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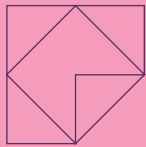
Screening and brief advice for alcohol and other drugs



WORKSHOP FACILITATION GUIDE

This facilitation guide provides a structure and resources for AoD professionals to deliver a workshop to support pastoral care staff to deliver screening and brief advice for alcohol and other drugs using the SACS ABC approach.





Background

Having a conversation where concerns can be identified and brief interventions applied, is an efficient and cost-effective approach to reducing substance-related harm (Heather, 2002).

The Substances and Choices Scale (SACS) was developed and validated for New Zealand teenagers, and the SACS ABC approach is being promoted to support the tool being used for screening and brief advice across a range of settings.

This workshop will support pastoral care staff to understand how they can use their existing skills and the SACS ABC approach to effectively provide screening and brief advice to young people to reduce alcohol and other drug-related harms.



Learning objectives

KNOWLEDGE

To understand the SACS ABC approach.

ATTITUDE

To feel inspired to create conversations with young people that:

- Have an environment of partnership, acceptance, compassion, and evoke curiosity.
 - Use the SACS ABC approach to help young people explore their situation, become more motivated to make changes, and identify how they can make those changes.
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SKILL

To develop existing relational skills to use the SACS ABC approach.

KEY POINTS

- Screening and brief intervention is effective when we understand young people and base our conversations on a positive youth development framework.
- Identify protective factors, and encourage young people to know their strengths and remain engaged in supportive environments.
- Support young people to connect with and stay engaged with supportive environments.
- The SACS ABC approach is an effective way to engage with young people, help them explore their situation, become more motivated to make changes, and identify how they can make those changes.
- The spirit of conversation focuses on partnership, acceptance, compassion, and evoking curiosity.
- Cover confidentiality with the young person before offering the SACS.
- The SACS ABC approach includes:
 - A | Ask |** Working together with the young person to complete and score the SACS.
 - B | Brief advice |** Understanding what matters to the young person, reflecting back their motivation, asking permission to give suggestions/tips, and giving relevant tips or advice.
 - C | Counselling |** When needed, talking with a young person to help them feel excited about getting additional support from someone with specialist skills that can help them learn how to make changes.



Underpinning principles

Screening and provision of brief advice itself is a simple concept. However, the spirit of conversation, which is shaped by a person's attitudes and values, has a strong influence on whether it is effective or not. In light of that, this workshop is delivered as part of a series of workshops that highlight positive youth development and focus on using a strength-based approach to identify what is important to young people. Progressive exposure to these concepts aims to improve pastoral staff's understanding of what's really important to young people and supporting them to develop skills for navigating these challenges. A strength-based approach shifts away from traditional, less effective methods to alcohol and other drugs, which require young people identify that they have substance problems that need addressing.

The structure of this workshop also progressively builds understanding and appreciation for youth development through: engagement with a series of positive youth development activities; building on that shared understanding with a run through of the SACS ABC approach; and practical experience using the approach in a youth friendly and strength-based manner.

It is recommended that facilitators of this workshop feel confident utilising a strong, positive youth development approach to deliver SACS ABC screening and brief advice.



Additional resources

Werry Workforce Whāraurau (2017). **The SACS ABC Brief Intervention Manual**. Auckland: Werry Workforce Whāraurau for Child and Adolescent Mental Health Workforce Development, the University of Auckland
wharaurau.org.nz/sites/default/files/Projects/CEP-AOD-Opt/Tools-for-CEP/Resources/PDF/SAC_ABC_MAN_11-17-WEB.pdf

Screening & Assessment. *Click on the 'AOD/CEP Screening tools' tab for more info on the Substances and Choices Scale (SACS) and more.*
wharaurau.org.nz/optforwellbeing.org/screening-assessment

The Substances and Choices Scale
wharaurau.org.nz/optforwellbeing.org/substances-and-choices-scale-sacs

Matua Raki (2017). **Bridging the Gap: Young people and substance use**. Wellington: Matua Raki.
tepou.co.nz/resources/bridging-the-gap-young-people-and-substance-use

'Did You Know?' series and conversation planner
drugfoundation.org.nz/didyouknow

Substances overview poster
resources.drugfoundation.org.nz/products/substances-overview-poster

Substance brief advice cards
resources.drugfoundation.org.nz/collections/brief-advice-cards

CAYAD and Auckland City Council (2016). **Knowing someone cares: An insight into the experiences of young people at greater risk from alcohol and other drug related harms in West Auckland**.
tuturu.org.nz/assets/downloads/knowing-someone-cares.pdf

Standard drinks and legal limits
alcohol.org.nz/help-and-support/advice/standard-drinks-and-legal-limits

Tūturu (2023). **Persona videos**
Renee: tuturu.org.nz/toolkit/videos-renee
Laura: tuturu.org.nz/toolkit/videos-laura
Asher: tuturu.org.nz/toolkit/videos-asher



Suggested approach

Welcomes and introductions

Welcome the workshop participants and introduce yourself.

Frame up for the workshop

Outline that this workshop will: cover protective and risk factors for young people that we look for during screening; how to use the SACS tool to explore what is happening for a young person; and how to offer brief advice or interventions and referral for further support. This is a practical workshop, and there will be opportunities for everyone to practise using these tools.

You may like to present the Tūturu introduction video that highlights why thinking about alcohol and other drugs as one aspect of wellbeing is important, and working together as a school community will better prepare students to live in a world where alcohol and other drugs exist.

Youth development protective factors

Explain that this workshop will start at a broad level, looking at positive youth development. To give brief advice that is relevant to young people, we need to ground ourselves in really understanding what their life is like.

Divide a whiteboard or a large sheet of paper into four different areas. Title these: **Physical** (Tinana); **Emotional** (Hinengaro); **Family/Social** (whānau); and **Spiritual** (Wairua)

Explain that these are the dimensions of Te Whare Tapa Whā, a model of hauora or wellbeing that was developed by Mason Durie. This is a model that we will use to reflect on typical adolescent experiences.

Invite the group to identify common experiences that teenagers face from changes in each of these areas. Start with physical, and write the ideas in that part of the grid. Move around each of the areas and write the ideas in the relevant areas of the grid. Here are common examples:

Physical: embarrassment over body changes; embarrassment over acne; excitement over pushing new body to the limits (muscle growth).

Emotional: All the emotions; extreme anger; extreme sadness; feeling isolated.

Family/Social: Wanting to be different; wanting to be the same; awkwardness finding place in social groups.

Spiritual: Craving deeper connection; craving independence from family views; excitement to explore new ideas or cement their own ideas.

Explain that there are many more experiences that young people can have, but this is a good list of examples.

Explain that one adolescent developmental task is to learn their own skills to live their life and deal with these experiences. In particular, learning how to cope with the waves of intense emotions that are typical of adolescence is an important area of development.



Explain that alcohol and other drugs can be very effective short-term emotional regulation tools. This means that they can very quickly change how someone feels. For example, coffee or exercise for some people are emotional regulation tools. If that person feels very flat, coffee or exercise can pick them up, and if they feel very manic, coffee or exercise can calm them down. At their emotional extremes, these tools can quickly adjust how that person feels. Alcohol and other drugs can do the same thing. It is common for alcohol and other drug counsellors to hear this statement from people they are supporting, "I know I will feel worse/guilty after using this, but at least I can control how I feel."

Go through each item on the list of common experiences adolescents face, and ask the group whether alcohol and other drugs could be seen as having a beneficial change for that experience in the short term. It generally helps to reassure the group that, in the long run, it is usually not beneficial and can worsen the situation, but reflect on this for the short term benefits that the adolescent brain is primed to focus on. Place a tick next to the experiences that the group thinks could be beneficial in the short term.

Hint: *Almost all, if not all of these, will have a tick next to them.*

Explain that another additional challenge is that teenage brains are developing. The first part of the brain to develop is the nucleus accumbens that seeks pleasure and reward, and the last part (usually by about age 25) is the prefrontal cortex that controls consequential thinking and self regulation. This sets up a teenager to have the drive to try new things and develop independence, but also sets them up to do silly things without thinking it through. We also know that sometimes (usually in a low stimuli setting) teenagers have good access to their developing prefrontal cortex and can talk in great detail about the future and show excellent insight and problem solving skills. However, in an exciting environment (having peers around them is a big factor), they have very limited access to the prefrontal cortex of their brain. We know that the teenage years are an important life stage for brain development, and that the brain is wiring itself to reinforce brain connections that are used the most, and pruning away connections that are used the least.

You might like to use the metaphor of an upgrading entertainment system to describe this process. Repeated exposure to things that reinforce immediate gratification (E.g. alcohol and other drugs changing how we feel very quickly) do not give the opportunity for teenagers to develop distress tolerance. They need to experience emotions such as anger and sadness. This will help them develop internal skills necessary to deal with it, and that they can handle an overload of emotion by riding it out until it fades. This can be different for each individual but it will pass in time, and in half an hour it will disappear or they can handle that much sadness and if they do these things it will fade.

SLIDE 2

Summarise that building a toolbox of emotional and self-regulation tools is an important part of youth development. Alcohol and other drug use can be attractive, and sometimes can be seen as a solution to this developmental challenge, however, if an adolescent only fills their toolbox with short-term solutions it limits the skills they can acquire.

SLIDE 3

Explain that adult perspectives can differ a lot from adolescent perspectives for the same situation. Outline these differences that are shown in the table, and ask the group to make suggestions of any additional differing perspectives.

Outline that young people receive different messages from many different people, and that making sense of it all can be challenging. This activity will highlight that. Ask for a volunteer to be a young person, who doesn't need to do anything just yet, other than stand in the middle of an open space in the room.

Ask for volunteers from the group to represent different roles/messages given to that young person. As a volunteer for each of the following roles is identified and walks to the front of the group, ask the group to identify two common messages that this 'role' gives to young people. The roles are as follows: young person's parent; young person's teacher; young person's friends; the media (this can be direct and indirect messages); their nucleus accumbens (pleasure and reward); and their prefrontal cortex (consequential thinking and self-regulation).

Explain that each volunteer is representing the messages these different roles or areas give to young people. They believe that if this young person hears their messages and agrees with them, their life would be amazing. You might like to add that this can sometimes be what we feel as professionals working with young people.



Explain that when you say “go” each volunteer will walk around the young person, repeating their messages. Everyone will do this at the same time. Ask them not to touch the young person, but they can whisper in their ear, dance in front of them, or wave their hands – anything to get that young person’s attention. The young person will stand there and listen to these messages.

Say go, and let this happen for a short while.

Ask the volunteers to pause, and explain that something has changed in the young person’s life. They have decided to leave school. Ask the teacher to stand to the side.

Invite the rest of the volunteers to have another round of getting their messages through to the young person.

Ask the volunteers to pause again, and explain that one more change has happened. Sitting at home doing nothing has put strain on their family, and they decide to move out of home. Ask the parents to stand to the side.

Explain that this is the last round, and invite the rest of the volunteers to give it their best shot at convincing the young person to believe their messages.

Ask the volunteers to stop what they are doing, and everyone apart from the young person can sit down.

Ask the young person how they found that situation.

Ask the young person what they noticed when the teachers and parents stood to the side.

Thank the young person, and let them take their seat. You might like to remind the group and the volunteers that they are no longer these roles, they are themselves again.

Explain that this highlights some points that we commonly hear from young people:

It is really hard to pick out which of the conflicting messages are most relevant and important. Not following the message does not mean they did not value it or see it as important.

Sometimes leaving school or home can be a relief, as it removes some of the conflicting messages. From interviewing young people who left school early, we know that many of them regret this in the future.

Leaving school and home remove those supportive messages, leaving only their prefrontal cortex to keep them on track. However, we know that it does not finish developing until someone is around 25. This highlights that our brief advice and brief interventions can be about environmental factors because keeping young people engaged in supportive environments enables them to grow and develop.

Give each group member a copy of the [Risk and Protective Factors worksheet](#). Explain that these risk factors increase the likelihood of difficulties in life and poor health and wellbeing. However, they are not predictive – just because a person has a risk factor does not mean that they will have negative outcomes. Protective factors enhance life opportunities, promote good health and wellbeing, and buffer the impact of these risk factors on someone's life. Focusing on strengthening protective factors can have a powerful impact on a student's life.

Explain: Protective factors come in multiple forms and can be beneficial across someone's lifespan. There are protective factors that are more closely associated with alcohol and other drugs and these may be worth highlighting in this workshop. Regarding individual protective factors, developing an internal locus of control is important. This is the belief that we have an influence on our life, how we feel, and what happens to us. Ideally, young people will develop a sense of control over their lives, however, substance use may interfere. Substance use may lead some young people to feel that the substance has more control over them than they do over themselves. You might like to ask the group to identify how their school supports students to develop an internal locus of control as this is something that schools can do well.

Explain that there are also several whānau and peer protective factors that are proven to work. These include: family connectedness (one of the strongest whānau protective factors that is a key feature across successful prevention programmes); social competence; and decision making skills. Also, feeling connected to just one positive adult outside of the family can buffer the impact of several risk factors. Young people commonly name school teachers, form teachers, deans, and assistant principals as people who have a supportive influence – and also as the first people who might notice when things are not going right. A quick conversation asking how they are can go a long way, and one study in New Zealand found that the young people who were interviewed said that this conversation occurring could have prevented a lot of negative experiences in their lives¹.

1. *Knowing Someone Cares* (CAYAD 2016).

Understanding how addictive patterns can creep into a young person's life

SLIDE 4

You might like to do a quick activity with the group now, asking them to identify different reasons why young people use alcohol and other drugs. Depending on the group, this may have already been covered, however some groups could benefit from further exploration.

Explain the octopus animation. The scripting for this is underneath each of the slides in the animation. [Understanding substance use and its effect on relationships and connections on Vimeo.](#)

Introduction to screening

SLIDE 5

Explain that screening is about gathering information and making a quick judgement on the next steps. This can include knowledge and awareness raising, and supporting self reflection.

Explain that by understanding what is important to the young person we are speaking to, we can offer relevant brief advice. This includes: increasing opportunities for connection; creating their own strategies for staying in control; creating their own strategies for reducing use; and bringing in more support if needed.

SLIDE 6

Explain that young people can experience the following benefits from having these conversations: having an opportunity to think and talk about what is happening for them and their substance use; gaining insight and motivation to make positive changes; identifying problems or areas of risk; getting personalised feedback on their situation; and receiving personalised information and advice on how to reduce potential harms.

SLIDE 7

Explain that these are some tips to help us frame the conversation, so that a young person is warmed up to listen and engage in the conversation with us.

Explain each of the key points on this slide. You may like to share some examples from your experience. In particular, reinforce the spirit of evoking curiosity. This supports young people to engage in looking at things in a different way and feel supported and motivated to engage in the conversation with us.

SLIDE 8

Explain that there are two screening tools that we will cover in this workshop. The first one is a short spoken screening tool – **CRAFFT**.

Explain that CRAFFT is a commonly used acronym for six questions. Positive responses to two or more of these indicate further assessment is required. Reflecting on these questions can help a young person begin reflecting on how they can be safer in these areas.

Explain that we will cover these questions and provide brief advice later on in the workshop.

SACS

SLIDE 9

Explain that the second screening tool that we will cover is called the Substances and Choices Scale, or SACS. This is a one page questionnaire that was developed in New Zealand. It takes about five minutes to complete, and was designed to complement the Strengths and Difficulties Questionnaire (SDQ) which identifies difficulties in four domains (emotional, peer problems, hyperactivity, and conduct problems) and strengths as a prosocial score. Section B of the SACS tool has been validated in New Zealand, and the SDQ has been validated based on Australian young people.

Give each group member a copy of the [SACS tool](#).

Explain that young people can experience the following benefits from having these conversations: having an opportunity to think and talk about what is happening for them and their substance use; gaining insight and motivation to make positive changes; identifying problems or areas of risk; getting personalised feedback on their situation; and receiving personalised information and advice on how to reduce potential harms.

Explain that Section B is scored, and that the scoring is relatively simple. Any responses of “Not True” give no points, responses of “Somewhat True” give 1 point, and responses of “Certainly True” give 2 points. The points for Section B are totalled to give a score out of 20.

Give each group member a copy of the [SACS ABC Manual](#).

Ask each group member to turn to page eight of the SACS ABC manual. Explain that this flowchart outlines the ABC approach (Ask, Brief advice, and Counselling). This also has easy to follow guidelines for what to do with the different scoring levels.

Ask

Outline that you are about to cover the first part of this approach: **A for Ask**.

You might like to ask the group for approaches that they have found effective to raise further exploration or completing screening questionnaires with young people.

Remind the group that our conversation needs to evoke curiosity. A helpful acronym to remember is PACE – Partnership, Acceptance, Compassion, and Evoking curiosity. We cover this in more detail in the motivational interviewing workshop.

Title a section on the whiteboard or a large sheet of paper with the word "Ask". Ask the group to identify how we can create that spirit in conversations that we are having with young people. Record some examples of their responses under this title. Ensure that this includes: signposting what will happen and our role in their wellbeing; explaining confidentiality; some phrases and questions that evoke curiosity and further exploration; asking permission to do the SACS.

You might like to write an example script on the whiteboard or a large sheet of paper that the group contributes to. This could include similar phrases to those below:

- It sounds like there are alcohol and other drugs around you, and I think it could be good to explore this a bit to double check everything is going ok. I have a really quick questionnaire that can help us do that. How does that sound?
- Just a reminder, what we talk about and what you tick on this paper stays between us. I'm also keen to make sure that you're ok, and if I hear that you or someone around you is at risk of getting hurt I will make sure that we bring in the right kind of support.
- Do you think this was a typical month for you?
- How much do you think you would use in a typical session?
- Do your friends use any of these?
- What are the most important things to you in your life? How do you think those are impacted by using these substances?
- Great to hear that you've already made some changes. Well done!
- Looking at these now, which of these do you think is the most worrying for you?
- Great, let's score this together. Any ticks in this column give zero points, any ticks in this column give one point, and any ticks in this column give two points. How many points do you have?

Brief advice

Explain that that is the first part, and that we will now cover the second part of this approach: **B for Brief advice**.

Explain that understanding what is important to a young person and giving relevant brief advice can be extremely effective (Heather, 2002).

Ask each group member to look at the middle column in the flowchart (page 8 of SACS ABC manual) and explain that these are suggestions for what we can explore for young people who do not use substances, or have used a substance but it was very low risk with a score of zero or one.

Title a section on the whiteboard or a large sheet of paper with the word "Brief Advice". Ask the group to suggest some brief advice tips for young people. Record some examples of their responses under this title.

Explain that what we reflect back to young people can influence what they take on board. We cover this in more detail in the motivational interviewing workshop. In summary, look out for any opportunity to reflect back to a young person that you notice they have:

A strong **D**esire to make changes
Confidence in their **A**bilities to make changes if they wanted to
Reasons they can identify indicating that they could make changes
Needs they can identify indicating that they could make changes
A strong **C**ommitment to make changes

These are examples of positive change talk, and reflecting this back to a young person can increase their motivation to make changes.

Explain that it can be helpful to ask how much effort they think they would need to put in to make changes. It can be hard to keep going at something that takes a lot of effort, particularly if they were used to using alcohol and other drugs to reward themselves or relax. If they think it would take a lot of effort, talk with them about how they can make sure they have other ways to relax or reward themselves for their success. Try to book a follow up meeting with them, so you can keep encouraging them and acknowledge their successes.

SLIDE 10

Explain that a study into young people's experiences with alcohol and other drugs found a common pattern. Most young people spoke with the research team about wanting to stay safe, and shared strategies that they had put in place for it. The issue was that some of the time, when they thought they were in their 'safe zone' they actually were not. Here is a common pattern. Read out the stages on the slide. Explain that young people had thought they were just as safe in the last phase as they were in the first phase because they were with the same friends. However, they weren't. Offering to help a young person check their safe-zones can be a helpful skill-building exercise for that young person, and beneficial for their friends too.

Share the brief advice resources with the group ([brief advice cards](#) and [substance overview table](#)).

Explain that these cards are to help young people have information. They are designed for young people who are already using rather than a general audience. Explain that these have stages of intoxication, which highlight that pleasant effects usually occur at lower doses and increasing the amount taken usually increases unpleasant effects. The cards also include signs of a come down, how to respond to overdoses, how to be safer if using, and warning signs to look out for.

You might like to explain what standard drinks are, and perhaps do a demonstration to get group members to identify how much a standard drink is in different glasses.

Hint: *A simple explanation for this is that one standard drink takes at least one hour to leave an adult body. It takes longer for young people.*

You might also like to play the '[Did You Know?](#)' video series to give some more information about substances.

Explain that in the substance overview table, there is a column for key harm minimisation tips. These can be useful to go through with young people.

Ask each group member to turn to the last page in the SACS ABC manual. Explain that this harm minimisation tips table can be photocopied and given to young people. They can tick any that they would like to try or write some of their own.

You might like to write an example script on the whiteboard or a large sheet of paper that the group contributes to. This could include similar phrases to those below:

Your score was __. This questionnaire was created in New Zealand. The people who made it found that people with a score of four and above were already experiencing problems from their substance use, and the people with a score of six or above were commonly already seeing an AoD practitioner for support. What do you think your score means for you?

How could we make sure that this doesn't get in the way of [things that matter to the young person]? (a follow up could be asking how they would notice if it was starting to interfere).

If you could change any of these responses, what would you like to change? How would it be different?

It sounds like you have great skills keeping your cannabis use to a minimum, and that alcohol seems to be a bit harder? Why do you think that is?

It's great that you're choosing not to get in a car with people who have been drinking. And I remember you mentioning your friends still did that. That must take a lot of strength to do that! How have you been able to make that choice for yourself to be different?

I have a list here of some strategies that other young people have found really helpful for preventing problems from alcohol and other drugs. Which ones of these do you think could work for you? You might have some other ideas for strategies that you could come up with yourself after seeing this list too.

It sounds like you're not feeling ready to make changes. There are a couple of tips that I'd like to recommend to help you stay on track, are you ok if I share them?

Firstly, here is some information about how to keep yourself safer. On this panel is how this substance affects people. You can notice that the more pleasant feelings are at lower levels of intoxication, and the more that a person takes, the more of these unpleasant feelings that come.

I'd recommend trying to stay in these earlier levels where the pleasant feelings are. People do that by pacing themselves, or taking less. Secondly, problems tend to increase when using substances is the only or most important thing in a person's life. I'd recommend making sure that you have other things, like joining a sports team, learning an instrument, or joining a club at school.

What do you think would be a good activity for you?

Counselling

Explain that we are now going to cover the third and last part of this approach: **C for counselling**.

Explain that exploring a referral to an alcohol and other drug service is helpful for young people who score four or above on the SACS.

Explain that we can still provide the same brief advice to the young person. Most people can make changes to their alcohol and other drug use when they can see benefits in doing so for the things that matter to them.

Title a section on the whiteboard or a large sheet of paper with the word "Brief Advice". Ask the group to suggest some ways that they could introduce making a referral for a young person. Record some examples of their responses under this title.

Outline that we can introduce referrals by saying that there are people who are skilled at helping you learn skills to make changes in this area and that we would like to invite them to meet and look at how they can help. This is very effective if we can link them making changes with tangible benefits in the things that matter to them. Explain that introducing referrals like this means that the young person does not need to name and identify with themselves having a problem, which can act as a barrier to getting more support.

You might like to write an example script on the whiteboard or a large sheet of paper that the group contributes to.

Check in with the group that they know what kind of services and support can be offered from secondary services. Maybe ask for some participants to share their experiences of referring and how they maintained a relationship with the young person or provided ongoing support alongside an addiction specialist. You may want to source a local support map or healthpoint link that participants can use when referring someone.

Practise

SLIDE 9

Return to slide 9 and explain that we will spend the rest of the workshop practising using these skills and the SACS ABC approach. Keep this slide visible while practising. You might want to discuss as a group before practising in smaller groups.

Play one of the persona videos followed by their 90 second narrative.

The persona videos introduce us to three young people and their relationship with alcohol and other drugs.

- ▶ Persona video – Renee tuturu.org.nz/toolkit/videos-renee
- ▶ Persona video – Laura tuturu.org.nz/toolkit/videos-laura
- ▶ Persona video – Asher tuturu.org.nz/toolkit/videos-asher

Ask the group to identify examples of how they could introduce part A: Ask to this young person.

Give the group a completed SACS form that reflects this persona.

Ask the group to identify examples of how they could give brief advice that is relevant to this young person.

Ask the group to identify examples of how they could introduce a referral to additional support.

Smaller group practice:

Divide the group into smaller groups of three.

Play one of the persona videos.

Invite each small group to pick one person to be the young person in the persona video, one person to take that young person through a SACS ABC approach, and one person to watch and give feedback.

Give each small group some time to role play this in their triads. Some variations on this depending on time:

- Three persona videos, and three rounds of role play so each group member has a chance to be in each role (supporter, young person, observer).
- One persona video, and three rounds of role play (swapping roles each time).

Invite the smaller groups to join together as a bigger group again.

Ask the group to reflect on: How they found the practice, and how confident they feel to use a SACS ABC approach now.

You might like to ask the group if they have any questions.

Summarising

SLIDE 11

Summarise the key points at the start of this facilitation guide.

You might like to hand out feedback forms. Nice work!

tūturu.