APPLYING MOTIVATIONAL INTERVIEWING FOR STUDENTS IN RESIDENCE

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OUTLINE

• Describe Goals
• Overview of Addictive Behaviours
• Key Motivational Interviewing Topics and Skills
• Practice!
GOALS

1. Develop a better understanding of rates of addictive behaviours among young adults in Canada

2. Develop knowledge of motivational interviewing and behavioural change

3. Develop a better understanding of how you, as student leaders, can facilitate/contribute to behavioural changes
EMERGING ADULTHOOD

- Also known as young adulthood
- Spans ages of 18 to 25
- Period of transition, identity development, instability and self-focus
- Highest rates of addictive behaviours including:
  - Alcohol
  - Other substance use
  - Gambling
  - Gaming
RATES OF SUBSTANCE USE

• The vast majority of university students report never using many hard drugs (range from 91% to 99% depending on the drug).

• Students tend to believe that other students are using substances with fewer than half endorsing that other students never use hard drugs (NCHA, 2013)

• What kinds of problems are you seeing on campus? (substance and addictive behaviours)
RATES OF ALCOHOL USE AND PROBLEMS

• 71.8% of university students are past month drinkers (NCHA, 2013)
• 32% classified as hazardous/harmful drinkers (Adlaf et al., 2005)
• 36.3% endorsed at least one episode of binge drinking (5+ drinks in one sitting) in past 2 weeks (NCHA, 2013)
• 10% experienced alcohol-related assault
• 9.8% experienced alcohol-related sexual harassment
• 16.4% physically injured while drinking in past 12 months
• 32.6% did something they later regretted when drinking (past 12 months)
• 5% reported alcohol negatively impacted academic performance in past 12 months
RATES OF MARIJUANA AND OTHER DRUG USE AND PROBLEMS

• 16.2% used marijuana in past 30 days

• 8.7% used other illicit substances

• 1.1% used Cocaine, 0.1% used methamphetamines, 1.6% used amphetamines, 1.6% used sedatives, 0.5% used hallucinogens, 0.1% opiates, 1.5% used MDMA

• 1.8% said drugs negatively impacted academic performance in past 12 months

(NCHA, 2013)
21.1% said internet/computer use negatively impacted academic performance in past 12 months (NCHA, 2013)

Young adults age 18-24 have the highest rates of problem gambling (Wiebe, 2002)

Internet gambling is increasingly concerning and most popular among adolescents (Elton-Marshall et. al., 2016)

Consequences of problem gambling include financial, relationship, mood and academic difficulties among others
YOUR ROLE AS RESIDENCE STAFF

- Student Safety
- Building Relationships
- Identify Problems and Refer as Appropriate
- Understanding the limits of your Role
- Not intended to be therapeutic - rather to engage and help students think about change and provide resources where needed
- Be transparent about your role with students

How do we do this?
WHAT IS MOTIVATIONAL INTERVIEWING?

- A style or way of being interpersonally with another person
- Collaborative
- Emphasizes Autonomy in Decision Making
- Strengths-based approach

“Motivational interviewing is a collaborative conversation style for strengthening a person’s own motivation and commitment to change.” (Miller & Rollnick, 2013, p.12)
EXERCISE: SPACE COUNTING

• In pairs and facing each other

• When I say go, use your index finger to write in the air numbers 1 to 20 between yourselves
SPIRIT OF MOTIVATIONAL INTERVIEWING

Involves five components:

- Collaboration - a partnership
- Evocation - eliciting information vs. imparting knowledge (not as an expert)
- Autonomy - giving the person the ability to choose
- Compassion - Being empathic (understanding their perspective)
- Guiding - not following or leading

Belief that every person has the ability to move towards best health and the listener’s role is to help bring that motivation to the surface
WHY USE MOTIVATIONAL INTERVIEWING?

• Allows the other person to feel heard.
  ❖ More likely to be open if they feel heard and this can facilitate referrals to appropriate resources/treatment

• Research has demonstrated that MI is useful for a variety of concerns (including addictive behaviours and others!)

• Helpful to get students thinking about change
• Motivation can change (waxes and wanes)

• Ambivalence is normal!

• MI is described as a way of being with another person - not a set of tricks or techniques to get a person to do what you want.

• Learning some communication skills however can be helpful in developing and conveying the MI spirit in your interactions
WHAT MI IS NOT....

https://www.youtube.com/watch?v=aAhA7KfbJgg
WHEN MI IS NOT APPROPRIATE

Disclosures of sexual violence

Suicidal Ideation

When a person is committed to making changes already (i.e., provide resources instead of exploring ambivalence)
RESISTING THE RIGHTING REFLEX

• The Righting Reflex is a natural desire of a person in a helping position to set things right, to reduce harm to the other person

• The Righting Reflex appears as directing or telling someone what they “need” to do or should or should not do

Examples?
DEBATING

Think about the last time you had a debate with someone over an issue and they rejected all of your arguments - what happened?

OR

Think about the last time a person in a position of authority (e.g., parent, teacher) told you there was something you needed to change - what happened?
CHANGE TALK

“I want...”
“I can...”
“I wish...”
“I will...”
“I need...”

Stating reasons for changing

Use reflections and open questions to expand when you hear change talk (you get more of what you talk about!)
SUSTAIN TALK

• Statements about why a person does not feel they can change or does not want to change
• May be interspersed with change talk
  ❖ E.g., “I want to maintain my scholarship but it’s so hard and it’s really easy to get to the casino, have a few drinks and I end up spending the entire weekend out there”
• Frequently may take the form of “yes ... but ...”

Examples:
“I need to stop smoking up, at least for a little while, but it’s hard to say no when it’s offered to me and I really love getting high.”
“I’m so tired of being told about how bad drinking is. I enjoy it so I’m going to keep on doing it.”
EMPATHY

- May be the most important principle in using MI
- Brene Brown [https://www.youtube.com/watch?v=1Evwgu369Jw](https://www.youtube.com/watch?v=1Evwgu369Jw)
MORE ON EMPATHY

• Understanding the other person’s perspective

• Nonjudgmental

• Communicating that understanding back to the person so they can better understand themselves

• Like holding up a mirror for the other person
CORE MI SKILLS

4 Core Skills: OARS

• Open Questions
• Affirmations
• Reflections
• Summaries
OPEN QUESTIONS

• Questions that ask for thoughts and feelings (without suggesting answers).
• Frequently begin with “what,” “how,” or “tell me...”
• Preferred over closed questions (which can be answered with “yes” or “no” or other short response).
• Limit questions asked (do not ask three in a row!)

E.g., “Are you worried about the amount of time you spend gambling?”

Vs.

“What are some reasons to cut down your gambling?”
MORE EXAMPLES OF OPEN AND CLOSED QUESTIONS

Open:
What are your goals for this year?
Tell me about your drinking habits
What’s good about smoking pot?

Closed:
Do you want to quit gaming?
Do you want to do well in your psychology course?
Do you enjoy gambling?
EXERCISE: OPEN QUESTIONS

Select the open questions. Change the closed questions to open questions

• What brings you here today?
• What do you like about drinking?
• Are you feeling depressed?
• Tell me about your study routine
• What time do you get up for class?
• Do you want to talk about your relationship with your boyfriend/girlfriend/partner?
• Do you want my help?
• Are you planning to change your pot smoking?
• How has gambling impacted your life?
• What strategies have been helpful before now to help you feel better?
• Have you tried to stop drinking in the past?
AFFIRMATIONS

• Statements to highlight the positive, genuinely see and acknowledge the good of what the other person is doing or has done.
• Sincerely acknowledging the person’s strengths
• Differ from compliments - are not evaluative
• Affirming statements usually being with “you” rather than “I...” or “I think...” or “I am...”

Examples
• “You are resolved to make changes despite previous difficulties”
• “You are determined to be independent”
• “You care a lot about your friends”
REFLECTIONS

- Active listening (in a specific way)
- Demonstrate you are interested in what the other person is saying
- Maintain momentum in a conversation (ideally towards change)
- Useful in responding to sustain talk and building up change talk
- Phrased as a statement, not a question
- Taking a guess at the other person’s meaning
  - “It sounds like…”
EXAMPLES OF REFLECTIONS

Speaker: “I had a hard time on Monday.”
Listener: “Monday was a difficult day.”

Speaker: “I could make some changes, study more, but what’s the point?”
Listener: “You’re not sure if studying more would make a difference.”

Speaker: “I enjoy gambling and it’s not like I’m hurting anyone, it’s my money.”
Listener: “You don’t see any harm in your gambling.”
“I want to maintain my scholarship but it’s so hard and it’s really easy to get to the casino, have a few drinks and I end up spending the entire weekend out there.”

“I’m so tired of being told about how bad drinking is. I enjoy it so I’m going to keep on doing it.”

“I’m not too worried, I can stop smoking pot whenever I want to.”

“I know I could do things differently but I’m not really sure what that would look like.”

“Going to the casino helps me de-stress after a long week of classes.”
SUMMARIES

• Similar to reflections but longer.
• Typically pulling together different aspects of a conversation.
• Can be used as a transition point in the conversation.
• Should include pieces of the conversation that reflect ambivalence but also propel the student forward - towards change (i.e., reflect change talk).
ELICITING CHANGE TALK

What are some difficulties you have had with X (e.g. drinking, smoking, gambling)?
What are some reasons to make this change?
Why do you want to make a change?
What are benefits of changing?
How would you make this change?
What would be your first step?
Ask about goals and values (how does X behaviour fit with goals and values?)
SCALING QUESTIONS

Helpful to elicit change talk

Example:
“On a scale of 1 to 10, how confident are you that if you chose to change X (e.g., gambling, alcohol use etc.), that you could change? With 1 representing not at all confident and 10 meaning extremely confident?”

“Why did you choose a 5 instead of a lower number like a 2 or a 3?”

“What would it take to move from a 5 to a 6 or a 7?”
A NOTE ABOUT ADVICE GIVING

Advice giving is not totally out of the question in MI, but the delivery of advice is important.

Asking permission allows the other person to retain their autonomy. E.g., “I’ve got some ideas, about how we can work on this issue, would it be alright if I shared them with you?”

“Would it be alright if I made a suggestion?”

→ Emphasis is on choice and student’s autonomy
VIGNETTES + PRACTICE

Split into triads with two scenarios each

One person is role playing the student
One person is role playing the residence student staff
One person is the observer who can provide feedback and take notes on the OARS tracking form

You will be cued prior to switching roles
ADDITIONAL RESOURCES

https://www.youtube.com/watch?v=ZxKZaKFzgF8
MI 3 book

UTM Health & Counselling Centre:
905-828-5255
www.utm.utoronto.ca/health

Residence Counsellor:
(905) 569-4455
www.utm.utoronto.ca/housing/current-residents/residence-counsellor

Good2Talk:
1-866-925-5454
www.good2talk.ca

Peel Addiction Assessment and Referral Centre:
(905) 629-1007
www.paarc.com
THANK YOU