Brief report

Beyond Training: Evaluation of Practitioner Behaviour Change Booster Components as Part of a Motivational Interviewing Training Programme

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Abstract

Even after intensive trainings, human and health service professionals may not optimally take up new approaches, such as Motivational Interviewing (MI). To decrease this knowledge-action gap, scaffolding of learning MI has been proposed. We developed a) a workbook which aimed to boost MI uptake from the perspective of practitioner behaviour change using goal-setting, planning, self-monitoring and social support, and b) structured peer group sessions to support this scaffolded learning process. We examine participants' perceptions of and engagement with these components, and whether the use of workbook and peer group meetings was associated with changes in participants' MI skills. Social workers (*n*=33) participated in a MI training over two months and responded to a survey about engagement at mid-intervention. At baseline and post-intervention, real or simulated conversations with service users were assessed using the SWIM coding system to identify use of MI skills. Survey responses were aggregated into an engagement index, and its relationship to mean SWIM-assessed skill change was explored, using visualisation methods in R. Approximately

half of the respondents found the workbook useful for learning MI, while the other half reported that the workbook was difficult to use. Use of the workbook and peer group support was positively but modestly associated with skill improvement. Structured programme to support behaviour change to take up MI can improve training results. Basing training materials on both behaviour change science strategies and feedback from the trainees has the potential to overcome the knowledge-action gap in MI trainings and promote sustained, high-quality training results.

Keywords: motivational interviewing, training, evaluation, behaviour change, rehearsal

Public significance statement: This study shows that the engagement with behaviour change booster components was positively but modestly associated with Motivational Interviewing skill improvement. Structured programme to support behaviour change can enhance take up Motivational Interviewing and improve training results.

Background

Motivational Interviewing (MI) is a widely adopted counselling approach that emphasises collaboration, acceptance, evocation, and compassion (Miller & Rollnick, 2023). Empirical evidence shows that MI-based counselling is more effective than standard counselling in a variety of behaviours and contexts (Frost et al., 2018; Markland et al., 2005). Prior studies have shown that motivational interviewing (MI) improves service outcomes, particularly in services related to gambling, substance use, and health behaviors (Smedslund et al., 2011; Lundahl et al., 2010). However, it has been applied in social care to a lesser degree (Boyle et al., 2019). In the context of child and family social work, previous research has found an association between social workers' MI-related communication skills and better service user

outcomes, such as parent-reported engagement and perceived well-being (Forrester et al., 2019). Furthermore, a systematic narrative review of MI's usage in child welfare (Shah et al., 2019) found that MI helps to improve mental health, parenting abilities, and service retention.

According to previous research, training can enhance participants' MI skills (Hall et al., 2016; Schwalbe et al., 2014). Research on learning MI emphasises the importance of integrating practice, coaching, feedback and observation into training (De Roten et al., 2013; Frey et al., 2021). In the context of social work, it has been demonstrated that students can learn MI skills when given the chance to practice and develop their skills (Hodorowicz et al., 2020). Yet, while MI can be learnt, meta-analyses show that many trained professionals struggle to achieve sustained change despite comprehensive training (Hall et al., 2016; Schwalbe et al., 2014). We propose that insights from behaviour change science (Hagger et al., 2020), such as goal setting, planning, self-monitoring and social support, may help address this challenge. After all, motivational Interviewing consists of *behaviours*, and theoretical understanding of behaviour change may help create additional successful booster interventions (Hankonen & Hardeman, 2020).

In learning MI, there is a general consensus that practising the skills through rehearsal is essential (Schwalbe et al., 2014; Miller & Rollnick, 2023; Frey et al., 2021). This rehearsal may include self-reflection activities, such as recording and reviewing real or simulated service user meetings and learning to code MI practice behaviors. However, there has been less focus on how to support and create opportunities for practising and using MI skills in daily work. Many social workers struggle with busy workdays and competing priorities. They may find it difficult to develop their skills systematically after or between formal training sessions. When faced with a large, unspecified goal (e.g. rehearse these skills in your practice over the next four weeks), even highly motivated people are more likely to abandon their efforts than if the task were divided into smaller goals and plans. As for many other

behaviours, this knowledge-action gap, or intention-behaviour gap (Sheeran & Webb, 2016), is likely to exist for using MI, and as a result despite the best of intentions and trained skills to use MI, professionals fail to do so.

Indeed, strategies to 'scaffold' learning MI have been called for (Kaltman & Tankersley, 2020). Additionally, discussions with peers between formal training sessions may be helpful in further structuring this paced rehearsal program for the trainees. While such strategies may have already been used in practice, to our knowledge such programs and training elements have rarely been published or evaluated in the MI training research literature. Also, they have likely not been developed based on behaviour change science.

To address this gap, our team developed a novel MI training support content employing behaviour change elements including goal setting (Epton et al., 2017), action planning (Rhodes, Grant & de Brujin, 2020), and self-monitoring as well as social support (Rhodes & Beauchamp, 2024; Scholz et al., 2020). In combination, each behaviour change element likely reinforces the effects of the others. Specifically, we created a workbook including a graded schedule for rehearsing skills, worksheets to support setting appropriate goals, and plans for experimenting with novel MI techniques, as well as retrospectively self-monitoring and reflecting on experiences via self-assessment surveys (Carver & Scheier, 1982). As reaching goals is often more sustained and effective when embedded in social contexts (e.g. Epton et al., 2017), we also created a protocol for structured peer group sessions facilitate reflection and the sharing of insights gained from practicing MI. These elements are described in more detail in the Methods section.

A previous outcome study evaluated improvements in the communication skills of social workers following training. Recordings of simulated and real service user meetings were analysed using a specific coding tool, the Social Work and Interviewing Motivationally (SWIM). Of the seven communication skills measured, only empathy showed statistically

significant improvement at the group level; however, the small sample size limits the conclusions that can be drawn. Notably, exploratory analyses focusing on individuals suggest that participants' skills changed differently: Nine participants improved, four declined and the rest showed mixed changes. (Aaltio et al., in press.) The present study further evaluates how training participants used and perceived the novel training content. Specifically, we examine: to what extent did participants use the two added components: the workbook and arranged peer group meetings? How did they perceive the usefulness and ease of use of these components? Finally, we examine whether the use of workbook and peer group meetings was associated with changes in participants' MI skills. The effectiveness of this training on skill enhancement has been reported elsewhere (Aaltio et al., in press).

Methods

Participants

The study was carried out among child and family social workers in Southern Finland between 2023 and 2024. Thirty-seven social workers from sixteen teams originally applied for the training. Following drop-outs, thirty-three workers participated in two groups. Twenty-two social workers participated in recording simulated or real service user meetings before and after the intervention. Twenty-nine social workers answered to the questionnaires. The study procedures were reviewed by the ethical committee of the University of Helsinki. Thirty-three social workers were trained in two separate training groups. Details of the study procedures can be found elsewhere (Aaltio et al., in press).

Intervention description

The training was originally developed in the UK and adapted to Finland. It targeted MI skills (collaboration, autonomy, empathy and evocation), complemented with specific child and family social work skills i.e. purposefulness, clarity about concerns, and child-focus (Aaltio et al., in press; Whittaker et al., 2016). The eight-week intervention period focused on skill

rehearsal. Both training groups received *a four-day training package* consisting of practical exercises, group discussions and short lectures. Participants were encouraged to practise using MI techniques in real-world settings to develop their skills and confidence in using them. They also received three *coaching sessions*, conducted in facilitated small groups. These sessions involved listening to and providing feedback on audio recordings of real or simulated service user meetings. The coaching sessions aimed to enhance skill development through direct observation and feedback. Additionally, participants received two *online booster sessions* involving facilitated small-group discussions about the challenges and successes of adopting and practising MI. All sessions were facilitated by facilitators who had substantial experience either in MI-based trainings or social work education. The full content of the training is described in detail elsewhere (Aaltio et al., in press).

The aforementioned intervention contents are typical of MI training and were also part of the original MI training. This study focuses on two novel components: a printed workbook and a peer support group, both of which aim to facilitate skill rehearsal. Participants were given *a printed workbook* during the first training session to support their learning and practicing during and between sessions. The workbook included a brief summary of MI and a self-led rehearsal programme comprising:

1) a graded schedule for rehearsal of skills,
2) guidance to set appropriate goals and sub-goals,
3) templates to plan how to experiment with novel MI techniques,
4) self-assessment surveys to self-monitor and reflect on experiences, and
5) conversation ideas for peer support sessions (see Supplement 1).

The suggested practice plan aimed to make self-led rehearsal more manageable by breaking down rehearsal of skills progressively from basic MI skills, such as reflective listening, to more complex elements, such as recognizing and responding to change talk. The plan incorporated elements of behaviour change science; goal-setting, action planning, self-monitoring and social support. During each practice period, participants were guided to set

specific goals for a single technique (e.g. ‘This week, I will focus on using reflective listening in service user interactions’), and later, specific goals for using several techniques in the same meeting (e.g. using the Elicit-Provide-Elicit strategy to provide advice, comprising the rehearsal of several MI skills). Planning templates provided space for trainees to consider in advance how they could phrase these conversations in a particular service user meeting. Self-assessment templates aimed to encourage regular self-reflection and self-monitoring of progress, thereby helping participants to set personally relevant goals for future practice. Self-assessment also helped participants to build their self-efficacy by acknowledging their successes. The self-assessment focused on MI principles rather than the use of individual techniques, it aimed to remind participants of the broader goals of the endeavour as a whole, i.e. the ‘MI Spirit’ rather than the mechanistic use of individual techniques.

The second component studied here is the structured *peer support groups.* Participants were encouraged to form groups within their teams or office locations. The programme recommended three group meetings during the training period and offered flexibility in terms of meeting format. Examples provided included 30-minute virtual meetings, face-to-face sessions and walking meetings following team gatherings. To optimally support targeted learning and practicing at each phase of the training, structured peer group meeting conversation ideas were provided, offering themes and discussion prompts for each meeting to support the learning process, aligned with the rehearsal schedule outlined in the workbook. Similar to individual exercises in the workbook, peer group conversation ideas prompted participants to review their experiences of using MI techniques in real-world settings, as well as any challenges they had encountered. The first focused on implementing basic MI skills and overcoming barriers to adoption. The second focused on reinforcement and recognising change talk. The third focused on giving MI-consistent advice and structuring sessions. Each

peer group conversation idea list included structured reflection on challenges encountered during individual rehearsals, and collective problem-solving exercises.

Data

Engagement with the training materials was assessed through electronic survey at mid-intervention (T2) addressing two primary domains: workbook utilisation and peer engagement. Workbook utilisation was measured through seven items: one item addressing the general use of self-practice planning ("Did you utilize the self-practice plan and schedule included in the workbook?"), five items evaluating the usage of specific skill practice templates ("To what extent did you use the weekly skills training templates included in the workbook?"; reflective listening and summarizing, affirmations, recognizing change talk, eliciting change talk, and open questions), and one item concerning the use of conversation planning templates ("Did you utilize the conversation planning template for practicing motivational interviewing in service user meetings?").

MI skills assessed at real service user meetings. All training participants were instructed to record their meetings with service users during two two-week periods: one at baseline (T1) and one post-intervention (T3). Additionally, participants were asked to complete sheets with basic information about all scheduled meetings during these periods. This information included the length of the meeting, who participated, if the meetings was cancelled, if the meeting was recorded, and the reason for not recording. During the recording period, the social workers were asked to recruit all service users and professionals who met the eligibility criteria and participated in meetings. The form and location of the meetings did not matter. Meetings could include a child, a guardian or parent, and/or other professionals in any combination, however, there was a limit of maximum 5 participants in a meeting to be recorded.

MI skills assessed in simulated interviews. At T1 and T3, all participants were invited to attend simulated interviews. These interviews were conducted with a professional actress.

All participants received the same scenario for the T1 interview, while two scenarios were randomly allocated for the T3 interview. Practitioner researchers helped adapt the scenarios from the UK to the Finnish context. The interviews were conducted and recorded using Microsoft Teams.

Measures

Recordings of simulated and real service user meetings at T1 and T3 from twenty-two participants were rated using the SWIM coding tool (Aaltio et al., in press; Moyers et al, 2014). SWIM includes four key MI skills, i.e., evocation (elicitating and enhancing the service user's intrinsic motivation), collaboration (working cooperatively with the service user), autonomy (recognising and increasing service user's self-determination) and empathy (demonstration of understanding of service user's worldview), as well as three skills particularly important for child and family social work, i.e., purposefulness (maintaining a clear focus for the discussion), clarity about risk and need (raising and exploring issues and concerns), and focus on child (integrating the child's needs and views into the discussion with the parent). Each of these skills are coded on a five-point scale based on descriptors provided for each level. A high degree of inter-rater reliability has been reported in a previous study (Whittaker et al. 2016).

The coding team trained in coding for thirty hours. They listened to and coded simulated and real service user meetings and had reflective discussions. The meetings that were coded during the training period were not included in the data. In addition, the team participated in a two-day training conducted by the developers of the SWIM coding tool. Consequently, SWIM raters were trained to reliability, but with lower than recommended training hours. SWIM raters were not blinded to T1/T3 status due to the scheduling of the coding. Skill data at T1 and T3 was used from 22 of the participants because it was not

available for other participants. Regarding how it was determined which subset of client-interaction recordings would be used, we used the first and last recording fulfilling inclusion criteria from each participant.

The coding team began by coding the simulated data. Seventeen percent of these were coded by the whole team, while the rest were coded by two coders who first rated the audio recording individually and then resolved the final ratings together. A total of 19 social workers recorded real service user meetings at both T1 and T3. Twenty-six percent of these were coded by two coders and 74 percent were coded by one coder. The inter-rater-reliability was assessed by using Intra-class correlation (ICC) based on all real or simulated meeting recordings that had been rated in pairs (n=29). ICC ranged from moderate ($\alpha > .5$) to good ($\alpha > .75$) (Koo & Li, 2016). The full coding process is described in detail elsewhere (Aaltio et al., in press).

Analysis

The response options for workbook utilisation items were recoded into binary scores (0/1), where any form of engagement (complete usage, partial usage, or mental review) was coded as 1, and non-usage was coded as 0. Peer meeting frequency was assessed through a single item (“Did you arrange time with colleagues or training participants to discuss motivational interviewing practice?”) with responses recoded on a scale from 0 to 1 (0 = “Never”, 1⁄3 = “Rarely”, ⅔ = “Occasionally”, 1 = “Weekly or almost weekly”).

Two composite indices were constructed: the mean workbook utilization score was calculated as the arithmetic mean of the seven workbook-related items, and the overall engagement index was computed as the arithmetic mean of the workbook utilization score and the peer meeting frequency score. Both indices range from 0 to 1, with higher scores indicating greater engagement with the training materials and more frequent peer meetings.

SWIM data was aggregated by collapsing each difference between T3 and T1 skill assessments into a single mean value per person, distinguishing between real service user meetings and simulated situations.

Results

Use of and views on the workbook (Q1)

In general, most of the workbook templates were used in modified ways, only used partly, or not used at all (see Supplement 2; 1.1 – 1.3). The practice plan and schedule was most often used in a modified way (n = 13/29) or not used at all (13/29). For specific skill training templates, using them by filling them in fully was rare (0 – 2/29). Based on a content analysis of the open-ended answers, reasons for workbook (template) non-use were high workload, lack of time, and other scheduling difficulties (e.g. vacations), forgetting, or finding the workbook difficult to use. The skill training templates were most commonly used by going through them mentally (12 – 13/29) or not used at all (12 – 16/29). The skill practice templates for *Open questions* and *Reflective listening and summarizing* were filled out more often (4/29 for both), than the templates for *Recognizing change talk* and *Evoking change talk* (0/29 for both). Overall, views on whether the workbook was difficult to use were varied, as 10/29 respondents somewhat or fully agreed that it was, 6/29 neither agreed nor disagreed, and 11/29 somewhat or fully disagreed (see Supplement 2; 1.4.). Many respondents (13/29) somewhat agreed, that using the workbook was beneficial for learning MI, 2/29 respondents fully agreed that it was, 10/29 neither agreed nor disagreed and 2 people fully disagreed with its usefulness.

Peer group meetings (Q2)

Nearly all respondents (90 %) reported having arranged peer group meetings, and most commonly meetings were held “every now and then” or “rarely” (see Supplement 2; 2.1.). Based on content analysis of the open-ended answers, the most usual reasons for not attending peer group meetings were high workload, lack of time, and scheduling difficulties.

Was the use of workbook and peer group meetings associated with changes in participants’ MI skills, as measured with SWIM-scores (Q3)?

A total of 286 scheduled real service user meetings were reported in information sheets at T1 and 184 at T3, with an average of 1.38 meetings per day per practitioner at T1 and 1.36 at T3. Of these meetings, seventy-eight (27%) were recorded at T1 and thirty-four (18%) at T3. However, additional thirteen meetings were recorded although not marked in information sheets resulting in 125 recordings in total. Twelve practitioners participated in simulated service user meetings at both T1 and T3, resulting in twenty-four recordings in total.

Relationship between SWIM scores and the workbook engagement index are visualized in Figure 1. The figure indicates that effect size for higher engagement, as quantified in a simple I linear model, was linked to improvement of skills in simulated situations (B = 0.94, 95% CI [-0.08, 1.95]). The large uncertainty around the estimate indicates both null and very large effects are consistent with the data. The observed association for actual situations (B = 0.12, 95% CI [-1.50, 1.74]) is consistent with negative, null, and large effects.

Figure 1

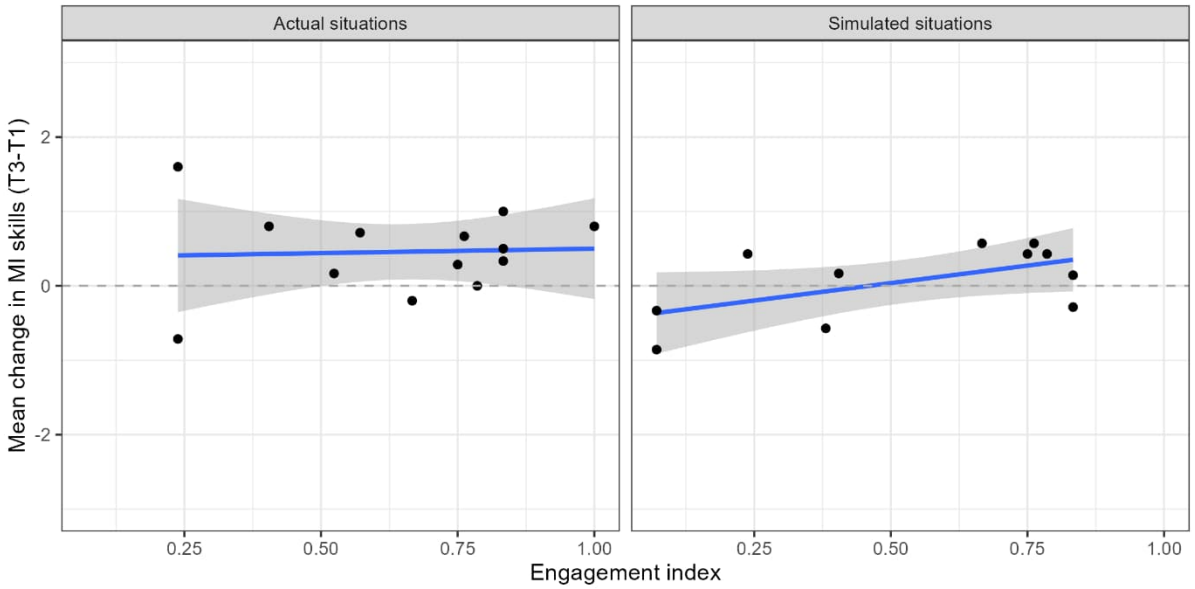

Figure 1. Relationship between change in SWIM-scored MI skills and engagement index, across actual and simulated situations. Each point represents an individual, and lines indicate linear regression with shaded 95% confidence intervals. Positive change values on the vertical axis indicate improvement.

Discussion

Behaviour change science has rarely been used as a backbone of MI training intervention, or at least reported in the scientific literature. We explored how participants perceived and engaged with novel scaffolding strategies. The results showed that approximately half of the respondents found the workbook useful for learning MI, while the other half found it difficult to use. Ninety per cent of all respondents reported arranging peer group meetings. Secondly, we examined whether using the workbook and attending peer group meetings was associated with changes in participants' MI skills. The results suggest that these novel scaffolding strategies were positively but modestly associated with skill improvement.

We observed that the relationship between engagement and skill acquisition may be more pronounced in role-play situations over real ones. While this relationship could be

attributed to chance, it might also be explainable by simulated situations being more controlled, with less noise and higher internal validity than actual situations – which depict higher ecological validity but potentially also higher noise. Furthermore, in simulated situations participants may be performing to demonstrate skills – rather than more realistic practice.

This study makes several important contributions to understanding how behaviour change science can enhance MI training. First, it shows that participants active engagement with intervention content – beyond only participating in training sessions – matters, also shown in other areas (e.g. Hankonen, 2021; Perski et al., 2017; Yardley et al., 2016). In this study, use of the workbook and peer group support was positively but modestly associated with skill improvement. While previous research has identified the need for effective scaffolding strategies in MI training (Kaltman & Tankersley, 2020), our findings suggest a complex interplay between individual and social processes in skill development. The limited and varied uptake of individual self-rehearsal materials, contrasted with perceived importance of peer support activities among most participants, suggests that social dimensions of learning may be more influential than previously recognised in MI training literature (Renko et al., in press). Indeed, this challenges a predominantly individualistic approach to MI skill development and the social dimension of learning MI. Participants rarely reported systematically writing down the planning and self-reflection tasks in the workbook, but nearly all participants engaged in peer group meetings, where these issues were collectively discussed and reflected on suggesting that social support mechanisms may be more acceptable for participants in aiming for sustainable skill development. With goal-aligned conversation ideas, the peer group meetings may also act as pacing the individual self-led rehearsal, also in this way supporting the individual self-regulatory processes. This both aligns with wider behaviour change literature highlighting the importance of social processes

in behaviour change (e.g. Rothman et al., 2020, Epton et al., 2017). As there is a tendency for MI trainings to have individualistic focus (for practical reasons), and we are not aware of research reports of trainings with such a social focus, we evaluate this represents a novel finding in MI training research. While existing training programmes (Hall et al., 2016; Schwalbe et al., 2014) typically focus on individual-level processes, our results indicate that MI learning at least in child and family social work contexts operates as a collective process. This has important implications for how we conceptualise and design MI training interventions. Future research should systematically evaluate, whether, through which processes, and under which conditions, these collective processes are crucial for sustainable skill development.

Secondly, half of the participants found the workbook beneficial for learning MI, and many reported not using the workbook at all due to high workload. Interestingly, paper-and-pencil tasks were rarely used in writing, and more often mentally. This suggests that the workbook helped at least some of the participants to engage in the critical process of reflection-on-action, crucial for MI uptake (Miller & Rollnick, 2023). Future research may benefit from investigating the usefulness of such scaffolding materials in less time-pressed professional contexts, in particular among those trainees who do not have social support available on their learning journey.

Third, we demonstrate how behaviour change science can systematically inform MI training design. Although behaviour change techniques have been widely applied in other contexts (see e.g. Hagger et al., 2020, Albarracin et al., 2024), their application to MI training has been limited. However, some programmes have employed distributed practice with objective feedback. For instance, they have offered sessions in which learners practise skills and learn to track others' use of MI skills in video-recorded role plays (Roberts et al., 2025).

Our findings suggest that while some behaviour change strategies (particularly social support) were well-received, others (such as individual self-monitoring) may require adaptation to better align with professional practice contexts. In any case, transparent and comprehensive reporting of what behaviour change support strategies are used in training programmes will help evaluate and understand what activities may best work to support optimal training outcomes for different participants.

These findings have important practical implications for MI training design. First, training programmes should explicitly support social learning mechanisms, by e.g. incorporating peer group sessions within the training programme: individual practice materials might be more effective if integrated within social learning contexts, e.g. by encouraging participants to set up times to fill in self-assessment sheets and work through supporting material in meetings with peers.

Several methodological limitations should be noted. First, social desirability concerns are not ruled out – perhaps survey responses do not entirely reflect participants' experience. Second, sample size of this study was low, but on the other hand, this enabled us to collect recorded real service user interaction data among all the participants, strengthening the ecological validity of the conclusions.

While this study does not provide conclusive evidence on how to incorporate behaviour change science-based strategies in the MI training, it certainly generates an important aspect to be studied in the futures. A systematic approach (e.g. Hankonen & Hardeman, 2020) to develop such behaviour change booster interventions, based on appropriate behaviour change theory and evidence, will more likely result in effective interventions. Future research should investigate, for example, how different social support mechanisms contribute to professionals' MI skill development, and how these can be optimally integrated into training programmes. With a more highly powered design, one

could establish how much on average, and especially for whom, and under which conditions, such workbook and peer support elements more readily improve training outcomes.

In conclusion, this study demonstrates the potential value of applying behaviour change science to MI training, while highlighting the crucial role of social processes in professional skill development. These insights can inform more effective approaches to supporting sustainable implementation of MI in social work practice.

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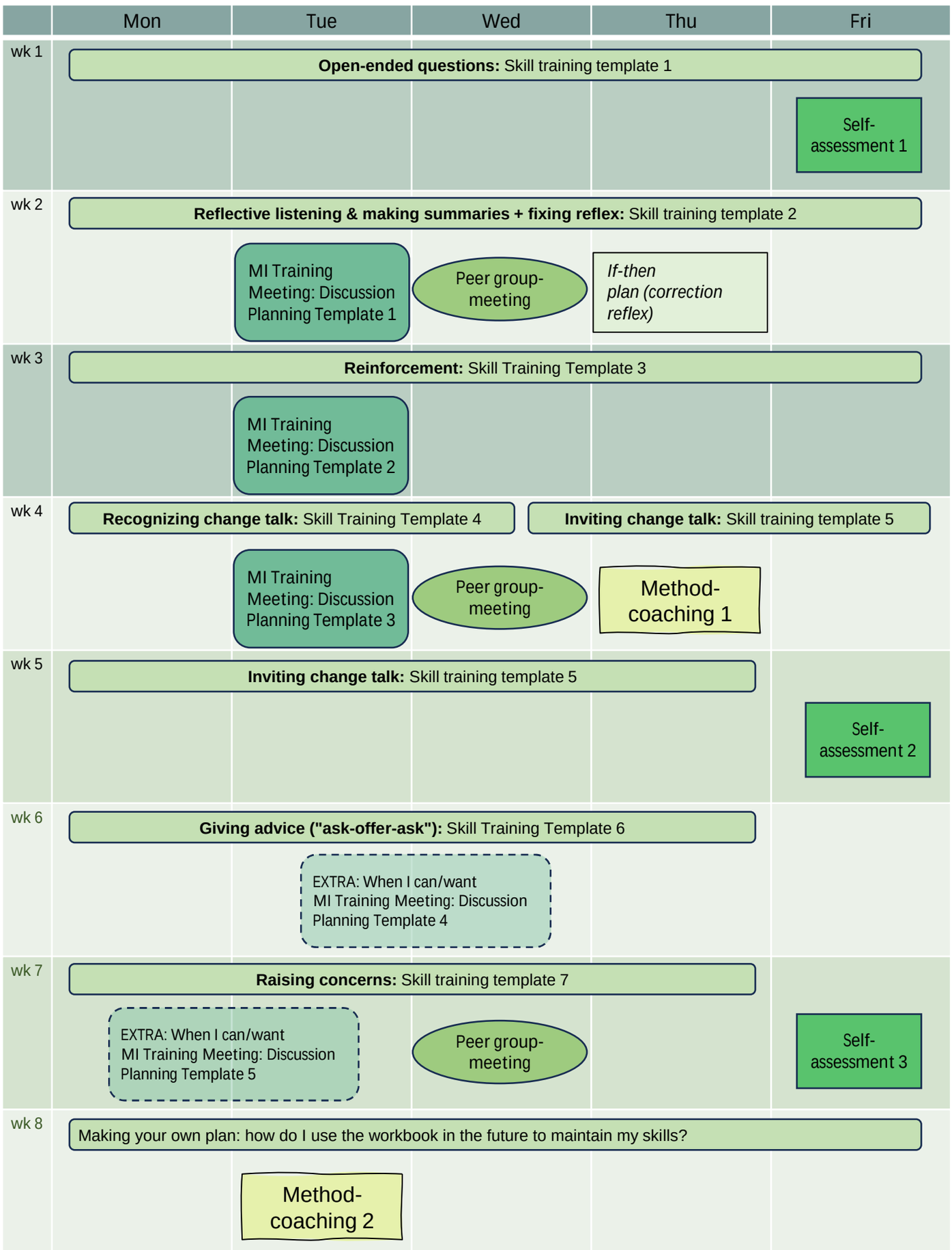
Example: Graded schedule for rehearsal of skills



Setting goals for the 1st practice period

Below is a list of motivational interviewing skills discussed on training days 1 and 2. Using tickable multiple-choice questions, you can reflect on your situation and set your goals for the self-rehearsal period.

Basic motivational interviewing skills

Open questions

- ❑ I already ask a lot of open-ended questions, and closed ones only appropriately.
- ❑ I want to increase the use of open-ended questions to get the other person to participate more in the dialogue, and replace the "correction reflex" with open-ended questions, for example.

Reflective listening

- ❑ I usually project a lot of what I hear back to my interlocutor, and I don't want to practice this.
- ❑ I'm already doing long summaries at the pivotal stages of the conversation, and I don't need to practice this.
- ❑ I want to increase reflective listening – to show that the other person is heard and to show empathy, to ensure my understanding, and to replace my "correction reflex" with reflections.
- ❑ I want to practice doing summaries.

Affirmation

- ❑ I usually say out loud the other person's strengths and know how to avoid praise.
- ❑ I want to practice "noticing the good" and putting it into words, and/or reduce using controlling compliments.

Avoiding controversy

- ❑ I almost never contradict, correct, persuade or share information without asking. Thanks to this, situations do not escalate into an argument.
- ❑ I want to practice reacting to resistance in a way that doesn't increase it, i.e. I want to break my ”fixing reflex" habit (e.g., replacing it with a moment of silent reflection, an open question, or a reflection).

Recognizing change talk

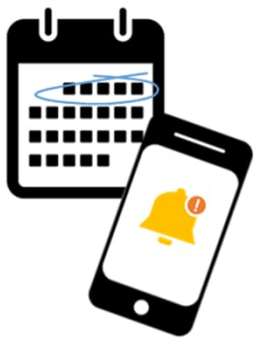
- ❑ I can already recognize change talk well from someone else's speech.
- ❑ I want to learn to recognize advocating for change.

Provoking change talk

- ❑ I already know how to wake up and support change talk.
- ❑ I want to learn how to awaken and support change talk.

If you wish, you can enter another goal for yourself here:

My plan for the future



At the end of the training, it is a good idea to make a plan for what and how you will train for the next 1-2 months. Remember that there are many ways to plan. For example, you can take advantage of ready-made workbook templates, mark on your calendar what to focus on a specific day or week or set a reminder on your phone about your goals before the workday.

Plan your training in a way that suits you. Using creativity is absolutely allowed!

However, it is a good idea to start by thinking about the continuation of the practice in general and then make a more detailed plan:

How do I go on from here?

What challenges might I face? What do I do then?

What other resources or support could I use to support my practice?

Implementing the plan is important to me because... (For these reasons, I remind myself):

Self-assessment template

First self-assessment

Let's complete the first self-assessment of how the principles of motivational interviewing are reflected in your actions! Think about filling out your recent customer meetings.

Completing a self-assessment is useful because it helps you identify which areas of interaction you are currently satisfied with and which you want to develop in the future.

Awakening

I worked to awaken the client's own reasons for the change and ideas on how the change would happen.

	I already do much	I do Some amount	I would like to do more
I showed interest in the client's ideas and experiences, especially regarding the desired behavior.	☐	☐	☐
I helped the client speak up for their change.	☐	☐	☐
I used a structured approach to amplify and evoke the talk of change.	☐	☐	☐
I seized opportunities to delve deeper into the topic when a client offered reasons for the change.	☐	☐	☐
I studied the client's readiness for change and motivation to guide the progress of the discussion.	☐	☐	☐
I prompted talk of change and responded to it consistently.	☐	☐	☐

I actively offered reasons for the change or gave advice on how to make a change. I didn't take into account the client's knowledge, attempts to change or motivation.

	I do and could reduce
I offered information/advice strictly even when the client showed that they already knew a lot about the subject.	☐
I ignored or misunderstood what the client said about the desired behavior.	☐
I proceeded according to a list of questions prepared in advance, ignoring the client's answers.	☐
I sidestepped or ignored the clientr's perspectives on the conversation.	☐
I showed no interest in the points of view brought up by the client.	☐
I tried to overtalk, persuade or pressure the client to change.	☐

Cooperation

I actively promoted and encouraged balancing power relations so that the client's thoughts have a significant impact on the direction and outcome of the discussion.

	I already do much	I do Some amount	I would like to do more
I actively structured the meeting to take into account the client's perspectives on it.	☐	☐	☐
I listened and asked for the client's thoughts and ideas.	☐	☐	☐
I used a structured approach to amplify and evoke change talk.	☐	☐	☐
I pay attention to the client's suggestions, actively look for his point of view.	☐	☐	☐
I saw the client as an expert in their own situation.	☐	☐	☐
I limited my advisory role and limited my expert role to give space to the client's own ideas.	☐	☐	☐

I actively took on an expert role in most of the interaction with the client. There was a lack of cooperation.

	I do and could reduce
I clearly and openly took on an expert role.	☐
I denied or downplayed the client's thoughts or ideas.	☐
I dominated the debate.	☐
I argued against when a client offered an alternative approach.	☐
I was passive or dismissive.	☐

Conversation ideas for peer support session

First peer group meeting (practice week 2)

Discuss how self-training is going. Reflect on your experiences using the self-training templates. Discuss the following questions. We will come back to your answers during the training days!

Start by taking 5 minutes to think about and/or complete the assessment part of your chosen self-training template(s). Then, think about the following topics:

1. How did you use open-ended questions and reflections? Consider the situations in which it was easy to use the skills, as well as those in which they were difficult. What made it difficult to use the skills, and how could these things be influenced?
   Fill in the three issues that contributed to the difficulty, as well as possible solutions.

   1. Challenge: Possible solution:

   2. Challenge: Possible solution:

   3. Challenge: Possible solution:

2. Did you use the discussion template? How was the meeting?

3. What basic skills did you try to practice during the meeting? Please list three things that came up in the discussion to make it easier for you to use the skills:

4. What did you learned during the first weeks of self-led rehearsal? What kind of practices will be adopted in the future?

BONUS: To what extent could you regularly discuss MI training in your team meetings?

Notes:

Supplement 2. Descriptive results.

1. Use of the workbook and views on it

1.1. Use of practice plan and schedule

Did you utilize the self-practice plan and timetable included in the workbook?	*n*	%
Yes, exactly as it was	3	10,3
Yes, in a slightly modified way	13	44,8
I did not	13	44,8
Missing	4	
Total	33	100

1.2. Use of weekly skill training templates (n)

	Open questions	Reflective listening and summarizing	Affirmations	Recognizing change talk	Evoking change talk
Yes, I used it and filled it fully	2	1	0	0	0
Yes, but only partly	2	3	1	0	0
Yes, but I went through it mentally without writing anything down	12	12	12	13	12
I didn't use it	12	12	15	15	16
Missing	5	5	5	5	5
Total (n)	33	33	33	33	33

1.3. Use of conversation planning template

	n
Yes, used multiple times	2
Yes, but only partly	6
Did not use	21

1.4. Views on the workbook as a whole (n, %)

	Difficult to use	Useful for learning MI
	T2	T2
Fully disagree	3 (11,1 %)	2 (7,4 %)
Somewhat disagree	8 (29,6 %)	0 (0 %)
Neither disagree nor agree	6 (22,2 %)	10 (37,0 %)
Somewhat agree	7 (25,9 %)	13 (48,1 %)
Fully agree	3 (11,1 %)	2 (7,4 %)
Total (n)	27	27
Missing	6	6
Total (N)	33	33

2. Peer group meetings

2.1. Did you arrange time with colleagues or other training participants to discuss practicing MI?

	T2
Yes, every week or almost every week	4 (14 %)
Yes, every now and then	14 (48 %)
Rarely	8 (28 %)
Not even once	3 (10%)
Missing	4
Total (n)	29
Total (N)	33