Active Parenting of Teens: Families in Action

SUPER: Substance Use Prevention Evidence-Based Resource, UCLA ISAP
Developer website: https://activeparenting.com/product/active-parenting-of-teens-families-in-action/
Practice record last updated August 29, 2025

Cost	Prevention Category	Practice Focus	Practice Focus
Over $500	**Universal Direct**	**SU**	**MH**

Practice Summary

Active Parenting of Teens: Families in Action is a school- and community-based program for aged 11-16 and their parents. Delivered in six weekly sessions, it focuses on preventing substance use, risky behaviors, and violence through parent-child communication, behavior management, and adolescent self-esteem. Using videos, role-playing, and group discussions emphasizes authoritative parenting, mutual respect, and reinforces the negative effects of substance use. By strengthening family bonds, the program aims to promote positive relationships and enhance academic success.

Practice Details

Substance Use Prevention Category	• Universal Direct
Practice Level	• Individual • Relationship
Substance Use Prevention Strategy	• Education
Practice Components	**Individual** • Anger Management • Self-Efficacy or Self-Esteem Enhancement • Skills Training **Relationship** • Parenting Education/Skills **Community/Society** • None
Population Age	• Age 6-12 • Age 13-17
Populations of Focus	• General Population • Rural
Settings	• Home • School (K-12) • Community-based program
Parent/Caregiver Involvement	• Required
Recommended Staffing	• Health or social work counselor, therapist or professional (licensed) • Health or social work counselor, therapist or professional (unlicensed) • Prevention staff • Teachers or educators

Prevention Focus	**Substance Use Prevention Focus** • Alcohol **Mental Health Wellness and Promotion Focus** • Mental Health - General
Training and Technical Assistance	There are a variety of training opportunities through the website, including live webinars, online classes, in-person workshops, or training of trainers with follow-up assistance available. Training is strongly encouraged, but not required for implementation.
Program Costs	Over $500. Please visit the developer's website listed above for updated information about implementation costs.
Adaptations	The developer offers Spanish-language versions of the program, as well as specialized curricula for use with Christian and faith-based communities.

Risk and Protective Factors

Youth Substance Use Risk and Protective Factors

Level	Risk Factors	Protective Factors
Individual	• Early initiation of substance use • Favorable attitudes towards substance use • Poor coping skills and behaviors	• Positive social orientation (e.g. engaging in healthy activities, accepting rules and community values, positive social engagement) • Positive temperament • High self-esteem • Personal engagement in two or more of the following: school, peers, athletics, employment, religion/spirituality, culture • Strong coping skills (e.g., problem-solving skills, ability to stand up for beliefs and values)
Family and Relationships	• Family conflict • Family management problems	• Attachment between caregivers and youth, including unity, warmth, and attachment • Communication and contact between caregivers and youth • Clear expectations for behaviors and values • Supportive relationships with family
School, Peer, and Community	• Academic failure • Low commitment to school	• Positive social norms • Presence of mentors and healthy adults for positive emotional support

Youth Mental Health Risk and Protective Factors

Level	Risk Factors	Protective Factors
Individual	• Low self-esteem • Poor social skills (e.g., communication, problem-solving skills) • Poor coping skills and behaviors	• Achievement motivation • Positive self-regard • High self-esteem • Personal engagement in two or more of the following: school, peers, athletics, employment, religion/spirituality, culture • Strong coping skills (e.g., problem-solving skills, ability to stand up for beliefs and values)

Level	Risk Factors	Protective Factors
Family and Relationships	• Divorce • Family conflict • Family management problems	• Attachment between caregivers and youth, including unity, warmth, and attachment • Communication and contact between caregivers and youth • Clear expectations for behaviors and values • Supportive relationships with family
School, Peer, and Community	• Academic failure • Low commitment to school	• Positive social norms • Presence of mentors and healthy adults for positive emotional support

Shared Substance Use and Mental Health Risk and Protective Factors

Level	Risk Factors	Protective Factors
Individual	• Poor coping skills and behaviors	• High self-esteem • Personal engagement in two or more of the following: school, peers, athletics, employment, religion/spirituality, culture • Strong coping skills (e.g., problem-solving skills, ability to stand up for beliefs and values)
Family and Relationships	• Family conflict • Family management problems	• Attachment between caregivers and youth, including unity, warmth, and attachment • Communication and contact between caregivers and youth • Clear expectations for behaviors and values • Supportive relationships with family
School, Peer, and Community	• Academic failure • Low commitment to school	• Positive social norms • Presence of mentors and healthy adults for positive emotional support

Empirical Evidence of Impact

Prevention Focus	Outcome	Population Age	Evidence Strength and Study Populations of Focus
Alcohol	Changes in Knowledge, Attitudes, or Beliefs	6th-7th grade	Promising (General Population) [References 1-2]
Mental Health (General)	Behavior, Attitudes, and Functioning	6th-7th grade	Strong (General Population) [References 1-2]
Mental Health (General)	Improved Relationships and Community Connectedness	6th-7th grade	Moderate (General Population) [References 1-2]

References

[1] Pilgrim, C., Abbey, A., Hendrickson, P., & Lorenz, S. L. (1998). Implementation and impact of a family-based substance abuse prevention program in rural communities. *The Journal of Primary Prevention, 18*(3), 341–361. https://doi.org/10.1023/A:1024659012360
[2] Abbey, A., Pilgrim, C., Hendrickson, P., & Buresh, S. (2000). Evaluation of a family-based substance abuse prevention program targeted for the middle school years. *Journal of Drug Education, 30*(2), 213-228. https://doi.org/10.2190/GT8C-ELWH-HY94-ECG9

What California Providers Are Saying

What They Like About Active Parenting of Teens:

- Strong fit for Spanish-speaking communities, particularly blue-collar and immigrant families.
- Works well as a step-up from introductory programs.
- Sessions build progressively, with later chapters covering drugs, sexuality, and violence.
- Includes practical education on adolescent brain development.
- Parents report making positive changes at home and improved communication with their children.
- Teens report that their parents listen to them more after participating.
- Parents recognize shared experiences and a sense of community develops within the group.
- In-session practice activities reinforce the communication skills taught.

Tips and Recommendations for Implementing Active Parenting of Teens:

- Plan for six sessions of about one hour each; two-hour sessions are viewed as ideal.
- Strict fidelity is rarely feasible across diverse populations — balance fidelity with cultural relevance.
- Facilitators who are parents themselves tend to have stronger credibility with the group.
- Allow facilitators to weave in personal lived experiences and relatable scenarios.
- Be prepared to align PowerPoints and guidebook content — the two don't always match cleanly.
- Consider shortening pre/post evaluation surveys; the original instruments were too long for the target community.
- Engagement is often stronger in middle- and lower-income communities than in wealthier ones.
- Consider implementing Guiding Good Choices first as an introductory program before transitioning to Active Parenting of Teens.