



A randomized trial evaluating a parent based intervention to reduce college drinking

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ABSTRACT

This study evaluated the effectiveness of a parent based intervention (PBI) in reducing drinking among first year college students ($N=443$). Students were assigned to one of three conditions: PBI, PBI plus booster brochures (PBI-B), and an assessment only control group (CNT). At a 4-month post-intervention follow-up, results indicated students in the PBI-B group reported significantly less drinking to intoxication and peak drinking relative to the PBI group and CNT group. No significant differences were found between the PBI group and CNT group. Results provide further support for PBIs to reduce college student drinking and suggest that a booster brochure increases the effectiveness of PBIs.

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1. Introduction

Heavy drinking and the associated consequences represent a significant problem on college campuses nationwide. National survey data indicate nearly 70% of U.S. college students report drinking (Johnston, O'Malley, Bachman, and Schulenburg, 2006) and 40–45% report engaging in at least one heavy drinking episode in the past 2 weeks (Wechsler et al., 2002). Heavy drinking is associated with multiple social problems such as arguing with friends, unplanned sexual activity, drinking and driving, getting into trouble with the law, and academic difficulties (Hingson et al., 2005). Additionally, severe consequences such as unintended injuries, sexual and physical abuse, assault, and alcohol-related fatalities have been reported (Hingson, Edwards, Heeren, & Rosenbloom, 2009).

Relative to the general college student population, first year students have been identified as a high-risk group for heavy drinking (National Institute on Alcohol Abuse & Alcoholism, 2002). Research indicates that in comparison to upperclassmen, first year students drink more drinks, engage in heavy drinking episodes more frequently (Turrissi, Padella, & Wiersma, 2000), and are more likely to be arrested for alcohol-related incidents (Thompson, Leinfelt, &

Smyth, 2006). This high-risk status has been attributed to the increase in freedom, decrease in social control, and increase in stress experienced in higher education relative to high-school (Arnett, 2005). Research indicates leaving home and going to college are significantly related to increases in frequency of alcohol use and heavy episodic drinking (White et al., 2006). This heavy drinking may be related to the weakening of parental monitoring and increase in peer relationships (Borsari & Carey, 2001). Taken together, these studies suggest that implementing early intervention strategies in the first year of college are crucial.

Contrary to the widely held belief that parents lose their ability to influence their children in adolescence as peer relationships become primary, adolescent and college student drinking is influenced by parents. Specifically, research indicates that adolescent and college student alcohol use are inversely associated with parental monitoring (Abar & Turrissi, 2008; Turrissi & Ray, 2010; van der Vorst, Engels, Meeus, Devoki, & Vermulst, 2006; Wood, Read, Mitchell, & Brand, 2004). Additionally, parental attitudes toward drinking (Abar, Abar, & Turrissi, 2009; Turrissi, Jaccard, Taki, Dunnam, & Grimes, 2001; Wood et al., 2004) and parent-child communication (Abar, Fernandez, & Wood, 2011; Abar, Morgan, Small, & Maggs, 2012; Turrissi, Padella, et al., 2000) are related to college student drinking. Taken together, these studies indicate that parents do continue to exert an influence on their children's alcohol use through adolescence and young adulthood and that interventions provided to parents may be useful in reducing drinking in first year college students.

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A growing body of research suggests that parent based interventions (PBIs) may be effective in reducing heavy drinking in first year college students (Ichiyama et al., 2009; Turrisi, Abar, Mallett, & Jaccard, 2010; Turrisi et al., 2001). Based on research examining college student decision making and parent–child communication (Turrisi, Padella, et al., 2000; Turrisi, Weiersma, & Hughes, 2000), Turrisi and colleagues developed a PBI aimed at reducing heavy drinking in first year students by providing a handbook to parents prior to the beginning of the fall semester. The handbook provides important information about college drinking and encourages parents to communicate with their student about drinking. Results from this study indicated students of mothers receiving a parent handbook in the summer before college reported less alcohol use and fewer alcohol-related consequences at a 3 month follow-up than those in the control group (Turrisi et al., 2001). In a follow-up article, Turrisi, Abar, et al. (2010) reported small to medium intervention effects which were mediated by attitudes and beliefs towards drinking, in addition to attitudes toward non-drinking alternatives (Turrisi, Abar, et al., 2010). In another study comparing the efficacy of PBIs with a control group receiving other educational materials, Ichiyama et al. found that students randomly assigned to the PBI group were less likely to transition into drinking and there was less growth in number of weekly drinks consumed for females at the 8 month follow-up. Findings for heavy episodic drinking and alcohol-related consequences, however, were not significant.

Research has also provided some evidence to support the efficacy of PBIs in combination with brief motivational interventions (BMIs) (Cleveland, Lanza, Ray, Turrisi, & Mallett, 2012; Turrisi et al., 2009; Wood, Fairlie, Fernandez, Bosari, & Capone, 2010). In a study examining the relative efficacy of PBI, BMI, and a combined approach with high school athletes, Turrisi and colleagues found a significant intervention effect for the combined approach for both alcohol consumption and alcohol-related consequences at a 10 month follow-up. Further analyses by Cleveland et al. revealed that participants in the parent and peer conditions were least likely to transition to the heavy drinkers status. Results also indicated that the PBI condition was most effective at preventing baseline nondrinkers from transitioning to heavy drinkers whereas the peer condition was most effective at preventing escalation of use among weekend non-binge drinkers. Additionally, Wood et al. examined the relative efficacy of a PBI emphasizing a harm-reduction approach, BMI, and a combined approach. Results indicated the PBI did not reduce growth or delay the onset of heavy episodic drinking or consequences, but the combined approach was effective in reducing alcohol-related consequences, although the effect size was small in magnitude, but not the transition to heavy episodic drinking, at 10 and 22 month follow-ups.

Taken together, the above studies provide some support for the efficacy of PBIs, particularly during the fall semester (Turrisi et al., 2001; Turrisi, Abar, et al., 2010). Results with longer-term follow-up periods, however, are mixed, with some studies finding reductions in drinking-related harm reduction strategies and weekly drinking, but not heavy episodic drinking or consequences (Donovan, Wood, Frayjo, Black, & Surette, 2012; Ichiyama et al., 2009) and others finding support for both a combined PBI-BMI approach or PBI alone for both alcohol consumption and consequences (Turrisi et al., 2009) or for consequences only (Wood et al., 2010). Additionally, important questions remain in understanding the effectiveness of PBIs for first year students. Thus, the aim of the current study is to extend the literature in two primary ways.

First, prior research evaluating the efficacy of PBIs has provided a check of intervention fidelity by asking parents to summarize each chapter or to rate variables such as the amount of handbook read, satisfaction with handbook, or whether or not they discussed the handbook information with their child (Ichiyama et al., 2009; Turrisi et al., 2001; Turrisi et al., 2009; Turrisi, Abar, et al., 2010; Wood et al., 2010). Although providing fidelity procedures is important in

establishing the efficacy of the intervention, in actual practice colleges implementing PBIs are unlikely to ask parents to complete questionnaires or provide monetary incentives to parents to do so. Thus, it is important to assess the effectiveness of PBIs using a procedure that is more likely to be implemented. That is, sending the handbook to parents in the summer prior to the first year and encouraging parents to read the handbook and discuss the contents with their college-bound child.

In addition, although research to date provides some support for the efficacy of PBIs, reported intervention effects are generally in the small to medium range. This study extends the literature by examining whether adding booster brochures to the PBI intervention increases the effectiveness of the intervention. To date, prior research has provided a handbook to parents prior to the beginning of the fall semester. It is possible that sending booster brochures to parents during the fall semester will encourage parents to continue discussing the handbook contents with their college student throughout the semester, thereby increasing the effectiveness of the intervention.

To achieve our aims, students were randomly assigned to one of three groups: (1) parent based intervention (PBI), (2) parent based intervention plus booster brochures (PBI-B), or (3) assessment-only control group (CNT). We hypothesized that students in the PBI and PBI-B groups would report lower levels of drinking compared to those in the CNT group and that students in the PBI-B group would report lower levels of drinking relative to those in the PBI group. Based on prior research (Ichiyama et al., 2009), we also hypothesized that sex would moderate treatment effects, with the PBI and PBI-B being more effective for females than males.

2. Method

2.1. Participants

Twelve hundred students were randomly selected from orientation rosters. Of these, 443 students (30.5% male; 69.5% female) completed the baseline assessment prior to the handbook being sent to parents. Of these, 141 (31.8%) were randomly assigned to the PBI group, 153 (34.5%) to the PBI-B group, and 149 (33.6%) to the CNT group (see Fig. 1). Participants completed measures of drinking quantity and frequency. Based on these responses, 75% of the students ($n = 335$) endorsed drinking. Ages of the students ranged from 17 to 20 ($M = 17.97$, $SD = 0.47$). The majority of students were Caucasian (88%), with 2.7% Asian-American, 0.2% African-American, 0.2% Native American, and 8.9% other. This sample is representative of first year students at the university. A series of chi square analyses and one-way

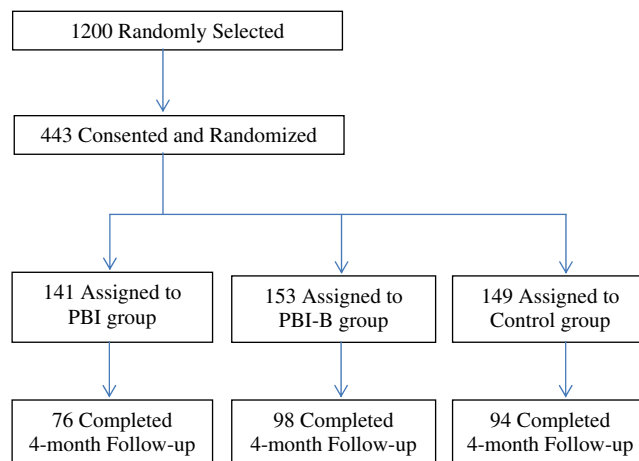


Fig. 1. Participation flow diagram.

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