



Florida Youth Substance Abuse Survey: Actionable Data to Drive Prevention and Intervention Strategies

Bureau of Exceptional Education and Student Services

Student Support Services Project

<http://sss.usf.edu>



FLORIDA DEPARTMENT OF
EDUCATION
fldoe.org

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www.FLDOE.org

SB 7026 (s.1011.62(16), 2(b), F.S.)

The plans required under paragraph (a) must be focused on delivering evidence-based mental health care treatment to children and include the following elements:

Provision of mental health assessment, diagnosis, intervention, treatment, and recovery services ***to students with one or more mental health or co-occurring substance abuse diagnoses and students at high risk of such diagnoses.***



2018 Florida Youth Substance Abuse Survey



State Report



**Executive Office
of the Governor**

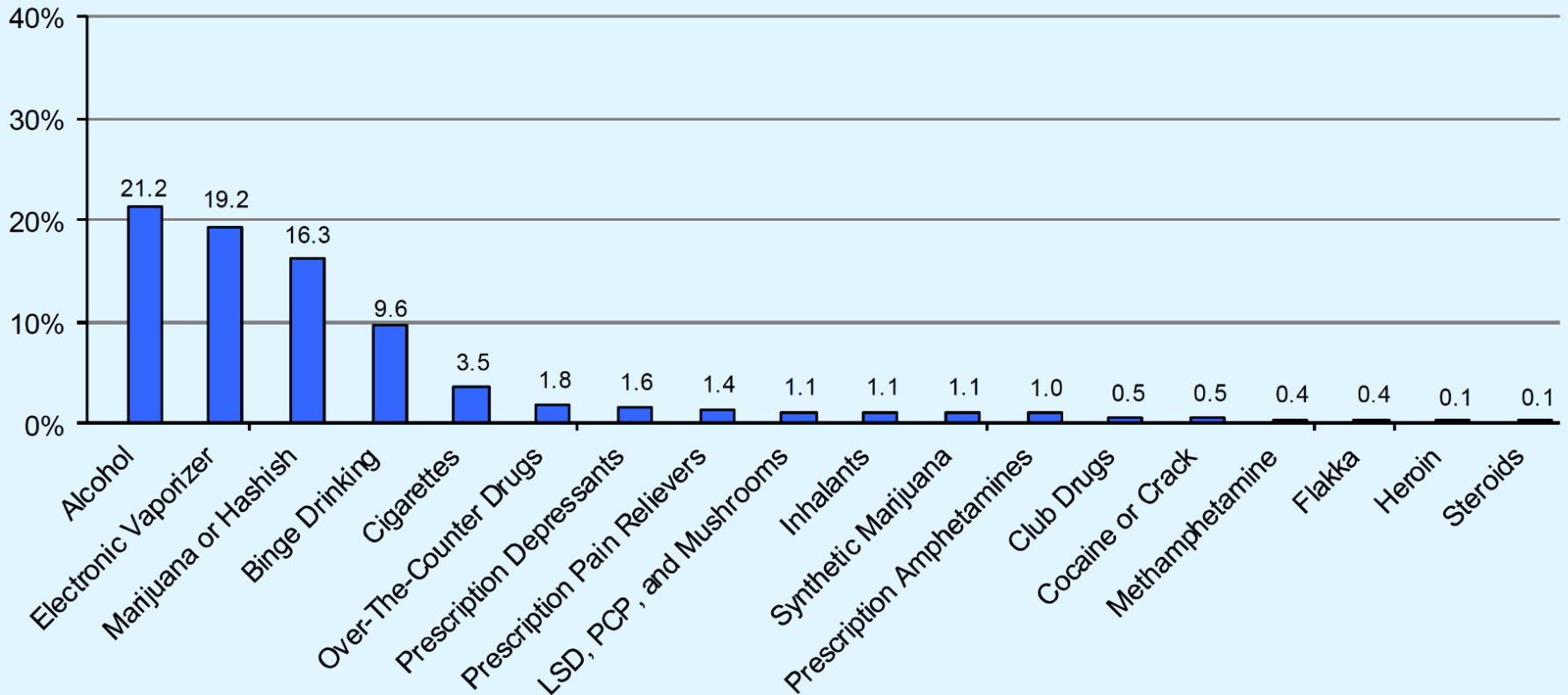
Florida Youth Drug Use 2018



- Pick the top three commonly used drugs among Florida students from the following list:
 - Prescription drugs
 - Inhalants,
 - Alcohol,
 - Cigarettes,
 - Electronic vapor products
 - Marijuana

**Graph
4**

Past-30-day use of alcohol, tobacco and other drugs among high school students, 2018



Florida Youth Drug Use 2018



- While not highly prevalent, name two drugs that are commonly used on school property.
- Prescription drugs,
- Inhalants,
- Alcohol,
- Cigarettes,
- Electronic vapor products,
- Marijuana

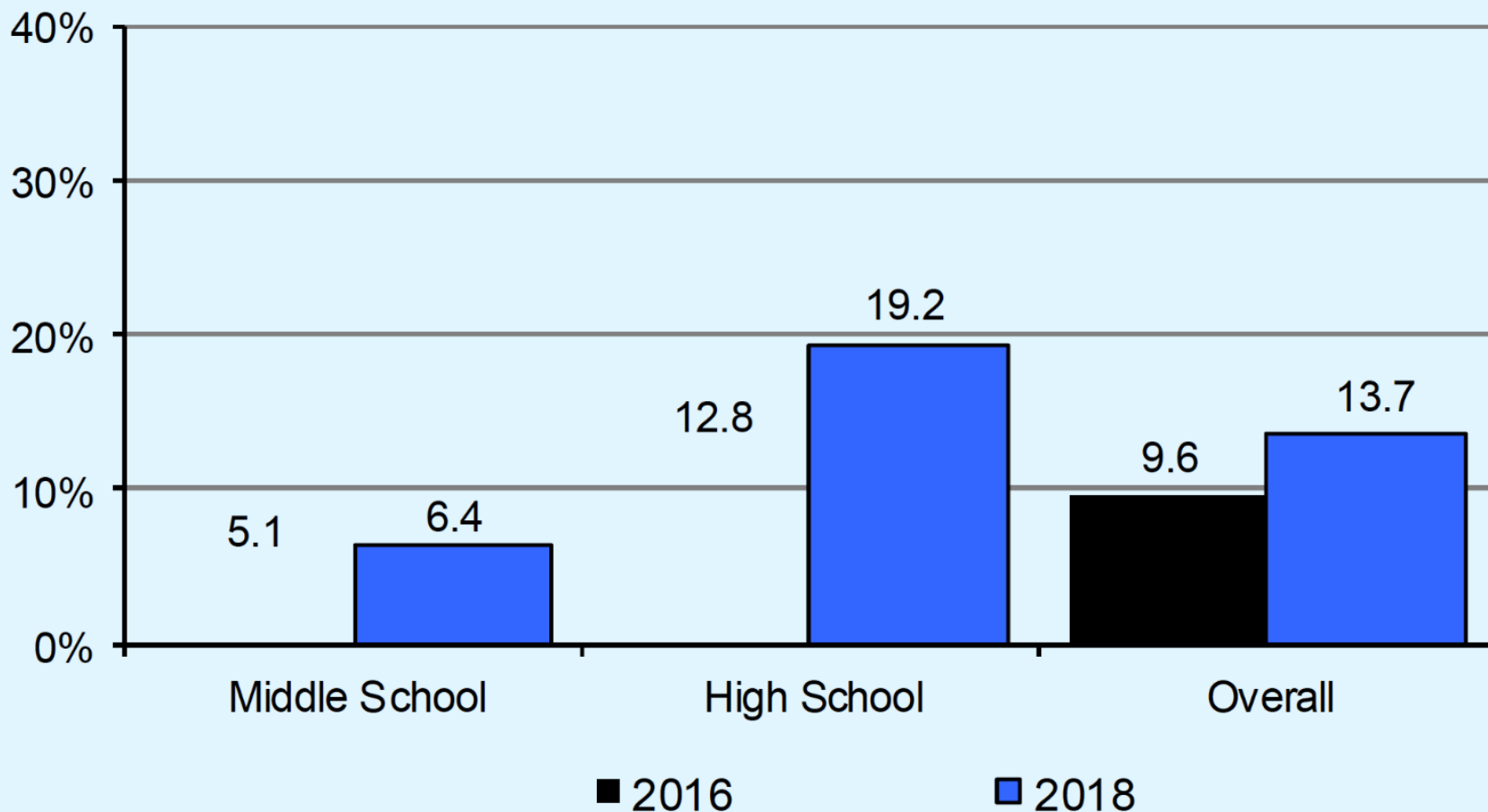
Vapor Use in Middle and High School Students



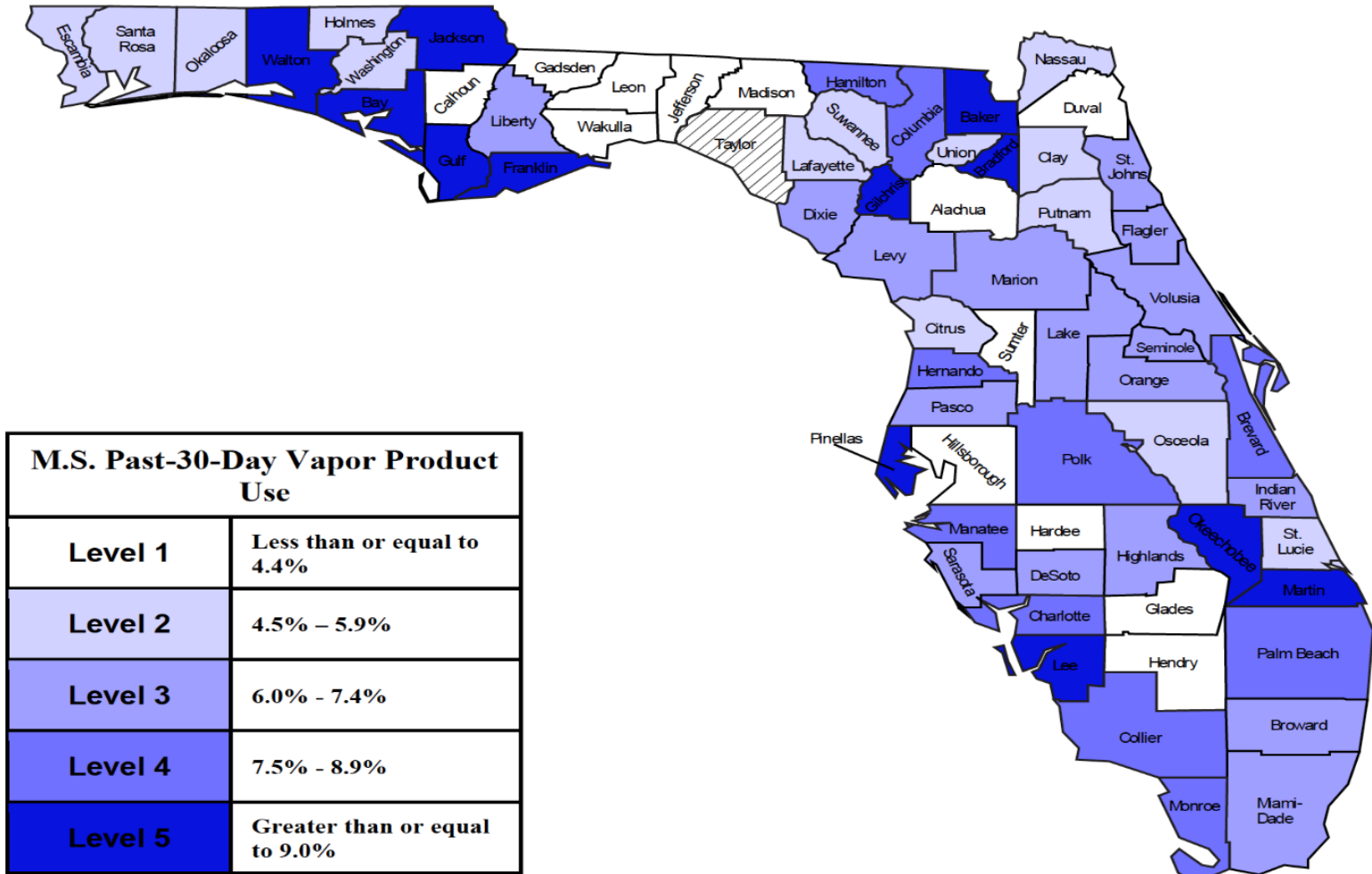
https://www.youtube.com/watch?v=WLD7kW_uVEY

**Graph
8**

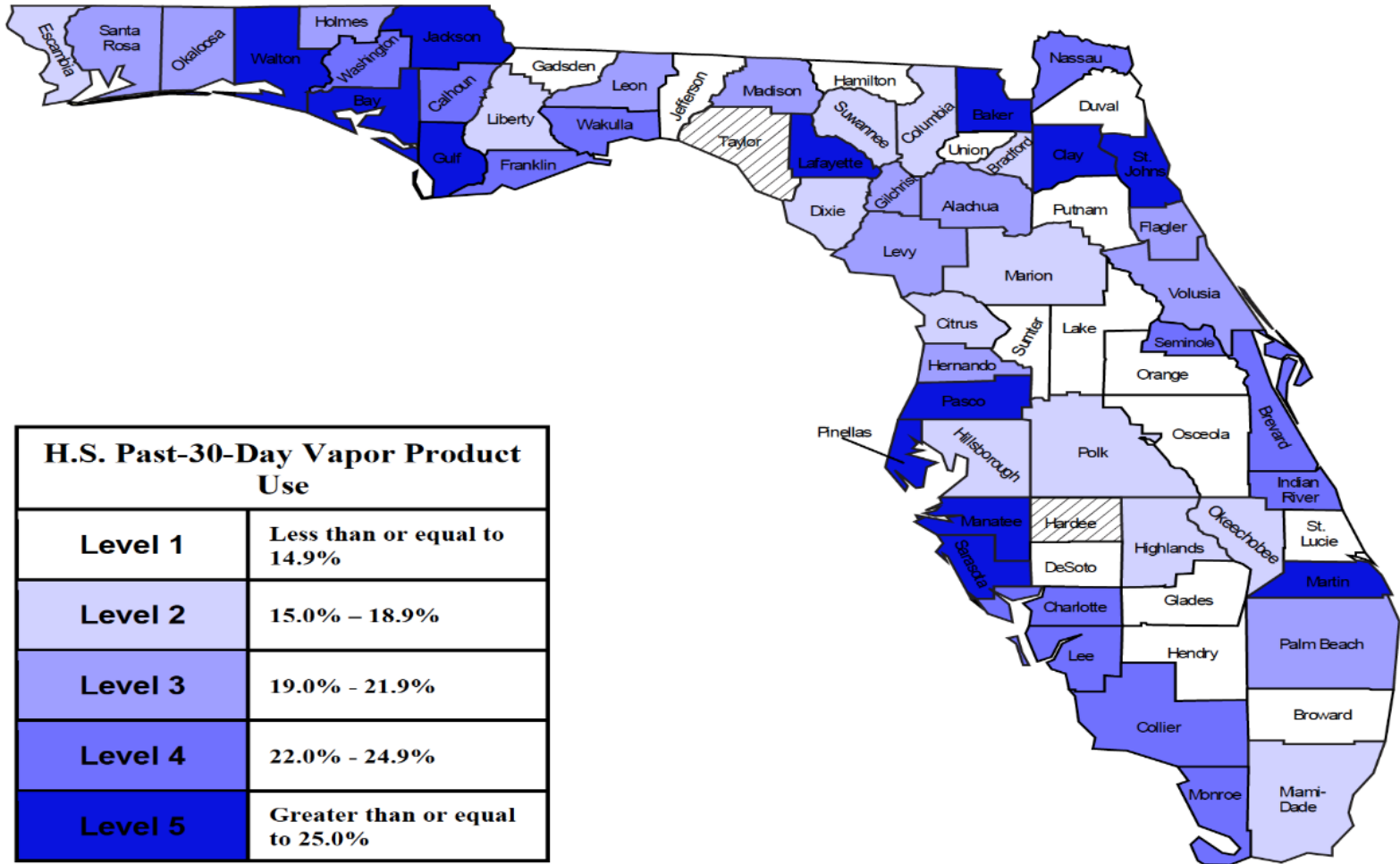
Comparison of past-30-day electronic vapor product use, 2016-2018



Map 5. Prevalence of middle school past-30-day vapor product use by county, 2018 *FYSAS*



Map 6. Prevalence of high school past-30-day vapor product use by county, 2018 FYSAS



Florida Youth Drug Use 2018



True or False:

There are risk and protective factors that can be used to drive prevention and intervention efforts.

PROTECTIVE AND RISK FACTORS

PROTECTIVE FACTORS:

Conditions that buffer children and youth from exposure to risk by either reducing the impact of the risks or changing the way that young people respond to risks.

RISK FACTORS:

Conditions that increase the likelihood of a young person becoming involved in drug use, delinquency, school dropout and/or violence.

Table 67. Percentage of Florida high school youth with elevated protective factor scale scores—2006 to 2018

	2006	2008	2010	2012	2014	2016	2018
Family Domain							
Family Opportunities for Prosocial Involvement	52	53	55	56	58	59	57
Family Rewards for Prosocial Involvement	52	54	53	54	56	56	51
School Domain							
School Opportunities for Prosocial Involvement	58	59	60	61	62	63	64
School Rewards for Prosocial Involvement	55	56	59	61	60	59	55
Peer and Individual Domain							
Religiosity	61	61	60	59	57	57	54
Protective Factor Average	56	57	57	58	59	59	56

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

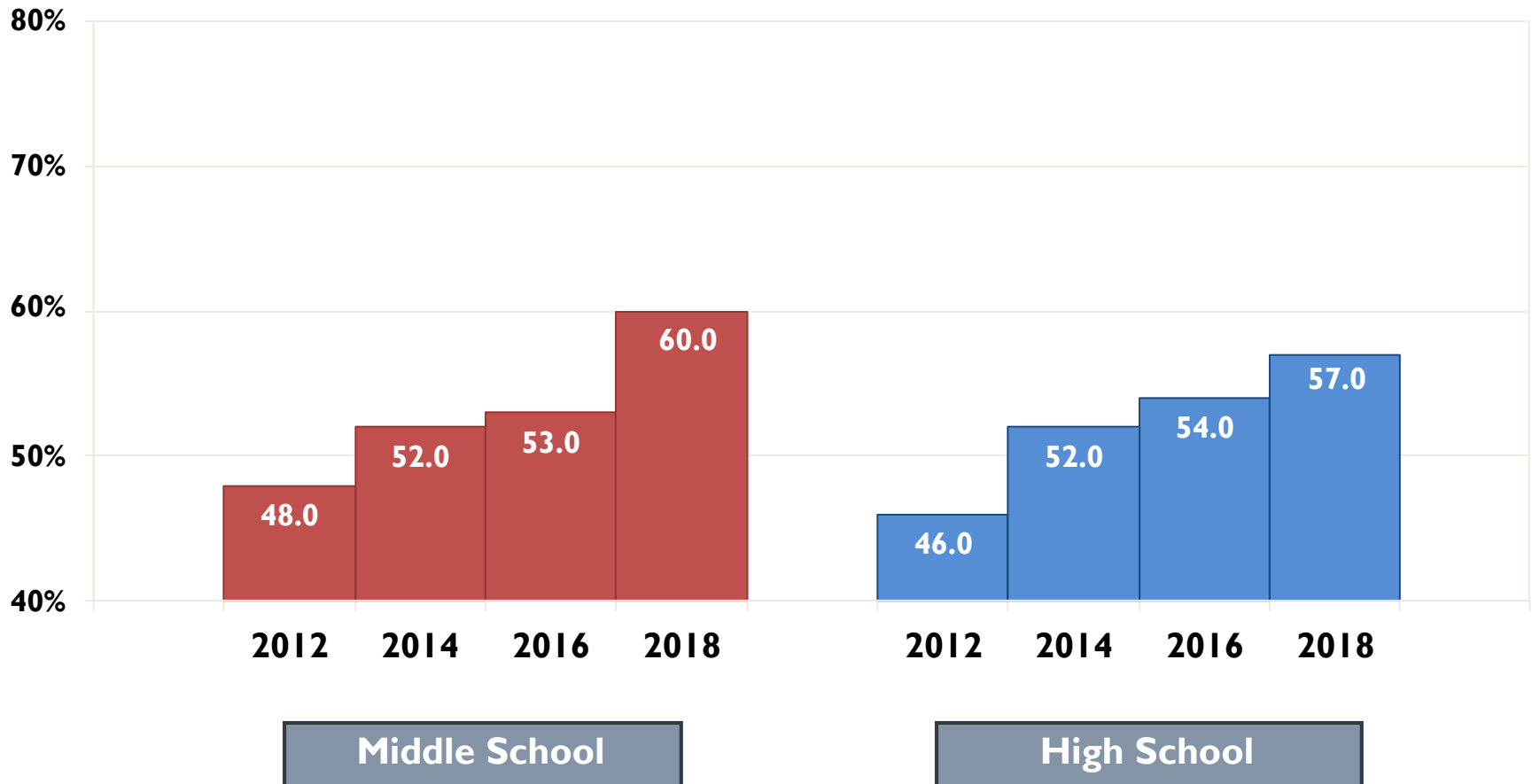
Table 63. Percentage of Florida youth with elevated risk factor scale scores, 2018

	Middle School	High School	Overall
Community Domain			
Community Disorganization	38	40	39
Transitions and Mobility	59	61	60
Laws and Norms Favorable to Drug Use	38	32	35
Perceived Availability of Drugs	35	24	29
Perceived Availability of Handguns	24	34	30
Family Domain			
Poor Family Management	43	37	39
Family Conflict	39	34	36
School Domain			
Poor Academic Performance	43	43	43
Lack of Commitment to School	60	57	58
Peer and Individual Domain			
Favorable Attitudes toward Antisocial Behavior	43	36	39
Favorable Attitudes toward ATOD Use	35	34	34
Early Initiation of Drug Use	24	19	21
Risk Factor Average	40	38	39

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

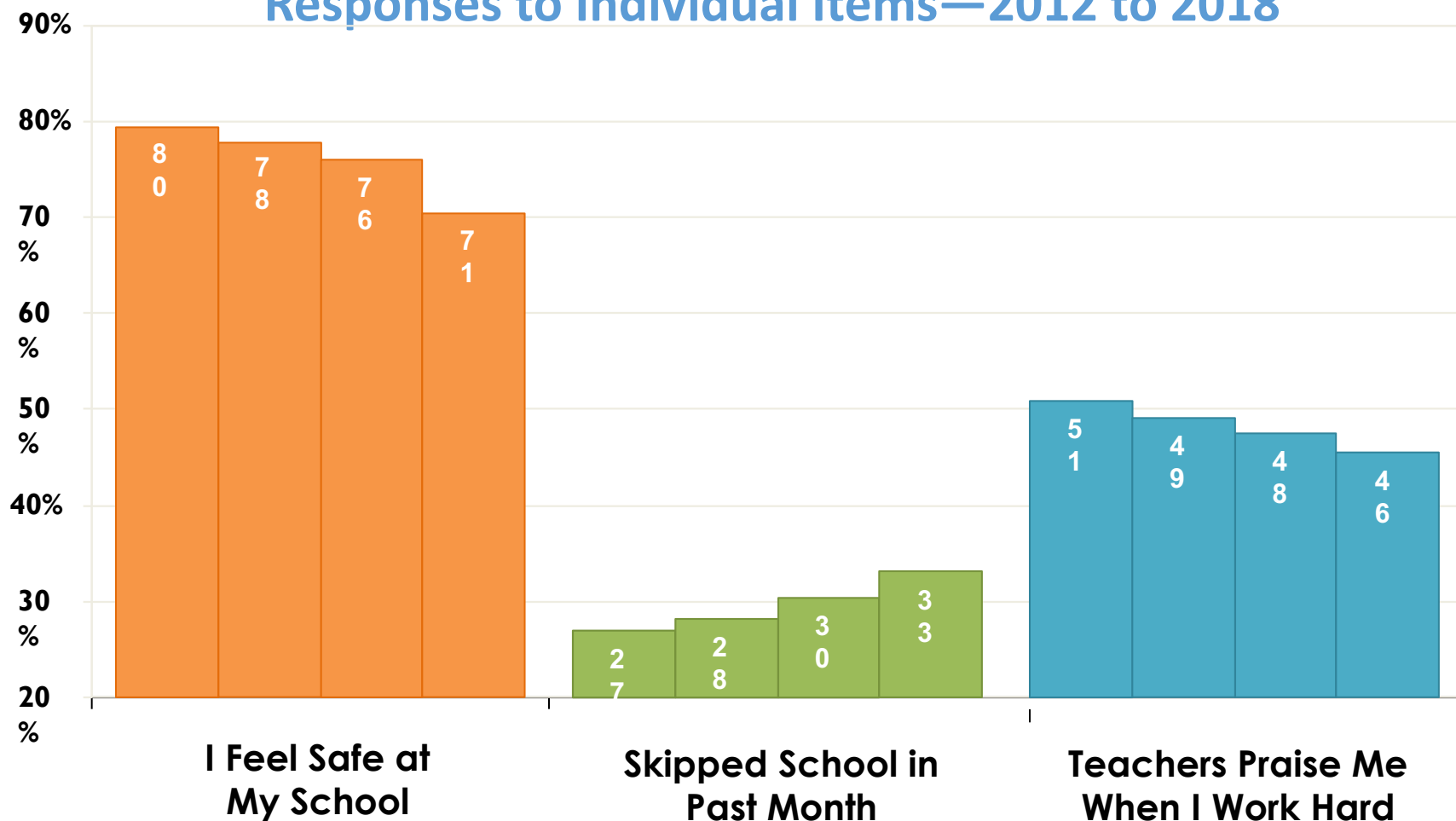
Lack of Commitment to School

Percentage of Students at High Risk by Grade Cohort



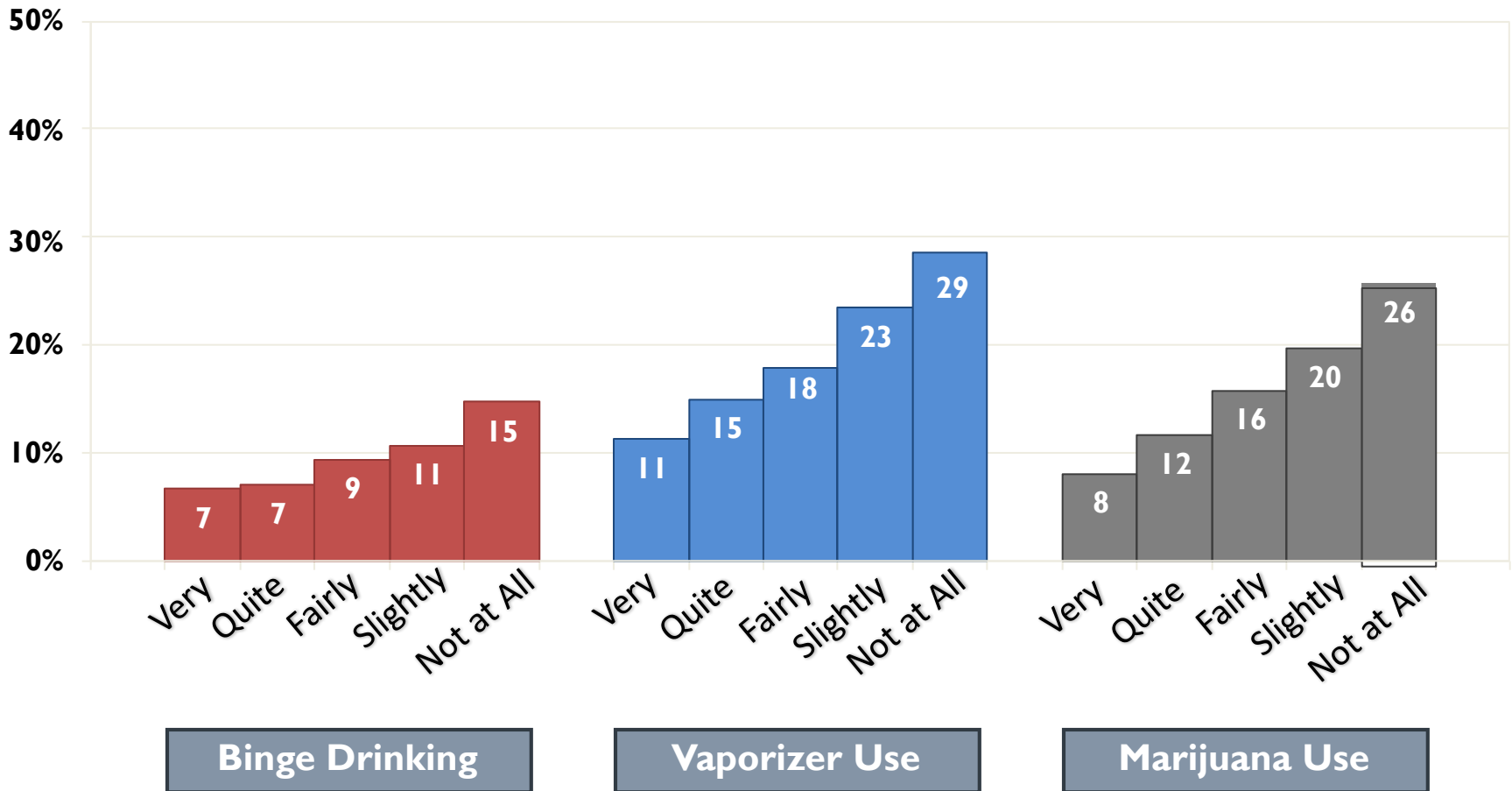
Attitudes Toward School

Responses to Individual Items—2012 to 2018



Relationship Between “School Work is Important” and Substance Use

Past-30-Day Prevalence Among High School Students





SBIRT is...

- ◆ Evidenced-based
- ◆ A UNIVERSAL health screening
- ◆ Proactive – not reactive; preventative
- ◆ Identifies substance use and discusses risk
- ◆ Uses Motivational Interviewing principles and practices to model effective strength-based communication and support to students on difficult issues

SBIRT IN SCHOOLS

Screening and Brief Intervention Protocols



Introduce screening

I am going to ask a few health screening questions about alcohol and other drug use that we are asking all students in your grade.

Address confidentiality

There is no written record of this screening that includes information that specifically identifies you. Anything you tell me will be kept as confidential as possible. One reason why this information would not be kept confidential is if something you say indicates that there is an immediate risk to your safety or someone else's safety. Additionally, you, your parent, or your guardian, could request the information we discussed today. In any case, we would figure out next steps for support together. Do you understand?

Define substances

By alcohol we mean beer, wine, wine coolers, or liquor. By drugs we mean anything that one might use for the feeling it causes including: marijuana, heroin, prescription drugs like OxyContin, etc.

Ask permission to ask questions

Is it okay to ask you these questions?

CRAFFT-II Screen

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?
- 2 Use any marijuana (e.g., weed, oil, or hash by smoking, vaping, or in food) or "synthetic marijuana" (e.g., "K2" or "Spice")?
- 3 Use a prescription medication or pill that was NOT prescribed to you or MORE than was prescribed to you (e.g., prescription pain pills or ADHD medications)?
- 4 Use anything else to get high? (e.g., other illegal drugs, over-the-counter medications, and things that you sniff, huff, or vape)?
- C Have you ever ridden in a CAR driven by someone (including yourself) who was high or had been using alcohol or drugs?

If no days of use, then STOP here. ↓ If any days of use, ASK ALL ?'s BELOW.

- R Do you ever use alcohol or drugs to RELAX, feel better about yourself, or fit in?
- A Do you ever use alcohol or drugs while you are by yourself, or ALONE?
- F Do you ever FORGET things you did while using alcohol or drugs?
- F Do your FAMILY or FRIENDS ever tell you that you should cut down on your drinking or drug use?
- T Have you ever gotten into TROUBLE while you were using alcohol or drugs?

Brief Intervention

Build Rapport	I'd like to learn a little more about you...	HOW CONFIDENT ARE YOU? EXTREMELY 10 9 8 7 6 5 4 3 2 1 HOW READY ARE YOU? NOT AT ALL
	What are important things/hopes/goals in your life now? OR What is a typical day like for you? How does your use of [X] fit in?	
Explore Pros & Cons	What do you enjoy/like about using [X]? What do you enjoy less or regret about using [X]?	
	Explore problems mentioned in CRAFFT: You mentioned... Can you tell me more about that? So, on the one hand you said [PROS], and on the other hand you said [CONS]. Emphasize CONS.	
Provide Feedback	What do you know about the risks of using [X]?	
	Would you mind if I shared some health/safety information about [X]? Provide 1-2 salient substance specific health/safety effects. What are your thoughts about that?	
Use Readiness Ruler	On a scale of 1-10, how ready are you to change <u>any</u> aspect of your [X] use?	
	Why did you choose a [X] and not a lower number like a 1 or 2? If "1": What would need to happen to consider a change? Reflect back student's reasons for change.	
Negotiate Action Plan	Given our discussion, what might you do?	
	On a scale of 1-10, how confident are you that you could meet this goal? What might help you to get to a higher number? What helped you succeed with changes in the past? What obstacles do you anticipate? When/if making suggestions, use Elicit-Provide-Elicit. Summarize plan. Thank student.	

Referrals: MA Substance Use Helpline • 800-327-5050 • helplinema.org

Resources: www.masbirt.org/schools • <https://massclearinghouse.ehs.state.ma.us>

The CRAFFT-II Questionnaire - SBIRT in Schools

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?	<input type="text"/>
		PUT 0 IF NO USE
2	Use any marijuana (for example, weed, oil, or hash by smoking, vaping, or in food) or "synthetic marijuana" (for example "K2" or "Spice")?	<input type="text"/>
		PUT 0 IF NO USE
3	Use a prescription medication or pill that was NOT prescribed to you or MORE than was prescribed to you (for example, prescription pain pills or ADHD medications)?	<input type="text"/>
		PUT 0 IF NO USE
4	Use anything else to get high (for example, other illegal drugs, over-the-counter medications, and things that you sniff, huff, or vape)?	<input type="text"/>
		PUT 0 IF NO USE
C	Have you ever ridden in a CAR driven by someone (including yourself) who was "high" or had been using alcohol or drugs?	<input type="checkbox"/> YES <input type="checkbox"/> NO



If no days of use, then STOP here.



If any days of use, ASK ALL CRAFFT ?s BELOW.

R	Do you ever use alcohol or drugs to RELAX, feel better about yourself, or fit in?	<input type="checkbox"/> YES <input type="checkbox"/> NO
A	Do you ever use alcohol or drugs while you are by yourself, or ALONE?	<input type="checkbox"/> YES <input type="checkbox"/> NO
F	Do you ever FORGET things you did while using alcohol or drugs?	<input type="checkbox"/> YES <input type="checkbox"/> NO
F	Do your FAMILY or FRIENDS ever tell you that you should cut down on your drinking or drug use?	<input type="checkbox"/> YES <input type="checkbox"/> NO
T	Have you ever gotten into TROUBLE while you were using alcohol or drugs?	<input type="checkbox"/> YES <input type="checkbox"/> NO

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