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## 'Most promising' alcohol prevention programme tried with poor black US families

The Strengthening Families Program assessed by [UK analysts](#) as the most promising intervention over the longer-term for the primary prevention of alcohol misuse<sup>1</sup> has gained further support from a US trial among poor black families.

The original programme has been [extensively analysed](#) in Drug and Alcohol Findings.<sup>2</sup> As implemented in the [new study](#), over seven weekly sessions parallel groups of parents and their 11-year-old children from about ten families develop their understandings and skills led by parent and child trainers.<sup>3</sup> In the second half of each session parents and children come together to practice what they learned. Based on the counties they lived in, over 300 families were randomly assigned to be invited to participate in the programme or to carry on as usual and completed the study. Two years later 19% of programme-assigned children had started to drink compared to 29% of the controls, a significant difference.

A [companion paper](#) tested whether this was due to the intended effects on parenting and on the children's attitudes.<sup>4</sup> The programme's designers reasoned that enhanced parental monitoring and collaborative but clear rule making and implementation (in particular about alcohol) would curb growth in children's active intentions to drink. There remained the possibility that the children would still drink if the opportunity presented itself. To protect against this, the designers addressed the children themselves, aiming to foster less attractive images of young drinkers. As anticipated, it was through these mechanisms that the programme exerted its restraining effect on age-related increases in drinking.

In the context of previous work on other implementations of the programme, this is an encouraging demonstration of its potential. Confidence would have improved further if improvements in parenting had been directly observed rather than inferred from the parents' own accounts. With any such intervention, getting families to participate is a major obstacle. In this study recruitment was good but may have been influenced by the fact that each of these typically very poor families stood to earn \$300 from the research assessments. In normal practice the incentives might be less enticing. Even so just a third of the families invited to participate in the study ended up in the analyses, largely because many failed to respond to the initial invitation. This compromises the random allocation and means that at best the study is a test of the response of the minority of families prepared to fully participate in such a study.

The programme has been used in the UK with the organisers' believe good results.<sup>2</sup> A UK evaluation has [adapted the US materials](#) for British families and tested their impact. Families and workers thought the approach workable in a UK context.<sup>5</sup> A small non-randomised [pilot](#) established the feasibility of a larger study but was itself was unable to demonstrate an impact.<sup>6</sup> Benefits beyond substance use on [family relations and anti-social tendencies](#) may improve the chances of the programme attracting funding.<sup>7</sup> Whether high-risk families should be targeted or whether it should be provided across the board is a major practical issue.<sup>2</sup> Firm recommendations on wider UK implementation must await a larger randomised trial.

1 Foxcroft D.R. et al. [Primary prevention for alcohol misuse in young people](#). Cochrane Database of Systematic Reviews 2002, Issue 3.

2 Ashton M. [Doing it together strengthens families and helps prevent substance use](#). Drug and Alcohol Findings: 2004, issue 10.

3 **FEATURED STUDY** Brody G.H. et al. [The Strong African American Families Program: a cluster-randomized prevention trial of long-term effects and a mediational model](#). Journal of Consulting and Clinical Psychology: 2006 74(2), p. 356–366.

4 **FEATURED STUDY** Gerrard M. et al. [A theory-based dual-focus alcohol intervention for preadolescents: the Strong African American Families Program](#). Psychology of Addictive Behaviors: 2006, 20(2), p. 185–195.

5 Allen D. et al. [Cultural accommodation of the Strengthening Families Programme 10-14: UK phase I study](#). Health Education Research: 2007, 22(4), p. 547–560.

6 Allen D. et al. [Preventing alcohol and drug misuse in young people: adaptation and testing of the Strengthening Families Programme 10-14 \(SFP10-14\) for use in the United Kingdom](#). Oxford Brookes University, 2008.

7 Spoth R.L. et al. [Reducing adolescents' aggressive and hostile behaviors: randomized trial effects of a brief family intervention 4 years past baseline](#). Archives of Pediatric and Adolescent Medicine: 2000, 154(12), p. 1248-1257.

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