

INTERVENTION FOR ALCOHOL MISUSE IN ADOLESCENTS WITH FETAL ALCOHOL SPECTRUM DISORDERS



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ABSTRACT

Project Step Up proposed to reduce alcohol consumption and alcohol-related negative outcomes in adolescents with Fetal Alcohol Spectrum Disorders (FASD) by providing a group intervention that addressed strategies to cope effectively with the pressures associated with alcohol misuse. Adolescents with FASD and their caregivers participated in a 6-week, 60 minute group intervention that provided the adolescents with information about alcohol-related negative consequences, fostered skills to cope effectively with stress, and promoted adaptive responses to alcohol-related social pressures. Caregiver group topics included the effects of prenatal alcohol exposure on the developing brain, how to develop a positive parent-teen relationship, and how to handle parenting challenges unique to adolescents with FASD. Results revealed a decrease in alcohol risk scores and in alcohol-related negative behaviors in the intervention compared to the control group for light to moderate drinkers. Positive treatment response was not sustained over the 3-month follow-up period suggesting a need for more frequent intervention in this population.

INTRODUCTION

Over the past 40 years, mounting evidence has prompted increased attention to the role of prenatal alcohol exposure (PAE) in the occurrence of a wide range of disorders known as Fetal Alcohol Spectrum Disorders (FASD; Warren, Hewitt & Thomas, 2011). Given the neurocognitive problems associated with PAE, it is not surprising that psychosocial dysfunction has been consistently noted in the literature. In particular, as they mature, individuals with PAE exhibit problems with the misuse of alcohol. Estimates of prevalence rates of alcohol misuse in this population range from 35% to 60% (Famy, Streissguth & Unis, 1998; Streissguth et al., 2004).

METHODS

Participants

Participants were 52 (24 males, 28 females) adolescents between the ages of 13 and 18 years, mean age = 15.60 (SD = 1.70). Approximately 57.7% of the sample identified themselves as White, Non-Hispanic, 7.7% as Black Non-Hispanic, 30.8% as Hispanic, and 3.8% as Native American or Asian. The participants' average IQ was 91.77 (SD = 12.77). 71.7% of sample caregivers were married or living with a partner. 73% of participants were adopted, 21.2% were in foster or family guardian care, and 5.8% were living with their biological mother.

PROCEDURES

The intervention consisted of 6, 60-minute sessions delivered over the course of 6 weeks. Caregivers and adolescents attended separate but concurrent sessions. Outcome measures were administered to participants prior to intervention (pre-intervention) and following intervention (post-intervention). Follow-up measures were administered 3 months following intervention.

Session Content

Session: Adolescent

- 1 Normative feedback regarding peer alcohol use, standard drink size, amount of alcohol in common beverages, discussion of how youth cease or reduce alcohol use
- 2 Alcohol beliefs/expectations, alcohol expectancy challenge
- 3 How to deal with stress, adaptive coping without using alcohol
- 4 Types of drinkers, negative consequences of drinking, resisting peer pressure, alternative activities
- 5 Resistance and refusal skills, how to handle situations where alcohol is present
- 6 Communication skills to avoid risky/negative situations or problems with others

Session: Caregiver

- 1 PAE and neurocognitive development, FASD criteria, reframing teen behaviors
- 2 Alcohol and teens with FASD, protective factors, signs of misuse
- 3 Importance of structure, benefits of strong parent teen relationship, supervision and communication
- 4 Monitoring teens, handling common conflict scenarios, drinking in the home
- 5 How to talk to your teen about alcohol, facts and myths about alcohol
- 6 Action steps, parent self-care, additional resources for parents of teens with FASD

Lifetime Alcohol Use

Participants were interviewed regarding their lifetime experience with alcohol. Those with 0 or 1 lifetime drinking episodes were classified as abstinent or infrequent users. Those with two or more lifetime drinking episodes were classified as light to moderate users (range 2 to 100).

Outcome Measures

Alcohol Use Disorders Test (AUDIT); CRAFFT; Rutgers Alcohol Problem Index (RAPI); Drinks over last weekend; Drinks over last month.

Data Analyses

The effectiveness of the intervention was evaluated in separate Treatment Condition (SUI, Control) X Lifetime Use (Abstinent/Infrequent, Light /Moderate) analyses of covariance (ANCOVAs), using post-intervention scores as outcome variables. Treatment and Lifetime Use were the grouping factors, and pre-intervention scores were used as the primary covariates to correct for differences in initial levels. Three-month follow-up scores were the outcome variables measuring change over time.



RESULTS

Analyses yielded significant Treatment X Lifetime Use Interaction effects, with the adolescents in the Light/Moderate Lifetime SUI group reporting significantly lower levels of alcohol use and fewer high risk behaviors following intervention than those in the Light/Moderate Lifetime Control group, AUDIT $F(1, 47) = 7.60, p = .008$ and RAPI, $F(1, 47) = 4.63, p = .037$. Similarly, adolescents in the Light/Moderate Lifetime SUI group reported fewer drinks over the last weekend, $F(1, 47) = 5.27, p = .026$ and over the last month compared to the Light/Moderate Lifetime Control group, $F(1, 47) = 3.81, p = .057$. Importantly, there were no statistically significant differences in the Abstinent/Infrequent Lifetime groups revealing no iatrogenic consequences of the intervention on this low risk group. No significant differences were found on the CRAFFT. Intervention effects were not sustained over the 3-month follow-up period.

DISCUSSION

A manualized treatment using a standardized motivational approach adapted for the neurocognitive deficits of teens with FASD and administered by therapists trained in treatment delivery, resulted in a reduction in risky drinking and its negative consequences in adolescents with FASD who were light to moderate drinkers. The finding that the intervention did not have lasting effects on alcohol use over a relatively short follow-up period suggests the need for more frequent exposure to intervention content particularly focused on coping and alcohol refusal skills.

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