

Alcohol Use Risk Level and Reasons to Change among College Students who Completed a Digital Form of Screening, Brief Intervention, and Referral to Treatment (SBIRT)

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INTRODUCTION

National survey data collected prior to the COVID-19 pandemic indicated elevated rates of alcohol use among full-time college students ages 18-22, such that approximately 53% reported past month use and 33% reported past month binge drinking (SAMHSA, 2019). Emerging research suggests that college students’ alcohol use became more problematic during the pandemic. For example, one study found increased use in terms of number of days (Schepis et al., 2021) and another study found increased rates of alcohol use disorder (Kim et al., 2022) among college students compared to pre-pandemic rates. Screening, Brief Intervention, and Referral to Treatment (SBIRT) is a widely used screening approach that is used to assess risk and provide brief intervention and/or referral to treatment as needed (SAMHSA, 2022). Digital versions of SBIRT enable more widespread use of this approach and may also inform prevention and intervention efforts on campus. The focus of the current study was to examine college students’ alcohol use risk levels as assessed by an online SBIRT program. Additionally, we examined reasons to change alcohol use, readiness to change, importance to change, and confidence in success among students who reported high-risk alcohol use.

OBJECTIVES

1. Examine students’ level of alcohol use risk assessed on a brief, anonymous, online screening.
2. Code high risk alcohol users’ reasons to change drinking based on themes identified.
3. Examine importance, confidence in success, and readiness to change alcohol use among students at high risk.

METHODS

Participants

The sample included 310 undergraduate students from a mid-sized, Catholic, liberal arts university located in the northeast.

Procedures

Following exemption approval from the Institutional Review Board, undergraduate students were recruited via the Psychology Department research management system which Introduction to Psychology (foundational core course open to all majors) students are required to use as part of course credit. Students could select among a range of studies within the system. Additionally, campus-wide emails to recruit participants were sent out multiple times to all undergraduates. Students consented by clicking a link on the informed consent that accompanied the recruitment information to complete the brief, anonymous, online ScreenU Alcohol program. The final computer screen of ScreenU directed students to an anonymous survey separate from ScreenU, however data from that survey is not included in this study.

METHODS

ScreenU Alcohol is a digital form of Screening, Brief Intervention, and Referral to Treatment (SBIRT) developed by the Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery. ScreenU Alcohol is a brief, online, anonymous, interactive program that assesses the respondent’s alcohol use risk level and then, based on risk level, provides reinforcement, information, referral to treatment, and resources as appropriate. Students that report risky use are asked a series of questions based on motivational interviewing to guide them through a decisional balance regarding readiness to change their alcohol use and are provided with information on campus and other resources.

RESULTS

Students’ scores on the Alcohol Use Disorders Identification Test (AUDIT: Saunders et al. 1993; WHO et al., 2001), which is asked as part of ScreenU Alcohol, categorizes students based on risk level. A total of 34% students scored in the high risk range (see Table 1). Students who scored in the high risk range were asked a series of open-ended, decisional balance questions within the online screening, one of which was “What are some reasons you’ve thought about changing your drinking?”. Responses to this question were coded using a systematic, inductive, iterative process to yield final themes (code labels) and achieve inter-coder consistency (see Table 3). Students who scored in the high risk range were also asked to rate the importance of making a change in their alcohol use, their confidence in being successful in reducing or stopping use, and their readiness to change based on a scale of 1-10 (see Table 2).

Table 1. Students’ Alcohol Use Risk Level

Alcohol Use Risk Level	Percentage
In Recovery	.6%
No Use	15.2%
Low Risk	50.3%
High Risk - Harmful	2.6%
High Risk – Hazardous	29.7%
High Risk – Likely Dependent	1.6%

Table 2. Scores on Importance, Confidence, and Readiness to Change Among Student at High Risk (0 [low]-10 [high])

Change Variable	0-3	4-7	8-10
Importance to Change	75%	24%	6%
Confidence in Success	5%	27%	73%
Readiness to Change	43%	39%	23%

RESULTS

Table 3. Reasons to Change Among Students at High Risk

Code Label	Description	#
Short-Term Physical Symptoms	To avoid physical symptoms while drinking (i.e., stomach pain), physical symptoms the next day (i.e., hangovers)	23
Overall Health/Well-Being	To improve overall health, healthy lifestyle, well-being	18
Regret	To stop or avoid doing things while drinking that feel badly about later	13
Self-Image/Self-Respect	Due to sense of self, sense of responsibility, perceived appearance to others	13
Productivity/Academics	Recovering detracts from getting things done, academics, extracurriculars	12
Tolerance/Reliance	Concern need to drink more and more, rely on for fun	10
Weight Management	To avoid extra calories, detracts from efforts to manage weight	10
Long-Term Physical Health	Concern for long-term impact on physical health	9
Short-Term Mental Health Symptoms	To avoid short term mental health symptoms	9
Athletic/Physical Performance	Detracts from athletic performance/fitness	6
Physical Safety	To avoid endangering oneself	6
Long-Term Mental Health	Concern for long-term impact on mental health	5
Time	Time lost due to drinking or recovering from drinking	3
Financial	Money spent on alcohol	3
Heritability	Concern due to family history	2
Interest	Loss of interest, bored with drinking	2

CONCLUSIONS

Use of digital SBIRT helped to identify students drinking at high risk. In light of the variety of reasons to change provided by students at high risk, prevention and intervention efforts should be multi-faceted. More research is needed to better understand students’ importance, confidence, and readiness to change.

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