# ALCOHOL PREVENTION

# BEST STRATEGIES

Effective alcohol prevention efforts are comprehensive and address both individual and environmental variables that contribute to the problem. These efforts include prevention, early intervention and treatment. Effective college programs include multiple programs, policies, activities and interventions that address all factors that contribute to high-risk drinking among students. Research has shown that when used in isolation, educational approaches have limited effectiveness; in order to be successful colleges must also make changes in the campus community environment and address individual-focused interventions for high-risk drinkers.

The National Institute on Alcohol Abuse & Alcoholism's (NIAAA) Task Force on College Drinking commissioned several review papers on various aspects of drinking among college students and released its findings and recommendations in a comprehensive report in 2002 titled "A Call to Action: Changing the Culture of Drinking at U.S. Colleges". In this report, NIAAA outlines the problem of high-risk drinking on college campuses. Rather than defining the problem by the amount of drinking among college students, the Task Force focused on the damaging consequences of high-risk drinking.

The Task Force recommends that to effectively reduce alcohol related problems colleges intervene on three different levels, known as the 3-in-1 Framework: (1) with the at-risk individual student, (2) with the entire student body, and (3) in the larger college and community environment. NIAAA recommends a comprehensive and coordinated approach which includes a wide range of support from the campus and community.

**1** To identify and serve the at-risk individual drinker, the report suggests using screening and intervention services, such as brief motivational interviews during health center visits or with students identified as high-risk drinkers as a result of an alcohol violation.

**2** To address the problem of high-risk drinking with the entire student body, the report recommends addressing: Widespread availability of alcohol, Aggressive marketing and promotion of alcohol, Large amounts of unstructured free time among students, Inconsistent publicity and enforcement of both local laws and campus policies, and Student perceptions that high-risk drinking is the norm.

**3** To be effective prevention efforts involving the campus and community need to create an understanding of the environmental issues that contribute to high-risk drinking. College drinking must be reframed as a community issue as well as a college problem and community and campus leaders must come together to address the issue comprehensively. A community/campus task force or coalition which involves members from both the community and the campus can lead the development of effective and comprehensive strategies to reduce high-risk drinking.

The NIAAA report makes special note of the importance of top level administrative commitment and support for all prevention programs on the campus and in the community. Student participation is also an important component in developing effective prevention policies.

The NIAAA Task Force reviewed all possible strategies to reduce alcohol related problems and ranked them in terms of effectiveness, based on available empirical evidence. To assist program planners they organized these strategies into four "tiers" based on each strategy's relevance to college student drinking and the degree to which there is evidence of effectiveness. (Figure 1 on back shows the relationship between the 3-in-1 Framework and the Tiers.)

| | 3-in-1 Framework | | | |
|---|---|---|---|---|
| | | **Level of Operation** | | |
| **Tier** | **Strategy** | **Individual At-Risk Students** | **Student Population as a Whole** | **Community** |
| **1: Effective Among College Students** | Combining cognitive-behavioral skills with norms clarification & motivational enhancement intervention | YES | NO | NO |
| | Offering brief motivational enhancement interventions | YES | NO | NO |
| | Challenging alcohol expectancies | YES | NO | NO |
| **2: Effective with General** | Increased enforcement of minimum drinking age laws | NO | YES | YES |
| | Implementation, increased publicity, & enforcement of other laws to reduce alcohol-impaired driving | NO | YES | YES |
| | Restrictions on alcohol retail density | NO | NO | YES |
| | Increased price & excise taxes on alcoholic beverages | NO | NO | YES |
| | Responsible beverage server policies and trainings | NO | YES | YES |
| | The formation of a campus/community coalition or task force | NO | YES | YES |
| **3: Promising** | Adopting campus-based policies to reduce high-risk drinking | NO | YES | NO |
| | Increasing enforcement at campus-based events that promote excessive drinking | NO | YES | NO |
| | Increasing publicity about enforcement of underage drinking laws/eliminating "mixed" messages | NO | YES | YES |
| | Consistently enforcing campus policies & disciplinary actions | NO | YES | NO |
| | Conducting marketing campaigns to correct student misperceptions about alcohol use on campus | NO | YES | NO |
| | Provision of "Safe Rides" programs | NO | YES | YES |
| | Regulation of happy hours & promotions | NO | YES | YES |
| | Enhancing awareness of personal liability | YES | YES | YES |
| | Informing new students & parents about alcohol policies & penalties | YES | YES | NO |
| **4: Ineffective** | Information, knowledge-based or values clarification interventions when used alone | N/A | N/A | N/A |

**Tier 1:** **Evidence of Effectiveness Among College Students** – the strategies in this tier have been shown to be effective among alcohol-dependent drinkers, problem drinkers and students whose drinking behavior places them at increased risk for developing alcohol problems. These strategies include a mixture of cognitive-behavioral skills training with norms clarification and motivational enhancement interventions, brief motivational enhancement interventions and interventions challenging alcohol expectancies. The strategies in Tier 1 address alcohol-related attitudes & behaviors, use survey data to counter students' misperceptions about their peers drinking practices & attitudes towards high-risk drinking while increasing students' motivation to change their own drinking patterns by providing nonjudgmental advice and evaluations of the students' progress. (Examples include the College Alcohol Profile (CAP), e-CHUG, ASTP/CHOICES and BASICS.)

**Tier 2:** **Evidence of Success With General Populations That Could Be Applied to College Environments** – the strategies in this tier emphasize the value of an alliance between the campus and community in addressing high-risk drinking. Measures include increasing enforcement of minimum legal drinking age laws; implementing, enforcing and publicizing other laws to reduce alcohol-impaired driving; restricting alcohol outlet density; increasing the prices or taxes on alcoholic beverages; and instituting policies and training for servers of alcoholic beverages to prevent sales to underage and/or intoxicated individuals. The formation of a campus/community task force or coalition involving all major stakeholders on campus and in the community is critical to implementing these strategies.

**Tier 3:** **Evidence of Logical and Theoretical Promise, But Require More Comprehensive Evaluation** – these strategies are those that make sense intuitively or show theoretical promise but require more evaluation in order to determine their ability to reduce the consequences of student drinking. They include "social norms marketing" or normative education, consistent enforcement of campus policies, safe ride programs, regulation of happy hour promotions, information for new students & their parents about alcohol use & campus policies, alcohol-free residence halls & social activities, Friday classes.

**Tier 4:** **Evidence of Ineffectiveness** – the Task Force found that some strategies had consistently been shown to be ineffective and in some cases, potentially harmful to prevention efforts on college campuses. Simple educational or awareness programs were found to be ineffective when used in isolation. The Task Force also warns against the use of breathalyzers to give students information about their level of impairment because this approach has produced negative results (some students have used this information as a challenge to reach higher levels of intoxication).