

An Ecosystem of Health Disparities and Minority Health Resources

# **Intervention IP-090: Familias Unidas Program**

## **Summary**

Familias Unidas is an evidence-based, parent-centered intervention delivered by non-research personnel to reduce risky adolescent behaviors. In a randomized trial, 746 Hispanic eighth graders received either Familias Unidas or prevention as usual within a pubic school system. Familias Unidas was more effective in preventing drug use and condomless sex from increasing 30 months after baseline relative to prevention as usual. Familias Unidas also improved family functioning.

## **Overview**

#### **Purpose of Intervention:**

To reduce health disparities associated with adolescent drug use and sexual risk behaviors among Hispanics

### **Intervention Type:**

Research-Tested — Interventions with strong methodological rigor that have demonstrated short-term or long-term positive effects on one or more targeted health outcomes to improve minority health and/or health disparities through quantitative measures; Studies have a control or comparison group and are published in a peer-review journal; No pilot, demonstration or feasibility studies.

## **Intervention Details**

#### **Intervention was Primarily Driven, Led, or Managed by:**

Academic/Clinical Researchers Only

#### **Citations:**

- Estrada Y, Lee TK, Huang S, Tapia MI, Velázquez MR, Martinez MJ, Pantin H, Ocasio MA, Vidot DC, Molleda L, Villamar J, Stepanenko BA, Brown CH, Prado G. Parent-Centered Prevention of Risky Behaviors Among Hispanic Youths in Florida. American journal of public health. 2017 Apr;107(4):607-613. Epub 2017 Feb 16.
  - Relevance: Main Intervention, Post-Intervention Outcomes
- Prado G, Cordova D, Huang S, Estrada Y, Rosen A, Bacio GA, Leon Jimenez G, Pantin H, Brown CH, Velazquez MR, Villamar J, Freitas D, Tapia MI, McCollister K. The efficacy of Familias Unidas on drug and alcohol outcomes for Hispanic delinquent youth: main effects and interaction effects by parental stress and social support. Drug and alcohol dependence. 2012 Sep;125 Suppl 1(Suppl 1):S18-25. Epub 2012 Jul

7.

Relevance: Post-Intervention Outcomes

• Prado G, Fernandez A, St George SM, Lee TK, Lebron C, Tapia MI, Velazquez MR, Messiah SE. Results of a Family-Based Intervention Promoting Healthy Weight Strategies in Overweight Hispanic Adolescents and Parents: An RCT. American journal of preventive medicine. 2020 Nov;59(5):658-668. Epub 2020 Oct 1.

Relevance: Post-Intervention Outcomes

### Adaptation of Another Research-based Intervention:

Yes

#### **Name of Original Intervention:**

1.) Familias Unidas for Health and Wellness 2.) eHealth Familias Unidas

### **Name of Original Intervention Author:**

Guillermo Prado is the developer (contact person Dr. Maria Tapia). Affiliation: University of Miami. Email: gprado@miami.edu; m.tapia1@med.miami.edu.

#### **URL** to original Intervention:

None available

#### Citations:

• Estrada Y, Lee TK, Wagstaff R, M Rojas L, Tapia MI, Velázquez MR, Sardinas K, Pantin H, Sutton MY, Prado G. eHealth Familias Unidas: Efficacy Trial of an Evidence-Based Intervention Adapted for Use on the Internet with Hispanic Families. Prevention science: the official journal of the Society for Prevention Research. 2019 Jan;20(1):68-77.

### **Intervention Primary Outcomes were comparable to the original:**

Yes

## **Contact Information**

#### **Primary Contact Name:**

Maria Tapia

### **Primary Contact Affiliation:**

University of Miami

#### **Intervention URL:**

https://www.sonhs.miami.edu/research/familias-unidas

#### **Primary Contact Email:**

m.tapia1@med.miami.edu

#### **Primary Contact Phone Number:**

## **Results**

#### **Intentions**

Improve minority health or the health of other populations with health disparities (e.g. rural populations, populations with low SES)

#### **Intervention Primary Outcome:**

Drug use, sexual risk behaviors

#### **Intervention Secondary Outcome:**

Family functioning

### **Key Findings:**

In an effectiveness trial, Familias Unidas was effective in preventing drug use from increasing and prevented greater increases in sex without a condom 30 months after baseline, relative to prevention as usual. Familias Unidas also had a positive impact on family functioning and parental monitoring of peers at six months after baseline.

#### **Statistical Method Used:**

Across multiple trials, we use longitudinal growth curve models to analyze the direct effects of the intervention on study outcomes across time. The comparability of study conditions is determined and statistically addressed as needed. Probit distribution is used to take into account count variables and to test for intervention effects on binary outcomes.

Was statistical method used to analyze data from original Intervention comparable to the original:

Yes

## **Evaluations and Assessments**

Were Any of the Following Assessments Conducted (Economic Evaluation, Needs Assessment, Process Evaluation)?:

Nο

# **Demographic and Implementation Description**

#### **Diseases, Disorders, or Conditions:**

Substance Use/Abuse, Sexually Transmitted Infections and HIV/AIDS, Teen-age Pregnancy/Birth

Hispanic or Latino Populations with Health Disparities:
Racial and Ethnic Minority Populations, Underserved Rural Communities
Age:
Adolescents (10 - 17 years), Young Adults (18 - 39 years), Middle-Aged Adults (40 - 64 years), Older Adults (65+ years)

## **Socio-demographics / Population Characteristics**

### **Community Type:**

**Race/Ethnicity:** 

Rural, Suburban, Urban / Inner City

### **Other Populations with Health Disparities:**

Unspecified

### **Geographic Location:**

Florida

#### **Socio-Economic Status:**

Unspecified

## **Minority Health and Health Disparities Research Framework**

		Levels of Influence			
		Individual	Interpersonal	Community	Societal
Determinant Types	Biological				
	Behavioral	1	✓		
	Physical / Built Environment				
	Sociocultural Environment	1	✓		
	Health Care System				

## **Community Involvement**

The community's role in different areas of the Intervention (Choices are "No Role", "Participation", and "Leadership"):

Participation

#### **Dissemination:**

Participation <b>Evaluation:</b>
Participation
Implementation:
Participation
Outreach:
Participation
Planning:
Participation
Recruitment:
Participation
Sustainability:
Participation
Characteristics and Implementation
Intervention Focus Area:
Behavior Change
Disease Continuum:
Primary Prevention
Delivery Setting:
Schools / Colleges
Mode of Delivery:
In-person

### Who delivered the Intervention?:

Researchers, school social workers/mental health professionals and community mental health professionals

# **Conceptual Framework**

### **Intervention Theory:**

Social Cognitive / Social Learning Theory, Eco-developmental theory

Social Ecological Model
<u>Implementation</u>
Intervention Study Design:
Individual Randomized Controlled Trial/Comparative (requires random assignment, a control/comparison group, and pre and post intervention outcome assessments), Pilot, feasibility, or demonstration study design
Targeted Intervention Sample Size:
746
Actual Intervention Sample Size:
746
Start Year:
2010
End Year:
2014
Intervention Exposures
Duration of Intervention/How Long it Lasted:
1-3 months
Frequency of Intervention Delivery:
Weekly
Number of Sessions/Meetings/Visits/Interactions:
More than 10 Sessions
Average Length of Each Session/Meeting/Visit/Interaction:
1-2 Hours
Format of Delivery:
Dyad/Group of two (e.g. participant & partner; mother & child), Group (e.g. Community leaders)
Highest Reading Level of Intervention Materials Provided to Participants:
Grade 8-9

**Intervention Framework:** 

# **Adaptations and Modifications**

### Were modifications made?

Intervention Elements	Modified
Content	Yes
Context	Yes
Implementation	No
Funding	No
Organization	No
Participants	No
Providers	Yes
Sociopolitical	No
Stages of Occurrence	Yes

# **Modification Details**

	Explanation		
Content			
Adding Elements, Shortening	For the online adaptation, live parent group sessions were modified to pre-recorded video sessions. Further, we added a telenovela series and interactive exercises.		
Context			
Format, Personnel	The intervention was delivered online instead of in person.		
Providers			
None	Online intervention was delivered by non research staff.		
Stages of Occurrence			
Other	At the effectiveness stage.		

# **Impact, Lessons, Components**

### **Produced an impact or change beyond the primary or secondary outcome:**

Yes

Impact on family functioning, internalizing/externalizing symptoms in certain trials, suicidal ideation

#### **Essential Aspects for Success:**

Facilitators must have the ability to engage and connect with participants. It is important to account for cultural variables that are important in Hispanic culture and how that impacts the family.

#### **Intervention Impact:**

Impact on family functioning, internalizing/externalizing symptoms in certain trials, suicidal ideation

## **Lessons Learned**

### **Key Lessons Learned and/or Things That Could be Changed or Done Differently:**

It is important to evaluate the readiness of the agency delivering the intervention including things such as recruitment sources, availability of Spanish speaking facilitators.

## **Insights Gained During Implementation**

Insight Category	Insight Description
Cost of Implementing or Sustaining	Currently we have an ongoing study that will examine the sustainment of the online adaptation of Familias Unidas
Equipment / Technologies	For the online adaptation, important to gauge comfort with technologynot only for families but for facilitators as well and address accordingly.
Training / Technical Assistance	During COVID we learned that is possible to train and deliver the intervention via the Internet.
Staffing	Agencies need to be able to have Spanish speaking culturally informed facilitators.

# **Intervention Components**

**Intervention Has Multiple Components:** 

Yes

**Assessed Each Unique Contribution:** 

No

# **Products, Materials, and Funding**

Please contact researcher for additional materials that are not publicly available.

**Expertise, Partnerships, and Funding Sources** 

	Used for Implementation	Needed for Sustainability	
Expertise			
Community mobilization, community organization/coalition building	Yes	Yes	
Partnerships			
Health care facilities (local clinics)	Yes	Yes	
Funding Sources			
Public funding (e.g., federal, state or local government)	Yes	Yes	

## **Product/Material/Tools**

	Tailored For Language	Language(s) if other than English	Material	
Outreach/Recruitmen	nt Tools			
None currently used	No	Outreach/Recruitment Tools are not currently used.		
Participant Educatio	nal Tools			
Not currently using, agency specific	No		Participant Educational Tools are not currently used.	
Measurement Tools				
Agency specific	No		Measurement Tools are available by contacting the researcher.	

# **Implementation Materials and Products**

	Material	
Implementation/Delivery Materials		
Tools not publicly available	https://www.sonhs.miami.edu/research/familias-unidas/index.html	
Session outline	Attachment available for request at the bottom of the page.	
Implementation/Output Materials		
No Implementation/Output Materials provided.		

# **Articles Related to Submitted Intervention**

	Article		
Reports/Monog	Reports/Monographs		
No Reports/Moi	nographs provided.		
Additional Articles			
Adaptations	Attachment available for request at the bottom of the page.		
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# **Materials Available for Request**

- Table A Session outline.docx
- eHealth Familias Unidas Primary Care.pdf

- Ehealth Main Outcome-Estrada.pdfEhealth Main Outcome-Estrada.pdf

Request Materials

Enter Email Address Request