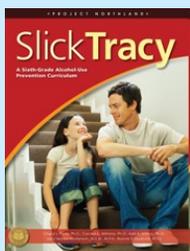


# A Polish adaptation of the Project Northland Efficacy of the two-year alcohol prevention program

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 "Synergy in prevention and health promotion: Individual, community, and environmental approaches"  
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## Brief description of the Project Northland

- Authors: a team from the University of Minnesota (Cheryl L. Perry, Carolyn L. Williams, Kelli A. Korro, Sara Veblen-Mortenson, and Bonnie S. Dudovitz)
- Type of intervention: prevention program, universal, focus on alcohol
- Settings: family, school, community
- Theoretical base:
  - social learning theory (Bandura, 1977)
  - theory of planned behavior (Ajzen, 1988)
  - knowledge about risk factors
- Participants: students, peer leaders, parents, teachers, school coordinators, the program begins in grade 6
- Program components:
  - The program includes school, home, and community components. Parental involvement is crucial for younger students. The program for older students includes a comprehensive community component. Students work on their own community projects to learn about alcohol-related laws, influences, and policies in their own community. Parents can participate in community intervention teams - "Task forces"
  - 6th grade: "Slick Tracy Home Team Program" - 5 classroom sessions
  - 7th grade: "Amazing Alternatives" program - 8 classroom sessions
  - 8th grade: "Powerlines" - 8 classroom sessions
  - "Class Action" is an optional continuation in high school classes

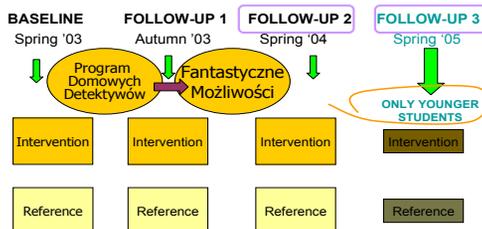
## A Polish version of the program

- The basic assumption of adaptation:
  - taking care of high-fidelity and making changes when it is absolutely necessary and supported by the results of formative evaluation
- The program begins in fourth or fifth grades
  - The reasons of change:
    - Children in US enter school education earlier than in Poland.
    - According to data from surveys, the alcohol initiation occurs earlier in Poland than in the U.S.
    - Interviews with middle school students confirmed that alcohol initiation occurs usually in grade 6
- Program components:
  - 4 or 5th grade: "Slick Tracy Home Team Program", in Polish version "Program Domowych Detektywów", 5 classroom sessions
  - 5 or 6th grade: "Amazing Alternatives" program, in Polish version "Fantastyczne Możliwości" - 6 classroom sessions
  - The changes were extensive, particularly in the second part of the program. We reduced the number of classroom sessions, modified tasks for peer leaders, and the content of school and home program.
  - The reasons of modifications - the results of formative evaluation and pilot studies have shown that the changes are absolutely necessary.
  - We reduced the community components of the programs and resigned from the adaptation "Powerlines".
  - The reasons of modifications - we were exhausted by the hard and time consuming work associated with program adaptation. We assessed, that organization of activities in the local community is a more difficult in Poland than in the U.S.

## METHODS

- In the 3-year study carried-out in a quasi-experimental design participated 787 students from eight primary Warsaw schools. The schools were randomly assigned either to the intervention or reference condition.
- Last follow-up conducted one year after the program was completed, only among younger students (n=431). Older students moved to different junior high schools and continuation of the study in this group was unrealistic.
- The outcome evaluation was based on a self-report questionnaire. Two groups of outcome variables (scales) were analyzed:
  - Behavioral variables: frequency of alcohol consumption by the students, initiation of getting drunk and drinking alcohol with peers
  - Intermediate variables: intention to drink alcohol, peer norms, assertiveness beliefs, pro-alcohol attitudes, frequency of parent/child communication about alcohol and cigarette smoking, knowledge about consequences of drinking, family rules, subjective norms concerning alcohol
- Quality of program implementation has been monitored by: focus group interviews with teachers, interviews with randomly selected parents, student's feedback (questionnaire).
- Outcome analyses were based on MANOVA for repeated measures and chi-square

## Quasi-experimental design



## Number of students in several follow-ups

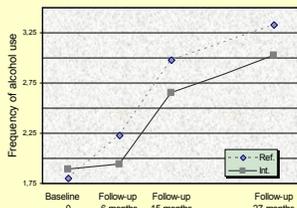
Frequencies	Several follow-ups								
	Follow-up 1			Follow-up 2			Follow-up 3		
	Exp	Ref	Total	Exp	Ref	Total	Exp	Ref	Total
Students total	417	370	787	417	370	787	244	187	431
Students in the analysis	388	349	737	324	330	654	202	170	372
Attrition	7%	6%	6%	22%	11%	17%	17%	9%	14%

## RESULTS

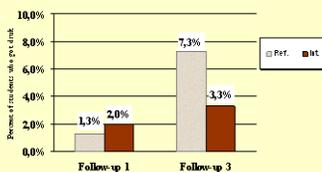
Outcome variables	Results of ...		
	Follow-up 1 4 months after HDP was completed	Follow-up 2 Two-year program was completed	Follow-up 3 One year after follow-up 2
<b>Behavioral variables:</b> Frequency of alcohol use Initiation of drinking with peers Initiation of getting drunk	Not significant Not analyzed Not analyzed	Not significant Chi <sup>2</sup> =3.92* Chi <sup>2</sup> =4.69*	Not significant Not significant Chi <sup>2</sup> =4.62*
<b>Intermediate variables</b> (eight scales analyzed together, high reliability)	F=5.02***	F=4.50***	F=3.64***
Pro-alcohol attitudes	F=15.84***	F=14.31***	F=4.12*
Knowledge	F=26.41***	F=23.94***	F=18.82***
Assertiveness beliefs	Not significant	F=3.01*	F=9.89**

Notes: \* p<0.05; \*\* p<0.01; \*\*\* p<0.001

Changes in frequency of alcohol use (effect was not significant)



Effects of the program on getting drunk n=302; chi<sup>2</sup>=4.62; p<0.05



## Conclusions

- The results of outcome evaluation (15 months follow-up): there were no adverse side-effects; participation in the two-year program was associated with significantly weaker tendency to drunkenness and alcohol drinking with peers; significant, favorable changes were identified for the whole group of the mediating variables, particularly:
  - knowledge about consequences of drinking
  - assertiveness beliefs,
  - pro-alcohol attitudes
 unfortunately, the program's impact on the frequency of alcohol use has not been confirmed
- Beneficial effects were stable over time and confirmed in the last follow-up, 27 months after baseline.
- Cross-cultural adaptation of the evidence-based U.S. programs can be useful for European countries and can produce measurable results.

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