Patient Interviewing Strategies to Destigmatize Substance Use Disorders

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Discuss communication methods that destigmatize substance use

Explore screening and interview strategies that address substance use

Discuss referral and treatment options

Effect of Language

Healthcare provider language has a direct effect on the patient and interaction

All substance use is stigmatized Much of it heavily

A common part of the substance use experience is the need to "protect" information

Substance use is one of America's top preventable health issues

Language Choice and Stigma

Feeling stigmatized:

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- Causes people to hide their use
- Reduce the willingness of people to seek help
- Leaves many to "figure it out" on their own
- Stigmatizing views of substance use is common:
 - Can lead others to feel pity, fear, anger, frustration, and a desire for social distance or reasons for exclusion from services
- Stigmatizing language negatively influences health care provider perceptions of people with SUD
 - Which does impact the care they provide

Interviewing Steps Start with something like: Would it be okay to ask you a few questions about substance use? Can I ask you about alcohol and drug use?

Then ask your questions – many providers shy away from this topic

- Due to it being "personal" or "sensitive"
- All of healthcare is personal and sensitive...

Guidelines to Follow...1

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- Use people-first language avoid labels
 - Use "substance use" to describe all substances
 - Avoid: abuse, dependence, addict, user, former, dirty, reformed, clean, habit all of these have a layer of judgment built into the term
 - None of these words are motivating
 - Limit your reaction to responses that describe how much or how often a substance is used
- Limit your reaction to responses describing how the person uses

Guidelines to Follow...2

Be positive and encouraging

Recognize and affirm that substance use disorders are legitimate health conditions

Accept that there are always positive aspects of use from the patient's perspective

Avoid harsh confrontations – try to get clients/patients to explore the costs/benefits of change

- Provide the patient information needed for an appropriate intervention
 - Can I tell you a little bit about what I know of substance use?

Importance of Screening

Every healthcare provider can implement rapid screening and referrals within interprofessional settings

Clerks, pharmacists, social workers, counselors, case managers, technicians, nurses, physicians, aides, dentists, medical students, interns...

Has also become a billable service, so more interprofessional settings/managers are interested

Visual Aids





- Sometimes it is helpful to have a visual aid present
- Many people struggle to describe what/how many drinks
- Can help with assessment, education and prevention

Using the 3 C's to Understand Patient Use

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Craving Craving, tolerance, withdrawal

- Loss of Control
 - Larger quantities over a longer period of time
 - Unsuccessful attempts to cut back or control use
 - Increased time spent buying substance, using substance or recovering from effects
- Consequences
 - Social or interpersonal problems related to substance use
 - Failure to fulfill major obligations
 - Activities given up due to substance use
 - Use in hazardous situations
 - Medical and psychological consequences

Screening Responses

Prevention

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• 2 or 3: Likely mild issues, some education or prevention may be useful

- Abstinence
- Infrequent Use

Brief Intervention

• 4 or 5: Likely moderate issues, a brief intervention will be useful and could include referrals to another provider for more information

 Problematic or Dangerous Use

Referral to Treatment

- 6 or more: Severe issues are likely present; a formal assessment should be conducted by a professional; provide treatment referrals or case manage to help
- Significant medical or psychological consequences of use
- Likely meets criteria for a SUD

Components of Brief Interventions

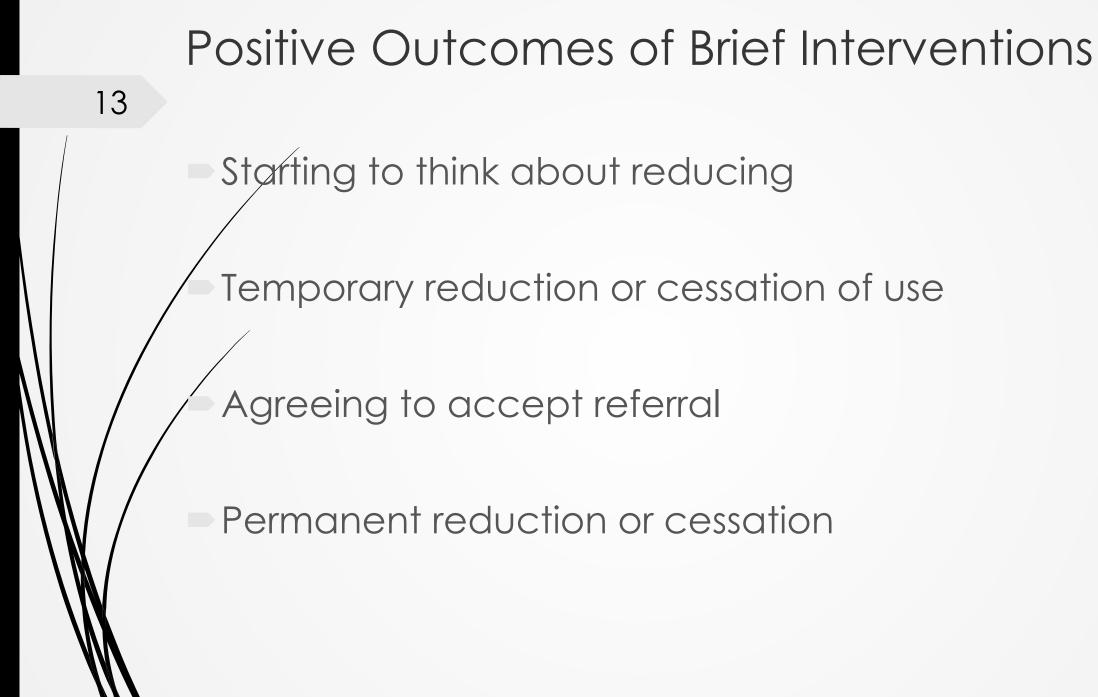
Short dialogues between the provider and the patient that typically involve:

- Feedback
- Client engagement
- Simple advice or brief counseling
- Goal-setting
- Follow-up

 Respect for autonomy of patient and their goals and values

 Importance, confidence and readiness to change must be taken into account

- Ambivalence is common
- Targets are selected by the patient, not the "expert"
 - Expert is the provider of information
- Be empathic, non-judgmental, respectful



How to Prepare for Treatment Referrals

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Referrals are necessary when formalized assessment and treatment are warranted

Also when a person requires level of care beyond the interprofessional setting's capabilities

Know your healthcare community provider specialties

- Physicians, psychologists, counselors, social workers, therapists
- Have a current listing of substance use disorder treatment centers/providers available
- Develop effective relationships with referral sources
- Personalized/assisted referrals work better
- Have information about local self-help,12-Step and other recovery programs in your area

Summary

- Treatment works, recovery is possible
 - Brief interventions and referrals work
 - Non-judgmental and friendly manner
 - Destigmatized language is a key component
- Your language can differ between patient and interprofessional interactions
- "New" information is useful
 - Sometimes clients/patients are unaware of health consequences, serving sizes, interaction effects, harms ... related to substance use
 - All people can benefit from responsible use messaging
- Our goal is to prevent more severe health and social consequences
 Reduce stigma, motivate engagement and enhance health outcomes

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