OBJECTIVE 1: Create and evaluate tools to measure SBIRT outcomes

**Design: Longitudinal Cohort Study of Youth Ages 14-18 years. Preliminary Findings:**

- Current enrollment: n= 524 baseline, n=439 6-mo follow-up, ongoing 12-mo follow-up
- 38% report past year alcohol use, of which 26% drank at binge level
- 29% report past year marijuana use, of which 27% used weekly more
- 27% of past year marijuana users met criteria for cannabis use disorder

OBJECTIVE 2: Engage providers, parents of medically vulnerable youth

**National survey of parents (n=368)/providers (n=262) of teens w/ type 1 diabetes or rheumatic disease**

**Parent concerns re: children’s substance use**

- 84% were concerned that alcohol use would affect their child’s symptom severity; 75% had the same concern about marijuana
- 85% were concerned that alcohol would affect their child’s ability to manage their condition; 79% had the same concern about marijuana

**Parent discussions with child**

- 18% had never talked with their child about alcohol use
- 18% had never talked with their child about marijuana use
- 65% would like their child's subspecialty provider to discuss substance use with their child

**Subspecialists screening practices**

- 39% screen their teenage patients for alcohol use annually or more
- Structural barriers, not knowing how to respond to screening results, and insufficient support services were associated with decreased screening

**Pediatric specialists concerns**

- 79% report concern regarding the side effects of marijuana for their patients
- 62% report concern about the effects of alcohol use in combination with contraindicated medication among their patients

OBJECTIVE 3: Design and test a brief intervention to reduce substance use by medically vulnerable youth

**Design:** Randomized controlled trial
**Setting:** Pediatric endocrine, rheumatology, and gastroenterology clinics at BCH
**Sample:** 450 youth ages 14-18 with type 1 diabetes, rheumatic conditions or IBD
**Status:** 386 currently enrolled, 209 completed 6-mo follow-up, 53 completed 12-mo follow-up

Contact: elissa.weitzman@childrens.harvard.edu, sharon.levy@childrens.harvard.edu