

Case Study of an Asynchronous Motivational Interviewing Add-on to a Community Mental Health Course in a Social Work Curriculum

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Abstract: *This case study explores the implementation and outcomes of an asynchronous Motivational Interviewing (MI) training program integrated into a Master of Social Work (MSW) course on community mental health. MSW (n=64) students completed a five-module intervention known as the MI Companion, designed to strengthen reflective listening, open-ended questioning, and support for client autonomy through deliberate practice. Students participated in pre- and post-intervention mock interviews with standardized clients, which were coded using artificial intelligence (AI) trained with the MITI 4.2.1 coding system. Findings from this case study demonstrate significant improvements in MI skills, including an increase in open questions and a reduction in non-adherent behaviors. This case study contributes to the evidence base supporting asynchronous training tools as a flexible, low-burden method for enhancing practice readiness in social work education.*

Keywords: *Motivational Interviewing, asynchronous learning, social work education, deliberate practice*

The Council on Social Work Education (CSWE, 2022) requires social work curriculum to teach students to “engage in practice-informed research and research-informed practice” and to “use empathy, reflective listening, and interpersonal skills to engage [clients]” (pp. 4, 11). With over 2400 clinical controlled trials (Miller & Rollnick, 2023), Motivational Interviewing (MI) is considered an evidence-based practice or communication method that has been used in engagement, assessment, and implementation practice with individual, group, family, and organizational clients (Hohman, 2021). MI has been applied to and tested in diverse areas of behavior change, including substance use, medication adherence, diabetes control, treatment attendance, school bullying, elder fall prevention, gambling, and parenting practices (Cross et al., 2018; Frost et al., 2018). It has been expanded beyond behavior change to areas such as sports coaching, leadership, and for those interested in personal growth (Miller & Rollnick, 2023). MI is also effective cross-culturally. A systematic review of 25 studies of cultural adaptations of MI indicated improved outcomes for diverse clients (Self et al., 2023).

In addition to the positive outcomes of the use of MI with diverse client populations, MI aligns with social work exceptionally well due to its emphasis on client autonomy, empowerment, partnership, strengths orientation, and compassion, all known as the “spirit” of MI (Hohman, 2021; Miller & Rollnick, 2023). The skills of MI include in-depth listening, reflective listening, use of affirmations, and open-ended questions used to evoke change talk from the client, or the client’s own motivations, reasons, desires, and need for

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change. MI practitioners use summaries of change talk statements along with key questions regarding the clients' next steps on the journey of change, but only if the client is ready to move forward (Egizio et al., 2019; Miller & Rollnick, 2023).

For social workers and others in the helping professions, MI may seem similar to their current practice, but in many ways, MI is different and can be difficult to learn (Aujoulat et al., 2025; Zweben et al., 2022). Implementation studies have shown that changing students' and clinicians' skills through learning evidence-based practices like MI can depend on a variety of factors, including agency climate and support, as well as the availability of ongoing coaching and feedback (Pellecchia et al., 2024). Usually, training or teaching alone is not enough to sustain the skills gained, as has been found in most implementation studies of any evidence-based practice (Rolls Reutz et al., 2020). When MI trainees or students receive feedback with coaching, it is usually based on fidelity-measured scores of social worker-client interactions, collected through observation, video, or audio recording. This, however, is a labor-intensive process (Gill et al., 2020; Wilkins & Whittaker, 2018).

As MI has emerged as an evidence-based practice that is congruent with social work values, it has been increasingly taught in schools of social work to meet accreditation standards as well as student demand. MI content may be offered over several weeks, embedded in practicum seminar, advanced practice, child welfare, or substance use classes, or as a separate full-semester elective course (Hohman et al., 2015; Iachini et al., 2018; Smith et al., 2018). Recent studies have also demonstrated the effectiveness of coding learning, a method where students learn to code their own MI practice behaviors to further develop their skills (Hodorowicz et al., 2020).

The Current Study

This case study aims to add to the research regarding MI learning approaches by evaluating an asynchronous MI training program that can be easily added to course curricula by instructors who are not experts in the method. It offers a flexible alternative to in-class instruction in courses that are already dense with content required to meet accreditation standards for social work education. Asynchronous learning allows students to engage with material at their own pace, addressing common issues for students by offering flexibility and the ability to balance commitments (Kayalar, 2021).

The MI Companion

The MI Companion, an asynchronous training program developed by the first author, a Motivational Interviewing Network of Trainers (MINT) member since 2005, introduces students to MI concepts through a series of 5 modules based on the work of Miller and Rollnick (2023) and Rollnick et al. (2008; see Table 1) and instructs them in the deliberate practice exercises (DPE) to implement what they are learning. Deliberate practice is an intentional, structured approach to skill development that uses focused repetition and feedback (Ericsson, 2008; Manuel et al., 2022) provided by the developer.

Table 1. *MI Companion Modules and Learning Objectives*

Module	Learning Objectives
Resisting the “Righting Reflex”	<ol style="list-style-type: none"> 1. Identify and reduce the tendency to offer unsolicited advice or solutions. 2. Guide clients in generating their own ideas and goals for change.
Understanding Motivation	<ol style="list-style-type: none"> 1. Use open-ended questions to elicit change talk (desire, ability, reasons, or need to change). 2. Recognize and reinforce client language about change.
Listening Reflectively	<ol style="list-style-type: none"> 1. Distinguish between simple and complex reflections. 2. Use reflective statements to demonstrate empathy. 3. Steer conversations toward change using reflective listening.
Empowering Individuals	<ol style="list-style-type: none"> 1. Practice asking permission before offering information or advice. 2. Offer affirmations that acknowledge client strength and efforts. 3. Emphasize client autonomy and support self-efficacy in decision-making.
Structuring the Conversation	<ol style="list-style-type: none"> 1. Identify and apply the four phases or tasks of MI (engage, focus, evoke, plan). 2. Use structured openings to establish timeframes, clarify roles, and set collaborative agendas.

Methods

Sample and Procedures

This case study was conducted in the context of a community mental health course offered within an MSW program. The aim was to explore how an asynchronous MI training, the MI Companion, functioned when integrated into an existing course structure.

The sample included 62 second-year MSW students enrolled over two semesters, taught by two different instructors. Students were assigned the MI Companion as a credit/no credit assignment, and paid \$34.99, similar to purchasing an online textbook for access. IRB approval was granted for the analysis of data collected through regular educational practices.

The course instructor and the developer of the MI Companion collaborated on the integration of the program into the syllabus. The developer provided a brief explanation and registration link. Next, students registered for the training and completed it according to the instructor’s timeline, in this case by the end of the semester. The developer then responded to student reflections on the deliberate practice exercises as they were submitted. Instructors had access to all training activities, including student posts, but were not obligated to comment or reinforce material in class, though at times they did.

Data Collection

To explore changes in students’ skills, mock interviews were conducted before and after training. Each student completed a recorded mock interview with a standardized client actor (SCA), both prior to and after completing the MI Companion training. The mock interviews were approximately 10 minutes long and conducted via Zoom.

The SCA presented as a college-aged student experiencing depression in the wake of COVID-19, having withdrawn from college after the loss of a family member. Students were not provided feedback on their recording after the first interview, in order to isolate the effects of the asynchronous training. After all training components were completed and data were collected, students received feedback on their recorded interviews.

Measures

The case study drew on multiple data sources to assess students' skill development. Audio files from the mock interviews were submitted to Lyssn.io to be coded by artificial intelligence (AI) (Flemotomos et al., 2022). Lyssn's AI models utilize a transformer-based deep learning method (Vaswani et al., 2017), and are trained on human transcribed and annotated data by trained mental health professionals, including members of the Motivational Interviewing Network of Trainers (MINT), for rating therapist interventions as defined by the MI Treatment Integrity (MITI) fidelity coding manual 4.2.1 (Moyers et al., 2014). Members of the human annotation team are trained to reach interrater reliability on global (e.g., empathy) and utterance-level metrics (e.g., open questions), and undergo quality evaluations to monitor coder drift. Lyssn's models are tested and evaluated using empirically derived methods (Flemotomos et al., 2022). Lyssn's metrics have been utilized in large-scale evaluations of psychotherapy content (Imel et al., 2024).

The behavior counts include the use of reflections, questions, open questions, reflection-to-question ratio, MI adherent/encouraged behaviors, MI non-adherent/discouraged behaviors, and general MI proficiency. MI adherent/encouraged behaviors include providing affirmations, seeking collaboration, and emphasizing autonomy, while non-adherent/discouraged behaviors include confronting and persuading. Five-point Likert scales are used to measure empathy and collaboration, while the amount of counselor talk time is assessed as a percentage of the conversation length. MI Proficiency, a score unique to Lyssn.io, is calculated as the sum of all measures that met basic or advanced competency levels. See Table 2 below for a further description of each measure.

A 10-item true/false questionnaire was used to demonstrate knowledge gain. Items included ideas related to client resistance, the need to hit rock bottom, readiness to change, and ambivalence. Items were developed based on the concepts presented in Miller and Rollnick (2023) and can be found in Appendix A.

Two statements based on the Helpful Responses Questionnaire (HRQ) were developed (Miller et al., 1991) to assess changes in approach before and after the training. Students were instructed to "Write a response that shows that you are listening" to two scenarios. In scenario 1, a 14-year-old student who hasn't been turning in his homework says, "Why should I start now? The teacher's going to fail me anyway. She never liked me." In scenario 2, a 42-year-old man who frequents the clinic says to you, "I know my liver is in bad shape, but I don't see any reason to stop drinking. I've been coming here for years and you all just fix me back up until the next time." Student responses were coded by the research team on a 5-point Likert scale based on the depth of reflection in each response. An HRQ score of 1 indicated no reflection and an interruptive "roadblock;" 2 was given to responses with both a reflection and a "roadblock;" 3 was given to simple reflections; 4 was given to

paraphrased reflections with appropriately inferred meanings; and a score of 5 was attributed to responses that met the criteria for a 4 in addition to the use of either similes/metaphors or a reflection of feeling consistent with the original statement (Miller et al., 1991).

Students were also asked to rate their confidence in using MI. Confidence was measured with a one-item question asking them to rate their confidence on a scale of 1 to 10. Student feedback about the training program was gathered with one open-ended feedback item and 3 Likert scale items (range 1 to 5), which asked how strongly they agreed that they 1) learned the principles of MI; 2) feel they were adequately trained to use MI; and 3) learned the skills of talking to clients about behavior change. Higher scores indicated stronger endorsement of the utility of the training.

Table 2. *Lyssn.io MI proficiency Measures*

Measure	Description	Basic	Advanced
MI Proficiency (Range 1-12)	A total score summarizing MI proficiency across 6 MI fidelity metrics: empathy, collaboration, % complex reflections, % questions, % MI adherent, and ratio of reflections to questions.	7-9	10 -12
Empathy (Range 1-5)	How well does the provider demonstrate understanding of the client's thoughts, feelings, and behaviors? Low empathy is characterized by counselor indifference or active dismissal of the client's perspective and experiences. High empathy is evident when the counselor shows an active interest in understanding what the client is saying. Higher scores indicate better MI performance.	3.5	4
Collaboration (Range 1-5)	How skillfully does the provider foster power-sharing that allows the client's ideas to influence the direction of the sessions? Low collaboration is characterized by a lack of counselor/client mutual understanding during the session. The counselor actively assumes the expert role for the majority of the interaction with the client. High collaboration is evident when the counselor works cooperatively with the client toward the goals of the interview. The counselor does not rely on dominance, expertise or authority to achieve progress. Higher scores indicate better MI performance.	3.5	4
Reflection to Question Ratio	The number of reflections divided by the number of questions.	1.0 or (1:1)	2.0 (or 2:1)
Percent Open Questions	The percentage of open-ended questions compared to closed-ended questions. More open questions than closed questions is desired. Open questions should be in the 40% range for Basic and 50% for Advanced. Higher scores indicate better MI performance.	>40%	>50%
Percent Complex Reflection	The percentage of complex reflections versus simple reflections. Complex reflections are when the counselor demonstrates significant understanding of what the client stated, typically above and beyond the exact words that client stated. Simple reflection is	>40%	>50%

Measure	Description	Basic	Advanced
	when the counselor adds little or no meaning or emphasis on what the client has said and merely conveys a basic understanding or acknowledgement.		
Percent Reflection*	The percentage of reflections out of all counselor utterances.	N/A	N/A
Percent MI Adherent	All behavior that is consistent with an MI Approach (Excluding MI Non-Adherent behavior that includes advice or confronting behaviors). Percent is calculated by taking the total number of each behavior divided by all behaviors in the session. Higher scores indicate better MI performance.	>90%	100%
Percent Therapist Talk Time*	Percent is calculated by taking total minutes of each therapist utterance or speech divided by total minutes in the session. Lower scores indicated better MI performance.	N/A	N/A

*Measures are not included in the MI proficiency score as there is no basic & advanced setting established.

Analysis

Paired t-tests were used to determine whether there were improvements in knowledge (true/false test), behaviors (Lyssn.io), and written helpful responses (HRQ items) between pre- and post-intervention. Two-sided p-values and Cohen's d effect sizes were reported, with effect sizes interpreted using standard cutoffs: small (0.2), medium (0.5), and large (0.8). These thresholds provide context for understanding the magnitude of observed changes and complement the statistical significance indicated by p-values.

Results

Of the 64 MSW students who completed the MI Companion training program, 62 completed the pre-post test. The majority identified as female ($n=48$, 77.4%), and their ages ranged from 23 to 54, with an average age of 31.2. At the time of the training, participants had an average of 4.25 years of direct service with clients, ranging from 0 to 29 years. A substantial number of participants reported at least some level of previous MI training before taking the course; 41.9% had a few hours of training, 11.3% attended a one-to-two-day workshop, and 6.4% had completed a semester course. However, 35.5% of the participants reported to have had no prior MI training at all.

The results of the behavior count analyses in the pre-and post-training mock interviews indicated several significant improvements in MI skills among participants. MI proficiency showed a substantial increase from a mean of 4.08 ($SD=2.02$) to 5.17 ($SD=2.60$; $t(63)=4.10$, $p<0.001$), indicating a meaningful enhancement in overall MI skills. The number of open questions used by participants also significantly increased ($t(63)=4.29$, $p<0.001$), and the number of reflections increased slightly but still significantly ($t(63)=2.30$, $p=0.03$).

There was a notable and significant reduction in MI non-adherent behaviors, which decreased from 24.51 ($SD=24.43$) to 16.76 ($SD=11.85$; $t(63)=-2.71$, $p=0.01$), indicating

that participants were much less likely to engage in any of the discouraged/MI non-adherent behaviors post-training. The reflection-to-question ratio improved from 0.55 ($SD=0.33$) to 0.67 ($SD=0.46$; $t(63)=2.40$, $p=0.02$), demonstrating a better balance between these foundational MI techniques. Empathy and collaboration scores showed slight increases, but neither of these changes were statistically significant ($t(63)=0.96$, $p=0.34$; $t(63)=0.82$, $p=0.41$, respectively). Talk time remained relatively stable, with no significant change ($t(63)=0.61$, $p=0.54$). See Table 3 for the analysis of all measured behaviors.

Table 3. Paired *t*-Test Results of Lyssn.io Results From Pre- and Post-Mock Interviews'

Measured Behavior	M (SD)		<i>t</i> *	<i>p</i> value*	Cohen's <i>d</i> *
	Pre	Post			
MI Proficiency (1-12)	4.08 (2.02)	5.17 (2.60)	4.1	<.001	0.51
Empathy (1-5)	3.65 (0.76)	3.73 (0.85)	0.96	0.34	0.12
Collaboration (1-5)	3.18 (0.72)	3.25 (0.77)	0.82	0.41	0.1
	% (SD)				
Complex Reflection (%)	84.8% (15.43)	89.7% (12.81)	2.18	0.03	0.27
Reflection (%)	10.6% (5.35)	12.5% (7.02)	2.3	0.03	0.29
Open Questions (%)	40.2% (16.19)	50% (15.16)	4.29	<.001	0.54
Talk Time (%)	58.7% (11.85)	59.6% (10.00)	0.61	0.54	0.08
MI Non-Adherent (%)	24.5% (24.43)	16.8% (11.85)	-2.71	0.01	0.34
	Ratio (SD)				
MITI**	.55 (0.33)	.67 (0.46)	2.4	0.02	0.3

Notes: **df*=63; **Motivational interviewing treatment integrity=# of Reflections/# of Questions

Regarding the basic and advanced cutoff scores used by Lyssn, students met the basic rating on empathy, and percent open question and achieved the advanced cutoff on percent complex reflections. They did not meet the basic cutoff for the reflection: question ratio or MI Proficiency; however, scores improved significantly in both measures.

The analysis of the pre- and post-training results (true/false questions, helpful response questions, and confidence levels), as shown in Table 4, reveals significant improvements in various measures following the MI Companion training program. The scores from the true/false questionnaires increased from a mean of 6.26 ($SD=1.74$) to 6.67 ($SD=1.66$; $t(62)=2.246$, $p=0.014$), which reflects a statistically significant improvement in participants' knowledge related to general MI concepts.

The quality of written responses to the HRQ statements also showed notable improvement. The mean score for the sum of the two HRQ items increased from 2.20 ($SD=0.87$) to 2.52 ($SD=0.78$; $t(57)=2.71$, $p<.001$). This significant change indicates that participants were better able to demonstrate their listening and MI skills in written form after the training. Confidence levels among participants saw the most dramatic increase, with the mean confidence score rising from 4.80 ($SD=1.80$) to 7.15 ($SD=1.0$; $t(54)=9.48$, $p<.001$). This substantial and statistically significant improvement reflects a clear improvement in participants' confidence in using MI techniques.

Student feedback following completion of the MI Companion was assessed through three Likert scale items (range 1 to 5) regarding learning outcomes and satisfaction. The

mean score was 13.5, which indicates strong overall student satisfaction with the training program with relatively minor variability ($SD=1.47$). The ratings ranged from 9 to 15, reflecting that, while some students were moderately satisfied, the majority were highly satisfied with their learning experience and outcomes. The results from this feedback signify that the majority of students learned the principles of MI, felt adequately trained, and gained proficient skills to be able to talk to clients about behavior change.

Table 4. Paired *t*-Test Results of Pre- and Post-Written Measures

Measure	Pre-Test M (SD)	Post-Test M (SD)	df	t	p value
True/False Items	6.26 (1.74)	6.67 (1.66)	62	2.25	.014
HRQ (2 items)	2.20 (0.87)	2.52 (0.78)	57	2.71	<.001
Confidence	4.80 (1.80)	7.15 (1.00)	54	9.48	<.001

Discussion

The integration of the MI Companion training into an existing social work course demonstrated effectiveness as an asynchronous tool for enhancing direct practice skills among students without adding much to the workload of professors. This model requires some collaboration between the course developer and the instructor, with the instructor being responsible only for the administrative tasks and the developer providing the MI content and related feedback directly to students. This innovative approach incorporated evidence-based practices into flexible learning modules, which address several CSWE standards (CSWE, 2022).

The MI Companion significantly improved students' understanding of and proficiency in key MI skills, including the use of open-ended questions and reflective listening skills. These skills are critical for establishing a client-centered dialogue that promotes client autonomy and allows clients to explore their motivations and ambivalence more deeply. The structure of the training allowed for an understanding and application of these techniques based on the results of the mock interviews. Although the students scored under the Basic standard cutoff, their scores moved in a positive direction and perhaps would continue to improve with additional feedback. Having practicum instructors trained in MI who could provide MI coaching could help students as they grow in their skills (Hohman & Lee, 2024).

A notable outcome of the training was the significant reduction in MI non-adherent behaviors, such as direct confrontation and persuasion. This change indicates that after the training, students adopted a more collaborative and empathetic approach, which is critical for creating a supportive and non-judgmental therapeutic environment. This type of environment may encourage clients to openly discuss their challenges and consider changes in their behavior. The shift away from non-adherent behaviors reflects an internalization of the foundational MI principles, which promote upholding client autonomy and empowerment (Miller & Rollnick, 2023).

The training increased students' understanding of core MI concepts. The distinct improvement in true/false results suggests that the MI Companion effectively conveyed complex MI principles in an accessible and practical manner. The responses from the post-training evaluations revealed that students felt more confident in their ability to respond to a wide range of client scenarios. It is unknown, however, how and if students applied these in their client interactions in their practicum placements beyond the deliberate practice exercises.

The practical applications of the training, through deliberate practice exercises and reflection, reinforced students' theoretical knowledge and allowed students to practice and refine their MI skills. The significant improvements in confidence levels, as indicated by the pre- and post-test measures, reflect the impact of the training on the students' professional development. Continuous practice and reflection are fundamental components of professional growth in social work, and the MI Companion was able to provide both in a structured yet flexible approach. By integrating theoretical learning with practical application and feedback, the training provided students with the framework to be able to not only understand MI concepts but also to apply them effectively and competently in their interactions with clients.

The results from the MI Companion training were consistent with previous research on the overall success of online and asynchronous learning methods (Meng et al., 2024). The flexibility and accessibility of the MI Companion allowed students to engage with the material at their own pace, which led to a deeper level of comprehension and more effective skill acquisition. Asynchronous formats are preferred by students over synchronous methods because they offer greater flexibility and effectiveness in time management and balancing commitments while maintaining the same level of learning comprehension and retention (Kayalar, 2021). The training mitigates the challenges associated with synchronous learning while still providing a robust educational experience. This approach supports the development of essential skills while accommodating the schedules and commitments of students, which increases the accessibility of higher education. The positive outcomes observed in the MI Companion training mirror the broader trends of the success of asynchronous learning models (Hodorowicz et al., 2020; Meng et al., 2024) and reinforce the potential of asynchronous learning to enhance educational outcomes in social work.

Limitations and Future Research

Despite the positive impacts observed in this study of the MI Companion training, several limitations should be acknowledged. First, the sample size ($n=64$) may not fully represent the diverse population of social work students, which limits the generalizability of the findings. The study's design also did not allow for a longitudinal approach to assess the retention and application of MI skills over time. The study did not compare the results of the MI Companion training directly with other forms of MI training, such as fully online or face-to-face training, which could provide a more comprehensive understanding of its relative effectiveness. And, as noted, professors varied in the extent to which they discussed MI and the MI Companion in the classroom. Further, from this design, it is

unclear whether the pre- and post-mock interview, conducted for evaluation purposes, had an impact on performance or learning, possibly priming students to engage in the training more fully. Another limitation of this model is the cost borne by students to participate in the MI Companion.

Methodological limitations should also be considered. This analytic approach increases the risk of Type I error due to multiple testing. Conducting 12 statistical tests at an alpha level of .05 results in an approximate 60% probability of observing at least one statistically significant result by chance alone, assuming independence among variables (Dunn, 1961). Further, no additional inter-rater reliability check was conducted beyond the initial validation of the Lyssn models, where a standard benchmark of 80% agreement between humans and AI was achieved, thus demonstrating the ability of Lyssn to accurately assess motivational interviewing conversations. Future research should consider these limitations and aim to address them by including larger, more diverse samples, incorporating longitudinal designs, and comparing the results of various training modalities.

Implications for Social Work

Many social work programs face barriers to offering high-quality instruction in MI, primarily due to the limited availability of faculty with formal MI training. This case study suggests that asynchronous, expert-developed training modules like the MI Companion offer a practical and scalable solution. Programs like the MI Companion can be integrated into existing coursework, including practicum seminars, to support the development of clinical communication skills and meet standards related to evidence-based practice. Its structure minimizes faculty workload, which makes it especially useful in programs with dense curricula or limited training capacity. This model also has potential for broader application. Programs may consider adapting asynchronous formats to teach other interpersonal or practice-based skills and create a sustainable path for strengthening clinical readiness across diverse instructional settings.

Conclusion

This case study demonstrates a novel strategy for addressing MI training gaps in social work education. By offering students a flexible and structured way to engage with evidence-based content, the MI Companion helped build confidence and foundational MI skills without requiring intensive faculty involvement. As educational programs continue to navigate constraints in staffing, time, and training resources, asynchronous methods represent a promising direction for equipping students with essential clinical competencies. Future research should examine long-term retention and application of these skills, as well as how similar approaches might enhance instruction in other key practice areas.

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Appendix. Motivational Interviewing True/False Knowledge Check

The following statements were part of an interactive knowledge check in the MI Companion training. In the original format, participants selected “true” or “false” for each statement using a dropdown menu. Statements were designed to assess conceptual understanding of motivational interviewing and to surface common misconceptions.

1. The client must accept their problem (for example: “I have this problem”) before they can get help.
2. Denial is a characteristic of the client's ambivalence to change.
3. Your expectations for the client's ability to change have no effect upon whether change occurs.
4. The client needs to “hit bottom” before they can change.
5. If clients are resistant to talk about change, direct confrontation and persuasion are required to help the person change.
6. You should emphasize personal choice over clients’ behaviors.
7. Ambivalent clients are generally incapable of making sound decisions in their current state of ambivalence.
8. Resistance is best thought of as a product of the interpersonal context in which it is observed.
9. Readiness to make change is the client's responsibility—no one can help them until they decide they are ready.
10. External pressure and consequences is the only way to make the client change.