
Abstract

Using Theoretically Tailored Mobile Communications to Target Risky Drinking Among Employed Adults: Design of a Randomized Effectiveness Trial

Deborah Fisher Van Marter*, MPH; Leanne Marie Mauriello*, PhD Psych; Emma Louisa de Aguiar*, BA

Pro-Change Behavior Systems, Inc., South Kingstown, RI, United States

*all authors contributed equally

Corresponding Author:

Deborah Fisher Van Marter, MPH
Pro-Change Behavior Systems, Inc.
1174 Kingstown Road
Unit 101
South Kingstown, RI, 02879
United States
Phone: 1 401 360 2981
Fax: 1 401 360 2983
Email: dvanmarter@prochange.com

Abstract

Background: A sizeable proportion of employed adults consume alcohol at non-dependent but risky levels, which is defined by the National Institutes of Health for men as drinking more than 14 drinks per week or more than 4 in a day and for women as drinking more than 7 drinks per week or more than 3 drinks in a day. Risky levels of drinking impact the health, well-being, and productivity of employees, while driving costs to employers in lost productivity, absenteeism, and health care costs. There is a lack of evidence-based behavior change programs targeting alcohol consumption for employer-sponsored wellness programs.

Objective: The aim of this study is to evaluate the effectiveness of a stage-matched and individually tailored behavior change mHealth program based on the Transtheoretical Model of Behavior Change promoting responsible drinking to employed adults.

Methods: A 2 arm randomized effectiveness trial is being conducted with 1,012 employed adults recruited by Survey Sampling, Inc. Participants randomized to the treatment group participate in the intervention across three timepoints and six months (0, 3, and 6 months), during which time the control group is asked to complete electronic assessments at two timepoints (0 and 6 months). Participants in both groups will be asked to complete electronic assessments at 12 and 18 months post baseline.

Results: The effectiveness of the intervention will be assessed by comparing treatment and control participants on the following primary outcomes: a) proportion of participants who reach criteria (action or maintenance stages); b) quantity of alcohol use (number of drinks per week, number of drinks per drinking day); and c) frequency of alcohol use (days drinking above recommended limits during the past month, number of drinking days in the past month). Secondary outcomes include comparison on frequency of alcohol-related problems and well-being related to productivity.

Conclusions: We hypothesize that the treatment group will demonstrate significant improvement on primary and secondary outcomes compared to control group participants. Using a mobile, responsive, and engaging platform, leveraging best practices of behavior change science including tailored communications, this program is well positioned to provide an efficacious, sustainable, and cost-effective means of reducing harmful drinking and the associated individual, employer, and societal impacts.

Trial Registration: Clinicaltrials.gov NCT02126163; <http://clinicaltrials.gov/ct2/show/NCT02126163> (Archived by WebCite at <http://www.webcitation/6cXwhAGqW>)

(*iProc 2015;1(1):e9*) doi:[10.2196/iproc.4692](https://doi.org/10.2196/iproc.4692)

KEYWORDS

alcohol; behavior change; mobile health; risky drinking; tailored communications; theory based; transtheoretical model

(This is a conference paper presented at the Connected Health Symposium, Boston, 2015, which was not edited and is only lightly peer-reviewed).

Multimedia Appendix 1

Responsible Drinking program screenshots.

[[PDF File \(Adobe PDF File\), 1017KB - iproc_v1i1e9_app1.pdf](#)]

Multimedia Appendix 2

Extended abstract.

[[PDF File \(Adobe PDF File\), 495KB - iproc_v1i1e9_app2.pdf](#)]

References

Edited by T Hale, G Eysenbach; submitted 14.05.15; peer-reviewed by D Sugarman; accepted 20.07.15; published 27.10.15

Please cite as:

Van Marter DF, Mauriello LM, de Aguiar EL

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iProc 2015;1(1):e9

URL: <http://www.iproc.org/2015/1/e9/>

doi: [10.2196/iproc.4692](https://doi.org/10.2196/iproc.4692)

PMID:

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