

# PRIME For Life



The STAR Program of  
**Pi Kappa Phi**  
F r a t e r n i t y

## Background and Objectives

During the 2003-2004 academic year, Pi Kappa Phi Fraternity offered the PRIME for Life (PFL) program to its members. This is the third year of offering the program. PFL delivers information drawn from research literature on alcohol and alcohol-related problems. Its objectives are

- to increase understanding of the risks associated with alcohol consumption, including the risk of developing alcoholism, and
- to provide guidance for making drinking decisions that lower an individual's risks.

This document reviews the major results of an evaluation of the impact of the program on participating Pi Kappa Phi members. For the reader's convenience, it attempts to be as consistent as possible with the reports for the 2001-2002 and 2002-2003 academic years and to draw comparisons between the results from 2003-2004 and 2002-2003.

## Method

Fraternity members received the PFL program in one four-and-a-half hour session. It is important to note that this is a pilot program due to the considerably shorter delivery time—approximately half the length of the standard program. Some chapters administered the program in the fall term and some in the spring. Participants completed two brief questionnaires—one before the presentation, and one immediately afterward. A follow-up survey was completed three to six months after receiving the PFL program.

The pre-test questionnaire sought basic descriptive information, recent alcohol consumption data, experiences with problems that might be alcohol-related or indicate potential for alcohol dependency, perceptions of personal risk, and beliefs about drinking and alcohol. The consumption and experiential data provide insight into the risks currently faced by the individual. The perceptions of personal risk and alcohol beliefs are a major focus of the PFL program, as these heavily influence the individual's drinking decisions. To determine whether the program has brought about immediate changes in risk perceptions and beliefs, the post-test questionnaire repeats the measures in these two areas. The follow-up survey repeated the pre-test's assessment of consumption and experiences, as well as risk perceptions and beliefs.

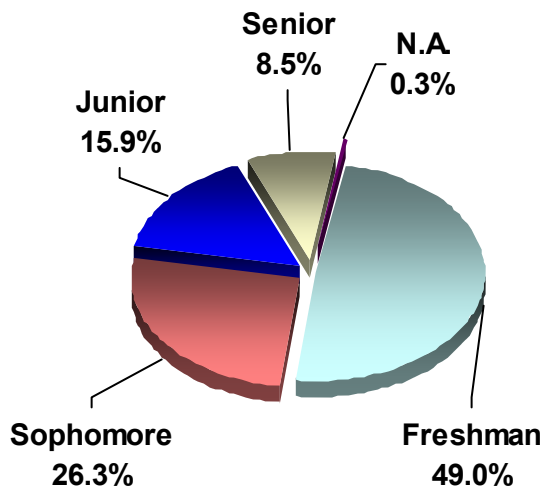
Participation in the program was significantly lower than in the past. Data were obtained from 421 fraternity members, compared to 1348 two years ago, and 2042 last year. Of the 421, 365 (86.7%) completed both pre- and post-test questionnaires—and thus form the basis for the analyses presented here. (Last year, 1781 returns were useable for analysis—a comparable proportion.) Of those 365, 63 (17.3%) also returned follow-up questionnaire, which is a nearly identical proportion to that in 2002-2003.

With such small sample sizes for this current report, identifying statistically significant outcomes was especially challenging. However, discussion will refer to an outcome as “significant” or “statistically significant” when appropriate—to indicate results of a t-test (where comparison of two groups is involved) or an F-ratio (for three or more groups). For the reader who wishes to know the probability level associated with these “significant” events, the following superscript indicators are included either in the text or on charts:

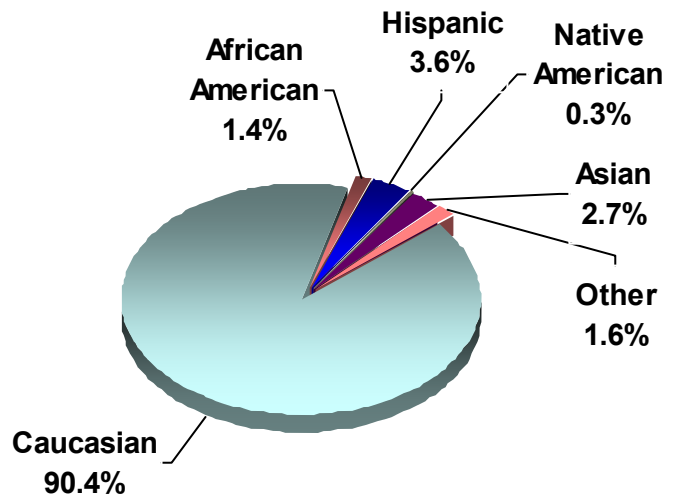
<sup>a</sup>  $p < .000$   
<sup>b</sup>  $p < .01$   
<sup>c</sup>  $p < .05$

## Group Demographics

### Year in School



### Race/Ethnicity



### Key Points

The racial mix in 2003-2004 is virtually identical to 2002-2003, with the proportion of Caucasians up approximately 2% and the proportion of Hispanics and Asians each down about 1%.

The proportion of freshman this year was up nearly 16% from last year, while the proportion of sophomores was down 6%. Average age at the time of pre-test was 19.6 years, identical with the 2002-2003 average. Students reported their grade standing; these responses were normally distributed between A+ and C, with B being most frequently cited (17.5%). B was also the most frequent grade average last year, though at a higher proportion (20.4%).

## Alcohol Risk Profile: Pre-Test

The pre-test questionnaire data provide insight into two important areas related to alcohol-related risk:

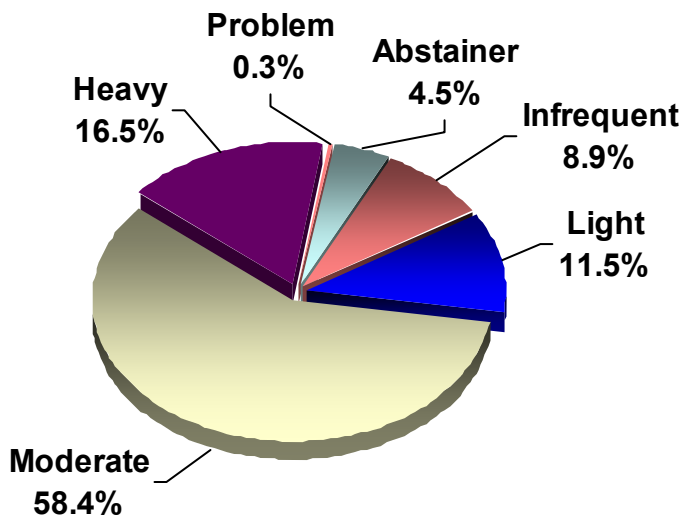
- Participants' current alcohol consumption.
- Drinking-related experiences that may indicate alcohol problems or potential dependency.

### *Alcohol Consumption*

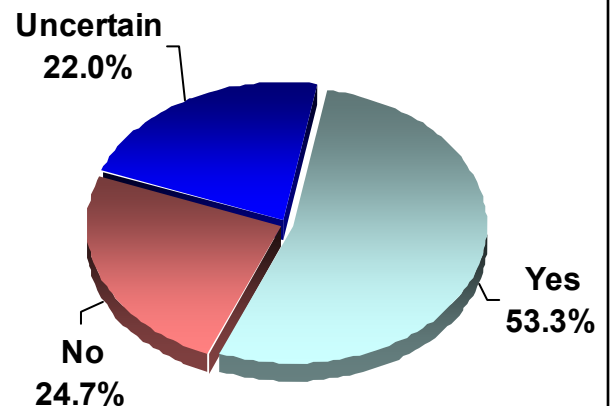
#### Drinking Self-Perception

Pre-test participants were asked two questions concerning their perceptions of themselves as drinkers: 1) how they would describe themselves as a drinker, and 2) whether or not they felt they had a high tolerance for alcohol.

#### Type of Drinker



#### High Tolerance

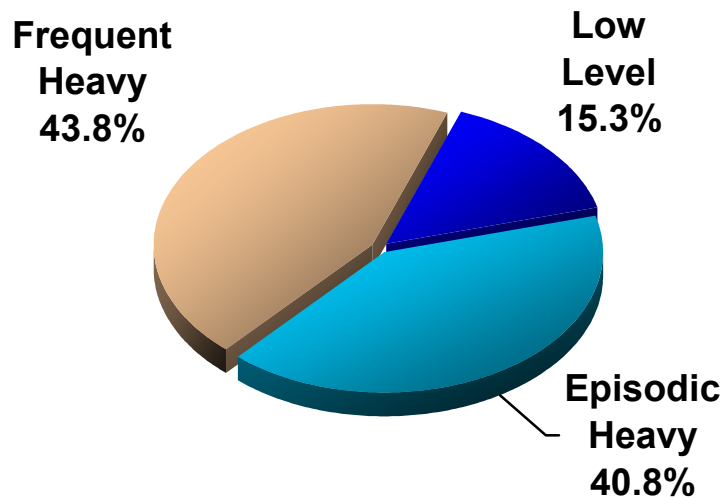


### Key Points

As in the past, more than 50% classified themselves as “moderate” drinkers. Compared to 2002-2003, the combined categories of “moderate” and “heavy” included nearly 9% more participants—a significant<sup>a</sup> difference. Similarly, the proportion classifying themselves as having a high tolerance for alcohol increased 5.5% compared with 2002-2003, though this difference is not significant, perhaps due to the small sample size this year.

## Drinking Behavior Index: Pre-Test

To obtain a more objective measure of drinking behavior, participants were asked to recall the number of drinks consumed each day during the preceding two weeks. A Drinking Behavior Index was constructed from these responses. Those reporting no more than three drinks on any day in the two-week period are labeled “Low Level.” This behavior approximates the low-risk drinking choices recommended in the PFL program. Those reporting four drinks or more on one to four days in the two-week period are termed “Episodic Heavy” drinkers. Those consuming four or more drinks on five or more days in the two-week period are classified as “Frequent Heavy” drinkers.

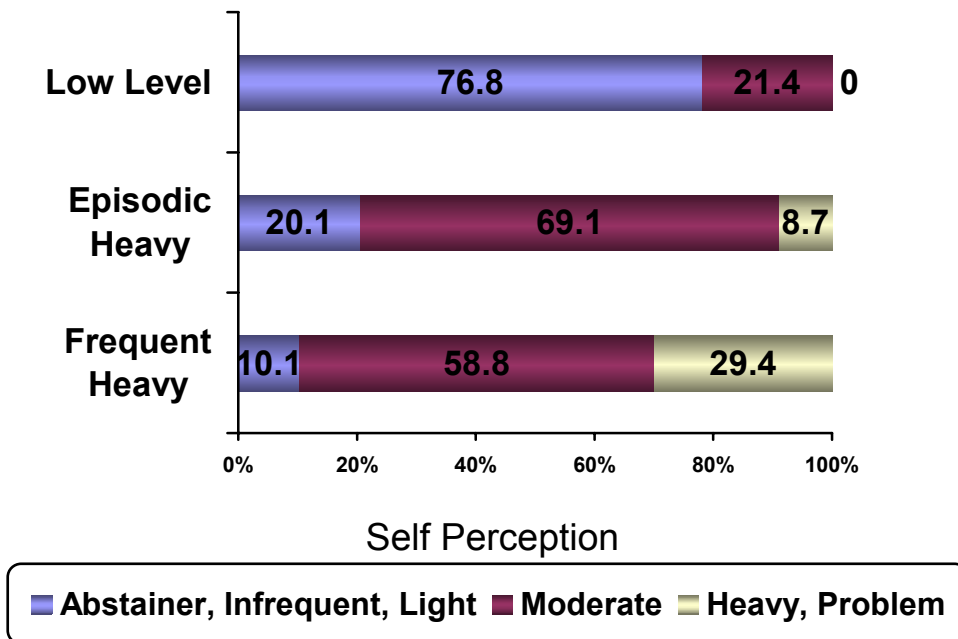


### Key Points

Under this Drinking Behavior Index, two-fifths of the participants were classified as Episodic Heavy drinkers based on reported drinking during the two weeks prior to the PFL program—a significant<sup>a</sup> lower proportion of students (20%) than in the 2002-2003 data. However, the index classified a significant<sup>a</sup> greater proportion of students (21%) as Frequent Heavy drinkers than in the 2002-2003 analysis.

## Self Perception vs. Drinking Behavior Index: Pre-Test

How does a student's self-perception compare with the results from the Drinking Behavior Index?



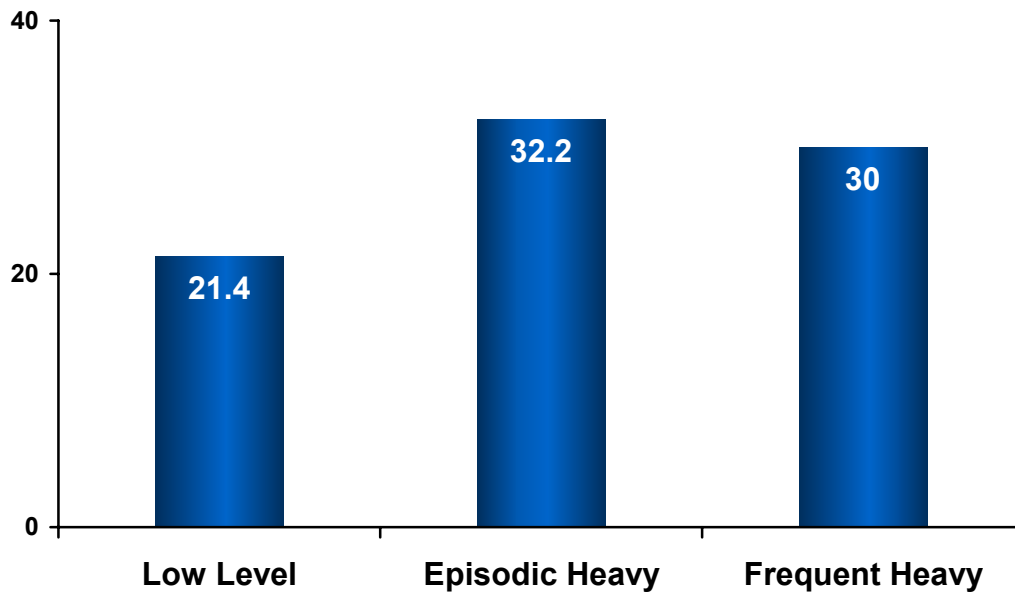
### Key Points

More than three-fourths of those with a Low Level drinking index for the preceding two weeks described themselves as “light” drinkers or less. Compared to 2002-2003, a slightly greater proportion (6%) of Low Level drinkers described themselves as “Moderate” drinkers.

Over 10% of Frequent Heavy drinkers described themselves as “Light” drinkers or less; this compares to 3% in 2002-2003. This suggests that compared to the previous year, more of the Frequent Heavy drinkers in the 2003-2004 group had an unusually high degree of denial or a significant misperception of what constitutes light drinking.

## Family History and Drinking Behavior Index: Pre-Test

Because research has found that heredity plays a role in the development of alcohol problems, participants were asked whether or not they believed that a biological parent, grandparent, or sibling has or has had a drinking problem.



■ Percent with a Family History of Alcohol Problems

### Key Points

Less than 30% of the participants reported some family history of drinking problems, compared to 37% among 2002-2003 participants. Nonetheless, the relationship between a participant's drinking behavior and the history of alcohol problems in his family is consistent with the pattern seen in the previous two years of data. Those classified as Episodic Heavy and Frequent Heavy drinkers on the Drinking Behavior Index reported some family history of alcohol problems significantly<sup>a</sup> more often than did the Low Level drinkers.

### Drinking Games

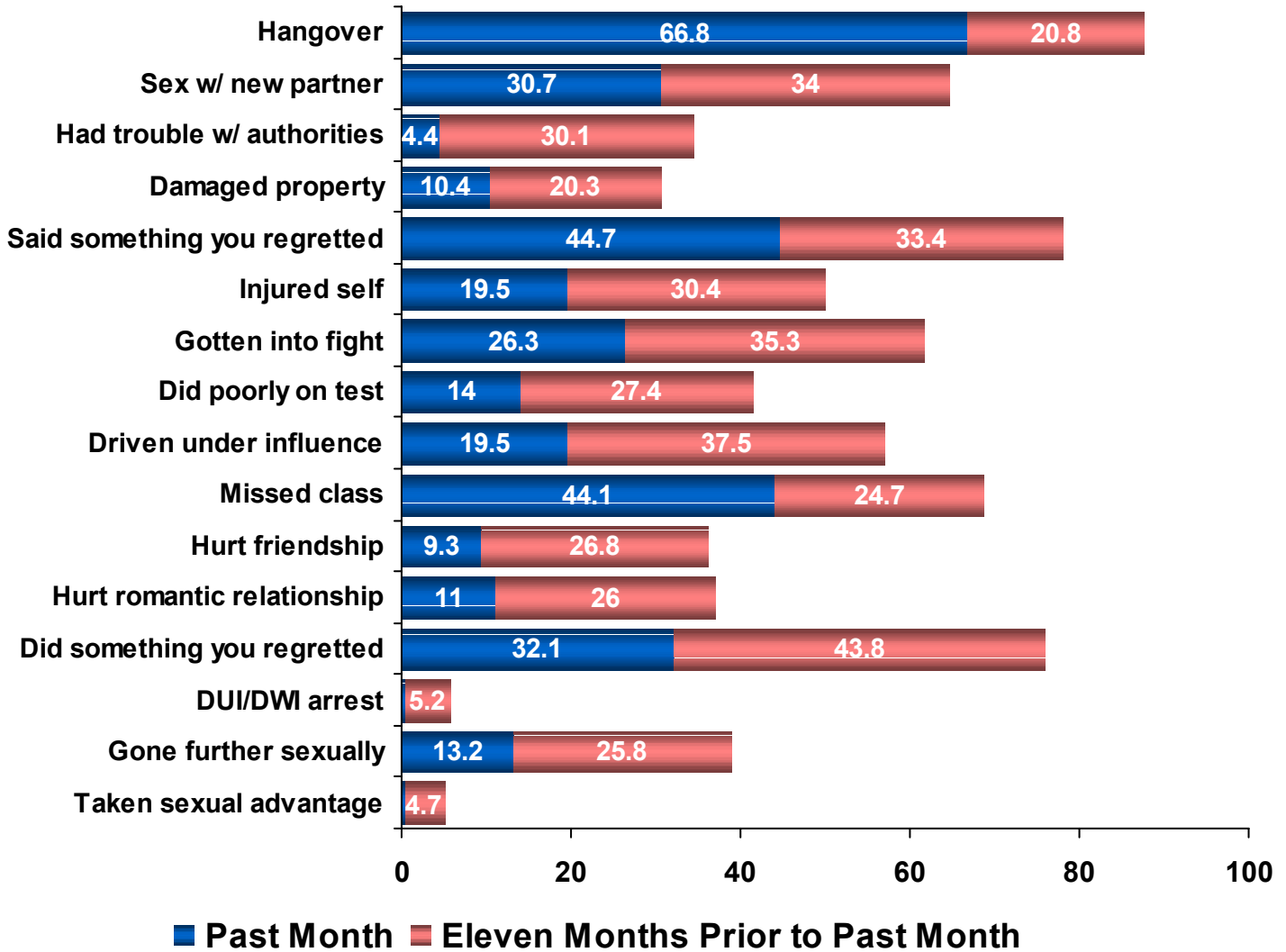
When asked the number of days during the past month on which they had engaged in "drinking games," those with a Low Level Drinking Behavior Index reported an average of 0.46 days, while Episodic Heavy drinkers reported 3.27, and Frequent Heavy drinkers indicated an average of 6.06 days. All differences among these three levels are statistically significant.<sup>a</sup> The averages observed this year for Low Level and Frequent Heavy are essentially unchanged from 2002-2003, while the average for Episodic Heavy increased from 2.92 to 3.27. The overall average response to this question was 4.02 days in the past month.

## Alcohol-Related Problem Experiences: Pre-Test

High-risk drinking choices can impair an individual's quality of life in a variety of ways. Some experiences are simply problems that interfere with daily life. Research has shown that other experiences often foreshadow alcohol dependency.

### Frequency of Drinking-Related Problems

The pre-test questionnaire listed 16 drinking-related problems that people might experience. For each, participants were asked to indicate whether or not they had that experience either in the past month or in the 11 months prior to the past month.



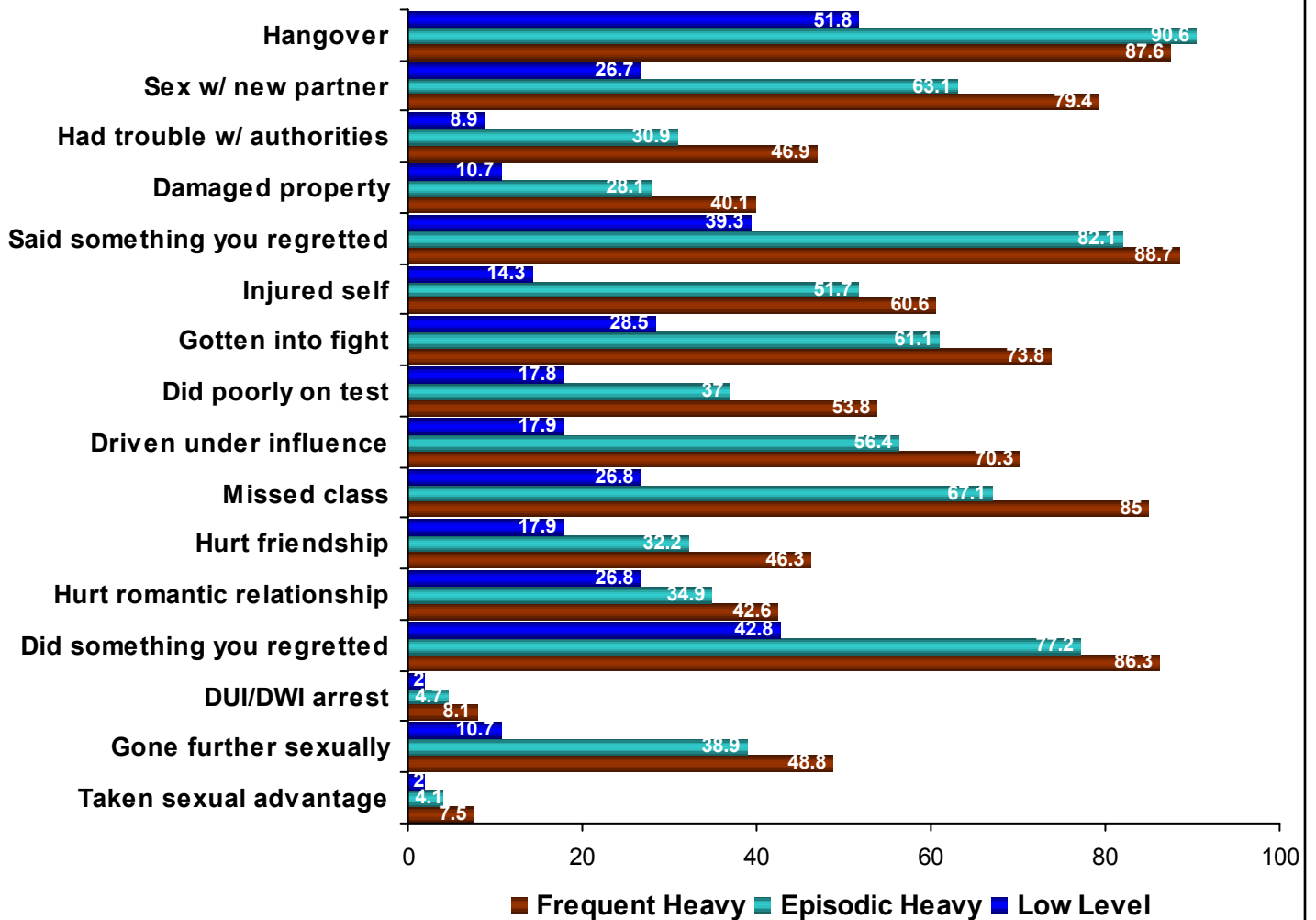
### Key Points

The most noteworthy aspect of this analysis is that (except for “taken sexual advantage”), each problem was experienced more frequently by the 2003-2004 participants than by those in 2002-2003—most by 3%-4% more, but some (“driven under influence,” “missed class,” “fought,” “said something regretted”) by approximately 8% more.



# Alcohol-Related Problems and Drinking Behavior Index

The role of alcohol consumption in these problems is clearly evident when their frequency of occurrence during 2003-2004 is shown for each of the three Drinking Behavior Index categories.



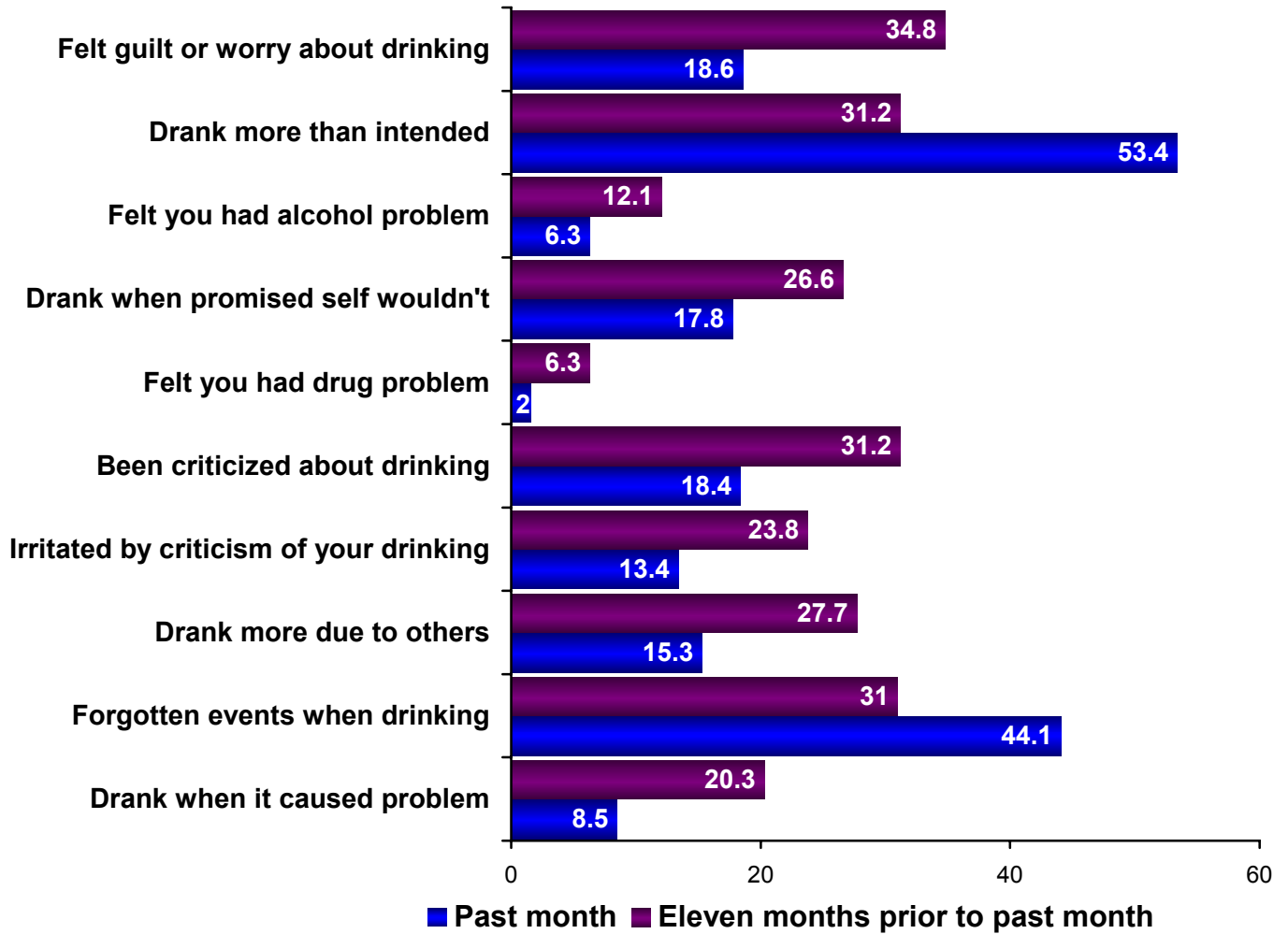
## Key Points

Of course, the occurrence of these problems generally increases as drinking behavior increases, often dramatically so. The results here are similar to those of 2002-2003. However, the proportion of Frequent Heavy drinkers experiencing most problems declined slightly in comparison with 2002-2003, while the proportion of Episodic Heavy drinkers reporting each problem increased. In a few instances, there was also a notably higher proportion among Low Level drinkers—28.5% Low Level participants said drinking had gotten them into a fight in 2003-2004, compared with only 19.2% in 2002-2003, and 26.8% damaged a romantic relationship in 2003-2004 compared with 12.3%.

Overall, 5.8% of the participants reported none of the 16 problems, 85.7% of whom were rated as Low Level on the Drinking Behavior Index. The average number of problems reported was 4.04 among Low Level fraternity members, 7.6 among Episodic Heavy respondents, and 9.5 among Frequent Heavy participants. The averages for 2002-2003 were, respectively, 2.96, 6.91, and 9.95. All differences among these averages are statistically significant.<sup>a</sup>

## Dependency Potential: Pre-Test

Research has shown that certain experiences are good indicators of a potential to develop alcohol dependency. The pre-test questionnaire listed 10 of these and asked members to indicate, for each, whether or not they had the experience in either the past month or in the 11 months prior to the past month.

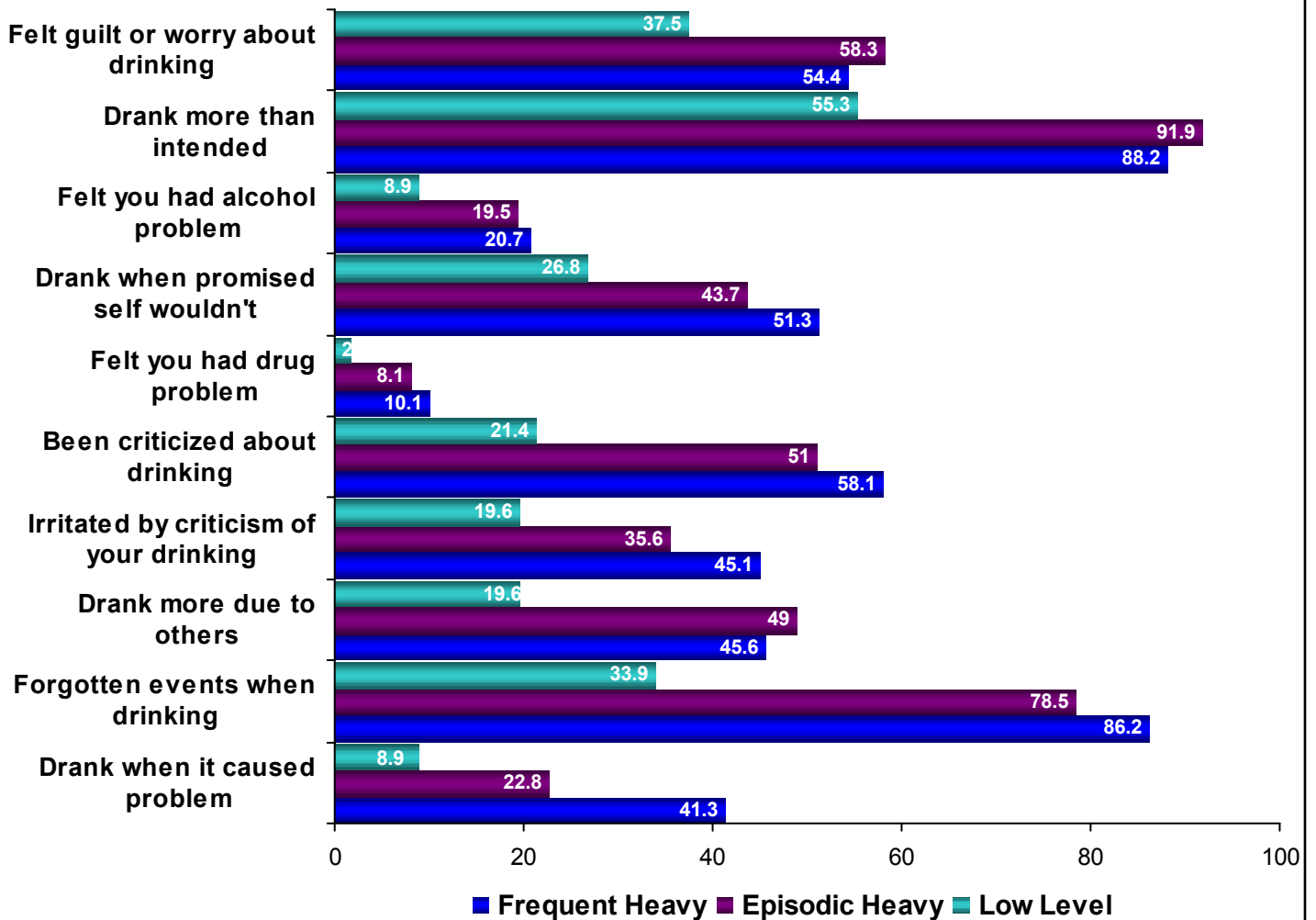


### Key Points

Once again, the prevalence of dependency experiences was similar to those reported among 2002-2003 participants—with a slightly greater proportion for most experiences, and as much as 6%-7% greater proportion for half of the dependency indicators (“felt guilty,” “drank when promised not to,” “been criticized,” “been irritated by criticism,” and “forgotten events”).

## Dependency Potential and Drinking Behavior Index

Once again, the Drinking Behavior Index differentiates significantly among most of these indicators of dependency potential.



### Key Points

Dependency experiences followed the pattern noted earlier for problem experiences. That is, compared to 2002-2003, there were higher proportions of Episodic Heavy drinkers reporting most of the dependency experiences, and slightly lower proportions doing so among Frequent Heavy drinkers. Low Level drinkers also showed a notably higher proportion in 2003-2004 than in 2002-2003 on “drank when promised self not to” (26.8% vs. 18.5%) and on “irritated by criticism” (35.6% vs. 26.9%).

Only 6.8% reported none of these experiences, 72% of whom had a Low Level Drinking Behavior Index. As in previous years, the number of problems experienced varied by drinking index category. The Low Level participants reported experiencing an average of 2.72 of the dependency potential indicators. This was higher<sup>a</sup> than the average of 2.15 in 2002-2003. At 4.6, Episodic Heavy drinkers’ average in 2003-2004 was higher<sup>a</sup> than the average of 3.98 in 2002-2003. Frequent Heavy participants’ average declined slightly from 5.16 in 2002-2003 to 5.08 problems in 2003-2004.

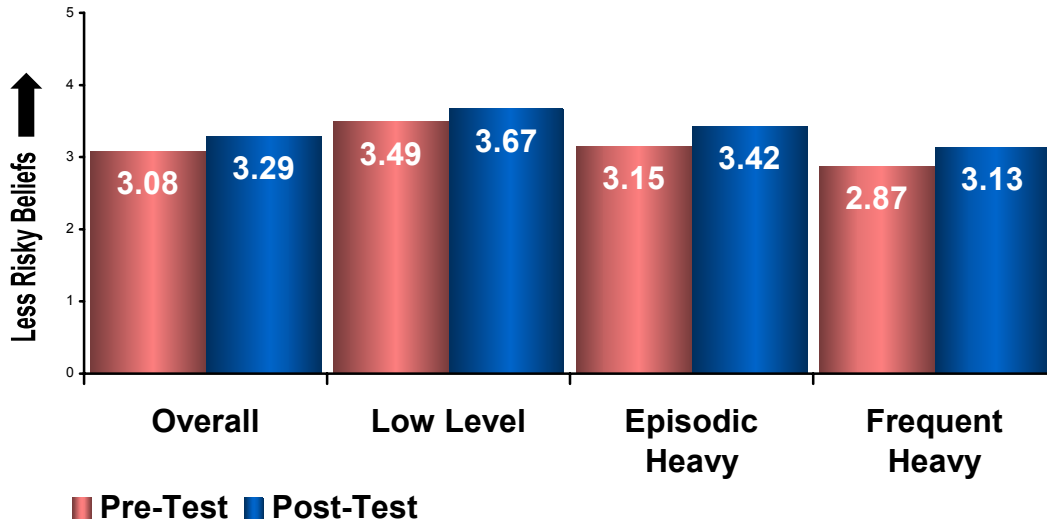
## Immediate Impact of PRIME For Life: Post-Test

By providing students with information on risk factors associated with alcohol use, the PRIME For Life program is designed to guide individuals toward making low-risk drinking decisions and toward adopting more accurate/less risky beliefs that will support those decisions. The post-test survey examines the immediate impact of the program in three areas:

- Beliefs about drinking and alcohol
- Perceptions of risk associated with specific drinking decisions
- Perceptions of personal risk for developing alcoholism

## Drinking and Alcohol Beliefs: Pre- and Post-Tests

Both pre-test and post-test survey contained the same set of 21 belief statements concerning drinking and alcohol. In each survey, participants were asked to indicate their degree of agreement or disagreement, using a five-point scale. For convenience in reporting, an average response to the 21 beliefs was calculated. A higher average indicates a more accurate/less risky belief.



### Key Points

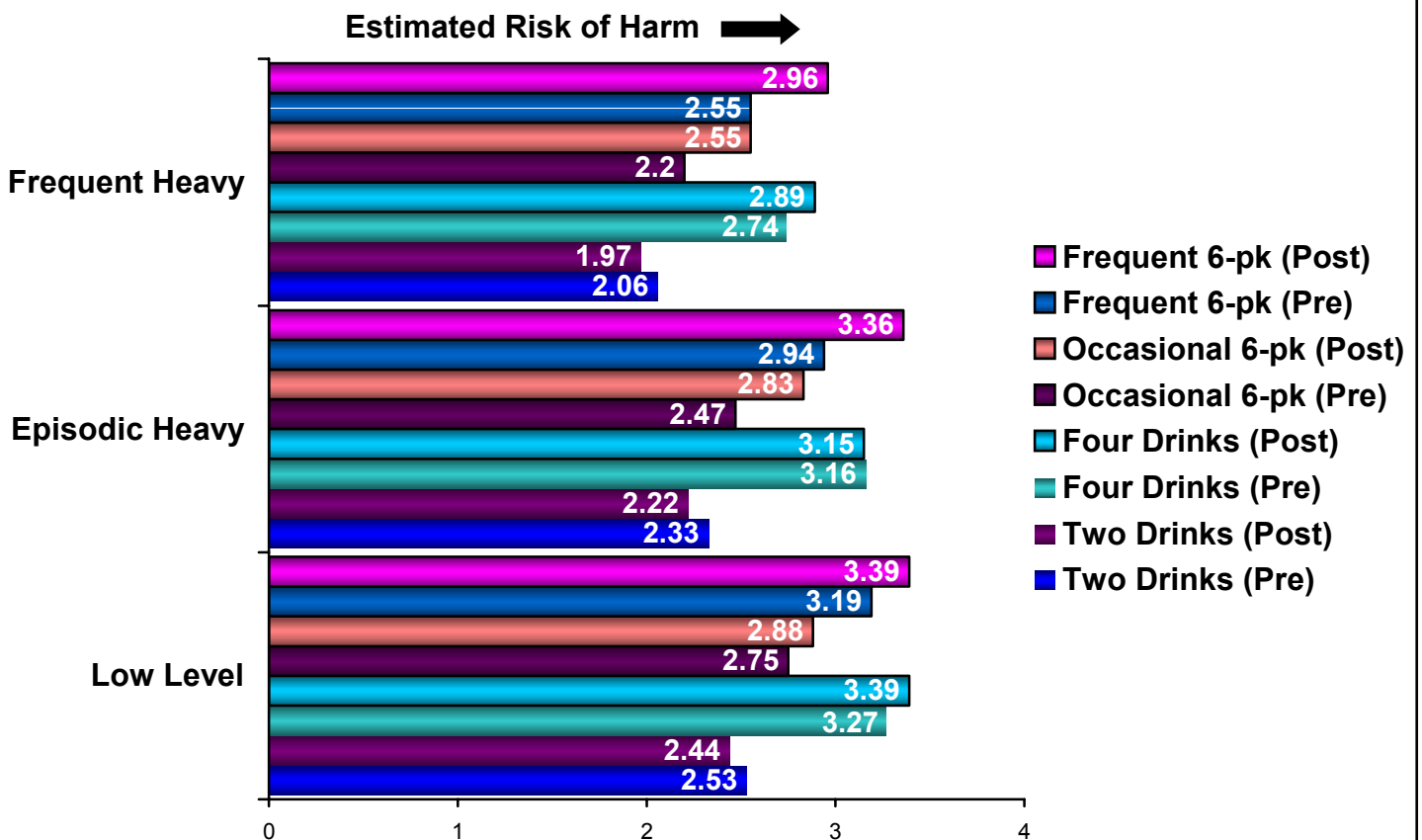
Across the 21 belief statements, pre-test respondents averaged 3.08, while the post-test average was a significantly<sup>a</sup> less risky 3.29.

Similarly, all three groups defined by the Drinking Behavior Index moved significantly<sup>a</sup> toward more accurate/less risky beliefs. There are also significant<sup>a</sup> differences among these three groups in both pre-test attitudes and post-test attitudes: Though all three moved in a positive direction, those with a Low Level Drinking Behavior Index had the least risky beliefs on both tests, Episodic Heavy drinkers had the next riskiest, and Frequent Heavy drinkers had the most risky attitudes.

The average drinking belief scores shown here are typically 0.10 - 0.15 lower than the comparable averages from 2002-2003 (except for the Frequent Heavy post-test, where the 2002-2003 figure was a similar 3.15). Thus, although the 2003-2004 participants made the same progress toward less risky beliefs than the 2002-2003 participants made, they began and ended with more risky beliefs than did those earlier participants.

## Perception of Risk

Once again, the Drinking Behavior Index differentiates significantly among most of these indicators of dependency potential.



### Key Points

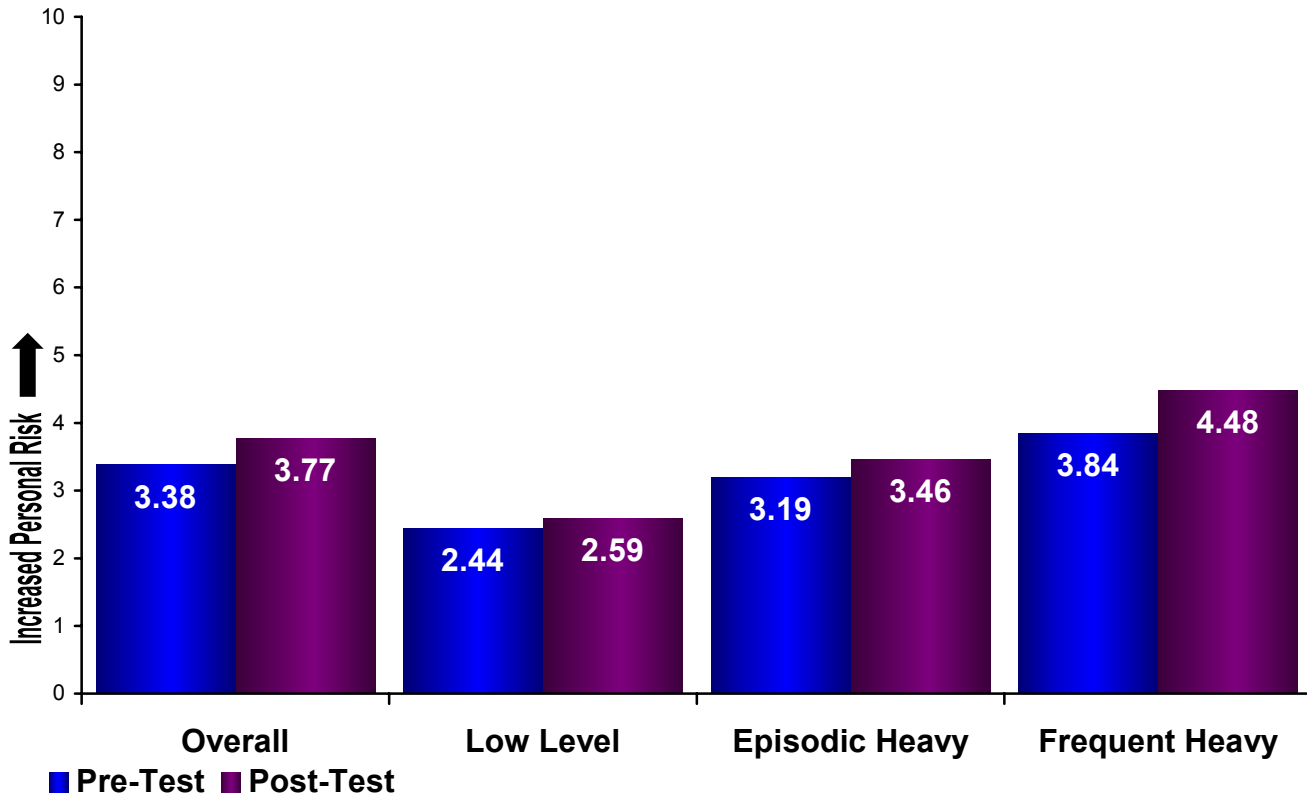
The average risk ratings represented in the above graphic vary from the 2002-2003 averages by one-tenth of a scale point or less, with this exception: The 2003-2004 Low Level drinkers perceived significantly<sup>a</sup> less risk in frequent six-pack consumption, at both pre- and post-test, than did those in 2002-2003.

Consistent with the information taught in the PFL program, two drinks daily was rated lower in risk at post-test than at pre-test, while the perceived risk for the other three scenarios increased at post-test. In the 2002-2003 data most of these differences were statistically significant. With smaller number of participants in 2002-2004, however, the same magnitudes of difference did not reach significance, or did so at lower levels.

Risk estimation for the four drinking scenarios was significantly related to the Drinking Behavior Index at both pre- and post-test. Low Level drinkers perceived higher risks than did Episodic Heavy drinkers, who in turn saw greater risk than did Frequent Heavy drinkers. This effect was milder<sup>b</sup> for occasional 6-pack at pre-test, than for the other scenarios<sup>a</sup>.

## Perception of Personal Risk: Pre-and Post-Tests

Becoming aware of one's own vulnerability for developing alcoholism can be one factor in motivating a person to reduce personal risk by adopting low-risk drinking behaviors. To determine whether or not the PFL program affected this awareness, both surveys asked participants to rate their own risk for developing alcoholism on a 10-point scale.



### Key Points

The Pi Kappa Phi participants as a group significantly<sup>a</sup> increased their perception of personal risk for developing alcoholism. Frequent Heavy drinkers showed the greatest<sup>a</sup> increase in perceived risk, while the increase among Episodic Heavy drinkers was significant<sup>b</sup>, but somewhat smaller. The increase in perceived personal risk among those with a Low Level Drinking Behavior Index was not significant.

The 2003-2004 results are similar to those of 2002-2003, except that Episodic Heavy drinkers evidenced greater impact than did Frequent Heavy drinkers.

## Follow-Up Data

While it is gratifying to find immediate impact of PFL, the ultimate goal is to achieve long-term results. As has been done the past two years, a follow-up survey was distributed to determine whether or not any long-term impact could be detected. It asked many of the same questions included on the pre-test, such as recent consumption, risk perception, risk estimation, drinking beliefs, drinking-related experiences, and dependency potential experiences.

In 2001-2002, only 110 completed follow-up surveys were returned, for a response rate of 9.1%. This was considered too few cases to permit meaningful analysis. In 2002-2003, the return rate for these follow-ups was substantially better—315 or 17.2% of the useable participant base; this was a sufficient number of cases to warrant analysis, despite some concerns regarding the quality of that data. The outcome of that analysis was mixed, but contained some encouragement. Results included these highlights:

- The initial impact of the 4.5 hour PFL program on perceptions of risk were no longer evident after the three- to six-month delay; follow-up data generally had retreated to pre-test levels.
- Compared to the pre-test, low-risk drinking had increased by 3% and episodic heavy drinking had decreased by 22%, but frequent heavy drinking and increased by 18%.
- Although a larger percentage reported having a DUI arrest at follow-up than at pre-test, there were declines in the percentages reporting each of nine alcohol-related problems, and each of six drinking-related experiences.

The return rate for follow-up surveys in 2003-2004 was 17.3%, matching the rate from 2002-2003. However, with the sample base being much smaller, this comprised only 63 questionnaires—even fewer than in 2001-2002. Regrettably, these responses are too few to permit meaningful analysis.



## Commentary

The small number of participants—one-fifth as many as in 2002-2003—and the concomitantly small number of completed follow-up surveys at times limited the ability to conduct more detailed analyses with the 2003-2004 data. The analyses that were conducted suggest that those who did participate in 2003-2004 appeared to be in more urgent need of an alcohol education program such as PFL.

Compared to 2002-2003, the participants in 2003-2004 were more likely to be freshman. The 2003-2004 participants were more likely to be Frequent Heavy drinkers—that is, to report having had four or more drinks on five or more days in the previous two weeks. On average, they had engaged in more “drinking games” in the preceding month than had their peers in 2002-2003. Similarly, they experienced more drinking-related problems, and generally reported experiencing more dependency indicators. Their beliefs about alcohol were higher risk at the outset of the program than was the case in 2002-2003.

Though harder to detect statistically due to the small number of participants, the impact of the PFL program appeared to be consistent with its past performance among Pi Kappa Phi members. Beliefs about drinking and alcohol generally moved toward greater accuracy and less risky attitudes—although, having started at a more risky level, they did not achieve the level observed in 2002-2003. Estimates of risk associated with the quantity and frequency of alcohol consumption moved in a more realistic direction. And members’ awareness of their own risk for developing alcoholism increased.

As in 2001-2002, we were unable to examine long-term impact of the PFL program, due to the small number of surveys returned. Given the consistency of performance observed on the post-test, one would assume that the long-term impact this year would be similar to that found in 2002-2003, as summarized earlier. Still, confirmation by way of more long-term data would be desirable.

Fraternity executives should be commended for their initiative to provide a program that communicates low-risk choices for a lifetime and potentially serves as an intervention to those members who are more progressed in their use and in the development of alcohol-related problems. Nevertheless, if the 2003-2004 participants are indicative of a trend toward using the program with members who are further progressed, it seems appropriate to consider adoption of a longer, more intensive version of PFL. At present, the version of PFL being taught in Pi Kappa Phi chapters is approximately one-half of the length of the standard program, and about one-fourth the length of versions used for other populations known to be further progressed towards serious problems. While the impact of this version has obviously been positive in the short run, it cannot be expected to have the strength and endurance of impact that the standard program could bring, as indicated in other program evaluations.