

# **Family and Parenting Interventions**

## **Background and History of Family and Parenting Interventions**

Parenting practices and familial support have been significantly correlated with positive adjustment in children and adolescents, and has been indirectly supported as a protective factor for behavioral disorders and substance abuse. Conversely, dysfunctional parenting practices have been associated with behavioral and conduct disorders, and are strong predictors of delinquent behavior (Ralph et al, 1-2). Matthew Sanders, Director of the Parenting and Family Support Centre at the University of Queensland in Brisbane, Australia notes that “evidence to support the importance of good parenting in the aetiology, maintenance, treatment and prevention of childhood problems is substantial” he goes on to say “Of all the potentially modifiable risk and protective factors that can affect children’s development, improving parenting skills and confidence holds the greatest potential in improving children’s health status and well being and in reducing the risk of developing serious mental health problems” (Sanders, 1).

Increasing researchers are trying to develop new strategies of care, based on their knowledge of this relationship between family characteristics and the mental health and behavioral outcomes of youth, to try not only to find more innovative and effective ways to treat youth, but also to prevent youth mental health and behavioral problems before they start. Often service providers combine facets of family skills training and behavioral family therapy, to try to meet the individual needs of families. These interventions are successful because they do not focus specifically on either the parents or the children, but rather try to identify all factors contributing to the dysfunction within the family and then involve and treat the family as a whole unit. They often combine elements of skills training and behavioral training (which have been proven through research and evaluation to be most effective when used together). Furthermore, not only are the therapies most successful when combined, but they have also been empirically established to be most effective when used with both the parents and the child.

Family and parenting interventions have been proven useful in the prevention and treatment of a variety of issues related to youth including, but not limited to, mental health issues, substance abuse, suicide, family functioning, behavioral and conduct disorders. Family-based interventions for the use in treatment and prevention of substance abuse have been found “when compared to non-family modes of adolescent outpatient treatment” to “be the superior treatment approach” (Austin et al, 68). A recent Australian study found that parent education programs were correlated with reduced risk factor for youth suicide, not only in parents who participated directly in the study, but also with those participating indirectly ( Toumbourou and Gregg, 280-284). Not only have many family-strengthening or parent intervention programs been shown effective through scientific evaluation, but many programs have also been shown to have

effect that could be sustained over times, particularly those interventions that targeted very young children (Caspé and Lopez, 6).

### Behavioral Family Interventions

The development of behavioral family interventions was prompted by Skinner's theoretical analysis of the contingencies involved in parent-child interaction. This theory has been supported and elaborated on by numerous studies and asserts that "parents influence children's behavior through positively reinforcing consequences, such as attention, praise, and the delivery of rewards such as treats, privileges and time with a parent" (Taylor and Biglan, 42). Conversely, the theory also suggests that aggressive and defiant behavior can also be reinforced by parents.

The core of behavioral parent training is to train parents in to recognize which parenting techniques involve positive-reinforcement, such as praise, and which provide negative techniques, such as the removal of a parental command in response to whining or complain by the child. Parents are taught how to use play and other activities to reinforce appropriate behavior and assisted in reducing unnecessary commands; clarify limits that are set, and increasing consistency of follow-through in enforcing the limits that are set. For behavioral parent training to be successful they must include specific training for parents in constructive parenting strategies and effective, positive discipline techniques, such as removal of privileges (43.)

Parenting training is only one of facets of family intervention often employed. Because factors such as parental mental well-being, poverty, social isolation, domestic violence, and others effect the behaviors of both parents and children it is often necessary to address them within the contest of the family intervention to facilitate improvement. For this reason, interventions can contain components on personal adjustment, marital or family relations, parent training, child management training, interventions can also focus on assisting with social problems like poverty or lack of medical care. This integrated approach to addressing multiple issues as part of a whole treatment have been proven to enhance the overall benefits of the intervention and to be more effective than focusing on parenting skills alone (44). Furthermore, evidence suggest that family interventions are particularly helpful for families with children with behavior problems or conduct problems (46) as well as families with children diagnosed with autism, developmental disabilities, anxiety disorders, obesity, eating disorders, and sleeping disorders. Additionally, behavioral family interventions have been proven useful in divorced and blended families, socially isolated families, families with history of substance use and/or physical abuse, and the training of foster parents and residential care staff (47).

### Functional Family Therapy

Functional Family Therapy (FFT) is a short term intervention, averaging 8 to 12 sessions. In most cases, sessions are spread over a 3-month period. The target population is at-risk youth, ages 11 to 18 and their families. The program draws on a multisystemic perspective in its family-based prevention and intervention efforts. Numerous studies suggest that FFT reduces treatment costs to levels well below those of traditional services and other interventions. It has also been linked to the prevention of delinquency and reduced recidivism among juvenile delinquents. FFT has also been used as part of a diversion or probation program and in reentry program for youth transitioning from an institutional setting.

Functional Family Therapy focuses on the treatment system, family and individual functioning, and works to develop family member's strengths to provide them with the confidence that they are able to improve their situation. The purpose is to use FFT as a platform for change that extends beyond the therapy, with the long term goal of self-sufficiency. FFT is a family-focused approach to problems, such as, juvenile delinquency, aggression, and substance use. FFT is set up in phases with specific goals for each family interaction, during each phase the therapist adjust and adapt the goals to the context of the current situation, within the context of the overall goal of the intervention. This flexibility within the systematic framework of the program "ensures treatment fidelity while remaining respectful of individual families and cultures and unique community needs" (7).

### Family-Strengthening Interventions

The Harvard Family Research Project has conducted substantial research and evaluation on family-strengthening interventions. Their research indicates that family-strengthening programs can positively target and affect the following outcomes:

- Increase family functioning & cohesion
- Increase communication
- Increase parents self-confidence
- Decrease levels of parental depression
- Strengthen the parent-child bond
- Increase level of parental involvement
- Improve parent-child relationships
- Increased positive child-rearing practices
- Increased parental ability to manage children's behavior
- Increased family involvement in learning both at home and at school
- Positive effects on children's academic progress
- Increase children's social-emotional development
- Reduced conduct and emotional problems in youth
- Decrease aggressive behavior and substance use
- Improve children's self-control and social competence
- Reduced special education referrals and absenteeism

They also identified the following characteristics of successful family-strengthening programs:

1. Provide opportunity for bonding between parents and children through interaction and developmentally appropriate activities such as:
  - Sharing a meal
  - Doing homework together
  - Playing Games or Solving Puzzles
  - Creating Artwork or Crafts
  - Participating in Sports
  - Sharing family stories and histories
  - Family trips to museums, parks, libraries etc.
  
2. Focus on reciting parenting and maintaining family participation in a variety of ways like:
  - Recruiting families through face-to-face visits
  - Enlist program participants to assist with recruiting other families
  - Schedule programs during evenings and weekends to accommodate participants schedules
  - Do outreach work in the community
  - Provide essentials such as transportation, infant care and food for meals
  - Educate your staff on emotional intelligence and cultural sensitivity
  - Research indicates that the relationship between families and workers improved when the two are similar in racial, SES and cultural backgrounds
  
3. Prepare Staff to implement the program and engage families effectively by:
  - Discuss hypothetical cases from the point of view of different family members to prepare workers on the different perspectives and situations they will encounter
  - Have staff evaluate their beliefs and assumptions about the population they service
  - Foster and develop communication skills in your staff
  - Provide staff opportunities to assist and learn from each other experiences with families
  - Prepare staff for their work by making sure they are up-to-date on current research on families and understand the principles and purpose behind the program

The following is a list of programs included in the Harvard Family Research Project Study:

- Families and Schools Together (FAST) – The FAST program is 8 weeks in length and is held in school and community locations. Families meet in groups of 8 to 12 individuals for 3 hour sessions. The meetings consist of quality parent-child time, a shared meal, structured family communication building activities, and separate child play and parent discussion. The program is geared towards 5 to 12 year old children at risk for problem behavior. Evaluators found that families in the intervention group who participated in FAST were more likely than control families to seek substance abuse treatment & mental health counseling. They were also more likely to pursue adult education, volunteer in the community or become community leaders. Evaluators attributed these results in part to the creation of a support network for parents during and after the program. The FAST program also maintains some of the highest rates of recruitment and retention. Their outreach strategy incorporates efforts to recruit entire families by visiting with parents at times and locations convenient to them; they provide transportation to the program and infant care to encourage families to attend.
- Guiding Good Choices Program – The Guiding Good Choices program is a multimedia program, geared at families with children between ages 8 and 13. The program is comprised of 2 hour long sessions, held over the period of 5 weeks. Families are provided a written parenting guide and shown videos that depict vignettes of parenting skills are viewed along with opportunity to discuss and apply the skills in the session. Evaluators of this program found that the program reduced substance use and improved peer relations and attitudes amongst youth and increased parental warmth and sensitivity in regards to their children.
- High Scope – High Scope was developed in 1962. It is a pre-school program for 3 to 5 year old children that entailed a 2.5 hour long classroom session daily through the preschool and a 1.5 hour long home visit one afternoon each week. Research showed the program was associated with an increased amount of time spent on homework and increased enjoyment of school, as well as increased parental hope for post-secondary education for their children. Long term longitudinal data indicates participants showed increased social and emotional skills in adulthood, were less likely to have been arrested, and were more likely to have stable marriages and increased wealth when compared to control groups.
- The Incredible Years Program – The Incredible Years Program was designed to provide training for parents of toddlers and preschoolers. It is generally 8 to 9 weeks in length and was designed to increase Head Start parent's positive and non-punitive parenting skills. Sessions are delivered by a trained leader who facilitates discussions and activities using three main curricula BASIC –encompasses basic parenting skills, ADVANCE –

deals with parental communication and anger management and SCHOOL – which assist parents in promoting their children’s academic skills. Parents enrolled in the program were found to use fewer critical statements, less commands and fewer punitive discipline strategies than parents in the control group. Children in the program showed a decrease in conduct disorder and an increase in school readiness and conflict management schools. These results were also true a year later at follow-up.

- Fast Track – Fast Track is a comprehensive intervention for young children at high risk for long-term antisocial behavior that consist of 7 integrated intervention programs: school-based, parent groups, child social skill development groups, parent-child bonding time, home visiting, child peer paring, and academic tutoring. Parent, social skill and tutoring groups met one a week on a selective basis. The program is geared toward 5 to 16 year old youth who are at risk for conduct disorder. Children participating in the Fast Track program exhibited fewer aggressive behaviors, both in the classroom and at home, and were less likely to be referred to special education classrooms or to demonstrate serious conduct problems. Parents in the program showed a reduction in improper discipline techniques.
- Positive Action – The Positive Action Program is a comprehensive school-wide intervention for families of 4 to 18 year olds in a school-based character development program. It has 5 main components, a pre-K through 12 classroom curriculums, parent activities, a community involvement program and separate lesson kits designed for school principles, counselors and families that contain prepared weekly lessons that parallel each other. This program has been associated with increased parent-child communication and participation in school activities, as well as, reduced absenteeism and discipline issues and increased academic achievement among youth.
- Project Achieve - A school reform program with 7 components that involved families and established a parent drop-in center and provided parenting workshops. Designed for families with 3 to 14 year olds, the program emphasized home and school collaboration through training parents to work at home with children, educating parents on school programs, and initiating a component that brought parents into their children’s classrooms. Results showed increased parental involvement and increased parental knowledge of their children’s classroom activities and studies. The program was also associated with a reduction in special education referrals and grade retentions and an improvement of academic scores and overall behavior in youth.

- The Strengthening Families Program (SFP) – This program was designed for families with children between the ages of 3 and 17 years of age who are at risk for problem behavior. It is comprised of fourteen skill training sessions that are three hours in length per session. These sessions include pre-class activities where parents and children share a meal or do homework together. Next parents participate in a parenting skill classes while the children attend separate classes that focuses on social and emotional regulation skills. After their classes the parents and children come back together for family activity time. SFP has been linked to an increase in parent-child bond and reduced social isolation of families and reduced parental depression. It has also been shown to increase family cohesion and reduce school problems and conduct disorders in youth.
- Dare to be You - A family workshop series held in schools and other locations within the community. The program duration is 10 to 12 weeks and provides parents and children the opportunity for meaningful interaction and includes training components for teachers, community members, and early childhood care providers on working with families. The program, which targets, families with 2 to 5 year olds, demonstrated a reduction in oppositional behavior in children and improved child rearing skills, reduced use of harsh discipline and an overall increase in satisfaction in social support networks among parents.

### Resources

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