

# Changing Behaviour without Talking: automatic processes and the regulation of behaviour



European Society for  
Prevention Research



**6th International  
Conference and  
Members' Meeting  
Ljubljana, Slovenia  
October 22-24, 2015**



## **Changing Behaviour without Talking: automatic processes and the regulation of behaviour**

Co-organised with Utrip (Institute for Research and Development),  
together with the Ministry of Health of the Republic of Slovenia.

Supported by the Ministry of Education, Science and Sport of the Republic of Slovenia, Office for Youth, and the  
National Institute of Public Health of the Republic of Slovenia.

In collaboration with the Centre for Public Health at Liverpool John Moores University, UK; the State Agency for the  
Prevention of Alcohol-Related Problems, PL (PARPA); and the Science for Prevention Academic Network (SPAN).



# CONTENTS

---

|   |           |
|---|-----------|
| <b>Welcome</b> .....  | <b>4</b>  |
| About our co-organisers .....   | 7         |
| About our Supporters .....  | 8         |
| About our collaborators.....  | 10        |
| Programme at a glance .....   | 12        |
| <b>Full programme</b> .....   | <b>17</b> |
| Conference Day 1: THURSDAY, OCTOBER 22ND .....  | 17        |
| 15:00-16:30 Plenary Session 1 .....   | 18        |
| 16:30-17:30 Parallel Session 1: Posters and complimentary drinks reception .....      | 19        |
| <b>Full programme</b> .....   | <b>52</b> |
| Conference Day 2: FRIDAY, OCTOBER 23ND .....  | 52        |
| 09:30-10:30 Scientific Roundtable.....  | 52        |
| 10:30-11:00 Coffee Break.....   | 52        |
| 11:00-12:45 Parallel Session 2.1 Guiding policy and practice through prevention ..... | 53        |
| 11:00-12:45 Parallel Session 2.2: Institutions.....                                   | 55        |
| 11:00-12:45 Parallel Session 2.3 Healthy communities .....                            | 59        |
| 11:00-12:45 Parallel Session 2.4 Advances in prevention .....                         | 61        |
| 12:45-14:15 Lunch .....   | 63        |
| 14:15-16:00 Parallel Session 3.1 Optimising prevention outcomes.....                  | 63        |
| 14:15-16:00 Parallel Session 3.2: Food and nutrition.....                             | 66        |
| 14:15-16:00 Parallel Session 3.3: Post graduate and Early Career 1 .....              | 68        |
| 14:15-16:00 Parallel Session 3.4: Substance Use .....                                 | 71        |
| 16:00-16:30 Coffee Break.....   | 74        |
| 16:30-18:00 Plenary Session 2 .....   | 74        |
| 20:30-23:00 Conference Dinner (prior booking required).....                           | 75        |
| <b>Full programme</b> .....   | <b>76</b> |
| Conference Day 3: Saturday October 24th .....   | 76        |
| 10:00-11:45 Parallel Session 4.1: Prevention policy and practice .....                | 76        |
| 10:00-11:45 Parallel Session 4.2: Alcohol.....  | 79        |
| 10:00-11:45 Parallel Session 4.3 Post Graduate and Early Career 2.....                | 82        |
| 10:00-11:45 Parallel Session 4.4: Prevention development.....                         | 85        |
| 11:45-12:15 Coffee Break.....   | 88        |
| 12:15-13:00 Plenary Session 3 .....   | 88        |
| Prize giving and conference close .....   | 88        |
| Restaurants.....  | 89        |

# WELCOME

---

Twelve months ago we were celebrating the great success of the Fifth Annual Meeting in Palma de Mallorca. I thought at the time that it would be difficult to match that success, but it looks as though we will, which is great news. Here we are at the Sixth Annual Meeting, in Ljubljana, and at the time of writing we have a record number of abstract submissions and registrations. The theme of this meeting is "Changing Behaviour Without Talking". Prevention has until recently been dominated by approaches that assume that humans always act rationally, make informed and free decisions, and are consciously aware of the motives of their own behaviour. However, it is clear that such approaches only partly explain health and social behaviours. Crucially, non-conscious and automatic processes are important in determining human behaviour.

Industries make use of such processes to modify attentional focus through advertising, packaging, or the withholding of healthy choices. In accordance with the socio-ecological model of health, environmental cues such as the design of cities, the availability, affordability and acceptance of certain commodities, the ease of making relatively healthier choices and what is perceived as prevailing social norms in a given environment may determine behaviour far more than we are generally aware of, and are ready to admit. Such determinants may go some way to explain a good deal of unhealthy and anti-social/criminal behaviour.

Some prevention responses already make use of unconscious processes, for example when using cognition bias modification training, social pressure in group-contingent rewards, or by changing opportunities and incentives within environments. These types of prevention strategies often face resistance from some sections of industry and from some professional groups, as they are sometimes rejected as paternalist, manipulative and unethical since they may undermine prevailing beliefs in the rational mind. I'm very pleased to be able to report that this year's EUSPR conference includes paper and poster presentations discussing topics from the ethical, neurobiological, developmental and implementation aspects of the theme, and exploring findings of research that have examined the effectiveness of such approaches.

Alongside the very exciting presentations, we also have a number of other initiatives taking place. The Science for Prevention Academic Network (SPAN) is holding its final annual meeting and its first major dissemination event. Furthermore, SPAN will, over the next months and year, be subsumed within EUSPR to ensure the continued progress and sustainability of the very strong platform that SPAN has built for Prevention Science Education and Training in Europe. I am very grateful to the SPAN partners and advisors who have worked hard on this initiative and who have supported the continuation of this work, once SPAN funding from the European Commission ends, under the auspices of EUSPR. The Education and Training Committee of EUSPR will be taking a lead on this and, importantly, will also be leading on another important development. The "open source" Universal Prevention Curriculum (UPC), developed by Zili Sloboda and colleagues at Applied Prevention Science, will be reviewed and adapted where necessary for use in Europe. Several EUSPR members, including early career prevention scientists, have already volunteered to help with this task.

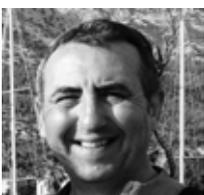
Talking of early career prevention scientists, I am also delighted that the Early Career Forum will formally be launched at this meeting with a special networking event. This initiative has been led by EUSPR Board Member Angelina Brotherhood and EUSPR Member Kimberley Hill, and the forum aims to facilitate networking and shared learning among those members of the EUSPR who are still in the early stages of their career. It offers the first European and interdisciplinary platform for early-career researchers, practitioners and policy-makers interested in prevention research. It is also good to see that EUSPR members are taking advantage of the meeting to host their own events and meetings, for example the European Communities That Care Project will be convening a meeting using one of the free slots made available by the conference organisers.

I am sure you will agree that Ljubljana is a beautiful venue for this meeting. Ljubljana is one of Europe's greenest and attractive capitals. It's great for visitors as most of the city's top attractions are clustered in a compact pedestrianised area around a bend in the pretty Ljubljanica River. The city's Old Town is centred around three squares (that are more like narrow, cobbled streets than squares) and includes Stari trg, lined with 19th-century wooden shop fronts, quiet courtyards and cobblestone passageways. At the city's heart is Prešernov trg, just a short walk from the Old Town across the famous Triple Bridge, with stunning architecture and also a monument to Slovenia's most famous poet, France Prešeren.

In recent years Slovenia has made positive steps and important improvements in the field of prevention science, supported by the Ministry of Health and the National Public Health Institute. A leading NGO, the Institute for Research and Development "Utrip", has been at the forefront of attempts in Slovenia to move prevention towards programmes and practices that are based on a strong theoretical background and with rigorous scientific evidence of effectiveness. Utrip is currently involved in the development of a prevention platform which will provide a selection of high-quality, evidence-based and effective prevention programmes, systematic incorporation of quality standards in prevention research, policy, funding, education, training and practice. Importantly, development of national guidelines and standards for prevention are foreseen in the new national drug strategy and action plan. As in many European countries, prevention science in Slovenia is emerging as a significant and useful field for social and health improvement.

I am sure that you will agree that this promises to be an exceptional meeting, in a great location, and demonstrating once again that EUSPR is at the forefront of Prevention Science in Europe. Our Annual Meeting is really the flagship event for our field, and for our Society, and the EUSPR Board is very grateful to Professor Harry Sumnall for his leadership of the Conference Organisation, to Stuart Smith for his enthusiastic and meticulous administrative support, and to Matej Košir and Sanela Talić for their tireless support with local organisation and logistics.

*Enjoy EUSPR. Enjoy the Meeting. Enjoy Ljubljana.*



**David Foxcroft**  
*EUSPR President*

A handwritten signature in black ink that reads "David Foxcroft". The signature is written in a cursive, flowing style.

## WELCOME FROM OUR CO-ORGANISERS

---

It is our great honour to host the 6th EUSPR Conference and Members' Meeting in our beautiful city of Ljubljana, the most beautiful in Europe according to a very popular quote of the mayor of Ljubljana. We are very pleased that this event broke all records (in numbers) of previous EUSPR conferences. It means this conference is clearly becoming a major event in Europe in the field of prevention and that Ljubljana and Slovenia are attractive destinations to visit as well. It is also noticeable that EUSPR is an important society that brings together not only world-renowned scientists and researchers in the field of prevention, but also, increasingly, policy- and decision-makers, programme developers, practitioners and early career preventionists from all around Europe and beyond.

Some of you know that we have tried for several years to bring this conference to Slovenia. We have been doing this primarily because we wanted to bring the event as close as possible to the Slovenian experts and practitioners in the field of public health, social welfare, youth etc. We wanted to bring to Slovenia some of the world's most renowned professionals in the field of prevention and allow our preventionists a better insight into the latest trends and innovations in this field of work. In these times of economic crisis, our experts and practitioners struggle to travel and participate in international conferences and other professional meetings abroad. We believe that we have succeeded as there have never been as many attendees from Slovenia (more than 30) in comparison to previous EUSPR annual events. We hope to continue this trend at the next EUSPR conference in 2016.

From the perspective of local organisations it hasn't been difficult to organise this event. In particular, because in addition to the organisation itself and socialising with old friends and colleagues, we see the conference as a great opportunity for accelerated and much improved development of the field of prevention in Slovenia. According to the OECD, the expenditure for prevention activities across most of Europe is no more than 3% of all health expenditure. Probably and unfortunately this is also the situation in Slovenia, and we want to take advantage of this conference in order to promote greater expenditure and funding opportunities for evidence-based and quality prevention in our country. In the midst of the economic crisis we are also struggling with significant financial challenges at our institute, Utrip, and we hope for a brighter future as authorities recognize our efforts in delivering evidence-based programmes, education and training. We would like to continue our work and we see this conference as an important step forward for us as well.

Even if you take only one new thing from the conference, it is worthwhile to participate. We are certain that you will take away a lot more than that.



A handwritten signature in blue ink, appearing to read 'Matej'.

**Matej Košir**

*Institute for Research and Development  
"Utrip" (UTRIP)*



A handwritten signature in blue ink, appearing to read 'Sanela'.

**Sanela Talić**

*Institute for Research and Development  
"Utrip" (UTRIP)*

## About our co-organisers



### **Utrip (Institute for Research and Development)**

Institute for Research and Development "Utrip" (UTRIP) is an internationally recognised non-governmental and non-profit research institute, based in Slovenia.

UTRIP aims to conduct research, develop, implement, monitor and evaluate the projects and programmes in the field of youth risk behaviour, addiction prevention, health promotion and healthy lifestyle. UTRIP is actively involved in the work and actions of several European and other international societies, networks and initiatives, such as the European Society for Prevention Research (EUSPR), the Science for Prevention Academic Network (SPAN), the Civil Society Forum on Drugs (CSF), the International Confederation of ATOD Research Associations (ICARA), the Club Health and IREFREA Network (nightlife-related prevention), the European Alcohol Policy Alliance (Eurocare), the European Alcohol Policy Research Alliance (AMPHORA) and the European Alcohol Policy Network (APN).

UTRIP was and still is involved in several European research and developmental projects, co-financed by the European Commission under the Health Programme, the Drug Prevention and Information Programme, the Justice Programme, the Daphne III Programme, the Lifelong Learning Programme and the 7th Framework Programme (FP7). UTRIP was the coordinator of the project "Club Health – Healthy and Safer Nightlife of Youth" which was co-financed by the European Commission (Health Programme). UTRIP is a national centre for school-based prevention programme EU-Dap ("Unplugged"), school-based prevention programme for parents "EFFEKT" and family-based prevention programme "The Strengthening Families Program". UTRIP leads a national network of NGOs in the field of prevention called "Prevention platform", which was funded by the European Social Fund and the Ministry of Public Administration of the Republic of Slovenia ([www.preventivna-platforma.si](http://www.preventivna-platforma.si)).

UTRIP's mission is to provide high quality development and implementation of evidence-based prevention programmes and research activities in the area of youth risk behaviour, addiction prevention, health promotion and healthy lifestyles. At the same time UTRIP also develops and provides education and training for professionals, researchers and volunteers who daily deal with issues of risk behaviour of children, adolescents, young adults and other high-risk population groups (e.g. training of health and social workers, teachers and other professionals in schools, educators, professionals and volunteers in NGOs etc.). UTRIP is a well-known and adamant advocate for better alcohol, tobacco and illicit drug policy, and implementation of minimum quality standards in the field of drug demand reduction at the European and national level.

More: [www.institut-utrip.si](http://www.institut-utrip.si)

### **Co-organised by:**



REPUBLIC OF SLOVENIA  
MINISTRY OF HEALTH

## About our Supporters



REPUBLIC OF SLOVENIA  
MINISTRY OF EDUCATION,  
SCIENCE AND SPORT

OFFICE OF THE REPUBLIC OF SLOVENIA FOR YOUTH

### **Ministry of Education, Science and Sport of the Republic of Slovenia, Office for Youth**

The Office of the Republic of Slovenia for Youth is a public authority responsible for the field of youth and realisation of the public interest in the youth sector at the national level. It is an independent body within the Ministry of Education, Science and Sport since 1991.

The responsibilities of the Office for Youth are specified in the Act on the Public Interest in the Youth Sector (ZJIMS) adopted in 2010. The National Programme for Youth was adopted in 2014 as the key strategic document comprehensively specifying the development of public policies intended for youth until 2020.

The Office for Youth issues a public call for the co-financing of the programmes of youth organisations and organisations for youth. In 2015 the programmes of 104 organisations of the public interest in the youth sector have been co-financed.

The total resources of the Office for Youth in the period 2012 – 2015 have remained almost unchanged. The youth policy effects have been strengthened by the resources from EU cohesion funds, which in 2014 amounted almost in 20% and in 2015 11% of all available funds of the Office for Youth.

In 2010, the youth communication and information centre [www.mlad.si](http://www.mlad.si) was established as a central point for information important and useful for the youth sector and youth.

The Office for Youth ensures that the youth sector in Slovenia is developing in accordance with the priority objectives of the youth policy at the European level. The European framework of cooperation in the field of youth is of key importance for the period until 2018.

Agenda 2020 is a strategic document on the future of the Council of Europe's youth policy and defines the priority areas for intergovernmental cooperation in the youth field.

#### *Contact information*

Ministry of Education, Science and Sport, Office of the Republic of Slovenia for Youth

W: [www.ursm.gov.si](http://www.ursm.gov.si)

The National Institute of Public Health (NIJZ) is the central Slovenian institution for public health practice, research and education. Its academic staff work on various tasks covering the areas of epidemiology of communicable and non-communicable diseases, health promotion, health protection, health system research and national coordination of preventive programmes in primary health care. It also functions as the central statistical authority in health. Although public health practice is not in the exclusive domain of a single type of organisation or profession, in Slovenia as in many other countries, the majority of important public health functions and services are provided by NIJZ.

The main function of NIJZ is to provide research in the field of health, protect and increase the level of health of the population by raising the awareness of population and carrying out other preventive measures. NIJZ's main activities are funded by the Ministry of Health and include national health statistics and research in the field of public health including health care systems; activities to identify health threats and design measures for their control; designing and providing health promotion programmes and preparing a scientific background for health-friendly policies, programmes and measures for disease prevention.

NIJZ is a public institute. Following legislation changes brought about by the Slovenian Health Services Act in 2013, the previous institution (also named the National Institute of Public Health) underwent organisational restructuring. From 2014 onward, NIJZ is organised as one central unit with nine regional offices.

NIJZ employs over 400 staff members.

NIJZ has successfully coordinated and participated in various international projects. NIJZ has also taken on the role of lead partner in three prominent EU-funded Joint Actions: EPAAC – European Partnership for Action Against Cancer, PARENT – Cross-border Patients' Registries Initiative and CANCON – Development of a European Guide on Quality Improvement in Comprehensive Cancer Control.

## About our collaborators



### **The Science for Prevention Academic Network (SPAN)**

The Science for Prevention Academic Network (SPAN), consisting of experts from 32 European institutions across 25 countries, has been awarded a large grant (€595,000) by the European Commission Lifelong Learning Programme (LLP). This grant enables the establishment of a network of prevention scientists and educators across Europe, who aim to: (1) Improve the integration of prevention science in the higher education sector and to improve skill mobility across Europe; (2) Develop and share best practice in prevention science education training and workforce and; (3) Support the development of innovative ICT based content for prevention science. The SPAN project will map the prevention science sector, improve education and training, build networks and run workshops with researchers, with a particular focus upon young researchers and early career preventionists. In addition, the project will contribute to the integration of prevention science in higher education across Europe and will provide recommendations on how best to align prevention science with the European Credit Transfer and Accumulation System (ECTS).



### **The Centre for Public Health at Liverpool John Moores University, UK**

The Centre for Public Health (CPH) is a vibrant research and teaching community working at a local, regional, national and international level. The organisation specialises in applied research and educational programmes addressing health issues at all levels from policy development to service delivery. CPH is committed to a multi-disciplinary approach to public health and works in partnership with health services, local authorities, judicial bodies, environmental services and community groups.

Influencing health service design and delivery, as well as health related policy, the Centre for Public Health's research has been at the forefront of the development of multiagency strategies to promote and protect public health. CPH turns information and data into meaningful and timely intelligence.



## **The State Agency for the Prevention of Alcohol-Related Problems, PL (PARPA)**

The State Agency for the Prevention of Alcohol-Related

Problems is a professional government-based institution created to construct the foundations of the state health care policy concerning the improvement of alcohol-related harm prevention, treatment, and public education in Poland. The Agency, established in 1993 as a specialized government agency subordinated to the Minister of Health, develops and presents expert opinions on draft laws and action plans in the field of alcohol policy.

The Agency provides support to the staff of addiction treatment institutions, cooperates with state and regional administration and provides specialized knowledge to several institutions and associations that are committed to the implementation of the National Program for the Prevention and Solving of Alcohol-Related Problems.

Polish system of prevention and solving of alcohol-related problems is considered to be one of the best in the world. Still, the Agency works to further develop it and make it even more effective. This is why it remains open to acquiring new partners across Poland and abroad and looks forward to the implementation of efficient and verified methods aimed at the reduction of negative social, health and economic consequences of alcohol use in Poland.

## Programme at a glance

### Pre-conference workshops – 21 October 2015

Workshops will run concurrently between 09:30 – 16:00. Registration from 09:00.

1. Introduction to systematic reviews. Convened by Geoff Bates & Angelina Brotherhood, Liverpool John Moores University (UK); University of Vienna (AT)
2. Analysing longitudinal data with hierarchical linear models and identifying subgroups in prevention research. Convened by Dr Ferdinand Keller, Ulm University Hospital (DE)
3. Writing for publication and publishing papers. Convened by Dr Kimberley Hill, University of Northampton (UK)

### Conference Day 1 – 22 October 2015

#### **EUSPR Members' Meeting**

09:30 – 10:00 Conference registration and welcome coffee (for Members' Meeting attendees only)

10:00 – 12:00 Members' Meeting

#### **EUSPR Early Careers Forum Launch and Networking Event**

To attend the launch event you must have previously booked.

11:30 – 12:00 Conference registration (for Forum launch event attendees who have not yet registered for the conference)

12:00 – 13:45 Early Careers Forum Launch and Networking Event (includes lunch)

Conference start – 12.00 on 22nd October 2015

### Conference Day 1 – 22 October 2015

#### **12:00 – 13:45 Conference registration and lunch for all delegates**

#### **14:00 – 15:00 Conference opening and salutation**

- Mrs Milojka Kolar Celarc, Minister of Health of the Republic of Slovenia
- Mr Peter Debeljak, MSc, Director of the Office of the Republic of Slovenia for Youth, Ministry of Education, Science and Sport
- Prof Dr Ivan Eržen, Director of the National Institute of Public Health of the Republic of Slovenia
- Prof David Foxcroft (EUSPR Board President & Oxford Brookes University, UK)
- Mr Matej Košir (Director of Utrip, SI)

#### **15:00 – 16:30 Plenary Session 1 – KARANTANIJA**

- Hugo Harper (Behavioural Insights Team, UK) – Automatic behaviour change in public policy and health
- Dr Esther K. Papiés (Institute of Neuroscience and Psychology and School of Psychology, University of Glasgow, UK; Dept. of Psychology, Utrecht University, NL) – Health goal priming Or: How to benefit from non-conscious motivational routes to health behavior

#### **16:30-17:30 Parallel Session 1 – Posters and drinks reception - KARANTANIJA**

## Conference Day 2 – 23 October 2015

### 09:30-10:30 Scientific Round Table – KARANTANIJA

- Prof Dr Reinout W. Wiers (University of Amsterdam, NL) – Assessing and Changing Implicit Cognitive Processes in Addiction: Implications for Prevention

### 10:30-11:00 Coffee Break

### 11:00-12:45 Parallel Sessions 2

- 2.1: Guiding policy and practice through prevention – KARANTANIJA
- 2.2: Institutions – GRAD
- 2.3: Healthy communities – LJUBLJANICA
- 2.4: Advances in prevention – CENTER

### 12:45-14:15 Lunch

We are pleased to announce that the Science for Prevention Academic Network (SPAN) are using the EUSPR meeting, including a SPAN sponsored lunch on the 23rd October, to disseminate and profile their work. This work covers mapping education, training, research and workforce for prevention science in Europe, the development of a quality plan for tertiary (University) level education, and a method for assessing prevention science education provision alongside the European Credit Accumulation and Transfer Scheme (ECTS).

### 14:15-16:00 Parallel Sessions 3

- 3.1: Optimising prevention outcomes – KARANTANIJA
- 3.2: Food and nutrition – GRAD
- 3.3: Post graduate and Early Career 1 – LJUBLJANICA
- 3.4: Substance Use – CENTER

### 16:00-16:30 Coffee Break

### 16:30-18:00 Plenary Session 2 – KARANTANIJA

- Dr Nick Axford (Dartington Social Research Unit, UK) – Are evidence-based programmes dead?
- Prof Paul van Soomeren (DSP-groep, NL) – Crime Prevention through Environmental Design: lessons learned

### 20:00 Conference dinner (prior booking required)

## Conference Day 3 – 24 October 2015

### 10:00-11:45 Parallel Sessions 4

- 4.1: Prevention policy and practice – KARANTANIJA
- 4.2: Alcohol – GRAD
- 4.3: Post graduate and Early Career 2 – LJUBLJANICA
- 4.4: Prevention development – CENTER

### 11:45-12:15 Coffee Break

### 12:15 – 13:00 Plenary Session 3 – KARANTANIJA

- Prim Dr Polonca Truden Dobrin (National Public Health Institute of the Republic of Slovenia) – Towards Better Health and Reducing Inequalities in Health – Changing the preventive health care for children and adolescents in Slovenia
- Prof David Foxcroft (EUSPR President & Oxford Brookes University, UK) – Prize giving and conference close

## Main Conference Close – 13.30 on 24th October 2015

## Plenary Speaker biographies

### **Plenary Session 1.1 – Hugo Harper**

*Behavioural Insights Team (UK)*

Hugo is a Senior Advisor in the UK's Behavioural Insights Team with a focus on Public Health Policy. As well as working closely with the Department of Health and Public Health England in the UK he has spent time in both Singapore and Australia developing the adoption of a more behavioural approach to policy design. Hugo holds an MSc, with distinction, in Behavioural and Economic Sciences from the University of Warwick, as well as a BA in Psychology and Physiology from Oxford University.

### **Plenary Session 1.2 – Dr Esther K. Papies**

*Institute of Neuroscience and Psychology and School of Psychology, University of Glasgow (UK); Dept. of Psychology, Utrecht University (NL)*

Esther K. Papies is a social cognitive psychologist studying the processes underlying the regulation of behaviour and behaviour change, especially in the domain of health. Her research uses mainly social cognition methods and focuses on the question of how behaviour is regulated as a function of environmental cues and personal goals. Esther received her PhD in 2008 at Utrecht University, and was awarded with the Dissertation Award of the Dutch Association of Social Psychological Researchers, the Early Career Award (Jaspars Award) of the European Association for Social Psychology, and a VENI-grant from the Netherlands Organization for Scientific Research. Esther worked as an Assistant and then as an Associate Professor in the Department of Psychology at Utrecht University, before joining the University of Glasgow in 2015.

Esther's current research further develops our understanding of nonconscious processes in self-regulation. She studies how simulating earlier rewarding experiences contributes to desire, and to failures of self-regulation. She is developing tools to prevent unhealthy environmental influences on desire and behaviour, such as the portion size effect. Finally, she integrates insights from contemplative science to develop mindfulness approaches for dealing with desire. Esther has published widely on all these topics, see <http://papies.socialpsychology.org> for downloading selected publications.

### **Scientific Round Table – Prof. Dr. Reinout W. Wiers**

*University of Amsterdam (NL)*

Reinout Wiers is Professor of Developmental Psychology & Faculty Professor of Social Sciences, University of Amsterdam. His research focuses on better understanding the (neuro-) cognitive processes involved in the aetiology of addiction and related disorders and to use this knowledge to develop new interventions. Professor Wiers has published over 200 papers and chapters on this topic and together with colleagues has developed the alcohol-related approach avoidance task (AAT) as a novel measure of automatic, implicit appetitive tendencies toward alcohol (Wiers et al, 2009). Based on the AAT, Prof Wiers has developed automatic action tendency retraining as an intervention designed to decrease alcohol consumption in students (Wiers et al., 2010), and increase abstinence in alcoholic patients (Wiers et al., 2011; Eberl et al., 2013). This work has also been recently extended into web-based interventions (Wiers et al., 2015). Reinout co-edited the Handbook of Implicit Cognition

and *Addiction* (SAGE, 2006) and is senior editor of the prime journal on substance abuse (*Addiction*) and serves on the editorial board of several other addiction journals.

Further information on Prof Wiers' work can be found at:

<http://scholar.google.co.uk/citations?user=2vKDTuoAAAAJ&hl=en>

### **Plenary Session 2.1 – Nick Axford**

*Dartington Social Research Unit (UK)*

Nick is a Senior Researcher and Head of What Works at the Dartington Social Research Unit. He leads a team that focuses on identifying effective interventions to improve child well-being through a combination of evidence reviews and evaluations (mostly randomised controlled trials).

Nick joined DSRU in 1997. He has been Co-Editor of the *Journal of Children's Services* since 2006 and is a member of the Early Intervention Foundation Evidence Panel and an Advisor to the Board of the European Society for Prevention Research.

He holds a BA(Hons) in Geography with European Study, an MSc in European Social Policy Analysis, and a PhD in Social Work and Probation Studies. Nick is a recipient, with Tim Hobbs, of the Kamerman and Khan Award from the International Society of Child Indicators.

### **Plenary Session 2.2 – Prof Paul van Soomeren**

*DSP-groep (NL)*

Paul van Soomeren (1952) is one of the founders and CEO of the Amsterdam based research and consultant bureau DSP-groep which has a staff of about 50 academically qualified people. Paul van Soomeren works as management consultant and policy researcher for national and international governments and institutions.

He is director of the board of the International CPTED Association (crime prevention through environmental design; [www.cpted.net](http://www.cpted.net)) and the European as well as the Dutch Designing Out Crime Association. In that capacity he travels all over the world to lecture on these subjects.

Areas of expertise include urban planning and design, crime prevention, safety/security, education, social management and welfare/health issues mainly on the neighbourhood level. For several years Paul has chaired the CEN/TC325 working group which designed the first general standard on the prevention of crime and feelings of urban insecurity by urban design and planning (CEN standards in the series 14383). Paul is member of the Management Committee of the EU COST action TU 1203 on crime prevention through urban design and planning (<http://costtu1203.eu>) and he is visiting professor of the Adelphi Research Institute of the University of Salford (UK, Greater Manchester).

Paul studied Social Geography, and Urban and Regional Planning at the University of Amsterdam. He worked for the Dutch Ministries of Justice and Interior Affairs (National Crime Prevention Institute) for three years before he founded DSP-groep in 1984.

### **Plenary Session 3 – Prim. Dr Polonca Truden Dobrin**

*National Public Health Institute of the Republic of Slovenia*

Prim. Dr. Polonca Truden Dobrin is a medical doctor, specialist in epidemiology and public health at the National Institute of Public Health. She obtained her Master of Science in Epidemiology at London School of Hygiene and Tropical Medicine. Her main areas of work: Activities related to child public health in particular to preventive health care services, health services research, population health monitoring, methodology of health and health care statistics, development of routine data sources, analyses and reporting of health and health care data. Supervision of medical doctors on specialisation in public health and teaching responsibilities in specialisation programme in public health and paediatrics. Preparation of project proposals, collaboration in projects financed by DG Sanco, DG Research and Norwegian Financial Mechanism.

Currently she is involved in planning and coordination of health activities, projects and policies. She is leading the working group on preventive programme for children and adolescents in Slovenia including screenings and health checks and promoting settings-based approaches to health improvement. The group have conducted comprehensive health needs assessment to inform changes in preventive care and workforce development.

She is a member of the EVIPNet working group for Slovenia. She has participated in the situation analysis and is currently involved in the preparation of evidence brief for policy on primary health care development and financing.

She is a country agent for MOCHA project on comparison and appraisal of existing national models of primary care for children in European countries, bringing together multi-disciplinary and multi-stakeholder views, to identify and promote the most effective approaches to prevention, primary care and equity of access.

She is a member of the national coordination group for the Diabetes control strategy and action plan. She participated in the estimation of diabetes type II cases in Slovenia using routine data system on drug prescription.

Prim. Dr. Truden Dobrin was previously the head of Centre for Population Health Research. She was involved in monitoring inequalities in health and led the group that published on inequalities. Their work led to many initiatives and projects in this important area.

# FULL PROGRAMME

---

## Conference Day 1: THURSDAY, OCTOBER 22ND

### **09.30-12.00 EUSPR Members' Meeting**

- 09:30-10:00 Registration for EUSPR Members Meeting attendees
- 10:00-12:00 EUSPR Members Meeting

Location: KARANTANIJA

### **11:30-12:00 Registration for Early Career Forum participants**

Conference registration (for Forum launch event attendees who have not yet registered for the conference)

### **12:00-13:45 Early Careers Forum Launch and Networking Event**

Early Careers Forum Launch and Networking Event (includes lunch)

### **12:00-13:45 Conference registration and lunch**

Main conference registration and lunch (free to all attendees)

### **14:00-15:00 Conference opening and salutations**

- Mrs Milojka Kolar Celarc, Minister of Health of the Republic of Slovenia
- Mr Peter Debeljak, MSc, Director of the Office of the Republic of Slovenia for Youth, Ministry of Education, Science and Sport
- Prof Dr Ivan Eržen, Director of the National Institute of Public Health of the Republic of Slovenia
- Prof David Foxcroft (EUSPR Board President)
- Mr Matej Košir (Director of Utrip, SI)

Location: KARANTANIJA

## 15:00-16:30 Plenary Session 1

Chair: **Professor Rosaria Galanti (Karolinska Institutet, SE)**

Location: KARANTANIJA

**Hugo Harper**

### 1.1: Automatic behaviour change in public policy and health

Governments around the world are increasingly turning towards a more nuanced understanding of human behaviour to inform policy design and implementation. A notable shift is the growing appreciation that the vast majority of human behaviour is not guided by deliberative conscious decision making, but occurs through a much more automatic process. This is particularly true for many of the health related behaviours that are putting health budgets under strain across Europe. This talk will cover how the use of these insights has grown from simple changes to communications to attempting to tackle some of the most complex current policy problems.

**Dr Esther K. Papies**

### 1.2: Health goal priming Or: How to benefit from non-conscious motivational routes to health behavior

Although we have long assumed that attitudes and intentions are crucial predictors of behavior, accumulating research suggests that the influence of these factors is often limited. Instead, much of our behavior is driven by nonconscious processes, such as habits, norms, and nonconscious motivational processes, which can be triggered by cues in the environment. This has important implications for understanding population health behavior, as well as for interventions to change it. In this talk, I will focus on nonconscious motivational processes, and I will discuss the use of priming techniques to facilitate motivated healthy behavior outside of conscious awareness. A series of experiments in the domain of eating behavior demonstrates how subtle reminders (i.e., primes) of health and dieting goals can lead to healthier shopping behavior, reduce unhealthy intake, stimulate healthy menu choices, and reduce the portion size effect. Importantly, these effects occur mainly among participants who are motivated to pursue health and dieting goals, suggesting that the primes tap into existing motivational structures and thus help people pursue behaviors that they personally value. These findings are in line with research on goal priming more generally, and I will suggest routes to systematic applications in other domains. Finally, I will discuss this approach in relation to other interventions to modulate impulsive behaviors, as well as recent developments such as nudging and re-designing tempting environments.

## 16:30-17:30 Parallel Session 1: Posters and complimentary drinks reception

Location: KARANTANIJA

### 1 **Orte Carmen, Ballester Lluís, March Martí, Pascual Belén, Vives Marga and Maria Antonia Gomila**

#### MEASUREMENT OF THE QUALITY OF IMPLEMENTATION OF THE SPANISH SFP 7-12: CONSTRUCTION AND VALIDATION OF A SCALE OF SATISFACTION.

PRESENTER: **Maria Antonia Gomila**

Introduction: Participants are an important source of information about the quality of the applications of family prevention programs. Satisfaction of participants plays a role in the program results, and these are dependent, among other factors, on the quality of the implementation of the sessions. Our hypothesis is that there is a direct relationship between satisfaction of participants and the achieved results. The aim of this study is to validate a satisfaction scale for users of a selective family prevention program, the Family Competence Program (FCP), the Spanish adaptation of the SFP. Verifying the dimensions implied in the satisfaction of participants allows to improve the processes of the program and to promote the prevention component of FCP.

Methodology: Statistic description of the principal dimensions of satisfaction scale and confirmatory factorial analysis with family vulnerability index (employment situation, education level and structure of the family cohabitation). Sample: 155 families at risk. Differentiated analysis depending on the implementation agency: drug treatment program Proyecto Hombre (N=63) and social care services (N=92). Scale divided in 4 dimensions: 1. Compliance of the program (attendance, performance tasks...). [0 to 14 points] 2. Evaluation of the facilitators (competence, preparation of the session...). [0 to 5 points] 3. Evaluation of the materials and sessions (quality of materials, incentives, rooms...). [0 to 5 points] 4. Evaluation of the changes into the family (assessment of the communication with children, resolution of problems, organization, family performance...). [0 to 5 points]

Results: Regarding assessment of the FCP, for instance, the mean of compliance of the program is 12,534 (SD=1,694) in the drug treatment program. In social services, the mean is 11,155 (SD=2,63). About the correlation of the assessment of the SFP and the Family Vulnerability Index: compliance of the program (drug treatment program  $Rho=0,034/p=0,987$ ; social services  $Rho=-0,086/p=0,513$ ); evaluation of the facilitators (drug treatment program  $Rho=0,228/p=0,086$ ; social services  $Rho=-0,092/p=0,407$ ); evaluation of the materials and sessions (drug treatment program  $Rho=0,239/p=0,071$ ; social services  $Rho=-0,005/p=0,963$ ); evaluation of the changes into the family (drug treatment program  $Rho=0,144/p=0,281$ ; social services  $Rho=0,005/p=0,965$ ).

Conclusions: 1. Good levels of compliance of the SFP/FCP 7-12, very good rating of facilitators (4.42 in Proyecto Hombre sample and 4.55 in social services sample) and the materials and sessions (4.41 and 4.47 respectively). 2. Long-term changes (24-month perspective) into the family dimension obtained positive results (7.9 out of 10 in Proyecto Hombre sample and 8.2 out of 10 in Social Services sample). 3. Positive correlation between evaluation of the facilitators and evaluation of the materials and sessions with family vulnerability index in Proyecto Hombre sample. 4. Family vulnerability index is not associated with different ratings of the SFP/PCF 7-12.

2

**Tina Van Havere**

## **"KEEP AN EYE ON YOUR FRIENDS, EVEN WHEN YOU DON'T KNOW THEM"**

PRESENTER:

**Tina Van Havere**

The use of illegal drugs is well documented in some alternative, underground music scenes, like the Goa trance scene. The aim of this paper is to explore harm reduction practices employed by attendees of the Goa trance scene in order to identify potential pathways for targeted interventions in (underground) music scene such as Goa trance. Following pilot observations at Goa parties, in-depth interviews were conducted with 19 Goa party attendees in Belgium. Respondents were recruited using snowball sampling methods. Findings: Participants reported that solidarity is apparent in the Goa trance scene and is an important variable in minimizing drug-related harm, particularly with respect to providing help and support to people in need (communitarian values). On the other hand, personal controls on drug consumption were also employed to minimize harm, such as buying drugs from trusted people, trying to keep drug use limited to weekends and adhering to one's own limits (neo-liberal values). Conclusions: A combination of communitarian and neo-liberal values were employed by drug users in the Goa trance scene in Belgium, and this offers several options for new harm reduction efforts. Approaching drug users as active citizens and useful resources is a useful way of informing the development of innovative harm reduction strategies. Evaluating enabling resources in settings where drug use occurs, will provide additional pathways to harm reduction policies and programs.

3

**Mimmi Eriksson Tinghög and Helena Löfgren**

## **CHALLENGES IN COLLECTING, INTERPRETING AND COMPILING SCIENTIFIC RESULTS ON CANNABIS USE AND PHYSICAL, PSYCHOLOGICAL AND SOCIAL CONSEQUENCES**

PRESENTER:

**Mimmi Eriksson Tinghög**

The Public Health Agency of Sweden aims to promote good public health by building and conveying knowledge to professionals. The methods on how to build knowledge is evolving towards becoming more systematic and transparent. The agency has identified a need to provide professionals with updated and evidence-based knowledge on the harms of cannabis use, which is a prerequisite for prevention. The aim of this project is to collect, interpret and conclude the best available knowledge on cannabis use and adverse physical, psychological and social consequences.

In line with the new demands on how to compile knowledge, an overview of systematic reviews will be performed. PICO-questions and inclusion and exclusion criteria were set up and a systematic search of cannabis use and a number of identified possible outcomes was performed in three databases. The reviews will be assessed for relevance and then quality using the AMSTAR tool.

There are a number of challenges and possible problems related to both the method per se (e.g. bias problems due to several reviews referring to the same studies, lack of systematic reviews for a certain outcome). In addition, there will be challenges related to both the interpretation of results and writing conclusions especially in an area where controversies, inconsistencies and disputes continue to be strong. The poster will focus on these methodological issues in order to share experiences with others to improve the quality of this study. This is an ongoing work at the agency and the results will be available early 2016.

**EVALUATION OF "CHOICE-8" EFFECT IN A YEAR AFTER IMPLEMENTING THE SUBSTANCE ABUSE PREVENTION PROGRAM***PRESENTER:***Valeriy Ryabukha**

Introduction: "Choice-8" is a drug misuse, HIV/AIDS and crime prevention program for eighth-graders (13-14 years old students). It consists of ten sessions and includes five brief thematic documentaries: "Responsible Choice", "Risks", "Be Aware of Crime", "HIV/AIDS: Challenge and Response", "Your Future", "Norms of Behavior". It is conducted by certified trainers who are volunteers recruited among Pedagogical University freshmen, cadets of the Law College of the Penitentiary Service of Ukraine, juvenile delinquency police officers, social teachers and psychologists. In the academic year of 2013-2014, the program was implemented in 11 schools of Chernihiv and three schools of Odesa, Ukraine. A pre survey was conducted in October 2013 among 817 students. In February 2014 a post survey was carried out among 415 eighth-graders of the intervention group and 397 students of the control group. The surveys showed 12.8% use of alcohol and 14.2% tobacco use for the intervention group while for the control group there was 19.6% alcohol and 21.4% tobacco use. The goals of the current research project are to measure the longer-term effect of the "Choice-8", as well to conduct a booster session. Methods: In October 2014 a follow-up survey was conducted in three schools of Chernihiv among 180 ninth-graders, half of which benefited of the "Choice-8" a year ago and another half constituted the control group. All of the students responded 12 questions of a questionnaire designed to find out the longer-term effect of the "Choice-8". One of the questions aimed to measure tolerance to PLWH (People Living with HIV): "Are you ready to make friends with a person living with HIV?". A booster session and the documentary, "Responsible Choice", were offered for the intervention group after the October 2014 survey was carried out. The session included issues from all ten themes of the "Choice-8". Results: The follow-up survey indicated that for the intervention group 16.2% students used alcohol and 17.5% ninth-graders used tobacco at least one time in the last 30 days; 82% students were ready to make friends with PLWH. For the control group, 23.5% students used alcohol and 27.8% ninth-graders used tobacco in the last 30 days; 54% students were ready to make friends with PLWH. Conclusion: The findings demonstrate a lasting effect of the "Choice-8". To measure subsequent effects of the program as well efficacy of the booster sessions, the research project will be continued in schools of Ukraine.

5

**José P. Espada, María T. González, Alexandra Morales and Mireia Orgilés**

## PARENTAL CONTROL PERCEPTION ON ALCOHOL-INFLUENCED SEXUAL ENCOUNTERS IN SPANISH ADOLESCENTS

PRESENTER:

**María T. González**

It is estimated that countries with many citizens in the lower socioeconomic level have a burden of disproportionate morbidity due to alcohol use. Spain is the second European country with the highest poverty rate. Parental style moderates adolescents' alcohol use, but no data is available to show this relationship in the poor population. This study examines the effect of parental control perception on alcohol use among 13- to 17-year-old adolescents with low-income families in Spain. A total of 523 adolescents with low-income families were eligible for the study. The sample was recruited from 18 high schools located in areas in the north, south, east and southeast of Spain. The average age was 14.96 (SD = 1.12), and 49% were males. Of the adolescents having sex under the influence of alcohol, most of them (80.3%) perceived that their parents have a low or moderate-low control on them ( $\chi^2=19.99$ ,  $p= 0.001$ ). Binary logistic regression revealed a lesser risk of having sex under the influence of alcohol in adolescents who perceived that their parents are quite strict (OR:0.10 [0.29-0.39]) or a bit strict (OR:0.23[0.08-0.67]) compared to those whom parents were very strict. Perceiving that their parents are not strict or very strict was related to a higher likelihood of combining sex with alcohol. Drug-prevention interventions targeted toward parents from lower socio-economic communities should emphasize the importance of having moderate control on their adolescents, and promote family-communication as a strategy to prevent risky behaviors in their adolescents.

Financial Support: Foundation for Research and Prevention in Spain (FIPSE 360971/10) and Vali+D program of the Department of Culture, Education, and Science, Valencian Community Government (ACIF/2012/132).

6

**María T. González, José P. Espada, Mireia Orgilés and Alexandra Morales**

## PREVALENCE OF ADDICTIVE BEHAVIORS AMONG SPANISH ADOLESCENTS AND ITS CORRELATION WITH SUBSTANCE USE

PRESENTER:

**María T. González**

A variety of behaviors have come to be considered as addictions. Substance addictions pertain to excessive intake of substances such as drugs or food, whereas behavioral addictions pertain to engaging in behaviors. In Spain, there are not behavioral addictions studies among adolescents. The aim of this study was to examine the prevalence of addictive behaviors among Spanish adolescents and gender differences. The sample consisted of 810 Spanish adolescents from nine secondary schools, aged between 14 and 19 years old ( $M = 15.28$ ;  $SD = 1.20$ ). The evaluation was conducted through a multi-response addiction matrix measure (ever and past 30-day addiction categories). The categories were: cigarette smoking; alcohol drinking; marijuana use; other drugs (such as cocaine, stimulants, inhalants or others); eating; gambling; Internet browsing; Facebook, Twitter, Messenger, or other online social networking; online or offline videogames; online shopping; shopping at stores; love; sex; exercise; work; stealing; religions; self-mutation; gossip. Adolescents perceive more addiction to online social networking (50.6% ever; 39.1% past 30-day), and to exercise (37.9% ever; 29.1% past 30-day). Less perceived addictive activities were stealing (2.2% ever; 0.5% past 30-day), and online shopping (2.9% ever; 2.3% past 30-day). Online social networking correlated significantly with cigarette smoking ( $r = .19$ ;  $p < .001$ ), alcohol drinking ( $r = .34$ ;  $p < .001$ ), and other drug use ( $r = .540$ ;  $p < .001$ ). Exercise addictive behavior correlated significantly with cigarette smoking ( $r = .83$ ;  $p < .05$ ) and other drugs ( $r = .530$ ;  $p < .001$ ). This research was supported by the Spanish Ministry of Economy and Competitiveness (PSI2011-26819).

7

**María T. González, José P. Espada, Mireia Orgilés, Alexandra Morales and Steve Sussman**

## ALCOHOL AND TOBACCO CONSUMPTION AND PEER GROUP IDENTIFICATION IN A SAMPLE OF SPANISH ADOLESCENTS

PRESENTER:

**María T. González**

Adolescents tend to name and segregate themselves into different types of peer groups, which delineate lifestyle characteristics. Several studies have found that peer group identification is related to problem prone behaviors, such as substance use. One notable limitation is that group self-identification cannot operate the same way in all countries, but there are no studies that have been conducted in Spanish adolescents. The aim of the present study was to assess the universality of group self-identification and to explore the relation between self-identification and tobacco use. The sample consisted of 711 Spanish adolescents from nine secondary schools, aged between 14 and 19 years old ( $M = 15.28$ ;  $SD = 1.20$ ). The evaluation was conducted through a self-identification item with an open-ended response, and items to assess alcohol and tobacco consumption were included. Non-smoker's ( $n = 494$ ) highest percentage belonged to the Athletes (37.45%), and, to a lesser extent, to the Emos (0.4%). Regarding smokers ( $n = 217$ ), the highest percentage was identified with Regular group (38.7%), and lower identifying groups were Goths, Heavy metals (rockers), and Grunges (0.46%). Those who had never consumed alcohol ( $n = 183$ ) were identified in a greater percentage with Athletes (34.25%), and a lower identifying group was Goths (0%). Those who have ever used alcohol ( $n = 528$ ) were identified with Regular group (38.63%), and a lower identifying group was Grunges (0.37%). This study supports the use of group self-identification as a construct to understand adolescent risky behavior in Spain. This research was supported by the Spanish Ministry of Economy and Competitiveness (PSI2011-26819).

8

**Alba González-Roz, Irene Pericot-Valderde, Víctor Martínez-Loredo, Sara Weidberg and Roberto Secades-Villa**

## RELAPSE PREVENTION OF SMOKING: CLINICAL PREDICTORS OF OUTCOME

PRESENTER:

**María T. González**

Relapse to smoking after initial successful abstinence remains a major treatment concern. Therefore, identifying predictor factors that determine whether or not successful quitters become long-term quitters is essential for improving treatments for smoking cessation. This study aimed to identify predictors of smoking relapse among individuals who successfully quit. Methods. This secondary data analysis combined data from two clinical trials for smoking cessation. Both studies involved cognitive-behavioral treatment for smoking cessation alone or combined with either contingency management (CBT + CM) or cue exposure treatment (CBT+CET). Participants ( $N=188$ ) were followed up for 6 months post-cessation to measure their smoking status. Variables examined as potential predictors of smoking relapse were: (1) sociodemographic characteristics: gender, age, marital status, education level and employment status; (2) smoking-related characteristics: duration of daily smoking, cigarettes per day, previous quit attempts and severity of nicotine dependence; (3) psychological characteristics: depressive symptoms, impulsivity and anxiety. Multiple logistic regression analyses using stepwise method were conducted to detect predictors of smoking relapse. Results. Relapse to smoking was associated with younger age [odds ratio (OR): 0.9; 95% confidence interval (CI): 0.94-0.99] ( $p = .025$ ), higher scores on FTND (OR: 3.32; 95% CI: 1.59-6.90) ( $p = .001$ ), more previous quit attempts (OR: 5.18; 95% CI: 1.15-23.41) ( $p = 0.03$ ) and greater impulsivity (OR: 0.15; 95% CI: 0.30-0.78) ( $p = .025$ ). Discussion. These results showed that successful quitters with certain characteristics are in higher risk of relapse, suggesting that those factors should be taken into account while conducting smoking cessation interventions.

**9** **Víctor Martínez-Loredo, Sergio Fernández-Artamendi, Olaya García-Rodríguez, Carla López-Núñez and José Ramón Fernández-Hermida**

**ONE YEAR PROSPECTIVE ASSOCIATION BETWEEN IMPULSIVITY AND DRUG INVOLVEMENT AMONG ADOLESCENTS**

**PRESENTER:** **Víctor Martínez-Loredo**

Impulsivity is a key variable for risk behaviors which can be assessed through behavioral tasks or self-reports. As far as adolescence is a critical period in relation with substances use, to find early predictors of drug involvement is an important outcome for prevention. The aim of this study is to assess impulsivity as a predictor of drug involvement among adolescents. Sample was compound by 999 adolescents (mean age 13.11, SD = 0.57) without alcohol use from 22 Spanish High schools. They performed both behavioral task (Delay Discounting, DD) and self-reports (Barratt Impulsiveness Scale, BIS, and Impulsive Sensation Seeking, ImpSS) and were re-assessed one year later. Impulsivity measures were the Area Under the Curve (AUC) for the DD, and Total Scores for the BIS and ImpSS subscales. Drug involvement at the second wave was assessed through: last month prevalence of alcohol, tobacco and cannabis use, intoxication episodes and DSM-5 criteria for Alcohol Use Disorder. Logistic regressions were performed to assess the prospect association. Regarding DD, AUC predicted intoxication episodes ( $p < .05$ ) and AUD criteria ( $p < .05$ ). In relation with self-reports, BIS and SS predicted intoxication episodes ( $p < .05$ ;  $p < .001$ ) and AUD criteria ( $p < .05$ ;  $p < .001$ ). SS predicted also last month prevalence of tobacco and alcohol use ( $p < .001$ ) and Imp last month prevalence of cannabis use ( $p < .05$ ). In summary, self-reported impulsivity seems to be more useful to predict substance use than behavioral tasks. However, DD appears as a suitable task to predict intoxications episodes and AUD one year later among early adolescents who have not try alcohol yet. These results could be useful when designing strategies for preventing drug involvement among adolescents.

**10** **Anna Strandberg, Johanna Gripenberg, Tobias Elgán and Magnus Jägerskog**

**ATTITUDES TOWARDS ALCOHOL PREVENTION AND PRESENCE OF ALCOHOL POLICIES AT SWEDISH STUDENT UNIONS**

**PRESENTER:** **Anna Strandberg**

Introduction: High alcohol consumption among young adults in Sweden is of great concern. About half of all young adults in Sweden are university students and a high alcohol consumption is common among this group. This makes the student unions a potentially important arena for alcohol prevention. Currently, not much is known about attitudes towards alcohol prevention and to what extent Swedish student unions have written alcohol policies. Aim: To explore attitudes regarding alcohol consumption and prevention among student union representatives, to investigate the presence of written alcohol policies at Swedish student unions, and explore factors possibly associated with the existence of such policies. Method: During November/December 2014, representatives from all student unions in Sweden ( $n=61$ ) were invited to participate in a web questionnaire survey, and data were obtained from 51 student unions. Results: A majority (93%) reported positive attitudes towards alcohol prevention. 88% believed that alcohol consumption has positive aspects in the social life of students, while also recognizing that alcohol consumption can be a problem (92%). 81% of the student union representatives reported that they had a written alcohol policy. Unions that arranged pubs more often, were more likely to have a policy ( $p < .004$ ). Conclusion: The respondents were aware of the negative health impact of high alcohol consumption, and also reported positive attitudes towards alcohol prevention in the student union setting. Adding the fact that a majority of the student unions had written alcohol policies, this suggests that the student union setting is a promising arena for alcohol prevention.

**'WE DON'T GET TAUGHT ENOUGH.' EXPLORING THE NEED FOR A NEW APPROACH TO DRUG EDUCATION IN SCHOOLS.***PRESENTER:***Jamila Boughelaf**

Between 2011 and 2013, Mentor conducted two investigations that explored the views of young people and teachers on the provision of drug education in schools in England. These studies formed the basis for the development of the Alcohol and Drug Education and Prevention Service (ADEPIS), which was designed to address the needs identified by research participants. This paper synthesises the commonalities between experiences of teaching and learning, and also presents key learning from the practical implementation of ADEPIS; in doing so, it draws conclusions for policy and practice relating to school-based drug education and, more broadly, Physical, Social, Health and Economic (PSHE) education.

The paper incorporates two separate studies: a survey of 590 secondary school pupils in London that explored the collective experience among recipients of drug education; and a survey of 288 teachers in primary and secondary schools throughout England, which was supplemented by twenty in-depth interviews. The analysis thus provides professional insight on the current status of drug education provision, as well as fulfilling the need to represent the voices of young people in wider discussions around the subject.

In making recommendations for policy and practice, the paper also draws on learning from the practical implementation of ADEPIS. There is a need for more rigorous evaluation of outcomes in schools that have adopted ADEPIS, especially in comparison with schools that have developed drug education practice independently; however, initial findings suggest that, by providing a trusted source of evidence-based guidance, the service has provided a strong framework to address the gaps in support for teachers, enabling them to deliver quality drug education.

The paper highlights several key areas for improvement in school-based drug education, with implications for national policy, particularly in relation to the statutory status of PSHE, subject-specific teacher training and the need for central guidance. Further, by presenting initial findings from the implementation of ADEPIS, the paper presents a potential framework for addressing the lack of central guidance and equipping teachers with the knowledge and understanding to deliver quality drug education.

12

**Viktor Watz**

## PREVENTION IN THE 21ST CENTURY - REDEFINING THE DISCOURSE OF SUBSTANCE USE IN YOUNG PEOPLE

PRESENTER:

**Viktor Watz**

Evidence shows today that the traditional education programs targeting young people for substance use prevention are ineffective, often costly and sometime counterproductive. Behavioural psychology and other disciplines have shown that young people value more what they stand to "gain" from using harmful substances, than what they stand to lose due to consumption of those substances. In societies where the marketing of alcohol, to name just one substance, is so pervasive as in most Western countries, traditional prevention programs do not stand a chance to reach their goals of changing attitudes and behaviour of young people.

In this context we would like to present a different and innovative approach to substance use prevention. We call the approach Fake Free.

Fake Free is inspired by award-winning prevention programs from Sri Lanka and has been adapted to the Western culture and substance use norms in Europe. The Swedish Public Health Institute funded a pilot project to test and roll-out Fake Free and IOGT International is now spreading the approach to other countries.

The Fake Free approach starts from the premise that it is not the knowledge about harm associated with substance use that changes behaviour and prevents youth substance use. Fake Free starts the conversation by addressing why young people choose to use substances, what they hope to gain from it and how it makes them feel about themselves and others.

In this way, Fake Free increases the literacy of young people about commercial communication, and empowers them to think critically about the alcohol norm and the expectations associated with the use of substances like alcohol.

As our tools we use clinical research, empirical data, psychology, sociological observations and interactive social games. The Fake Free approach will fundamentally change the way young people think about substance use, the drunken compartment, prevention and party.

13

**Marie Hamsany, Corinne Roehrig, Karol Kumpfer, Enguerrand Du Roscoät and Pierre Arwidson**

## PSFP: A FRENCH ADAPTATION OF THE STRENGTHENING FAMILIES PROGRAM 6-11

PRESENTER:

**Marie Hamsany**

Kumpfer's Strengthening Families Program (SFP) has been identified by scientific literature reviews and scientific institutions as an effective family-based program to prevent alcohol, tobacco and drugs consumption as well as improving mental health in youth and family communication. Initially evaluated in USA, the program has been adapted and evaluated in many countries. The aim of this communication is to briefly introduce the adaptation, implementation and evaluation of SFP 6-11 in France. A French team has made a language and cultural adaptation of the SFP 6-11 for the general population and has developed a partnership with cities for its implementation. An evaluation of the acceptability and feasibility of SFP has been followed by a first pilot study in 4 towns of Southern France. A video on DVD has been created to help families with poor reading abilities and be used as booster sessions after the program. A working group with different scientific and professional backgrounds has been set up to evaluate the SFP program. A literature review on SFP and other prevention programs aimed at 6-11 years old children has been undertaken. The outcomes measures in the literature included social and psychological skills, parental competencies, family relationships and mental health indicators. Analysis of the pilot study's data and qualitative interviews with parents and facilitators revealed other impacted factors such as relationships between parents and school or perceived social support. A cluster randomized controlled trial in 20 towns each including 20 families (approximately 400 families) will be undertaken, the family being the unit of randomization. The families will be randomized in one of the two arms of the trial, SFP intervention group or control group. The trial's primary outcome will be the children's behavioral and emotional problems (using the SDQ scale). The evaluation measurement will take place before and after the program, with a follow-up at 6 and 12 months.

14

**Roman Gabrhelík and Michal Miovský**

## ON-LINE SYSTEM FOR REPORTING SCHOOL-BASED PREVENTION INTERVENTIONS

PRESENTER:

**Roman Gabrhelík**

In the Czech Republic, there is no integrated record-keeping system to account for prevention activities that are implemented in schools and educational facilities. We introduce an online system for reporting preventive activities carried out in a school as part of the Minimum Preventive Program (MPP) and other prevention-specific interventions during one academic year. The reporting system (RS) is an on-line working environment which provides the technical infrastructure required to enter and register information about school-based preventive activities. The data to be reported is divided into seven subject areas. The RS is primarily intended for school prevention specialist or other members of staff appointed to coordinate the prevention of risk behaviors in a school/ educational facility. The rationale for this reporting system (RS) is to unify the content, scope, and method of record-keeping applied to preventive activities carried out in Czech schools, to introduce a standardized form for reporting preventive activities, to provide schools with a resource which can be helpful in (self-) evaluating their preventive activities, and to collect information about the state of school-based prevention which can be used to plan and promote the further development of preventive efforts at the national level. The RS could also be used while conducting experimental studies as part of monitoring intervention(s) fidelity, e.g., monitoring competing interventions that may have a major impact on the effectiveness of the intervention under study.

15

**Camilla Jalling and Johanna Gripenberg**

## STAFF TRAINING TO PREVENT ADOLESCENT CANNABIS USE

PRESENTER:

**Camilla Jalling**

**Introduction.** In the beginning of the 2010s there was an increase of illicit drug use among adolescents in Stockholm, Sweden, and cannabis was the most frequently used drug. Consequently, the Ministry of Health and Social Affairs funded the social services in Stockholm to develop and implement prevention strategies to decrease cannabis use among adolescents. A cannabis information based training program targeting municipality staff working with adolescents was developed, consisting: today's cannabis situation based on facts and trends; usual myths; harmful effects; prevention and policy work; and signs of intoxication. **Aims & Method.** To assess changes over time self-reported survey data were collected pre- (2012) and post- (2015) intervention, regarding staff's ability to detect cannabis-intoxicated adolescents; awareness of policies/action plans of prevention and cannabis use; awareness of adolescents' attitudes to cannabis use. **Results.** At both measurements, staff reported great concern regarding adolescents' cannabis use, and increasing liberal attitudes towards cannabis. There was a significant increase in staff's awareness of policies and action plans regarding cannabis use and prevention at follow-up. The proportion of staff expressing uncertainty in detecting cannabis intoxicated adolescents remained over time. Staff reported difficulties to counter adolescents with liberal attitudes towards cannabis use; however, staff reported that the training had empowered them in this matter. **Conclusion.** There is a great potential for cannabis prevention targeting adolescents, as social service staff regard cannabis use among adolescents as problematic. They also report a need for effective and structured interventions and are motivated to take an active part in preventive work.

16

**Elena Gervilla, Rafael Jiménez, Juan José Montaña, Alfonso Palmer and Berta Cajal**

## DATA MINING TO ANALYZE MOTIVES TO USE OR AVOID USING ALCOHOL IN ADOLESCENCE

PRESENTER:

**Elena Gervilla**

Background: Many studies have analysed reasons to use drugs, but few of them have focused on the reasons why some adolescents decide to avoid using alcohol as well. Aim: The aim of this study is to analyze motives why some adolescents drink alcohol while others decide avoid drinking. Methods: 269 normalized adolescent students (69.3% girls) with a mean age of 15.90 years (SD 1.003) answered an online questionnaire (N=269) which included the Alcohol Use Disorders Identification Test (Babor, Higgins-Biddle, Saunders & Monteiro, 2001) and the Interpersonal Risk Factors for Adolescent Drug Use [FRIDA] (Carballo et al., 2004). A total of 103 students (38.29 % of the sample) did not drink alcohol at all. We run classical and data mining models to observe the relationship between the reasons to use and to avoid using alcohol. Results: The majority of adolescents who drink alcohol say they use it to intensify dance and music (55.8%). Decision trees show that some motives to use alcohol can predict the audit total score of alcohol users. On the other hand, the most popular reasons between those adolescents who do not drink alcohol are for health (58.3% of the sample) and to avoid accidents (45.6%). Gender differences were found in some of the reasons to not use alcohol, showing that boys show more fear to alcohol consequences. Association rules show frequent motives that usually appear together. Conclusion: Motives to use or avoid using alcohol represent relevant information that should be taken into consideration to prevent high risk alcohol use profiles in adolescence.

17

**Olga Orosova and Marianna Berinsterova**

## ALCOHOL USE AND TOBACCO SMOKING INITIATION AMONG THE 6TH GRADE SLOVAK SCHOOLCHILDREN AND SELF-CONTROL

PRESENTER:

**Olga Orosova**

This study is a part of larger research project, focused on studying effectiveness of the Unplugged prevention program, which has been adapted and implemented among Slovak school population (APVV-0253-11). Aim: The aims of this study were to examine alcohol use (AU) and tobacco smoking initiation (TS) among the 6th grade Slovak schoolchildren as well as to explore the role of self-control (SC) with regard to initiation of AU and TS. Methods: The research sample consisted of 1295 schoolchildren (53.4% girls, Mean age=11.52(SD=0.61) was obtained by a stratified random sampling based on the number of inhabitants including 60 elementary schools (experimental/n=634, control/n=661). The twelve-session program Unplugged was carried out (baseline testing prior to program implementation/September 2013 and a follow-up testing six month after the program/April 2014). The lifetime prevalence of AU and TS measures were used (dichotomised: 0 never, 1 AU/TS initiation) to assess the outcome variables. Two step binary logistic regression models were used for data analyses (SC was entered in step 1; gender, parents' and best friend's AU or TS, parental knowledge related to their children's behavior (PK), and group experimental/control were entered in step 2). Results: It was found that 13.6% and 11.0% of schoolchildren initiated their AU and TS during the explored time. Lower level of SC was associated with AU and TS initiation in the 1st step, but this association disappeared for AU in the 2nd step. Lower level of SC, PK and mother's daily TS were associated with the initiation of TS, and lower level of PK and best friend's AU were associated with AU initiation in the final models. Conclusions: This study has provided evidence for the need of family-based interventions and for the importance of SC with regard to TS initiation.

**SHORT TERM EFFECTIVENESS OF THE UNPLUGGED PROGRAM IN SLOVAKIA: THE MEDIATIONAL ROLE OF DESCRIPTIVE NORMATIVE BELIEFS***PRESENTER:***Marianna Berinšterová**

The aim of this study is to examine short-term effect of the program Unplugged on lifetime prevalence of alcohol use and tobacco cigarette smoking among adolescents. Furthermore, the mediational role of normative beliefs is also explored. Methods: The data were collected at baseline (T1 - immediately before the program was implemented) and at 2 follow-ups (T2 - immediately after the program implementation; T3 - 3 months after the program implementation) in a representative sample of 1298 (52.3% females) primary school pupils (M=11.52, SD=0.61). Lifetime prevalence of alcohol use and smoking were used (dichotomised: 0-not used, 1-used) as outcome measures and a single item measure of descriptive normative beliefs regarding the number of friends who use alcohol and tobacco cigarettes was used to explore the effect of the mediational variable. Variables statistically controlled in the conducted analyses included gender, changes in social-economical status and changes in school connectedness. Linear and logistic regressions were used to test the mediational effect of program participation. Results: At T2, significant association was found between participation in the program Unplugged and normative beliefs about the number of friends who use tobacco cigarettes ( $\beta=0.5$ ;  $p < 0.001$ ). At T3, an indirect mediational effect of descriptive normative beliefs regarding number of friends who use tobacco cigarettes was found between Unplugged participation (0.066;  $p < 0.05$ ) and lifetime prevalence of smoking cigarettes (95% C.I. for EXP(B)= 4.02 – 26.984). Further exploration will be conducted to examine the long-term effect of the program in relation to the selected indicators and expected mediators.

**RANDOM FORESTS TO PREDICT AUDIT SCORE IN ADOLESCENCE: PEER ALCOHOL USE, FAMILY AND EXTRAVERSION ARE THE MOST IMPORTANT FACTORS***PRESENTER:***Elena Gervilla**

Background: Many risk factors have been studied to prevent alcohol use in adolescence. Some studies highlight the role families or personality traits have in the adolescent's drinking behavior, others point out that peers are the most important source of coping at this age. Aim: The aim of this study is to analyze all together and quantify with data mining techniques the role of psychosocial and personality factors in the prediction of alcohol use problems in adolescence. Methods: 269 normalized adolescent students (69.3% girls) with a mean age of 15.90 years (SD 1.003) answered an online questionnaire (N=269) which included the Alcohol Use Disorders Identification Test (Babor, Higgins-Biddle, Saunders & Monteiro, 2001), the Interpersonal Risk Factors for Adolescent Drug Use [FRIDA] (Carballo et al., 2004), the NEO-FFI personality questionnaire (Costa & McCrae, 1999). We run classical models and Random Forests (Breiman & Cutler, 2001) to observe if the mentioned factors could predict the AUDIT total score. Results: Regression model presents an adjusted R square of 0.40 and show that extroversion, friends, protective activities, age of onset of distilled alcohol use and gender are significant factors to predict AUDIT total score, whereas family factors were not significant. However, Random Forest highlights friends, family risk factors and extroversion as the most important variables. Decision tree show in a graphical way how these variables interact. Conclusions: Prevention models in adolescence should target the dynamics that take place in teenager context in order to decrease alcohol use problems in adolescence.

**BURNOUT SYNDROME IN MENTAL HEALTH PROFESSIONALS:  
PSYCHIATRIC HOSPITAL SETTING**

PRESENTER:

**Irena Velimirović**

Burnout syndrome in mental health professionals: psychiatric hospital setting

The aim of the project was to determine the level of stress in professionals working in psychiatric hospital, as well as to explore possible differences in stress level regarding the different characteristics of respondents as sex, level of education, marital status, working hours etc. The Burnout Clinical Subtypes Questionnaire was used. Study was conducted from July to December 2014, and from April to May 2015. The sample of 141 participants who work in mental health professionals are 39.9% male and 60.1% female, average age of 38.98 years. The aims of this poster is to explore level of stress in professionals working in psychiatric hospital and its different departments, and explore difference in three burnout subtypes – Frenetic, Under-challenged and Worn-out – regarding the sex of respondent and level of education. The results show that there is no significant differences regarding the sex of respondent and there is significant differences regarding the level of education. Results showed following: (1) there is no significant differences in subscale Frenetic regarding the level of education; (2) respondents with lower level of education have higher result in subscale Under-challenged; (3) respondents with the lower level of education have the highest result on subscale Worn-out followed by respondent with graduate level; the lower results in this subscale have respondents who PH.D level of education. The results will be further discussed in the poster presentation.

**THE ROLE OF SELF-DETERMINATION AND PERSONALITY IN  
PREDICTING THE CANNABINOIDS CONSUMPTION AMONG  
STUDENTS IN STUDENT DORMITORIES IN ZAGREB**

PRESENTER:

**Dijana Jerković**

Self-determination theory presents a macro-theory of human motivation that has been applied to many risky behaviours. Nevertheless, there is a scarce literature on the role of this theory in predicting cannabinoids consumption.

The aim of this study was to determine how well some constructs of self-determination theory and personality (extraversion, conscientiousness and neuroticism) predict the cannabinoids consumption among male and female students that live in student dormitories in Zagreb.

In a sample of 438 students (37.9% males and 62.1% females) that live in student dormitories in Zagreb the following instruments were applied: The Learning Climate Questionnaire (Williams & Deci, 1996), Self-Determination Scale (Sheldon & Deci, 1993), adapted version of the General Causality Orientations Scale (Deci & Ryan, 1985), General Need Satisfaction Scale – autonomy subscale (Gagne, 2003), International Personality Item Pool (IPIP50) - extraversion, conscientiousness and neuroticism subscales; and the question on lifetime prevalence of cannabinoids consumption (number of days).

Separate hierarchical regression analysis for men and women were conducted with a number of days person consumed cannabinoids in a lifetime as a criterion and personality, autonomous and control causality orientations, self-determination, need for autonomy and perception of autonomy support as predictors.

The proposed model failed to explain the cannabinoids consumption among men. Among women, the tested model explained 8.6% of variance of cannabinoids consumption. Significant predictors were extraversion, autonomous causality orientation, and the need for autonomy. Implications for prevention practice are considered.

## AUTONOMOUS SELF-REGULATION OF ALCOHOL USE AND ALCOHOL EXPECTANCIES IN RELATION TO ALCOHOL USE AMONG UNIVERSITY STUDENTS

PRESENTER:

**Jozef Benka**

Background: Alcohol use among university students constitutes a relevant problem for researchers and practitioners in prevention. Subjective expectancy of the effect that alcohol consumption brings has been shown to be an important factor with regard to alcohol use of university students. This study uses the Self-determination theory and focuses on drinking behaviour exploring the link between alcohol-related expectancy, autonomous self-regulation of drinking behaviour and level of alcohol use. Methods: University students from Slovakia (n=697) participated in the study (mean age 21.28; SD=1.93; 60% female) and completed questionnaires on alcohol use (AUDIT), alcohol expectancies (AOES) and autonomous self-regulation of drinking behaviour (TSRQ-A). The data were analysed using linear regression analyses. Results The analyses showed that after controlling for relevant socio-demographic variables, autonomous self-regulation of drinking behaviour was negatively associated with alcohol use ( $\beta=-0.182$ ;  $p 0.001$ ). Positive association was found between alcohol-related expectancies and alcohol use ( $\beta=0.269$ ;  $\beta=0.149$ ;  $p 0.001$ ). However, the pathway connecting the two explored constructs was less clear. Conclusions The results of our study show that autonomous self-regulatory processes of drinking behaviour as well as alcohol-related expectancies are important factors of alcohol use among university students. Prevention focussing on self-regulatory processes and autonomous self-regulation of drinking behaviour in particular, could be beneficial for prevention programs among university students.

## DOPING PREVENTION IN SWEDISH FITNESS CENTRES – AN EVALUATION STUDY OF THE IMPLEMENTATION OF A COMMUNITY-BASED INTERVENTION

PRESENTER:

**Ann-Sofie Bakshi**

Introduction: Since 2008, 100 % Pure Hard Training, a community-based doping prevention method aimed at reducing doping use among fitness centre visitors has been used nationwide by Swedish municipalities. The method includes training staff in fitness centres, policy work, enforcement and cooperation between key stakeholders, i.e. staff in fitness centres, the police and municipal prevention coordinators.

Aim: To evaluate the implementation of 100 % Pure Hard Training in Stockholm County.

Method: Key stakeholders in Stockholm County were interviewed about their perceptions and experiences of working with the method. The interviews were analysed using thematic content analysis.

Results: The method was perceived as highly useful by the key stakeholders. The fitness centre staff reported that the method had given them an opportunity to work actively and systematically against doping. Furthermore, the implementation of the method has influenced and partly changed their regular work routines, as well as increasing their knowledge and awareness of doping.

Problematic aspects were also mentioned. Particularly the cooperation element tends to be difficult to maintain. In this respect, demography emerges both as a success factor and a risk factor. In a small community with few fitness centres it appears easier to implement and maintain the method, as well as keeping cooperation between the stakeholders going. In a large city, it is more difficult to initiate and maintain cooperation between stakeholders. To increase contextual fit, implementation in large cities would probably benefit from dividing project management into smaller units (e.g. city districts) instead of operating on municipality level.

**EFFECTS OF A WEB-BASED COPING AND ALCOHOL-INTERVENTION PROGRAM FOR ADOLESCENTS HAVING PARENTS WITH ALCOHOL PROBLEMS: A RANDOMIZED CONTROLLED TRIAL**

PRESENTER:

**Tobias Elgan**

Introduction: Approximately 20% of all Swedish children grow up with a problem-drinking parent which may affect children negatively. Most Swedish municipalities therefore provide resources for support. However, less than 2% of these children receive this support, mainly due to difficulties in identifying and recruiting children into support programs. Delivering intervention programs to this target group via the Internet is a promising strategy. Here, we report results from a study of a novel web-based prevention intervention program targeted to adolescents having parents with alcohol problems. The purpose of the program is to strengthen adolescents' coping behavior, improve their mental health, and postponing the onset or decreasing risky alcohol consumption.

Methods: To investigate the effects of the program, we use a two-armed RCT design including 204 15–19 year olds allocated into a treatment group or a waiting list control group. Participants are recruited via the Facebook and adolescents are screened using the Children of Alcoholics Screening Test (CAST-6). The assessment consists of a baseline measurement (t0) and two follow-ups after two (t1) and six months (t2). Measures include the Center for Epidemiological Studies Depression Scale (CES-DC), a coping behavior scale, the short version of the Alcohol Use Disorders Identification Test (AUDIT-C), and the Ladder of Life.

Results: About 2600 15-19-year olds completed the screening, whereof 204, out of 1274 eligible adolescents, gave informed consent and completed t0. Results reveal that about 35% of the participants have t0-scores indicating moderate depression and 43% have scores indicating severe depression; 43% have scores indicating dysfunctional coping behavior and 40% have risky alcohol consumption patterns. We are currently conducting analyses to investigate the effects of the program, and here we adopt both a per-protocol and intention-to-treat strategy. Results will be available during spring 2015.

Conclusions: There is an urgent need for developing and evaluating web-based intervention programs targeting children having problem-drinking parents. This study therefore makes an important contribution to this novel field of research.

**Gianluigi Ferrante, Valentina Possenti, Antonella Gigantesco, Sandro Baldissera, Maria Masocco, Valentina Minardi, Elisa Quarchioni and Stefania Salmaso**

## DEPRESSIVE SYMPTOMS AND LIFESTYLES: RESULTS FROM THE BEHAVIOURAL RISK FACTORS SURVEILLANCE SYSTEM PASSI

PRESENTER:

**Gianluigi Ferrante**

**Introduction** Depression affects more than 350 million people worldwide and is one of the main factors determining both the global burden disease and social costs' increasing. In Italy, the prevalence of depression is 3% among adults. Evidence shows depression increases the likelihood of adopting unhealthy behaviours.

**Objectives** To estimate the prevalence of some behavioural risk factors in people aged 18-69 living in Italy and association with depressive symptoms.

**Methods** PASSI data from 39.463 phone interviews in 2013 were analysed. Leisure time physical inactivity, tobacco smoking, excessive alcohol consumption, obesity were studied. Depressive symptoms were explored through Patient Health Questionnaire-2. Multivariate logistic analysis was used to study the associations between each risk factor (dependent variable) and depressive symptoms (independent variable), adjusting for socio-demographic characteristics and current chronic diseases.

**Results** In 2013 in Italy, 34% of adults engages in no leisure time physical activity, 26% smokes tobacco cigarettes, 11% drinks excessive amount of alcohol, 10% is obese and 6% shows depressive symptoms. Adjusting for socio-demographic characteristics and medical conditions, a statistically significant association is confirmed between depressive symptoms and risky behaviours. People with depressive symptoms are more likely than those without depressive symptoms to be: physical inactive in leisure time (Adjusted Prevalence Ratio (APR)=1,13; 95%CI 1,04-1,22), tobacco smokers (APR=1,34; 95%CI 1,21-1,48), excessive alcohol consumers (APR=1,43; 95%CI 1,17-1,74) and obese (APR=1,27; 95%CI 1,08-1,48).

**Conclusions** A bad mental status is associated with an increased risk of adopting unhealthy behaviours. Public health promotion strategies should include integrated interventions to modify attitudes effectively by enhancing both mental and physical health.

## AN OVERVIEW OF REVIEWS OF INTERVENTIONS TO PREVENT CANNABIS USE IN YOUNG PEOPLE

PRESENTER:

**Eva Skärstrand**

Background: Despite extensive political measures taken in Sweden since 2011 in order to decrease cannabis use among young people, the level of prevalence remains unchanged. Commissioned by the Government the Public Health Agency of Sweden has conducted a research overview of studies that have evaluated different strategies in preventing drug use in young people. Aim: To provide a current review of the research literature available in the field of cannabis prevention and early interventions targeting young people. Method: Studies were obtained from different databases, and involved reviews published after 2005. Inclusion criteria were methods aiming at preventing new recruitment as well as early initiation of drugs in general, and cannabis in particular. Additional criteria were: population 0-25 years, universal or selective interventions, randomized controlled trials, drug use (in particular cannabis use) as outcome measure, and at least 6-month follow-up. Results: Forty reviews were found, of which 13 met the inclusion criteria, and were subjects for further examination. From the 13 reviews a total of 41 different programs (22 universal and 19 selective) were selected on the basis of our inclusion criteria. Identification of beneficial components for a successful drug prevention will be the focus for further analysis and the result will be presented at the conference.

## IMPACT OF ADVERTISEMENTS PROMOTING CANDY-LIKE FLAVOURED E-CIGARETTES ON APPEAL OF TOBACCO SMOKING AMONGST CHILDREN: AN EXPERIMENTAL STUDY

PRESENTER:

**Milica Vasiljevic**

Background: There are concerns that the marketing of e-cigarettes may increase the appeal of tobacco smoking in children. We examined this concern by assessing the impact on appeal of tobacco smoking after exposure to advertisements for e-cigarettes with and without candy-like flavours, i.e. bubble gum and milk chocolate.

Methods: We assigned 598 English school children (aged 11-16) to one of three different conditions corresponding to the adverts to which they were exposed: adverts for flavoured e-cigarettes, adverts for non-flavoured e-cigarettes, or a control condition in which no adverts were shown. The primary endpoint was appeal of tobacco smoking. Secondary endpoints were: appeal of using e-cigarettes, susceptibility to tobacco smoking, perceived harm of tobacco, appeal of e-cigarette adverts, and interest in buying and trying e-cigarettes.

Results: Children reporting smoking were excluded from the analyses (final sample = 471). Exposure to either set of adverts did not increase the appeal of tobacco smoking, the appeal of using e-cigarettes, or susceptibility to tobacco smoking. Nor did it reduce the perceived harm of tobacco smoking, which was high. Flavoured e-cigarette adverts were, however, more appealing than adverts for non-flavoured e-cigarettes and elicited greater interest in buying and trying e-cigarettes.

Conclusions: Exposure to adverts for e-cigarettes does not seem to increase the appeal of tobacco smoking in children. Flavoured, compared with non-flavoured, e-cigarette adverts did, however, elicit greater appeal and interest in buying and trying e-cigarettes. Replication of this study using stronger designs will increase the certainty that can be attached to these conclusions.

28

**Ramona Marinache**

## A NEO-HOLISTIC MEDICALISATION OF SLEEP

PRESENTER:

**Ramona Marinache**

Two decades ago, scholars from sociology of the body, sociology of emotions and sociology of medicine announced the emergence of a new sociology, through which the study of everyday life was completed with the ignored third occupied by sleep. A decade ago, these sociologists proposed the study of the management of sleep problems through processes like, medicalisation, pharmaceuticalisation, healthicisation, hygienisation or customization. In this presentation, based on a meta-narrative literature review and a ethnography, I argue that in recent years this trend is changing. The processes previously mentioned, tend to converge, and sleep is increasingly seen as a social and physiological fact, managed through a new type of medicalisation, a neo-holistic medicalisation. (This paper is a result of a research made possible by the financial support of the Sectoral Operational Programme for Human Resources Development 2007-2013, co-financed by the European Social Fund, under the project POSDRU/159/1.5/S/132400 - "Young successful researchers – professional development in an international and interdisciplinary environment".)

29

**Karin Streimann, Aire Trummal, Kai Klandorf and Tiia Pertel**

## PILOTING PAX GOOD BEHAVIOUR GAME IN ESTONIA – SHORT-TERM IMPACT OF THE INTERVENTION ON FIRST GRADE STUDENTS

PRESENTER:

**Karin Streimann**

Numerous studies have confirmed that Good Behaviour Game (GBG), a classroom-based behaviour management strategy has strong impact in protecting children from emotional and behavioural disorders. In 2014/15 a pilot study was carried out to test usability of PAX GBG in Estonia and measure its short-term impact. 20 Estonian schools with 718 first grade students from 30 classrooms took part of the study. Nonrandomized trial was carried out to test if students in classes implementing the intervention at least for 4 months will demonstrate decrease in emotional and behavioural problems and increase in prosocial behaviour. The project was conducted in two phases: 10 schools/classes started implementing GBG in October 2014 and 10 in February 2015. Additional 10 classes acted as a comparison group continuing practice as usual without receiving the intervention. Strengths and Difficulties Questionnaire with impact supplement (SDQ; Goodman 1999) and classroom observations were used to assess the impact of the intervention. Results showed promising effects of the program: disruptive behaviours decreased in both intervention groups and slightly increased in control classes. In the second phase intervention group prosocial behavior increased and some decrease in hyperactive behavior was noticed. Findings suggest that the behavioural influence mechanisms within the program work despite the new cultural context. Better results were achieved among second phase intervention group, which could be explained with more experienced mentors having conducted training and mentoring already for the first group. Results of this study have encouraged continuing with the implementation of GBG and related research in Estonian schools.

30

**Carmela Martínez, Ana López-Durán, Úrsula Martínez, Rubén Rodríguez-Cano, Elena Fernández Del Río and Elisardo Becoña**

## **COPING STRATEGIES ACCORDING TO SEX AND RELAPSE TIME AFTER QUITTING SMOKING**

PRESENTER:

**Elisardo Becoña**

Introduction. Coping strategies can be defined as the way to deal with different problematic situations so they have a key role in the process of quitting smoking, maintaining abstinence and in relapse prevention. The aim of this study is to identify the use of different coping strategies in people who quit smoking and then relapsed, according to sex and time of relapse. Method. The sample was made up of 438 smokers of the general population (52.7% female; mean age = 42.39, S.D. = 10.32) who quit smoking at least one month and relapsed in the previous year or in the last 5 years but not in the previous one. The Brief-COPE was employed to assess coping strategies. Results. Participants who relapsed in the previous year used the strategy Humor more frequently, compared with those who relapsed in the previous 5 years. With regard to differences by gender it is more likely that men employed Humor and Substance Use coping strategies and, women Emotional Social Support, Instrumental Social Support, Denial and Religion strategies. Significant differences were found for the interaction between time of relapse and sex in Acceptance and Emotional Social Support strategies. Conclusion. Use of coping strategies vary according to sex and relapse time. Men and women use different coping strategies, both positive and negative, so those differences should be considered in smoking cessation treatments and for relapse prevention.

31

**Darko Rovis, Andrea Mataija Redzovic, Petar Bezinovic and Josipa Basic**

## **SCHOOLS THAT PROMOTE BONDING: A MULTILEVEL ANALYSIS OF SCHOOL BONDING AND SCHOOL PRACTICES**

PRESENTER:

**Darko Rovis**

Risk behaviours represent a great challenge for the public health as they directly contribute to the leading causes of morbidity and mortality among adolescents. Good school bonding is related better academic achievements and better physical health but also fewer delinquency, drug addiction, school dropout, teen pregnancy and antisocial behaviour. The level of school bonding is known to vary across schools, which implies that the protective effect of school bonding also varies. Aim of this study is to examine the extent of school level variation in school bonding and to examine how individual and school level predictors related to school practices can explain these differences. The survey was carried on a random sample of 20% of students (1927 students, 89,5% response rate) in all secondary schools (30) in Primorsko-goranska County, Croatia. Scales for assessing school bonding, school were used as well as the school level variables (aggregated school means for school practices variables). Data analysis included multilevel modelling. A significant school level variation in risk behaviour and school bonding was found (ICC=.101) which is on the high end of similar reports. Multilevel analysis explained over 87% of school level variance and showed that a stimulating and rewarding surrounding where students do not fear of school and failure are the strongest predictors of good school bonding. Results support the idea that strong bonds to the school are more likely to flourish where students do not fear of the school marks, teachers and parents reactions, but in a supportive and reflective surrounding.

**SPORTS-RELATED CONCUSSION: WHAT DO COACHES WANT TO KNOW?***PRESENTER:***Lindsay Sullivan**

Background: In Ireland, the Gaelic Athletic Association (GAA) is the largest sporting organisation. GAA sports are high contact and collision sports, leaving athletes at considerable risk for injury, including concussion. Although concussions will never be totally eliminated from sport, an increased understanding of concussion detection, assessment and management among coaches has been identified by researchers as the most important component of concussion recognition and prevention. Aim: The aim of this study is to identify the educational needs and desires of GAA coaches to aide in the development of a theory-driven concussion education and prevention programme. Methods: A needs assessment questionnaire was designed and pilot-tested. This questionnaire will capture data on coaches' concussion training to date, preferred ways in which they would want to receive information about concussion, personal experience with concussion and demographic characteristics. Data will be collected in June-August 2015. Results: Data on coaches' concussion education needs will be presented. This will include what information coaches want included in a concussion education programme and the preferred ways in which they would like to receive this information. Further data on perceived barriers to the implementation of concussion education programmes will be presented. Additional data will be presented on coaches' communication about concussion and concussion reporting to their athletes. Conclusion: Findings from this needs assessment will be used to guide the development of a theory-driven concussion education and prevention programme for GAA coaches in the Republic of Ireland, and will support the knowledge and practice of primary and secondary concussion prevention.

**POSITIVE MOTIVES IN PREVENTION - THE CASE OF POLIS PROGRAM "ARS - HOW TO TAKE CARE FOR LOVE"***PRESENTER:***Krzysztof Wojcieszek**

Positive motives in prevention – the case of polish prevention program „ARS – how to take care for love”.

Young people appreciate the love and friendship as the most important values. This situation is rarely used in prevention programs. As part of the Polish - Swiss government project, a we have prepared the program whose goal is to promote healthy attitudes of women and their offspring. It happens that expectant mothers drink alcohol, smoke tobacco or use drugs during pregnancy and lactation. The aim of the program is to change this situation. The scenario includes 8 hours of classes conducted by 3000 trainers in the whole Poland, in 50% of all secondary schools in the country. Also we have prepared abundant materials in which it is proposed to emphasizing love as the supreme value in life, together with many useful health information. The program simultaneously applies to drinking, smoking and drug use. First reports indicate excellent reception of the script by young at the age of 17-20 years. Love theme present in the program fosters openness to suggestions, both among participants and leaders.

**ADOLESCENT PROBLEMATIC INTERNET USE: EXTERNALIZING OR INTERNALIZING BEHAVIOR?**

PRESENTER:

**Krzysztof Ostaszewski and Agnieszka Pisarska**

Background. A number of research has shown that youth problematic internet use is associated with both externalizing behaviors like substance use, aggression and sensation seeking, and with internalizing problems like depression, social anxiety, social isolation and emotional difficulties. This study was conducted to determine whether youth problematic internet use fits into a structure of externalizing or internalizing behaviors, or both. Method. Middle school students from Warsaw (N=984) were anonymously assessed at age 15,5 (grade 9). All measures of internalizing and externalizing problems were based on previously validated items or scales including a Polish short version of K. Young Internet Addiction Test. Confirmatory factor analysis (CFA) and structural equation modeling (SEM) with asymptotic distribution-free (ADF) estimation was conducted for the whole sample and for gender subgroups to determine how the problematic internet use relates to a structure of youth externalizing and internalizing problems. Results. Seven variables – substance use, aggressive behavior, truancy, delinquency, gambling, risk taking for fun, and problematic internet use – established a latent variable of externalizing behaviors. Six variables – depression, poor mental health, impaired usual activities, psychoactive medicines use, aches and pain, and problematic internet use – established a latent variable of internalizing problems. A structure of relations among these latent variables was modeled. Results - for the whole sample and the female subgroup - indicated that the problematic internet use had significant loading on the internalizing problem latent variable, and insignificant loading on the externalizing behaviors. For the male subgroup both loadings were significant. It suggests that problematic internet use for females relates directly to internalizing problems and indirectly to externalizing youth behaviors, The indirect relations between problematic internet use and a number of externalizing behaviors rest upon the correlation (0,35) of the externalizing latent variable with the internalizing latent variable. For male subgroup problematic internet use relates directly to both internalizing and externalizing problems. Conclusion. Results suggest that young problematic internet users do not represent homogenous group. Probably, two different groups of teenagers are involved: a group who use internet to compensate for (or cope with) their mental health problems, and a group who combines excessive internet use with risky or antisocial behaviors. Prevention measures should take into account a possible heterogenic structure of young problematic internet users.

**UNPLUGGED IMPLEMENTATION IN SMALL COMMUNITY: EXPERIENCE OF ISLAND VIS IN CROATIA**

PRESENTER:

**Valentina Kranzelic**

During the year 2014/2015 NGO "Svima – association for civil organization and civil initiative development", Island of Vis, Faculty of Education Sciences and Rehabilitation, University of Zagreb, City of Vis and elementary school Vis collaborated on the project "Prevention on the Island". The project was financed by Office for Combating Narcotic Drug Abuse of the Government of the Republic of Croatia. The overall goal of the project was promotion of positive and healthy development of children and youth by drug use prevention and creation of condition in the community for the positive development. The project had three specific goals: (1) Assessment of risk and protective factors in development of children and youth on Island of Vis, (2) Empowered children and youth for healthy choices – implementation of Unplugged program and (3) Enhanced condition for healthy and positive development of children and youth of Island of Vis by education of professional who work with children and youth, their networking and collaborative planning of preventive activities on the island of Vis. Unplugged program was delivered to the all students in 6th, 7th and 8th grade (N=38) in the (only) elementary school in the City of Vis. In the poster, experience of the implementation of Unplugged program in school in small community – City of Vis - will be showed.

**THE MODERATING EFFECT OF PROBLEM SEVERITY IN ADHD ON PROGRAM EFFECTIVENESS OF BEHAVIOURAL PARENTING PROGRAMS**

PRESENTER:

**Aniek van Herwaarden**

Purpose: Even though behavioural parenting programs are effective in reducing children's ADHD symptoms, less is known about whether group-based behavioural parenting programs are effective for children with clinical levels of ADHD symptoms in particular. Thus, the current study aimed to examine whether three established behavioural parenting programs decrease problem behaviours in children with clinical levels of ADHD symptoms. Method: The data come from a national RCT evaluation study of the most commonly used group-based parenting programs in Sweden. Overall, 439 parents were randomly assigned to the Incredible Years, Cope, or Comet programs. ADHD symptoms and externalizing behaviour were assessed at baseline, post-test and one-year follow-up by the SNAP-IV and ECBI, respectively. Children with a score on SNAP-IV at or above the 95th percentile cut-off were considered having clinical levels of initial ADHD symptoms. Repeated-measures ANOVA models were used to analyse the data. Findings: Results suggested that initial level of ADHD symptoms moderated program effectiveness in reducing ADHD symptoms and externalizing behaviour problems on both short- and long-term. Effectiveness of all three programs was larger for the children with clinical levels of ADHD symptoms (Cohen's  $d = 1.14 - 1.87$ ) than the children with non-clinical levels of ADHD symptoms (Cohen's  $d = .25 - 1.15$ ). Conclusions/ Implications: These findings suggest the feasibility of using group-based, behavioural parenting programs to help parents with children who display severe ADHD symptoms. Future research could include a multi-informant design, and test program effects for children with clinical diagnosis of ADHD.

**SMOKING REFLECTION IN THE MUSIC SCENE**

PRESENTER:

**Maja Kring Schjoerring**

Background: Many young people create their identity through the genre of music they listen to and the concerts they go to, so the norms of the environment are essential for the creation of their identity. The importance of role models in the music scene seems huge, as they become a part of the identity creation and the behaviour in relation to smoking will influence on young people's perception of what is to strive for.

Aims: To prevent young people to start smoking we wish to encourage reflection in the Danish music scene, about how young people's smoking behaviour is affected by the music environment and to get established smokers to reflect on their smoking and how they affect others.

Methods: The deglorifying intervention comprises guidelines at all of Strøm's music events by reducing the visibility of smoking in PR press-, promotion-, and communication material and not show cigarettes, smoking, smoke or any kind of symbols on smoking. To further spread this invisibility out in the Copenhagen music scene and change attitudes and behaviour through questions and reflections, 3 qualitative research interventions based on qualitative interviews will be carried out – one in the Strøm organisation, one through a greater audience survey at all of Strøm's music events, and one among Strøm's external network in the Danish music scene, approximately 300 people including Dj's, bookers, stakeholders from record companies, industry associations, other music festivals etc.

Strøm Festival is considered the premier electronic music event in Scandinavia.

**COVARIANCE OF RISKY BEHAVIOURS OF UNIVERSITY STUDENTS**

PRESENTER:

**Laimute Bulotaite**

University students engage in a number of risky behaviours, including alcohol use, drug use, driving under the influence of alcohol, smoking, risky sexual behaviour etc. This is troubling because risky behaviours are associated with academic failure, sexually transmitted diseases, property damage and other personal adverse consequences. We have to state, that prevention scientists and practitioners are more focused on secondary schools and adolescents in their research and prevention interventions. A lot of research confirmed the covariance of adolescent risky behaviours (Jessor & Jessor, 1977; Monahan & Hawkins, 2009; Duberstein Lindberg etc., 2000). The aim of our study was to reveal the spreading and co-variation of risky behaviours in so called „emerging adulthood“ period. 664 university students from 8 Universities in Lithuania took part in the study (average age = 20,4 (SD=2,2): 76% female, 24% male. We used specially designed questionnaire to detect 12 types of risky behaviours: drug use, frequent alcohol use, binge drinking, smoking, driving under the influence of alcohol, riding with drunk driver, not using seat belts, SMS writing while driving, extreme sports, suicidal thoughts, sex without condom and  $\geq 2$  sex partners during one year period. Only 5,2 % of students are not involved in any risky behaviour. 11,3 % of students are involved in one type of risky behaviour, 49 % - 2-4 types, 34,5 % - 5+ types. The results revealed strong correlations between different types of students risky behaviours. Research data was used to develop recommendations on risky behaviours prevention for university students.

**A CLUSTER RANDOMIZED CONTROLLED TRIAL TO EVALUATE THE EFFECTIVENESS OF THE “UNPLUGGED” PROGRAM IN NIGERIA: SAMPLE SIZE AND STUDY DESIGN**

PRESENTER:

**Marta Alesina**

Background Unplugged is a Social Influence school-based curriculum developed and tested in the European Drug Addiction Prevention trial. It was shown to be effective in reducing cigarette smoking, drunkenness episodes and cannabis use among 12-14 years old adolescents. It has been largely adopted by schools of several countries in the world.

Methods In the framework of collaboration among the Nigeria Office of UNODC, the Federal Ministry of Education, the National Drug Law Enforcement Agency and the National Agency for Food and Drug Administration, a large scale project was funded by the European Union (project FED/2012/306-744) to promote healthy lifestyles in schools, families and communities in Nigeria. Unplugged was chosen as intervention to be implemented and evaluated in the school setting. The evaluation will follow a cluster randomized controlled trial design. Assuming alpha 0.05 (two-sided), power 0.80, prevalence in the control arm 14.6% and in the intervention arm 10.2%, 45 pupils per class, intraclass correlation coefficient 0.025, the estimated sample size needed per group is 1943 (overall 3886), corresponding to 14 schools in the intervention and 14 in the control arm. A pilot phase was conducted to pilot the program and the study instruments in 5 schools in Kwali (Abuja), Kaduna, Enugu, Ikot Ekpene, Yaba (Lagos) in Spring 2015.

Results The Federal Ministry of Education provided a list of 60 federal schools based in the 7 Zones of the country: 12 in North Central zone, 8 in North East, 10 in North West, 6 in South East, 10 in South South, 11 in South West, 3 in Abuja Federal Capital Territory. Thirty-two schools were randomized, 16 to the intervention arm and 16 to the control one. The randomization was performed at the central level, in OED Institute in Torino, and was stratified by zone taking into account the population size: 4 schools in North Central zone, 2 in Abuja Federal Territory, 4 in North East zone, 6 in North West zone, 4 in South East zone, 4 in South South zone, 8 in South West zone. Three classes per school will participate in the study. Pupils will be administered a baseline survey between November and December 2015, and a post-test survey between May and June 2016. 97 students of 2 classes participated in the pilot study of the questionnaire in Abuja. According to their comments, and the comments of the researchers administering the questionnaire, the study questionnaire was modified to facilitate the students in filling it.

Conclusions This is the first experimental large scale study organized in Nigeria to evaluate the effectiveness of a school-based prevention program. Many cultural, political, and geographical critical issues in the country can threaten the conduction of the study. However, all the involved Institutions were very enthusiastic about the project and were very collaborative in the pilot phase. We expect these premises will assure good outcomes from the study in 2016.

**Marta Alesina, Federica Vigna-Taglianti, Ibanga Akanidomo, Juliet Pwajok, Peer van der Kreeft, Gian Luca Cuomo and Harsheth Virk Virk**

## PILOTING A QUESTIONNAIRE ON KNOWLEDGE, ATTITUDES AND BEHAVIOURS ON TOBACCO, ALCOHOL AND DRUGS AMONG NIGERIAN STUDENTS: DIFFICULTIES AND FIRST RESULTS.

**PRESENTER:** **Marta Alesina**

**Background** The local Office of UNODC together with the Federal Ministry of Education, the National Drug Law Enforcement Agency and the National Agency for Food and Drug Administration coordinates in Nigeria a large scale project funded by the European Union (project FED/2012/306-744) to promote healthy lifestyles in schools, families and communities through the adoption of effective prevention programs. Unplugged has been chosen as effective intervention to be implemented and evaluated in the school setting. A pilot phase has been organized to test the program and the evaluation instruments. The results of the pilot phase will help to identify logistical, technical and other kind of problems to be addressed in the evaluation phase.

**Methods** For the pilot test, the Piedmont Centre for Drug Addiction Epidemiology staff, responsible for the evaluation of Unplugged in the Nigerian study, slightly modified the study questionnaire previously used in the EUDAP trials, in order to make it applicable to the Nigerian context. Some questions were deleted to shorten the questionnaire. The pilot was conducted in 2 classes (48 + 49 pupils), in a school of Abuja (Federal Capital Territory). The pupils were also requested to fill in a form listing the main problems they encountered in answering the questions. The data entry was conducted centrally in Piedmont Centre for Drug Addiction Epidemiology by using an online mask.

**Results** 97 pupils filled the questionnaire: 57.7% were males and 41.2% females; 8.2% were thirteen years old, 37.1% fourteen, 39.2% fifteen and 15.5% sixteen years old. More than 77% of the pupils lived with both parents. Only 13% declare his/her family did not have a car. Only 4.1% of students reported to have smoked cigarettes in their lifetime and 1.0% smoked during the last 30 days. The percentage of students who consumed alcohol during their lifetime was 23.7%, and 5.2% during the last 30 days. Five percent of students reported to have been drunk in their lifetime and 2.1% during the last 30 days. As regards drug use (excluding cannabis), the percentage of students who used it in their lifetime was 5.1%, 1.0% during the last 30 days. No students declared to have used cannabis in lifetime, nor in the last 30 days. The main problems in filling the questionnaire declared by the local researchers and by the pupils regarded the anonymous code. All the difficulties noticed have been taken into account to finalize the questionnaire. Specific notes have been added to make easier the completion of the anonymous code and the list of latin letters has been added to reduce the errors in the interpretation of the handwriting.

**Conclusions** From the preliminary results of the pilot phase the consumption of tobacco and drugs appear to be very little among Nigerian teenagers. Results of the pilot phase were taken into account to finalize the evaluation questionnaire and the study procedures.

## THE EFFECTIVENESS OF BRIEF MOTIVATIONAL INTERVENTIONS FOR PREVENTING SUBSTANCE USE AMONG YOUTH: A SYSTEMATIC REVIEW

PRESENTER:

**Marta Alesina**

**Introduction** Brief Motivational Interventions are intervention shorter than traditional ones, derived from Motivational Interview approach and aimed to promote the motivation to change especially in substance abuse and addiction field.

**Objectives** The aim of this study is to conduct a systematic review of the literature to evaluate the effectiveness of Brief Motivational Interventions in preventing and reducing the use of drugs among youth at risk.

**Materials and Methods** The literature search was conducted on the biomedical databases EMBASE; PUBMED; EBSCO; THE COCHRANE LIBRARY applying the following keywords: motivational intervention; motivational enhancement; brief intervention; substance use; adolescents; youth; young adults. Titles were screened. Abstracts were read by two reviewers applying exclusion criteria. Full texts were examined by two reviewers to extract data from the included studies.

**Results** A total of 877 records were obtained from the literature search. Reading the titles, 523 articles were excluded. The remaining 354 abstracts were then read, and 261 were excluded. After reading the full texts, 66 studies were excluded with motivation. Fifteen studies met the inclusion criteria and were therefore included in the review. Each study administered one or two Motivational Interview sessions with duration ranging from 7 to 60 minutes. Most of the studies did not show statistically significant differences between the motivational intervention and the control arm, both at short and long follow-up, on the use of marijuana and other drugs, on frequency of use and most other outcomes.

**Conclusions** The results did not indicate significant efficacy of Brief Motivational Interventions in preventing substance use among youth at risk.

## IMMEDIATE EFFECTS OF ALCOHOL MARKETING COMMUNICATIONS ON CONSUMPTION AND COGNITION: A SYSTEMATIC REVIEW AND META-ANALYSIS OF EXPERIMENTAL STUDIES

PRESENTER:

**Kaidy Stautz**

**Aims:** To assess immediate effects of exposure to alcohol marketing on alcoholic beverage consumption and related cognitions. **Methods:** Electronic searches of nine databases, supplemented with reference list searches and forward citation tracking, were used to identify randomised, laboratory-based experimental studies assessing immediate effects of exposure to alcohol marketing communications on objective measures of alcohol consumption (primary outcome), explicit or implicit alcohol-related cognitions, or selection without purchasing (secondary outcomes). Study limitations were assessed using the Cochrane Risk of Bias tool. Random and fixed effects meta-analyses were conducted to estimate effect sizes. **Results:** Twenty studies met eligibility criteria. A meta-analysis integrating seven studies (758 participants, all undergraduates) found that viewing alcohol advertisements increased immediate alcohol consumption relative to viewing non-alcohol advertisements (SMD = 0.20, 95% C.I. = 0.05–0.34). A meta-analysis integrating five studies (477 participants, all undergraduates) did not find that viewing alcohol portrayals in television programmes or films increased consumption (SMD = 0.13, 95% C.I. = -0.18–0.44). Confidence in these estimates is diminished by underpowered analyses and unclear risk of bias. Two additional meta-analyses found that exposure to alcohol portrayals, but not alcohol advertisements, increased positively-valenced explicit alcohol-related cognitions. No eligible studies assessing other forms of alcohol marketing were found. **Conclusions:** Viewing alcohol advertisements (but not alcohol portrayals) may increase immediate alcohol consumption by small amounts, equivalent to between 0.39 and 2.85 alcohol units for males and between 0.25 and 1.81 units for females. The generalizability of this finding beyond undergraduates and to other marketing channels needs establishing.

## TALKING ON SCHOOL-BASED PREVENTION WITH ADOLESCENTS

PRESENTER:

**Agnieszka Pisarska**

**Introduction:** One of the key principles of evidence-based prevention is the relevance of the program to the participants' needs. Thus, needs assessment is an important part of prevention program development. **Aim:** The study was aimed at identifying the students' opinion on risky behaviour prevention activities conducted at Warsaw schools. **Method:** The study was based on focus group interviews. The project covered a number of students from 12 schools (2 middle schools and 10 high schools, including technical colleges and basic vocational schools). The number of participants in the focus groups fluctuated from 4 to 17 persons, together there were 100 students interviewed (45% girls). **Results:** Results showed that all interviewed students took part in prevention activities at some point of their school education. However, they expressed very critical opinions on these programs/activities. They raised following issues: boring and useless content, inadequate and unconvincing examples of risky behaviours, infantile examples of the possible threats associated with risk behaviors as well as excessive concentration on these dangers. Negative prevention measures based on moralizing and prohibiting were also criticized. Moreover, students formulated some propositions related to the desirable program content and eligible target population, for example: discussion during classroom sessions about their opinion on risky behaviours and involvement of parents in the program activities. **Conclusion:** Study participants perceived low competencies of prevention program deliverers and lack of high quality programs. These results are consistent with experts' critical opinion on school-based prevention in Poland. This presentation was prepared within a frame of research project supported by a grant from the Polish National Bureau for Drug Prevention (the Gambling Problem Solving Fund of the Ministry of Health)

44

**Juan Antonio Moriano, Ana Laguía, Tiziana Giordano, Miguel Angel Rodríguez, Elena Ares, Paulo Dias, Gabi Cicu, Ramon Morell-Gomis and Daniel Lloret**

### CUIQ. A THEORY OF PLANNED BEHAVIOR QUESTIONNAIRE TO MEASURE CANNABIS USE INTENTIONS AMONGST EUROPEAN TEENAGERS

PRESENTER:

**Daniel Lloret**

Theory of Planned Behavior (TPB, Ajzen, 1991) takes into account personal and social factors to explain intentional behaviors. This theory has been widely used to predict behavioral intentions in different contexts, such as drugs consumption. This research develops and validates CUIQ, Cannabis Use Intention Questionnaire, in four European countries: Italy, Portugal, Romania, and Spain. CUIQ consists of the following scales: attitude towards consumption (reliability – Cronbach's alpha: .86), subjective norms ( $\alpha = .70$ ), self-efficacy related to a responsible use ( $\alpha = .82$ ) and to abstinence ( $\alpha = .86$ ), and intention to use cannabis ( $\alpha = .94$ ). The sample comprises 4268 adolescents between 14 and 18 years old ( $M = 15.9$ ;  $DT = 1.11$ ), 50.9% female and 49% male (0.1% n.a.), from Italy (37.7%), Portugal (16.5%), Romania (18.7%), and Spain (27.1%). 26.9% of participants has used cannabis at least once in lifetime. 42.6% teenagers estimate that some of their friends use cannabis, while 11.7% report almost all their friends do. An exploratory factor analysis shows that the different factors according to subscales proposed explain 51.39% of the variance. The results of a regression analysis indicate that the three components of the TPB explain 47.5% of the variance of the intention to use cannabis. Self-efficacy related to a responsible use appears to be the most influential factor ( $\beta = .47$ ,  $p = .000$ ), followed by self-efficacy related to abstinence ( $\beta = -.23$ ,  $p = .000$ ), subjective norms ( $\beta = .21$ ,  $p = .000$ ), and attitude to consumption ( $\beta = .11$ ,  $p = .000$ ). This new questionnaire allows comparative studies that can lead to a better understanding of the psychological processes beneath adolescent's decisions to use cannabis. It will be also useful for prevention programs evaluation and design.

45

**Daniel Lloret, Ramon Morell-Gomis, Luisa Ardizzone, Miguel Angel Rodríguez, Rocío Panos, Liliana Trigueiros, Gabi Cicu, Ana Laguía and Juan Antonio Moriano**

### DINNER IS READY!! RELATION BETWEEN CANNABIS USE AMONG TEENS AND FAMILY COMMUNICATION AND FAMILY DINNERS.

PRESENTER:

**Daniel Lloret**

There is sound evidence that a good family communication is related with less alcohol, tobacco and cannabis use by the offspring. Communication needs time, and sometimes a place, that is not always available in our busy family lives. Dinner is probably the best opportunity for parents and offspring to share time together and chat on a daily basis. The aim of this study is to analyze the relation between family communication, dinner frequency and teen cannabis use. Participants were 3887 adolescents aged 15 to 18 years from Spain, Romania, Italy and Portugal. The sample was divided in two groups. Group1: High cannabis use and Group2: No or low cannabis use. We compared the frequency of family dinner, satisfaction with dinner, importance of family dinner for parents, and communication with mother and father. Then, we created a predictive structural equation model (path analysis) including family dinner, attitudes of participants, their parents and close friends towards cannabis, intention of cannabis use, and cannabis use. Results show that Group1 has a lower frequency of family dinner and satisfaction with family dinner in Spain, Romania and Italy. In Portugal the higher differences were found in communication with father. Concerning the path analysis, a low but significant effect of family dinner on intention of cannabis was found in all countries. Findings support prevention interventions in family set.

46

**Wadih Maalouf, Matthew Kiefer, Milos Stojanovic, Giovanna Campello and Heikkila Hanna**

## PILOTING LIONS QUEST SKILLS FOR ADOLESCENCE IN SERBIA: A LIONS CLUB INTERNATIONAL FOUNDATION– UNODC COLLABORATION.

PRESENTER:

**Wadih Maalouf**

Information on the adaptability, fidelity, affinity and effectiveness of evidence based programmes from low or middle income countries remains very limited. UNODC has been building capacity to provide effective interventions by adapting and piloting evidence based practices in low and middle income countries (per the International Standards on Drug Use Prevention).

The collaboration between UNODC and Lions Club International Foundation availed the opportunity to pilot Lions Quest (Skills for Adolescence) to the evidence based programmes piloted globally. Lions Quest is a evidence-based school based programme delivered by teachers to improve the social and life skills of students to prevent a variety of risky behaviors including substance use. The first country to benefit from this pilot was Serbia.

The pilot went between July 2014 and July 2015 to benefit around 1,400 students in 20 elementary schools in Belgrade municipalities (New Belgrade and Zvezdara) in partnership with the Ministry of Education, Science and Technological Development. A pre-post questionnaire was used to assess: use, opportunities to use and intention to use of substances as well as normative belief, refusal skills, attitudes and perception of harm towards substances.

Significant changes have been noted particularly at the level of refusal skills of students. The results (pretest/posttest) documented in the beneficiary students will be presented. In addition to an analysis of process related data gathered through implementation that would benefit the expansion of this pilot nationally and regionally as well as enrich the international literature with evidence from a low and middle income country.

47

**Michela Canevascini, Myriam Pasche and Jean-Luc Eiselé**

## TOBACCO ADVERTISING AT POINTS OF SALE IN SWITZERLAND

PRESENTER:

**Jean-Luc Eiselé**

Switzerland is one of the few countries which did not ratify the WHO Framework Convention on Tobacco Control, and legislation on tobacco advertising is one of the least restrictive in Europe. At national level, only the advertisements on television, radio and explicitly directed to minors are banned. According to some studies, more than half of the tobacco industry's marketing expenditures are linked to advertising at points of sale. We analysed the presence of tobacco products and of tobacco advertising in 400 tobacco points of sale in Switzerland. Tobacco advertisements were found in 52% of the points of sale, varying according to the type of point of sale, the canton and the surroundings of the point of sale. The number of advertising mediums varied from one to 27, with an average of 6.8 advertising mediums per point of sale. Astonishingly, advertisements at children's eye level or underneath (1.20 m) were found in 35% of the points of sale, advertisements near sweets and chocolates in 34%. The aim of this study is to show the widespread and the characteristics of the phenomenon to the public health professionals, the policy-makers and to the public, in order to advocate for a comprehensive ban on tobacco advertising at points of sale. Published material is available at [www.observatoire-marketing-tabac.ch](http://www.observatoire-marketing-tabac.ch).

**ETHICAL ASPECTS OF THE IMPORT AND IMPLEMENTATION PROCESS OF DRUG ABUSE PREVENTION PROGRAMMES***PRESENTER:***Andrea Valerio**

The field of drug abuse in Brazil still is in process of maturing. It is common to find in the academic area as well as in the social assistance field reports related to prevention against drugs through lectures on information on drugs and with statements of former drug users and his/her relationship with drugs. It is also common the elaboration and distribution of flyers, strategies that provide information arousing fear, and implementation of punctual actions without community involvement. In the same way, we find many ways of understanding the issues related to drug use prevention. Considering this and due to the lack of evidence based structured projects, Brazil have been made an effort in the last two years to identify, analyze, import, culturally adapt, test, evaluate and validate three international evidence based programmes to prevent use and problematic use of alcohol and other drugs at schools and communities to be implemented with children, young people and families. Likewise, for 2015 is planned the implementation and scale up of these programmes throughout the country. This paper is part of a Bioethics PHD final research from University of Brasilia (Brazil) that intends to understand which ethical aspects are necessary to be considered to implement prevention programmes that were imported, as well as what would consist the uncritically aspects of the import process from the implementation of the programmes to testing and scale up.

**MEDIATORS OF THE EFFECTIVENESS OF A SCHOOL-BASED HIV PREVENTION INTERVENTION TO INCREASE CONSISTENT CONDOM USE AFTER 2-YEARS OF ITS IMPLEMENTATION***PRESENTER:***Alexandra Morales**

The aim of this study is to determinate the factors that mediate in the self-reported consistent condom use over the 24-months post-intervention period in adolescents who received COMPAS, a school-based HIV prevention intervention targeted to Spanish adolescents. Twelve high schools located in Spain were randomized to an intervention or a control group with baseline, immediate-post, 12 and 24-month post-intervention assessments. Self-reported consistent condom use by 24 months post-intervention was the primary outcome. Based on the theory of planned behavior, mediated effects of the intervention on consistent condom use were estimated - knowledge about STIs, attitudes towards condom use, sexual risk perception, self-efficacy, perceive norms and condom use intention. Serial multiple mediation analysis indicated that attitudes toward condom use when there are obstacles to use it and self-efficacy mediate the COMPAS's effect in increasing consistent condom use. This is the first study that identifies the theoretical constructs that mediate the efficacy of a school-based intervention to promote sexual health in adolescents from Spain.

50

**Miriam Blikmans, Metin Özdemir and Håkan Stattin**

## THE MEDIATING ROLE OF PARENTING STRESS IN THE EFFECTIVENESS OF PARENTING PROGRAMS

PRESENTER:

**Miriam Blikmans**

Purpose: Although it is known that parenting programs are effective in reducing problem behaviours in children, the mechanisms behind these changes are less well understood. This study examined the possible mediating role of parenting stress on the effectiveness of a behavioural-based parenting program, Comet, and an attachment-based parenting program, Connect. Method: The data came from an RCT on the effectiveness of commonly used parenting programs implemented in ordinary practice settings in Sweden. The current analyses were based on data from parents of 527 children who were randomly assigned to one of the two parenting programs or a waitlist condition. Parents rated the amount of problem behaviour and level of parenting stress before and shortly after the parenting programs. Parallel process latent change models (LCM) were used to test the mediating role of parenting stress. Findings: The results showed that both Comet and Connect programs reduced child problem behaviours significantly compared to the waitlist condition, and this reduction was explained by a reduction in parenting stress. For the Connect program, parenting stress fully mediated the program effect whereas there was a partial mediation for the Comet program. Conclusions/Implications: The findings suggested that parenting stress may be reduced when parents involve in group-based parenting programs, and the less stressed parents become the more child behaviours improved. These findings imply that a greater emphasis on reducing parenting stress in parenting programs may facilitate greater improvements in child problem behaviours.

51

**Marivi Mateo and Libe Mariscal**

## COMMUNITY PROGRAM OF RESPONSIBLE SERVICE OF ALCOHOL IN NAVARRRE SPAIN

PRESENTER:

**Marivi Mateo**

During 2015, the Program for Prevention of Drug Addiction in the Hospitality Industry: "Responsible Service of Alcohol" has been in development in Navarre in northern Spain. This program is developing under a collaborative agreement between the Ministry of Health, Social Services and Equality and the Spanish Federation of Hospitality and Licensed Premises. The Program targeted 32 Towns and in the awareness phase has reached 170 Licensed Premises. The training included 110 alcohol servers (waiters), owners of establishments and other hospitality professionals. The contents of the five-hour training include: Drug use in the context of leisure time, Risks reduction, Environmental risks associated with drug use, and, What does the law say regarding the sale and service of alcohol service?. The training participants conducted a pre and post questionnaire on attitudes and knowledge. The most remarkable results of these questionnaires are: - An increase of 14.2% (61.8-76) in the role of servers in the alcohol consumption of their customers - The need to improve their ability to identify the age of the customers and not to serve drunk people (less than 70% in the post) - 62.3% (32.7-95) increased the awareness of their responsibility in preventing alcohol consumption by underage patrons in their establishments (bar, pub, restaurant, disco ....) - The need to deepen the knowledge about illegal drugs and the risks of alcohol consumption in Licensed Establishments.

52

**Maria Wojcieszek**

### SOME ASPECTS OF MOTIVATION OF PARTICIPANTS OF THE TRAINING PREPARING FOR CONDUCTING THE PREVENTION PROGRAMME TASTE OF LIFE – »THE DEBATE ON “DESIGNER DRUGS”«.

PRESENTER:

**Maria Wojcieszek**

The goal of the research was to explore to some extent the theme of motivation of participants of the training preparing for conducting the prevention programme «Taste of life – the debate on 'designer drugs'» (in Polish «Smak życia, czyli debata o “dopalaczach”»). The programme belongs to the universal prevention and was developed for 15-18 year old students as a brief intervention in a group. It was projected to be conducted by teachers after some preparation. The main questions of the research concerned the following topics: to which extent participants declare they are determined to counteract using 'designer drugs' by youth; why participants want to realize such a goal (because of personal reasons or/and because of the benefit of youth); to which extent subjects have the will and the opportunity to carry out the programme; to which extent participants believe the goals of the programme can be achieved. The motivation was assessed by direct method, so the questionnaire contained direct questions about the topics mentioned above.

53

**Antonis Gardikiotis and William Crano**

### PEER AND FRIEND INFLUENCES IN PREDICTING ADOLESCENTS' DRUG USE

PRESENTER:

**Antonis Gardikiotis**

Adolescents' perceptions of their friends' and peers' illicit drug behavior are important predictors of their own onset of marijuana use. These perceptions are important for users, non-users (have never tried), and vulnerable nonusers (have tried some time in the past, but not currently using), but in different ways. This study was designed to determine if user status interacted with these perceptions in predicting adolescents' future use. A nationally representative U.S. sample of respondents (N=4,568) from the National Survey of Parents and Youth panel survey was used. Two logistic regressions (separately for resolute nonusers, N=3,458, and vulnerable nonusers, N=340) examined the relationship between respondents' Year 2 marijuana use onset with their Year 1 perceptions of the user status of peers and friends. When resolute nonusers thought their friends were users, but their peers were not, they were more likely to initiate use. However, when they thought their friends and peers both used, they were less likely to initiate use. For vulnerable nonusers, however, perceived use by friends did not predict use; only perceived use by peers predicted future use. This is the first study that shows that perceptions of peer use can be more important than perceptions of friend use in predicting marijuana initiation. This was true for vulnerable, but not resolute nonusers. Different social norms may underlie the drug use of different user status groups, calling for different persuasive prevention appeals.

## EXPERIMENTAL VS WEEKEND ALCOHOL USE IN ADOLESCENCE: DIFFERENCES IN PSYCHOSOCIAL CONTEXT

PRESENTER:

**Elena Gervilla**

Background: Alcohol use in adolescence poses a real problem due to its negatives consequences in health and derived expenses. The aim of this study is to analyze the relationship between pattern of alcohol use (experimental vs weekly alcohol use) in adolescence and some measures of psychosocial adjustment.

Methods: 1031 High School students were selected by random sampling. Teenagers with experimental or weekend alcohol use (N=513) were selected to form the useful sample (58.8% girls, with a mean age of 15.92 years, SD 1.29). Adolescents answered an anonymous questionnaire which included the measurement of alcohol use and some psychosocial variables (gender, age, academic performance, friends' alcohol use, etc) and personality (NEO-FFI, Costa & McCrae, 1999). We run descriptive statistics to define the profile of experimenters and weekend alcohol users. Results: T test analysis showed that weekend alcohol users were older ( $t=-8.428$ ,  $df=511$ ,  $p<0,001$ ), they scored higher in extraversion ( $t=-3.429$ ,  $df=508$ ,  $p=0.001$ ) and lower in openness ( $t=2.669$ ,  $df=508$ ,  $p=0.007$ ) and in Conscientiousness ( $t=3.928$ ,  $df=508$ ,  $p<0.001$ ) in comparison with experimental alcohol users. At the same time, adolescents with weekend alcohol use showed more failed subjects ( $t=-2.885$ ,  $df=504.024$ ,  $p=0.004$ ) and class absences ( $t=-4.080$ ,  $df=374.984$ ,  $p<0.001$ ). No statistically differences were found in age when they first consumed alcohol or in gender between the two groups.

Conclusion: Prevention models in adolescence should consider the patterns of alcohol use in teenagers since they seems associated with different psychosocial adjustment.

## A WEB-BASED GROUP COURSE INTERVENTION FOR 15-25 YEAR OLDS HAVING PARENTS WITH SUBSTANCE USE OR MENTAL HEALTH PROBLEMS: DESIGN OF A RANDOMIZED CONTROLLED TRIAL

PRESENTER:

**Tobias Elgan**

**Introduction:** Approximately 20% of all Swedish children grow up with a problem-drinking parent which may affect children negatively. Most Swedish municipalities therefore provide resources for support. However, less than 2% of these children receive this support, mainly due to difficulties in identifying and recruiting children into support programs. Delivering intervention programs to this target group via the internet is a promising strategy. We have previously developed a 1 ½ hour long web-based self-help program "Alcohol & Coping" which has proven to be effective with regards to adolescent's own alcohol consumption. However, there is a need of a more intense interventions to this target group. In the Netherlands a web-based group course intervention "Kopstoring" has been developed and is currently being evaluated in an RCT. We have translated and culturally adapted the Kopstoring program into a Swedish context. Here we describe the design of an RCT that will be initiated during fall 2015.

**Methods:** This study will use a two-armed RCT design including at least 184 15–25 year olds allocated into an intervention group or a control group. Participants will be recruited via the Facebook and also by existing support clinics that provide support to this target group. Inclusion criteria comprise having a parent with mental health and/or substance use problems. Those having symptoms of severe depression according to the Center for Epidemiological Depression Scale (CES-DC) will be excluded. The assessment consists of a baseline measurement (t0) and three follow-ups after six (t1), 12 (t2), and 24 months (t3). Measures include the YSR, CES-DC, the Ladder of Life, Brief-COPE, WHOQOL-BREF, and AUDIT-C.

**Results:** The Kopstoring manual have been translated into Swedish and culturally adapted. Previous research conducted in our group reveals that a great proportion of 15-19 year olds having parents with alcohol problems have an own risky alcohol consumption. We have therefore added a psychoeducative alcohol section to one of the Kopstoring modules. Chat group leaders have been trained and the program has been pilot tested. During late fall 2015, recruitment of participants will start.

**Conclusions:** There is an urgent need for developing and evaluating web-based interventions targeting adolescents having parents with substance use or mental health problems. This study therefore makes an important contribution to this novel field of research.

**Ana López-Durán, Carmela Martínez, Rubén Rodríguez-Cano, Úrsula Martínez, Elena Fernández Del Río and Elisardo Becoña**

## WEIGHT AND NICOTINE DEPENDENCE IN SMOKING CESSATION

PRESENTER:

**Elisardo Becoña**

**Introduction.** Body weight and nicotine dependence are two important variables that can interfere in the smoking cessation process. The aim is to analyze if people who quit smoking, through a psychological treatment, and remain abstinent after 3 months present weight differences regarding pretreatment nicotine dependence level.

**Methods.** The sample was composed by 65 participants who quit smoking and were abstinent after 3 months (56.1% women, mean age = 40.89, S. D. = 9.72). Nicotine dependence was assessed pretreatment (Fagerström Test for Nicotine Dependence, mean = 4.38, S. D. = 1.7) and body weight at pretreatment (mean = 74.74, S. D. = 17.40) and at 3 months follow-up. Abstinence was corroborated through carbon monoxide in expired air (CO > 10).

**Results.** According to the presence or absence of nicotine dependence at pretreatment, we did not find significant differences in body weight at pretreatment or at 3 months follow-up.

**Conclusion.** The presence or absence of nicotine dependence is not related to weight differences at pretreatment and at 3 months follow-up in people who quit smoking and remain abstinent. However, weight should be monitored throughout the follow-ups due to its relevance in relapse.

# FULL PROGRAMME

---

## Conference Day 2: FRIDAY, OCTOBER 23ND

### 09:30-10:30 Scientific Roundtable

Chair: **Dr Gregor Burkhardt (EMCDDA, PT)**

Location: KARANTANIJA

**Prof. Dr. Reinout W. Wiers**

#### **Assessing and Changing Implicit Cognitive Processes in Addiction: Implications for Prevention**

Dual process models have described addiction as a combination of relatively strong bottom-up cue-related neurocognitive processes and relatively weak top-down cognitive control processes (e.g. Wiers et al., 2007). I will describe some of the tests used to assess these bottom-up processes. In line with this perspective, we found across several studies a larger impact of memory associations and approach tendencies on behavior in adolescents with relatively weak cognitive control. Dual-process models have recently come under fire (e.g. Keren & Schul, 2009), but we think they can still be useful at a descriptive psychological level, while more work should be done to illuminate the underlying neurocognitive mechanisms (Gladwin et al., 2011). Moreover, dual process models inspired new interventions aimed at changing relatively automatic processes in addiction, varieties of Cognitive Bias Modification (CBM) paradigms (see Wiers et al., 2013). I will present work on attentional re-training in alcoholism (Schoenmakers et al., 2010) and on approach-bias re-training (Wiers et al., 2011; Eberl et al., 2013), which have yielded clinically relevant results. However, results in adolescents and students with low motivation to change have been less successful (e.g. Lindgren et al., 2015). I will discuss two possible ways forward: first motivating participants for change (e.g. Motivational Interviewing), and increasing the appeal of CBM by introducing gaming elements.

### 10:30-11:00 Coffee Break

## 11:00-12:45 Parallel Session 2.1 Guiding policy and practice through prevention

Location: KARANTANIJA

**Marica Ferri, Danilo Ballotta and Fabrizio Faggiano**

### QUALITY STANDARDS IN DRUG DEMAND REDUCTION: PREVENTION GAVE THE EXAMPLE

PRESENTER:

**Marica Ferri**

The European Union through its Drugs Action Plan 2013-16 requires the Council, the Horizontal Drug Group, the Member States, the Commission and the EMCDDA to "embed coordinated, best practice and quality approaches in drug demand reduction" by "Agree and commence the implementation of EU minimum quality standards, that help bridge the gap between science and practice". While in Prevention a European funded project has been carried on since 2010, in the other areas of demand reduction, namely Treatment, Social Reintegration and Harm Reduction, another European funded Project: EQUS (2011) has used the experience of Prevention to expand to the other interventions. The Greek Presidency, followed by the Italian and Latvian Presidency included the development of Quality Standards in their programs. The resulting standards have been drafted by a number of European experts and discussed at the HDG. They are based on the existing standards (a search has been conducted to include various international experiences and the Eu standards), are aspirational and give to the MS the opportunity to implement their projects and to exchange experiences through the knowledge exchange platform of the EMCDDA.

**Samia Abreu, Raquel Pedroso, Roberto Tykanori, Michaela Juhasova, Adriana Simonsen Simonsen, Débora Pereira, Jane Lopes, Rebeca Kapitansky and Karen Oliva**

### BRAZILIAN PUBLIC POLICY: LARGE-SCALE DEPLOYMENT OF A DRUG PREVENTION PROGRAM

PRESENTER:

**Raquel Turci Pedroso**

The Brazilian Ministry of Health culturally adapted one school-based drug abuse preventive programme, originally named UNPLUGGED (#TAMOJUNTO), to aid its expansion as a National Public Policy. During the dissemination process changes were made to the implementation stages. Amendment 1: the incorporation of a coach, a "multiplier", who is responsible for delivering training and providing support to the teacher every month, in a one hour session. Amendment 2: the revision of a guide for the parent's workshop; three workshops are planned and delivered by health and school professionals. Amendment 3: the extension of training from originally just teachers to professionals - teacher, school stakeholders, health professionals and sometimes local politicians are trained concurrently. Amendment 4: the development of a logical matrix based on continuous training and documentation of the process - all in cooperation across states and federal levels. In 2014, 13088 students, spanning 86 schools, in 11 states and 7 states participated in #Tamojuntto. This was achieved with a team of two supervisors, six multipliers and supported by two federal coordinators. Qualitative results showed that the the majority of local politicians ask for expansion of the program, the teachers are well engaged (less than 2% of teacher gave up during the implementation), the students are also highly engaged and are asking for extra #Tamojuntto classes in the curriculum, the relations between health and education are stronger. The main challenges of this process have been in the incorporation of #Tamojuntto classes within the regular school curriculum, training of healthcare and education professionals as local multipliers. Our 2015 efforts are directed at maintaining the quality of implementation during the expansion process.

**Gareth Hollands, Ian Shemilt, Theresa Marteau, Susan Jebb, Hannah Lewis, Yinghui Wei, Julian Higgins and David Ogilvie**

## PORTION, PACKAGE OR TABLEWARE SIZE FOR CHANGING SELECTION AND CONSUMPTION OF FOOD, ALCOHOL AND TOBACCO: COCHRANE SYSTEMATIC REVIEW

PRESENTER: **Gareth Hollands**

Background:

People are repeatedly exposed to varying sizes of food, alcohol and tobacco products in environments such as shops, restaurants, bars and homes. This has stimulated public health policy interest in product size as a potential target for intervention to influence consumption.

Aims:

To assess the effects (and potential effect modifiers) of manipulating product sizes on selection or consumption of food, alcohol or tobacco.

Methods:

Cochrane systematic review with meta-analysis and meta-regression. Eligible studies were randomised controlled trials (between- or within-subjects) that involved comparison of at least two sizes of a portion or package of a food, alcohol or tobacco product, or an item of tableware. Outcomes were selection or consumption of the manipulated product.

Results:

We dual-screened 51,288 abstracts, from which we included 72 studies (69 food, 3 tobacco). Meta-analysis of 92 comparisons from 61 studies (6,711 participants) found a small-to-moderate effect of portion, package, or tableware size on consumption (SMD: 0.37, 95% CI: 0.29 to 0.45). A similar effect (SMD: 0.42) was found for selection. The effect size suggests that, if sustained reductions in exposure to large sizes could be achieved across the whole diet, this could reduce average daily energy consumed from food by 10%-17% among UK adults (up to 290 kcals per day).

Conclusions:

This review suggests that reducing exposure to larger sized portions, packages, and tableware can contribute to meaningful reductions in the quantities of food people select and consume. This may justify policy actions to reduce the availability and appeal of large product sizes.

**Håkan Källmen and Tobias Elgan**

## COLLABORATION BETWEEN COMMUNITY SOCIAL SERVICES AND HEALTH CARE INSTANCES – THE USE OF A COLLABORATIVE INDIVIDUAL PLAN

PRESENTER: **Håkan Källmen**

Introduction: A well-functioning care of people with psychiatric problems and drug abuse presupposes collaboration between health care and the community social service. There has been a Swedish law of establishing a Collaborative Individual Plan (CIP) for such clients since 2010 but it is implemented in very small extent. Aim The aim of this study was to explore the extent of collaboration around a CIP, if the staff knew about a template for establishing a CIP, the content of the CIP templates and what the establishing of a CIP leads to. Methods: To be able to follow-up collaboration after a training course in establishing a CIP we assessed collaboration at baseline and one year after the course. There were 797 persons signing up for that course and 705 responded. The study builds on a cross-sectional design and self-reports on a web-based questionnaire. Results It was shown that the responders reported participation in between one and two CIP a month and about seven of ten worked according to a template. About two thirds knew about the template and its content. They perceived foremost positive consequences of collaboration as making it clear what needs to be performed and who is responsible. Conclusions Although respondents perceived positive consequences of collaboration and that a CIP makes the responsibilities clear they do collaborate in a very low extent.

## 11:00-12:45 Parallel Session 2.2: Institutions

Location: GRAD

**Maria Rosaria Galanti, Tom Bellander, Gergö Hadlaczky, Liselotte Schäfer-Elinder, Christel Lynch and Finn Rasmussen**

### HEALTH PROMOTION IN PRE-SCHOOLS AND SCHOOLS IN STOCKHOLM COUNTY: TRANSLATING INTO ACTION THE LESSON OF EFFECTIVE ENVIRONMENTAL PREVENTION

PRESENTER: **Maria Rosaria Galanti**

Schools and pre-schools in Sweden are urged to implement actions for health promotion and prevention of unhealthy behaviors among children. However, preventive practices in these settings often rest on "good sense, good will" approaches lacking evidence-base. Further, even when evidence-based programmes are adopted, they focus on individual behaviors and are not always implemented as intended, because of associated organizational costs. In addition, programmes have a specific focus (e.g. smoking prevention, prevention of bullying), disregarding common determinants of lifestyle and behavioral interactions. A comprehensive pre-school and school-based health promotion programme has been launched through a collaborative effort between the Stockholm County's Health Care District and the Department of Public Health Sciences at Karolinska Institutet. The programme rests on the following pillars: 1. A continuously updated evidence-informed catalogue summarizing setting-specific interventions 2. Exclusively targeting modifications of: a. Physical environment b. Organization c. Policy and regulations d. Communication routines 3. In order to achieve modifications in multiple health-related domains: a. Substance use b. Bullying c. Nutrition and eating habits d. Physical activity e. Learning achievements f. Mental health g. Exposure to noise and to environmental allergens The catalogue is complemented with instruments for the identification of local priorities, i.e. an organization-based checklist and a student-based questionnaire. The programme is being made available through a dedicated web-site currently under pilot-testing. During the conference session, preliminary results from the pilot testing, issues of (large scale) implementation and planned evaluation studies will be presented.

**Alessandro Coppo and Fabrizio Faggiano**

### THE OUTDOOR SMOKING BAN IN ITALIAN SCHOOLS: OPPORTUNITY TO DEVELOP SCHOOL POLICIES FOR PREVENTING SMOKING AMONG YOUNG PEOPLE?

PRESENTER: **Alessandro Coppo**

The introduction of school tobacco policy (STP) could be regarded as a promising preventive strategy as some evidence suggests that the school environment can influence young people to smoke. In order to assess this hypothesis we performed a systematic review using Cochrane method. We were also interested to know whether specific components of STPs (such as smoking bans for students and/or teachers and their extent, levels of enforcement, monitoring strategies, sanctions for students or teachers found smoking, and the offer of tobacco cessation programmes) might increase their impact. We identified only one c-RCT, with high risk of bias, and 24 observational studies. The majority of studies reported that schools with highly enforced policies, smoking ban extended to outdoor spaces, involving teachers and including sanctions for transgressions, with assistance to quit for smokers plus support by prevention programs did not show a significant difference in smoking prevalence, when compared to schools adopting weaker or no policies. We discuss our results in the light of two surveys carried out after the introduction of outdoor smoking ban in Italian schools (Law n.128/2013). The majority of the observed schools did not enforce the ban and not participate to smoking prevention programs, moreover outside the schools the prevalence of smokers (school staff and students) continues to be very high. The outdoor smoking ban in Italian schools hasn't been yet used appropriately as a strategy to prevent young people from using tobacco.

**Zila Sanchez, Adriana Sanudo and Daniela Schneider**

## **EFFICACY EVALUATION OF THE SCHOOL PROGRAM UNPLUGGED FOR DRUG USE PREVENTION AMONG BRAZILIAN ADOLESCENTS: A QUASI-EXPERIMENTAL STUDY**

*PRESENTER:*

**Zila Sanchez**

Background: Most Brazilian schools do not have a continuous project for drug use prevention, and do not conduct culturally adapted activities for that purpose. In order to strengthen drug prevention policies in schools, it is crucial to have international, evidence-based programs tested in the culture of Brazilian schools. Objective: To evaluate the impact of the Program Unplugged for alcohol and drugs use prevention among children and adolescents in public middle schools in Brazil. Methodology: A non-randomized controlled trial was conducted with 2,185 students in 16 public schools in 3 Brazilian cities. The experimental group attended 12 weekly classes under the Unplugged program for drug use prevention, and the control group did not attend to any school prevention program in the same year. Multilevel analysis stratified by age were used to evaluate changes in the consumption of each drug, in time (baseline and 4 months follow up), and between groups (control and experimental). Results: This study suggests that there is no evidence of effects of the Unplugged program in the age group of 11 to 12 years-old. However, the program seems to stimulate a decrease in recent marijuana use status (past month change from use to non-use in 85.7% of the cases in intervention and 28.6% in control, OR=17.5, p=0.039) among students from 13 to 15 years old. In addition, students at this age range who received the Unplugged program in the classroom keep drug consumption levels similar to those observed before the beginning of the program. However, students who did not participate in the program present a tendency to increase the consumption of alcohol, marijuana, and inhalants in the year of the research. Conclusions: This study adds to the evidences of the efficacy of the Unplugged program as a primary drug use prevention among Brazilian adolescents, and needs a randomized controlled trial in order to have its effectiveness in this culture verified.

**Federica Vigna-Taglianti, Gian Luca Cuomo, Sanela Talić and Matej Košir**

## **EVALUATION OF EFFECTIVENESS OF "UNPLUGGED" IN SLOVENIA, 2010-2011**

*PRESENTER:*

**Marta Alesina**

Background: Unplugged is a Social Influence school-based curriculum consisting of 12 units, one-hour each, delivered by trained class teachers to adolescents 12-14 years old during the school year. It was developed and tested in the European Drug Addiction Prevention trial, and it was shown to be effective in reducing cigarette smoking, episodes of drunkenness and the use of cannabis at short term. In 2010-2011, a controlled non-randomized study was conducted in Slovenia to evaluate the effectiveness of the program.

Methods: 48 schools accepted to participate in the study, 26 in the intervention arm and 22 in the control one. However, 4 schools from the intervention arm dropped out, leaving a sample of 22 schools in the intervention and 22 schools in the control arm. A pre-test survey was conducted before the implementation of the program, and a post-test survey was conducted 3 months after the end of the program. All the students in the intervention and control arm were administered a self-completed and anonymous questionnaire including 42 items investigating tobacco and substance use, alcohol use and abuse, intentions, knowledge, expectations and attitudes about substances, social and personal skills, normative beliefs, family relationships, school climate. Prevalence of behaviours at post test was compared with that at pre-test in the intervention and control arms. Multilevel Analysis will be used to investigate the effectiveness of the program in preventing and reducing drug use.

Results: Overall 2937 pupils of 44 schools and 155 classes participated in the baseline survey between October and November 2010. Seventy-five percent of post-test questionnaires matched with pre-test ones and were available for effectiveness analyses. Among students participating in the survey at baseline 49.3% were boys, 27.5% were 12 years old, 50.4% 13 years old, and 21.5% 14 years old. 66.6% of pupils lived with both parents, and 83.6% had siblings. On overall only 17.9% of Slovenian students declared to have smoked at least one cigarette in their life and only 2.8% smoked at least one cigarette in the last 30 days. Around 59% of pupils already drunk alcohol, and 26% drunk alcohol in the last 30 days. 15% percent of pupils had at least one episode of drunkenness in their life, whilst 4.3% had at least one episode of drunkenness in the last 30 days. Around 2% used cannabis in their life, and 0.5% in the last 30 days. Less than 1% of pupils used other illicit drugs in their life, 0.3% in the last month. Results from unadjusted analysis of the effect are very encouraging. The use of all substances appeared to be reduced by the program. However, a more appropriate multilevel adjusted analysis is ongoing.

Conclusions More than 2000 pupils participated to the evaluation study in Slovenia. Preliminary unadjusted results on the effectiveness of the program are encouraging. However, final results of the adjusted model are needed.

**Zila Sanchez, Adriana Sanudo and Solange Andreoni**

## **WITHOUT TALKING WEB-BASED INTERVENTION TO PREVENT HARMFUL ALCOHOL USE AMONG NIGHTCLUB PATRONS: OPPOSITE EFFECTS ACCORDING TO BASELINE ALCOHOL USE DISORDER CLASSIFICATION**

PRESENTER:

**Zila Sanchez**

This study aimed to test the effectiveness of a web-based intervention to prevent alcohol abuse among nightclub patrons. A probabilistic sample of patrons from 31 nightclubs in São Paulo, Brazil was invited to respond to an online screening with the AUDIT instrument. 1057 patrons met the inclusion criteria to participate in a randomized controlled trial with data collection at times 0, 3, 6 and 12 months. For data analysis, participants were classified in two AUDIT score groups: "high-risk drinking" (AUDIT>8; 44%) and "low-risk drinking" (AUDIT<8; 56%). In both risk-drinking groups, the intervention group was exposed to a single dose of a personalized normative feedback screen with information on the participant's alcohol consumption and its potential consequences, through images and texts. At the baseline, the "high-risk drinking" group presented a mean AUDIT score of  $12.6 \pm 4.1$  and the "low-risk drinking" group,  $3.7 \pm 2.2$ , with no significant differences between intervention and control groups. After 12 months, no differences were found between intervention and control situation in both risk-drinking groups. However, in both situation a change in the mean AUDIT score was found: a 14% decrease among patrons at the "high-risk drinking" group (95%CI 7.4%-18.8%; $p < 0.001$ ) and a 13% increase among patrons in the "low-risk drinking" group (95%CI 3.3%-24.7%; $p = 0.009$ ). The results suggest that, independent of the group (intervention or control), the time effect of participating in the study may have a beneficial outcome in reducing harmful drinking among patrons at the high-risk group. However, the participation in the study was potentially iatrogenic for patrons from the low-risk group.

## 11:00-12:45 Parallel Session 2.3 Healthy communities

Location: LJUBLJANICA

**Kimberley Hill, David Foxcroft and Michael Pilling**

### CHANGING BEHAVIOUR WITHOUT TALKING: AFFORDANCES AND THE IMPORTANCE OF CONTEXT

PRESENTER:

**Kimberley Hill**

Alcohol misuse is a public health concern. Behaviour work which focuses on preventing and regulating maladaptive alcohol consumption suggests drinkers act rationally in choosing to consume alcohol. Many social cognition approaches view cognitive attributes as the primary mediator of behaviour. For example, much prevention work focuses on changing attitudes towards other drinkers or intentions to consume alcohol. These approaches are particularly limited when explaining maladaptive behaviours, including why individuals continue to consume alcohol despite being aware of health risks. Instead of focusing on psychological complexity, prevention researchers should consider the functional significance of the contexts where alcohol is consumed. It is possible that environmental cues and the affordability of certain contexts may determine behaviour on a non-conscious, automatic level. Taking a socioecological approach, behaviour is not viewed as something which is planned and rational, but as something which emerges from the direct and unmediated relationship between drinkers and their drinking environments. This then changes the focus of prevention from cognitive mediators or determinants of behaviour to the range of opportunities for action that these contexts afford. This presentation will consider the challenges in studying the complex social contexts in which alcohol is consumed, including related conventions and social norms which may also mediate behaviour. An overview of alcohol-related affordances and implications will be provided using examples from previous research, using methods such as non-participant observation, photo-elicitation and Q-Methodology. It will be argued that taking a function-based approach is challenging, but could be particularly valuable in explaining and preventing problematic consumption.

**Georgina Warner, Natasha Mokhtar, Tim Hobbs and Michael Little**

### CAN A COMMUNITY MAKE THE DIFFERENCE? A PUBLIC SOCIAL PARTNERSHIP WITH LOCAL AUTHORITIES IN ENGLAND

PRESENTER:

**Georgina Warner**

Background: The UK Department for Education (DfE) Social Care Innovation Programme aims to innovate and re-design social care service delivery to achieve higher quality, improved outcomes and better value for money. Within the programme, Dartington Social Research Unit (DSRU) is leading an evaluation of a promising intervention. Through volunteers in the local community, Safe Families for Children offer short-term hosting of children aged 10 or under, family befriending and the provision of resources to families in crisis.

Method: DSRU has worked with Safe Families to establish a Public Social Partnership (PSP) with local authorities (LAs) in 5 regions across England. An evaluation of Safe Families is integral to the PSP and involves a process evaluation, cost-benefit analysis and a randomised controlled trial to assess impact. For the latter, DSRU has developed a mobile device application (app). The app allows social workers to screen families for eligibility and make referrals to the local Safe Families team, and enables Safe Families' social workers to collect data from families. DfE are funding initial delivery; however, the PSP commits the LAs to provision of further funding if the evaluation demonstrates positive impact.

Discussion: The project provides an opportunity to assess the impact communities can have on families who would typically access social care. The PSP is the first of its kind in England. The innovative approach to working with public systems not only allows Safe Families to achieve a sustainable model, but also improves the use of evidence in policy and practice.

**Andreja Ternar and Miha Lovse**

## **PLAIN-PACKAGING : THE ROLE OF CIVIL SOCIETY AGAINST TOBACCO INDUSTRY**

*PRESENTER:*

**Andreja Ternar**

Neuromarketing is a relatively new science, which combines the fields of neurology, psychology and economics. With the help of modern technology, it can follow the brain response of someone who is subject to advertising. Neuromarketing studies the workings and thought processes, which influence our buying decisions, habits and dependence. Tobacco addiction and marketing strategy of the tobacco industry, as well as their dominant position in our consumer society, are still considered as one of the most serious problems in today's world. Neuromarketing touches on advertising in the tobacco industry and its influence on our subconscious mind. It also reveals interesting results of a extensive study on tobacco advertising and plain packaging. Neuromarketing reveals new questions about ethics of advertising and the effect off neuromarketing strategies on contemporary society and the subconscious of the individual.

**Romain Guignard, Viêt Nguyen-Thanh and Pierre Arwidson**

## **EVALUATION OF THE 2014 MEDIA CAMPAIGN AGAINST SMOKING IN FRANCE: A LONGITUDINAL STUDY**

*PRESENTER:*

**Viêt Nguyen-Thanh**

On the occasion of the announcement of the French National Smoking Reduction Program 2014-2019, the National Institute for Health Promotion and Health Education (INPES) launched a media campaign that reminded the risks of tobacco smoking and referred smokers who wanted to quit to Tabac Info Service (TIS), a cessation service that includes a quitline and a website with a fully automated web-based program to help smokers quit. The campaign was broadcast on TV, radio and internet from September 26th to October 22nd. A cohort of 3,000 smokers aged 15 to 85 years-old were recruited from an access panel before the campaign (T0) and interviewed about their smoking patterns, their attitudes towards smoking and cessation and their intentions to quit. All respondents were re-contacted just after the campaign and 6 months after the campaign. The response rates were respectively 75% and 69%. Exposure to the campaign was assessed from self-report and probability of exposure calculated from TV viewing habits. Smoking cessation, quit attempts and variations in attitudes and intentions to quit were estimated according to the level of exposure with logistic regressions adjusted for sociodemographics and baseline outcomes. Several studies already dealt with the impact of media campaigns on smoking outcomes, mainly in Anglo-Saxon countries. To our knowledge, the present study is the first in France to use a longitudinal design in order to evaluate the impact of a media campaign against smoking. It should help broaden the results of the literature to non-Anglo-Saxon contexts and improve future media campaigns.

## 11:00-12:45 Parallel Session 2.4 Advances in prevention

Location: CENTER

### **Emma Davies**

#### **"HOW MUCH IS TOO MUCH?" A THINK ALOUD STUDY TO EXPLORE THE FEASIBILITY AND ACCEPTABILITY OF A DIGITAL INTERVENTION FOR THE PREVENTION OF ALCOHOL RELATED HARM IN ADOLESCENTS**

*PRESENTER:*

### **Emma Davies**

Background: This study sought to gain feedback from teachers and adolescents on a novel online intervention for use in schools, designed to reduce alcohol misuse in 11-14 year-old pupils. Theoretically based on the Prototype Willingness Model, the Alcohol Smart Quiz (ASQ) aimed to change alcohol prototypes and encourage adolescents to make plans to enable them to deal with peer pressure, or unintended consequences of drinking. Methods: A qualitative, think aloud interview study was conducted. Participants (17 adolescents aged 11-14 and nine secondary school teachers) were prompted to talk out loud about what they were thinking while they worked through the intervention using LifeGuide software. Transcripts were analysed using thematic analysis. Findings: Themes relating to credibility, acceptability and feasibility were identified and related to 'moderation', 'decision making', 'harm reduction', and 'alcohol and culture'. Adolescents were positive about ASQ and found the content of the intervention appealing. Teachers were welcoming of the format of the ASQ as a means of generating discussions around alcohol within the classroom. Discussion: For both groups 'moderate' drinking was an acceptable message to deliver within schools, alongside a focus on decision making in social situations. There is a challenge in drawing a line between moderation and drinking 'too much'. The underlying culture of drinking, seen as an inevitable part of teenage life, has implications for harm reduction, related to the physical effects of alcohol and its portrayal on social media. The importance of gaining feedback during intervention development to enhance acceptability is discussed.

### **Raquel Pedroso and Edgar Hamann**

#### **RECOMMENDATIONS OF ADJUSTMENTS TO THE BRAZILIAN CONTEXT OF SCHOOL-BASED PREVENTION PROGRAM OF ALCOHOL AND DRUG USE - "UNPLUGGED" (2013)**

*PRESENTER:*

### **Raquel Pedroso**

This study is the first part of a doctoral thesis and aims to examine the implementation of the school prevention program to alcohol and drug use - "Unplugged" in eight Brazilian public schools in 2013 and, based on Grounded Theory, organize recommendations of adjustments to the Brazilian context with the analysis of 144 Cartographic diaries. The adjustments are based on: (1) the challenges of the new prevention paradigm that the program proposes to implementers (health and education); (2) the factors that demobilize the implementation and immediate effects that mobilize; and (3) the institutional arrangements necessary for implementation. The diaries reported the program's effects: improvement in the teacher and student relationship and of students with each other; rescue students uninterested in participation in school; improvement in teacher practice; improved discipline in the classroom; understanding on normative beliefs on the part of students. The biggest challenges revealed were the organization of implementation that considers the hours of planning de classes and meeting with the multiplier, the inclusion of the classes in the curriculum, the management of the duration of the classes, and the low participation of the school and health management on the organization of the implementation. The adequacy of recommendations to the Brazilian context intend to contribute to decision-making with a view to qualify continuity for sustainability of the project.

**Rubén Rodríguez-Cano, Elena Fernández Del Río, Ana López-Durán, Carmela Martínez, Úrsula Martínez and Elisardo Becoña**

## RELAPSE CURVE IN A GROUP OF SMOKERS WHO SEEK PSYCHOLOGICAL TREATMENT FOR SMOKING CESSATION ACCORDING TO GENDER

PRESENTER:

**Elisardo Becoña**

Introduction. Knowing the process of relapse in smokers is important in treatments for smoking cessation. The aim of the present study is to analyze if there are differences in the relapse curve in men and women who quit smoking after attending a psychological treatment. Methods. Sample was composed by 266 participants who were abstinent at the end of treatment (59.8%; mean age = 41.20, S. D. = 10.80; Fagerström Test for Nicotine Dependence, mean = 4.78, S. D. = 2.15). Differences according to gender were analyzed at 1, 3, 6, and 12 months follow-ups. Results. As time increases, the number of participants that relapse is higher. At 12 months, a 55.27% of the total sample relapsed (57% men and 54.1% female). No differences were found in relapse according to gender in any of the periods assessed. Conclusion. The relapse curve shows a decrease in abstinence rates over time. No differences were found in relapse according to gender at the different follow-ups. This indicates that there are not any differences between men and women in the smoking relapse process.

**Paula Bleckmann and Thomas Moessle**

## TALK OR ACT? EFFECTS OF SCREEN AVAILABILITY VS. EFFECTS OF PARENTAL MEDIATION STYLE ON CHILDREN'S PROBLEMATIC MEDIA USE

PRESENTER:

**Paula Bleckmann**

Parental media mediation has been grouped into three styles: Active/instructive mediation, restrictive mediation, and a third more varied category (Barkin et al., 2006; Nikken & Jansz, 2006; Valkenburg et al. 1999). None of the styles is consistently linked to a reduction of children's media risks. There is evidence of counter-intentional effects (Livingstone & Helsper, 2008; Nathanson, 2002). So maybe talking doesn't really help? We compared the influence of "talking vs. acting" on three different parameters of screen media usage: time, content and (dys)functional usage. We used structural equation modelling with longitudinal data of a four year time frame ( $\chi^2 = 144.63(40, N = 795)$ , SRMR = .04, GFI = .97), explaining media usage in 6th grade by 3rd grade predictor variables (parental mediation and screen availability in children's bedrooms) while controlling for socio-cultural capital in the families. First, there was a small correlation ( $\phi = -.22$ ) between parental mediation and screen availability. Second, the effect of screen availability on usage times ( $r = .39$ ) was much larger (factor 2.6) than that of parental mediation ( $r = -.15$ ). Third, the effect on dysfunctional usage was also somewhat larger for screen availability ( $r = .19$ ) than that of parental mediation ( $r = -.14$ ). Fourth, the effects on content ( $r = \pm .16$ ) were of equal extent. Reducing screen availability is a promising prevention strategy in the family setting facing resistance from media industry, but also from parental convenience and peer pressure among children.

## 12:45-14:15 Lunch

We are pleased to announce that the Science for Prevention Academic Network (SPAN) are using the EUSPR meeting, including a SPAN sponsored lunch on the 23rd October, to disseminate and profile their work. This work covers mapping education, training, research and workforce for prevention science in Europe, the development of a quality plan for tertiary (University) level education, and a method for assessing prevention science education provision alongside the European Credit Accumulation and Transfer Scheme (ECTS).

## 14:15-16:00 Parallel Session 3.1 Optimising prevention outcomes

Location: KARANTANIJA

**Lisa Voigt, Franziska Weymar, Christian Goeze, Christian Meyer, Marcus Dörr, Ulrich John and Sabina Ulbricht**

### DEVELOPMENT OF A COMPUTER-BASED BRIEF INTERVENTION TO INCREASE PHYSICAL ACTIVITY IN LEISURE TIME

*PRESENTER:* **Franziska Weymar**

Background: Physical activity may reduce cardiovascular diseases and cancer. The decline of regular physical exercise with increasing age suggests prevention activities. Methods: Following the Intervention Mapping Protocol we developed a computer-based brief intervention (CBI) aiming to reduce sedentary behavior (SB) and to increase physical activity (PA) during leisure time among adults aged 40 to 64 years. Results: The intervention is based on the Health Action Process Approach (HAPA), comprising three tailored letters based on separate assessments, delivered over six month. The first letter provides information on knowledge regarding SB and PA as well as intervenes on self-efficacy depending on the mindset of participants (non-intender, intender, actor). The second letter focuses on benefits and barriers of PA as well as the role of social support for PA. In case of actional stage, the third letter intervenes on self-efficacy again and suggests action and coping planning. Otherwise, the letter includes ipsative feedback according to the second letter. The number of text modules comprised 594, 306 and 647 for letter one to three, respectively. Currently, the CBI is tested on 177 participants randomly allocated to a control and an intervention group. Conclusions: The study may provide data on feasibility of the CBI and will be used as basis for focus groups to optimize the intervention.

**Mathieu Gurlan, Bruno Fregeac, Lucile Mora, Lydie Roux, Florian Jeanleboeuf and Florence Cousson-Gélie**

## THE GREAT CHALLENGE LIVE AND MOVE AND THE PROMOTION OF PHYSICAL ACTIVITY TOWARD CHILDREN AND THEIR PARENTS: RESULTS FROM A CONTROLLED TRIAL

PRESENTER:

**Mathieu Gurlan**

The "great challenge live and move" (GCLM) is a project implemented since 2013 in order to promote physical activity (PA) in 7-11 years old French school-aged children and their parents. Drawing upon the theory of planned behavior (TPB; Ajzen, 1991), this study aim to test the impact of the GCLM on (1) TPB key constructs (e.g., attitude) and PA practice of children and (2) TPB key constructs of parents as well as their involvement in shared family PA. The primary hypothesis is that the GCLM will increase the proportion of children meeting the current international recommendation of 60 minutes of daily PA. A controlled design is used with 10 schools in the intervention group and 6 schools in the control group. A total of 1120 children (Mean age = 8.94) and 347 parents (Mean age = 40.98) took part in this study. Intervention was one month and a half long and included components targeting both TPB constructs and actual PA practice (e.g., playful PA games). Intervention was implemented by both in-the-field education (e.g., school teachers) and public politics stakeholders (e.g., community of communes). Children answered a questionnaire measuring TPB constructs toward PA and weekly PA practice. Parents also answered a questionnaire measuring TPB constructs toward shared family PA and their involvement in shared family PA. Analyses (e.g., repeated-measures ANOVAs) will be performed to examine potential differences in the evolution of variables between intervention and control group for both children and parents. Results will be available at this time.

**Olivier Allais, Pascale Bazoche and Sabrina Tessier**

## GETTING MORE PEOPLE ON THE STAIRS: THE IMPACT OF POINT-OF-DECISION PROMPTS

PRESENTER:

**Olivier Allais**

Physical activity guidelines encourage the daily accumulation of lifestyle activities, such as stair climbing, since the 2000s. However, physical inactivity is steadily rising in Western countries. This study aimed to evaluate whether stair-promoting signed intervention, located near or at the stairs, could change individual stair-use behavior, and whether specific content messages could have stronger impact. We achieved our objective by following randomly chosen commuters of three Parisian metro stations, characterized by an escalator and an adjacent stairway of less than 24 steps, over 9 weeks. We enable to follow them by daily filming individual's stair/escalator decisions in each station. We found that individual stair use increased significantly during the intervention period, and remained significantly higher than at pre-intervention period even after removal the motivational signs when the message content making salient how easy it is to move is implemented.

**Jeremy Segrott, Heather Rothwell, Jonathan Scourfield, David Foxcroft, Jo Holliday, Kerry Hood, Ceri Phillips, Zoe Roberts, Sarah Morgan-Trimmer, Hayley Reed, David Gillespie, Claire Hurlow, Laurence Moore and Simon Murphy**

## USING IMPLEMENTATION THEORY TO EXPLAIN VARIATION IN DELIVERY OF A COMPLEX SOCIAL INTERVENTION: PROCESS EVALUATION OF THE STRENGTHENING FAMILIES PROGRAMME (10-14UK) IN WALES UK

*PRESENTER:* **Jeremy Segrott**

Studies of the Strengthening Families Program (SFP10-14) universal substance-misuse prevention intervention in the United States have produced evidence of effectiveness but say little about implementation processes. This paper presents findings from the mixed-methods process evaluation of a trial of SFP in Wales (Project SFP10-14UK) during 2010-2012, investigating fidelity and how it was influenced by local contexts.

Structured observation; reports from SFP facilitators; and routine monitoring data assessed the extent to which SFP10-14UK was implemented as intended. Semi-structured interviews with implementers elicited their perceptions of SFP and implementation processes. Qualitative data were coded using a thematic framework. Quantitative and qualitative data were used together to examine reasons for variation in fidelity across research sites. Results were interpreted using the four constructs of the General Theory of Implementation.

Fifty-six programmes were delivered across 7 research sites to 218 families with children aged 10-14 (60% of 361 in the intervention group). National training and positive attitudes of local staff achieved high coverage rates; targets for staffing; and provision of free travel, refreshments and child care. Staffing standards were easier to attain when staff were employed by the same organisation. Targets for group size and composition were met less frequently due to challenges in participant recruitment. Reduced capacity in public-sector organisations during an economic recession (2010-2012) aggravated difficulties in recruiting staff and participant families. While coverage rates and staffing reached high standards of fidelity, requirements for group size and composition were less often met. Mixed methods provided insights into staff and participant recruitment; and the utility of General Implementation Theory in a pragmatic study of a complex intervention was demonstrated.

**Megan Sambolt, Jeanne Poduska, Anja Kurki and Gail Chan**

## THE GOOD BEHAVIOR GAME: ONLINE PROFESSIONAL DEVELOPMENT FOR AN EVIDENCE-BASED PREVENTION PROGRAM

*PRESENTER:* **Megan Sambolt**

In this presentation we share preliminary results from a pilot of online professional development for the Good Behavior Game.

The Good Behavior Game is an evidence-based prevention program that targets antecedents of drug and alcohol abuse in primary school classrooms. Implementation of the Good Behavior Game has shown correlations with a reduction in drug, alcohol, and tobacco use, particularly for males who enter school with early indicators of aggressive and disruptive behavior.

Because effective implementation of the Good Behavior Game has traditionally required on-site training and coaching, many communities face barriers of both program costs and access to trainers and coaches. Online learning provides a potential solution to these accessibility challenges if it can be implemented with similar quality and fidelity to on-site training and coaching.

Our presentation focuses on a small-scale pilot study designed to explore key implementation factors necessary for successful online implementation of the Good Behavior Game training and support model. As part of this pilot process, we converted our in-person professional development into online course modules that combined elements of both facilitated and self-paced learning.

We will share lessons learned from this development process, including key considerations that emerged as essential to the acceptability, feasibility, and relevance on the online training modules. Next we will explore teacher characteristics and patterns of online learning and practice that contributed to fidelity of implementation. Finally, we will discuss potential implications for the field and directions for further research.

## 14:15-16:00 Parallel Session 3.2: Food and nutrition

Location: GRAD

**Nora Döring, Ata Ghaderi, Benjamin Bohman, Berit L Heitmann, Christel Larsson, Daniel Berglind, Lena Hansson, Elinor Sundblom, Margaretha Magnusson, Margareta Blennow, Per Tynelius, Lars Forsberg and Finn Rasmussen**

### PRIMARY PREVENTION OF CHILDHOOD OBESITY WITHIN CHILD HEALTH SERVICES: THE PRIMROSE CLUSTER - RCT

PRESENTER:

**Finn Rasmussen**

**Objective:** The objective was to evaluate a manualized and theory-driven primary prevention intervention program, which applied motivational interviewing (MI) with the aim to prevent childhood obesity. The program was embedded in Swedish child health services and started when eligible children were 9-10 months of age.

**Methods:** Child health care centres (CHC) were randomized and included 1369 families. Families belonging to intervention CHCs took part in nine sessions focusing on the promotion of healthy food and physical activity habits with a nurse trained in MI. Families belonging to the control CHCs received regular care. Primary outcomes were children's body mass index (BMI) and waist circumference (WC) at four years of age. Secondary outcomes were children's and mother's food and physical activity habits and mother's BMI and WC. Effect measures were means ( $\beta$ ) and risk ratios (RR) from linear and Poisson regression estimated with generalized estimating equations.

**Results:** There were no statistically significant differences in children's BMI ( $\beta=-0.11$  [95% CI: -0.31; 0.08]), WC ( $\beta= -0.48$  [95% CI: -0.99; 0.04]) and prevalence of overweight (RR=0.95 [95% CI: 0.69; 1.32]). No significant intervention effect was observed regarding mothers' anthropometric data and mother's and children's physical activity habits. There was a higher consumption frequency of vegetables, fruits and fish and a lower consumption of sugared drinks, French fries and discretionary calories in the intervention group than in the control group.

**Conclusion:** While there were no significant group differences in children's and mother's anthropometric data and physical activity habits, there was suggestive evidence of healthier food habits.

**Aida Selmanagić, Oriana Villa and Jean-Luc Eiselé**

## **IMPROVED ORAL HEALTH IN CHILDREN LINKED TO STRUCTURAL MEASURES REDUCING SUGARS INTAKE (WHO GUIDELINES)**

*PRESENTER:*

**Jean-Luc Eiselé**

Dental caries is the most common chronic disease of childhood, and the most common reason children are admitted to hospital in Western countries. Dental treatment is 5-10% of the global health costs in industrialised countries. Data from the WHO Oral Health Database indicates that the global unweighted mean number of decayed, missing or filled teeth (DMFT) per 12 year old in 2004 was 2.3 worldwide. There are significant disparities among countries ([www.fdiworldental.org/data-hub](http://www.fdiworldental.org/data-hub)). In Bosnia & Herzegovina, the DMFT among 12 years old children is 4.2, and 4.8 in Croatia, to be compared with 1.1 in Italy or 1.6 in Greece. There is a progressive increase in the incidence of caries if sugar intakes are high. In addition to preventive measures including availability of fluoride in drinking water or toothpaste, structural measures are required as recommended by the 2015 WHO Guideline on Sugars intake for adults and children. In both adults and children, the intake of free sugars should be reduced to less than 10% of total energy intake. The food industry has demonstrated its capacity to adapt product composition through reformulation and the dental profession advocate for a rapid enforcement of the WHO recommendations to reduce the burden of dental diseases and chronic diseases. The example of the agreement signed between the Swiss health authorities and the food industry to voluntarily reduce over the next four years sugar content in yoghurts and breakfast cereals will be discussed.

**Valentina Possenti, Paola Nardone, Angela Spinelli, Emanuela Becchis, Giulia Cairella, Paola D'agnese, Gianfranco Mazzarella, Luciana Olivieri, Pierluigi Pecoraro, Raffaella Serrapica, Stefania Stellato and Paola Vairano**

## **HEPCOM: AN INNOVATIVE AND EFFECTIVE WEB-BASED APPROACH TO PREVENT OBESITY BY PROMOTING HEALTHY EATING AND PHYSICAL ACTIVITY IN LOCAL COMMUNITIES**

*PRESENTER:*

**Gianluigi Ferrante**

Using the HEPCom platform, communities can interact with European best practice tools and experiences to be successful in preventing obesity locally. 20 Partners coordinate the European project HEPCom (promoting Healthy Eating and Physical activity in local COMMunities) to improve local interventions implemented aiming to raise awareness on nutritional status as a key contributor to citizens' health protection. A pilot phase has been developed in 15 countries to upscale European projects and practices by a web learning platform that makes available evidence-based tools. Three local communities were selected in each country. Local needs were overviewed, mapping good practices in 32 European projects to identify criticalities in the 45 local pilots (Gap analysis). This cluster is testing a web platform that includes practical tools to be used in planning, implementing and evaluating local interventions. In Italy, three Local Health Units (LHUs) developed pilot experiences in collaboration with schools: Central Naples 1 - Mothers who promote health by peer education; Southern Naples 3 - Growing up happily: Pact for healthy snack break; Rome B - Promoting health by nutritional surveillance system "OKKio alla Salute, 2014". Once data on the 45 pilots are gathered by 90 questionnaires, the platform will be finalized in late 2015. In Europe and in Italy, many young people are overweight and behave unhealthily (wrong eating habits, low physical activity, sedentariness). A correct weight status makes individuals live healthily, reducing the risk of diseases and unsustainable pressure on public health systems. Empowering local communities can help to prevent youth obesity.

**Gareth Hollands and Theresa Marteau**

## PAIRING IMAGES OF UNHEALTHY AND HEALTHY FOODS WITH IMAGES OF NEGATIVE AND POSITIVE HEALTH CONSEQUENCES: IMPACT ON ATTITUDES AND BEHAVIOURAL CHOICE

PRESENTER:

**Gareth Hollands**

Background: The existing evidence base for the impact of affective imagery on health behaviour is most plentiful in relation to graphic picture warnings and smoking, with few experimental studies focused on food products.

Aims: To examine the impact of presenting images of food products paired with images of positive and negative health consequences of their consumption, on food choice and attitudes.

Methods: Participants (N=711) were randomly allocated in a 2 x 3 factorial design (food type x affective valence) to one of six conditioning procedures that paired images of either energy-dense snack foods or fruit, with: (a) images of negative health outcomes, (b) images of positive health outcomes, or (c) a no image control. The primary outcome was food choice assessed post-intervention with a behavioural choice task. Secondary outcomes were implicit attitudes (assessed pre- and post-intervention) and explicit attitudes (assessed post-intervention).

Results: Presenting images of negative health outcomes led to more healthy food choices relative to control and positive image conditions, irrespective of whether they were paired with images of energy-dense snack foods or fruit. This relationship was partially mediated by changes in implicit and explicit attitudes. Images of positive health outcomes did not alter food choices.

Conclusions: This study replicates and extends previous research showing that presenting images of negative health consequences increases healthy food choices. Because effects were elicited by manipulating affective valence irrespective of paired food type, these results appear more consistent with an explanation based on priming than on evaluative conditioning.

## 14:15-16:00 Parallel Session 3.3: Post graduate and Early Career 1

Location: LJUBLJANICA

**Peter Bohan**

## EXAMINING COMMISSIONERS LEADERSHIP BEHAVIOUR

PRESENTER:

**Peter Bohan**

Clinical commissioning groups (CCGs) now control around two-thirds of the NHS budget, influencing healthcare provider priorities and playing a key role in implementing the NHS plan. However, significant failures in healthcare have highlighted a dissonance between expressed values of leaders and everyday routine practices. This research explores the leadership behaviour of commissioners and the role it plays in determining quality and safety in healthcare. The research took a two phase approach: phase 1 used focused video ethnography to observe commissioners in a mock board room setting; phase 2 employed a quantitative questionnaire to determine the leadership behaviours that subordinates would expect their commissioners to adopt. The findings of this research identified that the leadership style most prevalent within the commissioners was transactional in nature. The questionnaire to subordinates of commissioners identified that transformational leadership had the best outcome on staff performance if this was linked to positive leadership style. In addition, commissioners appear to lack consistency when analysing risks effectively and holding providers to account, citing issues such as 'professional drift' and concerns over further scrutiny, as validation for this approach. This confusion of leadership behaviours, allied with poor analyse of risk leaves commissioners prone to repeating previous healthcare failures.

**Rebecca Crook**

## **CAPITAL AND IDENTITY- A THEORETICAL PERSPECTIVE ON DRUG USE**

*PRESENTER:*

**Rebecca Crook**

There are different ways of trying to respond to the potential harmful effects of drug use. Obtaining a greater understanding of the meanings of, and motivation for consumption of drugs is an important part of this, particularly in order to understand why people continue to use drugs after initial experimentation or where there may be a high probability of harm. By exploring the concept of identity in non-dependent drug users and how this affects their substance related decision-making, it may be possible to broaden understandings of use and develop more relevant and responsive interventions and messages of prevention. The roots of identity theory are found in the work of George Herbert Mead (1934) whose work has been simplified into the formula, 'society shapes self shapes social behaviour'. With this theory, the main outcomes of interest are the effects of identification on an individual's sense of self and attitudes towards others, and the actions that are motivated by these socially derived understandings. Bourdieu's (1984) theoretical framework discussed cultural, economic and social capital, recognising how individuals play an active role within the process of identity formation through acting and performing identity within particular social settings in the pursuit of power, status and particular associations. By reviewing the literature and applying these concepts to drug use, this paper explores how theories of identity can help explain why people use illegal substances, in particular, assessing the role of health in the construction of drug user identities and how users negotiate problems and risks associated with drug-identity related behaviour.

**Toni Maglica, Neven Ricijas, Valentina Kranzelic, Martina Feric and Dora Dodig**

## **PARENTS KNOWLEDGE ABOUT YOUTH GAMBLING IN CROATIA - PRELIMINARY STUDY RESULTS**

*PRESENTER:*

**Toni Maglica**

Since 2010, a team of scientist at the Faculty of Education and Rehabilitation Sciences, University of Zagreb continuously conduct a national project called "Youth Gambling in Croatia". Research results show that youth gambling is widespread risk behaviour among Croatian adolescents - 82% of high-school students gambled at least once in their lifetime, around 20% regularly bet on sport events, while 12.9% of young people developed adverse psychosocial consequences related to gambling (Ricijas et al., 2011; Dodig, 2013). This presentation is a result of new pilot-research within project activities called "Parents' perception of youth gambling". Study was conducted in May/June 2015 with high-school students and their parents in a town of Ivanic Grad, while the final study will be conducted in fall 2015. Both subgroups of participants were given a parallel form of questionnaire aimed at exploring gambling activities, knowledge about gambling, attitudes towards gambling and industry etc. The aim of this paper is to explore parents' knowledge about their children's gambling, as well as symptom of adverse psychosocial consequences, while comparing them to children's self-report. Due to increased availability and accessibility of games of chance in Croatia, together with alarming results of conducted studies, project team developed and piloted youth gambling prevention program "Who really wins?". This 9 week program is primarily indented for adolescents, but also includes one 2 hour lecture for parents. Results of this study will serve as a base-line for further research, but also as indicators for developing more efficient preventive interventions aimed at families as a whole.

**Boris Chapoton, Cristel Antonia Russell, Blandine Salles, Yannick Simond and  
Véronique Regnier-Denois**

## **MESSAGES ABOUT DRINKING AND SMOKING IN THE CONTENT OF THE TV SERIES MOST POPULAR WITH FRENCH YOUTH**

*PRESENTER:*

**Boris Chapoton**

Background: The European "Action plan to reduce the harmful use of alcohol 2012-2020" identifies media communications as an important factor affecting youth. References to alcohol and tobacco are indeed common in the content of entertainment programming popular with youth, especially television series.

Objective: This research aims to provide an accurate and thorough assessment of how alcohol and tobacco are portrayed in prime-time television series in France.

Methods: We systematically coded and analyzed visual and auditory references to substances in the 14 TV series most popular with French youth during the 2013 television season (based on Mediametrie ratings). To enable cultural comparisons, half of the series was French and the other imported (primarily US). We focus on how often verbal discussions, visual depictions and actual consumption behavior occur, which character is associated with drinking / smoking, and document the associations with and consequences of drinking or smoking. Procedures and rules of content analysis were followed carefully, with coding conducted by two trained coders, and 25% of the total sample of 180 episodes double-coded. Reliability was assessed via interclass coefficients.

Results: All the data are coded and the analyses are in progress. The findings will be ready for sharing by the time of the symposium. The results of the content analysis will be used to describe generally the extent and nature of alcohol & tobacco portrayals in TV programs. Initial results reveal a wide presence of substance messages: 87.22% of TV series include alcohol messages, 47.78% tobacco and 47.22% show both.

**Kim Ozano and Rose Khatri**

## **PUBLIC HEALTH IN RURAL CAMBODIA: AN EXPLORATION OF VOLUNTEER COMMUNITY HEALTH WORKERS (VCHW) USING PHOTOVOICE TECHNIQUES**

*PRESENTER:*

**Kim Ozano**

A research project in rural Cambodia in partnership with local VCHW's demonstrates the capacity of this valuable workforce to identify and solve public health issues in their communities. Through the use of Photovoice VCHW's were able to show that their concerns were about structural and environmental public health issues that focused on prevention and the wider social determinants of health. However without governmental support for services such as rubbish collection, access to toilets and safe water, long standing problems related to poor hygiene, malnutrition and flood related diseases will continue to be a problem. A follow up participatory workshop enabled the volunteers to categorise and prioritise the issues that matter most to the people in the villages they represent. A realistic action plan to address the issues was developed and included community cooperation, advocacy techniques and education. The VCHWs know the problems and have admirable skills and knowledge of public health. They are driven in their role and are ready to help their communities but without support in the right areas, their ability to improve health is limited. VCHWs could be powerful change agents when affiliated with health systems able to adequately support their work and respond to their insights. The research here shows the capacity for this educated and skilled workforce to identify public health issues and to make plans to improve health in their communities. However while the driving force for health improvements is dictated by external bodies, the issues that matter to the people are being ignored

## 14:15-16:00 Parallel Session 3.4: Substance Use

Location: CENTER

**Laurence Moore, Jeremy Segrott, David Gillespie, David Foxcroft, Jo Holliday, Ceri Phillips, Simon Murphy, Claire Hurlow, Heather Rothwell, Jonathan Scourfield, Zoe Roberts, Hayley Reed and Kerry Hood**

### STRENGTHENING FAMILIES PROGRAMME (10-14UK) SUBSTANCE MISUSE PREVENTION PROGRAMME: FINDINGS FROM A RANDOMISED TRIAL OF A PROPORTIONATE UNIVERSALISM ADAPTATION OF AN INTERVENTION FOR FAMILIES WITH CHILDREN AGED 10-14

PRESENTER:

**Jeremy Segrott**

**Introduction:** The Strengthening Families Programme 10–14 is a family-based alcohol, drugs and tobacco prevention programme, which has achieved promising results in US trials. This trial evaluated a UK adaptation (SFP 10-14UK) which implemented a proportionate universalism approach, aiming to recruit groups in which 30% were families who may experience/present challenges in a group setting, with the remaining 70% of families drawn from the general population.

**Design:** Cluster randomised controlled effectiveness trial with embedded process and economic evaluations. Families were randomised to one of two treatment groups - usual care with full access to existing services (control group), or usual care plus SFP 10–14UK (intervention group).

**Setting:** Multi-agency partnerships delivering SFP 10-14UK in seven areas of Wales, UK.

**Participants:** 715 families were recruited to the trial (Intervention: 361, Control: 354), comprising 918 parents and carers (I:461, C:457) and 931 young people (I: 477, C:454) who consented to participate in data collection.

**Measurements:** The trial had two primary outcomes collected at 24-month follow-up - the number of occasions that young people report having drunk alcohol in the last 30 days, and drunkenness during the last 30 days, both dichotomised as 'never' and '1-2 times or more'. Secondary outcomes included other measures of young people's substance use and health and wellbeing.

**Results:** 81% of recruited young people provided 24-month follow up data. Implementation fidelity was strong. From primary analysis adjusted for covariates, the odds-ratios (intervention vs. control) were, for drinking alcohol: 1.12 (95% Confidence Interval: 0.72-1.73); for drunkenness: 1.45 (95% CI: 0.83-2.52). Subgroup analyses indicated interactions between family status (challenges vs. general population) and intervention group.

**Conclusions:** The intervention was not found to be effective among all families. Subgroup analyses suggested improved outcomes among families with challenges, but worse outcomes among families from the general population.

**Nicolas Arnaud, Christiane Baldus, Thomsen Monika, Peter-Michael Sack, Sonja Bröning and Rainer Thomasius**

## EFFECTIVENESS OF THE GERMAN VERSION OF THE STRENGTHENING FAMILIES PROGRAMME 10-14

PRESENTER:

**Nicolas Arnaud**

Background: Early initiation and heavy substance use in childhood and adolescence is a widespread phenomenon in many parts of Europe including Germany with negative consequences for youth development. Early family based prevention such as the Strengthening Families Programme for Parents and Youth 10-14 (SFP 10-14) can reduce youth-specific risk factors and have shown promising substance use related and behavioral outcomes in several U.S. trials. Objective: To evaluate the feasibility and effectiveness of the German SFP 10-14 adaptation in a multi-centre randomized controlled trial with the expectation to replicate previous U.S.-trial results. Methods: We compared the German SFP 10-14 version comprising of 7 sessions and 4 booster sessions to a minimal 2-hour parenting intervention. The study involved N=288 adolescents and their parents and was conducted in socially disadvantaged neighbourhoods in 4 large metropolitan areas across Germany. Primary outcomes of interest were substance use initiation (alcohol, tobacco, cannabis) and parent-reported behavioural problems and were assessed at baseline, after the programme and after 6- and 18-months. Substance use self-reports were validated with urine samples. Programme effects were analyzed using baseline adjusted logistic regressions and linear mixed models. Results: We found reduced incidence rates for tobacco use and fewer parent-reported behavioral problems among adolescents in the SFP 10-14 group after 18-months but no significant programme effects on alcohol and cannabis. Discussion: The present study is among the first to evaluate family based substance use prevention in Germany. However, as in other European SFP 10-14 adaptations we found modest programme effects with regard to substance use outcomes which do not match the effects reported for previous evaluations in the U.S. We discuss the results with regard to contextual and methodological issues including the need for longer follow-up assessments.

**Olivier Lareyre, Anne Stoebner, Maryline Margueritte and Florence Cousson-Gélie**

## DOES A TPB-BASED INTERVENTION MODIFY TPB-RELATED BELIEFS? P2P A PROGRAM AGAINST YOUTH SMOKING.

PRESENTER:

**Olivier Lareyre**

In France, the issue of youth smoking remains a major challenge for public health. If the peer influence can encourage tobacco use, we observe that the peer education has therefore a beneficial potential to change smoking behavior of adolescents. Moreover, it was demonstrated that Theory of Planned Behaviour (TPB) has yielded the best prediction of intentions and behavior in several health domains. However, TPB is usually confined to measure the processes by which interventions change behavior, rather than to develop these interventions. In P2P program, voluntary students in professional high schools conceived and performed their own intervention, based on the TPB (with help of trained educators), to reduce their schoolmates smoking. One of our objectives was to test if a TPB-based intervention would lead to change TPB determinants (beliefs about attitudes, social norms and behavioral control) and consequently on intentions to smoke and on tobacco behaviors. A RCT design was used with 7 schools in the intervention group and 8 in the control one. Socio-demographic, tobacco status, COtester as an objective measure and elements of the TPB (using indirect measures) were assessed with self-questionnaire before (T0) and five months later (T1), after the intervention. At T0, among 1568 respondents (Mage=16,7, girl=35%), 30% smoked daily, 11% occasionally and 57% are non-smokers. At T1 (N=1325), they were respectively 31%, 13% and 56%. We will analyse changes in TPB outcomes between T0 and T1 using structural equation modelling to compare intervention and control groups, and the impact of those changes on smoking behaviors.

**William Crano, Candice Donaldson, Jason Siegel and Eusebio Alvaro**

## **INVALIDATING PRO-SUBSTANCE BELIEFS IN MARIJUANA PREVENTION: A PROOF OF CONCEPT OF THE DUAL-COMMUNICATION MODEL**

*PRESENTER:*

**William Crano**

Attitudes of youth considering substance initiation can be highly ambivalent. Illicit substances' positive draws - excitement, popularity, rebellion – conflict with fears of harm and detection. Owing to these countervailing beliefs, the balance between initiation and abstinence may be easily tipped. Invalidating the pro-substance elements of attitudes, or resistant reactions to preventive communications without impinging on the attitude's anti-drug cognitions may foster stronger pro-drug attitudes and lessen reactance, especially among the most ambivalent. To investigate this possibility, 119 (of 657) middle-school students expressing the strongest negative attitudes toward anti-marijuana persuasive communications were randomly assigned to a no-treatment control condition, or to one of three different message conditions designed to invalidate the bases of their evaluations. As hypothesized, participants responding negatively to the anti-marijuana communications were significantly more ambivalent toward marijuana than those who responded positively ( $p < .01$ ). In a tailored intervention, the most successful of three treatments that were tested invalidated participants' most negative reactions. A follow-on mediation analysis revealed a significant link of the treatment variable with ambivalence, which was significantly associated with attitudes toward marijuana (both  $p < .01$ ). Further, a Sobel test revealed full mediation ( $z = 2.26, p < .02$ ). Controlling for ambivalence rendered variations among the tailored treatments non-significant. Similar, though somewhat weaker results ( $p < .05$ ) were found on a measure of usage intentions. The results attest to the critical nature of attitudinal ambivalence in preventive persuasion, and suggest a dual-communication invalidating strategy may prove a useful addition to the preventionist's arsenal.

**Roberta Molinar, Fabrizio Faggiano, Elias Allara, Alessandro Coppo and Ilaria Coccato**

## **A RANDOMIZED CONTROLLED STUDY TO TEST THE EFFECTS OF INDIVIDUAL INTERVENTION COMPONENTS ON PROMISING MEDIATORS FOR SCHOOL-BASED PREVENTION OF ALCOHOL ABUSE AND ILLICIT DRUG USE: STUDY PROTOCOL**

*PRESENTER:*

**Alessandro Coppo**

Background – Little is known about the components which compose effective prevention interventions tackling alcohol abuse and illicit drug use. Identification of the most effective components may contribute to making behavioral prevention interventions more effective and efficient. Goals – To evaluate the effects of 4 individual school-based intervention components on promising mediators for prevention of alcohol abuse and illicit drug use in adolescence. Methods/ Design – 4 randomized controlled trials will be performed in 4 centers participating in the Alice Rap project ([www.alicerap.eu](http://www.alicerap.eu)). 1.040 students aged 13-14 will be enrolled (260 students per center evenly distributed across intervention and control group). In each center, 6 schools will be randomly selected and allocated to either of the two study groups. 4 brief school-based interventions composed by two individual components selected from three effective interventions will be delivered by previously trained teachers (one intervention per center). Students in the control group will receive the usual school curriculum. A self-report questionnaire will be administered before and after the intervention in both study groups. The following mediators will be assessed: student beliefs about peer substance use and social acceptability of peer substance use, attitudes towards substance use, refusal skills, and self-control. Discussion – This study will provide evidence regarding the effectiveness of individual school-based intervention components in influencing mediators that are hypothesized to be associated to the prevention of alcohol abuse and illicit drug use among adolescents.

## 16:00-16:30 Coffee Break

## 16:30-18:00 Plenary Session 2

**Chair: Dr Jeremy Segrott (Cardiff University, UK)**

Location: KARANTANIJA

**Dr Nick Axford**

### **Are evidence-based programmes dead?**

There is increasing scepticism in parts of Europe about the suitability and value of evidence-based programmes (EBPs) for improving child outcomes. Common reasons include: the disappointing impact of some interventions, especially flagship programmes imported to Europe from the US; the difficulty often of implementing EBPs with fidelity; and the failure thus far to take any programmes to scale. Counter-arguments include evidence showing that some programmes do work, indeed some work well in multiple contexts (they transport well), and the view that we are still learning how to implement programmes well (the problem is not with EBPs per se).

At the same time, there is life beyond EBPs: they are not a panacea. Alternative approaches include: common elements (often called 'kernels'); common logic models ('meta-theory'); using meta-analyses to inform the reform of existing provision; and redesigning EBPs ('second generation'). Other emerging approaches to using evidence to improve child outcomes include: evidence-based innovation; system reform; changing the ecosystem; and relational social policy.

This paper describes and reviews the arguments and counter-arguments on the usefulness of EBPs, and outlines and critiques the alternative and emerging approaches. It suggests what the future might look like for EBPs.

## **Crime Prevention through Environmental Design: lessons learned**

Crime Prevention through Environmental Design (CPTED) is an approach to prevent crimes as well as incivilities/anti-social behaviour and fear of crime/feelings of insecurity through a multi-agency process to plan, design and manage/maintain a particular physical and social environment or area like a city, town, village, neighbourhood, or set of buildings. The roots of CPTED are very diverse and different. CPTED theory goes back to the social ecological approach of the Chicago school of Sociology. Other roots can be found in architecture and urban design, - planning and - management but also social psychology and situational approaches to prevent crime have been influential in CPTED. The theory is well founded but extremely diverse and in that respect a bit messy.

CPTED in practice is even more eclectic since it hardly ever looks the same but – using a few general principles like territoriality, surveillance, accessibility, activity support, target hardening, image & maintenance, – always adapts itself to the local situation. It is an organic social-physical approach of prevention. Only very few measures can be fixed as rock hard requirements. As soon as more sophisticated social situational approaches are needed – like in a neighbourhood or community - the approach is an adaptive and organic one. However the CPTED approach is often very structuralized when a specific standardised process is followed. Next to several very successful schemes there are even standards for implementing CPTED.

The CPTED approach is always time-place specific. The neighbourhood level – as a geographical social-physical entity – can be a pillar structuring the approach. CPTED might be an example for the approaches in Health Promotion and Disease Prevention through Environmental Design.

## **20:30-23:00 Conference Dinner (prior booking required)**

# FULL PROGRAMME

---

## Conference Day 3: Saturday October 24th

### 10:00-11:45 Parallel Session 4.1: Prevention policy and practice

Location: KARANTANIJA

**Frances Kemp, Anam Raja, Cassandra Ohlson, Louise Morpeth and Nick Axford**

#### Mapping expenditure in children's services: a method and findings from one region

PRESENTER: **Nick Axford**

Across Europe many states are experiencing severe pressures on public services, both from escalating need and from diminishing budgets. As a result there is increasing interest in understanding how much is spent on services for children, and, importantly, to what effect. In spite of a requirement in Article 4 of the UN Convention on the Rights of the Child for states to establish a children's budget, progress has been slow.

As part of an approach to help public systems increase their investment in evidence-based prevention and early intervention, the Dartington Social Research Unit has developed a method of mapping expenditure across all parts of children's services (education, social care, health, youth offending, early years). Suitable for use at national and local levels, the output provides a strong foundation for discussions about the balance of expenditure (prevention, early intervention and treatment), opportunities for de-commissioning and for the extent to which money is spent on evidence-based interventions.

The presentation will describe the method and share findings from a recently published report on fund-mapping in Northern Ireland, UK, and offer insights into the relevance of the method and findings for other jurisdictions.

**Rachele Donini, Renzo Balugani, Anna Zunino, Maurizio Panza and Franco Badii**

#### TOGETHER WE CAN: STAKEHOLDERS INVOLVEMENT AS A KEY FACTOR IN DEVELOPING A TRAINING TOOL FOR PREVENTION PRACTITIONERS.

PRESENTER: **Rachele Donini**

Experience teaches us that trainings that don't keep into account the needs and points of view of the final recipient can be less effective than approaches that involve the trainees. Active participation of targets in designing a training tool can be a key factor for its success. In the present case the training tool is a guide to help trainers in developing training courses. It's one of the outputs of the second phase of a European project aimed to disseminate the European Drug Prevention Quality Standards (EDPQS), built by the EDPQS Partnership in the first phase. We chose to adopt a target involvement approach in order to promote the best impact and use of the training tool. We think that an active involvement of the targets - that in this case are policy makers, drug prevention practitioners and university students - contributes to build a tool that is more representative of the different needs and perspectives, user-friendly and effective. At the same time this process allows an acknowledgement of the different kinds of expertise and a sense of ownership of the tool. All these factors should facilitate the adoption and the dissemination of the trainer's guide by the people working in the field of drug prevention. In the presentation, the involvement process is discussed in terms of: the recruitment of the stakeholders, the ways adopted to develop the trainer's guide, the timing and the final results.

**Gregor Burkhart**

## INTERNATIONAL STANDARD S IN PREVENTION: HOW TO INFLUENCE PREVENTION SYSTEMS BY POLICY INTERVENTIONS?

PRESENTER:

**Gregor Burkhart**

The existence of multiple standards for drug prevention, published by different national and international organizations, might seem redundant and confusing at a first glance. This paper aims to explain the rationales of the different standards and that they differentially respond to specific challenges of each of the three main components of a prevention system: interventions, services and people. Effectiveness standards can improve the effectiveness of programs and interventions, while process standards can improve the context within which effective programs and interventions are implemented. The variety of the existing standards and their different level of exigencies can be beneficiary if policy makers apply them in combination - i.e. choosing effective interventions and assuring that they are properly implemented and accepted - and in the appropriate cultural and geographic context. Other international organizations involved provide additional support such as certified training and online resources. Taken together, these initiatives might pave the way for setting up accreditation systems, in some countries, and help to assure that prevention providers take up such effective interventions and that prevention professionals are capable of implementing and willing to use them. All this requires however the political will to actually implement these standards since it implies revising, challenging and improving customary prevention systems with often traditional approaches.

**Silvia Caristia, Alessandro Coppo and Fabrizio Faggiano**

## FROM BEST PRACTICES TO IPEST: A NEW TOOL FOR EFFECTIVE PREVENTION ACTIVITY

PRESENTER:

**Silvia Caristia**

Background: in Italy impact of prevention activities of behavioral risk factors is not evaluated and many implemented interventions are not supported by evidence of efficacy/effectiveness, with unpredictable effects on the prevention practice. Objective: to design a model of identification of "best practices" for prevention activity. Method: we reviewed the different interpretations of best practice concept in the scientific literature and we discussed this concept and his meanings with some Italian prevention experts. Results: best practice term evokes a great variability of interpretations and meanings which we can attribute to two major complementary visions: "best practice" as an evidence-based practice and "best practice" as a process. The concept of best practice recalls different aspects of prevention action and sometimes it is not linked to the concept of efficacy/effectiveness. Also, best practice concept is frequently abused and misunderstood. Conclusion: there is a high risk of implementing intervention called "best practice" but with unpredictable, also iatrogenic, effects. To solve the issue of the heterogeneity of definitions we suggest the adoption of a new term to indicate actions (evaluable sections of intervention, of a program or of a strategy of action) that aim at the prevention of risky behaviors: Ipest, an Italian acronym for indicate the concept of efficacy, sustainability and transferability of interventions to the national context. The creation of a repository of Ipest could support policy makers and professionals of public health systems.

**Michal Miovsky, Veronika Martanova and Helena Pacnerova**

## **PILOT TESTING OF 4-LEVEL MODEL IN 4 REGIONS IN THE CZECH REPUBLIC: IS REAL TO IMPLEMENT THE NATIONAL QUALIFICATION SYSTEM FOR PROFESSIONALS IN PREVENTION OF RISK BEHAVIOUR?**

PRESENTER:

**Michal Miovsky**

Background: After 4 years since formulating and publishing of model for quality assessment for professionals in prevention decided the Ministry of education to test this model. For many years we have solved in the Czech Republic a significant complication how to assess a qualification of preventive workers (professionals in prevention of school behaviour) not only because it is a component of quality standards and quality assessment in prevention but also because of safety and economical issues. During 2010-2012 were created an original model of 4 qualification levels (Charvat et. al, 2012) in school prevention. The model was created on the basis of analysing the content of the documents dedicated to school prevention training (laws, decrees, training programme syllabi and guidelines, their creation, etc.) and on the basis of four focus and working groups consisting of the foremost experts in primary prevention in the Czech Republic. The proposal concerns 4 qualification levels arranged hierarchically by the degree of complexity, which correspond with the typical positions of a prevention practitioner in the school system. The objective is to present results from first real testing of this model in practice in 4 regions of the Czech Republic. We had 103 professionals in the research sample and sorted them into the 4 levels according to published Manual of 4-level model. All professionals (teachers, psychologist etc.) we assessed through the suggested procedure (Charvat et. al, 2012). Methods: For evaluation we used an adopted WHO guideline for process evaluation (WHO, 2000; Neaman et al., 2000). We analysed and assessed: (a) all materials (textbooks etc.) what professionals used, (b) testing procedure and its technical aspects, (c) documentation of testing procedure, (d) results of pilot testing of professionals, sustainability and (e) feasibility for potential further implementation in the Czech Republic. Results: We found inconsistency in requirements and set of training materials where is necessary better and more exact definition what are requirements for theoretical test (exact list of questions and theoretical areas). Description of knowledge, skills and competencies is necessary improve and clarify. Testing procedure needs standardisation (too wide space for different interpretation led to very different procedures in different regions). In the case of further implementation is necessary to train staff (members of testing commissions) from all regions together and use similar training procedures and model situations. Support: GAČR no. 13-23290S; Institutional support from Programme No. PRVOUK-PO3/LF1/9.

## 10:00-11:45 Parallel Session 4.2: Alcohol

Location: GRAD

**Sandra Radoš Krnel and Aleš Lamut**

### THE COLLECTION OF GOOD PRACTICE EXAMPLES AIMED TO REDUCE ALCOHOL RELATED HARM

*PRESENTER:*

**Sandra Radoš Krnel**

Joint Action on Reducing Alcohol Related Harm is an initiative under the EU health programme to take forward the work in line with the first EU Strategy on alcohol related harm. The work is carried out through a cooperation by expert organisations from 31 European countries. RARHA's Work Package 6 aims to present a Tool Kit of interventions that have demonstrated their effectiveness, transferability and relevance. The questionnaire to collect the examples of good practices was developed, which consists of six sections: Evidence base, Basic facts, Development, Implementation, Evaluation and Additional information. In the communication with MS representatives and WP 6 partners we decided to collect the examples of good practices appertain to one of the three groups of interventions: Early interventions, Public awareness and School-based interventions. Using JA RARHA network and CNAPA we have searched for professionals experienced in alcohol related interventions, with a good overview and knowledge on interventions in their country, to provide reliable data at country level. From 32 Countries, 48 cases were collected, 43 with evidence base. Among cases with evidence base (n= 43), early interventions represented most of the collected cases (49 %), followed by School-based interventions (30 %) and Public awareness/education interventions (21 %). A vast majority (49 %) of evidence based interventions were founded from National/regional/local government and mostly implemented on national level (35 %), followed by implementation on national, regional and local level together (19 %). Mostly the implementation of the interventions was continuous (integrated in the system) (63 %). The collected interventions targeted predominately adolescents (22 cases), parents (17 cases), young adults (15 cases) and adults and general population (13 cases both). The preliminary data presented will facilitate exchange between MS public health bodies of evidence-based interventions to reduce alcohol related harm.

**Natalie Durbeej, Camilla Jalling, Tobias Elgán, Harold Holder and Johanna Gripenberg**

## **ASSESSING ALCOHOL USE AT SPORTING EVENTS: A NOVEL APPROACH FOR ALLOCATING A COMMUNITY-BASED ALCOHOL INTERVENTION IN SWEDEN**

**PRESENTER:** **Natalie Durbeej**

Introduction: Heavy alcohol use and violent behaviors at sporting events are of increased concern in Sweden and abroad. The relationship between alcohol use and violence is firmly established. Specifically, community-based alcohol interventions provide a promising strategy to reduce alcohol use and violence at sporting events. Knowledge is lacking, however, about the levels of alcohol use at sporting events in Sweden. Objective: To assess the level of alcohol use at football arenas in Sweden. Method: A pre- and posttest study design with two sites: Stockholm (project area) and Gothenburg (control area). The data collection is currently ongoing. Eighteen research assistants, divided into six teams, collect data at football arenas at each site. Spectators are randomly selected and invited to participate in the study. Alcohol use is measured using a breath analyzer for Blood Alcohol Concentration (BAC) levels. Additional data on gender, age, and recent alcohol use are collected through face-to-face interviews. Results: Data from approximately 3000 spectators will be collected in total. The study will report baseline data on average BAC levels in the total sample, among participants with BAC levels >0.00%, and among male and female participants, respectively. Furthermore, the number of participants with high BAC levels (e.g.  $\geq 0.15\%$ ) will be presented. Discussion: This study is part of a larger project that will be conducted in two phases. The results from the current study (phase I) will support the design of a community intervention to reduce alcohol use and violence at football arenas in Sweden (phase II).

**John Foster**

## **REASONS FOR HOME DRINKING IN THE UK: AN INTERNET SURVEY**

**PRESENTER:** **John Foster**

Background: Over the past 20 years there has been a significant shift from drinking in public houses and bars to drinking at home. Recent figures from the British Beer and Pub Association show that 80% of wine in the UK is now consumed at home. Drinking at home is generally regarded as safe and commonly compared favourably to public binge drinking especially when conducted by young people. Method: Internet survey of the reasons for drinking at home and some of the accompanying behaviours was conducted amongst University staff recruited from the central University address book. An additional small sample was recruited through Facebook and twitter contacts. Results: The total sample was 529. The response rate was 26%. Fifty-eight percent of women completed the survey, 51% participants were in the 20-39 age range. The mean AUDIT score was 8.1 (SD=5.3). The main reasons for drinking at home were because it was convenient, and aid to relaxation and cheap. The following were the activities most associated with drinking at home that were most endorsed by the sample; drinking alcohol with meals, whilst having barbeques in the garden and watching television. Conclusions. These findings provide further insights into the reasons why adults chose to drink alcohol at home in the UK and can help design targeted information that can promote less risky behaviours when drinking at home.

**Rachel Pechey, Dominique-Laurent Couturier, Marcus R. Munafò, Angela S. Attwood, Gareth J. Hollands, Eleni Mantzari, Nicholas E. Scott-Samuel, Andy Woods and Theresa M. Marteau**

## DOES GLASS SIZE INFLUENCE (A) JUDGEMENTS OF THE VOLUME OF WINE AND (B) WINE CONSUMPTION? LAB AND FIELD STUDIES

PRESENTER: **Rachel Pechey**

Background:

Judgements of volume may influence the rate of consumption of alcohol and, in turn, the amount consumed. The aim was to examine the impact of wine glass size on (a) perceptions of volume and (b) consumption.

Methods:

Study 1: Online experiment: Participants (n=360) matched the volume of wine in two wine glasses: a reference glass holding a fixed volume, and a comparison glass, in which volume was altered by participants until they perceived it matched the reference volume. One of three comparison glasses was shown in each trial: 'wider'; 'larger'; 'wider-and-larger'.

Study 2: Multiple treatment reversal design: Changing glass size in one bar/restaurant, in 8 fortnightly periods: A (Standard 300ml); B (Larger 370ml); A; C (Smaller 250ml); B; A; C; A. Consumption was measured by wine sales.

Results:

Study 1: Relative to the reference glass, participants tended to under-fill the wider glass and over-fill the larger glass. These perceptual differences could influence drinking behaviour, while larger glasses may also increase consumption when wine is served by bottle if larger portions are poured. These hypotheses are tested in Study 2.

Study 2: Wine sales were 9% (95%CI: 1.9,17.5) higher with larger compared to standard-sized glasses. This seemed principally driven by sales in the bar area (14%; 95%CI: 3.3,26.7) compared with the restaurant (8%; 95%CI: -2.5,20.1). Sales were similar for smaller and standard glasses.

Conclusions:

These studies provide the first evidence that wine glass size influences perceived volume (Study 1), and can affect consumption, with larger glasses increasing consumption (Study 2).

**Katarzyna Okulicz-Kozaryn and Raduj Joanna**

## THE ALCOHOL SPECIFIC PARENTING PRACTICES CONCERNING ADOLESCENTS' DRINKING BEHAVIORS

PRESENTER: **Katarzyna Okulicz-Kozaryn**

Background: Despite the legislation setting the minimum purchasing age, many Polish parents, accept alcohol use by their 15-year olds and/or set their own rules. Aim: To explore parental knowledge, attitudes and rules concerning alcohol use by their children, as well as their relationship with adolescents' pre- and post initiation drinking behaviors. Method: Cross-sectional questionnaire data collected from the random sample of Warsaw 15-year old students (N = 984) on: alcohol use and getting drunk, perception of parental rules and attitudes toward alcohol use by a child, parental monitoring and support, school climate and peers' support. Quantitative analysis were preceded by analysis of adolescents' own descriptions of parental behaviors and attitudes. Results: Parental disapproval of alcohol use by teenagers (faced by 40% of respondents) and setting clear rules forbidding alcohol use (reported by 25%) are significant protective factors. Among adolescents who already drink (75%), the risk of getting drunk is lower if the parents know from their children that they drink alcohol (about 50% of young alcohol users talked about it to their parents). Parental factors seemed to be more significant for girls than for boys and for those who had not initiated alcohol use yet. Conclusions: Parents use a lot of strategies to protect their children from future alcohol-related problems. More effort is needed to empower them to choose the most effective ones.

## 10:00-11:45 Parallel Session 4.3 Post Graduate and Early Career 2

Location: LJUBLJANICA

**Martha Canfield, Amy Moon, Pam Maras, Sajid Humayun and Claire Monks**

### PSYCHOSOCIAL FACTORS ASSOCIATED WITH YOUTH ANTISOCIAL BEHAVIOUR

PRESENTER:

**Martha Canfield**

Youth antisocial behaviour is a major concern for government and policy makers as well as parents, teachers and schools. Youths who exhibit antisocial behaviour are more likely to report poor self-perception, dissatisfaction with school, school drop-out, and criminal behaviour. Moreover, a large number of young people from urban places are coming from low-income families that exist within a community context of disempowerment, limited access to resources, and daily exposure to violence, crime and abuse. In the context of a culture that becomes increasingly more complex and diverse, understanding how youth from these areas are confronting challenges and making life choices that define an individual's sense of personal and moral control are critical as these can be a challenge even for the most resilient youths. School based interventions offer a promising approach of encouraging proactive participation and commitment in youth coming from such diverse places. However, there is little evidence about the factors that might assign students to these interventions. With the aim of contributing to close this gap in the current literature, the present project sought to explore a set of psychosocial factors associated with problem behaviours in youths at school. More precisely, we investigated the relationship between problem behaviours, personality traits, social identity, school based social roles, and parental approaches in a quantitative study with 300 students in London, UK. Results indicate a relation between antisocial behaviour and different school based roles and revealed that identification with school is a key factor associated with prosocial behaviours.

**Sinziana I. Oncioiu, Livia Franchetti Pardo, Suvi Virtanen and Rosaria M. Galanti**

### BEYOND RANDOMIZATION: "PER-PROTOCOL" AND "AS-TREATED" ANALYSES OF BRIEF COUNSELLING ON TOBACCO CESSATION IN DENTAL CLINICS (THE CLUSTER RANDOMIZED CONTROLLED TRIAL FRITT)

PRESENTER:

**Sinziana I. Oncioiu**

**Introduction:** In the FRITT study, the intention-to-treat analysis showed that brief structured counselling for tobacco use cessation delivered in dental clinics increased the likelihood of half-reduction, but had no effect on 7-days abstinence. If full protocol adherence is achieved, the assigned intervention measures the received intervention, but this is rarely the case in public health interventions. The effect of the received intervention can be estimated performing per-protocol and as-treated analyses. The aim of this study is to increase the understanding of how tobacco use cessation is influenced by the receipt of a brief counselling intervention in dental clinics.

**Methods:** We conducted a) per-protocol analysis, where individuals randomized to receive the intervention and actually receiving it, as described in the protocol, were contrasted to those randomized to the control group; and b) as-treated analysis where individuals from both experimental arms were compared according to counselling actually received.

**Results:** Protocol adherence among dental practitioners in the intervention arm was 73.8%. Both per-protocol and as-treated analyses show a statistically significant effect of brief counselling on the reduction in tobacco consumption compared to baseline. No statistically significant effect was found for the primary outcome, 7-days abstinence.

**Conclusion:** In the FRITT study, protocol adherence was high and the results from per-protocol, as-treated and intention-to-treat analyses are similar. Per-protocol and as-treated analyses strengthen the inference made from the intention-to-treat analysis.

## **Angelina Brotherhood**

### **EXPLORING DRUGSPHERES: WHAT CHARACTERISES SETTINGS WHERE SUBSTANCES ARE (NOT) CONSUMED?**

*PRESENTER:*

**Angelina Brotherhood**

To be effective, interventions must be based on an understanding of why people use drugs. The idea of prevention 'without talking' inspires us to look at the specific contexts of substance use, as well as to tap into people's implicit knowledge and beliefs concerning substance use. The present study does both of these things by exploring perceived characteristics of settings where substances are consumed (and where not). I am interested in understanding why people use certain substances in one place, but not another; and why people have different ideas about where to use what substances. Borrowing from Albrow's notion of 'socosphere', I propose the term 'drugsphere' to describe an individual's personal map of substance use. Using different question prompts in a repertory grid interview, I obtain an insight into drug-specific decision-making and reasoning (e.g. "I'm likely to get caught here, but not here"; "it would be weird to do that here"), but also into how general socio-spatial features (e.g. people, atmospheres, work/play) relate to substance use. Understanding this latter aspect is crucial if we are to appreciate the implicit functions and meanings of substance use. The study thus contributes to a growing body of research which emphasises and explores the relational embeddedness of substance use in time and space. Data collection is ongoing and so the presentation will offer initial findings for discussion. Possible implications for public health interventions will be highlighted.

## **Nikki Gambles**

### **EXPLORING THE RELATIONSHIPS BETWEEN UNIVERSITY LIFE AND STUDENT DRINKING BEHAVIOURS DURING THE TRANSITION TO AND THROUGH UNIVERSITY**

*PRESENTER:*

**Nikki Gambles**

Recent trends suggest heavy drinking patterns that develop during the student years are continuing to adulthood, which has put the university student 'binge drinking' phenomena at the forefront of public health concerns. Current concerns exist over students' pursuit of deliberate drunkenness, which appears to have become normalised and expected within the university environment. Current UK university prevention strategies that try to tackle these social norms of irresponsible drinking have proved to be resistant in changing attitudes towards alcohol and its use. It is likely that students' motives to consume alcohol change across their university life course. Few alcohol prevention strategies have been tailored to individual academic year groups, which may explain students' disassociation with current interventions. For first year students the move to university represents a major life transition as many seek to make new friends and experience pronounced changes within their social environment and role of responsibilities. Stress, freedom, social pressures and opportunities are likely factors that may affect alcohol use during the first year at university. In comparison, third year students typically have increased workloads and impending career decisions. Understanding the meaning and motivation behind drinking habits during each academic year of university will help educationalists and policy makers develop effective responses that relate to each university student, in an attempt to change the social norm of irresponsible drinking at university. This research is part of a wider PhD programme which aims to look at students' motives, perceptions and drinking behaviour during to the transition to and through university.

**Kaidy Stautz**

## **ALCOHOL PROMOTING AND ALCOHOL WARNING ADVERTISEMENTS: IMPACT ON IMPLICIT COGNITION, EMOTION, AND CRAVING**

*PRESENTER:*

**Kaidy Stautz**

Restricting alcohol advertising and developing alcohol warning media campaigns have the potential to reduce alcohol consumption across populations. There is, however, limited understanding of the psychological mechanisms that underlie their effectiveness. Two experiments were conducted in which drinkers were randomly allocated to one of three groups: exposure to alcohol promoting, alcohol warning, or non-alcohol advertisements. Experiment 1: 373 participants' (aged 18-40) explicit and implicit attitudes towards alcohol were assessed pre- and post-exposure. There were no main effects of advertisement condition. However, among heavier drinkers, implicit attitudes became more positive in response to alcohol promoting advertisements and less negative in response to alcohol warning advertisements, compared to non-alcohol advertisements. Experiment 2: 150 young adults (aged 18-25) reported their affective responses to advertisements and their urge to drink alcohol following advertisement exposure. Participants exposed to alcohol warning advertisements reported significantly lower urges to drink alcohol than those who viewed either alcohol promoting or non-alcohol advertisements. This effect was fully mediated by negative emotional responses (displeasure) to the alcohol warning advertisements. Results are in line with research into anti-smoking media campaigns, which indicate that advertisements eliciting negative emotions have high perceived effectiveness, yet also highlight the possibility of iatrogenic effects among heavy drinkers. The impact of these advertisements upon actual consumption is currently being assessed in a laboratory-based experiment.

## 10:00-11:45 Parallel Session 4.4: Prevention development

Location: CENTER

**Tim Hobbs, Kate Tobin, Daniel Ellis and Michael Little**

### THE MISMATCH BETWEEN NEEDS AND SERVICES

*PRESENTER:* **Kate Tobin**

**Introduction:** It is generally hoped that targeted services for children and young people are provided to those that need them. However, it has long been hypothesised that this may not necessarily be the case. The Dartington Social Research Unit has explored this issue over many decades and is now able to report on robust empirical data on children's well-being, service use and the degree to which services meet needs.

**Methods:** We have contributed to the development of a suite of survey instruments designed to measure the well-being of children and young people at a local population-level. Survey instruments are comprised of standardised and valid instruments that produce reliable indicators of children's physical and mental health, behavioural and social development, as well as a wide range of associated risk factors: contexts or experiences in the home, school, peer or community environment that increase the likelihood of poor outcomes.

These survey instruments were administered to all children aged 9 to 15 in all state schools across three local authorities in Scotland (n = 26,100; with a 86% response rate). These survey data were then confidentially matched to existing administrative data on service use (child welfare, youth justice, special educational support or mental health services).

**Results:** We drew thresholds to identify the proportion of children from across the local population – not just those in contact with services – that had high levels of need (i.e. multiple likely impairments to their health and development). Across the three local authorities the proportion of children in this 'high need' group was approximately 23%. The proportion receiving targeted services was approximately 12%. The proportion of those in the 'high need' group that were receiving targeted services was approximately 26%.

**Implications:** These data have profound implications for policy and practice. They indicate that the level of high need within a population is likely to be far greater than public systems have the capacity to meet. Strategies to mitigate this situation include: (a) greater investment in prevention and early intervention to reduce the proportion of children within a population with high need; (b) a better alignment of existing targeted services to meet the needs of the population, either by expanding reach of services (which is unlikely in the current economic climate) or by more effective processes to ensure that the limited resources of services are targeted to those most in need.

**Harrie Jonkman**

## COMMUNITY ANALYSIS IN THE NETHERLANDS. VIOLENCE AND DELINQUENCY, RISK FACTORS AND PROTECTIVE FACTORS

PRESENTER:

**Harrie Jonkman**

At the moment we are working on a book under the title *Delinquency and Drug Use in Europe: Understanding Risk and Protective factors*. We try to understand delinquency and drug use of adolescents in Europe, the development of them, the risk and protective factors in the daily contexts of adolescents; the youngsters and their communities. For this we use the CtC-survey as a social epidemiological instrument to research communities and to compare studies. Comparative studies are done in England, Netherlands, Croatia, Cyprus, Germany, Austria and Sweden. Here, the study of the Netherlands will be given as an example (H. Jonkman & C. Hosman) It is a research among 5,765 youngsters carried out in 2011 of youngsters in 55 communities in the Netherlands on violence and delinquency, other problem behaviours, risk and protective factors. In the presentation violence and delinquency of youngsters will be shown in a comprehensive perspective. We show the prevalence of violence and delinquency among youngster (12-17 years) and how they are associated with other problem behaviours (smoking, drinking of alcohol, hash use and depression). For violence and delinquency we studied the separated influence of different risk and protective factors in the contexts of family, school, friends and community. We look at the Odds Ratio's as an adequate measure of the association. We also show the Effect Sizes as a magnitude of the association. For the purpose of prevention it is interesting to research what it means for violence and delinquency when we decrease the exposure of risk factor or increase the exposure of protective factor. For this we use the Population Attributable Fraction. We end this presentation with research of the cumulative effect of risk and protective factors which cluster together on violence and delinquency. Some conclusions will be drawn and discussion will follow.

**Maria Antonia Gomila, Rosario Pozo, Joan Amer, Carmen Orte and Lluís Ballester**

## ETHNOGRAPHY AS A METHOD TO ASSESS CULTURAL ADAPTATION OF A PREVENTION FAMILY PROGRAMME

PRESENTER:

**Maria Antonia Gomila**

Family Competences Programme 12-16 is the Spanish adaptation of the Strengthening Family Program targetted to low risk adolescents and their families. The former version (6-12 years) has been implemented in Spain since 2009 assessing good results (Orte et al. 2008, 2012, 2013). The longitudinal analysis has also shown interesting outcomes (Orte et al 2013, 14). Intervention effectiveness depends very much on a balance between fidelity and cultural adaptation (Kumpfer et al. 2012). An adaptation process must seek how to match fidelity with the needs and preferences of the specific age and culture group (Aarons et al., 2012; Glez Castro et al. 2010, Kumpfer et al. 2012, Marsiglia y Booth, 2014). The aim is to increase the participant's permanence at the programme but also to increase the impact obtained in the expected results while keeping the core elements of the programme (Kumpfer et al. 2012). Adaptations might include a number of changes in many of the elements of the programme (language and cultural expressions, materials, graphics and draws, activities...). It is also possible to reorder certain components without threatening the effectiveness of the programme (Aaron et al, 2012). In this sense, the use of ethnographies of the sessions can be a positive method to assess the quality of the changes and strategies developed in the adaptation process and to increase the possibilities of participant's permanence in further implementations. The aim of this paper is to discuss the relevance of this qualitative methodology for a better understanding of the responses of the participants to the programme, as a way to improve the adaptation process. This process should lead to a validation of the different programme components (activities, materials, contents...) and to increase the impact of the results. The paper presents the results of the analysis of the ethnographies of the 14th sessions of the FCP 12-16 carried out in a pilot implementation with a selected group of families in a secondary school at Palma of Majorca. In order to assess the participant's response to the programme we have used ethnographies in each session, focusing on attitudes, comprehension, involvement and motivation, relationships, management of the situations, etc., both of the participants and the facilitators.

**Kimberly Rhoades, Tamara Del Vecchio and Christina Grice**

## **SITUATIONAL BARRIERS TO THE USE OF EFFECTIVE PARENTING PRACTICES: GOING BEYOND SKILLS TRAINING**

*PRESENTER:*

**Kimberly Rhoades**

Programs aimed at preventing child maltreatment and dysfunctional parent-child interactions predominately target parental knowledge of effective parenting skills. Although largely effective, these prevention programs function under the implicit assumption that if parents have knowledge of effective parenting strategies, they will then implement that knowledge in real-world situations. Identifying and modifying situational barriers to the use of effective parenting techniques may improve parent-child interactions without directly intervening with families. We examined predictors of the discrepancy between mothers' parenting technique knowledge and implementation. Participants included 65 mothers of 2-4 year old children. Mothers' reported using significantly more harsh and permissive parenting than they believed they should use ( $t(64) = 11.65, p < .001$ ;  $t(64) = 7.27, p < .001$ , respectively), indicating that although they had knowledge of effective parenting practices, they did not consistently use that knowledge. Situational variables (time pressure, multitasking, and parenting in public) did not predict the harsh parenting discrepancy. Mothers' reports of feeling time pressure while parenting predicted the permissive parenting discrepancy ( $\beta = .25, p < .05$ ). There was also a significant interaction between time pressure and maternal impulsivity ( $\beta = -.30, p < .05$ ); impulsive mothers were more likely to report discrepant permissive parenting when they were under time pressure than were mothers who were less impulsive. Policies with the potential to reduce time pressure demands for mothers (e.g., mandated maternity and paternity leave, family-centred workplace policies) may reduce mothers' use of permissive parenting practices, particularly for mothers who report higher levels of impulsivity.

## 11:45-12:15 Coffee Break

## 12:15-13:00 Plenary Session 3

**Chair: Prof David Foxcroft (EUSPR President & Oxford Brookes University, UK)**

Location: KARANTANIJA

**Prim. Dr Polonca Truden Dobrin**

### **Towards Better Health and Reducing Inequalities in Health - Changing the preventive health care for children and adolescents in Slovenia**

Preventive health care programmes for infants and preschool children have been in place for several decades in Slovenia. Their aim is to improve the physical, mental and social health of infants, children and adolescents. The preventive programmes are financed by compulsory national health insurance. Their content is defined by the guidelines for preventive health care at the primary level. This kind of organisation of services has led to a high percentage of preventive attendances and high percentage of immunisation coverage in our population. As we are facing new emerging health problems in children and adolescents due to changing life style, changes in preventive programmes are necessary to meet the needs of young population and improve our efficiency. We need not only well educated health care providers with enough knowledge, skills and empathy for children and adolescents but also well-organized primary health care system and in particular well developed inter-sectoral and multidisciplinary approach, using settings-based approaches to health improvement. The new programmes will be supported by new information system which will enable better monitoring and adaptation of the system to the needs of children and adolescents.

In the presentation the necessary changes recommended by the multidisciplinary working groups are presented. This work is co-financed by the Norwegian financial mechanism.

## **Prize giving and conference close**

## Restaurants

**Address:**  
Petkovškovo nabrežje 21, 1000  
Ljubljana

**Phone:**  
+386 1 439 68 55

**E-mail:**  
[most@t-2.net](mailto:most@t-2.net)

**Web page:**  
[www.restavracija-most.si](http://www.restavracija-most.si)

**Open:**  
Mon to Sat: 11am – 11pm,  
Sunday: 12am – 10pm.

**Address:**  
Gospodsvetska 1  
1000 Ljubljana

**Phone:**  
+386 41 82 50 01

**E-mail:**  
[info@currylife-figovec.si](mailto:info@currylife-figovec.si)

**Web page:**  
[www.restavracija-most.si](http://www.restavracija-most.si)

**Open:**  
Mon - Sat: 11am – 11pm  
Sunday: 11am – 5pm

**Address:**  
Nazorjeva 2  
1000 Ljubljana

**Phone:**  
+386 1 308 19 07

**E-mail:**  
[info@smrekarjevhram.si](mailto:info@smrekarjevhram.si)

**Web page:**  
<http://www.union-hotels.eu/sl/grand-hotel-union/gostinska-ponudba/restavracija-smrekarjev-hram/>

**Open:**  
Mon-Fri: 5pm – 11pm

### Restavracija Most/Restaurant Most

Most, located by the Butchers' Bridge, is one of Ljubljana's delightful restaurants taking influence from Mediterranean cuisine while at the same time remaining faithful to the traditions of Slovenian cooking. Practically, this means that the restaurant draws on culinary influences from the south-western Slovenian regions of Kras and Istria and the coast. The menu features a good choice of fish and meat dishes.

Menu choice: Slovenian dishes, Mediterranean dishes, seafood, game dishes, vegetarian dishes, grilled dishes, lunchtime menus, desserts, premium Slovenian wines.

Additional amenities: outdoor seating, baby changing facilities, high chairs, wireless internet, takeaway service.

### Curry Life Figovec

From the same people who have brought the city its fine annual curry festival, the dishes on offer at Curry Life Figovec are as close to traditional curry as can be, with award-winning chefs flown in from all over the world. The proud tradition of Gostilna Figovec hasn't been forgotten however, as many traditional Slovene dishes also find themselves on the menu and homemade ice cream and pastries make it difficult to skip dessert. Sitting outside on the terrace adjacent to a large park shaded by centuries-old trees makes for a lovely dining experience.

### Smrekarjev hram

Spoil your taste buds in the Smrekarjev hram restaurant, Ljubljana Quality Selection award winner in the category "Fine Dining Restaurants". Modern international cuisine is spiced up with a Slovene touch. A top team of chefs are responsible for an ultimate culinary treat entwined with a range of quality wines.

Try their a la carte menu with seasonal specialities made from daily fresh ingredients. Every day between 12 p.m. and 17 p.m. they offer daily tasting menu with two, three or four-course from 9 EUR per person.

**Address:**  
Knafljev prehod 2  
1000 Ljubljana

**Phone:**  
+386 1 426 93 25

**E-mail:**  
[kantina.meksikana@gmail.com](mailto:kantina.meksikana@gmail.com)

**Web page:**  
[www.cantina.si](http://www.cantina.si)

**Open:**  
Every day: 10am – 12pm  
Wed, Thu: 10am – 02 am  
Fri, Sat: 10am – 3am

**Address:**  
Ciril Metodov trg 18  
1000 Ljubljana

**Phone:**  
+386 1 232 81 83

**E-mail:**  
[gostilnasokol@siol.net](mailto:gostilnasokol@siol.net)

**Web page:**  
[www.gostilna-sokol.com](http://www.gostilna-sokol.com)

**Open:**  
Mon to Sat: 7am – 11pm,  
Sunday: 10am – 11pm.

## Cantina Mexicana

Fun on two floors in one of the city's most popular courtyards, Cantina Mexicana is positively aglow with bright colours, strange sculptures, grass growing on the ceiling and some nice lighting tricks behind the long ground-floor bar. The food is classic Tex-Mex as you'd expect, and appears to be fairly popular. If nothing else, this is one of the quirkiest and silliest places in the city centre and even if you're not hungry is well worth a visit for a drink or two.

## Gostilna Sokol/The Sokol-Inn

The Sokol-Inn is located at the very heart of the historic centre of Ljubljana, in the immediate vicinity of the town hall (Magistrat). The setting of the inn is an old house with an interesting architecture and a warm and friendly rustic interior that makes you feel at home.

The inn has two floors, and was designed to host a large spectrum of people. It holds a special room for intimate groups of up to ten people, but also a recently built backroom for 80 people. The ambiance is traditional, old rustic style combined with 19th century art paintings. The inn can welcome 200 people altogether.

Their inn is famous for its wonderful mushroom soup served in a bowl made of bread crust, a peasant's feast, venison and tasty stone baked pizzas, specialities that have already convinced many locals and foreigners.



# Changing Behaviour without Talking: automatic processes and the regulation of behaviour



European Society for  
Prevention Research



## 6th International Conference and Members' Meeting Ljubljana, Slovenia October 22-24, 2015

Co-organised with Utrip (Institute for Research and Development),  
together with the Ministry of Health of the Republic of Slovenia.



REPUBLIC OF SLOVENIA  
MINISTRY OF HEALTH

Supported by the Ministry of Education, Science and Sport of the Republic of Slovenia, Office for Youth, and the  
National Institute of Public Health of the Republic of Slovenia.



REPUBLIC OF SLOVENIA  
MINISTRY OF EDUCATION,  
SCIENCE AND SPORT

OFFICE OF THE REPUBLIC OF SLOVENIA FOR YOUTH

NIJZ  
National Institute  
of Public Health

In collaboration with the Centre for Public Health at Liverpool John Moores University, UK; the State Agency for the  
Prevention of Alcohol-Related Problems, PL (PARPA); and the Science for Prevention Academic Network (SPAN).



SPAN is funded by the Lifelong Learning Programme (LLP), managed by the Education, Audiovisual and Culture Executive  
Agency (EACEA) of the European Commission