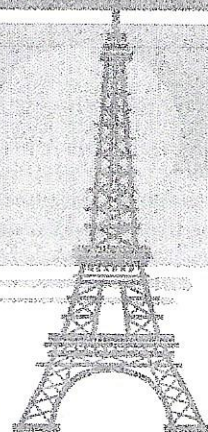




European Society for
Prevention Research

IO4



4th International Conference and Members' Meeting

Le Centquatre, Paris, France
November 13-15, 2013

Understanding differences in prevention outcomes

Pre-conference workshops
are in collaboration with



This year's conference has been co-organised with a number of leading French organisations with specialisms in prevention; INPES (Institut national de prévention et d'éducation pour la santé), MILD (Mission interministérielle de lutte contre la drogue et la toxicomanie), INCa (Institut National du Cancer), IReSP (Institut de Recherche en Santé Publique) and Aviesan (Alliance nationale pour les sciences de la vie et de la santé).



The study used a non-randomised control longitudinal design. 2,349 students were recruited at baseline. Over two consecutive academic years, a group of students received the intervention from external facilitators, another group of students received the intervention from their teachers, and a control group received alcohol education as normal. Data were collected at baseline, 12, 24, and 32 months after baseline and assessed alcohol-related knowledge and attitudes; frequency of consumption; quantity of alcohol consumed during last drinking episode; and harms associated with alcohol use.

The results of Multi-Level Growth Modeling indicate that there was a significant improvement in alcohol-related knowledge in all baseline context of use groups who received the intervention. However, the intervention failed to significantly improve attitudes toward alcohol in any group. Furthermore, supervised and unsupervised drinkers who received the intervention significantly reduced their frequency of consumption; while unsupervised drinkers who received the intervention experienced significantly fewer harms associated with alcohol use.

These findings suggest that universal interventions such as SHAHRP can differentially impact individuals depending on their drinking experiences.

26. Serena Vadrucchi, Vigna-Taglianti FD, Burkhart G, Wiborg G, van der Kreeft P, Vassara M, Scatigna M, Melero JC, Faggiano F, and the EU-Dap Study Group

The theoretical model of the school-based prevention program Unplugged

Unplugged is a school-based prevention program designed and tested in the framework of the EU-Dap prevention trials. The program consists of 12 standard units, one-hour each, delivered by class teachers to adolescents 12-14 years old, and it has been shown to be effective in reducing cigarette use, drunkenness episodes and cannabis use at short term. It is a strongly interactive program including a training of personal and social skills with a specific focus on normative beliefs. From the definition of the theoretical model of the program, and of the contribution of the theories to the units, it is possible to identify the main targeted mediators and to study mechanisms of effect of the program. The program is based on several theories: Social Learning, Social Norms theory, Health Belief model, theory of Reasoned Action-Attitude and Planned Behaviour, and Problem Behaviour theory, which are integrated creating a complex model. Every theory contributes to the development of the units' contents, with specific weights. Problem Behavior theory accounts for

47% of the Unplugged content, and other theories account each for about 12-15% of the contents. Knowledge, risk perception, attitudes towards drugs, normative beliefs, critical and creative thinking, relationship skills, communication skills, assertiveness, refusal skills, ability to manage emotions and to cope with stress, empathy, problem solving and decision making skills are the targeted mediators of the program.

27. Tina Van Haverre

Using media in alcohol and drug interventions in nightlife: a systematic review

Drug use in nightlife is higher than in the general population which makes it a good opportunity for interventions to reduce and minimize harm from the use of illegal drugs and excessive alcohol consumption. This setting is packed with electronic media possibilities (TV, social network sites, mobile phones applications) which makes it possible to communicate on a more personal level. A systematic review of peer-reviewed articles was conducted to determine interventions published since 2000 in the broader nightlife scene (bars, clubs, dance events, festivals...) with an active electronic media component to target their audience. In total 14 manuscripts were retrieved. It can be concluded that the least promising actions towards effectiveness are isolated social marketing campaigns. More valuable effects are seen with media advocacy. Reported effectiveness for all multi-component studies that include media advocacy were found. Furthermore, training for public health workers on working with media can result in more effective implementation of the interventions. Future studies should focus on more recent media technologies like mobile phone applications which are not (yet) published in peer-reviewed journals, although some experimental interventions in nightlife exist.

28. Vincenza Cofini, R Bernardi, MR Cecilia, C Martini, F di Orio

Adolescents and Internet addiction: analysis of gender differences

Many evidences show health issues from new addictions, particularly internet addiction in adolescents. The present study aims to examine the gender differences among web users and the psychological and social effects on adolescent population.

A representative sample from a city of central Italy was chosen using the probability proportional to size (PPS) cluster technique. Classes (IV and V) were the basic unit.

The total sample size was calculated to be 664 subjects from 10 schools and 66 classes. Data were collected from a sample of 535 students, enrolled after parents informed consent. All participants completed the Internet Addiction Test.

57% of respondents are female and the average age is 17 years (± 0.9). 67% of participants have a test score in normal range (0-30 points) 24% reports mild addiction (31-49 points), 10% has a score from 50 to 79 points (moderate addiction) and only one person shows a severe addiction (80-100 points). More than 50% of the subjects admit a network abuse without perception of its negative effects, regardless of gender. There are statistically significant gender differences in the factors that investigate the psychological and social consequences. Males appear to be lazier than females ($F=5.14$, $p=0.0238$), they have less active social life's ($F=13.34$, $p=0.0003$) and self-control ($F=7.84$, $p=0.0053$), preferring the excitement offered by internet than partner intimacy (chi test=6.8; $p=0.009$).

The study shows how internet use influences the quality of life of the two sexes in adolescence in a different way and how the gender can be a discriminating factor in prevention strategies.

29. Valentina Kranzelic, Neven Ricijas, Dora Dodig, Aleksandra Huic
Development, implementation and evaluation of youth gambling prevention program in Croatia

In year 2011 first comprehensive Croatian national research on youth gambling was conducted. The aim of the research was to explore the strength that experiences with gambling activities, specific motivation for gambling, ways people think about gambling, and broad personality dimensions have in explaining psychosocial consequences of adolescent gambling. A representative sample of 1.952 high-school students from four major Croatian cities (regional centers) participated in the study. The results were used as a base for development of youth gambling prevention program named "Who really wins?". Prevention program "Who really wins?" is based on national research results but also on relevant and recent literature reviews on effective gambling prevention programs for children and youth. In school year 2012/2013. developed program was implemented in two 1st and two 2nd grades of two different types of high schools in Zagreb. Process evaluation showed high fidelity in program implementation and high level of students' satisfaction with program. For the effectiveness evaluation, control trial was conducted and the results showed significant effects in intervention group on knowledge about gambling, cognitive distortions

and relevant social skills that were integral part of the prevention program. The evaluation results were starting point for program improvement and modification and preparation of the program implementation package for dissemination. Described process represents the model of development of evidence-based prevention programs that are still insufficiently developed in Croatian prevention practice.

30. Vasileios Kiosses, Vasileios Karathanos, Athina Tatsioni
Interventions to promote empathy responses in health professionals: A systematic review of the literature

We systematically assessed whether interventions aiming at improving health professionals' empathy are effective.

We searched Pubmed, Cochrane Database of Clinical Trials, Scopus, and PsycInfo for randomized controlled trials in English. Change in empathic responses was the main outcome. We categorized studies based on whether empathy was measured by observers, participated staff, or patients.

Out of 722 items, 17 articles were eligible. Thirteen studies used experiential while 4 non-experiential learning approaches. Duration ranged from 2 days to 24 weeks. Observers in 5 studies rated simulated interviews. Raters used the motivational interviewing treatment integrity 3.0 in one study, and supported that trained medical students scored better ($p<0.001$). In another study, coders used the Staff-Patient Interaction Rating Scale to assess students' improvement after training in a communication program, and showed a significant time by group interaction effect ($p=0.038$). Observers in 7 studies rated actual interviews. Raters used the Global Rating Scale for empathy and the Empathy Communication Coding System in one study, and supported that trained physicians expressed more empathy ($p<0.01$). In another study, coders found that trained oncologists used more empathic statements ($p=0.024$) and were more likely to respond to negative emotions empathically ($p=0.028$). Six studies used physician self-rated questionnaires without reporting significant changes. Patients (actual or simulating) rated health professionals' empathy in 5 studies. Patients used the Consultation and Relational Empathy Measure in one study, and reported that trained physicians had greater improvement ($p=0.04$). Few of the trials that evaluated empathy promoting interventions among health care staff showed a significant improvement.