Effectiveness of Motivational Interviewing in a WIC Clinic Setting
FY 2003 WIC Special Project Grant

Background

Historically, nutrition educators, including WIC nutrition professionals, have been providers of information with the nutrition education focus being the client’s nutrient needs as identified by the educator. The North Dakota WIC Program evaluated the needs for nutrition education in their State and found that (1) significant change in “traditional” nutrition education methodology was needed, (2) that it was necessary to look beyond the provision of nutrition education materials/resources, and traditional nutrition education modalities. Motivational Interviewing was seen as perhaps the “extra step” that would facilitate client involvement, active participation, increase motivation, and provide coaching to achieve desirable, measurable behavioral change.

Motivational interviewing is a participant-centered approach that intentionally directs participants to examine, explore, and resolve the ambivalence they have about their own behavior (Miller, 2004).

To facilitate this process, the nutrition educator must develop new skills including setting an agenda with the participant’s input, reflective listening, learning to summarize, assessing and creating motivation to move on the elicited, participant-generated statements, and to close the educational session with the participant’s commitment to a specific, measurable behavioral goal. The Effectiveness of Motivational Interviewing in a WIC Clinic Setting project was designed to compare the effectiveness of motivational interviewing (MI) versus their usual counseling approach in affecting behavior change and satisfaction with the WIC Program among participants.

Methods

WIC participants from four local agencies participated in one of the following groups:

- Usual counseling with 15-minute appointments
- Usual counseling with 30-minute appointments
• MI with 15-minute appointments
• MI with 30-minute appointments

Participants were surveyed for eight participant behaviors and satisfaction with WIC before and after six months of counseling. After six months focus groups were conducted with participants to discuss the WIC program and the counseling they received as well as with all WIC staff to assess their perceptions of the participants and the WIC program. Additionally, staff trained in motivational interviewing answered questions relating to the effectiveness of MI and their comfort with using the counseling approach.

Key Findings

• Overall, participants exposed to motivational interviewing were more likely to be in compliance with health recommendations.
• MI participants in the focus groups described communication in two-way terms, as engaging, and centered on their behaviors.
• Usual care participants described the WIC communication style largely as one way from the staff to the client and in terms surrounding services offered.
• Staff trained in MI differed in their acceptance of the approach as a counseling tool. However, these counselors agreed that MI has made them understand the clients better and that it helps them address their clients’ issues.

• All MI counselors agreed that some motivational interviewing techniques, such as reflective listening, have improved their counseling skills, whereas others are too complicated and hard to use.
• Extending appointments appeared to have little impact on satisfaction with WIC or behavior change.

Conclusions

Motivational Interviewing can be an effective tool both in increasing participant satisfaction with the education component of the WIC Program and also initiating positive health behaviors. In particular, it seems that MI is most effective with behaviors that are complex. Presenting MI as one of several tools that can be used to impact participant behaviors may make this counseling approach acceptable to WIC nutrition professionals.

Motivational Interviewing Tools to Try

The following two pages highlight two core techniques used in MI, change talk and values clarification. Nutrition educators can use these tools with their participants when using this counseling method.
Change Talk, a core strategy of Motivational Interviewing (MI), elicits from participants their own reasons and arguments for change. This strategy is based on the principles that people are more likely to accept and act on what they say and the more they defend a position, the greater their commitment to it becomes. During MI it is the counselor’s objective to have the participant take the positive side of the argument and verbalize it in self-motivational statements as the counselor listens and reflects. If someone is “resistant” or against change, the counselor should respond in a reflective, supportive manner that acknowledges what is said and then return to eliciting and summarizing the participant’s own reasons for change. Through this process the participant establishes:

- Perceptions about her/his current behavior,
- Reasons why changing the behavior is beneficial to her/him,
- Reasons why she/he wants to make changes, and
- Solutions to her/his barriers.

Use these questions to engage your WIC participants in “Change Talk” and begin the process of helping them change their behaviors with MI.

**Interest**

**On a scale of 0 to 10, with 10 being very interested, how interested are you in changing (TARGETED BEHAVIOR)?**

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>not at all</td>
<td>somewhat</td>
<td>very</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Probe 1: Could have been lower:**

- If response is 2-10: Your interest was a (#). Tell me why you chose a (#) instead of a 0 or 1.
- If response is 0-1: Your interest was a (#). Tell me why you chose a 0 or 1.

**Probe 2: Could have been higher:**

- If response is 0-9: **What would it take you to get your interest to a 9 or 10?**
- If response is a 10: Skip probe. Reflect: Sounds like you are extremely interested in changing...

**Reflect and paraphrase**
Confidence

On a scale of 0 to 10, with 10 being very confident, assuming you decided to change (TARGETED BEHAVIOR), how confident are you that you would succeed?

1 2 3 4 5 6 7 8 9 10
not at all somewhat very

Probe 1: Could have been lower:
- If response is 2-10: Your confidence was a (#). Tell me why you chose a (#) instead of a 0 or 1.
- If response is 0-1: Your confidence was a (#). Tell me why you chose a 0 or 1.

Probe 2: Could have been higher:
- If response is 0-9: What would it take you to get your interest to a 9 or 10?
- If response is a 10: Skip probe. Reflect: Sounds like you are extremely confident in changing...

Reflect and paraphrase

What do you think?

After trying the questions in this tool, reflect on your experience.

What did you learn about the participant’s interest and confidence in changing her/his behavior?

How would you rate your own interest and confidence in using this Motivational Interviewing strategy?

How could you make this strategy a regular part of your time with participants?

Cut here to use the strip below with participants. Attach strip to thick paper for easy use.

1 2 3 4 5 6 7 8 9 10
not at all somewhat very

Information provided by North Dakota Department of Health WIC Program
**INTRODUCTION:** Looking at the list in front of you, these are a few traits/values/characteristics that are important to some people. I would like you to pick 3 or 4 of these traits/values or characteristics that are most important to you, your child or your family. Please feel free to add to this list if any of yours are not here.

**Values for You**

<table>
<thead>
<tr>
<th>Good parent</th>
<th>Respected at home</th>
<th>Athletic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good spouse/partner</td>
<td>Successful</td>
<td>Not hypocritical</td>
</tr>
<tr>
<td>Good community partner</td>
<td>Popular</td>
<td>Energetic</td>
</tr>
<tr>
<td>Strong</td>
<td>Attractive</td>
<td>Considerate</td>
</tr>
<tr>
<td>On top of things</td>
<td>Disciplined</td>
<td>Youthful</td>
</tr>
<tr>
<td>Competent</td>
<td>Responsible</td>
<td>Independent</td>
</tr>
<tr>
<td>Spiritual/faith</td>
<td>In control</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Respected at work</td>
<td></td>
</tr>
</tbody>
</table>

**Values for Your Child**

- Have high esteem
- Be strong
- Have many friends
- Being fit
- Not feeling different
- Not feeling left out
- Be able to communicate
- his/her feelings
- Fulfill his/her potential

**Values for Your Family**

- Unified
- Spending time together
- Peaceful meals
- Getting along

**PROBE 1:** How, if at all, is (TARGET BEHAVIOR) related to any of these values? Reflect and paraphrase.

**PROBE 2:** How, if at all, would changing (TARGET BEHAVIOR) affect you and your family’s ability to achieve these goals or live out these values? Reflect and paraphrase.

**PROBE 3:** How, if at all, is your health or your child’s health related to these values? Reflect and paraphrase.

**ALTERNATIVE:** If this list does not seem to work for the client: Think about the things in your life that are important to you. How, if at all, would changing (TARGET BEHAVIOR) affect the things that are important to you and your family. Proceed to ask the other questions in relation to what they have said here. Paraphrase and reflect.