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ABSTRACT

Parents and guardians have a tremendous influence on the attitudes and behavior of their children, especially when it comes to substance abuse. Information and referrals to assist parents and guardians, as well as information and resources for prevention specialists and community leaders, are provided in this resource guide. The guide was compiled from a variety of publications and databases and represents the most current information to date, although it is not an all-inclusive listing of materials on this topic. It opens with an overview of prevention materials, featuring materials for parents' personal interest, as well as materials for parent educators, counselors, and community leaders. The next section provides synopses of studies, articles, and reports regarding adolescent substance use, parental influences, multicultural issues, and information derived from national surveys. Each synopsis includes complete publication information. Some research on studies, articles, and reports about parenting and drug-abusing women also appears in this research section. The last portion of the guide lists groups, organizations, and programs dedicated to supporting children and preventing substance abuse. A list of Internet access sites is also included in this section. (RJM)

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ED 414 530

## Substance Abuse Resource Guide

# Parents, Guardians, and Caregivers

### From the Director of CSAP...

Parents and guardians have a tremendous influence on the attitudes and behavior of their children. As substance abuse touches the lives of millions of children and families, parents must take the opportunity to help their children learn a wide variety of skills that will help keep them away from alcohol, tobacco, and drugs. Violence, AIDS, and teenage pregnancy are just a few of the risks associated with substance abuse. It is our job to keep our children safe and healthy.

This resource guide provides information and referrals to assist parents and guardians, as well as information and resources for prevention specialists and community leaders. We at CSAP look forward to working side by side with you toward a brighter future for all of our nuclear and extended families.

Elaine M. Johnson, Ph.D.



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**SAMHSA**

Center for Substance Abuse Prevention

Prevention **WORKS!**



The listing of materials or programs in this resource guide does not constitute or imply endorsement by the Center for Substance Abuse Prevention, the Public Health Service, the Substance Abuse and Mental Health Services Administration, or the Department of Health and Human Services. The materials have been reviewed for accuracy, appropriateness, and conformance with public health principles.

This Substance Abuse Resource Guide was compiled from a variety of publications and data bases and represents the most current information to date. It is not an all-inclusive listing of materials on this topic. This guide will be updated regularly, and your comments or suggestions are welcome. To suggest information or materials that might be included in future editions, please write to the National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, MD 20847-2345.

Produced by the National Clearinghouse for Alcohol and Drug Information, Andrea B. Miller, editor.

For further information on alcohol, tobacco, and other drugs, call 1-800-729-6686, 301-468-2600, or TDD 1-800-487-4889.



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# Prevention Materials

## ***Materials for Parents' Personal Interest***

### **Keeping Youth Drug-Free: A Guide for Parents, Grandparents, Elders, Mentors, and Other Caregivers**

Organization: National Clearinghouse for Alcohol and Drug Information

Year: 1995

Format: Book

Length: 35 pages

Inventory Number: PHD711

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

**Keeping Youth Drug-Free** is a graphically appealing guide targeting the caregivers of children ages 9 to 13. Divided into five sections, this guide is based on the five reasons young people give for using alcohol, tobacco, and other drugs. The guide provides role-playing and skill-building exercises to help prevent alcohol, tobacco, and other drug problems.

### **Growing Up Drug Free: A Parent's Guide to Prevention**

Organization: U.S. Department of Education

Year: 1992

Format: Book

Length: 52 pages

Inventory Number: PHD533

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

This colorful handbook outlines what children at four key stages of development should know about drugs and suggests family activities to reinforce children's motivation to avoid alcohol

and other drugs. Also available on audiocassette and in Spanish.

### **Quick List: 10 Steps to Help Your Child Say "No"**

Organization: Center for Substance Abuse Prevention

Year: 1991

Format: Brochure

Length: 6-page foldout

Inventory Number: PH230

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

Brief and easy-to-read, this brochure suggests 10 things parents can do to help a child say no to alcohol, tobacco, or other drugs. Ideas include helping your child feel good about himself or herself, helping your child develop strong values, making family rules, and talking to your child about alcohol and other drugs. Also available in Spanish.

### **Inhalant Abuse. Its Dangers Are Nothing to Sniff At**

Organization: National Institute on Drug Abuse

Year: 1994

Format: Booklet

Length: 8 pages

Inventory Number: PHD675

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

Often referred to as "sniffing," teenagers' abuse of inhalants has been on the rise. Based upon recent research on the use and prevalence of inhalants, this report presents information on various types of inhalants, the consequences of use, who is abusing inhalants, and where to get help.

## Tips for Teens

Organization: Center for Substance Abuse Prevention

Year: 1994

Format: Brochure

Length: 2 pages

Inventory Number: See Below

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

Each of these colorful trifold brochures contain facts and resources on the following subjects: alcohol (PH323), crack and cocaine (PHD640), hallucinogens (PHD642), marijuana (PHD641), inhalants (PHD631), and smoking (PHD633). Designed to attract attention and concern, the brochures state the long-term and short-term effects, physical and psychological risks, impact on sexual performance, and legal implications. Teens are advised to stay away from all drugs and encouraged to seek help from a counselor, friend, or parent whenever necessary.

## Making Prevention Work Actions for Parents, Guardians, and Caretakers

Organization: Center for Substance Abuse Prevention

Year: 1994

Format: Fact sheet

Length: 1 page

Inventory Number: MPW010

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

This black and white reproducible fact sheet provides 13 suggestions for preventing alcohol, tobacco, and other drug problems among family members.

## Be A Drug-Free Family! A Coloring Calendar for 1995

Organization: Channing L. Bete Company

Year: 1995 (updated annually)

Format: Calendar

Length: 26 pages

Availability: Channing L. Bete Company,  
200 State Road, South Deerfield, MA  
01373-0200; 800-628-7733. (\$\$)

This monthly calendar contains a full year of tips for parents of elementary-age children on helping kids avoid alcohol and other drugs. Parents may involve children by having them color the pages and discussing the information provided.

## Drugs 101: Raising Drug-Free Kids

Organization: William Gladden Foundation

Year: 1994

Format: Brochure

Length: 1 page

Availability: Continental Press, 520 E. Bainbridge Street, Elizabethtown, PA 17022; 800-795-7475. (\$\$)

This simple brochure discusses why kids use drugs, how parents can raise drug-free kids, how to handle parental conflicts wisely, how to teach kids to handle stress, how to be a role model, and how to promote positive self-esteem.

## Tobacco Use: A Message to Parents and Teens. Guidelines for Parents

Organization: American Academy of Pediatrics

Year: 1994

Format: Brochure

Length: 1 page

Availability: American Academy of Pediatrics, Division of Publications, 141 Northwest Point Blvd., P.O. Box 927, Elk Grove, IL 60009-0927; 708-228-5005. (\$\$)

This brochure explains the effects of second-hand smoke on infants and children, as well as information about teenage smoking, adult tobacco use, and smokeless tobacco. Parents who would like to quit using tobacco are encouraged to talk with a family pediatrician.

## **Getting Your Kids to Say "No" in the '90s When You Said "Yes" in the '60s: Coping with Teenage Sex, Drugs, TV, and Rock 'N' Roll**

Year: 1993

Format: Book

Length: 286 pages

ISBN: 0-671-79796-4

Availability: At bookstores and libraries; or contact Fireside Books, Simon and Schuster, Rockefeller Center, 1230 Avenue of the Americas, New York, NY 10020; 800-223-2336 (\$\$)

This book is intended to help parents understand the difficulties in being a teenager in American society. The author discusses the complexities of modern society and modern families and the risks to which children and teenagers are potentially exposed -- sex, drugs, homicide, suicide, and AIDS.

## **Keeping Your Child Drug-Free. For Parents Only Series**

Organization: The Bureau for At-Risk Youth

Year: 1994

Format: Booklet

Length: 12 pages

Inventory Number: P2069

Availability: The Bureau for At-Risk Youth, 645 New York Avenue, Huntington, NY 11743; 800-99-YOUTH (\$\$)

Society's casual attitude toward nicotine and alcohol makes children vulnerable to these gateway drugs. It is important for parents to tell their kids the truth about the consequences of alcohol and other drug use. The booklet also provides a list of behavioral indicators of drug use, tips for teaching children to say no, and a list of resources.

## **Leave Me Alone!**

Year: 1993

Format: Book

Length: 176 pages

ISBN: 0-8306-2537-2

Availability: At bookstores and libraries; or contact TAB Books, McGraw-Hill, Blue

Ridge Summit, PA 17294-0850; 800-262-4729 (\$\$)

When teenagers are diagnosed with both substance use and mental health disorders, they and their parents need help to uncover and work through the associated problems. The book describes the terms "dual diagnosis," "codependency," and "normal adolescence;" as well as various psychiatric and emotional problems and treatment options.

## **Contract for Life**

Organization: Students Against Driving Drunk, in conjunction with the National Highway Traffic Safety Administration

Year: 1995

Format: Contract

Length: 1 page

Availability: S.A.D.D. Custom Products, P.O. Box 524, Hudson, MA 01749; 508-562-9716, Fax 508-562-9724. (single copies free)

The Contract is a formal written agreement between a young person and his or her parents. It acknowledges potential situations involving impaired driving and the family's desire to cooperate and face them together.

## **Marijuana: An Introduction to the Facts**

Organization: Life Skills Education

Year: 1994

Format: Booklet

Length: 13 pages

Availability: Life Skills Education, 314 Washington Street, Northfield, MN 55057; 800-783-6743. (\$\$)

This comprehensive resource for marijuana information answers many common questions about the drug. Topics include the chemical makeup, where it originates, the physical and psychological effects, why reactions are unpredictable, and addiction and dependence. A note to parents and additional resources are also included.

## **Alcohol Is A Drug, Too: What Happens to Kids When We're Afraid to Say No**

Organization: The Johnson Institute

Year: 1993

Format: Book

Length: 80 pages

ISBN: 1-56246-057-9

Availability: Johnson Institute, 7205 Ohms Lane, Minneapolis, MN 55439-2159; 800-231-5165. (\$\$)

Adults use many myths to rationalize adolescent drinking. This book explores these myths and presents the facts about dangers both teenagers and communities face when teenage drinking goes unchecked. Strategic solutions for parents, schools, and communities to address underage drinking are provided.

## **Help! For Kids and Parents About Drugs**

Organization: Harper-Collins Publishers

Year: 1993

Format: Book

Length: 158 pages

ISBN: 0-06-250158-5

Availability: At bookstores and libraries, or contact Harper-Collins Publishers, P.O. Box 588, Dunmore, PA 18512; 800-242-7737. (\$\$)

Parents, "the primary power in the prevention of drug abuse," will find that this book can help them create the kind of home environment that will keep their children off drugs. It offers advice from parents to parents including: what to teach kids about drugs, what to offer as an alternative to drugs, and how to build self-esteem.

## **Alcoholism... Tends to Run in Families**

Organization: Center for Substance Abuse Prevention

Year: 1995

Format: Brochure

Length: 2 pages

Inventory Number: PH318

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

This fold-out brochure opens to an attractive poster on one side. The reverse side provides questions and answers about children of alcoholics, such as why they have increased risk for alcoholism, and what can be done to help. A list of resources for additional information follows.

## **Prevention Materials for Parent-Educators, Counselors, and Community Leaders**

### **The Discovery Kit**

Organization: Center for Substance Abuse Prevention

Year: 1992

Format: Kit

Length: See Below for Contents

Inventory Number: DISKIT

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

This cross-cultural program helps communities build resiliency in 10- to 15-year-old kids by helping them connect to positive influences in their lives. The messages and materials are for all children, but especially children of alcoholics and other children who are at higher risk for developing alcohol or other drug problems.

The kit contains: "Growing Up Isn't Easy," a videotape that teaches basic facts about alcohol, alcoholism, and the risks for children from alcoholic families; "Life is Belonging," a full-color American Indian booklet that builds on the tradition of storytelling; "Marta's Choice," a story about a Hispanic-American girl, that gives multiple plot choices to the reader; "Michael's Jour-

ney," a videotape depicting the lives of two African-American boys from two different alcoholic families; and two posters that provide strong, visual support for messages in the Discovery Kit. Lastly, a Program Guide offers comprehensive suggestions for the facilitator on achieving the best results from the Kit and a set of 24 loose-leaf activity worksheets enhances the lessons for the participants.

### **Young Teens: Who They Are and How to Communicate with Them about Alcohol and Other Drugs**

Organization: Center for Substance Abuse Prevention

Year: 1993

Format: Book

Length: 51 pages

Inventory Number: PH306

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

This book focuses on how to develop marketing concepts to reach youngsters between the ages of 10 and 14. Section 1 outlines some of the most common developmental characteristics of boys and girls this age. The next sections review the literature on social marketing approaches and offer a framework for planning, developing, and promoting messages and materials for youth.

### **The Tobacco Industry's Advertising Tactics: Look What They're Doing to Our Kids**

Organization: Health Services Department, Contra Costa County, CA

Year: 1994

Format: Videotape

Length: 15 minutes

Inventory Number: T.B.A.

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (T.B.A.)

This videotape educates concerned parents about the ways the tobacco industry promotes tobacco use in children. Methods that the tobacco companies use to advertise to teenagers are explained. One such method involves placing cigarette advertisements next to articles teenagers will read in magazines. The videotape offers ideas for concerned citizens to obstruct the sale and distribution of tobacco products in their community.

### **The Tobacco Industry's Advertising Tactics: Look What They're Doing to Our Kids Lesson Plans**

Organization: Pennsylvania State University, Department of Health Education

Format: Classroom material

Length: 9 pages

Inventory Number: T.B.A.

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (T.B.A.)

Four lessons are included: (1) Identifying why adolescents begin using tobacco, and why they are a prime target for tobacco industries. (2) Identifying ways to fight back against cigarette advertisements, and identifying local and national organizations opposing cigarette advertisements. (3) Critiquing cigarette advertisements from magazines, identifying the target population and subliminal message in each ad; and (4) Recognizing cigarette advertiser manipulation by creating collages using magazine ads and identifying manipulating techniques used by cigarette advertisers.

## **Building Resiliency: What Works! A Community Guide to Preventing Alcohol and Other Drug Abuse Through Positive Youth Development**

Organization: The National Assembly of National Voluntary Health and Social Welfare Organizations

Year: 1994

Format: Book

Length: 94 pages

Availability: The National Assembly, 1319 F Street NW, Suite 601, Washington, DC 20004; 202-347-2080. (\$\$)

**T**his guide focuses on how positive youth development, and building resilience against risk factors can prevent alcohol and other drug use. Essential elements of effective prevention programs are listed. The book offers examples of multi-disciplinary programs that have successfully used positive youth development and strategies that have not been successful. The guide was developed through collaboration of government policymakers, researchers, youth-services providers, and youth.

## **What Kids Should Know About Parents and Drinking**

Organization: Channing L. Bete Company

Year: 1993

Format: Booklet

Length: 15 pages

Availability: Channing L. Bete Company, 200 State Road, South Deerfield, MA 01373-0200; 800-628-7733. (\$\$)

**P**arental alcoholism can have severe effects on young people in a family. The booklet discusses how a parent's drinking problem affects a youngster's feelings and behaviors, and encourages children of alcoholic families to get help.

## **Are Your Kids Making Friends or Drinking Buddies?**

Organization: Facing Alcohol Concerns Through Education (FACE)

Year: 1993

Format: Poster, Bookmark, or Table Tent

Availability: Facing Alcohol Concerns Through Education (FACE), 105 West Fourth Street, Clare, MI 48617; 517-386-2315 (\$\$)

**T**he graphic depicts eight "average looking" teenagers posing for the camera. Underneath the picture are the words "Kids drink to fit in. And millions of them are getting drunk, getting sick, getting hurt, and getting killed. Find out what's going on with kids and alcohol. Make the choice to make a change." The reverse of the bookmark and table tent cites statistics about why alcohol and kids don't mix. The photo represents youth of various ethnic and social groups. Its purpose is to raise awareness among parents and encourage action.

## **Intervening with Parents of Students Who Abuse Alcohol or Other Drugs**

Year: 1993

Format: Classroom material

Length: 115 pages

Availability: Community Recovery Press, P.O. Box 20979, Greenfield, WI 53220; Fax 414-679-0384. (\$\$)

**T**his guide focuses on the prerequisites to effective intervention, such as defining the nature of the problem and denial; then provides tasks essential to preparing for successful structured intervention. Appendices include legal resources and additional tools for the facilitator.

## Parents Getting a Head Start Against Drugs

Organization: National Head Start Association

Year: 1993

Format: Curriculum

Context: 3-part series

Inventory Number: see below

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686. (free)

This is a 10-module parent and child Head Start curriculum designed to teach parenting skills and alcohol and other drug use prevention. Topics cover self-esteem, communications, stress, support groups, peer pressure, health issues, and appreciation for the family unit. Workshops mesh with activities provided for children. The series consists of three books: a Trainer's Guide (PHD649), Teacher's Guide (PHD647), and Parent's Activity Book (PHD648). Each book follows the 10-module format.

# Studies, Articles, and Reports

## **Families, Adolescents, and Drugs: Review and Interpretation of the Research Literature**

*Carlson, A.C.*

In: R. Pedone and M. K. Gwaltney, Eds., *Perspectives on Preventing Student Drug Abuse*

Washington, DC: U.S. Department of Education, 1989. 270 p. (pp. 45-65)

This review examines research literature on families, adolescents, and drugs. It was not until the 1950s that illegal drug use among children and youth became a source of considerable worry. Studies began to document a changing addict population. Experts also began to detect a rising sense of rebellion among the urban young that threatened to extend beyond the slums. The 1960s became a decade almost defined by the explosive increase in drug use among teenagers and young adults. The change in American life, reflected in the drug arrest statistics, also could be witnessed in trends in family life. Statistical evidence pointed to an unprecedented collapse of normative social arrangements. The divorce rate rose 140 percent. During the 1950-69 period, researchers in sociology and psychology, who looked at the family-drug equation, moved toward a common conclusion: family life, properly structured, could and did insulate children from drug experimentation and use, and the more traditional the family, the greater the degree of protection. The implications of this paper, according to the author, show that the incidence of future drug use will be significantly related to the proportion of traditional families within the population. The sum of the research data is unambiguous: children are insulated from the use of illicit drugs within intact

families, where religion is an active and vital force, with many siblings and meaningful linkages to other relatives.

## **Parental Monitoring and Peer Influences on Adolescent Substance Use**

*Steinberg, L.; Fletcher, A.; Darling, N.*

*Pediatrics* 93(6):1060-1064, 1994

This study examined the joint influences of parental monitoring and peer influence on adolescent substance use over time. Six thousand five hundred adolescents attending six high schools in Wisconsin and northern California were used in a longitudinal study. Parental monitoring was negatively associated with substance use, whereas the more involved an adolescent's peers were in substance use, the more likely he or she also was to use drugs and alcohol. Effects of monitoring and peer coercion were strongest for boys and girls at the transition into substance use, rather than at the transition from experimentation to regular use. The effect of parental monitoring on changes in adolescent substance use is mediated not so much by the nature of the adolescent's peer associates, but by its direct effect on the adolescent. Specifically, poorly monitored adolescents are more likely to use drugs, and drug-using adolescents seek out like-minded friends. Once an adolescent associates with drug-using peers, his or her own substance use approaches their level. Intervention efforts should include both parents and community-level efforts. Parental monitoring is an effective tool both in the prevention of drug use and in the amelioration of drug use.

## Differential Influence of Parental Smoking and Friends' Smoking on Adolescent Initiation and Escalation of Smoking

Flay, B.R.; Hu, F.B.; Siddiqui, O.; Day, L.E.; Hedeker, D.

*Journal of Health and Social Behavior*  
35(3):248-265, 1994

Smoking-related behaviors and attitudes of significant others (especially friends and parents) are among the most consistent predictors of adolescent smoking. However, theorists remain divided on whether the behaviors of significant others influence adolescent smoking directly or indirectly, and the relative influence of parental and peer smoking on adolescents' own smoking is still a matter of debate. In addition, little research has examined the role of significant others' behavior on different stages of smoking onset. In particular, not much information is available regarding gender and ethnic differences in social influences on smoking behavior. The authors use structural equation modeling to address these issues. Various theoretical perspectives from cognitive-affective and social learning theories have been integrated into a structural model of smoking influence. The results show that friends' smoking affects adolescent initiation into smoking both directly and indirectly, whereas parental smoking influences smoking initiation only indirectly. The data also show that friends' and parents' smoking affect smoking escalation only indirectly. In general, friends' smoking has a stronger effect on adolescents' smoking behavior, particularly on initiation. Multiple group comparisons of the structural models predicting smoking initiation among males and females reveal that parental approval of smoking plays a significant mediating role for females, but not for males. Comparisons of Whites, Blacks, Hispanics, and other ethnic groups reveal some significant differences in the pathways of friends' influences among the four groups.

## Parenting Behaviors and the Onset of Smoking and Alcohol Use: A Longitudinal Study

Cohen, D.A.; Richardson, J.; LaBree, L.

*Pediatrics* 94(3):368-375, 1994

This study identified specific parenting behaviors associated with the onset of alcohol and tobacco use and how they are associated. A prospective cohort study of two groups of preadolescents surveyed annually was conducted, the first group for 4 years, the second for 3 years. In two public school districts in Southern California, 1034 fifth graders and 1266 seventh graders began the study after obtaining parental consent to complete surveys in a classroom setting. By the last measurement, attrition was 37 and 38 percent for the two cohorts, respectively. Researchers measured the onset of tobacco or alcohol use in the last month. Children who reported that parents spent more time with them and communicated with them more frequently had lower onset rates of using alcohol and tobacco in the last month. These parental interactions lead to more positive relationships with their children. Parental monitoring and positive relations were protective factors for disruptive behavior and the selection of substance-using friends. Disruptive behavior increased the odds of adolescents drinking in the last month approximately twofold and of smoking in the last month two to fourfold. This study provides further evidence that parenting behaviors are significant precursors to adolescent disruptive behavior, vulnerability to peer pressure, and subsequent substance use. Future substance use prevention programs should target parents before their children reach adolescence.

## Knowledge and Attitudes of Parents Who Smoke About the Smoking Behavior of Their Children

Stacy, R.D. and McIlvain, H.E.

*Journal of Alcohol and Drug Education*  
40(1):103-114, 1994

The purpose of this exploratory study was to determine the knowledge about smoking issues, attitudes about smoking by their children, and beliefs about their ability to prevent their children from smoking among parents who smoke and have children in the sixth grade. Sixty parents who smoke and have children in the sixth grade were selected at random from elementary schools in the Omaha, NE, public schools. Results indicate that although there are areas where these parents seem to have an adequate level of knowledge about smoking, there are other crucial areas about which their knowledge is incomplete or lacking. Their attitudes about their children and smoking are generally positive. They generally do not believe that they will be effective in preventing their children from smoking. Limitations and recommendations are presented.

## Peer and Parental Influences on Adolescents' Substance Use: A Path Analysis

Webster, R.A.; Hunter, M.; Keats, J.A.

*The International Journal of the Addictions*,  
29(5), 647-657, 1994

Five hundred and seven 14- to 16-year-old students gave self-report responses to a substance use questionnaire. The questionnaire assessed adolescents' use, preferences, and norms and also their perceptions of their parents' and peers' use and norms in relation to alcohol, tobacco, and tea/coffee. Path analysis revealed that adolescents' internalization of parental and peer pressures is a stronger predictor of substance use than are direct effects. Internalized effects occur by means of preferences rather than

norms, and peer pressure is predominantly through modeling behavior, whereas parental influence is through perceived normative standards. Peers' influence is stronger in relation to tobacco use, parental influence is stronger in relation to tea/coffee use, and both are equally important in relation to alcohol use. These findings are discussed in relation to preventive strategies.

## Parental Dissatisfaction with Sons in Substance Abusing Families: Relationship to Child and Parent Dysfunction

Ammerman, R.T.; Loeber, R.; Kolko, D.J.; Blackson, T.C.

*Journal of Child and Adolescent Substance Abuse* 3(4):23-36, 1994

Considerable attention has focused on the role of family dysfunction in the development of adolescent substance use, particularly in families where a parent has a history of alcohol and drug abuse. This study examined parental reports of dissatisfaction with 41 boys (ages 10-12) of fathers with a history of substance abuse (SA+) and 68 boys of fathers without such a history (SA-). Higher dissatisfaction ratings by both mothers and fathers were found in the SA+ group in contrast to the SA- group. Both child externalizing behavior problems and parental personality characteristics were correlated with dissatisfaction. Stepwise regression analysis revealed that fathers' negative affectivity, followed by externalizing symptoms in the boys, were most predictive of dissatisfaction in both mothers and fathers. The implications of these results for an understanding of the adverse family context of substance abuse are discussed.

## Parental Divorce and the Change in Drinking Behavior From High School to College

Billingham, R.E.; Post, J.; Gross, W.C.

*Psychological Reports* 72(3):1275-1281, 1993

A survey of 192 male and 289 female college students provided information about their drinking behavior both currently and in their senior year in high school. These data were analyzed by students' sex and family structure. Men drank significantly more than women. No differences for family structure were noted. Students from divorced families drank less, while students from intact families drank more than they did as seniors in high school. This was true for more men than women. Results support the position that current drinking behavior may be associated with a decrease in parental or adult supervision, which is experienced earlier for those whose parents have divorced and later (upon entering college) for those students whose parents have not divorced.

### **Urine Drug Screening of Adolescents on Request of Parents**

*Tennant, F.*

*Journal of Child & Adolescent Substance Abuse* 3(3):75-81, 1994

The availability of urine screening has resulted in parents seeking this procedure when they suspect their adolescent uses drugs. To systematically evaluate this practice, 100 consecutive adolescents were screened by use of a sensitive quantitative method that can detect low levels of drug use. A total of 43 percent of the adolescents tested positive for one or more drugs, and 25 percent entered treatment. Eight (8 percent) proved dependent upon drugs to the point of requiring medical detoxification or inpatient treatment. In this study, urine screening, which was done for clinical rather than punitive purposes, appeared to facilitate entry into treatment.

### **Childhood Abuse of Parents of Alcohol and Other Drug Misusing Adolescents**

*Peters, K.R.; Maltzman, I.; Villone, K.*

*International Journal of the Addictions* 29(10):1259-1268, 1994

Parental history of childhood physical/sexual abuse was examined among 68 parents of hospitalized middle-class adolescent alcohol and drug users and 68 parents of comparable nonhospitalized adolescents. Differences in reports of childhood physical and/or sexual abuse were nonsignificant by group or gender. Abused as compared to non-abused parents reported significantly greater alcohol dependency, more lifetime medical and childhood hyperactivity symptoms, lower levels of socialization, and greater levels of verbal ability, neuroticism, and addiction proneness.

### **Alcohol and Drug Disorders Among Physically Abusive and Neglectful Parents in a Community-Based Sample**

*Kelleher, K.; Chaffin, M.; Hollenberg, J.; Fischer, E.*

*American Journal of Public Health* 84(10):1586-1590, 1994

This study compared the frequency of substance use disorders and symptoms between adults reporting child physical abuse or neglect and individually matched control subjects in a community sample. In a nested case-control study, 169 adults reporting physical abuse of a child and 209 adults reporting neglect of a child, from 11,622 individuals were successfully interviewed in a probabilistic survey in four communities. Subjects were individually matched with control subjects drawn from the participants. Case subjects were compared with control subjects on the number of alcohol- or drug-related symptoms and disorder diagnoses as determined by symptoms from the Diagnostic Interview Schedule. Respondents reporting either physical abuse or neglect of children were much more likely than their matched control subjects to report substance abuse or dependence. These differences persisted after potential confounding variables were controlled. Parental substance abuse and dependence, independent of

confounding factors, are highly associated with child maltreatment. Inconsistent results in previous studies may have arisen from reliance on referred samples and unstandardized assessment methods. Agencies involved in the care of abused or neglected children and their families should consider incorporating routine substance abuse evaluations with treatment, or referral for treatment, where indicated.

### **Parent-Child Closeness Affects the Similarity of Drinking Levels Between Parents and Their College-Age Children**

*Jung, J.*

*Addictive Behaviors* 20(1):61-67, 1995

College males reported drinking more frequently and in higher amounts than females. Correlations between quantity-frequency (QF) indices of drinking by parents and by their college-age children showed the greatest similarity between fathers and sons. Log linear analyses compared each parent's drinking level against each of three other factors that might affect the QF levels of college-age children: the relationship between parent and child, the effect of the parent's drinking on the parent, and how the parent's drinking affected his or her treatment of the child. The results supported models in which the relationship of each parent's drinking to the QF levels of both sons and daughters was affected by the closeness of the parent-child relationship. However, there was no support for models involving how each parent's drinking affected that parent or how each parent's drinking affected treatment of the child.

### **Multicultural Effectiveness Training (MET) for Hispanic/Latino Parents**

*Mancilla, Y.; Szapocznik, J.; Kurtines, W.M.*

In: J. Szapocznik, Ed., *A Hispanic/Latino Family Approach to Substance Abuse Prevention*

Rockville, MD: Center for Substance Abuse Prevention, 1994, 207 p. (pp. 111-124)

(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686; Inventory Number BK222.)

Cultural forces affect family interaction when adolescents are acculturated and their parents are underacculturated. These changes often underlie behavioral problems and drug abuse in immigrant adolescents. The process of multiculturalization occurs in stages: The first stage occurs when new immigrants move to communities that are totally Hispanic/Latino, comprised of families from every Latin American nation. The second stage occurs when these new immigrants are exposed to a fuller community made up of non-Hispanic/Latino cultures, particularly African Americans. The challenge for these new Hispanic/Latino immigrants is to overcome nationalistic and racial differences and learn to live among and get along with other Hispanic/Latino and non-Hispanic/Latino cultures. In Miami, Multicultural Effectiveness Training (MET) consists of four 2-hour sessions on cultural diversity, adaptation, managing problem behavior, and conflict resolution. The lessons give Hispanic immigrant and refugee families the skills to thrive in a multicultural society.

### **Attitudes of Central American Parents Toward Alcohol Use by Their Children**

*Tyler, F.B.; Tyler, S.L.; Kaljee, L.M.; Hopps, H.*

*Journal of Alcohol and Drug Education* 39(2):25-36, 1994

As part of a peer counseling program, 71 parents in a predominantly Central American neighborhood in Washington, DC, were interviewed to determine their attitudes toward the use of alcohol by

their sons and daughters. Parents overwhelmingly considered their own drinking behavior to influence their children's drinking behavior, but generally would not permit their children to drink. However, they said they would do little if they discovered that their children were drinking without their permission. Recommendations are made for including attention to these parental inconsistencies in Latino youth oriented alcohol prevention or intervention programs.

### **Family System Characteristics and Parental Behaviors as Predictors of Adolescent Substance Use**

*Anderson, A.R. and Henry, C.S.*

*Adolescence* 29(114):405-420, 1994

The purpose of this study was to examine adolescent perceptions of family system characteristics and parental behaviors as predictors of adolescent substance use. Self-report questionnaire data were collected from a sample of 489 high school students. Bivariate correlations and multiple regression analysis were used to examine the research hypotheses. Results indicated that the frequency of parental substance use was positively related to adolescent substance use, while family bonding and parental support were negatively related. The results provide support for considering both family system characteristics and parenting behaviors in relation to adolescent substance use.

### **Influence of Family Disharmony and Parental Alcohol Use on Adolescent Social Skills, Self-Efficacy, and Alcohol Use**

*Webb, J.A. and Baer, P.E.*

*Addictive Behaviors* 20(1):127-135, 1995

Defects in social skills have been found to be related to adolescent substance use. Little effort has been devoted to understanding how family factors influ-

ence the acquisition of these skills. This study examined the manner in which family disharmony and parental alcohol use affect adolescent alcohol use through their influence on the acquisition of social skills and self-efficacy regarding one's ability to utilize these skills. It was hypothesized that family disharmony and parental alcohol use directly influenced usage and affected usage indirectly through their influence on acquisition of social skills. Social skills were also hypothesized to affect usage directly and to affect usage indirectly by influencing beliefs regarding one's ability to implement these skills. Results indicated that family disharmony was directly related to adolescent alcohol use and social skills. Parental alcohol use was related only to adolescent usage, not to social skills. Social skills were related to self-efficacy, which was related to alcohol use but was not directly related to usage. Results are discussed in terms of the importance of family influences on adolescent alcohol use, the importance of including families in prevention efforts, and the importance of the acquisition of self-efficacy relative to social skills.

### **National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1993: Volume 1, Secondary School Students**

*Johnston, L.D.; O'Malley, P.M.;  
Bachman, J.G.*

University of Michigan, for United States Department of Health and Human Services, 1994. 281 pp.

(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686.)

The results of the 19th national survey of drug use and related attitudes among American high school seniors, and the third such survey of 8th and 10th grade students are presented. Most notably, this year's results indicate a sharp rise in

marijuana use in all three grade levels. In addition, use of other illicit drugs in the past year rose among seniors, but remains substantially below the peak rate in 1981. Prescription-controlled stimulants showed evidence of a turnaround in 1993, with prevalence rates increasing among all three populations. Inhalants constitute another class of abusable substance where a troublesome increase was seen in 1993. However, cocaine and crack cocaine use have continued to decline and PCP use has remained low. Seniors' use of tranquilizers has also continued to decline. The annual prevalence of heroin use has been steady since 1979 among high school seniors, and the use of opiates other than heroin has been fairly level over most of the life of the study. Trends in cigarette smoking and other substance use also are examined.

## **Studies, Articles, & Reports about Parenting and Drug-Abusing Women**

### **Specialized Treatment Can Help Pregnant and Parenting Teenagers Who Abuse Drugs**

*Mathias, R.*

*NIDA Notes* Feb./Mar 1994. p. 7

(Available from the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 800-729-6686.)

Early results of two research projects indicate that specialized training added to comprehensive rehabilitation programs can help pregnant and parenting teenagers who have used drugs or who are at risk of using drugs to improve the quality of their lives and function better in society. Girls who receive vocational training along with a comprehensive rehabilitation package use drugs less often, have fewer new pregnancies, and are more successful in securing jobs after completing the program than girls

who get the rehabilitation package without the job training. Data also indicate that mothers who get job training suffer less depression and have better peer relations than mothers who do not receive training. Intensive skills training improves the quality of the teenagers' social networks and upgrades their social skills as well.

### **Parenting and Early Development Among Children of Drug-Abusing Women: Effects of Home Intervention**

*Black, M.M.; Nair, P.; Kight, C.; Wachtel, R.; Roby, P.; Schuler, M.*

*Pediatrics* 94(4):440-448, 1994

The objective was to evaluate the efficacy of home intervention on parenting behavior and attitudes of drug-abusing women and on development of their children. A randomized, clinical trial of 60 drug-abusing women were recruited prenatally and randomized into an intervention (n=31) or comparison (n=29) group. Most mothers were single, African-American, multiparous, and non-high school graduates from low-income families. Approximately 40 percent of the women were human immunodeficiency virus (HIV)-positive, all admitted to either cocaine and/or heroin use, and 62 percent had a history of incarceration. Intervention and comparison group women did not differ on any background variables. All children received primary care in a multidisciplinary clinic. Biweekly home visits were provided by a nurse beginning before delivery and extending through 18 months of life. The intervention was designed to provide maternal support and to promote parenting, child development, the utilization of informal and formal resources, and advocacy. Behavioral measures included self-reported ongoing drug abuse, compliance with primary care appointments, and an observation of the child-centered quality of the home (HOME Scale). Parenting attitudes were measured by the Child

Abuse Potential Inventory (CAPI) and the Parenting Stress Index. The CAPI was administered before initiating the intervention and the Parenting Stress Index was administered when the children were 18 months of age. Developmental status was measured with the Bayley Scales of Infant Development administered at 6, 12, and 18 months. Repeated measures multivariate analyses of variance were used to examine changes in parenting attitudes and children's development. Analyses of covariance were used to examine compliance with primary care appointments and the quality of the home. Logistic regression was used to examine ongoing drug abuse. Birth weight and maternal education were used as covariates in all analyses. To control for social desirability, the faking-good index of the CAPI was included as a covariate in analyses involving self-report measures. Women in the intervention group were marginally more likely to report being drug-free ( $P = .059$ ) and were compliant with primary care appointments for their children ( $P = .033$ ) and provided marginally more opportunities for stimulation ( $P = .065$ ). At 18 months parents reported more normative attitudes regarding parenting and more child-related stress than they had initially, but the differences were not related to intervention status. At 6 months infants in the intervention group obtained marginally higher cognitive scores ( $P = .099$ ); at 12 and 18 months there were no differences. The findings suggest a cautious optimism regarding the efficacy of early home intervention among drug-abusing women in promoting positive behaviors. Subsequent investigations of home intervention should include larger sample sizes and more intensive options.

# Groups, Organizations, and Programs

## **Al-Anon/Alateen Family Group**

**Headquarters, Inc.**  
P.O. Box 862  
Midtown Station  
New York, NY 10018-0862  
800-344-2666 (USA)  
800-443-4525 (Canada)

## **Alcoholics Anonymous World Services**

475 Riverside Drive  
New York, NY 10115  
212-870-3400

## **Boys and Girls Clubs of America**

1230 West Peachtree Street NW  
Atlanta, GA 30309  
404-815-5700

## **Camp Fire, Inc.**

4601 Madison Ave.  
Kansas City, MO 64112  
816-756-1950

## **CDC's National AIDS Clearinghouse**

P.O. Box 6003  
Rockville, MD 20849-6003  
800-458-5231

## **Center for Science in the Public Interest**

1875 Connecticut Avenue NW,  
Suite 300  
Washington, DC 20009-5728  
202-332-9110

## **Clearinghouse on Family Violence Information**

P.O. Box 1182  
Washington, DC 20013  
703-385-7565

## **Girls Incorporated**

30 East 33rd Street, 7th Floor  
New York, NY 10016  
212-689-3700

## **"Just Say No" International**

2101 Webster Street  
Suite 1300  
Oakland, CA 94612  
800-258-2766

## **Mothers Against Drunk Driving (MADD)**

511 E. John Carpenter Freeway,  
Suite 700  
Irving, TX 75062  
214-744-6233  
800-GET-MADD

## **Nar-Anon Family Groups**

P.O. Box 2562  
Palos Verdes Peninsula, CA 90274  
213-547-5800

## **Narcotics Anonymous**

P.O. Box 9999  
Van Nuys, CA 91409  
818-780-3951

## **National Asian-Pacific American Families Against Substance Abuse, Inc.**

1887 Maplegate Street  
Monterey Park, CA 91755  
213-278-0031

## **National Association for Children of Alcoholics**

11426 Rockville Pike, Suite 100  
Rockville, MD 20852  
301-468-0985

## **National Association of Teen Institutes**

87909 Manchester Road  
St. Louis, MO 63144  
314-962-3456

## **National Association for Native American Children of Alcoholics (NANACOA)**

611 12th Avenue South, Suite 200  
Seattle, WA 98144  
206-324-9360  
800-322-5601

**National Black Child Development Institute (NBCDI)**  
463 Rhode Island Avenue NW  
Washington, DC 20005  
202-387-1281

**National Clearinghouse for Alcohol and Drug Information**  
P. O. Box 2345  
Rockville, MD 20847-2345  
800-729-6686

**National Coalition of Hispanic Health and Human Services Organizations**  
1501 16th Street NW  
Washington, DC 20005  
202-387-5000

**National Council on Alcoholism and Drug Dependence, Inc. (NCADD)**  
12 West 21st, 7th Floor  
New York, NY 10017  
212-206-6770  
800-NCA-CALL

**National Crime Prevention Council**  
1700 K Street NW, 2nd Floor  
Washington, DC 20006  
202-466-6272

**National Domestic Violence Hotline**  
800-333-SAFE

**National Drug Information Center of Families in Action**  
2296 Henderson Mill Road, Suite 204  
Atlanta, GA 30345  
404-934-6364

**National Family Partnership**  
1159B South Towne Square  
St. Louis, MO 63123  
314-845-1933

**National Head Start Association**  
201 N. Union Street, Suite 320  
Alexandria, VA 22314  
703-739-0875

**The National Network of Runaway and Youth Services, Inc.**  
1400 Eye Street NW, Suite 330  
Washington, DC 20004  
202-783-7949

**National PTA Drug and Alcohol Abuse Prevention Project**  
330 North Wabash Avenue  
Suite 2100  
Chicago, IL 60611-3690  
312-670-6782

**National Urban League, Inc.**  
Substance Abuse Programs  
500 East 62nd Street  
New York, NY 10021  
212-310-9000

**Office of Minority Health Resource Center**  
P.O. Box 37337  
Washington, DC 20013-7337  
800-444-6472

**Parents' Resource Institute for Drug Education, Inc. (PRIDE)**  
50 Hurt Plaza, Suite 210  
Atlanta, GA 30303  
404-577-4500  
800-677-7433

**Students Against Driving Drunk (SADD)**  
200 Pleasant Street  
Marlboro, MA 01752  
508-481-3568

**WIC, Supplemental Food Program Division**  
Food and Nutrition Service  
U.S. Department of Agriculture  
3101 Park Center Drive, Room 540  
Alexandria, VA 22302  
703-756-3730

**YMCA of the USA**  
101 North Wacker Drive  
Chicago, IL 60606  
312-977-0031

**YWCA of the USA**  
726 Broadway  
New York, NY 10003  
212-614-2700

# Internet Access Sites

## **Federal Resources**

**The Centers for Disease Control and Prevention (CDC)**

[URL] <http://www.cdc.gov/cdc.htm>

**Administration for Children and Families**

[URL] <http://www.acf.dhhs.gov/>

**National Clearinghouse for Alcohol and Drug Information (NCADI) and PREVline BBS**

[TELNET] [ncadi.health.org](http://ncadi.health.org),  
login=prevline

[FTP] [ftp.health.org](ftp://ftp.health.org)

[GOPHER] [gopher.health.org](http://gopher.health.org)

[URL] [www.health.org](http://www.health.org)

**National Health Information Center (NHIC)**

[URL] <http://nhic-nt.health.org>

**National Institutes of Health**

[GOPHER] [gopher.nih.gov](http://gopher.nih.gov)

[URL] [www.nih.gov](http://www.nih.gov)

**U.S. Department of Health and Human Services**

[GOPHER] [gopher.os.dhhs.gov](http://gopher.os.dhhs.gov)

[URL] <http://www.os.dhhs.gov>

## **Other Resources**

**Alcoholics Anonymous Information and Literature**

[URL] [http://www.moscow.com:80/Resources/SelfHelp/AA/./](http://www.moscow.com:80/Resources/SelfHelp/AA/)

**Family World HomePage**

[URL] <http://family.com/homepage.html>

**Men's Issues Page**

[URL] <http://www.vix.com/men>

**National Parent Information Network**

[URL] <http://ericps.ed.uiuc.edu/npin/npinhome.html>

**Parents Helping Parents**

[URL] <http://www.portal.com/~cbntmkr/php.html>

**ParentsPlace.Com Home Page**

[URL] <http://www.parentsplace.com/index.html>

**SafetyNet: Domestic Violence Resources**

[URL] <http://www.interport.net/~asherman/dv.html>

**PreventionWORKS!**



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