

TREND OR TOOL?

EXPLORING THE POTENTIAL OF MOTIVATIONAL INTERVIEWING IN YOUTH WORK

By Ellen Saliare

A key feature of high quality youth work is the youth workers' ability to authentically partner with young people, recognizing and celebrating their strengths, capacity, and ideas. Although a predisposition to this work and personal qualities can be an important requirement for successful youth workers, access to training and coaching can improve their quality of work (National Afterschool Association, 2011). This training often focuses on topics such as adolescent development, supporting youth leadership, risk behaviors, and facilitation. Recently in the adolescent sexual health community, there has been a trend to train youth workers who work as sexuality educators in motivational interviewing (MI).

MI has been a thread throughout my professional youth work and sexuality education experience. My background with MI started when I took a short course in it while in graduate school for my Master's of Public Health. In 2016, the leadership at the Annex Teen Clinic, where I am employed, decided to have all staff trained in MI as a way to further the work of our strategic plan's focus on authentic youth-adult partnerships. During the summer of 2016, all Annex staff participated in a MI training, which included several follow up and coaching sessions. Finally, I participated in an Intermediate MI training December 2017. Given the time and resources that have gone towards supporting staff training in MI, it seems timely to investigate how the investment has paid off.

The purpose of this paper is to explore whether motivational interviewing enhances youth-adult partnerships and quality of youth work, including group facilitation. I interviewed 12 practitioners trained in MI to collect their thoughts, opinions, and recommendations about MI as a tool in youth work. Some interviews were individual while others were in a focus group, depending on their availability. That group includes other educators at the Annex, the executive director of the Annex, and colleagues doing similar work at another community-based organization.

MOTIVATIONAL INTERVIEWING

Motivational interviewing (MI) is a person-centered communication model that focuses on supporting individuals in exploring their intrinsic motivation for change and resolving ambivalence. Developed by psychologists William Miller and Stephen Rollnick in 1983, MI was originally used in counseling individuals with alcohol and substance disorders. In the following decades, the practice of MI expanded to include a range of health behaviors (Resnicow et al., 2002) as well as non-health behaviors (e.g., school truancy). MI has also been used successfully in the field of adolescent sexual and reproductive health, including in HIV outreach (Outlaw et al., 2010) and in evidence-based programs like the Safer Sex Intervention (Shrier et al., 2001). The practice of MI is characterized by its "spirit" and a set of practitioner skills and processes.

Although MI has specific communication tools, it is often described as a “way of being” rather than a technical intervention.

Four elements make up the “spirit” of MI:

- Collaboration
- Evocation
- Autonomy
- Compassion

The collaborative nature of MI means that the relationship between the practitioner and client is grounded in mutual understanding and the client’s experiences and point of view. The practitioner rescinds the role of “expert.” A key tool for operationalizing this is evocation, drawing out the ideas and opinions of the client rather than the practitioner imposing ideas upon the client. In the collaborative relationships that are at the center of MI, the practitioner emphasizes the autonomy of the client. The possibility of change, as well as its shape and texture, rests with the client, not the practitioner, and MI should reinforce the power individuals have to make choices in their life. Lastly, the compassionate nature of MI is rooted in a commitment to understanding and acceptance of each person’s values, choices, emotions, and needs.

The four fundamental processes of MI are engaging, focusing, evoking, and planning. This structure is intended to build a relational foundation of trust that transitions to a non-directive discussion of what issues the client wants to address, and if appropriate, planning for change. The overall process is intended to be responsive to how a conversation goes and acknowledges that planning may take place only if the client chooses to move to that phase, as the autonomy of the client is at the forefront of the conversation.

PRACTITIONERS’ DESCRIPTIONS OF MI

When asked to describe MI, practitioners tended to describe it in broad terms rooted in the spirit. They described it as a “technique,” “style of conversation,” or “approach” characterized by two things: its purpose and nature. Practitioners described MI as a tool with a very specific purpose: to aid in behavior change. One practitioner described the purpose of MI as “to not only meet people where they are but get them to understand a specific change they want to make in their life, around a behavior.” Another practitioner describes the purpose as, “to assist them in an effort to help them work through some issues that they have some ambivalence about, that they are struggling to move forward with.”

The second theme that emerged in practitioners’ descriptions was the nature of MI and the mindset of practitioners. “Collaborative” was a term that came up frequently, that practitioners are “talking with people, it’s not at them.” That distinction seemed particularly relevant to how people in “helping professions” do their work. One practitioner described the collaborative nature of MI as

Letting the person you’re talking to kind of lead the conversation, there’s a plan in mind, you’re not letting them fully lead the conversation but the direction of the conversation and not like the answers but you’re not asking any leading questions. You’re trying to get them to whatever place on their own. . . . it’s fueled by them.

This practitioner highlights the balance between asserting and rescinding control over the conversation. The MI practitioner should let the person they are talking with decide on topics, for example, but should use MI tools to ensure that there is some focus and structure to the conversation. In describing MI, practitioners often referred to the spirit of MI rather than the processes or specific tools of MI, which may be related to their experience in using MI.

PRACTITIONERS' EXPERIENCE WITH MI

All practitioners had at least one multi-day introductory training in MI, with five having also participated in one or more intermediate trainings. Their experience with using MI varied by their role and their ability to confidently identify ways they have been using MI in their work. The majority of practitioners facilitate classroom or small group programming, with occasional opportunities for one-to-one conversations with young people in the course of that work.

The practitioners who were able to clearly articulate how they have been using MI were those who have worked in the role of Health Mentor, a sexuality educator that does one-to-one education and counseling in addition to large and small group work. These were the practitioners who had received intermediate training, which was offered to individuals in that role. They had the benefit of doing one-to-one work in their roles, which was the focus in training, but these practitioners were also able to highlight how they were using it in other ways. One practitioner said, "It's a cool technique; it's really versatile in like there are different things you can pick out of it to meet the needs of the space you're in." They identified one-to-one conversations as the primary way to use MI, but also highlighted its usage in small groups. While many of them said they use MI in their work, one Health Mentor practitioner expressed that MI is

...difficult without like really practicing, since training I can say that I've used it a handful of times, not many. I've used bits and pieces, like with reflections and stuff, but not really thought out and obviously a lot that has to do with time.

As that quote demonstrates, MI requires practice and consistent reflection in order to feel confident about it. The majority of non-health mentor practitioners said they were unsure of how they have been using MI in their work or if they have been really using it. Several said that they have been using it in their personal life, and infrequently in work settings. This was linked to several challenges.

CHALLENGES TO USING MI

The practitioners identified (a) doing group work, (b) limited time, (c) inconsistent youth attendance, and (d) tensions within programming as challenges to using MI.

USING MI IN GROUPS

If someone is facilitating classes or groups, it can be difficult to have more than a couple minutes of one-to-one time with a young person. Regarding group work, practitioners felt that it could be possible to use MI in a group, if the group was focused on a specific topic. One practitioner explained as

I think it would maybe be tricky, depending on the group and I guess I haven't really thought about it in like a regular class, but if I think about it in like the teen mom group, I feel like it could. It's something really specific, everyone is there for the same reason and it's easier to evoke certain things. Obviously people are thinking different things and wanting different things for themselves, but if maybe there is a common underlying theme, where like they are all there for the same reason, I can see how like MI could be really beneficial, like really work in a group setting.

While several practitioners felt challenged by thinking of circumstances where they could use MI in a group, this individual described a specific context that would support its usage. MI can be used in groups; Miller and Rollnick (2012) suggest that it can be appropriate and useful to practice MI in a group setting, with the caveat that practitioners need to be well practiced in MI and understand how group dynamics can influence the effectiveness of MI. For example; an individual has less time to speak in a group than they would in a one-to-one setting, so there is less time for them to talk about changes they might make or have already made.

The training practitioners received focused on using MI in one-to-one conversations rather than in groups. This focus on one-to-one communication in training may have influenced practitioner understanding of how MI can be used successfully. One practitioner explained that

I feel like I've been able to incorporate certain elements of it, and just sort of little interactions with young people, in the classroom and things like that . . . I've been able to like practice it in my personal life, which is cool. Having an understanding of being part of the MI spirit but I think that it's difficult to do really like go through . . . to really consider what it is that I'm doing in those small interactions as MI. There's so many pieces to it, it's hard unless you are in a one-to-one conversation, to feel that like there's room in those to really incorporate it.

It may have been difficult for these practitioners to say confidently that they could use MI in a group setting because their training focused on one-to-one communication and they have not had the time, support, or experience they need to fully integrate it into their thinking about MI.

LIMITED TIME AND INCONSISTENT ATTENDANCE

Even for a health mentor, who has one-to-one conversations, practicing MI can be difficult. Health mentors expressed that being able to authentically use MI required longer interactions or the ability to see a young person for multiple short interactions. As one health mentor pointed out, young people may have inconsistent attendance at school, which may lead to months between one-to-one conversations. A young person might return several weeks later and want to address a different topic. The complexity of young people's needs may also exacerbate the difficulties of limited time:

There's a student—they've come in a couple time, and it's like they have so much going on—and it's like, you know, you want to be there for them and then sometimes it's like there's only so much time before they have to go to class.

As this practitioner points out, it can be challenging to recognize that a young person may have several concerns or topics they want to address but are able to discuss only a portion of them due to limited time.

TENSIONS WITHIN PROGRAMMING

Another challenge for practitioners was the tension between expectations or requirements of programming and what would support using MI. Many of the practitioners implemented evidence-based programs that required a high degree of fidelity. Implementing a program with fidelity requires that a practitioner follow the lessons as they are written, occasionally having to use scripts, and have limited flexibility in terms of what adaptations they can make. With the limitations of a class period and the requirement to finish content in a specific amount of time, an educator may not have time to allow for other topics that come up. For the practitioners, this may conflict with the aspects of MI that allow a young person to choose where the conversation goes and for the adult to rescind some control over what is happening, as they have to maintain some control in order to meet programming requirements. Another tension comes from working in schools or community settings as a guest, where there are other adults (e.g., teachers) who may have different attitudes, or where there are policies in place that may counteract the spirit of MI. However, all practitioners, regardless of their confidence in their usage of MI or the amount of time they had used it, identified benefits to MI in addition to the challenges.

BENEFITS OF USING MI

Themes that emerged as benefits were the alignment between MI and positive youth development, how MI has enhanced practitioners' youth development-friendly communication skills, and MI's perceived effectiveness in supporting young people in making change in their lives.

ALIGNMENT WITH POSITIVE YOUTH DEVELOPMENT

All of practitioners identified MI as aligning well with the positive youth development frameworks and concepts at the heart of their work. Honoring the autonomy of the young person by providing options and through supporting them in making their own choices was an example that emerged many times. This non-directive counseling and education is a best practice in our field. The administrator I interviewed brought a different dimension to the alignment of positive youth development and MI, and the benefits of it. He articulated that MI was not only consistent with positive youth development principles, but provided an additional "language" and framework to use in thinking about the work of the organization. He added that this language "is very powerful for helping the broader community understand the value of providing comprehensive sexuality education as well as confidential services to young people." This common language is shared between staff in different roles at the organization, which can aid in bridging between departments. The framework, rooted in authentic partnerships with young people and integrated with

positive youth development, provides a way to reflect on and evaluate the work being done at the organization. Some educators have had young people explicitly name the value of being able to make their own decisions:

I've had a couple students say, "You've helped me figure it out for myself" . . . they have the ability to figure it out for themselves and sometimes it's just saying the right things to give them the platform to do that....

Comments by youth, such as the one shared by this practitioner, affirmed for the practitioners that their use of MI was appreciated and noticed by the young people they worked with. Practitioners linked this to the enhancement of their communication skills through MI training.

ENHANCEMENT OF COMMUNICATION SKILLS

The enhancement of one's communication skills was a main theme in the interviews about MI. Being trained in MI was identified as largely improving one's listening skills and the quality of what one says. Several practitioners mentioned asking "open-ended questions" and providing "complex" affirmations and reflections as skills they have learned from MI training. MI emphasizes not only using affirmations, but providing "complex" affirmations that are specific and demonstrate an understanding of the other person's life, qualities, and efforts to make the choices that will benefit them. Some practitioners learned in their training that people need five or more instances of positive feedback to balance one negative instance, and some practitioners shared that many of the young people they work with do not seem to receive much affirmation or positive feedback in school. One practitioner described the communication skills benefits as

So many times you want to . . . you want to jump in, so it's taught me in short time to listen more and then really focus on like what it is, even though sometimes it's not clear why they're there. Just like listening more and really practicing, really focusing, trying to evoke certain things from them, which is something like I think anyone in our work should do...

This quote highlights that MI requires attention and work on both sides of communication, what one says as well as what one does as a listener.

MI may provide practitioners with guidance and tools to counteract some natural communication habits such as talking more than listening. As one practitioner said, "What it has done for me is to always take a step back in situations and not always be adding, which I really appreciate." For some practitioners, "stepping back" was described as a way to provide opportunities for young people to assert control of their lives in ways that they may not be able to in other contexts or relationships. As one practitioner said, "Youth really need to have control in their lives . . . [With MI you are] asking them questions about their lives so they can make decisions for themselves." This lack of control was mentioned as a common experience for young people in schools by some practitioners, which is where the majority of the people interviewed did their work. This capacity to relinquish the authority role in the relationship was identified as potentially leading to essential experiences of building self-efficacy and skills, which is an important element in positive

youth development and the integration of it into adolescent sexual health education (Office of Adolescent Health, n.d.).

PERCEIVED EFFECTIVENESS IN PARTNERING WITH YOUTH

The perceived effectiveness of MI was closely related to the ways in which MI supports authentic youth-adult partnerships. This is especially true for the collaborative relationships established in MI that acknowledge the strengths and valuable contributions of each person, which inherently includes the adult not occupying an authoritative, decision-making role. MI provides explicit guidance that the practitioner should honor the autonomy of the other person; the practitioner is directed to not make decisions for the other person and to ask permission before sharing information. Some practitioners linked this relationship structure as supporting youth agency, as the quote below demonstrates.

Sometimes if they're in situations where they are overwhelmed, if they feel like they don't have agency, it can illuminate their agency and like take that role off of you . . . I don't have all the answers, and that's good.

For this practitioner, it also supported their understanding of their role and appropriate boundaries. Another practitioner described how being trained in MI provided them with role clarification and guidance around appropriate boundaries with young people by saying, “I really feel like a big benefit as a person on this side of doing MI is that it really takes the pressure off you to give good advice . . . to figure it out for them.”

While the challenges practitioners shared certainly informed their experiences, the benefits to their professional skills, understanding of their role, and ways MI put their commitment to positive youth development into practice left them with an overall positive view of MI.

RECOMMENDATIONS

Despite uncertainty or the challenges to using MI, all of the people interviewed enthusiastically recommended that everyone who works with youth should be trained in MI. One reason is the way MI training could be integrated into and enhance one's practice of positive youth development and youth-adult partnerships. Zeldin, Christens, and Powers (2013) identified four core elements of youth-adult partnerships: authentic decision making, reciprocity, natural mentors, and community connectedness. When practicing MI, young people are at the center of the decision making and participating in relationships that are reciprocal, where both young person and adult are contributing. Natural mentors refers to adults who have the characteristics (e.g, active listeners, non-judgemental) young people find necessary in order to have instrumental, respectful relationships with them (Zeldin et al., 2013). These characteristics align with the skills and mindset explicitly used in MI. The use of MI in interactions with young people may increase their community connectedness by not only facilitating relationship-building with adults in their community but also making those relationships meaningful. In the field of adolescent sexual and reproductive health, young people experience many barriers, including stigma and poor access, and the practice of MI may be especially helpful in ensuring that their experiences with adults in the field facilitate access and community connectedness.

Practitioners' recommendations were not limited to professionals working with young people around prevention or behavior change (e.g., substance use, pregnancy prevention) or by the type or amount of interactions they have with young people. One reason was that being trained in MI can support a valuable shift in mindset about working with young people. For one practitioner,

[The] change in mindset is the most valuable thing on the large scale. . . getting teachers and youth workers in general in the mentality of letting young people lead the conversation, whether or not the specific skills . . . I think the main objective [of a training] should be more about embodying the spirit of MI and that shift in mentality in how we speak to young people.

While this practitioner emphasized the aspects of MI training that focus on the MI spirit, the communication skills covered directly support the understanding of the spirit by providing concrete tools to operationalize the spirit. Youth work training can include abstract frameworks that may be difficult to translate into action for new youth workers; a benefit of MI is that it is a specific training that provides practitioners with concrete phrases and tools they can use. It may be easier for supervisors to evaluate performance and for practitioners to self-evaluate themselves.

Every practitioner interviewed expressed wanting more formal or informal training on MI. In fact, they shared how much they appreciated the opportunity to talk more about MI as part of this study. Formal “refresher” trainings as well as discussions of MI such as the ones that took place in this study were described as being very helpful in continuing one’s practice of MI. For practitioners, frequency was more important than the length of initial trainings, and it was recommended that people have more than one training. Frequent training or discussion about MI would help practitioners better recognize when are using MI and provide opportunities for feedback about how they are utilizing specific communication tools.

LIMITATIONS

There are some limitations to this study. First, young people who have participated in experiences where MI was used were not interviewed. As the content of the conversations the practitioners were having were about sensitive personal topics, and in situations where the young people were assured of confidentiality, it did not seem appropriate to interview young people about their experiences with MI. Based on evaluation of Annex educators through supervisor observations, educators are implementing programming with a high level of quality (100% scored a good or excellent score) and good or excellent scores on the personal qualities section which includes rapport and communication with program participants. Young people participating in programs also have provided positive feedback about comfort with Annex educators. This provides some insight into educator performance and young people’s experience with them.

A second limitation is that the people interviewed all worked in one field, adolescent sexual and reproductive health, in one geographic area. Their opinions and experiences may differ from professionals working with youth in different contexts. However, in that practitioners provided their thoughts about how MI was used in their role of partnering with young people, the findings of the present study may be relevant in other youth work contexts.

Finally, the majority of the practitioners interviewed are educators at the Annex Teen Clinic, and I am the director of their department. While it is possible that their comments may have been influenced by that, we are peers in our practice of MI and have open, non-judgmental relationships.

IMPLICATIONS

The benefits of this study are that it examined an understudied topic, which has real world implications for the training of youth workers. Organizations and those they employ benefit from standardized training and on-boarding. For those that work with youth, this study provides an understanding of how MI aligns with the positive youth development frameworks that are at the center of their work. For me and my organization, it has provided insights into how leadership can sustain the investment in MI training and the value of it. It also has implications for what future research should be done on the practice of MI in youth work contexts. Future research should look at young people's perceptions of MI, experiences of practitioners in different youth work fields, and how MI operationalizes specific positive youth development principles.

Based on the opinions and experiences of those interviewed, it seems clear that despite a need for continued support and training to effectively use MI, it can serve as an important tool for youth workers in increasing their capacity to authentically partner with young people. Youth work organizations should consider MI as training for their youth work staff, and include in that decision a plan for and commitment to continuing education on MI after the initial training. This may be especially helpful in serving as a foundation for new youth workers in learning concrete communication strategies and thinking more deeply about how they relate to young people. While it may be part of a trend to be trained in Motivational Interviewing, it can be a genuine tool.

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ABOUT ELLEN SALIARES

Ellen Saliaries is the director of sexuality education at the Annex Teen Clinic. In this role, she provides leadership, supervision, training, and program management as well as the facilitation of sexuality education and youth development programming. Ellen has a Master of Public Health in Community Health Promotion.
