

Applying Motivational Interviewing (MI) Skills: OARS and Change Talk

As an effective therapeutic technique with many proven benefits, MI helps counselors motivate their patients to constructively transform harmful behaviors into positive ones. In the previous segment of this article series, we broke down the Stages of Change (SOC) model and looked at the four fundamental processes of MI. These both describe the timeline of using MI and the patient's stages of progression.

But how do counselors use MI in patient discussions? In the third and final segment of this article series, we'll look at:

- The **four core skills (OARS)** used by counselors to discuss and dissect feelings of ambivalence towards change
- The process of steering conversations towards a *positive* perspective on change (**change talk**), rather than perpetuating *negative* perspectives on change (**sustain talk**)



The Core Skills of MI: OARS

The SOC model and the four fundamental processes of MI can be supported by a set of micro-counseling skills used to drive discussions and maintain a positive attitude while exploring the patient's feelings of ambivalence. To ensure MI is effective, counselors should maintain the mindset that ambivalence is not denial nor resistance, but rather a normal occurrence in the process of change.¹

Abbreviated by the acronym **OARS**, these skills can help elicit discussions without the patient fearing judgement or negativity towards their ambivalence.^{1,2}

The table below breaks down the four core skills of MI^{3,4}:

<p>O Open-Ended Questions</p>	<ul style="list-style-type: none"> • Avoids yes/no questions • Allows patient to talk freely • Demonstrates counselor is interested • Helps build trust • Helps gather information 	<ul style="list-style-type: none"> • <i>Help me understand ___?</i> • <i>What do you think you will lose if you give up ___?</i> • <i>What have you tried before to make a change?</i>
<p>A Affirmations</p>	<ul style="list-style-type: none"> • Shows acknowledgment and support for patient • Best when focused on the patient rather than your response • Best when used genuinely and occasionally 	<ul style="list-style-type: none"> • <i>You handled yourself really well in that situation.</i> • <i>That's a good suggestion.</i> • <i>If I were in your shoes, I don't know if I could have managed nearly so well.</i>
<p>R Reflections</p>	<ul style="list-style-type: none"> • Demonstrates empathy, interest, and understanding • Helps clarify and explore reasons for change • Shows interest in understanding patient's perspective and provides affirmations 	<ul style="list-style-type: none"> • <i>So, you feel...</i> • <i>It sounds like you...</i> • <i>You're wondering if...</i>
<p>S Summaries</p>	<ul style="list-style-type: none"> • Reinforces the conversation and the progress made • Ensures the counselor and patient are on the same page • Wraps up the conversation and segues to discussing the plan forward 	<ul style="list-style-type: none"> • <i>Let me see if I understand so far...</i> • <i>Here is what I've heard. Tell me if I've missed anything.</i> • <i>Anything you want to add or correct?</i>



Using Change Talk (vs. Sustain Talk): DARN-CAT

Sustain talk pertains to a patient’s comments that *do not* support an adjustment to a health-risk behavior, like substance misuse, whereas **change talk** relates to a patient’s comments that *do* support an adjustment to a behavior.

Imagine these two systems each on opposite sides of an ambivalence spectrum. Wherever the patient lands on the spectrum represents their willingness to change.¹

A counselor can use MI tactics to evoke change talk and minimize a patient’s use of sustain talk.¹ Practicing change talk is crucial for successful behavioral transformation and is proven to be correlated to positive patient outcomes.

The different types of change talk can be described using the acronym **DARN-CAT**.² The first half of the acronym relates to how change talk should be prepared while the second half relates to how the change talk should be implemented.^{1,2}

Through the use of person-centered techniques, core skills of OARS, and methods of sustain talk vs. change talk, MI can be utilized either independently or alongside other treatment approaches to help counselors facilitate progress in a patient’s goal to overcome ambivalence and create positive adaptations to behavior.⁵

DARN – CAT	
<i>Preparatory change talk</i>	Desire – I want to change Ability – I can change Reason – It’s important to change Need – I should and need to change
<i>Implementing change talk</i>	Commitment – I will make changes Activation – I am ready, prepared, and willing to change Taking steps – I am taking specific actions to change

By using the four core skills of MI (OARS), counselors can ensure patients are understood, supported, and empowered in their perspective and ambivalence towards change. After these feelings of ambivalence have been explored, counselors can guide patients into a more positive headspace by using change talk techniques (DARN-CAT), and turning the patient away from negative, sustaining talk. Combining these strategies in MI can lead to a greater chance for a successful transformation in behavior.

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