



Motivational Interviewing as a Nursing Intervention to Promote Behavior Change

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Introduction

Motivational Interviewing (MI) is a brief behavior change counseling technique used frequently in the mental health field. Questions remain about its utility for providers without psychological backgrounds. Nurses are ideal candidates for using MI since of all health care professionals; they have the most significant patient contact and frequently work with patients to achieve lifestyle changes. In the NIH-funded RCT Diabetes Nurse Case Management with Motivational Interviewing for Change(DYNAMIC), registered nurses were taught to use MI to change self care behaviors in high risk Type 2 DM patients. Nurses received MI training over a period of 6 weeks. The training curriculum also included topics on clinical management. MI micro skills and principles were supplemented with ongoing monthly audio tapes for review of actual patient visits , BECCI scoring and discussion.

Methods

Phase I:Planning

- A curriculum team of experts in MI,nursing,medicine and therapy created an outline of critical content for the curriculum.
- Videotaping was to be the evaluation strategy used so that training segments could be later reviewed.

Phase II: Use of Curriculum for Training

- Teaching strategies included lectures, experiential activities and team building activities during downtime .
- An ongoing part of training was the nurses' response to MI and how they felt about an intervention that challenged conventional medical approaches to patient education and communication.
- Challenges the nurses faced were the difficulty in shifting between MI and medical topics.

Phase III:Evaluation of training

- Upon completion of the training, nurses participated in a focus group to provide feedback on the curriculum and training process.
- Written evaluations were also obtained after each unit was taught and daily journals were kept by the nurses

Phase IV: Use of MI in clinical practice

- Nurses typically saw patients for an hour, approx. every 1-3 months.
- Visits were about changing self care behaviors related to diabetes along with diabetes education and review of clinical labs.

Conclusions

- Nurses found MI as a useful adjunct to traditional clinical management in helping pts with behavior change.
- This curriculum was effective in teaching the nurses key MI skills.
- The most challenging aspect of translating MI into clinical practice was shifting between traditional data gathering and clinical management, to MI.

Curriculum Topics

Topic	Content
The Basis of Behavior	Biological, Psychological, Maslow's Hierarchy of needs.
Why motivation matters	Tradition vs. MI, grafting on psych skills to medical skills.
Micro skills:	Open ended? affirmations, reflections, summarize
Principles of MI	Roll w/resistance, express empathy, develop discrepancy, support self-efficacy

Role of Nurses	We help people achieve health, Issues of adherence. Communication
Changing behavior	Prochaska model
Overview of MI	What does or does not motivate patients
Intro to Mi	Key concepts and theory. "Spirit of MI"
Why MI works	History, evidence based practice and research
Clinical Application	Psychological vs. physical health problems
Understanding MI mindset	Body language, non-judgmental, client driven
Getting ready to help patients change	Create a relationship, identify target behavior, reduce resistance. Identify change talk
Action steps	Plan the when and how of change
Promoting self efficacy/be real	Empower patients, self disclosure, your reaction to MI
Nursing Considerations	No pure MI, Use intuition, MI is grey no black and white. Safety first.
Adapting MI to health care	Shifting between guided care and task oriented. Working with a depressed patient.