

This family centered program makes a remarkable difference in case outcomes.

Families learn to communicate about really difficult issues that make healing possible.

It is truly transforming and different than anything else that we do in the Child Welfare system in SCC.

Katherine Lucero, Santa Clara Superior Court Judge

Celebrating Fam Our juvenile dependency court has been using Celebrating Families for several years with great success. It is the only program I can recall in which parents consistently report their satisfaction and that produces positive results for the family.

Judge Leonard Edwards (ret.)



### **Parent Focus Groups**

"I now call my son twice a day. I used to think of calling him once a week."

"This group is different – this is not another parenting class. This is a class on being a family."

# History

2002: Judge Leonard Edwards (ret.) requested program for Family Treatment Drug Court utilizing SAMHSA grant

• 60 parents and 125 children annually

• Meth - primary drug

Domestic Violence & Mental Health

Diverse Population

# Currently

- *CF*! transferred to NACoA for national distribution
- Fifty sites: multiple counties in California, twenty States, Canada, and Russia
- Listed by NREPP (8/08)
- Spanish language version available November 2010.





## **Celebrating Families!** A 16 session evidence-based group for families in early recovery



- Increases successful family reunification.
- Strengthens recovery.
- Improves family life.





# **Groups Are**

- Closed (flexible for treatment centers)
- 8-10 children per group; 15-20 adults (parents, caregivers, grandparents)
- Address: Developmental Assets, Risk & Protective Factors (Attachment)
- Are
  - Strength Based
  - Highly Structured
  - Multi-Modal

# Age Appropriate

- Topics are presented and discussed according to the developmentally appropriate age of the group.
- This helps to ensure that *all* members of the family that participate receive the same message in language or activities that they can understand.

# **Session Components**

Family Dinner

Age Appropriate Groups

- Opening
- Centering
- Group Agreements
- Opening Activity
  Review (Acts of Kindness)

Insights for Living • Teaching Content & Learning Activities

Closing

• Reflection (WOW) & Closing

**Connecting with My Family** 

# **Connecting with My Family**

Quiet music Story Reading Agenda Review Agreements Review Family Acts of Kindness

Family Activities Activity #1: Sharing from Children's Groups Activity #2: Activity Activity #3: Book Exchange

Closing

# Topics

- Topics are presented and discussed according to the developmentally appropriate age of the group.
- All family members receive the same message in language or activities that they can understand.
- Parents learn attachment based interventions: Toileting & Bath Time, Eating, Sleeping, Transitions

# Curriculum

Foundation: Trust

Session 1 – Getting Started

Session 2 – Healthy Living

Session 3 – Nutrition

Session 4 – Communication

Session 5 – Feelings and Defenses

Session 6 – Anger Management

# Curriculum

**Core: ATOD** 

Session 7 – Facts about Alcohol, Tobacco & Other Drugs

Session 8 – Chemical Dependency is a Disease

Session 9 – Chemical Dependency Affects the Whole Family

**Session 10 – Goal Setting** 

# Curriculum

### Safety

Session 11 – Making Healthy Choices

**Session 12 – Healthy Boundaries** 

Session 13 – Healthy Friendships or Relationships

### **Preparation for Graduation**

Session 14 - How We Learn

Session 15 - Uniqueness

**Session 16 - Celebration!** 

# **Celebrating Families!**

### Skills

- Anger management
- Communication • Feelings & Defenses
- Boundaries
- Resistance Skills: Saying NO, Boundaries
- Choosing safe & trustworthy friends
- Problem solving
- Centering/stress
- reduction

Information

- Facts about ATOD; brain chemistry, HALT
- How CD affects families
- Facts about domestic violence
- ${\scriptstyle ullet}$  Learning differences and FASD
- Nutrition
- Risk & protective factors
   Being part of something
- larger than ourselves.

### Sample Lesson Session 8 : CD is a Disease

### Children's Group (8-10)

> Story about Pup > CD is a disease > Truth Statements

- Preschool Group (4-5) Some families have problems with AOD Pepper The Hug and Truth Statements

### Adolescent Group (13-17)

- CD Stages Role Play
- Addiction and the Brain
- > Truth Statements
- > CD Stages Role Play
- > Talking to your children
- about AOD > Truth Statements

Parent Group

**Sample Activity** 

### Debrief

### With people in role play, then whole group

- We are all angry at this disease (cardboard). But the disease is NOT the person.
- Your Mom/Dad love you! They may not be able to show you because the disease gets in the way.
- Chemical dependency is a disease. You are not to blame for it. There is nothing you can do to make it stop.

## **Demonstration of Disease**

- Do you want to give me a hug?
  If they say "yes", have volunteer try.
- I want to give you a hug. But there is something in our way. What is it?
- We are all angry at this piece of cardboard this disease – which keeps us from showing our love for each other.
- > Take cardboard off. Give each other a hug.

### Why A Specialized Program?

# All members of a chemically dependent family need to learn:

- Healthy living skills
- How to sustain recovery
- How to have positive relationships
- About the disease they have been affected
- They are not alone
- Truth Statements.

# Why Celebrating Families!

- Reinforces and explains what parents learn in treatment and recovery programs
- Integrates teaching of parenting skills with strategies to break cycles of addiction and abuse
- Helps children/teens become aware of their learning style(s)

# Why Celebrating Families! (2)

Teaches about FASD, emphasizing staying in the day and taking action:

- · Understanding without shame
- Protective Factors:
  - · early diagnosis
  - stable, violence-free nurturing home.
- Strengths and learning styles of youth.

# **Helps** Families

- Integrate recovery and parenting
- · Break the rules
- Understand risk & resiliency factors
- Incorporate the Truth Statements
- How to break the cycle:
  - Saying "I love you"
  - Affirming children
  - Spending one-on-one time

# **Helps Birth Parents**

Understand FASD, with an emphasis on staying in the day, while taking action:

- · Understanding without shame
- Protective Factors:
  - · early diagnosis
  - stable, violence-free nurturing home
- Strengths and learning styles of youth.

# **Empowers Caregivers**

- To advocate for children's needs
- To talk with children about family disease
- To understand these children are at risk on many levels.
- Thus the importance of increasing protective factors and minimizing risk factors in these families.

### "Celebrating Families! works!"

Stephanie Brown, Ph.D. Director of The Addictions Institute

'significant size and positive effect for all child, parent and family variables"

> 2006 Outcomes and Replication study by Karol Kumpfer

# **Impact of Parenting**

"The ability of effective parenting to override genetic predispositions to risky behaviors demonstrates the capacity of family-centered prevention programs to benefit developing adolescents".

Gene H Brody, Ph.D., Regents Professor and Director of the Center for Family Research at University of Georgia, 2009.

### **CF!** Evaluation Findings

- Time to reunification significantly decreased
- Large effect on parenting
- · Participants learn and apply new skills
- Effective with Hispanic families "indicating that CF! may be effective among different ethnic groups and a valuable resource for working in ethnically diverse communities. Similar programs might learn from the strategies and curriculum offered by CF!."

### **Comments by Dr. Kumpfer**

9 of 10 parenting and family outcomes were statistically significant. This is <u>normally not possible</u> in research.

Very large effect sizes suggest that *CF*! is resulting in very positive changes in the parents and the family interaction patterns.

CF! Significant Outcomes							
<u> </u>	rotective Factor	Sig.	Level Effect S	ize(d')			
1.	Positive Parenting	.00	.55 (medium)				
2.	Parent Involvement	.00	.50 (medium)				
3.	Parenting Skills	.00	.18 (small)				
4.	Parenting Efficacy	.00	.60 (medium)				
5.	Parenting Supervision	.00	.59 (medium)				
				Kumpfer 2008			



CF! Significant Outcomes "					
Protective Factor	Sig. Level	Effect	Size(	<u>d')</u>	
6. Family Organization (medium)	.00			.64	
7. Family Cohesion .52 (medium)		.00			
8. Family Communication (medium)	u			.65	
9. Family Conflict .15 (small)		.01			
10. Family Strengths/Resi (medium)	lience .00		.70		



CF! Significant Outcomes						
Protective Factor	Sig. Lev	el Effect Size(d')				
11. Social Skills	.01	.19 (small)				
12. Child Depression	.00	.16 (small)				
13. Hyperactivity	.00	38 (small negative)				
14. Child Overt Aggre	ession .00	22 (small negative)				
15. Parent's AOD Use	.00	.51 (medium)				
Of 163 families in stu	dy, one rep	ported case of child abuse. Kumpfer 2006				



# Start Up

- Purchase Curriculum (5 volumes)

   copy: \$ 215 (\$9.00 shipping).
   copies: \$1,350 (\$80 shipping).
- Arrange Training or Technical Assistance
- Plan Evaluation Process
- Set Up Staffing
  - · Site Coordinator (10 hrs a week)
  - Clinical Supervisor
  - · 6-10 Group Leaders (2 per group)

# **Group Leader Qualifications**

- Desire to help families learn
- Desire to learn the model
- · Personal Skills: one to one & group
- Understanding of chemical dependency

Balance teams by gender, ethnicity, recovery

Sample Actual Operati	ny sauger
Group Facilitators: <u>1/2 in-kind</u>	\$9,000
(10 x 18 weeks x \$20/hr x 5 hrs/week)	\$9,000
Site Coordinator:	
(18 weeks x \$30/hr x 10hrs/week)	\$5,400
Food:	
(16 sessions x 15 families x \$10/family)	in-kind
Child Care: if needed	
(16 wks x 2 staff x \$15/hr x 3 hrs)	in-kinc
Supplies: (paper products, toys)	in-
kind	
Total	
\$14,400	
Per participant cost	\$ 360

# **Budget Variables**

Reduce costs by • Staff flex time (\$10-15,000)

- Trained interns and volunteers
- In-kind donations of food (\$2,400), space, child care (\$1,440), transportation

### **Potential Funding** Justice funds: Drug Courts, FTDC

- State/local AOD funds
- Federal, state, local grants
- National, state, local foundations
- State/local private dollars



### **Additional Thanks** Funders **Pilot Sites**

- Judge Leonard Edwards (ret.), Judge K. Lucero
   Family Drug Treatment Court of Santa Clara
- County Dept. of Social Services Community Pilot Sites: Friends Outside, EMQ-Addiction Prevention Services, House On the Hill

- The Health Trust Bernard A Newcomb Foundation Charter Oak Foundation
- **Fuller Foundation** Saint Andrew's Episcopal
- Church Santa Clara County Dept. of Alcohol & Drug
- Services Lucile Packard Foundation for Children's
- Health American, California and Santa Clara County Medical Association Alliances

# For More Information

- Al-Anon and Alateen
   <u>www.al-anon.alateen.org</u>
- Faces and Voices of Recovery www.facesandvoicesofrecovery.org
- Join Together <u>www.jointogether.org</u>
   National Association for Children of
- Alcoholics (NACoA) Children's Kit www.nacoa.org
- National Center on Substance Abuse and Child Welfare (NCSACW)
  - www.ncsacw.samhsa.gov

# For More Information ...

- National Center on Addiction and Substance Abuse at Columbia (CASA) <u>www.casacolumbia.org</u>
- National Clearinghouse for Alcohol and Drug Information (NCADI) <u>www.ncadi.samhsa.gov</u>
- National Institute on Alcohol Abuse and Alcoholism (NIAAA) <u>www.niaaa.nih.gov</u>
- National Institute on Drug Abuse (NIDA) <u>www.nida.nih.org</u>
- Substance Abuse and Mental Health Services Administration (SAMHSA) <u>www.samhsa.gov</u>