Author’s response to reviews

Title: Alcohol consumption in tertiary education students

Authors:

Nicola J Reavley (nreavley@unimelb.edu.au)
Anthony F Jorm (ajorm@unimelb.edu.au)
Terence V McCann (terence.mccann@vu.edu.au)
Dan I Lubman (dan.lubman@monash.edu)

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Author’s response to reviews: see over
Dear BMC Public Health Editor

**Re: Alcohol consumption in higher education students**

We would like to thank the reviewers for their comments on the paper which we feel have improved it. The changes that we have made are outlined below and are also marked with track changes on the paper.

Regards,

Nicola Reavley PhD ([nreavley@unimelb.edu.au](mailto:nreavley@unimelb.edu.au))
Professor Tony Jorm ([ajorm@unimelb.edu.au](mailto:ajorm@unimelb.edu.au))
Professor Terence McCann ([Terence.mccann@vu.edu.au](mailto:Terence.mccann@vu.edu.au))
Professor Dan Lubman ([dan.lubman@monash.edu](mailto:dan.lubman@monash.edu))
Reviewer 1:

Minor Essential Revisions

1) The title of the article is “Alcohol consumption in higher education students”. In the part “Methods – Participants” you differ between vocational (VE) and higher education (HE) courses. Are only students, which visit higher education courses, included to the study? Or does the term “higher education students” include VE and HE? Should the title sound e.g. Alcohol consumption in vocational and higher education students?

Response: While the terms are often used interchangeably, in this paper we use the term ‘tertiary education’ to cover both VE and HE students. The title has been changed to read “Alcohol consumption in tertiary education students”

2) In connection with 1): Is it possible to categorize the participants between students, which visit vocational courses and higher education courses. If you included students from both education groups, is there a significant difference in alcohol consumption behaviour?

Response: Analyses showed no difference in student drinking behaviour according to VE or HE status. This is mentioned on p9 and please see Table 5.

3) Results – Alcohol consumption and knowledge of NHMRC guidelines:
What is the definition for heavy alcohol consumption? Is it 6 drinks or more in one session at least monthly? Why 6 drinks or more? For example binge drinking is usually defined with 5 drinks and more in one session, for female in many researches even 4 drinks or more in one session.

Response: We used the AUDIT as a measure of alcohol consumption. Question 3 of the AUDIT reads “How often do you have six or more drinks on one occasion when you are drinking?” Thus, we used this in the analysis.

4) Results – Alcohol consumption and knowledge of NHMRC guidelines:
Did you find a difference between male and female with respect to heavy drinking behaviour?

The following has been added (and see Table 2):
Male students and staff were significantly more likely than females to drink 6 drinks per session monthly or more.

Minor issues not for publication
1) Interview content, first paragraph: The full stop after citation delimiter "[14]".
2) Table 3 - cutline: you mean: “b significantly higher in male staff” (instead of students).

Reviewer 2:
1. Is the question posed by the authors well defined?
The study objectives need to be stated more precisely

Response: The abstract was edited to read:

Heavy alcohol consumption among adolescents and young adults is an issue of significant public concern. With approximately 50% of young people aged 18-24 attending tertiary education, there is an opportunity to implement programs within such settings that target risky drinking. The aim of the current study was to survey students and staff within a tertiary education institution to investigate patterns of alcohol use, alcohol-related problems, knowledge of current National Health and Medical Research Council (NHMRC) guidelines for alcohol consumption and intentions to seek help for alcohol problems.

2. Are the methods appropriate and well described?
These are. Except the tools need to be stated including their validity and Reliability

Response: The following was added:

Reliability as assessed by Cronbach’s alpha for the K6 in this study was 0.81.

And

Reliability as assessed by Cronbach’s alpha for the AUDIT in this study was 0.65.

3. Are the data sound?
Yes.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
Yes

5. Are the discussion and conclusions well balanced and adequately supported by the data?
Yes. However there are repetitive and need to be state but not overstated

6. Are limitations of the work clearly stated?
The study limitations are mentioned

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?
   Yes

8. Do the title and abstract accurately convey what has been found?
   Yes

9. Is the writing acceptable?
   Yes

The article is well written and interesting. The abstract is clear and summarizes the key issues in the study. The background is well set out. However the study objective needs to be more clearly provided. The study design is good. Though focus groups discussion could have strengthened the study findings. The tools used probably needs to be indicate, especially in relation to their validity and reliability. The data analysis is good. The discussion rather lengthy and repetitive. The conclusion should probably be merged with the discussion. Some variation in the results presentation, use of pies, graphs rather than only tables. These recommendation fall under the category of discretionary revision mostly.

**Reviewer 3**

Major Compulsory Revisions.

The topic is an important one but the stipulated aim of getting more knowledge on how to design appropriate intervenions for use in higher education settings is not really answered by the article in its present form. Too much emphasis and space is layed upon the alcohol habits of students compared to staff. This is not really new knowledge but more common knowledge. I suggest that the authors focus on what is new knowledge and important knowledge for designing interventions to students.

The relation between mental distress and alcohol habits is not really explored in details. Could further analysis be done in relation to age, sex and drinking habits?

*The following has been added to the Methods section (see p9)*

Several alcohol related problems were more likely to occur in students with moderate or high K6 scores compared to those with low K6 scores. These included emotional outbursts, doing less well in their studies, having trouble at home, having arguments, having sex about which they were unhappy at the time, having sex which they later regretted and becoming depressed if alcohol was unavailable. For staff, there were no differences in alcohol-related problems according to whether a person was in the low or moderate/high risk group.

*And see p 13 and 16*

The limitation of the convenient samle of 2 % of the students is discussed but still
represent a problem of generalization.

In the conclusions the authors find that the study supports the need for interventions that target misuse among students. This is not really a new knowledge but if the study could suggest means of reaching students this would have been in line with the aim. Instead the authors refer to work done in the US. Is there not any findings from the present study that could guide on how to design an intervention - in line with the aim of the study?

Response: The following has been added to p15:

Such interventions should focus on binge drinking and on the negative consequences of importance to students, such as the effect on grades. Poor knowledge of the NHMRC guidelines also points to the need to promote knowledge of the number of drinks on one occasion likely to reduce the risk of harm. The associations between psychological distress and risky drinking and negative consequences of alcohol consumption in students point to the need for interventions for alcohol misuse that aim to improve overall mental health literacy and promote more effective means of coping with psychological distress.

And to p16:

Such interventions should aim to target the negative aspects of binge drinking, improve knowledge of NHMRC guidelines, promote more effective means of coping with psychological distress and improve help-seeking for alcohol problems, particularly among young men.

Just before the Conclusions - online interventions are mentioned with no reference to the work of Kyp Kypris which I find a little bit odd.

Response: A.Prof Kypri is an author on one of the cited papers. Another reference to his work has been added.

I suggest that the Authors focuses on data concerning; knowledge of guidelines and drinking status, help seeking whishes, mental distress (measured by the K 6) and alcohol use. Especially the last items K6 and alcohol habits could be explored more in the analysis.

Minor Essential Revisions

Few references are made to earlier work in Australia by Kyp Kypri - prevalence of risk drinking has been published by him as far as I know?

Please see above.