

Motivational Interviewing as a Framework for Consultation with School Administrators

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The purpose of this article is to describe the suitability of Motivational Interviewing (MI) as a framework for mental health consultation with administration at K-12 schools. To that end, the authors present the current literature pertaining to the application of MI in schools, discuss challenges inherent in school-based consultations that can be addressed using MI, and illustrate the underlying philosophy and primary processes of MI through case dialogue with one school administration. Suggestions for enhancing competence in MI and ensuring quality consultation are discussed.

Keywords: Motivational Interviewing, consultation, schools

As consultants, counseling practitioners are well suited to provide information or intervention for specific students or families (Palmo, 2011), give support during a crisis (Johnson, 2011; Palmo, 2011), work with administrators to roll out prevention or remediation efforts (Moe & Perera-Diltz, 2009), or educate school personnel on specific topics such as attention-deficit/hyperactivity disorder (ADHD; Hall & Gushee, 2000). However, barriers to effective consultation that include but are not limited to time and accessibility (Sanders, 2001; Walsh, 2013), complexity of the consultation relationship and expectations (Gravois, 2012), and territoriality (Sanders, 2001; Weist et al., 2012) may present significant challenges to success. Additionally, professionals have asserted that a consultant's effectiveness may be tied specifically to their ability to adopt valid, theoretically driven models of consultation (Brigman, Mullis, Webb, & White, 2005). To that end, it is imperative that mental health practitioners identify, explore, and become

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competent in utilizing viable models of school-based consultation to overcome the inherent challenges of consulting with school administrators. Consultants have reported success when integrating Motivational Interviewing (MI) into their navigation of the unique culture of schools, though current literature on the subject is mostly limited to teacher training (e.g., Strait, McQuillin, Terry, & Smith, 2015), and direct work with students (e.g., D'Amico et al., 2012). The purpose of this article is to thoroughly discuss how MI can be an effective approach to community-based consultation with school administration to facilitate organizational or system level change in schools and to illustrate the primary processes of MI through case dialogue.

MI in Schools

Considerable attention has been given to integrating MI into practice within schools, as it has been historically applied to interventions with middle school students (D'Amico et al., 2012); secondary school students (Atkinson & Woods, 2003); peer support programming (Channon, Marsh, Jenkins, & Robling, 2013); school truancy (Enea & Dafinoiu, 2009); adolescent physical activity (Robbins, Pfeiffer, Maier, LaDrig, & Berg-Smith, 2012); working with teachers and parents (Strait et al., 2014); teacher classroom management (Reinke, Lewis-Palmer, & Merrell, 2008); and academic achievement, behavior, and school-based motivation (Snape & Atkinson, 2016). Further, Frey and colleagues (2011) reviewed a number of interventions that infuse components of MI to address numerous challenges related specifically to mental health in schools, including the enhancement of parent motivation and participation in a child's treatment plan (Nock & Ferriter, 2005; Nock & Kazdin, 2005; Nock & Photos, 2006), parent behavior that promotes youth adjustment and competence (Dishion & Stormshak, 2007), teacher classroom management (Reinke, Lewis-Palmer, & Merrell, 2008), and developed an additional program to encourage interpersonal and academic success in at-risk youth with behavior disorders. In a review of existing studies on using MI with children and young people, Snape and Atkinson (2016) found that seven out of eight studies reported positive outcomes for a range of student-focused MI interventions, addressing concerns such as academic issues, problematic behavior, and career development for students with disabilities. The potential for MI to have significant implications in schools is evident; however, it is clear that the existing literature focuses on the use of MI to promote behavior change in individual teachers, students, and parents. Little is known about how MI might be effective when working with school administrators to make systemic level changes in schools.

Blom-Hoffman and Rose (2007) were the first to consider the application of MI as a proactive, prevention-focused solution to reactive, remedial approaches to addressing student mental health concerns in schools. Ultimately, they believed that MI could address school personnel's motivation to engage in the process of learning and implementing skills that would assist in addressing the mental health needs of students. Lee, Frey, Herman, and Reink (2014) provide a compelling argument in line with the

assertions of Blom-Hoffman and Rose, suggesting that MI may be a useful framework to guide academic coaches work with teachers, though the application of MI with school personnel has yet to be clearly illustrated despite the many barriers to successful consultation in schools.

Case Illustration: Applying MI in Community-Based Consultation in Schools

To date, researchers have only minimally discussed the potential for MI as a guiding framework for consultation with school administration. In an effort to address this gap, we have developed a case illustration to demonstrate the application of MI for consultation with school administration. This case illustration was developed based on the authors' experiences working directly with school personnel of one school district. The authors acknowledge that a case illustration that included several schools would be preferable; however, this limitation does not significantly impact our goal of demonstrating the application of MI with school administrators. For this consultation, the mental health practitioner was contracted to work with school administrators to develop ideas and a plan for addressing the mental health needs of the students. The four processes of MI including Engaging, Focusing, Evoking, and Planning, are described. Examples of dialogue with faculty and staff from the case school will be utilized to demonstrate MI processes below.

The Four Processes of MI

Engaging. *Engaging* is a process foundational to consultative practice with MI. The engaging consultant persistently monitors dialogue with stakeholders to ensure an affirmative response to the question, "Shall we travel together?" (Miller & Rollnick, 2013, p. 271). Engaging is a process born of the MI spirit that ensures that the working relationship is founded in respect, understanding, and trust. True engagement requires that consultees feel invited to guide and influence the direction of progress. In the case of consultation with schools, the consultant must give up control in favor of listening to the values and needs of teachers, administrators, students, and other personnel. To that end, the MI consultant prioritizes reflective listening by limiting closed-ended questions and prescriptive statements and utilizing the core interviewing skills of open-ended questions, affirmations, reflections, and summaries (OARS; Miller & Rollnick, 2013). The use of OARS conveys understanding and encourages the consultee to more deeply explore a given subject. Though it is beyond the scope of this paper to fully describe each of these skills, we illustrate how conducive OARS can be to establishing and maintaining a strong relationship throughout consultation in the following case dialogue.

A key step to engagement is the exploration of a consultee's value system and how it parallels with the goals of the system. Unpacking a school system's values may help the consultant to gain a clearer understanding of what motivates an administration and

supportive parties to make changes. Additionally, acknowledgement of the values of the administration may provide the consultant opportunities to develop and “instill discrepancy” (Miller & Rollnick, 2013, p. 248) if and when their goals and values do not align. A meeting with the leadership team to explore these values can help build relationship and identify important considerations as the group moves toward change.

Consultant: I’m curious if you would be willing to talk to me some about what values are most important to this school and its administration.

Principal: Certainly! We value good character, excellence in learning, and community engagement. In the area of good character, we encourage personal accountability, self-monitoring behavior, hard work, and integrity. In the area of excellence in learning, we expect all students, faculty, and staff to do their very best at all times. At our school, community engagement means being an active member of the school, participating in school events, and keeping a friendly atmosphere. These three pillars are part of our school mission statement, and we use those phrases daily on campus.

Consultant: You value people in your school and those affiliated...you really want the best for anyone involved with our school.

Principal: We do, and that’s a big why reason why you’re here with us.

Consultant: So, tell me about these three pillars – in what ways is your school excelling and embodying these values?

Lead Teacher: We spend most of our time emphasizing excellence in learning.

Consultant: As you’ve said, there’s some systemic pressure to meet learning objectives, so it makes sense that your time is spent there.

Lead Teacher: Right. Our teachers have access to the materials we use for a character education program, but I’m not sure everyone uses them. It seems like many of them just do their own thing.

Consultant: Though you value character education, you’re not always sure what is and isn’t being instilled in your students.

Lead Teacher: Yes... and to be honest, I’m not sure how we’re engaging with the community.

Principal: We do an annual food drive around the winter holidays and do our best to make sure parents are involved in their kids' education. I admit that it's a challenge.

Assistant Principal: Education takes so much of our time... it is tough to get other topics covered.

Consultant: That's understandable... you all have a lot on your plate and limited resources to get it done.

All: [nodding]

Consultant: What motivations do you have for implementing a program that helps to address these values?

Principal: The staff here really loves all our students. I'm not just saying that. I see the teachers and staff going above and beyond to help kids – like teachers providing classroom snacks with their own money, support staff serving as unofficial mentors for students. One of our teachers organized a winter coat drive when she realized so many families don't have good coats. We're just not very organized in our approach.

Consultant: It's really honorable how much you all give of yourselves to make a difference for these kids.

Lead Teacher: Why else would I become a teacher? [chuckling]

Assistant Principal: We see so many bright young students who are struggling with things outside of their control – poverty, community violence, mental health issues. It's just hard to know what to do when we have limited influence.

Consultant: Poverty, violence, mental health issues... these issues sound like barriers to students getting what they need from the existing programming you already have in place.

Lead Teacher: Exactly. We know that our students won't do as well as they can on benchmark testing if some of these other needs are not met. We just aren't sure where the time and money will come from. It feels like fighting a losing battle.

Consultant: It's a source of constant frustration to not be able to provide in a way that you'd like.

Assistant Principal: So where do we go from here?

Consultant: Unfortunately, I don't know that I can tell you that. I see each of you as an expert of SWCS. Let's work together to figure out the next steps.

Assistant Principal: That makes sense.

Consultant: What considerations do we need to keep in mind so that the path we take to implementation is consistent with the values of your school?

Principal: I can't ask much more of my teachers. All our teachers are pushed to the max. They work endless hours with little reward. I can't consider implementing a program that adds a lot of work to their already full plates.

Consultant: Whatever the result of our time together, we need to make sure that your teachers are on board and not overtaxed.

Lead Teacher: We also can't lose sight of what the state expects of us. We must consider how any programs or changes will affect instruction and achievement. I hate to keep bringing up test scores, but you know we hear so much about that!

Consultant: Right... and in some ways, your values align with that of the state. You do value learning; you just see that there are other factors affecting your students that have gone unaddressed.

Assistant Principle: That's what I'm taking away here – that maybe we can find a way to help our kids feel more prepared to learn by helping address their basic health and safety needs. I would feel really good about that...

The emphasis on reflective listening helps the consultation fully comprehend the leadership team's values and experience, while simultaneously, the consultees begin to get clear about how their values connect to the programming they may choose to implement. Meanwhile, the leadership team experiences the consultant as a partner in the process rather than an educator or director. The consultant is affirming and validating when acknowledging each consultee's values and concerns so to foster further introspection and a sense of connection between consultant and consultee.

Focusing. Whereas a consultant's engaging via goal and value alignment inspires the consultee to determine what is important on a broad level, *focusing* helps to find what change is *most* important (Miller & Rollnick, 2013). Though conceptually straightforward, focusing is a process that can be both cyclical and challenging. Collaborations that fail to clearly define the goals, responsibilities, communication patterns, and expectations of each player may contribute to territorialism and confusion (Sanders, 2001; Weist

et al., 2012). Determining and discussing one's own conception of the problem with engaging can result in discord and disengagement. A guiding communication style in which consultant and consultee experience equal footing is key to a mutual determination of specific direction. The consultant neither directs nor follows the consultee toward the focus; rather, the consultant uses OARS to facilitate a collaborative exploration of one's needs in an effort to promote the consultee's autonomy regarding change. The expertise that consultant, teachers, administrators, and other school personnel each bring forward are harmoniously woven together to determine the focus of consultation. The following interventions represent good practice when applying focusing to consultation.

Agenda mapping is best described as a "metaconversation" (Miller & Rollnick, 2013, p. 106); that is, a discussion about the present discussion. Given the variety of challenges stated by the school administration, a consultant may use agenda mapping as a way to narrow the focus for change to one specific, perhaps even central component that would result in the most dramatic improvement for the educational system. Agenda mapping functions most ideally when the use of a visual aids accompanies the conversation. This way, the conversation moves from general to specific to determine the target for change. The use of an agenda map with members of the leadership team may give way to a focus related to their desire to address behavioral and academic outcomes. Focusing with an agenda map marries brainstorming with a guiding conversation style to develop a specific focus for change. Here, the agenda map provides the team with a way to organize the school's needs and consider how implementing mental health programming may help them address several of the school's needs.

Collaboration and advice giving are not mutually exclusive. In fact, it is quite normal for clients to feel unsure about what changes are most important to their progress. In these situations, a consultant's expertise-driven opinion may be appropriate to share. The MI-consistent manner of exchanging information is called "Elicit-Provide-Elicit" (EPE; Miller & Rollnick, 2013, p. 139). Consultants must be intentional in asking permission to exchange information and only after an exhaustive conversation of the client's prior knowledge on a particular subject. The consultant then exchanges information that may fill in gaps in the client's knowledge before finally eliciting once more, saying some variation of, "How does this information fit for you?" In the example below, the consultant uses EPE to provide information when they perceived that the team had reached a sticking point in their progress toward deciding on a specific focus.

Consultant: Now that we've each slept on the idea of targeting student mental health, what are your thoughts? [*Eliciting*]

Assistant Principal: We were talking before we started today and I think we're all balking a bit at the idea of investing what little we have into such a huge issue.

School Counselor: It's always been my mission to address mental health at this school once I was able to get a handle on testing. This could be the opportunity I've been hoping for, and yet, I too feel like I might not be able to do enough on my own.

Consultant: You're both saying you know that this needs to be addressed, but you're not entirely confident that you will be able to make a difference.

Principal: We could see some immediate results if we focused on something more concrete and specific. Investing in our tutoring and SAT program could help the kids that want to be here shine once they've graduated. Even some minor building renovations could change the atmosphere here a bit. I hear the undercurrent of frustration about our space from our teachers and PTA on a pretty regular basis.

Consultant: I think we might be stuck at a crossroads. We're torn between using resources on a sure thing with a small impact or take a riskier route that could make a big difference.

Principal: Yes... and I don't even know where I would begin with this mental health thing. I don't know the first thing about psychology. I know our families are poor and a lot of our kids have challenges... but we can't just hand out money.

Consultant: I don't know if I have an answer for how this would look, but I do have some thoughts on the matter that may be helpful. Would it be ok if I shared a bit of what I'm thinking? [*Asking permission*]

Leadership Team: [*nodding*]

Consultant: I have worked with other schools in the past that have struggled to make a final decision when at a similar junction. Something that often goes without consideration is the idea of engaging in the greater community to help you with your efforts. I've found that a lot of schools feel as though they are stuck working in isolation. I'm aware that there are nearby institutions of higher education, community agencies, family counseling centers, and hospitals that may be interested in partnership. The schools that I have worked with that have asked for help are often able to find it. I've also found that teachers and administrators are more likely to follow through with a new program if they believe in the cause. We may want to consider developing a needs assessment that can be quickly collected and analyzed. You might ask yourselves, "If we decided to address mental health, how would our teachers, students, and families react?" Similarly, "If we chose to update the gymnasium, initiate a tutoring program, or other-

wise, how would they respond?” While the choice is ultimately yours, you have been clear that a mental health approach could have a positive effect across all three pillars represented in your mission statement. [Providing] What do you think of what I have shared? [Eliciting]

Assistant Principal: I had never considered the idea of engaging with the community. That would quell my concerns about resources.

School Counselor: I agree. I also want to say that I talk with the teachers here quite a bit and I think they’d appreciate some input. Maybe they won’t make the ultimate decision, but they could share more about what they think might help. I know that might get a little messy, but it would be nice to see what their concerns are before we make the decision.

Consultant: If we got more buy-in from the teachers, it might really help in your goal of shifting the culture here.

Principal: Although I’m left feeling like I’m taking a step into the dark, I want what is best, not what is easiest. Let’s consider a brief assessment and make a final decision.

Consultants must provide information with a great deal of intentionality. In the above dialogue, the consultant determined that it was appropriate to share their ideas and expertise because the team began second guessing itself. In this case, the team’s concerns seemed to be specific to their confidence in making an impact; however, they have yet to develop a plan for implementation. The consultant in this example filled some of the gaps that caused hesitation for the team members. By providing a menu of options and sharing past experiences with other consultees, the consultant keeps momentum moving forward. If after providing information, the group was still considering moving away from a mental health focus, the consultant would be in support of further exploration through focusing.

Evoking. Once a specific focus has been determined, the consultant begins to ask themselves, “What motivates this client to make a change?” The consultant’s overarching goal while *evoking* is to heighten and resolve a client’s ambivalence in the direction of change (Miller & Rollnick, 2013). At this time, the consultant is a reflective listener who attends to preparatory and mobilizing *change talk*, the statements that indicate an argument for change from the status quo. Identifying and reflecting this language is of critical importance to facilitating movement out of ambivalence and toward actual change. True to the nature of ambivalence, clients also express a desire to maintain the status quo via *sustain talk*. Though once conceptualized as resistance to change, the MI consultant must acknowledge that sustain talk is an inevitability. Ultimately, MI consultation requires the skillful practice of drawing out and strengthening change talk

while also acknowledging (but not searching for!) one's desire to maintain the status quo.

In the following case dialogue, the principal is clear about his hesitation to move forward with implementation. The consultant will validate this hesitation, as it is a normal and appropriate experience when making such a change. By using some reflective listening techniques specific to an MI approach, the consultant will guide the principal toward change.

Principal: I know we've been here before, but I'm having some doubts about our focus on mental health. Our teachers want so many different things and I don't know how to address them all. Maybe we shouldn't go through with this.

Consultant: That's certainly your choice. It's your decision to make. [*Emphasizing autonomy*]

Principal: I know it's a serious issue, but I'm hung up on the fact that there are simply too many students to make a big difference. I'm weary of throwing every last resource we have at something we can't change.

Consultant: On one hand, you're hesitant to implement a mental health program because the task is so large, and on the other hand, you believe it could address these behavioral and academic concerns you have for your students. [*Double-sided reflection*]

Principal: I do believe that. Our earlier discussions with the leadership team made it seem quite clear that our students' families are struggling to help meet their kids' needs. I hate that we might be contributing to their struggle given our role in their lives.

Consultant: It is noble of you to acknowledge your responsibility in this. You really want to make a difference [*Affirmation*].

Principal: I do, but we're hamstrung by finances. [*Sustain talk*]

Consultant: There's no possible way you can help them given the school's financial situation. [*Amplified reflection*]

Principal: Well, I wouldn't say that. I think we can contribute to their success, I just don't know how that would look like and how effective it would be.

Consultant: Right. You think you might be able to help but you're not sure to what degree.

Principal: I think that's a fair way of putting it.

It is typical for consultees to experience significant ambivalence. Here the consultant respectfully acknowledges the principal's reflex to maintain the status quo while guiding him back toward his own arguments for change. MI techniques like double-sided reflection, emphasizing autonomy, and amplified reflection (see dialogue) are useful ways to continue to guide consultees toward change while maintaining the spirit of MI. These strategic responses to sustain talk are critical to MI in that they shift the focus away from the status quo and back toward the consultees' internal motivations for change. In addition to the skills demonstrated above, a consultant could consider evoking change talk by querying extremes (e.g., "What is the best case scenario if a mental health program was implemented at your school?"), an importance ruler (e.g., "On a scale where 0 means "not at all important" and 10 means "extremely important," how important is it that you address the mental health-related challenges of your students and their families?") looking back (e.g., "As you look back on the last five years, what evidence do you have that tells you that implementing a mental health initiative would be positive for your school?"), or looking forward.

Planning. Several key markers in conversations with consultees denote that they are ready to develop a change plan. At this point, the consultee believes that change is important and has reported hope and confidence in their ability to change. The ratio of change to sustain talk grows large and in many cases, consultees begin taking steps toward change without formally developing a plan in consultation with the facilitator. *Planning* is the act of identifying the "How" and "When" of change (Miller & Rollnick, 2013, p. 271).

The development of a change plan is dependent on the consultee's use of mobilizing change talk, indicating a commitment to change and specific steps that will generate success. The consultant is responsible for three clear steps during planning: the consultant summarizes this change talk with emphasis on the specific actionable details set forth by the consultee, elicits additional mobilizing change talk (e.g., "How ready are you to change?"), and explores possible challenges to their plan. In the following dialogue, the consultant is sure to assess the leadership team's readiness for change prior to developing a concrete plan.

Consultant: What I took away from our last meeting is that you are all beginning to feel ready to start taking some steps toward implementing a program that will have a positive impact on the mental health of your students. How intent are you on making a change?

School Counselor: I'm feeling more and more ready to start making changes. I'm just not quite sure how at this point. (Mobilizing change talk)

Consultant: You're starting to think it's time to find a way to get the ball rolling. [*Reflection*]

School Counselor: Absolutely, but sometimes it feels like a dream. I don't think I can spend more time away from my administrative duties. The data I am responsible for collecting and distributing is required by the state.

Consultant: The thought of being able to work differently with your students is so wonderful that it's hard to believe it could be a reality!

School Counselor: Yes! I'm so bogged down, but I know that more one-on-one time with students and connecting with families could make a difference. I could also help get their families connected to already existing resources in the community. (Mobilizing change talk)

Principal: I too wish it was possible to have the counselor spend more time with students, but we have to follow what the state says with testing and data. We lose funding if we don't have the right data reports. (Change and Sustain talk)

Consultant: Despite the logistical challenge, you want to find a way to get your school counselor more time with your students. (Strategic reflecting - Reframing)

School Counselor: It would make a huge difference. I really need to step away from my testing duties. (Preparatory change talk)

Principal: That sounds great, but unfortunately, we can't prioritize this over testing. The state won't allow it. (Sustain talk)

Consultant: Testing has to come first, and I am also hearing that you're confident you would see results if you could find a way to have more time. Let's throw out some other ideas about how to gather more support for counseling at the school.

Assistant Principal: Could we just bring in someone for counseling? I don't know how that works. I tried to get the district to let us hire a second counselor, at least part-time, but they wouldn't budge. If it doesn't directly link to our test scores, it's hard to get money for anything. (Sustain talk, but a new idea)

Consultant: If additional staff were added, that might ease the burden on the school counselor.

Principal: Yes, but money always gets the last word.

Consultant: You're all feeling really stuck with how to address this need given your limited resources. I've been thinking some about this and am wondering if I can share a couple of ideas worth considering.

All: Yes!

Consultant: (Shares idea for using counseling intern from local university) What of that fits for you?

School Counselor: I love the idea of bringing in a counseling intern to help. I think the district guidance director would have to approve something like that though. I'm not sure if it would be easy to do.

Consultant: An intern would give you some of the support you need.

School Counselor: Absolutely.

Principal: I think if we worked with a university, our guidance director would be okay with it. I think other schools in our district have had interns. We've never considered it.

Consultant: You're confident that this plan would work once you get the go-ahead.

Principal: It's cost effective and would really lighten the load for our school counselor.

School Counselor: Yes. I think I'd be able to start connecting with our students at a deeper level.

Consultant: If you had an intern, *what would be the first step* to begin freeing up time for you to connect with your students? (Open-ended question to elicit mobilizing change talk)

The consultant assesses the team's commitment to change by first asking, "How intent are you on making this change?" Upon a clear affirmative from the team detailed with reasons why a mental health program is worth pursuing, the consultant eventually asks, "What would be the first step...?", to begin the change plan process. At this point, a plan can be drawn up by the team, responsibilities can be delegated, and the consultant can help the team make revisions to the plan as necessary. As indicated by this illustration, the four processes of MI provide an appropriate framework for consultants looking to employ the model with school administrators. Additionally, MI is useful in

addressing the unique systemic challenges associated with typical consultations in school settings.

Addressing Barriers to Consultation with MI

Practitioners that carry the spirit of MI into their consultation may find they are able to successfully navigate the unique barriers and challenges present when working collaboratively with schools. MI Spirit is the philosophical bedrock of MI practice. In other words, partnership, unconditional acceptance, compassion, and evocation, the belief that motivation to change is not manufactured, but already within the recipient of services, may engage consultees resistant to the process (Miller & Rollnick, 2013). Consultants that embody the spirit of MI actively and empathically listen to an overwhelmed teacher rather than commanding them to teach differently, honor and explore a principal's ambivalence about adopting new policy that is difficult to implement, and value the welfare of the school district at large even when their own personal goals and values do not align. When a consultant works with the spirit of MI, they are rarely, if ever, a barrier to collaboration in consultation. There are several unique barriers to consultation with school administration that makes MI an appropriate choice of approach.

Territoriality/Closed System

School personnel and community-based mental health professionals often come from different disciplines. As a result, each party may identify disparate goals and incongruent approaches for the issues being addressed (Weist et al., 2012). Situations in which consultants assert their expertise may lead school personnel to display territoriality during collaboration (Sanders, 2001; Weist et al., 2012). Further, every school has its own unique culture, social system, ecosystem, and milieu (Amatea, 2013). Consultants entering schools must acknowledge and consider how they will address cultural and bureaucratic phenomena when navigating a school's unique climate. The consultant utilizing MI gives up any perception of control over the system's decision making, therefore lowering defensiveness and promoting freedom to make choices. In an effort to establish partnership and grant school personnel autonomy to make their own decisions, the MI consultant acts as a learner with a unique interest in the school and how they can support change. All in all, the consultee's knowledge and values are prioritized given the mantra, "People are the undisputed experts on themselves" (Miller & Rollnick, 2013, p. 15).

Time and Accessibility

Often, school personnel report lack of time and inaccessible community-based professionals as common barriers to collaborative consultation (Sanders, 2001; Walsh, 2013). Schools must prioritize time towards activities clearly linked to student achievement, making it difficult to find time for what some may view as add-on services such as consultation (Weist et al., 2012). Some school personnel report having insufficient time to complete their required duties, limiting or prohibiting time to be focused on collaborating with a community consultant (Sanders, 2001). Fortunately, MI is efficacious as a brief intervention (Rollnick, Heather, & Bell, 1992). While challenging to most consultations, limits on time may be less of a barrier to successful MI implementation than other consultative efforts. A significant amount of conclusive MI research has been performed with treatment periods of one to four sessions, with many consultations lasting as few as 15 minutes (Miller & Rollnick, 2013). In situations in which school personnel have little time to devote to consultation, consultants may consider using brief interventions of MI (e.g., importance/readiness ruler) while maintaining its spirit through conversations.

Complexity

A final challenge of consultation in schools is the complexity of this type of consultation. As stated by Gravois (2012), "The challenge facing consultation use in schools is inherent in its complexity as a service. Conceptualizing consultation within the larger school context raises many questions, such as, 'Who is the consultant? Who are the recipients of consultation services? What impact is expected from consultation?'" (p. 84). While some models of consultation provide answers to the questions raised, the nature of the relationship between consultant and school, the delineation of responsibilities, and the sharing of power can be difficult to describe or define. MI consultants partner with schools to determine their role, identify the party receiving the consultant's services, and ultimately, the goals of the consultation. A consultant working with the spirit of MI defers to the school's decisions on these matters, thus mitigating some of the complexity inherent in consultation with schools. Consultation can be organized around the four processes of MI (described in detail below; Miller & Rollnick, 2013) to reduce confusion about the direction of the consultation. When operating from an MI framework, consultants thoughtfully and actively listen to the consultee while maintaining the spirit of MI, collaboratively determine a specific change to focus on, evoke (not prescribe!) reasons that school personnel may want to make this change, and finally determine a plan of action (Miller & Rollnick, 2013).

Implications for Counselors in Consultation with School Administrators

MI is a highly researched, empirically valid approach to counseling, coaching, and other forms of helping that may have significant merit as a foundation for consultation in schools. The vast evidence that MI promotes healthy behavior change across a variety

of client concerns, settings, and individual differences eventually led to its adoption by consultants working in schools. While this article illustrates how MI could be applied to consultation with school administrators hoping to make systemic level changes, the practical implications of applying the MI framework should be considered. First, practitioners planning to utilize MI for consultation should receive adequate training on both skills required for consultation and MI. As stated by Gravois (2012, p. X), “At a minimum, essential skills and knowledge must be identified, conditions to impart these competencies must be established, and adequate means to assess the development of skills is required” in order for effective, appropriate consultation to be provided in schools. Though an established set of competencies for consultation with school administrators are missing from the counseling literature, the essential skills and knowledge of MI align with what is currently established. For instance, Rosenfield (2013) suggested that school-based consultants need training in the following domains: working with teams, organizational context, developing working relationships, and implementation of interventions. MI is an appropriate framework for addressing working relationships and implementation of interventions; however, additional knowledge of consultation is necessary to be effective. Educators of mental health professionals would benefit from more formalized teaching guidelines and competencies for appropriately training community-based consultants. Researchers and advocates of consultation must prioritize the development of such training competencies to ensure that consultants are equipped with the requisite competence needed to be effective upon graduation.

Additionally, practitioners intending to implement MI consultation need to obtain adequate training to develop their practice of MI. We specifically recommend that practitioners prioritize adoption of the MI spirit as a philosophical underpinning for their consultative efforts and become comfortable moving through the four processes, from engaging to planning. By focusing one’s efforts on partnership, autonomy, compassion, and evocation, consultants may see that their relationships and collaborative efforts improve with staff and administration. Furthermore, self-assessment and MI-specific supervision with coded fidelity checks using the Motivational Interviewing Treatment Integrity coding instrument (MITI 4.2.1; Moyers, Manuel, & Ernst, 2014) are essential to one’s development in the approach. Consultants interested in learning more about should consult Miller and Rollnick’s (2013) third edition text, attend trainings facilitated by members of the Motivational Interviewing Network of Trainers (MINT), an international organization committed to excellence in MI, and receive MI-specific supervision to enhance the fidelity of their treatment and improvement in their overall adoption of MI as a foundation for practice.

Conclusion

While the application of MI to consultation with school administrators appears promising, we acknowledge that additional research is needed to determine the

outcomes of this approach. Validated training standards for consultation, and examinations of the efficacy of MI with school administrators, are necessary to better equip practitioners working to be effective consultants. Yet, it is evident that the needs and inherent barriers to effective consultation in schools align with the strengths of MI. As illustrated in this article, a consultant that approaches MI with accurate empathy for a school's predicament, prioritizes autonomy support of the administration, evokes ideas about change from consultees and refrains from prescribing directives, favors an exploration of ambivalence to an argument against the status quo, and fosters an environment conducive to productive dialogue may find success in their efforts. Though collaboration with educational systems can be challenging for consultants, we conclude that MI may help consultants limit discord and inspire a school administration to determine their own paths toward successful change.

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