

Building Resiliency through Family-Based Programming

Written by: Centre for Addiction and Mental Health (CAMH)
Health Promotion Resource Centre & Parent Action on Drugs

CONTENTS

The Role of Family & Family-Based
Programming in Building Resiliency in
Children & Youth

Types of Family-Based Programming

Learnings from the Field

References

Introduction

This resource provides an overview of family-based programming and its effectiveness for building resiliency in children and youth as well as strengthening parenting capacity. It profiles three programs currently being implemented across Ontario and offers a number of real-world learnings of providing family-based programming.

Download this resource at 
www.hclinkontario.ca/images/building_resiliency.pdf

THE ROLE OF FAMILY & FAMILY-BASED PROGRAMMING IN BUILDING RESILIENCY IN CHILDREN & YOUTH

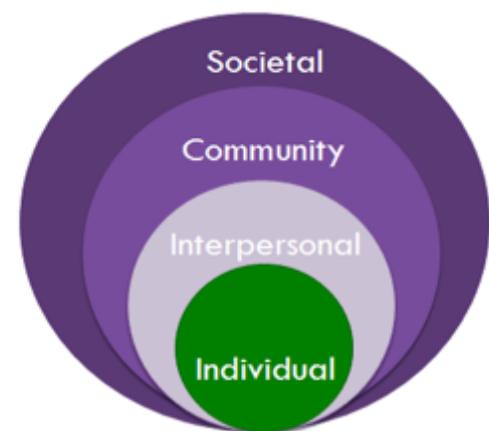
Parenting and families play a large role in the health, well-being and resiliency of children and youth (Barankin & Khanlou, 2007). Parents and caregivers can promote resiliency in this population in several ways such as through providing stability in the home, setting firm limits and being emotionally available. Family influences that are positive and contribute to a young person's self-esteem and social development have a protective effect and may help to mitigate the risk factors that can lead to mental health concerns and unhealthy behaviours among children and youth (Craig & McCuaig Edge, 2008).

Research on substance use does suggest strongly that the family can have a central role in prevention by either decreasing risk or by promoting protection and resilience (Velleman, 2005 et al). Family-based programs have been effective in delaying alcohol initiation, reducing the frequency of alcohol consumption among young people, preventing adolescent smoking and reducing negative parenting (Smit et al, 2008; Thomas et al, 2008; Thomas & Zimmer-Gembeck, 2007).

FAMILY-BASED PROGRAMMING PRIMER

- ▶ Interventions aimed at promoting protective factors in families
- ▶ Multi-session programs (6-9 sessions)
- ▶ Groups of parents/caregivers or families with children that focus on the development of skills in addition to sharing information or knowledge (CCSA, 2011; UNODC, 2009)
- ▶ Make use of behaviour change theory, social skill development and relationship building techniques to build child and youth resilience
- ▶ Aim to build individual and interpersonal skills in families
- ▶ Most effective as part of multiple, comprehensive approaches that also target risk and protective factors at the community and societal levels (CCSA, 2011)

SOCIAL ECOLOGICAL FRAMEWORK



Adapted from: Canadian Centre on Substance Abuse. (2011). *Strengthening Our Skills: Canadian guidelines for youth substance abuse prevention family skills programs.*

TYPES OF FAMILY-BASED PROGRAMMING

There are different kinds of family-based programs. Some focus solely on educating and training parents and caregivers, such as *Triple P Positive Parenting Program* and *The Incredible Years*. Other programs, such as *Strengthening Families* and *Stop Now and Plan*, have additional elements such as sessions for the children and those for the children and parents/ caregivers together. Some of the research on the impact of family-based programming indicates that including a child and family session in addition to sessions for parents can broaden the benefits of the intervention (CCSA, 2011).

Family-based programs can be offered universally to all parents or families or take on selective approaches, based on the intended audiences of the interventions (UNODC, 2009). For example, particular programs can be provided for families meeting identified criteria (e.g. child's challenging behaviours), for a group of families with shared problems (e.g. parents have a history of addiction or mental health issues), for families within an identified community (e.g. a rural area undergoing economic distress with high rates of unemployment).

Examples of Specific Skills Developed in Family-Based Programming

(Source: UNODC, 2009)

	FOR PARENTS/CAREGIVERS	FOR CHILDREN	FOR FAMILIES
Emotional responsiveness & control	Be responsive/ display affection and empathy Use positive attention and praise	Manage and control behaviour Build self esteem	Provide feedback to each other and solve problems together
Build shared values & appropriate expectations	Establish clear rules and expectations	Know own rights and obligations	Develop shared set of values
Structure in family life	Provide structure regarding meals and other activities Monitor children's activities as developmentally appropriate	Respect others and take turns	Listen to each other Organize family meetings
Involvement in school & community	Assist children with homework Communicate with school and community resources	Respect differences in individuals, cultures and ethnicities Develop skills for resisting peer pressure	Participate in community activities together

A Look at Three Family-based Programs

The Incredible Years Parenting Program

[The Incredible Years series](#) is a set of three programs that target parents, teachers and children. The Incredible Years Parenting Program groups parents and caregivers according to age of children – babies, toddlers, preschoolers and school age. The program focuses on strengthening parenting capacity and increasing parents' engagement in their child's school experience. The goal of the program is to promote children's academic, emotional and social skills and decrease conduct problems. Groups are 12-20 weeks in length and sessions typically last 2-3 hours. The program aims to strengthen parent-child interactions, nurture relationships, and reduce harsh forms of punishment. Parents participate in role play, brainstorming and discussions, and are provided with home activities and handouts. Parents are encouraged to work with teachers to promote wellbeing and reduce conduct problems in school. Basic and advanced curriculums are available.

Triple P – Positive Parenting Program

[The Triple P – Positive Parenting Program](#) is an evidence-based parenting program that is being implemented in 25 countries worldwide and is backed up by 30 years of research. Triple P is designed to prevent and treat behavioural and emotional problems in children and teenagers by teaching 17 fundamental parenting strategies that are based on development theories and recent research on risk factors affecting children. The program gives parents simple and practical tools to help manage their child's behaviour, prevent problems and build healthy relationships. It is provided in four 2-hour weekly sessions to small groups of parents.

Strengthening Families

[The Strengthening Families Program](#) by Dr. Karol Kumpfer of the University of Utah takes a “whole family approach” and parents and children both attend the program together. The families first have dinner together with the facilitators and then spend the second hour in separate child and parent groups. In the last hour, the two groups come together and they build on the topics and skills they worked on in the first hour. This evidence-based program is focused on strengthening parent-child relationships and helping youth build resiliency to support good decision-making and strong mental health.

There are two variants of the program that were adapted, tested and implemented for Ontario audiences.

[Strengthening Families for Parents and Youth](#) is a nine-week skill-building program for families with teens 12 to 16 years old. It is an adaption by Parent Action on Drugs (PAD). [Strengthening Families for the Future](#) is a 14-week program for families with children aged 7-11, adapted by the Centre for Addiction and Mental Health (CAMH).

LEARNINGS FROM THE FIELD

In a 2014 [webinar series](#) from HC Link, individuals running these family-based programs - The Incredible Years, Triple P and Strengthening Families for Parents and Youth - in Ontario, discussed a number of challenges as well as successes in offering these programs in the community.

Challenges & Solutions

- ▶ **Engaging youth and families** - Getting kids and parents engaged within the first two sessions helps lessen attrition.
- ▶ **Differing family situations and level of need** - It is key to make sure service providers know what families are appropriate for the program.
- ▶ **Recruitment of families** - There is a challenge between connecting families to the program and getting them to come out. Having strong relationships with referring agencies and making sure that they have the right messaging to advertise and refer is essential.
- ▶ **Attrition rates among staff at community agencies** - Ongoing training and funding is often needed.

Successes

- ▶ The programs offer opportunities for partnership development within the community.
- ▶ There is a reduction in service gaps and increased service as families are often referred to appropriate programs after discussing their concerns in group program.
- ▶ Family-based programs can act as a gateway to further diagnostic and therapeutic services for kids.
- ▶ Ultimately, provision of these programs prevents emotional and behavioural problems in children and youth across the community.

Conclusion

Implementing family-based skill-building programs within a community has multiple benefits. Evidence-based models allow agencies to fill an essential service gap in the prevention of substance misuse and mental health problems with a program that has been well researched. They also provide a link to appropriate treatment options for families in need and increase the ability of families to support the positive development of children and youth. Finally, these programs require relationships between agencies and across sectors for effective recruitment, delivery and evaluation, thereby strengthening organizational networks and promoting a systemic approach to building the resilience of youth and families.

REFERENCES

Barankin, T. & Khanlou, N. (2007). Enhancing resilience: Environmental factors in *Growing up Resilient: Ways to Build Resilience in Children and Youth* (pp.69-84). Toronto: Centre for Addiction and Mental Health.

Canadian Centre on Substance Abuse. (2011). *Strengthening Our Skills: Canadian guidelines for youth substance abuse prevention family skills programs*. Ottawa, ON: Canadian Centre on Substance Abuse.

Craig, W. & McCuaig Edge, H. (2008). Bullying and Fighting. In W. Boyce, M. King & J. Roche (Eds.), *Health Settings for Young People in Canada* (pp.91-104).

Smit, Evelien; Verdurmen, Jacqueline; Monshouwer, Karin; Smit, Filip. [Family interventions and their effect on adolescent alcohol use in general populations; a meta-analysis of randomized controlled trials](#). *Drug and Alcohol Dependence*. Vol.97(3), Oct 2008, pp. 195-206.

Thomas, R. Zimmer-Gembeck, M.J. (2007) Behavioral outcomes of Parent-Child Interaction Therapy and Triple P-Positive Parenting Program: a review and meta-analysis. *Journal of Abnormal Child Psychology*. Jun;35(3):475-95. Epub 2007 Feb 27.

Thomas, R.E., Baker, P.R.A., Lorenzetti, D. Family-based programmes for preventing smoking by children and adolescents. *Cochrane Database of Systematic Reviews*. 2007 Jan 24;(1):CD004493.

United Nations Office on Drugs and Crime (UNODC). [Guide to implementing family skills training programmes for drug abuse prevention](#). United Nations. New York. 2009.

Velleman, R., Templeton, L. Copello, A. [The role of family in preventing and intervening with substance use and misuse: a comprehensive review of family interventions, with a focus on young people](#). *Drug and Alcohol Review*, 24, 93-100, March 2005.

HC Link *Your resource for healthy communities*

HC Link works with community groups, organizations, and partnerships to build healthy, vibrant communities across Ontario. We offer consulting services, learning and networking events, and resources in both English and French. Our services are funded by the Government of Ontario and are provided free of charge where possible.

To learn more about us or request a service, contact us at:
www.HCLinkOntario.ca | info@hclinkontario.ca
416-847-1575 | 1-855-847-1575

This document has been prepared with funds provided by the Government of Ontario. The information herein reflects the views of the authors and is not officially endorsed by the Government of Ontario.