

educating about alcohol

**ALCOHOL MISUSE PREVENTION FOR YOUNG PEOPLE:
EVIDENCE AND EFFECTIVENESS**

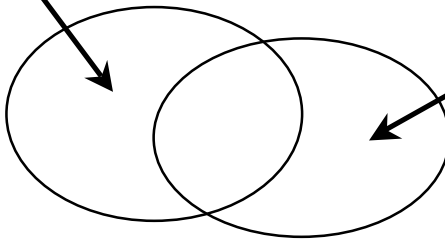
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Reviews

Systematic reviews

Meta-analysis



Method

- ◆ Literature searching
- ◆ Selection
- ◆ Data extraction & synthesis
- ◆ Conclusions

Databases searched

- Project CORK
- BIDS ISI (Bath Information and Data Services)
- Conference proceedings on BIDS
- Current contents on BIDS
- PSYCLIT
- ERIC (U.S.A.)
- ERIC (Australia, Canada and U.K.)
- ASSIA
- MEDLINE
- FAMILY RESOURCES DATABASE
- HEALTH PERIODICALS DATABASE
- EMBASE
- Dissertation Abstracts
- SIGLE
- DRUG INFO
- SOMED (Social Medicine)
- Social Work Abstracts
- National Clearinghouse on Alcohol and Drug Information
- Mental Health Abstracts
- DRUG INFO.
- DRUG database
- Alcohol and Alcohol Problems Science Database – ETOH

Method

- ◆ Literature searching
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- ◆ Conclusions

No evidence of effectiveness

- "DAPPER" (Allison, Silver et al., 1990)
- "Alcohol Education in Schools" (Bagnall, 1990)
- "A Drug Abuse Prevention Programme" (Beaulieu and Jason, 1988),
- "It's your decision" (Bremberg and Arborelius, 1994)
- "DARE" (Clayton, Cattarello et al., 1991; Ringwalt, Ennett et al., 1991)
- "AMPS" (Dielman, Shope et al., 1986; Shope, Copeland et al., 1996)
- "Multi-component Inoculation Programme" (Durrant, 1986)
- "Project ALERT" (Ellickson and Bell, 1990)
- "HLAY" (Hopkins, Mauss et al., 1988)
- "Shifting Gears" (Klepp, Kelder et al., 1995)
- "A Drug Education Course" (Moskowitz, Malvin et al., 1984)
- "RPDD" (Newman, Anderson et al., 1992)
- "PALS" (Palinkas, Atkins et al., 1996)
- "MPP" (Pentz, Dwyer et al., 1989)
- "Project Northland" (Perry, Williams et al., 1996)
- "PASS" (Sheehan, Schonfeld et al., 1996)
- "Stay SMART" (St Pierre, Kaltreider et al., 1992)
- "Towards No Drug Abuse" (Sussman, Dent et al., 1998)

Results: Effectiveness of interventions in the short, medium and long term

Follow-up:	Partially effective	Ineffective	“Negative” effect
Short-term (1 year or less)	14	23	3
Medium-term (1-3 years)	13	19	2
Long-term (over 3 years)	3	6	0

Results: re-analysis of study data for longer term effective interventions


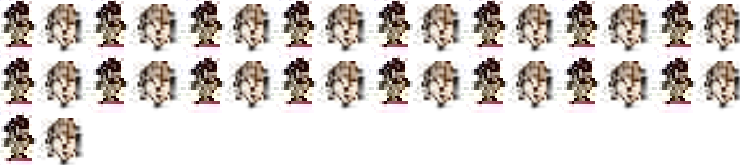


Intention to Treat


Analysis based on numbers allocated to intervention or control groups

Number Needed to Treat

Number of people who need to receive the intervention for one person to benefit

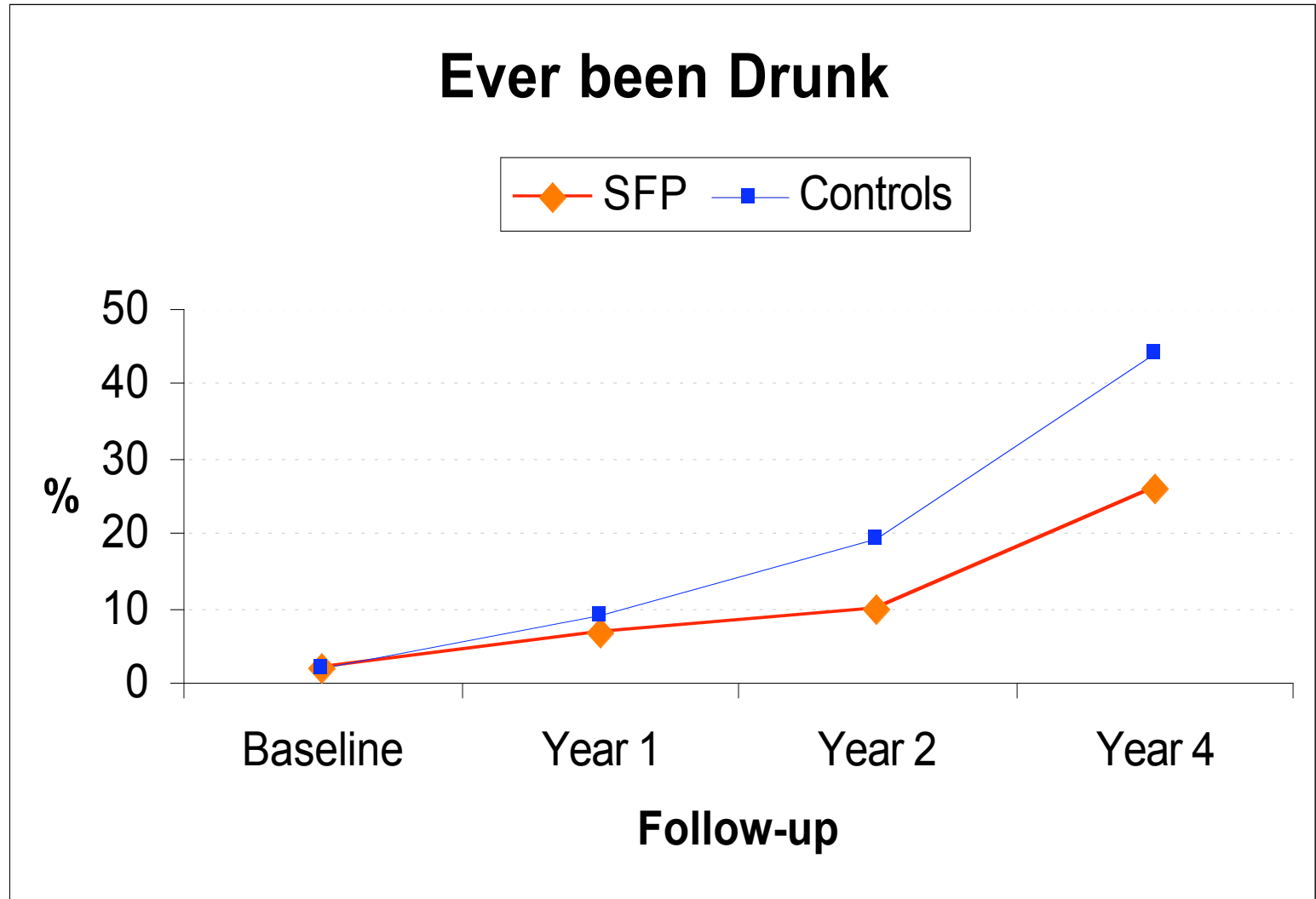
Results: Intention-to-treat analysis for selected studies

Study (follow-up)	Outcome	NNT	95% CI
Botvin 1995a,b (6 years)	Monthly alcohol use	56 	12 -
	Weekly alcohol use	34 	12 -
	3+ drinks per occasion	42 	1 -
	Drunkenness in last month	24 	9 -

Schinke 2000 (3.5 years)	4+ drinks in last week	17		9 - 1149
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Spath 2001 (4 years)	Ever used alcohol	9		5 -
	Ever used alcohol without permission	9		5 - 160
	Ever been drunk	9		5 - 327

Ever been Drunk



Onset of drinking – why is it important?

Grant and Dawson (1997) showed that the lifetime alcohol dependence rate of those who initiate alcohol use by age 14 is four times as high as those who start by age 20.

Adjusting for potentially confounding variables, these researchers found that the odds of dependence decreased by 14% with each additional year of delayed initiation.

Conclusions

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- Many interventions showed no evidence of effectiveness
- No clear understanding of which outcome measures are important predictors of alcohol misuse, morbidity and mortality in later life. Research into important outcome measures is needed.

Conclusions

- Closer scrutiny of several studies through intention to treat analyses highlighted the potential value of the Strengthening Families Programme. This intervention needs to be evaluated in different settings, and over a longer-term to confirm the current results.
- Economies of scale need to be considered. Larger community interventions that target different groups may be more cost-effective than single interventions

Conclusions

- An international register of **alcohol** and drug misuse prevention interventions should be established and criteria agreed for rating prevention intervention in terms of safety, efficacy and effectiveness. This register should be aimed at public health policy makers and prevention workers.

Conclusions

A suggested framework:

1. Safety, efficacy and effectiveness established: prevention intervention may be used
2. Efficacy established. Further evaluation required to confirm effectiveness and safety: prevention intervention can be used as part of a primary research programme or a surveillance programme.
3. Safety and efficacy not proven: prevention intervention should be used only as part of a primary research programme, using appropriate methodology.
4. Safety and/or efficacy shown to be unsatisfactory: prevention intervention should not be used.