

# Motivational INTERVIEWING

## Supporting people through change

**Motivational Interviewing (MI)** uses a therapeutic, person-centred approach to evoke a person's *own* motivation to make change happen.

People who are not provided the opportunity to explore their own concerns and fears are unlikely to sustain the changes they make.

MI is designed for workers in mental health, AOD, employment and other community sector services who support people to make life changes.

Participants are guided through applying MI strategies in their work using a mixture of group discussion, audio-visual presentations, role-plays and reflection.

### Key Learnings

- Explore the background and principles underlying motivational interviewing
- Understand motivation and ambivalence and identify stages of change
- Apply the principles and practice of motivational interviewing within the context of mental health and substance use
- Develop core skills used in motivational interviewing for eliciting *change-talk* and strategies for "*rolling with resistance and reluctance*"

## Our trainers make the difference



Alison Bell

Alison has a background in Nursing and Psychology, and has worked in the alcohol and other drugs (AOD) field since 1987. Alison has been involved in the development of motivational interviewing since 1989, when she became involved in researching the clinical application of the model in collaboration with Dr Stephen Rollnick at the National Drug and Alcohol Research Centre.

Alison has published several papers on the application of motivational interviewing in broader health and welfare settings, and works as a consultant to a number of organisations including the Mental Health Coordinating Council, Department of Education and Communities, Department of Corrective Services, NSW Institute of Psychiatry, Juvenile Justice, Community Services, Centre for Community Welfare Training and the College of Nursing.

"Alison was so familiar with her topic that you're learning skills without being aware of it – almost like osmosis - You are allowed to absorb, your resistance to new ideas is met with acceptance thus facilitating learning." **Course participant**

*"Excellent use of resources, thoughtfully delivered with practical examples and role playing opportunities."*

Course participant

**Inhouse training is available on request.  
Talk to us about your training needs today.**

**\$ 409.00 MHCC members**

**\$ 498.00 Non-members**

**Course details may be subject to change.**

**Visit [www.mhcc.org.au](http://www.mhcc.org.au) for date and location information.**

Please write clearly in CAPITAL LETTERS.  
Please forward your completed registration form to [training@mhcc.org.au](mailto:training@mhcc.org.au) or fax to 02 9810 8145

## WORKSHOP DETAILS

**Please register me for the following course:**

Workshop / Course Title	<input type="text"/>
Location	<input type="text"/>
Workshop Date(s)	<input type="text"/>

## CONTACT DETAILS

Full Name	<input type="text"/>		
	M <input type="checkbox"/>	F <input type="checkbox"/>	Other <input type="checkbox"/>
Job Title/ Position	<input type="text"/>		
Organisation / Employer	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	State	Postcode	
Email	<input type="text"/>		
Tel (M)	<input type="text"/>	Tel (W)	<input type="text"/>

**Do you require any support or assistance during training, eg; disabled access, audio loop. If so, please specify.**

## MHCC TERMS & CONDITIONS

### Refunds

Please choose workshops carefully. Once registrations are processed refunds can only be made when:

- A workshop is cancelled, or the date is changed by MHCC
- A written request is received 14 days prior to the workshop
- A medical certificate is provided in the event of illness or misadventure

All refunds will incur a \$35 administration fee except where a workshop has been cancelled by MHCC.

Full or partial non-attendance of registered participants will incur the full registration fee.

### Transfer / Substitution

You can transfer to another workshop/date (of the same value) on one occasion, pending availability, by notifying MHCC in writing seven days prior to workshop commencing.

**Email:** [training@mhcc.org.au](mailto:training@mhcc.org.au) **Fax:** 02 9810-8145

Participant substitutions must be advised in writing five days prior to the workshop.

### Workshop Cancellations

We make every attempt to ensure that workshops run. However, MHCC reserves the right to alter any arrangements, including cancellations if required. We will notify you of any cancellations and changes as soon as possible, usually this will be seven days prior to the workshop date.

MHCC is not responsible for travel-related costs that may be incurred as a result of cancellations.

In the event MHCC cancels a workshop, you can choose whether to transfer, on one occasion, to another workshop of the same value (pending availability) or receive a refund.

### CONSENT

By completing and returning this form you are consenting to the collection of this information for the provision of training as well as accepting the MHCC terms and conditions outlined above. Please refer to the MHCC confidentiality and privacy policy at [www.mhcc.org.au](http://www.mhcc.org.au)

Signature	Date	/	/
<input type="text"/>			

### How did you hear about this MHCC training?

<input type="checkbox"/> MHCC Website	<input type="checkbox"/> Email	<input type="checkbox"/> Attended other training
<input type="checkbox"/> MHCC Event	<input type="checkbox"/> Word of mouth	<input type="checkbox"/> I would like to receive more information about MHCC

## PAYMENT INFORMATION

ABN: 59 279 168 647

### Payment Type

Visa <input type="checkbox"/> MC <input type="checkbox"/> Cheque <input type="checkbox"/> Invoice (Organisations only) <input type="checkbox"/>	Name of Org <input type="text"/> Org Address <input type="text"/> State Postcode <input type="text"/>
C/C number <input type="text"/> Expiry mm/yy <input type="text"/> <input type="text"/>	
Cardholder Name <input type="text"/>	Org email for Invoice <input type="text"/>
Signature <input type="text"/> Date / /	

Name of Org <input type="text"/> Org Address <input type="text"/> State Postcode <input type="text"/>
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**Org is currently an MHCC member?** Y  N

**Total Amount** \$

**PROMO CODE (if applicable)**

**For more information visit**  
[www.mhcc.org.au/learning-and-development](http://www.mhcc.org.au/learning-and-development)  
or phone 02 9555 8388 ext 106