

Motivational Interviewing in CKD & ESRD: A Patient-Centered Approach to Behavior Change

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Disclosures

I have no financial relationships to disclose.



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Objectives

- Understand the principles of MI
- Learn practical MI techniques
- Apply Motivational Interviewing strategies to real world cases



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MI Principles

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“The good physician treats the disease; the great physician treats the patient who has the disease.”
- Sir William Osler

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MI History

		
1983	1991	2000s- Present
William Miller first describes MI	Miller & Rolnick publishes first book on MI	MI expanded beyond addiction treatment into healthcare.

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POLL QUESTION

Have you ever used MI techniques in your practice?

- A. Yes, regularly
- B. Yes, occasionally
- C. I've tried a few strategies, but not formally
- D. Not yet, but I'd like to learn



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MI Definition

"MI is a collaborative, goal-oriented style of communication with particular attention to the language of change." (Miller & Rollnick, 2013, p. 29)

- Patient-Centered:** Focuses on the patient's values, concerns, and goals.
- Guiding, Not Directing:** Encourages change without pressure or confrontation.
- Elicits Internal Motivation:** Helps patients explore their own reasons for change.
- Enhances Autonomy:** Respects that change is ultimately the patient's decision.



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MI Principles

- Expressing empathy
- Developing discrepancy
- Rolling with resistance
- Supporting self-efficacy



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Transtheoretical Model

- Precontemplation** (*Not considering change*)
 - MI Focus: Build Awareness & Engagement
- Contemplation** (*Considering change but unsure*)
 - MI Focus: Explore Ambivalence & Encourage Reflection
- Preparation** (*Getting ready to change*)
 - MI Focus: Strengthen Commitment & Develop a Plan
- Action** (*Making changes*)
 - MI Focus: Support Progress & Reinforce Successes
- Maintenance** (*Sustaining change over time*)
 - MI Focus: Prevent Relapse & Maintain Motivation

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Traditional Approaches

(Directive & Confrontational)

- Authority-driven
- Fear-based persuasion
- Patient resistance is seen as defiance

Motivational Interviewing

(Collaborative & Patient Centered)

- Guiding, not telling
- Eliciting motivation
- Resistance is met with empathy, not confrontation

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What is motivational interviewing? (n.d.). Www.youtube.com. Retrieved December 4, 2024, from <https://www.youtube.com/shorts/Uln-CA7Sj58>

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Why It Matters in Chronic Kidney Disease & End Stage Renal Disease Care

- **Address Ambivalence and Resistance:** Reduces resistance and promotes open, trust-based conversations.
- **Enhances Engagement and Self-Efficacy:** Improves adherence to treatment plans, dietary changes, and medication use.
- **Builds Trust and Reduces Emotional Barriers:** Empowers patients to take an active role in their care.



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MI in Multidisciplinary Practice



- Dietitians:** Explore eating habits and reinforce wins.
- Social Workers:** Address psychosocial barriers (financial stress, isolation).
- Nurses:** Reinforce care plans and build trust in daily interactions.
- Nephrologists:** Guide patients through transplant decision-making.



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Practical Techniques



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Techniques: OARS

Open Ended Questions: Allows patients to speak freely while providing insight into their behaviors.

Affirmations: Build motivation and boost morale.

Reflective listening: Ensure patients feel heard.

Summarizing: Reinforce key points while painting the main goal.

POLL QUESTION

Which OARS skill do you personally use most often?

- A. Open-ended questions
- B. Affirmations
- C. Reflections
- D. Summaries

POLL QUESTION

Which OARS skill do you find most challenging to apply consistently?

- A. Open-ended questions
- B. Affirmations
- C. Reflections
- D. Summaries



Techniques: DARN CAT

- Desire: "I want/wish/would like..."
- Ability: "I could/can/might..."
- Reasons: "... would help me" "I need to..."
- Need: "I have to/really should..."
- Commitment: "I intend/plan/going to..."
- Action: "I'm ready/will start..."
- Taking: "I went/did/started..."

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POLL QUESTION

Which type of change talk do you hear most frequently from patients?

- A. Desire ("I want to...")
- B. Ability ("I could...")
- C. Reason ("It would help if...")
- D. Need ("I have to...")

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Overcoming Barriers to MI in Clinical Practice

- Be flexible
- Training and resources
- Embrace/Roll with resistance
- Encourage strategies that allow more impactful interactions

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Clinical Research

Applications of motivational interviewing in adolescent solid organ transplant

John M. Gertzel, PhD, David L. Gertzel, PhD, David L. Gertzel, PhD, David L. Gertzel, PhD

First published: 16 March 2024 | <https://doi.org/10.1111/jon.12711>

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Abstract

Background
Adolescence is a developmental period that is known for the highest risk of difficulties with adoption and implementation of health behaviors for successful transplant. Motivational interviewing (MI) has been demonstrated to be an effective strategy in the management of substance abuse and improving adherence in both adult transplant and analogous pediatric chronic illness populations.

Aims
This paper describes MI and its application to adolescent transplant, providing examples of its potential use at each stage of the transplant journey.

Materials and Methods
Literature on the principles and utilization of MI are reviewed, as well as the use of MI in adult transplant and other pediatric populations.

Results
Evidence suggests high applicability of concepts of MI to pediatric transplant.

Discussion

Settings JM, Lefkowitz DS. Applications of motivational interviewing in adolescent solid organ transplant. *Pediatric Transplantation*. 2024;28(2). doi:<https://doi.org/10.1111/jon.12711>



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Clinical Research

The Impact of Transtheoretical Model-Based Motivational Interviewing on Self-Efficacy and Adherence to Treatment in Hemodialysis Patients

Capuk H. Ayilaz R, PhD, David L. Gertzel, PhD, David L. Gertzel, PhD, David L. Gertzel, PhD

First published: 16 March 2024 | <https://doi.org/10.1111/jon.12711>

23

Abstract

Background
Hemodialysis patients often face challenges in adhering to dietary, fluid, and medication guidelines due to the lengthy nature of their dialysis sessions and various associated comorbidities.

Methods
This study was conducted between June 2022 and March 2023 at hemodialysis centers in eastern Turkey. It included 50 patients in the experimental group and 50 in the control group. The experimental group received six sessions of Transtheoretical Model-based motivational interviewing, while the control group received no intervention. The present poster randomized controlled trial was registered in the Clinical Trial Registry (NCT05100000).

Results
The results indicated a significant improvement in QIDS scores. A significant difference was found between the groups in post-test scores ($p < 0.05$), and a statistically significant difference was also observed in follow-up scores ($p < 0.05$). Within-group comparisons revealed significant differences between pre-test and post-test scores for the experimental group ($p < 0.05$). There was no significant difference between pre-test and follow-up scores in the control group ($p > 0.05$). In the QIDS-MOS, the experimental group showed a significant improvement in scores ($p < 0.05$).

Capuk H, Ayilaz R. The Impact of Transtheoretical Model-Based Motivational Interviewing on Self-Efficacy and Adherence to Treatment in Hemodialysis Patients. *J Fam Clin Pract*. 2023;3(3):46-50/51-52.



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MI: Application

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Case Study #1



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Patient Background:

Mr. Hopkins, 58-year-old African American male with ESRD on hemodialysis. History of diabetes, hypertension, and obesity. Lives alone, retired, with limited support, and financially strained.

Current Challenges:

- Frequently missed dialysis sessions
- Poor diet compliance (high sodium/potassium foods)
- Recurrent hospitalizations for fluid overload
- Expresses frustration and hopelessness: "I'm on a budget and I don't have help to make these changes."

Case Study #1: Discussion

- What stage of change is Mr. Hopkins?
- What strategies might help shift his perspective from hopelessness to identifying small, achievable goals?
- How can the care team address his limited social support and financial stress while promoting adherence?
- Which MI strategies could be applied to explore Mr. Hopkins' ambivalence about dialysis and diet?

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Case Study #2

Patient Background: Ms. Rogers, 52-year-old woman with ESRD on hemodialysis, diabetes, hypertension, obesity, and a history of stroke. Divorced, lives alone, works part-time as a receptionist. Strong support system from daughter and friends, but experiences limited physical activity due to fatigue and joint pain.

Current Challenges:

- On hemodialysis for two years; under evaluation for kidney transplant.
- Initially hopeful, now discouraged by lengthy testing and requirements.
- Concerned about post-transplant complications, strict medication adherence, and frequent follow-ups

Presenting Issue: Ms. Rogers feels caught in an endless cycle of tests and appointments. The process has shifted her mindset from hopeful to uncertain. She's questioning whether she's ready for the commitment of transplant care.

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Case Study #2: Discussion

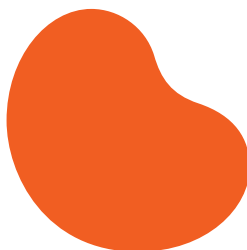
- How could MI address her ambivalence about transplant readiness?
- How can motivational interviewing help Ms. Rogers reframe her concerns and clarify her personal goals for transplant readiness?
- What strategies might help validate her feelings of discouragement while exploring her values and motivations for pursuing (or delaying) transplant?
- How can the care team balance providing information about risks/requirements with supporting her autonomy in decision-making?

Summary

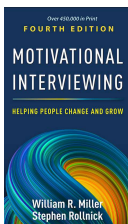
MI is a collaborative approach to facilitating behavior change.

Encourage behavioral change using techniques like OARS and DARN CAT to create a safe, nonjudgmental space for patients to explore ambivalence and engage in changes.

Practice application by using techniques to address challenges perceived by patients and providers.



Resources



- Books
 - Motivational Interviewing: Helping People Change by William R. Miller & Stephen Rollnick
 - Building Motivational Interviewing Skills: A Practitioner Workbook by David B. Rosengren
 - Motivational Interviewing in Health Care: Helping Patients Change Behavior by Stephen Rollnick, William R. Miller, and Christopher Butler
- Coursera: Motivational Interviewing for Health Professionals
- Training and Workshops through Professional Associations (MINT, APA, NASW, etc.)

Stay In Touch

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QUESTIONS?



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