

BRIEF ALCOHOL INTERVENTION FOR NEEDLE EXCHANGERS (BRAINE)

Good Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population

- Active injection drug users (IDUs) who were also heavy alcohol users

Goals of Intervention

- Reduce alcohol use
- Reduce or eliminate injection-related risk behaviors

Brief Description

BRAINE is a brief motivational interviewing intervention consisting of two individualized sessions focusing on alcohol use and HIV risk-taking. The first session, lasting 60 minutes, consists of assessing the participant's degree of hazardous drinking, providing feedback, identifying relationships between drinking and negative consequences including HIV risk behaviors, reviewing HIV drug risk behaviors, and identifying personal goals and potential barriers for behavior change. The counselor provides an atmosphere to enhance the participant's motivation to change, uses an empathic therapeutic style, and supports the participant's self-efficacy for behavior change. The counselor helps the participant with setting goals and developing a "change plan" concerning future alcohol consumption designed to reduce the link between drinking and other hazardous behaviors, particularly borrowing injection equipment from someone else. A copy of the "change plan" is given to the participant to refer to at home. A second motivational interviewing session, lasting 30-45 minutes, occurs 1 month later for reinforcement. This session is to review the "change plan," discuss any recent negative consequences from drinking, and help participant's assess their own alcohol-related injection risk behaviors and come up with ways to reduce this risk. The counselor helps the participant set goals and develop another "change plan" for achieving these goals. A copy of the "change plan" is again provided to the participant. Participants are also given a list of referrals for substance abuse and medical treatment at both sessions.

Theoretical Basis

- Motivational Interviewing Principles

Intervention Duration

- One 60-minute and one 30-45 minute session delivered one month apart

Intervention Setting

- Research site at Rhode Island Hospital

Deliverer

- A social worker, PhD level counselor trained in motivational interviewing

Delivery Methods

- Counseling
- Goal setting
- Develop risk reduction plan
- Printed materials

INTERVENTION PACKAGE INFORMATION

An intervention package is not available at this time. Please contact **Michael D. Stein**, General Internal Medicine, Butler Hospital, 345 Blackstone Blvd., Providence, RI 02906.

Email: michael.stein@brown.edu for details on intervention materials.

EVALUATION STUDY AND RESULTS

The original evaluation was conducted in Providence, RI between 1998 and 2000.

Key Intervention Effects

- Reduced sharing of injection equipment

Study Sample

The baseline and analytic sub-sample of 109 injection drug users (IDUs) who had shared injection equipment in the past 30 days is characterized by the following:

- *90% white, 10% other*
- *62% male, 38% female*
- *Mean age of 36 years*
- *Mean education of 11 years*

Recruitment Settings

Three needle exchange program sites

Eligibility Criteria

Subjects were eligible for the study if they were English speaking adults (18 years or older) who had attended a NEP in the past 6 months, had injected heroin or cocaine in the prior 30 days, and had scored 8 or higher on the AUDIT (Alcohol Use Disorders Identification Test).

Assignment Method

Injection drug users (N = 187) were randomly assigned to 1 of 2 groups: BRAINE (n = 95) or comparison (n = 92).

Comparison Group

The comparison group was given a standard list of referrals for substance abuse and medical treatment both at baseline and 1 month later.

Relevant Outcomes Measured and Follow-up Time

- Alcohol use, measured as number of days in past 30 days in which alcohol was used, was assessed at 1 month and 6 months.
- Number of injection-related risk days in past 30 days, measured as number of days in past 30 days in which the participant used any needles, cotton, or cooker after someone else had used it, regardless of cleaning (borrowed injection equipment), was assessed at 1 month, and 6 months.
- The 1-month assessment was 1 month after the first intervention session and immediately before the second intervention session. The 6-month assessment was 5 months after completion of the intervention.

Participant Retention

- BRAINE Intervention
 - 97% retained at 5 months after intervention
- Control
 - 97% retained at 5 months after intervention

Significant Findings

- This intervention fails to meet the best-evidence criteria due to small analytical sample sizes.
- Among those that shared equipment at baseline, IDUs in the intervention group were significantly more likely than those in the control group to reduce the number of injection-related risk days by 75% ($p < .05$) or by 1 or more days ($p < .05$) at the 5-month follow-up.
- Among those that shared equipment at baseline, IDUs in the intervention group were significantly more likely than those in the control group to move to a lower risk category (based on the number of injection-related risk days) from baseline to the 5-month follow-up ($p < .05$).

Considerations

- Among those that shared equipment at baseline, more intervention participants than control participants, reported 25%, 50%, and complete (100%) reductions in their number of injection-related risk days, although the findings using these percent reduction categories were not statistically significant (all p 's $< .10$).

REFERENCES AND CONTACT INFORMATION

Stein, M. D., Anderson, B., Charuvastra, J. M., Maksad, J., & Friedmann, P. D. (2002). [A brief intervention for hazardous drinkers in a needle exchange program](#). *Journal of Substance Abuse Treatment*, 22, 23-31.

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