A well-established, evidence-based, comprehensive public health model used to address selected health behaviors within a population. Originally designed for delivery in healthcare, SBIRT is readily adapted for delivery in middle and high schools by members of the pupil services team.

School SBIRT
Screening, Brief Intervention and Referral to Treatment

Why SBIRT?

1. **An evidence-based practice** to address adolescent’s involvement with alcohol and other drugs. Expected outcomes include: reduced frequency of use, reduced problem symptoms, and increased engagement in services.

2. **A promising practice** to address a range of other adolescent behavioral health and academic concerns including: mental health, fighting, classroom conduct, attendance, and homework completion.

3. **Good developmental “fit”** with adolescents and is student-friendly. It also fits with student services philosophy as a student-centered and strength-based approach.

4. **Fits within the Response to Intervention/PBIS framework** as a Tier 2 selective intervention or Tier 3 individual intervention. Response to brief intervention is readily ascertained to allow evaluation of effectiveness.

5. **Implementation is efficient and flexible.** You have flexibility to decide the behavioral focus of the brief intervention and how many sessions to deliver. Typically, the number of sessions is 3 or 4, lasting about 15 minutes each.

Training Goal

For participants to systematically implement SBIRT with fidelity into your school. Training involves the following:

- Pre-training reading and assignment (1 hour)
- Creation of an initial implementation plan
- Initial training (1 day) which is experiential and skills-focused
- Initial delivery of SBIRT with simple data tracking
- Follow-up training (1 day)

Screening: Administer, score, and interpret standardized instruments to efficiently assess a student’s level of risk

**Brief Intervention:** Protocol-guided and delivered with Motivational Interviewing, the focus is on a single target behavior across 1-4 sessions with student (about 15 minutes each)

**Referral to Treatment:** For high risk students who do not respond to the Brief Intervention

**Intervention:** For alcohol and other drugs, attendance, fighting, homework completion, classroom conduct, and mental health
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Sponsored by:
Wisconsin Department of Health Services
Wisconsin Department of Public Instruction
Wisconsin Safe and Healthy Schools Center

For more information about School SBIRT and training, please go to http://www.wishschools.org/resources/schoolsbirt.cfm