

Adolescent SBIRT Overview

Peer Assistance Services, Inc., August 2023

Why is adolescent alcohol and drug use prevention so important?

- Alcohol or drug use can interfere with brain development and potentially result in permanent changes to structure and function.
- Adolescents who initiate substance use before age 15 are significantly more likely to develop a substance use disorder than those who delay until age 21 or later; they may also progress faster to a use disorder than adults.
- Prevention and early intervention can increase positive coping skills and address underlying risk factors *before* a serious substance use-related problem or addiction develops.
- The economic burden of unhealthy alcohol and other drug use affects essentially every sector of society.

Key points about adolescent alcohol and drug use risks

Any substance use may result in decreased academic achievement and engagement in prosocial activities.

Alcohol use is a risk factor for the three leading causes of death in adolescents:

- Unintentional injury
- Suicide
- Homicide

And increases the risk for:

- Unintended pregnancy and sexually transmitted infections

Cannabis use is a risk factor for:

- Earlier onset psychosis in those with an underlying risk
- Poor mental health
- Low motivation for prosocial activities

Higher potency cannabis poses a greater risk to the developing brain.

Nonmedical prescription drug or illicit drug use can lead to:

- Opioid or other drug use disorder (addiction)
- Overdose and many other physical and mental health problems

Nicotine vaping can lead to:

- Nicotine use disorder and future combustible cigarette use (smoking)

What is Screening-Brief Intervention-and Referral to Treatment (SBIRT)?

- **Screening:** Ask validated questions to identify alcohol or other drug use
- **Brief Intervention:**
 - For no reported use: Offer positive reinforcement and anticipatory guidance.
 - For any reported use: Engage in a short conversation to help the adolescent identify their own best reasons and approaches to stop or decrease use.
- **Referral to Treatment:**
 - Further evaluation and arranging services for substance use, mental health, physical, and social needs.

What works to prevent adolescent alcohol and drug use?

In communities:

- Increased alcohol taxes
- Restricted access to alcohol and drugs in the community
- Enforcement of laws prohibiting sales to minors
- Countering unhealthy alcohol and drug use norms (e.g., marketing, messaging, consumption patterns)
- E-SBI: Electronic (self-guided) screening and brief intervention

In families:

- Parent/Caregiver oversight and monitoring, and clear communication of parental expectations of no-use.
- Restricted access to alcohol and drugs.
- Early intervention for unhealthy alcohol and drug use in adults (SBIRT in adults).

In healthcare:

- Universal screening (SBIRT) at least annually starting by age 11 or 12.
- Anticipatory guidance that reinforces positive decisions to not use, links not using or decreasing use to reaching health and other goals, and shares education on how substance use impacts the brain.
- Monitoring to identify escalating use and initiate treatment early.

In schools: *Signs of alcohol or drug use may be identified at school first.*

- Identifying and addressing risk factors for early initiation of alcohol or drug use.
- SBIRT as a universal practice (e.g., all middle and high schoolers in a specific grade), targeted (e.g., for those who visit the school nurse or psychologist), and/or as an alternative to discipline/restorative justice practice.

Where can SBIRT be provided?

- Primary care, including school-based health centers (SBHCs) and college health centers.
- K-12 schools.
- Emergency departments and hospitals.
- Public health agencies (e.g., family planning clinics).
- Juvenile justice settings.
- Community organizations that serve youth.

Colorado Initiatives Related to Prevention and SBIRT

- SBIRT-SBHC Project: <https://www.colorado.gov/pacific/cdphe/sbhc-sbirt>
- Colorado Department of Education (CDE) School-Health Professional Grantee Program: <https://www.cde.state.co.us/healthandwellness/shpg>
- [HB23-1009](#) - Secondary School Student Substance Use.
- [HB23-1003](#) - School Mental Health Assessment

Prevention, Practice, Policy Resources and Key References

1. https://www.urban.org/sites/default/files/publication/105389/substance-use-and-age-of-substance-use-initiation-during-adolescence_0.pdf
2. Volkow ND, Han B, Einstein EB, Compton WM. Prevalence of Substance Use Disorders by Time Since First Substance Use Among Young People in the US. *JAMA Pediatr.* 2021;175(6):640–643).
3. Urban Institute. Potential Cost Savings Associated with Providing Screening, Brief Intervention, and Referral to Treatment for Substance Use Disorder in Emergency Departments A Rapid Review. June 2018.
4. Add another cost reference here:
5. [AAP Policy Statement](#) supporting SBIRT implementation.
6. Journal of Adolescent Health (2022) [SBIRT for Adolescent and Youth Adults: Critical Issues for Practice, Policy, and Strengthening the Substance Use Continuum of Care.](#)
7. The Community Guide/ Excessive Alcohol Use: <https://www.thecommunityguide.org/topics/excessive-alcohol-consumption.html#cc-widget-fb2c> .