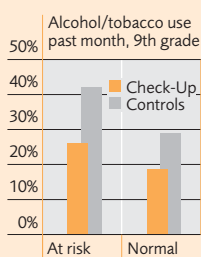


11.9 Family check-up builds on teachers' abilities to identify problem pupils

Findings Using teachers' ratings to target high-risk pupils, a study in the US city of Portland has shown that a few hours spent improving parental monitoring and management of their child's leisure-time activities can lead to later reductions in substance use. 672 sixth-grade (age 11–12) pupils in three schools serving high-crime areas were followed up to their first year in high school (age 14–15). In seventh grade, half had been randomly allocated to classes offered the services of a school-based family resource centre staffed by a parent consultant. For the pupils, they ran six weekly lessons promoting positive adolescent lifestyles, each with parent-child homework on family management skills. Data from these profiling typical family practices was fed back to parents in a newsletter. Throughout the consultant was available to parents and school staff. These activities paved the way for further work with high-risk pupils. Teachers' ratings of pupils on ten dimensions (such as being noisy in class or arguing) had previously been found the most cost-effective way to identify those who years later would use substances and attract police attention. Sixth-grade ratings were used the following year to offer a 'family check-up' to families of higher risk pupils. Its three sessions comprised an initial motivational interview, the family's videotaped interactions, and feedback of the consultant's assessment. Consultant and parents might then agree to further services.

Report 1 shows that the entire package significantly reduced the proportion of pupils who in their ninth grade had smoked or drunk in the previous month [▶ chart](#). **Report 2** focuses on 75 families with high-risk pupils who (out of 150) agreed to a seventh-grade family assessment. Half were randomly assigned to the offer of a family check-up which nearly 8 out of 10 completed. The offer was associated with improved parental monitoring which by the first year of high school accounted for a reduction in the number of pupils using alcohol, tobacco or cannabis. Over the study, the frequency of substance use by check-up pupils fell while it increased among controls.



In context In a later study, uptake of the family check-up was doubled, aided by an earlier home visit to introduce the consultant. This high participation rate may be due to the integration of family services within the schools, prior contact with children and parents, the fact that the intervention entailed just three sessions in the family's home, and its non-stigmatising, collaborative nature.

Question marks include an appreciable loss of families to the analyses due to missing data, and the fact that the main yardstick of success (any past-month substance use) is not in itself an indicator of problem use or other problem behaviour. However, the evidence is that delaying initiation of substance use in adolescence (as the intervention seems to have done) does reduce later problem use.

Practice implications The researchers argue that the focus for handling problem pupil behaviour should move from disciplinary measures to improving the child's functioning, and that embedding parenting services within the school could make an important contribution by reaching many more families than services based in health or welfare agencies. The short duration of the intervention (six hours with high-risk families) should facilitate widespread implementation. In Britain, the drive to integrate children's services across education, health and social care should increase the attractiveness of the model. A particularly valuable feature is the brief screening checklist used to identify potential problem pupils, enabling the targeting of proactive efforts to engage their families. A manual is available for the family check-up intervention [▶ Additional reading](#).

Featured studies 1 Dishion T.J. *et al.* "Preventing early adolescent substance use: a family-centered strategy for the public middle school." *Prevention Science*. 2002, 3(3), p. 191–201. **DS 2** Dishion T.J. *et al.* "The Family Check-Up with high-risk young adolescents: preventing early-onset substance use by parent monitoring." *Behavior Therapy*. 2003, 34(4), p. 553–571. **DS**

Additional reading Dishion T.J. *et al.* *Intervening in adolescent problem behavior: a family-centered approach*.

New York: The Guilford Press, 2003. **BS**

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