



Using Prevention Science as a Prevention Catalyst

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM,
PREVENTION RESEARCH BRANCH

PROJECT DESCRIPTION AND HISTORY

National Institute on Alcohol Abuse and Alcoholism (NIAAA) is a research-focused Institute, and this commitment remains paramount. Recently, we have increased our efforts to disseminate research findings to prevention practitioners through oral presentations at national meetings and user-friendly digests of findings concerning effective prevention strategies and programs. Through its public liaison office, NIAAA is also increasing its collaborative activities with prevention-oriented components of state governments, federal agencies and private organizations.

Illustrative of this more pragmatic interest is the NIAAA/RWJ collaborative program, "Leadership to Keep Children Alcohol Free," which involves a coalition of Governors' Spouses dedicated to preventing alcohol use and misuse among children 9 to 15 years of age. Two sets of materials have been prepared by alcohol researchers for the Governors' Spouses to acquaint them with science-based findings relevant to the prevention of alcohol problems in this relatively young age group. Prevention researchers are also presenting their outcome data at regional meetings of participants in the "Leadership" program.

Another example is the panel on Prevention and Treatment of College Alcohol Problems that has been meeting for two years under the auspices of the NIAAA National Advisory Council Subcommittee on College Drinking. This committee is composed of alcohol-focused researchers funded by NIAAA and presidents of colleges and universities and it is jointly chaired by representatives from the two constituencies. In addition to public presentations of committee recommendations, we anticipate that 10 papers, prepared for the panel by its participants, will be published as a monograph or supplement to a journal. Topics include: effects of environmental and community policies that target youth in general and college drinking in particular; the role of social norms and the potential role of the mass media in preventing alcohol abuse and high-risk college drinking; a review of strategies that focus on high-risk individuals; alcohol advertising and youth; the role of evaluation in preventing college drinking problems; and the view from the President's Office,

A third testament to NIAAA's increasing involvement in prevention activity is the recent publication, "Make a Difference: Talk to Your Child About Alcohol," written in user-friendly style for parents of children 10 to 14 years of age. A panel of



researchers and NIAAA staff recommended research conclusions and ideas to be included, mindful of the need to give advice that goes beyond the boundaries of specific project findings. This publication has been very well received and we continue to fill many orders for additional copies.

Finally, it is important to mention two guides for judges and prosecutors prepared by NIAAA researchers in collaboration with the National Highway Traffic Safety Administration (NHTSA) and selected judges, prosecutors and law enforcement personnel. The first guide, published in 1996, focuses on what is known about the effectiveness of various options for sentencing DUI offenders. It was widely circulated by NHTSA and is currently being updated. The second guide published in 1999, is concerned with sentencing and dispositions of youth DUI and other alcohol offenses.

IMPLICATIONS OF PREVENTION ACTIVITY FOR PREVENTION RESEARCH

The research agenda of the Prevention Research Branch is shaped by a number of intellectual, social, political, and serendipitous forces. Luckily, we do not live in an ivory tower, but luckily also we try to insulate ourselves from day to day social pressures that could easily push and pull us away from our scientific mission and realistic perceptions of the state of our particular brand of prevention science. Two of our recent research initiatives were directly related to program activities described above. In collaboration with the Center for Substance Abuse Prevention and the U.S. Department of Education, NIAAA issued an RFA in late 1998 concerned with interventions to reduce problem drinking on college campuses. Six new preventive intervention studies were funded as a result of this RFA, which essentially doubled the number of college-based studies that were actually testing interventions, not simply examining risk factors. In addition, a collaborative program announcement with NHTSA resulted in three new studies of interventions to prevent DUI recidivism. Another RFA released in late 1998 encouraged new research on interventions to prevent Fetal Alcohol Syndrome (FAS). It resulted in eight new FAS intervention studies being funded, constituting a critical mass of NIAAA-sponsored research in this area.

Priorities for the Prevention Research Branch currently include the stimulation of research in an essentially virgin area, namely the testing of interventions to reduce problem behavior among children that is antecedent to the early initiation of alcohol consumption. Epidemiologic research has recently shown significant relationships between early initiation of drinking and later alcohol dependency and alcohol-related injury. Interest in targeting young children for intervention research is consistent with the NIAAA/RWJ collaborative program, "Leadership to Keep Children Alcohol Free," described above. A new RFA just released by NIAAA is also consistent with this program. It invites prevention studies in school/community/and family-based settings which test whether the successes of Project Northland can be replicated in more diverse urban environments.



NEXT STEPS AND OPPORTUNITIES

We have already moved beyond community-based studies in medium-sized cities to intervention studies that focus on high-risk neighborhoods in relatively large cities. New methodological techniques permit the assessment of intervention outcomes at neighborhood levels. In both the college and community areas, we are encouraging our research constituency to re-test among qualitatively different populations strategies that have previously proved to be effective. Moreover, we are making a special effort to determine what we know about the effectiveness of specific preventive interventions among racial/ethnic minority groups. This effort is identifying research gaps that need to be filled through new initiatives aimed at reducing alcohol-related health disparities.

The 13-year history of the Prevention Research Branch at NIAAA indicates in no uncertain terms that researchers follow the money; that left to their own initiative, they will gravitate toward studies of risk and protective (etiologic) factors rather than studies of interventions with the potential to reduce those risks. Models of Cause have been more popular than Models of Change, and testing models of change tends to be more expensive, even when the changes of interest occur naturally. Yet, we have sufficient foundational knowledge to justify preventive intervention research in a variety of areas that are still virgin, including alcohol-related violence and worksite-related alcohol problems, where primary-prevention studies are very scarce.

In other areas such as community-based studies of interventions to reduce underage drinking and alcohol-related trauma, we are ready to study the process of implementation and the extent to which that process impacts effectiveness.

The demands on administrators of prevention research programs, like myself, have never been greater. We have convinced administrators of prevention programs and prevention practitioners that their interventions should be science based. "Science-based" is the "buzz word" at every national and local conference of prevention practitioners I have attended in the last year. All we have to do now is deliver those "science-based" interventions and make certain they are faithfully implemented. To say the least, those are mind-boggling tasks.