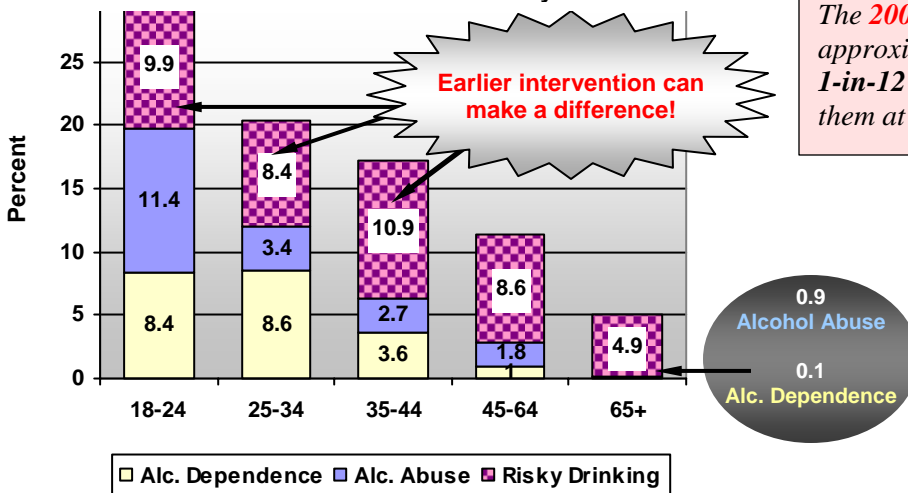


**Intervening Earlier Can Mean a Lifetime of Difference**

Like any *chronic disease*, alcoholism progresses from a less severe stage (risky drinking) to one that can be debilitating (dependence). In CT, 18-24 year olds have the second highest rate of risky drinking (9.9%), and the highest alcohol abuse (11.4%) rate of any age group. Left untreated, risky drinking may lead to more serious levels of use (e.g. addiction) resulting in alcohol-related medical or social problems and other consequences.

**Risky Drinking, Alcohol Abuse and Alcohol Dependence by Age: 2004 Adult Household Study**



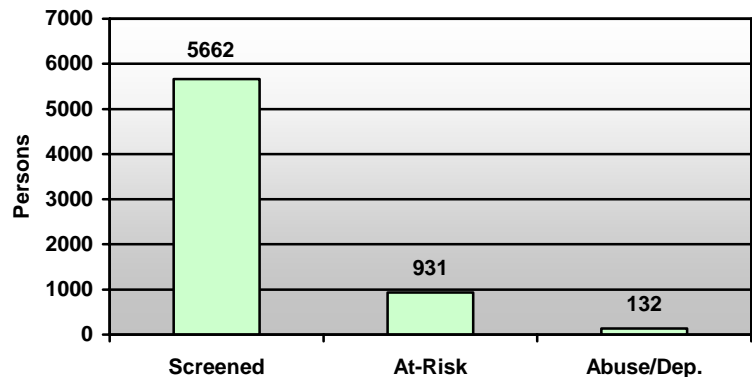
The 2004 Adult Household Survey<sup>1</sup> found that approximately **1-in-5 adults** was a risky drinker and **1-in-12** had used illicit drugs in the past year, putting them at risk of substance-related problems.

In response to this identified public health need, DMHAS applied for and was awarded a three-year, \$1.5M grant from the federal Center for Substance Abuse Treatment to implement Screening and Brief Interventions (SBI) services.

Early demonstration projects show promising results. A 1996 Yale study in a hospital emergency department demonstrated the potential success of brief intervention services. In a 90 day follow-up after the screening and brief intervention, among the 245 study participants, there was a 56% reduction in alcohol use and a 64% reduction in binge drinking. Over 50% reported they had followed through with their treatment referral. Similar successes have been found in other CT hospitals and community health centers like UConn School of Medicine's "Cutting Back" and "Vital Signs" programs.

The SBI program is located at New Haven's Hospital of St. Raphael's and Hill Health Center, a community health program. From April 2005 through March 2006 over **5,000** persons have been screened with **16%** of those identified as being at-risk for substance use and receiving a brief intervention. **Fourteen percent** of those were referred to treatment for more serious alcohol-related problems.

**Persons Screened, Receiving Brief Intervention and Referred to Treatment**



<sup>1</sup> DMHAS, in collaboration with the University of Connecticut Health Center, conducted an Adult Household Survey (AHS) to measure the prevalence of alcohol and other drug use, abuse and dependence. The telephone survey of over 4,400 adults living in Connecticut households was administered by the UConn Center for Survey Research and Analysis from July 2003 through April 2004.