Personalized Drinking Feedback Intervention for Veterans of the Wars in Iraq and Afghanistan: A Randomized Controlled Trial


**SUMMARY:** The efficacy of personalized drinking feedback intervention among OEF/OIF/OND Veterans were examined on peak blood alcohol concentration, alcoholic drinks per week, and alcohol-related problems. Veterans were randomly enrolled in personalized intervention or education-only intervention and effects of interventions were examined. Findings included supportive trends of personalized intervention lowering the three conditions, but only lowering peak blood alcohol concentration was a significant result.

**KEY FINDINGS:**
- Personalized drinking feedback intervention showed significant results in lowering peak blood alcohol concentration for subsamples, “heavy drinkers”?men/women who consumed 5+/4+ drinks in one occasion and "drinkers only" who consumed any alcohol at baseline, as well as the full study sample.
- The conditions of (1) drinks per week and (2) alcohol-related problems showed a trend of decreasing for the sample receiving the personalized intervention.
- Participants receiving the education-only intervention showed a decrease in both drinks per week and alcohol-related problems from baseline to 1?month, but an increase at 6?month, although not at significant levels.

**IMPLICATIONS FOR PROGRAMS:**
Programs could:
- Include a personalized feedback type of curriculum that discusses social norms, financial and caloric impacts of alcohol misuse, and outline potential alcohol-related problems to recognize
- Incorporate user-friendly technology to deliver curriculum, such as email, text, or mobile application
- Build into curriculum some of the participant’s current decisions or behaviors that support abstaining from alcohol use, such as journaling or reflection

**IMPLICATIONS FOR POLICIES:**
Policies could:
- Support the creation of an underlying consistent format for a personalized feedback type of curriculum to have tailored yet comparable information for wider dissemination for Service members and families
- Explore alternative development and delivery systems for alcohol curricula for Service members who misuse alcohol
- Consider integrating preventative interventions as necessary for Service members and families who may be at risk of misusing alcohol

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METHODS

- Veterans were recruited through a letter noting the purpose of the study and contacted within a week of their appointment to discuss the study, answer questions, and gauge participation interest.
- Participants provided self-report data at baseline, 1-month, and 6-month follow-up intervals using a modified Daily Drinking Questionnaire, the Short Inventory of Problems, and demographic data.
- Participants at the clinic privately reviewing printed feedback which included social norms data comparing their level of drinking to national and Veteran norms along with other personalized data.

PARTICIPANTS

- Veterans of OED/OIF/OND who presented to the Seamless Transition Clinic at the Harry S. Truman Memorial Veterans’ Hospital in Columbia, MO were eligible for participation.
- The sample size was 325 Veterans of which 93% were male, 82% White, and 75% served in the Army, with the average age of 32.20 years (SD = 8.18).
- The baseline, self-reported alcohol consumption from participants showed an average of 10.66 drinks per week (SD = 13.82), 6.55 drinks at peak drinking occasion over past 30 days (SD = 6.99), and 1.78 alcohol-related problems (SD = 2.69).

LIMITATIONS

- The only significant finding was regarding the effects of the personalized-only intervention on lowering peak blood alcohol concentration while other findings, while indicating trends, were not significant.
- The sample was homogenous and the study did not include long-term follow-up, not allowing for a clear understanding of what impact personalized-only intervention would have on a broader scale.
- As the intervention materials were reviewed privately by the participants, there were no fidelity checks in place to confirm the materials were actually read.

AVENUES FOR FUTURE RESEARCH

Future research could:
- Include longer follow-up periods in the study after six months and follow-ups upon study completion
- Diversify the participants in the study by having more women, minorities, and other branches of the military in the study sample while including a civilian comparison group
- Assess the efficacy of the individual components of the personalized intervention to measure the impact of each component and further tailor the personalized nature of the intervention

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