SBIRT Data Brief: VT Colleges

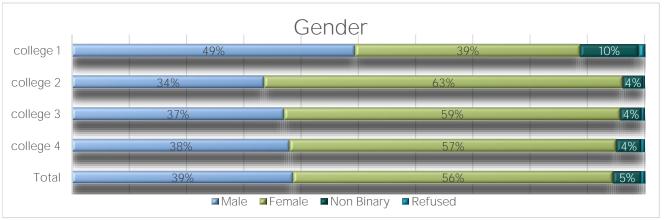


This data brief includes data for 4 colleges in Vermont from August 2021 through May 2022. We report on 1558 students and their substance use risks, mental health risks, and interventions provided. For the purposes of anonymity, colleges' institutional names are removed.

SBIRT is a comprehensive, integrated, public health approach for universal screening, the delivery of early motivational interventions, and referral to treatment for persons at risk for or living with substance use or mental health disorders.

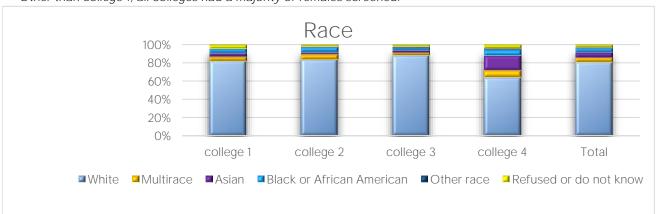


Who was screened?



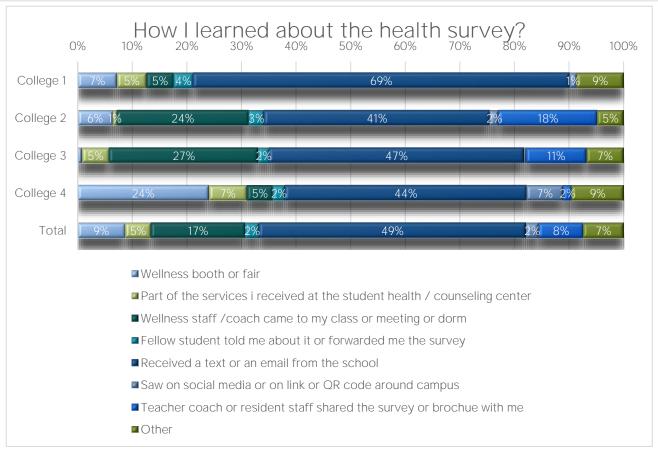
^{*} In all, 602 students screened were Male, 870 Female, 77 Non Binary and 9 Refused.

^{**} Other than college 1, all colleges had a majority of females screened.



^{*} The majority of students screened were White in all colleges, with college 4 being the most diverse.

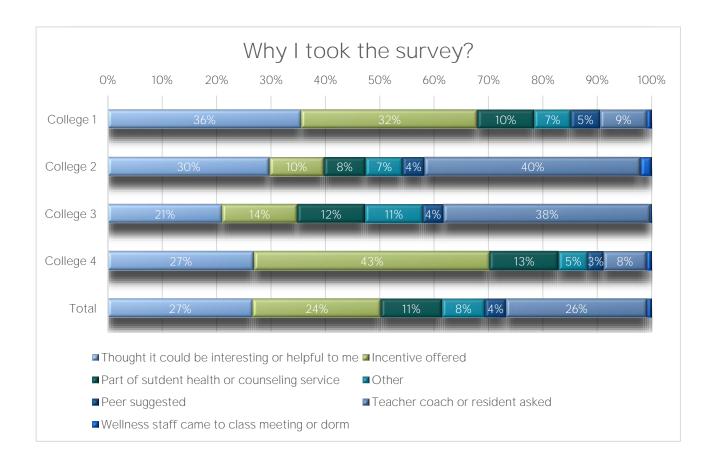
Outreach efforts to engage students and meet students where they are at are unique to college settings. This differs from the traditional SBIRT model of screening within a medical setting in the context of a medical appointment. This means conducting outreach across campus settings and with individual students as they go about their daily college life. Students are invited to take a wellness survey to look at their own health related behaviors including substance use and mental health.



^{*} Across all colleges, students completing the survey endorsed learning about the survey via email the most, followed by through a wellness coach or staff coming to a class, meeting, or dorm. In college 4 learning about it at a booth or fair was also a preferred choice.

"This kind of surround sound YSBIRT screening was particularly important on the heels of a very isolating time for students - the YSBIRT team was able to affect a culture of well-being on campus by reaching students in a variety of ways and places and increasing the visibility of support." - College Coordinator of Health

"I first connected with [SBIRT Clinician] after she spoke in one of my classes. Based on my previous mental health difficulties I knew I didn't need formal counseling, but there were a few things weighing on me and I felt myself sliding into some feelings of depression. Speaking with [Clinician] was just what I needed to get on top of what I was facing. She really understood how I was feeling and gave me some practical and specific ideas to implement. Thankfully I took her advice and it really helped me get out of the funk I was in at the time. I'm really glad this service was available as a way for me to be proactive about my mental health and I'm sure I will go back to her in the future." - Student Quote



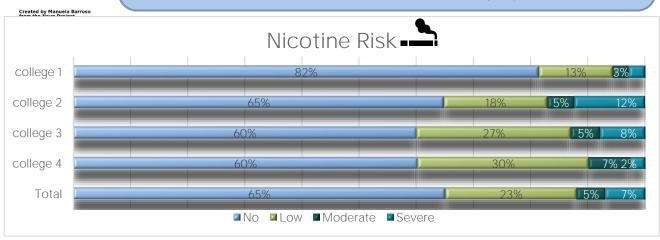
^{*} The top reasons students decided to take the survey are: students thought it could be helpful, a teacher coach or resident asked, and an incentive was offered.

How is substance use screening done?



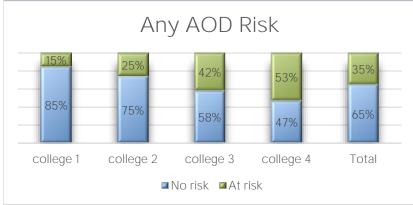
Screening tools used:

- Frequency of nicotine use
- The U.S. Alcohol Use Disorders Identification Test (Audit)
- The Drug Abuse Screening Test (DAST) 10 items
- The Cannabis Intervention Screener (CIS)

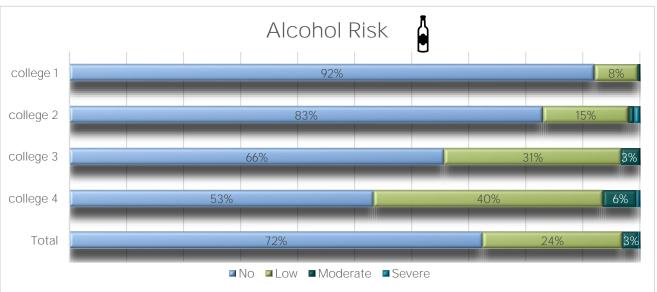


35% of students screened are at some risk of nicotine use.

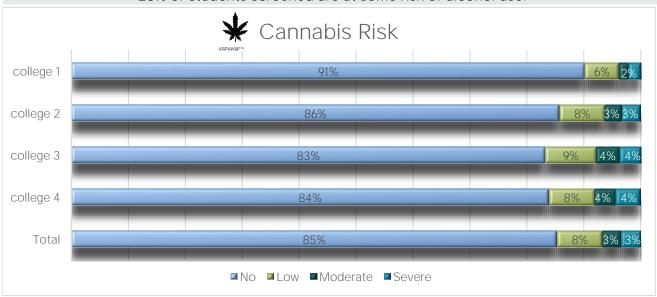
Alcohol and Other Drug Use Risk



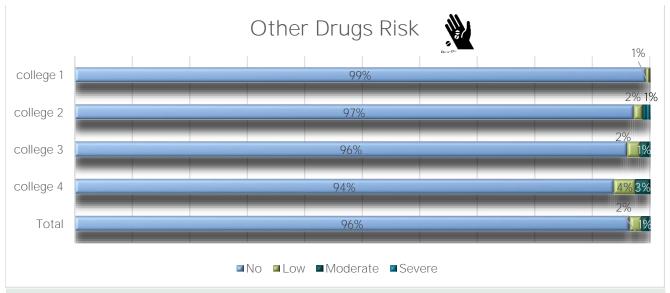
*AOD risk includes those who score positive for risk for alcohol, marijuana, or other drugs based on our screening tools, excluding nicotine.



28% of students screened are at some risk of alcohol use.



15% of students screened are at some risk of cannabis use.

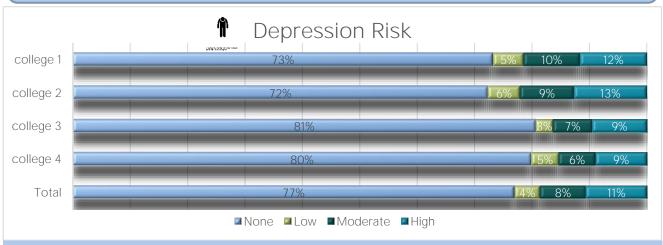


4% of students screened are at some risk of other drug use.

"The ability to hire a specialist to provide these screening services, as well as prevention and early intervention services, has given us the ability to better monitor and serve the well-being of our students." - University Wellness Director

Mental Health Risk

To screen for depressive mood, the Patient Health Questionnaire-9 (PHQ) was used. To screen for anxiety, the General Anxiety Disorder-7 (GAD) was used.

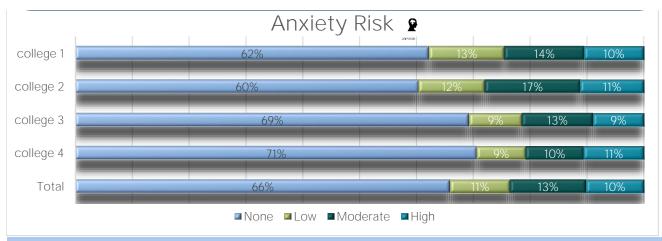


23% of students screened are at some risk of depression.

*164 students experienced thoughts of self-harm

"We wanted to pursue YSBIRT [...] because we believed that there were students with mental health challenges and substance use issues who were falling between the cracks so their needs were going unaddressed. We hoped that the YSBIRT screening and intervention would help to minimize the number of students falling between the cracks." - College Staff

^{*} Other drugs includes misuse of prescription drugs and the use of illegal drugs.



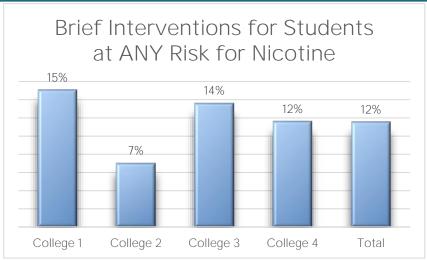
34% of students screened are at some risk of anxiety.

* 14% of students screened have co-occurring risks of both AOD and MH

Substance Use Interventions

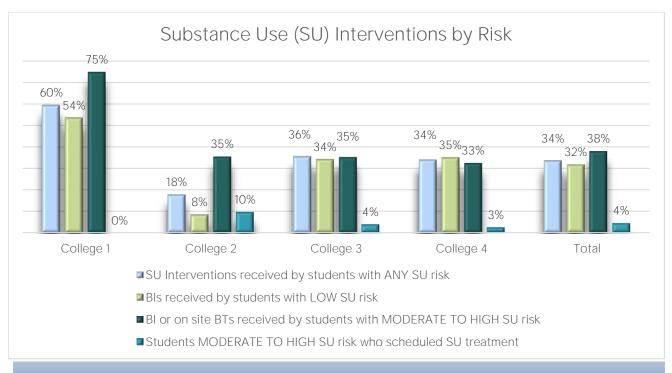
Individuals scoring in the low risk range are recommended for brief interventions (BI). BI is a technique used to initiate change discussion focused on unhealthy or potentially risky behavior with the goal of having the individual make a commitment to change. Those scoring in the moderate to severe risk range are recommended for on site brief treament (BT) and referral to specialty substance abuse treatment respectively.

"The YSBIRT process allows health educators to provide quick intervention and to make informed and effective referrals to other appropriate resources as needed." - College Staff



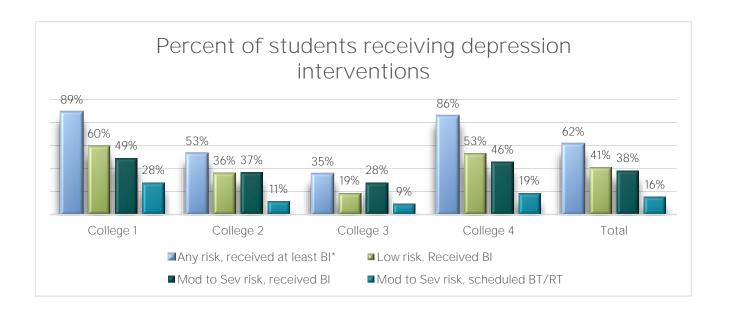
Bls for students who report a frequency of weekly or more or daily nicotine use is 16% (college 1= 31%, college 2= 9%, college 3= 15%, college 4 = 16%)

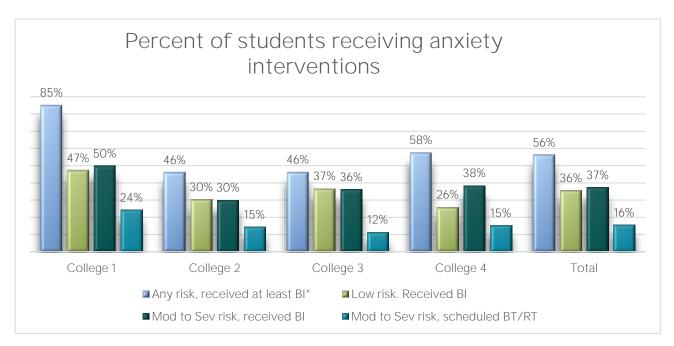
"The act of having the conversation was a form of accountability to ensure I stick to the goals I set for myself...." -Student Quote



Mental Health Interventions

Individuals scoring in the low risk range are recommended for brief interventions (BI). For mental health, BI is a technique used to initiate change discussion focused on the impact of mental health symptoms with the goal of having the individual make a commitment to engage in wellness strategies. Those scoring in the moderate to severe range are recommended for on site brief treament (BT) and referral to outside mental health treatment respectively.





Conducting SBIRT on college campuses apart from the traditional student health setting is unchartered territory. Lessons learned to date are that females were more likely to take the survey compared to males. Further, those who took the survey represented a greater percentage of racial diversity compared to Vermont's rates. Students were most likely to learn about the survey via emails or text followed by outreach from a wellness coach or staff coming to a class, meeting or dorm. Students most often elected to take the SBIRT wellness screen as they thought it could be helpful, because they were asked to take it or because an incentive was offered. In terms of substance use, across all college settings 35% of students had some level of nicotine risk and 35% of students had some level of alcohol, cannabis and other drug risk; 23% of students were at some risk of depression while 34% were at some risk for anxiety. One in three students with substance use risk and two in three students with mental health risk received an intervention. Thus, a focus of the upcoming academic year is to increase intervention rates among students with risk. Stay tuned!