

Personality-Targeted Interventions Delay Uptake of Drinking and Decrease Risk of Alcohol-Related Problems When Delivered by Teachers

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Objective: This trial examined the efficacy of teacher-delivered personality-targeted interventions for alcohol-misuse over a 6-month period. **Method:** This randomized controlled trial randomly allocated participating schools to intervention ($n = 11$) or control ($n = 7$) conditions. A total of 2,506 (mean age, 13.7 years) were assessed for elevated levels of personality risk factors for substance misuse: sensation-seeking, impulsivity, anxiety sensitivity, and hopelessness. Six hundred ninety-six adolescents were invited to participate in teacher-delivered personality-targeted interventions, and 463 were assigned to the nontreatment condition. Primary outcomes were drinking, binge-drinking status, quantity by frequency of alcohol use, and drinking-related problems. **Results:** School delivery of the personality-targeted intervention program was associated with significantly lower drinking rates in high-risk students at 6-month follow-up (odds ratio, 0.6), indicating a 40% decreased risk of alcohol consumption in the intervention group. Receiving an intervention also predicted significantly lower binge-drinking rates in students who reported alcohol use at baseline (odds ratio, 0.45), indicating a 55% decreased risk of binge-drinking in this group compared with controls. In addition, high-risk intervention-school students reported lower quantity by frequency of alcohol use ($\beta = -.18$) and drinking-related problems ($\beta = -.15$) compared with the nontreatment group at follow-up. **Conclusion:** This trial replicates previous studies reporting the efficacy of personality-targeted interventions and demonstrates that targeted interventions can be successfully delivered by teachers, suggesting potential for this approach as a sustainable school-based prevention model. *J. Am. Acad. Child Adolesc. Psychiatry*, 2010;49(9):954–963. Clinical trial registration information—Personality-Targeted Interventions for Adolescent Alcohol Misuse, URL: <http://www.clinicaltrials.gov>, unique identifier: NCT00344474. **Key Words:** alcohol misuse, prevention, personality, teacher-delivered interventions

The prevalence of alcohol consumption and intoxication and recent volume of alcohol consumed by adolescents has more than doubled in the previous decade.^{1,2} Problems relating to alcohol use in youth are also apparent, with 1 in 10 12- to 15-year-olds and 1 in 3 16- to 17-year-olds reporting alcohol-related antisocial behavior.³ Furthermore, alcohol misuse is asso-

ciated with impaired neurocognitive development,⁴ elevated risk for future substance misuse,⁵ and health concerns.^{2,6}

Most alcohol prevention initiatives are universal. However, although many youth are exposed to drug-prevention programs throughout their schooling,⁷ only a limited evidence base for the effectiveness of the universal approach exists,⁸ with a recent US-based trial even reporting iatrogenic effects.⁹ Another universal pan-European trial, European Drug Addiction Prevention Trial (EU-DAP), reported fewer episodes of drunken-



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ness and frequent drunkenness at 3 months after intervention but effects were mild, with numbers needed to treat (NNTs) ranging from 31 to 98.¹⁰

A limitation of universal programs is their failure to address robust predictors of substance misuse such as personality and vulnerability to psychopathology.¹¹ The Preventure Programme is a brief, selected program that presents an alternative to the universal approach by targeting personality risk factors for early-onset substance misuse. It is the first and only school-based alcohol and drug prevention program that has been shown to prevent growth in alcohol and substance misuse in the North American and European context,¹¹⁻¹⁴ through targeting youth with elevated scores on four personality risk factors for early-onset substance misuse and other risky behaviors: hopelessness, anxiety-sensitivity, impulsivity, and sensation-seeking.^{15,16} The internalizing traits of hopelessness and anxiety-sensitivity have been associated with alcohol consumption for self-medication of depression symptoms^{16,17} or anxiety.¹⁸ Impulsivity has been associated with antisocial tendencies,¹⁹ problem drinking,²⁰ and polysubstance use,^{12,21} whereas sensation-seeking is related to heavy alcohol use for enhancement reasons.^{13,17} The Preventure interventions concurrently decreased emotional and behavioral problems specific to each personality profile¹⁴ and prevented the onset and escalation of drug use over a 2-year period.¹²

Despite these robust effects, the Preventure Programme as evaluated to date has involved treatment delivery by skilled trial therapists and might not lend itself to widespread implementation without sustained input from an external agency. Glasgow et al. discussed barriers to successful implementation of interventions in natural settings, highlighting the distinction between "efficacy" and "effectiveness" trials.²² Efficacy trials test whether a "program does more good than harm when delivered under optimum conditions," whereas effectiveness trials test whether a "program does more good than harm when delivered under real-world conditions."²³ The present study focused on whether school staff, with moderate levels of training and expertise and many competing responsibilities, could be trained to effectively deliver an evidence-based substance-misuse prevention program. The experience of running small group sessions designed to promote peer interaction and self-discovery (as opposed to following specific teaching mod-

els) may be unfamiliar to school staff, and it is questionable whether students would feel comfortable expressing themselves with adults who may hold disciplinary positions. Clark purported that adherence to protocol is also likely to be more varied for nonresearch staff.²⁴ However, facilitators' familiarity and regular contact with students could increase group participation and promote sharing of personal experiences, an important factor relating to program success.²⁵ In addition, delivery of interventions inhouse could provide therapeutic frameworks within which to address future problems.

The Adventure Trial is a cluster-randomized trial of teacher-delivered interventions targeting personality risk factors for adolescent substance misuse. Although the trial is designed to evaluate intervention effectiveness over a 2-year period with respect to mental health symptoms, substance-use uptake, behavior, and academic achievement, we report the 6-month drinking outcomes, focusing our analyses on four measurements: drinking and binge-drinking rates, quantity by frequency (QF) of alcohol use, and drinking-related problems. We hypothesized that receiving an intervention would predict lower measurements on all drinking outcome variables for those pupils targeted in the program at follow-up compared with a no-intervention control group.

METHOD

Participants and Procedure

Twenty-one secondary schools across nine London boroughs were recruited, from which year-9 students were invited to participate. The study followed a cluster-randomized design, whereby boroughs and schools were randomly selected, and schools were randomly assigned to control or intervention conditions. Students were surveyed in classroom or assembly formats during school hours using self-report questionnaires. Recommended methods to maximize the accuracy of participants self-reports were followed,²⁶ e.g., visual prompts to assess quantity of alcohol consumption, a reliability check (sham drug item), and research staff conducting follow-up sessions rather than school staff. Participant confidentiality was guaranteed, and it was emphasized that schools and parents would not have access to data. Participation (for the survey and intervention phases) was informed by passive consent from parents and active assent from students (Figure 1 shows recruitment, selection protocol, and rates).

Two schools recruited to participate in the study were excluded from this trial and not included in

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