

ASSIST

The Alcohol, Smoking and Substance Involvement Screening Test (ASSIST)

Manual for use in primary care



World Health
Organization

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1 Purpose of the manual

This manual is a companion to *'The ASSIST-linked brief intervention for hazardous and harmful substance use: manual for use in primary care'*¹ and is based on *'The Alcohol, Smoking and Substance Involvement Screening Test (ASSIST): Guidelines for Use in Primary Care. Draft Version 1.1 for Field Testing'*². The purpose of this manual is to introduce the ASSIST and to describe how to use it in health care settings – particularly community based primary health care settings – to identify people who are using substances, so that a brief intervention (or referral) can be provided, as appropriate.

The manual will describe:

- rationale for screening and brief intervention;
- problems related to substance use;
- the development and validation of the ASSIST;
- how to use the ASSIST (administration, scoring and interpretation of scores);
- motivational interviewing tips to facilitate the process of asking about substance use;
- how to incorporate ASSIST screening in everyday practice.

Additional information is included in the Appendices to the manual:

- Appendix A includes a copy of the ASSIST questionnaire.
- Appendix B includes a copy of the ASSIST response card for clients.
- Appendix C includes a copy of the ASSIST feedback report card for clients.
- Appendix D includes a copy of the risks of injecting card for clients.
- Appendix E provides information about how to adapt the ASSIST for other languages and cultures and to take account of the local situation.
- Appendix F provides answers to the self-testing questions posed in Chapter 11 *'Good practice in ASSIST questionnaire administration'*.
- Appendix G provides two scripted ASSIST examples for practice in role play.

A companion document *'The ASSIST-linked brief intervention for hazardous and harmful substance use: manual for use in primary care'*¹ explains how to link the ASSIST to a brief intervention to help clients reduce or stop their substance use.

2 What is the ASSIST?

The Alcohol, Smoking and Substance Involvement Screening Test (ASSIST) was developed under the auspices of the World Health Organization (WHO) by an international group of addiction researchers and clinicians in response to the overwhelming public health burden associated with psychoactive substance use worldwide^{3, 4, 5}. It was designed to be used in primary health care settings where hazardous and harmful substance use among clients may go undetected, or become worse.

The ASSIST (version 3.1) is an 8 item questionnaire designed to be administered by a health worker to a client using paper and pencil, and takes about 5-10 minutes to administer. The ASSIST was designed to be culturally neutral and useable across a variety of cultures to screen for use of the following substances:

- tobacco products
- alcohol
- cannabis
- cocaine
- amphetamine-type stimulants (ATS)
- sedatives and sleeping pills (benzodiazepines)
- hallucinogens
- inhalants
- opioids
- 'other' drugs

A list of the types of substances that fall into these categories, including some common street names, can be found in Box 3.

The ASSIST determines a risk score for each substance which is used to start a discussion (brief intervention) with clients about their substance use. The score obtained for each substance falls into a 'lower', 'moderate' or 'high' risk category which determines the most

appropriate intervention for that level of use ('no treatment', 'brief intervention' or 'referral to specialist assessment and treatment' respectively).

The ASSIST obtains information from clients about lifetime use of substances, and use of substances and associated problems over the last 3 months. It can identify a range of problems associated with substance use including acute intoxication, regular use, dependent or 'high risk' use and injecting behaviour.

In brief the ASSIST comprises the following questions:

- **Question 1 (Q1)** asks about which substances have ever been used in the client's lifetime.
- **Question 2 (Q2)** asks about the frequency of substance use in the past three months, which gives an indication of the substances which are most relevant to current health status.
- **Question 3 (Q3)** asks about the frequency of experiencing a strong desire or urge to use each substance in the last three months.
- **Question 4 (Q4)** asks about the frequency of health, social, legal or financial problems related to substance use in the last three months.
- **Question 5 (Q5)** asks about the frequency with which use of each substance has interfered with role responsibilities in the past three months.
- **Question 6 (Q6)** asks if anyone else has ever expressed concern about the client's use of each substance and how recently that occurred.
- **Question 7 (Q7)** asks whether the client has ever tried to cut down or stop use of a substance, and failed in that attempt, and how recently that occurred.

Question 8 (Q8) asks whether the client has ever injected any substance and how recently that occurred.

The ASSIST v3.1 questionnaire can be found in the Appendix A, and more information about how to administer it and ask each question can be found in Chapter 12 on '*How to administer the ASSIST questionnaire*'. Two scripted practice examples for role play also are provided in Appendix G.

Taken together these questions provide an indication of the level of risk associated with the client's substance use, and whether use is hazardous and likely to be causing harm (now or in the future) if use continues. Scores in the mid range on the ASSIST are likely to indicate hazardous or harmful substance use ('moderate risk') and higher scores are likely to indicate substance dependence ('high risk'). Questions particularly associated with dependent or 'high risk' use are: compulsion to use (Q3), failed attempts to cut down (Q7) and injecting behaviour (Q8).

Scoring is done by adding scores of questions 2 to 7. Responses to Q8 are not included in calculating specific substance involvement score

behaviour (Q8) is a particularly high risk activity associated with increased likelihood of overdose, dependence, infection with bloodborne viruses such as HIV and hepatitis C and with higher levels of other drug related problems. If a client has been frequently injecting in the last 3 months then they may require referral to specialist assessment and treatment. More information on this is provided in Chapters 14 and 15 of this manual.

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