Health Educator Guidebook:  
Local Implementation Version

Preface

This guidebook is designed to assist training for local implementation of *Family Matters* and for reference during local implementation. It is adapted from the guidebook that was used for implementation of *Family Matters* with a national sample of families. The original guidebook is available at:

www.sph.unc.edu/familymatters/index.htm.

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**What Family Matters Is**

*Family Matters* is a family program to reduce the prevalence of cigarette smoking and alcohol drinking by adolescent family members ages 12 to 14 years. The program consists of separate mailings of 4 booklets to an adult family member and, after each mailing, follow-up telephone calls by a health educator to the adult family member. The health educator encourages participation, answers questions, and completes protocols. "Health educator" is used very broadly in the program and Guidebook. Experience with local implementations of *Family Matters* indicates many people without formal health education credentials can implement the program.

An article that describes the program in detail, as implemented in the research that evaluated it with a national sample of families, is recommended reading.


Additional sources of information on the program also are available.

[www.sph.unc.edu/familymatters/index.htm](http://www.sph.unc.edu/familymatters/index.htm)
[www.casat.unr.edu/contact.html](http://www.casat.unr.edu/contact.html)
[www.modelprograms.samhsa.gov](http://www.modelprograms.samhsa.gov)
email: kbauman@mindspring.com
Family Matters Premises

1. The prevalence of adolescent tobacco and alcohol use should be reduced.

2. Ages 12 to 14 are appropriate to focus on reducing adolescent tobacco and alcohol use.

3. Families have profound influence on their children.

4. Involving teens in family communication is fundamental.

5. Multiple adult family members, rather than one, should be involved when available and appropriate.

6. The mother (or mother surrogate) usually is the most appropriate program contact in the family.

7. The health educator should not be directly involved with the adolescent.

8. Program success requires a high participation rate.

9. Involving both nonusers and nonusers of substances, and all other risk levels, is desirable.

10. The program should be amenable to implementation by many different types of organizations and persons.

11. The program should be practical and capable of implementation beyond the research setting.

12. The program should be based on research findings and scientific theory.
**Evaluation of *Family Matters***

Adolescent-parent pairs throughout the United States, identified by random digit dialing, participated in the evaluation of *Family Matters*. Baseline data were collected from parents and adolescents by telephone from June 1996 to February 1997. As baseline data were collected, adolescent-parent pairs were randomly allocated to either receive the program or to serve as control. The program was implemented from July 1996 to September 1997. Follow-up interviews were conducted by telephone with all parents and adolescents three months (January 1997 to April 1998) and one year (August to January 1999) after the program.

Of the 658 families offered *Family Matters*, 83% began the program and 62% completed all 4 booklets and telephone follow-ups. Families averaged nearly 4 ½ hours reading the 4 booklets and doing activities. The health educators averaged 45 calls to homes (including “not at home,” “no answer,” etc.), and talked with the parent contact an average of 8 times for a total of 58 minutes per family.

Each program activity was liked by at least 90% of the parents. Among parents in families that completed the program, 96% felt their teen use of tobacco would be impacted by the program (90% for alcohol), 97% rated the booklets as helpful, 75% considered their teen a willing participant, 77% rated other family members as willing participants, 86% declared the program convenient and their time devoted to it about right (88%), and 86% said they would definitely recommend the program to others.

But the proof of the pudding is program effects for adolescent tobacco and alcohol use. Approximately 1300 adolescent-parent pairs were involved in analyses conducted to assess program effects for teen use. Findings suggest *Family Matters* reduced the prevalence of adolescent cigarette smoking and alcohol use at three months and one year after the program. The magnitudes of effects were similar to those found in rigorous evaluations of state-of-the-art school-based drug prevention curricula. Evidence suggests the program prevented onset of use by nonusers. Although trends were consistent with the conclusion that the program also reduced use
by initial users, the sample of users was too small for statistically significant effects if there were any to be detected. Factors that explain the relationship between program and outcomes were not identified.

Publications of findings directly related to *Family Matters* effects for adolescent alcohol and tobacco use are as follows.


In 2002, *Family Matters* was designated a Model Program by the Substance Abuse and Mental Health Services Administration of The U.S. Department of Health and Human Services (http://modelprograms.samhsa.gov/default.htm).
“Family Member” and “Program Contact” Defined

Any person with whom the adolescent enjoys a close relationship is considered a family member. The family can be the adolescent plus: one or two parents (biological and surrogate), siblings, grandparents, uncles and aunts, and others appropriate and available for participation. The “others” may include persons important to the teen, such as coaches, Big Buddies, boyfriends/girlfriends of the teen or parent, ministers, neighbors, or family friends.

In most cases the contact family member, to whom booklets are mailed and telephone follow-up calls are made, is the mother or mother surrogate of the teen. Alternatives include father or father surrogate and grandparents.

Program Delivery Schedule

1. Introduction Letter and Booklet 1 mailed
2. Telephone contact: 13 days after booklet mailed
3. Next booklet mailed: <1 week after telephone contact completed
4. Repeat 2 and 3 for Booklets 3 and 4
Dear [Parent Name],

Teenage drinking and tobacco use are serious problems facing families today. Teens who use alcohol and tobacco are at risk for many problems, such as trouble with their health now and in the future, accidents, and school difficulties. Fortunately, families can help prevent teen alcohol and tobacco use. But they rarely are given the chance to learn more about how to do it.

The [your organization name here] is offering a program called Family Matters. The program is for families who want to know more about how to keep their teen from becoming involved with alcohol and tobacco. It's also for families whose teen is already using alcohol and tobacco. Family Matters has been shown by

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The Conceptual Model

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FIGURE 1
Conceptual Model for Family Matters

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Family Matters Program

- Family expects negative consequences from adolescent's use
- Family believes adolescent is vulnerable to use
- Family believes they can influence adolescent's use

Program engagement

- Family expects negative consequences from adolescent's use
- Family believes adolescent is vulnerable to use
- Family believes they can influence adolescent's use

General (family except adolescent)
1. ↑ understanding of adolescence
2. ↑ supervision
3. ↑ support
4. ↑ skillful communication
5. ↑ attachment
6. ↑ time together
7. ↑ educational encouragement
8. ↓ conflict

Use specific (family except adolescent)
1. ↑ expect negative consequences
2. ↓ family use
3. ↓ availability
4. ↑ rule setting
5. ↑ monitoring
6. ↓ nonfamily influences
7. ↑ negative attitude
8. ↑ encouragement of nonuse

Adolescent:
1. ↑ expect negative consequences
2. ↓ friends who use
3. ↓ intentions
4. ↓ availability

↓ adolescent use

---

10
Dear (parent name),

Teenage drinking and tobacco use are serious problems facing families today. Teens who use alcohol and tobacco are at risk for many problems, such as trouble with their health now and in the future, accidents, and school difficulties. Fortunately, families can help prevent teen alcohol and tobacco use. But they rarely are given the chance to learn more about how to do it.

The (your organization name here) is offering a program called Family Matters. (If appropriate, also identify organization supporting/endorsing your implementation of the program, such as, “The Chowan County Health Department also has endorsed this as a worthwhile program for families in our area”). The program is for families who want to know more about how to keep their teen from becoming involved with alcohol and tobacco. It’s also for families whose teen is already using alcohol and tobacco. Family Matters has been shown by a national scientific study to reduce adolescent tobacco and alcohol use and it has been recommended for widespread implementation as a Model Program by the U.S. Department of Health and Human Services.

Family Matters is being offered free of charge to (source of participants here, such as “the families of all middle school students at Culbreth Middle School”).

Here are some features of Family Matters.

- It’s designed for you to use at home, at times most convenient for your family.
- It’s in four easy-to-do booklets that will be mailed to you with brief telephone calls to answer any questions you might have.
- It provides helpful information about preventing teen alcohol and tobacco use.
- It describes specific activities to do with your teenager.

The first booklet of Family Matters — Why Families Matter — is enclosed. Please complete the booklet as soon as you have a chance to do so. I (or one of our staff members) will call you in about two weeks to answer your questions.

Sincerely,

(Name/title here)
The Booklets

Introduction

Each booklet has 6 parts:

1. Purpose
2. Instructions
3. Questions and answers
4. Activities
5. Recap
6. Next Steps

A trinket is mailed with each booklet (next page).

Booklet 1: A pencil with *Family Matters* logo
Booklet 2: Badge of honor
Booklet 3: Refrigerator magnet (communication tips)
Booklet 4: Balloon with *Family Matters* logo
Trinkets
**Booklet 1: Why Families Matter**

Booklet 1 is designed to explain the program to parents and to engage them in the program. The readings and activities address three issues: the negative consequences of adolescent alcohol and tobacco use; the vulnerability of every adolescent to alcohol and tobacco use; and family influence on teens. Unlike the other booklets, Booklet 1 is designed to be used only by the parents and/or other adults. Some families, however, choose to include their adolescent in the activities.

**Q & As -Answering Your Questions (parents/p. 2)** This reading addresses issues frequently raised by families as they are becoming familiar with *Family Matters*. The questions and answers detail the reasons families should participate, what the program involves, and what participation will entail for their family.

**Activity 1: What Do You Know? (parents/10 mins./pp. 4-7)** Parents are asked to take a ten-question true/false quiz which challenges many common misconceptions concerning adolescent alcohol and tobacco use. The quiz is followed by a section which provides the correct quiz answers and accompanying explanations for each statement.

**Activity 2: These Things Happen (parents/5 mins./pp. 8-11)** Using a checklist, parents are asked to indicate which items they believe represent potential consequences of adolescent drug use for their teen and for the family. Following the checklist, a description of the possible outcomes of adolescent alcohol and tobacco is provided for parents to read and discuss.

**Activity 3: Chip Off the Old Block (parents and other relevant adults/10 mins./p. 12)** Parents create a mental list of ways in which their adolescent’s behavior is similar to their own. In doing so, they are asked to rely on their own observations as well as their discussions with other adults who know the family well. This activity reinforces for parents the powerful influence that they exert on their child’s behavior.
Booklet 2: Helping Families Matter to Teens

Booklet 2 engages family members in consideration of family dynamics. For the first time, the adolescent is involved in the program with the parents, and with other family members and significant adults. The readings and activities help family members understand the typical changes accompanying adolescence. In addition, this booklet addresses the ways that family members can increase closeness and positive communication within their family, and factors that decrease the adolescent’s risk of using alcohol and tobacco.

Booklet 2 has two sections. The first section, Understanding Your Teenager, focuses on changes young people experience as they become adolescents. The second section, Working Together As A Family, identifies and suggests activities to develop skills which can enhance a family’s ability to work together, including parenting style, warmth, quality time together as a family, conflict, and communication skills.

Q & As -Understanding Your Teenager (parents/pp. 3-4) This section addresses questions frequently asked by parents concerning the behavior of typical adolescents. This reading aids in parents’ efforts to prevent teen alcohol and tobacco use by increasing their awareness and sensitivity to the changes their teen is experiencing.

Activity 1: Now We Get It! (parents/5mins./p. 5) Parents list five things that their adolescent said or did in the last week that might be explained by the changes described in the preceding Q & As section. Through this activity, parents are able to apply their new and/or refreshed understanding of adolescent changes to the behavior of their teen.

Activity 2: Where Are You Coming From? (whole family/30 mins./pp. 6-7) Family members and teens answer questions and discuss their experiences as adolescents. In addition to enabling family members to better relate with one another, this sharing time is meant to provide both parents and teens with a better
understanding of the parallels of their adolescent experiences, and, thus, a better understanding of each other.

**Q & As - Working Together As A Family (parents/pp. 8-10)** This section includes responses to parents’ frequently asked questions about communicating with and disciplining their teens.

**Activity 3: Let’s Talk!** (whole family/30 mins./p. 11) This activity brings the family together for each member to share an experience of the past week. Conducted as a family meeting, this activity allows family members to enjoy one another’s company and share experiences, as well as to practice the communication skills found on their *Family Matters* magnet.

**Activity 4: Family Time** (whole family/15 mins./p. 12) The family meets to decide on and plan fun future family activities. Each member writes one or two activity ideas on a slip of paper. Each activity slip is drawn from the communal pile and scheduled so that all family members can participate. These special events encourage family members to plan events and spend quality time together.

**Activity 5: Family Matters Badge of Honor** (whole family/5 mins./p. 13) Families can create their own badge or use the *Family Matters* button as a “Badge of Honor” to reward each other for their work together as a family. Parents also are encouraged to let teenagers exchange the badge for privileges or other rewards.

**Booklet 3: Alcohol and Tobacco Rules Are Family Matters**

Building on Booklet 2, Booklet 3 specifically addresses alcohol and tobacco use by adolescents and communicating about them. Family members are advised on how to identify alcohol and tobacco use by their teen, ways in which they may inadvertently facilitate alcohol and tobacco use by their teen, and ways to safeguard against the use of alcohol and tobacco by their teen.
Q & As - Answering Your Questions (parents/pp. 2-4) This section provides answers to parents’ frequently asked questions about how they can communicate effectively with their adolescent about alcohol and tobacco use. The communication of household rules and standards from parents to teens, and the establishment of rewards and consequences related to rules, are addressed by example. In addition, parents are given a checklist of possible indicators of teen alcohol and tobacco use.

Activity 1: Are You a Partner to Teenage Alcohol and Tobacco Use? (parents/5 mins./p. 5) Using a behavior checklist, parents are asked to indicate the ways in which they may have inadvertently facilitated the use of alcohol and tobacco by their adolescent. They are then encouraged to discuss ways in which they can alter or eliminate such facilitative behaviors.

Activity 2: The Rules of the House (parents/15 mins. / pp. 6-7) Parents establish household rules for alcohol and tobacco use. They may include rules for adult use. Although a list of examples is provided, parents are encouraged to use their discretion and choose rules that are appropriate, firm, fair, and reasonable for their particular family. These rules are then discussed later by the entire family in Activity 4.

Activity 3: Story Time (whole family/30 mins./pp. 8-10) Families are asked to read out loud several scenarios involving adolescents and alcohol or tobacco. Questions about the possible consequences and ethics involved in each situation are posed and can be used to trigger family conversation about alcohol and tobacco use.

Activity 4: Family Rules About Alcohol and Tobacco (whole family/30 min/p.11-13) As a continuation of Activity 2, the family meets to discuss and agree upon a set of family rules about alcohol and tobacco use. This meeting also involves discussion about the rewards and consequences related to these rules. It is very important that the adolescent be involved in this discussion so that he or she can fully understand the rules, see why they are important, ask questions and express concerns, and finally agree on what is reasonable and appropriate. It is suggested that families post the Family Rules for optimal accessibility.
Booklet 4: Non-Family Influences That Matter

Booklet 4 addresses how families can deal with influences on adolescent alcohol and tobacco use outside of the family, such as peer pressure and the media. The readings and activities are designed to alert the family to negative non-family messages as well as to advise family members on methods to encourage positive influences. In addition, a review and reflection section covering the entire program is included.

Q & As - Peer and Media Pressure (parents/pp. 2-4) This section provides answers to commonly asked questions regarding peer pressure and the media.

Activity 1: “Just Say No” Is Only One Way To Go (whole family/20 mins/pp. 5-6) This activity asks parents to talk with their teens about situations in which peer pressure may arise. Alternate modes of ‘saying no’ are offered for family members to discuss. Peer pressure scenarios and related questions are provided to spur family discussion.

Activity 2: The Critic (whole family/30 mins/pp. 8-10) Families are asked to attend to the specific alcohol or tobacco-related messages in television shows and advertisements. Family members are then asked to answer questions and discuss issues relating to the messages conveyed through the media.

Activity 3: Family Matters Checklist (parents/5 mins/pp. 10-12) Parents are asked to identify the Family Matters suggestions and readings that they applied (or continued applying) by checking those items on a checklist. If parents indicate fewer than 15 checks, it is suggested that they complete some of the remaining activities. If they have 15 or more checks, they are then duly congratulated and asked to continue to involve their family in activities which raise awareness about as well as prevent alcohol and tobacco use.
Health Educator Responsibilities

The health educator is responsible for making telephone calls to families after each mailing. Each telephone contact is guided by a written protocol. It is essential that the protocols be followed. However, communication often goes beyond the scripts and requires knowing the program, being prepared to respond appropriately to questions, and pleasant and skillful communication.

A health educator must do the following:

◊ Encourage families’ engagement in Family Matters, as well as completion of the program correctly and in a timely manner

◊ Use the appropriate telephone voice, skills and presentation style when speaking to family members

◊ Deliver the protocols in a flowing, conversational manner using clear, concise statements

◊ Check for accurate completion of the prescribed number of activities in each booklet

◊ Provide sincere praise to family members who are participating in Family Matters

◊ Know when to refer questions and consult with others

◊ Record and document participant contact information, protocol responses, comments, and questions accurately and legibly

◊ Perform other administrative tasks as needed for Family Matters

◊ Adhere to confidentiality of information

◊ Accommodate parent requests within program guidelines
General Telephone Techniques

The health educator’s contact with the family is crucial to the success of Family Matters. The demeanor, attitude, and rapport with family members can significantly affect their opinions about, success with, and motivation to participate in the program. It is vital that families participate in and are engaged in the program. Below are some guidelines for creating and maintaining good rapport with families during phone contacts and guidelines for ensuring that the ways in which information collected from families is consistent and useful.

At days end, it is the health educator’s discretion as to what is appropriate, as long as the basic Family Matters guidelines are followed. The goal is to make parents comfortable and keep them engaged in the program. YOU, the personal human contact, are the major asset of Family Matters, so be personable and HAVE FUN!

Enthusiastic

Be energetic (but, of course, without sacrificing professionalism).

Express excitement balanced with appropriate attention to the serious nature of these topics.

Be pleasantly directive.

Communicate personal conviction about the value of the program.

Compliment family members for showing care for their adolescent by participating in Family Matters.

Standardized

Ask all questions in the order presented and as worded in order to ensure comparability of responses.

Minimize variation in the way questions are delivered.
Minimize extraneous comments and explanations.

Talk only with the family contact unless the family explicitly requests otherwise, and then not with the teen.

**Non-intrusive**

Focus on program materials and relevant topics only.

Avoid personal disclosures about yourself.

Respect family member requests about calling times and all other appropriate matters.

Politely redirect family members who stray from *Family Matters* topics, but remember that it is vital to establish a good rapport with parents. They may disclose personal information. Record that and follow up on it (i.e. if they mention a sick child, note it and ask how the child is on the next call).

**Professional and polite**

Be very aware of your comments and responses to parents. Remember that they may see health educators as experts in areas which they might not be (i.e. child development, counseling, alcoholism).

Speak in well-delivered, concise, and clear statements.

Be knowledgeable about the program. If you do not know the answer to a question, however, be honest about that and ask if they can be called back with a correct answer.

Thank families and reinforce the important role that they play by participating in *Family Matters*.

Be tactful and respectful for families in your tone and words.

Provide honest responses to questions relating to the program.
Non-directive probing

Probes are used to obtain more information if the participant’s answer is unclear, irrelevant, or incomplete.

Improper probing puts words in the participant’s mouth. It’s better to politely request a more specific answer without making any assumptions.

Clarify and elaborate without influencing participant responses.

Examples of probing techniques:
- Show interest (uh-huh, I see, Yes)
- Pause
- Repeat the question
- Repeat the reply

Ask neutral questions:
- Clarification questions
  ◊ Could you please explain that?
  ◊ So how do you think you would classify that? (list possible responses)

- Specificity questions
  ◊ Could you be more specific about that?

- Relevance questions
  ◊ How do you mean that?
-Completeness question

◊ Anything else?

◊ Can you think of an example?

Even if a question seems redundant due to a comment that the family contact has already made, do not assume you know the answer they would give. You can say:

◊ You may have answered this question, but I want to be sure that I’m not putting words in your mouth. [Then read question and answer choices]

Quality conscious

Control the pace of the phone contact without rushing respondents.

Try not to rush -- always focus first on the quality of each contact rather than the time it takes to finish. This includes making sure that you have enough time to finish an entire protocol before you make a call (enough time not to miss your bus, for instance).

Double check and review all completed documents

Problems in the Family

Our experience with Family Matters is that major problems in families, such as child abuse and neglect, physical violence between adults, or suicide threats, rarely are revealed. However, a serious family problem in need of emergency attention may be revealed to a health educator. The procedures of the local organization implementing Family Matters will need to be followed in such cases.

The procedures we used in our national implementation were as follows.
“If anyone ever suspects serious family problems (such as, child abuse and neglect, physical violence between adults, or suicide threats) they must immediately inform the principal investigator by email, telephone, and/or personal contact. They must also describe, in writing, the problem and the details of how they learned about it and give a copy to the principal investigator. The principal investigator will discuss the problem with the health educator and with other appropriate professionals if indicated to determine what action if any should be taken. Such action may include reporting the information to appropriate officials as required by law.”

**Discussing Non-Family Matters Issues**

Family members may want to discuss health-related or other topics not directly relevant to *Family Matters*. It is imperative that the focus be on *Family Matters* and that extended discussion of other topics/concerns be avoided. If family members begin to divert focus to other topics, try to redirect their attention.

If needed, refer them to an appropriate resource, such as in the referral list at the end of the Guide.

◊ Our focus is on family programs for tobacco and alcohol... You may want to contact.... I can give you this number....

Although referral numbers other than those for tobacco and alcohol are listed on the referral sheet at the end of the Guide, do not offer them unless a family member makes a direct, explicit request for information.

If you are unsure about what action to take, talk with a supervisor.

◊ I am not sure how to deal with this. I would like to talk with my supervisor and call you back. Is there a time that would be most convenient for you?
Commonly Asked Questions and Responses

This section provides questions that may be asked by families and appropriate responses to those questions. What you read on these pages should guide your responses to families -- you need not use these responses verbatim. When responding to family member concerns, always be concise and thorough.

**How did you get my child’s name?**

Give source.

**How did you get my phone number?**

Give source.

**Who is doing the program?**

Give source.

**What are you going to do with the information you are getting?**

It will be used to assess how well we are doing the program.

**What is the program?**

It is 4 booklets that have readings and activities for families. Each booklet is mailed to you. Each mailing is followed by a phone call from a health educator who will ask and answer questions about the program.

**How long does it take to do all of the booklets?**

On average families spend a total of 4 ½ hours to complete all the booklets and activities.
How much time will it take to do the activities?

Each activity takes between 5 and 30 minutes. Most take about 10 minutes.

How long are the telephone calls?

About 15 minutes each, on average, for a total of 60 minutes for the whole program.

Does it cost me anything? / Do we get paid?

No

Why should I do the program?

It could help you, your adolescent, and other family members by letting you discuss and do activities related to alcohol and tobacco use for teens.

Adolescent alcohol and tobacco use are major problems in the U.S. and research shows the program could reduce use of those substances by your teen.

Why is the program focused on younger teens?

This is a critical age for many adolescents -- the age when many start to use tobacco and alcohol and develop habits that continue as adults.

Who should we involve in the activities?

Your teen, any older siblings, parents or other close adult family members who know your teen, as well as others who know your teen well (i.e. coach, minister, cousin, neighbor).

Sometimes parents decide to include younger siblings. We recommend that you read each activity beforehand and determine whether you think it is appropriate for your younger
children to be involved. Other young teenagers outside of the family are encouraged to participate, as well.

**Should I give the booklets to my child to read?**

At the beginning of each section, there will be directions on who should read each part. Some parts are only for adults to read and others will involve the teen.

**Are you going to call me back next time?**

A member of our health educator team will call you back, but it might not be me.

**Why do you need to call me after we get the booklets?**

To ask you questions about your progress and opinions or thoughts about the program, and to encourage you to participate. We will also answer any questions you might have about the program.

**Where else has this program been done?**

Families all across the U.S. have participated in *Family Matters*. They have really enjoyed being a part of *Family Matters* and benefited from it.

**I would like to do the program, but I am afraid that my child will not want to participate -- he/she will think that I am accusing him/her.**

You can tell your teen that this program is for all types of families and teens--ones that do and don’t use alcohol and tobacco. You can also let your teen know that the activities in these books are designed for families and teens to talk and share ideas about alcohol and tobacco.
My teen will think it is silly to sit with booklets that structure our conversation. We do better when conversation is spontaneous.

Some parents find it is easier to talk to their teens using the booklets as a starting point, a way to open up discussions. Others find that their teenagers respond better if the parent reads the activity beforehand and then slips the activities in during normal family together time, without reading aloud from the books.

What are the booklets about?

_Booklet 1_ describes *Family Matters* and explains why families should do the program. The activities and readings are designed to show that families matter a lot when it comes to preventing teen alcohol and tobacco use.

_Booklet 2_ is about things that families can do to help prevent their teenagers from becoming involved with cigarettes and alcohol. You will learn about adolescent development, communication skills, and activities that if done regularly should help steer your teenager away from alcohol and tobacco use.

_Booklet 3_ is about keeping cigarettes and alcohol away from your teen, and establishing rules about alcohol and tobacco use.

_Booklet 4_ is about some indications that your teenager may be using drugs and how to react. Also, this part includes activities on influences from outside of the family which may impact adolescent alcohol and tobacco use, such as their friends and television.
I smoke and have a beer daily; can I succeed in sending a message that my teen will trust?

Absolutely! You can tell your teen that because you love him/her and care for his/her health, and because you recognize that smoking is addictive and bad for one’s health, you do not want your child to start up this bad habit. Also, drinking by teenagers is not only illegal, but it can lead to general trouble-making and a decreased interest in family and school.

Do I have to follow the program exactly? Some of it will be review for my child.

We think each part is very valuable. Even if your child has done some similar activities before, *Family Matters* activities are new, fun and provide reinforcement for what your child may already know. Most importantly, they involve all of your family.

Am I committed to doing the program if I just read the first booklet?

No, not at all. However, we do think it is very important that you read the first booklet and try to do the activities to see how you enjoy it. You may find it is better and more fun than you had anticipated.

Is there anyone else I can talk with about this program?

Yes, if you would like, I will have my supervisor call you to answer any questions you might have.
Tell me more about teen use of cigarettes and alcohol

Tobacco

- 50% of high school seniors have smoked cigarettes
- High school students use cigarettes on a daily basis more than they use any other substance
- Approximately 26% of 8th graders, 39% of 10th graders and 50% of seniors say they have smoked cigarettes
- Smokeless tobacco (snuff/ chewing tobacco) is unsafe. It contains nicotine and is addicting. Smokeless tobacco can cause mouth and throat cancer, high blood pressure and dental problems
- Most young people who use drugs begin with tobacco or alcohol

Alcohol

- First use of alcohol typically begins around age 13.6
- Approximately 41% of the nation’s 8th graders, 63% of 10th graders and 75% of 12th graders say that they have used alcohol
- 19% of the nation’s 8th graders, 42% of the 10th graders, and 58% of the seniors say they have been drunk.
- There are more than 3.5 million adolescents who are alcoholics
- 75% of high school seniors have used alcohol
- 2/3 of teenagers who drink report that they can buy their own alcohol
- Use of alcohol and other drugs is associated with the leading causes of death and injury among teenagers (i.e., car accidents, suicide)
- An alcohol related family problem strikes 1 in every 4 American homes
- Alcohol users frequently use other drugs
Reasons to Not Participate and Responses

This section provides possible responses to reasons parents may give for not wanting to participate. You may find it to be to your benefit to be familiar with these next few pages – it always helps to be prepared for a parent wavering on dropping out. Remember, when responding to participant questions, be concise and thorough.

Our family doesn’t need this program. Our kids don’t use alcohol, tobacco, or any other drugs - and they never will.

It sounds like your family might have already found some great ways to deal with the issue of adolescent alcohol and tobacco use. Most parents think their teens will never use them but many teens do. We have found that once families do the program they find it very useful, even those who are sure their own kids never will use tobacco or alcohol.

I don’t have the time.

*Family Matters* is designed for busy families. The activities and readings don’t take much time and you do not have to go anywhere to do them. And, we will be happy to call you back at a later time when you are a little less busy.

(If they have read a booklet)

The entire program takes on average a total of 4 to 5 hours and that can be spread over several months.

(If they haven’t read the booklet)

The materials you have usually take about 15-20 minutes to read. Do you think you might have the time to read it sometime in the next few days? When would be a good time to call you back?
My health isn’t good at this time/one of us is sick.

I’m sorry to hear that -- would it be okay if I call back in a day/week/month (depending on problem) or two when you are feeling better?

I don’t think that I can do this program correctly.

I can help you. The readings and activities are designed so that everyone can do them--there is no right or wrong answer. Most of them simply ask that you talk with your family about tobacco and alcohol related ideas.

My child does not use drugs/alcohol/tobacco.

That is great. Family Matters is a prevention program and is designed for all type of families. Just talking about alcohol and tobacco helps family members better understand each other’s ideas on these issues.

We already do drug education in our house.

That is great that you are already thinking about these issues. We love to hear that. Family Matters would be great to incorporate into what you are already doing – you might find some new things that your family enjoys. Also, we would especially like to get input from you about our materials since you already have experience in these matters and we’d like to get new ideas from you too.

My child already gets drug education at school.

That is great. The way that Family Matters is different from most school-based drug education programs is that it involves the most important influence of all – family! It gives you and your teenager more of an opportunity to share ideas about alcohol and tobacco use. Family Matters can work along with the school’s program.
My child already uses alcohol or tobacco, so there’s no point in doing it.

Your teen continually makes choices about his/her behavior and changes. *Family Matters* materials help you and your teen think about possible negative effects of alcohol and tobacco use. *Family Matters* may help your child stop using tobacco or alcohol.

My child is not a teenager yet, so this program isn’t for our family.

*Family Matters* is specifically designed for children the age of your child (12-14). Your child’s ideas about alcohol and tobacco may have already begun to develop. In fact, they may already know other kids who experiment with alcohol and tobacco. This will give you the chance to share your thoughts about alcohol and tobacco as your child’s ideas develop.

I talked with my child and (s)he does not want to do it.

It is normal for adolescents to be uncomfortable when talking with their families about such topics. However, your enthusiasm about the program may help to encourage your teen’s participation. The readings and activities are written for teens, they are fun and do not take very long. If you can get other family members who are important to your teen to participate, maybe your child will participate also.

My child never listens to what I say anyway, so this program wouldn’t do any good.

One of the purposes of *Family Matters* is to help build communication skills in the family. *Family Matters* activities are for family members and other adults who the teen knows well. If you feel that your teen would be more comfortable discussing these topics with another adult, please include him/her in this program.
All kids try alcohol and tobacco, and I don’t think that there’s any point in trying to stop them.

Many negative consequences are associated with the use of alcohol and tobacco. Each time a teenager experiments, he/she is at risk. The goal of this program is to get parents and teens to talk about their ideas relating to alcohol and tobacco and to get them to think about the immediate and long term consequences of alcohol and tobacco use. Kids may experiment with alcohol and tobacco but your ideas may influence their subsequent use.

The program doesn’t talk about serious drugs like marijuana and crack.

There are lots of negative outcomes for teens who use alcohol and tobacco such as drunk driving accidents and health problems. In fact, teenagers are at greater risk for using alcohol and tobacco than other serious drugs. Also, the use of alcohol and tobacco can lead to experimentation with other drugs, such as marijuana and crack. Using Family Matters to talk with teens about alcohol and tobacco use can prevent other kinds of drug use or other negative consequences.

I can’t get anyone in my family interested in doing the activities.

I understand that these may be hard topics for families to discuss and that families are busy. But they are important. You might want to try incorporating some of the activities into times when your family is already together and doing fun things. Also involving others who are important to your teen may help. The activities are fun and short and once you get started you may find that your family gets more excited about this program. Please give Family Matters a try.
The activities are too hard to follow.

I would like to try to help you with this. Which activities in particular are hard to follow? How about we talk through them?

It’s too hard for me to read.

Is there another family member or other adult who is participating in the program who can help? I would be happy to explain any parts that are difficult to understand.

There’s too much to read.

We divided the booklets into sections to split up the reading. It might be easier to focus on one section at a time rather than try to read it all at once.

I looked over the materials. It did not look interesting to me.

Many of these activities are for all family members. You may find that doing the activities and reading the materials with the whole family makes them more interesting. When family members get to share their ideas the discussions often turn out to be a lot of fun.

I don’t want to be bothered with phone calls / We’ll do the program but I don’t want to have to answer phone calls.

We don’t want to bother you either. If you’ll tell us the best times to reach you, we’ll call then. We’ll only talk with you once after each activity booklet for about 15 minutes. The calls are to answer questions and to help you.

How our family discusses drug/alc/tob use is no one else’s business

I can certainly understand. However, I assure you that what you do tell us is completely confidential and is not shared with
anyone. Also, you do not have to tell me anything you don’t want to.

**Encouragement Techniques for Timely Completion**

The techniques below can help encourage quicker progression through the program. When one or some of the techniques are used with a family, notes should be written and highlighted in the comments section of the Contact Sheet to keep track of which suggestions and techniques have been used with that family.

**Brainstorm** with parent about ways to overcome barriers to completing the booklet.

Help them figure out why they haven't completed the booklet and respond accordingly, perhaps with some of the ideas below.

**Pay attention** to what you might learn about their family situation to help think about what strategies might be relevant to them.

**Use together times** like meal times (dinner or breakfast) or times in the car.

**Walk them through** some of the activities to show them how easy it is for families to incorporate the activities into their daily lives.

Booklet 2: Tell them that one activity is telling stories about their day or week, another is talking about your childhood and comparing to theirs, another is planning to do something together as a family. In fact, Booklet 2 is the easiest to incorporate into everyday life.

Booklet 3: Tell them that one activity is setting specific rules about alcohol and/or tobacco use for their teens; another is discussing those rules with their teens.

Booklet 4: Tell them that one activity is short, and the other is just watching a TV show together.
“Do one activity at a time” instead of trying to do the whole booklet at once.”

“Include who is around.”

If the contact is not able to get the entire family together for *Family Matters*, they can just include the parent and target adolescent.

If the contact can't get the target adolescent alone, they can include whoever is around (e.g., friends) in the activity with the adolescent.

“Read it first”

By preparing beforehand, family times will be more productive. Remind them exactly who they will need to complete each of the activities. Be sure the parent knows that in Booklet 3, they need to figure out rules alone before including the teen.

“Try to finish in a week or less”

Ask the contact to specify a date when they can have the booklet done. If the date is more than a week from that call, encourage them to move it up (maybe with some of these strategies).

"20 MINUTES is what other families have told us Booklet 1 takes"

“BOOKLET 2 IS THE LONGEST.”

Tell them this AFTER they've finished it: Booklet 3 is shorter and Booklet 4 is even shorter.

Make them realize it's "all downhill from here" instead of that they are only half way through the program.
“Use weekends to your advantage”

"How about if we give you the weekend to do the booklet, and we'll call the beginning of next week?

More effects with quick completion?

You can say that it is possible that the program will be more effective if it's done over a relatively short period of time instead of being spread out over a long period of time and therefore perhaps diluting its effects.

Participation Concerns

In efforts to maintain family participation, health educators must pay special attention to families who are suspected to be considering dropping out of the program. Immediate action should be taken to restore family engagement and participation. Families who seem tired or disengaged often continue with the program due to the encouragement, enthusiasm and persistence of the health educator.

If appropriate, try to address any problems that the parents have with Family Matters; you may be able to accommodate them. Of course, you do not want them to feel harassed, but if you can in any way keep their participation, then always try.

Unless a family member specifically says that his/her family wants to quit the program, do not assume that they are considering ending their participation. If a family does finally decide to drop out use the Drop-out Report. Responses to the questions on the form document reasons for no longer wanting to participate, which can be important feedback for improving implementation of the program.
If a family member explicitly says that you her/his family no longer wants to participate:

1. Try to maintain their participation by addressing the particular concerns of the family, describe the merits of the program, refer to *Reasons to not Participate and Responses*.

2. If family members have a particular request that would enable them to continue participating, discuss with them how their request can best be accommodated.

3. If they make a final decision to drop out of the program, ask the contact for the requested information on the Drop-out Report.

**Telephone Protocols**

The telephone contacts with families are guided by 4 protocols, one to follow each booklet. The script is to be delivered in a clear, concise and standardized manner. Each response made by the family member should be recorded correctly.

**Protocol format and procedures**

- The beginning of protocol follows a drop pattern: Based on the family member’s response, proceed to the text that is directly below the response.

- Always clearly circle only one response.
• Do not read text in...

  CAPITAL LETTERS:          some response categories, headings

  Italics (not bold):       directions to health educator

  Italics (bold):           marks first question of each activity.

  (parentheses/underlined): substitute words, e.g. parent or teen name

• All other text should be read verbatim but in a natural manner.
Hello, may I speak with Ms./Mr. (parent name)? My name is (my name) and I am with the Family Matters Program at (name of organization doing Family Matters). We recently sent you the first Family Matters booklet and invited you and (adolescent’s name) to participate. (Probe: It came in a large envelope and included a booklet and pencil. The booklet is called Why Families Matter and has a blue family of five on the cover)

Did you receive the program materials?

YES   NO

They must have gotten lost in the mail because you should have received them by now. Just to let you know, Family Matters is a program for families to help prevent alcohol and tobacco use by their preteens or teenagers. If you haven't received it yet, maybe we do not have your correct address. We have your address listed as (family's address). Is that correct?

NO   YES

Okay, I'll go ahead and send you another one and we'll call you back in about 2 weeks to see if you have any questions about the program. For future reference, what time of day or days of the week is best for us to reach you? (Write times/days on Contact Sheet __________________________) Thanks very much. I look forward to talking to you then. Goodbye.

Can you tell me your correct address? (Write address on Contact Sheet __________________________)

I'll go ahead and send you another packet, and call you back in about 2 weeks to see if you have any questions about the program. For future reference, what time of day or days of the week is best for us to reach you? (Write times/days on Contact Sheet: __________________________) Thanks very much. I look forward to talking to you then. Goodbye.

DON’T SEND IT, I DON’T WANT TO DO THE PROGRAM

We really hope you'll look over the first part of Family Matters -- it just takes about 10 minutes to read -- before deciding whether you want to do the program. Why don’t I send you the first part, then call you back in about 2 weeks? You can tell me then if you want to participate or not.

Some reasons to participate (use if indicated)
- Your child is the age experimentation with alcohol and tobacco begins.
- Family Matters can be done at times convenient to you and your family.
- Family Matters has been used by families all over the United States, and they like it a lot.
- The program has been shown to reduce adolescent use of tobacco and alcohol.

OKAY   NO (Use Drop-out Report)
Great. What time of day and days of the week are best for us to reach you? (Write times/days on Contact Sheet ______________________________) Thanks very much. I look forward to talking to you then. Goodbye

Great. Have you had a chance yet to read over the booklet?

YES  NO

If you have a couple of minutes, I can briefly tell you what Family Matters is about.

OKAY  NO, I DON’T HAVE THE TIME NOW

Okay, why don't I give you a chance to read through the materials and then I’ll call you back in 3 or 4 days so that we can talk about it. Would (suggest day and time) be okay to call back? (Write times/days on Contact Sheet) ____________

Thanks very much. I look forward to talking to you then. Goodbye.

Family Matters is a program to help families prevent preteens and young teens from drinking alcoholic beverages, smoking cigarettes, and using smokeless tobacco. It comes in four parts that are easy to do and mailed to you at home. Each part has a booklet with helpful information for parents and activities that families can do together at home and at your own pace. About 2 weeks after you receive each booklete, a health educator will contact you to answer any questions you may have and to find out how you like the program so far. We would really like your family to participate. Why don't I give you a chance to read through the materials and then I’ll call you back in about 3 days so that we can talk about it? When would be a good time to call back? (Write times/days on Contact Sheet) ____________ (If parents say they will not read it, ask why and respond)

Great! I'd like to ask you some questions about it if you have a couple of minutes.

OKAY  NO

Alright. Would (suggest day and time) be okay to call back? (Write time/day on Contact Sheet ________________) Thanks very much. I look forward to talking to you then. Goodbye.

Okay, to remind you a bit about what you read, the booklet had a question and answer section for parents to read called Answering Your Questions and 3 activities for parents or other adult family members to do. First, I want to see if you have any questions or comments about any of them.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
Which activities did you do?

1.1 Activity 1: What Do You Know?, true/false statements about teen alcohol and tobacco use.
   1 YES
   2 NO

1-2 Activity 2: These Things Happen, problems that might happen to your teen and your family if your teen used alcohol or tobacco.
   1 YES
   2 NO

1-3 Activity 3: Chip Off the Old Block, ways that your teen is like you, and ways that you influence your teen without even knowing it.
   1 YES
   2 NO

1-4 Circle number of activities completed:

   3  2  1 (If 3 activities completed skip to 1-5. If 2 completed and they don’t think they’ll do the third, skip to 1-5).

   We’d like for you to do all or most of the activities before asking you what you think of the program. Why don’t I give you a chance to do the rest of the activities, and then I’ll call you back in 3 or 4 days so that we can talk about it? Would (suggest day and time) be okay to call back? (Write time/day on contact sheet ________________). Thanks very much. I look forward to talking to you then. Goodbye.

1-5 Activity 1. The first activity is called What Do You Know? and has true/false statements about teen alcohol and tobacco use. How much new information did you learn from that activity?
   1 A lot
   2 Some
   3 Not very much
   4 Nothing
   98 DON’T KNOW
   99 REFUSED

1-6 How much did you like this activity? Would you say…
   1 A lot
   2 Some
   3 Not very much
   4 Not at all
   98 DON’T KNOW
   99 REFUSED
1-7. Who participated in this activity? *Probe to check for participation if unclear*

1. ADOLESCENT
2. ADOLESCENT'S FATHER / FATHER SURROGATE
3. ADOLESCENT'S MOTHER / MOTHER SURROGATE
4. OTHER ADULT FAMILY MEMBER(S)
   (specify: ______________________)
   (specify: ______________________)
5. BROTHER(S) (specify number: _____)
6. SISTER(S) (specify number: _____)
7. OTHER
   (specify: ______________________)
   (specify: ______________________)
8. DON'T KNOW
9. REFUSED

1-8. *Activity2.* In the second activity called These Things Happen, which was about some problems that might happen to your teen and your family if your teen used alcohol or tobacco, how much new information did you learn about problems which can potentially result from teen alcohol and tobacco use?

1. A lot
2. Some
3. Not very much
4. Nothing
8. DON'T KNOW
9. REFUSED

1-9. How much did you like this activity?

1. A lot
2. Some
3. Not very much
4. Not at all
8. DON'T KNOW
9. REFUSED
Who participated in this activity? *Probe to check for participation if unclear*

1 ADOLESCENT
2 ADOLESCENT’S FATHER / FATHER SURROGATE
3 ADOLESCENT’S MOTHER / MOTHER SURROGATE
4 OTHER ADULT FAMILY MEMBER(S)
   (specify: __________________________)
   (specify: __________________________)
5 BROTHER(S) (specify number: _____)
6 SISTER(S) (specify number: _____)
7 OTHER
   (specify: __________________________)
   (specify: __________________________)
89 DON’T KNOW
99 REFUSED

1-11. *Activity 3.* In the third activity called Chip Off the Old Block, which about ways that your teen is like you, and ways you might influence your teen without even knowing it. How much did it help you think about the influence you have over your teen?

1 A lot
2 Some
3 Not very much
4 Not at all
89 DON’T KNOW
99 REFUSED

1-12. How much did you like this activity?

1 A lot
2 Some
3 Not very much
4 Not at all
89 DON’T KNOW
99 REFUSED
1-13. Who participated in this activity? *Probe to check participation if unclear*

1   ADOLESCENT
2   ADOLESCENT'S FATHER / FATHER SURROGATE
3   ADOLESCENT’S MOTHER / MOTHER SURROGATE
4   OTHER ADULT FAMILY MEMBER(S)
   (specify: ________________________)
   (specify: ________________________)
5   BROTHER(S) (specify number: ____)
6   SISTER(S) (specify number: ____)
7   OTHER
   (specify: ________________________)
   (specify: ________________________)

98  DON’T KNOW
99  REFUSED

Ask all of the following questions.

1-14. About how long did it take to read the booklet and do the activities? ______________________

1-15. Were the instructions with the activities…

1   More than you needed to do them?
2   About right?
3   Less than you needed to do them? (*Probe: What kind of problems did you have? What was missing that would have been helpful?) ______________________

98  DON’T KNOW
99  REFUSED

1-16. After doing this booklet, do you feel more or less confident that your family can help keep your teen from using alcohol and tobacco?

1   More
2   Less
3   About the same
98  DON’T KNOW
99  REFUSED

1-17. Overall, after doing Booklet 1, do you think it is more or less important to do Family Matters?

1   More important
2   Less important
3   Neither
98  DON’T KNOW
99  REFUSED
Those are all of the questions that I have about Booklet 1. We appreciate your input, as it will help us make the program as fun and effective as possible.

1-18. Now, for the next part of Family Matters, you'll start involving (adolescent's name) and other family members in the program. Other families have found that the program works best when they include as many family members as they can, like other parents, grandparents, older brothers and sisters, and even adults from outside the family who spend a lot of time with your teen. Who do you think you will involve in Family Matters? (Circle all family members)
1 ADOLESCENT
2 ADOLESCENT'S FATHER / FATHER SURROGATE
3 ADOLESCENT’S MOTHER / MOTHER SURROGATE
4 OTHER ADULT FAMILY MEMBER(S)
   (specify:___________________________)
   (specify:___________________________)
5 BROTHER(S) (specify number:____)
6 SISTER(S) (specify number:____)
7 OTHER
   (specify:___________________________)
   (specify:___________________________)
88 DON’T KNOW
99 REFUSED

1-19 What is your exact relationship to (adolescent’s name)? Probe to check for participation if unclear
1 BIOLOGICAL MOTHER
2 STEP MOTHER
3 ADOPTIVE MOTHER
4 FOSTER MOTHER
5 GRANDMOTHER
6 AUNT
7 OTHER FEMALE RELATIVE
8 OTHER FEMALE NON-RELATIVE
98 DON’T KNOW
99 REFUSED

Okay. Those are all the questions I have for you. Again, do you have any other comments or questions for me?
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

I’ll be sending you Booklet 2 of Family Matters in a day or so. We’re really glad that you and your family are doing the program. We look forward to talking to you in a few weeks. Goodbye.
HEALTH EDUCATOR RATINGS:

1-19. In your opinion, how enthusiastic about the program is the parent?
1   Very enthusiastic
2   Somewhat enthusiastic
3   Neither enthusiastic nor unenthusiastic
4   Not very enthusiastic
5   Not at all enthusiastic

1-20. Do you believe that there were any questions in which the parent did not tell the truth?
1   Yes----->Which questions?__________________________________________
2   No

1-21. Were there any questions that the parent did not understand?
1   Yes----->Which questions?__________________________________________
2   No

HEALTH EDUCATOR COMMENTS:


Hello, may I speak with Ms./Mr. (parent name)? Ms./Mr. (parent name), this is (my name) with the Family Matters Program. I am calling to see how things are going and to make sure that you received the second booklet of Family Matters. *(Probe: It’s called Helping Families Matter to Teens and is printed in red ink and came with a Badge of Honor button)*

Did you receive the materials?

YES  NO

It must have gotten lost in the mail because you should have received it by now. Let me make sure I have your correct address. We have your address listed as *(family's address)*. Is that correct?

NO  YES

Okay, I'll go ahead and send you another one and we’ll call you back in about 2 weeks to see if you have any questions about the program. What time of day or days of the week is best for us to reach you? *(Write times/days on Contact Sheet)_

Thanks very much. I look forward to talking to you then. Goodbye.

Can you tell me your correct address? *(Write address on Contact Sheet)_

I'll go ahead and send you another packet and call you back in about 2 weeks to see if you have any questions about the program. What time of day or days of the week is best for us to reach you? *(Write times/days on Contact Sheet)_

Thanks very much. I look forward to talking to you then. Goodbye.

DON’T SEND IT, I DON’T WANT TO DO THE PROGRAM

We really hope you'll look over the booklet before deciding whether you want to do the program. A lot of families seem to enjoy that the activities include the entire family. Why don’t I send you the booklet, then call you back in about 2 weeks? You can tell me then if you want to participate or not.

OKAY  NO *(Use Drop-out Protocol if necessary)_

Great. What time of day or days of the week is best for us to reach you? *(Write times/days on Contact Sheet)_

Thanks very much. I look forward to talking to you then. Goodbye.

Great, have you had a chance to read over the booklet and do the activities?
Okay, why don't I give you a chance to read through the materials and then I'll call you back in a few days so that we can talk about it. Would (suggest day and time) be okay to call back? (Write times/days on contact sheet____________________________) Thanks very much. I look forward to talking to you then. Goodbye.

Great! I'd like to ask you some questions about it if you have a couple of minutes.

Alright. Would (suggest day and time) be okay to call back? (Write times/days on contact sheet____________________________) Thanks very much. I look forward to talking to you then. Goodbye.

Okay, to remind you a bit about what you read, the booklet had 5 activities -- 1 for parents and the rest for the whole family to do. First, I want to see if you have any questions or comments about any of these.

Which activities did you do?

2-1 Activity 1: Now We Get It!, about things your teenager did last week that might be explained by changes teens experience.

1 YES
2 NO

2-2 Activity 2: Where Are You Coming From?, about what it was like for you as a teenager and what it's like for your teen.

1 YES
2 NO

2-3 Activity 3: Let’s Talk!, A story telling about something that happened in the past week.

1 YES
2 NO

2-4 Activity 4 Family Time, drawing from a bowl of fun things for your family to do together from ideas family members put in the bowl.

1 YES
2 NO

2-5 Activity 5: Family Matters Badge of Honor, a game to reward family members for working well together by pinning badge on each other.

1 YES
2 NO
2-6. **Circle number activities completed:**

5 4 3 2 1 (if 5 activities completed skip to 2.7. If 3 or 4 completed and they don’t think they’ll do more, skip to 2.7)

We’d like for you to do at least three of the activities before asking you what you think of the program. Why don’t I give you a chance to do the rest of the activities, and then I’ll call you back in a few days so that we can talk about it. Would (suggest day and time) be okay to call back? (Write times/days on contact sheet____________________________) Thanks very much. I look forward to talking to you then. Goodbye.

2-7. **Activity 1.** The first activity called Now We Get It!, which asked you to think of things your teenager did last week that might be explained by some of the changes teens experience. How much new information did you learn about your teen?

1 A lot
2 Some
3 Not very much
4 Nothing
98 DON’T KNOW
99 REFUSED

2-8. How much did you like this activity?

1 A lot
2 Some
3 Not very much
4 Not at all
98 DON’T KNOW
99 REFUSED

2-9. Who participated in this activity? **Probe to check for participation if unclear**

1 ADOLESCENT
2 ADOLESCENT’S FATHER / FATHER SURROGATE
3 ADOLESCENT’S MOTHER / MOTHER SURROGATE
4 OTHER ADULT FAMILY MEMBER(S)
   (specify:____________________________)
   (specify:____________________________)
5 BROTHER(S) (specify number:____)
6 SISTER(S) (specify number:____)
7 OTHER
   (specify:____________________________)
   (specify:____________________________)
98 DON’T KNOW
99 REFUSED
2-10. **Activity 2.** Who participated in the second activity Where Are You Coming From?, which was to help parents and teens talk about what it is like to be a teenager. *Probe to check for participation if unclear*

1. ADOLESCENT
2. ADOLESCENT'S FATHER / FATHER SURROGATE
3. ADOLESCENT'S MOTHER / MOTHER SURROGATE
4. OTHER ADULT FAMILY MEMBER(S)
   - (specify: ___________________________)
   - (specify: ___________________________)
5. BROTHER(S) (specify number: _____)
6. SISTER(S) (specify number: _____)
7. OTHER
   - (specify: ___________________________)
   - (specify: ___________________________)
8. DON'T KNOW
9. REFUSED

2-11. How much did you like doing Activity 2?

1. A lot
2. Some
3. Not very much
4. Not at all
8. DON'T KNOW
9. REFUSED

2-12. How much do you think (adolescent’s name) liked this activity?

1. A lot
2. Some
3. Not very much
4. Not at all
8. DON'T KNOW
9. REFUSED
2-13. **Activity 3.** Who in your family participated in the third activity Let’s Talk!, which was about having family members tell stories about something that happened in the past week? *Probe to check for parent’s participation if unclear*

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2-14. How much did this activity help your family practice good communication skills?

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2-15. How much did you like this activity?

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2-16. How much do you think (adolescent’s name) liked this activity?

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2-17. **Activity 4.** The fourth activity called Family Time was about helping families come up with fun activities to do together. Who in your family took part in planning the family times? *Probe to check for participation if unclear*

1. ADOLESCENT
2. ADOLESCENT’S FATHER / FATHER SURROGATE
3. ADOLESCENT’S MOTHER / MOTHER SURROGATE
4. OTHER ADULT FAMILY MEMBER(S)
   (specify: __________________________)
   (specify: __________________________)
5. BROTHER(S) (specify number: ____)
6. SISTER(S) (specify number: ____)
7. OTHER
   (specify: __________________________)
   (specify: __________________________)
8. DON’T KNOW
9. REFUSED

2-18. Has your family had a chance to do any of the things you planned?

1. NO
2. YES What did you do? (specify) ______________________________________________

2-19. Who participated in this activity? *Probe to check for participation if unclear*

1. ADOLESCENT
2. ADOLESCENT’S FATHER / FATHER SURROGATE
3. ADOLESCENT’S MOTHER / MOTHER SURROGATE
4. OTHER ADULT FAMILY MEMBER(S)
   (specify: __________________________)
   (specify: __________________________)
5. BROTHER(S) (specify number: ____)
6. SISTER(S) (specify number: ____)
7. OTHER
   (specify: __________________________)
   (specify: __________________________)
8. DON’T KNOW
9. REFUSED

2-21. How much did you like doing this/these activity(s)?

1. A lot
2. Some
3. Not very much
4. Not at all
8. DON’T KNOW
9. REFUSED
2-22. How much do you think (adolescent’s name) liked this/these activity(s)?
   1 A lot
   2 Some
   3 Not very much
   4 Not at all
   98 DON’T KNOW
   99 REFUSED

2-23. Activity 5. The Family Matters Badge of Honor activity was when the badge was awarded to anyone in the family who did something special to help your family work well together. Who participated in the awarding of the Badge of Honor? Probe to check for participation if unclear
   1 ADOLESCENT
   2 ADOLESCENT'S FATHER / FATHER SURROGATE
   3 ADOLESCENT’S MOTHER / MOTHER SURROGATE
   4 OTHER ADULT FAMILY MEMBER(S)
      (specify: __________________________)
      (specify: __________________________)
   5 BROTHER(S) (specify number:____)
   6 SISTER(S) (specify number:____)
   7 OTHER
      (specify: __________________________)
      (specify: __________________________)
   98 DON’T KNOW
   99 REFUSED

2-24. How much did you like this activity?
   1 A lot
   2 Some
   3 Not very much
   4 Not at all
   98 DON’T KNOW
   99 REFUSED

2-25. How much do you think (adolescent’s name) liked this activity?
   1 A lot
   2 Some
   3 Not very much
   4 Not at all
   98 DON’T KNOW
   99 REFUSED
Ask all of the following questions.

2-26. Besides the activities, the booklet had 2 question and answer sections for parents to read. The first was about changes that happen during the teenage years. How much new information did you learn from it?

1  A lot
2  Some
3  Not very much
4  Nothing
98  DON’T KNOW
99  REFUSED

2-27. And then the second question and answer section. It was about ways families can work well together, like using good communication skills, setting rules for teenagers, putting a lot of emphasis on school, and having fun times together. How much new information did you learn about how families can work well together?

1  A lot
2  Some
3  Not very much
4  Nothing
98  DON’T KNOW
99  REFUSED

2-28. About how long did it take to read the booklet and do the activities, (if applicable: including only the planning part of Family Time)? __________________________________________

2-29. Were the instructions with the activities:

1  More than you needed to do them
2  About right?
3  Less than you needed to do them? (Probe: What kind of problems did you have? What was missing that would have been helpful?)

98  DON’T KNOW
99  REFUSED

2-30. After doing Booklet 2 of Family Matters, do you feel more or less confident that your family can help keep your teenager from using alcohol and tobacco?

1  More
2  Less
3  About the same
98  DON’T KNOW
99  REFUSED
2-31. Overall, after doing Booklet 2, do you think it is more or less important to do Family Matters?
   1 More important
   2 Less important
   3 Neither
   98 DON’T KNOW
   99 REFUSED

Those are all of the questions that I have about Booklet 2. We appreciate your input, as it will help us make the program as fun and effective as possible. Do you have any other comments or more questions for me?

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Once again, I’ll be sending you Booklet 3 of Family Matters in a day or so, and calling you back in about 2 weeks to see how things are going. Booklet 3 is about some specific things families can do to help their teens stay away from alcohol and tobacco. We’re really glad that you and your family are doing the program. Thanks again for participating. Goodbye.

HEALTH EDUCATOR RATINGS

2-31. In your opinion, how enthusiastic about the program is the parent?
   1 Very enthusiastic
   2 Somewhat enthusiastic
   3 Neither enthusiastic nor unenthusiastic
   4 Not very enthusiastic
   5 Not at all enthusiastic

2-32. In your opinion, how involved is the family in the program (such as., are they spending a lot or a little time on it, involving family members, doing the activities)?
   1 Very involved
   2 Somewhat involved
   3 Neither involved nor uninvolved
   4 Not very involved
   5 Not at all involved

2-33. Do you believe that there were any questions in which the parent did not tell the truth?
   1 NO
   2 YES---->Which questions? ____________________________________________

2-34. Were there any questions that the parent did not understand?
   1 NO
   2 YES---->Which questions? ____________________________________________

HEALTH EDUCATOR COMMENTS:
Phone 3: Alcohol and Tobacco Rules Are Family Matters

Hello, may I speak with Ms./Mr. (parent name)? Ms./Mr. (parent name), this is (my name) with the Family Matters Program. I am calling to see how things are going and make sure that you received Booklet 3 of Family Matters. (Probe: It’s called Alcohol and Tobacco Rules Are Family Matters and is printed in green ink and came with a magnet with tips for good family communication.)

Did you receive the materials?

YES  NO

It must have gotten lost in the mail because you should have received it by now. Let me make sure I have your correct address. We have your address listed as (family's address). Is that correct?

NO  YES

Okay, I'll go ahead and send you another one and we’ll call you back in about two weeks to see if you have any questions about the program. What time of day or days of the week is best for us to reach you? (Write times/days on Contact Sheet _______________________) Thanks very much. I look forward to talking to you then. Goodbye.

Can you tell me your correct address? (Write address on Contact Sheet ______________________)

I'll go ahead and send you another packet, and call you back in about 2 weeks to see if you have any questions about the program. What time of day or days of the week is best for us to reach you? (Write times/days on Contact Sheet ______________________ ) Thanks very much. I look forward to talking to you then. Goodbye.

DON’T SEND IT, I DON’T WANT TO DO THE PROGRAM

We really hope you'll look over the booklet before deciding whether you want to do the program. A lot of families seem to enjoy that the activities include the entire family. Why don’t I send you the booklet, then call you back in about 2 weeks? You can tell me then if you want to participate or not.

OKAY  NO (Use Drop-out Report)

Great. What time of day or days of the week is best for us to reach you? (Write times/days on Contact Sheet ______________________ ) Thanks very much. I look forward to talking to you then. Goodbye.
Great. Have you had a chance to read over the booklet and do the activities?

YES  NO

Okay, why don't I give you a chance to read through the materials and then I’ll call you back in a few days so that we can talk about it. Would (suggest day and time) be okay to call back? (Write times/days on Contact Sheet _______________________) Thanks very much. I look forward to talking to you then. Goodbye.

Great! I'd like to ask you some questions about it if you have a couple of minutes.

OKAY  NO

Alright. Would (suggest day and time) be okay to call back? (Write times/days on Contact Sheet _______________________) Thanks very much. I look forward to talking to you then.

Okay, to remind you a bit about what you read, the booklet had 4 activities – 2 for parents and 2 for the whole family to do. First, I want to see if you have any questions or comments about any of these.

___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Which activities did you do?

3-1. Activity 1: Are You a Partner to Teenage Alcohol and Tobacco Use? It is a checklist of things parents sometimes do that can encourage teens to use alcohol and tobacco

1  YES
2  NO


1  YES
2  NO

3-3. Activity 3: Story Time, stories about teenage alcohol and tobacco use for families to talk about

1  YES
2  NO

3-4. Activity 4 Family Rules About Alcohol and Tobacco Use, a family meeting to agree on rules about alcohol and tobacco use

1  YES
2  NO
Circle number of activities completed:

4 3 2 1 (if 4 activities completed skip to 3.6. If 1 or 2 completed and they don’t think they will do more, skip to 3.6)

We’d like for you to do at least three of the activities before asking you about Part 3. Why don’t I give you a chance to do the rest of the activities, and then I’ll call you back in a few days so that we can talk about it. Would (suggest day and time) be okay to call back? (Write times/days on Contact Sheet) Thanks very much. I look forward to talking to you then. Goodbye.

Ask the following questions for activities completed.

3-6. **Activity 1.** You said you did the first activity Are You a Partner to Teenage Alcohol and Tobacco Use? which was about things parents can do that might encourage teen alcohol and tobacco use. Who participated in that activity? **Probe to check for participation if unclear**
1 ADOLESCENT
2 ADOLESCENT’S FATHER / FATHER SURROGATE
3 ADOLESCENT’S MOTHER / MOTHER SURROGATE
4 OTHER ADULT FAMILY MEMBER(S)
   (specify: _____________________)
   (specify: _____________________)
5 BROTHER(S) (specify number: ____)
6 SISTER(S) (specify number: ____)
7 OTHER
   (specify: _____________________)
   (specify: _____________________)
98 DON’T KNOW
99 REFUSED

3-7. How much did this activity help you think about things you do that might be encouraging your teen to use alcohol or tobacco?
1 A lot
2 Some
3 Not very much
4 Not at all
98 DON’T KNOW
99 REFUSED

3-8. Have you or other family members made any changes to be sure you might not be encouraging your teen to use alcohol or tobacco?
1 NO
2 NO BECAUSE WE DIDN’T NEED TO MAKE ANY CHANGES
3 YES (specify what they did if volunteered) ________________________________
3-9. How much did you like this activity?
1  A lot
2  Some
3  Not very much
4  Not at all
98  DON’T KNOW
99  REFUSED

3-10. Activity 2. The second activity was The Rules of the House, which was to help you choose rules about alcohol and tobacco use for your teen before discussing them as a family. Who participated in this activity? Probe to check for participation if unclear
1  ADOLESCENT
2  ADOLESCENT’S FATHER / FATHER SURROGATE
3  ADOLESCENT’S MOTHER / MOTHER SURROGATE
4  OTHER ADULT FAMILY MEMBER(S)
   (specify: ________________________)
   (specify: ________________________)
5  BROTHER(S) (specify number: _____)
6  SISTER(S) (specify number: _____)
7  OTHER
   (specify: ________________________)
   (specify: ________________________)
98  DON’T KNOW
99  REFUSED

3-11. How much did this activity help you choose rules about alcohol and tobacco use that are right for your family?
1  A lot
2  Some
3  Not very much
4  Not at all
98  DON’T KNOW
99  REFUSED

3-12. How much did you like this activity?
1  A lot
2  Some
3  Not very much
4  Not at all
98  DON’T KNOW
99  REFUSED
3-13. **Activity 3.** You said you did Story Time, which had stories about alcohol and tobacco use. Who participated in this activity? *Probe to check for participation if unclear*

1 ADOLESCENT
2 ADOLESCENT'S FATHER / FATHER SURROGATE
3 ADOLESCENT’S MOTHER / MOTHER SURROGATE
4 OTHER ADULT FAMILY MEMBER(S)
   (specify: _________________________)
   (specify: _________________________)
5 BROTHER(S) (specify number: ____)
6 SISTER(S) (specify number: ____)
7 OTHER
   (specify: _________________________)
   (specify: _________________________)
98 DON’T KNOW
99 REFUSED

3-14. How much did this activity help your family talk about some of the harmful consequences of alcohol and tobacco use?

1 A lot
2 Some
3 Not very much
4 Not at all
98 DON’T KNOW
99 REFUSED

3-15. How much did you like this activity?

1 A lot
2 Some
3 Not very much
4 Not at all
98 DON’T KNOW
99 REFUSED

3-16. How much do you think (adolescent’s name) liked this activity?

1 A lot
2 Some
3 Not very much
4 Not at all
98 DON’T KNOW
99 REFUSED

3-17. **Activity 4.** In the activity called Family Rules About Alcohol and Tobacco, which was a family meeting to talk about and agree on rules about alcohol and tobacco use, did your family choose rewards for following the rules?

1 YES
2 NO
3-18. Did your family choose any consequences?
1 YES
2 NO

3-19. Did you write down family rules and rewards and consequences?
1 YES
2 NO

3-20. Who participated in the meeting? *Probe to check for participation if unclear*
1 ADOLESCENT
2 ADOLESCENT'S FATHER / FATHER SURROGATE
3 ADOLESCENT’S MOTHER / MOTHER SURROGATE
4 OTHER ADULT FAMILY MEMBER(S)
   (specify: ______________________)
   (specify: ______________________)
5 BROTHER(S) (specify number: ____)
6 SISTER(S) (specify number: ____)
7 OTHER
   (specify: ______________________)
   (specify: ______________________)
88 DON’T KNOW
99 REFUSED

3-21. How helpful do you think your family rules will be?
1 Very helpful
2 Somewhat helpful
3 Not very helpful
4 Not at all helpful
88 DON’T KNOW
99 REFUSED

3-22. How much did you like doing this activity?
1 A lot
2 Some
3 Not very much
4 Not at all
88 DON’T KNOW
99 REFUSED

3-23. How much do you think (adolescent’s name) liked this activity?
1 A lot
2 Some
3 Not very much
4 Not at all
88 DON’T KNOW
99 REFUSED
3-24 Besides the activities, the booklet had a question and answer section for parents to read. It had information about talking with your teen about alcohol and tobacco use, about rule setting, and about clues to watch for teen alcohol and tobacco use. How much new information did you learn from this section? Did you learn:

1. A lot
2. Some
3. Not very much
4. Nothing
98 DON’T KNOW
99 REFUSED

Ask all of the following questions.

3-25 About how long did it take to read the booklet and do the activities? _______________________

3-26 Were the instructions with the activities:
1. More than you needed to do them
2. About right
3. Less than you needed (Probe: What kind of problems did you have? What was missing that would have been helpful? _______________________
98 DON’T KNOW
99 REFUSED

3-27 After doing Booklet 3 of Family Matters, do you feel more or less confident that your family can help keep your teenager from using alcohol and tobacco?
1. MORE
2. NEITHER MORE NOR LESS
3. LESS
98 DON’T KNOW
99 REFUSED

3-28 Overall, after doing Booklet 3, do you think it is more or less important to do Family Matters?
1. MORE
2. NEITHER MORE NOR LESS
3. LESS
98 DON’T KNOW
99 REFUSED
Okay. Thank you very much for answering these questions. We want to encourage you to stick with the rules and consequences and rewards that you came up with. Remember that the more consistent you are with your family rules, the more likely your teen is following them.

Do you have any other comments or more questions for me?
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

I’ll be sending you the fourth and last booklet of Family Matters tomorrow, and calling you back in about 2 weeks to see how things are going. Booklet 4 is about how influences outside the family, like peer pressure and the media, can encourage your teen to use alcohol and tobacco. We’re really glad that you and your family are doing the program. Thanks again for participating. Goodbye.

HEALTH EDUCATOR RATINGS

3-29. In your opinion, how enthusiastic about the program is the parent?
   1 Very enthusiastic
   2 Somewhat enthusiastic
   3 Neither enthusiastic nor unenthusiastic
   4 Not very enthusiastic
   5 Not at all enthusiastic

3-30. In your opinion, how involved is the family in the program (such as, are they spending a lot or a little time on it, involving family members, doing the activities)?
   1 Very involved
   2 Somewhat involved
   3 Neither involved nor uninvolved
   4 Not very involved
   5 Not at all involved

2-31. Do you believe that there were any questions in which the parent did not tell the truth?
   1 NO
   2 YES----->Which questions? ______________________________________________________________________________

2-33. Were there any questions that the parent did not understand?
   1 NO
   2 YES----->Which questions? ______________________________________________________________________________

HEALTH EDUCATOR COMMENTS:
Case Number: ______________  Phone 4: Non-Family Influences that Matter

Hello, may I speak with Ms./Mr. (parent name)? Ms./Mr. (parent name), this is (my name) with the Family Matters Program. I am calling to see if you received the fourth and last booklet of Family Matters (Probe: It’s called Non-Family Influences That Matter).

Did you receive the materials?

YES  NO

It must have gotten lost in the mail because you should have received it by now. Let me make sure I have your correct address. We have your address listed as (family's address). Is that correct?

NO  YES

Okay, I'll go ahead and send you another one and we'll call you back in about two weeks to see if you have any questions about the program. Is (times/days) still a good time to reach you? (Write times/days on Contact Sheet ______________ ) Thanks very much. I look forward to talking to you then. Goodbye.

Can you tell me your correct address? (Write address on Contact Sheet ______________)

I'll go ahead and send you another packet, and call you back in about 2 weeks to see if you have any questions about the program. Is (times/days) still a good time to reach you? (Write times/days on Contact Sheet ______________ ) Thanks very much. I look forward to talking to you then. Goodbye.

DON’T SEND IT, I DON’T WANT TO DO THE PROGRAM

We really hope you'll look over the booklet before deciding whether you want to continue the program. Why don't I send you the booklet, then call you back in about 2 weeks? You can tell me then if you want to participate or not.

OKAY  NO (Use Drop-out Report)

Great. What time of day or days of the week is best for us to reach you? (Write times/days on Contact Sheet ______________ ) Thanks very much. I look forward to talking to you then. Goodbye.

Great, have you had a chance to read over the booklet and do the activities?

YES  NO

I hope you'll be able to do it. It's great that your family is almost finished with Family Matters, and we really want you to do this last part. Why don't I call you back in about 3 days after you've had a chance to
read the booklet and do the activities? Would (suggest day and time) be okay to call back? (Write times/days on Contact Sheet _______________________)  
Thanks very much. I look forward to talking to you then. Goodbye

Okay, to remind you a bit about what you read, the booklet had 3 activities -- 2 for the whole family and 1 for parents to do. First, I want to see if you have any questions or comments about any of these.

___________________________________________________________________________________________  
___________________________________________________________________________________________  
_________________________________________________________________________

Which activities did you do?

4.1 Activity 1: Just Say No is Only One Way to Go. It’s about things teens can do when they’re in situations where there’s pressure to use alcohol and tobacco.

1 YES  
2 NO

4-2 Activity 2: The Critic. The family talks about alcohol and tobacco messages in teen’s favorite TV shows.

1 YES  
2 NO

4-3 Activity 3: Family Matters Checklist. Parents check off all the Family Matters things they’ve done.

1 YES  
2 NO

4-4. Circle number of activities completed:

3_____ 2_____ 1_____ (if 3 activities completed skip to 4-5. If 2 completed and they don’t think they’ll do the third, skip to 4-5).

We'd like for you to do at least two of the activities before asking you about Part 4. Why don't I give you a chance to do the rest of the activities, and I'll call back in about 3 days? Would (suggest day and time) be okay to call back? (Write time/day on contact sheet ______________________). Thanks very much. I look forward to talking to you then. Goodbye
Ask the following questions for activities completed

4-5. **Activity 1.** You said you did Just Say No Is Only One Way to Go, which is about things teens can do when they're in situations where there is pressure to use alcohol or tobacco. Who participated in this activity?

*Probe to check for participation if unclear*

1. ADOLESCENT
2. ADOLESCENT'S FATHER / FATHER SURROGATE
3. ADOLESCENT’S MOTHER / MOTHER SURROGATE
4. OTHER ADULT FAMILY MEMBER(S)
   *specify: ___________________________
   *specify: ___________________________

5. BROTHER(S) *specify number: _____*
6. SISTER(S) *specify number: _____*
7. OTHER
   *specify: ___________________________
   *specify: ___________________________
98. DON’T KNOW
99. REFUSED

4-6. How much did this activity help your family talk about things (adolescent’s name) could do in situations where there was pressure to use alcohol or tobacco?

1. A lot
2. Some
3. Not very much
4. Not at all
98. DON’T KNOW
99. REFUSED

4-7. How much did you like this activity?

1. A lot
2. Some
3. Not very much
4. Not at all
98. DON’T KNOW
99. REFUSED

4-8. How much do you think (adolescent's name) liked this activity?

1. A lot
2. Some
3. Not very much
4. Not at all
98. DON’T KNOW
99. REFUSED
4-9. **Activity 2.** The activity The Critic was to help teens become aware of how TV can push using alcohol and tobacco. Who participated in this activity? *Probe to check for participation if unclear*

1. ADOLESCENT
2. ADOLESCENT'S FATHER / FATHER SURROGATE
3. ADOLESCENT’S MOTHER / MOTHER SURROGATE
4. OTHER ADULT FAMILY MEMBER(S)
   - (specify: ________________________________)
   - (specify: ________________________________)
5. BROTHER(S) (specify number: _____)
6. SISTER(S) (specify number: _____)
7. OTHER
   - (specify: ________________________________)
   - (specify: ________________________________)
8. DON’T KNOW
9. REFUSED

4-10. How much did this activity help (adolescent's name) become more aware of how TV portrays alcohol and tobacco use?

1. A lot
2. Some
3. Not very much
4. Not at all
8. DON’T KNOW
9. REFUSED

4-11. How much did you like this activity?

1. A lot
2. Some
3. Not very much
4. Not at all
8. DON’T KNOW
9. REFUSED

4-12. How much do you think (adolescent's name) liked this activity?

1. A lot
2. Some
3. Not very much
4. Not at all
8. DON’T KNOW
9. REFUSED
4-13. **Activity 3.** The activity called Family Matters Checklist asked you to check all the activities and other things your family has done to help prevent your teen from using alcohol and tobacco. Please take a look at this activity and tell me how many checks you made.

*write #:*

1. _______< 15 CHECKS - SUGGEST TO THE PARENT THAT THE FAMILY MAY WANT TO GO DO SOME MORE OF THE THINGS SUGGESTED BY FAMILY MEMBERS TO HELP KEEP THEIR TEEN FROM USING ALCOHOL OR TOBACCO.
2. _______ > 15 CHECKS - OFFER PRAISE TO PARENTS

4-14. Besides the activities, the booklet had a question and answer section for parents to read. It had information about pressures from outside the family, such as peers and the media, that teens might feel to use alcohol and tobacco. How much new information did you learn about pressures from outside the family?

1. A lot
2. Some
3. Not very much
4. Nothing
98 DON'T KNOW
99 REFUSED

*Ask all of the following questions.*

4-15. About how long did it take to read the booklet and do the activities?____________________________

4-16. Were the instructions with the activities:

1. More than you needed to do them
2. About right
3. Less than you needed (*Probe: What kind of problems did you have? What was missing that would have been helpful?*)
98 DON'T KNOW
99 REFUSED

Now that you've finished Family Matters, I have just a few more questions about the overall program.

4-17. Has doing the Family Matters program made you feel more or less confident that your family can help keep your teenager from using alcohol and tobacco?

1. MORE
2. NEITHER MORE NOR LESS
3. LESS
98 DON'T KNOW
99 REFUSED
4-18. Having finished the program, do you think it is more or less important to do Family Matters?
   1 MORE
   2 NEITHER MORE NOR LESS
   3 LESS
   98 DON’T KNOW
   99 REFUSED

4-19 How much of an effect do you think Family Matters will have on (adolescent’s name)’s use of alcohol?
   Would you say…
   1 A lot
   2 Some
   3 Not very much
   4 None
   98 DON’T KNOW
   99 REFUSED

4-20 How much of an effect do you think it will have on (his/her) use of tobacco? Would you say…
   1 A lot
   2 Some
   3 Not very much
   4 None
   98 DON’T KNOW
   99 REFUSED

4-21 How helpful were the Family Matters booklets?
   1 Very helpful
   2 Somewhat helpful
   3 Not very helpful
   4 Not helpful at all

4-22 Would you have completed the program if you had never been called by the health educator
   1 Yes, for sure
   2 Maybe
   3 I don’t think so
   4 No

4-23 Was the number of booklets we sent you – 4…
   1 Too many
   2 About right
   3 Too few
4-24 Was the number of phone calls from health educators – 4…
1 Too many
2 About right
3 Too few

4-25 Overall, how willing to participate was your teenager?
1 Very willing
2 Somewhat willing
3 Not very willing
4 Not at all willing
5 MIXTURE

4-26 How willing to participate were your other family members? Were they…
1 Very willing
2 Somewhat willing
3 Not very willing
4 Not at all willing
5 MIXTURE

4-27 How convenient was it for your family to do Family Matters?
1 Very convenient
2 Somewhat convenient
3 Not very convenient
4 Not at all convenient

4-28 Overall, was the amount of time your family spent doing Family Matters
1 Too much
2 About right
3 Too little

4-29 Thinking back over the whole program, what did you like best about Family Matters?
_____________________________________________________________________________________
_________________________________________________________________________

4-30 What did you like least about the program?
_____________________________________________________________________________________
_________________________________________________________________________

4-31 Do you have suggestions for anything we should change about the program?
_____________________________________________________________________________________
_________________________________________________________________________
Finally, would you recommend Family Matters to other families?
1 Yes - for sure
2 Yes - maybe
3 Probably not
4 No

Thank you very much for answering these questions. That'll help us a lot in improving the program for the future. We hope you've found this program helpful and enjoyable for your family, and appreciate the time and effort you've spent on it. I hope you and your family will continue to do the things suggested in Family Matters to help keep your teen from using alcohol or tobacco.

Do you have any other comments or more questions for me?

___________________________________________________________________________________________
___________________________________________________________________________________________

Thanks again for participating. Goodbye.

HEALTH EDUCATOR RATINGS

4-33 In your opinion, how enthusiastic about the program is the parent?
1 Very enthusiastic
2 Somewhat enthusiastic
3 Neither enthusiastic nor unenthusiastic
4 Not very enthusiastic
5 Not at all enthusiastic

4-34 In your opinion, how involved is the family in the program (e.g., are they spending a lot or a little time on it, involving family members, doing the activities)?
1 Very involved
2 Somewhat involved
3 Neither involved nor uninvolved
4 Not very involved
5 Not at all involved

4-35 Do you believe that there were any questions in which the parent did not tell the truth?
1 NO
2 YES----->Which questions?___________________________________________________________

4-36 Were there any questions that the parent did not understand?
1 NO
2 YES----->Which questions?___________________________________________________________

HEALTH EDUCATOR COMMENTS:
**Reading and activity completion**

Near the beginning of each protocol, the contact family member is asked if the booklet was read and all activities completed. Finish the protocol if the booklet has been read and all activities completed.

If the booklet has not been read or some activities not completed, a time should be scheduled to call back when they are expected to be completed.

If it appears that all activities will never be completed, attempt to have the requisite number of activities completed as per instruction on protocols and schedule a time for follow-up. When the requisite number of activities have been completed, or after substantial encouragement and when it appears that number will never be achieved, proceed with the protocol questions that are relevant to the activities that were completed (if any) and complete the protocol.

If, upon call back, an activity initially designated as completed was not completed (because it was never done, done incorrectly, or did not include the required participants), change the original markings and proceed as revised.

All above actions are documented as health educator comments on the protocol and contact sheet.

**Additional activity considerations**

An activity in process or done that was not stimulated by *Family Matters* is counted as a completed activity only if it was done after receiving the booklet and it included all key parts of the *Family Matters* activity.

A health educator can “walk through” an activity designed only for parents if that is appropriate, legitimate, and necessary for completion of the booklet.
Booklet 2 Activity 4: Family Time

A family gets credit for having done this activity if a fun family activity has been planned (it does not necessarily have to have been completed at the time of the telephone contact) by at least the parent and the adolescent.

Booklet 3 Activities 2 & 4 (Family Rules)

Some families will already have standing rules concerning their family’s alcohol and tobacco use. In such cases, credit is given for this activity only if, as a part of the program, they reassess the rules for necessary revisions and they hold a family discussion about the rules, as specified in Activity 4.

Booklet 4 Activity 2: The Critic

Time watching TV shows or movies for Activity 2, The Critic, is included in the total time spent on Booklet 4.

Booklet 4 Activity 3: Checklist

For the checklist include everything the family reports doing, not just what was affected by *Family Matters*. The idea is to get a “snapshot” of their current family situation.

**Heath educator ratings**

The following factors should be considered in rating families.

**Enthusiasm**

- Family members’ and contact’s tone, demeanor, and comments during phone contacts
- Number of activities done
- Percentage of people in the household participating in each activity
- Amount of time spent on the booklet
- Number of weeks and calls necessary to complete a protocol.
Involvement

- Number of activities done
- Percentage of people in the household participating in each activity
- Amount of time spent on the booklet
- Number of weeks and calls necessary to complete a protocol.
- Family members’ and contact’s comments during phone contacts

Truthfulness of responses

- Consistency of information
- Consistency of comments and responses for each activity
- Contact’s tone and comments

Understanding of questions

- Confidence in response
- Consistency of comments and responses for each activity
- Contact’s tone and comments

**Guidelines for Placing Calls**

**Unable to reach anyone in household**

**Busy signal**

Try again soon: Good chance of someone being at home.

**Answering machine**

Use voicemail messages sparingly if at all. Never leave more than one message a week. Leave a “reminder” message if, after repeated attempts, no one in the family has been spoken to or if no one answers the phone when calling for a scheduled appointment. Document on the contact sheet when a message is left, including what was said. Repeated messages may seem impersonal and annoy to the family.
A “semi-appointment” may be made through an answering machine message if consider essential, such as, the contact has been particularly difficult to reach. The health educator may leave the specific date and time for the next call back. The date and time should be ones that have been successful or known to be preferred in the past. Health educators should treat them as solid appointments.

**Household contact made**

**Contact unavailable**

Identify a good time the contact will be available for a call back.

**Not a good time to talk**

Identify a good time to call back or call back in 1 or 2 days.

**Activities not completed**

Encourage completion and suggest ways to make the program more convenient for the family.

Identify a good time to call back. If contact suggests a date more than a week in the future, encourage an earlier date.

If a good time is not specified, call back in 3 days.

**Booklet not received**

Identify a good time to call back and then mail booklet. If a good time is not specified, call back in 13 days.

**Booklet completed**

If Booklet 1-3, identify a good time to call back to go over the next booklet (usually in 12-15 days). This time is considered an appointment and should be noted on the contact sheet; it overrides the default 13 day period given for mailing and completing the booklet.
**Times and priorities for calls**

The idea is to reach the contacts during times most convenient to them and to optimize program completion. Some contacts indicate general preferences for when to be called (e.g., 7:30-8:30 pm or before 10am), others prefer to schedule specific times, and others do not have preferences.

Optimal times for placing calls vary substantially. Many families prefer Monday-Thursday evenings (6:00 - 8:50 PM) and Saturday mornings (10:00 AM- 1:00 PM) but many others welcome calls at other times, including weekday mornings, Fridays, and Sundays. Begin conservative, experiment, and identify best times for calling families.

The following is a general priority for call placement when faced with many calls to make. It is to be used only as a general guide.

1. Appointment set by parent contact.

2. Appointment set by someone in household other than parent contact.

3. Any case which has not been called in a reasonable amount of time based on the previous contact. One such example would be a case that typically would have a 1 day call back that has not been called in a week.

4. “Best Time to Call” record.

5. All other calls.
Confidentiality

Confidentiality Assurance

The rights and privacy of families are paramount. In that regard, confidentiality must be maintained. Confidentiality assurance includes all information provided by any participant that would allow personal identification of the contact (prospective or active) and/or family members. Verbal and written communication provided by or about participation, as well as any information which would lead to the identification of the participant’s telephone number or address, must remain completely confidential.

When sharing information provided by participants among appropriate persons, such as supervisors, information that would allow personal identification is not to be used except when absolutely essential.

A signed “Family Matters Confidentiality Pledge” (see Additional Forms, Procedures and Considerations below) was signed by all health educators in implementation of the program for the national evaluation.

Emphasize the confidentiality assurance to participating families whenever indicated.

Security Procedures

It is vital that all information pertaining to the implementation of Family Matters (i.e. participant files, completed telephone protocols) with personal identifiers, case identification numbers, or any other information that would allow personal identification be stored in securely locked places, and that unneeded documents containing such information be shredded.
Additional Forms, Procedures and Considerations

Family Matters Confidentiality Pledge

I am genuinely committed to protecting the rights and privacy of participating families. I will maintain confidentiality regarding any information pertaining to Family Matters participants. This confidentiality assurance includes all information provided by any participant that would allow personal identification of the participant or a prospective participant. Verbal and written communication provided by or about the participant, as well as any information which would lead to the identification of the participant’s name, telephone number or address, must remain confidential.

I will not use information that would allow personal identification except when absolutely essential for meeting program objectives and to assure the protection and safety of the participant.

I will adhere to the policy that all written information pertaining to Family Matters (i.e. participant files, computer files, completed telephone protocols, etc.) be stored in secured/locked spaces the at all times.

Health Educator Signature ________________________________
Date______________

Contact Sheet

A Contact Sheet is the next page. One or more contact sheets is used for each booklet. Every attempted telephone contact, no matter how brief (for example, including no answer), is a line on the sheet. Contact sheets serve critical functions: They ensure that a complete contact history is maintained for participating families and that subsequent calls and mailings to families are fully informed and on schedule. Documentation on the sheets must be thorough, clear and legible. In “Comments,” error in favor of more rather than less information and use the back of the sheet as necessary.
Contact Sheet

Booklet No:______ Date mailed:________

Contact name:______________________ Phone no _________________________________
Teen name: _______________________ Address _________________________________
Best time(s) to call:_________________________________________________________________
Specific date/time for next call:_______________________________________________________
Important notes:___________________________________________________________________

Record all calls dialed

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Outcome</th>
<th>Comments</th>
<th>Next Action</th>
<th>HeEd initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Begin</td>
<td>End</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

**Outcomes**
- BS Busy signal
- NA No answer
- ND No. disconnected
- AM Answer machine

**Comments**
- HM Home, can’t talk
- NH Contact not home
- BI Booklet incomplete
- BC Booklet completed

**Next Action**
- CA Call again (record date/time to call)
- RS Resend booklet (record date mailed)
- MA Mail next booklet (record date mailed)
- PC Program completed

Page no.______

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Incomplete activity protocol

This protocol is used when the required number of activities in a booklet was not completed at the time of a prior health educator call.

Hello, may I speak with (parent name)? Ms./Mr. (parent last name), my name is (your name). I am a health educator for the Family Matters Program. I (or other health educator’s name) spoke with you earlier this (week, month). I am calling to ask if you have had the chance to do the activities in Booklet (1, 2, 3, 4)?

Yes  No

Why don’t I give you a chance to do the other activities and I’ll call you soon. When would be a good day and time to call back? And is there any particular time of day that is best? (Encourage the parent to set a call back day/time that is within one week).

If this is 3rd call back and they don’t plan to do more activities, return to the original protocol and complete the questions for the completed activities only and then the rest of the protocol.

Great! I would like to ask you some questions about the activities that you have completed. Which activities did you do? (Return to the original protocol)
Drop-out report

If a potential drop out situation arises, address concerns and encourage program continuation. Participants who are suspected of attempting to drop out (e.g., by avoiding calls, not completing booklets, etc.) are not drop-outs. The questions below are to be asked only when a family member says directly and explicitly to the health educator that they will no longer participate.

If known: Record reasons for drop out.
If unknown: Can you tell me why you do not want to continue?

What did you find most difficult or enjoy the least?

What parts of the program, if any, did you enjoy most?

Thanks very much for your time!
Change of parent contact

If the original contact is no longer available to serve as contact (death, moves from home without teen, etc.) but the teen remains in the original household, the health educator identifies a new contact in the household to serve as contact. The first choice is mother or mother surrogate, then father or father surrogate.

If the teen moves from the original household with the contact, continue with the original contact in the new household. If the teen moves from the original home without the original contact, the health educator obtains for a new contact the name, address, telephone number, and relationship to teen. The health educator then telephones the new parent/guardian and asks him/her to serve as the contact for the program.

When the contact changes, the program continues at point of last completion if the new contact has been sufficiently involved in the program. If the new contact has not been involved in the program, or if there are other indications to begin the program anew, involve the new contact by mailing the Introduction Letter and Booklet 1.

Departure from mailing procedures

Generally, a family should only receive one booklet at a time, and should not get the next until they are finished with the current one. The following are exceptions:

When an adolescent will soon be moving into another guardian's house and the original household family therefore has a time restriction for completing the program before the adolescent moves.

When the parent requests the next booklet because the family will not be available. Reasons for this might include a family going on vacation and wanting to work on several books on their trip. The health educator is not to present this as an option; the idea must come from the parent.
Contact Management

The management of *Family Matters* can become messy as more families become involved and as they evolve to different stages of program completion. Organization for telephone contacts is described here.

Family Folders

Each family has a “family folder” that contains all information related to the family’s involvement in the program, such as partially completed telephone protocols and contact sheets. Each family folder also has a tab indicating the date/time for the next telephone contact.

Filing of Family Folders

The family folders are filed in order of date and time the next call is to be made, with the earlier dates/times placed before those that are later.

Master List

Occasions will arise when a family name must be used to locate a family folder in the file. That can be tedious because the folders are filed by order of next call rather than by name. For such occasions, an alphabetical list of names of enrolled families, with the date for the next contact written next to each name, will prove useful for ready retrieval of individual family folders.

Electronic File

An electronic file of families could prove useful for tracking families through the program and for providing summary information useful for assessing overall program progress. We used Microsoft Access (available in Microsoft Office), but many data management programs will suffice.

All of the information for the Electronic File can come from the Contact Sheet for each booklet. The fields for the file are: 1) name of contact parent (with extra fields for contact changes), 2) address of contact parent (with extra fields for address changes), 3) telephone number of contact parent (with extra fields for multiple numbers and changes), 4)
date each booklet was mailed (a field for each booklet), and 5) date each telephone protocol is completed (a field for each protocol).

The Electronic File can serve the purpose of the Master List.

**Materials Available at Calls**

The following materials should be readily available at each call.

1. **Heath Educator Guidebook**
2. Copy of Introduction letter and each booklet
3. Family folders for families to be called during a defined period, such as, a week
   a. telephone protocols
   b. contact sheets
4. Extra contact sheets
5. Extra incomplete activity protocol
6. Drop-out report form
7. Extra tabs for marking date/time for next call

Given the abundance of materials to be available at time of calls, you may want to keep them in a portable file box and replenish as necessary.

**Local Evaluation of Family Matters**

Adequate evaluation of a local implementation of *Family Matters* for impact on adolescent tobacco and alcohol use would require comparison of sufficient numbers of families (an approximate total of 1300) that are offered and are not offered the program. The comparison groups should be the same at baseline (just before the program is offered) on everything except whether they were to be offered the program; that is best achieved by random allocation to the two groups. Baseline (before the program is offered) and follow-up (after program completion) data would need to be collected from adolescents in both groups.

That could prove impractical. An alternative approach
would be to assume that program impact for adolescent tobacco and alcohol use would be the same as found for our national sample of families if process indicators were the same as, or exceeded, those achieved for families offered the program in our evaluation. Process indicators could be things like the participation rate (percentages of families eligible for the program who completed Booklet 1 and who completed all four booklets), and percentages of contacts adults who felt that the program would influence their child’s use of tobacco and alcohol and who would recommend the program to others. The latter measures would be available from the telephone protocols. Then, local process data could be compared with those from the national evaluation.
# Referrals

## Alcohol

**AL ANON/ALATEEN FAMILY GROUP HEADQUARTERS, INC.**

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>1 800 344 2666</td>
<td>(for meeting information; talk to real person - they are not counselors) M-F 8-6 EST</td>
</tr>
<tr>
<td>1 800 356 9996</td>
<td>(for free introductory literature packet; voice mail - leave name &amp; address) 24 Hrs.</td>
</tr>
</tbody>
</table>

Free self-help groups. Provides information about Al-Anon/Alateen and referrals for local meetings. “Al-Anon (and Alateen for younger members) is a worldwide organization that offers a self-help recovery program for families and friends of alcoholics whether or not the alcoholic seeks help or even recognizes the existence of a drinking problem.”

*Language*: There are some Al Anon groups conducted in languages other than English. The caller would need to call the 1 800 number and give the staff person their zip code who would then look up local meetings. The Al Anon staff should be able then to tell the caller if there is a local meeting all in Spanish or something else. The caller would need to speak English to talk to the staff person. They have literature available in Spanish and 25 other languages; caller can call this number and request literature available in that language.

## ALCOHOLICS ANONYMOUS WORLD SERVICES INC.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>212-870-3400</td>
<td>(talk to a real person) M-F 8:30-4:45 PM EST</td>
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</table>

Free self-help groups. Provides information about AA and worldwide referrals to local meetings. “AA is an international fellowship of men and women who have had a drinking problem. It is nonprofessional, self-supporting, non-denominational, multiracial, apolitical, and available almost everywhere. There are no age or education requirements. Membership is open to anyone who wants to do something about his or her drinking problem.”

*Language*: No bilingual staff in office; however, they can provide non-ES callers with a list of local hotlines or AA meetings in their area and the caller can inquire as to the availability of services in their own language (there are AA groups in languages other than English). (AA sent us a list of local numbers; to save the family potential confusion when calling AA, we can provide a local hotline number.) However, they do have literature in 30 different languages; call the number above and request the literature in that language.
**Alcohol (cont’d)**

<table>
<thead>
<tr>
<th>ALCOHOL TREATMENT REFERRAL HOTLINE</th>
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<tbody>
<tr>
<td><strong>1 800 ALCOHOL</strong> <em>(1 800 252 6465)</em></td>
</tr>
<tr>
<td>24 HRS (should get a real person 24 hrs/day)</td>
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</tbody>
</table>

Treatment referral (and referral if in crisis). Provides help & referral sources for people with concerns about alcohol or drug use. Referrals to treatment and self-help; also, staff will provide basic info about substance use. If caller is in crisis, the Hotline will research the most appropriate local assistance for the individual and refer them. They use a variety of manuals to keep up to date on meetings of self-help groups and services of professional organizations.

*language*: NO bilingual services or referrals.

**BOYS TOWN**

<table>
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<tr>
<th><strong>1 800 448 3000</strong></th>
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</thead>
<tbody>
<tr>
<td>24 HRS (either get a real person or recordings depending on your voice mail system selections)</td>
</tr>
</tbody>
</table>

Crisis counseling and treatment referral. Professional counseling for children and parents about any family problem (i.e. abuse, conflict, depression, frustration). Offers "a hotline that children (girls and boys) and parents can call with any problem at any time-children who are suffering physical or sexual abuse, depressed, thinking about suicide, on the run, taking drugs, hooked on alcohol, threatened by gangs, or just fighting with their parents; or parents frustrated by an out-of-control child, scared of an abusive, alcoholic spouse, dependent on drugs or alcohol, or seeking shelter for their homeless family." Can talk to a counselor or select phone option that allows them to receive other sorts of information; there are tape recordings about the different services that Boys Town offers.

*language*: Services in English and Spanish. For other languages: They maintain a database on other services in the US; it is not categorized by language, but it may be noted that there are services in other languages.

Note - let callers with rotary dial to wait on the line; they keep hearing the same recording over and over again, but it will eventually be answered. Depending on call flow, there could be a wait of several minutes. Callers can not leave messages in the voice mail system to get a counselor, but they can call back. English speakers - press 1 initially to get English language; Spanish speakers press 2.

**CENTER FOR SUBSTANCE ABUSE TREATMENT (CSAT) NAT’L DRUG AND ALCOHOL TREATMENT ROUTING SERVICE**

<table>
<thead>
<tr>
<th><strong>1 800 662 HELP</strong></th>
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<tbody>
<tr>
<td>24 HRS (voice mail to start with, can select option to reach a person; may need to wait a bit before reaching a person)</td>
</tr>
</tbody>
</table>

Treatment and information referral. Can link the caller to a variety of hotlines that are already listed in this referral list - it is a good general number. “When you call the toll-free number, you will be given the following five options: 1) printed material on alcohol or drug information [connects you to NCADD], 2) treatment options in your state [connects you to an office, perhaps a state office, to get info in your state].
Alcohol (cont’d)

3) to speak to someone about drug treatment referrals [connects you to the National Help Hotline], 4) to speak to someone about an alcohol problem [connects you to Alcohol Treatment Referral Hotline], 5) to speak to someone about an adolescent or family problem [connects you to Boys Town], and 6) for information on Alcoholics Anonymous, Narcotics Anonymous, Cocaine Anonymous, check your local telephone directory."

*language: Tape is in English. Number 3 option connects to the National Help Line, where they can provide services to Spanish speakers and make referrals for people who speak other languages. Better to give out the National Help Line number directly.

FAMILIES ANONYMOUS

1 800 736 9805
M-F 10-4 PST (talk to a real person; after hours voice mail also)

Free self-help groups. Provides info about FA & worldwide referrals to local mtgs; FA “is a Twelve Step support program of recovery for relatives and friends concerned about the use of drugs, alcohol, or related behavioral problems. ... Families Anonymous is *not* drug or behavior-specific, and is therefore more general. Most new members arrive in crisis, with a child, spouse or friend in jail or a recovery/rehab facility. FA focuses on the *member’s* recovery ....”

*language: There are some Spanish-speaking FA groups (as of 9/96, there are groups in Los Angeles, Chicago, New York, and one in Florida. Caller would need to speak some English in order to talk to the staff person on the 1 800 number and get the referral.

NAT’L COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE (NCADD) HOPELINE

1 800 622 2255
24 HRS. (voice mail only; need touch tone phone to use it)

Treatment referral. Will refer the caller to a local affiliate office of the National Council on Alcoholism and Drug Dependence. Callers can also leave their name and address to receive written information about alcohol and other drug abuse OR receive appropriate phone numbers that are provided in the voice mail system. Can receive info on: 1) counseling and treatment, 2) receive info on alcoholism, 3) helping a teen with a drinking or drug problem, 4) receive more info about the organization, 5) receive a list of publications.

*language: Do NOT refer non ES callers here (tape is only in English).
Alcohol (cont’d)

NATIONAL HELP HOTLINE (FORMERLY COCAINE ANONYMOUS)

1-800-262-2463 (you get a real person)
24 HRS

Treatment & crisis referral for anyone with problems with any type of drug or alcohol. Also provide information. Not a crisis line, but can refer callers to crisis lines. Also give out information and support group referrals for family and friends of an addict.

*language: Bilingual (Spanish/English) staff are frequently available. If a Spanish-speaking staff is not available, caller is given the 800 number for the National Clearinghouse for Alcohol and Drug Information (1 800 729 6686). If a caller needs help in other languages, the hotline refers them to local crisis numbers which may or may not have services in their language.

NATIONAL CLEARINGHOUSE FOR ALCOHOL AND DRUG INFORMATION [NCADI]

1 800 729 6686
8 am - 7 PM EST (real person) & 24 hour voice mail.

When calling, you first receive voice mail system. Information provided. If caller wants literature, they should select the option for Information Specialist. This number provides a wide variety literature and information on alcohol and drug use (not for crisis or for treatment referrals). Information is from the US government standpoint on the issues.

*language: Provide services in English and Spanish. Spanish-speaking callers will need to listen to an English tape, press 1 at first option, and then wait through another English tape to get to the Spanish. Most literature is available in English, but they do have some stuff in Spanish.

SECULAR ORGANIZATIONS FOR SOBRIETY (SOS)

1 310 821 8430
24 hours (get a real person if during work hours (Pacific Time))

Free self-help groups. "SOS is an alternative recovery method for those alcoholics or drug addicts who are uncomfortable with the spiritual content of widely available 12-step programs. SOS takes a reasonable, secular approach to recovery and maintains that sobriety is a separate issue from religion or spirituality. SOS credits the individual for achieving and maintaining his or her own sobriety, without reliance on any ‘Higher Power.’" Callers can obtain information on local SOS meetings; a publication list; and can order the international newsletter. If you get the voice mail you are asked to leave your phone number if you call locally; if you call long distance, you can call back or leave your address and be mailed information.

*language: staff at the office; however, SOS may have some bilingual meetings. Callers would need to call local meetings and find out.
Smoking

AMERICAN LUNG ASSOCIATION

800 LUNG USA
9-5 - phone number rings into local branch in their time zone

Literature and programs on tobacco use available; types of lit and programs vary with local branch. Minnesota branch has developed a program "Tobacco Free Teens" that callers may be able to obtain information on. When they call, they should ask for "tobacco control" information; that term refers to prevention of use and treatment of use.

*language: Have a few materials available in Spanish. National office person told me that some locals may have them in a different language, such as Vietnamese; thus, caller would need to inquire when they call.

AMERICAN CANCER SOCIETY

1 800 ACS 2345 (1 800 227 2345)
8:30 am - 5 PM EST M-F

Literature and programs on tobacco use available. They can get referrals from local branch or from national office. Also, "this is the home of the Great American Smoke Scream, a smoking cessation program aimed at teens as well as other information about smoking and the American Cancer Society's programs."

*language: Some local branches provide information for non ES speakers. Call the 1 800 number to get connected to those offices.

AMERICAN HEART ASSOCIATION

1 800 242 8721
9-5 probably, 800 # rings into a local branch in their time zone

Literature and programs on tobacco use available. For teenagers, ask for materials about the "Smoke Free Class of 2000," a national program in all 50 states.

*language: have some materials in Spanish. Inquire locally for any other languages.
Drug use (general)

**ALCOHOL TREATMENT REFERRAL HOTLINE**
(see "Alcohol") (provides referral info on drug treatment also)

**BOYS TOWN**
(see "Alcohol")

**CENTER FOR SUBSTANCE ABUSE TREATMENT (CAST) NATIONAL DRUG AND ALCOHOL**

**TREATMENT REFERRAL SERVICE**
(see "Alcohol")

**FAMILIES ANONYMOUS**
(see "Alcohol")

**MARIJUANA ANONYMOUS WORLD SERVICES**

<table>
<thead>
<tr>
<th>Phone</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>800 766 6779</td>
<td>24 HRS (voice mail)</td>
</tr>
</tbody>
</table>

Free self-help groups. MA is a 12 step recovery program for people who want to stop using pot. When you call, you receive voice mail listing the nine districts where MA meetings are currently offered (as of 9/10/96, most districts are in California, with one each in Seattle and New York). Callers can obtain the number of the district closest to them and call that district for a listing of local meetings. Caller can also leave a message and get a call back from the office manager or member of MA, obtain more information about MA, and an "international directory of meetings."

*Language*: Voice mail tape is in English. They are working to develop materials in Spanish and Dutch.

**NAT’L COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE (NCADD) HOPELINE**
(see "Alcohol")

**NATIONAL HELP HOTLINE (FORMERLY COCAINE ANONYMOUS)**
(see "Alcohol")

**NAT’L CLEARINGHOUSE FOR ALCOHOL AND DRUG INFORMATION**
(see "Alcohol")
Drug use (cont’d)

NAFARE ALCOHOL, DRUG, AND PREGNANCY HELPLINE

1 800 638 BABY
M-F 9-5 CST (if "real person" doesn't answer, tape directs them to CSAT for immediate treatment referral information)

Treatment referral - may provide some crisis. Provide treatment referral and some telephone counseling for women with concerns about alcohol/drug use and pregnancy. "If you are pregnant and looking for a treatment referral or want information about effects of drugs on pregnancy, leave name and number. Line is confidential." If you don't get a real person, you'll get voice mail. Can leave a clear detailed message about information you want and indicate if you want a call back or if you would like information sent to you. If caller needs an immediate treatment referral, they are told to call 1800 662 4357 (which is the number for CSAT - information on CSAT above). May be able to obtain information about adoption or foster care for children if that's what they want.

*language: NO services or materials are provided in languages other than English.

NAR-ANON FAMILY GROUPS

310-547-5800
M-Th 9am-4 PM PST

Provides information about Nar-Anon and worldwide referrals to local meetings. Similar to Al-Anon -- Nar Anon is a 12 step, self-help program designed for families and friends of drug addicts - or families that are concerned about drug use.

*language: NO materials in non ES languages available from the US office.

NARCOTICS ANONYMOUS

1 818 773 9999
M-F, 8-5 PST. Can go into voice mail or go directly to an operator

Provides information about NA and worldwide referrals to local meetings. "Narcotics Anonymous is an international, community-based association of recovering drug addicts. Started in 1947, the NA movement is one of the world’s oldest and largest of its type, with nearly twenty thousand weekly meetings in seventy countries. … The core of the Narcotics Anonymous recovery program is a series of personal activities known as the Twelve Steps, adapted from Alcoholics Anonymous."

*language: Tape is in English and in Spanish. Have literature available in several languages. May have meetings in the US in languages other than English (more likely for California, etc.); get local number from national number, and caller can inquire about such meetings in languages other than English.

SECULAR ORGANIZATIONS FOR SOBRIETY (SOS)

(see “Alcohol”)
### Additional Referral Numbers

**Depression**

<table>
<thead>
<tr>
<th>NAT’L FOUNDATION FOR DEPRESSIVE ILLNESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 800 248 4344</td>
</tr>
<tr>
<td>24 HRS</td>
</tr>
<tr>
<td>Recording with info on depression and how to access treatment</td>
</tr>
</tbody>
</table>

**Domestic Violence / Abuse**

<table>
<thead>
<tr>
<th>CHILD ABUSE HOTLINE</th>
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</thead>
<tbody>
<tr>
<td>1 800 422 4453</td>
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<tr>
<td>24 HRS</td>
</tr>
<tr>
<td>Counseling services; reporting info</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DOMESTIC VIOLENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 800 799 SAFE</td>
</tr>
<tr>
<td>Crisis counseling</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>DOMESTIC VIOLENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 800 500 1119</td>
</tr>
<tr>
<td>24 HRS</td>
</tr>
<tr>
<td>Advice and location of local shelters</td>
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</table>

**Youth**

<table>
<thead>
<tr>
<th>NAT’L YOUTH CRISIS HOTLINE</th>
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<tbody>
<tr>
<td>1 800 448 4663</td>
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</table>
### STDs / AIDS

<table>
<thead>
<tr>
<th>AIDS HOTLINE</th>
</tr>
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<tbody>
<tr>
<td><strong>1 800 342 2437</strong> (1 800 342 AIDS)</td>
</tr>
<tr>
<td>24 HRS</td>
</tr>
<tr>
<td>educ, info, referral. Provides information, education, and answers questions regarding the disease, testing facilities, and medications used for treatment.</td>
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<thead>
<tr>
<th>AIDS HOTLINE / SPANISH</th>
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<tbody>
<tr>
<td><strong>1 800 344 7432</strong> (1 800 344 SIDA)</td>
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<tr>
<td>24 HRS</td>
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<tr>
<td>educ, info, referral</td>
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<tr>
<th>AIDS HOTLINE / TDD</th>
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<tbody>
<tr>
<td><strong>1 800 243 7889</strong></td>
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<tr>
<td>24 HRS</td>
</tr>
<tr>
<td>educ, info, referral</td>
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</tbody>
</table>

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<tr>
<th>STD HOTLINE</th>
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<tbody>
<tr>
<td><strong>1 800 227 8922</strong></td>
</tr>
<tr>
<td>8-11 EST</td>
</tr>
<tr>
<td>Info &amp; referral to local testing centers for STDs</td>
</tr>
</tbody>
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