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Adolescent Screening, Brief Intervention, and Referral to Treatment for Substance Use: An Application for School Social Workers

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Abstract

Alcohol, tobacco, marijuana, and other substance use by adolescents can have a serious impact on their health and well-being according to the American Academy of Pediatrics (AAP, 2016). School social workers (SSW) are trained to conduct assessments and interventions with adolescents and families to improve their functioning and academic performance (National Association of Social Workers [NASW], 2003). Also, substance abuse prevention, identification, brief intervention, and referral to treatment are supported by the profession's standards for working with adolescents (NASW, 2003). For SSW interested in incorporating these services into their work, this practice highlights column describes the importance and principles of conducting adolescent screening, brief intervention, and referral to treatment (SBIRT) for substance use. Highlights are drawn from *Substance Use Screening and Intervention Implementation Guide: No Amount of Substance Use Is Safe for Adolescents* (hereinafter, AAP Guide), a guide developed through a cooperative agreement between AAP and Centers for Disease Control and Prevention (CDC) (AAP, 2016).

MAGNITUDE OF ADOLESCENT SUBSTANCE USE ISSUES

Most educators and SSW recognize adolescent substance use as a serious problem with potentially harmful effects. CDC's 2015 Youth Risk Behavior Survey among high school students reported that more than 73 percent have used alcohol by 12th grade, almost 40 percent have tried marijuana, and about 17 percent have taken prescription drugs without a

doctor's prescription (CDC, 2017). These troubling rates of substance use emphasize the need for interventions for adolescents in multiple settings, including schools, to prevent negative consequences.

ADVERSE EFFECTS

Adolescent substance use is particularly problematic because of the adverse health and education effects. A first encounter with a substance can impair decision making, causing injury, victimization, and even death (Levy, Williams, & AAP Committee on Substance Use and Prevention, 2016). Substance use can affect student learning, resulting in missed classes, memory difficulties, and deterioration of study habits. Most concerning are the long-term impacts on brain development (Levy et al., 2016). Adolescence extends into a student's early twenties, a time of rapid and robust neurodevelopmental maturation (AAP, 2016; Levy et al., 2016). Synaptic connections and pathways are still being formed in adolescence and may be compromised by substance use, and certainly by substance misuse (AAP, 2016). Behavioral risks are also associated with adolescent substance use, such as driving under the influence, unplanned pregnancies, and sexually transmitted infections (AAP, 2016). Thus, it is important to educate adolescents about the risks of substance use, assess their use, and intervene wherever possible, including in school settings.

PRINCIPLES OF SBIRT

The effectiveness of alcohol screening and brief intervention for adults is well established. SBIRT research with adolescents continues to grow and findings are promising (Tanner-Smith & Lipsey, 2015). According to the 2016 AAP Committee on Substance Use and Prevention, SBIRT for adolescents is beneficial given the low cost, minimal risk for harm, and new promising studies. The committee encourages integrating SBIRT practices into adolescent standards of care. Such benefits could be enhanced by implementing SBIRT in additional settings, such as schools. The AAP Guide includes information on adolescent SBIRT starting as early as nine years of age (AAP, 2016). SBIRT is an evidence-based approach with three main elements: (1) screening, (2) brief intervention, and (3) referral to treatment (Substance Abuse and Mental Health Services Administration, n.d.).

Screening

The AAP Guide lists several validated screening instruments for substance use that SSW could use. One example is the 2015 National Institute on Alcohol Abuse and Alcoholism Youth Alcohol Screen. The Appendix has additional examples. Validated tools assess both quantity and frequency of use. The AAP Guide suggests that questions be asked exactly as written to ensure reliability and validity (AAP, 2016).

Brief Intervention

This is a short conversation with the student, giving feedback and advice (AAP, 2016). It can help prevent, reduce, or stop substance use. Although a brief intervention is not intended to solve all substance use issues, SSW may be able to conduct a brief intervention that is appropriate for most students. The AAP Guide provides examples of language and dialogue

to use for both substance users and nonusers. For students who do not report substance use, the AAP Guide recommends positive reinforcement for their behavior and decision to abstain. The AAP Guide also provides suggestions to address misconceptions adolescents may have about substance use. An initial component usually includes information on how the student's substance use compares with peers' use, particularly pointing out that not all students use substances (AAP, 2016). Another piece is providing information on the harmful effects of substances, particularly on brain development in adolescence (AAP, 2016). A final component typically includes a session encouraging the student to make healthy and safe choices, emphasizing that the student is making the choice to use or not use substances (AAP, 2016). Other topics may be included as relevant to each student's needs.

Referral to Treatment

For high-risk adolescents, those who use substances weekly or more, referral to treatment may be needed (AAP, 2016). SSW can play a major role in the referral process. It would be helpful for SSW to be aware of treatment resources available in the community to connect students to services. More information is provided in the AAP Guide.

SBIRT IN SCHOOL SETTINGS AND THE ROLE OF SSW

Schools are settings where adolescents spend time with adults engaged in their development. Given their educational mission as well as their intense and prolonged contact with adolescents throughout adolescence, schools are in a unique position to provide SBIRT. According to Mitchell, Gryczynski, O'Grady, and Schwartz (2013), schools are also a promising venue for universal screening, making them a logical setting for carrying out SBIRT. First, they generally have regular access to students, making screening and delivery of SBIRT feasible. Second, many schools have a designated space for SSW, where SBIRT could be conducted in confidence. Third, because SSW can spend considerable time with students, they can monitor changes in behavior and substance use and offer SBIRT as needed.

SSW are well positioned to educate and counsel adolescents regarding substance use and provide referral to treatment if needed. SSW collaborate with a variety of other school staff, giving them a wide perspective on events and issues occurring in students' lives, as well as concerns identified by other staff. SSW also have experience linking the school, home, and community to "help students achieve academic success" (NASW, 2003) in ways other educational staff may not. For these reasons, SSW can play a critical role in addressing adolescent substance use and implementing SBIRT.

SPECIAL CONSIDERATIONS AND TIPS FOR SSW

One tip for implementing SBIRT is to include questions about alcohol and other drugs within existing intake or biopsychosocial assessment forms, which also helps conduct SBIRT in a nonjudgmental manner. Also, practice screening questions aloud so they sound natural. Preparing talking points on a variety of scenarios and responses can help with anxiety about implementing SBIRT (AAP, 2016). Confidentiality and school policies regarding zero tolerance can create special concerns and challenges for SSW in discussing

substance use with students. The 2017 NASW *Code of Ethics* states that SSW should be aware of and abide by all policies of the school, district, and state. For instance, SSW would notify school administrators of students who reveal behaviors or intentions posing imminent danger to themselves or others. Establishing boundaries of confidentiality and zero tolerance issues with administrators could avoid ethical dilemmas in a crisis. Trainings for ethical dilemmas and other issues, such as common clinical concerns and recognition of when specialized care is needed, may help SSW develop appropriate techniques.

SUMMARY

Substance use among adolescents can have a tremendous impact on their health, development, and learning. SBIRT can help identify substance use issues early and intervene before serious problems emerge. SSW can play an important role in educating students about substance use and identifying students who may be at risk. Implementing SBIRT in school settings is best achieved with commitment from school administrators, careful planning, prepared and well-trained staff, and close monitoring of implementation processes. The AAP Guide and its resources can help inform adaptations necessary for the school environment.

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

APPENDIX

Resources for School Social Workers

Alcohol Screening and Brief Intervention for Youth: A Practitioner's Guide

https://pubs.niaaa.nih.gov/publications/Practitioner/YouthGuide/YouthGuide.pdf

Learner's Guide to Adolescent SBIRT

https://www.ncmhjj.com/wp-content/uploads/2016/11/Adolescent-SBIRT-Learners-Guide-V2.pdf

Screening to Brief Intervention (S2BI)

http://www.mcpap.com/pdf/S2BI%20Toolkit.pdf

Brief Screener for Tobacco, Alcohol, and Other Drugs

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4006430/figure/fig1/

CRAFFT screening tool

http://ceasar.childrenshospital.org/crafft/

Alcohol Use Disorders Identification Test (AUDIT)

https://pubs.niaaa.nih.gov/publications/Practitioner/YouthGuide/AUDIT.pdf

Lessons Learned from the Implementation of SBIRT for Adolescents in School-Based Settings

http://adolescentsubstanceuse.org/wp-content/uploads/2017/09/SBHC_Convening_2016-FINAL.pdf

Brief Intervention Demonstration Video

http://www.sbirtoregon.org/video-demonstrations/

Social Work SBIRT Resources

https://cswe.org/Centers-Initiatives/Social-Work- and -Integrated-Behavioral-Health care-P/SBIRT-Resources and -Integrated-Behavioral-Health care-P/SBIRT-Resources

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