

Research-based strategies help reduce underage drinking

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(Medical Xpress)—Strategies recommended by the Surgeon General to reduce underage drinking have shown promise when put into practice, according to scientists at the National Institute on Alcohol Abuse and Alcoholism (NIAAA), part of the National Institutes of Health. These approaches include nighttime restrictions on young drivers and strict license suspension policies, interventions focused on partnerships between college campuses and the community, and routine screening by physicians to identify and counsel underage drinkers.

NIAAA researchers Ralph Hingson, Sc.D., and Aaron White, Ph.D., evaluated studies conducted since the 2007 "Call to Action to Prevent and Reduce Underage Drinking." A report of their findings appears in the January issue of the *Journal of Studies on Alcohol and Drugs*.

"The downward trend in <u>underage drinking</u> and alcohol-related traffic deaths indicates that certain policies and programs put in place at the federal, state, and local levels have had an impact," said NIAAA Acting Director Kenneth R. Warren, Ph.D.

Since 2007, alcohol use and heavy <u>drinking</u> have shown appreciable declines in national surveys of middle and high school students. One study found that 12th-grade alcohol use declined from 66.4 percent to 62 percent in 2013, with a similar <u>downward trend</u> seen in eighth- and 10th-graders.

The researchers' analysis of recent studies on driving policies found that



certain driving laws affecting underage drivers deter drunk driving and reduce fatal crashes. Graduated driver licensing laws for underage drivers, which include nighttime restrictions, and use/lose laws that lead to license suspension for an alcohol violation, have been effective, the review said. Individuals under the age of 21 are half as likely to drive after drinking in states with the strongest use/lose and graduated licensing laws, based on a national study.

The Surgeon General's Call to Action also recommended addressing college drinking by increasingly involving the surrounding community in intervention efforts. Studies since 2007 have shown the effectiveness of this approach, with successful programs implemented on campuses in North Carolina, West Virginia, Rhode Island, California, and Washington state. These programs focused on addressing alcohol availability, alcohol pricing and marketing, and enforcement of existing laws. Many campuses saw reductions in drunk driving and other alcoholrelated harms.

Since the Call to Action, progress has also been made in establishing the effectiveness of screening and brief motivational interventions. In these types of short counseling sessions, individuals get feedback about their drinking patterns, and counselors work with clients to set goals and provide ideas for helping to make a change.

While studies show that brief motivational interventions can reduce alcohol consumption, only a small proportion of individuals under 21 are screened for alcohol use and advised of the risks. Among the 62 percent of 18- to 20-year-olds who saw a doctor in the past year, only 25 percent were asked about driving and only 12 percent were advised of health risks.

"An evaluation of the recommendations in the Call to Action reveals that certain strategies show promising results," said first author Dr. Hingson,



director of NIAAA's Division of Epidemiology and Prevention Research. "While progress has been made in addressing underage drinking, the consequences still remain unacceptably high. We must continue research to develop new interventions and implement existing strategies that have been shown to be effective."

Drs. Hingson and White say expanded studies of the effects of alcohol on the developing brain, legal penalties for providing alcohol to minors, and parent-family <u>alcohol</u> interventions are among the research opportunities that could lead to further reductions in underage drinking.

Recent studies show that interventions aimed at strengthening family relationships in the middle-school years can have a lasting effect on students' drinking behavior, but more studies are needed to build on this finding, say the authors.

Underage drinking is linked to 5,000 injury deaths per year, poor academic performance, potential damage to the developing brain, and risky sexual behavior.

More information: Hingson R & White A. "New Research Findings Since the 2007 Surgeon General's Call to Action to Prevent and Reduce Underage Drinking: A Review." *Journal of Studies on Alcohol and Drugs*. January 2014. <u>www.surgeongeneral.gov/library ...</u> <u>ing/calltoaction.pdf</u>

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