

Brief Alcohol Screening and Intervention for College Students (BASICS): A Harm Reduction Approach, by Linda A. Dimeff, John S. Baer, Daniel R. Kivlahan, and G. Alan Marlatt (New York: The Guilford Press, 1999), 200 pp., \$26.00.

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Heavy alcohol consumption is a major problem on college campuses. Although most college students are below the legal drinking age, most of them report drinking alcohol, and almost a fifth of undergraduates drink several times a week. Heavy alcohol use is associated with a number of serious problems on college campuses, including motor vehicle accidents, sexual assault, fighting, vandalism, and poor academic performance. College administrators are strongly motivated to prevent or reduce drinking on campus, but they face daunting challenges. The transition from living at home to living relatively independently on campus makes access to alcohol easier for young students. In addition, alcohol consumption peaks in the early twenties, the age of most college students, tapering off gradually thereafter for most people. Heavy drinking is often a rite of passage for college students, and many college traditions involve excessive consumption of alcohol. Most students are therefore unlikely to listen to messages encouraging them to abstain from drinking alcohol. In fact, prevention programs that present abstinence as the only alternative have had little effect on drinking among college-age students.

Dimeff, Baer, Kivlahan, and Marlatt tackle the problem of college drinking with a program based on the principles of harm reduction. Although the harm-reduction approach to addictions has been used for many years in European countries, it remains controversial, particularly in the United States, where the disease model of alcoholism is dominant. Harm reduction does not view abstinence from substance use as the only option, but focuses on reducing the negative consequences of use, accepting goals of moderate use or use in

safer situations. Despite evidence that harm-reduction approaches reduce the devastating effects of alcohol and drug use, opponents worry that it misleads addicts, telling them they can continue to use substances and allowing them to deny the seriousness of their problems. Supporters argue, however, that while abstinence is the ideal, many users of addictive substances will fail in treatments that insist on abstinence or will avoid treatment altogether. A harm-reduction approach appears to be particularly appropriate for college students, who face strong peer pressure to drink and whose drinking may be contextually influenced and likely to decline as students mature.

The four authors of *Brief Alcohol Screening and Intervention for College Students (BASICS): A Harm Reduction Approach* are affiliated with the University of Washington, a major center of alcohol research, and are known for their work in the area of empirically supported treatments for alcohol use disorders. Dimeff's work focuses on prevention and treatment of addictive behaviors in college students, treatment of substance-dependent individuals with borderline personality disorder, and sexual aggression among college students. Both Baer and Kivlahan are associated with the National Center of Excellence for Substance Abuse Treatment and Education at the VA Puget Sound Health Care Center, Kivlahan as director and Baer as coordinator of education and acting associate director. Marlatt, director of the Addictive Behaviors Research Center at the University of Washington, is a renowned expert on behavioral treatments of alcohol use disorders and author of the first major text on harm reduction.

The current book describes BASICS, a brief intervention the authors have developed for use with high-risk college students. The intervention consists of two sessions, one week to two weeks apart. The first meeting focuses on orienting the student to the program, assessing the student's level of risk for alcohol-related problems, and obtaining the commitment to monitor drinking in the interval between the two sessions.

Explicit advice to change drinking habits is not provided during the first session; but by making students more aware of their drinking habits and risk factors, the evaluation itself has the potential to increase the salience of problem behaviors and elicit concern in the student.

The second session is a feedback interview in which the student is given a personalized feedback sheet containing information on the frequency of drinking, quantity of alcohol consumed, estimates of typical and highest-reported blood-alcohol content, and comparisons with student drinking norms. In addition, the student is provided with information about risks associated with drinking and myths about alcohol use, and receives advice on how to drink safely. Although providing information about the student's own risky drinking and building motivation to reduce drinking are the goals of this session, the therapist is encouraged to avoid lectures or scare tactics. The therapeutic style is guided by the principles of motivational interviewing. The therapist provides feedback in a nonjudgmental manner, allowing the student to respond and ask questions, but being alert to opportunities to increase concern and provide accurate information. The student is given detailed practical advice on how to drink more moderately, but the decision to use this advice is left to the student.

Feedback suggests that students perceive the BASICS intervention positively. More importantly, the program actually works. Follow-up assessments showed significantly greater reductions in drinking and negative consequences of drinking among high-risk students who participated in the program compared with those who did not. These differences were apparent two years after the intervention, suggesting that BASICS has a long-term impact on college student drinking. This book is thus a valuable addition to the clinician's library, providing as it does a detailed manual of an empirically supported treatment.

The manual itself is excellent, beginning with an overview of research on college student drinking and a cogent rationale

for the harm-reduction approach. It then provides a clearly written and engaging description of the program, with numerous examples of interactions between therapist and student, including examples of challenging questions posed by students and effective responses to these questions. Descriptions of assessment instruments used in the first session, examples of feedback sheets and self-monitoring forms, and informational handouts that can be photocopied and given to students are included in the appendices. A therapist interested in using the BASICS program has all the information necessary to do so in this book. In most cases, concrete examples will help therapists generate ideas on how to implement each of the key components of the program with their students. However, a section on field experiments students could use to assess their beliefs would benefit from a little more detail. While the authors acknowledge the difficulty of designing “experiments” that will allow students to interpret their findings without bias, they do not provide specific examples that avoid reinforcing students’ preexisting beliefs.

The authors acknowledge that some students may need a more aggressive approach than BASICS. The assessment conducted in the first session not only sets the stage for the motivational intervention of the second session, it also identifies students with alcohol dependence or with medical and psychiatric conditions that require the complete cessation of drinking. By providing suggestions for referring these students to more intensive treatment, the authors anticipate some of the reservations that may be raised about the safety of a harm-reduction approach.

Overall, this book is an important contribution to the alcohol treatment literature. It provides an empirically supported and practical intervention to reduce problem drinking on college campuses. It will no doubt be a valuable reference for therapists working with college students or any young people at risk for alcohol use disorders.

