

# Family Interventions to Prevent or Reduce Adolescent Risk Behavior

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# Goals of Presentation

- Summarize family influences that have been linked to adolescent risk behaviors (conduct problems, antisocial behavior, alcohol and substance use, sexual risk behavior)
- Describe the various types of family interventions that have been developed to impact these family influences
- Review evidence from randomized clinical trials (RCTs) for the efficacy of family interventions to reduce or prevent adolescent risk behaviors

# Family is a Primary Socializing Agent

- An expansive body of research has shown adolescent risk behavior is influenced by the following modifiable family influences:
  - Effective parenting (nurturing, supportive, with clear and consistent discipline) prevents coercive family processes in early childhood, reinforces prosocial behavior and facilitates child competencies that reduce risk for problem behavior in adolescence.
  - Parental monitoring and supervision prevents association with deviant peers, a primary pathway leading to onset and escalation of high risk behavior in adolescence.
  - High levels of family conflict and poor family communication skills disrupt parenting and family relations, reduce children's emotional security and social-emotional competencies, and reinforce their use of aggression and interpersonal hostility.
- Family members also exert influence through modeling of risk behaviors (deviance, substance use, aggression) and through shared genes.

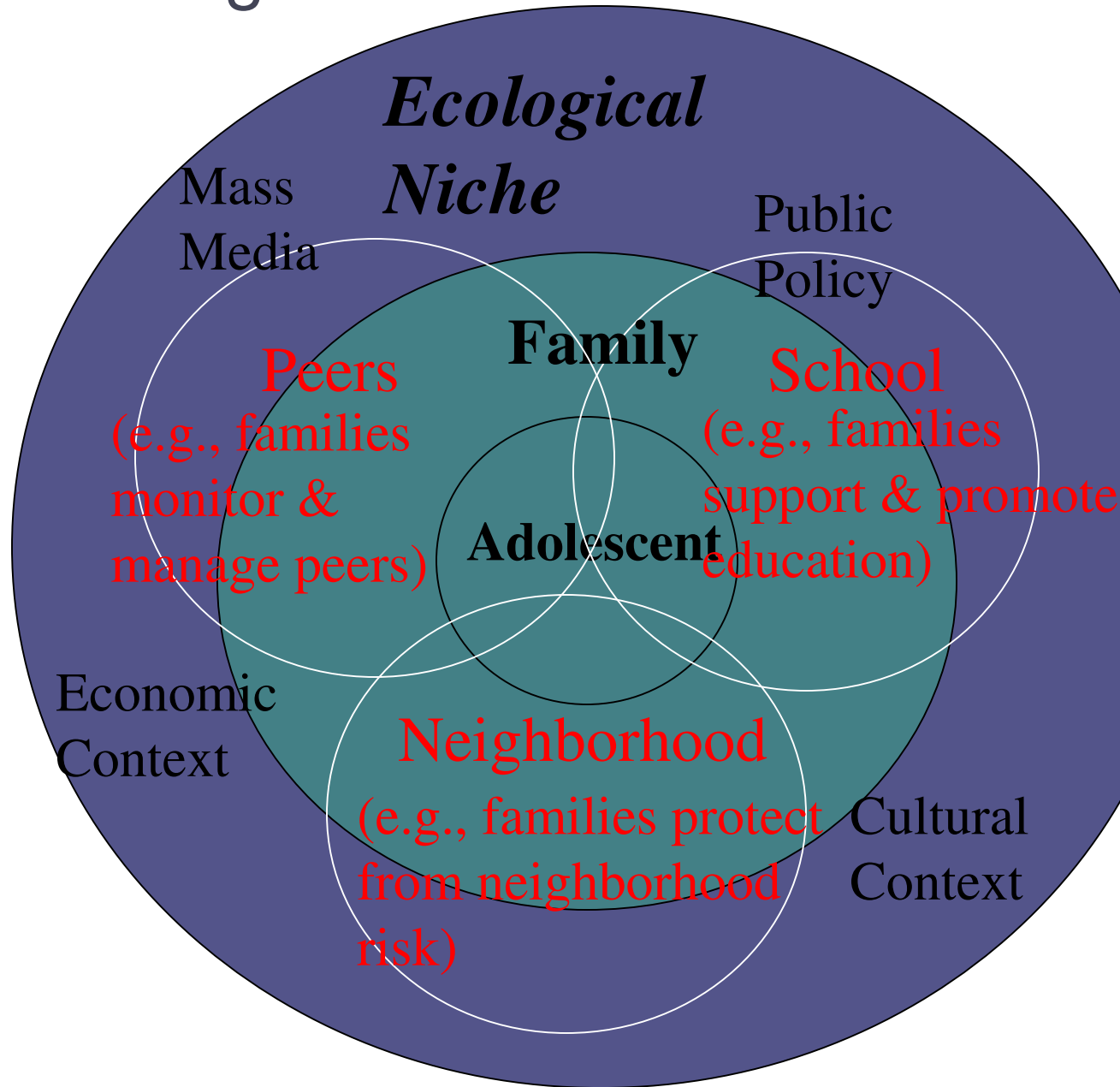
# Family Processes Impact a Wide Range of Adolescent Risk Behaviors

- Association with deviant peers (e.g., Dishion et al., 1991; Oxford et al., 2001)
- Onset and escalation in deviant behavior (e.g., Patterson & Stouthamer-Loeber, 1984; Dishion & Andrews, 1995)
- Early age substance use, higher rates of use, and substance use disorders (e.g., Brook et al., 1998; Chassin et al., 2002)
- Increased conflict in romantic relationships (e.g., Andrews et al., 2000; Conger et al., 2000)
- Academic performance and completion (e.g., Dumka et al., 2009; Hawkins et al., 1992)
- Sexual risk behaviors (e.g., Miller et al., 2001; Small & Luster, 1994; Chewing & Koningsveld, 1998; Whitbeck et al., 1999).

# Core Family Processes Have Similar Impact Across Diverse Cultural Groups

- These family processes have been validated as important influences in nearly every cultural group studied.
- When cultural differences are found, they typically reveal differences in magnitude (versus direction) of effects or differences in the way these core parenting and family constructs are displayed across groups.
- However, core family values, expectations, and goals do vary substantially among ethnic groups, and these differences must be taken into account when implementing family interventions.
- Diverse cultural groups also experience unique risks and protective family resources that can be addressed when using culturally tailored interventions.

# Ecological Transactional Framework



- Adolescent risk is influenced by peer, school, neighborhood, and broader cultural contexts.
- The family plays a central role in potentiating or protecting against risk within and across these contexts.
- Thus, family interventions can have pervasive effects across contexts, particularly when integrated with

# Family Processes Mediate Social Adversity

- Many social risk factors known to increase risk for problem behavior also have been shown to exert their negative effects by disrupting parenting and family processes
  - Poverty and Economic Hardship
  - Parental Divorce / Death
  - Parental Mental Illness
  - Parental Criminality / Incarceration

Consequently, parenting and family processes are the most common targets of interventions designed for populations at high risk due to their exposure to social adversity.

# Targeted to Receive Family Interventions

- **Developmental Timing**

- Family interventions target all phases of the family life cycle

- **Risk Status**

- Family interventions include Universal, Selective, and Indicated models
- Some programs target multiple levels (e.g., Triple P Parenting; Sanders, 2008)

- **Cultural Diversity**

- Interventions for culturally diverse groups include culturally broad and culture-specific approaches
- Culturally-broad can be implemented in multicultural settings and culture-specific allows for greater focus on unique risks and

# Developmental Stage Informs Family Intervention

Prenatal

Childhood

Adolescence

- Early interventions potentially have stronger effects because of the greater malleability of risk factors and greater potential for cascading effects over time.
- However, new risk and protective processes emerge at each developmental stage and offer new opportunities for developmentally focused interventions.
- Transition points are also important due to shifting contexts and increased potential for developmental “turning points.”

# Types of Family Interventions

- Home Visiting Programs for New Mothers
- Comprehensive Early Education (Preschool) Programs
- Parenting Programs
- Family Strengthening Interventions
- Family Disruption Interventions – divorce, foster care, bereavement
- Combined Family-School Interventions
- Multicomponent Interventions

# Early Childhood Interventions

## Home Visiting Programs for New Mothers

- Nurse or paraprofessional visits mother during pregnancy or just after birth and throughout first few years of the child's life
- Provide parenting education, information about child development, social support to parents, encouragement of positive parent-child interactions, access to a number of social and health services
- In a number of RCTs, mothers show improvements in pregnancy outcomes and maternal caregiving, and reduced physical abuse, aggression and harsh parenting
- Children showed reduced rates of antisocial behavior, an important precursor to numerous problem outcomes during adolescence.

# Nurse Family Partnerships (Olds et al., 1998) Long Term Effects at Age 15

- Among children of poor, unmarried women, NFP reduced:
  - Running away
  - Arrests
  - Convictions/violations of probation
  - Number of sex partners
  - Tobacco and alcohol use
  - Behavioral problems related to use of drugs and alcohol

# Early Childhood /Childhood Parenting Interventions

- Typically target parents of children at high risk for aggressive and antisocial behavior (e.g., those showing initial symptoms = “Selective Intervention”)
- Teach parents to:
  - use praise and rewards to reinforce desirable behavior
  - replace criticism and physical punishment with mild and consistent negative consequences for undesirable behavior
  - increase positive involvement with their children (playing, reading, listening)
- Several meta-analyses report positive effects to improve the quality of parent-child interactions and reduce child aggression, disruptive, and antisocial behavior

# The Incredible Years (Webster-Stratton et al., 2001)

- Extensively evaluated with a variety of ethnic groups:
  - Increases positive parenting and reduces harsh, critical parenting
  - Reduces diverse problem behaviors (aggression, disruptive social behavior)
- Three year follow-up showed improvements at home did not generalize to school or peer contexts for socially disadvantaged children.
  - Two new components were developed:
    - (1) ADVANCE parent program
    - (2) Child program (Dina Dinosaur Curriculum)
- Although there are no long-term studies extending to

# Combined Family-Elementary School Interventions

- Linking the Interests of Family and Teachers (LIFT)-  
Program to prevent the development of aggressive and  
antisocial behaviors in children within the elementary school  
setting (Eddy et al., 2000)
  - 1) Classroom-based child social skills training
  - 2) Playground Good Behavior Game (Ialongo et al.,  
2001)
  - 3) Parent management training
- RCT with 12 schools in high crime neighborhoods showed  
reduced levels of aggressive behavior, deviant peer  
involvement, arrest rates, alcohol and marijuana use in early

# Family Interventions in Early Adolescence

- Early adolescence is an important period to target adolescent risk behavior because it is during this time when many risk behaviors are first initiated or begin to escalate.
- Early adolescence also is associated with new developmental challenges that youth and families must navigate
  - Transition from elementary to middle or junior high
  - New stressors associated with puberty
  - Increased influence of peers and concerns about peer acceptance
  - Increased family conflict and renegotiation of parent-child relationship
  - Deviant peer group formation and greater need for monitoring
  - Early initiation of substance use and sexual activity

# Prevent Substance Use and Antisocial Behavior

- Strengthening Families Program (Spoth et al., 1999; 2001 )- “Universal” intervention targets parenting skills for parents of youth ages 10-14 to reduce risk for substance use; longer versions also available for high risk youth and families (“Selective”)
  - SFP reduced adolescent substance use, conduct problems, school-related problem behaviors, and affiliation with antisocial peers
  - More than 15 replications have found similar positive results with families in many different ethnic groups.
  - Both culturally adapted versions and the core version of SFP have been found effective with African-American, Hispanic, Asian, Pacific Islander, and First Nations families.

## Family Interventions Prevent Risky Sexual Behavior

- Meta-analysis of “youth-focused” prevention strategies aimed at delaying sexual intercourse and reducing risky sexual behavior found no evidence of beneficial effects (DiCenso et al., 2002).
- In contrast, numerous family interventions focused on improving parent-child communication, supportive parenting, and parental monitoring and limit setting have shown effects on these outcomes (e.g., Brody et al., 2006; Wolchik et al., 2002; Pantin et al., 2004 ).

### Strong African American Families Program (Murry et al., 2007 )

- Reduced early onset of substance use and sexual intercourse

### Familias Unidas (Pantin et al., 2004)

- Reduced behavior problems, illicit drug use, unprotected

# Broad Promotion and Prevention in Schools

Many risk behaviors have overlapping risk factors and respond well to broadly targeted promotion and prevention programs vs. programs focused more narrowly on antisocial behavior or substance use

- Raising Healthy Children (Catalano et al., 2003)

School-based intervention in grades 1 – 8 to improve classroom and family support for school bonding and prosocial behavior.

- RCT with multiethnic sample showed increased social competence, academic performance and commitment to school
- Long term effects on adolescent risk behavior include:
  - Reduced antisocial behavior, alcohol and marijuana use in middle school

# Middle School Intervention Targets Broad Promotion and Prevention Goals

Bridges to High School Program (Gonzales et al., 2004,2008).

Multicomponent interventions: 1)parenting intervention, 2) adolescent social-cognitive coping intervention, and 3) family strengthening program to promote academic engagement and prevent development of emotional and behavioral disorders and risky behavior following transition to middle school.

- RCT with Mexican American 7<sup>th</sup> graders showed improvements in parenting, family relations, adolescent coping, and academic engagement
- Two year follow-up showed increased grades and reduced conduct problems, internalizing symptoms, deviant peer association, substance use, and sexual debut in 9<sup>th</sup> grade
- Parenting (especially reduced harsh discipline) and school engagement accounted for long term effects on adolescent risk

# Interventions in Mid to Late Adolescence

- Negative trajectories are established and difficult to change at this stage.
- Interventions initiated in mid to late adolescence have been less successful at reducing adolescent risk behavior.

Multisystemic Therapy (Henggeler et al., 2002). One of most efficacious and widely disseminated family interventions; takes an ecologically comprehensive approach to intervene with youth with serious behavioral problems (“Indicated Intervention”).

- Intensive, individualized, home-based intervention aims to strengthen parenting and family relations, remove youth from deviant peers, enhance school /vocational performance, and develop support network for the family to maintain gains.
- MST reduced long-term rates of criminal offending, recidivism and

# Summary

- Meta-analyses and numerous RCTs have demonstrated strong empirical support for interventions aimed at improving parenting and family functioning.
- Family-focused interventions demonstrate effects on multiple problem behaviors, and produce lasting benefits.
- Positive effects have been shown for ethnically diverse families, including both culturally broad and culture-specific approaches.
- Multicomponent interventions that simultaneously address risk across contexts may be necessary at later developmental stages when trajectories are entrenched, and for youth in low income neighborhoods and families.
- When conducted, economic analyses consistently show benefits outweigh costs of family interventions.

# Recommendations

- Given evidence to support these conclusions, the IOM Committee on Prevention (O'Connell, Boat, & Warner, 2009) offered strong support for concerted dissemination to transport and implement family interventions.
- Research on dissemination and implementation is needed to determine how family interventions can be integrated and sustained within natural service delivery settings (e.g., schools, community organizations).
- Alternative modalities of delivery (CD-ROM, internet, media) may be effective to increase access and public health impact

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