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### ► [A review of motivational interviewing-based interventions targeting problematic drinking among college students.](#)

**Branscum P., Sharma M.**

**Alcoholism Treatment Quarterly: 2010, 28, p. 63–77.**

[Request reprint](#) using your default e-mail program or write to Dr Branscum at [branscpw@mail.uc.edu](mailto:branscpw@mail.uc.edu)

*Studies published in the mid-2000s confirm that counselling based on motivational interviewing helps heavy drinking US college students control their drinking and reduce related problems.*

**Summary** The [Task Force on College Drinking](#) established by the US National Institute on Alcohol Abuse and Alcoholism (NIAAA) considers [motivational interviewing](#) to be [one of the few](#) interventions clearly shown to reduce drinking in the college setting.

Motivational interviewing is a counselling approach which avoids explicit confrontation and seeks to engender motivation by highlighting the client's own reasons for changing substance use.

This review aimed to summarise new findings for motivational interviewing interventions for college students and derive implications for research and health-promoting interventions. A search was conducted for English-language research articles documenting studies of motivational interviewing in colleges published from 2003–2008.

Eleven such studies were found. In these, five interventions targeted heavy-drinking college students and four 'adjudicated' students who had to attend because they had broken college rules regarding alcohol. The remaining two targeted [underage](#) students and men in their first week of classes. Interventions typically lasted about an hour.

### **Main findings**

Across these studies it appears that motivational interventions consistently reduced drinking and related problems among college students and high-risk subgroups. However, only three studies used the research design (a randomised controlled trial) best

able to determine whether the intervention actually caused the reductions, and all three targeted heavy drinkers. Four studies had no comparison or **control** groups against which to benchmark changes associated with the intervention, including two of the four of adjudicated students. Given that the students in these studies tended to be unusually heavy drinkers, lack of control/comparison groups makes them vulnerable to the tendency for atypical behaviour to normalise over time even without intervention ('regression to the mean'). It is also possible that adjudicated students cut back due to the sanctions imposed by the college and the wish to avoid being caught again. Studies which did feature a comparison intervention rarely described in sufficient detail what that intervention consisted of. On the plus side, most studies had adequate follow-up assessments of at least three months.

Many of the studies do not appear to have been based on a theory of how the intervention might lead to changes in drinking and related problems, though implicit in several was the idea that motivational interviewing could stimulate the desire to change in initially unmotivated students.

### The authors' conclusions

Interventions based on motivational interviewing reduce drinking and related problems among college students, but analysis of the reviewed studies suggests their effectiveness might be improved by:

- using a standard calendar-based assessment of how much and when the student has been drinking as part of the counselling process;
- offering personalised feedback on their drinking and related problems;
- counselling which features open questions that invite elaboration by the student, and responses by the counsellor which elaborate on and then reflect back their own comments to the student ('complex reflections').

### FINDINGS

As with motivational interviewing [for young people in general](#) rather than just college students, lack of adequate comparison interventions raises doubts over whether the motivational nature of the interviews was the active ingredient, or whether any acceptable and feasible intervention would have been just as effective.

One riposte to such doubts is that among people not seeking help, motivational interventions (which do not confront or insist that participants accept a clinical label or a pre-determined outcome) are among the few which *are* acceptable to the participants and feasible – feasible partly because they are acceptable, and partly because they can be quite brief. Another is that we have evidence – from studies of young people among others – that what happens during motivational sessions *does* matter. In particular, from a [British study](#) of further education students and others from Switzerland, it seems that it is important to embody the overall spirit of the approach and, in finer detail, to use (as the featured review concluded) the skill of reflective listening to 'play back' to the client an elaborated version of their own comments.

The issue of whether other counselling/information-giving styles might have been just as effective as motivational interviewing was also addressed in [a review](#) which aggregated results from 62 studies evaluating attempts to curb risky drinking among college students. In line with the featured review's conclusions, among the interventions with the strongest research backing were individual, face-to-face discussions which adopted a

motivational interviewing style, and which featured personalised feedback on the individual's drinking profile – in particular, 'normative' feedback setting their drinking and/or risks alongside national or local norms.

Most if not all the reviewed studies were conducted in the USA, where drinking is illegal below age 21 and attitudes to drink and youth drinking differ from those in the UK. However, [UK study](#) which also tested motivational interviewing among college students found this effective in the short term in curbing smoking, drinking and cannabis use among further education students already using stimulants and/or regularly using cannabis.

*This draft entry is currently subject to consultation and correction by the study authors.*

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