

Family-Based Treatments for Adolescent Substance Use



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KEYWORDS

- Substance use • Family therapy • Externalizing problems • Behavioral interventions
- Evidence-based treatment

KEY POINTS

- Family is a central system in adolescent's development.
- Ecologically based family therapy has been proven the most effective of approaches for adolescent substance use disorder.
- Several family-based treatments have been widely studied and have robust evidence of efficacy, effectiveness, and are being implemented in community settings. Others are promising and at earlier stages of testing.

INTRODUCTION

Adolescent substance use is a major risk factor for negative outcomes, including substance dependence later in life, criminal behavior, school problems, mental health disorders, injury, and death.^{1–8} Substance use is often comorbid with various psychiatric disorders, especially in clinical samples.⁹ Although there is some evidence for the effectiveness of various interventions for child and adolescent substance use prevention¹⁰ and treatment,^{11–17} continuing to develop, evaluate, and disseminate the most

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effective interventions will be essential to the welfare of adolescents. As it stands, there is a variety of available treatment approaches for adolescent substance use. Some focus on the treatment of individual adolescents through cognitive behavior therapy, motivation enhancement therapy, and supportive drug counseling. Others are structured to treat an adolescent peer group using group therapy. Family therapies have a long history in the treatment of adolescent substance abuse and, as a group, family-based treatments have been found to be highly effective at reducing substance use.^{13,18}

This article provides a user-friendly, clinically focused, and pragmatic review of currently used and evidence-based family treatments. More in-depth comparisons of the evidence for each family-based treatment are available.^{11,16–18} The theoretic background and empirical support for each family therapy are briefly reviewed, with descriptions of therapeutic techniques that illustrate how the treatment works in day-to-day treatment. Various aspects of each treatment, such as targeted population demographics, severity of population, location of service delivery, and the extent to which the various family-based treatments are ready for dissemination and implementation are also reviewed. The authors hope that readers will be able to assess which treatments would be effective for adolescents in their care or their agency's care. Emphasis will be placed on treatments that have the best empirical evidence and are most ready to be used in community settings. However, other promising treatments that are less well researched are also described.

WHY FAMILY-BASED APPROACHES?

Evidence and theory support a focus on family-based approaches to adolescent substance use treatment. A recent meta-analysis by Tanner-Smith and colleagues¹³ revealed that family therapy programs were more effective than several other approaches, including behavioral therapy, cognitive behavioral therapy, motivation enhancement therapy or motivational interviewing psychoeducational therapy, group counseling, and practice as usual. In this meta-analysis, the statistically significant mean effect size reported for these comparisons is .26, which could be equated to a reduction from 10 days of use in the past month to 6 days of use, almost a 40% reduction of days of drug use. However, there are limitations to this meta-analysis. Specifically, it did not compare family therapy against all treatment types; it did not distinguish effects between family therapy and specific nonfamily-focused, empirically validated interventions; and it did not address sustained post-treatment effects.

Theoretically, adolescents lie at the confluence of several social systems (eg, school, community, peers), of which the family is central. As in our previous work, the authors propose an ecodevelopmental-systems theoretic approach that allows for more thorough description of the risk and protective factors predicting (ie, creating risk or protection against) adolescent substance use (**Fig. 1**).^{19,20} This theoretic approach, based on Bronfenbrenner's integration of social ecological and life-span human development theories, assumes that children's development is influenced by several interacting systems across time. It places the child first and most centrally in the developmental ecology of the family because of the foundational role that families play across child and adolescent development. Although individual genetic, personality, and cognitive factors are important in understanding adolescent behavior, the ecodevelopmental approach knowingly emphasizes contextual factors more than individual factors because of their well-established role as central risk and protective factors.²¹ Years of research have empirically shown that substance use and

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