

SIPS Jr-HIGH: A multi-centre individual-randomised controlled trial of screening and brief alcohol intervention to prevent risky drinking in young people aged 14-15 in a high school setting

Preliminary Findings

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STAFF

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BACKGROUND

- Alcohol consumption amongst 11-15 year olds in England is steadily declining
- Percentage of children and young people drinking alcohol in the last week has reduced to 8% in 2014 from 23% in 2004
- The UK rank third highest in Europe for the amount of young people (aged 15 and 16) who have reported being drunk in the last 30 days and in last 12 months
- 47% of Year 9 students drink monthly; increasing to 72% in Year 11
- 63% of young people (aged 11-15) in the North East drink regularly compared to 11% in London



WHY DO YOUNG PEOPLE DRINK?

- Social facilitation
- Social norms and influences
- Genetics and biology / psychological predisposition
- To have fun, relax, socialise and feel more confident...
- Mental health, rebellion, anxiety and stress...
- ...for the same reasons as everyone else?



SIPS JR-HIGH

- SIPS JR-HIGH is a national research study about alcohol which aims to evaluate the effectiveness and cost-effectiveness of alcohol screening and brief intervention to reduce risky drinking in young people aged 14-15
- Funded by NIHR PHR
- Follows on from a successful pilot feasibility study in the North East
- Trial ends December 2017



OBJECTIVES

- 1. To evaluate the effectiveness and cost-effectiveness of ASBI for risky drinkers compared to standard usual practice on alcohol issues, with young people aged 14-15 in the school setting
- 2. To monitor the fidelity of ASBI delivered by learning mentors in the school setting
- 3. To explore barriers and facilitators of implementation with staff
- 4. To explore young people's and parent's experiences of the intervention and its impact upon their alcohol use
- 5. If the intervention is shown to be effective and efficient: develop a manualised screening and brief intervention protocol to be used in routine school work in high schools in England



RECRUITMENT

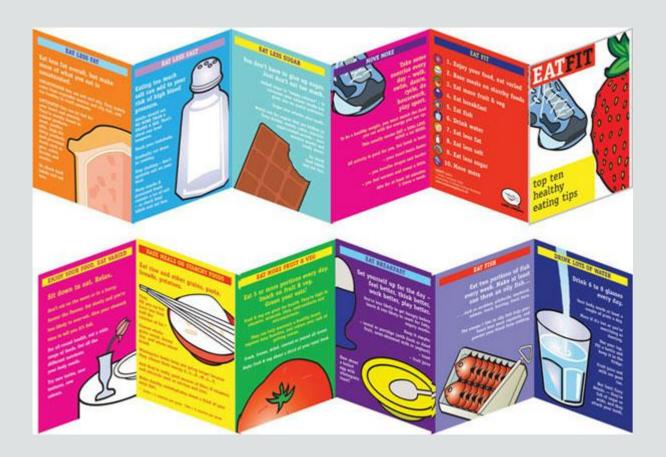
- Recruited 30 schools into the trial:
 - Kent 7
 - London 4
 - North East 13
 - North West 6
- In total, 4587 YP completed the baseline survey, of these 602 were eligible for the trial (scored positive on ASAQ and left name):
 - Kent 175
 - London 26
 - North East 323
 - North West 78



NTERVENTION	1 440ml can of Fosters = 1.8 units1 bottle of Apple S 1. How many units are in my drink? 1. How many units are in my drink? Beer Alcopop Glass pint 275ml of wine Bote of Market Bote of Cheap Solar 1000 1000 1000 1000 1000 1000 1000 10	Fours = 10 units1 330ml bottle of Carling = 1.5 This is how many units I drink per drinking day It is recommended that young people under the age of 15 do not drink alcohol. Drinking alcohol: • is bad for your health • can make you gain weight, spots and bad breath • can make you geel sick and dizzy • increases the risk of accidents, violence and regretted sex • can impact on your relationships with friends and family	B unitsHalf a bottle of 750ml vodka = 17 units Current adult drinking guidelines suggest that: • Men should not regularly drink more than 3-4 units a day • Women should not regularly drink more than 2-3 units 5. What do I think about reducing my drinking? Bad: Good:
<text><text><text></text></text></text>	can of Stella = 2.2 units1 440ml	4. What do I think about my drinking? Good: Bad:	2.6 units 1 330ml bottle Stella = 2 units 1 sm drinking? a. b. c.
	an of Carling 3. I feel at risk when 1. Bunits 1. Jitta battle of Bollabrurge = 5 units 1. Jitta battle of Bollabrurge = 5 units 1. Jitta battle of Bollabrurge = 5 units	What do other people think about my drinking?	Gl vodka/Jack Daniels End Time: Date: Location: Intervention v0.01 16.06.2015



CONTROL





QUALITATIVE WORK

- Teachers (including senior staff at schools) and learning mentors were interviewed to explore the mechanisms and processes of implementing the SIPS JR-HIGH intervention to understand how the intervention could become embedded in their work role, the prioritisation of educational or well-being work, the scope for team or individual professional input, staff skill mix and turnover, resources, role development and training needs, and participants' assent.
- The interviews with young people explored their experiences of taking part in the study, any benefits, adverse events, or improvements. Parents were interviewed to explore their views on school-led interventions for adolescent alcohol use.



QUALITATIVE FINDINGS – LM INTERVIEWS

- In total we identified five themes:
 - Learning mentors' understanding of alcohol use by young people, and of their role in the trial
 - Initiating and sustaining trial procedures
 - Factors influencing successful delivery of trial
 - Reflecting on the impact on staff and young people
 - Embedding intervention into routine practice.
- Analysis of YP and parent interviews is ongoing.



TRIAL RESULTS

- Statistical analysis is ongoing; these results will be ready for dissemination in 2018.
- Trial reflections from interviews with school staff found that:
 - Students should receive help and support with issues such as alcohol;
 - That the 1-2-1 intervention process was a good way to address alcohol behaviours;
 - Learning mentors were seen as appropriate staff to deliver the ABI;
 - Some difficulty was mentioned by staff in getting students to set goals relating to their alcohol use;
 - Pupil engagement was impacted by school timetables, logistical issues, and concern that students would 'get wrong' if they talked about their alcohol consumption.



NEXT STEPS

- Analysis completed by end October 2017
- Report submitted to funder January 2018
- Publication of results early to mid 2018

THANK YOU Questions?



Acknowledgements

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