BASICS—Brief Alcohol Screening and Intervention of College Students

BASICS—Brief Alcohol Screening and Intervention of College Students: A Harm Reduction Approach—is a preventive intervention for college students 18 to 24 years old. It is aimed at students who drink alcohol heavily and have experienced or are at risk for alcohol-related problems such as poor class attendance, missed assignments, accidents, sexual assault, and violence.

Students often conform to patterns of heavy drinking they see as acceptable while holding false beliefs about alcohol’s effects or actual alcohol-use norms. BASICS is designed to help students make better alcohol-use decisions. The program’s style is empathetic, not confrontational or judgmental, and—

- Reduces the adverse effects of alcohol consumption
- Promotes reduced drinking
- Promotes healthier choices among young adults
- Provides important information and coping skills for risk reduction

BASICS is conducted over the course of only two interviews, and these brief, limited interventions prompt students to change their drinking patterns. While research also shows that, over time, the majority of students who drink heavily will reduce consumption without the intervention, BASICS speeds the process. BASICS is designed to affect the individual; however, post-intervention students often comment that they respond differently to friends as a result of participation. Thus, if implemented densely (e.g., dormitory or other residential settings), BASICS may have a broader effect.

PROVEN RESULTS

- 67% of students receiving the BASICS intervention “resolved” their behavior, meaning that, statistically, their alcohol use was no different from normal or low-risk students or “reliably improved,” meaning their alcohol use significantly improved from baseline to followup 4 years later, compared to 55% of controls (a statistically significant 12% difference)
- Positive results documented in controlled studies at three different universities
Outcomes

On average, students who drink heavily as freshmen tend to report few negative consequences over time as the reasons for drinking diminish or change. However, those who received BASICS reported fewer consequences and more rapid change. The risk period for young adults may thus be minimized through this brief intervention. Other independent studies suggest that receiving personal feedback is a critical part of the BASICS program. Those receiving general alcohol education without the feedback did not fare as well as those receiving BASICS.

TARGET POPULATION

BASICS was designed for college students 18 to 24 years old who drink heavily and have experienced negative consequences as a result. The program is not designed for students who are alcohol dependent, but it can be used as part of a stepped-care approach for assessment, advice, and referral to specialty care. BASICS has been evaluated with non–treatment-seeking students in large, traditional university settings but may be tailored for use with young adults in other settings such as the military.

BENEFITS

- Increases students’ awareness of the risks associated with alcohol use
- Fosters safer alcohol-use choices such as when, where, and how much to drink
- Young adults gain increased awareness of alcohol-impaired choices that can lead to health problems, social difficulties, and/or legal problems

HOW IT WORKS

As a harm reduction approach, BASICS aims to motivate students to reduce risky behaviors rather than focus on a specific drinking goal such as abstinence or reduced drinking. Students can be identified through routine screening or through referral from medical, housing, or disciplinary services. There are two 50-minute interviews. Before or after the first interview, the student receives a self-report questionnaire to complete. From the questionnaire and the first interview, information is gathered about the student’s—

- Alcohol consumption pattern
- Personal beliefs about alcohol
- Understanding of social alcohol norms
- Family history

The second interview, which occurs approximately 1 week after the initial interview, provides the student with—

- Personalized feedback on myths about alcohol’s effects
- Facts on alcohol norms
- Ways to reduce future risks associated with alcohol use
- A menu of options to assist in making changes

IMPLEMENTATION ESSENTIALS

BASICS can be implemented in a variety of settings, including university health and mental health centers, residential units, and administrative offices. Private offices are needed for confidential interviews.
Training and Materials
Training (or supervision by trained personnel) is recommended to implement BASICS and depending on staff experience, it can be completed in 1 to 2 days. Trainees need interviewing skills, and many paraprofessionals can effectively deliver the program. Training encompasses knowledge of alcohol use among college students and specific clinical techniques such as non-confrontational interviewing. The BASICS workbook, available through Guilford Press, provides the information and charts needed for conducting the interviews. The developers of BASICS can provide onsite and offsite training.

Evaluation and Technical Assistance
Program implementation requires the development of assessment and feedback tools tailored to the specific setting and population. The BASICS workbook provides sample tools and additional information, and assistance can be obtained through consultation with the program developers. Several generic Web-based forms for assessment and feedback are also available (e.g., e-chug.com and mystudentbody.com), which instructors can use to help develop feedback for students.

PROGRAM BACKGROUND
BASICS was developed based on two active areas of research in alcohol treatment: cognitive-behavioral group treatment and brief interventions in addiction treatment. The developers of BASICS and their colleagues spent more than 15 years developing and testing the efficacy of prevention programs with college students. The majority of students met the diagnostic criteria for alcohol abuse. Two studies showed that a 6-week alcohol-use prevention program for groups of students had been effective but time consuming. The program was based on cognitive-behavioral treatment and designed to challenge myths about the effects of alcohol and teach risk reduction. A comparison group received brief advice during a single supportive interview that included assessment and feedback from a group leader. The students receiving brief advice appeared to achieve similar effective results.

Brief interventions in addiction treatment typically include careful assessment of drinking patterns, risks, and symptoms, followed by empathetic advice to make changes. Such brief interventions had been shown to be effective for drinking behavior among adult heavy drinkers seeking treatment but had not yet been developed for alcohol-nondependent young adults.

TARGET AREAS

Protective Factors To Increase
Individual
- Awareness of personal drinking patterns
- Ability to challenge beliefs in myths about alcohol norms and effects
- Awareness of personal vulnerability
- Awareness of alcohol’s negative consequences related to health, social, and/or legal problems
- Concern about social embarrassment as a deterrent to heavy drinking
- Awareness of better and safer choices
- Increased involvement in safe, alcohol-free activities
- Awareness that moderate drinking can be as enjoyable as heavy, hazardous drinking

Risk Factors To Decrease
Individual
- Erroneous attitudes about heavy drinking
- False information about alcohol absorption, metabolism, and blood alcohol effects
- Belief that negative effects of alcohol “won’t happen to me”
EVALUATION DESIGN

BASICS has been evaluated with randomized longitudinal designs. In these studies, student volunteers were recruited and assessed, then selected according to their drinking practices. Students who drank heavily were most commonly chosen, but students were also selected if they lived in a heavy-drinking setting such as a fraternity house. Students were then randomly assigned to receive BASICS or not. In some studies, a control program was added in which students received some other preventive program. At a later date, all students were reassessed and the groups’ drinking practices were compared. In four randomized studies, to date, students receiving BASICS reported less drinking and/or fewer negative consequences of drinking compared to those not receiving BASICS. In one study, differences were observed 4 years after the baseline assessment.

PROGRAM DEVELOPER

G. Alan Marlatt, Ph.D.

BASICS was developed with the support of research grants from the U.S. Department of Health and Human Services’ National Institute on Alcohol Abuse and Alcoholism to Dr. G. Alan Marlatt at the University of Washington. Coinvestigators in the development of the first evaluation study were John S. Baer, Ph.D., and Daniel R. Kivlahan, Ph.D. Dr. Marlatt and his associates are clinical research psychologists who have focused on the development of innovative programs for addictive behaviors. They seek to broaden the base of health services for individuals with a range of alcohol- and drug-related problems.