IBA in non health settings

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Workshop: Alcohol brief intervention: where next for IBA?
The Alcohol Academy, Birmingham, 20 April 2015
Alcohol IBA in non-health settings

We are currently conducting two studies:

1. Exploring training and delivery of alcohol IBA in non-health settings funded by Alcohol Research UK

2. Study on feasibility of delivering alcohol IBA in housing settings funded by Public Health England England
Broadening the base: key findings

• Good evidence of the effectiveness of IBA in primary care, and to a certain extent in hospital emergency departments.

• Many of the skills needed are transferrable to other delivery contexts.

• Strong desire to broaden the reach of IBA beyond health settings, but the evidence base for effectiveness is not currently established.

• Training staff, on its own, does not guarantee delivery of IBA.

• Financial incentives may increase delivery but it is unclear how much the incentive needs to be to have an effect.
Broadening the base: key findings

• In probation, pharmacies, and in schools and universities, delivery of alcohol IBA is feasible and there is some evidence of effectiveness:
  — Staff in these settings may need to be convinced of the value of IBA and need to be supported to optimise implementation of IBA into their usual practice.

• The workplace is a promising context for IBA delivery with potential benefits for both employees and employers:
  — Employers are likely to need incentives and to be convinced of the business case for supporting staff to take on IBA.
  — Integrating IBA into a wider workplace health and wellbeing strategy and ensuring confidentiality may encourage its acceptance.

• Online IBA models have potential to reach individuals who may not access health or support services.
Key findings from literature review and scoping

• Barriers to implementation and sustainability of alcohol IBA include:
  — lack of strategic and organisational commitment
  — professional lack of role adequacy and role legitimacy
  — lack of knowledge and skills
  — workload pressure
  — lack of time and resources
  — perceived lack of support.

Now want to draw on your experiences and knowledge…
Question 1

• What are the challenges and barriers to broadening the contexts in which alcohol IBA is delivered? How can these challenges be addressed?
Question 2

• From your experience, when delivery in non-health contexts is being considered what are the reasons/rationale underpinning those decisions?
Question 3

- What steps need to be taken to promote a culture of learning from practice?
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From Alcohol Research UK study:


Thank you

Please get in touch if you would like to know more about these studies and/or the work of the Drug and Alcohol Research Centre

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