

# Pediatrics review of underage drinking prevention programs led by Iowa State researcher

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[Underage drinking is a national concern that led the U.S. surgeon general to issue a "Call to Action to Prevent and Reduce Underage Drinking" ([www.surgeongeneral.gov/topics/underagedrinking/](http://www.surgeongeneral.gov/topics/underagedrinking/)) last year. Now, a new report by an Iowa State University researcher assesses the effectiveness of underage drinking prevention programs and provides a better idea of how to achieve key goals outlined by the surgeon general.

Lead author Richard Spoth, director of the Partnerships in Prevention Science Institute (PPSI) at Iowa State, along with co-authors Mark Greenberg and Robert Turrisi of Penn State, published "Preventive Interventions Addressing Underage Drinking: State of the Evidence and Steps Toward Public Health Impact" in the May issue of *Pediatrics* – the official journal of the American Academy of Pediatrics. "The Pediatrics supplement underscores the scope of the underage drinking problem, reporting that over 4 million youths ages 12-17 drink monthly, and more than half of them have a drinking pattern that puts them at high risk for negative health and social consequences," Spoth said.

Out of the 400 interventions that the researchers identified and screened, 12 were defined as "most promising" because they met these six criteria:

"Essentially, interventions meeting criteria were those that had been tested through rigorous, well-designed studies consistent with accepted standards for intervention research, had demonstrated practically

significant results, and had detailed summaries of intervention procedures," said Spoth.

Among the interventions that were listed as "Most Promising" for youths 10 to 15 years of age, were three from the Midwest -- the Midwestern Prevention Project/Project STAR, which involved 42 public middle and junior high schools and 3,412 students from Kansas City and Indianapolis; Project Northland, which involved 24 school districts in northeastern Minnesota; and ISU Extension's Strengthening Families Program: For Parents and Youth 10-14, which involved 36 public schools and 1,650 students in rural Iowa.

In addition to the "most promising" intervention programs, Spoth and his research colleagues also identified 29 that met criteria for "mixed or emerging" evidence.

"This review indicated that a number of preventive interventions significantly reduced the rate of alcohol use in studied underage populations, as well as bolstered protective factors among children that reduce risks for alcohol use," the authors wrote. "The review also underscores a number of advances in preventive interventions to address underage drinking over the past 15 years."

The program review responds to the surgeon general's 2007 Call to Action. It was also written as a companion piece to a review by the National Institute on Alcohol Abuse and Alcoholism Underage Drinking Initiative Steering Committee on the causes and consequences of underage drinking for three developmental periods -- less than 10 years of age, 10 to 15 years of age, and 16 to greater than or equal to 20 years of age.

"The Pediatrics supplement clarifies how important it is to view underage drinking in its developmental context, carefully considering the

substantial changes that occur in biology and environment as children mature, and to factor those changes into the design of interventions," said Spoth, who received a letter of commendation from the director of the National Institute on Alcohol Abuse and Alcoholism for his work in the institute's underage drinking initiative, including this review.

In their report, Spoth and his research colleagues recommend improved coverage of intervention research, such as studies concerning tweens, young adults not attending college, and non-majority populations. They urge conducting more research that would help in the understanding of what the "active ingredients" are in each individual program, or why they're successful, in order to improve their design and effectiveness.

"The conclusion asks the question 'Where do we need more research?' 'What do we need to better understand this public health impact?,'" said Spoth, who also received the 2008 Prevention Science Award from the Society for Prevention Research for outstanding contributions to advancing the field of prevention science two weeks ago at the organizations' national meeting in San Francisco.

"For example, we need to understand more about university-community partnerships (like PPSI)," he said. "And we need to better understand factors that influence the effective distribution, dissemination or diffusion of these programs. It's understanding what you need to do to design it so that it's not only effective, but it reaches the prospective consumers that could benefit from it."

The article can be found online at:

[http://pediatrics.aappublications.org/cgi/content/full/121/Supplement\\_4/S311](http://pediatrics.aappublications.org/cgi/content/full/121/Supplement_4/S311).

Source: Iowa State University

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