

# Feasibility Studies of Treatnet Family With Elements of Family Therapy for Adolescents with Drug Use Disorders and Behavioral Challenges in Resource Limited Settings

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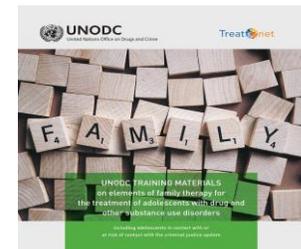
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**Background:** In Low- and middle-income countries (LMICs), adolescents with substance use disorders (SUDs) have very limited access to effective treatment. Several international policy documents called on UNODC to encourage Member States to “consider implementing scientific evidence-based treatment and sustained recovery programmes for children and adolescents. In response, UNODC, in collaboration with WHO and leading family therapy experts, developed Treatnet Family (TF) for treatment of adolescents with SUDs as a scalable and skills-based intervention (open source).

TF has been developed around identified core elements of evidence-based family therapy approaches and integrates therapeutic interventions. Its intention is to make them available in LMICs for the treatment of teens with alcohol and drug use disorders and support their families in a systemic approach. Several feasibility and acceptability studies have been conducted on TF implementation in Viet Nam and Indonesia in 2019/2020.

Further details available at:



**Objective:** To determine TF feasibility in a community setting in Indonesia and routine clinical settings (community and inpatient) in Viet Nam; To examine its impact in substance consumption and substance-related activities, in improving their psychological wellbeing and communication within the family.

**Methods:** Each of 23 Indonesian practitioners trained was supervised by one of 5 national supervisors. On the other hand, Each of 5 Vietnamese practitioners trained was supervised by one of 2 national supervisors. Mixed method was applied for data collection through questionnaires, in-depth interviews and an observation of one randomly chosen TF session. The practitioners delivered TF over a period of 6 weeks in 2019/2020.

**Participants:** 42 Indonesian adolescents and parents/family members recruited. 19 groups stayed and completed the questionnaires at pre, post intervention and at follow-up assessment.

15 Vietnamese adolescents and parents/family members recruited. 10 groups stayed and completed the pre- and post-intervention assessments.



Fig1. General Family Functioning (Lower scores for higher functioning)

**Main Findings:** TF was acceptable to practitioners, adolescents and their families, and could be implemented with good fidelity in routine clinical settings both in Indonesia and Viet Nam.

**Indonesia:** Adolescent’s alcohol consumption significantly decreased. The number of adolescents who smoked cigarettes, consumed marijuana and amphetamine showed a slight reduction. There was a general trend of reduction in adolescent’s alcohol- and drug-related activities. Participating in TF also led to significant changes in adolescent’s involvement with friends with specific antisocial behaviour. The parents observed positive changes in the adolescents such as willingness to spend time with them, being more obedience to them, had better communication, helpful with chores, studied harder, showed changes in their sleeping pattern, and changed in late-night hang out habits. Adolescent’s mental health problems decreased significantly.

**Viet Nam:** The amount and frequency of adolescent’s substance (i.e., alcohol, cigarette, marijuana and other drugs) consumption decreased. A reduction in adolescent’s alcohol- and drug-related activities, and engagement with friends with specific antisocial behaviour was observed. Adolescent’s mental health problems and parent/family member’s psychological distress also decreased. Interviews with the adolescents and their family members showed both positive and hopeful changes. Through sessions, the adolescents and their family gained new information about drugs, which had led to changes in the way they interacted with each other.

**Conclusion:** TF has proved to be feasible and acceptable in routine clinical settings in both countries. Study participants reported positive benefits from TF. In interpreting these findings the study’s methodological limitations should be considered. UNODC will continue exploring opportunities and funding sources for an effectiveness and impact measurement studies with larger sample size so that potential mediators and moderators of treatment outcome could be identified.



Detailed reports/articles available at:



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Treatnet Family contributes to the achievement of the 2030 Agenda and Sustainable Development Goals (SDGs).