



Substance Use Outcomes

4.60.WA.2009.2| Final Report: WASBIRT



All WASBIRT Hospitals

Six-Month Follow-up Survey of WASBIRT Patients
April 12, 2004 - March 31, 2008

Sharon Estee, Ph.D., Lijian He, Ph.D., Summer Yang, John Doane, Melissa Ford Shah

In collaboration with Division of Alcohol and Substance Abuse

Stephen O'Neil, Project Director; John Taylor, Acting Director

Use of alcohol and other drugs declined among emergency department patients who received brief interventions for substance use disorders through WASBIRT

There are nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen primarily emergency department patients for alcohol and drug use. Based on the patient's level of risk for substance use disorders, the counselor provides brief interventions to anyone at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 5,598 out of 30,210 WASBIRT patients who received at least a brief intervention were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 4,168 individuals in the sample – a response rate of 79%.

Patients from all WASBIRT hospitals who received brief interventions through the WASBIRT Project as well as those who went on to receive additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol and other drug use increased.
- Binge drinking declined.

Among all patients who received at least a brief intervention, the average number of days of alcohol or drug use declined:

- From 8.0 to 4.2 days for drinking ($p < .05$).
- From 4.7 to 1.7 days for binge drinking ($p < .05$).
- From 6.2 to 3.2 days for drug use ($p < .05$).

Among the subset of patients who drank or used drugs in the 30 days before they were screened and received a brief intervention, a large proportion reported fewer days of drinking or drug use at the time of the follow-up survey.

- 79% of 2,886 patients who drank alcohol reduced the number of days of drinking in the past 30 days, and 38% stopped drinking altogether.
- 87% of 1,824 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days.
- 85% of 1,840 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 35% stopped using drugs.

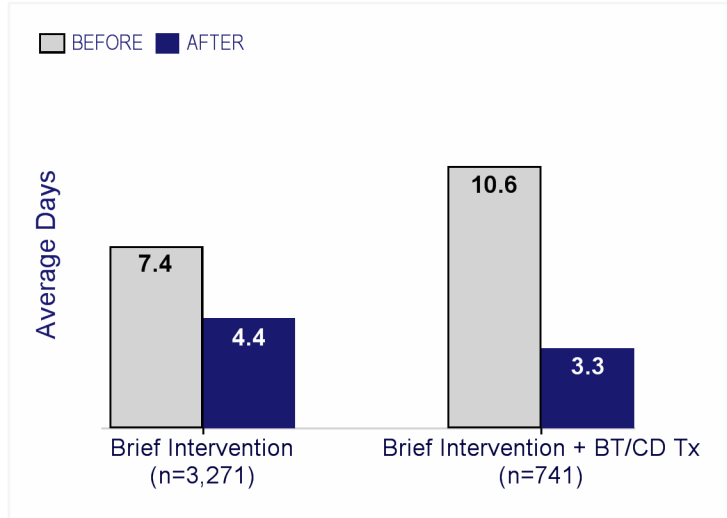
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days decreased as follows:

From 7.4 to 4.4 days (40% decrease) for patients who received a brief intervention only ($p < .05$).

From 10.6 to 3.3 days (69% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 8.0 to 4.2 days (47% decrease) overall ($p < .05$).

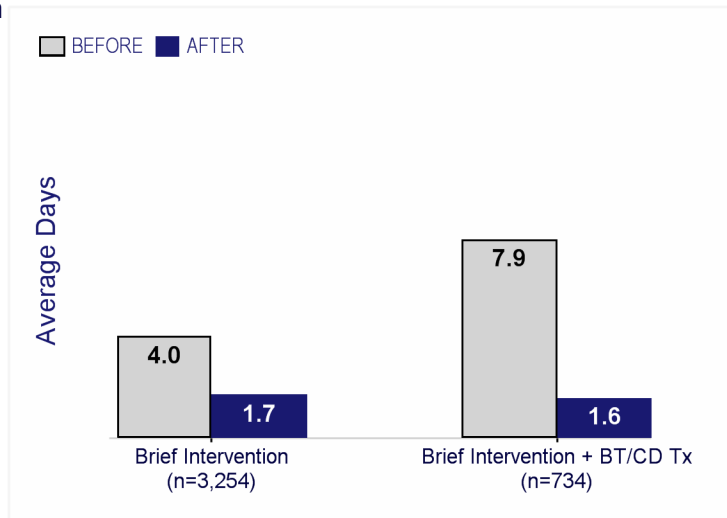


Average days of binge drinking in the past 30 days decreased as follows:

From 4.0 to 1.7 days (58% decrease) for patients who received a brief intervention only ($p < .05$).

From 7.9 to 1.6 days (80% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 4.7 to 1.7 days (65% decrease) overall ($p < .05$).

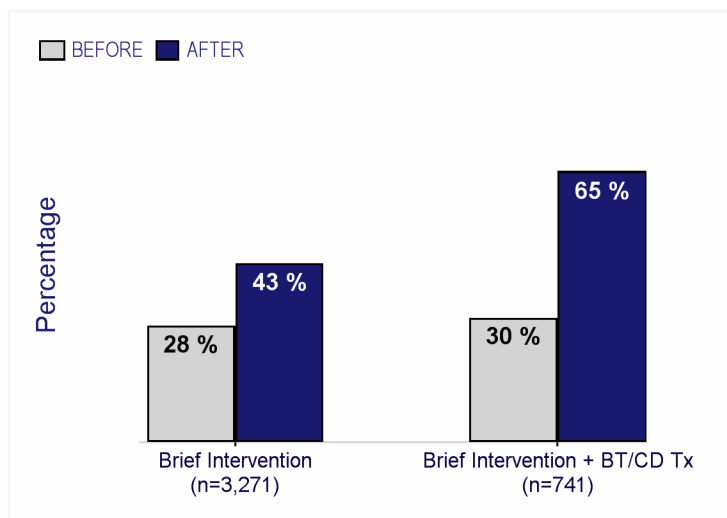


Abstinence from alcohol increased significantly:

From 28% to 43% (56% increase) for patients who received a brief intervention only ($p < .05$).

From 30% to 65% (116% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 28% to 47% (68% increase) overall ($p < .05$).



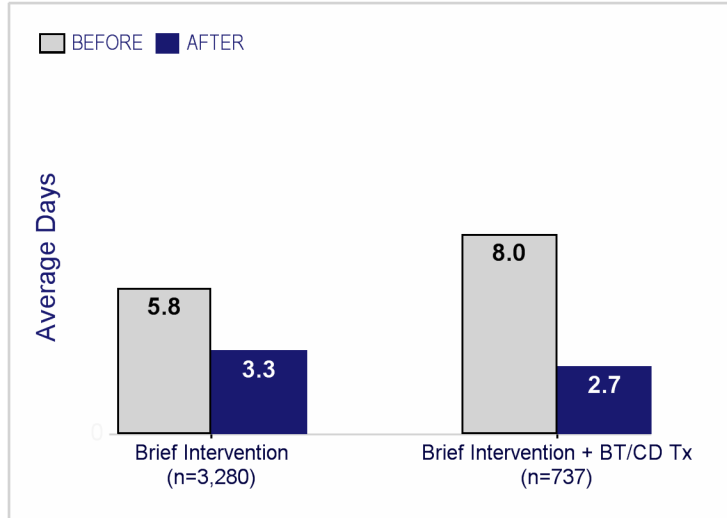
Drug Use Outcomes

Average days of drug use in the past 30 days decreased as follows:

From 5.8 to 3.3 days (43% decrease) for patients who received a brief intervention only ($p < .05$).

From 8.0 to 2.7 days (66% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 6.2 to 3.2 days (48% decrease) overall ($p < .05$).

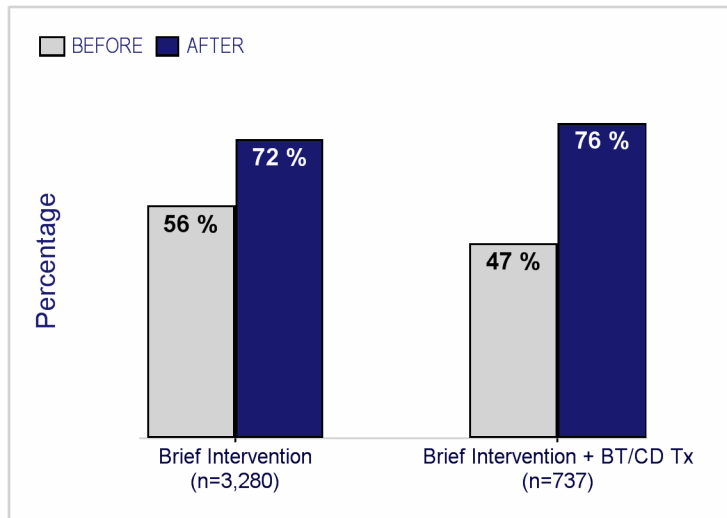


Abstinence from drug use increased significantly:

From 56% to 72% (29% increase) for patients who received a brief intervention only ($p < .05$).

From 47% to 76% (64% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 54% to 73% (35% increase) overall ($p < .05$).



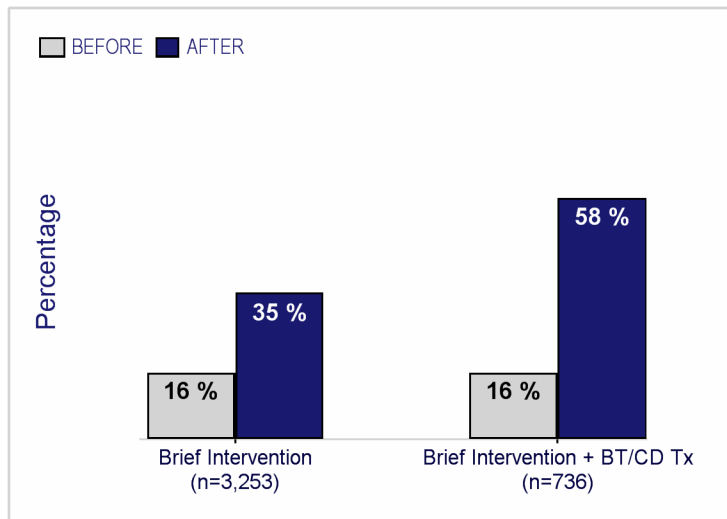
Abstinence from Alcohol and Drugs

Abstinence from alcohol and drug use increased significantly:

From 16% to 35% (127% increase) for patients who received a brief intervention only ($p < .05$).

From 16% to 58% (269% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 16% to 40% (150% increase) overall ($p < .05$).



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 30,210 WASBIRT patients who received at least a brief intervention, a sample of 5,598 patients was selected for the follow-up survey. Interviews were completed with 4,168 individuals in the sample—a response rate of 79% percent (excluding 70 people who died by the time the interview was due).

Analyses were based on 4,012 participants with complete data on alcohol use, 3,988 with complete data on binge drinking, and 4,017 with complete data on drug use. Analyses excluded 66 participants (1.6%) who did not receive a brief intervention because the patient was not willing to talk to the counselor, was already in treatment, or for some other reason. Analyses also excluded 54 participants (1.3%) who did not give permission for the use of chemical dependency treatment records needed to classify the level of intervention. Beginning in July 2005, sample selection criteria were refined such that only those with moderate or high risk for substance use disorders were eligible for the follow-up survey.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- *Used any alcohol?*
- *Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)*
- *Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)*

Classification of Risk and Intervention Groups

Outcomes' risk levels were based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Two groups were used in analyses: (1) those who received only a brief intervention and (2) those who received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records or from the Division of Alcohol and Substance Abuse's treatment data (TARGET) for the 4,114 participants who gave permission for the use of administrative records.

The average AUDIT and DAST scores are shown below for patients who received a screen only, a brief intervention only, or a brief intervention plus brief therapy or CD treatment. The table also shows the recommended level of intervention based on the degree of risk for a substance use disorder.

	Screen Only (Not in follow-up survey)	Brief Intervention Only	Brief Intervention Plus Brief Therapy or CD Treatment
Average Scores			
AUDIT	1	5	16
DAST	0	1	4
Criteria for Intervention			
AUDIT - Female	Less than 7	7 - 15	16 - 40
AUDIT - Male	Less than 8	8 - 15	16 - 40
DAST	0	1 - 4	5 - 10
Binge drinking		x	
Drank alcohol before injury		x	

This report was funded through grant number 1 UD1 TI15962-05 from the Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment to the Office of the Governor.

Additional copies of this paper may be obtained from: <http://www1.dshs.wa.gov/RDA>
or <http://www1.dshs.wa.gov/dasa>

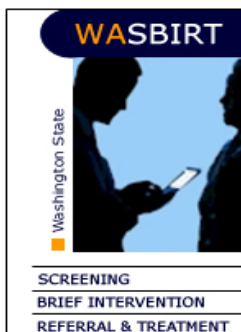


Research and Data Analysis Division Report Number 4.60.WA.2009.2



Substance Use Outcomes

4.60.HMC.2009.2| Final Report: HMC



Harborview Medical Center

Six-Month Follow-up Survey of WASBIRT Patients
April 12, 2004 - March 31, 2008

Sharon Estee, Ph.D., Lijian He, Ph.D., Summer Yang, John Doane, Melissa Ford Shah

In collaboration with Division of Alcohol and Substance Abuse

Stephen O'Neil, Project Director; John Taylor, Acting Director

Use of alcohol and other drugs declined among emergency department patients who received brief interventions for substance use disorders through WASBIRT

Harborview Medical Center (HMC) is one of the nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen primarily emergency department patients for alcohol and drug use. Based on the patient's level of risk for substance use disorders, the counselor provides brief interventions to anyone at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 1,474 out of 7,552 HMC patients who received at least a brief intervention were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 966 individuals in the sample – a response rate of 72%.

Harborview Medical Center patients who received brief interventions through the WASBIRT Project as well as those who went on to receive additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol and other drug use increased.
- Binge drinking declined.

Among all patients who received at least a brief intervention, the average number of days of alcohol or drug use declined:

- From 9.4 to 5.4 days for drinking ($p < .05$).
- From 5.7 to 2.2 days for binge drinking ($p < .05$).
- From 7.1 to 4.1 days for drug use ($p < .05$).

Among the subset of patients who drank or used drugs in the 30 days before they were screened and received a brief intervention, a large proportion reported fewer days of drinking or drug use at the time of the follow-up survey.

- 79% of 663 patients who drank alcohol reduced the number of days of drinking in the past 30 days, and 35% stopped drinking altogether.
- 85% of 433 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days.
- 83% of 488 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 35% stopped using drugs.

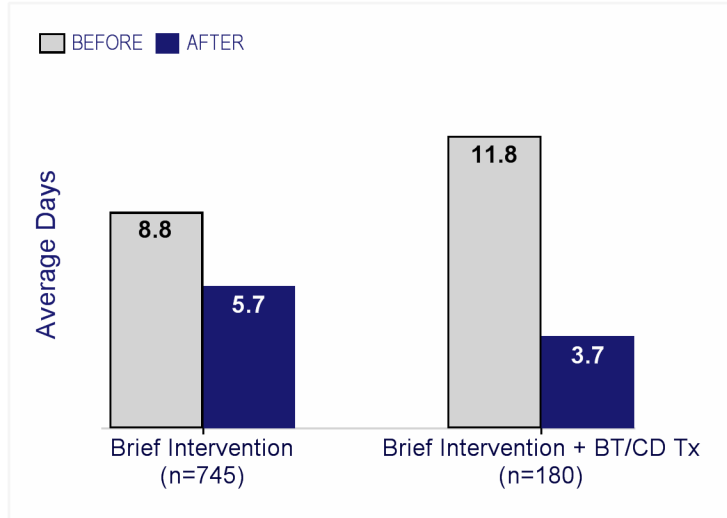
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days decreased as follows:

From 8.8 to 5.7 days (34% decrease) for patients who received a brief intervention only ($p < .05$).

From 11.8 to 3.7 days (69% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 9.4 to 5.4 days (43% decrease) overall ($p < .05$).

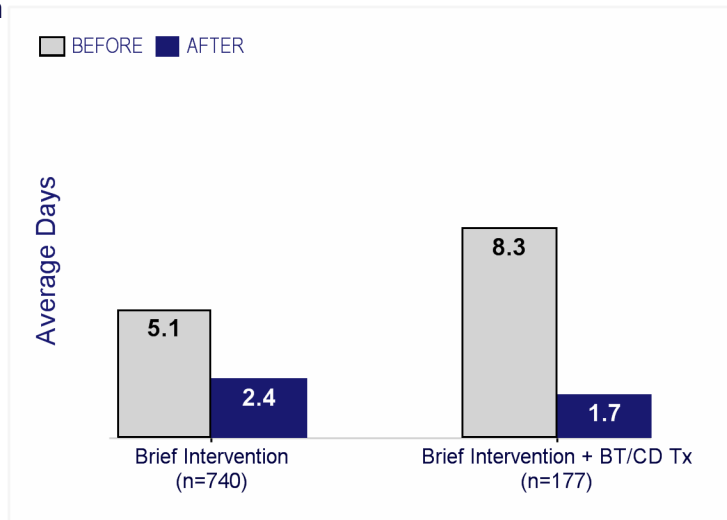


Average days of binge drinking in the past 30 days decreased as follows:

From 5.1 to 2.4 days (54% decrease) for patients who received a brief intervention only ($p < .05$).

From 8.3 to 1.7 days (79% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 5.7 to 2.2 days (61% decrease) overall ($p < .05$).

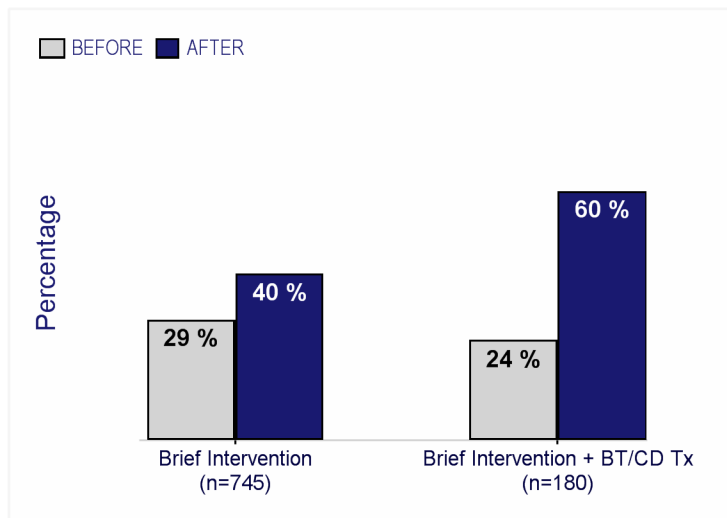


Abstinence from alcohol increased significantly:

From 29% to 40% (38% increase) for patients who received a brief intervention only ($p < .05$).

From 24% to 60% (146% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 28% to 44% (57% increase) overall ($p < .05$).



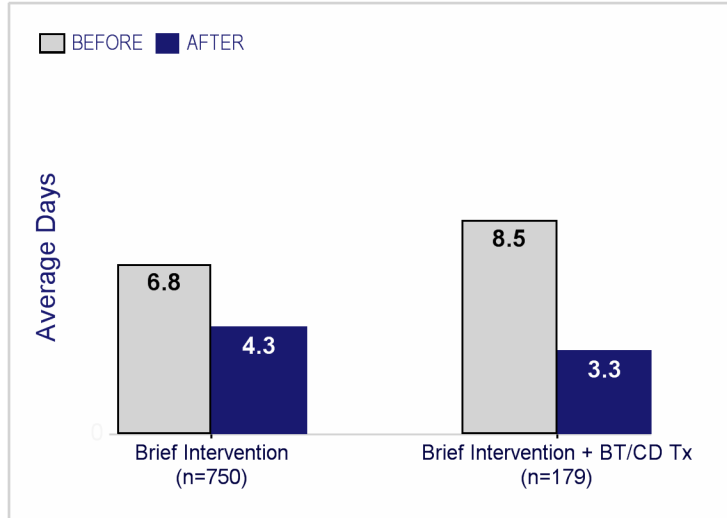
Drug Use Outcomes

Average days of drug use in the past 30 days decreased as follows:

From 6.8 to 4.3 days (37% decrease) for patients who received a brief intervention only ($p < .05$).

From 8.5 to 3.3 days (61% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 7.1 to 4.1 days (43% decrease) overall ($p < .05$).

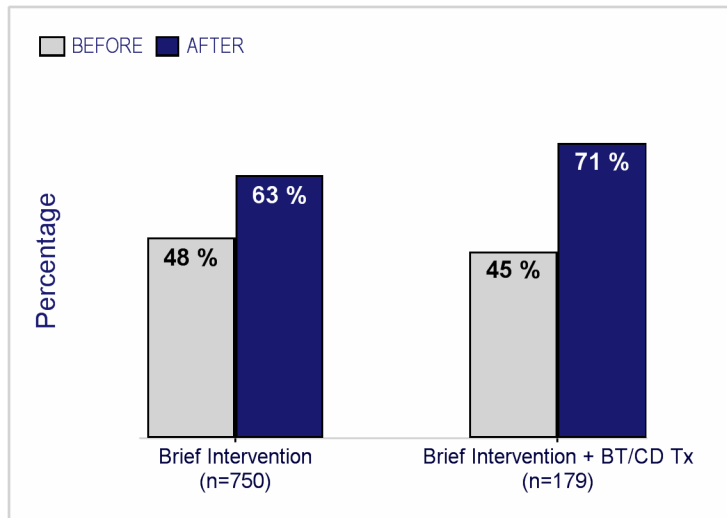


Abstinence from drug use increased significantly:

From 48% to 63% (31% increase) for patients who received a brief intervention only ($p < .05$).

From 45% to 71% (59% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 47% to 65% (38% increase) overall ($p < .05$).



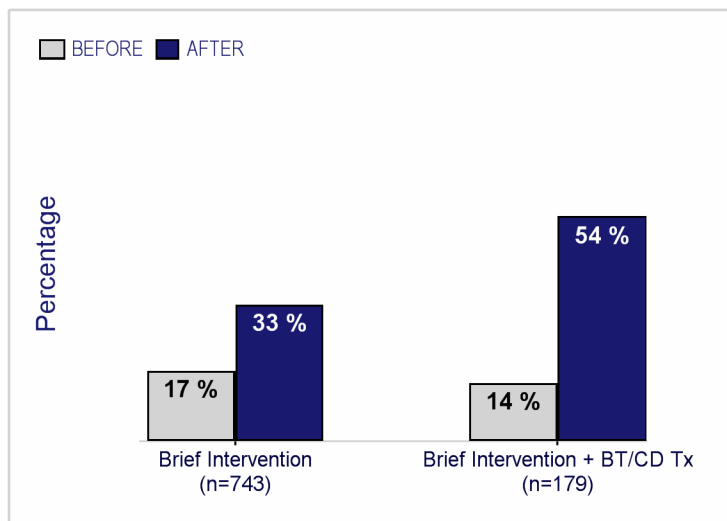
Abstinence from Alcohol and Drugs

Abstinence from alcohol and drug use increased significantly:

From 17% to 33% (96% increase) for patients who received a brief intervention only ($p < .05$).

From 14% to 54% (288% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 16% to 37% (131% increase) overall ($p < .05$).



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 7,552 HMC patients who received at least a brief intervention, a sample of 1,474 patients was selected for the follow-up survey. Interviews were completed with 966 individuals in the sample—a response rate of 72% percent (excluding 18 people who died by the time the interview was due).

Analyses were based on 925 participants with complete data on alcohol use, 917 with complete data on binge drinking, and 929 with complete data on drug use. Analyses excluded 3 participants (0.3%) who did not receive a brief intervention because the patient was not willing to talk to the counselor, was already in treatment, or for some other reason. Analyses also excluded 30 participants (3.1%) who did not give permission for the use of chemical dependency treatment records needed to classify the level of intervention. Beginning in July 2005, sample selection criteria were refined such that only those with moderate or high risk for substance use disorders were eligible for the follow-up survey.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- *Used any alcohol?*
- *Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)*
- *Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)*

Classification of Risk and Intervention Groups

Outcomes' risk levels were based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Two groups were used in analyses: (1) those who received only a brief intervention and (2) those who received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records or from the Division of Alcohol and Substance Abuse's treatment data (TARGET) for the 936 participants who gave permission for the use of administrative records.

The average AUDIT and DAST scores are shown below for patients who received a screen only, a brief intervention only, or a brief intervention plus brief therapy or CD treatment. The table also shows the recommended level of intervention based on the degree of risk for a substance use disorder.

	Screen Only (Not in follow-up survey)	Brief Intervention Only	Brief Intervention Plus Brief Therapy or CD Treatment
Average Scores			
AUDIT	2	8	17
DAST	0	2	4
Criteria for Intervention			
AUDIT - Female	Less than 7	7 - 15	16 - 40
AUDIT - Male	Less than 8	8 - 15	16 - 40
DAST	0	1 - 4	5 - 10
Binge drinking		x	
Drank alcohol before injury		x	

This report was funded through grant number 1 UD1 TI15962-05 from the Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment to the Office of the Governor.

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or <http://www1.dshs.wa.gov/dasa>

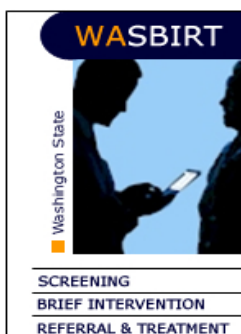


Research and Data Analysis Division Report Number 4.60.HMC.2009.2



Substance Use Outcomes

4.60.PEMC.2009.2| Final Report: PEMC



Providence Everett Medical Center

Six-Month Follow-up Survey of WASBIRT Patients
April 12, 2004 - March 31, 2008

Sharon Estee, Ph.D., Lijian He, Ph.D., Summer Yang, John Doane, Melissa Ford Shah

In collaboration with Division of Alcohol and Substance Abuse

Stephen O'Neil, Project Director; John Taylor, Acting Director

Use of alcohol and other drugs declined among emergency department patients who received brief interventions for substance use disorders through WASBIRT

Providence Everett Medical Center (PEMC) is one of the nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen primarily emergency department patients for alcohol and drug use. Based on the patient's level of risk for substance use disorders, the counselor provides brief interventions to anyone at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 979 out of 5,223 PEMC patients who received at least a brief intervention were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 718 individuals in the sample – a response rate of 80%.

Providence Everett Medical Center patients who received brief interventions through the WASBIRT Project as well as those who went on to receive additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol and other drug use increased.
- Binge drinking declined.

Among all patients who received at least a brief intervention, the average number of days of alcohol or drug use declined:

- From 8.6 to 3.9 days for drinking ($p < .05$).
- From 5.8 to 1.5 days for binge drinking ($p < .05$).
- From 6.9 to 3.0 days for drug use ($p < .05$).

Among the subset of patients who drank or used drugs in the 30 days before they were screened and received a brief intervention, a large proportion reported fewer days of drinking or drug use at the time of the follow-up survey.

- 79% of 487 patients who drank alcohol reduced the number of days of drinking in the past 30 days, and 44% stopped drinking altogether.
- 89% of 308 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days.
- 84% of 341 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 42% stopped using drugs.

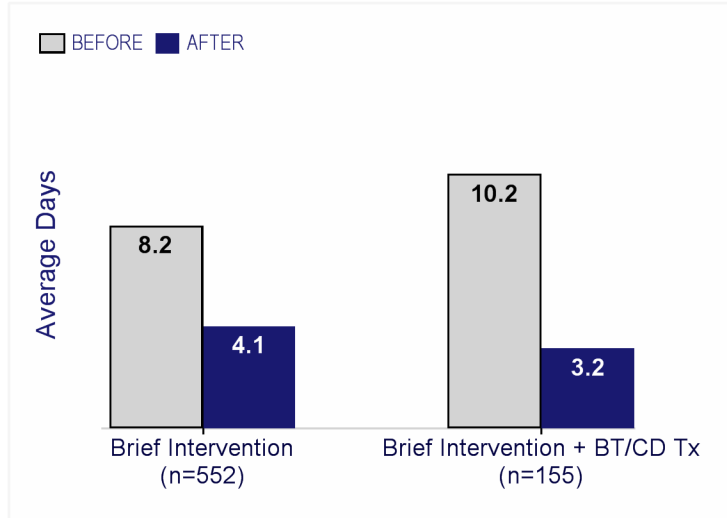
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days decreased as follows:

From 8.2 to 4.1 days (49% decrease) for patients who received a brief intervention only ($p < .05$).

From 10.2 to 3.2 days (68% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 8.6 to 3.9 days (54% decrease) overall ($p < .05$).

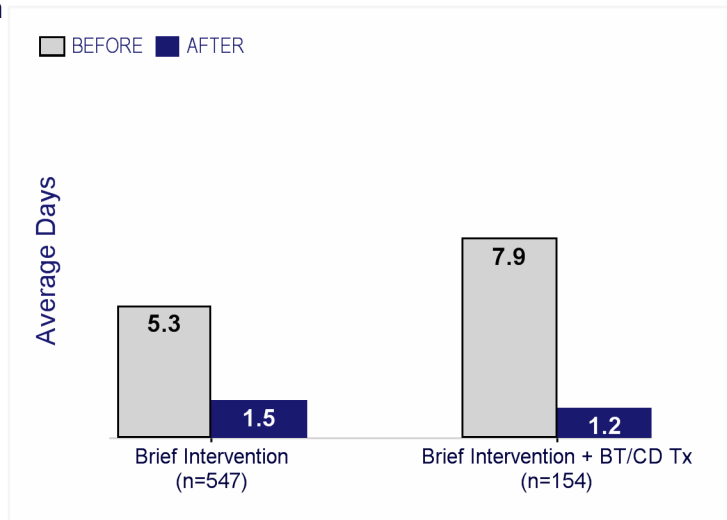


Average days of binge drinking in the past 30 days decreased as follows:

From 5.3 to 1.5 days (71% decrease) for patients who received a brief intervention only ($p < .05$).

From 7.9 to 1.2 days (85% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 5.8 to 1.5 days (75% decrease) overall ($p < .05$).

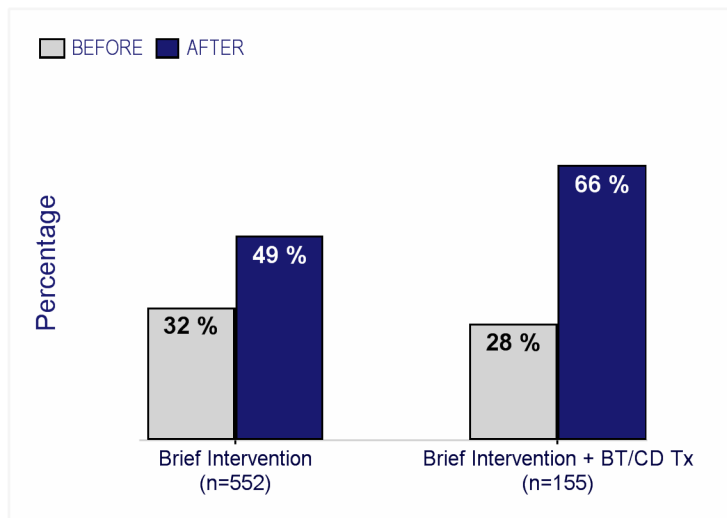


Abstinence from alcohol increased significantly:

From 32% to 49% (54% increase) for patients who received a brief intervention only ($p < .05$).

From 28% to 66% (132% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 31% to 53% (71% increase) overall ($p < .05$).



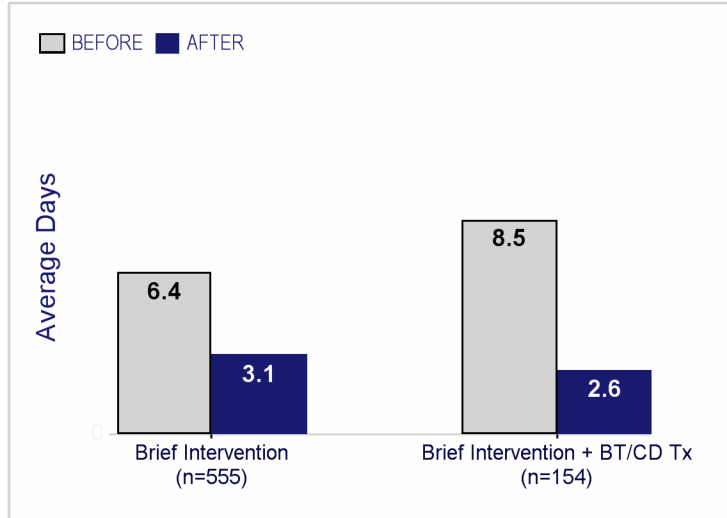
Drug Use Outcomes

Average days of drug use in the past 30 days decreased as follows:

From 6.4 to 3.1 days (51% decrease) for patients who received a brief intervention only ($p < .05$).

From 8.5 to 2.6 days (70% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 6.9 to 3.0 days (56% decrease) overall ($p < .05$).

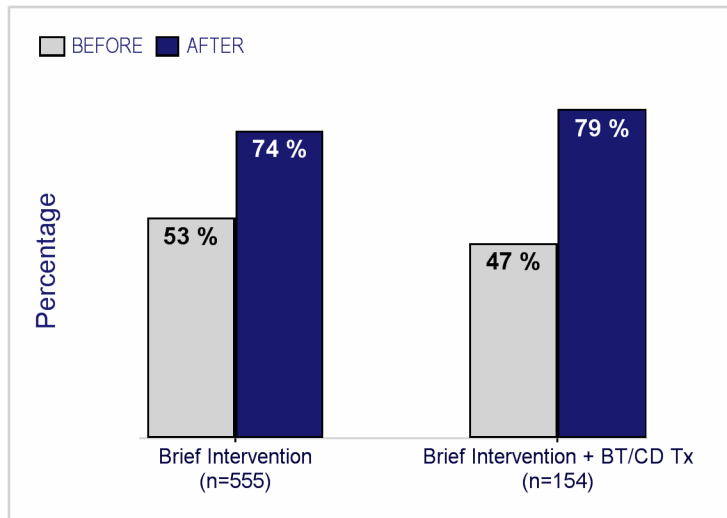


Abstinence from drug use increased significantly:

From 53% to 74% (39% increase) for patients who received a brief intervention only ($p < .05$).

From 47% to 79% (68% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 52% to 75% (44% increase) overall ($p < .05$).



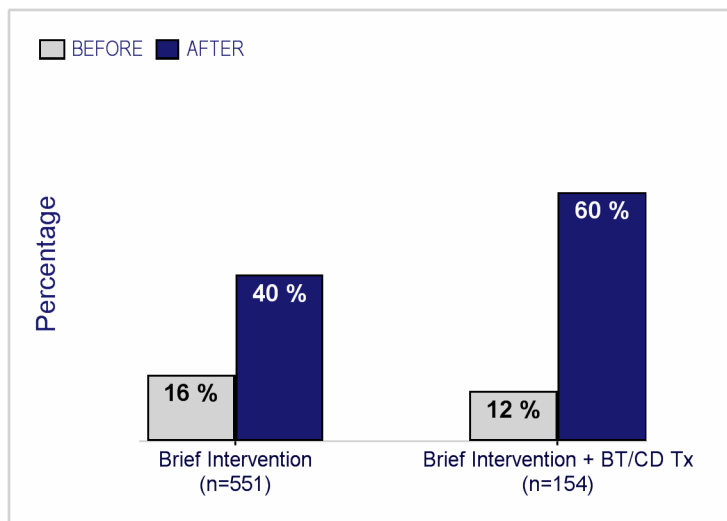
Abstinence from Alcohol and Drugs

Abstinence from alcohol and drug use increased significantly:

From 16% to 40% (149% increase) for patients who received a brief intervention only ($p < .05$).

From 12% to 60% (417% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 15% to 44% (193% increase) overall ($p < .05$).



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 5,223 PEMC patients who received at least a brief intervention, a sample of 979 patients was selected for the follow-up survey. Interviews were completed with 718 individuals in the sample—a response rate of 80% percent (excluding 21 people who died by the time the interview was due).

Analyses were based on 707 participants with complete data on alcohol use, 701 with complete data on binge drinking, and 709 with complete data on drug use. Analyses excluded 2 participants (0.3%) who did not receive a brief intervention because the patient was not willing to talk to the counselor, was already in treatment, or for some other reason. Analyses also excluded 5 participants (0.7%) who did not give permission for the use of chemical dependency treatment records needed to classify the level of intervention. Beginning in July 2005, sample selection criteria were refined such that only those with moderate or high risk for substance use disorders were eligible for the follow-up survey.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- *Used any alcohol?*
- *Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)*
- *Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)*

Classification of Risk and Intervention Groups

Outcomes' risk levels were based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Two groups were used in analyses: (1) those who received only a brief intervention and (2) those who received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records or from the Division of Alcohol and Substance Abuse's treatment data (TARGET) for the 713 participants who gave permission for the use of administrative records.

The average AUDIT and DAST scores are shown below for patients who received a screen only, a brief intervention only, or a brief intervention plus brief therapy or CD treatment. The table also shows the recommended level of intervention based on the degree of risk for a substance use disorder.

	Screen Only (Not in follow-up survey)	Brief Intervention Only	Brief Intervention Plus Brief Therapy or CD Treatment
Average Scores			
AUDIT	1	6	16
DAST	0	1	4
Criteria for Intervention			
AUDIT - Female	Less than 7	7 - 15	16 - 40
AUDIT - Male	Less than 8	8 - 15	16 - 40
DAST	0	1 - 4	5 - 10
Binge drinking		x	
Drank alcohol before injury		x	

This report was funded through grant number 1 UD1 TI15962-05 from the Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment to the Office of the Governor.

Additional copies of this paper may be obtained from: <http://www1.dshs.wa.gov/RDA>
or <http://www1.dshs.wa.gov/dasa>

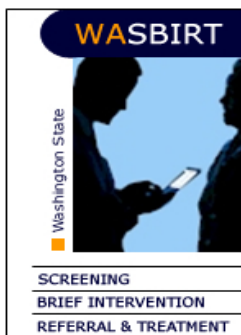


Research and Data Analysis Division Report Number 4.60.PEMC.2009.2



Substance Use Outcomes

4.60.PSPH.2009.2| Final Report: PSPH



Providence St. Peter Hospital

Six-Month Follow-up Survey of WASBIRT Patients
April 12, 2004 - March 31, 2008

Sharon Estee, Ph.D., Lijian He, Ph.D., Summer Yang, John Doane, Melissa Ford Shah

In collaboration with Division of Alcohol and Substance Abuse

Stephen O'Neil, Project Director; John Taylor, Acting Director

Use of alcohol and other drugs declined among emergency department patients who received brief interventions for substance use disorders through WASBIRT

Providence St. Peter Hospital (PSPH) is one of the nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen primarily emergency department patients for alcohol and drug use. Based on the patient's level of risk for substance use disorders, the counselor provides brief interventions to anyone at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 412 out of 2,514 PSPH patients who received at least a brief intervention were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 329 individuals in the sample – a response rate of 85%.

Providence St. Peter Hospital patients who received brief interventions through the WASBIRT Project as well as those who went on to receive additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol and other drug use increased.
- Binge drinking declined.

Among all patients who received at least a brief intervention, the average number of days of alcohol or drug use declined:

- From 8.0 to 4.6 days for drinking ($p < .05$).
- From 4.7 to 1.7 days for binge drinking ($p < .05$).
- From 7.8 to 3.7 days for drug use ($p < .05$).

Among the subset of patients who drank or used drugs in the 30 days before they were screened and received a brief intervention, a large proportion reported fewer days of drinking or drug use at the time of the follow-up survey.

- 76% of 232 patients who drank alcohol reduced the number of days of drinking in the past 30 days, and 38% stopped drinking altogether.
- 84% of 150 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days.
- 89% of 159 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 37% stopped using drugs.

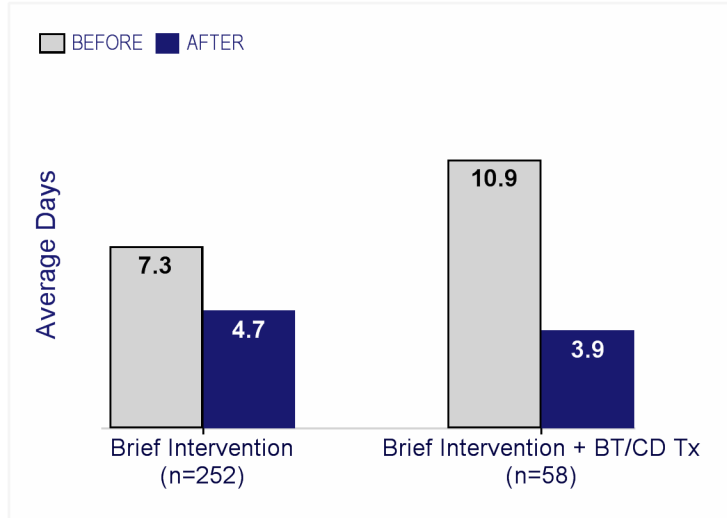
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days decreased as follows:

From 7.3 to 4.7 days (35% decrease) for patients who received a brief intervention only ($p < .05$).

From 10.9 to 3.9 days (64% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 8.0 to 4.6 days (43% decrease) overall ($p < .05$).

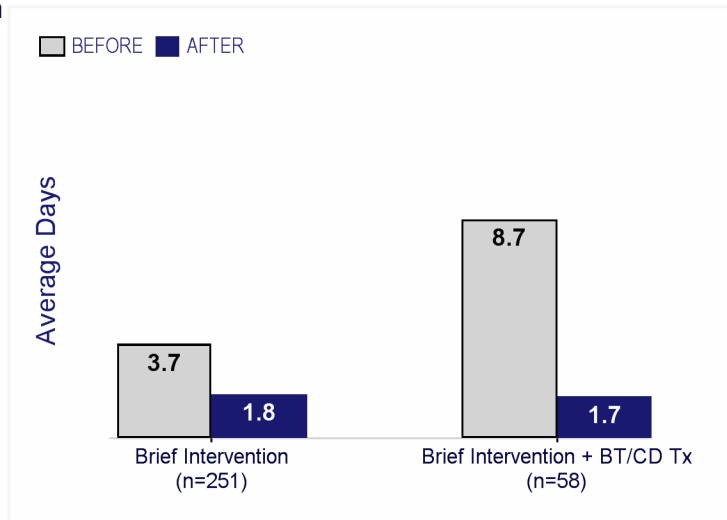


Average days of binge drinking in the past 30 days decreased as follows:

From 3.7 to 1.8 days (53% decrease) for patients who received a brief intervention only ($p < .05$).

From 8.7 to 1.7 days (81% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 4.7 to 1.7 days (63% decrease) overall ($p < .05$).

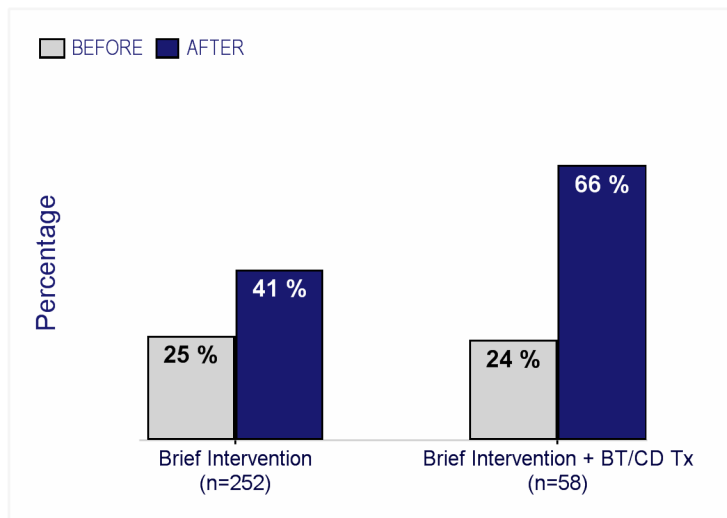


Abstinence from alcohol increased significantly:

From 25% to 41% (63% increase) for patients who received a brief intervention only ($p < .05$).

From 24% to 66% (171% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 25% to 46% (84% increase) overall ($p < .05$).



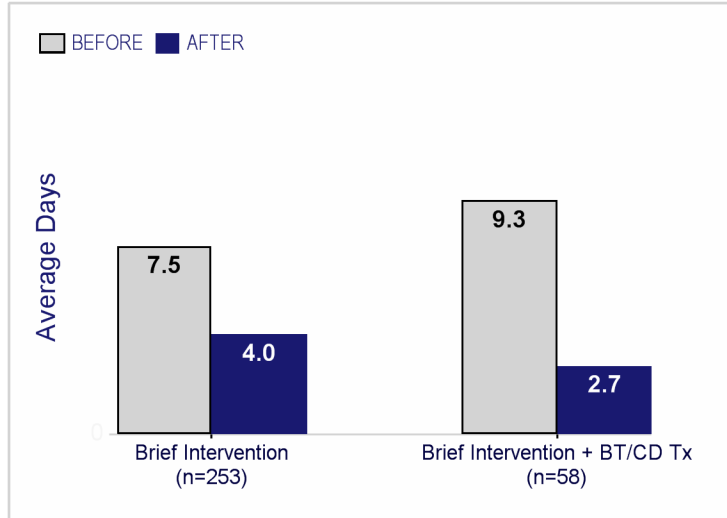
Drug Use Outcomes

Average days of drug use in the past 30 days decreased as follows:

From 7.5 to 4.0 days (47% decrease) for patients who received a brief intervention only ($p < .05$).

From 9.3 to 2.7 days (71% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 7.8 to 3.7 days (52% decrease) overall ($p < .05$).

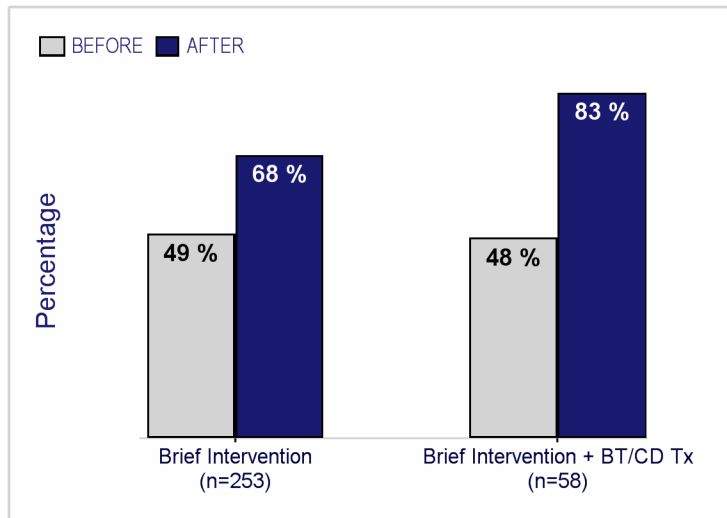


Abstinence from drug use increased significantly:

From 49% to 68% (40% increase) for patients who received a brief intervention only ($p < .05$).

From 48% to 83% (71% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 49% to 71% (45% increase) overall ($p < .05$).



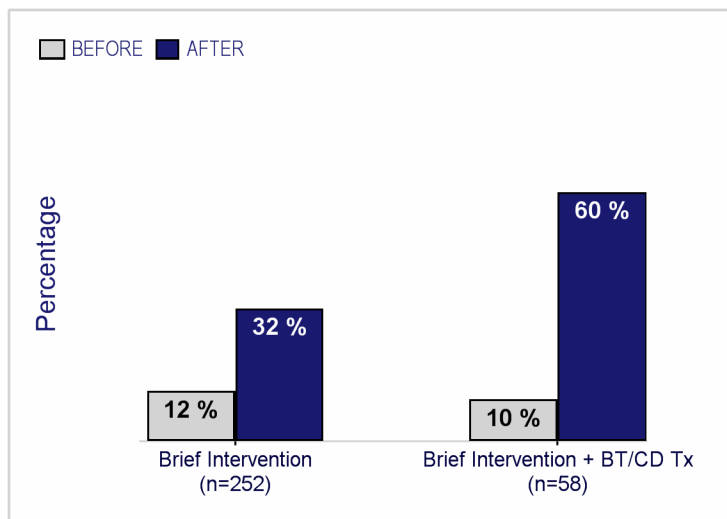
Abstinence from Alcohol and Drugs

Abstinence from alcohol and drug use increased significantly:

From 12% to 32% (167% increase) for patients who received a brief intervention only ($p < .05$).

From 10% to 60% (483% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 12% to 37% (208% increase) overall ($p < .05$).



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 2,514 PSPH patients who received at least a brief intervention, a sample of 412 patients was selected for the follow-up survey. Interviews were completed with 329 individuals in the sample—a response rate of 85% percent (excluding 4 people who died by the time the interview was due).

Analyses were based on 310 participants with complete data on alcohol use, 309 with complete data on binge drinking, and 311 with complete data on drug use. Analyses excluded 18 participants (5.5%) who did not receive a brief intervention because the patient was not willing to talk to the counselor, was already in treatment, or for some other reason. Beginning in July 2005, sample selection criteria were refined such that only those with moderate or high risk for substance use disorders were eligible for the follow-up survey.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- *Used any alcohol?*
- *Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)*
- *Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)*

Classification of Risk and Intervention Groups

Outcomes' risk levels were based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Two groups were used in analyses: (1) those who received only a brief intervention and (2) those who received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records or from the Division of Alcohol and Substance Abuse's treatment data (TARGET) for the 329 participants who gave permission for the use of administrative records.

The average AUDIT and DAST scores are shown below for patients who received a screen only, a brief intervention only, or a brief intervention plus brief therapy or CD treatment. The table also shows the recommended level of intervention based on the degree of risk for a substance use disorder.

	Screen Only (Not in follow-up survey)	Brief Intervention Only	Brief Intervention Plus Brief Therapy or CD Treatment
Average Scores			
AUDIT	1	5	16
DAST	0	1	4
Criteria for Intervention			
AUDIT - Female	Less than 7	7 - 15	16 - 40
AUDIT - Male	Less than 8	8 - 15	16 - 40
DAST	0	1 - 4	5 - 10
Binge drinking		x	
Drank alcohol before injury		x	

This report was funded through grant number 1 UD1 TI15962-05 from the Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment to the Office of the Governor. Additional copies of this paper may be obtained from: <http://www1.dshs.wa.gov/RDA> or <http://www1.dshs.wa.gov/dasa>



Research and Data Analysis Division Report Number 4.60.PSPH.2009.2



Substance Use Outcomes

4.60.SWMC.2009.2| Final Report: SWMC



Southwest Washington Medical Center

Six-Month Follow-up Survey of WASBIRT Patients
April 12, 2004 - March 31, 2008

Sharon Estee, Ph.D., Lijian He, Ph.D., Summer Yang, John Doane, Melissa Ford Shah

In collaboration with Division of Alcohol and Substance Abuse

Stephen O'Neil, Project Director; John Taylor, Acting Director

Use of alcohol and other drugs declined among emergency department patients who received brief interventions for substance use disorders through WASBIRT

Southwest Washington Medical Center (SWMC) is one of the nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen primarily emergency department patients for alcohol and drug use. Based on the patient's level of risk for substance use disorders, the counselor provides brief interventions to anyone at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 1,116 out of 5,253 SWMC patients who received at least a brief intervention were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 881 individuals in the sample – a response rate of 82%.

Southwest Washington Medical Center patients who received brief interventions through the WASBIRT Project as well as those who went on to receive additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol and other drug use increased.
- Binge drinking declined.

Among all patients who received at least a brief intervention, the average number of days of alcohol or drug use declined:

- From 7.9 to 4.0 days for drinking ($p < .05$).
- From 4.3 to 1.6 days for binge drinking ($p < .05$).
- From 6.5 to 3.1 days for drug use ($p < .05$).

Among the subset of patients who drank or used drugs in the 30 days before they were screened and received a brief intervention, a large proportion reported fewer days of drinking or drug use at the time of the follow-up survey.

- 80% of 651 patients who drank alcohol reduced the number of days of drinking in the past 30 days, and 35% stopped drinking altogether.
- 87% of 385 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days.
- 87% of 390 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 33% stopped using drugs.

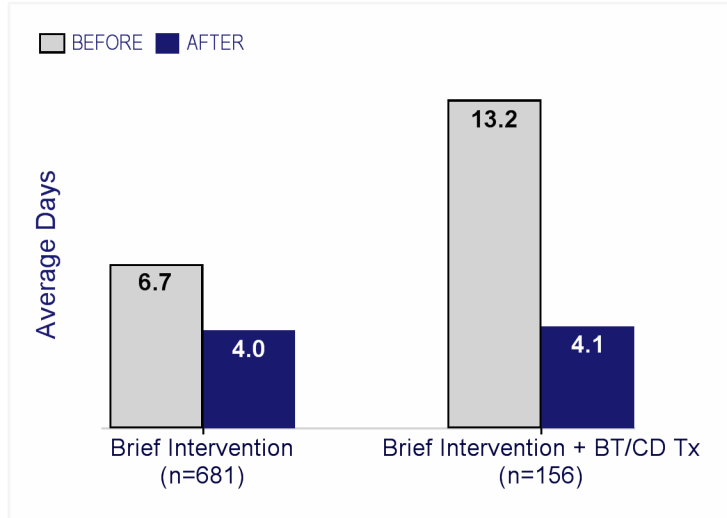
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days decreased as follows:

From 6.7 to 4.0 days (40% decrease) for patients who received a brief intervention only ($p < .05$).

From 13.2 to 4.1 days (69% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 7.9 to 4.0 days (49% decrease) overall ($p < .05$).

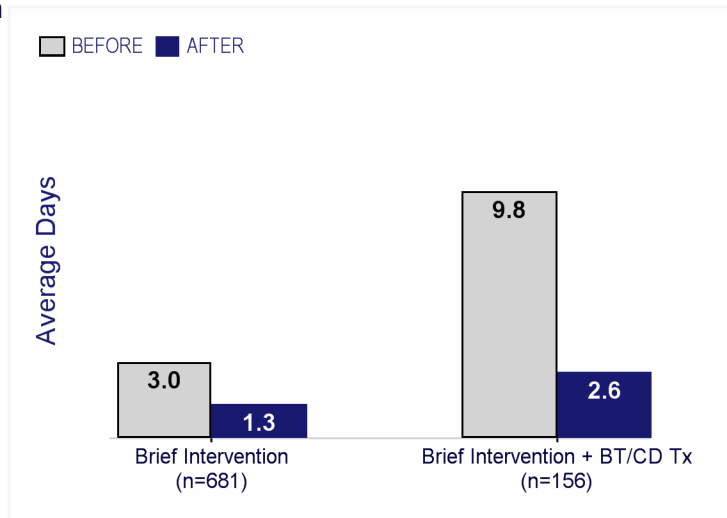


Average days of binge drinking in the past 30 days decreased as follows:

From 3.0 to 1.3 days (56% decrease) for patients who received a brief intervention only ($p < .05$).

From 9.8 to 2.6 days (73% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 4.3 to 1.6 days (63% decrease) overall ($p < .05$).

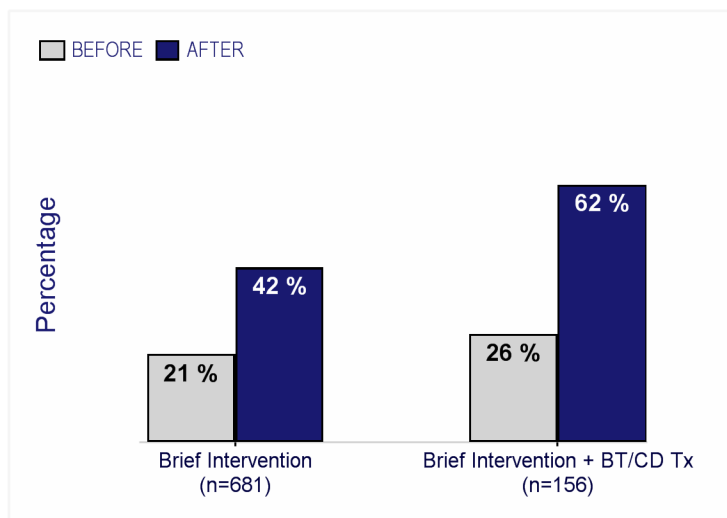


Abstinence from alcohol increased significantly:

From 21% to 42% (96% increase) for patients who received a brief intervention only ($p < .05$).

From 26% to 62% (140% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 22% to 46% (109% increase) overall ($p < .05$).



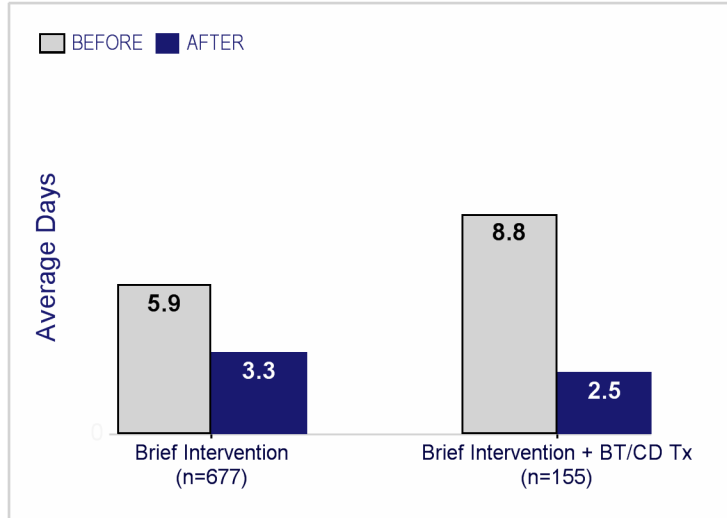
Drug Use Outcomes

Average days of drug use in the past 30 days decreased as follows:

From 5.9 to 3.3 days (45% decrease) for patients who received a brief intervention only ($p < .05$).

From 8.8 to 2.5 days (72% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 6.5 to 3.1 days (52% decrease) overall ($p < .05$).

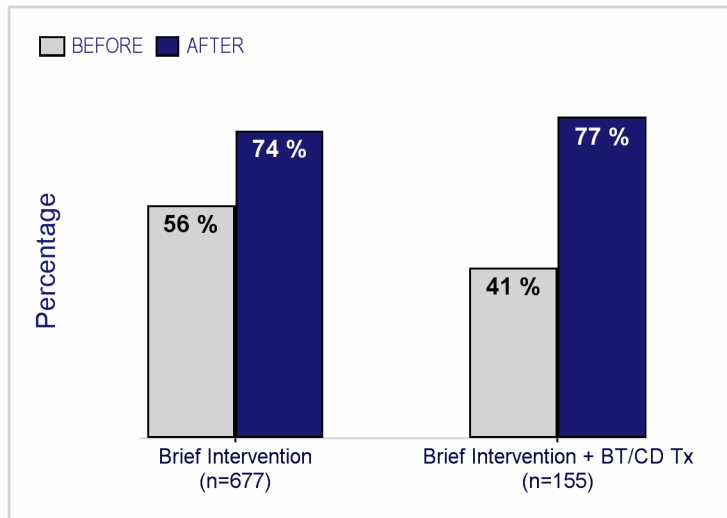


Abstinence from drug use increased significantly:

From 56% to 74% (32% increase) for patients who received a brief intervention only ($p < .05$).

From 41% to 77% (90% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 53% to 75% (42% increase) overall ($p < .05$).



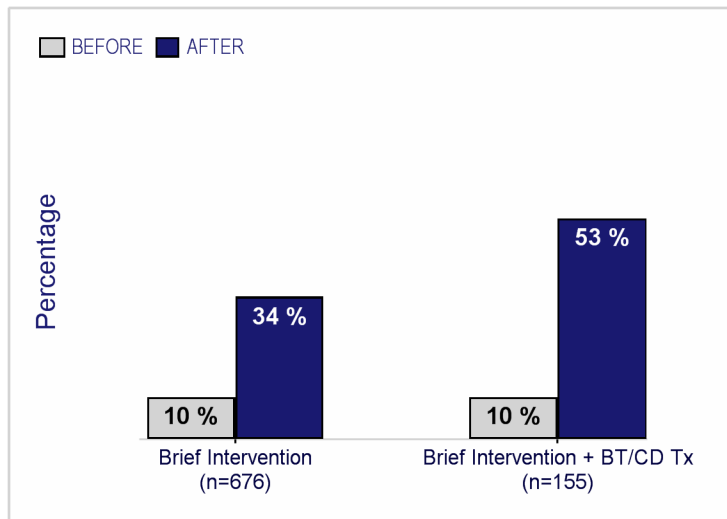
Abstinence from Alcohol and Drugs

Abstinence from alcohol and drug use increased significantly:

From 10% to 34% (226% increase) for patients who received a brief intervention only ($p < .05$).

From 10% to 53% (413% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 10% to 37% (270% increase) overall ($p < .05$).



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 5,253 SWMC patients who received at least a brief intervention, a sample of 1,116 patients was selected for the follow-up survey. Interviews were completed with 881 individuals in the sample—a response rate of 82% percent (excluding 5 people who died by the time the interview was due).

Analyses were based on 837 participants with complete data on alcohol use, 837 with complete data on binge drinking, and 832 with complete data on drug use. Analyses excluded 32 participants (3.6%) who did not receive a brief intervention because the patient was not willing to talk to the counselor, was already in treatment, or for some other reason. Analyses also excluded 8 participants (0.9%) who did not give permission for the use of chemical dependency treatment records needed to classify the level of intervention. Beginning in July 2005, sample selection criteria were refined such that only those with moderate or high risk for substance use disorders were eligible for the follow-up survey.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- *Used any alcohol?*
- *Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)*
- *Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)*

Classification of Risk and Intervention Groups

Outcomes' risk levels were based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Two groups were used in analyses: (1) those who received only a brief intervention and (2) those who received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records or from the Division of Alcohol and Substance Abuse's treatment data (TARGET) for the 873 participants who gave permission for the use of administrative records.

The average AUDIT and DAST scores are shown below for patients who received a screen only, a brief intervention only, or a brief intervention plus brief therapy or CD treatment. The table also shows the recommended level of intervention based on the degree of risk for a substance use disorder.

	Screen Only (Not in follow-up survey)	Brief Intervention Only	Brief Intervention Plus Brief Therapy or CD Treatment
Average Scores			
AUDIT	1	5	17
DAST	0	1	4
Criteria for Intervention			
AUDIT - Female	Less than 7	7 - 15	16 - 40
AUDIT - Male	Less than 8	8 - 15	16 - 40
DAST	0	1 - 4	5 - 10
Binge drinking		x	
Drank alcohol before injury		x	

This report was funded through grant number 1 UD1 TI15962-05 from the Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment to the Office of the Governor.

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or <http://www1.dshs.wa.gov/dasa>

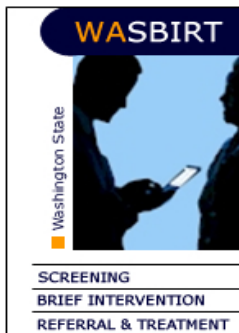


Research and Data Analysis Division Report Number 4.60.SWMC.2009.2



Substance Use Outcomes

4.60.TGH-AH.2009.2| Final Report: TGH-AH



Tacoma General and Allenmore Hospitals

Six-Month Follow-up Survey of WASBIRT Patients
April 12, 2004 - March 31, 2008

Sharon Estee, Ph.D., Lijian He, Ph.D., Summer Yang, John Doane, Melissa Ford Shah

In collaboration with Division of Alcohol and Substance Abuse

Stephen O'Neil, Project Director; John Taylor, Acting Director

Use of alcohol and other drugs declined among emergency department patients who received brief interventions for substance use disorders through WASBIRT

Tacoma and Allenmore Hospitals (TGH-AH) are two of the nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen primarily emergency department patients for alcohol and drug use. Based on the patient's level of risk for substance use disorders, the counselor provides brief interventions to anyone at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 881 out of 4,971 TGH-AH patients who received at least a brief intervention were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 667 individuals in the sample – a response rate of 79%.

Tacoma and Allenmore Hospitals patients who received brief interventions through the WASBIRT Project as well as those who went on to receive additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol and other drug use increased.
- Binge drinking declined.

Among all patients who received at least a brief intervention, the average number of days of alcohol or drug use declined:

- From 6.9 to 4.0 days for drinking ($p < .05$).
- From 3.0 to 1.5 days for binge drinking ($p < .05$).
- From 4.5 to 2.7 days for drug use ($p < .05$).

Among the subset of patients who drank or used drugs in the 30 days before they were screened and received a brief intervention, a large proportion reported fewer days of drinking or drug use at the time of the follow-up survey.

- 78% of 474 patients who drank alcohol reduced the number of days of drinking in the past 30 days, and 36% stopped drinking altogether.
- 84% of 285 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days.
- 80% of 249 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 25% stopped using drugs.

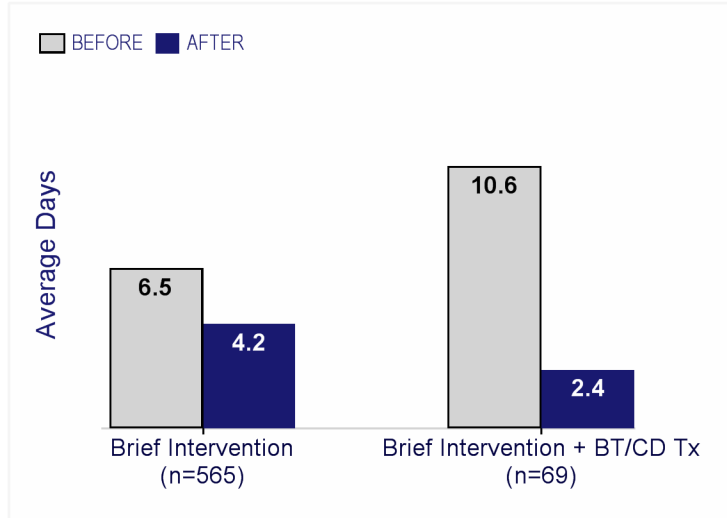
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days decreased as follows:

From 6.5 to 4.2 days (35% decrease) for patients who received a brief intervention only ($p < .05$).

From 10.6 to 2.4 days (78% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 6.9 to 4.0 days (42% decrease) overall ($p < .05$).

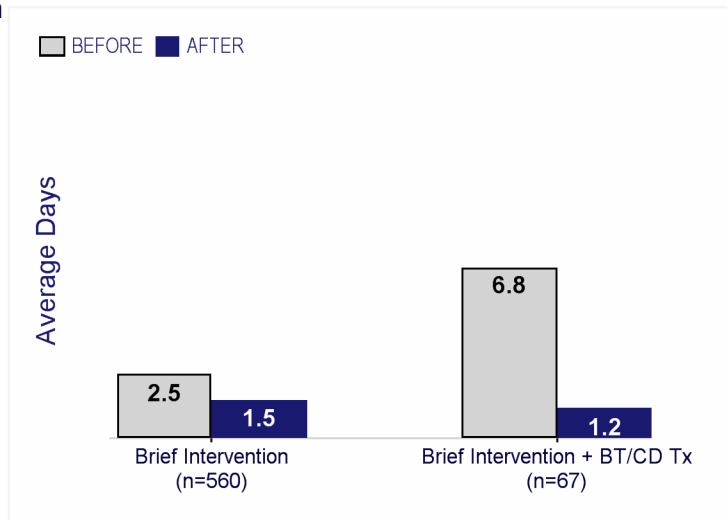


Average days of binge drinking in the past 30 days decreased as follows:

From 2.5 to 1.5 days (40% decrease) for patients who received a brief intervention only ($p < .05$).

From 6.8 to 1.2 days (83% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 3.0 to 1.5 days (50% decrease) overall ($p < .05$).

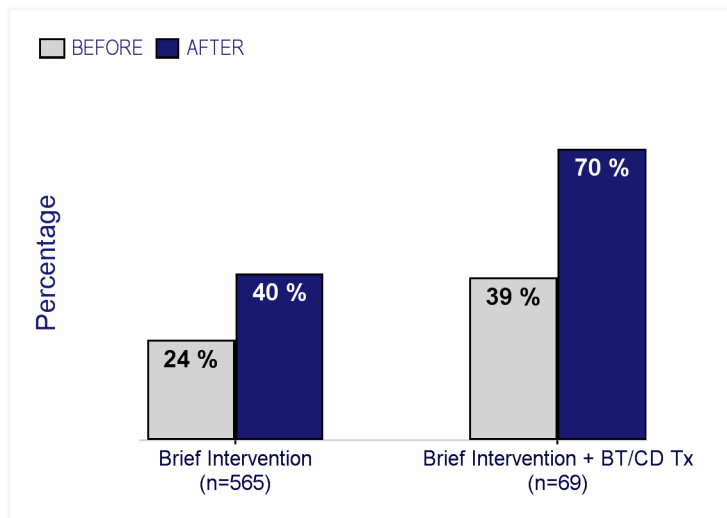


Abstinence from alcohol increased significantly:

From 24% to 40% (69% increase) for patients who received a brief intervention only ($p < .05$).

From 39% to 70% (78% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 25% to 43% (72% increase) overall ($p < .05$).



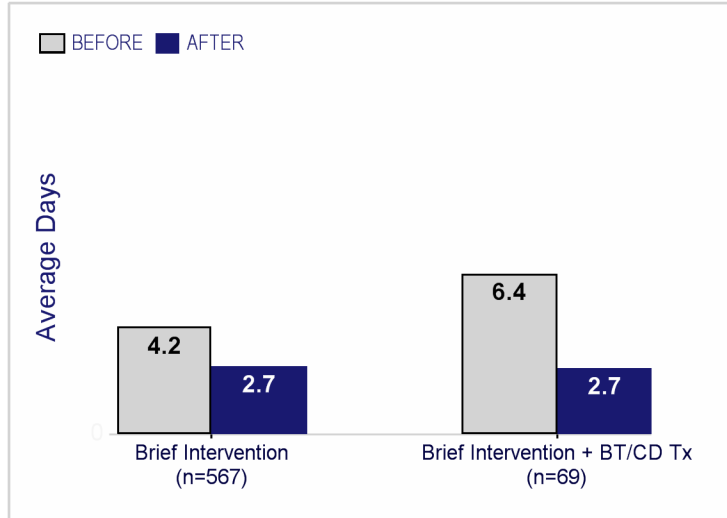
Drug Use Outcomes

Average days of drug use in the past 30 days decreased as follows:

From 4.2 to 2.7 days (36% decrease) for patients who received a brief intervention only ($p < .05$).

From 6.4 to 2.7 days (59% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 4.5 to 2.7 days (40% decrease) overall ($p < .05$).

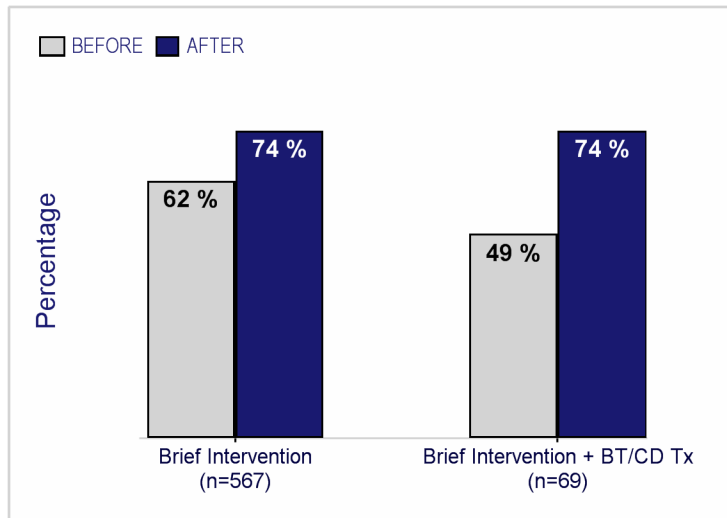


Abstinence from drug use increased significantly:

From 62% to 74% (19% increase) for patients who received a brief intervention only ($p < .05$).

From 49% to 74% (50% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 61% to 74% (21% increase) overall ($p < .05$).



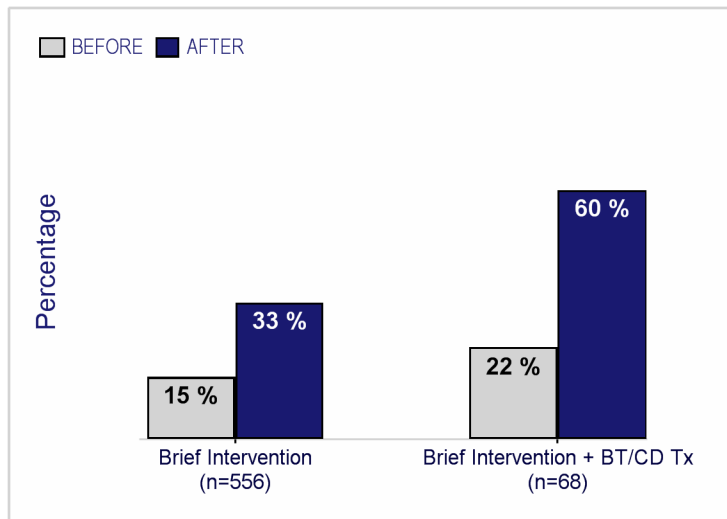
Abstinence from Alcohol and Drugs

Abstinence from alcohol and drug use increased significantly:

From 15% to 33% (118% increase) for patients who received a brief intervention only ($p < .05$).

From 22% to 60% (173% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 16% to 36% (125% increase) overall ($p < .05$).



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 4,971 TGH-AH patients who received at least a brief intervention, a sample of 881 patients was selected for the follow-up survey. Interviews were completed with 667 individuals in the sample—a response rate of 79% percent (excluding 10 people who died by the time the interview was due).

Analyses were based on 634 participants with complete data on alcohol use, 627 with complete data on binge drinking, and 636 with complete data on drug use. Analyses excluded 8 participants (1.2%) who did not receive a brief intervention because the patient was not willing to talk to the counselor, was already in treatment, or for some other reason. Analyses also excluded 9 participants (1.3%) who did not give permission for the use of chemical dependency treatment records needed to classify the level of intervention. Beginning in July 2005, sample selection criteria were refined such that only those with moderate or high risk for substance use disorders were eligible for the follow-up survey.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- *Used any alcohol?*
- *Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)*
- *Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)*

Classification of Risk and Intervention Groups

Outcomes' risk levels were based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Two groups were used in analyses: (1) those who received only a brief intervention and (2) those who received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records or from the Division of Alcohol and Substance Abuse's treatment data (TARGET) for the 658 participants who gave permission for the use of administrative records.

The average AUDIT and DAST scores are shown below for patients who received a screen only, a brief intervention only, or a brief intervention plus brief therapy or CD treatment. The table also shows the recommended level of intervention based on the degree of risk for a substance use disorder.

	Screen Only (Not in follow-up survey)	Brief Intervention Only	Brief Intervention Plus Brief Therapy or CD Treatment
Average Scores			
AUDIT	1	4	13
DAST	0	1	4
Criteria for Intervention			
AUDIT - Female	Less than 7	7 - 15	16 - 40
AUDIT - Male	Less than 8	8 - 15	16 - 40
DAST	0	1 - 4	5 - 10
Binge drinking		x	
Drank alcohol before injury		x	

This report was funded through grant number 1 UD1 TI15962-05 from the Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment to the Office of the Governor.

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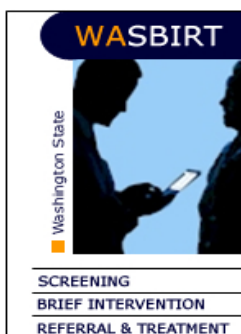


Research and Data Analysis Division Report Number 4.60.TGH-AH.2009.2



Substance Use Outcomes

4.60.Yakima.2009.2 | Final Report: Yakima



Yakima Valley Memorial Hospital, Yakima Regional Medical Center and Toppenish Community Hospital

Six-Month Follow-up Survey of WASBIRT Patients
April 12, 2004 - March 31, 2008

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In collaboration with Division of Alcohol and Substance Abuse

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Use of alcohol and other drugs declined among emergency department patients who received brief interventions for substance use disorders through WASBIRT

Yakima Valley Memorial Hospital, Yakima Regional Medical Center and Toppenish Community Hospital are three of the nine hospitals in Washington State that agreed to participate in the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project which began in the spring of 2004. Through this project, chemical dependency counselors screen primarily emergency department patients for alcohol and drug use. Based on the patient's level of risk for substance use disorders, the counselor provides brief interventions to anyone at moderate or high risk levels. They also refer patients with more serious disorders to brief therapy or more traditional forms of chemical dependency (CD) treatment.

To see whether brief interventions or additional counseling helps reduce patients' levels of alcohol or other drug use, a sample of 811 out of 4,697 Yakima patients who received at least a brief intervention were selected randomly for a follow-up telephone interview six months later. Interviews were completed with 607 individuals in the sample – a response rate of 81%.

Yakima Hospital patients who received brief interventions through the WASBIRT Project as well as those who went on to receive additional forms of counseling for alcohol or other drug use have altered their substance use patterns significantly ($p < .05$). The following changes occurred:

- Number of days of drinking and other drug use declined.
- Abstinence from alcohol and other drug use increased.
- Binge drinking declined.

Among all patients who received at least a brief intervention, the average number of days of alcohol or drug use declined:

- From 6.4 to 3.1 days for drinking ($p < .05$).
- From 4.5 to 1.4 days for binge drinking ($p < .05$).
- From 4.6 to 2.4 days for drug use ($p < .05$).

Among the subset of patients who drank or used drugs in the 30 days before they were screened and received a brief intervention, a large proportion reported fewer days of drinking or drug use at the time of the follow-up survey.

- 83% of 379 patients who drank alcohol reduced the number of days of drinking in the past 30 days, and 41% stopped drinking altogether.
- 90% of 263 patients who reported bingeing in the past 30 days reduced the number of heavy drinking days.
- 88% of 213 patients who reported drug use in the past 30 days reduced the number of days of use, in part because 37% stopped using drugs.

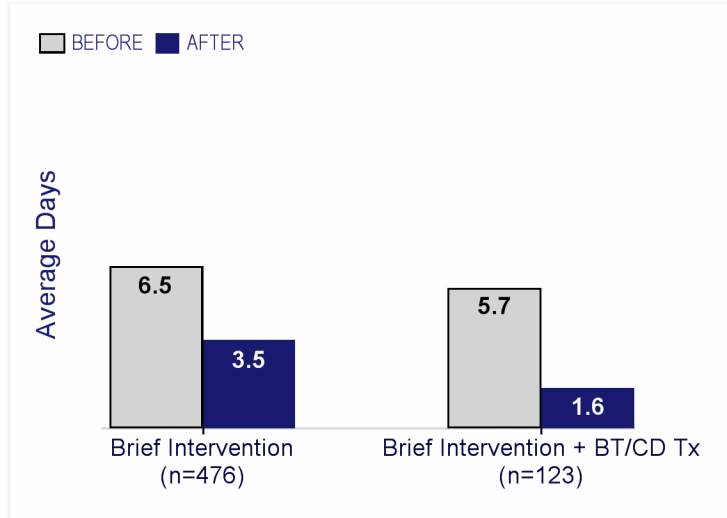
Alcohol Use Outcomes

Average days of alcohol use in the past 30 days decreased as follows:

From 6.5 to 3.5 days (46% decrease) for patients who received a brief intervention only ($p < .05$).

From 5.7 to 1.6 days (71% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 6.4 to 3.1 days (51% decrease) overall ($p < .05$).

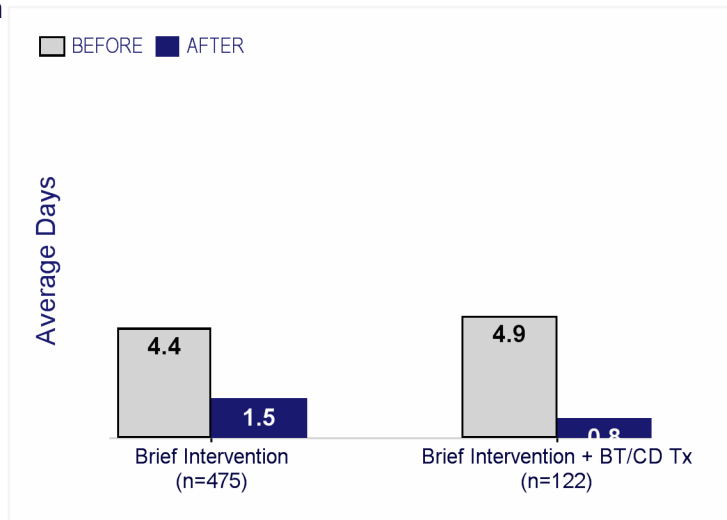


Average days of binge drinking in the past 30 days decreased as follows:

From 4.4 to 1.5 days (65% decrease) for patients who received a brief intervention only ($p < .05$).

From 4.9 to 0.8 days (84% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 4.5 to 1.4 days (69% decrease) overall ($p < .05$).

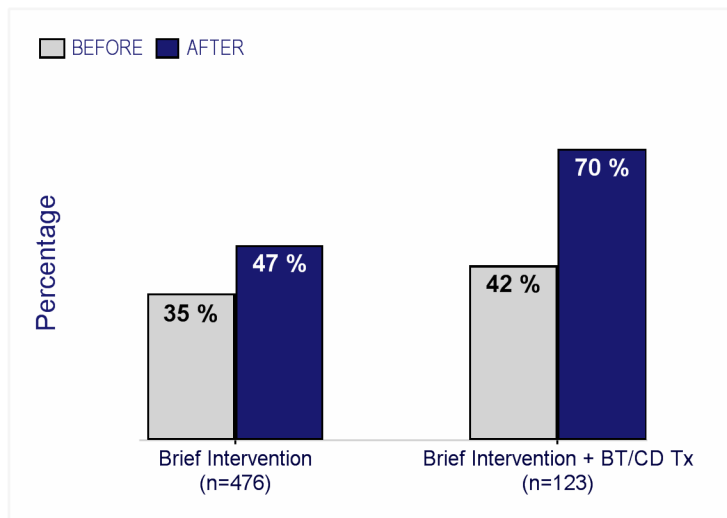


Abstinence from alcohol increased significantly:

From 35% to 48% (35% increase) for patients who received a brief intervention only ($p < .05$).

From 42% to 70% (65% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 37% to 52% (41% increase) overall ($p < .05$).



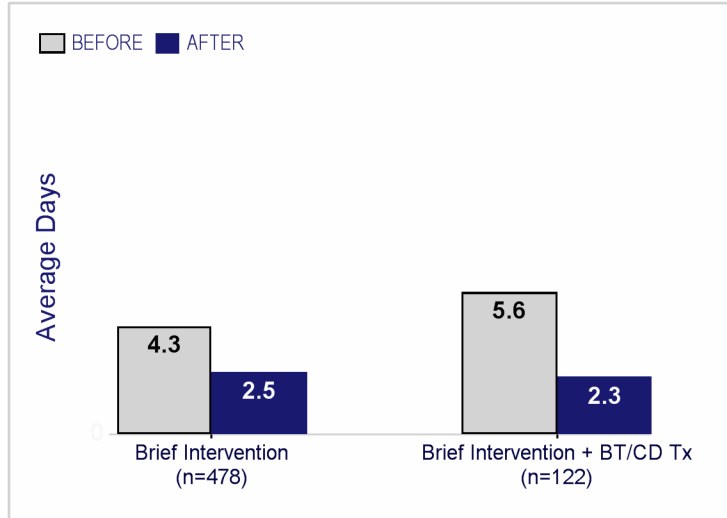
Drug Use Outcomes

Average days of drug use in the past 30 days decreased as follows:

From 4.3 to 2.5 days (42% decrease) for patients who received a brief intervention only ($p < .05$).

From 5.6 to 2.3 days (60% decrease) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 4.6 to 2.4 days (47% decrease) overall ($p < .05$).

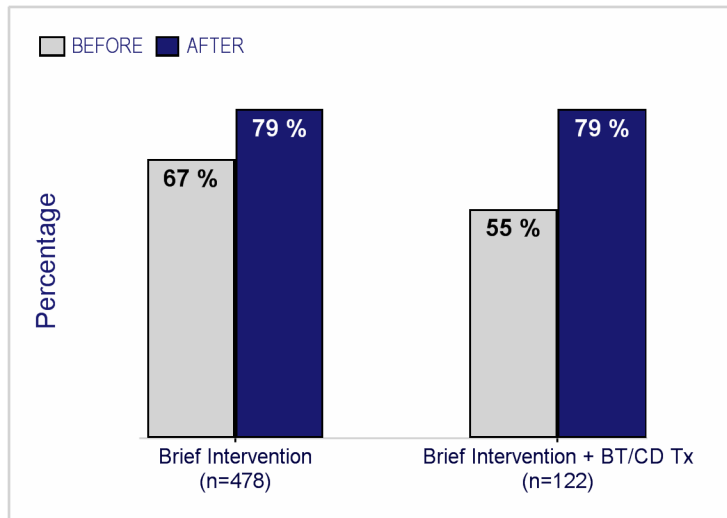


Abstinence from drug use increased significantly:

From 67% to 79% (18% increase) for patients who received a brief intervention only ($p < .05$).

From 55% to 79% (43% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 65% to 79% (22% increase) overall ($p < .05$).



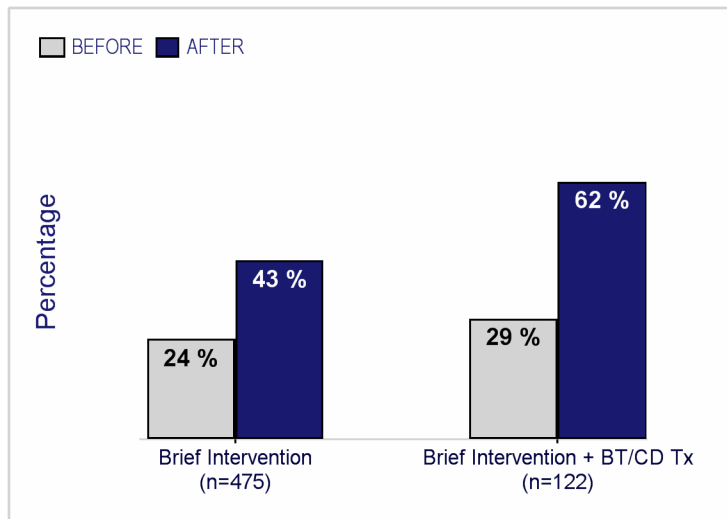
Abstinence from Alcohol and Drugs

Abstinence from alcohol and drug use increased significantly:

From 24% to 43% (80% increase) for patients who received a brief intervention only ($p < .05$).

From 29% to 62% (117% increase) for patients who received a brief intervention plus brief therapy and/or chemical dependency treatment (BT/CD Tx) ($p < .05$).

From 25% to 47% (88% increase) overall ($p < .05$).



TECHNICAL NOTES

Six-Month Follow-up Survey Procedures

Out of the 4,697 Yakima patients who received at least a brief intervention, a sample of 811 patients was selected for the follow-up survey. Interviews were completed with 607 individuals in the sample—a response rate of 81% percent (excluding 12 people who died by the time the interview was due).

Analyses were based on 599 participants with complete data on alcohol use, 597 with complete data on binge drinking, and 600 with complete data on drug use. Analyses excluded 3 participants (0.5%) who did not receive a brief intervention because the patient was not willing to talk to the counselor, was already in treatment, or for some other reason. Analyses also excluded 2 participants (0.3%) who did not give permission for the use of chemical dependency treatment records needed to classify the level of intervention. Beginning in July 2005, sample selection criteria were refined such that only those with moderate or high risk for substance use disorders were eligible for the follow-up survey.

Follow-up interviews were conducted at the Research and Data Analysis Division using standard survey techniques that included mailing advance contact letters and multiple attempts to call hard-to-reach respondents. Contact information was gathered from the patient at baseline and augmented by administrative records to update contact information if the patient gave permission for this.

Measures of Substance Use Outcomes

Changes in alcohol and other drug use were based on a person's answers on the baseline screening survey compared to answers on the six-month follow-up interview, using the following questions:

During the past 30 days, how many days have you ...

- *Used any alcohol?*
- *Had 5 or more drinks in one sitting? (This was used as a measure of binge drinking.)*
- *Used any illegal drugs? (Use of illegal drugs included misuse of prescription drugs.)*

Classification of Risk and Intervention Groups

Outcomes' risk levels were based on scores on the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST). Two groups were used in analyses: (1) those who received only a brief intervention and (2) those who received a brief intervention plus brief therapy, CD treatment, or both within 120 days of the brief intervention. The receipt of brief therapy or CD treatment was identified from WASBIRT records or from the Division of Alcohol and Substance Abuse's treatment data (TARGET) for the 605 participants who gave permission for the use of administrative records.

The average AUDIT and DAST scores are shown below for patients who received a screen only, a brief intervention only, or a brief intervention plus brief therapy or CD treatment. The table also shows the recommended level of intervention based on the degree of risk for a substance use disorder.

	Screen Only (Not in follow-up survey)	Brief Intervention Only	Brief Intervention Plus Brief Therapy or CD Treatment
Average Scores			
AUDIT	1	4	15
DAST	0	1	4
Criteria for Intervention			
AUDIT - Female	Less than 7	7 - 15	16 - 40
AUDIT - Male	Less than 8	8 - 15	16 - 40
DAST	0	1 - 4	5 - 10
Binge drinking		x	
Drank alcohol before injury		x	

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