

College Student Drinker Preferences Regarding Traditional, Online, and mHealth Interventions

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Introduction

Mobile health (mHealth) interventions are growing in both popularity and availability. mHealth has been promising to reduce drinking among college students (Kazemi et al, 2017) but more work to refine this approach is needed. When designing mHealth interventions, it is important to consider end users' preferences regarding both intervention delivery modality and content. Moreover, daily mHealth text messages delivering tailored feedback are increasingly used as part of physical and mental health interventions (see Berrouiguet et al., 2016 [mental health] and Hall et al., 2015 [physical health] for reviews). In particular, given the effects of traditional interventions targeting college drinking are short-lived (see Carey et al., 2007, 2012 for meta-analytic reviews), learning preferences about mHealth messaging is critical. The current study examined preferences among college students with a focus on preferred delivery method and mHealth intervention options.

Method

Participants

- N = 131 college students
 - Had to typically consume alcohol at least once per week • Had to be ages 18-30
- Mean age = 23.61 (*SD* = 2.78)
- 62% women, 34% men, 4% non-binary
- 67% White, 29% Black, 7% Asian, 6% American Indian/Alaskan Native, 3% Middle Eastern/North African; 13% Hispanic or Latinx
- Note that 29 participants did not answer the items about helpseeking preferences, resulting in an analytic sample of N = 102

Materials

Help-Seeking Preferences: Intervention Modality

- If you were <u>considering changing your drinking habits to drink</u> <u>less</u>, would you prefer to meet individually with a counselor or to complete online programming (assuming both options were provided through ODU for free)?
- If you were <u>exploring options related to physical health</u> concerns...
- If you were <u>exploring options related to mental health</u> concerns...
 - 3 response options: I would prefer to meet individually with a counselor, I would prefer to complete online programing, Both options sound equally good

Help-Seeking Preferences: Daily Texted Feedback

- If you were *meeting individually with a counselor*, would you find it helpful to receive daily feedback, suggestions, or
- encouragement via text message as an additional component? If you were <u>completing online programming</u>...?
 - 0-4 response scale (0 = Not at all helpful, 4 = Very helpful)

Procedure

- Participants confirmed eligibility with an online screener survey
- Completed an online baseline survey \bullet
 - Included items about help-seeking preferences
- Completed twice-daily online surveys about drinking for 21 days

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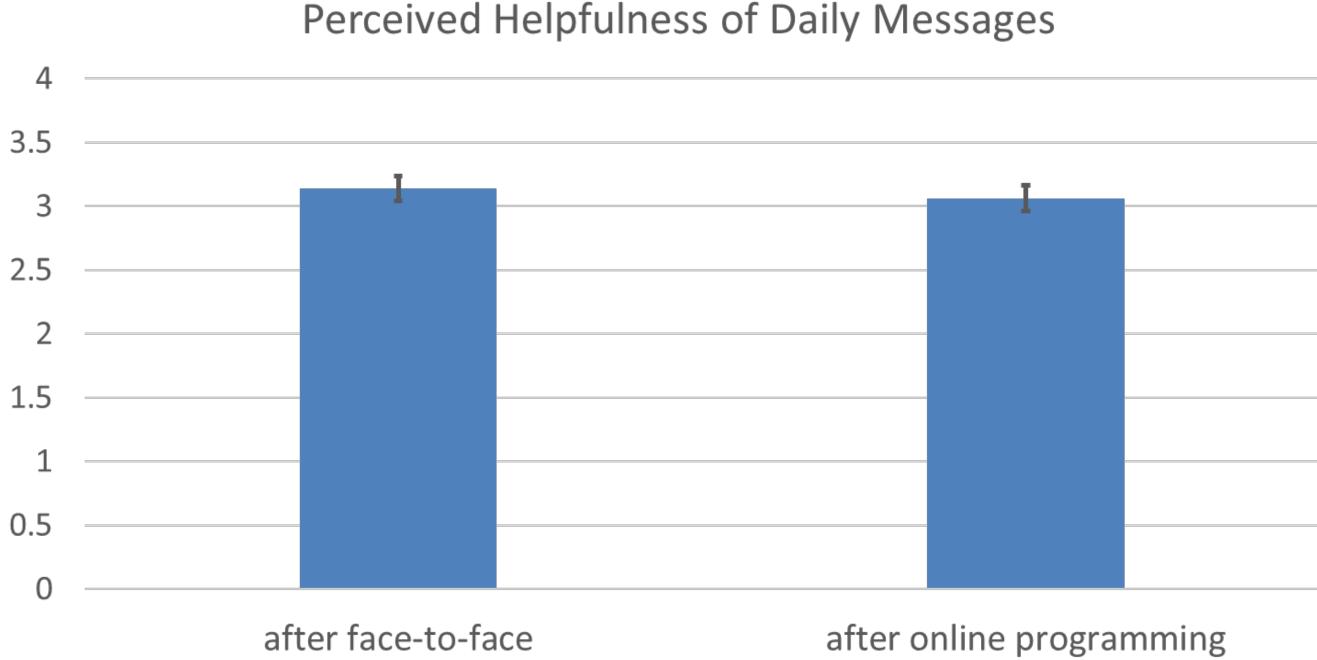
Preferred Intervention Delivery Modality Changing Drinking Habits Both equally Counselor 36% 38% Online Programmin 26% **Physical Health Concerns** Both equally 33% Counselor 48% Online Programming 19% **Mental Health Concerns** Both equally 26% Counselor 58% Online Programming 16%

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Results

Daily Text Message Feedback

Participants indicated daily mHealth text messages offering feedback, suggestions, or encouragement would be helpful (from 0 [not at all helpful] to 4 [very helpful]):



Discussion

Findings indicate substantial variability in college student preferences for the format of health-related interventions. Meetings with counselors received the most support, particularly for mental health concerns (preferred by 58% of participants), though preferences were more divided for changing drinking habits (counselor preference dropped to 38%). Online programming was perceived more positively for physical health concerns, particularly changing one's drinking (increasing from 16% for mental health concerns to 26%). Regardless of intervention delivery method, most students reported an mHealth component that involved daily text messaging would be helpful.

Implications: These findings may inform the design of novel mHealth components of interventions for college student drinkers.

Limitations: The sample was relatively small, lacked racial and ethnic diversity, and from a single institution, limiting generalizability.

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