

Preventing Addiction with SBIRT

The Problem

Adolescents and young adults are in a critical window of vulnerability to substance misuse and addiction. Early access to screening and counseling is a cost-effective way to help young people avoid the destructive consequences of drug and alcohol problems. Unfortunately, few young people have access to these preventive services. Too often, the adults young people trust most are reluctant to begin the conversation.

The SBIRT Approach

SBIRT (screening, brief intervention, and referral to treatment) is a public health approach that involves asking young people a few questions about drug and alcohol use and providing guidance or referring them to treatment if a problem exists.



The Evidence for SBIRT

It's effective:

- Studies show that simply asking young people about drug and alcohol use can lead to positive behavior changes.^{1,2}
- There is a growing body of research indicating that brief interventions (short counseling sessions) with young people in schools and medical settings decrease drug and alcohol use and its related consequences.^{3,4,5,6,7}

It saves money:

 SBIRT can reduce health care costs. The average cost savings from implementing SBIRT is \$4 to \$6 for every \$1 spent.⁸

It's endorsed by the experts:

- The American Academy of Pediatrics (AAP) and National Institute on Alcohol Abuse and Alcoholism (NIAAA) explicitly endorse the use of SBIRT with young people.
- Other notable supporters of SBIRT include: the Substance Abuse and Mental Health Services Administration (SAMHSA), National Institute on Drug Abuse (NIDA), and White House Office of National Drug Control Policy (ONDCP).

SBIRT with young people can help prevent the tragic consequences of addiction.

Community Catalyst works to ensure consumer interests are represented wherever important decisions about health and the health system are made: in communities, courtrooms, statehouses and on Capitol Hill. www.communitycatalyst.org

References

³ Winters KC, Leitten W. Brief intervention for drug-abusing adolescents in a school setting. *Psychology of Addictive Behaviors*. 2007 Jun;21(2):249-54.

⁴ Borsari B, Carey KB. Effects of a brief motivational intervention with college student drinkers. *Journal of Consulting & Clinical Psychology*. 2000; 68:728–33.

⁵ D'Amico EJ, Miles JN, Stern SA, Meredith LS. Brief motivational interviewing for teens at risk of substance use consequences: a randomized pilot study in a primary care clinic. *Journal of Substance Abuse Treatment*. 2008;35(1):53-61.

⁶ Walton MA, Chermack ST, Shope JT, Bingham R, Zimmerman MA, Blow FC, & Cunningham RM. Effects of a brief intervention for reducing violence and alcohol misuse among adolescents: a randomized controlled trial. *Journal of the American Medical Association*. 2010;304(5):527-535.

⁷ Bernstein E, Edwards E, Dorfman D, et al. Screening and brief intervention to reduce marijuana use among youth and young adults in a pediatric emergency department. *Academic Emergency Medicine*. 2009; 16:1174–85.

⁸ Office of National Drug Control Policy. Cost Benefits of Investing Early In Substance Abuse Treatment. 2012. https://www.whitehouse.gov/sites/default/files/ondcp/Fact_Sheets/investing_in_treatment_5-23-12.pdf

¹ Kaner E. et al (2013). Effectiveness of screening and brief alcohol intervention in primary care (SIPS trial): pragmatic cluster randomised controlled trial. *British Medical Journal*. 2013; 346e8501.

² McCambridge J, Strang J. The efficacy of single-session motivational interviewing in reducing drug consumption and perceptions of drug-related risk and harm among young people: Results from a multi-site cluster randomized trial. *Addiction*. 2004; 99:39-52.