


2 USING SBIRT TO TALK TO ADOLESCENTS ABOUT SUBSTANCE USE WEBINAR SERIES

BRIEF INTERVENTION FOR ADOLESCENTS PART I: BRIEF NEGOTIATED INTERVIEW (BNI) USING MOTIVATIONAL INTERVIEWING (MI) STRATEGIES

HOSTED BY:
 ADOLESCENT SBIRT PROJECT, NORC at THE UNIVERSITY OF CHICAGO,
 and THE BIG SBIRT INITIATIVE



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Using SBIRT to Talk to Adolescents about Substance Use Webinar Series



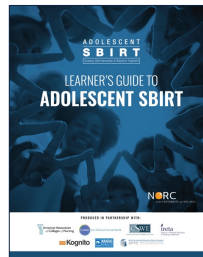
- Substance Use Screening Tools for Adolescents
- Brief Intervention for Adolescents Part I: BNI Using MI Strategies
- Brief Intervention for Adolescents Part II: BNI Using MI and CBT Strategies
- Discussing Options and Referring Adolescents to Treatment

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Learner's Guide to Adolescent SBIRT Curriculum

- The education presented in this webinar complements the *Learner's Guide to Adolescent SBIRT*.
- Order your copy here and get more information here:
sbirt.webs.com/curriculum



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Access Materials

- PowerPoint Slides
- Materials and Resources
- On Demand Access 24/7
- Certificate of Attendance
- Evaluation Survey



sbirt.webs.com/brief-intervention-part-one

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Ask Questions



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Section 1

Brief Intervention

ADOLESCENT
SBIRT
Screening, Brief Intervention & Referral to Treatment

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Definitions

- **Brief Intervention (BI):** a behavioral change strategy that is short in duration and that is aimed at helping a person reduce or stop a problematic behavior
- **Motivational Interviewing (MI):** a communication method that is focused on the adolescent or young adult's concerns and perspectives and works to enhance their internal desire, willingness and ability to change by exploring and resolving co-existing and opposing feelings about changing

More about
this concept in
Webinar #3
in this series

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Brief Intervention

- If screening indicates substance use, brief, solution-focused motivational interventions can be very effective in helping the adolescent or young adult reduce or stop problematic substance use involvement.
- Multiple BIs may be more effective than a single BI.
- BIs usually immediately follow screening and a gap of a few days or a week may not dilute the effectiveness of the brief intervention, however, it is desirable to avoid delays.
- The likelihood that adolescents or young adults will not show for their next scheduled appointment is increased if the time interval between a screening and the BI is too great.

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Brief Intervention (cont.)

- BI usually includes feedback about the screening score generated from administering a validated standardized screening tool such as the CRAFFT+N 2.1, S2BI, BSTAD, or other tools.
- Poly-substance use among adolescents and young adults is common.

More about
this concept in
Webinar #1
in this series

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Brief Intervention (cont.)

- BI also typically includes discussions of these issues:
 - how the youth's level of use compares to national averages or to adolescents of the same gender or age group;
 - concerns about the potential effects of substance use during adolescence or young adulthood;
 - pros and cons of use;
 - negotiating goals, including a commitment to cut back or stop use; and
 - making a commitment to action.
- A BI can vary in length: it takes as little as one minute for someone at no or low risk; it can range from 5-30 minutes for those at moderate or high risk; or it can stretch to one or several full-length sessions for those at high-risk and when the youth is agreeable.

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Motivational Interviewing

- The skills necessary to provide effective BIs for adolescent substance use are not new.
- Some practitioners already know and use *Motivational Interviewing (MI)* skills in their work.
- The information in this webinar may simply organize and sharpen existing skills to help adolescents and young adults who use substances.
- For practitioners early in their professional development, the information may be new and will complement other course work or field experience received as part of your training.

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Why SBIRT with Youth?

- SBIRT for adolescent substance use is growing across a range of medical and behavioral health settings.
- The SBIRT model for adolescents is attractive.
 - efficient and cost-conscious approach
 - can be taught to a wide range of service providers
- SBIRT is particularly fitting for adolescents.
 - content can readily be organized around a developmental perspective
 - many substance-using teenagers do not need intensive, long-term treatment
 - client-centered, non-confrontational interviewing approach common to SBIRT is likely appealing to youth
 - endorses harm reduction

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Support for BI

- The BI component of SBIRT has been shown to be effective for adults in medical settings and the evidence for this model for youth is growing.
- A meta-analysis of 45 brief alcohol interventions (reported in 24 studies) for adolescents (age 11-18) and young adults (age 19-30) found that relative to no treatment or treatment as usual, brief alcohol interventions were associated with significant reductions in alcohol use and alcohol-related problems. These favorable results were also relatively consistent across the different therapeutic approaches, delivery sites, delivery formats, and intervention length.

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Support for BI (cont.)

- Other meta-analyses and one systematic review found small but significant effect sizes for substance use outcomes resulting from BI and MI.
- A randomized control trial found that a computerized screening and brief advice protocol reduced substance use at 3- and 12-months following intervention and prevented initiation among those who had not started using substances.
- A recent study found that approx. 3 years following the BI, positive effects were still present.

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USPSTF

- The U.S. Preventive Services Task Force (USPSTF) recommended that screening and brief intervention (SBI) be a routine practice for individuals aged 18 and older.
- The USPSTF's review determined that there are not enough *published* peer-reviewed literature about individuals younger than aged 18 to determine whether SBI should be recommended as routine practice.
- Nonetheless, the American Academy of Pediatrics and other professional medical associations and government agencies recommend incorporating SBI, and when possible a referral to treatment (RT) into routine care for adolescents.

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SBIRT Studies with Adolescents

Study	Results- conclusions	Reference
Meta-analysis	• Brief interventions reduced drug and alcohol use as well as problem and criminal behaviors related to substance use in adolescents	Carney & Myers, 2012
Meta-analysis	• Brief interventions to address alcohol misuse was associated with reduced alcohol use and presence of alcohol-related problems	Tanner-Smith & Lipsey, 2015
Meta-analysis	• School-based individually-delivered (but not group-delivered) brief alcohol interventions were associated with significant improvements in alcohol consumption among adolescents	Hennessy & Tanner-Smith, 2015
Literature review	• SBIRT may be effective with adolescents in acute care settings, but further study is needed particularly around intervention and implementation	Yuma-Guerrero, et al., 2012
School	• Brief intervention, without parent involvement, for adolescents experiencing mild to moderate substance abuse problems may have long-term efficacy	Abedi et al, 2019
Primary care computerized screening and brief advice	• Lower post-90-day alcohol use and any substance use at 3 and 12 months • 44% fewer adolescents who had not yet begun drinking had started drinking during the 12-month study period	Harris et al, 2002
Community health center	• Decrease in marijuana use • Lower perceived prevalence of marijuana use and fewer friends using marijuana	D'Amico et al, 2008
Emergency department	• Decrease in marijuana use and greater abstinence at 12 months	Bernstein et al, 2005

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SBIRT Studies with Individuals Age 18+

Study	Results- conclusions	Reference
Emergency department	<ul style="list-style-type: none"> Reduced DUI arrests 1 DUI arrest prevented for 9 screens 	Schermer et al, 2006
Meta-analysis	<ul style="list-style-type: none"> Adaptation of motivational interviewing reduced alcohol, drug use Positive social outcomes: substance-related work or academic impairment, physical symptoms (e.g., memory loss, injuries) or legal problems (e.g., driving under the influence) 	Burke et al, 2003
Meta-analysis	<ul style="list-style-type: none"> Brief alcohol intervention was effective in reducing alcohol consumption in primary care setting 	Bertholet et al, 2005
Meta-analysis	<ul style="list-style-type: none"> Single-session brief alcohol interventions reduced consumption among heavy drinking college students 	Sanson & Tanner-Smith, 2015
Meta-analysis	<ul style="list-style-type: none"> Behavioral counseling interventions improve behavioral outcomes (e.g., drinks per week, heavy use episodes) for adults with risky drinking 	O'Connor et al, 2018
Literature review	<ul style="list-style-type: none"> Interventions can provide effective public health approach to reducing tobacco and unhealthy alcohol use 	Goldstein et al, 2004
Meta-analysis	<ul style="list-style-type: none"> Brief interventions for alcohol use disorders generally found to be effective compared to control conditions and to extended treatment 	Moyer et al, 2002
Trauma center	<ul style="list-style-type: none"> 47% fewer re-injury (12 months) 48% less likely to re-hospitalize (36 months) 	Gentilello et al, 1999

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AUDIENCE POLLING QUESTION #1

Which of these concerns about brief intervention have you heard from health professionals in your organization? (select all that apply)

- "I do not have the time."*
- "I do not have counseling skills."*
- "It's a waste of time because most adolescents will resist/deny/be uncomfortable discussing their use."*
- "We are not equipped to handle adolescents with substance use."*
- None of the above*

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Often Voiced Concerns by Providers about a Brief Intervention

- "I do not have the time."***
 - Very brief versions exist.
- "I do not have counseling skills."***
 - BI is not heavy lifting; easy to learn; does not require formal training in behavioral counseling.
- "Waste of time because most adolescents will resist/deny/be uncomfortable discussing their use."***
 - For many teens, change is in the form of "green shoots."

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Often Voiced Concerns by Providers about a Brief Intervention (cont.)

- "We are not equipped to handle adolescents with substance use issues."***
 - The full SBIRT model provides guidance for this.
- "No support from administration."***
 - Hopefully not true.
- "What would I do if additional problems come to light?"***
 - The full SBIRT model provides guidance for this.

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Section 2

Brief Negotiated Interview (BNI)



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Brief Negotiated Interview

- This module presents the Brief Negotiated Interview (BNI) which is an example of an interviewing approach when implementing the BI model.
- The BNI was originally developed to be used in emergency departments. Its use has expanded into a wide range of medical and behavioral health settings.
- We present a version of BNI developed by the BNI-ART Institute at the Boston University School of Public Health.
- The BNI-ART Institute website (www.bu.edu/bniart) offers a number of supplemental resources in the public domain.

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Steps and Elements of the BNI

BNI Step	Elements
Engagement	<ul style="list-style-type: none"> • Build Rapport
Pros and Cons	<ul style="list-style-type: none"> • Explore pros and cons • Use reflective listening • Reinforce positives • Summarize
Feedback	<ul style="list-style-type: none"> • Ask permission • Provide information • Elicit response
Readiness Ruler	<ul style="list-style-type: none"> • Readiness scale • Reinforce positives • Envisioning change
Negotiate Action Plan	<ul style="list-style-type: none"> • Write down Action Plan • Envisioning the future • Exploring challenges • Drawing on past successes • Benefits of change
Summarize and Thank	<ul style="list-style-type: none"> • Reinforce resilience and resources • Provide handouts • Give action plan • Thank the patient • Schedule Follow Up

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Pocket Card

01 RAISE THE SUBJECT Build rapport: Explore how things are going. Ask permission: "Would it be ok to discuss your answers to the alcohol and drug questions?"

02 PROVIDE FEEDBACK

- Review reported responses. Reinforce positive choices: "It's great that you've chosen not to use alcohol or drugs at this stage of your life. What made you make that decision?"
- Provide feedback: "Alcohol/marijuana use can be especially harmful at this stage of your life when your brain is still developing..."
- Recommend abstinence: "Because I care about your well-being, the best choice is to completely avoid alcohol and drugs at this time in your life."
- Elicit response: "What do you think about this information?"

03 ENHANCE MOTIVATION

- Explore pros and cons: "What do you like about drinking/using marijuana?" "What are some of the not so good things about drinking/using marijuana?" Summarize both sides.
- Explore readiness to change: "On a scale where 0 is not at all ready and 10 is very ready, how ready are you to stop drinking/using marijuana?" Respond: "What made you choose a and not a lower number?"
- Reasons to change: "What are some of the best reasons you can think of to avoid alcohol/marijuana?"

04 NEGOTIATE AND ADVISE

- Reinforce autonomy: "What you choose to do is up to you." Elicit input from adolescent: "What next steps would you like to take?"
- Negotiate a goal.
- Harm reduction: Contract for Life (if "yes" to car question). Ask: "What steps could you take to reduce harms from alcohol or drug use?"
- Assist with developing a plan. Address co-occurring mental health and other issues.
- Arrange follow-up: depends on level of risk.
- Thank them.

This guide can be used for other risky behaviors, such as tobacco or illicit drug use. #SBIRT

OPTIONS FOR MORE HELP
Referral • www.colorado.gov/ladders

Original content developed with funding from SAMHSA and Colorado Office of Behavioral Health.

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BNI Step: Engagement

Elements:

- Build Rapport

Steps for a
Brief
Negotiated
Interview (BNI)

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Engagement: Build Rapport

- Building rapport with adolescents and young adults is vital to the brief intervention.
- First inform the adolescent or young adult that what is talked about will be confidential, except if mandated reporting is required.

"Our conversation will be confidential unless I find that you are at risk of harming yourself or another person or that you are being abused."

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Engagement: Build Rapport

- Then follow with a general conversation to get to know the adolescent which includes relatively benign (but still informative) topics. Start by getting to know the adolescent and ask questions.

"What is a typical day like for you? What's the most important thing in your life right now?"

- Then the topic can move to substance use. It is important to ask permission to talk about their use of substances.

"Would you mind taking a few minutes to talk about your [X] use? Where does your [X] use fit in your life right now?"

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Engagement: Build Rapport (cont.)

- Make sure to reinforce how important it is for the adolescent or young adult to feel like they can speak with you about their substance use and ask questions at any time.
- A good way to build rapport and to encourage open dialogue is to say something like:

"That's great, I'm really proud of you for talking about this."

- After spending some time building rapport, you may want to ask:

"Do you have any questions for me?"

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Engagement Sample Dialogue

"Before we start, I'd like to know a little more about you. Would you mind telling me a little bit about yourself?"

"What is a typical day like for you?"

"What do you like to do for fun?"

"What are the most important things in your life right now?"

"Tell me about when you first used alcohol. What was it like for you?"

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BNI Step: Pros and Cons

Elements:

- Explore pros and cons
- Use reflective listening
- Reinforce positives
- Summarize

Steps for a
Brief
Negotiated
Interview (BNI)

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Pros and Cons: Explore Pros and Cons

- Exploring the pros and cons specific to their substance use:
 - May help bring ambivalence out into the open.
 - Can help the practitioner understand why they are using a particular substance.
- Asking about "not so good things" about their substance use carries more weight when the adolescent hears their own voice talking and stating the negatives of substance use.
- Reflect back their response.

"I'm curious, what do you like about smoking marijuana?...So, it sounds like you feel relaxed and have less worries."

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Pros and Cons: Explore Pros and Cons (cont.)

- Substance use can be tied to social situations and understanding what they like and don't like about their use is important.

"I'm also curious if there is anything you don't like about vaping marijuana?..."

"What are the less desirable things about your use of [x], like getting into trouble with your mom or being late for class at school because of not feeling well..."

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Pros and Cons: Explore Pros and Cons (cont.)

PROS: "I'd like to understand more about your use of (X). What do you enjoy about (X)?"

CONS: "What is not as "good" about your use of (X)?" "What else?"

If NO con's: Explore problems mentioned during the screening. "You mentioned that... Can you tell me more about that situation?"

"So, on one hand you say you enjoy (X) because... And on the other hand, you say..."

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Pros and Cons: Use Reflective Listening

- Respond to the adolescent with a statement that guesses at (reflects) what the adolescent has said.
- It is especially important to use reflective listening after an adolescent responds to an open-ended question.
- Be wary of falling into the question-answer trap which can make the adolescent defensive.
- This skill demonstrates that you are listening and also provides an opportunity to clarify your understanding of what the adolescent has conveyed.

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Pros and Cons: Use Reflective Listening (cont.)

- Try to offer an average of one or two reflections per question.
- Reflective statements can vary from a simple repetition of what the adolescent has said to more complex reflections that attempt to continue with the adolescent's line of thought.
- If it feels like your conversation is repetitive and not progressing, your reflections are probably too simple.

More about this concept in Webinar #3 in this series

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Pros and Cons: Reinforce Positives

- Accentuate the adolescent's strengths.
- Notice and acknowledge the positive in the adolescent's intentions and actions.
- Affirming the adolescent helps with engagement and can increase openness.
- Ask the adolescent to describe his or her own strengths, successes, and good efforts.
- Affirmation is not equivalent to praise.

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Pros and Cons: Reinforce Positives (cont.)

- Avoid using the word “I” in phrases such as “I am proud of you,” which can come across as parental.
- Instead, say:

“Thank you for meeting with me and arriving early.”

“Even though your test didn’t go as well as you had hoped, you studied hard and even turned down a party in order to focus on your coursework.”

“Thank you for being so open and willing to discuss a difficult subject.”

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Pros and Cons: Summarize

- Summarize the pros and cons of change that the adolescent mentions and make sure to emphasize both sides equally.
- By doing so, the adolescent can understand the dilemma and make a decision while maintaining neutrality of the practitioner.
- Make sure to check with the adolescent as to the accuracy of the summary.

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Pros and Cons: Summarize (cont.)

- Start with something like:

“What I have heard so far is... So on the one hand you said <PROS>, and on the other hand <CONS>. Did I get that right? What are your thoughts about this?”

More about this concept in Webinar #3 in this series

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BNI Step: Feedback

Elements:

- Ask permission
- Provide educational information
- Elicit response

Steps for a Brief Negotiated Interview (BNI)

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Feedback: Ask Permission

- The next step in the BNI model is to give feedback.
- Prior to giving feedback, it is important that you always ask for permission to ensure that the individual is open to hearing some feedback.
- Asking permission helps build rapport too.

"Would you mind if I provided you with some feedback about your use of Vyvanse?"

"As your provider, I want you to know that I'm concerned about your use of hydrocodone. Would you mind if I shared some of my thoughts with you?"

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Feedback: Ask Permission (cont.)

- Another option is to focus on sharing guidelines instead of feedback specific to their drinking.

"I have some information on guidelines for drinking, would you mind if I shared them with you?"

"I have some information on low-risk guidelines for drinking, would you mind if I shared them with you?"

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Feedback Sample Dialogue

"We know that for adolescents drinking alcohol and using other substances such as marijuana, prescription and over-the-counter medications can put you at risk for problems in school, accidents, and injuries especially in combination with other drugs or medication. [Insert medical information.] It can also lead to problems with the law or with relationships in your life."

"What are your thoughts on that?"

"In what ways is this information relevant to you?"

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Feedback: Provide Educational Information

- Start by asking what they know about the substance(s) they are using. This demonstrates the desire to make the interaction a real conversation and sometimes uncovers beliefs that they may have about a particular substance.

"What do you know about [X]?"

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Feedback: Provide Educational Information

- The feedback step can also be used to share important educational information about the dangerous side effects or complications that can occur when they choose to drink, use other substances, or drive.

"When teens do drugs – things can go wrong, like injuring yourself..."

"When teens use any addictive substance while the brain is still developing can increase the chances that they will develop a serious substance use disorder in the future."

- Education about substance use should be given regardless of the quantity and frequency of use.

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Feedback: Provide Educational Information (cont.)

- While individuals over the age of 18 are considered legal adults, their brain, including the prefrontal cortex which is responsible for making decisions, is not fully developed until age 25.
- When the prefrontal cortex is not fully developed, adolescents or young adults may make riskier choices, which can be confounded by alcohol and other substance use.

"We know that substance use can put you at risk for illness and injury. It can also cause problems with parents or friends, and school problems such as missing class or doing poorly on a test or an assignment. What do you think about this?"

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Feedback: Provide Educational Information (cont.)

- Use the screening tool to give feedback about how the adolescent or young adult's alcohol or other substance use is putting them at risk for additional issues.
- Educating adolescents and young adults about their risks of health and other problems can help them decide to change.
- Focus on the social and family impacts that the substance use may be having on the individual rather than the physical long-term health effects that substance use may bring up.

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Feedback: Provide Educational Information (cont.)

Risks Associated with Adolescent Alcohol, Tobacco, and Other Substance Use	
Substance use increases the risk of:	
<ul style="list-style-type: none"> • Sexually transmitted diseases/infections • Unwanted pregnancies • Poor school performance • Violence • Falls 	<ul style="list-style-type: none"> • Depression • Suicide • Alcohol poisoning • Drug overdose
<ul style="list-style-type: none"> • Substance use has harmful effects on developing brains and bodies • Substance use is implicated in more than a third of driver fatalities resulting from automobile accidents • Substance use is implicated in about two-fifths of drownings • Substance use interferes with good judgment, leading into risky behavior and vulnerability to sexual coercion • Alcohol and tobacco use increase risk of using other substances • Substance use increases risk of developing behavioral problems, including fighting, stealing, and skipping school 	

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Feedback: Provide Educational Information (cont.)

- Provide normative feedback about how their substance use compares to others.
- Adolescents and young adults tend to think that their peers use more than they actually do.
- Practitioners should be sure to become familiar with prevalence rates and patterns of substance use in your area (substance use norms) so that you can provide this information during the BI and compare their use to that of their peers.
- Fact sheets are available at <http://sbirt.webs.com/fact-sheets>.

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Key Educational Materials

- NIDA For Teens



<https://teens.drugabuse.gov/teens/drug-facts>

- SAMHSA TIPS For Teens

<https://store.samhsa.gov/series/tips-teens>



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Feedback: Elicit Response

- Continuing a dialogue with the adolescent or young adult is very important.
- Continuing to ask simple, open-ended questions after you provide feedback is an easy way to elicit thoughts and feelings about your feedback.

"What are your thoughts on that?"

"How useful is this information?"

"What reactions do you have to the information I have just shared?"

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Feedback: Elicit Response (cont.)

- It is common for adolescents to be ambivalent, reluctant, or resistant to change.

- Do not ask: "Do you have any questions about what I have just shared?"

- The easiest answer for a resistant adolescent to this question is "No." It is more important to explore the feelings behind the thoughts.

- Ask more open-ended questions about feelings or reactions will make it easier to continue the conversation than asking about thoughts.

More about this concept in Webinar #3 in this series

"What, if anything, have we discussed that concerns or upsets you?"

"What thoughts or feelings do you have about the information we just discussed?"

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BNI Step: Readiness Ruler

Elements:

- Readiness scale
- Reinforce positives
- Envisioning change

Steps for a
Brief
Negotiated
Interview (BNI)

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Readiness Ruler: Readiness Scale

- Used to quantify the adolescent's or young adult's readiness to change.
- When introducing the readiness scale, first define what the scale is and how it is used.

"The Readiness Ruler is a simple 1-10 scale we use to determine your readiness to change your [X] behavior, with 1 being not ready at all and 10 being completely ready."

- The BI is then tailored to the individual's readiness.

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Pocket Card

How many times in the past year have you used tobacco, alcohol or marijuana?
Never, Once or twice, Monthly, Weekly or more

Potential consequences of alcohol and drug use:

- Brain
- Injury
- Legal issues
- Driving
- School
- Money
- Violence
- Pregnancy
- STI
- Sexually transmitted infections

How much is one drink?

Any Drink Containing About 14 Grams Of Alcohol
(100% proof = 200mg of pure alcohol; 150ml 100% proof)

- 12 fl oz beer
- 5 fl oz table wine
- 1.5 fl oz liquor (vodka, tequila, etc.)

Risk Levels

- Never/no use = No risk.
- Once or twice in past year = Low risk.
- Monthly use = Moderate risk.
- Weekly or more = High risk.

What is binge drinking?

	YEARS	DRINKS IN A SITTING
FEMALES	9-17	3
	18-24	4
MALES	9-13	3
	14-15	4
	16-17	5

Alcohol use is related to the most common causes of injury and death among adolescents.

HOW IMPORTANT IS IT TO YOU? | HOW READY ARE YOU? | HOW CONFIDENT ARE YOU?

NOT AT ALL 0 1 2 3 4 5 6 7 8 9 10 EXTREMELY

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Readiness Ruler: Reinforce Positives

- Regardless of the number chosen, it is **imperative** that you are positive and encouraging of whatever stage of change they are in.
- Especially for those who express a higher score on the Readiness Ruler, you could say:

"You marked [X]. That's great. That means you're [X]% ready to make a change."

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Readiness Ruler: Envisioning Change

- After reinforcing that any change is good change, follow up and investigate why a lower number was not chosen.

"Why did you choose that number and not a lower one like a '1' or '2'?" "What would it take for you to have chosen a higher number?"

- Asking for a lower number can encourage more "change talk" than asking for a higher number.

More about this concept in Webinar #3 in this series

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Readiness Ruler: Envisioning Change

- Starting with asking why not a higher number is likely to make the adolescent feel defensive, and lead to "sustain talk".
- "Sustain talk" - giving reasons not to change right now, talking against change.
- The more we help adolescents talk in favor of change - even if they are not ready to commit to change yet, the more it plants the seeds of change that may eventually result in change.

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Readiness Ruler: Envisioning Change

- When the adolescent chooses 0/1 suggesting they are not ready, use reflective listening, affirm autonomy, and elicit change talk by "looking forward".

"So, right now it is not at all important to you or you do not feel at all ready to make a change. It is your decision about whether or not to change. Looking ahead, how would you know if [X] was becoming a problem for you or preventing you from accomplishing the things that are important to you?"

- "Looking forward" can elicit likely outcomes in the adolescent's own words if they do not make a change and invite them to envision what change might look like.

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Readiness Ruler: Envisioning Change (cont.)

- This is a good step in the BNI process to discuss what peers may be doing and what the adolescent or young adult may be able to do.

"What some people your age decide to do is to stop drinking to see what it feels like." Or even "How do you feel about not taking oxycodone for two months?"

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Readiness Ruler Sample Dialogue

"To help me better understand how you feel about making a change in [X],
[show readiness ruler]..."

"To help me better understand how you feel about cutting back or not using
[X] at all, [show readiness ruler]..."

On a scale from 1-10, how ready are you to change any aspect related to
your use of [X]?"

"That's great! It means your
___% ready to make a change."

"Why did you choose that
number and not a lower one
like a 1 or a 2?"

"What would have to be different for
you to choose a higher number?"

"It sounds like you have
reasons to change."

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BNI Step: Negotiate Action Plan

Elements:

- Write down Action Plan
- Envisioning the future
- Exploring challenges
- Drawing on past successes
- Benefits of change

Steps for a
Brief
Negotiated
Interview (BNI)

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Negotiate Action Plan

- The next step in the BNI is to negotiate the action plan.
- This includes creating options and steps that the adolescent or young adult feels are realistic and obtainable.
- Ask the adolescent if they can think of ways to reduce their risk of substance-related problems, ways that make sense to them and that they could see themselves trying.

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AUDIENCE POLLING QUESTION #2

Which of these are good options for the adolescent while negotiating an action plan to reduce alcohol consumption? (select all that apply)

- Reducing alcohol intake by 1 drink per drinking session.
- Counting drinks consumed.
- A trial period of no marijuana use for a specified period of time.
- Alternating alcoholic beverages with non-alcoholic beverages.
- None of the above

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Negotiate Action Plan (cont.)

Some of the options the adolescent might suggest (or you could prompt) include:

- A trial period of no use for a specified period of time.
- Reducing alcohol intake by 1 drink per drinking session.
- Setting a limit on the number of substance-use days per week.
- Counting drinks.
- Not driving after any substance use.
- Avoiding triggers for excessive use, e.g., starting early at happy hours, engaging in drinking contests, playing beer pong, or going to a gathering where substances will likely be used.

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Negotiate Action Plan (cont.)

Some of the options the adolescent might suggest (or you could prompt) include (cont.):

- Participating in enjoyable activities that are alternatives to consuming substances.
- Eating while drinking so the alcohol is absorbed more slowly.
- Going for a walk or exercise when feeling stressed instead of vaping marijuana.
- Not giving in to social pressures to consume substances.
- Not using before or during school.
- Alternating alcoholic beverages with non-alcoholic beverages.

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Negotiate Action Plan (cont.)

- For adolescents whose substance use puts them in the moderate or high risk categories, simple advice to reconsider their use patterns, cutting back or abstaining from substance use can be **powerful**.
- Non-confrontational advice expressed with non-judgmental concern can motivate many people to change or rethink their use.

"Have you considered cutting back your drinking? Reducing your alcohol use could reduce your risk of problems, and cutting back could really help you concentrate on the issues that led you to come in today. I am concerned that your continued drinking at this level may make things worse. I think following the recommended drinking guidelines would help make things better. If you are not ready to change, you might consider doing one or more of these things..."

- keep track of how often and how much you are drinking.
- notice how drinking affects you.
- list pros and cons of changing your drinking.
- deal with things that may get in the way of changing.
- ask for support from your doctor, a friend or someone else you trust.

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Negotiate Action Plan: Write Down Action Plan

- Write down the steps and ideas you discussed with the adolescent or young adult.
- Have them write down their goals and next steps in their own words and handwriting.

"Those are great ideas! Is it okay for me to write down your plan, your own prescription for change, to keep with you as a reminder?"

72

Negotiate Action Plan: Envisioning the Future

- Focus on steps for the future.
- Be action orientated.

"How would you know if marijuana was becoming a problem for you down the road?"

"What do you think you can do to stay healthy and safe?"

"What will help you to reduce the things you don't like about using [x]?"

"Who can help or support you with this goal?"

- Include some immediate steps to help the adolescent or young adult achieve their goals.

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Negotiate Action Plan: Exploring Challenges and Drawing on Past Successes

- Identifying challenges that the adolescent or young adult have already faced can help to both build confidence and to come up with contingency plans in case those situations may arise again.

"What are some of the challenges to reaching your goal of [x]?"

"What situations may be difficult for you to maintain the goal of [x]?"

"How can you address these challenges?"

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Negotiate Action Plan: Exploring Challenges and Drawing on Past Successes (cont.)

- Past successes in dealing with challenges may reinforce new challenges.

"Tell me about a time when you overcame challenges in the past. What kinds of resources did you call upon then? Which of those are available to you now?"

- If the adolescent or young adult does not come up with any challenges, you can inquire about challenges in other aspects of their life and how they overcame those challenges, e.g.,

*"What have you planned/done in the past that you felt proud of?"
"What challenges do you face?" "Who/what has helped you overcome these challenges and succeed? How can you use that (person/method) again to help you with that challenges of changing now?"*

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Negotiate Action Plan: Exploring Challenges and Drawing on Past Successes (cont.)

- Make sure to ask the adolescent or young adult:

"What things would make it easier for you to not vape THC?"

"Is there anybody in your life who could support you in not drinking?"

76

Negotiate Action Plan: Benefits of Change

- Start by asking the adolescent to identify the possible benefits of change.

"If you make these changes, how would things be better?"

- Remind the adolescent or young adult about all of the benefits of changing their behavior, regardless of their individual action plan.

"How will some of the 'cons' you noted be reduced or eliminated?" "What will be the signs of change that you, your family or friends might notice?"

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Negotiate Action Plan Sample Dialogue

"What are you willing to do for now to be healthy and safe? ...What else?"

*(If more than one goal is identified):
"What is the most important goal?"*

"What are some challenges to reaching your goal?"

"Who could support you with this goal?"

"How does this change fit with where you see yourself in a year? In 5 years?"

"If you make these changes, how would things be better now? In 5 years?"

78

BNI Step: Summarize and Thank

Elements:

- Summarize action plan
- Reinforce resilience and resources
- Provide handouts
- Give action plan
- Thank the patient

Steps for a
Brief
Negotiated
Interview (BNI)

79

Summarize and Thank

- End each brief intervention:
 - Summarize and review what was discussed.
 - Go over the action plan.
 - Ensure that all questions have been answered.
- Reinforce resilience:
 - Summarize the discussion.
 - Focus on the adolescent's strengths.
 - Their interest in problem solving.
 - Their openness to engage in a difficult discussion.

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Summarize and Thank: Summarize Action Plan

- Some helpful steps include:

"Will you summarize the steps you will take to change your [X] use?"

"Let's summarize the steps you will take to change your [X] use?" "I've written down your plan, a prescription for change, to keep with you as a reminder." "Do we have this correct?"

"And we talked about possible challenges and way to address them."

- Also, hand the adolescent a copy of the finalized Action Plan.

"Here's the action plan we discussed with your goals. This is really an agreement between you and yourself."

81

Summarize and Thank: Reinforce Resilience and Resources

- At the end of the BI, reinforce resilience and remind the adolescent or young adult of the resources they have available while making this change.
- These resources may include further assessment, intensive substance use treatment, mental health treatment, or self-help groups, among others.
- Become familiar with each type of resource so you can discuss what options are available.
- Focus on the adolescent's strengths for making this change.

Which of these services interest you at this point?

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Summarize and Thank: Provide Handouts

- Provide handouts or additional information on outpatient counseling, self-help groups (e.g., Alcoholics Anonymous, Narcotics Anonymous, SMART Recovery), primary care or mental health providers.
- Providing a piece of paper with a list of referral sources is often inadequate. Instead conduct a *warm hand-off* and immediately link the adolescent to the referral source.

More about this concept in Webinar #4 in this series

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Summarize and Thank: Provide Handouts (cont.)

- Set follow-up appointment to check in with the adolescent at a later date.
- Follow-up by phone or other technology (e.g., text message, patient portal or smartphone app).
- After reviewing referral options, you might ask:

"Which of these services interest you at this point?"

More about this concept in Webinar #4 in this series

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Summarize and Thank: Give an Action Plan

- One of the final steps of the BNI is to hand the adolescent or young adult a copy of the finalized Action Plan.

"Here's the action plan we discussed along with your goal. This is really an agreement between you and yourself."

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Summarize and Thank: Thank the Adolescent

- Finally, thank the adolescent or young adult for taking the time to speak about this important topic.
- If applicable, notify the adolescent that they can use you as a resource that they can feel free to contact in the future.
- The offer of follow-up is often seen as an offer of continued support.

"Thanks so much for sharing with me today! I would like to follow up with you in a few weeks and check in on your progress towards reaching your goals."

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Summarize and Thank Sample Dialogue

"Let me summarize what we've been discussing, and you let me know if there's anything you want to add or change..." [Review action plan.]

[Present list of resources, if more services are warranted]: "Which of these services, if any, are you interested in?"

"Here's the action plan that we discussed, along with your goals. This is really an agreement between you and yourself."

"Thanks so much for sharing with me today! I would like to follow up with you in a few weeks and check in on your progress towards reaching your goals."

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Brief Intervention Observation Sheets

- Brief Intervention Observation Sheets (BIOS) can be used by the observer to assess use of brief intervention using key motivational interviewing skills throughout a role play.
- The observer listens for examples of each element of the brief intervention and places a check mark in the appropriate box.
- The observer also rates specific skills. The information recorded by the observer is used to provide helpful feedback following the role play or during simulated exercises.

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BNI-ART Institute: Youth Brief Intervention and Referral Interview Scoring Sheet

BNI-ART Institute Youth Brief Intervention and Referral Interview Scoring Sheet		Y	N
CRITERIA	Interviewer Initials	Y	N
Engagement			
<ul style="list-style-type: none"> ask permission for self about alcohol/drugs ask about a day in the person's life ask how drinking and marijuana fits in with life ask about current values, what's important to them 			
Developmental Balance: Power and Care of alcohol/drug use			
<ul style="list-style-type: none"> ask how good things about alcohol/drug use share open, accurate answers ask up and relate in person's own words (reflective listening) 			
Feedback			
<ul style="list-style-type: none"> ask permission to share information TAAs, guidelines or other information share response from patient 			
Readiness Meter			
<ul style="list-style-type: none"> ask general readiness to change question (y/n) ask why not last? articulate reasons for changing 			
Negotiate Action Plan			
<ul style="list-style-type: none"> ask open-ended questions for change from ask about future goals (contingency) & how change fits in ask about readiness to change ask about past success <ul style="list-style-type: none"> what did you do? what other helped them (social support) contingencies/benefits that helped explain benefits of change? 			
Initiation & Track (Reflections)			
<ul style="list-style-type: none"> initiation action plan offer feedback <ul style="list-style-type: none"> to primary care to address those treatment of necessary to provide health education or peer prevention problems are mentioned reviewer asks address to physician for change offer feedback to change to patient Thank patient 			
Final "You" check of patient, Maximum score = 100 points			
Overall Performance Feedback, 200 points = 0-2 points = 1 point = 0-4			
FINAL SCORE (TOTAL)			

Language appropriate	Not appropriate	Appropriate	Comments/Examiner
	0 1 2 3 4 5	0 1 2 3 4 5	
Open Questions	More Closed	More Open	
	0 1 2 3 4 5	0 1 2 3 4 5	
Reflective listening	Not reflective	Reflective	
	0 1 2 3 4 5	0 1 2 3 4 5	
Percent of talking by patient (compared to interviewer) (Y/N)			
(Y)	0% 10% 20% 30% 40%	50%	
Impact	Disruptive/Off	Respectful	
	0 1 2 3 4 5	0 1 2 3 4 5	
Negotiation/Choice	One-sided Agenda	Shared Agenda	
	0 1 2 3 4 5	0 1 2 3 4 5	
Affirmations	Not Encouraging	Encouraging self-change	
	0 1 2 3 4 5	0 1 2 3 4 5	
Knowledge of techniques/ cues		High	
	0 1 2 3 4 5	0 1 2 3 4 5	
Attending for attention and duration of session before ending in	Not patient	Links alcohol effectively	
	0 1 2 3 4 5	0 1 2 3 4 5	
Listening for cues	Misses opportunities	Uses opportunities	
	0 1 2 3 4 5	0 1 2 3 4 5	

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Let's Give It a Try!

A 16-year-old high school junior, was arrested for vandalism of school property when they were caught spray painting graffiti after school. Because this was their first offense, they were instructed to participate in a school-based diversion program for one year.



During their first session in the program, they met with the practitioner who conducted a risk assessment to identify any behavioral health issues and to connect them to appropriate services. The practitioner conducted a screening using the CRAFFT+N 2.1 questions and the adolescent scored positive, indicating the need for further intervention.

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Thank You!



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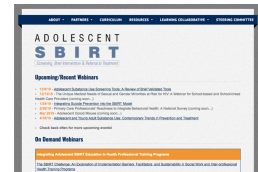
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In Our Last Few Moments...

- PowerPoint Slides
- Materials and Resources
- On Demand Access 24/7
- Certificate of Attendance
- Evaluation Survey



sbirt.webs.com/brief-intervention-part-one

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SBIRT Technical Assistance

Do you have questions about SBIRT implementation, evaluation, or training?

Schedule a free telephonic Technical Assistance session with Tracy McPherson, SBIRT Training, Technical Assistance, and Evaluation Lead.



Email Dr. McPherson at mcperson-tracy@norc.org

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Thank You for Attending!

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Screening, Brief Intervention & Referral to Treatment



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