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Introduction

The Smart Generation Program is a community intervention coordinated by Deakin University that aims to mobilise communities to reduce adolescent alcohol use.

This document provides an overview of the program and is aimed at communities and schools planning on implementing the program. It is also useful for those interested in the program approach and aims.

For detailed program implementation see:

- The Smart Generation Social Marketing Manual [1]
- The Smart Generation Social Marketing Teacher Workbook (see Appendix of The Smart Generation Social Marketing Manual)

This document is broken into eight sections:

1. About the Program
2. Background to the Program
3. Aims and Outcomes
4. Key Components of the Program
5. Key Messages
7. Evaluation Measures
8. References
The Smart Generation Program is Based on Work By:


1. About the Program

1.1 What is The Smart Generation?

The Smart Generation is a program that aims to mobilise communities across Australia to reduce adolescent alcohol use.

In many developed countries across the world, young people consume alcohol before the age of 18, resulting in considerable harm to them and their communities [3-6]. As the brain is still developing in adolescence, alcohol use at this time can impair development [7].

The Smart Generation Program is designed to help the next generation of children to be smarter and happier as a result of avoiding alcohol.

The program aims to optimise adolescent development by helping communities to work together to prevent young people from drinking alcohol before they turn 18.

The program is an evidence-based, multi-level intervention.
Evidence-based means all components have been demonstrated to be effective in changing behaviour.

A multi-level program seeks to bring about change at multiple levels, including communities, schools, families and individuals.

This multi-level approach is guided by Bronfenbrenner’s Ecological Systems Theory, which is explained further on pages 17 and 30.

Data indicates that over 80% of adolescents between ages 12 and 17 who drink alcohol obtain it from three main sources [6]:

1. Friends or acquaintances give it to them (secondary supply);
2. Parents or other adults give it to them (secondary supply); or
3. They purchase it themselves from liquor outlets.

Intervening at these three points of supply is critical to reducing adolescent alcohol consumption in Australia.

The Smart Generation focuses on two key aims:

1. Assisting young people and their families to discuss and adopt guidelines that reduce alcohol use; and
2. Reducing the supply of alcohol to adolescents from packaged liquor outlets, peers, parents and other adults.

The program achieves these aims through two approaches or components, which are discussed on the following pages.
1. **Social marketing** is delivered through schools and in the home. It aims to change awareness, attitudes, intention and behaviour of both parents and young people around alcohol use.

Through educational brochures, class lessons and school newsletter articles, this process communicates messages about the importance of delaying alcohol use for as long as possible. A crucial part of the program is encouraging parents and children to agree on guidelines around alcohol use.

The social marketing activities also educate parents, students and the school community about secondary supply legislation. This prohibits the supply of alcohol to a person under the age of 18 by anyone who is not their parent, without consent from a parent [8].

For detailed information on how to implement this component, see *The Smart Generation Social Marketing Manual* [1].

2. **Supply monitoring** involves monitoring sales of alcohol at packaged liquor outlets and collecting data on how often outlets sell alcohol to a person who looks under 18.

The aim is to encourage licensees to adhere to liquor licensing laws regarding alcohol supply to people under the age of 18. For this program, ‘supply’ refers to the sale of alcohol at outlets.

Community intervention occurs in the form of feedback letters to licensees regarding the outcomes of Supply Monitoring. In addition, media advocacy is conducted to increase community awareness and change young people’s perceptions about the availability of alcohol.

For detailed information on how to implement this component, see *The Smart Generation Supply Monitoring Manual* [2].
The Smart Generation methodology is based on extensive evidence including:

- Parent education and community mobilisation to encourage families to set guidelines around alcohol use has been shown to reduce adolescent alcohol use [9];

- Supply monitoring has been shown to increase compliance with minimum age legislation among retailers [10]; and

- Programs combining community mobilisation and social marketing strategies have achieved success in reducing alcohol-related harm [11, 12].
1.2 Why focus on adolescent alcohol use?

Families and young people across Australia are struggling with alcohol-related problems, which impact on the broader community.

National data indicates that more than 50% of teenagers consume alcohol before they turn 18 [6].

In 2014 approximately 68% of adolescents between the ages of 12 and 17 reported drinking alcohol in their lifetime, and 25% reported drinking alcohol within the previous 30 days [6].

These are concerning statistics. A young person’s brain is still developing during adolescence and alcohol can affect this development [7] and contribute to many negative health and social consequences [13] (listed below).

Adolescent alcohol use is associated with:

- Deterioration of parts of the brain that control decision-making, problem solving and emotions;
- Increased rates of depression, anxiety, bipolar disorder, conduct disorder and attention deficit hyperactivity disorder (ADHD); and
- Increased likelihood of academic failure.

By focusing on reducing adolescent alcohol use, the Smart Generation Program can bring about long-term positive change in communities, families and young people themselves.
In 2009, the National Health and Medical Research Council (NHMRC) released the *Australian Guidelines to Reduce Risks from Drinking Alcohol* [13], with one guideline specifically addressing adolescents and children.

The guidelines focus on reducing health risks from drinking and are based on scientific evidence from a range of sources, including hospital and accident data and surveys conducted among young people [13]. The guidelines are listed below.

**Guideline 1: Reducing the risk of alcohol-related harm over a lifetime**

The lifetime risk of harm from drinking alcohol increases with the amount consumed.

For healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.

**Guideline 2: Reducing the risk of injury on a single occasion of drinking**

On a single occasion of drinking, the risk of alcohol-related injury increases with the amount consumed.

For healthy men and women, drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion.
Guideline 3: Children and young people under 18 years of age

For children and young people under 18 years of age, not drinking alcohol is the safest option.

A. Parents and carers should be advised that children under 15 years of age are at the greatest risk of harm from drinking and that for this age group, not drinking alcohol is especially important.

B. For young people aged 15 – 17 years, the safest option is to delay the initiation of drinking for as long as possible.

Guideline 4: Pregnancy and breastfeeding

Maternal alcohol consumption can harm the developing fetus or breastfeeding baby.

A. For women who are pregnant or planning a pregnancy, not drinking is the safest option.

B. For women who are breastfeeding, not drinking is the safest option.

Wording of all guidelines has been taken from the NHMRC Australian guidelines to reduce health risks from drinking alcohol, published in 2009. [13].
2. Background

In response to the 2009 national alcohol guidelines and national alcohol use data, a team of researchers initiated a pilot program to promote the guidelines. The researchers were based at the School of Psychology at Deakin University and the Centre for Adolescent Health at the Murdoch Children’s Research Institute in the Royal Children's Hospital.

National surveys showed that around 38% of students aged 12 to 17 reported their parents had provided them with their most recent alcoholic beverage [6]. Of the students who currently drank, 83% reported consuming alcohol at a friend’s house (18%), at parties (35%) or at home (30%) [6]. There was need for a program to address alcohol use among adolescents and encourage adherence to the guidelines, with a specific focus on Guideline 3, which is reproduced below.

Guideline 3: Children and young people under 18 years of age

For children and young people under 18 years of age, not drinking alcohol is the safest option.

A. Parents and carers should be advised that children under 15 years of age are at the greatest risk of harm from drinking and that for this age group, not drinking alcohol is especially important.

B. For young people aged 15 – 17 years, the safest option is to delay the initiation of drinking for as long as possible.
Evidence for program development

Program development was informed by and based on strong evidence. Current research on communication strategies, parent education, community mobilisation, and monitoring and enforcement programs contributed to design of the program.

Communication strategies

➢ Communication strategies, delivered in the form of information sheets, leaflets or brochures within a particular setting [14], can modify alcohol consumption intentions and behaviours [15].

*In the Smart Generation Program, students receive educational brochures in school and discuss the key messages of delaying the onset of alcohol use, both in school and at home.*

Parent education

➢ Parent education that promotes standards of not providing alcohol to people under the age of 18 can reduce adolescent alcohol consumption and alcohol-related harm [9].

*In the Smart Generation Program, parents receive educational brochures and school newsletter articles about the value of setting rules around alcohol use. They are encouraged to discuss this information and establish guidelines for alcohol use with their children.*

Monitoring and enforcement programs

➢ Enhanced monitoring and enforcement programs, such as using secret shoppers and providing feedback to shops, have been shown in the UK [16] and the USA [16, 17] to reduce the sale of alcohol to minors.

*In the Smart Generation Program, young people who look under the age of 18 attempt to buy alcohol from packaged liquor outlets. Their experiences and observations are reported to the outlets through feedback letters and to the community at large through the media.*
Frameworks that guided program development

Integrated Behavioural Model

The integrated behavioural model proposes that intention towards a certain behaviour is the strongest predictor of engaging in that behaviour [18].

In addition, the model suggests that while intention is the strongest predictor, behaviour is often moderated by multiple competing environmental influences [19]. These factors influence the extent to which an intended behaviour occurs.

The Smart Generation Program aims to reduce the risk factors and promote the protective factors that influence a young person’s intention to not consume alcohol before the age of 18. The risk factors are depicted in the diagram on page 19 and discussed further on pages 20 and 21.

Bronfenbrenner’s Ecological Systems Theory

Bronfenbrenner’s Ecological Systems Theory was influential in the design of the Smart Generation Program.

This theory proposes that a person’s behaviour is influenced at a number of levels, including the individual, school, family, peer and community [20].

Effective programs work both within and between levels, reinforcing messages and behaviour change in multiple ways at the same time.
The Smart Generation Program consists of multiple components that work concurrently to address factors both within and between each of these levels.

This multi-level interaction is further explained and depicted in a comprehensive diagram on page 30.

The evidence, theories and frameworks provide a strong base for program effectiveness.
3. Aims and Outcomes

The overall aim of the Smart Generation Program is to reduce adolescent alcohol consumption.

It does this by:

- Reducing factors in a young person's environment that increase their risk of consuming alcohol (risk factors); and
- Increasing factors that protect a young person from consuming alcohol (protective factors).

These environmental influences are further explained on pages 20 and 21.

On the following page is a diagram that depicts the components, process, aims, risk factors and outcomes of the Smart Generation Program.

Each component targets specific short-term outcomes in order to reduce the impact of related risk factors at different levels (individual, family or community).

Some outcomes seek to increase positive behaviours and attitudes while others seek to decrease negative behaviours and attitudes.

Together, the social marketing and supply monitoring components aim to achieve the long-term outcome of reducing adolescent alcohol consumption.

Each aspect of this diagram is further described in the pages that follow.
3.1 Program Logic Model

The diagram below is a visual representation of the program components and desired outcomes and behavioural changes.
3.2 RISK AND PROTECTIVE FACTORS

Risk factors

Risk factors are characteristics of schools, peer groups, community, family and the individual that are known to increase the likelihood of harmful alcohol use [21].

For example, young people who live in settings where underage alcohol use is a normal part of life will perceive that alcohol is easily available. They will consequently be more likely to consume it than young people who are not exposed to these settings.

Community Risk Factors

- *Perceived availability of alcohol*: when young people believe that alcohol is easily accessible, they are more likely to buy it or try to get it, and are more at risk.

- *Laws and norms favourable to alcohol use*: when drug and alcohol laws are poorly monitored and enforced, it is easier for adolescents to access alcohol, thus increasing their risk.

Family Risk Factors

- *Parental attitudes favourable to alcohol use*: when parents are tolerant of their children’s alcohol use, or provide alcohol to them, young people are more likely to initiate and increase use.

Individual Risk Factors

- *Attitudes favourable to alcohol use*: young people who express positive attitudes towards alcohol use are at higher risk of subsequent use.

- *Friends’ use of alcohol*: young people who have peers, friends and acquaintances who use alcohol are more likely to be offered alcohol and more likely to consume it.
Protective factors

Protective factors buffer against the influence of risk factors, reducing the likelihood that children and young people will develop health and social problems. Protective factors include strong bonding to family, school, community and peers, healthy beliefs and clear standards for behaviour.

The greatest developmental benefit occurs when the number of protective factors in a young person’s life is increased, and/or when the cumulative number of risk factors is reduced. The Smart Generation Program aims to do this by focusing on specific short- and long-term outcomes.

3.3 PROGRAM OUTCOMES

The short-term outcomes of the Smart Generation are to:

- Increase knowledge of the consequences of underage alcohol use;
- Increase parent/child conversations and guideline setting around alcohol use;
- Increase adherence to liquor licensing laws;
- Increase awareness of adolescent alcohol harm;
- Reduce peer support for alcohol use;
- Reduce parental supply of alcohol to young people; and
- Reduce alcohol supply to minors at liquor outlets.

The long-term outcome of the Smart Generation is to:

- Reduce adolescent alcohol consumption.
4. **Key Components**

The Smart Generation Program is delivered through two *components* that target the risk factors associated with adolescent alcohol use.

### 4.1 **Social Marketing**

Social marketing involves encouraging families and teenagers to discuss the national alcohol guidelines and to set guidelines around alcohol use. The process includes sending educational brochures to parents and students, reinforcing messages in school newsletters, and holding class discussions about alcohol consumption. Extending social marketing into the community is also recommended to increase program effectiveness.

**Aims of Social Marketing**

The overall aim of the Social Marketing Program is to prevent harm from alcohol use by reducing adolescent alcohol consumption. It does this by promoting the following key messages:

1. **Young people should not drink alcohol until 18 years of age.** If they are currently drinking they should try and stop drinking or reduce the amount of alcohol they consume.
2. **Parents should not provide alcohol to anyone under the age of 18.**
3. **Parents and young people should discuss guidelines about alcohol use, with the aim of setting a household standard to not drink alcohol before the age of 18.**
Program Outcomes

All short-term outcomes contribute towards the overarching long-term outcome.

Short-term outcomes:

- Increase knowledge of consequences of teenage alcohol use;
- Increase parent/child conversations and guideline setting with parents;
- Reduce peer support for alcohol use;
- Reduce favourable attitudes towards alcohol use;
- Reduce parental supply of alcohol to minors; and
- Reduce perceived availability of alcohol.

Long-term outcome:

- Reduce adolescent alcohol consumption.

Social Marketing Program

The social marketing component involves two key activities: classroom discussions and parent/child discussions.

These discussions are supported by three communication methods: educational brochures, lesson plans and school newsletter articles.

- During classroom discussions students talk about the evidence for the national alcohol guidelines, guided by lesson plans and student brochures. Students develop and practice strategies to avoid alcohol before the age of 18 and develop peer support for avoiding alcohol.

- Parent brochures are sent home to all parents, reinforcing the messages students have discussed at school. These messages are further reinforced through school newsletter articles.

- Through all communication methods, parents are encouraged to have parent/child discussions at home to establish guidelines and set limits, specifically that young people are not permitted to consume alcohol before the age of 18.
4.2 Supply Monitoring

The supply monitoring component involves monitoring sales of alcohol at packaged liquor outlets and collecting data on how often outlets sell alcohol to a person who looks under 18. Following data collection, a community intervention is carried out to influence and change the behaviour of staff at packaged liquor outlets, community members and parents, with the primary aim of reducing the supply of alcohol to minors.

Aims of Supply Monitoring

- To identify how many packaged liquor outlets in a community supply alcohol to an adolescent who looks under 18;
- To promote best-practice approaches to the supply of alcohol, specifically reminding liquor outlets to always ask for proof-of-age identification from anyone who looks younger than 25; and
- To raise community awareness about the need to reduce alcohol supply to minors.

Supply Monitoring Program

Supply monitoring involves three key activities: pre-intervention data collection, community intervention and post-intervention data collection. The activities are undertaken over six to eight months and are repeated on a regular basis to establish behavioural change by licensees and staff at liquor outlets.

1. Pre-intervention data collection involves sending a young person (‘Confederate’), who is at least 18 years old but looks younger, into a packaged liquor outlet. The Confederate attempts to buy alcohol without proof-of-age identification and their experiences are entered into observation checklists.
2. **Community intervention** involves sending feedback letters to licensees and managers, informing them of the young person’s experiences and the data collected at their outlet. At the same time, media advocacy raises community awareness and promotes behaviour change.

3. **Post-intervention data collection** is a repeat of the first activity. The purpose is to determine whether there have been any changes in under-age alcohol supply at packaged liquor outlets following the community intervention.

Repeating this cycle periodically allows communities to measure the impact of the intervention. The below diagram depicts the activities involved in the supply monitoring cycle. As you can see, each activity leads to the next.
4.3 Critical components of program delivery

The diagram below shows how the strategies interact to influence attitudes and behaviour, with the overall aim of reducing adolescent alcohol use.
5. Key Messages

Through Social Marketing and Supply Monitoring, the Smart Generation reinforces three key messages that seek to impact community attitudes, intentions, practices and actions. The messages are communicated through student and parent brochures, class lessons, school newsletters, letters to liquor outlets and media advocacy.

Key Message 1

Young people should not drink alcohol until 18 years of age. If they are currently drinking they should try and stop drinking or reduce the amount of alcohol they consume.

Based on the National Health and Medical Research Council (NHMRC) guidelines [13].

Points to remember:

- This message is based on extensive research;
- Drinking large amounts of alcohol in the teen years can cause permanent brain damage; and
- Young people who do not drink alcohol are healthier and happier and do better in school and sports.

Reason for this message:

The NHMRC Guideline 3, and the evidence that supports it, is not currently well understood by parents and young people. The Smart Generation Program aims to raise awareness of this message and encourage students to question and discuss this with their peers and parents.
Key Message 2

Parents should not provide alcohol to anyone under the age of 18.

*Based on secondary supply legislation (22).*

Points to remember:

- It is illegal to supply alcohol to anyone under 18 years of age in a private home without consent from a parent or guardian; and
- Failure to comply with the secondary supply legislation in your state could result in a fine of up to $10,000.

Reason for this message:

There is currently lack of awareness about secondary supply legislation. Research carried out by the Smart Generation team revealed students were surprised to hear about this law.

However, students also reported this was a deterrent to drinking alcohol at other people’s houses or having people drink at their homes, as they didn't want to get anyone into trouble.
Parents and young people should discuss guidelines about alcohol use, with the aim of setting a household standard to not drink alcohol before the age of 18.

*Based on results from previous studies (23).*

**Points to remember:**

- Parents who do not allow alcohol use and do not provide alcohol to their teenagers are setting a clear example that drinking alcohol is not an acceptable behaviour for adolescents.

**Reason for this message:**

Parents should be encouraged to have an open conversation with their children about their expectations for alcohol use and to establish clear guidelines, with the aim of setting a household standard.
6. Bringing it all Together

Bronfenbrenner’s Ecological Systems Theory proposes that a person’s behaviour is influenced both *within* and *between* levels. The theory was influential in the design of the Smart Generation Program. The below diagram depicts the way the key messages, communication methods and the two program components work together within a multi-level structure.
In the diagram, the arrows indicate the direction of influence. The written text alongside the arrows refers to the method of influence. These methods influence behaviour both between levels (e.g. parent to teenager and vice versa) and within the same level (e.g. school to family or peers and vice versa).

For example, class discussions about the national alcohol guidelines influence behaviour and attitudes within the level of school and family and also between the individual and peers.

In the meantime, parent brochures and school newsletter articles reinforce the key messages and remind parents to set guidelines around alcohol use. These communication methods influence parent behaviour within the level of school and family.

Parents are encouraged to hold discussions with their children around alcohol use, guided by the messages in the brochures and newsletter articles. Parent/child discussions about establishing guidelines influence behaviour within the family and between the family and the individual. These discussions can also influence behaviour at the peer/school and community levels.

Alongside these discussions in school and at home, media advocacy and feedback letters to packaged liquor outlets reinforce the message that adults should not supply alcohol to adolescents, influencing behaviour within the community, and between the community, peer/family and individual.

As a result of this community intervention, young people not only find it harder to buy alcohol, but they are also reminded that they are prohibited from buying alcohol.

Multiple messages, occurring at the same time in different parts of the community, in schools and in the home, reinforce each other, influencing the behaviour of teenagers, their peers, parents and also the staff in packaged liquor outlets.
7. Program Evaluation

To achieve the best outcomes for the Smart Generation Program, it is important to evaluate the program after implementation of each component. Each component has its own evaluation and fidelity measures, which are outlined in their respective program manuals.

Social Marketing Evaluation

Short-term outcomes are measured by:

1. A student evaluation is conducted at the beginning of the program and immediately following the final session. This measures changes in students’ intentions regarding alcohol consumption. As intention to change behaviour is the strongest predictor of behavioural change [18] this can demonstrate achievement of short-term outcomes.

2. Teachers collect information about the program as they progress through the Teacher Workbook. The workbook collects detailed information regarding the method of implementation, the process that was utilised by the teacher, and the extent to which the program was delivered as intended. This information demonstrates how closely the program was delivered according to the original design.

3. A brief program review with one or two school staff members may be conducted upon completion of the program. This process will collect feedback from staff on their experiences using the lesson plan and implementing the program.
Long-term outcomes can be measured by comparing publicly available state-level data with community rates of adolescent alcohol consumption and parental supply. For example, as part of the Communities That Care program, Deakin University conducts youth surveys across communities to assess long-term change. If you would like to discuss this process, please contact the Smart Generation team.

Supply Monitoring Evaluation

Short-term outcomes are measured by:

1. The community coordinator completes the Preparation, Implementation and Evaluation Updates and sends these to the Smart Generation team. These updates demonstrate how closely the implementation has followed the manual and checklists. They also provide all the data from an entire Supply Monitoring cycle in a given community.

2. The Smart Generation team compiles a report based on the data analysis and sends it to the community coordinator. This report analyses the data collected during Supply Monitoring and provides a picture of what is happening in the community, including whether the intervention has achieved the program aims. When a community undertakes Supply Monitoring on a regular basis, long-term evaluation is possible and can show trends.

Longer-term outcomes can be measured by comparing state-level data with other community rates and assessing changes in adolescents’ perception of alcohol availability in their community through youth surveys. For example, as part of the Communities That Care program, Deakin University conducts youth surveys across communities to assess long-term change. If you would like to discuss this process, please contact the Smart Generation team.
7.1 Fidelity Measures

The aim is to deliver the Smart Generation Program with fidelity. This means every community should deliver the program in the way it was designed to be implemented, as the components have been demonstrated to be effective.

In order to assess fidelity, it is critical that community coordinators, school coordinators and teachers use the evaluation resources provided.

There are five fidelity measures used to evaluate each program, explained below (see the Social Marketing Manual and Supply Monitoring Manual for further detail).

Fidelity Measures

1. **Adherence**: All components of the program are implemented; critical content is not added or removed; and the program is implemented as designed and stipulated in manuals.

2. **Dosage**: Each component of the program is delivered through the required amounts and frequency (e.g. the required number of sessions are delivered and sessions are delivered in the correct order and over the correct time periods).

3. **High quality delivery**: The program is delivered by qualified and expert staff.

4. **Strong participant involvement**: The program is delivered so participants engage with the content and experience changes in line with the logic model.

5. **Saturation (or ‘reach’)**: The program reaches enough of the target population.
For detailed information about each component of the Smart Generation Program, see:

- *The Smart Generation Social Marketing Manual*[1];
- *The Smart Generation Supply Monitoring Manual*[2]; and
- *The Smart Generation Social Marketing Teacher Workbook* (Appendix within *The Smart Generation Social Marketing Manual*).
8. References


