Substance Use
Substance Use Concern?
Teens dealing with substance abuse often do not seek care. Screening and surveillance are required to detect substance use problems.

Diagnosis:
Review limits of confidentiality, a likely area of concern for teens. Talking honestly about it can boost alliance. Look for distress or impaired functioning related to use of the substance. DSM 5-criteria include reduced control over use of the substance, risky use, social impairment (missing school or recreational activities), tolerance, or withdrawal. CRAFFT rating scale may augment assessment.

Safety check:

Think about comorbidity:
2/3 of teens with a substance use disorder have comorbid psychiatric difficulties. ADHD (even without stimulant treatment) may increase risk of substance use disorder. Depression, anxiety, and conduct disorder can be associated with substance use disorders.

Can problem be managed in primary care?

YES
(problem is noticeable, but youth basically functioning okay)
If minimal, offer brief advice to quit and psychoeducation about effects of substances.

If mild to moderate, use nonjudgmental questioning and listening to reinforce the youth’s positive choices and build motivation to change. For example, start with “What are the positive and negative effects of marijuana in your life?” Then, instead of “You need to stop using marijuana,” could say “If you were to reduce your marijuana use, how would you go about it?”
Encourage engagement with pro-social peer group. Prescribe healthy habits (regular sleep, exercise, & nutrition).
Appropriately treat comorbid conditions. Recommend individual therapy to build skills toward self-efficacy, problem solving, and relapse prevention.
Empower parents to supervise and monitor.
Follow up frequently.

NO
(significant impairment or safety concerns)
Refer to a substance use program while offering on-going support and monitoring through the medical home.

Reference:
The CRAFFT Interview (version 2.1)

To be orally administered by the clinician

Begin: “I’m going to ask you a few questions that I ask all my patients. Please be honest. I will keep your answers confidential.”

Part A
During the PAST 12 MONTHS, on how many days did you:

1. Drink more than a few sips of beer, wine, or any drink containing alcohol? Put “0” if none.

2. Use any marijuana (weed, oil, or hash by smoking, vaping, or in food) or “synthetic marijuana” (like “K2,” “Spice”)? Put “0” if none.

3. Use anything else to get high (like other illegal drugs, prescription or over-the-counter medications, and things that you sniff, huff, or vape)? Put “0” if none.

Did the patient answer “0” for all questions in Part A?

YES ❑

NO ❑

Ask CAR question only, then stop  Ask all six CRAFFT* questions below

Part B

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*C Two or more YES answers suggest a serious problem and need for further assessment.
See back for further instructions

NOTICE TO CLINIC STAFF AND MEDICAL RECORDS:
The information on this page is protected by special federal confidentiality rules (42 CFR Part 2), which prohibit disclosure of this information unless authorized by specific written consent. A general authorization for release of medical information is NOT sufficient.
1. Show your patient his/her score on this graph and discuss level of risk for a substance use disorder.

![Graph showing percent with DSM-5 Substance Use Disorder by CRAFFT score]


2. Use these talking points for brief counseling.

   1. REVIEW screening results
      For each “yes” response: “Can you tell me more about that?”

   2. RECOMMEND not to use
      “As your doctor (nurse/health care provider), my recommendation is not to use any alcohol, marijuana or other drug because they can:
      1) Harm your developing brain;
      2) Interfere with learning and memory, and
      3) Put you in embarrassing or dangerous situations.”

   3. RIDING/DRIVING risk counseling
      “Motor vehicle crashes are the leading cause of death for young people. I give all my patients the Contract for Life. Please take it home and discuss it with your parents/guardians to create a plan for safe rides home.”

   4. RESPONSE elicit self-motivational statements
      Non-users: “If someone asked you why you don’t drink or use drugs, what would you say?”
      Users: “What would be some of the benefits of not using?”

   5. REINFORCE self-efficacy
      “I believe you have what it takes to keep alcohol and drugs from getting in the way of achieving your goals.”

Substance Abuse Resources

Information for Families

Websites families may find helpful:

A Parent’s Guide to Preventing Underage Marijuana Use

Partnership for Drug-Free Kids
www.drugfree.org

Parent-Teen Driving Agreement
www.healthychildren.org/English/ages-stages/teen/safety/pages/Teen-Driving-Agreement.aspx

Drugs: What You Should Know

Alaska Department of Health and Social Services Division of Behavioral Health
https://dhss.alaska.gov/dbh

Start Talking Now
www.starttalkingnow.org

National Institute on Drug Abuse for Parents
https://teens.drugabuse.gov/parents

Websites youth may find helpful:

National Institute on Drug Abuse for Teens
https://teens.drugabuse.gov

Books families may find helpful:

Beyond Addiction: How Science and Kindness Help People Change (2014) by Jeffrey Foote, PhD, Carrie Wilkens, PhD, and Nicole Kosanke, PhD, with Stephanie Higgs

Clean: Overcoming Addiction and Ending America’s Greatest Tragedy (2014) and
Beautiful Boy: A Father’s Journey Through His Son’s Addiction (2009), both by David Sheff