Building an Action Plan

Help the patient develop an action plan based on values, motivations and goals discussed during the interview.

- Ask the patient for ideas about ways to change behavior or achieve the identified goals.
- Use the 0 to 10 scale to explore barriers to change, possible first steps and ways to improve the patient’s chances for success.
- Reflect on their responses to link ideas to outcomes.
- Request permission to share other ideas with the patient if need be, then check for understanding and related ideas from the patient.

When Patients Lack Motivation

If a patient is not ready to make a behavioral change, reflect back that sentiment to him or her and begin the next interview by discussing any changes or progress since the first meeting. Readiness to change behavior often takes time to develop. By discussing health issues, introducing the concept of behavior change and helping a patient identify internal values and motivations, a motivational interview may enable patients to prepare for a behavioral change by the next office visit.

Ihuoma U. Eneli, MD, MS, is medical director at the Center for Healthy Weight and Nutrition at Nationwide Children’s Hospital and professor of clinical pediatrics at The Ohio State University College of Medicine. Dr. Eneli oversees the center’s assessment clinics and medical weight management programs. Her clinical and research interest is medical interventions for overweight children, particularly from the health care providers’ perspective.
Principles of Motivational Interviewing

Motivational interviewing is a style of counseling directed to identify and engage the patient's intrinsic motivation for changing health-related behaviors. The technique takes practice, but it can be a very effective tool for identifying realistic goals, feasible approaches and opportunities for progress with all patients—especially those who are resistant to change or struggle to acknowledge their health problem. The method is nonjudgmental, nonconfrontational and allows the patient and physician to assess readiness to change together, instead of being directed by the interviewer.

Using Motivational Interviewing for Weight-Loss Counseling

Motivational interviewing is very helpful when working with children and families who have weight concerns and weight-related health problems. Instead of health-focused goals, the objectives identified through motivational interviewing may be social aims, such as feeling comfortable enough to shop at the mall with friends. The key is to focus on what is important to the child and family. When used appropriately, primary care providers can use motivational interviewing to help patients take the first step toward weight loss. While weight-driven goals are often important to the practitioner, it is critical that weight loss is the primary goal of a particular encounter only if the patient endorses it as a personal goal.

The following techniques are useful for conducting a motivational interview:

• Ask for permission to address the child's weight, especially if this is not the reason for the visit.
  – For example, "I am concerned that your child is carrying a little extra weight. Is that something you are open to talking more about today?"

• Use open-ended questions and invitations to foster richer discussion.
  – For example, "Tell me about your eating habits," or "Since our last visit, what went well with your activity?"
  – Avoid closed questions, which can be answered with just "Yes" or "No."

• Use reflective listening instead of guiding the conversation.
  – For example, "I am concerned that your child is carrying a little extra weight. Is that something you are open to talking more about today?"

• Focus the patient's thoughts by assessing a variety of behavioral changes.
  – Help the patient define the importance of various goals using a scale of 0 to 10. Then use the answers and the same scale to inquire about readiness to change and confidence.
  – Draw connections or disparities between what the patient has expressed as important and what the patient has the confidence to perform.
  – Use the responses to build an action plan with the patient.

Conducting a Motivational Interview

A person's motivation is influenced by affirmation that he or she has heard, the belief that the message will be helpful, the level of importance placed on the behavior and his or her level of confidence that the desired behavior can be changed. Through motivational interviewing, you can influence all of these areas. Practice motivational interviewing with a colleague or volunteer to get accustomed to each of the principles and techniques prior to using the strategy with a patient.

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What is Motivational Interviewing?

Motivational interviewing is a style of counseling developed to identify and engage the patient’s intrinsic motivation for changing health-related behaviors. The technique takes practice, but it can be a very effective tool for identifying realistic goals, feasible approaches and opportunities for progress with all patients — especially those who are resistant to change or struggle to acknowledge their health problem. The method is nonjudgmental, nonconfrontational and allows the patient and physician to assess readiness to change together, instead of being directed by the interviewer.

Principles of Motivational Interviewing

Motivational interviewing uses several key steps to elicit a patient’s motivations and avoid practitioner-directed counseling.

1. **Engage the patient:** Express empathy. Ask open-ended questions and use reflective listening techniques.
2. **Focus the patient:** Let the patient identify the behavior to change.
3. **Evoke a response:** Elicit the patient’s values, ambivalence, readiness to change and perceived barriers.
4. **Plan with the patient:** Help the patient build an action plan.

Using Motivational Interviewing for Weight-Loss Counseling

Motivational interviewing is very helpful when working with children and families who have weight concerns and weight-related health problems. Instead of health-focused goals, the objectives identified through motivational interviewing may be social aims, such as feeling comfortable enough to shop at the mall with friends. The key is to focus on what is important to the child and family. When used appropriately, primary care providers can use motivational interviewing to help patients take the first step toward weight loss. While weight-driven goals are often important to the practitioner, it is critical that weight loss is the primary goal of a particular encounter only if the patient endorses it as a personal goal.

As the patient makes progress, the interviewing process will change to identify new goals and plans that eventually may include weight-related goals. You can also refer patients who meet our referral criterion (BMI >95th percentile) to the Center for Healthy Weight and Nutrition for more in-depth follow-up and motivational interviewing.

Scheduling and Referrals

- **Phone:** (614) 722-6200
- **Fax:** (614) 722-4000
- **Online:** www.NationwideChildrens.org (Click “Request an Appointment.”)
- **Physician Direct Connect Line for urgent physician consultations:** (614) 355-0221 or 1-877-355-0221
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Conducting a Motivational Interview

A person’s motivation is influenced by affirmation that he or she has been heard, the belief that the message will be helpful, the level of importance placed on the behavior and his or her level of confidence that the desired behavior can be changed.

Through motivational interviewing, you can influence all of these areas. Practice motivational interviewing with a colleague or volunteer to get accustomed to each of the principles and techniques prior to using the strategy with a patient.

The following techniques are useful for conducting a motivational interview:

- **Ask for permission to address the child’s weight, especially if this is not the reason for the visit.**
  - For example, “I am concerned that your child is carrying a little extra weight. Is that something you are open to talking more about today?”
- **Use open-ended questions and invitations to foster richer discussion.**
  - For example, “Tell me about your eating habits,” or “Since our last visit, what went well with your activity?”
  - Avoid closed questions, which can be answered with just “Yes” or “No.”
- **Use reflective listening instead of guiding the conversation with directive questions.**
  - Listen closely as the patient speaks and try to identify underlying emotions.
  - Repeat the patient’s comments in your own words to ensure clarification and invite more sharing.
  - Affirm the patient’s emotions and statements.
  - Don’t give advice or make value judgments; use your comments to help the patient sift through his or her own values, thoughts and goals. For example, “It sounds like…” and “You’re thinking about…” offer patients the chance to clarify feelings and articulate goals.
- **Focus the patient’s thoughts by assessing a primary goal and confidence.**
  - For example, “On a scale of 0 to 10, how confident are you in your ability to actually exercise every day?”
  - “How does this fit with…?”
  - Draw connections or disparities between what the patient has expressed as important and what the patient has the confidence to perform.
  - Use the responses to build an action plan with the patient.

<table>
<thead>
<tr>
<th>Scale for Assessing Goal Importance, Readiness to Change and Confidence</th>
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</thead>
<tbody>
<tr>
<td>0</td>
</tr>
<tr>
<td><strong>For example, “On a scale of 0 to 10, how ready are you to start exercising daily?” Then, “On a scale of 0 to 10, how confident are you in your ability to actually exercise every day?”</strong></td>
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<tr>
<td><strong>Ask what will move the number higher on the scale.</strong></td>
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<tr>
<td><strong>Ask why the number is not lower on the scale.</strong></td>
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<tr>
<td><strong>For example, “Does this make sense?”</strong></td>
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<tr>
<td><strong>“Could you do this?”</strong></td>
</tr>
<tr>
<td><strong>“How does this fit with…?”</strong></td>
</tr>
</tbody>
</table>

Elicit – Provide – Elicit

- **ELICIT the patient’s ideas**
  - Knowledge, goals, strategies, skills
- **PROVIDE feedback or information**
  - Just the facts without judgment
- **ELICIT the patient’s reactions**
  - “Does this make sense?”
  - “Could you do this?”
  - “How does this fit with…?”
- **REFLECT back the patient’s reactions and responses**

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