An Introduction to Motivational Interviewing
Adapted from Motivational Interviewing in Child and Family Serving Systems
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Motivational interviewing was developed in the early 1980s by Miller and Rollnick as a clinical method designed to support behavioral change while at the same time fully supporting client autonomy. It is a complex intervention comprising multiple techniques focusing on change of a specific problematic behavior - the “target behavior.” The clinician chooses strategies to guide the client toward this positive change in a collaborative and partnering approach.

In its most simple definition, “MI is a collaborative conversational style for strengthening a person’s own motivation for commitment and change” (Rosengren, 2018), with an additional definition being “MI is a person-centered counseling style for addressing the common problem about ambivalence about change” (Rosengren, 2018). In understanding MI, it is also important to know the four components that together are called the Spirit of MI: partnership, acceptance, compassion, and evocation (Rosengren, 2018).

Thousands of studies support the use of MI in hundreds of settings (Miller & Rollnick, 2013), primarily focused on individual behavioral change in substance use disorders, smoking, diet, exercise, and other health behaviors (Jiang et al., 2017; Lai et al., 2015; Borelli et al., 2015). Recent studies have focused on accurately measuring the effects of specific components of MI and adherence to its model (e.g. Báez et al., 2020; Hardcastle, 2017).

In addition to extensive applications of MI in health and behavioral health settings, MI has also been utilized in child and family-serving settings and has been found to be a promising evidence-based practice in various studies. In a systematic review, Hall et al. (2020) found that MI in conjunction with other evidence-based interventions improved engagement with families in the child welfare system, as well as workers’ levels of self-efficacy and empathy.
Child- and family-serving practitioners very often experience client ambivalence when working toward behavioral change. Shah et al. (2019) examined a number of MI studies and noted improvement in both parent and child mental health and in parenting skills, along with reduction in substance use and greater retention in services. Richmond and Borden (2020) noted the value of MI in helping youth set service goals. The Child Welfare Information Gateway (2017) also noted that MI is most appropriate as a strategy when there is a specific behavior targeted for change and that behavior can be changed, but the client is ambivalent about making that change.

As noted, a core value of MI is its support of client autonomy. A concern has been raised about the use of MI in child- and family-serving settings as many of these, such as child protection and juvenile justice, are involuntary. A recent meta-analysis found that MI increases clients’ experience of service use across a variety of settings, both voluntary and involuntary (Boyle et al., 2019). Further, in a recent landmark quantitative study, Forrester et al. (2020) examined interventions used in child and family social work to examine relationships between their fundamental components. MI, both in its techniques and spirit, was found to support the most successful interventions in this area. MI’s emphasis on engagement supports partnership with families, a particular strength in involuntary circumstances. In addition, MI techniques supported workers’ need to assert authority by balancing that with the goal of optimizing child outcomes. Finally, MI strategies, with their focus on behavioral change, were found to be congruent with the purpose of most interventions with families and children. In particular, evocation, the MI technique focused on eliciting and supporting clients’ inherent motivation toward positive change was central in successful interventions.

Another significant strength of MI is its effectiveness with families and children from diverse backgrounds. In addition, its attention to engagement with clients gives it the potential to lead to more socially just interventions and services (e.g. Ali et al., 2018; Lee, 2020; O’Neill, 2020).

References


To learn more about motivational interviewing, the SEEK website is a great place to start! The supplemental materials tab has several articles explaining how motivational interviewing works and how to apply it in your practice. You can also access the Motivational Interviewing Network of Trainers (MINT) website for more information on trainings and practice for motivational interviewing.
SEEK PQ-Re: Now Available

The SEEK PQ-Re (‘e’ for expanded) has been updated to include issues/problems that folks regularly wanted added and is ready for you to use in your practice! Importantly, we now suggest that your practice prioritizes which issues to target. The format is more user-friendly and greatly improved. We suggest all practices begin transitioning from your current SEEK questionnaire to the new PQ-Re, which can be viewed [here](#). A Spanish version can also be found [here](#). If a translation in another language is needed, please contact us. You can find more information about the PQ-Re and why we decided to update the screener under the PQ-Re tab in the ‘SEEK Materials’ section of our website.

SEEK Webinar: Christopher Wirt - Helping Parents Change Behaviors

On Wednesday, January 31st, 2024, Christopher Wirt, LCSW-C, led a SEEK webinar on Motivational Interviewing (MI) through experiential learning. Participants gained an understanding of parents’ and patients’ thinking and behavior around change, as well as the core skills required for motivational interviewing. A recording of the webinar may be viewed [here](#). A handout to assist PCPs with motivational interviewing, which includes evoking questions and questions to evoke change talk, can be found [here](#).

Christopher Wirt LCSW-C is an adjunct instructor at the University of Maryland School of Social Work and was until recently the Director of its Title IV-E Education for Public Child Welfare Program. He is now the Executive Branch Director at Bethany Christian Services in Maryland, DC, and Virginia, where he oversees Transitional Foster Care for unaccompanied minor immigrants, post release services for children and families who’ve been reunited after immigration, and adoption services. He has two decades of experience working with children, families, and students.

Abstract Accepted for Pediatric Academic Societies 2024 Meeting

We are delighted that our abstract, “Comparing Two Training Modalities for Primary Care Professionals Implementing the SEEK Approach”, was accepted for the 2024 Pediatric Academic Societies (PAS) Meeting this May in Toronto. Dr. Dubowitz will present our findings, comparing the effectiveness of an independent online training approach with a Maintenance of Certification (MOC) activity in training primary care professionals (PCPs) to use SEEK. If you plan to attend the meeting and would like to meet with Dr. Dubowitz, please let us know.

Practices Adapting the SEEK Approach

Though the SEEK PQ-R and PQ-Re were initially designed to be filled out by parents of children ages 0 - 5, a few practices have used the SEEK approach for children of all ages (0 - 18). The issues parents and families of young children may face clearly exist for those with older children too. This broader use provides an opportunity to continue providing resources to families as their lives change, as well as to families whose children came into the practice after the age of 5 who may have never been exposed to SEEK or something similar. One practice has taken this a step further and has adapted the questionnaire for teenagers and plans to study its utility.

If you are adapting SEEK to be used by your practice’s adolescent population, or are using it another, unique way, please let us know. We’d love to learn more about your experience.

SEEK Ambassador Program

Word of mouth is an effective way to help disseminate the SEEK approach. We encourage PCPs and others implementing SEEK to become informal SEEK Ambassadors! This is voluntary, but please consider sharing your SEEK experience with colleagues who may be interested. To help, we have a [one-page summary](#) and an [8-minute video](#). Please contact us with any questions. Thank you for your consideration!
Wrapping up the National SEEK Study

After more than 5 years, the National SEEK Study will be ending in June 2024. We recently concluded our collaboration with 21 practices in the Study; we would like to thank them and their staff - present and former - for their tireless participation, our former members on our UMB team, and all who have supported our Study effort. We will keep you posted of study findings and any papers we publish.

New Article about SEEK Published

We would like to spotlight a new article about SEEK at Michigan State University's Center for Rural Health Strength of Rural Spotlight Series, written by Pam Singer. Singer is the President and CEO of Midlands Kids First, an organization working to support at-risk children and families in the Midland, MI region. The article highlights some of the benefits of using SEEK and why a practice may wish to adopt it, particularly in a rural setting. If you are interested in reading the full article, you may do so here.

Questions or Concerns?

The SEEK project team is always available to help. Please don’t hesitate to contact us! Email Dr. Howard Dubowitz (hdubowitz@som.umaryland.edu), Rose Belanger (rbelanger@som.umaryland.edu), or Vyas Muralidharan (vmuralidharan@som.umaryland.edu).

Please share this Newsletter with anyone who may be interested. Let us know if we should add them to our Friends of SEEK list to receive this, and only this. Also, let us know if you do not wish to receive this Newsletter by emailing Vyas Muralidharan (vmuralidharan@som.umaryland.edu). We welcome feedback and suggestions regarding our SEEK Newsletter.