

Screening and brief interventions using ASSIST

A guide for specialist drug and alcohol treatment services

Primary healthcare providers across Australia are now being encouraged to implement structured screening for risky substance use as part of routine care. Two validated models are currently in use¹:

- **ASSIST** (Alcohol, Smoking and Substance Involvement Screening Test)
- **ASSIST-Lite** (A streamlined version of the full assessment)

Both models have been recognised by the Royal Australian College of General Practitioners (RACGP) and accepted (and recommended on their website to members) as useful clinical resources for substance use screening and intervention².

These screening tools serve multiple functions within the Primary Care setting. They can be used to quickly identify patients at various risk levels based on substance use patterns. Patients at low-to-moderate risk are provided a structured brief intervention with supporting information. Patients identified at higher risk are offered referral to specialist alcohol and other drug services.

When receiving referrals from primary care, understanding the meaning behind ASSIST scores can provide valuable clinical context:

Risk Level	ASSIST Score	Recommended Action
Low	0–10 for alcohol 0–3 for other substances	Brief feedback current use and possible future risk
Moderate	11–26 for alcohol 4–26 for other substances	Brief intervention using a motivational interviewing approach
High	27+ for any substance	Referral to your specialist service for detailed assessment and treatment

While treatment typically focuses on the principal drug of concern, the ASSIST framework enables a broader approach to identify and address risky and harmful use from other substances.

For example, other substances in the moderate risk range may not present as requiring intensive treatment but can be identified and addressed using brief psychosocial interventions. This can help your clients reduce their overall risk of relapse, strengthen treatment adherence and the recovery process.

A key advantage of the ASSIST is its validity and reliability for self-completion³, and administration at regular intervals (recommended every three months). This can help tracking change over time across multiple substances, and provides an objective measurement of progress. Feedback of this type can be invaluable in maintaining client engagement and progress. For those clients who are not improving, it represents an opportunity to review the case management approach.

¹ RACGP (2022). https://www.racgp.org.au/getmedia/da520148-22b7-4f6f-ae7a-d0a14bce017a/AOD-screening_2.pdf.aspx

² RACGP (2025). <https://www.racgp.org.au/alcohol-and-other-drugs/aod-screening>

³ Humeniuk et al. (2008). Validation of the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST). *Addiction*, 103(6), 1039–1047. <https://doi.org/10.1111/j.1360-0443.2007.02114.x>

Case Study: Lives Lived Well Services (Queensland and NSW)

Lives Lived Well Services have successfully integrated ASSIST into their clinical pathway among clients seeking their help, allowing the service to regularly track secondary substances of concern. In so doing, it provides the service (and the client), with comprehensive monitoring of substance use risks and harms over time, and allows for more targeted interventions for all substances, reducing the likelihood of relapse.

Testimonial:

We have successfully used the ASSIST with over 30,000 patients as both a screening tool and an outcome measure. It provides essential information on lifetime use, past 3-month frequency of use, and DSM-IV substance-related symptoms. Total scores indicate the severity of substance use (low, moderate, or high risk) and help guide decisions about the appropriate intensity of treatment. The DSM-IV symptom data are particularly useful for tailoring motivational interviewing interventions. Importantly, the ASSIST risk scores are sensitive to change, enabling clinicians to clearly demonstrate patient progress over time.

— Professor Leanne Hides, National Centre for Youth Substance Use Research, The University of Queensland; Former Lives Lived Well Chair of Alcohol, Drugs & Mental Health

Next Steps

Consider how your service might:

- Familiarise staff with ASSIST scoring and interpretation
- Implement regular ASSIST monitoring for comprehensive client care
- Develop protocols for addressing multiple substances identified through referrals

For further information or training resources on ASSIST implementation, please contact assistportal@adelaide.edu.au