

Original article

Parent Program Component Analysis in a Drug Abuse Prevention Trial

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Abstract

Purpose: The current study estimates the effects of the parent program component of an evidence-based multi-component drug abuse prevention program for adolescents, Project STAR.

Methods: A total of 351 parents of middle school students, who had been assigned by school to a program or comparison condition ($n = 8$ schools), completed self-report surveys at baseline and two years later. Analyses estimated effects of the overall parent program as well as its three key constituent activities (parent-school committee participation, parent skills training, and parent-child homework activities) on perceptions of parental influence over their children's substance use.

Results: Results demonstrate that parents who participated in the overall parent program demonstrated greater perceptions of influence over their children's substance use at two-year follow-up. Furthermore, parents who participated in parent-school committees and homework sessions demonstrated greater perceptions of influence over their children's substance use than those who did not.

Conclusions: The findings of this study suggest that parent interventions may increase self-efficacy in parent-child management and communication skills. Results may help inform the development of more cost-effective and immediate prevention strategies for parents. © 2006 Society for Adolescent Medicine. All rights reserved.

Keywords:

Prevention; Adolescent; Parents; Drug abuse; Components

Approaches to substance use prevention range from those that are implemented in a single context to multi-contextual programs that implement programming in two or more contexts of development [1,2]. Of these approaches, multi-contextual youth drug abuse prevention programs are considered to hold the most promise for affecting the multiple influences on youth drug use [3–5]. However, one important limitation of the multi-contextual approach is that it is often difficult to disentangle effects attributable to any single component of the overall program, which is further compounded by the fact that each prevention component may contain a number of prevention elements.

In this article we address these issues as they relate to the parent program component of the Midwestern Prevention Project (MPP), a large-scale, multi-component drug prevention program designed to prevent adolescent drug use. We

also attempt to determine the effects of the MPP's three constituent elements: parent-school committee participation, parent skills nights, and parent-child interactive homework activities. Specific attention is paid to how the parent program affected parents' self-efficacy to influence their children's drug use behavior, an important predictor of adolescent substance use [6].

Parent/family risk factors for adolescent drug use

Research suggests that the way in which parents perceive the problem of adolescent substance use is related to actual youth substance use. First, family norms of disapproval of illegal drug use have been shown to be protective factors that help youth stay drug free [7]. Second, parental attitudes and unclear rules and consequences for substance use have been positively associated with higher adolescent substance use [8–11], whereas perceived parental disapproval for alcohol and other drug use has been negatively associated with adolescent substance use [10]. Third, perceived personal control over a child's drug use behavior, or alterna-

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tively, self-efficacy to change a child's behavior, has been considered a protective factor [4].

Parent/family prevention programs

Family-focused preventions tend to focus on counteracting risk factors and enhancing protective factors, for example, by reducing parent substance use, promoting parent communication of anti-substance use norms, and/or affecting parents' perceptions of adolescent substance use. Here, effective parenting and family strengthening interventions that incorporate active parent participation are seen as having the potential to significantly lower the prevalence of adolescent drug use and other problem behaviors [12]. Changes in behavior are assumed to occur through changing child management, rule setting, parent-child communication, and support for prevention practices.

With a few exceptions [13,14], family- or parent-based prevention programs have demonstrated inconsistent or weak effects relative to effects of school-based programs that are aimed directly at youth behavior [15,16]. Inconsistencies may have resulted from any number of study limitations, two of which may be especially pertinent to parent prevention programs. One is that assumptions about parental mechanisms for behavior change in youth may be incorrect or insufficient. For example, psychosocial theories upon which many prevention programs are based, posit that self-efficacy, or at least a sense of perceived empowerment, may have to occur before any change in parent behavior, and subsequently, youth behavior, can occur [17]. Yet parent-based prevention programs have focused on measuring changes in parent behavioral skills, not self-efficacy. Second, little is known regarding the relative effectiveness of component parts of overall multi-contextual drug abuse prevention programs. Here, it is possible that some components of substance use prevention programs are effective, whereas others are not. Recently researchers have developed new and innovative ways to determine the components of prevention programming that are responsible for change.

Components analysis

The evaluation of program components, or components analysis, is important in the determination of program elements directly related to program success. A components analysis allows for disaggregating the effects of a multi-component prevention program to examine specific contributions of each component [2]. Identification of these components allows for adaptation of prevention programs in future trials, enabling researchers to increase the likelihood of program success while decreasing the likelihood of eliminating critical program components due to resource limitations. Components analysis can also be used to help determine why some programs show unexpectedly weak or inconsistent effects, to tailor prevention programs to new populations of consumers, or to revise programs after base-

line-by-treatment interaction effects show that prevention programs have differential effects on different sub-groups [18].

A components analysis may address one or both of the following questions: a) does a particular component affect the desired change in attitudes or behavior, or b) do constituent parts of the broader component contribute to an outcome [2]? These questions are important from both a theoretical and a practical standpoint. Theoretically, if the component does not affect desired outcomes, then changes in outcomes may be a result of any number of other program characteristics such as general program exposure or the generalization of effects from other program components. From a practical standpoint, including an additional program component that does not contribute to the overall prevention effect is costly and time-consuming [2]. Furthermore, null findings for overall program effectiveness may overlook the potential for certain program components to affect change. Here, one risks "throwing the baby out with the bathwater" if a program is deemed ineffective without finer investigation into what the program may have done well.

Rationale for conducting components analyses in a multi-component community-based prevention program

Within a multi-contextual approach to drug prevention, parents are considered to have an integral role in preventing adolescent substance use. The Midwestern Prevention Project (MPP) is a multi-component community-based prevention program that includes parents, as well as teachers, community leaders, and policy makers as agents of change to prevent adolescent drug use. Previous studies of the parent program component have shown relatively high participation rates [19] and effects on parent behavioral changes, including alcohol use and parent-child communication skills [20]. Within the parent program, parents are involved in three major ways: in a parent-school committee, in a parent skills training program, and in interactive homework activities that they conduct with their children. In this study we first attempted to determine whether there were overall program differences in perceived parental control over the substance use of their offspring. Then, given that program effects were found, we attempted to determine if the three separate elements of the parent component were differentially related to outcomes. Thus, it is hypothesized that parents who participated in the MPP parent component will possess greater perceptions of influence over the substance use of their children than will control group parents. It is also hypothesized that parent participation in each of three specific activities would be positively related to this same outcome. Current analyses focused on the ability of the STAR parent program to alter parental attitudes related to youth substance use as a prerequisite to parental behavior change. This focus was chosen based on what was reason-

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