What is IBA - and does it really work?

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What is IBA?

- IBA = ‘Identification and Brief Advice’
- IBA is a ‘brief intervention’ – a short interaction between a practitioner and a client aimed at motivating them to reduce their drinking to lower risk levels
- Sometimes known as ‘Screening and Brief Intervention’ (SBI)
What is IBA?

- **Identification:** using a validated screening tool* to identify ‘risky’ drinking

*I usually ask some questions * about alcohol use here. Are you be OK to go through some now?

*E.g. the Alcohol Use Disorders Identification Test (ADUIT)
What is IBA?

• **Brief Advice:** Feedback on the client’s score (if at risk), followed by offer of structured brief advice

  “Your answers indicate you are drinking at a level that could be harmful to your health.. How do you feel about that?”

Really…? ...How do you mean? OK, well…
Brief advice

• Explaining units/guidelines
• Giving feedback (risk level)
• Offering information/advice*
• Establishing goals or strategies to cut down
• Empathy & encouragement!

*N.B: Practitioners should in fact be careful when offering advice – people respond best when they are encouraged to come up with their own reasons and ways to cut down
Who is it for?

IBA is intended for:

- ‘Increasing’ or ‘higher risk’ drinkers identified by screening tool (i.e. not guessed)

IBA is NOT intended for

- Dependent drinkers
  - Should be offered a referral to local alcohol treatment services
What its NOT

IBA is NOT:

• Pushing or telling someone
• Really about ‘advising’ too much – people respond best when they have been able to decide what they want to do themselves

But IBA IS:

• Offered to someone who is willing to discuss their alcohol use
• Non-judgmental and non-labeling
Who should deliver IBA?

- Anyone who has a suitable opportunity:
  - Ideally a 1-2-1 environment
  - Enough time for a short discussion (5-10 minutes)
  - Can offer ‘brief advice’, referral or appropriate information / materials

- You can help people make a positive change!
That’s nice… but does it really work?
A few of the many studies

- IBA (i.e alcohol brief interventions) has a 30+ year international evidence base
- Brief advice can reduce weekly drinking by between 13% and 34%  
  (Whitlock et al, 2004)
- Risky drinkers who receive brief advice are twice as likely to moderate their drinking 6 to 12 months after an intervention  
  (Wilk et al, 1997).
- Over 56 RCT studies showing effectiveness, and now SIPS…
results

• £4 million DH funded study into brief interventions across Primary Care, A&E, Probation

• Tested different levels of ‘brief intervention’:
  – Identification + feedback & leaflet
  – Identification + feedback & leaflet + Brief Advice (i.e IBA)
  – Identification + feedback & leaflet + BA & 20 mins counselling

• All brief intervention approaches worked, but often not a significant difference in cost-benefit

• However some settings for different risk levels may be worth extra/lifestyle approaches

• BUT Identification and feedback + leaflet is key

• Findings summaries at www.sips.iop.kcl.ac.uk
Not everyone drinks the same?

Feedback:
Many at-risk drinkers believe most people drink the same as them, as many of their friends will be likely to drink the same.
Stages of Change model
(Adopted from Prochaska and DiClemente)
But it won’t work for everyone

- Some researchers cite the Number Needed to Treat (NNT) is 1 in 8
- That means 1 in 8 risky drinkers who receive IBA will reduce to lower risk levels
- However, some others may reduce their use, just not to a lower risk level or not straight away
- 1 in 8 may be an underestimate, as may ‘sow the seed’ for later change*
- Even so, 1 in 8 is cost-effective and compares favorably with smoking interventions (1 in 20)

*Anderson P. et al 2005
IBA is needed!

- ‘Prevention is better than cure’
- IBA is a real chance to prevent serious alcohol problems developing
Thank you!

www.alcoholpolicy.net - news and analysis
www.alcoholiba.com - IBA news and links

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