

MI Intervention Protocol Manual
Cannabis Self-Change Study

October 2, 2020

OVERVIEW

The MI intervention protocol is modelled after a treatment approach evaluated in multiple trials. It is comprised of a single motivational interview session held via telephone, during which the online cognitive-behavioural workbook is introduced to the client.

WHAT IS MOTIVATIONAL INTERVIEWING?

Rationale and Style

The general style of the interview is to be supportive, interested, enthusiastic, and empathetic. The “spirit” of motivational interviewing is an essential part of its effectiveness. The core aspects of the spirit are:

- *Partnership* – Approaching the relationship as a partnership, rather than an expert-client orientation.
- *Compassion* – Having genuine empathy for the client’s situation.
- *Evocation* – Drawing out or eliciting from the client their concerns and motivations for wanting change.
- *Acceptance* – Accepting that the client needs to determine the appropriate goals at this time, and that the client has some resources for making changes.

Goals

The MI session has five primary goals:

- Engage the client, through the general spirit of the session. The goal is to fully understand the client’s situation and concerns, and to communicate that understanding to the client. Essentially, clients must have the opportunity to tell their story.
- Elicit and strengthen “change talk,” which are the motivational statements or language that the client uses to communicate a desire, ability, reason, need, or commitment for change. These statements correlate with actual future behaviour change – the more we hear ourselves saying something, the more we believe it and act on it. A number of techniques are available to facilitators to help elicit change talk throughout the intervention.
- Provide the opportunity for the client to identify and express ambivalence about their situation and about changing it. Ambivalence or having mixed feelings is a natural reaction to thinking about making changes. Expressing or acknowledging ambivalence and having it validated by the facilitator as normal allows the client to override it.
- Promote the client’s sense of self-efficacy: the belief that the client has the ability to make positive changes.
- Promote client’s curiosity about the content of the online workbook, in particular strategies that may be relevant to the goals for change that are expressed during the interview.

These goals are met using some basic strategies, such as open-ended questions, affirmations, reflections, and summaries as the clients tell their story. Miller and Rollnick (2002) refer to these principles by the acronym OARS: *Whereas all good counselling includes these OARS elements,*

in MI they are used strategically to achieve the above five primary goals, in particular eliciting and strengthening change talk.

OARS Elements

Open-ended questions – Whereas closed-ended questions elicit specific information (e.g., yes or no answers), open-ended questions require descriptive responses that encourage clients to reveal the issues that are most personally relevant. These issues are likely to be related to their motivations to change.

Affirmations – Genuine statements of regard or appreciation for some aspect of the client's values, beliefs, behaviours, or aspirations are strongly engaging, and engagement is crucial for successful motivational interviewing.

Reflections – Simple and complex reflects are also very engaging, as they illustrate to the client that you are hearing what they are saying. They are also used strategically to reinforce change talk, to elicit more change talk, to highlight a discrepancy between a client's behaviours and goals, to roll with resistance, and to allow the client to correct errors in the facilitator's understanding of the situation. Reflections are used extensively in motivational interviewing, and facilitators should aim to use at least twice as many reflections than questions in their interactions with clients. All reflections are essentially questions that are expressed as statements. *Simple reflections* entail simply repeating or rephrasing what the client has said. These reflections need to be used sparingly. *Complex reflections*, in comparison, add additional information or interpretation to what the client has stated. These reflects can often be stated in terms of the underlying feeling, for example:

Client: My wife is very critical of me.

Facilitator: You're afraid that she doesn't like what she is seeing in you.

Complex reflections can include double-sided reflections that highlight two incompatible statements the client has made, often reflecting ambivalence. For example:

Facilitator: On the one hand, cannabis helps you cope with your anxiety. On the other hand, you know that your cannabis use is making it worse in the long run.

Complex reflections can also intentionally overshoot or undershoot the meaning of the client's statements, in order to encourage them to express their reactions more clearly. For example:

Client: My wife is very critical of me.

Facilitator: She thinks you are a terrible person.

or

Client: My wife is very critical of me.

Facilitator: She is a bit bothered by your cannabis use.

Summaries – Summaries are elaborate reflections of the client’s motivations and change talk and are used intermittently during the session and at the end of the session. They can encourage client engagement by showing understanding of the situation, seeking elaboration, or signalling a transition to a new focus.

Focus and Flow of the MI Session

The goal is to elicit as much change talk as possible and to allow expression of ambivalence before cautiously moving to discussion of specific treatment goals and plans. Facilitators should not rush the process, and a variety of strategies for eliciting change talk provide the opportunity to comfortably focus on these tasks. The client’s level of change talk and ambivalence will direct the facilitator about the appropriate pace. For example, if a client is very reluctant to consider change, then the facilitator should spend more time encouraging them to voice their ambivalence. If the client is expressing a significant amount of change talk, the facilitator should focus on strengthening it by seeking elaboration and examples. If a client is expressing a clear, non-ambivalent desire to start the process, the facilitator should spend more time discussing the online workbook and potential plans for change.

Rolling with Resistance

Clients may express the opposite of change talk: “sustain talk.” Sustain talk entails statements that demonstrate reluctance to change or satisfaction with the current situation. Facilitators should resist the natural impulse (the “righting reflex”) to correct the clients or “make things right” for them. Instead, facilitators should not argue or confront the client about this resistance; they should “roll with it” using a variety of techniques. The goal is to have the client feel understood, which is often sufficient to allow the client to discuss other aspects of their ambivalence. Some techniques that can be used include simple reflections, overshooting reflections, shifting focus, or emphasizing personal control in an empathic and reassuring fashion. For example:

Facilitator: You are doing this because it is important to your wife. (*simple reflection*)

or

Facilitator: You believe there is nothing you can do about your problems.
(*overshooting reflection*)

or

Facilitator: I think we are getting ahead of ourselves. I really want to understand what has been happening for you. (*shifting focus*)

or

Facilitator: I really can’t tell you what you should do here. Any decision needs to be your decision. (*emphasizing personal control*)

Providing Advice

The goal of motivational interviewing is to elicit motivation – not to provide unsolicited advice on how to achieve success. However, sometimes clients will ask for specific advice, and the facilitator is able to provide some thoughts or ideas. To maintain the spirit of the motivational interview, it is crucial that the facilitator emphasize the importance for the client to identify their own ideas based upon suggestions from the facilitator and the online workbook. Often, reflecting the feeling behind the request for advice is a good starting point. For example:

Client: What do I need to do to stop going to the bar?
Facilitator: This is important to you. You are wanting to know the best way to be successful. There are lots of ways, and your ideas are important here. What thoughts do you have?

or

Client: What do I need to do to stop going to the bar?
Facilitator: Based upon what you have said about what has been helpful for you in the past, there is a section in the online workbook on [topic] that might be especially of interest to you.

THE MOTIVATIONAL INTERVIEW SESSION

The actual motivational interview session should adhere to the structure outlined in this section.

Introduction

During the initial moments of the session, facilitators must discuss confidentiality and informed consent. Participants will have already signed consent forms online but should still be reminded of key points (e.g., that the sessions will be recorded). Facilitators should also check that the details on the Record Form are correct.

Once the recording has started, a brief statement should be used to begin the motivational interview process. For example:

Facilitator: Okay, I know you have completed some assessment questionnaires online. I have a summary of that information, but I want to find out from you directly a little more about your gambling-related concerns.

Elicit Change Talk

A number of opening questions can be used to elicit the client's motivation to change, including their difficulties experienced and the potential benefits of not using cannabis. For example:

Facilitator: Can you tell me about why you decided to participate in this study? I assume that you have some concerns about your cannabis use. Tell me about them.

or

Facilitator: What makes you think you need to change your cannabis use?

or

Facilitator: Have other people said something about your cannabis use? What kinds of concerns did they have? Do you have similar concerns?

Once the process is rolling, facilitators should simply keep it going by using reflective listening, asking for more detail, asking for more examples, asking for elaboration, and so forth. The more the client talks about their motivations, the stronger their commitment is likely to become.

Facilitators should become more specific in style if this is necessary to keep the client going. They can also use the assessment information to elicit more. Facilitators may need to ask some specific questions about the details of gambling. For example:

Facilitator: During the assessment interview, you reported that your friends have commented on the amount of cannabis that you use. How did that come about?

or

Facilitator: You mentioned that you have previously spoken to your minister about cannabis. What led you to do that?

Facilitators should be sure to summarize the concerns identified and ask, “What else?” The four areas to cover are:

- Financial concerns
- Relationship problems
- Emotional difficulties
- Physical/Health difficulties

The positive aspects of cannabis should be explored as well as the negative ones. This can be done by first asking the client what they like about using cannabis. Then, this can be followed by continued exploration of the negative aspects of continuing to use and the positive aspects of quitting. For example:

Facilitator: What do you like about cannabis? ... What else?

then

Facilitator: What are the not so good things? ... What else? What's going to happen if things continue the way they are now? How much longer can things continue like this?

There are a number of specific techniques that the facilitator can use to elicit change talk and explore ambivalence. The facilitators should incorporate as many as feels comfortable and natural within the available time, although no technique is essential. These techniques include:

- *Completing an informal decisional balance exercise* – A formal decisional balance exercise (see Appendix B) is not possible using a telephone interview. Instead, the facilitator can ask about the good and not so good aspects of cannabis use, and possibly about changing.
- *Asking about the future* – One strategy is to ask the client to envision their lives in five to ten years. This would involve querying them in a curious and non-judgemental fashion about how their cannabis use might fit into this. What would life be like if they stopped (or cut back on) cannabis? What about if they continued to use with the same frequency? The goal of this exercise is to underscore any discrepancy between a person's goals and current behaviour. It can also introduce a discussion of the client's values.
- *Asking about the past* – This simply involves asking the client about their life before cannabis became a problem for them. This discussion is an opportunity to promote a sense of self-efficacy (e.g., highlighting that the client was able to function well at one point) and underscore a discrepancy between values and current behaviour.
- *Asking directly about client values* – This involves asking the client questions about what they value in life in order to highlight discrepancies. What is important to them? What are their important values? When they make important life decisions, what do they consider? How does gambling relate to this?
- *Querying extremes* – This involves asking the client what the best- and worst-case scenarios are. What is the worst that could happen if their cannabis use continues like it is now? What is the best possible outcome if they decide to quit or reduce their cannabis use?
- *Developing a discrepancy* – This involves focusing on the discrepancies between what the client is currently doing (i.e., current behaviours) and what they want (i.e., their values, goals, and aspirations). Many techniques lend themselves to this, such as querying extremes, asking about the future, asking about the past, or completing a decisional balance exercise. For example: "That's interesting. On one hand, you use cannabis to reduce stress. On the other hand, your use is actually creating more stress for you."

If it is difficult to elicit concerns, then a gentle paradoxical strategy can be used. For example:

Facilitator: I am not sure that you really want to tackle this now. It doesn't seem like you have many concerns.

or

Facilitator: It seems that you really like cannabis. Do you like it too much to give it up?

or

Facilitator: I am not sure how you would benefit from quitting cannabis.

It is also important to emphasize personal control. For example:

Facilitator: What would you find helpful for us to talk about today?

Provide CUDIT-R Feedback

At some point during the session, facilitators should provide feedback on the client's CUDIT-R score (completed as part of the initial screening assessment questionnaire). The following scripts may be used:

Facilitator: As part of the initial assessment, you completed a questionnaire that measures the extent of your cannabis use problems. This questionnaire has been administered to thousands of people who use cannabis. It is a good indication of severity of problems. If you would like, I can look up your score? Scores range from 0 to 32 on this scale.

Facilitator: Your score is [*score*]. Anything 12 or greater puts you in the substantial level of problems range. Does that surprise you? (*If not*): It seems like you have good insight into this.

Assess Risk of Harm

At some point in the session, the facilitator should assess risk of suicide. Often, this can fit naturally within a discussion of emotional distress associated with their cannabis use. If the topic does not arise naturally, the facilitator should introduce it toward the end of the session. For example:

Facilitator: Before we end, I just wanted to check how you are feeling. Have you had thoughts that life is not worth living? Have you thought of harming yourself? Are you thinking of suicide?

Should concerns of self-harm or suicidal ideation arise, facilitators should refer to the suicide protocol. This entails administration of the Scale for Suicidal Ideation (SSI). Specific instructions are provided for each range of scores that a client could fall into. All cases that require administration of the SSI should be reviewed with Dr. David Hodgins (or another registered psychologist in the Department of Psychology) as soon as possible.

Affirm the Client

At some point in the session, it is important to provide an affirmation of the client. This affirmation must be congruent and genuine and should, therefore, be inserted at the most appropriate section of the motivational interview. For example:

Facilitator: I really respect the fact that you are talking about this problem.

or

Facilitator: It sounds like you are very committed to your children.

or

Facilitator: I really appreciate your openness to talk about this.

Summarize

As the session is moving toward termination, it is important to summarize the discussion, seek some form of commitment from the client, and promote self-efficacy for making behavioural change. For example:

Facilitator: Okay, I want to make sure I understand. You have been concerned about *[repeat change talk and ambivalence expressed]*. Did I miss anything? I hear that you really want to do something about this. Are you ready to commit yourself to doing some real work around this issue?

Ask for Commitment

Note that there is typically something that you can connect with the concept of commitment. For some clients, they may only be committed to thinking more about the pros and cons of cannabis use. Rulers (10-point scales) are useful tools for commitment and self-efficacy discussions. For example:

Facilitator: On a 10-point scale, where 0 = “not at all important” and 10 = “very important,” how important is it to you to make changes at this time?

then

Facilitator: On a 10-point scale, where 0 = “not at all” and 10 = “very,” how confident are you that you could make changes if you decided to?

After obtaining the client’s rating, you may then explore factors that might make it more or less difficult for the client to achieve their desired change or factors that would move them further along the respective scale (i.e., toward a score of 10). Facilitators should ask the client what might make it more difficult for them, what might make them more successful, and what makes them think they can accomplish their goals. Information elicited in this conversation might provide some ideas of how to connect the workbook content to the individual’s concerns.

Promote Self-Efficacy

It is important to inquire about previous success at behaviour change, such as quitting smoking, drinking, other substances, or other serious bad habits. If the client is able to identify a relevant experience, then follow-up questions should be used to explore how this success was achieved. For example:

Client: I quit smoking a few years ago.

Facilitator: How were you able to do that? What did you do that was helpful?

Strategies identified should be underscored as potentially important in tackling the cannabis problem. Similarly, if a client has had previous periods of success in reducing or stopping their cannabis use, it is important to ask them how they achieved that success, and to reflect this back to them. Facilitators might also be able to connect this previous success to the client's concerns. For example:

Facilitator: That's interesting. Some of the strategies you used to quit smoking are actually listed in the workbook as strategies to stop using cannabis.

“Sell” the Workbook

If the client is in the workbook condition, and if it has not previously been introduced, discuss the value of the workbook with the client. A brief description of the workbook should be provided, with an emphasis that it contains tips and strategies that successful people who used to have problems with cannabis have used. If the client identifies a strategy that is contained in the workbook, then this should be noted. It may be easiest to note possible ways to connect the workbook to the client's ideas throughout the session, and then make those connections at the end of the session. The purpose of making this connection with the workbook is to motivate the client to look at it after the session. For example:

Facilitator: That's interesting. There is a section on [*topic*] in the workbook. It sounds like that may be important to think about for quitting cannabis, too.

The goal is to increase the client's curiosity to use the workbook, not to review each example of what they might find helpful. Another point that facilitators should use to enhance the client's curiosity is mentioning that the strategies in the workbook come directly from those who have successfully quit cannabis in the past. For example:

Facilitator: The strategies in the workbook have been compiled from asking previous cannabis users how they successfully quit.

Terminate the Session

Provide a final summary of the interview and affirmation, and assurance that self-directed treatment can be successful. For example:

Facilitator: So, what I am hearing you say is [*summary*].

then

Facilitator: I really respect how open you are with discussing this problem. That's a good sign. Being honest with yourself is important. Lots of people are able to accomplish their goals once they clarify for themselves what they want from life and why.

Additional Information: Using the Workbook

When terminating the session, facilitators should enquire whether the participant has looked at the workbook yet (if it has arrived).

- They should continue working through the workbook throughout the duration of the research study (over a period of 6-months). They can choose to skip around (i.e., complete activities in any order) or complete the activities in order.

After the Interview

Following the MI session, facilitators should finish completing the client Record Form and save the recording of the session. Record Forms and recordings should then be uploaded to the Microsoft Teams workspace. Facilitators should label these documents as recordform_name_sessiondate and recording_name_sessiondate. For example: recordform_Brad_Jul9.

If facilitators are unfamiliar with Microsoft Teams functions (e.g., recording), they should consult the University of Calgary FAQ page for Microsoft Teams at https://ucalgary.service-now.com/kb_view.do?sysparm_article=KB0033078&mkt_tok=eyJpIjoiWXPd05tTTJOV0l4TUdWayIsInQiOiIrbDExNFVoXC9VRStBShVIdVhvQ0FtTnBGZHZqMzJ2Rit1NlwwdUJMbks5Nm8xN3Z1SzJoVzJrYm9heHJCWjFkandvcXBqdZQZQ1pUemY5eEpJaFZHdGdvRFM2U1BSVVHTmdiWjN2bXlFYlJkQm5FbVpcL3VweWt5VndFcVI0YUVINSJ9#UsingMeetings.

Appendix A

Additional Resources for Motivational Interviewing

The following are additional motivational interviewing resources. These resources expand on the aims and processes of motivational interviewing and should be considered complementary to this protocol.

Hodgins DC, Swan J, Diskin KM. (2015). Motivational Interviewing in the Treatment of Problem and Pathological Gambling. In Arkowitz H, Westra HA, Miller WR, Rollnick S (Eds). *Motivational Interviewing in the Treatment of Psychological Problems* (2nd Ed). New York: Guilford Press.

Miller WR, Rollnick S. (2012). *Motivational Interviewing: Preparing People for Change* (3rd Ed). New York: Guilford Press.

Appendix B
Decisional Balance Exercise

Costs of staying the same	Benefits of staying the same
Costs of changing	Benefits of Changing