Screening and Brief Interventions

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Training Goals

- Increase participant’s knowledge of screening and brief intervention concepts and techniques.
- Help participants develop skills to use the Alcohol Use Disorder Identification Test (AUDIT) and CAGE.
- Help the participants understand the components of brief interventions.
10 risk factors for disease globally

- Underweight
- Unsafe sex
- High blood pressure
- Tobacco consumption
- Alcohol consumption
- Unsafe water, sanitation & hygiene
- Iron deficiency
- Indoor smoke from solid fuels
- High cholesterol
- Obesity
What is Screening?

- A range of evaluation procedures and techniques to capture indicators of risk.
- A preliminary assessment that indicates probability that a specific condition is present.
- A single event that informs subsequent diagnosis and treatment.
Benefits of Screening

- Provides opportunity for education, early intervention.

- Alerts provider to risks for interactions with medications or other aspects of treatment.

- Offers opportunity to engage client further.

- Has proved beneficial in reducing high-risk activities for people who are not dependent.
Rationale for screening and brief intervention

- Alcohol abuse problems are widespread in Uganda.

- Substance abuse problems are associated with significant morbidity and mortality.

- Early identification and intervention can help reduce alcohol use problems.
Types of screening tools

- Self report (self administered questionnaires)
- Breathalyzer testing
- Blood alcohol levels
- Saliva or urine testing
Characteristics of a good screening tool

- Brief (10 or fewer questions)
- Flexible
- Easy to administer, easy for client
- Addresses alcohol, & other drugs
- Quick to administer and get immediate results.
- Indicates need for further assessment or intervention
- Has good sensitivity and specificity
Sensitivity and specificity

• Sensitivity refers to the ability of a test to correctly identify those people who actually have a problem, e.g., “true positives”
• Specificity is a test’s ability to identify people who do not have a problem, e.g., “true negatives”
• Good screening tools maximise sensitivity and reduce “false positives”.
Brief Screening Instruments

- AUDIT
- CAGE
- TWEAK
- ASSIST
- CRAFFFT
AUDIT

• Was developed by the WHO.
• Method of screening for excessive drinking and to assist in brief assessment.
• It can help in identifying excessive drinking as the cause of the presenting illness.
• It also provides a framework for intervention to help hazardous and harmful drinkers reduce or cease alcohol consumption.
AUDIT Cont’d

- 10 questions - Can identify problem use and dependence
- Used with adults / adolescents / young adults
- Highly sensitive for many different populations
- Interview, self-administered, and computerised versions
- Validated cross-culturally; translated into many languages
AUDIT

Participants take self administered AUDIT test
<table>
<thead>
<tr>
<th>Domains</th>
<th>Question Number</th>
<th>Item Content</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hazardous Alcohol Use</strong></td>
<td>1</td>
<td>Frequency of drinking Alcohol Use</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Typical quantity</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Frequency of heavy drinking</td>
</tr>
<tr>
<td><strong>Dependence Symptoms</strong></td>
<td>4</td>
<td>Impaired control over drinking</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>Increased salience of drinking</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Morning drinking</td>
</tr>
<tr>
<td><strong>Harmful Alcohol Use</strong></td>
<td>7</td>
<td>Guilt after drinking</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>Blackouts</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Alcohol related injuries</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>Others concerned about drinking</td>
</tr>
</tbody>
</table>
CAGE

- 4 questions (yes / no)
- To detect hazardous drinking
- Asks about need to cut down, signs of dependence & related problems
- Self administered, interview
- Popular in primary care settings
- Sensitive screen overall, but less sensitive for women
CAGE Questions

- Have you ever felt you should **Cut** down on your drinking?
- Have people **Annoyed** you by criticizing your drinking?
- Have you ever felt bad or **Guilty** about your drinking?
- Have you ever taken a drink first thing in the morning (**Eye-opener**) to steady your nerves or get rid of a hangover?
Tips for Screening

- Use a non-judgemental, motivational approach
- Do not use stigmatizing language
- Embed screening questions in larger assessment of health habits.
Brief Interventions (BIs)

- Brief interventions (BIs) in primary care settings are beneficial for alcohol and other drug problems.
- Brief advice (5 minutes) is just as good as 20 minutes of counselling, making it very cost effective.
- BIs extend services to individuals who need help, but may not seek it through substance abuse service agencies.
Components of Brief Interventions

- **FRAMES**’ stands for the components of effective brief intervention:
  - **Feedback** is given to the individual about personal risk or impairment.
  - **Responsibility** for change is placed on the client.
  - **Advice** to change is given by the provider.
  - **Menu** of alternative self-help or treatment options is offered to client.
  - **Empathic** style is used in counseling.
  - **Self-efficacy** or optimistic empowerment is engendered in the client.
Who can administer screening and BIs

- Primary care physicians
- Substance abuse treatment clinicians
- Emergency department staff members
- Nurses
- Social workers
- Mental health workers
- Health educators
More Information

- Project CORK: www.projectcork.org
- NIAAA: www.niaaa.nih.gov
Thank you and Break