

Cunningham et al., Alcohol Interventions Among Underage Drinkers in the ED: A Randomized Controlled Trial, *Pediatrics*, 2015

■ Methods:

- 227 patients ages 14-20 screening positive for risky drinking were screened for risky drinking and randomized to computer brief intervention (N=277), therapist brief intervention (N=276), or control (N=281).
- Brief intervention addressed:
 - Alcohol consumption and consequences
 - Driving under the influence of alcohol
 - Alcohol-related injuries
 - Concurrent drug use

■ Results

- Therapist and computer BI reduced:
 - Consumption at 3 months
 - Alcohol consequences at 3 and 12 months
 - Prescription drug misuse at 12 months
- Computer BI reduced DUI at 12 months
- Therapist BI reduce alcohol injury at 12 months

Foxcroft et al., Social Norms for Alcohol Misuse in University and College Students (Review), *Cochrane Collaboration*, 2015

■ Methods

- They reviewed 66 randomized trial studies (N=43,125) and did a meta-analysis of 59 studies conducted before May 2014 (N=40,951)
- Studies had to have a follow-up period of at least 4 months
- Of the studies, 52 were conducted in the United States
- Of the trials, 39 targeted high risk or mandated children and 26 included all students regardless of risk

Foxcroft et al. (cont.)

■ Results

- At 4 or more months follow-up, they observed:
 - Small significant reductions for web and face-to-face feedback on:
 - Alcohol-Related problems
 - Binge drinking or quantity consumed
 - Frequency of consumption
 - Peak BAC
 - No reductions for
 - Mailed feedback
 - Group face-to-face
 - Social norms marketing

■ Conclusion

- “The strength of the effects is small and unlikely to provide any advantages in practice.”

Carey et al. Computer-Delivered Interventions to Reduce College Student Drinking: A Meta-Analysis, *Addiction*, 2009

- Methods: Reviewed 35 studies of 43 separate interventions
- Results: Computer delivered interventions compared to assessment only controls
 - Reduced short-term (≤ 5 months) drinking on drinking days and maximum quantity consumed
 - No difference in frequency of heavy drinking and drinking days
 - Reduced long-term (≥ 6 weeks):
 - Quantity of alcohol consumed
 - Frequency of drinking days
 - Alcohol-Related problems

Paschall et al. Effects of AlcoholEdu, J Stud Alcohol Drugs & Am J Prev Med, 2011

- 32 colleges randomized to AlcoholEdu or comparison
- AlcoholEdu: 2-3 hours summer before and Fall of Freshman year:
 - Standard drink size
 - Effects of alcohol on brain and body
 - Challenge misperceptions of college drinking norms
 - Discuss blood alcohol concentrations (BAC)
 - Information about alcohol policies in their state
 - Harm reduction approaches (e.g., setting drinking limits, plan safe transportation)
 - Ways to deal with alcohol poisoning, drinking and driving, etc.
- Student online surveys about drinking (summer, fall, and spring semesters of freshman year)

Paschall et al. (cont)

■ Results:

- Fall Semester: Significant reductions (1/4- 1/3)
- Past 30-day alcohol use
- Binge drinking
- Alcohol problems:
 - Physiological (hangover, vomiting, passing out, etc.)
 - Social (trouble with police or school authorities)
 - Victimization (crime, sexual)
- Differences not significant during spring semester

■ Implications:

- Fall semester of freshman year is a high-risk time for college alcohol problems
- Need to test booster sessions and strengthen intervention
- Need to integrate program into a comprehensive set of interventions

Family Influences on Youth Drinking 12-20

- Children of parents who binge, compared with abstainers, are twice as likely to
 - Binge (20% vs. 10%)
 - Meet alcohol dependence/abuse criteria (10% vs. 5%)

Source: SAMHSA, Findings From the 2002-2006 National Surveys on Drug Use and Health, 2008