

AUDIO TRANSCRIPT

GUIDING PEOPLE TOWARD CHANGE: THE SPIRIT OF MOTIVATIONAL INTERVIEWING

This FREE HRC webcast, which aired on February 25, 2010, provided insight into the philosophy and foundation of Motivational Interviewing (MI). The presenters discussed the benefits of incorporating MI into your organization and services. Ken Kraybill, HRC Training Specialist and Steven Samra, HRC Recovery Specialist, present.

Hello, good morning and good afternoon. Welcome to today's webcast, "Guiding People Towards Change." We'll be getting started in just a moment. We've had an unprecedented amount of people interested; we're just working out a couple technical bugs before we get started.

Okay. Thank you everybody for hanging in with us. Again, I want to welcome everyone to today's webcast, "Guiding People Towards Change." We are incredibly excited at how many people are interested in today's webcast. We are planning to re-air this live webcast next Thursday, March 4 at 1:00 Eastern Time Zone to accommodate anyone who is unable to make it to today's webcast. My name is Kristen; I'm the HRC project director. I would like to thank you all for joining us. Motivational interviewing is a person-centered approach that can lead people to make significant changes in their lives. The practice of MI creates kindness with skill. Today we will explore MI and how to embrace this spirit. The Homelessness Resource Center is funded through the Center for Mental Health Services within the U.S. Department of Health and Human Services. Before we get started I would like it take a moment to show you our website, it's showing on your screen now. You can access it after the webcast at www.homeless.samhsa.gov. You will find frequently refreshed content on our home page. These features lead you to additional resources to help you do your work every day.

Just this past weekend we launched new features. Here you can see a new section called "Need Help Now." We heard

visitors wanted access to helpful resources in their areas. You can click on your state for immediate access to 211, state departments and coalition resources. Another new feature is the blog "Voices From the Field." We know so much of this work is about people and relationships. We wanted to bring a human face through this blog. Also on the home page is a new area called "Features", here we will highlight announcements about funding, policy changes and resources to help you do your work. An important goal is to connect people in the field. You can create a personal profile that will allow you to follow peers, offer comments and rate resources. Now you can integrate your profile with Facebook, Yahoo and Twitter. This will help to broaden your contacts and share information with your community members. You can also stay up to date with what your friends are doing. Another feature is that it's easier than ever to share resources with other services. By clicking on "Share This" you get an icon, now you are a few clicks away from sharing. You can register to become a member at any time by visiting our home page and click on "Log In" or "Sign Up" at the top of the screen. On our website you can also find information on conferences, trainings and webcasts or search our library or topic pages to find over 8000 helpful resources.

Another helpful resource is the health information network. You will receive up to the minute information about grant opportunities, new resources and campaigns and initiatives. You can also order free reports, brochures and training resources by visiting the website. There's also a mental health and substance abuse treatment locator. Make sure your program is

included in the listing by calling or emailing. I would now like to make a couple of logistical announcements.

All participants are in listen-only mode. Please type questions into the Q & A. Materials will be available on our HRC webcast resources topic page on the HRC website, accessible through the Training tab. Just a reminder that we will re-air the webcast March 4 at 1:00 for anyone who has difficulty today.

Now I would like to introduce our presenters. Ken has been working in the health, behavioral health and homelessness arena for the last 27 years. Ken has developed various curricula, resource guides and workshops to inform and equip others. He is a member of the national motivational interviewing network of trainers and works as a training and technical assistance specialist.

Recently, Steven joined the team. He spent 30 years in and out of homelessness. Steve also serves on the board for the Nashville coalition for the homelessness and is a staff writer for change.org. At this time I would like to turn it to Ken and Steve. Shortly you should be able to see the slides on your screen, as well. Ken?

Thank you. Over the past few weeks Steve and I have been calling forth the spirit of MI to get to know it better. Today we want to share with you a bit of what we've discovered. You will hear us referring to motivational interviewing as MI today. I learned more about it and tried it out and I found that it resonated deeply within me. It made a lot of sense. It was consistent with my values, it provided a useful framework for practice and it worked. Clients were more ready, willing and able to continue. I have been continuing to hone my skills and have also tried to help equip others in using this approach. Steve?

Thanks, Ken. I'm a formerly homeless addict. I was introduced to MI in the mid 90s. I contacted this counselor after thinking about the approach, who I haven't spoken with since 1998. He was using MI indeed. It was an introduction to me of someone embracing a servant's heart. His approach and the counseling I received was the single biggest factor in my overall recovery. To me, MI is the bridge in which the servant's heart is able to link another connection with another human being.

I would like to share a story. This is a story of a gentleman that I worked with last summer. I first met Ted as he endured his third winter homeless in Tennessee. He was approached about getting pellets to control rats around the campsite. I knew that he was often fearful and withdrawn. I spent months cultivating a relationship. I wanted to refer him to our team, anytime I mentioned coming into the agency for assistance he

would withdraw and become suspicious. I felt I was beginning all over each time this happened. It was frustrating because we connected most every other time. In the summer I spotted him hunched down digging. I watched, and then saw him pull something from the dirt, brush it off and hold it up to the light. It was an old glass medicine bottle. He showed off his newest find. When I showed interest he became talkative and explained that the camp was on an old dumpsite. He showed me his collection. It removed me from the service provider role, and allowed him an escape. It placed me alongside him as a friend. Ted took me behind his tent, lifted a tarp and showed me all sorts of bottles. He had done research on many of them and knew they were valuable. I asked him if he was interested in selling them. He said yes, we listed them on eBay and Craig's List. One day he arrived with light blue corked bottles and was lining them up on my desk. The agency psychologist saw them, she was drawn to them, and she was a collector of them. They became connected by their personal love. The psychologist's meeting with Ted reviewed the reports being written. It didn't take long for Ted to obtain a diagnosis, start a regimen and receive benefits. All of this occurred because we were able to remove ourselves from the professional provider role and join with Ted as a human being with similar interests. It allowed the conversation to move gradually to the difficulty of surviving on the street. When we were able to recognize Ted as a person and accept him in his circumstances without judgment he became ready to explore the idea about changing.

Thank you, Steve. What an amazing story about the spirit of MI. By the end of today's webcast we would anticipate that you will be able to do the following: describe the spirit of MI, and to become familiar with the metaphors of MI spirit; explain how it looks in real life; and explore your own practice. At this point we invite you all to take a poll. Please click on the answers that apply to you. Please take a look at the screen if you would, and reply to the following question. To what extent would your clients say that you -- believe they know what is best for themselves, help them to recognize their own strengths, want to help them solve their problems in their own way, am curious about their thoughts and feelings, you help guide them to make good decisions for themselves, you help them look at both sides of a problem, you help them feel empowered by your interactions with them.

I'm looking here at the screen as you are voting. We're seeing a mix of responses. It looks like many of you find yourselves in that nearly always, or much of the time area, which is terrific to see. Some of you are acknowledging pretty rarely is it that these are the responses from clients. This gives us a snapshot. Thank you for participating. We will move on. This gives you a sense of our baseline, if you will.

A little background: Let's just talk about what the definition of MI is, and how it's evolving. The concept grew out of the substance abuse treatment field and was described in an article in 1983. The author was interested in trying to figure out what works most in treating people with substance abuse disorders. Clients tended to resist the manner in which treatment was being done to them in the past; it de-motivated them to change.

I would add, I found this degrading and offensive. The stressful nature of many of the sessions often caused such anger that I left the sessions with an intense desire to use.

Good case in point, thanks. With the publication of a book in 1991 readers were introduced to a helping conversation. The authors described how it was more than the words, but also the spirit or style of the counselor. A second edition was published in 2002, it further refined the approach, and it spread to other areas beyond addictions. MI is now recognized as an evidence-based practice. It's demonstrated to be effective with people with acute health issues, people in the correction system. The definition has been evolving. The traditional definition is a directive client centered style for eliciting change by helping clients to explore and resolve ambivalence. A collaborative person centered form of guiding to elicit and strengthen motivation for change. MI is a way of helping people talk themselves into changing. All of these definitions express the essence of MI, collaborative, evocative and empowering.

What is it that we mean by "spirit"? I'm not sure what comes to your mind. Perhaps it conjures up something of supernatural. For others your mind may have gone to alcoholic substances, cigarettes. In school you were to have spirit to inspire your sports teams. Or maybe you listened to "smells like teen spirit." Sometimes we talk about spirit of the law, something that infuses the words of the law and gives richer meaning of it. Whatever it conjures up we hope that you can be here with us in spirit today.

Let me talk about what spirit is not. Steve, maybe you can comment on what your experience has been in your homelessness experience when you have encountered people that lacked the spirit of MI.

Ken, I have seen homeless service personnel do everything from elicit confidential information and then use it against the person, to telling a survival man that he would go to hell for drinking because he had been saved and then relapsed. Later that day he almost attempted suicide. I have also seen individuals threatened with resource withholding. I have spoken with workers who have written people off because they were frustrated that an individual didn't change enough or fast enough to meet their expectations. Talk about adding pressure

to a person.

Indeed. Let's look at some differences between MI and some more confrontational approaches. MI is in one sense confrontation, it's not between the counselor and the client, it occurs within the client. When there is discrepancy between what the person says they value and their actual behaviors. The MI counseling style is quiet and gentle. It's not flashy; it doesn't knock your socks off. We're not talking Dr. Phil here. The MI style doesn't seem all that impressive to the casual observer. Don't hold your breath for an MI-based reality TV show anytime soon. The proof is in the outcome, more aggressive strategies sometimes guided by confronting denial pushes clients into making changes for which they're not ready and push them away. What are the warning signs that you are not being MI consistent in your interactions? If this sounds familiar for you, you might need to take a remedial course. For example, you mind yourself arguing that the person has a problem and needs to change. Or you feel the need to impose a label -- you are an alcoholic, you are depressed, you are in denial. Or you might take on an expert stance leaving the client in a passive role. Or you offer advice or prescribe solutions without actively encouraging the person to make his or her choices. Or you do the talking and explaining and provide the reasons for change. You want to reinforce the importance of following your advice with the consequences of not following -- such as withholding assistance. This violates the spirit of MI and tends to increase client resistance; they are less likely to move in the direction of change. When interacting in the spirit of MI client resistance tends to diminish, the likelihood of change is much greater.

Another way to think about these contrasting approaches is to compare the standard approach with MI. The standard focusing on the problem, a paternalistic relationship, assumes that the person is motivated, focuses on advising, warning and persuading, patient ambivalence is seen as denial, goals are prescribed, and resistance is met with arguments and correction. MI is collaborative; it matches the approach with the person's level of readiness, and emphasizes a personal choice and autonomy. Ambivalence is seen as a normal part of the change. Goals are set collaboratively and a person is given a menu of options.

What is the spirit of MI? For purposes of our discussion today we are speaking of the spirit of MI as the vital essence or energy of MI. Spirit is what brings MI to life. As William Miller noted, MI without spirit is like a song with words but no music. Spirit is not something easily defined or measured, it takes us into the realm of mystery. We sense that spirit is real and present; we can't put our finger on it. I take a certain delight that MI is technique and mystery. There are some things

within my control like using MI techniques in the spirit of MI to the best of my ability. Yet there's plenty beyond my control. I can influence, but can't change the other. I can't know the choices they will make, but I can plant seeds. A healthy dose of humility helps in MI.

We invite you to participate in an exercise now.

That exercise is up, here we go. If you would take a few moments and think back to a teacher or mentor from your youth for whom you have a great deal of appreciation. Please check as many of the characteristics on your screen that applies to this person. We will see what you all come up with collectively. Take a few moments to do that if you would.

Quite a few are weighing in on -- "learning was made interesting and fun", "encouraged to think creatively", and "showed genuine interest in me". A number weighing in "listened to me when I was frustrated". Not many votes for the idea of providing -- pointing out the person's limitations. A few people on "helped me speak to come out of my shyness". We see that people are -- the kind of characteristics are related to showing genuine interest in receiving people, believing in them, encouraging to think creatively, they made learning fun and interesting. These are the same attributes that describe the qualities of someone exhibiting the spirit of MI. This is an easy short hand way of remembering what it's like to be the recipient of the spirit of MI, and how we want to be with others. Let's take a look at some of the specific characteristics of MI and the spirit of MI. One of the things we know is that motivation in MI is elicited from the client and not imposed from without. It is the client's task to articulate and resolve his or her ambivalence. The counselor's task is to facilitate expression and guide the client towards a resolution that triggers change. Direct persuasion is not an effective method for resolving ambivalence. Trying to talk people into changing is not all that helpful. It is tempting to be helpful in that way but it is likely to backfire by increasing resistance. The counseling style of MI is quiet and eliciting. In MI, the counselor is directive in helping the client to examine ambivalence, directive in the sense of a guiding style. Readiness to change is not a client trait; it's a product of interpersonal interaction. Denial is seen as feedback regarding the counselor behavior. The relationship in MI is more like a partnership than being an expert or recipient roles. The meaning of the word companion comes from the Latin come, which means come and bread. When we share food it implies a level of safety and comfort.

A few words about hope, this is such a relevant issue. We work with persons who are living with the trauma and uncertainty imposed by past and current relationships, homelessness, and mental and physical health problems. It's not surprising that

they lose the sense of hope. They lose hope in hope itself. We know that without hope people are unlikely to make significant changes in their lives. Some convince themselves they don't deserve to have hope that anything will ever change.

Ken, it is here that power of the spirit of MI needs to flow from the provider to the client by refusing to give up on them. If we refuse to give up on the individual we provide a lifeline of hope, of spirit, of belief that change can be achieved. We carry their hope for them.

Indeed. We become hope lenders for people. We believe in them when they can't believe in themselves. It's not uncommon to listen to someone's story of recovery and they will say something like I was able to make these changes because someone believed in me. It was because I was able to borrow hope and belief from someone else when I couldn't find it within myself. One of my favorite quotes says there is nothing about a caterpillar that suggests that it will turn into a butterfly. We must be able to see people for who they can become. This is the spirit of MI at work, to see people for the strengths and inner beauty they possess, and to help people see it for themselves.

Ken, having been trained in MI a couple of years ago I was excited to add this tool into my toolbox. There is nothing else we have that can elicit such a positive impact so quickly. When I moved from the street to behind a desk last year I began performing intakes, using MI is difficult because it is time-consuming. I think many of us in office settings are overworked and short staffed and have minimal resources. More and more grants are tied to outcome. My point here is that although MI is the preferred method of interaction, the fact is that we may be hindered, prohibited, from spending the necessary time for true MI engagement.

I think you are right, Steve. These are real life challenges, not to be taken lightly. I would say in response that even though these are the challenges that we face around time and pressure and needing to meet outcomes. I think it's still possible to be MI consistent in our attribute and style. That can be difficult. A well placed question or reflection can have the effect of provoking someone to see or think differently about something. This is worthwhile and may pay dividends down the road, it might set off a chain reaction towards change. Earlier we mentioned the spirit could be summarized as collaborative, evocative and empowering. How do your clients know that you are embodying the spirit of MI? If asked, how would they describe your style? To me collaborative is about regarding the relationship as a partnership, each has expertise and wisdom -- to work or labor together. The shape of a collaborative relationship is side-by-side, not face-to-face. Face to face is a

shape that can be confrontational or intimate, neither of which we are attempting to achieve. The term interviewing depicts collaboration in my view. Interviewing at its best is about two people looking at something together. The term evocative is a term that we don't use with a lot of frequency. One definition is stimulating memories from the past. MI attempts to draw out that which is deep inside a person, a person's story, what they care about most, their values, the trauma, their hopes and dreams and more. It's not about seeing someone as a blank hard drive that needs to have lots of data installed, but as a hard drive already filled with a lot of life experience of data, much of which must be retrieved and revisited. Empowering relationships are ones in which the importance of autonomy, choice and options are recognized and respected. For most people experiencing homelessness this is stripped away. MI affirms the ability to choose and guides and assists them in meeting needs and gaining confidence.

I had an experience with Willie. Willie often refused to sleep at the mission. One day in the winter he arrived at my office cold and depressed. We chatted for a while. We talked about the pain and misery of sleeping outside, the uncomfortableness of the ground. It was a collaboration of misery. I respected his opinions. I drew out over time why the mission was such a difficult place for him. He provided some excuses, but said that they had a low tolerance for intoxicated guests, but said that he needed to be drunk to sleep there. As our conversation progressed I really believe I empowered him by asking whether he had considered other options. We revisited this internal conflict often. He was able to take charge of the situation himself. I think that was a real influential moment. He decided to enter a 28-day treatment program. I'm giving you a very condensed version of the story.

Thanks, that's a great example. At this point we like to offer you a few metaphors. We think may be helpful and relevant for you. Hopefully you will find them useful. It's also likely that you have other concept that speaks to you about the spirit of MI. We invite you to share them with us during the time that will come following our presentation.

This is a story from mental health chaplain Craig Rennebohm. Everyone has a story. Our stories are neither right nor wrong, they're our stories. Some of us can tell our stories with an unclouded memory, clarity, and a realistic understanding of where our journey is heading. Some of us find telling our story is difficult. Mental illness, intoxication, injuries can all deprive us of telling our story. Inviting another to share his or her story can be a nonthreatening way to develop a picture of a person's situation. A willingness to share our own story helps to build common ground. We end where we began; as we share our stories over time hopefully we're enriched. At best I have been

able to add a little something to another's story, some hope, concrete help, encouragement, they have added something of their courage and humanness and their experience to my story. Thinking about this the previous interactions with counselors had always taken this traditional route. Courts were intervening on my behalf. They would tell me what I needed to do. In the mid 90s I had the pleasure to interact with a new counselor that collaborated with me and validated my self-worth. He initiated conversations that allowed me to arrive at my own observations. I don't ever recall him providing me with any answers. This collaboration lent support and friendship to me, even though I was considered by society at the time a bad person. Before him it was much more common to find professionals telling me what they believed would fix me. This counselor was my first introduction to the concept of motivational interviewing, of radical loving care and of a servant's heart. I have since come to realize after working in the field that the most successful providers seem to be those who are inherently approaching their communication in this framework.

Thanks, Steve. The idea of story telling and listening to stories and drawing it out is one concept we think is useful. Another notion is that of hospitality. Here I'm borrowing from Henri Nouwen. We know homelessness is a sense of estrangement, a sense of not belonging. People become separated from activities, relationships, a sense of place and purpose. They become strangers. The longer homelessness persists the greater this becomes. Hospitality is defined as creating free and friendly space for the stranger. It is an invitation to a relationship. It provides a welcoming presence. A person in the midst of homelessness can experience a sense of being home in the context of this relationship. Hospitality comes with no strings attached; it does not pass judgment or make demands. It provides space in which a person can explore one's own situation. It invites the telling of one's story. It provides the fertile ground from -- fertile ground of which seeds of hope can be sewn. Hospitality cannot be rushed. It requires time, patience and kindly persistence. It sees the big picture.

I would like to talk on care and the servant's heart. The phrase 'to care' finds its roots in 'to lament, to grieve, to experience sorrow, to cry out with.' I'm very much struck by this. We tend to look at caring of haves towards the have notes. Still when we ask ourselves which persons in our lives meant the most to us we often find that it is those who have chosen to share pain and touch our wounds with a gentle hand. To care means to be present to each other. From experience you know those that care for you become present to you. When they listen, they listen to you. When they speak, you know they are speaking to you. When they ask questions you know it is for your sake and not for their own. They accept you on your own terms. They encourage you to take your life seriously. Our tendency

is to run away from painful realities or change them as soon as possible. Cure without care makes us into rulers, controllers, it prevents the real community from taking shape. Cure can often become offending instead of liberating.

Thank you, Steve. Just to summarize these are three concepts that we believe are consistent with MI.

I would like to talk about a key ingredient that I think is important for exercising the spirit of MI. It's often overlooked. This is the matter of self-care. I found it requires me to be centered and grounded. We need to bring a sense of inner-calm and strength. This can be quite difficult in the midst of distractions of the workday. The practice of MI requires us to be responsive. Reactivity comes from within us that is fear-based and about defending ourselves. Responsiveness comes from that place within us that is mindful, calm, present in the moment and able to see the big picture. The spirit of MI is responsive. When we are responsive we are inviting others to see themselves in a new light.

Martin cautions against trying to do too much and being pulled in too many directions. It robs us of the root wisdom that needs to inform our conversation and activity. Violence is a strong word, I have to see that my own stress has caused me to cutoff or interrupt conversations, to assume that I know what somebody means. These are all violations or small acts of violence that hinders our effectiveness. We need to be practicing self-care and learning to self-manage taking on too much. This requires us be proactive in living our lives in balance. Unfortunately I have no formula for self-care, nor am I particularly very good at it. Yet I'm mindful of how much it makes a difference.

At this point we invite you to take some exit polls. Jason will bring up these polls in a moment. We'll ask you to take a look at them and weigh in on your rating. Based on everything that you have heard today and your own thoughts and experiences how important is it to you that your clients would say that you know what is best for yourselves? How important is it that your clients say that you help them to recognize their own strengths? That you want to help them solve their problems in their own way. That you are curious about their thoughts and feelings. That you guide them to make decisions for themselves. That you help them look both sides of a problem. I should note this is adapted from a tool previously created. I'm seeing here that for virtually all of you it's very, very important that your clients see you in these ways. That is a hopeful outcome that we've had.

We want to move to a second poll now. How confident are you to be able to enhance your MI spirit and skills as you

work with clients so your clients would say that you believe that they know what is best for them? Are you very confident? Confident? Mildly? Or not at all? That your clients would say that you help them recognize their own strengths? That you want to help them solve their problems in their own way. Your clients are curious about your thoughts and feelings. That you help guide them to make good decisions for themselves. You help them look at both sides of a problem. And that you help them feel empowered by your interactions with them. Again, I'm watching the polling results coming in. It's gratifying to see that many of you have a significant amount of confidence. Some of you are acknowledging that you are not quite so confident and perhaps this provides you with some impetus of ways to look at your level of skill in your practice. Thank you for that.

Let's move to the next slide. We now want to just very briefly look at what's next.

Thank you. I wanted to say quickly thank you to everyone who gave a little bit of their busy day today. We are very grateful – thank you very much. We would also like to offer a reminder that the spirit and techniques do get easier with repeated use. I have found that could be really true. It may not always be done perfectly. Each time one works in the framework the approach becomes more natural, convincing and appropriate. Ken, I think you have just a little bit left to share. Thank you very much.

What we're showing on the screen now are resources that we think are very helpful and have been to us in our own MI learning journeys. We leave these to you. Of course there are many, many more resources out there. We recommend that you go to the motivationalinterviewing.org website. But also take a look at some of these resources available to you. With that I will turn it back to Kristen.

Thank you. We do have a few questions from participants. We will take a few moments to address those. The first question that I have is whether or not you should consider using MI as a conflict resolution tool. Somebody gave the example of dealing with somebody who might be in a shelter and perhaps is intoxicated. Is MI something that could help you in a situation like that?

I can take a first cut at that. I can attest to the fact that I have used MI spirit and techniques in conflict resolution with my own children. They are now grown. They've turned out reasonably well; I like to think it worked. MI is a sort of conflict resolution tool from the stand point that if it's used with both individuals to interview to take a look at what the problem issue is, to hear each other's concerns and points of view, to

elicit the feelings, and to lay that on the table. My experience has been that when using the skills to draw people out rather than jumping to a consequence, it empowers people to see not only their role in the situation but to really be able to better understand what the other person's experience was in the conflict. The question also asks about somebody who is intoxicated. That can complicate matters, of course. I don't think the fact that somebody has been using a substance rules the possibility of a meaningful conversation, that is left to the judgment of the person engaged with them. Steve?

I would agree. It's very difficult to gauge whether or not -- the whole idea is to avoid resistance and find a way to come to an answer. Sometimes -- I don't think you can rule that out with anybody who is intoxicated. But at some point if a person is so intoxicated that it's difficult for them to think clearly enough to do that, then, I think you have to rely on judgment. I have used it as a conflict resolution tool when people are aware. I think it works wonderfully.

Great. Thanks. The next question that I have has come up a couple of times. Some of the concepts that you have talked about today such self-disclosure, companionship are sometimes in conflict with what some counselors have learned about boundary setting. What advice do you have?

Ken, if you will let me respond.

Yes, please.

One of the things that as an outreach worker and consumer who have experienced both styles, I think it's really hard to build engagement and trust without at some level establishing some kind of a friendship there. You know, the time it takes to do full engagement and reach mutuality I am not sure that you can do this without forming at least some kind of a human bond that mimics friendship at the least. It's the nature of the work that we do. That it is often needed to build the trust needed to engage in terms of street outreach. I think it's a valuable piece of the engagement process. If you have a friendship then I think the only thing that really is important here is that you are careful about setting your own boundaries within that friendship. There's no difference to me in the way that I remain within the parameters of my agency's protocols. I can still develop a friendship with people on the street.

That's a great response, Steve. I will try to add a little bit to it. The questions that came in around this are very good ones and very pertinent. In the homelessness arena when working in outreach and trying to engage people there's all kinds of dilemmas that come up including self-disclosure and this idea of companionship and how we interact with people where we

go, what we say, what do we accept from someone if they offer us food. There are oftentimes clinic-based boundaries that don't apply to being out there under the bridge, or whatever that is. That said, we clearly need to be very healthily bounded. Our way of being with people mimics friendship, sometimes it will be misunderstood by them and we have to clarify. If I become too rigid the message that I leave is that people think I don't want to get to know them or be near them. I have kind of -- someone once talked about the incidence between crossing boundaries and violating boundaries. I do think there's a gray area in there. Sometimes we might cross boundaries that we might not cross in other settings. There's never a place to violate boundaries, of course. This gets more complicated when we have former consumers who are -- like you, Steve -- who are out there providing care and service now.

There's no doubt about that. Again, I think it's, you know, part of the relationship that you've established with somebody coming from a consumer/provider perspective there is this self-disclosure and this instant connection and this feeling that we've shared something that builds credibility, trust and respect. It is the nature of MI and radical loving care and the servant's heart that we reach out to people in care. That doesn't mean that I have to violate a boundary, or compromise my ethical principals. It just means that I'm relating to a person on a level a little deeper than a case to be dealt with and then move on to the next one.

I would just add, I think one of the reasons that I so endorse the MI approach is it puts us in a healthy and helping relationship with people naturally. One of the biggest violations often times that we commit is when we seek to help people by imposing that help on them. I have been fond of saying that some of the people that scare me most in this business are those that want to help. I think people understand what I mean by that. When we work in an MI way we are literally respecting the boundaries by showing genuine interest in the other and what they're about, rather than imposing ourselves.

Great. Thank you. We've received questions about what kind of adaptations do you need to work with youth that may be homeless?

There's some blank silence.

Sorry, Ken, letting you field that one.

Thanks, Steve. I start with the basic belief that youth are human beings. That may seem obvious. But sometimes it doesn't seem so. At one level I think the principals and the spirit of MI will apply to youth. What does come up is youth may or may not be emancipated legally. They may or may not be capable of

making good choices for themselves. In terms of adaptations and using MI, I would say this is true with others that have severe impairment cognitively. We need to recognize that the MI is not the approach to take in some cases. There are times when we have to take charge in situations. Some of those times is when there's an emergency, when there's blood flowing, if somebody is in a coma. With youth I think that we have to kind of rise that fine line between clearly helping to empower youth who often times feel dis-empowered because of their age and their homelessness status. At the same time use a pretty guiding approach in that I think -- maybe it's just a matter of really establishing a good strong bond and being able and willing to offer advice and see if they will allow you to walk with them. That's sort of the best in the spur of the moment.

I think I will just let that sit right there. Nothing else I can add.

Great. Perhaps the last question that we'll address is if somebody on today's webcast is interested bringing MI to their practice what are their best first steps for doing that?

One of the first things I would recommend is going to the motivational interviewing website. You will find a document that describes what the different steps are of learning MI. That's one aspect of the answer. There are step-by-step approaches that we have found useful in teaching MI to folks. That's done best through someone who can guide and facilitate learning to teach principal and spirit of MI and focus in on the core techniques. One of the key elements in MI is to use the skills to do something called eliciting change. It seems the two main areas that are the most effective in helping people change are to establish a strong relationship of trust and safety, and to get the person to talk about change. That said, there are people who are trained in MI who are doing training all around the world. There are people listed on the website that I mentioned who train; you can go to each state to see their names. There are a lot of people who provide that training. We do that through the Homelessness Resource center, we also do a fair amount of training for the PATH programs. You could also contact the Homelessness Resource Center; we might see what we could arrange.

The only thing I would add to that is I did original training with you, Ken. And just walked away from that impressed, it resonated. I don't want people -- one of the most confusing things for me was trying to get my arms around the terminology. I was out there doing street outreach. It just was something that I didn't want to throw a bunch of terms out there and have that somehow be confusing. The reading that I had done and the follow-up stuff on websites and journals and information -- a quick Google search will bring up a ton of information. It really is something that is fairly simple. It seems very natural

once you start doing it. Like anything, practice makes perfect.

I would also add that there are many people who believe in their heart of hearts that they are practicing in an MI consistent manner. The research would suggest that's not always the case. Agencies need to think about setting up an initial training and lots of coaching, finding a champion to help guide and coach, refresher courses. This is a continuing educational process of learning this skill. Once you get it, it seems to flow naturally, it's not something that people initially pick up and just take off with it. It's pretty different from our usual way of helping. All of that to say, it does take a certain level of commitment and having your work reviewed and evaluated by others.

For me it was the incredible training that I got from you that first time around.

Yeah, yeah, thanks, Steve.

Thank you, both. I would like to remind everyone to please visit our website. You can find lots of information there, including information on MI. For those of you who may have missed our earlier introduction of the website, you can start a profile, access resources and get information about events and training. Materials from today's webcast will be available through our HRC webcast resources topic page under the HRC websites training tab within the next couple of weeks. We are planning to re-air this next Thursday, March 4 at 1:00. This will be an exact re-run. It's just a repeat for anybody who was not able to make it through the webcast today. In a moment you will be sent to a brief survey. Please take a moment to complete the questions; your feedback helps us to serve you better. I would like to thank our presenters, Ken and Steve, and all of you for taking time out of your day to be with us. Thank you everyone, have a great day.

[Event Concluded]