

INEBRIA 2010 – GOTHENBURG, SWEDEN

SYMPOSIUM 3C:
Methodological Aspects of BI Studies

Brief Interventions in the routine of Primary Health Centers in Brazil: results of a phone survey

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Objective

- To evaluate the strength of the implementation of SBI in the routine of former trained PHC health professionals actually working in public health centers.

Chronology

- 1999 – Grounding of PAI-PAD
- 2000 – First SBIRT training for PHC health professionals
- 2002 – Alicante, Spain – WHO Meeting
- 2003 to 2004 – Sponsorship by WHO
 - EDIBS 1 – 1st phase
- 2006 – Sponsorship by São Paulo State Dept. of Health –
 - EDIBS 2 – 2nd Phase
- 2007 – Sponsorship by FAPESP – Evaluation Project, comparative, two health departments in the State of São Paulo: Ribeirão Preto x Taubaté

Backgrounds

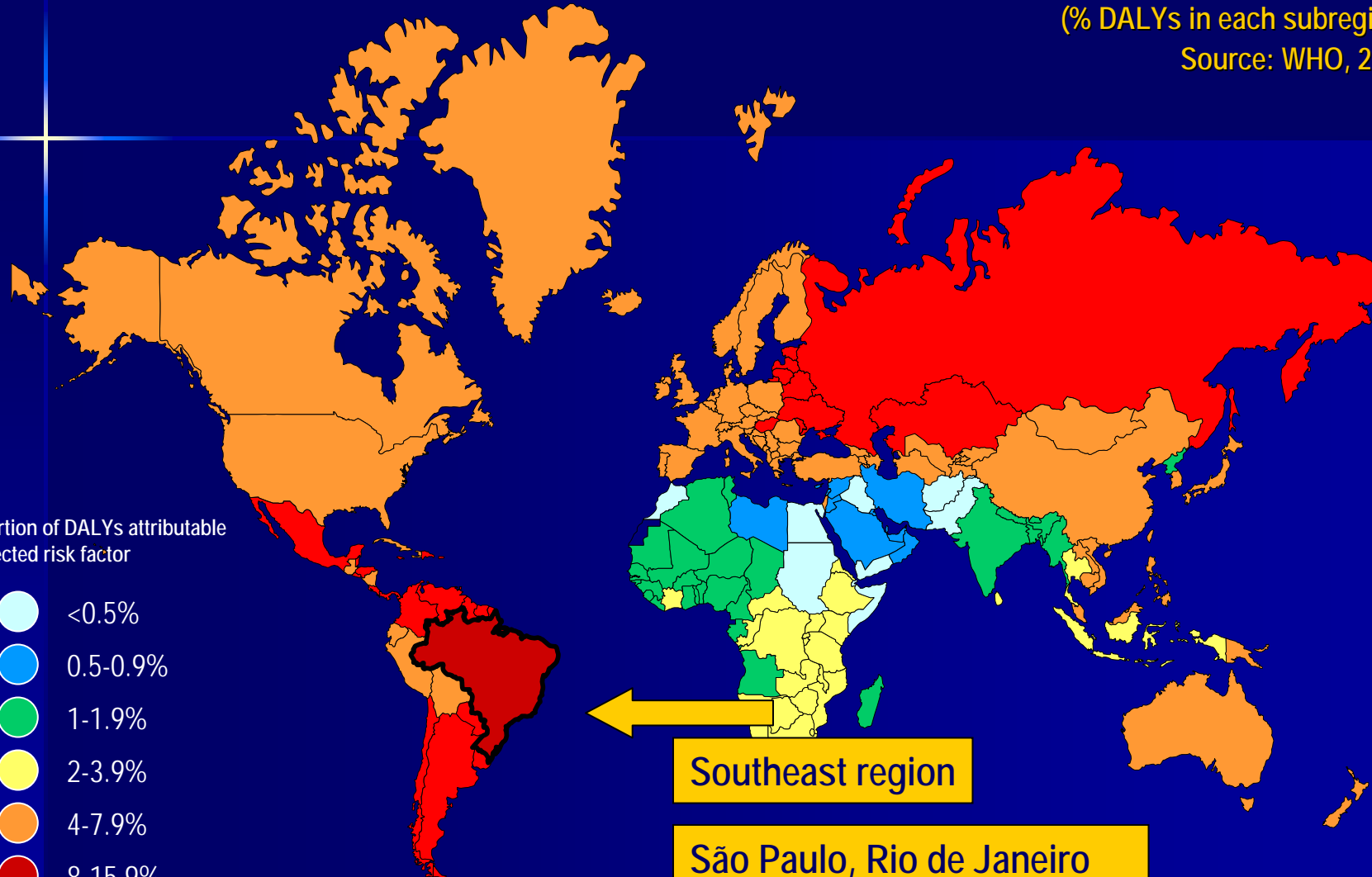
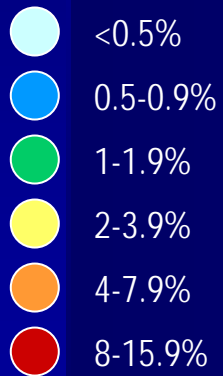
*Alcohol problems in the region of
Ribeirão Preto, Brazil*

Burden of disease attributable to addictive substances related risks: ALCOHOL

(% DALYs in each subregion)

Source: WHO, 2003

Proportion of DALYs attributable to selected risk factor



Southeast region

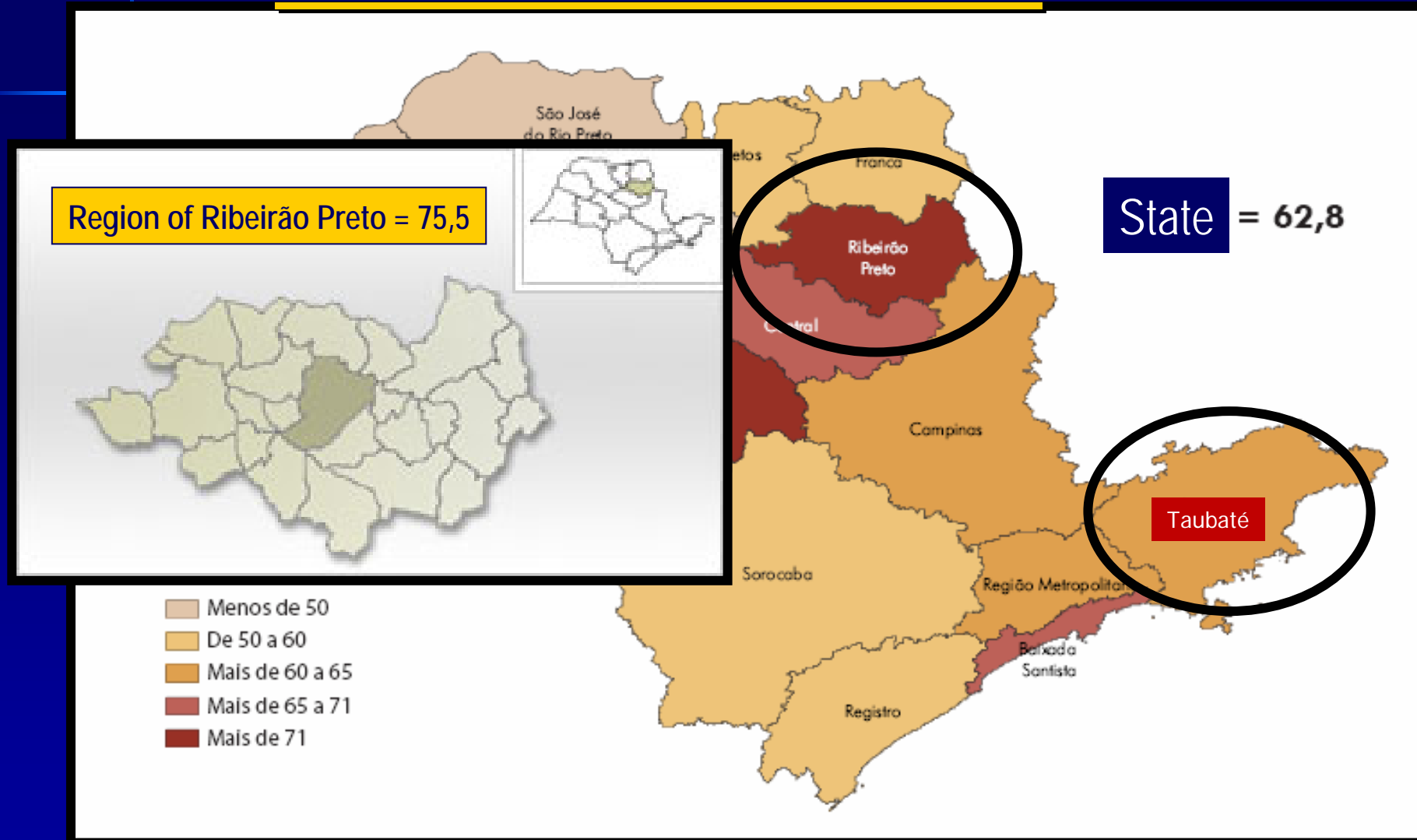
São Paulo, Rio de Janeiro
Minas Gerais, Espírito Santo

EF

Traffic Accidents

- Over 50% of necropsies showing BAC levels above the legal limit (0,6g/L) in Ribeirão Preto in victims of car crash accidents
 - De Paula (2004)
- Truck drivers – 51% alcohol abusers according with AUDIT screening on the highway routes in the region of Ribeirão Preto
 - Domingos & Pillon (2007)

Liver disease – Males (Cases / 100.000)



Developments

PAI-PAD Implementation Program

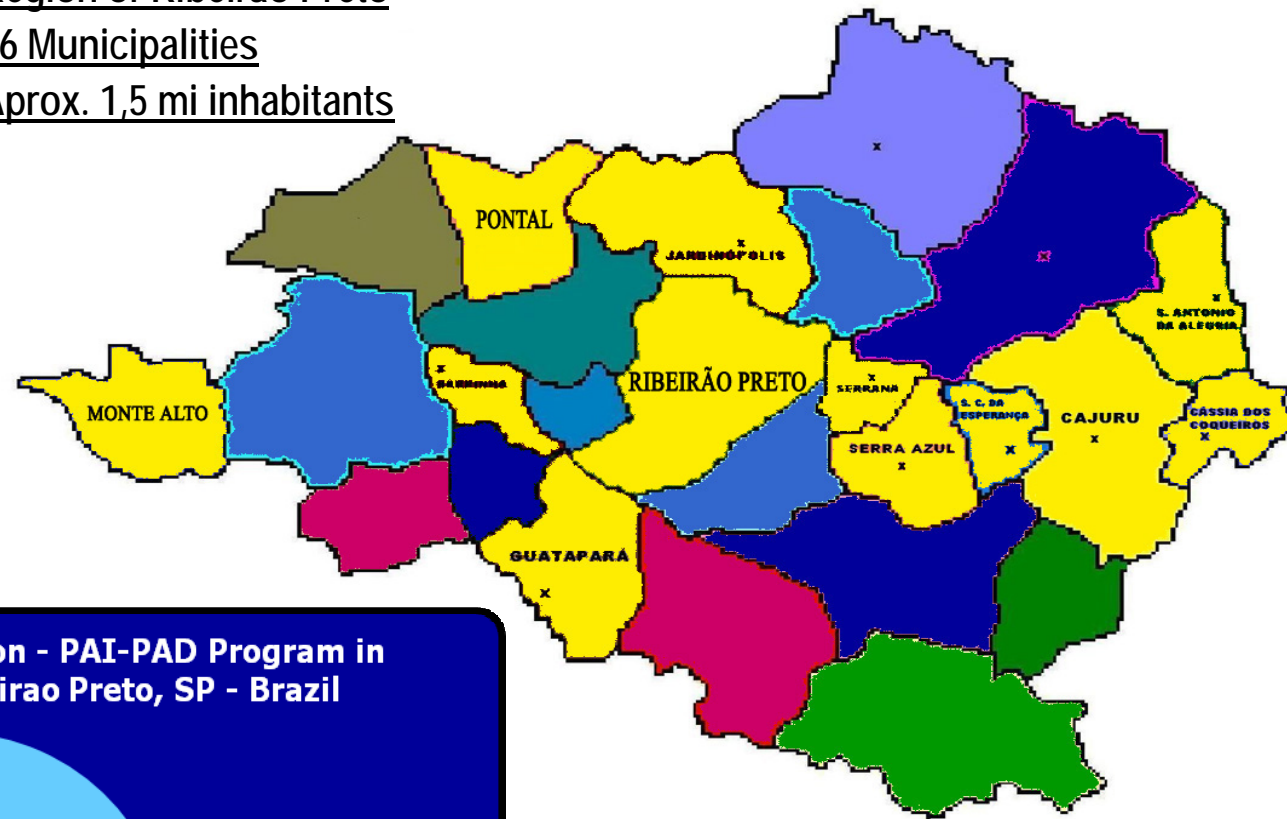


- Partnership and sponsorship from the State Health Department ⇒ *Obtaining formal legitimacy and authority for leadership*
- Building a network of representatives of the Health Departments of the enrolled municipalities
- Training modules for PHC health professionals of the public health system
- Supervision, monitoring and process evaluation

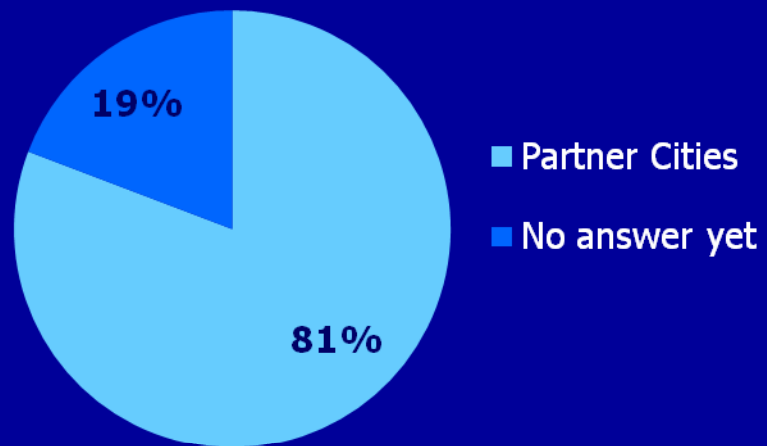
Region of Ribeirão Preto

26 Municipalities

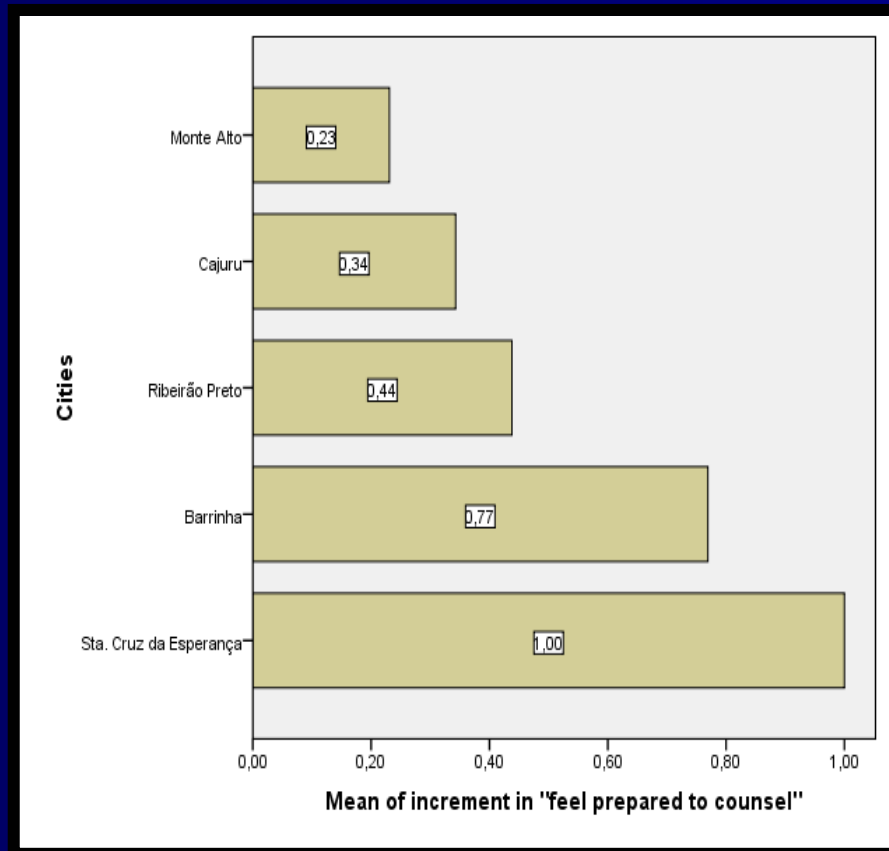
Aprox. 1,5 mi inhabitants



SBIRT Implementation - PAI-PAD Program in the Region of Ribeirão Preto, SP - Brazil



Differences between cities



- Small cities showed higher improvement than larger cities
- This can be explained by the higher proportion of community health agents in the small cities

Summary



- 77 Cities
- 03 States
- 2000 health professionals from public health services, directly trained and supervised
- Evaluation by three ways: questionnaires, focal groups and phone survey

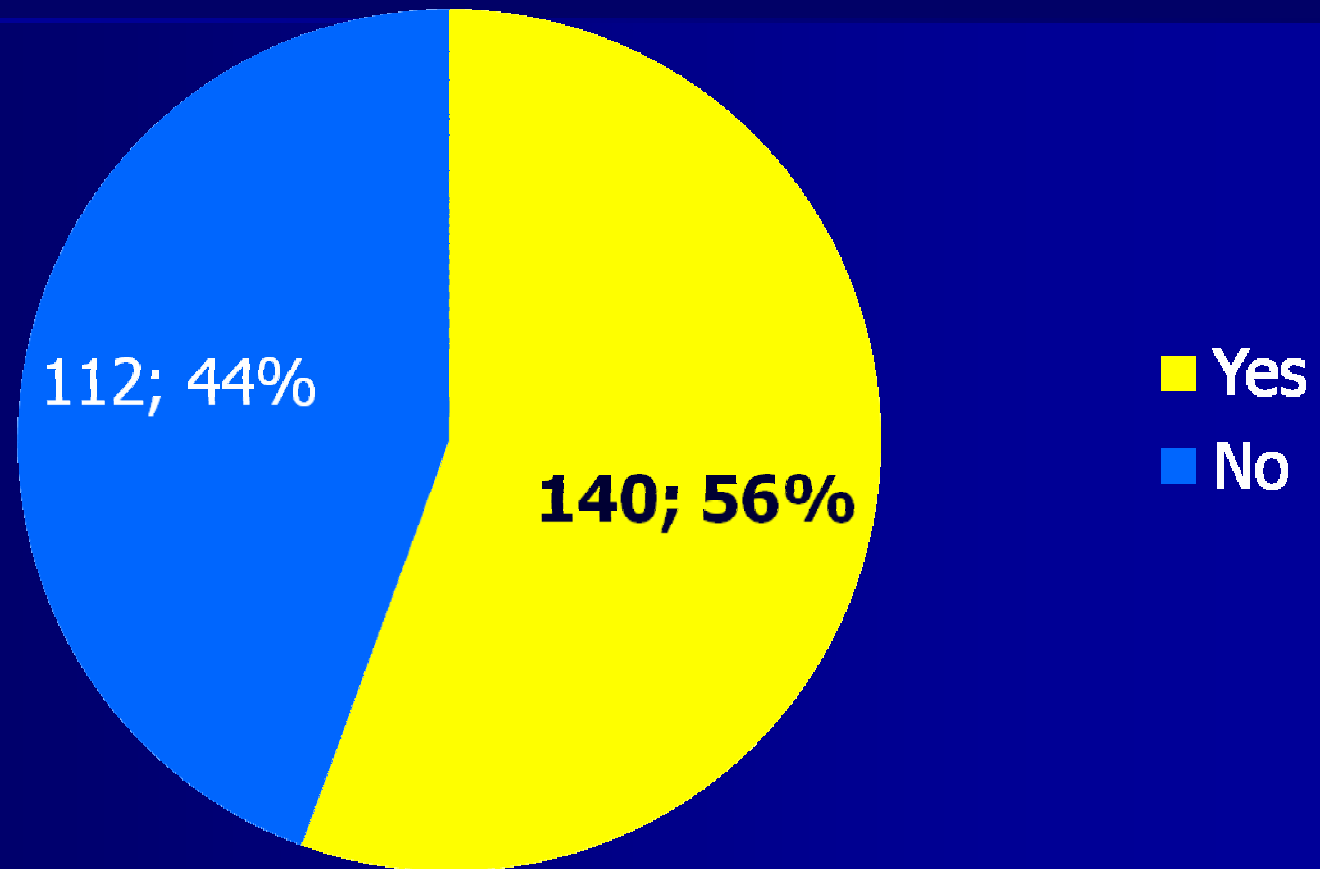
Phone Survey

- Start in 2010
- Three times per year (each 04 months)
- First wave included only health professionals from the region of Ribeirao Preto that have been trained in the 2nd phase, since 2006 (N = 678/1307, 52%)

Sample

- Population of trained health professionals in the region of Ribeirão Preto [EDIBS 2] = 678
- Respondents = 252 (37%)
- Refused = 17 (0.3%)
- Not more in service = 116 (17%)
- Not found after three trials = 291 (43%)

Doing BI in the last three months?



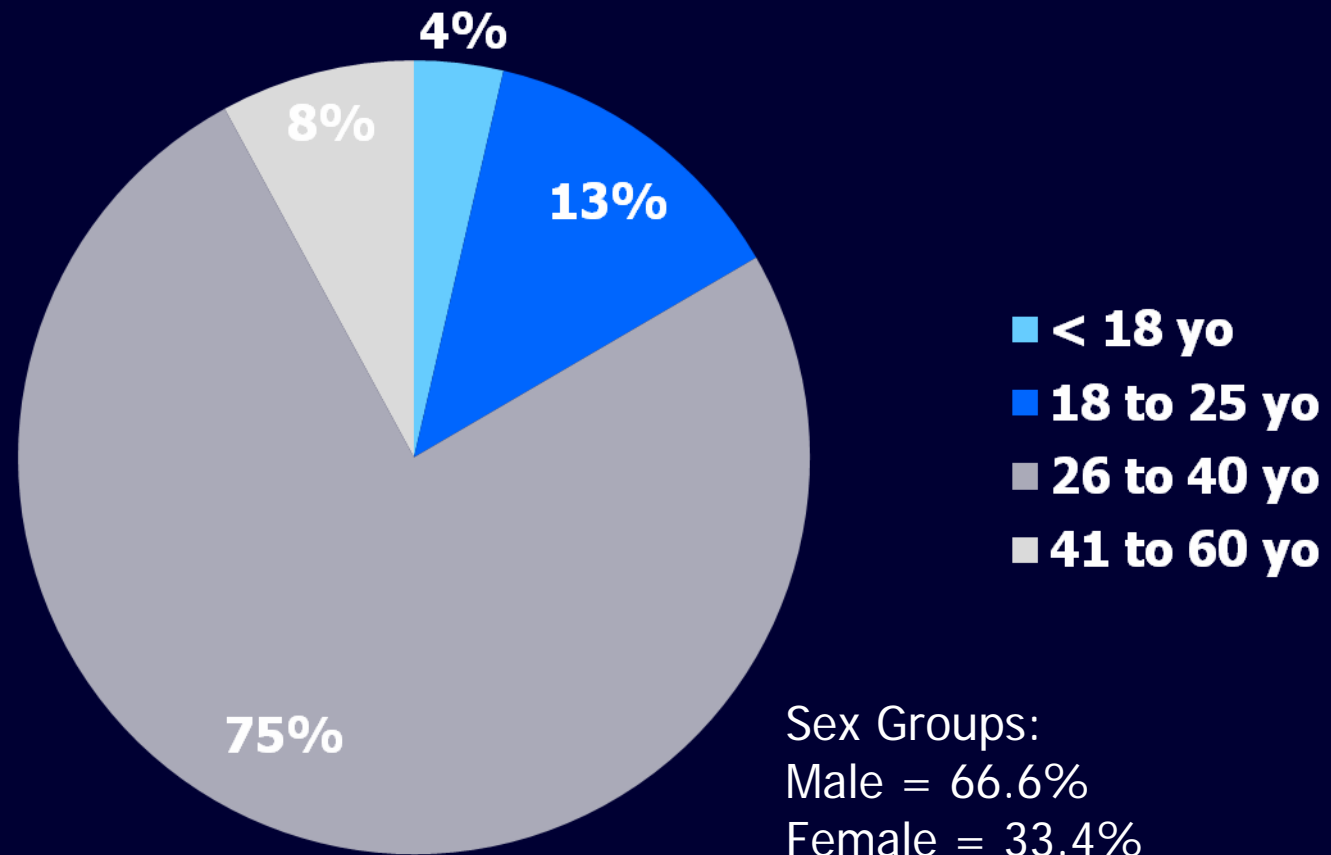
Health Professional Categories

Health professionals characterization	N	%
Community health agent	86	61,43
Nurse assistant	13	9,29
Social worker	3	2,14
Dentist	4	2,86
Nurse	14	10
Medical doctor	7	5
Psychologist	7	5
Occupational therapist	2	1,43
Administrative staff	4	2,86
Total	140	100

- Ribeirão Preto: 54.3%
- Other cities: 45.7%

	N.	%
AUDIT screening only	1589	15,24
Basic counseling (Risk zone 2)	5918	56,77
Counseling/Advice (Risk zone 3)	3682	35,32
Referrals (Risk zone 4)	410	3,93
Total of patients	10424	100
Pregnant women (AUDIT screening)	144	

AUDIT Screening by Age Group



Informed Results by Monitoring

- Number of patients under "monitoring": N = 639
- % of drinking pattern reduction:
 - 64% (408/639)
- % of abstinence in the period:
 - 15% (95/639)
- No response:
 - 21% (136/639)

Referral for Treatment

	N.	%
Denial of treatment	306	16,51
Treatment interruption	641	34,59
Continuing treatment	267	14,41
Remain by monitoring (waiting list)	639	34,48
Total of treatment referrals	1853	100

Obs.: Total of referrals following AUDIT screening and without AUDIT

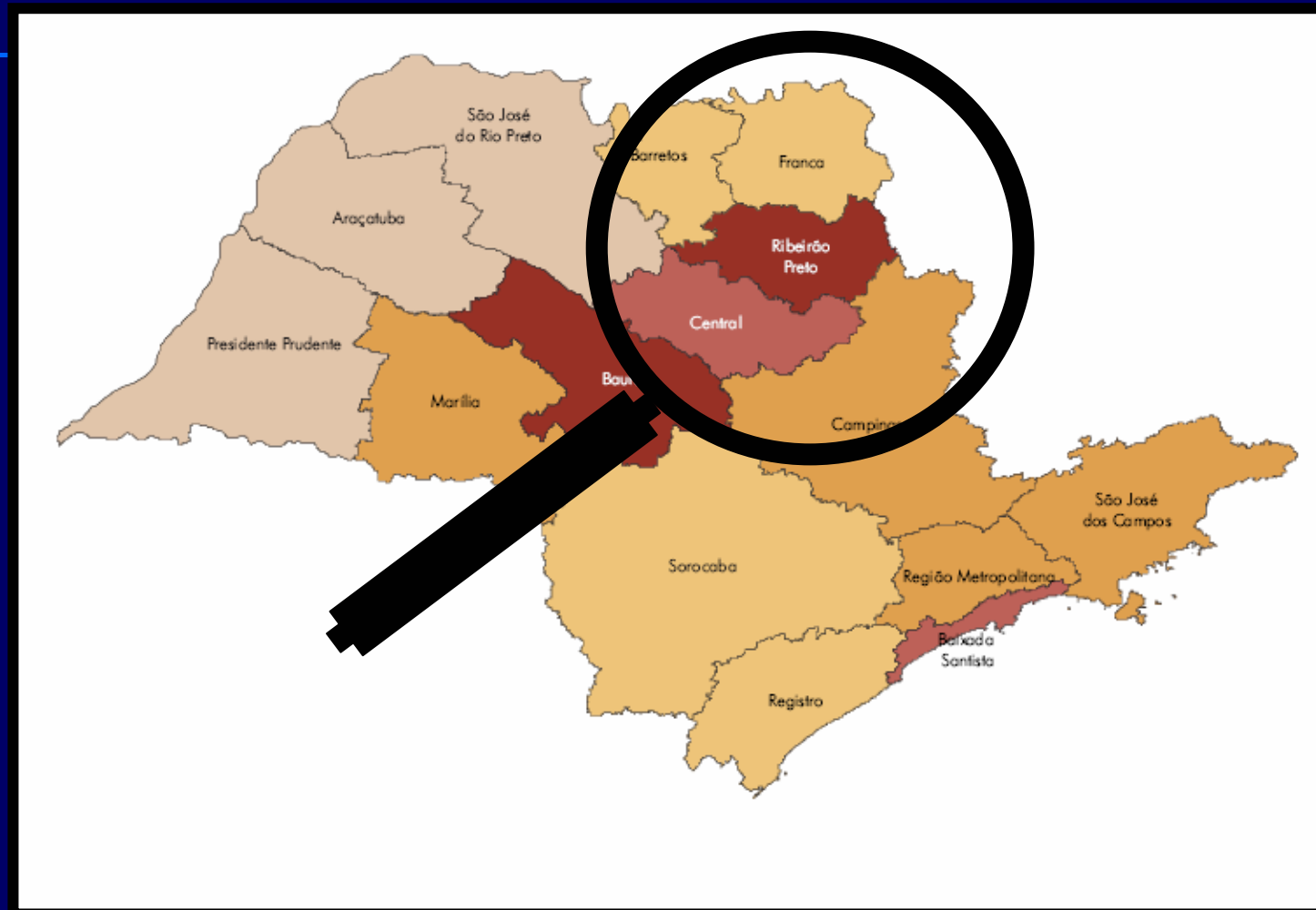
Implementation Process

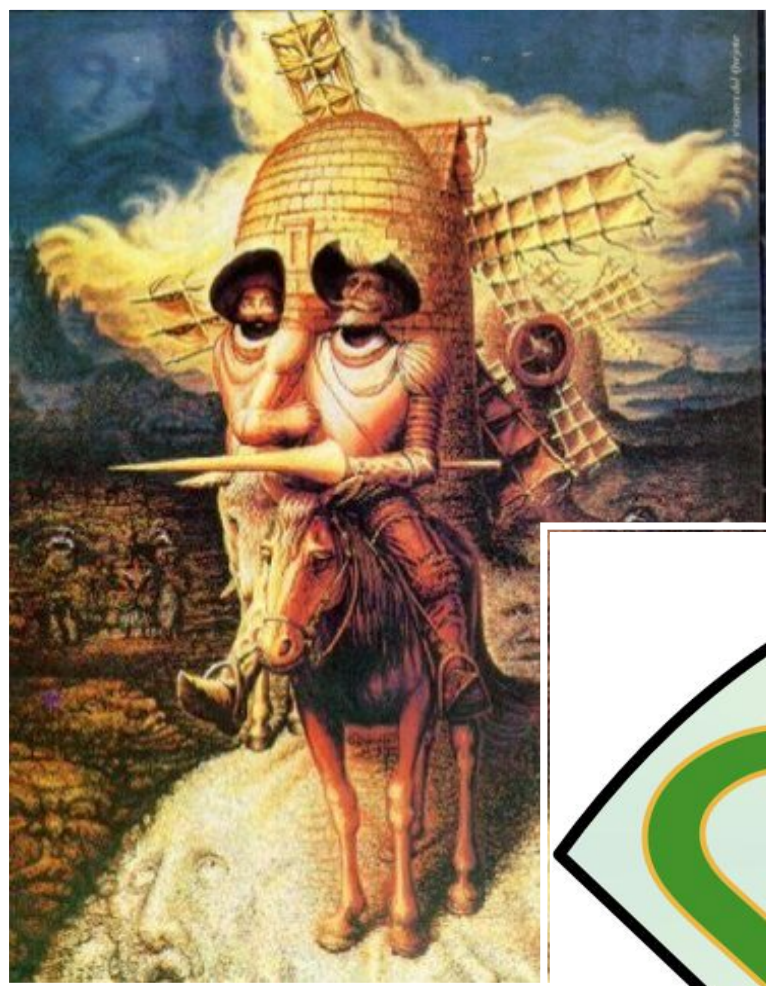
Indirect Results



- Annual prevention campaigns for alcohol abuse contribute to reducing of general social tolerance to alcohol abuse
- Need of continuing assessment

Expansion of the geographical implementation





Thanks to:
FAPESP, WHO, PAHO, Medical School of
Ribeirão Preto – USP, Health Department
of the State of São Paulo, National Mental
Health Coordination of the Ministry of
Health & PAI-PAD team and the many
health professionals of the Public Health
System of the Ribeirão Preto Region in
the State of São Paulo.

