Program Approved by **U.S. Administration on Aging**

**Website:**  [http://my.ireta.org/ATTC](http://my.ireta.org/ATTC)

**Year Program First Implemented in Community Settings:** 1999 (after successfully completing randomized clinical trials)

- **General description of program**
  - The brief alcohol intervention approach, developed faculty at the University of Michigan and University of Wisconsin, is designed specifically for an older adult population and relies on concepts of motivational interviewing to enhance participants’ commitment to change their behavior. Program components include: alcohol screening, assessments, brief interventions, and a guide to referral for more intensive care.

- **Program goals**
  - Reduce alcohol-related problems among older at-risk or problem drinkers.

- **Reasoning behind the program design and elements**
  - Problem drinking can significantly affect a number of conditions in this age group, including depressive symptoms as well as general health functioning. Depression has been linked to relapse in drinking and increases in alcohol intake. Drinking status has been shown to have an effect on general health, physical functioning, pain, vitality, mental health, role performance, and social functioning.

- **Target population**
  - Older adults who engage in at risk or problem drinking behaviors.

- **Essential program components and activities**
  - Step-by-step brief intervention using motivational interviewing to enhance older adults’ commitment to change their drinking with potential follow-up counseling sessions at 6 and 12 weeks, if needed, conducted by health and social service providers.

- **Length/Timeframe of Program**
  - Screening, brief intervention, and follow-up to determine behavior change and additional issues: 3 months

- **Recommended class size (N/A)**
  - Manual and intervention was developed specifically for older adult seen in primary care and senior service settings.

- **Desired outcomes**
o Discuss an older adult’s problems, concerns, and ambivalence about their drinking, with the aim of assisting the individual to recognize their risks associated with their level of alcohol use

- Measures and evaluation activities
  o Alcohol consumption scale to measure quantity, frequency, and binge drinking to determine at-risk use
  o Michigan Alcoholism Screening Test - Geriatric Version (MAST-G) an elderly alcoholism screening instrument tests for the identification of elderly persons with alcohol abuse/dependence.

Health Outcomes and Evidence Supporting Health Outcomes
- A randomized, controlled trial design was used to determine the effectiveness of screening and brief interventions with at-risk drinking older adults in community settings. Older adults, age 60 and older, were recruited, screened, and randomly assigned to an intervention or a control group. There were a total of 4,322 screened. A total of 3,330 (77%) older adults were abstinent; of those who drank below the limits to enter the study (n=795), average consumption was 3.85 drinks/week (s.d.=2.49). There were 164 older adults that entered the study (Intervention: n=74; Control: n=90), consuming an average of 19.32 (intervention) and 16.53 (control) drinks/week at baseline. The intervention group received a brief counseling intervention conducted by health and social providers. At 6-month follow-up, the intervention group decreased their drinking by 40%; the control group decreased their drinking by 28%, with no significant overall differences between the intervention and control groups in terms of change in alcohol consumption over the course of the study. There were statistically significant decreases in alcohol consumption for the intervention compared to the control group in two areas: days drinking liquor and beers consumed per day. Days drinking liquor significantly decreased most for African Americans compared to Caucasians. [http://www.healthyagingprograms.org/content.asp?sectionid=71&ElementID=375](http://www.healthyagingprograms.org/content.asp?sectionid=71&ElementID=375)

Program Costs N/A

Resource Requirements
Space Requirements:
  - Private space to see clients
Equipment:
  - Printed screening and brief intervention materials

Training Requirements
- ½-1 day training for professional
- Training Content
  o Health Promotion Workbook for Older Adults, Æ Kristen Lawton Barry, Ph.D., David W. Oslin, M.D., and Frederic C. Blow, Ph.D. November, 1999
  - Trainer Qualifications
    o B.S, M.S.
References


Blow F. Substance Abuse Among Older Adults. Rockville, MD: US Department of Health and Human Services, Public Health Service, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment; Treatment Improvement Protocol (TIP) Series # 26; 1998.