



# HEALTHCARE PROVIDERS

## MOTIVATIONAL INTERVIEWING FOR PROMOTING HEALTHY BEHAVIORS



UConn  
**RUDD CENTER**  
FOR FOOD POLICY & OBESITY

Many health care professionals are concerned about their patients' weight, but unsure how to best discuss this topic with their patients. After first identifying any potential lifestyle behaviors that may be contributing to body weight, health care professionals can use motivational interviewing techniques to support patients in making health behavior changes. Motivational interviewing uses an interactive, empathic listening style to increase motivation and confidence by specifically emphasizing the discrepancy between personal goals and current health behaviors.\*

## Questions to assess ambivalence and motivation to change:

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After obtaining detailed diet and activity information from patients, use the following types of questions to assess ambivalence and motivation for lifestyle changes:

- How ready do you feel to change your eating patterns and/or lifestyle behaviors?
- How are your current behaviors affecting your life right now?
- What kinds of things have you done in the past to change your eating and/or activity-related habits?
- What strategies have worked for you in the past?
- Some people talk about part of them wanting to change their behaviors, and part of them not really wanting to change. Is this true for you?
- On a scale from 1-10, how ready are you to make changes in your eating and/or activity-related habits?
- How much does it worry you that you might return to old behaviors?
- What makes you feel like you can continue to make progress if you decide to?
- What are your hopes for the future if you are able to become healthier?

\*For additional information on motivational interviewing, please consult the following article: DiLillo V, Siegfried NJ, Smith West D. Incorporating motivational interviewing into behavioral obesity treatment. *Cognitive and Behavioral Practice*. 2003; 10, 120-130.

# Questions to assess readiness, importance, confidence and barriers

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## Readiness to change:

- How do you feel about changing your eating and/or activity-related habits?
- How ready to change are you?
- How would you like your health to be different?
- People differ in how ready they are to make these kinds of changes. What about you?

## Importance of change:

- Tell me how things would be different for you if you (were more physically active, ate more healthfully, etc.)
- What do you think would happen if your behaviors don't change?
- What are the most important things to you? What impact does your health status have on that?
- What would have to happen before you seriously considered changing?
- What are the good things about (eating healthier, being more active)
- What concerns do you have about (eating healthier, being more active)?
- If you were to change, what would it be like?

## Barriers:

- What things stand in the way of your taking a first step?
- What barriers might impede success? (e.g., child care, transportation, distance, cost, accessibility)

# Motivational interviewing exercises to do with patients:

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## 1. Readiness assessment:

0  5  10

If “0” is not ready to make changes (in your eating habits/physical activity) and “10” is ready to make changes, what score would you give yourself?

You gave yourself a score of X. Why do you think you are X, and not (a lower number)?

OR

You gave yourself a score of X. What would have to happen to move up to (higher #)?



## 2. Decisional balance

Discuss with the patient what he/she perceives to be the short-term and long-term benefits and drawbacks of making healthy changes. Encourage the patient to generate personal costs and benefits, and then openly discuss these to identify barriers and goals.

### Short Term Costs:

- 1)
- 2)
- 3)
- 4)
- 5)

### Short Term Benefits:

- 1)
- 2)
- 3)
- 4)
- 5)

### Long Term Costs:

- 1)
- 2)
- 3)
- 4)
- 5)

### Long Term Benefits:

- 1)
- 2)
- 3)
- 4)
- 5)

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# Key FRAMES to Motivation for Change:

## F: Feedback

Present feedback to the patient in a way that is respectful and has impact. This can include providing feedback about how unhealthy behaviors are harming the individual, while ensuring that your communication reflects the patient's statements of concern. Feedback should be based on information gathered in patient interviews, reports, and objective measures. It can be helpful to present this data to the patient and elicit his or her opinions from this information.

## **R: Responsibility**

Emphasize that the patient has the responsibility and freedom to make the choice to change. This is not a decision that can be made by anyone else, and it is really up to the patient to decide what changes (if any) to make.

## **A: Advice**

Provide clear and direct advice about the importance of making lifestyle changes and suggest different ways that this can be accomplished. Advice should reinforce that the patient makes the ultimate choice.

## **M: Menu**

Offer different alternatives that the patient can choose from. For example, *“There are different ways that people successfully change their lifestyle behaviors. Perhaps we can spend a few moments talking about this so that I can tell you some of these strategies, and you can tell me which of these might make the most sense for you.”*

## **E: Empathy**

It is important to listen to, and reflect, the patient’s statements and feelings. This ensures that you understand the patient, and that the patient feels understood by you, both of which foster productive communication. Expressing empathy to your patient involves communication that is warm and supportive, and demonstrates that you are paying attention to the patient’s verbal and nonverbal communication.

## **S: Self-efficacy**

Part of your goal in motivational interviewing is to help instill optimism and confidence in your patient that he/she can make meaningful behavior changes. You want to communicate to your patient that “you can change.”