



Paul Burke Training Group

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Beyond training: Looking at learning MI in a whole new light!

Thoughts on Improved Practice (TIP) #1605



You are invited to take Paul's Sometimes "Less is More" Quiz!

Directions: Read each client statement (below). Then, review each of the two possible helper responses to the statement from the right-hand column. Finally, ask yourself, which response is likely to be more helpful in moving the client's thinking forward? Notice whether the option you chose has more words, or less! (You can complete the scoring guide at the end of the quiz to see how MI consistent you are!)

When working in the Engaging process, reflections serve to let the client know that you're listening – and that you understand what your client means – deeper than just their words. (Deeper reflections of meaning are "complex reflections" because they go beyond "simple" understanding of what your client is saying. Complex reflections show complex understanding of what your client means, or is implying.

*Interviewing for the purpose of enhancing motivation requires going beyond "simple reflecting". M.I. involves considerable skill with strategic reflection. That's because good reflections serve to help your client reflect upon her/his own thinking. Getting good at composing reflective statements requires practice, beginning with making decisions about how best to give your client back the more important part(s) of what they are saying. In M.I. we try not to give back everything the client says. A more advanced skill involves making decisions about what to leave in – and more importantly, what to leave out. In that way, **when it comes to the amount of content in a reflection, sometimes "less is more".***

Paul's "Less is More Quiz"

So the client says:	And you respond by reflecting:
Example 1. "Sometimes I don't even know where to start! I mean, it's crazy. Somebody's gonna have to come in and wave their magic wand and get me on track here! I have to see a doctor and get an appointment with a specialist. I don't have time for any of that because I just got a new job and they don't like the idea of people taking time off work for medical stuff unless it's a total emergency. Now they're telling me I have to quit smoking on top of it all. The doctor says if I don't quit I'm headed for	Option 1: You feel like you're going in circles here. You have problems with your heart and the doctor says it is getting pretty serious. She says that you need to quit smoking and she has even recommended a group program to help you with that. The problem is that the smoking group is offered clear across town and you ride the bus. There's part of you that isn't exactly sure how your smoking is connected to you heart issues, but you might be willing to try such a group if you had a



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<p><i>disaster with my heart. I don't really see that, to be honest. I mean I get how smoking can screw up your lungs, but I think fat would be a bigger deal when it comes to your heart. Anyway, they want me to go to this group meeting once a week and make a plan for quitting smoking. How's that supposed to happen when I work 'til 8 every night and I ride the bus and the smoking meetings are clear across town. It's too much. It's driving me nuts. I have too much on my plate. Especially with the new job. There's so much I have to learn there and I feel like I'm going in circles with all of this.</i></p>	<p>realistic way of getting there. On top of all of that, you have to figure out a way to get back to your doctor so you can arrange an appointment with a specialist and that isn't going to be easy with your new job. You've got so much on your plate, and you're just not even sure where to start.</p> <p>Option 2: You'd like someone to step in and offer some help here.</p> <p><i>[This reflection spotlights the client statement that "somebody's gonna have to come in and wave their magic wand and get me on track here"]</i></p>
<p>Example 2. <i>"I don't know how many times I'm going to have to learn this same lesson! It seems like I've tried to make this change at least 1000 times and now I'm back to square one again. It really gets me down. Some people just seem to have a much easier time with this. They just put their mind to it and they do it and it works the very first time. They must plan it out better than me. Not me. I have to learn the 1000 ways that it doesn't work before I get it through my thick skull. I always start off with good intentions and then, over time, it just all seems to fall by the wayside. I wish there was some way to just quit thinking about it and "just do it" like the Nike ad says. Why can't I be a "just do it" person? Why do I have to be a "here's how not to do it" person?</i></p>	<p>Option 1: You are frustrated because there is a pattern to your experience here that seems to involve going around and around and around with this – but never quite getting the outcome you want. You envy those people who manage to set a goal and just stick to it. You'd like to be more like them. For you, it's a matter of needing to think about it less and putting more emphasis on action and on just doing it. It's not about thinking – it's about doing. Your intentions are solid, but something keeps happening and you end up back at square one.</p> <p>Option 2: You're clear that good planning is essential here"</p> <p><i>[This brief statement highlights what the client has said about "planning it out". Planning then becomes the topic of the conversation, substituting for the client's heavy emphasis on complaining about her "falling by the wayside". Calling attention to the need for planning, instead of the client's constant "backsliding" is an example of strategic reflection skills at work!"]</i></p>
<p>Example 3. <i>"I'm really in trouble here – or at least I'm pretty sure I am. I don't know for sure, but I think so. My big toe on my left foot is numb. It's been going that way for a few months now. I know it's because I'm not keeping my sugars down. I keep forgetting to take the pills and I don't test very much anymore. I know my blood tests are going to come back showing that I'm not dealing</i></p>	<p>Option 1: You haven't been taking very good care of your diabetes. You haven't been taking your pills and monitoring your sugar levels the way you know you should. Now you're worried that the numbness in your big toe may be related to that and it has you scared. You're saying that you aren't sure if the problem with your toe is related to your problems with managing your sugars. It makes you</p>



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with this well. My A1C is going to be way too high when those tests come back. I know it. I dread seeing the Doctor about it. He is just going to chew me out again. He warned me about this. He's gonna say "I told you so". Then I'm going to get a big lecture. I just hate it when he does that, but I need to know what's going on with my foot. This could be a major deal. I don't see him as often as I'm supposed to, because I don't want to get the big lecture about eating better and staying on my meds and doing my follow-up appointments and all that. But – sometimes a person just has to bite the bullet and face the music. I know I should do better. Man, I hope my foot is ok. I shouldn't really put this off any longer. Sometimes they have to amputate if it's bad enough. I wish I had taken this more seriously a year ago. What do you think I should do?

wish that you had taken this more seriously in the past, but you dread going back to your doctor about it now. You think that he is likely to give you a good tongue-lashing about your problems with self-regulation. You have missed several appointments with him and he isn't going to be happy about that either.

Option 2. "You're asking what I think, so I'll tell you. Frankly, I think it would be best for you to listen to yourself on this one - and heed your own advice here, because I think I agree with you. You're saying that you're really in trouble with your diabetes and that you need a medical opinion on this. You're saying that it's going to be hard to face your doctor about it, and you know that it's time to bite the bullet and face it. Even though it will be a bit hard for you, you know you need to get in to see your doctor very soon."

[The Helper assists the client to hear only those statements that reinforce the need for an action step. The Helper also points out that the call for such action is coming from the client himself which supports the client's autonomy.]

Example 4. *"Gosh it would be nice if I could fit back into my wedding dress again someday. I've been thinking about that a lot lately. I felt so good the year I got married. That is the size I'd love to be again. I looked great, but I also felt great. I could move better, and I walked taller somehow. I think it effects the way you feel about yourself. I just had more pride in myself back then. I had confidence. I didn't worry about what other people thought of me because I knew what I thought of me and that felt nice! Now, I have these big love handles. Actually, they're more like grab bars! I don't want to get a muffin top. I've seen women who have these big rolls that roll right over top of their belts and I don't want to end up like that. And my arms – holy smokes – I'm get flabby arms. They bounce. They jiggle when I wave. It's gross.*

Option 1: Your weight is really starting to become a concern for you. Especially the weight around your middle. And it sounds like the weight on the backs of our arms is also worrying you. You see other overweight women and you worry that you could end up like that if you are not careful. There was a time when you felt a lot better about yourself. You even went so far as to say that you had pride in your appearance when you were thinner. You knew you looked great and you felt much better and, in general, you just had a lot more confidence then.

Option 2: You're crystal clear about your goal here.

[Of all the content that could have been reflected here, the MI Helper chooses to boil off everything and condense the issue in order to bring the focus to the concept of "your goal". A wise choice.]



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SCORING:

Score 3 points for every "Option 1" you chose.

Score 2000 points for every "Option 2".

INTERPRETATION OF SCORES:

Scores less than 8000 points indicate a need to practice with listening deeply - for the essence of what the client is saying. Low scores also suggest the need to boil away all the "soup" so you are just left with the meaty bits in the bottom of the pot! Sometimes, we need to give back only the meat of what the client is saying so that we can avoid bogging the client down in the details. Often, the details get in the way. *(Remember what I always say in the training: It's also a lot less to remember if you only have to listen for the substance and not the detail).*



Less
is more

Until next week ... "keep learning & keep practicing!" (They're both the same thing!)

