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Promoting an Alcohol-free Childhood: A Novel Home-Based Parenting Program

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Background

Our purpose is to describe the rationale for and development of a home-based parent-child program intended to increase the likelihood of an alcohol-free childhood. Few alcohol prevention programs focus on elementary school-aged youth. Yet the elementary school years are a critical time for initiating alcohol use prevention because children develop expectancies and norms about alcohol use during these years^{1,2} and many are introduced to alcohol use at home.^{3–7}

For many children, first alcohol use occurs when they are allowed to taste drinks that belong to a parent.^{3,5,6} Although sips of alcohol are typically not counted in measures of alcohol use onset, sipping a parent's drink can be a powerful socialization experience. Being allowed to sip a parent's drink, or to sip another person's drink in the presence of a parent, can instill the belief in children that parents are tolerant of, or at least will not punish, alcohol use. Parents also may unwittingly reinforce child alcohol use in ways that do not involve child consumption. For example, involving children in fetching and/or pouring drinks for adults and providing children with "mixed drinks" made without alcohol are socialization practices that have the potential to teach children to associate alcohol use with positive events and positive recognition by adults.

Many parents believe that there are benefits to exposing children to alcohol at home. Some believe that allowing sipping is a deterrent because children will not like the taste or that sipping removes the “forbidden fruit” appeal of alcohol.⁸ As many as 40% of parents espouse such beliefs,⁸ and similarly high percentages of third to fifth grade youth report having had a sip or taste of alcohol from a parent’s drink.⁴

Although some parents believe allowing children to sip can be protective, longitudinal research on consequences of early alcohol use indicates that it can put children at increased risk of alcohol use in adolescence. Jackson and colleagues reported that 5th grade children whose parents allowed them to try a drink with alcohol were twice as likely to report recent alcohol use in the 7th grade as their peers who were not allowed to try a drink.⁹ Donovan and Molina found that sipping or tasting alcohol by age 10 was predictive of having a drink of alcohol by age 14, even after controlling for an array of variables measuring psychosocial proneness to engage in problem behavior.⁷ These findings suggest that parents need guidance to understand that there are risks associated with an early introduction to alcohol and that the best course is to keep children alcohol-free. Prevention programs targeting parents of elementary school youth have the potential to provide parents with such guidance and to change risk factors within the family to decrease children’s exposure to alcohol, including sips. At the same time, such programs can leverage the ability of parents to modify what children learn from social and environmental factors, including media and peers.

In this paper we describe an innovative, theory-based program called *Mysteries, Max, and Me – Discovering How to be Alcohol-free!* The goal of this program—an alcohol-free childhood—is consistent with a leadership initiative of the National Institute on Alcohol Abuse and Alcoholism (NIAAA).¹⁰ We elaborate the conceptual foundation of the program, delineate the alcohol-specific socialization objectives of the program, and describe the home-based intervention strategies used to engage parents and 9- to 10-year old children in alcohol use prevention activities. Our aims in reporting the details of this program are to encourage other investigators and health educators to focus on childhood sipping, and to provide a programmatic example that might stimulate others to develop and evaluate similar prevention strategies.

Strategies

Part 1. Theoretical Foundation: Alcohol Use Socialization during Childhood

Alcohol use is a socially learned behavior¹¹ and social learning about alcohol use begins in childhood.¹² The principal target of our intervention is, therefore, alcohol use socialization, which we define as social learning processes that affect children’s development of cognitive and behavioral norms regarding alcohol use. Our approach assumes that alcohol use socialization is a gradual, cumulative process in which children receive inputs from multiple social sources, including parents and other family members, friends and peers, teachers and religious leaders, and mass media.^{12,13} Through observation, communication, and direct experience with these social sources, children gradually internalize norms and expectancies regarding alcohol use.

During early and middle childhood, children are socialized primarily by their parents; hence, a principal aim of our program is to modify parenting practices specific to alcohol. However, because parents can modify children's exposure to and interpretation of social influences originating beyond the home environment, our program also aims to enable parents to diminish pro-alcohol influences from media and peers.

Darling and Steinberg's Integrative Model¹⁴ provides a theory-based framework of the general categories of parenting variables that are targeted by the intervention. Specifically, parenting *practices*, parenting *goals*, and parenting *style* each contribute to children's socialization, and hence, their behaviors. *Parenting practices* include what parents say and do, what rules they set, and what norms they reinforce specific to a particular area of socialization, such as alcohol use. *Parenting goals* indicate *why* parents undertake certain parenting practices. *Parenting style* indicates *how* parents generally interact with their children, and indicates the context within which parenting practices take place. The intervention described in this paper applied this theory-based model by focusing on alcohol-specific parenting practices, increasing the salience and relevance of goals that support these parenting practices, and helping parents incorporate general parenting skills characteristic of an "authoritative" parenting style that is known to be protective against child health risk behaviors.^{15–21}

Part 2. Identifying Program Objectives

The first step in program development was identifying intervention objectives relevant to children's alcohol-specific socialization. Each intervention objective is a unique attribute of parents or children that the intervention aims to modify. Our broad aim was to identify a comprehensive set of alcohol-specific socialization factors with the potential to be modified or mediated by parents. Using Social Cognitive Theory²² as a guide, we considered three types of socialization stimuli: live models (e.g., parental or peer alcohol use), symbolic models (e.g., messages - either pro-use or anti-use - received through mass media advertising or television), and verbal descriptions or instructions (e.g., specific communication by parents, such as talking with a child about the harmful consequences of alcohol use).

An extensive set of extant studies demonstrates an association between these types of socialization stimuli and children's alcohol-related socialization and outcomes.^{23–31} For example, Peterson et al²³ found that if parents used effective parenting skills (e.g., monitoring, clearly stated expectations) and avoided involving children in adult alcohol use (e.g., asking a child to fetch or pour drinks), children had a lower risk of alcohol use at ages 14 to 15. Van der Vorst et al²⁴ found that if parents had specific rules against drinking at a young age and also drank responsibly themselves, adolescents were less likely to drink heavily. Exposure to alcohol advertising^{25–28} and portrayals of alcohol use on television and in movies²⁹ also influence children's and teen's expectancies, intentions and behaviors with regard to alcohol. Youth perceptions of peers' alcohol-related attitudes and behaviors are another significant predictor of alcohol use, including age of initiation of use.^{30,31} All of these socializing factors were taken into account during specification of intervention objectives.

Guided by this research, we developed a comprehensive list of objectives for a home-based intervention to reduce children's exposure to socialization that promotes early alcohol use (see Table 1). The four categories of objectives included *Building Parental Engagement and Commitment to the Program* and objectives relating to three domains of social influence: *Media Influence*, *Peer Influence* and *Family Practices*.

The objectives in the *Building Parental Engagement and Commitment to the Program* domain are derived from social and behavioral theories. People are more likely to take action if they believe the consequences of inaction are severe.³² A key objective within this domain is therefore to increase parental awareness of the link between early onset alcohol use (i.e., sipping) and the likelihood of and risks associated with adolescent alcohol use. Social cognitive theory²² posits that people are more likely to initiate a task, and will persist at it longer, if they believe they can perform the recommended action (i.e., have self-efficacy) and if they believe that the recommended action will have the desired effect (i.e., response efficacy). Several objectives in this domain pertain to increasing parental self-efficacy for engaging in alcohol-specific socialization of children and parental confidence that engaging in the recommended activities (e.g., setting rules; mediating peer influence) will result in their children having an alcohol-free childhood.

As mentioned previously, the objectives in the other three domains are also consistent with Social Cognitive Theory, which posits that children's beliefs and attitudes are learned in a social context and are influenced by observation of models in their environment. In the case of children's beliefs and attitudes about *alcohol*, extant studies highlight the importance of children's observations of alcohol-related modeling by the media^{25–29} and by peers,^{30,31} as well as messages received via parents' alcohol-specific parenting practices.^{23,24} In Part 3, we describe how we designed intervention components intended to reinforce the anti-alcohol use influences and refute the pro-alcohol use influences to which children are exposed within each of these three domains.

Part 3. Key Strategies for Program Design

8-Step Approach—We chose a print-based, magazine format for delivering the prevention program. We used an 8-step approach,³³ applied previously to develop a home-based child smoking prevention program, which was effective in modifying smoking-specific parenting practices³⁴ and in lowering the odds that children of smokers would initiate smoking,³⁵ to design program components to meet the objectives specified in Table 1. We applied this 8-step approach by first developing preliminary versions of core messages and activities for each objective. Some core content was framed for parents only and some was framed for parents and children jointly. Next, these initial versions of core content were vetted in focus groups with parents and modified based on consistent parent feedback. Subsequent to focus group review and modification, core content, in the form of instructional messages and structured activities, was grouped into themed sets (e.g., all content relevant to helping children resist peer influence to drink alcohol was grouped) and laid out to produce printed prototypes of program magazines. Some content was grouped to form magazines for parents only ("parent magazines"); other content was grouped to form thematic sets of activities to be completed by parents and children jointly ("activity

magazines”). These prototype magazines were created with the aid of a professional illustrator and graphic designer and field-tested by parents and children, who used them at home, under realistic conditions and completed qualitative interviews to provide detailed feedback on their utilization experience. Iterative prototype testing resulted in increasingly detailed refinement of the text, graphic images, layout, and overall format of the magazines. After all content modifications were made, the graphic designer created press-ready versions of all program magazines.

Experiential Learning—Principles and techniques of dialogue education³⁶ informed our approach to program design. We structured the content of the activity magazines so that parents and children would engage in specific behaviors that, once accomplished, meet the program objectives. For example, rather than giving parents tips and recommendations that they might, at some point, employ with their children, we embedded direct experience with recommended behavioral objectives into each activity: Parent-child communication activities were scripted to facilitate discussion of specific points. Role-play activities were developed to directly engage children in practicing specific refusal skills. Games were structured to provide children with specific knowledge about alcohol and its properties. Other activities were designed to engage parents in dialogue with children about their expectations and rules regarding alcohol and in supporting, through advice and modeling, development of the skills needed to refrain from sipping alcohol.

Child-Learning Approach—This interactive, experiential approach to program design is successful only if parents and children use the materials. Consistent with recommendations from experts in elementary education, a child-learning approach was therefore used to sequence the activities within each parent-child activity magazine. This entailed beginning with direct instruction and then incorporating guided practice, independent practice, and summary. Child engagement was also enhanced by making the magazines fun and exciting for children. A variety of child-friendly activities (e.g., seek-and-find hidden pictures, interviews with parents, board games, role-plays, mazes, art activities, scavenger hunts, and cartoon-based discussion activities) were incorporated into each activity magazine. We included play as much as possible, including utilizing a “detective” theme to engage children as detectives who solve mysteries and uncover facts in each magazine. We also used prizes for completion of specific activities to further motivate children.

Developmental Appropriateness—The developmental attributes of children ages 9 to 10 were taken into account during program design. These included children’s emerging focus on independence from parents, their greater consideration of peer acceptance, their increased ability to describe experiences and feelings and to consider the concerns of others, and their ability to use words to both resolve disagreements and to participate in mutual rule setting. The program was designed so that children exercise all of these competencies by doing the activities with their parents. Finally, the colors, graphics, and program characters were selected to appeal to a middle childhood audience (see figure 1).

Part 4. The Complete Intervention: Mysteries, Max and Me – Discovering How to Be Alcohol-free

Parent Magazines and Parent-Child Activity Magazines—The *Mysteries, Max and Me* program comprises five core pairs of magazines; each pair includes a parent magazine and a complementary parent-child activity magazine. These core magazines are delivered at monthly intervals to parents and their 9 to 10 year old children, followed by two pairs of annual booster magazines, the first delivered at ages 10 to 11 and the second delivered at ages 11 to 12.

Table 2 summarizes the content of the core magazines and boosters and shows how the parent-only information and parent-child activities work together to meet the program objectives specified in Table 1. Each pair of magazines has a main theme, and the themes are sequenced over five months so that the more readily accomplished objectives are presented first. More specifically, we learned from focus group feedback that parents would be more immediately willing to change practices relating to preparing children to resist media and peer influence than to change family alcohol-related practices (e.g., asking children to fetch alcohol for adults). Therefore, over the five month core intervention, content targeting the media and peer-related objectives precedes content targeting family alcohol-related practices.

The pairs of magazines are complementary in that each parent magazine is intended to “prime” parents for completing each activity magazine with their children. In addition to providing content to parents aimed at increasing self-efficacy, motivation and program engagement, the parent magazines provide relevant parenting tips and information from the research literature, and they directly instruct parents how to engage children in the socialization activities in the corresponding activity magazines. For example, *Parents Get Ready to Speak Up about Alcohol Use!*, a parent-only article, informs parents that if they don’t speak up about alcohol, they are letting other sources, including media, have a stronger say about what their children learn about alcohol. The article alerts parents to take advantage of “teachable moments,” as when children see alcohol content in ads, television programs or movies, to explain their values and expectations about alcohol use. The article also provides parents with scripted questions they can use to engage children in a discussion about what they see in the media, thus directly facilitating an activity in the corresponding parent-child activity magazine. In that activity, children receive a prize for spotting someone using alcohol on television or in a movie and bringing it to a parent’s attention. Thus, the parent article and parent-child activity work together to encourage parent mediation of media messages about alcohol.

Support materials—With each monthly delivery of program magazines, participating children also receive support materials for specific activities (e.g., a detective’s kit containing a notebook, pencil, detective’s badge, backpack, hat and detective’s spyglass used to de-code messages throughout the magazines). Other support materials include prize entry sheets, game cards, and other pieces needed to complete the activities in the magazines. Small detective-themed incentives (e.g., an invisible ink pen, fingerprint kit, and

mini-flashlight) are sent to children who complete a specific activity in each activity magazine.

Detailed Illustrations of Program Components—The following examples from the *Mysteries, Max and Me* program, one from each domain, demonstrate in detail how key intervention strategies (e.g., developmental appropriateness, experiential learning) and use of specific instructional methods (self-assessment, guided practice, role play, social contract) were employed to facilitate participants' attainment of the intervention objectives.

Domain: **Build Parental Engagement and Commitment to the Program**

Activity Title: **Find Your Own Reasons for Keeping Your Child Alcohol-free**

Rather than didactically list the benefits of providing children with an alcohol-free childhood, this parent-only article engages parents using a parent-to-parent approach by having them read quotes from other parents, backed by research, about the benefits of letting children grow up without trying alcohol (e.g., effects on brain development, school success, safety, parent-child relationship). Parents then refer to these quotes while completing a self-assessment activity in which they identify the benefits that are most salient to them.

Domain: **Prepare Child to Resist Media Influence**

Activity Title: **Is it a Trick or a Truth?**

This parent-child detective activity aims to strengthen children's media literacy by involving them in guided practice to debunk pro-alcohol images and messages in alcohol ads using photos of actual advertisements and specific questions that elicit conversation between parents and children about common techniques used by advertisers to promote alcohol. Children enjoy using a "detective's spyglass" to reveal clues about whether advertisers tell the truth about alcohol.

Domain: **Prepare Child to Resist Peer Influence**

Activity Title: **Think for Yourself!**

This parent-child role play board game (see figure 2) makes peer influence salient and builds child refusal skills. Game cards enable parents and children to take turns either practicing (child) or modeling (parent) refusal skills in various situations. Some cards require children to formulate their own reasons for refusing alcohol; others require children to evaluate whether answers are assertive or not.

Domain: **Modify Family Practices Specific to Alcohol Use**

Activity Title: **Our Family Agrees**

This activity involves parent-child dyads in making a social contract that reinforces the child's commitment to remaining alcohol-free and the parent's commitment to key anti-alcohol practices. Using a provided form, the parent and child specify how they will work together to keep the child alcohol-free. Parents and children can also add their own points of agreement. By being allowed to participate in mutual rule-setting, children are more likely to feel ownership over the process, thus facilitating adherence to the contract.

Conclusions

Over two-thirds of school-aged children who have ever consumed alcohol obtain their first sips while with parents,⁶ generally at family dinners or celebrations.⁴ The National Institute on Alcohol Abuse and Alcoholism recognizes that the public is “largely unaware both of the potentially harmful outcomes of early alcohol use and of the large numbers of underage drinkers, especially younger ones,” and thus has encouraged the development of strategies to intervene among the 9–15 year old “overlooked” age group.¹⁰ This paper aims to call attention to the need for early intervention to prevent sipping behavior in children.

Most alcohol use prevention programs are school-based and therefore do not take advantage of the important role that parents can play by providing alcohol-specific socialization. The parenting programs that do exist are designed for families of middle- or high-school youth and focus on preventing drinking, not on preventing early sipping in the home. Policy change, such as increased taxation, is also unlikely to affect the sipping behaviors that are characteristic of elementary school age children who have alcohol. The *Mysteries, Max and Me* program illustrates how health promotion methods can be applied to address the dearth of alcohol use prevention programs for children.

Translation to Health Education Practice

Early onset of alcohol use is a risk factor for adolescent alcohol misuse and abuse. Despite the known risks associated with early onset, *Mysteries, Max and Me* is the only intervention developed to date that engages parents of elementary school children in preventing early introductions to alcohol. Our report offers investigators and practitioners a detailed description of our early intervention model and the step-by-step approach used to design and implement the program. By disseminating this intervention model, we hope to foster replication and adaptation by health educators, which would ultimately strengthen program effectiveness and enhance public health benefits.

When designing and implementing new parenting interventions, health educators can apply several innovative strategies from this report:

1. *Use of Darling and Steinberg’s Integrative Model¹⁴ to identify the general categories of parenting variables to target.*
2. *Use of Social Cognitive Theory as a guide to developing intervention objectives:* By identifying multiple agents of social influence—including parents, peers, and media—health educators can reinforce anti-alcohol use influences and refute pro-alcohol use influences to which children are exposed, thereby strengthening the effectiveness of their program.
3. *Use of formative evaluation methods (e.g. focus groups) to assess and modify core intervention content before proceeding to finalize intervention activities.*
4. *Use of a theory-based, developmentally appropriate, experiential learning approach to develop materials for parents and children:* By carefully structuring and scripting each activity, educators can incorporate experiential learning and thereby increase the likelihood that parents and children accomplish the intended

objectives simply by engaging in the activities as directed. Incorporating experiential learning into printed health education materials produces what we call “print interactive” materials. For health educators who do not have the resources to produce electronic versions of interactive programs, the print interactive approach can be used to enhance substantially the potential of their materials to lead to health behavior change.

5. Use of child-friendly strategies (e.g. detective theme with detective kit) to increase child engagement in the program.
6. Use of parent-only materials to increase parental self-efficacy, motivation and engagement and to instruct parents on how to use the socialization activities with their children.

In addition, health educators can apply the approach described in this report when designing, implementing or evaluating parenting programs targeting other child or adolescent health risk behaviors, such as unhealthy eating, smoking, or substance use. The format of *Mysteries, Max and Me* allows flexibility as regards where, when, and how the program is implemented; it could be modified by health educators for self-administration on a variable but convenient schedule via a website or on a CD that provides sequential access to the intervention materials. The focal alcohol use prevention program, and similar programs developed for other health topics, could also complement and strengthen school-based prevention activities by providing a home-based component to existing programs for children before they reach middle school.

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Figure 1.
Child-friendly Program Characters

Figure 2.
Think for Yourself Role-play Game

Table 1**Key Program Objectives**

<i>Build Parental Engagement and Commitment to the Program</i>	
•	Increase parental knowledge of the phases of child alcohol use
•	Reduce parental complacency regarding child sipping
•	Increase parental awareness of the link between early onset alcohol use and adolescent alcohol use, misuse and risks associated with adolescent alcohol use
•	Increase parental confidence that establishing family norms, setting rules, monitoring access, and other socialization activities can reduce children's risk of sipping
•	Increase parental self-efficacy to undertake the issue of child alcohol use
•	Increase parental self-efficacy in applying general parenting skills to alcohol specific socialization activities
•	Increase parental self-efficacy to decide upon, communicate, and monitor compliance with family norms that support an alcohol-free childhood
<i>Prepare Child to Resist Media Influence</i>	
•	Increase parent-child communication that counters pro-drinking images and messages from television and other media
•	Increase parent-child communication that counters alcohol advertising
•	Increase children's media literacy and capacity to recognize and refute misleading messages about alcohol
•	Increase children's ability to identify alcohol industry tactics that encourage alcohol use
<i>Prepare Child to Resist Peer Influence</i>	
•	Enable parents to understand peer influence about alcohol and to monitor opportunities for children to affiliate with peers who might encourage alcohol use
•	Encourage parents to support children's relationships with pro-social peers
•	Engage parents in activities that increase children's skills to refuse peers who might offer alcohol
•	Increase children's self-esteem and engagement in healthy activities
<i>Modify Family Practices Specific to Alcohol Use</i>	
•	Engage parents in establishing and communicating rules about child alcohol use
•	Increase normative parent-child communication regarding the personal and social consequences of alcohol use before adulthood
•	Enable parents to communicate family norms regarding acceptable adult alcohol use
•	Engage parents in intra-familial (e.g., parent to relative) and extra-familial (e.g., parent to parent) communication of family rules regarding child alcohol use
•	Have parents eliminate and monitor children's access to alcohol in the home (e.g., adults' open drink containers, near empty cans of beer or bottles of wine, unopened alcohol containers)
•	Have parents cease involving children in adult alcohol use (e.g., by asking them to fetch or pour drinks)
•	Engage parents in activities that increase children's skills to refuse adults who might offer alcohol

Table 2

Program Components from the Mysteries, Max & Me Child Alcohol Use Prevention Program

	Parent-only Magazine	Parent-Child Activity Magazine
Core Program Month 1	<i>Innocent Introductions: Does Childhood Sipping Lead to Teen Drinking?</i>	<i>Join Max's Detective Team!</i>
Theme: Participant Readiness	<ul style="list-style-type: none"> Describes the overall goal of promoting an alcohol-free childhood and the rationale for beginning alcohol education in elementary school Debunks common myths about the benefits of giving children sips of alcohol and explains links between sipping, early onset alcohol use and adolescent alcohol use, as well as links between adolescent alcohol use and other health risk behaviors 	<ul style="list-style-type: none"> Matching activity helps children learn basic information about alcohol and what makes it different from other beverages Scripted interview facilitates parent-child communication about the importance of staying alcohol-free
Core Program Month 2	<i>TV and Movies: Teaching Kids about Alcohol</i>	<i>Be a TV Detective!</i>
Theme: Media Influence	<ul style="list-style-type: none"> Describes the influence of media on children's alcohol expectancies, intentions and use, and explains how the alcohol industry advertises alcohol to appeal to children Prepares parents to use "teachable moments" to counter messages in the media that encourage under-age or irresponsible alcohol use. 	<ul style="list-style-type: none"> Cartoon with discussion questions teaches children about the purpose of advertising BINGO game makes children aware of the prevalence of advertising on television Structured parent-child activity debunks messages in alcohol advertisements Parent mediation activity helps children become critical of pro-alcohol messages on television and in the movies Writing/drawing activity elicits messages from children that counter common alcohol advertising themes.
Core Program Month 3	<i>Friends and Alcohol: What's the Connection?</i>	<i>You Can Choose! To be Smart about Alcohol</i>
Theme: Peer Influence	<ul style="list-style-type: none"> Describes peer influence on children's alcohol use, highlighting the ways in which both children and adults modify their behavior according to the norms of their social groups Provides tips for effective communication to prepare parents to talk with their children about friends and alcohol Explains the relationship between self-esteem and risky behaviors and provides tips for increasing children's self-esteem. 	<ul style="list-style-type: none"> Decision-making activity builds children's peer refusal skills by helping children identify assertive refusals of offers of alcohol from peers Parent-child role play game gives children practice refusing offers of alcohol Interview activity enables parents to ask the types of questions that are key to effective parental monitoring Self-assessment activity builds self-esteem by highlighting the child's talents and interest in healthy activities
Core Program Month 4	<i>Sipping, Tasting, Fetching, Pouring – Time for Family Rules about Alcohol</i>	<i>Agree to Be Alcohol-free!</i>

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Theme: Family Rules	<ul style="list-style-type: none"> Provides information about links between parental expectations and teen alcohol use to increase parents' confidence about their ability to influence growing children's attitudes about alcohol Encourages parents to get an early start in teaching children about alcohol by comparing alcohol education to other common "life lessons." Self-assessment activity helps parents identify steps they can take to prevent child sipping of alcohol at home 	<ul style="list-style-type: none"> Checklist activity identifies ways in which parents protect children and reminds parents and children that setting rules about alcohol is a hallmark of good parenting Board game helps parents and children test and improve communication skills Hidden picture activity teaches the consequences of underage alcohol use Scripted interview facilitates parent-child communication about child alcohol use Social contract between the parent and child reinforces staying alcohol-free.
Core Program Month 5	Adults as Role Models – for Responsible Alcohol Use	Find All of Your Special Clues!
Theme: Adult Role Models	<ul style="list-style-type: none"> Encourages parents to involve the entire family, including relatives and other adults who supervise children, in keeping children alcohol-free. Highlights the importance of modeling responsible alcohol use Provides tips for teaching children polite ways to refuse any adult's offer to try alcohol Provides examples of alcohol-related teachable moments and ideas for how to respond 	<ul style="list-style-type: none"> Child mastery activity teaches the difference between responsible and irresponsible adult alcohol use. Cartoon scenario promotes discussion between parents and children about how children can tactfully refuse offers of alcohol from adults Review activities (scavenger hunt bingo, family mealtime chat game, reward activity) reinforce knowledge and skills learned in the core program Celebratory party recognizes completion of the core program
1st Annual Booster	Keeping Your Child Alcohol-Free in the "Tween" Years	Moving Up to Middle School – New Adventures and New Challenges
Theme: Strengthen Core Program Skills	<ul style="list-style-type: none"> Reminds parents of the main strategies parents can use to prevent child sipping of alcohol Teaches parents how to use an authoritative parenting style during the pre-teen years to keep children from trying alcohol and engaging in other risk behaviors. 	<ul style="list-style-type: none"> Parent-child structured discussion activity fosters the development of children's decision-making skills Matching activity develops children's ability to identify and refute alcohol industry messages designed to promote alcohol products Parent-child goal-setting activity encourages setting goals to keep the child alcohol free during the middle school years
2nd Annual Booster	Teen Drinking – Why Is It Risky and What Can Parents Do about It?	Get Ready for Your Teen Years – Stay Smart about Alcohol
Theme: Strengthen Core Program Skills	<ul style="list-style-type: none"> Teaches parents how the adolescent brain predisposes teens to engage in risky behaviors such as alcohol use Discusses the health and safety consequences of teen drinking Provides strategies for monitoring adolescents and communicating the risks of binge drinking 	<ul style="list-style-type: none"> Self-assessment activity facilitates identification of traits that protect teens from alcohol use, such as the ability to communicate with parents and other adults, make good decisions, and be assertive with peers Decision-making activity uses common scenarios involving teens and alcohol to enable children to practice thinking about consequences of different choices

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	<ul style="list-style-type: none">• Goal-setting activity encourages healthy risk-taking in order to develop confidence and a sense of identity, and to displace the urge to engage in unhealthy risks