

Draft version

Motivational Interviewing for Social Work: Motivation, Change Talk & Positive Outcomes

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Motivational Interviewing (Miller & Rollnick, 1991) is a way of talking with people about change that was first developed for the field of addictions but has broadened and become a favored approach for use with a wide variety of populations in many different settings (Burke, Arkowitz & Dunn, 2002). It is in kinship with the Strength-based approach which has been transitioned to child protective services (Turnell & Edwards, 1999), Child Welfare (Berg & Kelly, 2000) and case management efforts with youth and families (Clark, 2001). This article will suggest several benefits for the importation of Motivational Interviewing into Social Work practice.

This article posits seven reasons to consider the Motivational Interviewing approach:

Why would Social Work staff want to use Motivational Interviewing in their day-to-day work?

1. It can help Social Work staff get back into the “business of behavior change.”
2. It suggests effective tools for handling resistance and can keep difficult situations from getting worse.
3. It keeps the staff from doing all the work, and makes interactions more change-focused.

Interactions are more change-focused when the staff understands where change comes from. Change-focused interactions place the responsibility for behavior change on the client. Motivational interactions create an appetite for change in parents by amplifying their ambivalence.

4. Motivational Interviewing will change who does the talking.
5. This approach will help prepare clients for change.

Ask questions that raise interest.

6. Motivational Interviewing changes what is talked about.

Eliciting “change talk” (self-motivational speech).

7. Agency staff can enforce court orders and deliver sanctions without leaving a motivational style.

Lying and deception

Addressing violations and sanctions

1. It Can Help Staff Get “Back Into The Game” Of Behavior Change

Historically, motivation has been viewed as a more-or-less fixed characteristic of clients. That is, a parent usually presented to a NGO agency with a certain motivational “profile” and until they were ready to make changes, there was not much you could do to influence his chances. Under this model, the social work staff becomes an enforcer of the court’s orders or the agency rules and regulations, but not necessarily an active participant in the behavior change of the client. One staff described his role:

The parents (defendant), in consultation with their lawyer, negotiates for the consideration of case management services (and conditions) in lieu of more extreme measures (child removal or continuation of foster care, etc). In our initial meeting, and throughout our work together, I tell the parents what is expected of them and make it clear what the penalties will be should they fail to comply. We have regular meetings to verify that they are making progress on his conditions and I answer any questions they might have. If the parents do not comply with court orders or show poor progress on their conditions, I see to it that the court is notified and appropriate sanctions are assessed. Throughout the process, the mandated client is well aware of the behavior that might end up with child removal (or a continuation of out-of-home placement), and if more extreme measures end up occurring, it was their own behavior that got them to that point.

Reflected in this statement is a staff person who is essentially cut out of the change process, except as an observer. However, recent evidence suggests there may be quite a lot that a staff can do to influence a family's chances of successfully completing Social Work programming. Motivational Interviewing places staff back in the "business of behavior change."

2. It Suggests Effective Tools For Handling Resistance And Can Keep Difficult Situations From Getting Worse

Since motivation has been viewed more like a fixed client trait, it has been thought that if clients enter Social Work departments displaying little motivation, then the best strategy is to attempt to break through the parent's denial, rationalization, and excuses.

You got a problem.

You have to change.

You better change or else!

Space prohibits a review of the many studies (Miller & Rollnick, 2002; Hubble, Duncan & Miller, 1999) that find a confrontational counseling style limits effectiveness. One such study (Miller, Benefield and Tonnigan, 1993) is telling. This study found that a directive-confrontational counseling style produced twice the resistance, and only half as many "positive" client behaviors as did a supportive, client-centered approach. The researchers concluded that *the more staff confronted substance-involved clients, the more the clients drank at twelve-month follow up*. Problems are compounded as a confrontational style not only pushes success away, but can actually make matters *worse*. Although many staff rightly object, "We're Social Work staff, we're not therapists!—our job is to protect children and enforce the orders of the court," this claim only serves to highlight the need for strategies to help staff get back in the game of behavior change.

Other staff shy away from a heavy-handed approach, using instead a logical approach that employs advice or reasoning.

Why don't you just...

Do you know what this behavior is doing to you?

Here's how you should go about this...

Unfortunately, both of these approaches can end up decreasing motivation. When these methods fail to begin behavior change, staffs will ramp up their energy and begin to push—only to find the client pushes back. Staff escalates the confrontation or reasoning, only to find the client has escalated as well. Locking horns creates a frustrating spiral that satisfies neither. Research finds that when we push for change, the typical client response is to defend the problem behavior.

"You've got a problem" / "No, I don't"

"Why don't you...." / "That won't work for me"

"You better change or else!" / "Take your best shot!"

We clearly don't want to create a situation where the client is only defending the "don't change" side of the equation. Part of the equation involves using known techniques to draw out more positive talk, while the other part of the equation is having a collaborative style where clients feel more comfortable talking about change. For instance, research suggests that characteristics of the staff person—even in a brief interaction—can determine the motivation, and subsequent outcome, of the client.

It is important to remember that there is no set personality style for a Social Work client. They are all different as they enter our agencies and offices—dissimilar experiences, situations, values and temperaments. Consider the colleague who offices next to you. If all you might hear from clients visiting this neighboring office would consist of arguing, resistance and conflict, then the sensible conclusion would be this discord is not due to the clients. Since all clients are different, for a majority of client to show a certain behavior (resistance) then it would have to be the result of this staff members style of approach.

3. It Keeps Staff From Doing All The Work, And Makes Interactions More Change-Focused

Interactions are more change-focused when the staff understands where change comes from

Staff trained in Motivational Interviewing can turn away from a confrontational style or logic-based approaches as they become knowledgeable of the process of behavior change. Many in Social Work and NGO services believe that what causes change are the services provided to the client, whether that involves treatment, the threat of punishment, advice, education or "watching them" and monitoring their activities. These conditions and services represent only part of the picture—and not necessarily the most important part. Research finds

that long-term change is more likely to occur for *intrinsic* reasons (Deci & Ryan, 1985). Often the things that we assume would be motivating to the client simply aren't. Thus, motivation is, in part, a process of finding out what things are valued and reinforcing to the individual Social Work client.

Change-focused interactions place the responsibility for behavior change on the client.

We use an attractive (and accurate) phrase when training the Motivational Interviewing approach, "When Motivational Interviewing is done correctly it is the client who voices the arguments for change." So, how does the staff do this? The first step in getting the client thinking and talking about change is by establishing an empathic and collaborative relationship. Staff can watch and listen to find out what the person values and if their current behavior is in conflict with these deeply-held values. Motivational Interviewing calls our attention to this key idea:

It is discrepancy that underlies the perceived importance of change: no discrepancy, no motivation. The discrepancy is generally between present status and a desired goal, between what is happening and how one would want things to be (one's dreams, hopes or goals).

If there is a rift between what one values and current behavior, this gap is called "discrepancy." It is within this gap that the building materials will be found for amplifying *the client's own reasons for change*. When working with a parent who see no problem with their harmful or neglecting behavior, it is essential that staff have the skills to create an "appetite" for change. Creating this appetite for change involves creating ambivalence. Summoning ambivalence is a central skill set in Motivational Interviewing.

Motivational interactions create an appetite for change in clients by amplifying their ambivalence.

Motivational Interviewing assumes a certain degree of client ambivalence (I should change, but I don't want to). They literally feel two ways about the problem. To consider the Stage of Change theory (Prochaska & DiClemente, 1983) some Social Work clients will enter our agencies in the precontemplation stage, seeing their problem behavior as "no problem at all." A few more enter agency services in the preparation or action stage, having acknowledged the problem during the first appointment and needing only minimal assistance to begin change efforts. Throughout this process, ambivalence is an internal battle between "I want to do this very much, but I know that I really shouldn't." This pull in two directions generally lies at the heart of compulsive, excessive behavior. The majority of parents already have both arguments within them—a side that wants to be rid of the problem (pro change), and a side that doesn't believe change is possible or beneficial (stay the same).

Staff have long been taught to see ambivalence as a classic form of "denial." When court jurisdiction is at hand or should the person be facing sanctions or loss of parental autonomy, it's easy to wonder how a client could possibly think that the problem behavior remains an option. However, for the motivationally-aware staff person, ambivalence is welcomed as it demonstrates a reason for optimism! Rather than being a sign that a person is moving away from change, ambivalence is a signal that change may well be on the horizon. These staff understand that *ambivalence makes change possible—it is the precursor to positive behavior change*.

Clients can change if they can successfully negotiate their ambivalence. The challenge therefore, is to first identify and increase this ambivalence, and then try to resolve it by creating discrepancy between the actual present and the desired future. The larger the discrepancy, the greater the desire to change. There will be a very small percentage of clients who have no discrepancy or ambivalence over their current behavior—and no amount of strategies can create it where there is none to start with. However, the good news for Social Work staff is that a large majority of parents will enter our departments with a certain amount of concern regarding their behavior. Whether the discrepancy can be harnessed for change depends on whether a staff understands how to recognize it—and use it—to elicit self-motivational speech.

4. Motivational Interviewing Will Change Who Does the Talking

Training in Motivational Interviewing teaches techniques to strategically steer a conversation in a particular direction—yet steering in itself is worthless without the ability to move the conversation forward. Consider how client welfare staff often work much harder than their clients do. As part of a qualitative research project, this author (Clark, 2005) videotaped actual office appointments between agency staff and their assigned clients. This research found that in office visits averaging 15 minutes in length, staff "out-talk" clients by a large margin. For instance, in one session, 2,768 words were spoken between staff and client. The breakdown? The staff spoke a hefty 2,087 words out of this total while the client was allowed only 681 words. Another example demonstrates slightly less talking overall but the ratio of "talk-time" remained similar. Total number of words spoken in this interview was 1,740. The word count found the staff spoke a robust 1,236 words while

the client was limited to 504. Although listening by itself is no guarantee of behavior change, using strategies to get the client talking, is a prerequisite to being an effective motivational interviewer.

In interactions like this, agency staff are literally talking themselves out of effectiveness. The problem is not so much that the staff is doing all the talking, but rather that *the client is not*. It stands to reason that the more the staff is talking, the less opportunity there is for the parent to talk and think about change. Compliance can occur *without* the staff listening and the client feeling understood—the same cannot be said if one wants to induce behavior change.

5. This Approach Will Help You Prepare Clients for Change

When you get the client talking, staff are taught to strategically focus on encouraging productive talk. Frequently, social workers want to jump straight to problem solving. However, this approach ignores the fact that most people need to be prepared for change. Getting clients to do most of the talking is the first step, followed by preparing people to think about change. Motivational Interviewing trains staff in basic listening and speaking strategies:

- Ask Open Questions
- Affirm Positive Talk and Behavior
- Reflect What You are Hearing or Seeing
- Summarize What has Been Said

These four techniques (sometimes referred to by the “OARS” acronym, for Open Questions, Affirmation, Reflections, and Summaries) will help a parent think about change, and help to gather better quality information so we can assist the person in planning. In some instances, we don’t need clients to talk much, especially when staffs are simply gathering information or documenting compliance. But in other instances, when staff are focused on behavior change, the use of OARS will increase the probability that the parent will speak—and think—in a more productive direction. These techniques become a “gas peddle” for conversations.

Figure 1 illustrates some of the markers that help to determine whether the interaction is a good one, that is, whether the Social Work client is moving closer towards change.

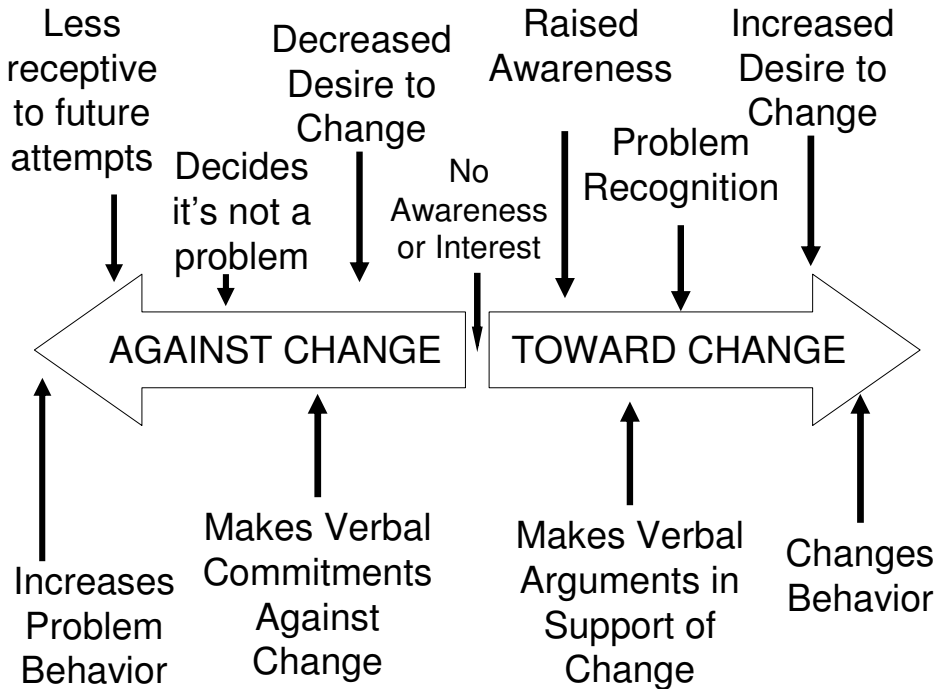


Figure 1.

Ask Questions that Raise Interest

Open questions can also be used to help a person resolve their ambivalence in a more positive direction. They help tip the balance toward change. For instance, here are some questions that ask specifically about the client's reasons for change:

Drawbacks of Current Behavior

- What concerns do you have about your drug use?
- What concerns does your spouse have about your drug use?
- What has your drug use cost you?

Benefits of Change

- If you went ahead and took care of that class, how would that make things better for you?
- You talk a lot about your family. How would finding a job benefit your family?
- How would that make things better for your kids?

Here are some questions that ask about desire to change:

- How badly do you want that?
- How does that make you feel?
- How would that make you feel differently?

Here are some questions that ask about perceived ability to change:

- How would you do that if you wanted to?
- What would that take?
- If you did decide to change, what makes you think you could do it?

Finally, here are some questions that ask about specific commitments the client will make to change:

- How are you going to do that?
- What will that look like?
- How are you going to make sure that happens?

Since our questions partially determine the client's responses, we pick questions that encourage more productive talk. When talking about matters of fact, this might be considered leading, but when talking about motivation we assume that every client has some mixed feelings. The outcome is not fixed, and so we provide every opportunity for clients to talk and think about positive behavior change. Ideally, this becomes a reinforcing process: We ask questions to evoke change talk, the parent responds with positive statements, we reflect and reinforce what the client has said, and the parent continues to elaborate. With Motivational Interviewing, change talk stays front and center through amplification and reflection.

Another benefit from the use of OARS is evident in how it can move troublesome conversations back to productive ends. Unfortunately, a great majority of the responses typically used by Social Work staff tend to make bad situations worse:

Parent: You're trying to say I'm a bad parent!

Staff: No, that's not what I said.

Parent: You don't think I can protect my kids.

Staff: You're not listening!

Parent: This isn't fair.

Staff: Mrs. Jones, your arguing is not helping.

Initially listening to and trying to understand a client's anger with reflective listening skills will lower frustration levels and make future conversations more productive. Understanding a client's point of view is not the same as agreeing with it. It takes two people to argue—it is impossible to fight alone. As any argument must involve two people, the motivationally-inclined staff—using OARS—simply takes him or herself out of the mix. An angry and combative attitude can often be reduced by simply reflecting back to the client what they are feeling or thinking. The focus should not rest between the staff and the Social Work client (force and coercion) but rather between the Social Work client and their own issues (discrepancy and ambivalence). Even in the face of pending violations of court orders, the staff member must remove themselves from the middle and not let the lack of cooperation become personal. A motivational focus does not rest between the staff and parent, but between the parent and the pending sanction. Staff are trained to “get out of the middle” and position the parent and pending sanction face-to-face. (More on this in Section 7 regarding “delivering sanctions without leaving a motivational style.”)

6. Motivational Interviewing Will Change What Is Talked About.

There is good evidence to suggest that people can literally “talk themselves in and out of change” (Walters, et al., 2003). For instance, there are linguistic studies that suggest that the speech of the provider sets the tone for the speech of the client, which in turn, influences the ultimate outcome (Amrhein, et. al., 2003). In short, certain statements and questions—and especially a certain provider style—seem to predict whether people decide to change during brief conversations. Parents may come in with a certain range of readiness, but what the staff says from that point on makes a difference in how the Social Work client speaks and thinks, and ultimately in how they choose to behave.

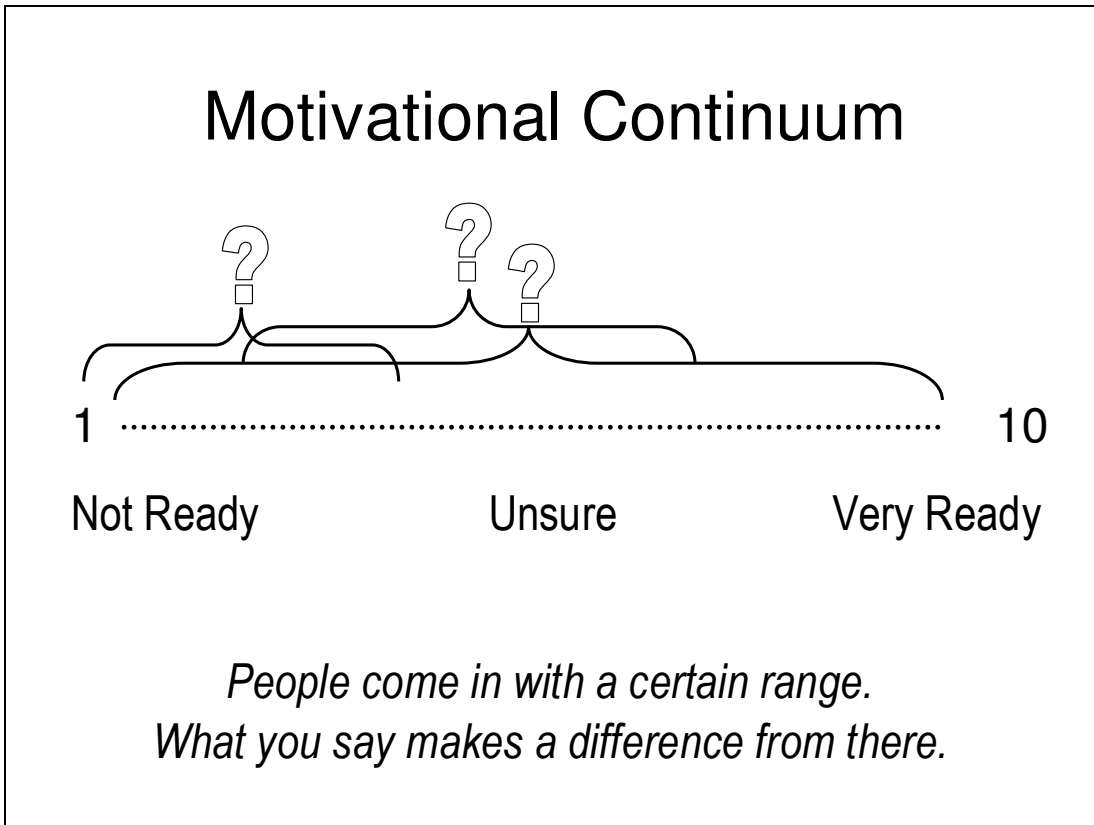


Figure 2

Eliciting “change talk” (self-motivational speech)

There has been an increasing interest in short Motivational Interviewing sessions that have been able to match the improvement of several months of outpatient work. As a result, linguists (Amrhein, et. al., 2003) began to study the speech content of these motivational sessions--the actual words spoken between a staff person and their client—looking for what speech content proved to determine positive behavior change. What they found were five categories of motivational speech—desire, ability, reason, need and commitment language. These conditions have been placed in an easy-to-remember acronym of “DARN-C”:

D esire (I Want to, prefer, wish)

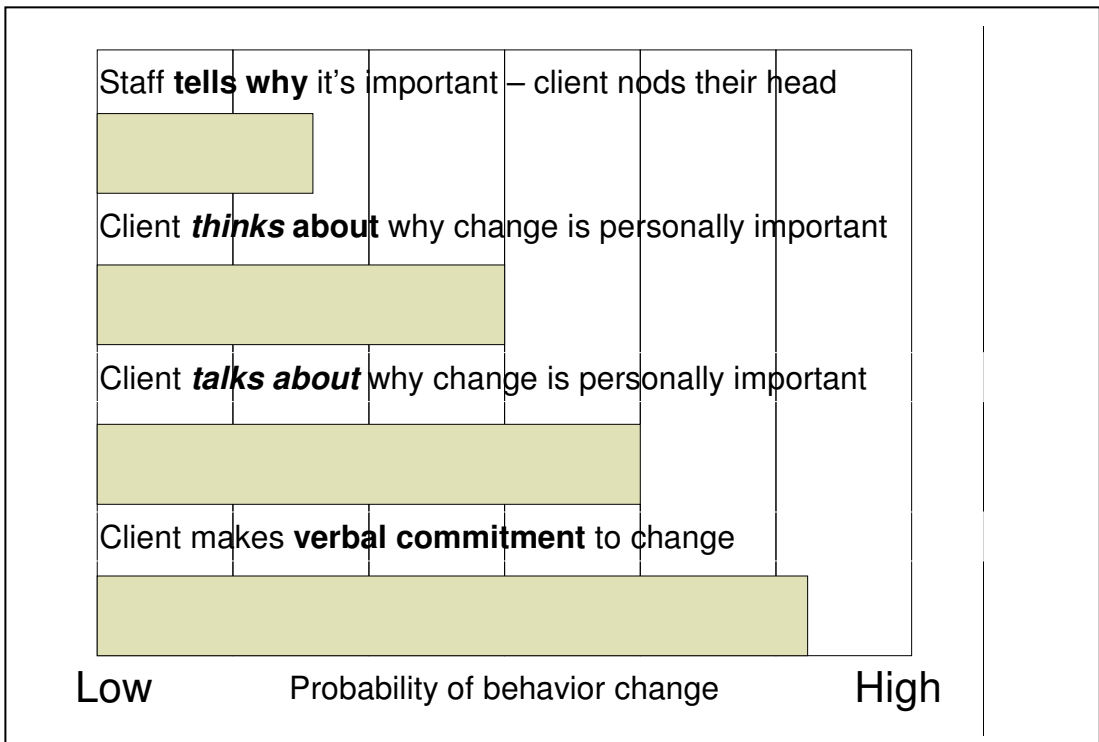
A bility (I Can, able, could, possible)

R easons (I Should, why do it?)

N eed (I Must, importance, got to)

C ommittment (I Will, I’m going to...)

The researchers were quick to point out that not every dimension had to be voiced for behavior change to start. Simply getting the client to verbalize one of the four constructs (DARN) might be enough. However, the same could not be said for Commitment. It was Commitment talk that actually predicted behavior change. For this reason, staff should be aware of techniques to help increase motivational talk in a general sense—especially navigating conversations towards commitment language. Staff are reminded that when they are arguing or reasoning with the client, the true setback is that no DARN-C talk is occurring. Figure 3 highlights that the content of speech is important—and provides a visual demonstration that motivational talk is progressive.



Agency Staff Can Enforce Court Orders And Deliver Sanctions Without Leaving A Motivational Style

Figure 3

Lying and Deception

One troublesome feature of both protective services and Social Work is the presence of deception, whether by deliberate lies, half-truths or “holding back” of information. In response to violations of court orders or lack of progress, clients sometimes lie (“I didn’t do it!”) or make excuses for behavior (“I did it but it’s not so bad”). The range seems endless: “Everybody does it” (consensus), “It’s not that bad” (minimization), “I needed the money” (justification), or “I didn’t mean to” (intention). With the coercion inherent in court jurisdiction, it is reasonable to expect deception from a certain percentage of those with whom we work. At the same time, it is important to understand that most clients don’t routinely lie. In contrast to the stereotype of clients as “deviants” who habitually manipulate others, most clients bend the truth for pretty ordinary reasons. In fact, to some extent, lying, deception and falsehood—the hiding of our inner selves or outer behavior—is simply part of our social world. As with honesty, lying is one more natural continuum of human behavior. No different from other human conditions, it is not so much the presence or absence of dishonesty but the degree or amount that becomes a concern.

Why do people lie? Research (Saarni & Lewis, 1993) suggests that people need to keep the integrity of two assumptions about their own actions. The first involves the belief “I’m a good person” while the second assumes “I am in control most of the time.” Believing in these two assumptions is critical for maintaining a healthy psyche—these beliefs both protect and enhance our mental health. These assumptions also mean that we may guard ourselves or speak in a way that protects these assumptions. For instance:

1. A person will lie to “save face.”

To save face is to protect a positive self-image—the beliefs that “I am a good person” and “I’m in control.”

2. A person will lie to save face for someone he or she cares about.

Relationships are powerful motivators. This explains why abused children may lie to a protective services worker to protect their parent(s) and why one spouse cannot be compelled to testify against the other in a court of law. It creates a conflict to have to provide damaging information about someone with whom you have a close relationship.

3. A person will lie to protect a perceived loss of freedom or resources.

There are penalties for admitting child abuse/neglect behavior, and so clients must weigh the immediate penalties of telling the truth against the possibly worse, but less certain, penalties that might occur if they told a lie.

Any or all of these influences might be present—at any time—as a case progresses through a court/Social Work agency system. Clients constantly weigh their obligations to personal pride, important relationships, or the threat of a loss of freedom—all of this against what is expected of them.

What can be done about it?

First, the adage, “Don’t take it personal” is appropriate here. Taking full responsibility for poor outcomes can conflict with anyone’s perceptions of themselves as a “good” person and “in control.” Many clients will deceive, not so much to con staff as to defend these assumptions within themselves—it involves a need for self-deception.

Second, a person will bend information in response to who is asking and how the question is being asked. The way a staff asks a question partially determines what kind of answer the client gives. Said more strongly, some staff members can actually encourage lies through their use of confrontational questions. Some staffs believe that a tough style sends a message to the client that he or she can’t be “taken in” by clients, but research suggests it’s more the opposite. A harsh, coercive style can prompt a paradoxical response, where the more the staff person confronts, the more a client feels like he has to lie to stay in control or save face. Lying becomes justified based on the personal style of staff. Rather than evoking change, a confrontive personal style can leave a client more entrenched in the problem, because it causes him to defend and make excuses for negative behavior.

Third, the Social Work field has long valued the ability to recognize deception and force the truth from clients. As with any other profession, no one wants to be played upon, suckered or conned. Yet, trying to force people to admit their faults is exhausting work. In contrast, staff who have a positive, collaborative relationship with their Social Work clients find that they are less likely to be lied to. A mutual working style makes honesty more likely.

A motivational approach doesn’t handle deception by ignoring it, nor by getting agitated by it, but rather by taking a step back from the debate. In our view, we leave the assignment of responsibility (guilt or innocence) to the courts. In field work, we focus on accountability—but we strongly emphasize a “difference that makes a

difference”—that is, helping the client to become accountable for the solution, rather than the (outcome-killing) effort of becoming accountable for the problem.

Addressing Violations and Sanctions

One of the things that make Social Work staff unique is their conspicuously dual role. We help the parent to plan, but dispense sanctions if they fail. We ask for honesty, but also report all they tell us to the court. Indeed, it is understandable why some staff have a hard time navigating this dual role. The tendency is to move to one side—to become too harsh or too friendly—when a more middle-of-the-road approach is called for. In reality, the Social Work professional is more like consultant or mediator, in that we manage the relationship between court and client. This is not as far-fetched as some would believe. In truth, we neither make decisions for the client nor for the court. If we treat the position from the perspective of a mediator, we can avoid some of the pitfalls inherent in this dual role. Adopting this middle-of-the-road stance makes us not only an effective advocate for the court, but also allows us greater power to influence the actions of the mandated parent.

Motivational Interviewing can make change more likely, but it is by no means a magic bullet. When violations occur, there are a couple of strategies for keeping a motivational edge.

1. Explain your dual roles (Become the “go-between”)

Motivational Interviewing encourages staff to be honest with clients about all aspects of their services, including conditions, incentives, and sanctions. Staff should fully explain (up front) to the client about their dual role—yet do so as someone who represents “both sides.” For instance:

I want to make you aware that I have a couple roles here. One of them is to be the court’s representative, and to report on your progress on the conditions that the court has set. At the same time, I act as a representative for you, to help keep the court off your back and manage these conditions, while possibly making some other positive steps for you and your family along the way. I’ll act as a “go-between”—that is, between you and the court, but ultimately you’re the one who makes the choices. How does that sound? Is there anything I need to know before proceeding?

2. Address Behavior with an “Even Keel” Attitude

Adopting a new approach like Motivational Interviewing is clearly a process. Even after an initial training, there is a common pitfall for many staff when compliance problems occur. At some point, if a Social Work client remains ambivalent (e.g., lack of progress), staff believe it makes sense to move out of a motivational style and switch over to more coercive and demanding strategies. Staff who initially found the benefits of motivational work will justify heavy-handed tactics—perceiving them to be a natural response to resistance, even remarking that difficult clients seem to be “asking for it.” A critical idea missed—there is a difference between enforcing sanctions based on lack of progress, and switching styles to a more heavy handed approach. One can enforce court orders and assess sanctions as appropriate, without leaving motivational strategies behind.

Force, for all its bluster, can often make a situation worse. This is especially true when addressing violations. Clients may already be on the defensive about their progress, and an agitated staff can make the client’s attitude worse. For this reason, we suggest that staff address violations with an “even keel” attitude, addressing the behavior, dispensing the appropriate sanction, but not getting agitated or taking the lack of compliance personally.

Motivationally-inclined staff offer their support—and their regrets—to the Social Work client who might be considering a violation of court orders:

Staff: We’ve talked about this before. In another two weeks, you will be in violation of this court order. We have also talked about how it is up to you. You can certainly ignore this order but sanctions will be assessed.

Parent: “Damn right I can I can ignore it—this is so stupid!”

Staff: “It seems unfair that you’re required to complete this condition. It feels to you like it might be a waste of your time.”

Parent: “Yeah. I can’t believe I have to do this!”

Staff: "It's important that I tell you that my (supervisor, judge, responsibilities, policy, position) will demand that I assess a consequence if it's not completed before the next two weeks."

Parent: "You don't have to report this."

Staff: "Unfortunately, that's part of my job. I have to follow orders here. So, this will be something I'll have to do."

Social Work client: "You mean you can't just let it go?"

Staff: "No, I don't have a choice. But—you have a choice, even if I don't. Is there anything we can do to help you avoid these consequences before the end of the month (next meeting, court hearing)?"

Parent: "I'll think about it, it just seems unfair."

A confrontational approach is always an option, but at this point simply recognizing the client's reluctance, and fairly informing him or her about what is likely to happen, can improve the likelihood that a decision for compliance will eventually overtake the emotions of the moment.

In this example, the staff refuses to leave the middle, neither defending the court's order, nor siding with the client to stop the sanction. When it comes to the specific sanction, the staff defers to the court, and re-emphasizes a collaborative relationship: "How do we (you, significant others and myself) keep them (the judge, the court, agency policy) off your back?" Finally, the staff emphasizes the client's personal responsibility. Clients don't have to complete their conditions; they always have the option of taking the sanction.

Motivational Interviewing steers clear of both the hard and soft approaches. The "hard" approach is overly-directive and defends the court's authority ("You better do this!", "Drop the attitude, you're the one who didn't parent appropriately," "Don't blame the court"). Less examined is the "soft" approach. This approach leaves the staff defending the Social Work client, ("I won't tell this time—but don't do it again," "Do you know what the court would do if I brought this to their attention?"). A positive alliance is not the same as ignoring violations to keep a good relationship at any cost ("You better get it together or I'll have to do something"), nor is it the same as allowing the situation to become personal and attempting to "out-tough" the client ("I'll make sure your case never gets dismissed!"). Both approaches miss the mark as they prevent the staff from occupying the "middle ground."

A motivational approach is about finding the middle ground of a consultant who works with both sides (the court and the parent). Staff can work in partnership with the client, while still being true to their agency/court roles. Staff can respect personal choice, but not always approve of the client's poor parenting. By their skills and strategies, motivationally-trained staff can supervise for compliance and, at the same time, increase readiness for change.

Postscript

Start your own single-subject research by asking any Social Work supervisor to offer a frank (but discreet) evaluation of the department/agency staff they supervise. Many supervisors can easily walk down their hallways—and with candor—point to the offices of staff who have the ability to build helpful alliances with parents without compromising agency or court mandates. These staff members seem to understand that compliance and behavior change are not mutually exclusive efforts. With an eye to effective relationships that are so essential for encouraging change, why are not more Social Work departments importing motivational training to improve positive outcomes?

As noted, there is an abundance of research citing how a confrontational approach repels those we work with and becomes an obstacle for change. Social Work departments must speed-up this "retooling of practice methods" by establishing a climate that will both ensure compliance and foster hoped-for behavior change.

References

Amrhein, P. C., Miller, W. R., Yahne, C. E., Palmer, M., & Fulcher, L., "Client commitment language during motivational interviewing predicts drug use outcomes." *Journal of Consulting and Clinical Psychology* 71(5), 862-878. (2003).

Berg, Insoo.K. & Kelly, Susan. *Building Solutions in Child Protective Services*. NY: Norton (2000).

Burke, Brian, L., Arkowitz, Hal, & Dunn, Christopher "The Efficacy of Motivational Interviewing and Its Adaptations: What We Know So Far" In W. Miller & s. Rollnick (Eds.) *Motivational Interviewing: Preparing People For Change* . (2nd edition) New York: Guilford Press (2002).

Clark, Michael D. [Qualitative Review of Staff/Client Dialogues: Transcript word counts for "talk-time" ratios] Unpublished study. Center for Strength-based Strategies. (2005).

Clark, Michael D. "Change-Focused Youth Work: The Critical Ingredients of Positive Behavior Change" *Journal of the Center for Families, Children & the Courts*, Vol. 3, 59-72. (2001)

Deci, Edward. L., & Ryan, Richard. M., *Intrinsic motivation and self-determination in human behavior*. New York: Plenum. (1985).

Hubble, Mark, Duncan, Barry, & Miller, Scott. *The Heart and Soul of Change: What Works in Therapy*. Washington, DC: American Psychological Association (1999).

Saarni, Carolyn & Lewis, Michael, "Deceit and Illusion in Human Affairs." In Michael Lewis and Carolyn Saarni (Eds.) *Lying and Deception in Everyday Life*. NY: Guilford Press. (1993).

Miller, William R. & Rollnick, Stephen. (1st Edition) *Motivational Interviewing: Preparing People For Change* . New York: Guilford Press (1991).

Miller, William R. & Rollnick, Stephen. (2nd edition) *Motivational Interviewing: Preparing People For Change* . New York: Guilford Press (2002).

Miller, William, R., Benefield, R. G., & Tonnigan, J.S., "Enhancing Motivation for Change in Problem Drinking: A Controlled Comparison of Two Therapist Styles." *Journal of Consulting and Clinical Psychology* (1993): 455-461.

Prochaska, James, O. & DiClemente, Carlo, C., "Stages and Processes of Self-Change in Smoking: Toward an Integrative Model of Change." *Journal of Consulting and Clinical Psychology* (1983): 390-395.

Turnell, Andrew, & Edwards, Steve. *Signs of Safety: A Solution and Safety Oriented Approach to Child Protection Casework*. New York: WW Norton (1999).

Walters, S. T., Rotgers, F., Saunders, B., Wilkinson, C., & Towers, T., *Theoretical Perspectives on Motivation and Addictive Behavior*. In F. Rotgers, J. Morgenstern, & S. T. Walters (Eds.), *Treating Substance Abuse: Theory and technique* (2nd ed., pp. 279-297). New York: Guilford Press. (2003).

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