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SHOULD BRIEF MOTIVATIONAL INTERVIEWING TRAINING BE INCLUDED IN MEDICAL CURRICULA?

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Introduction: There is some evidence for including behaviour change counselling in medical curricula. However, support for brief motivational interviewing training has not been rigorously tested. Some studies have omitted appropriate comparison conditions, and other work has not allowed for direct observation of skill transfer.

Methods: We examined the efficacy of teaching brief motivational interviewing using 46 pre-clinical medical student volunteers. We included a 2 h training workshop, 3 x 2 h practical skills sessions using simulated patients and we improved the pre-post design with the inclusion of a waitlist comparison group. Confidence and knowledge were measured at baseline, post-teaching, and at 3-month follow-up, while brief motivational interviewing skills were assessed at 3 time-points during the simulated-patient practice sessions. Repeated measures t-tests and ANOVA were conducted.

Results: We found confidence in health behaviour change conversations and knowledge of brief motivational interviewing significantly improved from baseline to post-teaching (both $p < .050$) and remained significantly improved at 3-month follow-up (both $p < .050$). Behaviour change counselling skills assessed during the practical sessions indicated a significant improvement across the three practical skills blocks ($p < .001$).

Conclusions: Our findings suggest that pre-clinical medical students can learn brief motivational interviewing skills and knowledge within a relatively short period of time. Future research is needed to investigate whether these skills transfer to the clinical years of medical training, and importantly remain effective with real patients in general practice settings. We are currently conducting this work in collaboration with Primary Health Network, Gold Coast.

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