Children's Hospital of Philadelphia PolicyLab

Motivational Interviewing to Promote Interconception Health: A Scoping Review of Evidence from Clinical Trials

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Promoting interconception health can improve birth outcomes and long-term women's health. Motivational Interviewing (MI) is an evidence-based behavior change strategy that can address interconception health behaviors and health care engagement. This scoping review assessed the evidence for using MI to promote interconception health and assessed features of successful MI interventions. We searched PubMed, CHINAL, and Cochrane databases for clinical trials that involved an MI intervention and at least one comparison group published by 8/31/2021. Interventions occurred during pregnancy or within three months postpartum and outcomes were measured between birth and one year postpartum. We abstracted data on trial characteristics including outcome, population, interventionist training, MI fidelity monitoring, intervention dose, and comparison condition. We examined whether trials that demonstrated statistically significant improvement in outcomes had common features. There were 37 included studies. Interventions addressed breastfeeding, teen contraception, tobacco, alcohol, or substance use, vaccine acceptance, nutrition, physical activity, and depression. No trials addressed more than one topic. Nineteen studies demonstrated improved outcomes. Interventions during the perinatal or postnatal periods were more likely to demonstrate improved interconception outcomes than interventions in the prenatal period. No other trial characteristics were consistently associated with demonstrating improved outcomes. MI has been applied to a variety of interconception health behaviors, with some promising results, particularly for interventions in the perinatal or postpartum period. Outcomes were not clearly attributable to any other differences in intervention or study design. Further exploring context or implementation may help maximize the potential of MI in interconception health promotion. MI may be implemented across a range of clinical settings, patient groups, and time points around pregnancy. Interventions on health topics relevant to the interconception period should incorporate perinatal or postpartum components.

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