



**Conrad N. Hilton  
Foundation's Youth  
Substance Use Prevention  
and Early Intervention  
Strategic Initiative:  
Impacting Youth  
Substance Use, Health,  
and Wellbeing**

**Monitoring, Evaluation, and  
Learning (MEL) Project Year 1  
Report**

**Executive Summary**

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# Conrad N. Hilton Foundation's Youth Substance Use Prevention and Early Intervention Strategic Initiative: Impacting Youth Substance Use, Health, and Wellbeing

## Executive Summary

While trends in the amount and variety of drugs and alcohol consumed have fluctuated over the decades as reported in the National Institute on Drug Abuse's *Monitoring the Future (MTF)* and the Substance Abuse and Mental Health Services Administration's *National Survey on Drug Use and Health (NSDUH)* surveys, the issue remains – the levels of consumption of drugs, misuse of prescription medications, and use of alcohol are still significant and are detrimental to the health and wellbeing of the nation's youth. Adolescent substance use often “flies under the radar” until use escalates and problems in school or at home develop. Most health care practitioners, including physicians, do not receive training on substance use disorders as part of their medical education. As a result, they are ill-equipped to identify and address substance use as part of routine healthcare. For example, less than half of pediatricians screen their adolescent patients for substance use (Harris et al, 2012). Furthermore, physicians' reliance on personal judgment versus a standardized screening tool has been shown to miss problem use more than 75% of the time (Wilson et al., 2004).

In 2013, the Board of Directors of the Conrad N. Hilton Foundation (Foundation) approved a five-year strategy focused on developing and implementing substance use prevention and early intervention services for youth. As part of its strategy, the Foundation has identified three primary objectives for prevention and early intervention services:

- Expand education and training
- Increase access and strengthen implementation
- Develop and disseminate knowledge

Prevention for those not yet using and early identification and intervention of those in the early stages of use are essential to addressing the issue of youth substance use. The Hilton Foundation's promotion of prevention and early intervention services, including routine, universal screening of adolescent populations, is laying the groundwork for a sea change among youth-serving systems.

The Strategic Initiative is designed to advance the understanding of substance use as a health issue by implementing screening and early intervention approaches to prevent and reduce substance use among youth as part of routine practice in health care and other settings where they receive services. In this rapidly-evolving field, the Foundation has outlined and executed a structured approach to fund programs designed to move the needle in training, delivery, and evaluation of youth-related substance use prevention and early intervention activities, specifically emphasizing the screening, brief intervention, and referral to treatment (SBIRT) framework. Through the Strategic Initiative, Foundation grantees develop training and technical assistance curriculums and toolkits, implement innovative screening and early intervention approaches in a variety of settings, and conduct systems change activities designed to prevent and reduce youth substance use and promote health and wellbeing.

In 2014, Abt Associates was selected by the Conrad N. Hilton Foundation as their Monitoring, Evaluation, and Learning (MEL) partner for its Youth Substance Use Prevention and Early Intervention Strategic Initiative. The grant to Abt Associates represents an important opportunity for and collaboration between the Foundation, its grantees, Abt, and the broader stakeholder field.

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Abt Associates' three-year project is responsible for implementing an evaluation and learning process to:

- Measure progress towards advancing the goals of the Strategic Initiative
- Identify key areas of learning and develop recommendations for the Foundation, grantees, and stakeholder field
- Collect data and advise on improvements needed to strengthen delivery systems and improve local evaluation capacity
- Identify aspects of systems change needed to sustain implementation and support scalability

The MEL Project team works collaboratively with the Foundation, its grantees, and the broader community to provide information on grantee progress to date related to the Foundation's goals, measure grantee process and implementation, encourage cross-grantee engagement and networking to leverage lessons learned, and promote long-term and sustained impact. The MEL Project allows the Foundation opportunity to respond to findings, strategize funding activities, and restructure goals and objectives on an ongoing basis. The MEL Project is led by Dana Hunt, PhD as its Principal Investigator, Cori Sheedy, PhD is the Project Director, Melanie Whitter is the Project Quality Advisor, and Leigh Fischer, MPH, formally of SBIRT Colorado, is the lead for grantee engagement. Site liaisons from the MEL Project team work collaboratively with each grantee and data analysts examine the data. Drs. Edward and Judith Bernstein of the BNI-ART Institute provide ongoing guidance and expertise.

## Grant Program Landscape and Results

Implementation of prevention and early intervention services, including services that utilize the SBIRT framework, requires a multi-faceted approach to reach several key target audiences, with varying intensity and types of activities. The Hilton Foundation's Strategic Initiative accomplishes this approach in a deliberate and successful way. Additionally, the Strategic Initiative provides fertile ground to add to the body of knowledge regarding the feasibility (implementation, policy change, and funding) and utility (effectiveness at reducing alcohol and other drug use) of prevention and early intervention activities in different settings for adolescents.

Grantees are working in the areas of greatest promise of reaching the most adolescents – primary care, behavioral health care, schools, and juvenile justice and community programs. Youth-serving providers in each of these settings require:



Schools



Juvenile Justice Organizations



Health Care Practices



Community Organizations

- Training and technical assistance to implement evidence-based screening approaches for youth; provide meaningful brief interventions to those who screen low-to-moderate risk; and refer youth to treatment or other services as necessary
- Assistance in adopting strategies to integrate the practice as part of routine care or service delivery
- Support changing policy and practice to secure payment for services for physicians and other health and youth-serving practitioners

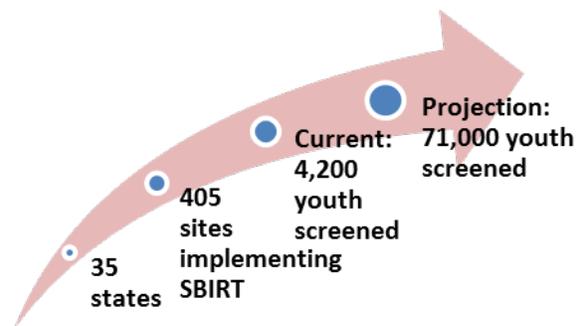
To respond to these needs, grantees are instituting fellowships for addiction medicine training, developing SBIRT materials and resources, and training physicians, social workers, nurses, and other youth-serving

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providers to best serve the needs of adolescents. The variety of target audiences for training and technical assistance methods requires grantees to tailor the training approaches, modules, and curricula. *As of June 30, 2015, 3,100 providers serving youth have been trained (3-year goal of 5,000 youth-serving providers trained).*

Equally important to training providers to deliver the brief or other grantee-specific interventions, is the raising awareness and knowledge of promising and evidence-based prevention and early intervention services to a variety of audiences – policymakers, researchers, parents, youth, and providers. Grantees are developing and disseminating briefs, reports, and articles and conducting webinars, presentations, and conferences to expand the availability and discussions around effective and promising practices. Additionally, grantees are developing critical papers to be circulated in the field to inform practitioners and policymakers of issues related to youth SBIRT. *As of June 30, 2015, 8,100 individuals have participated in presentations or received targeted materials on these topics (3-year goal of 25,000).*

Increasing access to SBIRT services is critical to ensure youth receive appropriate prevention and early intervention services. Through the Strategic Initiative, settings across the United States offer SBIRT through different settings that provide services to adolescents. Through the Foundation's grantees, there are 130 new community-based program sites implementing screening and early intervention services for youth, 129 school based health centers (SBHCs)/schools, 103 general health and 29 community behavioral health care settings, and 14 juvenile justice programs. Due to the different settings, target audiences, implementation contexts, and project goals, grantee approaches need to vary – some provide universal screening with brief interventions and treatment or service referrals when indicated, while others are using the SBIRT framework to test models that are more targeted towards youth at higher risk of having or developing substance use disorders. *As of June 30, 2015, 4,200 youth have been screened (3-year goal of 71,000 youth screened).*



Grantees are also targeting activities to influence and affect policy and legislation – at the local, state, and national levels. *Grantees in nine states and across the nation* are conducting policy and advocacy activities to influence legislative and insurer to expand coverage for and fund prevention and intervention services more globally. Many grantees are also leveraging their Hilton grant award and as of June 30, 2015, grantees have raised \$4,000,000 in public funding including from the federal and state government entities and \$3,300,000 in private funding from foundations.

All grantees are examining the impact of their project on specific audiences at the organization, community, state, and/or national levels and six grantees are conducting research and collecting long-term outcome data of youth served through their grant project, with an aggregate goal of *approximately 3,000 youth*. As research in this field is limited, the project data and publications and resources developed by the grantees will provide strategic insight into future directions for SBIRT implementation, in addition to other prevention and early intervention activities, to be utilized by broad cross-section of stakeholders.

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## Conclusion and Recommendations

The Foundation is funding comprehensive activities to change how systems provide services to prevent, identify, and intervene early in adolescent substance use. The implementation of any intervention requires an approach that intersects target audiences, settings, and systems in multiple ways; the implementation of prevention and early intervention services, particularly those that utilize the SBIRT framework, is no different. Ultimately, implementation of SBIRT services requires a comprehensive approach integrating multiple, unique opportunities to promote widespread systems change to improve the health and wellbeing of our nation's youth. During Year 1 of the MEL Project, the Abt Team gathered qualitative and quantitative data, participated first-hand in grantee events and training activities, and built relationships with Foundation's grantees. Through the insight and knowledge gained from these activities, recommendations and key activities are provided for the Foundation's consideration to overcome common implementation challenges and expand the reach of its Strategic Initiative (Exhibit ES.1).

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## Exhibit ES.1. Recommendations and Key Activities for Expanding the Strategic Initiative's Reach and Impact

Recommendation	Key Activities
<p>1. Improve knowledge and address stigmatizing and ambivalent attitudes of providers, policymakers and others about adolescent substance use</p>	<ul style="list-style-type: none"> <li>• Gather input from stakeholders (providers, policymakers, parents, and youth) on messaging of P&amp;EI/SBIRT and create an action plan to change perceptions based on the stakeholder input</li> <li>• Develop an integrated strategy to provide ongoing training and technical assistance to ensure that training/technical assistance is of high-quality and in accordance with best practices</li> <li>• Expand training and technical assistance activities into previously untapped populations</li> <li>• Assess implementation of skills trained and fidelity to the SBIRT training model</li> <li>• Develop communication and dissemination plans and products to spread awareness of the grantee project results and outcomes</li> </ul>
<p>2. Strengthen emerging evidence base for youth SBIRT, with particular emphasis on screening and brief intervention practice</p>	<ul style="list-style-type: none"> <li>• Unpack the SBIRT models and approaches being implemented and identify the core components of brief interventions that seems to be most effective in reducing substance use among youth</li> <li>• Conduct rigorous follow-up studies of the impact of SBIRT and its components on screened youth substance use</li> <li>• Identify best practices based on target audience and setting in implementing SBIRT</li> <li>• Fund projects that track impact on and outcomes of youth participating in brief interventions and referrals to treatment</li> </ul>
<p>3. Develop infrastructure necessary to support adoption of SBIRT as part of routine care</p>	<ul style="list-style-type: none"> <li>• Conduct analyses of reimbursement and coverage policies in states with advocacy efforts to identify the impact of changes in legislation on the systems involved</li> <li>• Conduct technical assistance on changing systems and workflow for successful implementation and sustainability</li> <li>• Identify and fund projects with a prevention framework and messaging</li> <li>• Examine partnership opportunities to strategically fund implementation activities in nontraditional settings</li> <li>• Determine specific impacts on providers newly conducting SBIRT activities</li> <li>• Develop FAQs on electronic health records, including myths and facts</li> </ul>
<p>4. Build capacity of practitioners to provide appropriate linkages and referrals to services and the treatment system</p>	<ul style="list-style-type: none"> <li>• Examine referral mechanisms and treatment resources for youth screened low, mid, high risk</li> <li>• Create a brief designed to increase provider understanding of local options for treatment and additional services and develop recommendations for improving referral protocols and relationships with local behavioral health professionals</li> <li>• Review confidentiality laws and provide guidance on confidentiality procedures for SBIRT implementation for schools/SBHCs, primary care, and community programs</li> </ul>
<p>5. Create core competencies and/or quality improvement metrics to support program development to align with promising and emerging practices</p>	<ul style="list-style-type: none"> <li>• Conduct an environmental scan on core competencies and quality improvement metrics for project planning and implementation</li> <li>• Create and execute a strategy with defined measures and standards that follow best and promising practices in program development and implementation</li> </ul>