

# Motivational Interviewing For Pain Management

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# What Is Motivational Interviewing?

- A goal-oriented, patient-centered counseling style that enhances motivation for change by helping the patient clarify and resolve ambivalence about a particular behavior.
- The goal of Motivational Interviewing is to help pt realize that a particular behavior does not fit with broader goals and values.
- Create cognitive dissonance between where one is and where one wants to be.

# Motivational Interviewing Background

- Developed in the late 80s for problem drinkers
- Incorporated factors contributing to long-term compliance with treatment and active ingredients of effective brief counseling

# Factors that Contribute to Long-Term Compliance

- Feeling that behavior change is a personal choice
- Feeling that behavior change is important and consistent with pt's values and goals
- Having a positive relation with clinician
- Having adequate self-confidence about the ability to make a behavior change

# Motivational Interviewing Assumptions

- Motivation is a state of readiness to change, which may fluctuate from one time or situation to another.
- Motivation for change can be influenced.
- An empathic clinician is more likely to bring out self-motivational responses.

# What Motivational Interviewing Is NOT

- Motivation is a stable personality characteristics
- Unless pt is motivated, the is little one can do
- People are inherently motivated to resist change
- Direct confrontation is best way to deal with denial

# Qualities of a Good Motivational Clinician

- Respect for individual differences
- Tolerance for disagreement and ambivalence
- Patience with gradual approximations
- Genuine caring and interest in pts

# Motivational Interviewing in Pain Management: Possible Behaviors of Focus

Physical activity level

Weight

Endless search for magic bullet

Misuse of pain medications

Smoking

Alcohol abuse

Illicit drug use

# Stages of Change

- Pre-contemplation
- Contemplation
- Preparation
- Action
- Maintenance

Relapse and recycle

# Precontemplation

- Characteristics
  - Not yet considering the possibility of change
  - Does not actively pursue treatment; Problems identified by others (e.g., physician, spouse, parent)
- Treatment Goals and Strategies:
  - Provide information or feedback to raise problem awareness & increase perception of risk

# Types of Precontemplators

*Reluctant precontemplator.* Inertia or lack of information prevents the person from being fully aware of a problem. A goal is to raise awareness.

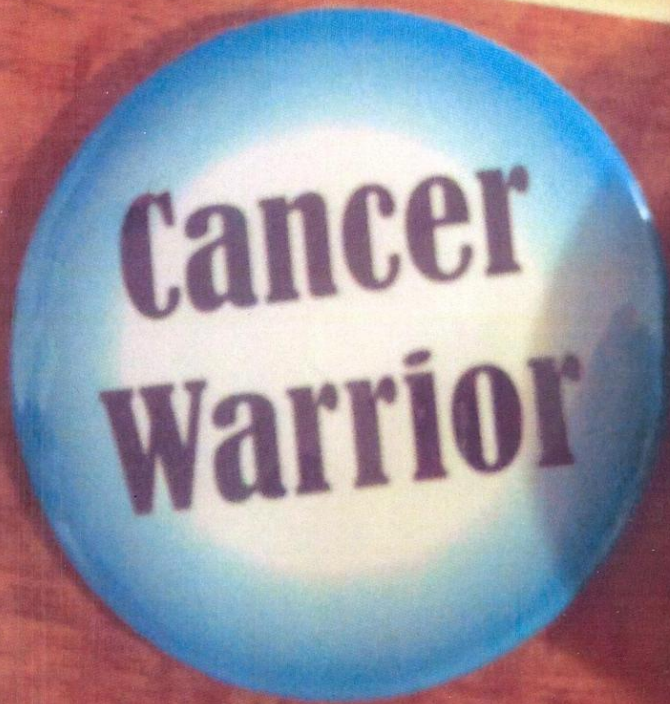
*Rebellious precontemplator.* A heavy investment in the problem behavior or in controlling a situation makes the person actively resistant and often hostile. Goals are to reduce resistance and provide choices.

# Types of Precontemplators

## cont.

*Resigned precontemplator.* A belief in the inability to change the behavior. Goals are to instill hope and explore barriers to change.

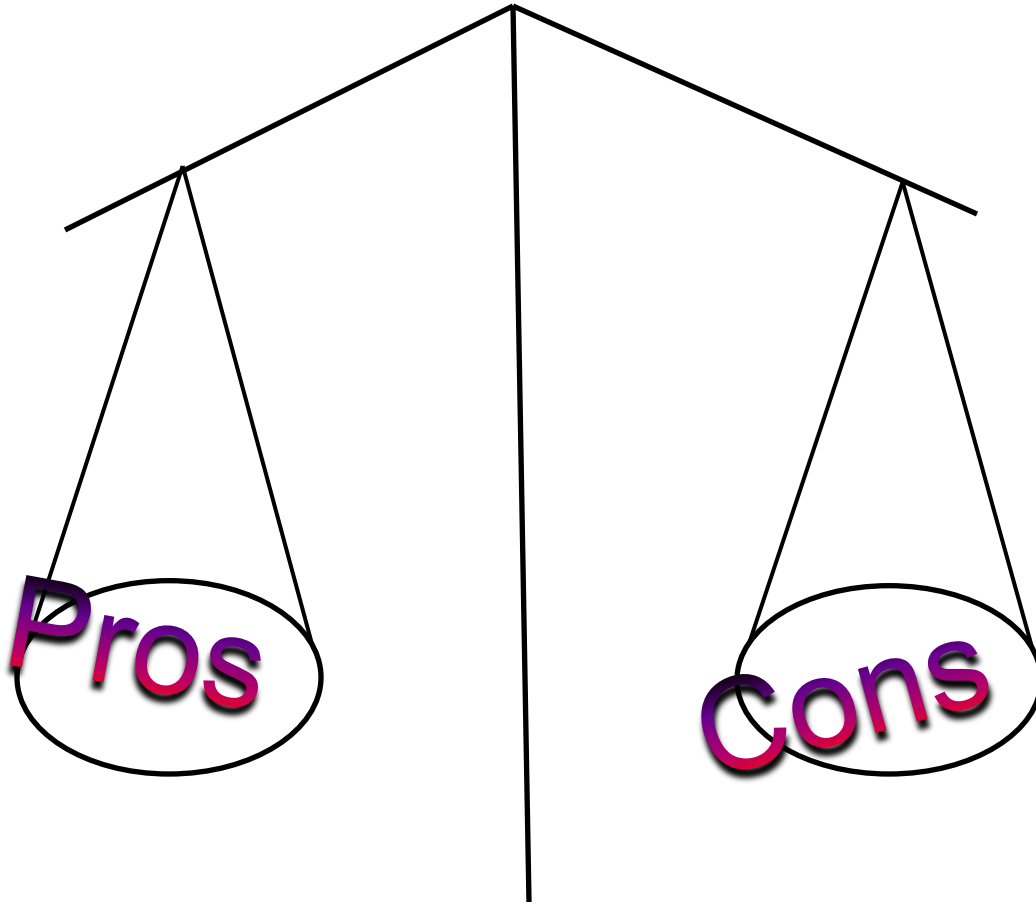
*Rationalizing precontemplator.* A determination that there is no problem, the odds of personal risk are in his or her favor, or the problem is really someone else's. Goal is to offer double-sided reflections. (“You are doing everything you can to fight this disease, yet you think that a little indulgence can't hurt you.” )



# Contemplation

- Characteristics:
  - Considers change and rejects it
  - Might seek information and/or ask for consultation
- Treatment Goals:
  - Tip the balance in favor of change
  - Elicit reasons for changing & not changing
  - Strengthen confidence for change

# Decisional Balance



# Preparation

- Characteristics:

Ambivalence is decreasing in favor of change

Modifying behavior in preparation for further change

- Treatment Goals:

Reinforce motivation for change

Help problem solve

# Action

- Characteristics:

Actions taken to bring about change

- Treatment Goals:

Help identify necessary steps for change  
and helpful resources

Identify potential barriers

# Maintenance

- Characteristics:
  - Maintained behavior change for at least 6 months
- Treatment Goals:
  - Affirm commitment and efforts to change
  - Inquire about benefits of change
  - Help to identify high-risk situations and develop strategies to prevent relapse

# Relapse and Recycling

- Characteristics:
  - Engaging in previous behavior can occur during preparation, action or maintenance stages
  - Feeling discouraged about ability to change
- Treatment goals:
  - Assure that relapses are normal and can be learning experiences
  - Help avoid becoming discouraged, demoralized
  - Assist in renewing determination and confidence for change

# Healthful Behaviors







## Suggested Reading

DiClemente, C.C. & Velasquez, M.M. (2001). Motivational Interviewing and the Stages of Change. In W.R. Miller & S. Rollnick Motivational Interviewing. (2<sup>nd</sup> Edition) New York: The Guilford Press

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