

Evaluation of the STAD in Europe (SiE) pilot interventions - summary



The STAD (Stockholm Prevents Alcohol and Drug Problems) model is a community-based programme that has been associated with significant reductions in the overservice of alcohol, underage drinking and violence across Swedish nightlife settings (and surrounding communities). STAD combines three core components: community mobilisation, bar staff training in responsible beverage service (RBS) and stricter law enforcement.

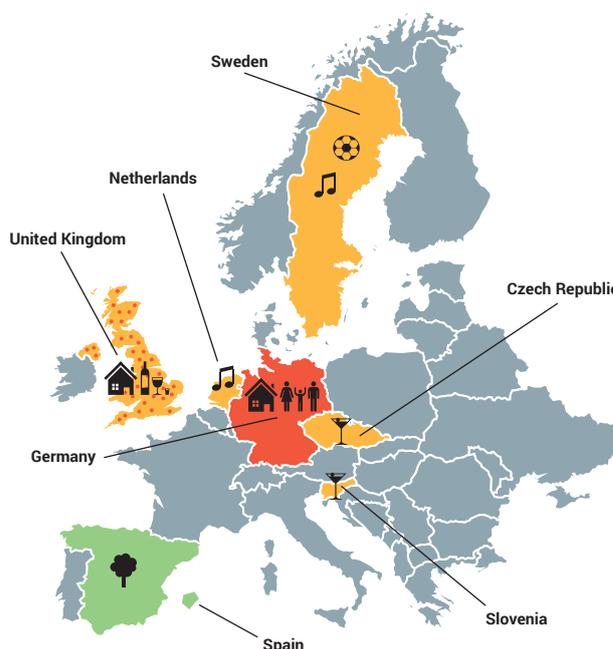
The SiE project (<http://stadineurope.eu/>) aims to gather knowledge about the best way to develop and implement STAD-based interventions across European drinking settings. During 2017-2018, partners across seven European countries developed, piloted and evaluated (processes and outcomes) locally-tailored STAD-based interventions, with the aim of addressing harmful alcohol consumption amongst young people across various drinking settings.

Implementation of locally-tailored STAD-based interventions across SiE pilot sites

The evaluation of the SiE pilot interventions suggests that the STAD model has the potential to be transferred across European drinking settings.

- All pilot sites developed and piloted an intervention that included, to some extent, the core components of the STAD model.
- However, levels of implementation varied, and the training and enforcement components in particular had to be adapted to accommodate differences across pilot sites, e.g. drinking setting type, alcohol culture and legislation.

The feasibility of implementing locally-tailored STAD-based interventions appeared to differ across drinking settings. Thus, whilst enforcement within nightlife, festivals and sports settings included both formal (i.e. legislative) and informal (social) control measures, in home settings enforcement tended to rely on informal control measures. Some settings presented unique challenges requiring partners to primarily focus on community mobilisation, and/or overcome implementation logistics and develop programme resources.



Drinking setting:



Short-term impacts of the SiE pilot interventions



Production of new knowledge on alcohol across Europe, including the extent of alcohol overservice (to underage and intoxicated patrons) and consumption, and social norms.



Mobilisation of communities and/or development of partnerships to address alcohol availability, consumption and related harms, and capacity building through training key stakeholders about the extent of the issue, and ways to reduce harm.



Some evidence of reductions in factors that support harmful alcohol consumption, such as overservice of alcohol to underage and intoxicated patrons, across a number of drinking settings.

Implementation and evaluation of STAD suggests that such interventions need to be implemented, adapted and evaluated over a long time period to enable (and evidence) changes in alcohol availability, harmful use and related harms. Six of the seven pilot sites indicated that they would aim to continue to develop and implement their intervention post piloting.

Conclusion

The evaluation of the SiE pilot interventions suggests that the STAD model has the potential to be transferred across different alcohol drinking settings in Europe, particularly across commercial drinking settings. The presence of supporting alcohol legislation, cultures that are supportive of preventing harmful alcohol use and related harms, and multi-agency working can facilitate the development, implementation and potential success of a locally-tailored STAD-based intervention. Even without these factors, components of the model, particularly community mobilisation, can be developed to support future intervention development and implementation. However, piloting across home drinking settings suggests that the STAD model may not be directly transferrable to these settings, particularly relating to enforcement. The SiE project and associated pilot interventions have elicited new knowledge on alcohol across Europe, mobilised communities and raised capacity to address the issue, and for some pilot sites have appeared to start to address factors that promote the harmful use of alcohol. Further implementation and robust evaluation of the pilot SiE interventions is required however to determine the sustainability and the long-term impacts of such interventions across European drinking settings.

Future considerations for the implementation of locally-tailored STAD-based interventions across Europe

Community mobilisation

- Community mobilisation is a critical factor for intervention development and implementation. Preparatory work may be required to mobilise the community, including obtaining and sharing evidence on the breadth and extent of the issue and ways to address it (including provision of existing evidence on the STAD model), and exploring local priorities and potential facilitating and impeding factors.
- Challenges to intervention development and implementation may exist at a political (e.g. legislation), societal (e.g. alcohol culture), organisational (e.g. resources) and relationship (e.g. between intervention implementers and target group) level. Partners need to be aware of such challenges and be prepared to be flexible to changing needs and/or opportunities.
- The development of a collaborative multi-agency partnership with shared goals and ownership can aid intervention development, implementation and sustainability.
- Key stakeholders who require mobilisation can include: 1) higher level supporters (e.g. policy makers, intervention funders/developers); 2) the intervention group (including those who deliver and/or receive some intervention such as bar servers); and, 3) the target group (e.g. drinkers).
- Media advocacy is important. Consideration needs to be given to the nature and timing of messages to different stakeholders.
- Developing community mobilisation requires sufficient resource, which may be facilitated via the collaborative multi-agency partnership. Dedicated human and financial resources are required, from a range of stakeholders, particularly in the early stages of the intervention.
- Coproduction where key stakeholders are involved in the development of intervention strategies and implementation phases is an important factor, facilitating for instance a sense of ownership among stakeholders.

Training

- Training needs may vary and be required at different levels (e.g. information provision only; provision of practical tools/methods to reduce alcohol access), for various stakeholders (e.g. public, professionals, servers), and in a number of formats (e.g. face-to-face; web-based).

Enforcement

- Enforcement approaches may be formal (e.g. legislative) and/or informal (social) and need to be tailored based on the drinking setting, existing alcohol policy, culture/social norms and resources.

Ongoing implementation, research and networking

- Where applicable, partners should continue to develop and implement their SiE interventions. This should be accompanied by robust evaluation, to determine longer-term processes of implementation, programme sustainability and impacts on alcohol availability, consumption and related harms (and other health, social and economic factors).
- Learning from the SiE project, and future implementation and evaluation of SiE interventions, should be shared in various formats across a range of stakeholders in Europe and beyond.

