



The Role of Family in Substance Use Prevention

BY

DR. OLUSEYI ODEWALE

FAMILY PREVENTION SPECIALIST

+2348024994368

seyilodewale@gmail.com

SESSION OVERVIEW

- ▶ **Family Dynamics and Drug Use**
- ▶ **Recognizing Risk and Protective Factors**
- ▶ **Early Detection and Intervention**
- ▶ **Overview of Evidence-Based Family Prevention Programs**
- ▶ **Strengthening Parenting Skills for Prevention**
- ▶ **Support for Drug Using Family Members**

INTRODUCTION

- ▶ The family is the foundation of a society, and it plays a vital role in shaping the behaviour and attitudes of its members. Family is the first line of defence when it comes to preventing substance use.
- ▶ The family is flexibly defined as those that are meaningfully bonded , whether or not they have a legal or genetic bond.
- ▶ This could include biological siblings, parents, or grandparents, aunts, cousins. It could include those family friends, step parents, common law relatives, and caretakers(UNODC, 2003).

INTRODUCTION CONTD

- ▶ The family can be a risk /protective factor for adolescent substance use and other problem behaviours.
- ▶ While genetic, temperamental and environmental factors all contribute to shaping child and youth development, family dynamics play a very important role.
- ▶ In particular, it is clear from research that competent parenting is a powerful protective factor.
- ▶ Family members are the primary influencers in a child's life, and their behaviors, attitudes, and values shape the child's perceptions and decisions.

The Role of the Family in Socializing Youth

- ▶ Incorporating attitudes, values and beliefs
- ▶ Developing social competence
- ▶ Adopting prosocial behaviours
- ▶ Inhibiting antisocial behaviours
- ▶ Compliance for conventional behaviour

Domains of socialization

- ▶ Protection
- ▶ Mutual reciprocity
- ▶ Control
- ▶ Guided learning
- ▶ Group participation

Family Dynamics and Drug Use

- ▶ Healthy Relationships:
 - ▶ Families with strong emotional connections tend to provide a supportive environment where members feel valued and understood, reducing the likelihood of turning to drugs for solace.
- ▶ Parental Role Modeling:
 - ▶ Parents who demonstrate healthy behaviors, such as stress management and avoiding substance use, set a positive example for their children.
- ▶ Family Structure:
 - ▶ A stable family structure, where roles and responsibilities are clear, fosters a sense of security and reduces vulnerability to drug-related influences.

RECOGNIZING RISK AND PROTECTIVE FACTORS

RISK FACTORS

- Family history of substance use
- Family conflict or breakdown/chaotic home environment
- Lack of supervision or inconsistent discipline
- Poor communication and relationships
- Lack of bonding and insecure relationship with parents
- Lack of a significant relationship with a caring adult
- Parents or siblings who abuse substances, suffer from mental illness
- Involvement in criminal behaviour
- Social isolation.

PROTECTIVE FACTORS

- Clear family values and expectations around drug use.
- Strong emotional bonds and parental involvement in children's lives.
- Positive communication and conflict resolution
- Emotional support and empathy
- Role modeling
- Parental involvement and supervision
- Healthy coping mechanisms and stress management
- Encouraging healthy activities and hobbies
- Seeking professional help when needed.

Early Detection and Intervention

- ▶ Recognizing Warning Signs:
- ▶ Behavioral changes, such as withdrawal, academic decline, or association with new peer groups, may indicate potential substance use.
- ▶ Appropriate Interventions:
- ▶ Families can intervene by engaging in honest conversations, seeking professional guidance, and involving the child in constructive activities.
- ▶ Balancing Discipline and Support:
- ▶ Addressing drug use without alienating the individual by showing empathy and focusing on solutions.

Evidence-Based Interventions

(for family drug prevention)

The International Standards on Drug Use Prevention

Developmental framework

- Infancy and early childhood (0-5 years)
- Middle childhood (6-10 years)
- Early adolescence (11-15 years)
- Adolescence (15-18) and adulthood (19years - Adulthood)

Target Population

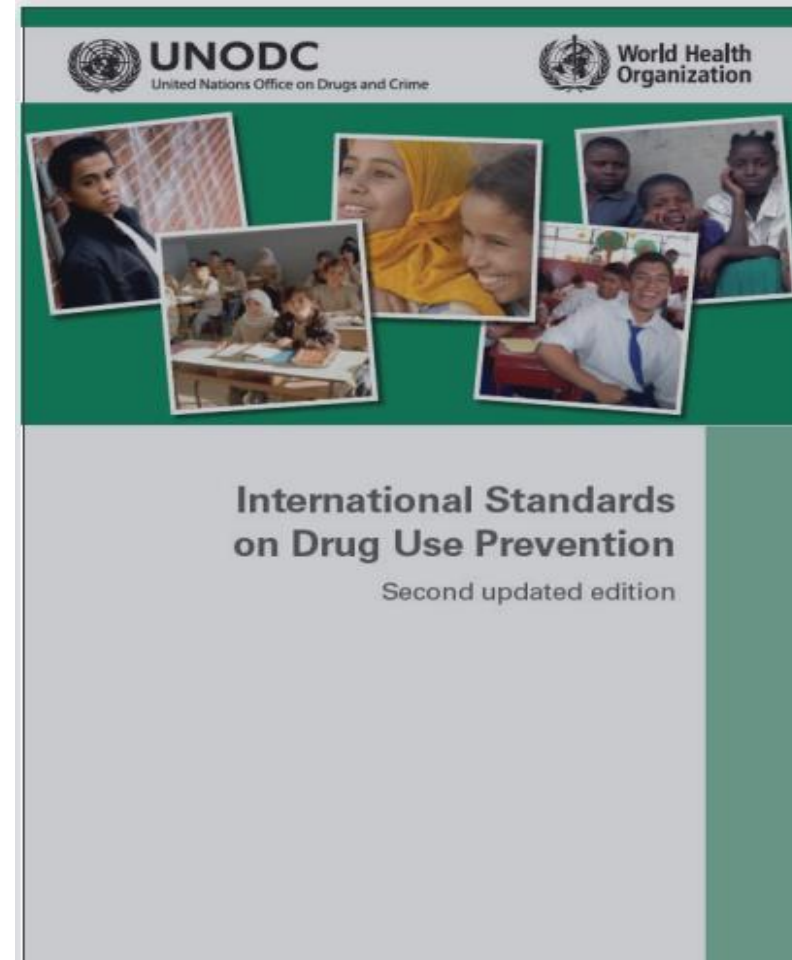
- Universal
- Selective
- Indicated

Setting

- Family
- School
- Workplace
- Community

Evidence-based Interventions and Polices

Evidence Based Practice (EBP) is the use of systematic decision-making processes or provision of services which have been shown, through available scientific evidence, to consistently improve measurable client outcomes. Instead of tradition, gut reaction or single observations as the basis of decision-making, EBP relies on data collected through experimental research and accounts for individual client characteristics and clinician expertise.”



Evidence- Based Programs for Families

| Type of Program | Target Ages | Example Program |
|--|---|---|
| Home Visitation | Pre-natal, Infant, Early Childhood | Nurse Family Partnership Parents as Teachers |
| Parenting Skills | Infant, Childhood, Adolescence | Incredible Years Triple P Guiding Good Choices |
| Family Skills | Early Childhood, Childhood, Adolescence | DARE to be You for Families with Children 2-5, Strengthening Families Program for Parents and Youth 10-14 Families and Schools Together |
| Intensive Family Intervention/ Family Therapy | Childhood, Adolescence | Multisystemic Therapy Multidimensional Family Therapy |

1. Nurse-Family Partnership

GOALS

- ▶ To promote mothers' health and well-being by doing things like helping them stop smoking cigarettes, helping to stop drinking alcohol while they are pregnant, and helping them lose weight,
- ▶ To promote child health by encouraging mothers to form caring and nurturing relationships with their newborns, and
- ▶ To help mothers change their own life-course development by setting goals for their future, completing or getting more education and planning for their own and for their family's future

Content

- ▶ Varies based on mother's needs, but topics covered include:
 - ▶ Personal Health
 - ▶ Reduce smoking/drinking
 - ▶ Monitor complications
 - ▶ Environmental Health
 - ▶ Housing/neighborhood/support
 - ▶ Maternal Role
 - ▶ Sensitive Caregiving
 - ▶ Life-course Development
 - ▶ Employment, education, marriage, future children

2. The Incredible Years Programme

BASIC Parent Program

- ▶ **Baby (0-12 months old; 9-12 sessions)**
- ▶ **Toddler (1-3 years old; 12-13 sessions)**
- ▶ **Preschool (3-6 years ; 18-20 sessions)**
- ▶ **School age (6-12 years; 12-16+ sessions)**

3. Dare To Be You (2-5 years)



DARE to be You Program for Parents and Youth 2-5 Years of Age

- ▶ Program Components
 - ▶ Parents and youth meet together for 10 (minimum) weekly workshops.
 - ▶ Weekly workshops consist of a
 - ▶ Family meal
 - ▶ Two hours of activities including
 - ▶ One parent/child activity/week
 - ▶ Parents and Youth participate in Simultaneous, developmentally appropriate sessions

DTBY 2-5

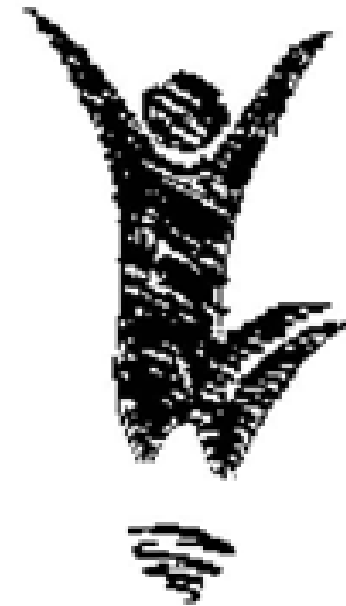
Target Factors

▶ FOR PARENTS

- ▶ Increase Parental Efficacy
- ▶ Increase Nurturing Parenting Practices
- ▶ Increase Limit Setting

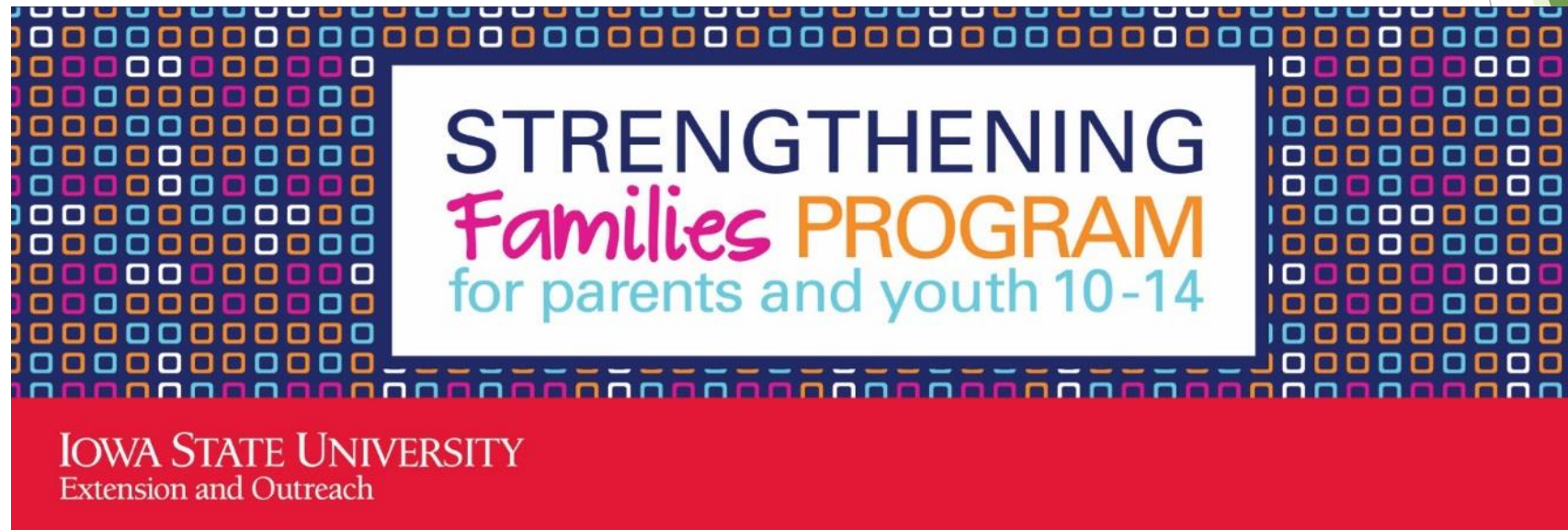
▶ FOR YOUTH

- ▶ Increase Social Skills/ School Readiness
- ▶ Decrease Oppositional Behaviors
- ▶ Increase Autonomy
- ▶ Self Management



Miller-Heyl, J., MacPhee, D., & Fritz, J. (1998). DARE to be You: A family-support, early prevention program. *Journal of Primary Prevention*, 18, 257-285; Miller-Heyl, J., MacPhee, D., & Fritz, J. (2001). *DARE to be You: A systems approach to the early prevention of problem behaviors*. New York: Kluwer/Plenum.

4. SFP 10-14



Strengthening Families Program: For Parents and Youth 10-14

Strengthening Families Program: For Parents and Youth 10-14

| TARGET GROUP: | TOPICS FOR PARENTS | TOPICS FOR YOUTH | RESEARCH FINDINGS |
|---|--|--|---|
| <p>Target Group</p> <ul style="list-style-type: none"> Fathers, Mothers, and Teenagers/Pre-teens Not intended for high risk families <p>Sessions:</p> <ul style="list-style-type: none"> 7 two-hour sessions for parents and teenagers 4 Booster sessions | <p>Topics in Parent Sessions 1-7</p> <ul style="list-style-type: none"> Using Love and Limits Making House Rules Encouraging Good Behavior Using Consequences Building Bridges Protecting Against Substance Use Using Community Resources | <p>Topics in Youth Sessions 1-7</p> <ul style="list-style-type: none"> Having Goals and Dreams Appreciating Parents Dealing with Stress Following Rules Handling Peer Pressure I Handling Peer Pressure II Reaching Out To Others | <p>Significant Interventions effects for:</p> <ul style="list-style-type: none"> Alcohol Onset Alcohol Use Lifetime Drunkenness Cigarette Use Marijuana Use Aggressive Behavior Intervention Targeted Parenting Behaviors (Mediators) |

Multisystemic Programs

Multisystemic Therapy

Target Group

- ▶ Juvenile offenders and youth with serious behavior problems age 12-17 and their families

Sessions:

- ▶ Treatment ranges from three to five months
 - ▶ Intensity of treatment varies according to clinical need (from 2 – 15 hours per week)



Multisystemic Therapy

Content

- ▶ Individualized treatment but Intervention strategies may include
 - ▶ Structural and Strategic Family Therapies
 - ▶ Parent Management Training
 - ▶ Behavioral Therapy
 - ▶ Cognitive-behavioral Therapy

Content

9 Guiding Principles of Treatment

1. Finding the fit
2. Positive and strength-focused
3. Increasing responsibility
4. Present-focused, action oriented and well-defined
5. Targeting sequences
6. Developmentally appropriate
7. Continuous effort
8. Evaluation and accountability
9. Generalization

Strengthening Parenting Skills for Prevention

- ▶ Open Communication:
 - ▶ Creating a safe environment where family members, especially children, can express their thoughts and concerns without fear of judgment or punishment.
- ▶ Active Listening:
 - ▶ Learning to truly hear what is being said, both verbally and nonverbally, helps address concerns early and strengthens trust. □
- ▶ Clear Rules and Boundaries:
 - ▶ Establishing explicit guidelines about drug use and ensuring consistent consequences for breaking these rules.
- ▶ Positive Reinforcement:
 - ▶ Recognizing and rewarding good behavior encourages children to make responsible choices.
- ▶ Building Self-Esteem:
 - ▶ Encouraging children's strengths and supporting their goals to help them resist peer pressure.

Support for Drug Using Family Members

- ▶ Stay calm: Avoid accusations or confrontations
- ▶ Educate yourself
- ▶ Express concern
- ▶ Be patient
- ▶ Communicate openly: Express your concerns and listen to the family member's response
- ▶ Encourage professional help: Consult with a counsellor or addiction specialist
- ▶ Support their recovery
- ▶ Establish boundaries
- ▶ Avoid enabling
- ▶ Prioritize self-care

*“Family is not an
important thing,
it’s everything.”*

– Michael J. Fox

References

- ▶ Colombo Plan Drug Advisory Programme Training Series: Universal Prevention Curriculum for Substance Use Prevention (UPC) Practitioners Series (2020)
- ▶ The International Standards on Drug Use Prevention, UNODC (2018)
- ▶ UNODC (2010). COmpilation of Evidence-Based Family Skills Training Programs, United Nations Office on Drugs and Crime, Vienna, Austria
- ▶ Velleman RD, Templeton LJ, Copello AG.(2005). The role of the family in preventing and intervening with substance use and misuse: a comprehensive review of family interventions, with a focus on young people. Drug Alcohol Rev. ;24(2):93-109. doi: 10.1080/09595230500167478. PMID: 16076580.
- ▶ Watters, N & Byrne, D (2004). The role of family support services in drug prevention: a National Advisory Committee on Drugs: report

Thank you for Listening



THANK YOU