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## Parent Drug Education Programs: Reasons, Problems and Implications

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### Abstract

The prevalence of drugs in society has led many parents to seek assistance from parent drug education programs. However, because of environmental influences, and parental characteristics and needs, drug education programs specifically aimed at parents may not be effective in assisting them to cope with drug problems within their families. This paper presents an overview of parent drug education programs together with information regarding those problems, concerns and needs faced by parents who are dealing with an offspring drug user/abuser. The presentation emphasizes the unique, individual characteristics of parents and suggests that these influences may be the main determinants of the effectiveness of parent drug education programs. The influence of parental characteristics on parent drug education programs warrants more research.

### Résumé

La fréquence des drogues dans la société provoque plusieurs parents à chercher de l'aide en participant aux programmes d'éducation sur les drogues. Pourtant, à cause des influences environnementales et les caractéristiques et les besoins des parents, ces programmes échouent, très souvent, d'aider les parents à affronter les problèmes de drogues dans leurs familles. Cet article présente une vue d'ensemble des programmes éducatifs sur les drogues pour parents aussi bien que des renseignements concernant les problèmes, les soucis, et les besoins des parents avec enfants qui utilisent les drogues. Cette présentation met l'accent sur les caractéristiques uniques des parents et suggère que ces influences pourraient être le déterminant principal de l'efficacité de ces programmes. On a besoin de plus de recherches sur l'influence de ces caractéristiques.

Being a parent in contemporary society is a complex task. Changing societal expectations, varied economic influences, the impact of technology, and demanding social issues all contribute to unparalleled pressures on parents. One area of significant concern for parents is how to help their children effectively manage tobacco, alcohol and drugs. This paper offers a perspective on understanding the role of parents in drug education programs, and seeks to identify common problems and dilemmas encountered by parents of drug abusers.

The emergence of parent drug education programs aimed at assisting parents to become more effective in coping with drug problems in their families is apparent with the expansion of groups such as Al-Anon and Toughlove. Klein and Swisher (1983) suggest that these groups are indicative of a resurgence in public concern about substance abuse, and of parental interest in obtaining relevant information and coping skills. The important role parents can play in coping with drugs within their families and within the community at large are noted by Dupont (in Cohen, 1982, p. 343) who indicates that parents are working to increase their role in drug abuse prevention.

*Understanding the role of parents*

In order to understand parental responsibilities Fox (1988) suggested the need for a deeper understanding of the concept of "parent." Parenthood goes beyond the biological achievement of motherhood and fatherhood; it is, as Barsh (1979) argues, a process of experimentation enacted daily in the home, the neighbourhood, and the community. Parents are individuals, with their own characteristics and history, and acknowledging this individuality is important when assessing parent drug education programs. Individual parental characteristics, needs, awarenesses and understanding, with regard to offspring drug problems can, in fact, influence or even inhibit their ability to participate or succeed in such programs. For example, socioeconomic status, educational experiences, or parental health and well-being can positively or negatively influence the value of such programs. As a consequence, programs may not necessarily be ineffective or inappropriate, but may fail simply because of the impact of the numerous influences that characterize each parent. Laudeman (1984) identified four parental types: (1) the apathetic parent who is too busy or unmotivated to notice signs of drug use and abuse; (2) the burned-out parent who is informed, has likely participated in and attended group meetings, but has simply become too tired to care; (3) the intimidated parent who finds it difficult to get involved, who is especially defensive and strongly denies any need or want to be involved, and, (4) the resigned parent who has thrown in the towel, has accepted failure, and lost hope.

Thus, before parental participation and involvement in group drug education programs can commence, an individualistic, consultative level may be necessary.

*Parent Drug Education Programs: A developing necessity*

The diverse and unique nature of each individual parent presents a complex mandate for parental drug education programs. Powell (1986) reports that the increase in programs for parents has led to groups that range from drop-in centres, discussion groups and home-based interventions. Powell enumerated three reasons for the increased interest in parent education programs: (1) concern about the pressures on today's families (greater participation in the work force among mothers, increasing divorce rates, economic uncertainties); (2) the importance of parents in facilitating their children's development; and, (3) research interest in family influences on child development and the contribution of social conditions and support systems to the quality of family child rearing.

Studies of parent drug education programs have focused on a variety of important aspects. Garfield and Gibbs (1982) suggest that the purpose of parent drug education programs is to restore supportive family life by promoting positive communication and equitable societal standards.

Furthermore, Barnes and Greenwood (1987) suggest that while not much is known about the particular aspects that determine a program's effectiveness, the fundamental aim of parent drug education programs is to improve parenting skills by increasing parents' knowledge in the areas of parenting and of alcohol and drug use. Summerlin and Ward (1978) believe that parent education models have been developed in an attempt to look at the family system as an appropriate target for focusing on the developing child, while Grady, Gersick and Borantynski (1985) argue that programs are necessary because parents, just like their offspring, experience difficulty when their child moves from childhood to adolescence.

### *Factors Influencing Parent Program Effectiveness*

In 1983, a survey taken from 12 sites across Canada determined that parents knew very little about drugs and that this lack of knowledge makes them feel uncomfortable. In addition, parents at a *Parents Show* expressed a critical need for information pertaining to drug use and drug problems (*Winnipeg Free Press*, May, 1988). Generally, there is a strong demand by parents for information that will improve their awareness regarding the prevalence of drug use in their community, and that will help them to deal with the problem if it should occur in their family.

A dominant theme in the empirical research dealing with parent drug education programs is concerned with determining the strategies that can prevent offspring from experimenting with drugs. Most programs focus on behaviour modification techniques or improved communication methods between the parent and child (Barnes and Greenwood, 1987; Cannon, 1976; Grady et al., 1985).

Jurich et al. (1985) contend that one of the main social skills needed for coping with stressful situations, a skill which both the drug users and their families seem to lack, is the ability to communicate effectively. This observation is substantiated by Streit, Halsted and Pascale (1974), and Hamburg, Kramer and Jahnke (1975). They determined, by way of interviews and attitude analysis, that most drug users feel that their parents did not understand them and in fact, that their parents blocked communication. Furthermore, Jurich et al. (1985) write that parents of drug users often cover up their parental failures by means of denial and thus do not press for communication. Cannon (1976) suggests that many parents shun communication with their offspring in order to avoid hearing anything negative. Generally, the research highlights the necessity and importance of communication between parents and offspring drug users, however, the effectiveness of such communication, as a means for dealing with or preventing drug experimentation, has not yet been established.

Research investigating modes of effective parental intervention is generally based on comparing behaviour modification techniques with altered communication skills. Pinsker and Geoffry (1981) compared

parent effectiveness training (based on improved communication strategies) with behaviour modification techniques (dealing with direct behaviour change). Their study indicated that the behaviour modification group demonstrated a significant decrease in problem behaviours in their target children, whereas the effectiveness training group did not achieve any significant results with problem behaviours. In addition, Klein and Swisher (1983), using the Communication and Parenting Skills program (CAPS), found that there was a significant increase in the acquisition and utilization of constructive responses by participants who had taken part in the program. Furthermore, Barnes and Greenwood (1987) determined that a post-training sample of parents, and children of parents who had received the Kids and Drugs program, compared to a pre-training, wait-list control group, showed improved communication patterns between parents and offspring. Finally, Frazier and Matthes (1975), using 55 volunteer parents randomly assigned to either the Adlerian (teaching the concepts of co-operation, democracy and communication) group, the behaviour management treatment group, and a control group receiving no parenting skills, determined that parents involved in the Adlerian group demonstrated higher scores in the Attitude toward the Freedom of Children Scale. These parents were determined to be less restrictive than the others in their attitude toward children. The parents in the behavioural condition were less restrictive than those in the control condition. Summerlin and Ward (1978, 1981) determined that parents involved in parent education programs showed differences in attitudes toward self-concept and achieved an increased awareness of their offspring's problems.

Determining the appropriateness of parent drug education programs may be based on the impact of current issues within the community at large. These issues can include the benefits or effects of programs, behaviours that may evolve, or are needed to evolve out of such programs, and environmental influences on the programs.

In recognizing the aims and purposes of parent drug education programs, researchers have measured the impact of the programs and found that in some instances attitude and behaviour changes have occurred for both parent and offspring (Barnes and Greenwood, 1987). In addition, some coping strategies and techniques have been deemed more successful than others. However, because of the multitude of variables which can have both positive and negative effects on parent drug education programs, the results of such studies must be carefully scrutinized and more research is necessary in this area.

Literature suggests that parent drug education programs may not always be beneficial for both parents. Dumas and Wahler (1983) report that mothers who are depressed, socioeconomically disadvantaged and/or are engaged in frequent aversive interchanges with adults outside the families are less able to benefit from parent drug education programs. This is supported by MacDonald (1984) who writes that mothers of

drug dependent adolescents may inappropriately protect or “mother” their children as if the current situation were the “old dependency of immaturity.”

Parental roles and instinctive influences are not the only causes for the possible failure of parent drug education programs. The impact of the environment can have immeasurable effects on determining the outcome of such programs. Barnes (1979) suggests that environmental influences such as low social assets, parental attitudes, peer/sibling influences and acculturative stress are major factors in the success or failure of drug rehabilitation and education. Furthermore, Cloniger, Bohman and Sigvardsson (1981) feel that the drug problem prevails because of specific combinations and interactions of predisposing genetic factors and environmental stressors. Finding the key to the combination could open the door to overcoming the issues and problems associated with drugs in our society at present.

At present no one program provides the answer. Powell (1986) writes that there is no convincing evidence that one particular program is significantly more effective than another. Furthermore, Pinsker and Geoffry (1981) write that most programs attempt to specialize in a specific area with the anticipation that positive spinoffs will occur in other areas.

Given the ever-present problem of drugs within the community and the vital role parents can play in eliminating the problem, more attention should be focused on parental needs. Prior to undertaking any parent drug education program more individualized parent counselling should be given by relevant experts in the field. By recognizing parents' concerns, problems, queries, and needs about their drug user offspring, counsellors can direct parents to a pertinent parent drug education program. This strategy would ensure that the effectiveness and value of parent drug education programs is being critically assessed based on the expectations and needs of the participants.

#### References

- Barnes, G. E. & Greenwood, L. (1987). *Kids and drugs: A program evaluation of the kids and drugs parenting program*. Research Paper for the Alcoholism Foundation of Manitoba, Department of Family Studies, University of Manitoba.
- Barnes, G. E. (1979). Solvent abuse: A review. *The International Journal of the Addictions*, 14(1), 1-26.
- Barsh, R. (1979). *The parent of the handicapped child*. Illinois: Thomas Publishing Company, Illinois.
- Cannon, S. (1976). *Social functioning patterns in families of offspring receiving treatment for drug abuse*. Libra Publishers, New York.
- Cloniger, C. R., Bohman, M. & S. Sigvardsson (1981). Inheritance of alcohol abuse. *Archives of General Psychiatry*, 38, 861-868.
- Cohen, S. J. (1982). Helping parents to become the “potent force” in combating and preventing the drug problem. *Journal of Drug Education*, 12, (4), 341-344.
- Dumas, J. E. & Wahler, R. G. (1983). Predictors of treatment outcome in parent training: Mother insularity and socioeconomic disadvantage. *Behavioural Assessment*, 5, 301-313.

- Fotheringham, C. (1974). Handicapped children and their handicapped families. *International Review of Education*, 20, 355-371.
- Fox, T.A. (1988). Understanding parental reactions to the diagnosis of mental retardation and how this understanding benefits teacher consultation with parents. *Australian Journal of Remedial Education*, 20,(2), 14-16.
- Frazier, F. & Matthes, W. (1975). Parent education: A comparison of Adlerian and behavioural approaches. *Elementary School Guidance and Counselling*, 10,(1), 32-38.
- Garfield, E. & Gibbs, J. (1982). Fostering parent involvement for drug prevention. *Journal of Drug Education*, 12, 87-96.
- Golinski, S.J. & Paape, V. (1984). *Kids & Drugs: Prevention education for Parents*. Alcoholism Foundation of Manitoba, Winnipeg, Manitoba, Canada.
- Grady, K., Gersick, K. & M. Borantynski (1985). Preparing parents for teenagers: A step in the prevention of adolescent substance abuse. *Family Relations*, 34, 541-549.
- Hamburg, B., Kramer, H. & W. Jahnke (1975). A hierarchy of drug use in adolescence: Behavioural and attitudinal correlates of substantial drug use. *American Journal of Psychiatry*, 132, 1155-1163.
- Health Services & Promotion Branch, Health and Welfare Canada, (1983). *Parenting: Issues and Concerns a Focus Group Report*. Demand Research Incorporated, Toronto, Canada.
- Jellinek, E. (1977). The symbolism of drinking: A culture-historical approach. *Journal of Studies of Alcohol*, 38, 852-866.
- Jurich, A., Polson, C., Jurich, J. & R. Bates, (1985). Family factors in the lives of drug users and abusers. *Adolescence*, 20, (77), 143-159.
- Klein, M. & Swisher, J.D. (1983). A statewide evaluation of a communication and parenting skills program. *Journal of Drug Education*, 13,(1), 73-82.
- Laudeman, K. (1984). Seventeen ways to get parents involved in substance abuse education. *Journal of Drug Education*, 14,(4), 307-314.
- MacDonald, D.I. (1984). *Drugs, drinking and adolescence*. Yearbook Medical Publishers, Chicago, Illinois.
- Pinsker, M. & Geoffry, K., (1981). A comparison of parent effectiveness training and behaviour modification parent training. *Family Relations*, 30, 61-68.
- Powell, D. (1986). Parent education and support programs. *Young Children*, March, 47-53.
- RCMP. (1987). *Youth and drugs. What parent groups can do to create drug resistant communities*. PRIDE Publishing: Canada.
- Streit, F., Halstead, D.L. & P.J. Pascale (1974). The differences among youthful users and nonusers of drugs based on their perceptions of parental behaviour. *The International Journal of the Addictions*, 9, 749-755.
- Summerlin, M.L. & Ward, G.R. (1981). The effect of parent group participation on attitudes. *Elementary School Guidance Counselling*, 16,(2), 133-136.
- (1978). The effect of parental participation in a parent group on a child's self concept. *The Journal of Psychology*, 100, 227-232.
- Walker J. & Shea, T., (1984). *Behaviour Management. A practical approach for educators*. Times Mirror Publishing, Toronto, Canada.
- Winnipeg Free Press, (May, 1988). *Parents Show Spans Wide Range of Interest*.

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