



# Motivational Interviewing in Vaccine Discussions

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# Objectives

1. Recognize the value of Motivational Interviewing (MI)
2. Understand the spirit of MI
3. Describe key MI skills
4. Increase interest in learning MI



# Background

- Vaccine hesitancy - top 10 threats to global health (WHO)<sup>1</sup>
- Messaging does not to increase intent to vaccinate<sup>2</sup>  
(correcting misinformation, disease risk info, dramatic narratives, antivaccination risks)
- MI effective - many populations/settings/behaviors (vaccine hesitancy)
  - Gagneur et al- Single MI<sup>3</sup>
    - Intervention with postpartum mothers
    - ↑ intent to vaccinate by 15%
    - ↑ complete vaccination status by 9% at 2 years old
  - Cole et al<sup>4</sup>
    - 4-session MI education at FHQC
    - ↑ flu vaccination by 35%
    - ↓ refusal by 44%
- Recommended by CDC<sup>5</sup>



# Self-Reflection Warm-Up

- Consider an unhealthy behavior
  - What do you like about it?
  - What do you dislike about it?



# Self-Reflection Warm-Up

- Me: “That is unhealthy. You have to change this behavior, today! I will tell you how.”
  - What feelings do you have toward yourself and me?
  - How open are you to talk about changing it?



# Compliance-Focused Approach

## Invalidated

Not respected  
Not understood  
Not heard  
Angry  
Ashamed  
Uncomfortable

## Resistant

Arguing  
Discounting  
Defending  
Opposing  
Justifying  
Denying

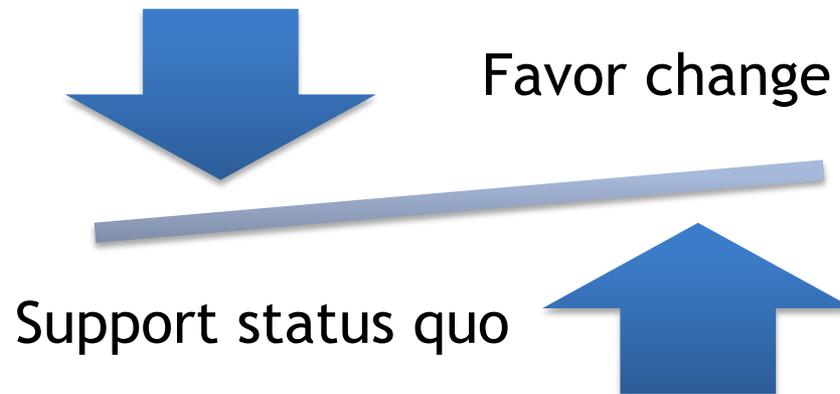
## Withdrawn

Disengaged  
Inattentive  
Passive  
Delaying  
Not following up



# Motivational Interviewing (MI)

- Patient-centered conversation about change
- Elicits and strengthens intrinsic motivation
- Promotes behavior change from ambivalence toward readiness
- Recognizes that readiness for change is a dynamic process

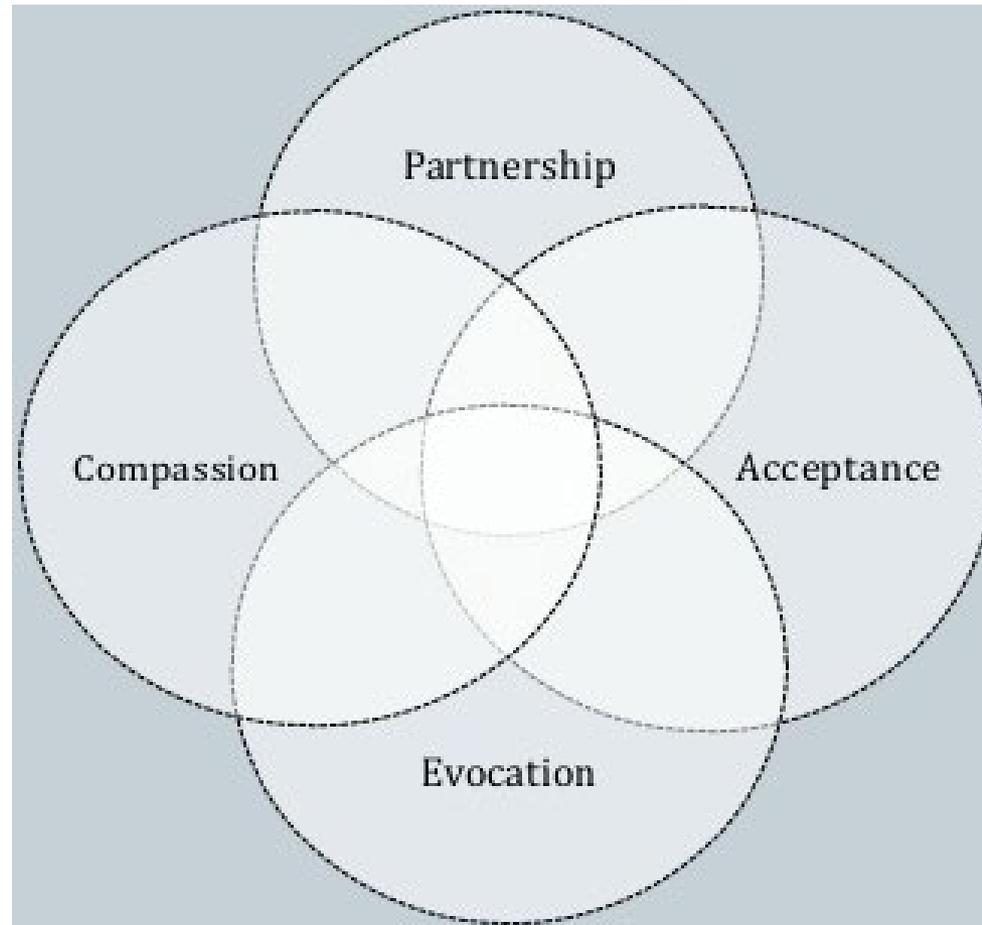




# Brief Motivational Intervention

- Time limited (5+ min, 1+ interaction)
- Goals
  - Improve patient engagement + self-management
    - Enhance **intrinsic motivation**
    - Promote **readiness** and **commitment** to change
- Builds rapport & trust
- Tones down emotional intensity

# Spirit of MI





# Spirit of MI

## 1. Partnership

- Joint decision-making
  - Mutual understanding of roles
  - Patient is expert on themselves
- Collaborative
  - Not directive
- Self-efficacy



Image Credit: William Ely Hill, "My Wife and My Mother-in-Law", 1915.

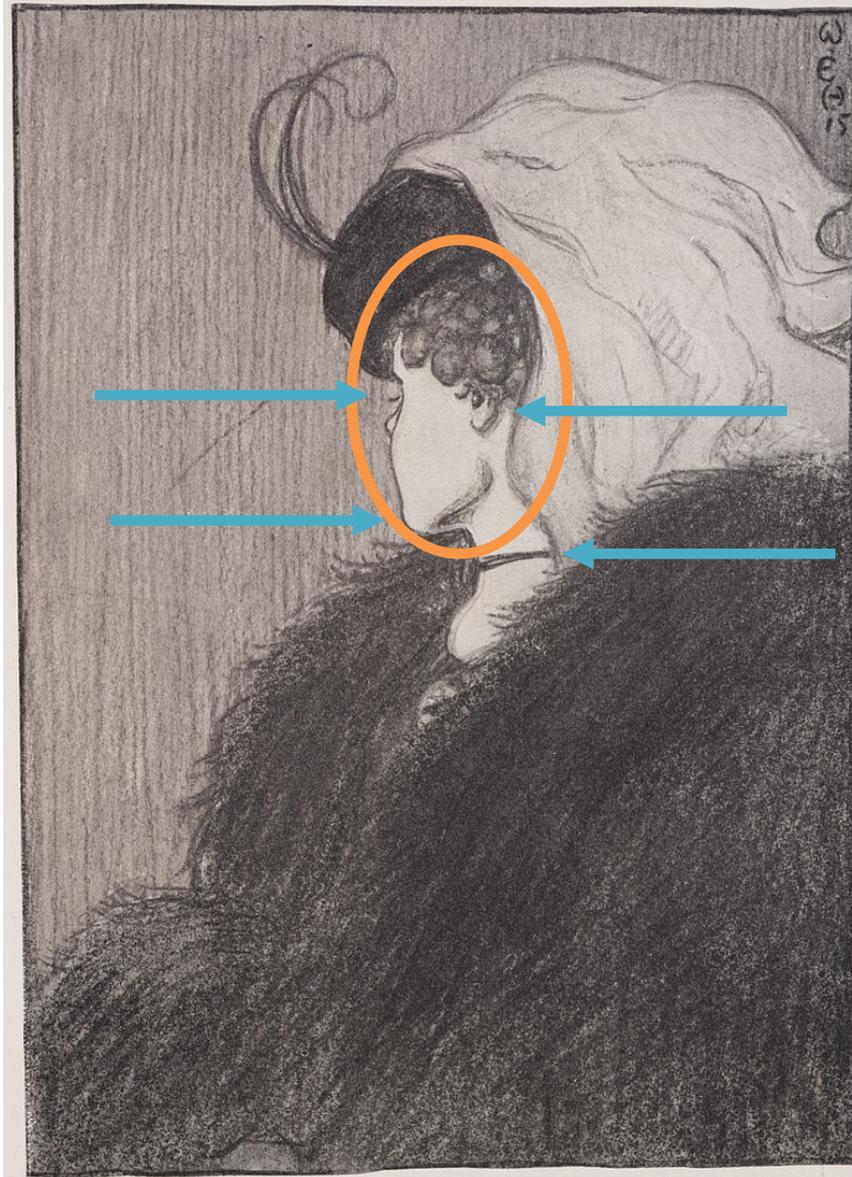


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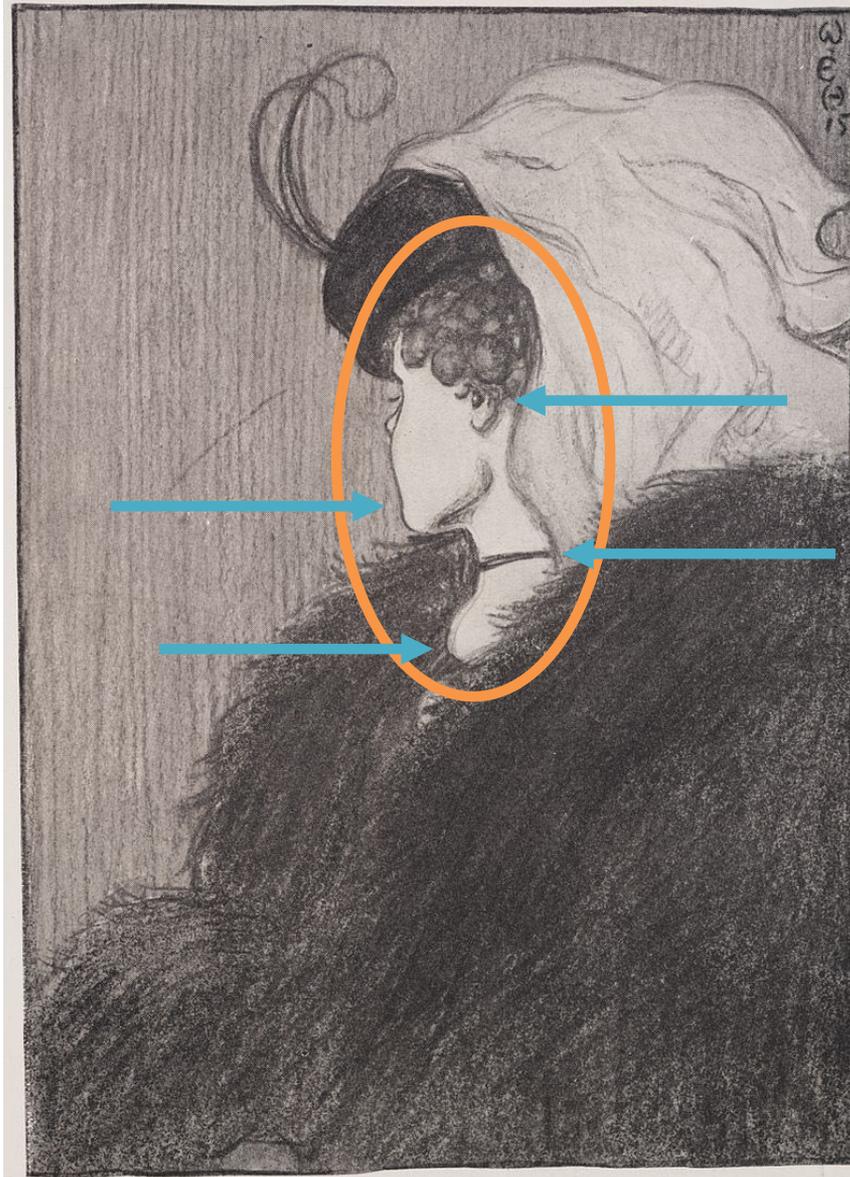


Image Credit: William Ely Hill, "My Wife and My Mother-in-Law", 1915.



# Spirit of MI

## 2. Acceptance

- Absolute worth
  - Inherent potential of every human being
- Autonomy
  - Acceptance of patient's control  $\neq$  not an absence of caring
  - Patient's motivations for change  $>$  clinician's arguments
- Affirmation
  - Seek and acknowledge patient's strengths and efforts



# Spirit of MI

## 3. Compassion

- Commitment
  - Welfare and best interest of patient
- Understanding and validation
  - Struggle to change - ambivalence is normal
- Accurate empathy
  - Ability to understand patient's frame of reference
  - Systematic cognitive process > intuition that can be taught



# Spirit of MI

## 4. Evocation

- Patient's motivation and commitment to change
  - Elicit ≠ tell
- Patient's resources for making change
- Clinician assists in linking
  - Health behavior change  $\leftrightarrow$  patient's values and concerns



# Spirit of MI

- **Partnership** with patient
- **Acceptance** of autonomy, worth, and effort
- **Compassion**
- **Evocation** of motivation to change

*Not: Confrontation, Education, Authority*



# Self-Reflection Exercise

- Consider a behavior you do that is unhealthy
  - What do you like about it?
  - What do you dislike about it?



# Self-Reflection Exercise

- Me: “You’re conflicted about what to do.”
- Me: “What challenges you most in changing this behavior?”
  - What feelings do you have toward yourself and me?
  - How open are you to talk about changing it?



# Patient-Centered Approach

## Affirmed

- Respected
- Understood
- Accepted
- Heard
- Empowered
- Hopeful

## Accepted

- Open
- Interested
- Cooperative
- Comfortable

## Approachable

- Engaged
- Talking more
- Activated
- Following up



# Practicing a Guiding Style

- Foundational skills
  - Develop rapport
  - Improve collaboration
  - Seek clarification
  - Show understanding
  - Evoke motivation

O	A	R	S
Open-ended Questions	Affirmations	Reflective Listening	Summarize



# OARS

- Open-ended questions
  - Patient does most of talking
  - Patient's experiences, values, concerns, and goals regarding targeted health behavior

O	A	R	S
Open-ended Questions	Affirmations	Reflective Listening	Summarize



# Open-Ended Questions

- “*What* concerns do you have about getting vaccinated?”
- “*How* important is it for you to get vaccinated?”
- “*What* is your understanding of the COVID-19 vaccine?”
- “*How* do you see vaccines benefiting your community?”
- “*Tell me* about some of the reasons that you see for getting vaccinated.”



# OARS

- Affirmations
  - Recognition of *strengths* that promote change
  - *Validates* patient's struggles
  - Expresses *hope/confidence* about changing
  - Enhances *self-efficacy*

O	A	R	S
Open-ended Questions	Affirmations	Reflective Listening	Summarize



# Affirmations

<u>Patient</u>	<u>Clinician</u>
"I've been researching the COVID shot on Facebook, and I don't think I should get it."	"You're working hard to learn how the vaccine could affect you."
"Yeah, I'm worried about what I've been hearing from people. They get lots of side effects from the shot."	"It's great you're bringing up these concerns so we can talk about them."
"I don't really want to talk about that. I just want to get my flu shot today so I can get my insurance gift card."	"What you decide to do about the COVID shot is completely up to you. You'll decide if and when you want it."
"Ok thanks."	"While I'm getting your flu shot ready, I wonder if we explore your concerns about the COVID shot a little further."



# OARS

- Reflective listening
  - Attempts to interpret *meaning/feeling*
  - *Hypothesis* of what patient means
    - Can be wrong!
    - If inaccurate, encourages patient to *clarify* and *discuss more*
  - Selectively *reinforce* self-motivational statements

O	A	R	S
Open-ended Questions	Affirmations	Reflective Listening	Summarize



# Reflections

<u>Patient</u>	<u>Clinician</u>
<p>“I’m worried the vaccine isn’t safe. It usually takes decades, and they made the COVID shot in months.”</p>	<p>“You’re concerned about the safety of the vaccine considering how quickly it was produced.”</p>
<p>“Yeah. And a guy at work said that the government is using vaccines to track us.”</p>	<p>“It’s scary hearing all of this information.”</p>
<p>“It’s not super scary. It just makes me uncomfortable. And getting COVID doesn’t seem that bad from what I’ve heard.”</p>	<p>“You’re very conflicted about the shot between what you’ve been reading and hearing.”</p>
<p>“Yeah, and my family has been saying that if I get the shot that I’m just giving in to government propaganda.”</p>	<p>“Your family has strong opinions on the COVID shot too. Would it be ok if we talked about some of these concerns?”</p>



# OARS

- Summarize
  - *Links* discussions
  - Ensures *mutual understanding* of discussion so far
  - Points out *discrepancies* between current situation and goals
  - Demonstrates *listening and understanding*

O	A	R	S
Open-ended Questions	Affirmations	Reflective Listening	Summarize



# Summaries

- “Here’s what I’ve heard you say so far....”
- “In summary...”
- “What I understand is that...”
- “On the one hand... and on the other....”
- “You’re ... and at the same time you’re also...”



# Giving Information

- Elicit-Provide-Elicit
  - Ask patient what they already know or want to know (Elicit)
  - *Ask to give advice (Permission)*
  - Tell patient using short focused statements (Provide)
  - Ask patient what they think of the information (Elicit)



# Elicit-Provide-Elicit

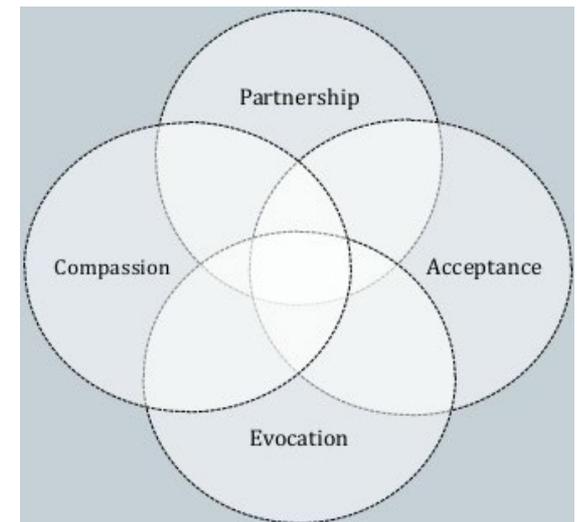
<u>Patient</u>	<u>Clinician</u>
	“Would it be ok if I shared some information about how the vaccine was developed?”
“Sure.”	“Earlier you mentioned that vaccines take a long time to produce. We know that the COVID-19 pandemic occurred at a time with more resources for vaccine development than any prior period. This includes worldwide collaboration and an outpouring of funding. mRNA vaccine development began in the 1990s.”
“Ok.”	“What do you think about this?”
“It makes sense. I thought it was way newer than that.”	“You also mentioned side effects, would it be helpful for me to tell you about those too?”

# Putting It All Together

- Practice the spirit and use MI skills

O	A	R	S
Open-ended Questions	Affirmations	Reflective Listening	Summarize

E	P	E
Elicit	Provide	Elicit



- Ambivalence is normal
  - May not be solved in one interaction
- Emphasize autonomy
- Schedule a follow-up



**Thank you!**

*Questions?*



# References

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