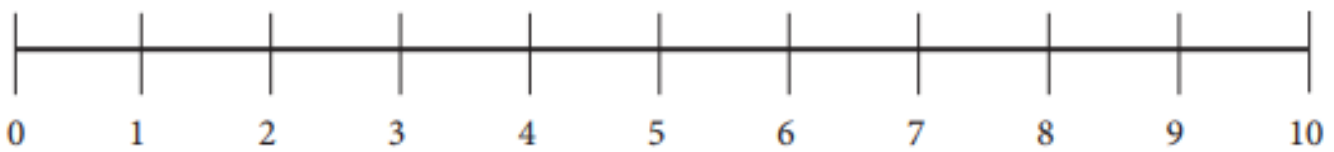
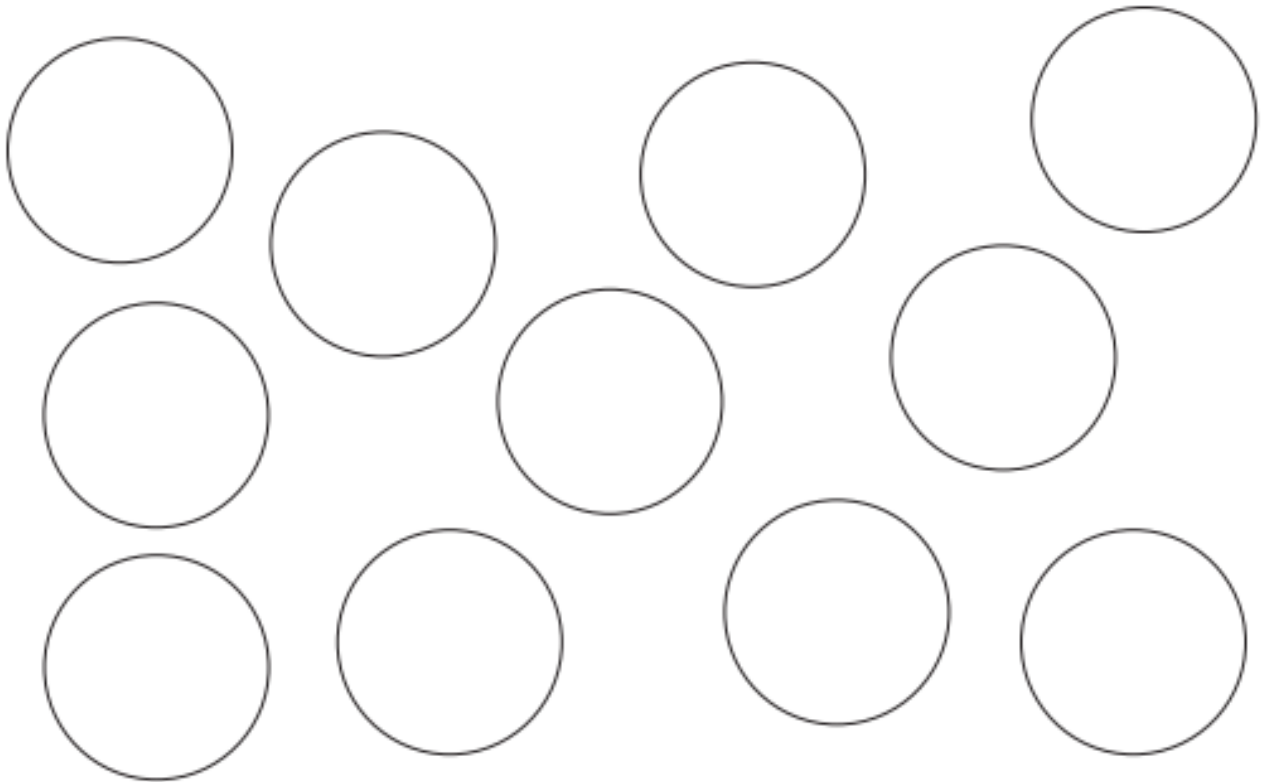


CT Children's CLASP Guideline Clinician Guide

Overweight/Obesity & Screening for Endocrine Obesity Co-Morbidities

CLINICIAN GUIDE: MOTIVATIONAL INTERVIEWING



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Next Step:

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Instructions:

- A circle chart allows for patients to feel that they are being heard and allows them to have some say over the session. The circles on the previous page can be pre-filled out with concerns specific to a certain condition, such as obesity. For example, if you want to talk to a parent about their child's weight, the circles can be filled in with items such as:
 - Being able to afford healthy foods
 - Finding ways to keep my kids active
 - Concerns about developing diabetes
 - Feeding my picky child
- The chart allows not only for patients to be able to set the agenda but allows for providers to do so as well in a non-threatening way. It gives the impression to families that you aren't talking to them specifically about this issue because there is something wrong, but rather that this is what you talk to all families about.
- The readiness ruler (scale 1 to 10) allows for you to see what the likelihood of them making the change is. Sample questions that can be asked include:
 - On a scale of 1 to 10, how ready are you to...
 - Questions to use to follow-up:
 - "Why an X?"
 - "Why not (choose a lower number)?"
 - "What do you think would help you get from an X to a Y (higher number)?"
 - "Where were you six months ago? How did you get from there to here?"
- The decisional balance section allows you to weigh the pros and cons of making change with a patient and begin to see the things that will make change hard for them (or what in Motivational Interviewing is called ambivalence). Sample questions include:
 - Weigh pros and cons:
 - What are the advantages of keeping things the same?
 - What are the disadvantages of keeping things the same?
 - What are the advantages of making a change?
 - What are the disadvantages of making a change?
 - **Summarize ambivalence:**
 - "Let me make sure I understand what you have said so far..."
 - Summarize reasons for keeping things the way they are first
 - Summarize reasons for making a change last
 - "Did I get that right?"
- The final section allows you to set a goal with the family. Goals should be SMART (Specific, Measurable, Achievable, Realistic, Time Bound)
 - **Tips and Tricks with Setting SMART goals:**
 - Goals should come from the families – you can guide them but avoid setting their goals for them. If they are struggling with finding a goal, suggest some categories – is there something about your eating

you might want to work on? You mentioned eating too fast – did you want to set a goal about that? Is there something about activity you might want to set a goal about?

- When setting goals, set families up for success. For example, while the recommendations are for less than 2 hours of screen time a day, if you have a child who is watching 9 hours of Netflix a day, they aren't going to get to 2 hours tomorrow. Start small – can we go to 8 and a half and work down from there? We want to make sure we have goals that families feel they can achieve and feel good when they accomplish.
- Make sure goals are visible – create a chart; put it on the fridge – make it a family event to track progress.
- Let families know that sometimes we may not meet our goal – and that is okay! Sometimes we don't meet goals because they were too big of a goal. And sometimes we don't meet a goal because something got in the way that we didn't plan for. For example, if my goal is to walk every day for 15 minutes – what happens if it snows and it is not safe to be outside? Remind families that these times provide really great information in continuing to get healthy.

Adapted from Miller and Rollnick, 1991-2002 and Berg-Smith Training & Consultation, 2007.