

Rate of teen binge drinking cut more than 1/3 by prevention system

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Rates of binge drinking were 37 percent lower among eighth-grade students in communities in seven states that used a prevention system designed to reduce drug use and delinquent behavior compared to teenagers in communities that did not use the system.

Eighth graders in the towns that offered the Communities That Care prevention system also had significantly lower levels of alcohol and smokeless tobacco use and engaged in fewer delinquent behaviors, according to a new University of Washington paper being published Monday (Sept. 7) in the *Archives of Pediatrics and Adolescent Medicine*.

The findings come from the ongoing Community Youth Development Study that compares teenagers living in 12 pairs of small- to moderate-size towns in Colorado, Illinois, Kansas, Maine, Oregon, Utah and Washington. It is tracking the behavior of more than 4,400 students for five years. The study is the first community-randomized trial of Communities That Care, a system developed by J. David Hawkins and Richard Catalano of the UW's Social Development Research Group to lower rates of delinquency and drug use and to promote healthy behaviors.

"This study shows we can prevent adolescent risk behaviors community wide by using this system," said Hawkins, lead author of the paper and founding director of the research group, a part of the UW's School of Social Work.

"The most dramatic finding concerned binge drinking. We asked youngsters if they had consumed five or more drinks of alcohol in one sitting in the past two weeks. We know kids who drink that way are at risk for developing [alcohol abuse](#) and dependence later. This binge drinking is occurring when children are 13 and 14 years of age, so we are actually preventing the likelihood of later alcohol problems. This is very important from a public health standpoint."

The study found that 5.7 percent of the eighth-grade students in the intervention towns engaged in [binge drinking](#) in the past two weeks compared to 9 percent of the eighth graders in the communities not using the system. The findings are based on data collected four years after each of the intervention towns began using the system.

The researchers also asked the participants about their use of seven types of drugs - cigarettes, smokeless tobacco, inhalants, marijuana, alcohol, prescription drugs and other illicit drugs - during the past month. Teenagers in the intervention towns reported lower levels of use of all seven substances and the differences were statistically significant for alcohol and smokeless tobacco. There was a 48 percent reduction in the use of [smokeless tobacco](#) and a 23 percent reduction in the number of teens drinking alcohol.

Data also showed a significant difference in the number of delinquent behaviors the students engaged in over the past year. Teenagers from the intervention towns committed 31 percent fewer acts such as stealing something worth more than \$5, purposely damaging or destroying property that didn't belong to them or attacking someone with the intent of causing serious harm.

The study also found that young people in the communities using the Communities That Care system were significantly less likely to begin smoking [tobacco](#), drinking alcohol or committing delinquent acts

between the fifth and eighth grades.

The researchers recruited and matched 12 pairs of cities by population, racial and ethnic diversity, crime rates and other factors. One city in each pair was randomly chosen to test the Communities That Care system and received training during the first year on how to implement it and build a supportive community coalition.

The training included a process for each town to assess the levels of the risk factors that contribute to local drug use and delinquency. After these were identified, the communities were asked to select two to five of them as their top priorities. After that they were given information about scientifically tested programs that addressed each of their priority risk factors, then they selected programs they would use and were trained in implementation. The other cities were given no assistance.

"What makes this system different from other prevention efforts is that it provides community coalitions with scientifically based tools with which to make decisions based on what is important to each town," said Hawkins. "The key is empowering each community to make scientifically grounded decisions about what program they need. That builds ownership.

"Communities That Care provides a menu of tested policies and programs and offers a system for reassessment every two years so a community can change or modify its program to achieve the outcomes it wants."

Source: University of Washington ([news](#) : [web](#))

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