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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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
1 440ml can of Fosters = 1.8 units...
1 bottle of Apple Sours = 10 units...
1 330ml bottle of Carling = 1.3 units...
Half a bottle of 750ml vodka = 17 units

1 273ml bottle of WMD = 1.5 units...
1 440ml can of Stella = 2.2 units...
1 440ml can of Carling = 1.8 units

1 litre bottle of Bellabrusca = 5 units...
1 litre bottle of Frosty Jacks = 7.5 units...
1 litre bottle of Strongbow = 6 units...
1 pint of Carlsberg = 3 units

1. How many units are in my drink?

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 feel sick and dizzy
- Increases the risk of accidents, violence and regretted sex
- Can impact on your relationships with friends and family

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:

4. What do I think about my drinking?

What do other people think about my drinking?

Good:

Bad:

6. What could I do about my drinking?

a. 

b. 

c. 

Start Time: 
End Time: 
Date: 
Location: 
Intervention v0.01 16-06-2015
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?
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