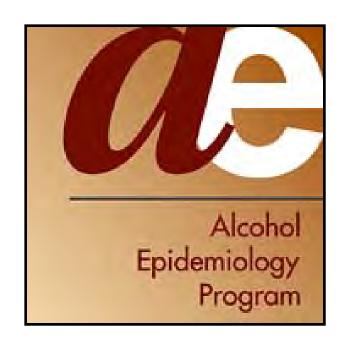
Evidence-based Prevention of Alcohol-related Problems for College Students

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Driven to Discover[™]



www.epi.umn.edu/alcohol



Recommendations for Reducing College Student Drinking



- Individual interventions for those at-risk for alcohol problems
 - norms clarification
 - cognitive-behavioral skills training
 - motivational interviewing
- Responsible beverage service policies
- Maintaining and enforcing
 - age-21 MLDA
 - Impaired driving laws
- Restricting alcohol outlets
- Increasing alcohol prices and taxes
- Compliance checks in bars



Source: NIAAA College Drinking Task Force (2002)

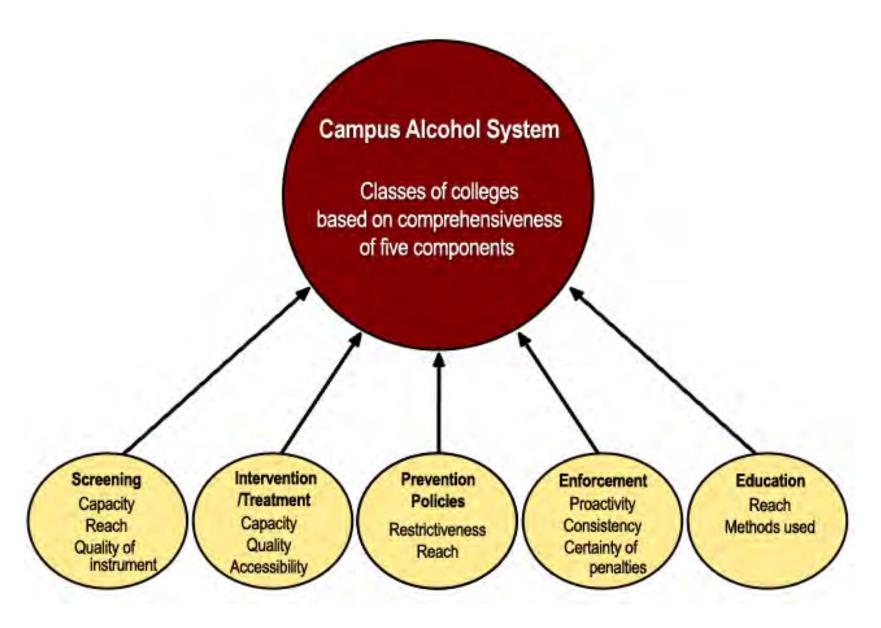
Implementation of NIAAA College Drinking Task Force Recommendations: How Are Colleges Doing 6 Years Later?

Toben F. Nelson, Traci L. Toomey, Kathleen M. Lenk, Darin J. Erickson, and Ken C. Winters

Background: In 2002, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) College Drinking Task Force issued recommendations to reduce heavy drinking by college students, but little is known about implementation of these recommendations. Current discussion about best strategies to reduce student drinking has focused more on lowering the minimum legal drining age as a two lated by L groun of college and university precidents called the Amethyst Little than the NLAA recommendations.

Methods: A nationally representative survey of adm signators was conducted at 351 4-year colleges in the United States to ascertain familiarity with and progress toward implementation of NIAAA recommendations. Implementation was compared by enrollment size, public or private status, and whether the school president signed the Amethyst Initiative.

Results: Administrators at most colleges were familiar with NIAAA recommendations, although more than 1 in 5 (22%) were not. Nearly all colleges use educational programs to address student drinking (98%). Half the colleges (50%) offered intervention programs with documented efficacy for students at high risk for alcohol problems. Few colleges reported that empirically supported, community-based alcohol control strategies including conducting compliance checks to monitor illegal alcohol sales (33%), instituting mandatory responsible beverage service (RRS) training (15%) restricting alcohol outlet density (7%) or increasing the price of alcohol



Toomey et al., in press

Successful Interventions

Effective interventions (they work!)

+

Broad reach (lots of students – everyone!)

Impact

Tools to help implement evidence-based strategies

- Adopt a public health perspective and language
- Collect data on the environmental determinants of alcohol problems
- Select evidence-based strategies
- Work with people who have advocacy and political/strategic skills (or develop them yourself)
- Be persistent

RISK FACTOR

OUTCOME

Binge drinking

Injury Liver disease

Violence, Sexual Assault

GI cancers, GI disorders

Unintended Pregnancies

Cardiovascular disease

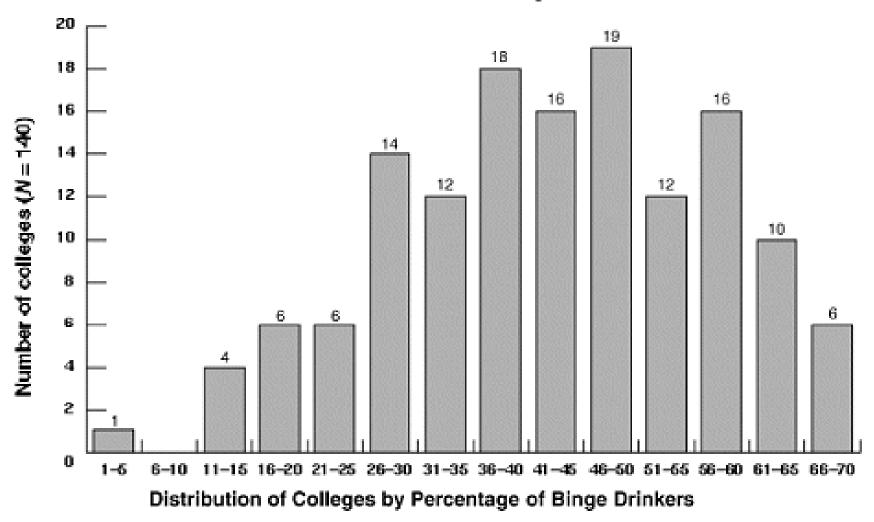
Child Neglect

Crime, legal costs

Lost productivity, absenteeism

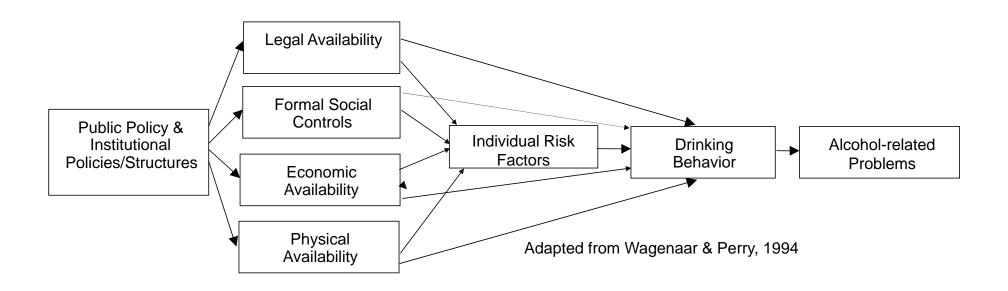
Alcohol Use Disorders

FIGURE 1
Distribution of Percentage of Students Who Binge Drink at Each of the 140 Colleges



Note. Binge drinking is defined as the consumption of 5 or more drinks in a row for men and 4 or more drinks in a row for women during the 2 weeks before the survey. Percentages are based on the total numbers of students who completed the survey at each college.

Integrated theory of drinking behavior



Problems that stem from alcohol use are primarily a function of availability

Change the language of effective interventions

Community standards for provision and consumption of alcohol Accountability to those standards

Questions?





Using Evidence for Public Health Decision Making:

Preventing Excessive Alcohol Consumption and Related Harms





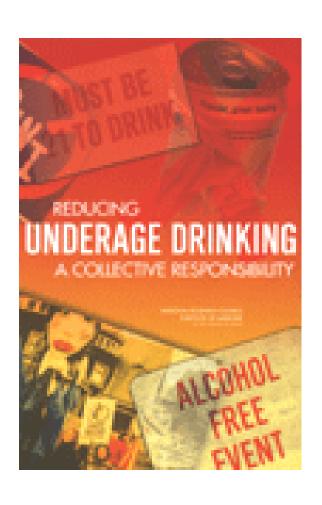
Task Force Findings

Intervention	Finding
Interventions Directed Toward the	General Population
Regulation of alcohol outlet density	Recommended based on sufficient evidence
Maintaining limits on days of sale	Recommended based on strong evidence
Maintaining limits on hours of sale	Recommended based on sufficient evidence
Increasing alcohol taxes	Recommended based on strong evidence
Overservice law enforcement initiatives	Insufficient Evidence
Dram shop liability	Recommended based on strong evidence
Interventions Directed Toward Und	erage Drinkers
Enhanced enforcement of laws prohibiting sales to minors	Recommended based on sufficient evidence





Institute of Medicine: Reducing Underage Drinking



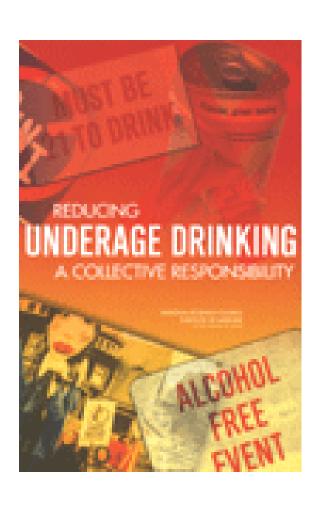
Recommendation:

Strengthen <u>Minimum Legal</u> <u>Drinking Age Laws</u>

&

compliance check programs in retail outlets

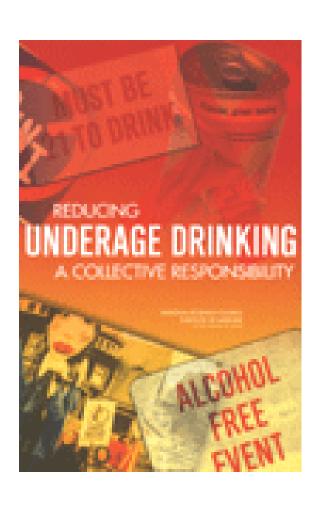
Institute of Medicine: Reducing Underage Drinking



Recommendation:

Require all sellers and servers of alcohol to complete state-approved training as a condition of employment.

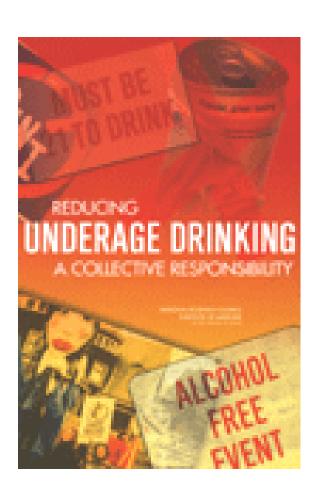
Institute of Medicine: Reducing Underage Drinking



Recommendation:

Establish and implement a system requiring registration of beer kegs that records information on the identity of purchasers.

Institute of Medicine: Reducing Underage Drinking

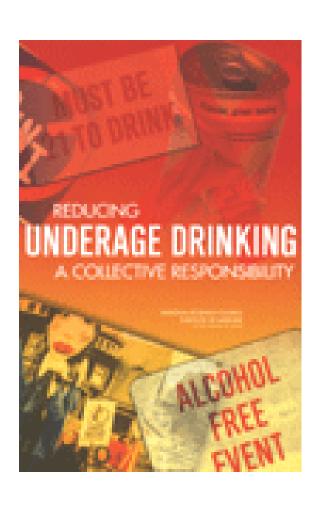


Recommendation:

Congress and state legislatures should <u>raise excise taxes</u> to reduce underage consumption and to raise additional revenues for this purpose.

Top priority should be given to raising beer taxes, and excise tax rates for all alcoholic beverages should be indexed to the consumer price index so that they keep pace with inflation without the necessity of further legislative action.

Institute of Medicine: Reducing Underage Drinking



Recommendation:

The alcohol industry should refrain from marketing practices that have substantial underage appeal and take reasonable precautions to reduce youthful exposure to other alcohol advertising and marketing activity.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention www.samhsa.gov

Strong Evidence...

increasing the minimum drinking age results in a decrease in traffic casualties.

enforcement affects the rates of underage purchasing.

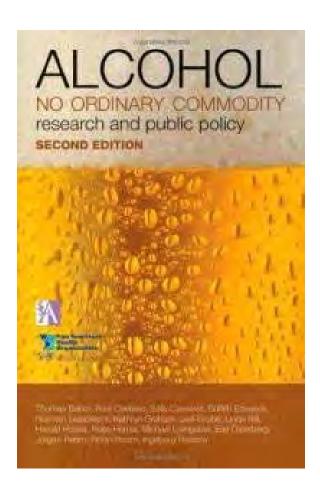
increases in alcohol taxes result in a moderate decrease in alcohol consumption & alcohol-related problems

server training and policy interventions curb illegal sales to intoxicated and underage individuals

Medium Evidence...

increase in the **number of outlets** per capita increases consumption and alcohol-related problems.

Alcohol: No Ordinary Commodity



- Increase alcohol excise taxes, price
- Reduce access (hours of sale, density)
- Implement server liability laws
- Implement alcoholimpaired driving countermeasures

Babor et al, Alcohol: No Ordinary Commodity