

# Motivational Interviewing for Health Educators: An Innovative Strategy to Address Priority Health Issues

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## ABSTRACT

**Background:** Motivational interviewing (MI), an evidence-based and theory driven strategy, is utilized to support individuals while strengthening their own motivation and commitment to a specific behavior change. Over the last decade the efficacy of motivational interviewing in other settings such as health departments, physician's offices, and other health settings has been explored. Researchers indicate that MI has been an effective means of addressing many priority health issues. **Theoretical Basics:** The skill set developed through MI, grounded in theories such as Transtheoretical Model and Social Cognitive Theory, has implications for health educators as a strategy to address the priority health issues in our nation. The purpose of implementing this course is to provide specific training in Motivational Interviewing for the Health Educator working in clinical, worksite, and community settings. **Intervention:** Grant monies were utilized to train faculty and staff in MI through the Motivational Interviewers National Network (MINT). The faculty then created and implemented a motivational interviewing curriculum that was taught fall semesters of 2012 and 2013. **Evaluation:** A mix-methods design is used for data collection that included pre/post test, observations, and coding of recorded health educator-client interactions. The preliminary results from the course indicate that the health educators in training were proficient at using MI to elicit behavior change with the clients in their various health settings. **Implications for Practice:** As we face challenges in addressing priority health issues in various populations, motivational interviewing is an important tool that should be further explored in the context of health education and health promotion.

## INTRODUCTION

Motivational interviewing (MI) is an evidence-based, theory driven strategy utilized to support individuals and help them strengthen their own motivation and commitment to a specific health behavior change. Grant monies were utilized to train faculty in MI through the Motivational Interviewers National Network (MINT). The purpose of implementing this course is to provide specific training in Motivational Interviewing for the Health Educator working in clinical, worksite, and community settings. The results from the course indicated that the health educators in training were proficient at using MI to elicit behavior change with the clients in their various health settings. Motivational interviewing is an important tool that should be further explored in the context of health education and health promotion. This part of the project focuses on the development of a skills based-course for health educators.

## PURPOSE

The purpose of implementing this experience for health educators is to provide specific training in Motivational Interviewing for the Health Educator working in clinical, worksite, and community settings. This project examines how the faculty developed and implemented a class for two fall semesters and preliminary findings for improvements.

## METHODS

### Participants

- Undergraduate Community Health Education majors in their last semester on campus OR Graduate Masters of Public Health students prior to their Preceptorship that enrolled in the BSI/MI Workshop courses Fall 2012(n=12) and 2013 (n=10).

### Intervention

- Faculty were trained in Motivational Interviewing for the 2011-2012 academic year;
- Faculty developed a 16 week course experiences and implemented year one (Fall 2012) and year two (Fall 2013);
- Faculty placed students in Preceptorship sites year one (Spring 2013) and year two (Spring 2014).

### Measures

- Faculty were trained and moved towards proficiency and competency levels in Motivational Interviewing.
- Faculty trained and worked with a Research Intern to assist with data collection and course instruction.
- Students completed Pre/Post Tests to assessing knowledge of Motivational Interviewing.
- Students engaged in semester long training; worked in laboratory setting with student clients; turned in tapes for coding and feedback;
- Students were assessed mid- and end of term.

## COURSE MATERIALS

### Creation of Lecture, Teaching Strategies and Observations

#### A. Course Objectives:

##### By the end of this course candidates will have:

- A core set of knowledge and skills to perform the task of behavioral screening and intervention for tobacco, alcohol, and depression in the health care setting.
- Had opportunities to practice and demonstrate key knowledge and skills in classroom settings.

##### By the end of this course candidates will have **Essential Knowledge** in the following areas:

- Understanding the rationale for BSI
- The key content areas related to BSI-MI research
  - alcohol, drugs, tobacco, depression, obesity, nutrition, exercise)
- Treatment modalities and payment
- Rationale for Motivational Interviewing (MI)
- Competence in cultural competency in health care
- Understand universal screening
- Understand the MI basics: spirit, skills and strategies
- Elements of documentation necessary for reimbursement

##### By the end of this course candidates will have **Essential Skills** in the following areas:

- Administering and scoring validated screening instruments
- Providing MI-adherent feedback and recommendations
- Responding to special circumstances
- Using MI to elicit, recognize and reinforce change talk
- Guiding development of action plans for change
- Identifying and linking future patients to appropriate resources
- Composing billing documentation

#### B. Course Strategies:

##### Flipped classroom 1/3 of course:

Student read materials outside of class, watched videos links, webcasts and came to class to discuss, process, and re-evaluate key concepts.

##### Classroom Lecture (1/3 of time):

Introduced key concepts, demonstrated skills with research intern/faculty

##### Laboratory: (1/3 of time):

Student work on-site with 'clients' from another HEHP course, spent time taping clients outside of class, and in lab worked with faculty as observers.

##### On-the-Spot-Assessments: (throughout the course)

Whips, Fishbowls, and Round Table Discussions.

#### C. Observation/Reflections:

##### Client Session

###### Describe the OARS

Tell us about your **MI Style** (ie, R.E.A.L.)

Describe what you think the Client's Target Problem was and why did you Focus on it?

In the Road Map: did you get through all of it? Where did you get stuck? How did you get out?

##### Observation

How did the client connect with you? Did they seem comfortable?

**After** listening and coding your audio tape:

What happened?

What would you do differently?

Describe your Question/Reflection Ratio.

##### Planning for Next Session

Where did the conversation end? Would you change it?

How will you proceed next Week?

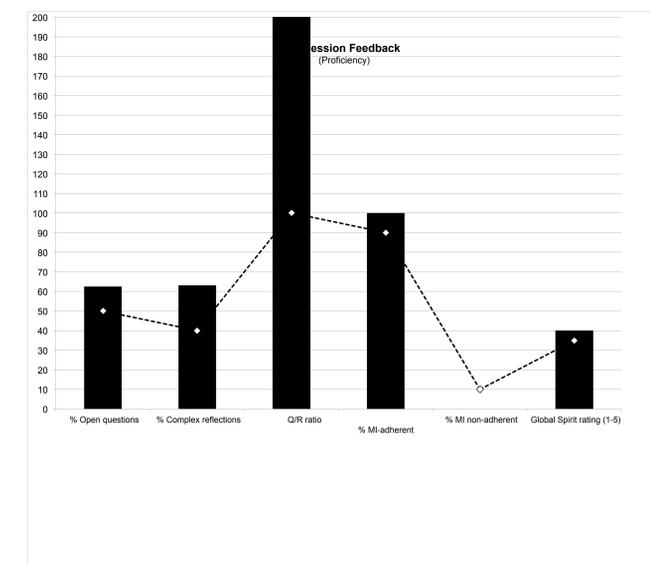
Area there areas that you missed or need to go back to, refocus or evoke?

##### What did you learn about yourself?

Other observations/feelings you had during or afterwards

## PILOT FINDINGS

After Fall 2012, the grant allowed for a focus group process & to evaluate the first 12 students enrolled and faculty. Faculty and researchers made improvements to delivery of course, created laboratory sections, brought in 'clients' for students to practice skills with, and added qualitative assessments for mid- and final examinations. Developing a skills based course that requires practice, clients, and feedback loops requires consistent communication, use of mixed methods instruction, and a variety of assessment tools. Below is an example of the MITI assessments that students received during the course.



## CONCLUSION

Students have been placed in a variety of community and public health Preceptorships in WI, MN, and SD. The next part of the research is to determine how students are improving their skills on-site, how many patients and clients they have interacted with, and the outcomes for the patients. These findings will also impact how the course is offered in the future.

## REFERENCES

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