Families Matter!
Program
Overview
What is Families Matter!?

The Families Matter! Program (FMP) is an evidence-based intervention for parents and caregivers of 9-12 year-olds that promotes positive parenting practices and effective parent-child communication about sex-related issues and sexual risk reduction. Subjects addressed include child sexual abuse (CSA) and gender-based violence (GBV), as well as the needs of adolescents living with HIV. Many parents and caregivers need support to effectively define and convey their values and expectations about sexual behavior and to communicate to their children important messages about HIV, sexually transmitted infections (STIs), and pregnancy prevention. The ultimate goal of FMP is the reduction of sexual risk behaviors among adolescents, including delayed onset of sexual debut. FMP pursues this goal by giving parents the tools they need to protect and guide their children. FMP is a community-based, group-level intervention that is delivered over six consecutive sessions lasting approximately three hours apiece. Each session builds upon the foundation laid in the previous session. An optional seventh session is directed to family and community members of adolescents living with HIV.

The intervention curriculum focuses on:

- Raising awareness about the sexual risks teens face today
- Encouraging general parenting practices that increase the likelihood that children will not engage in risky sexual behaviors
- Improving parents’ ability to effectively communicate with their children about sexuality and sexual risk reduction
- Addressing the difficult issues of CSA and GBV through culturally-acceptable and age-appropriate content and highlighting the key role parents can play in protecting their children from CSA and GBV
- Increasing family and community members’ understanding of challenges facing adolescents living with HIV and strengthening their skills to provide support and guidance

The program is designed to help parents overcome common parent-child communication barriers – such as embarrassment or discomfort and lack of knowledge, skills and confidence – and to enhance parenting skills and practices, including parental monitoring, positive reinforcement and the building of a strong parent-child relationship.

“My grandson started using drugs long before I attended this program, but since I started practicing the skills that I got here, he has now stopped and our relationship is much better now.”

Grandmother, Gauteng Province, South Africa
Research Background

Parent-Child Communication and Sexual Risk Behavior

Parents and other family members are in a unique position to protect adolescents from the negative health outcomes associated with sexual risk-taking and related risk behaviors. Parent-child communication about sex has been shown to encourage:

- Delayed onset of first sexual activity, \(^1,2\)
- Increased sexual abstinence, \(^1,2\)
- Increased partner communication, \(^3\) and
- Practice of safer sex, if sexually active, through condom use. \(^2,3\)

A teen wants to hear from his or her parents, and though parents often worry that their children will not be receptive to conversations with them about sexual topics, research has shown that:

- Pre-teens are ready for sexuality information from parents, and they rate parents as their top source of information about sexuality. \(^4\)
- Teens feel that it would be easier to delay sex and prevent pregnancy if they were able to have more open, honest conversations about these topics with their parents.\(^5\)

Parents can provide adolescents with accurate information about sex and its potential risks and consequences, as well as foster responsible sexual decision-making skills. Unlike programs or classes, parents are a source of information that is always close at hand. They also have the ability to deliver important age-appropriate prevention messages to their children earlier than youth would typically be exposed to them through traditional education and prevention efforts.

Parents are in a unique position to:

- Start early
- Answer questions right away
- Provide ongoing information about sexuality
- Build upon past talks as children grow and develop
- Separate myths and rumors learned from other sources

Unfortunately, many parents do not discuss sexuality or sexual risk with their children, citing barriers such as embarrassment, fear of encouraging sexual activity,\(^6\) and lack of

---


knowledge, skills, and confidence. Among those who do communicate with their children about sexuality issues, communication too often occurs later rather than sooner. Many parents underestimate the sexual behavior of their adolescents and therefore miss the opportunity to reach youth during the critical pre-risk window, before sexual risk behaviors begin. FMP assists parents in overcoming the barriers to discussing sexuality and sexual risk with their children and builds confidence in talking early and often.

Parenting Skills

Parents influence adolescent behavior by providing structure and support for their children and by playing a key role in promoting family health and well-being.

- Parents' monitoring of their children's social activities has been associated with better overall psychosocial adjustment among adolescents, which is an important predictor of sexual activity beginning at a later age, less frequent sexual behavior, fewer sexual partners, and more consistent use of contraception.
- Teens who perceive their parents as supportive and involved and who are more satisfied with their relationships with their parents tend to engage in less sexual risk behavior.
- Teens who report positive and supportive relationships with their parents also report having fewer sexual partners and using condoms more consistently.

“FMP is a very special concept because it is a practical and workable concept! It does not just improve communication between a parent and child, it builds a good relationship between them. The world has become very sophisticated and it raises a lot of questions, not only to children but to adults as well. FMP creates a healthy environment for a child with many questions to find all his/her answers from within the loving home environment where he/she is less likely to be deceived. Parents in Zambia have realized that communicating effectively to their children was the missing link in a good up-bringing of their children especially in this era.”

Sira Muleya, Program Manager, FMP Zambia
From Parents Matter! to Families Matter!

FMP was adapted from the U.S. evidence-based intervention, Parents Matter! The Parents Matter! Program (PMP) was developed based on research conducted on the parent-child communication patterns of African American families in the U.S., which highlighted the critical role of parent-child communication about sex topics in prevention of adolescent sexual risk.

PMP was rigorously evaluated using a randomized controlled trial with African American parents of preadolescents ages 9-12. The results of this trial showed that parents in the intervention significantly increased the number of sex topics they discussed with their preadolescents and increased their knowledge, skills, comfort, and confidence in communicating with their preadolescents about these sex topics. Publications and presentations from the research on PMP are listed at the end of this overview. Additional information about PMP is provided on the National Prevention Information Network (NPIN) website: http://www.cdcnpin.org/parentsmatter.

In 2002, the Institute of Tropical Medicine (Antwerp, Belgium), in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and the Kenya Medical Research Institute, identified PMP as a promising intervention to address the expressed need for improved adult-child communication about sexuality. In 2003-2004, formative work was conducted to culturally adapt and pilot test PMP in Western Kenya. The adapted program was renamed the “Families Matter! Program.”

From 2004-2006, an outcome evaluation of FMP was conducted using a pre/post intervention design. Evaluation data were collected from 375 parents and their children at baseline and one year post-intervention. The intervention’s effect was measured on six composite scores reported separately by parents and their children, comprising parenting (monitoring, positive reinforcement, relationship) and parent-child communication (sexuality education, sexual risk, communication responsiveness) variables. Evaluation results showed the adapted evidence-based parenting program retained its effectiveness, successfully increasing parenting skills and parent-child communication about sexuality and sexual risk reduction.

Publications and presentations from FMP are listed at the end of this overview, followed by a list of available materials.
Families Matter! Today

Based on the positive results in Kenya, countries across sub-Saharan Africa have requested FMP. Through the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), CDC provides technical support to assist in building capacity for FMP at all stages of implementation, from culturally adapting materials to bringing the program to national scale.

FMP is culturally and linguistically adapted for implementation in countries that request the program. As of August 2012, CDC/PEPFAR supports the adaptation, implementation, and scale-up of FMP in 8 countries in sub-Saharan Africa, including Kenya, Tanzania, Cote d’Ivoire, South Africa, Zambia, Botswana, Mozambique, and Zimbabwe. On average, country programs maintain over 90% retention of participants across the original 5 FMP sessions. The program has been delivered to over 400,000 families and is currently available in English, Spanish, French, Portuguese, Kiswahili, Setswana, Lozi, Tonga, isiXhosa, isiZulu, Afrikaans, Xitsonga, isiSwati, Sesotho and Oshiwambo.

Country Logos:

Kenya  Botswana  Ivory Coast  Tanzania
Zambia  South Africa  Mozambique  Zimbabwe

“One of the challenges we anticipated in this season was rain! We thought that it was going to affect our programs. We were proved wrong! Some of the parents literally walked in the rain to attend FMP sessions. Attendance has not been affected by the farming activities, and we have maintained our retention rates at above 90% despite the rain season! Indeed it is amazing to see the great passion people showed right at the beginning of the program. One of the major challenges that we encountered was finding a venue for holding sessions. One of the participants offered his two huts as venues for FMP sessions for two groups. People did not want anything to stop them from attending FMP sessions.”

Sira Muleya, Program Manager, FMP Zambia

March 2015
Intervention Overview

The purpose of FMP is to give parents the knowledge, skills, comfort, and confidence to discuss sex-related issues with their children. The program is for parents of children ages 9-12 years and is designed to give parents and other caregivers specific knowledge and skills about ways that they can reduce their children’s risk of becoming infected with HIV (or, in the case of adolescents living with HIV, becoming re-infected with HIV) and other sexually transmitted infections or getting pregnant. FMP is unique in that it does not dictate what parents should say to their children but instead guides them in defining the values and messages they want to convey.

The intervention increases parental awareness and parenting skills through a series of six weekly three-hour sessions (with an optional seventh session for family and community members of adolescents living with HIV). The sessions focus on increasing parental awareness about the issues children face, improving parents’ ability to communicate with their children about sex, and encouraging parenting practices that increase the likelihood that children will not engage in sexual risk behaviors. Parents are also asked to bring their child to a designated session in order to practice the communication skills learned during the intervention. The goal is that, upon completion of the program, parents will feel more competent and comfortable in addressing issues related to sex and sexuality with their children.

FMP is delivered in a small group setting using two trained and certified facilitators per group (one male and one female) who share equal responsibility for delivering the curriculum.

FMP utilizes a mixture of structured learning experiences, discussion, audiotapes, role plays, and group exercises. In addition, a combination of verbal and visual instruction techniques are incorporated in the curriculum to meet auditory and visual learning preferences.

Strategies/methods used during sessions:

- Group interaction activities:
  - Proverb/poster discussions
  - Large group discussions
  - Brainstorming
  - Role-plays
  - Song and icebreakers
- Audio presentations and follow-up discussion
- Mini-lectures
- Participant handouts
- Homework assignments
Enhancing Families Matter! Curriculum

Recently, a number of updates have been made to the FMP curriculum in order to keep it as current, beneficial, and culturally attuned as possible. These enhancements include content specific to CSA and GBV, the addition of a sixth session which specifically addresses these issues, an optional seventh session addressing the needs of adolescents living with HIV, and the strengthening of direct linkages between FMP and the priority U.S. Government goals for HIV set during 2011 World AIDS Day events.

Child Sexual Abuse and other forms of Gender-Based Violence

CSA is globally pervasive, difficult to discuss, and associated with increased sexual risk-taking among youth. FMP has been identified as a valuable platform for addressing CSA because the program is widely accepted within communities and teaches parenting skills that closely map onto protective factors identified in previous studies on CSA. Integrating CSA into FMP provides an opportunity to increase parents’ awareness of CSA and the role they can play in helping prevent it, and thereby to address sexual abuse as a risk factor for sexual risk-taking.

A new sixth session on understanding CSA has recently been added to the curriculum. In addition, content covering both CSA and GBV has been infused throughout the program. GBV focuses on unequal power relations between genders and on physical and sexual violence, usually against women, which increases vulnerability to HIV and other STIs. The enhanced FMP curriculum promotes reflection, dialogue, and action across the broad spectrum of GBV issues, from gender norms and the role they play in HIV-related risk to CSA. These difficult topics are addressed in culturally sensitive ways, seeking to promote lasting change and avoid confrontation that can be counterproductive. Thus, for example, rather than condemning early and cross-generational marriage and female genital mutilation, FMP invites participants to identify these as traditional practices which perpetuate unequal gender norms and increase the vulnerability of young women.

FMP introduces parents to the risks for sexual violence that their children face, both as potential victims and potential perpetrators. The program’s interactive curriculum incorporates skills-building role-play exercises and audio resources which reflect the voices, perspectives, and everyday experiences of young Africans. Development of these resources and activities drew on stories written by young people across Africa for the Global Dialogues/Scenarios from Africa scriptwriting competitions (www.globaldialogues.org). Parents learn to recognize and respond to situations where their children are – or may be – being abused or where they may be at greater risk of abuse.

Parents are encouraged to open a dialogue with their children about sex-related issues and personal safety; to use parenting skills, like supervision, to protect their children; and to help their children recognize and, through role-play, prepare for situations that may put them at risk. Recognizing that parents may not be able to stop an adult from forcing their child to have sex, the CSA-focused session addresses actions parents can take at the family and community level in the event that their child or a child in their community is sexually abused.
An outcome evaluation is being planned to assess the impact of the CSA-focused session on parents’ awareness of CSA and its associated risks. The evaluation will also examine the intervention’s impact on parents’ self-efficacy to open a dialogue with their children about CSA, help protect their child from CSA, and respond in the event that their child experiences or has experienced CSA.

Guiding and Supporting Adolescent Living with HIV

Along with the addition of Session 6 to the enhanced FMP curriculum, an optional Session 7 is now available for family members of adolescents living with HIV (ALHIV) and individuals who are likely to come into contact with ALHIV by virtue of the roles they play within the community. Adolescents are becoming a more prominent sub-group among those living with HIV, as antiretroviral therapy (ART) allows greater numbers of those infected perinatally to reach adolescence while new adolescent infections remain high. Living with HIV amplifies the need for guidance in navigating the physiological, social and behavioral changes and challenges of adolescence. This session seeks to increase awareness and understanding of the specific challenges facing ALHIV – including stigma and mental health, disclosure of the child’s status to the child and disclosure by the child to others, ART adherence and other aspects of self-care, and sex and romantic relationships – and to help family and community members strengthen their skills to provide ALHIV with effective guidance and support on these issues.

Aligning Families Matter! with World AIDS Day Goals

In addition to the development of the new child sexual abuse session, the FMP curriculum has been enhanced to strengthen its alignment with 2011 World AIDS Day goals. Specific revisions include the addition of information on gender and harmful gender norms; disclosure of HIV status (disclosure of parents’ HIV status to child and disclosure of child’s HIV status to child); and the strengthening of direct linkages to other HIV services, including HIV Testing and Counselling, Prevention of Mother to Child Transmission, and Voluntary Medical Male Circumcision. In previous versions of FMP, these linkages and referrals were present but passive. In the enhanced version, they are much clearer and more direct, and detailed referral information – such as lists of services, additional information, and maps to facilities – is provided.
1: Introduction to FMP and Steps to Understanding Your Child

Session 1 Goals:

- To provide parents and caregivers with an understanding of the purpose and goals of the Families Matter! Program
- To increase parents’ and caregivers’ awareness of the situations their children face that may put them at risk and the important role they play in keeping their children safe and healthy.
- To introduce parents and caregivers to the physical, emotional and social changes their pre-adolescents are going through and the need to provide guidance and support to children during this important period

2. Good Parenting Skills

Session 2 Goals:

- To help parents and caregivers understand that their children need and value their guidance and support during this difficult period of adolescence
- To provide parents and caregivers with information and strategies to protect and guide their children through this important period
- To help parents and caregivers practice general parenting skills that support their children and protect them from risky situations

3. Parents’ Role in Educating their Children about Sexuality

Session 3 Goals:

- To make parents and caregivers more aware of the need for them to be sex educators for their children
- To increase parents’ and caregivers’ understanding of the physical and reproductive changes their children will be going through during puberty and adolescence
To help parents and caregivers to define their values about sex and to learn ways to communicate their values to their children

To provide parents and caregivers with tools and strategies for communicating with their children about sex

4. Information to Increase Comfort and Skills in Discussing Sex and Sexuality

Session 4 Goals:

- To provide parents and caregivers with information on family planning, STIs, HIV and AIDS and other sexual health issues
- To provide parents and caregivers with direct linkages to community health resources
- To increase parents’ and caregivers’ comfort and skills in discussing difficult sex-related issues with their children, including HIV stigma and disclosure

5. Discussing Sexuality and Pressures Children Face

Session 5 Goals:

- To continue improving parents’ and caregivers’ comfort in discussing sex and sexuality with their child
- To give parents and caregivers an opportunity to work on their communication skills with their child
- To introduce parents and caregivers to pressures their children face from peers, partners and adults, such as pressure to have sex, that could keep their children from reaching their life goals

6. Understanding Child Sexual Abuse

Session 6 Goals:

- To raise parents’ and caregivers’ awareness about child sexual abuse
- To increase parents’ and caregivers’ understanding of their role in preventing child sexual abuse
- To increase parents’ and caregivers’ awareness of their role in protecting and supporting their children when responding to child sexual abuse
7. Guiding and Supporting Adolescents Living with HIV

Session 7 Goals:

- To increase family and community members’ understanding of challenges facing adolescents living with HIV, including stigma, disclosure, adherence, and healthy relationships

- To help family and community members strengthen their skills to provide guidance and support to adolescents living with HIV around issues of stigma, disclosure, adherence, and healthy relationships

- To provide family and community members with information about living with HIV, Anti-Retroviral Therapy, and resources in their community to help adolescents living with HIV

For more information about the Families Matter! and Parents Matter! Programs, contact:

CDC Project Officer

Kim S. Miller, Ph.D.
Senior Advisor for Youth Prevention
Centers for Disease Control and Prevention
Center for Global Health
Division of Global HIV/AIDS
1600 Clifton Road, Mailstop E-04
Atlanta, GA 30333
kmiller@cdc.gov
Families Matter! Program Publications


Families Matter! Program Presentations


2014 Berrier FL, Miller KS, Winskell K, Obong’o CO. Is the “Train and Hope” Approach to Implementation of Evidence-Based Interventions the Best We Have? XX International AIDS Conference, Melbourne, Australia.


2011 Riley DB, Gleckel J, Hornston S, Poulsen MN, Miller KS. Using an Evidence-Based Parenting Program in Sub-Saharan Africa as a Platform to Prevent and Respond to Child Sexual Abuse. Sexual Violence Research Initiative Forum, Cape Town, South Africa.

2011 Miller KS, Riley DB, Poulsen MN. Developing and Sustaining HIV Prevention Capacity for an Evidence-Based, Pre-Risk Prevention Intervention: Lessons Learned from Sub-Saharan Africa. 2011 National HIV Prevention Conference, August 14-17, Atlanta, Georgia.


Parents Matter! Program Publications


Parents Matter! Program Presentations


2008 Fasula AM, Miller KS, and Forehand R. Limitations in Daughters’ Sexual Health Empowerment: Gender Differences in the Content of Black Mothers’ Sexual Risk Reduction Messages to Sons and Daughters. National Institutes of Health Summit: The Science of Eliminating Health Disparities, National Harbor, MD.

Miller KS, Fasula AM. Pre-Risk Approaches to Primary HIV Prevention in African American Youth. United States Conference on AIDS, Miami, FL.


March 2015


Available materials and guidance to support implementation of FMP

**Program Materials**
- Facilitator Manual
- Participant Manual
- Posters and Audio recordings

**Introductory Materials**
- FMP overview (standard and brief “two-pager”)
- FMP empirical background & history
- Overview PowerPoint presentation
- FMP sample activities

**Planning Materials**
- Country Operational Plan narrative for FMP
- Implementer’s Manual
- Recommended Year 1 activities for new FMP country programs
- Guidance on selecting implementing partners (implementing partner capacity)
- Sample Narrative Budget, 2 year budget narrative and line item budget
- Staff roles/responsibilities and sample job descriptions
- Tool for setting targets
- Implementation planning worksheet
- Intervention sites form

**Formative Work**
- Example Scope of Work for hiring Community Needs Assessment contractor
- Community Needs Assessment guidance and protocol template
- Key messages for FMP stakeholders
- Local resources form

**Adaptation**
- Adaptation workshop guidance and PowerPoint presentation
- Necessary Adaptations to be made to the Facilitator Manual
- Compilation of adaptations made in different FMP countries
- Compilation of proverbs and logos from different FMP countries

**Recruitment and Training of Facilitator (TOF)**
- TOF Facilitator Recruitment and Interviewing Guidance Doc
- TOF preparation instructions
- TOF Manual
- TOF training slides
- TOF supplementary materials:
  - Trainer instructions on facilitation practice and demonstrations
  - Demonstration Observation form
  - Handouts (agenda and handouts for participants)
  - Participant day 1, 2, and 5 evaluations
  - Youth at Risk template slides
  - Activity Cards for Printing
- Facilitator Support Manual
Available materials and guidance (cont.)

Pilot-testing*
- Instructions: Accelerated 6-day Pilot Monitoring Tools
- Instructions: 6-week Pilot Monitoring Tools
- Monitoring tools:
  - Facilitator Checklist
  - Participant Attendance Registry
  - Demographic Information Form
  - Facilitator Session Logs
  - Participant Feedback Form
  - Participant Evaluations (Session 6)
  - Observer Evaluations (Sessions 1-6)
  - Facilitator Evaluations (Sessions 1-6)
  - Facilitator Assessment
  - Facilitator Self-Assessment
  - Implementation Evaluation

*additional pilot-testing materials are available for those electing to use the optional Session 7

Mobilization and Recruitment Materials
- Key messages for FMP stakeholders
- Sample FMP flier
- Screening script
- Screening form
- Participant appointment card
- Contact information form
- Recruitment log

Implementation
- Participant graduation and retention requirements guidelines

Monitoring, Evaluation, and Quality Assurance*
- Example monitoring plan
- Example M&E Standard Operating Procedures Zambia
- Process monitoring tools:
  - Facilitator checklist
  - Participant attendance registry
  - Demographic information form
  - Facilitator session logs (7)
  - Participant satisfaction questionnaire
  - FMP group summary sheet
  - Group Summary Report – Excel Spreadsheet
- Quality standards guidance document
- Quality assurance tools:
  - Facilitator observation form
  - Session observation forms (7)
  - Quality assurance checklist
- Outcome monitoring protocol template
- Pre/post questionnaires (parent and child)

*additional monitoring, evaluation, and QA materials are available for those electing to use the optional Session 7