again and again.

—PAUL EKMAN

There is no such thing as teaching; there is only learning.

—MONTY ROBERTS

We are sometimes asked how many hours of training are enough to learn MI. In a way that is like asking how long rope is or how many hours of lessons are required to learn to play a musical instrument. Enough for what purpose? What level of skill is needed in a particular context or application? How much learning is required before it makes a difference to your clients? It's not a matter of completing a certain number of hours of training and then you have it. Learning MI is an ongoing process, and more than knowledge is involved. When learning to fly an airplane one may begin with hours of classroom instruction, but ultimately it's a matter of guided practice in the air. With practice and feedback you can become more proficient.

THE VALUE OF FEEDBACK

The feedback piece is important here. One of the better replicated findings in psychotherapy research is that therapists with many years of practice have no better client outcomes on average than those who are recently trained. In contrast, one of the most replicated findings in medicine is the effect of experience. A surgeon who has done a particular procedure 2,000 times is simply better at it than someone who has done it twice: better outcomes, fewer complications and adverse effects. What's the difference between psychotherapists and surgeons? The surgeons get constant feedback. They rarely practice alone

behind closed doors, and when there are complications or adverse outcomes they find out soon enough.¹

As in mastering a sport or musical instrument there are also large differences in how quickly people learn MI. We have worked with people who took to MI very quickly; it was like putting a fish into water. They just seemed to have an intuitive grasp of it, and once exposed to the ideas and examples they quickly developed proficiency. We have also met people who had a great deal of difficulty learning MI. Perhaps they thought that they had mastered it, but after many hours of training and coaching there was still little skill. Both of these extremes are exceptions. Most people develop skill with guided practice, and we have not found any relationship between years of graduate education and the ability to learn MI (Miller et al., 2004; cf. Hartzler & Espinosa, 2011; Naar-King, Outlaw, Green-Jones, & Wright, 2009). Even people with advanced degrees are able to learn it!

Feedback is fundamental for any kind of learning, and immediate feedback is even more helpful. It is difficult to learn archery in the dark. It is hard to learn if you receive no accurate information as to whether your guesses or tries were on the mark. With no reliable feedback it is possible to practice for decades without much improvement in skill.

An advantage in learning MI is that once you learn what to listen for, your clients provide you with immediate feedback. Like a surgeon, you can tell during a session how it's going and what outcome is likely. When learning empathic listening ([Chapter 5](#)) every reflection yields immediate feedback from the client as to its accuracy. When you hear change talk you're on the right track in MI, and clients also quickly tell you when you're going astray. A key is the knowledge that, of all the things clients say, change talk and sustain talk are particularly important signals for what to do next, just as when you strike a key on the piano you get immediate feedback as to whether it was the right note.

Just as there are self-taught musicians there are people for whom this immediate feedback from clients is enough to help them learn MI. For most people, though, just reading about MI or

taking a 2-day workshop is not enough to make a difference in their proficiency (Madson et al., 2009; Miller & Mount, 2001; Miller et al., 2004). This is not unique to MI, but seems to be true in learning new therapeutic skills more generally (Fixsen, Naoom, Blase, Friedman, & Wallace, 2005; Miller, Sorensen, Selzer, & Brigham, 2006). To develop proficiency with a sport or musical instrument people often engage a coach with a higher level of skill than their own to provide feedback and make specific suggestions for further development. One would not say to a tennis coach, “Don’t watch me,” or to a piano teacher, “Don’t listen to me playing.”

Similarly, [coaching](#) in MI needs to be based on direct observation, which is usually accomplished via recorded sessions. It is for good reason that most professions call their consultations “practice,” and like archery in the dark, practice without reliable feedback (literally “private practice”) is unlikely to improve skill. We learned long ago that when supervising therapists in training, the places where we could be most helpful were in regard to what they *didn’t* hear during the session. Consequently, it was insufficient for a trainee to come out of a session and describe what had happened. The problem with “private practice” is that it’s private! As coaches, we needed to be in the room, if only indirectly through audio or video recordings. Even a modest amount of expert coaching can significantly improve MI proficiency (Miller et al., 2004).

A MENU FOR LEARNING

MI is not a single technique but rather an integrated set of interviewing skills. It is possible to think of specific learning tasks that correspond to component core skills of MI (Miller & Moyers, 2006). We think of at least 12 such tasks:

- Understanding the underlying spirit with which MI is practiced: partnership, acceptance, compassion, and evocation ([Chapter 2](#)).
- Developing skill and comfort with reflective listening ([Chapter 5](#)) and the client-centered OARS skills ([Chapter 6](#)).
- Identifying change goals toward which to move ([Chapter 9](#)).

- Exchanging information and providing advice within an MI style ([Chapter 11](#)).
- Being able to recognize change talk and sustain talk ([Chapter 12](#)).
- Evoking change talk ([Chapter 13](#)).
- Responding to change talk in a way that strengthens it ([Chapter 14](#)).
- Responding to sustain talk and discord in a way that does not amplify it ([Chapter 15](#)).
- Developing hope and confidence ([Chapter 16](#)).
- Timing ([Chapter 19](#)) and negotiating a change plan ([Chapter 20](#)).
- Strengthening commitment ([Chapter 21](#)).
- Flexibly integrating MI with other clinical skills and practices ([Chapter 25](#)).

We have not numbered these tasks because they are not necessarily learned in order. Clinicians may come to MI already with well-developed skills in some of these areas. Some component tasks can be learned apart from the others. For example, one might learn to identify change talk in a classroom or by reading. That is mostly a knowledge task, although it is far easier to recognize change talk on a transcript than within the fast-emerging flow of a clinical consultation.

Some component tasks are fundamental, and it is difficult to develop further skills until these are in place. Reflective listening is a good example. In the beginning, one struggles to remember to reflect and to come up with a good reflective listening statement rather than, say, asking a question. It feels effortful. With practice and the immediate feedback provided by the people with whom you converse, forming reflections becomes easier. Then with more practice and good results with clients, empathic listening begins to feel natural. It becomes the default response rather than asking questions or giving advice. You can always fall back to reflective listening, and at worst, you're unlikely to do harm. Then for some it becomes not only easy but a pleasure, a joy, a privilege. While, thankfully, one need not reach this level of proficiency in listening to begin doing MI, a certain level of comfort or naturalness with reflections is important. Until one can comfortably follow a conversation with reflective listening it is difficult to take the next step to evoking,

where one uses the OARS skills in a strategic manner to elicit and strengthen change talk. Similarly, you need to have a change goal and be able to recognize change talk, to know it when you hear it, before you can evoke and respond differentially to it. A reasonable question to ask when learning is, “What would be one good next step for me in developing and being comfortable with the clinical style of MI?”

CODING

A coach’s subjective feedback can be valuable, and there are also coding systems to provide more reliable and objective feedback on practice (Madson & Campbell, 2006; Moyers, Martin, Catley, Harris, & Ahluwalia, 2003; Moyers, Martin, Manuel, Hendrickson, & Miller, 2005). These systems have the merit of identifying specific areas in which practice might be improved. A variety of MI coding instruments can be found at www.motivationalinterviewing.org/library.

Some coding systems, such as the Motivational Interviewing Treatment Integrity (MITI), focus only on the interviewer’s responses, including both global ratings and specific response counts to document intervention fidelity (Hendrickson et al., 2004; Moyers, Martin, et al., 2005). Others code only what the client says, with particular focus on change talk and sustain talk (Glynn & Moyers, 2010). More complex systems like the Motivational Interviewing Skills Code (MISC) quantify both interviewer and client responses and thus permit therapeutic process research (Baer et al., 2004; Daeppen, Bertholet, Gmel, & Gaume, 2007; Moyers et al., 2003; Welch et al., 2003). Coding systems like these require substantial training and quality assurance in order to establish and maintain coders’ reliability. Experienced MI coaches often use coding systems like these and provide feedback from them (e.g., www.mi-campus.com).

It is possible, however, to use simpler strategies in listening to your own MI sessions, which we strongly encourage you to do. In the midst of a clinical consultation the mind can be busy attending to multiple tasks. Listening to the consultation again afterward can reveal insights and patterns that were not apparent

in the initial experience of the session. Besides simply listening to your own sessions, here are some more structured tasks that can help you focus on the process and not just the content of the client's story.

- Count your reflections. Were they simple (basically just repeating what the person said) or complex (making a bit of a guess)? Keep a count of each. When you have trouble deciding whether a reflection was simple or complex, count them in the simple category. One learning goal is to offer more complex than simple reflections.
- Count your questions. Were they open questions (providing plenty of room to respond) or closed questions (short answer, yes/no, rhetorical, etc.)? Keep a count of each. A learning goal is to ask more open than closed questions.
- Count both reflections (R) and questions (Q). What is your ratio of R to Q? Most counselors when learning MI ask far too many questions. A learning goal here is an R:Q ratio of at least 2:1—two reflections for every question.
- Listen for change talk and sustain talk. Keep a count of each and consider the ratio between them. Equal frequency reflects ambivalence and predicts no change, but over the course of an MI session the balance normally shifts toward more change talk. When change talk appears, what were you doing just before it? What in your practice seems to evoke change talk? Remember that change talk often comes intertwined with sustain talk and you may have to listen closely to find it.
- When change talk occurred, what was the *next* thing that you said? Count your OARS responses: Open question asking for elaboration, Affirmation, Reflection, Summary ([Chapter 14](#)).
- Listen for any of your responses that would be inconsistent with an MI style such as giving advice without permission, confronting or arguing with the client, or other “righting reflex” responses. How did the client respond to these?

Don't try to attend to all of these. Pick out one or two that seem important and track those as you listen to your sessions. Try setting a specific change goal for yourself, such as increasing your ratio of reflections to questions, and use these counts to track your progress.