



PEPFAR

U.S. President's Emergency Plan for AIDS Relief



Background and Research Results

The *Families Matter!* Program

What is the *Families Matter!* Program?

The *Families Matter!* Program (FMP) is an evidence-based, parent-focused intervention designed to promote positive parenting and effective parent-child communication about sexuality and sexual risk reduction, including risk for child sexual abuse and gender-based violence, for parents or caregivers of 9-12 year olds in Africa. FMP recognizes that many parents and guardians may need support to effectively convey values and expectations about sexual behavior and communicate important HIV, STI, and pregnancy prevention messages to their children. The ultimate goal of FMP is to reduce sexual risk behavior among adolescents, including delaying the onset of sexual debut, by strengthening parents' skills to deliver primary prevention to their children and increasing their awareness of child sexual abuse and harmful gender norms and strategies they can use to help protect their children.

As a key partner agency for the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), CDC works with PEPFAR-supported countries to provide technical expertise for the adaptation, implementation, and monitoring and evaluation of FMP.

Overview

Program Delivery

Families Matter! is delivered in 6 consecutive weekly group sessions lasting approximately 3 hours apiece. Each FMP session builds on the foundation laid in the previous session. Parents are asked to bring their 9-12 year-old child to a designated session to practice the communication skills learned during the intervention with the child. The program is facilitated by a team of two certified facilitators, one male and one female.

Curriculum Highlights

Each of the 6 FMP sessions has a specific focus and measurable objectives.

- **Session 1:** Introduction to FMP and Steps to Understanding Your Child
- **Session 2:** Good Parenting Skills
- **Session 3:** Parents' Role in Educating Their Children about Sexuality
- **Session 4:** Information to Increase Comfort and Skills in Discussing Sex and Sexuality
- **Session 5:** Discussing Sexuality and Pressures Children Face
- **Session 6:** Understanding Child Sexual Abuse

In an effort to address the globally pervasive and difficult to discuss issues of Child Sexual Abuse (CSA) and Gender-Based Violence (GBV) which are associated with increased sexual risk among youth, the FMP curriculum has been tailored to include specific culturally acceptable and age-appropriate content surrounding these topics. By raising awareness of and highlighting a parent's role in helping prevent CSA and GBV, FMP promotes reflection, dialogue, and action across the broad spectrum of issues that contribute to these problems.



The *Families Matter!* Program in Africa was adapted from CDC's U.S. evidence-based intervention, the *Parents Matter!* Program (PMP).¹

A randomized controlled trial of PMP with African-American families showed that PMP parents significantly increased their perception of their pre-adolescent child's readiness to learn about sex, the number of sex topics they discussed with their child, and their knowledge, skills, comfort, and confidence in communicating with their child about sex topics.^{2,3} The program also increased effective communication about abstinence, HIV/AIDS, and condom use.

In 2003-2004, formative work was conducted to culturally adapt PMP for use in Western Kenya—renamed the *Families Matter!* Program.⁴ An outcome evaluation of FMP was conducted in 2004-2006 with 375 families in Kenya. **At one-year follow-up, evaluation results showed that the adapted intervention was well-embraced by the community and retained its effectiveness, successfully increasing parenting skills and parent-child communication about sexuality and sexual risk reduction.⁵**

Families Matter! Notable Accomplishments

Capacity building and technical support continue for implementation and evaluation activities in 8 African countries (Kenya, Tanzania, Cote d'Ivoire, South Africa, Zambia, Botswana, Mozambique and Zimbabwe) and in 15 languages (English, Spanish, French, Kiswahili, Setswana, Lozi, Tonga, Portuguese, isiXhosa, isiZulu, Afrikaans, Xitsonga, isiSwati, Sesotho and Oshiwambo).

New in 2014 – Release of enhanced FMP curriculum

In addition to the newly added child sexual abuse session, which provides an active response to the information gleaned from the Violence Against Children Survey, the FMP curriculum has been enhanced to strengthen its alignment with World AIDS Day goals. Specific revisions include:

- Information on GBV and harmful gender norms
- Enhancing direct linkages to other HIV resources including HIV Testing and Counselling, Prevention of Mother to Child Transmission, and Voluntary Medical Male Circumcision
- Discussion on how to disclose HIV status (disclosure of parents' HIV status to child and of child's HIV status to child)

Program Highlights

- Kenya: FMP has achieved national adoption in Kenya, with over 500 facilitators trained and certified and over 250,000 Kenyan families reached through the program.
- Overall participant retention across FMP sessions averages above 90%: Ivory Coast (94.0%), Mozambique (94.9%), South Africa (91.3%), Tanzania (95.6%), and Zambia (90.8%).
- More than 60 non-governmental organizations, faith-based organizations, and Ministries of Health are involved in the delivery of FMP

Available Guidance and Tools

- Program Materials: Participant, facilitator, implementation manuals; posters, audio recordings.
- 5-step Implementation Plan
 1. Community Needs Assessment
 2. Cultural Adaptation
 3. Facilitator Recruitment, Training and Certification
 4. Pilot-testing
 5. Implementation and Monitoring & Evaluation
- Capacity-building Toolkit
- Program Manager Training
- Monitoring, Evaluation and Quality Assurance Planning, Guidance and Tools

Selected Publications

1. Dittus PJ, Miller KS, Kotchick BA, Forehand R. Why Parents Matter!: The Conceptual Basis for a Community-Based HIV Prevention Program for Parents of African American Youth. *Journal of Child and Family Studies*. Vol 13, No. 1, p 5-20.
2. Forehand R, Armistead L, Long N, Wyckoff SC, Kotchick BA, Whitaker D, Shaffer A, Greenberg AE, Murry V, Jackson LC, Kelly A, McNair L, Dittus PJ, Miller KS. Efficacy of a Family-based, Youth Sexual Risk Prevention Program for Parents of African-American Pre-adolescents. *Archives of Pediatric and Adolescent Medicine* 2007; 161 (12); 1123-1129.
3. Miller KS, Lin CY, Poulsen MN, Fasula AM, Wyckoff SC, Forehand R, Long N, Armistead L. Enhancing HIV Communication Between Parents and Children: Efficacy of the Parents Matter! Program. *AIDS Education and Prevention*. 23 (6):550-563.
4. Vandenhoudt HA, Miller KS, Ochura J, Wyckoff SC, Ochieng F, Odera W, Mboi P, Adipo Obong'o C, Njika G, Otwoma N, Nasokho P, Poulsen M, Lin C, Menten J, Marum E, Buv'e A. Evaluation of a US evidence-based parenting intervention in rural Western Kenya: From *Parents Matter!* to *Families Matter!* *AIDS Education and Prevention*, 2010, 22(4), 328-343.
5. Poulsen MN, Vandenhoudt HA, Wyckoff SC, Obong'o C, Ochura J, Njika G, Otwoma NJ, Miller KS. Cultural adaptation of a US evidence-based parenting intervention for rural Western Kenya: From *Parents Matter!* to *Families Matter!* *AIDS Education and Prevention*, 2010, 22(4), 273-285.