## Annotated Bibliography: BASICS

**RCT**=Randomized Control Trial, **QE**=Quasi Experimental Design, **CS**=Case Study, **Anecdotal**=Anecdotal Evidence

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<thead>
<tr>
<th>Study</th>
<th>Method</th>
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<th>Intervention Conditions</th>
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</table>
| Alfonso et al. (2012)  | QE     | 173 undergrad alcohol-related violators                                | 1. BASICS 2. CHOICES 3. e-CHUG                  | • Significant reductions in peak BAC  
  • Significant reductions in peak number of drinks consumed in one sitting  
  • Significant reductions in alcohol-related harms  | 48    |
| Tomaka et al. (2012)   | QE     | Two samples of predominantly Hispanic college students (N = 206 and 405) | One-on-one BASICS or small group of two or three | Significant improvement across all these outcomes:  
  • reduced AUDIT and RAPI scores  
  • reduced number of days consuming any alcohol  
  • days with heavy episodic consumption  
  • peak number of drinks  
  • driving after drinking  | 84    |
| Kazemi et al. (2011)   | QE     | 140 freshmen college students at a large public university            | BASICS BMI Assessment-only control             | • Freshmen in the BASICS BMI intervention group reported greater changes in alcohol consumption and negative consequences than freshmen students in the control group including:  
  • Decrease in average number of drinks per episode  
  • Decrease in the maximum number of drinks per episode  
  • Decrease in average RAPI score  | 40    |
| Wood et al. (2010)     | RCT    | 1,014 parent-student dyads                                            | BMI (based on the BASICS program) PBI (a handbook intervention modified from Turrisi et al. (2001)) BMI and PBI Assessment-only control | • BMI participants were less likely than non-BMI participants to transition into heavy episodic drinking and to begin experiencing alcohol-related consequences.  
  • The combination of BMI & PBI further decreased the likelihood that participants began experiencing consequences  
  • PBI alone did not reduce growth or delay of the onset of heavy episodic drinking or consequences  
  • Descriptive norms mediated the impact of BMI on reducing the likelihood of transitioning into heavy episodic drinking and experiencing consequences  | 54    |
| Turrisi et al. (2009)  | RCT    | 1,275 incoming freshmen at large public universities who had participated in high school or club team athletics | One-on-one BASICS Parent-only handbook Combined BASICS and Parent handbook Assessment-only control | The combined groups had:  
  • Significantly less drinking and fewer consequences vs. control or parent  
  • Significantly fewer consequences vs. BASICs  
  • Significantly lower peak BAC compared with the control group  
  • Significantly fewer drinks per weekend compared with both the control and parent-only conditions  
  • Significantly fewer drinks per week compared with the parent-only condition  | 42    |
<p>| McNally et al. (2005)  | RCT    | 73 students screened as heavy drinkers                                 | Motivationally based intervention (MBI)        | Greater reductions in drinks per week, heavy drinking frequency, and alcohol problems for MBI vs. AC students                                                                                                           | 54    |</p>
<table>
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<th>Study Reference</th>
<th>Design</th>
<th>Participants</th>
<th>Intervention Details</th>
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| Baer et al. (2001)    | RCT    | 508 students | Individualized feedback session intervention group                                    | • Fewer reported alcohol related problems for intervention group vs. high-risk control students  
• Fewer symptoms of alcohol dependence for intervention vs. high-risk control students  
• No changes in groups for frequency of drinking  
• Greater reductions in drinking quantity for intervention vs. high-risk control  
• More positive outcomes for intervention participants vs. controls over four-year period |
| Larimer et al. (2001) | RCT    | 12 fraternities | Peer-led motivational enhancement intervention  
Professional staff-led motivational enhancement intervention  
Control                                                                 | • Greater reduction in average drinks per week for intervention group vs. control  
• No changes in daily quantity per occasion or frequency of consumption for groups  
• Greater reductions in typical peak BAC for intervention group vs. control  
• No significant outcomes for negative consequences for groups  
• Greater reductions in typical peak BAC for students in peer-led vs. professional-led intervention |
| Murphy et al. (2001)  | RCT    | 99 Auburn University student drinkers | BASICS intervention  
Educational intervention  
Assessment-only control                                                                 | • Greater reductions at 3 months in drinks per week for heavy drinking BASICS students vs. education or control groups  
• Greater reduction in binge drinking relative to control for BASICS participants who reported binge drinking at least three nights per week  
• Greater reductions in binge drinking relative to education group for BASICS participants who reported binge drinking four or more nights per week  
• No group differences for frequency of drinking  
• Reductions in drinking for BASICS participants maintained at 9 months |
| Borsari & Carey (2000)| RCT    | 60 binge drinking students | Brief intervention  
No-treatment control                                                                 | • Fewer reported drinking for intervention vs. control group  
• No reductions in negative consequences or alcohol-related problems for both groups |
| Amaro et al. (2010)   | QE     | 449 students visiting a large urban university’s health center | BASICS intervention consisted of two sessions led by a trained study nurse and was modified to include information on drug use | • Participants reported a lower frequency and quantity of drinking and/or drug use at follow-up  
• Participants reported an increase in readiness to change alcohol-related behaviors |
| Amaro et al. (2009)   | QE     | 265 judicially mandated students | Two-three sessions with a University Assistance Program (UAP) trained counselor  
Service as usual (SAU) control condition                                                                 | • Reduction in weekday drinking for UAP condition and increase for those in the SAU condition  
• Decrease in alcohol-related consequences for those in the UAP condition  
• SAU condition witnessed a decrease in |
<table>
<thead>
<tr>
<th>Study</th>
<th>干预类型</th>
<th>干预内容</th>
<th>主要结果</th>
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<tr>
<td>Martens et al. (2007)</td>
<td>QE</td>
<td>175 students screened as being “at-risk”</td>
<td>BASICS administered at campus-based health care setting</td>
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<td>Significant reductions in alcohol use at 6-weeks</td>
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<td>Decreases in perceived drinking among peers</td>
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<td>Increases in use of protective behaviors</td>
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<td>White et al. (2006)</td>
<td>QE</td>
<td>222 Rutgers student violators of substance-use policies in residence hall</td>
<td>Brief motivational in-person interview intervention (BMI)</td>
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<td>Personal written feedback-only intervention (WF)</td>
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<td>Decreases for both groups in alcohol consumption, alcohol and drug-related problems, and prevalence of cigarette and marijuana use</td>
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<td>For both groups, there was no significant change in substance-use outcomes</td>
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<td>Murphy et al. (2004)</td>
<td>QE</td>
<td>54 college student drinkers</td>
<td>Personalized drinking feedback (PDF) + motivational interview (MI)</td>
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<td>Personalized drinking feedback (PDF) only</td>
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<td>Moderate reductions for all drinking measures in both groups</td>
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<td>No significant change in negative consequences for either group</td>
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<td>Project First STEPS (2008)</td>
<td>CS</td>
<td>160 students screened as &quot;at-risk&quot;</td>
<td>One-on-one BASICS session</td>
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<td>Web-delivered BASICS</td>
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<td>Reductions for both groups in consumption</td>
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<td>Reductions for both groups in perceptions of peer drinking</td>
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<td>At 6 months, greater reductions in consumption during typical week and peak number of drinks for one-on-one BASICS session</td>
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<td>Massachusetts Institute of Technology (2004)</td>
<td>CS</td>
<td>15 students who met the screening criteria for BASICS</td>
<td>Screening and Brief Intervention (SBI)</td>
<td>20</td>
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<td>No reported alcohol violations or medical emergencies for students who received SBI</td>
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<td>No repeat violations or medical emergencies for students receiving SBI as judicial sanction</td>
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<td>Decrease in high-risk drinking for SBI students</td>
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### Efficacy Research


**Overview:** This randomized clinical trial study examined the effectiveness of personalized alcohol feedback delivered individually (BASICS), in a group (CHOICES), and via computer (e-CHUG) on alcohol use and related negative consequences in a sample of 173 college students referred for alcohol-related violations.
Outcomes:

- Negative alcohol-related consequences
- Average BAC
- Peak BAC
- Peak number of drinks consumed in one sitting

Results: Findings revealed statistically significant reductions in alcohol use, including peak number of drinks and peak BAC, and related harms for the individually delivered intervention (BASICS), with significant reductions in alcohol-related harms for the electronically delivered intervention (e-CHUG). No statistically significant results were found for the group-delivered intervention (CHOICES) or between groups, and a main effect of time was noted for all outcome variables.

The authors note: Personalized alcohol feedback delivered in a one-on-one, face-to-face format serves to decrease both alcohol use and harms in mandated college students. The use of web-delivered personalized alcohol feedback may be clinically useful when working with a mandated student population to reduce alcohol-related harms. Personalized alcohol feedback delivered in a group setting may not be indicated for use with a mandated student population as it does not demonstrate decreases in either alcohol use or harms, possibly because of the normalization of deviant behavior.


Overview: This study examined effectiveness of the Brief Alcohol Screening and Intervention for College Students (BASICS) risk-reduction model for reducing alcohol consumption and related problems in two samples of predominantly Hispanic college students (N = 206 and 405). The study also examined whether factors such as gender, baseline risk level, and readiness to change moderated program impact.

Method: Students first participated in an in-depth assessment of drinking patterns followed by relatively brief intervention based on the standard BASICS intervention model including psycho education and personalized normative feedback. The researchers included two local alcohol myths in addition to standard drinking myths such as coffee has a sobering effect. These local myths included that (a) eating menudo—a stew made with tripe and hominy—sobers one up and (b) olive oil has a similar sobering effect.

Outcomes: Alcohol risk scores (measured with AUDIT), alcohol consumption-related problems (measured with RAPI), consumption measured with BRFSS and DDQ), drinking and driving frequency (measured with BRFSS), and stage of change (measured with RCQ). Behavioral outcomes were assessed six months after the intervention.

Results: Both samples showed significant improvement across all these outcomes including reduced number of days consuming any alcohol, days with heavy episodic consumption, peak number of drinks, and driving after drinking. Moderator analyses suggested greater program impact among heavier drinkers and among high in change contemplation at assessment. Overall, the results strongly support use of the BASICS intervention model among Hispanic students.

**Overview:** This study aimed to assess the targeted capacity expansion BASICS BMI program. This quasi-experimental design involved the use of matched control and intervention groups. The study recruited freshmen who had consumed alcohol in the last 90 days. The intervention group received the BASICS BMI twice with booster sessions at 3 months and 6 months. The control group received the assessment only.

Students were assessed before the intervention and 6-months after on the following:

- Demographics
- Current alcohol consumption: drinks per week, typical drinks consumed per week over past month, peak drinking frequency in the past month
- Alcohol-related problems

**BASICS Condition:** Two 50-minute in-person sessions, one conducted immediately after baseline and the other 2 weeks later. The baseline session involved building rapport, assessing alcohol use and consequences, and identifying participant goals. The second sessions consisted of personalized feedback, a motivational interviewing style, level of risks for their consumption level, and types of problems caused by drinking. Interventionist elicited self-motivational statements for change and discussion of harm reduction skills. They provided options for change and helped participant develop a change plan.

**Results:** Freshmen in the intervention group reported greater changes in alcohol consumption and negative consequences than freshmen students in the control group:

- decrease in average number of drinks per episode
- decrease in the maximum number of drinks per episode
- decrease in average RAPI scores


**Overview:** This study examined the impact of a brief motivational intervention (BMI) and a parent-based intervention (PBI) on alcohol-use among incoming college students.

The study employed a randomized factorial design, and over a two-year period, cohorts of parent-student dyads (n=1,014) were recruited and randomly assigned to one of four conditions:

- BMI (based on the BASICS program)
- PBI (a handbook intervention modified from Turrisi et al. (2001))
• BMI and PBI
• Assessment-only control

Baseline data were collected from students and parents during the summer prior to matriculation. Follow-ups occurred at 10 and 22 months post-baseline for students and at 12 months post-baseline for parents.

The two primary outcome measures examined were heavy episodic drinking and alcohol consequences. Additionally, researchers examined the following:

• BMI Mediators: descriptive norms, self-regulation of alcohol use, drinking strategies, readiness to change heavy episodic drinking
• PBI mediators: Parent-teen communication about drinking, parental disapproval and permissiveness, and parental monitoring

Results:

• BMI participants were less likely than non-BMI participants to transition into heavy episodic drinking and to begin experiencing alcohol-related consequences. Effect sizes were minimal at 10 months and small at 22 months
• The combination of BMI & PBI further decreased the likelihood that participants began experiencing consequences
• PBI alone did not reduce growth or delay of the onset of heavy episodic drinking or consequences
• Descriptive norms mediated the impact of BMI on reducing the likelihood of transitioning into heavy episodic drinking and experiencing consequences

Limitations:

• Limited sample
• Reliance on self-report data
• "Potential therapist effects were not analyzed, and empirically supported tests of MI fidelity were not conducted"
• Spacing and number of follow-up intervals were insufficient
• "Insufficient statistical power for the two-part latent growth curve analysis"
• Threat of assessment reactivity among non-PBI participants
• Various measures used to assess mediation were slightly modified and had not been tested for validity

The author’s conclude: The current study may be the first "To provide support for BMI as a universal preventive intervention for incoming college students. Although hypothesized PBI main effects were not found, mediation analyses suggest future refinements could enhance PBI effectiveness."

**Overview:** This multisite randomized alcohol prevention trial examined the efficacy of a parenting handbook intervention and the Brief Alcohol Screening and Intervention for College Students (BASICS) intervention in reducing alcohol use and related consequences among matriculating college student who participated in athletics while in high school. Both programs were examined alone and in combination.

Incoming freshmen were randomly selected at large public northeastern and northwestern universities and screened during the summer of 2006. Eligible participants (n=1,275) who had participated in high school or club team athletics then completed an online baseline assessment.

Parents of all teens (n=1,275) were invited to participate. Parents were asked to complete a survey assessing parent-teen communication.

Students were randomized to one of four conditions:

- **BASICS only:** A 45-60 minute session conducted one-on-one by a trained peer facilitator.
- **Parent only:** Parents were mailed a handbook during their teen's transition period between high school graduation and the first year in college. The handbook was the same version as the one used in the Turrisi et al. (2001) study. Parents were asked to complete and return a brief questionnaire on and take notes in the handbook to ensure they read all materials. The questionnaire asked parents to rate how interesting, useful, readable, and effective the material was in each section and whether parents had discussed materials with their child.
- **Combined BASICS and Parent**
- **Assessment-only control:** All procedures were the same, except that the BASICS intervention was mailed and the parent intervention was offered after the follow-up

Follow-up assessments were conducted 10 months after baseline examining the following outcome variables:

- Peak BAC
- Number of drinks in a typical weekend
- Number of drinks in a typical week
- Number of consequences

**Outcomes:**

**Parental Ratings:**

- Overall, parents rated each section in the handbook positively
- For 21 out of 26 of the topics on drinking, more than 85% of parents indicated that they discussed the materials with their teens
- 84% of parents recorded positive comments in the note sections

**Intervention Effect:**
Participants assigned to the combined condition reported significantly less drinking (peak BAC, number of drinkers/weekend, number of drinks/typical week) and fewer consequences compared with those in the control group and those in the parent intervention group. Participants in the combined group also reported significantly fewer negative consequences than those randomized to BASICS. Participants in the BASICS condition reported significantly lower peak BAC compared with the control group, significantly fewer drinks per weekend compared with both the control and parent-only conditions, and significantly fewer drinks per week compared with the parent-only condition. The parent-alone intervention did not differ significantly from the control condition on drinking or consequence outcomes.

Mediating variables:

- Descriptive and injunctive peer norms were significant mediators between the intervention and all drinking outcomes.
- Alcohol beliefs mediated the relationship between intervention and peak BAC and consequences, yet not drinks per week or weekend.
- Attitudes toward drinking and injunctive parent norms did not significantly mediate the relationship between intervention group and drinking outcomes.

Limitations:

- Use of self-report data.
- Low completion rate of in-person BASICS.
- "The quality of intervention delivered by peers may have attenuated efficacy of BASICS".
- Effect sizes may have been larger if the study had been restricted to only heavy drinkers.
- Lower completion rate among parents relative to the Turrisi et al. (2001) study.

The authors conclude: "...The parent intervention delivered before college may serve to enhance the efficacy of BASICS, potentially priming students to the subsequent BASICS message."


Overview:

This study aimed to assess the outcomes of a brief motivational intervention for heavy, episodic alcohol use on discrepancy-related psychological processes.

Students screened as heavy drinking (n=73) were randomly assigned to a motivationally based intervention (MBI) or an assessment-only control (AC) condition.

Students were assessed before the intervention and 6-weeks after on the following:

- Demographics
• Current alcohol consumption: drinks per week, typical drinks consumed and hours spent drinking per day over past month, heavy episodic drinking frequency in the past month
• Past year alcohol use patterns
• Alcohol-related problems
• Actual-ideal drinking discrepancy: Students rate how near/far their current drinking patterns are from their personal "ideal"
• Cognitive dissonance
• Treatment adherence

Results:
• There was a significantly greater reduction in drinks per week, heavy drinking frequency, and alcohol problems for the MBI condition in comparison to the control condition
• Actual-ideal discrepancy and negative, self-focused dissonance were significantly increased after the intervention and correlated with outcome alcohol behaviors, though discomfort-related dissonance was not
• Discrepancy processes did not mediate the relationship between condition and outcome

Limitations: short follow-up period, a convenient sample of students was used, reliance on self-reports, and the design used an "assessment-only" control group rather than an "active" control condition


Overview:
This study examined the long-term effects of a preventive intervention for high risk college drinkers at the University of Washington. Incoming first year students (n=2041) completed a questionnaire that inquired about the following:

• Quantity and frequency of alcohol consumption during a typical week
• Peak alcohol consumption in the past 3 months
• Drinking consequences during the previous 3 years

Of those students, 508 were identified as being “high risk.” A normative comparison group (n=151) was selected as well in order to track the natural history of changes in drinking behavior over time. These students were invited to participate in the study and were randomly assigned to either an intervention or no-intervention control group. The study design was a randomized control trial. Follow-up assessments, using the same measures as the initial questionnaire, were completed annually for 4 years.

First-year students in the intervention group were administered an individualized feedback session during the winter term. During this session, their rates of drinking were compared to the norms of same-age peers. Individualized feedback included information about the perceived risks and benefits of drinking, myths about drinking behavior, information about the biphasic effects of alcohol, and discussion of the placebo and tolerance effects. Students were also given tips for reducing negative consequences and alcohol-related risks.

During the winter term of their second year, students were mailed personalized normative feedback about their drinking behaviors. Motivational interviews were also conducted by phone with high-risk participants.
Results:

- Students who received BASICs reported significantly fewer alcohol related problems compared to the high-risk control condition (which had slight increases) and fewer symptoms of alcohol dependence. These changes persisted over a 4-year period.
- The frequency of drinking did not change dramatically over 4 years for either the high-risk or normative samples.
- Students who received BASICs made significantly greater reductions in their drinking quantity as compared to the high-risk control condition (which had slight increases). These changes persisted over a 4-year period.
- Among high-risk participants, 67% of the participants who received the intervention had good outcomes (i.e. resolved their drinking behavior) over 4 years, as compared to 55% of controls.

The authors conclude: The authors note how the effect was greatest for negative consequences, which is significant because the intervention had targeted individual choices and reduction risk, rather than drinking rates. Therefore, the intervention met its harm-reduction goal.

Limitations: Use of only one public university and self-report data.


Overview: The current study tested the efficacy of a brief intervention designed to reduce drinking and drinking-related consequences among first-year fraternity members. Twelve fraternities were randomly assigned to either receive a motivational enhancement intervention with both individual and house-wide feedback (6 houses) or a control group (6 houses).

Individual students completed a questionnaire during the fall or winter quarter of their first semester as a fraternity member and one year later to assess:

- Daily drinking frequency and quantity during a week
- Typical peak BAC
- Prevalence of alcohol-related consequences
- Symptoms of alcohol dependence
- Perceptions of drinking norms within one's house
- Parent history of alcohol consumption
- Alcohol perceived risk assessment
- Readiness to change

Participants in the intervention received a one hour individually tailored feedback session. Intervention houses also received a one-hour house wide feedback program.

Participants were randomly assigned to receive individual interviews from one of five undergraduate students or from a graduate student on the research team.

The control group did not receive any feedback, yet each house received at least one presentation about alcohol use (without motivational feedback).

Results:
Students in the intervention group reported significantly greater reductions in average drinks per week.

No changes in the daily quantity per occasion or frequency of alcohol consumption were found.

Students in the intervention reported significantly greater reductions in typical peak BACs (yet peak BACs did not vary per condition).

No significant outcomes for negative consequences.

Students who received individual interviews from peers reported significantly greater reductions in typical BACs than did students who received interviews from professional staff.

**Limitations:** Not randomized at individual level, attrition (24% loss-to-follow-up rate), house wide vs. personal feedback are not distinguished in terms of efficacy, and use of self-reported data.

**CPN Note:** This study demonstrates that peers may be just as effective as professional staff at conducting in-person interventions. Utilizing peers to conduct sessions may also reduce costs associated with BASICS or personalized feedback sessions.


**Overview:**
Auburn University student drinkers (n=99) were randomly assigned to one of three conditions:

- BASICS
- An educational intervention
- An assessment-only control condition

Students were surveyed before the intervention and at 3- and 9-month follow-up assessments on the following:

- Total drinks per week
- Number of drinking days per week
- Number of binge drinking days per week
- Negative consequences

**BASICS Condition:** A 50-minute in-person session consisting of personalized feedback, a motivational interviewing style, information about the risks of consumption, information about alcohol (i.e., tolerance, expectancies) and tips for moderating one’s drinking.

**Education Condition:** A 30-minute video, “Eddie Talks,” about negative consequences and a 20-minute discussion about student’s reaction to the video and thoughts on college drinking.

**Results:**
At three months:

- Among participants who consumed at least 25 drinks at baseline, BASICS participants showed greater 3-month reduction in drinks per week than did those who received the education intervention as well as those in the control.
- Among participants who reported binge drinking at least three nights a week, BASICS participants had significant reductions in binge drinking relative to the control group.
among participants who had 4 or more binge nights per week, BASICS participants had significant reductions compared to those in the education intervention.

- There were no statistically significant group differences for frequency of drinking, yet BASICS participants showed more change than control and education participants.

At nine months:

- In general, BASICS participants maintained their moderate 3-month reductions in drinking variables, yet control and education participants improved on their 3-month outcomes.
- Heavier drinking BASICS participants maintained their large reductions across the drinking measures.

Student evaluations:

- Immediately after the intervention, BASICS participants evaluated the program more favorably than did education participants. And greater frequency of drinking was associated with higher ratings of relevance and effectiveness for reducing personal drinking.
- At 3-month follow-up, 52% of BASICS participants indicated that the intervention significantly impacted their drinking (compared to 20% of education participants).
- At 3-month follow-up, a greater percentage of BASICS participants (69%) than education (24%) or control (17%) indicated a decrease in their drinking.
- At 9-month follow-up, a greater percentage of BASICS participants (63%) than education (29%) or control (40%) indicated a decrease in their drinking.

Limitations: Small sample size, three-group design, moderate attrition, and short follow-up period.


Overview:

This study used a randomized control trial design to assess the impact of a 1-sesson motivational intervention for college student binge drinkers. Sixty students who reported binge drinking two or more times in the past 30 days were randomly assigned to either a no-treatment control or a brief intervention group.

A baseline assessment gathered information on drinking behaviors, and primary outcome measures focused on:

- Number of drinks consumed per week
- Number of times consuming alcohol in the past month
- Frequency of binge drinking in the past month
- Negative consequences

Other measures taken were student perceptions of peer drinking and expectancies regarding heavy alcohol use.

The intervention was conducted by a clinical graduate student, who provided students with feedback regarding personal consumption, perceived drinking norms, alcohol-related problems, situations associated with heavy drinking, and alcohol expectancies. Students also completed a 6-week follow-up.
Results:

- Students rated the brief intervention as favorable and valuable
- The intervention group drank significantly less than the control on all three measures at follow-up (weekly drinking, number of times consuming alcohol in the past month, and binge drinking)
- There were no reductions in negative consequences/alcohol-related problems for both groups
- No gender differences were found
- Only estimates of typical student drinking mediated the relationship between group membership and follow-up drinking. Thus, challenging false beliefs about peer behaviors may have motivated a participant to modify his/her behavior
- The authors note that although no changes in drinking-related problems were found, this may be due to the brief follow-up period, and reductions in drinking may be setting the stage for future reduction in alcohol-related consequences

Limitations: Short follow-up period, imperfect recruitment process, a lack of collateral data, no active comparison group


Overview: This study examined the impact of implementing BASICS at a large urban university’s health center’s primary care setting. Undergraduates (N=449) who sought medical or mental health care through the University Health and Counseling Services (UHCS) via UHCS providers or through self-referral were recruited to participate in the study. Students completed a health center questionnaire during the visit with their provider to determine whether they met the criteria for problematic substance use.

BASICS intervention: The BASICS intervention consisted of two sessions (45-60 minutes each), led by a trained study nurse, and was modified to include information on drug use. During the first session, information about the student’s alcohol and drug-related behavior was gathered. Students were asked to complete self-monitoring cards between the first and second sessions.

During the second session, the nurse reviewed the self-monitoring cards with the student and a personalized feedback packet, which contained data on the student's use, perceptions of other students' use compared to actual usage data, blood alcohol content, beliefs about alcohol consequences, and risk factors. Students were also asked to rate their readiness to change their alcohol-related behaviors. Students were given their feedback packet at the end of the session, which included the information discussed in the session and the student’s goals and strategies for achieving them.

Data was collected at baseline, post intervention, and at 6-month follow-up. The following measures were assessed:

- Student characteristics (e.g., age, race/ethnicity, class year, etc)
- History of physical or emotional neglect, physical abuse, sexual abuse, and sexual harassment
- Alcohol use
- Illicit drug use and prescription drug use
• Protective drinking strategies
• Alcohol-related consequences (past 6 months)
• Consequences to drug use (past 6 months)
• Distress symptoms (past month)
• Readiness to change

Outcomes:

• Participants drinking and drug use declined between baseline and 6 months. Specifically, there were significant declines in:
  o Past 6-month alcohol use
  o Past month weekly heavy episodic drinking
  o Past 6-month illicit drug use
  o Past 6-month illicit prescription drug use
• Participants reported a lower frequency and quantity of drinking and/or drug use at follow-up. Specifically, significant declines were found for:
  o 6-month frequency of marijuana use and cocaine use
  o Past month number of drinks in a typical week and in a typical weekend
  o Past month number of drinks on occasion drank most
  o Number of drinks drank most on a weekend
• Participants reported an increase in protective factors, a decrease in alcohol-related negative consequences, and a decrease in distress symptoms (e.g., nervous, stressed)
• Participants reported an increase in readiness to change alcohol-related behaviors
• Overall, participants did not report significant reduction in drug-related consequences, yet those who reported the most consequences at baseline reported decreases at follow-up
• Heavy drinking at baseline significantly moderated the changes in number of drinks in a typical week and in a typical weekend, and the number of drinks on the occasion drank most on a weekend
• Changes in protective factors and readiness to change seemed to both contribute to reductions in alcohol use

Limitations:

• No control group
• Use of self-report data

CPN Note: This study provides evidence for implementing BASICS within a primary care university health care setting.


Overview: This study investigated the efficacy of a brief intervention for mandated students in the context of the University Assistance Program (UAP), a Student Assistance Program that was developed and modeled after workplace Employee Assistance Programs. This program provides services to both
mandated and self-referred students who present with alcohol or with alcohol and mental health problems.

Students sanctioned by the university’s judicial office for first-time serious offenses or second offense related to their alcohol or drug use were offered participation in the study as an alternative. A total of 265 judicially mandated students were randomized to one of two interventions:

1. University Assistance Program (UAP):

First-time alcohol offenders attended two sessions with a UAP trained counselor, and serious first-time offenders and all second-time offenders were required to complete three sessions.

During the initial session, the clinician conducted a psychosocial assessment using motivational interviewing techniques covering the student’s individual and family substance-related history, psychiatric history, medical and developmental histories, and available social support.

Students then received a BMI based on the BASICS model in two sessions. If a student presented with additional social, personal, or adjustment issues, the counselor integrated one or more of the following approaches to address relevant issues: 1) solution-focused therapy, 2) stress management, 3) supportive counseling, and 4) coping skills-based intervention.

2. Services as usual (SAU):

The SAU control condition included the standard of care services offered by the office of student conduct to students with one or more alcohol-related offenses. First-time offenders completed a 2.5-hour Web-based alcohol education program that intended to motivate behavior change and engage students in safer-decision making around alcohol consumption. Students with more serious first offenses or with second offenses completed a series of three 1.5 hour educational group sessions around alcohol-related consequences and completed associated assignments on topics related to alcohol use.

Students were assessed at baseline and 3 and 6 months after the intervention on:

- Weekly, weekday, and weekend alcohol consumption
- heavy episodic drinking
- Blood alcohol concentration
- Consequences of alcohol
- Coping skills
- Use of protective behaviors

**Outcomes:**

- Growth curve analyses showed that past 90-day weekday alcohol consumption decreased for students in the UAP condition and increased for those in the SAU condition.
- The mean trajectory alcohol-related consequences decreased for those in the UAP condition, while those in the SAU condition witnessed an increase at 3 months, followed by a decrease back to baseline at 6 months
The mean trajectory of coping skills remained stable over time for those in the UAP condition, while those in the SAU condition witnessed a decrease in coping skills.

Increases in past 90-day use of protective behaviors were found for both groups, yet those in the UAP condition witnessed a higher rate of increase relative to those in the SAU condition.

No significant differences in growth trajectories were found between the two groups on past 90-day blood alcohol concentration, total consumption, or weekend consumption.

Limitations:

- Use of self-report data
- No fidelity measures were obtained around clinician facilitation of interventions
- Short follow-up period
- Lack of a natural control group
- Lack of generalizability of study due to inclusion of just one institution

CPN Note: This study supports the effectiveness of conducting brief motivational interventions in the context of University Assistance Programs.


Overview: The purpose of this study was to assess the short-term effectiveness of the BASICS intervention in campus-based health care settings. Students (n=175) from a large Northeastern state university who met the screening criterion for "at-risk" were enrolled in the study. These students attended a BASICS session with a counseling center provider.

Students were surveyed at baseline and 6-week follow-up on their past 30 day alcohol consumption, use of protective behaviors, and estimates of drinks consumed per week by a typical student. Most participants (n=120, 69%) completed the follow-up assessment.

Results:

- Significant reductions in alcohol use (drinks per week, peak drinking, and heavy episodic drinking) were found at 6-week follow-up with no gender differences
- Perceived drinking among peers decreased from baseline to follow-up and was found to be associated with changes in alcohol use
- The use of protective behaviors increased from baseline to follow-up, but was not found to be associated with change in alcohol use

Limitations:

- No control group
- Low participation rate in follow-up
- The study looked at just one university
- There was no assessment of problem behaviors
- Self-report data was used
CPN Note: This study demonstrates that BASICS may work in the naturally-occurring settings of a health center or counseling center on a college campus.


**Overview:** This study aimed to compare the efficacy of a brief motivational in-person interview intervention (BMI) and a personal written feedback-only intervention (WF). The goal was to assess whether written feedback alone is a sufficient means to changing behaviors. Participants were Rutgers students who had violated substance-use policies in the residence hall between 2003 and 2004. Eligible participants (n=222) completed a baseline assessment and were then randomly assigned to the BMI or WF condition. Students completed a 3-month follow-up assessment. The BMI was based on the BASICS model, and students met individually with a counselor for about 30 minutes.

Measures were taken on the following:

- Frequency of alcohol and marijuana use in the last month
- Quantity of cigarettes per day
- Number of occasions of heavy episodic drinking in the past month
- Number of drinks and number of hours of drinking each day in a typical week in the last month (the highest BAC in a typical week was used as an outcome variable)
- Alcohol and drug problems

**Results:**

- For both groups, there were significant decreases in:
  - Total number of drinks in a typical week
  - The number of instances of heavy episodic drinking in the past month
  - The peak BAC in a typical week
  - The number of alcohol-related problems in the past 3 months
  - The number of drug-related problems in the past 3 months
  - Reported last month use of cigarettes or marijuana

- For both groups, there was no significant change in:
  - Frequency of alcohol consumption
  - Past-month marijuana frequency
  - Past-month cigarette quantity

- The effect sizes were moderate for changes in alcohol problems, peak BAC, and number of drinks per week.
- There were no significant differences between the two intervention conditions in terms of any substance-use outcomes

**Limitations:**

- The length of the BMI (30 minutes) was rather short
- There was not a no-treatment control group
- Lack of a diverse sample

CPN Note: This study demonstrates that written feedback may work as well as an in-person intervention at changing behaviors. Written feedback may also be a cost-effective means to reducing alcohol use and alcohol-related problems.

**Overview:** The goal of this study was to evaluate the efficacy of personalized drinking feedback (PDF) delivered with and without a motivational interview (MI) for college student drinkers. Undergraduate students who consumed at least 13 drinks per week and experienced at least one negative consequence in the past month were eligible to participate. Students (n=54) were randomly assigned to a PDF +MI or a PDF-only condition.

Students were surveyed on the following measures at pre-intervention and 6-month follow-up:

- Total drinks per week
- Frequency of drinking and heavy drinking during a typical week in the past month
- Past month alcohol-related problems

**Results:**

- Participants in both groups showed moderate reductions for all drinking measures, and females showed greater reductions than males
- There was no significant change in negative consequences for either group
- The authors note that PDF without MI can be equally effective and may minimize costs

**Limitations:**

- A lack of proper training of clinicians
- Small number of male participants (thus the gender interaction should be interpreted cautiously)
- Small sample size
- No control group

**CPN Note:** This study gives further evidence to the fact that PDF without MI can be equally effective and may minimize costs.


The STEPS Program is a comprehensive Screening and Brief Intervention (SBI) strategy based on the BASICs model. The goal of the program is to reduce alcohol use (frequency and quantity) and to reduce associated negative consequences. The program targets first-year students, student athletes, and students seeking primary health and mental care on campus. The STEPS program is comprised of three components.

**Project First STEPS:**

**Overview:** This program is catered to the needs of first-year student high-risk drinkers. The BASICs intervention is provided to first-year students who are referred through online screening during their first month at school. Students who met the "at-risk" screening criteria (n=160) were randomly assigned to receive either a one-on-one BASICS session or Web-delivered BASICS–derived personalized drinking feedback-only intervention. Baseline data, 3-month and 6-month follow-up data were collected on:
• Daily drinking patterns
• Self-reported alcohol problems
• Social norms comparisons
• Beliefs about the effects of alcohol
• Use of protective behaviors

Results:
• 24% reduction in drinks per week
• 15% reduction in peak drinking over past 30 days
• 15% reduction in peak BAC
• 11% reduction in antisocial behavior
• Reductions (though non-significant) in problems related to alcohol, alcohol-related sexual activity, and difficulty studying
• Non-significant reduction in the change in manner of drinking
• 29% change in perception of typical student drinks per week
• 17% reduction in perception of typical student peak drinks
• At 6-month follow-up, participants who engaged in protective behaviors also demonstrated significant reductions in consumption
• The manner of drinking strategy was associated with more accurate perceptions of typical student drinking
• Both interventions were found to be effective at 6-months post-intervention, yet the face-to-face intervention demonstrated a greater effectiveness:
  • Face-to-face BASICS had a 43% reduction in alcohol consumption during typical week, and the web-based PDF only had an 11% reduction
  • Face-to-face BASICS had a 22% reduction in peak number of drinks in the last 30 days, and the web-based PDF only had a 10% reduction

17. Massachusetts Institute of Technology: BASICS (Brief Alcohol Screening and Intervention for College Students). The Higher Education Center for Alcohol and Other Drug Abuse and Violence Prevention.

Overview: MIT’s BASICS was initiated in September 2001. All first-year students were asked to participate in an online study and were asked to fill out an online survey about their drinking behavior. Fifteen students met the screening criteria for benefiting from BASICS and agreed to participate in two counseling sessions. Afterwards, students were mailed a brief follow-up questionnaire.

Results:
• From 2001-2004, no student who participated in the first-year component of the Screening and Brief Intervention (SBI) has been cited or arrested for an alcohol or drug-related violation, nor have they had to receive medical attention
• Since MIT began to use SBI as a primary judicial sanction for student violators of the alcohol policy, 0% of those who received SBI as a sanction had any other violation, while 15% of students who received another form of sanction had a second alcohol or other drug violation
• Since 2002, none of the students who participated in the SBI program after an alcohol-related incident experienced a second incident of injury or overdose
• Looking at the follow-up assessments, the rate of high-risk drinking decreased by 40% for MIT students who entered the MIT-SBI program