**Cultural adaptation of the Strengthening Families Program 12-16.** A proposal for a family-based program among families of adolescents at risk

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# GOALS

#### Goals of the Family Competence Program (FCP):

- Improvement of family relationships.
- Improvement of parenting skills.
- Improvement of adolescent life skills.
- Improvement of social skills of adolescents.
- To reduce or prevent substance abuse and other risk behaviors

## METHOD

Quasi-experimental design, with control group. As for the experimental group, 81 families began the program, taking part in 11 different applications. Of these 81 families, 69 of them (85.1%) completed the 14 sessions. To analyze family change, the instruments are the Spanish validated version of Kumpfer's questionnaires for parents and children. Furthermore, it is also used the Behavioral Assessment System for Children (BASC), also validated for the Spanish population.

About drugs, the instrument is the Questionnaire about Attitudes towards Drugs (CAD in Spanish), validated questionnaire of the Spanish National Plan against Drugs. Pretests and post-tests with t tests were undertaken, and 6-month follow-ups are now under way. About data analysis, to detect between which groups changes took place, ANOVA with post hoc Tukey b tests is used. Also, the t test and size effects (Cohen d) are calculated.

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#### INTRODUCTION

The Family Competence Program (FCP) for 12 to 16-year-old teenagers is the Spanish adaptation of the Strengthening Families Program (SFP) (Kumpfer & DeMarsh, 1985). Cultural and gender adaptation of the program is implemented. Needs and culture of the adolescents are taken into account. This is an evidence-based program of intervention working with the family factors of the adolescents at risk.

The Questionnaire of attitudes towards drug consumption (CAD, *Cuestionario de actitudes hacia* el consumo de drogas), validated for the Spanish population (Macià, 1986) and used by the Spanish National Drug Plan, is integrated of twenty items in Likert format. The questionnaire is based on the analysis of the value-based dimension (beliefs) and reactive dimension (tendency to act: readiness for consumption) of the attitudes to alcohol and other drugs.



## RESULTS

Significant changes in family dynamics (Karol Kumpfer's questionnaires)



Family resilience (t= -3.382; *p*= 0.001) d=0.828

## **DISCUSSION AND CONCLUSION**

- 1. The PCF shows good protective characteristics, in a context of selective prevention for the teenagers.
- 2. Significant changes in family factors in family resilience, family cohesion, positive parenting and parenting skills.



### Family cohesion (t= -3.390; *p*= 0.001) d=0.761



Positive parenting (t=-5.538; *p= 0.000*) d=0.970

Parenting skills (t= -5.393; *p*= 0.000) d= 1.253

Significant changes in adolescents (BASC questionnaires and CAD)

> Attention problems (t= 2.219; *p=0.028*) d= 0.405



Depression (t= 2.093 ; *p=0.038*) d=0.449



Internalization of problems (t= 2.540; *p=0.028*) d=0.503

- 3. Significant changes and improvements in adolescents in adaptive skills, depression, attention problems and internalization of problems.
- 4. About drug attitudes, in the short term, excellent results. In the PCF 7-12, in the long term, curiosity was recuperated.
- 5. Both girls and boys: good level of protective beliefs regarding drug use.
- 6. Highly recommended: booster sessions.
- 7. Limitations: socially appropriate answers to the questionnaire might be given and there could be learning of the appropriate answers

# FUNDING

This project is funded by the Spanish Government, Research Projects **EDU2013**-**42412-R** – "Cultural adaptation of the Strengthening Families Program 12-16. Proposal of family education evidence-based program for families at risk", 2014-2016. Also funded by La Caixa Foundation. Pilot of the PCF 12-16. Collaboration agreement between La Caixa Foundation and the University of the Balearic Islands (Spain), 2016.



Adaptive skills (t= -2.072 ; *p=0.040*) d=0.373



Improvement of attitudes towards drug use





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