

Motivational Interviewing Tips for Engaging with Youth

“*Motivational interviewing (MI) is a collaborative conversation style for strengthening a person’s own motivation and commitment to change.*”
— W. MILLER & S. ROLLNICK, 2013¹

Talking with young people about their readiness and willingness to not use substances may seem like a daunting task - but it doesn't have to be! Read on for MI strategies that can help build a young person's motivation and support them; further enhancing your use of the [Communication Pathway](#).

MI SPIRIT

The “spirit” of motivational interviewing is the way in which we bring ourselves, our style and our approach to interactions with youth. Perhaps even more important than the words we say, the spirit is the foundation. It's how we show **compassion**, strive for **partnership**, stay curious through **evocation** and believe in the young person with **acceptance**. A commitment to the spirit requires ongoing self-awareness, humility and perspective seeking.

Compassion is the action of empathy focused on the other person's wellbeing. It is a commitment to understand another's experience without judgment.

Partnership is collaboration and power sharing. It is acknowledging you and the young person both have experience that can contribute to the conversation. Together you both bring value.

Acceptance is recognizing the worth of the other person; their autonomy, ability and need to choose. When the other person experiences more control, it usually results in less pushback.

Evocation is eliciting and drawing out the other person's experience. Maintaining empathic curiosity allows the young person's own ideas to surface.

EXAMPLES — CONVEYING THE MI SPIRIT

- Even with all the negative consequences of vaping, a lot of young people still do it. If you decided to delay using, what would be the benefits for you? (**compassion, acceptance**)
- I'd like to take a few minutes to have a conversation about alcohol and other drugs, is that OK with you? (**evocation, acceptance**)
- Your insights and input are valuable. If I have ideas I'll ask if you want to hear them, and together we will come up with a path forward. (**compassion, partnership**)

OPEN-ENDED INQUIRY

Questions that are open-ended invite engagement. They may start with “what” or “how” rather than “did you” or “will you.” While closed questions can be helpful for gathering facts and information, open-ended inquiry is intentionally more thought-provoking, giving the young person more opportunity to explore what they think or feel.

EXAMPLES — CLOSED VS. OPEN

Instead of:	Try:
Have you thought about how this will affect your future?	What would you tell your future 30-year-old self about this time in your life?
Are you going to make changes?	If you were to do one thing for your own health, what would that look like?
Can you skip the party this weekend?	How would you approach this if a friend came to you for advice?
Do you see any bright spots from this pandemic?	If there was a bright spot from this pandemic, what would it be for you?
Are you staying safe?	What are you doing to stay safe?



EXPLORING AMBIVALENCE

It's common for youth to be conflicted about substance use. They may be curious, but also worried about getting caught. They might want to numb or escape painful feelings or experiences, even if they are aware of the dangers of addiction. When someone feels two ways about an issue it is usually counterproductive to take one side over the other. The person will likely be defensive and push back because autonomy and trust are threatened. Instead of telling the young person which side to choose, reflect back what you heard. By acknowledging both sides of the ambivalence you are holding up a mirror, without judgement. The youth already has the argument within them for and against change.

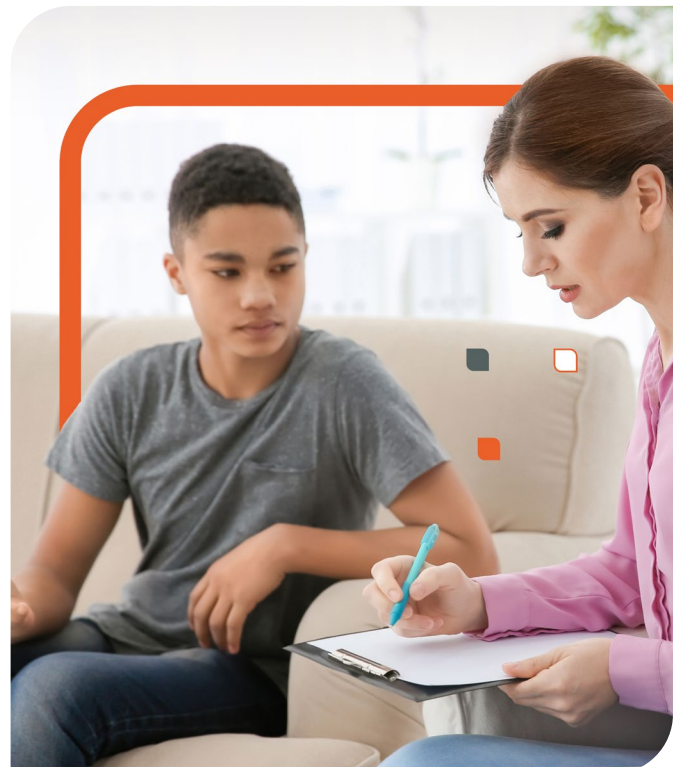
AMBIVALENT STATEMENT	 EXAMPLE REFLECTION
Lots of people smoke weed without any problems, so I'm not sure if I believe it's a gateway drug.	In your experience you've known people who use weed without any problems, and you're trying to understand if it can or cannot be a gateway drug.
I don't use anything now, but who's to say I won't try something down the road.	It's possible you'll try something at some point, and given where your life is right now, you have reasons to pass.
My parents are super strict with me, but they were big partiers back in the day so it's pretty hypocritical.	The tight rules seem somewhat phony coming from your parents, and at the same time , their rationale seems to be coming from something they've seen or done that's caused them to be strict with you.

TRAUMA-INFORMED MOTIVATIONAL INTERVIEWING

For many young people experiencing trauma, the world is not a safe place. A breach of trust from systems, authority figures or significant relationships can cause a person to feel powerless. Repairing trust is critical to engagement, healing and recovery. As youth-serving providers, our commitment to the spirit of motivational interviewing (MI) helps create environments and relationships that are collaborative and mutually respectful. Sharing in decision-making and exploring options together honors the experience and voice of the youth.

Other ways of using MI through a trauma lens include:

- **Using reflective listening statements** to validate and respect the youth's perspective.
- **Affirming strengths** to support post-traumatic growth and build protective factors.
- **Asking permission** before suggesting an action or sharing information.



CHANGE TALK

Motivational Interviewing also involves recognizing “change talk,” which is when the other person uses words or phrases that favor change. Types of change talk can be remembered with the acronym “DARN CAT.” Sometimes change talk is subtle, or we don’t pick up on it because we are thinking about the next thing to say, or are focused on wanting to hear from the youth a bigger (and maybe unrealistic) end goal. Respond to change talk with an open-ended inquiry or a reflection. Continue to demonstrate the spirit of compassion, partnership, evoking and autonomy. The more a person hears themselves expressing change talk the more they tend to increase their own motivation.

D ESIRE	<i>I want to be the first in my family to go to college.</i>
A BILITY	<i>I can deal with my friends who try to pressure me.</i>
R EASON	<i>Sometimes I’m tempted to just take a hit, but if I got caught, I’d lose my spot on the team.</i>
N EEED	<i>I need to take care of my baby sister.</i>
C OMMITMENT	<i>We all signed a pledge not to use while we were on the group camping trip.</i>
A CTIVATION	<i>I don’t want to be here, but I came anyway.</i>
T AKING STEPS	<i>My brother can’t come into my room and tell me to vape with him because I have a lock on the door now.</i>



SCENARIO: Youth advocate meets with 14-year-old Alex at a drop-in center/clinic. Alex reports feelings of anxiety, having a hard time concentrating at school and tension at home with an older cousin who came to live with them.

Advocate: Thanks for sharing some of your story with me, Alex. Sounds like there have been some big changes at home. (**compassion, reflection**)

Alex: Yeah. It's just frustrating having my cousin around because he's always in my business and wants me to smoke weed with him. When I say "no," he says I'm lame.

Advocate: How do you deal with that? (**evocation, open-ended inquiry**)

Alex: I mean ... he likes to say that a little weed would probably help me chill. But I'm not gonna do it just because he tells me to.

Advocate: Sounds like you respect yourself and want to make decisions that are best for you. (**prevention framing, reflection**)

Advocate: So on one hand you're wondering if weed could help you feel less stressed and on the other hand you don't want to give your cousin more power. (**reflecting ambivalence, change talk**)

Alex: Right! My cousin acts like there's nothing wrong with a little weed, and some people even have a medical marijuana card. It's confusing.

Advocate: I can share some information if you're interested. (**partnership, acceptance**)

Alex: Ok. Like what?

Advocate: Marijuana use by youth under age 21 is illegal in (insert state) and every state, unless it has been recommended by a medical provider for a qualifying medical condition and the appropriate certification has been obtained. Parents or guardians are always involved for anyone under 21. "Legal" doesn't guarantee something is "safe" or that it will solve the problem. What are your thoughts on this? (**prevention framing, evocation, open-ended inquiry**)

Alex: I knew it was legal here, but I didn't know all that other stuff.

Advocate: What are some other ways you've thought about or tried to manage your anxiety? (**prevention framing, evocation, open-ended inquiry**)

Alex: I like gaming ... music ... playing basketball...

Advocate: Those are great stress relievers! I know there's a lot of confusing and conflicting information about weed. I'm glad you're looking for real facts to help you make informed decisions. (**compassion, partnership, acceptance**)

FOR MORE INFORMATION ON MOTIVATIONAL INTERVIEWING, CHECK OUT THE FOLLOWING RESOURCES:

- [Guidance for Delivering a Brief Intervention](#)
- [Conversation Guide for Delivering a Trauma-Informed Brief Intervention](#)
- [Readiness Ruler](#)
- [Motivational Interviewing Reminder Card](#)
- [TIP 35: Enhancing Motivation for Change in Substance Use Disorder Treatment](#)
- [Stages of Change Matching Guide](#)

REFERENCES

- ¹ Miller WR, Rollnick S. Motivational interviewing: helping people change, 3rd ed. New York, NY: Guilford Press; 2013

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