

specificity of measurement. GRACE was piloted with 257 cancer genetics patients participating in a psychological trial. GRACE measures the degree of stress associated with 11 sources of stress and the use of up to eight coping strategies. Social support was used by 60%, 24% and 18% of the sample respectively in response to worries about the implications for family, eligibility for genetic testing and increased screening. There was less variance in positive appraisal (range 24%–48%). Emotional expression and planful problem-solving were rarely used (5%–16.2%; 10%–20% respectively). Participants appeared to engage in appropriate coping strategies for specific stressors. The completion rates for the matrix and specificity of responses provided suggests the GRACE may be an acceptable measurement tool.

#### **The CARIAD trial: A national trial of a self-help coping intervention within cancer genetics**

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Background: A self-help coping leaflet has been developed, teaching strategies to control intrusive worries whilst waiting for genetic information. Methods: An MRC Phase III randomised controlled trial of patients referred into the All-Wales Medical Genetics Service for cancer genetic risk assessment. Participants were randomised into intervention or control and completed psychological questionnaires upon referral (Q1), during the waiting period (Q2) and post-risk (Q3). Findings: 590 participants completed Q1, 429 completed Q2, and 280 completed Q3 (response rates of 43%, 74% and 70% respectively). Pilot results suggested the intervention reduces distress amongst those with high distress (Bennett et al., 2007). This trial will confirm the longer-term impact of the intervention. Discussion: The intervention engages people in their own healthcare and may offer an effective means of controlling worries in large patient populations facing health-related uncertainty. The trial is an example of best practice in RCT management within a multi-site service.

#### **Private drinking locations as an environmental risk factor for hazardous adolescent alcohol use**

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Hazardous alcohol use in adolescents has become a common problem. This study focuses on private peer group drinking settings as a contextual determinant of adolescent binge-drinking. In a cross-sectional survey a representative sample of 1516 15-year old students of all secondary schools in a semi-rural region in the Netherlands (Twente) participated. Adolescents visiting a private peer group setting have, compared to non-visitors, considerably higher average weekly alcohol consumption (15.2 vs. 7.4 glasses;  $p < .001$ ), more frequent heavy drinking ( $p < .001$ ) and drunkenness ( $p < .05$ ). Differences remain highly significant after controlling for age and education level. Additional multivariate analyses reveal that the setting remains an independent predictor next to proximal determinants like attitude, social norms, and self-efficacy. Adolescents visiting private settings to meet friends and drink alcohol are at increased risk of hazardous alcohol consumption. Apparently, these non-licensed drinking locations increase accessibility and availability of alcohol for under-aged adolescents.

#### **Psychological determinants of treatment results in adolescents with hypertension and diabetes**

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