COVID-19 and Vaccine Hesitancy
How Can Motivational Interviewing (MI) help?

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A Note
This two-hour training is not a substitute for a comprehensive training of Motivational Interviewing (MI).
To become proficient in the use of MI, like in any skill (tennis, piano, etc.), one must receive comprehensive trainings with practice and receive informed feedback.
COVID-19 Vaccine Hesitancy: How Can Motivational Interviewing (MI) Help?

July 22, 2021

Agenda
- Define Motivational Interviewing
- State the nature of ambivalence and sustain talk
- Describe the role of empathy in helping people change
- Describe the Explore-Offer-Explore approach to having a conversation about vaccine hesitancy

What is vaccine hesitancy?
- A delay in acceptance or refusal of vaccines, despite availability of vaccination services
- Complex and context specific, varying across time, place and vaccine

https://www.who.int/immunization/programmes_systems/TrainingModule_ConversationGuide_final.pptx?ua=1

Chat Question
- On a scale of 0 to 10, where 0 is not at all confident and 10 is extremely confident what number would you say YOU ARE in terms of being confident about effectively talking to someone who is hesitant about getting the COVID-19 vaccine?
Why Vaccination Matters

» Dr. Anthony Fauci, the government’s leading infectious-disease scientist, has estimated that somewhere between 70% and 85% of the US population needs to get inoculated to stop the scourge that has killed close to 470,000 Americans.
» More recently, he said the spread of more contagious variants of the virus increases the need for more people to get their shots—and quickly.

Why Vaccination Matters

Poll says a third of US adults skeptical of COVID-19 vaccine

Reasons for Hesitation

» 65% cited worries about side effects
» About the same said they don’t trust COVID-19 vaccines
» 38% said they don’t believe they need it
» Similar share saying that they don’t know if the vaccine will work and that they don’t trust the government

Reasons for Hesitation

Poll says a third of US adults skeptical of COVID-19 vaccine

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Meet Gloria
"I don’t trust pharmaceuticals. I really don’t. And it doesn’t sound like it’s going to be safe.”

She reports she has received flu and pneumonia shots but is concerned about rumors about what’s in the coronavirus vaccine, and her friends have the same hesitation.

Common Responses
› Explain to her that those rumors are false, the vaccine is safe
› List the specific benefits of getting vaccinated
› Tell her how you got vaccinated and how she could too
› Persuade with logic or warn her - what will happen if she doesn’t get vaccinated
› Diagnose, inform or give her education

Chat Questions
What do you think Gloria will do now?
Why Use MI for Vaccine Hesitancy?
› Chat the percent of Clinicians who ask patients something like:
  – What can I do for you today?
  – What is your main concern?
  – Tell me what brings you in today?

Why Use MI for Vaccine Hesitancy?
› Clinicians elicited the patient’s agenda in 36% encounters.
› In primary care at 49%.

Why Use MI for Vaccine Hesitancy?
› Chat the amount of time a Clinicians gives a patient time to talk before they interrupt and start talking?
› 11 seconds or less
Motivational Interviewing (MI) Defined

"...a person-centered counseling style for addressing the common problem of ambivalence about change."

(Miller and Rollnick, 2013; p.29)

MI and Ambivalence

- Ambivalence is a natural part of change
- Having mixed feelings/thoughts at the same time (ambivalence) is not labeled as resistance or as pathological
- Part of ambivalence is thinking of one side, and then naturally thinking of the other side, and getting stuck

MI and Ambivalence

- Goal of MI is to help people resolve their mixed feelings or thoughts (good and bad) about making a change and move towards or make a decision
- When a person talks about a change, they are more likely to change

*Ask (evoke), don’t tell*
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Change Talk – DARN CAT - Evocation
- Desire: “I want, I would like to, I wish…”
- Ability: “I could, I can, I'll try, I might be able to…”
- Reasons: specific reasons for change.
- Need: “I must, I have to, I should, I need…”
- Commitment language: “I will, I promise…”
- Activation: I'm ready, “almost there”
- Taking steps

MI and Ambivalence
- However, when we take up the “good” side of ambivalence, people naturally voice their “bad” side (psychological reactance)
- When a person talks about NOT changing, they are less likely to change

Resist the Righting Reflex
- Our desire to keep people from harm, and to correct what is wrong
- Our desire to “fix” the person
- Our good intentions
- A sense of working too hard
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Sustain Talk

› The person’s own verbalizations favoring the status quo (no change)
› It is NATURAL to voice sustain talk in response to their own or others’ arguments for the pro side of change
› Simply one side of ambivalence

Sustain Talk

› Yeah, but…”
› The nice “yes” but it’s really a no.
› The resigned, “oh, no.”
› The angry “No!”
› Desire: “I have no desire to get vaccinated.”
› Ability: “I can manage fine without getting vaccinated.”
› Reasons: “I’m afraid of the side effects.”
› NOT labelled as pathological or denial

Applying Five Core MI Skills

› Open Questions
› Affirmations
› Reflections
› Summaries
› Providing information and advice with permission

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Step One

› Begin with the goal in mind-to have a conversation where the client/patient states their own reason to get the vaccine
› Patients/clients are more likely to be LESS defensive when they feel understood
› Reflections or statements of understanding can help people feel less defensive

Reflective Listening

The Purpose of Reflective Listening

› Helps the person feel understood and/or understand themselves better
› Response to a person’s
   – statement
   – body language
   – mood
   – tone of voice
› It’s a statement of understanding
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Chat A Reflection  
"I don’t trust pharmaceuticals.  
I really don’t. And it doesn’t  
sound like it’s going to be safe.”  

She reports she has received flu  
and pneumonia shots but is  
concerned about rumors about  
what’s in the coronavirus vaccine,  
and her friends have the same  
hesitation.  

Reflective Listening Examples  
› So your biggest concern is…  
› You have questions about….  
› You’d really, really like some answers about vaccine  
safety!  
› People you trust have said (-----) about the vaccine…  
› It’s important to you (reinforce a value- that you stay  
safe, that you are healthy, that you feel more at ease…)  
› You like making up your own mind.  

Step Two- Ask An Open Question  
› Simple and direct  
› Not judgmental or leading  
› Ask more open than closed  
› Open questions often begin with:  
  – What…  
  – How…  
  – Tell me about…  
  – Describe…
Open Question Examples
› These opening questions begin to let the practitioner know more about what and how the client/patient is thinking about the vaccine.
› Remember listen to understand, not listen to respond.
› What would help you feel better about the COVID vaccine?
› How have you been doing with the COVID mandates about masks, staying in and physically distancing?
› What are you looking forward to after we all get this COVID under control?
› What have you missed about your life from pre-COVID days?

Open Questions: Strengthening Confidence
Ask open questions that evoke and strengthen ability (can, could, do) language.
› What needs to change for you to decide to get the vaccine? What might be a small first step towards getting one?
› What would give you more confidence about it?
› When you are ready, how would you get it?
› How did you manage in the past when you needed to make a health decision like this? What helped you?

Reflective Listening Examples
› “Whether or not you get the vaccine is entirely up to you” (support autonomy)
› “I’ve heard this from other patients/clients. Would you tell me some of your reasons for not wanting the vaccine right now?”
› “Others have told me this too-can we spend a couple of minutes talking about being as safe as possible right now in relation to COVID transmission?”
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Meet Dan
Dan tells you he doesn’t want to get the vaccine because he is worried about side effects, despite the shot’s safety record over the past couple of months.

He tells you that his grandfather got the vaccine and got very sick and had to go to the emergency room.

Chat a reflection or question
Dan tells you he doesn’t want to get the vaccine because he is worried about side effects, despite the shot’s safety record over the past couple of months.

He tells you that his grandfather got the vaccine and got very sick and had to go to the emergency room.

Step One and Two Together
› Start with listening for understanding (vs responding)
› “I understand that you want to make the best choice for yourself. You grandfather seems to have had a bad reaction.
› What side effects are you concerned about?”
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Five Core MI Skills
- Open Questions
- Affirmations
- Reflections
- Summaries
- Providing information and advice with permission

Step 3: Explore Offer Explore
- Way to engage people in a helpful conversation
- Remedy for the “advice trap”
- Elicit-Provide-Elicit
- Time saver
- Starts with an agreed upon Focus or topic
- May transition to Action Planning

Explore Readiness and Experience
- What do you know about the benefits of the COVID-19 vaccine?
- What are you currently doing to protect yourself and your family against COVID-19? Flu?
- What is your understanding about YOUR risks of getting COVID-19?
- What have you been doing to help you (and your family, friends) avoid getting infected?
Explore What the Person Already Knows

› I’m curious about what you’ve heard about the COVID vaccine?
› What is your current thinking about the COVID vaccine?
› What do you know already about how vaccines work?
› Do you know anyone who has gotten (or is getting) the vaccine? What do they say about it?

Support and Affirm Response

› I’m glad to hear that you have been taking steps to protect yourself and others from getting COVID-19.
› It’s good that you have chosen to be vaccinated for flu in the past.
› It’s great that you have taken other steps to stay healthy during this pandemic.

Ask Permission to Share Information

› Seeking a collaborative partnership
› Helps to transition the conversation
› Shows respect
› “You probably do not want to spend a lot of time discussing the vaccine. May we discuss it for 2 minutes?”
› If you don’t mind, I’d like to tell you some information.
› I’ve heard some interesting feedback from others, may I share some of that?
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Sharing Information with Permission

- No lectures!
- Hit the high points first and read body language, voice tone to know when to stop
- You have 2-3 minutes here

Sharing Information with Permission

- The risk of having a severe case of COVID-19 is greater for individuals with chronic conditions and those who are 65 or older.
- COVID-19 vaccines work. (Cite data from trials)
- Reduced risk of getting infected with the coronavirus
- Reduced risk of having complications, hospitalization, long-term effects
- Reduced likelihood you will spread infection to others
- It is critically important for everyone to do their part to prevent spreading COVID-19 to others

Sharing Information with Permission

- Consider family-oriented messages
- Dispel myths and misconceptions
- Vaccine protects both health and high-risk people
- “Vaccination with a COVID-19 vaccine, along with other methods (like wearing masks, physical distancing, washing hands) provides protection against getting or transmitting the virus.”
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Support Choice and Autonomy

› It's not your job to change anybody, instead you create an opportunity for people to change.
› People who feel free to make a choice are less likely to "push back" against the clinician.
› "Whether or not you get the vaccine is entirely up to you."
› "It's really up to you to decide."
› "You know what is right for you."

Explore What is Next

› Explore their response to information
  – What do you think about this information?
  – What questions do you now have?
  – What will you tell your family/partner about this?

› "You've clearly thought about the vaccine a lot. What do you think you will do now."

Meet Sonia

Sonia tells you, "I am not convinced about vaccines, so it seems like too much effort to come all the way to get them."

Chat some Explore-Offer-Explore responses
Chat your response to Marie
Marie tells you she doesn’t want to get the vaccine because “the government is lying to us.”

She says, “I’m never getting this vaccine!”

Reminders

<table>
<thead>
<tr>
<th>DO</th>
<th>DON'T</th>
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<tbody>
<tr>
<td>Do take a guiding style.</td>
<td>Do not take a traditional directive and argumentative style.</td>
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<tr>
<td>Do work with the parent/patient to establish trust.</td>
<td>Do not identify and solve the problem for the parent/patient.</td>
</tr>
<tr>
<td>Do explore doubts and interest in vaccination. Think from their perspective.</td>
<td>Do not argue or debate with the client. Make it known that you are there to listen to their concerns.</td>
</tr>
<tr>
<td>Do take time to reflect on what the caregiver/patient is saying.</td>
<td>Rush through without listening</td>
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Agenda Review

- Define Motivational Interviewing
- State the nature of ambivalence and sustain talk
- Describe the role of empathy in helping people change
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Final Thoughts and Questions

- Be here now
- Say Yes
- It’s not about me
- It’s in there
- We’re in this together
- Slow is fast
- Mistakes are a gift
- Less is More

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Thank You!
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Resources

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