

**A Review of Prevention Research
Institute Programs**

**A Report to the Division for Substance Abuse
Kentucky Cabinet for Human Resources**

Submitted by

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POPULATION:

109 Dartmouth College Undergraduate Advisors.

DATES OF EVALUATION:

1994 and 1995

EVALUATION DESIGN:

Students completed a pretest, a posttest at the end of a one-day OCTAA training, and a second posttest 30 days later. Posttest #2 was a mailed survey, with 46% responding. Matched pairs were used.

Outcomes Evaluated: student knowledge, attitudes, and behaviors related to alcohol; trainer effects

EVALUATOR:

John H. Pryor, M.A., Program Evaluator, College Health Service, Dartmouth College

REFERENCE:

Report on the UGA Training, September 1994, by John H. Pryor, Dartmouth College Health Service.

FINDINGS AND LIMITATIONS OF THE EVALUATION

- ◆ Significant decrease was reported for the following two negative consequences due to alcohol use, at posttest #2. The evaluator commented that the pretest, given at the beginning of the semester, reflected consumption over a past month that was not spent on campus; since students typically drink more when school is in session (except during Spring break), the timing of the pretest logically would minimize effects of the program. The evaluator recommended that organizers postpone OCTAA until later in the term.
 - fewer incidences of nausea or vomiting ($p = .04$), and
 - driving under the influence ($p = .08$, reported as marginally significant).
- ◆ At posttest #2, 17 of 46 respondents (37%) reported following low-risk guidelines who had not reported that on pretest. (Only percentages were given; no further statistical treatment reported).
- ◆ Movements toward "low-risk oriented behaviors" were reported from posttest #2: 27% cut down on drinking; 26% wondered about their trigger level; 76% thought about alcoholism, 76% told someone information learned in the training; 52% told someone about low-risk guidelines; 65% thought about low-risk guidelines; 46% wondered about their tolerance level.
- ◆ A total of 26% reported they had stopped or "maybe" stopped state-dependent activities and/or friendships, e.g., parties or friends that centered around drinking. Forty-seven percent reported thinking about stopping state-dependent activities or friendships.
- ◆ Significant improvements in attitudes reported on posttest #1 and held through posttest #2, e.g., more likely to believe:
 - "People with a high tolerance for alcohol are more likely to develop alcoholism,"
Pretest = 66% agreed or strongly agreed; posttest = 85% agreed or strongly agreed

($p=.001$). Fraternity/sorority members changed significantly more than non-members ($p=.04$).

- "Having one or two drinks every night is more harmful than having five or six drinks one night a week."($p=.0544$).
- "I could develop alcoholism." Before OCTAA, 62% agreed with this statement; following OCTAA, 86% agreed. Fraternity/sorority members indicated a larger change in favor of this statement than non-members ($p=.0106$). Likewise, older students (e.g., 21 year olds) indicated a larger change than younger students ($p=.0393$).

(Note that the evaluator listed these items as knowledge; other studies frequently list them as attitudes or beliefs.)

- ◆ On posttest #2, one-third made positive remarks about the influence of OCTAA on their lives.
- ◆ Evaluator commented that important differences in trainers seemed to account for much of the differences in participant evaluations of the OCTAA experience.

LIMITATIONS OF EVALUATION:

- ◆ Findings from posttest #1 relating to alcohol behaviors were questionable because the pretest and posttest #1 (given at the end of the one-day OCTAA training) inquired about the same time period. Therefore, results from posttest #1 were not reported here.
- ◆ The pretest was given at the beginning of school and therefore inquired about a period during which students were at home or away from school. Because students tend to drink less when they are at home and increase drinking when they return to school, demonstration of OCTAA effects on use and negative consequences are likely to be camouflaged and minimized in the data. (The evaluator drew attention to this problem.)
- ◆ No control group.
- ◆ One-month follow-up; no long-term data.