



Web-based self-help intervention reduces alcohol consumption in both heavy-drinking and dependent alcohol users: A pilot study



André Luiz Monezi Andrade ^a, Roseli Boerngen de Lacerda ^b, Henrique Pinto Gomide ^c, Telmo Mota Ronzani ^c, Laisa Marcorela Andreoli Sartes ^c, Leonardo Fernandes Martins ^c, André Bedendo ^a, Maria Lucia Oliveira Souza-Formigoni ^{a,*}, on behalf of the, WHO e-health project on Alcohol and Health Investigators Group

Isidora S.Y. Vromans ^d, Vladimir Poznyak ^d, Gearoid Fitzmaurice ^d, Dag Rekve ^d, Katherina Martin Abello ^e, Jeannet Kramer ^e, Iris Rosier ^e, Marcela Tiburcio-Sainz ^f, Maria Asuncion Lara ^f, André Luiz Monezi Andrade ^g, Maria Lucia Oliveira Souza-Formigoni ^g, Roseli Boerngen de Lacerda ^h, Henrique Pinto Gomide ⁱ, Telmo Mota Ronzani ⁱ, Laisa Marcorela Andreoli Sartes ⁱ, Leonardo Fernandes Martins ⁱ, Dzianis Padruchny ^j, Atul Ambekar ^k, Anubha Dhal ^k, Deepak Yadav ^k, Yatan Pal Singh ^k, Michael P. Schaub ^l

^d WHO Department of Mental Health and Substance Abuse, Geneva, Switzerland

^e Trimbos Instituut – Institute of Mental Health and Addiction, Amsterdam, Netherlands

^f Instituto Nacional de Psiquiatria Ramón de la Fuente Múñiz, Mexico City, Mexico

^g Unidade de Dependência de Drogas, Departamento de Psicobiologia, Escola Paulista de Medicina, Universidade Federal de São Paulo-, São Paulo, Brazil

^h Departamento de Farmacologia, Setor de Ciências Biológicas, Centro Politécnico Universidade Federal do Paraná, Curitiba, Brazil

ⁱ Departamento de Psicologia, Universidade Federal de Juiz de Fora, Juiz de Fora, Brazil

^j Information and Training Centre of Belarusian Psychiatric Association, Minsk, Belarus

^k National Drug Dependence Treatment Centre (NDDTC), All India Institute of Medical Sciences, New Delhi, India

^l Swiss Research Institute for Public Health and Addiction ISGF, Zurich University, WHO Collaborating Centre, Zurich, Switzerland

^a Unidade de Dependência de Drogas, Departamento de Psicobiologia, Escola Paulista de Medicina, Universidade Federal de São Paulo-, São Paulo, Brazil

^b Departamento de Farmacologia, Setor de Ciências Biológicas, Centro Politécnico Universidade Federal do Paraná, Curitiba, Brazil

^c Departamento de Psicologia, Universidade Federal de Juiz de Fora, Juiz de Fora, Brazil

HIGHLIGHTS

- We studied the adherence to a web-based intervention to reduce alcohol problems.
- From 32,401 people who accessed the site, 929 were eligible to the intervention.
- 63.5% of the 214 people who fulfilled the evaluation form reported low-risk drinking levels.
- Heavy users reduced their alcohol consumption by 30–50%.
- Dependent alcohol users showed higher adherence to the intervention than Harmful users.

ARTICLE INFO

Article history:

Received 16 September 2015

Received in revised form 15 June 2016

Accepted 29 June 2016

Available online 1 July 2016

ABSTRACT

As part of a multicenter project supported by the World Health Organization, we developed a web-based intervention to reduce alcohol use and related problems. We evaluated the predictors of adherence to, and the outcomes of the intervention. Success was defined as a reduction in consumption to low risk levels or to <50% of the baseline levels of number of drinks. From the 32,401 people who accessed the site, 3389 registered and

* Corresponding author at: Departamento de Psicobiologia, Universidade Federal de São Paulo (UNIFESP), Rua Botucatu 862 1° andar, Sao Paulo, SP 04023-062, Brazil.

E-mail addresses: andremonezi@gmail.com (A.L.M. Andrade), boerngen@hotmail.com (R.B. de Lacerda), henriquegomide@gmail.com (H.P. Gomide), tm.ronzani@gmail.com (T.M. Ronzani), laisa.sartes@gmail.com (L.M.A. Sartes), leomartinsjf@gmail.com (L.F. Martins), andrebedendo@gmail.com (A. Bedendo), mlosformigoni@unifesp.br (M.L.O. Souza-Formigoni), isyvromans@hotmail.com (I.S.Y. Vromans), poznyakv@who.int (V. Poznyak), fitzmauriceg@who.int (G. Fitzmaurice), RekveD@who.int (D. Rekve), kmartinAbello@trimbos.nl (K. Martin Abello), jkramer@trimbos.nl (J. Kramer), irosier@trimbos.nl (I. Rosier), tibsam@imp.edu.mx (M. Tiburcio-Sainz), laracan@imp.edu.mx (M.A. Lara), andremonezi@gmail.com (A.L.M. Andrade), mlosformigoni@unifesp.br (M.L.O. Souza-Formigoni), boerngen@gmail.com (R.B. de Lacerda), henriquegomide@gmail.com (H.P. Gomide), tm.ronzani@gmail.com (T.M. Ronzani), laisa.sartes@gmail.com (L.M.A. Sartes), leomartinsjf@gmail.com (L.F. Martins), dnspr@gmail.com (D. Padruchny), atul.ambekar@gmail.com (A. Ambekar), anubha.dhal@gmail.com (A. Dhal), ydeepakaiims@gmail.com (D. Yadav), ypsbalhara@gmail.com (Y.P. Singh), michael.schaub@isgf.uzh.ch (M.P. Schaub).

Keywords:

Web-based intervention
Alcohol self-help program
Effectiveness

929 completed the full Alcohol Use Disorders Identification Test (AUDIT), a necessary condition to be considered eligible to take part in the intervention. Based on their AUDIT scores, these participants were classified into: low risk users (LRU; $n = 319$) harmful/hazardous users (HHU; $n = 298$) or suggestive of dependence users (SDU; $n = 312$). 29.1% of the registered users (LRU = 42; HHU = 90; SDU = 82) completed the evaluation form at the end of the six-week period, and 63.5% reported low-risk drinking levels. We observed a significant reduction in alcohol consumption in the HHU (62.5%) and SDU (64.5%) groups in relation to baseline. One month after the intervention, in the follow-up, 94 users filled out the evaluation form, and their rate of success was similar to the one observed in the previous evaluation. Logistic regression analyses indicated that HHU participants presented higher adherence than LRU. Despite a relatively low adherence to the program, its good outcomes and low cost, as well as the high number of people that can be reached by a web-based intervention, suggest it has good cost-effectiveness.

© 2016 Elsevier Ltd. All rights reserved.

1. Introduction

According to the Global Status Report on Alcohol and Health (WHO, 2014), Brazilians drink on average 8.7 l of alcohol per person/year, a rate a bit higher than the world, and similar to the Americas averages (6.2 and 8.4 l per person, respectively). The same report also showed that Brazil is in fifth place among American countries regarding years of life lost score, based on alcohol-attributable years of life lost in 2012. Although some studies, such as the one by Witkiewitz, Dearing, and Maisto (2014), have shown that heavy drinkers who did not receive any treatment present reductions in alcohol consumption over time, this probably only happens with a small proportion of problem alcohol users. In many countries there is a huge amount of people who never receive any kind of treatment or intervention.

Even though screening and brief intervention strategies, applied in primary care settings, have been recommended as regular procedures in order to reduce alcohol related disorders, a minority of people with alcohol use disorders actually receive treatment. Even in developed countries, such as the United States of America, these rates are as low as 24% (Keurhorst et al., 2015; Hasin, Stinson, Ogburn, & Grant, 2007). The implementation of interventions remains a challenge in Brazil, particularly in areas far from the main cities, due to an insufficient number of trained professionals and poor healthcare provision (Cruvinel, Richter, Bastos, & Ronzani, 2013). In addition, due to the stigma associated with the use of alcohol and related health problems, few people seek assistance in the early phases of the problem (Ronzani, Higgins-Biddle, & Furtado, 2009). With the increase in Internet use over the last decades, electronic screening and brief interventions (e-SBI) have been emerging as a promising approach to address alcohol-related problems. In other countries, e-SBI has been used with smokers (Mananes & Vallejo, 2014), cocaine users (Schaub, Sullivan, Haug, & Stark, 2012) and problem drinkers (Kypri et al., 2014). E-SBI have advantages over traditional health services that include relatively low implementation costs and 24/7 availability, as well as offering an option for people who live in rural areas, are concerned about the stigma associated with alcohol or drug use (Habibovic et al., 2014) or belong to community outreach populations (Schaub et al., 2012).

Webb, Joseph, Yardley, and Michie (2010) studied web-based interventions, and provided a rationale for investing in more intensive theory-based interventions that incorporate multiple behavior change techniques and modes of delivery. Some studies of e-SBI have used different methodologies, making it difficult to compare findings. White et al. (2010) conducted a systematic review of the efficacy of web-based self-help programs for problem drinkers and concluded that despite some conflicting evidence and the high heterogeneity of results, in general, women drinkers, young people and low-risk users can benefit from e-SBI. While some authors observed reductions in alcohol intake using only a few minutes of a personalized electronic feedback intervention (Bendtsen, McCambridge, Bendtsen, Karlsson, & Nilsen, 2012; Bewick et al., 2013; Cunningham, 2012), others proposed longer interventions (Riper et al., 2009a, 2009b; Riper et al., 2008b; Schaub et al., 2012;

Schaub, Sullivan, & Stark, 2011) based on cognitive-behavioral and self-control principles. Interventions that are more extensive provide additional support to their users, including activities such as contemplating consumption, setting goals to moderate their drinking and assessing personal progress.

One limitation of web-based interventions is the high dropout rates (between 35 and 45%), as reported by some authors (Postel et al., 2011a; Postel, de Haan, Ter Huurne, Becker, & de Jong, 2011b). In order to reduce these rates, it is important to identify the main factors associated with dropout and with intervention success, allowing more efficient programs to be designed.

In December 2012, the World Health Organization, in collaboration with universities and research institutes from Brazil, India, Mexico, Belarus and the Netherlands, launched an Internet portal, which included a link to a self-help program for problem drinkers. The protocol and the site structure were designed based on previous studies from researchers from the Trimbos Institute (Riper et al., 2009a; Riper et al., 2008a; Riper et al., 2008b, Riper et al., 2009a; Riper et al., 2008a; Riper et al., 2008b). The intervention was translated into the languages of each country and adjusted for their specific cultural characteristics, although the content was basically the same for all countries (Belarus: <https://www.infoalcohol.net>; Brazil: <https://www.informalcoool.org.br>; India: <https://www.alcoholwebindia.in> and Mexico: <https://www.saberdealcohol.org.mx>).

The aim of this study was to evaluate the acceptability, feasibility and adherence to the initial Brazilian version of the web-based intervention (named “Bebermenos”, which means “Drink Less”). We also intended to describe the social and demographic profiles of the users, as well as their alcohol related-problems and pattern of navigation in the site. Other objectives were to evaluate the predictors of adherence to the intervention, and to analyze preliminary data on its outcomes. We hypothesized that problem drinkers who adhered to the web-based self-help intervention would reduce their alcohol consumption and related problems after the six-week intervention period. We also hypothesized that the users with higher levels of education and those classified as harmful/hazardous users would present higher adherence to the program than other participants.

2. Method

2.1. General site and intervention characteristics

A general portal (<https://www.alcoholwebindia.in/> in English and www.informalcoool.org.br - in Portuguese) was developed by a group of researchers supported by the WHO (http://www.who.int/substance_abuse/activities/ehealth/en/). These portals include information on alcohol related problems (general site) and a link to the intervention site. In the first step, “preparing for action”, the portal users are encouraged to register their alcohol use in the previous week, including the amount and kind of drinks, as well as the context: where, why, with whom, and feelings before and after the drinking situation.

Download English Version:

<https://daneshyari.com/en/article/898563>

Download Persian Version:

<https://daneshyari.com/article/898563>

[Daneshyari.com](https://daneshyari.com)