SBIRT: An Effective Approach

- Screening
- Brief Intervention
- Referral
- Treatment

Think-Pair-Share Group Activity

- Think – Silently read your handout
- Pair – After everyone in your group has reviewed the handout identify and discuss as a group the main topic of the handout and complete the worksheet (one worksheet per group)
- Share – each group should elect a spokesperson to share an overview of your topic with the large group
Severity of Alcohol Problems

- Dependent drinking/Alcoholism
- Harmful drinking/Abuse
- Risky/Hazardous drinking
- Safe drinking
- Abstinent


What is a Low-Risk Limit?

- **MEN**
  - On any single DAY: No more than 4 drinks on any day
  - **AND**
  - Per WEEK: No more than 14 drinks per week

- **WOMEN**
  - On any single DAY: No more than 3 drinks on any day
  - **AND**
  - Per WEEK: No more than 7 drinks per week


What is Low-Risk Drinking

- Anyone age 65 or over: no more than 7 drinks per week or consuming no more than 3 drinks per occasion

**What is a Low-Risk Limit?**

- There are times when even one or two drinks can be too much:
  - When operating machinery
  - When driving
  - When taking certain medicines
  - If you have certain medical conditions
  - If you cannot control your drinking
  - If you are pregnant

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**Definitions: Standard Drink**

- A drinking “binge” is a pattern of drinking that brings blood alcohol concentrations (BAC) to 0.08 or above.
  - Typical adult males: 5 or more drinks in about 2 hours
  - Typical adult females: 4 or more
  - For some individuals, the number of drinks needed to reach “binge” level BAC is lower
SCREENING

What barriers get in the way of screening?

- Ask students to talk about the barriers to screening that they have observed in their work settings, and possible ways to overcome these

Role of Healthcare Profession in Drug and Alcohol Use—What Can We Do to Help?

- Identify use, misuse, and problematic use; screen with simple direct methods
- Connect use/misuse to health related issues
- Encourage consumption reduction
- Conduct a Brief Intervention
- Refer for formal assessment
Goals of Screening

- Identify both hazardous/harmful drinking or drug use and those likely to be dependent
- Use as little patient/staff time as possible
- Create a professional, helping atmosphere
- Provide the patient information needed for an appropriate intervention

SBIRT as a Response Option

Screening vs. Assessment

- Screening: determining the possibility that a condition exists
- Assessment: confirming the existence of a condition and its severity
Pre-Screens

• Alcohol Pre-Screen:
  How many times in the past year have you had X or more drinks in a day?
  (X equals 5 for men and 4 for women or anyone 65 or older). Reporting 1 or more occurrences of this is considered a positive result and should trigger more in-depth screening and possibly a brief intervention.


• Drug Pre-Screen:
  How many times in the past year have you used an illegal drug or used a prescription medication for non-medical reasons?
  A score of 1 or more is considered a positive result and should trigger more in-depth screening and possibly a brief intervention.


Alcohol Use Disorders Test - AUDIT

• Full AUDIT 10 question instrument
• Brief 3 question version
• Screens for hazardous drinking, harmful use and alcohol dependency


The AUDIT—3 Question Version

Add the number for each question to get the total score for items 1, 2, & 3.

1. How often do you drink anything containing alcohol?
   (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) 2-3 times a week (5) 4-6 times a week (6) Daily

2. How many drinks do you have on a typical day when you are drinking?
   (0) 1 drink (1) 2 drinks (2) 3 drinks (3) 4 drinks (4) 5-6 drinks (5) 7-9 drinks (6) 10 or more

3. How often do you have four or more drinks on one occasion?
   (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) 2-3 times a week (5) 4-6 times a week (6) Daily

Drug Abuse Screening Test (DAST)

DAST – 10 items used to screen for potential involvement in the use of drugs.


CAGE

1. Have you ever felt you should Cut down on your drinking?
2. Have people Annoyed you by criticizing your drinking?
3. Have you ever felt bad or Guilty about your drinking?
4. Have you had an Eye-opener first thing in the morning to steady nerves or get rid of a hangover?

Assessing Readiness Stages of Change

- **Precontemplation**: The client is not yet considering change or is unwilling or unable to change.
- **Contemplation**: The client acknowledges concerns and is considering the possibility of change but is ambivalent and uncertain.
- **Preparation**: The client is committed to and planning to make a change in the near future but is still considering what to do.
- **Action**: The client is actively taking steps to change but has not yet reached a stable state.
- **Maintenance**: The client has achieved initial goals such as abstinence and is now working to maintain gains.


**ACTIVITY**

Stages of change card sort activity

**FLO**

- Feedback
- Listen and Understand
- Options Explored

TASK #1: FEEDBACK

What do you say?

• **Range of score and context** - Scores on the AUDIT range from 0-40. Most people who are social drinkers score less than 8
• **Results** - Your score was 18 on the alcohol screen
• **Interpretation of results** - 18 puts you in the moderate-to-high risk range. At this level, your use is putting you at risk for a variety of health issues
• **Norms** - A score of 18 means that your drinking is higher than 75% of the U.S. adult population
• **Patient reaction/feedback** - What do you make of this?

Feedback

• Your job is to deliver the feedback
• Just bringing up the subject is helpful
• Let the patient decide where to go with it

Feedback

• Easy Ways to Let Go...
  – I’d really like to hear your thoughts. . .
  – I’d just like to give you some information. . .
  – What you do is up to you
Task #2: Listen and Understand
• Listen to what the situation sounds like from the patient’s perspective
• Show that you understand where they are coming from
• Listen to assess readiness to change

Listen and Understand
• Useful Tools to Promote Change
  – Pros and Cons
  – Readiness Rulers

Pros and Cons
• What do you like about drinking?
• What do you see as the downside?
• What else?
• Summarize both pros and cons...
  “On the one hand you said..., on the other hand you said...
Readiness Ruler

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Task #3: Options Explored

• What do you think you will do?
• What changes are you thinking about making?
• What do you see as your options?
• Where do we go from here?
• What happens next?

Offer a Menu of Options

• Manage your drinking (cut down to low-risk limits)
• Stop drinking
• Never drink and drive (reduce harm)
• Nothing (no change)
• Seek help (refer to treatment)

Closing the Conversation—SEW

- Summarize the patient’s statements in favor of change
- Emphasize their strength and ability to change
- What agreement was reached?

A Good Outcome from Brief Intervention

- Reduction or cessation of use (even temporary)
- Starting to think about reducing
- Agreeing to accept referral

REFERRAL TO TREATMENT
Specialty Treatment Near You

- Do you have a current listing of substance abuse treatment centers?
- Have you developed a referral relationship with them?
- Are you able to do a “warm handoff”?
- Do you have information about 12-Step and other recovery programs in your area?

Additional Resources


Fornili, K., Virginia. (2004). Substance abuse tool box: information for primary care providers. Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services. (2nd ed.).


Additional Resources


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