

WHO COLLABORATIVE PROJECT ON IDENTIFICATION AND MANAGEMENT OF ALCOHOL-RELATED PROBLEMS IN PRIMARY HEALTH CARE

PHASE IV: IMPLEMENTING COUNTRY-WIDE EARLY IDENTIFICATION AND BRIEF INTERVENTION STRATEGIES IN PRIMARY HEALTH CARE

**Meeting of Investigators, Abbaye de Royaumont, Paris, France
Friday 14 - Monday 17 March, 2003**

This is the report of the work done since the last meeting in Geneva (24.-27.5.2002).
We still have problems with funding –we haven't got any new funding in the last 12 months. That's the reason
why only a few things were done during this period.

Customisation of materials and procedures

THINKING ABOUT »ORAL AUDIT«
THINKING ABOUT USING THE AMOUNTS OF WINE, BEER OR SPIRITS INSTEAD OF UNITS IN THE
adapted 3-Q AUDIT

Reframing understanding

The EIBI concept is included in undergraduate education of medical students and in the curriculum of family
medicine specialisation.

A project on reframing understanding of alcohol issues is prepared to be fund by the Ministry of Health which
includes:

a leaflet for population as a whole

a booklet for GPs

»above the line« : jumbo

»below the line« :

Strategic alliances

There was pure success in collaboration with other faculties at the University with the exception of the Art
academy and School for social work.

We collaborate with the Ministry of Health in the preparation of special »law for alcohol issues«. There are
several lobbies that disable the integrity of the law, but anyway something is going to be prepared.

We've prepared instructions for the national programme for brief interventions on alcohol drinking problems.

We collaborated in the preparation of a questionnaire for the anual national »public opinion research« with
limited success – not many of our remarks and suggestions were considered.

Demonstration project

To get the starting point situation we've done a survey among the population of the area where the demonstratoin
project is going to be done (approximately 55.000 inhabitants and 30 primary health care teams). A
questionnaire was delivered to 300 people and a control group of 360 people was chosen from another area. The
questionnaire contained questions on:

- alcohol knowledge

- attitudes on alcohol issues
- alcohol drinking habits (3Q AUDIT and CAGE)
- their GPs' performance on screening for hazardous and harmful drinking

The questionnaires was delivered to GPs, to their patients in waiting rooms, to some workers and to some schools at the predefined region of approximately 55.000 inhabitants and 30 primary health care teams. We defined a control group in another part of Slovenia where the same questionnaires are delivered to GPs and their patients.

We've run **two** workshops with GPs and nurses of the region on reframing understanding of alcohol issues and **one** workshop on health behaviour change counseling for brief interventions (that was learned on the intensive course at Cardiff).

We are starting to establish local steering group.

Dr. Marko Kolšek