

➤ WHAT IS SBIRT?

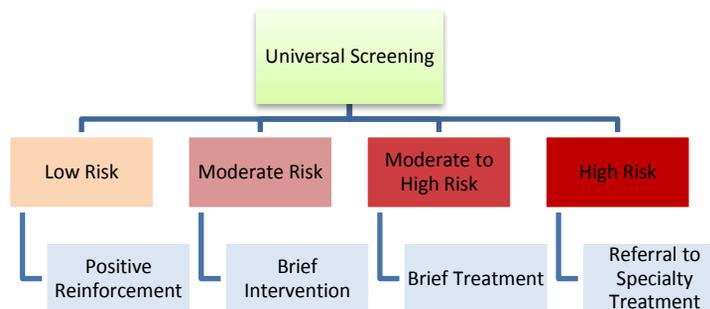
Screening, Brief Intervention, and Referral to Treatment (SBIRT) is a set of tools that helps identify alcohol or drug use and guides follow-up counseling and treatment if a problem exists. With adolescents, SBIRT is an effective prevention and early intervention strategy.

Screening and counseling are well-established best practices for helping young people avoid substance use. When we have honest conversations with young people about alcohol and drugs, we help them stay on the path to a bright future – or get back on track if they need help. SBIRT is endorsed by the American Academy of Pediatrics (AAP) and National Institute on Alcohol Abuse and Alcoholism (NIAAA).

“It can detect risk early. In contrast to other screens that focus on established alcohol problems, this early detection tool aims to help you prevent alcohol-related problems in your patients before they start or address them at an early stage.”²
-NIAAA

“The goal of applying universal SBIRT with adolescents is to identify an individual’s experience along this spectrum and institute the appropriate intervention for each adolescent”¹
-American Academy of Pediatrics

SBIRT Treatment Recommendations



Screening is provided universally to assess substance use and identify risky substance use.

Brief Intervention follows a screening result indicating moderate risk and is a guided conversation that uses motivational interview techniques to raise a young person’s awareness of substance use and its consequences, and motivate toward behavior change.

Brief Therapy follows a screening result of moderate to high risk. This is a more comprehensive conversation that includes further assessment, education, problem solving, coping mechanisms and building supportive social environments.

Referral to Treatment follows a screening result of severe or risk or dependence. The individual is then referred to developmentally appropriate specialty care.

What about screenings that indicate no risk?

Good news: Evidence shows that teens who receive a brief prevention message from a medical professional are about half as likely to initiate alcohol use over the next year!

Youth SBIRT for Massachusetts

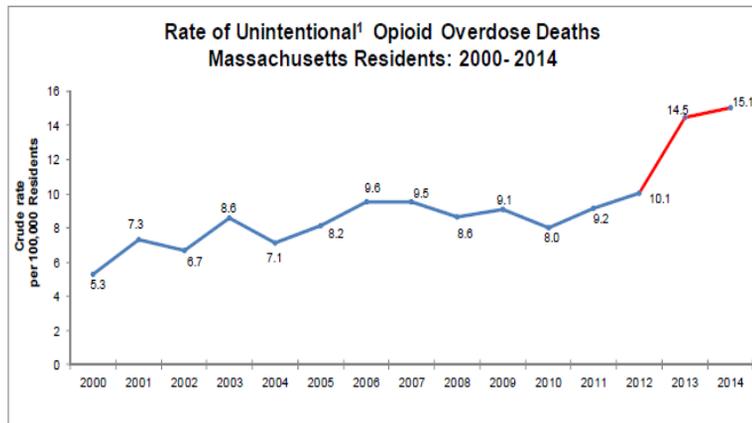
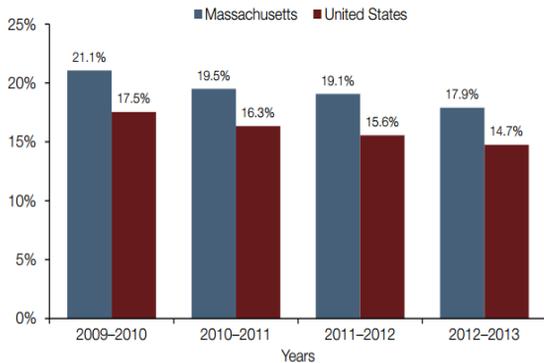


➤ Why we need SBIRT for Massachusetts's youth

Substance use and abuse is a growing problem in Massachusetts that affects thousands of youth and young adults across the Commonwealth. The adolescent brain is a work in progress – one that won't be fully finished until around age 25. Substance use affects the developing brain differently – and can have more significant long term effects. In fact, 90% of adults who meet the diagnostic criteria for addiction began using substances before the age of 18.

In Massachusetts, one in five high school students were offered, sold or given illegal drugs in school and one in four high school students currently use marijuana and alcohol—and many of those students are binge drinking.

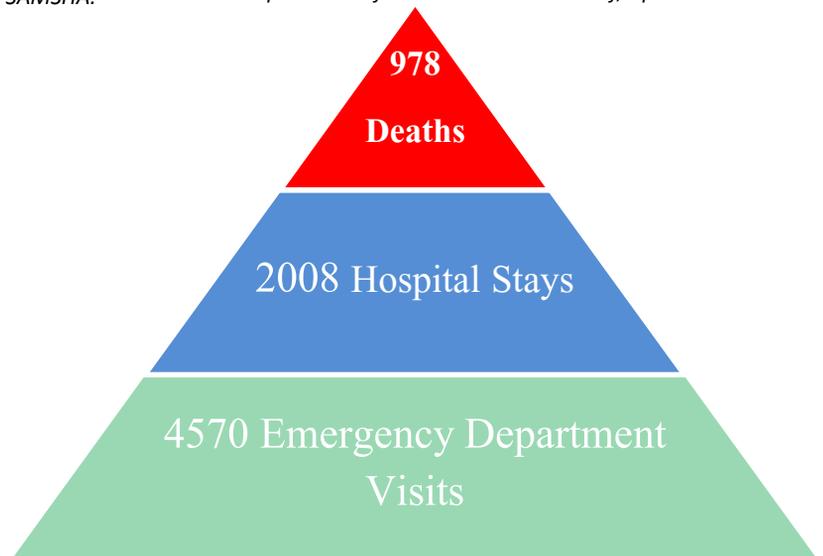
Massachusetts' percentage of binge alcohol use among people aged 12-20 was higher than the national percentage in 2012-2013.



Behavioral Health Barometer Massachusetts, 2014. SAMSHA. ⁴

MA Department of Public Health Data Brief, April 2015. ⁵

- ❖ In 2013, 978 people died in Massachusetts from an unintentional opioid overdose...that is 607 more than those killed in motor vehicle related injury death⁶
- ❖ From 2000 to 2012 there was a 90% increase in opioid overdose, many of these leading to unintentional deaths⁷

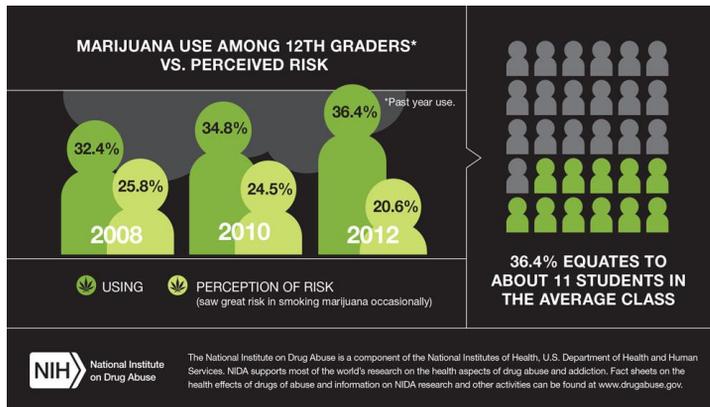
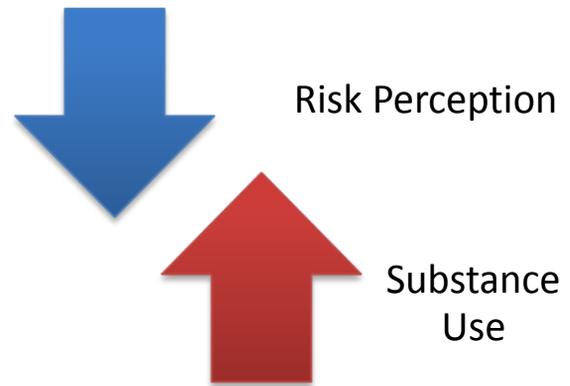


Burden of Unintentional Opioid-Related Overdoses Massachusetts, 2013. ⁸

Youth SBIRT for Massachusetts



Despite the proven dangers, adolescent risk perception is still shockingly low. In Massachusetts, 80% of adolescents from 2012-2013 perceived no great risk from smoking marijuana once a month and 65.8% perceived no great risk from drinking five or more drinks once or twice a week.⁹



As risk perception decreases, substance use increases, putting more adolescents at risk for developing unhealthy and risky behaviors. SBIRT is an effective and cost-efficient public health approach to starting the conversation with teens about the risks of alcohol and substance use and it is an important tool to address the spectrum of unhealthy substance use.

National Institute on Drug Abuse, 2012.

➤ SBIRT Works!

We know identifying young people who use alcohol or drugs is a very important first step in preventing drug and alcohol misuse. In fact, studies show simply asking young people about drugs and alcohol can lead to positive behavior changes.¹⁰

Research supports the use of brief intervention in schools, colleges and hospital emergency rooms to address alcohol use in young people:

- ❖ Young people respond to this counseling by drinking less often and reducing the number of drinks consumed at one time
- ❖ Brief interventions also ease alcohol-related consequences:
 - One study showed that for teens ages 14-18 counseling led to a 30 percent reduction in alcohol consequences, like skipping school or fighting with friends or family because of alcohol.¹¹

Youth SBIRT for Massachusetts



“Universal evidence-based preventative interventions can effectively and efficiently reduce nonmedical opioid use.”

-SBIRT aligns with Governor Baker’s Opioid Working Group recommendations.⁵

“As a group, adolescents are at the highest risk of experiencing substance use-related acute and chronic health consequences, so they are also the age group likely to derive the most benefit from universal SBIRT.”

-SAMHSA
The Substance Abuse and Mental Health Services Administration, identifies SBIRT as a best practice to address substance misuse, especially for adolescents.¹³

To learn more about youth SBIRT and the *Addiction Free Futures Project* visit www.childrensmentalhealthcampaign.org or contact Courtney Chelo at cchelo@mspcc.org

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