

# Motivational Interviewing and Childhood Obesity



## The Pediatrician and Parent Conversation

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# Motivational Conversation



What to say to the Parent after Screening their Child for Body Mass Index (BMI) with an overweight or obese result.

1. In order to assist the young patient with weight loss, the family must be involved in the discussion. Parents play a critical role at home in preventing childhood obesity, with their role changing at different stages of their child's development.
2. Parents who understand their role in influencing their child's dietary practices, physical activity, and sedentary behaviors, will understand the importance of weight status.
3. Parents may need motivation or guidance on how to create a healthful nutrition environment in their home, provide opportunities for physical activity, discourage sedentary behaviors such as TV viewing, and serve as role models themselves.

## What is Motivational Interviewing?



Motivational Interviewing (MI) is defined as a collaborative, person (patient)-centered form of guiding to elicit and strengthen motivation for change



MI begins with allowing patients to commit to a change by having them verbally describe their reasons why the change is good for them.



Families who participate in Motivational Interviewing (MI) with their child's pediatrician had significantly greater reductions in Body Mass Index (BMI)

## Building Confidence



Families need to have the confidence that they can indeed change. They need to be involved in establishing a realistic plan and come to the best solution that will work for them. Pediatricians should help boost their confidence and applaud successes when they speak to them at their next visit.

# Use OARS to Carry the Conversation



- OPEN-ENDED QUESTIONS
- AFFIRMATIONS
- REFLECTIONS
- SUMMARIES

## Open Ended Questions

- Are those that require the receiver to respond with more than a yes or no answer.
- They elicit responses that reveal the thought patterns and knowledge of the speaker.
- They also allow the clinician to say which behavior needs to be changed in a less direct manner.
- These questions get the conversation focused on "change".

Closed: "Your child needs to be at a healthier weight. Are you ready to start them on a diet and increase their exercise?"  
Parent: "No"

Open: "Your child really should be at a healthier weight. What are you already doing to help him/her to be healthy?"  
Parent: "Well..."

Open: "What is working for your family around diet and exercise? Why might you want to make a change in family diet and exercise?"  
Parent: "What works for us is..."

Open: "If you decided to try to help your family get to a healthier weight, how would you go about doing it?"  
Parent: "I think we could try this activity..."

## 2 Types of Questions that Support Change

### 1) Questions requiring answers that challenge the parent to continue on with their current unhealthy habits

- What concerns you about your child's weight?
- What makes you think you need to do something about your child's weight?
- What hassles have you experienced in relation to weight gain in your family?
- What do you think will happen if you don't change anything about this?

### 2) Questions that require answers that focus on the advantages of change

- How would you like things to be different for your family?
- What would be good things about a healthier lifestyle for your family?
- What would you like your life to be like five years from now?
- What are the main reasons you see for making a change in your families diet?

# Optimism about Change

Gauging the patient's sense of confidence in their ability to make a change is also a part of the MI conversation. You may want to establish a numerical value to chart: "On a scale from 1 to 10 with 10 being extremely confident, how confident are you that you can (be specific) exercise 30 minutes a day 3 times a week?"

## Open-Ended Questions: Optimism about Change

- If you decided to make a change in diet and exercise, what would you do to be successful?
- What do you think would work for you if you decided to change your diet or exercise more?
- When else in your life have you made a significant change like this?
- How did you do it?
- What personal strengths do you have that will help you achieve a healthy weight?

## Open-Ended Questions: Intention to Change

- What are you thinking about your eating and exercise habits at this point?
- What do you think you might do?
- What would you be willing to try? What do you want to have happen?



**Affirmation** statements help build the relationship of trust through this change process and helps confirm that you want the family to succeed.

- Commenting positively: "You have demonstrated a strong commitment to others."
- Making a statement of appreciation. "I appreciate your being honest with me about how your spouse is going to make this change difficult for you."
- Commenting on a positive behavior. "You've been very consistent with your approach to cooking breakfast every day." An expression of caring, and support for your family and a great way to help your child achieve a healthy weight."

**Reflections** statements show empathy and let the parent know that you are really hearing what they are saying; they are not questions rather they restate what the parent says and selectively reinforce change talk

- Restate what the parent says and selectively reinforce change talk.
- Put the parent in a more active role. By making a reflective statement and then stopping, the other person is "expected" to uphold their end of the conversation and make a statement rather than simply answering an open-ended question.
- Example: "So, you say your children won't eat vegetables, and they are expensive, but you feel you can prepare them for yourself."

# The Summary

Realizing that office visits are time limited, it is important to wrap up the visit and summarize the MI conversation. Parents do understand that you serve many patients, so it is fine to discuss time limitations up front. Ending the visit with a smooth summary statement will not come as surprise nor will it seem as an abrupt shift in conversation.

## 1) Summarize by collecting material offered by the parent into a conclusive statement

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- Summary Example: "You've expressed concern about your child's weight and some family health habits."
- What personal strengths do you have that will help you achieve a healthier home?

## 2) Move to an Action Step

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- If the parent seems to be saying the same thing over and over, link their last statement with something discussed earlier and then move to action.
- Transitional statements help you move to action after drawing together what has happened during the encounter.
- "We've talked about a lot of things today; if you had to pick one to work on with your child, what would it be?"

## 3) Goal Setting

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Ultimately, the entire conversation is meant to establish a mutually acceptable established goal and objectives between you and the parent. To achieve the goal, several objectives may be needing in order to lead to the goal of achieving a healthy weight for their child. This might include the use of a community-service dedicated to improving diet or increasing exercise.

After listening to the parent describe what they think might work and considering your knowledge of community resources, if you can suggest a resource that you feel meets their needs, *make the referral*. "Our clinic has created a community resource inventory. We think these are resources that can help you. Before you leave, I'd like for you to tell me which resources you'd like."



**The importance of the summary is to establish goals with the patient around diet and exercise and document the discussion and goals in the medical record or chart notes**

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