See discussions, stats, and author profiles for this publication at: http://www.researchgate.net/publication/280836124

### Empowerment strategies for parents

**RESEARCH** · AUGUST 2015

DOI: 10.13140/RG.2.1.5142.0005

#### 18 AUTHORS, INCLUDING:



#### Elisardo Becona

University of Santiago de Compostela

199 PUBLICATIONS 972 CITATIONS

SEE PROFILE



#### Roman Gabrhelík

Charles University in Prague

20 PUBLICATIONS 22 CITATIONS

SEE PROFILE



#### **Amador Calafat**

European Institute Of Studies On Prevention

**85** PUBLICATIONS **569** CITATIONS

SEE PROFILE



#### Lucie Jurystova

Charles University in Prague

8 PUBLICATIONS 9 CITATIONS

SEE PROFILE

# Empowerment strategies for families

EMPOWERMENT is a process where people work together to accomplish changes in their communities and exert more power and influence over the issues that matter to them.

EMPOWERING FAMILIES is the key to health promotion. It enables families to act effectively reduce the risks that affect them.

**Prevention** means working to avoid potential problems. If we want to prevent the risks that affect young people we must act in time, before the problems occur.

Family Prevention must adopt interactive strategies. Parents actively involved in prevention are able to develop strategies for networking and explore new and more effective strategies adapted to the real word.

Prevention must reach the social spaces where the conditions for these risks to take place are created. Parents should be the ones leading prevention. To do so, they need accurate information, strategies and motivations that give them the power to construct healthier and safer environments for their children.

We [parents] need tools. We need knowledge but, above all, we need practical and feasible tools. It is true that the parents that come here [school parents association] are the ones more involved, the ones having more information. Other parents lack the time, or do not really know what we do and come rarely, or when they come they feel we pose things that are not useful to them. When a parent has a problem you cannot overwhelm him/her with theories on adolescence. What the parent needs is a talk he/she can understand, practical tools to allow him/her to act. It is not that there aren't [tools] but they don't get to parents. (Parent, ES)

**European Family Empowerment** (EFE) is a project developed in six Member State countries of the EU. The aim is to give support to families to encourage them to play an active role in substance use prevention and related risks that affect their children. Experts from these countries have explored the social reality of families and their adolescent children. A total of **8265 adolescents** and **3878 parents** have been surveyed. Focus groups with parents and professionals on prevention have also been carried out and a mapping of family organisations has been undertaken to explore how they organize across Europe. The results of this research can be found on the websites:

www.prevencionfamiliar.net www.irefrea.org

This guide, intended for parents, presents some of the project's main results as well as conclusions and recommendations. Although we prepared it using a straightforward language and an informal style, each and every idea behind this report is firmly grounded on scientific evidence. Those parents interested in getting more in-depth information on research can visit the websites above.

## Families should lead the prevention of risks that affect young people

Why is it important to prevent young people's substance (alcohol, tobacco, cannabis and other drugs) use?

Early use of these substances has been associated with a wide range of problems, including: academic failure, antisocial behaviours, risky sex, driving under the influence, substance addiction and other violent and/or criminal practices.

#### What has so far prevented parents from being more active in risk prevention?

**Identifying the problem.** Substance use in our society constitutes part of the recreational activities young people participate in. The fact that consumption is located within youth orientated recreational situations often means that problems go unseen.

**It's not an easy task.** Young people today are able to participate in a wide range of recreational activities, and are able to organise their leisure through social networking. Modern and intelligent prevention requires family organisations to take a similar approach, learning to use the tools that can help them to become an important and influential group.

Many families across Europe already participate in prevention through school associations, neighbourhood associations or citizens associations. But still many parents do not realize that these organizations can be used to deliver prevention of the risks that affect their children.

**Knowing what works and what doesn't.** Good intentions are not enough. It is important to have access to accurate information on what is going on young people's lives, and what are the most effective responses.

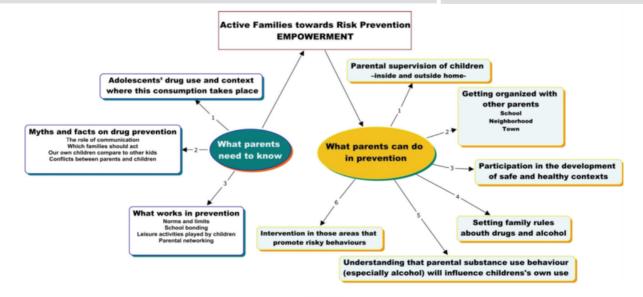
**Some parents feel there is nothing they can do about risk.** They feel the issue is very complex and feel afraid or unable to understand and face the social changes that have occurred. By not facing them, they lose the opportunity to better understand the world their children experience. Therefore they don't develop the effective supervisory skills to protect their children; and consequently their influence as parents deteriorates.

A majority of parents with adolescent children attending school participate in the prevention activities carried out in their children schools.

**Some myths keep parents from participating in risk prevention.** For example, thinking that prevention is just a matter for families 'with problems'; or that their own children will not be affected by the problems that affect other families; or that their input into prevention is constrained within their house and family.

### Barriers to participation in prevention

Isolation
Passivity
Misinformation



## Substance use. What do parents know about it?

Parents of teenage children have inaccurate information about their children's consumption of alcohol and tobacco.

Adolescents consumption according to parents		Adolescents consumption according to adolescents		
23% think their child currently drinks alcohol	<b>5,5%</b> believe their child has gotten <b>drunk</b> during the last month	<b>61%</b> of children currently drink <b>alcohol</b>	<b>19%</b> have gotten <b>drunk</b> during last month	
<b>3,6%</b> know that their children have used (or uses) <b>tobacco</b>		<b>47,5%</b> have used (or currently use) <b>tobacco</b>		
<b>3,3%</b> know that their children have used (or currently uses) <b>Illegal drugs</b>		16,1% have used (or currently uses) cannabis		

Parents underestimate the different types of places where their teenage children obtain alcohol

Where do children get alcohol?							
l don't know	Recreational venues (bars, pubs, discos)	Public places (streets, parks)	Friends house	Home	Relatives houses		
According to parents							
15.5%	9.4%	4.9%	7.9%	3.7%	7%		
According to adolescents							
5.2%	30.8%	17%	24.6%	16.7%	8%		

The most popular places for drinking are recreational venues, public spaces and friends' houses. What can parents do to be more active in those spaces?

## Effective parenting styles and parent-child communication

Amongst most effective preventive strategies are child supervision and setting family rules that parents have to stick to

#### How to supervise?

- Knowing where your children go and with whom when outside home
- Managing schedules and controlling their economy
- · Monitoring their activities
- Being familiar with their friends
- · Being in contact with their friends' parents
- Participating with other parents in prevention activities

Discussing drugs with children is an insufficient strategy

#### Why?

- Friends exert a great influence on their behaviour – peer pressure
- Nightlife and other activities influence their behaviour
- Advertising and informal norms influence their decisions
- Teens already have access to all the information they need, but usually disregard it as outdated or not relevant to them

The time parents dedicate to children is essential as a preventive measure

'They [children] must learn to accept little frustrations. They have to accept that their parents tell them they are not allowed to drink alcohol. The problem is that at home you are in control but not outside home. What is going on outside home? Outside home we do not know what they do' (Parent, ES)

- Parental permissiveness is the main risk factor for substance use.
   Simply talking to children about drug issues has no impact on their drug consumption.
- Parental control works as a preventive factor if exercised effectively; especially when supervising access to substance and children's activities outside the home.
- To prevent substance use, it is essential to give clear and effective rules about what is not allowed.

Gender differences are significant in both parents and children, but it is difficult to generalize. Parental control may be more effective in preventing drug use in girls than in boys. Analysing the influence of fathers and mothers separately, mother's control on children may be more effective than the father's.

## Activities carried out by children that can play a preventive / non preventive role

Parents should know that some activities carried out by their children might have a positive or negative effect on their children's substance use. There will be inter-individual differences, but in general, parents should control the activities related to drug use and promote those that have a positive effect in preventing drug consumption.

#### **School bonding**

School bonding is a preventive factor on drug use.

## Most of the teenagers we surveyed are happy to be at their school.

Problems in keeping up with school activities and homework might indicate a greater likelihood of substance use

Parents should address problems such as:	Adolescents affected by the problem	
Paying attention in class	21,1%	
Forgetting things	19,5%	
Keeping up with schoolwork	13%	

According to research findings some leisure activities are associated to substance use while others are not. This does not mean that these activities might work as risk or protective factors but parents should be aware of it and control those activities associated with substance use while promoting the activities not associated with drug use.

#### Leisure activities associated with substance use:

- Use of the internet for leisure activities (chats, music, games)
- · Going around with friends
- Go out in the evening (club, café, party, etc.)
- · Play on slot machines

#### Leisure and entertainment

Activities played by adolescents might be associated to substance use.

Main activities played regularly (daily/weekly) by adolescents in their leisure time.

Activities	%
Use the internet for leisure activities (chats, music, games)	80
Participating in sport or athletic activities	72,7
Going around with friends	50
Other hobbies (play an instrument, sing, draw, write)	43,6
Play computer games	51,7
Read books for enjoyment	33
Go out in the evening (club, café, party, etc.)	23,5
Play on slot machines	3

#### Leisure activities not associated with substance use:

- Participating in sports or athletic activities
- Other hobbies (play an instrument, sing, draw, write)
- Read books for enjoyment

#### **External supervision**

Failure to supervise children when they go to friends' houses is associated to child drunkenness and cannabis.

Parents should communicate with their children's friends' parents to find out if they are going to supervise the youngsters' activities.

#### According to parents' responses:

90% of them are acquainted with their children's friends; but only 55.2% are touch with the parents of their children's friends.

#### According to children' responses:

80% stated their parents know their friends; 38,6% reported that their parents are their friends' parents keep in touch

'We opened a facebook account not to control our children but to learn about it. A group of parents thought that if our daughter wanted to be there, we should anticipate and explore what was going on. So we created an account for the group. We did it to learn about it, to explore what it was about, because in other issues –such as alcohol and drugs—we, more or less, know things; but on new technologies we were forced to learn about them'. (Parent, ES)

#### Parents allies on prevention

- Other parents
- Teachers
- · Professional working in the prevention field
- Access to evidence base information and knowledge
- Information technologies (IT)

### Websites with factual and evidence-based information

Prevención Familiar. La plataforma de IREFREA para las familias.

www.prevencionfamiliar.net

IREFREA – European Institute of Studies on prevention www.irefrea.org

Centre for Public Health – LJMU http://www.cph.org.uk/

STAD - Stockholm Prevents Alcohol and Drug Problems http://stad.org/

Centre for Addictology – CUNI http://www.adiktologie.cz/en/

**UTRIP** Institute

http://www.institut-utrip.si/

Prevención basada en la evidencia - Socidrogalcohol http://www.prevencionbasadaenlaevidencia.net/

EMCDDA – European Monitoring Centre for Drugs and Drug Adiction

http://www.emcdda.europa.eu/

### In which ways can professionals collaborate with parents?

- Through scientific research providing updated and reliable information
- · Contributing to critical thought
- · Elaborating projects
- Giving techical and scientific Support on pedagogical dynamics
- Evaluating programmes

## Linking prevention professionals to work collaboratively with family organisations might help in the development of efficient programmes.

Parents associations should consider:

- There are professionals who specialize in risk prevention, that keep up-to-date on scientific findings and might help to elaborate prevention strategies.
   These professionals work out of institutions such as the ones listed in this programme and/or in universities.
- Other key professionals closely related to families are school teaching staff, technical staff in social services, and children's sport coaches and leisure time facilitators.
- Parents should also realise that some of professionals who work closely with their children are also not aware of the importance of working together with parents associations towards common goals. Therefore there is a need to establish working networks and a paradigm shift to move from individual to community work.

## Key items on prevention

**Prevention should be considered the main strategy in responding to the risks that affect adolescents.** This is because it is easier to prevent bad habits than to break them. This approach not only saves resources but potentiates the results in terms of social cost and suffering. The problem is that we tend to dismiss the problems unless it affect us directly; as the ancient Roman dramatist Seneca put it: 'He who does not prevent a crime when he can,, encourages it'

**Prevention should be based on scientific knowledge and evaluated strategies.** Every day we learn more about what works and what doesn't. Therefore prevention should no longer be guided by just our intuition and good intentions.

**Families are key to prevention.** They comply with all conditions required: they know their children, they are close to them, they are in most cases credible to their children, their children need them...

**Families must play an active role and face the risks that affect their children.** Ignoring the problems that affect our children does not make them disappear. Empowerment means adopting an active role in order to analyse the problems and proceed accordingly. Parents enjoy the legitimacy to do so, as parents of the affected group and as the major social group.

**Families must engage more and more actively with family organisations.** This link requires strategic changes and optimisation of empowerment and leadership skills amongst the leaders of family organisations, including the development of communication skills, the integration of new technologies and establishing synergies through networking.

**Work towards targeted and delimited objectives.** A basic objective on drug prevention is, if not entirely eliminating, delaying as much as possible the onset of use of alcohol, tobacco, cannabis and other drugs. This requires action both within the family home as well as in those environments where consumption takes place. Families must organise to achieve this purpose.

**Understand that alcohol use is the centre of a wide range of risks that affect minors.** Behaviours as diverse as risky sex, driving under the influence, and other violent or criminal practices are related to consumption of alcohol.

**Providing information to youngsters is not enough to prevent the risks that affect them.** Action is needed on more complex areas ranging from establishment of norms and limits, critical questioning of environments that facilitate use (easy availability of cheap alcohol, advertising, e-marketing through social media) and the cultures that promote this consumption.

**Networking.** Families are weaker when they work in isolation. Parents may feel alone and bewildered by the range of risks that their children face today, and they may feel unable to respond to these risks in an effective manner. Networking and group work will help teach them strategies to reduce risk, helps to create alliances and reduces feelings of isolation and powerlessness.

The EFE project - European Family Empowerment: Improving family skills to prevent alcohol and drug related problems - JLS/DPIP/2008-2/112

With the financial Support from the **Drug Prevention and Information Programme of the European Union.** 



The contents of this guide are solely the responsibility of the corresponding authors and do not necessarily represent the official views of the European Commission

#### **Authors**

Commission

Elisardo Becoña – IREFREA, ES

Angelina Brotherhood – LJMU, UK

Amador Calafat-IREFREA, ES

Ladislav Csemy - CUNI, CZ

Mariàngels Duch-IREFREA, ES

Roman Gabrhelik – CUNI, CZ

Camilla Jalling - STAD, SE

Montse Juan - IREFREA, ES

Lucie Jurystova – CUNI, CZ

Elisabeth Karlsson-Rådelius – STAD, SE

Matej Kosir - UTRIP, SI

Catia Magalhaes - IREFREA, PT

Fernando Mendes - IREFREA, PT

Rosario Mendes - IREFREA, PT

Mats Ramstedt - STAD, SE

Eva Skarstrand - STAD, SE

Harry Sumnall – LJMU, UK

Sanela Talic - UTRIP, SI

#### **Collaborating institutions**

#### **EMCDDA-EU**

European Monitoring Centre for Drugs and Drug Addiction

**EPA-EU** 

**European Parents Association** 

#### **Participating institutions**



http://www.irefrea.org/

http://www.prevencionfamiliar.net/



http://www.cph.org.uk/



http://www.institut-utrip.si/en/about-us/



http://stad.org/



http://www.adiktologie.cz/en/



http://www.emcdda.europa.eu/



http://www.epa-parents.eu/