

**Prevention works!**

Healthy and safe development  
of children and youth



## Experiences and new tools from the UNODC Global Programme in LMIC

Parent and Caregiver support  
*Its multi-purpose and global experiences*

Wadih Maalouf, Ph.D.

*Global Programme Coordinator*

*Division of Operation*

*Drug Prevention and Health Branch*

*Prevention, Treatment and Rehabilitation Section*

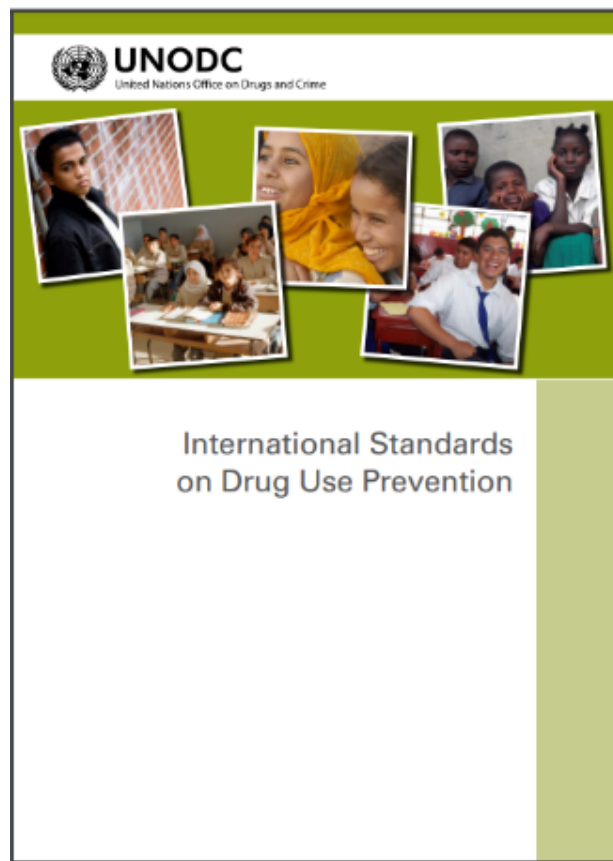


: [wadih.maalouf@un.org](mailto:wadih.maalouf@un.org)

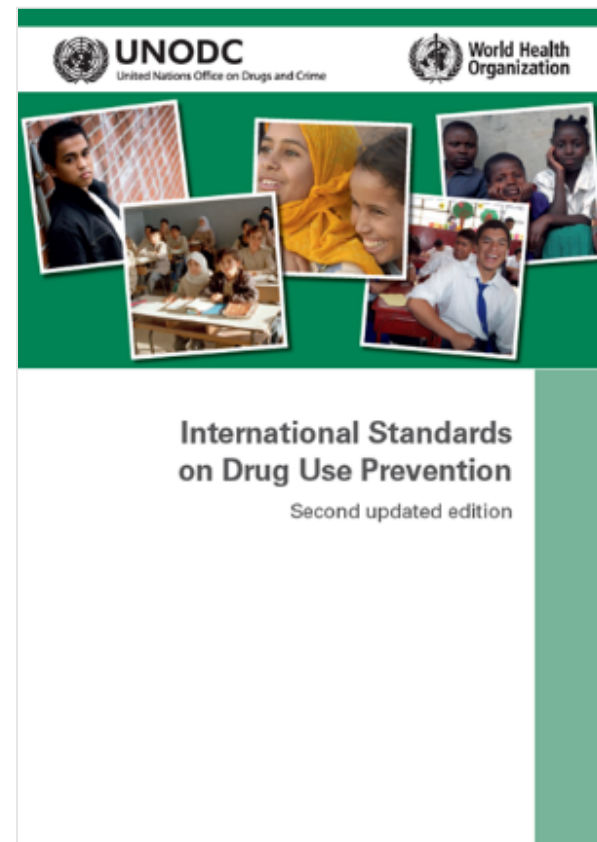


: [@wmaaloufun](https://twitter.com/wmaaloufun)

# First edition – SECOND EDITION!!!



**2013**



**2018**



	Prenatal & infancy	Early childhood	Middle childhood	Early adolescence	Adolescence	Adulthood
Family	Prenatal & infancy visitation		Parenting skills			
	Interventions for pregnant women					
School		Early childhood education	Personal & social skills education	Prevention education based on social competence and influence		
			Classroom management		Addressing individual vulnerabilities	
			Policies to keep children in school	School-wide programmes to enhance school attachment		
				School policies on substance use		
Community				Alcohol & tobacco policies		
			Community-based multi-component initiatives			
				Media campaigns		
				Mentoring		
Workplace					Prevention programmes in entertainment venues	
					Workplace prevention programmes	
Health sector	Interventions for pregnant women		Addressing mental health disorders			
					Brief intervention	



Family is key!



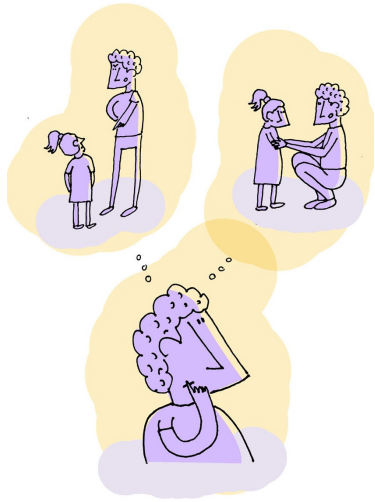
# Healthy parenting is essential to early child development

- Parenting supports a child's adjustment beyond their own individual resilience (Betancourt & Khan, 2008)
- Harsh, inconsistent parenting predicts later poor outcomes: drug use, low school attainment, delinquency, poor mental health
- Parents need support in all contexts



# Effective Family Skills Programmes: what are they?

- Programmes that aim to strengthen family protective factors such as **communication**, **trust**, **problem-solving skills** and **conflict resolution** that are relevant to their culture
- Often include opportunities for parents and children to spend positive time together, as ways to strengthen the bonding and attachment between the two
- Focus on relationships and behaviour change and PRACTICE



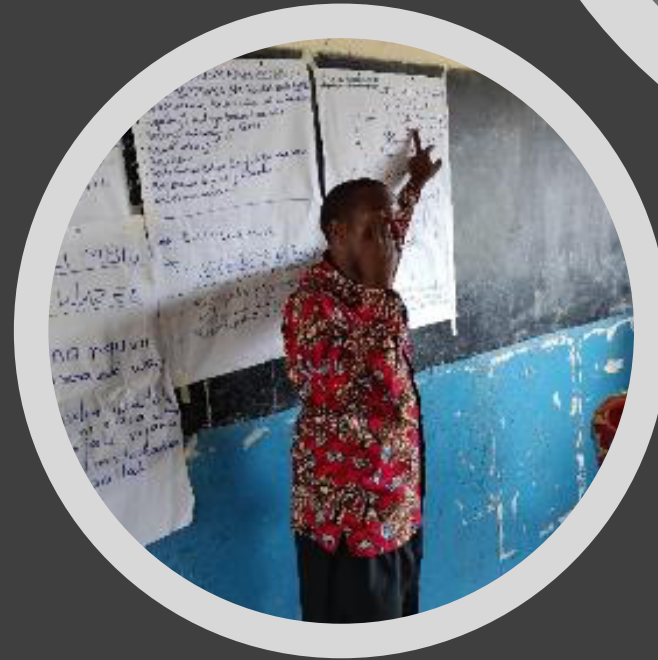


# Recommendations

- Organised in fun, easy and appealing way for all to participate (e.g. out-of-office hours, meals, child care, transportation, small prize for completing the sessions, etc.)
- Delivered by trained individuals, in many cases without any other formal qualification
- Typically include a series of sessions
- Typically include activities for the parents, the children and the whole family

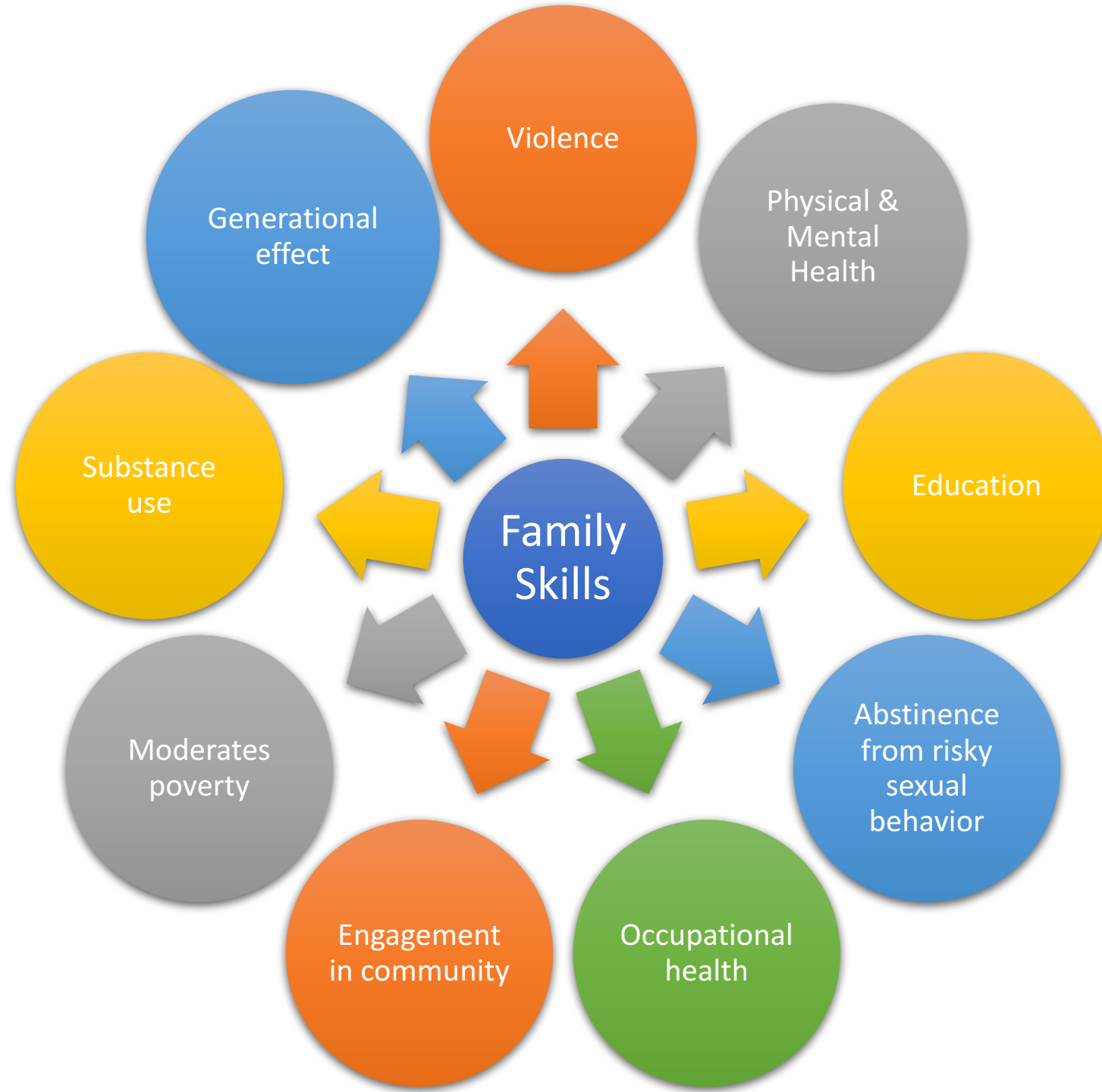
# What does NOT work

- Undermine parents' authority
- Use only lecturing as a means of delivery
- Only provide information to parents about drugs so that they can talk about it with their children
- Focus exclusively on the child
- Delivered by poorly trained staff

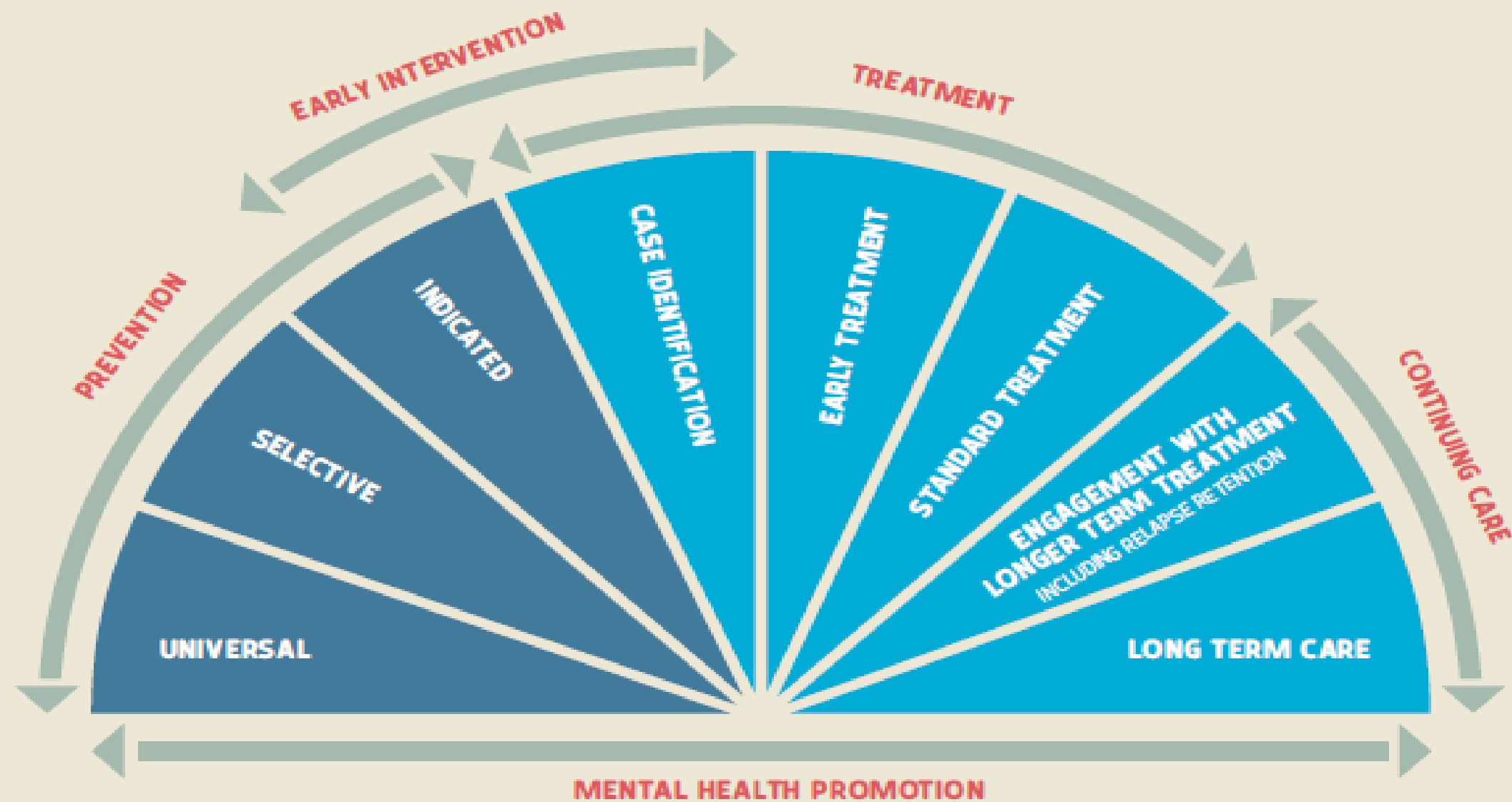




10  
return for  
every  
1

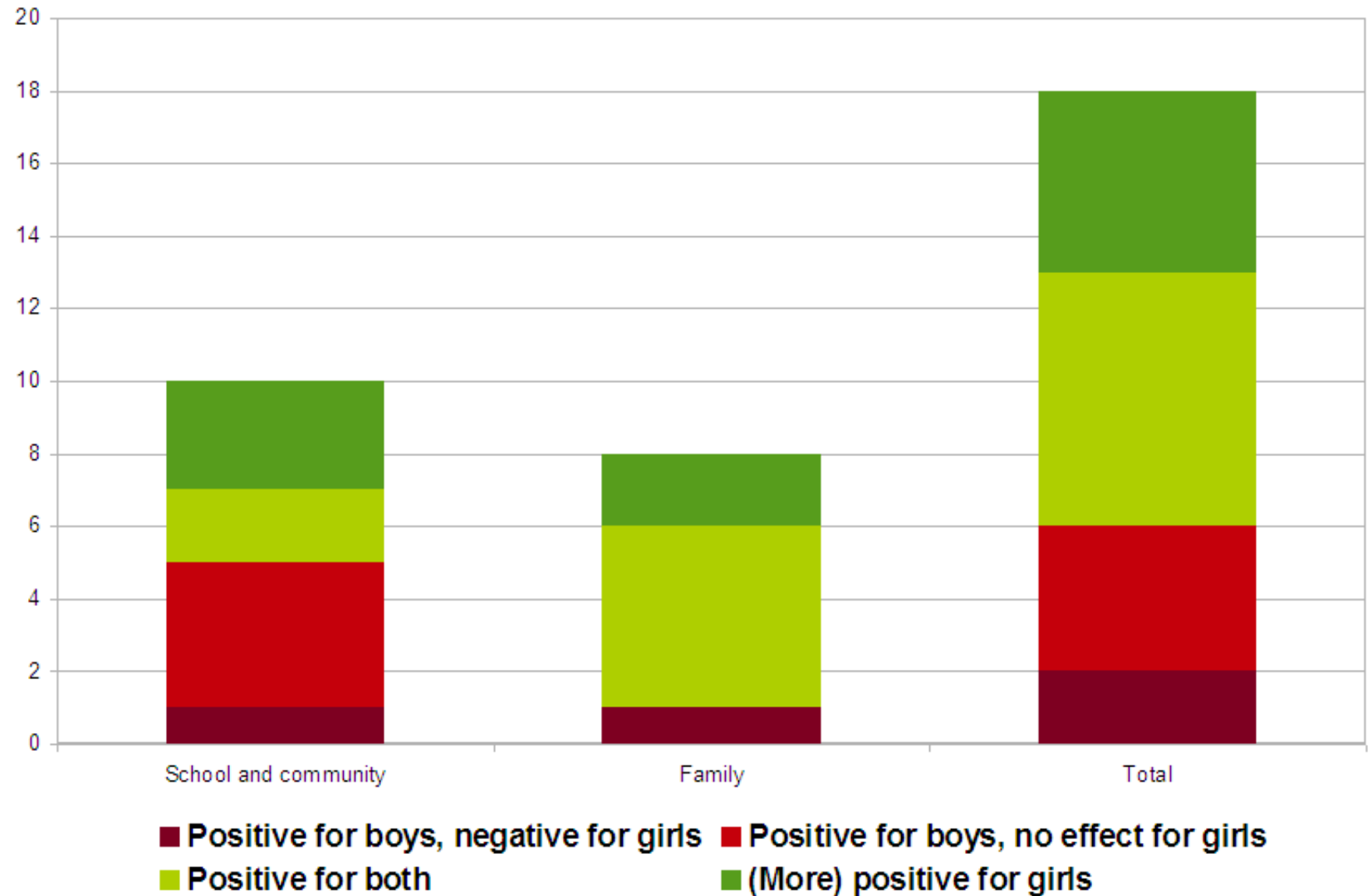


## DIVERSITY IN MENTAL HEALTH PROMOTION



## GENDER SENSITIVITY

Family based  
prevention more  
consistently benefits  
girls as well as boys



29 countries currently piloting family skills globally with UNODC







# Common obstacles at start

- **OUR FAMILIES DO NOT LIKE TO DISCUSS DRUG ISSUES ???**
- **OUR FAMILIES ARE DIFFERENT THAN FAMILIES WHERE EVIDENCE IS GENERATED??**

# Support generation of evidence from the recipient countries

*Social Work & Social Sciences Review 16(2) pp.51-75. DOI: 10.1921/3103160207*

## UNODC Global Family Skills Initiative: Outcome evaluation in Central Asia of Families and Schools Together (FAST) multi-family groups

Lynn McDonald<sup>1</sup> and Taghi Doostgharin<sup>2</sup>

Aggression and Violent Behavior 19 (2014) 616–624



Contents lists available at ScienceDirect

Aggression and Violent Behavior



The influence of family skills programmes on violence indicators:  
Experience from a multi-site project of the United Nations Office on  
Drugs and Crime in low and middle income countries<sup>☆</sup>

Wadih Maalouf<sup>\*</sup>, Giovanna Campello

United Nations Office on Drugs and Crime (UNODC), Drug Prevention and Health Branch, Prevention Treatment and Rehabilitation Section, Vienna, Austria



## The Strengthening Families Program 10–14 in Panama: Parents' Perceptions of Cultural Fit

Anilena Mejia, Fiona Ulph, and Rachel Calam  
The University of Manchester

*A Pilot Randomized Controlled Trial of  
a Brief Parenting Intervention in Low-  
Resource Settings in Panama*

**Anilena Mejia, Rachel Calam & Matthew  
R. Sanders**

LOOK INSIDE

THE CAMBRIDGE HANDBOOK OF  
INTERNATIONAL  
PREVENTION  
SCIENCE

*Edited by Moshe Israelashvili  
and John L. Romano*

### The Cambridge Handbook of International Prevention Science

Part of [Cambridge Handbooks in Psychology](#)

**EDITORS:**

[Moshe Israelashvili](#), Tel Aviv University

[John Romano](#), University of Minnesota

[View all contributors](#)

**PUBLICATION PLANNED FOR:** February 2017

**AVAILABILITY:** Not yet published - available from February 2017

**FORMAT:** Hardback

**ISBN:** 9781107087972

Campello G., Heikkila H., Maalouf W. Chapter 7: *International Standards on Drug Use Prevention: Tools to Support Policy Makers Globally to Implement an Evidence-based Prevention Response*. In: Moshe Israelashvili & John L. Romano (Editors). *Cambridge Handbook of International Prevention Science* (2016, in press). Cambridge University Press



## Strengthening a Culture of Prevention in Low- and Middle-Income Countries: Balancing Scientific Expectations and Contextual Realities

Rubén Parra-Cardona<sup>1</sup> • Patty Leijten<sup>2</sup> • Jamie M. Lachman<sup>3,4</sup> • Anilena Mejía<sup>5</sup> • Ana A. Baumann<sup>6</sup> • Nancy G. Amador Buenabad<sup>7</sup> • Lucie Cluver<sup>3,8</sup> • Jenny Doubt<sup>3</sup> • Frances Gardner<sup>3</sup> • Judy Hutchings<sup>9</sup> • Catherine L. Ward<sup>10</sup> • Inge M. Wessels<sup>10</sup> • Rachel Calam<sup>11</sup> • Victoria Chavira<sup>12</sup> • Melanie M. Domenech Rodríguez<sup>13</sup>

### **Initiative 3: Reducing Violence in Panamá by Strengthening Family Systems and Promoting the Implementation of an Evidence-Based Program**

**Steps Towards Developing a Culture of Prevention** In 2009, UNODC launched a project advocating for the adoption of a family skills training program across Panamá—The Strengthening Families Program 10-14 (SFP 10-14). UNODC required the leadership of local policymakers to design a plan for promoting evidence-based interventions, including active participation of local researchers and practitioners to culturally adapt and pilot test SFP 10-14.

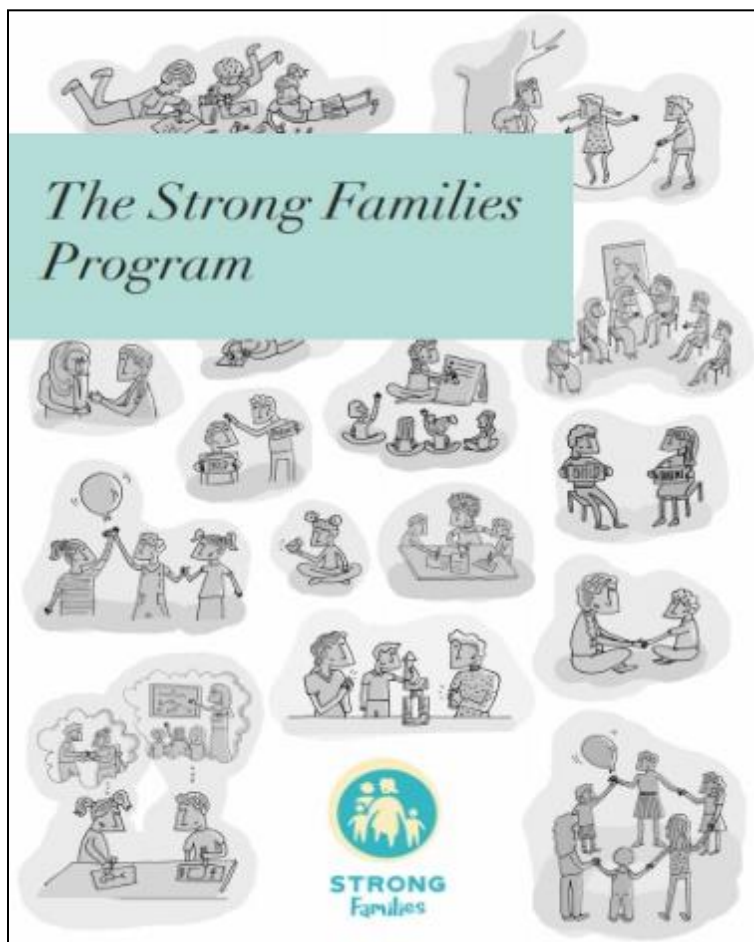




# Common obstacles during scale up

- **Infrastructure (electricity, A/V materials, experienced facilitators, ...)**
- **Cost of material (production, etc...)**
- **Royalty / Copyrights**
- ***& more***

# The Strong Families Programme



Family Skills programme for families in Humanitarian & challenged settings

Aims to improve parenting skills, child well-being and family mental health

For caregivers with children aged 8-15

Light touch-only 3 sessions





Family Skills programmes have been scientifically proven to be successfully adapted to different contexts, needs and cultures...

Can this approach help families in humanitarian or challenged settings?

## Caregiver sessions

Explore parents challenges  
Develop ways to better deal with stress  
The value of using both love and limits  
Listening to children  
How to encourage good behaviour and discourage misbehaviour

## Child sessions

How to deal with stress  
Explore rules and responsibilities  
Think about future goals in addition to the important roles their caregivers play in their lives



## Family Sessions

Families practice positive communication  
Families practice stress relief techniques together  
Families learn about family values and are encouraged to share appreciation for each other





## Study 1

Afghan families living in 3 cities in Afghanistan (n=72)

Gender of children: Female (n=33), males (n=38)

## Study 2

Afghan families residing in 3 reception centres in Serbia (n=25)

Gender of children: Female (n=9), males (n=16)

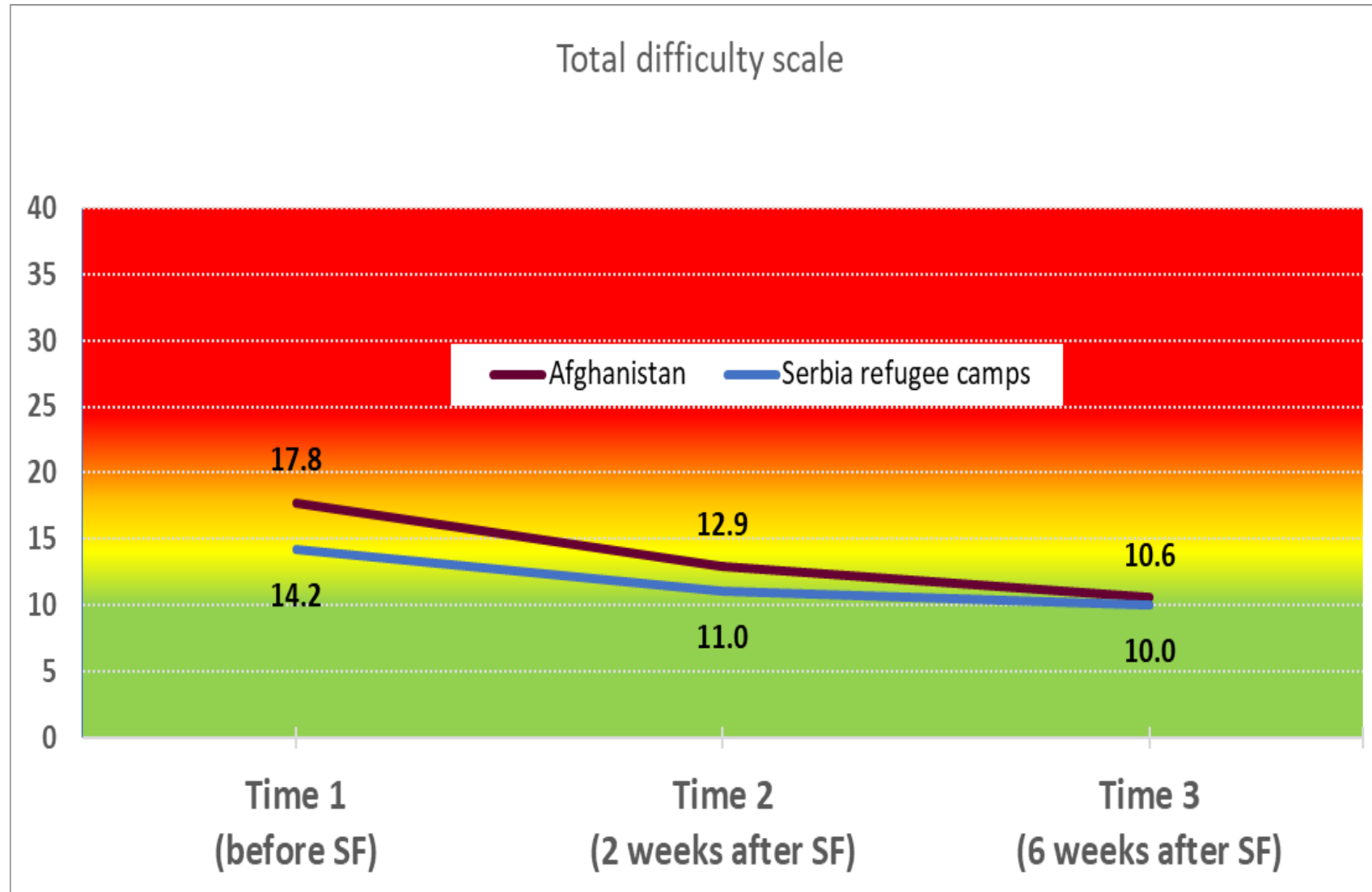


Caregivers completed 3 measures

- 1-Family Background Questionnaire
- 2-Strengths and Difficulties Questionnaire
- 3-Parenting and Family Adjustment Scale

Two weeks pre-intervention (Time 1)  
One-two weeks post intervention (Time 2)  
Five-six weeks post intervention (Time 3)

# Change in Total Strengths and Difficulties scores for children in **Afghanistan** and in refugee reception centers in **Serbia**



## SDQ SCORES

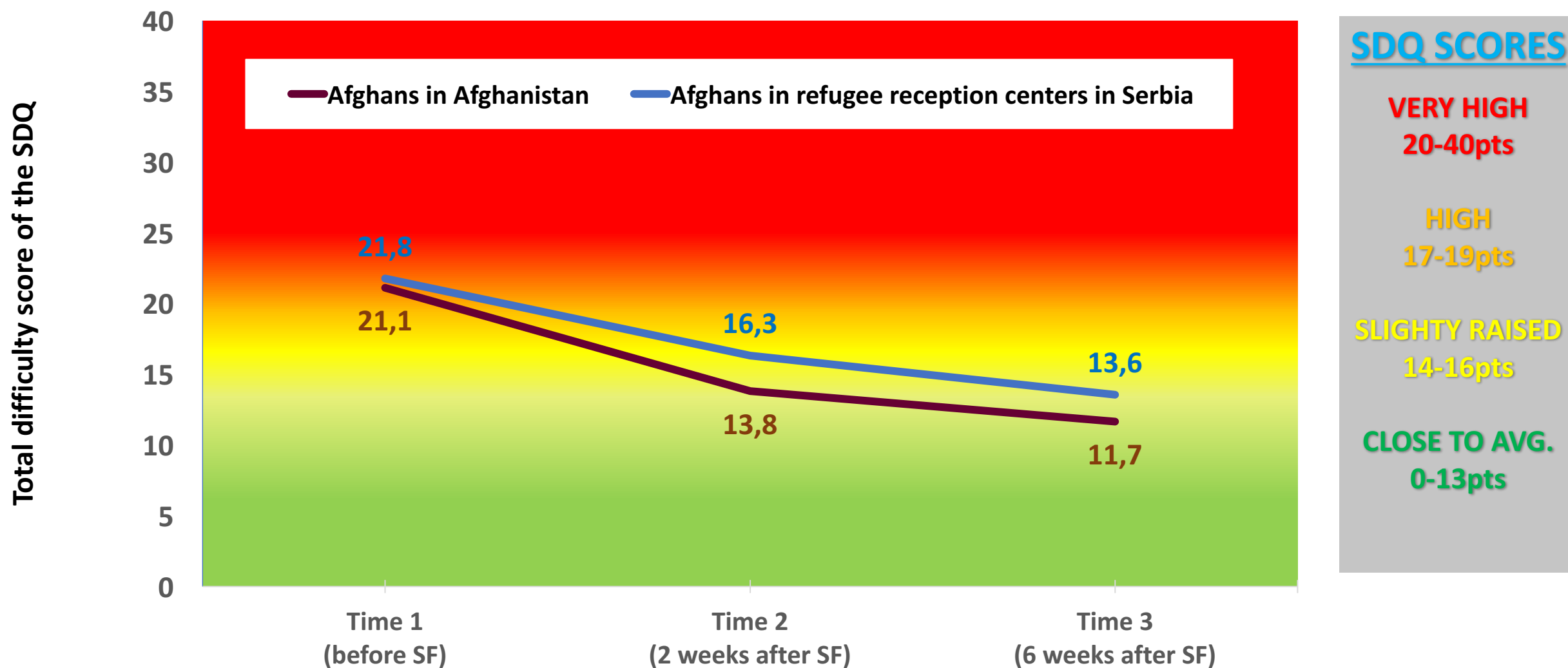
**VERY HIGH**  
20-40pts

**HIGH**  
17-19pts

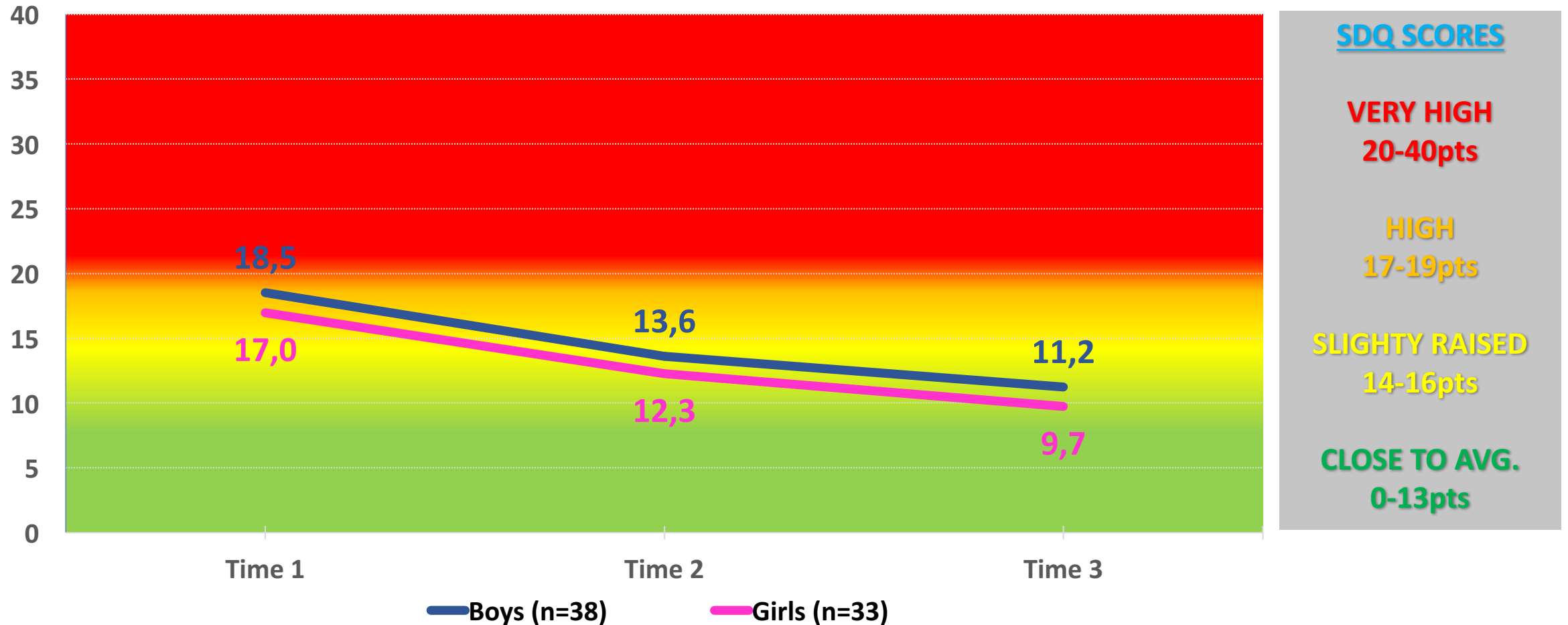
**SLIGHTLY RAISED**  
14-16pts

**CLOSE TO AVG.**  
0-13pts

Change in Total Strengths and Difficulties scores for children in the very high or high category in Afghanistan (n=41) and in refugee reception centers in Serbia (n=9)



# Difference in **overall SDQ score** over time in all boys and girls in Afghanistan

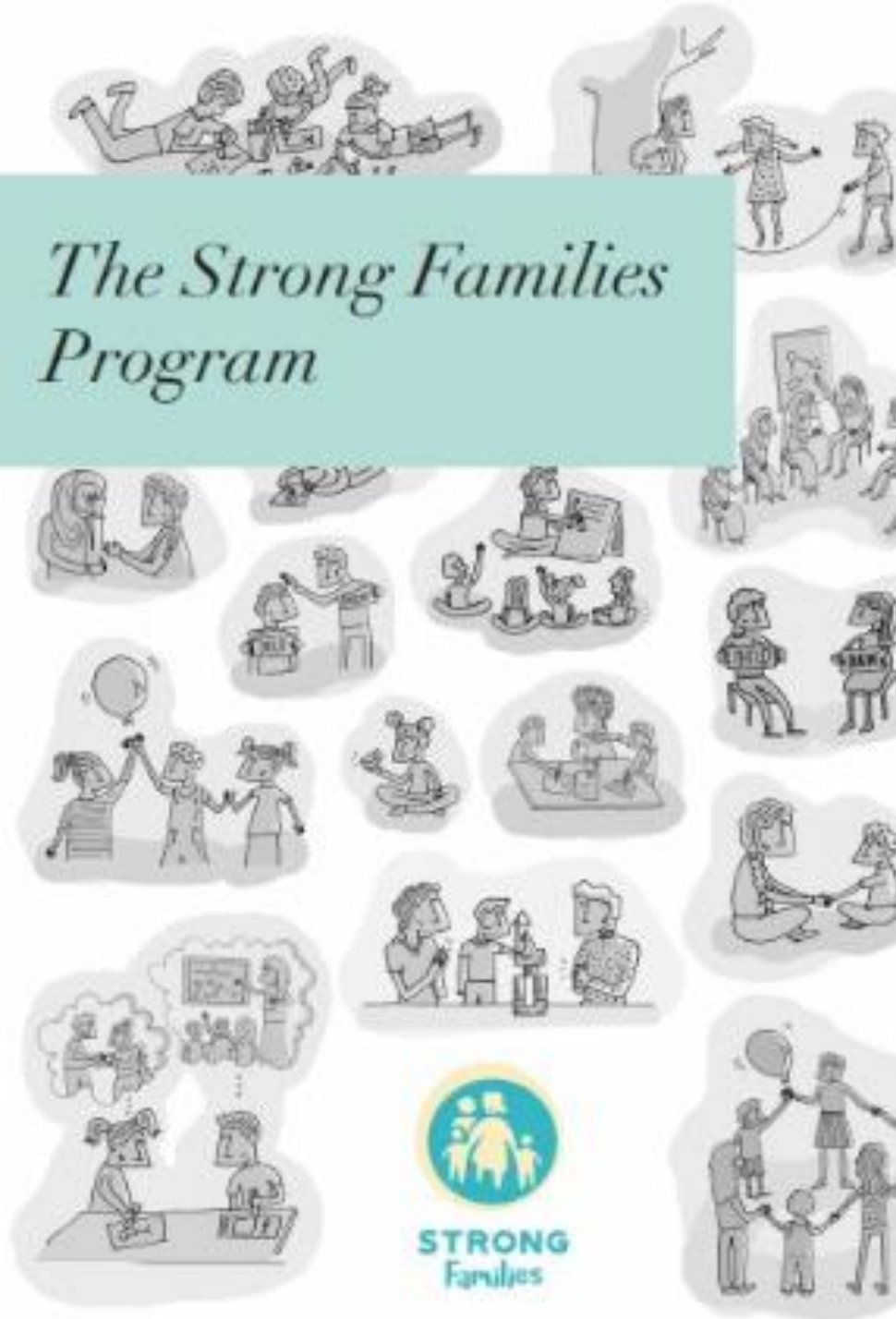


Significant differences:

Boys:  $p_{t1-t2} < 0.001$ ;  $p_{t2-t3} = 0.009$ ;  $p_{t1-t3} < 0.001$

Girls:  $p_{t1-t2} = 0.009$ ;  $p_{t1-t3} < 0.001$

} No difference between boys and girls



Already available in (*or very shortly*):

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1. Arabic
2. English
3. Dari
4. Farsi
5. French
6. Russian
7. Serbian
8. Spanish
9. Swahili
10. Uzbek





Over 1.5 billion people in the world are experiencing conflict and humanitarian challenges

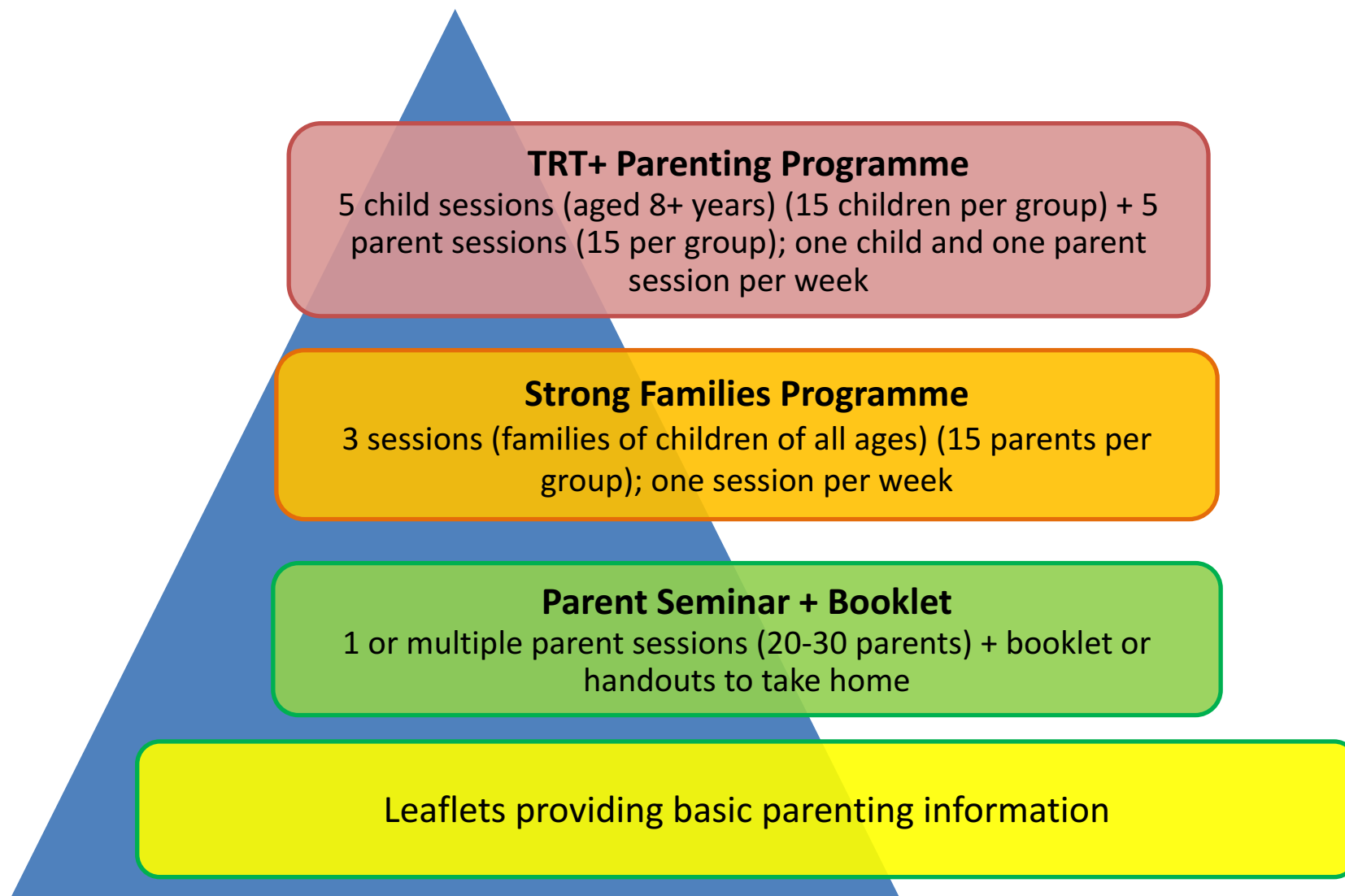
One in every 113 people in the world is a refugee

# Families are the front line of defence

**Primary caregiver- 'protective shield' or further  
complicate war stress**

**Family interaction predictive of children's  
adjustment in conflict settings yet there's a  
significant lack of Family Skills programmes in  
such contexts**

# A FAMILY MULTI-LEVEL PARENTING AND CAREGIVER SUPPORT DELIVERY MODEL FOR FAMILIES LIVING THROUGH CONFLICT AND DISPLACEMENT





# The Bread Wrapper Study



## INTERVENTIONS

### ORIGINAL RESEARCH PAPER

Daily bread: a novel vehicle for dissemination and evaluation of psychological first aid for families exposed to armed conflict in Syria

A. El-Khani\*, K. Cartwright, A. Redmond and R. Calam

*The University of Manchester, Manchester, UK*

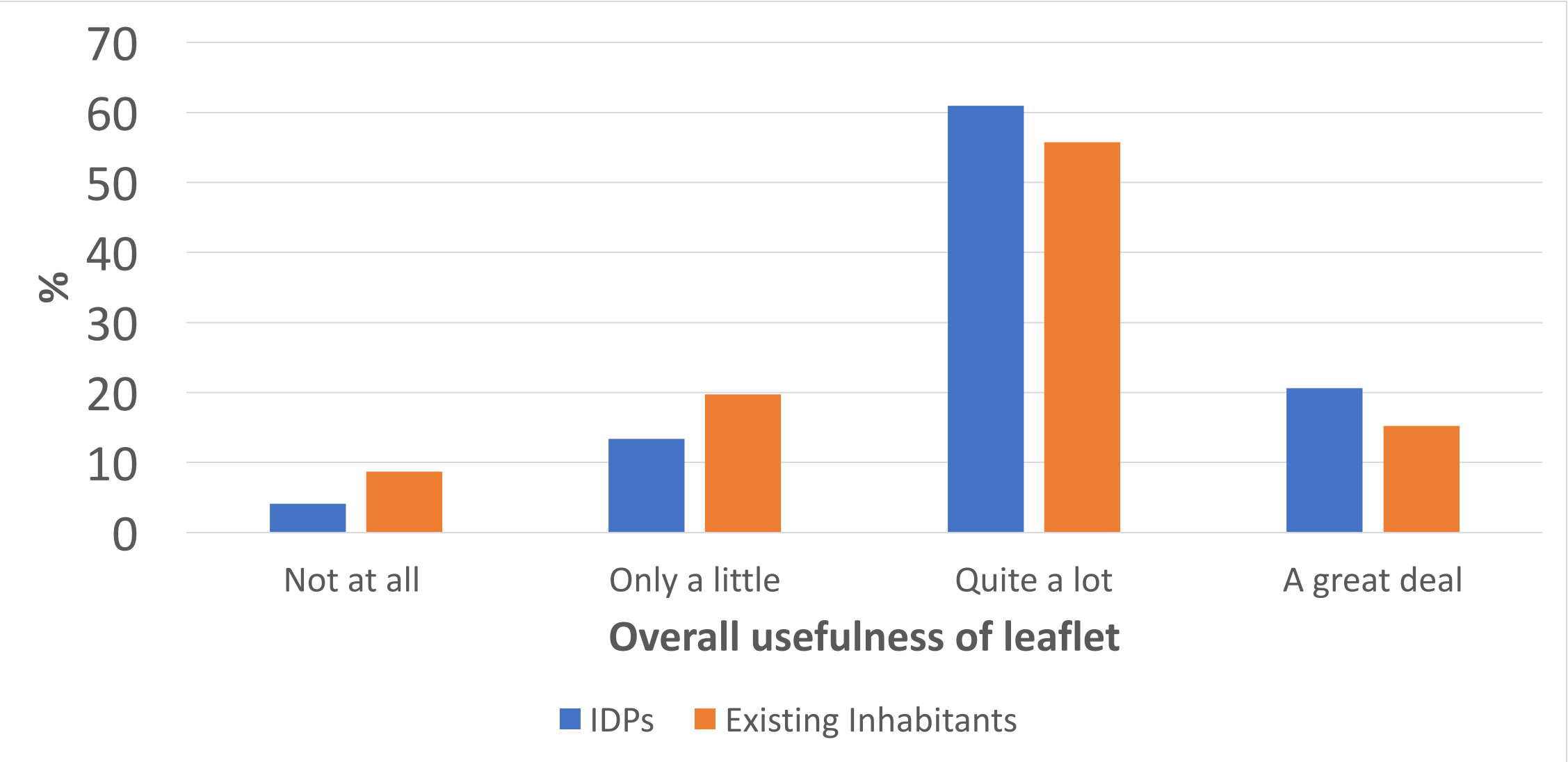
*Global Mental Health* (2016), 3, e15, page 1 of 7. doi:10.1017/gmh.2016.9

**Background.** Risks to the mental health of children and families exposed to conflict in Syria are of such magnitude that research identifying how best to deliver psychological first aid is urgently required. This study tested the feasibility of a novel approach to large-scale distribution of information and data collection.

**Methods.** Routine humanitarian deliveries of bread by a bakery run by a non-governmental organisation (NGO) were used to distribute parenting information leaflets and questionnaires to adults looking after children in conflict zones inside Syria. Study materials were emailed to a project worker in Turkey. Leaflets and questionnaires requesting feedback

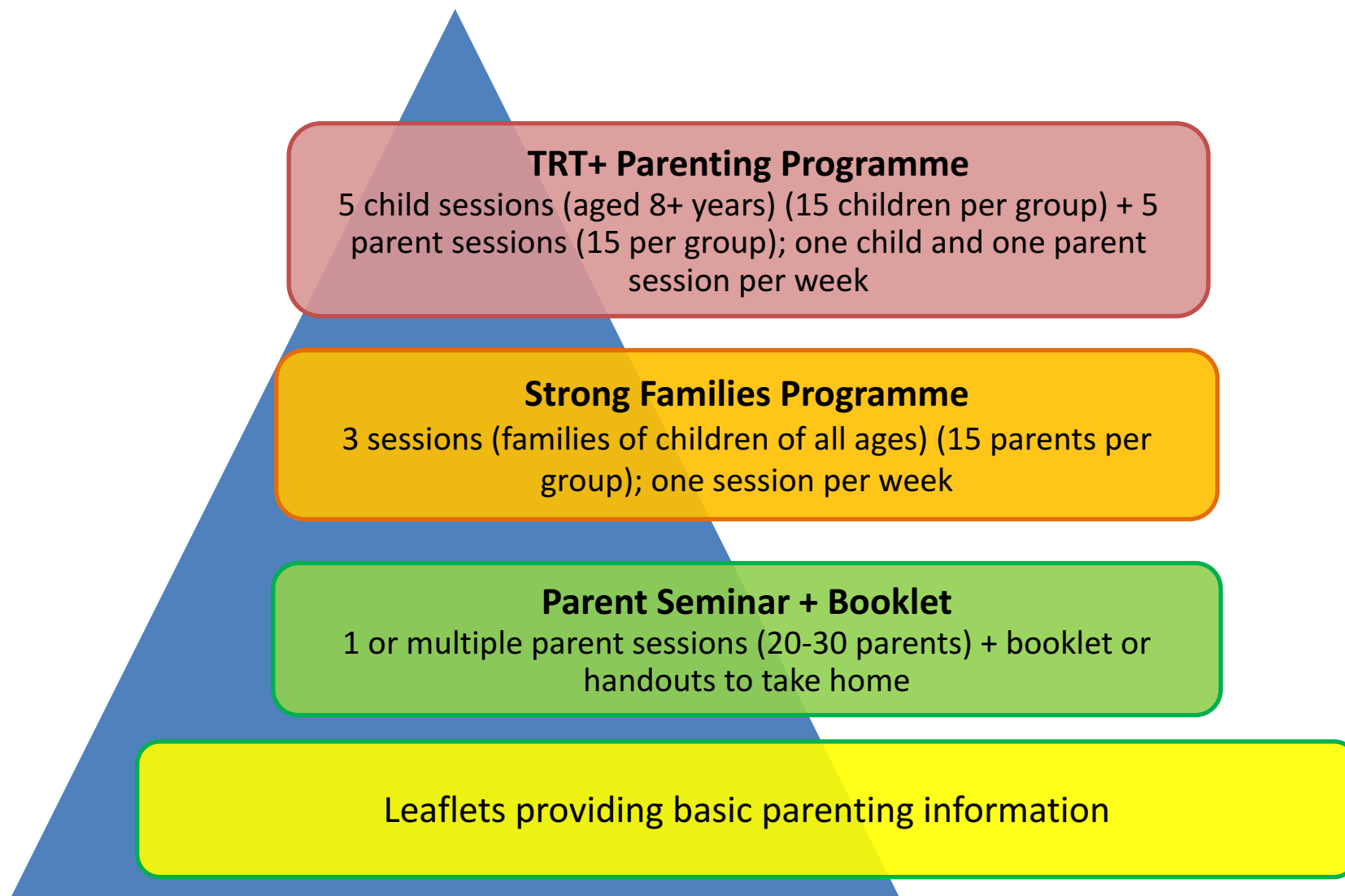


# Perceived overall usefulness of parenting leaflet

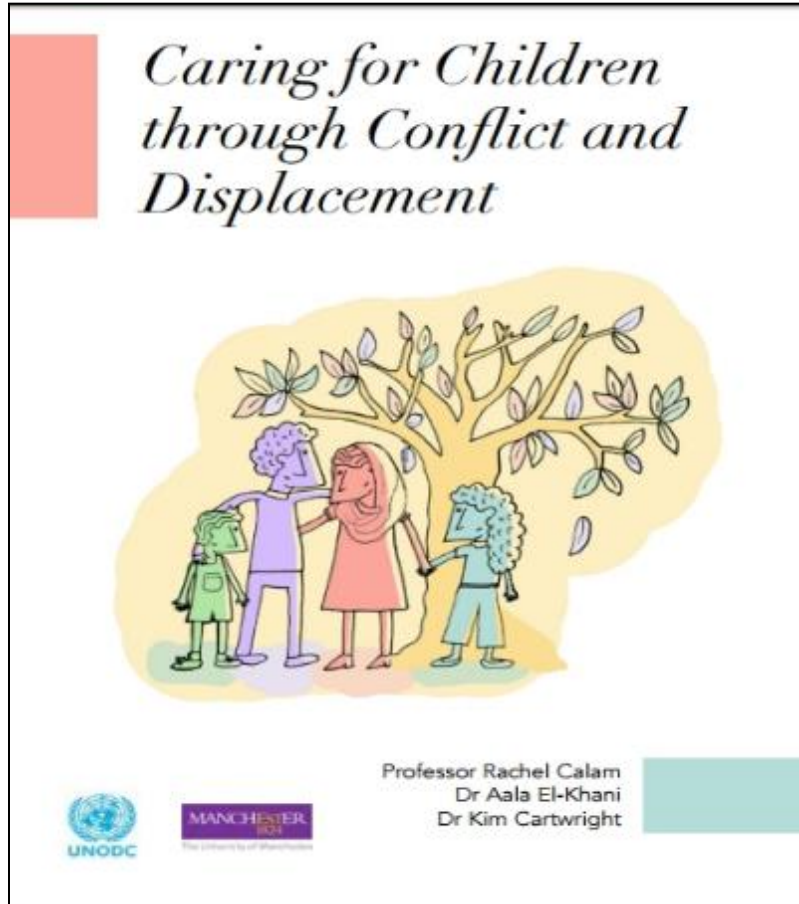




# A FAMILY MULTI-LEVEL PARENTING AND CAREGIVER SUPPORT DELIVERY MODEL FOR FAMILIES LIVING THROUGH CONFLICT AND DISPLACEMENT



# Booklet and Seminar: 'Caring for Children through Conflict and Displacement'



- No extensive training- for low resource settings
- 119 caregivers in Nablus
- Open access

El-Khani, Maalouf, et al., 2019. Caregiving for Children through Conflict and Displacement; A pilot study testing the feasibility of delivering and evaluating a light touch parenting intervention for caregivers in the West Bank. Journal of International Psychology.

## Caregiving for children through conflict and displacement: a pilot study testing the feasibility of delivering and evaluating a light touch parenting intervention for caregivers in the West Bank

Aala El-Khani<sup>1</sup>, Wadih Maalouf<sup>1</sup>, Dania Abu Baker<sup>2</sup>, Nosheen Zahra<sup>2</sup>, Ali Noubani<sup>3</sup>, and Kim Cartwright<sup>4</sup>

<sup>1</sup>Drug Prevention and Health Branch, United Nations Office on Drugs and Crime, Vienna, Austria

<sup>2</sup>Division of Psychology and Mental Health, University of Manchester, Manchester, UK

<sup>3</sup>Human Supporters Organisation, West Bank, Palestine

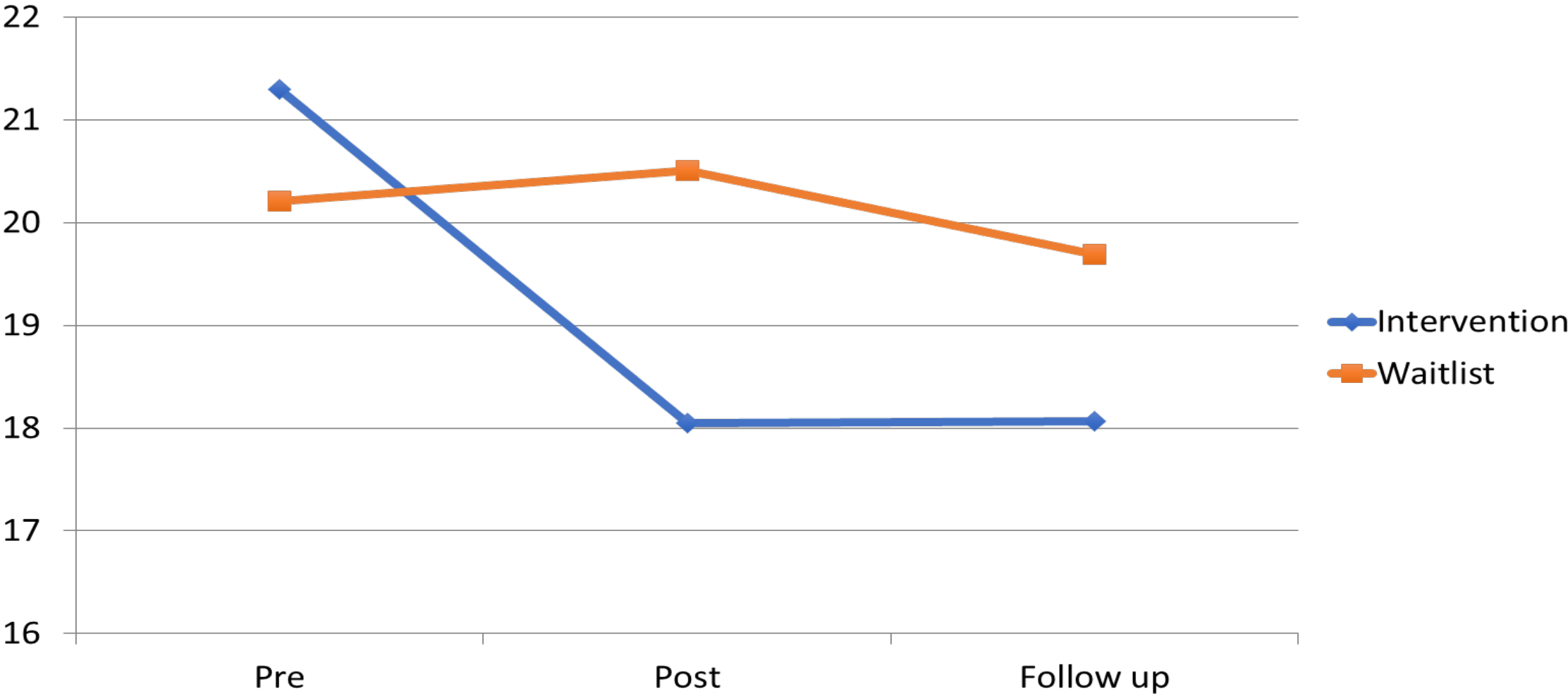
<sup>4</sup>Greater Manchester Mental Health NHS Foundation Trust Manchester, UK

A child's adjustment to wartime stress is reliant not only on individual responses and qualities, but very significantly on the availability of support that they may receive from their parent or caregivers and quality of relationships. Strengthening parental support has the potential to be valuable. A pilot two-arm randomised controlled trial investigated the feasibility of delivering and evaluating the "Caring for Children Through Conflict and Displacement" intervention with caregivers in the West Bank. Feasibility to recruit and train non-specialist staff on-the-ground to screen families for eligibility, collect outcome data, deliver the intervention and to recruit and retain families in the study were examined. Research staff and intervention facilitators were successfully appointed in the field, screened participants and delivered the intervention to 120 caregivers, collecting outcome measures pre-and post-delivery. All families completed the outcome measures, with very little missing data. This indicated that the intervention can be delivered feasibly and evaluated with families in this humanitarian context. Preliminary outcome data showed promise that the intervention may have the potential to both improve family functioning and reduce children's problem behaviour. Implications of family-focused initiatives, particularly within a conflict/post-conflict context for the prevention of several negative health and social outcomes directions, are discussed.

**Keywords:** Parenting; Conflict; Intervention; Family skills; Caregivers.

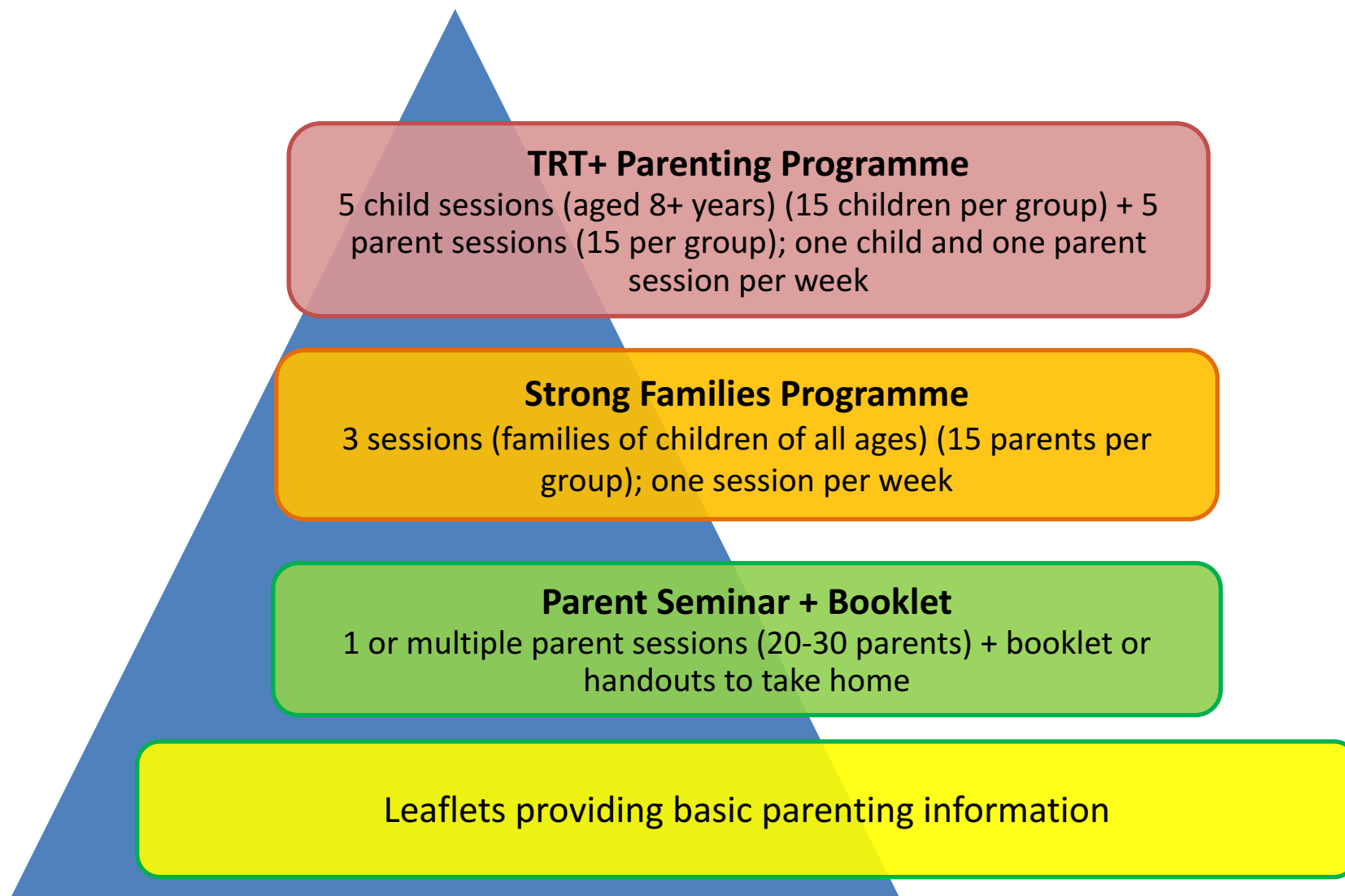


# Strengths and Difficulties Questionnaire (SDQ) Child Total Difficulties





# A FAMILY MULTI-LEVEL PARENTING AND CAREGIVER SUPPORT DELIVERY MODEL FOR FAMILIES LIVING THROUGH CONFLICT AND DISPLACEMENT





The collage features 15 line drawings of families engaged in different activities:
 

- Top left: A family of four (two adults and two children) lying on their stomachs, reading books together.
- Top right: A family of three (two adults and one child) playing jump rope outdoors.
- Center: A large teal rectangle with the text *The Strong Families Program* in a black serif font.
- Middle left: A family of two (one adult and one child) sitting and talking.
- Middle center: A family of four (two adults and two children) sitting around a table, looking at a book or document.
- Middle right: A family of four (two adults and two children) sitting on chairs, holding signs that say "YES" and "NO".
- Bottom left: A family of three (two adults and one child) playing with a balloon.
- Bottom center: A family of four (two adults and two children) sitting on the floor, practicing yoga or stretching.
- Bottom right: A family of four (two adults and two children) sitting on the floor, talking.
- Far bottom left: A family of four (two adults and two children) sitting at a table, looking at a picture book.
- Far bottom right: A family of five (two adults and three children) playing with a balloon.

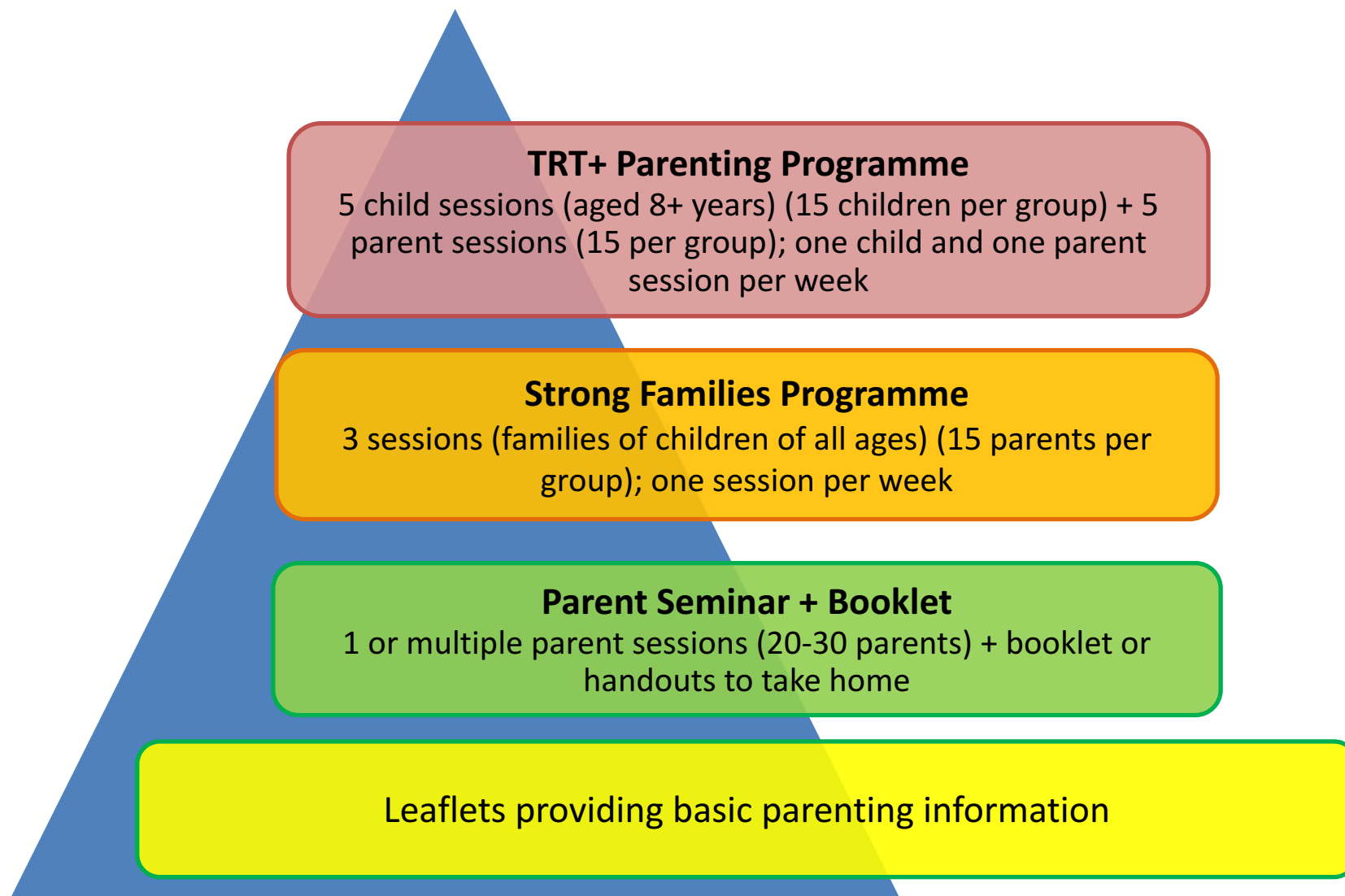
At the bottom center is the logo for "STRONG Families". It consists of a yellow circle containing three stylized human figures in blue and yellow. Below the circle, the word "STRONG" is written in bold blue capital letters, and the word "Families" is written in a smaller, blue, sans-serif font.

Aims to improve parenting skills, child well-being and family mental health

## Light touch-only 3 sessions



# A FAMILY MULTI-LEVEL PARENTING AND CAREGIVER SUPPORT DELIVERY MODEL FOR FAMILIES LIVING THROUGH CONFLICT AND DISPLACEMENT



# Teaching Recovery Techniques plus Parenting (TRT+)

- Original program:

## **Teaching Recovery Techniques (TRT)**

5 child trauma recovery sessions and 2 parent support sessions

- Enhanced program:

## **Teaching Recovery Techniques plus Parenting (TRT+)**

3 additional sessions for parents on parenting children experiencing post-traumatic stress

# Testing TRT+ Parenting Program Turkey

- Significant improvements in children's wellbeing, behaviour and parental efficacy
- High engagement and completion rate



El-Khani, A., Cartwright, K., Ang, C., Henshaw, E., Tanveer, M., & Calam, R. (2018). Testing the feasibility of delivering and evaluating a child mental health recovery program enhanced with additional parenting sessions for families displaced by the Syrian conflict: A pilot study. *Peace and Conflict: Journal of Peace Psychology*, 24(2), 188.



# TRT + Parenting Program- Lebanon

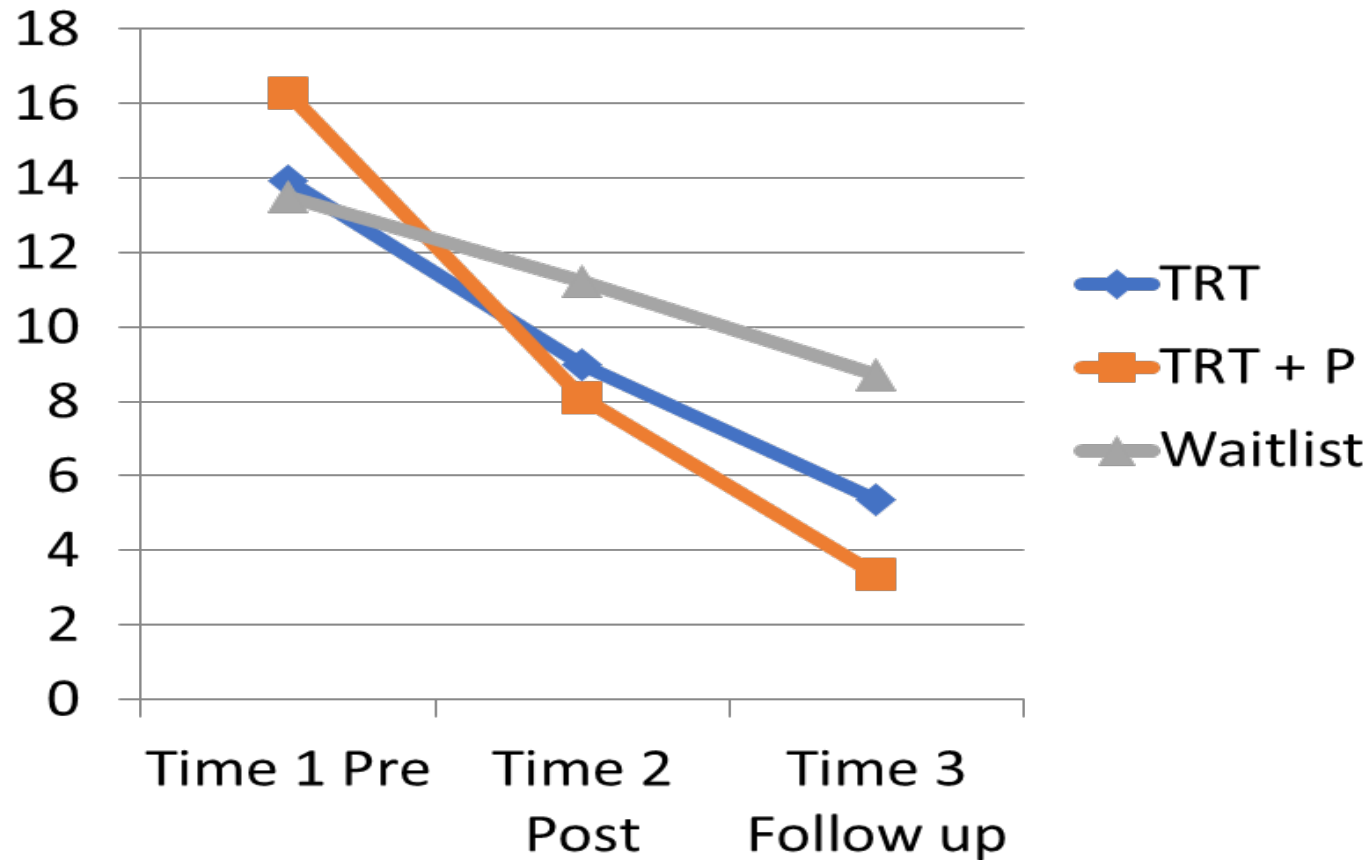
- Developed remote Skype training
- 119 families
- RCT comparing TRT, TRT+ Parenting, Waitlist





# Child: CRIES

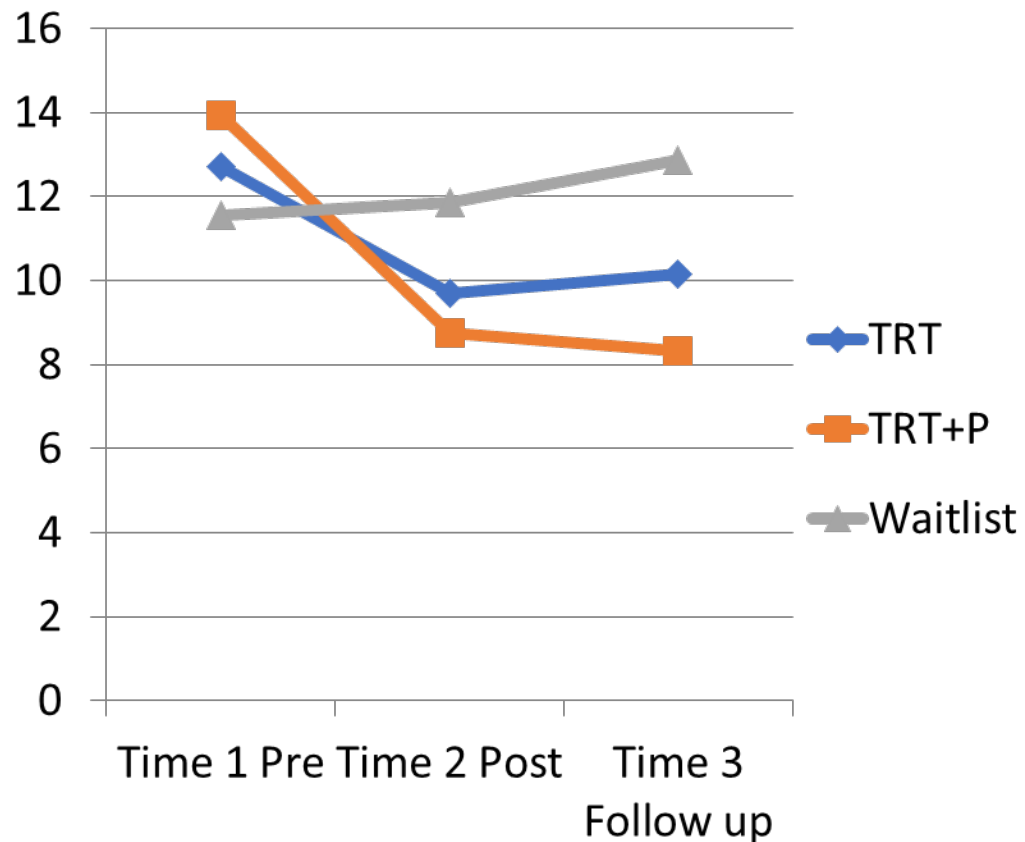
## Intrusion \*\*



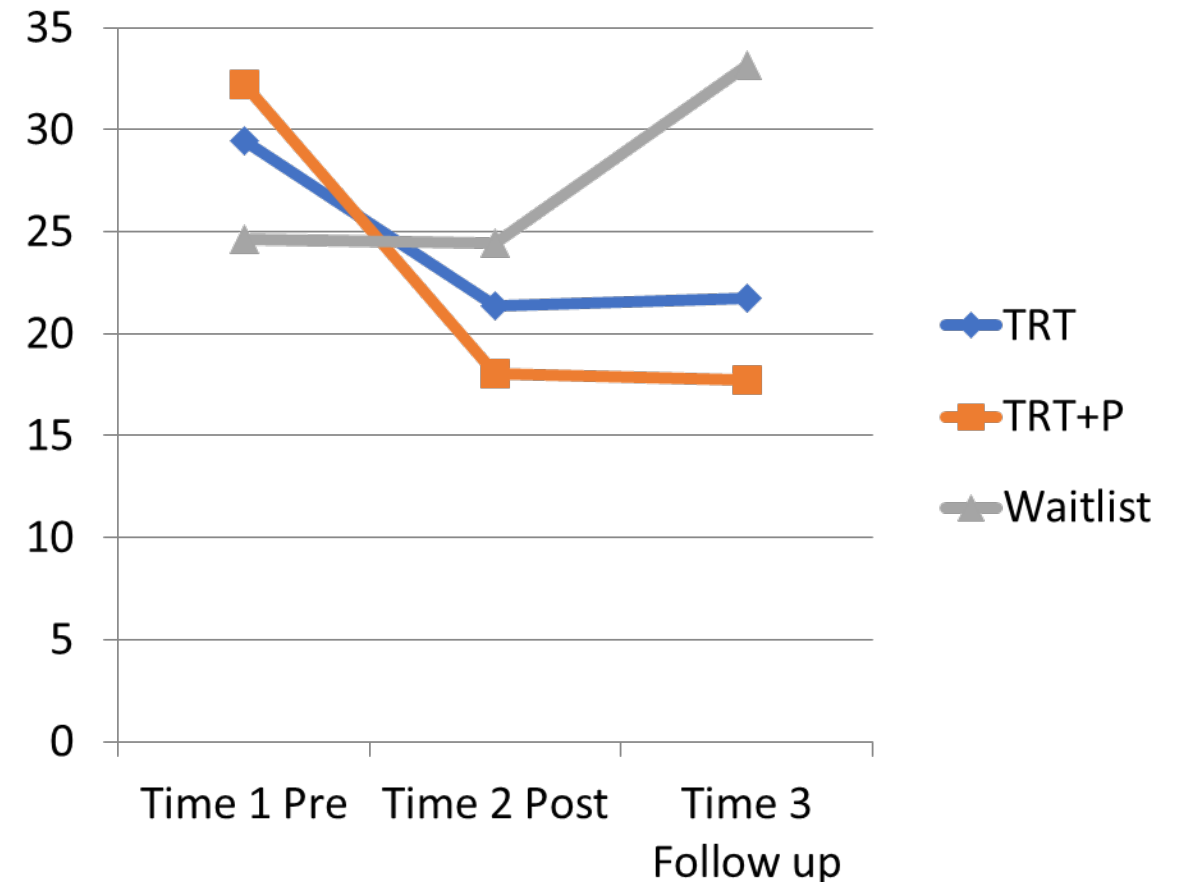
- CRIES measures three aspects of stress post trauma: Intrusion, Avoidance and Arousal.
- All three showed significant effects, with significant effects of time
- Greatest reductions were in the TRT + Parenting group

# SCARED Screen for Child Anxiety Related Disorders

**Child self report\***



**Parent report:\***



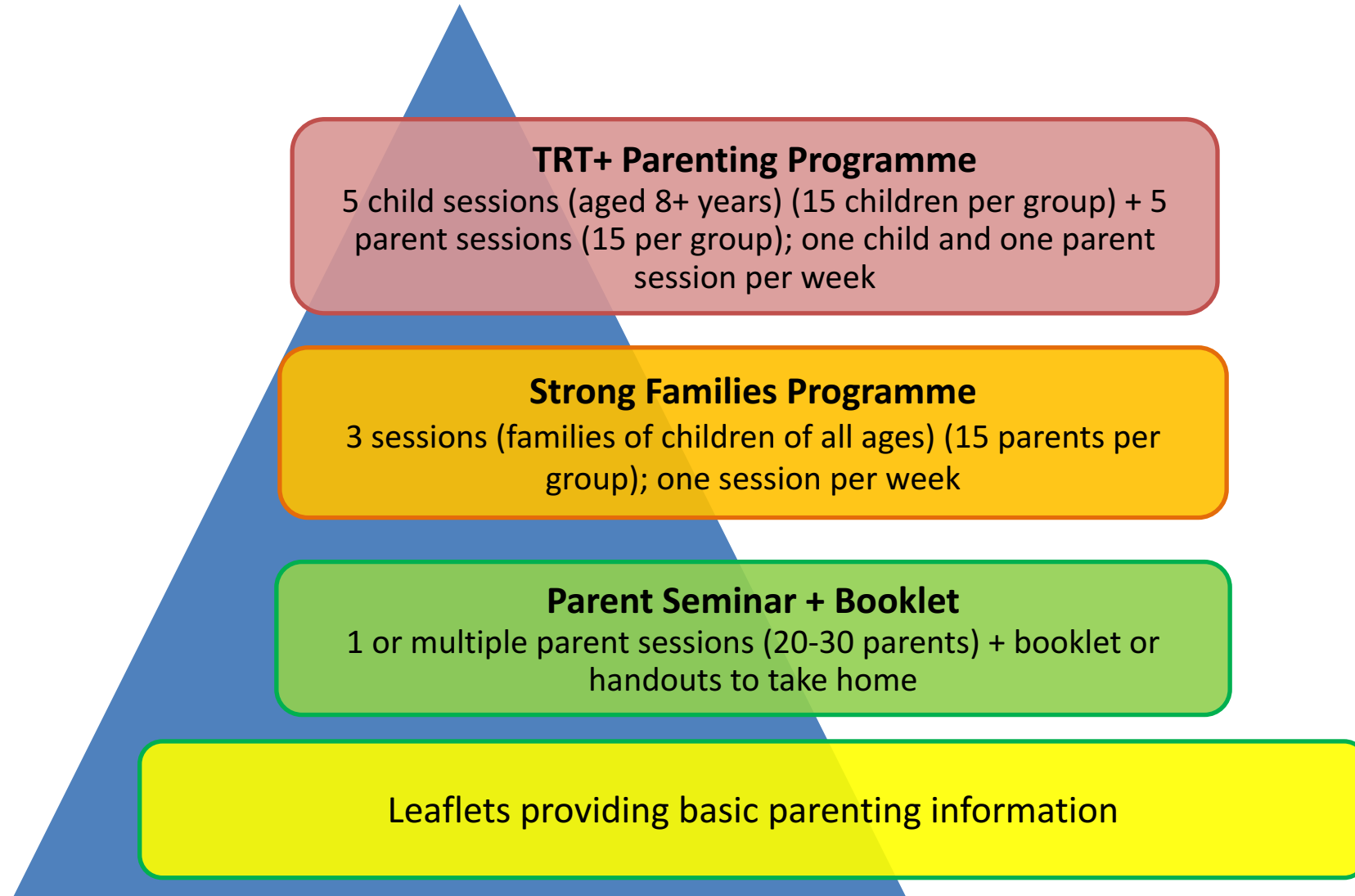
# Rewarding results on:

## **SCALES:**

- Strength and Difficulty Questionnaires - SDQ
- Screen for Childhood Anxiety Related Disorders – SCARED
- Impact of Event Scale (IES/CRIES)
- Depression Self Rating Scales

*Stay tuned publications in progress...*

# A FAMILY MULTI-LEVEL PARENTING AND CAREGIVER SUPPORT DELIVERY MODEL FOR FAMILIES LIVING THROUGH CONFLICT AND DISPLACEMENT





From the people of  
Japan



BADAN NARKOTIKA NASIONAL  
REPUBLIK INDONESIA

*WELCOME TO*  
*Families United*

**Regional Training on Universal Family Skills to  
Prevent Negative Social Outcomes**



## Family United

Universal Family Skills Programme for  
Prevention of Negative Social Outcomes



From  
the People of Japan

Extending Reach, Expanding Access...

**Family United**

Universal family skills programme for LMIC



# Content of Family UNited

## **Child sessions**

Building positive qualities

Handling stress

Dealing with peer  
pressure

Friendship

## **Parenting sessions**

Understanding, praising and  
encouraging children

Giving clear instructions

Responding to undesirable  
behaviour

Communicating and taking care of  
yourself

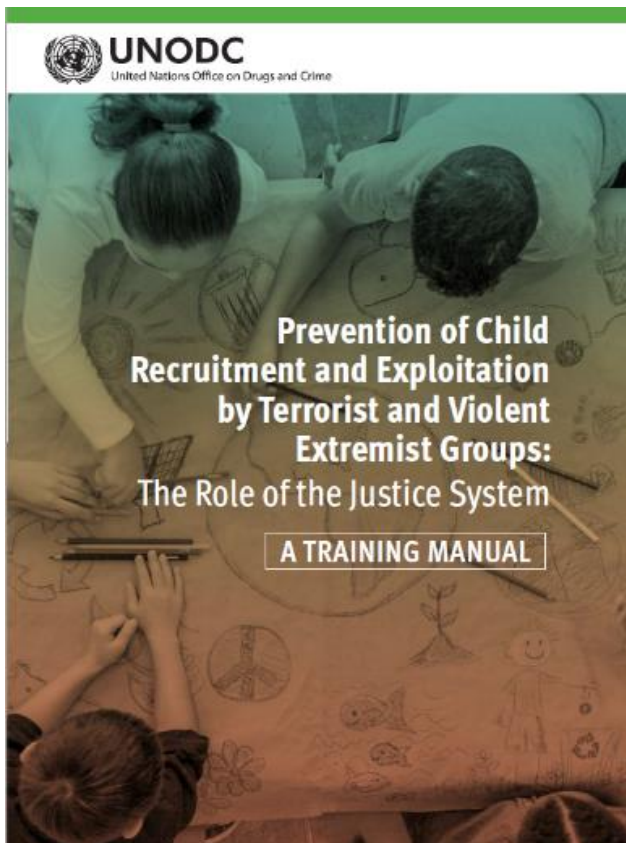
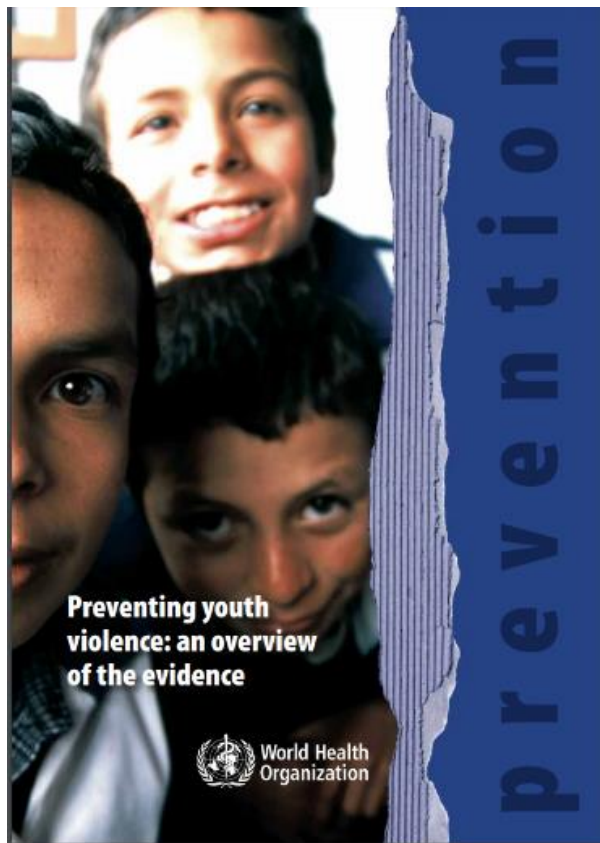
## **Family sessions**

Our family's positive qualities

Understanding each other's  
stress

Helping families enjoy each  
other

Understanding friendship



Also, against youth violence and child maltreatment

# Inspiration & Directions

- Affinity and need for family skills initiative in LMIC expanding
- Open sourced programmes are becoming available (selective/universal)
- Well trained lay facilitators can implement with fidelity
- Light touch interventions can be effective
- These can help reach many families in need
- Intersections with multi-strategies & global initiatives makes them amenable to raise interest of several stakeholders.
- Supportive to several SDG targets helping healthy and safe development of children
- **HELP US USE THEM!**

With thanks to collaborators (*support family*):

Dr Aala El-Khani

Professor Rachel Calam

Dr Karin Haar

Professor Virginia Molgaard

*Colleagues in PTRS and in the field*

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