

LOOKING OVER THE WALL

Promoting multidisciplinary
work in prevention



10th EUSPR Conference and Members' meeting

16-18 September 2019 – Ghent, Belgium

PROGRAMME & BOOK OF ABSTRACTS

Looking over the wall

Promoting multidisciplinary work in prevention

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WELCOME

Dear EUSPR members and Conference Participants,

This year's Conference is held in Ghent – a beautiful city with a long and rich history. Our venue is the Culture and Congress Centre at Ghent University, who - along with the University College Ghent (HoGent), are co-organisers of this year's conference – and we are very grateful for their support.

Planning for the Ghent conference started almost as soon as last year's successful meeting in Lisbon was concluded. After many years of tireless work of leading the running of the annual conference, Harry Sumnall has now stepped down from the role. Many thanks are due to Harry for his hard work, energy and leadership which has played such a big part in making our annual conference a success. Elena Gervilla has taken over as chair of the Conference Scientific Committee and has already done sterling work. Peer van der Kreeft and Julie Schamp have led this year's local organizing committee and I would like to express my thanks to them and all of the individuals who have contributed time and enthusiasm to bringing together what I am sure will be another high quality and enjoyable conference.

Alongside the organisation of the conference, the other work of the Society has continued over the last year. Our Early Careers Forum continues to go from strength to strength, and new activities have been added to their programme of work this year including the launch of a webinar series, which aims to share learning on key aspects of prevention science methodology. We are pleased once again to be able to offer bursaries for early career researchers to attend the conference. Our administration base in Palma is now well established and this year we have applied for funding via the Spanish National Plan on Drugs (PNSD) to help support the running costs and development of the Society. We have continued to contribute to the activities of the Xchange Prevention registry and to develop our links with other European organisations and projects.

Turning to the conference itself, our theme this year is '**Looking over the wall – promoting**

multidisciplinary work in prevention'. It is a topic of key importance to the field of prevention science, and one, which we as a Society are well placed to reflect and provide leadership on. Our keynotes and special sessions will focus on optimising cross-disciplinary working and improving the ways in which different groups in the prevention field – practitioners, policy makers, researchers, communities – can work together. We are interested in how Prevention Science can learn from colleagues who are concerned with different health behaviours or methods – both within and beyond the field. And the conference will also explore how Prevention Science can learn from (and share *its* insights) with the work of other disciplines, such as marketing, user-centred design and communication. These exchanges can help develop ways of improving the reach of interventions among neglected target audiences, and to explore the digital environment.

We encourage participants to share their experiences on:

- Examples of projects working on a broad spectrum of risk behaviours;
- Approaches and components that may effectively tackle different risk behaviours simultaneously;
- Unconventional sectors to bridge with when "looking over the walls"; and
- Changes in professional skills that will be necessary in research, policy-making and practice when aiming for a cross-disciplinary and inter-sectorial approach to prevention.

I would like to extend a special welcome to delegates attending the conference for the first time. I am sure you will find it a friendly, supportive and inspiring environment in which to discuss these and many other important aspects of Prevention Science.

I hope that you enjoy the conference and look forward to meeting you in Ghent.



Jeremy Segrott
EUSPR President

PARTNERS

Co-organisers

University College Ghent

<https://www.hogent.be/en/>

HoGent is one of the largest University Colleges in Belgium, with more than 17.000 students and 1.800 staff members, three faculties and a School of Arts. The University College Ghent aims to conduct research that is closely connected to its teaching, addresses contemporary societal challenges, favours interdisciplinary collaboration and strives for maximal impact. Our researchers systematically seek collaboration and co-creation with the public and professional partners from business, industry and government on a regional, national and international level. In the departments of Social Work and Social Educational Care Work we have been leading and taking part in international prevention projects since 2002. Many of these projects were part of the debates and exchanges in EUSPR. The prevention teams are proud to be hosting the 10th EUSPR meeting in Ghent and welcome you!

Ghent University

<https://www.ugent.be/en>

Ghent University (UGent) is co-organizing the EUSPR 2019 conference in Ghent. Ghent University is a top 100 university and the highest ranked Belgian university in the Academic Ranking of World universities (Shanghai Ranking). The Department of Special Needs Education (research cluster on Recovery and Addictions) is based in the Faculty of Psychology and Educational Sciences and has a long tradition of substance use research. Current research projects focuses on recovery from addiction and other mental health problems and the role of treatment and informal support mechanisms in this process. There is an obvious link with prevention issues in many studies and members of the research team have been participating in EUSPR debates at several occasions.

Collaborating organisations

European Institute of Studies on Prevention

<http://irefrea.eu/>

The IREFREA network was founded in 1988 with experts from several European countries and it is one of the oldest professional drug networks. The Spanish group has had the scientific leadership of the different research projects since the group's initiation. The areas covered by IREFREA include alcohol and drug prevention (research, evaluation and programme implementation) covering questions like risk factors, risky behaviours, related violence and programmes efficiency among others.

IREFREA members are very active in several professional and scientific arenas, having been invited to collaborate with organizations including EMCDDA, EC, NIDA, UNODC and the PNSD (Spanish National Plan on Drugs) and actively participate in networks such as Eurocare, EUSPR, DC&D and The Civil Society Forum on Drugs.

Faculty of Psychology at University of the Balearic Islands

<https://www.uib.eu/>

The University of the Balearic Islands (UIB) is a work-oriented environment designed to educate, generate knowledge and innovate. The UIB is one of the country's leading universities in teaching, research, international cooperation and technological development and innovation. The UIB has made research its fundamental objective. To achieve this objective, it has excellent researchers and high-quality research facilities that let them work with a high-quality level. The UIB is a prestigious university in research and has a strong international impact. With almost 20.000 students, the University of the Balearic Islands is among the 500 best universities in the world, according to the Academic Ranking of World Universities 2019.

Public Health Institute at Liverpool John Moores University

<https://www.ljmu.ac.uk/>

The Public Health Institute (PHI) 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. PHI is committed to a multidisciplinary 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 Public Health Institute's research has been at the forefront of the development of multiagency strategies to promote and protect public health. PHI turns information and data into meaningful and timely intelligence.

Acknowledgements

We would like to offer our special thanks to the following colleagues who have helped in organising the programme, reviewing abstracts, and supporting administration.

Joella Anupol – IREFREA

Giovanni Aresi - Catholic University of the Sacred Heart

Iheb Bougmiza – Sousse University

Gregor Burkhardt - EMCDDA

Katrina Champion - University of Sydney

Boris Chapoton – Jean Monnet University

Emma Davies - Oxford Brookes University

Charlotte de Kock – Ghent University

Mariàngels Duch – IREFREA

Fabrizio Faggiano - Avogadro University of the Eastern Piedmont

Helena Fialova – Charles University

Elena Gervilla - University of the Balearic Islands

Maria Rosaria Galanti - Karolinska Institute

Clarisse Guimaraes – University of the Balearic Islands

Alba González – University of Oviedo

Kimberley Hill - University of Northampton

Maite Kefauver – IREFREA

Matej Kosir – UTRIP

Antje Kula – Hannover Medical School

Marta Lima-Serrano - University of Sevilla

Víctor Martínez – University of Oviedo

Lluc Nevot – University of the Balearic Islands

Larissa Nobre-Sandoval - University of Sevilla

Lauren Outland – California State University Dominguez Hills

Julie Schamp – University College Ghent

Harry Sumnall – Liverpool John Moores University

Sanela Talic – UTRIP

Samuel Tomczyk – University of Greifswald

Olga Ubartiene – Vilnius University

Víctor José Villanueva – Valencia International University

Sigrid Vorobjov - Estonian National Institute for Health Development

Kathleen Wendt – Colorado State University

Scientific Committee

Giovanni Aresi – Catholic University of the Sacred Heart

Gregor Burkhart - EMCDDA

Katrina Champion – University of Sydney

Boris Chapoton – Jean Monnet University

Emma Davies – Oxford Brookes University

Fabrizio Faggiano – Avogadro University of the Eastern Piedmont

Maria Rosaria Galanti – Karolinska Institute

Elena Gervilla – University of the Balearic Islands

Marta Lima-Serrano – University of Sevilla

Larissa Nobre-Sandoval – University of Brasilia / IREFREA

Peer van der Kreeft – University College Ghent

Sigrid Vorobjov – Estonian National Institute for Health Development

Organising Committee

Peer van der Kreeft – University College Ghent

Julie Schamp – University College Ghent

Annemie Coone – University College Ghent

Femke Dewulf – University College Ghent

Johan Jongbloet – University College Ghent

Tina van Havere – University College Ghent

Wouter Vanderplasschen - Ghent University

Practical information

Registration, plenary and parallel sessions

Registration and all plenary and parallel sessions take place in Het Pand, the culture and congress centre of Ghent University. The conference venue is located in the city center and easily reachable by foot and by public transport (metro 1, station 'Korenmarkt').

Het Pand
Onderbergen 1
9000 Gent



Conference reception

The conference reception is being held on September 16th at 18:30 at Ghent City Hall, Botermarkt 1, 9000 Ghent, Belgium.

Ghent City Hall
Botermarkt 1
9000 Ghent



Post-conference workshops

Post-conference workshops will take place at the Royal Academy of Fine Arts (KASK) of University College Ghent (HoGent):

**Royal Academy of Fine Arts
(KASK)
Jozef Kluyskensstraat 2
9000 Ghent**



PLENARY SPEAKERS – Biographies



Kristine Sørensen, Global Health Literacy Academy, Denmark

As a thought leader, Kristine Sørensen is committed to advance the global scope of health literacy. Her educational background is in medicine, public health and global health diplomacy. Kristine Sørensen is the founding director of the Global Health Literacy Academy, Denmark. She is the first President of the International Health Literacy Association and Executive Chair of Health Literacy Europe.

She is also a member of the World Health Organization Technical Advisory Group on Health Promotion in the SDGs. Kristine Sørensen has been a health literacy advisor to the European Commission, the European Centre of Disease Control, the European Parliament, the European Council and McKinsey and is member of the advisory boards of European Health Futures Forum, Centre for Empowering Patients and Citizens, Bridge for Health and EU funded research projects.

She is an editorial board member of the Journal of Health Literacy and ICT&Health International. With colleagues, Kristine Sørensen was honoured the European Health Award 2012, the International Health Literacy Award 2017 and the AHLA Global Health Literacy Award 2018.



Gerard Hastings, University of Stirling, United Kingdom

Gerard Hastings is Professor Emeritus at Stirling University and also works with L'École des Hautes Etudes en Santé Publique, Rennes. He founded the Institute for Social Marketing which he directed for many years, and his academic career has focused on researching the impact of marketing on society – both for good and ill. This has involved him in advising Government and working with policy makers and civil society nationally and internationally. He was a Special Advisor to the House of Commons Health Select Committee during its enquiries into the tobacco (2000), food (2004), pharmaceutical (2005), and alcohol industries (2010) and acts as a Temporary Advisor to the World Health Organization on communicable and non-communicable disease. He has also been an expert witness in litigation against the tobacco industry in the UK and internationally, and in 2011 successfully challenged the Industry's right to access confidential research through Freedom of Information. He sits on the BMA Board of Science, is a member of the Lancet Obesity Commission, a Trustee of the UK Health Forum and a Schools Speaker for Amnesty International.

He has published widely in academic outlets, especially in health and business journals. His latest books are *Social Marketing: Rebels with a Cause* (with Christine Domegan) and *The Marketing Matrix: how the corporation gets its power and how we can reclaim it* are published by Routledge.



Zili Sloboda, Applied Prevention Science International, United States

Zili Sloboda is the President of Applied Prevention Science International and an adjunct professor at the Kent State University College of Public Health. She was trained in medical sociology and in mental health and epidemiology. Her research has focused on substance use epidemiology, services research, and the evaluation of treatment and prevention programs. Her current focus is on establishing the field of prevention science, developing an international cadre of prevention professionals, and on studying the relationship between training in prevention science and the implementation of evidence-based prevention interventions and policies.

She has served on the faculties of three universities and worked at the National Institute on Drug Abuse for 12 years in several capacities, the last as the Director of the Division of Epidemiology and Prevention Research including HIV and substance use. While at NIDA she and her staff organized the International Epidemiology Work Group and the International HIV Prevention Network.

She was one of the founders of the U.S. and E.U. Societies for Prevention Research and is well-published in the area of substance use epidemiology and substance use prevention. Her major books include the Handbook of Drug Abuse Prevention, Epidemiology of Drug Abuse, Defining Prevention Science, and Prevention of Substance Use. In addition, she has a long standing commitment to the dissemination of evidence-based programming and the advancement of Translation I and II research through work with the U.S. Society for Prevention Research and with the United Nations Office on Drugs and Crime. She has received several commendations for her work from the National Institutes of Health, the U.S. and EU Societies for Prevention Research.



Jonathan Deleener, VAD, Belgium

Jonathan Deleener studied Germanic Languages and Audiovisual Communications. He is currently part of the communications team at VAD, the Flemish centre of expertise on alcohol and other drugs. In this role, he has been involved with multiple prevention campaigns on alcohol, cannabis and other drugs, of which Tournée Minérale is the best known.



Elizabeth Verhetsel, Twisted Studio, Belgium

Designer for social innovation. Elizabeth has a background in psychology and worked in sexual health promotion for over 15 years. She did project and policy work in Belgium and in developing countries. She uses human centered design as a framework and its creative methods for participative projects and social innovation. In 2016 she co-founded Twisted Studio, a service design agency. They partner with organisations that want to develop services and policy bottom-up.



Aaron Lyon, University of Washington, United States

Aaron Lyon, Ph.D., is an Associate Professor in the University of Washington (UW) Department of Psychiatry and Behavioral Sciences, Director of the UW School Mental Health Assessment, Research, and Training (SMART) Center, and a licensed clinical child psychologist. Dr. Lyon's research focuses on increasing the accessibility, efficiency, and effectiveness of community- and school-based interventions for children, adolescents, and families.

He is particularly interested in (1) the identification and implementation of low-cost, high-yield practices to reduce the gap between typical and optimal practice in schools; (2) development of individual- and organization-level implementation strategies to promote adoption and sustainment of evidence-based psychosocial interventions within a multi-tier systems of support (MTSS) framework; and (3) human-centered design / redesign of evidence-based psychosocial interventions, digital technologies, and implementation strategies to improve service accessibility and effectiveness.

Dr. Lyon is the author of over 100 peer-reviewed articles and book chapters and is currently Principal Investigator on grants from the Institute of Education Sciences, National Institute of Mental Health, National Institute of Justice, and various local and national foundations in the United States.



Gjalte-Jorn Peters, Open University of the Netherlands, Netherlands

Gjalte-Jorn Peters works on the intersection of behavior change, technology, and methodology and statistics. He leverages ICT to improve both behavior change research and practice. In addition to this methodological and theoretical work, his substantive research focus is nightlife-related risk behavior, such as use of alcohol and other substances, hearing protection, and sexual health. He is involved with the Dutch Celebrate Safe campaign, a national prevention effort uniting nightlife organisers and proprietors, preventions organisations, first-aid organisations, and security organisations. Within Celebrate Safe, he is responsible for the Party Panel determinant study, where every year, the determinants of another nightlife-related risk behavior are mapped.

Gjalte-Jorn works at the Dutch Open University, where he teaches statistics and methodology. He is also a co-founder of the Academy of Behavior Change, a foundation created to facilitate prevention science knowledge translation.

One of his main interests is streamlining the intervention development process to make it more accessible without resorting to oversimplification, and is involved in projects that leverage open standards to develop open source tools to support different tasks within the intervention development process.



10th EUSPR Conference and Members' Meeting 16 - 18 September 2019

Continued from Tuesday, 17 September	Optimizing behavior change techniques effectiveness Zaal Masereel
15:30	
Coffee break Het Pand	
16:00	
Plenary Session 2 and prize giving Refter	
Wednesday, 18 September	
09:30	
The European Xchange registry and national prevention registries: How shall we move forward together? Auditorium Servais	
Workshop on Unplugged training Seminarlokaal 1	
Graphical approach to confounding in epidemiological studies - an introduction to Directed Acyclic Graphs (DAGs) Zaal Masereel	
13:30	
Workshop trainers from EUPC, EU-Dap Faculty, ASAP, Line Up Live Up, Good Behavior Game, Effekt Seminarlokaal 1	



Monday, 16 September	
08:00	<p>Conference registration <i>Het Pand</i></p> <p>Plenary Session 1 <i>Refter</i> Chaired by: Jeremy Segrott</p>
09:00	<p>Looking over or tearing down the wall: Tapping into the unleashed potential of improving health-literacy (Kristine Sørensen) / Of Marketing and Human Folly: Time to Change the Narrative (Gerard Hastings) » Kristine Sørensen / Gerard Hastings (Global Health Literacy Academy / University of Stirling)</p>
10:30	<p>Coffee break <i>Het Pand</i></p>
11:00	<p>Parallel session 1.1 - Themed session: ASAP training project <i>Refter</i> Chaired by: Dr. Rachele Donini</p> <p>ASAP-Training Project [themed session] » Mr. Daniele Musian¹, Ms. Sonia Salvini¹, Dr. Rachele Donini¹ (1. A.Li.Sa.)</p> <p>Promoting and supporting an integrated and complex approach to drug prevention intervention analyzing the different models of drug prevention systems - ASAP training (WP2 of EU Funded project) [themed session] » Mr. Artur Malczewski¹, Ms. Edit Sebestyén², Ms. Szilvia Kassai², Ms. Katalin Felvinczi², Dr. Rachele Donini⁵ (1. Reitox Focal Point - National Bureau for Drug Prevention, 2. Eötvös University, 3. ASL 2 Savona)</p>
11:30	<p>ASAP Training project: training on main prevention science topics [themed session] » Dr. Rachele Donini¹ (1. ASL 2 Savona)</p>
11:45	<p>The ASAP-Training Integrated Platform. The design and the implementation of tools for supporting eLearning and practice sharing [themed session] » Dr. Barbara Mazzarino¹, Dr. Serena Alvino¹ (1. Si4life)</p>
12:00	<p>ASAP Training project: dissemination and sustainability of the project [themed session] » Mrs. Sanela Talić¹ (1. Institute Utrip)</p>
11:00	<p>Parallel session 1.2 - Early Career session 1 <i>Dormitoriumzaal</i> Chaired by: Samuel Tomczyk</p>
11:00	<p>Predictors of mentoring relationship quality: a mixed methods study on a school-based mentoring programme [EC oral communication] » Dr. Giovanni Aresi¹, Ms. Chiara Riccardi¹, Dr. Elena Marta¹ (1. Università Cattolica del Sacro cuore)</p>
11:15	<p>Do the parental permissive attitudes toward cigarette smoking and alcohol use influence illicit drug use among adolescents? [EC oral communication] » Ms. Emina Mehanović¹, Prof. Rosaria Galanti², Prof. Fabrizio Faggiano³, Prof. Federica Vigna-Taglianti¹, Dr. the EU-Dap Study Group⁵ (1. Department of Clinical and Biological Sciences, University of Torino, Italy and Piedmont Centre for Drug Addiction Epidemiology, ASL TO3, Grugliasco (Torino), Italy, 2. Department of Public Health Sciences, Karolinska Institutet, Stockholm, Sweden and Centre for Epidemiology and Community Health, Stockholm County Council, 3. Department of Translational Medicine, Avogadro University, Novara, Italy, 4. Piedmont Centre for Drug Addiction Epidemiology, ASL TO3, Grugliasco (Torino), Italy)</p>



<p>Continued from Monday, 16 September</p>	
<p>11:30 Connecting the Informal Care System and Formal Care System of Multiproblem Families through Youth Initiated Mentoring (YIM) [EC oral communication] » <u>Ms. Natasha Koper</u>¹, Dr. Hanneke Creemers², Dr. Levi van Dam³, Prof. Susan Branje⁴, Prof. Geert Jan Stams² (1. Utrecht University; University of Amsterdam; YIM Foundation, 2. University of Amsterdam, 3. University of Amsterdam; YIM Foundation; Spirit youth care, Amsterdam, 4. Utrecht University)</p>	<p>11:30 From the protocol design to the research implementation: Recognizing the legacy and addressing the challenges of the SFP evaluation in Brazil [campfire] » <u>Dr. Larissa Nobre-Sandoval</u>¹, Prof. Sheila Giardini Murta¹ (1. University of Brasilia)</p>
<p>11:45 The impact of brief motivational counseling for smoking cessation in an Italian Emergency Department [EC oral communication] » <u>Dr. Sara Bortoluzzi</u>¹, Dr. chiara airoldi¹, Dr. Marco Baldrighi¹, Dr. Luigi Castello¹, Dr. Clara Gardino¹, Mr. Matteo Giorchino⁶, Prof. Fabrizio Faggiano¹ (1. University of Eastern Piedmont, 2. University of Eastern Piedmonte)</p>	<p>12:00 Young drug users in the criminal justice system [campfire] » <u>Dr. Günter Stummvoll</u>¹, Dr. Rahel Kahlert¹, Dr. Cees Goos¹ (1. European Centre for Social Welfare Policy and Research)</p>
<p>12:00 Cannabis consumption in school-based adolescents: sex and personality traits [EC oral communication] » <u>Ms. María del Carmen Torrejón-Guirado</u>¹, <u>Ms. Ana Ruiz-Iglesias</u>¹, <u>Ms. María Isabel Acuña-San Román</u>¹, <u>Dr. Marta Lima-Serrano</u>¹ (1. University of Seville)</p>	<p>11:00 Parallel session 1.4 - Classical oral communications: Substance use prevention <i>Jan Gillis</i> Chaired by: Dr. Simone Onrust</p> <p>11:00 Developmental perspective on substance use prevention (paper 1: scientific underpinnings) [themed session] » <u>Dr. Simone Onrust</u>¹, <u>Ms. Renee Verkerk</u>¹, <u>Ms. Ester Speth</u>¹, <u>Ms. Daphne Visser</u>¹ (1. Trimbos Institute)</p>
<p>12:15 The effect of alcohol strength on alcohol consumption: findings from a randomised controlled crossover pilot trial [EC oral communication] » <u>Ms. Parvati Perman-Howe</u>¹, <u>Dr. Emma Davies</u>¹, <u>Prof. David Foxcroft</u>¹ (1. Oxford Brookes University)</p>	<p>11:15 Developmental perspective on substance use prevention (paper 2 Fresh Start) [themed session] » <u>Ms. Renee Verkerk</u>¹, <u>Dr. Simone Onrust</u>¹, <u>Ms. Ester Speth</u>¹, <u>Ms. Daphne Visser</u>¹ (1. Trimbos Institute)</p>
<p>11:00 Parallel session 1.3 - Campfire 1 <i>Priorzaal</i> Chaired by: Dr. Larissa Nobre-Sandoval</p> <p>11:00 The role of school experience in mediating the association between conduct problems trajectories and NEET status [campfire] » <u>Dr. Leonardo Bevilacqua</u>¹, <u>Prof. Bianca De Stavola</u>², <u>Prof. Russell Viner</u>² (1. University College London, 2. UCL)</p>	<p>11:30 Developmental perspectives on substance use prevention (paper 3: Parent-Child Program and InCharge) [themed session] » <u>Ms. Ester Speth</u>¹, <u>Ms. Daphne Visser</u>¹, <u>Ms. Renee Verkerk</u>¹, <u>Dr. Simone Onrust</u>¹ (1. Trimbos Institute)</p> <p>11:45 Assessing community-based prevention initiatives in Mallorca: Preliminary results of the EPOPS project [oral communication] » <u>Ms. Yasmina Castaño</u>¹, <u>Dr. Montse Juan</u>¹, <u>Mr. Miquel Àngel Guerrero</u>³, <u>Mrs. Gloria Ferrer</u>³, <u>Dr. Claudia Pischke</u>⁵, <u>Dr. Florence Samkange-Zeeb</u>⁶ (1. IREFREA - European Institute of Studies on Prevention, 2. FAPA Mallorca, 3. Heinrich-Heine-Universität Düsseldorf, 4. Leibniz-Institut für Präventionsforschung und Epidemiologie - BIPS)</p>



Continued from Monday, 16 September	
12:00	<p>Volunteer Family Connect: Bringing together community members, practice wisdom and rigorous research to support families [oral communication]</p> <p>» <u>Dr. Kelly Baird</u>¹, <u>Dr. Rebekah Grace</u>¹, Ms. Emma Elcombe¹, Prof. Jacqueline Barnes⁴, <u>Dr. Jayne Meyer Tucker</u>⁵, Ms. Leith Sterling⁶, Ms. Graine O'Loughlin⁷, Ms. Simone Gianelli⁸, Prof. Lynn Kemp¹ (1. Western Sydney University, 2. Birkbeck, University of London, 3. JMITinc, 4. Benevolent Society, 5. Karitane, 6. Save the Children Australia)</p>
12:15	<p>Alcohol-Related Collateral Harm: the unseen dimension of alcohol-related harm Study of students aged 16-24 in Southern England [oral communication]</p> <p>» <u>Dr. Briony Enser</u>¹, Prof. David Foxcroft¹ (1. Oxford Brookes University)</p>
11:00	<p>Parallel session 1.5 - Evidence-based prevention <i>Oude Infirmierie</i></p> <p>Chaired by: Prof. Elena Gervilla</p>
11:00	<p>Challenges and Solutions in Translating Evidence-Based Research into Practice [oral communication]</p> <p>» <u>Dr. Pamela Buckley</u>¹, <u>Dr. Karl Hill</u>¹, <u>Dr. Abigail Fagan</u>³ (1. University of Colorado Boulder, 2. University of Florida)</p>
11:15	<p>Evaluation of the many not the few: how can we usefully evaluate interventions when a randomised controlled trial is impossible, improbable or unnecessary? [oral communication]</p> <p>» <u>Dr. Nick Axford</u>¹, <u>Dr. Tim Hobbs</u>² (1. University of Plymouth, 2. Dartington Service Design Lab)</p>
11:30	<p>Regional Health Coordination - an intersectoral multi-component intervention to promote interdisciplinarity and professionalism in municipalities: Development and first results [oral communication]</p> <p>» <u>Mr. Ludwig Grillich</u>¹, Ms. Ursula Griebler¹, Ms. Viktoria Titscher¹, Ms. Christa Rameder⁴ (1. Danube University Krems, 2. Lower Austrian Social and Health Fund)</p>

11:45	<p>Minimum quality standards in prevention - from policy consensus to assessment and implementation [oral communication]</p> <p>» <u>Mr. Matej Košir</u>¹, Mrs. Sanela Talić¹ (1. Institute Utrip)</p>
12:00	<p>Establishment and development of national Professional Society OSPRCH for prevention in the Czech Republic: contribution of the process of quality improvement and development of the field of prevention and its gradual professionalization [oral com]</p> <p>» Ms. Helena Fialova¹, Prof. Michal Miovský², Dr. Lenka Skacelova³ (1. Magdalena, NGO, 2. Department of Addictology, Charles University in Prague, 3. Pedagogical and Psychological Counseling Center)</p>
12:15	<p>A quality framework for training programs - crossing European standards for prevention and for elearning [oral communication]</p> <p>» <u>Prof. Susana Henriques</u>¹ (1. Universidade Aberta; CIES-IUL)</p>
12:30	<p>Lunch break <i>Het Pand</i></p>
12:30	<p>Poster session 1 <i>Het Pand</i></p> <p>Chaired by: Prof. Elena Gervilla</p>
	<p>Attitudes towards alcohol use: A study among young adults and teenagers drinking in the streets [EC oral poster]</p> <p>» Ms. Maite Kefauver¹, Ms. Joella Anupol¹, Ms. Mariàngels Duch Moya¹, Ms. Zara Quigg⁴, Prof. Elena Gervilla⁵ (1. IREFREA - European Institute of Studies on Prevention, 2. LjMU, 3. University of the Balearic Islands)</p>
	<p>Simultaneous alcohol and other drugs use: Does it boost the effects of drinking alcohol? [EC poster]</p> <p>» Ms. Clarisse Guimarães¹, Ms. Elena Bonet Linares¹, Ms. Stefania Dede¹, Prof. Elena Gervilla⁴ (1. University of Balearic Islands, 2. University of the Balearic Islands)</p>
	<p>Does emotional variability during parents-adolescent interactions depend on risk of anxiety and gender? [poster]</p> <p>» Ms. Margalida Caimari Ferragut¹, Dr. Maria Balle¹, Ms. Aina Fiol-Veny¹, Mr. Josep Roman¹, Ms. Neus Zuzama¹ (1. University of the Balearic Islands)</p>



Continued from Monday, 16 September

Mental Health Literacy Comparing to Comprehensive Health Literacy of 11-12 Grades Schoolchildren, their Parents and Teachers [EC poster]

» Mrs. Olga Ubartiene¹, Prof. Gené Šurkienė¹ (1. Vilnius University)

Creation of a coding manual to analyse Social Network Sites content - The literature review process [EC poster]

» Mr. Boris Chapoton¹, Ms. Tess Bonnard¹, Ms. Fairoze Chafai¹, Prof. Franck Chauvin¹ (1. Jean Monnet University)

Relationship between vulnerability to anxiety in adolescents and academic performance: the predictive power of communication style within mother-adolescent dyads [EC poster]

» Ms. Neus Zuzama¹, Dr. Maria Balle¹, Ms. Aina Fiol-Veny¹, Mr. Josep Roman⁴, Ms. Margalida Caimari Ferragut¹, Dr. Xavier Bornas¹ (1. University of the Balearic Islands, 2. University of Balearic Islands)

Physiological Synchrony among adolescents with medium risk for anxiety and their fathers [EC poster]

» Mr. Josep Roman¹, Dr. Maria Balle², Ms. Aina Fiol-Veny², Ms. Neus Zuzama², Ms. Margalida Caimari Ferragut², Dr. Xavier Bornas² (1. University of Balearic Islands, 2. University of the Balearic Islands)

Fall prevention in elderly home care: are multicomponent interventions effective, sustainable and transferable in Italy? [EC poster]

» Ms. Daiana Campani¹, Ms. Silvia Caristia¹, Prof. Fabrizio Faggiano¹, Mr. Alex Amariglio⁴, Ms. Silvia Piscone⁴, Ms. Lidya Irene Ferrara⁴, Dr. Alberto Dal Molin¹ (1. Department of Translational Medicine, University of Eastern Piedmont, 2. University of Eastern Piedmont)

Development and evaluation of a new type of nurse for health promotion in primary care setting [EC poster]

» Mrs. Erica Busca¹, Ms. Silvia Caristia¹, Dr. Tiziana Cena¹, Prof. Fabrizio Faggiano¹, Dr. Alberto Dal Molin¹ (1. Department of Translational Medicine, University of Eastern Piedmont)

Needs analysis in MCI and Mild Dementia patients to determine areas to be addressed with cognitive decline risk reduction activities [poster]

» Dr. Pietro Davide Trimarchi¹, Dr. Emanuele Tomasini¹, Dr. Valerio Gower¹, Dr. Carlo Abbate⁴, Dr. Anna Fontanella¹, Dr. Fabrizio Giunco¹ (1. IRCCS Fondazione Don Carlo Gnocchi, 2. Unità Operativa Complessa di Geriatria, Ospedale Maggiore Policlinico, Fondazione IRCCS Cà Granda, Milan, Italy)

The importance of pluridisciplinary teams for the rehabilitation of people with mental illness [poster]

» Prof. Ana Maria Bertão S. Neto¹, Dr. Joana Ferreira¹, Dr. Natália Sofia Brochado¹, Dr. Margarida Araujo¹, Dr. Catarina Fonseca¹ (1. School of Education of the Polytechnic of Porto)

Strengthening Families intervention effects on child school outcomes: A cross-national analysis in Spain and Australia [poster]

» Dr. Carmen Orte¹, Dr. Joan Amer¹, Ms. Michele Burn³, Dr. Lluís Ballester¹, Ms. Meu Supol³, Dr. Marga Vives¹, Ms. Keri Little³, Prof. John Toumbourou³ (1. University of the Balearic Islands, 2. Deakin University)

Relationship between the dimensions of empathy and violence in the adolescent partner from a gender perspective [EC poster]

» Dr. Víctor José Villanueva¹, Dr. Marta Corral-Martínez¹, Dr. María Pilar Tormo Irún¹, Dr. Sandra Gómez Martínez¹, Dr. María Jesús Hernández Jiménez¹ (1. Universidad Internacional de Valencia)

Relationship between assertiveness and dating violence in the adolescent couple: sex differences in aggressors [EC poster]

» Dr. Víctor José Villanueva¹, Dr. Sandra Gómez Martínez¹, Dr. Begoña Iranzo Ejarque¹, Dr. Marta Corral-Martínez¹, Dr. María Teresa Mitjans Lafont¹ (1. Universidad Internacional de Valencia)

Mutual factors and results when accessing pornography and violent content websites: keys to prevention [EC poster]

» Dr. Víctor José Villanueva¹, Dr. María Aránzazu Duque Moreno¹, Dr. Sandra Gómez Martínez¹, Dr. Begoña Iranzo Ejarque¹ (1. Universidad Internacional de Valencia)



Continued from Monday, 16 September

Sex differences in the emission of violent behavior in the adolescent partner [EC poster]

» Dr. Víctor José Villanueva¹, Dr. María Jesús Hernández Jiménez¹, Dr. María Teresa Mitjans Lafont¹, Dr. Begoña Irazo Ejarque¹, Dr. María Pilar Tormo Irún¹. Universidad Internacional de Valencia

Prevention of domestic abuse within adolescent relationships: lessons learned from one innovative approach in Scotland seeking to align user-centred design approaches, systems thinking and evidence of local need and promising practice [poster]

» Ms. Kate Tobin¹, Dr. Tim Hobbs¹, Ms. Shreya Sonthalia¹, Mr. Daniel Ellis¹, Ms. Ruth Wallace⁵, Ms. Nicola Davidson⁵, Ms. Karen McIntyre⁷ (1. Dartington Service Design Lab, 2. Renfrewshire Council, 3. Engage Renfrewshire)

Motivational Interviewing with families: preliminary results of the systematic review [poster]

» Dr. Carmen Orte¹, Ms. María Valero², Dr. Victoria Quesada², Dr. Rosario Pozo², Dr. Josep Lluís Oliver² (1. University of the Balearic Islands, 2. University of Balearic Islands)

Effectiveness of interventions to prevent the onset of postpartum depression: a systematic review and meta-analysis of randomized controlled trials [EC poster]

» Ms. Carmen Martín-Gómez¹, Dr. Isabel Benítez¹, Dr. Sonia Conejo-Cerón³, Ms. Henar Campos³, Ms. Alina Rigabert¹, Ms. Irene Gómez-Gómez¹, Dr. Emma Motrico¹ (1. Universidad Loyola Andalucía, 2. Biomedical Research Institute of Málaga (IBIMA), Spain)

The effectiveness of including mental health interventions at primary care: a systematic review and meta-analysis protocol [EC poster]

» Ms. Alina Rigabert¹, Ms. Carmen Martín-Gómez¹, Ms. Neus Esterlich-Costa⁵, Ms. Maria Calderón⁴ (1. Universidad Loyola Andalucía, 2. Hospital Universitari Vall d'Hebron. Servei de psiquiatria. Barcelona, 3. Parc sanitari Sant Joan de Deu. Sant Boi. Barcelona)

Gender roles and effectiveness of the cultural adaptation of the prevention program "Mantente real" in Spain [poster]

» Prof. David Alarcón¹, Prof. Isotta Mac Fadden¹, Prof. Cristina Villalba Quesada¹, Prof. Flavio Marsiglia⁴, Prof. Stephen Kulis⁴, Dr. Stephanie Ayers⁴ (1. Universidad Pablo de Olavide, 2. Arizona State University)

Dedalo study: baseline results of a community-based health promotion intervention [poster]

» Dr. Alessandro Coppo¹, Dr. Antonella Barale², Dr. Daniela Alessi², Mrs. Sara Bortoluzzi⁴, Mr. Stefano Parovina⁴, Prof. Fabrizio Faggiano⁴ (1. University of Eastern Piedmonte, 2. Local Health Unit of Vercelli, 3. University of Eastern Piedmont)

The "Inseparable Ones" Campaign in social media - how to support the family in its protective role [EC poster]

» Mrs. Terlikowska Jolanta¹, Mr. Robert Frączek², Mr. Krzysztof Brzózka¹, Mr. Lukasz Terlikowski⁴, Mrs. Kinga Terlikowska⁴ (1. The State Agency for Prevention of Alcohol Related Problems, 2. The, 3. Stowarzyszenie DIAKONIA Ruchu Światło-Życie)

The application of the Unplugged prevention program among Slovak schoolchildren [poster]

» Prof. Olga Orosova¹, Dr. Jozef Benka¹, Dr. Beata Gajdosova¹, Dr. Anna Janovska¹, Mrs. Marcela Stefanakova¹, Mrs. Lenka Abrinkova¹ (1. Pavol Jozef Šafárik University in Košice, Faculty of Arts)

Training in Virtual Environments to Prevent Emergencies and Disasters: A Systematic Review and Meta-Analysis [EC poster]

» Mr. Samuel Tomczyk¹, Ms. Maxi Rahn¹, Prof. Silke Schmidt¹ (1. University of Greifswald)

Resilience and risk behavior: Croatian adolescents' perspective [poster]

» Dr. Miranda Novak¹, Prof. Martina Ferić², Prof. Valentina Kranzelic¹, Dr. Josipa Mihic¹, Mrs. Matea Belosevic¹, Ms. Helena Križan⁶, Mrs. Irena Velimirovic⁷ (1. Faculty of Education and Rehabilitation Sciences University of Zagreb, 2. University of Zagreb, 3. Croatian Institute of Public Health, 4. Psychiatric Clinic KBC Rijeka)



Continued from Monday, 16 September

Individual resilience and family life satisfaction of adolescents [EC poster]

» Mrs. Matea Belosevic¹, Dr. Miranda Novak¹, Prof. Martina Feri², Prof. Valentina Kranzelic¹, Dr. Josipa Mihic¹, Ms. Helena Krizan⁶, Mrs. Irena Velimirovic⁷ (1. Faculty of Education and Rehabilitation Sciences University of Zagreb, 2. University of Zagreb, 3. Croatian Institute of Public Health, 4. Psychiatric Clinic KBC Rijeka)

Stand by or step up? Exploring student attitudes to intervening in harassment and assault [EC oral poster]

» Dr. Sarah Hennelly¹, Ms. Sofia Hussain¹, Mr. Tristan Hale¹, Ms. Martha Cadle¹, Dr. Joanne Brooke⁵, Dr. Emma Davies¹ (1. Oxford Brookes University, 2. University of Birmingham)

Refugee children in Croatia: experiences, needs and expectations [EC oral poster]

» Ms. Katarina Peric¹, Dr. Marina Merkaš² (1. Institute of Social Sciences Ivo Pilar, 2. Catholic University of Croatia)

Promoting problem solving skills - strengthening resilience - how to measure? [EC oral poster]

» Mrs. Antje Kula¹, Mr. Matthias Mai², Ms. Laura Brunemund², Prof. Katja Mackowiak², Prof. Ulla Walter¹ (1. Hannover Medical School - IESG, 2. Leibniz Universität Hannover - IFS)

14:00 Sofa Plenary 1

Refter

Chaired by: Mr. Gregor Burkhardt

Looking Over the Wall—The Future of Prevention Science and Prevention

» Zili Sloboda / Kristine Sørensen / Gerard Hastings (Applied Prevention Science International / Global Health Literacy Academy / University of Stirling)

15:30 Coffee break

Het Pand

16:00

Parallel session 2.1 - TED-style talks

Refter

Chaired by: Andrew Brown

16:00

Prevention at the intersections: Adventures in multidisciplinary practice [TED-style talk]

» Dr. Tim Hobbs¹, Ms. Kate Tobin¹, Dr. Nick Axford³, Ms. Jenny North¹ (1. Dartington Service Design Lab, 2. University of Plymouth)

16:20

It may work, but why does no-one turn up? The need for an intentional focus on Design in Prevention Research [TED-style talk]

» Ms. Maria Portugal¹, Ms. Kate Tobin¹, Mr. Ben Hartridge¹, Dr. Tim Hobbs¹ (1. Dartington Service Design Lab)

16:40

Mental Health Literacy: A Systematic Review of Existing Conceptualisation and Measurement in Adolescence [TED-style talk]

» Ms. Rosie Mansfield¹, Dr. Praveetha Patalay², Prof. Neil Humphrey¹ (1. University of Manchester, 2. University College London)

17:00

School-level predictors of conduct problems trajectories [TED-style talk]

» Dr. Leonardo Bevilacqua¹, Prof. Bianca De Stavola², Prof. Russell Viner² (1. University College London, 2. UCL)

16:00

Parallel session 2.2 - Early Career session 2: Oral communications and oral posters

Dormitoriumzaal

Chaired by: Mr. Boris Chapoton

Motives, consequences and consumption patterns of alcohol and cannabis in college students of Quito-Ecuador [EC oral communication]

» Ms. Batul Rojeab¹ (1. Ministry of Public Health Ecuador)



Continued from Monday, 16 September

Multidisciplinary and multicomponent approach to he Cannabis-Tobacco joint: EVICT Project [EC oral communication]

» Dr. Víctor José Villanueva¹, Dr. Adelaida Lozano Polo², Dr. Ana Esteban Herrera² (1. Universidad Internacional de Valencia / EVICT, 2. EVICT-CNPT)

Attachment strategies among young people who exhibited Harmful Sexual Behaviour – developmental pathway considering intergenerational attachment dynamics [EC oral communication]

» Dr. Bartosz Zaniewski¹ (1. NSPCC)

Self-report of illicit drug substitution behavior in a sample of Israeli high-risk drug users [EC oral communication]

» Mr. Barak Shapira¹, Dr. Ronny Berkovitz², Dr. Paola Rosca², Prof. Yehuda Neumark⁴ (1. Hebrew University in Jerusalem, 2. Israeli Ministry of Health, 3. Hebrew University Jerusalem)

Attitudes towards alcohol use: A study among young adults and teenagers drinking in the streets [EC oral poster]

» Ms. Maitte Kefauver¹, Ms. Joella Anupol¹, Ms. Mariàngels Duch Moya¹, Ms. Zara Quigg⁴, Prof. Elena Gervilla⁵ (1. IREFREA - European Institute of Studies on Prevention, 2. LJMU, 3. University of the Balearic Islands)

Stand by or step up? Exploring student attitudes to intervening in harassment and assault [EC oral poster]

» Dr. Sarah Hennelly¹, Ms. Sofia Hussain¹, Mr. Tristan Hale¹, Ms. Martha Cadle¹, Dr. Joanne Brooke⁵, Dr. Emma Davies¹ (1. Oxford Brookes University, 2. University of Birmingham)

Refugee children in Croatia: experiences, needs and expectations [EC oral poster]

» Ms. Katarina Perić¹, Dr. Marina Merkaš² (1. Institute of Social Sciences Ivo Pilar, 2. Catholic University of Croatia)

Promoting problem solving skills - strengthening resilience - how to measure? [EC oral poster]

» Mrs. Antje Kula¹, Mr. Matthias Maj², Ms. Laura Brunemund², Prof. Katja Mackowiak², Prof. Ulla Walter¹ (1. Hannover Medical School - IESG, 2. Leibniz Universität Hannover - IfS)

16:00 Parallel session 2.3 - Campfire 2

Priorzaal

Chaired by: Prof. David Foxcroft

16:00 Why do flagship evidence-based programmes from the US run aground in Europe, and how should online repositories of programmes deal with this? [campfire]

» Mr. Gregor Burkhardt¹, Dr. Nick Axford², Ms. Shreya Sonthalia³, Prof. David Foxcroft⁴, Prof. Fabrizio Faggiano⁵, Ms. Charlotte De Kock⁶ (1. European Monitoring Centre for Drugs and Drug Addiction, 2. University of Plymouth, 3. Dartington Service Design Lab, 4. Oxford Brookes University, 5. Department of Clinical and Biological Sciences, University of Torino, Italy and Piedmont Centre for Drug Addiction Epidemiology, ASL TO3, Grugliasco (Torino), Italy, 6. University College Ghent)

16:30 Standards of evidence and 'what works' repositories in children's services: a critical appraisal [campfire]

» Dr. Nick Axford¹, Dr. Vashti Berry², Dr. Tim Hobbs³, Dr. Louise Morpeth³ (1. University of Plymouth, 2. University of Exeter, 3. Dartington Service Design Lab)

17:00 Breaking down the walls, handing over the axe: environmental education and prevention [campfire]

» Ms. Helen Williams¹ (1. Crew 2000 Scotland Ltd)

16:00 Parallel session 2.4 - Themed session: STAD in Europe

Jan Gillis

Chaired by: Ms. Mariàngels Duch Moya

16:00 The STAD model in the nightlife setting and at large sporting events [themed session]

» Dr. Johanna Gripenberg¹, Dr. Tobias Elgan¹ (1. Karolinska Institutet)



Continued from Monday, 16 September	
16:15	<p>Alcohol and youth in Slovenia – prevention challenges and the way forward [themed session]</p> <p>» <u>Mr. Matej Košir</u>¹, Mrs. Sanela Talić¹ (1. Institute Utrip)</p>
16:30	<p>The STAD model – The piloting in the open public spaces [themed session]</p> <p>» <u>Ms. Mariàngels Duch Moya</u>¹, Prof. Elena Gervilla², Ms. Zara Quigg³, Dr. Montse Juan¹, Ms. Joella Anupol¹ (1. IREFREA - European Institute of Studies on Prevention, 2. University of the Balearic Islands, 3. LJMU)</p>
16:45	<p>What we found in the STAD in Europe project and lessons learned [themed session]</p> <p>» <u>Mrs. Lotte Voorham</u>¹ (1. Trimbos Institute)</p>
17:00	<p>Evaluation of the STAD in Europe (SiE) pilot interventions [themed session]</p> <p>» Ms. Zara Quigg¹, <u>Ms. Joella Anupol</u>², Ms. Nadia Butler¹, Ms. Rebecca Bates¹, Ms. Kim Ross-Houie¹, Mr. Mark Bellis³ (1. LJMU, 2. IREFREA - European Institute of Studies on Prevention, 3. Bangor University)</p>
16:00	<p>Parallel session 2.5 - Classical oral communications: School and family prevention</p> <p><i>Oude Infirmerie</i></p> <p>Chaired by: Dr. Emma Davies</p>
16:00	<p>Strong Families: A new open-source family skills prevention programme aiming to prevent a broad spectrum of risk behaviours in different regions [oral communication]</p> <p>» Dr. Wadih Maalouf¹, Dr. Karin Haar¹, Prof. Virginia Molgaard², Prof. Rachel Calam⁴, Dr. Aala El-Khani⁴ (1. United Nations Office on Drugs and Crime (UNODC), 2. Iowa State University, 3. The University of Manchester)</p>
16:15	<p>A family-based program to reduce teen alcohol use and risky sexual behavior [oral communication]</p> <p>» Dr. Brenda A Miller¹, Dr. Hilary F Byrnes¹, Ms. Veronica Rogers¹, Dr. Beth Bourdeau⁴, Dr. Joel W Grube¹, Dr. David B Buller⁶, Dr. W. Gill Woodall⁶, Ms. Julia Berteletti⁶ (1. PRC/PIRE, 2. University of California, San Francisco, 3. Klein Buendel, Inc.)</p>
16:30	<p>Is the Strengthening Families Program effective in Brazil? Intragroup comparison between pre-test and 10-month follow-up [oral communication]</p> <p>» Prof. Sheila Giardini Murta¹, Dr. Larissa Nobre-Sandoval¹, Prof. Luís Gustavo do Amaral Vinha¹, Mrs. Viviane de Paula Rocha¹, Mrs. Ana Aparecida Vilela Miranda¹, Mrs. Karina Damous Duailibe¹, Mrs. Maria do Socorro Gomes¹, Ms. Danielle Aranha Farias¹, Mrs. Ingrid Gomes Abdala¹, Mrs. Jordana Calil L. de M. de Oliveira¹ (1. University of Brasilia)</p>
16:45	<p>Longer-term impact of a combined classroom and parental intervention on alcohol-related harms and heavy episodic drinking: Results from a large scale cRCT (STAMPP Trial) [oral communication]</p> <p>» Dr. Andrew Percy¹, Dr. Michael McKay², Prof. Jon Cole², Prof. Harry Sumnall⁴ (1. Queen's University Belfast, 2. University of Liverpool, 3. LJMU)</p>
17:00	<p>An Exploratory Study of Teacher's Requirements to Deliver Drug Education Help! I Have a Lesson - A UK Case Study [oral communication]</p> <p>» <u>Mr. Richard Lynas</u>¹, Dr. Elizabeth Hurst¹, Ms. Kate Holley¹ (1. Mentor UK)</p>
17:15	<p>Learning to Be: promoting Social and Emotional learning through relationship-centred learning environment and teaching methods [oral communication]</p> <p>» <u>Mrs. Sanela Talić</u>¹, Mr. Matej Košir¹ (1. Institute Utrip)</p>
18:30	<p>Conference reception</p> <p><i>Ghent City Hall</i></p>
19:30	<p>Conference social dinner</p> <p>RAY</p>



Tuesday, 17 September

08:30

Conference registration

Het Pand

08:30

Members' meeting

Refter

09:30

Parallel session 3.1 - Redefining prevention

Priorzaal

Chaired by: Carmen Orte

Interdisciplinary and cross-sectoral approach to prevention: small country, small challenges? [themed session]

» Ms. Karin Streimann¹, Ms. Triin Sokk¹, Mr. Ain Peil³, Ms. Barbara Haage⁴, Ms. Laidi Surva⁵, Ms. Nurmely Mitrahovits⁶, Mr. Margo Kivila⁶ (1. National Institute for Health Development, 2. The Ministry of the Interior, 3. Estonian Social Insurance Board, 4. Ministry of Justice, 5. Police and Border Guard Board)

Redesigning prevention: from silos to co-creation [themed session]

» Mr. Ain Peil¹, Ms. Karin Streimann², Ms. Laidi Surva³ (1. The Ministry of the Interior, 2. National Institute for Health Development, 3. Ministry of Justice)

Redesigning prevention: how to change the institutional and professional practices? [themed session]

» Ms. Triin Sokk¹, Ms. Barbara Haage², Ms. Nurmely Mitrahovits³, Mr. Margo Kivila³, Ms. Karin Streimann¹ (1. National Institute for Health Development, 2. Estonian Social Insurance Board, 3. Police and Border Guard Board)

Using powerful solutions for prevention – are we doing enough? [themed session]

» Ms. Karin Streimann¹ (1. National Institute for Health Development)

Is the ability of implementation the key evaluation criterion? Short or long prophylactic impacts on the universal level? [oral poster]

» Prof. Krzysztof Wojcieszek¹ (1. Pedagogium WSNS in Warsaw)

Parenting in 2 Worlds: A Culturally Adapted Parenting Program that Strengthens Urban American Indian Families through Cultural Engagement [oral poster]

» Prof. Stephen Kullis¹, Dr. Stephanie Ayers¹, Dr. Monica Tsethlikai¹ (1. Arizona State University)

The preventive role of an emotion focused parenting program: parents' reflections on tuning in to kids [oral poster]

» Ms. Ayca Ulker Erdem¹, Prof. Mübeccel Gönen¹, Ms. Sophie Havighurt² (1. Hacettepe University, Department of Early Childhood Education, 2. University of Melbourne Department of Psychiatry)

Family Drug Preventive Interventions: the case study of the Universal Family Competence Program 11-14 in Spain [oral poster]

» Dr. Carmen Orte¹, Dr. Marga Vives¹, Dr. Maria Antònia Gomila¹, Dr. Belén Pascual¹, Dr. Joan Amer¹ (1. University of the Balearic Islands)

Environmental Prevention in School Context: Process And Outcome Evaluation of the "Dealing With Addictive Behaviours' Project" [oral poster]

» Dr. Isabel Prata¹, Dr. Carla Frazão², Dr. Luisa Pereira², Rui Silva² (1. Addictive Behaviours and Dependencies Intervention Division (DICAD) - Health Ministry, 2. Addictive Behaviours and Dependencies Intervention Division (DICAD))

Improving Motivating styles to promote Physical Activity: Teachers' Experiences in using Motivational Interaction [oral poster]

» Dr. Elina Renko¹, Prof. Anja Koski-Jännes², Prof. Piiwikki Absetz³, Prof. Taru Lintunen², Prof. Nelli Hankonen¹ (1. University of Helsinki, 2. Tampere University, 3. University of Eastern Finland, 4. University of Jyväskylä)



Continued from Tuesday, 17 September

10:15

Recanting rate analysis: A novel way to assess and control for measurement error in RCT self-report outcomes [oral poster]

» Dr. Andrew Percy¹, Dr. Ashley Agus², Prof. Jon Cole³, Dr. Paul Doherty², Prof. David Foxcroft⁵, Mr. Seamus Harvey⁶, Dr. Michael McKay³, Dr. Lynn Murphy², Prof. Harry Sumnall⁹ (1. Queen's University Belfast, 2. NICTU, 3. University of Liverpool, 4. Oxford Brookes University, 5. Bangor University, 6. LJMU)

Developing a community intervention (LEF): effects of creating pre-intervention awareness [oral poster]

» Ms. Ina Koning¹, Mr. Vincent van der Rijst¹, Ms. Leonie Boor³ (1. Youth Studies, Interdisciplinary Social Science, Utrecht University, 2. Municipality of Edam-Volendam)

09:30

Parallel session 3.2 - Early Career session 3

Dormitoriumzaal

Chaired by: Mr. Boris Chapoton

09:30

The effectiveness of school-based intervention programs targeting stress in adolescents: A multilevel meta-analysis [EC oral communication]

» Mrs. Amanda van Loon¹, Dr. Hanneke Creemers², Dr. Michiel Westenberg³, Dr. Jessica Asscher² (1. Utrecht University, 2. University of Amsterdam, 3. Leiden University)

09:45

The effectiveness of the "Who really wins?" youth gambling prevention program - results with regard to different types of high-school [EC oral communication]

» Mrs. Sabina Mandić¹, Mr. Neven Ricijaš¹, Ms. Dora Dodig Hundrić¹ (1. Faculty of Education and Rehabilitation Sciences University of Zagreb)

10:00

A web based computer tailoring intervention based on the gamification vs texts for binge-drinking prevention in adolescent: protocol study [EC oral communication]

» Mr. Pablo Fernández-León¹, Ms. María del Carmen Torrejón-Guirado¹, Ms. Ana Ruíz-Iglesias¹, Dr. Hein De Vries⁴, Dr. Joaquín Salvador Lima-Rodríguez², Dr. Marta Lima-Serrano¹ (1. University of Seville, 2. Maastricht University)

Exercise and prevention of fall in elderly: a systematic review and metanalysis of Cochrane studies [EC oral communication]

» Ms. Silvia Caristia¹, Ms. Daiana Campani¹, Ms. Chiara Cannici³, Ms. Sara Pisterzi³, Ms. Giulia Giarda³, Prof. Gianluca Aimaretti¹, Dr. Alberto Dal Molin¹, Prof. Fabrizio Faggiano⁸ (1. Department of Translational Medicine, University of Eastern Piedmont, 2. University of Eastern Piedmont, 3. Department of Translational Medicine, Avogadro University, Novara, Italy)

10:30

Elements that can encourage child participation in school [EC oral communication]

» Ms. Andrea Čosić¹, Mrs. Ivana Borčić¹ (1. University of Zagreb)

10:45

Emotional Learning as the Interdisciplinary Positive Approach within Universal Prevention [EC oral communication]

» Ms. Maria Wojcieszek¹, Ms. Kinga Wojcieszek², Ms. Joanna Wojcieszek¹ (1. University of Warsaw, 2. Cardinal Stefan Wyszyński University in Warsaw)

09:30

Parallel session 3.3 - Health promotion and prevention of risky behaviours

Oude Infirmerie

Chaired by: Dr. Joel W Grube

09:30

Modelling the impact of calorie-reduction interventions on childhood obesity and across inequalities [oral communication]

» Dr. Simon Russell¹, Dr. Steven Hope¹, Ms. Jessica Packer¹, Dr. Helen Croker¹, Prof. Russell Viner⁵ (1. University College London, 2. UCL)

09:45

« The great live and move challenge » and the promotion of physical activity in children: Results from a cluster-randomized controlled trial [oral communication]

» Dr. Mathieu Gourlan¹, Mr. Florian Jeanleboeuf¹, Mrs. Céline Lambert³, Mr. Adrien Minotte¹, Dr. Bruno Pereira³, Dr. Florence Cousson-Gélie⁶ (1. Epidaure, Prevention Department of the Montpellier Cancer Institute, 2. Clermont-Ferrand University Hospital, Biostatistics Unit, 3. Epsylon laboratory, University Paul Valéry Montpellier 3)



Continued from Tuesday, 17 September

- 10:00
Evaluation of a Mystery Shop Intervention to Reduce Sales of Alcohol to Minors in Zacatecas and Aguascalientes, Mexico [oral communication]
 » Dr. Mallie J Paschall¹, Dr. Joel W Grube¹, Dr. Ted R Miller³, Dr. Christopher L Ringwalt³, Dr. Deborah A Fisher³ (1. Prevention Research Center, PIRE, 2. PIRE)
- 10:15
Home Drinking in Women over 30 years of age. Findings from an internet survey [oral communication]
 » Dr. Martha Canfield¹, Mrs. Valerie Chandler², Dr. John Foster² (1. Kings College London, 2. University of Greenwich)
- 10:30
Immersion is key: Fostering Injury Prevention Through Virtual Reality Applications - a Randomized Controlled Trial of Warning Compliance in a Virtual Thunderstorm [oral communication]
 » Mr. Samuel Tomczyk¹, Ms. Stella Savelsberg¹, Ms. Henriette Markwart¹, Prof. Silke Schmidt¹ (1. University of Greifswald)
- 10:45
Child Maltreatment and Adulthood Substance Use: Evidence from Ukraine [oral communication]
 » Dr. Viktor Burlaka¹, Dr. Oleksii Serdiuk², Ms. Jullia Churakova¹, Prof. Dmytro Shvets², Dr. Volodymyr Proskura⁵, Dr. Jun Sung Hong¹ (1. Wayne State University, 2. Kharkiv National University of Internal Affairs, 3. Lviv Polytechnic National University)
- 11:00
Building a national institutional infrastructure in prevention is fundamental requirement for developing workforce and successful university study programs in prevention science [oral communication]
 » Prof. Michal Miovsky¹, Dr. Amálie Pavlovská¹, Ms. Anna Vondrová¹ (1. Charles University in Prague)

09:30 **Parallel session 3.4 - Prevention and end user groups**

Refter

Chaired by: Mr. Peer van der Kreeft

Special session on prevention and end user groups

» Dr. Johanna Gripenberg¹, Mr. Gregor Burkhardt², Dr. Rachele Donini³, Mr. Peer van der Kreeft⁴ (1. STAD, Department of Clinical Neuroscience, Karolinska Institutet, Stockholm, Sweden, 2. European Monitoring Centre for Drugs and Drug Addiction, 3. ASL 2 Savona, 4. HoGent)

09:30 **Parallel session 3.5 - Drug use**

Jan Gillis

Chaired by: Dr. William Crano

09:30 **Effects of an Online Responsible Vendor Training for Recreational Cannabis Stores on Sales to Pseudo-intoxicated Customers: Need for Increased Deterrence [oral communication]**

» Dr. David B Buller¹, Dr. W. Gill Woodall¹, Dr. Robert Saltz³, Mr. Andrew Grayson¹, Ms. Sierra Svendsen¹, Ms. Mary Klein Buller¹ (1. Klein Buendel, Inc., 2. PRC/PIRE)

09:45 **Using Selective Invalidation of Ambivalent Pro-marijuana Attitude Components to Prevent Marijuana Use [oral communication]**

» Dr. William Crano¹ (1. Claremont Graduate University)

10:00 **Perceptions of cannabis health information labels in a large international sample of people who use cannabis: will cannabis companies grow to be different to the alcohol and tobacco industries? [oral communication]**

» Dr. Emma Davies¹, Prof. Michael Lynskey², Dr. Larissa Maier³, Dr. Jason Ferris⁴, Prof. Adam Winstock⁵ (1. Oxford Brookes University, 2. Kings College London, 3. University of California, San Francisco, 4. University of Queensland, 5. University College London)

10:15 **Promising and justifiable practices to increase accessibility for, reach and retention of migrants and ethnic minorities (MEM) in European drug treatment: A narrative review and reflection [oral communication]**

» Ms. Charlotte De Kock¹ (1. Ghent University)



Continued from Tuesday, 17 September

10:30

"I'm not the anti-smoker now. I just don't smoke anymore": Social obstacles to quitting smoking among emerging adults [oral communication]

» Ms. Joanne Dono¹, Prof. Carlene Wilson², Dr. Kerry Ettridge¹, Prof. Caroline Miller¹ (1. University of Adelaide & SAHMRI, 2. Olivia Newton John Cancer Wellness and Research Centre & La Trobe University)

10:45

Am I on the right track with the development of my harm reduction intervention? The development and use of an evaluation instrument [oral communication]

» Dr. Desiree Spronk¹, Mrs. Lotte Voorham¹, Dr. Ferry Goossens¹ (1. Trimbos Institute)

11:15

Coffee break

Het Pand

11:45

Sofa plenary 2

Refter

Chaired by: Tina Van Haver

Prevention and communication

» Jonathan Deleener / Elizabeth Verhetsel / Aaron Lyon / Gjalt-Jorn Peters (VAD / Twisted Studio / University of Washington / Open University of the Netherlands)

13:00

Lunch break

Het Pand

13:00

Poster session 2

Het Pand

Chaired by: Prof. Elena Gervilla

Is the ability of implementation the key evaluation criterion? Short or long prophylactic impacts on the universal level? [oral poster]

» Prof. Krzysztof Wojcieszek¹ (1. Pedagogium WSNS in Warsaw)

An attempt to the sumative evaluation of the "debate" prevention program [poster]

» Prof. Krzysztof Wojcieszek¹, Ms. Maria Wojcieszek², Mr. Stanislaw Maciaszek³, Ms. Iwona Plekarz⁴ (1. Pedagogium WSNS in Warsaw, 2. Warsaw University, 3. Śląskie Centrum Profilaktyki i Psychoterapii, 4. Silesian Prevention and Psychotherapy Center)

Parenting in 2 Worlds: A Culturally Adapted Parenting Program that Strengthens Urban American Indian Families through Cultural Engagement [oral poster]

» Prof. Stephen Kullis¹, Dr. Stephanie Ayers¹, Dr. Monica Tsethlikai¹ (1. Arizona State University)

The preventive role of an emotion focused parenting program: parents' reflections on tuning in to kids [oral poster]

» Ms. Ayca Ulker Erdem¹, Prof. Mübeccel Gönen¹, Ms. Sophie Havighurts² (1. Hacettepe University, Department of Early Childhood Education, 2. University of Melbourne Department of Psychiatry)

Family Drug Preventive Interventions: the case study of the Universal Family Competence Program 11-14 In Spain [oral poster]

» Dr. Carmen Orte¹, Dr. Marga Vives¹, Dr. Maria Antònia Gomila¹, Dr. Belén Pascual¹, Dr. Joan Amer¹ (1. University of the Balearic Islands)

The role of positive mothering in family drug prevention programmes: mother-father result differences in the Family Competence Program [poster]

» Dr. Lluís Ballester¹, Dr. Joan Amer¹, Ms. Lydia Sánchez-Prieto¹, Ms. Lluç Nevot¹ (1. University of the Balearic Islands)

Environmental Prevention in School Context: Process And Outcome Evaluation of the "Dealing With Addictive Behaviours' Project" [oral poster]

» Dr. Isabel Prata¹, Dr. Carla Frazão², Dr. Luisa Pereira², Dr. Rui Silva² (1. Addictive Behaviours and Dependencies Intervention Division (DICAD) - Health Ministry, 2. Addictive Behaviours and Dependencies Intervention Division (DICAD))



Continued from Tuesday, 17 September

Improving Motivating styles to promote Physical Activity: Teachers' Experiences in using Motivational Interaction [oral poster]

» Dr. Elina Renko¹, Prof. Anja Koski-Jännes², Prof. PiiVikki Absetz³, Prof. Taru Lintunen⁴, Prof. Nelli Hankonen¹ (1. University of Helsinki, 2. Tampere University, 3. University of Eastern Finland, 4. University of Jyväskylä)

Recanting rate analysis: A novel way to assess and control for measurement error in RCT self-report outcomes [oral poster]

» Dr. Andrew Percy¹, Dr. Ashley Agus², Prof. Jon Cole³, Dr. Paul Doherty², Prof. David Foxcroft⁵, Mr. Seamus Harvey⁶, Dr. Michael McKay³, Dr. Lynn Murphy², Prof. Harry Sumnall⁹ (1. Queen's University Belfast, 2. NICTU, 3. University of Liverpool, 4. Oxford Brookes University, 5. Bangor University, 6. LJMU)

Developing a community intervention (LEF): effects of creating pre-intervention awareness [oral poster]

» Ms. Ina Koning¹, Mr. Vincent van der Rijst¹, Ms. Leonie Boor³ (1. Youth Studies, Interdisciplinary Social Science, Utrecht University, 2. Municipality of Edam-Volendam)

Measuring parents associations' empowerment to support environmental alcohol prevention: An assessment tool [EC poster]

» Prof. Daniel Lloret¹, Ms. Yasmina Castaño², Prof. Catia Magalhães³, Prof. Elena Gervilla⁴, Dr. Montse Juan², Dr. Claudia Pischke⁶, Dr. Florence Samkange-Zeeb⁷ (1. IREFREA - European Institute of Studies on Prevention / University Miguel Hernández, 2. IREFREA - European Institute of Studies on Prevention, 3. IREFREA - European Institute of Studies on Prevention / Instituto Politecnico de Visei, 4. University of the Balearic Islands, 5. Heinrich-Heine-Universität Düsseldorf, 6. Leibniz Institute for Prevention Research and Epidemiology)

Patterns of cannabis use among students in Estonia and neighbouring countries in 2003-2015 [poster]

» Mrs. Sigrid Vorobjov¹ (1. National Institute for Health Development)

Examining family risk and resilience: a measure of stress and adaptation [EC poster]

» Ms. Helena Križan¹, Ms. Lucija Lamešič², Prof. Martina Ferić² (1. Croatian Institute of Public Health, 2. University of Zagreb)

"Mantente real" prevention program in Seville (Spain) [EC poster]

» Prof. Isotta Mac Fadden¹, Prof. Cristina Villalba Quesada¹, Prof. David Alarcón¹, Prof. Flavio Marsiglia⁴, Prof. Stephen Kulis⁴ (1. Universidad Pablo de Olavide, 2. Arizona State University)

Mapping and positioning of the European Universal Prevention Curriculum [EC poster]

» Mrs. Femke Dewulf¹, Mr. Peer van der Kreeft², Ms. Marjolein De Pau¹, Mrs. Annemie Coone² (1. University College Ghent, 2. HoGent)

Effect of the school-based prevention program "Unplugged" on targeted mediators [EC poster]

» Ms. Emina Mehanović¹, Ms. Serena Vadrucchi², Mr. Alberto Sciutto², Mr. Gian Luca Cuomo⁴, Prof. Fabrizio Faggiano⁵, Prof. Federica Vigna-Taglianti¹, Dr. the EU-Dap Study Group⁴ (1. Department of Clinical and Biological Sciences, University of Torino, Italy and Piedmont Centre for Drug Addiction Epidemiology, ASL TO3, Grugliasco (Torino), Italy, 2. Department of Prevention, ASL Città di Torino, Italy, 3. Piedmont Centre for Drug Addiction Epidemiology, ASL TO3, Grugliasco (Torino), Italy, 4. Department of Translational Medicine, Avogadro University, Novara, Italy)

Upo SoGUD prevention: Osteoporosis (Summaries of Guidelines Upon Disease Prevention) – Protocol and descriptive results [EC poster]

» Dr. Concina Diego¹, Dr. Tommaso Testa¹, Dr. Marco Comba¹, Dr. Daniele Nicolini¹, Dr. Carlo Smirne¹, Prof. Fabrizio Faggiano¹, Prof. Massimiliano Panella¹ (1. University of Eastern Piedmont)

Community Program of Responsible Service of Alcohol in Navarre 2013-2018 [poster]

» Mrs. Mariivi Mateg¹ (1. Instituto de Salud Publica y Laboral de Navarra)



Continued from Tuesday, 17 September

Loneliness, depressive symptomatology, cigarette dependence and smoking relapse [poster]

» Mrs. Carmela Martínez¹, Dr. Ana López-Durán¹, Dr. Ruben Rodríguez-Cano¹, Dr. Elena Fernández del Río⁴, Dr. Carmen Senra¹, Dr. Elisardo Becoña¹ (1. University of Santiago de Compostela, 2. University of Zaragoza)

A systematic review of theory-based interventions aimed at reducing binge drinking among adolescents [EC poster]

» Ms. Sarah Ricupero¹, Dr. Marion Carayol², Dr. Mathieu Gourlan³, Prof. Florence Cousson-Gélie¹ (1. Epsylon laboratory, University Paul Valéry Montpellier 3, 2. IAPS Laboratory "Impact of Physical Activity on Health", University of Toulon, Avenue de l'Université, 83957 La Garde, France., 3. Epidaure, Prevention Department of the MontPELLIER Cancer Institute)

Effect of teen engagement with a family-based online intervention on reduction in alcohol use by teens [poster]

» Dr. W. Gill Woodall¹, Dr. Brenda A Miller², Dr. David B Buller¹, Dr. Hilary F Byrnes², Dr. Beth Bourdeau⁵, Dr. Joel W Grube², Ms. Veronica Rogers², Ms. Julia Berteletti¹ (1. Klein Buendel, Inc., 2. PRC/PIRE, 3. University of California, San Francisco)

The effectiveness of the 'Programma Mentore', a school-based mentoring programme in Italy: Study protocol for a quasi-experimental study [EC poster]

» Dr. Giovanni Aresi¹, Dr. Elena Marta¹, Dr. Daniela Traficante¹ (1. Università Cattolica del Sacro cuore)

Moderators of the effect of psychological and psychoeducational interventions to prevent anxiety disorders: A systematic review [EC poster]

» Ms. Carmen Martín-Gómez¹, Dr. Patricia Moreno-Peral², Dr. Sonia Conejo-Cerón², Ms. Hénar Campos², Dr. Emma Motrico¹ (1. Universidad Loyola Andalucía, 2. Biomedical Research Institute of Málaga (IBIMA), Spain)

Effective components of parent training programs in preventing child abuse: A meta-analytic review [EC poster]

» Mrs. Jeanne Gubbels¹, Dr. Claudia van der Put¹, Dr. Mark Assink¹, Prof. Geert Jan Stams¹ (1. University of Amsterdam)

Effect of a brief motivational intervention for the promotion of breastfeeding during the first six months [poster]

» Dr. Sergio Cordovilla-Guardia¹, Ms. Cristina Franco Antonio¹, Ms. Esperanza Santano-Mogena¹, Dr. Julián Fernando Claderón-García⁴, Dr. Sergio Rico-Martín¹, Dr. Yolanda Castaño-Blanco⁶ (1. University of Extremadura, 2. Universidad de Extremadura, 3. Servicio Extremoño de Salud)

Implementing and evaluating a brief digital alcohol and drug prevention intervention among adolescents and young adults [EC poster]

» Dr. Pia Kvillemo¹, Dr. Tobias Elgan¹, Dr. Anna K Strandberg¹, Dr. Johanna Gripenberg¹ (1. Karolinska Institutet)

Introducing and Evaluating a Book-sharing Programme [EC poster]

» Mrs. Claire Owen¹ (1. Bangor University)

Intentions to reduce sugary drink consumption: understanding the barriers to change [EC poster]

» Ms. Joanne Dono¹, Dr. Kerry Ettridge², Prof. Melanie Wakefield³, Prof. Simone Pettigrew², Prof. John Coveney⁵, Prof. Gary Wittert¹, Prof. Sarah Durkin³, Ms. Jane Martin⁸, Prof. Caroline Miller² (1. University of Adelaide, 2. University of Adelaide & SAHMRI, 3. Cancer Council Victoria, 4. Cancer Council WA & Curtin University, 5. Flinders University, 6. Obesity Policy Coalition)

Testing the social status and family socialization hypotheses of substance use in Norwegian young people: a causal mediation analysis [poster]

» Prof. David Foxcroft¹, Dr. Emma Davies¹, Mrs. Sarah Howcutt¹, Ms. Fiona Matley¹, Dr. Louise Bunce¹ (1. Oxford Brookes University)



<p>Continued from Tuesday, 17 September</p>	
<p>What Works for Whom in Prevention of Child Maltreatment: The Development of a Responsivity Instrument [EC poster] » Ms. Anne Bijlsma¹, Dr. Claudia van der Put¹, Dr. Mark Assink¹, Prof. Geertjan Overbeek¹, Prof. Geert Jan Stams¹ (1. University of Amsterdam)</p> <p>The Contribution of Beer to Alcohol Consumption, Heavy Drinking and Alcohol-Related Harms: Findings from the Global Smart Drinking Goals Initiative [poster] » Dr. Chris Ringwalt¹ (1. PIRE)</p> <p>Short-term effect of a web-based computer tailoring family intervention for binge-drinking reduction in adolescents [EC poster] » Ms. María Isabel Acuña-San Román¹, Ms. María del Carmen Torrejón-Guirado¹, Dr. Hein De Vries³, Dr. Sanne Gerards³, Dr. Marta Lima-Serrano¹ (1. University of Seville, 2. Maastricht University)</p>	<p>14:45 Developing and evaluating the Flemish version of the Good Behavior Game: Successes and obstacles [themed session] » Dr. Geertje Leflot¹, Prof. Hilde Colpin² (1. Thomas More University of Applied Sciences, 2. KU Leuven)</p> <p>15:00 Good Behavior Game – Alternative method for traditional class management [themed session] » Dr. Katarzyna Kocóń-Rychter¹, Dr. Katarzyna Okulicz-Kozaryn², Dr. Anna Kwatara³, Mrs. Megan Sambolt⁴, Mrs. Gail Chan⁵ (1. Humanitas University in Sosnowiec, 2. State Agency for Prevention of Alcohol Related Problems, 3. Jagiellonian University, 4. American Institutes for Research)</p>
<p>Parallel session 4.1 - Themed session: Good Behavior Game in Europe <i>Oude Infirmerie</i> Chaired by: Ms. Karin Streimann</p>	<p>14:00 Parallel session 4.2 - Classical oral communications: Interdisciplinary prevention / Workforce for Drug Demand Reduction <i>Rafter</i> Chaired by: Ms. Joella Anupol</p>
<p>14:00 Adapting and evaluating versions of the Good Behavior Game in Europe [themed session] » Mr. Magnus Johansson¹, Ms. Karin Streimann², Dr. Geertje Leflot³ (1. Oslo Metropolitan University, 2. National Institute for Health Development, 3. Thomas More University College)</p> <p>14:15 PAX Good Behavior Game: Cultural Adaption and Pilot Trial in Sweden [themed session] » Mr. Magnus Johansson¹, Dr. Pia Enebrink², Prof. Ata Ghaderi² (1. Oslo Metropolitan University, 2. Karolinska Institutet)</p> <p>14:30 PAX Good Behavior Game in Estonia: overview of the last 5 years [themed session] » Ms. Karin Streimann¹, Ms. Aire Trummal¹ (1. National Institute for Health Development)</p>	<p>14:00 Choosing priorities for prevention Plans: the Piedmont experience [oral communication] » Dr. Cristiano Piccinelli¹, Dr. Nereo Segnan², Dr. Alessandro Coppo³, Prof. Fabrizio Faggiano⁴, Dr. Carlo Senore¹ (1. AOU Città della Salute e della Scienza di Torino, 2. CPO Piemonte, 3. University of Eastern Piedmont, 4. University of Eastern Piedmont)</p> <p>14:15 Opportunistic multiple behaviour change brief advice delivered by trained health professionals in community-based health services, workplaces, and in cancer screening settings [oral communication] » Dr. Giuseppe Gorini¹, Dr. Sandra Bosi², Dr. Cristina Gozzi², Ms. Francesca Zironi², Dr. Marco Tamelli², Dr. Giovanni Forza⁶, Dr. Mateo Ameglio⁷, Dr. Eralda Licheri⁸, Dr. Grazia Mercatilli⁹, Dr. Milena Franchella¹⁰, Dr. Fabrizia Polo¹¹, Dr. Cristina Marchesi¹², Prof. Carlo DiClemente¹³, Dr. Ermanno Rondini² (1. ISPRO, Oncology Research, Prevention & Network Institute, Florence, Tuscany Region, 2. LILT Reggio Emilia, Emilia-Romagna, 3. Local Health Unit of Padua, Veneto Region, 4. Local Health Unit of South-East Tuscany, Tuscany Region, 5. LILT Oristano, Sardinia, 6. Local Health Unit of Ascoli Piceno, Marche Region, 7. LILT Campobasso, Molise, 8. Local Health Unit of "Alto Vicentino", Veneto Region, 9. Local Health Unit of Reggio Emilia, Emilia-Romagna Region, 10. Maryland University)</p>



Continued from Tuesday, 17 September	
14:30	<p>Empowering Hospital study: effect on health-related behaviours [oral communication]</p> <p>» Dr. Alessandro Coppo¹, Prof. Fabrizio Faggiano¹, Mrs. Chiara Airoldi¹ (1. University of Eastern Piedmont)</p> <p>Escape Migration Project: aspects of hosting and inclusion. Identities and Places [oral communication]</p> <p>» Prof. Ana Maria Bertão S. Neto¹, Prof. Isabel Timóteo², Dr. Joana Ferreira¹ (1. School of Education of the Polytechnic of Porto, 2. superior school of education)</p> <p>Building a Professional Workforce for Drug Demand Reduction: Providing an International Focal Point for Access to Research, Training, Institutional Engagement and Credentialing for Field Based Impact [themed session]</p> <p>» Ms. Joanna Travis-Roberts¹, Ms. Kimberly Johnson², Ms. Becky Vaughn³ (1. International Society of Substance Use Professionals (ISSUP), 2. International Consortium of Universities for Drug Demand Reduction (ICUDDR), 3. Global Centre for Credentialing and Certification (GCCC))</p>
14:45	
15:00	
14:00	<p>Parallel session 4.3 - Campfire 3 <i>Priorzaal</i></p> <p>Chaired by: Jeremy Segrott</p> <p>Identifying cross-disciplinary opportunities to increase physical activity [campfire]</p> <p>» Mrs. Eefje Batte¹ (1. Howest University of Applied Sciences)</p> <p>Youth Peer Mentorship - Lebanon [campfire]</p> <p>» Mr. Anthony Abi Zeid¹ (1. Mentor Arabia)</p> <p>Triangulate more: advancing causal inference in intervention evaluation research [campfire]</p> <p>» Prof. Rosaria Galanti¹, Dr. Tharshini Thangavelu¹, Dr. Maria Nilsson³ (1. Karolinska Institutet, 2. Umeå University)</p>
14:00	<p>Parallel session 4.4 - Classical oral communications: Adolescent and youth prevention</p> <p><i>Jan Gillis</i></p> <p>Chaired by: Ms. Maite Kefauver</p> <p>A systematic review of the benefits of youth involvement in the implementation of proven prevention science programs [oral communication]</p> <p>» Prof. John Toubourou¹, Dr. Joan Amer² (1. Deakin University, 2. University of the Balearic Islands)</p> <p>Developing a preventive intervention for adolescent mental health problems – Part 1: Identifying transdiagnostic effective common elements [themed session]</p> <p>» Dr. Siri Helland¹, Dr. Anneli Mellblom², Dr. Benedicte Kirkøen¹, Prof. John Kjøbli⁴ (1. Regional Centre for Child and Adolescent Mental Health, Eastern and Southern Norway (RBUP), 2. REGIONSENTER FOR BARN OG UNGES PSYKISKE HELSE, HELSEREGION ØST OG SØR, 3. Regional Centre for Child and Adolescent Mental Health, Eastern and Southern Norway (RBUP))</p> <p>Developing a preventive intervention for adolescent mental health problems – Part 2: Co-creation – systematic user involvement and user participation [themed session]</p> <p>» Dr. Anneli Mellblom¹, Dr. Siri Helland¹, Prof. John Kjøbli¹ (1. Regional Centre for Child and Adolescent Mental Health, Eastern and Southern Norway (RBUP))</p> <p>Binational collaboration to culturally adapt the keepin' it REAL substance use prevention program for adolescents in Mexico [oral communication]</p> <p>» Prof. Flavio Marsiglia¹, Dr. Maria Elena Medina-Mora², Dr. Stephanie Ayers¹, Dr. Bertha Nuño-Gutiérrez⁴, Dr. Maria Dolores Corona Lozano⁵, Dr. Miguel Angel Mendoza-Meléndez⁶, Prof. Stephen Kulis¹ (1. Arizona State University, 2. Universidad Nacional Autónoma de México, 3. Universidad de Guadalajara, 4. Universidad Autónoma de Nuevo León, 5. Instituto Nacional de Psiquiatría Ramón de la Fuente Muñiz)</p>
14:30	
14:45	



Continued from Tuesday, 17 September	
15:00	<p>Keepin' it REAL in Mexico: A Randomized Controlled Trial of a Substance Use Prevention Program for Middle Schools in Mexico's Largest Cities [oral communication]</p> <p>» <u>Prof. Stephen Kulis</u>¹, <u>Prof. Flavio Marsiglia</u>¹, <u>Dr. Maria Elena Medina-Mora</u>³, <u>Dr. Bertha Nuño-Gutiérrez</u>⁴, <u>Dr. Maria Dolores Corona Lozano</u>⁵, <u>Dr. Miguel Ángel Mendoza-Meléndez</u>⁶ (1. Arizona State University, 2. Universidad Nacional Autónoma de México, 3. Universidad de Guadalajara, 4. Universidad Autónoma de Nuevo León, 5. Instituto Nacional de Psiquiatría Ramón de la Fuente Muñiz)</p>
14:00	<p>Parallel session 4.5 - PechaKucha <i>Dormitoriumzaal</i></p> <p>Chaired by: <u>Prof. Elena Gervilla</u></p>
14:00	<p>Communicating towards health improvement. Developing evidence-based practical tools at the intersection of health promotion, communication studies and behaviour insights [pechakucha]</p> <p>» <u>Dr. Leen Van Brussel</u>¹ (1. Vlaams Instituut Gezond Leven)</p>
14:10	<p>Training program on the collaboration between Social Work and Police promoting a healthy and safe public space [pechakucha]</p> <p>» <u>Mrs. Annemie Coone</u>¹, <u>Dr. Didier Reynaert</u>¹, <u>Dr. Günter Stummvoll</u>³ (1. HoGent, 2. Euro)</p>
14:20	<p>Towards a European concept of crime prevention [pechakucha]</p> <p>» <u>Mr. Jorne Vanhee</u>¹ (1. European Crime Prevention Network Secretariat)</p>
14:30	<p>"Het gedragswiel" as a comprehensive overview of determinants of (health-related) behaviour [pechakucha]</p> <p>» <u>Dr. Lien Van der Bliest</u>¹, <u>Dr. Leen Van Brussel</u>² (1. Vlaams Instituut Gezond Leven vzw, 2. Vlaams Instituut Gezond Leven)</p>
14:40	<p>Healthy Living: Physical health education in Croatia [pechakucha]</p> <p>» <u>Prof. Sanja Musić Milanović</u>¹, <u>Ms. Helena Križan</u>¹, <u>Ms. Dora Bukal</u>¹, <u>Ms. Maja Lang Morović</u>¹, <u>Dr. Slaven Krtalić</u>¹ (1. Croatian Institute of Public Health)</p>
14:50	<p>Preventing victimisation of minors in the digital age [pechakucha]</p> <p>» <u>Dr. Stijn Aerts</u>¹ (1. European Crime Prevention Network (EUCPN))</p>
15:30	<p>Coffee break <i>Het Pand</i></p>
16:00	<p>Plenary Session 2 and prize giving <i>Refter</i></p> <p>Chaired by: <u>Prof. Rosaria Galanti</u></p> <p>Integrating human-centered design and implementation science to improve the accessibility and effectiveness of mental health services / Applying Prevention Science: Intervention Mapping as an Integrative Framework</p> <p>» <u>Aaron Lyon</u> / <u>Gjalt-Jorn Peters</u> (University of Washington / Open University of the Netherlands)</p>
<p>Wednesday, 18 September</p>	
09:30	<p>The European Xchange registry and national prevention registries: How shall we move forward together? <i>Auditorium Servais</i></p> <p>The European Xchange registry and national prevention registries: How shall we move forward together?</p> <p>» <u>Nick Axford</u>, <u>David Foxcroft</u>, <u>Charlotte de Kock</u>, <u>Fabrizio Faggiano</u>, <u>Gregor Burkhardt</u> (University of Plymouth / Oxford Brookes University / Ghent University / Avogadro University of the Eastern Piedmont / EMCDDA)</p>
09:30	<p>Workshop on Unplugged training <i>Seminarielokaal 1</i></p> <p>Workshop on Unplugged training</p> <p>» <u>Peer van der Kreeft</u> (University College Ghent)</p>



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Continued from Wednesday, 18 September	
09:30	Graphical approach to confounding in epidemiological studies - an introduction to Directed Acyclic Graphs (DAGs) <i>Zaal Masereel</i>
	Graphical approach to confounding in epidemiological studies - an introduction to Directed Acyclic Graphs (DAGs) » Maria Rosaria Galanti and Elena Raffetti (Karolinska Institutet)
13:30	Workshop trainers from EUPC, EU-Dap Faculty, ASAP, Line Up Live Up, Good Behavior Game, Effekt <i>Seminarielelokaal 1</i>
	Workshop trainers from EUPC, EU-Dap Faculty, ASAP, Line Up Live Up, Good Behavior Game, Effekt » Peer van der Kreeft (University College Ghent)
13:30	Optimizing behavior change techniques effectiveness <i>Zaal Masereel</i>
	Optimizing behavior change techniques effectiveness » Gjalts-Jorn Peters (Open University of the Netherlands)

FULL PROGRAMME – DAY 1

Conference registration

(Het Pand, 08:00 – 09:00)

Plenary session 1

(Refter, 09:00 – 11:00)

Kristine Sørensen - Global Health Literacy Academy (Denmark)

LOOKING OVER OR TEARING DOWN THE WALL: TAPPING INTO THE UNLEASHED POTENTIAL OF IMPROVING HEALTH-LITERACY

The Ottawa Charter (1986) highlighted that health is created and lived by people within the settings of their everyday life; where they learn, work, play and love. Health is created by caring for oneself and others, by being able to take decisions and have control over one's life circumstances, and by ensuring that the society one lives in creates conditions that allow the attainment of health by all its members. A great vision, however, still a challenge decades later for all involved in disease prevention and health promotion. Health literacy is an interdisciplinary, multi-dimensional concept linked to literacy entailing the knowledge, motivation, and competencies to access, understand, appraise and apply information to form judgement and make decisions concerning healthcare, disease prevention and health promotion to improve and maintain quality of life during the life course. People with limited health literacy have higher risks of hospital visits, higher medication use and less involvement in preventive activities. In a comparative study across eight European countries – 30-60% were at risk, hence the investment in health literacy is an unleashed potential for improving health in marginalized groups as well as in the general population. Re-designing health systems, governmental policies and professionals' roles are incremental to become more health literate and a step towards reaching the vision from Ottawa. We need not

only to look over the walls. We should also dare to tear down those walls that are hindering people-centred healthcare, disease prevention and health promotion. Efforts should be based on people's real needs and delivered through services that are user-friendly, relevant and timely matching people's competencies.

Gerard Hastings - University of Stirling (United Kingdom)

OF MARKETING AND HUMAN FOLLY: TIME TO CHANGE THE NARRATIVE

The commercial determinants of ill-health are well recognised. In particular, many of the products we choose to consume – tobacco, processed food, alcohol, petrochemicals, leaded paint, guns – are known to have caused such harm, even when used as intended, that a new descriptor, the 'industrial epidemic', has been coined. Whilst free choice and consumer sovereignty are much lauded, in reality this destructive consumption behaviour is not altogether voluntary; we are encouraged to smoke, drive cars and eat junk food by those who gain from our self-harm, the companies that make and sell these products. In recent years these have grown in size and become multinational corporations with powerful lobbying and corporate affairs functions with which to engage policy makers. So, soda makers can influence the Centers for Disease Control and Prevention, oil companies undermine climate science and the paint industry exonerates lead, and in the process, regulation is avoided, delayed or contained.

This ensures an environment where marketing – the persuasive tool of choice for consumers – can be used with maximum efficiency. Its capacity to encourage consumption has been established in multiple studies for tobacco, alcohol and processed food. The methods used by marketers have also been examined, and the role of 360-degree advertising, evocative brands, ubiquitous availability, special promotions and perpetual new product

development noted. The advent of digital technologies has raised further concerns about the insidious power of social media marketing, and the bespoke, deep messaging it facilitates. Facebook gets over 98% of its income from advertising, and Cambridge Analytica shows how pervasive and profound digital influence has become.

Marketing is causing collective as well as individual harm: it drives inequalities, urban decay and materialism. It is also threatening human existence itself; one IPCC report after another has been sounding the alarm for over three decades, and yet our profligacy has multiplied - more than half the carbon our lifestyles have injected into the earth's atmosphere has been put there since the first IPCC report in 1988. Perhaps more important even than this is that marketing keeps us believing all this is normal; it is not just getting us to wreck the planet, it is helping us feel comfortable about doing so. Its constant calls to consume prevent the emergence of alternative narratives, new stories, new ways of thinking about our lives. At this point in human history we have never needed them more.

Coffee break

(Het Pand, 10:30 – 11:00)

Parallel sessions 1 (11:00 – 12:30)

1.1 - Themed session: ASAP training project *(Refter)*

Daniele Musian, Sonia Salvini, Rachele Donini

ASAP-TRAINING PROJECT [themed session]

SPEAKER: Daniele Musian

ABSTRACT. Prevention science over the past years has gained important results accumulating evidences on the effective drug prevention interventions and the definition of quality standards. Three EU funded projects laid the

groundwork on this subject: (1) European Drug Prevention Quality Standards (EDPQS) Phase I that reviewed the drug prevention standards in EU member states and delivered a set of quality standards in prevention; (2) EDPQS Phase II that delivered a set of tools to promote EDQPS; (3) UPC-Adapt that had the aim to adapt to the European context the American curriculum for the training of drug prevention professionals. Despite these progresses, implementation of findings in prevention is still struggling to be widespread. This is due to the lack of knowledge about the prevention systems in which the quality standards should be adopted, and the need to professionalize the workforce on the most updated prevention science. Based on these results, the ASAP training project wants to improve the quality of drug prevention planning and delivery. ASAP Training faces this challenge working to upscale quality in drug prevention through: (1) conducting drug prevention systems analysis for the EU countries in order to identify strengths and barriers to improve prevention and identifying the key stakeholders (2) Improving prevention workforce, particularly Decision and Opinion Policy makers, competencies and skills on quality standards and prevention science through the implementation of a training process. The training design will build on presence and distance learning (blended). To support distance learning will be developed an integrated platform including an online learning environment and a Virtual Community of Practitioners that will also support the creation of a professional network of staff. In the themed session will also be presented the findings about prevention systems, the training process, the communication and dissemination strategy of the project and the evaluation process.

Artur Malczewski, Edit Sebestyén, Szilvia Kassai, Katalin Felvinczi, Rachele Donini

PROMOTING AND SUPPORTING AN INTEGRATED AND COMPLEX APPROACH TO DRUG PREVENTION INTERVENTION ANALYZING THE DIFFERENT MODELS OF DRUG PREVENTION SYSTEMS – ASAP

TRAINING (WP2 OF EU FUNDED PROJECT) [themed session]

SPEAKER: Artur Malczewski

ABSTRACT. The system approach in the drug prevention field is able to encompass differing views and interests of key actors. Drug prevention systems can vary country to country and though key elements can be identified when trying to describe the systems, we lack a lot of information on key issues. As a part of “ASAP Training” data collection will be carried out on drug prevention systems and its stakeholders in Europe in order to get a better understanding of how systems are built up and working. By identifying the key stakeholders across the EU Member States, we get an overview of how institutions deal with prevention, what their role in the system is, and what cooperation exists between institutions at different levels. By describing and analysing the drug prevention systems we will be able to create country profiles comprising information on (1) Organisation, (2) Research & quality control, (3) Interventions, (4) Workforce, and (5) Target populations. Based on the results of the mapping and system profiling exercise we will create typologies in order to make recommendations on how the systems, and as a result of that the quality of preventive interventions can be improved. The findings will also allow us promoting the use of quality standards and will inform key training activities. **Methods:** Data will be collected by reviewing existing data of workbooks on drug prevention of the National Focal Points (NFP). New data will be collected by self-administered questionnaires and semi-structured interviews with respondents both from the NFPs and national drug coordination offices. **Outputs:** The presentation will focus on the results of the mapping exercise on the key stakeholders in drug prevention in the different EU Member States, as well as the preliminary results of the analysis of different systems of drug prevention in Europe.

Rachele Donini

ASAP TRAINING PROJECT: TRAINING ON MAIN PREVENTION SCIENCE TOPICS [themed session]

SPEAKER: Rachele Donini

ABSTRACT. January 1st, 2019 is the starting date of a two years European project funded by the European Commission, Justice programme. The 2 main goals of the project are to analyse the prevention systems of the participating countries and to train European DOP (Decision, opinion and policy makers) Master Trainers (MT) on the most effective evidence based prevention interventions in order to improve the quality of substance use prevention and to disseminate the contents to other drug prevention professionals (DPPs) in all participating countries. The presentation will: 1) describe the process undertaken to identify the Master Trainer profile, strictly linked to the prevention system analysis; 2) present the curriculum that will be used to train MTs, built on EUPC (European prevention curriculum) and EDPQS (European drug prevention quality standards), enriched with the contents on how to teach and train other professionals in the field of prevention; 3) explain the recruitment process adopted to identify the trainees of the training session that will take place in September 2019 in Lisbon, with the collaboration of EMCDDA (European monitoring centre for drugs). The recruitment is strictly related to the prevention system analysis in order to choose stakeholders that hopefully can make a difference and have an impact on the prevention system of their country. The prevention system analysis is the subject of another paper presented in the same themed session. The training will be delivered following the methodology of training of trainers (TOT) to assure a wider training impact and coverage around European countries. The implementation includes both presence and distance learning (blended learning). To deliver it digital materials supporting e-learning activities will be developed and are presented in paper 4 in the same themed session.

Barbara Mazzarino, Serena Alvino

THE ASAP-TRAINING INTEGRATED PLATFORM. THE DESIGN AND THE IMPLEMENTATION OF TOOLS FOR SUPPORTING ELEARNING AND PRACTICE SHARING [themed session]

SPEAKER: Barbara Mazzarino

ABSTRACT. To improve the competences of prevention workforce the ASAP-Training project aims to design and implement training on main prevention science topics and prevention quality standards with the support of digital material and web applications, i.e. to deliver a part of training in eLearning. The “eLearning concept” in the ASAP-Training project refers to formal learning, non-formal learning and informal learning [Werquin, 2007] but also to “tacit and explicit knowledge” [Polanyi, 1966]. In particular the sharing of “tacit” dimension of practitioners knowledge, i.e. the unwritten, unspoken, and often hidden knowledge based on emotions, experiences and internalized information, acquired largely through association with other people [Polanyi, 1966] will be fostered through the involvement of practitioners in a Virtual Community of Practice i.e. a group of practitioners who develop their shared practice by interacting at distance through a virtual environment around problems, solutions, and insights, and building a common store of knowledge [Wenger et al., 2002]. Non-formal and informal learning will be fostered in the VCP environment enhancing the creation of a “toolbox” of the community which could be used by VCP members in their daily practice. The ASAP-Training Integrated Platform has been designed and implemented in order to support the eLearning of practitioners working in the field of drug prevention following the concept of “personalized learning environment”. In this presentation we will describe the Integrated Platform and the applied methodologies to: understand and identify the requirement in the field of drug prevention; identify the technological solution; implement the integrated platform. The activities and developed solution we are going to present are examples of the ASAP interdisciplinary approach

that involves Educational sciences, Prevention sciences and ICTs.

Sanela Talič

ASAP TRAINING PROJECT: DISSEMINATION AND SUSTAINABILITY OF THE PROJECT [themed session]

SPEAKER: Sanela Talič

ABSTRACT. Dissemination activities of the project will be (were) adopted in order to actively bring together the worlds of research, practice and policy and to develop an exploitation strategy that will ensure sustainability of project results. Additionally, dissemination activities will be used for promotion of the results of previous projects related to drug prevention (European Drug Prevention Quality Standards “EDPQS” and European Prevention Curriculum “EUPC”). The presentation will offer insight in steps of development of dissemination strategy: review past dissemination efforts (EDPQS, EUPC); defining target groups; developing messages for different target groups; dissemination approaches/channels; consider opportunities for policy agenda setting; evaluation of dissemination activities. Some steps of dissemination strategy include, to some extent, advocacy knowledge and skills.

1.2 - Early Career session 1 (Dormitoriumzaal)

Giovanni Aresi, Chiara Riccardi, Elena Marta

PREDICTORS OF MENTORING RELATIONSHIP QUALITY: A MIXED METHODS STUDY ON A SCHOOL-BASED MENTORING PROGRAMME [EC oral communication]

SPEAKER: Giovanni Aresi

ABSTRACT. Supportive, intergenerational relationships with non-parent adults have been

recognised as key resources for healthy development. School-based mentoring programmes match trained adult volunteers (mentors) with children and adolescents (mentees) selected for being at risk of poor academic, behavioural, or health outcomes. Mentors and mentees meet periodically at school over a period of time. Mentoring has been used in a variety of settings as an effective intervention strategy leading to positive child outcomes across behavioural, social, emotional, and academic domains. Because mentoring works through role modelling mechanisms and the provision of emotional support and positive feedback, the quality of the mentoring relationship is key to its effectiveness. However, our understanding of what contributes to relationship quality is still limited. As part of a larger evaluation study of a school-based mentoring programme in Italy, this mixed methods study aimed to examine what individual and contextual-level factors are related to increased quality in mentoring relationships. 20 mentors were interviewed to collect their narratives. Interviews were transcribed verbatim and thematically analysed. 72 mentors and 34 mentees completed measures of perceptions of relationship quality (Mentor and Youth Strength of Relationship scales). Predictors, as measured by the Match Characteristics Questionnaire and the Youth Mentoring Survey, were: a) sociodemographics; b) mentors' self-efficacy; c) activities done during the meeting; and d) perceptions of elements external to the relationship, including programmatic and school support, parental engagement and peer support. Multivariate regression models were used to analyse data. Analyses are currently undergoing and full results are not yet available. Preliminary results of analyses of interview data suggest that the perceived quality of the mentoring relationship is facilitated by factors that are external to the individual, including support offered by the school and the programme staff.

Emina Mehanović, Rosaria Galanti, Fabrizio Faggiano, Federica Vigna-Taglianti, the EU-Dap Study Group

DO THE PARENTAL PERMISSIVE ATTITUDES TOWARD CIGARETTE SMOKING AND ALCOHOL USE INFLUENCE ILLICIT DRUG USE AMONG ADOLESCENTS? [EC oral communication]

SPEAKER: Emina Mehanović

ABSTRACT. Background: Adolescents' perception of parental norms and attitudes may influence their substance use. Prior studies examined the impact of perceived parental permissiveness toward cigarette, alcohol and drug use on the use of the same substance among adolescents. However, the relationship between parental permissiveness toward licit substances and the use of illicit substances was poorly studied. The aim of this study is to investigate the cross-relations between parental permissiveness toward cigarette and alcohol use on the use of cannabis and other illicit drugs among adolescents. Methods: This is a secondary analysis of the data of the European Drug Addiction Prevention (EU-Dap) trial which involved 12-14 years students of seven European countries. The sample for the present analysis consists of 3,174 students of the control arm. The influence of perceived parental permissiveness toward cigarettes and alcohol as reported by the students at the baseline survey and their illicit drug use at the first follow-up were analysed through multilevel adjusted logistic regression models. Results: Permissive attitudes of parents toward cigarette and alcohol increased the risk of students to use illicit drugs at follow-up. Both parental permissiveness to smoke cigarettes and parental permissiveness to drink alcohol were associated with the risk of illicit drug use among adolescents. The association between the two indicators of permissiveness and drug use was not significant among girls. Conclusion: Parental permissiveness toward the use of licit substances such as tobacco and alcohol increase the risk of adolescent's use of illicit substances.

Parents should be empowered to adopt behaviours not permissive towards tobacco and alcohol use, and to convey messages of disapproval of substance use to reduce the likelihood of their children to engage in illicit drugs use.

Natasha Koper, Hanneke Creemers, Levi van Dam, Susan Branje, Geert Jan Stams

CONNECTING THE INFORMAL CARE SYSTEM AND FORMAL CARE SYSTEM OF MULTIPROBLEM FAMILIES THROUGH YOUTH INITIATED MENTORING (YIM) [EC oral communication]

SPEAKER: Natasha Koper

ABSTRACT. Multi-problem families face multiple problems which are often chronic, intergenerational, and multidimensional. Not surprisingly, multi-problem families receive more mental health care and receive more intensive care, such as out-of-home placements, than families in the general population. Despite the frequency and intensity of care, there is no convincing evidence for the effectiveness of care for youth in multi-problem families in general, nor for out-of-home care for youth in particular. Given the severe and chronic difficulties faced by multi-problem families and the lack of effects of existing treatment programs, an innovative approach has been developed: the *InConnection approach*. The *InConnection approach* has two distinctive features. First, its multidisciplinary team of social workers that allows the targeting of multiple problems. Second, its collaboration with the family's social network through a Youth Initiated Mentor (YIM), a supportive adult from the youth's social network. The approach thus connects formal and informal care systems of multi-problem families, aiming to utilize the full potential of the family's network. Given the importance of the YIM in the *InConnection approach*, treatment success is (partly) dependent on whether youth position a YIM, which was the case for approximately 83% of youth. Although there is some research indicating why youth select a certain mentor, it

is not yet known why the remaining 17% failed to position a YIM. Preliminary results of an ongoing mixed-method study on the positioning of a YIM will be presented. Results from multi-informant interviews with youth, YIMs, parents and social workers will reveal the reasons why most youth position a YIM, and reasons why some do not position a YIM. Quantitative analyses based on multi-informant questionnaire data will indicate which families are most likely to position a YIM. The presentation is concluded with a preview of an ongoing study examining the effectiveness of the *InConnection approach*.

Sara Bortoluzzi, Chiara Airoidi, Marco Baldrighi, Luigi Castello, Clara Gardino, Matteo Giorchino, Fabrizio Faggiano

THE IMPACT OF BRIEF MOTIVATIONAL COUNSELING FOR SMOKING CESSATION IN AN ITALIAN EMERGENCY DEPARTMENT [EC oral communication]

SPEAKER: Sara Bortoluzzi

ABSTRACT. Background and aim of the study. Smoke is still a significant Public Health problem. The Emergency Departments (EDs) could be the ideal setting to set up smoke cessation interventions (high prevalence of smoking patient compared to the general population). The structured brief counseling 5As based (ask, advice, asses, assist, arrange) is an effective Public Health intervention when performed by the General Practitioners. Still not clear is its feasibility and effectiveness in the ED setting. Aim of the study. To assess the feasibility and effectiveness of the 5As based counselling in the University ED of Novara compared to the "usual care". Materials and methods. The study is a Randomized Controlled Trial (April 2017-May 2018). The sample size needed is 1200 and it is composed by adults admitted to the ED self-declared "current smoker" (informed consent provided, no priority code emergency/altered mental status/psychiatric illness). The intervention is structured as follow: 5As based counselling, contact of the smoke cessation center's (CTT) staff (if accepted by the patients), CTT card deliver. All the enrolled population self-

fill a questionnaire aimed to investigate their smoke habits. The follow-up was performed at 6 and 12 months. Results. 480 persons were enrolled (61.3% male): 218 control arm (45.4%), 262 intervention arm (54.6%). The intervention was performed in 126 cases. At 6 months the responders were 115 and 143 in the control and intervention arm respectively. No significant differences in smoke cessation were detected both at 6 months (17 VS 22, $p = 0.9$) and at 12 months (23 VS 20, $p = 0.6$). In conclusion. The study allows to detect some criticalities in the 5As counselling realization. No statistically significant differences were observed in the two arms. However, considering the number of the enrolled population and the number of 5As based counselling performed, further studies are needed.

María del Carmen Torrejón-Guirado, Ana Ruíz-Iglesias, María Isabel Acuña-San Román, Marta Lima-Serrano

CANNABIS CONSUMPTION IN SCHOOL-BASED ADOLESCENTS: SEX AND PERSONALITY TRAITS [EC oral communication]

SPEAKER: María del Carmen Torrejón-Guirado

ABSTRACT. Cannabis is the third most consumed drug and the first illegal. Previous studies researched the influence of personality traits on substance use in adolescence. In Spain we have not found any background that studies this association. We proposed to study the association between personality traits and cannabis use in adolescents. A questionnaire was administered to adolescents between 14-18 years in Andalusia (Spain). Personality traits were assessed through the Substance Use Risk Profile scale adapted to Spanish that values four dimensions: hopelessness, anxiety-sensitivity, impulsivity and search for sensations. Life-time cannabis use was used as a dependent variable. Problematic cannabis use was explored using CAST scale. Binary logistic regression analyzes were carried out, supported by the statistical package R and R-Commander. 381 adolescents

participated. 53.8% (205) were girls. 57% (2117) belonged to 10th course. Average age was 16.34 years and cannabis consumption was 24.2% (91). The mean on the CAST scale was 0.62, SD = 2.21, reflecting a non-problematic consumption. Cannabis use was associated with being male (OR = 1.96, CI95% = 1.11-3.46), academic year (10th VS 11th, OR = 2.02, CI95% = 1, 09-3,77), sensation search (OR = 1.16, CI95% = 1.07-1.26), family functioning (OR = 0.83, CI95% = 0.74-0, 93), and marginally impulsivity ($p = 0.081$). In boys, only the association with the academic year was maintained (OR = 2.52, CI95% = 1.08-5.98), and sensation search (OR = 1.2, CI95% = 1, 07-1.25). In girls, the association was with the family APGAR (OR = 0.74, CI95% = 0.62-0.88). In conclusion, we shown an effect of personality traits in boys but in girls they do not seem to be a determinant of consumption. Deepening the knowledge of the mechanisms associated with cannabis use, differentiating them by gender, allows developing prevention plans and more individualized treatments.

Parvati Perman-Howe, Emma Davies, David Foxcroft

THE EFFECT OF ALCOHOL STRENGTH ON ALCOHOL CONSUMPTION: FINDINGS FROM A RANDOMISED CONTROLLED CROSSOVER PILOT TRIAL [EC oral communication]

SPEAKER: Parvati Perman-Howe

ABSTRACT. Background Reducing the alcohol content of beverages has the potential to reduce alcohol consumption and its related harms at the population level. This study aimed to establish the feasibility of a randomised controlled trial (RCT) to assess the effect of alcohol strength on alcohol consumption in a single drinking occasion within licensed premises in the United Kingdom (UK). Method A double-blind randomised controlled crossover pilot trial was based within four licensed premises in the UK. Participants (36) purchased and consumed *ad libitum* a 3.5% lager (intervention), and a 4.8% lager (control) during two separate study sessions. The study processes were scrutinised for their efficacy and

efficiency. The number of pints (568ml) of lager consumed and rates of recruitment and attrition were calculated. Responses to participant questionnaires were analysed. Results *Feasibility results:* Components of the study protocol were effective and efficient. The venue recruitment rate was less than anticipated whilst the participant recruitment rate was greater than anticipated. The rate of attrition was 23% and varied by less than 1% according to the arm of the trial. *Efficacy results:* There was a trend towards a reduction of alcohol consumed under the intervention conditions. Estimated mean difference, standard deviation (SD) and 95% CI (grams): -30.56 SD=29.83 (-40.65 to -20.46). Participants did not find one lager notably more pleasant in taste than the other: (on a scale of one to 10) -0.95 SD=3.43 (-2.11 to 0.21). Participants found the reduced strength lager notably less enjoyable than the regular strength lager: (on a scale of one to 10) -1.44 SD=3.54 (-2.64 to -0.24). Conclusion A definitive RCT is feasible with protocol modifications. The number of protocol modifications would depend on which of a range of potential scenarios is applied to a future RCT.

1.3 - Campfire 1 (Priorzaal)

Leonardo Bevilacqua, Bianca De Stavola, Russell Viner

THE ROLE OF SCHOOL EXPERIENCE IN MEDIATING THE ASSOCIATION BETWEEN CONDUCT PROBLEMS TRAJECTORIES AND NEET STATUS [campfire]

SPEAKER: Leonardo Bevilacqua

ABSTRACT. Background: Previous research has shown that children and adolescents on different Conduct Problems (CP) trajectories are exposed to a higher risk of being not in education employment or training (NEET) in young adulthood/adulthood. However, there has not been much research on factors that may mediate the association between CP trajectories and NEET status at age 20. Methods: In the present study, we investigated the role of school experience at age 14 years in mediating the

association between CP trajectory group defined from age 4 to 13, namely Early-Onset Persistent (EOP), Adolescent-Onset (AO) and Childhood-Limited (CL), and Low (L) and NEET status at age 20. Using G-computation, we estimated the natural direct and indirect effects of CP trajectory group on NEET using data from ALSPAC. Results: We found that school experience mediates the relationship between EOP trajectory and NEET status at age 20. The impact of attrition on these results was also investigated via imputation of missing values under the assumption of missing at random. Conclusions: These findings highlight the role of schools in potentially minimising the risk of becoming NEET in high-risk youth.

Larissa Nobre-Sandoval, Sheila Giardini Murta

FROM THE PROTOCOL DESIGN TO THE RESEARCH IMPLEMENTATION: RECOGNIZING THE LEGACY AND ADDRESSING THE CHALLENGES OF THE SFP EVALUATION IN BRAZIL [campfire]

SPEAKER: Larissa Nobre-Sandoval

ABSTRACT. The evaluation of preventive programs implemented within the scope of public policies is marked by constraints and potentialities. This presentation aims to discuss the challenges and the methodological, academic and political legacies related to the experience of evaluating the Strengthening Families Program (SPF 10-14) in Brazil, a preventive program for families and adolescents implemented as an instrument of the national drug policy from 2013 to 2018. On the one hand, the selection of a research design that embraced the complexity of reality and responded to ethical dilemmas presented methodological challenges. The initial idea of a randomized clinical trial yielded to a quasi-experimental design using mixed methods and containing a study of the implementation quality and social validity. The main academic challenge was the low institutional capacity to ably utilize the financial resources of the project. Finally, political challenges permeated the entire study, as the implementation of the program had to

deal with several changes in federal management that directly and negatively impacted the research process. On the other hand, its legacies were numerous and broad. Methodologically, verbal and observational evaluation instruments were developed to assess and understand the complexity of the program's processes and results. Additionally, evaluation models were explored in close interdisciplinary dialogue. The academic legacies included the development of a team of more than 50 researchers in 5 states and significant social insertion, internationalization, and expansion of the teaching of methodological discipline in the Graduate Program in Clinical Psychology and Culture of the University of Brasília. The political legacies included establishing relationships among researchers, practitioners, managers, and policy-makers in at least 10 states and the creation of the Brazilian Association for Research in Prevention and Health Promotion (BRAPEP). Such a diversity of legacies invites a work agenda that expands the observed practical, political, and educational impacts.

Günter Stummvoll, Rahel Kahlert, Cees Goos

YOUNG DRUG USERS IN THE CRIMINAL JUSTICE SYSTEM [campfire]

SPEAKER: Günter Stummvoll

ABSTRACT. In this presentation I will reflect on findings from an ongoing European research project on drug prevention practices for young people in the criminal justice system. In this project 189 young people between 15 and 25 years have been interviewed in Austria, Denmark, Poland, United Kingdom, Germany and Italy, to learn about their trajectories and the relationship between drug use and criminal behaviour. Early drug consumption is embedded in a combination of social milieu, opportunity and sheer curiosity of young people. Family problems, school failure, experienced family violence and unemployment may push young people into problematic drug use. On the other hand, stable families and peer relationships, meaningful missions in life and sometimes the death of their dearest friends or relatives may

control and reduce drug consumption habits. Interventions try to interrupt and compensate a series of accumulated risk factors and aim to prepare social conditions to lead a life without drugs and crime. The life-cycle model in prevention tries to intervene in the wider social circumstances of young people and addresses deficits in social control such as poor family relationships ("broken homes"), school drop-out and delinquent peer-groups. Interventions give clients support to better cope with stress, status frustration, labelling and stigmatisation.

However, I will argue that the complexity of criminality and sickness presents a challenge to the system of reactions to this kind of double-deviance of clients. Young drug offenders incorporate both the role of criminals (Criminal Justice System) and the role of the sick (Health System) because they are deviant on both sides. They experience a tension between punishment and the need of professional help, as their alleged danger (criminality) and their vulnerability (sickness, addiction) coincide. This raises interesting questions about institutional means of social control that oscillate between repression and health promotion.

1.4 - Classical oral communications: Substance use prevention (Jan Gillis)

Simone Onrust, Renee Verkerk, Ester Speth, Daphne Visser

DEVELOPMENTAL PERSPECTIVE ON SUBSTANCE USE PREVENTION (PAPER 1: SCIENTIFIC UNDERPINNINGS) [themed session]

SPEAKER: Simone Onrust

ABSTRACT. Background: The Healthy School and Substances is a multi-component school-based prevention program, which is implemented at approximately 60% of all Dutch secondary schools. This year, the Healthy School and Substances program exists 30 years. During this period, we have experienced both successes and setbacks, which is consistent with the inconclusive findings from systematic reviews and meta-analyses about the effectiveness of

school-based programs. In order to improve the effectiveness of The Healthy School and Substances program, we worked out a developmental perspective on substance use prevention. We hypothesized that in order to be effective, programs have to be aligned with the developmental stages of the intended target group (childhood, early, middle, or late adolescence). Methods: Databases were searched for controlled studies of school-based programs, evaluating their effectiveness on either smoking, alcohol or drug use. Multivariate meta-regression analysis was used to analyze the effects of different prevention strategies in childhood, early, middle, and late adolescence. Results: Our meta-analysis evaluated 288 programs with a total of 436,180 students. The findings support our hypothesis that specific prevention strategies are effective in some developmental stages, but not for other age groups. These differences in effectiveness can be explained by characteristics of each developmental period. In this first presentation of the proposed themed session, we will discuss the results of our meta-analysis which form the scientific underpinnings for the developmental perspective on substance use prevention. Discussion: Our findings highlight the importance of considering a developmental perspective when designing and offering school-based prevention programs. Based on these findings, we have designed separate interventions for early, middle, and late adolescents by means of interventions mapping. In the second and third presentation of the proposed themed session, we will elaborate on how we translated the scientific underpinnings into practice.

Renee Verkerk, Simone Onrust, Ester Speth, Daphne Visser

DEVELOPMENTAL PERSPECTIVE ON SUBSTANCE USE PREVENTION (PAPER 2 FRESH START) [themed session]

SPEAKER: Renee Verkerk

ABSTRACT. Background: In this second presentation we will discuss the development and evaluation of a new school-based

prevention program, Fresh Start, for early adolescents (12-13 years old). This is the first program the Healthy School and Substances developed by means of intervention mapping. Methods: As the first paper highlighted the importance of developmental perspective, the developmental needs of early adolescents were taken into account designing the program Fresh Start. The transition to secondary school is associated with profound environmental changes. Early adolescents spend significantly more time with peers and become increasingly concerned with peer-relationships and social acceptance. This process is linked to more positive attitudes toward substance use, which prelude the moment of first use. Prevention strategies which were considered effective in the meta-regression analysis presented in the first paper, were translated into practical applications by means of intervention mapping. This procedure resulted in a new, age-appropriate school-based prevention program for early adolescents: Fresh Start. Fresh Start aims to maintain negative attitudes toward substance use after the transition to secondary school, and is based on theories commonly used in health promotion (Health Belief Model, Theory of Planned Behavior and Transtheoretical Model of Behavior Change). The effectiveness of the program was tested in a randomized controlled trial with 1083 early adolescents. Results: The primary objective of the RCT was to evaluate the effectiveness of Fresh Start on the attitudes of secondary school freshmen toward substance use. We did not expect Fresh Start to influence actual substance use, as substance among secondary school freshmen is still rare. Fresh Start had small but significant effects on the attitudes toward smoking, alcohol use and cannabis use. It can be concluded that Fresh Start can help to delay the development of positive attitudes toward substance use in secondary school freshmen.

Ester Speth, Daphne Visser, Renee Verkerk, Simone Onrust

DEVELOPMENTAL PERSPECTIVES ON SUBSTANCE USE PREVENTION (PAPER 3: PARENT-CHILD PROGRAM AND INCHARGE) [themed session]

SPEAKER: Ester Speth

ABSTRACT. Background: In this third presentation we will discuss two school-based prevention programs, Parent-Child Program, designed for middle adolescents (14-15 years of age) and their parents, and InCharge, designed for late adolescents (aged 16 years and older). Both programs were developed by means of intervention mapping. As both programs are currently being studied, this presentation will focus mainly on our experience in designing and implementing these programs. Methods: The meta-regression analyses discussed in the first presentation demonstrated, several prevention strategies which can be effective in late adolescence, such as improving self-regulation and resisting social influences. These strategies were translated into practical applications by means of intervention mapping, resulting in the school-based prevention program InCharge. Designing an effective program for middle adolescence was more complicated, as the meta-regression analyses did not distinguish any effective prevention strategies for this developmental stage. Therefore, additional data was analyzed to determine which prevention strategies needed to be included into the program. Results: Intervention mapping resulted in two separate age-appropriate programs. The aim of the Parent-Child Program is to make pupils aware of risks, and to influence the social norm in a positive way. As the effects of the child-component of the program were expected to be minimal, this program targets parents as well. The aim for the parents is to stimulate them to set clear boundaries. InCharge aims to promote healthier lifestyles. The program helps the adolescents to realize what is important to them and how certain temptations can hinder them from achieving these goals. It teaches them self-regulation skills by formulating action plans, and practicing self-

regulation through various assignments. Although both programs are based on commonly used theories of behavior change, such as the Health Belief Model and the Theory of Planned Behavior, practical applications are completely different and adjusted to the different developmental stages.

Yasmina Castaño, Montse Juan, Miquel Àngel Guerrero, Gloria Ferrer, Claudia Pischke, Florence Samkange-Zeeb

ASSESSING COMMUNITY-BASED PREVENTION INITIATIVES IN MALLORCA: PRELIMINARY RESULTS OF THE EOPS PROJECT [oral communication]

SPEAKER: Yasmina Castaño

ABSTRACT. The prevention of risk behaviours in children and adolescents (especially those related to alcohol and other drug use) has nowadays become one of the main concerns for families. Initiatives based on community mobilisation are considered key elements to promote changes at the community level. This can be done through the pressure and/or advocacy exerted by diverse sectors of civil society as well as the development of participative processes lead by joint management and co-production of strategies, actions and products. The FERYA model has been running in Spain since 2012. Its aim is to empower parents' organisations to act as socialising agents and drivers of prevention at the local level. The programme explores the extent to which collaborative networks are critical for understanding and improving environments, such as neighbourhoods and communities, and the broader social system. Based on the FERYA model, the EOPS project started in 2017, and was designed with the objective of continuing its implementation in Spain, while extending its implementation in other EU regions (e.g., Coimbra in Portugal representing the first pilot site abroad) and undertaking an external evaluation to assess its impact in Spain and Portugal. Several organisational challenges faced during the

implementation of the EPOPS programme in Mallorca are introduced. Results obtained from the qualitative evaluation undertaken (case studies and analysis of the focus groups) are presented. The methodology used throughout the evaluation of the programme has created a multifaceted and complex mechanism that allows exploration of the impact of community-based prevention. The evidence provided in this presentation is preliminary and a reflection on the programme outcomes in four Majorcan municipalities, as well as on the model of community-based prevention that was developed in the EPOPS programme.

Kelly Baird, Rebekah Grace, Emma Elcombe, Jacqueline Barnes, Jayne Meyer Tucker, Leith Sterling, Grainne O'Loughlin, Simone Gianelli, Lynn Kemp

VOLUNTEER FAMILY CONNECT: BRINGING TOGETHER COMMUNITY MEMBERS, PRACTICE WISDOM AND RIGOROUS RESEARCH TO SUPPORT FAMILIES [oral communication]

SPEAKER: Kelly Baird

ABSTRACT. This presentation reports the results from an Australian study that examined the effectiveness of Volunteer Family Connect, a structured social support early intervention program for families with young children who experience social isolation or a lack of parenting confidence and skills. Volunteer Family Connect, a best practice model of structured social support in the form of volunteer home visiting, was developed by a collaboration of three not-for-profit service organisations, two universities, a corporate partner and a private philanthropist. Volunteer home visiting has been a critical part of the service context for many years, both in Australia and internationally, performing a complementary and unique role in the landscape of family support services. However, these programs have come under threat in recent years because of the lack of methodologically rigorous research providing evidence of effectiveness. A randomised controlled trial of Volunteer Family Connect was

conducted in seven sites across four states of Australia (N = 305) with data collected every three months for 15 months. Intervention families received the program for between 3-12 months depending on their support needs. Primary outcomes were community connectedness and parenting competence. Results demonstrated the program's effectiveness with positive outcomes found for both primary outcome variables. Intervention families were significantly more likely than control families to report improvements in the guidance available to them ($F = 4.58$, $p = 0.033$), their parenting sense of competence ($F = 8.86$, $p = 0.003$), and their general wellbeing ($F = 4.10$, $p = 0.043$). Qualitative findings also identified the value of creating structured social relationships for improving outcomes for families. This research makes a significant contribution to the much-needed evidence-base relating to the continuum of services necessary to prevention and early intervention for vulnerable families, and provides an exemplary model of collaboration between researchers, service organisations, and community members.

Briony Enser, David Foxcroft

ALCOHOL-RELATED COLLATERAL HARM: THE UNSEEN DIMENSION OF ALCOHOL-RELATED HARM STUDY OF STUDENTS AGED 16-24 IN SOUTHERN ENGLAND [oral communication]

SPEAKER: Briony Enser

ABSTRACT. People who drink too much often harm others as well as themselves. Yet, recognition of the significant harms drinkers do to other people remains limited. Paucity of information and poor characterisation of these harms contribute to this neglected target for public health interventions. The UK Government's policy on alcohol-related harms steers attention towards harms to the drinker and thus neglects broader societal concerns. Most of such harms are cumulative and manifest in later life (heart disease, cirrhosis, cancers etc.). This also effectively neglects young-adults as a target audience for preventive interventions. Yet alcohol is their most acute

area of lifestyle risk. This study uses the term *Alcohol-Related Collateral harm* (ARC harm) as a portmanteau acronym to describe this multi-faceted phenomenon. It aims to improve the understanding of the broad spectrum of risk behaviours associated with ARC harm for a sample of young adult students aged 16–24. Study results: 64% of survey participants (N=450) experienced ARC harm, including 50% of non-drinkers. Risk factors for ARC harms were associated immutable individual characteristics, e.g. age and gender and ecological factors arising from exposure to specific normative environments, e.g. being influenced by others' drinking and having family members who drank every day. The ARC harms reported were classified into a novel taxonomy of eight categories of ARC harm pertinent to young adults. Thematic analysis of interviews (N=25) identified key risk factors for ARC harm in contexts that permit, encourage, legitimate or reinforce irresponsible and harmful behaviours by drinkers. Conclusions: Study participants reported high levels of ARC harm experiences, linked to several predictors. Superordinate themes suggest explanations for ARC harms remaining unseen, including the wall presented by current intervention policies that focus on health harms to the drinker. Prevention science for alcohol might learn from the paradigm shift in public understanding of 'passive smoking'.

1.5 - Evidence-based prevention (Oude Infirmierie)

Pamela Buckley, Karl Hill, Abigail Fagan

CHALLENGES AND SOLUTIONS IN TRANSLATING EVIDENCE-BASED RESEARCH INTO PRACTICE [oral communication]

SPEAKER: Karl Hill

ABSTRACT. A serious gap exists between scientific advances in the development and testing of *evidence-based interventions* (EBIs) and their use in communities. Several frameworks describe barriers to the implementation of EBIs including characteristics of the EBIs themselves (e.g., their complexity

and requirements), the organizations within which EBIs are implemented (e.g., their infrastructure and resources), and the larger community context (e.g., knowledge of EBIs). The current study is guided by the Interactive Systems Framework (ISF, Wandersman et al., 2008) that promotes the translation of evidence to practice across three systems: 1) a Prevention Synthesis and Translation System, which summarizes and disseminates information about EBIs in user-friendly formats; 2) a Prevention Support System, which provides training and technical assistance to EBI users; and 3) a Prevention Delivery System, which actually implements EBIs in community settings. Although a substantial proportion of the prevention science literature focuses on evaluating the implementation quality and effectiveness of interventions, much less research has sought to identify variation in EBI dissemination readiness. The goal of this presentation is to fill this research gap, summarize ways to assess dissemination readiness, and provide data on the proportion of EBIs that appear to be ready for dissemination. These goals are addressed by describing how the *Blueprints for Healthy Youth Development*, a prevention synthesis and translation system (within the Wandersman framework) and evidence-based registry hosted at the University of Colorado Boulder, has sought to define and assess EBI dissemination readiness. The degree to which other evidence-based registries in the United States evaluate EBI dissemination readiness, and recommendations for making such judgements more commonplace, are also discussed.

Nick Axford, Tim Hobbs

EVALUATION OF THE MANY NOT THE FEW: HOW CAN WE USEFULLY EVALUATE INTERVENTIONS WHEN A RANDOMISED CONTROLLED TRIAL IS IMPOSSIBLE, IMPROBABLE OR UNNECESSARY? [oral communication]

SPEAKER: Nick Axford

ABSTRACT. Prevention science is dominated by efforts to develop programmes and evaluate

them through randomised controlled trials (RCTs) with a view to scaling those found to be effective. However, it is neither possible, necessary nor desirable to evaluate all interventions experimentally. Reasons include interventions not being ready for such scrutiny, insufficient resource to conduct such evaluations, the absence of equipoise, and the complexity of some interventions. This presents challenges for the prevailing model; specifically, many if not the majority of interventions are left stranded in a no-man's land between initial indications of promise and endorsement by registries of evidence-based programmes registries based on positive trial results. The unhelpful consequences of this can include an unwarranted suspicion of any claims about impact aside from those based on trial evidence, inertia as regards improving interventions, and a disregard by service commissioners of many perfectly useful interventions. This paper explores options for programme developers and evaluators in this space, drawing inspiration from innovative thinking and practice in international development. The options fall broadly into two categories, which together represent a move from counterfactual logic to contribution-based logic and from accountability questions to explanatory or lesson-learning questions. First are alternative forms of impact evaluation, including quantitative techniques that try to mimic control groups and qualitative methods that seek to trace impact based on the intervention theory of change. Second are evaluation methods more concerned with learning lessons about mechanisms, acceptability, implementation and scalability and harnessing the learning to improve practice. The paper presents examples of these approaches and considers their strengths and limitations. Without in any way devaluing RCTs where used appropriately, it argues that the greater use of these other evaluation methods will improve prevention practice and avoid a chasm developing between a few elite programmes and the many interventions that constitute everyday practice.

Ludwig Grillich, Ursula Griebler, Viktoria Titscher, Christa Rameder

REGIONAL HEALTH COORDINATION - AN INTERSECTORAL MULTI-COMPONENT INTERVENTION TO PROMOTE INTERDISCIPLINARITY AND PROFESSIONALISM IN PREVENTION AND HEALTH PROMOTION IN LOWER AUSTRIAN MUNICIPALITIES: DEVELOPMENT AND FIRST RESULTS
[oral communication]

SPEAKER: Ludwig Grillich

ABSTRACT. In health promotion and prevention different professional groups and laypeople address a broad range of health issues. As a result in Austrian communities there are many activities, which are, however, often little coordinated with each other, therefore overlapping and/or partly in competition with each other. Hence, measures are needed to strengthen the interdisciplinary cooperation, coordination and collaboration between different prevention- and health-professionals in the community but also with engaged laypeople. To address this issue in 2016 the Lower Austrian Social and Health Fund (NÖGUS) in cooperation with the Danube University Krems developed an intervention named Regional Health Coordination. The intervention was developed based on the experience of practitioners and the needs and values of the funder (interdisciplinary development group), the CompHP Core Competencies Framework for Health Promotion and qualitative interviews with regional health promotion practitioners. Regional Health Coordination is a multicomponent program: On the one hand, it strengthens the individual's competence in health promotion and prevention. At the other hand, it improves the conditions for health promotion and prevention at the municipality level. Participating municipalities have to sign a contractual agreement with NÖGUS to ensure commitment and to clarify the funding conditions for community measures. Each participating community has the opportunity to

send one community citizen to the postgraduate university course Regional Health Coordinator (60 ECTS, 4 semesters, extra-occupational). Accompanying supporting measures in the municipalities included awareness raising, funding of measures and discussions with decision-makers on the municipality level. The presentation will outline the interdisciplinary development of Regional Health Coordination, describe pitfalls and conditions for success and report first results. In March 2018 the academic course started with 13 students. All of them implemented a needs assessment involving relevant stakeholders and – building on this – developed health promotion and prevention concepts tackling different resources/risk behaviors.

Matej Košir, Sanela Talić

MINIMUM QUALITY STANDARDS IN PREVENTION - FROM POLICY CONSENSUS TO ASSESSMENT AND IMPLEMENTATION [oral communication]

SPEAKER: Matej Košir

ABSTRACT. In September 2015, The Council of European Union adopted a policy document (Council Conclusions) on minimum quality standards in drug demand reduction, which includes 16 standards in different areas of work (prevention, risk and harm reduction, and treatment, reintegration and social rehabilitation). Since then, the EU Civil Society Forum on Drugs (CSFD) and its working group on minimum quality standards have initiated many discussions on future assessment and implementation of those standards. The standards are defined and described very generally in Council Conclusions, so there is a challenge how we can monitor and assess their implementation in practice, especially amongst civil society organisations (CSOs). In the last couple of years, the CSFD developed a rather complex assessment tool (including a part on feasibility study) which will allow CSOs to monitor and assess implementation of minimum quality standards in their countries and organisations. The initial 16 standards have

been broken down into 52 sub-standards, 82 questions and 255 assessment indicators. The feasibility study (as a part of assessment tool) includes additional 54 questions and 186 feasibility indicators (all together 441 indicators). The tool is (technically) developed in a way which will allow countries, regions, local communities and other institutions in the field of drug demand reduction to adapt it for their own monitoring and assessment purposes and will also allow adaptation and further development to monitor and assess some other contexts and settings (e.g. nightlife-related prevention and risk/harm reduction, drug consumption rooms, interventions and services targeting marginalised individuals and groups etc.). The assessment tool testing will be conducted in spring 2019 and preliminary results will be available and presented in autumn 2019 (e.g. EUSPR 2019 conference). The author will focus mainly on standards related to prevention.

Helena Fialova, Michal Miovský, Lenka Skacelova

ESTABLISHMENT AND DEVELOPMENT OF NATIONAL PROFESSIONAL SOCIETY OSPRCH FOR PREVENTION IN THE CZECH REPUBLIC: CONTRIBUTION OF THE PROCESS OF QUALITY IMPROVEMENT AND DEVELOPMENT OF THE FIELD OF PREVENTION AND ITS GRADUAL PROFESSIONALIZATION [oral communication]

SPEAKER: Helena Fialova

ABSTRACT. The contribution focuses on the context of the establishment of the Professional Society for the Prevention of Risk Behaviour (OSPRCH). Approaches the reasons for the establishment, the beginning of the action, and the sense of Professional Society for the Prevention of Risk Behaviour. OSPRCH aim is to bring together professional workers in the field of prevention, to issue expert opinions, to provide examples of good practice. It is also an effort to influence policy and decision makers.

Furthermore, the contribution will present current activities and results of OSPRCH.

Susana Henriques

A QUALITY FRAMEWORK FOR TRAINING PROGRAMS – CROSSING EUROPEAN STANDARDS FOR PREVENTION AND FOR ELEARNING [oral communication]

SPEAKER: Susana Henriques

ABSTRACT. Within nowadays societies it is more and more important to develop training programs that assure the development of a prevention workforce. Aiming to respond to this need the Specialized Training Course in Prevention of Addictions is delivered online and is based on EUPC. In view of being the first online course based on EUPC, in view of the absence of training programmes for prevention practitioners in Portugal, and in view of the emphasis that international guidelines have placed on these two domains (prevention and online distance learning) it was considered important to create a framework that supports the evaluation and monitoring of the Specialized Training Course in Prevention of Addictions. This presentation is about a framework for the evaluation of the specialized training course in prevention online based on two models, the European quality standards on prevention (EMCDDA, 2011), and the Considerations for quality assurance of e-learning provision (ENQA, 2018). Considering quality assurance as a key element within contemporary societies the framework here presented is a tool that can be useful for evaluating other online distance learning programmes focused on professional development of prevention professionals.

Lunch break

(Het Pand, 12:30 – 14:00)

Poster session 1

(Het Pand, 12:30 – 14:00)

Poster 1.1

Maite Kefauver, Joella Anupol, Mariàngels Duch Moya, Zara Quigg, Elena Gervilla

ATTITUDES TOWARDS ALCOHOL USE: A STUDY AMONG YOUNG ADULTS AND TEENAGERS DRINKING IN THE STREETS [EC oral poster]

ABSTRACT. Background. According to several health behaviour theories, attitudes are a key explanatory variable due to their capacity of predicting both intentions and one's behaviour. Regarding alcohol policies, public attitudes can illustrate which interventions have public support and better adherence. Objective. The aims of this study are to explore teenagers and young adults' attitudes towards alcohol use and alcohol availability control, and to determine the relationship with alcohol consumption patterns and their differences by age. Method. A cross-sectional study was conducted from 2017 to 2018, collecting data from groups of teenagers (up to 19 years old) and young adults drinking in the streets (*botellón*) of Palma de Majorca (n=842; 48.8% women, mean age=22.3 years, SD=4.35). Participants were asked to complete a survey about socio-demographic factors, drunkenness' perception (Likert scale), policy-related attitudes (Likert scale), drunken episodes in the last month and the *Alcohol Use Disorder Identification Test* (AUDIT). Also, Breath Alcohol Concentration (BrAC) was assessed with a breathalyser. Results. 195 teenagers (62.6% women, mean age=17.8 years, SD=1.30) and 647 young adults (44.7% women, mean age=23.7 years, SD=4.03) were interviewed. In general, young adults with more favourable attitudes towards alcohol consumption and against alcohol availability control present significantly higher levels of BrAC and AUDIT scores and more drunken episodes in the last month. Regarding teenagers with favourable attitudes towards alcohol consumption and against alcohol

availability control and those who have contrary attitudes, no statistical differences were found in the levels of BrAC, number of drunken episodes or AUDIT scores. Conclusions. Consistent with the literature, attitudes seem to have a relationship with young adults' alcohol consumption pattern. However, teenagers' attitudes were not seen to be related to their alcohol consumption pattern.

Poster 1.2

Clarisse Guimarães, Elena Bonet Linares, Stefania Dede, Elena Gervilla

SIMULTANEOUS ALCOHOL AND OTHER DRUGS USE: DOES IT BOOST THE EFFECTS OF DRINKING ALCOHOL? [EC poster]

ABSTRACT. Introduction. Among Spanish young people aged 15-34, substance use increased between 2015-2017, and the most used substances were alcohol, tobacco and cannabis. The use of multiple drugs potentially increases risks and worsens dependence, and alcohol is found in most polydrug use combinations. Furthermore, simultaneous use of alcohol and cannabis has been associated with increased frequency and quantity of alcohol use, and it approximately doubled the odds of drunk driving, social consequences, and harms to self. Aim. The aim of this study is to assess the profile of people who use alcohol and other drugs simultaneously, and if they consume more alcohol in comparison with alcohol-only users. Methods. 1263 participants (51.9% men, M age=21.48 years, SD=3.232, range=13-30 years) who were drinking on the streets (botellón) of Palma de Majorca were interviewed. They completed a survey about sociodemographic data, drinking frequency, *Alcohol Use Disorders Identification Test* (AUDIT), and another drugs use. Breath Alcohol Concentration (BrAC) was assessed with a breathalyser. Results. 92.5% used alcohol and 36.7% used alcohol and other drugs: 81.3% alcohol and tobacco, 34.3% alcohol and cannabis, 3.5% alcohol and ecstasy, 0.5% alcohol and amphetamines, and 1% alcohol and cocaine. Those who used alcohol and other drugs showed higher BrAC ($t=-4.970$,

$df=925.585$; $p<.001$), more drunk ($t(815.531)=-5.778$; $p<.001$) and violent ($t(536.375)=-3.270$; $p<.001$) episodes during the last month, higher AUDIT score ($t(591.855)=-5.390$; $p<.001$) and took more alcoholic drinks ($t(1235)=-3.542$; $p<.001$). Finally, the relation between gender and simultaneous use of alcohol and other drugs was significant ($\chi^2(1, N = 1263) = 4.603$, $p=.032$). Discussion. The co-use of alcohol and other substances seems to be more frequent among young men and it boosts alcohol consumption outcomes. Prevention and harm reduction programmes should consider polydrug use.

Poster 1.3

Margalida Caimari Ferragut, Maria Balle, Aina Fiol-Veny, Josep Roman, Neus Zuzama

DOES EMOTIONAL VARIABILITY DURING PARENTS-ADOLESCENT INTERACTIONS DEPEND ON RISK OF ANXIETY AND GENDER? [poster]

ABSTRACT. Many anxiety disorders (AD) emerge during adolescence, where parents-adolescent interactions are crucial and may be influenced by temperamental traits and anxiety symptoms. Traditional research misses the interrelated and contextually specific emotions that children and parents experience during interactions. To explore whether parent-child interactions involving at risk for AD adolescents were different from those involving low or no-risk adolescents, we used the state space grid (SSG) method. The objective of this study was analyses if interactions involving at-risk adolescents would be less flexible than interactions where the child was not at risk. Gender differences were also examined. Sixty-eight father-adolescent dyads and 53 mother-adolescent dyads (mean age of adolescents was 14,21, SD=,706) were videotaped during two (positive and negative content) episodes. Videotapes were coded through the Simple Affect Coding System. The GridWare software was used to analyze all this information. Results reported concern two regions in the SSG: Validation-Positive Affect and Anger/Disgust-Distress. *Interactions involving mothers.* Positive affect region:

Positive episodes involving no-risk adolescents revealed more visits than interactions involving high-risk adolescents ($p=.039$). Negative interactions involving boys showed longer events than interactions mothers-girls ($p=.006$). Negative affect region: Positive episodes involving mid-risk adolescents revealed longer mean duration in the region and mean duration per visit than interactions involving no-risk adolescents ($p=.016$ and $p=.033$ respectively). *Interactions involving fathers*. Positive affect region: Negative episodes involving low-risk adolescents revealed more visits to the region than interactions involving mid-risk adolescents ($p=.017$). Negative affect region: Negative episodes involving high-risk adolescents revealed more events ($p=.028$), more region duration ($p=.007$) and larger region range ($p=.023$) than interactions involving low-risk adolescent. These results lend partial support to our main hypothesis (i.e. at-risk adolescents are less flexible than no-risk adolescents) but show that flexibility depends also on the progenitor's gender. Then, the role of parents should be considered in the AD prevention.

Poster 1.4

Olga Ubartiene, Genė Šurkienė

MENTAL HEALTH LITERACY COMPARING TO COMPREHENSIVE HEALTH LITERACY OF 11-12 GRADES SCHOOLCHILDREN, THEIR PARENTS AND TEACHERS [EC poster]

ABSTRACT. Background. Mental health literacy interventions and early identification of mental health problems give everyone the opportunity to manage effectively long-term health conditions. Family and schools play an important role in increasing mental health literacy of youth. The aim of the study: To assess mental health literacy comparing to comprehensive health literacy of 11-12 grades schoolchildren, their parents and teachers. Material and Methods. 1038 Schoolchildren, 587 their parents and 292 teachers were questioned using anonymous survey method. The HLS-EU-Q47 comprehensive health literacy

questionnaire of 47 items, translated into Lithuanian language, has been used to assess health literacy level. The respondents were also asked about socio-demographic characteristics and other factors, which can be associated with health literacy. The statistical analysis were performed using the statistical data processing program SPSS, Microsoft Excel and WinPepi. The reliability coefficient of the survey was $p \leq 0,05$. Results. The data showed that more than half of schoolchildren and parents, and every third teacher have difficulties in gaining and understanding information pertinent to mental health. Lower mental health literacy was associated with poorer comprehensive health literacy. The mental health literacy was lower for boys than for girls, and lower for 11th graders than for 12th graders. Almost all students use internet to seek online mental health support. The most common health problem at school are headache and fatigue. Smoking, less well-educated and unemployed respondents with lower health literacy reported worse mental health literacy. Conclusions. Worse mental health literacy is associated with poorer health outcomes, worse health status self-assessment, addictive behavior and comprehensive health literacy. In general, mental health literacy level was significantly associated with level of education and health behavior. Comprehensive health literacy of children, their parents and teachers is better than mental health literacy.

Poster 1.5

Boris Chapoton, Tess Bonnard, Faïrose Chafai, Franck Chauvin

CREATION OF A CODING MANUAL TO ANALYSE SOCIAL NETWORK SITES CONTENT – THE LITERATURE REVIEW PROCESS [EC poster]

ABSTRACT. Social Network Sites (SNS) allow individuals to share with their contacts their everyday life and/or put forward particular moments of their life, to communicate about their passions and their interests through specific mediums (audio, video, pictures, written content...). These posts are edited through an individuals' profile and shared with relatives,

peers or other people sharing common interests. Individuals have also the possibility to access the content created and posted by private companies and organisations that communicate about their product using the same principles. Used on an everyday basis by the majority of teenagers, SNS could be considered as a powerful source of digital media influence on teenagers. Indeed, traditional media (e.g. press, TV, radio...) have been proven to play an important part within the beliefs associated to specific behaviours. Content analyses techniques developed to characterise the content of these media allowed emphasising the link between specificities associated to these media and individual behaviours. For example, individuals watching TV programs in which a product was associated to a desirable character would be more likely to buy the product or to develop positive beliefs associated to the use of the product. However, no consensus exists regarding the coding techniques and the variables to be taken into account when analysing media content. This poster aims to describe the literature review process that has been developed in order to create a coding manual dedicated to SNS content used by teenagers, focusing on alcohol and tobacco substances messages in particular. The difficulty using commonly used literature review methodology to find articles dedicated to content analyses methods associated to behavioural influence will be pointed out. It could be explained by a lack of specific methodological key terms associated to the articles and/or by the cross-disciplinary perspective of the research (methodology, communication, behaviour, substances...).

Poster 1.6

Neus Zuzama, Maria Balle, Aina Fiol-Veny, Josep Roman, Margalida Caimari Ferragut, Xavier Bornas

RELATIONSHIP BETWEEN VULNERABILITY TO ANXIETY IN ADOLESCENTS AND ACADEMIC PERFORMANCE: THE PREDICTIVE POWER OF COMMUNICATION STYLE

WITHIN MOTHER-ADOLESCENT DYADS [EC poster]

ABSTRACT. Low academic achievement can have severe consequences for students and for society as a whole. Those who are underperforming are more likely to drop out of school and have more difficulty getting high-paying jobs. Different investigations have found that a high proportion of young people with anxiety have low performance and learning disabilities. The aim of this study was to investigate whether there is a relationship between vulnerability to anxiety on adolescents and their academic performance; and to evaluate if communication style of their mothers with them adds predictive power to a worse performance. The sample consisted of 66 mother-adolescent dyads (13.97-year-old). Vulnerability factors for anxiety (behavioural inhibition system (BIS) sensitivity and anxious symptomatology) were evaluated through self-reports. Interpersonal negative interactions of five minutes for each were recorded with a digital camera to evaluate the communication style. Academic performance was recorded by means of the average grade obtained from all subjects. The results showed that there is a significant negative relationship between the academic performance of adolescents and BIS sensitivity ($r = -.24$; $p = .026$), anxious symptomatology ($r = -.24$; $p = .028$) and negative communication style of mothers with their children ($r = -.27$; $p = .014$). In addition, the data revealed that negative communication style of mothers is the only variable in the study that significantly predicts academic performance ($F(1, 62) = 3,763$; $p = .015$). Likewise, negative communication style of mothers in combination with vulnerability factors (BIS sensitivity and anxious symptomatology) explains a significant percentage of the variance of academic performance ($\Delta R^2 = .154$; $F = 5,371$; $p = .024$). In order to improve academic performance, it can be very useful to develop a multilevel intervention to focus on raising awareness among parents of the impact of the communication style they maintain with their children.

Poster 1.7

Josep Roman, Maria Balle, Aina Fiol-Veny, Neus Zuzama, Margalida Caimari Ferragut, Xavier Bornas

PHYSIOLOGICAL SYNCHRONY AMONG ADOLESCENTS WITH MEDIUM RISK FOR ANXIETY AND THEIR FATHERS [EC poster]

ABSTRACT. Background. Depression and anxiety often start in adolescence with an estimated prevalence of 10% to 25%. Child physiological and emotional outcomes are shaped by their parents through parent-child dyadic interactions that occur thousands of times across their development until adolescence. Synchrony is considered one of the most highlighted factors to study the quality of these dyadic interactions and it is defined as the dynamic exchange of physiological and behavioural cues between both interactors. Over the last decade a growing body of research has studied the physiological patterns demonstrating that mothers' and child psychopathology may interfere within dyadic physiological synchrony. Nevertheless, the role of the father in physiological synchrony remains unknown as do the internalizing problems of the adolescents without reaching a clinical condition. Objective. The primary aim of this study was to explore if there exist physiological synchrony among adolescents with low, medium and high risk for the development of affective disorders, and their fathers without mental health disorders. Methods. Interbeat Interval series (IBIs) from sixty-six father-adolescent dyads (mean age of adolescents was 14.14; $SD = 0.66$) were recorded during two (positive and negative content) episodes of ten minute's interaction, separately and counterbalanced. For the quantification of synchrony, we used the *Surrogate Synchrony (SUSY)* algorithm which computes synchrony as windowed cross-correlation of two simultaneously occurring processes. Results. Physiological synchrony was found in father-adolescent dyads in which adolescents had a medium risk for affective disorders but only in the negative content interaction. No synchrony was found in adolescents with low and high risk.

Conclusions. Our results indicate that a medium risk for anxiety could be adaptive when regulating emotions in conflict situations. Thus, prevention in emotion regulation strategies may be indicated not only with adolescents in high risk but also in low risk for the development of affective disorders.

Poster 1.8

Daiana Campani, Silvia Caristia, Fabrizio Faggiano, Alex Amariglio, Silvia Piscone, Lidya Irene Ferrara, Alberto Dal Molin

FALL PREVENTION IN ELDERLY HOME CARE: ARE MULTICOMPONENT INTERVENTIONS EFFECTIVE, SUSTAINABLE AND TRANSFERABLE IN ITALY? [EC poster]

ABSTRACT. Background: Fall risk prevention in elderly is a current challenge. Healthy and active ageing is important for sustainability of public health systems. In Italy it is necessary to transfer scientific evidence into operational protocols to standardize prevention activities and reduce geographical imbalances. Aims: To identify effective, sustainable, and transferable interventions for fall risk prevention in elderly, which can be implemented by health professionals during home assistance. Methods: Following a validated Italian model for "best practice" identification, we are reviewing in the main databases (as PubMed, guideline databases) the most effective and cost-effective evidences on fall risk prevention in elderly people. Three blinded reviewers are assessing evidences for quality, risk of bias and strength. Successively, we will present results to a pool of experts (clinical, health service managers, nurses, and other stakeholders) and, by means focus groups, we will identify the best way for implementation in order to assure effectiveness and sustainability (economic, social and along time) in Italian local contexts. (Expected) results: From literature review we found multicomponent interventions including individual and environmental assessment, individual exercises, visual and walking devices, and home interventions (carpets removal, etc.)

for fall risk prevention. From focus groups with experts, we will expect to find the best way to implement the selected intervention considering resources, barriers and similar experience. Furthermore, we will develop an instruction manual about activities, methods, infrastructural resources, human capital, stakeholders, frequency and duration of intervention, information and educational materials, implementation models. Discussion: This tool will offer to professionals a practice guide in order to making evidence-based decision for fall prevention and healthy ageing promotion. The final handbook could also be useful to maximise health and social benefits, trying to minimize costs.

Poster 1.9

Erica Busca, Silvia Caristia, Tiziana Cena, Fabrizio Faggiano, Alberto Dal Molin

DEVELOPMENT AND EVALUATION OF A NEW TYPE OF NURSE FOR HEALTH PROMOTION IN PRIMARY CARE SETTING [EC poster]

ABSTRACT. Background: due to population ageing and the increasing burden of non-communicable diseases, Italian National Health System reform is shifting care from hospital to community. To provide a coordinated and comprehensive response to people needs and improve health care quality in Vercelli, Local Health Authority, in collaboration with University of Eastern Piedmont, is implementing the Family Health Nurse (FHN). Aim: to evaluate the effectiveness of the FHN nurse role. Method: nurses completed a post-graduation education program and a group of experts has conducted a parallel process of development and implementation of the model. A two arm cluster randomized trial was also designed: FHN will be compared with usual care. The trial will be carried out among 5 FHN in one of the community health centres of Vercelli. Residents aged 75 or older and patients with chronic disease meeting the inclusion criteria will be eligible to participate. The primary outcome is healthcare utilization (emergency room visits and hospitalizations). Secondary outcome

includes people quality of life. Process evaluation will be also conducted. Preliminary results: a total of 2679 persons were eligible for the nurse-led care and prevention programs, of which 84,5% are older people. Development of the FHN has required concurrent revision of people needs, existing nursing services in primary care and inter-professional collaboration. Therefore, nurses will take up complementary roles such as liaison roles to support people in their own health and social problems and will provide lifestyle advice. Discussion. The project highlights a new nurse's role that will take many forms, evolving in response to geographical imbalance in the distribution of health and social workforce in the community. This study is expected to provide evidence of effectiveness of FHN on health status of the target population.

Poster 1.10

Pietro Davide Trimarchi, Emanuele Tomasini, Valerio Gower, Carlo Abbate, Anna Fontanella, Fabrizio Giunco

NEEDS ANALYSIS IN MCI AND MILD DEMENTIA PATIENTS TO DETERMINE AREAS TO BE ADDRESSED WITH COGNITIVE DECLINE RISK REDUCTION ACTIVITIES [poster]

ABSTRACT. Dementia is the fifth leading cause of death worldwide and the third in Europe, and one of the principal cause of disability and dependency. While there is no curative treatment for dementia, the proactive management of modifiable risk factors can delay or slow the onset or progression of the disease, as indicated recently by the World Health Organization (WHO). In the present work, we assessed needs of Mild Cognitive Impairment (MCI) and Mild Dementia (MD) patients to verify in which areas needs are less satisfied and determine if some of the WHO suggested areas of risk reduction activities are relevant or not in our sample. 161 patients (mean age 79.07±5.19; F/M = 89/72; mean education 9.27±4.35; mean MMSE score 26.29±2.82; MCI/MD = 113/48) were assessed with short version of the Camberwell Assessment of Needs for the Elderly

(CANE-S) to determine met and unmet needs. Data were divided in four categories (Environmental, Physical, Psychological and Social, according to Van der Ploeg et al. 2013) and analyzed separately for MCI and MD patients. Overall, MD patients had more met and unmet needs with respect to MCI patients. There are more met than unmet needs in the Environmental and Physical areas for both groups. For MCI patients the same amount of met and unmet needs were present in the Psychological and Social areas whereas for MD patients significantly more unmet needs were present for these areas. Psychological (depression) and Social areas emerged as possible risk reduction fields in recent WHO guidelines. In our sample, Environmental and Physical needs are prevalently met whereas Psychological and Social needs are progressively unmet when passing from MCI to MD. Care services for MCI and MD patients should implement activities to better face with Psychological and Social needs.

Poster 1.11

Ana Maria Bertão S. Neto, Joana Ferreira, Natália Sofia Brochado, Margarida Araújo, Catarina Fonseca

THE IMPORTANCE OF PLURIDISCIPLINARY TEAMS FOR THE REHABILITATION OF PEOPLE WITH MENTAL ILLNESS [poster]

ABSTRACT. The European guidelines for the deinstitutionalization of people with mental illness (MI), according to the current paradigm of community mental health, require changes in the practices of health professionals and the integration of other professionals in this area. Interventions should take place in the least restrictive environment possible and promote the psychosocial rehabilitation. Community resources shall be activated and articulated. Treatments need to be centered on the person, their right to be heard and to participate in the construction of their rehabilitation plans. Considering their health conditions, people should be supported in all their dimensions (health, education, socio-professional, family

and social dynamics), and their right to self-determination must be respected. Project It is intended to present a project of psychosocial intervention with people with severe MI, developed by a pluridisciplinary team. Objectives: to improve the integration of people with severe MI in the community, reduce their isolation and prevent prolonged institutionalization and overmedicalization (Quaternary Prevention).

Inter and transdisciplinary interventions are possible when there is cooperation between professionals with different backgrounds, who construct a holistic view of the person with MI in their relationship with others, considering the contexts in which they live. Results The integration of professionals from the educational and social area into teams traditionally made up only of health professionals, allowed to demedicalize the intervention, and to focus the practices on the person's needs, beyond their illness. Providing space for the active participation of people with MI throughout the rehabilitation process contributes to their social and community integration. The articulation and integration of professionals from various technical-scientific fields ensures a more adequate and useful intervention for this people.

Poster 1.12

Carmen Orte, Joan Amer, Michele Burn, Lluís Ballester, Meu Supol, Marga Vives, Keri Little, John Toumbourou

STRENGTHENING FAMILIES INTERVENTION EFFECTS ON CHILD SCHOOL OUTCOMES: A CROSS-NATIONAL ANALYSIS IN SPAIN AND AUSTRALIA [poster]

ABSTRACT. Introduction: Although the Strengthening Family (SF) intervention has been shown to have a range of child development benefits, the effects on improved school outcomes are unclear. This study harmonised data from the evaluation of the SF interventions in Australia and Spain. The SF intervention seeks to reduce family conflict and child behavior

problems. We investigated whether those targeted risk factors predicted school outcomes. Method: The Australian SF (Strengthening Family Connection, SFC) was implemented from 2012 to 2017 with 126 families with children 8 to 12 years old. The Spanish SFP Family Competence Program-Universal 11-14 (PCF) was implemented in 2017 and 2018 with 275 families (children aged 11-12 were analysed here). Both the Australian SFC and Spanish PCF assessed pre-post treatment changes using Karol Kumpfer's child-report of family conflict/cohesion and behavior problem indicators and included quasi-experimental control groups. The PCF examined child report of school indicators, while the SFC examined parent reports. Results: In Australia, significant pre-post intervention improvements were observed (N = 128 families) in improving parent-reported child school attendance. Spanish PCF observed improvements in family cohesion, but not statistically significant ($t_{(262)}=-0.604$; $p=0.546$). Nevertheless, associations of family cohesion with school indicators are significant: school grades and family cohesion ($r_{s(131)}=0.275$; $p=0.001$), school problems and family cohesion ($r_{s(131)}=-0.333$; $p=0.000$), and association with antisocial friends at school ($r_{s(131)}=-0.312$; $p=0.000$). Australian SFC findings showed similar patterns. Discussion: Risk factors targeted in SF interventions improve education constructs. This effect is evident for SF targeted reductions in family conflict and peer antisocial behavior. These effects appear robust to variations in SF implementation and cross-national culture. Based on our findings, we advocate deliberately designed cross-national SF trials conducted in partnership with school systems.

Poster 1.13

Victor José Villanueva, Marta Corral-Martínez, María Pilar Tormo Irún, Sandra Gómez Martínez, María Jesús Hernández Jiménez

RELATIONSHIP BETWEEN THE DIMENSIONS OF EMPATHY AND VIOLENCE IN THE ADOLESCENT

PARTNER FROM A GENDER PERSPECTIVE [EC poster]

ABSTRACT. Introduction: Some dimensions of empathy are associated with difficulties of emotional regulation, hostility and self-reported anger. The Perspective Taking dimension protects children who come from families with a violent history of perpetrating electronic violence towards their partners. Objective: To establish the relationship of the dimensions of empathy with violence in the adolescent partner from a gender perspective. Participants: Of the 1650 adolescents that make up the total sample, 862 adolescents were selected who had a partner at that time (49.8% boys and 50.2% girls) from 10 educational centers in Teruel, Murcia, Asturias and Valencia (Spain), aged between 12 and 16 years old. Instruments: Scale of Violence in Relationships of Adolescent Couples (CADRI) adapted by Fernández Fuertes, Fuertes and Pulido (2006) and adaptation of the Interpersonal Reactivity Index (IRI) (Pérez-Albéniz et al., 2003). Results: In both sexes, a negative relationship of the dimension Perspective Taking with Self-Reported Relational Violence is shown (boys = $-.097$, girls = $-.171$) and Verbal-Emotional Violence (boys = $-.111$, girls = $-.179$); but with Physical Violence only in girls ($-.131$). On the contrary, in both sexes there are positive relations of Personal Distress with Verbal-Emotional Violence (boys = $.107$, girls = $.116$); but only in boys with Relational Violence ($.154$) and with Physical Violence ($.139$). In addition, only in boys, positive relationships of the dimension of Fantasy with Verbal-Emotional Violence ($.107$) and Physical Violence ($.133$) are found. Discussion: These data suggest the need to adopt a gender perspective in programs that incorporate the dimensions of empathy for the prevention of violence in the adolescent partner.

Poster 1.14

Víctor José Villanueva, Sandra Gómez Martínez, Begoña Iranzo Ejarque, Marta Corral-Martínez, María Teresa Mitjans Lafont

RELATIONSHIP BETWEEN ASSERTIVENESS AND DATING VIOLENCE IN THE ADOLESCENT COUPLE: SEX DIFFERENCES IN AGRESSORS [EC poster]

ABSTRACT. Background: Recent research has focused on trying to know how different variables can be incorporated into preventive programs of dating violence in adolescent. Objectives: 1) To examine the relationship between exercised adolescent dating violence and assertiveness; and 2) Analyze the differences according to sex. Participants: Of the 1650 adolescents that make up the total sample, we selected 862 adolescents who had a partner at that time (49.8% men and 50.2% women). They were selected from 10 educational centers in Teruel, Murcia, Asturias and Valencia, and they were aged between 12 and 16 years. Instruments: Conflict in Adolescent Dating Relationships Inventory (CADRI) adapted by FernándezFuertes, Fuertes y Pulido (2006) and Assertive Interpersonal Schema Questionnaire (AISQ) adapted by Vagos y Pereira (2010). Results: Results show negative correlations between the different forms of violence (relational, verbal and physical) and assertiveness in general and with all subscales. In relation to sex, there are common aspects such as the significant and negative relationship of the violence exercised in general and the violence performed of relational and verbal type with the total scale and the subscales. However, in the case of physical violence exercised, the results show that in men there are negative and significant relationships in assertiveness and in all its subscales, while in women there is no relationship with any of them. Conclusions: Assertiveness is a key factor for the prevention of dating violence in adolescents, it is noteworthy that preventive strategies should be differentiated between sex.

Poster 1.15

Víctor José Villanueva, María Aránzazu Duque Moreno, Sandra Gómez Martínez, Begoña Iranzo Ejarque

MUTUAL FACTORS AND RESULTS WHEN ACCESSING PORNOGRAPHY AND VIOLENT CONTENT WEBSITES: KEYS TO PREVENTION [EC poster]

ABSTRACT. Introduction: The objective is to establish the relationship of access to online pornography in minors with access to violent content websites, and to determine if both behaviors share a mutual internet connection pattern (risk factor), and a mutual online risk, specifically exposure to sexting. Method: Sample: 1061 participants (47.5% men, 52.5% women) from the province of Valencia (Spain). Mean age 13 years (SD = 1.73). Instruments: Different scales are used for the Internet use pattern (Villanueva et al., 2019): a) number of hours, frequency and time zone of Internet connection in the last 30 days; b) improper use of the internet (access to pornographic and violent content websites); and c) exposure to online risks (sexting). Results: Both improper uses of the Internet, access of pornography and violent content webs correlate positively (.33). The pattern of frequent internet use and at night also presents a positive correlation with access to pornography websites (0.14, 0.20 respectively) and violent contents (0.16, 0.12 respectively). With respect to the behaviors associated with sexting, a positive relationship is observed in the reception of intimate sexual contents (photos, videos) with access to the pornography website (0.26) and violent content website (0.24); the Request of intimate sexual contents (0.19 and 0.15 respectively); and the Sending of intimate sexual contents (0.28 and 0.15 respectively). Discussion: The pattern of internet connection, access to online contents of pornography and violence website, as well as exposure to sexting are related to each other, probably acting as factors and/or risk outcomes. They can be approach at a preventive level through family-oriented programs that train in mediation strategies to apply restrictive and supervisory measures.

Poster 1.16

Víctor José Villanueva, María Jesús Hernández Jiménez, María Teresa Mitjans Lafont, Begoña Iranzo Ejarque, María Pilar Tormo Irún

SEX DIFFERENCES IN THE EMISSION OF VIOLENT BEHAVIOR IN THE ADOLESCENT PARTNER [EC poster]

ABSTRACT. Introduction: Adolescence is the period in which learning the dynamics of relationships begins. Facing this challenge can cause relational and conflict problems and lead to violence. Objective: To establish the differences according to sex in the prevalence of violent behaviors in the adolescent partner. Sample: 862 adolescents were selected (49.8% men and 50.2% women) who had a partner from an initial sample of 1650, belonging to 10 educational centers in Teruel, Murcia, Asturias and Valencia (Spain), aged between 12 and 16 years. Instruments: Scale of Violence in the Relationships of Teenage Couples (CADRI), Conflict in Adolescent Dating Relationships Inventory of FernándezFuertes, Fuertes y Pulido (2006). Results: Both boys and girls emit all the behaviors of violence in the partner, but a different prevalence is observed in: I did something to put my partner jealous (boys 31.5%, girls 48.5%); I said something to upset him (boys 30.1%, girls 30.1%); I accused him of flirting or flirting with another person (boys 20.7%, girls 38.6%); I took something bad out of the past (boys 18.6%, girls 26.1%); I spoke to him in a strong or offensive voice tone (boys 17.5%, girls 30.9%); I shot some object (boys 14.2%, girls 18.2%); I tried to separate him from his friends (boys 11.7%, girls 8.1%); I followed him to find out who he was with and where he was (11.4% boys, 10.2% girls). Discussion: Violence in the adolescent partner manifests itself to a greater extent through verbal, relational or emotional violence behaviors, with less physicality. Violence bidirectional predominates, being the girls the ones that present a higher percentage of violent conducts than the boys.

Poster 1.17

Kate Tobin, Tim Hobbs, Shreya Sonthalia, Daniel Ellis, Ruth Wallace, Nicola Davidson, Karen McIntyre

PREVENTION OF DOMESTIC ABUSE WITHIN ADOLESCENT RELATIONSHIPS: LESSONS LEARNED FROM ONE INNOVATIVE APPROACH IN SCOTLAND SEEKING TO ALIGN USER-CENTRED DESIGN APPROACHES, SYSTEMS THINKING AND EVIDENCE OF LOCAL NEED AND PROMISING PRACTICE [poster]

ABSTRACT. This presentation will tell the story of how epidemiological data on local need, user-centred design approaches, systems thinking and existing evidence of promising practice have been applied in one multidisciplinary partnership in Scotland to prevent domestic abuse within adolescent relationships. It will detail how the the public system, voluntary sector providers, research and design teams as well as philanthropic partners 'looked over the wall' and came together to blend these different innovative approaches together to achieve change. Crucially, it provides an illustration of how philanthropic funds could be used as a catalyst to leverage a sustainable change in public expenditure towards prevention and early intervention. A representative from the interagency partnership will take the audience through the following key elements of the initiative: Collection of robust epidemiological data: Understanding young people's wellbeing and experiences of coercive control within adolescent relationships at a population level. Employing data visualisation and inclusive communication techniques: Disseminating data with key stakeholders (i.e. commissioners, practitioners and young people) to allow interpretation of the data, and build consensus around shared priorities. Partnership working: the process of establishing robust governance arrangements that bring together key stakeholders across health, education, social work, wider voluntary sector to become jointly

responsible for delivering the initiative aims. Gathering financial data: Financial mapping to (i) understand existing public expenditure on universal provision, targeted prevention and treatment and; (ii) use the data to identify opportunities for re-investment towards prevention and early intervention. System thinking: (i) mapping out how the local system responds to young people, current supports available, along with the gaps (ii) seek to identify and tackle the root causes of domestic violence within adolescence through facilitated workshops with key stakeholders and rapid evidence reviews. Co-design and ongoing testing: Prototyping and adapting service designs with young people and practitioners.

Poster 1.18

Carmen Orte, María Valero, Victoria Quesada, Rosario Pozo, Josep Lluís Oliver

MOTIVATIONAL INTERVIEWING WITH FAMILIES: PRELIMINARY RESULTS OF THE SYSTEMATIC REVIEW [poster]

ABSTRACT. Introduction: Motivational interviewing (MI) is a method originally designed as an addiction's treatment, with shown efficacy in behavioral change, both as an individual strategy or a complementary component. In recent decades applications have emerged in various fields, such as medicine and psychology. The aim of MI is to promote predisposition towards change. It is implemented to heighten commitment, participation, adherence and to improve interventions' effectiveness. The objective of this study is to identify and analyze the evidence available in socio-educational family-based interventions for adolescents where MI is implemented. Method: A systematic review has been carried out by three researchers in the next databases/research resources: Scopus, Web of Science, EBSCO, ERIC, Dialnet, GoogleScholar and Researchgate. The keywords were: Family program, family-based, family-centered, prevention, intervention, motivational interviewing, motivational interview. The inclusion criteria enclosed: family interventions, socio-educational, preventive component, MI in any of its modalities,

adolescents, published between 1999-2019. The exclusion criteria were: N=1; no results, theoretical articles. Results: Phase(1). The search resulted in 332 files. The titles and abstracts were analyzed taking into account the inclusion criteria. 100 of them were discarded. 55 were also removed to avoid duplicities, as they had been found in different databases. Phase(2). The 145 papers were read considering the inclusion and exclusion criteria. Fleiss' Kappa (Fleiss, 1971) was run to determine if there was agreement among researchers' judgement on whether the articles were rejected, dubious or accepted. There was moderate agreement, $k=.587$, 95% CI [.410, .756], $p<.001$. Individual kappa for the rejected, dubious, and accepted categories was .750, .356, .531. Phase(3). The 60 articles considered accepted or dubious will be analyzed. Conclusion: Most of the studies derive from the medical field, mainly prevention of obesity, diabetes and drug abuse. Preliminary results highlight the presence of studies on the "Family Check-Up".

Poster 1.19

Carmen Martín-Gómez, Isabel Benítez, Sonia Conejo-Cerón, Henar Campos, Alina Rigabert, Irene Gómez-Gómez, Emma Motrico

EFFECTIVENESS OF INTERVENTIONS TO PREVENT THE ONSET OF POSTPARTUM DEPRESSION: A SYSTEMATIC REVIEW AND META-ANALYSIS OF RANDOMIZED CONTROLLED TRIALS [EC poster]

ABSTRACT. Introduction: Globally, the prevalence of postpartum depression (PPD) is 17%. Adverse consequences for mothers and babies have related with this disease. PPD is considered as a major public health issue by World Health Organization. Many trials have been developed to explore the impact of interventions to prevent it, but little is known about the effectiveness of trials focus on reduce incidence of PPD and/or depressive subthreshold postpartum symptoms. The goal of this study is to conduct a systematic review and meta-analysis to assess the effectiveness of psychological, psychoeducational or

psychosocial interventions to prevent the onset of PPD. Method: The systematic review and meta-analysis have followed PRISMA Statement. A literature search has done through MEDLINE(Ovid and PubMed), PsycINFO, Web of Science, Scopus, CINAHL, Cochrane Central Register of Controlled Trials (CENTRAL), Opengrey, Australian New Zealand Clinical Trial Registry, clinicaltrial.gov and evidencebasedtherapy.org. Furthermore, experts in the field had been contacted to identify additional studies missing in the databases search. The selection criteria has been: 1) participants: pregnant women or women that have given birth in the last 6 months, and that were non depressive at baseline; 2) Interventions: psychological and/or psychoeducational and/or psychosocial; 3) comparator: usual care, active control or no intervention; 4) outcomes: specific results on depression; 5) design of the studies: randomized controlled trials. Year of publication, setting of the intervention and language of publication have not had restriction. Analyses consisted of calculating pooled SMD and 95% Confidence Interval. Risk of bias of studies included was assessed through the Cochrane Collaboration risk of bias tool. Heterogeneity, sensitivity and sub-group analysis were also performed. Preliminary results and conclusions: A total of 2048 articles were reviewed by title and abstract and 319 by full text. Only 22 studies met the inclusion criteria to be included. Psychological, psychoeducational and psychosocial interventions have shown preventive effects.

Poster 1.20

Alina Rigabert, Carmen Martín-Gómez, Neus Esterlich-Costa, María Calderón

THE EFFECTIVENESS OF INCLUDING MENTAL HEALTH INTERVENTIONS AT PRIMARY CARE: A SYSTEMATIC REVIEW AND META-ANALYSIS PROTOCOL [EC poster]

ABSTRACT. Introduction. Studies carried out in primary care settings suggests that around 25-55% of the total demand for consultations respond to the presence of a mental health

disorder. In view of the increase in health demand, the lack of professionals, and the short time for consultation, the necessity to incorporate clinical psychologists in primary care settings, has been acquiring a wide recognition in our society. Our aim is to assess the effectiveness and cost-effectiveness of counselling in primary care by reviewing clinical outcome and cost data in RCTs of counselling interventions for patients. Method. A systematic review and meta-analysis will be conducted following the PRISMA-P guidelines. Literature search will be performed through PubMed, PsycINFO, Web of Science, Scopus, CINAHL and Cochrane Central Register of Controlled Trials. Inclusion criteria will be 1) Interventions: psychological and psychosocial provided by a clinical psychologist specialist; 2) Comparator: active control, usual care, no intervention, waiting list or attention control; 3) Outcomes: Incidence or reduction of psychological symptoms, social and occupational functioning. Also, the type and quantity of patient referrals within and external to the sanitary system; 4) Design: randomized controlled trials; 5) Setting: primary care; 6) Practitioner: Professionals trained to PIR accreditation levels or equivalent. Any restriction will be taking into account regarding participants, years of publications or the language of publication. Pooled SMD and 95% Confidence Interval will be calculated. Risk of bias of studies will be assess through the Cochrane Collaboration risk of bias tool. Heterogeneity, sensitivity and sub-group analysis will be also performed. Conclusions. Conclusions of this study will throw light upon the true the necessity of increasing the amount of psychological interventions in primary care settings as the optimal way to prevent the occurrence of growing number of new cases and the cost derived from it.

Poster 1.21

David Alarcón, Isotta Mac Fadden, Cristina Villalba Quesada, Flavio Marsiglia, Stephen Kulis, Stephanie Ayers

GENDER ROLES AND EFFECTIVENESS OF THE CULTURAL ADAPTATION OF THE PREVENTION PROGRAM “MANTENTE REAL” IN SPAIN [poster]

ABSTRACT. The present poster examines the efficacy of the cultural adaptation of the Mantente REAL (Kulis et al., 2012; Marsiglia et al., 2014) drug abuse prevention program in the Spanish context. An important variable to be considered when culturally adapting a prevention program is addressing differences in gender roles. Previous studies have shown that there are marked differences between genders in perception of risk and in the levels of identification with specific interventions. We hypothesize that there will be differences in efficacy for boys and girls based to their levels of adherence to tradition gender roles. One main purposes of the study was to analyze the protective and risk factors associated to gender roles in the efficacy of the intervention. Various demographic data were collected about the students and their substance use behaviors. In addition, information on gender roles, family functioning and exposure to violence in the community were collected through questionnaires adapted to the Spanish context. All measures were based on the evaluation instruments previously used in the *keepin' it REAL* program. All indicators were collected using a questionnaire with responses on Likert scales. The sample included 408 students from 6 secondary schools in Sevilla. The schools were randomized to the control vs experimental groups. Pre-test and post-test measures were used to evaluate the efficacy of the prevention program, while adjusting for age, sex and socio-economic characteristics. Results may assist with prevention strategies associated with gender roles and family functioning.

Poster 1.22

Alessandro Coppo, Antonella Barale, Daniela Alessi, Sara Bortoluzzi, Stefano Parovina, Fabrizio Faggiano

DEDALO STUDY: BASELINE RESULTS OF A COMMUNITY-BASED HEALTH PROMOTION INTERVENTION [poster]

ABSTRACT. Background. Non communicable diseases (NCDs) are the main global cause of death and disability and lifestyle related. The Dedalo project is a community intervention aimed at promoting evidence-based healthy behaviors in the adult population. A community coalition involving the Local Health Authority, Municipality of Vercelli, Eastern Piedmont University and 20 local organizations was created in 2017 in order to provide a wide range of opportunities for the following lifestyles: healthy diet, physical activity, mind training and attachment to the territory. The project consists in 1) coordinating local activities, 2) filling the gaps by introducing new activities and 3) promoting health opportunities with a community campaign. **Materials&Methods.** A before and after study with a comparison group was conducted in order to evaluate the project effectiveness in changing behaviours and to detect social inequalities among participants. Information were detected through an ad-hoc telephone survey. The study population (40-74 years old) was represented by two samples: people attending Dedalo activities and a representative sample of citizens living in Vercelli. The survey was administered in October 2018-January 2019. **Results.** The survey involved 155 persons attending Dedalo initiatives and 214 citizens. Dedalo participants were mainly women (around 80%), people aged between 50 and 70, with a higher level of education and without economic difficulties. No differences in BMI and physical activity were detected, while Dedalo participants had greater sensitivity towards correct nutrition (even if only 20% consume 5 portions of fruit and vegetables a day), and smoking (only 5% comparing to 26% of the general citizens). **Conclusions.** Dedalo project was demonstrated to be a practical and sustainable community-based intervention able

to offer a wide range of health promoting activities to the adult population. The project will have to invest to reduce the social differences of the participants.

Poster 1.23

Terlikowska Jolanta, Robert Frączek, Krzysztof Brzózka, Łukasz Terlikowski, Kinga Terlikowska

THE “INSEPARABLE ONES” CAMPAIGN IN SOCIAL MEDIA - HOW TO SUPPORT THE FAMILY IN ITS PROTECTIVE ROLE [EC poster]

ABSTRACT. A strong bond between parents and a child is a basic factor protecting young people against risky behaviors. In Poland, there is a need to look for new ways to build effective methods to educate parents what they can do in order to support the abstinence of their child. Social media can be one of such tools. The Polish language version of Facebook has gathered over 16 million active users. 80% of them logs in every day and spend average one hour and 45 minutes on the platform every day. This is a huge potential, that can be used to disseminate the educational message. “Inseparable Once” is an example of projects working to reduce a broad spectrum of risk behaviours. The project includes the use of social media most popular in Poland: Facebook, Instagram, Youtube. We will assess to what extent they can be effective in reaching recipients with educational content. We pay special attention to the possibility of using preventive strategies in this environment, whose effectiveness has been scientifically proven. There is a huge potential in social media. Possibilities of personalization of the message and precise targeting allows to reach a very wide group of appropriate recipients with a message tailored to the needs of users. During one year the posts of the campaign have reached over 2.5 million people and the campaign reach has exceeded 10 million views. A computing culture of over 32,000 people was built, people who have been following the posted content on a regular basis. Involvement of significant people, running webinars, running a blog www.nierozerwalni.org additionally allowed not

only to increase the reach of campaign recipients, but also to activate recipients to interact and present their own attitudes and behaviors in the area of their families.

Poster 1.24

Olga Orosova, Jozef Benka, Beata Gajdosova, Anna Janovska, Marcela Stefanakova, Lenka Abrinkova

THE APPLICATION OF THE UNPLUGGED PREVENTION PROGRAM AMONG SLOVAK SCHOOLCHILDREN [poster]

ABSTRACT. *Background:* The accessibility of the data-based drug use prevention programs among Slovak schoolchildren has been rare. *The aim of this presentation is to provide information about national projects carried out in Slovakia and aimed at the exploration of the factors affecting the effectiveness of the Unplugged program.* The aim of the national projects (APVV-0253-11, APVV-15-0662, KEGA016UPJŠ-4/2017) and project designs: To explore the effect of time and the Unplugged school-based randomized control trial on substance use (tobacco smoking, alcohol consumption) among schoolchildren and to analyse the factors affecting the effectiveness: source factors (baseline risk behaviour experience, mediation/moderation factors) and target group factors (age, gender, time frame of the program implementation, fidelity of the program implementation, explored within the Solomon four group design. The analyses were based on two databases: (1) 1283 participating schoolchildren (6th graders, mean age 11.52 years; 46.8%^{boys}) at the baseline. Sixty-three primary schools participated in the study, 32 schools were allocated to the experimental group (n=622) and 31 served as the control group (n=661). In each school, a single class of six graders was involved in this research. The experimental group was exposed to the program Unplugged. A baseline data-collection (September 2013) and four follow-ups (3^{months}, 6^{months}, 18^{months}, 21^{months} after the baseline). (2) 1213 participating schoolchildren (mean age 13.48 years; 49.9%^{boys}) at the first follow up. Twenty-four primary schools participated in the study, 12 schools were allocated to the

experimental group (n=681) and 12 served as the control group (n=532). In each school, all classes of 7th graders were involved in this research. The experimental group was exposed to the program Unplugged. A baseline data-collection (September 2017) and three follow-ups (6^{months}, 18^{months}, 30^{months} after the baseline). Conclusion: An overview of the main findings will be presented and recommendations for practical application in primary schools will be presented and discussed.

Poster 1.25

Samuel Tomczyk, Maxi Rahn, Silke Schmidt

TRAINING IN VIRTUAL ENVIRONMENTS TO PREVENT EMERGENCIES AND DISASTERS: A SYSTEMATIC REVIEW AND META-ANALYSIS [EC poster]

ABSTRACT. Aim. In recent years, use of virtual environments (VE) for emergency and disaster trainings as means of preventing harm following disaster events has steadily increased despite unclear scientific evidence of their efficacy. Thus, we aim to provide a comprehensive systematic review and meta-analysis of the current state of the art. Methods. We searched three databases (PubMed, PsycINFO/PSYINDEX, Cochrane Library) for peer-reviewed randomized controlled trials (RCTs) and quasi-experimental studies (published through June 2018) on the efficacy of VE in emergency or disaster trainings compared to traditional disaster education. For each study, risk of bias was assessed and main data was extracted for narrative synthesis and quantitative meta-analysis. Results. The search identified 17 studies (11 RCTs) with an overall moderate risk of bias that showed mixed results for knowledge and behaviour as primary outcomes. There were noticeable methodological challenges, as measures, settings and scenarios varied greatly across studies, resulting in heterogeneous data ($I^2 = 57-88\%$) for quantitative meta-analysis. Mean differences between VE and control groups were not significant regarding acquisition ($g = 0.26, p = .44$) retention of knowledge ($g = 0.56, p = .44$), task performance ($g = 0.11, p = .97$) or time-to-completion of the

respective task ($g = -0.02, p = .98$). Conclusions. Although findings indicate an equivalence of VE and traditional education, future studies are necessary to rigorously assess efficacy, investigate retention more closely via long-term follow-ups, and examine the impact of intermediary variables, such as sense of presence and self-efficacy, on the efficacy of VE emergency and disaster trainings.

Poster 1.26

Miranda Novak, Martina Ferić, Valentina Kranzelic, Josipa Mihic, Matea Belosevic, Helena Križan, Irena Velimirovic

RESILIENCE AND RISK BEHAVIOR: CROATIAN ADOLESCENTS' PERSPECTIVE [poster]

ABSTRACT. During the year 2017, Croatian Laboratory for Prevention Research has conducted a project Positive Development of City of Zagreb's Youth – state of the art. Purpose of the project was to explore the positive development and risk behavior of adolescents. In addition, a picture of strengths and challenges at the individual level and at the level of environments in which young people live was gained (family, school, community). The aim of this paper is to explore correlation between adolescent resilience traits and their risk behavior. A representative sample included 4821 students from 24 secondary schools in Zagreb, Croatian capital. Age of the participants was from 14 to 19 (48.2% female and 43.7% male). Resilience and Youth Development Module, CHKS (California Department of Education, 1997) and CTC Youth Survey (modified by Mihić, Novak & Bašić, 2011) were applied. Results of analysis have shown that overall CHKS result (protective factors & resilience traits) has negative correlation with all risk behaviors (school skipping, peer violence, sport results gambling, alcohol and marijuana use). Regarding resilience traits, results have shown that cooperation & communication, empathy and goals & aspiration have negative correlation with all risk behaviors. Effective help-seeking have negative correlation with all

risk behaviors except skipping school, while general self-efficacy and self-awareness have positive correlation with sport results gambling. Self-awareness also has negative correlation with marijuana use. Many studies have shown that resilience is associated with positive youth developmental and less involvement in risk behaviors. From this study it can be concluded that resilience (in general) and some resilience traits like cooperation & communication, empathy and goals & aspiration are associated with less adolescent engagement in risk behavior - school skipping, peer violence, sport results gambling and alcohol and marijuana use (life time). In the presentation results will be discussed in more detail.

Poster 1.27

Matea Belosevic, Miranda Novak, Martina Ferić, Valentina Kranzelic, Josipa Mihic, Ms. Helena Križan, Mrs. Irena Velimirovic

INDIVIDUAL RESILIENCE AND FAMILY LIFE SATISFACTION OF ADOLESCENTS [EC poster]

ABSTRACT. During the year 2017, Croatian Laboratory for Prevention Research has conducted a project Positive Development of City of Zagreb's Youth – state of the art. Purpose of the project was to explore the positive development and risk behaviour of adolescents. The aim of this paper is to explore the relationship between individual resilience and family life satisfaction. A representative sample of the survey included 4821 students from 24 secondary schools in Zagreb, Croatian capital. Age of the participants was from 14 to 19 (48.2% female and 43.7% male). Family Satisfaction Scale, FACES IV (Olson & Gorall, 2006) and Resilience and Youth Development Module, CHKS (California Department of Education, 1997) were applied. The results have shown that that boys are more satisfied with family life than girls ($p < 0.05$). The relationship between resilience traits and family life satisfaction was analyzed. Higher results on resilience traits were associated with a higher result of family life satisfaction and contrary. There is contribution

of predictors of resilience traits in explaining family life satisfaction. For boys, cooperation & communication, empathy, effective help-seeking and self-awareness are significant predictors in explaining family life satisfaction, but goals & aspirations and self-efficacy had no predictive value. Contrarily, only self-efficacy was not found to have predictive value in explaining family life satisfaction for girls. Association between individual resilience and family life satisfaction was confirmed in other studies (e.g. Fredrickson, et al. 2003; Gardiner, 2006). Family environment, as well as ones satisfaction with family life, can play important role in moderation of stressful life events and adverse consequences of the various negative impacts that are adolescents exposed to (Waylen, Stallard & Stewart-Brown, 2008). Moreover, if adolescent recognize their families as resource, family as a system have better chance to enhance (influence) their positive development.

Poster 1.28

Sarah Hennelly, Sofia Hussain, Tristan Hale, Martha Cadle, Joanne Brooke, Emma Davies

STAND BY OR STEP UP? EXPLORING STUDENT ATTITUDES TO INTERVENING IN HARASSMENT AND ASSAULT [EC oral poster]

ABSTRACT. Background: Half of British university students experience assault and harassment behaviours, with potential risk to their health and academic outcomes. Less than a quarter of sexual assaults are reported, and fewer victims report homophobia, xenophobia, racist, or sexual harassment. Bystander intervention training, which targets witnesses' ability to step up and help others, has been recommended as a means of reducing these risk behaviours. However, there is little evidence about the potential effectiveness of such programmes in European contexts in either reducing unwanted behaviours, ameliorating consequences, or increasing reporting. We sought to understand students' attitudes towards reporting and intervening in harassment and assault.

Methods: A mixed methods cross sectional survey (N=201; 75.6% women) was conducted in one British university. Open text data were analysed using thematic analysis. Results: We found that students considered harassment and assault unacceptable, and that they were confident to intervene in and likely to report incidents. However, fear of backlash was a barrier to intervening and reporting, and students felt that victims should decide whether to report incidents. They felt that perpetrators were often ignorant about what constitutes consent, harassment, and assault, and called for university community education about this and how to report incidents and support peers. Discussion: Positive attitudes towards prosocial bystander intervention could be capitalized upon to develop theory and evidence-based bystander training programmes. Such interventions might improve understanding of consent, increase prosocial intervention and reporting, and reduce the prevalence of unwanted behaviours that risk student outcomes.

Poster 1.29

Katarina Perić, Marina Merkaš

REFUGEE CHILDREN IN CROATIA: EXPERIENCES, NEEDS AND EXPECTATIONS [EC oral poster]

ABSTRACT. Over the past few years Europe faced the arrival of refugees from different countries. They left their homeland for different reasons such as escape of war, search for a better life, etc. By leaving their homeland, during migration process to the host country and during adaptation to the host country refugees are exposed to many stressful and traumatic events, especially harmful for children as the most vulnerable group. Interviews were conducted with refugee children (N = 10), 8 to 16 years old, who currently live in Croatia. The thematic analysis of the responses collected by the interviews included 14 subtopics divided into three broad categories – the main themes: experience of arrival and migration, experience of life in Croatia, and needs and wishes for the future. The refugee children described how the most important for their adjustment were

relationships with family, friends, teachers, volunteers and employees of shelters and primary school. The refugee children also stated the need for stable and legal refugee status in Croatia, for a safe home and a desire to learn, especially Croatian language. The results of this research point to the importance of the support systems, formal and informal, for the process of adapting refugee children to new living conditions. The opportunity to receive education, learn the language of the host country and be properly supported by informed teachers and peers are just some of the interventions that have proved effective in other countries where research on refugee children has been conducted. That brings out the question of universal needs refugee children and interventions for them have. This research provides a deeper insight into the needs and specific experiences of refugee children as a particularly vulnerable group, which can provide an opportunity for researchers and practitioners to find effective ways of working with refugee children.

Poster 1.30

Antje Kula, Matthias Mai, Laura Brunemund, Katja Mackowiak, Ulla Walter

PROMOTING PROBLEM SOLVING SKILLS - STRENGTHENING RESILIENCE - HOW TO MEASURE? [EC oral poster]

ABSTRACT. The ability to successfully cope with challenges and problems in everyday life is considered an essential facet of resilience and as a protective factor for children and youths throughout their development. The promotion of social cognitive problem solving skills in preschool age is therefore of particular importance. The joint KoAkiK (Instructional support in inclusive child care institutions) project, funded by the Lower Saxonian Ministry for Science and Culture, aims at strengthening the cognitive and personal learning competencies of kindergarten children by training the educational staff in instructional support methods (Sustained Shared Thinking, Scaffolding). Effects will be evaluated in a controlled longitudinal study design using a

mixed methods approach. 27 childcare institutions take part (intervention group n=16, control group n=11). Qualitative and quantitative data will be collected at staff as well as child level at two measurement points in time. 401 children took part in baseline evaluation. The children's level deals with an indirect outcome, i.e. to what extent changes can be found in the children which are due to the further qualification of their educational specialists. The test battery for children includes two parts that focus on problem-solving skills, since it is assumed that the pedagogical methods of the skilled workers enable the children to deal more actively and constructively with problem situations: First, the game "Camelot Jr." (Smart Toys and Games) captures the ability to solve abstract, strategically more complex problems. By means of the Wally Child Social Problem-Solving Detective Game (WALLY; Webster-Stratton et al., 2001), social problem-solving strategies in everyday situations are determined. At time of submission the posttest data collection is still running, so it is not yet possible to make any statements on the definite sample size or on the results in the pre-post comparison.

Sofa Plenary 1 **(Refter, 14:00 - 15:30)**

LOOKING OVER THE WALL—THE FUTURE OF PREVENTION SCIENCE AND PREVENTION

Zili Sloboda - Applied Prevention
Science International (United States)

The "Wall" to me is Human Behavior; both positive behaviors that enhance our social, emotional, and physical health, and, negative behaviors that put our social, emotional, and physical health at risk. The study of human behaviors has been fragmented for decades falling into well-defined domains such as epidemiology, sociology, psychology, neuroscience, biostatistics, genetics, economics, biology, chemistry and others. And even within these domains there is a separation between research—the study of these behaviors and practice—the application of the research towards changing behaviors. I see prevention science as not just looking over the wall, but breaking the wall and integrating the work of the researchers and of the practitioners. Prevention science is in its infancy right now. The serious question is how to move forward internationally so that prevention science is an established field of study and practice. Suggestions are made using the field of medicine as a framework.

With the participation of **Kristine Sørensen** - Global Health Literacy Academy (Denmark) and **Gerard Hastings** – University of Stirling (United Kingdom)

Coffee break **(Het Pand, 15:30 – 16:00)**

Parallel sessions 2 (16:00 – 17:35)

2.1 - TED-style talks (*Refter*)

Tim Hobbs, Nick Axford, Jenny North

PREVENTION AT THE INTERSECTIONS: ADVENTURES IN MULTIDISCIPLINARY PRACTICE [TED-style talk]

SPEAKER: Tim Hobbs

ABSTRACT. The field of prevention science is approaching a crossroads in how we think about the design, improvement and evaluation of services and approaches to improve human development across the life-course. Decades of epidemiological, aetiological and experimental research have produced an impressive body of scientific knowledge about ‘what works’ to improve outcomes. Yet the insights and practice emerging from these endeavours have limited uptake in policy and practice, compounded by well-established challenges in their generalisability or transportability across time and context. This talk will first consider some of the reasons underpinning these challenges, including, but not limited to: Design principles (insufficient involvement of users or beneficiaries in a design process; a tendency for scientists to over-engineer solutions); Different and changing contexts (services or programmes not being adequately designed to fit local systems and contexts; or adapt to different or changing contexts); Insufficiently nimble evaluation approaches (traditional incremental and linear approaches to evaluation do not keep pace with changing policy, practice and local contexts; challenges in accounting for complexity); Knowledge transfer and dissemination (a focus on communicating to siloed scientific audiences, and insufficient attention to key policy and practice audiences). The second part of this talk will consider some responses to these challenges to prevention science. ‘Looking over the wall’ – co-creating and partnering across disciplines – is considered essential if the promise of prevention science is to make it into the mainstream. The talk will reflect on efforts by ourselves and others to work at the intersections between science-based and user-centred design, as well as

situating the design, testing and evaluation of interventions in the messy complex systems in which they are ultimately implemented.

Maria Portugal, Kate Tobin, Ben Hartridge, Tim Hobbs

IT MAY WORK, BUT WHY DOES NO-ONE TURN UP? THE NEED FOR AN INTENTIONAL FOCUS ON DESIGN IN PREVENTION RESEARCH [TED-style talk]

SPEAKER: Maria Portugal

ABSTRACT. Since the start of the 20th century, Design, as a discipline, has been gradually moving from its industrial roots and occupying new spaces of practice and theory. Designers are progressively re-defining their level of intervention, agency and accountability in prevention research, by proposing alternative perspectives on place-based interventions and engagement. Whilst Design within a multidisciplinary context is still developing; its expansion embodies a radical shift in research practice when addressing specific social issues, services and target groups. Understanding the nuances of the role that Design holds in research is recognising designers as ‘generalists’ and ‘specialists’, ‘outsiders’ and ‘insiders’, ‘participants’ and ‘observers’, who are learning from a wide range of disciplines. During this talk I will address: how Design practice is ‘looking over the walls’, merging with other disciplines – Social Sciences, Healthcare, Policy - and transforming cross-disciplinary approaches; the ‘experimentality’ of a Design approach to evidence and users when designing preventive services; and the distinctive attributes and emergent responsibilities of designers in the 21st century. These themes will be illustrated through applied prevention research and design work in the context of homelessness. The Hothouses for Innovation is an UK initiative undertaken by Crisis, in collaboration with the Dartington Service Design Lab, to respond to local homelessness issues across three different areas of the UK. In the Oxford site, the work focused on homelessness prevention through food banks. It embraced Design principles, which included bringing together those who use

the service, those who deliver the service and those who commission the service to collaboratively identify the challenges and co-produce responses using an intensive Service Design Sprint methodology. The collaborative aspect of the work helped situate design practice in prevention research and challenge pre-existing evidence and workforce assumptions, leading to service designs more likely to gain traction and have a positive impact.

Rosie Mansfield, Praveetha Patalay, Neil Humphrey

MENTAL HEALTH LITERACY: A SYSTEMATIC REVIEW OF EXISTING CONCEPTUALISATION AND MEASUREMENT IN ADOLESCENCE [TED-style talk]

SPEAKER: Rosie Mansfield

ABSTRACT. *Background:* With an increased political interest in school-based mental health education, the dominant understanding and measurement of adolescent mental health literacy (MHL) should be critically appraised. *Aims:* To investigate conceptualisation and measurement of adolescent MHL and the extent of methodologically homogeneous research. *Method:* Databases (e.g. PsycINFO) and grey literature were searched (1997-2017). Included articles used the term 'mental health literacy' and presented self-report data for at least one MHL domain with an adolescent sample (10-19 years). Definitions, methodological and contextual data were extracted. *Results:* Ninety-one articles were identified. Increasingly stretched definitions of MHL have led to conceptual confusion, methodological inconsistency and a lack of validated adolescent measures. The most commonly assessed domains were attitudes towards mental illness and help-seeking; however, frequency of assessment varied by definition usage and study design. Recognition and knowledge of mental illnesses were assessed more frequently than help-seeking knowledge. A mental-ill health approach continues to dominate the field, with few articles assessing knowledge of mental health promotion. *Conclusions:* Adolescent MHL

research is increasing. Researchers should move away from assessing 'mental disorder literacy' and towards 'mental health literacy'. By reframing MHL as a multi-construct theory, and validating adolescent measures, adolescent mental health promotion can be optimised.

Leonardo Bevilacqua, Bianca De Stavola, Russell Viner

SCHOOL-LEVEL PREDICTORS OF CONDUCT PROBLEMS TRAJECTORIES [TED-style talk]

SPEAKER: Leonardo Bevilacqua

ABSTRACT. *Background:* Conduct Problems (CP) can differ in terms of continuity/desistence across different stages of life such as childhood and adolescence. Although there have been a number of research efforts to investigate individual-level factors associated with continuity/desistence of CP in adolescence, less is known about school factors that may potentially underlie continuity/desistence of CP such as school-level factors. *Methods:* in the present work, we run longitudinal latent class analysis (LLCA) to identify trajectories of CP across adolescence using the Learning Together study dataset. We then investigated the role of a number of school-level factors (i.e. school deprivation, school type, school gender and school climate amongst others) in predicting class membership using multinomial logistic regression. We identified two classes of CP: a stable low and a moderate-high class across males and females. *Results:* A number of school-level factors predicted persistent patterns of CP in males and females separately. Positive school atmosphere was found to be strongly associated with a lower risk of persistent CP across males and females. *Conclusions:* Student-teachers' relationships, sense of belonging to the school and participation in school activities are important aspects that researchers and schools should consider when implementing prevention and intervention programs for youth with CP and antisocial behaviour.

2.2 - Early Career session 2: Oral communications and oral posters (*Dormitoriumzaal*)

Batul Rojeab

MOTIVES, CONSEQUENCES AND CONSUMPTION PATTERNS OF ALCOHOL AND CANNABIS IN COLLEGE STUDENTS OF QUITO-ECUADOR [EC oral communication]

SPEAKER: Batul Rojeab

ABSTRACT. Alcohol and cannabis consumption can generate difficulties to health, and also lead to social, familiar and personal problems. College students are one of the most vulnerable populations for these substances, even in comparison of people of the same age range that is not studying at university. Despite this, Ecuador almost have no research about college students and their drug consumption. This study makes a first contact with the reality of college students of Quito, the city where reside the majority of college students of the country. For this study, there were analyzed three variables related to alcohol and cannabis use among college students: Motives, consequences and consumption patterns. The sample was compound by college students from 18 to 22 years, of 6 universities. The age of onset of alcohol consumption is 15,3 years. Most of the sample shows an alcohol consumption pattern of in the form of *binge drinking* especially on weekends, the main reason that leads to alcohol consumption is "to celebrate something" and the main consequence is "Losing certain things because you've spent too much money on alcohol." The age of onset of cannabis consumption is 16,7. The pattern of cannabis use is similar between men and women. The majority of cannabis consumers, use it once a month and does not exceed two marijuana cigarettes a week, but it is striking that the average consequences of consumption correlate with the DSM IV-TR dependence diagnostic criteria. The main reason to consume is "to relax/sleep." Implications: The results obtained from this research, pioneer in its class, will serve to lay a foundation in which to carry

out more extensive and in-depth research on this population that is not widely studied in the national context, it will also allow the development of prevention and intervention plans designed for their specific needs.

Víctor José Villanueva, Adelaida Lozano Polo, Ana Esteban Herrera

MULTIDISCIPLINARY AND MULTICOMPONENT APPROACH TO HE CANNABIS-TOBACCO JOINT: ÉVICT PROJECT [EC oral communication]

SPEAKER: Víctor José Villanueva

ABSTRACT. Introduction: The prevention of cannabis-tobacco polydrug use requires community and multicomponent approaches, with the involvement of different agents and materials based on scientific evidence. The National Committee for the Prevention of Smoking has promoted the ÉVICT Project (Evidence Cannabis-Tobacco), with funding from the National Plan on Drugs (Spain), in order to study and develop actions on the "joint" cannabis-tobacco phenomenon. Method: Multidisciplinary Working Group composed of 27 professionals with experience in the control, prevention and treatment of addictions (cannabis and tobacco). Face-to-face work meetings (1-2 per year), definition of lines of action and creation of work subgroups with periodic online meetings and collaborative work.

Results: In 2018-2019 the actions have been developed: a) Cannabis-tobacco consumption prevention project in Universities (12 Universities); b) Conceptual mapping of cannabis-tobacco in university students (140 participants, 4 Universities); c) Porro-Online survey for analysis of cannabis-tobacco consumption patterns and associated variables; d) Online Grade (25 hours) on policonsumo cannabis-snuff (800 people trained); e) Publications (scientific articles, infographics, technical manuals, videos, information-sensitization materials) (eg triptych about the cannabis-tobacco knot for university students and for pregnant consumers; technical material about strategies of the cannabis industry and tobacco to attract new consumers, etc); f)

Teaching unit for prevention in Secondary Education; and, g) Dissemination in scientific forums, social networks and mass-media. Conclusions: The ÉVICT Project is an active agent in the implementation of preventive actions (universal, selective, indicated and environmental) through interventions in awareness, training, research and cannabis-tobacco control strategies in different areas of action. The multidisciplinary work provides complementarity of perspectives and actions, add value on the cooperative work both in person and online, being the main value of the EVICT Project.

Bartosz Zaniewski

ATTACHMENT STRATEGIES AMONG YOUNG PEOPLE WHO EXHIBITED HARMFUL SEXUAL BEHAVIOUR – DEVELOPMENTAL PATHWAY CONSIDERING INTERGENERATIONAL ATTACHMENT DYNAMICS [EC oral communication]

SPEAKER: Bartosz Zaniewski

ABSTRACT. The presentation will discuss findings from research exploring attachment strategies among young people who displayed harmful sexual behaviour. The study examined the narratives and attachment profiles of eight young men who had engaged in harmful sexual behaviour. It also explored attachment strategies of four parents. Attachment theory and social constructionism were chosen as a theoretical framework for this research. A multiple- case design was utilised which included information from interviews: the Transition to Adulthood Attachment Interviews (TAAI), Semi-structured interview and the Adult Attachment Interview (AAI). All participants including parents, presented with complex insecure attachment strategies, i.e. oscillation between extreme avoidant and ambivalent strategies, alongside indicators of unresolved traumas or losses. The interview data highlighted absences of effective strategies for self-soothing, emotional regulation, and a lack of experience of comfort. These deficits in turn appeared to influence the development and the

nature of their harmful sexual behaviours. The presentation will illustrate parent-child attachment dynamic including impact of unresolved trauma and loss on parenting capacity and subsequent development of maladaptive strategies. It will also examine influence of broader social discourses about roles, gender and masculine identity. Overall it will present developmental pathway to HSB through the lens of attachment theory and social constructionism with consideration for broader family and social context. Applications for prevention and clinical intervention will be discussed.

Barak Shapira, Ronny Berkovitz, Paola Rosca, Yehuda Neumark

SELF-REPORT OF ILLICIT DRUG SUBSTITUTION BEHAVIOR IN A SAMPLE OF ISRAELI HIGH-RISK DRUG USERS [EC oral communication]

SPEAKER: Barak Shapira

ABSTRACT. Background: While medically sanctioned forms of drug substitution, such as opioid replacement therapy are standard practice in the treatment of substance use disorders, there are instances when substitutions are carried-out by drug users themselves. Substitution can be operationalized as a conscious choice to use a drug, legal or illicit, instead of another, due to the expected effects of the substitute. As a facet of polydrug-use, substitution represents a potential risk to drug users, particularly with the advent of novel psychoactive substances with high potency and efficacy. In this context, there is a need for a thorough conceptualization of substitution behavior and patterns. Method: 547 high-risk drug-users attending physical detoxification and opioid maintenance treatment centers in Israel were interviewed to date. Patients were asked questions about current drug use, frequency of use, and self-substitution patterns. One sample T-test, Chi-Square test, and Eta correlation coefficient were used to identify and test correlates of reported substitution patterns. Results: Just 35.5% of the sample reported heroin as their preferred substance, followed by cannabis and hashish (22.7%), cocaine (19.9%),

and synthetic cannabinoids (3.7%). The lifetime prevalence of substitution, as reported by participants, was 76.6%. The four most common patterns reported were heroin to methadone (13.9%), cannabis to synthetic cannabinoids (9.3%), heroin to oral synthetic opioids (7.3%), and heroin to cocaine (7.3%). There was a moderate association between age, age at onset of drug use and substitution patterns among heroin users ($\eta=0.57$ and $\eta=0.42$, respectively). A strong association was observed between age, age at onset of drug use and substitution patterns among cocaine users ($\eta=0.82$ and $\eta=0.79$, respectively). Conclusion: A self-substitution behavior should be commonly taken into account by clinicians, as a significant practice among the majority drug-users. Understanding common patterns of substitution, and elucidating related motivations could contribute to better prevention and risk mitigation strategies.

Maite Kefauver, Joella Anupol, Mariàngels Duch Moya, Zara Quigg, Elena Gervilla

ATTITUDES TOWARDS ALCOHOL USE: A STUDY AMONG YOUNG ADULTS AND TEENAGERS DRINKING IN THE STREETS [EC oral poster]

SPEAKER: Maite Kefauver

ABSTRACT. Background. According to several health behaviour theories, attitudes are a key explanatory variable due to their capacity of predicting both intentions and one's behaviour. Regarding alcohol policies, public attitudes can illustrate which interventions have public support and better adherence. Objective. The aims of this study are to explore teenagers and young adults' attitudes towards alcohol use and alcohol availability control, and to determine the relationship with alcohol consumption patterns and their differences by age. Method. A cross-sectional study was conducted from 2017 to 2018, collecting data from groups of teenagers (up to 19 years old) and young adults drinking in the streets (*botellón*) of Palma de Majorca ($n=842$; 48.8% women, mean age=22.3 years, $SD=4.35$). Participants were asked to complete a

survey about socio-demographic factors, drunkenness' perception (Likert scale), policy-related attitudes (Likert scale), drunken episodes in the last month and the *Alcohol Use Disorder Identification Test* (AUDIT). Also, Breath Alcohol Concentration (BrAC) was assessed with a breathalyser. Results. 195 teenagers (62.6% women, mean age=17.8 years, $SD=1.30$) and 647 young adults (44.7% women, mean age=23.7 years, $SD=4.03$) were interviewed. In general, young adults with more favourable attitudes towards alcohol consumption and against alcohol availability control present significantly higher levels of BrAC and AUDIT scores and more drunken episodes in the last month. Regarding teenagers with favourable attitudes towards alcohol consumption and against alcohol availability control and those who have contrary attitudes, no statistical differences were found in the levels of BrAC, number of drunken episodes or AUDIT scores. Conclusions. Consistent with the literature, attitudes seem to have a relationship with young adults' alcohol consumption pattern. However, teenagers' attitudes were not seen to be related to their alcohol consumption pattern.

Sarah Hennelly, Sofia Hussain, Tristan Hale, Martha Cadle, Joanne Brooke, Emma Davies

STAND BY OR STEP UP? EXPLORING STUDENT ATTITUDES TO INTERVENING IN HARASSMENT AND ASSAULT [EC oral poster]

SPEAKER: Sarah Hennelly

ABSTRACT. Background: Half of British university students experience assault and harassment behaviours, with potential risk to their health and academic outcomes. Less than a quarter of sexual assaults are reported, and fewer victims report homophobia, xenophobia, racist, or sexual harassment. Bystander intervention training, which targets witnesses' ability to step up and help others, has been recommended as a means of reducing these risk behaviours. However, there is little evidence about the potential effectiveness of such programmes in European contexts in either reducing unwanted

behaviours, ameliorating consequences, or increasing reporting. We sought to understand students' attitudes towards reporting and intervening in harassment and assault. Methods: A mixed methods cross sectional survey (N=201; 75.6% women) was conducted in one British university. Open text data were analysed using thematic analysis. Results: We found that students considered harassment and assault unacceptable, and that they were confident to intervene in and likely to report incidents. However, fear of backlash was a barrier to intervening and reporting, and students felt that victims should decide whether to report incidents. They felt that perpetrators were often ignorant about what constitutes consent, harassment, and assault, and called for university community education about this and how to report incidents and support peers. Discussion: Positive attitudes towards prosocial bystander intervention could be capitalized upon to develop theory and evidence-based bystander training programmes. Such interventions might improve understanding of consent, increase prosocial intervention and reporting, and reduce the prevalence of unwanted behaviours that risk student outcomes.

Katarina Perić, Marina Merkaš

REFUGEE CHILDREN IN CROATIA: EXPERIENCES, NEEDS AND EXPECTATIONS [EC oral poster]

SPEAKER: Katarina Perić

ABSTRACT. Over the past few years Europe faced the arrival of refugees from different countries. They left their homeland for different reasons such as escape of war, search for a better life, etc. By leaving their homeland, during migration process to the host country and during adaptation to the host country refugees are exposed to many stressful and traumatic events, especially harmful for children as the most vulnerable group. Interviews were conducted with refugee children (N = 10), 8 to 16 years old, who currently live in Croatia. The thematic analysis of the responses collected by the interviews included 14 subtopics divided into three broad categories – the main themes:

experience of arrival and migration, experience of life in Croatia, and needs and wishes for the future.

The refugee children described how the most important for their adjustment were relationships with family, friends, teachers, volunteers and employees of shelters and primary school. The refugee children also stated the need for stable and legal refugee status in Croatia, for a safe home and a desire to learn, especially Croatian language. The results of this research point to the importance of the support systems, formal and informal, for the process of adapting refugee children to new living conditions. The opportunity to receive education, learn the language of the host country and be properly supported by informed teachers and peers are just some of the interventions that have proved effective in other countries where research on refugee children has been conducted. That brings out the question of universal needs refugee children and interventions for them have. This research provides a deeper insight into the needs and specific experiences of refugee children as a particularly vulnerable group, which can provide an opportunity for researchers and practitioners to find effective ways of working with refugee children.

Antje Kula, Matthias Mai, Laura Brunemund, Katja Mackowiak, Ulla Walter

PROMOTING PROBLEM SOLVING SKILLS - STRENGTHENING RESILIENCE - HOW TO MEASURE? [EC oral poster]

SPEAKER: Antje Kula

ABSTRACT. The ability to successfully cope with challenges and problems in everyday life is considered an essential facet of resilience and as a protective factor for children and youths throughout their development. The promotion of social cognitive problem solving skills in preschool age is therefore of particular importance. The joint KoAkiK (Instructional support in inclusive child care institutions) project, funded by the Lower Saxonian Ministry

for Science and Culture, aims at strengthening the cognitive and personal learning competencies of kindergarten children by training the educational staff in instructional support methods (Sustained Shared Thinking, Scaffolding). Effects will be evaluated in a controlled longitudinal study design using a mixed methods approach. 27 childcare institutions take part (intervention group n=16, control group n=11). Qualitative and quantitative data will be collected at staff as well as child level at two measurement points in time. 401 children took part in baseline evaluation. The children's level deals with an indirect outcome, i.e. to what extent changes can be found in the children which are due to the further qualification of their educational specialists. The test battery for children includes two parts that focus on problem-solving skills, since it is assumed that the pedagogical methods of the skilled workers enable the children to deal more actively and constructively with problem situations: First, the game "Camelot Jr." (Smart Toys and Games) captures the ability to solve abstract, strategically more complex problems. By means of the Wally Child Social Problem-Solving Detective Game (WALLY; Webster-Stratton et al., 2001), social problem-solving strategies in everyday situations are determined. At time of submission the posttest data collection is still running, so it is not yet possible to make any statements on the definite sample size or on the results in the pre-post comparison.

2.3 - Campfire 2 (Priorzaal)

Gregor Burkhardt, Nick Axford, Shreya Sonthalia, David Foxcroft, Fabrizio Faggiano, Charlotte De Kock

WHY DO FLAGSHIP EVIDENCE-BASED PROGRAMMES FROM THE US RUN AGROUND IN EUROPE, AND HOW SHOULD ONLINE REPOSITORIES OF PROGRAMMES DEAL WITH THIS?

[campfire]

SPEAKER: Gregor Burkhardt

ABSTRACT. The field of prevention and early intervention for children and young people is dominated by evidence-based interventions developed in the US. Several of them have been found to be effective in multiple trials, leading to their endorsement by independent expert panels for online repositories of programmes such as Blueprints for Healthy Youth Development. In the last decade this has led to numerous attempts to import some of these flagship programmes to Europe with a view to replicating the effects seen in the US. However, randomised controlled trials of these interventions in European countries have often produced disappointing results (e.g. Functional Family Therapy in the UK, and Strengthening Families 10-14 in Germany, Poland and Sweden). The discrepancies between US and European trial results for high-profile evidence-based programmes pose a dilemma for online repositories such as the Xchange database hosted by the European Monitoring Centre for Drugs and Drug Addiction. Specifically, how should such studies be treated when rating programmes, what rating system is suitable, and how should ratings be communicated to policy makers and practitioners? A further problem arises when European trials of US imports show positive effects but are assessed as being of low quality, preventing the assignment of a high rating. This paper is in three parts. First, it explores reasons posited for why replication trials in Europe often produce null, negative or mixed results (e.g. relating to the delivery context and evaluation design). Second, the paper reflects on how we can improve the effectiveness of US interventions in Europe (and indeed if such an endeavour is even possible or desirable). Third, the paper outlines the various methods adopted by online repositories such as Xchange to address the dilemmas described, appraises their strengths and limitations and considers the optimal approach from the perspectives of scientific credibility and end-user needs.

*Nick Axford, Vashti Berry, Tim Hobbs,
Louise Morpeth*

STANDARDS OF EVIDENCE AND 'WHAT WORKS' REPOSITORIES IN CHILDREN'S SERVICES: A CRITICAL APPRAISAL
[campfire]

SPEAKER: Nick Axford

ABSTRACT. The last decade has seen a proliferation in Europe and beyond of online repositories of evidence-based programmes designed to improve child outcomes such as behaviour, substance use, mental health, relationships and educational attainment. These resources are typically designed to help service commissioners and providers to select and then implement programmes that have robust evidence of effectiveness for targeted outcomes. Most repositories are underpinned by 'standards of evidence' which are used to guide the rating of programmes by an expert panel. While supporters extol the influence of these initiatives in making service commissioners more discriminating about what they fund, detractors contend that they stifle innovation and embody an unduly narrow view of both evidence and intervention approach. Drawing on first-hand experience of developing, applying and using standards of evidence and associated repositories, this paper reflects critically on their strengths and limitations. On the plus side, for instance, these resources offer commissioners a clear yardstick against which to compare the effectiveness of different interventions. However, they are usually restricted to programmes, which make up a small fraction of regular practice, and tend to pay insufficient attention to the generalisability of effects – especially in complex systems – and the acceptability of interventions to service providers and users. These and other weaknesses make it harder to infuse practice with evidence, in part because decision-makers are left in the dark about important matters but also by incentivising evaluation efforts that are not necessarily optimal for improving service effectiveness. The paper makes proposals for how standards of evidence and the repositories they underpin could usefully be developed to

inform better service design, evaluation and commissioning in children's services. These focus respectively on *content* (e.g. attending to external validity and implementation issues) and *application* (e.g. providing training and support to the users of such resources).

Helen Williams

**BREAKING DOWN THE WALLS,
HANDING OVER THE AXE:
ENVIRONMENTAL EDUCATION AND
PREVENTION** [campfire]

SPEAKER: Helen Williams

ABSTRACT. Young people experiencing inequality and at risk of exclusion are considered to be most 'at risk' of using drugs dangerously. Working with 7 students experiencing: poor self-esteem and confidence; poor social skills, literacy/numeracy; drug use; complex family issue, including drug use; involvement with Child and Adolescent Mental Health Services; long-term truancy. Crew worked in partnership with the Green Team environmental education charity, a Park Ranger and a High School to deliver an 11-week, structured programme of conservation skills, peer-led sessions focused on coping strategies, impacts of risk-taking and decision-making behaviour in the local context, and nature skills. Students completed a self-assessment using the Warwick-Edinburgh Mental Wellbeing (WEMWB) scale at the start and end of the programme. Students scored themselves between 33 and 59 out of 70 across mental health wellbeing domains at outset.

By the end of the programme, all students significantly increased their score, with improvements ranging between 11% to 21%. Average percentage improvement: 13%. All students attended each session, improved attendance at school afterwards and 6 students reported feeling more confident in risk and harm reduction strategies, where to look for information and help, and who they could speak to within the school. All staff involved in the programme reported increased knowledge and confidence in supporting students. Staff observed increased abilities to try new activities, follow instructions, and engage with meaningful

activities. Staff saw the students gain confidence in sharing their ideas and listening to others as they realised that their opinions were important. Behaviour issues reduced significantly as the pupils engaged. The impact shown, even with a small number of participants, indicates that this could be a model researched and evaluated more fully by prevention scientists working with practitioners and potentially adopted more widely as a prevention approach with young people facing multiple challenges and risk factors.

2.4 - Themed session: STAD in Europe (*Jan Gillis*)

Johanna Gripenberg, Tobias Elgan

THE STAD MODEL IN THE NIGHTLIFE SETTING AND AT LARGE SPORTING EVENTS [themed session]

SPEAKER: Johanna Gripenberg, Tobias Elgan

ABSTRACT. Introduction One of the most successful alcohol prevention strategies targeting binge drinking is the STAD model in responsible beverage service (RBS), which was developed and evaluated in Stockholm. The model includes the following components: community mobilisation, RBS training, and improved enforcement and policy work. Within the three-year EU-funded *STAD in Europe* project, the STAD model was tailored to, and pilot tested in 6 other European countries and 4 settings. In Sweden, the STAD model was tailored to sport arenas hosting matches in the Swedish Premier Football League. Aim This session presents the STAD model and provides a brief overview of the *STAD in Europe* project. Results from the work conducted at the Swedish football arenas in Stockholm are presented. Methods The tailored STAD-based intervention includes components such as community mobilisation, RBS training including a 2-day training for managers and a brief web-based training for staff, policy work and improved enforcement, and media advocacy. The intervention was evaluated using breath alcohol concentration measurements among spectators

and pseudo-patron studies, where professional actors portrayed a scene of obvious alcohol intoxication while attempting to enter the arena and order an alcoholic beverage. Results Key stakeholders were mobilised and coproduced intervention strategies. More than 1200 staff have been trained in RBS and several media advocacy activities were launched generating over 300 stories. Studies conducted show that the implemented intervention strategies have contributed to increased rates of denied entry, and alcohol purchase of obviously intoxicated spectators, and decreased alcohol intoxication levels among spectators. Discussion The STAD model was successfully tailored from the nightlife scene to the sport arena setting. The work conducted at the arenas showed positive results. Key stakeholders wish to continue the work that has been implemented.

Matej Košir, Sanela Talić

ALCOHOL AND YOUTH IN SLOVENIA – PREVENTION CHALLENGES AND THE WAY FORWARD [themed session]

SPEAKER: Matej Košir

ABSTRACT. In 2017, UTRIP and the City of Kranj implemented a pilot intervention based on STAD model specifically focused on increasing the compliance rate regarding selling alcohol to minors and intoxicated young adults in nightlife premises. Mystery shopping was used as the key research method. The training of staff in nightlife premises based on Club Health project model was conducted as a part of intervention and 12 staff members from 8 intervention sites participated at the 3-hour interactive training. Media advocacy and campaign was included in the intervention as well to promote the enforcement of alcohol policy measures at local level. The baseline study showed that the compliance rate was 0 %, which means that all minors and drunk young adults were "successful" in all attempts to buy alcohol. Of a total of 150 attempts to buy alcohol in all four phases of mystery shopping action (November-December 2017), young activists and actors were "successful" in 145 cases (96.7 %), so there were only 5 refusals to sell alcoholic drinks to minors and visually drunk young adults overall.

The results of the intervention showed almost complete indifference of the bar/pub staff to the respect of the alcohol law which was widely presented to media and key political stakeholders at local and national level. In 2019, STAD-based intervention has been repeated in some other Slovenian cities with the co-financing of the Ministry of Health and the Office of the Republic of Slovenia for Youth. UTRIP aims to involve key national and local stakeholders (e.g. local authorities, police and inspectorates, schools, etc.) much strongly in preventive activities regarding alcohol use among youth to strengthen the enforcement part of intervention (especially proactive police involvement) and improve compliance rates in participating cities. Some improvements, initiatives (e.g. campaign) and remain challenges will be presented at the conference.

Mariàngels Duch Moya, Elena Gervilla, Zara Quigg, Montse Juan, Joella Anupol

THE STAD MODEL – THE PILOTING IN THE OPEN PUBLIC SPACES [themed session]

SPEAKER: Mariàngels Duch Moya

ABSTRACT. Introduction In Spain, around 70% of students (aged 14-18 years) have consumed alcohol in the past month. Moreover, approximately 32% of students report binge drinking in the past month. A popular setting for binge drinking *botellón* (drinking in open public settings). Further, the 2018 ESTUDES study found that half of alcohol purchased by adolescents aged 14-17 years was bought in supermarkets. Aim To assess the adaptability of the STAD model in public settings. The intervention included the establishment of a multi-agency steering group, community mobilization, training of municipality staff and neighbourhood organizations. Method The pilot was implemented between June and September 2018. The intervention was evaluated using breath alcohol concentration measurements among individuals attending *botellón*, and alcohol test purchases in supermarkets by minors. Results Baseline measures of the sale of alcohol to minors and checking of ID in stores (n=73), along with BrAC levels of individuals

attending *botellón* (n=634), were taken. ID was checked in 19.2% of the attempts of alcohol purchase and only 24,7% refused to sell alcohol to minors. Almost 80% of the young people attending *botellón* has a BrAC level higher than 0 mg/L, and almost 2% had a BrAC level higher than 1 mg/L. Discussion The piloting suggested that a STAD-based intervention can be implemented in Spain and tailored towards reducing alcohol consumption amongst *botellón* attendees. Strengthened law enforcement and targeted *botellón* police operations are in place. Training of trainers in major supermarkets is being conducted and a collaborative enforcement agreement has been signed.

Lotte Voorham

WHAT WE FOUND IN THE STAD IN EUROPE PROJECT AND LESSONS LEARNED [themed session]

SPEAKER: Lotte Voorham

ABSTRACT. In this workshop the results and implications of the STAD in Europe project are being shared and discussed with you. The STAD in Europe project started in 2016 and aims to tackle heavy episodic drinking by restricting the availability of alcohol in several drinking environments by using the STAD principles. STAD in Europe builds on the knowledge of one of the most successful prevention strategies targeting binge drinking: STAD (STockholm Prevents Alcohol and drug problems). It is one of the few community action programme's that has shown significant effects on the reduction of overserving of alcohol, underage drinking in city areas, and the reduction of alcohol-related aggression. Within the STAD in Europe project we aimed to use the knowledge gained in Sweden to come to an integral European approach for reducing availability of alcohol for young people. In 7 countries, 7 tailored STAD-based interventions were developed and implemented. Both the process and the outcomes were researched and registered. The project resulted in an intervention manual applicable to all EU MS that was presented on a final symposium. This spring, this three-year EU project is was finalized and final results are being presented.

Zara Quigg, Joella Anupol, Nadia Butler, Rebecca Bates, Kim Ross-Houle, Mark Bellis

EVALUATION OF THE STAD IN EUROPE (SIE) PILOT INTERVENTIONS [themed session]

SPEAKER: Joella Anupol

ABSTRACT. The SiE project aims to gather knowledge about the best way to develop and implement STAD-based interventions across European drinking settings. The evaluation had two core objectives: (1) to document and describe the development and piloting of the seven interventions, and (2) to identify if STAD-based interventions can be developed and piloted across different drinking environments in seven European countries, and the potential impacts of the interventions. Each pilot site conducted their own local process and outcome evaluation. Surveys and interviews were conducted with SiE partners pre and post piloting to explore the processes of intervention development and implementation, anticipated and achieved outcomes, and reviewed pilot site research reports and other intervention documentation. The SiE project evaluation suggests that the STAD model has the potential to be transferred across different alcohol drinking settings in Europe, particularly across commercial drinking settings. The presence of supporting alcohol legislation, cultures that are supportive of preventing harmful alcohol use and related harms, and multi-agency working can facilitate the development, implementation and potential success of a STAD-based intervention. Even without these factors, components of the model, particularly community mobilisation, can be developed to support future intervention development and implementation. The SiE project and associated interventions have elicited new knowledge on alcohol across Europe. Further, it has supported the mobilisation of communities to address the issue and raised capacity through training key stakeholders. Local evaluation suggests that the implementation of the pilot interventions is associated with addressing factors that promote the harmful use of alcohol. Further implementation and robust evaluation of the

pilot SiE interventions is required however to determine the sustainability and the long-term impacts of such interventions across European drinking settings.

2.5 - Classical oral communications: School and family prevention (*Oude Infirmerie*)

Wadih Maalouf, Karin Haar, Virginia Molgaard, Rachel Calam, Aala El-Khani

STRONG FAMILIES: A NEW OPEN-SOURCE FAMILY SKILLS PREVENTION PROGRAMME AIMING TO PREVENT A BROAD SPECTRUM OF RISK BEHAVIOURS IN DIFFERENT REGIONS [oral communication]

SPEAKER: Karin Haar

ABSTRACT. Family skills programmes support caregivers to be better parents and strengthen positive age-specific and age-appropriate family functioning. Strong Families (SF) is a family skills programme developed for families living in challenged settings. It can be easily adapted and is best suited for families with children between 8 and 15 years. It's delivered through 3 training sessions over 3 weeks. SF has been piloted in 5 countries (Afghanistan, Serbia, Uzbekistan, Zanzibar, Dominican Republic) and will be implemented in another 4 countries in West Africa and the Middle East. The same methodology was applied in all countries, and the programme was evaluated for its short-term impact on the child mental wellbeing and parenting skills through a set of questionnaires (Demographics, Strengths and Difficulties Questionnaire (SDQ), Parent and Family Adjustment Scale (PAFAS)), once before and twice after the training, after 2 and 6 weeks respectively. In Afghanistan, 72 female caregivers and their children attended the programme, 91.7% had experienced war/armed conflict in their past. The total difficulty score of the SDQ reduced significantly after the programme, from 17.8 at pre-test to 12.9 and 10.6, with no difference in gender and those children benefitting most that had the highest

scores at baseline. Likewise, PAFAS scores improved significantly, again with caregivers with the highest scores at baseline improving most. Similar results were found in refugee reception centres in Serbia where the SDQ total difficulty score decreased significantly from 14.2 at pre-test to 10.8 and 10.0. Again, no difference in gender was found, and those children with highest scores at baseline benefitting most. Discussion. The implementation of a brief family skills programme was feasible in resource-limited settings and had an impact on child mental health, parenting practices and family adjustment skills. This indicated potential for inclusion at larger scale, however long-term effects need to be verified.

Brenda A Miller, Hilary F Byrnes, Veronica Rogers, Beth Bourdeau, Joel W Grube, David B Buller, W. Gill Woodall, Julia Berteletti

A FAMILY-BASED PROGRAM TO REDUCE TEEN ALCOHOL USE AND RISKY SEXUAL BEHAVIOR [oral communication]

SPEAKER: Brenda A Miller

ABSTRACT. Smart Choices 4 Teens is an online, interactive, family-based program for parents and older teens designed to reduce teen alcohol use and risky sexual behaviors. A randomized controlled trial (N=411 families) found significantly better outcomes for teens in the experimental condition as compared to controls in terms of decreased alcohol use (Byrnes et al., 2019) and decreased sexual risk behaviors. Smart Choices 4 Teens included three modules: parent-teen communication, teen alcohol use and related problems, and teen relationships. This presentation focuses on a detailed description of the alcohol module which targeted eleven topics: (1) the decision to drink or not drink, (2) social host laws, (3) physical effects of alcohol, (4) signs of alcohol poisoning, (5) social consequences of alcohol, (6) an interactive Blood Alcohol Calculator, (7) myths about alcohol, (8) creating a safety plan for parties, (9) parental influences, (10) refusal skills, and (11) defining a drinking problem. Four

different types of materials were incorporated-- video narratives, info-gadgets, interactive activities, and structured discussions. Parents and teens engaged in the same materials but did so separately, coming together to choose and discuss hypothetical scenarios that guided the discussion offline. A “nudge” feature was embedded to allow teens to prompt their parent to finish a module and move to the end-of-module offline discussion or vice versa. The nudge feature was used a total of 561 times by 218 users. A total of 86% of experimental families began the intervention and 50% of families completed the alcohol component. The average time needed to complete the alcohol component was 16 minutes. Parents and teens reported learning new lessons and becoming more comfortable with discussing alcohol use together. Barriers to completion included failure to understand content and needing additional instructions. Plans for next steps are to implement Smart Choices 4 Teens in a sustainable real-world setting.

Sheila Giardini Murta, Larissa Nobre-Sandoval, Luís Gustavo do Amaral Vinha, Viviane de Paula Rocha, Ana Aparecida Vilela Miranda, Karina Damous Duailibe, Maria do Socorro Gomes, Danielle Aranha Farias, Ingrid Gomes Abdala, Jordana Calil L. de M. de Oliveira

IS THE STRENGTHENING FAMILIES PROGRAM EFFECTIVE IN BRAZIL? INTRAGROUP COMPARISON BETWEEN PRE-TEST AND 10-MONTH FOLLOW-UP [oral communication]

SPEAKER: Larissa Nobre-Sandoval

ABSTRACT. This study aimed to evaluate the effects of the Strengthening Families Program (SFP 10-14), adapted for Brazil, on patterns of drug use, antisocial behavior, school performance, and school dropout (primary outcomes) as well as parenting practices, learning self-efficacy, future time perspective, and school engagement (secondary outcomes)

by means of an intragroup comparison between pre-test and 10-month follow up. The sample included 126 adolescents, between the ages of 10 and 14 years coming from low-income families, whose mothers mostly lacked formal schooling, and were residents of northeastern Brazil. Intragroup comparison was performed via the Wilcoxon signed-rank test, for numerical and ordinal variables, and using McNemar's test for binary variables. Consistently with the action theory of the SFP 10-14, adolescents at follow-up reported significantly higher learning self-efficacy ($p = 0.003$). On the other hand, significant effects on absences at school without parental permission ($p = 0.019$) were found. Null effects were found on the consumption of alcohol in the last month ($p = 0.579$); episodes of binge drinking in the last month ($p = 1.000$); antisocial behavior ($p = 0.811$); parenting practices, on emotional support factors ($p = 0.730$), intrusiveness ($p = 0.897$), and supervision of behavior ($p = 0.067$); future time perspective ($p = 0.405$); doing homework ($p = 0.642$); grade repetition ($p = 0.202$); school grades ($p = 0.287$); school dropout ($p = 1.000$); and satisfaction with one's relationship with school ($p = 0.681$). The findings of this study are in line with recent European studies of culturally adapted versions of SFP 10-14, which have also shown conflictive effects. Future studies should examine the contexts and mechanisms linked to such mixed results.

Andrew Percy, Michael McKay, Jon Cole, Harry Sumnall

LONGER-TERM IMPACT OF A COMBINED CLASSROOM AND PARENTAL INTERVENTION ON ALCOHOL-RELATED HARMS AND HEAVY EPISODIC DRINKING: RESULTS FROM A LARGE SCALE CRCT (STAMP TRIAL) [oral communication]

SPEAKER: Andrew Percy

ABSTRACT. Evidence for longer-term effectiveness of universal school-based alcohol prevention interventions is still rather limited. This paper presents the +57 month (from baseline) follow-up of a combined school and

parental universal alcohol intervention for adolescents. Participants were 5,029 high school students in Northern Ireland and Scotland (38% of the original 12,738 pupils randomised into the trial), across 87 schools (82.3% of the original recruited schools). Primary outcomes (heavy episodic drinking and alcohol related harms) were assessed using two-level random intercepts models (logistic regression for HED and negative binomial for number of ARHs). Results of the present study show that the significant intervention effect for heavy episodic drinking HED observed at +33 months following the intervention ending (OR=0.60, 95% CI 0.49 to 0.73; McKay et al., 2018) had dissipated over the following two years (OR=0.97, 95% CI 0.76 to 1.23). The reduction in the intervention effect was due to a growth in the prevalence of HED amongst intervention students (*a catch-up effect*) rather than a decline in prevalence amongst control students. No differences in ARH were observed between the two study arms at any follow-up time point. Results are discussed in relation to the sustainability of prevention intervention effects.

Richard Lynas, Elizabeth Hurst, Kate Holley

AN EXPLORATORY STUDY OF TEACHER'S REQUIREMENTS TO DELIVER DRUG EDUCATION HELP! I HAVE A LESSON - A UK CASE STUDY [oral communication]

SPEAKER: Richard Lynas

ABSTRACT. There is substantial evidence showing that learning social and emotional skills can have a positive impact on the outcomes of young people, including their health, wellbeing and school attainment. The UK's Office for Standards in Education, Children's Services and Skills (Ofsted) has identified a strong correlation between schools that achieved a high grade for personal, social, health and economic education (PSHE) and those that were graded outstanding for overall effectiveness. As elements of PSHE become statutory in English schools from September 2020, teachers will be required to teach about drugs and alcohol. Under new

legislation, by the age of 11 children should know the facts about legal and illegal harmful substances and their associated risks, including smoking, alcohol use and drug-taking. These requirements increase until as children progress through high school. The new regulations have fuelled debate amongst teachers about how equipped they are to teach different topics. It has also raised questions for those working with young offenders about how best to support the young people in their care and partner effectively with schools. This paper, based on research undertaken with UK schools, presents a microcosm of the existing state of drug education for young people and what teachers and young people think about it. It goes on to explore ways to strengthen the delivery of effective, evidence-based drug education and draws on young people's views of the strengths and weaknesses of what they currently receive. Examples of the challenges faced by teachers and instances of good practice are highlighted. Results are discussed in relation to the need for more cross-disciplinary research in this area in order to support those who engage with young people.

Sanela Talič, Matej Košir

LEARNING TO BE: PROMOTING SOCIAL AND EMOTIONAL LEARNING THROUGH RELATIONSHIP-CENTRED LEARNING ENVIRONMENT AND TEACHING METHODS [oral communication]

SPEAKER: Sanela Talič

ABSTRACT. The "Learning to Be" initiative is based on the premise that the assessment of learning in schools should go beyond grading student's knowledge and academic achievement and should include practices for observing young people's personal growth, social skills, attitudes and other general competences. According to recent research, and information provided by CASEL, social and emotional learning can be promoted at three different levels: (a) relationship-centred learning environment and teaching methods, (b) evidence-based SEL programmes and (c)

embedding SEL in the core curriculum. Focus of the project was on first level which represents good basis for implementation of prevention programmes and in a way is in line with Prosocial Classroom Model proposed by Jennings and Greenberg (Jennings and Greenberg, 2009). The proposed model highlights the importance of teachers' social and emotional competence and wellbeing in the development and maintenance of supportive teacher-student relationships, effective classroom management, and successful social and emotional learning program implementation. On one hand, national curricula frameworks all over Europe underline the importance of social and emotional skills in education. On the other hand, there has been a lack of awareness how to assess social and emotional skills properly and to integrate assessment strategies for these skills into the existing education practices. Therefore, a Toolkit of teaching strategies, learning standards and assessment instruments was developed and implemented in 10 schools in Slovenia. The effectiveness of this intervention will be evaluated. The purpose of the presentation is to analyse teachers' regular feedback about their experience in the implementation of SEL Toolkit during their regular classes in a six-month SEL implementation period and to present preliminary results of the project regarding pupil's and teacher's social emotional competences.

Conference reception

(Ghent City Hall, 18:30 – 19:30)

Conference social dinner

(RAY, 19:30)

FULL PROGRAMME – DAY 2

Conference registration

(*Het Pand*, 08:30 – 09:30)

Members' meeting

(*Refter*, 08:30 – 09:30)

Parallel sessions 3 (09:30 – 11:15)

3.1 - Redefining prevention (*Refter*)

Karin Streimann, Triin Sokk, Ain Peil, Barbara Haage, Laidi Surva, Nurmely Mitrahovits, Margo Kivila

INTERDISCIPLINARY AND CROSS-SECTORAL APPROACH TO PREVENTION: SMALL COUNTRY, SMALL CHALLENGES? [themed session]

SPEAKER: Karin Streimann

ABSTRACT. There are many ways to organize prevention in a single community. There are even more possibilities to systematize effective prevention system for the whole county. In Estonia, there are 11 ministries, 23 administrations and boards, 15 municipalities and 79 local governments, hundreds of civil society and private sector organizations. Most of them are somewhat involved in preventing one or several problems, such as unemployment, criminal behavior, dropping out of school, suicide, noncommunicable diseases, substance use, premature death etc. These consequences are often related and stem largely from the same conditions (Biglan et al, 2012). This session will present policy-level processes and evaluations that have taken place in Estonia within last years. The aim of these is to establish a well-functioning prevention system. First paper will describe the process which aims to

shift a focus from preventing individual problems to preventing full range of problems in a coordinated effort. Second paper will analyze the processes that have taken place in different agencies with the aim to redesign the roles and practices they have in prevention. Third paper will explore if using multiple evidence-based interventions has had an impact on the prevention system. Challenges and learned messages will be shared with participants. We also attempt to initiate active discussions during the session about moving towards effective prevention systems in regions or countries.

Ain Peil, Karin Streimann, Laidi Surva

REDESIGNING PREVENTION: FROM SILOS TO CO-CREATION [themed session]

SPEAKER: Ain Peil

ABSTRACT Introduction: Several studies have demonstrated that the prevention efforts in Estonia are not systemic (Veemaa et al, 2016; Streimann & Abel-Ollo, 2017). In the past 4 years, Ministry of the Interior has led a process of bringing together different stakeholders with the aim to move towards a shared concept of cross-sectoral and interdisciplinary approach to prevention. The concept is developed to guide decision- and policy makers and advocates for targeting related behavioral and health problems collectively. Methods: A general theory of network governance (Jones, Hesterly & Borgatti, 1997) is applied to illustrate the journey of co-creation of the concept. It helps to explain the mechanisms that have reinforced the collaborative network of stakeholders while also addressing challenges such as adaptation of the evidence-based prevention by different parties. Results: The problems that different parties try to address individually are often complex and closely interrelated to other issues, hence the inclusiveness of different partners in the process is essential for systemic change. The main goals of the concept are to set national standards for funding interventions; to increase

evidence-based planning and coordinated decision-making about adapting, implementing and evaluating interventions and policies; and to define roles of different agencies. Network governance focuses on collaboration, which often prolongs the process as balance between diverse interests and opinions is searched. Conclusions: This process has expanded the understanding of barriers that decision-makers, experts and practitioners have. The inclusive approach has started several institutional processes where each party is rethinking their role in prevention. While the concept is based on the publications of several international organizations like UNODC and EMCDDA, this work demonstrates that the application of theoretical models of prevention into policy often has several challenges. This presentation is part of the themed session "Interdisciplinary and cross-sectoral approach to prevention: small country, small challenges?"

Triin Sokk, Barbara Haage, Nurmely Mitrahovits, Margo Kivila, Karin Streimann

REDESIGNING PREVENTION: HOW TO CHANGE THE INSTITUTIONAL AND PROFESSIONAL PRACTICES? [themed session]

SPEAKER: Triin Sokk

ABSTRACT Introduction: Practitioners often rely on their intuition and experiences rather than on the evidence as they have vague understanding of their role in prevention, lack of skills and knowledge or there are no clear guidelines set by the employees or by the state. Design thinking has the potential to improve systems while encouraging end-users, policy designers, central departments, and line agencies to work in a collaborative and iterative manner (Mintrom & Luetjens, 2016). Method: This presentation explores the process of redesigning the roles and practices within three organizations in Estonia with the aim of raising the quality of prevention. Design thinking principles were used to reduce the gaps between goals of policies and experiences of practitioners. The institutions are Estonian

Social Insurance Board (coordinating child protection officers), Estonian Police and Border Guard and National Institute for Health Development (coordinating regional health promotion specialists). Results: Participants' perspectives were taken into account in the process of problem definition to gain richer view of the challenges each partner faces. Step-by-step approach with adequate support embedded actions into existing systems. Environmental scanning helped to fill knowledge gaps and understand the systems. Open-to-learning conversations guided the creation of new options and question the existing structures. Conclusions: There are several similarities in the processes even though they take place in different organizations and are on different phases. Human-centered design and adult education principles have been useful in guiding the process, working in iterative way and meeting the changing needs of target groups. Decision makers and practitioners overcame resistance to change by being in control of their learning. These processes have enabled to grow together as a collaborative system rather than separately functioning parties. This presentation is part of the themed session "Interdisciplinary and cross-sectoral approach to prevention: small country, small challenges?"

Karin Streimann

USING POWERFUL SOLUTIONS FOR PREVENTION – ARE WE DOING ENOUGH? [themed session]

SPEAKER: Karin Streimann

ABSTRACT Introduction: Using evidence-based interventions is widely supported in prevention, but what happens if the other components of the effective prevention system are not in place? Several evidence-based interventions have been adapted to Estonia since 2012 (e.g. Effekt, Incredible Years, KiVa, Good Behavior Game) with the aim to prevent different problems. Has it been enough to cause a change in prevention system? Methods: This paper introduces evaluation results from Estonia's Drug Prevention Policy White Paper (2014-2018), focusing on universal prevention system. The evaluation was qualitative and collected

information using different methods, such as document analysis of implemented activities, five focus groups and four semi-structured interviews with experts on the field. Results: While several evidence-based interventions are implemented in Estonia, ineffective or harmful approaches are also widely used. Most evidence-based interventions have a high demand but low capacity for implementation, resulting in disappointment and application of methods that have no evidence. Further, there is no cross-sectoral overview that would describe which interventions are needed or are already available for different age-groups, settings and levels of risk. There is also no information of the quality, coverage and availability, durability and effectiveness of several interventions. Additionally, the evaluation of interventions is not common, hence it is usually unknown if the funded strategies are actually “powerful” in Estonia. Conclusions: Strong structural foundations and a shift in paradigm are needed to establish effective prevention system in Estonia. While several policy-level documents highlight the importance of prevention, there is no unified understanding about the role different parties have in it. Cross-sectoral vision, clearly defined roles and shared funding mechanisms would help to build a system that is well-coordinated and makes cautious decisions on which interventions to use. This presentation is part of the themed session "Interdisciplinary and cross-sectoral approach to prevention: small country, small challenges?"

Krzysztof Wojcieszek

IS THE ABILITY OF IMPLEMENTATION THE KEY EVALUATION CRITERION? SHORT OR LONG PROPHYLACTIC IMPACTS ON THE UNIVERSAL LEVEL?
[oral poster]

SPEAKER: Krzysztof Wojcieszek

ABSTRACT. In current standards of universal preventive programs (eg UNODOC), it is postulated that the activities carried out at schools should have an optimal duration (not too short and not too long). Meanwhile, programs lasting more than ten hours, even

distributed over individual sessions, encounter difficulties in real implementation. Is this not a clue from practitioners to consider a certain change in the standard towards possible interactions? The author of the speech specializes in creating and examining shorter, several-hour programs. On the example of the published frequency of application of Polish recommended programs included in the national recommendation system (research of the National Bureau for Drug Prevention), it will show the current quantitative advantage of the use of short preventive formulas. In the author's opinion, shorter impacts do not give full effectiveness, but they compensate by the scale of possible applications in practice and by acting on the normative system of a given community. However, when working with higher-risk groups, the postulate of a longer and more intense job retains its value. A better understanding of the differences between universal and selective prevention is needed.

Stephen Kulis, Stephanie Ayers, Monica Tsethlikai

PARENTING IN 2 WORLDS: A CULTURALLY ADAPTED PARENTING PROGRAM THAT STRENGTHENS URBAN AMERICAN INDIAN FAMILIES THROUGH CULTURAL ENGAGEMENT
[oral poster]

Stephen Kulis, Stephanie Ayers, Monica Tsethlikai

SPEAKER: Stephen Kulis

ABSTRACT Background: Research into the sources of behavioral health and well-being of American Indians and Alaska Natives (AI) increasingly recognizes traditional cultural heritage as a potent factor. However, culturally appropriate, evidence-based prevention programs are seldom available to the growing majority of AIs who now live in US cities. *Parenting in 2 Worlds (P2W)*, a culturally grounded parenting intervention, was created to strengthen family functioning and reduce behavioral health risks in urban AI families from diverse tribal backgrounds. This presentation

reports on the AI cultural engagement of the *P2W* participants as an outcome of the intervention. Methods: Data come from 575 parents of AI children (ages 10-17) in a randomized controlled trial in three Arizona, USA cities. Parents were randomized to *P2W* or to an informational family health curriculum, *Healthy Families in 2 Worlds (HF2W)*. Both *P2W* and *HF2W* consisted of 10 workshops delivered weekly by AI community facilitators. Tests of the efficacy of *P2W* versus *HF2W* employed baseline adjusted regression models using FIML estimation, including random effects, and controlling dosage. Moderated treatment effects by pretest levels of cultural engagement were tested with mean centered interactions. Results: Compared to parents in *HF2W*, those in *P2W* reported significantly larger increases in AI ethnic identity, positive bicultural identification, and AI spirituality. These increases in cultural engagement were significantly larger for *P2W* participants who were relatively less culturally engaged at pretest. Conclusions: The promising evidence of the effects of *P2W* in improving the cultural engagement of urban AI parents, particularly those feeling relatively less connected to their heritage, suggests that it can help fill the widespread need for evidence-based and culturally grounded parenting interventions for the growing population of urban AI families. Culturally adapted parenting interventions like *P2W* can effectively build on indigenous cultural heritage to promote well-being of urban AI families.

Ayca Ulker Erdem, Mübeccel Gönen, Sophie Havighurts

THE PREVENTIVE ROLE OF AN EMOTION FOCUSED PARENTING PROGRAM: PARENTS' REFLECTIONS ON TUNING IN TO KIDS [oral poster]

SPEAKER: Ayca Ulker Erdem

ABSTRACT. Parents influence their children's emotional competence by modeling of emotional expression and assisting children to learn about the emotional responses. This link could be explained as the base of emotion socialization. Literature shows that parents who internalize an "emotion coaching" style of

parenting linked to more emotionally competent children. Tuning into Kids (TIK) is a six-session, evidence-based prevention program targets to support parents' emotion socialization throughout the emotion coaching practices. When emotion socialization studies conducted in Turkey are examined, it is concluded that, positive emotion socialization skills have limited usage and there is no prevention study to improve these skills. On the other hand, Turkish mothers were found to be likely to teach their children the right behavioral reaction after an emotional experience accordingly in a didactic way. This shows that Turkish mothers are likely to use emotion coaching behaviors suggested in the literature. Within this context, an effectiveness study was conducted to examine the program impact on Turkey sample and the present research aims to focus on parents' reflections about TIK in this process. Case study was used to examine the participants' experiences. Data was gathered from 25 parents who attended to the program via preschools. A semi-structured interview, focus group interviews and an open-ended questionnaire were implemented before and after the program to assess parents' expectations and gains. Additionally researcher's log which was recorded during the sessions was used as an additional data source. Findings showed that TIK has certain impacts on parenting and child emotional expressiveness. Parents found its practical and experiential base beneficial for reducing non-supportive emotion socialization practices. Participants highlighted the preventive role of program on children's emotional and behavioral problems. TIK has been found an effectual tool to empower family dynamics and to reduce behavior problems by supporting parents' and children's emotional competence.

Carmen Orte, Marga Vives, Maria Antònia Gomila, Belén Pascual, Joan Amer

FAMILY DRUG PREVENTIVE INTERVENTIONS: THE CASE STUDY OF THE UNIVERSAL FAMILY COMPETENCE PROGRAM 11-14 IN SPAIN [oral poster]

SPEAKER: Joan Amer

ABSTRACT. Introduction: Universal Family Competence Program (PCF-U, after their initials in Spanish) is an evidence-based family drug preventive intervention with duration of 6 sessions (5 sessions plus one intro and motivation session). Their objectives are reduction or prevention of substance use, promotion of family relationships, promotion of parenting skills, and increase of children personal and social skills. Method: Randomized experimental design with control group. Initial sample 275 families of which the 90.55% ended (control group= 110 families; of which the 86.36% ended). Instruments are the Questionnaire about Drug Attitudes, instrument used by the PNSD, the Behavior Attitudes Scale (BASC) (Reynolds and Kamphaus, 2004) (validated for the Spanish population) and the Karol Kumpfer's questionnaires used in the Strengthening Families Program. Pretest-posttest comparison results are presented; a 6-month follow-up is underway. Results: Parents present significant improvements in 9 of the 14 family scales considered, in family conflict (SE=0.224; p=0.032), positive parenting (SE=0.272; p=0.009), resilience (SE=0.516; p=0.000), family engagement (SE=0.266; p=0.008), child attention problems (SE=0.239; p=0.035), anxiety (SE=0.265; p=0.009); somatization (SE=0.265; p=0.007), problem internalization (SE=0.298; p=0.003). Regarding substance use attitudes, results in change of child attitudes are small and non-significant: readiness for consumption (t=0.332; p=0.740); wrong beliefs (t=0.401; p=0.689); protective beliefs (t=-1.193; p=0.234). Discussion: According to parents, change results in family skills of both parents and children are quite positive. When analyzing child attitudes towards substance use, changes contribute with some

added value, but they are minimal and non-significant. These may be due to the fact that initial attitudes, prior to intervention, were already quite correct and normalized. Cluster analysis will be implemented to know which groups are benefited the most of all these changes. Overall, results of this universal family evidence-based program are positive.

Isabel Prata, Carla Frazão, Luisa Pereira, Rui Silva

ENVIRONMENTAL PREVENTION IN SCHOOL CONTEXT: PROCESS AND OUTCOME EVALUATION OF THE "DEALING WITH ADDICTIVE BEHAVIOURS' PROJECT" [oral poster]

SPEAKER: Isabel Prata

ABSTRACT. We will present the process and outcome evaluation of an environmental prevention project, aimed to implement a policy and guidelines to deal with addictive behaviours, developed in 36 schools of Lisbon Region. The project was led by the Addictive Behaviours and Dependencies Intervention Division (DICAD) of Lisbon and Tagus Valley Region and promoted in partnership with the Health School Teams of primary care system and the schools involved. The project contemplated five stages: 1) Needs assessment - Perception of addictive behaviours, 2) Initial training, 3) Guidelines Manual adaptation by each school, 4) Guidelines Manual training and 5) Monitoring stage, with case discussion and Referral, when needed. The evaluation included quantitative and qualitative methodologies along the five stages of implementation, namely focus groups and questionnaires analysis. The evaluation period was between 2011 and 2017. In this period 36 schools were involved, 2196 school staff were trained. There was a high level of training satisfaction. 31 schools defined a reference group to lead the project inside the school and adapted the Guidelines Manual. 17 schools implemented other prevention components (mainly life skills programs). Suggestions for further development and improvement of the project focused on the need for more extended and regular training and in

the need for more human resources and more stable reference groups within schools. Also suggested to give more space to the prevention of substance-free addictions, which is becoming an issue in the school context.

Elina Renko, Anja Koski-Jännes, Pilvikki Absetz, Taru Lintunen, Nelli Hankonen

IMPROVING MOTIVATING STYLES TO PROMOTE PHYSICAL ACTIVITY: TEACHERS' EXPERIENCES IN USING MOTIVATIONAL INTERACTION [oral poster]

SPEAKER: Elina Renko

ABSTRACT. Objective: Worldwide, children and youth engage in insufficient levels of physical activity (PA) relative to recommendations. By using motivational interaction, health promotion practitioners could help prevent this problem and improve their target group's PA motivation and behaviour. However, research shows that many professionals struggle with changing their interaction styles, and we need more understanding of how to improve uptake of key motivational interaction skills. Physical education (PE) teachers could play a key role in improving students' motivation for PA also outside of schools. Therefore, we investigated pre-service PE teachers' experiences in learning and using motivational interaction skills in practice. Design: Nineteen participants were interviewed after a training course on motivational interaction based on self-determination theory and motivational interviewing. The transcripts were examined by narrative analysis. Results: Most participants viewed motivational interaction as beneficial for fostering students' motivation and engagement. Specific merits included reducing conflicts and developing good relationships. However, there were some concerns e.g. about how to allocate time and feedback equally, and how to use motivational interaction without losing control and authority. Two different narratives were found: Growth narrative, where participants described positive professional transformation through learning motivational interaction, and Challenge narrative where participants

expressed concern that some of its components might compromise PE teacher's expert status and undermine the teaching structure. Conclusion: This research sheds light on possible experiences and beliefs that may hinder uptake of motivational styles by PE teachers and other professionals. To successfully take up motivational interaction, professionals may have to re-evaluate both their role as professionals and their relationships with target group. We present suggestions to improve effectiveness and acceptability of interaction training for health promotion professionals.

Andrew Percy, Ashley Agus, Jon Cole, Paul Doherty, David Foxcroft, Seamus Harvey, Michael McKay, Lynn Murphy, Harry Sumnall

RECANTING RATE ANALYSIS: A NOVEL WAY TO ASSESS AND CONTROL FOR MEASUREMENT ERROR IN RCT SELF-REPORT OUTCOMES [oral poster]

SPEAKER: Andrew Percy

ABSTRACT. This poster will introduce readers to recanting rate analysis; a simple and highly effective way to assess and control for measurement error in self report outcomes (such as alcohol, drug use and offending behaviors) within randomized control trials and other longitudinal prevention studies. The poster will present a worked example from a large scale cRCT.

Ina Koning, Vincent van der Rijst, Leonie Boor

DEVELOPING A COMMUNITY INTERVENTION (LEF): EFFECTS OF CREATING PRE-INTERVENTION AWARENESS [oral poster]

SPEAKER: Ina Koning

ABSTRACT. In the development of community interventions, assessing needs among and inclusion of stakeholders prior to the implementation may already influence certain

outcomes of interest. In this study we discuss the effects of creating pre-intervention awareness of a Dutch community intervention LEF on the intermediate factors and alcohol use. LEF is an intervention inspired by the Iceland model aimed to postpone the onset of drinking among high school youth. In a quasi-experimental design, we will discuss the findings of the change in intermediate and outcome variables between two baseline waves (TV: May 2018 and T0: December 2018) before the intervention was implemented. In short, favorable effects were found on most intermediate outcomes, whereas no significant effects were found for alcohol use. We will place these results in light of the importance of creating public support in the process of intervention development and prior to implementation. In fact, this study demonstrated that this pre-intervention awareness may already contribute to intervention effectiveness.

3.2 - Early Career session 3 (Priorzaal)

Amanda van Loon, Hanneke Creemers, Michiel Westenberg, Jessica Asscher

THE EFFECTIVENESS OF SCHOOL-BASED INTERVENTION PROGRAMS TARGETING STRESS IN ADOLESCENTS: A MULTILEVEL META-ANALYSIS [EC oral communication]

SPEAKER: Amanda van Loon

ABSTRACT. Background: During adolescence, high levels of stress have been associated with negative academic performance and school dropout. Furthermore, increased stress sensitivity, a characteristic of this developmental period, may contribute to the increased risk of mental health problems, reduced well-being and later developmental dysfunctions. In order to prevent drops in academic performance and the development of mental health problems in adolescents, it is important to address heightened stress levels at an early stage. The school environment is particularly suitable for such early interventions.

This study aims to synthesize the results of (quasi-)experimental studies on the effectiveness of school-based intervention programs to reduce stress in adolescents and to investigate moderators of effectiveness. Method/design: Relevant publications were identified using the search engines CINAHL, PubMed, ERIC, PsychINFO and Cochrane and were included up until October 2018. Only (quasi-)experimental studies examining the effectiveness of school-based interventions in reducing adolescent stress were included. A three-level random effects meta-analytic model was employed to determine the overall effect on psychological stress (e.g. perceived stress, social stress and academic stress) and test the influence of study, sample and intervention characteristics. Results: The search resulted in the inclusion of 42 studies, yielding 67 effect sizes ($N = 11550$ individuals). Preliminary results indicate a small to medium overall effect on stress ($d = 0.429$, $SE = 0.125$, $p = .001$). Several study, sample and intervention characteristics moderated the effectiveness. Discussion: School-based intervention programs targeting stress in adolescents have the potential to reduce psychological stress. Further research is needed to identify which adolescents profit most from this approach as well as its working mechanisms.

Sabina Mandić, Neven Ricijaš, Dora Dodig Hundrić

THE EFFECTIVENESS OF THE “WHO REALLY WINS?” YOUTH GAMBLING PREVENTION PROGRAM – RESULTS WITH REGARD TO DIFFERENT TYPES OF HIGH-SCHOOL [EC oral communication]

SPEAKER: Sabina Mandić

ABSTRACT. “Who really wins?” is the first Croatian evidence-based youth gambling prevention program. It was piloted in 2 high schools in the City of Zagreb and its evaluation results indicated better knowledge about gambling and less gambling related cognitive distortions among training group compared to a control group of students (Huic et al., 2017). Given that prevalence research shows that

gambling is highly represented in vocational schools, especially among boys (Ricijas et al, 2016), there is a growing need to explore whether there are some *school-specific* trends when it comes to the effectiveness of the Program. Therefore, the aim of this presentation is to present a part of the results from the first wave of the national evaluation of this prevention program and to explore whether there are differences in short-term outcomes with regards to the type of high school. A total of N=631 students participated in the study (Mage=15,61), with the highest proportion of those from 4-year vocational schools (70,5%), followed by grammar schools (16,8%) and 3-year vocational schools (12,7%). In order to achieve the research objective, gambling knowledge, gambling activities, gambling-related cognitive distortions, social-emotional skills, and gambling-related problems were measured. Results indicate that the Program is effective in enhancing students' knowledge about gambling and reducing gambling-related cognitive distortions regardless of the high-school program. Additionally, the program proved to be efficient in reducing gambling participation with differences regarding the type of school. Moreover, there are no iatrogenic effects on behavior change. Results will be interpreted in the context of potential modifications for increasing the effectiveness of the Program, taking into account specific characteristics of different high-school programs. Special emphasis will be put on the implications for future research of the effectiveness of this Program, in particular on long-term outcomes evaluation.

Pablo Fernández-León, María del Carmen Torrejón-Guirado, Ana Ruíz-Iglesias, Hein De Vries, Joaquin Salvador Lima-Rodríguez, Marta Lima-Serrano

A WEB BASED COMPUTER TAILORING INTERVENTION BASED ON THE GAMIFICATION VS TEXTS FOR BINGE-DRINKING PREVENTION IN ADOLESCENT: PROTOCOL STUDY [EC oral communication]

SPEAKER: María del Carmen Torrejón-Guirado

ABSTRACT. Alcohol is the most consumed psychoactive substance among the young, whose habitual pattern is of an episodic and excessive character, mainly on weekends. The consumption of alcohol by binge is developed in the last month by more than one third of Spanish adolescents, constituting a public health problem, by the vulnerability of the minor to their harmful effects. The establishment of preventive policies is insufficient, and it is necessary to investigate scientifically validated strategies to prevent this risk behaviour, also incorporating the gender perspective. With this project, financed by the national Plan on drugs, it is intended to contribute to the prevention of alcohol consumption by binge in minors, through the development, implementation and evaluation of the effect of a web based computer tailoring intervention based on the gamification and having as theoretical framework the I-Change model. We start from the hypothesis that the use of gamification techniques can improve adherence to intervention and its cost-effectiveness. An experimental analytical study, longitudinal, multicentric, randomized by conglomerates, with a control group and two intervention groups, one of them, will receive an online intervention, ALERTA ALCOHOL, with personalized health advice, using texts, and the second, an improved version of the intervention, using gamification techniques. It will be followed the phases of design, implementation and assessment of cost-effectiveness (at 6 and 18 months). The sample

will be 3231 Andalusian students of 15-19 years enrolled in secondary schools. The pattern of alcohol consumption, attitudes, social influences, and self-efficacy will be assessed against consumption. Confidentiality will be ensured in accordance with General Data Protection Regulation (EU) 2016/679 ("GDPR"). Informed consent will be requested. If the cost-effectiveness of the ALCOHOL ALERT program is demonstrated, it can be disseminated to adolescents, becoming public health policy.

Silvia Caristia, Daiana Campani, Chiara Cannici, Sara Pisterzi, Giulia Giarda, Gianluca Aimaretti, Alberto Dal Molin, Fabrizio Faggiano

EXERCISE AND PREVENTION OF FALL IN ELDERLY: A SYSTEMATIC REVIEW AND METANALYSIS OF COCHRANE STUDIES [EC oral communication]

SPEAKER: Silvia Caristia

ABSTRACT. Background. Physical exercise might be effective prevention of falls and fractures, that is a threat for physical functionality in elderly. Despite recommendations about physical activity, it is still not clear which type of exercise could be effective for healthy ageing. Objectives. To assess what type of exercise is associated to fall risk reduction in healthy adults over-50ies, we reviewed randomized control trials (RCTs) on the effects of several exercise types. Methods. We conducted a systematic review (SR) and meta-analyses by searching RCTs included in systematic reviews published before of March 2017. From Cochrane SR, were included RCTs of exercise interventions vs any intervention type in healthy people (≥ 50 years). Outcomes examined were risk of falls, fractures and fear of falling. A random effect-based meta-analyses by intervention type (following PRO.FA.NE. taxonomy) was performed on dichotomous and continuous data. Sensibility analyses was conducted and publication bias was investigated with Egger's test and funnel plots. Results. 76 RCTs were selected from 3 Cochrane SRs. Overall 16,106 participants (75% F), mean age varied from 64 to 84 years. Almost all interventions are effective for fall rate

reduction, with a major effect for 3D interventions and mixed exercises. Number of fallers is reduced by 3D, strength/resistance, and multicomponent interventions. While mixed exercises reduce fracture number, fear of falling has a little improvement with exercises. Sensibility analyses with low risk of bias RCTs report less effects than previous meta-analysis. Metabias and funnel plots show publication bias for fall rate (balance/coordination exercises) and number of fallers (mixed exercises). Conclusion. Some types of exercises were associated with a reduction in the risk of falling, fractures and fear. The identification of such exercises will make easy the broader implementation of effective interventions at a country level. Future research should consider long-term implementation strategies and sustainability.

Andrea Ćosić, Ivana Borić

ELEMENTS THAT CAN ENCOURAGE CHILD PARTICIPATION IN SCHOOL [EC oral communication]

SPEAKER: Andrea Ćosić

ABSTRACT. School is one of the key psychosocial environment for promotion of well-being of children and one of the key areas for implementation of children's rights, especially their right to participation. Child participation in school can empower children for later active civic engagement, improve their social skills, influence academic success and strengthen relationships between children and teachers. Realization of the children's participatory rights in schools can have a positive influence on children as individuals and on schools as community. This paper presents part of the results of the research entitled Child Participation in Education System, conducted by the Office of the Ombudsman for Children of the Republic of Croatia. The aim of the research was to gain a better understanding of child participation in school, with regard to the forms and levels of participation and elements that can encourage children to participate. The study combined both qualitative and quantitative approaches. In qualitative part, used in the first exploratory phase of the project, a total of 70

students were included. Through quantitative approach, a total of 2720 students from elementary and secondary schools from all regions in Croatia were included. The results show that elements like good relationships between children and teachers and support from teachers and other students are the most important for broader participation of students. Active participation can be encouraged by making participation fun, more child-friendly and by relaxing the forms of learning outcomes and student's obligations. Furthermore, design and organization of the physical environment in school also can contribute to higher participation. Research findings suggest the importance of putting a stronger focus on empowering positive relationships between students and teachers and creating more flexible and comfortable school environment.

Maria Wojcieszek, Kinga Wojcieszek, Joanna Wojcieszek

EMOTIONAL LEARNING AS THE INTERDISCIPLINARY POSITIVE APPROACH WITHIN UNIVERSAL PREVENTION [EC oral communication]

SPEAKER: Maria Wojcieszek

ABSTRACT. As a positive approach may be understood any strategy that enhances natural resilience of children and strengthens their personal or environmental resources instead of focusing on risk factors and danger, which is also crucial, but not the only one. Within positive approach socio-emotional learning may be assessed as an important trial of supporting child's development. Taking it into consideration, example of a project aiming at emotional learning of children 10-12 year-old will be described. The project was realized in Warsaw from 2017 to 2019 in a non-governmental organization and consisted of four independent parts: children could take part in one of them or more. Parents were sponsoring the project themselves. As a result over 2500 participants were noticed. The main goal of the initiative included providing children basic knowledge concerning emotions as well as giving them chance to talk about and evaluate the strategies of effective emotion regulation in

emotionally safe atmosphere and using engaging activities matched to their age. The project consisted of brief workshops, carefully designed to keep attention of children all the time. Scenarios were prepared specially for this project.

3.3 - Health promotion and prevention of risky behaviours (Dormitoriumzaal)

Simon Russell, Steven Hope, Jessica Packer, Helen Croker, Russell Viner

MODELLING THE IMPACT OF CALORIE-REDUCTION INTERVENTIONS ON CHILDHOOD OBESITY AND ACROSS INEQUALITIES [oral communication]

SPEAKER: Simon Russell

ABSTRACT. Globally, the prevalence of obesity has increased 10-fold among school-aged children in the last 40 years. Obesity is primarily caused by an energy-rich and low-nutrient diet which contributes to a positive net energy imbalance. Using data from Avon Longitudinal Study of Parents and Children (n=10,680), a range of policy-relevant calorie-reduction interventions were simulated, to measure the impact on obesity and inequalities. Predicted probabilities of obesity at age 11 using UK90 cut offs were estimated using marginal structural models adjusted for total calorie consumption, baseline and intermediate confounding. Socioeconomic inequalities using maternal social class were indicated and assessed using odds ratios for absolute and relative inequalities. Complete case and multiple imputation analyses were conducted to manage survey attrition and missing data. A series of probabilities were estimated by manipulating the mediator to simulate daily calorie-reduction interventions, including targeted and informed scenarios. Using imputed data and adjusting for inequalities and confounding, 18.3% of children were living with obesity at 11 years. Maternal social class at baseline and total daily calories at 7 years significantly predicted obesity at 11 years. A simulation to reduce intake down to recommended levels, a 6% reduction in daily

calories, universally applied but with random variation, reduced overall obesity prevalence by 0.8% with the greatest decrease observed among the lowest social group, meaning this intervention would reduce inequalities. Targeted interventions by income led to variations in reductions by social group. Indicated interventions for children with overweight or obesity or for children consuming excess daily calories, both at age 7, reduced obesity prevalence at age 11 by 0.9% and 1.5% respectively. A universal decrease in total daily calories to the recommended daily limit would reduce childhood obesity and inequalities. Informed interventions for children with overweight/obesity, or children consuming excess daily calories would lead to greater reductions in obesity prevalence.

Mathieu Gourlan, Florian Jeanleboeuf, Céline Lambert, Adrien Minotte, Bruno Pereira, Florence Cousson-Gélie

« THE GREAT LIVE AND MOVE CHALLENGE » AND THE PROMOTION OF PHYSICAL ACTIVITY IN CHILDREN: RESULTS FROM A CLUSTER-RANDOMIZED CONTROLLED TRIAL [oral communication]

SPEAKER: Mathieu Gourlan

ABSTRACT. Recent population-based surveys have reported that majorities of children in France and Europe are not complying with international physical activity (PA) guidelines. The Great Live and Move Challenge (GLMC) is a theory of planned behavior (TPB, Ajzen, 1991) based intervention designed to promote PA in French primary school children aged 7–11 years. The first aim of this study was to test the impact of the GCLM on TPB key constructs and the PA practice of children. The second aim was to evaluate the mediating role of TPB variables to explain the impact of the GLMC on the PA of children. A two-year cluster-randomized controlled trial was implemented comparing an intervention group to a control group, randomized into clusters of communes (Cousson-Gélie et al., 2019). A total of 1846 children (Mean age = 8.67; SD = 0.89) took part

in this study. The intervention was one month and a half long and included components targeting both TPB constructs and actual PA practice. Both in-the-field education (e.g., school teachers) and public politics stakeholders (e.g., town councils) implemented the GLMC. Each year, children answered a questionnaire measuring TPB constructs and weekly PA practice both at pre- and post-intervention. A subsample of 204 children wore an accelerometer (i.e., Actigraph GT3X+). Hierarchical random-effects models revealed that as compared to the control group, the intervention group reported a significantly greater increase over two years in PA practice and attitudes ($ps < .05$). The impact of the GLMC on PA was confirmed for the subsample of children who wore an accelerometer ($p < .05$). Path analyses revealed that the evolution attitudes and intentions partially mediated the impact of the GLMC on PA practice ($.09 \leq \beta_s \leq .19$ $ps < .001$). This study provides valuable information for schools and public health officers looking for innovative PA programs.

Mallie J Paschall, Joel W Grube, Ted R Miller, Christopher L Ringwalt, Deborah A Fisher

EVALUATION OF A MYSTERY SHOP INTERVENTION TO REDUCE SALES OF ALCOHOL TO MINORS IN ZACATECAS AND AGUASCALIENTES, MEXICO [oral communication]

SPEAKER: Joel W Grube

ABSTRACT. Introduction. One effective approach to reducing alcohol sales to minors is to use young mystery shoppers who attempt to purchase alcohol and then provide performance feedback to store operators and clerks. Few studies, however, have investigated mystery shop interventions in low- and middle-income countries where enforcement of underage sales laws is often lax. We report the results of a quasi-experimental study of a mystery shop intervention in Zacatecas and Aguascalientes in north central Mexico. Methods. The intervention comprised mystery shops where underage youth attempted to purchase beer at

50 Modelorama stores owned by Grupo Modelo and 32 Oxxo stores owned by Fomento Económico Mexicano (intervention groups) in Zaccatecas and at 19 traditional convenience stores (comparison group) in Aguascalientes. The mystery shops took place in March, July, and August of 2018. After each mystery shop, operators of intervention stores were informed if a sale was made. In addition, operators of Modeloramas were told that repeated sales could jeopardize their franchise. They received a yellow warning card after both the first and second successful sale; a third successful sale resulted in loss of the franchise. Results. The overall sales rates were 63.8% at Modeloramas, 86.5% at Oxxo stores, and 98.2% at comparison stores. Multi-level logistic regressions showed the odds of selling alcohol to minors were lower at Modeloramas than at comparison stores, OR = 0.03, 95% CI [.005, 0.25], $p \leq .001$, and Oxxo stores, OR = 0.26, 95% CI [0.10, 0.68], $p \leq .006$. We also found lower odds for sales at Oxxo stores relative to comparison stores, OR = 0.13, 95% C.I. [.02, 1.01], $p \leq .051$. Conclusions. The findings suggest that mystery shop interventions may reduce sales to minors in contexts where enforcement is low, particularly where distributors can sanction operators of stores where repeated sales are made.

Martha Canfield, Valerie Chandler, John Foster

HOME DRINKING IN WOMEN OVER 30 YEARS OF AGE. FINDINGS FROM AN INTERNET SURVEY [oral communication]

SPEAKER: John Foster

ABSTRACT. There has been a significant shift away from drinking in pubs and bars towards greater alcohol consumption at home. Despite this it remains an area that to date has received minimal research attention. In particular very little is known about the concept in women 30 years or more. What little there is has concentrated on younger women and preloading (drinking before going out). This study investigates the predictors of hazardous drinking (HD) in this group. A web-based survey of $n=411$ women 30 years or more were

recruited from a university staff address book and web sites such as Mumsnet and Gransnet. Socio demographic and data concerning alcohol consumption as assessed by the AUDIT and purchasing patterns was collected. In addition, motivations for home drinking were surveyed using the Home Drinking Assessment Scale (HDAS). The cut-off for HD was an AUDIT score of 6 or more. Forty-six percent ($n=189$) of the sample reported HD. Factors identified with HD when adjusted for age and annual income were as follows; preloading, drinking accompanied by home entertainment, drinking-alone, drinking for more than 2-3 days per week at home, purchasing alcohol from an off-licence, purchasing alcohol as part of the weekly shop. The motivational variables that were associated with hazardous drinking at home were drinking to relax (positive) and not feeling comfortable drinking away from the home (negative).

Samuel Tomczyk, Stella Savelsberg, Henriette Markwart, Silke Schmidt

IMMERSION IS KEY: FOSTERING INJURY PREVENTION THROUGH VIRTUAL REALITY APPLICATIONS – A RANDOMIZED CONTROLLED TRIAL OF WARNING COMPLIANCE IN A VIRTUAL THUNDERSTORM [oral communication]

SPEAKER: Samuel Tomczyk

ABSTRACT. Background. Natural hazards challenge societal resilience in disaster response and mitigation. To prevent harm, warnings are issued to inform the public and foster adequate behavior, however, actual warning compliance - - and thus its preventive effect -- are hard to examine due to the complex and unpredictable nature of such disastrous events. Therefore, we inspected warning compliance in a virtual thunderstorm in a randomized controlled comparing two virtual reality (VR) devices (desktop monitor and head-mounted display (HMD)). Method. 64 German adults (22.33 years, $SD=3.56$; 28% male) explored a virtual city via a desktop ($n=32$) or HMD ($n=32$), where they randomly either received ($n=34$) or did not receive ($n=30$) an app-based storm warning, before experiencing a thunderstorm. As a

behavioral response, participants could seek shelter from the storm, for instance, in an underground station. As outcomes, we measured the distance participants walked to a shelter in VR and captured risk perception via self-reports. Covariates comprised sociodemographic data, simulator sickness and sense of presence in VR. ANCOVAs compared risk perception and behavioral responses between VR devices and experimental conditions (warning/no warning). Results. Using a HMD, 66% perceived the virtual thunderstorm as an emergency compared to 0% using a desktop monitor. A significant interaction between experimental condition and device ($F(1,53)=4.18, p<.05, \eta_p^2=.073$) revealed that receiving a warning lead to a shorter route to safety in HMD users. Similarly, albeit nonsignificant, perceived threat was also higher in this group ($F(1,53)=3.35, p=.072, \eta_p^2=.057$). Conclusion. Our results underline the potential of VR for injury prevention and civil protection. It seems that VR is able to evoke substantial psychological reactions and set reliable cues to action. However, further research is necessary to investigate its potential in different groups, for instance, across age groups, cultures, and ethnicities, and to inspect the transfer of virtual reality learning into real-world conditions.

Viktor Burlaka, Oleksii Serdiuk, Iuliia Churakova, Dmytro Shvets, Volodymyr Proskura, Jun Sung Hong

CHILD MALTREATMENT AND ADULTHOOD SUBSTANCE USE: EVIDENCE FROM UKRAINE [oral communication]

SPEAKER: Viktor Burlaka, Oleksii Serdiuk, Iuliia Churakova, Volodymyr Proskura

ABSTRACT. Prevention of child maltreatment is a global effort aiming to reduce the short-term and long-term child suffering and mental health outcomes. The present study aims to explore the pathways from parents' use of corporal punishment and childhood adverse experiences to depression and substance use in adulthood among a sample of 829 students ($M_{age}= 18.97$, 66% females) from 27 Ukrainian regions

attending ten public universities. Childhood psychological, physical and sexual abuse experiences were measured using the Adverse Childhood Experiences Questionnaire (ACEs; Felitti et al., 1998). Childhood corporal punishment was examined using the Alabama Parenting Questionnaire (APQ; Frick, 1991). Adulthood depression was measured using a ten-item Center for Epidemiologic Studies Depression Scale Revised (CESD-R-10; Björngvinsson et al., 2013) questionnaire. Substance using behaviors were measured with the World Health Organization's Alcohol, Smoking and Substance Involvement Screening Test (ASSIST; Humeniuk et al., 2008). Our analytic approach was based on the structural equation modeling and the estimations were performed in Stata 14.2 statistical software package (StataCorp, 2015). Our results suggest that early life experiences of corporal punishment, insults and molestation were associated with higher depression and subsequent substance use. Findings of this research add to the growing evidence concerning the harmful consequences of child maltreatment among young adults in Ukraine.

Michal Miovsy, Amálie Pavlovská, Anna Vondrová

BUILDING A NATIONAL INSTITUTIONAL INFRASTRUCTURE IN PREVENTION IS FUNDAMENTAL REQUIREMENT FOR DEVELOPING WORKFORCE AND SUCCESSFUL UNIVERSITY STUDY PROGRAMS IN PREVENTION SCIENCE [oral communication]

SPEAKER: Michal Miovsy

ABSTRACT. Within last four decades we can observe emerging of very specific phenomenon – academic degree addiction specific study programs. The Charles University team has started a systematic mapping of these programs in 2014 and continually analyze and publish results. After European survey we presented also results from North America and have results from Africa under review. Other regions are under process. Just few academic programs are focus on prevention science or integrate

component with particular subjects on prevention and prevention science. From qualitative analysis and first preliminary results we found logical and expectable reason and explanation. There is no possible to find adequate and standard institutional national infrastructure in many countries what implicates missing (or almost missing) real working positions for workforce and missing fundamental support and network at the national level. The team has decided to develop couple of case studies representing this phenomenon and introducing first examples of good practice. Stability of labor market and availability of real working positions play critical role hand to hand with missing components like prevention specific national professional societies, research and academic institutions, libraries, professional journals etc. For further implementation process of UPC and EUPC is absolutely critical to open discussion about the national institutional infrastructure and process how to support and help in capacity building and promoting prevention in particular countries and to make prevention attractive area for employers and universities.

3.4 - Prevention and end user groups (Jan Gillis)

Johanna Gripenberg, Gregor Burkhardt, Rachele Donini, Peer van der Kreeft

PREVENTION AND END USER GROUPS

SPEAKER: Gregor Burkhardt, Rachele Donini, Peer van der Kreeft

ABSTRACT. The special session on prevention and end user groups treats burning questions we can expect from teachers, parents, youngsters, civil society delegates and press, when we deliver prevention science products to them as 'end users'. We will start with a short introduction on objective and possible discussion topics, presentation of the four panel members and then open up to questions from the audience. The focus is on explaining complex ideas in plain language, but encompasses open debate. Starting with:

- *Why do we say to choose for prevention but spend our budgets differently?*
- *Where are the environmental interventions based on automatic processes and nudging?*
- *Which facts and numbers advocate for prevention at community or school level?*
- *What can a young adult 18-21 year old contribute to prevention?*
- *What can industry of substances contribute?*

3.5 - Drug use (Oude Infirmierie)

David B Buller, W. Gill Woodall, Robert Saltz, Andrew Grayson, Sierra Svendsen, Mary Klein Buller

EFFECTS OF AN ONLINE RESPONSIBLE VENDOR TRAINING FOR RECREATIONAL CANNABIS STORES ON SALES TO PSEUDO-INTOXICATED CUSTOMERS: NEED FOR INCREASED DETERRENCE [oral communication]

SPEAKER: David B Buller

ABSTRACT. Background: The advent of recreational cannabis in Canada, Uruguay, and several U.S. states raises the risk of polysubstance-impaired driving. In alcohol markets, training in responsible sales practices is an intervention to reduce sales to intoxicated patrons and thus prevent impaired driving and other harms. Similar training may benefit communities with recreational cannabis sales. Methods: An online responsible marijuana vendor (RMV) training was developed with input from state regulators and store personnel. Among its five modules, learning elements taught store personnel to recognize signs of alcohol impairment and intoxication, refuse sales, and understand the risks of driving under the influence of cannabis. A sample of n=150 recreational cannabis stores in Colorado, Oregon, and Washington State, USA were enrolled in a randomized controlled trial, half of which were randomly assigned to use the RMV

training. Stores were posttested using a pseudo-intoxicated patron (PiP) protocol in which confederate buyers feigned obvious signs of intoxication. Results: Sales of cannabis to PiPs were refused at only 16 of 144 stores (11.0%; 4 stores in Oregon were closed) across the 3 states. There was no difference in refusal rates between intervention (13.3%; 10 of 75 stores) and control stores (8.4%; 6 of 71 stores; $\chi^2=0.89$, $p=0.345$) or between stores that used the RMV training (13.2%; 5 of 38 stores) or not (13.5%; 5 of 37; $p=0.964$). In 11 visits, store personnel commented on the buyers' behavior or expressed concern/suspicion about buyers but sold to them anyway. Conclusions: Training in responsible sales practices alone did not appear to reduce sales to intoxicated customers. Legal deterrence from making these sales may be insufficient or nonexistent for store management to support adherence to this responsible sales practice. Regulatory actions may be needed to increase perceived risk with such sales (i.e., swift, severe, and certain penalties) to achieve training's benefits.

William Crano

USING SELECTIVE INVALIDATION OF AMBIVALENT PRO-MARIJUANA ATTITUDE COMPONENTS TO PREVENT MARIJUANA USE [oral communication]

SPEAKER: William Crano

ABSTRACT. Introduction: Attitudes of drug-abstinent youth considering marijuana initiation can be highly ambivalent. Using Hovland's classic persuasion theory as a foundation for research, we performed research designed to invalidate pro-usage elements of youths' ambivalent marijuana attitudes (i.e., which Hovland termed "opinions"), while leaving anti-marijuana elements intact. This was theorized to create stronger, less ambivalent marijuana-resistant attitudes and lower usage intentions. At the same time, the research holds promise for elucidating the role of ambivalence in persuasive prevention. Method: From an initial pool of marijuana-abstinent middle-school students ($N = 538$), the quintile expressing the most negative attitudes toward a marijuana prevention appeal ($N = 101$) were randomly

assigned to one of three conditions designed to invalidate pro-marijuana opinions. We then tested their susceptibility to a second anti-marijuana appeal. Results: Personally threatening messages were found ineffective, but appeals contesting resistant responses significantly decreased ambivalence ($p < .01$). Mediation analyses showed that this decreased ambivalence was associated with less favorable attitudes and lower marijuana usage intentions (both $p < .001$). An attribution-based manipulation increased ambivalence ($p < .05$), and this outcome was associated with positive usage intentions, mediated through positive attitudes (both $p < .001$). Both outcomes can be explained in terms of Hovland's classic theory. Conclusion: Analyses elucidated the role of attitude ambivalence in prevention, providing a more complete understanding of potential facilitative use of ambivalence in prevention models based on prevention. Results support the further examination and use of methods that invalidate pro-marijuana opinions, thereby leading to greater susceptibility to subsequent prevention appeals.

Emma Davies, Michael Lynskey, Larissa Maier, Jason Ferris, Adam Winstock

PERCEPTIONS OF CANNABIS HEALTH INFORMATION LABELS IN A LARGE INTERNATIONAL SAMPLE OF PEOPLE WHO USE CANNABIS: WILL CANNABIS COMPANIES GROW TO BE DIFFERENT TO THE ALCOHOL AND TOBACCO INDUSTRIES? [oral communication]

SPEAKER: Emma Davies

ABSTRACT. Background: Cannabis industries are evolving rapidly, and regulated and highly commercialised markets have developed in several countries. To date, only Canada has incorporated mandatory health information for products. Such labels have proven to be part of an effective public health strategy to for tobacco, although opposition has delayed their universal presence on alcohol. Cannabis regulation should ensure honest, credible information is provided to consumers. To date, there is little research to understand the

potential impacts of cannabis health information on legal products. Methods: The Global Drug Survey (GDS) is a large anonymous cross-sectional web survey. In GDS2019, respondents who used cannabis in the last 12 months were presented with six labels and asked if they believed it, if it was new information, and if it would make them think about using less cannabis. Four were based on existing Canadian labels (dependence, driving stoned, harms of smoking, harms to developing brain); two were based on side effects reported by users in GDS2018 (lack of motivation, effects on memory). This study included 55,687 people from 27 countries (70% male; Mage 27.5). Results: Nearly 60% of people were supportive of health information being displayed on legal cannabis products. Levels of awareness of health harms was high. The message about cannabis dependence had the lowest level of believability (63.9%) and was the least likely to change behaviour (11.0%). The message with the highest level of believability was about harms to the developing brain (81.1%). Almost 50% indicated that the driving stoned message was the most likely to change behaviour, followed by motivation (30.8%) and effects on memory (30.6%). Discussion: Labels on cannabis products could be an effective way to educate people and potentially change their behaviour. More work will be needed to develop further meaningful and effective messages for cannabis products in the future.

Charlotte De Kock

PROMISING AND JUSTIFIABLE PRACTICES TO INCREASE ACCESSIBILITY FOR, REACH AND RETENTION OF MIGRANTS AND ETHNIC MINORITIES (MEM) IN EUROPEAN DRUG TREATMENT: A NARRATIVE REVIEW AND REFLECTION [oral communication]

SPEAKER: Charlotte De Kock

ABSTRACT. Background: Research demonstrates that some migrants and ethnic minorities (MEM), have limited access to European drug treatment and have low retention rates. Although studies document underrepresentation of some MEM in

treatment, in-depth understanding of treatment use and uptake is limited. Moreover, there is little evidence concerning promising practices to meet the needs of, and overcome disparities (access, reach, retention) among MEM. Methods: Based on a policy oriented research study, the aim of this paper is to identify the nature, target groups, pitfalls, conceptual and evaluation quality of European practices aimed at increasing accessibility, reach and retention of varying MEM in treatment. We identified promising practices by means of two complementary methods: 1) an online survey to over 30 key European treatment related networks and 2) a systematic analysis of the 2014 national drug reports. Results: The survey identified 36 practices and 26 practices were identified in the drug reports. Practices are mainly aimed at intra-European documented migrants and to a much lesser extent third country and undocumented migrants. The majority of practices is located in the harm reduction field and to a much lesser extent in prevention, early intervention and (inpatient) treatment. The large majority of practices is not based on evidence-based research but on the contrary to needs identified in services. Pitfalls are mainly related to language and funding. Conclusion: We conclude with a reflection on the variability of practices, how the identified practices can be enhanced and how they are related to state of the art promising practices literature. Lastly, we highlight concrete research and intervention needs for better understanding and acting upon MEM disparities in drug treatment in the European context

Joanne Dono, Carlene Wilson, Kerry Ettridge, Caroline Miller

“I’M NOT THE ANTI-SMOKER NOW. I JUST DON’T SMOKE ANYMORE”: SOCIAL OBSTACLES TO QUITTING SMOKING AMONG EMERGING ADULTS [oral communication]

SPEAKER: Joanne Dono

ABSTRACT. Background: Emerging adulthood presents unique challenges to smoking cessation that are not well understood. During

this phase, smoking identities can develop that become obstacles for quitting, particularly in social situations where smoking is accepted and expected. Using a social identity approach, this study explores how social relationships and normative group behaviours can be barriers to transitioning from a smoker to non-smoker identity. Method: Six focus groups of five participants (N=30) were conducted with participants aged 18-25 years (57% male). Participants' smoking status was ascertained to construct six groups, two each of daily smokers, occasional (non-daily) smokers, and ex-smokers. Results: Salient in-group identities invoked out-group comparisons that could create barriers to change including feeling conflicted about becoming a "non-smoker", and maintenance of pro-smoking group norms. Three subthemes were identified: 1) Managing the division between smoker and non-smoker groups; 2) The isolation associated with navigating others' expectations about quitting when attempting to quit; and 3) Encountering normative in-group smoking-related behaviours when attempting to quit. Conclusions: The transition from smoker to non-smoker, when understood from a social identity approach, is not straightforward. Identifying as a smoker can invoke negative judgements from non-smokers while, conversely, attempting to quit may lead to perceived rejection among smokers. Interventions where perceived social risk can be reduced by increasing the salience of a transitional "quitter" identity that helps to reduce the gap between "smoker" and "non-smoker" are warranted. A quantitative follow-up study is currently underway to test whether lack of exposure to non-smokers, high pro-smoking norms, low pro-quitting norms and high social fears will decrease the likelihood of having an 'attempting quitter' and/or 'former smoker' identity, which in turn will decrease self-efficacy for remaining abstinent in circumstances where the temptation to smoke is high.

Desiree Spronk, Lotte Voorham, Ferry Goossens

AM I ON THE RIGHT TRACK WITH THE DEVELOPMENT OF MY HARM REDUCTION INTERVENTION? THE DEVELOPMENT AND USE OF AN

EVALUATION INSTRUMENT [oral communication]

SPEAKER: Desiree Spronk

ABSTRACT. Harm reduction interventions for recreational drug users are widespread and commonly applied. Examples include websites with information about 'safe' use of drugs, information material in the form of leaflets and oral information at stands at festivals. For most of these interventions, we have no evidence regarding their effectiveness or potential negative consequences. Ideally, these are being evaluated in scientific effect studies. But the reality is that this is usually only done after implementation, leaving little room for adaptation and improvement of the intervention. Moreover, scientific effect studies are often not feasible because of practical, ethical and financial constraints. Nonetheless there is a need to critically assess if the development of the intervention is going in the right direction and if it is not going to cause any harm. In order to assist the developer with constructing the content, design and context of their intervention, a 'harm reduction intervention evaluation instrument' was developed. This instrument specifically aims to assist with estimating 1) the health consequences for the user, 2) any potential unwanted side-effects for the target and non-target group. The instrument consists of a set of main questions that can be assessed on the dimensions 'value' (to what extent does the intervention comply with the current question) and 'importance' (to what extent is this important). In this talk, I will present the instrument with its scientific background. I will furthermore provide results from its first application and discuss in which contexts the instrument can be applied.

Coffee break

(Het Pand, 11:15 – 11:45)

Sofa Plenary 2

(*Refter*, 11:15 – 13:00)

PREVENTION AND COMMUNICATION

Jonathan Deleener - VAD (Belgium)

Tournée Minérale is the most successful alcohol prevention campaign in Flanders in recent history. For three years in a row now, it has convinced almost 1 in 5 adults to not drink any alcohol in the month of February. Another alcohol campaign organised by VAD was 'Zwart op wit', in which a viral video showed a student party where free beer was offered, which turned out to be beer without alcohol. Both campaigns were a success, but both campaigns also showed how easily prevention messages can be misinterpreted. We will discuss the strengths and challenges of both campaigns.

With the participation of **Elizabeth Verhetsel** – Twisted Studio (Belgium), **Aaron Lyon** – University of Washington (United States) and **Gjalt-Jorn Peters** – Open University of the Netherlands (Netherlands)

Lunch break

(*Het Pand*, 13:00 – 14:00)

Poster session 2

(*Het Pand*, 13:00 – 14:00)

Poster 2.1

Krzysztof Wojcieszek

IS THE ABILITY OF IMPLEMENTATION THE KEY EVALUATION CRITERION? SHORT OR LONG PROPHYLACTIC IMPACTS ON THE UNIVERSAL LEVEL?
[oral poster]

ABSTRACT. In current standards of universal preventive programs (eg UNODOC), it is postulated that the activities carried out at schools should have an optimal duration (not too short and not too long). Meanwhile, programs lasting more than ten hours, even distributed over individual sessions, encounter difficulties in real implementation. Is this not a clue from practitioners to consider a certain change in the standard towards possible interactions? The author of the speech specializes in creating and examining shorter, several-hour programs. On the example of the published frequency of application of Polish recommended programs included in the national recommendation system (research of the National Bureau for Drug Prevention), it will show the current quantitative advantage of the use of short preventive formulas. In the author's opinion, shorter impacts do not give full effectiveness, but they compensate by the scale of possible applications in practice and by acting on the normative system of a given community. However, when working with higher-risk groups, the postulate of a longer and more intense job retains its value. A better understanding of the differences between universal and selective prevention is needed.

Poster 2.2

*Krzysztof Wojcieszek, Maria Wojcieszek,
Stanisław Maciaszek, Iwona Piekarz*

AN ATTEMPT TO THE SUMMATIVE EVALUATION OF THE “DEBATE” PREVENTION PROGRAM [poster]

ABSTRACT. The Preventive Program "Debate" is on the list of recommended Polish programs. It is designed to work on normative beliefs regarding the use of alcoholic beverages in the 12-14 age group. It is a program of short preventive intervention in the group, used at school, as part of universal prevention. The previous evaluation attempts were based either on one posttest after the classes or on the pretest-posttest scheme - without the control group. Their results were very promising, but the lack of a control group did not allow their full use. The cooperation of researchers and practitioners (Warsaw, Katowice) made it possible to undertake the first attempt to examine the impact of the program in terms of behavior change. The results confirm earlier optimism, but require methodological deepening in future planned research. Because the program is 4 or 5 in the scope of applications in Poland, research on its impact is of great practical importance and will be continued.

Poster 2.3

*Stephen Kulis, Stephanie Ayers, Monica
Tsethlikai*

PARENTING IN 2 WORLDS: A CULTURALLY ADAPTED PARENTING PROGRAM THAT STRENGTHENS URBAN AMERICAN INDIAN FAMILIES THROUGH CULTURAL ENGAGEMENT [oral poster]

ABSTRACT. Background: Research into the sources of behavioral health and well-being of American Indians and Alaska Natives (AI) increasingly recognizes traditional cultural heritage as a potent factor. However, culturally appropriate, evidence-based prevention

programs are seldom available to the growing majority of AIs who now live in US cities. *Parenting in 2 Worlds (P2W)*, a culturally grounded parenting intervention, was created to strengthen family functioning and reduce behavioral health risks in urban AI families from diverse tribal backgrounds. This presentation reports on the AI cultural engagement of the *P2W* participants as an outcome of the intervention. Methods: Data come from 575 parents of AI children (ages 10-17) in a randomized controlled trial in three Arizona, USA cities. Parents were randomized to *P2W* or to an informational family health curriculum, *Healthy Families in 2 Worlds (HF2W)*. Both *P2W* and *HF2W* consisted of 10 workshops delivered weekly by AI community facilitators. Tests of the efficacy of *P2W* versus *HF2W* employed baseline adjusted regression models using FIML estimation, including random effects, and controlling dosage. Moderated treatment effects by pretest levels of cultural engagement were tested with mean centered interactions. Results: Compared to parents in *HF2W*, those in *P2W* reported significantly larger increases in AI ethnic identity, positive bicultural identification, and AI spirituality. These increases in cultural engagement were significantly larger for *P2W* participants who were relatively less culturally engaged at pretest. Conclusions: The promising evidence of the effects of *P2W* in improving the cultural engagement of urban AI parents, particularly those feeling relatively less connected to their heritage, suggests that it can help fill the widespread need for evidence-based and culturally grounded parenting interventions for the growing population of urban AI families. Culturally adapted parenting interventions like *P2W* can effectively build on indigenous cultural heritage to promote well-being of urban AI families.

Poster 2.4

*Ayca Ulker Erdem, Mübeccel Gönen,
Sophie Havighurts*

THE PREVENTIVE ROLE OF AN EMOTION FOCUSED PARENTING PROGRAM: PARENTS’ REFLECTIONS ON TUNING IN TO KIDS [oral poster]

ABSTRACT. Parents influence their children's emotional competence by modeling of emotional expression and assisting children to learn about the emotional responses. This link could be explained as the base of emotion socialization. Literature shows that parents who internalize an "emotion coaching" style of parenting linked to more emotionally competent children. Tuning into Kids (TIK) is a six-session, evidence-based prevention program targets to support parents' emotion socialization throughout the emotion coaching practices. When emotion socialization studies conducted in Turkey are examined, it is concluded that, positive emotion socialization skills have limited usage and there is no prevention study to improve these skills. On the other hand, Turkish mothers were found to be likely to teach their children the right behavioral reaction after an emotional experience accordingly in a didactic way. This shows that Turkish mothers are likely to use emotion coaching behaviors suggested in the literature. Within this context, an effectiveness study was conducted to examine the program impact on Turkey sample and the present research aims to focus on parents' reflections about TIK in this process. Case study was used to examine the participants' experiences. Data was gathered from 25 parents who attended to the program via preschools. A semi-structured interview, focus group interviews and an open-ended questionnaire were implemented before and after the program to assess parents' expectations and gains. Additionally researcher's log which was recorded during the sessions was used as an additional data source. Findings showed that TIK has certain impacts on parenting and child emotional expressiveness. Parents found its practical and experiential base beneficial for reducing non-supportive emotion socialization practices. Participants highlighted the preventive role of program on children's emotional and behavioral problems. TIK has been found an effectual tool to empower family dynamics and to reduce behavior problems by supporting parents' and children's emotional competence.

Poster 2.5

Carmen Orte, Marga Vives, Maria Antònia Gomila, Belén Pascual, Joan Amer

FAMILY DRUG PREVENTIVE INTERVENTIONS: THE CASE STUDY OF THE UNIVERSAL FAMILY COMPETENCE PROGRAM 11-14 IN SPAIN [oral poster]

ABSTRACT. Introduction: Universal Family Competence Program (PCF-U, after their initials in Spanish) is an evidence-based family drug preventive intervention with duration of 6 sessions (5 sessions plus one intro and motivation session). Their objectives are reduction or prevention of substance use, promotion of family relationships, promotion of parenting skills, and increase of children personal and social skills. Method: Randomized experimental design with control group. Initial sample 275 families of which the 90.55% ended (control group= 110 families; of which the 86.36% ended). Instruments are the Questionnaire about Drug Attitudes, instrument used by the PNSD, the Behavior Attitudes Scale (BASC) (Reynolds and Kamphaus, 2004) (validated for the Spanish population) and the Karol Kumpfer's questionnaires used in the Strengthening Families Program. Pretest-posttest comparison results are presented; a 6-month follow-up is underway. Results: Parents present significant improvements in 9 of the 14 family scales considered, in family conflict (SE=0.224; $p=0.032$), positive parenting (SE=0.272; $p=0.009$), resilience (SE=0.516; $p=0.000$), family engagement (SE=0.266; $p=0.008$), child attention problems (SE=0.239; $p=0.035$), anxiety (SE=0.265; $p=0.009$); somatization (SE=0.265; $p=0.007$), problem internalization (SE=0.298; $p=0.003$). Regarding substance use attitudes, results in change of child attitudes are small and non-significant: readiness for consumption ($t=0.332$; $p=0.740$); wrong beliefs ($t=0.401$; $p=0.689$); protective beliefs ($t=-1.193$; $p=0.234$). Discussion: According to parents, change results in family skills of both parents and children are quite positive. When analyzing child attitudes towards substance use, changes contribute with some

added value, but they are minimal and non-significant. These may be due to the fact that initial attitudes, prior to intervention, were already quite correct and normalized. Cluster analysis will be implemented to know which groups are benefited the most of all these changes. Overall, results of this universal family evidence-based program are positive.

Poster 2.6

Lluís Ballester, Joan Amer, Lydia Sánchez-Prieto, Lluç Nevot

THE ROLE OF POSITIVE MOTHERING IN FAMILY DRUG PREVENTION PROGRAMMES: MOTHER-FATHER RESULT DIFFERENCES IN THE FAMILY COMPETENCE PROGRAM [poster]

ABSTRACT. Introduction: Results in mothers and fathers are investigated after their participation in the Universal Family Competence Program (PCF-U 11-14). Method: Quasi-experimental design, pre-test/post-test measures and control group. It includes 55 parents (mean age = 44.56, SD = 4.30) and 145 mothers (mean age = 43.57, SD = 5.16), who complete the program, in the experimental group. The validated instrument of PCF-U 11-14 integrates items from the questionnaire for family scales of Kumpfer (1998) and the BASC questionnaire. Results: T test analysis between the situation at the beginning of the mothers and the fathers indicates that there are only significant differences at the beginning in family supervision ($t = -3.239$; $p = 0.002$). When the t test is carried out between the situation at the beginning and at the end of the program by fathers, significant changes in resilience (family scale) ($t = -2.415$; $p = 0.017$) and depression (clinical scale, individual, perceived in relation to children) ($t = 2.104$, $p = 0.038$) and a trend change in anxiety (clinical, individual, perceived in relation to children) ($t = 1.934$, $p = 0.056$). Regarding mothers, the t test between start and end indicates significant differences in four family scales and a clinical scale: family conflict ($t = 2.037$, $p = 0.043$), positive parenting ($t = -2.236$, $p = 0.026$), resilience ($t = -4.185$, $p = 0.000$), family engagement ($t = 2.358$); $p = 0.019$)

and anxiety scale ($t = 1.982$, $p = 0.048$). Discussion: In fathers, changes occur in the family scale of resilience and in the clinical scales of depression and anxiety. In mothers, they present a greater number of significant changes in family scales (family conflict, positive parenthood, resilience and family involvement) and a change in the scale of anxiety. About mother-father differences, mothers change significantly in more family scales.

Poster 2.7

Isabel Prata, Carla Frazão, Luisa Pereira, Rui Silva

ENVIRONMENTAL PREVENTION IN SCHOOL CONTEXT: PROCESS AND OUTCOME EVALUATION OF THE "DEALING WITH ADDICTIVE BEHAVIOURS' PROJECT" [oral poster]

ABSTRACT. We will present the process and outcome evaluation of an environmental prevention project, aimed to implement a policy and guidelines to deal with addictive behaviours, developed in 36 schools of Lisbon Region. The project was led by the Addictive Behaviours and Dependencies Intervention Division (DICAD) of Lisbon and Tagus Valley Region and promoted in partnership with the Health School Teams of primary care system and the schools involved. The project contemplated five stages: 1) Needs assessment - Perception of addictive behaviours, 2) Initial training, 3) Guidelines Manual adaptation by each school, 4) Guidelines Manual training and 5) Monitoring stage, with case discussion and Referral, when needed. The evaluation included quantitative and qualitative methodologies along the five stages of implementation, namely focus groups and questionnaires analysis. The evaluation period was between 2011 and 2017. In this period 36 schools were involved, 2196 school staff were trained. There was a high level of training satisfaction. 31 schools defined a reference group to lead the project inside the school and adapted the Guidelines Manual. 17 schools implemented other prevention components (mainly life skills programs). Suggestions for further development and

improvement of the project focused on the need for more extended and regular training and in the need for more human resources and more stable reference groups within schools. Also suggested to give more space to the prevention of substance-free addictions, which is becoming an issue in the school context.

Poster 2.8

Elina Renko, Anja Koski-Jännes, Pilvikki Absetz, Taru Lintunen, Nelli Hankonen

IMPROVING MOTIVATING STYLES TO PROMOTE PHYSICAL ACTIVITY: TEACHERS' EXPERIENCES IN USING MOTIVATIONAL INTERACTION [oral poster]

ABSTRACT. Objective: Worldwide, children and youth engage in insufficient levels of physical activity (PA) relative to recommendations. By using motivational interaction, health promotion practitioners could help prevent this problem and improve their target group's PA motivation and behaviour. However, research shows that many professionals struggle with changing their interaction styles, and we need more understanding of how to improve uptake of key motivational interaction skills. Physical education (PE) teachers could play a key role in improving students' motivation for PA also outside of schools. Therefore, we investigated pre-service PE teachers' experiences in learning and using motivational interaction skills in practice. Design: Nineteen participants were interviewed after a training course on motivational interaction based on self-determination theory and motivational interviewing. The transcripts were examined by narrative analysis. Results: Most participants viewed motivational interaction as beneficial for fostering students' motivation and engagement. Specific merits included reducing conflicts and developing good relationships. However, there were some concerns e.g. about how to allocate time and feedback equally, and how to use motivational interaction without losing control and authority. Two different narratives were found: Growth narrative, where participants described positive professional transformation

through learning motivational interaction, and Challenge narrative where participants expressed concern that some of its components might compromise PE teacher's expert status and undermine the teaching structure. Conclusion: This research sheds light on possible experiences and beliefs that may hinder uptake of motivational styles by PE teachers and other professionals. To successfully take up motivational interaction, professionals may have to re-evaluate both their role as professionals and their relationships with target group. We present suggestions to improve effectiveness and acceptability of interaction training for health promotion professionals.

Poster 2.9

Andrew Percy, Ashley Agus, Jon Cole, Paul Doherty, David Foxcroft, Seamus Harvey, Michael McKay, Lynn Murphy, Harry Sumnall

RECOUNTING RATE ANALYSIS: A NOVEL WAY TO ASSESS AND CONTROL FOR MEASUREMENT ERROR IN RCT SELF-REPORT OUTCOMES [oral poster]

ABSTRACT. This poster will introduce readers to recounting rate analysis; a simple and highly effective way to assess and control for measurement error in self report outcomes (such as alcohol, drug use and offending behaviors) within randomized control trials and other longitudinal prevention studies. The poster will present a worked example from a large scale cRCT.

Poster 2.10

Ina Koning, Vincent van der Rijst, Leonie Boor

DEVELOPING A COMMUNITY INTERVENTION (LEF): EFFECTS OF CREATING PRE-INTERVENTION AWARENESS [oral poster]

ABSTRACT. In the development of community interventions, assessing needs among and

inclusion of stakeholders prior to the implementation may already influence certain outcomes of interest. In this study we discuss the effects of creating pre-intervention awareness of a Dutch community intervention LEF on the intermediate factors and alcohol use. LEF is an intervention inspired by the Iceland model aimed to postpone the onset of drinking among high school youth. In a quasi-experimental design, we will discuss the findings of the change in intermediate and outcome variables between two baseline waves (TV: May 2018 and T0: December 2018) before the intervention was implemented. In short, favourable effects were found on most intermediate outcomes, whereas no significant effects were found for alcohol use. We will place these results in light of the importance of creating public support in the process of intervention development and prior to implementation. In fact, this study demonstrated that this pre-intervention awareness may already contribute to intervention effectiveness.

Poster 2.11

Daniel Lloret, Yasmina Castaño, Catia Magalhães, Elena Gervilla, Montse Juan, Claudia Pischke, Florence Samkange-Zeeb

MEASURING PARENTS ASSOCIATIONS' EMPOWERMENT TO SUPPORT ENVIRONMENTAL ALCOHOL PREVENTION: AN ASSESSMENT TOOL [EC poster]

ABSTRACT. Environmental prevention comprises interventions that aim to limit the availability of maladaptive behaviour opportunities through policies and restrictions, such as laws, regulations, rules and taxation levels. Empowering parents to boost environmental prevention is a promising strategy that only a few programs use. The FERYA Program (Juan, Calafat, Duch & Guerrero, 2018) aims to empower parents to work together to bring about changes in their communities with regard to alcohol prevention and exercise more influence over other issues

that also matter to them. Due to the novelty of this approach, no specific assessment tools for this type of engagement are available. The objective of this work is to design and analyze the psychometric properties of a parental empowerment scale to engage in community actions. The design process comprised the establishment of four theoretical dimensions, the development of a bank of items, the selection of items through a panel of independent experts and the piloting of the scale in a small group of parents. Two scales, the "Individual and Community Self-efficacy" Scale and the "Community Intervention Self-Efficacy" Scale were subsequently validated in a sample of 125 parents. Results of psychometric analysis indicate that both scales have a good reliability (Cronbach's α .824 and .923) and validity. The scores of these scales are significantly correlated with validated tools that measure intention and self-efficacy to be involved in the community. Preliminary results point to a satisfactory confirmatory adjustment. We discuss the necessity to carry out environmental prevention through parents' empowerment interventions as well as the need for evaluation.

Poster 2.12

Sigrid Vorobjov

PATTERNS OF CANNABIS USE AMONG STUDENTS IN ESTONIA AND NEIGHBOURING COUNTRIES IN 2003–2015 [poster]

ABSTRACT. The study analyzed cannabis use trends and factors associated with cannabis use among 15 to 16-year-old students in Estonia, Latvia, Lithuania, Finland and Sweden in 2003 to 2015. **Methods:** The sample consisted of students who participated in the ESPAD study in 2003, 2007, 2011 and 2015 in Estonia, Latvia, Lithuania, Finland and Sweden. Prevalence of lifetime cannabis use was calculated with chi-square test for trend to evaluate the changes of cannabis use, perceived access to cannabis and perceived health risks due cannabis use. Logistic regression was used to assess associations between cannabis use and different factors. **Results:** In 2015 the prevalence of lifetime cannabis use ranged from 25% in Estonia to 7%

in Sweden. During 2003–2015 the prevalence of cannabis use increased significantly in Latvia and Lithuania, whereas in Finland and Sweden cannabis use remained low and stable. Estonia had the highest prevalence already in 2003, after that it has been stably high. In 2015 the prevalence of perceived easy access to cannabis ranged from 34% in Estonia to 16% in Finland. The prevalence increased in all countries, besides Finland. In 2015 the prevalence of students who reported that 1–2 times cannabis use is not associated with health risks ranged from 20% in Lithuania to 11% in Estonia. Perceived low health risk of cannabis use increased in all countries in 2003–2015. In all countries the higher odds for cannabis use were perceived easy access to cannabis, perceived no health risk associated with cannabis use, alcohol use and smoking. Parental rules and parents' knowledge of a child's whereabouts differed between the studied countries. Conclusions: It is crucial to explore the sources for easy cannabis access, to find various channels to reach adolescents and to explore relevant topics for adolescent's that would motivate to change their behaviour.

Poster 2.13

Helena Križan, Lucija Lamešić, Martina Ferić

EXAMINING FAMILY RISK AND RESILIENCE: A MEASURE OF STRESS AND ADAPTATION [EC poster]

ABSTRACT. Family resilience is a dynamic process that includes positive adaptation in the context of significant adversity. Although most authors agree that risk, protective mechanisms and a positive outcome are three components inherent to the process of family resilience, there is still no consensus on how to define and measure these components. Many questionnaires exist that measure the protective mechanisms yet there are very few questionnaires that measure both family risk and positive outcomes. The aim of this paper is to present a novel approach on measuring risk and positive outcomes in the context of family resilience. In this conceptualization of family resilience family risk is defined as a sum of

disruptive life changes that have an effect on the family. A positive family outcome is defined as a satisfactory adaptation to a disruptive family change. Methods: A new measure has been constructed based on the Social Readjustment Rating Scale (Holmes & Rahe, 1967). Family members reported events they have experienced in the past year, level of disturbance (disruptive effect) for the family and the level of their satisfaction with the family's adjustment to this event. Two separate forms of the questionnaire have been created: one for adults and one for adolescents. The questionnaire has been tested on a pilot study sample of 150 families from a high school in Ivanić Grad, Croatia. In every family a parent/guardian and a high school student have filled out this questionnaire. Data analysis is still in progress and obtained results will be discussed in the presentation. This study has been carried out as part of the project Specific characteristics of families at risk: contribution to complex interventions planning (FamResPlan) that is supported by the Croatian Science Foundation (project IP-2014-09-9515).

Poster 2.14

Isotta Mac Fadden, Cristina Villalba Quesada, David Alarcón, Flavio Marsiglia, Stephen Kulis

"MANTENTE REAL" PREVENTION PROGRAM IN SEVILLE (SPAIN) [EC poster]

ABSTRACT. Keepin't REAL is a program for the prevention of the use of substances and behavior at risk, based on scientific evidence, and designed and directed by Drs. Marsiglia and Kulis, at Arizona State University, at the Center for Interdisciplinary Research Southwest (SIRC).

The adaptation process of this Program in Seville (Spain) has been carried out through three phases: 2015-2017: A pilot study in 4 secondary schools (2 experimental/2 controlled), participating students (N = 274). (age : 14 years); 2017-2018: Adaptation to the leisure-cultural environmentt in two Secondary Education Centers,participating student (N = 60), (age 11 to 18 years); 2018-2019:

Experimental randomized study in 6 Secondary Education Centers (3 experimental/3 controlled), participating students (N = 503), (age: 11-12 years). The purpose of this poster is to describe the effectiveness of the process of adaptation of the Keepin' it REAL Program, carried out in Seville (Spain) in the 2017-2018. To this end, an analysis is carried out of the discourses of the focus groups of students and faculty, that were conducted in the Pilot study (2017), and in the experimental randomized study (2019). These analyzes highlight fundamental cultural elements in the prevention of behavior at risk, and consumption of alcohol and other substances, in adolescents in Seville. There have been in this study 4 special concerns: Present messages through situations and contexts of risk close to that of adolescents; Present messages through videos based on scripts made by the teens themselves; Take into account their perceptions of risks, their language, and prevention messages from their different perspectives; Use examples close to the actual lives of teens. The poster includes interpretations of these topics and their application to the design of prevention programs, especially studies of cultural adaptation to various contexts. Will be identified limitations of these results and future research.

Poster 2.15

Femke Dewulf, Peer van der Kreeft, Marjolein De Pau, Annemie Coone

MAPPING AND POSITIONING OF THE EUROPEAN UNIVERSAL PREVENTION CURRICULUM [EC poster]

ABSTRACT. The European Universal Prevention Curriculum is part of the UPC-Adapt project, funded by the European Commission and consisted of eleven partners from nine European countries. Their main goal was to provide an international European curriculum (EUPC) for standardized training in prevention, based on the Universal Prevention Curriculum (UPC), funded by the U.S. Department of State. To adapt the UPC to a European version, an adaptation process was followed. The adaptation process started by reading the UPC

Participants' Manual developed by Applied Prevention Science International (APSI). At national level, partners consulted experts in their network to gather opinions and suggestions. The main goal of this adaptation process was to create an adapted European Universal Prevention Curriculum and a preliminary categorization of possible adaptations. During this adaptation process a mapping exercise of existing prevention curricula in the EU was done. This mapping exercise was needed to list possible amendments or adaptations. The final goal of this analysis study was to map existing academic and non-academic courses to see how EUPC fills into the existing gaps and fits into the existing generic training system. For the mapping exercise of the UPC-adapt project relevant data was extracted from the Science for Prevention Academic Network database (SPAN, 2013). To map existing academic and non-academic prevention courses current data was collected from May until July 2017 by all project partners. The data collection was based on a survey focusing on language course, perspective on prevention science, course topics, research perspective and level of degree.

The findings were able to identify gaps or possible sources for adaptation of the UPC. This mapping exercise was an important barometer for adaptation, but it also provided valuable data for all partners to find existing (national) gaps and provide conditions to fit the EUPC into the existing training system.

Poster 2.16

Emina Mehanović, Serena Vadrucci, Alberto Sciutto, Gian Luca Cuomo, Fabrizio Faggiano, Federica Vigna-Taglianti, the EU-Dap Study Group

EFFECT OF THE SCHOOL-BASED PREVENTION PROGRAM "UNPLUGGED" ON TARGETED MEDIATORS [EC poster]

ABSTRACT. Background: "Unplugged" is a school-based drug prevention program designed and tested in the EU-Dap trial. The

effectiveness of the program in preventing tobacco, drunkenness episodes and cannabis use was shown in previous papers. According to the theoretical model of “Unplugged”, knowledge, risk perceptions, normative beliefs and skills are the targeted mediators of the program. The aim of the present study is to investigate the effect of the “Unplugged” program on its targeted mediators. Methods: The EU-Dap trial involved 170 schools and 7079 students of seven European countries. Schools were randomly assigned to control (usual curriculum) and intervention (Unplugged curriculum) groups. Pre-test data were collected before the program implementation, and post-test data were collected 3 months after the end of the program. The analytical sample for the present analysis included 6370 baseline to follow-up matched participants. The effect of the program on its targeted mediators at the post-test was studied through multilevel multiple logistic regression models. Results: Compared to control group, students in the intervention group showed a statistically significant higher improvement of problem-solving skills, refusal skills toward cigarettes and alcohol, and a reduction of positive attitudes toward drugs, and positive beliefs on cigarettes, alcohol and marijuana. Knowledge on cigarettes, alcohol and marijuana was significantly increased among pupils of intervention vs control group. Normative beliefs on perceptions of friends’ use of cigarettes, marijuana, and other drugs were reduced compared to the control group. The effect of the program on risk perceptions was statistically significant only for trying marijuana or hashish occasionally. Assertiveness, communication, relationships and decision making skills were apparently not modified by the program. Conclusions: Problem-solving and refusal skills, attitudes, beliefs, knowledge, risk perception on marijuana, and norms on friends’ use of cigarettes, marijuana and other drugs are empirically confirmed as targeted mediators of the “Unplugged” prevention program.

Poster 2.17

Concina Diego, Tommaso Testa, Marco Comba, Daniele Nicolini, Carlo Smirne, Fabrizio Faggiano, Massimiliano Panella

UPO SOGUD PREVENTION: OSTEOPOROSIS (SUMMARIES OF GUIDELINES UPON DISEASE PREVENTION) – PROTOCOL AND DESCRIPTIVE RESULTS [EC poster]

ABSTRACT. Background: Osteoporosis is a relevant cause of disability in the adult or elderly population. The “Identification of Best practices to promote Healthy Ageing and Guidelines” has been developed from the advices reported by WHO in the “World Report on Ageing and Health 2015”. Objectives: Retrieve Primary Prevention guidelines on osteoporosis and develop a method to summarize recommendations and Best Practices oriented by stakeholder (clinicians, policy makers and general population). Methods: We developed the UPO SoGuD Prevention which means University of Eastern Piedmont Summaries of Guidelines Upon Disease Prevention. The protocol steps were: disease specific avoidable and not avoidable risk factors mapping through UpToDate, inc; a systematic research of International and Society produced guidelines through 16 databases plus PubMed; double blind fulfillment of explicit inclusion criteria; application of a taxonomy for intervention, stakeholders and risk factors to categorize recommendations; recommendations grade alignment; assignment validation of the stakeholder category and definition of a priority rank by a pool of 10 expert (clinicians and public health professionals) using the Delphi method. Results: 31/103 guidelines fulfilled the inclusion criteria and 11 were included in qualitative analyses. 5 guidelines obtained an Agree II score >50% and were included in our sample (best Agree Score 75.00%). We retrieved 86/232 (37%) primary prevention recommendations. Clinicians, Policy Makers, General Population oriented best practices were 81/86 (94%), 24/86 (28%), 49/86 (57%), respectively. 55/86 (64%) recommendations were considered of high priority by the clinicians and public health panel

of experts. Discussion: This is to our knowledge the first attempt to systematically summarize best practices retrieved from the best guidelines found in scientific literature about osteoporosis. The results of this pilot study allowed us to develop a new method to formulate best practices that are stakeholders-oriented.

Poster 2.18

Marivi Mateo

COMMUNITY PROGRAM OF RESPONSIBLE SERVICE OF ALCOHOL IN NAVARRE 2013-2018 [poster]

ABSTRACT. Between 2013 and 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 general objective of this program is to involve the professionals of the hospitality industry in the prevention and reduction of problems associated with alcohol and other drugs. It has three phases: awareness, training and recognition of membership in the network of collaborating hospitality establishments in the Responsible Service. The Program targeted 63 Towns and in the awareness phase has reached 529 Licensed Premises. The training included 263 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, the promotion of social responsibility and best practices in the exercise of their professions and, What does the law say regarding the sale and service of alcohol service?. In the analyzed period 118 locales recognized as members in the Network of Collaborating hospitality establishments in the RS. The program needs to define instruments for evaluation and monitoring, especially in relation to belonging to the Network of Collaborating establishments of the program.

Poster 2.19

Carmela Martínez, Ana López-Durán, Ruben Rodríguez-Cano, Elena Fernández del Río, Carmen Senra, Elisardo Becoña

LONELINESS, DEPRESSIVE SYMPTOMATOLOGY, CIGARETTE DEPENDENCE AND SMOKING RELAPSE [poster]

ABSTRACT. Introduction: Smoking relapse is a relevant phenomenon since approximately three-fourth of smokers from the general population, and one-third of smokers receiving smoking cessation treatment relapse during the first months of achieving abstinence. Research has shown that depressive symptomatology and cigarette dependence are implicated in smoking relapse. Additionally, previous studies have found that loneliness, defined as the emotionally unpleasant experience of perceiving insufficient social relationships, constitutes a psychosocial risk factor for depression and for unhealthy behaviors such as smoking. The present study aims to examine the relation between loneliness, depression, and smoking relapse, exploring the role of cigarette dependence in this relationship. Method: The sample was composed of 129 seeking treatment adults ($M_{age} = 44.8$; 66.7% females) who received a psychological smoking cessation treatment, and achieved abstinence at the end of treatment. Smoking status was biochemically verified through carbon monoxide in expired air ($CO < 10$) at the end of treatment and at 3 months follow-up. Results: Our findings showed a significant positive correlation between loneliness, and depressive symptomatology ($r = 0.51, p \leq .001$), and cigarette dependence ($r = 0.17, p = \leq .05$). Moderated mediation analysis revealed a significant indirect effect of loneliness on smoking relapse during the first three months after treatment, via depressive symptoms, which was significantly moderated by cigarette dependence ($B = -0.065$; $SE = 0.075$, 95% BootCI [-0.184, -0.020]). Discussion: Prevention of health-related risk factors as smoking is a relevant question for public health. Results of the current study extend previous literature by showing that loneliness is a

significant predictor of depressive symptoms, and through this relation, it predicts early smoking relapse. Additionally, cigarette dependence was a significant moderator of this relation. These findings have several implications for tobacco consumption prevention efforts and also for smoking cessation treatments, as suggest that loneliness could be a relevant therapeutic target.

Poster 2.20

Sarah Ricupero, Marion Carayol, Mathieu Gourlan, Florence Cousson-Gélie

A SYSTEMATIC REVIEW OF THEORY-BASED INTERVENTIONS AIMED AT REDUCING BINGE DRINKING AMONG ADOLESCENTS [EC poster]

ABSTRACT. Purpose: In Europe, 35% of adolescents reported at least one binge drinking episode over the last 30 days. Characterized by the consumption of 5 or more drinks in one occasion, binge drinking is a major health issue. This systematic review examined the effects of theory-based interventions aimed at reduce binge drinking among adolescents. Methods: A search was conducted through pubmed, psycarticles and pscinfo databases, delineated 2000 to 2018. A total of 17 studies met the inclusion criteria and was included. Theory coding scheme (Michie & Prestwich) was used to asses a theoretical implementation score. Results: All the studies targeted mixed adolescents population from 11 to 17 years old. The interventions were carried out either in school (n=12) or in clinical setting (n=5). Seven theories were identified: the social cognitive theory, the social norms approach, the social learning theory, the health action process approach, the I-change model, the attitude self-efficacy model, the theory of planned behavior, the theory of reasoned action and the transtheoretical model. Interventions were based either on a single theory (n=11) or used a combination of theories (n=6). Among interventions based on a single theory, six reported a significant reduction in binge drinking but five others reported also no

significant reduction. The same pattern is found among the interventions based on combined theories: 3 studies reported a significant reduction and 3 others reported no significant reduction. These results should be interpreted with caution due to the low theoretical implementation score: even if 15 interventions were explicitly based on a theory only 5 of them actually use interventions techniques explicitly linked to theoretical constructs. Conclusion: Based on this review it can be concluded that theory-based interventions have contrasted effects in reducing binge drinking among adolescents and interventions were mostly theory-inspired but not explicitly based on a theory.

Poster 2.21

W. Gill Woodall, Brenda A Miller, David B Buller, Hilary F Byrnes, Beth Bourdeau, Joel W Grube, Veronica Rogers, Julia Berteletti

EFFECT OF TEEN ENGAGEMENT WITH A FAMILY-BASED ONLINE INTERVENTION ON REDUCTION IN ALCOHOL USE BY TEENS [poster]

ABSTRACT. Background: Smart Choices 4 Teens is a family-based, interactive online intervention that addressed teen alcohol use and risky behaviors in three online modules. The multi-disciplinary program included health promotion concepts from communication, alcohol/drug use, delinquency, and behavioral health disciplines. Four types of web-based components were: 1) Interactive activities (games and simulations) requiring users input to receive responses, 2) Video activities where users watched a multimedia video, 3) Info-gadget activities where users scrolled across content tabs to learn information, and 4) Discussion activities where users discussed issues offline. Methods: Adolescent (age 16-17) and parent dyads (n=411) were enrolled in a randomized controlled trial. Teens and parents completed an online baseline survey prior to randomization and then 6-, 12-, and 18-month follow-up online surveys. The Smart Choices 4 Teens website tracked duration of time spent

using each of the web-based components. In an analysis of teens who completed the program in the intervention group ($n=142$), linear regressions tested duration of teens' time in each online component in the entire program as predictors of teens' past 30-day alcohol use at the 6-month follow-up (dependent measure). Results: The teen sample was 55.3% female and 9.5% Hispanic White (72.5% non-Hispanic White). The parent sample was comprised predominately of mothers (84.7%). More time spent by teens using interactive activities negatively predicted later alcohol use ($\beta=-.243$, $t(1, 141)=-2.97$, $p=.003$) as did teens' time spent viewing videos ($\beta=-.220$, $t(1, 141)=-2.67$, $p=.008$). Also, teens' time spent using info-gadget activities had a negative relationship with alcohol use ($\beta=-.162$, $t(1,141)=-1.945$, $p=.054$). Conclusions: Activities with interactivity, animations, and video content may produce stronger preventive effects on alcohol use because teens prefer this format over written text in the info-gadgets, have more involvement with them, and/or find characters relatable. These reactions may stimulate deep processing of prevention content.

Poster 2.22

Giovanni Aresi, Elena Marta, Daniela Traficante

THE EFFECTIVENESS OF THE 'PROGRAMMA MENTORE', A SCHOOL-BASED MENTORING PROGRAMME IN ITALY: STUDY PROTOCOL FOR A QUASI-EXPERIMENTAL STUDY [EC poster]

ABSTRACT. Mentoring programmes work through role modelling mechanisms and the provision of emotional support and positive feedback to youth. Mentoring has been used in a variety of settings as an effective intervention strategy leading to positive child outcomes across behavioural, social, emotional, and academic domains, though there is a need to build its evidence base in countries other than the U.S.A. The Società Umanitaria's 'Programma Mentore' is a mentoring programme based in four cities in Italy. Trained adult volunteers (mentors) are matched with primary and

secondary school children (mentees) selected by teachers for being at risk of poor academic, behavioural, or health outcomes. Mentors and mentees meet weekly at school over a period of at least two academic years. During one-hour meetings, mentors provide motivational and socio-emotional support to their mentees. The aim of this study is to determine the effectiveness of the programme in terms of children's behavioural, emotional and school outcomes. A quasi-experimental, controlled study with 30 mentor-mentee matches and 30 control school children will be conducted. Control children from the same school will be selected using psychological and social assessment instruments and matched with those receiving the intervention. Control children will be offered services as usual. By using a questionnaire completed by children, mentors and teachers, effect evaluation data will be collected at baseline, after six months, after one year, and after two years. Key outcomes measured will be children's emotional well-being and self-esteem, social competence with peers and adults, problem behaviours, and school adjustment and performance. Moderators will include the quality and characteristics of the mentoring relationships, and elements external to the relationship (e.g., programmatic and school support). This study represents the first effectiveness evaluation study of a school-based mentoring programme in Italy. Results will further enhance the evidence for this intervention strategy.

Poster 2.23

Carmen Martín-Gómez, Patricia Moreno-Peral, Sonia Conejo-Cerón, Henar Campos, Emma Motrico

MODERATORS OF THE EFFECT OF PSYCHOLOGICAL AND PSYCHOEDUCATIONAL INTERVENTIONS TO PREVENT ANXIETY DISORDERS: A SYSTEMATIC REVIEW [EC poster]

ABSTRACT. Introduction. Anxiety disorders (AD) are the most prevalent mental health diseases and are related to a huge health care cost and a

vast burden of disease. Developing programs to prevent AD are generating a growing interest. Beyond to know the effectiveness of this kind of interventions, little is known about the identification of the patients that benefit the most from each type of intervention. The goal of this study is to perform a systematic review on moderators of the effect of psychological and psychoeducational interventions to prevent AD in all types of population. Method. A systematic review was conducted following PRISMA Statement. Selection criteria were 1) participants: all type of population without a diagnosis of anxiety, 2) interventions: psychological and psychoeducational, 3) comparators: active control, care-as-usual, no intervention, waiting list, or attention control, 4) outcome: moderators of the reduction of anxious symptoms or the incidence of anxiety. Information about the following variables were extracted: authors, year, country; population; setting; prevention type; inclusion criteria related to anxiety; sample size; conditions; provider; outcomes; follow-up; potential moderators; results of moderation analyses. A narrative description of the results of the included studies were carried out, as well as a separate description by type of moderators. The quality of the studies included was evaluated on the basis of the quality of the RCTs in general, and the quality of moderation analyses the quality of the studies. Preliminary results and conclusions. 3678 studies were screened. Finally, 9 moderators studies performed in 8 randomized controlled trials were included. This study found some empirical evidence about the identification of the subgroups that benefit the most from psychological or psychoeducational interventions for the prevention of anxiety. These findings can be useful to modify or refine the anxiety preventive interventions.

Poster 2.24

*Jeanne Gubbels, Claudia van der Put,
Mark Assink, Geert Jan Stams*

EFFECTIVE COMPONENTS OF PARENT TRAINING PROGRAMS IN PREVENTING CHILD ABUSE: A META-ANALYTIC REVIEW [EC poster]

ABSTRACT. Child maltreatment is a major problem that affects many children around the world. Programs aimed at preventing or reducing child maltreatment often target the parents and focus on improving child-rearing skills, parent practices, and on modifying parental attitudes towards harsh parenting. Previous review studies show small to moderate effects of these parent training programs aiming to prevent child abuse (e.g., Chen & Chan, 2015; Euser et al., 2005; Lundahl et al., 2006a). Why that is, remains to be explored. To better understand effectiveness of parent training programs, it is important to examine whether and how specific intervention components influence intervention effectiveness. Therefore, the present study aimed to meta-analytically examine what program components and techniques contribute to the effect parent training programs and what makes a difference in the prevention of child maltreatment. Our literature search yielded 51 studies, reporting on 185 effect sizes, examining the effects of parent training programs for preventing or reducing child abuse. We found an overall effect of $d = 0.42$, which was quite large compared to the results from previous review studies. Several program components significantly moderated the overall effect. However, all the these component had an adverse moderating effect. Smaller effect sizes were found for programs with a focus on improving personal skills of parents ($d = .373$ versus $d = .816$), improving parental problem solving ($d = .363$ versus $d = .512$) and stimulating prosocial behavior/discourage antisocial behavior of children ($d = .361$ versus $d = .527$). Significant smaller effects were also found for programs using practice and rehearsal as a delivery technique ($d = .327$ versus $d = .511$). These finding and their theoretical and practical implications are discussed.

Poster 2.25

Sergio Cordovilla-Guardia, Cristina Franco Antonio, Esperanza Santano-Mogena, Julián Fernando Claderón-García, Sergio Rico-Martín, Yolanda Castaño-Blanco

EFFECT OF A BRIEF MOTIVATIONAL INTERVENTION FOR THE PROMOTION OF BREASTFEEDING DURING THE FIRST SIX MONTHS [poster]

ABSTRACT. Background: In Spain only 20-30% women who start breastfeeding (BF) continue to exclusively breastfeed during the first six months of the newborn's life. The Brief Motivational Intervention (BMI) based on the Motivational Interview is a form of collaborative orientation aimed at strengthening the motivation to adopt healthy initiatives. The aim of the study was to analyze the efficacy of BMI applied to mothers in the first two hours after birth in the adherence to BF and exclusive BF in the first six months postpartum. Methodology: Randomized, controlled and multicenter clinical trial performed in women who gave birth by vaginal delivery and initiated BF in the 1st hour postpartum. Mothers were randomly assigned to an intervention group that received a BMI of approximately 20 minutes (n=44) or a control group that was offered a standard education session of BF with the same duration (n=44). Kaplan-Meier and log-rank survival curves were estimated and Hazard Ratio (HR) estimation was carried out by Cox Proportional-Hazards Regression. Results: The median (interquartile range) of the duration of the BF (exclusive and non-exclusive) was 26 weeks (18 - 26) in the intervention group compared to 16 weeks (4 - 26) in the control group [p=0.004]. The exclusive BF was maintained for 22 weeks (13.25 - 25) in the intervention group compared to 11 weeks (1-19) of the control group [p <0.001]. The cumulative survival curve of both BF and exclusive BF was higher in the intervention group (Long Rank = 0.006 and <0.001 respectively) with an HR-LM-: 0.40 (0.20 - 0.79) p = 0.008 and HR -Exclusive LM-: 0.39 (0.24 - 0.63) p <0.001. Conclusions: The BMI to

promote BF applied to mothers who decide to start breastfeeding in the immediate postpartum period increases the duration of BF and exclusive BF during the first six months postpartum.

Poster 2.26

Pia Kvillemo, Tobias Elgan, Anna K Strandberg, Johanna Gripenberg

IMPLEMENTING AND EVALUATING A BRIEF DIGITAL ALCOHOL AND DRUG PREVENTION INTERVENTION AMONG ADOLESCENTS AND YOUNG ADULTS [EC poster]

ABSTRACT. Introduction: The initiation of substance use often occurs in adolescence and frequently increases during the following years, posing a risk of severe adverse effects on psychological and physiological development and mental health among young people. In order to prevent problems related to substance use among adolescents and young adults, we will implement a digital psychoeducative alcohol and drug prevention program targeting 15-25 year olds. The program includes information about alcohol and drugs, normative feedback, ambivalence exploration, and information about different coping strategies. The program is based on the principals underpinning Motivational Interviewing. By assessing the effectiveness of the program, the current study will provide additional evidence regarding digital interventions aimed at reducing substance use among young people. Aim: The primary aim is to assess the effectiveness of a digital alcohol and drug prevention program targeting 15-25 year olds across a range of outcome measures. A secondary aim concerns potential predictors, mediators and moderators of potentially positive outcomes. Methods: A two-armed randomized controlled trial with an intervention group taking part in the digital prevention intervention and a control group that will be provided with health information connected to alcohol and drug use will be performed. Based on a power calculation to detect a small effect size, 800 participants will be recruited by offline marketing and through social media. Baseline

and follow-up data at three and six months after intervention will be collected and analyzed with a per protocol approach, as well as an intent-to-treat approach within and between groups. Measures are: AUDIT-C, Daily Drinking Questionnaire (DDQ), DUDIT, WHO-5 Well-Being Index, Peer pressure inventory, and questions about sexual risk behaviour. Results: Data collection will start in June 2019 and preliminary results on baseline and three-month follow-up data will be obtained during early autumn 2019. Conclusion: Conclusion will be discussed.

Poster 2.27

Claire Owen

INTRODUCING AND EVALUATING A BOOK-SHARING PROGRAMME [EC poster]

ABSTRACT. Introduction: Growing numbers of children are entering mainstream education deprived of the skills required to prosper in the school environment. Without additional support these children face poor long-term outcomes in terms of academic attainment, poor mental health, and social problems including unemployment. There is a strong evidence base for parenting programmes in a school format to improve child outcomes by fostering positive child/parent relationships and improving home/school links. This poster will introduce a feasibility study of a Book-sharing programme with parents of children aged 3-5 years. The Book-sharing Programme is a seven-week intervention delivered by school-based staff to teach parents core social learning theory principles. This is designed to strengthen relationships through book-sharing and increased praise and encouragement to promote language and social/emotional development. This study is the first evaluation of the programme in a school-based setting. Methods and analysis: Participants will be school-based teaching support staff who work with children aged between 3 and 5 years. They will be recruited from local schools. The exploratory outcomes are language and social/emotional development and parental self-efficacy as measured by a behavioural observation of the parent engaging the child in a

1:1 reading and play session, and parental self-report measures. Language outcomes will be collected from children using an interactive gaming format. Data will be collected at baseline and after the seven-week intervention. Participant evaluation of satisfaction will be collected at the end of the course using semi-structured interviews with both parents and programme facilitators. Ethics: Ethical approval was granted by Bangor University School of Psychology Ethics. Results: Results will be discussed in terms of recruitment, retention, acceptability and any preliminary impact on child behaviour, parental competence, social/emotional development, and expressive language development.

Poster 2.28

Joanne Dono, Kerry Ettridge, Melanie Wakefield, Simone Pettigrew, John Coveney, Gary Wittert, Sarah Durkin, Jane Martin, Caroline Miller

INTENTIONS TO REDUCE SUGARY DRINK CONSUMPTION: UNDERSTANDING THE BARRIERS TO CHANGE [EC poster]

ABSTRACT. Background: Sugary drinks contribute excess added sugars to the diet which can lead to obesity, a known risk factor for cancer. Australians are high consumers of sugary drinks so interventions to reduce population-level consumption would produce public health benefits. The Integrative Model of Behavioural Prediction provides a framework for exploring the relationship between intention to reduce sugary drink consumption and environmental, social and individual factors. Understanding these relationships contributes to the development of effective sugary drink interventions. Aim: To examine predictors of intentions to reduce sugary drink consumption using the Integrative Model of Behavioural Prediction. Methods: Australian adults aged 18 years and over were surveyed using Computer Assisted Telephone Interviews between February and April 2017. Random digit dialling of landline and mobile phones was used to obtain a nationally representative sample of

3430. A subsample of 1630 sugary drink consumers answered a subset of questions relating to attitudes, beliefs and behaviour change. Results: Preliminary results show that 56% of participants intended to reduce their sugary drink consumption in the next six months (50% planned on drinking less in the next month) whereas 31% of participants had no intention of drinking fewer sugary drinks. Intention to reduce sugary drink consumption was more likely among those who believed they currently consumed too much (versus not too much), those who believed that their current and future health was at risk from drinking sugary drinks (versus not holding these beliefs), and those who agreed that sugary drink consumption was normative (versus not normative; all $p < 0.001$). Conclusions: Intention to drink fewer sugary drinks was more likely among those who perceived themselves to be susceptible to health consequences of over-consumption than those who did not. Implications: Interventions aimed at de-normalising consumption practices and increasing knowledge about the health risks associated with sugary drink consumption are warranted.

Poster 2.29

David Foxcroft, Emma Davies, Sarah Howcutt, Fiona Matley, Louise Bunce

TESTING THE SOCIAL STATUS AND FAMILY SOCIALIZATION HYPOTHESES OF SUBSTANCE USE IN NORWEGIAN YOUNG PEOPLE: A CAUSAL MEDIATION ANALYSIS [poster]

ABSTRACT. Introduction: To examine how social status influences health, the current study tested the strength of a family socialization deficit hypothesis to explain adolescent drinking behaviour. This hypothesis proposes that family socialisation practices mediate the negative relation between family social status and youth drinking behaviour. Method: Traditional mediation analysis using a product or difference method is susceptible to bias because hidden assumptions of the method are typically not addressed. We used causal mediation analysis to explicitly assess assumptions, of (1) no

exposure-mediator (social status – socialization practices) interaction and (2) no unmeasured confounding of the mediator-outcome path (socialization practices – drinking behaviour) using sensitivity analysis for single mediators. Analyses were conducted on data reported in Pape et al., (2017). Participants were 17,761 Norwegian young people (13 to 18 years), 51% female and 49% male. Data were collected through a questionnaire completed by the young people. Family social status was operationalised as parental education and employment status (employed or receiving welfare). Drinking behaviour was operationalised as frequency of alcohol consumption and frequency of intoxication in the past year. Socialization practices were operationalised as general parenting measures, alcohol-related parental permissiveness, and parent drinking behaviour. Results: There was no consistent evidence of exposure-mediator interaction. Sensitivity analysis suggested that the risk of mediator-outcome confounding was relatively high, but only in the single mediator scenario. Using multiple mediators potentially includes mediator-outcome confounders but sensitivity analysis for complex multiple mediation analysis is not yet available. In the multiple mediator analysis, we found support for the family socialisation deficit hypothesis. Conclusion: Assuming no further unmeasured confounders of the socialisation-drinking behaviour relationship, this analysis supports the family socialisation deficit hypothesis to explain young persons' drinking. One potential implication of this finding is that effective family socialization interventions could help address the social patterning of alcohol misuse in young people.

Poster 2.30

Anne Bijlsma, Claudia van der Put, Mark Assink, Geertjan Overbeek, Geert Jan Stams

WHAT WORKS FOR WHOM IN PREVENTION OF CHILD MALTREATMENT: THE DEVELOPMENT OF A RESPONSIVITY INSTRUMENT [EC poster]

ABSTRACT. Child maltreatment is a worldwide public health problem, with serious consequences for the development of millions of children. Therefore, effective intervention programs for prevention of child maltreatment are needed. There is an increasing awareness that such interventions should be personalized to the risks, needs and other characteristics of individual children and their families for optimal clinical utility. Specific to forensic youth care aimed at preventing criminal recidivism, personalizing treatment is guided by the Risk-Need-Responsivity Model. This model describes how treatment can be tailored to individuals, based on three core principles. The Risk principle states that program intensity should be matched to an offender risk level; the Need principle states that offender needs should be targeted; and the Responsivity principle states that intervention style should be matched to individual characteristics.

Until now, the RNR principles have been applied to the clinical practice of child protection only to a limited extent. In recent years, the first validated instruments for risk and need assessment became available, but no instrument was yet available that supports child protection professionals in implementing the responsivity principle in their daily clinical practice. Therefore, the aim of this study was to develop a responsivity instrument for child protection, based on a comprehensive literature review of responsivity factors. Based on the results, a screening list of motivational-, personal-, and situational- factors related to the family system of children at risk was developed. Clinical utility was taken into account by testing the content validity of the instrument through

interviews with 14 child care professionals. All participants evaluated the Responsivity Instrument as a functional tool for mapping relevant responsivity factors that can affect treatment effect. Some suggested that the instrument may even be helpful to prevent blind spots during the decision making process of fitting treatment in many other health care services.

Poster 2.31

Chris Ringwalt

THE CONTRIBUTION OF BEER TO ALCOHOL CONSUMPTION, HEAVY DRINKING AND ALCOHOL-RELATED HARMS: FINDINGS FROM THE GLOBAL SMART DRINKING GOALS INITIATIVE [poster]

ABSTRACT. Aims. We examined the relative contribution of beer and other alcoholic beverage types to overall alcohol consumption and associations with heavy alcohol use and alcohol-related harms among adults. Design. Cross-sectional analyses of adult survey data. Setting. Two cities in each of five countries (Belgium, Brazil, China, South Africa, United States). Participants. Household-based samples of adults. Measurements. Past-30-day consumption of beer, wine, flavored drinks, spirits, homemade alcohol, and non-alcohol beer; past-30-day heavy drinking; incidence of 14 alcohol-related harms in the past 12 months; demographics. Analysis. For cities in each country, we computed the proportion of total alcohol consumption for each beverage type. Regression analyses were conducted to estimate the relative associations between consumption of each alcoholic beverage type, heavy alcohol use, and alcohol-related harms, controlling for demographic characteristics. The prevalence of non-alcoholic beer consumption was also examined. Findings. Beer accounted for at least half of total alcohol consumption in GSDG cities in Belgium, Brazil, the U.S. and South Africa, and 35% in China. Regression analyses indicated that beer consumption was associated with a significant increase in the likelihood of heavy drinking and alcohol-related harms in

GSDG cities in Belgium, Brazil, South Africa and the U.S. Significant increases in the risk of heavy drinking and alcohol-related harms were also consistently observed for spirits consumption. The prevalence of non-alcohol beer consumption ranged from 1.1% (U.S.) to 8.4% (Belgium) among all respondents, from 1% (U.S.) to 11.8% (S. Africa) among past-30-day drinkers, and from 1.5% (U.S.) to 5.5% (Belgium) among non-drinkers. Conclusions. Beer accounts for the greatest proportion of total alcohol consumption in most cities examined, and is associated with increased risks for heavy drinking and alcohol-related harms. Reducing beer consumption through evidence-based interventions and substitution of no- or low-alcohol beer can have a substantial impact on hazardous drinking and alcohol-related harms.

Poster 2.32

María Isabel Acuña-San Román, María del Carmen Torrejón-Guirado, Hein De Vries, Sanne Gerards, Marta Lima-Serrano

SHORT-TERM EFFECT OF A WEB-BASED COMPUTER TAILORING FAMILY INTERVENTION FOR BINGE-DRINKING REDUCTION IN ADOLESCENTS [EC poster]

ABSTRACT. Given the problems associated with binge drinking (BD, defined as the fact of consuming 5 or more drinks for men and 4 or more for women within a short space of time) in adolescence, a web-based computer tailoring family intervention was developed. This is a Web-based computer-tailored (CT) intervention which provides tailored advice to adolescents and their parents, based on the model for behavioral change I-Change and in the promotion of positive parenting styles. The objective of this paper is to show the short-term effects of this intervention on the reduction of BD in adolescents aged 15 to 19 years. A Randomized Controlled Clinical Trial (RCT) controlled by multicentric conglomerates was designed, developed from December 2018 to June 2019, with a sample of 2106 adolescents, divided into a control group (CG: n = 548) and

two intervention groups (IG-1: n = 745 and IG-2: n = 813), with initial evaluation and follow-up at 4 months, in students enrolled in high schools in Andalusian provinces (6 in the CG, 8 in the IG-1 and 7 in the IG-2). The outcome variable is the prevalence of BD in the last month and the independent variable is participation vs. family participation vs. non-participation. The effect of the intervention is evaluated by multivariate analysis of mixed generalized models, controlled by sociodemographic variables that show association with BD. We are currently in the implementation and monitoring data collection phase, so the effect of the intervention will be shown in the full paper. Programs evaluation of health promotion is necessary to ensure evidence-based interventions that could become effective tools to improve population health.

Parallel sessions 4 (14:00 – 15:30)

4.1 - Themed session: Good Behavior Game in Europe (Refster)

Magnus Johansson, Karin Streimann, Geertje Leflot

ADAPTING AND EVALUATING VERSIONS OF THE GOOD BEHAVIOR GAME IN EUROPE [themed session]

SPEAKER: Magnus Johansson, Karin Streimann, Geertje Leflot

ABSTRACT. The Good Behavior Game (GBG), a universal prevention program implemented primarily in elementary schools, has decades of research with positive short-term and long-term effects impacting a broad range of outcomes, such as reduced behavioral problems, preventing substance abuse and improving educational attainment (Kellam et al., 2011). Cultural adaptation has been shown to be an important step in transferring a prevention program between countries (Barrera, Berkel, & Castro, 2017; Sundell, Beelmann, Hasson, & Schwarz, 2016). This session will present three examples of adaptation and evaluation of different versions of the GBG in Belgium, Estonia and Sweden. Participants will learn about the process of cultural adaptation and its outcomes, as

well as the results of the different effectiveness trials conducted in each country. Challenges and strategies for implementation and dissemination will be discussed.

Magnus Johansson, Pia Enebrink, Ata Ghaderi

PAX GOOD BEHAVIOR GAME: CULTURAL ADAPTION AND PILOT TRIAL IN SWEDEN [themed session]

SPEAKER: Magnus Johansson

ABSTRACT. The Good Behavior Game (GBG) has its roots in the behavior analytic tradition (Barrish, Saunders & Wolf, 1969) and PAX GBG (e.g., Streimann et al., 2017) has evolved by increased inclusion of the students as well as adding several evidence-based kernels (Embry & Biglan, 2008) to create a set of tools for teachers to use in their everyday classroom activities within the regular school curriculum. Adapting PAX GBG, which was created in the USA, to accommodate the cultural differences in Swedish schools was an important undertaking before conducting a pilot trial. This presentation will detail the process of cultural adaption and its results, as well as briefly describe the application and co-dependence of several of the evidence-based kernels included in PAX GBG. Implementation strategy, adherence and future recommendations based on experiences from the pilot trial will also be discussed. The pilot trial was a within-subjects design, with 14 classrooms in grades 1-2. Outcomes were assessed before the intervention and after five months, using classroom level observations by independent observers, as well as teachers and parents filling out Strength and Difficulties Questionnaires for the participating students. Results showed large effects on both observations and teacher's SDQ-ratings. Uniquely, this trial also investigated teachers' perceived stress, indicating a very large decrease in stress levels.

Karin Streimann, Aire Trummal

PAX GOOD BEHAVIOR GAME IN ESTONIA: OVERVIEW OF THE LAST 5 YEARS [themed session]

SPEAKER: Karin Streimann

ABSTRACT. Introduction: The PAX Good Behavior Game (PAX GBG) is a behavior management strategy that has demonstrated positive effects on children's and teachers' wellbeing. The intervention was adapted to Estonia in 2014 and has been implemented over the years in 108 elementary schools by 254 teachers. While the underlying logic of the program was preserved during the adaptation, the training and support system have been developed for Estonian context. Teachers in the PAX GBG schools receive three days of training and are regularly supported by mentors over a one-year period. Methods: The effectiveness of PAX GBG was evaluated with a two-year, cluster-randomized controlled trial conducted in Estonian elementary schools during 2016-2018. External evaluation of the support systems and sustainability of the program was carried out in 2017. Results: Effectiveness study determined that the intervention had positive effects on children's mental health at the end of the 1st academic year, which lasted and strengthened during the 2nd academic year. The intervention was most useful for high-risk students during the 1st year. Program evaluation found that while the current support system is working well, several additional factors would support the sustainability of the methodology (e.g. yearly booster trainings, days for teachers to share experiences, development of school-based support systems, longer continuation of mentor support). Conclusions: Knowledge collected within previous years has provided valuable insights into the effects of the intervention and helped to improve the existing processes and systems. Both studies highlighted the need for long-term support and wider implementation within schools that are tied with quality, effects and sustained use of the intervention. While developing efficient support system it must be complex enough to consider needs of teachers and schools.

Geertje Leflot, Hilde Colpin

DEVELOPING AND EVALUATING THE FLEMISH VERSION OF THE GOOD BEHAVIOR GAME: SUCCESSES AND OBSTACLES [themed session]

SPEAKER: Geertje Leflot

ABSTRACT. The Good Behavior Game (GBG; Barrish, Saunders, & Wolf, 1969) is an evidence-based prevention program aimed at reducing disruptive behavior in primary school classrooms. Although the Dutch adaptation of the program Taakspel (van der Sar & Goudswaard, 2001) proved to be effective in Flanders in reducing and preventing the development of behavioral problems through improving teacher behavior management skills and peer relations (Leflot et al., 2010; 2013), further implementation and dissemination after the research phase was not achieved. We learned that the GBG had to be adapted to fit the Flemish school context and culture (Burkhart, 2013). This presentation will provide an overview of our successes and obstacles in developing the Flemish adaptation of the GBG, TOPspel (de Sleutel, Leflot, & Colpin, 2013). We will discuss the implementation problems we experienced when implementing the Dutch version of the GBG, our adaptations, and current implementation strategy. Also results on the quantity and quality of the implementation of TOPspel in a quasi-experimental effect study in ten Flemish schools, grades 1 through 6 will be presented, together with future recommendations.

Katarzyna Kocoń-Rychter, Katarzyna Okulicz-Kozaryn, Anna Kwatera, Megan Sambolt, Gail Chan

GOOD BEHAVIOR GAME – ALTERNATIVE METHOD FOR TRADITIONAL CLASS MANAGEMENT [themed session]

SPEAKER: Katarzyna Kocoń-Rychter

ABSTRACT. The Good Behavior Game (GBG) is the universal prevention program. Its effectiveness in diminishing risky behaviours has been confirmed in several studies. GBG targets children starting their school education with the objective to create positive school environment for all students and to improve their social functioning. In this article we would like to present: 1) GBG as a classroom behaviour management method implemented in several countries across years; 2) the project of GBG adaptation to Polish schools and: 3) experiences of Polish GBG coaches after the first year of program implementation. GBG is based on behavioural theories and the life course/social field theory. It centres on four key elements: class rules, team membership, positive reinforcement (praises, rewards, celebrations) and monitoring of children's behaviours and GBG data. In Poland the program is piloted in Warsaw and Kraków. In the article, evaluation data collected in individual interviews with GBG coaches are presented and discussed.

4.2 - Classical oral communications: Interdisciplinary prevention / Workforce for Drug Demand Reduction (Priorzaal)

Cristiano Piccinelli, Nereo Segnan, Alessandro Coppo, Fabrizio Faggiano, Carlo Senore

CHOOSING PRIORITIES FOR PREVENTION PLANS: THE PIEDMONT EXPERIENCE [oral communication]

SPEAKER: Cristiano Piccinelli

ABSTRACT. Introduction: Italian population is aging with a significant increase of non-communicable chronic diseases, then it seems a priority to reduce the incidence of such diseases, or at least to delay their onset. A "Prevention Lab" was set up in Piedmont in 2016, and was included among the governance actions of the regional prevention plan. In 2018 activities of the Lab are financed by Italian Health Ministry till 2020, involving four Italian regions for planning prevention activities until 2025. The main goals of the Lab are identifying priorities in prevention

based on the burden of disease, on the most relevant risk factors, the effectiveness of prevention interventions, and their cost-benefit ratio. Methods: Prevention Lab brings together multidisciplinary experts from different fields: politics, public health, economy, law, sociology. Activities are managed through regular meetings, and driven by an analysis of the diseases and their main attributable risk factors at national and regional level. Effective interventions were identified and then used to build some scenarios of intervention, with cost-benefit analysis. During the ongoing project a methodology for the selection of priorities will be developed together with a tool for analyzing the Return of Investment. Results: The lab involved professionals in multidisciplinary activities. Overall burden of disease in Italy, were 16,337,000 of DALYs in 2015 of which the 89.7% are attributable to non-communicable disease. Based on the risk factors that cause the most of this burden (hypertension, smoking, alcohol abuse, physical inactivity, and poor diet) about 30 effective interventions were identified and combined in different scenarios to estimate their impact (in terms of DALYs avoided) and costs. Conclusions: Prevention allows gaining years of healthy life, potentially reducing or postponing the onset of disease. The experience of Prevention Lab seems to be a valid tool to support programming in prevention.

Giuseppe Gorini, Sandra Bosi, Cristina Gozzi, Ffancesca Zironi, Marco Tamelli, Giovanni Forza, Mateo Ameglio, Eralda Licheri, Grazia Mercatili, Milena Franchella, Fabrizia Polo, Cristina Marchesi, Carlo DiClemente, Ermanno Rondini

**OPPORTUNISTIC MULTIPLE
BEHAVIOUR CHANGE BRIEF ADVICE
DELIVERED BY TRAINED HEALTH
PROFESSIONALS IN COMMUNITY-
BASED HEALTH SERVICES,
WORKPLACES, AND IN CANCER
SCREENING SETTINGS [oral
communication]**

SPEAKER: Giuseppe Gorini

ABSTRACT. Objective: Opportunistic multiple behaviour change brief advice may be effective, but few health professionals (HPs) are trained and routinely delivered it. Main aim was to develop and use an e-learning distance education course (e-course) to train HPs in brief advice on lifestyles (smoking, alcohol, diet, physical activity) in three settings: community-based healthcare delivery services; workplaces; cancer screening outpatient clinics. This project was funded by the Italian Health Ministry Health and developed in 9 Regions. Methods: An in-depth train-the-trainer e-course and a shorter e-course to train - with trainers' support - HPs working in each region in the three settings were developed. Then, a protocol for delivering brief advice in different settings and a monitoring system to track the delivery of brief advice were developed. Field work was conducted in 2017 during specific working days. Results: More than 600 HPs were trained: 56 completed the train-the-trainer e-course; 117 the shorter e-course for occupational physicians; 464 the shorter e-course for nurses. About 23% of patients (1,898/8,263) were asked: "Are you happy with your lifestyles?": 14% in the cancer screening setting (771/5,610); 53% (465/881) in the occupational physician setting, and 37% (662/1772) in the community-based health services setting. Among the 1,898 patients, 961 (51%) were interested in improving lifestyle: 216 received smoking cessation brief advice, 25 brief advice on alcohol consumption; 264 nutritional brief advice; 155 physical activity brief advice, 70 brief advice on multiple behaviours, 231 did not receive any advice for time constraints. Fagerstrom and Mondor questionnaires, and the Physical Activity and Health Eating Pyramids were useful to deliver brief advice. Conclusions: Many HPs were interested in lifestyles e-courses, because they did not received any training at University. Delivering brief advice on healthy eating and on physical exercise was a more complex and time-consuming task than delivering a smoking cessation advice.

Alessandro Coppo, Fabrizio Faggiano, Chiara Airoidi

**EMPOWERING HOSPITAL STUDY:
EFFECT ON HEALTH-RELATED
BEHAVIOURS** [oral communication]

SPEAKER: Alessandro Coppo

ABSTRACT. Background. Non-communicable diseases (NCDs) cause about 41 million deaths each year globally. Brief advice and counselling are considered evidence based practices to reduce smoking and risky alcohol use, while high-intensity counselling and behavioural intervention strategies were found to be effective to address unhealthy diet, physical activity and to produce moderate weight loss in obese patients. Hospitals are promising settings for preventing disease relapse and promoting healthy behaviours among patients, their families and health professionals. The Empowering Hospital (Emp-H) study was aimed at evaluating a multi-component intervention delivered in the hospital setting including: hospital environmental changes, a behavioural risk factors profiling procedure, professional-led counseling sessions, and availability of health promoting activities provided by the hospital organization and by surrounding community organizations. Methods. The study was designed as a two-arms effectiveness trial in which participants were randomised to the above mentioned intervention (group 1), and to a basic advice only intervention (group 2). Outcome under study were: smoking, alcohol consumption, sedentary behaviour, unhealthy diet. Results. Beneficial program effects were found both in group 1 and 2. For alcohol abuse and physical inactivity the improvement group 1 worked better than group 2. The cost of two years Emp-H project ranged from 34.062€ to 77.701€, while the cost for single counselling session has been estimated to be between 23.6€ and 32€. Conclusion. The experimental evaluation of the Emp-H model demonstrated how a sustainable intervention delivered in the hospital setting can be effective in modifying risky behaviours in different target populations.

*Ana Maria Bertão S. Neto, Isabel
Timóteo, Joana Ferreira*

**ESCAPE MIGRATION PROJECT: ASPECTS
OF HOSTING AND INCLUSION.
IDENTITIES AND PLACES** [oral
communication]

SPEAKER: Ana Maria Bertão S. Neto

ABSTRACT. The resettlement of refugees began in 2019. Individuals and families who left their countries of origin, fleeing from war, have been placed in countries that have made themselves available to receive them, though many of them serving only the most emerging needs. Some people left these countries with the desire to reunite their families or to find places where they felt more integrated and where it was easier to live. Now they are forced to return to the countries that gave them asylum, and from where they decided to leave. Given this scenario, a group of researchers and local stakeholders, in partnership with organizations responsible for the hosting process in Portugal, initiated a research project with the aim of supporting families and refugees in the process of integration and inclusion in communities of residence, at the levels of education, health, profession and social dynamics. In this communication we will reflect on the importance of networking, articulation with local resources, and multidisciplinary teams for an investigation and intervention that effectively enables a holistic comprehension of people's resources and needs, as well as their contexts, and that attends to their health and well-being. The boundaries of disciplinary knowledge can be broken, taking care of others, and of us, beyond the barriers of language and culture, without losing the singularities and identities of the subjects. This project follows the assumptions of participatory action research, in a preventive logic and acceptance of people's self-determination. The projects that are co-constructed with all participants and developed through a proximal relationship guarantee their usefulness for the promotion of health and well-being.

Joanna Travis-Roberts, Kimberly Johnson, Becky Vaughn

BUILDING A PROFESSIONAL WORKFORCE FOR DRUG DEMAND REDUCTION: PROVIDING AN INTERNATIONAL FOCAL POINT FOR ACCESS TO RESEARCH, TRAINING, INSTITUTIONAL ENGAGEMENT AND CREDENTIALING FOR FIELD BASED IMPACT [themed session]

SPEAKER: Joanna Travis-Roberts, Kimberly Johnson, Becky Vaughn

ABSTRACT. Drug demand reduction has become internationally acknowledged as the area of focus for addressing substance use disorders within a public health context. The growth of the science related to effective, high quality and ethical prevention and treatment support has revealed a need to build a trained workforce able to implement appropriate interventions. Given the multi-disciplinary nature of the drug demand reduction workforce, along with the different levels of needs to be addressed in a broad range of settings, it has become evident that there should be a focus on the establishment of a professional workforce. This workforce should be able to access relevant information, training and support to be in a position to undertake their work. The building of a professional workforce is an international need if there is to be an effective outcome of a reduction of numbers of people with substance use disorders. This session will address how an international substance use prevention and treatment workforce can become a reality. The International Society of Substance Use Professionals will share its contribution as a focal point for those active in substance use prevention and treatment. The International Consortium of Universities for Drug Demand Reduction will share the role and contribution being provided through universities. University provision is not appropriate to everyone involved in the field. There is also the need for training at the community/service development level that is supported by credentialing. The Global Centre for Credentialing and Certification

will discuss the need for an credentialing service that is unique to those who wish to develop their professional abilities in the field.

4.3 - Campfire 3 (Dormitoriumzaal)

Eefje Battel

IDENTIFYING CROSS-DISCIPLINARY OPPORTUNITIES TO INCREASE PHYSICAL ACTIVITY [campfire]

SPEAKER: Eefje Battel

ABSTRACT. The past 3 years, numerous innovative concepts, ideas and prototypes have been created at Howest InnMotion (the living lab for sports, movement and health) related to exergames, data & wearables and digital coaching. Within Howest InnMotion, the focus is on cross-disciplinary projects. Students and project staff with a broad range of knowledge in digital design, mobile gaming, industrial product design, new media or health sciences are collaborating intensively during 'innovation tracks'. The main objective of each of these innovation tracks is stimulating various target groups to move more frequently and in a more qualitative, healthy and low-threshold way, often while using technology. Moreover, the focus is on building bridges between companies and organizations, students, teachers and field partners as well as the end user in order to inspire them to develop useful applications that on the one hand are in function of applied future-oriented education and are useful in terms of prevention (to stimulate physical activity) and on the other hand can be valorized by field partners in order to increase their innovation potential.

During this talk a number of specific cases will be discussed, in which digital tools such as AR, VR, projection & detection systems and apps are being used to increase physical activity with different target groups.

Anthony Abi Zeid

YOUTH PEER MENTORSHIP - LEBANON

[campfire]

SPEAKER: Anthony Abi Zeid

ABSTRACT. Believing in the power of youth and being concerned about promoting healthy lifestyles, the primary focus of Mentor Arabia is Youth Empowerment and Risky Behaviors Prevention. Indeed, it was proven that the programs that have the greatest impact on young people are the ones that actively engage them in creating positive change in their lives. This is particularly important when working with older youth. Peer mentoring is a tool to help youth take the initiative to have a positive influence in their school, community and personal lives. Adhering to this believe, Mentor Arabia has launched its “Youth Peer Mentorship” program. YPM was able to bring participants from underprivileged and vulnerable backgrounds in Lebanon who were fully immersed in an interactive and holistic learning experience that was able to equip them with the right tools and Information for a better sustainable future. The observed results showed an uptick in the personal and professional growth among the participants, signaling strong momentum for Youth Peer Monitoring in Lebanon. The program provided the participants with orientation, resources, referrals, training and continuous guidance to develop their professional and personal skills. This was reflected in the fact that many participants expressed noticeable improvement in their self-esteem, positive attitude and communication skills. The program was also able to successfully implement a network of support and a sense of belonging among the participants. Moreover, Mentees expressed that the program helped them with their future career. Some participants even set on starting their own social impact project, and other decided to keep thriving for more knowledge and developing further understanding and awareness. Whether it was through empowering youth to avoid risky behaviors, embark in their future careers or improve their life skills, YPM program has proven to be a once in a life time changing experience for the participants.

Rosaria Galanti, Tharshini Thangavelu, Maria Nilsson

TRIANGULATE MORE: ADVANCING CAUSAL INFERENCE IN INTERVENTION EVALUATION RESEARCH [campfire]

SPEAKER: Rosaria Galanti

ABSTRACT. Introduction: Making statements on causality is the ultimate scope of any research involving a purported risk or protective factor and a health outcome. However, causal inference is in many instances hampered by complexity of exposures, e.g. composite pathways between exposure and outcome; or several exposure components, a common scenario in complex interventions in public health. The usual claim for a statement of robust evidence of causal effects (or of their absence) is multiple high-quality studies of the same intervention, i.e. replications (<https://www.preventionresearch.org/StandardsofEvidencebook.pdf>). An alternative approach has been proposed, known as “triangulation” (1, 2). This approach rests on combining the results of several study design or analytical methods within the same study, i.e. addressing the same research question but with different perspectives implying different and unrelated bias. Consistency of results (which is not the same as identical effects) will strongly support causal statements. Methods: A mixed-design/mixed method study has been initiated in Sweden, combining a pragmatic cluster-randomized experiment, an observational component and an in-depth interview component, in order to evaluate the effectiveness of a school-based tobacco-prevention program. Overall 48 schools and more than 4000 students are participating in the study. The study will be used to illustrate the theoretical basis of triangulation and the advantages of using this approach within the same research project. Results and Discussion: The PICO questions driving the evaluation, participation rates, intervention delivery and potential threat to validity in the multiple projected comparisons will be presented and discussed.

4.4 - Classical oral communications: Adolescent and youth prevention (Jan Gillis)

John Toumbourou, Joan Amer

A SYSTEMATIC REVIEW OF THE BENEFITS OF YOUTH INVOLVEMENT IN THE IMPLEMENTATION OF PROVEN PREVENTION SCIENCE PROGRAMS [oral communication]

SPEAKER: Joan Amer

ABSTRACT. INTRODUCTION: Beneficial action theory (Toumbourou, 2016) argues that a faster increase in human development can be achieved by encouraging youth involvement and volunteering in the implementation of proven prevention science programs. In order to facilitate this type of beneficial action, it is necessary to identify and evaluate the prevention science programs that encourage youth involvement and volunteering. **METHOD:** Systematic literature review methodology was used. Programs were searched within evidence-based online prevention science repositories (e.g., <https://blueprintsprograms.org>, www.aracy.org.au/the-nest-in-action/nest-what-works-for-kids). Inclusion criteria required a youth involvement component. The extraction from the included programs identified effects in reducing problem behaviour and improving positive youth development indicators. **RESULTS:** Included programs ranged across a variety of formats and settings (e.g., cross age tutoring; mentoring; peer interventions; Good Behaviour Game; Mental Health First Aid). Initial findings reveal the included programs had significant effects in both reducing problem behaviour and improving positive youth development indicators. **DISCUSSION:** This review highlights the feasibility of intentionally selecting effective prevention science programs to ensure they maximize youth involvement and volunteering in their implementation. Based on the review, it is recommended that community trials be conducted to evaluate whether system-wide impacts are larger where prevention science programs are deliberately selected to maximize youth involvement in their

implementation. Youth involvement in prevention science program implementation is likely to result in lower costs. Hence, future research should include comparative cost benefit analyses.

Siri Helland, Anneli Mellblom, Benedicte Kirkøyen, John Kjølbi

DEVELOPING A PREVENTIVE INTERVENTION FOR ADOLESCENT MENTAL HEALTH PROBLEMS – PART 1: IDENTIFYING TRANSDIAGNOSTIC EFFECTIVE COMMON ELEMENTS [themed session]

SPEAKER: Siri Helland

ABSTRACT. Background: Recent studies report an alarming increase of mental health problems among Norwegian adolescents, and early prevention is prioritized by the Norwegian government strategy for mental health. Yet, evidence-based interventions are not commonly used in frontline services. One limitation of existing programs is that they commonly target a single problem, while approximately 50% of children with one clinical diagnosis have comorbid problems. Interventions are also complex and consist of multiple elements, which makes it difficult to improve interventions, or build on previous trials. Knowledge is very scarce regarding which elements are essential and which elements could be removed without altering the intervention's effectiveness. The aim of this project is to develop a transdiagnostic intervention targeting a general vulnerability for developing mental health problems, more specifically difficulties with emotion regulation, based on common elements found to be effective in previous studies. **Methods:** We have conducted a systematic review of interventions targeting emotion regulation. We have developed a coding system to classify intervention elements in the identified studies including the identification of practice elements (what is done, e.g. psychoeducation), process elements (how it is done, e.g. role play) and implementation elements, and coded the studies in the review accordingly. Finally, a

conceptual model will be developed, based on the elements identified in the systematic review, which will form the basis for co-creating an intervention in a pilot study. Results: The systematic review identified 38 studies of interventions targeting emotion regulation. Findings from the systematic coding of practice-, process, and implementation elements as well as a conceptual model, will be presented. Conclusion: Developing a transdiagnostic preventive intervention for adolescent mental health based on effective elements will 1) target a vulnerability for developing diverse mental health problems, and 2) be a flexible instrument that may be used by services across disciplines.

Anneli Mellblom, Siri Helland, John Kjøbli

DEVELOPING A PREVENTIVE INTERVENTION FOR ADOLESCENT MENTAL HEALTH PROBLEMS – PART 2: CO-CREATION – SYSTEMATIC USER INVOLVEMENT AND USER PARTICIPATION [themed session]

SPEAKER: Anneli Mellblom

ABSTRACT. Background: Several programs have been developed to prevent mental health problems in adolescents. Evidence suggests that prevention programs reduce the risk of future disorder onset, but the programs have several limitations: 1)they target a single problem, while many adolescents experience a range of problems, 2)they are lengthy, costly, and time consuming to implement, which limits which municipalities that can offer these interventions, 3)they are often developed in different contexts. The aim of the study is to develop a preventive intervention for adolescent mental health, based on needs identified across services, in co-creation with adolescents and practitioners. Methods: Using a mixed methods design, quantitative methods will inform us about needs for service development, and qualitative methods will inform us about processes. We have distributed a survey to frontline services in Norway (N=700) included questions regarding the services, the practitioners, typical problems in the target groups, and the practitioners needs. In the co-

creation phase researchers, practitioners and adolescent will attend workshops to discuss the design of intervention. Results: Preliminary results show that adolescents who have been in contact with public health nurses in our sample (n=172), most often reported emotional problems (84 %), indicating a need for interventions targeting emotional problems. In our sample, 32 % of the public health nurses were trained in manual-based interventions and reported a need for training in manual based interventions and clinical tools (72 %), more cooperation across service levels (54 %), more time to meet the adolescents and their families (46 %), and more supervision (40 %). Results from the co-creation process will be presented. Conclusion: Evidence-based programs are not widely used, indicating an urgent need for increasing the use of evidence-based intervention in Norwegian frontline services. Practitioners express a need for increasing their competence and techniques in the prevention of adolescent mental health problems.

Flavio Marsiglia, Maria Elena Medina-Mora, Stephanie Ayers, Bertha Nuño-Gutiérrez, Maria Dolores Corona Lozano, Miguel Ángel Mendoza-Meléndez, Stephen Kulis

BINATIONAL COLLABORATION TO CULTURALLY ADAPT THE KEEPIN' IT REAL SUBSTANCE USE PREVENTION PROGRAM FOR ADOLESCENTS IN MEXICO [oral communication]

SPEAKER: Flavio Marsiglia

ABSTRACT. Background: Sharp increases in substance use rates among youth and the lack of evidence-based prevention interventions are a major concern globally. This is particularly important in societal contexts where the rise and spread of drug violence has become an urgent international concern that increases the vulnerability of youth to drug and alcohol use. A binational team of investigators are actively addressing this gap by culturally adapting *keepin' it REAL (kiR)* – an U.S. SAMHSA model program – for Mexico. The purpose of this

presentation is to describe how various forms of data about substance use patterns, risk factors for substance use, and the predictors of substance use among Mexican adolescents informed the cultural adaptation of *kiR*. Methods: Multiple forms of data informed this cultural adaptation - focus groups with students; focus groups with teachers; fidelity observations; teacher reflections on lessons; and external expert reviewers. To analyze the data, we used thematic analysis. To ensure the universality of the culturally adapted program, the analysis focused on exploring commonalities of risk (contexts of drug offers) and resilient (effective drug resistance strategies) experiences and beliefs among students and teachers. Results: From the data analysis, surface and deep structure cultural adaptations were made to *kiR*. Surface structure adaptations encompassed updating language, graphics, and videos. Deep structure adaptation components included cultural norms, attitudes, and beliefs about substance use among Mexican adolescents. Youth reported receiving alcohol offers from family members, links between substance use and violence, and that shifting gender norms result in more females initiating substance use offers. In adapted *kiR* activities, students practice navigating substance use offers in these contexts. Conclusion: This approach to cultural adaptation led to a true collaboration between investigators in two countries. This study advances knowledge about how to undertake cultural adaptations of efficacious U.S.-based prevention programs in international settings.

Stephen Kulis, Flavio Marsiglia, Maria Elena Medina-Mora, Bertha Nuño-Gutiérrez, Maria Dolores Corona Lozano, Miguel Ángel Mendoza-Meléndez

KEEPIN' IT REAL IN MEXICO: A RANDOMIZED CONTROLLED TRIAL OF A SUBSTANCE USE PREVENTION PROGRAM FOR MIDDLE SCHOOLS IN MEXICO'S LARGEST CITIES [oral communication]

SPEAKER: Stephen Kulis

ABSTRACT. Background: Despite sharp increases in substance use, Mexico has few school-based culturally grounded and evidence-based prevention programs. A bi-national research team addressed this gap by culturally adapting the *keepin' it REAL (kiR)* prevention intervention and testing it in an RCT in Mexico's largest cities. *KiR* is a middle school prevention program shown to be efficacious in the USA. This presentation describes short-term intervention effects on recent substance use, violence perpetration, and drug resistance skills. Methods: A stratified probability sample of 36 middle schools, 12 each in Mexico City, Guadalajara, and Monterrey, were randomized to three conditions: Culturally adapted *kiR (kiR-A)*, Original *kiR* translated into Spanish (*kiR-O*), and a treatment-as-usual Control condition. Students with parental consent completed pretest and posttest questionnaires during the 2017-2018 school year (n=5,524). Baseline adjusted regression models in Mplus tested the relative effectiveness of *kiR-A* versus *kiR-O* and Control. Results: Compared to *kiR-O* and Control, *kiR-A* students reported relatively more use of the *kiR* drug resistance strategies from pretest to post-test (Explain why you decline a drug offer, Leave the situation, Avoid drug offers). *KiR-A* students also reported using an expanding repertoire of different drug resistance skills and reported relative declines in perpetrating bullying and aggression, compared to *kiR-O* and Control. Significant desired effects for recent substance use were found among students more at risk (risk moderation). Among those with higher pretest levels of use, *kiR-A* students reported relatively less alcohol, tobacco, and hard drug use, less binge drinking and less alcohol intoxication than *kiR-O* students and/or controls. Conclusions: The culturally adapted version of *kiR* for Mexico showed desirable short-term effects in areas deliberately targeted in the cultural adaptation. It expanded students' use of effective drug resistance strategies, reduced reliance on bullying, and, among relatively heavier users, slowed increases in alcohol, tobacco, and hard drug use.

4.5 – PechaKucha (*Oude Infirmier*)

Leen Van Brussel

COMMUNICATING TOWARDS HEALTH IMPROVEMENT. DEVELOPING EVIDENCE-BASED PRACTICAL TOOLS AT THE INTERSECTION OF HEALTH PROMOTION, COMMUNICATION STUDIES AND BEHAVIOUR INSIGHTS [pechakucha]

SPEAKER: Leen Van Brussel

ABSTRACT. Communication is an important but sometimes still underestimated strategy to motivate people to adopt a healthy lifestyle. When aiming to develop evidence-based persuasive health messages, public health professionals face the challenge of navigating a rich and interdisciplinary yet often an either very generalistic or fragmented body of scientific literature. What is more, practical and evidence-based tools that gather insights and guidelines to support public health professionals when developing health messages are scarce. One example is the Health Communication Message Review Criteria, developed by the Centre for Health Promotion at University of Toronto. Generally, existing practical tools on communication as a strategy for behaviour change are marked by: 1, a tendency to draw almost exclusively on behaviour (change) models, and hardly incorporating other models and theories of communication, including those of intercultural communication; 2, Integrating too little reflections on how characteristics of the target group and its behaviour as well as health themes addressed in the message influence the choice for particular communication strategies. The Flemish Institute for Healthy Living is currently developing two evidence-informed tools that can support public health professionals in developing engaging and persuasive health messages. Both tools take into account the two gaps mentioned above. The first tool gathers 10 science- and practice based guidelines for developing engaging and persuasive health messages. These guidelines draw on a combination of behaviour-change models, communication theories, and cultural

theories. The second tool is a decision tree that supports public health professionals in selecting the most appropriate communicative appeal: rational, emotional and/or narrative appeals. The decision tree guides professionals through questions relating to the health theme(s) addressed in the message and to the target group the message is directed towards. Both tools are bundled in a more extensive and interdisciplinary guide entitled 'Communicating towards health improvement'.

Annemie Coone, Didier Reynaert, Günter Stummvoll

TRAINING PROGRAM ON THE COLLABORATION BETWEEN SOCIAL WORK AND POLICE PROMOTING A HEALTHY AND SAFE PUBLIC SPACE [pechakucha]

SPEAKER: Annemie Coone

ABSTRACT. In December 2018, the SwaPol project, a training programme co-funded by Erasmus+, was launched. The project promotes the collaboration between social work and police. Because in public space, both police and social work often get in contact with the same vulnerable groups (e.g. substance users in nightlife, homeless people, ...), the project aims to bring together both professions in order to increase the wellbeing of these groups and to secure the livability of citizens in public space. SwaPol (as a teamwork of five European project partners) develops a five days training programme for both student social work and police officers. The training will be piloted in autumn/ winter 2019-2020 in order to be structural embedded at a later stage. The five days training will address the following topics: (1) Public order management: collaboration between social work and police (themes: professional culture, norms and values, ethics, conflict management, social area analysis, working on partnerships, prevention, ...). (2) Drug prevention and harm reduction for young people in the nightlife setting: collaboration between social work and police (themes: alcohol and drug use; the environment of the entertainment setting, policies on nightlife, first

care, ...). (3) Homeless people and migrants as vulnerable target groups: collaboration between social work and police (themes: selective prevention of this target groups; the housing market,...). The project consists of three WPs: development and piloting (testing) of the training course, development and completion of didactic training materials and dissemination and national / international networking for implementation. The Pecha Kucha will introduce the participants to the context and aim of the project. Furthermore, it will give the audience an overview on the content of the training anno September 2019 and give some inside information on the future perspectives of the project (e.g. piloting stage and further dissemination plans).

Jorne Vanhee

TOWARDS A EUROPEAN CONCEPT OF CRIME PREVENTION [pechakucha]

SPEAKER: Jorne Vanhee

ABSTRACT. Crime prevention is a complex field to navigate. Diving into this field, one comes across a myriad of definitions, concepts, activities and theories. The European Crime Prevention Network (EUCPN) was set up to contribute to the development of the various aspects of crime prevention at the level of the European Union. The Network was tasked to facilitate the exchange of information and experience between the different Member States regarding crime prevention. Despite legal references in the founding documents of the Network, the concept of crime prevention has never been fully conceptualised within the EUCPN, nor made explicit to the different target groups in a clear and concise manner. This presentation will focus on the efforts that have been taken until now to tackle this issue and reflect on the field of crime prevention at the same time. In view of the historical background and the composition of the EUCPN, its concept of crime prevention should resonate with the needs of practitioners, policymakers and academics in a European context. Expressing these different requirements, the target groups were directly consulted in this process in order to work towards a consensus. This moment of reflection simultaneously offers the opportunity

to look forward and carve out new pathways for the Network to continue to improve crime prevention throughout the Member States.

Lien Van der Biest, Leen Van Brussel

"HET GEDRAGSWIEL" AS A COMPREHENSIVE OVERVIEW OF DETERMINANTS OF (HEALTH-RELATED) BEHAVIOUR [pechakucha]

SPEAKER: Leen Van Brussel

ABSTRACT. Promoting healthy lifestyles in individuals, groups, and broad populations requires making use of behaviour insights. This includes health promoters having a sufficient understanding of the determinants of health-related behaviours, enabling them to adopt effective behaviour change strategies. However, existing theoretical models of behaviour determinants typically focus on specific types of behaviours or determinants, failing to provide a comprehensive overview of all types of factors potentially influencing behaviour. Moreover, selecting an appropriate theoretical model and applying it in daily practice remains challenging for many practitioners.

Therefore, the Flemish Institute of Healthy Living developed a comprehensive determinant model, 'het gedragswiel', based on the COM-B model of Michie et al. (2011), and translated it to suit the Flemish context of health promotion. 'Het gedragswiel' summarizes behaviour determinants into three broad categories: 'competenties' (capabilities), 'drijfveren' (motivation), and 'context' (opportunities), allowing practitioners to get a grasp of the diverse range of determinants that might impact (health-related) behaviour. The model can therefore be used to identify important determinants of a certain health-related behaviour, giving rise to meaningful change objectives and behaviour change strategies. Also, the model could improve communication between health promoters, policy makers, and citizens on behaviour change by providing a simple language and structure on behaviour determinants. The model was developed with the support of an academic expert group, and is being implemented in the Flemish health

promotion sector, guided by a participatory trajectory with members of this sector. The implementation entails the development of practical tools, supporting the use of the model in preventive interventions, the creation of an educational programme on the use of the model, and providing tailored advice and support for health promoters that wish to apply the model.

Sanja Musić Milanović, Helena Križan, Dora Bukal, Maja Lang Morović, Slaven Krtalić

HEALTHY LIVING: PHYSICAL HEALTH EDUCATION IN CROATIA [pechakucha]

SPEAKER: Helena Križan

ABSTRACT. Healthy Living is the national health promotion program in Croatia. There are five main components of this program: Health Education (Physical health, Mental health, Sexual and reproductive health), Health and Physical Activity, Health and Nutrition, Health and Workplace, Health and the Environment. This presentation will focus on the Physical health element of the Health Education component.

Based on a needs assessment carried out beforehand 3 main activities were designed: 1) Polygons for physical activity of schoolchildren, a set of moveable equipment designed for schools without gyms which consists of 25 multi-functional elements. It was developed in cooperation with mechanical engineers, kinesiologists and the education sector.

2) 10-minute exercises for children, designed for teachers to use during school hours
3) Recommended menus for elementary schools, based on the National guidelines for nutrition in Elementary schools. Distributed regularly to schools along with implementation support. All the activities are co-financed by the European social fund and were designed to modify the school environment to be more health-friendly in order to encourage healthy lifestyles in children.

Stijn Aerts

PREVENTING VICTIMISATION OF MINORS IN THE DIGITAL AGE [pechakucha]

SPEAKER: Stijn Aerts

ABSTRACT. European children and adolescents are online. Almost all have daily Internet access, mostly via mobile devices. Social media, social networks and playing games are their top online activities. Over the past decade, this has created opportunities for messaging to, communicating with, and interacting with minors for preventive purposes. At the same time, perhaps the most significant trend in minors' Internet use is the shift towards closed communications and private, impermeable networks, making it ever harder to reach and tailor to this target audience. For the Romanian Presidency, the European Crime Prevention Network has produced a Toolbox on the online prevention of child victimisation. It investigates both existing and novel ways to communicate to children in view of the above-mentioned reality. In doing so, it borrows insights and principles from neighbouring policy domains (e.g. health promotion/disease prevention) and other disciplines (including digital and social marketing, cognitive psychology, and game-based learning). The resulting Toolbox is geared primarily towards crime prevention practitioners, but as it covers methods rather than criminal phenomena, could benefit other prevention workers as well. It discusses how online communications can be used productively to effect behavioural change in the target group. Central questions are: How do we not just reach children and adolescents but also get through to them? How do we make sure our interventions have real and measurable impacts? Finally, it identifies the limits of online and digital communications and compares its costs and benefits to those of offline interventions.

Coffee break

(Het Pand, 15:30 – 16:00)

Plenary session 2 and prize giving

(*Rafter*, 16:00 – 18:00)

Aaron Lyon - University of Washington
(United States)

INTEGRATING HUMAN-CENTERED DESIGN AND IMPLEMENTATION SCIENCE TO IMPROVE THE ACCESSIBILITY AND EFFECTIVENESS OF MENTAL HEALTH SERVICES

A wide variety of evidence-based prevention and intervention programs and practices have been developed, but these innovations are rarely delivered with adequate scale or fidelity to have public health impact. Such complex psychosocial technologies, including (1) interventions and (2) the implementation strategies developed to support intervention use (e.g., training; consultation; leadership supports), are frequently complicated, expensive, and difficult to learn. Usability – the extent to which a product can be used by specified users to achieve specified goals – is a fundamental, yet poorly understood, “upstream” determinant of both implementation outcomes (e.g., fidelity; sustainment) and service outcomes (e.g., functioning; wellbeing). Human-centered design (HCD) (a.k.a., user-centered design) is an approach that grounds product development in information collected about the people and settings that will ultimately use those products. HCD and implementation science share the common goal of improving the adoption of innovations in new contexts, but have not been well integrated. There is growing appreciation of the importance of collaborative design of interventions and quality improvement initiatives, but progress has been slowed by a lack of explicit and rigorous methods to support the application of HCD to psychosocial technologies. HCD methods are most commonly associated with digital technologies, but hold considerable promise for improving the usability

of both psychosocial interventions and implementation strategies. The current presentation will detail frameworks and methods – developed at the University of Washington ALACRITY and SMART Centers – for integrating HCD and implementation science and systematically evaluating the usability of complex psychosocial technologies. Examples of usability evaluations and iterative redesign processes for both interventions and implementation strategies will be discussed. HCD methods have strong potential to advance the science of adaptation and improve innovation usability and implementability.

Gjalt-Jorn Peters – Open University of the Netherlands (Netherlands)

APPLYING PREVENTION SCIENCE: INTERVENTION MAPPING AS AN INTEGRATIVE FRAMEWORK

Prevention science offers a wealth of literature to inform the development of interventions. Combined with all insights from target population and stakeholder involvement, the amount of information to organize and base decisions on can be overwhelming. Intervention Mapping helps applying prevention science by providing a framework that guides the intervention development process. This framework is structured but iterative, emphasizes the importance of an ecological approach and involvement of key stakeholder groups, and facilitates combining this with using theory and evidence. I will provide an overview of Intervention Mapping and introduce the acyclic behavior change diagram (ABCD), a practical tool that incorporates a number of prevention science principles and is freely available.

POST-CONFERENCE WORKSHOPS –

DAY 3

Workshop 1

Nick Axford - University of Plymouth; **David Foxcroft** – Oxford Brookes University; **Charlotte de Kock** – Ghent University; **Fabrizio Faggiano** - Avogadro University of the Eastern Piedmont; **Gregor Burkhart** - EMCDDA

The European Xchange registry and national prevention registries: How shall we move forward together?

(Auditorium Servais, 09:30 – 12:30)

Workshop 2

Rosaria Galanti, Elena Raffetti – Karolinska Institute

Graphical approach to confounding in epidemiological studies - an introduction to Directed Acyclic Graphs (DAGs)

(Zaal Masereel, 09:30 – 12:30)

Workshop 3

Peer van der Kreeft – University College Ghent

Workshop on Unplugged training

(Seminarieelokaal 1, 09:30 – 12:30)

Workshop 4

Peer van der Kreeft – University College Ghent

Workshop trainers from EUPC, EU-Dap Faculty, ASAP, Line Up Live Up, Good Behavior Game, Effekt

(Seminarieelokaal 1, 13:30 – 16:30)

Workshop 5

Gjalt-Jorn Peters – Open University of the Netherlands

Optimizing behavior change techniques effectiveness

(Zaal Masereel, 13:30 – 16:30)