



Development of a Motivational Interviewing Curriculum for Resident Trainees Using Improvisational Theater Techniques



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Objectives

- Develop a medical improvisation (improv) motivational interviewing (MI) course.
- Assess learners' confidence in MI skills pre-post course.
- Assess learners' application of MI skills pre-post course.
- Explore how learners experience learning MI through medical improv.


Background

- Medical improv is the application of improv theater techniques to improve healthcare communication and teamwork (1).
- MI is a collaborative conversation designed to strengthen motivation for behavior change.

Participants

- 54 Yale Primary Care Internal Medicine Residents

Curriculum

- A medical improv-based curriculum was developed to teach primary care internal medicine residents MI using Kern's 6-steps to curriculum development and backwards frame design
- Needs assessment was conducted via a US cross-sectional survey (Scan QR Code for Paper) 
- 3 cohorts in March – May 2022
- 3 sessions, 2 hours each session: 6 curricular hours
- Each session had 10 minutes of didactics, and 110 minutes of improv exercises

Assessment

Quantitative

- Post Survey: Assessed confidence of MI skills pre-post
- Role Plays: Individuals volunteered to complete pre and post-role plays (n = 7). Role plays were coded using the Motivational Interviewing Treatment Integrity (MITI) Score 4.2 (2).

Qualitative

- Interpretative phenomenology, constructivist
- Four focus groups conducted post-course with a semi-structured interview guide.
- Interviews were transcribed, de-identified, and open-coded by 2 coders (CC, PC) in NVIVO.
- Thematic analysis was conducted using codes, memos, and field notes.

Figure 1: Percent of respondents who report they were fairly or completely confident on the specified MI skill before and after the course.

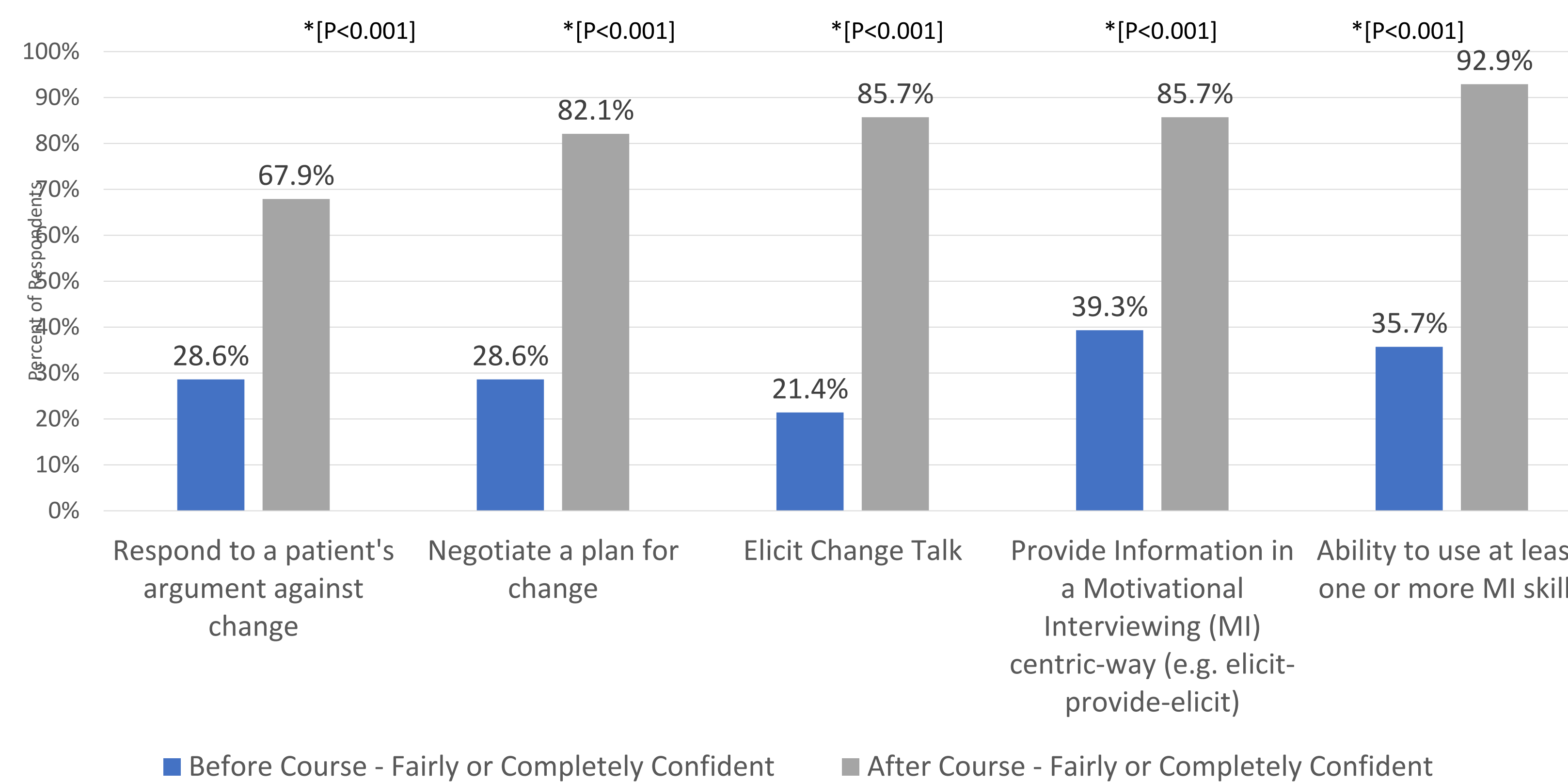


Figure 2: Subthemes on how individuals learn through MI

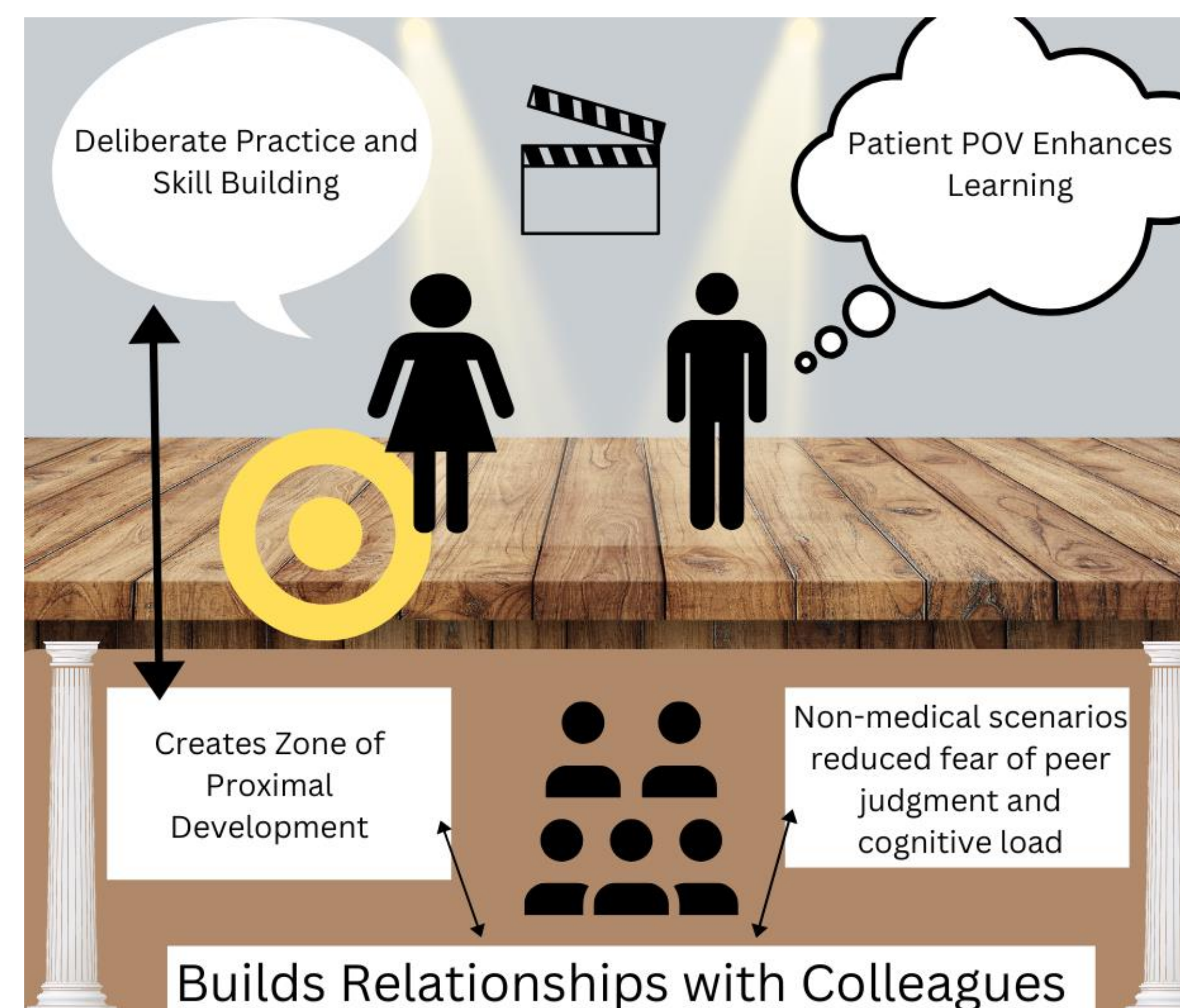


Figure 3: Role play participants' global summary scores on the MITI before and after the course who met at least beginning proficiency in MI

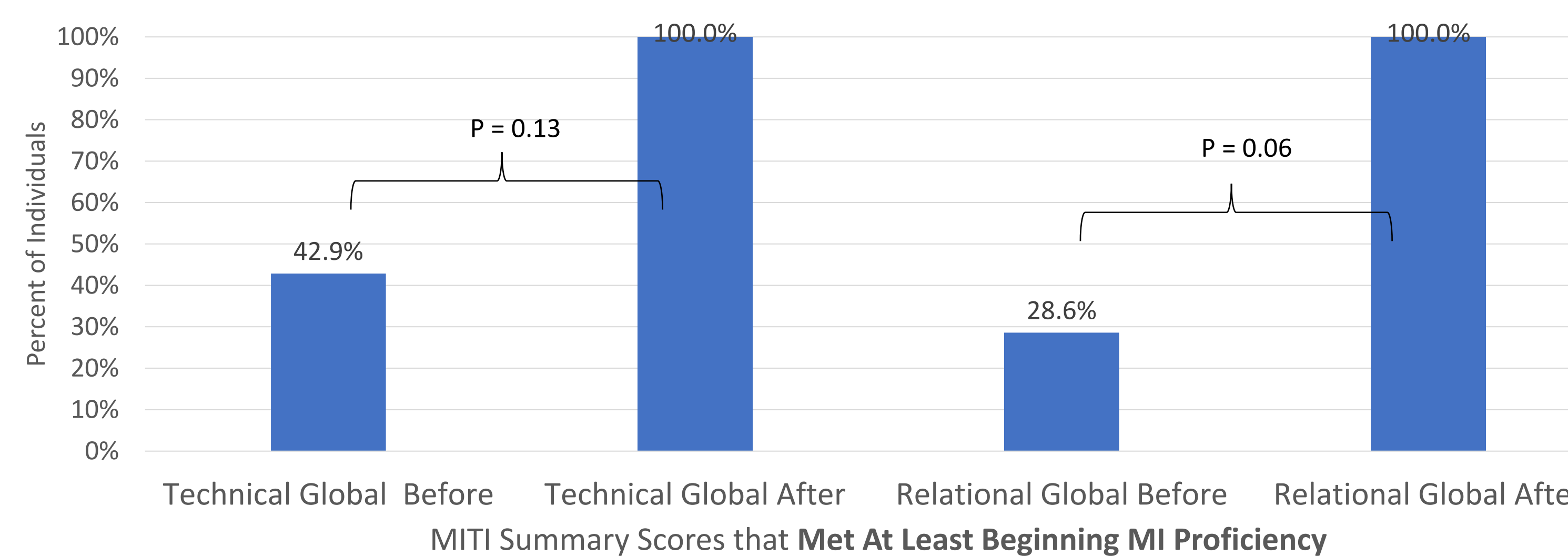
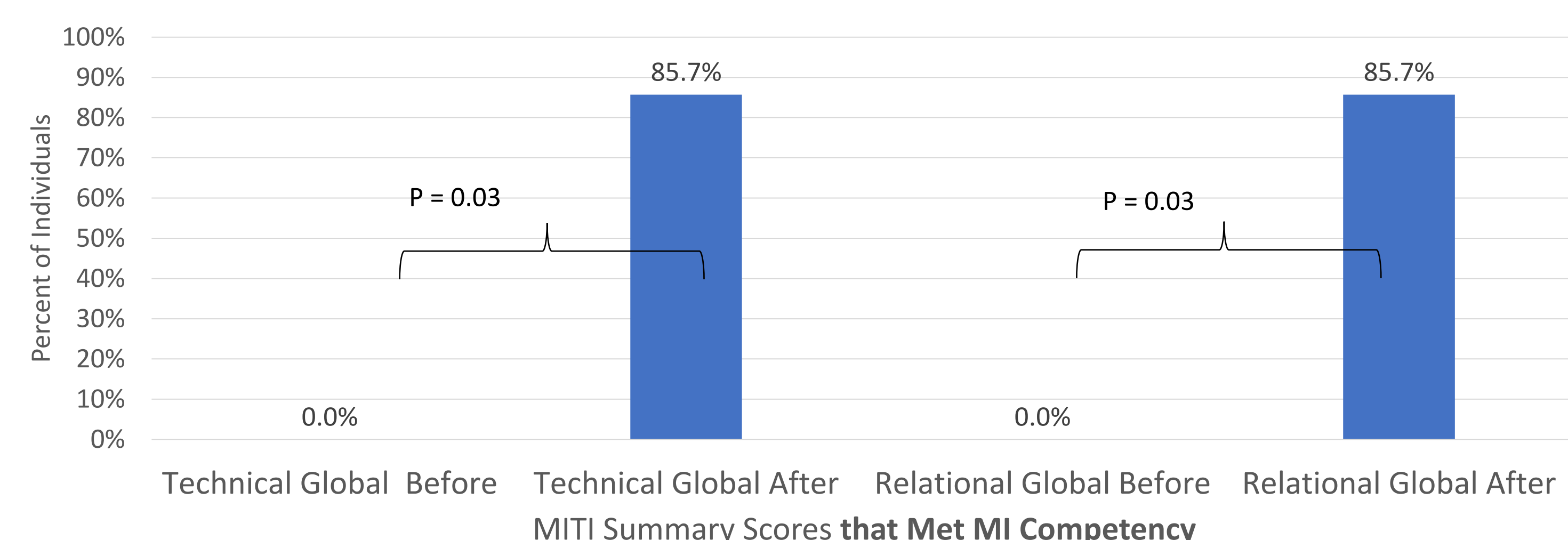


Figure 4: Role play participants' global summary scores on the MITI before and after the course who met competency in MI



Results

- Residents' self reported confidence on applying key MI skills increased in statistically significant manner after the course (Figure 1).
- All residents who completed pre/post role plays (n = 7), met at least beginning proficiency of MI skills post course (Figure 3).

Thematic Analysis

1. Improv enhances the learning of MI.
2. Using non-medical scenarios had positive benefits
3. Trying improv had positive effects on residents' environment.
4. Improv can positively impact learner's cognitive and psychological flexibility.
5. Improv principles are related to the spirit of MI and impact both the clinical and learning environments.

Limitations

- Limitations focus on the assessment of the curriculum
- Single site, a single program
- Small number of individuals participated in role plays
- Self-reported survey

Conclusion

- A medical improv-based MI curriculum may increase learners' confidence in applying their MI skills, and data suggests may improve the application of MI skills.
- Medical improv-based MI is acceptable, feasible, and may have unique benefits to learners.
- Next steps include developing a theory on how improv training can impact physicians' workplace skills.

Acknowledgements

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