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Using the internet's power and anonymity to reduce problem drinking

Computers, and the internet, have become an integral part of North American life, whether located at home, school or the workplace. At least 80 percent of internet "surfers" in the United States have reportedly used the internet to access health information. Symposium proceedings published in the February issue of *Alcoholism: Clinical & Experimental Research* describe several alcohol interventions – based on in-person brief motivational interventions (BMIs) – that are currently offered via the internet.

"BMIs use elements that are common to effective brief interventions," said Scott Walters, symposium organizer and assistant professor of behavioral sciences at the University of Texas School of Public Health. "A number of studies show that people tend to respond best to certain kinds of interventions, those that provide feedback, are empathic and nonjudgmental, emphasize personal responsibility, and give people several options for how they would like to go about changing their drinking. Interventions that have these elements are more likely to reduce drinking. Effective computer interventions basically pull from these common elements. In fact, many drinkers seem to prefer this format. It's a way to save face, and drinkers can begin to look at their drinking in a private and nonjudgmental way."

Symposium presenters at the June 2004 Research Society on Alcoholism meeting in Vancouver, B.C. spoke about the following programs:

- The Drinker's Check-up (DCU) is a computer program model based on the original face-to-face DCU. Outcomes of a study using the computer-based DCU compared favorably to earlier studies of the DCU delivered face-to-face.

"The DCU program is the internet equivalent of two to three face-to-face sessions with a counselor," said Reid Hester, director of the Research Division at Behavior Therapy Associates in Albuquerque, NM. "It contains the same elements of the original DCU: a comprehensive assessment of the drinker's risk factors, family history, alcohol and drug use, alcohol-related problems, symptoms of dependence, and motivation for change; objective feedback based on their answers; and a module that helps them resolve their ambivalence about whether to change their drinking."

Hester said the DCU program can help users decide whether or not they want to change their drinking, and to consider what goals of change – whether stopping or cutting back – might be most helpful if they do decide to change. "In our clinical trial," said Hester, "heavy drinkers increased their internal motivation for change and reduced their drinking, alcohol-related problems, and symptoms of dependence by 50 percent at a 12-month follow-up."

- The e-CHUG is a web-based version of the Check-Up to Go (CHUG) mailed feedback instrument that has proven effective in college trials. Recent program evaluations offer evidence that the e-CHUG may compare favorably to more lengthy prevention programs and may increase the impact of educational or skill-based prevention efforts.

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“The e-CHUG is an intervention that provides information about personal consumption, potential risk factors, and a comparison to campus norms,” said Walters. “College students tend to think they’re roughly in the middle of other students in terms of their drinking. However, people tend to hang around others that drink like them. Heavy drinkers hang around other heavy drinkers. It’s always surprising to me how many heavy-drinking college students are shocked to learn that they’re at the 95th percentile of college drinkers.

Yet because they hang around other people that drink like they do, it has never occurred to them that there might be a large number of students that don’t drink nearly as much as they do. It’s a wake up call.”

Walters added that many college drinkers seem to prefer the e-CHUG format. “This is consistent with how most college students change their drinking anyway,” he said. “When they decide to make a change, they usually don’t tell anyone and don’t ask for help. They just start refusing drinks, or being more careful about where and when they drink.”

- MyStudentBody.com (MSB), a college-student health website, currently provides help for problems related to alcohol, sexually transmitted diseases, and tobacco. Research has shown that MSB may be an effective brief intervention for college students, especially women and low-motivation drinkers (those less likely to seek out services through other means).

“MSB [showed] significant results for three important subgroups: females, persistent heavy drinkers, and low-motivation drinkers,” said Emil Chiauzzi, vice president of product development at Inflexxion, Inc. “Females who used MSB significantly reduced their peak and total consumption during special occasions and reported significantly fewer negative consequences related to drinking, [compared] to females [in the control group]. Persistent heavy drinkers using MSB [showed a] rapid decrease in average and peak consumption and composite alcohol scores. [Low-motivation] students who used MSB reduced the number of drinks consumed per day significantly faster than those in the control group.”

- The advancement of computer-based BMIs and access to the internet has reduced the time lag between assessment and feedback. Computerized assessments and algorithms also facilitate the option of providing individualized feedback immediately upon submission of data.

“Computerized interventions can provide the message immediately,” said Walters, “when the drinker might be most interested in getting information. They can also provide a lower-cost and customized intervention to many more drinkers. Considering the problems that alcohol creates for drinkers, as well as for others, the public health potential of these interventions is enormous.”

“Computerized interventions can also provide anonymity, convenience – they can be done anytime, day or night – and getting feedback that is objective and not influenced by counselor bias,” added Hester.

“Because computerized interventions are relatively new,” said Walters, “we have less information about how long their effects last, or how computerized interventions compare to face-to-face interventions in the long term.” He added that there are several large-scale studies in progress to see what the impact of these interventions may be *en masse*, and how long the effect lasts. “But for many drinkers, the computer is a safe place to explore whether or not they might have a problem with alcohol. Maybe it’s something that just piques their interest, or maybe it will motivate them to actually speak with a counselor about the difficulties they’re having. Of course, there’s nothing in any of this that would preclude the individual from seeking additional services.”

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Alcoholism: Clinical & Experimental Research (ACER) is the official journal of the Research Society on Alcoholism and the International Society for Biomedical Research on Alcoholism. Co-authors/presenters of the symposium proceedings published in the ACER paper, “Demon Rum: High-Tech Solutions to an Age-Old Problem,” were: Reid K. Hester of Behavior Therapy Associates; Emil Chiauzzi of Inflexxion, Inc.;

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Journalists: A full copy of the manuscript may be obtained by contacting Mary Newcomb with the ACER Editorial Office at 317.375.0819 or mnewcomb-acer@earthlink.net. This project is supported by the Addiction Technology Transfer Center Network.