

9.10 Family programme improves on school lessons

Findings A 'leading' drug education curriculum barely improved on normal lessons, but supplementing this with evening family sessions led to 30% fewer children starting to drink in their early teens.

The [Strengthening Families Program](#) for 10–14-year-olds consists of seven two-hour evening sessions dealing with parenting issues, plus four boosters the following year. In the first hour parents and children learn in parallel then in the second practice these skills with each other. Sessions are highly interactive and (especially with parents) use videos to model scenarios and responses. Three group leaders each work with three or four families in groups of about ten families.

Grade seven pupils (age 12–13) and their families in 36 randomly allocated schools received either Life Skills Training lessons, these plus an offer of the parenting programme, or formed an 'education as usual' control group. Questionnaires completed by pupils a month after the initial sessions were used as the baseline from which to assess a year later how many had started to use alcohol, tobacco or cannabis. Only 38% of allocated families attended a parenting session but results are reported for all those offered the intervention. About 26% of their children started drinking compared to 35–37% at the other schools. Only with respect to cannabis did Life Skills Training on its own improve on the control condition.

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In context An authoritative British review saw Strengthening Families as the most promising, well researched alcohol prevention programme ▶ [Offcut p. 15, issue 6](#). Tested here on white rural families, its origins lie with the families of mainly black, drug using parents, and it has been designed to be suitable for US minority populations. The study was a particularly stringent test since the comparison curriculum was itself extensive and well constructed – and, unlike the evening sessions, it was experienced by nearly all the children. Contact between parents and children sharing classes and schools may have diffused the parenting programme's impact.

An earlier evaluation has now reported outcomes three and a half years after schools started an earlier version of the programme. Compared to 'education as usual', initiation of drinking and smoking and progression to regular use were substantially retarded, leading to estimates that Strengthening Families saves nearly ten times its costs by averting alcohol-related harm. Also reduced were aggressive or destructive juvenile behaviour. Thought to underlie these outcomes are demonstrable improvements in parenting and family atmosphere.

Practice implications That family interventions *can* work is now established. Remaining issues are to do with practicality, especially whether families will participate – in small rural communities, those who do may influence the entire school, but this cannot be assumed elsewhere. The Strengthening Families team found time constraints and scheduling conflicts to be the main obstacles rather than poverty or family dynamics. However, British experience is that the families in greatest need are the ones most likely to miss out. The US researchers recommend minimising time demands, maximising scheduling flexibility, personal contact, influential local supporters, incentives such as free meals, adapting the engagement process and programme to the local environment, and gaining the support of relevant agencies. Local coordinators can help overcome obstacles such as transport and childcare. British work emphasises assertively consulting and involving parents, treating drugs as one of several parenting issues, and the importance of the project leader ▶ [Additional reading](#).

Though resource-intensive, the fact that the programme's benefits could extend to youth crime create a wider potential support base. Even if not implemented in full, content and methodology may be transposable into a number of family and youth work settings.

Featured studies Spoth R.L. *et al.* "Longitudinal substance initiation outcomes for a universal preventive intervention combining family and school programs." *Psychology of Addictive Behaviors*: 2002, 16(2), p. 129–134. Copies: apply DrugScope.

Additional reading Velleman R. *et al.* [Taking the message home: involving parents in drugs prevention](#). DPAS, 2000. Copies: download from www.drugs.gov.uk.

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