

ED427093 1997-12-00 Urban School-Community Parent Programs To Prevent Drug Use. ERIC/CUE Digest, Number 130.

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The role that youth drug use plays in school failure, violence, and anti-social and self-destructive behavior is well known. It is also known that parents strongly influence their children's decisions about drug use: parents model substance abstinence or abuse; express attitudes about drugs, alcohol, and tobacco; and control their children's exposure to drugs by monitoring their activities, behavior, and friendships (Cohen & Linton, 1995; Cohen & Rice, 1995).

Over the years, hundreds of school and community drug prevention programs for children and adolescents have been implemented, especially in areas where social or economic problems seem to stoke experimentation with drugs. An essential component of effective programs is parent participation (along with community and media support), and there are ways to usefully involve all types of parents. Programs involving families not only prevent children's drug use, but also provide parents with resources that enhance their own lives, and reinforce and increase the benefits of family life overall (Jones, 1997). Also, parents are increasingly acting with each other or independently to develop community drug prevention programs and to provide their children with positive alternatives to drug use.

This digest briefly discusses some ways to involve families in their children's drug prevention education.

YOUTH DRUG PREVENTION STRATEGIES

Because youth experiment with drugs for the same reasons that they engage in other negative behaviors, the most effective prevention programs concentrate on helping them develop constructive ways to manage stress in their lives. They present factual information about the consequences of drug, alcohol, and nicotine addiction; and demonstrate the fallacy of youth's belief that drugs can alleviate their pain. They offer skills building curricula which cover clear communication, anger management, conflict resolution, and self-esteem. Afternoon and weekend programs, considered essential by many experts, provide a safe place for youth to spend time when their families are not home; there, they can engage in sports and other group activities that allow them to feel good about themselves, and receive educational supports (Ertle, 1995).

SCHOOL-FAMILY COLLABORATIONS

Drug prevention education is a natural component of the family resource centers, common in urban schools, which provide and coordinate social services. Schools focus

on supporting, not fixing, parents, and on promoting protective factors rather than reducing risks. The result is that parents are new and willing prevention partners (Cohen & Rice, 1995; Ertle, 1995). Schools are also encouraging students, staff, and parents to recognize the many positive experiences that families provide; and they are expanding the definition of family to include blended, single-parent, extended, and foster families. The goal is to encourage family closeness and support, satisfying the needs of youth that otherwise might drive them to gang membership (Domino & Carroll, 1994). In fact, the close-knit family systems characteristic of Latino groups have helped protect their youth from dysfunctional behavior, and they serve as a model for work with all families (Szapocznik, 1995).

PARENT RECRUITMENT

Many parents are reluctant to work with schools, or even to go into their children's school building, because of their own past negative experiences with education, feelings of intimidation, or differences in language and class that separate them from school personnel. Therefore, using an intermediary from the community (designated as an outreach coordinator), preferably a person respected as a local leader or an active member of the parents' church or ethnic group, often increases parent participation in drug prevention activities (Ertle, 1995). So does meeting in churches, community centers, or other non-school locations. It may even be necessary to use mobile outreach units to bring information and resources to families at home or at places where they gather (Bickel, 1995). The coordinator, using the parents' native language and conveying respect and support, can elicit their concerns about family and community problems and solicit suggestions for solving them. The coordinator can also help parents understand that they are being asked to help create and manage anti-drug interventions, not simply follow the orders of school personnel (Ertle, 1995). Some parents do not participate in drug prevention activities because they do not realize that drug use is a local problem. They may simply lack information because they are new to the area or not informed, or they may refuse to acknowledge the demonstrated existence of drugs in the misguided hope that doing so will prevent them from reaching their own home. It is important, therefore, for trusted people, such as the outreach coordinator, to be sure that families are provided with the facts about the local drug situation (Bickel, 1995; Cohen & Linton, 1995).

Unfortunately, the families most at risk of having a child use drugs, possibly because adults in the home are users, are hardest to engage in prevention activities. Many, however, are willing to participate in other, more general, programs, such as those that consist of youth bonding activities; cultural, sports, and fun events; and forums on health and child rearing. These can include an anti-drug component (Gardner, Green, & Marcus, 1994).

PARENT SUPPORT

To encourage parent involvement in school drug prevention programs, schools should

make efforts to increase family trust (Bickel, 1995). To encourage parents' initiation of anti-drug interventions at home and, with other parents, in the community, schools need to equip parents with information and strategies to increase the effectiveness of their efforts. Outreach should be respectful of parents' innate abilities and ultimate responsibility for child rearing. Information can be provided directly in anti-drug forums, but experience has shown that parent participation is greater when drug prevention is included in a more comprehensive program. For example, a life skills program can also offer English language instruction, job training, help with dealing with public agencies, and other services benefiting disadvantaged families. A family wellness program can also cover developing and maintaining good family relationships and solving family problems (Ertle, 1995).

One key topic for parents to explore is how to develop and maintain their natural leadership in the home. This involves good communication of values and appropriate expectations, active listening to their children's concerns, and good family problem solving. Parents may feel particularly vulnerable when their children approach adolescence and are faced with a myriad of new child rearing issues (Szapocznik, 1995).

Another important parent concern is how the ability to deliver an effective anti-drug message can be compromised by differences in acculturation and English language proficiency across generations. The greater the gaps, the more likely there will be conflicts within the family, and between generations and cultures, with the result that youth reject their family's values. In addition, when youth serve as translators for their elders, the natural balance of power can be reversed, with an ensuing devaluation of parental authority. In addition to preserving their authority, minority and immigrant parents need to foster a strong sense of family belonging in order to protect their children from feelings of societal isolation and marginalization that can lead to anti-social behavior (Szapocznik, 1995).

Parents who are themselves drug users, or who used substances in the past may need guidance in answering their children's questions. Past users may indicate that the harmful effects of using certain drugs were not known when they did so; that while they were not harmed, other people suffered severe consequences; and that they decided they felt better when clean. Current users need professional help in dealing with their own addiction and their children's concerns (National PTA, 1996).

PARENT ACTIVITIES

Parents can engage in a wide range of activities independently and with the local school and community groups. Organizations that initiate projects should encourage parents' feelings of ownership to maintain their involvement, support, and enthusiasm (Bickel, 1995). The following are some examples of parent activities with demonstrated effectiveness (Bickel, 1995; Cohen & Rice, 1995; Ertle, 1995; Szapocznik, 1995):

*Parent volunteers can improve school safety by monitoring the campus, halls, and

bathrooms. They can also sit in with teachers who are experiencing disruption in class.

*Parent volunteers, identified by badges, can serve as "neighborhood watchers" to ensure students' safe travel to and from school, and to offer them protection from dealers and bullies.

*Parents can work with schools and community groups to organize after-school and weekend programs to engage students constructively. They can also organize or chaperon proms, parties, and games that might be sites for drug activity.

*Parents can initiate networks of parents to keep informed about local issues and to work together to keep their children safe. They can organize "hotlines" to keep others informed and to deal with crises. Parent mentors can provide parents new to the area with information about local drug prevention efforts and encourage their involvement.

*In groups, parents and children can share their thoughts and information about drug use so that local drug activity is revealed and parents' attitudes are clearly conveyed. Children can identify their friends so parents learn who might be influencing them.

*Parents can institute family meetings, common in Latino households, that provide all members with a sense of belonging and provide an opportunity to discuss important issues and share concerns.

CONCLUSION

Effective school-family collaborations to prevent youth drug use require mutual respect; an accurate understanding of the nature and concerns of community members and the local problems; and an ongoing commitment of time and resources by everyone involved. It is important that the responsibilities for both decision making and tasks be shared, and that assignments be clearly stated. Above all, families must feel confident that they can share problems with others, that confidentiality will be maintained, and that they will receive useful and sustained help and support.

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