Strengthening Families Through Community-based Programs: Background and Plans for a Research Study

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Background/Purpose

• Military families (both National Guard/Reserve and Active Duty) face many challenges, especially related to deployments.
• Much less research conducted on military families than on service members.
• Our research will focus on families and a program to build a variety of skills and ultimately resilience.
• To be successful, we need:
  • A proven delivery system
  • An evidenced-based intervention (EBI)
Applying the Proven PROSPER Model to NC NGR/AD Families

• Published findings on the PROSPER Model (> 70 articles)
  – Effective mobilization and maintenance of community teams
  – Programs implemented with sustained high levels of quality
  – Indications that model is more cost efficient than regular programming
  – Reductions in negative peer influences
  – Positive proximal outcome effects (family relationships, parenting, and youth skill outcomes)
  – Reduced youth problem behavior outcomes (both substance misuse and conduct problems) up through 6.5 years past baseline
Rationale for Application to NGR/AD Families

• Strong families critical to the strength and stability of the NGR/AD.
• Children of service members have risk factors/family challenges related to parental deployment/readjustments.
• Children report significantly higher rates of substance misuse, school, family- and peer-related difficulties than children of nonmilitary parents.
• Limited application of family-focused EBIs for prevention of substance misuse to military dependents.
Background & Rationale: Original PROSPER Partnership Sustainability Model

- **Local Community Teams**
  - Extension Agent, Public School Staff, Social Service Agency Representatives, Parent/Youth Representatives

- **Prevention Coordinator Team**
  - Extension Prevention Coordinators

- **University/State-Level Team**
  - University Researchers, Extension Program Directors

- **Primary Task:** Sustained, quality implementation of EBIs selected from a menu
Key PROSPER Partnership Randomized Control Trial Findings

- Effective mobilization of community teams.
- Community teams sustained programming efforts for ten years.
- Community teams achieved high recruitment rates for family program participation, compared to traditional approaches.
- Reductions in negative peer influences indicated by social network analyses.
- All programs implemented with high levels of quality.
- Positive effects for strengthening family relationships, parenting, and youth skill outcomes.
- Youth score significantly lower on a range of problem behavior outcomes (both substance misuse and conduct problems).
- Indications that it is more cost efficient than regular programming; also, that it is cost effective and cost beneficial.

The Family Program

- Strengthening Families Program: For Parents and Youth 10-14
  - Program is evidence based.
  - Designed for adult caregivers and youth.
  - Uses skill-building approach.
  - Seven weekly two-hour sessions.
  - Includes meal and childcare for younger youth.
  - Wide range of positive outcomes for youth and families.

- For this study, the SFP 10-14 will be adapted for NGR/AD families and delivered by local teams.
Program Goals

A parent, youth, and family skills-building curriculum designed to:

– Prevent teen substance abuse and other behavior problems.

– Strengthen parenting skills.

– Build family strengths.
Program Structure

An out-of-school program for families of middle school aged students:

- Group sizes of 8 to 12 families is optimal
- 7 two-hour sessions for parents and youth
- 1 session is offered each week
- Three program facilitators are needed
  - 1 facilitator for the parent sessions and 2 facilitators for the youth sessions.
  - The three facilitators work together during the family sessions.
Session Content

This scientifically tested curriculum:

– helps parents learn nurturing skills that support their children.

– teaches parents how to effectively discipline and guide their youth.

– gives youth a healthy future orientation and an increased appreciation of their parents.

– teaches youth skills for dealing with stress and peer pressure.
Theoretical Foundations: The Role of Protective Factors

Increasing the following protective factors leads to positive youth outcomes:

- Social competencies and problem-solving skills.
- Self-efficacy.
- Healthy/conventional beliefs and clear standards.
- Perception of social support from adults and peers.
- Effective parenting.
- Good relationships with parents.
- Bonding or attachment to family.
- Opportunities for pro-social family involvement.
- Having a stable family.
- High expectations.
Theoretical Foundations: Decreasing Risk Factors

The Strengthening Families Program 10–14 addresses the following risk factors:

– Parental demanding/rejecting behavior.
– Poor communication skills in the family.
– Harsh and inappropriate discipline.
– Poor child/parent relationship.
– Poor parental monitoring.
– Youth antisocial behaviors.
– Family conflict.
– Negative peer influence.
Evaluation of: Strengthening Families Program 10-14

Evaluation by the Institute for Social and Behavioral Research at Iowa State University found:

– Lower rates of alcohol, tobacco, marijuana, and meth use among participating youth.

– Fewer conduct problems in school.

– Parents increased skills in general child management.

– Parents showed an increase in positive feelings towards their child.
Program Recognition

The Strengthening Families Program for Parents and Youth 10-14 has been recognized by:

– National Institute on Drug Abuse.
– Blueprints for Violence Prevention.
– Substance Abuse and Mental Health Services Administration.
– U.S. Department of Education.
Evidence that PROSPER works to produce positive parenting outcomes

Parents who use more effective management strategies:

- More consistent discipline.
- Less harsh discipline.
- More warmth in the parent-child relationship.
- More frequent parent-child activities.
- Better family cohesion.

Evidence that PROSPER works to produce positive youth outcomes

- Better at problem solving.
- Less likely to hang out with classmates that get into trouble.
- More likely to refuse offers of alcohol and other drugs.
- Less likely to believe that substance use has positive effects.
- More likely to delay initiation of substance use, or to use less frequently.
- Less likely to engage in problem behaviors including conduct problems.
- Positive effects on peer networks.

Substance use outcomes

Percent of students reporting *past year* marijuana use

![Bar chart showing the percentage of students reporting past year marijuana use for Control and PROSPER groups at 1.5 and 4.5 years past baseline.](chart)

“Snapshots” of Long-term Outcomes, Positive Trajectories

Long-term Impact on Illicit Substance Use Index Through 6½ Years Past Baseline

Substance use: high vs. lower risk subsets

PROSPER intervention effects are significantly stronger for the Higher-Risk subgroup.

Source: Spoth, Redmond, Shin, Greenberg, Feinberg, Schainker (2013). PROSPER community-university partnership delivery system effects on substance misuse through 6½ years past baseline from a cluster randomized controlled intervention trial. Preventive Medicine, 56, 190-196.
“Snapshots” of Long-term Outcomes, Positive Trajectories

• Difference in growth of use is statistically significant, as are differences at multiple time points, including 11th and 12th grades.

• Stronger effects for higher-risk youth.
Long-term impact on conduct problems

Reduced growth in problem behaviors at 4½ years past baseline

Programs have economic benefits

Researchers have estimated that for each dollar invested for a brief family-focused intervention, there is up to a $9.60 return.

Illustrative Findings of Parent PROSPER Trial Strategies to Improve Implementation Quality

PROSPER Long-Term Adherence Ratings

Illustrative Findings of Parent PROSPER Trial Strategies to Improve Implementation Quality

- PROSPER Partnership support/TA contributed to sustained implementation quality, with greater than 90% adherence.
Background: PROSPER Partnership Model Adaptation for NGR/AD Families

• Stakeholders in federal interagency collaborations suggest adaptation, noting positive, long-term outcomes from PROSPER Trial (see above).

• Frequently reference needs for evidence-based, sustainable family-focused intervention/delivery system for military families.

• Subsequent discussions and planning about PROSPER Model elements that would be parallel vs. ones to adapt.
Parallel/Adapted Aspects at the Community Level

• Team Leaders

  – PROSPER Parent Trial:
    * Family and/or youth Extension-based Team Leader; School-based Co-team Leader.

  – Promoting NGR Families/PROSPER Project:
    * Military-connected leadership (from organizations that support NGR families), with Extension assistance where available.
Parallel Roles for Prevention Coordinators (Middle Tier of Model, TA Support)

- **Prevention Coordinators** attend team meetings in their assigned community.

- Contact Team Leaders nearly every week to discuss PROSPER activities and goals.

- Interact with other Prevention Coordinators to share successful strategies and approaches.

- **Military-connected in Promoting NGR/AD Families/PROSPER Project.**
NC Project Research Aims

• Goal: To adapt, implement, and evaluate the evidence-based PROSPER Delivery System with NGR/AD families.

• Specific Aims:
  1. Collect data to guide adaptation of the PROSPER Model with NGR/AD families.
  2. Learn how variations in the quality of PROSPER Model implementation influence program delivery.
  3. Learn whether an adapted version of the Strengthening Families Program: For Parents and Youth 10-14 (SFP 10-14), delivered through the PROSPER Model, has a positive impact.
Population Targeted for Testing Adaptions: NGR/AD Families in North Carolina (NC)

• NGR force consists of more than 850,000 service members, 43% of whom have one or more children.

• AD force consists of more than 1.4M service members, 44% of whom have one or more children.

• NGR/AD families face unique challenges from combined demands of civilian and military contexts.
Rationale for Targeting NGR/AD Families in NC

• Strong families are critical to the strength and stability of the NGR/AD.

• Children of service members have risk factors/family challenges related to parental deployment/readjustment.
  – Children report significantly higher rates of substance misuse and school-, family-, and peer-related difficulties than children of non-military parents.

• Few guidelines for prevention of substance misuse for military dependents, especially children.
Guiding Adaptation (Aim 1): Key Activities

• Web-based or focus group stakeholder survey and follow-up key informant interviews.
  – Identify needs, collaborators, resources, previous program successes and challenges with NGR/AD families.

• Web-based or focus group parent survey to assess needs and program preferences.

• Field test of SFP 10-14 content.
Model Implementation (Aim 2): Key Activities

• Local team member web-based surveys.
  – Assess team member functioning.

• Fidelity observations of SFP 10-14 implementation completed by team members.
Evaluate Outcomes (Aim 3): Key Activities

• Randomized controlled trial with 720 families
  – Individual family-level assignment
  – Intervention families receive SFP 10-14/Resource Guide

• Youth and parent surveys at baseline and 3 annual follow-ups

• Key Outcomes:
  – Youth substance misuse and other problem behaviors
  – Family functioning, parent-youth relationship quality
  – Parent and youth competencies
The Adapted Delivery Process

Each local program delivery team receives training, financial support, and technical assistance during the project.

A Prevention Coordinator is assigned to each local team. This “coach” ties the local effort to the statewide research project.

The State-Level Team will provide oversight and guidance throughout the project.

State Level Research/Management Team
(Representatives from RTI/State-Level NGR Stakeholders)
Top 12 Potential NC Counties

- Cumberland
- Wake
- Onslow
- Mecklenburg
- Guilford
- Harnett
- Wayne
- Craven
- Gaston
- Forsyth
- Union
- Cabarrus
## Current Project Timeline

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<tr>
<th>Time Frame</th>
<th>Activities</th>
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<tr>
<td><strong>Spring-Summer 2015</strong></td>
<td>• Form Local Teams; identify facilitators and eligible families.</td>
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<td><strong>Summer/Fall 2015</strong></td>
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<td>• Local Team members complete pre-test survey.</td>
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<td>• Conduct SFP 10-14 curriculum training.</td>
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<td>• Recruit families who complete baseline survey and are randomly assigned to intervention or control groups.</td>
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<td><strong>Late Winter-Spring 2016</strong></td>
<td>• SFP 10-14 delivery – initial resource guide implementation.</td>
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<td>• Fidelity observations conducted.</td>
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<td>• Local Team members complete follow-up survey.</td>
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<tr>
<td><strong>Spring 2016, 2017, 2018</strong></td>
<td>• Families complete follow-up survey,</td>
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<td>• Local Teams recruit non-project NGR families for winter/spring SFP 10-14 programming.</td>
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<td>• Local Teams focus on finding resources to support sustainability.</td>
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