Talking to Change: An MI Podcast Glenn Hinds and Sebastian Kaplan

Episode 57: Motivational Interviewing and Discord, with Stephen R. Andrew, LCSW



Sebastian Kaplan:

Hello, everyone. Welcome to another episode of Talking To Change: A Motivational Interviewing Podcast. My name is Sebastian Kaplan and I'm based in Winston-Salem North Carolina. And as always, I'm joined by my good friend, Glenn Hinds from Derry, Northern Ireland. Hello there, Glenn.

Glenn Hinds:

Hi Seb. Hi everybody.

Sebastian Kaplan:

Hello everyone. Well, today we have an interesting episode as always, as well as we think as always for you all and before we set the stage a bit and a bit of the context, Glenn, why don't you orient people to the ways that they can access us.

Glenn Hinds:

Of course. Thanks Seb. As always, you can contact us through Twitter @ChangeTalking. Directly to myself it's @GlennHinds, for Seb it's sgkfromnc and on Instagram it's Talking To Change Podcast and Facebook it's Talking To Change and our email for questions or information on trainings, it's podcast@GlennHinds.com.

Sebastian Kaplan:

Great. Today we are addressing a concept in MI that we haven't addressed yet, really. I don't know that it's even come up at all in any of our previous episodes, so this is an episode on discord and we just felt like it'd be useful to set a bit of the context historically with this term of discord. In earlier additions of the main MI text, Miller and Rollnick used a phrase that everyone really appreciated and loved this phrase of rolling with resistance. And it described a really gentle way of responding to somebody who was not maybe on board with a change plan or was perhaps pushing back on certain suggestions and they wrote a lot about it and people can access that on their own.

But what as I understand it anyway, the word resistance has maybe a not so patient centered or client centered history and Bill and Steve thought long and hard about, "What if we dropped the term resistance altogether and how could we then explain or describe what we think is helpful and what concepts we want people to take away from?" And so, they broke apart resistance into the terms, sustained talk, which as many of you know, is just the other side of ambivalence, really. With ambivalence there's change talk and there's the reasons to change and there's sustained talk, the reasons not to change. But they also wanted to capture the experience where there's perhaps a rupture in the actual relationship between the provider and the client, and that's where they borrowed this term



or applied this term of discord to describe that aspect of the experience, which as we all know comes up from time to time.

We were interested in the idea of an episode on discord and Stephen Andrew, who you all will hear from proposed, actually proposed the idea to us a couple years back at a conference. That's a bit about discord and its history, I suppose, within the MI literature. But as far as today's episode Glenn, we just got finished talking with Stephen. What do you think? What are your thoughts about what we've just discussed?

Glenn Hinds:

Yeah, well, like you say, it's interesting for us to consider that the whole relational aspect of the discord, that the resistance is now split into to what's going on between me and you as a practitioner and how I'm thinking about you and perhaps how you're thinking about me along with what we now call sustain talk and just people working through their ambivalence. That in the conversation that we went beyond, just the exploration of discord to explore a lot of the key concepts of motivational interviewing, where Stephen has offered, I suppose, what be considered adaptations or translations of things like reflective list, and he's changed the way he describes that when he's doing training. But also, in his understanding of description of discord, he talks about the relationship the individual has with themselves, and that the discord happens between the individual's head and their heart. It's a really intriguing way of going even deeper into the concept and maybe exploring discord in the context of its presentation, from a spirit perspective of motivational interviewing.

We then go on to invite Stephen to offer an intervention. So, there's an opportunity at the end of this episode to hear Stephen practice his manifestation of motivational interviewing with me, talking about, again, a real concern for me at the time of recording. Just to notice how he does that and I suppose what it offers is that there'll be people out there who maybe listen to this, who are MI aficionados who will go, "It's really interesting that he makes the key concepts of MI more accessible to a wider population, by the way he translated it." And perhaps other people go, "Well, if the way you're describing it is different from what motivational interviewing is." What you're describing is something other than MI, that's a conversation for another day and it'll be something for you, the audience to decide for yourselves. What's interesting is listening to Stephen help me the way he helps me in the 25 minutes at the end of this episode.

Sebastian Kaplan:

Right. And again, we appreciate your willingness to do this, and we hope again that an example of how these kind of conversations sound are helpful to you all as you're learning and going through your own MI journey. Without further ado, let's go ahead to the episode.

Stephen, welcome to the podcast. We really appreciate you joining us. If you could start, as we always do, just give us a bit of your background and what we often call your early MI story.

Stephen Andrew:

I think the earliest MI story was that somebody offered me a free workshop and I love the word free, so off to Albuquerque, I went to be part of a research study and I was placed



in a coaching group after the training. I thought I knew empathy and I was pretty good at it. Then I got back my first tape that said, "Very client centered, but not MI." It began a journey for me, that was in 2001. And in 2003 in Greece, I became a MI member and now in 2019, certified MI trainer by the board of directors, in terms of motivational interviewing network of trainers. I've had an incredible journey of 18 countries and about 150 days a year of training. Most of my practice now, which is primarily support groups is built around motivational interviewing. That's only the beginning. It started from a CEO or chief energizing officer, I call it for health education and training, which has got 15 staff and all of them dedicated to motivational interviewing.

Glenn Hinds:

Wow. Quite a lot going on there, Stephen, and particularly how early an adapter of motivational view, you were in the world of practice. What struck me was the fact that when you went to Albuquerque that you had this belief, "You know what, I'm rock and rolling here. I'm doing all, all of this stuff." To hear that, "Yes, what you're doing is this thing called client-centered helping, but it's not motivational interviewing." And I guess that will be very interesting for a lot of people listening to understand the difference between client-centered helping and motivational interviewing. If you could, just give us an idea of what was you discovered was that made what you were doing different from motivational interviewing.

Stephen Andrew:

It's really an attitude of do you believe that fundamentally, that people are doing the best that they can and that they have the resources within themselves to set a direction. And what client-centered is you present with people; you really listen to that. You really are empathetic, but MI has this, "I believe in you, and I believe that within you is this place where you have a whisperer of hopes and dreams." And that's very different than just being present when people suffer.

Sebastian Kaplan:

So, there's more of a looking forward through a lens that again, assumes that there's potential in the other person. I suppose when you're doing a client-centered type of therapy, that isn't MI, you might also believe the best in another person, but maybe the term present versus directional, are key differences there. If that's what, if I'm hearing you right?

Stephen Andrew:

Yeah. It may not actually be the word directional, maybe guiding towards. It may be a little softer than the word directional, but there is a belief even in the face of the deepest suffering that there is a resiliency also within the person that you're gently guiding towards.

Glenn Hinds:

And again, this will be very interesting for people. It sounds like there's a very powerful, yet subtle understanding here, which is the guiding towards is that the practitioner already



knows to be true about this other person that already exists, whoever this person is going to be is already present. It's to guide, the role of the practitioner is to guide the individual to an awareness of themselves.

Stephen Andrew:

And or their ability to ask for help, which is also a growth guiding principle, which is that people hold their suffering really as a belief. I have played with this a little bit to come up with what I call a trauma whisperer and that is the suffering. The trauma whisperer has three thoughts and thought number one is that I don't matter. Thought number two is that I am not lovable. And then thought number three is the world is not to be trusted. That is the suffering that comes from oppression, stigmatization and trauma. It sits in the frontal cortex and gets activated, gets activated in within people as their anxiety or fear moves through their body and that trauma whisperer is really what I saw Carl Rogers trying to sit with. And he believed that if you sat with that deeply, that people would move and you gave them positive regard and a deep understanding, they would move. I actually think you can actually guide it a little more than just sit with it.

Glenn Hinds:

That's the main difference that it sounds like you're describing, is that rather than simply as Rogers would suggest is that you sit with an individual in their place and for them to have the opportunity to choose what they do next. What it sounds like you're describing is what MI does is says, "There is a way out of here you know."

Stephen Andrew:

This is where we play with the ideas of complex reflections, but I abandoned those words, I'm using gentle guesses. When you start to gently guess what the person is going through and what they're experiencing through that empathetic understanding, you can move and guide the conversation much more differently than paraphrasing or staying with someone.

Sebastian Kaplan:

And just in trying to set the context of the world that you're in and the work that you do, you mentioned a lot of group work, primarily. What are some of the things that you are helping people... That you are helping people or you're helping to guide people towards?

Stephen Andrew:

Well, thank you. Sebastian, you set me up to another beautiful concept, which is, if you believe that right in the frontal cortex is the trauma whisperer, in another part of the brain is the whisperer of hopes and dreams. Now I have developed a cheat sheet for the hopes and dreams. Now in MI conversations and motivational interviewing conversations, people talk about values. I've gone beyond in values a little bit to what I call the core needs, or the core yearnings and they're made up of four things that people deeply want power and control over the destiny of their lives. That two, they want to love and to be loved. That three, they want to have a purpose and four they want to belong, they want



to belong to family, a tribe, a community, a church, a 12-step meeting, whatever it might be. Some support group that they have a yearning to be part of social capital.

And so, all of my work is to try to help people move towards that deep yearning, which again, I call the whisperer of hopes and dreams. I'm shifting the language from change talk to hopes and dreams, because I feel like it's more palatable to the general public, because I don't think change talk is... I think it's our language that separates us. And so, when you think about the trauma whisperer and you think about the other side, which is the whisperer of hopes and dreams. Now you have the ambivalence. Now you have the internal conflict of the human soul and the ability of the worker to hold that with great empathy and to feel it and smell it and be able to convey it, quiets down the trauma whisperers so that the actual whisperer of power and control or the whisperer of hopes and dreams can come forward.

And that is, if I have it correctly and I could be completely wrong, I'm 71 and I drink way too much coffee, so I can get this completely wrong. But if I have this correct, then what happens is that we're guiding towards this belief that the whisperer of hopes and dreams exists. We're not waiting for the value to pop out. We believe that it exists and so therefore we're much more efficient if you will, because we can hear it in the conversation. When a person says, "I don't want to quit drinking, but I don't want my kid to have this disease." You're hearing love.

Glenn Hinds:

Yeah. It's such an interesting way of how you are translating familiar terms from motivation into what sounds like an effort to make it more accessible to more people. Even that idea of the trauma whisperer and the hopes and dreams whisperer, as a way of understanding, "You know what? That's how ambivalence can manifest. These two essences or two internal responses to life circumstances." And it sounds like part of what you're describing is that as a practitioner you were informed about this, you recognize the whisperer of the trauma. You recognize the whisperer of the hopes and dreams within this individual and first of all, you can tolerate that your righting reflex hasn't been fired trying to calm one and amplify the other. It's going, "Yeah. Yeah. Of course, there's this here and there's this pain." But you're able to recognize both the pain and the hope.

Stephen Andrew:

This leads me to the conversation about discord. I don't think there's anything such as discord between the person we're serving and ourselves. I think the discord is between our head and our heart. I don't think there's any resistance. I think there's people in their trauma whisperer that yearn for a deep understanding, an empathetic understanding. And that the trauma whisperer is a protector. And so, when people are argumentative or harsh or judgmental of us or pushing against us, that it is only them speaking to protecting themselves from the suffering that they received.

Glenn Hinds:

You're inviting... Now my head's going to a couple different places. Some of it aside from my practice of motivational interviewing, part of me is identifying from enough, another



place, that idea that the sound of your trauma is an echo of something that happened that no one listened to and continues to pop up asking the world, "Can you hear me yet? Can you hear me yet?" And it sounds like what you're saying is that the opportunity exists. Whether it is motivational interviewing or any other approach, it's simply recognizing this thing we called resistance or this thing we called discord is the sound of a voice that still needs heard by a carer who understands, who values and respects the needs of this individuals in response to their being.

Stephen Andrew:

When you say that it's so deeply yearned that people get madder and madder over time that when they get pushed. And I'm not saying they shouldn't be mandated to go, but your role as a worker, as a person, is sitting with this person is to understand that pushback, that discord, that resistance is not anything but that whisperer of not being heard. That trauma and oppression and stigmatization definitely protects people. They wall them off, they stonewall, they push, they do whatever they have to do to not allow any more shame.

Sebastian Kaplan:

Yeah. It seems like listeners might use what you're offering here in a few different ways whether someone wants to hold on to the idea that, "Well, discord is a relational experience. There's one person on one end and another person on another end and there's something happening between them. That is there's tension, there's a fracture in a relationship, whether it's a new relationship or an established one." Others might hear what you're offering and say, "Okay, there's a disconnect, not necessarily between two people, but between two very important forces within the practitioner."

What I feel like I'm getting from what you're describing here, regardless of how you would word for word, define discord or resistance is a way of understanding another person's response or pushback or reaction to somebody who is either harshly or gently trying to compel another person to do something that they're not ready or interested in doing and the origins of that pushback and that response, whether it's a passive shutdown response or an angry, lashing out response or anything in between, or in any other direction, there's a protective element to whatever that response is. What you're offering it seems is a way for us to how do we understand this as a practitioner so we can remain helpful.

Stephen Andrew:

Well, thank you for that. First, I think we need to stop training people to deal with resistance because there's no such thing. Every MI training that I observe, there's a lesson around, "Let's deal with the resistant statements." Resistant statements are a hook that the practitioner feels at a moment, and if they can breathe and take a moment, they can get back to the essence of the heart. But if they're in their thoughts, they're stuck and I'll call the thoughts, the pesky ego and the heart is the place where empathetic understanding comes from. That's why I said that discord is between the head and the heart, and that we're not training people. The definition that I have for motivational interviewing is that we change people through the heart then through the mind.



We try to make sure that what happens when somebody says something, we sit up here going, "What am I going to say? What is going to be my reflection? What is going to..." And instead of going, "Let me take a breath right now." And let me just, "What's it like to be this person?" Then convey that with a gentle guess, not just a paraphrase, not just repeating, not reflective listen, "Sounds like you're upset". I'm talking about that gentle sense. The people who are suffering the most are getting less care from us in an empathetic way, because they hook us, because they want power and control over the destiny of their lives. Which makes perfect sense, because it is part of the whisperer of their need for power and control, is part of that whisperer of hopes and dreams.

Glenn Hinds:

Now you've opened a door to a world that I very much I'm interested in, which is when you describe empathy, part of what I'm understanding when I'm working with people and teaching and in my practice, it's recognizing that for me, empathy is an experience. It's not something I do. It's an experience I have. When you're describing the difference between the head and the heart and the use of reflective listening, that when we drop down into our heart, drop down into the body, the emotions that we experience below our neck, what it sounds like you're describing is what's it like when you take that breath and notice what's happening in your heart, what's happening in your body and to consider this feeling that you're having in your body is a form of communication from them about how they are feeling right now.

And that the reflective statement that you offer is, "This is really sore, or this is really frightening for you." And the reason why I'm saying that is because the reason why this gentle guess that you described, this gentle guess is coming from when I breathe and notice my experience, I am noticing fear in me and I'm understand to be your fear, because I have nothing to be afraid of.

Stephen Andrew:

And then we're partners.

Glenn Hinds:

Yes.

Stephen Andrew:

Right. Because we just partner off on the level of empathetic understanding. We have created a way of connecting and it took the practitioner to get out of all of their thought process, and to enter into the spirit of another human being. If I was you, I'd be feeling. If I was you, I'd be thinking. And now I'm going to convey that in a gentle way beyond the words you said, and I'm going to gently move and guide towards the whisperer of hopes and dreams.

Sebastian Kaplan:

Stephen, one thing I'm curious about you shared with us, your age, very generous of you. And obviously you're a very experienced clinician who's gathered a lot of wisdom over the years. I'm wondering how your practice and approach with people who are stuck or



who are angry, who are unhealthy, whatever phrase you want to say. How has your experience working with people in the various places that they come to see you? How has that shifted? Whether it's a shift that's happened with it because of MI or the trainings that you've done or what have you or just for some other purposes, but how would you contrast the things you used to do versus what you do now and what you find to be really helpful?

Stephen Andrew:

I didn't trust empathy and now believe that it is much more of a medicine and a medication for the human soul than I ever, ever believed before and I've watched it. And so, if you talk to me about my support groups, they have no problem centered. Everybody's come to develop empathy and compassion, but the belief is that if you give away empathy to another, you'll develop self-empathic talk. That people need to heal by giving away kindness, gentleness and empathy, so what I've been trying to do is to develop support circles and there are 130 people that come and see me each week and all they work on is the gymnasium of empathy to develop a state of compassion.

My belief is if you do empathy over and over and over, you create a state of compassion, and that state of compassion releases the trauma whisperer from protecting and then people start moving towards their dreams. And so, what's made me much different is that I've gone from believing that if you're kind with people, that would be enough, but I see that empathy is so important skill and it can't be confused. It can't be passed away. It can't be part of OARS. It has to be separated out. It has to rise to the surface; we know that it is essential for the engagement of the human soul.

Glenn Hinds:

By coming to this empathy gymnasium, I love it. It sounds like part of what you're doing is you're first of all, helping people consider the prospect that there's this thing, this entity, this experience called empathy. And that you then are guiding them towards recognizing their experience of it so that they can then do something with it. Which then it sounds like once you recognize the empathy, your manifestation of it and your treatment of other people is the compassion, how you treat other people is the compassion. Alongside of that is the recognizing that, "See that guy that's in your head? That's trauma. That's given you such a hard time." Behind what he's saying is the intention of keeping you safe. If you can be empathetic with the sound of that pain, that he gets heard, he lowers the need to protect you in that way from now on and that opens the door end for the relationship on the other side of the ambivalence. Which is the hopes and the dreams.

Stephen Andrew: Yes.

Glenn Hinds: And that then-

Stephen Andrew:



That motivational interviewing then is the engagement of that process of the trauma whisperer. Then it's guiding towards guessing what the other part is. Now you're holding the ambivalence, which is what I call phase two, which is heightening the ambivalence, the conflict between these two. Then you're... You can actually hear the whisperer of the hopes and dreams, because if you're not looking for a hundred values, you're looking for four things that are going to rise to the surface that are so essential to the human being. Now I can easily hear them, I could hear the whisperer of hopes and dreams. And we need to train people, we need to train practitioners and doctors, people to hear, why would somebody take care of themselves? They have some greater need and it's not within themselves often. It's actually without, it's in the world, it's in the context of social capital.

Sebastian Kaplan:

I'm also wondering when somebody gets it wrong or somebody... Not, I don't know about right or wrong. Probably not the right way to frame it, but when someone approaches another client or patient, or however you want to call the other person receiving help and approaches it in a way that perhaps de-emphasizes the importance of empathy and compassion or doesn't recognize a response that comes from this place of the trauma whisperer, as you said. What's the downside to that? Where do things go wrong and break down?

Stephen Andrew:

Well, I think that leads us to Sebastian, the definition of shame, because if we are not present with people, then they go back, isn't it? Back to the trauma whisperer that says, "I don't matter. Right in this moment, I don't matter." When a practitioner gets it wrong, what activates right from the cell to the brain is that trauma whisperer, that I don't matter. I'm not lovable. The world is not to be trusted.

Now that develops shame and shame has three categories to it. One, that it is, it has no empathy for self or others. Two, it isolates us, because the trauma whisperer is the safety is to be isolated and three is conflict of values, "I'm behaving this way and I'd like to be this." That's what shame does, conflict values, creates isolation and creates a lack of empathy for self and others.

Now, if you are giving people empathy regularly as a medication, they start to feel that energy, they start expecting that of themselves and that helps them lower the trauma whisperer. When you get it wrong, can you be humble enough to give a heartfelt apology. When you see it doesn't land well, which is actually part of empathetic understanding, it's felt sense, conveying it and watching how it lands. It has three components and when it lands poorly, or somebody pushes back quickly. I always tell people, think about two words. When you hear the words, "Yes. But." When you hear those two words, the person you're trying to serve is being pushed too fast. They're being guided too much. They're being directed too much. And so, you pull back, because what they yearn for is to be heard and believed and held with that they have figured out a way to protect themselves based on what's happened to them in their journey.

I want to be clear here. I'm not just focused on trauma. I'm focused on trauma, oppression and stigmatization. I think that any one of them has the same reaction to the cell structure and this gets us into the issue of diversity and cultural humility, and we have



to understand how all of those play out in the treatment room or in the support room or the caring space.

Glenn Hinds:

The expertise that the practitioner is endeavoring to bring to this encounter, is that awareness of the complexity of the human being, of the human relationship and the impact of events on the development of an individual sense of self and their interactions with the word around them. What are the healing properties of a human relationship that the practitioner can then endeavor to create for this individual to be healed from the inside? I've written down here the idea of therapeutic parenting and that positive regard and recognizing that the only reason why this human being is in your company is because something has happened to them that has thrown them off center, and they haven't been able to repair it for themselves and they're either being invited to, or being encouraged or been told, "You need the help of other people."

And one of the challenges is to recognize is that for an awful lot of people who come into our company, it's recognizing that they're first of all, coming into the company of the very thing that hurt them, which is somebody else. And for awful lot of them, it's an adult who for awful lot of people were the perpetrators of these original traumas that are continuing to be voiced up in their lives.

It sounds like what we as practitioners you're inviting us to do is to learn and understand that. That's the piece that I'm not curious about then Stephen is how do you help a practitioner who like yourself, 30 odd years ago, went to a training and was told, "You know what? This is... you know what that's good there and here's some more to learn." How do you help your... When you're working with your practitioners and for the people who are listening to this podcast, what are some of the things that you would offer them that may invite them to expand their awareness, that then will encourage and support them to grow as helping practitioners when they go back out in the helping world?

Stephen Andrew:

Well, I have three learning communities a week with a dozen people and all we do is practice empathetic understanding. As you'll both know, I've done a podcast on the issue of listening. I want people to listen what empathetic understanding sounds like. I think it's the missing ingredient, we don't slow down long enough. We make an assumption that people know how to drop from their head to the heart. That 18 inches is so critical in the training and support of clinicians, because without it, it does harm. It activates the trauma whisperer. We have a choice between activating the trauma whisperer or the whisperer of hopes and dreams. If the better we get, the better we're going to be able to do that.

I do think it's in learning communities, it's sitting with small companies where they don't want people to do case review anymore. They want them to do, "What is the conversation look like?" We need fidelity in the field of respecting the people coming into the field that they're going to be trained and coached and mentored to become clearly capable of empathy and understanding. It's going to change their lives also; it's going to make their lives better. I can tell you that people are less burnt out when they're focused on empathy, when they're focused on empathetic understanding with the dream, not just the empathy, I hope that makes sense. But with catching the dream. With catching the



whisperer of the dream of power and love and purpose and belonging. It's there and it's our job to hear the whisperer and catch it, and then wonder with people, "What do you want to do with that? Where do you go with that?"

But it's such a compliment when you sit with a person you're serving, and they have gone beyond the trauma whisperer to tell you what they hope for. This can't be a greater gift and a compliment in the business that we serve, that somebody's dreaming out loud with you.

Sebastian Kaplan:

In your choice of the word whisperer, I imagine is purposeful too, in that whisperer is obviously something that is maybe barely audible, and it comes from a place in somebody where they're not quite sure if their traumatic experiences for their hopes and dreams that the other person will respect them and hold them and hear them and affirm them. And so, I imagine part of-

Stephen Andrew:

Oh, sorry.

Sebastian Kaplan:

Yeah. Oh, go ahead.

Stephen Andrew:

The shame gets so great Sebastian that people get so isolated, and they spend all of their lives protecting themselves, whether it's alcoholism or drug addiction, those are all protections. Obsessive compulsive behavior is all protections. Psychosis is protection and shame wants people to stay there so that they can be safe and secure that nothing will happen. They drank themselves to death, they put a needle in their arms, they don't really care. As a 19-year-old said to me, "I don't want to die from this, but if I do, I don't matter." That is the whisperer of trauma. "I don't matter. I don't want to. I have some hope. I have some dreams."

Glenn Hinds:

What's rising from me here Stephen, there's a couple things. First of all, that the impact given the fact that we're exploring empathy and the experience of this pain and of this trauma, that if we don't recognize it, then chances are we're going to act out of it or we're going to do the very thing that this client's behavior represents. Which is I'm trying to get away from it or deal with it or cope with it. In some ways that the temptation is that or the consequence will be is that the relationship between the trauma whisperer and the hopes and dreams whisperer will be manifest in the relationship between the practitioner and the client and that the two sounds will be repeated in the room.

Whereas for this to be heard in a different way, that the practitioner isn't going to become the trauma whisperer in the conversation or isn't going to become the trauma or the hopes and dreams whisperer, it's going to be going, "I hear you and I hear you too."



And that they give voice to these whisperers so they're no longer a whisperer. They're actually spoken words, spoken and understood so that the imdividuals themselves-

Stephen Andrew:

But safer they get, the more that spoken word comes alive.

Glenn Hinds:

I think what I'm curious about is, what was it that helped you learn to feel able to set with these feelings, without becoming these feelings?

Stephen Andrew:

That's what I meant by... That's what I meant earlier when I said, you can experience the suffering and you can react to it.

Glenn Hinds:

How did you learn not too?

Stephen Andrew:

Exactly. Well, and that was the issue is that I learned that if I could breathe and relax and be intentional, Glenn, I'm going into my heart. If I was, you I'd be feel, if I was you, I'd be thinking and then I could gently put that out as a guess and watch how it lands. If I'm not doing that, there are three things that I think that in practitioners need to be aware of. One is that they do unsolicited advice through their questions, through their... They have lots of ways of doing unsolicited advice, like saying to this 19-year-old, "Oh, I think you matter." That's unsolicited advice. You're not thinking correctly right now. That's hard stuff.

The second is that we ask a series of questions. I now tell people that if you ask three questions in a row, you've missed the opportunity, you're just trying to be curious in your brain and curiosity, your curiosity means that you're in your pesky ego. You're not in your heart. Three questions in a row. Now I realize there are forms and all of that stuff but when you are doing motivational interviewing, it's not three questions in a row that might be an assessment that might be something else. But I think when you're doing motivational interviewing, you really want to reach for more empathy than questions.

I think you want that 3 to 1 ratio. I think you want, and if you can, you want to get 7 to 1, you want to, because you want them to have the medication, even if they drift away and never change a behavior they had in a moment in time. They had a moment in time where somebody heard them as deeply as possible within the time we had. What a gift.

Sebastian Kaplan:

Well, Stephen, you've certainly given us a lot to think about in terms of these concepts of not just discord and resistance, which are some of the older words that are used in MI or even some of the newer versions of them when we're talking about discord, but also other concepts and things related to your practice and your lessons learned over the years, that I'm sure many, many clients have taught you about the head and the heart and these whisperers that you're referring to in the importance of empathy, certainly.



What we're going to do now is we'll begin to close, we'll start to, we'll close as we often do and then there will be a role play experience that you all can listen to as the ending of the episode itself. But Stephen, one question that we ask all our guests is, if we were to look out into the future a little bit for you and think about something that's on the horizon, professional or personal, what's something that you'd want to share with our audience about?

Stephen Andrew:

Well, there's two things on the horizon in terms of concrete things. One is my continual search to try to allow people to hear what I'm trying to talk about rather than talk about it. The podcast that I've done, which is Conversations in Compassion on all the platforms that you can get a podcast onto. And also, I'm finishing a small book this year, that's called Empathy, Motivation, and Love in Action. Those are the two things that are on the top.

Probably more importantly is that in the United States and specifically the State of Maine, where I am, there's an epidemic from opiate use. I spent my extra time founding an organization called Dignity and bringing Dignity to every conversation. That's a place where I've taken motivational interviewing into the, hopefully into the streets and the community and trying to embody it in a community organizing way, around a particular social problem.

Glenn Hinds:

Yeah. It sounds like you've really worked hard ever since your introduction to motivation interview, to create, I suppose, what Miller himself describes as the being of motivation. It sounds like that the gymnasiums that you talk about are that opportunity to be MI and to be the caring. But you're also saying that you're taking it out into the community and literally under the streets, to people who have perhaps experienced most trauma and isolation in our communities. You know what? It'll be really interesting to get a chance to read that book, Stephen, when it becomes available and certainly would be keen when it becomes available, let us know and we'll share that with the audience as well.

There's a lot in what you've said to us today, and I have no doubt they'll be plenty of people who will be curious about the terminology that you've created, but also the direction in which that terminology is pointing. If people have questions after listening to this episode, first of all, would you be happy for them to contact you? And if you would, how can they go about doing that?

Stephen Andrew:

Well, I have a website that's Health Education and Training Institute in Portland, Maine and it's www.H-E-T-I-M-A-I-N-E.org. And there's a ton of trainers and coding and simulated clients. And the work we're doing just on that note to the federal government in its own beautiful wisdom, decided to call us up and give us money to try to assimulate motivational interviewing into the field of addiction. We've been honored by that, without even asking the grant for them to say, "We would like to help you see if we can get this in the fidelity of the work." Not training people, but the fidelity of the work. We're honored by that too.



Sebastian Kaplan:

There'd be a way to contact you through that website?

Stephen Andrew:

Yes, that would be great.

Sebastian Kaplan:

Okay. Wonderful. Okay. Well, like I said before, we will close the question, answer interview portion now. In a few moments, if you keep listening to the episode, you will hear the recording of our role plays, as Stephen demonstrates some of the ways he puts these ideas into action. We'll say thank you now. We said, thank you before. We'll say thank you again later, Stephen, but thanks so much for offering your wisdom and your ideas with us and with our audience.

Stephen Andrew:

Thank you.

Glenn Hinds:

Fantastic, Stephen. Just a reminder that if anyone wants to contact us, our Twitter is @ChangeTalking, Seb's individual person one is sgkfromnc, sgkfromnc and I'm @GlennHinds. Our Instagram is Talking To Change Podcast. Our Facebook is Talking To Change and for any questions or suggestions or information on training, our email is podcast@GlennHinds.com.

Stephen Andrew:

Thank you. Thank you for having a conversation with me. Is there something you're thinking about that you'd love to change, but just haven't been able to more recently?

Glenn Hinds:

What comes to my mind first of all, Stephen is that I... From time to time, I am asked as an MI practitioner trainer to offer interventions to mandated clients through the social services, through family services, who have been given the option. Generally, the option is, "Look, just let us take your kids off you and keep them or else let's see if we can do something about this. But the thing is, we're really concerned about some of the ways you're doing things and particularly we would like to see you be willing to acknowledge our concerns about why, and that led us to take your children into care in the first place."

That in itself is not a problem. I meet with the families, and I do the work, and everything's great. Where I have this real difficulty and it's not just in this world, but it's shown up now for me is putting my practice down on paper to give to someone else. As I've been processing this recently, I'm asking myself, is it because I feel like I've been tested? Is it school thing where I'm concerned am I going to fail? And from what you're saying from I'm thinking to myself, "Is this part of my trauma whisperer telling me 'You're going to get into wild trouble here, Glenn." And I'm actually considering, I'm not going to



do this anymore. This is too much hard work and it's the internal experience that's the hard work for me.

Stephen Andrew:

You can feel the comfort of sitting with a family. You can feel the comfort of being of service to them, but then when it becomes something, somebody could judge outside of that treatment room, there's something that happens inside you.

Glenn Hinds:

Yeah. That's-

Stephen Andrew:

You get scared.

Glenn Hinds:

That's it.

Stephen Andrew:

You're in your mind going, "This is too much. I love to work with people and I'm struggling with that judgment that's just outside of the door of my office."

Glenn Hinds:

Yeah. Yeah. That's what it is. It's the perception of the concern that there's too much of... There's a risk, there's a genuine risk to what could happen.

Stephen Andrew:

Yeah. You're going to write down the problem and that people are going to judge this family and you don't really want them to judge the family.

Glenn Hinds:

No, you know what? It's not even that, it's that they're going to judge me as a practitioner. They're going to judge me in my report.

Stephen Andrew:

And they're going to judge that you didn't really tend to the work. Something was wrong and it gets down to the four or five sentences that you have to write in the narrative that you are worried about. And you're really, you're like, "I'm going to give up helping these people."

Glenn Hinds:

Yeah. Yeah. I'm going to give up this avenue of helping.

Stephen Andrew:



And it's not because you don't want to help them. It's because you don't want to be judged.

Glenn Hinds:

Yeah. Even more specifically to the pain of being judged.

Stephen Andrew:

Right. Right. And not only you, but everybody being judged for the quality of their work because of your writings.

Glenn Hinds:

You know what I'd love? I'd love to tell you that's what it is, at that point, I'm as calm as to go, "My God, I'm going to let everybody down." It's not. That's not that sophisticated. It's, "I'm going to get into trouble."

Stephen Andrew:

And you know what that's like to get into trouble?

Glenn Hinds:

I don't know what it's like to get into trouble, because I haven't been in trouble in a very, very long time. This is the thing. This is a memory of something.

Stephen Andrew:

Yeah. And you know that.

Glenn Hinds:

Well, I'm learning that and that's why part of me is considering, "You know what? Do I need to open this door and go and look at this so that I can do this work?" You look at it is just stop in as work.

Stephen Andrew:

You can feel that the world is not to be trusted. Somewhere out there, the world is not to be trusted. And on the other hand, you really do want to be of service to these families?

Glenn Hinds:

Yes. Yes.

Stephen Andrew:

And the best decision you made is, maybe there are other ways, maybe I can go train the people who work with these, but I don't need to be writing the documentation.

Glenn Hinds:

Yes. Yeah. If it's going to be like this every time, I can't be bothered.



Stephen Andrew:

You have this whisperer inside you that says, "Maybe if I stayed with it, I could get over it. I can move through it."

Glenn Hinds:

It's interesting that you say that, because before I came up to record today, I was done visiting my mom when I was telling her about it. What she said to me was, "You're waiting to find out what the right... How to give them the right answer and that's what you're struggling with. You're trying to work out what the right answer is for them and once you find out the right answer, it'll come easy to you." And I recognize that very often during my school career, my education, my college career, that's what was difficult was what answer did they want me to give them? And if I could understand what that was, I could give it them. The hardest bit wasn't answer was finding out what's what does this question mean for them? And that's probably the voice that is going, "Do you know what? Do I need this? Do I need to be going through this every time I start something new at 55 years of age, do I need it?"

Stephen Andrew:

And that's where you are. "Do I need it? Do I need this kind of tension?" And then there's another part of you that says, "If I could find what they want, then I could do this."

Glenn Hinds:

Then I can do that. Yeah.

Stephen Andrew:

So, what's your next step? Let it go or find the answer?

Glenn Hinds:

Before talking to you it was let it go, it was let it go... Now, again, having spoken to my mom today, I recognize, "Oh, right enough. That's probably what it is." It is that I'm trying to ascertain what this is outside of my comfort zone in the sense that why I'm a trained social worker, I didn't spend very much time in family and childcare. I've spent most of my time in mental health and addictions so writing court reports wasn't part of my long-term development. And here I am being asked to write court reports and it's like, "Oh."

What I could do is go, "You know what? If I want to do this, I need to continue to develop it." Now what I have done in the last two occasions, I've done it. I have a social work supervisor who is from a childcare background, and I go and say "Help." To him. And he helps me do it and got this report done and it'll be done, it'll be sent, and it'll be professional. But what's interesting for me is this internal experience that this left me feeling really uncomfortable for quite a few days in advance of finalizing this report. I just thought, "I wonder what MI would sound like if I talked about it here today."

Stephen Andrew:



You did something very bold. You asked for help. In an effort to have power and control over this uncomfortable feeling, you went and asked for help, and it worked.

Glenn Hinds:

Yeah. That part of me, he's probably 20 years old, 25 years old, 30 years old. This distressed part of me is 45 years old. The part of me that I remember learning to ask for help. And so, I'm much better at times when I'm having difficulties to go and ask for help. There would've been a time where I wouldn't have had anywhere to go to ask.

Stephen Andrew:

It feels like that's the duality and today you've just told us that you've asked two people for help. Your mom, the social worker supervisor. And you have a plan. You have a way out of this struggle, if you want to take it. You don't have to. That's what you're saying. You don't have to, but you have a plan.

Glenn Hinds:

Yeah. The way out is not to go in.

Stephen Andrew:

Well, that's one plan. There's another plan that says, "Ask for help."

Glenn Hinds:

Yes. Well, the other one is go in and ask for help on the way in, during and on the way out.

Stephen Andrew:

And find the answers?

Glenn Hinds:

Yes

Stephen Andrew:

Like I have on other situations in the past?

Glenn Hinds:

Yeah. Yeah.

Stephen Andrew:

Just as we finish up. I just want to say, I'd love to hear what you finally choose to do.

Glenn Hinds:

Yeah. What's nice is that I don't have to decide today, that's the main thing. It's that I think what's helpful about just what we've talked about already is that the walking away is a



valid and reasonable thing for me to do. And one that I don't have to be annoyed or frustrated with myself about doing, if I was to change my mind, that I have the resources in place, which is, I know some of the people I can ask to help me learn to frame the answers that fit within a court report, for me to feel confident, to just get on with it. Translating what I already do into a new language, which is court reports. Yeah. So, thank you.

Stephen Andrew:

And then be of service to those families.

Glenn Hinds:

Yeah. What's interesting is that, and I recognize that, very often when I'm doing my own teaching, it's recognizing that when I'm teaching people, I'm saying to them, "Look, the difficulties that are arising in our lives. There's different ways of understanding. One of them is that this is your teacher has arrived. What's the opportunity for your growth? And I'm hearing myself, recognize this discomfort is an invitation for me to change direction from the traditional direction." Now the traditional direction has got me here, which is fine and I'm doing rightly, but there's an opportunity for me going another direction, which is going to take effort. But has the opportunity to expand my ability to help more people.

Stephen Andrew:

Yeah. Thank you.

Glenn Hinds:

Thank you.

Sebastian Kaplan:

All right, guys. Great. Thank you both. Just to check in, as we often do with this, what the experience was like for each of you. Glenn, how about you first?

Glenn Hinds:

Yeah. It's an interesting one, because when we began to consider the role play, and again, Stephen says, "Look, let's do real play." And as we did when I previously did a role play with Robin, it was the thing that was on currently present for me, so I just went with that. And so, this is actually real. I am writing a report for a court, and it has... I have been uncomfortable in the background. It has been taking up an awful lot of space in my emotional world, and I am genuinely so looking forward to finishing this report this evening and I can already feel the weightlifting off my shoulders with the fact that this report will be done in a way.

What was interesting about the conversation with Stephen was just how much space he created for me and just the way you reframed a couple of things and just you talked about the courage and my desire to be helpful. It just meant that I was given the space to step back and to think about this, and then notice what was happening as a consequence of not having to decide, just verbalizing. This is what it is. This is why it's



happening and for it to feel relatively safe for me to have that. There were a few occasions where it felt like I needed to correct your interpretations or your reflections and that was fine. As we got to the end, it really was, it started to crystallize for me, these are choices that I can leave here with, that whatever direction I decide to go in next, will be okay for me to do but there is a choice.

Sebastian Kaplan:

Yeah. Well, I want to hear what you have to say, Stephen, just to echo those moments where the correction occurred. Stephen offered a reflection or a gentle guess, and it wasn't what your experience was, and you offered a correction to it. We talk about that a lot when we're training people to do this work. Those are really important moments because Stephen you could have dug your heels in and held your ground said, "No, actually, Glenn, I think that's what it is." And then that would've been an invitation for discord certainly, but you heard Glenn's correction there and incorporated it into your understanding of what he was going through. But Stephen, how about you? How was the experience on your end?

Stephen Andrew:

There's a couple of things that I point out and that also where people I think could make big mistakes. You said one of them, which is that you get attached to an idea and I have a phrase that I use a lot, which is, "If you hold the right position, it'll destroy the working alliance." I really believe in that phrase so when he's saying no, my job is to walk alongside him and not buy into that. The other thing I wanted to say is that there's a pitfall and that is that people would get curious about the trauma whisperer. He has a trauma whisperer, and I did not get curious about it. I moved beyond it. Which is that he said, "I've had this for a long time, and this is my way out and this is what..." You know what?

There's a lot there and even his mother knew that about him. He was telling us about the trauma whisperer that the world is not to be trusted unless I'm already skillful and know the answer that the world can be judgemental, but I didn't stop there. I went to the other part which is that you want to be helpful to people, you want to have power and control over your life, you could see me grab and hold of those though, what I call the whisperer of hopes and dreams. I'm probably known for the phrase in the motivational interviewing community, but we meet people where they dream. Don't meet people where they're at. Now at is the beginning phase, but that's not where we're going to stop. We meet people where they dream.

Glenn Hinds:

Again-

Stephen Andrew:

That's a demonstration of it.

Glenn Hinds:

What was interesting is you were describing that and certainly I experienced that when you were helping me, is that for many people, they will recognize the description of the



echoing of the hopes and dreams whisperer as the sound of affirmations that you heard, you recognized my pain. And that's where the righting reflex generally kicks in, where you're going to try and help me not feel like that. Whereas what you did was you simply took on the side, go, "You know what?" And you care and you want the best for people, and you're committed and you're courageous. The two things were true at exactly the same time without one of... But where your focus went to be the efforts that exist within me to live with and deal with and tolerate and work with this trauma whisperer.

Stephen Andrew:

Well, what happened is that you are walking away with the duality. We're not walking away with a plan and what I think is so important in motivational interviewing, is that we give people the respect to hold the conflict and not try to resolve it. We spend a lot of time trying to get to the plan or get a plan out of people when you are walking away with two plans. They're very concrete. They're very concrete, and if I was writing a treatment plan, I would have to write two plans.

Glenn Hinds:

There's still two options for me. I'm still describing ambivalence about which direction is going to be the right solution for me.

Stephen Andrew:

And that ambivalence is normal. We explore it with, maybe it'll get resolved, but you'll resolve it. I don't need to have the resolution. It's not my ego.

Sebastian Kaplan:

Right. And maybe that is maybe an unspoken lesson in this is, within this concept of discord, a way that a well-intentioned practitioner might induce discord is when they are in presence of ambivalence, as Glenn was, and still is about this decision of his, is that you did not take a position. You did not say, and not that it's always a bad thing to be curious, "What are the pros and cons of this and what are the pros and cons of that." Or some decisional balance method or whatever it might be, but to insert prematurely insert direction or your preference is something that's not what Glenn was needing in this conversation that you all had together. It was to concretize for him what are the two doors or what is the door? What are the two options? Go in or to not.

I was thinking too, about what you said, as far as the pitfall, and there's a pitfall that people get curious about the trauma whisperer and it struck me. One of the things that you said, Stephen or a reflection or a gentle guess that you used was, you said you know what that's like when Glenn was talking about the judgment, the pain of it, getting in trouble, and you said, you know what that's like?

That was a moment. It was an interesting moment, because that was one where it could have led... In a way it was a bit of an invitation. Glenn could say, "Yeah, well let me tell you. Let me tell you about, here's my pain. Let me show it to you." And he didn't and that was okay. He stayed with where he was at and you also didn't keep at that with, "Tell me what was the most painful thing for you." Or something like that. Which speaks to this



model of yours, of staying more focused on the hopes and dreams side of it. Which is where you held.

Question Stephen. I was just wondering about discord in this conversation and this was a conversation where at least as an outsider, looking into the experience between the two of you, there did not appear to be pushing back, hostility, passivity, whatever some of these behavioral signs, anyway. And just wondering, because you're offering some different notions with this concept of discord. I wonder if you could speak to discord as it relates to this conversation that you and Glenn had.

Stephen Andrew:

Well, in this case, I did not create more discord, I could have, but I did not. The discord was really only these moments where, you both pointed it out, where he said no and he started to change it and I didn't get attached to an idea, because I was in my heart and not my heads. My pesky ego would then be to, "Well, I want to drive it towards the trauma whisperer, or I want to drive it towards a solution." Do you know what I mean? I want to drive it. That's the pesky ego. It comes up with a series of questions or unsolicited advice and you didn't feel a lot of questions from this. In fact, I think there were two. One in the beginning and one in the middle. Most of it was gentle guessing, if I was you, I'd be thinking.

I wanted to state there's no such thing as discord or resistance from a client or a patient or person you serve. If you can hold that space that says, "All they need is for me to be empathetic and go for an empathetic understanding that will find some accuracy in me understanding what it's like to be Glenn, what it's like to be this person."

I could create the discord, or the discord could be created by a larger system, but it's not mine. It's mine to to hear it, feel it and understand it, but not get attached to "Ah, that's resistance. Ah, that's discord." It's not there. People don't do that to us and the more we train people to think about that, the more I think they think about, "Oh, this person's being resistant to treatment. This person's having discord about their power and control issues." They ought to, is my mind. They ought to, because they want power and control over the destiny of their lives.

I do want to say one subtle thing that we didn't pick up. Glenn moved so beautifully towards the end. When he said, "I teach the audience to see the opportunity as a teacher or history of my suffering." And he stepped away from himself and said, "This is my general philosophy." And it was in the last 30 seconds of our conversation. Which he took it from the pain of writing the report to, "This is an opportunity for me."

Glenn Hinds:

And there's something very moving in recognizing that and you reflect now back, even though that there is that consistency with the where I'm at and they being helped to rediscover that. That was true. The start of the conversation and it was in there somewhere, but it was getting... It was clouded by the fact that I was... That this part of me was going, "Oh my God, I don't like this." And during that-

Stephen Andrew:



You know what I love? What I love Glenn is that you came up with it. It was your whisperer. We didn't talk about what do you teach your audience. I didn't ask you the question. It just came yes towards the end, and it was remarkable. This is an opportunity for me to set boundaries and let it go or an opportunity to learn something in which I could be of service of more people.

Glenn Hinds:

From that perspective, then the invitation for anybody listening to this is to go, "What's the equivalent of that for the people you work with?" That whatever it is that you're describing, that is in me, my philosophy. That when I was given the opportunity to raise it, it arose, and it offered me guidance and it offered me solace and choice. That's what I'm left with as I leave and what's the equivalent then of what it is when you're working with your own clients, your service users. Can you create a space where their generalized philosophy can arise for them to hear it themselves? And can you see it or hear it in advance of them, noticing it to you?

Stephen Andrew:

Hearing the whisperer. Well, this has been wonderful.

Glenn Hinds:

It has.

Stephen Andrew:

Sweet.

Sebastian Kaplan:

Yeah. Thank you so much, Stephen. Glenn, thank you again for bearing your soul for the world to peer into again. So yeah. Thank you both. And yeah, again, Stephen, we appreciate you joining us.

Glenn Hinds:

Thanks Stephen.

Stephen Andrew:

Thank you both.

Glenn Hinds:

Take care everybody.

