

# Using Motivational Interviewing to Help People Manage Their Diabetes

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## CLIENT-CENTERED CARE

Motivational interviewing (MI) is a well-known approach to client-centered care. It is especially useful in helping clients overcome ambivalence and move forward to make important lifestyle changes. Ambivalence is simultaneously wanting and not wanting something or wanting both of two incompatible things.

Some people with diabetes are ambivalent or resistant to taking steps to manage their condition. This presentation showcases two brief coaching conversations with a client who is ambivalent about managing his diabetes.

## CORE SKILLS OF MI: O-A-R-S

### Language Used by the Coach

**Open questions:** Invite the client to think before responding and promote engagement and exploration. Open questions show that the coach is listening and making a sincere effort to understand what is being said. The opposite is a closed question, which calls for a short answer and limits the client's options for responding.

**Affirmations:** Accentuate the positive, recognize and acknowledge that which is good, including the client's inherent worth. To affirm is also to support and help establish a trusting, collaborative relationship between the coach and client.

**Reflections:** Follow open questions and restate what the client has said. Ideally, about two reflections are provided for every open question asked. Reflections show that the coach is listening mindfully and attempting to understand the client's perspective. The primary types of reflections are simple and complex.

**Summaries:** Pull together several things (change talk) that the client has stated. Summaries shine a light on the client's experience and invite further exploration. The client can hear his/her change talk stated for the third time.

### Language Used by the Client

**Change talk:** The client's own statements that favor change. It is advantageous for the client to hear the coach reflect change talk.

**Sustain talk:** Arguments for not changing, for sustaining the status quo. There is no benefit to reflecting the client's sustain talk.

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## A Metaphor for Change - The MI Hill



## A CONVERSATION ABOUT CHANGE

### ➤ Example A:

**Client** – “My doctor tells me that I need to monitor my blood glucose regularly.”

**Coach** – “What was your last A1C measurement?” (*closed question*)

**Client** – “I think it was over 12%. It’s not really a problem.” (*sustain talk*)

**Coach** – “That’s very high. Did your doctor explain the consequences of high blood glucose or hyperglycemia?” (*closed question*)

**Client** – “Yes, but that’s what is normal for me.” (*sustain talk*)

**Coach** – “Well, that’s *not* normal. You must take steps immediately to get your blood glucose within range. An A1C over 10% is way too high. You don’t seem to be taking your diabetes seriously. If you don’t make some changes, you could go blind or even go into a coma.”

**Client** – “You’re just trying to scare me. I’m young. I can get serious about diabetes when I’m older.” (*sustain talk*)

### ➤ Example B:

**Client** – “My doctor tells me that I need to monitor my blood glucose regularly.”

**Coach** – “That’s good advice. Your doctor cares about your overall health.” (*complex reflection*)

**Client** – “Yes, he is always telling me that type 2 diabetes is as serious as type 1, but I feel fine. I’m just glad I don’t have to take insulin. I hate shots.” (*sustain talk*)

**Coach** – “The complications of type 2 diabetes are as serious as type 1.” (*complex reflection*)

### Example B: continued

**Client** – “But I feel fine. I haven’t had any health problems. Except for diabetes, I’m very healthy.” (*sustain talk*)

**Coach** – “And you want to stay that way.” (*complex reflection*)

**Client** – “Definitely. I’m young. I have a very active life.” (*change talk*)

**Coach** – “What types of leisure activities do you enjoy?” (*open question*)

**Client** – “I enjoy any activity that takes me outdoors – mountain biking, hiking, fishing, camping. I try to spend my weekends outdoors.” (*change talk*)

**Coach** – “Those are great ways to be physically active. (*affirmation*) You want to stay healthy so you can live a long life. You’ve shared that you enjoy outdoor physical activities. Physical activity and exercise can be a big help in keeping your blood glucose within the range recommended by your doctor. We could discuss some specific ways that exercise and other habits impact diabetes. Then you could decide on a small goal to work on. How does that sound to you?” (*summary*)

**Client** – “That sounds good to me.” (*change talk*)

## DISCUSSION

The dialogue of example A is not consistent with the communication style of MI. The coach falls into the “question-answer trap” of asking one closed question after another without reflections. At the end of example A, the coach, who has assumed the role of “expert,” and client are at opposing positions.

Example B illustrates the core skills of MI. Notice that open questions are followed by complex rather than simple reflections that keep the client talking and sharing. An affirmation is provided and the coach summarizes the brief conversation before moving forward together to set a goal.

## ASK YOURSELF

Ask yourself these questions at the end of a conversation with a client:

- Who is voicing the argument for change?
- How are you feeling?
- How do you think the client is feeling?
- Where is the client on the MI “hill”?
- Would you say that the engagement is enhanced or diminished?
- Are you and your client arriving at a common goal in the consultation?

Reference: Miller WR and Rollnick S. *Motivational Interviewing: Helping People Change*, Third Edition. New York: Guilford Press, 2013.