



Risk Screening and Referral Mechanisms to Prevent Substance Use Disorders in Youth

Authors: Ty Ridenour, PhD; Wendy Chu, MA

Editor: Emily Warthman, JD, MPH

March, 2025

Substance misuse remains a significant public health challenge. Without intervention, early initiation of substance misuse during adolescence can lead to long-term negative health outcomes, including the development of a substance use disorder (SUD), criminal behavior, academic problems, and mental health issues. Thus, early prevention efforts, particularly those that involve early risk identification and referral, play a critical role in mitigating these risks in youth.

One such approach is the [Screening and Prevention Model](#). **Screening combined with a tailored family-based prevention program reduces the likelihood of early initiation of substance misuse.** A study examining this model in 10- to 13-year-olds found that youths identified as at-risk through *screening* during well-child primary care visits and who were referred to a family *prevention* program had [reduced substance use initiation, amount of use, risk factors, and anxiety at 12-months follow-up](#) compared to usual care. Thus, the Screening and Prevention Model is a promising method for **preventing substance misuse and poor mental health in youth.**

Key Features of Screening and Prevention Model

- **Leverages natural contact points.** Pediatric primary healthcare settings provide an optimal environment for [youth substance use prevention services](#). Pediatricians build relationships with youth and families throughout the youth's childhood. Pediatricians can use routine well-child checkups as **natural opportunities to monitor youth behavioral health**, especially in early adolescence (as recommended by the American Academy of Pediatrics).
- **Assesses for overall risks.** Rather than screening for the presence of a substance use disorder, early preventative screening focuses on overall risk. This assessment identifies youth who have, or are at-risk of, early initiation of substance misuse. For example, the [Youth Risk Index](#) (YRI) is a cartoon-based, audio-supported, and computer-assisted screening tool that assesses multiple domains of risk (e.g., irritability, susceptibility to peer pressure) that are related to substance use.
 - In a study involving youth, parents, and pediatric staff, YRI screening was found to be [universally important and easy to complete](#) during well-child visits (taking about 8 minutes in a waiting room).
- **Links to brief family-based prevention intervention.** Family involvement is a protective factor of youth substance misuse; thus, effective youth substance misuse prevention efforts have leveraged family-based interventions. For example, the [Family Check-Up](#) is a **brief, low-cost, highly-effective, family-focused intervention** that addresses risk factors associated with early adolescent substance use and other problem behaviors.

Considerations for Policymakers and Healthcare Professionals

- **Support prevention programs with demonstrated returns on investment (ROI) and potential cost savings.** While additional research is needed, preliminary findings on the cost-effectiveness of the Family Check-Up program shows expected benefits to [participants, hospitals, and taxpayers](#) are likely to **outweigh the costs of the program**. Examples:
 - The YRI is [\\$24 per screening](#). The Family Check-Up is approximately [\\$1066 annually per family](#) on average, or [\\$480 per Family Check-up session](#) and [\\$107.19 per additional counseling session](#), which is lower than many other prevention programs.
 - In comparison, adolescent risky behaviors, including substance use, **cost billions of dollars annually** in the U.S., highlighting the need for effective prevention programs.
 - A strong evaluation plan would enable further examination of where cost savings may be realized.
- **Strengthen reimbursement structures.** [Billing codes](#) and insurance reimbursements to remunerate providers could cover screening and prevention services and already fund similar services.
- **Promote partnerships across sectors and with payors.** Partnerships with healthcare systems, insurance companies, community organizations, and schools can increase the reach of this model.
- **Integrate innovative models into accessible settings.** Pediatric primary care is a natural and optimal setting to provide prevention services. Pediatricians report that [co-locating a family therapist in their practice to conduct screening and prevention](#) resolved historical barriers to this service.