

## Motivating Change with Compulsive Gamblers

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## The Dilemma of Ambivalence

Therapeutic Interventions with  
Motivational Interviewing

## Agenda

- General Principles
- Factors in Resistance
- Compliance v Motivation
- Handling Resistance
- Strategies
- Building Client Alliance

## Defining Conditions of usage for the term “addiction” are:

- The person is willing to pay a price for the behavior that seems, from a normative social judgment perspective, inordinately high.
- The person is judged to have diminished ability to regulate the behavior.

## What is Motivational Interviewing?

- A client-centered, directive therapeutic style to enhance readiness for change by helping clients explore and resolve ambivalence.
- An evolution of Rogers' person-centered counseling approach which elicits the client's own motivations for change.

## First of Four General Principles Behind Motivational Interviewing

- **Express Empathy**
  - Seeing the world through the client's eyes, thinking about things as the client thinks about them, feeling things as the client feels them, sharing in the client's experiences is critical.
  - When clients perceive empathy on a counselor's part, they become more open to gentle challenges by the counselor about lifestyle issues and beliefs about addictive behaviors.

## Second of Four General Principles

- **Support Self-Efficacy**
  - Client's belief that change is possible is an important motivator to succeeding in making change.
  - Clients are held responsible for choosing and carrying out actions to change.
  - Counselors focus their efforts on helping the clients stay motivated (supporting clients' sense of self-efficacy).
  - One source of hope for clients using MI approach is that there is no "right way" to change.

## Third of Four General Principles

- **Roll with Resistance**
  - Resist fighting client resistance – "roll with it."
  - Statements demonstrating resistance are not challenged: instead use the client's "momentum" to further explore their views.
  - Using this approach, resistance tends to be decreased rather than increased, as clients are not reinforced for becoming argumentative and playing "devil's advocate" to the counselor's suggestions.
  - MI encourages clients to develop their own solutions to the problems that they themselves have defined.

## Fourth of Four General Principles

- **Develop Discrepancy**

- Motivation for change occurs when people perceive a discrepancy between where they are and where they want to be.
- Counselors work to develop this situation through helping clients examine the discrepancies between their current behavior and future goals.
- When clients perceive that their current behaviors are not leading toward some important future goal, they become more motivated to make important life changes.

## Concepts of Ambivalence

- Feeling two ways is a common human experience.
- Substance abuse professionals are involved in working with ambivalent clients daily.
- Ambivalence is the key element in all phases of treatment and recovery.
- Ambivalence causes conflict about the value of changing.

## Ambivalence

- The best way to understand ambivalence is to see it and identify it in ourselves.
  - Pick something you feel two ways about.
  - Not too personal – something appropriate for group sharing.
  - Take a moment to explore your subject.

## Ambivalence

- **NOW MAKE A DECISION.**

### Discussion:

What were your feelings about being forced to make a decision?

Where did that leave you in the process of change?

## Concepts of Ambivalence

- Client reactance can be a result of the therapeutic process when personal freedom is threatened.
- We can successfully manage ambivalent feelings that influence resistance and change.

## Evaluating Changing

- What are the good things about changing? (What are the benefits?)
- What are the less good things about changing? (What is the down side of changing?)

## Evaluating Not Changing

- What are the good things about not changing? (What are the benefits of keeping things just the way they are?)
- What are the less good things about not changing? (What is the down side about keeping things just the way they are?)

## Resistance

- Client resistance represents immediate feedback of dissonance and serves as a cue to shift strategies.
- Within MI, “resistance” is simply client speech that defends and expresses commitment to status quo; in other words, it reflects the other side of the client’s ambivalence.

## Resistance

- Pushing against resistance tends to focus on and amplify it.
- Instead...acknowledge and roll with resistance, calling attention to both sides of the ambivalence and redirecting the emphasis toward change.

## Four Forces Govern Change

### Keeping me in my current behavior

What I like about my current behavior.

What I fear about the new behavior.

### Encouraging change to new behavior

What I dislike about my current behavior.

What I imagine the advantages of the new behavior will be.

## Stages of Change

- Pre-contemplation
- Contemplation
- Preparation
- Action
- Maintenance
- Relapse
- Not currently considering change
- Ambivalence "sitting on the fence"
- Some experience with change "testing the waters"

## Stages of Change

- Action
- Maintenance
- Relapse
- Practicing new behavior (3-6 months)
- Continued commitment to sustaining new behavior
- Resumption of old behaviors "Fall from grace"

## Leading to Client Alliance

- O – Open-ended questions
- A – Affirmation
- R – Reflect
- S – Summarize

## Rubicon

- Empower people to “move” and improve
  - Motivation
  - Goals
  - Intentions

## Giving Advice

- When the client asks for it.
- If you **ASK** permission first.
- If NO – do not proceed.
- When you are professionally compelled...  
qualify it first – “I don’t know how hard you think about this but I would like to share my views...is that ok with you?”

## Compliance v Motivation

- Denial
- Compliance
- Resistance
- Lack of Motivation

## Factors in Resistance

- Client Variables
  - Individual characteristics
  - Client perception of the illness/problem
  - Social supports
  - Treatment expectations
  - Personal resources

## Therapeutic Alliance

- Therapeutic alliance improves when...  
  
Client – therapist relationship is nurtured;  
  
Therapists are more willing to explore ambivalence without pushing them to make decisions that inhibit personal freedom.

## Illness & Symptom Variables

- Symptoms easily recognized.
- Treatment interventions begin to work.
- Treatment easily followed.

## Treatment Variables

- Characteristics of the treatment setting.
- Continuity and timing of care.
- Treatment side effects –
  - Overwhelmed with costs
  - Social changes
  - Family expectations
  - Time constraints

## Ambivalence Makers

### Psychosocial Stressors

Environmental and personal situations.

### Co-Occurring Disorders

Mental, physical, and developmental.

### Client Past History

Past experiences with services, unsuccessful attempts, shame, anxiety about change.

## More on Ambivalence

- Ambivalence is central to life.
- Use the dynamics of the phenomenon as the GRIST for change.
- Clients wanting to change is important – but not central to determining the treatment plan.

## Ambivalence

- CONFUSION
- DENIAL
- DILEMMA

## Change Talk

- The net effect of evoking change talk in an empathic and supportive manner is to strengthen the client's commitment to change.
- Verbalized intention results in an increased probability of behavior change, particularly when it is combined with a specific plan for implementation.

## Reflections on the Day

- What ways might you use the concepts from the training with a client?
- What will be helpful in keeping strategies involved in your practice/work with gambling clients?

## Summary

- General Principals
- Factors in Resistance
- Compliance v Motivation
- Handling Resistance
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- Building Client Alliance

• **THANK YOU!**

Comments & Questions

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