

Effect of Screening and Brief Intervention for Illegal Drug Use in Southern California

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What is CASBIRT?

California's Screening, Brief Intervention, and Referral to Treatment



- San Diego County selected for CSAT's California site.
- Services began with one non-profit then transferred to SDSU Center for Alcohol and Drug Services.
 - SDSU Rehired and retrained former health educators. Add professional staff including psychologist, MSWs and Ph.D. social worker (MI expert).
 - CSAT requested changes from original protocol (ASSIST vs. Audit and DAST), tablet driving assessment and intervention, etc.
 - Re-do MOUs, IRBS, etc...

SBIRT Overview

- ED Based Approach "Universal Screening"
- Integrated with primary care and emergency medical services
- Conceptually viewed medical visits as "teachable moments"
- Emphasis on non-dependent users



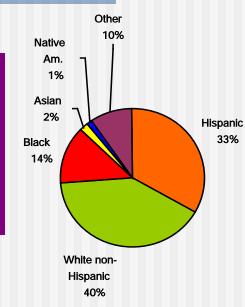
Intervention Description: CASBIRT Services

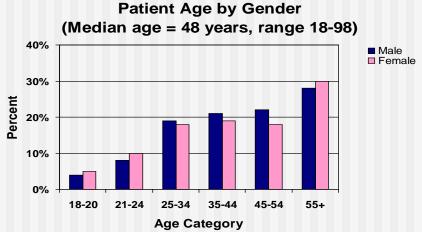
- Patients 18 and older were
 routinely screened by certified,
 bilingual Health Educators (HEs)
 in EDs and trauma units
- Face-to-face interviews used valid & reliable screening instruments to identify misuse of alcohol and drugs
- All patients received clinically appropriate intervention depending upon scores
- Intervention infused with motivational enhancement techniques

Risk Level	Intervention
Low	Reinforcement
At Risk	Brief
"Primary Target"	Intervention
High	Brief
	Treatment
Severe	Referral to Outside Agency

Overall CASBIRT Reach

- Services delivered 2007-2010
- 12 ED/trauma sites
- 120,000 screenings/interventions completed





Illicit Drug Use

- Public health problem
 - Morbidity, mortality, economic burden, social costs (e.g., criminal activity), personal suffering
- San Diego is a major drug corridor
- SBI approach not well studied for drug use
- This study assessed the effects of SBIRT services on drug users visiting the ED



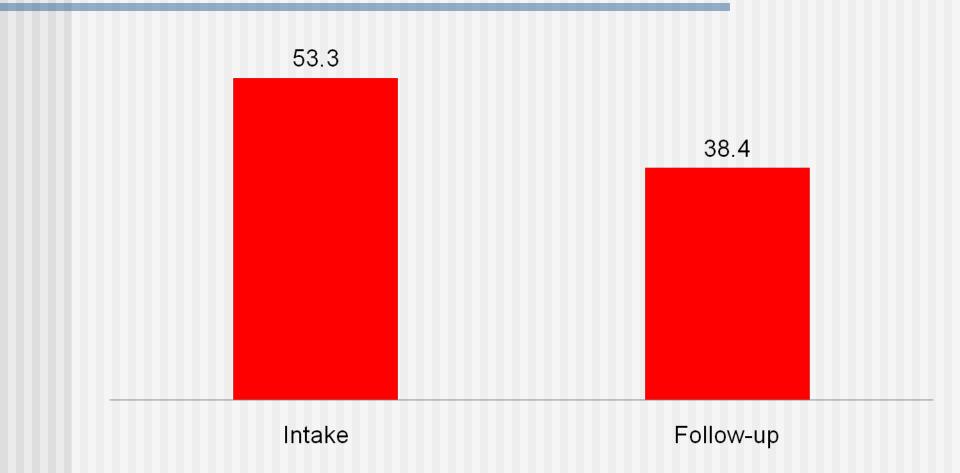
Methods

- 1,171 patients reported risky drug use at intake that exceeded their alcohol use risk, received the SBIRT intervention, and were selected for follow-up
- 32% (n=373) were re-interviewed six months later
- Due to low response rate, an intention to treat (ITT) approach was used in which intake values were substituted for missing follow-up
- GLMM used to assess changes in self-reported prevalence of past 30 day illicit drug use, and days of use in the past 30 days

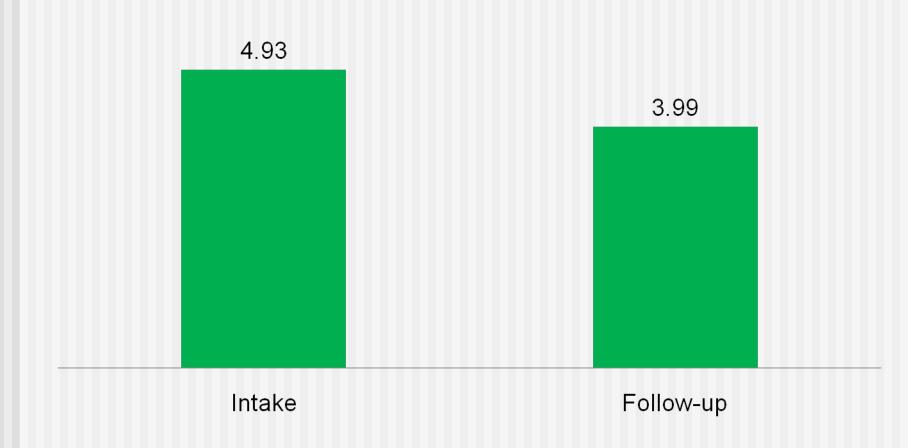
Sample Characteristics (n=1,171)

- 50% male
- 44% non-Latino White, 35% Latino, 15% Black, and 7% Other
- Average age was 37 (SD=13.3)
- Most common drugs used were marijuana (29%), methamphetamine (13%) and heroin (7%)

Changes in Prevalence of Past 30 Day Drug Use among ITT Sample Adjusting for Site (p < .001)



Changes in Mean Number of Days of Illicit Drug Use in Past 30 Days among ITT Sample Adjusting for Site (p < .001)



Conclusions

- A conservative analysis approach suggested that ED patients exposed to SBIRT services reported decreased drug use prevalence and days of use
- Limitations—No Randomization or Control
- Current Study— Randomized, Attention Placebo Control Study…