

Report Summary for School Staff Delivering SBIRT Services

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Students who received SBIRT needed the services.

- Initial GAIN screening results showed wide prevalence of moderate-to-high internalizing and externalizing symptoms among this group of students. These results suggest that SBIRT was delivered as a Tier 2/3 intervention to selected at-risk (Tier 2) and indicated high risk (Tier 3) students. If unaddressed, these behavioral health issues can pose significant threats to development, school engagement, and learning.
- The BI was most effective for students reporting a higher number of GAIN symptoms.
- The BI was effective across all target behaviors.

There are implementation barriers to consider.

- The level of implementation into practice was minimal. 43% of trained staff implemented services with students. Most staff (61%) reported a low level of implementation to 1-2 students.
- Limited uptake suggests many barriers exist such as lack of time, competing demands, lack of team structure to identify students, and other barriers.
- School staff who attended Community of Practice Sessions implemented SBIRT with more students.

The School SBIRT Brief intervention works.

- There was a robust BI effect that was statistically significant and clinically meaningful.
- Students showed symptom reduction across all domains of GAIN screening (internalizing, externalizing, alcohol/drug, crime violence).
- Students showed decreased frequency of problem behavior.

Screening Scores, N=181 completed	Initial	Follow Up
GAIN Internalizing Symptoms*	1.8	1.4
GAIN Externalizing Symptoms*	1.9	1.4
GAIN Alcohol/Drug Symptoms*	0.7	0.3
GAIN Crime/Violence Symptoms**	0.4	0.2
Frequency of Change Target During the Past 30 Days*	10.2	4.9

*p < .001, **p < .03

Full Report is available:

https://www.wishschools.org/resources/schoolsbirt.cfm