

*Effective Substance Abuse and  
Mental Health Programs  
for Every Community*

## Creating Lasting Family Connections

Creating Lasting Family Connections (CLFC) is a comprehensive family strengthening, substance abuse, and violence prevention curriculum. CLFC has demonstrated that youth and families in high-risk environments can be assisted to become strong, healthy, and supportive people. Program results, documented with children 11 to 15 years old, have shown significant increases in children's resistance to the onset of substance use and reduction in use of alcohol and drugs.

CLFC provides parents and children with strong defenses against environmental risk factors by teaching appropriate skills for personal growth, family enhancement, and interpersonal communication, including refusal skills for both parents and youth.

### INTENDED POPULATION

CLFC is designed for youth 9 to 17 years old and their families. The populations that participated in the evaluations were primarily African American, White, or of mixed ethnicity; were 11 to 15 years of age; and lived in rural, suburban, or urban settings. The program has been implemented in 40 States with a variety of populations, including Hispanics/Latinos, Asian Americans, and Native Americans. CLFC has been successfully implemented in schools, faith communities, recreation centers, community settings, juvenile justice facilities, and other settings.

### Proven Results\*

- Delayed onset of substance use for participating youth
- Decreased use of substances among participating youth
- Increased parents' knowledge and appropriate beliefs about substance use
- Increased parental involvement in setting rules about substance use

*\*Compared to nonparticipants.*

### INTERVENTION

Universal

Selective

Indicated

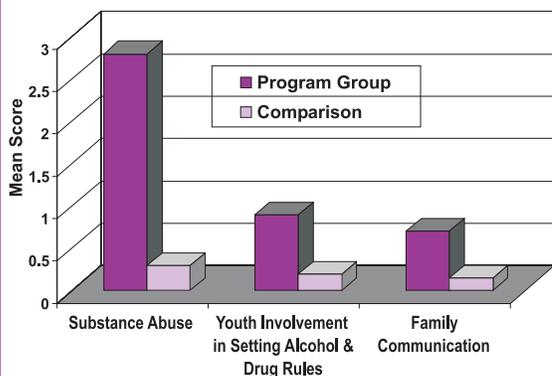


**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
Substance Abuse and Mental Health Services Administration  
Center for Substance Abuse Prevention  
[www.samhsa.gov](http://www.samhsa.gov)

## OUTCOMES

The CLFC program evaluation found positive effects on family and youth resiliency and on substance use among youth 11 through 15 years of age. The program also increased community resiliency by empowering community volunteers to identify, recruit, and retain families.

**CLFC Parent Outcomes: Increased Substance Abuse Knowledge, Communication and Management Skills**



Statistically significant overall program effects on family resiliency included:

- Improved parental knowledge of and beliefs about substance use
- Increased youth involvement in setting rules related to substance use
- Increased use of community services

Positive effects on youth resiliency included:

- Increased use of community services when personal or family problems arose
- Increased bonding with mother, father, and siblings
- Increased community involvement under specific conditions

In addition, the program improved family modeling of alcohol use in African-American communities and moderated overall family alcohol use. Most important, the evaluation found that reductions in substance use among youth who participated in the program were conditionally related to changes in family-level and youth-level resiliency factors targeted by the program.

## BENEFITS

CLFC is designed to—

- Improve refusal skills, resulting in both delayed onset and reduced use of substances by youth
- Increase communication and bonding between parents and children
- Foster greater use of community services in resolving family and personal problems
- Decrease uncontrolled behavior (i.e., reduce violence)

## HOW IT WORKS

Implementing the CLFC model involves—

- Identifying, recruiting, assessing, and selecting the community system(s) that will serve as the focal point of the program.
- Creating, orienting, and training a small cadre of community volunteers to advocate for youth and their families in high-risk environments, and recruiting and helping retain those families in the program.
- Recruiting youth and families in high-risk environments who are willing to participate in the program.
- Administering six highly interactive training modules, three each to both parents and youth, separately (i.e., one module on substance use issues, a second on personal and family responsibilities, and a third on communication and refusal skills).
- Providing early intervention services and followup case management services to connect families to community resources and appropriate alternative activities when necessary.

## IMPLEMENTATION ESSENTIALS

For a high-fidelity replication of CLFC, at least two part-time facilitators are needed for each of the parent and youth modules. After the recruitment phase, these four part-time facilitators can work with up to 30 families, 1 day per week, 4 hours a day, for the duration of the 20-week program. A minimum of two facilitators for each group is strongly recommended because a team approach significantly enhances the group learning experience and is likely to increase the participants' positive response to the program.

Program startup takes 1 to 3 months, and includes:

- 5 to 10 days of training by the developer
- Community mobilization activities
- Identification and recruitment of parents and youth

Facilitators should provide weekly 2.5-hour parent and youth training sessions for a 20-week period. However, the modules may be offered in 5-week increments throughout the year if families are unable to commit to a 20-week program. Facilitators also are responsible for case management or referrals to community services (an optional element when used with universal populations).

## PROGRAM BACKGROUND

CLFC is the national dissemination model based on the results of Creating Lasting Connections (CLC), a 5-year Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Prevention research demonstration project. The project was designed as an ecumenical, community-based program focused on increasing community, family, and individual youth protective factors that would delay the onset and reduce the frequency of substance use. The program was delivered to at-risk 11- to 15-year-old youth through the implementation of a preexisting and privately developed prototype version of CLFC. The external evaluation of the CLC program showed that the program increased key resiliency factors and (through moderating effects) delayed the onset of substance use and reduced the amount of use.

## EVALUATION DESIGN

The CLFC program was evaluated rigorously using random assignment procedures, valid and reliable outcome measures, and multivariate analysis methods to uncover direct and conditional relationships between the program and outcomes.

## PROGRAM DEVELOPER

### **Ted N. Strader, M.S.**

Ted N. Strader is founder and executive director of the Council on Prevention and Education: Substances, Inc. (COPEs). Under his leadership, COPEs has implemented projects on substance abuse and violence prevention, solvent inhalation prevention, research, parent education, and voluntarism. In addition, Mr. Strader has published several articles, produced films, and presented papers and workshops at many local, State, and national conferences on drug abuse. He has recently written a book, *Building Healthy Individuals, Families and Communities: Creating Lasting Connections*.

## CONTACT INFORMATION

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## RECOGNITION

Model Program—Substance Abuse and  
Mental Health Services Administration, U.S.  
Department of Health and Human Services

Model Program—Office of Juvenile Justice  
and Delinquency Prevention, U.S.  
Department of Justice

Promising Program—U.S. Department of  
Education

Special Recognition Award—White House  
Office of National Drug Control Policy

Selected for worldwide replication by the  
International Youth Foundation—YouthNet  
Model Program