The Role of Personal Motivation and Self-Determination

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Plan for talk

• Define motivation and types of motivation
• Provide an overview of Self-determination theory (SDT)
  • Basic concepts
  • Why might it be useful when working with PWA?
• Provide resources for further study
Why Self-determination theory (SDT)

- Holistic motivation theory
- 40 yrs empirical support (Ryan & Deci, 2017)
- Flexible to apply
- Best addresses PWA’s core needs?
- Consistent with LPAA values
Internalization

“the process through which an individual acquires an attitude, belief, or behavioral regulation and progressively transforms it into a personal value, goal, or organization” (Deci & Ryan, 1985, p. 130)
Psychological needs

- **Autonomy** – to feel you are acting volitionally, to self-endorse one's actions, to act based on one’s own reasons and values (“I am doing it because I want to”). Autonomy vs independence.

- **Competence** – to feel effective, to meet challenges, broaden one’s capacities, and experience mastery

- **Relatedness** – to feel a close connection to others

(Deci & Ryan, 2000; Ryan & Deci, 2017)
Quality of Motivation

(Deci & Ryan, 2000; Ryan & Deci, 2017)
Autonomous forms of motivation associated with…

• Superior goal progress compared to controlled motivation
• Greater persistence in the face of adversity
• More effective coping
• Better learning
• Superior task performance
• Improved well-being

(Koestner et al., 2008; Deci & Ryan, 2000)
“Don’t ask how you can motivate other people. That’s the wrong way to think about it. Instead, ask ‘how can you create the conditions in which other people will motivate themselves.’” (Deci, 2012)
Outcomes associated with needs support

• **More autonomous/intrinsic motivation, improved engagement** (Ng et al., 2012; Pattal et al., 2008; Reeve, Jang, Carrell, Jeon, & Barch, 2004; Stroet, Opdenakker, & Minnaert, 2013)

• **Higher quality learning and task performance** (Deci et al., 1996; Pattal et al., 2008)

• **Increased effort and goal persistence** (Chan et al., 2009; Pattal et al., 2008; Russell & Bray, 2010; Teixeira, Carraça, Markland, Silva, & Ryan, 2012)

• **Improved psychological health** (i.e., depression, anxiety, somatization, and quality of life) (Ng et al., 2012; Vasquez et al., 2016)

• **Preference for challenge** (Pattal et al., 2008)
Autonomy support

• Taking the client’s perspective – foundation
• Encourage reflection, exploration, and questioning
• Provide meaningful rationales for strategies and activities
• Offer choice and support meaningful input
• Minimize pressure

(Deci & Ryan, 2000; Ryan & Deci, 2017)
“A climate of autonomy is conducive to more integrative processing, involving more of the client’s reflective capacities, emotional awareness, ownership of actions, and depth of processing about meaning and values. There are many intricacies to these capacities and their expression as springboards of change.” (Ryan & Deci, 2017, p. 445)
Competence support

• Focus on optimal challenge
• For clients with low confidence, more proximal goals achieved in small steps may be helpful
• Identify barriers
• Develop plans for managing barriers and achieving goals
• Promote self-monitoring and self-evaluation of success

(Deci & Ryan, 2000; Ryan & Deci, 2017)
Competence support

• Offer relevant and informational feedback
• Patient education about aphasia and rehabilitation
  • “clients need to be orientated as if to a new job” (Hersh et al., 2012)
  • Patients often lack confidence in their ability to engage in goal-setting (Rose, Rosewilliam, & Soundy, 2016)
Relatedness support

• Unconditional positive regard
• Show genuine interest and concern
• Acknowledge/accept conflict (e.g. ambivalence, disappointment)
• Be honest and transparent

(Deci & Ryan, 2000; Ryan & Deci, 2017)
Final note

• Improving communication will likely have a positive effect on the satisfaction of all three psychological needs

• MI and SDT are a good match
Thank You