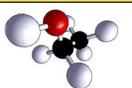


ALCOHOL INSIGHT



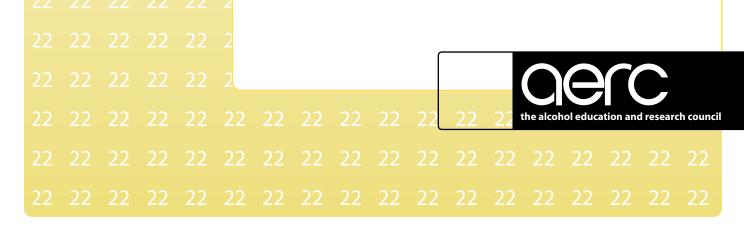
An evaluation of an action planning intervention to reduce the incidence of high-risk single session alcohol consumption in high risk drinkers

INTRODUCTION

A randomised controlled trial was carried out to evaluate an intervention designed to promote sensible drinking amongst moderate drinkers who exceed the daily recommended alcohol units of 3 units per session for women and 4 for men on an average day. The study was conducted by Mark McDermott and Vered Murgraff at the University of East London, and Charles Abraham at the University of Sussex. Participants were required to read a 2-page written intervention that targeted cognitions known to correlate with drinking behaviour, including; intention, subjective norm, attitude, and self-efficacy, affect, goal priority; and planning. The intervention asked respondents to make concrete plans specifying when and where they would reduce their drinking. Change in cognitions and drinking behaviour were assessed two weeks and eight weeks afterward. It was expected that: (1) those receiving the intervention would report more positive attitudes, self-efficacy, intention, anticipated regret and goal priority in relation to drinking within daily limits at follow up, compared to control participants who did not receive the intervention; (2) participants in the intervention condition would report fewer incidents of risky single session drinking (RSSD) (i.e., exceeding recommended daily limits) than those in the control group; and, (3) any differences in RSSD at two and eight week follow-up between intervention and control condition would be accounted for by positive changes in cognitions.

FINDINGS

Of the 347 respondents in the study, 91% reported drinking within the recommended units on weekdays and 93% reported drinking within the recommended guidelines on Sundays. In contrast, 37% engaged in RSSD on Friday, and 47.5% engaged in RSSD on Saturday. Therefore, the intervention was evaluated in relation to RSSD on Fridays and Saturdays for three groups: those who reported RSSD on Fridays before the intervention (N=128); those who reported RSSD on Fridays and Saturdays before the intervention (N=165); and those who reported RSSD on Fridays and Saturdays before the intervention (N=102).





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- The results show a statistically significant difference in the incidence of RSSD at 8 week follow-up between the intervention and control groups for those who reported pre-intervention RSSD on Friday, with the intervention group reporting a lower incidence of RSSD. The reported change in drinking was modest, with drinking reduction limited to half a unit of alcohol per drinking occasion.
- No differences at two and eight week follow-up between the intervention and control groups were found for those who reported pre-intervention RSSD on Saturdays and for those who reported pre-intervention RSSD on Fridays and Saturdays together.
- Post hoc analyses show that when the data for men and women were analysed separately, only women displayed a statistically significant reduction in 8 week post intervention Friday RSSD.
- Amongst women who reported RSSD on both Friday and Saturday prior to the intervention, lower combined RSSD was observed across the two days, compared with women in the control group, at eight week follow-up.

IMPLICATIONS

- The findings suggest that simple action planning interventions can be effective for women who engage in RSSD on both Friday and Saturday.
- More intensive interventions may be required to change RSSD among male students.
- The results provided information relating to the cognitive mechanism by which the intervention promoted a reduction in women student's risky weekend drinking. Some cognitive change in goal priority and self-efficacy at follow-up was observed for women reporting pre-intervention Friday RSSD. Statistical analysis of the data suggested that gains in self-efficacy partially accounted for the observed drinking reduction. However, that the effects of the intervention remained statistically significant when those of self-efficacy were controlled, indicates that other factors may also be involved in generating the observed behaviour change effects.

Further work is needed to identify effective components of the intervention in order to maximise their utility on RSSD and extend it to the drinking behaviour of males.

