

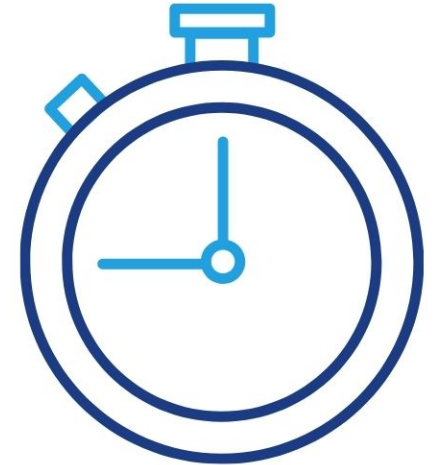
Screening, Brief Intervention and Referral to Treatment (SBIRT)

Adapted for COVID-19 Vaccine Conversations

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Screening, Brief Intervention and Referral to Treatment (SBIRT)

- Evidence-based model of brief intervention
 - Implemented in professional and community settings across the country
- Grounded in motivational interviewing
- Brief guided conversation
- A single session can be effective



<https://www.bu.edu/bniart/sbirt-in-health-care/sbirt-brief-negotiated-interview-bni/>

SBIRT for COVID Vaccine Conversations

Key Components:

- Provides opportunity for clients to explore what is best for themselves
- Supports the client's decision
- Brief discussion can be easily integrated into client conversations



Five-Step SBIRT Model (adapted)

STEP 1:	Building Rapport
STEP 2:	Explore Concerns and Benefits (Pros and Cons)
STEP 3:	Provide Information/Feedback
STEP 4:	Assess Readiness – Readiness Ruler
STEP 5:	Next Steps/Planning (as appropriate)



Step 1: Building Rapport

Establishing partnership, trust, positivity

TASKS:

Explain your role
Emphasize autonomy

“Part of my job is to help people make informed healthcare decisions that they think are best for them. Would it be okay if we took some time together to discuss your thoughts around the COVID-19 vaccine? Please know that I am not here to tell you what to do; any decisions you make around the vaccine are entirely up to you.”

Ask screening question

“Have you received your COVID-19 vaccines yet?”

Reflect and affirm

If yes: Affirm! Explore if received both doses and booster

- If series incomplete, explore barriers or hesitancy

If no: Reflect! Continue to Step 2



Step 2: Elicit Concerns and Benefits (Pros and Cons)

TASKS:

Elicit concerns:

*“Help me understand, through your eyes, your thoughts about the vaccine.
What concerns, if any, do you have about taking it?
“What else?”*

Elicit benefits:

*“What benefit, if any, do you think the COVID vaccine might provide you?
What might be good about getting the vaccine?”
“What else?”*

Provide double-sided
reflection

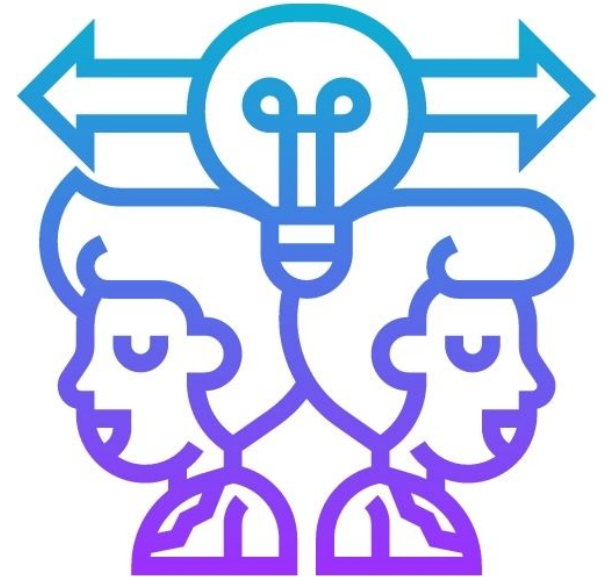
*“On the one hand (their concerns about the vaccine), and on the other hand
(what they may find positive about the vaccine).”*

Providing Double-sided Reflections

Highlights ambivalence in client's own words

“On one hand, you are concerned about the safety of the vaccine and are worried about having to take sick days off from work if you get vaccinated, and on the other hand you are concerned about your mother who lives with you.

You really worry about the threat to her life if she did get sick.”



Providing Double-sided Reflections, cont'd

Reflect the reasons that favor the status quo first; end with the reasons that favor change

- Provides a natural stepping-off point for further exploration of change, as appropriate
- Research indicates that what is heard last is more likely to be remembered and influential in the conversation



Providing Double-sided Reflections, cont'd

Give attention to the conjunction used:

- “**but**” tends to dismiss everything that precedes it
- “**and**” acknowledges both sides as having merit





Step 3: Provide Information and Feedback Ask-Offer-Ask

Tasks:

Affirm and support
autonomy

“It makes sense that you have concerns about getting vaccinated and whether or not you receive the vaccine is completely up to you.”

Ask

“I have some information that may be helpful as you continue to think about the vaccine. Would it be okay if I shared some of that information with you?”

Offer

*“Research suggests...”
“Studies have shown ...”
“What we know is...”*

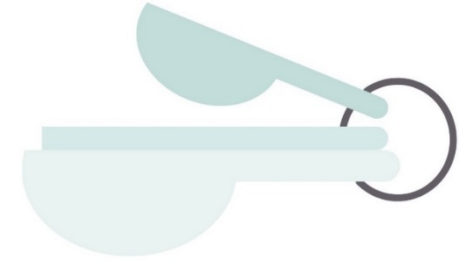
Ask

*“What do you make of this information?”
SUMMARIZE and REFLECT*

Sharing Information

Not more than **3** pieces of information at a time.

- Tailored to their concerns



You do NOT need to be a medical expert on all COVID-19 data and information:

NASW COVID-19 resource website is here to assist you!

<https://www.socialworkers.org/Practice/Infectious-Diseases/COVID-19-Vaccine-Confidence>



Responding to Misinformation

- **Reflect and validate:**

“You have heard that the COVID vaccine can give you COVID.

That is a real concern for you – the last thing you want to do is get sick. “



Responding to Misinformation

Ask permission to share additional information:

“The medical community understands many folks have concerns about this, and have provided some clarifying information around how the vaccine works with our immune system that you might find helpful. Is it okay if I share this with you?”



Responding to Misinformation, cont'd

- **Ask their thoughts on the information you shared.**

“What do you think about this information?”

Reflect!



Step 4: Readiness Ruler

Readiness Ruler



Tasks:

Support autonomy

“You have thought a lot about what is best for you and it is absolutely your choice what you decide.”

Ask scaling question

Thinking about where you are right now, on a scale from 1-10, how ready are you to get the vaccine, with 1 being not ready at all, and 10 being completely ready?”

Ask follow-up questions to elicit change talk

“Why did you chose that number and not a __ (lower number)?”

“What, if anything, would help raise your readiness up the scale a couple of numbers?”

Reflect change talk; support self-efficacy



Step 5: Next Steps/Planning

Tasks:

Summarize discussion:

“Let me make sure I have captured what we have talked about today. For you ...”

Ask follow-up question:

“Where does this leave you?”

“What do you think the next step might be to keep you and those you care about healthy and safe from COVID?”

Offer appropriate resources

“I have some additional resources that people sometimes find helpful, which includes information on how best to protect yourself from COVID if you are unvaccinated and where you can go to receive a vaccine whenever you are ready. Is it okay if I share this with you?”

Thank client and remain available for further discussion.

“Thank you for talking with me today. I am happy to meet with you again if you have any other questions.”

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Resources:

SBIRT – Brief Negotiated Interview

- D’Onofrio G, Bernstein E, Rollnick S. Motivating Patients for Change: A Brief Strategy for Negotiation. In: Bernstein E and Bernstein J. (eds.) *Emergency Medicine and the Health of the Public*. Boston: Jones and Bartlett; 1996:51-62.
- <https://www.bu.edu/bniart/sbirt-resources/sbirt-evidence-research/>

Video Links: MI for Vaccine Hesitancy

- Steve Rollnick, co-founder of Motivational Interviewing
From: *Motivational Interviewing for Vaccine Hesitancy: A Handbook*.
(<https://www.unige.ch/medecine/iumfe/files/9116/3826/3725/MI.for.Vaccine.Hesitancy.-.A.Handbook.pdf>)
<https://psychwire.com/motivational-interviewing/resources/building-engagement-rapidly>
<https://psychwire.com/motivational-interviewing/resources/assessing-vaccine-readiness>
<https://psychwire.com/motivational-interviewing/resources/ask-offer-ask-in-action>
<https://psychwire.com/motivational-interviewing/resources/clarifying-a-patients-decision>
- Dr. Prantik Saha, MD MPH, Assistant Clinical Professor of Pediatrics, Columbia University Medical Center, and Dottie Rains-Dowdell, MHS, CEO, Creative Training & Development:
<https://vimeo.com/521943150/6f3316207f>



SBIRT for Covid Vaccination Conversations

Video Demonstration