

Motivating motivation

Motivational interviewing in general dental practice: A review of the evidence

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‘Why won’t patients do what they are told?’ is a sentiment posed by many a practitioner since the beginning of time; or least since the advent of when the roles of patient and professional were first enacted. Yet recently we have seen fit to modify this to a rather more conciliatory tone taking into consideration our understanding that in order to get the best co-operation from the patient we need first to engage them and motivate them to behavioural change. The theory is that by doing so, rather than telling them what ‘we’ think is best for them in a paternalistic or even dictatorial way, there is a greater likelihood of a successful outcome.

So, does the theory transfer into practice? Answering this question was the key objective of this study which systematically reviewed the evidence regarding the use of motivational interviewing in the context of general dental practice. This was in order to discover whether practitioners might decide if it could be an important skill to develop within their practices.

Motivational interviewing is a method of working with patients that activates their own motivation and resources thereby enabling them to change their behaviours,



recognising that this requires a partnership between patient and clinician. It relies on a complete acceptance that people (patients)

are the experts on themselves and that they make their own decisions about what they will and will not do. The review included eight papers all of which were considered of robust quality in terms of their research methods and seven of which were considered to offer externally valid findings. Five described randomised controlled trials and all of these demonstrated that interventions including motivational interviewing had a positive effect on oral health and health behaviour.

Consequently, the authors of the review felt that it showed that the technique has potential for helping patients with poor oral health. It would seem that if practitioners understand their patients’ lives and see the world through their eyes, rather than superimposing the professional dental point of view, not only does their oral health, but also their well-being, sense of self-mastery and their satisfaction with the dental care they receive also appear to benefit. Training in motivational interviewing for dental personnel, which is a straightforward process, could be a very useful addition to the skill set of practitioners and dental teams.

By Stephen Hancocks

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What led you review the evidence for motivational interviewing and oral health promotion?

Our team at Plymouth University were commissioned by NICE to conduct a systematic analysis and review of evidence about approaches to oral health promotion for dental practice teams. During the conduct of this review it became clear to the research team that there was a recurring theme emerging which showed that the most successful interventions

were based on psychological frameworks and theories. We therefore decided to explore this literature in greater depth.

Why do you feel that motivational interviewing is effective?

The evidence strongly suggested that interventions which were based on supporting and encouraging the autonomy and choices of patients and which were dependant on the building of a positive therapeutic alliance between practitioner and patient were the ones which were most likely to result in a positive health improvement. The term ‘motivational interviewing’ is thus a sort of shorthand we used to summarise this approach, although it also refers to a very specific methodology. Importantly, from the point of view of a practitioner, this approach also appears to promote patient satisfaction, as well as promoting oral health.

Is more training required so that this can be used by more GDPs in practice?

Training in the motivational interviewing technique itself would undoubtedly benefit practice teams, and such training is not onerous. I also believe they would find it extremely interesting. Perhaps more importantly, though, I think that making health psychology, particularly the psychology of choice and decision making, should be a key part of all dental professional curricula. These things are a crucial and central part of dental care in practice. Implementing such a change would mean that we would develop a profession who know the science underpinning their communication skills, as much as they have knowledge of the concepts and science which underpin their dental medicine and surgical skills. ■