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# SUBSTANCE ABUSE CYCLE INTERVENTION AND PREVENTION FOR CHILDREN OF SUBSTANCE ABUSERS

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SUBSTANCE ABUSE CYCLE INTERVENTION AND PREVENTION  
FOR CHILDREN OF SUBSTANCE ABUSERS

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A Project  
Presented to the  
Faculty of  
California State University,  
San Bernardino

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In Partial Fulfillment  
of the Requirements for the Degree  
Master of Social Work

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by  
Charleena Sharon Chagoya

June 2016

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June 2016

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## ABSTRACT

This research project addresses the substance abuse cycle intervention and prevention strategies used amongst individuals who are a part of generational substance abuse. Participants were recruited from an inpatient drug rehabilitation center in Southern California. Qualitative interviews were conducted in order to gain additional knowledge on this topic. The interviews were audio recorded, transcribed, and then analyzed by the researcher. Participants' first hand experiences contributed to a better understanding of effective ways to address this cycle. The results consisted of the following themes: childhood substance abuse, environmental influence, Child Protective Services involvement, problem recognition, structure, counseling, relationships, higher power, positive attitude and hope for the future. Contributions to social work practice are discussed along with recommendations for future research. Findings were given to California State University, San Bernardino and were provided to the drug rehabilitation center used in this study.

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## CHAPTER ONE

### ASSESSMENT

#### Introduction

Chapter one addresses the Assessment stage of this study. The research focus is on substance abuse cycle prevention and interventions for children of substance abusers. This chapter provides a rationale for the use of the post positivism paradigm for this research project. Next, a literature review is discussed along with the theoretical orientation used. Finally, the potential contributions to micro and macro social work practice are explored. The chapter concludes with a summary.

#### Research Focus and Question

The research focus is on substance abuse cycle prevention and interventions for children of substance abusers. The following question is addressed: How do we intervene and prevent children of substance abusers from continuing the cycle of substance abuse? The answer to this question was found by conducting interviews of individuals with a history of generational substance abuse. The interviews consisted of questions regarding effective and non-effective coping strategies and techniques and identifying themes throughout the study of each participant.

## Paradigm and Rationale for Chosen Paradigm

The post positivism paradigm was used to conduct research for this study. This paradigm implements qualitative data collection and analysis and allows for numerous strategies and techniques to be discovered when data is gathered through interviews. This resulted in the acquisition of knowledge about various effective and ineffective strategies, interventions and/or prevention techniques used by the participants. This is appropriate because it provides an opportunity to build new theory and themes based on the qualitative data. This paradigm assumes that reality can only be found in a naturalistic setting and that the researcher must try to stay neutral throughout the study. This assumption makes post-positivism the most appropriate approach to this study because it opens doors to more effective options of obtaining natural data. This approach addresses the research question because it allows intervention and prevention strategies to be discovered inevitably because infinite options may arise.

## Literature Review

This literature review discusses the impact of parental substance abuse on children. Current interventions for this population are then addressed. Finally, the need for further research on interventions for the substance abuse cycle in families is discussed.

## Impact of Parental Substance Abuse

Current research emphasizes the impact of substance abusing parents on the likelihood of their children also becoming substance abusers. Bailey, et al. (2006) state that the result of parental substance use is commonly substance use of the next generation, and this is one of the most studied areas. This seems to be a cycle that many researchers try to understand and intervene with. Kumpter (1999) and Porter, et al. (2009) also agree that simply being a child of substance abusing parents increases the risk of also becoming a substance abuser. Another study that was a bit different, found that if the parent began abusing substances at an earlier age, the likelihood of the child doing the same increases (Thornberry, Krohn, & Freeman-Gallant, 2006).

In addition to that common finding, it has also been found that children of substance abusers are likely to have emotional disorders such as emotional withdrawal, somatic complaints, anxiety and depression (Leventhal, Pettit, & Lewinsohn, 2011). In relation to these resulting issues, it has been found that these families are missing parental disapproval, and this serves as a guidance factor for the children and tends to assist with the prevention of substance abuse (Kumpter, 1999). Simply having a parent express that he/she is against substance use and it being made clear to the child that it is unacceptable can assist with its prevention. In addition to this finding, the influence of parents demonstrating approval of marijuana use increases the likelihood that the

children will also engage in this behavior (Thornberry, Krohn, & Freeman-Gallant, 2006).

### Current Intervention Practices

There are many intervention and prevention plans used today to try to address the issue of generational substance abuse. Kumpter (1999) states that many programs focus on families or are school based. School programs are probably developed once the issue becomes evident with the child at school. It is likely to be quite beneficial when the school is able to intervene because otherwise, the problem may just continue to go unaddressed. It also seems that many researchers believe that improving parenting practices with these families would be best because many of the parents lack those skills (Kumpter, 1999). Furthermore, general interventions have been shown to be more successful than specific interventions (Bailey et al., 2006).

### Intervention Need

When it comes to actual children, the most effective influence on this issue is to reach the parents as soon as possible. Porter et al. (2009) believe that educating the parents is absolutely necessary. This aspect will serve as a protective factor for these children. Bailey et al. (2006) state that protective factors need to be the focus as well as decreasing risk factors.

There is much to consider during the development of actual intervention plans. It is very important that there is an understanding of the need to discontinue the cycle of substance abuse with this population (Bailey et al.,

2006). In order to do just that, the measures need to be gender, developmentally and culturally appropriate (Kumpter, 1999). This is crucial because the interventions will assist many different populations and need to be widely applicable. Porter et al. (2009) add that rehabilitation programs need to be cost efficient, effective and client centered. Much planning needs to go into creating successful interventions, and that is why it is necessary to further study current strategies that people use who are actually a part of this cycle.

In conclusion, this supporting literature shows that it is common for the next generation in a family of substance abusers to also abuse substances. Many emotional issues result and it is crucial that the intervention takes place for the parent as soon as possible. This is important for the research focus because the need for intervention strategies and techniques is essential to the prevention of generational substance abuse.

### Theoretical Orientation

The theoretical orientation used in this study is the Life Model. Turner (2011) states that there are two conceptual mechanisms of the Life Model: degree of choice and problems in living. This relates to the research focus because those are two important aspects of discovering ways to help children and adults involved in the substance abusing cycle. The intent is to reveal strategies, prevention techniques, etc. that will aid these individuals in overcoming the cycle of substance abuse. Turner (2011) also states that the function of the Life Model is to improve the level of fit between someone's

needs and environmental resources. In the context of this study, the need is to prevent the individual from falling into the substance abusing cycle and the environment would be the exposure to that lifestyle, the availability of substances and the culture.

#### Potential Contribution of Study to Micro and Macro Social Work Practice

This research project has the potential to contribute to micro social work practice by acquiring knowledge about current and effective strategies, techniques, coping, prevention and interventions for people who are a part of generational substance abuse. This will potentially result in more individuals gaining the necessary skills to break the cycle and stay away from substance abuse. This study also has the potential to contribute to macro social work practice because curriculum could be created based on the effective results discovered from people who have experienced effective strategies first hand. This could become mainstream practice used by agencies all over the community, state or even nation.

#### Summary

Chapter one addressed the Assessment stage of this study. The research focus is on substance abuse cycle intervention for children of substance abusers. It also provided rationale for the use of the post positivism paradigm. Relative literature was discussed along with the theoretical

orientation used. Finally, the potential contributions to micro and macro social work practice were examined.

## CHAPTER TWO

### ENGAGEMENT

#### Introduction

Chapter two addresses the Engagement stage of this study. First it addresses the study site, then it discusses engagement strategies such as the development of the research focus and engaging gatekeepers and participants. Next it addresses self-preparation and possible diversity, ethical and political issues. Finally, it explains the role of technology in this study. This chapter concludes with a summary.

#### Study Site

The study site consisted of an inpatient rehabilitation center in Southern California. The center used was Cedar House Life Change Center in Bloomington, CA. This site administers programs such as seven-day detoxification, residential treatment, outpatient treatment, treatment for mothers, family groups, after care and driving under the influence programs. This site provided a variety of participants who happen to be a part of their own substance abusing cycle and are in the process of breaking that cycle. The demographics of participants consisted of lower socioeconomic status, both male and female, ages 18-55 years old, Associate's Degree or below, majority unemployed, and majority single individuals. See Appendix B for demographic information. This allowed for a wealth of information on all of

their experiences and successes, along with failures and hard times related to breaking this cycle.

### Engagement Strategies for Each Stage of Study

First off, both the gatekeepers and participants were engaged by having a detailed explanation of this study. They were told about the potential benefits of its implementation and offered referrals for other services if needed. Although all referrals were declined, referrals consisted of counseling options, housing programs, local Transitional Assistance Departments, parenting classes and legal services. After a clear understanding was established, both groups were engaged in assisting with the further development of the research focus by providing input and ideas.

### Self-Preparation

One of the most important aspects of self-preparation was reviewing the current literature on the topic being explored. This allowed the researcher to be up to date on current practices and knowledge in this field. Another important aspect crucial to being prepared was being proactive and brainstorming about possible issues that could have arisen during this stage. The researcher had to be aware of the participants' potential discomfort and anxiety by offering the option to not answer questions. Some sensitivity interviewing skills were examined to prepare for sensitive issues that may arise with the topic of substance abusing families. Current practices were

examined to understand how to effectively interview while being sensitive at the same time.

### Diversity Issues

There is always the possibility of diversity issues developing when addressing a sensitive topic such as the substance abusing cycle that recurs in some families. There may be participants who are not comfortable with a young researcher who is also female, Hispanic and a college student. To address such issues, self-disclosure was used as necessary in order to relate and establish/maintain rapport. Topics ranged from the researcher also being a part of the substance abuse cycle, to empathy and praise for being in treatment. This self-disclosure assisted with relationship building. Informal language was used to increase comfort levels when it came to diversity issues between the researcher and participant. When it came to potential issues regarding race, ethnicity, gender, age, religion, ability, or sexual orientation, the researcher planned to address them by asking the participant his/her concerns and expressing empathy throughout the discussion. Fortunately, such issues did not arise.

### Ethical Issues

Being proactive to try to avoid ethical issues is also essential. First, the researcher submitted the research project for a Human Subjects review through the Institutional Review Board for approval (see Appendix A). Next, an

informed consent form was provided and explained to each participant, followed by a required signature. Topics included: the purpose of the project, confidentiality rights and limitations, length of interview and the option to terminate at any time (See Appendix C). The researcher emphasized that each participant will remain anonymous in this study and all names will be destroyed. An issue that could have arisen on behalf of the researcher is voicing her own moral values during the interview and possibly voicing any personal issue based on her biases. To prevent this, the researcher stayed aware of all biases and stayed mindful of the population at hand.

#### Political Issues

Potential political issues in this study are quite generic. First the relationship between the researcher and participant may have issues based on the authority that the researcher may hold. Again, this issue did not occur. Second, some data may be missing from the research because it is probable that there are families within the substance abusing cycle who are not in rehabilitation/recovery centers. And third, administrators at the center may have felt threatened by this research because it could discover negative findings. They may have wanted to know that the data will not be used against their agencies. The researcher reassured each administrator that all data could be used to enrich substance abuse rehabilitation programs. Fortunately, none of these issues occurred.

## The Role of Technology in Engagement

The researcher used email with the Cedar House Life Change Center Program Director throughout the entire study, in order to stay in contact regarding recruitment and scheduling. This method allowed follow up to be much more efficient and convenient. An audio recorder was utilized to record the interviews as well. This allowed for efficiency and uninterrupted genuine engagement throughout the interview.

## Summary

Chapter two addressed the Engagement stage of this study. First it addressed the study site, and then it discussed engagement strategies such as the development of the research focus and engaging gatekeepers and participants. Next it addressed self-preparation and possible diversity, ethical and political issues. Finally, it explained the role of technology in this stage.

## CHAPTER THREE

### METHODS

#### Introduction

Chapter three discusses the Implementation stage of this study. First the study participants and selection of participants are discussed. Next, the data gathering, phases of data collection, data recording and data analysis are addressed. This chapter concludes with a summary.

#### Study Participants

Study participants consisted of residents of Cedar House Life Change Center. Therefore, the unit of analysis was individuals. The most important criteria that must be met by participants is that they must have a substance abusing parent or child, and have been a substance abuser themselves. Information was gathered about other family members of the participants to better understand the strategies and techniques used in their own struggles against substance abuse. Both male and females qualified for this study, along with the ages of 18-65 years old. Having such a wide variety of participants assisted in the acquisition of more knowledge on effective coping strategies, techniques and interventions.

#### Selection of Participants

Criterion sampling was used for this research project. This allowed the researcher to only interview participants who specifically met the criteria

needed for this study. Participants were required to be in a family where there are at least two generations of substance abuse, and one of those generations included the participant. This sampling will provide the most accurate and complete data related to the research focus because it will allow the criteria to be met (Morris, 2014). Case managers at the center identified participants who qualified for the study, set appointments and then the Program Director and the researcher corresponded on a weekly basis.

### Data Gathering

Data for this study was gathered qualitatively. Individual interviews were conducted with all participants. A literature review took place as part of preparation for the interviews. Open-ended questions were set prior to the interview to allow for exploration of any necessary topics that may arise (see Appendix D). The interviews were well planned and versatile by consisting of descriptive and structured questions. The structure of the interviews began with engaging questions to build rapport, it then developed into research focus questions, and it ended with some throw away questions to cool down the session. The responses to the questions guided the interview and assisted with the progress of the questions. Interviews took place in a private and convenient conference room provided by the rehabilitation center at times convenient for each participant, lasting approximately six to fifty-eight minutes each. After each interview, the researcher wrote in the narrative account

journal about all relative occurrences, and then in the reflective journal about all reactions and feelings during the interview.

### Phases of Data Collection

The first phase was the filtering of participants by the case managers to see if they met the criteria for this research project. The next phase was to arrange interviews with qualifying participants. Data collection was an ongoing process throughout the interview. First, participants were engaged by introductions and questions meant to build rapport. Next, questions were asked about the research focus in order to gather information about the techniques and strategies the participant has experienced. The conversation was guided by such questions but at the same time, the participant led the way with his/her responses. After all questions were addressed, the researcher asked some throw away questions to cool down the interview and terminate the interview session. The final phase was to write in both the narrative and reflective journals immediately after each interview.

### Data Recording

The researcher asked each participant individually for permission to use an audio recorder during the interview. All fourteen participants consented to do so. If the participant wished to not be recorded, then minimal notes would have been taken throughout the interview as questions were answered. Audio recording consent was noted on the informed consent form (see Appendix C).

Emphasis was placed on data accuracy. Upon permission, the audio recorder did all of the initial work. Immediately after the interview, the researcher wrote in the narrative account journal to make note of the entire interview and all relative occurrences. This consisted of answers to all questions, any red flags, and additional information that was presented. The final step was to then write in the reflective journal about reactions and feelings that occurred during the interview.

### Data Analysis Procedures

The data for this study was analyzed qualitatively using a bottom up approach. Transcripts of interviews were analyzed following each interview. First, open coding was utilized to identify themes and categories within the data. Then, axial coding was used to organize those themes and categories. Selective coding allowed the creation of tables to demonstrate these themes. A conditional matrix assisted with the organization of data in relation to both micro and macro social work practice. Finally, the researcher utilized Atlas-ti software throughout this process to further analyze the data to identify any additional relationships and to further support the relationships that had already been identified.

### Summary

Chapter three discussed the Implementation stage of this study. First the study participants and selection of participants were discussed. Lastly, the

data gathering, phases of data collection, data recording and data analysis were addressed.

## CHAPTER FOUR

### EVALUATION

#### Introduction

This chapter addresses the findings of this qualitative study. First, the findings are presented based on the audio recordings that were transcribed to allow the researcher to analyze the data, and develop themes and categories amongst the findings. Next, data interpretation is provided. Then implications of findings for micro and macro practice are discussed. This chapter concludes with a summary.

#### Data Analysis

##### Childhood Substance Abuse

A critical theme that was identified early in the study was that of childhood substance abuse. Twelve of the fourteen participants shared that they had abused substances before the age of eighteen. Below is a table of direct quotes about childhood substance abuse.

Table 1. Direct Quotes about Childhood Substance Abuse

Participant #	Direct Quotes about Childhood Substance Abuse
2	“My substance abuse started when I was 15, umm, I was running away from foster care and I was in the streets in San Bernardino.” (February, 2016)
8	“... at a young age that’s when I had my first drink. Around 8 or so just being exposed to it so much and uhh... that’s how the disease affected me. And as far as... that’s when I started. And then as an early teen, 12, 13, you know gradually increased to the point where at the age of 15 I was drinking fifths on the daily.” (February, 2016)
10	“I’ve been using heroin since I was 9.” (February, 2016)
12	“Umm the first time I drank was 11. But I started drinking more and more about 14... 15.” (February, 2016)

### Environmental Influence

Another common theme identified during interviews was the role of environmental influences. Simply being exposed to substance abuse opportunities, caregivers who abuse substances and being in a variety of settings have been found to increase the likelihood of substance abuse among participants. Below is a table of direct quotes about environmental influence.

Table 2. Direct Quotes about Environmental Influence

Participant #	Direct Quotes about Environmental Influence
2	“My family really kind of brings me down. This past year my family would tell me that you come around thinking that you’re better than everybody.” (February, 2016)
8	“Yeah I had a year and a half of sobriety and I was working my program, and I moved back into a toxic environment.” (February, 2016)
12	“Umm well I was... I was with the first baby’s dad and I... I went to rehab but he... I was also pregnant, so while I was in rehab, he was trying to get things ready for the baby and so he wasn’t able to use that time for recovery, he just quit and then shortly after I got out, he would, about two months after I got out, he started bringing it into the house, so... it’s like your environment, basically.” (February, 2016)
13	“... my thing has always been drinking for... off and on for thirty years. I went to the marine corp in 1984 and that’s all they do is drink.” (February, 2016)

Child Protective Services Involvement

Throughout the interviews, six participants stated that the department of Child Protective Services had been involved in their families over the course of their substance abuse. Three participants expressed that such involvement pushed them to seek help for their addiction. The table below lists direct quotes about Child Protective Services involvement.

Table 3. Direct Quotes about Child Protective Services Involvement

Participant #	Direct Quotes about Child Protective Services Involvement
3	"I go to trauma because I was sexually molested, sexually abused, umm physically, emotionally, uhh in and out of foster homes and drug abuse since I was 13 so I have a lot of trauma, you know." (February, 2016)
4	"... uhh she was only one week... two weeks with foster. But then in that week, two weeks I saw her twice. And the two times she was happy. She had no problem living with someone else than me and her mother." (February, 2016)
10	"Yeah and then the therapist trying to help me fax all these papers to my CFS worker, to everybody who's involved in my case with my kids." (February, 2016)
11	"My kids, because my daughter got taken from me so, that's the first time, that's what did it." (February, 2016)

### Problem Recognition

Many of the participants recognized that they had a problem with substance abuse and needed to seek recovery. Ten out of the fourteen participants identified a point in their addiction when they were ready to seek help. The table below lists direct quotes about problem recognition.

Table 4. Direct Quotes about Problem Recognition

Participant #	Direct Quotes about Problem Recognition
1	<p>“...last September ended up in the hospital with a uhh, they said I had a drug induced heart attack, which luckily for me was pretty mild and they admitted me for a few days and uhh, then later on I ended up you know, breaking my heel, but there’s a little bit more to the story to that, I had to, I was on probation and I had been up standing and I made a really quick decision trying to get away to jump into the wash and I ended up uhh, fracturing my heal in three different spots, but I think, I don’t think it was so much, uhh people supporting me and trying to push me to get into a program as it was I was sick and tired of the consequences and that’s what really... it was more self-reflection and saying I got to stop this you know, I’m 33 and if it continues on, it’ll just be 40, 50, even if I’m lucky enough to see that, those years... uhh that it’s just going to keep continuing on.” (February, 2016)</p>
6	<p>“...and working these twelve steps with other people that need... that need it but also want it, you know because I needed it for a long time, I just didn’t want it.” (February, 2016)</p>
7	<p>“My mom was happy when she found out because she didn’t know I was going and I told her the day, when I got here, I was like I’m checking myself into treatment, I’m done, I’m over it. And I’ve quit off and on, but this time I’m just done. I was just tired of having everything, having the shakes, having to drink every day.” (February, 2016)</p>
10	<p>“Yeah, I wasn’t and now I can say I am now because of umm... you know my overdose and it’s like I told my case manager if I walk out of here I probably won’t ever come back.” (February, 2016)</p>

Structure

Five participants emphasized the importance of structure and responsibility in their recovery. Three participants referenced chores as a major part of their growth. Below is a table of direct quotes about structure.

Table 5. Direct Quotes about Structure

Participant #	Direct Quotes about Structure
1	“... even during the simplest times, during chore time, it really helps me... just be responsible again, be responsible for myself, my bed area, uhh asking other people if they need help, uhh so really everything is really structured in a way where you’re going to benefit from it and I kind of... uhh it depends on your outlook of things but you know, if when you get to a point of complete desperation like myself, you’re willing to do whatever it takes.” (February, 2016)
4	“And like right now you know, they give me the... I’m in charge of like the little warehouse we have for cleaning stuff, so I have things to do here, you know, like yeah. It’s something that I never had, you know, it was like I was irresponsible my whole life and now I have to wake up and do something and it’s, you know.” (February, 2016)
5	“I’m dedicated to working the twelve steps you know, the twelve steps are going to be my guidance or my plan to, you know overcome my addiction.” (February, 2016)
13	“All of them, they pretty much want everybody to you know do what they have to do. And like it’s doing chores and umm... Stuff like that.” (February, 2016)

Counseling

Ten participants expressed that a variety of counseling activities were supportive throughout their recovery. The types of activities varied from one-on-one counseling, support groups, just talking to one another and writing therapeutically. Below is a list of direct quotes about counseling.

Table 6. Direct Quotes about Counseling

Participant #	Direct Quotes about Counseling
1	“Umm you know it’s uhh, whenever there’s a group, I try to participate as much as I can, I try to be honest and open as much as I can and that’s really helped me with just staying here and expressing myself and my emotions because the last 16 days have just been a roller coaster ride of emotions and I know if I don’t express myself then I’m just going to end up back out there again and cause some more damage to myself and other people too.” (February, 2016)
4	“You see probably one thing that works, the one-on-one works, counseling.” (February, 2016)
9	“...a lot of counseling and a lot of opening up. Yes it helps me.” (February, 2016)
14	“Yeah, one-on-one’s are better. Because you get to talk to that person personally and they get to know you personally.” (February, 2016)

Relationships in Recovery

The importance of relationships was the most common theme identified during this study. Four participants expressed that their substance abuse had a negative impact on their relationships. Twelve of the participants identified relationships as a major strength of their successful recovery thus far. The table below lists direct quotes about relationships.

Table 7. Direct Quotes about Relationships

Participant #	Direct Quotes about Relationships
2	“I really believe it’s the people around me, the residents as well, umm they’re a lot more older than me, they’ve been through some things that I haven’t been through. So they can learn from me and I can learn from them, I thought my situation was one of the worst until I hear other people’s testimonies.” (February, 2016)
8	“Well what works for me right now is the fellowship, definitely being able to be open and being honest and just having trust, it’s very important. It’s the foundation of a man. You know and I want to be able to continue that and the fellowship that I gained here with my brothers, we’re all on the same page from the counselors, you know our case managers, our you know... umm they’re instilling in us how important that is.” (February, 2016)
10	“But I love reaching everybody in this place for reals. Yeah. And I’ve never had so much love from nobody.” (February, 2016)
12	“Umm that I’m with people that feel exactly like I do, I’m not alone. Connection and support.” (February, 2016)

Higher Power

Another very common theme in this study was the utilization of a higher power in recovery and life in general. Nine participants recognized that a higher power contributed to their choices and successes in recovery. Three participants gave God credit for their recovery. Below is a table of direct quotes about a higher power.

Table 8. Direct Quotes about a Higher Power

Participant #	Direct Quotes about a Higher Power
3	“With my... relationship with Jesus Christ is getting better, umm I actually was in a Christian program and the pastor had a hearty sermon and he told me that I have a pastor calling so I just talked to a guy last night, one of my peers and we’re going to get together and have bible studies.” (February, 2016)
4	“I don’t want to like, especially right now, I’m pushing for Jesus Christ and I know that this is all... And I’m also tired of seeing.... God has something for us out there. God has my whole life all the time, I was tried to be killed three times and they didn’t kill me.” (February, 2016)
10	“Well first I would say my higher power, you know what I mean? He comes first.” (February, 2016)
11	“But when I got sober and came in here and everything it just umm, I think it was God, I don’t know.” (February, 2016)

Positive Attitude

All fourteen participants demonstrated a positive attitude during some point in their interviews. The positive attitude tended to be a result of their success in recovery. All participants accepted their powerlessness over their addictions and were able to think positively. Below is a table of direct quotes about positive attitude.

Table 9. Direct Quotes about Positive Attitude

Participant #	Direct Quotes About Positive Attitude
1	"I feel good, yeah I feel strong, I feel focused, uhh I feel content. Uhh the last day or two have been hard, but I feel good." (February, 2016)
4	"I've seen a lot of love and compassion you know, whenever someone comes and they don't have clothes and everyone gets together and gives them something from themselves. It's like a different way to look at it, different struggles." (February, 2016)
5	"I haven't lost anybody yet. And I've been doing this for seven years, you know and it feels good to actually be able to show my family that, hey you guys didn't waste your time by supporting me, you guys made the right decisions by helping me through this." (February, 2016)
8	"Umm another strength is being open minded, remaining keeps of hope. So I can learn about my disease or I can learn about the ups and downs, the struggles, the blocks, so I know how to overcome them." (February, 2016)

### Hope for the Future

Lastly, twelve participants focused on their hope for the future when asked about their future plans after recovery. Four participants focused on career goals such as school or finding a job. Eight participants focused on being with their families. Below is a table with direct quotes about hope for the future.

Table 10. Direct Quotes about Hope for the Future

Participant #	Direct Quotes About Hope for the Future
6	“Day by day I’m regaining some hope. I was really uhh... let’s see... 90 days ago, I just wanted to stab somebody, that way I can just be done with being out here, being disappointed, being disappointing to other people. I was seriously looking for victims and someone talked me out of it. No, no, no. That’s a permanent solution to a temporary problem. And I said alright, you know I got into this program.” (February, 2016)
8	“And uhh but I mean I see my life being very, very easy. Versus very hard, life is as hard as you make it, I want an easy life and that means a clean life to me, it means for me to be able to wake up one day and be grateful for what I have around. You know I want a life of serenity.” (February, 2016)
9	“And I see myself doing it with my son and my daughter, get married with my umm son’s dad and still go to NA meetings, I would like to do that, to just not be in that life any more, a hard life, and drag my children through it.” (February, 2016)
12	“I have a lot of life left but I also have a lot of life left to use and that worries me but I’ve seen... I’ve seen a couple people in meetings that are my age and it gives me hope.”(February, 2016)

### Data Interpretation

The purpose of this study was to explore substance abuse cycle interventions for children of substance abusers. The study revealed a variety of themes in relation to generational substance abuse and recovery.

The majority of participants identified themselves as childhood substance abusers. This finding supports a common conclusion that children of substance abusers are more likely to also abuse substances, as consistent with Bailey et al. (2006). It was common for participants to have been exposed

to their parent's substance abuse. It is likely that this modeled behavior results in curiosity about substance use and the desire for inclusion and acceptance within the family. This behavior may have also been normalized and not frowned upon in these families.

In relation to childhood substance abuse, environmental influence on substance abuse was also a common finding amongst participants. It is widely known in the field of social work that environment plays a crucial role in one's choices in life. These findings are consistent with that of Fowler et al. (2006) in stating that environment is the most vital in the beginning of substance use because it can open doors since its first exposure. Many participants even expressed the choice of removing themselves from certain environments in order to seek/maintain sobriety due to the strong power that their environments had over them.

Child Protective Services involvement was another common finding within this study. Some participants expressed that they were in the foster care system as children and some expressed that their own children were in the foster care system because of their choices regarding substance abuse. Some participants reported that this experience was traumatizing enough to seek recovery.

It was often identified that people who are substance abusers need to be able to recognize the actual problem in order to successfully go through treatment. Often times people seek help because of other reasons while not

being ready to actually become sober. This usually results in relapsing and a sense of failure. Self-will, a desire for change and an open mind play a large role in successful recovery. Therefore, if a person does not truly recognize the problem, overcoming the substance abuse is unlikely.

The structure and clear-cut responsibilities that inpatient treatment provides has shown to effectively help participants move forward in treatment. This is consistent with Kumpfer (1999) in stating that it is important to set rules and expectations. Several participants expressed that such responsibilities allow feelings of significance and usefulness. This also provides some normalcy to the lives of participants as they adjust to being a more productive member of society. As a result, it becomes more likely that participants will persevere through treatment.

A variety of forms of counseling presented themselves throughout this study. Participants expressed that one-on-one counseling, support groups, therapeutic writing and simple self-expression were all helpful during the recovery process. These are likely ways of support that many participants are not used to, and they effectively help them process emotions about past experiences and decisions regarding their substance abuse and other areas of life such as family, relationships, work, homelessness, incarceration, etc. It is also likely that such support will help participants progress through recovery due to a sense of closure and acceptance of their pasts.

It would be expected that relationships are a vital area of support when it comes to intervening with substance abusers. Some participants expressed that their substance abuse had a negative impact on relationships when they were using. Most participants expressed that relationships played an extremely beneficial role in their recovery. Being able to relate to one another and validate each other's feelings and experiences allows for growth and progress through the recovery process. This is consistent with Boisevert et al. (2008) in stating that peer support is significant for recovery in the future. Such relationships provide much empathy and encouragement, as well as give participants hope and strength for the future. These relationships also cater to a new environment for participants because these friends are sober just like participants and it can be very easy to fall back on old friends who are involved in substance abuse.

All participants were utilizing the Alcoholics Anonymous (AA) 12 Steps Model of recovery during their inpatient treatment. Therefore, it was not surprising that a common theme in this study was that of a higher power. This aligns with the findings of Dermatis and Galanter (2016) in stating that the 12 steps in AA are worked through successfully when a person achieves his/her own understanding of God. Believing in a higher power contributes to increased strength and perseverance in overcoming substance abuse. This is absolutely beneficial to this population because it creates a strong sense of hope and strength.

Cognitive Behavioral Theory believes that if you alter the way you think about things, you will alter the way you feel about them as a result (Turner, 2011). This is consistent with the findings about the role of positive attitude in this study. Simply having a positive outlook on one's situation will likely increase the probability of successful recovery. Open-mindedness and optimism were also found to go hand in hand with having a positive attitude.

Lastly, hope for the future was another common finding in this study. This is likely a result of the above mentioned themes because they guide the participant to start focusing on the successful future ahead of them. This allows participants to establish goals for themselves and to start seeing the light at the end of the tunnel. This aligns with Law and Guo (2012) in stating that one effective technique for treating substance abuse is to recognize and increase hope. This is just another tool to be aware of when treating this population because it aids participants' progress towards and maintenance of sobriety.

#### Implications of Findings for Micro and Macro Practice

This study will definitely provide social workers with a clearer understanding of individuals facing the cycle of substance abuse within their families. Being aware of the themes discovered such as childhood substance abuse, environmental influence, Child Protective Services involvement, problem recognition, structure, counseling, relationships, higher power, positive attitude and hope for the future will aid social workers in a micro

practice setting when planning for treatment of this population. This information can be utilized when planning interventions and can be applied in a preventive manner when working with at risk populations, especially with children of substance abusing parents.

The findings of this study could also be used in prevention and intervention substance abuse program development. Tools could be developed that aid accountability and problem recognition, highly structured programs could be created for children of substance abusers, and counseling services can be part of a regular curriculum for children who have been removed by Child Protective Services due to substance abusing parents. Knowing how important relationships are in the treatment of substance abuse, mentorship programs could be put in place for children of substance abusing parents as well. Cognitive Behavioral Therapy could also be a typical component of programs due to the discovery of the power of a positive attitude in recovery. All of this information can also be utilized by social workers to advocate for more resources, programs and policies on behalf of this population.

The researcher of this study recommends that future research consist of interviews of recovery center administrators, program managers, and successful and unsuccessful family members (especially parents) in the cycle of substance abuse. Such interviews would unveil additional information on their perceived effective intervention and prevention strategies for people

breaking the cycle of substance abuse in their families. Interviewing people from a variety of recovery centers will provide a wealth of new information that will continue to be beneficial to both micro and macro social work practice in relation to treating individuals breaking the cycle of substance abuse in their families. It is also recommended that additional questions be asked about topics such as participants opinions on effective preventive measures, what participants believe would be helpful to someone in their situation and the participants beliefs on how their parents substance abuse affected their own situations.

### Summary

Chapter four explored the findings of this study. First, the findings were presented based on the audio recordings that were transcribed to allow the researcher to analyze the data, and develop themes and categories amongst the findings. Next, data interpretation was provided. Then implications of findings for micro and macro practice were discussed.

## CHAPTER FIVE

### TERMINATION AND FOLLOW UP

#### Introduction

This study explored a variety of ways to intervene and prevent children of substance abusers from continuing the cycle of substance abuse. In this chapter, termination of the study and communicating findings to the study site and participants are discussed. Next, the ongoing relationships with participants are addressed. Finally, a dissemination plan is provided and the chapter concludes with a summary.

#### Termination of Study

A debriefing statement was provided to all participants after each interview, thanking them for their time and providing contact information if they have further questions (see Appendix E). To show thanks for participation, a \$10 gift card was given to each participant. To assist with termination, the researcher provided contact information to all participants and to Cedar House Life Change Center. The researcher also inquired with all participants if they had the need for other social services or resources. All social services and resources were declined most likely because the participants already had assigned case managers on site.

### Communicating Findings to Study Site and Study Participants

A research presentation was offered to the participating center so everyone could obtain a complete understanding of the research project. The research presentation was respectfully declined but the Program Director of the center agreed to receive copies of the final report for both the center staff and the study participants. Copies of the final report were provided for all participants and staff at the center.

### Ongoing Relationship with Study Participants

Contact information of the researcher was made available to all participants and centers. This allowed for any questions or further inquiries about the study. The researcher will also reach out to the center and plan a three month follow up meeting with participants to see if the participants have any needs the researcher could assist with.

### Dissemination Plan

The findings of this study were provided to California State University, San Bernardino and as a poster presentation at the School of Social Work's annual poster day so they can contribute to current social work literature. Disseminating this information to both the university and the center will increase the likelihood of it being used in the future as evidence for social work practice.

## Summary

This study explored a variety of ways to intervene and prevent children of substance abusers from continuing the cycle of substance abuse. In this chapter, termination of the study and communicating findings to the study site and participants were discussed. Next, the ongoing relationship with participants were addressed. Finally, a dissemination plan was provided.

APPENDIX A  
INSTITUTIONAL REVIEW BOARD APPROVAL

**CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO**  
**SCHOOL OF SOCIAL WORK**  
***Institutional Review Board Sub-Committee***

Researcher(s) Charleena Chagoya  
Proposal Title Substance Abuse Cycle Intervention and Prevention  
for Children of Substance Abusers  
# SW1569

Your proposal has been reviewed by the School of Social Work Sub-Committee of the Institutional Review Board. The decisions and advice of those faculty are given below.

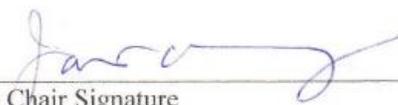
-----  
Proposal is:

- approved  
 to be resubmitted with revisions listed below  
 to be forwarded to the campus IRB for review

Revisions that must be made before proposal can be approved:

- faculty signature missing  
 missing informed consent  debriefing statement  
 revisions needed in informed consent  debriefing  
 data collection instruments missing  
 agency approval letter missing  
 CITI missing  
 revisions in design needed (specified below)

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Committee Chair Signature  
Date 1/12/2016

Distribution: White-Coordinator; Yellow-Supervisor; Pink-Student

## INFORMED CONSENT

### **Substance Abuse Cycle Intervention and Prevention for Children of Substance Abusers**

Before you give your consent, please read through this entire document and sign and date the bottom of the page.

The study in which you are being asked to participate is designed to investigate intervention and prevention strategies of individuals who are a part of generational substance abuse. You are being asked to participate because you are currently participating in outpatient drug rehabilitation services and have identified yourself as being a part of generational substance abuse. This study is being conducted by a graduate student, Charleena Sharon Chagoya under the supervision of Dr. Zoila Gordon, LCSW, PhD, California State University, San Bernardino. It has been approved by the School of Social Work subcommittee of the Institutional Review Board at California State University, San Bernardino.

**PURPOSE:** The purpose of this research is to explore intervention and prevention strategies and techniques that are effective and ineffective in families who experience generational substance abuse.

**DESCRIPTION:** Participants will be interviewed about the way they have handled the experience of being a part of a family with generational substance abuse. Information will be recorded on an audio device and/or taken in note form, based on the consent of the participant. Information from participants will help the researcher explore first-hand experiences to improve current substance abuse intervention and prevention practice. Referrals for outside services will be offered to those who need them, and the researcher will be available for all questions.

**PARTICIPATION:** Your participation is completely voluntary and you do not have to answer any questions you do not wish to answer. You may skip or not answer any questions and can freely withdraw from participation at any time.

**CONFIDENTIALITY:** All information pertaining to this research project will be kept strictly confidential. The researcher will be required to break confidentiality if the following takes place: if the participant communicates to the researcher that he/she plans to hurt him/herself, someone else, a child or an elderly person. Names will not be associated with any reported data. All data including recordings and written information about this project will be kept in a locked cabinet, and will be completely destroyed when the research project is complete.

**DURATION:** The initial screening phone call will take no longer than one minute. The scheduled interview will take thirty minutes to complete.

**RISKS:** Participating in this study exposes you to minimal risk, no more than you would encounter in your daily life. A possible foreseeable risk of this research project may be some discomfort when discussing past issues and struggles with substance abuse.

**BENEFITS:** There may not be any direct benefits to you for participating in this study. However, when the study is completed, participants will gain knowledge about substance abuse intervention and prevention strategies and techniques through the final report. These strategies and techniques

should help with preventing the continuation of generational substance abuse, and with intervening in existing generational substance abuse.

**ADDITIONAL COSTS/REIMBURSEMENTS:** There will be no cost to you for participating in this study. A small thank you gift card of \$10.00 will be given to you upon completion of the interview.

**AUDIO:** I understand that this research will be audio recorded Yes  or No .

**CONTACT:** If a participant has pertinent questions about the research and research participants' rights, or needs to contact someone in the event of a research-related injury to the participant, please contact the researcher, Charleena Chagoya at [cchagoya@csusb.edu](mailto:cchagoya@csusb.edu), or Dr. Zoila Gordon, LCSW, PhD, at (909) 537-7222 or [zgordon@csusb.edu](mailto:zgordon@csusb.edu).

**RESULTS:** The results of this study can be found at the Pfau Library on the California State University, San Bernardino campus, at 5500 University Parkway, San Bernardino, CA 92407.

**CONFIRMATION STATEMENT:**

I have read and understand the consent document and agree to participate in your study.

**SIGNATURE:**

Place an X mark here: \_\_\_\_\_ Date: \_\_\_\_\_

California State University, San Bernardino  
Social Work Institutional Review Board Sub-Committee  
APPROVED 1/12/2016 VOID AFTER 1/11/2017  
IRB# SW1569 CHAIR Jacora

APPENDIX B  
DEMOGRAPHIC INFORMATION

## DEMOGRAPHIC INFORMATION

Gender	Male		Female		Decline to Answer			
Number of Participants	10		4		0			
Age	18-25	26-35	36-45	46-55	Decline to Answer			
Number of Participants	4	4	4	2	0			
Marital Status	Single	Married	Divorced	Widowed	Decline to Answer			
Number of Participants	8	2	3	1	0			
Ethnicity	White	Black/ African American	Asian/ Pacific Islander	Hispanic/ Latino	Decline to Answer			
Number of Participants	8	2		4	0			
Education	No Schooling	Some high school, no diploma	High school graduate/ GED	Some college, no degree	Vocational training	Associate's degree	Decline to Answer	
Number of Participants	1	4	4	2	2	1	0	
Employment Status	Employed	Self- employed	Out of work and looking	Out of work but not looking	Homemaker	Student	Unable to work	Decline to Answer
Number of Participants	1	1	3	4	1	1	3	0
Income	Under \$10,000		\$30,000-39,999		Decline to Answer			
Number of Participants	9		1		4			

APPENDIX C  
INFORMED CONSENT

## INFORMED CONSENT

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**PURPOSE:** The purpose of this research is to explore intervention and prevention strategies and techniques that are effective and ineffective in families who experience generational substance abuse.

**DESCRIPTION:** Participants will be interviewed about the way they have handled the experience of being a part of a family with generational substance abuse. Information will be recorded on an audio device and/or taken in note form, based on the consent of the participant. Information from participants will help the researcher explore first-hand experiences to improve current substance abuse intervention and prevention practice. Referrals for outside services will be offered to those who need them, and the researcher will be available for all questions.

**PARTICIPATION:** Your participation is completely voluntary and you do not have to answer any questions you do not wish to answer. You may skip or not answer any questions and can freely withdraw from participation at any time.

**CONFIDENTIALITY:** All information pertaining to this research project will be kept strictly confidential. The researcher will be required to break confidentiality if the following takes place: if the participant communicates to the researcher that he/she plans to hurt him/herself, someone else, a child or an elderly person. Names will not be associated with any reported data. All data including recordings and written information about this project will be kept in a locked cabinet, and will be completely destroyed when the research project is complete.

**DURATION:** The initial screening phone call will take no longer than one minute. The scheduled interview will take thirty minutes to complete.

**RISKS:** Participating in this study exposes you to minimal risk, no more than you would encounter in your daily life. A possible foreseeable risk of this research project may be some discomfort when discussing past issues and struggles with substance abuse.

**BENEFITS:** There may not be any direct benefits to you for participating in this study. However, when the study is completed, participants will gain knowledge about substance abuse intervention and prevention strategies and techniques through the

final report. These strategies and techniques should help with preventing the continuation of generational substance abuse, and with intervening in existing generational substance abuse.

**ADDITIONAL COSTS/REIMBURSEMENTS:** There will be no cost to you for participating in this study. A small thank you gift card of \$10.00 will be given to you upon completion of the interview.

**AUDIO:** I understand that this research will be audio recorded Yes  or No .

**CONTACT:** If a participant has pertinent questions about the research and research participants' rights, or needs to contact someone in the event of a research-related injury to the participant, please contact the researcher, Charleena Chagoya at [cchagoya@csusb.edu](mailto:cchagoya@csusb.edu), or Dr. Zoila Gordon, LCSW, PhD, at (909) 537-7222 or [zgordon@csusb.edu](mailto:zgordon@csusb.edu).

**RESULTS:** The results of this study can be found at the Pfau Library on the California State University, San Bernardino campus, at 5500 University Parkway, San Bernardino, CA 92407.

**CONFIRMATION STATEMENT:**

I have read and understand the consent document and agree to participate in your study.

**SIGNATURE:**

Place an X mark here: \_\_\_\_\_ Date: \_\_\_\_\_

APPENDIX D  
INTERVIEW QUESTIONS

**Substance Abuse Cycle Intervention and Prevention for  
Children of Substance Abusers  
Interview Questions**

1. Please tell me about your substance abuse history, along with the substance abuse history of your family members.
2. What kind of techniques worked or did not work to stop the substance abuse for those family members?
3. What kind of support do you have in overcoming substance abuse?
4. What are some strengths that you feel have helped get you through these hard times?
5. What kind of techniques have you used that were not effective?
6. What kind of effective techniques have you discovered?
7. What kind of life do you envision when it comes to breaking this cycle?
8. How do you feel now that you are working towards sobriety?

Developed by Charleena Chagoya

APPENDIX E  
DEBRIEFING STATEMENT

**Study of Substance Abuse Cycle Intervention and Prevention  
for Children of Substance Abusers  
Debriefing Statement**

This study you have just completed was designed to investigate generational substance abuse intervention and prevention techniques and strategies. The information obtained will be used to better understand ways to intervene and prevent substance abusing cycles within families.

Thank you for your participation and for taking the time to contribute to this research project. If you have any questions about the study, please feel free to contact Professor Zoila Gordon at (909) 537-7222. If you would like to obtain a copy of the results of this study, please contact the Pfau Library at California State University, San Bernardino at the end of Spring Quarter of 2016.

## REFERENCES

- Bailey, J. A., Hill, K. G., Oesterle, S., & Hawkins, J. D. (2006). Linking substance use and problem behavior across three generations. *Journal of Abnormal Child Psychology*, *34*(3), 273-292.  
DOI: 10.1007/s10802-006-9033-z.
- Boisvert, R. A., Martin, L. M., Grosek, M., & Clarie, A. J. (2008). Effectiveness of a peer-support community in addiction recovery: Participation as intervention. *Occupational Therapy International*, *15*(4), 205-220.  
DOI: 10.1002/oti.257.
- Dermatis, H., & Galanter, M. (2016). The role of twelve-step-related spirituality in addiction recovery. *Journal of Religious Health*, *55*, 510-521.  
DOI: 10.1007/s10943-015-0019-4.
- Fowler, T., Lifford, K., Shelton, K., Rice, F., Thapar, A., Neale, M. C., McBride, A., & van den Bree, M. B. M. (2006). Exploring the relationships between genetic and environmental influences on initiation and progression of substance use. *Society for the Study of Addiction*, *101*, 413-422. DOI: 10.1111/j.1360-0443.2006.01694.x
- Kumpfer, K. L. (1999). Outcome measures of interventions in the study of children of substance-abusing parents. *American Academy of Pediatrics*, 1128-1144.
- Law, F. M., & Guo, G. J. (2012). Hope and recovery from substance abuse for female drug offenders in Taiwan. *International Journal of Offender Therapy and Comparative Criminology*, *56*(8), 1258-1282.  
DOI: 10.1177/0306624X11426418.
- Leventhal, A. M., Pettit, J. W., & Lewinsohn, P. M. (2011). Familial influence of substance use disorder on emotional disorder across three generations. *Psychiatry Research*, *185*, 402-407.  
DOI: 10.1016/j.psychres.2010.08.013.
- Morris, T. (2014). *Practice informed research methods for social workers*. San Bernardino, CA: Amazon.com.
- Porter, B., Porter, L., McCoy, V., Lima, M., Pryce, C., & Nunnewar, S. (2009). Methodological challenges in intervention studies. *Nurse Researcher*, *16*(2), 43-63.

Thornberry, T. P., Krohn, M. D., & Freeman-Gallant, A. (2006). Intergenerational roots of early onset substance use. *Journal of Drug Issues*, 36(1), 1-27. DOI: 10.1177/002204260603600101.

Turner, F. J. (2011). *Social work treatment: Interlocking theoretical approaches*. New York, NY: Oxford University Press.