

Talking to Change: An MI Podcast

Glenn Hinds and Sebastian Kaplan



Episode 12: The Engaging Process, Enhancing Autonomy Support, and Self-Esteem in MI, with Allan Zuckoff, PhD

Glenn Hinds:

Welcome again everybody to Talking To Change, A Motivational Interviewing podcast. My name is Glenn Hinds and I'm in Derry and I'm joined as always by my good friend, Sebastian Kaplan. Hi Seb.

Sebastian Kaplan:

Hey Glenn, how's it going?

Glenn Hinds:

Yeah, it's going the best. Today we're joined by Dr. Allan Zuckoff and we're really looking forward to talking to Allan in our emails beforehand. Allan promised us to have sore heads by the end of this, so that should be interesting. We know from talking to Allan previously in New Orleans and our own experiences, often through the MINT, we fully expect people to learn an awful lot from Allan's depth of wisdom and experience. But before we go on with that Seb, maybe you'd like to just remind people how they can contact us in the different formats and the different platforms.

Sebastian Kaplan:

Absolutely. So, there's a few ways to contact us and to send us questions and feedback. Our Facebook page is Talking To Change. On Twitter, the handle is @ChangeTalking. You can send us emails, direct emails, and that address is podcast@glennhinds.com. G-L-E-N-N-H-I-N-D-S.com. Also, I guess it safe to say, but people probably already know this, but if you're listening on iTunes or Stitcher or one of those other platforms, there's ways to leave feedback and ratings and such. So, we welcome all of that. So those are the various ways to contact us.

Sebastian Kaplan:

And we've been, Glenn and I, you and I talked to a few days ago and preparation both for this episode with Allan and just talking about the podcast in general and how it's going. One of the things we were talking about, which we wanted to mention now is that much of what we've been discussing would pertain certainly to a counselor / therapist type of professional person. But we, we certainly don't want to limit the podcast to that audience. There's a lot of motivational interviewing being done in other settings. In particular what we discussed where healthcare settings where physicians or nurses or other healthcare professionals have different kinds of interactions and relationships with their clients and patients. So, we're quite interested, right? In not limiting the scope and wanting to be sure



we're providing information in a way that's useful for much wider range of professional clientele I suppose, right?

Glenn Hinds:

Yeah. Yeah, I suppose. But it was, both of us are common from professional backgrounds that aren't primary care or in that world. So, we're hoping that what ourselves and our guests up until now I have been talking about can translate into those environments. So, we're keen to hear back from people who, who are in a primary care role or an allied professional role, their own experiences of the content of the podcast and any suggestions they might think would their particular situation. We're very keenly aware of the issue, particularly of brief and opportunistic interventions and where we can maybe talk a bit more of them or explore the mechanics of those types of conversations and in our podcast. So, we'd would be very keen to hear from anybody in relation to add some feedback. That will be fantastic. And I suppose we're also celebrating the fact that we are, and we really appreciated almost 10,000 people now have listened to all the previous episodes before today. So, thank you everybody who's come along and listen to one or more of the episodes. We're delighted by that.

Sebastian Kaplan:

Absolutely. I'm glad you mentioned that. It's fantastic. It's humbling and makes it all that much more enjoyable that people are listening and hopefully learning and enjoying it.

Glenn Hinds:

Yep. Fantastic. So, for today's episode, we're joined by Dr. Allan Zuckoff, who is Vice President for clinical program development at Vital Decisions. A company that provides MI-based telephonic advanced care planning services to people with life-limiting illnesses, a clinical psychologist by training, Allan spent more than two decades as a member of the department of psychiatry and psychology at the University of Pittsburgh where he specialized in the development and study of Motivational Interviewing, interventions in substance abuse, mental health and health behavior settings with an emphasis on treatment engagement.

Glenn Hinds:

A member of MINT, the Motivational Interview Network of Trainers since 1998. He has been chair of the MINT board of directors, editor of the MINT Bulletin - an online journal, Motivational Interviewing training, research, implementation practice, and a trainer of trainers, in addition to journal articles and chapters. Allan is the author with Dr. Bonnie Gorsac of "Finding Your Way to Change by the power of Motivational Interviewing Can Reveal What You Want and Help You Get There. The first self-guided application of Motivation Interviewing published by Guilford press. Allan, it's a joy to have you with us. Thank you for coming. How you doing?

Allan Zuckoff:

Very well. Thank you, Glenn, thank you very much for having me. I'm really looking forward to the conversation.



Glenn Hinds:

Great, great. And certainly anybody who follows the MINT YouTube page will have seen Seb and I speak with you and Tom Barth at the most recent MINT forum in New Orleans, where you had just presented to the forum, your questions and curiosities around the mechanics or the depths of the engaging process. One of the full processes of motivation interviewing. I wondered if it would be okay if we could, we could just revisit that slightly or spend a little time with you given the importance and I think, the significance of what it is you're discovering and what it is you're exploring in relation to engaging in helping conversation.

Allan Zuckoff:

Yeah. Sounds great.

Glenn Hinds:

Okay, so paint the picture for us.

Allan Zuckoff:

Sure. So, what got us started on this, I think of all the processes in MI, engaging is the one that for most practitioners feels most familiar. It's the one that whether you are a psychotherapist or a physician or medical practitioner or you know, for that matter, a probation officer, that the need to engage and establish the relationship with the person you're working with is sort of a universal.

Allan Zuckoff:

And I think for that reason, many of us, I include myself, have sort of taken for granted a little bit what engaging, how it really works, what it's about and how we do it and put a lot of more time and energy into the research and practice of things that are more unique to MI. The evoking process that sort of, you know, recognition and vocational change talk and the influence of change talk on change.

Allan Zuckoff:

So what got me and Tom focused on engaging or thinking about, wait a second was I actually had a member of my training team come to me and asked me an interesting question, which was: we have a specific way of measuring clinical practice when it comes to the invoking process. So, if you look at the mighty, there's a global measure of cultivating change talking. So, we can directly, when we're listening to somebody doing MI we can directly assess how well to what extent are they cultivating change talk. My trainer to come to me and said, do we have something similar for measuring the engaging process? And my first reaction was, well sure we measure empathy, we measure partnership, but the more I started to think about it, I realized those are things that are not only specific to engaging, right? that underlies everything we do in MI.

Allan Zuckoff:



Those are part of the evoking process as much as they are part of the engaging process. The more I thought about it, the more I realized that I think my answer to her question was, no, maybe we don't, or not in the same way. And so that got me curious. And I started talking with some other MINTies, people I've known, many who were MINTies for a long time, experienced trainers. And I started asking them, well, how do you teach engaging? How do you think about it? How do you teach it? And what I found was that a lot of what they were saying back to me was different from the way that I was thinking about it or the way I was training it.

Allan Zuckoff:

That really struck me. You know, how is it possible? We all think we know what it is. And yet there seems to be some different ideas about what exactly goes into engaging. How does it work? What's the nature of the process? So that really got me intrigued. And then as I talked with Tom Barth, Tom also became intrigued. And that's what led us to sort of come back to the process and ask ourselves, but what do we know and what do we think and what are some of the questions we don't really have answers to yet.

Sebastian Kaplan:

Wonderful. It also reminds me in a big picture sort of way, I guess how a lot of what we maybe come to know about MI or even hearing Bill's early stories about how he came to MI it wasn't some really highly planful endeavor. He kind of stumbled across it to an extent. Not that it was random, you know, behavior on his part. But your thinking about it came from this question and it got you thinking in this direction that you didn't necessarily set out to do. And here we are now really starting to dig deeper into something that, like you said, people have been maybe taking for granted for some time.

Allan Zuckoff:

Yeah. Yeah. I think that's exactly right. There is always, I think often in our, in the MI world, this sort of sense of serendipity or a sense of sort of stumbling onto things and realizing, Whoa, we thought we understood this, but now we take a closer look at it and maybe we're not so sure. Seemingly simple questions don't necessarily have obvious answers.

Glenn Hinds:

Right, and you mentioned what triggered this curiosity for you was when you spoke to people that different people explained it in slightly different ways and I was wondering, could you give us some examples of what it was, where there was a variance for you, and what was the similarities that you're now beginning to explore?

Allan Zuckoff:

Yeah, absolutely. I think that's a really interesting question. I think the similarities are the ones we would expect, right? So, everybody agrees that empathy, that empathic listening, that support for autonomy, affirmation, the core spirit and related skills are all central to, crucial to establishing engagement and to the engaging process. So, what differed? The thing that really stood out to me was when I asked people, do you think of engaging as a



non-directive or non-directional process or as having more direction? I had come in with the thought engaging is sort of the non-directional moment of MI. When we start an MI conversation before, we begin to focus in on a specific area or behavior and before we're evoking change talk and trying to help build motivation, we're starting with a relatively non-directional open-ended conversation. Just trying to establish some mutual understanding, right? Mutual respect.

Allan Zuckoff:

And what I found was that when I talked to, actually when I talked to Tom and when I talked to a couple of other people, Denise Ernst for example, I don't think she'd mind my mentioning her name cause we've had this conversation openly. Both of them said no, I don't think it's really that non-directional. I think it's; we're already beginning to be directional even when we're engaging. And they talked about it in different ways, but the fact that basic a question that we had different perspectives on it, was really interesting to me. Honestly that was the thing that really kind of piqued my interest and say, wait a sec, I got to spend a bit more time on this.

Sebastian Kaplan:

And so, directionality in MI is often framed around a behavior, you know, reducing smoking or drinking or something like that, increasing physical activity. When you talk about directionality in the engaging process, do you mean you're already kind of dialing into one of those behavioral frames or is it direction in some other way?

Allan Zuckoff:

Yeah, right. So, that's the really interesting question. When I realized that some of this was a little fuzzy and that I didn't have this agreement, my instinct always in this situation is to start by going back to the foundational texts, right? So my instinct was, let me go back and actually look in MI-3 and let me now, take a re-look at, you know, I hadn't re-read that chapter on engaging in a long time. Let me go back now. Let me see. What are they actually saying about it? And what I found was that they actually do say similar to the way I had been thinking about it, they say during the engaging process, there is no particular direction involved. We're not necessarily using OARS in a goal directed manner. So, my first thought was, yeah, that was my original idea that it is not directional, that it's just we're willing to go sort of anywhere with a client at that point.

Allan Zuckoff:

And we're not yet trying to shape the conversation in that more focused way that allows us to actually begin to work towards building motivation. But interestingly, as I've talked with others about it, and as Tom and I put our talk together and he and I began going back and forth thinking together about what we wanted to say, I've actually become- sort of begun to come over to the other side of that debate, so to speak. And I do think there's a directionality to engaging, but as you suggested Seb, it's not the same kind of directionality as you find in the evoking process. We are, I think going somewhere. We're not purely non-directive or non-directional. If a client were to come in at the beginning and



talk about things that are, well I should say most of us when we're doing MI, not all of us, but in most settings we were already in a setting where there is an assumed focus.

Allan Zuckoff:

We might be in a drug and alcohol treatment clinic. We might be in a medical setting and so we're doing medical treatment. We might be in a criminal justice setting. At some level, there's already some expectation that we're not there to talk about just any old thing. Most of us, I think if we're doing MI and a client comes in and begins to talk about something completely unrelated to the presumptive reason we're there we are the likely to look for the opportunity to begin shaping the conversation to talk about, well, where do you stand with regard to this issue or this problem or this concern? In other words, another way to say that might be is a lot of times when we're doing MI, we're not first engaging and then focusing. We're actually doing a certain amount of engaging and focusing at the same time.

Allan Zuckoff:

There's an interplay almost from the start. I know when I go back and look at some of the well-known demonstrations of MI on video by Bill or Steve or Terri Moyers or others, and I look at my own practice. Not long ago, I had a chance to have an instance of my own practice recorded. I was doing a seminar and it was being recorded and I had a volunteer come up and we did a real MI conversation. We did this for about 20 minutes and then I looked at the recording and I realized that I was engaging in focusing almost in an intertwined way within the first few minutes. So, I think that's one element of it. I think there are a couple of other elements of it, but I'm going to pause and give you guys a chance to ask the questions.

Glenn Hinds:

So in some ways it, it reinforces the conversations that would really happen before, which is even though the four processes are very often in a diagram set out in a stepped process that they're not that linear in that sense that there is that mix and flow between each. The notion of describing engaging as separate from focusing is really to inform the practitioner about what is it that needs to happen at some point, ideally at the beginning that then flows through the rest of the conversation, which is the connection that they're making with this other human being who happens to be coming to them for whatever purpose in their professional role. And when you were looking at it from a directional versus non-directional process, the idea of it was that are we simply warming them up and because of that there is no particular direction we're going in.

Glenn Hinds:

And what was interesting when you were saying that when you first mentioned the difference between directional and non-directional the thought was for me; direction very often includes the notion of an agenda. So, that I as a practitioner, when you come to see me, ultimately my agenda is to get you to talk about the issue that we're here to talk about. And for that reason, I am approaching you with purpose and that in itself would suggest that I am being directional. I am being purposeful. I have an agenda. It's coming from a



good place. Hopefully that's coming from a place where I'm invested in the spirit of the approach. But ultimately it is that I want you to feel safe with me. I want you to feel comfortable with me. I want you to be able to lower your guard with me. And as a consequence of that, I will do whatever I can to create that environment for you.

Glenn Hinds:

We sometimes mix up just being nice to someone and checking that the find the car park okay and the waiting room wasn't too bad for them and then we just get them to right let's talk about your drinking. Let's talk about your drug use. Let's talk about your diabetes. What you're saying is that we need to spend a bit more time to ensure that the person's actually connected to us or as Bill would describe the join up, where we're on the same page and then we move on to more of the focus.

Allan Zuckoff:

I think exactly so Glenn and thinking about how working in a counseling context might be different in some ways than someone who's working in a medical setting in a medical context. You can see those differences in two sort of classic demonstrations of engaging and focusing in MI by Bill and by Steve though the one by Bill, known as the silent man video that's which is the opening 10 minutes of a conversation with a not very verbal gentleman and then Steve's BMJ demonstration video of having a conversation with a patient who's been referred by their doctor about their weight and their eating, in the medical setting. Steve begins the conversation almost immediately by saying, I wonder if we could take a few minutes, ask you a little bit about your weight. In Bill's demonstration, it's probably seven, eight, nine minutes of just inviting the client to sort of talk about what brings him in in a very general way before the conversation begins to focus in more on a particular incident than a particular potential behavior.

Allan Zuckoff:

So I think the timing may be different and you may see a clearer progression in a counseling setting or any setting where you have more time versus in a setting where you may only have five or 10 minutes to talk with someone. And so necessarily you're needing to move fairly quickly into the meat of the conversation. But those two emphases, the emphasis on can we agree on a focus, but also as you were saying, Glenn, can you experience this as a safe environment, a place where you can feel enough trust in me and enough safety with me to be willing to talk in a really open and unguarded way to allow me to explore things with you.

Allan Zuckoff:

And that may happen after the initial focus is introduced. So, it maybe you're starting with a kind of focusing. I wonder if we could talk a few minutes about your weight and in that example that in Steve's demonstration video, the response of the patient is, well, are you kidding me? You know, I'm not. I want to go there at all. And the next minute or two is Steve really being very attuned to recognizing this person does not trust me. He does not right now feel at all willing to talk in an open way with me, he's feeling defensive, and doing things to engage before he then tries to go any further. Whereas in Bill's



demonstration, he begins very broadly, what brings you in. Starts with almost pure non-directive, empathic listening and then very, very gradually begins to funnel down to a more particular focus over the course of those first 10 minutes.

Sebastian Kaplan:

Right. And that BMJ online resource is an online webinar of sorts or a mini course, even. You just have to have a password and register for it. It's free. But I would recommend it. It's interesting because I think what we're suggesting maybe, is that direction may go beyond a behavioral target. And its inviting people to think, perhaps for the first time, about what other directions may be present. And so, I guess I'm thinking about the work that I might do.

Sebastian Kaplan:

So, if I were to see somebody for the first time and somebody asked me, well, what are your hopes for that initial encounter or the beginning of your conversation there? I suppose I would say something like, I hope to understand this person's point of view. I would hope to understand what this person is trying to share with me. I hope this person perceives me as someone who's curious about them and approaching them in a non-judgmental way.

Sebastian Kaplan:

And yeah, I don't know, I guess I had ... Well, and Glenn, you're talking about creating a safe environment and hoping that person feels safe with me in the room or whatever space we're working in. And yeah, I guess I'd never really quite thought of those as directions per se. They're certainly part of my agenda, I guess, as a practitioner though.

Allan Zuckoff:

Exactly. And I guess maybe a more amenable way of talking about it would be to say that we do have a goal in that part of the encounter. The goal is not hoping to build motivation or help the person change. The goal is to establish a certain kind of relationship. But if we have a goal, if we're trying to achieve engagement, which is also the way Bill and Steve talk about it.

Allan Zuckoff:

Engaging is the process and engagement is that point at which the person is feeling mutually respectful and trusting relationship, is feeling a sense of alliance and partnership, is willing to be open with us. If we have a goal, then in theory we could specify, well, what are we looking for? If we're looking for change talk when we're evoking as markers or signs that a person's motivation for change is increasing, what should we be looking for during the engaging process? What are the markers or the indicators while we're engaging?

Allan Zuckoff:

Either that engagement is building and is becoming established, or that it's not. And I think the that it's not part, in one sense, is sort of easy. I mean, certainly if there's discord, then



that's a clear indicator that this person is not trusting us, not feeling safe. That's the interpersonal tension that tells us we don't have engagement yet. I would argue that we should not be trying to do anything at that point other than diffuse the discord, because we don't have engagement. We're not going to be able to ... engagement is the foundation for doing anything else.

Allan Zuckoff:

Tom Barth made the really interesting suggestion, or sort of speculation of, I wonder if there's something we could identify as engagement talk. Are there particular kinds of talk, things that clients would say, forms of speech or categories of speech that we could look for as indicators that engagement is happening? And if so, what would those be?

Allan Zuckoff:

I think that's a really interesting idea. And then a third idea, which was actually mine, which came from a study I did a long time ago, qualitative study that was actually my dissertation study, where I looked at the client's experience of MI. From what I found there was that there's a process that happens, what we now call engaging ... This is before we had the language of the four processes where I did the study.

Allan Zuckoff:

Where the client is doing a sort of implicit testing. That in other words, at the beginning of the conversation, the client's focus is not on himself or herself, the client's focus is on us. And the question they have is, can I trust this person? Is this person going to judge me negatively? Or is this person going to try to control me? And it was those two things that emerged really clearly as gauges of psychological safety, the absence of negative judgment and the absence of effort to control.

Allan Zuckoff:

And it's only when the practitioner passes those tests, responds in a way that conveys clearly to the client, I'm not going to try to control you. I'm not going to judge you or criticize you for whatever you are doing or saying. That it's only at that point that the client's focus shifts from the practitioner to themselves. And that's when that potentially could be measured using a measurement of self- exploration that is part of the early measurements developed by Carl Rogers and his students. That that shift is the indicator of engagement. That's what we should be looking for.

Glenn Hinds:

So in some ways it's recognizing that as practitioners, it shouldn't shock us that people who come to see us have some reticence, particularly for the first time they're meeting us, that they have some reticence about the nature of who we are and the relationship that could be created for them. And that the markers that you're describing are the absence of engagement. There's markers to show I'm not engaged yet.

Glenn Hinds:



So there is discord, there is disagreement, there is a lack of trust. Here's the markers. And it's when you start to see they soften that, that in itself may be an indication that this person has stopped judging us as potential threats and begun to experience us as potential allies. And then everything will change.

Glenn Hinds:

It's almost like, I suppose anticipating the likelihood ... is the reason why they've come to see us is that their own efforts to make this change in their life have been unsuccessful. And for an awful lot of people that are coming to see us, there are other people in their lives who care an awful lot about them, telling them how to be different and giving them ideas of how they should do it, and that ultimately undermines their sense of autonomy.

Glenn Hinds:

So, there's an expectation of, potentially, we will repeat that process. And when we don't repeat that process that us being different in that way creates the opportunity for change to begin.

Allan Zuckoff:

Yes. Exactly right, Glenn. I like that a lot, the way you've said that. I think I would add another wrinkle to it. The pressure that people are often feeling when they come to us ... the pressure to change, the pressure to make a decision that they've been having trouble making. Some of it almost always is coming from well-intended people in their lives who see that they're suffering see that they're struggling. Are concerned about them and are in one way or another trying to get them to change. And that yes, they naturally will expect that we are going to do the same thing.

Allan Zuckoff:

And so, we have to demonstrate through our empathic, affirming, autonomy, supportive responding that we are going to have a different kind of relationship with them. But I think there's also an internal pressure, and the same dynamic that goes on between the person and others in their life, is often going on between the person and themselves.

Allan Zuckoff:

The two voices in our own head. The one voice that says, 'come on, what's wrong with you? Why can't you get with it already? Why you taking so long? Why are you still doing these things that are not good for you?' And the other part that says, 'but it's too hard. But that's easy to say. But I'm not ready. But I don't know.' And that same dialogue goes on inside our own heads.

Glenn Hinds:

Right.

Allan Zuckoff:



And so, with it going on both internally and externally, that's what the client is very often bringing to our office, our consulting room, whatever place we encounter the client. And they are expecting us to play the same role, to take up the role of one of those voices, whether it's outside their head or inside their head. The role that says you have to, you need to, what's the matter with you?

Allan Zuckoff:

And what's really damaging about that, of course, is if we do that or if we're perceived that way, we're actually just reinforcing the self-criticism, self-judgment and self-pressure that the person has very likely already been engaging in, that is actually contributing to their being stuck. That's making it impossible for them to resolve the ambivalence and move forward.

Glenn Hinds:

Sure. And that certainly was one of the revelations that came to me early in my learning of Motivational Interviewing, and something that we spend some time with when training practitioners now in MI. Is that that well-intentioned effort to make someone different by offering them the reasons or the advice to make the world a better place in itself is counterproductive. Because we've taken on one side of an ambivalent argument that chances are, this client is already having with themselves.

Allan Zuckoff:

And where they are already pressuring themselves and they are already very likely feeling bad about themselves. So, it reinforces both the pressure and the negative self-views, the negative self-talk, that very often the person has already been engaging in.

Sebastian Kaplan:

it strikes me that it may give us a natural segue into one of the other topics we were planning to explore today. Allan, you described, and Glenn as well, the kind of back and forth that a client might experience from the well-intentioned loved ones in their life. And then Allan, you emphasized that it's actually a process that happens internally with them. It is very likely a process that's similar to what happens with us as practitioners, that we may want to really nudge and push and pull people in certain directions.

Sebastian Kaplan:

And at the same time, when we're practicing in a Motivational Interviewing consistent manner, there's this very important term of autonomy support that we're trying to uphold. And Allan, maybe you can talk a little bit about that dilemma that the practitioners have in going in a particular direction and influencing clients in certain directions while also supporting their autonomy to make these choices for themselves.

Allan Zuckoff:

As with many things, I'm going to actually start where you just started Seb, and then I'm going to complicate it a little further. Because I think there's two aspects to this tension that you're describing between autonomy support, and influence when we're practicing



MI. I think, where as you described, we're sort of in a way fighting with or wrestling with ourselves with the part of us that knows that fundamentally, what's going to be most effective and most helpful, is if we support and help the person feel more in control of their own decisions.

Allan Zuckoff:

And that if we begin to lose what Bill likes to call our sense of equanimity, our willingness to accept that the person may not see things the same way we see them. May not be willing to make the changes that we think would be best for them, and to be really okay with that, to be willing to accept that it's their choice and that ultimately that's as it should be, that each person should be the one making those decisions for themselves.

Allan Zuckoff:

When we lose our equanimity or we're wrestling with our desire to influence, I think that's a challenge that we can address through training and coaching and self-reflection to kind of re-center ourselves. To remind ourselves of, why do we believe that supporting autonomy is important? Why do we believe that the effort to intentionally influence somebody in a particular direction is ultimately going to backfire or be less effective in helping them change than supporting ... not only supporting, but expanding their sense of autonomy?

Allan Zuckoff:

And I think that distinction is a valuable one. And it can be found in the old version of the Motivational Interviewing treatment integrity scale, not the current version. Autonomy support was coded or measured using a global measure. Rather than counting autonomy supportive behaviors the way we do now in the mighty four, in the mighty three we would listen to a conversation and globally ask, to what extent is this practitioner supporting this person's and respecting this person's autonomy.

Allan Zuckoff:

On the mighty four, it's a five-point scale and you would score a four if you were autonomy supportive. But you could only score a five if you had markedly expanded the client's sense of self control, self-governance and freedom. I think all of us can probably conjure examples of this in our own lives. You could think about a time when somebody was supportive and respectful of your autonomy, and how that affected you.

Allan Zuckoff:

And then think of a time when you felt that someone had actually ... you left a conversation or an encounter with somebody feeling more autonomous than you did when you started. Feeling more that you are the one in control of your own life. More that you have the legitimate right to make your own decisions. More able to trust your own intuitions, your own judgment about what's right for you.

Allan Zuckoff:



And I think those are different experiences. And I think that latter experience is more profound, more powerful. And I think there's good reason to believe that it is actually independently a predictor of change. That when people ... And of course, this goes back to Carl Rogers and his original theory of counseling upon which MI is founded.

Allan Zuckoff:

That if it's true that we have a natural tendency towards self enhancement, growth, self-actualization, and that we do best and we're most likely to thrive when we trust our own judgment about what is good for us and what enhances our growth. If that's true, then anything that interferes with our self-trust, our trust in our own judgment, is going to make it harder for us to grow and thrive. And anything that enhances or strengthens that trust we have in ourselves is going to make it easier for us to grow and thrive. It's going to facilitate that.

Glenn Hinds:

As you describe that expanding the sense of self autonomy and self-control, I would imagine that in that type of conversation that what I would be receiving from the person who was listening to me was affirmations beyond the presentation. Affirmations of the nature of how I got here. Brought to my attention, the things that, potentially, I'm simply taking for granted about my nature or my abilities or my skills and the way I have navigated my life to date. And that by affirming them, it brings it much more to my attention and elevates my sense of self.

Allan Zuckoff:

I agree. Absolutely, Glenn. I think there are actually a number of ways that we can help facilitate that kind of expansion. And I think those kind of more powerful affirmations are a very important way. Affirmations, not of a particular behavior or a particular choice, but of who the person is and conveying in affirming that sense that we are looking up to that person.

Allan Zuckoff:

Not that we're not praising them, which is always a relationship of looking down at someone, ironically. If I praise you, then I'm setting myself up as your judge and I'm saying, hey, you're terrific. But if I'm truly affirming, I'm coming from below rather than above. I'm admiring. The word I like for when I'm teaching affirmation, is that I want to be expressing admiration for the person that I am working with. And the person can feel that I'm admiring who they are, how they are, what they bring. Because when I'm admiring someone, I am genuinely looking up to them.

Glenn Hinds:

Right. Yeah. And it's a lovely reframe from the notion of complimenting. There's a similarity, but I think that the practitioner's intention is very different. Yeah, that's nice. That's a nice way of understanding.

Allan Zuckoff:



And I think in addition to the specific affirmations we offer, I also really feel that this autonomy expansion effect occurs when we are completely committed to and consistently all through the conversation, putting the client in the driver's seat. Deferring to the client's judgment. Resisting the temptation to offer advice when we have not yet fully explored whether the client has his or her own ideas about how they might be able to accomplish something.

Allan Zuckoff:

Prioritizing their ideas over mine. That if every time we're talking about something and the client says, I don't really know what to do about this. And my response is, so just right as we're thinking about it, nothing comes to mind immediately. But I wonder if we were to take a step back and you had a little more time to just think about this, or we could think about it together, I wonder what comes to mind as you're thinking about it now.

Allan Zuckoff:

So, creating that space for the person to actively be thinking. And in my experience, 9 times out of 10, 95 times out of 100, if I do that, a client who just a moment earlier said, I don't know what to do, will say, well, you know, now that I think about it, I wonder if ... And so, by reigning in, this is kind of an extreme reining in of a writing reflex. If every time we're talking about a possible way of seeing things or a possible way of making a change, we automatically defer to the client. We automatically emphasize our belief that the client will probably be able to come up with an interesting idea, a possibility; something that may fit for them. I do that all the way through the conversation. By the time that conversation is over, that client will have experienced an expansion of their autonomy; an expansion of their ability to guide or direct or govern themselves.

Sebastian Kaplan:

In thinking of this distinction between... Well, Allan, you used the five-point scale there; the distinction between a four and a five, say. Ways that a practitioner might support someone's autonomy in a level four sort of way, which is still four out of five it's still pretty [crosstalk 00:43:06]-

Allan Zuckoff:

It's still good. Absolutely. No, absolutely right.

Sebastian Kaplan:

... Statements like, "Ultimately, you're the one that has to decide for yourself whether reducing your drinking is something that makes sense for you." That would be a very helpful statement. Something we hear a lot in MI conversations. Taking it to another level though, would be not so much providing the choices for a patient or a client or emphasizing the reality really that it is up to them anyway. But trying to instill a belief in themselves and maybe inviting them to think about things in ways that they don't really have the opportunity to do otherwise. To think through problems, to try to come to solutions on their own terms in their own ways and that's a way to maybe distinguish it.



Allan Zuckoff:

Yes, very much so. I think it could even start with as small a nuance as a shift in language. From ultimately really you are the one who has to decide to me starting by saying, "After listening to all you said and everything you've been struggling with, seeing how much you have already put into thinking about and wrestling with this challenge. I strongly believe that you are going to be able to make the right decision for yourself as we continue to just have a place to think through this together."

Allan Zuckoff:

If I start with even just that sort of shift in language to conveying my belief in the person and then immediately demonstrate that belief that it's not just talk. By saying something like, "As you think about this now, as you think about the things you've tried and where you are with it right now, what are you thinking about? What comes to mind for you about what might be helpful with this? Or how we might go forward together in thinking more about this. And sort of giving you the opportunity to figure out what's going to be right for you and what the best course of action is."

Sebastian Kaplan:

I guess I also hear it as a helpful level four kind of statement is about a specific choice that they may be wrestling with: a specific behavior, a specific dilemma. A level five speaks to the person's ability to solve dilemmas in their life in general and the skills and the processes that go into that.

Allan Zuckoff:

Yes, I actually had not thought about it in exactly that way. But I think that distinction really captures it. That it's more than talking about that global ability. Then thinking of this situation is just a specific instance of that more global capacity that you have.

Glenn Hinds:

Sounds like what you're describing is that if I'm working with someone and I want them to believe in themselves that the important thing is that I already do. That the way we teach people to believe in themselves is by us believing in them. All we've got to do is communicate that to them in an affirmation or the way we reflect things. And in that environment that the individual then expands because they're coming out to meet us at the width, we can hold them.

Allan Zuckoff:

Yes. Exactly, I think because if Rogers was right and if we hold that belief, that capacity does exist in the person. We're not sort of trying to instill a belief that's not already there, right? We are believing in something truly that we believe it is there. The person may have lost touch with it. It may have been underdeveloped. They may have, in a whole variety of ways, been given messages or treated in ways that has led them to doubt themselves and to doubt their own ability to make these kinds of decisions; to feel unable. But that we fundamentally believe that it's there. By believing in them, we're creating a space for them to rediscover that capacity that they already have.



Glenn Hinds:

Again, it makes me think of people that we've already spoken to. Earlier on when we were talking about the ambivalence, what came up for me was the conversation we had with Stan in the third podcast around compassion. It seemed like you were suggesting that when we're talking to someone rather than taking sides; if we can meet the ambivalence both sides of the client's internal argument from a compassionate place, that in itself helps them resolve in a kinder way the nature of their own internal conflicts. That their internal world is simply a model of what they have witnessed in their external world throughout their life.

Glenn Hinds:

The opportunity for us, as a practitioner, is that we model a compassionate, considerate individual who believes in their worth and believes in their capacity. That experience introduces the possibility that then can become part of their own internal dialogue. That when they do have an ambivalent conversation with themselves, it's met with less aggression and more consideration. Then you mentioned as well about the practitioners. I think a lot of people will be hearing things that we're talking about today.

Glenn Hinds:

But you also encouraged us to think about the idea of growing as practitioners. That is through practice, mentoring, and self-reflection. I wonder building on what David had said is in the last podcast about teaching Motivational Interviewing or learning Motivational Interviewing, what's the difference between fluency and mastery? I wonder if you could give any suggestions to people that are listening here who want to continue to grow as practitioners. Maybe even from your own experience, what was it that shifted your ability to become more present to the client? To see them in this way so that they had the space to come forward and to grow with you.

Allan Zuckoff:

That's a really interesting question Glenn. If I talk about my own experience... I'm not sure how helpful my own experience might be to practitioners because this is something that goes all the way back to my original training. My doctoral studies were in a doctoral program in existential humanistic and human science psychology. I was literally weaned on these ideas as a brand-new trainee. So, I can't ever remember not thinking this way. I mean I can, but I have to go back decades. The-

Glenn Hinds:

Or even more recently, Allan, I imagine that even though you're weaned on these ideas that you have noticed yourself change and grow. I wonder how you go about doing that for yourself that's consistent with this, that listeners might be interested; that they could take away and think about for themselves or even just invite people to think about. How have you changed the way you do things to be more consistent with the MI spirit? What ways can you be doing it from this point on to continue to grow? Because our hope is that if you're listening to this podcast, your intention and your desires to develop and grow as an MI practitioner to be as helpful as you possibly can be to the people you come under



contact with. It's just ideas about what are the things that listeners can take away and think, "Well, maybe I could try that." That isn't about just reading. That it's about the development, the internalizing of moving from fluency to mastery.

Allan Zuckoff:

Absolutely. I can say a couple of things about that. I think I resonated with particularly was what you were saying just now about continued growth. One of the sorts of venues for me that have been the most powerful source of continuing growth as a practitioner, as a person. I would say in my relationships more broadly has actually been through conversations within the MINT community. Often online communications, which so many of us... I mean these days so many of us live online in a variety of ways where we're not having face-to-face conversations. As much as we are having exchanges on various social media platforms or on the listserv or other kinds of virtual settings. In those settings, what I have become ever more acutely aware of is that no matter how self-reflective we are, our blind spots never disappear.

Allan Zuckoff:

That no matter how hard we work to be aware of our effects on other people, the way we're communicating with others, and the way that our intentions are then being put into practice. And how much we might refine or improve that, there will always be the possibility of not knowing what we don't know. Of not recognizing that in some way we may have said something to someone or said something in a particular way that was perceived by others differently from how it was intended perhaps. Or it was perceived as not as compassionate or empathic or non-judgmental. The willingness not only to take but to invite feedback from others, I think is not an easy thing to do. Because especially we know our intentions are good and the response we get is, "Well, what you said was hurtful or insensitive or unhelpful for this reason." That can be a hard thing to take in.

Allan Zuckoff:

But I think it is one of the best opportunities for growth. And for recognizing, again, that whereas we thought we might've been empathic or compassionate or autonomy supportive that in some way we were not being perceived that way. We can do that in our work as well, in our clinical work. This is the thing that I think is scariest for many practitioners. But which I think is one of the most powerful things we can do with our clients to be transparent and to invite transparency about our relationship in response. To pay attention not only to what our clients are saying but to the expressions on their faces to what they're not saying to the totality of how they're responding to us. And asking ourselves about what are we seeing here? What are the indicators? Is trust increasing or decreasing?

Allan Zuckoff:

Is energy? One of the things that happens when people feel supported in their autonomy is their energy increases. They become less passive, more energized which is a really interesting phenomenon. You can see that in people if you're watching for it. You can see their eyes get brighter. You can see their face light up. You can see them becoming more



actively thoughtful and excited about what they're saying. I think if you are not seeing that, if you're seeing the client become more passive, deflated, less energized. The willingness to actually say to the client, "I noticed just now we were talking in a really lively way.

Allan Zuckoff:

Then I noticed just after I said what I just said that it looked to me like maybe you didn't feel quite as heard. I'm wondering if there's something I might have said or the way I said it that might have had that effect. I want you to know that if so, it's really important to me that you're actually willing to share that with me and not try to protect me from that out of your kindness." To create that sort of transparency and talk about what's happening between us is a really powerful way to learn about our effects on the client; the effects of what we're doing and to grow as a practitioner.

Sebastian Kaplan:

A lot of what you're saying here reminds me of something that Bill often says, and Bill has written about which is the best trainers of MI are our clients. The signals and you paying very close attention to how our clients respond to us are the best markers of, in essence, how well we're doing. I guess I hear you saying that in a way that through this journey and as you're strengthening your own skills and supporting people's autonomy. That one of the main ways that you know you're on the right track is what the clients, both what they're providing to you in terms of a verbal response but even the nonverbals are subtle signals.

Sebastian Kaplan:

Then they also made me think that we were distinguishing the four and the five of autonomy support. That there's a distinguishing phenomenon that might happen where we're receiving the feedback from the client and adjusting in knowing if we're on the right track or the wrong track. And maybe that's something that ultimately the client begins to experience also in themselves in that back and forth exchange that we have with them. That they start to experience that energy that you described, Allan. Or they start to notice that for themselves and start to really develop that belief within themselves that we reflect to them as we see that as well.

Allan Zuckoff:

Absolutely. I think you're exactly right, Sebastian. It's one of the ways that when I'm training people who are just beginning to learn MI. One of the things I like to say is that, "If you had to boil MI down to its essence, right..." There's a famous story that's 10 seconds... It's a famous story from the Tanakh the Hebrew, the Jewish commentary on the Bible about a person who came to a great teacher, the teacher Hillel. He was sort of a wise guy and wanted to be a little bit of a wise guy and a provocateur. He comes to the teacher and he says, "I want you to teach me the entirety of the Torah, the Jewish scripture. But I want you to do it while you're standing on one leg." What Hillel's response is, "Okay." He gets on one leg and he says, "Do unto others as you would have others do unto you." Of course, there's much more to it than that.



Allan Zuckoff:

But it can be bracing to try to boil something really complicated down to its essence. Then ask sort of if that's the essence then how do you build up from that? My essence of MI is as you're talking with the client if change talk is increasing and discord is decreasing, keep doing whatever you're doing. If as you're talking, change talk is decreasing or discord is increasing, do something different. I like about that way of boiling it down is it makes it completely dependent upon the client. It makes it crystal clear that the client really is just, as you said, our best teacher when we're learning MI. And that ultimately it doesn't matter whether we're doing a particular technique and... Hey, I just gave a double-sided reflection, or I know that was a well-formed impact statement, affirmation, or whatever it might be.

Allan Zuckoff:

None of that matters if it's not received by the client in a way that increases trust, increases self-trust. Invites the client to explore their own possibilities and look towards the future and think about how they want that future to be and how they're going to get there. That's the simplified version of it. But I think if we really take that seriously and we make that the principle of our practice, then we can't help but grow. If we're paying that much attention to how the client is responding to us on a moment-to-moment basis, every response they make. And we're paying attention to, "Is this person becoming more engaged with me or less engaged with me. More self-trusting or less self-trusting. More relaxed or more guarded. More contemplative about the future or more self-critical about the past." Any of those sorts of differences that we might be thinking about; if we're monitoring that constantly and we're being guided by that in an ongoing way, our practice is going to change. It's going to change for the better.

Glenn Hinds:

If it's working, keep doing it. If it's not, stop doing that; do something else. Interestingly, when you were describing for such question. The list that you described about the trust, the energy, their eyes being brighter, their face lighten up; they're actively thinking, excited in their speech. What came to me was, I wonder are they potentially some of the markers we could look for in the engagement process? These are the sorts of things you might want to be looking out for at the beginning. Is the person looking at you? Does their tone of voice change? Are they getting a bit more excited? Maybe that's useful for people to be aware of is that... Notice where they are and notice the change. Are they moving towards you? Are they moving away from you? If they're moving away from-

Allan Zuckoff:

That's a really interesting way of thinking about it, I'm just thinking about this now as we're talking. What comes to mind is I think there may actually be a little bit more of almost... not a cycle exactly but occur. I think in that initial engaging, I think we're less likely to see the excitement. I think that's what comes once we have engagement and the person is starting to think more actively about their own situation; trust their own thinking and starting to see the possibility of change. I think we're going to see that later in the conversation. I think the first signs are more about the person certainly that we see. The



person seems to soften as you were saying earlier. There's a relaxation, there is more spontaneity. What they're saying often doesn't sound quite as pre-programmed or limited, or tight. They begin to be more willing to change directions as they're talking with you. Right? Usually when we feel more anxious, more guarded, like I was feeling a little bit before we started today's podcast, I wanted to have it all planned out. I had all my notes in front of me and all these different things to make sure I didn't forget anything I wanted to say. And of course, what happened as we started talking is I barely looked at any of those notes after maybe the first five minutes of our conversation. And so, I think it's worth noting that this is what we're talking about here is not unique to MI and not unique to counseling, but that what we're really talking about is the dynamics of human relationships.

Allan Zuckoff:

There's research for example, on how intimacy develops. So how did two people who don't know each other and then begin to talk with each other, how do they go from a very casual kind of interaction to increasingly intimate conversation? And what those researchers find is, is exactly what we've been talking about. We talk about increasing engaging in the MI context, or people begin with more casual conversation, there's less direct contact, there's the stories are more superficial, they stay on safer topics. Little by little they may risk saying a little something, a little more personal and then they pay very close attention to how the other person responds to it. And if the other person responds to it in a way that seems negative or judgmental, then intimacy does not develop. They stay at that superficial level, but if the person responds in a way that's warm, or encouraging, or understanding, or affirming, then they tend to go a little further. And this is happening on both sides in intimacy, right. It's going in both directions.

Allan Zuckoff:

In the counseling relationship there's the obvious difference that it's asymmetrical. We're not sharing our experiences and intimate thoughts and feelings with our clients in the same way as our clients are with us. What I do think that that process of gradual, of looking for those markers and signs of trust, relaxation, safety is what we should be looking for initially and then as that begins to happen, then you begin to get the kind of conversation that's more alive, more spontaneous, less predictable, more full of gaps and moments of sudden insight, or new ideas and that's where you start to see the ice breaking, the increasing excitement, that sense of a person kind of coming into themselves.

Sebastian Kaplan:

Keeping an eye on the clock here, I'm going a bit beyond where we'd normally go, Glenn, right? But one of the things that we had mentioned in our discussions before the recording was the notion of self-esteem. And it seems like we keep coming back to that terrain a bit. Certainly, when we were talking about autonomy-support and the kind of change that level five autonomy-supportive statements and those changes that might start brewing within a person. And here again now where we just left off. And hopefully it's not too sharp a left turn here but maybe you could talk a bit about your thoughts on MI and self-esteem, or self-efficacy, other terms that had been a much larger part of MI but not so much lately.



Allan Zuckoff:

Sure. No, I don't think it's really, I think it's barely a turn at all. Just as you were suggesting, Sebastian, because I think so many of these ideas are actually closely intertwined. So, when it comes to self-esteem, for me the interesting thing about the role self-esteem plays in MI is that in a very... In Bill's first paper, the 1983 paper where he first, Motivational Interview with problem drinkers where he gave the very first description of what he was thinking motivational interviewing was, he actually included increasing self-esteem as one of the four core strategic goals of MI. He said they were increased self-esteem, increased self-efficacy, increased dissonance. We would now say develop discrepancy between where I am and where I want to be, who I am and who I want to be and direct reduction of discrepancy in the direction of change.

Allan Zuckoff:

So, self-esteem was front and center. The idea of increasing self-esteem as something that could help to build motivation for change in people. And then after the first paper it virtually disappears. And I've been intrigued by that for a long time, and I think I understand some of the reasons why Bill and Steve chose to use a different language. But I think there is a value in thinking in the language of self-esteem and thinking about how we do enhance self-esteem in MI, for a couple of reasons. One reason is that there's now a very large body of research in social psychology that shows that, and for those who are interested in this, there's a researcher named William Swann S-W-A-N-N, who actually published a really nice accessible book probably 15, 20 years ago that's still in print on positive self-views and self-enhancement. What he called the self-enhancement motive, which is really just another way of talking about self-esteem.

Allan Zuckoff:

And there's a large body of research that shows that the motivation to see ourselves positively is one of the most powerful motivations that we have. And it's powerful enough that it overwhelms other motivations. For example, we're also motivated to see ourselves accurately. All of us share a desire to have an accurate picture and get accurate feedback about ourselves. But if that accurate feedback challenges our positive view of ourselves, in most cases the self-enhancement motive will win out.

Glenn Hinds:

Right.

Allan Zuckoff:

Right. That is, we will find way to explain away or discount the accurate feedback in order to preserve our positive views and positive feelings about ourselves. And so, if it's a powerful motivation, which I think there's again a lot of evidence there is, and if we know specifically that it's hard for people to take in challenging information, new thoughts, new perspectives, if those perspectives threaten their positive view of themselves, and having people identify the values that are most important to them using the values card sort, which is for me, one of the most powerful things we can do, and it's one of my favourite interventions or strategies within MI, asking them, when you think about your, whatever



the target behavior is, "When you think about your drinking or the way you're eating right now, or how you manage your emotions, how do that fit with the value you place on your family?" Honesty, integrity, whatever it is. And so, when we develop discrepancy that way, that's one of those powerful ways we can build motivation, right? The hope is the person is going to say, "Wow, well when I look at it that way, I'm realizing that I'm not living up to my own values. I'm not living up to who I want to be. I need to change."

Allan Zuckoff:

But what we also know is that in many cases, and this is what Bill was referencing all way back in the 1983 paper, interestingly enough, is that in many cases, instead of saying that if the person doesn't feel safe and if they don't feel that their self-esteem is secure, if they feel a threat to their positive view of themselves, instead of saying, "Wow, I really need to change my behavior so that my behavior fits more with my values.", they're going to say something like, "Oh, well no, that value isn't really that important." Or, "What I'm doing doesn't really violate that value." Or they're going to find some way not to change, but to build and shore up their own positive view of themselves.

Allan Zuckoff:

And there's actually a whole series of studies that we've done in the National Cancer Institute testing what's known as self-affirmation theory, which showed exactly this. They gave people feedback on their smoking, showing that their lung volume, their lung capacity, was reduced by 40% or was the equivalent of what the typical lung capacity of someone who's 30 years older would be, doing that to try to motivate them to quit smoking. And what they found was that in most cases, that's not what happened. What most cases, the person just got defensive, they made excuses, they claimed impunity, all of those tests don't know what they're talking about and they didn't change.

Allan Zuckoff:

But if before they did that, they asked the client, the person, to spend five minutes writing about one of their values and talking about how they live that value out in their life. In other words, if they gave them a chance to self-affirm, remember first, I am a good person, I am someone with value, I am someone who does good things and can feel good about myself. If they did that for just five minutes and then they were given that feedback on their lung capacity, they were much more likely to resolve to quit smoking and to make a change. Just that five minutes and it's all about self-esteem. It's all about helping people. If you say to me, "You really need to change this," it's easy for me to interpret that to mean you're telling me that there's something wrong with me, you're telling me that I'm not okay. Right?

Glenn Hinds:

Right.

Allan Zuckoff:

And even if I tell myself that, if I tell myself, "I need to change this." And we were talking about the inner dialogue earlier, it's really easy for that inner dialogue to happen. And for



another part of me to say, "I don't need to change this. I'm fine the way I am." To defend myself against me, right, against myself. But if we pay attention to, if we help people self-affirm, not only affirm themselves, but if we help them self-affirm in the values card sort.

Allan Zuckoff:

If before we give that, ask the values discrepancy question, before we say, "How does your drinking fit with the value you place on your family?" If we first ask, "How were you already living out the value you place on your family? Tell me about the ways you are living that value." And we give them and invite them to talk about that for a few minutes. And only after doing that do, we then say, "And as you think about your drinking, how does that fit with the value you place on it?" Because we've inoculated them or help them inoculate themselves against a threat to their self-esteem, they become much more willing, they feel much more safe to think about that question. And potentially to even be able to say, "To be honest with you, it doesn't really fit. I don't feel good about what I'm doing. Maybe I need to start thinking about it."

Glenn Hinds:

Fascinating. Absolutely fascinating. And it throws up so many possible extensions of those conversation. And one of the first things that comes to my head is, is that the idea of potentially one of the ways we can be understanding sustain talk, is that pushback. Is that pertains to that when I hear sustain talk, potentially what I'm hearing is the client protecting their self-esteem. Which itself is a very positive thing. If we tried to understand from the client's perspective is that they're trying to keep themselves where there already are without being further diminished. And then that additional piece, which is then there's the opportunity at that point, maybe what we can be thinking about is there is the opportunity to be inviting them to change this conversation, to talk about something that they are doing well, they have succeeded at and then go back to the gain in relation to themselves. I'm thinking about in a health care setting, how do we talk to someone about how they're already keeping themselves healthy. And then talk about the behavior that potentially is putting their health at risk. Wow, right.

Allan Zuckoff:

Yes. Exactly. I love both of those thoughts, Glenn. You're right, we could, if we had more time we could, we could probably go off in some depth and exploring those ideas. I think what's, the only piece I would add to it is, is that what's really nice about that, particularly in a healthcare setting is that a lot of what you do to strengthen and support self-esteem also can strengthen and support self-efficacy. And when you ask a question like, "Let's talk about what you're doing well or the ways in which you are already taking care of your health." You really do have both dimensions to that. There's the part that's saying I am doing good things and I can feel good about that. And the part that's saying I am doing good things and I know how to do things to take care of my health. Right?

Allan Zuckoff:

So, you really end up getting that kind of double effect. And so, I don't think self-esteem should replace self-efficacy by any means. I think self-esteem and self-efficacy are very,



often very closely tied together. I think it's also the case that when people's self-efficacy increases, their self-esteem also increases as they begin to feel more capable. They also feel better about themselves. I think there's a lot of interactions between the two and I think we can think about those together and think about how sort of each can be a target so to speak or a focus of our intervention.

Sebastian Kaplan:

Yeah. I was going in a number of different directions there as well. Glenn, I really liked your comment about sustain talk, or for those who haven't heard that term used in other episodes, sort of the opposite of change talk, I suppose. Arguments that a client or a patient might make in support of not changing. And this is the kind of language, while it's to be expected and it probably arises in just about every MI conversation at some level, and it's something that we pay close attention to, and we are not trying to strengthen sustain talk when we're doing MI. It's the kind of thing that for a lot of practitioners it might elicits a level of anxiety, or stress, or they might invite them to want to argue against the position that a client might be taking.

Sebastian Kaplan:

To view it as an effort for the client to hold on to their sense of self, or to maintain the level of self-esteem, it frames it quite a bit differently and perhaps in, I don't know if other people would view it this way, but I guess for me as I was thinking about that it doesn't invite... I don't know that it would invite me to want to change it so quickly, or urgently, or argue it away. It lands a bit softer for me I guess if I view it from that point of view. Does that make sense? And therefore might maintain me in a more helpful position than if I just thought of it as well, it's the argument to not change.

Glenn Hinds:

Right. Yeah. It's almost like you're saying that you can hear the positive in the resistance.

Sebastian Kaplan:

Yeah. See, that'd be a way of putting it too.

Allan Zuckoff:

I love that. I agree. I think that's a brilliant...

Glenn Hinds:

So unfortunately at this point in our recording the technology that appears needed to regroup and as a consequence, we do not have the last four minutes of a conversation with Allan. Allan was kind enough to invite you, the listeners, to contact him by email on Allan, A, double L, A-N @allanzuckoff.com. A-L-L-A-N-Z-U-C-K-O-F-F.com if you have any questions. Seb and I, we just really want to acknowledge our gratitude to Allan for making himself available and sharing with us today. And the many insights that Allan has offered us across so many different areas of understanding in relation to, not just Motivational Interviewing, but help in practice. And we also invite you to connect with us



on social media at Talking To Change the Facebook page or @ChangeTalking on Twitter. But other than that, thank you very much for listening. Until next time, goodbye.



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