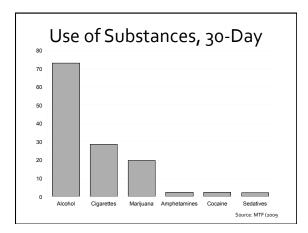
Motivational Interviewing with College Drinkers

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What's Happening on Campus?



Problem	1993	1999	2005
Hangover	68.6	69.5	68.0
Did something regrettable	38.3	44.2	39.8
Missed a class	35.2	35.1	34.9
Forgot what you did	34.8	34.9	38.2
Fell behind in school work	25.2	27.5	24.5
Argued with friends	24.3	27.5	28.3
Unplanned sexual activities	23.7	25.9	26.1
Rode with a high or drunk driver	23.1	27.9	22.3
Drove after five or more drinks	13.4	19.9	14.6
Got hurt or injured	12.9	16.3	17.5
Did not use protection during sex	11.4	10.9	11.8
Got in trouble with the police	6.2	7.1	7.5
Medical treatment for an overdose	0.4	0.6	1.0

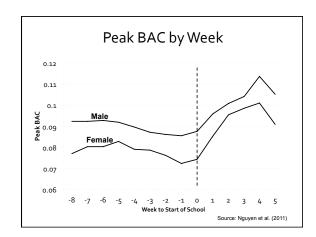
"Second Hand" Effects, Past Year

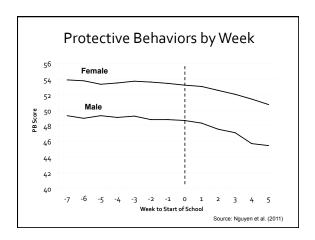
Problem	1993	1999	2005
Had studying/sleeping interrupted	63.8	67.6	63.9
Had to take care of drunken student	53.3	54.9	56.2
Been insulted or humiliated	31.9	33.7	27.4
Found vomit in residence	n/a	54.1	56.4
Unwanted sexual advance	19.7	19.9	16.3
Had a serious argument and quarrel	19.0	18.7	16.5
Had property damaged	12.6	12.5	14.4
Been pushed, hit, or assaulted	12.0	12.4	9.6
Victim of sexual assault or rape	2.6	1.4	1.3

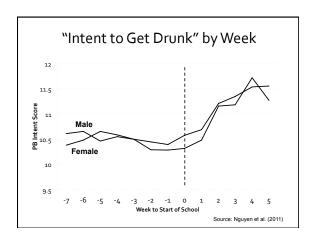
Source: Nelson et al. (2009)

Do college students drink more than other young adults?

- •
- (but use less drugs) than those not enrolled.
- In HS, college bound drink less, but accelerate upon matriculation.
- Substantial increases in drinking (and other risky behavior) after school starts, especially "intent" to get drunk.





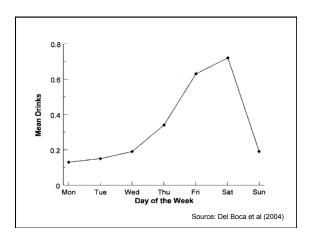


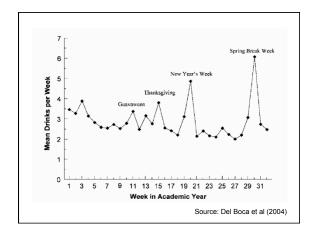
Has college drinking gotten worse?

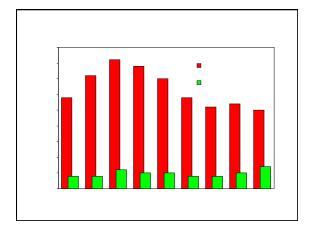
- Maybe, maybe not...
- Rates probably stable over last 20 years.
- Evidence of a "polarization" of drinking over last decade, with more drinking at the extremes
- Since the 1950's, heavy drinking rates have increased greatly for women, somewhat for men.

How is college drinking distinctive?

- Tendency to "bunch" drinks in heavy episodes.
- Tendency to drink around known (and especially social) events.
- Environmental, individual and developmental factors interact to determine drinking.
- Most students change drinking after graduating. College drinking, for most, does not cause later problems.







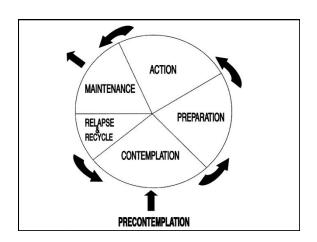
What do students think about drinking?

- In general, less concerned about alcohol than older community members.
- Some amount of consequences tolerable to most students.
- Most students have mixed feelings about alcohol, but see drinking as part of the "normal" college experience.
- Most see a place for prevention, but think they don't/won't need it.

How "Bad" are Consequences?

Consequence (YAAPST)	Negative (%)	Neutral (%)	Positive (%)
Arrested/Citation	92.5	5.0	2.5
Belongings Stolen	90.9	3.0	6.1
Received Lower Grade	87.5	12.5	0
Regretted Sex	83.8	12.2	4.1
Vomit	76.7	14.2	9.1
Physically Embarrassed	57.5	37.2	5.3
Blackout	53.4	34.8	11.8
Late to Work or Class	53.3	34.8	12.0
Socially Embarrassed	51.1	42.0	6.8
Hangover	47.3	27.8	24.9
Awoke in Another's Bed	41.8	41.8	16.4
Binge-Eating	16.8	56.0	27.2

Source: Mallett et al. (2008)



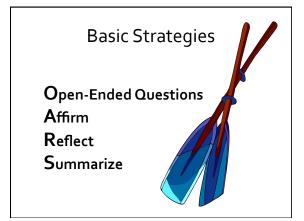
Thinking about Change

Change is more likely to stick if people believe that:	
It was their They have the will support the	
choice skills will support the skills change (Autonomy) (Competence) (Relatedness)	
Sodelivery <i>style</i> is extremely important. <i>How you say it</i> makes a difference.	
	_
NA/le at ta BA attraction at	
What is Motivational	
Interviewing?	
	1
Motivational Interviewing	
•	
questions to 个motivation. • Logically linked with client centered, stages of	
change, self perception theory. • Sometimes linked with CBT, skills training or	
relapse prevention.	
 >150 studies showing positive effects on drinking, addiction, other health behaviors. 	

• Although technique important, emphasized over technique.

Relational	•		
	quality.		
	 Respect for client choice, personal 		
	responsibility.		
	MI "Spirit": Autonomy, Collaboration,		
	Evocation		
Technical	Identification of a target behavior.		
	Selective use of questions,		
	reflections, and other techniques to		
	increase change talk and decrease		
	sustain talk around target behavior.		

Relational Aspects



What else? Tell me a little bit about your drinking. Open-Ended Questions More than one possible answer; gets people talking. What things might work for you? What concerns do your parents have about your drug use?

Questions to
gather
information

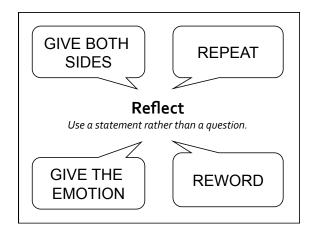
Can be open or
closed

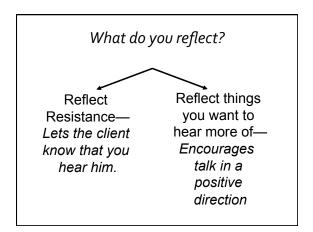
Questions to
encourage
thinking and to
raise motivation
—Mainly open
questions

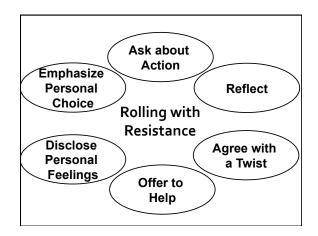
What questions do you ask?

Very Useful Questions

- some not-so-good things about...?
- What concerns you most about ...?
- How has that caused trouble for you?
- If you wanted to change, how would you go about it?
- What do you want to do about that?
- What can I do to help you succeed at...?
- What else?







It's not that big a deal. Everybody I know uses weed. I don't know why I'm here. This whole thing is stupid. Everyone drinks like I do. I mean, didn't you drink when you were in college?

Very Useful Statements

- At this point, it doesn't seem that big a deal to you.
- Drinking has some positive aspects for you.
- It's hard for you. (It might be hard for you.)
- So the thing that most concerns you is...
- If you decided to...the main reasons would he
- That's a great idea.
- Thanks for talking with me.

Powerful Reflections

*

essential element.

- **★** Fill in the blanks.
- * Say what would come next if the person continued to talk.
 - *You're...
 - **∗**It feels like...
 - **★**It's frustrating/difficult/hard...
 - *****And when that happens, you...

I think that will really work for you. Thanks for taking care of that.

Affirm

Look for ways to affirm; makes change more likely.

That's a good idea.

I appreciate you showing up on time.

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	/.

When we meet in 2 weeks, you'll...

Let me see if I can summarize.

Summarize

Before you leave, connect the dots.

You decided to...

So what we've decided is that...

Elements of MI "Style"

Evocation	•	,
		reasons and ideas around change.
Collaboration	•	Provider encourages power sharing so that client's ideas influence the direction of the interaction.
Autonomy	•	Provider actively emphasizes client's own personal control and choice in deciding outcome.
Empathy	•	Provider shows a deep understanding of the client's perspective, not just what has been explicitly stated, but what the client means and how he/she feels.

Good/Not-So-Good Things

the Good things about...?

Social interaction Fit in with friends Helps me relax Quenches thirst Relieves pain Like taste *What are some of the Not so Good things about...?

Causes hangovers Makes me fatter Costs money Girlfriend nags me RA lectures me Periods of blackout

Technical Aspects

The Flow of Change Talk

Desire

Ability Commitment Change

Reasons

Need

Change Talk... Follow With Questions & Reflections

- school.")
- I guess I could ask my roommate to help keep me accountable."
- If I limited my drinking, I guess it would make it easier to wake up for my 9:00 AM
 class "
- I've got to do something about this!"

I'd like to be able to study more.	
If I wanted to be more careful about my drinking, my coach would help me out.	
If I quit going over to the frat house during the week, I guess I would be less likely to drink.	

Imbedded Change Talk Roommate My roommate has really worried started to bug me about my about drinking, but that's OK. She drinking. nags me about a lot of stuff. Worry doesn't Roommate concern worries about him. many things. One of these days I'll probably drink less, but for now I'm a college student. I'm only going to be young once! So I got caught with a little weed. Everybody else is all concerned, but I don't think it's such a big deal. It's not even like I

was smoking it.

It probably wasn't the best idea to drive home from the party, but it's not like I	
caused an accident or anything.	
I'm just here because the party was in my room. I wasn't even drinking!	
Some Examples: Feedback, Rulers, Values Sort	

Motivational Feedback

- responses.
- Content may include summary of use, risk factors, related problems, financial cost, normative comparisons.
- Good evidence in college drinking literature showing changes to at least 6 months.
- Used in a stand-alone format or combined with MI (i.e. MET format).

Feedback--OARS Revisited

- Ask questions about what the client is thinking or feeling
- Reflect what the client says (or doesn't say)
- Highlight discrepancy.
- Summarize and ask key question at end: "What do you make of all this? What's next?"
- Put attention on feedback, minimize resistance.

Ask a Scaled Question

On a scale of 1-10, how important is it for you to make a change in your...?

\Box	
1	10
"Not	"Very
Important"	Important"

- a. What makes it that important?
- b. Why are you at a xx and not a 1?
- c. What else?

C: A one. T: OK, so it's not that important to you at this time. What would you like to change? What would you like to talk about?	C: Maybe about a 3. T: So, about in the lower middle. But I'm wondering, why did you say a 3 and not a 1? So, one reason it's important is What else?	C: Probably a 9 or so. T: So it's very important for you to do something about your drinking. Why is that? So, one reason it's important is What else?	
Ask a	Scaled Que	estion	
On a scale of	f 1-10, how confid	dent are vou	
that you cou	ıld change if you		
		40	
1 ····································		"Very Confident"	
	es you that confider		
b. Why are yo	ou at a xx and not a	1?	
	d it take to raise you help you get there?		
	•	0.44]
C: A one. T: Hmmm	C: guess about a 4.	C: A ten. T: So, you're	
Pretty low. What would it	T: So, about in the middle. But	quite confident. How would you	
take to raise	why a 4 and not	go about it?	
that 1 up to, say, a 5? Tell	a 1? What else? What	What would it look like? What	
me about a change you	would it take to raise your	else? How would you go	
made in the	confidence to, say, an 8? How	about it? How can I be of	
past. How did you go about	would you go	help?	
it?	about it? How can I be of help?		

Values Cardsort reasons for change Ask for elaboration, stories to "flesh out" values • Looking for clusters, themes Asking for connection between behavior and value set (help/hinder you from getting that value?) Source: Miller & C' deBaca (2002) God's will **Family Acceptance** Respect Genuineness **Adventure** Compassion **Purpose** Humor Fun Strengthening **Commitment for** Change

Phase 1	Phase 2				
Ask an "Action Question" Provide Options Ask About Change in the Abstract Give Advice with Permission					

Ask an Action Question; **Provide Options**

- Ask an "action" question or offer a

 - Which of these would you like to try?"
- Reflect and ask for elaboration.
 - So that might work for you. How would (will) you go about that?
 - That's a good idea. What would that look like?

Ask About Change in the Abstract

Conditional Statement	Plan of Action
If you wanted to If you decided you wanted to If the time were right	How would you do it? How would you go about it? What would you do?

Giving Advice Without Telling Someone What to Do

- Ask for permission.
 - "Would it be OK if I gave you some information about..."
- Preface advice with permission to disagree.
 - "This may or may not apply to you, but..."
- Follow advice with a statement that emphasizes personal choice.
 - ...but again, you should decide what's right for you. It's your choice.

Elicit, Provide, Elicit

- –"What do you know about the effects of ..."
 - -"What concerns do you have about...?"
 - –"The results of your tests suggest that..."
 - -"What happens to some people is that..."
 - –"As your probation officer, I strongly urge you to"
 - -"What do you think?"
 - -"How do you think you might...?

Brief Screening and Intervention

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Which Students Need an Intervention or Referral?

- Traditional profile of drinking "problems" may be an awkward fit for college drinkers.
- The things that motivate young people may be different than things that motivate older drinkers.
- Some options: Inquiring about (or watching for) drinking , , or symptoms.
- When in doubt, inquire. You may be it!

What Questions do we Ask?

- Pick the questions to suit the purpose.
- Use standard quantity/frequency or screening measures (e.g., AUDIT, CUGE).
- Ask about other information as is relevant to the setting.
- Assessment questions can be followed by brief advice, referral, or intervention.

Ask Quantity/Frequency Questions

- How many days per week to you have something to drink?
- On a typical day when you are drinking, about how many standard drinks do you have?
- During the last month, how many times have you had 5(4) or more drinks in one occasion?

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Rules o	fThumb for	At-Risk Drinking		
	Per Week	Per Occasion		
Men	>14 drinks	>4 drinks		
Women	>7 drinks	>3 drinks		
Elderly	>7 drinks	>1 drink		
		(NIAAA Physicians Guide, 1995)		
Use a S	Simple Scree	n like the "CUGE"		
• Have y	ou ever felt the	need to (C)ut down		
• Have y	r drinking? ou ever driven (I	U)nder the		
influen • Have y	ou ever felt (G)u	ilty about your		
drinkin • Have y	ou ever needed	a drink to get you		
going ii	n the morning?	((E)ye Opener)		
]	
Inc	lude the AUI	OIT in Intake		
•				
-	lence, and conse			
	ell normed, used	worldwide or of possible alcohol		
use disc	order	•		
 AUDIT-C, first three questions 				

1.	alcohol?	
2.	How many drinks containing alcohol do you have on a typical day when you are drinking?	
3.	How often do you have six drinks or more on one occasion?	
4.	How often during the last year have you found that you were not able to stop drinking once you had started?	
5.	How often during the last year have you failed to do what was normally expected from you because of drinking?	
6.	a first drink in the morning to get yourself going after a heavy drinking session?	
7.	How often during the past year have you had a feeling of guilt or remorse after drinking?	
8.	How often during the last year have you been unable to remember what happened the night	
9.	before because you had been drinking? Have you or someone else been injured as a	
10	result of your drinking? Has a relative or friend, or a doctor or other health worker been concerned about your	
	drinking or suggested you cut down?	
	Other Screening Options	
• (CAGE/CUGE	
• /	AUDIT	
• ,	AUDIT-C	
• [RAPS4	
	RAPS ₄ -QF	
• (CRAFFT	

