



Family Interventions

Alcohol: A Family Affair
May 14th 2010



Workshop summary

1. Overview of Derbyshire family support activity
2. Experience across 2 family intervention programmes in Derbyshire:
 - Strengthening Families Programme (SFP) 10-14yrs pilot (key findings)
 - Family Intervention Project (FIP)

Why support families?

“strong families give children love, identity, a personal history, and a secure base from which to explore and enjoy life as they grow up”

“families come in all shapes and sizes these days and the evidence is clear that stable and loving relationships between adults in the home – parents, grandparents and other caring adults and with their children are vital for their progress and wellbeing”

“Strong families make strong communities”...and ultimately a successful society

DCSF, March 2010

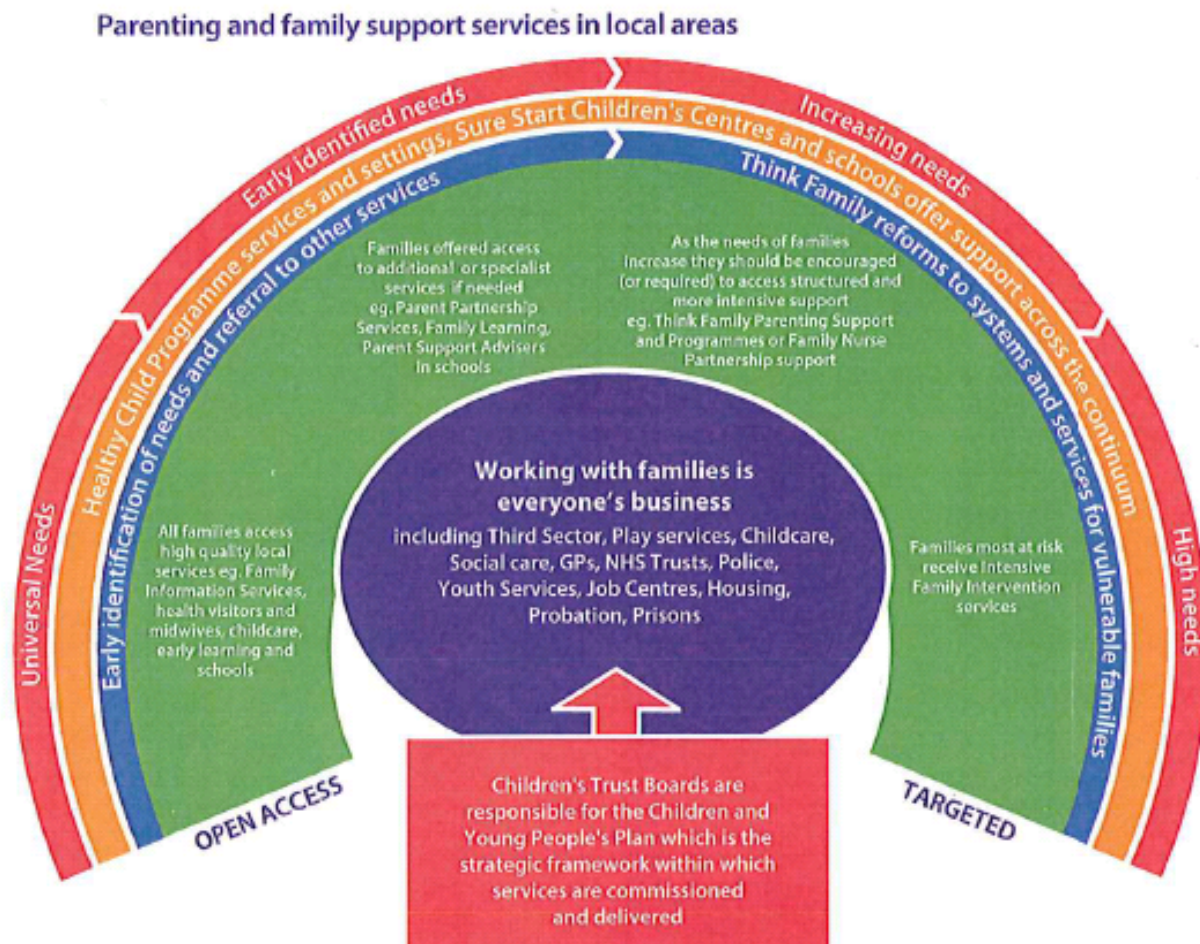
How?

- Work with “parents” (and/or key adults)– they are key partners
- Work with family unit as a whole – *whatever it is*
- Empowering and enabling
- “one size does not fit all” –
 - a variety of evidence-based support/ multifaceted approaches
 - Social learning theory (external influences on individual’s behaviour)
 - Resilience model (“buffering” stress/ external impacts; protective-coping skills)
 - family management, problem-solving/ conflict resolution strategies – a developmental process
 - support at various levels
 - considering various degrees of need
 - accessible and clear to all – using a variety of routes/ pathways
- Early identification and early intervention emphasis
- Address key aspects of family functioning – whole family approach
- Consider “backgrounds” of families
- Use of resilience theory – empowered families
- Combined approaches:

Challenge AND Support

- Integrated/ joined up working across agencies for some families
- Familiarity of a “wider” range of partners and their services which can support
- Increasing links to services to support the adult eg. employment, educative services, housing, learning disability support.....

Spread of services across the continuum of need, DCSF 2010:11



What in Derbyshire?

- Derbyshire Family Support Strategy is currently *being written*. Some key thoughts.....
 - Parents as partners
 - Evidence based
 - Delivery matched to needs of children, of adults (a whole family intervention) at the “right time” and *pitched* at the “right level”
 - Aiming to improve outcomes; robust evaluation
 - Accessible services and support through multiple pathways; consistent practice
 - Address underlying issues of family life: parenting skills, relationships, communication, general family functioning
 - Working towards empowerment of families

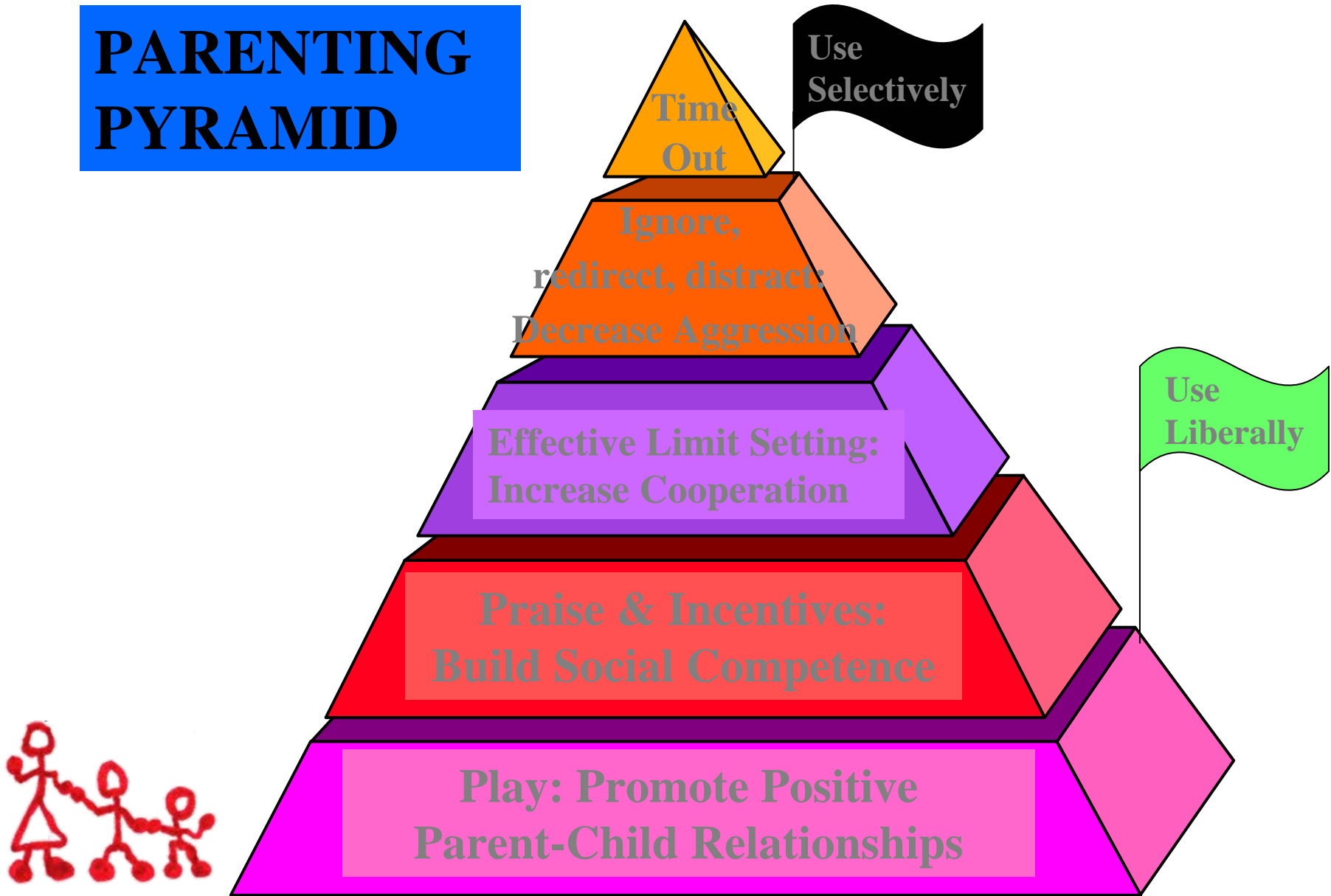
Family support/intervention

Parenting programmes:

- Positive parents sessions:
positive.parents@derbyshire.gov.uk; Call Derbyshire 08456 058058:
 - Positive Parents (Incredible Years/ Webster-Stratton); parents of children 2-8yrs and 8-13yrs)
 - Open access self-referral; targeting families experiencing difficulty and parents with children who exhibit challenging behaviour and/or parents having difficulty with everyday parenting skills
 - Delivered through multiagency teams in CCs, Family Support Centres, Adult Ed centres, schools and local community venues

Alison James/ Parenting Co-ordinator 01773 748002

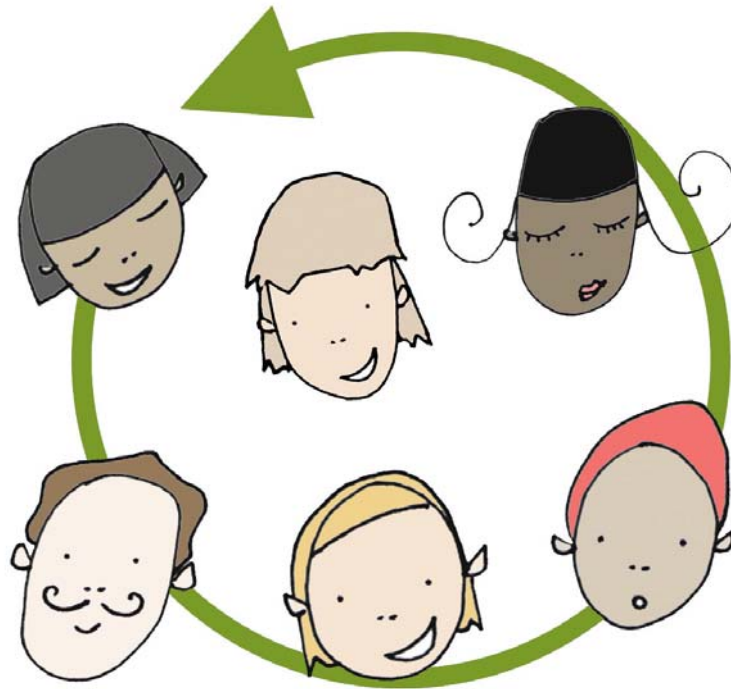
PARENTING PYRAMID



“Living with” programmes

- Suitable for parents/ carers of children upto 15yrs, delivered by NHS Derbyshire County (universal approach):
- **Living with Children** (upto 8yrs)
- **Living with Teenagers** (9-15yrs)
- Self referral and referral addressing themes of
 - Self-confidence building; communication; managing stress/relaxation; parenting skills and styles; managing difficult behaviour; setting limits; self esteem building; problem solving; addressing “teenage” topics eg. drugs, sex and relationships
- For more information: Cath Bedford
livingwithchildren@derbyshirecountypct.nhs.uk or 01246 514977/ 514978

Erewash Strengthening Families Programme January – March 2010



Background evidence

- SFP 10-14 (UK) development in the UK resulted from US research Iowa State University – key findings
 - Delayed alcohol/drug initiation
 - Lower frequency of alcohol/drug use
 - Positive impact on levels of aggressive behaviours
- WHO and UK Alcohol Education and Research Council (AERC) commissioned Cochrane Collaboration Systematic review (2008) concluded SFP 10-14 as an “effective and promising intervention”:
 - NNT was 9 for prevention drinking and drunkenness initiation, four years later
 - Importantly, the effectiveness of SFP 10-14 seems to increase over time rather than decrease
- My Strong Family Consultancy (MSFC), which is centre based in the School of Health and Social Care at the Oxford Brookes University, provides the SFP 10-14 (UK)

www.mystrongfamily.org

SFP (10-14yrs) Aim

AIMS

To reduce alcohol and substance misuse and other behaviour problems during adolescence

This will be achieved through improved skills in nurturing and child management by parents and improved interpersonal and personal competencies amongst young people

- Improving parenting skills
- Building life skills with and for young people
- Strengthening family bonds

SFP 10-14 (UK) is unique in the way that it works with the whole family unit

Local Background

- January – March 2010; 7 weekly sessions
- Ilkeston Arena 4.30 – 7pm
- Promotion
- Delivery (*4 trained facilitators; 2 volunteer support workers*)
- Participation: 9 referrals received (FIP workers, FRWs, Children's Centre staff)
 - Family-types (*known" to a range of services/ organisations*)
- Participation:
 - **4 regular attending families across 7 weeks**
 - 1 family never attended after referral
 - 1 family (mum and daughter) attended once and then daughter was taken into care
 - 1 family (mum, stepdad and daughter) attended once in the third week
 - 2 families – both “enthusiastic mums” but never attended

4 families

- All mums
- 4 young people aged 11 (girl), 12 (boy), 13 (boy), boy (8)
- All families being supported by services
 - Young people seemed to encourage family attendance
 - Parents reasons for regular attendance varied from week to week: because child wanted to; it's good for us; it gives a "routine" for child; "worker" told me to come

Programme overview



Parent Topics

1. Using Love and Limits
2. Making House Rules
3. Encouraging Good Behaviour
4. Using Consequences
5. Building Bridges
6. Protecting Against Substance Misuse
7. Using Community Resources



Youth Sessions

1. Having Goals and Dreams
2. Appreciating Parents
3. Dealing with Stress
4. Following Rules
5. Handling Peer Pressure I
6. Handling Peer Pressure II
7. Reaching Out To Others



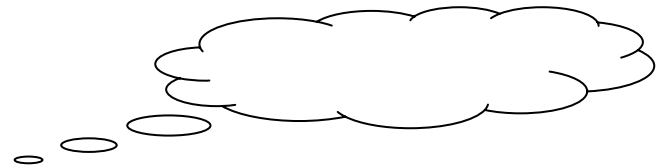
Family Sessions

1. Supporting Goals and Dreams
2. Appreciating Family Members
3. Using Family Meetings
4. Understanding Family Values
5. Building Family Communication
6. Reaching Our Goals
7. Putting it all together & graduation

Method of pilot evaluation

- Retrospective questionnaire (*Oxford Brookes University*)
- Internal feedback form
 - Likes, dislikes, change
- Perspectives: parents, young people, referrers, facilitators

Post-pilot: evaluative feedback meeting with Oxford Brookes University



Learning from the pilot

- Pre-programme start:
 - One facilitator spoke to each parent about the programme and spoke to referrers
 - Useful of a home visit
 - Useful of a pre-open information evening
 - Assign a facilitator to a family(s)
- During programme:
 - A facilitator assigned to a family, offering weekly telephone support between sessions
 - Facilitator “feedback” to referrers and gleaned information from their perspective (what families told them)
 - Useful “collaborative” working between referrer and SFP facilitator and family
 - Useful to have facilitator support...even if just to “say hello”
- Important to ensure clarity with referrers the nature of programme and referrals
 - Programme is developmental – thus late referrals are not effective

The programme: key learning points

- Parents expressed benefit:
 - Spending time with child
 - Getting to know child better
 - Getting to know self better; change in self-behaviour
 - “parenting” strategies – thinking differently, calm, using family rules
 - Parental self confidence “I can do more than I thought”

Some comments from parents

“I got to know my daughter better”

One parent remarked that she felt she needed to relook at some of her own friendships - friends who encouraged her to drink and use drugs – she did not want this anymore.

One family used some of the activities and discussion points with an older sibling at home and felt there was value in that.

“I liked everything about the course, its taught me how to be more confident with my child and persistent. I will really miss coming here”

“I’ve learnt to talk to my children a lot different not so stressy at them”

“I am working towards sticking to the rules I set at home instead of giving in”

“I have learnt to listen to (my daughter) and not go off straight away without finding out what is wrong and also I have changed that way the house is run, the kids help out more”

“I liked spending time with ~~xxxx~~, doing positive things”

One mum spoke towards the end of the programme, acknowledging her need to change some of her social group who were influential to her drug and alcohol use. She realised “they aren’t doing me any good” and “I want to be have a good family.” She expressed her confidence that she could do this.

One parent asked if there was to be another programme – for her to attend with a younger sibling who would then be 10yrs

Some comments from young people...

- Young people:

- Liked time with mum

“my mum listens more”

“we are doing nice family things”

“like doing things together”

- Strategies – coping with peer pressure (young people spoke about using strategies outside of sessions successfully.... “instead of hitting him”); thinking differently about situations
- Self confidence – responsibility for younger child; self worth
- “Having time to talk about things” *what wanted to do in the future*
- Getting on better with older siblings – although “it is hard”
- Knowing about drugs and alcohol

Retrospective questionnaire

- Parent
 - 70% improvement
 - 30% stayed same
- Young Person
 - 80% improvement
 - 20% no change

Other learning...

- Capacity to promote/improve multi-agency collaboration
- Capacity to offer parents support into wider local services eg. CAB, youth activities
- Need a clear infrastructure to administrate a programme as this

Weaknesses

- Practicalities of resources:
 - adapt resources but not hindering aims
 - Local culture
 - Needs (literacy) of participants
 - Lessen amount of activities in some sessions
 - More resources: alcohol/ substance for parents
 - Additional “time” for parents to discuss their substance misuse issues/ alongside programme or ?
- Cost effectiveness per programme?..but long term seems to show NNT 1:9
- Facilitators did not fully know local area (Erewash)

Next steps

- Meeting with Derbyshire County Council colleagues with commissioning responsibilities for family programme developments end of May



Derbyshire County

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