

Should the European Union lift the ban on snus?

Evidence from the Swedish experience.

Fagerstrom KO; Schildt E-B. *Addiction* 98(9): 1191-1197, 2003. (30 refs.)

The very low smoking prevalence in Sweden has received considerable attention. Sweden was the only country in Europe to reach the World Health Organizations' goal of less than 20%, daily smoking prevalence among adults by year 2000. Only 17% of Swedish men smoke. Some have argued that this has been achieved because Swedes use another form of tobacco instead. Sweden has a high level of use of a moist snuff product called 'snus'. Nineteen per cent of adult men and 1%, of women are daily users and the trend is increasing. Epidemiological studies have failed to find evidence that snus causes cancers, including oral cancer. Its adverse effects on the cardiovascular system are debated, but are certainly less than those of smoking. Recent studies among former smokers indicate that many men have quit smoking using snus. Forty-seven per cent of current snus users are former smokers and 28% of ex-smoking used snus at their last attempt to stop smoking. The association between high snus consumption and low smoking prevalence has been debated and challenged. It has been argued that snus may be a gateway to cigarette smoking. Recent data has found that among those starting tobacco use in the form of snus, 20% later go on to smoking while the same risk for those not starting with snus is 43%. On balance, there is reason to believe that having snus available to the Swedish population has been of benefit to public health. Repealing the ban on snus in the rest of the European Union might also have some positive effect, depending on the marketing. Copyright 2003, Society for the Study of Addiction to Alcohol and Other Drugs.

Preventing substance abuse in Hispanic immigrant adolescents: An eco-developmental, parent-centered approach.

Pantin H; Schwartz SJ; Sullivan S; Coatsworth JD; Szapocznik J. *Hispanic Journal of Behavioral Sciences* 25(4): 469-500, 2003. (38 refs.)

This article discusses the challenges that Hispanic immigrant families face and reviews the potential negative consequences of these challenges for Hispanic adolescents. The article outlines the theoretical background, goals, and intervention components of Familias Unidas, a substance-abuse-prevention program for poor immigrant Hispanic adolescents and their parents. Familias Unidas is an ecodevelopmentally based, parent-centered intervention

delivered by way of parent participatory-learning groups, parent-adolescent discussion circles, and periodic home visits. Through participation in Familias Unidas, parents acquire skills for communicating with and supporting their adolescents, managing adolescent behavior problems, and becoming actively involved in their adolescents' social and academic lives, all of which are protective against substance abuse. This article delineates the key intervention principles of Familias Unidas that increase parental involvement and collaboration within the adolescents' family, school, and peer worlds and, as a result, improve adolescents' functioning in these areas. Copyright 2003, Sage Publications Inc.

Think they're drunk? Alcohol servers and the identification of intoxication.

Burns ED; Nusbaumer MR; Reiling DM. *Journal of Drug Education* 33(2): 177-186, 2003. (19 refs.)

Despite alcohol server training programs and legal liability aimed at controlling intoxication, server intervention appears to be rare. Given the difficulty in assessing intoxication, it can be assumed that improvement in assessment skills would increase the likelihood of intervention. Unfortunately, little is known regarding practices servers use to identify intoxication. In order to build a more informed base for policy formation and server training, the focus of this inquiry was to examine practices used by servers to assess intoxication. The analysis was based upon questionnaires mailed to a random probability sample of licensed servers from one state (N= 822). Indicators found to be most important were examined in relation to a variety of occupational characteristics. Implications for training curricula, policy formation, and future research are discussed. Copyright 2003, Baywood Publishing Co., Inc.

A paid radio advertising campaign to promote parent-child communication about alcohol.

Surkan PJ; DeJong W; Herr-Zaya KM; Rodriguez-Howard M; Fay K. *Journal of Health Communication* 8(5): 489-495, 2003. (17 refs.)

This study assessed the impact of a paid radio commercial designed to promote parent-child communication about alcohol use and sponsored by the Bureau of Substance Abuse Services, Massachusetts Department of Public Health. A random-digit-dial

telephone survey of parents or guardians of children ages 10 - 17 years was conducted after a four-week advertising flight. Respondents with unassisted recall of the commercial more often disagreed that parent-child discussion is useful only if children have begun to experiment with alcohol, and more often reported having three or more parent-child discussions about alcohol compared to those who did not recall the commercial. Findings suggest the potential benefit of paid media campaigns to encourage parents to talk with their children about alcohol. Copyright 2003, Taylor and Francis, Inc.

Alcohol and drug abuse: The best of practices, the worst of practices: The making of science-based primary prevention programs.

Gorman DM. *Psychiatric Services* 54(8): 1087-1089, 2003. (28 refs.)

Science-based primary prevention programs are discussed, with a focus on school-oriented programs. Specifically, the author describes two issues of scientific analysis (the adjustable outcome and the inflatable p values/wishful one-tailed test) with a focus on three widely advocated prevention programs, The Seattle Social Development Project (SSDP), the Life Skills Training (LST) program, and the ATLAS program. The adjustable outcome involves changing the outcome of the study over the course of the evaluation or changing the way a variable is constructed from study to study. The inflatable p value involves changing the traditional level of significance of 0.05 (a 5% probability that the findings are due to chance) to, for example, a level of 0.1 (a 10% probability that the findings are due to chance). The "wishful one-tailed test" involves the use of the one-tailed significance test in other than traditional situations, those in which there is a very strong prior hypothesis. The author notes that these rules of analysis serve a purpose: to isolate the effects of a program from other influences that might bring about the changes desired. When the rules are bent too far, they no longer serve this purpose. In fact, analysis of school-based prevention programs, such as those above, is not consistent with the type of rigorous hypothesis testing associated with the term "science." Copyright 2003, American Psychiatric Association. Used with permission.

Substance Abuse Prevention: The Intersection of Science and Practice.

Hogan JA; Gabrielsen KR; Luna N; Grothaus D. Boston: Allyn & Bacon, 2003. (234 refs.)

This is text directed to substance abuse prevention. The authors view it as a volume that can assist those preparing for licensure and certification. Chapter headings and some subheadings in this volume include: (1) introduction:

evolution and training of the prevention discipline; attitudes about alcohol, tobacco, and other drugs (ATOD); definitions of use, misuse, abuse, and dependence/addiction; justification for theory; building blocks for the prevention profession; (2) prevention research; (3) prevention program planning: assess the readiness of the community and mobilize for action; assess the levels of risk factors and protective factors in the community; translate data into priorities; examine the resources in the community that are reducing risk factors and increasing protective factors; select a target population; apply "guiding principles" and "best practices;" evaluate; (4) facts about drugs; (5) the cultural context and ethics of prevention; (6) incorporating human development theory into prevention; (7) the media and prevention; (8) the logic model and evaluation; (9) communication strategies; (10) grant writing; and (11) bringing it all together. Appendices provide additional resource materials as well as four case studies in prevention, which address ethics and the gap between research and practice. Public Domain.

Longer-term primary prevention for alcohol misuse in young people: A systematic review.

Foxcroft DR; Ireland D; Lister-Sharp DJ; Lowe G; Breen R. *Addiction* 98(4): 397-411, 2003. (76 refs.)

Objective: To identify and summarize rigorous evaluations of psychosocial and educational interventions aimed at the primary prevention of alcohol misuse by young people aged up to 25 years, especially over the longer term (>3 years). Methods: Cochrane Collaboration Systematic Review Data sources: A comprehensive search of 22 databases and recursive checking of bibliographies for randomized and non-randomized controlled trials and interrupted time-series studies Main outcome measures: Objective or self-report measures of alcohol use and misuse Results: Fifty-six studies were selected for inclusion in the systematic review. Twenty of the 56 studies showed evidence of ineffectiveness. No firm conclusions about the effectiveness of prevention interventions in the short- and medium term were possible. Over the longer term (>3 years), the Strengthening Families Program (SFP) showed promise as an effective prevention intervention. The Number Needed to Treat (NNT) for the SFP over 4 years for three alcohol initiation behaviours (alcohol use, alcohol use without permission and first drunkenness) was 9 (for all three behaviors). One study also highlighted the potential value of culturally focused skills training over the longer-term (NNT = 17 over 3.5 years for 4+ drinks in the last week) Conclusions: (1)

Research into important outcome variables needs to be undertaken; (2) the methodology of evaluations needs to be improved; (3) the SFP needs to be evaluated on a larger scale and in different settings; (4) culturally focused interventions require further development and rigorous evaluation; and (5) an international register of alcohol and drug misuse prevention interventions should be established and criteria agreed for rating prevention interventions in terms of safety, efficacy and effectiveness. Copyright 2003, Society for the Study of Addiction to Alcohol and Other Drugs.

Pediatric smoking prevention interventions delivered by care providers: A systematic review. (review).

Christakis DA; Garrison MM; Ebel BE; Wiehe SE; Rivara FP. *American Journal of Preventive Medicine* 25(4): 358-362, 2003. (28 refs.)

Objective: To conduct a systematic review of randomized controlled trials of smoking prevention interventions for youth delivered via medical or dental providers' offices. Methods: Online bibliographic databases were searched as of July 2002, and reference lists from review articles and the selected articles were also reviewed for potential studies. The methodology and findings of all retrieved articles were critically evaluated. Data were extracted from each article regarding study methods, intervention studied, outcomes measured, and results. Results: The literature search returned 81 abstracts from MEDLINE and 49 from Cochrane Clinical Trials Registry (CCTR); of these, four articles met the inclusion criteria. Included were two studies conducted in primary care, and one each in dental and orthodontic offices. Only one study demonstrated a significant effect on smoking initiation; in that study, 5.1% of the intervention group and 7.8% of the control group reported smoking at 12-month follow-up (odds ratio = 0.63; 95% confidence interval, 0.44-0.91). None of the studies had follow-up times greater than 3 years. Conclusions: There is very limited available evidence demonstrating efficacy of smoking prevention interventions in adolescents conducted in providers' offices and no evidence for long-term effectiveness of such interventions. Copyright 2003, American College of Preventive Medicine.

The European Smoking Prevention Framework Approach (EFSA): an example of integral prevention.

deVries H; Mudde A; Leijts I; Charlton A; Vartiainen E; Buijs G; Clemente MP et al. *Health Education Research* 18(5): 611-626, 2003. (57 refs.)

A smoking prevention project in six European countries (European Smoking prevention Framework Approach) was developed, featuring activities for adolescents, schools and parents, including out-of-school activities. Consensus meetings resulted in agreement between the countries on goals, objectives and theoretical methods. Countries' specific

objectives were also included. National diversities required country-specific methods to realize the goals and objectives. The community intervention trial was used as the research design. Since interventions took place at the community level, communities or regions were allocated at random to the experimental or control conditions. Complete randomization was achieved in four countries. At baseline, smoking prevalence among 23 125 adolescents at the start of the project was 5.6% for regular smoking and 4.0% for daily smoking. Smoking prevalence rates were higher among girls than boys in all countries as far as weekly smoking was concerned. Process evaluations revealed that the project's ambitions were high, but were limited by various constraints including time and delays in receiving funds. Future smoking prevention projects should aim to identify the effective components within the social influence approach as well as within broader approaches and on reaching sustained effects. Copyright 2003, Oxford University Press.

A review of 25 long-term adolescent tobacco and other drug use prevention program evaluations.

Skara S; Sussman S. *Preventive Medicine* 37(5): 451-474, 2003. (68 refs.)

Background. Although the initial effectiveness of psychosocial strategies programming in preventing smoking and other drug abuse among adolescents has been well established through literature reviews and meta-analyses, much less evidence exists for the long-term follow-up success of these interventions. The primary goal of this paper, therefore, is to summarize the effectiveness of published program evaluation studies that have followed adolescents across the transitional period between junior high and high school for a period of at least 2 years. Methods. Studies for inclusion in this review were accessed primarily through a computerized search of Medline, Healthstar, and PsychINFO databases. Intervention studies that met five core criteria were retained for review. Two authors independently abstracted data on study characteristics, methodology, and program outcomes. Results. Search results yielded 25 studies suitable for examination. The majority of these studies reported significant program effects for long-term smoking, alcohol, and marijuana outcomes, while indicating a fairly consistent magnitude of program effects. Conclusions. This review provides long-term empirical evidence of the effectiveness of social influences programs in preventing or reducing substance use for up to 15 years after completion of programming. However, this conclusion is still somewhat tenuous given the lack of significant program

effects reported in several studies and the great variability that existed in the level of internal and external validity across all studies. Copyright 2003, American Health Foundation.

keepin' it R.E.A.L.: A drug resistance curriculum tailored to the strengths and needs of pre-adolescents of the southwest.

Gosin M; Marsiglia FF; Hecht ML. *Journal of Drug Education* 33(2): 119-142, 2003. (84 refs.)

Research has shown that students respond more favorably to drug prevention programs when they see their culture and themselves represented in the prevention message. Additionally, studies highlight important ethnic differences in drug behaviors and attitudes, indicating that students' ethnic culture should be considered in the creation of prevention programs. Because there are few effective, culturally grounded programs, new approaches are needed, particularly among Mexican American youth. This need inspired the Drug Resistance Strategies Project (DRS) to develop and test the keepin' it R.E.A.L curriculum serving ethnically diverse seventh grade students residing in a large southwestern city. This article describes development of the keepin' it R.E.A.L. curriculum, focusing on the methods used to ensure cultural grounding. The article also reviews literature on cultural approaches in prevention, presents a theoretical framework, summarizes key outcomes of the curriculum evaluation, and concludes with recommendations for the development of prevention programs for ethnically diverse youth. Copyright 2003, Baywood Publishing Co., Inc.

Positive impact of competence skills and psychological wellness in protecting inner-city adolescents from alcohol use.

Epstein JA; Griffin KW; Botvin GJ. *Prevention Science* 3(2): 95-104, 2002. (48 refs.)

Competence enhancement prevention programs for substance use have proven effective, but little is known about the mechanisms of competence (decision-making skills and self-efficacy) involved in helping youth to avoid problem behavior. This study examines whether greater competence is associated with increased levels of psychological wellness (mental health) that enables youth to cope with stressful situations. A survey was conducted with middle and junior high school students (n = 1,459) in New York City, who completed measures of competence, psychological wellness, and alcohol use. Results of the

baseline survey indicated that 41% reported trying alcohol and 21% had consumed alcohol in the past month. Follow-ups were conducted at 1 and 2 years. Statistical modeling was used to analyze the data. Students who were highly competent reported greater psychological wellness, which in turn was associated with less alcohol consumption. Findings suggest that the positive impact of competence on psychological wellness helps to protect adolescents against alcohol use. Those who were able to make sound decisions and felt more capable experienced greater psychological wellness and consumed less alcohol. Implications for treatment are discussed. Copyright 2002, Society for Prevention Research.

Family-based interventions for substance use and misuse prevention.

Kumpfer KL; Alvarado R; Whiteside HO. *Substance Use & Misuse* 38(11-13): 1759-1787, 2003. (78 refs.)

Because "substance abuse" is a "family disease" of lifestyle, including both genetic and family environmental causes, effective family strengthening prevention programs should be included in all comprehensive substance abuse prevention activities. This article presents reviews of causal models of substance use and evidence-based practices. National searches by the authors suggest that there is sufficient research evidence to support broad dissemination of five highly effective family strengthening approaches (e.g., behavioral parent training, family skills training, in-home family support, brief family therapy, and family education). Additionally, family approaches have average effect sizes two to nine times larger than child-only prevention approaches. Comprehensive prevention programs combining both approaches produced much larger effect sizes. The Strengthening Families Program (SFP) is the only one of these programs that has been replicated with positive results by independent researchers with different cultural groups and with different ages of children. Few research-based programs have been adopted by practitioners, partly because of technology transfer issues. Overall, research on ways to improve dissemination, marketing, training, and funding is needed to improve adoption of effective prevention programs. Copyright 2003, Marcel Dekker, Inc.